

COMMISSION ON MENTAL HEALTH AND DEVELOPMENTAL SERVICES

DECEMBER 4, 2003

VIDEO TELECONFERENCE MEETING LOCATIONS:

KINKEAD BUILDING
505 EAST KING STREET, ROOM 601, CARSON CITY
AND
SPECIAL CHILDREN'S CLINIC
3811 WEST CHARLESTON BOULEVARD, SUITE 209, LAS VEGAS

MINUTES

COMMISSIONERS PRESENT AT THE LAS VEGAS LOCATION:

David Ward, Chair
Eric Albers, Ph.D.
Johanna Fricke, M.D.
Gretchen Greiner, Ed.D.
Joan McCraw, Registered Nurse
Rena Nora, M.D.
Elizabeth Richitt, Ph.D.

COMMISSIONER ABSENT:

John Brailsford, Ph.D. – excused

CALL TO ORDER

Chair Ward called the meeting to order at 1:05 P.M.

HIPAA REQUIREMENT PRESENTATION AND CLARIFICATION OF HIPAA POLICY 6.009

Ed Irvin provided clarification of HIPAA Policy 6.009 requested at the last meeting.

Mr. Irvin stated that a covered entity may disclose information if it believes the disclosure is necessary to prevent serious harm to the individual or other potential victims. The policy then provides an exception to reporting child abuse or neglect. There is a concept of an incest case, that if the perpetrator is in counseling, in the process of trying to stop the behavior, and the perpetrator discloses information related to an offense then there is literature indicating that this information should not be required to be reported because the perpetrator, being in counseling, is more likely to stop the negative behavior as opposed to reporting it to law enforcement. HIPAA was originally created for the private sector, not the public sector, but now applies to all. If the disclosure is to prevent serious harm it can be disclosed, however if it is discovered

as referenced when someone is being treated and it is discovered in that process, then the exception that allows that disclosure is taken away.

All Commissioners expressed concerns regarding the complexity of the HIPAA law and regulations and how staff will be able to understand and apply HIPAA laws.

Dr. Richitt expressed concern with regards to how staff is to understand and apply HIPAA laws. Ms. McCraw questioned if there is a HIPAA cheat sheet for the staff? Mr. Irvin responded that the MHDS policy and procedures is the staff cheat sheet.

Dr. Nora questioned whom the staff should call for HIPAA related questions. Mr. Irvin responded that each facility has a Privacy Officer and/or the MHDS Privacy/HIPAA Compliance Officer.

Dr. Albers questioned if DCFS has HIPAA policy and procedures and does DCFS have a Privacy Officer? Pete Galanowitz, DCFS, responded that DCFS has a Privacy Officer position allocated through the last Legislature and that position is in the hiring process.

Upon discussion, Mr. Irvin stated that HIPAA is not necessarily understandable today, at least not on a practical level. Staff can understand general concepts, understand the dos and don'ts, and understand the policy and procedures. The law and the regulations are still developing and there is clarity coming out of the Office of Civil Rights for enforcement purposes. Mr. Irvin stated that this is an ongoing learning process.

Dr. Albers questioned if the staff is liable for HIPAA laws during the HIPAA clarification process. Mr. Irvin stated that the staff is liable and a breach of HIPAA for a disclosure for HIPAA of private health information is punishable by imprisonment and a fine of up to \$250,000.

Chair Ward questioned when the Commission would receive HIPAA training. Mr. Irvin stated that the MHDS Privacy Officer would provide HIPAA training at a future meeting, after the position is filled.

ACTION: Chair Ward requested that the HIPAA presentation and training be placed on a future agenda. Mr. Irvin suggested that the HIPAA be an ongoing training item.

The Commission discussed writing letters to Senators Reid and Gibbons and the Office of Civil Rights expressing the Commission's position and concerns on HIPAA.

ACTION: The Commission requested that draft letters be developed to Senators Reid and Gibbons, and Office of Civil Rights and placed on the February agenda for review, discussion, and approval. Dr. Albers requested that representatives from other professional groups attend a Commission meeting to inform how HIPAA impacts them.

DISCUSSION ON THE COMMISSION'S WORK PLAN FOR 2004

Chair Ward opened the discussion regarding the establishment of the 2004 Work Plan and what the Commission would like to accomplish.

Chair Ward feels that the Commission should receive additional feedback from more sources to lead to the enforcement of positive things being accomplished and/or change policies or procedures to resolve concerns, problems, and issues.

Dr. Nora stated that the state is poised to have the President's Mental Health Implementation Plan, their goals might be used as reference for the Work Plan.

Dr. Albers expressed concern that the Commission has not been invited to be a part of or included in the Mental Health Implementation Commission. It was discussed that Commissioners have been notified of Mental Health Implementation Commission meetings.

Ms. McCraw would like to see an increase in the quantity of services, an increase in the access to services, improve the observance of patient rights, and promote information and education to medical professionals.

Dr. Greiner stated that in the rural area services are not available, difficult to find, and complicated by the distance to services. Dr. Greiner would like to see an expansion in the access to services. Dr. Greiner expressed concern in the rural areas where hospitalization, even for the 72 hours, is not an option. Dr. Greiner stated that a future goal of hers is to have a small 6-9 bed facility in the northeastern part of the state.

Chair Ward stated this discussion would continue after the New Hospital Power Point presentation.

A break was granted at 2:05 P.M.
The meeting reconvened at 2:15 P.M.

