MINUTES OF THE

SANTA FE COUNTY

CORRECTIONS ADVISORY COMMITTEE

March 13, 2014

Santa Fe, New Mexico

The meeting of the Santa Fe County Corrections Advisory Committee was called to order by Chair Frank Susman, at approximately 3:07 p.m. on the above-cited date at the Youth Development Center, 4250 Airport Road, Santa Fe, New Mexico.

Roll call indicated the presence of a quorum with the following individuals present:

Members Present:

Frank Susman (Chair), Legal Community Michelle George, Juvenile Justice Mary Ellen Gonzales, Restorative Justice Capt. Dale Lettenberger, Law Enforcement - Investigative Bureau Maria Cristina Lopez, Immigrant Advocacy Community Maria Jose Rodriguez Cadiz, Mental Health Community Steven S. Spencer, Medical Community/Substance Abuse Judy Williams, Community at-large

Member(s) Excused:

Capt. Adan Mendoza, Law Enforcement [One vacancy]

Staff Present:

Mark Caldwell, Santa Fe County Deputy Warden Tila Rendon-Varela, Department Administrator, Public Safety Department Steve Shepherd, Financial Manager Renee Fernandez, Adult Facility Program Manager Lisa Leiding, Nurse Manager,

Others Present:

Dr. Laura Brown, Santa Fe Recovery Center



COUNTY OF SANTA FE STATE OF NEW MEXICO) PAGES :

CORRECTIONS ADVISORY C PAGES: 14

I Hereby Certify That This Instrument Was Filed for Record On The 24TH Day Of April, 2014 at 09:17:26 AM And Was Duly Recorded as Instrument # **1735269** Of The Records Of Santa Fe County

tness My Hand And Seal Of Office Geraldine Salazar ounty Clerk, Santa Fe, NM

I. Approval of Minutes

The Chair requested that in the future suggested amendments to minutes be forwarded to him in a timely manner. Dr. Spencer pointed out requested changes to the February 13, 2014 minutes: That COCHS is spelled without an E and that the amount requested by COCHS was \$10,000, not \$15,000. With those corrections Member Gonzales moved approval and Ms. Williams seconded. The motion carried unanimously.

II. Resignation

The Chair announced that Joanie Morales has resigned and the County Commission will appoint someone in her place. Ms. Morales suggested that her supervisor would be a possible replacement. Ms. Rendon-Varela noted that someone from the Public Defenders Office will have to appoint someone, who will then be approved by the BCC. Filling the vacancy of Vice-Chair will occur at the April meeting.

III. Report on "It Takes a Village" and Related Topics

Captain Lettenberger said he had attended the last "Village" meeting. The group is looking at meeting on a quarterly basis and to meet monthly in subcommittees in the interim.

The Chair stated that he, Warden Gallegos and Director Sedillo went to a meeting with Christus St. Vincent (CVS) looking at issues of coordination between the hospital, law enforcement and the jail.

Captain Lettenberger noted there will be a task force on call to go to incidents involving mental health.

Ms. Gonzales asked what this committee could do to support the effort.

Ms. Rodriguez Cadiz mentioned she went to a presentation at the South Side Public Library on a model called "Mental Health First Aid." It is designed to help first responders. Trainings are free or at low cost. Cards were distributed with contact information. Captain Lettenberger said he was aware of the group and will coordinate trainings. Ms. Lopez asked if trainings could be provided to schools. Ms. Rodriguez Cadiz said they do work with schools and Ms. Gonzales said she would pass the information along. Ms. Suzanne Pearlman from CYFD is in charge of the program.

IV. Review of Additional Budget Documents [Exhibit 1: Budget Information]

Mr. Steve Shepherd stated that he was handing out a basic summary of the finances of the Public Safety Department's Finances. It includes the Sheriff and Fire Department. He explained the various line items. The general fund currently contributes about \$14.4 million, but this is subject to change. GRT is expected to bring in around \$4.3 million. There is a reserve fund of around \$342,000. Additionally, bar charts he was providing showed revenue and expenditures.

Contractual services cover seven cost centers and include food, dental, medical, pharmaceutical, *etc.* The average cost per meal at the adult facility is around 90 cents and over \$1.00 at the youth facility. For comparison, Ms. Gonzales noted students in the schools are charged around \$2.50 and there is no profit involved. In response to a question from the Chair, Mr. Shepherd said the dietician is part of the food provider contract. Ms. Rendon-Varela said the food services contractor has been operating for the maximum four years and the contract will be going out to bid in August.

