
Behavioral Health Planning and Advisory Council (BHPAC)
DRAFT MINUTES
Thursday August 27, 2020
9:00am – Adjournment

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

Members:

Ali Jai Faison, Chair, Dr. Karen Torry Greene, Co-Chair, Alyce Thomas, Rene Norris, Stacy Kollias, Gillian Rae Stover, Sondra Cosgrove, Drew Skeen, Dawn Walker, Charlene Frost, Amber Neff, Dr. Megan Freeman, Susan Maunder and Ariana Saunders

1. Call to Order, Roll Call and Announcements. The meeting was called to order at 9:05 a.m. Quorum was met.

Members Present: Ali Jai Faison, Dr. Greene, Stacy Kollias, Sondra Cosgrove, Drew Skeen, Charlene Frost, Dr. Freeman, Alyce Thomas (quorum)

Members Absent: Rene Norris, Gillian Rae Stover, Dawn Walker, Amber Neff, Susan Maunder, Ariana Saunders

Guests and Staff: Raul Martinez and Cari Moss, Substance Abuse and Treatment Agency (SAPTA); Anita Smith, Clinical Director at the Allison Clinic; Linda Lang, Nevada Statewide Coalition partnership; Jessica Flood, Reginal Behavioral Health Coordinator Northern Region; Star Pazovani; Donna Cmicrozic, Executive Director Foundation for Recovery; Leo Monerdechin, Vice President of Operations WestCare Nevada; Brooke Adie and Tracy Palmer, Bureau of Behavioral Health Wellness and Prevention (BBHWP) Sonia Lee Division of Public and Behavioral Health (DPBH); Theresa Etchiberry, Clark County; Jacki Stewart, Churchill County Social Services, Lana Robards, Marta Williams, Stephanie, Strategy 360; Stephanie Woodard, (DPBH).

Agenda Item 1 closed. Agenda item 2 open.

2. Public Comment
There was no public comment.

Agenda Item 2 closed. Agenda Item 3 open.

3. Review of the Substance Abuse Block Grant and Mental Health Block Grant 21 Application
Mr. Faison: Rural/Frontier regions are lacking funding. People travel for hours to receive services to Elko or Las Vegas. How to allocate funding to rural/frontier communities. We need to review, discuss, and vote on how to resolve these issues.

We need to ensure allocated funds go to where they are intended.

Ms. Adie: A full application is required ever two years with a mini application in other years Due September 1. when talking about the Substance Abuse Block Grant we are required to set aside budget to primary prevention (25%), women's services (5%), mental health (10%); The Mental Health Block Grant we are required to budget 10% of the overall block grant to early serious mental health programs and first episode psychosis with programs in Carson Tahoe and added programs to Las Vegas and Washoe County.

Mr. Faison: concerted how data is gathered? How NV is last in ability and first in need in the nation it is impossible to make change with handful of dollars

Dr. Greene: we could have more than a few days to decide if we were to consistently meet quorum. Brooke has presented this information last year. I want to make it know the state has done a good job.

Mr. Faison: Behavioral Health Policy and Advisory Council (BHPAC) needs to advocate. We could be better effective if we could meet quorum.

Dr. Freeman: I need to drop of the call. I'll call back as soon as possible.

Mr. Faison: we no longer meet quorum.

Dr. Freeman: I am back on the call

Mr. Faison: quorum re-established

Ms. Adie: This application is only for two funding streams for substance abuse and mental health. The state has made strides with expanding certified community behavioral health clinics: we have nine in the state.

These aren't the only two funding streams

Ms. Kollias: how is it effected by the budget cuts

Ms. Adie: these are federal grants there has been no decrease

Mr. Faison: Thank you for sharing your information.

Agenda Item 3 closed; Agenda Item 4 open.

4. Approve Minutes from Behavioral Health Planning and Advisory Council (BHPAC) Meeting on January 6, 2020

Mr. Faison: is there a motion approval of the minutes from January 6, 2020 meeting?

