

REC'D CLERK RECORDED 01/02/2013

MINUTES OF THE
SANTA FE COUNTY
HEALTH POLICY & PLANNING COMMISSION

December 7, 2012

Santa Fe, New Mexico

This regular meeting of the Santa Fe County Health Policy & Planning Commission (HPPC) was called to order by Vice Chair Kathleen Rowe at approximately 9:00 a.m. on the above-cited date at 2052 S. Galisteo, Suite B, Santa Fe, New Mexico.

Roll call indicated the presence of a quorum as follows:

Members Present:

Kathleen Rowe, Vice Chair
John Abrams
James Bond
Shirlee Davidson
George Gamble
Catherine Kinney

Member(s) Excused:

Judith Williams, Chair
Anna Vigil
Richard Rodriguez
Reena Szczepanski
Bertha Blanchard
[One vacancy – District 1]

Staff Present:

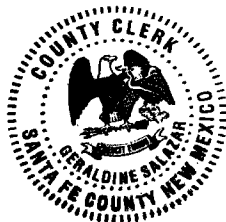
Patricia Boies, MCH/HPPC Coordinator
Rachel O'Connor, Health & Human Services Division Director

Others Present:

Terrie Rodriguez, City of Santa Fe
Sun W. Vega, Teambuilder Counseling Services
BJ Pfeiffer, Food Co-op advocate

III. INTRODUCTIONS

Those present introduced themselves.



COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

HEALTH POLICY & PLAN M
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I Hereby Certify That This Instrument Was Filed for
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Witness My Hand And Seal Of Office
Geraldine Salazar
Deputy _____ Count, Clerk, Santa Fe, NM

IV. APPROVAL OF AGENDA

Commissioner Bond moved approval of the agenda. His motion was seconded by Commissioner Davidson and passed by unanimous voice vote.

V. APPROVAL OF MINUTES: October 5, 2012 & November 12, 2012

A few corrections to the October minutes were offered and accepted.

Commissioner Bond moved approval of the October and November minutes. His motion was seconded by Commissioner Gamble and passed by unanimous voice vote.

To better track Commission issues, "Follow-up items" will be added to future agendas.

VI. MATTERS OF PUBLIC CONCERN - [See page 4]

VII. PRESENTATION

A. Health Priorities within the City of Santa Fe

Terrie Rodriguez, Director, Youth and Family Services Division of Santa Fe, referred to the executive summary of the *Healthy Lifestyles* report that was forwarded to the Commission. Following the development of the report in 2007 the City Council approved \$18 million for parks, trails, infrastructure, renovations and bike paths, and maps were developed to encourage outdoor recreation. In an effort to promote healthy living and in conjunction with the Department of Health, a Prescription Trails program has been developed – a physician writes a prescription for the patient to walk City trails that have been ranked for exertion.

The City promotes outdoor recreation with a series of conditioning-type classes. In 2011 there was an additional \$1.8 million allocated for renovation and development of skateboard parks along with a regional park in the Tierra Contenta area.

The farmers markets and the 2008 Food Policy Council are examples of the County and City working together.

The City has a GRT "3, 2, 1 Program" – 3 percent going to Children and Youth; 2 percent to Human Services and 1 percent to economic development. These contracts are for services the City wants to ensure continue in the community. The Human Services Committee allocates approximately \$500,000 to \$600,000 annually to ensure services remain available to residents without expanding staff. Program priorities are reviewed annually and currently are: healthy lifestyles, mental health services, access to food and shelter, low-cost comprehensive dental and medical services, crime and violence intervention, substance abuse treatment and prevention and new and innovative collaborative programs to meet health or human services needs. She reviewed the funding procedures, noting Children and Youth contracts have been extended to two years. She mentioned Cooking with Kids and Girls on the Run.

Ms. Rodriguez mentioned a law enforcement assisted diversion program started in Seattle to take low-level drug violators and divert them into other programs. The City Council established a task force, LEAD, to follow Seattle's efforts and develop, within a six-month

period, recommendations for long-term solutions for persons addicted to drugs and/or alcohol. The task force is expected to identify programs that are alternatives to incarceration, improve and fund the programs and increase the availability of pre- and post-incarceration retreatment resources. This task force is part of the Mayor's efforts to address burglary. She reviewed the composition of the task force and the subcommittees that depict cross disciplines. She was pleased that the law enforcement and legal communities were coming together to address this issue. There needs to be a new way to address individuals with low-level drug offenses. Heroin and opiates were specifically identified as the root causes for home burglaries.

