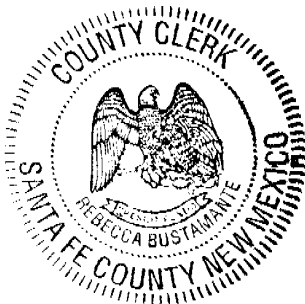


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**SANTA FE**  
**BOARD OF COUNTY COMMISSIONERS/**  
**CITY COUNCIL**  
**JOINT MEETING**  
**January 16, 2003**



1252. 1080  
COUNTY OF SANTA FE } SS  
STATE OF NEW MEXICO }  
I hereby certify that this instrument was filed  
for record on the 5 day of Mar A.D.  
20 03 at 12:00 o'clock P.m  
and was duly recorded in book 2358  
page 260-304 of the records of  
Santa Fe County  
Witness my Hand and Seal of Office  
Rebecca Bustamante  
County Clerk, Santa Fe County, N.M.  
Marilla [Signature]  
Deputy

# AMENDED AGENDA

**SANTA FE BOARD OF COUNTY COMMISSIONERS (BCC)  
SANTA FE CITY COUNCIL  
SPECIAL JOINT MEETING  
SANTA FE COUNTY COURTHOUSE, 2nd FLOOR  
BOARD OF COUNTY COMMISSION CHAMBERS  
JANUARY 16, 2003  
4:00-6:00PM**

2358261

- 1) Call to Order
- 2) Roll Call
- 3) Pledge of Allegiance
- 4) Invocations
- 5) Approval of Agenda:

3) **Presentations:**

a) **The Care Connection\Sobering Center**

Introductions: Jaime Estremera Fitzgerald, Chairperson  
Santa Fe County Health Policy & Planning Commission

History: Robert Anaya, Director  
SF County Community Health & Development Department  
  
Fred Sandoval  
City of Santa Fe Community Services Department

Diagram of Facility: Michael Coop  
Coop Consulting

Overview: Target Populations, Services, and Outcomes  
  
Mark Boschelli, Clinical Director  
PMS: Crisis Response of Santa Fe  
  
Carol McFall, Clinical Director  
PMS: Santa Fe Community Guidance Center

Consumer Story: Senator Phil Griego  
State of New Mexico Senate

Operations: Fr. Ray Anderson  
Life Link\La Luz

Budget: Michael Coop  
Coop Consulting

4) Community Health & Development Department:

- a) Discussion between the governing bodies moderated by Chairperson Estremera-Fitzgerald.
- b) Request approval to proceed with the Care Connection and Sobering Center Project.
- c) Request authorization to commit identified resources to renovations and purchase of building.
- d) Request commitment by City of Santa Fe to seek \$200,000 for operating expenses.
- e) Commitment by City to review CIP funds availability for \$500,000 for renovations for Sobering Center.
- f) Request approval to seek additional legislative funding for capital expenses.

5) Public Comment:6) Adjournment:

**JOINT MEETING**  
**OF THE SANTA FE CITY COUNCIL AND**  
**BOARD OF COUNTY COMMISSIONERS**

2358263

**January 16, 2003**

This joint meeting of the Santa Fe City Council and Board of County Commissioners was called to order at approximately 4:15 a.m. by Commission Chairman Jack Sullivan, in the Santa Fe County Commission Chambers, Santa Fe, New Mexico.

Following the Pledge of Allegiance, roll was called by County Clerk Bustamante and indicated the presence of a quorum as follows:

**Commission Members Present:**

Commissioner Jack Sullivan, Chairman  
Commissioner Paul Duran  
Commissioner Paul Campos  
Commissioner Mike Anaya  
Commissioner Harry Montoya

**Members Absent:**

[None]

**Council Members Present:**

Councilor Patty Bushee  
Councilor Miguel Chavez  
Councilor Karen Heldmeyer  
Councilor Carol Robertson Lopez  
Councilor David Pfeffer  
Councilor Rebecca Wurzbarger

**Members Absent:**

Councilor David Coss  
Councilor Matt Ortiz  
Mayor Larry Delgado

**Invocation**

An invocation was given by Jaime Estremera-Fitzgerald.

**Approval of the Agenda**

COMMISSIONER SULLIVAN: Approval of the agenda, we have a

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presentation regarding the CARE Connection and Sobering Center which will be led by Jaime Estremera-Fitzgerald who is the chairman of the Santa Fe County Health Policy and Planning Commission. Following that presentation, Mr. Estremera-Fitzgerald will turn the meeting back over to the governing bodies and if you look on the second page of you agenda there are some discussion items that the Health Policy and Planning Commission would like both parties to consider and discuss and if appropriate, take action on.

Also, Senator Phil Griego has indicated that he will be present for the meeting but may not be here until a little bit closer to five, so we'll ask for his comments when he arrives. Are there any other additions or corrections to the agenda as you see here? If not then - we'll call this a County Commission meeting and ask for an approval of the agenda.

COMMISSIONER CAMPOS: So moved.

COMMISSIONER MONTOYA: Second.

COUNCILOR PFEFFER: Mr. Chairman, just a point of order. Councilor Lopez has arrived.

COMMISSIONER SULLIVAN: So we now have both quorums. We have a motion.

COUNCILOR HELDMEYER: We have a motion and a second, I think.

COMMISSIONER SULLIVAN: Was there a second? Okay, discussion.

COUNCILOR HELDMEYER: Yes, I'd like to ask Jim Romero, was this noticed as a meeting at which the City Council would be taking action?

STEVE KOPELMAN (Acting County Manager): It's my understanding that a notice has to be posted three days prior. I believe it was posted more than three days ago and it was telecast. I talked with Bruce Thompson and he okayed it.

COMMISSIONER SULLIVAN: Any other discussion?

COUNCILOR HELDMEYER: Because this is all new to me, about the City taking action. I was told verbally that this was a County Commission meeting at which we were invited and invited to take part in the discussion. But the other thing that I don't see is any public input, which I think is very important if the City is going to take any action.

JIM ROMERO (City Manager): I thought it would be a dialogue on CARE and the Sobering Center.

COUNCILOR BUSHEE: Thank you, Mr. Chairman. I would like to ask the County Manager if, as it's been advertised if there's an ability to amend the agenda to allow for public comment and therefore we could proceed and take care of Councilor Heldmeyer's concerns?

COMMISSIONER SULLIVAN: We do have public comment on the agenda right now.

COUNCILOR BUSHEE: Well, public comment is allowed for then. I hope that if that takes care of your concerns, Councilor, I would hope that we could take action if necessary.

COUNCILOR HELDMEYER: It does not take care of my concerns because I as a member of this body was told essentially what Mr. Romero just said and to be confronted

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with the idea that this is asking for a financial commitment from the City at this point I think is inappropriate.

COMMISSIONER DURAN: Mr. Chairman.

COMMISSIONER SULLIVAN: Commissioner Duran.

Commissioner Duran: I don't know what the big deal is. When it comes time to make a decision and you don't want to take action on it, we won't take any action on it. Why don't we just get going on the presentation?

COMMISSIONER SULLIVAN: Any further comment on the motion?

COMMISSIONER MONTOYA: Mr. Chairman.

COMMISSIONER SULLIVAN: Commissioner Montoya.

COMMISSIONER MONTOYA: In terms of the agenda, I don't know if on the public record but I believe there's some numerical errors in terms of the 5, and then it goes back to 3, 4, 5, 6.

COMMISSIONER SULLIVAN: Yes, the presentations got numbered incorrectly. So we would accept an amendment that the number of the Presentations is 6, Community Health & Development Department is 7 and Public Comment is 8 and Adjournment is 9.

COMMISSIONER MONTOYA: Yes, sir. Mayor Pro-tem, your side. We're approving the agenda.

COUNCILOR LOPEZ: Do I have a motion to approve the agenda as amended?

COUNCILOR BUSHEE: So moved.

COUNCILOR PFEFFER: I'll second.

COUNCILOR LOPEZ: Any discussion on that motion?

**The motion to approve the agenda as amended passed by unanimous [5-0] voice vote of the City Council.**

**The motion to approve the agenda as amended passed by unanimous [6-0] voice vote of the County Commission.**

COMMISSIONER SULLIVAN: Councilor Wurzburger.

COUNCILOR WURZBURGER: Excuse me, Mr. Chairman. Could you please confirm the times of the agenda? Like how long is the first presentation, just roughly for me. I'm sorry, I was late.

COMMISSIONER SULLIVAN: That's just what I was going to get to. We were going to spend about 45 minutes on the presentation and we're now at 25 after so I think we'll need to cut that down to about 35 minutes, because our intent is to conclude, as it says here on the agenda at 6:00 p.m. That's our goal

**Presentations: The CARE Connection /Sobering Center**

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**Introductions**

MR. ESTREMER-FITZGERALD: Thank you, Mr. Chairman, Mayor Pro-tem, Commissioners, City Councilors. Thank you for being here at this meeting and I want to remind my folks that are going to be giving some presentations that keep track of the time and also when you come up here if you're taller than I am stay close to the microphone because otherwise they won't hear you.

I will keep my remarks and introduction very short but at the same time I want to talk from the heart to all of you. Basically, I have five quick points that I want to just mention on behalf of the Health Policy and Planning Commission, which for those of you who may not be aware is a body that includes the City and the City is at the table. Your Commissioner had been Fred Sandoval. Now the City has to bring forth another recommendation to the County to replace him since he's now at the Department of Health.

I want to first just mention that I think all of us here, I don't know of anybody's that's here that doesn't know that this whole area that we're going to talk about today is really crucial and important. It's very well known in the state that we need to develop alternatives to detention for people that are in jail that don't have criminal charges. And there's two basic populations that we'll be talking about today that fall into that category. Protective custody which are those that might be intoxicated or dangerous to themselves or to others, and then the second are mental health holds that also have no criminal charges. Now interestingly enough, state statute allows us to detain these populations exclusively and send them to either a health care facility or a detention facility.

My second point is that there is a persistent lack and shortage of residential treatment for psychiatric populations and people in need of substance abuse treatment in New Mexico. Thirdly, local communities and our community is no different, spend an inordinate amount of public dollars to handle these two populations and in the end, protective custody and mental health hold individuals go through what we call a revolving door. A revolving door, only to be released without access to treatment and then repeat the pattern all over again. And the entities that do the revolving door referrals can be 911, it can be ambulance, EMTS, law enforcement, both the Sheriff and the Police Department, emergency room staff, detention facilities.

There is a minority of persistent/chronic cases which account for the majority of the costs. So you have a minority of persistent/chronic type of cases which account for the majority of the costs. I want to give you a real example, a real life example, of a gentleman who lived in Santa Fe homeless for a long time, and by records, in one year, in one year this individual spent 2/3 of that year in detention. So that means that that individual in one year spent 220 days in detention. And after those 220 days, this individual went to Albuquerque, killed an individual and then killed himself. And there are many sad stories like that that are real stories.

All of this speaks to the fact that we have very confused behavioral health resources across the state of New Mexico. Santa Fe County and Santa Fe City work only on resources

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that exist in little pockets that do not provide adequate help for these populations. Specifically there are six detox beds in Santa Fe County, a county of 120,000 people. In contrast, San Juan County with 100,000+ has five times that in detox beds. We have a need, and it's been here for a long time. Those of us in the Santa Fe County Health Planning and Policy Commission and all the members in the CARE Connection that have worked many, many hours believe that our County and our City can work together to finally resolve this very critical need, much kind of like we're doing on water, which is an issue that both bodies have been really working on together.

I wanted to add, because in preparation for this, one of the things that I believe very strongly - I love my city. Those of you that are City Councilors know that I'm very involved at the City level. I've been a commissioner of the Community Development Commission for nine years. I've been involved on the Mayor's Mural Task Force. At the County level I'm very involved. I was involved for the last three and a half years as the only real citizen advocate sitting on what's called the Cooperative Agreement Advisory Committee for the state of New Mexico, appointed by the Governor. And that body kind of oversees all prevention and treatment in the state of New Mexico. And before I stood here in front of you today, Councilors and Commissioners, I wanted to make sure that I wasn't speaking out of turn.

So I called Governor Richardson this afternoon and we talked about this very issue and the fact that I was coming to see you and I was going to speak on behalf of my Health Planning and Policy Commission. And he assured me of one thing and so did Secretary Pat Montoya, who called me from the road. They want you to know as elected officials that the project that you've all been working on together and the CARE Connection and that folks have been working on together, is a vital priority and important to this administration. And the funding from both Department of Health, the brand new state incentive grant that went into today because the Governor just signed. We didn't even know that we were going to get a chance for, and other prevention and treatment money will be targeted at communities that put the topic and the project that you're dealing with today at the top of their list. And those communities will become priority communities.

And I wanted to say that to you because I believe that if you as elected officials, whatever is done today because if for whatever reason the City can't take action, that's not really the main thing. The main thing is that hopefully, when we leave together here today you as elected officials and we as citizens, that we will know that somehow together we're going to move to open doors and open windows to solve this critical need in our community.