Mr. Shepherd reviewed the breakdown by program. He offered to provide information on any significant changes in revenue and expenditures. Ms. Leiding pointed out medical expenses went down due to aggressive management. The Chair inquired as to what she would do with additional funding and Ms. Leiding said she'd get more nurses to have more slack in the system.

Ms. Lopez asked what "inmate welfare" entailed. Mr. Shepherd said 11 percent of commissary profits go to items benefitting the inmate population as a whole, such as entertainment, recreation, educational classes open to all. The medical aspect of that line item covers things such as smoking cessation and opioid overdose prevention. Ms. Lopez asked about co-pays for medication. Mr. Shepherd said that goes under charges for services. Ms. Leiding said there is no charge for continuing chronic illness medication, such as insulin or antibiotics. Over the counter medication is up to the inmate. Prescriptions are charged at \$7.50 and there is a \$5.00 fee for medical visits, if the inmate can pay.

Dr. Spencer noted the following savings in medical expenditures: Costs dropped from \$24.77 in FY2012 to \$14.34 in FY2013, per day, per inmate; pharmaceutical costs dropped from \$1.99 to \$1.41; and offsite healthcare dropped from \$7.25 to \$4.37. Ms. Leiding said they work creatively with the community to lower costs.

Ms. Williams asked to see a breakdown of the medical department expenses. Ms. Leiding said it is primarily broken down by staffing, off-site expenses, *etc*.

V. Co-Pays, Electronic Medical Records and Badges

Ms. Leiding distributed a flow chart *[Exhibit 2]* explaining the work they are doing with pregnant, opioid addicted women. Efforts are made to keep them with their previous medical provider and get them mental health resources. Some of the women are sent to UNM and generally put on Subutex or Methadone. Referrals are made to outpatient Milagro in Albuquerque for care, since CSV cannot handle a large number of babies during withdrawal.

Ms. Leiding announced there will be a training on opioid overdose prevention and harm reduction techniques to be held March 19th [Exhibit 3]. Additionally, she distributed an assessment form for poly-abuse. [Exhibit 4]

There are currently three pregnant addicted women at the facility. After delivery the mothers are allowed three days with the baby and then CYFD places them, generally with family

members. She noted the new re-entry person is currently going through HR. This program will yield a lot of data.

The Chair inquired how this committee could help her efforts. Ms. Leiding stated they could help get the word out to the community that they care.

Ms. Williams stated she was at a meeting earlier in the day regarding the CSV community benefit program. The hospital is requiring potential grantees to demonstrate how they are coordinating with the jail. It gives about \$600,000 yearly in grants.

Regarding electronic records, Ms. Leiding said Quest Diagnostics Lab/Care 360 has the contract, since jail management companies have not been effective in this field. The goal is to be compatible with Medicare and Medicaid. She said she hoped the system would be running by next month, but certainly by the beginning of the next fiscal year. The lab and pharmacy are already up and running electronically.

Ms. Leiding said she participated in a webinar yesterday on suicide prevention. There is a high risk of suicide in middle-aged men. It's difficult to clarify the statistic between suicides and opioid overdose. Dr. Ayad, the jail psychologist, was in New Orleans before Katrina and helped set up the program there. She passed around the "Suicide badges" that are worn by jail personnel that show signs, what to do and include dispatch expediting codes.

Dr. Laura Brown introduced herself and stated she is participating in the LEAD program and works on the pregnancy/opioid addiction issue.

Ms. Leiding noted there have been no suicides or fatal overdoses in the past two years. She commended the warden for his efforts in the "daily war on drugs."

VI. Review and Assessment of County's Community Reintegration Model and Review and Assessment of County's Policies Related to Families and Individuals Who Interact with Correctional Staff When Visiting the Facility

Ms. Williams suggested reviewing the Committee's mandate from the Commission. She Chair noted that the jail doesn't have a reintegration model, **per se**. She further noted the paucity of resources in the community and hoped the new re-entry person will undertake this and perhaps attend the next meeting. She asked there be a structured discussion on the committee's role.

The Chair indicated that the Warden was unable to attend this meeting and discussion about policies related to family would have to be postponed until the April meeting.

Dr. Spencer stated he will be going to a COCHS meeting in April and they have five successful examples of reintegration programs, headed by a "champion." He said he would provide the Committee members with links. Ms. Williams asked that other potential models be brought in. She said it will be important to seek out funding sources, perhaps through grants.

