Joe Lombardo Governor

Richard Whitley, MS 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

DRAFT MEETING MINUTES STATE BOARD OF HEALTH

Special Session

January 20, 2023 9:00 am

MEETING LOCATIONS:

This meeting was held virtually via Microsoft Teams and by phone.

Physical Meeting Locations:

This meeting was held on a virtual and teleconference platform only.

Online Meetings Link:

https://teams.microsoft.com/l/meetupjoin/19%3ameeting_OTY1OWY2NzAtYTcxNy00MDg2LTlmY2QtNDcxNDRiZDI5Mjdl%40thread.v2/0?context=%7b %22Tid%22%3a%22e4a340e6-b89e-4e68-8eaa-1544d2703980%22%2c%22Oid%22%3a%22e2f9f008-841c-437d-b037-927c30ea003e%22%7d

Phone Number:

+1-775-321-6111 Phone Conference ID Number: 498 364 0#

1. CALL TO ORDER/ROLL CALL – Dr. Jon Pennell, Chair

BOARD MEMBERS PRESENT:

Dr. Jon Pennell, DVM (online) Dr. Trudy Larson, M.D. (online) Ms. Judith Bittner (online) Charles Smith (online)

BOARD MEMBERS ABSENT EXCUSED:

Dr. Monica Ponce, DDS Dr. Jeffery Murawsky, M.D.

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH (DPBH) STAFF PRESENT:

Autumn Blattman, Executive Assistant, Division of Public and Behavioral Health (DPBH); Lisa Sherych, Administrator, DPBH; Sherry Stevens, Administrative Assistant III, DPBH; Cody Phinney, Deputy Administration, DPBH; Kayla Villegas, Administration Assistant III, DPBH; Shannon Bennett, Bureau Chief, DPBH; Misty Vaughan Allen, Statewide Suicide Prevention Coordinator, SMHA-OSP, DPBH; Frederick Pilot, Health Program Specialist I, DPBH; Stephanie Cook, Health Program Manager I, DPBH; Stephanie Herrera, Program Officer III, DPBH; Bobbie Sullivan, EMS Rep II,

DPBH; Shana Rhinehart, Management Analyst I, DPBH; Janice Hadlock Burnett, Bureau Chief, DPBH; Shannon Scott, Quality Assurance Specialist III, DPBH; Tiana Jones, Health Program Specialist II, DPBH; Brooke Maylath, Health Facility Inspector, DPBH; Teresa Hayes, Health Program Manager III, DPBH; J'Amie Webster-Frederick, Health Program Officer I, DPBH

OTHERS PRESENT:

Dorothy Edwards, Washoe Regional Behavioral Health Policy Board (WRBHPB); Dr. Tedd McDonald, Acting County Health Officer, Central Nevada Health District; Mark E Disselkoen, University of Nevada Reno (UNR); J. Malikowski; Mary McVicker; Shannon Litz, Public Information Officer, Department of Health and Human Services (DHHS); Sandy Stamates, WRBHPB; Sabrina Brasuell; Jacqui Ragin; Kelly Marschall, President, Social Entrepreneurs, Inc.; Ben Byrd, Outside Council, Charter Communications; Lyndsey Tsiopos; Abigail Bailey, Social Services Program Specialist II, Division of Healthcare Financing and Policy (DHCFP); Ankita Makhani; Lori L. Bauman, Clark County School District; Gerard Keegan, CTIA; Valerie Cauhape, Rural Regional Behavioral Health Policy Board (RRBHPB); Alyson McCormick, City of Sparks; Misty Grimmer; Vice President, The Ferraro Group; Pierron E. Tackes, Deputy Attorney General (DAG); Shelley Polanco, Vibrant; Helen Foley; AJ Holly Huth, Youth Services Manager, The LGBTQ+ Community Center of Southern Nevada; Dr. Fermin Leguen, District Health Officer, Southern Nevada Health District (SNHD); Andre Wade: Michael Frye, Senior Systems Director, Signature Healthcare Services; Elyse Monroy-Marsala, Senior Systems Director, UNR; Linda Anderson, Public Health Policy Analyst, Nevada Public Health Foundation; Julia Ratti, WRBHPB; Amanda Brock, Community and Marketing Manager, Quest Counseling; Barry Cole, Nevada Psychiatric Association; Allison Genco, Public Health Resource Officer, Governor's Office; Mark DiNuzio, CCI Southwest; Keibi Mejia; Lea Case, Nevada Psychiatric Association; Donna Laffey, Ferrari Reeder Public Affairs; Vanessa Dunn, Outreach Coordinator, Nevada Literacy Council; LL Papert, Silver State Equality; Lana Robards, Northern Regional Behavioral Health Policy Board (NRBHPB); Erin Walker, Project AWARE Manager, Nevada State Public Charter Schools Authority; Joseph Filippi, Jr., Nevada Rural Hospital Partners; Tiffany Smink, Charter Communications; Jack Mayes, Executive Director, Nevada Disability Advocacy and Law Center; Camalot Todd, Writer and Reporter, Nevada Current; Scott Philips.