And with that, I'd like to now move on and I'm going to ask Mr. Robert Anaya, Director of the Santa Fe County Community Health and Development Department to come forward and he's going to give a little history and also representing the City of Santa Fe is Terry Rodriguez and after Robert, she will also make a comment and please, we will make our comments so we stay, Mr. Chairman and Pro-tem Mayor, that we'll stay on time.



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## History

ROBERT ANAYA (County CHDD Director): Madame Chair, Mr. Chairman, Commissioners, Councilors, I'm going to keep my comments very brief. First and foremost, I want to say that the reason we're here today at this stage in the new year is because we wanted to have time to meet with the City Council and the County Commission and at the direction of you, Madame Chair, at the City Council meeting that I attended almost two months ago you asked that I work with the County Commission and that we come back and the Commission has asked this to be the day and we worked it out and I appreciate that.

In sitting over there listening to the comments of Mr. Estremera-Fitzgerald, I found that nearly ten years have gone by relative to this particular project. There has been many, many community meetings, City Council meetings, County Commission meetings over that ten-year span of time trying to get to this venture that we're at right now at this moment. Three years ago, our department was given the task of rekindling this particular project and I am standing before you today because of the direction of the County Commission and because of the many people that are seated behind me today that are directly impacted and affected by the needs of this center and the need for it in our community.

And with that said, I think I would rather sit down again and hear those presentations come forward and then provide any clarity or answer any questions that both of you might have. There is a specific purpose for our meeting today relative to the time line as well that has to do specifically with the legislature and specific dollars that we need to deal with and we'll get into more detail as to what those issues are. As to the money we have on the table, how they are currently authorized and what we have to do to move forward to expend it. Thank you, Mr. Chairman, Madame Chair.

TERRY RODRIGUEZ (City Community Services Department): Good afternoon. I'd like to thank the Santa Fe County Health Planning and Policy Commission for all their work that they've done in this community in bringing this meeting together this afternoon. Mr. Fred Sandoval worked on this initiative since he was employed with the City of Santa Fe until last week when he left to work with the State Department of Health. Unfortunately he can't be here because he's in Las Cruces talking about these very same issues that are going to be going on in that community. Over the past ten years we've worked with Shaening and Associates and we feel great confidence in their ability to keep us on track with this program since they've worked with us every step of the way to bring us to where we are here today.

This began back when the City could not ignore the public outcry that occurred in 1992 as the result of a behavioral health crisis that occurred when Pedro Ortega was killed by a City police officer. The townhall meetings that followed that exposed an expensive and inefficient system of working with people who are in a mental health and/or a substance abuse crisis. The five-year project that resulted from a coordinated community effort produced the current Crisis Response Hotline and the Mobile Crisis Team. The third item that did not happen has been the development of what we then called a crisis facility.

The Crisis Response Project of Santa Fe no longer receives substantial funding from the City of

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Santa Fe essentially because they chose not to support the development of a treatment facility. The County has now taken the lead with the development of a Santa Fe County Community Health and Economic Development Division to address the needs of this population through the public monies of the indigent fund and the DWI Council. The plan you will hear here is the result of a very long maturing process. It has involved the community at many levels.

We are at the point where we have come as far as we can with this program and we're here now because we need your guidance and your support. The budget you see in front of you reflects a commitment from the City with money that we actually have in place and are willing to commit to this project. It's necessary that the governing bodies look very closely and carefully at these monies to support these services because the sole community provider monies are woefully inadequate to fund the behavioral health services for adults and children in our community.

But before I get into the money, I'm not going to put the cart before the horse and let our presenters go on with the program. Thank you.

MR. ESTREMER-FITZGERALD: Mr. Chairman, Madame Pro-tem, the next speaker is going to be Michael Coop who has been working with Shaening and Associates on the real details of this and he will especially address the Diagram of Facility.

### Diagram of Facility

MICHAEL COOP: Mr. Chairman, Madame Pro-tem, I just want to quickly give a description of what this facility will actually be so that you have a clear picture in your minds of what it is that we're talking about. This is the facility on Galisteo that's the old magistrate court building. It's approximately 10,500 square feet and it will be used for basically three functions. One of the functions will be house County Health staff. So there's approximately 3,000 square feet which will be County staff.

The remainder of the building, approximately 6,500 square feet will be for the project, the CARE Connection Center project. Roughly half of that will actually house clinicians' offices for case management, for assessment, to house data functions that will work to link the agencies in our communities. And the other roughly 3,300, 3,400 square feet will be used for a social detox facility. That will be separated from the other two sections of the building with a firewall. It will have a separate entrance and it will be very much focused on working with those who are intoxicated or who are on substances. It will have close, tight supervision. That section of the building will be open 24 hours a day, seven days a week and will have supervision 24 hours a day, seven days a week.

So that's just a brief description of what the facility is that we're talking about so that you have an idea in your minds of what it is.

COMMISSIONER SULLIVAN: Michael, could you give us those square footage breakdowns again? You started off with 10,000 square feet roughly.

MR. COOP: It's approximately 10,500 square feet total. A little over 3,000 of that is projected to be County staff offices for the Health Department, with the remainder

divided – we're not sure because we don't have the final drawings yet, but roughly 3,400, 3,500 square feet for each of the other two functions. Then there will be some mechanical pieces that take a little bit of that.

COMMISSIONER SULLIVAN: So 3,400 is the detox center, that's the separated facility, separated by a firewall and different entrance, and the remaining 3,400 is clinicians' offices and what else?

MR. COOP: Clinicians' offices, rooms for group counseling, rooms to house the computer network that will link providers throughout the community and the supervisor of the entire project.

COMMISSIONER SULLIVAN: Thank you.

MR. ESTREMER-FITZGERALD: Thank you, Mr. Chairman, Madame Mayor. Now we're going to go to an overview. The target populations, services and outcomes. I just want to remind my presenters to try to be as concise as possible. Mark Boschelli, Director of Crisis Response and Carol McFall, Clinical Director of Santa Fe Community Guidance Center.

#### **Overview: Target Populations, Services and Outcomes**

CAROL MCFALL: Good afternoon, Chair and Chairwoman. Thank you for allowing us to be present to give you this information. We have been working on this for a very long time. I think it's a very worthwhile project within the County of Santa Fe. The overall mission of the CARE Connection is to increase assets of health services and to reach specific outcomes, positive outcomes for persons in need of substance abuse or mental health services. These outcomes include increasing the capacity of treatment providers, stronger collaborative efforts between service providers, diversion from the emergency room, decreased detainment in jail of persons with behavioral health issues and most significantly, fewer individuals suffering from addiction and critical substance abuse issues. Those are the outcomes that we're looking to obtain.

The formal goals that are stated in the memorandum of understanding are to serve as a model for a coordinated behavioral health care network, developing referral, quality management and case management policies and procedures for making referrals, selecting and developing screening assessment tools, developing confidentiality and information sharing procedures, a common database system and collaborating with existing services to create new services as necessary.

In the packet that you have you'll see that there is an extensive membership of people who have signed the memorandum of understanding and not all of these members have participated in every single meeting that we've attended but many of these providers and members of the CARE Connection participate on a sporadic basis as they see the information that's going to be on the agenda if they want to participate.

There are three components within the CARE Connection as was mentioned earlier in the design of it and the assessment and screening and ongoing case management services for

those individuals is the main service component along with the sobering center. The third component then is the data component and that is where the information that's gathered will be compiled and then disseminated back out into the community.

I want to emphasize that this is a really strong collaborative process and it's not trying to create new services within the community of Santa Fe. All of the members who are participating are providing some kind of a service in one way or another and we're not trying to recreate or create a new service. We're trying to enhance the level of services that we do already have by creating a better way of making those referrals, providing the follow-along and the follow-up so that we can maximize the resources that we already do have outgoing to all of these providers anyway. Did you want to -

MARK BOSCHELLI: Just that the specific outcomes have been handed to you on a separate sheet for the projected outcomes for the CARE Connection assessment and detox center. [Exhibit 1] I know there will be some questions regarding how do we reach those but hopefully that will be very clear to you.

MS. MCFALL: Are there any questions?

COMMISSIONER SULLIVAN: Thank you.

COUNCILOR BUSHEE: Could I just ask a real quick question?

COMMISSIONER SULLIVAN: Miss Bushee.

COUNCILOR BUSHEE: The sobering center component of the CARE Connection, that is not in any way the same as a detox bed or can you differentiate for me how a sobering center is -

MS. MCFALL: I'm going to ask David Silva who is the director of Recovery of Alcoholics program to come up and speak to that piece because this is the component that RAP is most involved with.

COUNCILOR BUSHEE: You don't have to get too technical but just generally. I understand what RAP does but I'm trying to get where the treatment facility would be differing.

DAVID SILVA: It's the same. The detox bed is the same. The sobering center is just what's been identified to differentiate between what the assessment does and originally it was modeled after the Albuquerque Metropolitan Sobering Center.

COUNCILOR BUSHEE: I guess I misunderstood when it was described to me that the CARE Connection part, which is - you have three components of this new facility, I understand. And I understood the sobering center to be part of the CARE Connection part rather than the treatment center so much. Am I missing some step here?

MR. SILVA: It's basically a detox bed. It's what people would come to instead of going to jail or the emergency room. And because it's an onsite facility basically they could be transferred over to get the assessment done or to be referred for further -

COUNCILOR BUSHEE: Okay, maybe back up. I think I missed a step. I heard the woman before speak about the CARE Connection. I understood the building to be staffing for the County, CARE Center, which does assessments, but when I heard the CARE Connection, that was described as the CARE Connection Center and then I heard the social

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detox facility. Are they all one thing and they're not separated out as much as I'm -

MR. SILVA: You have the CARE Connection as the larger entity, then you have the detox center as one. You have the assessment piece and you have the data. They're basically just different departments within the whole CARE Connection.

COUNCILOR BUSHEE: Okay, I think I'm - the original visual I got was separate sections of a building that were operating somewhat cohesively but separately. It's important for me to just understand as we get down to who funds what and how that works so I'm looking at the section where it's County staff, that's public health, or what's the staffing part of it?

MR. SILVA: That's the County.

COUNCILOR BUSHEE: But this is the building itself. Some portion of it is just to house County staff, right?

MR. SILVA: Correct.

COUNCILOR BUSHEE: Okay. Thank you.

COMMISSIONER SULLIVAN: Councilor Wurzburger, did you have a question?

COUNCILOR WURZBURGER: Yes, sir, I do. Thank you. A quick question on the projected outcomes so maybe one of you would want to answer this. Can you just tell me, since these are goals and new outcomes, how they're different from where we are? For example, just ballpark, because one of the rationales obviously for moving forward with a goal is that it's going to be more than the current service, etc. So particularly with the items that are in the upper part of you outcomes I'd be curious as to what kind of changes in service we can project based on what's happening right now. And I apologize for not knowing enough about what's happening right now. Thank you.

MR. BOSCHELLI: The latest statistics from the police department of Santa Fe was that there was approximately 800 protective custody holds paid for by the City as these individuals resided at the detention center with no services at all, let out between 12 and 24 hours.

COUNCILOR WURZBURGER: For example, my question may not be clear. Your first outcome is that we're going to do 800 offenders will be linked to services. And that's a change from zero. Is that what I'm understanding?

MR. BOSCHELLI: That is not a change from zero, no. Usually 25 percent of those individuals actually link up to services who have DWIs. So we want to increase that.

COUNCILOR WURZBURGER: You're increasing it by 75 percent.

MR. BOSCHELLI: That would be correct. Right.

COUNCILOR WURZBURGER: Okay, so do that for these other items.

MR. BOSCHELLI: Okay. Sixty clients per month will receive sobering assessment and case management and referral services. I do not know what the current stats are. Twenty percent of the clients from detox services will be admitted to a 30-day rehabilitation services. Currently we have just our six beds of detox. We're looking at increasing those six beds to 15 beds for the sobering center. By that, we'll increase bed capacity for longer term

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treatment at RAP because we'll be freeing up those six beds which basically, my understanding will up 16 additional slots for longer term treatment to increase capacity.

The protective custody holds that were being done, 800 with no linkage to services, it is anticipated by the Santa Fe Police Department as well as through the CARE Connection that 80 percent of those individuals would no longer go back into protective custody. We would decrease protective custody holds by 80 percent. Is that the -

COUNCILOR WURZBURGER: Yes. That's helpful.

MR. BOSCHELLI: Would you like me to continue on?

COUNCILOR WURZBURGER: Yes.

MR. BOSCHELLI: 1693 clients per year will be diverted from jail and hospital services. When we talk about hospital services we are primarily talking about emergency room services, at a cost of between \$500 to \$700 just for showing up at the emergency room, not really getting a lot of services outside of a medical clearance. They will be served by the CARE Connection. This is where we're talking about the component of aggressive case management linking these individuals to the providers within our communities so they don't loop back into the emergency room.

