

DPBH COMMISSION ON BEHAVIORAL HEALTH

MINUTES

September 13, 2019

MEETING LOCATIONS:

Division of Public and Behavioral Health (DPBH)
4150 Technology Way, Room 303, Carson City, NV
Northern Nevada Adult Mental Health Services (NNAMHS)
480 Galletti Way, Bldg. 22, Sparks, NV
Desert Regional Center
1391 S. Jones Blvd., Training Room, Las Vegas, NV

COMMISSIONERS PRESENT:

Lisa Durette, M.D., Las Vegas, Lisa Ruiz-Lee, Las Vegas, Asma Tahir, phone, Tabitha Johnson, Las Vegas, Natasha Mosby, Las Vegas, Barbara Jackson, Sparks, Debra Scott, phone

Carson City:

Jennifer Sexton, PhD, DPBH, Joseph Filippi, DPBH, Elvira Saldana, DPBH, Tina Gerber-Winn, DPBH, Roswell Allen, ADSD

Sparks:

Christina Brooks, NNAMHS, Julian Montoya, SRC, Drew Cross, LCC, Jessica Adams, ADSD, Karen Oppenlander, Board of Examiners for Social Workers

Las Vegas:

Linda Anderson, DAG, Marina Valerio, DRC, Gujuan Caver, DRC, Jo Malay, SNAMHS, Rose Park, DPBH, Leon Ravin, M.D., SNAMHS, Stan Cornell, Stein, Ellen Richardson-Adams, SNAMHS

Phone:

Brook Adie, DPBH, Kristen Rivas, DCFS

Chair Durette called the meeting to order at 8:42 a.m. Roll call is reflected above. It was determined that a quorum was present.

Approval of the Minutes May 10, 2019 and August 2, 2019

Action: A motion was made by Ms. Johnson, seconded by Ms. Jackson and passed to accept the minutes of May 10, 2019.

A motion was made by Ms. Ruiz-Lee, seconded by Ms. Jackson to accept the minutes of August 2, 2019.

Public Comment

There was no public comment.

Agenda item #6 was taken out of order.

Update on the Bureau of Behavioral Health, Wellness and Prevention

Ms. Adie reported the Bureau continues to collaborate with the Center for the Application of Substance Abuse Technologies (CASAT) to certify substance abuse treatment providers and prevention agencies. The statewide epidemiology workgroup will be presenting and reviewing the state epidemiology profile on October 10th. Ms. Adie informed the Bureau is working on getting subawards out and awarded, to start October 1st. The Bureau partnered with Social Entrepreneurs, Inc. (SEI) to complete a capacity assessment in Nevada. The capacity assessment reports provided to the Commission supply information on gaps and services for substance abuse and hospitalization. An opioid summit was held recently in Las Vegas. A flyer was provided for the suicide prevention summit taking place in October. The Bureau has submitted to the Substance Abuse and Mental Health Services Administration (SAMHSA), the combined mental health and substance abuse block grant application at the end of August.

Consideration and Possible Approval of Agency Directors' Reports

Action: A motion was made by Ms. Jackson, seconded by Ms. Mosby and passed to accept the Agency Directors' reports as submitted.

Update on Seclusion and Restraint Report/Denial of Rights

DPBH

Dr. Sexton informed the restraint rates in Nevada are significantly lower than the national mean rate. There were a couple of spikes at the end of 2018 which usually happens if there is a patient in need of extra support who may be aggressive or violent. The seclusion data for Dini-Townsend Hospital reflects the same spike. For Rawson Neal Hospital, the spikes observed previously for the state came from patient(s) at Rawson Neal Hospital. The overall use of restraints and seclusion statewide reflects two spikes in 2018 and numbers look significantly lower. A spike occurred in average length of stay in April 2019 at Dini-Townsend Hospital. The average length of stay at Rawson Neal Hospital is consistent. The average length of stay for evaluation clients at forensic facilities fluctuates. The average wait in days for restoration clients are all under 7 in compliance with the consent decree. Lake's Crossing Center has 15 long term commitments and Stein Hospital has 2.

Mr. Cornell pointed out the correct number of long-term commitments at Stein Hospital is 3.

Ms. Malay clarified the seclusion rates for SNAMHS are going up for Rawson Neal, as it is nationally. The goal and trend are to increase seclusion rates and decrease restraint rates.

ADSD

Ms. Valerio reported there were a total of 16 incidents requiring some form of a restraint from May through July. Out of the 16 incidents, 11 occurred in the intermediate care facility and 5 at their work program. There was a total of 9 out of the 40 individuals in some type of restraint. Ms. Valerio stated

there was 1 individual with the longest period in restraint and it was 29 minutes over a long period of time.

Local Governing Body Reports

Ms. Malay reported for SNAMHS. The local governing body did not meet due to lack of quorum.

Ms. Brooks reported for NNAMHS. The local governing body meeting was held on August 7th. All departments provided their reports and there were no concerns. The next meeting is scheduled for November 6th.

Mr. Cross reported for Lake's Crossing Center. The local governing body met and there were no issues reported.

Update on Aging and Disability Services Division (ADSD)

Ms. Adams reported the bill for Adult Protective Services passed and ADSD has been operating an Adult Protective Services program as of July 1st. The program investigates allegations of abuse and neglect, exploitation, isolation or abandonment of vulnerable persons ages 18 or older. ADSD is working with the Division of Health Care Financing and Policy to finalize the scope of work for the completion of a rate study for contracted developmental services providers. The study will be completed by an outside vendor and will review all rates for supported living arrangements, jobs and day training services, non-medical transportation and behavioral consultation and intervention. The study will also include the development of hourly and daily rates, rate tiers for acuity and the possibility of different rates for urban versus rural service settings. The rate study will assist in the development of a sustainable rate structure. ADSD is also researching innovative services provided in other states which may help to alleviate some of the staffing issues. Ms. Adams informed ADSD staff have been participating in multiple meetings and workgroups with the goal to improve service availability for children and adults in Nevada who are dually diagnosed with an intellectual or developmental disability and mental illness.

