COMMISSION ON BEHAVIORAL HEALTH DIVISION OF CHILD AND FAMILY SERVICES MARCH 14, 2019 DRAFT 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, 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 Debra Scott

COMMISSIONERS PRESENT AT THE LAS VEGAS LOCATION:

Lisa Ruiz-Lee Tabitha Johnson Natasha Mosby

COMMISSIONERS PRESENT AT THE CARSON CITY LOCATION :

Pam Johnson

COMMISSIONERS ABSENT:

Lisa Durette Asma Tahir

STAFF AND GUESTS:

Ross Armstrong, Division of Child and Family Services Kathryn Roose, Division of Child and Family Services Jacqueline Wade, Division of Child and Family Services Megan Freeman, Division of Child and Family Services Kristen Rivas, Division of Child and Family Services Linda Guastella, Division of Child and Family Services Amanda Haboush-Deloye, Clark County Children's Mental Health Consortium Julie Slabaugh, Deputy Attorney General Jacquelyn Kleinedler, Washoe County Children's Mental Health Consortium Pam Johnson, Rural Children's Mental Health Consortium Alexis Tucey, Division of Health Care Financing and Policy Cody Phinney, Division of Health Care Financing and Policy

1. Call to Order and Introducitons

Commissioner Ruiz-Lee called the meeting to order at 8:35 A.M. Roll call is reflected above; it was determined that a quorum was present.

2. Public Comment

Commissioner Ruiz-Lee called for public comment. There was none.

3. Consent Agenda

Approval of Minutes and Agency Reports

MOTION: Commissioner Johnson made a motion to accept the minutes from the January 18, 2019 meeting.

SECOND: Commissioner Scott.

VOTE: The motion passed unanimously.

No agency reports were received.

4. Presentation by the Division of Child and Family Services (DCFS) Administrator on DCFS' New Organizational Structure

The Commission requested a presentation on the new DCFS leadership structure. Ross Armstrong, DCFS Administrator reported the following:

- There will be no change in services that are being provided.
- There will be a change to the Deputy Administrator's focus on the leadership team. For a long time, there were three children's systems - Children's Mental Health, Juvenile Justice, and Child Welfare. Each had both direct service responsibilities and oversight and planning policy responsibilities, organized with a Deputy Administrator over each system and it created silo systems. We are re-arranging the way the deputies are organized so we can pull out one deputy to focus on oversight and the quality piece that is not connected with the direct service piece. There are two broad strokes of direct services that we provide – residential and community services. Instead of having a Deputy over each system, we have a Deputy over residential services, who oversees seven 24-hour facilities which includes the Caliente Youth Center, the Nevada Youth Center, Summit View Youth Center, The Family Learning Homes, Adolescent Treatment Center, Oasis, and Desert Willow. The community services Deputy Administrator oversees all activities the Division does out in the field including all community children's mental health services like Mobile Crisis, Wraparound in Nevada, Rural Child Welfare, and Youth Parole. The Deputy Administrator over oversight is Kathryn Roose and all the oversight and planning functions fall under her – System of Care, Planning and Evaluation Unit, Child Welfare Family Programs Office, Juvenile Justice Family Programs Office, and the Systems Advocate which is the Division's Ombudsman, and strategic planning functions. The fourth Deputy Administrator has not changed and is over Administrative Services - Fiscal Support and IT Services.

> • That is the shift. We realize that children and families do not stay in one silo at a time. We now have folks in each of those positions and the DCFS website is updated. Click on the 'About Us' Link and click on Leadership.

5. Presentation of the Children's Mental Health Regional Consortia Plan Status Reports for 2018

Pam Johnson, Chair reported on the Rural Children's Mental Health Consortium (RCMHC) report.

- This year has been a year of re-organization and re-energizing. Had fabulous membership support from DCFS Kristen Rivas, Laura Adler, intern Megann Johnson, and consultant Jill Manit.
- They have been working on membership to assure they have representation throughout the state. This Consortium is responsible for 15 counties which are very diverse.
- A very successful Community Discussion Event was held in Winnemucca in December. Attendees represented many aspects of children's mental health in their community and included parents. Representatives from Medicaid presented. We plan to hold the Community Discussion in other communities.
- She reviewed the seven goals, activities and accomplishments covered in the Status Update.

Commissioner Ruiz-Lee gave congratulations on the report and the accomplishments.

