



**Sandoval County**  
**Community Health Improvement Plan**  
**FY 2011 – 2014**

**January 2010**

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## I. Executive Summary

The Sandoval County Community Health Alliance (SCCHA) was established by the Sandoval County Commissioners in 2001 to provide direction to address the health needs of the community within the context of healthy communities. The Alliance is fortunate to have representatives from other Sandoval County boards, councils, and citizen groups. These representatives provide a vital role in helping to develop and promote Alliance activities with their constituencies. Introduction and implementation of environmental strategies (e.g. those impacting community norms, laws, policies, regulations, enforcement, community awareness and media efforts) requires input and collaboration from many community partners for optimal design and successful deployment. The Alliance provides an opportunity to address health related issues and ideas between organizations in a broad and diverse forum. The Alliance is grant funded by the New Mexico Department of Health (NM DOH) and fiscally managed by Sandoval County.

The vision of the Alliance is to develop, support and maintain healthy communities. The SCCHA is pleased to present the Sandoval County Community Health Improvement Plan for Fiscal years 2011-2014. The purpose of this Plan is to describe the short and long-term strategies and activities related to the goals of the three selected community health priorities over the next four years. This plan is intended to be updated or revised yearly or as necessary in order to address the needs of the community it is designed to impact.

The three selected community health priorities for Sandoval County are:

- 1) To improve access to care
- 2) To promote good oral health and
- 3) To promote healthier lifestyles

In this Plan, you will find a brief description of why these priorities are important for Sandoval County, including statistics and demographics from valid sources.

The selected priorities will establish and strengthen connections between agencies and organization and build collaborations in order to more effectively impact the health of the community by improving access to care. In addition, the Alliance plans to maintain community involvement and representation for new hospitals planned for construction within in the County, estimated to be completed in the coming five years. The Alliance believes that the impact of two hospitals located within its borders provides great potential to affect the well-being of County residents. Similarly, a connection to community and social service resources will help to improve patient-centered service for the long term benefit of patients, families and the community.

The Sandoval County Oral Health Program completed their inaugural year in 2009. The program has identified the need to broaden the impact of oral health education, resource information, and services to the more rural areas of Sandoval County. The Alliance plans to support the current oral health program as well as their initiatives to expand new efforts to promote good oral health in the County.

The Alliance will also explore other community initiatives to promote healthier lifestyles within the community by using *The Guide to Community Preventive Services* of the Task Force on Community Preventive Services. The Guide provides recommendations and findings about evidence based programs to improve public health and prevent diseases based on the review of

over 200 community interventions. The Alliance will select one health topic each year and develop a local intervention using the Guide.

## **II. Introduction**

The Sandoval County July 2011 to June 2015 Community Health Improvement Plan (CHIP) is prepared by the Sandoval County Community Health Alliance and is a four-year, community-wide plan that identifies health priorities and goals and strategies for addressing those priorities. The CHIP is intended to guide the planning and implementation of activities for the Alliance. It is intended to be a living document, to be widely disseminated and updated as necessary.

### **The Sandoval County Community**

Sandoval County encompasses 3,716 square miles. It includes the incorporated municipalities of Bernalillo, Cuba, Corrales, Jemez Springs, Rio Rancho and San Ysidro, numerous unincorporated communities, the chartered community of Cochiti Lake, all or portions of nine Indian pueblos, three Navajo Chapters and part of the Jicarilla Apache Reservation. Sandoval County continues to experience rapid growth. From 2000 to 2007, the county population increased from 89,908 to 117,866 2007, more than 30% over that time period<sup>1</sup>.

### **Methodology**

The CHIP is based on data from the Sandoval County Community Health Profile, community surveys conducted between 2002 and 2007, key informant interviews, input of the Sandoval County Community Health Workers and ongoing input received at Health Alliance meetings. Two community meetings were held in May of 2009, one at the Health Commons in Bernalillo, and one at the Cuba Senior Center, to obtain additional community input. In 2002, 657 County residents responded to a community health survey conducted by the Alliance and in 2007, 1050 residents also responded to a survey (see survey response summary attached). Each of these surveys included a substantial outreach effort and focused on low-income County residents and health and social services providers. Additionally, Bilingual County Community Health Workers obtained hundreds of responses for these surveys.

