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VENTURES

Bernalillo County Case Study

About This Case Study

These case studies were authored as a part of the evaluation of ReThink Health Ventures, a three-year project of The Rippel Foundation, conducted with support from the Robert Wood Johnson Foundation, to explore what could accelerate the progress of ambitious multisector partnerships working to transform health in their regions, and what often stands in the way of that progress. Through the project, Rippel's ReThink Health initiative supported multisector partnerships in six regions across the country as they worked to build practices that are essential for transforming a regional health ecosystem, including broad stewardship, sound strategy, sustainable financing, and a shared vision. Each participating partnership selected a handful of members to participate on the Ventures Team for their region. Those teams collaborated with ReThink Health and their broader partnerships throughout the project. Mount Auburn Associates served as the project's learning and evaluation partners.

We have authored case studies about each of the six partnerships to highlight their unique journeys toward health transformation, with a particular focus on their work in Ventures, as well as insights that can be applicable to a wide range of stewards working to transform regional health ecosystems across the United States. You can find the other case studies, along with a detailed evaluation report about ReThink Health Ventures, at www.rethinkhealth.org/ventures.

We are grateful for the time and energy that so many people contributed to support the development of these case studies. Most importantly, the authors would like to thank the leaders who participated in Ventures for their tireless dedication to transforming health and well-being in their communities.

Bernalillo County Case Study

New Mexico

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Overview

One of the six Ventures sites was Bernalillo County, New Mexico (which encompasses Albuquerque and some of its surrounding area). Leaders there face many of the same challenges confronting other health transformation efforts in regions across the country. To help address their challenges and advance their efforts, Bernalillo's leaders participated in the ReThink Health Ventures project, viewing it as an opportunity to think comprehensively about investing regional resources to maximize resident health and well-being, and about aligning initiatives and programs across many institutions through a common, long-term vision and a clearly defined value proposition. While the Bernalillo Ventures team did not achieve everything it had hoped for through their efforts in Ventures, its work did lead to many positive outcomes that may advance regional health transformation in the long term.

As is the case in many regions across the country, Bernalillo County is home to many notable initiatives and organizations that support and advance the health and well-being of residents in the region. Many of these initiatives have overlapping goals and programming, creating a complex organizational landscape. In Bernalillo, trying to make sense of that organizational landscape required a "next level" of collaboration across organizations and multisector initiatives (for example, convening a broad range of leaders to ensure programming was strategically aligned across the region, and building authority for those collaborative efforts to endure and successfully progress). Additionally, at the time of Ventures, several leaders of well-established initiatives were nearing retirement and making plans to ramp down or transition out of their long-held roles. Leaders in Bernalillo County also contend with a state and county policy environment that historically has not been particularly supportive of collaboration for health transformation. These are thorny issues that many similar efforts face, and they put some hurdles between the Bernalillo team and their initial Ventures goals. Still, by the end of Ventures—and through their work in the project—leaders in Bernalillo made progress identifying a gap in their system—the need for a regional "hub" to serve as a focal point for sustaining, aligning and holding accountable regional health and well-being activities. The hub model could provide a venue for surfacing solutions to these hurdles.

While there are not quick fixes to the challenges mentioned above, they can often be helped with the

VENTURES TEAM, GEOGRAPHIC SCOPE

- **Ventures Team:** Leaders representing Bernalillo County Community Health Council, regional behavioral health and opioid accountability initiatives, Community Health Sciences at the University of New Mexico Health Sciences Center, the Center for Community Health at Presbyterian Healthcare Services, the City of Albuquerque Department of Family and Community Services, and the New Mexico Department of Health
- **Geographic Scope:** Bernalillo County, New Mexico

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right match of capacity-building support from outside organizations (like Ventures). In this case, the Bernalillo team's needs may not have been fully met by the Ventures' offerings—in particular, there may be lessons here for how to best match coaching efforts and customize capacity-building support to align with team dynamics and developmental progress. Notwithstanding, the Bernalillo Ventures team's work demonstrated the value of an informal forum and learning environment that nurtured and deepened relationships—creating new connections that could advance their efforts in the future by expanding their approaches and integrating new players into their work.

Context

Bernalillo County is the population center of New Mexico and home to a diverse population. Many residents face serious economic and health disparities. The largest city in the county, Albuquerque, is sometimes described as having the social network of a "big, small town." The county's multiple initiatives and collaboratives, with their overlapping boards, may be one reason local leaders have had success attracting federal and philanthropic support, including funding from the Centers for Medicare & Medicaid Services (CMS), to participate in the Accountable Health Communities (AHC) initiative. The region has also been successful in garnering residents' support for two countywide tax levies to address health disparities. While there are many ongoing efforts focusing on health and well-being, these are taking place in a state that has tended to provide less governmental support for health transformation and in a county that does not have a formalized local public health delivery system.

