The Board of Regents of the University of New Mexico

Thursday May 11, 2023
9:00 AM Open Session - Student Union Building (SUB), Ballroom
8:00-9:00 AM Executive Session, Cherry Silver Room, 3rd Level of SUB
Luncheon-Executive Session-Post Open Session, Cherry Silver Room, 3rd Level of SUB
Livestream[1]: https://live.unm.edu/board-of-regents

Revised* **AGENDA**

8:00 AM: Cherry Silver Room

A. Call to Order and Confirmation of a Quorum, *Chair Kim Sanchez Rael*
   - Adoption of the Agenda

B. Vote to close the meeting and proceed in Executive Session (Roll Call Vote)
   - Discussions of limited personnel matters as defined in and permitted by Section 10-15-1.H(2), NMSA (1978).

C. Vote to Re-Open the meeting [*Regents proceed to Ballroom C]*

9:00 AM: SUB Ballroom C **TABS**

D. Convene Open Session, *Chair Kim Sanchez Rael*
   - Certification that the matters discussed in Closed Session were limited only to items on the Executive Session agenda, and if necessary, ratification of items in open session
   - UNM's Land Acknowledgement Statement

E. Minutes for Approval: April 10, 2023 regular meeting; April 19, 2023 special meeting; and corrections to the minutes of the February 14, 2023 regular meeting..... 1

F. Public Comment[2] *[limit 3 mins.]*

G. Advisors' Comments related to Agenda Items *[limit 3 mins.]*

H. President's Comments, *Garnett S. Stokes* 2

I. Regents' Comments

J. Regents' Committee Reports

----------CONSENT DOCKET----------

1. Graduate Certificate in Public Policy (New) C-1
2. Phlebotomy Technician Certificate (UNM Gallup) C-2
3. Certificate in Interdisciplinary Design C-3
4. BS Chemical Biology C-4
5. Security Managerial Group Resolution C-5
6. Policy C70 – Confidentiality of Faculty Records C-6
7. Five-Year Capital Plans, detailing projects which will construct and/or significantly improve and renew numerous facilities on UNM Campuses C-7
8. Main and Branch Campuses FY23 Budget Adjustment Request (BAR).....C-8
9. New Mexico HED Institutional Finance Division, 3rd Quarter Financial Actions Report and Certification through March 31, 2023.....C-9

10. Project Construction:.....C-10
    a) Lobo Welcome Center Re-Approval
    b) Mesa Del Sol – HVAC Upgrade
    c) Student Health and Counseling – Controls and HX Project
    d) Domenici Hall – Chiller Replacement
    e) La Posada – Dishwasher Renovation
11. Health Sciences FY23 Budget Adjustment Request (BAR) C-11
12. Health Sciences Library & Informatics Center 2nd Floor Renovation C-12
13. Health Resources & Services Administration UNM Health & Health Sciences: Renovation of Research Facilities Project.....C-13
14. Re-Appointment of Kurt Riley to the UNMH Board of Trustees (APCG Appointee).....C-14
15. Carrie Tingley Hospital Foundation By-Laws.....C-15
16. Capital Projects:.....C-16
    a) UH Main Chiller Replacement-Phase 2 ($2,750,000)
    b) Dermatology Clinic Renovation ($1,700,000)
    c) UH Main Boiler #1 Replacement ($1,250,000)

*Docket Note: #1-6 moved from Student Success, Teaching and Research [SSTAR] Committee; #7-10 moved from Finance and Facilities Committee [F&F]; #11-16 moved from Health Sciences Center Committee [HSCC]

Audit and Compliance Committee, *Regent Fortner, Chair*

Information Item:

1. Meeting Summary Report - May 4, 2023 meeting 3

Governance Committee, *Regent Schwartz, Chair*

Action Items:

1. BOR and Committee Meeting Schedule for 2023-24 Academic Year, *Committee Chair, Rob Schwartz* 4
2. New Regents' Policy, RPM Section 1.9 "Board of Regents' Office" 5
   Committee Chair, Rob Schwartz
3. Revised Regents' Policy, RPM 2.16 "University Counsel", *Chair Schwartz* 6

Student Success, Teaching and Research Committee [SSTAR], *Regent Ko, Chair*

Action Item:

1. 2023 Spring Degree Candidates, *Finnie Coleman, Faculty Senate President* 7

Finance and Facilities Committee [F&F], *Regent Payne, Chair*

Information Items: [Information Only – will not be presented]

1. Integrated Campus Plan, Preliminary Findings, *Teresa Costantinidis, EVP for Finance & Administration* 8
2. 3rd Quarter Consolidated Financial Report through 3/31/2023, *Norma Allen, University Controller* 9

Action Items:

3. Regents' Policy Revision to RPM Section 7.21 "Investment of Operational Funds and Bond Proceeds" 10
   Vahid Staples, Assoc. Dir. OPB&A; Jeremy Hamlin, Dir. Office of Planning, Budget & Analysis; and Max Kotary, Partner, AON Investments
4. FY24 Operating Budget for Main and Branch Campuses 11
   Jeremy Hamlin, director, Office of Planning, Budget & Analysis
5. Capital Outlay request package: 2023-2024 General Obligation Bonds, Severance Tax Bonds, and General Fund Projects which must be submitted to the HED 12
   Teresa Costantinidis, EVP for Finance & Administration; James Holloway, EVP for Academic Affairs/Provost; Doug Ziedonis, EVP for Health Sciences and CEO of the UNM Health System

Health Sciences Center Committee [HSCC], *Regents Schwartz & Fortner, Co-Chairs*

Action Items:

1. Health and Health Sciences FY24 Budget, *Joe Wrobel* 13
2. HSC Capital Outlay Projects for 2023 HED Summer Hearings, *Joe Wrobel* 14

Information Item: [Information Only – will not be presented]

3. NM State Health Improvement Plan Priorities, *Doug Ziedonis*; et. Al. 15

K. Advisors' Comments *[limit 2 mins.]* 16

L. Roll Call Vote to close the meeting and proceed in Executive Session-Luncheon
Regents proceed to Cherry Silver Room
- Discussions subject to attorney-client privilege pertaining to threatened or pending litigation as permitted by Section 10-15-1.H(7), NMSA (1978);
- Discussion of strategic and long-range business plans of public hospitals pursuant to Section 10-15-1H(9), NMSA (1978);
- Discussions of bargaining strategy preliminary to collective bargaining and collective bargaining between a policymaking body and an employee bargaining unit, as permitted by Section 10-15-1.H(5), NMSA (1978); and
- Discussions of limited personnel matters as defined in and permitted by Section 10-15-1.H(2), NMSA (1978); and
- Discussion of the purchase, acquisition or disposal of real property as permitted by Section 10-15-1.H.(8), NMSA (1978).
- Vote to Re-Open the Meeting

M. Certification that only those matters described in the Executive Session Agenda were discussed in the closed session; if necessary, final action with regard to certain matters will be taken in Open Session

N. Adjourn

** Revisions include: items moved to consent docket from committee (May 9 F&F and HSC Committees); morning and luncheon closed session interchange; there are no additions of agenda items to the originally submitted agenda*

[1]Access the livestream of the meeting here: https://live.unm.edu/board-of-regents

[2]Public Comment: Anyone wishing to give in-person public comment at the meeting will need to register. To register, please email regents@unm.edu with the subject "Request to provide public comment at 5/11 Regents' Meeting", and include the following information:

1. First and Last name
2. Email and Phone Number
3. Affiliated organization and professional title (if applicable)
4. Topic you would like to address

The deadline to register to give public comment is 3:00 PM Wednesday, May 10, 2023.

Written comments sent to regents@unm.edu are welcomed and will be distributed to the Regents before the end of the day 5/10/23.

UPDATE ON UNM HEALTH & UNM HEALTH SCIENCES: REGENTS' HEALTH & HEALTH SCIENCES COMMITTEE

STATE HEALTH IMPROVEMENT PLAN SOCIAL DETERMINANTS OF HEALTH

May 09, 2023

DOUGLAS ZIEDONIS, M.D
Executive Vice President, UNM Health Sciences and
Chief Executive Officer, UNM Health System

HEALTH & HEALTH SCIENCES

Legislative Update:

* thank the New Mexico Legislature, Governor Michelle Lujan Grisham, and executive departments, for their tireless work during this year's 60-day legislative session.

New Mexico policymakers continue to prioritize and support initiatives that will improve health outcomes across our state. Our campuses will benefit from investments in health professional training programs, capital outlay, clinical services, research, and the greater health system serving New Mexico communities.

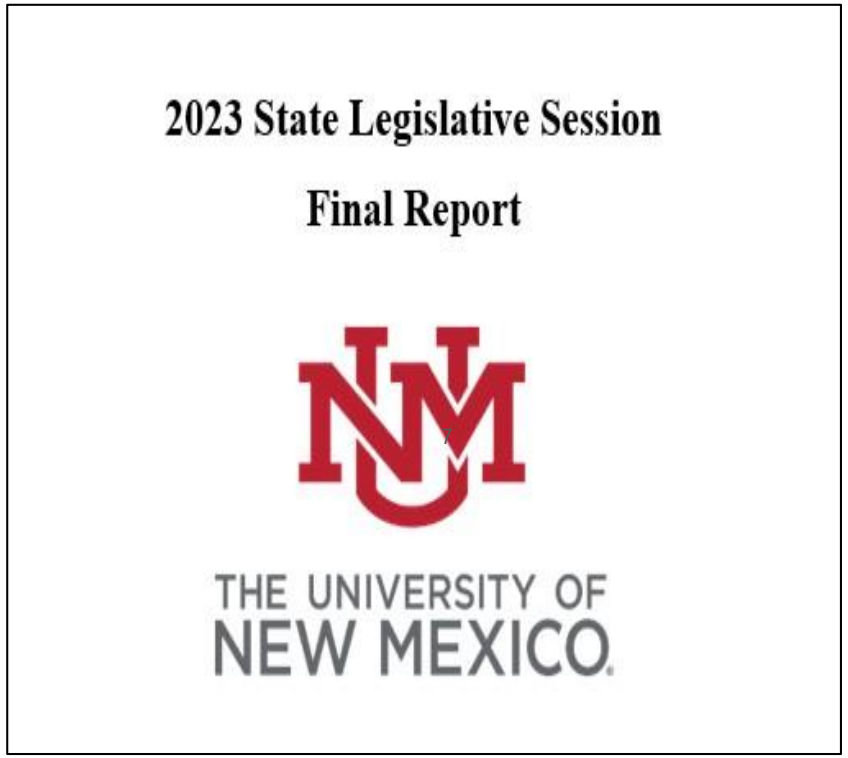
I am grateful for the stakeholders from across our Health System and Health Sciences who engaged in legislative efforts during this past legislative cycle, and I extend a special thank you to UNM's Government Relations Team, who worked around the clock on behalf of our institution.