Jacquelyn Kleinedler, Chair reported on the Washoe County Children's Mental Health Consortium report.

- She thanked Jill Manit for her support and documenting their goals and accomplishments.
- The summary of statuses, goals, and strategies are listed on page 5. The report lists the activities accomplished and the ones they will continue to pursue in 2019.
- Their primary objective is to develop their next 10-year plan. They are interested in continuing to uphold and promote the System of Care established in the state, especially as grant-funded activities wind down.
- Adopted data driven strategies and invited several folks to present data in order to make sure their goals and strategies in the coming decade are data driven, and match the needs of the community.
- Interested in strengthening and expanding the relationship with community-based providers, in coordination and collaboration with government agencies so that families that are not system involved have access to quality mental health services and support.

Commissioner Scott said she was very impressed with the presentation and content of all three plans.

Amanda Haboush-Deloye reported on the Clark County Children's Mental Health Consortium report. The report addresses the status of the four priorities:

Priority 1. Re-structure the public children's behavioral health financing and delivery system to ensure quality accountability, and positive outcomes for Clark County's children and Families. Priority 2. Provide mobile crisis intervention and stabilization services to Clark County youths in crisis.

Priority 3. Expand access to family peer support services for the families of Clark County's children at risk for long-term institutional placement.

Priority 4. Develop partnerships between schools and behavioral health providers to implement school-based and school-linked interventions for children identified with behavioral health care needs.

In accordance with the requirements set forth in Nevada Revised Statutes 433B, a section of the report describes the objectives from the 10-Year Strategic Plan that have been revised by the CCCMHC since the 2017 Status Report.

She reviewed the status of the 10-year plan goals, strategies, and services. They are working on their new 10-year plan and on their annual Mental Health Symposium which was a great success last May.

Ms. Johnson and Ms. Kleinedler both spoke about the work that is being done towards creating their next 10-year plan.

6. Assembly Bill 457 (Licensing Boards) Commission Responsibilities:

• Licensing Appeals

• Approve Board Regulations

Ms. Rivas reported that this is a standing agenda item for this meeting. There is nothing to report today, however there is an appeal that will be heard at the meeting tomorrow.

7. Follow-Up on Issues with Desert Willow Treatment Center (DWTC)

- What is the Status of Getting Someone to Operate the Inoperable Units at DWTC?
- Decision on Whether the Commission Wishes to Follow-Up on this Item with a Letter or Document and Formulation of that Document?

Jacqueline Wade reported that the beds will remain at 20. We are not up for expansion currently. We will have 12 RTC beds and 30 unfilled beds. There is no new information currently. Commissioner Ruiz-Lee asked if there were any monies moved forward in the budget for this session? Were there any monies allocated to increase the capacity at DWTC? Dr. Wade responded that there was not.

Mr. Armstrong explained that at the time DCFS was required to submit its agency budgets, we were still looking at the potential of having a private entity come in and run part of the hospital. It was too late in our process to put in that type of decision unit in the budget building process, when we walked away from the private vendor solution.

Commissioner Ruiz-Lee asked if there has been conversation about adding any money to the budget to add the beds at DWTC? Mr. Armstrong responded that the budget has not been amended yet. The Children's Mental Health (CMH) budget will be held by the Health and Human Services (HHS) Subcommittee of the Finance Committee in two weeks. DCFS has not been asked anything about DWTC from the Legislative Council Bureau (LCB). We do not have an opportunity at this time to ask for that but if a legislator asked, we would look at it. One thing came up during our budget hearings related to Juvenile Justice (JJ), there is a very large Prison Rape Elimination Act mandate, so they asked us to look at shifting beds around our system. The question was whether youth could be better served by moving beds from JJ to CMH.

Commissioner Scott asked if DCFS has a legislator that would be willing to stick her neck out. Somebody needs to make them when you look at the amount of money that is being spent out of state. She thinks Director Whitley could do something. If legislators were aware of the problem that would be helpful.

Commissioner Ruiz-Lee said one of the points of this item is about sending a letter on behalf of the Commission. She explained the concern that two sessions ago, DCFS made the pitch to legislators to reduce the funding to DWTC, which reduced the number of beds that were operating on the premise that there was going to be a contract provider and all necessary research had been done to ensure that this would be successful. Legislators agreed with your recommendations and here we are at least two years later with a pretty significant reduction in beds for DWTC, and no private provider. We still have lots of youth being placed out of state and according to the CCCMHC, at significant cost to the state. It could be that nobody is aware of the problem. The question for the Commission is do we take the time to write a letter before the budget is heard in the next two weeks?

