

## AGENCY DIRECTORS' REPORT

AGENCY: Lake's Crossing Center

SUBMITTED BY: Tom Durante, LCSW

DATE: 11/2/2018

**Reporting Period: 10/31/2018**

### STAFFING

Positions filled: Total : 5: One Nurse, One Custodial Worker, One Psychiatric Case Worker, One Mental Health Technician, One Administrative Assistant, and One Forensic Specialist

Vacancies: Two Administrative Assistant II, One Health Information Coordinator II; One Psychologist, full time, One Psychologist part time; One Forensic Specialist IV, Three Forensic Specialist III, Six Psychiatric Nurse II

Difficulties filling: Although we have two vacant psychology positions, we have several interested candidates, so I believe we may fill these positions within the next month. Nursing positions remain very difficult to fill. A chief reason appears to be the salary the State is offering; we have had nurses interested, but declining to pursue because they can earn significantly more money with a private provider in addition to large signing bonuses. Forensic staffing has improved with the underfilling of positions with Mental Health Technicians. However, this does remain a concern as our preference would be to hire experienced individuals for working with our challenging client population.

### CASELOADS/WAITING LISTS

**Program: Inpatient 79**

**Program: 1 Conditional Release, One Restoration, Outpatient**

Caseload:

Caseload:

Waiting List: 14 (in process of offering bed, obtaining medical clearance, waiting transport).

Waiting

List: N/A

**Program: Outpatient Compency Evaluations**

**Program:** [Click here to enter text.](#)

Caseload: Average 100 evaluations monthly

Caseload: [Click here to enter text.](#)

Waiting List: N/A

Waiting List: [Click here to enter text.](#)

**Program:**

**Program:** [Click here to enter text.](#)

Caseload:

Caseload: [Click here to enter text.](#)

Waiting List:

Waiting List:

### PROGRAMS

New Programs: Lake's Crossing Center has a growing list of long term clients (those that are committed per statute 178.461 as unrestorable and those committed as Not Guilty by Reason of Insanity). Currently, we have 14 on inpatient (with several pending and three at Stein Hospital). Our Agency is looking at adding a new treatment team that would specifically work with this population, as they have very different treatment needs than those that are committed for restoration to competency. We are currently in the process of inquiring which staff may have a special interest in working with this population and hope to have this specialized team in place by the end of the year.

Program Changes: No Programming Changes to report at this time.

### Service Needs/Recommendations

As reported last quarter, the Agency has updated our Emergency Operations Plan and we have started training staff on the manual, Incident Command System, and Emergency Response. We continue to be in need of an evacuation site and transportation plan to the site in the event of a disaster that requires evacuation of the building. This is the one missing component of our Emergency Operations Plan. Our goal is to secure a memorandum of understanding, or some alternative confirmation, that a site has been secured. Additional service needs continue to include additional space and funding for our long term clients. As stated above, this population has very different treatment needs and it would be beneficial for these clients, and the State Forensic system, to have a separate location and separate programming for them.

### **Agency Concerns/Issues**

It has been noted that the client's that are admitted to the facility have increasingly challenging and complicated circumstances that require much planning in order to maintain a safe environment. This often includes increased staff time for high observation and/or to participate in specialized activities. One recent example is the order to admit a woman who is 6 months pregnant; a significant amount of time and accommodations are in place to maintain safety and to provide the needed follow up care this client will need. Another example is a pending case in which a client is severely intellectually disabled and will require specialized attention. Our Agency has a wide variety of clients, many of whom have an extensive history of violent behavior. It is becoming increasingly difficult to meet the various treatment needs and maintain safety with our current level of resources.