Chair Pennell called the meeting to order and opened the meeting at 9:00 a.m.

Roll call was taken, and it was determined that a quorum of the State Board of Health was present.

2. ACTION ITEM: Review and Approval of meeting minutes from December 2, 2022 – Jon Pennell, Chair

Chair Pennell asked if there were any additions or corrections to the December 2nd, 2022, Board of Health meeting minutes. No objections to the meeting minutes were expressed.

CHAIR PENNELL REQUESTED A MOTION FOR THE APPROVAL OF THE DECEMBER 2ND, 2022 BOARD OF HEALTH MEETING MINUTES. A MOTION BY DR. LARSON TO APPROVE THE DECEMBER 2ND, 2022 BOARD OF HEALTH MEETING MINUTES WAS MADE AND SECONDED BY MR. SMITH. THE MOTION PASSED UNANIMOUSLY.

3. <u>ACTION ITEM</u>: Consideration and Possible Adoption of Proposed Temporary Regulation Amendments to Chapter 433 of Nevada Administrative Code (NAC), relating to the 988 surcharge, in compliance with SB 390. The proposed temporary regulation amendments will impose a surcharge on telecommunications access lines with the proceeds deposited in the Crisis Response Account in the state General Fund to fund the implementation of the 988 National Suicide Prevention Lifeline, support centers and mobile crisis teams for persons considering suicide or experiencing behavioral health crisis. – *Frederick Pilot, Policy Coordinator, Bureau of Behavioral Health Wellness and Prevention, DPBH*

Mr. Frederick Pilot, Policy Coordinator for the Bureau of Behavioral Health Wellness and Prevention, Division of Public and Behavioral Health presented on the temporary regulation amendments to Chapter 433 NAC, relating to the 988 surcharge. Ms. Shannon Bennett, Bureau Chief and Ms. Shannon Scott, Manager of the Crisis Response section, were also available for questions. Mr. Pilot stated the temporary regulation is mandated by provisions of SB390 requiring the Board of Health to adopt regulations that would impose a monthly surcharge on specified telecommunication lines to support the National Suicide Prevention Lifeline program. Mr. Pilot said the program designates the three-digit number 998 as the universal hotline for persons considering suicide, experiencing behavioral health crisis, or for support of people worried about a loved one in crisis. The hotline offers 24-hour call, text, and chat access to crisis counselors.

