Chair Lefforge called the meeting to order at 8:31 a.m. Roll call is reflected above. It was determined that a quorum was present. Introductions were made at all three locations.

Chair Lefforge welcomed the new commission member, Dr. Melvin Pohl.
Public Comment
There was no public comment.

Approval of the Minutes March 16, 2018
Action: A motion was made by Dr. Durette, seconded by Ms. Kinnikin and passed to accept the minutes of March 16, 2018.

Consideration and Possible Approval of Agency Directors’ Reports
Lake’s Crossing Center (LCC): Mr. Durante reported six Forensic Specialist positions were filled. The Start Now Groups will be added which is a cognitive behavioral approach working with individuals with criminogenic thinking. LCC is working with the Division to come up with an evacuation plan. The agency is concerned with the ongoing numbers of long term commitments.

Northern Nevada Adult Mental Health Services (NNAMHS): Ms. Brooks reported NNAMHS continues to have difficulty with recruitment for social work, psychology, and nursing. The Community Based Living Arrangement (CBLA) certification process moved over to Healthcare Quality and Compliance (HCQC) the last quarter. Affordable housing continues to be a major concern. NNAMHS took over the ENLIVEN program on May 1, 2018.

Southern Nevada Adult Mental Health Services (SNAMHS): Ms. Richardson-Adams reported the Mobile Outreach Safety Team was approved by the City of Las Vegas Council and began May 1st. HCQC has taken over the certification process for CBLA homes. SNAMHS is expanding for Harbor West and will be on campus.

Stein: Mr. Cornell reported there have been nine Forensic Specialist I positions filled. Stein is moving into phase two, the client advocate role, of the Forensic Specialist Sponsorship Program. A go live date of June 1st has been set for implementation of changes for the Token Economy component of the Stein Treatment Mall. Stein continues to focus on the reduction of seclusion and restraints. Stein Leadership is recommending the formation of an oversight committee to review all incidents involving seclusion and/or restraint.

Sierra Regional Center (SRC): Mr. Montoya reported there are eight staff vacancies. SRC continues to work with the AB 307 pilot program. Affordable housing continues to be an ongoing issue.

Desert Regional Center (DRC): Mr. Caver reported DRC has difficulty filling psychologist and nursing positions. Mr. Caver informed, for the record, the waiting list of zero on the report provided, for Respite is incorrect. Housing is also an issue due to increased prices, low inventory and competition amongst providers. A new provider from Colorado has completed all the requirements to become a provider and the Quality Assurance department is working with them on the contract piece.
Rural Regional Center (RRC): Ms. Williams reported recruiting continues to be difficult due to counties paying higher for equivalent positions. The most significant program change is the hiring of positions in Pahrump and Mesquite.

Rural Services: Ms. Gerber-Winn reported they are constantly recruiting and hiring for vacancies. Resources for clinical supervision will be something to concentrate on to allow new employees to have the ongoing education they require for clinical licensure. Rural Services continues to focus on all levels of staff for training and procedures. They also continue to work on increasing the capacity for tele-health services.

Action: A motion was made by Ms. Kinnikin, seconded by Ms. P. Johnson and passed to accept the Agency Directors’ reports as submitted.

Seclusion and Restraint Report
Mr. Young reported an agency report for NNAMHS was ran which reviewed the acuity level of clients and incidents. There was an overall higher acuity level of clients with LOCUS scores. A couple of practices have been implemented, such as, ensuring staff are familiar with the recovery model and establishing procedures to address the higher acuity level of clients. Staff safety is a great concern. The Division wants to ensure a safe environment for clients and staff.

Chair Lefforge expressed concern regarding SNAMHS nearing or exceeding the national mean rates.

Mr. Young replied there have been several incidents of violent clients. Staff has done their best to engage early and diffuse. The level of clients is much more difficult.

Local Governing Body Reports
Ms. P. Johnson reported the meetings for NNAMHS and Lake’s Crossing Center were cancelled due to power outages.

Ms. Malay reported on the LGB for SNAMHS. Ms. Malay reported the LGB reviewed data at the last meeting on April 19th. Outpatient services was added as a standing agenda item. The medical bylaws were passed.

Update on Substance Abuse Prevention and Treatment Agency
Mr. Erickson reported for Kyle Devine. Mr. Erickson reported the Bureau continues to work on goal #1 of the Strategic Plan. This quarter there has been continued work on staffing out to the communities. The revised policy book will be done in the upcoming weeks. There are several new electronic systems the Bureau will be implementing. A request for proposal for women’s services and a continuation request for prevention activities to coalitions is on the SAPTA website. The zero suicide initiative is moving to the phases of planning. The Bureau has partnered with the Division of Child and Family Services to enhance the work of early serious emotional disturbances.
**Update on Aging and Disability Services Division**

Mr. Caver reported for Dena Schmidt. ADSD is expanding Elder Protective Services to Adult Protective Services. The expansion will provide services to vulnerable individuals ages, eighteen to fifty-nine. ADSD continues to struggle finding appropriate placements and qualified providers for individuals with IDD and behavioral health dual diagnosis.

**Policies**

The following policies were presented by Ms. Park:

- A 4.045- Shelter Plus Care Program (Recommended for Archive)
- A 6.005- Treating Personal Representative as the Individual (Recommended for Archive)
- A 1.1- Policy Development and Review Process
- A 7.2- Healthcare Professional Licensing Requirement
- SP 3.1 Involuntary Administration of Medication in Civil Clients
- SP 3.3- Involuntary Administration of Medication in Forensic Clients
- SP 3.4- Informed Consent for Treatment and Protocol for Involuntary Treatment

Action: A motion was made by Dr. Durette, seconded by Ms. Ruiz-Lee and carried to approve the policies.

**Future Agenda Items**

- Physician and psychiatrist role in death penalty- DCFS 7/13 meeting
- Potential closure of West Care in Southern Nevada- DCFS 7/13 meeting
- Healthy Transitions grant- DCFS 7/13 meeting
- Ongoing standing agenda item for licensing boards

**Public Comment**

There was no public comment.

The DPBH Commission on Behavioral Health meeting was adjourned to the Executive Session at 10:00 a.m.