VII. Comments, Questions or Suggestions by Members as to Issues to be Addressed

Ms. Gonzales said work is being done by the Juvenile Justice Board in coordination with the Santa Fe Public Schools, specifically the Transitional Education Program (TEP) for expelled students and potentially with those leaving the youth facility. The goal is to bring together providers such as counselors, tutors, behavioral health professionals, families and teachers. The program is new, comprising currently six students and it is hoped the students will "graduate" from TEP and get back into the educational system. The students are initially reluctant, but are treated with respect and they and their families get needed services. Bernalillo County has a similar program that has had good results.

Ms. George distributed a flyer for the March Against Child Abuse [Exhibit 5].

VIII. Schedule Next Meeting

The next meeting was scheduled for April 10, 2014 (subsequently rescheduled to April 17, 2014.

IX. Adjournment

This meeting was adjourned at approximately 4:25 p.m.

Approved by: Frank Susman, Chair

Respectfully submitted by:

Debbie Doyle, Wordswork



Santa Fe County Public Safety Department

FY-2014 Summary Budget

Expenditures

		FY-2014
		Original
Fund	Cost Center Name	Budget
247	Operating Budget	21,641,332
247	Capital Outlay: Replacement	828,824
247	Derbt Service	2,248,115
Public Safety	24,718,271	

