

ORGANIZATIONAL OVERVIEW

The New Mexico Department of Health (DOH) is one of the executive branch agencies of the State of New Mexico. The DOH supports, promotes, provides, or funds a wide variety of initiatives and services designed to improve the health status of all New Mexicans. The Department is organized to reflect its functions, with specific offices and divisions reporting to the Office of the Secretary. The senior leadership consists of the Secretary of Health, Deputy Secretaries, Chief Medical Officer, Communications Director, Community Relations Director, Division Directors, General Counsel and other key departmental staff.

The Department's primary responsibility is to assess, monitor and improve the health of New Mexicans. The Department provides a statewide system of health promotion, disease and injury prevention, community health improvement and other public health services. Improving the health of individuals, communities and the health care system have long been goals of the Department. Prevention and early intervention strategies are implemented through the Department's local health offices and contracts with community providers. The health care system is strengthened through Department activities including contracted rural primary care services, school-based health centers, emergency medical services, scientific laboratory services, vital records and health statistics. The Department provides safety net services to eligible individuals with special needs. These services include both community-based and facility-based behavioral health treatment and long-term care, provided directly by the Department or through its contract providers. The Department operates six behavioral health treatment and long-term care facilities and one community-based program.

The Department also plays a key regulatory role in the healthcare system. It promulgates regulations pursuant to its statutory authority and is an enforcement entity for health care providers statewide for compliance with state and federal health regulations, standards and law. Over 900 public and private sector inpatient and outpatient providers are licensed annually by the Department and those providers who participate in Medicare or Medicaid are certified, inspected and monitored by the Department.

PROGRAM AREA STRUCTURE

PROGRAM AREA 1: ADMINISTRATION

The Administration Program fulfills its mission by providing leadership, policy development, information technology and administrative and legal support to the Department of Health so that the Department achieves a high level of accountability and excellence in services provided to the people of New Mexico.

It is responsible for all financial functions of the Department and its \$570 million annual budget and 4,200 employees, including appropriation requests, operating budgets, the annual financial audit, accounts payable, revenue and accounts receivable, federal grants management, and financial accounting. It also provides human resources support services and assures compliance with the Personnel Act and State Personnel Board rules; training; conducts key internal audits; develops and

manages information systems for the Department; and provides legal advice and representation to assure compliance with state and federal laws.

Programs and activities:

Information Technology Support Division

Applications Support Bureau is responsible for the planning, design, development, testing, deployment and support of information system applications that sustain the program and administrative functions and processes of the Department of Health. The Bureau is responsible for the support and management of existing applications and development or acquisition of new applications in order to meet the department's needs in alignment with the department's strategic plan, goals and objectives. The Bureau supports approximately 160 applications used within the Department.

Implementation Services Bureau is responsible for the monitoring and oversight of information technology projects within the Department of Health. The Bureau consists of project managers who are assigned to information technology projects within the Department. The Bureau typically manages between 15 and 20 projects at any one time.

Outreach and Customer Service Bureau is responsible for desktop, server and local area network support at all Department sites, providing 24/7 helpdesk support to all DOH staff, and engaging each division and facility's management team regarding information technology use and planning. The Bureau supports approximately 3,100 workstations and laptops as well as 200 servers spread across 97 sites within the Department.

Production Services Bureau is responsible for the design, implementation, maintenance and support of the Department's wide area network and data centers. The Bureau supports 160 servers located in two data centers in Santa Fe. The Bureau supports a distributed network consisting of 97 sites. PSB is also responsible for monitoring users' Internet usage and reporting any policy violations to the Chief Information Officer. The Bureau actively monitors the Department's network for possible misuse, abuse, or vulnerabilities.

Office of the Chief Security Officer is responsible for managing the Department of Health's information security policies and procedures, developing, implementing and monitoring long-term information security strategy, ensuring that the Department meets all mandated information security standards, and ensuring that information systems have appropriate disaster recovery and business continuity plans.

Critical IT Systems: ITSD is responsible for providing support to information systems within the Department. The following information systems are mission-critical and essential to DOH:

1. ASPEN system and Incident Management Bureau intake and closure system is used to document and track surveys of licensed and certified healthcare facilities, track allegations against providers and make a survey instrument used in these activities available to surveyors in the field.
2. Billing & Electronic Health Record (BEHR) is a hosted, electronic medical record and practice management system used by the Public Health Division to monitor patients and

track procedures at statewide public health offices. It allows online access to all Public Health clients, and handles all scheduling and billing for the Division.