POWER POINT PRESENTATION OF NEW HOSPITAL

Dr. Rosin introduced Jerry Eich and Thomas Casazza, project architects, who were responsible for the Dini-Townsend Hospital in Reno. Dr. Rosin presented a Power Point presentation of the new hospital. Dr. Rosin stated that a tremendous amount of research and planning has gone into making this a state of the art hospital. Dr. Rosin stated that this presentation would be given this evening at the Easter Seals Office. Dr. Rosin invited and strongly encouraged Commissioners to attend the Easter Seals presentation to lend support to the project, as there are individuals upset about the project and would like to stop the project.

Dr. Rosin stated that the newly revised Agency and Project's Mission Statement is to help adults with mental illness and improve their quality of life.

Dr. Rosin stated that the Project would help serve the community's needs. Nevada has fewer public psychiatric beds per 100,000 population than any of the surrounding states. The national average of publicly funded psychiatric beds in the country is 8 per 100,000; Las Vegas Valley has 4.5 beds per 100,000. Dr. Rosin stated that Nevada ranks 43rd nationally for the number of psychiatric beds available to the community.

Dr. Rosin stated that SNAMHS has never and will never provide services to the criminally insane. Those services are provided at Lakes Crossing in Sparks, Nevada. Dr. Rosin stated on the issue safety and security, the new structure will have physical barriers, trained personnel, and security systems to provide total security to the community. Dr. Rosin addressed concerns as to increased traffic, homelessness, and providing security to the entire area. Dr. Rosin stated that this project is Governor Guinn's number one building priority.

The Project Goals include:

- To create a caring environment for patients through rehabilitation in an creative environment;
- To be a proactive member of the community;
- To be a "Good Neighbor"; and
- To continue to be an active part of the teaching university system.

Jerry Eich reviewed the design concepts of the new hospital. The hospital will have all care internalized within the buildings and create a residential environment. The hospital occupancy target date is January 2006.

DISCUSSION ON THE COMMISSION'S WORK PLAN FOR 2004

Chair Ward stated that he would like to see the Commission involved in efforts for the reduction of the mental health stigma.

Chair Ward stated that the Legislature will reconvene in January 2005 and the Commission has just over one year to determine how to impact the needs of MHDS. Chair Ward would like to have a Legislative Action Plan. It was discussed to review what is being implemented in other states and mission statements of other mental health commissions.

Dr. Albers questioned if there is a commitment from Legislators in the State of Nevada to improve the mental health system. Dr. Albers questioned to what extent does client self-determination compare to the role of the professional. What is the coordination of follow through and follow-up of a client after care? What is the responsibility of the professional to provide services/resources when the client refuses services?

Ms. McCraw questioned the power of the Commission and how to have an impact and be proactive in the community.

Chair Ward responded that the Commission has the authority and/or obligation to make recommendations to anyone regarding the care and treatment of the mentally ill or the developmentally disabled within the state.

The Commission discussed requesting placement on other Board/Commission agendas to discuss Commission issues and concerns.

Chair Ward would like to discuss and ask for cooperation on issues and concerns with hospital administrators in the private sector. If that issue or problem cannot be dealt

with in one-on-one meeting, then the issue may have to be dealt with in an open and public meeting.

Chair Ward stated that the Suicide Prevention Statewide Resource Directory is the single best and most important thing that has come out of this Commission.

The Commission discussed prioritizing items on the work plan and setting specific goals for 2004.

The Commission agreed to have a couple of Commissioners visit private hospitals as an outreach project to discuss Commission issues and concerns. Mr. Irvin stated that the Commission has open access to inquire, but if resistance is encountered, then the Commission should form a subcommittee.

The Commission stated that they would like to hear from representatives of various professional groups in the field on their perception of mental health issues and concerns. The Commission also discussed the issue of private practice concerns vs. state system employee concerns.

Dr. Albers stated that he would like the Commission to discuss issues, problems and concerns during the meeting as agenda items and eliminate many of the reports.

ACTION: Dr. Albers suggested that the meeting agendas be changed for the elimination of verbal updates and reports as separate action agenda items. Dr. Greiner suggested "Consent Agenda Items". This item would encompass and include approval of all written reports and updates as one agenda item, and still allows the opportunity for questions if there is an concern/issue on a report. It was also suggested that when a Policy is on the agenda for review and approval, the changes are to be underlined and the deleted wording bracketed out, and/or a listing of the changes be included at the beginning of the Policies.

ACTION: The Commissioners requested that Mrs. Harper inquire as to the Financial Disclosure Form from the Nevada Commission of Ethics. Send a copy to each Commissioner and determine when the forms are due. Ms. McCraw stated that the financial disclosure forms must be filed each year by May 31 or 60 days before vacating a position.

The Commission discussed the term of the Chair. Mr. Irvin stated that the Governor appoints the Chair by recommendation from the Commission. The Commission may elect a Vice Chair every 2-4 years, to hold office for 2 years terms and not to exceed 4 years. Offices are not to be held for more than 2 consecutive terms.

ACTION: Mr. Irvin suggested and the Commission agreed to place the term of the Chair on an agenda in the spring.

PUBLIC COMMENT

There was no public comment.

ADJOURNMENT OF WORK SESSION MEETING

MOTION: Dr. Greiner moved to adjourn the meeting, seconded by Dr. Nora. The motion passed unanimously.

Respectfully submitted,

Christina Harper
Recording Secretary