



Social Services

## Los Alamos County Health Council

## Membership Application

Please answer the following:

How long have you lived in Los Alamos County? 20 years

Name: \_Suzanne J. Canfield, MBA, BSN, RN Title: \_\_NM Nurses Association Nurse Peer Review Leader and CASA\_\_ Mailing Address: \_2360 Canyon Glen Road City, State, Zip: Los Alamos, NM 87544

Telephone Number: \_505-690-6975 E-mail Address: [sjcanfield@comcast.net](mailto:sjcanfield@comcast.net) Organization: NM Nurses Association / First Judicial Court Field of Work: Nursing

1. Please indicate the region you reside in? ☐ White Rock ☒ Los Alamos ☐ Other: \_\_\_\_\_

2. Please select number of years that you have been involved in Los Alamos County through community service:

☐ 1-3 years of community involvement in Los Alamos County

☒ 3-6 years of community involvement in Los Alamos County

☐ 6 or more years of community involvement in Los Alamos County

3. Please explain your interest in serving as a member of the Los Alamos Health Council: \_\_I have been a member of the LACHC for over 3 years and I would like to apply to be appointed as one of the few official members because I believe it is important to share information with the Council regarding legislative updates as well as nursing perspectives for other issues that affect LA County. My education and experience in the business of healthcare, administration, education and quality management could make additional contributions to the Council. As a Court Appointed Special Advocate, I am also aware of some of the needs of children in foster care here in our county and can share CASA information as well.

4. Please describe the population or community you serve or represent (including geographic area): As a member of our community, CASA and the health care profession, I am able to represent perspectives from those areas .

5. Describe your familiarity with the healthcare system/services in Los Alamos County: I am very familiar with healthcare in LA County both as a nurse and a user of the system. As a member of the LACHC, I have become very aware of services available locally and in our extended area. Review of the 2019 NM Health Care Workforce Committee Report has also given me a clear picture of where our needs are in LA County as well as throughout the state.

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6. Do any of the organizations you are affiliated with receive funding from Los Alamos County? If yes please describe:

NO

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7. Please list any additional information you consider important:      I am very interested in the health needs of our community as well as population health. We are fortunate to have as many resources as we do, and it is very important for the Council to assist with coordinating and sharing of those resources and ensuring that all who need services are both aware and have access. I would like to work with the Council toward this goal and regularly measure our success in meeting the needs of our community.

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*Suzanne Canfield* 11/25/19  
Signature Date

On behalf of Los Alamos County, we thank you for your interest in the Los Alamos County Health Council.