# AGENCY DIRECTOR'S REPORT

AGENCY: NNAMHS  
SUBMITTED BY: Christina Brooks

REPORTING PERIOD: July – September 2018  
DATE: October 31, 2018

## STAFFING

### POSITIONS FILLED

Admin Assistant 2	(2)	Clinical Social Worker 2 (CSW1)	(2)
Custodial Worker 1	(1)	Clinical Social Worker 3	(1)
Mental Health Technician 3(MHT1)	(1)	Mental Health Counselor 2 (MHC 1)	(1)
Personnel Technician 1	(1)	Admin Assistant 1	(1)
Accounting Assistant 3	(1)	Psychiatric Caseworker 2	(6)
Psychiatric Nurse 2	(4)	Accountant Technician 1	(1)
Therapeutic Recreation Spec 1	(1)		

### VACANCIES

Administrative Assistant 4	(1)	Mental Health Technician 3	(1)
Licensed Psychologist 1	(2)	Microbiologist 4	(1)
Psychiatric Nurse 2 (EDU)	(1)	Psychiatric Nurse 2	(10.11)
Supply Assistant	(1)	Vocational Habilitation TR	(1)
Psychiatric Caseworker 2	(1)	Laboratory Technician 1	(.5)
Mental Health Technician	(1)	Mental Health Counselor 3 (Licensed)	(1)
Mid-Level Medical Practitioner	(1)	SR Psychiatrist (Range C) (EA)	(1)

## CASELOADS/WAITING LISTS

### PROGRAM: AOT

ELIGIBLE : 3  
REFERRALS: 4  
CASELOAD: 51

### PROGRAM: MED CLINIC

CASELOAD: 1,677  
WAITLIST: 12

### PROGRAM: MENTAL HEALTH COURT

CASELOAD: 68  
WAITLIST: 0

### PROGRAM: OP COUNSELING

CASELOAD: 98  
WAITLIST: 4

### PROGRAM: INTENSIVE SERVICE COORDINATION

CASELOAD: 169  
WAITLIST: 1

### PROGRAM: CBLA

CASELOAD: 128  
WAITLIST: 6

## PROGRAMS

**NEW PROGRAMS:** No new programs were created.

**PROGRAM CHANGES:** N/A

## SERVICE NEEDS/ RECOMMENDATIONS

There is a shortage of qualified behavioral health providers, specifically in the areas of nursing, social work and psychology.

# AGENCY DIRECTOR'S REPORT

AGENCY: NNAMHS

REPORTING PERIOD: July – September 2018

SUBMITTED BY: Christina Brooks

DATE: October 31, 2018

## AGENCY CONCERNS/ISSUES

**INPATIENT:** The community ER wait list continues to be a concern. We continue to work collaboratively with our community partners, however, there is consistently an average of 20 individuals who sit and wait to be transferred to a mental health facility on any given day.

We are also seeing longer lengths of stay in the hospital due to lack of appropriate placements in the community.

**OUTPATIENT:** Residential Housing and supportive living services continue to be a challenge. Finding affordable housing for the people we serve has become more difficult as the area's population grows, rents increase and landlords sell their homes. Additionally, several housing providers were not able to make it through the HCQC certification process, resulting in the loss of approximately 15 placements with supports.

# AGENCY DIRECTORS' REPORT

AGENCY: SNAMHS

SUBMITTED BY: OP Administration

DATE: 11/02/2018

Reporting Period: **OCTOBER 2018**

## STAFFING

**Positions filled:** 632.53 FTE – 21 positions were filled in October (16 new, 3 promotions, 2 transfers: 1 Admin Assistant, 1 Clinical Program Manager, 1 Forensic Specialist, 1 Licensed Psychologist, 2 Mental Health Counselors, 1 Psychiatric Caseworker, 13 Psychiatric Nurses, 1 Therapeutic Recreation Specialist)

**Vacancies:** 104.02 FTE

**Difficulties filling:** 61.02 FTE (Clinical Social Workers – 2.00 FTE, Licensed Psychologist – 4.00 FTE, Psychiatric Nurses – 32.49, Senior Psychiatrists – 22.53)

