**County & Tribal Health Councils (HB137) An Instrumental Function of Public Health in Service of New Mexico** 



MOBILIZING COMMUNITIES FOR HEALTH



## Health & Human Services Committee

**October 23rd, 2024** Rio Rancho School, Rio Rancho, NM

# Land Acknowledgement

The New Mexico Alliance of Health Councils humbly recognizes and acknowledges we are on unceded territory and ancestral lands of the original peoples of New Mexico's Pueblos, Apache Nations, and the Navajo Nation.

Together, we acknowledge the history of genocide, dispossession, colonization and ongoing systemic inequities, while strengthening and respecting relationships with Indigenous peoples.

We give thanks to the past, present and future stewards of this land and respect all tribal nation's sovereignty. In offering this Land Acknowledgment, we affirm Indigenous resiliency, self-determination, and self-governance of New Mexico's tribes and nations who are still here today.



## WELCOME

## **PAVING THE WAY FOR A HEALTHY & THRIVING NEW MEXICO**

### THE CHALLENGE & OPPORTUNITY:

- NEW MEXICO, 47TH IN EDUCATION, 50TH IN HEALTH & SAFETY (Americas Health Ranking Study)
- NEW MEXICO, 50TH WORST STATE TO BE A CHILD (Annie E. Casey 2024)
- HEALTH COUNCILS: ADDRESSING PUBLIC HEALTH PRIORITIES AT THE LOCAL LEVEL AND SYSTEMS LEVELS

### THE ALIGNMENT:

- CRITICAL FUNCTION OF PUBLIC HEALTH STATEWIDE (LOCAL & SYSTEMS)
- ALIGNMENT WITH GOVERNOR AND LEGISLATIVE PRIORITIES
- ALIGNMENT WITH NMDOH'S NORTH STAR
- ALIGNMENT WITH NM HEALTH CARE AUTHORITY'S GOALS

#### THE SOLUTION:

 SHORT AND LONG TERM STRATEGY: INVESTING IN COUNTY & TRIBAL HEALTH COUNCILS, THE LOCAL TRUSTED COMMUNITY-BASED HEALTH HUBS, FOR ADVANCING HEALTH EQUITY

# **33 County and 10 Tribal Health Councils**

### WHO THEY ARE:

County & Tribal Health Councils were established in 1991 by the New Mexico legislature, originally under Maternal and Child Care Act. The function of Health Councils was reaffirmed in 2019 by the County and Tribal Health Councils Act (HB 137).



### **Tribal Health Councils**

Pueblo of Acoma Pueblo of Cochiti Pueblo of Nambe Pueblo of Picuris Pueblo of San Ildefonso Pueblo of Santa Ana Pueblo of Santa Clara Pueblo of Santo Domingo Pueblo of Tesuque

NMAHC CONTINUES TO FOSTER STRONG RELATIONS WITH THE ALL PUEBLO COUNCIL OF GOVERNORS AND TRIBAL LEADERSHIP (NAVAJO NATION AND APACHE NATIONS)

CATRON GRANT HIDALGO



# Health Council Aligned with Governor Grisham's & Legislative Priorities, NMDOH, HCA and Key Public Health Partners

### IN A CENTRALIZED PUBLIC HEALTH SYSTEMS, HEALTH COUNCILS ARE THE LOCAL HEALTH HUBS

NMDOH MISSION	NMDOH GOALS	KEY COMPONENTS
Promote Health and Well- Being	Expand Equitable Access for all New Mexicans	State Health Assessment
Improve Health Outcomes	Improve Health Status for all New Mexicans	State Health Improvement Plan
Ensure Health Equity	Ensure Safety in NM Health Care Environment	Public Health Accreditation Board
Visit NM Health Website https://www.nmhealth.org/	Support services for staff	Quality Improvement
GOVERNOR GRISHAM	NM HEALTH CARE AUTHORITY	SYSTEMS COLLABORATION
BEHAVIORAL HEALTH	GOAL: ACHIEVE HEALTH	STATE TRIBAL

- AGING CARE & SERV.
- FIREARM SAFETY
- HOUSING/HOMELESS
- VACCINATION
- COMMUNITY OUTREACH
- FOOD ACCESS
- STRATEGIC WATER
- CHILDREN & FAMILIES

**EOUITY: BY ADDRESSING** POVERTY, **DISCRIMINATION, AND** 

LACK OF RESOURCES

- MEDICAID SERVICES FOOD IS MEDICINE RX
- BEHAVIORAL HEALTH
- **SERVICES**
- SERVE AS EXTENTION **TO FIELD OFFICES**

- **COLLABORATION ACT**
- CLOSED LOOP **REFERRAL SYSTEM**
- STATEWIDE RESOURCE **DIRECTORY: SHARENM**
- COMMUNITY **COLLABORATIVE FORUM**
- LOCAL& SYSTEMS COLLABORATION (DOC)
- LOCAL INITIATIVES