Eighty percent of the sobering department clients who complete treatment at the center or an alternative substance abuse mental health provider will support an increase in functioning. The idea here is that over time, you start increasing your baseline of sobriety, even when they do touch law enforcement and/or the emergency room, their level of sobriety is greater. These type of results have been shown in the NCI Center in Gallup and we would model off of that as well as in the Bernalillo County Detox Center. They have done that throughout their county. You first have to get that baseline, but you can start showing that through blood alcohol content.

87 percent of the assessed clients will be successfully linked to the appropriate level of care in the community. We actually have statistics showing that this is possible currently with Crisis Response of Santa Fe. After someone calls our psychiatric crisis hotline and then a mobile service follow-up occurs, we are averaging 85 and actually this year 90 percent successful linkage to a community provider as a result of mobile services touching a provider in the community instead of just making a phone call referral. We anticipate this type of savings also through the whole CARE Connection Network.

A hundred percent of the clients who leave the sobering department without further treatment will receive post-crisis case management services. Once again, this is really the largest component of the CARE Connection, to aggressively case management link these individuals. What we have seen as well as you've seen throughout this nation, we have pocketed service providers throughout our community. The problem is people are not linked. And if they do get a link there is no bridge for them to actually walk over. We anticipate that our aggressive case management services will actually build that bridge to bring them to service delivery throughout our community.

Fifty percent of our sobering department clients will not repeat substance abuse crises for six months following discharge. We anticipate that to be an actual fact. Twenty percent of

the sobering department clients who are referred to and engage in substance abuse treatment through the CARE Connection Center will not repeat substance abuse crises. Thirty percent of the identified high risk clients who are referred to and engage in substance abuse treatment through the CARE Connection will record less than three subsequent substance abuse psychiatric crises in the following 12 months. This is a difficult population. The average is usually seven to nine recontacts. We anticipate that we can drop that by at least a third to two-thirds. So we're talking about cost savings as well as community savings throughout.

We are going to increase the number of detox beds by 300 percent in our community. Police and EMS staff time, responding -

COUNCILOR WURZBURGER: You don't have to go down there, because that was clearer. And this was important for me, because I think one of the possible interpretations of what we're trying to do here or what is being proposed is this is just a building where the same things are going to happen in the same building. And that's why I wanted you to go over this to give us an understanding of what we can expect as governing bodies if your projections are correct in terms of changes in increased services and changes in results in the population. So, thank you and thank you all if you already knew all of that.

COMMISSIONER SULLIVAN: I believe Councilor Heldmeyer has a question.

COUNCILOR HELDMEYER: Well, first I just wanted to clarify something because Mike handed me, as I walked in the door, a handwritten note that says the 13 current inpatient treatment beds will be added to by the six beds that are currently detox beds for a total of 19. So we are increasing by six inpatient beds. And that's the total increase you anticipate for inpatient.

MR. BOSCHELLI: Yes.

COUNCILOR LOPEZ: Excuse me.

COMMISSIONER SULLIVAN: Mayor Pro-tem.

COUNCILOR LOPEZ: Mr. Chairman, I'd like to have Councilor Heldmeyer go over that again because if I think I heard what I heard it seems - six beds? There will be six beds in this new facility?

COUNCILOR HELDMEYER: No, this is at the current RAP facility where they do inpatient.

COUNCILOR LOPEZ: Right.

COUNCILOR HELDMEYER: They have six currently detox beds. Those six detox will be part of the detox beds at the new facility and they anticipate, if they have the funding for it, which you always have to take into account, if they have the funding that those six beds which will be freed up will be additional inpatient beds. So we will have a grand total of 19 inpatient beds up from the 13 that currently exist. So in terms of inpatient treatment it will be a small increase. Percentage-wise it's a big increase because we don't have much to begin with. But in terms of actual numbers it's a small increase.

COMMISSIONER SULLIVAN: There's 25 beds planned in the sobering center.

COUNCILOR HELDMEYER: Eventually.

MR. COOPER: Mr. Chairman, Madame Pro-tem, I just want to clarify that because I don't want to create any confusion by throwing all of these numbers around but in the sobering center or detox center, our department, there will be 15 beds, which is short-term detox services. Those beds will be shifted from the RAP program, where there are currently six. So we'll expand greatly the capacity for detox services. Now what that does as an impact in the broader community, is that it frees up the RAP Building for an expansion from 13 long-term in-patient treatment beds to 19 long-term in-patient treatment beds. But that is not a part of the center. But it is an impact to the system of care in the community, which is a very positive result.

COUNCILOR BUSHEE: Still on the south side of town.

MR. COOP: Still on the south side.

COMMISSIONER SULLIVAN: If you say there'll be 15 beds, why does it say on this data sheet there will be 25?

COUNCILOR BUSHEE: And then five long term.

COUNCILOR HELDMEYER: No.

COUNCILOR BUSHEE: That's what it says here.

MR. COOP: Twenty-five, Mr. Chairman, is the maximum allowed by the state standards, but it will be implemented on Day One with 15 beds because of affordability issues.

COMMISSIONER SULLIVAN: So phase one is 15 and then you plan to go to 25, funding permitting, etc.

MR. COOP: That's correct.

COMMISSIONER SULLIVAN: And the need, demand, permitting.

MR. COOP: That's correct.

COMMISSIONER SULLIVAN: Mayor Pro-tem.

COUNCILOR LOPEZ: Just on that point, Mr. Chairman. On the six long-term beds that are going to be added to the RAP Center, I guess I need to ask the director of the RAP Center, Mr. Chairman, I don't know who should answer, but how soon would you have six more long-term beds available? Because right now, I've had people come and talk to me, Oh, their kid just got out of the hospital because they overdosed. They can't get them into a treatment for like four weeks. They're like, What am I going to do with this kid? He's bouncing off the wall. So how soon would six more beds be available for long term?

MR. SILVA: It would be immediately. And one of the reasons for that is right now, all of the counselors have to do these assessments and that's real time consuming. So when you're freeing up them from doing these assessments and they're done now at the assessment center, we can shift our staff to be able to cover the six almost immediately.

COUNCILOR LOPEZ: Okay, then a follow-up question, Mr. Chairman, is on the assessment, I don't understand how the municipal court has an assessment program. I don't really see it fitting into here. In fact I don't even see it mentioned. Because I thought that their assessment center referred to you presently.

MR. SILVA: I'm not understanding the question. What they do is they do screening.



COUNCILOR LOPEZ: What I understand is the municipal court provides assessment services. They do assessments. How does that fit into here? I thought that they did assessments and did referrals to you. I just want to make sure that we're not duplicating.

MR. COOP: Those are DWI assessments that are state mandated and they're done by staff that are funded, actually, through the DWI Council of the County of Santa Fe. So that could potentially move and be a component of the center but it wouldn't change the funding. It would only change the location of the assessment.

COMMISSIONER SULLIVAN: I think, Mr. Sims, did you have anything you wanted to add to that? That's our DWI fellow.

COUNCILOR LOPEZ: Well, I guess I'd just like to get it in the record. I think municipal court is an important piece of this. I'm not sure why it's not happening that way, but you know, the City, they do have funding. They do have a screening center. Is it your intent to take the municipal court screening center over and move it into this facility?

DAVID SIMS: I'm David Sims. I'm the DWI Program Director. And that has not been determined as far as the site of where the assessment would actually take place. The DWI Program currently provides staff for both municipal court and magistrate court to do the screenings that you're referring to that make referrals out to treatment providers. And the staff that is provided for municipal court and magistrate court, right now the magistrate court staff is not housed in the magistrate court building. It's housed off-site. So again, as Mike might have said, it's not been determined as to what the actual location of the screenings will be or if in fact how it will integrate with the court systems either at magistrate or municipal court. However, they will be coordinated certainly.

COUNCILOR LOPEZ: I want to pursue that a little bit more because in ten years of discussing this I'm sure it's come up. There is a fear, I think, the municipal court does rely on the screeners. Are you going to take those screeners away from municipal court? Are you going to physically move them? Are you saying because you pay for them, if this happens that they're going to lose their screeners. Because that is a concern that I've had presented to me and I'm kind of proud of a lot of the programs in municipal court and I certainly don't want to undermine those programs and I want to support these as well. And I'd like to have that answered.

MR. SIMS: I'll answer it in a couple of different ways.

COUNCILOR LOPEZ: See if I like which answer. Answer number one.

MR. SIMS: Municipal court is a signer on the MOU with the CARE Connection, currently, number one. Number two, Judge Gallegos was last year the chairman of the budget sub-committee of the DWI Program and is currently one of the three members of the budget sub-committee of the DWI Program that recommends the funding, including the funding for the screening staff that provides the screenings at municipal court. So she, as directly involved from municipal court has very direct input into that process and into the funding for it and one of the things as Mark Boschelli has talked about the remote, being able to go here and there and yonder to provide the services. That's one of the concepts that have been discussed extensively in the context of the CARE Connection.

One of the things that is very important as discussed by the members of the CARE Connection is that it not be something that is fixed to a specific building, but that that can be an access point but the access point to the system can be at any place, at any of the providers, any of the courts, whatever is necessary to make sure the connections are made and the services provided in a comprehensive fashion.

COMMISSIONER SULLIVAN: I believe Councilor Heldmeyer has another question and then I'd like to continue on and finish the presentation and we can get a little more into the discussion and the questions. Councilor Heldmeyer.

COUNCILOR HELDMEYER: A single question. Very ambitious projected outcomes. We're not given any of what baseline is. You're going to tell me that you don't have baseline yet on a lot of these. What happens if you don't meet these projected outcomes? Is there going to be anything - I was told this morning and we had a rather spirited discussion this morning about a number of issues concerning the CARE Connection where I was given a lot of information that I had never heard before, including an answer to direct questions that were related to things I heard and a lot of things I was told was well, yes, we presented it like this but it's really like this.

Among those new pieces of information, that it was highly likely that this was going to be subcontracted out to a non-profit. That it might be the case that several different non-profits that do assessments and get paid to do assessments. That was brought up this morning. So it kind of sounds like things are kind of in limbo. But especially if you're contracting out to non-profits. But even if you don't. Even if everybody here is a direct employee of CARE Connection, what if you don't meet these very ambitious guidelines? Is there going to be anything in the MOU, in the contracts that says if you don't make it, we're going to give somebody else a shot at it, or we're going to rethink this whole thing?

MR. COOP: That's a very difficult question to answer, Councilor.

COUNCILOR LOPEZ: I think she's also saying are you going to have performance based contracts with the vendors that will guarantee they're either achieving these goals or they are out? Right?

COUNCILOR HELDMEYER: I thank Councilor Robertson Lopez for her expertise in purchasing which I don't have.

MR. ANAYA: Mr. Chairman, Councilor Heldmeyer, in order for us to be eligible for us to able to receive additional dollars for federal resources, state resources, things have changed over the last few years and we have to build in outcome measures, evaluation measures. So we have to build those in so we can assure, when we do ask for those resources that we have the mechanisms in place to show we've performed. So yes, the answer is yes.

COUNCILOR HELDMEYER: Well, but there's another layer to that. We have to have outcome measures, but if the outcome measures don't meet these very ambitious guidelines, for instance, it says 60 clients a month will receive case management, which was described to me this morning was intensive case management. And I would agree, intensive case management is a very valuable tool. It's a very expensive and labor intensive one. I'm not sure three case workers can do intensive case management with 60 people, depending on what

categories they're from.

So it's not just you have to have outcome measures, because I understand you have the assessment part, but if these outcome measures are not met, what are the ramifications?

MR. ANAYA: Mr. Chairman, Councilor Heldmeyer, we're at a point relative to - I agree with you that potentially the case managers may not be able to handle the case load. So let's just start there. The reality is what do we have now? What do we have today? And I think what we're saying here, me and the rest of the CARE Connection, is that we may not have every answer for you and every single i and every single t crossed. But we do know from experience, based on grants that we've been successful in receiving in Santa Fe County is that if you don't ask for it and you don't try and you don't start somewhere, and I think the somewhere where we're at is a good place, that you're never going to get anywhere.

The policy makers, City Council, County Commission, brought us to this issue and we're coming back to you. Those hard decisions are very difficult decisions that I understand that your questions are raising, but that's why we're back here. But I respect those and we don't have every single answer but what we do know is we have a lot of resources in place where we could at least get started if we can just get to the point where we can fill that gap. But we don't have every answer for you.

COUNCILOR HELDMEYER: I understand that. I am just saying I would be more comfortable with realistic expectations. I understand this is a starting place. So to be told that we're going to go from a starting place to extraordinarily high outcome measures makes me nervous and makes me wonder about other numbers in this whole packet. I would be happier if you said, You know, we're just starting out and this is the best we can do and this is what we hope to do. That would make me more comfortable, frankly.

MR. ANAYA: Mr. Chairman, Councilor Heldmeyer, Commissioners, we want to come back to you with those contracts. You will be in the process of approving those and working with us on those if it's a joint project and we just want to, we want to get going somewhere. But I agree with your comments and I think that we have a place we can start.

COUNCILOR HELDMEYER: Thank you.