UNM's 2023 State Legislative Session Final Report

Full Report on:

- Recurring Funds
- Other Appropriations
- Capital Outlay
- Non-appropriation bills

https://govrel.unm.edu/state-legislative-sessions/2023/final-2023-leg-session-report-final.pdf



House Bill 2

- **Includes a total of $139.2 million, or an 8.6% ($11.1 million) increase**
  - For recurring funds through Instruction & General (I&G) funding, Research and Public Service Projects (RPSPs), and Other State Funds (OSF)
  - 15.3% increase in RPSPs and OSF to go toward nursing programs, physician assistant programs, Office of the Medical Investigator, NM Poison and Drug Information Center, Rural and Urban Underserved Program, Native American Health Student Success Program, Child Psychiatric Center and Project ECHO.

- **Includes nonrecurring funds for the HED statewide initiatives that will support**:
  - $20 million for building renewal and replacement statewide, including up to $5 million for demolition of buildings at higher education institution.
  - $10 million for endowed nursing faculty positions statewide.
  - $5 million for public health programs at NMSU and UNM.
  - $55 million to provide matching funds to state research universities to support innovative applied research that advances knowledge and creates new products and production processes in the fields of agriculture, biotechnology, biomedicine, energy, materials science, microelectronics, water resources, aerospace, telecommunications, manufacturing science and similar research areas.

UNM Health & Health Sciences received capital appropriations, including full funding for its top state requests:

- Upgrade to Interprofessional Health Simulation Center ($5M)
- HSC Research Equipment ($3.2M),
- Health Sciences Library & Informatics Center 2nd Floor Renovation ($2.85M).
- UNM Comprehensive Cancer Center received $5M for its expansion project
- School of Public Health ($1.55M)
- Rio Rancho computer lab ($90K)
- Brain Therapy equipment ($215K)
- Dermatology facility ($575K), and more.

College of Nursing and Public Health Excellence Building

Strategic Priorities and Enablers

Enablers contribute to all the Strategic Priorities and represent the key drivers necessary for success. Investing in and prioritizing these seven key enablers will empower UNM Health & Health Sciences to execute its strategic objectives and tactics for each Priority.

Strategic Priorities

- Prioritize Workforce Development, Recruitment, and Retention
- Elevate Behavioral Health: Address Mental Health & Substance Misuse
- Enhance Health Equity for Underserved Groups
- Expand Impact through Research
- Enhance Access, Quality, and Safety of Clinical Care
- Enrich Student Experience, Educational Innovation, and Outcomes
- Advance New Mexico's Economic Development

Enablers

- Leadership, Career Development, & Organizational Structure
- Communications & Messaging
- Technology including Project ECHO
- Community Engagement/Support & Strategic Partnerships
- Sustainable Infrastructure (Environmental, Financial, Workforce, Safety and Facilities)
- One University
- Inclusive Excellence & Belonging

Current Culture

Reduce silos to promote collaboration

- Increase communication channels
  - Respectful, aligned, and informative
  - Listening Tours
- Incentivize cross-silo partnerships
  - Ex: Grand Challenges / Cross institutional pilot grants and support
  - Shared Post-Docs between groups
  - DEI / Faculty, Staff, and Students
  - Project Managers support (PMO)
  - IPE / Team Science
  - Annual Evaluations and Promotion Criteria
- Align silos with big picture and the UNM Health & Health Science broad goals
- Joint decision making on shared resources
- Team Coaching / Organizational Coaching
  - Unified Organizational Culture
  - Change Management / Culture Enhancement
- Cross-unit team meetings and activities (work and fun)

Workforce Development: Strategic Priority Overview

Narrative Summary

University of New Mexico Health and Health Sciences is the state's critical engine of workforce development in health care and health sciences. To meet the current and future workforce needs of both the state and the University, planning, resources, and innovation is needed that will guide historic numbers of New Mexicans into pathways toward health care professions as well as attract and retain educators, researchers, and clinicians from out-of-state. With current workforce challenges being among the most urgent faced by the state and the UNM system, an elevated talent experience will be necessary that promotes well-being, reduces burnout, addresses systemic ease of practice matters, supports career development and includes long-term retention approaches. While UNM may not control all the factors that create headwinds for workforce development in New Mexico, it must take a leadership role in creating safe, supportive, and attractive communities that inspire people to learn,

High-Level Goals

Goal 1: Advance New Mexico's state-wide needs by developing the health care workforce of the future and help in retaining the workforce across the state to serve New Mexicans

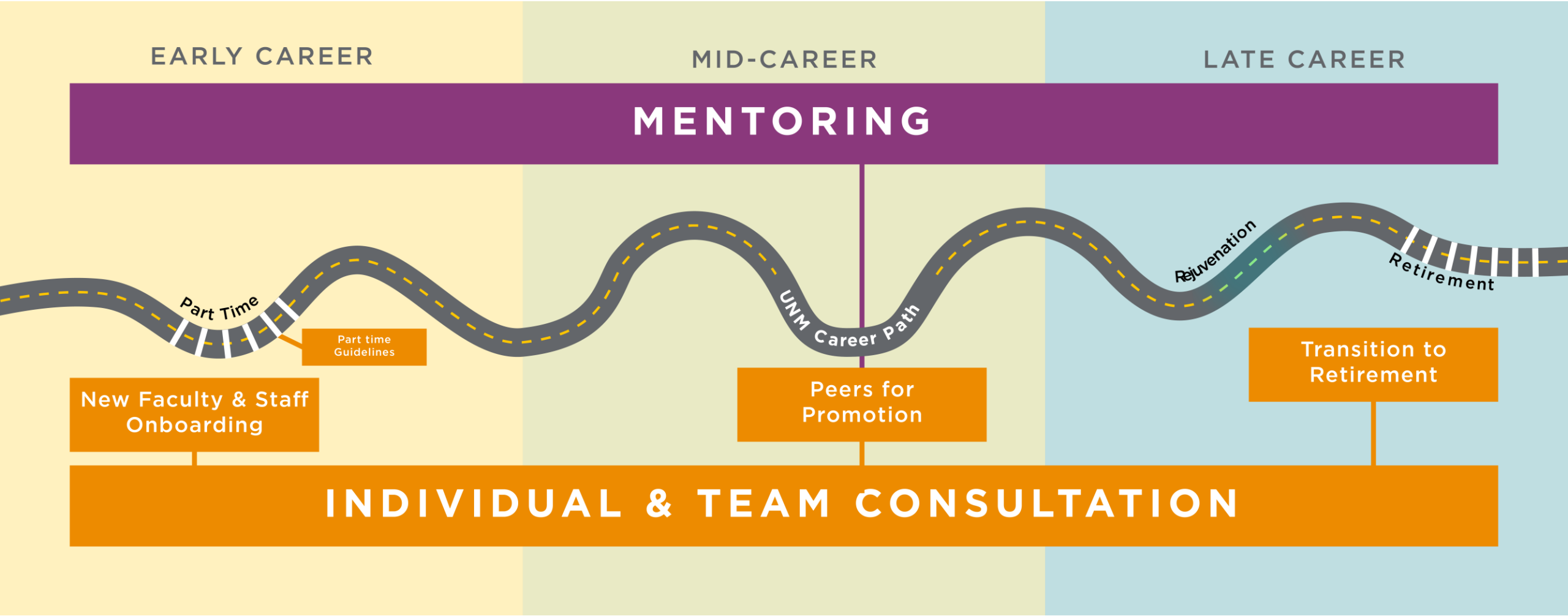
Goal 2: Advance UNM's own workforce needs by enhancing workforce development, attracting, and retaining diverse, highly productive, and talented people who exemplify our core values and are inspired to educate and heal the populations of people we have the privilege to serve at UNM

Goal 3: Elevate the wellbeing & safety of the individuals that make up UNM Health & Health Sciences through systemic change and supporting individuals, and develop a best-in-class talent experience with a culture that supports community and belonging

Workforce Development: Strategic Objectives

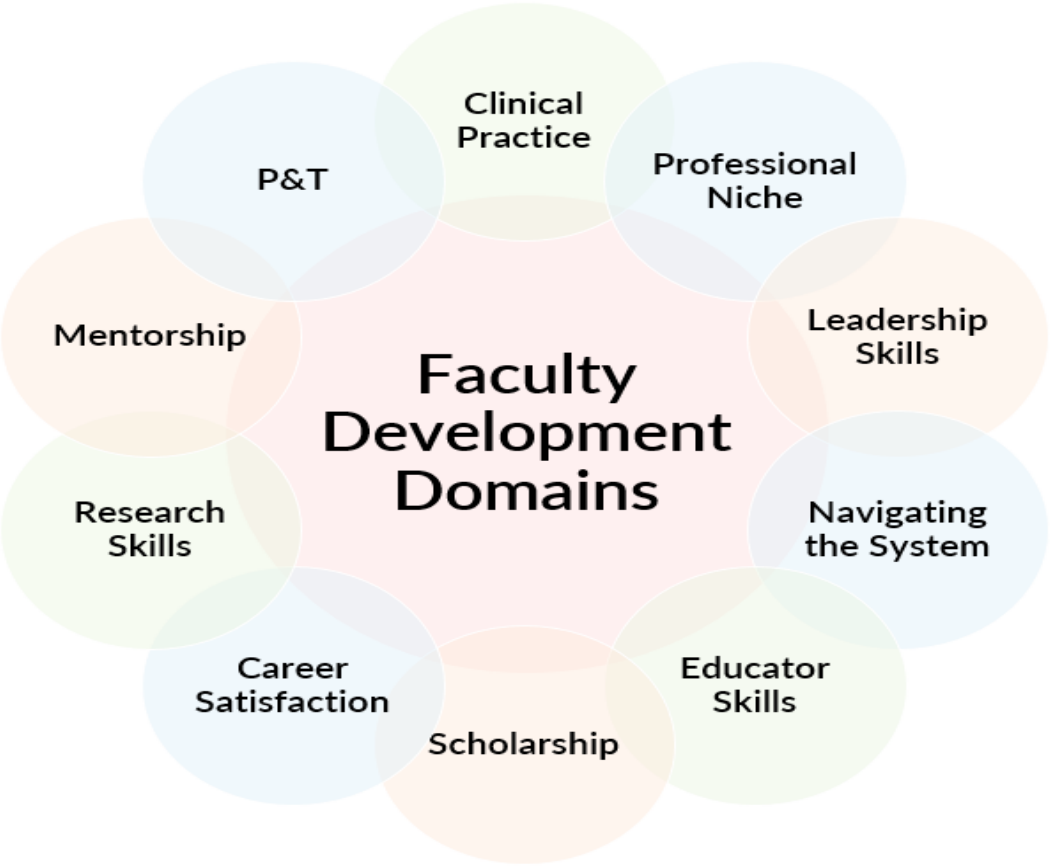
1. **Implement evolving UNM compensation and benefits models**
2. **Strengthen connection to private industry and increase employability of our graduates**
3. **Elevate the well-being and safety of the individuals that make up UNM Health and Health Sciences and improve culture**
4. **Improve UNM faculty and staff recruitment and retention**
5. **Improve statewide and UNM behavioral health workforce recruitment and retention**
6. **Improve clinical workforce recruitment and retention**
7. **Expand & strengthen partnership and pathways programs for health and health sciences careers**
8. **Working with the State and other providers, create and help deploy a statewide plan for increasing the state health care workforce**
9. **Increase clinical workforce well-being and support systemic wellness and ease of practice changes**
10. **Enhance collaborations with the Veteran's Affairs (VA) New Mexico Health Care System to increase our joint hires of faculty, staff, and residents / fellows**

