



DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
CLINICAL SERVICES

Control #	Rev.	Title	Effective Date: 03/16/2018
FS 3.0	New	Nevada Disability Advocacy Law Center (NDALC) Visitation in Forensic Facilities	Review Date: 03/01/2020

1.0 POLICY:

Forensic Facilities establish reasonable guidelines for allowing the Nevada Disability Advocacy Law Center (NDALC) to interact with clients placed in secure residential units and to access medical records.

2.0 PURPOSE

To balance the needs of NDALC to carry out its' duties with the needs of the facility to provide efficient administration of programs and optimal treatment to its' residential clients.

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3.0 SCOPE: This policy applies to DPBH Clinical Services Branch forensic inpatient settings.

4.0 DEFINITIONS

4.1 Forensic Facility – A secure facility of the Division of Public and Behavioral Health of the Department of Health and Human Services for offenders and defendants with mental disorders.

4.2 NDALC – Nevada Disability Advocacy Law Center

4.3 Forensic Client – A client who is committed by the court for evaluation and/or restoration to competency for trial.

5.0 REFERENCES: N/A

6.0 PROCEDURE

6.1 NDALC access to clients and agency facilities:

6.1.1 NDALC staff may see clients and visit during the following hours;

6.1.1.1 Lakes Crossing Center: 9:00 to 11:00 am, 6:00 to 8:00 pm
Monday through Sunday.

6.1.1.2 Stein Hospital/C-Pod: 9:00 to 11:00 am, 6:00 to 8:00 pm
Monday through Sunday.

6.1.1.3 Exceptions to the hours shall be made only for emergency situations and require notice to the agency administrator or designee by NDALC staff.

6.1.1.3.1 Emergency situations include the investigation of abuse and neglect as defined by Nevada Statutes and



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- any situation that involves the imminent danger to the health and welfare of a client.
- 6.1.2 When visiting the facility or conversing with clients via mail or telephone, NDALC staff members will not interfere with ongoing therapeutic activities and will refrain from giving therapeutic advice regarding prescribed medications or cooperating with treatment.
 - 6.1.3 Because residential clients are all in custody, no passes may be granted for NDALC to take clients out of the facility.
 - 6.1.4 Notification of Presence on the Unit:
 - 6.1.4.1 Prior to entering a forensic residential unit, NDALC staff shall notify the agency administrator or his/her designee.
 - 6.1.5 NDALC access to buildings and other areas:
 - 6.1.5.1 Under no circumstances will agency staff give NDALC staff keys to agency buildings.
 - 6.1.6 NDALC staff will gain access to the unit by being admitted by agency staff.
 - 6.1.7 NDALC staff are not allowed in the nurse's stations.
 - 6.1.8 Access to Records:
 - 6.1.8.1 Health Information Management
 - 6.1.8.1.1 All requests for copies of client records must be made to the agency Health Information Department.
 - 6.1.8.1.2 All records shall be reviewed in the presence of Health Information staff and respective Treatment Team Leaders or their clinical designee.
 - 6.1.8.1.3 A release of information that follows the Division policy for releases shall be presented to the Agency Director executed by director of NDALC certifying that there is probable cause to believe and setting out the basis for his/her belief, that the individual subject to NDALC's services has been the victim of abuse or neglect as defined by NRS 433.554.

~~6.1.9 Records other than medical:~~

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~~6.1.9.1 Requests for any documentation, other than medical, by NDALC staff shall be handled by the Deputy Attorney General.~~

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~~6.1.9.2 If any agency staff receives a request for such information, it shall be referred to the Deputy Attorney General.~~

~~6.1.9.3 Reports prepared for purposes of performance improvement (i.e., root cause analysis, corrective action plans, denial of rights, and incident reports), will be available to NDALC staff upon receipt by the Deputy Attorney General of a request by NDALC for such records accompanied by a consumer name. Requests for any documentation, other than medical, by NDALC staff shall be handled by the Agency Director or designee.~~

~~6.1.8.2 If any agency staff other than the Agency Director receives a request for such~~

~~6.1.8.2 Information, it shall be referred to the Agency Director or designee.~~

~~6.1.9.4 6.1.8.4 Reports prepared for purposes of quality assurance, denials of rights, and incident reports (sentinel events), shall not be available to NDALC staff.~~

6.1.10 Client Access to NDALC:

6.1.10.1 The agency shall not impede any of its clients from having regular and frequent access on their living units to NDALC staff for obtaining information on legal rights and self-advocacy during the hours noted in Section 1 of this policy.

6.1.10.2 All residents shall have access to a telephone to call NDALC by making a local, toll-free or collect call without monitoring by, or permission from agency staff.

6.1.11 Agency shall post NDALC's rights poster with the telephone numbers in a conspicuous place in its facility.

6.1.12 NDALC Investigations

6.1.12.1 Agency shall cooperate with any investigations of abuse and neglect by NDALC staff.

6.1.12.2 When investigating of abuse or neglect of a client, NDALC staff shall be allowed to interview witnesses, inspect the premises and review individual records pertinent to the investigations.

6.1.13 Protection and Retaliation:

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- 6.1.13.1 There shall be no retaliation against any individual for having filed a complaint with or provided information to NDALC or an NDALC representative.
- 6.1.14 Comments and Concerns:
 - 6.1.14.1 NDALC staff shall refrain from commenting to any agency staff other than the Agency Director or designee on such matters that pertain to medical treatment, staffing levels, and the conduct of agency staff.
- 6.1.15 Agency staff shall bring any concerns they may have about the conduct of NDALC staff and/or violations of this policy to the attention of their own supervisors, who will transmit the information through the agency chain of command to the appropriate Agency Director or designee.

7.0 ATTACHMENTS: N/A

8.0 IMPLEMENTATION OF POLICY:

Each Division agency shall implement this policy and may develop specific written protocols and procedures as necessary to do so effectively.

EFFECTIVE DATE: 03/16/2018

DATE APPROVED BY DPBH ADMINISTRATOR: 03/16/2018

DATE APPROVED BY THE COMMISSION ON BEHAVIORAL HEALTH: 03/16/2018



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