COMMISSIONER SULLIVAN: You're welcome. Let's go on. I think we have your concerns and those of the Mayor Pro-tem noted and we want to refine these goals and these numbers that the City is interested in and I think also I just want to mention from the County's standpoint, we've given the County staff a very difficult assignment and that is of trying to pull together many vested interests that are out there, that are involved in this and a number of turfdoms to bring them together. And that's been for Mr. Anaya an extremely difficult and one of the primary jobs to get all these cats herded into one place. And I think that we're well on our way to it and I would hope that in the community, when issues arise we won't have tin can clinking. We'll have these issues come forward and not be back-doored. We're trying to keep everyone on track here. You see a list of people who are in the loop and have the opportunity to make their concerns known in that context. I hope we keep that spirit of cooperation going. Go ahead, Mr. Estremera-Fitzgerald.

MR. ESTREMERA-FITZGERALD: Thank you, Mr. Chairman. Next up is

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going to be I believe Dr. Ray Anderson from Life Link, La Luz. And I believe also, I wanted to mention, Mr. Chairman, that helping Ray Anderson and working with him right now will also be Carol McFall from Santa Fe Community Guidance Center.

## Operations

RAY ANDERSON: As mentioned, I'm Raymond Anderson. I'm director of operations at the Life Link and also the database subcommittee chairperson. Some of the other points have really been talked about a lot -- assessment, sobering center, and so I'll let Carol take care of that. I want to emphasize how important the data is in all of this. What we've been talking about, some of it relates directly to gathering data. And once we can gather data on these particular populations we can actually begin to secure future funding to offset some of the figures that you see on the sheet.

Life Link has already partnered with Santa Fe County in doing a SAMSA grant, federal funding. These grants are available and the feds love to see partnerships. They love to see collaborations in communities coming before the feds in a united effort, City/County would present a really good front to be able to get extra funding to provide services. It's also a unified way to fill gaps that we're seeing in our community. As the CARE Connection works, we can identify gaps as a unified body probably easier than separate entities doing their own things. So we'll be able to start filling those gaps and writing funding to fill those gaps.

One of the major things that's happening now, and I can tell you as a treatment provider, and that is that there is a lot of redundancy in assessments. They end up going to RAP, getting an assessment there. They may get another assessment at the Life Link four days later, end up over at Crisis Response, PMS, get another assessment there. No matter what pot we're talking about of money, and a lot of us work out of state money and County money and different types of funding, it's a drain to whatever pot. And so we're hoping to have a place where these assessments can be given and shared with the other community providers that have a need to know. First of all, it's redundancy of time, of staff time at these places. David Silva has already made mention of that, how much staff time is taken up in doing assessment things.

So if we can even tackle that, the redundancy of assessments and doing these things, it will help a great deal to alleviate some of the funding woes that we're currently seeing. I don't know if there's any questions on the data part.

COMMISSIONER SULLIVAN: Thank you, Dr. Anderson. Someone else was going to add to that?

MS. MCFALL: I was going to present because we didn't think that Ray was going to be here earlier, so I was just here as back-up. I would like to bring up one other point about redundancy and about perhaps the data that does get collected. The City Police Department collects information. The jail collects information. All of the providers collect information. We do not have any kind of centralized clearinghouse for that kind of information that gets collected so that we can share it. There's no one entity or any person in charge of making sure that that information gets collected and then disseminated out to us.

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We have formed different kinds of collaborations that were paid for with different sources of funding. Crisis Response of Santa Fe and the City Police Department have worked pretty closely together in the past in looking at jail diversion services along with RAP. That's kind of where some of this baseline information is coming from on the outcome data sheet that you do have. So there is some baseline information available. What we are anticipating is that many of those gains that have been achieved in small pilot projects already that have been in play can be achieved again and we're hoping that those can be maintained with ongoing funding and the collaboration of all of the providers that participate within the CARE Connection.

COMMISSIONER SULLIVAN: Okay, let's talk about budget. Is that next? That's something that always opens our eyes.

MR. ESTREMER-FITZGERALD: Michael's coming right up, sir. I just wanted to remind the Chair that at some point I will out to you when Senator Griego gets here so we can have him speak. Some of his comments will also pertain to what we've been talking about. Michael, come on up.

#### **Budget**

MR. COOP: Mr. Chairman, Madame Pro-tem, I have an amended single sheet to give you. [Exhibit 2]

COUNCILOR HELDMEYER: What about the one I got as I walked in.

MR. COOP: You already have it.

COMMISSIONER SULLIVAN: This is dated January 16<sup>th</sup>, right? It's on the back of the CARE Connection. We'll have questions later. Okay, tell us about this summary of financial projections, January 16, 2003.

MR. COOP: The summary of financial projections that you were just handed is the same piece you were given in your packet but with a footnote. And the footnote describes a projection that we included in the budget for Medicaid reimbursable revenues. And so what this shows as a footnote is that calculation, how we projected it and the effect on the operating deficit.

COMMISSIONER SULLIVAN: Jaime, mine doesn't have the footnote.

COUNCILOR LOPEZ: You don't have the new one.

COMMISSIONER SULLIVAN: I need a footnote one. Okay. Go ahead. What's the bottom line on this? Who does what and who pays how much?

MR. COOP: The bottom line on the operating budget is, including the Medicaid reimbursement projection, a deficit of \$15,000 in the first year of operations, \$48,000 and change in the second year, and \$129,000 in the third year. So there is an operating deficit projected that grows because staffing is being built up over this three-year period.

COUNCILOR BUSHEE: What's the plan?

MR. COOP: The plan is to go seek further funding once we leave with a commitment to engage in a joint process, which is what we're hoping that we can get tonight from the two governing bodies.

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COUNCILOR BUSHEE: The further funding would be from either of these bodies, or state or federal, or somewhere else?

MR. COOP: All of the above. But the initial approach would be to the state legislature during the legislative session. We would approach them as a County/City initiative to talk about funding for the project, both on an operating level and capital level. So what you have here is just the assured support for the project without going out and seeking grants, without seeking legislative support, etc. So this is basically a minimum budget. This is without further funding seeking for operating.

COMMISSIONER SULLIVAN: Is that the end of your budget presentation?

MR. COOP: Just on the operating. What this shows is the major contributions. And then for the capital, which is the bottom half of the page, we have \$1.7 million identified for capital. We have purchase plus about half of the renovation expense identified at a shade over \$2 million of the facility. So there is a shortfall of \$330,000 projected for the purchase and renovation of the facility and we're missing yet a projection for the renovation and retrofitting for the detox portion of the plant. County staff has proposed that we do a small contract with someone to get real good estimates about the cost of the renovation.

So we're probably looking at something close or something approaching a half million dollar shortfall for the purchase and renovation.

COMMISSIONER SULLIVAN: Okay, let's see. We have some questions. First of all we have Councilor Wurzbarger and then we have Mayor Pro-tem -

COUNCILOR LOPEZ: I'm not going to raise a question but I would like to share this information. Everybody's been seeing us go out and come back in, go back and come back in. If this body would agree to this, I think we all are committed to getting this center going. I think we're all committed on the need for a detox facility. I think that's a given. I think what we're having a little hard time with is some of the action items. So what I was going to ask is if it would be okay for everyone if before we leave we confer with the County Clerk who I guess keeps all the meetings and see if we could adjourn the meeting and reconvene it next week, possibly at this exact same time on Thursday with the idea then we can properly notice the items to have action and I think there's a lot of questions that if we stay with it over the next week we can get answers and take that action.

Because I know we're working on a time frame with the legislature but there are a lot of questions that I think people have so I'll be making that motion later, just to let the Council know that we may just use this meeting to ask all of our different questions and come back next week for final action because of the noticing issue.

MR. ANAYA: Mr. Chairman, Madame Chair, if I could make a suggestion. If at that point, I think that sounds fine, but do you have a City Council meeting next week? Or you don't?

COUNCILOR LOPEZ: Not next Thursday.

COUNCILOR BUSHEE: There's five Wednesdays in January I guess.

MR. ANAYA: Because the legislative process is going to go on for 60 days and it's my suggestion to you that if the Commission was willing to take action that they potentially

could now and that the City Council could defer that action until their next City Council meeting which would still afford us time within our legislative process.

COUNCILOR LOPEZ: I would love to speak to it but that is really not in the spirit. I think there are some questions and somehow if the County takes a certain vote and locks itself in and there's wiggle room to negotiate on this. Our City Manager has questions and I'm just trying to provide a process. I think that's putting the cart before the horse if we're really going to be doing this in tandem, let's do it in tandem.

MR. ANAYA: That's fine, Madame Chair. It took a long time to get this particular meeting scheduled, but the Commission, it's up to the Commissioners. I just offered that as a suggestion possible.

COMMISSIONER SULLIVAN: Okay, we had some quick questions or comments from Councilor Wurzburger and then I believe from Councilor Heldmeyer.

COUNCILOR WURZBURGER: My comment was about the unknown being the infamous builder on the Council. I don't understand why there weren't bids yet or that you couldn't have gotten some notion of the cost and of course that's the way to do it is go out and get an estimate. Could I just know what happened there? Since we've been working on this for so long. It seems like that would be the easy piece but I don't know.

MR. COOP: Staff recommended that we bring in a contractor or an architect and get a projection that way.

COUNCILOR WURZBURGER: Okay, that's why we didn't get it.

COMMISSIONER SULLIVAN: You're still missing the projection for the detox.

COUNCILOR WURZBURGER: I think that is a big piece in this because you're talking about the expense of renovating the entire building or the expense of renovating just the -

MR. COOP: Just the sobering detox component.

COUNCILOR WURZBURGER: Just the sobering detox. So you're not going to do any renovation anywhere else in the building.

MR. COOP: That renovation is already here. That's the second line item under expenses.

COUNCILOR WURZBURGER: The \$273,000. I see. Okay. But that's about a third of the building if I followed your numbers correctly.

MR. COOP: Yes.

COUNCILOR WURZBURGER: Okay. Thank you.

COMMISSIONER SULLIVAN: Okay, Councilor Heldmeyer.

COUNCILOR HELDMEYER: Yes, and that's related to my question, which is these amounts are listed as purchase of the facility and is that the total cost of the building or is it the percentage of the cost that is going to be used by this center?

MR. COOP: That is the total cost of the building.

COUNCILOR HELDMEYER: So you are not backing out the portion of the building that is going to be exclusively County.

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MR. COOP: That's correct.

COUNCILOR HELDMEYER: Thank you.

COUNCILOR LOPEZ: Why? I'm sure you talked about it, but why?

COUNCILOR BUSHEE: It's my turn now.

COUNCILOR HELDMEYER: Well, that's a follow-up.

COUNCILOR BUSHEE: That was one of my questions actually.

COMMISSIONER SULLIVAN: We can ask Robert to discuss that.

MR. ANAYA: Mr. Chairman, Madame Chair, if you look at the budget, legislative appropriation, \$448,500, those were County – the County went to the New Mexico State Legislature and asked for those revenues relative to a program. That legislation says DWI Program Center in the legislation. In addition, the \$300,000 under detox and treatment, the majority of the people that will be housed from the County staff side, it's the entire Health Services Division, the majority of the employees are employees of the DWI Program. So as the language is written the DWI Program Center and the DWI excise tax money, it is an allowable use for those resources if the state legislature reauthorizes them for acquisition.

COMMISSIONER SULLIVAN: Excuse me, but we also have County monies in the operational budget as well, Robert.

MR. ANAYA: Mr. Chairman, that's correct. In addition. That's correct.

COUNCILOR BUSHEE: Councilor Wurzburger wants to follow up on that and I'll yield –

COMMISSIONER SULLIVAN: Well, let me ask if there are any County Commissioners who have a question here at this juncture so we can spend some equal time. Commissioner Anaya, any questions at this point? Okay. Commissioner Campos, any comments, questions? Commissioner Montoya?

COMMISSIONER MONTOYA: No.

COMMISSIONER SULLIVAN: Commissioner Duran is excused. Okay, now we'll go back to the obstreperous ones. Okay, let's see, where were we? Councilor Bushee and Councilor Wurzburger.

COUNCILOR WURZBURGER: So, I like to make all of these assumptions explicit. This means we're buying a building together and we're owing it together?

COMMISSIONER SULLIVAN: Santa Fe County has already bought the building.

COUNCILOR WURZBURGER: You've already bought the building. So, I hadn't read this, Commissioner. So does this mean that –

COMMISSIONER SULLIVAN: We have a lease option on it. We didn't buy it.

COUNCILOR WURZBURGER: I didn't think you'd bought it yet.

COMMISSIONER SULLIVAN: We have a lease option.

COUNCILOR WURZBURGER: What I'm saying is is the ownership projected or is it open that – are we doing this together or we're giving \$500,000 for the purchase of a County building? Not to make it overly harsh.



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COMMISSIONER SULLIVAN: Robert, did you want to comment on that?

