Steve Sisolak Governor

Director



# **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH Helping people. It's who we are and what we do.



Lisa Sherych Administrator

Ihsan Azzam, Ph.D., M.D. Chief Medical Officer

# **NOTICE OF INTENT TO ACT UPON A REGULATION**

(LCB File No. R009-22) Notice of Hearing for the Amendment of Regulations of the State Board of Health

NOTICE IS HEREBY GIVEN that the State Board of Health will hold a public hearing to consider amendments to Nevada Administrative Code (NAC) 433. This public hearing is to be held in conjunction with the State Board of Health meeting on December 2, 2022.

The State Board of Health will be conducted at 9:00 am on Friday, December 2, 2022, this meeting will be held online, by phone, and at two physical locations:

### **Online Platform:**

https://teams.microsoft.com/l/meetupjoin/19%3ameeting M2UwZmYwOGQtOWFhYy00ZGI1LTk2OTEtZWIyMDE0MDc2NDc1%40thread.v2/0?context= %7b%22Tid%22%3a%22e4a340e6-b89e-4e68-8eaa-1544d2703980%22%2c%22Oid%22%3a%22455656b7-d121-4709ba81-3f70d51b1100%22%7d

## Join by Phone:

- +1775-321-6111
- Conference ID: 153 453 179#

## **Meeting Locations:**

- Southern Nevada Health District (SNHD) Red Rock Trail Rooms A and B 280 S. Decatur Blvd Las Vegas, NV 89107
- Nevada Division of Public and Behavioral Health Hearing Room No. 303, 3rd Floor 4150 Technology Way Carson City, NV 89706

The proposed changes will revise Section 10 of LCB File No. R012-20 and are being proposed in accordance with Nevada Revised Statute 433.324. The proposed regulations establish a Regulation relating to mental health; establishing a procedure for determining whether to involuntarily administer psychotropic medication to a patient at a public or private mental health facility; and providing other matters properly relating thereto.

The proposed changes to NAC 433 include the following:

- To initiate the procedures set forth in sections 9-14, inclusive, of this regulation for the involuntary administration of psychotropic medication to a patient at a public or private mental health facility that has established such procedures, the practitioner who is primarily responsible for treating the patient must submit to the director of the facility a request to involuntarily administer psychotropic medication to the patient.
- Clarifies language that the patient must be currently admitted to a public or private mental health facility under an involuntary court-ordered admission pursuant to NRS 433A.200. Clarifies language of type of admission to facility before involuntary administration of psychotropic medication is administered.
- Removes language that allows for involuntary administration of a psychotropic medication for a patient who is admitted under an emergency admission.
- Adds language to clarify the former terminology "unable to care for himself or herself" by setting criteria and needs of client before administration of medication can be determined.
- 1. Anticipated effects on the business which NAC 433 regulates:
  - A. *Adverse effects*: The Division of Public and Behavioral Health does not anticipate any adverse/negative impacts to businesses or general public in the State of Nevada.
  - B. *Beneficial:* The positive/beneficial effects of the proposed regulations to businesses in the State of Nevada would be clear definition of what constitutes unable to care for self, ensures client rights to understand the reason for the admission to facility, medication administration, possible side effects, and outcome if untreated.
  - C. *Immediate:* As soon as the proposed regulations become effective it gives definition to practitioner on procedures for the involuntary administration of psychotropic medication to a patient at a public or private mental health facility.
  - D. *Long-term:* The long-term positive/beneficial effects that mental health facilities have a procedure that provides clear criteria for involuntary administration of psychotropic medications and patients understand their rights to understand procedures to admission to facility.
- 2. Anticipated effects on the public:

A. *Adverse*: The Division of Public and Behavioral Health does not anticipate any adverse/negative impacts to general public in the State of Nevada.

B. *Beneficial:* The positive/beneficial effects of the proposed regulations to businesses in the State of Nevada would be clear definition of what constitutes unable to care for self, ensures client rights to understand the reason for the admission to facility, medication administration, possible side effects, and outcome if untreated.

C. Immediate: As soon as the proposed regulations become effective it gives definition to practitioner on procedures for the involuntary administration of psychotropic medication to a patient at a public or private mental health facility.

D. Long-term: The long-term positive/beneficial effects that mental health facilities have a procedure that provides clear criteria for involuntary administration of psychotropic medications and patients

understand their rights to understand procedures to admission to facility.

