

**COMMISSION ON BEHAVIORAL HEALTH
DIVISION OF CHILD AND FAMILY SERVICES
SEPTEMBER 14, 2017
MINUTES**

VIDEO TELECONFERENCE MEETING LOCATIONS:
NORTHERN NEVADA CHILD AND ADOLESCENT SERVICES,
2655 ENTERPRISE ROAD, RENO, NV

AND

DIVISION OF CHILD AND FAMILY SERVICES,
4126 TECHNOLOGY WAY, SMALL 3rd FL CONFERENCE ROOM, CARSON CITY, NV

AND

SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES
6171 WEST CHARLESTON BOULEVARD, BUILDING 8
LAS VEGAS, NV

COMMISSIONERS PRESENT AT THE RENO LOCATION:

Barbara Jackson
Pam Johnson

COMMISSIONERS PRESENT AT THE LAS VEGAS LOCATION:

Lisa Durette (by phone)
Noelle Lefforge
Asma Tahir

COMMISSIONERS ABSENT:

Viki Kinnikin
Lisa Ruiz-Lee
Asma Tahir

STAFF AND GUESTS:

Kelly Wooldridge, Division of Child and Family Services
Kevin McGrath, Division of Child and Family Services
Kristen Rivas, Division of Child and Family Services
Priscilla Colegrove, Division of Child and Family Services
Kelsey McCann-Navarro, Division of Child and Family Services
Susanne Sliwa, Deputy Attorney General
Michelle Sandoval (phone), Division of Public and Behavioral Health
DuAne Young, Division of Health Care Financing and Policy
Stephanie Woodard, Division of Public and Behavioral Health
Rique Robb, Aging and Disability Services Division
Morgan Alldredge, Nevada Board of Pharmacy
Charlene Frost, Nevada PEP
Dan Musgrove, Clark County Children's Mental Health Consortium

CALL TO ORDER AND INTRODUCTIONS

Commissioner Lefforge called the meeting to order at 8:32 A.M. Roll call is reflected above; it was determined that a quorum was present.

PUBLIC COMMENT

Commissioner Lefforge called for public comment. There was none.

CONSENT AGENDA

APPROVAL OF MINUTES AND AGENCY REPORTS

MOTION: Commissioner Tabitha Johnson moved to accept the minutes from the July 14, 2017 meeting.

SECOND: Commissioner Pam Johnson.

VOTE: The motion passed unanimously.

MOTION: Commissioner Tabitha Johnson moved to accept the agency reports presented for this meeting.

SECOND: Commissioner Durette.

VOTE: The motion passed unanimously.

AGING AND DISABILITY SERVICES DEPARTMENT (ADSD) UPDATE

Rique Robb, Deputy Administrator for Children's Services of the Aging and Disability Services Department asked the Commissioners what kind of reporting they are looking for so ADSD can make sure the right person attends the meetings and Commissioners have adequate reporting. Alex Cherup is no longer with ADSD, so she does not know what he planned to report. ADSD is in a state of transition. Their new administrator is Dena Schmidt, and Lisa Sherych replaces Cara Paoli. Ms. Robb is the newest team member. She is happy to gather any information the Commission wants.

Commissioner Jackson suggested some old minutes be made available so ADSD could review them to see what they reported on in the past.

Commissioner Lefforge said in general the Commission gets agency updates about what initiatives are being worked on and how things are going.

Kelly Wooldridge said it has always been a combined effort of ADSD, DCFS, and DPBH. Cara Paoli is replacing Ryan Gustafson as the Deputy Administrator over DCFS - Children's Mental Health. Ms. Paoli can talk to Ms. Robb about reporting to the Commission.

UPDATE ON THE CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINICS (CCBHC)

Stephanie Woodard, Division of Public and Behavioral Health (DPBH)

- They were able to successfully certify all of the prospective CCBHCs back in May and June. They have four CCBHCs with five sites including Bridge Counseling Associates

and WestCare Nevada in Clark County. WestCare also has a clinic in Reno that is certified. They also have New Frontier Treatment Center in Fallon and Vitality Unlimited in Elko.

