Steve Sisolak 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* 

### DPBH COMMISSION ON BEHAVIORAL HEALTH STAFFING LETTER MEETING MINUTES October 14<sup>th</sup>, 2021 9:00 AM

MEETING LOCATIONS: This meeting was held online and by phone.

Join Online Zoom Meeting link: <u>https://zoom.us/j/98649624990?pwd=akxBOWRIZWViNIVBNE14NnpsT0Z2dz09</u> Meeting ID: 986 4962 4990 Passcode: 736651

Join by Phone Phone Number: +1 669 900 9128 US (San Jose) Meeting ID: 986 4962 4990 Passcode: 736651

# 1. Call To Order/Roll Call:

# COMMISSIONERS PRESENT:

Lisa Durette, M.D. (Chair), Lisa Ruiz-Lee (Vice Chair), Natasha Mosby, LCSW, Gregory Giron Psy.D., Arvin Operario, RN, Billie J. Miller, Dan Ficalora, CPC

# COMMISSIONERS EXCUSED:

Braden Schrag, Jasmine Troop,

# Department of Health and Human Services (DHHS) Staff:

Joseph Filippi, Executive Assistant, DPBH; Rex Gifford, Administrative Assistant III, Lisa Sherych, Administrator, DPBH; Joanne Malay, Deputy Administrator, DPBH; Theresa Wickham, Agency Manager, LCC; Lisa Sherych, Administrator, DPBH; Susan Lynch, Hospital Administrator, SNAMHS; Joanne Malay, Deputy Administrator, DPBH; Stanley Cornell, Agency Manager, Stein Forensic Facility; Christina Brooks Agency Manager, NNAMHS; Ellen Richardson-Adams, Outpatient Manager, SNAMHS; Julian Montoya, Clinical Program Manager II, ADSD; Dr. Betsy Neighbors, Statewide Forensic Director, DPBH; Dena Schmidt, Administrator, ADSD; Domonique Rice, Deputy Division Administrator, DCFS; Gujuan Caver, Clinical Program Manager II, ADSD; Jessica Adams, Deputy Division Administrator, ADSD; Katy Martin Waldman, Clinical Program Manager II, DCFS; Marina Valerio, Agency Manager, ADSD

#### Others/Public Present:

Alex Tanchek, Silver State Government Relations; Dana Gentry, Journalist; Valerie Balen Belz and Case Government Affairs; Michelle Bennett

Chair Durette called the meeting to order at 9:01 a.m. Roll call is reflected above. It was determined that a quorum was present.

Chair Durette asked if everyone in the meeting could identify themselves. Mr. Filippi went through all of the list of attendees. All attendees are listed above. Additionally, Mr. Filippi let the Commission know that Commissioners Schrag and Commissioner Troop were unable to attend the Commission on Behavioral Health meeting this morning, but they give their full support to the Commission for this letter.

#### 2. <u>Public Comment:</u>

Chair Durette asked if there was any public comment. There was no public comment.

# 3. <u>FOR POSSIBLE ACTION</u>: Discuss, review, and approve the drafted letter from the Commission regarding the need to address staffing shortages in the state adult psychiatric facilities and regional centers. *– Lisa Durette, M.D., Chair*:

Chair Durette recapped the staffing issues brought up in the Agency Director's Reports presented in the previous Commission on Behavioral Health meeting from September 23<sup>rd</sup>, 2021, such as recruitment and retainment of staff. This issue is getting worse. The last meeting the Commission learned that some of the SLA's have been closing because of their inability to have adequate staffing. The Commission knows that there have been issues with staffing recruitment and retainment throughout the state. This has become worse since the pandemic.

Mr. Filippi shared his screen which had the editable draft of the Staffing Letter to the Governor and agreed to make changes to the draft Staffing Letter to the Governor as the Commission suggested edits.

