

SENATE FINANCE COMMITTEE
MINUTES OF MEETING
FEBRUARY 22, 1977

The meeting was called to order at 3:30 P.M.

Senator Floyd R. Lamb was in the chair.

PRESENT: Senator Floyd R. Lamb, Chairman
Senator James I. Gibson, Vice-Chairman
Senator Eugene V. Echols
Senator Norman D. Glaser
Senator Norman Ty Hilbrecht
Senator Thomas R. C. Wilson
Senator C. Clifton Young

OTHERS: Ronald W. Sparks, Chief Deputy, Fiscal Analysis
Howard Barrett, Budget Director
Cy Ryan, UPI
Dr. Charles Dickson, Administrator, Mental Hygiene & Retardation
Roger Trounday, Director, Human Resources
Jack Middleton, Director, Sierra Developmental
Roger Glover, Director Rural Clinics
Dr. Robert Hiller, Director, Lake's Crossing
Joe Burnett, Director, C.B.S. Clark County
Dr. Gwenyth O'Bryan, Mental Health

MENTAL RETARDATION: This budget reflects the reorganization of direct mental retardation services on a regional basis. In Northern Nevada, the staff and operational control of the Northern Mental Retardation Center will be combined with the former mental retardation ward of the Nevada Mental Health Institute to form one central Northern Nevada organizational unit titled the Sierra Development Center. In Las Vegas, the staff and control of the Southern Nevada Mental Retardation Center will be combined with the Desert Developmental Center to form one central organizational unit for Southern Nevada Mental Retardation services.

The remaining staff in this budget will provide overall planning, supervision, and training for the two regional mental retardation units, plan support to the Mental Retardation Foster Home Program, the Community Training Centers located throughout Nevada, the Community Awareness Program, the Retired Senior Volunteer Program and the Foster Grandparent Program.

Dr. Dickson explained the staffing in detail under the reorganization, also the training programs that are conducted statewide.

Mr. Trounday stated that all the psychiatrist's positions were inherited before they started to change the thrust of the program. The central administration of both mental hygiene and mental retardation, while they are located in Reno, is comparable to the Welfare Central administration that is located in Carson City. They do not deliver any direct services they carry out the administrative tasks.

SIERRA DEVELOPMENTAL CENTER: This budget recommends a consolidation of mental retardation services in Northern Nevada. The mental retardation ward at the Institute and the mental retardation center will be combined to form a unified delivery system for mental retardation services.

The program is changing its focus from lifetime placement to one of shorter term transitional programming designed to provide training rather than longterm custodial care. This budget and staff requests have been prepared to meet all Joint Commission for the Accreditation of Hospitals standards. However, the physical plant may not be accreditable until the completion of the C.I.P.

The current client population of the mental retardation ward at the Institute is 100. When the Desert Developmental Center opens in April, 1977, it is estimated that 35 of these clients will be moved to the new southern Nevada facility. The staffing detailed in this budget will provide services to the remaining 65 clients plus the clients housed in the 30-bed Northern Nevada Mental Retardation Center.

Dr. Dickson explained the services that were offered in the rural communities and the supervision the division maintains over homes in which placements are made in the rural areas. He said the costs of taking people from the Institute and placing them in homes in the rural areas is \$310 a month plus the indirect costs of staff going out plus the other services. He said there were other resources available to the client when they are placed in the community that are not available to them in state facilities. It is not necessarily cheaper to return them to their home communities, but the patients get a better quality of life this way. The institutional costs were approaching \$15,000 a year as compared to the cost in a foster home of \$4,000; but then there are other costs involved with the foster home.

RESIDENTIAL PLACEMENT: This account provides the main financial resource for the operation of the Division of Mental Hygiene and Mental Retardation's placement of mentally retarded children in a community living program. This account pays for all non-institutional placements of individuals outside of their natural family home. Each foster home receives an average monthly payment of \$310 per child. It is recommended that the average payments be increased to \$327 in 1977-78 and to \$345 in 1978-79. This budget also anticipates growth in the number of clients served from 55 to an average 86 clients in 1977-78 and an average of 106 in 1978-79.

He explained the relationship of this program to other budgets, and the details of placement and training.

Dr. Dickson said the training for the foster home parents would be done by psychologists or social workers. He asked Jack Middleton to give more details.

Mr. Middleton said they had staff both in Las Vegas and Reno that deal with the community living programs. A great deal of time is spent with the foster parents to help them with the problems they have with that child. He said it was an area where they do not have enough training going. He said many of the people have had experience in mental retardation before. Some are former employees; all the homes are licensed by state welfare.

COMMUNITY AWARENESS PROJECT: This is a federally funded program administered by the Mental Retardation Division. The program is conducted both in Reno and Las Vegas and provides instruction and preparation on community training, pre-vocation, social adaptation, skills in the classroom and field trips into the community to enhance the students' return to the mainstream of society, functioning as normally as possible. The program serves retarded persons between the ages of three and twenty-one.

