

DPBH COMMISSION ON BEHAVIORAL HEALTH

MINUTES

March 16, 2018

MEETING LOCATIONS:

Division of Public and Behavioral Health

4150 Technology Way, Room 303

Carson City, NV

Northern Nevada Adult Mental Health Services

480 Galletti Way, Bldg. 22, Sparks, NV

Rawson Neal Hospital

1650 Community College Drive, Training Room, Las Vegas, NV

COMMISSIONERS PRESENT:

Barbara Jackson, Sparks, Valerie Kinnikin, Las Vegas, Lisa Durette, Vice-Chair- Las Vegas, Asma Tahir, phone, Noelle Lefforge, Ph.D., Chair-Las Vegas, Tabitha Johnson, Las Vegas, Lisa Ruiz-Lee, Las Vegas, Denise Everett, Sparks

Carson City:

Julie Kotchevar, DPBH, DuAne Young, DPBH

Sparks:

Christina Brooks, NNAMHS, Tom Durante, LCC, Patricia Romo-Macaluso, NNAMHS, Betsy Neighbors, DPBH, Kyle Devine, DPBH, Sandra Lowery, SW Board, Paula Berkley, SW Board

Las Vegas:

Joanne Malay, SNAMHS, Susanne Sliwa, DAG, Ellen Richardson-Adams, SNAMHS, Rose Park, DPBH, Stan Cornell, Stein

Phone:

Julian Montoya, SRC, Lisa Sherych, ADSD, Julie Slabaugh, DAG, Kristen Rivas, DCFS, Neena Laxalt, Psychology Board, Agata Gawronski, BoE ADGC, Lea Cartwright, Nevada Psychiatric Association, Megan Messerly, Nevada Independent

Chair Lefforge called the meeting to order at 8:32 a.m. Roll call is reflected above. It was determined that a quorum was present. Introductions were made at all three locations.

PUBLIC COMMENT:

There was no public comment.

Approval of the Minutes November 17, 2017

Action: A motion was made by Dr. Durette, seconded by Ms. Kinnikin and passed to accept the minutes of November 17, 2017.

Commission on Behavioral Health Chairperson and Update of Division of Public and Behavioral Health

Chair Lefforge announced her appointment as Chairperson.

Dr. Kotchevar announced she is the Division Administrator and DuAne Young is the Deputy Administrator over Clinical Services.

Consideration and Possible Approval of Agency Directors' Reports

Lake's Crossing Center (LCC): Mr. Durante reported on staff vacancies at LCC. He informed they have good news in recruitment. LCC has decided to downgrade the Forensic Specialist position temporarily to interview and hire as a Mental Health Technician, giving the candidate 11 months to prepare to become a Forensic Specialist I. There are no changes to programs. The population of individuals eligible for Conditional Release continues to grow. The Division will need to look at increasing funding to explore Conditional Release for those individuals. There is a growing demand for outpatient Competency Evaluations.

Chair Lefforge inquired if, with the underfill recruitment initiatives, individuals hired will end up going elsewhere for higher paying jobs after training.

Mr. Durante informed it is always a risk. The Division is hoping for an increase in pay for Forensic Specialists in the next legislative session. During the interviews for the MHTs, LCC is emphasizing on the individual's career goals.

Chair Lefforge inquired if it was possible to have the candidate sign a contract upon agreeing to go through the training.

Mr. Young informed the Division does not have the ability to force employees to a contract.

Northern Nevada Adult Mental Health Services (NNAMHS): Ms. Brooks reported NNAMHS continues to struggle recruiting LCSW's, Psychologists, Nurses, and Psychiatrists. Residential housing and supportive living services continue to do inspections and prepare for the transition with inspections and certifications to HCQC.

Southern Nevada Adult Mental Health Services (SNAMHS): Ms. Malay reported filling licensed professional positions continues to be a challenge. SNAMHS continues to stay steady with approximately 88 inpatient civil beds and a waiting list of between 40-60. Ms. Richardson-Adams informed the report was reorganized to clarify between urban and rural medication clinics.

Chair Lefforge requested an update on outpatient program concerns and what is being done. Ms. Richardson-Adams informed, for Southern Nevada there is an audit investigation happening at the

Division level and there are corrective action plans for each specific address. Corrections have taken place. There have been some providers that have chosen to close.

Dr. Kotchevar reported 13 homes were closed in the South and 5 in the North. Responsibility has been transferred for the regulatory oversight to HCQC. Other issues that arose from the analysis of the homes are being worked on, including doing better initial assessments and providing a better array of services. The legislature is looking if there is a need for statutory change to broaden the regulatory responsibilities.

Ms. Kinnikin inquired on housing shortages. Dr. Kotchevar informed, appropriate housing was obtained for the individuals who needed to be relocated. There is an interim committee on Affordable Housing and the Division has been participating in to find solutions.

