



---

**NORTHERN REGIONAL BEHAVIORAL HEALTH POLICY BOARD  
MINUTES  
March 4, 2021  
2:00 pm to Adjournment**

Meeting Locations: Teleconference only

Teleconference: Call in number: 16699006833, meeting ID: 6665788969

Password: 488389

Teleconference weblink:

<https://us02web.zoom.us/j/6665788969?pwd=MUNJRStSdTY5UDEExSct3ZnJSSFA1UT09>

Password: Northern

*Note: Agenda items may be taken out of order, combined for consideration, and/or removed from the agenda at the chairperson's discretion.*

1. Call to order/roll call – Taylor Allison, Chair or Dr. Ali Banister, Vice-chair

**Members:** Taylor Allison (Chair), Nicki Aaker, Matt Law, Shayla Holmes, Erik Schoen, Amy Hynes-Sutherland, Dr. Robin Titus, Dave Fogerson, Sheriff Ken Furlong, Dr. Daniel Gunnarson,

**Members Absent:** Dr. Ali Banister (Vice- Chair), Lana Robards, Sandie Draper

**Staff and Guests Present:** Jessica Flood; Jeanette Belz, Nv Psychiatric Association; Shawn Thomas, UNR; Michelle Sandoval; Mary Beth; Lori Follett, Behavioral Health Unit, Jeanette Belz, Nevada Psychiatric Association; Joan Hall, President of Nevada Rural Hospital Partners

2. Public Comment:
3. Review and approval of amended minutes from November 19, 2020, and review and approval of minutes from January 5<sup>th</sup>, 2021.

Erik moved to approve November minutes; Amy seconded (motion passed)

4. Update on Northern Regional Behavioral Health Policy Board Bill, SB70, on modernizing and clarifying the mental health crisis hold process in NRS 433a, and proposed amendment.

Jessica: We are clarifying the involuntary outpatient court ordered process and expanded it in a way for rural counties to implement. This will allow courts to order treatment for those who really need it. Strengthens continuity of care and enhances discharge plans. We clarified the youth mental health crisis process with a few tweaks, this will be ongoing as it is a mess. Updated chemical restraint definition to

---

align with modern practices. Taylor and I presented this bill to the senate committee on Health and Human Services, they heard it at work session and voted to approve it moving to the Senate, they need more input from committee members because we have a 30 page amendment. The State agreed to remove the twenty-million-dollar fiscal note after we worked with them on verbiage. I will give updates at the next board meeting.

Nikki: Where do individuals that have no income or undocumented fall into this.

Erik: What happen if you are court ordered but there are no providers?

Jessica: The court order only works if there is a provider available, and as for Nikki's comment, this is not perfect, there is a gap there.

Erik: If I am court ordered to receive treatment can I say no?

Jessica: The court order is there, but at the end of the day people can say no.

This is a good nudge for someone to receive treatment.

5. Review and vote to approve the Northern RBHPB send letters of support for the following legislation of interest to Northern Regional Behavioral Health Policy Board:

Rural- (see handout SB44)

Jessica: I found the one pager on SB44

Nicki: Is it SB44 or SB47?

Jessica: Do we have SB47 on the Agenda? We may not be able to vote on this.

Erik: We can call this a clerical error, I'm comfortable moving forward.

Jessica: That sounds good

Dr. Titus: I would want to see the complete language of this bill before offering support because there may be fees, penalties. I want to see what the hearing shows.

Jessica: we can put this in the next agenda if that makes people more comfortable

Dr. Gunnarson: This bill speaks about licensure but not competence, licenses are in place to protect the public.

Erik: I would like to see more details

Unknown speaker: I feel comfortable tabling this to the next meeting so we can come together more unified.

Washoe- (see handout SB69)

Taylor: The coalition section will build a more formal structure within the State.

Erik: What does the additional formal structure do for the coalitions?

Taylor: One of the struggles we have for example is working with school districts, they want to see sustainable organization that are part of the state system to access curriculum or have our providers go into the schools.