Ms. Frost motioned to accept the minutes; Ms. Thomas seconds the motion; There was no opposition or abstention; Motion passed.

Agenda Item 4 closed; Item 5 open.

5. BHPAC Updates and Review of May 13, 2020 Meeting the BPHAC Chair Had with Substance Abuse and Mental Health Services Administration (SAMSHA) Federal Officer Regarding the Mental Health Block Grant

Mr. Faison: The group was left out of decision as BHPAC has not been able to make quorum and the history or not making quorum. Dr. Green and I strategized on how to make BHPAC more effective. When the awards are given; who is given money, how is it being used, did we follow up to see if it was effective is the money being used. Updates needed. Not a lot of transparency

after the last vote [award] which will be next agenda item?

Agenda Item 5 closed; Agenda Item 8 Open.

6. The Behavioral Health Community and the Effects of COVID-19

[Presentation](#) by Dr. Stephanie Woodard.

Dr. Woodard: Significant increase in emotional state due to COVID; Through the NV Resilience Project we are assigning resilience ambassadors to community organizations, 6 assigned to Washoe Community Human Services, Partnership Boys and Girls Clubs across the state, Frontier Community Coalition, Southern Nevada Health District, Quad-County Human Services, Crisis Services, and Aging and Disability. Slide stack available, if anyone would like it Cari can send it out.

Ms. Adie: I did send it out to everyone listed on the calendar and as soon as we are done, we'll post it on the website.

Ms. Kollias: the INV waiver 1115 for the seriously mentally ill? Have we had any progress on applying?

Dr. Woodard: No. The recommendation from CMS to the state is to apply for the SUV waiver first. And, it needs to be addressed through budgeting process, governor's office, and the legislative process.

Ms. Kollias: We have applied for the substance abuse but not the seriously mentally ill?

Dr. Woodard: No, we have not received authorization from the governor's finance office.

Ms. Kollias: what would need to push that a long?

Dr. Woodard: one of the regional behavioral health boards is looking to move a policy along. If there is an opportunity, I suggest supporting their efforts. Long process a not only budget concept needs to be proposed, but also approved.

Ms. Kollias: Is there any way you can share the names of those committees/agencies that are working on legislation.

Ms. Frost: the Washoe Policy Board is working on substance abuse legislation. The meetings are publicly noticed.

Ms. Kollias: I just want the names of the groups/agency Stephanie mentioned and how to reach them.

Dr. Woodard: we will provide the information to you.

Mr. Faison: As you can see, Dr. Woodard covered item 6 & 7. We are going to go back to the top of the agenda.

Mr. Faison: is there any public comment at this time?

Ms. Kollias: who can I expect to send me information? Will it be Cari or Jessica?

Ms. Adie: I will put you in contact with Jessica and Charlene and we will make sure you get the information

Agenda Items 6 and 7 are closed; Agenda Item 3 Open.

(This agenda item was taken out of order)

7. Review of Community Integrated Strategic Plan and the Crisis Counseling Plan Resulting from Emergency and Other Grant Funding [Presentation](#) by Dr. Stephanie Woodard.
(This agenda item was taken out of order)

Agenda Items 6 and 7 are closed; Agenda Item 3 Open.

8. Presentation of All Proposed Recipients of SAMSHA Block Grant Funding: Who are They, What Do They Do, The Use of Funds, and the Expected Outcomes After Funds Are Used and Programs are Implemented

Ms. Yohey: Mental Health Block grant based on inter-community health strategic plan it is broken down into adults and children; adult criminal justice diversion, children basically the same. 31 applications; 9 funded starting October 1. We are in negation with providers to decrease some budgets will send out a list when negotiations are done. Going through are list: adult criminal diversion we are funding: Northern Nevada Hope, assertive community treatment: Carson-Tahoe; Community Risk Support Adult: Carson Support Services of Nevada and NAMI; Juvenile Justice Diversion: Northern Nevada Hope; Transitional Age Youth: Solutions for Change: Direct Services: Div. of Child and Family services, Chicanos to LA CASA, and United Citizens Foundation.

