COMMISSION ON MENTAL HEALTH AND DEVELOPMENTAL SERVICES

JUNE 11, 2004

VIDEO TELECONFERENCE MEETING LOCATIONS

NDOT, 1263 SOUTH STEWART STREET, ROOM 301, CARSON CITY
AND
NDOT, 123 EAST WASHINGTON BOULEVARD, BUILDING B, LAS VEGAS

MINUTES

COMMISSIONERS PRESENT AT THE CARSON CITY LOCATION:

David Ward, Chair
Eric Albers, Ph.D.
Gretchen Greiner, Ed.D.

COMMISSIONERS PRESENT AT THE LAS VEGAS LOCATION:

John Brailsford, Ph.D.
Rena Nora, M.D.
Elizabeth Richitt, Ph.D.

COMMISSIONERS ABSENT:

Johanna Fricke, M.D.
Joan McCraw, Registered Nurse

CALL TO ORDER

Chair Ward called the meeting to order at 9:07 A.M. Chair Ward determined that a quorum was present. Introductions were made at both locations.

APPROVAL OF CONSENT AGENDA

There was a request to withdraw Consent Agenda Items #A, #C, #D, #E, #F, and #G.

MOTION: Dr. Greiner moved to approve Consent Agenda Item #B, seconded by Dr. Richitt. The motion passed unanimously.

Item #A – APRIL 16, 2004 MINUTES

The following amendments were made to the April 16, 2004 minutes; Page 3, 2nd paragraph 9th line, …progress towards meeting the outcomes set by the federal government [and] *or* lose funds…; Page 3, 5th paragraph, 3rd line, …Ms. Bosworth stated that strengths [were] *have* been identified, know what areas to work on…; Page 4, 2nd and 3rd paragraph, 2nd and 4th line, replace [psychology] with *psychiatry;* and Page 6, 7th paragraph, CONSUMER SERVICES ASSISTANCE PRESENTATION OF THE PSYCHOEDUCATIONAL [MATERAISL] *MATERIALS* FROM THE TRAINING.

MOTION: Dr. Nora moved to approve the April 16, 2004 minutes as amended, seconded by Dr. Brailsford. The motion passed unanimously.

Item #C – CONSUMER SERVICES ASSISTANCE PROGRAM UPDATE

Ms. Thomas was not present for the meeting, as she was in Washington D.C. and she did not provide a report.

Item #D – CRISIS CALL CENTER

There was no representative present and no report was provided.

Item #E – MHDS NORTH AND SOUTH ADVISORY BOARD UPDATES

There were no representatives present and no reports were provided.

Item #F – AGENCY DIRECTORS' REPORTS

Dr. Richitt expressed concern with the deteriorating condition of the physical plant at NNAMHS. Dr. Cook responded that the buildings, with the exception of the Dini-Townsend Hospital, are about 50 years old. Department of Human Resources Director Mike Willden will tour the NNAMHS facility on July 1, 2004 and perform an evaluation of the buildings. Dr. Cook stated that it may be a possibility that they will have to move out of the deteriorating buildings, as renovating the buildings would be cost prohibitive. Dr. Cook stated that they will develop an action plan after the July 1st walk through of the facility.

Dr. Richitt questioned if the situation is improving with providers receiving payment from Medicaid. Dr. Brandenburg stated that all of the agencies involved have been working together to solve the problems and provide payment to providers. Dr. Brandenburg responded that the situation is better on the Developmental Services side than the Mental Health side.

Dr. Richitt stated that she is pleased that the wait lists are being reduced at all facilities, except for the SNAMHS medication clinic. Dr. Rosin responded that even when fully staffed there will be a wait list at the medication clinic.

Upon questioning by Dr. Richitt, Dr. Neighbors reported that Lakes Crossing will be expanding their facility by 30 beds, which will create another unit at the facility and allow Lakes Crossing to manage the growing demands.

MOTION: Dr. Albers moved to approve Consent Agenda Item #F, seconded by Dr. Richitt. The motion passed unanimously.

STATEWIDE MEDICAL DIRECTOR'S REPORT

Dr. Rosin reported in regards to the new hospital that neighbors held a vigil in opposition of the new hospital. Dr. Rosin stated that the plans are 75% complete and the final plans will be submitted to the Bureau of Licensure for approval in July, in

addition there is a $23,000 fee to submit with the final plans which will come out of the FY 2005 budget. Dr. Rosin stated that the new hospital plans are on target to date with groundbreaking scheduled for this fall.