Faculty, Staff, & Student/Learner Recruitment/Retention:
Support Throughout their Career



Career Development As an Enabler for all 7 priorities: Career Cycle & Key Development Domains

https://hsc.unm.edu/medicine/faculty-careers/faculty-life-cycle.html



https://www.ohsu.edu/school-of-medicine/faculty-development

Faculty, Staff, and Student Career Development & Mentoring

Targeted Career Development Programs

- On-boarding
- Peers for Promotion
- Pathways Options
- Individual Development Plans
- K Award & K→R & R groups
- Scholarship and Service

Leadership & High Performance Teamwork

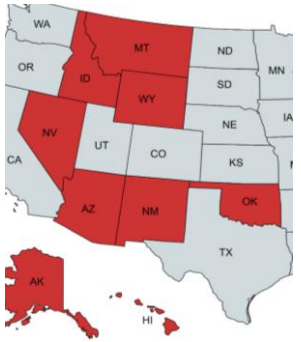
Resiliency Coaching

Framework for Professional Fulfillment

System Issues & Personal Resilience / Wellness

Copyright© Stanford Medicine, 2016

UNM Health Science
Faculty Mentor Development Program



Mentor Development ECHO

Small group facilitated real-life case discussion

8 hrs, 8 modules, 6 competencies

Mentoring Networks TeleECHO

Didactic followed by two case discussions

8 hrs, 8 modules, 4 competencies

Online Asynchronous coursework

Prezi-based multimedia format

12.5 hrs, 8 modules, 6 competencies

Cross-cultural Communication in Mentoring ECHO

HRSA
Health Resources & Services Administration

Grant 1D34HP45723

HEALTH SCIENCES
OFFICE FOR DIVERSITY, EQUITY & INCLUSION

Project ECHO

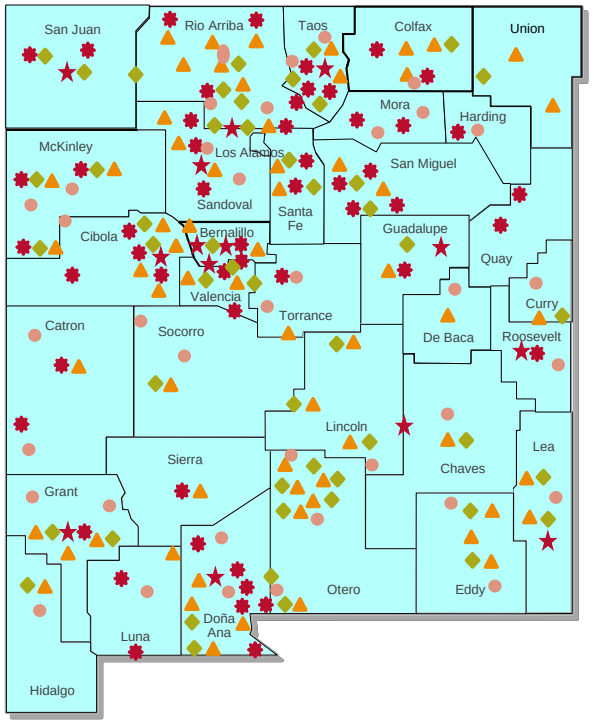
COMMUNITY FACULTY SCHOLARS PROGRAM

A program facilitating the leadership, networking and research skills of under-represented minority community faculty educators who train UNM HSC students in under-resourced rural and urban communities across the state of New Mexico, beginning June 1st

APPLY BY
bit.ly/Comm

10% FTE protected time for 1 year

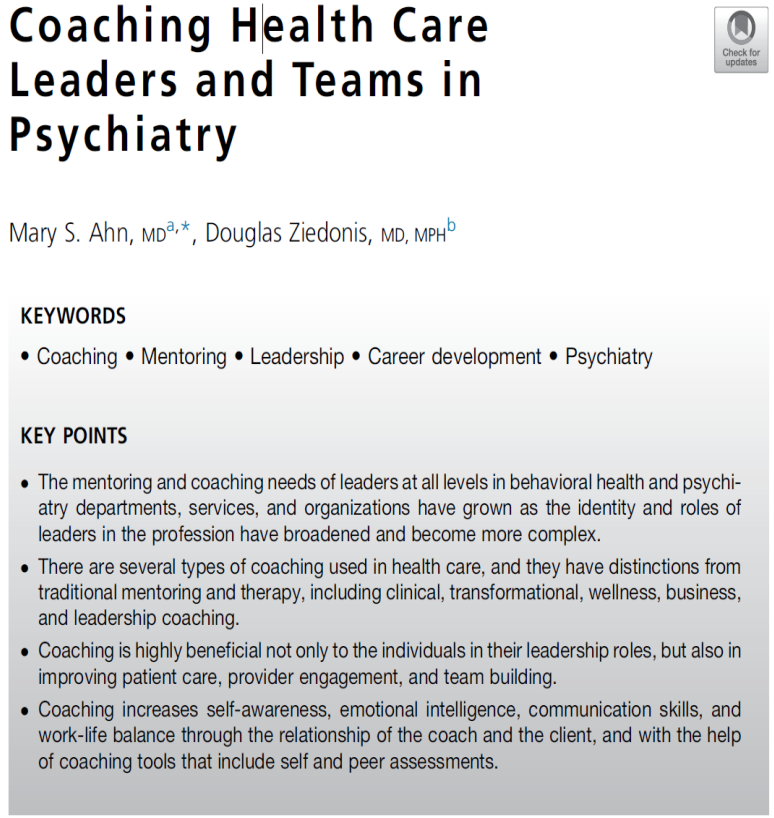
Faculty Development to support Community Engagement Mission:



- **Health Equity Dialogues, Clinical Services, Research, Education, and Pathway Programs**
- **Statewide support services**
  - ★ CTSC Community Engagement Research Core
  - ◆ Investigator-led community-based programs
- **Links to other research programs**
  - ▲ Project ECHO
  - ✸ Practice-based research network
- **Establish recruitment networks**
  - ● OCH / CHW Network

Coaching Programs

* Internal Coaching Programs
  - Training Faculty to be coaches
    - WABC and ICF
* Outsourcing Executive Coaching Programs
* Peer Coaching: Leadership College Model
* MPLP: Mindful Coaching



Coaching Health Care Leaders and Teams in Psychiatry

Check for updates

Mary S. Ahn, MD[a,*], Douglas Ziedonis, MD, MPH[b]

KEYWORDS

• Coaching • Mentoring • Leadership • Career development • Psychiatry

KEY POINTS

- The mentoring and coaching needs of leaders at all levels in behavioral health and psychiatry departments, services, and organizations have grown as the identity and roles of leaders in the profession have broadened and become more complex.
- There are several types of coaching used in health care, and they have distinctions from traditional mentoring and therapy, including clinical, transformational, wellness, business, and leadership coaching.
- Coaching is highly beneficial not only to the individuals in their leadership roles, but also in improving patient care, provider engagement, and team building.
- Coaching increases self-awareness, emotional intelligence, communication skills, and work-life balance through the relationship of the coach and the client, and with the help of coaching tools that include self and peer assessments.

UCSD Center for Mindfulness

mindfulness practices for clinicians

1	**A brief breath to begin your day.** In the morning when turning on your computer, before launching into your activity of the day, take a few moments to close your eyes and focus on your breathing.
2	**Mindful Driving.** When driving, pay attention to actually driving. Focus on the feel of the steering wheel, the traffic around you and remember to breathe. Consider turning off the radio.
3	**"Where are my feet?"** When in a conflict situation, notice the sensations in your fee right now to ground you and calm your nervous system.
4	**S.T.O.P. at the Doorknob.** When you grasp the doorknob before meeting with a patient or colleague: 1. STOP what you're doing. 2. Take a Breath. 3. Observe what is present for you. 4. Proceed with intention & choice.
5	**Mindful washing.** When washing your hands, focus on the warm water and the soap, pay attention to scrubbing and notice the sensations in your hands and fingers.
6	**Clear some breathing space with a Mindful Check-In.** Set an alarm to remind you to take 3-5 minutes to refocus and recharge.
7	**Mindful emailing.** Before hitting send on an emotionally charged email, stop and take 10 breaths. Notice any sensations in your body and identify the cause. Then re-read your email before sending.

8	**Uni-task.** Do just one thing at a time and really pay attention to doing that one task, be it drinking coffee, writing an email, meeting with a patient, or filling out paperwork.
9	**Eat a meal mindfully.** Choose one meal to eat slowly and with attention to all of the textures, flavors and sensations that accompany it. Consider where the components of the meal came from and the journey from production to plate. Savor it.
10	**Take a Mindful Walk.** Notice your body as you walk. Feel your breath and your feet. Notice your surroundings and take in the full sensory experience of the walk.
11	**Mindful Listening.** A caregiver who listens fully is the greatest gift and can potentially provide the best insights into the patient's entire story, including body language, tone of voice as well as words. Practice being fully present and open in the conversation.
12	**Mindfully Hug someone special.** Fully experience this hug. Notice them, feel their embrace, appreciate their aliveness. Notice if your mind wanders off, and just kindly come back.
13	**Download an app. And use it.** There are many tech options to help us improve our attention. (And even to help us manage our relationship with that tech!)
14	**Label your emotions.** As they happen, labeling emotions helps us manage them and regain a bit of objectivity, so we don't get lost in them and react on auto-pilot.

© 2020 UCSD Center for Mindfulness
mindfulness.ucsd.edu.

https://medschool.ucsd.edu/som/fmph/research/mindfulness/Documents/14%20Mindfulness%20Practices%20for%20Clinicians.pdf

Questions & Reflections

Email: dziedonis@salud.unm.edu

UPDATE ON UNM HEALTH & UNM HEALTH SCIENCES: REGENTS' HEALTH & HEALTH SCIENCES COMMITTEE

STATE HEALTH IMPROVEMENT PLAN SOCIAL DETERMINANTS OF HEALTH

May 09, 2023

DOUGLAS ZIEDONIS, M.D
Executive Vice President, UNM Health Sciences and
Chief Executive Officer, UNM Health System