FOSTER GRANDPARENTS PROGRAM: The division is the grantee agency for the Northern Nevada Foster Grandparent Program.

The program offers the services of retired men and women, age 60 and over to work with retarded youngsters twenty hours per week. They provide companionship, warmth and love to their foster grandchildren, as well as basic training in various independent living skills. Grandparents are assigned to work in specific programs and are currently serving in the Nevada Mental Health Institute - Mental Retardation Units, the Northern Nevada Mental Retardation Center, several community training centers located in Carson City, Elko, Hawthorne and Reno, and other public and private facilities for children, such as the Special Children's Clinic and the Head Start Programs in Sparks and Stead. Dr. Dickson answered questions about the program and the financing. The program provides the matching funds for the federal action grant and is used to support the resource specialist and eight one-half time foster grandmothers and parents.

RETIRED SENIOR VOLUNTEER PROGRAM: This program is federally funded and administered through the Division of Mental Hygiene and Mental Retardation and provides recruitment, screening, orientation, placement and support of seniors, sixty years old and over, in a variety of roles in community non-profit public and private agencies where their skills and time are needed as volunteers. Insurance and recognition are provided, as well as transportation and meal cost reimbursement up to a maximum of \$1.25 per day of service when requested. Informational and social events are regularly offered through the Retired Senior Volunteer Program or in conjunction with other programs, and senior advocacy is an active role of the staff.

The primary source of funding is ACTION, a federal agency charged with unification of all federal volunteer programs nationwide including over 602 Retired Senior Volunteer Programs. The local sponsor is the State of Nevada, Division of Mental Hygiene and Mental Retardation. The cost sharing schedule is on a 10% decreasing basis for the first three years.

Senator Young asked how much assistance the native Nevadan on the reservation or in Indian Colonies was getting from the programs.

Dr. Dickson said it was very limited. He asked Mr. Glover, Director of Rural Clinics Program in Las Vegas to comment on the mental health service they gave.

Mr. Glover said the rural programs covered the 15 rural counties which takes care of most of the Indian population. The Indians represent 1% of the caseload. He said they had made numerous attempts to develop contracts for service with both the VIA and the public health service and other funding sources. He explained the problems involved in reaching those who needed help.

Dr. Dickson said he did not have exact figures but he felt they were not as successful as they should be in this area.

Senator Young asked if they could develop information as he would be interested in seeing it. He said if they needed services they should get them, but he also felt the federal government should be able to come up with some money to pay for the services being furnished.

NORTHERN NEVADA MENTAL HEALTH SERVICES: This division proposes to reorganize its mental health services to maximize the efficiency of program delivery and management functions. To accomplish this goal, the division proposes the formation of two regional units, one for Washoe County and one for Clark County. The various mental health programs in these areas would operate within these new administrative structures. This would reduce the present span of control for top level managements, and allow for a more integrated approach to program management, evaluation and development. The regional administrative units are designed to operate in a strongly decentralized manner in relationship to the Division central administrative offices.

The reorganization of the mental health services will be accomplished without additional state funds. Personnel will be reassigned to administer the region from existing programs. By combining the budgets under one administrator, personnel, facilities and resources will be more effectively utilized.

Dr. Dickson illustrated the breakdown of services, the areas where they operate, and the administrative levels, on a chart and answered questions from the Committee on this concept.

FACILITY FOR MENTAL OFFENDER: Lake's Crossing center is the state's program for the mentally disordered offender. This agency provides statewide service to individuals who have had contact with the Criminal Justice System and have been evaluated as requiring mental health treatment in a maximum security setting.

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The provision of such service requires a well-coordinated effort as responsibilities for treatment, evaluation and consultation delegated to this agency must meet a wide range of needs for a relatively diversified population. One major area of responsibility is the provision of services to the Nevada State Prison. Residential treatment is provided to inmates in need of 24-hour a day service and treatment. In addition, Lake's Crossing staff provides consultation and treatment within the Prison on a regular and ongoing basis.

Residential treatment is also provided to individuals who are judged not competent to stand trial due to emotional difficulties. Treatment for such individuals requires a highly intensive and well-structured program. Additionally, the treatment of individuals committed in this fashion requires that professional consultation and evaluation be made available on a statewide basis to judges, attorneys, and probation and parole officers.

A third category of treatment responsibility included the provision of services to individuals judged not guilty by reason of insanity, or who have had charges dismissed because of the presence of an obvious and severe mental disorder. Residential care at this facility is usually required in these cases as both the nature of their offense and current behavior require a secure setting for the protection of the community.

