# SUMMARY OF ACTION MUNICIPAL DRUG STRATEGY TASK FORCE MEETING MARKET STATION, CONFERENCE ROOM, 500 MARKET STATION THURSDAY, SEPTEMBER 5, 2019, 11:00 AM

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## MUNICIPAL DRUG STRATEGY TASK FORCE MEETING MARKET STATION, CONFERENCE ROOM, 500 MARKET STATION THURSDAY, SEPTEMBER 5, 2019, 11:00 AM

#### 1. CALL TO ORDER

The meeting of the Municipal Drug Strategy Task Force was called to order by Emily Kaltenbach, Chair, on Thursday, September 5, 2019, at 11:07 am, at the Market Station Conference Room, 500 Market Station, Santa Fe, New Mexico

#### **ROLL CALL**

#### **MEMBERS PRESENT**

Emily Kaltenbach, Chair Sophie Andar Laurie Knight Bernie Lieving Dr. Tim Condon Sue O'Brien Marcela Diaz Kathy Armijo-Etre Dr. Wendy Johnson Chris Wendel Sylvia Barela **Larry Martinez Bret Smoker** Alex Dominguez Andres Mercado John Osborn Dr. Laura Brown

#### **MEMBERS ABSENT**

Tony Dixon, Excused Denise Herrera, Excused

#### OTHERS PRESENT

Kyra Ochoa, Director, Community Services, City of Santa Fe Rich Brown, Economic Development Department, City of Santa Fe Officer Valdez, City of Santa Fe Police Department Michelle Lis, Consultant Elizabeth Martin, Stenographer

#### 2. APPROVAL OF AGENDA

**MOTION** A motion was made by Ms. Wendel, seconded by Mr. Martinez, to approve the agenda as presented.

**VOTE** The motion passed unanimously by voice vote.

### 3. APPROVAL OF MINUTES JULY 27, 2019

Postponed

#### 4. PRESENTATIONS

#### A. WELCOME, EMILY KALTENBACH, CHAIR

Chair Kaltenbach welcomed everyone to the meeting and thanked them for coming.

Chair Kaltenbach said we will have some informational presentations and then will talk about updates and next steps.

## B. LEAD/THRIVE, BEN VALDEZ, DEPUTY CHIEF OF POLICE, ANDRES MERCADO, PARAMEDIC II, MIHO

Mr. Mercado gave an overview of the MIHO program and the Connect program.

Mr. Mercado said we checked calls that were received from people before the ended up overdosing. There was an average of 4.5 calls per individual before overdosing. They are going through our system. It is a good place to identify and provide services. 89% of people we respond to with overdoes that we can help have not had  $2^{nd}$  overdoses. 11 % did.

Ms. Wendel said one of her concerns is that we spend a lot of time on opiates. The overdose rate on Meth is going up. Alcohol kills more than either of those. It concerns her that it is opiate outreach and that you are not really distinguishing it to call it alcohol.

- Mr. Mercado said we do specify currently.
- Mr. Lieving said the thing about the opiate focus is that there is a lay person antidote. There is not a lay person remedy to meth overdose.
  - Ms. Kaltenbach said it is also where the money is.

Officer Valdez said we are starting to look at that as a City Police Department. We are seeing bleed over. Individuals engaging in that have mental health issues as well. All the funding is for opiate based issues. We do carry Naloxone.

Mr. Lieving said people using opiates to to sleep are on a week long bend.

Mr. Mercado said we report to the Assistant Chief now and are getting case manager positions and an administrative assistant. There is a lot of growth. LEAD prefers arrest diversion to social referrals. We are working on diversion from the 911 scene. We are providing additional training on that and community risk reduction. We are taking over case management and program management for the program known as LEAD. All uniformed employees are EMTs. Everyone is dual trained.

Mr. Smoker said you should change your name from the Fire Department since less than 1% of your calls are for responses to fires and you get 40 calls a day for EMTs.

Mr. Mercado said that is politically charged. Branding is important. Over time he thinks it will change is some ways. It is also about how do we recruit and education and solid structural things.