Mr. Pilot explained that with the enactment of SB390 in 2020, Nevada opted to participate in the Federally authorized program. Mr. Pilot said the proposed regulation will levy a monthly surcharge of \$.35 on mobile and landlines to be deposited into the crisis response account of the General Fund to fund the newly created crisis response section within the division. Mr. Pilot explained the tiers of response and how the system would permit communication between persons and entities to respond to the crisis and coordinate care. Mr. Pilot said the surcharge is intended to be collected by telecommunications providers and transferred to the Division. It is projected to generate 1.26 million per month and 15 million annually to support the crisis response section within the Division. Mr. Pilot said the use of the funds is restricted to the crisis response section and may not supplant existing methods of funding that are available for crisis services.

Mr. Pilot explained that any funds remaining at the end of the year will not revert to the general fund but will carry over until the next year. Mr. Pilot said the telecommunications providers will have to report annually on the number of lines in service subject to the surcharge to provide assistance with revenue projections and assess compliance. Mr. Pilot said the regulation takes effect 90 days after it is filed with the Secretary of State allowing the telecommunication providers adequate time to set up their billing systems to impose the surcharge. Mr. Pilot concluded by saying that written comment was received during the public workshop to revise some of the language in the regulation and that the Bureau will continue to work with the cable industry stakeholders to develop a permanent regulation to be brought back before the Board of Health following the end of the legislative session.

Chair Pennell asked if there were any questions from the Board regarding the temporary regulation.

Dr. Trudy Larson asked Mr. Pilot about the specific requests that were made from Charter Cable and if there is a process going forward in terms of moderating these regulations.

Mr. Pilot said they are working with Charter as well as Cox regarding the comments made at the public workshop and are working with them to address their concerns.

No further questions were asked by the Board and Chair Pennell opened the floor to public comment.

Ms. Valerie Haskin, Rural Regional Behavioral Health Coordinator provided public comment for the record. Ms. Haskin stated that she was unaware of this meeting until recently and submitted written public comment in support of the surcharge to pay for 988 and crisis services to the email address but also wanted to make a comment that they believe the state desperately needs sustainable funding streams to support crisis services that have only become more needed over the last several years.

Ms. Allison McCormick from the City of Sparks provided public comment for the record. Ms. McCormick said she was calling in support of the proposed 988 fee. Ms. McCormick said they believe at the city of Sparks that it will benefit Nevadans by preventing potential suicides by Nevadans experiencing behavioral health crises and providing the right resources to help stabilize them and prevent future crisis incidents. The City of Sparks also believe that it will benefit cities and our public safety agencies by diverting calls to 911 to 988 to get those folks the services and resources that they truly need. It will also mitigate potentially dangerous encounters between law enforcement officers who may not have the training or expertise to deal effectively and safely with folks who are undergoing those behavioral health crises. The City of Sparks also believe that those revenues that the 988 fees exclusively dedicated to crisis response would support all of those goals and public safety more generally.

Ms. Julia Ratti, Chair of the Washoe Regional Behavioral Health Board provided public comment for the record. Ms. Ratti stated that she is the Chair of the Washoe Regional Behavioral Health Board and was also the Chair of the Senate Health and Human Services Committee that sponsored SB390 to move this issue forward. Ms. Ratti said she urged the Board to support of this set of regulations . Ms. Ratti said this is one of many building blocks that we are working across

the state and locally to transform our response to a person experiencing a behavioral health crisis. Ms. Ratti said she want to commend the state of Nevada. The staff in the Department of Public and Behavioral Health that have worked diligently with their partners over in Medicaid to make sure that we are doing everything that we can to have a sustainable business model for a crisis system of care but we know that we cannot rely on government or private payer insurance systems for the entire system, as there are always folks who are uninsured or just unable to be covered through those systems. Ms. Ratti said she know that this is an essential piece of gap funding to make sure that the person who is experiencing a behavioral health crisis always has someone to call. If that doesn't work, someone to come to them, and if that doesn't work, someplace to go. Ms. Ratti said she would like to highlight that this is very likely. It has been proven in other communities that have implemented this type of a system to reduce costs, more specifically to reduce the number of individuals who end up in the emergency room and reduce the number of people who end up in jails. Ms. Ratti said it is better for the patients, better for our communities and she strongly urge the Board to support these regulations for this key component of make the system sustainable and available for Nevadans for many years to come.