MR. ANAYA: Mr. Chairman, Madame Chair, given prior experience relative to administering a facility, I won't say it can't be done but it probably would be more beneficial if one entity or the other had ownership on it, but that would be a question for legal staff to review and make recommendations. I would put on the table for the Commissioners' benefit that the infusion and the amount of money infused from the party could be a determining factor relative to ownership but I think the legal staff could review that and bring recommendations back to -

COUNCILOR WURZBURGER: I see our City Manager pulling his hair out so maybe it wasn't such a hot idea.

COUNCILOR BUSHEE: And he doesn't have much.

COUNCILOR WURZBURGER: At least it's a clarification. I would like to at least understand it and explore the concept. As we've been working on so much in water we've got a new people around the table at least for a while. Thank you, Mr. Commissioner.

COUNCILOR BUSHEE: Let me go ahead and try and take my turn because I really didn't if you didn't, if you wouldn't mind.

COMMISSIONER SULLIVAN: You were pointing at -

COUNCILOR BUSHEE: She wanted to follow up on the building part. I have really just a few questions.

COMMISSIONER SULLIVAN: That's quite all right. I thought you were deferring to -

COUNCILOR BUSHEE: no.

COMMISSIONER SULLIVAN: You weren't deferring.

COUNCILOR BUSHEE: Robert -

COMMISSIONER SULLIVAN: You butted in then, Councilor.

COUNCILOR LOPEZ: You're just not used to dealing with women.

COUNCILOR BUSHEE: The legislative appropriation accumulation, which legislative sessions were those monies accumulated? Because I recall at least nine years ago going with some County Commissioners, all faces different, and asking for those legislative appropriations, jointly, actually.

MR. ANAYA: Mr. Chairman, Councilor Bushee, there's one appropriation that was sought early on of \$100,000 as part of that \$448,000 that was part of the old detoxification facility. When the City no longer was participating in the project, Santa Fe County, through our lobbying activities went back to the New Mexico State Legislature and requested reauthorization because those funds were expiring and we were requesting reauthorization to use them to build a newly constructed facility off of Highway 14. So at that time the language on that one \$100,000 allocation was changed to DWI Program Center.

Subsequent to that, all of the legislation since that time has been brought forward in that manner as well.

COUNCILOR BUSHEE: Let me just - I don't think anyone up here, I think we're all ecstatic that the County and the City and all of the other CARE providers are on the

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same page as to treatment. Okay? That hasn't happened. That's new. That's what taken so long. And unfortunately, the math still has to be worked out. So there is an issue here, I'm sure, for a number of City Councilors and we've gone, really, this has been nine years for me and I'm sure as many for all of you out there. However, given the fact that you started out with a budget that's in deficit on both capital expenditures and operating long-term expenditures and pretty much not - I know the Governor is interested in this and I'm sure the legislature is interested in this and we've got the Senator here to speak to that.

However, if they do not, and Jaime started this conference by saying we're going to be opening doors and windows but really what we're down here today is opening pocketbooks and wallets. So when we need to look back to exactly how much the City's contribution needs to be, it needs to come back to how much of it is for the joint City/County detox treatment and CARE Connection Center, not for how much of it is the building. That portion, I don't believe the Council really wants to. Because if you're going to come back and ask us to look deeper into our pockets, it is not going to be for me to fund the County's Public Health Building. And I think I just start to speak for myself here, I would really like this.

Since it's been pretty much either publicly or not publicly stated that we can't vote as Councilors here today to take action, this has been to the Public Works Committee umpteen times in umpteen versions in umpteen locations. Since we've pretty much in concept can say I think here tonight that everybody is in agreement that we're going to tackle this, that we're going to have and the best word in this whole thing is connection. We're going to have connections now. We're going to have links. We're going to have people no longer duplicating services or wasting, whether it be police or emergency room time and all of that. That's wonderful. But we still have to get down to the fact that the City and the County still operate with joint powers agreements often and if this thing is going to be somewhat under the auspices of both City and County we've got to really fairly and equitably make those divisions as to what is for the CARE Connection Center and what is for the County's operations.

So my recommendation tonight would be that we have this discussion. We get everything out on the table, but that we have to go back at the City level and at the committee levels and really discuss exactly how much we have available. We have a change in our staff. Fred Sandoval is no longer there to advise us and we'll need to ask those questions because we have a half million dollars in here that I know I've struggled to hold on to and keep it and know that we're going to expend it. Because it's been disappointing. Two years back when it wasn't expended - you think this is not an important issue. When people came out nine years ago and said how important this problem was and action didn't follow up, some of us were fairly disappointed.

I'm excited that everybody in this room wants to go the same direction but the logistics really still are important. So I would hope that we would have the opportunity, whether it's a week from now or two weeks from now, to have this go back to the Council in terms of the committee level process and really work out the nuts and bolts and the figures. And really, let's not gloss it over as to the building is going to house everything. We need to break it down to what we have to look to fund. Because I'm hoping that we'll get the monies elsewhere, but if

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you don't you're going to be back here. And I know that the Council has some heartburn about funding the County's Public Health Services, in terms of the building.

MR. ANAYA: Mr. Chairman, Councilor Bushee, I just want to briefly respond and say that the action to lease-purchase the building relative to where we're at at this point was in fact Commission action based on recommendations made and I would just make a side light point that I think is very valid and important. Mr. Sims came up here earlier and expressed that relative to the overall process and the screeners in particular that come from magistrate court, not municipal court, they would be housed as part of the staff side of this facility and it would be a huge benefit to the community to have them adjacent to the CARE Connection.

In addition to that it's important to note that we're talking about indigent fund staff and DWI staff that directly relates to the public and to the tie between what the CARE Connection and sobering center will do. So those were some of the issues that the County Commission discussed. Those were some of the issues that they weighed in on to make the decision relative to where we're at today.

COUNCILOR BUSHEE: And I understand that and those are valid ways to fund the monies that you get for both DWI and for assessment and for all of those things, which is very disproportionately, and simply just that the County is the one that receives the funds and expends them and that's excellent. However, we still come back down to the long-term operations of this wonderful, new connected center and the City really can't be expected to foot the bill for things that you do receive funds for and you just simply expend them. So I'm not - it's just you asked for commentary and we're at that point now of we want to see this succeed. It's probably going to need more operations monies than we have to come from either or these entities but we've got to get real clear and I would hope that we would address this very quickly at whatever committee and Councilor Heldmeyer is here. She's the chair of Public Works. Councilor Robertson Lopez is here. She's the chair of finance. I'm sure we could put this on a fast track at the committee level.

COMMISSIONER SULLIVAN: Okay. I think we've got the City's view here pretty well.

MR. ESTREMER-FITZGERALD: We could bring up Senator Griego because he is here. There is one clarification I'd like to have my co-facilitator make. MaryAnn Shaening.

COMMISSIONER SULLIVAN: Okay. Make it quickly.

MARYANN SHAENING: I'll make it very quickly. I just want to point out to everybody here and particularly to Councilor Bushee and her question, if you look at this budget, there isn't a penny in here on the operating side that has anything to do with the County's Health Department. There isn't anything under capital expenses that has anything to do with the County Health Department except for one third of the purchase price. So the math is really not - there's nothing on here that's supporting the Health Department except that one third of the purchase price if you wanted to divvy it up. But if you look at the capital expenses, they're all for the center, for the assessment department, detox department, data department.

So the only money on here that's really related to the Health Department is one third of

the cost of the building. So if you look at that and then look at relative to what the County has on the table right now, it's considerably more than a third. So I just wanted to point that out. It's not hard math. There isn't anything on here that runs the County Health Department other than that one third of the building.

COMMISSIONER SULLIVAN: Okay. Let's do this then now. Let's ask Senator Griego to give us the benefit of his experience and opinions on this and then after that, Jaime, perhaps what you might do is go through what will ultimately be action items and at least identify those and discuss those with us and then after that, if we have a few minutes we'll take public comment. Senator Griego.

SENATOR PHIL GRIEGO: Thank you, Commissioner. It's a pleasure to be here.

COMMISSIONER SULLIVAN: It's a pleasure to have you here, sir.

SEN. GRIEGO: And I want to thank you for inviting me here to speak to such a very important issue. This detox center that we're talking about is something that has been desperately needed in this community for such a long, long time. It's troubling sometimes to think that things that are so desperately needed like this are held up because of dollars. But that happens everywhere. And so I want to assure the Commission, the County Commission and the City Council that I will be there at the head of the parade trying to get the necessary dollars that we need to fund this project not only one time but as many times as we need to at the legislature.

We continually fund our prisons yearly, and there is no reason that we can't continually fund a detox center that is so desperately needed and is going to help our citizens that are in desperate need of tremendous help. I know; I've been there. I'm an alcoholic. When I admitted, when I came out of denial and admitted that I had a drinking problem, I had no one to turn to. I didn't know where to go or what to do. Had it not been for my sponsor that helped me along and got me into a 12-step program. Had it not been for my higher power, Jesus Christ, and when I speak about my sobriety I have to speak about Jesus Christ because it was him who gave me a second chance in life.

It gave me an opportunity and it got me to where I am today. I'm 21 months sober today and 81 pounds lighter.

COUNCILOR BUSHEE: You're shrinking before our eyes.

SEN. GRIEGO: But when you talk about the 81 pounds I think the only one that really appreciates it is my horse. But let me just tell you, we will be there. You have not to worry, because I am not only one Senator who have been looking forward to the establishment of this location and of this badly needed facility but you have Senator Maes, you have Senator Rodriguez. You have Representative Lucky Varela, Max Coll, and the Speaker of the House, probably one of the most influential and important people in the state legislature who have been looking forward to this and know, absolutely know the desperate need for this facility.

On January 23<sup>rd</sup> we're going to have an open house and we're going to have an open house for the new RAP Center. It may be able to house more people than need. How did this come about? It didn't come about by RAP coming to local government. It came about by RAP

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applying for CDBG grants, Mortgage Finance Authority money, New Mexico Finance Authority money. Those monies are available for institutions like this. For facilities that are going to help people like myself become productive citizens of society again.

Most alcoholics and people who are addicted to drugs don't know where to go. A facility like this can not only assist them in becoming productive citizens but can educate them on how to fight the addiction. Because the addiction does not go away. It's a day to day struggle. In my 12-step program you learn to deal with it one day at a time. Today, I'm not going to drink. Tomorrow? Who knows? But I just deal with today. And I pray and I thank God every morning to help me to stay sober today. And I thank God every night when I go to bed for keeping me sober.

But we need facilities like this. I don't know how much more I can tell you because I'm speaking from the bottom of my heart and I'm speaking to you from experience. People like me need facilities like this. I just happened to be able to financially keep myself together with the assistance of my sponsor, with the assistance of my home group, my Bible study group and other alcoholics who were concerned about my sobriety. Because alcoholism is a disease that you'll never be cured of. Death is the only way you'll be cured of alcoholism. And no one understands an alcoholic like another alcoholic. No one understands the urges and the cravings. No one understands what an alcoholic has to go through when you go through detox - the shakes, the bloody noses, the cracked limbs, the cramps.

And the idea that in your mind that if I could only have one drink all of this would go away. But you fight it on a daily basis. You fight it 24 hours a day. We need facilities like this to help those who don't have the financial wherewithal to go to Sierra Tucson for 30 days. Or to go to Michigan for 30 days. They need something local. They need something here. Not only will this help these people fight the addiction but it educates them on how to fight and how to continually fight it. And they'll have someone to call someone to respond to when they're in desperate need.

You need to move on this. We've been waiting a long time. As you said, Councilor, nine years. The monies will be available. I understand the concerns and I understand budget issues because I was on the City Council Finance Committee for 14 years. I understand where you're coming from. I understand that anyone can go out and buy a Mercedes; it's maintaining that Mercedes is where the cost comes in. I understand those things. I'm a businessman. But I can assure you, under this administration Governor Richardson has already said that his priority is treatment centers. I've spoken to Bob Schwartz. I've spoken to the Governor.

We will not spend one dollar on brick and mortar for prisons under this administration. Our monies are going to go to treatment centers. Our monies are going to go to facilities to help those people who are in desperate need. And not only with this help prevent people from going out and drinking again, but it will also help prevent domestic violence. Most alcoholics who are married today have been involved in one situation or another regarding domestic violence. This is a badly needed facility and I come here as a State Senator representing Santa Fe County to ask you to please move forward on this.

I don't know what kind of action you have to take tonight, but if you have to go back to

the Finance Committee, Madame Chair I ask you to please put this on a fast track. We've been waiting a long time and there are people out there who are in desperate need. Children, drinking at the age of nine and ten. Alcoholics who are calling me, just wanting to talk. Mothers, fathers, sisters, brothers, who have called me to talk to their relatives. To try to convince them to get into a program. RAP is doing the best job that they can possibly do but they don't have the facilities to take in every one who needs to be taken in.

You look around the state of New Mexico. I don't know how many times we have tried to place people in treatment centers in New Mexico, and there are no beds available. So we need to move forward. We need to work with the counties around us, with Rio Arriba County and help them produce and build their own detox center, their own treatment facility. And we're working with Senator Martinez and Representative Rodella from Rio Arriba County to do that, to move forward on things like that.

