

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

DPBH COMMISSION ON BEHAVIORAL HEALTH
MEETING MINUTES
November 11, 2022
9:00 AM

This meeting was held online and by phone.

MEETING LOCATIONS:

https://teams.microsoft.com/l/meetupjoin/19%3ameeting_MGNjMjEzZjltNzg1OC00YTYxLWFkNDYtODIyYzE1ZTNlOWE4%40thread.v2/0?context=%7b%22id%22%3a%22e4a340e6-b89e-4e68-8eaa-1544d2703980%22%2c%22oid%22%3a%22455656b7-d121-4709-ba81-3f70d51b1100%22%7d

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1. CALL TO ORDER/ROLL CALL:

COMMISSIONERS PRESENT:

Braden Schrag (Chair); Lisa Ruiz-Lee (Vice-Chair); Lisa Durette, M.D.; Jasmine Cooper, LCADC; Gregory Giron, Psy.D.; Arvin Operario, RN

COMMISSIONERS EXCUSED:

Dan Ficalora CPC; Natasha Mosby LCSW

Department of Health and Human Services (DHHS) Staff:

Autumn Blattman, Executive Assistant, DPBH; Lisa Sherych, Administrator, DPBH; Joanne Malay, Deputy Administrator, DPBH; Gujuan Caver, Clinical Program Manager II, ADSD; Marina Valerio, Desert Regional; Ellen Richardson-Adams, Agency Manager, SNAMHS; Susan Lynch, Hospital Administrator, SNAMHS; Julie Lindesmith, Agency Director NNAHMS; Jenny Casino, Licensed Clinical Social Worker, SNAMHS; Drew Cross, Interim Agency Director, Lake's Crossing; Dr. Leon Ravin, Statewide Psychiatric Medical Doctor; Katie Martin Waldman, Clinical Program Manager II, DCFS; Julian Montoya, Sierra Regional Center, Roswell Allen, Rural Regional Center, Brian Buriss, NNAHMS, Dawn Yohey, CPP III, DHHS, Fred Pilot, SMHA-SAPTA, Michelle Sandoval, Rural Clinics

Others/Public Present:

Michelle Bennett, Clark County Regional Health Coordinator, Valerie Cauhape, Vanessa Dunn, Linda Anderson, Lea Case, Tray Abney, Barry Cole.

Chair Schrag called the meeting to order at 9:05 a.m. Roll call is reflected above. It was determined that a quorum was present.

2. PUBLIC COMMENT:

Chair Schrag asked if there was any public comment. No comments were received.

3. FOR POSSIBLE ACTION: Approval of meeting minutes from September 22, 2022. – Braden Schrag, Chair:

Chair Schrag asked the Commission if they had any comments or wanted to make a motion for approval.

COMMISSIONER COOPER MADE A MOTION TO APPROVE THE SEPTEMBER 22ND, 2022 MEETING MINUTES, AS WRITTEN. SECONDED BY COMMISSIONER OPERARIO. THE MOTION WAS UNANIMOUSLY APPROVED BY THE COMMISSION.

4. FOR POSSIBLE ACTION: Consideration and possible approval of Agency Director Reports – Commission:

Chair Schrag stated that he wanted to give everyone the opportunity to give a brief report to the Commissioners.

Northern Nevada Adult Mental Health Services (NNAMHS) Agency Directors Report

Julie Lindesmith, Agency Manager with Northern Nevada Adult Mental Health Services, was available to give the report. She reported they have had some success in hiring some people, but they still have shortages of qualified behavioral health professionals, specifically in nursing, social work, psychology, and psychiatry. For inpatient services, she stated they are continuing to prioritize emergency room patients on waitlists and are partnering with many community agencies to try and improve the admissions process. Over the last quarter, there has been an average of three individuals waiting to be transferred into the facility on any given day. They are continuing to see slightly longer hospital lengths of stay due to not having appropriate placement for them in the community. Outpatient community-based living also continues to be a challenge.

Chair Schrag asked what was successful in hiring on new staff.

Ms. Lindesmith said they have been advertising on Indeed which they have found success with, rather than just using the State employment website. They have also been working with Human Resources staff to get offer letters out quicker, so people aren't accepting other jobs before hearing from them. There has also been success in word of mouth, having staff that are currently employed with NNAMHS spread the word on positions available that friends or family may be interested in.

Chair Schrag asked about the turn-around time for offer letters now versus in the past.

Ms. Lindesmith stated she could not speak on the past timeline, as she started in August. However, right now, if they are not doing an accelerated salary, it is taking a week or less, and with an accelerated salary, this usually takes about 6 weeks.

