

MINUTES
of the
Mental Health Planning Advisory Council
meeting on
Tuesday, January 13, 2009
held at
Division of Child and Family Services (DCFS – IMS)
727 Fairview Dr., Suite E
Carson City, NV 89701

1. CALL TO ORDER, ROLL CALL, INTRODUCTIONS

Roger Mowbray addressed the issue of the Chair, Alyce Thomas being absent due to a family emergency. Roger said at this time, the Vice Chair is also not present. The Acting Past Vice Chair, Rene Norris is present, and Roger suggested the Council vote to hold a special meeting once there were enough members for a quorum.

Lydia Snead motioned to have a special meeting chaired by the acting past vice chair, Rene Norris. Patricia Peterman seconded the motion.

UNANIMOUS VOICE VOTE: MOTION CARRIED

Meeting convened at 9:22 am

Introductions served as roll call, and a sign in sheet was passed around.

Members present:

- Bousquet, Judy – Consumer (via video conference in Las Vegas)
- Caloiaro, Dave – MHDS
- Cooley, Judge W. – Consumer, Vice Chair (via video conference in Las Vegas (late arrival))
- Devine, Kyle – Health Division
- Hughes, Kathy – Family Member
- Johnson, Rosetta – Family Member
- Kosuda, Constance – Family Member (via video conference in Las Vegas)
- Norris, Rene – Family Member, Acting Past Vice Chair
- Peterman, Patricia – Family Member
- Polakowski, Ann – DCFS
- Rosenberg, Janell – DOE (am portion)
- Snead, Lydia – Nevada PEP, Family Member
- Wilhelm, Layne - SAPTA

Members absent:

- Castle, Howard – DETR
- Jackson, Barbara – Consumer

- Loftis, Rebecca – DOC
- Parra, Debra - Housing
- Thomas, Alyce –Consumer

Staff and guests:

- Benitez, Tanya – MHPAC
Administrative Assistant
- Brockett, Joseph - CES
- Coubrough-Vigil, Shannon –
MHDS
- Hefner, Marty – MHDS
- Kistler, Ron - CES
- Main, Chrystal – DCFS
- Merrifield, Patricia - DCFS
- Mowbray, Roger – Grant
Consultant
- Roden, Christine – Health
- Sly, William Thomas – CES

2. REVIEW AND APPROVE MINUTES FROM PRIOR MHPAC QUARERLY MEETIN ON 12/10/2008.

Rene asked if there were any changes to minutes. Roger advised the Council of technical difficulties with the new recording system. Inadvertently and unfortunately the minutes from both the December 10th and August 12th meeting were erased from the recorder. Roger expressed apologies and ensured the Council that the audio will be immediately transferred from the audio recorder to a CD to ensure that the audio will not be erased again. Patricia Peterman motioned to approve minutes as written. Layne Wilhelm seconded the motion.

UNANIMOUS VOICE VOTE: MOTION CARRIED

3. LEGISLATIVE OVERVIEW

Rene introduced Patricia Merrifield who is speaking on behalf of the Division of Child and Family Services (DCFS).

- **DIVISION OF CHILD AND FAMILY SERVICES (DCFS)**

Patricia went through the budget cuts and budget requests for the next biennium. Patricia verified that everyone had the two page handouts and power point. Patricia started with the budget request for the next biennium. She gave a brief overview of the three areas DCFS is mainly responsible for: Children’s Mental Health, Juvenile Justice, and Child Welfare. Patricia focused on Children’s Mental Health. The instructions to the State Agencies in developing the 2010/11 budget were to build the budget at 14% less than the existing budget. Child Welfare Services and Juvenile Justice Services were exempt from the cuts at that time. Information Management Services, DCFS Administration, and Children’s Mental Health Program were the areas that were to cut their budget by 14%. Patricia went over the organizational