### **Role of the Sandoval County Community Health Alliance**

The Sandoval County Community Health Alliance is the DOH funded Health Council for Sandoval County. Alliance members are approved by the Sandoval County Commission and include community members, health and social service providers, educators, County Commissioners, and other private and public employees that serve County residents. The Alliance strives to improve the health and wellbeing of all Sandoval County residents and neighborhoods through a variety of strategic activities:

- By developing a Community Health Profile to identify and map the community's health resources, needs and characteristics
- By identifying and prioritizing important health issues related to individual, familial, school and neighborhood residents
- By working in partnership with other individuals, groups and agencies to promote health awareness and to provide community education about health issues
- By creating action plans to achieve the systemic changes needed to meet the varied health needs of all Sandoval County residents

<sup>1</sup> Sandoval County Community Report, 2007, U.S. Census Bureau, <http://www.census.gov>

### III. Vision Statement

<b>SANDOVAL COUNTY COMMUNITY HEALTH ALLIANCE</b> www.sandovalhealth.org
<b>Alliance Mission:</b> To develop, support and maintain healthy communities.
<b>Alliance Vision:</b> Sandoval County communities are healthy and supportive places for individuals and families to have satisfying and productive lives.

The Centers for Disease Control defines healthy communities as "A community that is continuously creating and improving those physical and social environments and expanding those community resources that enable people to mutually support each other in performing all the functions of life and in developing to their maximum potential."<sup>2</sup> The SCCHA recognizes that many social and environmental factors impact health, injury, disease and access to services for managing those issues. As social and environmental factors evolve, the design for community connection to health information and resources must also evolve.

### IV. Community Health Assessment

#### Increasing Need

In 2006, New Mexico ranked 43<sup>rd</sup> among states in per capita personal income at an average of \$29,929 per year. Sandoval County's per capita income averaged \$28,484 per year. In Sandoval County, 15.1% of children live below the poverty level.<sup>3</sup> Between March 2008 and March 2009, Enrollment in temporary assistance programs for Sandoval County residents increased as described below.

<b>Sandoval County Resident Cases NM Assistance Programs<sup>4</sup></b>			
<b>Assistance Program</b>	<b>March 2008 Cases</b>	<b>March 2009 Cases</b>	<b>% Change 2008-2009</b>
Sandoval Nutrition Assistance Program (SNAP) – food stamps	3,154	4,345	37.8% increase
Temporary Assistance to Needy Families (TANF)	406	575	41.6% increase

In the United States, health is strongly correlated with income. While increased enrollment in public assistance cannot fully predict the trends in income and poverty in the County, it provides some indication that there is significant increase in residents perceiving their need for assistance and qualifying for that assistance. The unemployment rate in Sandoval County at the

<sup>2</sup> <http://www.cdc.gov/healthyplaces/terminology.htm>

<sup>3</sup> Sandoval County Quick facts, U.S. Census Bureau

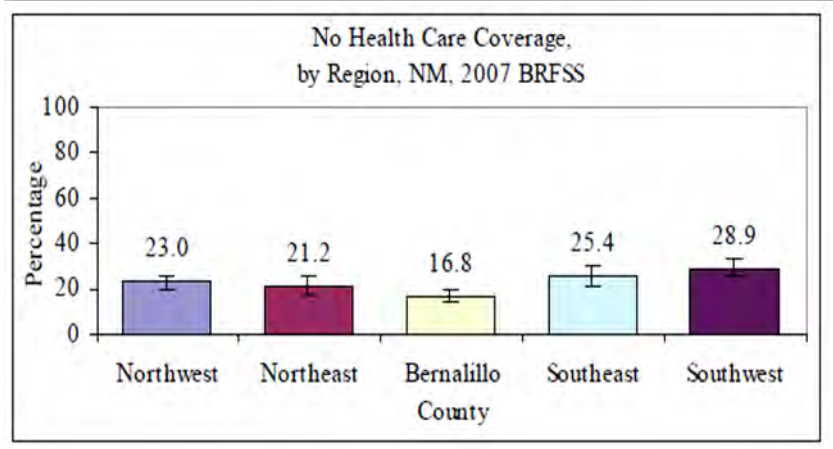
<sup>4</sup> Monthly Statistical Report, New Mexico Human Services Department, April, 2009.  
<http://www.hsd.state.nm.us/isd/reports.html>

end of 2008 was 5.4% and by the first quarter of 2009 it had risen to 7.4%<sup>5</sup>. Current national economic conditions generally support that income is on the decline and job loss is on the incline while statistical data is still being compiled for the most recent time periods.