The DOH is promoting dental health slating February as Dental Health Month. A small committee is being formed for this initiative and DOH has requested the HPPC's support. A discussion regarding fluoride ensued.

It was requested that Ms. Rodriguez forward a reminder to the Planning Commission to solicit a volunteer to serve on the State's Dental Health Committee.

Ms. Rodriguez said the Children and Youth Commission has worked with the schools to monitor BMI progress. There was consensus supporting the evaluation of the benefits of the programs. The proactive nature of the programs was lauded.

A question arose as to whether the City and County can better support each other's programs. Ms. Rodriguez noted that the City has funded Women's Health Services while the County provided the facility. She said she sees opportunities developing in the future.

Ms. O'Connor mentioned the Drug Take Back Initiative, the Food Policy Council, and Senior Services as examples of the two entities working collaboratively.

In an effort to keep the HPPC apprised of City programs. Commissioners Rowe and Davidson – who serve on the Human Services Committee – and Ms. O'Connor were requested to provide periodic reports of those activities. Ms. Rodriguez offered to appear before HPPC periodically as well.

Commissioner Davidson said she was impressed with the multiple levels of meal programs the City funds. Commissioner Rowe suggested isolating one day and determining how many meals were served.

Following the needs assessment it was recommended that the County and City agree on a simple dashboard of measures to track health and wellness and review them annually. Maslow's hierarchy was mentioned as a simple structure regarding measuring basic human needs with an easy metric. DOH and the schools were mentioned as providing data.

The City's programs offer partnership opportunities throughout the County.

VI. MATTERS OF PUBLIC CONCERN

Kitchen Angels and food cooperative advocate BJ Pfeiffer said non-profit co-ops are a good way to bring low-cost healthy food to the community. She mentioned that Santa Fe's Food Depot is moving and will vacate a large warehouse that she envisioned as a food cooperative location with nutrition classes, and working with the local food council to determine the availability of fresh food and perhaps using the warehouse for that operation. Further, she advocated developing satellite cooperatives to create more distribution of food resources in the rural areas.

She mentioned Alice Water's Edible School Yard and said with program modification it could be appropriate and successful in Santa Fe.

The Agua Fria community farm, County-based CSAs (community-shared agriculture) and the Master Gardener Board were mentioned as resources for Ms. Pfeiffer to investigate.

Ms. Pfeiffer offered to email additional information to Ms. Boies for further distribution.

VIII. MATTERS FROM THE COMMISSION

A. Director's Report

Ms. O'Connor reported on the following:

- Recruitment for the nurse practitioner position continues
- A offer was made to a part-time nurse
- A Drug Take Back event is scheduled for February
- SOS (Santa Fe Opiate Safe group) is working to dovetail with City's LEAD task force – SFPS received a Drug Free grant which will focus on opiates and provide SOS with staff support. DOH provided PDMP (Prescription Drug Monitoring Program) data.
- A County work group has been created to review the regulations of indigent healthcare funding. Commissioner Kinney offered to serve on the work group
- The Nambe Senior Wellness Center will host a diabetes workshop and build partnerships to provide an evidence-based diabetes services throughout northern New Mexico

Regarding the diabetes program, it was recommended that staff contact Paula Devitt at Christus St. Vincent and that rigorous evaluation data be compiled.

C. Discussion of HPPC Roles

[Exhibit 1: Role of HPPC – Draft 11/19/12]

Ms. Boies was commended for her fine work incorporating the Commissioners' desires and developing a concise guiding document.

Commissioner Bond moved approval of HPPC Roles document as presented. Commissioner Kinney seconded and the motion passed by unanimous [6-0] voice vote.

[Commissioner Bond excused himself from the remainder of the meeting.]

B. Community Needs Assessment and Staffing

Ms. Boies advised the Commission that Kelly O'Donnell has been retained to serve as the consultant for the Community Needs Assessment. Ms. O'Donnell will present a status report to the HPPC at its January meeting.

Commissioner Abrams pointed out that Edgewood lacks emergency health services facilities and individuals are transported to Albuquerque or Santa Fe.

Ms. Boies mentioned that New Mexico at 25 percent has the second highest rate of uninsured in the country. The Medicaid expansion would reduce that to 5 percent. Ms. O'Donnell recently provided a report on the benefits of the Medicaid expansion, demonstrating it would more than pay for itself.

It was requested that a representative(s) from Christus St Vincent be present at the January HPPC meeting.

