

Division of Public and Behavioral Health
Substance Abuse Prevention and Treatment Agency (SAPTA)
Advisory Board

MINUTES

DATE: August 9, 2017
TIME: 9:00 a.m.

	Meeting	Las Vegas	Videoconference
LOCATION:	Carson City DPBH 4126 Technology Way Second Floor Conference Room	SNAMHS 6161 W. Charleston Blvd, Bldg. 1 West Hall Conference Room	Elko DHCFP 10101 Ruby Vista Drive Suite 103

CONFERENCE 775-887-5619; 2005#; Pin 0809#

BOARD MEMBERS PRESENT

Steve Burt, Chair, Ridge House
Michelle Berry, Vice Chair, CASAT
Tammra Pearce, Bristlecone
Angela Mangum, WestCare
David Robeck, Bridge Counseling
Jolene Dalluhn, Quest Counseling
Michele Watkins, Central Lyon Youth Connections

Diaz Dixon, Step 2
Jennifer Snyder, JTNN
Lana Robards, New Frontier
Jeremiah Cotner, PACT Coalition
Theresa Green, Vitality Unlimited

BOARD MEMBERS ABSENT

Debra Reed, Las Vegas Indian Center
Kelly Robson, HELP of Southern Nevada
Pauline Salla-Smith, Frontier Community Coalition

Ron Lawrence, Community Counseling Center

OTHERS PRESENT

Juanita Chapman, Ridge House
Helen See, The Life Change Center
Roxanne DeCarlo, The Empowerment Center
Mark Disselkoen, CASAT
Linda Lang, Nevada Statewide Coalition Partnership
Cheryl Bricker, Partnership of Community Resources
Taylor Radke, Partnership of Community Resources
Christopher Croft, Tahoe Youth & Family Services

Dani Tillman, The Life Change Center
John Firestone, The Life Change Center
Tenea Smith, Rural Nevada Counseling
Amanda Swenson, WestCare Nevada

SAPTA/STATE STAFF PRESENT

Kendra Furlong
Kyle Devine
Sara Weaver
Joan Waldock

Bill Kirby
Raul Martinez
Stephen Wood

1. Welcome and Introductions

Mr. Burt called the meeting to order at 9:06 a.m. He noted there was a quorum present.

2. Public Comment

There was no public comment.

3. Approve Minutes of June 14, 2017

Regarding the June 14, 2017, minutes, Mr. Robeck moved to accept the minutes as written. Ms. Snyder seconded the motion. The motion passed.

4. Standing Informational Items

Ms. Berry stated CASAT had nothing to report at this time.

Mr. Devine gave the Substance Abuse Prevention and Treatment Agency (SAPTA) report.

Mr. Devine began with the Substance Abuse and Mental Health Services Administration (SAMHSA) treatment site visit in July, although he had not received an official report from them yet. He mentioned he could summarize the visit by saying that Dr. Mitchell was smiling when she walked out and that she laughed and smiled during the exit interview. He reported that she was impressed and encouraged that the providers she met seemed to have friendly relationships with the staff. He noted that many findings from previous years had been corrected. He concluded by sharing that Dr. Mitchell had said that Nevada was moving toward being a model state.

In his report on funding, Mr. Devine acknowledged that SAPTA was working on a funding plan. He stated that SAPTA's biggest problem was they did not yet have a Notice of Grant Award (NOGA) from SAMHSA so they did not know how much money they will have for the period beginning October 1. The mental health block grant was cut by about 25 percent and the substance use block grant should be level, but that has not been verified. SAPTA looked at spending for Fiscal Year (FY) 2016 to get an idea of the complete picture and are trying to base their projections for treatment based on that. He handed out a draft copy of the flat funding from 2016, which can be viewed [here](#). He stated they would view the FY 2017 close out, comparing and analyzing it, and present it as a report to the Board. For planning purposes, the proposed funding plan could be used. He said SAPTA had worked out a budget based on flat funding on the prevention side that the coalitions are using for planning. He stated he should have the entire picture and analysis by the next Board meeting and that the main thing Board members needed to know was that the Category 10 and Category 14 are State General Fund dollars. He noted that the information in the handout did not include the women's carve-out, the adolescent Request for Proposal (RFP) that will be sent out which would be above this—the plan showed only dollars for treatment from the federal government and some from the General Fund, which was also reduced. He added the reduction was not apparent in the state budget, but the internal budgets the state budget allocation was built on made shifts in administrative costs so there was less money going to SAPTA in the funding. He stated they were trying to do what they could, but they did not have any more money. He added that SAPTA was working on giving facilities multi-year allocations in state General Fund dollars for FY 2018 and FY 2019 and block grant funds, all at one time, meaning agencies would know how much they had to operate for a fifteen-month period, but there would be little room for SAPTA to rescue them, so they should budget accordingly. He concluded his report by stating that questions or concerns could be directed to him. He added that, on the treatment side, they were working with the agencies that went through the Request for Qualifications (RFQ) process, basing their projections on actual spending over the past few years. He pointed out that if an agency changed what it was certified for or what it did, its management should contact Ms. Furlong so they could try to work anything new into the budget. He explained that on the