3. Caregivers Criminal History Screening Program (CCHSP) is used to track applications for background checks of direct care staff in healthcare facilities. The system transmits fingerprint card data to the Department of Public Safety to screen applicants for caregiver positions at health care facilities.
4. CertScan EMT Licensure Database is an administrative management software system designed to facilitate testing, licensure and continuing education processes for both pre-hospital and hospital environments.
5. ChallengerSoft Newborn Screening System is used by the Public Health Division to test and track all cell samples used to identify birth defects in all New Mexico newborns.
6. Commodity Supplemental Food Program distribution system (CSFP) tracks inventory and participants' certification status for the Commodities Supplemental Food Program.
7. Electronic HIV AIDS Reporting System (eHARS) is a secure application acquired from the CDC to track and report HIV/AIDS data.
8. Facilities Electronic Medical Record system (Avatar) and Pharmacy systems (WORx, QS-1, and Schuylab) support patient management and clinical practices at DOH facilities. The systems include medical records and billing software.
9. New Mexico Electronic Disease Surveillance System (NM-EDSS) is used by the Epidemiology and Response Division for disease surveillance and to manage data received about notifiable conditions.
10. Public Health Division Pharmacy System (QS-1) is used for managing drugs dispensed at Public Health offices statewide under a variety of programs, including Immunizations and Family Planning.
11. Sexually Transmitted Disease Management Information System (STD MIS) manages data in support of the Public Health Division's effort to control sexually transmitted diseases.
12. Tuberculosis Information Management System (TIMS) was acquired from the CDC for surveillance and incident management of tuberculosis cases.
13. Vital Records Systems (eVitals) is a Web-based birth and death system. It is accessible statewide via the Internet for the registration and issuance of birth and death certificates. It is replacing the Lifespan system, which is still being used for historical birth records until they can be converted to eVitals.
14. Electronic Benefits Transfer (EBT) is used by the Women, Infants and Children (WIC) program to allow clients to receive their monthly benefits using a specialized debit card.

Division of Policy and Performance

Director's Office oversees and directs the activities of the three offices and serves as the lead for departmental policy and legislation.

Office of American Indian Health provides a central focus within the Department to address American Indian health. The OAIH works to partner with Tribes and off-reservation groups to promote sound health policy, to improve health services systems and to assure that essential public health functions and safety net services are available to American Indians in New Mexico.

Office of Health Equity works to reduce health disparities by raising awareness, mobilizing communities, increasing capacity, promoting health, focusing resources on targeted populations and helping programs deliver culturally and linguistically appropriate health care by implementing the federal Culturally and Linguistically Appropriate Health Care Services Standards (CLAS). The Office coordinates medical interpreter training in Spanish and Navajo and offers mini-grants to community-based organizations for specific projects addressing health disparities. The Office also provides English-Spanish translation services for DOH. It is funded by a five-year through grant from the US Department of Health and Human Services' Office of Minority Health.

Office of Performance ensures the Department meets the requirements of the Accountability in Government Act by producing the Department's strategic plan, monitoring plan, performance measures and the quarterly performance reports. In addition, the Office assists with the production of many reports and documents for the Office of Health Equity and American Indian Health, including the Racial and Ethnic Health Disparities Report Card. Internally, the Office works with individual programs and divisions to improve the collection and reporting of data for performance measures and program services. The Office also assists the Deputy Director and Director with the coordination of legislative activities.

Office of General Counsel

The attorneys in the Office of General Counsel provide legal representation, advice, and limited training to the Department in all legal matters except tort actions, which are handled by the Risk Management Division of the General Services Department. All positions within OGC are essential to provide timely and effective legal advice to a department the size of the DOH. The Office of General Counsel's (OGC) essential functions are as follows:

- Initiation of civil mental health, developmental disabilities and TB commitments;
- Coordination of forensic commitments;
- Initiation of treatment guardianships;
- Tracking and coordination of requests for public and protected health information via subpoenas or IPRA requests;
- Contract advice and review;
- Initiation of receiverships of health care facilities in order to protect the public health and safety; and
- Representation of the Department management in personnel actions and response to emergent issues.

PROGRAM AREA 2: PUBLIC HEALTH

Public Health fulfills its mission by providing a coordinated system of community-based public health services focusing on disease prevention and health promotion in order to improve health status, reduce disparities and ensure timely access to quality, culturally competent health care.

Programs and activities:

Director's Office: Together with its partners, the Public Health Division is the official steward of the public's health. The Public Health Division has 1,024 employees, 55 local public health offices, 68 school-based health centers, 37 county and Native American community-based health councils, 82 primary care centers and 89 Women Infant and Children Supplemental Food Program sites. The Division provides the essential public health services that include prevention of disability, disease, and premature death and the promotion and protection of health. The Division provides these services through a myriad of direct services, programs, contracts and partnerships focusing on the health of whole communities rather than on the treatment of individuals once they have become sick.

Effective public health services are provided to the 1.8 million people in New Mexico at an approximate cost of \$46 a person annually from the general fund. Every dollar spent on childhood immunization saves the state approximately \$14 in disease prevention and lost productivity. Teen childbearing costs New Mexico roughly \$300 million annually, while we spend about \$2.8 million of combined general fund, federal funds and grants preventing adolescent pregnancies. Each dollar spent on family planning services results in a cost savings to the state of around \$25.

Office of Border Health has as its mission to improve health status and health services in the New Mexico border region and other border-impact areas of the state. The role of the office works to ensure that public health objectives are met in the border region and among immigrant populations throughout the state. To this end, the medium- to long-term strategy is to establish a binational network of health care, coordinated with public and private partners, with emphasis on binational collaborations with federal, state and local Mexican authorities and especially Chihuahua State Health Services.

Public Health Division Pharmacy supports public health programs by ordering, warehousing and distributing drugs and medical supplies to the 55 local public health offices and approximately 60 private medical providers who have formal agreements in place through various PHD programs. In addition, the pharmacy dispenses medications to HIV clients enrolled in the Insurance Assistance Program.