Dr. Rosin stated that SNAMHS is staffed with 21 doctors out of 22 positions and will be fully staffed by July. Dr. Rosin stated that because they are requesting many new positions to keep up with the growth, they will be advertising this summer in the national journals targeting senior psychiatric residents for positions that will be available in the next hiring cycle.

Dr. Rosin stated that there will be a public workshop at NNAMHS on July 1st and a public workshop and public hearing at SNAMHS on July 2nd regarding SB 94. SB 94 prompted the Division to develop definitions and regulations for a new entity for licensure for a one-stop triage center.

Dr. Rosin reported that last Friday, the State Board of Medical Examiners heard testimony regarding the needs to have 3rd year medical residents to perform history and physicals on patients at SNAMHS. This was prompted by the Joint Commission that is requiring history and physicals on all patients. SNAMHS is currently performing this function with a physician assistant, however with continued growth and approval from the Medical Board, SNAMHS will be able to hire 3rd year medical residents to perform history and physicals. Dr. Brandenburg stated that JAHCO requires that the history and physical be performed with 24 hours of admission. Currently, SNAMHS is in compliance with JAHCO requirements.

PRESENTATION OF UPDATED MHDS SLIDING FEE SCALE

Jennifer Kizer, Chief Fiscal Officer for MHDS, stated that they are currently in the process of developing a new billing system and while developing this system it was decided to review and update the sliding fee scale.

The sliding fee scales will be used to determine the amounts of billed services for which a client may be responsible and to determine eligibility for the Family Preservation Program. The existing sliding scales have been in place since 1991 and are inconsistent across programs and agencies within the Division. The recommendation is for two sliding scales to be approved, one for the developmental services agencies and one for the mental health agencies due to the distinct differences between the clientele serviced.

Peggy Clark stated that the old sliding scale varied program by program. The new scales will be uniform and consistent across all services provided by MHDS, are tied to an independent definition of poverty (Federal Poverty Guidelines), and are in a one-page easy to understand format. The basis for both the developmental services and mental health scales will be a percentage of the Federal Poverty Guidelines. The poverty guidelines are adjusted each year and thus the scales will be updated annually providing an ongoing consistent format.

These sliding scales will be utilized consistently across all programs. Utilizing the new scale will be very simple and staff will first need to confirm family size and document the gross family income.

The current system is very labor intensive and with the new software there will be better tracking and reporting to the Legislature.

Les Gruner, DCFS, stated that they are working on a similar type of sliding fee scare and will be simplifying their process, similar to MHDS.

MOTION: Dr. Greiner moved to approve the MHDS Sliding Fee Scale, seconded by Dr. Nora. The motion passed unanimously.

SUICIDE PREVENTION RESOURCE COORDINATION TASK FORCE UPDATE

Dr. Nora stated that during the last legislative session SB 49 – Nevada Statewide Suicide Prevention Plan - was approved without budget support and it appears now that there is no funding available from the Department of Human Resources. Dr. Nora stated that as of today, she does not think that we will able to meet the plan of having something by January 2005 and expressed concern about momentum for suicide prevention and may request funds during the next legislative session.

Dr. Crowe updated the Commission regarding the Public Health Grant from the Center for Disease Control. Dr. Crowe stated that Nevada applied for the Public Health Grant and there were four applicants for thirty-two sites. Nevada was not chosen after the interview process of the application. Dr. Crowe stated that if the program is available next year then Nevada may re-apply. The individual from the Public Health Grant could help with the Nevada Statewide Suicide Prevention Plan.

Dr. Nora questioned if the Statewide Suicide Prevention Plan could be privately funded or funded by a foundation. Dr. Brandenburg stated that it could be privately funded and he continuously searches for other suicide prevention grants. It was discussed that approximately $150,000 - $200,000 would be required for the Statewide Suicide Prevention Plan.

REPORT AND UPDATE OF THE DCFS PLANNING CONFERENCE

Theresa Anderson, Deputy Administrator for DCFS and on behalf of DCFS Administrator Jone Bosworth, stated that the April Planning Conference was better than anticipated with 156 internal and external stakeholders and used an automated polling system for the participants, in which each participant received their own remote control. The group of 156 participants was divided into nine strategic areas. Those groups were tasked with developing goals, objectives and action steps. On the second day, the group voted on the goals, objectives and actions steps with the automated polling.