Mr. Gerard Keegan with CTIA provided public comment for the record. "Mr. Keegan introduced himself to the board as being with CTIA, the Trade Association for the wireless communications industry. Mr. Keegan said that CTIA has two technical amendments which came to light recently with the proposed temporary regulations. One of those was that Section two defines commercial mobile communication services as having the same meaning as ascribed to it at 47 US code 332. Mr. Keegan said he would suggest the following amendments. First, that commercial mobile communication services have the same meaning as ascribed to it as commercial mobile service in 47 US code, 332D332-D uses commercial mobile service and not commercial mobile communication services. The other update would be to Section five that the first sentence references all providers of telecommunications services identified in Section 1. Mr. Keegan said telecommunication provider is defined in Section two, Subsection one of the proposed temporary regulations, so Section five should state quote" all providers of telecommunications services identified in Section two". Mr. Keegan concluded by saying he appreciated all the work by the Board and staff bring them together in working on these regulations.

After Mr. Keegan's public comment, Chair Pennell offered presenter Mr. Frederick Pilot an opportunity to respond. Mr. Pilot stated that he thanked Mr. Keegan for the technical amendments and that the Bureau would look at them.

Mr. Nate Mills provided public comment for the record. "Mr. Mills wanted to bring attention to a matter of funding and source funding between Dr. Zack Bush and Dr. Shannon Swan, just the two of them. Mr. Mills said he did not know if the Board members were aware of their work, but Dr. Bush and Dr. Swan work in environmental effects on mental health. Mr. Mills stated that Dr. Zach has worked with the Roundup chemical affecting the synthesis of amino acids and how that affects the long-term development of the amino acids as they affect the body, affecting genetic code. Mr. Mills said he believed there is enough data over the last five years to hold companies accountable and should be providing funds for mental health. Mr. Mills stated these companies have more money than God and are zapping the data with their own counter narratives for upwards of 20 years. Mr. Mills said if we are to help ourselves he thinks pressing these companies will work, in the short term allowing some sort resolution or settlement. Mr. Mills also mentions that Dr. Bush's projections of autism per capita will go to one in three by 2037. Mr. Mills concluded by stating he believed the Board should be aware of the work of Doctor Shannon Swan and Doctor Zach Bush

Ms. Sandy Stamates with Washoe Regional Behavioral Health Policy Board provided public comment for the record. Ms. Stamates began by stating that she is a member of the Washoe Regional Behavioral Health Policy Board and a volunteer with NAMI, the National Alliance on Mental Illness, and that she supports and urged the State Board of Health to approve the temporary regulations. Ms. Stamates said that as a family member of an individual living with mental illness she has had to call the crisis Call Center that is currently run by Crisis Support Services of Nevada. Ms. Stamates said they were so helpful to her and my family member. Ms. Stamates said her family has experienced police response numerous times

over the last 25 years, although there have been officers who have been helpful. Ms. Stamates said believe that what her loved one needed was someone who understood mental illness and was able to deescalate the situation and provide the correct help needed to get the crisis under control. Ms. Stamates stated that the new 988 number is operational and already making a difference for families and individuals in behavioral health crisis. Ms. Stamates said funding for the crisis response account will ensure Nevada is able to meet best practice criteria found in Sam's national guidelines for behavioral health crisis care. Ms. Stamates said fully trained operators in a crisis call center and functioning crisis response system that provides 24/7 mobile crisis response and crisis stabilization centers, must be the standard Nevada pursues and implements. MS. Stamates concluded by saying a fully functioning crisis response system will save money and save lives.

Ms. Dorothy Edwards, Washoe Regional Behavioral Health Policy Board Coordinator provided public comment for the record. Ms. Edwards introduced herself to the Board by stating that she is the Washoe Regional Behavior Health Coordinator and was speaking on behalf of Washoe County Human Services Agency, Ms. Edwards stated that the Washoe County Human Services Agency strongly support the approval and ultimate implementation of this regulation.