Family Health Bureau provides direct, enabling, capacity building and population-based services to reproductive-age women, mothers, infants, children, adolescents/youth, including children and youth with special health care needs and their families.

- Every month, **Women Infants and Children (WIC)** offers food assistance services to 69,000 pregnant, breastfeeding, or post-partum women, infants and children younger than 5 years of age. The Program additionally offers nutrition assessment, counseling and education and referrals to health and human service organizations.

- **Commodity Supplemental Food Program** provides nutritious commodity foods to 22,632 financially eligible pregnant, breastfeeding and postpartum women, infants and children up to age 6, and seniors 60 years and older.
- **Farmers Market Nutrition** serves 20,257 financially eligible pregnant, breastfeeding and postpartum women and children each month through 687 farmers collaborating within 29 farmers markets. Recipients receive fresh, nutritious New Mexico grown fruits and vegetables. The farmers receive dollars through redemption market checks at the 29 markets throughout New Mexico.
- **Family Planning Program (FPP)** provides comprehensive family planning services, including clinic-based services and community education and outreach, to promote health and reproductive responsibility. The five strategies to reduce teen pregnancy are family planning clinical services, comprehensive sex education, male involvement, adult-teen communication and service learning programs. The FPP also supports youth development activities with funding and training for the Teen Outreach Program, designed to prevent teen pregnancy and academic failure, in 17 sites in 10 counties (Bernalillo - 4 sites; Doña Ana - 3 sites each; Chaves, Cibola - 2 sites each; Luna, Rio Arriba, San Miguel, Sierra, Torrance and Valencia - 1 site each).
- **Children's Medical Services** combines direct service, surveillance and prevention programs. The Children and Youth with Special Health Care Needs Program provides services for the prevention, diagnosis, treatment and surveillance of chronic medical conditions in children under the age of 21. This program oversees and coordinates screening of all newborns born in the state for genetic conditions and hearing loss, including assuring appropriate follow-up and care for infants with conditions identified through these screenings.
- **Child Health Program** works to promote the health and well-being of all children up to age 10 and their families. Program efforts focus on the importance of early childhood and resiliency and provide training and technical assistance for programs serving children, youth and families.
- **Families FIRST Perinatal Case Management Program** assists Medicaid-eligible women and children gain access to needed medical, social, educational and other services. Care coordination services may include coordination with providers of non-medical services such as nutritional or educational programs when these services have been identified as necessary to foster positive pregnancy outcomes and promote healthier infants and children.
- **Sickle Cell Education** provides education on sickle cell anemia to a target population.
- **Maternal Health Program** assures that pregnant women have access to health care and promotes optimal birth outcomes and perinatal care. This program administers the prenatal care program for uninsured women and safety net cases. It also provides technical assistance and funds to Public Health offices that give prenatal care when it is not available in the area. It licenses Certified Nurse Midwives and Licensed Midwives, develops regulations for practice and assures compliance with those standards. It also promotes best practices and corrects deficiencies, solving pregnancy care problems.

- **Maternal Child Health (MCH) Epidemiology** supports the Pregnancy Risk Assessment Monitoring System (PRAMS), collects, analyzes, and disseminates public health data and information to support well informed health policy and programs with a focus on the MCH population. The team is responsible for maintaining and strengthening the informed use of data and information in strategic health planning among state, regional, local community and Tribal groups through training and effective methods of data dissemination.

Infectious Disease Bureau gives direction and leadership to infectious disease programs that provide health, prevention and education services to children and adults, and supports recruitment and retention activities for health care professionals.

- **Immunization Program** is focused on appropriately immunizing 90% of all children and at-risk adults. Services include vaccines for all New Mexican children, hepatitis and tetanus/diphtheria vaccine for high-risk adults age 19 and older, and influenza and pneumococcal vaccine for eligible seniors over age 65. It also provides information resources and training on vaccine safety, vaccine administration and practices, improving immunization rates in provider offices and where to obtain vaccinations.
- **Adult Influenza Vaccination Program** provides annual influenza vaccination for adults identified as high-risk for complications from influenza. Influenza vaccine provided by PHD is targeted to those who are uninsured or face other barriers in getting this important protection.
- **Tuberculosis and Refugee Health Program** works to prevent exposure and transmission of tuberculosis (TB), and to successfully treat those with TB disease. The Program ensures that suspected and confirmed cases of tuberculosis are identified and treated promptly and appropriately. People infected with tuberculosis who are at risk for TB disease receive preventive therapy and medication. Patients with active TB are monitored to confirm medication use and to document their treatment status. Extensive contact investigations are done to identify people who have come in contact with an infected person. The Refugee Health Program works to improve health screening, orientation and follow-up services for refugees new to New Mexico.
- **HIV/AIDS Prevention Program** provides HIV prevention interventions to assist individuals at risk of contracting HIV to practice safe sexual behavior. It works with a Community Planning Group, composed of individuals affected by the HIV virus, to prioritize the populations most at risk for HIV and determine which interventions will be most effective in preventing HIV.
- **HIV/AIDS Services Program** provides a continuum of care to persons living with HIV/AIDS to slow or stop the progression of disease and to prevent the further spread of the virus. This program assures that all HIV positive individuals statewide have equal access to needed care, regardless of ethnicity or geographic location.
- **Sexually Transmitted Diseases (STD) Intervention and Treatment** works to intervene in the spread of and reduce the complications of STDs. The main objective of STD intervention activities is to prevent disease transmission by ensuring that all people who have or have been exposed to a treatable STD are promptly examined and adequately

treated. Services include surveillance of syphilis, gonorrhea and chlamydia, case detection through screening, treatment of diseases through local Public Health offices, case follow-up to assure adequate treatment, and education to prevent disease infection.