HEALTH & HEALTH SCIENCES

NMDOH
NEW MEXICO DEPARTMENT OF HEALTH

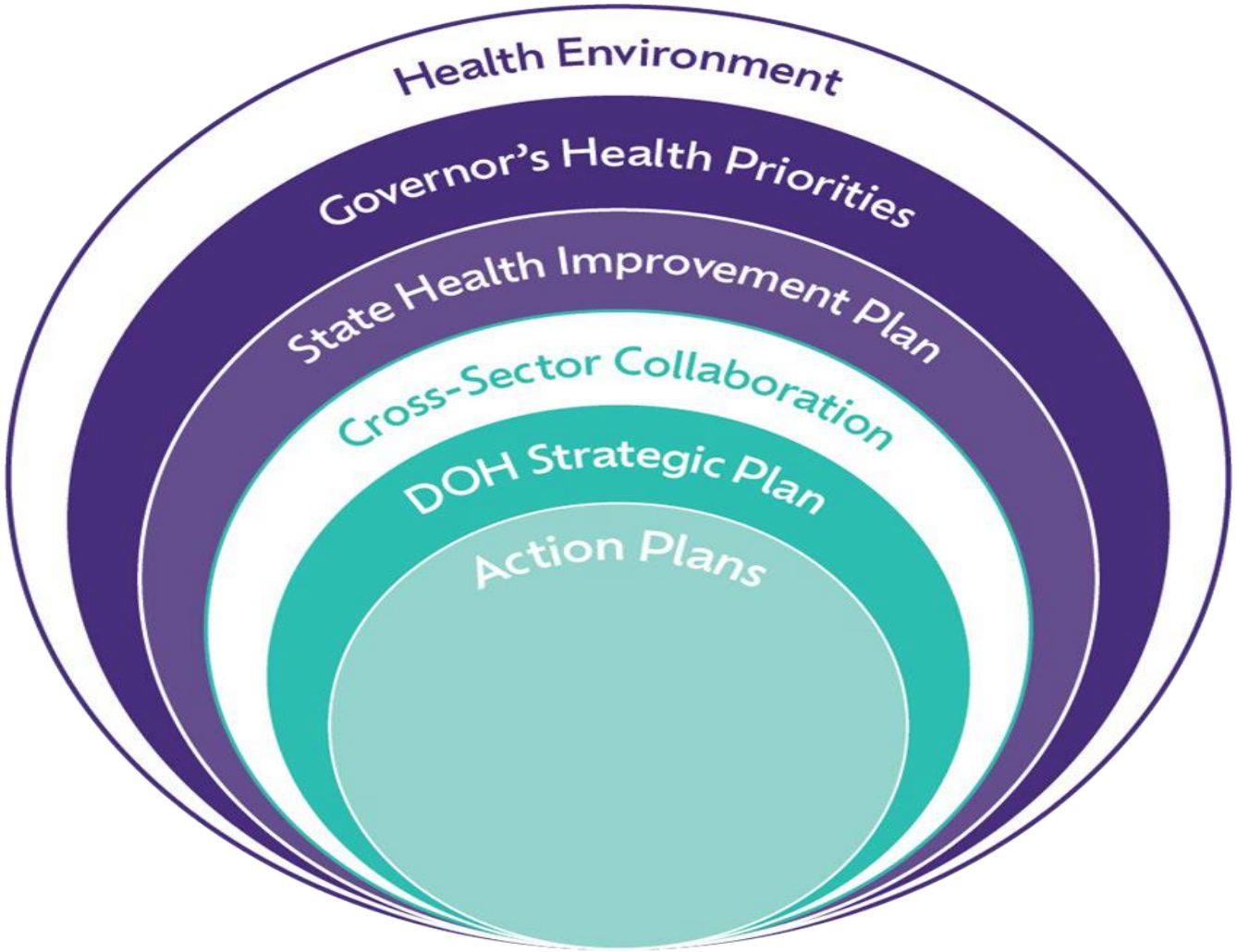
Investing for tomorrow, delivering today.

State Health Improvement Plan Strategy Session

April 26, 2023

1190 S. St. Francis Drive • Santa Fe, NM 87505 • Phone: 505-827-2613 • Fax: 505-827-2530 • nmhealth.org

Systematically Aligning Planning Efforts

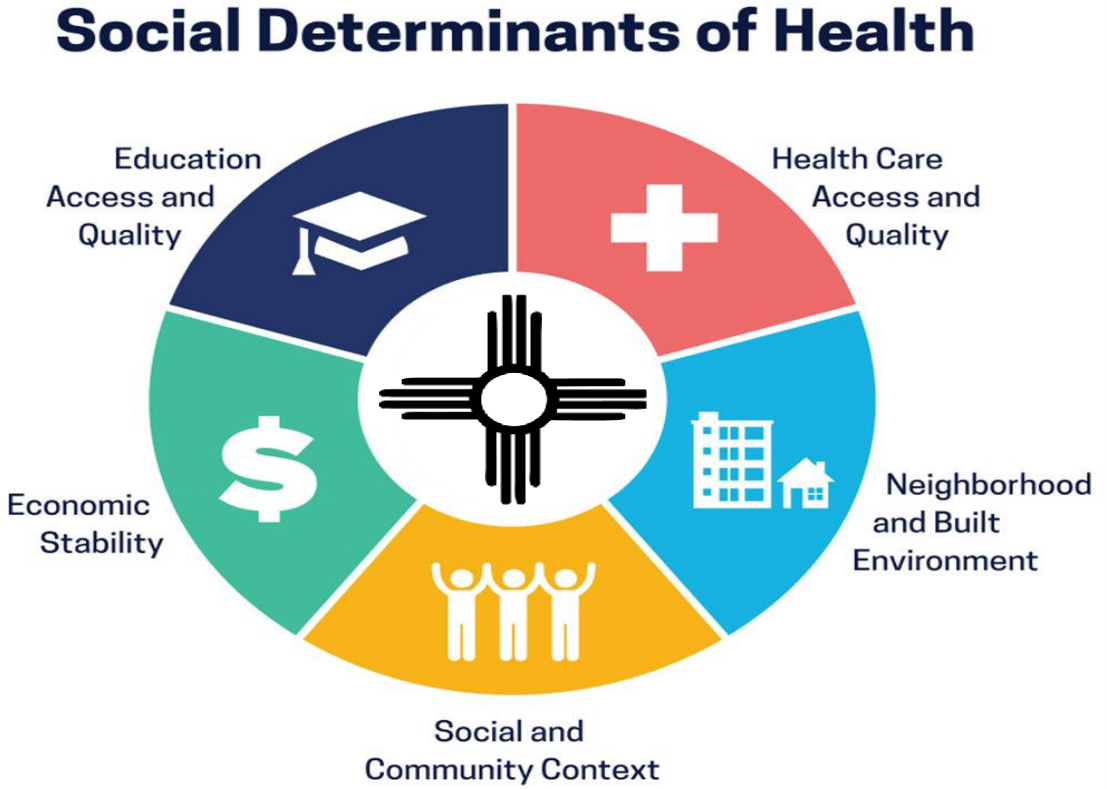


Strategic Planning Key Components

- Community Health Assessments
- State Health Assessments
- Health Equity Report
- Performance Management System
- Quality Improvement Implementation Plan
- Workforce Development Plan
- Public Health Accreditation Requirements

Planning Long-Term, Systematic Efforts to Improve Public Health Outcomes

- Address the root causes that shape opportunities and the quality of our lives
  - Economic Stability
  - Education Access & Quality
  - Health Care Access & Quality
  - Neighborhood & Built Environment
  - Social & Community Context
- Shift the focus to systems, recognizing the conditions we live within dictate health outcomes

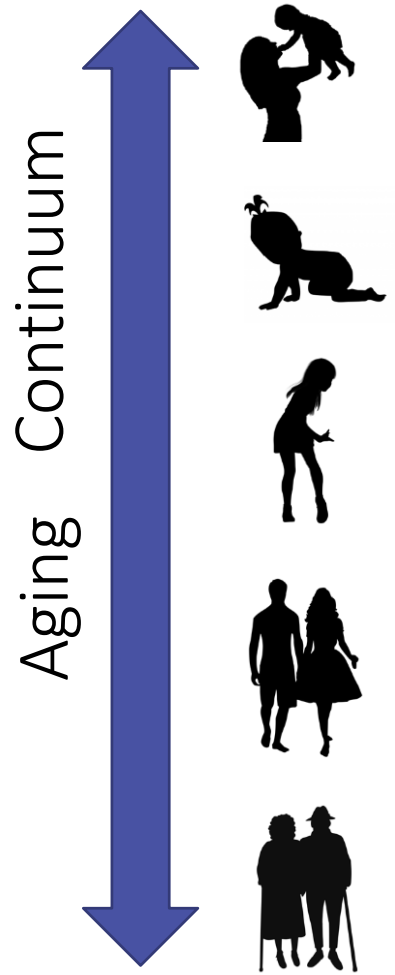


Source: Healthy People 2030

Health Priorities

Meet Criteria: Governors' Priorities, Community Priorities, Health System priorities, community members, resource availability, and data.

Health Priorities	
Priority Area	Health Related Issues
Access to Care (Primary/ Behavioral)	• Proximity to Care • Shortage of Healthcare Providers • Affordable & Available Mental Health & Substance misuse Services •Access to Maternal Health Care & Reproductive Health (Including) Maternal Mortality/Pregnancy Associated Deaths
Behavioral Health	• Drug Overdose Death • Alcohol-Related Death • High Suicide-Rates • Adverse Childhood Experiences & Mental Health • Maternal Health & Mental Health
Social Health	• Access to Social Services & Coordination • Severe Housing Cost Burden & Homelessness • Food Environment & Access to Food • Transportation
Physical Health	• Diabetes • Cardiovascular Disease • Obesity



State Health Improvement Plan (SHIP) Priorities

Access to Care

Behavioral Health

Social Health

Criteria for Selection

- Health areas systematically align planning efforts and prioritize collaboration
- These health areas matter to New Mexicans
- We have the capacity to address these health areas
- These health areas are backed up by data and address health inequities

The Jamboards At A Glance

Themes for Access to Care

1

Linkage To Services And Transportation

Refers to access to care including, care coordination systems, closed loop referral systems, timely access to treatment, consistent access for long-term care, expanding access in rural areas, school-based healthcare, family resource centers, home visiting, internet access for telehealth, and reliable transportation to and from appointments.

2

Increasing Health Professional Infrastructure

Refers to development and expansion of the clinical workforce.

3

Greater Partnership And Collaboration

Refers to interdepartmental, interorganizational, and community partnerships to share knowledge and expertise and address care gaps.

4

Compensation And Incentives

Refers to funding, including Medicaid expansion, community health plans, community benefit investments, grant monies, and incentives to providers.

5

Preparedness For Future Health Emergencies

Includes infectious disease and disasters, environmental disasters, and behavioral and social health emergencies.

Themes for Behavioral Health

1

Increasing Behavioral Health Service Capacity

Refers to addressing gaps in services and funding; increasing resources including more facilities, rural care, telehealth, school-based health centers; increasing and retaining providers; expanded training curriculum for clinicians; consolidation of services / combined Behavioral Health and primary care.

2

Increase Partnerships And Collaboration

Coordination between agencies and organizations; consolidation of services / combined behavioral health and primary care.

3

Prevention Programs

Programs, interventions, and strategies that reduce risk factors and strengthen protective factors; screen people at risk and reduce harms for those who screen positive.

4

Trauma Informed Care Approach

Integrate knowledge about trauma into policies, procedures, and practices, and actively employ practices to reduce re-traumatization (includes training for actors within the judicial system).

5

Alternative Care Models

Telehealth, one-stop-shop, regional facilities, culturally appropriate care. Multiple pathways to care.

Themes for Social Health

1

Social Service Workforce And Screening

Refers to interorganizational communication and coordination of services; improving referral systems; social needs screenings, ensuring connection to direct services.

2

Affordable Housing / Homelessness

Refers to research, interventions, and direct services around housing.

3

Food Security

Describes hunger and nutrition in children and adults; food sovereignty, cultural lifeways related to food, culinary medicine, farmers markets; food assistance programs—local, regional, and federal—and access to those programs.