prevention side, it would be a continuation application. He added that SAPTA would begin requiring a spending plan, which would be an estimate of what agencies would be spending on a monthly basis, so that SAPTA would not have to move money around at the end of the year. Ms. Robard asked if the plan included the women's set aside funding. Mr. Devine replied it did not—it was strictly treatment, without any of the specialty population funding.

Mr. Burt gave the Chair's report.

Mr. Burt resigned as Chair of the SAPTA Advisory Board (SAB). This led to a review of the bylaws and discussing and making recommendations on the direction of the Advisory Board based on the bylaws, which can be viewed [here](#). He reported that, according to the bylaws, the Vice Chair needed to assume the duties of the Chair until the first meeting of 2018. It was suggested that nominations for Chair be added to the October 11 or December 13 agenda, and that voting for a new Chair be done by written ballot at the February 14, 2018 meeting. He stated he would continue to run today's meeting since the Vice Chair, Michelle Berry of CASAT, was attending the meeting by telephone. He noted that he had also resigned from Ridge House and had already moved to Bentonville, Arkansas.

5. Review and Make Recommendations on the Advisory Board Bylaws

Mr. Burt pointed out that at a previous meeting there had been discussion about what membership was. He reminded them that Ms. Weaver had sent them a current membership list so they could review whether they wanted to add members to the Board.

Ms. Snyder recalled they had talked about members who had not attended meetings in a long time and that someone had been assigned to contact them to see if they wanted to continue as members. Ms. Berry stated she spoke with the members with the most absences in 2016, all of whom indicated they wanted to continue as members. Mr. Burt noted they were not in attendance at this meeting. Ms. Snyder asked if, when they voted for Chair and Vice Chair, they could determine whether those who had not met the attendance requirements as established in the bylaws should be removed. She pointed out that Article 4 subsection 6 of the bylaws required that members maintain 75 percent attendance each calendar year and that those who missed three consecutive meetings without excuse or permission from the chair forfeited their seats. Mr. Burt stated that the provision did not require a vote; those members were simply removed. Ms. Snyder agreed and added that those members should be notified and that those members who said they wanted to retain their seats but did not attend meetings should be removed from the Board. Mr. Burt asked if staff should notify those members by email. Ms. Weaver replied that a formal letter could be sent. Mr. Burt noted that the member was the agency, not an individual. Ms. Snyder pointed out that the director of Frontier Community Coalition would like to serve, but because a board member was the one listed, he could not attend. That board member had not attended a meeting in a couple of years.

Ms. Weaver suggested removal be a two-step process: 1) a letter stating that they or a member of their organization had not attended a SAPTA Advisory Board meeting since a specific date should be sent; 2) a reply to the letter would be required if they wanted to continue. The reply should give the name of the representative who would be attending meetings. If the member did not reply, SAPTA would send them a letter telling them they were removed from membership. Mr. Burt stated that step 1 occurred when Ms. Berry contacted the agencies. He asked Ms. Berry to send copies of what she did to Ms. Weaver so there would be documentation of that first step in the SAB records. Ms. Berry replied that she would include drafts of subsequent letters that had been sent in the past to members not in compliance with the 75 percent meeting attendance.