3. The Division of Public and Behavioral Health determined the impact on small business by soliciting responses through the Public Workshop and Small Business impact (SBI) questionnaire. SBI Statement was solicited via email to multiple listservs targeting healthcare facilities, Licensing Boards, advocacy and civil rights organizations and their members. Additionally, the information for the Public Workshop, SBI Questionnaire, SBI Statement was also provided online via the State of the Nevada, Division of Public and Behavioral health, Clinical Services web page (Clinical Services Regulation Development web page ). Interested parties could also request a physical copy via email (sent via mail) or in person at the Division of Public and Behavioral Health office located at 4126 Technology Way Carson City, NV 89706.

4. The proposed regulations will not add any cost to the current regulatory enforcement activities conducted by the Division of Public and Behavioral Health.

5. The proposed regulations do not overlap or duplicate any other Nevada state or federal regulations.

6. The proposed regulations do not establish a new fee nor increase an existing fee.

Members of the public may make oral comments at this meeting. Persons wishing to submit written testimony or documentary evidence in excess of two typed, 8-1/2" x 11" pages must submit the material to the Board's Secretary, Lisa Sherych, to be received no later than <u>5 DAYS BEFORE MEETING DATE</u> at the following address:

Secretary, State Board of Health Division of Public and Behavioral Health 4150 Technology Way, Suite 300 Carson City, NV 89706 <u>stateBOH@health.nv.gov</u>

Written comments, testimony, or documentary evidence in excess of two typed pages will not be accepted at the time of the hearing. The purpose of this requirement is to allow Board members adequate time to review the documents.

A copy of the notice and proposed regulations are on file for inspection and/or may be copied at the following locations during normal business hours:

Nevada Division of Public and Behavioral Health 4126 Technology Way, Suite#100 Carson City, NV 89706

Nevada Division of Public and Behavioral Health

Rawson-Neal Psychiatric Hospital 1650 Community College Drive Las Vegas, NV 89146

Nevada State Library and Archives 100 Stewart Street Carson City, NV

A copy of the regulations and small business impact statement can be found on-line by going to: the <u>Clinical Services Regulation Development web page</u> A copy of the public hearing notice can also be found at Nevada Legislature's web page: <u>https://www.leg.state.nv.us/App/Notice/A/</u>

Copies may be obtained in person, by mail, or by calling the Division of Public and Behavioral Health at

Nevada Central Cancer Registry 4126 Technology Wy, Suite 200 Carson City, NV 89706 E-mail: dpbhNCCR@health.nv.gov Telephone: 775-684-5968

Copies may also be obtained from the Nevada State Library at the address listed below:

Nevada State Library & Archives 100 N. Stewart Street Carson City, NV 89701

Per NRS 233B.064(2), upon adoption of any regulation, the agency, if requested to do so by an interested person, either prior to adoption or within 30 days thereafter, shall issue a concise statement of the principal reasons for and against its adoption, and incorporate therein its reason for overruling the consideration urged against its adoption.

Steve Sisolak

Richard Whitley, MS Director



# **D**EPARTMENT OF

**HEALTH AND HUMAN SERVICES** 

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH Helping people. It's who we are and what we do.



Lisa Sherych Administrator

Ihsan Azzam, Ph.D., M.D. *Chief Medical Officer* 

September 6, 2022

# MEMORANDUM

- TO: Jon Pennell, DVM, Chair, State Board of Health
- FROM: Lisa Sherych, Secretary, State Board of Health
- RE: Consideration and adoption of proposed regulation amendment(s) to Nevada Administrative Code (NAC) 433, "Establishing a procedure for determining whether to involuntarily administer psychotropic medication to a patient at a public or private mental health facility; and providing other matters properly relating thereto".

### **GENERAL PROVISIONS**

### PURPOSE OF AMENDMENT

The proposed changes will revise Section 10 of LCB File No. R012-20 and are being proposed in accordance with Nevada Revised Statute 433.324. The proposed regulations establish a Regulation relating to mental health; establishing a procedure for determining whether to involuntarily administer psychotropic medication to a patient at a public or private mental health facility; and providing other matters properly relating thereto.

### **SUMMARY OF CHANGES TO NEVADA ADMINISTRATIVE CODE (NAC) 433**

The proposed changes to NAC 433 include the following:

Sec. 10.

- To initiate the procedures set forth in sections 9-14, inclusive, of this regulation for the involuntary administration of psychotropic medication to a patient at a public or private mental health facility that has established such procedures, the practitioner who is primarily responsible for treating the patient must submit to the director of the facility a request to involuntarily administer psychotropic medication to the patient.
- Clarifies language that the patient must be currently admitted to a public or private mental health facility under an involuntary court-ordered admission pursuant to NRS 433A.200. Clarifies language of type of admission to facility before involuntary administration of psychotropic medication is administered.