4

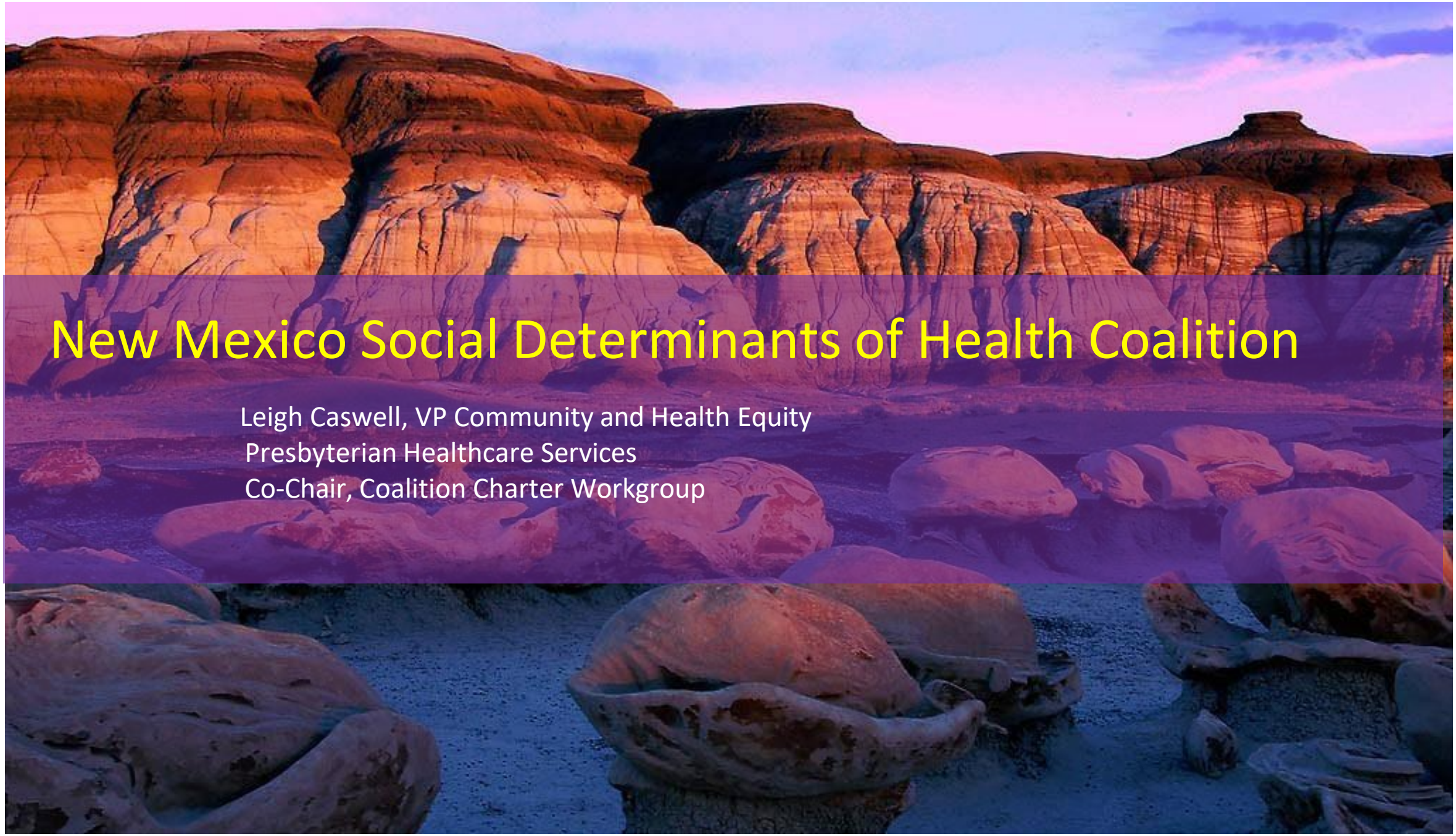
Transportation

Access to transportation and its relationship to wellbeing; transportation networks and partnerships, transportation interventions.

5

Income Security

Refers to financial assistance.



New Mexico Social Determinants of Health Coalition

Leigh Caswell, VP Community and Health Equity
Presbyterian Healthcare Services
Co-Chair, Coalition Charter Workgroup

Updated 3.20.2023

New Mexico Social Determinants of Health Coalition

All people in New Mexico live in communities with equitable access to the conditions they need to thrive

SITUATION/ Context

- 80% of population health outcomes are driven by non-clinical factors related to health behaviors, social and economic factors, and physical environment.
- Negative social determinants of health are pervasive among low-income populations and in low-income areas.
- Health status and health outcome disparities disproportionately affect individuals who are low-income or members of communities of color.
- Stakeholders from across the state have come together to create a community network of care and ensure alignment of a closed loop referral system.

INPUTS/ Partnerships

- State agencies – HSD, DOH, BHSD
- State funding for health councils and closed loop referral system
- Existing funding for social services
- Local Community Based Organizations
- New Mexico Alliance of Health Councils and SHARE New Mexico
- Local and statewide healthcare delivery systems and health insurance plans
- County health councils, 100% New Mexico and other health advocacy organizations
- Syncronys, our statewide Health Information Exchange
- A mission to bring together community, healthcare, social service agencies, philanthropy, business, and government across New Mexico to collaborate to reach shared goals; build relationships; coordinate resource referrals and improve navigation; share data; make shared investments; and champion policies in our communities to improve health outcomes
- Existing work in addressing SDOH around the state
- Existing SDOH screening and referral work

Goals and Objectives

Develop shared outcome measures, monitor progress, and share data on local resources to prioritize investments and improve outcomes across state and local agencies, health systems, and community-based organizations

- Create infrastructure for data sharing
- Develop a data system that includes shared outcomes and measures

Support the development and implementation of a community-driven, coordinated, closed loop health and social service referral system/s that meets the needs of our local communities

- Make connections between state agencies and the HIE to fund and implement the work
- Create a process for ensuring a community driven system

Convene stakeholders from across the state to support alignment, identify opportunities for collaboration, improve policies, and create shared accountability towards achieving our purpose

- Develop coalition infrastructure
- Convene coalition meetings
- Continuously scan state SDOH Environment to support alignment and collaboration

OUTCOMES

Community Outcomes

- Increase in food security
- Increase in access to health care
- Increase in access to transportation
- Increase in access to housing

Social Service Agency/Community Based Organization Outcomes

- Increased capacity to meet social needs
- Increased linkage with other CBOs to reduce unnecessary duplication of services
- Increased linkage with health systems to provide well integrated social and medical whole person care

Local and State Agency Outcomes

Note-Can we align these outcomes with the outcomes that are noted in the soon to be completed SHIP?

Health System Outcomes

- Increased coordination and continuity of medical and social care
- Decrease medical and increase investment social care
- Decrease health inequities, and improve health outcomes for people in New Mexico

Deliberately and consciously rooted in a model that upholds cultural safety and is inclusive, dynamic, diverse, and incorporates an health and racial equity lens

COLLEGE OF POPULATION HEALTH

TRANSITIONING INTO AN ACCREDITED SCHOOL OF PUBLIC HEALTH

Presented by Dean Tracie Collins, MD, MPH, MHCDS

NMDOH

NEW MEXICO DEPARTMENT OF HEALTH

HSC COMMITTEE MEETING

MAY 9, 2023

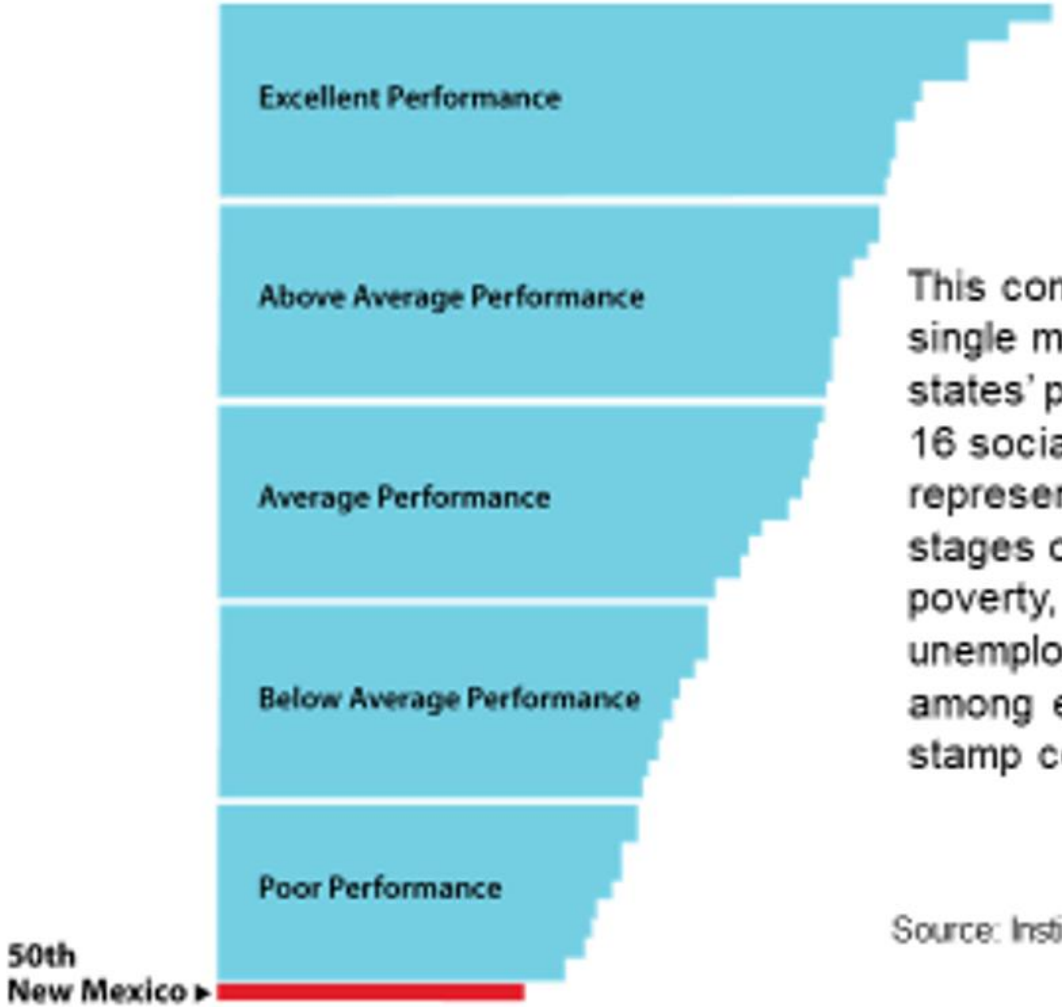
Social Determinants of Health (SDOH) Update

Arthur Kaufman, M.D.
Vice President for Community Health
Family & Community Medicine Professor
University of New Mexico

Rohini Mckee, M.D., MPH
Chief Quality & Safety Officer
Associate Professor of Surgery
University of New Mexico