## CASELOADS/WAITING LISTS

**Program:** PACT

Caseload: 70

Waiting List: 0

**Program:** Urban OP Counseling

Caseload: 261

Waiting List: 8

**Program:** MHC

Caseload: 75

Waiting List: 0

**Program:** AOT

Caseload: 62

Waiting List: 0

**Program:** Residential

Caseload: 474

Waiting List: 0

**Program:** Rural Service Coordination (Adult & Youth)

Caseload: 10

Waiting List: 7

**Program:** Urban Medication Clinics

Caseload: 2,557

Waiting List: 267

**Program:** Urban Service Coordination

Caseload: 512

Waiting List: 2

**Program:** IP Civil Beds

Caseload: Licensed beds: 211

Waiting List: See ER Data

**Program:** Co-Occurring Program

Caseload: 71

Waiting List: 0

**Program:** Rural Medication Clinics

Caseload: 231

Waiting List: 16

**Program:** Rural OP Counseling (Adult & Youth)

Caseload: 190

Waiting List: 10

**PROGRAMS**

**Service Needs/Recommendations**

**Agency Concerns/Issues**

## AGENCY DIRECTORS' REPORT

AGENCY: STEIN

SUBMITTED BY: Stan Cornell, M.S.

DATE: 11/16/2018

**Reporting Period: 9/16/2018**

### STAFFING

Positions filled: Since the last report, six Forensic Specialists have been hired; 4 separated

Vacancies: 14 FSP, 1-Correctional lieutenant; Social Work-1 PCW-2; Nursing-2 PN-II

Difficulties filling: Filling Forensic Specialist positions continue to be a challenge.

### CASELOADS/WAITING LISTS

**Program: Inpatient**

Caseload: 52

Waiting List: Variable- beds offered to all .425s within 7-days

text.

**Program: Outpatient**

Caseload: 6

Waiting List: [Click here to enter](#)

**Program: Outpatient Compency Evaluations**

Caseload: Averaging 3 per month

Waiting List: N/A

**Program:** [Click here to enter text.](#)

Caseload: [Click here to enter text.](#)

Waiting List: [Click here to enter text.](#)

**Program:**

**Program:** [Click here to enter text.](#)

Caseload:

Caseload: [Click here to enter text.](#)

Waiting List: NA

Waiting List:

### PROGRAMS

New Programs: Foresic Specialist Sponsorship Program-Phase II implementation is continuing along with Treatment Mall-group activity participation, also to include psychiatric nuses. The other area of emphasis for moving the sponsorship program forward is increasing forensic participation on treatment teams. The major barrier has been staff shortages making it difficult for them to leave the unit floor to participate in the meetings. A work around is beign impletmented so that the information is making it to the treatment team meetings.

Program Changes: As reported previously, the Token Economy component of the Stein Treatment Mall has been revised to include two phases of positive behavioral incentives. Staff and client training has been completed on the use of the new point sheets including changes that they'll notice as clients progress from phase one into phase two of the system. Go live date was June 6<sup>th</sup> for full implementation of the changes. There are ongoing adjustments being made intended to expand more programing into the Treatment Mall during weekends.

### Service Needs/Recommendations

Seclusion and restraints; Stein continues to focus on the reduction of seclusion and restraints being used through a review and debriefing process applied to all incidents involving any form of resraints, ongoing training and refresher training on verbal de-escalation techniques and the efforts to expand the sponsorship program. Total seclusion and restraint incidents had been

continuing to trend down since July, averaging 14 per month. The formation of an oversight committee to review all incidents involving seclusion and/or restraint is moving forward as staff training on use of a new incident debriefing form has been included in the forensic skills fair ongoing through this month. The form which will attach to incident reports as they are forwarded to the oversight committee, will be use to inform the committee as they review each incident, and for ongoing performance improvement for forensic staff.