chart. Children's Mental Health is approximately 15% of the budget dollars. Patricia discussed the budget reductions. The first unit is a cost saving unit, converting a contracted janitorial services to part-time state employees. The second unit in the last legislative session in 2007, one of the enhancements that DCFS received was funding to convert one of the residential treatment units at Desert Willow Treatment Center (DWTC) into a unit that would serve youths with co-occurring disorders, with specialized training, specialized clinicians, dual license has been cut for the next budget. The third unit eliminates what was also an enhancement program which was received at the last session which was an additional half day treatment program for early childhood aged children in the Reno community. This will not be initiated due to the cuts of the current year. The fourth unit is a new program, Mobile Crisis and Stabilization Services that was funded in the last biennium not initiated because of the budget shortfalls that occurred shortly into this biennium. This was set up to be an initial pilot project to do mobile crisis to children and their families and care givers where the child was in the community in crisis in the central area of Las Vegas with emergency room data from UMC and Sunrise that most children presenting to emergency rooms for behavioral health concerns were presenting to Sunrise ER and UMC ER. The hope was that this would be a unit that would lead the way to further mobile crisis and stabilization units for children across the State. However, this is being cut at this time. For the most part, the remainder of the budget request for the next biennium holds up as status quo to what DCFS has today. DCFS was asked to submit an additional 10% and 20% in cuts for a total of 34% in cuts. Janell asked what the ages of the early childhood treatment program that was proposed. Patricia responded three to six years of age. She said that there is an existing half day treatment program for early childhood in Reno. This program is funded by the Victims of Crime Act and all of the children served have behavioral health needs and have been victims of crime. Most of them have been adjudicated with child abuse or neglect. DCFS wanted to expand to children who don't necessarily meet the definition of victims of crime. In Las Vegas, there are three sites. Ann Polakowski manages those sites. Each site has two half day programs morning and afternoon. Rosetta asked if in the rural areas the Department of Mental Health provided the services for children. Patricia verified that yes; DCFS provides some services for children in foster care in the rural areas. DCFS provides family preservation and clinical assessment services. These services are attached with the rural child welfare program. DCFS also provides Wrap Around Nevada, which is a statewide program that does a wrap around model of targeted case management for children with severe emotional disturbances who are in the foster care system. Rosetta asked if Mental Health is providing a program for children in need in rural areas as well as DCFS, are they the same. Patricia said they are different. DCFS provides limited mental health services and it is only for children in foster care. DCFS depends on rural clinics for the full array of therapy, medication management, and psychiatric treatment services. Patricia believes that MHDS and DCFS collaborate well,

but that they do not duplicate services. Dave agreed with Patricia. Rosetta asked what the situation with the children who have co-occurring disorders (COD) and is it a big issue. Patricia agreed. DCFS has used the Child and Adolescent State Infrastructure Grant (SIG), which ends the end of September this year. DCFS did a large needs assessment that highlighted the work force with need for training in order to provide effective and evidence based treatment. They focused this year on providing training to professionals both state employees and private providers across the state in evidence based intervention. There are a couple that address COD one is Trauma focused cognitive behavioral therapy. DCFS trained earlier in the year almost 50 supervisors and then last week DCFS trained approximately 30 staff in Reno and approximately 50 in Las Vegas. Agencies signed commitments that the staff would provide this model of therapy to a minimum of four to six youths and their families complete the course of therapy in the next year. DCFS is funding an alternate week consultation by the trainers in two groups of about eight to twelve professionals. As they are implementing this model they are getting professional consultation. There are over 100 clinicians that have been trained at this point. The other item that DCFS is rolling out in February/March is motivation interviewing which is an evidence based practice in the substance abuse arena. Patricia asked what the age group is. Patricia responded for the trauma focused cognitive behavioral therapy, four and up, for motivational interviewing, eight and up. Rosetta clarified that children are served up to the age of 18. Ann responded from birth to 18.

Patricia went over budget reduction for FY 09. In Children's Mental Health the same programs that were discussed above were not initiated in 2009 was part of the cut. Patricia introduced Chrystal Main to discuss the bills for legislature.

Chrystal said DCFS has requested four bills. Three of the bills are to bring DCFS into compliance with the Federal Government. One is a child care licensing bill. The first bill (Adam Walsh bill) brings DCFS into compliance with the Federal Adam Walsh Act. This requires DCFS and all child welfare to conduct a national finger print, a criminal background check, and to request a statewide child abuse and neglect screening in every state the prospective adoptive parent has lived in the past. The state of Nevada has one child abuse/neglect registry.