- **Harm Reduction Program** works to provide effective HIV, hepatitis and STD prevention interventions and harm reduction education through syringe exchange to the state's adult injection drug user population. Syringe exchange has been shown to effectively reduce the transmission of infectious diseases by facilitating a reduction in the high-risk behaviors associated with injection drug use, thereby decreasing the potential damage to the individual and the resulting burden of that damage on the community.
- **Medical Cannabis Program** works to allow the use of medical cannabis in a regulated system to alleviate symptoms caused by debilitating medical conditions and their treatments, while ensuring proper enforcement of any criminal laws for behavior that has been deemed illicit by the state.
- **Hepatitis Intervention Program** works to control the spread and severity of viral hepatitis. The program provides hepatitis education, training and information to the public and to health care providers. The program provides adult hepatitis A and B vaccine and hepatitis B and C testing to high-risk individuals through syringe exchange sites, public health clinics, some community organizations, HIV counseling and testing sites, and mobile units.

Chronic Disease Bureau works to reduce the impact of chronic diseases on New Mexicans by promoting healthy lifestyles, including physical activity, good nutrition and avoiding tobacco use. The Bureau also promotes the early detection of chronic diseases through screenings such as pap smears and mammograms. The Bureau offers education and support to health care providers so they can effectively manage patients with chronic diseases.

- **Comprehensive Cancer Program** works to promote the health of New Mexicans through skin cancer prevention education, prostate cancer early detection information and support, cancer survivor support and education, cancer patient housing and colorectal cancer prevention and early detection education.
- **Breast and Cervical Cancer Prevention and Screening Program** provides comprehensive breast and cervical cancer screening and diagnostic services to eligible low-income women statewide. The Program was founded on the rationale that breast and cervical cancer are most amenable to treatment when detected at an early stage.
- **Diabetes Prevention and Control Program (DPCP)** works to reduce the impact of diabetes and improve the quality of life for all New Mexicans with diabetes. The DPCP conducts diabetes surveillance and program planning focused on statewide prevention and management activities. Diabetes management services include support to rural clinics to provide diabetes care, medications, and meters/test strips for uninsured and underinsured people with diabetes, professional development and training for health care providers to improve diabetes practice, and technical assistance, educational materials, and other resources for clinics and health care providers.

- **Tobacco Use Prevention and Control Program (TUPAC)** is a comprehensive, evidence-based tobacco use prevention and cessation program that is responsible for leading and coordinating strategic efforts aimed at preventing tobacco use among youth, promoting smoking cessation among youth and adults, protecting nonsmokers from environmental tobacco smoke and eliminating tobacco-related health disparities. The program achieves these goals through media campaigns, surveillance and evaluation, comprehensive community programs, cessation programs, school programs and programs that focus on disparities.
- **Arthritis and Osteoporosis Program** works to increase awareness of and reduce the impact of musculoskeletal diseases on individuals and health systems. Program components are based on the National Arthritis Action Plan and address surveillance, communication and education and policy programs and systems. This is accomplished through collaboration with partners to implement the objectives of the New Mexico Strategic Arthritis Plan.

Health Systems Bureau provides direction and leadership to programs that provide health, prevention and education services to children and adults, and support and research for recruitment and retention activities for health care professionals.

- **Office of Substance Abuse Prevention (OSAP)** promotes sound policy, effective practice and cooperative partnerships to ensure the availability of a system of quality substance abuse prevention services. It provides evidence-based prevention programs and infrastructure development activities to local stakeholders to build their capacity to deliver effective substance abuse prevention services.
- **Office of Oral Health** works to promote oral health for children and adults, and to prevent dental diseases through select interventions and strategies. Staff work to develop sound public policy, resources, and to expand access to oral health care.
- **Office of School and Adolescent Health** works with communities, schools and organizations to develop systems of care for New Mexico students that incorporate primary care and behavioral health, and by promoting activities that reduce health and social barriers to learning.

Services include School-based Health Centers, School Mental Health Program, School Nurse Technical Assistance/Support, Coordinated School Health, Adolescent Health, and Youth Suicide Prevention. A school-based health center is a unique health service delivery site that becomes an integral part of the school. Health care providers from one or more health care entities come to the school to provide direct services, determined at the local level through a collaborative process that includes the health care provider agency, the school district and the community. Strategies to connect health and learning include: 1) increasing the number of students and their families who are able to access quality health services; 2) improving the system of physical, dental and behavioral health services in schools; 3) advocating for and developing policies that integrate health and behavioral health services; 4) training school health professionals and staff to ensure high quality care is delivered to students; 5) developing the capacity of schools and communities to meet the health needs of students; 6) assessing, monitoring and reporting on the health status of New

Mexico youth; and 7) fulfilling the mandate of the New Mexico Public Health Act to provide oversight of health service personnel in all New Mexico public schools.

