

Fiscal impact reports (FIRs) are prepared by the Legislative Finance Committee (LFC) for standing finance committees of the NM Legislature. The LFC does not assume responsibility for the accuracy of these reports if they are used for other purposes.

Current FIRs (in HTML & Adobe PDF formats) are available on the NM Legislative Website (legis.state.nm.us). Adobe PDF versions include all attachments, whereas HTML versions may not. Previously issued FIRs and attachments may be obtained from the LFC in Suite 101 of the State Capitol Building North.

FISCAL IMPACT REPORT

ORIGINAL DATE 2/21/07

SPONSOR Lovejoy LAST UPDATED _____ HB _____

SHORT TITLE Santo Domingo Pueblo Emergency Services SB 1171

ANALYST Weber

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY07	FY08		
	\$100.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From
 Indian Affairs Department (IAD)
 Department of Health (DOH)

No Response Received From
 Department of Public Safety (DPS)

SUMMARY

Synopsis of Bill

Senate Bill 1171 appropriates \$100 thousand from the general fund to the Indian Affairs Department to provide funding for an emergency services program at the Pueblo of Santo Domingo.

FISCAL IMPLICATIONS

The appropriation of \$100 thousand contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of Fiscal Year 2008 shall revert to the general fund.

SIGNIFICANT ISSUES

Indian Affairs contributes the following.

According to Santo Domingo Pueblo (“the Pueblo”), the bill would provide the opportunity for the Pueblo to develop and administer an emergency services program to ensure the health and public safety of tribal members and people in the surrounding areas. The proposed emergency services program would ensure proper coordination of all emergency services such as fire rescue, first responders, tribal community health representatives program (CHR), and emergency responders. Importantly, the program will ensure better coordination with county, state, federal (i.e., Bureau of Indian Affairs) emergency services programs and police units.

A 2005 capacity assessment by the NM Department of Health, Office of Health Emergency Management, found inadequate tribal emergency management programs. One of the recommendations made in the assessment was the employment of a full-time emergency manager at each Tribe. Currently, only five New Mexico Tribes (Acoma, Jemez, Laguna, Navajo Nation, and Santa Clara) employ devoted emergency managers- funded through a mixture of federal, state, and tribal revenues. The remaining 17 Tribes in the state have assigned emergency management responsibilities to staff with other responsibilities.

Given the continuing demands of the post-9/11 world and a never ending stream of natural disasters, the emergency needs of our state are greater than ever. The geographic remoteness and vast land areas of many New Mexico Tribes make them especially susceptible to serious emergencies. Recent flooding in northern and central New Mexico Pueblos, the pandemic flu, and historic snowstorms all reinforce the unique needs of Tribal communities in the realm of emergency preparedness and response. The current Tribal infrastructure for emergency management is inadequate to protect New Mexico citizens and resources in those areas.

The Department of Health adds that New Mexico relies on EMS services as a safety net for health care in many rural and frontier communities. New Mexico has only approximately 450 EMS services. Many services are located in rural communities and have difficulty with finding financial support for day to day operations of a service. SB1171 would purpose an expanded opportunity for the Pueblo of Santo Domingo to provide emergency services.

Availability of this service could increase the EMS workforce and provide improved services and care to a particular area. In addition, the program would enhance statewide preparedness and response planning for public health emergencies.

MW/csd