LEGISLATIVE

THIEST

FRNORIC

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OCINIC GAPS /

County & Tribal Health Councils



# NM County & Tribal Health Councils: Funding



FY2025: EACH COUNTY & TRIBAL HEALTH COUNCIL FUNDED AT \$80,977

2019

2021

NMDOH RECEIVES CDC & KELLOGG FUNDING AT \$50,000 PER HEALTH COUNCIL ENDED MAY 2024

REACHED OVER 350K W/ EMERGENCY RESPONSE



HEALTH COUNCILS SECURE ONE-TIME APPROPRIATION OF \$3 MILLION FROM LEGISLATURE: TOTAL OF \$3.6 M

# Health Council Staffing & Community Membership

Membership depends on the structure of the Health Council and is focused on engaging and centering community members and key partners. Each Health Council operates according to the Health Council bylaws that are specific to their governance structure.

#### Statewide paid staff and Health Council members as of August 2024

#### **STATEWIDE COUNTY MEMBERSHIP:**

- Total HC paid staff reported statewide = 96
- Average paid HC staff per Health Council = 2.67
- Total HC members reported statewide = 643++
- Average HC members reported per Health Council= 30.62

#### **TRIBAL MEMBERSHIP ONLY:**

- Total Tribal HC paid staff reported = 15
- Average paid Tribal HC staff per health council = 2
- Total Tribal HC members reported statewide = 124
- Average Tribal HC members reported per Health Council= 13.7

Tr 23

Non-2C

#### COUNTY & TRIBAL HEALTH COUNCILS: THE TRUSTED COMMUNITY-BASED HEALTH HUBS

THE PERFECT INVESTMENT OPPORTUNITY TO LEVERAGE MULTI-SECTOR PUBLIC HEALTH RESOURCES, ESSENTIAL SERVICES, PREVENTION/INTERVENTION, IN SERVICE OF NEW MEXICO.

As of August 2024, these are the governance structures that make-up the network of **County & Tribal Health Councils:** 

bal 9.2%	Fiscally- Sponsored 27.9%	Each Health Council operates according to the recommendation from County or Triba leadership and/ o related bylaws 1.Tribal Government 2.County/City
-Profit 9.9%	County/ City 27.9%	Government 3.Non-Profit Corporation 4.Fiscal Sponsorships/ Agents

# Health Council Leadership Role

HEALTH COUNCILS ARE THE REPRESENTATION OF DIVERSE COMMUNITIES, INTIMATELY AWARE OF COMMUNITY NEEDS AND CRITICAL IN THE COORDINATION OF ESSENTIAL SERVICES AND SYSTEMS OF CARE. FOR OVER 30 YEARS, HEALTH COUNCILS HAVE SERVED AS THE LOCAL COMMUNITY-BASED HEALTH HUBS, LET'S LEVERAGE THEM FOR SUCCESS.

#### **HEALTH COUNCILS:** EXPERIENCE REQUIRED

- Organizational Management & Development
- Grants Sourcing
- Grant Management & Reporting
- Planning & Assessment
- Strategic Implementation Plan
- Data Collection & Reporting
- Outreach & Membership
- Facilitation & Project Mat
- Coordination of Services
- Knowledge of health issues
- Public Health Education
- Prevention & Intervention
- Community Engagement & Building
- Marketing & Communications
- Collaboration

- Develop and support Health Council Leadership
- Community outreach for building Health Council Membership
- Lead Health Council member engagement, recruitment and retention
- Coordinate monthly meetings, location and facilitation
- Increase community awareness of Health Council role and function
- Represent the Health Council in local, County and statewide collaborations in service of communities
- Liaison with fiscal agent, meet reporting requirements and financials
- Collaborate with key partners in coordination of services and care
- Community health assessment, planning and implementation
- Drive Health Council capacity/development in addressing CHIP priorities
- Coordinate Health Councils activities such as community health events
- Lead public health education, prevention and intervention initiatives
- Progress reports to the Health Council's outcomes and impact
- Progress reports to the New Mexico Department of Health and NMAHC
- Evaluate and report on outcomes in partnership with NMDOH/NMAHC
- Collaborate in statewide advocacy efforts in support of County & Tribal Health Councils
- Collaborate/ inform statewide public health systems (Closed-loop referral system, Community Health Needs Assessment, CCF, etc.)

Health Councils are the Voice of Community Members, who can inform policies to ensure equity and improve systems of care for New Mexicans.