Chair Durette continued recapping the September 23<sup>rd</sup>, 2021, Commission on Behavioral Health meeting reminding the Commission that the Commissioners made a motion to assert a declaration for the support of the Agencies and Agency Staff. The Commission has been charged with advocating for, and supporting, the best care for the patients that are served by the mental health services within the State of Nevada, and we are not doing a good job as a state right now. As a group we made a motion to create this draft letter to send to the legislature and the governor to point out the salary gaps. The salaries for the frontline workers that are mental health technicians working at the various agencies is significantly less than they can get working at Amazon or Walmart. Thus, the letter was crafted. We are all here to edit the letter, approve it and send it to the legislators and the governor.

Chair Durette asked the Commission to look at the letter and help refine the letter. Then Chair Durette asked the Agency Directors what the hourly rate is for frontline workers at their facilities. Chair Durette stated that she tried to find the frontline workers hourly rate online and that she was unable to. Chair Durette knows the salaries of some of the individuals working at the facilities as frontline workers antidotally, but she would like the exact salary information to put into the letter. Chair Durette noted that there were some grammatical errors that need to be corrected in the letter too.

Chair Durette then opened the meeting to the Commission for edits and amendments to the letter.

Commissioner Miller stated that in addition to the salary that they are being paid it was brought up often was the amount of time that it is taking to hire. That is important to put into the letter because that is going to play into whether or not the agencies can get employees hired a timely manner because there are other individuals leaving, so if the agencies can provide the Commission with specific information about what turnover is looking like that would be important to add into the letter as well because all of these things are going to affect the care, or lack of care, that our citizens are receiving.

Chair Durette thanked Commissioner Miller for her comments and asked Mr. Filippi to make a placeholder in the letter to make a paragraph that talks about from the time a new hire is identified to the time that they can start working is a significant gap, like 3 months. Chair Durette then asked if anyone on in the meeting knew the average onboarding time frame?

Ms. Malay stated that it really varies depending upon the applicant and their references. It can be as quick as a week to two, or sometimes it unfortunately takes a month or more. There is quite a range and quite a challenge at times insuring that all documentation is gathered so we can follow up on those references.

Chair Durette asked about the turnover rate. Every meeting Agency Director's report their vacancies. Do the agencies report a rate for the vacancies of the staff by percentage at any given time instead of the gross vacancies?

Dena Schmidt, Administrator for ADSD stated that she can pull the percentage of turnover last year and give that information to the Commission.

Chair Durette asked Mr. Filippi to include in the letter a phrase referencing percentage of turnover then Chair Durette asked Commissioner Miller if that request would satisfy her question and Commissioner Miller confirmed that it did.

Ms. Sherych said that she provided the information from the Division of Human Resources Management state personnel pay scales. There were 4 documents that were provided to Mr. Filippi this morning. There is one for the employer/employee, employer for someone who is vested more that 5 years with the employee/employer pay scale, new hires, and the scale for classified pay bills. That information Mr. Filippi can share with the Commission. Perhaps what we can do is highlight which grades and positions the Commission is discussing since there is a lot of information on those documents. This recommendation would make it easier. There is a recommendation question about the timeframe. Ms. Sherych agreed with Ms. Malay that the timeframe can vary. One of the things that we have been struggling with recently is the transition from state to Success Factors, which is a new recruiting system. There are some challenges with that program. Especially when there is an accelerated rate hire which typically always occurs for our clinical staff like nurses, LCSW, and psychologists. We typically bring them in at the top of the scale because we know the competitiveness of the pay is not there. That takes a little bit of a process. Ms. Sherych thinks it would be ideal if there was a way to not have the 4 or 5 level review process and be able to expedite those new hires. Maybe addressing that process would be helpful for our staff and agencies. Thank you.

Chair Durette thanked Ms. Sherych and recapped her comments stating that the letter will encapsulate the data and that this letter is really focused on front line workers. Chair Durette appreciated Ms. Sherych mentioning nurses and clinical social workers and mental health technicians who are really hands on with our patients on a daily basis. Those are whom we have the greatest concern because they are getting paid the lowest. We will pull out, from the information that you sent, that exact information to include in the letter and make a comment about the barriers that are inherent to the new Human Resources (HR) system. Chair Durette thanked Ms. Sherych for her input.