- Removes language that allows for involuntary administration of a psychotropic medication for a patient who is admitted under an emergency admission.
- Adds language to clarify the former terminology "unable to care for himself or herself" by setting criteria and needs of client before administration of medication can be determined.

### POSSIBLE OUTCOME IF PROPOSED AMENDMENT IS NOT APPROVED

If the proposed amendments are not approved by the Board of Health; clear definition to the term "unable to care for himself or herself' would not be completed and leaving interpretation inexplicit and without a procedure that provides clear criteria for involuntary administration of psychotropic medications and patients ability to understand their rights to procedures for admission to facility.

### **APPLICABILITY OF PROPOSED AMENDMENT**

The proposed regulations will apply statewide.

### **PUBLIC COMMENT RECEIVED**

A public workshop was also held on August 5, 2022, to gain further information on the proposed regulations on business, including small businesses. Two public comments were received with no negative stated impact to the proposed regulations.

### **STAFF RECOMMENDATION**

Staff recommends the State Board of Health adopt the proposed regulation amendments to Nevada Administrative Code (NAC) 433, "establishing a procedure for determining whether to involuntarily administer psychotropic medication to a patient at a public or private mental health facility; and providing other matters properly relating thereto", LCB file R009-22.

### **PRESENTER**

Joanne Malay, MPH, RN, Deputy Administrator

Enclosures

Draft of Proposed Regulation R009-22 Small Business Impact Statement Notice of Public Workshop

#### **PROPOSED REGULATION OF**

#### THE STATE BOARD OF HEALTH

#### LCB File No. R009-22

#### April 13, 2022

EXPLANATION – Matter in *italics* is new; matter in brackets [omitted material] is material to be omitted.

AUTHORITY: §§ 1 and 2, NRS 433.324.

A REGULATION relating to mental health; revising the conditions under which a practitioner who is primarily responsible for treating a patient may request to involuntarily administer psychotropic medication to the patient; and providing other matters properly relating thereto.

#### Legislative Counsel's Digest:

Existing law requires the State Board of Health to adopt regulations governing the procedure for the involuntary administration of medication to persons with mental illness. (NRS 433.324) Existing regulations authorize the practitioner who is primarily responsible for treating a patient at a public or private mental health facility to initiate that procedure by submitting to the director of the facility a request to involuntarily administer psychotropic medication to the patient under certain circumstances. Specifically, existing regulations authorize a practitioner to submit such a request if: (1) the patient is admitted under an emergency admission or an involuntary court-ordered admission; (2) the practitioner determines that the patient presents a substantial likelihood of serious harm to himself or herself or others or is unable to care for himself or herself without the administration of the medication; and (3) certain other conditions are met. (Section 10 of LCB File No. R012-20) Section 1 of this regulation removes the authorization for a practitioner to submit such a request concerning a patient who is admitted under an emergency admission. Sections 1 and 2 of this regulation also replace language authorizing such a request, and the recommendation to approve such a request, if the patient who is unable to care for himself or herself or others with language authorizing such a request, and the recommendation to approve such a request, if the patient is at serious risk of incurring serious injury or illness resulting from complete neglect of certain basic needs.

Section 1. Section 10 of LCB file No. R012-20 is hereby amended to read as follows:

Sec. 10. To initiate the procedures set forth in sections 9 to 14, inclusive, of LCB File No.

R012-20, for the involuntary administration of psychotropic medication to a patient at a public or

private mental health facility that has established such procedures, the practitioner who is primarily responsible for treating the patient must submit to the director of the facility a request to involuntarily administer psychotropic medication to the patient. Such a request may be made by the practitioner if:

1. The patient is currently admitted to the public or private mental health facility under [an emergency admission pursuant to NRS 433A.150 or] an involuntary court-ordered admission pursuant to NRS 433A.200 [;], *as amended by section 36 of Senate Bill No. 70, Chapter 481, Statutes of Nevada 2021, at page 3086;* 

2. The practitioner:

(a) Determines that the patient presents a substantial likelihood of serious harm to himself or herself or others, as determined pursuant to NRS 433A.0195, or *fis unable to care for himself or herself is at serious risk of incurring serious injury or illness resulting from complete neglect of his or her basic need for food, clothing, shelter or personal safety without the administration of the medication; and* 

(b) Explains to the patient the nature of the condition for which the psychotropic medication is necessary, the basis for the diagnosis of the condition, the benefits and risks of using the medication including, without limitation, possible side effects from use, any alternative treatment and the potential outcome if the condition remains untreated;

3. The patient refuses to provide informed written consent to the administration of the psychotropic medication after receiving the explanation described in paragraph  $\frac{\{(b);\}}{(b)}$  of subsection 2; and

4. The practitioner documents in the medical record of the patient that the provisions of subsections 1, 2 and 3 were satisfied.