- **Telehealth** links school-based health centers to providers across the state using state-of-the-art telecommunication systems. This approach allows the school-based health center to be responsive to the health care needs of a specific community and to operate within accepted community values and relevant state regulations and statutes.
- **Office of Rural and Primary Health Care** provides support to eligible community-based organizations in order to sustain a minimum level of primary health care services in Health Care Underserved Areas and to enable the development of new primary health care centers. Through the various programs and funding sources, the Office of Rural and Primary Health Care supports the recruitment and retention of health care professionals and the development of community health systems associated with Critical Access Hospitals, improves access to primary health care services, and, in partnership with the New Mexico Finance Authority, establishes standards and procedures for regulating programs pursuant to the Primary Care Capital Fund Act.
- **Primary Care Cooperative Agreement Program** coordinates State activities designed to improve access to primary care services with similar efforts of the federal government.
- **Rural Primary Health Care Act Program** provides support to eligible community-based agencies in order to sustain a minimum level of primary health care services in Health Care Under-served Areas (HCUAs), and enable the development of new primary care health centers or facilities in areas determined to be HCUAs.
- **J1 Visa Waiver (State 30) Program** oversees the federal program that permits foreign physicians to extend their residency in the US while they practice in underserved areas of New Mexico. The Department of Health can support requests for up to 30 candidates a federal fiscal year.
- **New Mexico Health Service Corps (NMHSC)** recruits and supports health professionals in rural and medically underserved areas of New Mexico.
- **Office of Health Promotion and Community Health Improvement** informs, educates and empowers local communities about health issues, mobilizes community partnerships to identify and solve health problems, and develops policies and plans that support individual and community health efforts.

Public Health Offices work with system partners at the state, county, city and community level to assure each community's safety, health status improvement, and a gratifying quality of life.

Each Public Health office provides leadership in the core public health functions of assessment, assurance and policy development. Local health offices can deliver more than 20 programs to their communities. These programs provide detection and control of disease outbreaks, family planning and sexually transmitted disease services, issuance of birth and death certificates, Women, Infant and Children (WIC) program services, school health programs, emergency preparedness for events involving biological agents and community health initiatives. The offices may be staffed with only a nurse and a clerk, with additional staff rotating in to provide services, or it may house a full

complement of staff including nutritionists, social workers, disease prevention specialists and others. Public Health offices are divided into five regions that reflect New Mexico's judicial districts:

Regions 1 and 3 consist of Bernalillo, Cibola, McKinley, Sandoval, San Juan and Valencia counties, representing 52% of the state total population, and with living conditions ranging from rural to urban settings. Nineteen public health offices are located throughout Regions 1 and 3, including one in the Metro Detention Center in Bernalillo County.

Region 2 consists of eight local public health offices and two satellite health offices located in Colfax, Guadalupe, Los Alamos, Mora, Rio Arriba, San Miguel, Santa Fe, Taos and Union counties. Through these programs, Region 2 delivers over 200,000 units of service a year.

Region 4 provides essential public health services through 12 local health offices, two satellite offices and mobile clinics in Chaves, Curry, DeBaca, Eddy, Harding, Lea, Quay and Roosevelt counties. Region 4 served more than 35,000 individual clients in the last fiscal year with a total of approximately 200,000 contacts.

Region 5 covers Catron, Doña Ana, Grant, Hidalgo, Lincoln, Luna, Otero, Sierra, Socorro, and Torrance counties through 21 local public health offices, 4 satellite clinics and the Doña Ana County Detention Center. The region also operates four mobile vans, which are used to deliver services to needy and underserved populations.

PROGRAM AREA 3: EPIDEMIOLOGY AND RESPONSE

Epidemiology and Response fulfills its mission by monitoring health providing health information, preventing disease and injury, promoting health and healthy behaviors, responding to public health events, preparing for health emergencies and providing emergency medical and vital registration services to New Mexicans.

Programs and activities:

Environmental Health Epidemiology Bureau investigates illness due to environmental agents and provides surveillance, data analysis and policy development for environmental health issues. It also collaborates with the NM Environment Department to address and investigate how air and water quality impact health.

- **Occupational Health Epidemiology** conducts surveillance of occupational health conditions that are the consequence of the workplace environment. Specifically, it identifies the magnitude and distribution of work-related health problems, track trends and targets responsible industries or work processes for intervention.
- **Asthma Program** describes and monitors the burden of asthma in the state. It develops and delivers statewide asthma education and training to all levels of asthma health care professionals and patients, families, schools, and communities. The program also strives to reduce the barriers to asthma care and the environmental causes and triggers of asthma.

- **Environmental Public Health Tracking Program** examines environmental hazard data, human exposure data and health effects data. It is developing a website that will provide environmental health information that includes levels of contaminants in the environment, levels of actual exposure in populations and health effects. It also has investigated the link between arsenic levels in drinking water and health outcomes such as cancer, and the link between air quality and asthma occurrence.
- **Lead Poisoning Prevention Program** conducts surveillance of lead poisoning in children and adults and provides home evaluations when the source of lead is not easily ascertained. It also provides educational materials to parents, physicians and members of the public.