Jessica: the fourth piece is peer recovery certification; this focuses on the certification process of peers. Washoe's bill was heard, there was some opposition, Senator Ratti really worked on amendments to make it more agreeable.

Erik: I think this is like the last bill, it would be more helpful to hear more details come forward.

Unknown speaker: how critical is the timing? Is this time pressing?

Dr. Titus: There are major deadlines, these bills are being worked on now, I think we are all in favor of improving but the legislative process is a whole different ballgame, its timely to put a letter of support in before the bill hearing or during the bill hearing. Do we have to push these letters through? I would say no, the bills will run on their own merit. But if you support these bills then it is better to get your letters in now, before the committee meeting. March 15th is the deadline to have our bills introduced.

Jessica: we should at least have these on our radar.

Taylor: So, we will table this until next meeting for now.

Clark- (SB56)

Jeanette Belz: Our bill did have a hearing, now we are working through how it coordinates with SB 05. The one significant difference is that SB 56 does include telephone visits and SB 05 does not, that will have to be reconciled because both bills cannot pass in the form that they are in, they conflict. We hope to keep the telephone part of it.

Jessica: The state put a huge fiscal note on this, but the problem is with Medicaid match, the Feds may not continue the use of telephone which would make the state have to pay the cost.

BDR 451 has been assigned bill number SB 154- Medicaid IMD Waiver

Jeanette Belz: The bill authorizes the state to apply for the IMD waiver which will allow Medicaid patients to go into facilities they currently have not been able to go to and get Medicaid reimbursement. This will expand inpatient hospitals in and save Nevada money.

SB 156- focused on expanding licensing for crisis stabilization centers

Jessica: I think they tried to clean up AB 66 from last session so that this expands to more hospitals being able to provide crisis stabilization.

BDR 635- focused on implementing 988, a central behavioral health crisis line as an alternative to 911

Jessica: I just got news today, that the State was accepted to receive a grant for technical assistance.

6. Review and vote to approve a draft letter of support for level funding for China Springs through the biennium. (Dr. Ali Banister)

Taylor: There was budget hearing which included a reduction to China Springs. The cut would be significant from 1.6 million to five hundred thousand.

Dr. Titus: (Inaudible) there is a lot of conversation going on right now to find a solution. Any documentation from the board on how they have helped you and what your experiences were like would be very helpful to take to the committee.

Taylor: What does everyone think, should we wright a letter or table this until we get more information?

Unknown Speaker: I think that tabling it until we have specific information makes since.

Jessica: I can send an email to Ali to see if we can get some data to review.

7. Review and adopt updated draft of Northern Regional Behavioral Health Emergency Operations Plan (Taylor Allison, Northern Board chair, and Jessica Flood, Northern Regional Behavioral Health Coordinator)

Dr. Titus: I vote to approve

Shayla: I second

Motion passed unanimously

8. Review Northern Region January survey results to identify and approve Northern RBHPB's recommendations to be included in the annual report to the Commission on Behavioral Health. (Taylor Allison, Northern Board chair, and Jessica Flood, Northern Regional Behavioral Health Coordinator)

Jessica: These recommendations came right from the survey in the order they were voted for:

- Obtaining sustainable funding for crisis stabilization, criminal justice diversion
- Support continued funding for Reginal Behavioral Health Coordinator position
- Support Regional implementation of the Crisis Now models
- Increase work force
- Increase retention in recruitment of Psychiatrists, Behavioral Health clinicians, substance use treatment professionals, Behavioral Health professionals with the capability to treat youth
- Increase access to residential treatment in housing, inpatient and residential treatment in housing and transition support
- Increase option for supportive housing
- Develop services to support the continuity of care
- Support efforts to increase the use of telehealth/Behavioral Health for rural communities and older adults

- Develop initiatives to support the Regional Behavioral Health authorities
- Formalizing Behavioral Health infrastructure
- Support development of Behavioral Health Emergency Response
- Develop and increase support for older adults to maintain stability in their living environment
- Support initiatives to increase cultural awareness and providing Behavioral Health services for minority populations including LGBTQ

Jessica: How we decided to keep stuff on this list is if a member voted on it then it was included. I'm basically copying and pasting this into the Regional Behavioral Health Report for 2021, that report is almost done, I will be sending a draft to the commission so we can finally have it approved in April.