Santa Fe County Public Safety Department

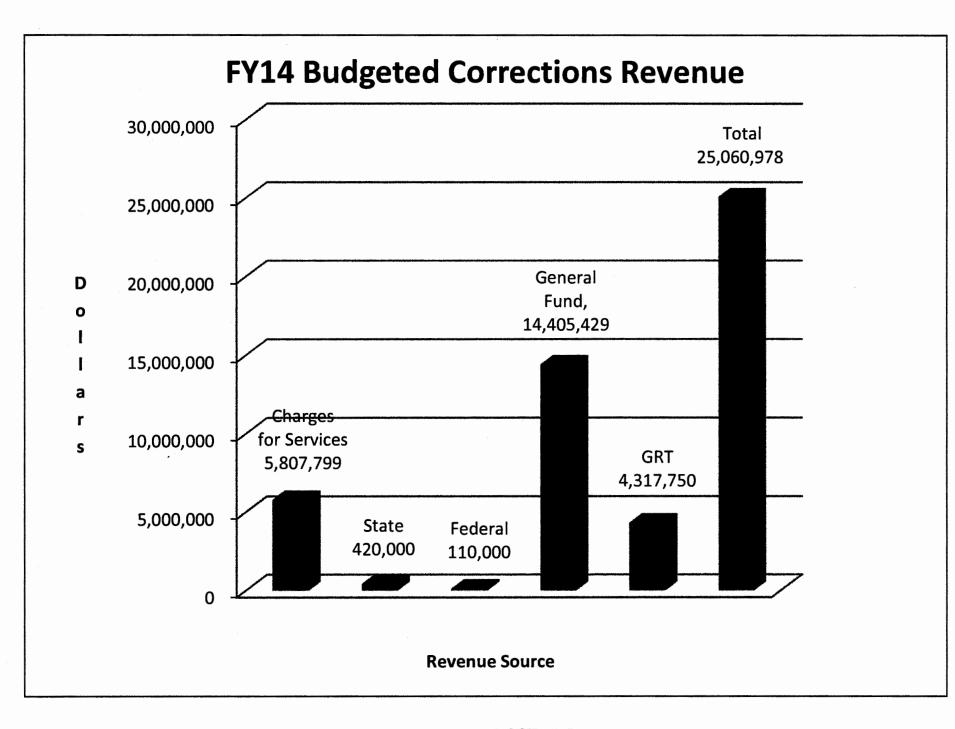
FY-2014 Operating Budget

Revenues

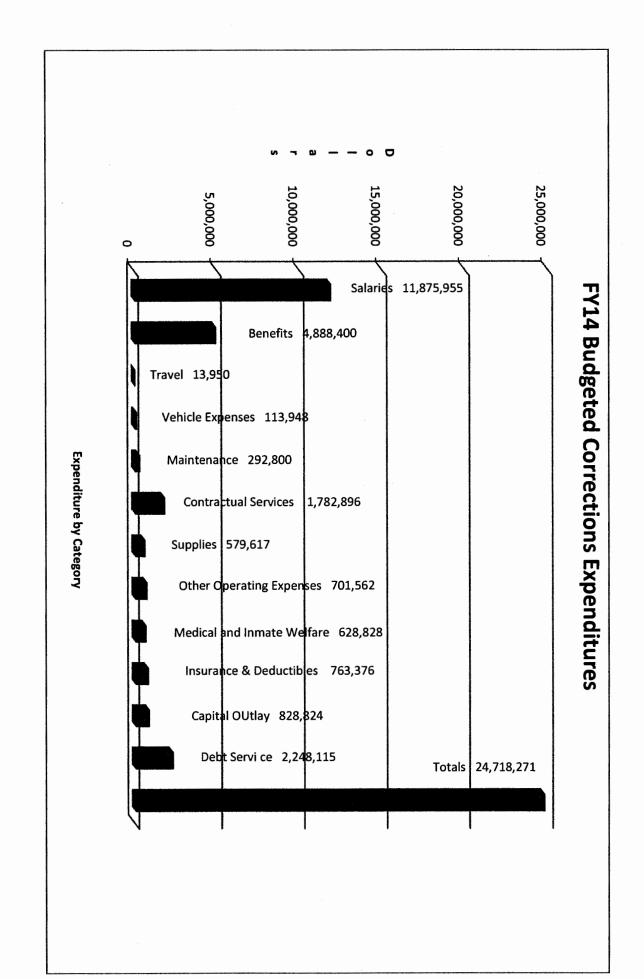
		FY-2014
		Original
Fund	Revenue Name	Budget

Charges for Services/Misc.					
247	Charges for Services	5,807,799			
247	State	420,000			
247	Federal	110,000			
247	General Fund	14,405,429			
247	GRT	4,317,750			
Public Safety	25,060,978				