This is becoming an epidemic. I don't know if you've seen the statistics on SWI death. Over 200 in the state of New Mexico in just the year 2002. I praise God and I thank God every morning that I never hurt myself or hurt anybody when I was driving back home and I live 50 miles from here, drunk. Unknowing that I was driving. Waking up in the morning and going out to check my truck to see if it's been damaged waking up in the morning and realizing, How did I get here? The last thing I remember was walking out of the Palace Restaurant. And I couldn't stop. I couldn't stop drinking. I had to have it and there was nowhere that I knew that I could turn to.

So to this day I thank Jesus Christ for coming back into my life, helping me to redevelop that relationship. I thank my sponsor. I thank my 12-step group, my organization, and I thank my home group, my study group, who keeps me sober every day. My family who stuck with me. You have to realize, I don't know if you can realize the loss that you create and the hurt that you create when you're doing these kinds of things. The young kids, the loving wife at home, you destroy all of that. You have to rebuild that and you can't do it alone. You need treatment facilities. You need a place for people like me to go to get help, to get consultation. You need people to develop a relationship with a higher power. Mine happens to be Jesus Christ.

That's what you need. That's what this is all about. I understand the dollars, but you can't place dollars on human life and people are killing themselves. People are driving drunk. We are passing laws in the state legislature, the interlock. It's a prevention. It's a device that can prevent people from driving drunk. But it doesn't prevent them from getting into another car and driving drunk. It doesn't prevent someone, an alcoholic like myself to teach someone else how to blow into the machine so they can drive and go home drunk. There are ways to get around it. The only way to stop it is to educate these alcoholics, to educate these drug addicts, to educate the families of these alcoholics and drug addicts, to educate our children not to drink and not to abuse alcohol, and not to drink and drive. This is a long time coming and it is desperately needed in this community.

So I'm here to ask you, to beg you, to please move on this and I can assure you that we at the legislature will step up. We've been waiting a long time. People like me have been

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waiting a long, long time. I thank God and I thank Jesus Christ that was able not to overcome, but I am able to continually fight this disease on a daily basis. Thank you.

COMMISSIONER SULLIVAN: Thank you, Senator. I think the Mayor Pro-tem has a question for you.

COUNCILOR LOPEZ: Thank you, Senator. You know we're all really inspired by your story and thank you for being so public in it. I think it's helped the community enormously. As we discuss the lack of funding available, it strikes me that if the legislature were to either increase the tax on alcohol or allow us to pass an additional local option tax so we would have a bigger pool of money for treatment. Like for example, the RAP Center could have 12 more beds but there's no funding for those beds. And it seems to, talk about a user fee, let's put the user fee on the sale of alcohol. Is there a possibility that you would sponsor, it could have happened that we could sponsor a greater local option?

SEN. GRIEGO: We need to look at that piece of legislation. The Governor has already indicated that there will be no new taxes. He has indicated that there will be no new taxes and I don't know if he has considered the taxes on alcohol or cigarettes. One of the problems that we have in the state legislature is the Governor has veto power and there's no -- we need to sit down with him and talk to him. There's no sense in trying to pass a piece of legislation that he's ultimately going to veto.

COUNCILOR LOPEZ: It's not a tax; it's a user fee.

SEN. GRIEGO: A user fee. However you want to classify it. The thing is, Councilor Lopez that aside from increasing the tax on alcohol, because if you increase the tax on alcohol or if you increase the user fee, you place a user fee, people can always go to the tribes or to the Pueblos to buy this tax-free. Their numbers will increase. I don't know to what extent. But what we are looking for are not dollars that are going to come into the future. What we need are immediate dollars, dollars that can be available to you in July. Dollars that can come out of our capital outlay program that will be accessible to you in July. Moneys from the Mortgage Finance Authority that will be accessible to you in July. Money from the New Mexico Finance Authority that will be accessible to you in July.

The tax dollars and the tax increase on alcohol, you have to wait before that fund and that pool will grow to the extent or to the amount that we need in order to move forward on this thing. This facility is desperately needed now. We need the money now. The monies are and will be available to you, I promise.

COUNCILOR LOPEZ: I'm just sorry we can't raise that tax because it's obvious that we're not paying for more of the health consequences of smoking from the settlements and the tax. The City will find a way to work with the County to accomplish this. I'm confident about that. But I'm also, I think it's time to have the liquor industry pay a bigger share or at least allow us as a community -- and I know what you're saying between now and future but if we continue and we accept the projections that you've offered here today, the number of people needing treatment is only going to be increasing. And given that I know this is a different Governor. Governor Johnson said No new taxes but I can't help but believe that if we went to Governor Richardson to show, or the legislature in its wisdom did so, how much

need there is for local governments like ours and I think the liquor industry should pay.

SEN. GRIEGO: And I'm not saying that they shouldn't and I'm not saying that the piece of legislation that you're thinking about introducing would not pass. I'm just saying based on the political rhetoric that was espoused during the campaign, it was espoused that there would be no new taxes. Now, did he say no new taxes on cigarettes and no new taxes on alcohol? I don't know. But we can work towards that and if there's legislation that we need to introduce in order to assist the City and the County to move forward on this, we're more than willing to step up. And I understand what you're talking about. But we need to work together in order to get it done. We can't forestall this facility anymore.

And I want to congratulate the City and the County for working together on this issue. It shows that, coming together, things can and will get done.

COMMISSIONER SULLIVAN: We have a question from Councilor Chavez and then Councilor Pfeffer. Councilor.

COUNCILOR CHAVEZ: You mentioned earlier that this administration committed to no new prisons. So having said that, and I guess the rationale now is that we would rather educate and do preventive programs on the front end instead of housing inmates at the back end which is very expensive and it's not a good way to go. Do you see that the state could shift money that's already been earmarked for prison projects to put into projects like this or is that already too far.

SEN. GRIEGO: No, I don't think that's too far-fetched at all. But I think what you need to do is you need to find out, number one, the Governor's economic package program. His tax policy issues and program. His increase of six percent to teachers for educational reform. Those monies have all got to be distributed. Those monies are going to come from different portions where we used to place monies at. Part of that money I'm assuming is going to come from the monies that were expended for prisons. But we don't necessarily have to use 100 percent of those monies for these other things, because there are other avenues that we can take to find the dollars the Governor wants to institute his tax policy package, his economic package and his educational reform package.

And we can get into those issues but that's not the issue here. Yes, we can direct some of those monies. And we can look at that. But we have to know at the legislature that this is in fact what you all want done. This is in fact the resolution that you all are going to pass jointly to bring to the legislature saying this is what we want to do, if that is in fact how you're going to do it. We can step up and we can find the dollars. If we have to take if from the monies that were going to be used to build prisons, we can take a portion of that. But more importantly, we need to move on this. The monies will be there and we will find a way to help you build this facility and maintain it.

Maintenance costs are expensive. The hiring of nurses and doctors and consultants are going to be expensive; we know that. But we do that all the time. We fund the university hospitals. We fund colleges and universities because the cost of maintaining those things is expensive. We want to move forward and we want to let you know that we will be there to help you, not only build this but help you maintain it.



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COMMISSIONER SULLIVAN: Councilor Pfeffer.

COUNCILOR PFEFFER: Thank you, Mr. Chairman. Senator, it's a great pleasure to hear you speaking and to be on this side of the table with you. I think currently the Department of Corrections, and correct me if I'm wrong, has contracts for treatment, not-for-profits, etc., to take care of clients in substance abuse. Am I right?

SEN. GRIEGO: Yes.

COUNCILOR PFEFFER: I don't know whether that's reflected anywhere here in the operating budget. It is not. Okay. It's my understanding that monies from Department of Corrections for subsequent treatment might be sufficient to handle long-term mortgages, etc. and maybe address some of the Councilors' concerns about bricks and mortar. I just want to put that out there and ask your -

COMMISSIONER SULLIVAN: Mr. Parrish is here also. I don't know if you're aware of any funds like that for the jail.

GREG PARRISH (Correctional Services Manager): I'm not familiar with the Department of Corrections. I know they subcontract some of that out.

SEN. GRIEGO: And you're absolutely right, Councilor. There are monies available through the prisons to contract for treatment facilities. But when you have 5,000 inmates how far can that go? When you have the treatment facilities that are being rendered in our institutions today are as good as they can do but it's not as good as can be done with a facility like this.

COUNCILOR PFEFFER: Just as a follow-up, my understanding is there are actual contracts with non-for-profits for treatment subsequent to release and that there is in fact a shortage of beds statewide in regards to this. The Department of Corrections monies are there for this specific purpose if the beds would be built and that those monies might be sufficient to cover bricks and mortar.

SEN. GRIEGO: Absolutely. And that's a supplement that we can look at and use. You're absolutely right.

COMMISSIONER SULLIVAN: Okay, one more question and then we need to move on, from Councilor Heldmeyer. One quick question.

COUNCILOR HELDMEYER: Thank you, Senator Griego. It was very stirring. And I think, I don't know if you heard Councilor Bushee's earlier discussion but I think everyone here is in agreement. The city is in desperate need of detox and in desperate need of inpatient services. And in desperate need of outpatient services. I think you're hearing a lot of questions from the Councilors because we want to make sure that every dollar spent is a dollar spent on treatment, to minimize the amount spent on bricks and mortar, to minimize the amount spent on administration, to minimize the amount spent on things that don't directly result in treatment and I think as the CARE Connection group hears questions that will be answered I hope at the Finance Committee soon, I think those are the nature of those questions because even though you've made wonderful offers about what may be available from the state, the state doesn't want to waste money either because this is a desperate need all over the state. And we want to have as focused a program as possible and to make sure that the money that's

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spent is well spent and is not just underwriting things that are coming under the guise of treatment. I hope you back us up on that.

SEN. GRIEGO: Absolutely, Councilor. It has always been my intention that you need to get the biggest bang for your buck. And I understand that. And having members from the CARE Connection here, they need to agree that number one, they need to work together. They can't come in as one individual group asking for individual funding anymore. The DWI group come in asking for their money. The mental health group coming in asking for their money. Because DWI affects mental health. It's all one. And they need to come in as a unit. And we need to work together as a unit as you all are doing here tonight.

So the CARE Connection has got to work. We need to have an administration that is going to be almost bare-bones in order so that the dollars can get to the patient, can get to the individual who really needs the care and who really needs that big bang for the buck. So again, I congratulate you for working together. I congratulate you for coming together on this issue and I ask you again to move on this issue as quickly as you can. We start on Tuesday. It's a 60-day session, but we only have 30 days in which to introduce legislation, to ask for funding for projects like this. So keep that in mind. I don't want a deadline to drive your decision, but it should - because we've been working on this thing for nine years now. But we need to move on it. So I ask you again, Chair Lopez, to at least bring this up on the agenda, Councilor Bushee, Councilor Heldmeyer, Chavez, we need to work on this. Councilor Pfeffer, it's extremely important.

Commissioner Montoya, Commissioner Campos, Councilor, Commissioner Anaya, really need to move on this.

COUNCILOR LOPEZ: Could I just raise in -

COMMISSIONER SULLIVAN: I think we need to move on and I think perhaps Ms. Shaening has some suggestions on how we might proceed from here. Senator, thank you not only for your discussion and your support for this program but for your personal and I know difficult accountings of what we're aiming for here, to personalize that is extremely useful to me and I'm sure to the others involved in this. We're going to be with you throughout the session on this, you can be assured.

SEN. GRIEGO: Thank you, very much, Mr. Chairman, I've really appreciated it. And again, thank you all very much for the invitation.

COMMISSIONER SULLIVAN: Now, what are the suggestions of our facilitator. We've reached the 6:00 hour. There are many that have appointments that they need to attend to.

MS. SHAENING: Mr. Chairman, Mayor Pro-tem, Councils and Commissioners, the Mayor Pro-tem has suggested because of an issue around taking action this evening that we meet again in a week. I would like to do several things in that regard. A) Set a date and time, because the time is clicking with the legislature. And we must go to the legislature and minimally reappropriate the \$448,000 we have right now. We have to change the language. So my thought would be if you could tell us what it would take, what information you need beyond what we've given you this evening, to take the actions that are suggested on

the back of the agenda, which are, approval to proceed, request authorization to commit the identified resources to the renovations and purchase of the building. As you recall, \$500,000 from the City is sitting there waiting for this meeting.

What do you need for us to bring you in order to move on that? What do you need for us to bring you in order for us to get a commitment, if possible, from the City of Santa Fe to seek \$200,000 in additional operating revenues? What do we need to get you to commit to working with – to looking at CIP funds as a possible source for renovations for the sobering center? And what do we need to get you to agree to go to the legislature, the City and the County to go to the legislature together and seek the rest of the capital money? What do you need?

COMMISSIONER SULLIVAN: I think the Mayor Pro-tem has all the answers to that. So this will be quick.