Infectious Disease Epidemiology Bureau conducts infectious disease surveillance and responds to occurrences of infectious diseases of public health significance. It collects and analyzes infectious disease reports to detect outbreaks and identify trends.

- **Infectious Disease Surveillance Program** conducts surveillance for infectious diseases that are reportable by law to the Department of Health. The program collaborates with DOH Public Health Division staff to investigate cases, clusters and outbreaks of infectious diseases. Using an electronic database, it tracks investigations, monitors disease trends, detects outbreaks and contributes to national infectious disease surveillance and response.
- **HIV and Hepatitis Epidemiology Program** conducts active surveillance of HIV/AIDS and acute and chronic hepatitis B and C, and works with community groups and health care providers to promote better understanding of HIV/AIDS in New Mexico. The program disseminates data to a variety of health care professionals, organizations and individuals in and out of state.
- **Emerging Infections Program** is part of a network of 10 state health departments and the Centers for Disease Control and Prevention that conducts active surveillance, applied epidemiology and laboratory research, and implementation and evaluation of prevention and intervention projects for the active bacterial core surveillance (ABCs), the Foodborne Diseases Active Surveillance Network (FoodNet) and respiratory disease.
- **Zoonoses Program** conducts surveillance for humans, and animal and insect species as they relate to diseases that can be transmitted to humans from animals (e.g., hantavirus pulmonary syndrome, plague, tularemia, West Nile virus and rabies). The program performs field investigations, disease prevention and control activities, and contributes to policy development.

Bureau of Health Emergency Management prepares for health emergencies, including public exposure to biological or chemical agents from terrorism or naturally occurring events such as disease outbreaks or natural disasters. The Bureau is the state agency point of contact for all public health and medical needs during an emergency or disaster in accordance with the National Incident Management System.

- **Health Emergency Management Education and Performance Management Program** develops and delivers health and medical emergency management training in compliance

with federal regulations. Classroom, online, drills, exercises and federally sponsored events are offered.

- **Health Emergency Management Planning and Resource Management** is responsible for managing the Strategic National Stockpile, equipment and supplies that will be mobilized in the event of a disaster, tracking bed and resource capacity and deployment to accommodate surges in resource needs.
- **Emergency Health Care Response Program** directs health care preparedness activities throughout the state in partnership with hospitals, primary care clinics, and other health care entities. This work is focused on incident management planning, training and exercise oversight, and procurement efforts associated with establishing redundant power generation and a statewide emergency communications network.
- **Pandemic Planning and Performance Measures Program** coordinates statewide pandemic influenza planning in collaboration with other State agencies, health care partners, first responders groups, and local communities. The program also coordinates assessment of health preparedness programs through data collection and reporting of performance measures to federal funding agencies, the Governor's Office and other entities, as required.

Bureau of Vital Records and Health Statistics operates and maintains the state vital statistics system through the registration of births and deaths and receipt of fetal death and abortion reports. The Bureau issues birth and death certificates and provides vital statistics and data for administrative and research purposes.

- **Vital Records Program** registers all births and deaths occurring in the state and collects reports of fetal deaths and induced terminations of pregnancy. Information is provided by hospitals, funeral homes, physicians, Tribal officers and the Office of the Medical Investigator. This program issues birth and death certificates and collects fees for birth and death certificate searches. Additionally, the vital records program amends records and creates new records following adoption, legitimation and paternity determination. An electronic registration system called E-Vitals is used to register vital records, issue certificates and query data.
- **Health Statistics Program** produces statistics, reports and data files derived from the birth, death, fetal death and induced termination of pregnancy records. Data is provided to researchers and federal, state and local agencies and is used for research and administrative purposes. Vital statistics data is confidential in New Mexico and requests for data are reviewed to maintain confidentiality.

Emergency Medical Systems Bureau provides regulatory oversight, data collection and analysis, testing and licensing of providers and EMS Fund Act fund distribution for the Emergency Medical Services Program.

- **Trauma Program** collaborates with multiple entities in the state in developing a statewide trauma system that assures timely, quality, cost-efficient and definitive care for the trauma patient. Additionally, the program pursues trauma prevention activities to decrease the incidence of trauma.

- **Emergency Medical Services (EMS) Program** works to provide an emergency medical services infrastructure that assures that all residents of New Mexico will have competent EMS personnel who arrive in a timely manner and provide quality emergency pre-hospital care when necessary. This program licenses all levels of EMS caregivers, and provides regulatory oversight for and certifies non-transporting medical rescues, emergency medical dispatch programs and air ambulance services.
- **Stroke Program** collaborates among public and private sector partners in developing a statewide stroke system of care, including increasing public awareness and education. The program assists pre-hospital care providers and hospitals in developing a comprehensive stroke care clinical pathway, including the use of evidence-based guidelines and continuous process improvement.

Injury and Behavioral Epidemiology Bureau conducts surveillance of prescription and illicit drug and alcohol abuse, fatal and non-fatal injuries and a wide variety of other health conditions, diseases and related behaviors in the New Mexico population. It also addresses the \$4.8 billion-a-year burden of injury in NM by promoting and implementing evidence-based injury prevention strategies.