Sec. 2. Section 13 of LCB File No. R012-20 is hereby amended to read as follows:

Sec. 13. 1. A patient who is the subject of a hearing held pursuant to section 11 of LCB File No. R012-20 must be allowed to be present during the entire hearing. Unless the patient has indicated in writing or through his or her advisor that he or she will not participate in the hearing, the hearing must not begin until the patient is present.

2. At the hearing, the patient must be allowed to:

(a) Cross-examine any person interviewed by the committee; and

(b) Present evidence and witnesses to the committee.

3. The committee conducting the hearing may interview any person or request any document it deems necessary to assist the committee in making its determination.

4. The committee conducting the hearing shall:

(a) Keep a written, audio or audiovisual record of the hearing;

(b) Prepare a written decision upon the conclusion of the hearing;

(c) Transcribe minutes of the hearing;

(d) Place a copy of the minutes and the written decision of the committee in the medical record of the patient; and

(e) Provide a copy of the minutes and its written decision to the patient.

5. Upon conclusion of the hearing, the committee may recommend approving the request to involuntarily administer psychotropic medication to the patient only if the member of the committee who is a psychiatrist and at least one other member determine that the patient presents a substantial likelihood of serious harm to himself or herself or others, as determined pursuant to NRS 433A.0195, or is [unable to care for himself or herself] at serious risk of incurring serious injury or illness resulting from complete neglect of his or her basic need for food, clothing,

*shelter or personal safety* without the administration of the medication. In making that recommendation, the committee must consider:

(a) Any stated objections of the patient to the administration of the medication;

(b) If the patient has completed an advance directive for psychiatric care pursuant to NRS 449A.600 to 449A.645, any relevant instructions contained in that advanced directive;

(c) Any documents or evidence offered by the patient, including, without limitation, the testimony of any witness;

(d) Whether the condition of the patient is likely to improve if the medication is not administered to the patient and, if so, whether such improvement would be significantly slower than had the medication been administered;

(e) Whether there is a less invasive means to accomplish the same or similar results to those achieved by administration of the medication;

(f) Any prior experience of the patient with taking the medication; and

(g) Any additional factor deemed relevant by the committee. Any such additional factor must be described in the written decision of the committee.

6. The committee shall forward its written recommendation to the director of the public or private mental health facility for review pursuant to section 14 of LCB File No. R012-20.



Director



# **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

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Lisa Sherych Administrator

Ihsan Azzam, Ph.D., M.D. Chief Medical Officer

## SMALL BUSINESS IMPACT STATEMENT 2022

## **PROPOSED AMENDMENTS TO NAC 433**

The Division of Public and Behavioral Health (DPBH) has determined that the proposed amendments to the Nevada Administrative Code (NAC), specifically Chapter 433, will not have a financial impact upon a small business or the formation, operation or expansion of a small business in Nevada.

A small business is defined in Nevada Revised Statutes NRS 233B as a "business conducted for profit which employs fewer than 150 full-time or part-time employees."

This small business impact statement is made pursuant to NRS 233B.0608 (3) and complies with the requirements of NRS 233B.0609. As required by NRS 233B.0608(3), this statement identifies the methods used by the agency in determining the impact of the proposed regulation on a small business in sections 1, 2, 3, and 4 below and provides the reasons for the conclusions of the agency in section 8 below followed by the certification by the person responsible for the agency.

### Background

The proposed regulation related to NRS 433 as amended by LCB File No. R012-20, which authorizes a practitioner responsible for treatment of a patient admitted to a public or private mental health facility to submit a request to involuntarily administer psychotropic medication under certain circumstances. The proposed regulation will remove the request for involuntary administration of a psychotropic medication for a patient who is admitted under an emergency admission. The proposed regulations will also replace current language with updated terminology of a patient is at serious risk of incurring serious injury or illness resulting from complete neglect of his or her basic need for food, clothing, shelter or personal safety.

The reasons for bringing forth these changes include requiring a patient to be court committed to a public or private mental health facility before the ability to involuntarily medicate can be requested.