### Health Insurance Coverage

According to the Behavior Risk Factor Surveillance System (BRFSS), an estimated 25% of New Mexicans are without health care insurance and 28.9% in the northwest region of New Mexico, which includes Sandoval County, have no health care coverage.<sup>6</sup>

People without health coverage are much less likely to receive recommended preventive services and medications than those with coverage. The uninsured are therefore more likely to succumb to preventable illnesses and more likely to die prematurely. In New Mexico, 41.4% of adults had not visited a physician for a routine checkup in the past 12 months. Locally, 15.7% of New Mexicans were unable to get needed medical care in the past 12 months because of cost; 20.8% of Hispanic adults and 17.3% of Native American adults.<sup>7</sup>



### Transportation and Geographic Dispersion

Transportation from rural communities to available services continues to be a challenge in Sandoval County. Substantial portions of Sandoval County are covered by “federal” lands, including US Forests, Pueblos, and Indian Reservations. A great majority of the County is dominated by low density, rural development. Urban developments are primarily found in the far southern extent of the county (Rio Rancho, Corrales, and Bernalillo). These areas are those nearest the county line from the City of Albuquerque. Currently, there are no hospitals located in Sandoval County. Additionally, Dialysis patients in rural areas must make three trips per week for treatment, must travel to Santa Fe, Rio Rancho, or Albuquerque. The Rio Metro Regional Transit District manages all public transportation systems in Sandoval County. Implementation of changes for better transportation resources are still in progress since oversight of County public transportation was transferred to Rio Metro in July of 2007. Planned services include high capacity transit, commuter express bus service, local fixed-route bus service, neighborhood circulator service, flex-route service and demand response service.<sup>8</sup>

### Prenatal Care

In Sandoval County, 9.4% of pregnant women receive low or no prenatal care, 17.4% of pregnant women of American Indian ethnicity receive low or no prenatal care and 15.4% of pregnant women between the ages of 15 and 19 receive low or no prenatal care.<sup>9</sup>

<sup>5</sup> US Department of Labor, Bureau of Labor Statistics, Local Unemployment Statistics

<sup>6</sup> Health Behaviors and Conditions of Adult New Mexicans, 2007. <http://nmhealth.org/erd/healthdata>

<sup>7</sup> Health Behaviors and Conditions of Adult New Mexicans, 2007. <http://nmhealth.org/erd/healthdata>

<sup>8</sup> Rio Metro Regional Transit District Service and Financial Plan. July 16, 2008

<sup>9</sup> New Mexico Selected Health Statistics 2007.

[http://www.health.state.nm.us/VitRecHealthStats/documents/2007\\_AR\\_Volume1MLok\\_111209awgraphs.pdf](http://www.health.state.nm.us/VitRecHealthStats/documents/2007_AR_Volume1MLok_111209awgraphs.pdf)

The Annie Kasey Casey Foundation has developed 10 key indicators of child well being and has compiled state rankings and national data. New Mexico ranked 43<sup>rd</sup> of US states in overall child well being as measured by all ten indicators. Indicators affected by prenatal care include the percent of low birth weight babies and the infant mortality rates.

Infants born at weights below 2,500 grams (approximately 5.5 pounds) have a higher probability of experiencing developmental problems, experiencing both short and long-term disabilities or dying within the first year of life. In New Mexico, the percent of low birth weight babies was 8.9% in 2006. This is not statistically different than the US average of 8.3% low birth weight babies. However, New Mexico

ranked 36<sup>th</sup> in this indicator nationwide. Only 13 other US states had a higher percent of low birth weight babies.<sup>10</sup> From 2000-2006, the percent of low birth weight babies has increased in every US state. In 2007, the percent of low birth weight babies in Sandoval County was 8.1%. Babies born to mothers who received no prenatal care are three times more likely to be born at a low birth weight.

New Mexico comparison to the U.S. as a whole on key indicators of child well-being. 2009 Kids Count Data (Data from 2006/2007)			
	NM	US	Sandoval (2007)
Low-Birth Weight Babies	8.9%	8.3%	8.1% <sup>+</sup>
Infant Mortality (Rate per 1,000)	5.8	6.7	5.8 <sup>+</sup>
% Pre-Term Births	14.1%	12.8%	9.0 - 9.4% <sup>++</sup> (2000 - 2006)
% Births with a Low Level of Prenatal Care	8.9% <sup>+</sup>		3.8% <sup>+</sup>
% of births with no prenatal care	2.2% <sup>+</sup>		1.5% <sup>+</sup>