AB83 is child abuse prevention. This revises the definition of abuse and neglect. It expands the definition of abuse and neglect. This bill requires DCFS to develop a plan of safe care for an infant exposed to alcohol or drugs and DCFS has to provide a referral to health care professionals after the child is born. Rene question the word legal. Chrystal clarified it should read illegal.

AB89 is not a federal compliance bill. This bill enhances the ability to look at background information and expands the list of crimes that the Bureau must inquire about as part of an investigation of someone who is going to work at or open a child care facility. It also gives the child care surveyors an opportunity for administrative fees.

SB86 provides language to bring DCFS in compliance with Federal Government for children in the Child Welfare System.

There are a number of bills that the Council may be interested in monitoring. AB103 takes the Child Welfare Specialist auditor and moves it to LCB and makes it permanent. This position goes in and audits child welfare governmental agencies.

SB3 – the language in regard to older adults has been deleted from this particular bill.

SB23 is a Health and Human Services bill.

Roger asked if it is possible to get updates that can be distributed during the session so Council members can be aware of when certain bills are going to be heard. Chrystal said that whoever is representing the Council should get on the committee to receive agendas for the bills. She also recommended signing up for personal bill tracking. Roger was looking for something internal that could be shared with the Council, looking for avenues for the Council, so that the Council as concerned citizens can be involved in the issues related to the Council business. Chrystal gave the Council her contact information in case there were any questions.

- **MENTAL HEALTH AND DEVELOPMENTAL SERVICES (MHDS)**

Rene introduced Marty Hefner and Shannon Coubrough-Vigil. Marty gave a brief overview stating that Shannon is the primary liaison and that he is the back up. Marty provided additional handouts.

Marty went over the session calendar. It is anticipated that the session will adjourn on June 1, 2009. They could go further if there is additional work that needs to be done. Marty went over the special dates. Roger questioned when the budget subcommittees would be meeting. Marty will double check the dates. Marty gave an overview of the Legislative process. Janell asked if the bill could be changed between coming out of the floor into the second reading. Marty said that amendments can be suggested at any point during the committee process. If the amendments are accepted, they reprint the bill with the amendments and then it is heard again, voted on, and then it goes against the floor together with its amendments. The process starts all over again once

it gets to the second house (Senate or Assembly). Patricia said that the Senate or Assembly can send the bill back to the house. Marty agreed.

Marty went over the Senate leadership. Marty said with the elections there has been a change in the leadership and the Democrats have the majority. The Democrats have increased their membership on the Assembly side as well.

Marty went over the bills that the Council may be interested in. Marty said he only highlighted the health and human services bills. There may be others on the page that may interest the Council.

Marty went over the document on how to testify in front of a committee. Marty introduced Shannon.

Shannon said she is the primary and Marty is the secondary; however, Marty is also working with the fiscal aspect. Shannon went over the Legislative team: Shannon, Marty, Dee McLellan (Deputy Administrator), and Jeff Mohlenkamp (Chief ASO MHDS). As of February 5th, there were about 953 Bill Draft Requests (BDR) that had been submitted. About 220 of them are pre-filed bills. MHDS is currently tracking/monitoring on 50 of those. Rosetta asked what role the Council has in testifying. Roger responded there needs to be an awareness of the limitations. Advocating is a very important part. Identify other groups that may share the same interest. Roger suggested keeping members apprised of the bills that are going before the Legislature. The Council can establish a Legislative Subcommittee or relationships with other organizations as a starting point. Dave agreed that the both sides need to come together for the common good and then look at what bills the committee can advocate for. Dave reiterated the caution that needs to be used. Rene said that unless you are invited, you are considered to be lobbying. You must introduce yourself as a consumer, family member, etc. Patricia said the Council must be in agreement and stand as one voice.