Commissioner Ruiz-Lee asked the state administrators, because typically in government systems there is a cost and compensation review process that evaluates the issue that the Commission is discussing, which is how much are we paying people to do the work and does it fit within the scope of other comparable positions within our state and other states. Do we have a formal cycle in the State of Nevada in terms of that cost and compensation review, and if so, when was the last one conducted?

Ms. Sherych answered that to her understanding there is some sort of frequency, but she doesn't have that information available, that information is handled by State Personnel.

Commissioner Ruiz-Lee asked if State Personnel has engaged in this conversation or dialog at all? In terms of trying to problem solve with you around this issue.

Dena Schmidt said from my prospective no they have not. There has been no discussion on making any changes at this point.

Commissioner Ruiz-Lee said that makes since. There are formal processes for this so in terms of the overall recommendation of the letter certainly we are recommending that we evaluate these salaries to determine whether or not they are a barrier or the determent that you are saying they are, and I believe they are to hiring. But I think there are formal processes within state government that you could access and utilize that may also help to expedite resolution, or not depending on how those things go. I think for our consideration, as a Commission saying this needs to be studied and evaluated quickly to come to a quick resolution so the state can commence hiring these frontline workers is imperative. I don't know what that language would look like, but my concern is that if we pack a whole lot of data into the letter that it is data that should be gathered by the state in an expedited manner in order to help decision making as to what these salaries should look like.

Commissioner Ruiz-Lee's second comment is in the letter the Commission uses the phrase "livable wage" Commissioner Ruiz-Lee wanted to inform the Commission that the phrase livable wage has a cognizable meaning to it. In that geography determines what is considered a livable wage via the Department of Labor. They facilitate studies that determine what is a livable wage. Commissioner Ruiz-Lee wanted to make sure that the phrase livable wage is not used casually because it does mean something. That is part of this study that needs to be done quickly. Are these wages livable wages? And if they are not livable wages then that is unacceptable, and we need to make them livable so we can hire the people we need to do this very important work.

Chair Durette thanked Commissioner Ruiz-Lee for those excellent points. Chair Durette asked Mr. Filippi to add livable wage in accordance with the Department of Labor's standards. Chair Durette then asked Commissioner Ruiz-Lee if that was clear enough wording.

Commissioner Ruiz-Lee said it was and that she wanted to make sure that the Commission is really clear about what the salaries should look like. For example, livable wages is a thing, and we want to make sure that we are within that range. The interesting thing about that is the number may vary slightly from community to community so that has to be crafted into the salary ranges. Which is why the cost and comp study is really helpful. Commissioner Ruiz-Lee has worked in other governments where they are done every 3 years and they are done every 3 years purposely because they want to make sure they are capturing the salaries that are required to keep them competitive and in the market for hiring purposes. If we do that, what does it tell us about our competitiveness. Is salary really the issue?

Chair Durette asked Commissioner Ruiz-Lee about the study she was explaining.

Commissioner Ruiz-Lee stated that they were class and compensation studies and what they do is a comparative analysis for the role and the scope. For example, in a job description it is noted your knowledge, skills, abilities, and competencies to do the work are compared across jurisdictions. Commissioner Ruiz-Lee noted an example in which she just worked on a project in South Dakota. They compare their class and compensation system to 6 other states as part of their review process. What does Nevada's look like? I don't know, but it is a fair question to ask the Office of Personnel, and to look at the most recent data even if it is from years ago to see what they collected and to see if it works or doesn't work.

Chair Durette thanked Commissioner Ruiz-Lee for explaining the study.

Commissioner Ruiz-Lee said that it would not only help with the frontline staff, but also some of the critical hard to fill vacancies. In order to be truly competitive if you keep coming in at the very top of the salary range you may have solved today's problem of getting somebody to fill that position, but it will be a problem tomorrow because that person is not going to get a raise again. This is a dynamic that should be evaluated. Should the top of the salary range be the top of the range, or should it be the mid-point of the range?

Chair Durette thanked Commissioner Ruiz-Lee and state it was a very good comment.