Ms. Green: Clarifying on ACT Team which is Assertive Community Treatment and clarify the ACTs team services are included in the rate for FET?

Ms. Yohey: yes.

Ms. Kollias: how are consumer being notified or programs and resources

Dr. Green: CCBHC trained to collaborate w/communities to assign primary behavioral health provider

Mr. Faison: expected outcome is there a measurement tool to ensure the programs are doing what they are supposed to do?

Ms. Yohey: quality assurance specialist does a deep dive and monitoring the deliverables.

Agenda Item 8 closed; Agenda Item 9 Open.

9. Review of BHPAC Council Make Up: BHPAC vacancies; BHPAC communities and their inactivity; The Submission of Names of Individuals to Add to BHPAC; and Revival of the BHPAC

Mr. Faison: Raul is scheduled to Present. We are missing about 6 members from council and some applicants are not hearing about their application. I will reach out to the Governor's Office.

Mr. Martinez: I have established communication with a point of contact at the governor's office within the Boards and Commission who will assist us with current make up of BHPAC. BHPAC Members must be approved from Governor's office and need a letter of appointment from the Governor's office. The process is the same to be removed. Cari

will be working in the point of contact to update the member list. The By-laws state BHPAC must have a nomination sub-committee to review the nominees. Cari will guide the nominees through the process.

Ms. Adie: Communication with the point of contact has provided some information with vacancies. Vacancy in the Education, Substance Abuse, Criminal Justice, Vocational. Rehabilitation, Medic-aide, chronically mentally ill individuals who have or are receiving mental health services (4); Persons with substance abuse who have or are receiving services, families of chronically mentally ill individuals who have or are receiving mental health services and housing.

Mr. Faison: formal letters have been sent out to members who have missed 3 or more meetings. Some members have given notice of resignation.

Ms. Thomas: do we know who the council sent letter too?

Mr. Martinez: I do not have the information on hand.

Mr. Faison: I have that email from a year ago I can send that too you.

Ms. Adie: We will ask the point of contact to let us know whoever applies through Governor's Office. The Governor's appoints 23 members to the council.

Ms. Kollias: Previously we would submit applications selected by the subcommittee, to your office and then you would submit it to the Governor's Office.

Agenda Item 9 Closed; Agenda Item 10 open

10. Update from Governor's Office on the Delay in Review and Approval of Applications to BHPAC, Appointments, and the Lack of Filling of Positions that Represent the State of Nevada

Mr. Faison: Is there a Governor's staff here?

Mr. Martinez: I believe the intention was to have the point of contact to join the meeting, however he is not here for this meeting. If you would like to have the point of contact to join a future meeting, I can relay the information If you would like to table the item for a future meeting.

Mr. Faison: tables Agenda Item 10 for future meeting

Agenda Item 10 closed; Agenda Item 11 open.

11. Presentation of Proposal to Consolidate BHPAC With the Commission of Behavioral Health

Dr. Green: With the creation of other boards, there is concern that there is some duplication of efforts and resources are becoming valuable and concern that some resources are being wasted. Why do we have this board if it can be absorbed into another board or a committee of another board. Because we target a specific population in combining with another board, we can expand contact with the people we serve and more collaborative with tasks. Increase efficacy with people on the board. Reduce repetition of not only one committee of multiple committees working on the same issues. Maximize efforts by sharing data collection, review, and presentations. If we are subcommittee of another board, we could get the same information; we might increase

are avenues for advocacy, increase mandating reporting, increase funding, and amplify our voices especially for the underserved and for the rurals and frontier. As a subcommittee of the Commission we could focus on advocacy instead of quorum efforts. We could facility the collection and comparison of qualitative and quantitative data. We spend more time address quorum and administrative issues than on focusing community needs. Consolidation would benefit active BHPAC committee members, community behavioral health, Dept of Public and Behavioral Health, and the state of Nevada providers and most importantly people who are effect by behavioral health issues. We have compiled a letter we would like to submit to the chair of the Commission. Is there anything you would like to add Ali Jai?