- Kicked off the demonstration program July 1, 2017. It is scheduled to run for two full years. They are closely monitoring how the CCBHCs are doing as they are implementing and they have planned site visits for October and November 2017 to look at maintenance of certification criteria and emphasize the implementation of evidence based practices (EBP). They will do a much more thorough clinical review. They continue to connect the CCBHCs to resources to make sure they have staff adequately trained on EBP. There has been a lot of coordination with DCFS – Children’s Mental Health on this.
- In the next two years they will look to maintain sustainability as a DPBH program.
- They will develop incubator programs with focus in the rural areas, including rural clinics in order to expand the number of CCBHCs ready in July 1, 2019.

DISCUSS AND ADVISE THE DIVISION OF CHILD AND FAMILY SERVICES (DCFS) CONCERNING SUBAWARDS FOR THE VICTIMS OF DOMESTIC VIOLENCE FEES

Priscilla Colegrove introduced the statutes that direct them to present this to the Commission on Behavioral Health. It is under NRS 217(400) to 217(460) and NRS 217(450) says the Commission on Behavioral Health will advise DCFS concerning grant awards.

A handout was provided related to the funding and the calculation of the total awards broken down by county. They calculated the award so the amount per county with 15% of the total collection to go towards an agency that provides specific sexual assault program. The second page shows the agencies that were awarded and what county they were in. The awards were determined in a Request For Proposal (RFP) process. It is supposed to be an annual application due by April 1 and awards are supposed to be out by May 1. DCFS will come back to the Commission in the spring to present the awards prior to the awards next year. Does this format work for the Commission?

Commissioner Lefforge asked how the agencies are reporting on the outcomes of grant implementation. Ms. Colegrove said they can put that information together. They report through an online data collection system monthly and she can pull the reports however the Commissioners want them. There is a bi-annual report. DCFS can present that and plans to have it done before December 31, 2017.

Commissioner Lefforge said that would be helpful. She would be interested in hearing how the money is being used and if it is producing effects.

MEDICAID UPDATE AND CHANGES

DuAne Young gave the following update:

- Medicaid must comply with the Mental Health Parity and Addictions Act by October 1, 2017. It was created in 2008 to look at parity across both sides of the plan. Medicaid

worked during the last year to compare everything on the med-surgical side with the behavioral health side. They are preparing a report for CMS for October 1, 2017. Two policies had too hard limits so they will hold a policy workshop. Notice has gone out for September 20, 2017 to look at removing the hard limits. Changes will go into effect retroactively.

- They are working on the Opioid Response Grant. It will go to RFA. Medicaid is looking at creating sustainable models for opioid treatment. Received guidance and feedback on how to build a sustainable model.
- They are hosting in regards to Statewide Youth Treatment a health care financing workshop in conjunction with SAPTA to focus on ways to create sustainable funding for those services that are not medically necessary. The two planned workshops will be held to engage providers in the areas of behavioral health and also not-for-profit services to look at ways to revolutionize health care funding.
- Their Behavioral Health Unit is participating in the Governor's Commission on Addressing Rural Behavioral Health to create a work plan to increase looking at ways to leverage other providers such as community health workers, peer to peer, target case management, and telehealth in our rural areas. That is a one year long task force to address the disparities in our rural areas.
- Will hold a workshop in October to look at their policy around gender reassignment surgery to get those services approved. The Nevada Legislature approved and gave this budget authority despite the injunction.

UPDATE ON SUICIDE SAFETY IN TREATMENT ENVIRONMENTS AND RECOMMENDATIONS OF THE USE OF A NATIONAL STANDARDIZED SAFETY CHECKLIST

Kristen Rivas reported that Melissa Faul and two other representatives from the Executive Committee to Review the Death of Children could not attend the meeting today. Ms. Faul sent Ms. Rivas an email about research that she did and Ms. Faul will be at the next meeting to give an update.