The State Plan with the polling priorities are on the DCFS website. The final report from the Federal Government has been received and is also on the website. Ms. Anderson stated that DCFS now has 90 days to develop a program improvement plan.

ACTION: Ms. Anderson invited the Commission to be involved in the process and will continue to keep the Commission updated on the Plan's progress.

DISCUSSION REGARDING THE ISSUES OF SERVICES NOT BEING PROVIDED TO DISABLED INDIVIDUALS

There was no representative present for this item.

A break was granted at 10:10 A.M.
The meeting reconvened at 10:20 A.M.

REPORT ON UNIFORM REPORT SYSTEM FOR ALL AGENCIES

Dr. Crowe distributed copies of the draft report. The document is the first year results of the CMHS Uniform Reporting System. Through the CMHS Block Grant, in the past the State selected performance indicators, two years ago the requirements were changed to require state comparable data. Dr. Crowe stated that many of the federal programs are now tying data requests into the large discretionary grants and the feds are really interested in data, in the new performance partnership grants. Dr. Crowe stated that an Analyst will provide the Commission with trend analysis for the third year of the data and should be released shortly before Christmas.

ACTION: Dr. Crowe will provide a report by the Analyst to compare Nevada and State data in an easy to read form.

Dr. Crowe briefly reviewed the report. Dr. Crowe stated that this will be an annual report and after this year there will be trend comparisons. Dr. Crowe reported that the implementation of evidence based practices. The Division is moving forward with evidenced based practices. In terms of evidence based practices they are largely for adults and there is one child practice. Evidence based practices are clinical techniques that have been demonstrated to work. Dr. Crowe stated that they will also be reporting on Interagency Outcome Measures. There are data gaps within children and adults over the age of 65.

It was discovered that only the odd pages were copied.

ACTION: This will be placed on the next agenda with correctly copied reports distributed to Commissioners prior to the meeting.

ANNUAL RENEWAL FOR COMMUNITY TRAINING CENTERS AND APPROVAL OF NEW APPLICATIONS

Rosemary Melarkey provided a handout with recommendations for approval of the annual renewal for Community Training Centers.

Ms. Melarkey reviewed the requirements of the Certified Training Centers. These Centers are non-profit organizations. There are other organizations that are providing us with jobs and day-training, but under statute they are required once a year to have the Commission approve the Community Training Centers. Ms. Melarkey stated that at

this time we are only requesting renewal of the current Community Training Centers. Ms. Melarkey reviewed items required in the application packet. Ms. Melarkey stated that she was pleased with the information received in the packets. Ms. Melarkey stated that she continues to conduct on-site review and interviews. Ms. Melarkey clarified that "enclaves" are businesses that work with the Community Training Centers to provide jobs.

ACTION: Ms. Melarkey will provide at the next Commission packet a list of the Community Training Centers/Enclave List and the contact individual. Chair Ward requested that the Enclave List be faxed to all of the Community Training Centers.

MOTION: Dr. Albers moved to approve Ms. Melarkey's recommendations for the renewal of the Community Training Centers, seconded by Dr. Nora. The motion passed unanimously.

COLLABORATION CONTRACT PROJECT REPORTS THAT LINK CHILDREN'S MENTAL HEALTH AND JUVENILE JUSTICE

Les Gruner, DCFS, stated that the Northern Nevada Child and Adolescent Services (NNCAS) and Youth Correctional Services, Nevada Youth Parole Bureau (NYPB) and Caliente Youth Center (CYC) have agreed to work together in partnership to create a continuum of services for youth diagnosed with serious or chronic mental health diagnoses. The purpose of this partnership is to develop transition plans, facilitate placement planning, identify mental health follow-up and medication needs, improve communication among institutions and community providers, and provide re-entry support services for juvenile offenders returning to their community from the Caliente Youth Center. The primary goals of this collaborative effort are to improve transition to the community for youth with mental health needs, reduce recidivism, enhance community safety, increase the number of youth reporting positive life style changes and having their mental health needs adequately addressed.

