

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

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**Bureau of Behavioral Health  
Wellness and Prevention  
(BBHWP)  
Behavioral  
Health Planning and  
Advisory Council  
(BHPAC)  
Meeting Minutes  
October 11, 2023  
1:00 p.m.- Adjournment**

**1. Call to Order.**

***Ali Jai Faison, BHPAC Chair***

This meeting was called to order at 1:07pm by Chair Ali Jai Faison, who requested Jennifer Simeo take attendance of members.

***BHPAC Members Present:***

Ali Jai Faison, Chair

Ariana Saunders, Vice Chair

Anna Binder

Sarah Dearborn

Jill Fisher

French Dafinone

Misty Shore

Lori Ann Kearse

Dr. Pearl Kim

Dr. Mavis Major

DeNeese Parker

Allison Wall

***BHPAC Members Absent:***

Garrett Hade  
Krista Hales  
Jeannie Hua  
John Clark  
Drew Skeen  
Dr. Mae Worthey-Thomas

**2. *Public Comment.***

***Ali Jai Fashion, Chair***

Chair Ali Jai Faison asked for any public comment.

A public comment was made by Anna Marie Binder. She stated there was a great discussion at the Joint Interim Ways and Means meeting about the fines that the state of Nevada's been paying due to not providing adequate treatment for behavioral mental Health and substance abuse treatment within the Clark County Detention Center as well as the Nye County Detention Center. She added the state is making some progress in that area. Mrs. Binder let the meeting committee know they could watch or listen to it once the recording becomes available.

There was no other public comment.

**3. *Approval of April 12, 2023, BHPAC Meeting Minutes.***

***Al Jai Faison, BHPAC Chair***

Mrs. Fisher made a motion to approve the minutes as stated. Mrs. Shore second the motion. Motion passes unanimously.

**4. *Office of Attorney General Refresher Presentation on open Meeting Law (OML).***

***Geordan Goebel, Deputy Attorney General***

Mr. Goebel presented the audience with a PowerPoint on Open Meeting Law, touching base on the highlights.

Mr. Goebel stated that Open Meeting Law is based on Nevada's revised statutes, Chapter 241, meaning it is that the legislature is trying to make what is done in the government accessible to the public.

Mr. Goebel mentioned that it all begins with application. He stated that quorum is important for both the process of the meeting as well as the open meeting law, and if you do not have a quorum, you don't have the punitive legal authority to deliberate or act.

Mr. Goebel also stated that if you do have a situation where a meeting does not have a quorum, you will see the meeting postponed to another time.

Mr. Goebel mentioned that there are strictly applied limitations turning client conference and personnel actions against individuals where there's confidential matters being discussed and generally will not be

part of the meeting. He stated you can have a meeting even if you don't think you're having a meeting, adding you want to be careful that you're not exceeding the requirements of a get together and when you must have the open meeting law apply.

Mr. Goebel also mentioned that the agendas go through a process as well, to make sure they comply with the open meeting law. The agenda talks about what you're doing and what you intend to do.

Mr. Goebel elaborated that the key issue on OML that himself and the other attorneys look for is if there's an action or possible action on a bullet point that is important. You as a recorder want to make that clear and that if there are documents related to that, that they're available to the public.

Mr. Goebel reiterated that the meetings are recorded and/or transcribed, the attendees were informed of this at the beginning of the meeting, and that the minutes be kept within conformity of the law. There are requirements regarding public comments being available. Every attendee has the capacity to make a public comment whether they do or not.

Mr. Goebel asked if there were any comments.

Chair Ali Jai Faison asked, "If we have a scheduled meeting and we do not have quorum, however, we have certain presentations that are for information purposes only, can the Council still proceed with that meeting if we don't discuss any items that require possible action?"

Mr. Goebel replied no, saying "the key thing I mentioned on open meeting laws is when you have an action item that is the bell ringer for the open meeting law. If you're having information, the question then becomes does the information you're discussing or will be discussing have a direct impact on an action item? This becomes an important action item for OML. If you don't have a quorum and you're safe, for example, you're just talking amongst yourselves about when we can reschedule this meeting, for which we do not have a quorum. That's fine. You do that and not be concerned."

Chair Ali Jai Faison then asked a second question, "If that was on the agenda and we did not have quorum, will we still have been able to receive this presentation from you?"

Mr. Goebel replied yes, "it would not be officially given but would be given unofficially. It goes back to the formality of it."

Mrs. Shore asked a question, "So if it was an unofficial one, could it be recorded? And then we can ask the people who are missing to watch that recording?"

Mr. Goebel replied "yes, the highlighted points apply across the board. Remember the statute and how it applies."

**5. Division of Public and Behavioral Health, BBHWP, status on federal Mental Health Block Grant Application.**  
**Dr. Ruth Condray, BBHWP Clinical Program Planner.**

Chair Ali Jai Faison stated that Jennifer Simeo sent out the MHBG application materials to members for modification recommendations and there had not been any responses received to date.