Commissioner Scott wholeheartedly supports at least making people aware of the situation from a Commission point of view.

Alexis Tucey reported that Medicaid has an RTC report they post monthly on their website. As of October 2018, they had 108 youth that were placed out of state which is a substantial reduction from where we were in October 2017, which was 198. This is based off Medicaid claims. As of October 2018, we had 97 in-state RTC bed claims. Part of the reason the decision was made was that DWTC bed count was never at that full capacity.

Commissioner Ruiz-Lee asked if DWTC has a wait list? Dr. Wade responded, "about 8 right now". What prevents those youth from getting a bed at DWTC? Dr. Wade responded, "We are full. We are legislatively budgeted for the capacity we have now". The conversation that needs to be had is if DWTC was operating at a full capacity, how many of those 97 youth would be able to stay in-state?

Ms. Tucey added that we need to take into consideration the diagnosis, some of which will be specific, and you are going to have a population that creates a challenge in a co-ed population.

Not every facility can meet the needs of a population, nor should they. At that point you are looking at some liability issues.

Commissioner Ruiz-Lee asked if DCFS has done that analysis? She agrees with Ms. Tucey, we want to be about quality care. What should the bed count be at DWTC to adequately serve the population and what is the money required to do that?

Mr. Armstrong stated that the committee that hears the budget is the Health and Human Services Subcommittee. It is a joint committee of Senate Finance and the Assembly Ways and Means. One of the advantages of the shifting of leadership responsibilities within the Division is that he appointed Susie Miller as the Residential Services Deputy Administrator. Last week she got all of the providers at the table to look at the need. It is in the starting phases. The original plan was to have DWTC co-locate on the SNAHMS campus and then we would be able to lease out the DWTC hospital to a private provider. It became something the legislature did not want to do. The compromise was to share the facility. Regulatorily we were not able to complete that because it became a licensure issue. We were not able to relocate DWTC.

The question when it comes up with the Department should be whether there should be expanded state capacity to run those beds or should we be winding down state-run operations and have a different role, or having it be a community provider. He would be interested in the Commission's feedback on that and appreciates the discussion on DWTC.

Commissioner Ruiz-Lee said Mr. Armstrong's comment about what the state's role should be is a very good question which should have been asked four years ago. As a Commission we need to figure out do we want to draw attention with a letter, or do we want further conversations?

Commissioner Johnson said this is an important issue. Her only concern is timeliness. Additionally, the Subcommittee to write the annual letter to the Governor needs to get it out.

Dr. Haboush Deloye said CCCMHC drafted a letter on this issue. They did not have a full membership to vote on it in March. They could share the draft letter with the Commission.

Julie Slabaugh noted that the Commission has two options given the time frame. It could draft a letter today, dictate it and designate someone to send it off on the Chair's behalf, or it could designate one member of the Commission to gather the information from the CCCMHC, draft the letter on behalf of the Commission and send it off. One person is not a public meeting and the open meeting law does not apply.

Dr.Haboush-Deloye read the letter. Commissioner Scott said the letter needs to say that the budget needs to be amended to fund those extra beds at DWTC. We need to be specific about the request. The letter is beautifully written but is a little too clinical coming from the Commission.

MOTION: Commissioner Scott made a motion to modify the letter to include some specific language about the budget request and include information about the previous budget reductions which reduced the beds and a restoration of the dollars. We would have to go back and figure out what that was and send the letter on behalf of the Commission.

Commissioner Scott added - on behalf of the Commission. What specific Commission member would be responsible to draft the letter? Commissioner Scott said she could do it but she does not have that information about previous budget and beds to add.

Commissioner Ruiz-Lee said whoever is charged with the letter could find the budget information online if you looked back at previous legislative sessions. Whoever does it would need to reach out to DCFS and they could probably get that dollar amount quickly.

MOTION: Commissioner Johnson made a motion that we draft the letter and submit it. Commissioner Ruiz-Lee said we would utilize the letter from CCCMHC with a couple of modifications. Who could do that?

Commissioner Scott said the discussion is that she would make it one page, two paragraphs, use some of the information that was in the letter, but a letter she would draft would be much shorter and more succinct, because the Commission does not have the information to say those things. She can draft the letter. Can she send it to someone to send it on and put it on letterhead? If she can have someone to support her she will draft it this afternoon and get it back.

