



BRIAN SANDOVAL  
Governor

*Chair: Lesley Dickson, MD*

*Vice-Chair: Ron Lawrence, MFT, LADC*

**Governor's  
Committee on Co-Occurring Disorders  
(SB 2)**

**Minutes**

**Date and Time of Meeting:** *Monday, October 29, 2012 at 2:00pm*

**Attendance:** Richard Baldo, Judge Linda Bell, Judy Bousquet Lesley Dickson, Nancy Domiano-Sader, Stuart Ghertner, Ron Lawrence, Mel Pohl, David Sonner, and Donna Wilburn. MHDS was represented by Deborah McBride and Steve McLaughlin.  
Absent: Elena Brady and An-Pyng Sun.

**Minutes:** The minutes of the August 13, 2012 meeting were approved.

**Update on Membership and Reappointments:** Judge Bell had faxed her paperwork today and Lesley had dropped hers off. Mel, Richard, Donna and Nancy asked for the website for the forms. It is unclear what has happened with Gary Fisher. Deborah will look for a consumer member. Annalyn of the Governor's office said it may be awhile before the appointments come through.

**COD Screening Instruments:** We have not yet reviewed instruments. Steve will send some other instruments for review.

**Update on BDR's (bill drafts):** Not a lot of BDR's out yet. Deborah reported on a BDR that will require pharmacies to use the prescription monitoring program. Lesley mentioned a study done in Canada which was done in real time of prescriptions of benzodiazepines and opiates and showed a significant drop in prescriptions after the program went into effect. Judge Bell reported on the outpatient civil commitment bill that Judge Voy is working on – Lesley is working on it also. Nancy asked for clarification on the intent of the bill. Mel asked about the use of forced medication in these patients.

**Update on the Attorney General's Substance Abuse Working Group:** No recent meeting.

**Report from Co-Occurring Workgroup of MHDS:** Steve McLaughlin reported that there is not much happening right now. They would like to see a more fully integrated MHDS and SAPTA for co-occurring with more treatment initiatives such as for adolescents, pregnant females and the criminal justice population. Much will depend on funding and fully integrating the block grant. Judy asked about problems with training therapists for treating those with COD. Steve said CASAT at UNLV can provide extra training and they are presently redoing requirements for certifying programs and their therapists. Ron added that all sites are required to do extensive clinical supervision of the 4 Master's levels therapists and a lot of training going at the sites.

**Update on Budget:** Not much can be said yet. Deborah said the budgets have been submitted and they are being reviewed in the Governor's office. She said they can be looked at on the website. SAPTA went with flat funding. Recent article in Nevada News Bureau has a link. She wasn't able to say anything about MHDS. They are all concerned about sequestration at the federal level and what that might do – it could be a dramatic reduction in funding. Ron reported on the Affordable Care Act and the Medicaid situation. Once Medicaid certified one still needs consultation as it has very complicated billing systems in place. He wants to strive for some sort of simplicity. He also expressed concern that some grant funds may no longer be available which will affect clients who may not be able to get on Medicaid. Judy asked about the Silver State Exchange which Lesley explained. It is the Nevada agency which will be listing the health insurance policies available for those

individuals and small businesses who become eligible from the Affordable Care Act to buy insurance at a reasonable rate. The exchange will be following the federal guidelines for the minimal requirements for coverage and has identified 10 plans sold in Nevada that do so and now have narrowed it down to three plans.

**Organizing our 2013 Report:** We started by looking at our previous recommendations which Mel said are great recommendations. First, we should continue to support the specialty courts. Judge Bell said they are asking for funding for the prison re-entry program which lost much of its funding in 2008 and although they were able to make do for a while, now they are really lacking funds. Specialty courts get money from federal grants, court budgets and some county funded programs but no new program support such as a veteran's court. There is now a 4-6 month wait in jail for drug court clients to get a bed in an inpatient program such as Salvation Army or WestCare which are cheaper than days in jail. People in mental health court usually go into Solutions (state funded SAPTA and SNAMHS) for housing and there is about a 30 day waiting period. This is funded for 30 housing beds while the co-occurring program (SNAMHS, Community Counseling and Solutions) has space for 50 patients. While the programs are money saving it is hard to compete when there is little money and it is distributed to competing agencies and funding streams. There are always 20 plus patients waiting for beds or spots in the intensive outpatient program. Salvation Army closed some mental health beds which has been a "disaster" for the specialty courts although Unlimited Possibilities has helped. Patients were also placed in group homes. Veteran's court meets every other Monday but does not have a coordinator. VA provides services for those who are honorably discharged which will increase as the new hospital opens. There are many veterans who are not eligible for VA services or do not want to use them.

Dave asked if any of our previous recommendations have been implemented by any agencies. Nancy recalled Harold Cook saying there was improved communication between the prisons and mental health. Ron said that SAPTA has asked agencies to have a co-occurring policy in place which they have done. Lesley added that the Southern Nevada MH Coalition has worked a lot on the coordination between CCDC and the mental health system such as helping inmates being released getting their SSI and Medicaid restarted. Steve added the co-occurring programs are working on standards of treatments, such as assessments, guidelines for treatment, using our welcoming policy, looking at treatment initiatives and more integration. Lesley feels there is more recognition of the need for integration and that SAPTA and MHDS have read our report and are making efforts to move ahead. Deborah added that in the North mental health is working closely with the jail to set up better discharge plans and enough meds. Lesley pointed out that CCDC is run by a private company and not as easy to work with on these problems. Stuart pointed out that a private, for profit company has been hired to run a jail, not do community mental health and therefore we should look to funders of the state and county agencies which should be providing services and medications. Mel mentioned the same problem occurs when patients leave WestCare and also have trouble getting appointments and into the SNAMHS clinics in a timely enough fashion to prevent relapse etc. Judge Bell said that specialty courts work well with CCDC for their patients.

Mel said we need to emphasize recommendation #3 especially with Medicaid expansion coming. Mel also mentioned the problem of some of these newly insured folks getting access to abusable drugs and that we will need well-trained folks. Donna asked about the civil commitment bill – does it mandate outpatient treatment or time in jail. Lesley explained they will be in outpatient treatment. Judge Bell added it will also be helpful for those who are judged incompetent to be tried and then are released but do not stay in treatment. We discussed Medicaid and benefits for the seriously mentally ill which are presently difficult to obtain. Ron added that Alaska is a model which allows for civil commitment for substance abuse if proven to be dangerous. Richard added that California's 5151 would allow for commitment of substance abusers but was never funded.

Richard suggested we should submit revisions of the recommendations if we have ideas. We will do this by email and then meet in January to vote on the report. Lesley will work from the old report and add information gathered since the last report. Ron added that many clients are traumatized by the system and he asks if Metro needs more training. Lesley added that more and more officers are getting CIT training. She also invited everyone in the south to attend the Southern Nevada MH Coalition meetings and she will send out the announcements.

**Agenda and Date of Next Meeting:** Dave will check on availability of space since the Legislature will start meeting soon. We will aim for early January.

**Meeting was adjourned.**

Respectfully submitted,  
Lesley R. Dickson, MD