

MINUTES OF THE
SANTA FE COUNTY
HEALTH POLICY & PLANNING COMMISSION

September 20, 2024

Santa Fe, New Mexico

1. A. This regular meeting of the Santa Fe County Health Policy & Planning Commission (HPPC) was called to order by Chair Steven Berkshire at approximately 10:00 a.m. on the above-cited date in the Plaza Conference Room, 100 Catron Street, Santa Fe, New Mexico.

B. Roll call indicated the presence of a quorum as follows:

Members Present:

Steven Berkshire, Chair
Mark Hayden
Deborah Weiss [remotely]
Maria Jose Rodriguez Cadiz [remotely]
Ronald Aldrich

Member(s) Absent:

Jane Hajovsky
Craig Schermerhorn
Arthur Culpepper

County Staff Present:

Jennifer Romero, Deputy Director, Community Services Department
Chanelle Delgado, Community Services Department

Others Present:

Chris Novak, DOH
Kenneth Gallegos, Adult Protective Services [remotely]
Julie Sanchez, City Youth & Family Services Director [remotely]
Jeremy Espinoza, DOH Epidemiologist [remotely]
Kate Field, LPCC [remotely]

C. Introductions

Members, staff and guests introduced themselves.

D. Approval of Agenda

Mr. Aldrich moved to approve the agenda and Mr. Hayden seconded. The motion carried by unanimous voice vote.

E. Approval of Minutes: May 9, 2024

The Commission reviewed the minutes and Mr. Aldrich noted his name had been misspelled.

With that correction, Mr. Aldrich moved to accept the minutes. Mr. Hayden seconded and the motion passed without opposition.

Chair Berkshire noted that Nelsy Dominguez has stepped down creating a District 3 vacancy. Ms. Romero said the call will go out and the Board of County Commissioners makes the final decision.

Noting that there was no representation from the Indigenous community, Mr. Aldrich recommended Adam Archuleta, Tesuque Pueblo, who currently serves on the Villa Therese Catholic Clinic Board.

2. FY 25 Health Council Funding

Ms. Romero said the County received a contract between Santa Fe County and DOH to receive the funds. HPPC is the designated body ensuring that the deliverables as outlined in the contract take place. This is the second year that the County has received this allocation. Last year approximately \$7,000 was received and it required a great deal of administrative work to receive those funds. This year DOH received over \$3 million for all the health councils in New Mexico for FY25. The County's allocation increased substantially to over \$80,977 and the Manager has signed the contract agreement.

She reviewed the areas that are contained in the contract and the options that fall under each. The Commission was encouraged to provide input.

Deliverable #1: The Health Council will provide an action plan for the implementation of the community health plan or other pertinent initiative. Santa Fe County will use its Health Action Plan. She explained the deliverables staff has chosen to address. The reimbursement of Deliverable #1 is \$18,000

Deliverable #2: Provide reports demonstrating coordination with the department and public health offices to promote an implement initiatives aimed at improving access to primary care and/or addressing behavioral health issues. She explained the deliverables staff has chosen to address.

Quarterly payments of \$6,500 will be made upon submission of progress reports for an annual total of \$26,000

Deliverable #3: Submit CHIP or health council initiative progress report, complete monthly report and a quarterly CHIP or initiative progress report that includes key performance indicators as outlined on the health action plan or health council initiative. The CHIP is the County's health action plan.

Total of \$1,000 to be paid quarterly upon report submission for a total of \$4,000. The County's health action plan includes indicators and ways to measure progress.

Deliverable #4: Present to local jurisdiction board or commission of the CHIP or advise on issues relating to community health including the county or tribal strategic health plan. Ms. Romero recommended sharing the County's Health Action Plan with another governing body.

Deliverable #5: Increase health council capacity by attending trainings and/or work coordination meeting provided by the department. There are four options and Ms. Romero said each has a reimbursement rate totaling \$6,500. The only consequence to not accomplishing an item is that funding is not received. She asked, which avenue/conduit do we want to implement to make this purposeful for the community?

Deliverable #6: Convene county and tribal health council and provide a yearly review of their structure – there are three points that include a yearly review of structure, -- there are two resolutions that the County has passed in regard to HPPC and one creates the Council and the more recent one that changes its structure she reviewed the three options Ms. Romero said that it is in the works and was a deliverable from last year. Once approved by the BCC it will satisfy that deliverable.

Deliverable #7: Participate in coordination meetings for the next cycle of community health needs assessments and improvement plans and attend meetings with local behavioral health communities and early childhood health collaborative. That is currently happening and if there are any committees the HPPC members participate in that would be helpful to continue those communications. The County has a Behavioral Leadership Council.

Deliverable #8: Fund travel and accommodations to participate in annual statewide health council meeting at least one regional health council meeting organized by the department and its partners, a conference that relates to the work of health councils. Ms. Romero said many of the deliverables have already been met.

The HPPC will be charged to ensure that deliverables the County staff has highlighted happen. A lot of the deliverables are already occurring. Staff usually attends health council gathering as a way to learn and share. During the 10 years the County did not receive Health Council Funds, the County still attended and had a working relationship with the council.

Ms. Romero asked if the Commission was comfortable with the agreement. She noted that DOH is flexible. Working groups will need to be created to ensure the deliverables can be fulfilled. The document is a scope of work for the interagency contract with DOH.

Recognizing the importance of funding and the need to support initiatives, Mr. Aldrich said this Commission should ensure the deliverables are met.

There is an annual report required in May, stated the Chair.

Regarding the Commission's role of oversight and ensuring what has been committed to is accomplished, Ms. Weiss asked whether the accomplishment of the deliverables is a staff responsibility. A large portion has been completed by staff, stated Ms. Romero. However, staff wants to make sure the HPPC members' voices are heard and the overall mission is decided by this council.