### **Agency Concerns/Issues**

In an ongoing effort to address the issue of Forensic staffing shortages, Stein/ SNAMHS Human Resources Department is continuing to recruit for MHT/FS underfill positions together with direct FS-I recruitments to address the total number of forensic specialist vacancies. Other concerns; The completion of a project to add a protective barrier around the nursing station on Stein's C-Pod has been delayed which will result in all of the clients chosen for Stein being housed in the main hospital building for a least one additional week. Consent Decree: All cases adjudicated under NRS 178.425 continue to be offered beds within the 7-day mandate.

## AGENCY DIRECTORS' REPORT

AGENCY: Sierra Regional Center

SUBMITTED BY: Julian Montoya

DATE: 10/31/2018

Reporting Period: 9/30/2018

### STAFFING

Positions filled @ 9/30/2018: 70

Vacancies: 8

Difficulties filling:

### CASELOADS/WAITING LISTS

**Program @ 09/30/2018: Targeted Case Management (TCM)**

Caseload: 1,468

Waiting List: All individuals accepted into services receive TCM

**Program: Family Support**

Caseload @ 06/30/2018: 185

Waiting List (09/30/2018): 0

**Program @ 06/30/2018: Supported Living Arrangement (SLA)**

Caseload @ 06/30/2018: 785

Waiting List (09/30/2018): 0

Number of 24-Hour SLA Homes: 301

Number of Intermittent/Share Living Homes: 430

Number of Fiscal Intermediaries: 54

**Program: Respite**

Caseload @ 06/30/2018: 136

Waiting List (09/30/2018): 0

*Note: Respite Services for children are approved by and paid for by the county of residence of the custodial parent.*

**Program: Jobs & Day Training**

Caseload @ 06/30/2018: 401

Waiting List (09/30/2018): 0

Number of Individuals receiving

Facility-based Non-Work (Day Habilitation): 91

Facility-based Work (Prevocational): 170

Integrated Employment (Supported): 13

Community-based Non-Work (Day Habilitation): 127

Career Planning:

**Program: Autism**

Caseload: 0

Waitlist: Transferred to ATAP July 1, 2011

**Intake Information**

Number of Applications Received @ 09/30/2018: 16  
Number of Applicants found Eligible: 7  
Number of Applicants found In-Eligible: 6

**PROGRAMS**

New Programs: SRC is starting a pilot program with our sister agency – Lake's Crossing. We are opening an SLA home that will have specialized training for staff to work with 2 individuals that are co-served by SRC and Lake's Crossing as part of the conditional release program. We will meet frequently to monitor the progress of the home with the goal of integration into the community when conditional release has been fulfilled. We are hoping to open this home by December.

Program Changes:

**Service Needs/Recommendations**

SRC has identified the current lack of SLA Intermittent Providers as a major problem area for the people we serve. Providers state that with the provider rates remaining on the low end it is not cost effective for them to take on these smaller service hour contracts. SRC continues to work on this service delivery component as it vital to our folks who want to remain in their homes with limited service.

**Agency Concerns/Issues**

SRC has identified the need to work with JDT providers to increase capacity for supported employment in our community. The CMS final ruling will require DS to work with our JDT providers in re-vamping their programs to be more community based (as opposed to facility based). Our current JDT structure (facility based) does limit the number of people they can serve – our goal is to move toward a more community-based service system. (2) DS providers express concern about the current provider rate and report that it is impacting their ability to recruit qualified employees. The 24-hour SLA providers report a high turnover rate which impacts consistency of supports offered to individuals served. (3) DS is experiencing a major shift in rental increase for homes and apartments in the Washoe County area. As major companies such as Tesla and Switch come into the area with an increased need for a labor force, prices have increased making it difficult to find homes that are aligned with what DS can support.