Mr. Burt asked what spots would be open when these members were removed. Ms. Berry reported that Frontier Community Coalition and Las Vegas Indian Center would be in jeopardy of being replaced. Ms. Weaver pointed out there was a provision under Article 4 subsection 7 that listed grounds and procedures for removal that needed to be followed. Mr. Burt stated that provision required a subcommittee be formed to remove an agency from the roster, but since the entire Board was meeting about it he did not think that was necessary. Mr. Devine directed their attention to the fact that Article 4 subsection 4.1 stated that to replace an organization, a nominating committee would present a replacement organization to the Board at the next regular meeting. Mr. Burt clarified that there were two forfeited agencies that needed to be replaced. He requested that a nominating committee be formed to bring forward a roster of potential agencies that could fill those slots. Mr. Robeck pointed out that the agencies on the roster needed to be funded and certified. Mr. Burt stated that, since the RFQ, the opportunities for funded agencies was much greater. He asked for volunteers to be on the nominating committee. Mr. Robeck, Ms. Snyder, Ms. Robards, and Ms. Berry volunteered. He asked that the committee meet and present recommendations at the next meeting, scheduled for October 11. Ms. Snyder was appointed chair of the subcommittee.

Mr. Burt asked if there were any other issues regarding bylaws that the Board needed to consider. Ms. Snyder brought up the question of whether there should be term limits for officers. Mr. Burt stated he thought there should be term limits for the chair and the vice chair. Two terms of two years each was suggested as the limit. Mr. Robeck agreed, as long as elections took place every two years as required by the bylaws. Mr. Burt pointed out that it is not an actionable item to change the bylaws; changes would need to be submitted 14 days prior to the October 11 meeting in order to be voted on then. The change proposed would be, "Terms of office shall be for two (2) years with a two-term limit." Mr. Devine pointed out that the requirement was for an individual to submit to such a change to a Board member 14 days prior to a meeting and that minutes of this meeting would be in writing, allowing the Board to vote on the changes at the next meeting.

Mr. Burt asked if there was anything else to discuss regarding bylaws. Ms. Snyder asked if the nominating committee could be given a list of all funded agencies. Ms. Weaver said she would send it out. Mr. Burt reminded Ms. Snyder that they had discussed maintaining a good distribution between prevention and treatment, northern Nevada and southern Nevada, and adolescent and adult agencies on the Board.

6. Discuss and Make Recommendations on the Direction of the Advisory Board

Mr. Burt asked the Board why they existed. Ms. Snyder replied that she and Ms. Ross had looked at Nevada Revised Statutes (NRS) and the Nevada Administrative Code (NAC) to see where the SAPTA Advisory Board fell, but could not find anything in NRS. In reading NAC 458, it seemed to them that this Board was needed in order to provide feedback for the block grants. Mr. Devine stated that confusion entered with the melding of behavioral health and mental health with public health. The SAPTA Advisory Board was referred to in NAC as being appointed by the Division of Public and Behavioral Health Administrator. There was a mental health advisory council that became the Behavioral Health Planning and Advisory Council (BPAC), which took over the planning function for the block grant. The SAPTA Advisory Board became the board to advise the administrator on substance use issues. It was suggested in the past that it might be better to bring these two groups together since the melding in order to use people's time better and so that the Division could address things for all of behavioral health, instead of looking at substance abuse, mental health, or co-occurring in silos. He stated the Division used the BPAC for public input on the block grant, mainly because 51 percent of its members were consumers, as required for block grant review. Mr. Devine said SAB could choose to move in the direction of combining the boards or to stay autonomous. He stated that the Division needed to do a better job of is making sure they

had all the applications and information to the Board as well as to the BPAC. Ms. Snyder asked if the Board only existed to provide advice to Division staff. Mr. Devine said that was correct.

Mr. Disselkoen added that the other function of SAB was that Advisory Board needed to approve Division criteria before it went to the Commission on Behavioral Health. Ms. Watkins said that SAB existed so that the field could have a voice and build partnerships.