Health Councils ~ Advocacy In Action! **New Mexico Legislative Session 2024** 

# **Functions of Health Councils**

## 2019 County and Tribal Health Councils Act House Bill 137

Health councils are mandated to identify community needs and priorities, identify and coordinate access to critical resources; evaluate the community's system of care with an equity approach; coordinate public health education, prevention and intervention efforts, and engage in advocacy efforts to improve community health. Health Councils are the representation of local communities and a strong voice for health equity.



#### **CHA + CHIP PROCESS IN COLLABORATION WITH NMADOH.** Collaborate with **CHIPs INFORM THE STATEWIDE** key partners on Community Health strategies HEALTH PLAN, LED BY NMDOH. Improvement Plan (CHIP) (prevention/interventi priorities inform the SHIP on), coordination of (DOH). services, address Conduct Community Goals local SDoH, & public Health Assessments • Strategies health priorities Partners (CHA) NMAHC, 43 County & • Data & Metrics • Outcomes & Impacts Tribal Health Identify Gaps/ Needs Councils, various Kev (Community Driven) COLLAB Partners and NMDOH: **PLAN** & (CHA + CHIPs = SHIP) PRIORITIZE ASSESS CONVENE

The CHA & CHIP process was made possible thanks to CDC/WK Kellogg Funding

during year 2 and 3 of Covid19, which ended May 31st, 2024

**Community Health Needs Assessment** 

(Sector Collaboration , including County & Tribal Health Councils)

County & Tribal Health Councils will report on NMDOH Traditional Funding SOW FY25 from Sept 2025 - July 2025

#### IMPLEMENT DATA + EVAL

Final CHIPs were submitted February 2024. As of August 2024, Health Councils are currently in their CHIP implementation phase.



## County & Tribal Health Council CHIP Priorities, as of September 2024

# **Overview of CHIP Priorities: County & Tribal Health Councils**

Promoting Health Equity

### Addressing Social Determinants of Health + Improving Population Health

<b>56%</b> <b>Behavioral Health Prevention</b> (Ongoing Mental Health & Substance Misuse Disorders) 21 Health Councils		<b>16%</b> <b>Mental Health &amp; Suicide</b> <b>Prevention</b> 6 Health Councils	Dis 5
<b>8%</b> <b>Elder and Aging Care</b> 3 Health Councils	8% Chronic Disease Preventive Care 3 Health Councils	8% Access to Quality Health Care Services 3 Health Councils	Ac N 3

Health Council Strategies Health Education; Prevention and Intervention; Coordinate Access to Services; Data collection and Analysis; Advocacy and Policy; Built Environment; Engagement and Partnerships; Funding Raising and Sustainability; Capacity Development; Workforce; Attitude and Beliefs; Prevention and Harm Reduction, Systems of Care, etc.

11% 13% Access to Affordable Substance Use **Housing & Economic** isorders & Misuse **Stability** 4 Health Councils **6%** 3% ccess to Healthy & **Violence Prevention & Firearm Related Injuries** Nutritious Foods 1 Health Councils Health Councils

# **Tribal Health Council CHIP Priorities**

# **Tribal Health Council CHIP Priorities**

Promoting Tribal Health Equity

Addressing Social Determinants of Health

Improving Tribal Population Health

44%

**Behavioral Health Prevention** (Ongoing Mental Health & Substance Misuse Disorders) Substance Use Disorders & Misuse

> 11% **Elder and Aging Care**

11% **Access to Quality Health Care Services** 



## 33%

#### **Chronic Disease Prevention Diabetes**

## **Tribal Health Councils Only**



## **TRIBAL HEALTH COUNCILS**

Acoma Pueblo Cochiti Pueblo Nambe Pueblo Picuris Pueblo San Ildefonso Pueblo

Santa Clara Pueblo Santo Domingo Pueblo Tesuque Pueblo Canoncito Band of Navajos

Bernalillo County Sandoval County Torrance County Valencia County

## **Metro Region**

#### **Behavioral Health** 62.5%

### **METRO HEALTH COUNCILS**

Cañoncito Band of Navajos Cochiti Pueblo Santo Domingo Pueblo



### **NORTHWEST HEALTH COUNCILS**

Cibola County San Juan County McKinley County Acoma Pueblo

Colfax County Santa Fe County Harding County San Miguel Count Guadalupe County Los Alamos County Mora County Taos County Rio Arriba County Union County

## **Northeast Region**

Transportation 7.7% Access to Health Care 7.7%

> **Behavioral Health** 46.2%

### **NORTHEAST HEALTH COUNCILS**

Nambe Pueblo Picuris Pueblo San Ildefonso Pueblo Santa Clara Pueblo Tesuque Pueblo