Ms. Faul looked at the Summary of Reviews of Governmental and Private Facilities for Children 2015-2016. They surveyed 61 children's facilities. Commissioners asked for that number. The reviews were unannounced and the purpose of the review was to determine if the facilities adequately protected the health, welfare, and safety of the children.

DISCUSSION AND RESPONSE TO LETTER FROM MONTEVISTA HOSPITAL REGARDING THEIR SECLUSION AND RESTRAINT PROTOCOL

Commissioner Lefforge said this letter was a response from Montevista Hospital explaining some changes they had made to their process and correcting that they do not use mechanical restraints.

DISCUSSION AND REPORTING REQUIREMENTS FOR THE SUBSTANTIVE STATUTES FOR THE COMMISSION ON BEHAVIORAL HEALTH

- **Regional Consortia (Washoe, Clark, Rural)**
NRS 433B.335 Sections 1,2,3,6
NRS 433-534
NRS435.610
- **Behavioral Health Region Policy Boards**
(Norther, Washoe, Rural, Southern)
NRS 433 Section 2-7
- **AB366**
NRS 433.314, 4(b)
- **AB 457**
NRS 641, 641A, 641B, 641C

Susanne Sliwa referred to the handout which includes a flowchart and information about reporting requirements for this Commission, the Mental Health Consortia, and the Behavioral Health Regional Policy Boards.

AB366 was passed this past legislative session. It creates four behavioral health regions in the state and mandates a regional behavioral health policy board. This board will advise the commission and DPBH regarding behavioral health needs in that region. Those boards will be required to give an annual report to the Commission regarding the behavioral health needs of the region. The bill amends NRS 433.314 and adds to the existing reporting requirements to the Commission. Additionally, in AB366 it requires the Commission for their letter to the Governor to coordinate with the policy boards and there is some specific information that must be in the letter which is listed in the handout.

Julie Slabaugh will be at the Commission's meeting tomorrow to discuss AB457 where there are tasks for the Commission. Ms. Slabaugh is working with DPBH to see how that will work so the efforts can be coordinated.

Commissioner Lefforge said it is her understanding that AB366 gives the reporting duties similar to the other agencies that report to the Commission to the Regional Board.

DISCUSSION AND DECISION ABOUT ANY CHANGES REGARDING THE COMMISSION'S RESPONSIBILITIES INCLUDING THE STRUCTURE OF THE REGIONAL MENTAL HEALTH CONSORTIA'S UPDATES TO THEIR 10-YEAR PLANS

- **The Consortia Have Been Good in Advocating Legislatively for Service Delivery but the Commission Has Not**
- **How Do We Engage in that Dialog?**

- **How is the State Spending Our Money, Seeing Improved Outcomes?**
- **How Do We Advocate for That on the Same Side as the Consortia Instead of Being a Passive Body?**
- **Why Have We Not Had Any Success in Certain Areas?**

Commissioner Ruiz-Lee was not in attendance, so this agenda item was tabled until the next meeting.

UPDATE ON THE CHILDREN'S SYSTEM OF CARE BEHAVIORAL HEALTH SUBCOMMITTEE

Kevin McGrath reported:

- SOC is serving 193 children and stabilizing around 200 children.
- Have completed our fiscal year 2018 budget and are going to continue to fund all our current programs. Increased funding for United Citizens Foundation which does school-based health centers in southern Nevada.
- Increased funding for the Enliven program for First Episode Psychosis staffing.
- Added a rural intensive outpatient program through Pacific Behavioral Health Program and have our positive behavioral intervention support contract for Desert Willow Treatment Center and correctional facilities.
- Funding training at several conferences for their sub grantees and in child and parent psychotherapy in north and south.
- Working with Nevada Partnership for Training which will be SOC's web portal for our trainings. People can register whether in state or outside and can get CEUs.
- Working with Nevada Online Professional Development Center to use their site for a platform for webinar based training particularly for people who cannot make the trainings in person.
- Completed LGBT trainings by Holly Reese of The Center which were held in Las Vegas and Reno and teleconferenced to rural sites. It was a train the trainer program so SOC now has staff to offer this training.
- SOC retreat is being planned on November 3, 2017 at the Reno Convention Center. Many stakeholders were invited to the retreat. Let him know if you are interested in attending. Working with SAMHSA to do get a facilitator for the retreat.
- Working with Medicaid to make changes to support SOC such as a waiver or state plan amendment. SAMHSA is providing technical assistance in this area.
- SOC training coordinator Tricia Woodliff resigned from her position and we are currently hiring for that position.
- Wraparound training is in full implementation and coaching and supervisor of staff and sub grantees has begun and so did initial fidelity tools.
- Mr. McGrath gave a detailed report of the work that has been done by the three SOC workgroups.