<sup>+</sup> Data from NM DOH Selected Health Statistics Annual Report

<sup>++</sup> Data provided by the Bureau of Vital Records & Health Statistics; analysis by the New Mexico Environmental Public Health Tracking Network

### New Mexico's Infant

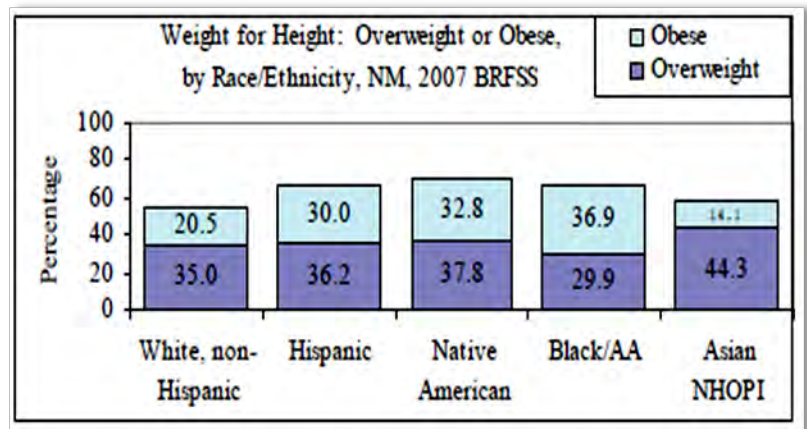
Mortality rate was 5.8 per 1,000 in 2006.

New Mexico ranked 14<sup>th</sup> among US states in infant mortality. New Mexico's infant mortality rate is better than the national average of 6.7 per 1,000. Babies born to mothers who received no prenatal care are five times more likely to die than those whose mothers received prenatal care.

In New Mexico, 14.1% of births were preterm; higher than the national preterm birth percentage of 12.8%.<sup>11</sup> Early and continuous prenatal care helps identify conditions and behavior that can result in low birth weight babies and preterm births, such as smoking, drug and alcohol abuse, inadequate weight gain during pregnancy and repeat pregnancy within six months or less.

### Obesity

In 2007, 60.8% of adult New Mexicans were either overweight or obese, 35.7% of adults were overweight and an additional 25.1% were obese, based on Body Mass Index (BMI). In New Mexico, being overweight and obese is disproportionately represented in



<sup>10</sup> Kids Count Data Book

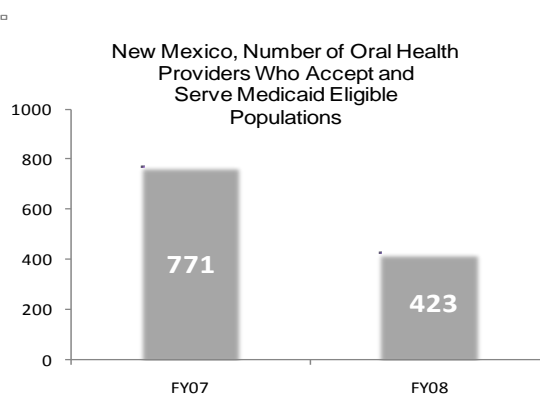
<sup>11</sup> Kids Count Data Center

several population groups. Hispanic and Native American adults have statistically higher rates of obesity than do White, non-Hispanic adults in New Mexico. In Sandoval County, 23.7% of adults are obese.<sup>12</sup> Approximately 34% of Native American adults in New Mexico are obese and 28% of Hispanic adults are obese.<sup>13</sup> Obesity can lead to other chronic conditions such as heart disease and diabetes. Obesity can be managed with diet and physical activity.

### Oral Health

Oral disease is one of the most preventable health conditions affecting the United States population. Poor oral health may result in dental decay, eventual tooth loss, impaired general health, and compromised nutrition.<sup>14</sup> These conditions can impact a community in the form of days lost from school or work and compromised ability to obtain or advance in education and employment. Preventive measures and treatments such as school-based oral health education, dental sealants, and systematic application of topical fluoride rinses or varnish can significantly reduce the incidence of tooth decay in children.