Dr. Durette asked about the recommendation that was made on the behalf of the Commission requesting raised salaries for frontline workers and whether any movement has been seen with that request.

Ms. Lindesmith said that she believed it had to be completed through the legislature, but NNAMHS has been trying to offer the accelerated wages for those offered hard to fill position. If they transfer staff from another state agency, they don't have to do this, but then that does not solve the State vacancy issues.

Chair Schrag suggested some follow up with the Commission on the base wage increases as they moved into legislative session.

Southern Nevada Adult Mental Health Services (SNAMHS) Agency Director's Report

Ellen Richardson-Adams, Agency Manager for Southern Nevada Adult Mental Health Services, was available for the report. She called the Commission's attention to the report provided. Outpatient caseloads are on the rise, AOT and PAC teams are at capacity, and Mental Health Court being slightly under. They are working with the court to get a few more into that caseload; the current caseload capacity is 75 and SNAMHS has 69 currently on the caseload. Inpatient beds have reduced to 54 and an increase in forensics beds to 112. Ms. Richardson-Adams also discussed they are hiring a few new people, but they are seeing just as many resignations and retirements.

Chair Schrag if they were seeing a clustering of anything in particular or if was generalized additions.

Ms. Richardson-Adams replied it was just generalized additions.

Lake's Crossing Center (LCC) Agency Director's Report

Drew Cross, Interim Agency Director for Lake's Crossing Center, was available for the report. He began with an overview stating their 56-bed main building remains at or near capacity for statewide forensic services. They are coordinating with the various courts to find solutions to expedite admissions. The conditional release program is still having success finding suitable housing options for long term clients. He stated they are working on large construction projects that will impact their facility, including building food slots into the reinforced doors, new security locks being put in place on the control room and living areas. There is also a capital improvement project that is addressing removing "pony walls" from the client rooms, replacing mattress with reinforced models, both with which remove a potential ligature risk. with upgrades to reinforced doors and new security locks in the control room. In the Annex unit, they will be updating the ADA bathrooms. COVID and Flu vaccines continue to be offered to staff and clients and the facility continues to follow all infection control precautions to mitigate transmission risk.

Mr. Cross also reported in the matter of staffing, they have filled 14 positions since June, including 7 forensic specialists, which is the largest department with a total of 60 staff. There is a current vacancy rate of 24.5 positions, with most of the positions that are vacant being 8 forensic specialists and one vacant supervisor position. Recruiting continues to be impacted by background checks and POST certification physical fitness exam. The psychologist position has a salary disparity and additional training is required to be a forensic psychologist, which is a barrier. The offered compensation available impacts multiple departments, and housing and the cost of rent has also impacted applicants.

Chair Schrag asked what was driving the success in hiring staff.

Mr. Cross responded that Indeed, like their sister agency, has a been a big boom in getting people in. They have also expanded the description of the forensic position to entice applicants. The main issue with that department is that they start with a large number of applicants, but by the time people are ready to start, between the physical exam and background check, and other opportunities, this dwindles to a fraction of the original number.

Chair Schrag asked what percentage the vacancies of the overall staff were.

Mr. Cross responded it was almost 25%; 2.5 psychiatric nurses, 8 forensic specialists, 1 forensic specialist supervisor, and then a scattering of clinical staff.

Chair Schrag asked what the efforts were in direct recruitment, such as regional college fairs or other message boards that are actively used to recruit.

Mr. Cross responded they have set up various booths at recruitment events and, for the forensic specialists, because they require POST certification, recruit directly from POST to bypass the background check and physical fitness exam.

Chair Schrag discussed the possibility of reaching out to retirees who have POST certification.

Mr. Cross stated that his predecessor was really involved in that, as she came from a corrections background. She was aware of any retirements and was reaching out to try and get something done through contract services. That is still being defined.

Chair Schrag offered assistance to the agencies to explore this possible recruitment pool with his connections in law enforcement.

Lisa Sherych, spoke for the record to also recommend a program called Skill bridge through the Department of Human Resource Management. The program works with the Department of Defense for individuals leaving the military. This has just rolled out but has provided some insight into individuals who would probably be great to work in the forensic specialist positions, though most have indicated they are interested in the Department of Public Safety. It consists of a 6-month internship and then could easily roll into full time employment with the State. Ms. Sherych offered to provide further details at the next Commission meeting.

Chair Schrag agreed for more information to be provided at the next meeting.

Rural Clinics (RC) Agency Director's Report

Ellen Richardson-Adams was available to provide report for Rural Clinics. She spoke about creative ways to recruit including social media and Facebook groups, such as Social Work Facebook pages. She stated they have found success doing this in filling 3 positions including LCSWs and an MFT. They have also been successful in recruiting a new APRN and a child/adolescent psychiatrist.