Stein: Mr. Cornell reported recruiting is an ongoing process. There have been 8 Forensic Specialist I's hired. Currently, there are 24 vacant forensic positions. The waitlist is variable. Phase One of the Forensic Specialist Sponsorship Program has been implemented. It is the pairing of Forensic Specialists with at least one client for daily activity support, treatment participation and one on one time. The Token Economy component of the Treatment Mall has been revised to now include two phases of positive behavioral incentives. Stein continues to focus on the reduction of seclusion and restraints used through a review and debriefing process. Due to difficulties inherent to the recruiting process, Stein and SNAMHS Human Resources has expanded the MHT/FS underfill recruitment initiatives. It will allow Stein to bring on MHTs who meet the physical fitness requirements and pass the background check to be hired as a trainee under the supervision of forensic staff. Each MHT underfill will have one year to acquire the knowledge, skills, and abilities necessary to promote to a Forensic Specialist I.

Sierra Regional Center (SRC): Mr. Montoya reported there are 8 staff vacancies. The AB 307 pilot program continues to operate. Increase in rent continues to be a housing concern. There is a possibility of provider increase and administrative staff is working on it.

Desert Regional Center (DRC): Ms. Sherych reported there continues to be difficulties in filling positions for Nursing and Developmental Technician Staff for ICF. DRC is currently working with RRC to transfer the supervision of rural counties (Lincoln, Nye, Mesquite) to the South. There are enough individuals with open cases in those areas to have designated full-time staff. DRC continues to collaborate with DPBH on shared cases. ICF has entered into a Systems Improvement Agreement with CMS.

Rural Regional Center (RRC): Ms. Williams reported recruiting continues to be difficult due to competition with county and mining positions, which typically have higher pay. There has not been a waitlist this fiscal year. The most significant program change is what Ms. Sherych discussed earlier in the meeting.

Rural Services: Mr. Young reported for Rural Services. Rural Services has had difficulty filling Psychiatric Nurse positions. Rural Services continues to use the options of tele-health and expand the services.

Rural Services continues to develop partners with community partners. The quality assurance plan for Medicaid has been turned in.

Dr. Durette inquired on the outpatient waiting list if it is like the SNAMHS outpatient for the patients that are already scheduled, and they miss their appointment.

Mr. Young informed it is similar. The waiting list in the rural areas is slightly longer due to availability of staffing and workforce is more exacerbating than at SNAMHS.

Action: A motion was made by Dr. Durette, seconded by Ms. T. Johnson and passed to accept the Agency Directors' reports as submitted.

Consideration and Recommendation of Proposed Regulation of the Board of Psychological Examiners, LCB File No. R133-17

Ms. Laxalt informed it is a resubmittal from 2016 which was LCB File Number R128-14 and was not codified. It has been resubmitted without the Behavioral Health Analysts. It aligns the NACs with the NRS's.

Action: A motion was made by Ms. Kinnikin to approve, seconded by Ms. T. Johnson and passed to recommend approving the proposed regulations.

Seclusion and Restraint Report

Mr. Young reported there was a spike in January 2017 and again in December 2017 for the NNAMHS restraint data. The spikes reflected are due to the onset of summer and winter as well as the acuity level of the clients. NNAMHS is well below the state mean and below the national average for seclusion data. SNAMHS reflects spikes between May and June and towards the end of the year for restraint data. SNAMHS is significantly higher than NNAMHS for overall use of restraints and seclusions. The average length of stay for SNAMHS is a little shorter than NNAMHS. There has been a rise in the average length of stay for Lake's Crossing and Stein in the summer. The average number of restoration clients is higher.

Local Governing Body Reports

No report on the Local Governing Board for Northern Nevada Adult Mental Health Services.

Ms. Malay reported on the LGB for SNAMHS. Mr. Cornell was introduced as the Agency Manager for Forensics at the last meeting. The medical bylaws will be presented at the next meeting. The LGB requested for outpatient to report on the residential situation and for clarification on data reports that are sent to the local governing board.

Chair Lefforge inquired who sends out the seclusion and restraint reports for the LGB meetings. The SNAMHS LGB is currently receiving reports from Lake's Crossing and they do not attend the meetings to receive any feedback. Mr. Young informed a report could be included or have a representative available at the meetings to answer any questions. Mr. Young stated the commission members can inform Krystal

Castro what local governing body they are a part of, to ensure the members receive the appropriate reports. Chair Lefforge asked Ms. Castro to work with Ms. Everett and inform what the local governing body is. The commission members, part of SNAMHS LGB are Chair Lefforge, Ms. Kinnikin, Ms. T. Johnson, Dr. Durette, Ms. Ruiz-Lee, Ms. Tahir. Ms. P. Johnson and Ms. Jackson are part of the Northern Nevada LGB.