How New Mexico Ranks Nationally in Burden of Adverse SDOH

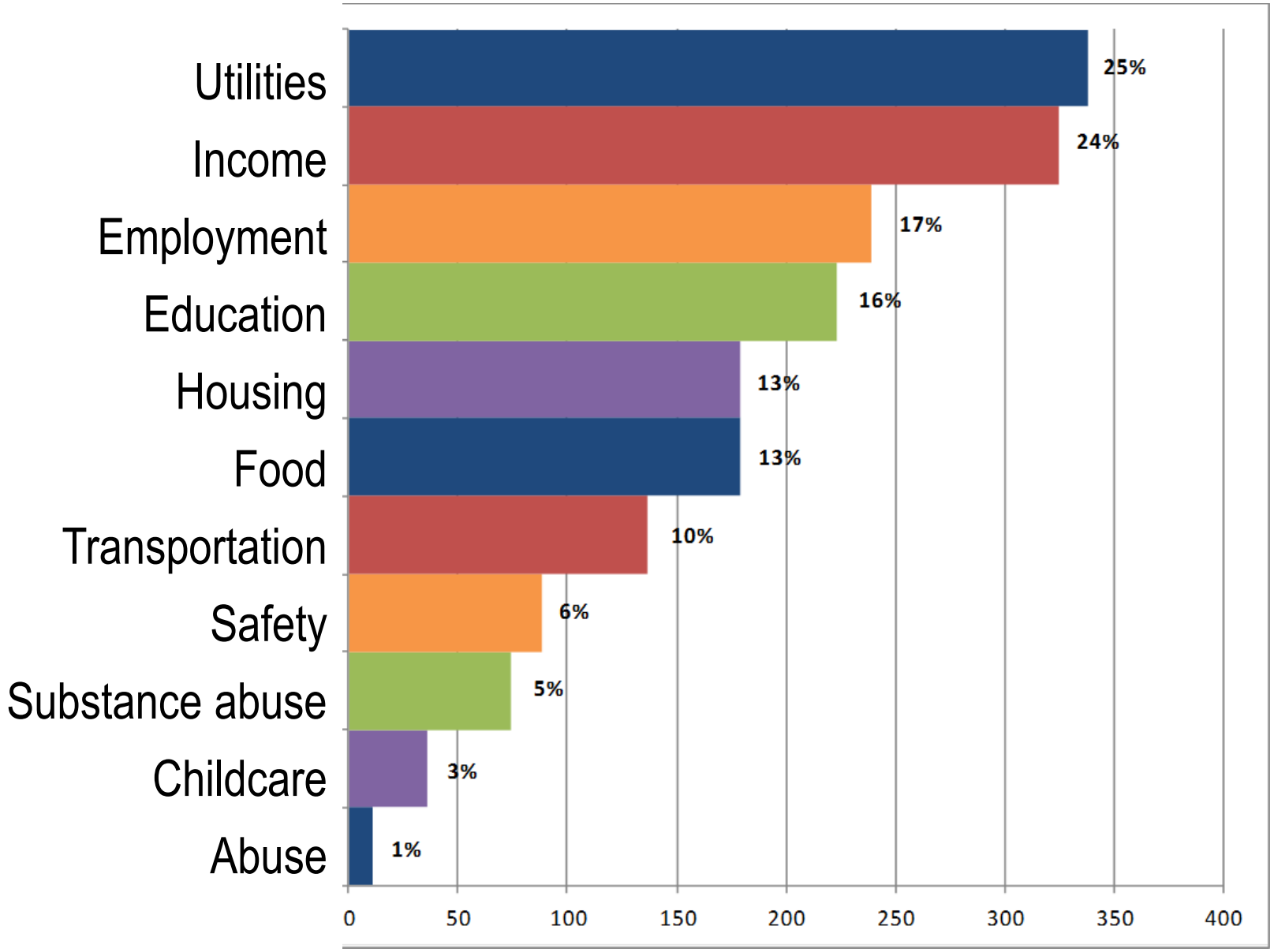
The Social Health of the Fifty States: Where is New Mexico?



This combines in a single measure each states' performance on 16 social indicators representing different stages of life (ex. Child poverty, teen drug use, unemployment, suicide among elderly, food stamp coverage)

Source: Institute for Public Health

Well Rx Survey Responses



The Case for Addressing SDOH “Upstream”

- 30% fewer inpatient admissions
- Significant drop in ER visits, hospitalizations, drug use

Hospital Commitment to Health Equity

Five Domains for Hospital Attestation of Commitment to Advancing Health Equity CY2023

Equity is a Strategic Priority
- identify populations with health disparities
- categorize healthcare equity goals
- outline resources
- engage key stakeholders

Data Collection
- demographic and SDoH information
- training for staff
- interoperable data elements

Data Analysis
- insights to stratify equity gaps

Quality Improvement
- participates in local, regional, or national quality improvement activities

Leadership Engagement
- annually review strategic plan for achieving health equity and key performance indicators

FY 2023 IPPS/LTCH PPS final rule, organizations must attest to five domains related to Health Equity as part of the Inpatient Quality Reporting Program.
https://qualitynet.cms.gov/files/62629ee35e40610016f30140?filename=Hosp_Commit_HlthEqStrct_Meas.pdf

Screening for Social Drivers of Health Measures

Screening for all patients ≥ 18 years at time of hospital admission CY2023

Prioritized Health-Related Social Needs (HRSH) domains include:

- food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal violence

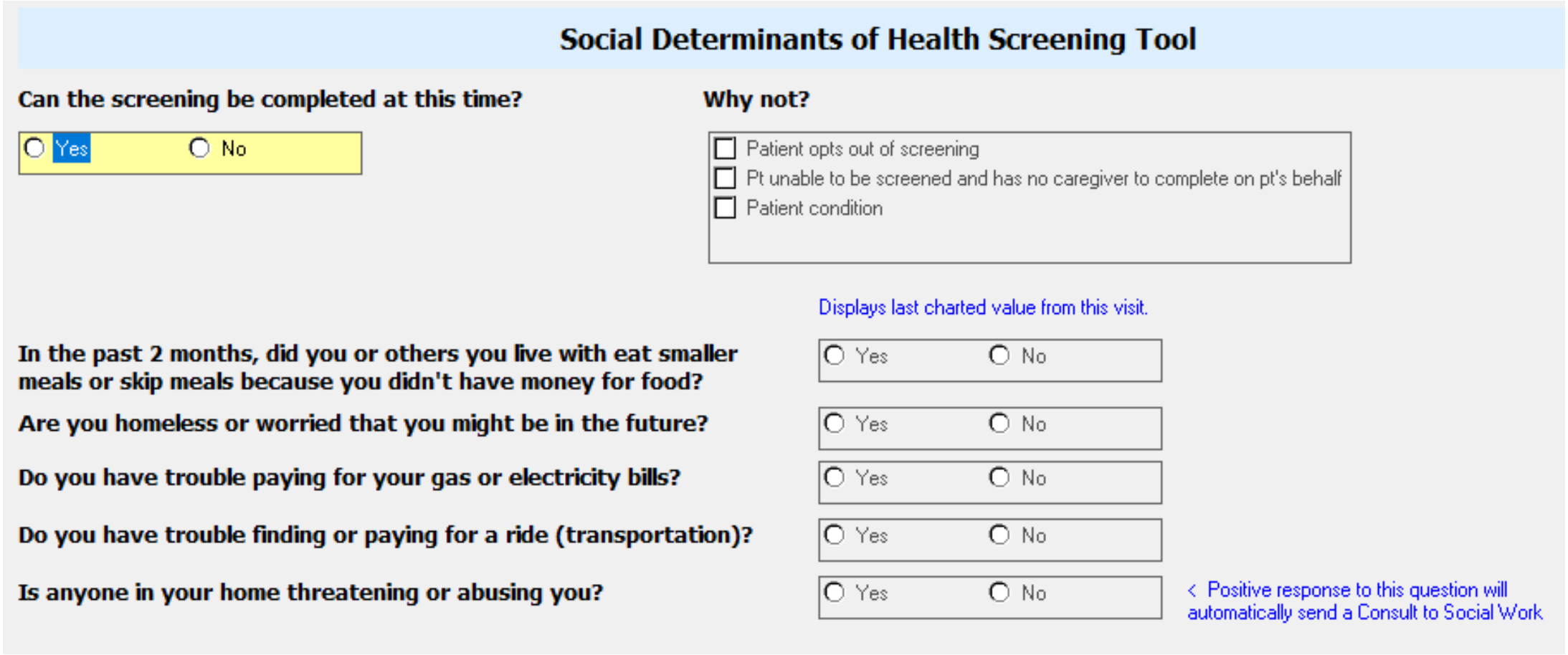
Performance Measure Name:

1. Screening for Social Drivers of Health
   - Denominator: all inpatients 18 and older
   - Numerator: inpatients 18 and older who were screened for HRSNs

2. Screen Positive Rate for Social Drivers of Health
   - Denominator: all inpatients 18 and older
   - Numerator: inpatients 18 and older who was positive for any of the five HRSNs

FY 2023 IPPS/LTCH PPS final rule, organizations must attest to five domains related to Health Equity as part of the Inpatient Quality Reporting Program.
https://qualitynet.cms.gov/files/6269ba5b5e40610016f30237?filename=ScrnSocDrvrs_%20Scrn_Pos_Specs.pdf