## AGENCY DIRECTORS' REPORT

AGENCY: Desert Regional Center

SUBMITTED BY: Gary M. Winder

DATE: 11/1/2018

Reporting Period: 9/30/2018

### STAFFING

Positions filled @ 9/30/2018: 347

Vacancies: 22

Difficulties filling:

### CASELOADS/WAITING LISTS

**Program @ 9/30/18: Targeted Case Management (TCM)**

Caseload: 4898

Waiting List: All individuals accepted into services receive TCM

**Program: Family Support**

Caseload: N/A

Waiting List: N/A

**Program @ 9/30/18: Supported Living Arrangement (SLA)**

Caseload: 971 (Based on entered claims. Should be about 1230)

Waiting List 211

Number of 24-Hour SLA Homes: **361 (450)**

Number of Intermittent/Share Living Homes: **414 (620)**

Number of Fiscal Intermediaries: 156 (162)

**Program: Respite**

Caseload: 1526 (August data)

Waiting List: 169

**Program: Jobs & Day Training**

Caseload: 1826 (Based on entered claims. Should be about 1950)

Waiting List: 292

Number of Individuals receiving

Facility-based Non-Work (Day Habilitation): 481 (540)

Facility-based Work (Prevocational): 940 (1000)

Integrated Employment (Supported): 382 (390)

Community-based Non-Work (Day Habilitation): 22

Career Planning: ?

ICF: Caseload: 40

Waitlist: 0

**Intake Information (sum of quarter: Jul - Sep)**

Number of Applications Received:	138
Number of Applicants found Eligible:	128
Number of Applicants found In-Eligible:	10

**PROGRAMS**

New Programs: N/A

Program Changes: DRC Quality Assurance Department completed new provider orientation with three new potential DRC SLA/JDT providers during the month of October. DRC and these three providers are in the final stages of the certification process and it appears that all three will be DRC contracted providers in the very near future. DRC Community is expected to add one full time licensed Psychologists this month. ICF continues to make system changes i.e. policy development/revisions, protocols based on the recommendations that came from the Root Cause Analysis that was completed in the beginning of 2018. New Director of Nursing started in October.

**Service Needs/Recommendations**

**Agency Concerns/Issues**

ICF continues to make referrals to community SLA providers and it is found that Community continues to have some difficulties with SLA provider capacity to support behaviorally complex individuals.

-AGENCY DIRECTORS' REPORT

AGENCY: Rural Regional Center

SUBMITTED BY: Robin Williams

DATE: 10/31/2018

Reporting Period: 9/30/2018

**STAFFING**

Positions filled @ 010/31/2018: 45

Vacancies: .5 Administrative Assistant I Carson City; 1.0 Accounting Assistant II Sparks; .5 Developmental Specialist III Carson City

**CASELOADS/WAITING LISTS**

**Program: Targeted Case Management (TCM)**

Caseload @ 09/30/2018: 780

Waiting List: All individuals accepted into services receive TCM

**Program: Family Support**

Caseload @ 06/30/2018: 97

Waiting List (09/30/2018): 0

**Program: Supported Living Arrangement (SLA)**

Caseload @ 06/30/2018: 400

Waiting List (09/30/2018): 0

Number of 24-Hour SLA Homes: 126

Number of Intermittent/Share Living Homes: 252

Number of Fiscal Intermediaries: 22

**Program: Respite**

Caseload @ 06/30/2018: 60

Waiting List (09/30/2018): 0

*Note: Respite Services for children are approved by and paid for by the county of residence of the custodial parent.*

**Program: Jobs & Day Training**

Caseload @ 06/30/2018: 269

Waiting List (09/30/2018): 0

Number of Individuals receiving  
Facility-based Non-Work (Day Habilitation): 54

Facility-based Work (Prevocational): 158

Integrated Employment (Supported): 21

Community-based Non-Work (Day Habilitation): 36

Career Planning:

**Program: Autism**

Caseload: 0

Waitlist: Transferred to ATAP July 1, 2011

**Intake Information**

Number of Applications Received @ 09/30/2018 : 10  
Number of Applicants found Eligible: 4  
Number of Applicants found In-Eligible: 4

**PROGRAMS**

New Programs: Outreach efforts continue in Lincoln and Nye counties, as well as in the Mesquite area of Clark county. Referrals for services are being received and we are continuing to grow our program in these areas.