Dr. Condray mentioned the Mental Health Block Grant application was submitted on the deadline of September 1<sup>st</sup>. She stated they have heard from their Grant Project Officer that it is currently under review, and they will request updates if necessary. Dr. Condray also noted that they are waiting to receive the Notice of Award.

Dr. Condray asked if there were any questions. There were.

Chair Ali Jai Faison asked if there was funding for block grant services for the Clark County Detention Center and Nye County Detention Center.

Dr. Condray noted she didn't believe they were on the list. She added it sounded like they are residential facilities, and the Mental Health Block Grant funding must be used for outpatient and community services, not residential.

**6. *Division of Public and Behavioral Health, BBHWP, Mental Health Block Grant outcomes data for the FEP/ESMI program.***

***Dr. Ruth Condray, BBHWP Clinical Program Planner***

Dr. Condray presented the audience with a PowerPoint presentation and presented an overview of the BBHWP structure, based on the treatment program for early-stage serious mental illness in Nevada, 2023.

Dr. Condray explained how they use actual clinical data to determine the assessment of how well and how effective the program and interventions are. She added they adjust if the data is suggesting that the effects are not optimal or are not producing the desired outcome. They address the implementation.

Dr. Condray stated that the Nevada Department of Health and Human Services has recognized the importance of building a statewide evidence-based program of early interventions to address early-stage psychosis disorders and studying this priority followed recognition of key factors by national and international communities of mental health professionals and funding agencies.

Dr. Condray explained that we know from the clinical research literature that the length of time that a person does not receive treatment for psychosis can be predictive of the severity of his or her clinical outcome. The definition of duration of untreated psychosis, or the DMP as it's referred to, is the length of time between the onset of a psychotic disorder and the point when an individual starts or enters treatment.

Dr. Condray explained the significance of funding and guidance, as well as the total amount that would be set aside for the development of the programming.

Dr. Condray briefly went over Statewide implementations, programming priorities, specialty care programs, the IRT Individual resilience training, and implemented clinics.

Dr. Condray discussed the three domains of the program and reiterated the importance of confidentiality of the individuals involved in the treatment and recovery programs.

Dr. Condray discussed whether improvements occur within the program and if they are indicated as statistically significant improvements within the social and occupational function assessment scale.

Dr. Condray asked if there were any questions. There were.

Chair Ali Jai Faison asked about the individuals in the program and if they were randomly selected.

Dr. Condray said selected individuals were a subset of a cohort of the FEP program who had participated for at least 12 months.

Chair Ali Jai Faison asked about funding this program in a clinical setting, and dealing with pre-authorization, asking if these services had guaranteed funding for the entire 11-month duration.

Dr. Condray said various insurances and mental health block grant funding were used. Out of those insured, she said 13% had private insurance, 81% had public insurance, and 2% had a public/private combination.

Chair Ali Jai Faison asked about what different types of modalities were used over the 11-month duration.

Dr. Condray talked about the services offered to everyone, including psychopharmacology, individual psychotherapy, family psychoeducation, supported education and employment, case management, and peer support.

Chair Ali Jai Faison asked how we parlay this program to other providers in the state of Nevada while considering its duration and potential insurance issues, as well as services not traditionally covered, including case management and peer supports.

Dr. Condray said that the program will need substantial public funding, including Medicaid, and that they were having ongoing conversations with Nevada Medicaid for developing a bundled package for this program. She said it's a work in progress and the concern is legitimate, and there's action being taken to address sustainability.

At this time, Chair Ali Jai Faison requested another roll call to ensure there was quorum.

Members present included:

Anna Binder

French Dafinone

Ali Jai Faison

Jill Fisher

Lori Ann Kearse

Dr. Pearl Kim

DeNeese Parker  
Ariana Saunders  
Misty Shore  
Allison Wall

Members Absent Included:

John Clark  
Sarah Dearborn  
Garrett Hade  
Krista Hales  
Jeannie Hua  
Dr. Mavis Major  
Drew Skeen  
Dr. Mae Worthey-Thomas

**7. *Justice Works Youth Care presentation on potential children's mental health and juvenile justice services for Nevada.***

***Dipesh Chauhan, Justice Works Youth Care***

Mr. Chauhan presented the audience with a PowerPoint presentation and presented an overview of Justice Works Youth Care, an organization that provides various in-home and community-based services.

Mr. Chauhan explained that Justice Works does not have beds in their program, and they typically provide services to children in the child welfare and juvenile justice system.

Mr. Chauhan mentioned they are out of Pennsylvania and will be starting services in Clark County, including receiving the Second Chance Grant through OJJDP for reentry services. They will also be providing truancy and remediation services.

Mr. Chauhan said their services are family-centered and focus on being trauma informed and responsive. He discussed their focus on tracking their data to try to always find ways to update their programming. They have been tracking data since 1999.