Mr. Devine explained there are three ways boards were created—by statute, by executive order of the governor, or by an agency itself. SAB was created by the Division to advise and to approve changes in criteria as well as to give agencies a voice to talk to the Division in order to better collaborate. The BPAC was developed by executive order, which makes it more formal. The Commission on Behavioral Health and others were created by statute. Mr. Burt asked if SAB provided value to current leadership in the Division. Mr. Burt said he found much value in having this type of engagement with the industry. He stated he had seen this done in different ways: through meeting with an industry association or with groups such as this one. He added that at the Bureau of Healthcare Quality and Compliance (HCQC) there was a group like SAB for every provider type except hospitals. He suggested looking at everyone's time and, if there were multiple boards doing the same thing, he would want to see if boards could consolidate to do better. He added he did not want to have the SAB lose its voice, being gobbled up by a larger body. He stated that he thought there was room for more collaboration throughout all of behavioral health.

Ms. Robards pointed out that he was talking about two different levels of advisory councils—one appointed by the Division, one by the Governor. As a result, she did not know what behavioral health and substance abuse all rolled into one would look like, incorporating the members of this board into BPAC. Mr. Devine replied that many other states have combined their substance use and mental health councils. Some states have done that successfully; others have tried to do it but not been successful, leaving them with two groups that collaborate. In Nevada, technical assistance was requested on the mental health side to help the Division see if there was value in pulling groups together and how to do that. He stated he was in the process of engaging technical assistance and could have them involved in helping the Board decide what it wanted to do regarding its future.

Ms. Robards said that she thought many members of BPAC were state employees, with less representation from the field. She stated that the value of this Board was that it represented the field, while state employees would have a different perspective. Mr. Devine reminded her that BPAC was made up of state agency representation, but that the majority of the council had to be made up of consumers. Mr. Burt pointed out that it did not include people from the field; Mr. Devine agreed that it bypassed providers. He stated that BPAC struggled to get quorum at the meetings because of the size of the council. He added it might be possible to work through administration to see if the Governor would be willing to revise his executive order. He agreed that providers needed to have a venue, whether through SAB, through consolidation with BPAC, or through having representation from each council on the other's board. Mr. Burt asked if there could be a meeting with Mr. Whitley in order to talk about what a merged board would look like, with all of SAB being part of BPAC—resulting in the board being made up of more than 50 percent consumers, 25 or 30 percent providers from substance abuse and mental health. That way, the state agency representatives would not be board members, which he viewed as an inherent conflict of interest when the council talked about block grant spending and advised state agencies. If BPAC would be unwilling to make a merger, appreciating SAB and its voice, then there would be no moving forward. Mr. Devine proposed taking this to Ms. Roukie, the new Administrator, first.

Ms. Robards stated that the Board had discussed this in the past, but she felt SAB had been treated as of little value while it actually was of benefit to SAPTA, the Administrator, the Governor, and

to consumers—as SAB represents them. She added that she did not see the state viewing both groups as of equal value. She said she did not want to see the voice of SAB or its members who represented their unique consumers lost because someone perceived things should look different.

Mr. Burt stated a meeting between a SAB representative and Ms. Roukie would be scheduled. His next question for the Board was whether they were getting the information they needed from Mr. Devine. He suggested they were not. He held up a copy of the handout Mr. Devine had given them and stated that each person there was probably only looking at the lines that pertained to their agency. He wondered if the allocation of resources made sense to all of them, both prevention and treatment field providers, and if they were advocating for the people who were still suffering. He pointed out that SAB members had not insisted on giving that voice in these meetings because they were still fighting for those same resources as individual providers. Ms. Watkins agreed. She pointed out that 90 percent of their discussions at meetings have to do with treatment, very little having to do with prevention.

Mr. Devine stated that SAPTA was not using SAB appropriately. He said that, ideally, they would bring data and information to the Board for input, then work with SAB to determine the direction SAPTA should be headed so that SAPTA served the public in the best way. Mr. Burt asked him if he had the capacity to use the Board that way. Mr. Devine replied that was the reason they had not been bringing the data, but that they were working on it so that they could do that. Mr. Burt asked if SAB could provide the needed feedback if it merged with BPAC. Ms. Robards said she did not think so. She thought SAB would be squashed like a bug and that they would not be heard. She added that the information, background, history, statistics, and actual real-life experiences were being utilized by SAPTA the way they should be. She used the three outstanding policies SAPTA was working on as an example. She suggested that SAPTA bring the ideas of what they were thinking about doing to SAB for input before formalizing policy instead of circulating policy via email without any background. She pointed out there was a disparity in education, experience, and types of clients. She added that she thought they were being utilized more now than they had been for a very long time. Ms. Dalluhn seconded everything Ms. Robards said. She stated that providers had a lot of information that could be shared with SAPTA. As an example, she said she received two emails from SAPTA asking for data, one of which requested data from 2013. She found it unreasonable that anyone would request 2013 data from an agency mid-way through 2017—that data would not be available, much of it was not even collected in 2013, and SAPTA had likely had that data in the Health Information Portal (HIP).