Taylor: This is an action item so I will entertain a motion to approve the recommendations

Erik: I will make motion

Dr. Titus: I second

Motion passed without oppositions

**9. Board member updates on behavioral health concerns, initiatives, and successes in their area of specialty or county**

Erik: we are really seeing need increase, our counseling numbers doubled from last year to this year. I think the reason we are not getting much push back from legislation is that the need is real, you cannot ignore it.

Nikki: There were 96 surveys counted, but the professional that work with this group say its more like 250, we have a new program in Carson, we have HOST which is our Homeless Outreach Safety Team.

Sheriff Furlong: We have assigned an officer and he is specifically focusing in on the homeless encampments and the people who are in need.

Nikki: The school district got a 5-year grant, Project Aware, to increase awareness in mental health, provide training for school personnel and connect school age youth. They also got another 3-year multi-tiered system of support grant that have key components for universal screening, tiers of intervention, ongoing data collection, continuous assessment, schoolwide approach of expectations and supports parental involvement.

Shayla: In Lyon county we are working with our task force to develop priorities for this year along with action items, our number one topic is youth and community engagement. We are working with educating our law enforcement and community with what's available and how to access it. The biggest need with suicide intervention and

---

prevention, from what the fire department is seeing is the transitional age 18-25 is where they are seeing the spike and the senior population with the isolation.

Taylor: In Douglas county we have had a huge turnover in key leadership positions. We are rebuilding relationships and setting goals with new leadership. With our grant with the AG's office and are planning to do a tabletop exercise to test our overdose plan.

Dr. Gunnarson: Healthcare providers categorically exclude individuals with autism or intellectual disabilities from services, they wont even do an intake. We refer people who we think would benefit from these programs and it is very frustrating.

10. Regional Behavioral Health Coordinator update on current local, regional, and statewide efforts and initiatives including the Northern Regional Behavioral Health Communications committee and Nevada Crisis Now Initiative meetings. (Jessica Flood, Regional Behavioral Health Coordinator)

Jessica: Just watch for the report and give us your feedback, hopefully we can really start a strategic plan in the future

11. Board member recommendations for future presentation and topics for Board consideration.

Wait for more information on the following:

SB44- Rural, SB69- Washoe, SB56- Clark, SB154, SB156, BDR635

Carson Tahoe for future meetings

Strategic planning

12. Public Comment (no comment)

13. Meeting adjourned 4:00pm

On the internet – agenda and supporting materials

- **Department of Health and Human Services Website**  
[http://dpbh.nv.gov/Boards/RBHPB/Board\\_Meetings/2018/Northern\\_Regional/](http://dpbh.nv.gov/Boards/RBHPB/Board_Meetings/2018/Northern_Regional/)  
**Nevada Public Notices:** [www.notice.nv.gov](http://www.notice.nv.gov)

We are pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. In the event of videoconference technical difficulties, the meeting may be conducted by teleconference from the same location. If



---

special arrangements are necessary, please notify Stephen Wood, Bureau of Behavioral Health Wellness and Prevention, in writing please send to, 4126 Technology Way, Suite 200, Carson City, Nevada 89706 or by calling (775) 684-5974 before the meeting date. Anyone who wants to be on the advisory council mailing list can sign up on the listserv at [www.listserv.state.nv.us/cgi-bin/wa?HOME](http://www.listserv.state.nv.us/cgi-bin/wa?HOME).

If you need supporting documents for this meeting, please notify Stacy McCool, Bureau of Behavioral Health Wellness and Prevention, at 775-684-4295 or by email at [S.mccool@health.nv.gov](mailto:S.mccool@health.nv.gov)