Screening Tool in Electronic Medical Record Completed by Nurses

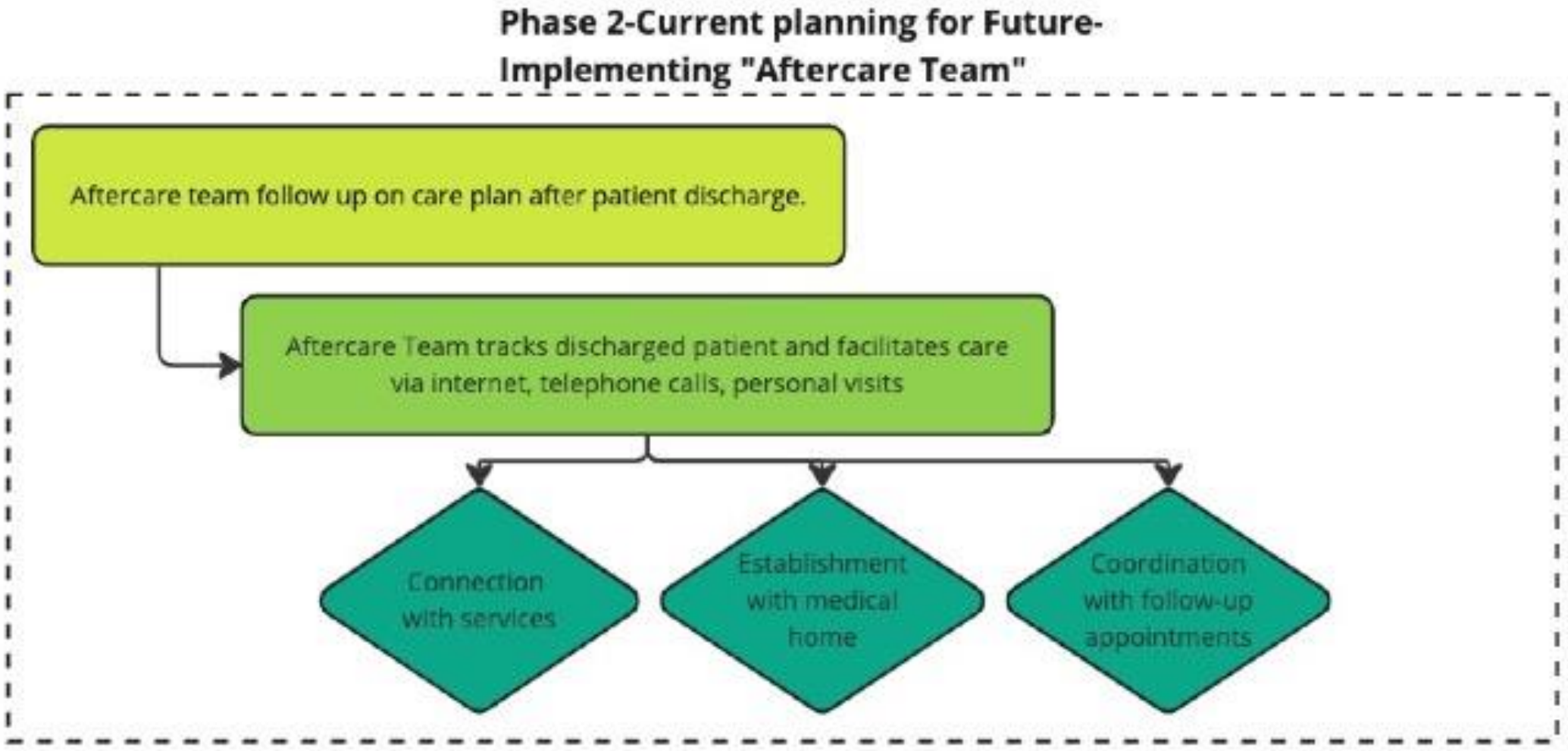


Screen Positive Rates

Social Determinant	Screen Positive Rate
Food Insecurity	4.9%
Homelessness	8.1%
Utilities	9.8%
Transportation	10%
Threatening or abuse behavior	1.9%

49% of all patients have been screened. (n=6244)

SDOH Workflow: Inpatient



SDOH Workflow in Primary Care Clinics

Following Inpatient Model

Screening

- MA asks five SDOH questions of every patient, every visit.

Electronic Health Record

- MA enters answers into Cerner, notifies CSW/social worker and provider. Provider imports SDOH answers into clinical note, which increases level of visit and billing.

Intervention

- CSW/social worker meets with the patient in clinic or outreach after visit.

Follow up

- CSW/social worker providers resources, refers to community-based CHWs, primary care clinics or telephone call group.

Dr. Tracie Collins Returns to Lead UNM College of Population Health

Tracie Collins, MD, MPH, who has served as New Mexico health secretary for eight months, will return to her post as dean of The University of New Mexico College of Population Health at the end of July.

Collins last fall accepted Gov. Michelle Lujan Grisham's request that she serve the state in an official capacity and lead the New Mexico Department of Health through a challenging portion of the COVID-19 pandemic, with the understanding she might elect to return to her previous career after operationalizing and overseeing the agency's COVID-19 vaccination efforts.

"I am grateful to my colleagues at the Department of Health and to the governor for her faith in me," Collins said. "Our partnership has been the foundation of an incredibly successful vaccination drive. I'm proud of the work we've done to protect New Mexicans, especially with our emphasis on equity and reaching underserved populations. Although it's time for me to return to my academic career, I look forward to continuing to work hand in hand with the governor and her administration to enhance public health throughout our state."

The governor hailed Collins for her efforts on behalf of the state.

Impacting Public Health

$10,000,000

Many thanks to our state leaders for $10 million to spend over the next two years to grow the College of Population Health!!

COPH Transformation

OUR VISION FOR CHANGE

Our Vision

The College of Population Health will be a global leader committed to achieving health equity and thriving communities throughout New Mexico, the Southwest, and the globe.

Our Mission

Working collectively with communities and other key partners to educate our future public health leaders and conduct quality scholarship, we will improve the health and social well-being of all peoples in New Mexico and beyond.

Goal

Transform from

College of Population Health

To an accredited

School of Public Health

Six Deliverables to Impact Public Health in NM in Two Years

- **Deliverable #1: Increase the number of students**
- **Deliverable #2: Increase the number of faculty**
- **Deliverable #3: Increase non-state research dollars**
- **Deliverable #4: Create a Public Health Education Network Statewide**
- **Deliverable #5: Expand Statewide Community Health Assessments**
- **Deliverable #6: Lead two major public health intervention initiatives**

Steps to Accomplish Accreditation

1. Have a date for graduating first PhD student(s)
2. Increase the number of faculty which also requires more staff

Six Deliverables to Impact Public Health in NM in Two Years

- **Deliverable #1: Increase the number of students**
- **Deliverable #2: Increase the number of faculty**
- **Deliverable #3: Increase non-state research dollars**
- **Deliverable #4: Create a Public Health Education Network Statewide**
- **Deliverable #5: Expand Statewide Community Health Assessments**
- **Deliverable #6: Lead two major public health intervention initiatives**

Student Program Enhancements

- Undergraduate level
  - Maternal Child Health (MCH) minor
  - Online Program
- Graduate level
  - Proposed Maternal Child Health (MCH) minor and certificate (anticipated Fall 2023)

- Collaborations with:
  - Anderson School of Management
  - Psychology and Public Administration
- Cooperative Doctoral Degree:
  - New Mexico State University

NM STATE

BE BOLD. Shape the Future.®
College of Health, Education and Social Transformation

COLLEGE OF POPULATION HEALTH

PhD in Health Equity Sciences

A COOPERATIVE DOCTORAL DEGREE

PhD Curriculum – Concentrations

UNM

- Epidemiology
- Community-based Participatory Research
- Global Equity and Policy
- Community Health Education

NMSU

- Environmental & Occupational Health
- Socio-Cultural & Behavioral Sciences
- Health Across the Lifespan
- Health Administration and Policy

- Shared - Biostatistics

Students can choose their concentration from either university regardless of their “home” institution

Six Deliverables to Impact Public Health in NM in Two Years

- Deliverable #1: Increase the number of students
- **Deliverable #2: Increase the number of faculty**
- Deliverable #3: Increase non-state research dollars
- Deliverable #4: Create a Public Health Education Network Statewide
- Deliverable #5: Expand Statewide Community Health Assessments
- Deliverable #6: Lead two major public health intervention initiatives

Req20644- Open Rank Population Health has been posted. Here is the link to the UNM Jobs website:
https://unm.csod.com/ux/ats/careersite/18/home/requisition/20644?c=unm
Initially posted in June 2022

Staff Recruitment

Staff New Hires

- Nikki Guerrero – Administrative Coordinator
- Sheri Lesansee, MPH – Sr. Program Manager
- Alex Sanchez – IT Support Tech III
- Melody Wells – Development Director
- Amber Dukes, PhD, MPH – Sr. Program Manager