Mr. Burt asked what direction the Board wanted to take. He suggested setting a meeting with Ms. Roukie to explore the subject, advising Mr. Devine to create more content in his report and to make more inquiry into the experience and education of providers. Ms. Dalluhn suggested more collaboration—working together rather than against each other. Mr. Burt asked if the meeting with Ms. Roukie should be postponed while SAB attempted to redefine itself. Ms. Pearce stated she would like Mr. Devine to tell SAB what SAPTA needed from SAB, at the same time putting together what SAB hoped to accomplish before meeting with Ms. Roukie. She suggested that SAB explain to the Governor's Office what SAB did and what it could do, in both treatment and prevention.

Ms. DeCarlo pointed out that the bylaws did not mention advising, assisting, or working in collaboration with SAPTA—they talked about accessibility to treatment and reducing abuse. She also suggested that SAB could remain in place, with the Chair and the Vice Chair sitting on BPAC. Ms. Robards stated that communication had improved over the past several months. Mr. Burt thanked Mr. Devine for that change. Mr. Devine recapped that there was value in SAB, and that SAPTA needed to redefine how to use SAB. Mr. Robeck stated there should be an idea of what

SAB should be doing. He said this Board was the one place providers had a voice and that it was a good tool. He asked who had power and influence in the state, because SAB wanted to have its voice heard. He wondered if SAB could have a standing presentation at one of the behavioral health boards or if SAB could start directing policies that could go to the Legislature. He pointed out that SAB was made up of smart, active people, so would not want to give it up. He suggested that SAB figure out what it is they want to do, not leaving that responsibility with Mr. Devine. He pointed out that the multi-year plan for SAPTA was something he did not think was handled correctly. He mentioned that it would have been better if it had started with SAB; he felt that the way it was done caused SAB to lose input. Mr. Burt explained that he meant that SAB should get together to explore and put into writing what SAB believed the greater expectations of the group were, although some of that would fall on Mr. Devine. Mr. Burt stated that the expectations would include data; policies; resource distribution, including budgets; legislation; merging of boards; and feedback from clients served—from focus groups and satisfaction surveys. Mr. Firestone suggested being sure that the group is getting the voice of all consumers, as there were many substance abuse providers and prevention providers and only some of them show up for the meetings. Mr. Dixon stated the group needs to become focused on what SAB was trying to do with the resources available. Mr. Burt pointed out that there were public meetings in developing the strategic plan, with dozens attending across the state attending. Mr. Devine stated that SAB meetings are the only ones he attended that had equal representation of prevention and treatment, which could lead to more collaboration between prevention and treatment. He committed to drafting his plan of expectations for the group, and asked SAB to draft its plan, then the two could be pulled together to make SAB what it needed to be. Mr. Burt suggested members bring their lists to the next meeting and said discussion of that would be an agenda item for that meeting.

7. Update on the Utilization Management Subcommittee

Mr. Disselkoen gave the update on the Utilization Management Subcommittee.

The Subcommittee met on August 8. He stated that the feedback was very good from the Subcommittee's seven members and members of the public, indicating there was interest in this. He explained that one of the reasons this was developed was the relationship between SAPTA and the providers had been contentious and this could improve that. He reported that the Subcommittee would meet again before a list of recommendations related to the utilization management process policy could be prepared for SAB. He mentioned that 19 items were discussed at the meeting—either recommendations or topics that needed further clarification and that he would document them. He stated that the Subcommittee would need to meet again to finalize the recommendations to be presented at the next SAB meeting.

8. Public Comment

There was no public comment.

9. Adjourn

The meeting adjourned at 10:24 a.m.