No report on the Local Governing Board for Lake's Crossing Center.

Reports Provided to Commission in Relation to AB457

Chair Lefforge stated she wants to ensure the licensing boards understand the workflow and how to get the information they need the Commission to review.

Ms. Berkley, representing the Social Work Board, stated the Boards have not received anything from the Commission indicating what process the Commission wants. She had requested to have a meeting with staff in the last Commission meeting, to discuss the bill and setup a process. The bill does not ask the Commission to approve regulations. It asks to make recommendations as to the advisability of adopting, amending, or repealing the regulations.

Ms. Kinnikin stated it was previously discussed, everything would go through Division administrative staff and filter through the Commission.

Chair Lefforge stated it was agreed this would be a standing agenda item at all meetings, both DPBH and DCFS, to be able to respond in a timely manner. If the Boards submit to either Division, the Divisions can work together to decide if it will be ok to make it on the next agenda and if not, then inform the Commission to possibly schedule an additional meeting. Chair Lefforge asked Ms. Rivas and Ms. Castro if that sounded reasonable. Both agreed it was reasonable.

Update on Substance Abuse Prevention and Treatment Agency

Mr. Devine reported an analysis of the Bureau's structure which was completed by the Center for Applied Substance Abuse Technology from the University of Nevada, Reno. The analysis and other factors were utilized to reorganize the Bureau. Staffing is now aligned to match the newly created Regional Behavioral Health Policy Boards and the Regional Behavioral Health Coordinators. Two teams have been developed which include two treatment analysts and one prevention analyst. The Bureau is implementing an electronic tracking system for reimbursements and it will be piloted in April. Within the new structure, the Bureau has a quality assurance unit which monitors internal and external quality. The policy book draft is completed and hoping it will be finalized before the next meeting. The centralized data repository is on track and should be operational by May. It will allow all providers to upload required data to the State. Within the new Division Criteria, all certified providers are now required to provide data to the Bureau. The Bureau is actively working on a communication and implementation plan as to how certified and non-funded providers will submit data. The certification process is moving to the electronic licensure system and scheduled to have all certifications included in the system by September. Quest Counseling and The Ridge House were awarded the Adolescent Capacity Building Sub grant. With the mentioned improvements, the Bureau is in compliance with most, if not all federal regulations as well as state regulations currently.

Update on Aging and Disability Services Division

Ms. Sherych reported for Dena Schmidt. ADSD is focusing on going from an Elder Protective Services to Adult Protective Services Program within Nevada. Nevada is one of the states without an Adult Protective Services Program. ADSD is in the process of meeting with various stakeholders to determine if and how they can create this type of program. ADSD is working with the Data Analytics Team through the Director's Office to pull data to determine the potential caseload. The vulnerable persons, NRS 200.5091, will be followed. The current Elder Protective Services focuses on individuals over the age of 60. ADSD wants to develop a program that would meet the ages of 18 through the rest of the lifespan age groups.

Policies

The following policies were presented by Ms. Park:

- A 1.1- Policy Development and Review Process
- A 5.1- Clinical Services Branch Division Level II Incident Report Management and Closure Process
- A 7.0- Travel Safety: Motor Pool, Agency Owned and Private Vehicles
- A 7.2- Healthcare Professional Licensing Requirement
- A 7.3- Prevention and Control of Legionella in DPBH Facilities
- CRR 2.002 Denial of Rights in Civil and Forensic Clients
- CRR 1.2- Health Care and Psychiatric Advance Directives
- CRR 1.7- Trust Fund Management for Consumers in Residential Placements
- FS 3.0- Nevada Disability Advocacy Law Center (NDALC) Visitation in Forensic Facilities
- HR 2.0- Employee Use of Personal Adaptive Equipment in Client Areas
- SP 1.16- Mental Health Court Program
- SP 3.1 Involuntary Administration of Medication in Civil Clients
- SP 3.6- Psychotropic PRN Medications (Recommended for archive)
- SP 4.18- Admission Criteria and Process for Consumer Admission
- SP 4.56- DPBH Communicable Infectious Disease Policy
- SP 4.61- Utilization Management
- SP 4.078- Generation of Medication Savings

Policy A 1.1, references and definitions were misspelled in 4.0 and 5.0.

Policy SP 3.1 did not list the number of hours in 4.2, Emergency Treatment. It was suggested the old number of 48 hours would be used to approve the policy.

Action: A motion was made by Ms. Kinnikin, seconded by Ms. Ruiz-Lee and carried to approve the policies with the suggested corrections except for A 7.2 Healthcare Professional Licensing Requirement.

Future Agenda Items

- Definition of SMI

Public Comment

There was no public comment.

The DPBH Commission on Behavioral Health meeting was adjourned to the Executive Session at 10:39 a.m.