Mr. Ben Byrd counsel for Charter Communications provided public comment for the record. Mr. Byrd introduced himself as outside counsel for Charter Communications. Mr. Byrd said it has already been noted that Charter has submitted written comments in this case and participated in the earlier workshop in order to raise various concerns that Charter has with the shape of regulations in particular, as CTIA noted, we have concerns with the technical definitions regarding which services are captured, and also the application of the surcharges to those various services. Mr. Byrd said he and his client understand that this is just a temporary rulemaking and that there is going to be a final rulemaking later. Mr. Byrd concluded by saying they look forward to continuing to work with the Board on address the issues during the final round.

Mr. Barry Cole with the Nevada Psychiatric Association provided comment for the record. Mr. Cole began by stating that he is with the Nevada Psychiatric Association though he was not officially speaking on behalf of that organization. Mr. Cole stated that he would like to let the Board know that many of members of the Nevada Psychiatric Association have been following the regulation since it was enabled by legislation to implement. Mr. Cole stated that the Association does support the idea of a robust 988 system, and he would advocate that front end funding is essential to set the mechanism in place. Mr. Cole said he understands that there are concerns that perhaps there should be graduated fees that could go from \$0.10 per line to \$0.15 per line over time, but it might make more sense to put more effort in in the beginning. Mr. Cole recalled how the Nevada Psychiatric Association independently stood up what was called Curbside Nevada, a program where they were available to physicians, nurses, respiratory therapists who were on the front line of the pandemic and had no one to turn to. Mr. Cole said the Association had it up and running in three weeks and operated it through June of 2000 when state resources were able to be fully implemented. Mr. Cole said supported the idea that we get behind 988. Mr. Cole concluded by stating that if the program is done well, then maybe in the future the fee can be lowered but starting out with enough funding and being fully capitalized will allow help for many people who really want this kind of service.

Ms. Amanda Brock with Quest Counseling provided public comment for the record. Ms. Brock introduced herself commenting on behalf of Quest Counseling. Ms. Brock stated that she is the community and marketing manager. Ms. Brock said that Quest would like to voice its support for the regulation as it will ensure sustainable funding to provide the 988 service. Ms. Brock said the service will greatly benefit not only behavioral health providers, but also government and public safety agencies by diverting calls from Nevadans in behavioral health crisis that would normally be made to 911 to this new 988 service. Ms. Brock said the service will reduce utilization of public safety, first responders and hospital emergency rooms. Ms. Brock said the 988 service will also help to lower potentially dangerous encounters where law enforcement may lack training in deescalate a behavioral health crisis situation. Ms. Brock concluded by saying that Quest Counseling strongly urges the State Board of Health to support this new regulation.

Ms. Kelly Marschall provided public comment for the record. Ms. Marschall stated she was calling in to strongly support the fee as established in the temporary regulations. Ms. Marschall said that she believes it is a once in a generation change systemically that will support persons in a behavioral health crisis or experiencing suicidal ideology. Ms. Marschall

concluded by say that this is an opportunity that will benefit all individuals throughout Nevada as we help our friends, our family and our neighbors get the much needed help they need.

CHAIR PENNELL REQUESTED A MOTION ON POSSIBLE ADOPTION OF THE PROPOSED TEMPORARY REGUILATION ADMENDMENT TO CHAPTER 433 OF NEVADA ADMINISTRATIVE CODE RELATING TO THE 988 SURCHARGE IN COMPLIANCE WITH SB 390. A MOTION TO APPROVE THE TEMPORARY REGULATION WAS MADE BY DR. LARSON AND SECONDED BY CHARLES (TOM) SMITH. THE MOTION PASSED UNANIMOUSLY.