Access to oral health care services and overall oral health status in New Mexico are largely related to socioeconomic factors and disproportionate distribution of dental professionals. In 2006, New Mexico had 882 licensed dentists with a New Mexico practice address for a rank of 49th in the nation in number of dentists per 1,000 (0.0431 per 1,000).<sup>15</sup> In 2008, Sandoval County had 34 licensed dentists for a population of approximately 123,000.<sup>16</sup> This average of approximately 3600 persons per dentist is more than double the 2000 national average dentist to population ratio of 1600:1.<sup>17</sup> In addition, the number of Medicaid dental providers continues to decline. New Mexico Oral Healthcare providers who accept and serve Medicaid eligible populations declined from 771 in 2007 to 423 in 2008.<sup>18</sup>



### Ranking of health issues

Access to care is a concern for this highly dispersed community. Sandoval County residents face barriers to health information or services due to significant travel distance required to get to available care, lack of providers within specific geographic areas, poverty, lack of insurance and rising cost of healthcare coverage. Sandoval County continues to work toward networking available resources and connecting residents to services and information valuable for making good healthy choices about health care and lifestyles. Information and education that may be

<sup>12</sup> New Mexico Indicator-Based Information System, <http://ibis.health.state.nm.us/docs/2009HHCountyReports/Sandoval.pdf>

<sup>13</sup> Health Behaviors and Conditions of Adult New Mexicans, 2007. <http://nmhealth.org/erd/healthdata>

<sup>14</sup> In 2000, the United States Surgeon General issued "Oral Health in America,"

<sup>15</sup> New Mexico Health Policy Commission, 2008 *Quick Facts*, <http://www.hpc.state.nm.us/documents/Quick%20Facts%202008.pdf>.

<sup>16</sup> UNM HSC Community Health Report Card, April, 2008. <http://hsc.unm.edu/community/CountyReportCards/sandoval.shtml>

<sup>17</sup> Beazoglou, Heffley, Brown and Bailit, "The importance of productivity in estimating need for dentists." *The Journal of the American Dental Association* 133:10, 2002

<sup>18</sup> State of New Mexico 2008 Comprehensive Strategic Health Plan, <http://www.health.state.nm.us/pdf/2008%20Comprehensive%20Strategic%20Health%20Plan.pdf>

available to the more southern areas of the County are difficult to travel to and rural communities are unaware of available resources to assist them in obtaining services.

### Identifying Priority Areas and Goals

The Alliance recognizes that existing County resources can be maintained and enhanced to increase positive health outcomes for the County.

Beginning in 2005, the Sandoval County Wireless Broadband Project began development of a stronger, more durable communications network for government, schools, and the public. The network will pass large amounts of data at high speeds to distant parts of the County. The backbone for this communication network is in place and designed to support expansion as the needs of the County and its residents are determined. Pilot projects testing application and effectiveness are underway at Jemez Valley Schools, the Jemez Pueblo Health Clinic and the Village of Cuba. The County plans to offer free bandwidth to Medical Programs. Additionally, Medical services in rural areas can be expanded and improved through telehealth initiatives using the broadband network.

In 2008, a Sandoval County Hospital mill Levy passed. The Levy supports plans for two new hospitals located within Sandoval County to be constructed within the next five years. The mill levy will raise \$13 million per year. The County will partner with the hospitals in order to ensure connections to local health and social services within the community. The Alliance plans to be active in securing community input into the planning process for the new hospitals and to utilize Alliance information distribution channels, such as the Alliance web site and Alliance meetings, to provide a forum to discuss issues related to the new hospitals and make information about the hospitals available to the community.

The Sandoval County Human Services Division and the New Mexico Department of Health have constructed a pilot program to provide many services under one roof. The Sandoval County Health Commons was constructed in 2007 and houses a unique partnership of state and county workers to reach target populations in providing health resources at a one-stop-shop location. Within the Health Commons are resources to access the New Mexico Public Health Office, a New Mexico Women Infants and Children (WIC) office, County Community Health Workers, the Sandoval County Health Care Assistance Program (indigent fund) and the Sandoval County Oral Health Program (SCOHP). The Commons has been successful in providing target populations with strategic health information, resources, and services that positively impact the health of families in Sandoval County. The Sandoval County Community Health Alliance works in direct relationship with the Health Commons programs and services.

The Health Commons has also provided innovative outreach activities to the rural areas of the County. The Alliance plans to support the Health Commons in expanding outreach activity to ensure county residents are aware of the services available at the Commons. In addition a strategic plan for expanding outreach is being developed that will take services and health education directly to the rural communities. The Sandoval County Oral Health Program has had measureable success in providing dental prevention services. For example, oral health education, oral hygiene products, resource information about other programs, and preventive services are provided in rural communities through events that partner programs and facilities within that community with the County Oral Health program. Plans for similar outreach include mobilizing community health classes, providing indigent fund information and education and distributing County supplied Salud Manuals. Salud Manuals are bilingual publications of the New Mexico Resources Inventory (NMRI). They contain provider contact information for a

variety of health and social services and include information on Medicaid acceptance, services available, and language availability.