Appreciative inquiry is the process Christus St. Vincent is implementing for its focus groups. A question was raised as whether the County requires additional focus groups and if so, with whom and when. Staff was directed to work with Kathy Armijo Etre and Kelly O'Donnell to develop a project management/flow chart. Ms. Boies advised the Commission that the focus group were entirely separate from Ms. O'Donnell's work.

Ms. Boies was asked to facilitate the January HPPC meeting starting with the flow chart illustrating the big picture and introducing Ms. O'Donnell to discuss the content of the data. The importance of a geographic analysis was emphasized.

D. Other Matters from the Commission

None were presented.

VIII. FUTURE AGENDA ITEMS

The following items were mentioned:

- Kelly O'Donnell needs assessment
- Staff – flow chart re needs assessment
- Identify major themes of focus groups
- Indigent Healthcare discussion re allocations

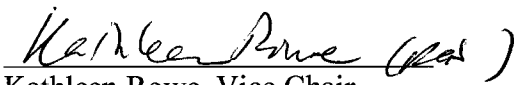
IX. ANNOUNCEMENTS

A. Next PC meeting: Friday, January 4, 2012, 9 a.m., 2052 Galisteo St.

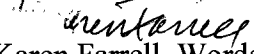
X. ADJOURNMENT

This meeting was declared adjourned at approximately 11:15 a.m.

Approved by:


Kathleen Rowe, Vice Chair
Health Policy & Planning Commission

Respectfully submitted by:


Karen Farrell, Wordswork

The Role of the Health Policy and Planning Commission HPPC

Draft as of November 19, 2012

I. Advisory Role to the Board of County Commissioners and to the Santa Fe County Health and Human Services

The HPPC provides guidance and recommendations to the Health and Human Services Division HHSD and the Board of County Commissioners (BCC) on the provision of health care services in Santa Fe County, utilizing the findings of the health needs assessment and the priorities in the health action plan. Specifically, the HPPC's advisory role is to:

1. Provide recommendations on policies or procedures related to the Santa Fe County Indigent Fund and/or Sole Community Provider funding and/or services
2. Based on the needs assessment and plan, make recommendations to the HHSD and the BCC regarding the County's role in the development and/or expansion of county funded health care services, as well as other policies, services, or activities that would improve the health of county residents.
3. Study and provide regular updates and advice to the County Health and Human Services Division on the impact of local, state and national health issues on county-funded health care services.
4. Study and/or perform research on issues as assigned by the BCC, rendering an opinion or recommendation if requested.

II. HPPC Interface with HHSD, Other Health-related Commissions and the Public

1. Staff of the Health and Human Services Division will serve as a liaison between the HPPC and the Santa Fe County Maternal and Child Health Council, the DWI Planning Council, and other state and local councils and providers as needed. The HPPC shall seek input and/or consultation as needed from the Maternal and Child Health Council, the DWI Planning Council, other state and local councils and providers, and the community.
2. Staff of the Health and Human Services Division will provide regular updates on health related activities at monthly meetings.
3. The HPPC shall be available to make public comments, through the HPPC chair or designees, about the county health needs assessment and the health action plan, as well as about county health-related issues that warrant public attention.

CLERK RECORDED 8/1/2013 10:13

III. Role of the HPPC in the Health Needs Assessment and Health Action Plan for Santa Fe County

1. Oversee the development of a county health needs assessment and, based on the results of the needs assessment, a health action plan for Santa Fe County.
2. Collaborate with and obtain input from local health care providers, advocates, and the community in the development of the health needs assessment and health action plan.
3. Conduct a regular review of the plan, using the plan to guide priorities and progress.
4. Report progress and/or updates of the needs assessment and plan to the Board of County Commissioners.
5. Recommend to the County Health and Human Services Division potential resources and/or funding for county-based services, as prioritized in the plan.

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Duties and Responsibilities of the HPPC

Paragraph 3 of Resolution 201-240, Creating the Santa Fe County Health Policy and Planning Commission, reads as follows:

3. The duties and responsibilities of the Commission are:
 - a. Assist the Santa Fe County Health and Human Services Division by providing input on programmatic and health issues as requested by Division staff.
 - b. Study and/or perform research on issues as assigned to them by the BCC, rendering an opinion or recommendation if requested.
 - c. Perform other tasks and duties pertaining to obtaining community input regarding healthcare needs of county residents as assigned or communicated by the BCC.
 - d. Propose updates to the BCC pertaining to the County Health Plan at such time when funding is available to do so.
 - e. Keep abreast of developments in healthcare on a local, state, and national level and provide information to the BCC as requested regarding recent developments in healthcare.

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