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Director

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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

Bureau of Behavioral Health Wellness and Prevention (BBHWP) Behavioral Health Planning and Advisory Council (BHPAC) Meeting Agenda Monday, December 4, 2023 10:00 a.m. PST until adjournment

1. Call to Order-Ali Jai Faison, BHPAC Chair

This meeting was called to order virtually via TEAMS at 10:06 AM by Chair Ali Jai Faison, who requested Ms. Jennifer Simeo take attendance of members. The attendance was as follows:

BHPAC Members Present: Anna Binder French Dafinone Sarah Dearborn Ali Jai Faison, Chair Jill Fisher Garrett Hade Lori Ann Kearse Dr. Pearl Kim Dr. Mavis Major **DeNeese** Parker **Misty Shore** Allison Wall Dr. Mae Worthey-Thomas

BHPAC Members Absent: John Clark Krista Hales Drew Skeen

BHPAC Members Present After Roll Call: Jeannie Hua Ariana Saunders, Vice Chair

2. Public Comment-

No action may be taken upon a matter raised under public comment unless the matter itself has been specifically included on the agenda as an action item. To provide public comment by phone, dial 775-321-6111 and enter Phone Conference ID: 401 384 546#. Comments will be limited to three (3) minutes per person. Persons making a comment will be asked to begin by stating their name for the record and to spell their last name.

Chair Ali Jai Faison asked for any public comment. There was none.

3. Approval of October 11, 2023, BHPAC Meeting Minutes – For Possible Action

Ms. Jill Fisher made a motion to approve the minutes as stated. Dr. Mae Worthey-Thomas seconded the motion.

Motion passes unanimously. BHPAC meeting minutes have been entered into record for October 11, 2023.

4. Children's mental health funding needs presentation – Informational Only Dr. Jacqueline Wade, Deputy Administrator, Residential and Community Services, Division of Child and Family Services

Dr. Jacqueline Wade gave a thorough presentation on Children's Mental Health Services the Division of Child and Family Services provides. Dr. Wade stated they provide services to children from 0 to 20 years of age using a System of Care model. She discussed the community-based outpatient services they provide, including Children's Clinical Services, Early Childhood Mental Health Services, In-home Clinical Teams, Mobile Crisis Response Teams, and Wraparound in Nevada, also known as WIN. Dr. Wade also discussed the residential services they provide including Psychiatric Residential Treatment Facilities and Desert Willow Treatment Center. Desert Willow Treatment Center also serves to train the workforce, including nurses and psychiatric fellows.

Dr. Wade discussed gaps they see in services, including having appropriate levels of care and step down services, including for children coming back from out of state placements in need of an appropriate level of care; treatment for juvenile sex offenders, including inpatient and outpatient care; medically fragile children with a psychiatric diagnosis, including children with diabetes or traumatic brain injury; community-based and residential services for children with intellectual and developmental disability; staff training and workforce development, including partnering with higher education in social work and psychiatry, including keeping graduating professionals here in Nevada; and reimbursement for services, like Medicaid, and maintaining our community providers.

Dr. Wade asked if there were any questions, and there were.

Ms. Anna Binder asked whether DCFS pamphlets were available for pediatrician and counseling offices. She also asked about a legislative bill which raised wages and what else was needed for the underlying workforce. Dr. Wade talked about paraprofessionals getting a raise as all state workers did, however, there is still a need to look at this. Dr. Wade thanked Ms. Binder for the pamphlet suggestion.

Dr. Mavis Major asked about the limitations of inpatient beds for young children in the north part of the state and transportation issues parents face when seeking services in the south part of the state. Dr. Wade stated Medicaid funding is available to families who find they must place their children away from the family home, for travel, although it does sometimes fall on the parents. She stated if a family or child does not have insurance, the State can assist them in getting connected with services.

Ms. Allison Wall asked about placements of children with Medicaid vs. private insurance, and what the State helped with. Dr. Wade talked about the services at Desert Willow Treatment Center being for any child, and how out-of-state services are recommended, if applicable, only after assessments and testing.

Mr. Ali Jai Faison asked about how outside agencies are chosen to partner with DCFS. Dr. Wade stated that long-term stakeholders exist, including Nevada PEP, which is a resource that can help a child with educational needs. She stated they are looking to partner with specialized providers and discussed how providers can apply to contract with the State to provide services the State does not, including in-home services. Mr. Faison also asked about how children in an RTC complete their education. Dr. Wade stated that Desert Willow Treatment Center has a wing for education run by Clark County School District, and they do try to maintain the child's education while they are in the program, with curriculum taught by licensed teachers.

Ms. Misty Shore asked about the number of children who leave an RTC with an IEP and if they carry over into the community-based school district. Dr. Wade stated children who are identified as needing an IEP, they work with a school psychologist who will start the process, as it's important for children to discharge with their educational goals in place. She noted they also work with transition teams. Ms. Shore mentioned that any child who has had suicidal attempts is eligible for an IEP, and she had issues with Washoe County concerning this.

Ms. Anna Binder discussed the issue of schools calling the police on young children, or asking parents to come get them, instead of school personnel using preventative measures. She asked what the State could do. Dr. Wade stated she has heard about children being asked to leave, and it was increasing, and there is a need for more training for school personnel so that children can resume their studies in real time. She stated Mobile Crisis will respond to schools, if they are called, and there is a need for more funding, especially in the areas of training and prevention in Early Childhood.