#### **IV. Priority Areas**

After consideration of available health information provided by the community survey and expanding on the productive work currently in place, the Alliance has selected the following priorities:

##### **Priority 1: Access to Care**

Of the 2007 Health Alliance Survey respondents (1,050 County residents), 27% reported they were unable to get needed health care, 72% experienced barriers to getting health care because they had no health insurance and 26% because they could not afford a co-pay. According to the BRFSS, 28.9% of survey respondents in the northwest region of New Mexico, which includes Sandoval County, have no health care coverage.<sup>19</sup> The Alliance plans to prioritize networking efforts to improve access to care and various types of assistance by participating with the New Mexico Resource Inventory (NMRI) program. This will provide access to accurate health and social service organization information and improve individual familiarity with systems that are in place to provide health care services or assistance. The Alliance will also create and maintain connections among hospitals, health and social services within Sandoval County and existing networks. Maintaining high community awareness about the two new hospitals slated for construction in Sandoval County and associated service planning will be a focus for the Alliance.

##### **Priority 2: Promote Good Oral Health**

Of the 2007 Health Alliance survey respondents, 65% reported that they were unable to get dental care. The Alliance has been monitoring and facilitating efforts of the Sandoval County Oral Health Program (SCOHP) since 2008 and has supported recent efforts of the Sandoval County Health Care Assistance Program (Indigent Fund) to include provisions for preventive dental services to residents who qualify for the program. In 2006, New Mexico had 882 licensed dentists with a New Mexico practice address for a rank of 49th in the nation in number of dentists per 1,000 (0.0431 per 1,000).<sup>20</sup> In 2008, Sandoval County had 34 licensed dentists for a population of approximately 123,000.<sup>21</sup> This average of approximately 3600 persons per dentist is more than double the 2000 national average dentist to population ratio of 1600:1.<sup>22</sup> The Alliance plans to support expansion of SCOHP initiatives and develop data gathering processes for oral health information from across the County. This will help improve available programs, expand successful outreach activities, measure community need for oral health resources and network providers, programs and social services to impact a larger portion of the population, including rural areas and minority groups.

##### **Priority 3: Promote Healthier Lifestyles**

The Alliance plans to explore more direct community initiatives toward promoting healthier lifestyles for Sandoval County residents. The Task Force on Community Preventive Services is an independent, nonfederal, volunteer body of public health and prevention experts, whose members are appointed by the Center for Disease Control (CDC). The Guide to Community

<sup>19</sup> Health Behaviors and Conditions of Adult New Mexicans, 2007. <http://nmhealth.org/erd/healthdata>

<sup>20</sup> New Mexico Health Policy Commission, 2008 *Quick Facts*, <http://www.hpc.state.nm.us/documents/Quick%20Facts%202008.pdf>.

<sup>21</sup> UNM HSC Community Health Report Card, April, 2008. <http://hsc.unm.edu/community/CountyReportCards/sandoval.shtml>

<sup>22</sup> Beazoglou, Heffley, Brown and Bailit, "The importance of productivity in estimating need for dentists." *The Journal of the American Dental Association* 133:10, 2002

Preventive Services is a resource of the Task Force that provides detailed information about evidence based initiatives in public health. Topics reviewed in the Guide include: adolescent health, alcohol, asthma, diabetes, mental health, obesity, physical activity, tobacco, vaccines, violence and more. The Alliance will select at least one intervention each year to address specific needs of the population, develop a focused initiative and assess outcomes for effectiveness, further implementation or maintenance. The Healthy Lifestyles Committee of the Alliance is currently reviewing recommended community interventions. The selected program will be implemented at the beginning of the 2011 fiscal year.