Commissioner Operario said I know Commissioner Ruiz-Lee already mentioned anecdotally what I have been hearing at the campus here is that nurses have been coming in at the lowest range. Commissioner Operario was not sure what the range is because he has been with the state a while, but when Saint Josephs is offering \$34.00 an

hour for registered nurses, and they are being offered less than that by the state it is not very enticing. Also, there are experienced nursing staff that would like to be part of the system but just because they have sporadic or undocumented mental health experience they start at Psychiatric Nurse 1 which is, even if you have 20 years' experience in general nursing, but if it is undocumented mental health nursing you start at the lowest cap. Commissioner Operario's question, if any of the Administrators could acknowledge, if this has been looked at? Has that process changed or is it the same?

Ms. Sherych asked Commissioner Operario to repeat his question and Commissioner Operario did. Ms. Sherych replied, speaking on behalf of the Division of Public and Behavioral Health (DPBH) and no other divisions. We have a process where we look at experience. That determines the range, for example how many years they have been a nurse, so not specifically if they have had mental health experience, but how long they have been a nurse. We use that skill or assessment tool to help us guide as to what step they would be brought on to.

Chair Durette asked Commissioner Operario what the best way to articulate the issue he highlighted, and she stated that there is a similar issue in psychiatry where they are not getting paid more for their expertise than a general psychiatrist. This hampers the ability to have good psychiatric care. Although we have been talking about frontline staff, clinical staff have not been being paid a comparative wage compared to the private sector. Which goes back to what Commissioner Ruiz-Lee was saying about the compensation study. How do we condense all of that into the recommendation of this letter.

Commissioner Operario stated that the purpose of the letter is to make sure that we add that it is a livable wage and make sure we are competitive as a state too. I am not sure if that would be a part of this initial letter, but needless to say we want to make sure everyone is fully aware, and they are fully aware of the challenges. This may not pertain to this specific letter, but in further discussion just to offset some of the challenges that they are facing.

Commissioner Ficalora cautioned about mission drift with the letter. If we are trying to focus on the entry level frontline workers that we have the highest vacancies for, that this letter is targeted in, specific to those vacancies. I think that is where we are going to have the most success and affect some actual change in those levels. If we get into the clinical positions and more professional positions it might be a taller task needing more organization or a statewide shift than just focusing on these positions.

Chair Durette thanked Commissioner Ficalora for his feedback and stated that the initial intent of this letter is to really focus on our frontline staff. As a reason to discuss these issues there is a reason that Nevada is ranked 50<sup>th</sup> in the nation for children's mental health and it is equally low for adult mental health. It starts at the frontline and works its way up to the topline to the highest clinical folks to the system itself. Problems are abundant. That is why we are all sitting here and advocating. I want us to come back to the letter and from the initial body the purpose of this meeting was to make final edits to the letter, so we have a product to send out. With today's meeting we will have some additional information to send out to strengthen the letter. I don't know if a DAG is online with us, but a procedural question is do we make a motion today to approve the letter today with the discussed edits and pass the letter around then get it out? Or do we need another procedural meeting? I think it would be really important to focus 90% of this letter on our frontline staff, but to also include which I believe is a completely valid point, what Commissioner Operario brought up which is that all of our clinical staff need to have their compensation packages reviewed to get them to a competitive place. Therefore, we can recruit and retain because although there are far more vacancies and greater turnover of the frontline staff there are also vacancies on the clinical staff side. This is really just a widespread issue throughout the statewide system. Chair Durette asked Mr. Filippi or any DAG online if this can be approved with just procedural edits? Or does the Commission need a second meeting to review?

Mr. Filippi said that if the letter is not finalized during the public meeting and additional data needs to be added and edits need to be made, the Commission would have to review and approve again during a public meeting. Mr. Filippi assured Chair Durette that he is happy to schedule another meeting. Mr. Filippi advised to try and get as much done today, pending the additional data from the agencies, would be helpful. Ms. Sherych stated that she thinks that for the purposes of the layout of the letter. If it would be helpful to breakout DPBH and ADSD (Aging and Disability Services Division) within the letter. Because we have very different facility types. For example, DPBH has the hospitals. Are we only talking about inpatient, and we have outpatients at DPBH which would include clinical staff. I know ADSD has their intermediate care facility that has Developmental Support Technicians as well as nurses. As I read this letter I am understanding this letter to also be talking about residential supportive living arrangements with providers that they contract with that do a substantial amount through the services program and those are the frontline staff as I read this that we are talking about. I think that should be a little more defined. Also, the turnover rate, are we talking about state employees and for ADSD are we talking about the providers that provide those jobs, day training services, and supportive living services and what those positions look like to make sure it is very clear for the Governor and whomever else reads this, what the intent is and who we are specifically talking about. Otherwise, I think it is a little bit too grouped together to be able to extract what the specific issues are. I don't know if there is ability to have any type of comment or statement, if the Commission believes it is necessary, but was work to be done on raises especially for the contracted staff. If there is a provider rate increase how do we make sure that goes to direct support staff that are providing that service versus overhead where it can sit.