Shannon continued with the tracking process of the new BDR's. Historically, 60% of the bills have been presented and submitted within a 12 day time frame in March because of the view dates. Janell suggested the Council possibly narrow it down to approximately three things. Dave asked if there are certain bills that may be of interest to the Council that could be forwarded to Roger and Dave to forward to the Council. Marty discussed BDR 338 & 339. AB 61 and SB 78 were pre-filed.

SB 78: Withdrew due to language in regard to payment. It is currently being evaluated in hopes that it will be resolved before the session starts.

AB 61: Authorizes MHDS to notify victims of crimes upon the release of an acquitted or incompetent person from the Forensic Facility or if they escape, etc.

There are approximately 29 other bills that are of interest to the Division. Rosetta asked if any of the bills require changes in the Division in the way the work is done. Marty said that a number of them revise or make changes for the way current business is done. Nothing semantic that he is aware of, however there may be some contained in the budget, in the way the Division is going to be funded over the next biennium. That will be contained in the budget that was submitted and that will be testified on. Rosetta asked if there was a copy of the budget. Marty said that the Executive Budget will be released on Friday to the public.

Marty gave an overview of the SAGE Commission. The Commission was created in May 2008. They have been charged to find ways that the state can improve the efficiencies of its operations and provide better services. They have submitted two 90 day reports with their recommendations to the Governor. The first report was submitted in September and the most recent report was submitted at the end of December 2008.

Marty went over the reports. The first report had a number of items that were directed toward MHDS. Recommendation 1): Centralize the billing for third party paid services for the Division and explore data processing improvements and possibly contracted billing services; 2) look at staffing ratios in state operated Psychiatric facilities and they need to be evaluated against a comparable private sector; and 6) identify and coordinate the activities of all the departments agencies and institutes of the executive departmental that administers programs for the treatment of drug and alcohol abuse.

The second 90 day report was more general in the impact to the Division. Recommendation 18): All state agencies should review the fees charged for services to make sure that the costs are covered and they should be reviewed every two years.

The Governor is currently evaluating the recommendations now. At this time, none of the recommendations have been sponsored as a BDR or as a piece of potential legislation. There will be discussion as the budgets are presented and they could potentially be introduced by a Legislator, the Governor, or somebody as a bill.

Marty asked for questions. None were asked.

4. TRANSFORMATION TRANSFER GRANT

Roger requested that this be put on the agenda as a standing item. MHDS submitted a grant request for funding of the Transformation Transfer Initiative. MHDS became aware of the opportunity in October and was given a deadline of less than two weeks for submission. Only 11 states received funding. The nature

of the grant is that it is short term. The money needs to be spent and reported on in less than one year. The grant is for specific one time type expenditures and not to fund ongoing activities. Nevada did not get approved for the grant this time. Roger asked the Council what sort of initiatives related to transformation should be pursued by the Council for the next time this is submitted which would be next November. The more time to draft a request for funding, the better the finished product. Roger went over the list of last years items that were funded. Rosetta asked if there was a toolkit. Roger said that last year the application was to be no more than three pages. They want the application to be brief and very concise.

Rene mentioned that during the rural monitoring visit, there was discussion of assisting the rural clinics. Roger said during the visit to Pahrump, they identified some lost resources or didn't have resources for serving children including some technical issues. Rosetta asked what programs the Council thinks should be revived. Rene said during the rural monitoring visits, the Council could possibly support an aspect of the clinic if there was money to help. Roger said the same states do not necessarily get the grant every year.

5. MAINTAINING CHILD/ADOLESCENT MENTAL HEALTH IN THE FACE OF SOCIETAL/GLOBAL STRESSORS

Constance Kosuda introduced Thomas Sly, Founding Director, Joseph Brockett, Artistic Director, and Ronn Kistler, Managing Director for Creative Educational Systems. They have been doing this for 37 years.