Mr. Ali Jai Faison asked about the current census at Desert Willow Treatment Center. Dr. Wade stated they have 8 children in one unit; 9 children in another unit; 4 children in the pediatric unit; and 4 children in the acute unit. Dr. Wade stated an additional 10-bed unit is awaiting licensure and that their census is gradually going up.

Mr. Ali Jai Faison asked if the State had enough money to fund the gaps in service. Dr. Wade stated there was always a need for more funding, including for training and prevention in Early Childhood, including within the schools for teachers and aids, in how to handle children who are dysregulated or experiencing trauma. She stated implementing evidence-based services was important as well as ensuring continuity of care in the community. Dr. Wade also mentioned the need for a bridge to the community for youth in juvenile justice when coming from higher levels of care and general stakeholder partnerships. She talked about the need for services for developmentally delayed children, including those who end up in the courts. Dr. Wade talked about service needs for developmentally delayed children. She stated Texas NeuroRehab was being utilized often for medical and psychiatric care for these children, but the goal is to keep them in-state. Mr. Ali Jai Faison asked if a child could call Mobile Crisis themselves to ask for help. Dr. Wade stated a child can call but Mobile Crisis will ask for parental consent. She stated even when the school calls Mobile Crisis, they still get parental consent. She stated this is due to potential hospitalization. She stated if a child has a weapon, the police will need to be called and parents need to be made aware of what is happening or going to happen.

Mr. Ali Jai Faison asked what language services were available for children who use sign language. Dr. Wade stated they have access to providers who can provide sign language services.

Ms. Anna Binder asked if the state partners with Boys Town. Dr. Wade stated the state has used the Boys Town model within the Psychiatric Residential Treatment Facilities for years and has partnered with them frequently, including a recent partnership for a youth involved in the juvenile justice system.

Dr. Wade closed out by saying the state had just received ARPA funding, to fund partners in the north and the south to provide children with the services they need.

5. Update on SAMHSA MHBG Annual Report – Informational Only Dr. Ruth Condray, Deputy Bureau Chief, Division of Public and Behavioral Health, BBHWP

Ali Jai Faison, Chair, noted that Dr. Ruth Condray was out sick and that someone was speaking on her behalf.

Ms. Jennifer Simeo, speaking on behalf of Dr. Ruth Condray, stated that the Department of Public and Behavioral Health (DPBH) did submit the Mental Health Block Grant Annual Report to SAMSA by its due date, which was December 1st, 2023.

Ms. Simeo stated they did receive one comment from a BHPAC member and thanked them for that.

Ms. Simeo mentioned that they will provide the whole membership with the ability to access the full submitted report.

6. Subcommittee updates and assignments – For Possible Action Ali Jai Faison, BHPAC Chair

Ali Jai Faison, Chair, listed the historical subcommittees and asked for updates and asked members which subcommittee they were interested in joining. BHPAC members volunteered for subcommittees and delegated and/or suggested members.

It was decided the Legislative subcommittee members are Anna Binder, Chair; Jill Fisher, Vice Chair; Jeannie Hua; Lori Ann Kearse; Misty Shore; and Ariana Saunders. They set a tentative meeting for January 17, 2024.

The Promotions subcommittee members consist of Dr. Mavis Major, Chair; Garrett Hade; Dr. Pearl Kim; Ariana Saunders; and Ali Jai Faison.

Ali Jai Faison, Chair, stated that the Rural, Nominations, and Executive subcommittee suggestions and nomination of members have been tabled until the next meeting as an action agenda item.

7. Establishment of 2024 BHPAC meeting schedule – For Possible Action Ali Jai Faison, BHPAC Chair

Ali Jai Faison, Chair, started a discussion of the 2024 meeting schedule, however, due to BHPAC members needing to leave the meeting, setting the full 2024 meeting schedule was tabled, and a Doodle Poll was suggested to choose the next meeting date, between January 22 and January 29, 2024, at 10am.

This agenda item will be included in the next meeting.

8. Discussion of future agenda items – Informational Only Ali Jai Faison, BHPAC Chair

Ali Jai Faison, Chair, tabled this agenda item for the next upcoming meeting.

9. Public Comment-

Ali Jai Faison, BHPAC Chair

Ali Jai Faison, Chair, asked for public comment. There was one.

Ms. Claire Griffin expressed her appreciation and thanks to the members of the committee for allowing her to be at this meeting.

Ms. Griffin explained her passion for BHPAC and the happiness she felt for being a part of the discussions today.

Ali Jai Faison, Chair, asked for any further comment. There was none.

10. Adjournment – Ali Jai Faison, BHPAC Chair

Ali Jai Faison, Chair, called the meeting adjourned on October 11, 2023, at 12:08 p.m.

Note: Items on the agenda may be taken out of order, combined for consideration, removed from the agenda, or delayed for discussion at the Chairperson's discretion. The public body may combine two or more agenda items for consideration. The public body may remove an item from the agenda or delay discussion relating to an item on the agenda at any time. The public body may place reasonable restrictions on the time, place, and manner of public comments but may not restrict comments based on viewpoint.

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