

**RURAL REGIONAL BEHAVIORAL HEALTH POLICY BOARD**  
**BDR Development Subcommittee**  
**DRAFT MEETING MINUTES**  
**DATE: August 12, 2022**  
**TIME: 11:00 a.m. - Adjournment**

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 - Chair Fergus Laughridge, Vice Chair Dr. Erica Ryst Meeting was called to order.

**Board Members Present:**

Fergus Laughridge, Chair  
Dr. Erica Ryst, Vice Chair

2. **Public Comment:**  
There was no public comment.

3. **Informational: Brief Review and Statement of Meeting Goals.**  
Fergus Laughridge, Chair; Valerie Haskin, Rural Regional Behavioral Health Policy Board (RBHPB) Coordinator

Coordinator Ms. Valerie Haskin gave a summary of the concepts discussed in the July 22, 2022 subcommittee meeting. This included concepts strongly favored for their Bill Draft Request (BDR), concepts put aside for later consideration and two additional ideas which were brought to Ms. Haskin after the July 22 meeting.

Julia Ratti, Chair for the Washoe Regional Behavioral Policy Board (RBPB) stated the Washoe Board is leaning towards Workforce Development for their BDR.

Chair Fergus Laughridge state he would like to develop a BDR which will be easier to get approved by the legislature. Chair Fergus spoke about Illinois and how Illinois built their Behavioral Health Center over the duration of a year. The first thing they did was get legislative support to enact the Behavioral Health Workforce Education Center Taskforce Act. This allowed their legislature to say how and what they want organized and arranged.

Chair Laughridge continued with stating the subcommittee's taskforce will continue to work on this and determine how this will be funded and where it will be housed. He suggested taking a step back from making any action happen immediately. Chair Laughridge would like to involve the higher education institutions as well as other educational institutions and licensing boards. The subcommittee needs to define what the taskforce will like. Illinois recognized they had a problem and met monthly for a year working it out.

Dr. Sara Hunt, Associate Dean of Behavioral Health at the School of Medicine at the University of Nevada, Las Vegas (UNLV), stated in the 20/21 legislative session Assembly Concurrent Resolution 5 (ACR 5) was formed to conduct a study concerning the behavioral health workforce in the state. This had one hearing and did not go further. Dr. Hunt suggested this might be more viable to work on as there is already language formed.

Ms. Megan Comlossy, Associate Director for Center for Public Health Excellence, University of Nevada, Reno, (UNR), School of Public Health stated, bills which have the most success are the ones which have large legislative leadership, and leadership from the Governor's Office. If there is a big interest in this area, then going big may be good for the entire Behavioral Health Education Center of Nebraska (BHECN) model. If the momentum or leadership isn't there, the bills that are successful, are ones which are more targeted, focused, and take a bite out of the problem which will move the needle on the workforce problem. Out of the five regional boards, there are at least two which are working on workforce development. If we all work together coordinating and collaborating, we can move the needle forward.

Coordinator Haskin suggested they should use this BDR to propose the center and add some of these similar pieces which are just legislative fixes.

Chair Laughridge stated Nevada is very fragmented (silos) and needs a center to pull these silos together. Having said that, Chair Laughridge thinks Education Center might not be the correct vernacular to use.

Ms. Comlossy agreed with Chair Laughridge and suggested the University of Nevada Reno (UNR) and UNLV be the connecting center to do this.

Coordinator Haskin suggested there be a mandate stating the participation from the Institutions of Higher Education must move forward with the recommendations.

Dr. Hunt stated the Illinois model is more general than Nebraska's. The Illinois Board of Education decided where their center would be. Their center has two locations, one in the southern part of the state in the more rural population and one up north, in the more urban part of the state.

Mr. Jose Melendrez stated his concern about sustainable funding. He suggested by formalizing it, they could reduce the number of silos throughout the state, and could create opportunities for other funding streams and sustainability.

Vice Chair Dr. Erica Ryst stated, she prefers the idea of focusing on the first piece which is establishing the center and try to get this done during the legislative session.

Ms. Comlossy suggests the BDR should have a small start. This will enable funding to be easier.

Mr. Gerald Akerman stated the disadvantage is the legislature meets every two years and suggests they try to be bolder in their presentation to help push the Bill Draft Request through.

**4. Discussion of Potential Solutions to Issues Related to Program Funding and Infrastructure.**

Fergus Laughridge, Chair; Members of the Rural Regional Behavioral Health Policy Board present; Valerie Haskin, Rural Regional Behavioral Health Coordinator; other Attendees.

Coordinator Haskin opened the discussion with potential titles for the Bill Draft Request.

Ms. Haskin suggested the BDR be titled the Creation of the Center of Behavioral Health Excellence.

Chair Laughridge suggested the Creation of the Nevada Center for Behavioral Workforce Development.

This topic was tabled and will be determined at a later date.

Dr. Hunt explained the side-by-side handout between the Nebraska and Illinois programs. The handout shows how Nebraska formed their workforce development bill and how Illinois adopted this plan and adjusted it to suit the needs of Illinoisans.

After Dr. Hunts brief explanation, the Subcommittee began reviewing the differences and chose parts of these plans they preferred and decided the best way to incorporate them into their BDR.

Vice Chair Dr. Ryst stated under the topic of Training, it should be more generalized, enabling the Center's staff more latitude.

Chair Laughridge requested the Illinois language be worked out to create a large fiscal note but would also keep the door open for discussion.

**5. Action Item: Identify and Approve Next Steps, Assignments, and Goals for the Next Subcommittee Meeting, to be held August 19, 2022.**

Chair Laughridge confirmed the next Subcommittee meeting is scheduled for August 19, 2022.

Coordinator Haskin and Dr. Hunt will work out the draft language of the Bill Draft Request for the next Subcommittee meeting then present it to the Regional Board meeting August 24.

Chair Laughridge motioned these actions for approval.

Vice Chair Dr. Ryst second the motion.

Motion was passed unanimously.

**6. Public Comment:**

The was no public comment.

**7. Adjournment:**

The meeting was adjourned at 12:56 p.m.

DRAFT