Thomas introduced himself to the group. He said they are in the arts. Thomas enrolled in the Casper College in 1967, in Casper, Wyoming, a liberal arts college. He wanted to study law and the only class at the time of his enrollment was theater. He met Dr. May Flag, who was a graduate of the Royal Academy of Dramatic Arts. He eventually went to New York, where he became acquainted with the Performing Arts Foundation of Long Island. He became involved in the initial arts in education movement. They would go to the schools and perform a play; they would then break up and go into the classroom to work with the teacher and children. The children responded to the intellectual material they were being given. They discovered that if the arts could be incorporated in the educational process, the children would learn more, faster, and they would retain what they learned. In 1976, Ron, Thomas, and Joseph founded Creative Educational Systems (CES). He went over the Change of Heart handout. Thomas said this is not a program but an idea/concept. Thomas said there are two books coming out in February, "Teaching curriculum through the arts" and a workbook for children called "Play with purpose." They present the Art of Psychology. Thomas told a success story from Pilgrim State Hospital. Pilgrim State Hospital at one time was the largest hospital in the world with 4000 beds, located at the end of Long Island. They were invited to the hospital to work with a group of women. He described a woman who would come to the sessions, sit in a chair and tap her right foot, and her hands would move. One day, they gave her a piano. The woman had been a

concert pianist. It was at that moment that Thomas realized what Change of Heart was all about. Change of Heart was put into practice after Columbine. Thomas said the society we live in is not easy and we can see how people get to the point of Columbine. The question posed is how to keep people from doing Columbine. Change of Heart is an artistic alternative to violence. Thomas said they have found that children not only learn, but they learn faster and they seem to retain the information because they have actual physical and emotional participation in the learning experience.

Thomas introduced Ron Kistler, Managing Director. Ron directed the Council in a group exercise. The group then discussed the results. Ron introduced Joseph Brockett, Artistic Director. Joseph gave a word poem based on the group exercise using the words from the exercise. Joseph brought reference to the Change of Heart handout and explained this is not a specific program but a concept. It will work in healing. He invited everyone to look into their website. Thomas thanked the Council for allowing them to share their information with them.

The Council thanked Ron, Thomas, and Joseph for coming to make the presentation to the Council.

6. BYLAWS

Dave went over the proposed changes in the Bylaws.

The first recommendation on page one, section II, Purpose Mission: Rephrasing the sentence to say “The Mental Health Planning and Advisory Council will serve as an advocate for individuals with chronic mental illness, children and youths with severe emotional disturbance, and other individuals with mental illness and emotional problems.”

The second recommendation on page four, article V, meetings: Added section III. “Requesting tapes or transcripts at meetings: NRS 239.052 allows a governmental entity to charge a fee for providing copies of a public record upon request. Public Record includes any MHPAC meeting or subcommittee meetings, in the form of tape recordings, dictations, transcriptions and/or hard copy minutes before they are formally distributed at a future meeting. The fee MHDS will charge for a request of public records, including minutes being recorded on a CD, mailing and postage of the CD, and professional staff time required to process the request, will be \$25.00 per request.”

Lydia motioned to approve the changes as written. Patricia seconded motion.

UNANIMOUS VOICE VOTE: MOTION CARRIED

7. LUNCH

Meeting adjourned for lunch at 12:06 pm.

Meeting reconvened at 1:35 pm

8. SUBCOMMITTEE UPDATES

- **CHILD TRANSITION**

Kathy said the subcommittee has not met since the last time the Council met on December 10, 2008. There will be a meeting on January 23, 2009.

- **NOMINATING COMMITTEE**

Rene said the subcommittee has not met since the last meeting of the Council; however there are applications from the rural areas. There are a couple of applications from Pahrump. There was one in particular that they actually met during the Rural Monitoring Visit, who is advocating in the area and helping peers getting the services they need. The subcommittee will be meeting on January 23, 2009. Rene said Dr. Jon Kirwan is no longer on the Nominating Committee and she asked for a volunteer. Dave said he has approached Colleen as to a replacement for Dr. Kirwan. Rosetta Johnson volunteered to join the Nominating Committee.

- **SB2 COMMITTEE ON CO-OCCURRING DISORDERS**

Rosetta said they had a very productive year. They were able to accomplish two very important items. 1) A statewide training on TIP42 (Treatment Improvement Protocol). There was a large turnout for the training. There are 14 members on the committee. She has had a problem getting a consumer on the committee. Judy said she has sent an application into the Governor and is very interested in being on the committee. 2) One member of the committee did a pilot project. She got a list from SAPTA and went to particular sites to have them respond to a set of questions. She came up with recommendations from what she found.