COUNCILOR LOPEZ: No, I have to tell you, what's been frustrating for us is you're asking two governing bodies to do something but we never get to talk to the other governing body. The only thing is we have staff coming in. We'll say, well why is that? And they'll say, well, that's the way the County Commission wanted. What I would suggest we do, we don't need necessarily another Finance Committee meeting because it's another meeting where our counterparts aren't there. What I would suggest is not for voting purposes, but to expedite this, that there be two County Commissioners, so you don't have a quorum, three City Councils so you don't have a quorum, the City Manager, I'm volunteering him. You can volunteer a person on your staff, and sit down and hammer this out, not as like a done product.

A lot of the questions that we have that you're bringing up here, I think can be resolved, but in a big group like this they can't. But when we just have one group coming to Finance or City Council, it doesn't – we need to have the governing people sit down, hammer these things out and I think that's why we're having a problem going past because it's the CARE Connection that's trying to carry this in terms of getting both sides on the same page and I'd like to have – that's what I'd recommend. I think we will get there with that.

Many of the questions that the City Manager has and the County Commissioners have in terms of dollars, I think could be hammered out in a small group that way. And that's what I would like to see happen because I think everybody agrees that we want a project like this to go forward. We just want to make sure all the dollars are there in treatment and I would trust three of our Councilors and two Commissioners to be able to hammer that out. But we've never had that opportunity to hammer that out with the Commissioners.

COMMISSIONER ANAYA: Mr. Chairman.

COMMISSIONER SULLIVAN: Commissioner Anaya.

COMMISSIONER ANAYA: I woke up.

COMMISSIONER SULLIVAN: I didn't know where that came from.

COMMISSIONER ANAYA: I thought that the CARE Connection had gone before the City Council and gave them a presentation about what was going on.

COMMISSIONER SULLIVAN: I think they have.

COUNCILOR HELDMEYER: Yes, I'd like to speak to that, because I spent

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over an hour today with people from the CARE Connection and I'd especially like to thank Mr. Coop for coming up with some numbers very fast and Dr. Anderson for talking about how this relates to caregivers. I got a whole bunch of different answers at that meeting this morning than we have ever gotten at any of the committee meetings where the CARE Connection has occurred. So one of my problems is to reconcile all this different information I've got to see what's real, what's not real, what makes sense, what doesn't make sense, and I think that's what you're hearing from the other Councilors too. Because every time we get - partially, it's a changing project, every time we get information on this project, it's different information. So yes, we have heard presentations but no two have been alike.

COMMISSIONER ANAYA: Mr. Chairman.

COMMISSIONER SULLIVAN: Commissioner.

COMMISSIONER ANAYA: I've been attending the CARE Connection meetings for almost three months. Maybe even longer. Since the first day I went there I was getting the same advice. And these professionals, which I call professionals that have worked hard for nine years, to come before us and they're telling us, I'm hearing the same thing. I think that we should move on this and we should move now. This is a very important thing. As you heard Senator Griego speak. And these people in the audience have been working on this for years and I think we should move on it. So that's where I stand and I hope that the rest of the Commissioners would act on this and let's move forward or else it's just going to keep getting back on the back burner.

COMMISSIONER SULLIVAN: Commissioner Campos.

COMMISSIONER CAMPOS: Mr. Chairman, I would like to hear from Robert Anaya as to what the County could do tonight.

MR. ANAYA: Mr. Chairman, Madame Chair, Councilors, Commissioners, I think that one thing I'd say briefly is we've all invested a lot of time, Councilors, over the years, Commissioners. Some Commissioners and Councilors have come and gone since this process started. And every time that we come to a meeting or we have an overall discussion, I feel like we really narrow in on the focus relative to the piece that you brought up, Councilor about the admin piece, which relative to serving the community, shoot me for it maybe, but is very insignificant when you look at the overall project. And relative to the actual capital dollars, is relatively, is very insignificant as far as the capital price. And if you just look at the budget quickly, the County Commission has asked staff to go to the New Mexico State Legislature over the last several years and the most recent years in particular.

We were successful through the hard work of Virginia Vigil and myself, Mr. Sims and the direction of the Commission a couple of years ago in getting \$300,000 of additional supplemental if you will, excise tax money to bring to this project. The County Commission said to us we want to utilize that for treatment but we want to target it for the CARE Connection project. So they put it there and it's sitting there.

In addition, staff, through the direction of the County Commission went to St. Vincent's Hospital over the last almost four years now, we went to the hospital relative to negotiating the supplemental money. The County put that at the top of their priority. The County negotiated

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with the hospital. The hospital has been very supportive, St. Vincent, of this endeavor. Once again, over three years successively, the County Commission has set aside several hundred thousand dollars for the CARE Connection via that vehicle of the MOA. It's sitting there. We haven't spent it. The only direction that we received from the Board of County Commissioners to expend those revenues was to take the big step, which they did, and what staff is being asked about on a constant basis, what are we doing with that vacant building? What are we doing with the vacant building? What do we have to do to get to the next level?

In the spirit of all of us being here today and hearing what you're saying, I hear some of your concerns, but when I look at the bottom line relative to the resources that the County has committed already, \$1.7 million, and compare those to potential resources that the City has committed, potentially, at \$648,000, I think that it's clear where the County of Santa Fe's commitment is. Mr. Chairman, Commissioner Anaya, you have attended those meetings. The CARE Connection was appreciative of that, but I think in the fairness and importance of the overall project, I think that if we can go back to the table as Senator Griego suggested over the next couple of weeks, put aside some of the differences that have been brought forth and some of the small items, that I call small items, put those aside, that we will get to the point where we can make a decision.

Mr. Chairman, Commissioner Anaya, Commissioner Campos, Commissioner Montoya, Commissioner Sullivan, if in that time we can't come to a resolution in working with the City, then my recommendation to the Board of County Commissioners is to move forward based on what Senator Griego said, and is to move forward in phases, and phase one being the CARE Connection. But I think, given what's been said here today, Commissioner Campos, I feel that we can, I think we're at the point now where we're all ready, and given that focused group, if given the time and the dedication of a couple of Commissioners if that's what the Chair desires, that we should be able to come to some consensus.

COMMISSIONER SULLIVAN: Mr. Estremera-Fitzgerald, did you want to add to that?

MR. ESTREMERERA-FITZGERALD: Mr. Chairman, I just want to add to that that as the chairman of the Health Planning and Policy Commission I think what the Mayor Pro-tem has put forth and the idea, I think if we can move in a time frame that at least keeps in mind what's happening, as Commissioners, I want you to know that I think I definitely support that very much and would like to see that happen. I think it would be in the good spirit if we could do that.

COMMISSIONER SULLIVAN: Is there interest or commitment to another meeting, A) to what Councilor Robertson Lopez has suggested, as a working group, and B) a time frame certain, which would be next Thursday at the same time, same station -

COUNCILOR LOPEZ: Mr. Chairman, the night of the 23<sup>rd</sup>, the RAP Center has a reception from four to six. Is that correct? On the 23<sup>rd</sup>? What I'd like to suggest we do tonight is that we have three Councilors volunteer and two Commissioners volunteer and together they get meetings set up to negotiate all these things. I think I agree. And Robert, thank you so much. It was really nice to have the opportunity to say, Okay, we can sit down

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and work with you. So what I would suggest is that on the 30<sup>th</sup>, we come back here for a final vote. Two weeks from today. And that in that time that I would expect that this team that meets is going to have to meet at least four times and that we'll let the City Manager and the five of you that are selected can sit down, put the issues on the table, come up with something that deals with everybody's concerns and we'll vote on it on the 30<sup>th</sup>.

COMMISSIONER SULLIVAN: Commissioner Montoya.

COMMISSIONER MONTOYA: Thank you, Mr. Chairman. Being relatively new to the discussion but not new to what's out there in terms of the need. I've been involved in this profession for a number of years and we've always been talking about the expansion of beds. The collaboration and now the cooperation amongst the agencies that has taken place, I think we should take seriously in terms of modeling what they're doing ourselves as government, in terms of being able to work cooperatively and work in the spirit of putting people before profits. Because I've worked in the for-profit sector and a lot of the reason that we're in the shortage that we are is because there's not a whole lot of profit in this field and I think the unfortunate reality is those companies are gone now and we need to look at in terms of the needs of the people that we have to serve in this county and through the city.

I think Senator Griego brought up another point and I'm going to bring it up here and that's that Rio Arriba County is looking at opening a facility as well and we need to look at how, regionally, we can begin to utilize that facility in addition to what the sobering center is going to be providing as well. So we look at this in a much bigger picture I think than what we're doing today and Mr. Chairman, I just want to add that regarding the decisions that I would be in favor of in terms of B), Ms. Shaening you asked, in support of proceeding with the CARE Connection, C) requesting the authorization to commit the identified resources that we've given already and F) that we definitely, I think it's a no-brainer there, that we go and seek additional funding from the legislature. So that's where I am at this point, Mr. Chairman. Thank you.

COMMISSIONER SULLIVAN: Thank you, Commissioner. So we have a - it's kind of ironic. We try to meet on the 23<sup>rd</sup> and there's a RAP Center reception. Okay. The 30<sup>th</sup> has also been suggested by the Mayor Pro-tem and I think probably the County Commission may be ready to take action here this evening and give direction to its staff and modify that as necessary. But that's - we have four County Commissioners here. We can decide what we want to do. Let me ask any of the County Commissioners, do you have an interest in meeting with some of the City reps and the staff to hammer out some of these concerns that the City has?

COMMISSIONER CAMPOS: Mr. Chairman, I agree with Commissioner Montoya and Anaya. I think we're ready to act tonight, to move forward. We've been talking about this for a long time. It's taken us maybe two or three months to get the City Council here to the table. To get them together again may be difficult again.

COUNCILOR HELDMEYER: We'll commit tonight.

COMMISSIONER CAMPOS: I'm ready to move forward tonight and continue the discussion with the City Council if a couple of Commissioners want to do that.

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COMMISSIONER SULLIVAN: To assist that and obviously the City still has questions that they need answered. It is true the County's been more involved in this. We've been purchasing, involved in the purchase of the building. We've had numerous presentations by Mr. Anaya and his staff so we may need to have some catch-up work done here for the City but we need to do it quickly. What's the interest, Commissioner Montoya, or Commissioner Anaya, certainly you've been interested throughout in participating on that. Would you like to participate on that committee?

COMMISSIONER ANAYA: Mr. Chairman, I definitely would like to move forward with this and answer any questions from the City later on but right now, like I said earlier, these professionals have worked very, very hard and it's time to move forward. So I guess I'd like to make a motion to approve and proceed with the CARE Connection/sobering center project. Do we take one at a time?

COMMISSIONER SULLIVAN: However you'd like to do it?

COUNCILOR LOPEZ: We can adjourn since we can't take action. We might as well leave.

[City Manager made some remarks that were inaudible.]

COMMISSIONER SULLIVAN: Okay. I think what we're doing, Mr. Romero is just we were taking action on the County's -

MR. ROMERO: We can go ahead and adjourn at this point.

COUNCILOR LOPEZ: For the purposes of the City, we might as well adjourn.

COMMISSIONER SULLIVAN: As a matter of courtesy maybe you would -

COUNCILOR LOPEZ: If you don't want to meet with us.

COMMISSIONER SULLIVAN: I think we're getting there. I don't think we need to go away mad here.

COUNCILOR LOPEZ: No, I'm just disappointed.

COMMISSIONER SULLIVAN: I think we have a commitment from Commissioner Anaya to work with a group in the next two weeks. I think that we want to take action as the County to give our staff the direction but I think if we can meet in two weeks on the 30<sup>th</sup> at the same time I think the Commission would be here. They've been here. I know Commissioner Duran is interested in it. He's not here so I can't commit him to serving on the committee but we could put him in as alternate.

COMMISSIONER MONTOYA: Mr. Chairman, I'll volunteer for that.

COMMISSIONER SULLIVAN: Okay. So we have two volunteers and we'll have Commissioner Duran as an alternate for that in case either of you can't make it, because I know that he's -

COUNCILOR LOPEZ: We could go ahead with our City appointments. I know Councilor Wurzbarger would like to serve. Councilor Heldmeyer and Bushee, or David?

COUNCILOR PFEFFER: I think that's good, if Councilor Bushee wanted to do it. I think you ought to be part of this, Councilor, because you've got the financial brain.

COUNCILOR LOPEZ: Well, no, I feel confident that Rebecca and Patty and Karen can handle it. It's not that hard what we have to do but we can't do it in a big group. If

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we could hammer it out I'm really confident -

COUNCILOR BUSHEE: How about four of us?

COUNCILOR PFEFFER: Three is enough.

COUNCILOR BUSHEE: Can I just give a point of information if you want to accelerate? We have a Council meeting on the 29<sup>th</sup>. If we're able to meet next week with some Commissioners, get the details worked out, we can have a resolution, City/County joint resolution approved by the next Council meeting on the 29<sup>th</sup>, if you'd rather do it in a more accelerated pace. I'm just suggesting that. It doesn't have to be a joint meeting if we can get the details worked out but the details are still what remain.