Program Changes: Rural Regional Center is currently seeking a provider to open a 24-hour Supported Living Arrangement (SLA) in Nye county; this would be the first SLA in this county.

**Service Needs/Recommendations**

**Agency Concerns/Issues**

Limited housing and rising costs continue to make it difficult to procure affordable living arrangements in the Rural areas.

AGENCY DIRECTORS' REPORT

AGENCY: Rural Services    SUBMITTED BY: Tina Gerber-Winn, MSW    DATE: 11/2/2018

**Reporting Period: 10/30/2018**

**STAFFING**

Positions filled: Licensed Clinical Social Worker 3 (Silver Springs); Psychiatric Case Worker (Fallon)

Vacancies: 3 Licensed Psychologist I (Carson, Gardnerville); 1 Clinical Program Manager I (Carson); Mental Health Counselor 3 (Carson Admin and Ely); 2 Mental Health Counselor 2 (Carson, Pahrump); 1 Psychiatric RN 2 (Pahrump); 2 Psychiatric Caseworker 2 (Hawthorne, Elko); 1 Administrative Assistant 3 (Ely)

Difficulties filling: Licensed Psychologist

**CASELOADS/WAITING LISTS**

**Program: Outpatient Counseling**

Caseload: 213 youth; 911 adult

Waiting List: 19 youth; 94 adult

**Program: Residential Supports**

Caseload: 0 youth; 47 adult

Waiting List: 0 youth; 0 adult

**Program: Service Coordination**

Caseload: 15 youth; 195 adult

Waiting List: 0 youth; 12 adult

**Program: Psychosocial Rehabilitation**

Caseload: 15 youth; 65 adult

Waiting List: 1 youth; 7 adult

**Program: Medication Clinic**

Caseload: 272 youth; 1697 adult

Waiting List: 23 youth; 80 adult

**Program: Mental Health Court**

Caseload: 30 adult

Waiting List: 0

**PROGRAMS**

Agency staff developed a comprehensive training covering the documentation, medical necessity threshold, and timeliness requirements for prior authorization requests. Several clinics have received training on this information with the intention of offering this information to all agency staff within the next several months. Staff have participated in planning meetings with the Division of Child and Family Services regarding the provision of mental health awareness and identification training to primary care physicians treating children in underserved areas. The purpose of the HSRA grant being administered by DCFS is to train medical professionals regarding mental illness as well as increase case management assistance to families and children requiring mental health services. The Agency has updated its process to complete root cause analysis reviews. This includes the revision of the review questions and final report design. The agency staff have also continued to hone the review of Serious Incident Reports to include performance improvement plans that will be offered at a clinic level. The Agency has finalized the format of procedures and is updating the table of contents on procedures to assure updates and staff training occur every two years or in relation to a serious incident. The areas of procedures include Administrative, Client Rights, Clinical Services, Fiscal, Human Resources, Medication Clinic, Health Information Management, Support Programs, Risk & Safety, and Utilization, and Program Improvement. The development of Crisis Assessment and Response protocols continue. Rural Children's Mobile Crisis Response Team continues to assess and refer children to both inpatient and outpatient services with most children being linked to community-based services. Work continues to create a similar response for adults seeking services at Rural Clinics. Staff have begun preparations for completion of the Agency's Medicaid Quality Improvement Plan. A consumer satisfaction survey is wrapping up and will provide data for the report. A training on clinical supervision is planned for the end of November.

**Service Needs/Recommendations**

Rural Clinics identified the need for the provision of crisis management services across the lifespan.

**Agency Concerns/Issues**

Ongoing instruction and training on Root Cause Analysis procedures would be beneficial.