Dr. Brown said recruitment for police is done with militaristic pictures.

Ms. Barela asked MIHO and LEAD are now combined.

Mr. Mercado said yes.

Officer Valdez said about LEAD, it was initiated in 2014 from a model from the Seattle Police Department to address a certain area of town with a lot of needle use and homeless issues. It was to address all the layers. There was a stigma in being uniformed that kept people from coming to officers. We have a SWAT Team, but we also do a lot of social work in our Department. We have Navigators as well. We had a group of officers who other officers referred people to for pre-arrest assistance. It was a voluntary program and officers had to meet certain criteria to be in program. The offenders have to do certain things to be engaged and receive services. We looked at the challenges the person faced and the cycle.

Dr. Condon asked if an offender is on probation or parole are the accepted into the program.

Officer Valdez said if the offense was nonviolent. It depends on the case. A vast amount of people in our program have prior arrests. We hope to give them a path to getting on track.

Ms. Knight said the issue of probation was a harm reduction program. There was a disconnect with the Probation Department. They can order a random UA. If they were accepted into LEAD they had to have counseling. That did not used to be a goal.

Officer Valdez said is was not a qualifier, but it is a mixed bag. To be engaged is

the goal. Attending counseling to address the basic needs. We had discussions with Probation and Parole and they might be more in at this point in time. They are seeing a revolving cycle. Putting them back in jail exacerbates the issue.

Mr. Lieving said you are a leader in your Department and could be a role model in the Department. Do the new officers get this information from you so they are looking at themselves as quasi social workers.

Officer Valdez said we had initially that group of officers. We want to train all officers for referrals now. Moving forward we have restructures and now we have additional officers in meetings and are addressing issues there such as correct referrals and follow up. Having that is good. We have support from the top down. It is our job today to include the community services.

Ms. Andar said given we have so far to go to make programs comprehensive, are there any simple steps we can take to support our first responders to go a step further. What might be a next step such as giving someone a bottle of water if they are on the street.

Officer Valdez said when we check on people on the street, if they are functional we do a welfare check and go. That is an example of where we could use extra help.

Ms. Andar asked is that encouraged.

Officer Valdez said we would have to stock water. It depends on the situation. We have people we deal with on a regular basis. We give them a card and we don't hear from them.

Ms. Andar asked so there is no standard behavior response.

Officer Valdez said we have improved in behavioral health recognition. We are doing more training and trauma informed care recognition. Recognition for the officers is crucial. We are moving forward into training on the mental health side of it and to whose role it is. Our goal is to recognize drug situations as a mental health issue rather than crime. We are working on diverting people to other resources.

## C. LIBRARIES/AFTER SCHOOL/SUMMER PROGRAMING/COMMUNITY SERVICES, KYRA OCHOA

Ms. Ochoa gave an overview of the Community Services Department and their services that might relate to behavioral

Ms. Ochoa said our primary mission is for all Santa Fe County residents,

regardless of income, have resources so that they can live healthy lives and have a good quality of life. We have Youth and Family Services, the Public Defender Department, Senior Services and libraries.

Ms. Andar asked where are CYFD funds allocated.

Ms. Ochoa said intensive case management, adjudicated assistance and educational wrap around services. Some went to Girls Inc and some to Youthworks for diversion from the justice system for youth. We are also moving toward a Community Health Council.

Ms. Andar asked how do you see that syncing up with the core leadership team with the County

Ms. Ochoa said the Behavioral Health Core Leadership Council is a targeted focus approach. It is great and should fit with the Community Health Council and it's recommendations. We will define strategies together to move the curve. It will help us to be targeted and community engaged.

Ms. Ochoa said we provide direct services in our senior programs and libraries and use results based accountability. Through the Office of the Public Defender we provide homeless court, drug court and assist the indigent who have an income of \$12,000 or under.

Ms. Ochoa handed out a summary chart of the Department structure. This chart is herewith attached to these minutes as Exhibit "1".