Political and institutional context

New Mexico's public health system is centralized at the state level, with no local health departments in operation. This leaves many public health functions spread across various public and private nonprofit entities at the local level. The state does, however, have a history of supporting community health councils—a result of the state's 1991 County Maternal and Child Health Plan Act. The state legislature established health councils in counties across the state to help coordinate and deliver some public health services within the state's decentralized structure.

The Bernalillo County Community Health Council (BCCHC), which played a lead role in guiding the work of the Ventures project in Bernalillo, was created through the 1991 legislation and was supported for many years with state funding. In 2010, the state suspended funding to the councils, requiring them to seek alternative sources of funding, either through county governments or elsewhere. In the case of BCCHC, the county began providing both physical space and funding for the effort; however, in 2014, this funding ended and the BCCHC decided to separate from the county. In 2015, BCCHC became an independent 501(c)3 organization. Now the BCCHC acts as a facilitator, connecting and supporting organizations and individuals working on health issues, and coordinating countywide assessment and planning efforts, as do many of the still existing county-based health councils.

Local tax funding for health

Voters in Bernalillo County have approved two tax measures whose revenues support regional health transformation efforts. In February 2015, Bernalillo County passed a gross receipts tax increase and two-thirds of its revenue—about \$17 million annually—is used to fund mental and behavioral health services. In November 2016, Bernalillo County voters also reapproved the University of New Mexico Hospital (UNMH) mill levy for another eight years. This local property tax, which generates about \$90 million in revenue annually, is designated for hospital operations and maintenance. While UNMH has relative freedom regarding use of the funds, there has been an increased effort to hold the system accountable, including a requirement to use part of the funds to address health inequities in the community. In 2018, UNMH designated funding for a community health workers initiative and, through the active advocacy efforts of community stakeholders, including members of the Ventures team, a more recent memorandum of understanding between UNMH and Bernalillo County provides additional support for this initiative as well as some increased accountability.

Advancing Health Transformation with ReThink Health Ventures

Bernalillo County's Ventures team involved a cluster of individuals, many of whom had worked together previously on overlapping partnerships and initiatives. Their intention, initially, was to create a broader, more formal, and cohesive group than had existed, with some level of authority to better align existing health transformation efforts across the county. Through their work with Ventures, the team recognized that the county lacked a strong regional hub that worked with and beyond public health service delivery, where stewards with some recognized authority could build out a more comprehensive portfolio for health transformation.

While the Ventures team didn't reach consensus on its own role or on how to fill an identified stewardship gap in the county, the engagement of local leaders in a range of health transformation initiatives in Bernalillo County contributed to multiple outcomes. As one team member reported, "There was a fair amount of benefit that we derived from being able to see the work of others, learn ideas from others, benefit from the various exercises that we would experience, and learn some tools and communication skills." Examples of these outcomes included:

- **Contributing to the establishment of the Bernalillo County Resource Re-Entry Center:** Previously, upon release from Albuquerque's Metropolitan Detention Center, inmates were dropped off at on a downtown street corner, sometimes in the middle of the night. Multiple groups saw this as not only dangerous for those being released, but also as counterproductive to efforts to help them adjust once they were released. Leaders working on the issue of substance abuse, including Ventures team members, had the idea of developing some type of release center. Conversations among those on the Ventures team moved the establishment of the center from just an idea to a high priority. With funding from the Behavioral Health Gross Receipt Tax, the county was able to open a re-entry center in May 2018.
- **Influencing the Behavioral Health Initiative (BHI):** As a result of the relationships built through Ventures and the exposure to the essential practices through the Ventures work, leadership of the BHI developed a deeper emphasis on the relationship between behavioral health and the criminal justice and education systems, and a greater appreciation of the full range of vital conditions related to behavioral health that help residents of a community to be healthy and well (such as education). According to the director

of the BHI, as a result of her participation in the project, she changed the BHI request for proposals that are connected to \$17 million in revenue annually from the gross receipts tax, pushing health care providers to incorporate social determinants of health in their funding requests. She noted, “[Understanding the dynamics of well-being] really opened my eyes that behavioral health is small, a piece of the pie, but it’s not the entire pie. And if we’re going to limit ourselves just to behavioral health and not include how we improve the overall quality of health within the family, within the individual, within our community, we have missed the boat.” Through this work, BHI is now better leveraging the annual \$17 million behavioral health allocation in Bernalillo County, and BHI’s leaders have developed a more comprehensive investment strategy for the annual tax revenues the organization receives.