**VI. CHI PLAN: Community Action Plan Grid**

**Health Priority One: Improve Access to Care**

Goals	Objectives	Community Partners/Resources	Health Status Outcomes/Indicators
<p><b>Goal 1:</b> Use available resources for the new County hospitals to address priority concerns of the County’s residents, and to maximize access to critical hospital services by underserved County residents</p>	<p><b>Objective 1.1</b> Educate/inform the community (consumers and providers) regarding the status of the new hospital(s) in Sandoval County.</p> <p><b>Objective 1.2</b> Provide fora and mechanisms, which encourage Sandoval County residents and service providers to provide input into the planning and development process of the new Sandoval County hospital(s).</p> <p><b>Objective 1.3</b> Inform the County Administration and County Commission regarding the concerns of County residents and health and social service providers.</p>	<ul style="list-style-type: none"> <li>• Hospitals Committee of the Sandoval County Community Health Alliance</li> <li>• Presbyterian healthcare Services</li> <li>• Sandoval County Commission</li> <li>• University of New Mexico Sandoval County Regional Medical Center Board</li> <li>• El Pueblo Health Services, Inc.</li> </ul>	<ul style="list-style-type: none"> <li>• Information materials distributed or posted on website.</li> <li>• Meetings held.</li> <li>• Emails/letters distributed.</li> <li>• Reports/communications to hospitals and County.</li> </ul>

<b>Goals</b>	<b>Objectives</b>	<b>Community Partners/Resources</b>	<b>Health Status Outcomes/Indicators</b>
<p><b>Goal 2:</b> Increase awareness of County residents, health and social service providers, and policy makers regarding available health and social services available for County residents.</p>	<p><b>Objective 2.1:</b> Increase/update information of health and social service providers serving County residents included in the New Mexico Resource Inventory (NMRI).</p> <p><b>Objective 2.2:</b> Increase utilization of the NMRI on-line data system by consumers and providers to identify resources.</p>	<ul style="list-style-type: none"> <li>• New Mexico Resource Inventory (MMRI)</li> <li>• MyCommunityNM.org</li> <li>• Networking Committee of the Sandoval County Community Health Alliance</li> <li>• Presbyterian Medical Services</li> <li>• La Buena Vida, Inc.</li> <li>• El Pueblo Health Services, Inc.</li> <li>• County hospitals in construction</li> </ul>	<ul style="list-style-type: none"> <li>• Updates made to the NMRI website.</li> <li>• Salud Manuals distributed.</li> <li>• Sandoval County Health Alliance website hits.</li> <li>• Medicaid enrollment</li> </ul>

## Health Priority Two: Promote Good Oral Health

<b><u>Goals</u></b>	<b><u>Objectives</u></b>	<b><u>Community Partners/Resources</u></b>	<b><u>Health Status Outcomes/Indicators</u></b>
<p><b>Goal 1:</b> Measure community need for Oral Health services and information by the community.</p>	<p><b>Objective 1.1</b> Monitor use of County Indigent Funds for preventive dental services by enrollees of the program.</p> <p><b>Objective 2.1</b> Support expansion of dental education and service outreach to rural communities.</p>	<ul style="list-style-type: none"> <li>• NM Department of Health, Office of Oral Health</li> <li>• Sandoval County Oral Health program</li> <li>• Sandoval County Health care assistance Program (Indigent Fund)</li> <li>• Local Dental Providers</li> <li>• Head Start</li> <li>• Local Pre-Schools</li> <li>• County Senior Centers</li> <li>• UNM School of Medicine, Division of Dental Hygiene</li> <li>• Presbyterian Medical Services</li> </ul>	<ul style="list-style-type: none"> <li>• Number of Medicaid and uninsured patients provided services at the Sandoval County Oral Health Program.</li> <li>• Number of Sandoval County Health Care Assistance enrollees using the program to access dental services.</li> <li>• Number of individuals served at Sandoval County Oral Health Program outreach events.</li> </ul>

<p><b>Goal 2:</b> Expand dental provider network for community programs related to oral health.</p>	<p><b>Objective 2.1</b> Assist Sandoval County Health Care Assistance Program in developing provider awareness and participation by agreement for preventive dental services to indigent Fund enrollees.</p> <p><b>Objective 2.2</b> Support expansion of dental education and service outreach to rural communities.</p>	<ul style="list-style-type: none"> <li>• NM Department of Health, Office of Oral Health</li> <li>• Local Dental Providers</li> <li>• Sandoval County Oral Health Program</li> <li>• Head Start</li> <li>• Local Pre-Schools</li> <li>• County Senior Centers</li> <li>• UNM School of Medicine, Division of Dental Hygiene</li> <li>• Presbyterian Medical Services</li> </ul>	<ul style="list-style-type: none"> <li>• Number of providers contacted or supplied information about the Sandoval County Health Care Assistance program provisions for preventive dental services.</li> <li>• Number of providers engaged in the Sandoval County Health Care Assistance program by agreement to provide service to program enrollees.</li> <li>• Number of events providing dental outreach to rural communities</li> </ul>
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## Health Priority Three: Promote Healthier Lifestyles

