

COMMISSION ON MENTAL HEALTH AND DEVELOPMENTAL SERVICES

SEPTEMBER 17, 2010

VIDEO TELECONFERENCE MEETING LOCATIONS

SIERRA REGIONAL CENTER, 605 SOUTH 21<sup>ST</sup> STREET, ROOM 122, SPARKS, NV  
AND  
DESERT REGIONAL CENTER, 1391 SOUTH JONES BOULEVARD,  
TRAINING ROOM, LAS VEGAS, NV

EXECUTIVE SESSION MINUTES

COMMISSIONERS PRESENT AT THE RENO LOCATION:

Kevin Quint, SAPTA, Chair  
Barbara Jackson  
Pamela Johnson

COMMISSIONERS PRESENT AT THE LAS VEGAS LOCATION:

Julie Beasley, Ph.D.  
Valerie Kinnikin  
Marcia Cohen

COMMISSIONER ABSENT:

Toni Richard – excused

Chair Quint opened the Executive Session at 1:00 P.M.

Chair Quint opened the Executive Session for the review of Seclusion/Restraints and the Denial of Rights pursuant to NRS 433.534(4) and NRS 241.030.

**APPROVAL OF EXECUTIVE SESSION MINUTES: May 20, 2010**

**MOTION:** Commissioner Beasley moved to approve the May 20, 2010 Executive Session minutes as submitted, seconded by Commissioner Jackson. The motion passed with Commissioner Johnson abstaining.

**REVIEW OF SECLUSION AND RESTRAINTS PURSUANT TO NRS 433.534 (4) AND NRS 241.030; REVIEW OF DENIAL OF RIGHTS**

Commissioner Kinnikin stated that in a review of the forms she discovered that the forms are not uniform and there is not a signature line on every form. Commissioner Kinnikin also questioned if the forms are to be signed or initialed and what is the process/feedback for death reports?

Dr. Cook responded that the Death Review Policy requires that certain death reports, such as suicides and other deaths which occur under unusual circumstances which constitute a

serious event, are to be reviewed by the Commission. Deaths in a facility are automatically reported, as are suicides. Dr. Cook offered that if a Commissioner has questions concerning the treatment or follow up on any particular death would be useful to the agency.

**ACTION:** Dr. Cook stated that all of the forms should be uniform and will check to determine why different styles of the forms are being used.

Commissioner Jackson stated that there were no issues with SRC and the forms were complete and well done.

Commissioner Beasley, in a review of DRC, stated that there were good descriptors; and assumes that there is something amiss in the treatment plan when there is one patient with multiple incidents.

Commissioner Beasley continued to express concern on how to make this process and feedback more useful to the Commission and facilities.

Commissioner Kinnikin, in a review of NNAMHS, expressed concern with client #00-94-74 as there was no description of the specific behavior of the individual receiving services.

Commissioner Cohen, in a review of RRC, stated that there were some forms in which information was scratched out or written over; the proper procedure needs to be followed to line out the information with initials of the individual correcting the information. Commissioner Cohen stated that the facility should offer chart training when charting errors occur.

Chair Quint, in a review of SNAMHS with seclusion and restraint, expressed concern with client MAR#151123 in which the box checked indicated "restraint up to four hours", but the information listed on the form states that the restraint lasted five hours forty minutes. Chair Quint stated that the remainder of the forms contained good documentation.

Chair Quint stated that in a review of Denial of Rights for Lakes Crossing, there were no issues; but raised a question as there were a number of Seclusion and Restraint reports with no end release time/date for the same client number #2689A.

**ACTION:** In the absence of Dr. Neighbors, Dr. Cook will pass this concern along to Dr. Neighbors.

Commissioner Johnson is holding her comments.

## **REVIEW OF DEATH REPORTS**

Chair Quint stated that there were numerous death reports to be reviewed.

Commissioner Beasley expressed concern that there appears that these individuals have multiple medical issues with multiple psychiatric medications. Commissioner Beasley expressed that a medical physician needs to be present at these meeting to help answer the medical questions. Commissioner Beasley stated that there is a lack of collaboration in

southern Nevada between the primary care physician and other physicians treating the patient.

Commissioner Cohen stated in her review of the death reports it was apparent that there are multiple medications being prescribed/taken that would interact with other medications. Commissioner Cohen suggested that there is a need to reassess a client's medications and within incident #2901 there is no indication that any drug testing was completed to determine the cause of the patient's slurring.

Chair Quint expressed HIPAA concerns with regard to case #3107 and that e-mails contained facts about the incident and the patient's name. Dr. Cook responded that the staff member involved in this case was disciplined for the HIPAA violation.

Chair Quint stated that in case #10-0226 the name was not redacted in the packet.

Upon questioning by Chair Quint, Dr. Cook responded that the root cause analysis is an internal document and those would not be sent to the Commission.

Chair Quint noted that about half of the death reports were individuals with substance abuse related deaths. Chair Quint questioned how are the agencies doing with the integration treatments and identifying individuals who are mixing medications, etc.

Jane Gruner, Director of SRC and the Statewide Coordinator for Developmental Services, stated that following a discussion with Chair Quint, she is developing a White Paper for the Commission to provide history, identify the current issues, and key priorities for the November meeting.

**DISCUSSION OF INFORMATION RECEIVED FROM DRC WITH REGARD TO THE REQUEST FOR ADDITIONAL MEDICAL INFORMATION; HOW CLIENTS ARE MONITORED AND MANAGED AND A REQUEST TO REVIEW THE QUALITY ASSURANCE AND UTILIZATION REVIEW REPORT; AND 2) OUTCOME AND ACTION STEPS FOR THE FACILITY**

This item was postponed until the November meeting.

**FUTURE AGENDA ITEMS FOR EXECUTIVE SESSION**

The following items were requested to be placed on the next Executive Session agenda:

- Discussion with Jane Gruner of information received from SRC with regard to the request for additional medical information how clients are monitored and managed with a request to review the quality assurance and utilization review report; and the outcomes and actions steps for the facility.

The following items were requested to be placed on the Regular meeting agenda:

- Discussion on how to make this review process more useful to the facilities.

**ADJOURNMENT OF EXECUTIVE SESSION**

Chair Quint adjourned the meeting at 1:40 P.M.

Respectively Submitted,

Christina Harper  
Recording Secretary