4. ACTION ITEM: Consideration and Possible Adoption of Proposed Regulation Amendments to Chapter 450B of Nevada Administrative Code (NAC), LCB File No. R105-22. The proposed regulations clarify the effect of criminal convictions on background checks and fingerprinting submissions. – *Bobbie Sullivan, Emergency Medical Services Representative, DPBH*

LCB File No. R105-22 was pulled from consideration and will be placed on a future agenda.

5. ACTION ITEM: Consideration and Possible Adoption of Proposed Regulation Amendments to Chapter 440 of Nevada Administrative Code (NAC), LCB File No. R111-22. The proposed regulation will clarify information relating to vital records, including time constraints, how to fill out the cause of death, determining responsibility for signing a death certificate, requirements for home and delayed birth registrations, language replacements on foreign birth certificates, requirements for paternity and parentage, residency requirements during adoption, and provide Gender Identity options on death certificates and the evidence needed to correct the gender on a death record. - *Stephanie Herrera, Program Officer, Office of Vital Records, DPBH*

Ms. Stephanie Herrera, Program Officer III for the Office of Vital Records presented on LCB File No. R111-22, proposed regulation to clarify information relating to vital records amending Chapter 440 of Nevada Administrative Code. Shana Rhinehart, Management Analyst I was also available to answer questions. Ms. Herrera stated the Office of Vital Records took the opportunity to review the entire regulation and propose some other changes to hopefully make them clearer. Ms. Herrera said the Office reached out to numerous stakeholders for their input, including but not limited to Washoe and Clark County medical examiners and the county health departments. The proposed regulation changes align the signing limits, time limits of physicians with the INRS clarifies the language on how a medical certifier fills out the medical portion of a death certificate. Ms. Herrera also said the regulation would clarify who is responsible for signing death certificates, including when a coroner or medical examiner needs to sign a death record. The regulation would also clarify responsibility of transferring the death record from one Funeral Home to another and clarify the paternity identification requirements as well as clarifying the process for English translation of a foreign birth certificate for use in the United States. Ms. Herrera said the regulation would also provide guidelines for gender identity of decedents and their correction and to clarify required documentation for a delayed birth certificate.

Ms. Herrera informed the Board that a small business Impact Questionnaire was sent and there were no direct adverse impacts noted nor were there any concerns to address during public workshop.

Chair Pennell asked for questions from the Board Members or public comment on the regulation. None heard.

CHAIR PENNELL REQUESTED A MOTION ON POSSIBLE ADOPTION OF LCB FILE NUMBER R111-22, AMENDMENT TO NAC CHAPTER 440A. A MOTION TO APPROVE THE REGULATION WAS MADE BY JUDITH BITTNER AND SECONDED BY TRUDY LARSON. THE MOTION PASSED UNANIMOUSLY.

6. ACTION ITEM: Consideration and Possible Adoption of Proposed Regulation Amendments to Chapter 458 of Nevada Administrative Code (NAC), LCB File No. R117-22. The proposed regulation will update language relating to substance use prevention and treatment agency certifications throughout Nevada. - *Stephanie Cook, Health Program Manager I, Substance Abuse Prevention and Treatment Agency, DPBH*