Ms. Richardson-Adams said that SNAMHS have been participating in job fairs, specifically one at the Las Vegas Convention Center.

Ms. Richardson-Adams said they had been providing a part-time person to the mobile outreach safety team (MOST) in Douglas County and that person has expanded into full-time. They have seen an increase in early intervention and potential prevention measures in Douglas County for individuals that are encountering law enforcement.

Sierra Regional Center (SRC) Agency Director's Reports

Julian Montoya was available to give the report for Sierra Regional Center. Mr. Montoya stated that caseload is stable. Mr. Montoya said they have also had recruiting difficulties but have had success in hiring at a Health and Human Services Professional Trainee level to fill Developmental Specialist and Service Coordinator positions. In the past, they have been able to recruit level 1, 2, and 3 staff, but now are finding it easier to recruit at the entry level positions, recruiting individuals right out of school. Mr. Montoya said they are revamping their training because they do have people coming in from providers or other areas with some experience, it is easier to get them up to speed, but they are bringing more people in. They have been working on their data collection for the next session. Mr. Montoya also expressed concern with the slowing growth of the Northern Nevada area due to higher housing and cost of living costs. Mr. Montoya said he was open to answer questions if there were any.

Desert Regional Center (DRC) Agency Director's Report

Gujan Caver, Desert Regional Center Clinical Program Manager was available for the report. Mr. Caver stated he would report on their community services and Marina Valerio would present on ICF and other areas he does not cover. Mr. Caver said they were in good shape with staff, fully staffed but were recruiting for Spanish speaking staff. Mr. Caver finished by reporting they have created a committee to improve staff morale and asked for question. None were asked and the remainder of report was completed by Marina Valerio, Agency Manager of Desert Regional Center.

Ms. Valerio stated they struggled with filling direct support technicians and currently have 30 open positions or approximately a third of their workforce. Ms. Valerio said they had to cancel two rounds of interviews because

they didn't have enough applicants to hold interviews. They are also excited that in October a nurse and mental health counselor position were both filled.

Ms. Valerio also reported the JDT training was on going and improving the quality of life for those in the program, however they still have about 50% of their individuals at home during the day. On campus, they are ensuring that individuals are getting out and to rec areas and participating during the day. Ms. Valerio said they are not getting formal referrals but are getting calls and emails about individuals but are unable to admit them due to the staffing issues.

Rural Regional Center (RRC) Agency Director's Reports

Roswell Allen, Program Manager at Rural Regional Center, was available for report. Mr. Allen stated their staff was secure but were working to a nurse position and have a candidate for psychiatrist position. Mr. Allen said they recently hired QA staff.

Mr. Allen said Rural Regional Center (RRC) is providing supported living and day programs in all their eight regions. They have good news from some providers, they are increasing wages and are getting staff hired, however others are still struggling particularly in managing shifts as well as doing other case management.

Mr. Allen reported they are having regular provider meetings where they can discuss what is going on and to be a support to each other. RRC is interested in working together with providers to educate legislators on what they do by sharing their stories to get their needs, and the needs of the people they serve, met by legislature. RRC is working on school outreach and the programs they have available for them. Mr. Allen said they are working on getting their caseloads back up after the two years where things were flat.

Mr. Allen finished by asking if there were any questions.

Chair Schrag expanded on Mr. Allen's comments about educating legislature. Chair Schrag said he would like to encourage people to reach out to each other and collectively get together independent from the Commission and find ways to ensure that the legislature is hearing them. New legislators may not be as familiar with the providers or service provided in the behavioral health community. Chair Schrag encouraged coordination heading into the legislative session.

Chair Schrag asked for a motion to approve the Agency Director's Reports.

DR. DURETTE MADE A MOTION TO APPROVE THE AGENCY DIRECTOR REPORTS. COMMISSIONER RUIZ-LEE SECONDED THE MOTION. THE MOTION PASSED UNANIMOUSLY.

5. FOR POSSIBLE ACTION: Consideration and Possible Approval of Standardized Seclusion and Restraint Form, Nevada Association and Nevada Rural Hospital Partners – Marissa Brown, Nevada Hospital Association.

Item was tabled. Will be added to next meeting agenda.

6. INFORMATIONAL ITEM: Update on Seclusion and Restraint/Denial of Rights, DPBH – Joanne Malay, Deputy Administrator, DPBH

Joanne Malay, Deputy Administrator, DPBH reported on her PowerPoint provided to the Commission.