## **Southwest Region**



## **Southeast Region**

Roosevelt County

# **Community Health Improvement Plan & Strategies (CHIP)**









## **Tribal CHIP Strategies**

# Impacts of County & Tribal Health Council CHIP **Priorities:** *CDC/W.Kellogg Grant* 2021-2024

Impacts of County & Tribal Health Councils' CHIP Priorities: **Behavioral Health, Mental Health, and Substance Use Disorders and Misuse** As of August 2024 (Data was collected from Health Councils directly)



Number of Narcan lifesaving kits distributed statewide by County & Tribal Health Councils



Number of community members and partners trained on administering Narcan, trainings hosted by Health Councils



Number of community members and partners trained on Mental Health First Aid/ QPR, hosted by Health Councils

Number of communitybased mental health and substance misuse trainings for both youth, adults, and

families on prevention hosted by Health Councils

1,260

Number of Behavioral Health resource guides distributed to households & **SHARENM Behavioral** Health resources shared by Health Councils



Number of viewers reached on social media discussing prevention efforts on Behavioral Health by Health Councils 295

Number of community members reached with 988 resources and mental health awareness walks hosted by Health Councils





Number of Behavioral Health assessments and interviews completed for additional data conducted by Health Councils



Number of statewide partners addressing Behavioral Health in collaboration with County

and Tribal Health Councils



Number of drug testing kits and timed pilled boxes provided to **community members** by Health Councils

# Impacts of County & Tribal Health Council CHIP **Priorities:** CDC/W.Kellogg Grant 2021-2024





Average number of **community** transportation monthly per

# Impacts of County & Tribal Health Council CHIP **Priorities:** CDC/W.Kellogg Grant 2021-2024

### **Impacts of Priority: Tribal Health Chronic Disease Prevention January - August 2024 (THC Data)**



Number of Tribal members educated about diabetes prevention and other related chronic illnesses by **Tribal Health Councils** 

Number of gunlocks distributed to community members by Health Councils: October 2023-August 2024



416

Number of elder assessments and steady risk interview completed by elder population conducted by Health Councils

#### **Focused on Workforce** Development

(Dona Ana, Guadalupe, Union, Nambe Pueblo, +++)



#### Addressing Substance Abuse (Opioid)

(Bernalillo, Catron, Colfax, Hidalgo, Curry, Luna, Torrence, Otero +++)

**Improving Access to Rural Primary Care** (Torrance, Catron, Los Alamos, Union, Luna, Valencia, Name Pueblo, Acoma Pueblo, Harding, Santo Domingo Pueblo, Canoncito Band of Navajos +++)



#### **Impacts of Priority: Elder and Aging Care** January - August 2024 (HC Data)





# **S44M** RECURRING FUNDING REQUEST FOR **NEW MEXICO's COUNTY & TRIBAL HEALTH COUNCILS (FY2026)**

The New Mexico Alliance of Health Councils is advocating for the **re-establishing of recurring optimal** funding for New Mexico's County & Tribal Health Councils, per <u>HB137</u>. ROI: Impact Data Reporting from NMDOH, Expert Testimony from NMAHC, and ROI annual report.

#### **Funding request of \$44 million, including new Tribal partnerships.**

- To fund the expansion of **County & Tribal Health Council's** staffing, capacity, operations, administration, coordination, collaboration, and programming costs to fulfill their role and functions in service of communities statewide. This level of funding will leverage this critical infrastructure of public health in concert with NMDOH in attaining the 2040 Goal.
- \$1M will fund a 501c3 to provide systems collaboration, networking, research and policy, ancillary services, and advocacy in support of Health Councils statewide.

# \$15,333.

### **Currently, FY2025:**

- May 31st, 2024.

#### **During FY2024, Health Councils were funded at**

• Thanks to HB67 co-sponsors and Legislative support, Health Councils statewide received a one-time appropriation of \$3 million to fund their operations and services to advance health priorities, averaging at **\$80,977** per Health Council, including base funding at \$15,000. • Securing 109 Health Council Coordinator positions for one fiscal year, stabilizing the work achieved thanks to CDC funding, which ended

The New Mexico Alliance of Health Councils is a 501c3 organization providing systems collaboration for collective impact, policy and advocacy, and ancillary services in support of New Mexico's 33 County & 10 Tribal Health Councils and community partners.



Tel: 505-226-2133 || www.NMHealthCouncils.org Valeria@nmhealthcouncils.org || Gerilyn@nmhealthcouncils.org || Heather@nmhealthcouncils.org

NMAHC

NMAHC

**Torrance Community** 

# new mexico of Health Councils

## **THANK YOU!**