Ms. Stephanie Cook, Health Program Manager with the Bureau of Behavioral Health Wellness and Prevention present LCB File #117-22 amending Nevada Administrative Code 458, proposing updated language regarding substance use prevention and treatment agency certifications. Ms. Cook said a certification for substance use, treatment and prevention agencies as outlined in NRS and NAC 458, specifically, requirements for certification are specified in NYC 458 certification ensures entities are providing quality substance use services, aligning with proper clinical protocols and procedures. Ms. Cook continued by telling the Board that during the 81st legislative session in 2021, SP 69 was passed, codified now as NRS 458.033. This was a comprehensive bill with various provisions, one of which requiring the State Board of Health to adopt regulations providing for the certification and duties of substance use disorder prevention coalitions, which are coalitions of persons and entities who possess knowledge and experience related to the prevention of substance misuse and substance use disorders and regions of the state. Ms. Cook said this also gave the Bureau the opportunity to clean up language within our regulations to remove stigma relating to the use of substances. Ms. Cook said it gives the Bureau the opportunity to establishing provisions relating to substance use disorder prevention coalitions, revise definitions related to alcohol or other substance related disorders and revise the documentation that an operator of a program to address substance related disorders. Ms. Cook said it would also clean up language concerning the fees charged and collected for the certification and recertification of programs and services provided by the programs as well as imposing on an operator of a program certain requirements related to confidentiality and record keeping, revise requirements concerning systems for maintaining records of members of the staff of a program, increase the passing score on an exam for certification as a detoxification technician, and replace language not preferred for use regarding alcohol and substance use disorders and programs.

Ms. Cook concluded by mentioning that in section nine the Bureau is requesting Legislative Council Bureau (LCB) to update the language to add text revision to the diagnostic and Statistical Manual of Mental Disorders (DSM). Instead of documenting the 5th edition to eliminate the need for further revisions when the publication is updated, we encourage your support and approving the proposed revisions to NAC 458.

Chair Pennell asked if there were questions from the Board. Dr. Larson commented that she commended the staff for the thoroughness of the proposed regulations. No further questions. The floor was opened to public comment.

Mr. Nate Mills provided public comment. Mr. Mills asked if there is any infrastructure or thought into post clinical treatment? Mr. Mills said substance abuse is largely a behavior thing where five basic situations perpetuate it. Mr. Mills asked if there is any thought into post treatment such as groups or social things? Mr. Mills stated that it has been shown in Europe that behaviors like depression and other anxiety conditions are lower with they can contribute and are socialized. Mr. Mills asked if there is any funding or groups that get involved with agriculture or other kinds of groups contributing to socialization? Mr. Mills asked if there were programs like the infrastructure for Veterans Affairs, but a civilian rehabilitation program?

Ms. Autumn Blattman, Executive Assistant, and support for the Board of Health, reminded public members that public comment is usually meant for comment and often times we are unable to provide answers back to questions. She directed them to the Board of Health email address on the agenda if they would like to email and connect with staff that can provide information.

CHAIR PENNELL REQUESTED A MOTION ON POSSIBLE ADOPTION OF LCB FILE #R117-22, AMENDMENT TO NAC CHAPTER 458. A MOTION TO APPROVE THE REGULATION WAS MADE BY CHARLES (TOM) SMITH AND SECONDED BY TRUDY LARSON. THE MOTION PASSED UNANIMOUSLY.

7. ACTION ITEM: Consideration and Possible Adoption of Proposed Regulation Amendments to Chapter 441A of Nevada Administrative Code (NAC), LCB File No. R153-22. The proposed regulation adds new language to NAC 441A defining suicide attempts, specifies healthcare providers and settings subject to mandatory reporting of attempted suicides, specifies patient information designated health care providers and settings must report, and establishes procedural requirements for reporting of attempted suicides. - *Misty Vaughan*