DISCUSSION AND DECISION TO CONTACT MEDICAID AND INSURANCE COMPANIES ABOUT HEALTH CARE PROVIDER'S ACCESS TO HEALTH CARE INSURANCE PANELS

Commissioner Lefforge said she presented this agenda item at the last meeting and does not have any updates at this time.

PLANNING FOR NEW COMMISSION CHAIR AND REPLACEMENTS FOR UPCOMING OPEN POSITIONS

- **Chair Position Expires January 2018**

Commissioner Lefforge explained that Commissioner Kinnikin will have served her two four-year terms as Chair in January 2018. She asked if any Commissioners are interested in the Chair position. There was no response. Commissioner Lefforge said she would be willing to serve as Chair if that is what it comes down to.

Ms. Sliwa said she would be more comfortable if a nomination and vote for officers was taken at the next meeting. This will need to be on the agenda of the next Commission meeting. DPBH has the next meeting on November 17, 2017.

- **Possible Nomination of Vice-Chair**

This item was not discussed.

- **Vacant Commission Positions**

- **A physician, other than a psychiatrist, licensed to practice medicine in this State who has experience dealing with intellectual disabilities, from a list of three candidates submitted by the Nevada State Medical Association**

Commissioner Lefforge asked if the Nevada State Medical Association has been notified that they need to provide the list. Kristen Rivas said DPBH usually handles the applications. She can work with whomever replaces Pat Wendell on this.

- **A person who has knowledge and experience in the prevention of alcohol and drug abusers through a program or service provided pursuant to chapter 458 of NRS, from a list of three candidates submitted by the Division of Public and Behavioral Health of the Department**

Commissioner Lefforge said her understanding is we do not have a list for this position either. Ms. Sliwa said the Governor appoints the Commissioners from the lists that are provided. The Governor also appoints the Chair. Commissioners can vote on their choice of Chair and then it is submitted to the Governor for formal appointment.

Commissioner Lefforge asked for ideas on how to recruit for these positions.

Commissioner Tabitha Johnson suggested Dr. Raja who is a Pediatric Neurologist in Las Vegas. Commissioner Lefforge asked Commissioner Tabitha Johnson to reach out to Dr. Raja.

Commissioner Lefforge said it would be helpful to reach out to the organizations that are responsible for delivering the lists of candidates so we can get these positions filled.

Commissioner Pam Johnson said it was her intention to step down as Chair of the Children's System of Care Behavioral Health Subcommittee as of January 2018. Her term as Commissioner ends in June 2018 so she thought someone could transition in January as Chair of that Committee. It was decided to hold that election at the next meeting as well. That position should be held by a Commissioner. Commissioner Lefforge asked if any Commissioners were interested in holding the position. There was no response it will be on the next agenda.

ANNOUNCEMENTS

None

DISCUSSION AND IDENTIFICATION OF FUTURE AGENDA ITEMS

1. Standard agenda items to include the update on Suicide Safety and Treatment Environments.
2. Discussion and Decision about any Changes Regarding the Commission's Responsibilities Including the Structure of the Regional Mental Health Consortia's Updates to their 10-Year Plan.

PUBLIC COMMENT

None.

ADJOURNMENT OF PUBLIC SESSION

Commissioner Lefforge adjourned the meeting at 9:22 am.