Update on amendments to NRS 641B pursuant to AB457 and Commission responsibilities

Ms. Openlander provided an overview of the proposed language changes to Nevada Administrative Code (NAC) 641B. In NAC 641B.041 and 641B.044 there is definition shift for licensed associate social workers and licensed social workers reversing changes made in 2017 back to what they were in 2017. In the licensing and supervision section, NAC 641B.090, the length of time an application for licensure remains open is changing to 9 months and an application for endorsement will remain open for 6 months from the date the application is received. The option for master's social work graduates to take a Bachelors exam is being removed. The timeframe for when a failed exam may be retaken is changing. The period for restoration of an expired license is being reduced from 3 years to 2 years. In NAC 641B.112, the Board is stipulating educational requirements for a provisional license. The length of time for examination and expiration for a provisional license had a typographical error and is being corrected from 9 months to 90 days. Fee increases are being requested for applications, initial licensure, endorsement and renewals. Fees will no longer be accepted in cash. For postgraduate internships, the term substantially equivalent language on hours being counted from an internship in another state is

being removed. The number of interns a supervisor supervises will increase from 3 to 4. The frequency of post graduate internship progress reports is being reduced from quarterly to every 6 months. In continuing education, a retiree with the Board does not have to submit continuing education hours except for suicide prevention. Under standards of practice, NAC 641B.220 paragraph 2, information has been added on what is considered unprofessional conduct.

Policies

The following policies were presented by Ms. Park:

1.007 Attorney General's Office- Function/Communication (Recommended for Archive)
4.040 Internet Use Policy (Recommended for Archive)
4.068 E-mail Use Policy (Recommended for Archive)
A 1.2 Statewide Department or Discipline Procedures
A 4.61 Utilization Management
A 4.71 Requests for Public Record Documents
A 6.1 Psychological First Aid Counselor Response
CD 7.3 Division of Public and Behavioral Health Clinical Services Legionella Prevention and Control
CRR .014 Risk Management and Reporting Serious Incidents
CRR 1.2 Prohibition of Abuse or Neglect of Consumers and Reporting Requirements
CRR 1.3 Seclusion/Restraint of Consumers
CRR 1.5 Management of Civil Inpatient Elopement Episodes
CRR 1.6 Research Projects Involving Consumers
CRR 1.8 Civil Client Rights to Second Opinions
CRR 1.13 Sentinel Events
CRR 2.1 Civil Consumer Complaint and Grievance Procedure
CRR 6.06 Caregiver's Authorization Affidavit
F 1.1 Medicaid Mental Health Rehabilitative Services Billing and Charting/Documentation Requirements
F 2.1 Requirement of Application for Health Benefits
F 2.3 Mental Health Cost Report Date and Allocation Methods
F 2.4 Contract Procedures
FS 1.01 Forensic Services Security Camera System
FS 2.6 Prevention, Management and Reporting Escapes from Forensic Units
FS 4.61 Privileging 461/Not Guilty by Reason of Insanity Clients for off-site activities prior to conditional release application
GOV 1.2 Practitioner Fit for Duty
HR 1.9 (5.029) Workplace Violence Prevention
HR 1.35 Division of Public and Behavioral Health Medical and Psychology Staff Offsite Work Activities
HR 1.36 Medical Staff/Psychology Contractor Time tracking
HR 1.37 Medical Staff and Psychology Contract Billing Rates
HR 1.38 Medical Staff On-Call
IMRT 1.50 Inpatient Information Systems/Electronic Health Records Downtime/Medication Management

IMRT 4.75 (4.075) Website Maintenance Process
SP 1.18 Enrollment and Benefits for Payment
SP 4.05 Discharge of Consumers from Civil Inpatient Facilities
SP 4.07 Notifications of Victims and Police of Potential Violent Acts by Consumers
SP 4.08 Civil Security Camera System
SP 4.12 Intradivision Transfers
SP 4.44 Waiting Lists for Civil Mental Health Agencies
SP 5.3 Community Based Living Arrangements Assessment and Compliance Reporting

Action: A motion was made by Ms. Mosby, seconded by Ms. Johnson and carried to approve the policies as presented.

Discuss, plan and assign tasks and due dates for completion of the next Annual Governor's Letter per NRS 433.314

Chair Durette inquired when the letter is due.

Mr. Filippi replied Nevada Revised Statute does not specify a specific date. It states at the beginning of each year. The Commission was attempting to complete the letter by the first quarter this year.

Chair Durette asked the Commission members how they would like to approach the completion of the letter for the upcoming year.

Ms. Scott asked Mr. Filippi if any feedback was provided after the letter was submitted.

Mr. Filippi replied he did not receive any feedback.

Ms. Scott commented the letter can not be completed until the Regional Behavioral Health Policy Board reports are provided.

Ms. Richardson-Adams shared she is temporarily chairing the Children's Behavioral Health Consortia and the group expressed appreciation for including them.

Ms. Ruiz-Lee commented previously a subcommittee was created to work on the letter. Ms. Ruiz-Lee suggested the Commission may consider creating a subcommittee at the next meeting.

Chair Durette informed, Mr. Filippi would send a list of sections. The Commission members will reply and select a section. In the next meeting the process will be solidified.

Identification of Future Agenda Items

No future agenda items were identified.

Public Comment

There was no public comment.

The DPBH Commission on Behavioral Health meeting was adjourned to the Executive Session at 10:06 a.m.