- **Broadening use of community health workers in clinical settings:** The University of New Mexico (UNM) has a very successful community health worker program that places “navigators” in key sites to provide more seamless connections between health and social services providers, work that has been bolstered at UNMH and other institutions in Bernalillo by the AHC. The funds that UNMH receives through the mill tax provide partial support for this effort. According a Ventures team member and leader at UNM, the relationships built through their involvement in Ventures have helped to expand the placement of these “navigators.” For example, community health workers affiliated with UNM are working in the new re-entry center. Through relationships built with the mayor and his staff, there is a new contract in place between UNMH and the city of Albuquerque to provide some basic training to city workers on how to address and assess social service needs.

How leaders are working differently

The work with Ventures has led to some new ways of working among certain leaders in Bernalillo County, primarily through the deepening and broadening of relationships across the multiple partnerships working on regional health transformation. Examples include:

1. **Bridging traditional silos:** The work done and relationships built through Ventures have increased local understanding of the interconnections among multiple systems, including criminal justice, education, social services, health care, and mental health services. There is now a stronger recognition among certain leaders that innovative efforts are needed to better integrate and connect these

systems. The new partnerships and relationships could have an ongoing effect on health transformation practices in the region.

2. **Influencing resource allocation for health transformation efforts:** The engagement of key stakeholders in the Ventures project appears to have influenced both the new memorandum of understanding between Bernalillo County and UNMH governing the allocation of its annual \$90 million in revenue and how the \$17 million in revenues for behavioral health is allocated by the BHI. The memorandum supports enhanced accountability measures for health-related spending as well as increased support for community health workers. The behavioral health resources support increased access to healthy foods, a needle exchange, re-entry support for previously incarcerated individuals, and funding to address adverse childhood experiences.

“There was a fair amount of benefit that we derived from being able to see the work of others, learn ideas from others, benefit from the various exercises that we would experience, and learn some tools and communication skills.”

Learning from Bernalillo County

Ways to advance progress

Sustainable revenue sources: The county’s two special taxes, which help address health equity within the community, provide an opportunity to turn innovative ideas into practice. While more can be done to maximize the impact of how the tax revenues are invested, the presence of the resources has helped to move important work forward in the county.

Building on AHC work: CMS selected Bernalillo County to be part of the Accountable Health Communities initiative around the same time that the Ventures project was launched. The process of coming together for the AHC application, a significant undertaking that preceded the Ventures effort, provided a greater foundation for collaboration among many of the players involved in the Ventures team. The application process encouraged key institutions, including the

two major health care systems in the region, to think about the value of collaborating together and to articulate concrete ideas about how that collaboration could happen. This work supported many of the relational synergies that emerged through Ventures, and will continue to provide a venue to advance the work of health transformation in the county.

Recalibrating existing infrastructure: The Bernalillo team identified the need for a regional health hub to support ongoing transformation efforts in the region. Rather than creating new capacity or building a new institution, it might make sense to first rebuild and strengthen existing institutions to fill gaps in the region's integrative capacity. Strengthening and recalibrating existing partnerships is part of any transformation process. However, to advance beyond this phase, leaders must make hard decisions and capitalize on lessons learned.

Ways that progress can be derailed

Lack of role clarity: From the beginning of the work with Ventures, the Bernalillo team worked to define who they are as a group, what the group's mission is, and what authority it has to take on the work. Without clear and aligned decisions in all of these areas, it has been challenging to move an agenda forward.

Leadership stretched thin by engagement in multiple cross-sector initiatives: Many of those involved with the Ventures project had day jobs and were also engaged in other national efforts intended to support health transformation across the county. Rather than creating greater alignment, the overlapping leadership and goals of these multiple initiatives has, in many ways, stretched the interest and energy of those engaged in the Ventures project.

Weak state policy environment: Although New Mexico is a Medicaid expansion state, in many respects, it lacks robust programming and policies that could support effective collaboration for health transformation at the state and county levels.

Absence of a team succession plan. A number of the leaders who participated in the Ventures project had already retired (with plans to limit future volunteer work) or were close to retirement. If no plan is developed to manage anticipated leadership transitions, the forward momentum gained during Ventures will likely dissipate.

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