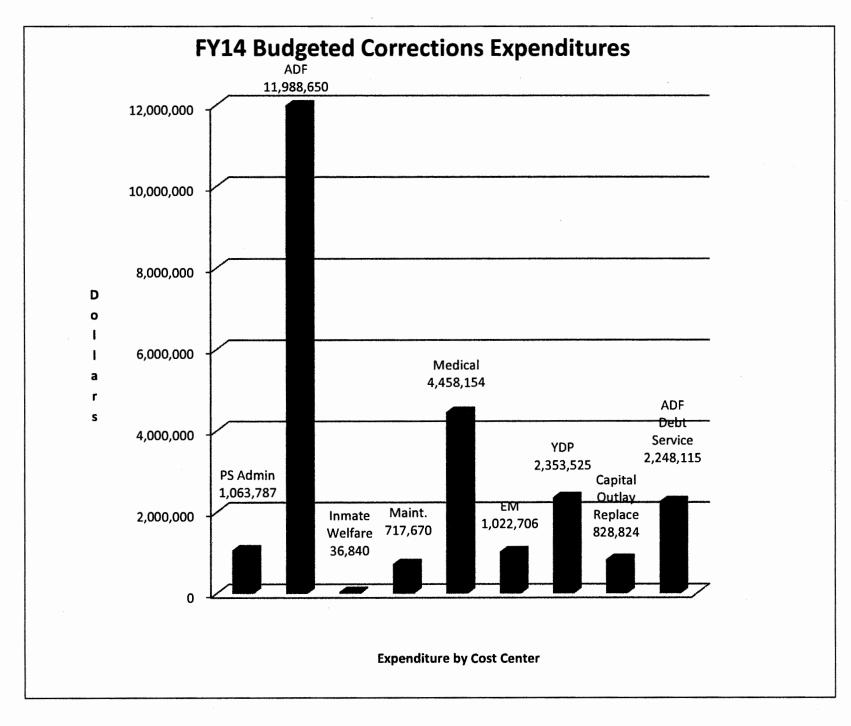
Revenue Reserve	342,707



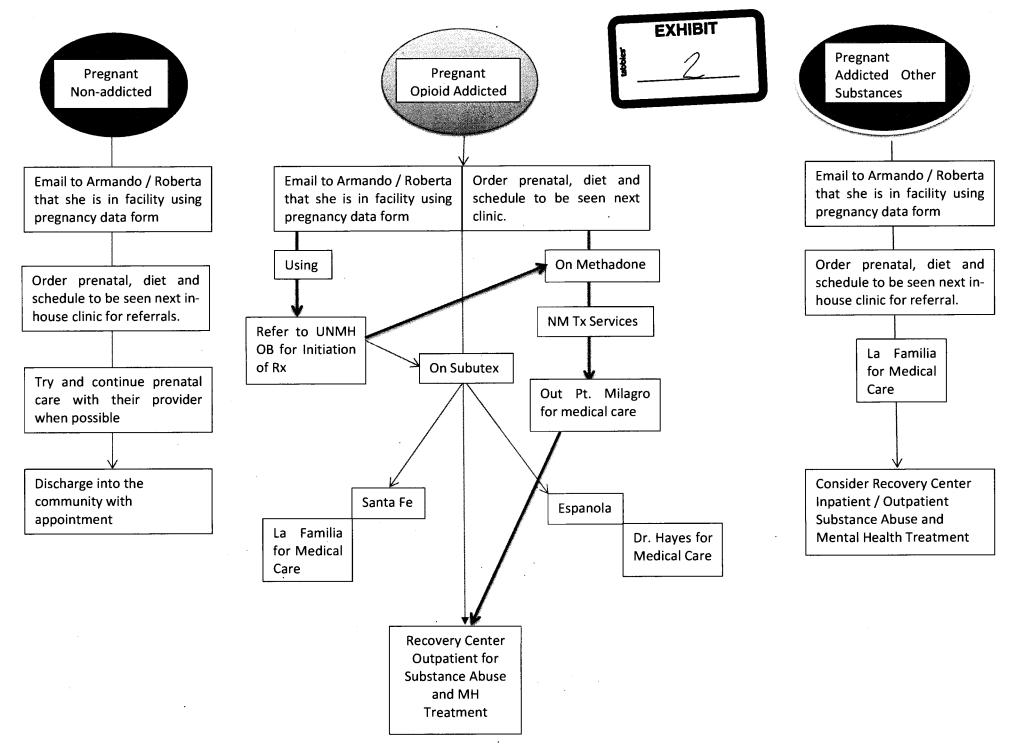
VIEZ/VZ/VE GAIMONAN NUTTO 120



ない、そので、その



VIEZYZYPE GININDIH NHITI 192



TRICIC CALLER HAVE LAT



OPIOID OVERDOSE PREVENTION TRAIN – THE – TRAINER PRESENTED BY: JEANNIE BLOCK, RN, MSN AND MELISSA HEINZ-BENNETT, MPH





MARCH 19, 2014 08:00 AM ADULT DETENTION FACILITY TRAINING ROOM

EXHIBIT

4

and the second s

(1) A start of the start of

tabbies

Santa Fe County Corrections Initial Poly-Substance Abuse Assessment

Level of Alertness	Awake	Drowsy Awakes to Verbal / Pa						Confused		
Orientation	Person	Place Time				Combative Confused Circumstances				
Odor of Intoxicants	Absent Present									
Gait	Steady						Uses crutches / wheelchair / cane etc			
		consider pre-book ref			usal					
				to I						
Jaundice	Absent	Present:				I				
Pupil Size						1				
0.1 to 0.2 assess for							-	-	0	
Overdose							0			
					1 2 3	4	5	6 7	8	9 10
Opiate Overdose:	Pupil Size:	RR:		Capi	llary refil	1:		1	•	Inarousable
					_			Give N	laloxon	e and Call EMS
Drug Screen: (circle Po	sitives)	COC	AM	1P	THC		. Iv	1TD	OPI	BZD
Urine Pregnancy Test R	tesults:	Negative	Positive	e If	withdra	wing	from	opiates fol	low prot	ocol
Date / Time of Last Dri	nk (If it has beer	n 2 hours	and le	ss than 4	1 hou	rs als	o complete	the CIW	A-Ar; on reverse
	S	side)								
Predicto	rs of Severe	Alcohol With	drawal:			S	igns	of Trauma o	r Infecti	on
Current Disease (co	ough, cold, wo	ound, UTI)? (Homeless	alcoh	olics					
are high risk for pne	eumonia – Iur	ng sounds ar	e helpful a	assess	ments		<u>)</u> e(36		
Tachycardia on Inta	ake > 120 bpr	n	HR:			· ·		t vi st		
Autonomic Over-ad	tivity with a	BAT > 0.01	BAT	:			1)	
Tremor	None	Mild Mo	derate M	arked		120	12	SALL!	ě.	
Type of Tremors	Rest	Postural	Kinetic	Intent	ion	Alb.	1	N N T		
Location of Trem	ors RUE	LUE RLE	LLE H	ead			51	6		
Reflex Assessme	nt	1+ 2	+ 3+ 4	l+			0/	N//		
Nausea / Vomiting	/ Dry Heaves	/ Heme +					60			
Sweating	0 1	234D	renched							
Agitation	0 1	2 3 4								
Seizure Disorder /	Seizure with v	withdrawal?	No	Yes	Whei	n was	last	Seizure?		
What is the drink of choic	e: Beer	Wine Har	d Liquor	Mouth	nwash	Hair S	pray	Rubbing	Alcohol	Other
What are their illegal sub	stances of choi	ce? C	rack / Coca	iine	Heroin	Pot		Methamphet	amines	Other
Last Use:										
High Risk Prescription Use	e: (Gabapentin	Wellbuti	rin	Opioids	Be	enzod	iazepines	Other:	
Last Use:		2						Entrada		
Where are they getting the	ne prescription	S?	1			iy Me	mber	Friends C	m Street	5
	B. H. J.			ment P			1			
i riouse in Medical (A		ms above cor	isider nous	ing in				oservation (Ju	wanila)	
Last drink was betw		urs ago – CIW	$\Delta - \Delta r > 8 W$	ith risk					werme)	
CIWA-Ar > 10 initiat					5101 3646		maran			
Patient is pregnant a										
Patient is reporti				of illicit	prescript	ion op	ioids			
COWS completed								sent to UNM	IH	
Referral to Re-Entry	Specialist for N									
Re-Assess at (time):	100000			Benzod	iazepine v	withdr	awal	/ Opiate with	drawal)	
Referral for Opioid (Overdose Preve	ention Trainin	5							