The language changes give definition to former terminology "unable to care for himself or herself" by setting criteria and needs of client before administration of medication can be determined.

1) A description of the manner in which comment was solicited from affected small businesses, a summary of their response and an explanation of the manner in which other interested persons may obtain a copy of the summary.

Pursuant to NRS 233B.0608 (2)(a), the Division of Public and Behavioral Health has requested input from Hospitals, Licensing Boards of Nursing, Pharmacy, Social Work, Psychiatry, advocacy and civil rights organizations and their members.

A Small Business Impact Questionnaire was sent along with a copy of the proposed regulation changes, on Tuesday, May 31, 2022. The questions on the questionnaire were:

- 1) How many employees are currently employed by your business?
- 2) Will a specific regulation have an adverse economic effect upon your business?
- 3) Will the regulation(s) have any beneficial effect upon your business?
- 4) Do you anticipate any indirect adverse effects upon your business?
- 5) Do you anticipate any indirect beneficial effects upon your business?

### Summary of Response

Summary Of Comments Received Out of the small-business impact questionnaires sent out when the questionnaire was distributed, two (2) responses were recorded as received.			
Will a specific regulation have an adverse economic effect upon your business?	Will the regulation (s) have any beneficial effect upon your business?	Do you anticipate any indirect adverse effects upon your business?	Do you anticipate any indirect beneficial effects upon your business?
1-149	No	n/a	yes
1-150 or more	No	n/a	no

### 2) Describe the manner in which the analysis was conducted.

An online small business impact questionnaire was disseminated via email on Tuesday, May 31, 2022 and responses were received and reviewed. All questionnaire responses were conducted via the web, and none were received via email or mail. The proposed regulations, as well as existing regulations, were reviewed. The Agency Manager and Hospital Administrator and the Quality Assurance Psychiatric Nurse II of Southern Nevada Adult Mental Health Services analyzed the information from the questionnaire to determine if the proposed regulation had an impact on small businesses or if it was existing regulations having an effect and was used to develop this small business impact statement.

- 3) The estimated economic effect of the proposed regulation on the small business which it is to regulate including, without limitation both adverse and beneficial effects and both direct and indirect effects.
  - Direct Beneficial effects:
    - No direct beneficial effects are anticipated.
  - Indirect beneficial effects:
    - No indirect beneficial effects are anticipated.
  - Direct adverse effects:
    - o No direct adverse effects are anticipated.
- 4) Provide a description of the methods that the agency considered to reduce the impact of the proposed regulation on small businesses and a statement regarding whether the agency actually used any of those methods.

The Division of Public and Behavioral Health has held several opportunities for businesses to provide input and comments regarding the proposed NAC 433 regulations, including the economic impact the proposed regulations may have on their business. A public workshop will be held at 10:00 a.m. on Friday, August 5, 2022 allowing for further input by small businesses regarding the proposed regulations and how they will impact their business. These comments will be taken into consideration for possible further revisions to the regulations to reduce the economic impact on facilities.

### 5) The estimated cost to the agency for enforcement of the proposed regulation.

These proposed regulations will not add any costs to the current regulatory enforcement activities from Southern Nevada Adult Mental Health Services.

# 6) If the proposed regulation provides a new fee or increases an existing fee, the total annual amount DPBH expects to collect and the manner in which the money will be used.

The proposed regulations do not provide for a new fee or increase of any existing fee.

7) An explanation of why any duplicative or more stringent provisions than federal, state or local standards regulating the same activity are necessary.

The proposed regulations are no duplicative or more stringent than any federal, state, or local standards.

# 8) Provide a summary of the reasons for the conclusions of the agency regarding the impact of a regulation on small businesses.

In summary the proposed regulations to NAC 433 will not cause an adverse financial impact on the small businesses in Nevada. Furthermore, the terminology enhances the definition and assists to identify those who may receive involuntary psychotropic medication once court ordered for admission to a public or private mental health facility.

Any other persons interested in obtaining a copy of the summary may e-mail, call, or mail in a request to Jo Malay at the Division of Public and Behavioral Health at:

Jo Malay Division of Public and Behavioral Health 6161 W. Charleston Blvd. Las Vegas, NV 89456 (702) 486-4400 Email: jmalay@health.nv.gov

#### Certification by Person Responsible for the Agency

I, Lisa Sherych, Administrator of the Division of Public and Behavioral Health certify to the best of my knowledge or belief, a concerted effort was made to determine the impact of the proposed regulation on small businesses and the information contained in this statement was prepared properly and is accurate.