Mr. Chauhan talked about their main components including assessments, programming, partnership and collaboration, community, and sustainability. He stressed their family and community engagement in their programs.

Mr. Chauhan talked about the Family First ACT, mentioning they are in 8 different states, and they focus on prevention planning in each of them.

Mr. Chauhan talked about their signature programs, including curriculum-based programs; the Violation Initiative Programs or VIP, which supports youth in the community and focuses on restoration; the STOPP program which is a crisis-based program to keep families intact; and the JustCare program which focusses on reunification to reduce residential stays or serve as a step down. He also discussed several other research driven programs and services they provide in various states.

Mr. Chauhan explained their quality assurance process, which includes looking at financials, internals, learning and growth, and the customer perspective, including satisfaction surveys. He stated they are actively engaged in quality assurance, to ensure they adhere to policies, practices, and procedures in the delivery of their services, using a variety of methods and strategies including coaching, to determine what their current performance levels are and where improvement may be needed.

Mr. Chauhan said they complete internal fidelity checks, chart reviews, and audits to ensure adherence with evidence-based practices. He said programs have practice leads who are available to staff for questions.

**8. *Legal Aid Center of Southern Nevada presentation on children's mental health and juvenile justice service needs in Nevada.***

***Kim Abbott, Legal Aid Center of Southern Nevada***

Mrs. Abbott presented the audience with a PowerPoint presentation and slide showing the system in place for the need of legal counsel for child-based services within the community.

Mrs. Abbott introduced Jill Marano, the Director of DFS, as backup for any questions.

Mrs. Abbott mentioned that she is the Health Initiatives Manager at the Children's Attorney Project at Legal Aid Center of Southern Nevada, providing free legal aid services since 1958.

Mrs. Abbott mentioned that they run self-help centers through both of their courts, one of their largest programs being 31 attorneys as well as they now represent every child in Clark County, who is brought into foster care.

Mrs. Abbott said they have banded together working with partners in Clark County, the Clark County children's Mental Health Consortium, the District Attorney's office in Clark County, as well as DFS.

Mrs. Abbott gave an overview of Children's Mental Health as well as how this legal crisis is impacting the Child welfare system.

Mrs. Abbott mentioned a statistic of how there are cases where parents essentially surrender their children to the child welfare system because their children have such significant mental health and behavioral health needs, and they don't feel like they can access the services their children need. She mentioned she has seen 62 children surrendered by their parents in the prior fiscal year.

Mrs. Abbott stated through some collaboration with our state partners, there was able to be an allocation of ARPA funding through IFC last fall and because of that funding, DCFS has been able to engage with a care management entity.

Mrs. Abbott touched on the various programs in place and that they are continuing to work on community-based services, so children don't get placed in higher levels of care.

Mrs. Abbott discussed the appropriate programming needed for these children and what that looks like.

**9. Establishment of 2024 Advisory Council meeting schedule - For Possible Action.**  
**Ali Jai Faison, BHPAC Chair**

Chair Ali Jai Faison suggested possible consideration for the Mental Health Block Grant application to be better aligned in the months of February, May, August, and November, stating that there are so many aspects of it that need to be heard and understood.

Chair Ali Jai Faison noted that the committee needs to start planning out 2024 and take into consideration the other committees that will be having meetings at those times.

Chair Ali Jai Faison reiterated the importance of meeting quorum within these meetings.

Chair Ali Jai Faison will try and get participation from all BHPAC members.

Chair Ali Jai Faison suggested tabling this agenda item for the next meeting.

Mrs. Fisher stated for the record that she agreed to tabling the agenda item.

Chair Ali Jai Faison tabled agenda item #9 and pushed it out to the next council meeting.

**10. Update on Advisory Council vacancies.**  
**Ali Jai Faison, BHPAC Chair**

Chair Ali Jai Faison mentioned that there are 5 vacancies.

1. Educational Representative from Principal State Agency
2. Vocational Rehabilitation Representative
3. Behavioral Health Representative
4. Behavioral Health Representative
5. Social services Representative- (there is a candidate currently being vetted by the Governor's Office)

Chair Ali Jai Faison encouraged members to think about who they could recommend for the vacant spots.

**11. Discussion of future agenda items.**  
**Ali Jai Faison, BHPAC Chair**

Chair Ali Jai Faison opened the floor for any detailed desired agenda items.

Mrs. Binder suggested a future agenda item be a brief presentation from DCFS or DFS child services to optimize their advocacy for increasing funding for needs they have, to include information on what other funding they are receiving.

Chair Ali Jai Faison suggested an item to provide more detailed information from the provider's perspective related to the FEP program presentation from Dr. Condray regarding what type of clients,



types of doctors, types of people, and what environments participants come from. He also wanted additional data from the 11–12-month period for the FEP program.

**12. Public Comment.**

There was no public comment.

**13. Adjournment.**

Ali Jai Faison, BHPAC Chair

October 11, 2023, at 4:03 p.m., the meeting was adjourned.