Dr. Hass stated that his team has identified a statewide uniform screening device for children that are detained in juvenile justice settings. The Massachusetts Youth Screening Inventory will be put into place by the beginning of 2005, with all children who are detained in the state. The Massachusetts Youth Screening Inventory is a 52 item inventory, forced choice, it does not diagnose children but it does look at general areas such as anger and irritability, substance abuse, and self-harm. What is interesting about the Inventory it that it correlates highly with more expensive and involved clinical inventory, such as Millon Inventory and the Child Behavior Checklist.

Dr. Hass stated that the next step would be action planning at the Juvenile Justice Programs Office to open up discussions with county staff and develop statewide implementation steps. There is already a statewide study of the Massachusetts Youth Screening Inventory which would provide data to inform policy development and forecast the intensity of practice change.

Dr. Hass stated that they may need the Commission's support on budget and legislative issues related to this issue.

BLUE RIBBON COMMISSION UPDATE

Dr. Rosin stated that the Facility Advisory Board made a decision not to continue with voluntary admissions.

Dr. Rosin reported that they are still not allowed into Sunrise Hospital. The Mobile Crisis Team saw 60 people waiting for admission to psychiatric facilities.

SECLUSION/RESTRAINT TASK FORCE UPDATE

Les Gruner reported that DCFS has developed a Statewide Task Force to develop a new statewide seclusion/restraint policy for children and adolescents. Mr. Gruner stated that the DCFS Statewide Task Force is collaborating with the southern Nevada staff and also at a national level. Mr. Gruner stated that the next step is to meet with the Attorney General's office and Cindy Pyzel to discuss seclusion/restraint legal questions with regards to children and adolescents.

ACTION: Mr. Gruner hopes to have the DCFS Seclusion/Restraint Policy ready for review and approval by the Commission at the next meeting.

A lunch break was granted at 11:20 Noon.
The meeting reconvened at 1:00 P.M.

APPROVAL OF NEW MEMBERS FOR THE SOUTHERN NEVADA ADVISORY BOARD

Santa Perez recommended that the following individuals be approved by the Commission to sit on the Southern Nevada Advisory Board: 1) Christy Rhodes-Glover; 2) Toni Rhodes-Glover; and 3) Martin Cayer. The applications were included in the Commission packet.

MOTION: Dr. Richitt moved to approve the recommendations of Christy Rhodes-Glover, Toni Rhodes-Glover and Martin Cayer for the Southern Nevada Advisory Board, seconded by Dr. Greiner. The motion passed unanimously.

INFORMATIONAL

Dr. Brandenburg stated that the following items were included in the packet for information:

- In Mental Health a Question of Balance;
- Performance Improvement Brochure; and
- NTAC Networks

Dr. Brandenburg stated that also included in the packet are three brochures around the area of suicide, "…It just might save someone you love…" for the Commission to review for their information. These brochures were developed with the help of Dr. Nora.

ACTION: Dr. Brandenburg stated that Jack Mays called in and indicated that he was ill today and requested to be placed on the next agenda.

PUBLIC COMMENT

There were no comments from the public.

Upon a request from Dr. Albers, the Commission discussed and agreed to move the October meeting date to October 28, 2004.

Dr. Brandenburg encouraged all Commissioners to attend the meeting in Elko that will be held in August. Dr. Brailsford stated that he will be driving to the meeting in Elko.

ACTION: Dr. Brandenburg requested that each Commission contact Mrs. Harper by e-mail or telephone and let her know what location they would be at for the August meeting.

There was a discussion regarding the legislative hospital issue discussion. Dr. Brandenburg stated that this issue was not on this agenda as Bill Welch from the Hospital Association was unavailable for this meeting. Dr. Brandenburg stated that he would contact Bill Welch and inform him that this issue would be on the August agenda for discussion.

There was a discussion to form a subcommittee to discuss this issue with Mr. Welch. Ms. Slabaugh was uncomfortable with forming a subcommittee as it was not listed on the agenda and advised the Commission to not form a subcommittee and either place the formation of the subcommittee on the August agenda or discuss the issue at the August meeting.

Dr. Albers presented Chair Ward with a plaque/clock and an acknowledgement for the amount of work, effort, dedication, and pro-active direction provided to the Commission.

MOTION: Dr. Greiner moved to close the regular meeting at 1:30 P.M., seconded by Dr. Nora. The motion passed unanimously.

Respectfully submitted,

Christina Harper
Recording Secretary