Rosetta read a portion of an introduction of a report. "Nevadans with Mental Health and Substance Abuse Disorders may benefit from services provided by a broad array of Federal, State, and locally based organizations and hopefully attain cognitive sustainable improvement. However there is inefficiency when these services are provided in multiple settings where there is little communication between them, thus resulting in duplicative or fragmented services. Historically complex factors and restraints have prevented program changes to improve the situation by our committee. We believe the criminal justice system and behavioral health systems are ready for change."

Rosetta said they formed three subcommittees and met via teleconference once a month. She said the current issues they found between the state level and community agencies receiving funding is not coordinated and standardized. The practices are not uniform and the use of evidence based practices is not in use except for the PACT team. Overall health is not integrated. She said the physical health as well as the mental health of a person needs to be known. Some of the recommendations are to create bills which call for establishment of the jail diversion model; directs Medicaid to establish a more effective use of funds or services to the dually diagnosed individuals; systems integration between mental health, substance abuse, and the criminal justice system which means sharing information, planning, clients, resources, and shared responsibility. Rosetta said she was denied information and she finds that very disturbing.

Patricia asked if everyone works together how it will affect working with HIPAA. Rosetta was not sure. Rene said a consent form can be signed to allow the different agencies to exchange information. Dave asked when the next meeting would be. Rosetta said they just had their meeting.

- **RURAL MONITORING**

Roger said the Rural Monitoring is one of the items described in the Block Grant. The visit took place last week in Pahrump, Nevada. Ann Polakowski, Dave Caloiaro, Rene Norris, and Roger Mowbray toured the office and had separate meetings with the staff and consumers. They had focus groups to meet with consumers, family members, and children. No one showed up for the children and family members of children. Part of the issue may have been the school. Dave said the adult group spoke very highly of the group therapy. Many of the consumers continue to meet as their own support group. They spoke very highly of the clinic in general. Roger said they built very good relationships which was evident in their interactions. Roger said there will be more detail in the report. Roger said they met with providers the second day.

Roger said the subcommittee discussed the possibility of having one in September and maybe visiting two clinics in Northern Nevada.

Rosetta asked how many clinics are left. Dave made comment that the majority of the clinics that will be closing are the satellite clinics. The clinics that are only open a couple of days a week. The main clinics are the ones that will stay open. Rosetta asked if there was a possibility of having a small clinic in the hospitals. Dave said he is sure they explored all the options, but he was not a part of that.

Dave said he believes everyone participating in the visit came away with how dedicated they are. They are doing a tremendous job with limited resources and limited staff.

- **OLDER ADULTS**

Alyce is out and not able to report.

9. MENTAL HEALTH AWARENESS MONTH

Rene said Mental Health Awareness Month is May 2009. She said last year the Council purchased some buttons that were handed out. Rene asked for suggestions or ideas on what the Council can do for mental health awareness month. Kathy suggested that ideas be brought to the next meeting. Ideas are to be emailed to Roger and Tanya before the next meeting. Rene asked if there was money in the budget. Roger said he would check the budget.

10.SET MEETING DATES FOR 2009

Roger suggested the next meeting be in April prior to the end of the Legislative Session, then suggested August to review the Block Grant Application.

April 2, 2009 in Carson City/Reno 9 am to 4 pm

August 12, 2009 in Las Vegas 9 am to 4 pm

November 6, 2009 in Las Vegas 9 am to 4 pm

11.PUBLIC COMMENT

Rene asked for public comment. Roger updated Constance Kosuda's email ckosuda@yahoo.com. Roger said at the last meeting, there was a brief discussion on the Council's website and that he is happy to report that thanks to Tanya's hard work the website has been updated to even include the agenda for today's meeting. Rene asked for other public comment.

12.ADJOURNMENT

Kathy motioned to adjourn. Lydia seconded the motion.

UNANIMOUS VOICE VOTE: MOTION CARRIED

Meeting adjourned at 2:24 pm