Ms. Wendel said her concern is how and when and if services are getting to the senior population around substance disorders and mental health. Is there some specific part of the senior section looking at that issue.

Ms. Ochoa said not specifically. The Senior Council works on housing and community issues. It would be cool if we could say are our senior centers are giving that kind of service.

Mr. Martinez said the Aging and Long Term Department has done a number of studies and it is pretty startling around suicide rates, isolation and medicine interactions. We do need to start addressing that. So much of the emphasis is on youth and prevention that the entire senior population is ignored.

Ms. Wendel said part of what the Behavioral Health Services Planning Council does are senior jubilees. They do education for seniors about substance abuse disorders.

Mr. Lieving said he wants to give Kyra and the County credit and to the senior

centers that are really nice and senior focused. Some level of default prevention is rolled into engaging seniors in meeting them where they are.

#### D. SANTA FE CONNECT PROJECT, Kyra Ochoa

Ms. Ochoa handed out information about the Santa Fe Connect Project. The handout is attached herewith to these minutes as Exhibit "2".

Ms. Ochoa said included in this are grants given out to connect Navigators. Screening is done as they walk into the door. The project is a screening tool. Navigators have the option to ask behavioral health questions. We can get our hands around people and build relationships. We want to create navigation language that will work with the situation. The City and County are working on standardizing that.

Mr. Lieving asked what is the specific role of the jail.

Ms. Ochoa said the jail reentry team is using the screening tool and software program. It allows clients to sign release of information forms to the network and it has a virtual case conferencing tool and you can see where people go in the network. It is a pilot program right now. We have even funded a Navigator at La Familia. At the jails intake and discharge are not in it. Our dream is that the State would get excited about it as a way to measure impact and connectivness and hopefully start funding in the same way so there are not a million masters to serve.

Ms. Cirrolla said the most exciting thing is the referral process through Unite Us. It creates accountability around referrals and data for our funders as well. She also thinks it is exciting that patient documents that are scanned into the system follow their profile so you don't have to get the documents over and over again. That is a huge cost that we are all paying for.

Ms. Ochoa said we had \$850,000 go out to two tiers of the project for those who step up to do navigation and those already doing that work. Children and Youth funding in the spring will be interesting. They are not thinking so much about navigation. We will work toward that. Thanks to Larry's work on the healthcare exemption the County is now processing these services on a non-competitive process. The City is not there yet. It makes us all act like real partners. The City and County small funders are in all this. Will need to have backup from the State. We do have interest from this Administration and the Public Schools are very interested in this. Navigation is not the answer to all the ills. We need the resources. The people with relationships with the people keep them in the fold. We have Navigators in seniors and veterans and are working on others. The County has Navigators in their direct services. Recently we filled the County Municipal Court Navigator primarily for homeless court. The City has one as well.

Mr. Smoker said thank you very much. This was very helpful. The Community

Health Council he comes from thinks that committees are places where good ideas go to die. He would encourage you to push your idea further and when task forces completed their tasks to disband them.

Ms. Ochoa said that is a process that is slow to change. Boards and Commissions and Committees exist by Ordinance and Resolution. The overall thing you said is that there is redundancy in all the finding and it should come down to the social determinants to health. Education, housing and food safety and access to resources.

Ms. Knight said there is the evaluation piece and your commitment to grow the network. Ongoing evaluation people who are being contacted to see if there are barriers for access have language issues.

Ms. Ochoa said the evaluation for the County is being done by a consultant. We have a data team at the City, Aspen Solutions, and we are working closely with them. The County has an advisory panel for users. It is a very closed network right now. At the City when a case is closed and that issue is closed the Navigator will report the results. We will have hard information about how they did. We need people served to have more of a part in the program. We also have monthly Navigation meetings and training.

- Ms. Cirrolla said clinical oversight is awesome. It is support for the Navigators.
- Ms. Ochoa said they can also do case conferencing.
- Dr. Condon asked is this what the Navigators use.

Ms. Ochoa said it is, up to the last question about interpersonal safety. The behavioral health questions are optional. Within the system we can see the referrals made, but are not able to see the referrals to the Santa Fe Recovery Center. There is some added protection there. The supplemental questions can be asked at the discretion of Navigator during triage.