<u>Goals</u>	<u>Objectives</u>	<u>Community Partners/Resources</u>	<u>Health Status Outcomes/Indicators</u>
<p><b>Goal 1:</b> Use The Guide to Community Preventive Services of the Task Force on Community Preventive Services to select at least one recommended intervention per year to promote healthier lifestyles of Sandoval County residents.</p>	<p><b>Objective 1.1</b> Select at least one (1) intervention each year, based on The Community Guide, for implementation by the Alliance. Interventions may be community campaigns, policy initiatives, or program augmentation to reach all or selected subsets of Sandoval County residents.</p> <p><b>Objective 1.1</b> Plan, implement, evaluate, and modify selected interventions.</p>	<ul style="list-style-type: none"> <li>• Task Force on Community Preventive Services</li> <li>• Healthy lifestyles Committee of the Sandoval County Community Health Alliance</li> <li>• Presbyterian Medical Services</li> <li>• La Buena Vida, Inc.</li> <li>• NM DOH, PHO, OHPCHI</li> <li>• El Pueblo Health Services, Inc.</li> </ul>	<ul style="list-style-type: none"> <li>• Inventory of proposed, current and past interventions.</li> </ul>
<p><b>Goal 2:</b> Monitor effectiveness of healthy lifestyle interventions.</p>	<p><b>Objective 2.1</b> Identify, collect and analyze data to measure change in lifestyle targeted by interventions.</p> <p><b>Objective 2.1</b> Modify or discontinue interventions annually based on select intervention modifications.</p>	<ul style="list-style-type: none"> <li>• Task Force on Community Preventive Services</li> <li>• Healthy Lifestyles Committee of the Sandoval County Community Health Alliance</li> <li>• Presbyterian Medical Services</li> <li>• La Buena Vida, Inc.</li> <li>• NM DOH, PHO, OHPCHI</li> <li>• El Pueblo Health Services, Inc.</li> </ul>	<ul style="list-style-type: none"> <li>• To be developed for each intervention selected.</li> </ul>

**SANDOVAL COUNTY COMMUNITY HEALTH ALLIANCE SURVEYS, 2002 AND 2007**

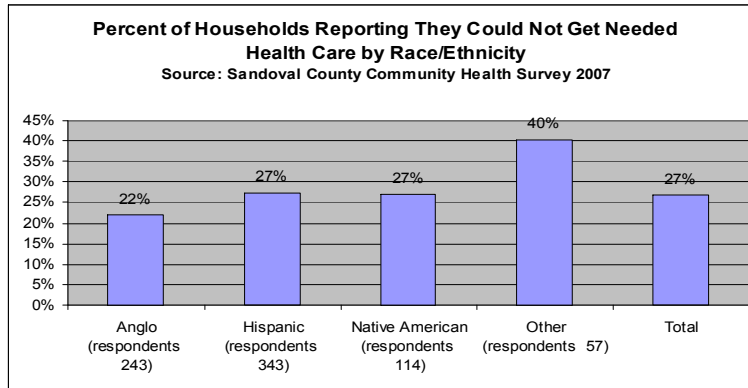
**2002 Survey<sup>2</sup>**  
(640 responses)

**2007 Survey<sup>2</sup>**  
(1050 responses)

**Not able to get needed health care**

28%

27%



**Why couldn't get needed health care**

Couldn't afford co-pay	39%	26%
No Health Insurance	55%	72%

**Insurance Status**

**Respondent has a full-time job (367 respondents)**

no private insurance in household	34%
a household member receives VA health services	5%

**Respondent has a part-time job (89 respondents)**

no private insurance in household	70%
a household member receives VA health services	3%

Respondent has a full-time job and no household member has private insurance 34%

Respondent has a part-time job 70%

**Type of Health Care Couldn't Get**

Dental	65%
Physical Medical Care	43%
Vision Exam	40%
Medical Lab Test	25%
Mammogram	17%
Mental Health Counseling	14%

**Missed School Days Due to Dental Problem** 16%

**Missed Work Days Due to Dental Problem** 23%

**Households with Diabetes**

Anglo	12%
Hispanic	18%
Native American	31%

**Households with Asthma**

Anglo	14%
Hispanic	13%
Native American	17%

<sup>2</sup> Sandoval County Community Health Alliance consumer surveys were conducted in 2002 and 2007. 45% of 2007 survey respondents were working full-time. Survey samples biased toward individuals receiving government income supports (Medicaid, Food Stamps, WIC, etc.).