Commissioner Ruiz-Lee asked if Ms. Rivas could facilitate this? Mr. Armstrong said that could become problematic if we are using DCFS staff to advocate for something that is not in the Governor's budget. Dr. Haboush-Deloye is willing to help get the letter out if it is allowable since she is not a member.

Commissioner Scott will send that to Dr. Haboush-Deloye this afternoon and she will take care of it.

MOTION: Commissioner Johnson made a motion that we draft the letter and submit it. The person who is responsible for coordinating the letter is Commissioner Scott who will send it to Dr. Haboush-Deloye from the CCCMHC who will send the letter out.

SECOND: Commissioner Scott.

VOTE: Motion passed unanimously.

8. Aging and Disability Services Department (ADSD) Update

No one was present to present. There was a handout from the Autism Treatment Assistance Program.

9. Medicaid Update and Changes

Ms. Tucey reviewed the Nevada Medicaid Behavioral Health Policy Change document that she provided as a handout.

• Update on Medicaid's Network of providers Impact from State Rate Changes

Ms. Tucey reported that there was not a drastic change in provider enrollments. She reported the numbers.

Medicaid is collaborating with DCFS on a 1115 waiver for the Specialized Foster Care (SFC) population. They are meeting with SFC population north and south to understand their needs. They began talking to CMS which is the best authority to pursue it. The goal is to have an application by this spring or summer and implementation by end of 2019. This is a big project we are working on together.

Ms. Tucey will send information on another waiver that is specific to housing for the chronic homeless population, so it can be distributed to the Commissioners.

10. Update on the Children's System of Care Behavioral Health Subcommittee and System of Care Grant

Linda Guastella reported:

Their focus is on the priorities that they have now for SOC:

- Establishing DCFS as the Children's Mental Health Authority.
- Expansion of High Fidelity Wraparound and the expansion of another care management which is the FOCUS model.
- The expansion of our service array with a single point of entry, creating a no wrong door theme and including the IDD/DD population in services

They are in the process of applying for the SOC expansion grant thru SAMHSA which will allow them to focus on their priorities and expand more into the rurals.

11. Seclusion and Restraint Summary of Forms Report

Kristen Rivas reported on the handout that was provided. The report shows the number of forms DCFS received from 1/1/19 to 2/25/19. It breaks the total number of forms received of 361 down by each facility and the follow-up actions that we took.

12. Selection and Appointment of New Commission Vice Chair and Upcoming Positions

- Status of Appointment of Commissioners to fill the Psychologist position, Physician position, and Person who has knowledge and experience in the prevention of alcohol and drug abuse, and the treatment and recovery of alcohol and drug abusers through a program or service provided pursuant to chapter 458 of NRS.
- Status of Commissioner Durette's Nomination as Chair from the Governor's Office.
- Nominate and approvPe appointment of a Commissioner to serve as Vice-Chair.

Ms. Rivas reported that she has communicated with the Governor's Boards and Commissions Office several times, and they responded that due to the change in this office, they will get the information to us as soon as possible. We do not know any statuses of appointments now.

It was decided to wait to appoint a Vice-Chair until we get confirmation of Commissioner Durette as Chair of this body.

13. Announcements

There were no announcements.

14. Discussion and Identification of Future Agenda Items

1. Standing agenda items.

2. Ross Armstrong can provide an overview of the budget that was approved and any significant legislation that affects DCFS.

3. Commission position vacancies. Megan Freeman will follow up about Psychologists with the Nevada Psychological Association.

4. Ms. Tucey recommended leaving the Medicaid item on the agenda in whatever is appropriate for Open Meeting Law. Ms. Rivas had the bullet points, an update on the housing waiver, the SFC waiver.

Ms. Tucey said for the 1915 Waiver there are preliminary meetings with CMS to vet out the ideas before submitting a formal application. It looks like we are aiming for formal submission in September pending budget approval. We can leave it, the SFC waiver and other policy updates on the agenda.

MOTION: Commissioner Scott made a motion to maintain our standing agenda items to have an item specific to the DCFS budget update, item #12 – vacancies on the Commission. SECOND: Commissioner Mosby.

VOTE: Motion passed unanimously.

15. Public Comment

None.

16. Adjournment of Public Session

Commissioner Ruiz-Lee adjourned the meeting at 10:25 am.