Loc Shape Date: \_\_\_07/5/2022\_\_\_\_\_ Signature\_\_\_



Director



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH Helping people. It's who we are and what we do.



Lisa Sherych Administrator

Ihsan Azzam, Ph.D., M.D. Chief Medical Officer

# **NOTICE OF PUBLIC WORKSHOP**

NOTICE IS HEREBY GIVEN that the Division of Public and Behavioral Health will hold a public workshop to consider amendments to Nevada Administrative Code (NAC) 433.

The workshop is scheduled to occur at **10:00 a.m. Friday**, **August 5**, **2022** and can be accessed at the following link:

# Microsoft Teams meeting

### Join on your computer or mobile app

Click here to join the meeting

### Or call in (audio only)

+1 775-321-6111,,236416101# United States, Reno

Phone Conference ID: 236 416 101#

Find a local number Reset PIN

Thank you for planning to attend this Teams meeting.

Learn More | Meeting options

These workshops will be conducted in accordance with NRS 241.020, Nevada's Open Meeting Law.

## AGENDA

- 1. Introduction of workshop process
- 2. Presentation on proposed amendments to Nevada Administrative Code 433
- 3. Public comment on proposed amendments to Nevada Administrative Code 433
- 4. General Public Comment

The proposed changes will revise Section 10 of LCB File No. R012-20 and are being proposed in accordance with Nevada Revised Statute 433.324.

The proposed regulations provide provisions for the following:

The proposed regulations establish a Regulation relating to mental health; establishing a procedure for determining whether to involuntarily administer psychotropic medication to a patient at a public or private mental health facility; and providing other matters properly relating thereto.

### NAC 443 is hereby amended as follows:

**Sec. 10.** To initiate the procedures set forth in sections 9 to 14, inclusive, of this regulation for the involuntary administration of psychotropic medication to a patient at a public or private mental health facility that has established such procedures, the practitioner who is primarily responsible for treating the patient must submit to the director of the facility a request to involuntarily administer psychotropic medication to the patient. Such a request may be made by the practitioner if:

- 1. The patient is currently admitted to the public or private mental health facility under an emergency admission pursuant to NRS 433A.150 or an involuntary court-ordered admission pursuant to NRS 433A.200;
- 2. The practitioner:

(a) Determines that the patient *presents a substantial likelihood of serious harm to himself or herself or others,* as determined pursuant to NRS 433A.0195, or the patient is at serious risk of incurring serious injury or illness resulting from complete neglect of basic needs for food, clothing, shelter or personal safety; and

(b) Explains to the patient the nature of the condition for which the psychotropic medication is necessary, the basis for the diagnosis of the condition, the benefits and risks of using the medication including, without limitation, possible side effects from use, any alternative treatment and the potential outcome if the condition remains untreated;

3. The patient refuses to provide informed written consent to the administration of the psychotropic medication after receiving the explanation described in paragraph (b); and

4. The practitioner documents in the medical record of the patient that the provisions of subsections 1, 2 and 3 were satisfied.

Members of the public may make oral comments at this meeting. Persons wishing to submit written testimony or documentary evidence may submit the material to Janet Ashby, Administrative Assistant IV via email <u>jashby@health.nv.gov</u>or by mailing to the following address:

Division of Public and Behavioral Health Lake's Crossing Center 500 Galletti Way Sparks, Nevada 89431 775- 688-6651

Members of the public who require special accommodations or assistance related to the workshops are required to notify Janet Ashby, Administrative Assistant IV, at the above address in writing for the Division of Public and Behavioral Health, or by calling Ms. Ashby, at least five (5) working days prior to the date of the public workshop.

You may contact Joanne Malay, by calling 702-486-8894, for further information on the proposed regulations or how to obtain copies of the supporting documents.

A copy of the regulations and small business impact statement can be found on the Division of Public and Behavioral Health's web page: <u>http://dpbh.nv.gov/Programs/Clinical\_Services\_-\_Administrative\_Health/</u>

A copy of the public workshop notice can also be found at Nevada Legislature's web page: <u>https://www.leg.state.nv.us/App/Notice/A/</u>

Copies may be obtained by mail, or by calling the Division of Public and Behavioral Health at (775) 688-6654.

Per NRS 233B.064(2), upon adoption of any regulations, the agency, if requested to do so by an interested person, either prior to adoption or within 30 days thereafter, shall issue a concise statement of the principal reasons for and against its adoption, and incorporate therein its reason for overruling the consideration urged against its adoption.