- **Office of Injury Prevention** monitors changes in the patterns of injuries experienced by New Mexicans, prepares and distributes statistics on injuries at local and state levels, operates firearm injury surveillance systems in hospital Emergency Departments and conducts surveys on traffic safety issues.
- **Substance Abuse Epidemiology Section** describes and monitors the burden of substance use and mental health conditions in New Mexico and provides policy recommendations as appropriate. This Section conducts surveillance of substance use behaviors, mental health conditions, drug overdose deaths, and other drug- and alcohol-related mortality.
- **Survey Section** is responsible for the Behavioral Risk Factor Surveillance System and Youth Risk and Resiliency surveys, population-based estimates of a wide variety of diseases and health conditions and associated behaviors in the adult population of New Mexico. The estimates derive in part from a state-of-the-art computer-assisted telephone interview system, which is capable of implementing health surveys following scientific sampling methods.

Community Health Assessment Section strengthens public health assessment capacity in DOH, counties and tribes throughout New Mexico. It provides training and technical assistance to DOH programs, counties, tribes and other local entities in the use and interpretation of public health data. It provides access to meaningful data and information to support state and community assessment activities.

- **Tribal Epidemiology** improves epidemiologic and public health assessment capacity for New Mexico American Indian Tribes by working with the Indian Health Service, tribal epidemiology centers, DOH epidemiologists and Tribal governments to improve collection, reporting, management and analysis of data for public health events. It develops, analyzes and disseminates American Indian- and tribe-specific data.

PROGRAM AREA 4: LABORATORY SERVICES

Scientific Laboratory Division fulfills its mission by providing laboratory analysis and scientific expertise for policy development for tax-supported public health, environment and toxicology programs in New Mexico in order to provide timely identification of threats to the health of New Mexicans.

Programs and activities:

Activities conducted by SLD can be classified into one the following 11 core functions:

- Disease prevention, control and surveillance
- Reference and specialized testing
- Environmental health and protection
- Food safety
- Emergency response
- Lab improvement and regulation
- Policy development
- Public health-related research
- Training and education
- Partnerships and communication
- Integrated data management

These functions and activities are carried out by one of the bureaus listed below:

Biological Sciences Bureau conducts individual patient testing in support of prenatal and sexually transmitted disease clinics for the Public Health Division, and tests animals, livestock and wildlife for veterinarians through the Department of Agriculture. SLD is the only lab in New Mexico that tests for rabies and plague in animals and humans. It also performs diagnostic testing for the Office of the Medical Investigator to determine cause of death. The Bureau is also the sole state lab facility responsible for the detection and control of infectious disease outbreaks in humans and animals and the only food testing laboratory for the investigation and control of food borne illnesses. The Bureau is the state reference laboratory for difficult to detect, emerging and re-emerging diseases (e.g. SARS, avian flu, West Nile), performing this role for all of the hospitals and clinical labs in New Mexico. As the state's bioterrorism response laboratory, SLD is the response lab for the US Postal Service and works closely with Department of Public Safety and the Federal Bureau of Investigation. The Bureau also serves a regulatory role as the inspection arm for the Department of Agriculture and Environment Department certification programs of private drinking water testing and dairy testing labs within the state.

Chemistry Bureau conducts environmental testing of air, water and soil for the Environment Department, the Albuquerque and Bernalillo Environmental Health Divisions and Tribal environmental agencies, and is the primacy laboratory for drinking water testing in New Mexico. The Bureau conducts environmental testing for organics, inorganic and heavy metals (lead, arsenic mercury) at environmental hazard sites, after environmental spills and in investigations of human

exposure to hazardous compounds (biomonitoring). The Bureau also is one of 10 national chemical terrorism response laboratories, and is a key player in the national chemical terrorism response plan.

Toxicology Bureau is the sole state forensic drug testing laboratory for the New Mexico Implied Consent Act (DWI testing) and for the Office of the Medical Examiner. As such, the Bureau tests for alcohol and drugs in DWI/DUID cases and on autopsy cases to determine cause of death. In addition to drug testing, the Bureau is responsible for setting DWI regulations, training and certifying biennially all law enforcement personnel in New Mexico as operators of breath alcohol analyzers. The Bureau also biannually certifies, inspects and repairs all evidentiary breath alcohol analyzers used in New Mexico. Finally, the Bureau provides expert witness in defense of its results in DWI cases statewide, responding to 1,200 subpoenas a year.

Program Support Bureau of SLD provides all fiscal, purchasing, human resource, engineering and facility maintenance functions at SLD that support the scientific and business operations of the division.

PROGRAM AREA 6: FACILITIES MANAGEMENT

The Office of Facilities Management (OFM) fulfills its mission by providing oversight of Department of Health facilities that provide mental health, substance abuse, nursing home and rehabilitation programs in facility and community-based settings to New Mexico residents who need safety net services.