Chair Durette asked Ms. Sherych if she had some simple language that you could describe how to articulate that? How do you divide the verbiage out with those 3 systems? What would be the title of the 3 systems so we could put that in our draft?

Ms. Sherych replied that it would be based on non-state, state staff, something like DPBH state employees, ADSD state employees and ADSD contracted support staff. Ms. Schmidt and Ms. Adams would be more knowledgeable about that. Ms. Sherych stated that she used to work at ADSD, so she has some understanding of ADSD, but she doesn't want to speak for them.

Ms. Schmidt informed Chair Durette that they have some language they could send to her because some of the ADSD advocacy groups sent a similar letter regarding the ADSD direct support staff for committee services and Ms. Schmidt can pull that language and send it to Mr. Filippi to add to the letter.

Mr. Cornell wanted to point out that for the forensic hospitals that the nursing staff is a part of the milieu of the units. They are doing treatment and interacting with the patients. They are on the frontline and Mr. Cornell wanted to point that out.

Commissioner Ficalora asked if the contracted staff, the mental health techs and the frontline workers in the supportive living homes are actually contracted by a rate? Or is that rate given to the facility and the manager of the facility decides how much they are paid?

Ms. Adams answered that ADSD pays rates to the provider. Then the provider hires those staff, so it is up to the providers as to what rate they will provide to the staff.

Commissioner Ficalora said that he doesn't know how to put in the letter that if there is a rate increase it should go to the contracted frontline staff.

Commissioner Ruiz-Lee asked a follow-up to the last statement. Has the state agencies who issued those contracts ever considered putting specific contract language about the rate of pay for staff who do the work?

Ms. Adams answered that is something that ADSD is looking at now. They are talking to their DAG to see what they can do. There are some states that have been able to accomplish that. In the past has been some interests that have proposed that, but it has not been able to pass. Therefore, now ADSD is looking at the contract route to somehow put it in there, so that we can get rate raises passed onto that staff.

Commissioner Ruiz-Lee said she thinks that would be great support in the ability to hire and maintain staff. They may not necessarily like it because it would likely effect their bottom line, or profit margin. However, it would create a guaranteed wage or salary for the staff that do that work.

Chair Durette asked if there were any more comments or additions to this letter.

Commissioner Ficalora suggested looking at the Commissioners names at the bottom of the letter to make sure the current Commissioners were on the letter.

Ms. Sherych recommended the state's adult psychiatric agency is misleading because it does have the regional centers which are not considered psychiatric agencies. Ms. Sherych did not want to speak for ADSD, but she informed the Commission that under the category "other adult facility" they have Sierra Regional Center which doesn't have an adult facility however they have community providers, like what was discussed earlier. Rural Regional Center should also be listed if the goal is to support direct staff that are under the SOM and JDT services.

Chair Durette agreed and recapped the letter. Chair Durette liked the suggestion of editing the first paragraph separating DPBH, ADSD employees, and ADSD contract staff. The letter would flow logically from there. Sierra Regional Center, Desert Regional Center and Rural Regional Center would be delegated specifically. The second paragraph would be HR to talk about, as Commissioner Ruiz-Lee pointed out, a class and compensation study and the barriers related to the human resources in respect to onboarding. As well as the process not being comparative to the private sector. Those would be the 3 core issues to mention in the second paragraph. The third paragraph would have to deal with turnover. We will need the turnover rate from ADSD and DPBH, which we don't have but we will get. Along with any other employment things such as salary ranges and add that. Turnover rate, salary, and the need for the department to be aligned a living wage for any of those regions as well as the additional point Mr. Cornell brought up about being a nurse at Stein Forensic Hospital is different than being a pediatric nurse which is a totally different type of job. There are differences and adding the mental health toll on the frontline workers in these positions as well. Here is what we are specifically asking for; the specific class and compensation study to be done as soon as possible and to bring our workforce to a competitive level so we can better serve the citizens of Nevada.