Allen, Suicide Prevention Coordinator, Office of Suicide Prevention, DPBH

Ms. Misty Vaughan Allen, Suicide Prevention Coordinator with Behavioral Health, Wellness and Prevention, present LCB File #R153, amending NAC 441A. The proposed regulation would new language defining suicide attempts, specify who must report attempted suicides, and establish procedural requirements for reporting attempted suicides. Ms. Vaughan Allen said the Bureau is asking for your approval to revise Nevada Administrative Code 441, an infectious diseases reporting concerning communicable diseases, overdose, and attempted suicides right before the pandemic. Northern Nevada experienced several deaths of our youth by suicide in a very short amount of time. At that point in time, we were drafting emergency regulations when the pandemic hit and all energy turned toward monitoring and reporting that COVID data toward the fall of the shutdown, we saw another spike in youth suicide in Southern Nevada. We felt emergency suicide attempt reporting regulations needed to be revisited. Ms. Vaughan Allen said this was the opportunity to utilize a data reporting system to gather crucial information and take quick and effective actions to mitigate suicide risk for those who have attempted suicide to implement this data. Reporting quickly and without having to create a burdensome new methodology, it was decided to use the same reporting mechanism as the overdose reporting system developed in 2018. Ms. Vaughan Allen said this was important because those surviving a suicide attempt most often will not go on to attempt suicide again if they are connected to the right treatment, resources, and systems of support. We reached out to numerous stakeholders specifically, including the Nevada Hospital Association and Nevada Rural Hospital partners, to hear concerns and language was adjusted to meet those concerns. So, a summary of LBC file R153-22 amending NAC Chapter 441 is in compliance with SB 181.

Ms. Vaughan Allen said the proposed language defines attempted suicide for the purposes of reporting attempted suicide, specifies health care providers require to report a case of attempted suicide, and the information and procedures for submitting reports. Additionally, the proposed amendment would require the division to compile an annual report summarizing the information submitted to the Chief Medical Officer of the affected healthcare providers and submit the report to the Patient Protection Commission created by NRS 439.908. Ms. Vaughan Allen stated that healthcare providers affected by the proposed amendment are community triage centers and hospitals, including rural and psychiatric hospitals. The reporting of a suicide attempt or suspected suicide attempt should occur no later than 30 days after discharging the patient. Healthcare providers required to report a case of attempted or suspected suicide. Ms. Vaughan Allen concluded by saying those that willfully fail, neglect, or refuse to comply with this requirement would be guilty of a misdemeanor subject to an administrative fine of \$1000 for each violation, as determined by the Board of Health.

Chair Pennell heard no questions from the Board and opened the floor for public comment.

Mr. Barry Cole with the Nevada Psychiatric Association provided public comment. Mr. Cole introduced himself again reminding the Board that he is a psychiatrist and member of the Nevada Psychiatric Association. Mr. Cole stated that the Association is obviously in favor of anything that helps get people in crisis to services. Mr. Cole said he understands the desire to have this legislation and a more robust understanding of the dynamics that lead people to suicide. Please recall this is often a very impulsive decision that happens in a matter of minutes. Mr. Cole said that may complicate whether it is always be reported. Mr. Cole stated that in his more than 40 years as a psychiatrist, he has had many patients tell him after the fact that they attempted suicide, but slept through it and got back on with their lives. Mr. Cole said it is important to measure as many suicide attempts as possible and thinks this would be most interesting to rural facilities where there is an under service of mental health professionals. Mr. Cole said that in Washoe and Clark County there will still be a need to track suicide attempts and whether there is fundamental difference from accidentally overdose in the overdose and those who deliberately attempt to overdose. Mr. Cole said what is called an accident may or may not be. Mr. Cole concluded by saying he applauds any efforts to get more information and is certain his colleagues in the Nevada Psychiatric Association would like to work with the State evaluating this information.

CHAIR PENNELL REQUESTED A MOTION ON POSSIBLE ADOPTION OF LCB FILE #R153-22, AMENDMENT TO NAC CHAPTER 441A. A MOTION TO APPROVE THE REGULATION WAS MADE BY

CHARLES (TOM) SMITH AND SECONDED BY TRUDY LARSON. THE MOTION PASSED UNANIMOUSLY.

8. ACTION ITEM: Recommendations for future agenda items. – State Board of Health Members

There were no recommendations made by the Board members.

9. GENERAL PUBLIC COMMENT (Action may not be taken on any matter brought up under this agenda item until scheduled on an agenda for a later meeting)

No additional public comment was provided.

10. Adjournment – Jon Pennell, Chair

Chair Pennell thanked everyone for their hard work and adjourned the meeting at 9:51 am.