Mr. Faison: Yes, this wasn't just dreamed up, we carefully looked at, we were looking for some way to provide purpose and effectiveness. In conversation with Dr. Woodard and DHHS, the idea merging or giving us a different agenda and the ways to get that accomplished. We came up with a solution and present BHPAC, review the letter, review the information, then take a vote if we wanted to move forward with this direction.

Ms. Thomas: You want to dissolve. If that is correct, where does it go with what is says to get the grant you need this council? Where does it leave the current members?

Dr. Green: The vision is that we would be a committee of the Commission. Instead of being an entirely different entity.

Ms. Thomas: would we still have a voice

Dr. Green: yes, we would have a voice

Mr. Faison: We would still maintain our identity. We had a lot of dormancy. We would like to stay in the loop with information rather than be by-passed by not meeting quorum. Legal ramifications are being looked at so we could be effective with the block grant funding.

Ms. Kollias: the committee we are joining is it still involve serious mental illness? What would our mission become?

Dr. Green: The Commission on Behavior Health is all about mental health. That is why we chose that committee because it is closely aligned with our mission. We would continue with our mission as a committee rather than a board. We would fulfill the purpose under a different platform.

Dr. Freeman: The Commission is an oversite body for DCFS (Dept. of Child and Family Services) and DPBH (Dept. of public and behavioral health) meets several times a year. Approve policies for DCFS and DPBH. We oversee the use of block grant funding, which is embedded in DPBH, so I think it is a nice fit in that we have similar priorities.

Ms. Kollias: is the commission the same thing as the regional boards?

Dr. Green: No

Mr. Faison: BHPAC has been approached by other of departments to be a part of other existing groups for the state to include the diverse makeup of the BHPAC council. We would be able to bring in the consumer to get a better look at our state. The members of this council will still have an active voice in the larger commission

Ms. Frost: would that require a legislative change? The commission is setup in NRS 232.361. Who bring forth that bill to make that change?

Mr. Faison: exactly; Dr. Woodard would put in place the people to make that change.

But she cannot do anything until the BHPAC makes that decision to move forward.

Ms. Thomas: I would like more time to digest this, it is a lot of information in just a few minutes. I can't vote today without more information

Mr. Faison: we presented an idea, and this is about whether we want to think about it and bring more information to the members. We must vote to make movement. We are not saying if we are moving forward with one idea. Today we are talking about looking into the idea, or will we take action in the next meeting?

Mr. Skeen: the motion would be "we allow this committee to move forward with investigating and research analysis on joining other committees with no other decisions to move forward".

Mr. Skeen made a motion to allow this committee to move forward with investigating and research analysis on joining other committees with no other decisions to move forward; Ms. Thomas seconds motion;

Opposed: none; Abstention: None; Motion passes.

Agenda Item 11 closed; Agenda Item 12 open.

12. Approve Future Agenda Items

1 results of research on joining Commission

2 advocacy efforts to federal government for telehealth

3 Dawn – follow up measurement tools/success (Agenda item 8) of funding partners

4 Point of contact at governor's office about members – applications, resignations, etc. (Item 9 & 10)

5 explore other options (boards/commissions to join)

Ms. Frost made motion to accept agenda items: Ms. Kollias seconds; There was no abstention or opposition.

Agenda Item 12 closed: Agenda Item 13 open.

13. Approve Future Meeting Date[s]

In the interest of saving time, I would like to propose a time frame with Cari send out a poll either the second or third week of October and December.

Ms. Thomas makes motion to send doodle poll; Ms. Frost: seconds motions: Opposed: none; Abstention: none; motion passes

Agenda Item 13 closed; Agenda Item 14 open.

14. Public Comment

There was no public comment.

Agenda Item 14 closed;

15. Adjournment

Mr. Faison adjourned the meeting at 12:27 p.m.