Nurse Signature: _____

Date / Time: _____

Inmate Name:

DOB:

Santa Fe County Corrections Poly Substance Withdrawal Assessments

Vital Signs:

Temp (for homeless and to r/o infection)	HR:	RR:	O2 Sat:	BP:
				1

Alcohol / Benzodiazepine Withdrawal Assessment:

<u>CIWA-Ar</u>	<u>0</u>	1	2	3	4	<u>5</u>	<u>6</u>	7
Sweats:	None	Palms	Flushed or observable	Beads of Sweat on brows	Obvious sweats			Drenching
Tremors	None	Felt with light touch			Moderate			Marked Tremors
Sensorium:	None	Uncertain Date	< 2 calendar days	> 2 calendar days	Not to person or place			
Agitation:	Alert & Calm	Restless	Agitated	Very Agitated	Combative			
Anxiety:	None	Anxious			Moderate Anxiety / guarded			Acute panic states
Heart Rate:	< 89	90-94	95-99	100-104	105-109	110-114	115-119	> 120
Nausea / Vomiting:	None	Mild Nausea / No vomiting			Dry Heaves			Constant nausea, Dry Heaves and Vomiting

Opioid Withdrawal Assessment:

	0	1	1	2		3	4	
Heart Rate	< 80	81-	100	101-119			> 120	
Sweating	None	. Pal	Palms		Bead	s of Sweat on brows	Obvious sweats	
Agitation:	Alert & Calr	m Rest	tless	Agitated	Ve	ry Agitated	Combative	
Anxiety:	None	Anx	ious	Irritable			Irritable / Anxious Interview is difficult	
Pupil Size 0.1 to 0.2 assess for Overdose	1 = larger tha 2 = pupils m	ize for room light an normal for room oderately dilated dilated that only the		is visible	2345	6 7	9 9 0 9 9 10	
Opiate Overdose: (not part of withdrav		Pupil Size:	RR:	Ca	apillary refill:	Gi	Blue lips / Unarousable ve Naloxone and Call EMS	
Runny Nose / Tearing	None	Nasal stuffines moist eyes	ss / unusually	Nose running or tearing			Nose constantly running or tears streaming down cheeks	
GI Upset	None	Stomach Crar	mps	Nausea / Loose Stools	Vomiting	g / Diarrhea	5 points – Multiple episodes of vomiting / diarrhea during interview	
Tremors	None	Felt with l	Felt with light touch		N	Ioderated	Marked Tremors	
Yawning	None	Yawning once during assess		Yawning three o four times during assessment			Yawning several times per minute	
Gooseflesh Skin	None	Piloerection of	Piloerection of skin can be felt. Hair is standing up on arms				5 points – Prominent piloerection.	

Nurse Signature: _____ Date / Time: _____

Inmate Name:



EDUCATE * PROTECT * PREVENT



Santa Fe's

2nd Annual Million March Against

Child Abuse

End child abuse!

March with us

April 5th, 2014

10:00 a.m. – 1:00 p.m.

We will start the march from in front of State Capitol to the Plaza.

EVERY ONE IS WELCOME ~ kids too!!!

Please wear a Royal Blue t-shirt to represent child abuse awareness.

FB PAGE – Millon March Against Child Abuse – Santa Fe, New Mexic