Programs and activities:

OFM directly supervises six facilities and a community program: New Mexico Behavioral Health Institute, Fort Bayard Medical Center, Turquoise Lodge, New Mexico Rehabilitation Center, Sequoyah Adolescent Treatment Center, the New Mexico State Veterans Home and Los Lunas Community Program. In addition, OFM provides procedural and policy oversight in the following areas:

System of care activities include the standardization of practices in the long-term care and chemical dependency units, work force recruitment and retention for the health professions in the facilities, and establishing and maintaining national accreditation standards. OFM also administers the maintenance of state licensing and certification standards, participation and coordination with the ValueOptions system of care and the newly implemented Coordinated Long-Term Care Services, and coordinates the incident command process for emergency response.

Department-specific activities include primary staff support of the Governing Board process, the coordination of facility issues and facility-specific meetings. OFM oversees the standardization of systems and processes among the facilities, including facility strategic planning in keeping with the Department's process, budget alignment in keeping with performance-based budgeting, HIPAA compliance, FSEP compliance and legislative coordination for facility issues. Other departmental functions addressed through OFM include placing infectious patients in state facilities, financial issues including capital projects and the processing of managed care contracts, and coordinating information technology efforts, including the need to assure high speed communication lines and appropriate use of the clinical medical record.

Performance improvement activities within the facility system is a high priority for the Department. OFM oversees major initiatives in this area. They include practitioner credentialing, standardizing incident management processes and medication error reporting, practitioner peer review, nursing home quality standards and clinical performance improvement activities. Annual compliance reviews are conducted as both monitoring and training exercises for facility staff.

PROGRAM AREA 7: DEVELOPMENTAL DISABILITIES SUPPORTS DIVISION

Developmental Disabilities Supports Division fulfills its mission by administering a statewide system of community-based services and supports in order to improve the quality of life and increase the independence and interdependence of individuals with developmental disabilities, including children with or at risk of developmental delay or disability and their families.

Programs and activities:

Adult State General Funded (SGF) Services are provided to adult individuals who meet the State definition for developmental disabilities (DD) and are provided to eligible individuals who are waiting for DD Waiver services. Services include adult residential, vocational and self-directed family supports and respite and other special services.

Developmental Disabilities Home and Community-Based Medicaid Waiver Program provides services and supports to individuals of all ages with mental retardation, developmental disabilities and related conditions. This program provides an alternative to institutional care by arranging needed supports in the community. Each individual can access a combination of services to meet his or her specific needs. Services include residential, supported employment, habilitation community integration, therapies, personal care, respite, nutritional counseling and nursing.

Family Infant Toddler (FIT) Program is an entitlement program under the Individuals with Disabilities Education Act, (IDEA), Part C. This program serves families of children from birth to 3 years old who have or are at risk of developmental delay. The FIT Program provides an array of early intervention supports and services (service coordination, developmental consultation, therapies, family counseling and others) to enhance parents' ability to meet the developmental needs of their infant or toddler. Supports and services are provided to fit the family's everyday routines and through activities in home and community settings.

Medically Fragile Waiver (MFW) Program serves individuals of all ages who are eligible for services based on the determination that they have a medically fragile condition and have a developmental disability (or are developmentally delayed or at risk for developmental delay prior to age 8). A medically fragile condition is defined as a chronic physical condition that results in a prolonged dependency on medical care, such as daily skilled nursing intervention. The program provides medical support to individuals on the DD Waiver to give families respite from the responsibilities associated with constant care and monitoring. The waiver also supports the primary caregiver, allowing the medically fragile individual to live with his or her family or in a home environment.

Mi Via Waiver Program is a collaborative effort between the Aging and Long-Term Services Department, the Human Services Department and the Department of Health. Participants or

registrants can request Mi Via as an alternative to the Developmental Disability and Medically Fragile waivers. Participants on the Mi Via Waiver are allowed more choice, control, flexibility and freedom in planning, budgeting and managing their own services and supports and in building their own lives. With assistance and support from family, contractors and hired supports, participants arrange for services, including the hiring and managing of their own employees. A participant can return to the traditional waivers at any time.

Self-Directed Family Support Program began as a grant-funded pilot project in three communities. Since the inception of the program in FY01, the program expanded to include all regions of New Mexico and is funded through state general funds. The program allows for individual choice of goods and services through stipends that temporarily meet the needs of children and adults.

Children's Autism Services Initiative includes interdisciplinary evaluations, intensive mentoring with parents of children through age 5 with Autism Spectrum Disorder, adaptive skill building services for children age 6 to 18, and parent-to-parent support. In addition, this initiative provides training to professionals working with individuals with Autism Spectrum Disorder

PROGRAM AREA 8: HEALTH CERTIFICATION, LICENSING AND OVERSIGHT

The Division of Health Improvement fulfills its mission by conducting health facility licensing and certification surveys, community-based oversight and contract compliance surveys and a statewide incident management system so that people in New Mexico have access to quality health care and that vulnerable populations are safe from abuse, neglect and exploitation.

Programs and activities:

Health Facility Licensing and Certification Bureau surveys health facilities for state licensure and federal certification and health facility complaint resolution.

Incident Management Bureau investigates abuse and neglect allegations in community-based programs.

Quality Management Bureau conducts onsite quality assurance and oversight of community programs such as the Medically Fragile Waiver, Family, Infant and Toddler program, and Disabled & Elderly Waiver providers.

Caregivers Criminal History Screening Program conducts statewide and nationwide criminal background screening of all caregivers.

The Medical Officer conducts mortality reviews and provides technical assistance and training.