Chair Berkshire noted that the HPPC spent many hours working on the priorities of the Health Policy Plan.

Would an HPPC member attend the statewide health council meeting or County staff? Ms. Romero said in the past she has gone, along with a HPPC member; however, if more HPPC members want to attend that it is welcomed.

Ms. Romero said she would email the scope of work and highlight the deliverables County staff signed up to accomplish. There are a certain number that must be selected under each deliverable to receive the full funding. NMDOH knows that this Council is reviewing the document and can be flexible with the deliverables.

Regarding behavioral and mental health, coordinate health promotion activities to reduce opioid misuse and deaths by increasing the number of New Mexicans prepared to respond to an overdose by administering Naloxone. That is an area staff is well-versed in. Host screening, brief intervention and referral to treatment – to increase the number of providers trained in the screening tool. Ms. Romero said DWI does that effort through Community Services.

Ms. Romero said she felt confident the deliverables that staff identified and the scope of work could be attained. The deliverables selected are beneficial and fit within CSD's range of work. To receive full funding a certain number of deliverables have to be selected from each of the eight items.

A discussion ensued about mergers in health care and Health Care Authority (HCA) was mentioned as ISD and the benefits side of health care. The state's Human Services Department is now HCA and Mr. Hayden offered to research HCA's orbit.

3. Annual Work Plan

Chair Berkshire said the work plan will be accomplishing the deliverable as described by Ms. Romero. He requested that council members identify areas from the scope of work in the DOH agreement which they are interested in.

Mr. Aldrich offered to focus on housing, behavioral health and/or hospital issues. Chair Berkshire said the County has a housing department and he and former HPPC member Dransfield participated on a committee for housing.

Ms. Romero suggested that after she emails the deliverables and the members have had an opportunity to review all of the items staff has highlighted as achieving, that then they select an issue to work on.

The Health Action Plan and the annual work plan are essentially the same.

Mr. Hayden said he could work on the fact sheet, planning meetings, and offered to make presentations at statewide meetings.

Chair Berkshire said he would reach out to the members within a week or two after they have had an opportunity to review the deliverables.

One of the deliverables is to review the draft resolution naming the Santa Fe County Health Policy and Planning Commission as the local health council. Mr. Hayden offered to do that.

Mr. Aldrich said the rise in Covid is concerning and with recent changes lower priced vaccinations are not available for impoverished or lower income people. Ms. Romero said the County has a large population of non- and under-insured individuals and many times there are resources available. The Health Care Authority is looking for wins and this may be a good thing for them. Mr. Hayden offered to review that.

4. New Member Packet Development

A packet was provided to the members and there are still items to be added. There was a list of what Santa Fe County Community Services Department oversees, however, that was removed because the department is going through some changes.

Chair Berkshire solicited for other ideas or other items inclusion in the packet.

5. Bylaws

Chair Berkshire said this Commission does not have bylaws or operating procedures. The HPPC is currently governed by resolution, stated Ms. Romero. Bylaws may require BCC approval and any future amendments could also require BCC approval.

Mr. Hayden noted that traditionally the bylaws are barebones and other items are listed in the operation of procedures thus eliminating the need to go before the BCC with changes.

Members Hayden, Aldrich and the Chair will review the bylaws.

- 6. Matters from Staff**
- 7. Matters from the Commission**

It was noted that subcommittees are not required to post notification to the public of a meeting. Ms. Romero offered to assist in staffing subcommittee meetings. Mr. Hayden said offering zoom as a possibility will be helpful.

Contacts include DOHs people Kim Horan for the Health Council scope of work and Jeremy Espinoza for data.

Chris Novak, MD, Medical Director at DOH, said the Health Care Authority was the Human Services Department and are primarily responsible for reimbursements and do not provide direct services. They fund programs and Medicaid is their big activity and licensing of health care authorities and behavioral health services. DOH is focused on providing services, i.e., WIC services, and there is some overlap. He said DOH was available to assist in finding specific information and contacts.

Ms. Romero said CSD's intention is to have a stronger relationship with DOH and to ensure that individuals in Santa Fe County are enrolled in health care insurance.

Dr. Novak said in order to help fill in gaps DOH has recently expanded its medication for opioid use disorder efforts through its health offices. DOH received a mobile unit/clinic on wheels with one exam room. It is not yet operational but it will be getting out to health fairs and community groups. It will be staffed with nurses, clinicians, health educators, nutritionists.

Regarding tele-medicine, Dr. Novak said DOH has limited services with a focus on STDs, family planning, medication for opioid use disorder (MOUD), and immunizations. DOH has expanded its tele-medicine services and he mentioned Dr. Leiderman as an expert in MOUD who is available throughout the state.

Mr. Aldrich mentioned UNM's project ECHO a telementoring organization dedicated to disseminating best practice knowledge in rural and underserved areas.

- 8. Public Comment** - None was offered.
- 9. Next Meeting & Adjournment**

The next meeting is November 14th, 10-11:30. Chair Berskshire noted he was unable to attend that date. Ms. Rodriguez Cadiz noted she was unavailable to attend meetings on the second Thursday of the month in the morning. Ms. Romero said she would contact the members with options for different dates.

The agenda could include an update from La Familia and New Mexico Health Professionals for Climate Action with Shelly Mann-Lev. Mr. Aldrich suggested Villa Theresa discuss the services they are developing and strengthening.

Upon motion by Mr. Schermerhorn and second by Ms. Hajovsky, this meeting was declared adjourned at approximately 11:30 a.m.

Approved by:

Steven Berkshire, Chair
Health Policy & Planning Commission

Respectfully submitted by:

Karen Farrell, Wordswork

D R A F T

SUBJECT TO APPROVAL

DRAFT