COMMISSIONER SULLIVAN: Councilor.

COUNCILOR WURZBURGER: I don't want to have another meeting like this, okay? I thought we were here tonight to look at what the principles were for agreeing for moving forward on this project. Okay? That's where I was coming from on it. So I like your idea. I'd rather do it in the next week if we were saying this night where the party is. Let's go to the party and say, here, we've approved it. Now, if you don't think you can do that, then let's take it to the Council. But the commitment I'd like to make is to come back with a resolution to do something on this project with the City. We're comfortable with it and this is what we're going to do.

So I don't see us - I'm not going out this door saying I have a lot more questions that will depend whether or not I support this. I'm going out the door to try to figure out what do we need from the City perspective now that we better understand and we all agree and we've said that we're doing it, let's go, and we're not voting on it, but what do we need from the City's perspective financially and what is it that we're committing to? That's the discussion that I want to have. I don't want to ask anything more about goals, objectives, I've asked those questions. So I do not see the utility, loving you all as I do, of such a meeting again.

COMMISSIONER SULLIVAN: Okay, so we don't have a lot of enthusiasm for another meeting like this. But we need to set some direction here. Commissioner Anaya has a motion in mind, a possible motion from the County's standpoint would be to approve the goals and policies set out here to allow the County staff to move forward and to participate with the membership that we've identified from this committee with the City, understanding that the City doesn't feel comfortable in taking action. What I would not like to see is the City do a joint resolution. Then it comes back, we get these joint resolutions and they get changed by the City and then they come back to us and we go back and forth with these joint resolutions. I don't think we have the time to do that with the legislative session.

COUNCILOR WURZBURGER: My assumption would be - you've passed it. It's the agreement that we've worked out to go forward with. Or it's nothing. It's one or the other.

COMMISSIONER SULLIVAN: Mr. Anaya, what's your recommendation at this point?

MR. ANAYA: Mr. Chairman, I just want to make a suggestion relative to any motions made by any Commissioners that I think would help things flow relative to the



communication that's going to occur with the City. Making an assumption that the County would be wanting to move forward today, relative to a motion, we don't have the necessary funding to do both the CARE Connection and sobering center out of the gate. So that if there's a motion on the floor, then I would suggest that with that motion phases in the CARE Connection piece, assessment, referral, data piece, phase one, sobering center, phase two contingent on the direction of the City because that is the City's that was their primary interest in coming back into the project in the first place. So I would suggest that that motion be that the County move forward with its goals but that if we were to go alone, which I don't think is going to occur. I think that the City is going to come to the table, but if we were to go alone that we wouldn't be able to do both. We would have to start with one part of the center and then do the second part when we had available funding. So that's a suggestion to the Commissioners.

COMMISSIONER SULLIVAN: I'm a little nervous with that. I'd like to see how those funds will be broken down if we did go that route, because all along I've been anticipating, as everyone has, that the City would participate. We meet on the 28<sup>th</sup> for our next County Commission meeting. The City Council meeting is the 29<sup>th</sup>. Could this committee, this work group, come up with something that could be brought to the County Commission meeting on the 28<sup>th</sup> and the City Council on the 29<sup>th</sup>. Is that doable?

COUNCILOR BUSHEE: Yes. We'd have to accelerate our meetings but that's doable.

COMMISSIONER SULLIVAN: Does that work, Commissioner Anaya?

COMMISSIONER ANAYA: Mr. Chairman, I believe that would work. I just don't want to delay it any more than we have to.

COMMISSIONER SULLIVAN: Neither do I, but I think we'd like to have everyone on board singing the same song. Commissioner Montoya.

COMMISSIONER MONTOYA: Mr. Chairman, with that then, and with that recommendation I wouldn't be comfortable at this point voting on what we have here so maybe, as I mentioned earlier in the spirit of cooperation, let's try and bring something back that we know that - because if this is a package deal, let's look at it as a package deal.

COMMISSIONER SULLIVAN: And I think as an alternative, if we see that we - by the 28<sup>th</sup> we'll know if we've satisfied the City's concerns or not. If we haven't, then the staff can bring forward alternate B to the County Commission and we'll move as we need to. Councilor Bushee.

COUNCILOR BUSHEE: Mr. Chairman, I just have a suggestion that we enlist the services of Shaening Company to help with that rather than City or County staff is possible. I think it would be an easier process.

COMMISSIONER SULLIVAN: Does that work for you, Mr. Anaya?

MR. ANAYA: Mr. Chairman, they're part of the process so it would be perfect.

COUNCILOR BUSHEE: But I actually would like to prefer to leave the staff out of it. I mean they can be there for back-up information.

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COUNCILOR LOPEZ: I know but for facilitation.

COMMISSIONER SULLIVAN: Do we have a consensus? We could take a motion if we needed to.

MR. ANAYA: Mr. Chairman, on the last part of what Councilor Bushee said, relative to not having any staff input, I would not recommend to the County Commission that we not have staff present.

COUNCILOR BUSHEE: Mr. Chairman, I didn't suggest they couldn't be present, but in all honesty, I think it's a better facilitation. This has gotten a little lop-sided at the end and I would really prefer we didn't have any more speeches at the moment from your staff.

COMMISSIONER SULLIVAN: I think - well, let's not get into how much time. I think we need staff for support there.

COUNCILOR PFEFFER: For a point of clarification, just so you know, I love Patty too, but I love you speeches.

COUNCILOR LOPEZ: We just meant who was driving the conversation that day, a more neutral, more - than County staff.

COMMISSIONER SULLIVAN: I think we have a committee set up of two, Commissioners Anaya and Montoya with Commissioner Duran as an alternate if either of you can't make it. Who is going to set up the meeting times of this subcommittee so we can meet the City's time frame.

COUNCILOR LOPEZ: Well, we want to meet you time frame too.

COMMISSIONER SULLIVAN: You all will do that? And City and County staff will be present at these meetings. They'll be working sessions. We anticipate two, three, maybe even four, whatever you need. Please return Ms. Shaening's phone calls. Are there any other matters? I'm sorry we couldn't get to public comment this evening on this. We'll do it at the City Council and the County Commission meetings.

MR. ESTREMERA-FITZGERALD: We're just happy what you're doing.

COMMISSIONER SULLIVAN: But I appreciate everyone who has worked on this and your attempt to get things expedited here this evening.

COUNCILOR LOPEZ: Mr. Chairman, just on behalf of the City, we do want to say thank you for all the hard work that County staff has continued in this area even when we weren't on the track with you but I think we're on the track. We're going to stay there and it's not easy when we're not used to working together but we're going to get better at this.


COMMISSIONER SULLIVAN: Thank you for your participation. The meeting is adjourned.

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**ADJOURNMENT**

Chairman Sullivan declared this meeting adjourned at approximately 6:30 p.m.


Approved by:

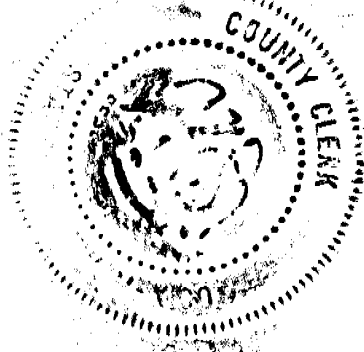
  
Board of County Commissioners  
Jack Sullivan, Chairman

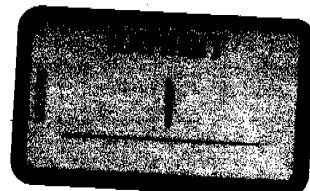
Respectfully submitted:

  
Karen Farrell, Commission Reporter

ATTEST TO:

  
REBECCA BUSTAMANTE  
SANTA FE COUNTY CLERK





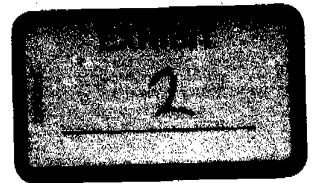
## Projected Outcomes for the CARE Connection Assessment and Detox Center

With this plan, we will achieve the following outcomes and goals:

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- 800-900 DWI offenders will be linked to services and obtain treatment;
- 60 clients per month will receive sobering, assessment, case management, and referral services;
- 20% of the clients from detox services will be admitted to 30-day rehabilitation services;
- 1,693 clients per year will be diverted from jail and hospital services and served by the CARE Connection Center;
- 80% of Sobering Department clients who complete treatment at the Center or an alternative substance abuse/mental health provider, will report an increase in functioning;
- 87% of assessed clients will be successfully linked to the appropriate level of care in the community;
- 100% of clients who leave the Sobering Department without further treatment will receive post-crisis case management services;
- 50% of the Sobering Department clients will not repeat substance abuse crises for six months following discharge;
- 20% of Sobering Department clients who are referred to and engage in substance abuse treatment through the CARE Connection Center will not repeat substance abuse crises for 6 months following discharge;
- 30% of identified high-risk clients who are referred to and engage in substance abuse treatment through the CARE Connection Center will record less than 3 subsequent substance abuse/psychiatric crises in the 12 months following discharge;
- Increase the number of detox beds by 300% with the addition of 25 beds in the Sobering Department and provide 5 more beds for long-term services;
- Substantially decrease the number of protective custody holds from 837 per year;
- Police and EMS staff time requirements for delivery of individuals to detox services will decrease substantially compared to the time now spent placing individuals into protective custody status;
- Establish strong data on incidence and prevalence of substance abuse and mental health problems in our community and outcomes associated with various programs, which will allow for successful documentation for obtaining additional funding;
- Increase coordination of efficient and effective care;
- Create a broader continuum of care;
- Increase help with public assistance benefits such as Medicaid, etc;
- Increase the capacity of treatment providers;
- Strengthen coordination and collaborative efforts between service providers;
- Decrease detainment in jail of persons with behavioral health issues;
- Develop referral, quality management, and case management policies and procedures for making referrals;
- Select/develop screening and assessment tools;
- Develop confidentiality and information sharing procedures;
- Develop a common database system to enhance service coordination; and
- Collaborate with existing services and create new services as necessary.

\* Assessment, sobering, case management, and aftercare services are established direct treatment services and are necessary to ensure positive client outcomes. These are services reimbursed by Medicaid, NMDOH, and most third party payers.



**CARE Connection Center**  
**Summary of Financial Projections -- January 16, 2003**

	FY 2003	FY 2004	FY 2005	FY 2006
<b>Operating (Recurring) Revenues</b>				
City of Santa Fe/CDBG		\$50,000	\$50,000	\$50,000
City of Santa Fe/Human Services General Fund		28,069	28,069	28,069
City of Santa Fe/Human Services Grant Fund		20,000	20,000	20,000
City of Santa Fe Police Dept.		50,000	50,000	50,000
City of Santa Fe Sources:		\$148,069	\$148,069	\$148,069
Santa Fe County DWI Detox & Treatment Appropriation		300,000	300,000	300,000
Santa Fe County DWI Program -- Screener Support		46,200	48,048	49,970
Santa Fe County MOA/St. Vincent Hospital		350,000	350,000	350,000
County of Santa Fe Sources:		\$696,200	\$698,048	\$699,970
Federal Grants				
Medicaid Reimbursement		see note*	see note*	see note*
New Mexico State Coverage Initiative				
RAP "match"		100,000	100,000	100,000
Region 2 BHCP				
St. Vincent Hospital (from MOA w/SF County)		60,000	60,000	60,000
Other Sources:		\$160,000	\$160,000	\$160,000
<b>Total Operating (Recurring) Revenues:</b>		\$1,004,269	\$1,006,117	\$1,008,039
<b>Total Operating Expenses:</b>		\$1,138,382	\$1,173,321	\$1,255,684
<b>Net Revenue/Loss:</b>		(\$134,113)	(\$167,204)	(\$247,645)
<b>*Less Medicaid Projection -- Net Revenue/Loss:</b>		(15,553)	(48,644)	(129,085)

**Purchase Budget**

**Capital (or other policy priority) Revenues:**

Legislative Appropriation/Accumulation	\$448,500
City of Santa Fe	500,000
MOA/St. Vincent Hosp. - SF Co./Accumulation	466,660
MOA/St. Vincent Hosp. - SF Co./Lease-Purchase 25%	42,585
Santa Fe Co. DWI Detox & Treatment Appropriation	300,000
Additional Legislative Requests	

**Total Capital Revenues: \$1,757,745**

**Capital Expenses:**

Purchase of the Facility	\$1,650,000
Renovation/Retrofit + Fixtures/Furniture (Assessment)	273,481
Renovation/Retrofit Expense (Sobering)	unknown*
Fixtures/Furniture (Sobering)	unknown*
Detox Beds (Sobering)	16,875
Computer Network/Initial System Costs	150,000

**Total Capital Expenses: \$2,090,356** (\*not all costs/expenses are known  
-- need renovation projection)

**Net Surplus/Deficit (\$332,611)**

\*Medicaid Reimbursements: Projected 6 Case Management/day, 260 days, @\$60 X 60% eligibility, plus 4 Assessments/day, 260 days, @\$100 X 60% eligibility = \$118,560