Chair Kaltenbach said some of our recommendations around the Coordinated Care Model came out of treatment that is already happening. This a great time to think about how we might supplement what is happening.

Mr. Martinez said what is pushing us so hard to bring about coordination is that a growing population is falling through the cracks. Elderly people are in inappropriate homes at a high cost and cannot maneuver their way through the assistance programs. They are dying in there homes isolated. It is forcing us to coordinate and case manage folks through the system.

Ms. Ochoa said we got an Americorp Planning Grant in our Department this

year. We will be working that in.

Ms. Andar asked what is the reason why it is stopped at the interpersonal safety questions.

Ms. Ochoa said we do ask those questions. The stop is after the interpersonal questions.

Chair Kaltenbach said the libraries are also a place for overdose prevention education. Do they have Naloxone on site.

Ms. Ochoa said they do not yet. We need them to and that is a goal. We have a new Library Director who is addressing years of deferred maintenance, not just in buildings, but in staffing and training.

Chair Kaltenbach said thank you so much.

#### E. AFFORDABLE HOUSING, ALEXANDRA LADD

Ms. Ladd was unable to attend the meeting.

#### F. MIDTOWN CAMPUS, RICH BROWN

Mr. Brown said he wanted to thank his fellow City employees for the fantastic work they are doing. He is from the Office of Economic Development. He is the Opportunity Zone Ambassador for the City of Santa Fe. There are five zones in the City. His job in this process is to educate the development community and people with funds and the business community what can we do to uplift these census tracks with high employment and low income. Midtown in one of the opportunity zones. It is a three phase process. We have an economic analysis RFP to help the City understand the value of the property if it is redeveloped. The second phase is community engagement. An RFP went out that will revisit the RFP again for that. The third is a request for expressions of interest. That was sent to 250 business developers and investors interesting in looking at redevelopment ideas for the Campus. It is 64 acres. This RFP does not ask for a proposal, just interest and ideas. Friday and Monday we are having a prebid conference at the Campus where those folks can come in and learn about the Campus and what we are looking for. We do have another meeting with the folks doing the economic analysis and getting information on what the City has to offer and what the community wants to see from the property standpoint.

- Mr. Smoker asked is the meeting tomorrow open to public.
- Mr. Brown said yes, from 9:00 am to 1:00 pm.

Mr. Lieving asked what sort of things are being talked about for the property.

Mr. Brown said the request for interest includes three scenarios. One is a mass developer. Second is film development. Third is UNM for an education scenario. If we do not have overall development, some group of developers will work with local businesses etc.

Ms. Ochoa said can you clarify what things are hard wired and required.

Mr. Brown said the anchors include the film studio, the library anchor, Brindlis Hall, the sound studio, Greer Garson and the Screen. Affordable housing is inside the request as a requirement. He is the intermediary between people with ideas and developers with shovel ready ideas.

Chair Kaltenbach said what you have shared with us is helpful for us to put a recommendation in our plan. How can some of us get involved.

Mr. Brown said through the community engagement process. Be a voice there. If any organization would like to be part of the Campus submit a proposal for the Expression of Interest. You are a local preference.

Chair Kaltenbach asked the anchor points, are there any City services being considered.

Mr. Brown said the library.

Chair Kaltenbach said thank you Rich. This has been really helpful. At our next meeting we will bring back our next version of recommendations and will go through a process of reviewing them and voting on priorities.

Ms. Ochoa said she will send out information about our Built for Zero project. It is the City's approach to addressing chronic homelessness and affordable housing.

#### 5. COMMENTS FROM THE CHAIR AND COMMITTEE MEMBERS

None

#### 6. REPORT FROM STAFF

None

#### 7. MATTERS FROM THE FLOOR

None

#### 8. ADJOURNMENT

There being no further business before the Task Force the meeting adjourned at 1:10 pm.

Emily Kaltenbach, Chair

Elizabeth Martin, Stenographer