Other – Academic Health Department

- Ben Vickers, PhD – Biostatistician

Edgar Corona Castañeda

Academic Advisor

Katerina Evans

Academic Coordinator

Amanda Ortiz, MA

Academic Operations Officer

Cindi Meche

Marketing Manager

Michael Miranda

Program Coordinator, Online and PhD Programs

Garrett Vigil

Student Recruitment Specialist

Griffin Wollery

Administrative Coordinator, Education

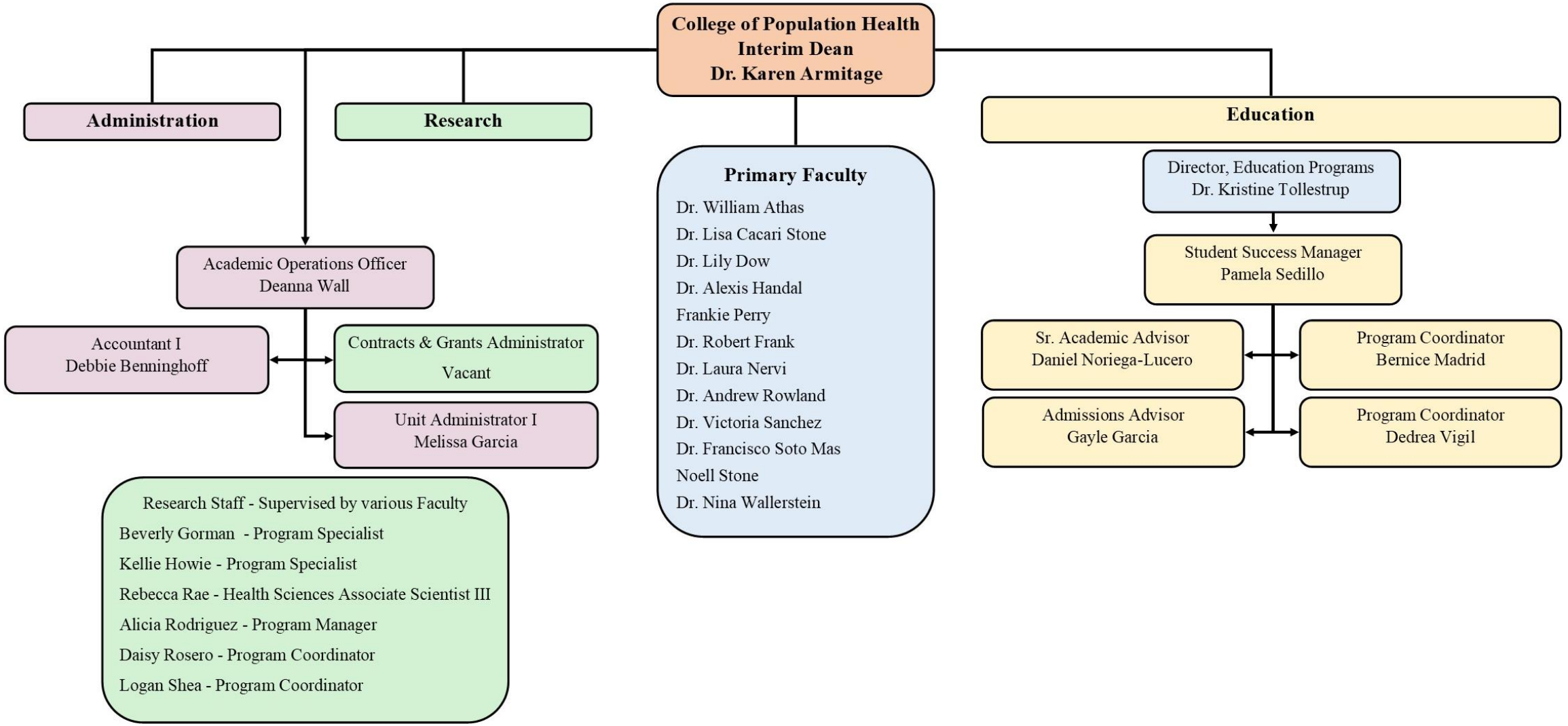
Kimberly Wu

Sr. Training and Development Consultant

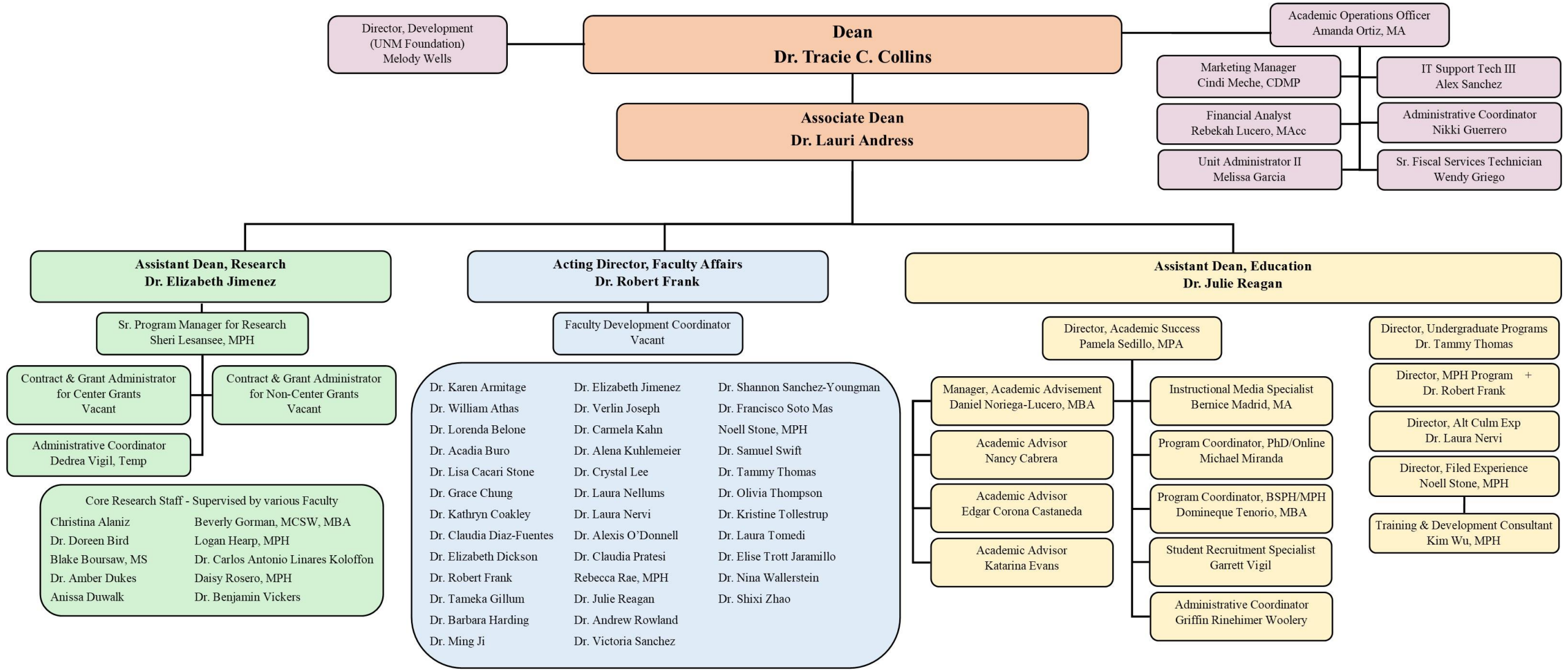
New Development Officer

Melody Wells
Development Officer

COPH Organizational Chart Prior to July 2019



COPH Organizational Chart Today



A Few Pics

Lorenda Belone, PhD, MPH

Professor

Verlin Joseph, PhD, MPH

Assistant Professor

Lexi O'Donnell, PhD

Assistant Professor

Carmella Kahn, PhD
Assistant Professor

Alena Kuhlemeier, PhD
Assistant Professor

Six Deliverables to Impact Public Health in NM in Two Years

- Deliverable #1: Increase the number of students
- Deliverable #2: Increase the number of faculty
- **Deliverable #3: Increase non-state research dollars**
- Deliverable #4: Create a Public Health Education Network Statewide
- Deliverable #5: Expand Statewide Community Health Assessments
- Deliverable #6: Lead two major public health intervention initiatives

Non-State Research Funding

An increase in non-state research dollars will follow as we recruit more faculty, including faculty with strong research interests.

Pilot funding for early career faculty – team science is encouraged

Six Deliverables to Impact Public Health in NM in Two Years

- Deliverable #1: Increase the number of students
- Deliverable #2: Increase the number of faculty
- Deliverable #3: Increase non-state research dollars
- **Deliverable #4: Create a Public Health Education Network Statewide**
- Deliverable #5: Expand Statewide Community Health Assessments
- Deliverable #6: Lead two major public health intervention initiatives

Public Health Education Network

- Created a database of public health programs throughout the state and contacts (four-year, two-year, and Tribal colleges). Setting up calls with these programs to assess opportunities for networking)
- Collaborating with **Health Sciences Interprofessional Education (IPE) Program** to broaden the IPE Honors program to expand across the state.
- Planning a **Public Health Certificate** that is available to individuals statewide.
- Collaborating with 2-year institutions to create degree/career pathways for students from their local institution to UNM and then to their desired careers.

Six Deliverables to Impact Public Health in NM in Two Years

- Deliverable #1: Increase the number of students
- Deliverable #2: Increase the number of faculty
- Deliverable #3: Increase non-state research dollars
- Deliverable #4: Create a Public Health Education Network Statewide
- **Deliverable #5: Expand Statewide Community Health Assessments**
- Deliverable #6: Lead two major public health intervention initiatives

Community Health Assessments

Working with DOH to align efforts statewide
(NM Alliance of Health Councils, hospitals, FQHCs)

- Understanding timelines for each entity
- Determining gaps in CHAs
- Improving the quality of CHAs
- Aligning outcomes
- Creating a statewide health improvement plan

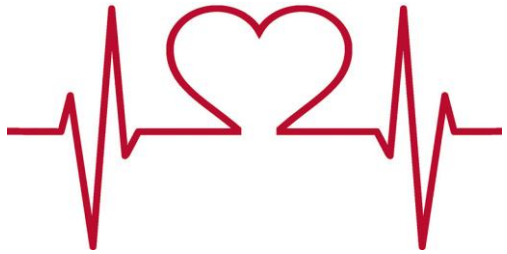
Six Deliverables to Impact Public Health in NM in Two Years

- Deliverable #1: Increase the number of students
- Deliverable #2: Increase the number of faculty
- Deliverable #3: Increase non-state research dollars
- Deliverable #4: Create a Public Health Education Network Statewide
- Deliverable #5: Expand Statewide Community Health Assessments
- **Deliverable #6: Lead two major public health intervention initiatives**

Public Health Interventions

Lead two major public health intervention initiatives:

- Substance Use Prevention
- Diabetes Prevention Program



Becoming an Accredited School

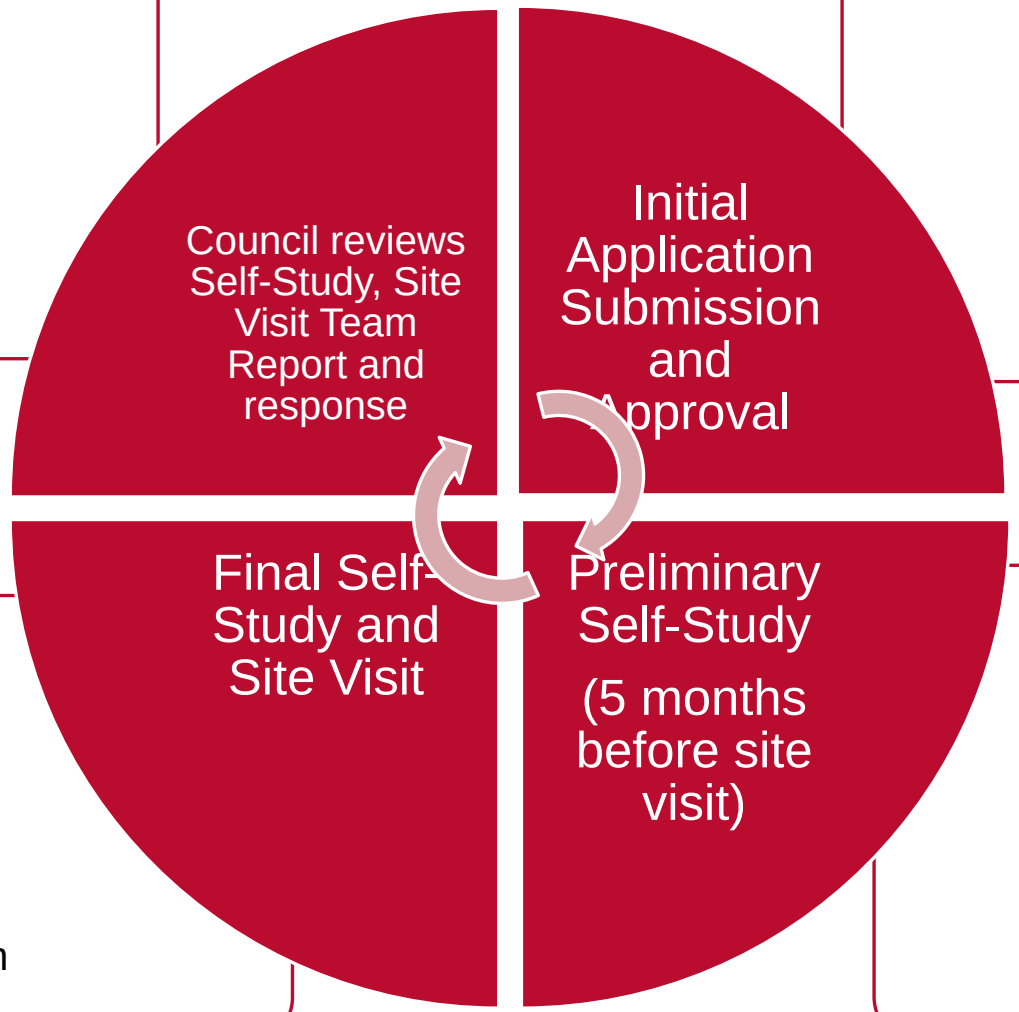
Council on Education for Public Health (CEPH)

- Accredits bachelor's, master's and doctoral programs
- Recognized by the US Department of Education to accredit **schools** and **programs** of public health
- Student benefits:
  - Access to internships and fellowships and other resources only available to accredited schools/programs
  - Quality educational experience

What Do We Need to Do?

- Council makes decision on accreditation

- Must have **21** primary faculty in college
- **Strong** evidence that 1 PhD student will have graduated by the time preliminary self-study is submitted
- Takes about 1 year for approval



- Final Self-Study is due 1 month before site visit
- Site visit team sends a report to the school or program 8 weeks after site visit.
- School or program responds to Site Visit Team Report within 30 days.

- Takes 18 – 24 months and due no more than 2 years after approval of IAS
- Demonstrates that the SPH meets **all** CEPH accreditation criteria
- CEPH provides comments for final self-study

Possibilities for UNM School of Public Health

Pillars

Concentrations

- Community Health
- Epidemiology
- Health System, Services and Policy
- Biostatistics
- Climate Change/Environmental Health
- Mental Health and Addictions
- Women and Children's Health
- Public Health Law
- Public Health Engineering
- Public Health in Business

THANK
YOU!

QUESTIONS?