<https://dpbh.nv.gov/uploadedFiles/dpbhngov/content/Boards/CBH/Meetings/2022/BH%20Commission%20Report%202022%20November.pdf>

Seclusion and Restraint/Denial of Rights, ADSD – Marina Valerio, Agency Manager, Desert Regional Center, ADSD

Marina Valerio, Agency Manager of Desert Regional Center, reported they only had one restraint in September and zero restraints in October. Ms. Valerio said they are working more with blocking pads more now to reduce going hands on with an individual and they see a big difference between last year and this year.

Chair Schrag asked Ms. Valerio to give a brief overview of the transition for those who many not be familiar with what the new process is.

Ms. Valerio said they use safety care, which is the crisis intervention training they use. Staff is trained how to do restraints starting with the least restrictive before doing restriction. Ms. Valerio said a little over a year ago they found out that using the blocking pads reduced going hands on. That way, when an individual gets angry and wants to hit something, they are hitting the pad rather than staff and staff can move the pad to where the need it.

Chair Schrag inquired about the staging of the pads and patient response. Ms. Valerio said they are not carried around, but they have been ordered for each home and the patient response has been positive to the pads.

7. INFORMATIONAL ITEM: Update on Aging and Disability Services Division – Jessica Adams, Deputy Administrator, ADSD

Jessica Adams, Deputy Administrator, was available for the Aging and Disability update. Ms. Adams began by updating the Commission on new budget items from their approval of \$14.52 million to state a new program at the October Interim Finance Committee meeting. Ms. Adams said they would be intensive behavioral support homes for developmental services. \$500,000 of the funds would be used to have a contractor assist them in developing the homes' look and the other \$14 million would be used in services. Ms. Adams said the thought behind it is a very intensive higher level residential service rather than an institutional service. Ms. Adam said it was a model coming out of California helping those individuals that are bouncing between psychiatric hospitals and jail, where the staff is working at a higher level with more training and specialized service skills.

Ms. Adamas said they try to really look at the person as a whole and their behaviors as a whole and try to get all the services that they need to stabilize them with the goal would be to get them back into a more typical residential setting. They are hoping for roughly six homes of about four people per home and it will be a combination of the homes, something for kids, some being for adults.

Ms. Adam also provided a few updates, including their agency request budgets. Ms. Adams spoke about one program called the Family Preservation Program. This is just a monthly cash program that goes to families who have their family member living in their home that have severe or profound disabilities. The monthly stipend going to the home has been \$374.00 a month but recently raised by over \$100 a month. Ms. Adams said they are also looking at a raised for their families with children under 18 doing the family support services from \$450 a month to \$650 a month for services not covered by insurance.

Ms. Adams concluded by discussing the Youth Intensive Support Services Program. Ms. Adams said it is for those youth that have higher level needs. What it allows is for service coordinators and the program to carry a much lower caseload, typically service coordinators carrier 1 to 45 and the program carries a 1 to 15 or 25 ratios. They are expanding the program across the state to allow one or two case managers to carry a 1 to 15 caseload for these youths with a single program manager for child services. She then asked for questions.

Chair Schrag asked how they were able to increase the budgets for these programs this year.

Ms. Adams said that it was good timing this year and developmental services were a priority.

8. FOR POSSIBLE ACTION: Discussion and Approval of 2023 Meeting Schedule – Autumn Blattman, Executive Assistant, DPBH, Professional Support for Commission on Behavioral Health

Chair Schrag asked if there were any comments or suggestions about the proposed days for 2023 meetings. The Chair recommended a change to the proposed March meeting feeling it was too far and asked the Commission about changing to a February meeting. Everyone agreed. The proposed March 23rd, 2023, meeting was changed to February 9th, 2023. The May 18th, September 21st, and November 16th meetings were met with no challenge.

COMMISSIONER COOPER MADE THE MOTION TO APPROVE THE MEETING SCHEDULE WITH THE ONE CHANGE. DR. DURRETT SECONDED THE MOTION. THE SCHEDULE WAS APPROVED WITH CHANGE.

9. FOR POSSIBLE ACTION: Discussion and approval of future agenda items – Commission

The Commission agreed on the following items to be included on the agenda for the next meeting:

- a. Update on the implementation of the 988 National Behavioral Health and Suicide Crisis Line – *Shannon Bennett, Health Bureau Chief, Bureau of Behavioral Health Wellness and Prevention, DPBH* (This agenda item is to be add as a standing report to the Commission).
- b. The Commission’s letter to the Governor - Commission
- c. Information and Update on the Skill bridge Program – *Lisa Sherych, Administrator, DPBH*

10. PUBLIC COMMENT

No Public Comment

11. ADJOURNMENT:

Chair Schrag adjourned the meeting at 10:24 am.