Commissioner Ruiz-Lee commented that on the second paragraph on the line where we talk about the class and compensation review and process that we also capture the component that was raised by Commissioner Ficalora on the contractors. Until we have worked through the issues with the salaries that the contractors are offering staff then we have not really solved the problem. To the degree that the state is evaluating these offices to see if they can include these requirements in their contracts with providers the Commission should support them in that effort, so that there are some parameters around what is being paid to people for the work that is being performed.

Ms. Sherych asked the Chair if it would be amenable to the Commission, and it may be easier, if Ms. Schmidt and Ms. Sherych worked with their respective division staff to edit the letter and provide all the details, which will obviously be a draft and provide that to the Commission. Where we can look at it as soon as next week and make any further clarifications or edits and then finalize it. Ms. Sherych would have the information and understanding that DPBH and ADSD provided you with the necessary information to make that informed decision in sending this letter off if you choose.

Chair Durette thanked Ms. Sherych and said that would be a great help and asked if there are any additional comments, and if not Chair Durette asked for a motion to move the letter forward, as Ms. Sherych described as planned.

Commissioner Ruiz-Lee made a motion to move forward with the development of the letter sorted in the outline as presented by Chair Durette with the input and finalization from the state administrative staff to come back to the Commission for final review and approval. Commissioner Mosby seconded the motion. The motion passed unanimously.

Chair Durette stated that is a lot of work and thanked everyone for their very helpful comments. Chair Durette reaffirmed that Ms. Sherych and Mr. Filippi would finesse the letter. Chair Durette asked the Commission if there were any barriers to a follow up meeting at the same time next Thursday; October 21<sup>st</sup>, 2021?

Commissioner Ruiz-Lee said she would be unavailable next week because she would be traveling for work.

Chair Durette suggested Thursday; October 28th, 2021, would 2 weeks from now work?

Ms. Sherych apologized for interrupting and asked if there was any idea, or determination of including the staff that work at children's facilities such as DCFS (Division of Child and Family Services) for the state and/or if there are any contract workers in the letter? I am not sure if this can be done because this is the same Commission, but different group.

Chair Durette stated it might be hard, but the Commission could make a very similar letter that is DCFS specific. Chair Durette asked if there were any comments.

Mr. Filippi commented that since the letter was generated because the different facilities at DPBH and ADSD brought forward their concerns during the last Commission meeting, Mr. Filippi stated that he does not attend the DCFS Commission meetings, and he is not sure if the DCFS agencies are bringing up similar issues, but they might want to have this conversation maybe at a future meeting. Mr. Filippi reminded the Commission that they wanted to send the letter out as soon as possible so Mr. Filippi suggested that the Commission focus on this letter and send a separate letter for DCFS at this time to help send the letter out as soon as the Commission can.

Chair Durette appreciated Mr. Filippi's suggestion and suggested making a motion that to expedite the letter the Commission regroup on Thursday, October 28<sup>th</sup>, 2021, at 9:00 a.m. and as soon as the letter is completed the Commission will share it with DCFS to create a similar letter.

Chair Durette made a motion that to expedite the letter the Commission regroup on Thursday, October 28<sup>th</sup>, 2021, at 9:00 a.m. and as soon as the letter is completed the Commission will share it with DCFS to create a similar letter. Commissioner Ficalora seconded the motion. The motion passed unanimously.

#### 6. PUBLIC COMMENT

Chair Durette asked if there was any public comment and paused for comments. No public comments were presented.

#### 7. <u>ADJOURNMENT:</u>

The DPBH Commission on Behavioral Health Public Meeting was adjourned at 9:53 a.m.