Since treatment at Lake's Crossing is oriented in the direction of the development of socially appropriate and community-oriented skills, the facility staff spends a considerable amount of time dealing with the community from which the client comes in the development of resources which help support non-deviant behavior. Disposition decision must be made on a case-by-case basis which frequently require community follow-up, placement in other facilities, or continued outpatient care carried out by Lake's Crossing staff.

Dr. Dickson introduced Dr. Robert Hiller to comment on the program. This is a model program and several states are presently looking at it at the present time. Dr. Hiller answered questions from the Committee on the programs carried out to help people who were still in the prison and those who have already come to trial and those who have not yet been to trial because of incompetence.

CBS EDUCATIONAL PROGRAM: This budget reflects the total salary reimbursement to the Clark County School District for the support of three teachers and three teacher aids located at the Children's Behavioral Services program in Las Vegas. The positions will staff the two existing elementary classrooms and allow for the addition of a classroom program for autistic children. Dr. Dickson said that they are asking for authority to receive these funds from the school district.

CLARK CO COMMUNITY GROUP HOMES: This title XX program was initiated to expand the residential treatment service capacity of the three mental health agencies in Clark County. Prior to initiation of the Community Group Home programs, the maximum capacity for residential youth services in Clark County was 27; Las Vegas Mental Health Center had 15 adolescent and Children's Behavioral Services had 12 children. Through a joint effort Children's Behavioral Services, Las Vegas Mental Health Center and Henderson Mental Health Center have contracted with the Nevada State Division of Welfare to provide a community group residential program for sixteen youths. The clinical evaluation, professional supervision and general coordination of the program are provided by a central staff composed of one psychologist V, two psychiatric social workers and one senior clerk typist. The staff functions under the general program direction of the above mentioned mental health agencies and with the administrative support of Children's Behavioral Services.

The development of this program has assisted in alleviating problems associated with limited residential capacity in the existing Mental Health Center and has allowed for longer term residential treatment. This expansion of service in terms of both numbers of beds and available duration of residential treatment helps to reduce the need for sending youths in community group treatment homes, rather than in state institutional settings, the treatment alternatives available to mental health practitioners were expanded. These homes allow for better transition from institutional settings into community environments and also provide options for youth who need supervised treatment settings that are less intense than the residential programs available in the mental health facilities.

The state match required for this program is divided equally among the three sponsoring mental health agencies. Each of the agencies has designated their amount of match under a unique category. Mr. Burnett answered questions from the Committee relative to this program.

SOUTHERN NEVADA MENTAL HEALTH SERVICES: This is part of the proposal to reorganize the mental health services to maximize the efficiency of program delivery and management functions. This is essentially the same as the Northern Nevada Mental Health Services.

RURAL CLINICS: This program is responsible for providing mental health services to the fifteen rural counties of Nevada. In order to do so, the Rural Clinics administration is in the process of developing community mental health centers in seven communities in rural Nevada. These centers are staffed by professional, paraprofessional and secretarial staff who live and work in the community served. These staff members also travel extensively to the surrounding areas in their attempts to make a full range of mental health services available to rural Nevadans. Program direction, supervision, and medical backup are provided by staff from Reno. Offices are maintained in Yerington, Carson City, Elko, Ely, Fallon, Hawthorne and Winnemucca.

C.I.P.: 77-4: Dr. O'Bryan spoke on the Sierra Developmental Center, Reno. A complex of five buildings containing a total of approximately 24,200 gross square feet to care for mentally retarded children and adults. Four of the buildings will be identical to those in the Desert Developmental Center in Las Vegas. The Center will accommodate 48 inpatients and will be located partly on the Mental Health Institute grounds in Sparks and partly on land acquired for the Emotionally disturbed Children's Facility just north of the University of Nevada Reno. This will cost a total of \$1,649,000.

C.I.P. 77-14: Miscellaneous Improvements, Mental Health Institute, Sparks This will provide larger electrical services to eight existing buildings three emergency power generators for six buildings, a new paging system for the entire Institute, replacement of obsolete equipment in the central heat plant, repainting in five buildings, air conditioning in two small buildings, a genetics laboratory in Building No. 3, a new roof on building No. 7, replacement of plumbing fixtures, doors and electrical systems in Building No. 6 and other miscellaneous building improvements, including the demolition of the old farm buildings and an old garage and warehouse building.

Dr. O'Bryan gave the committee a booklet that was presented to the Public Works Board when requesting their C.I.P. for this legislative session. She detailed some of the work that had been done in the first phase and what was next scheduled.

Dr. Dickson said that within the area of C.I.P.'s, they had recommended children's program for rural Nevada and it comes out as priority No. 48. The Governor advised that funding was only available through the first 44 priorities. However, the Governor told them if anything was not funded or there were additional monies he would look favorably on a small children's program for Elko.

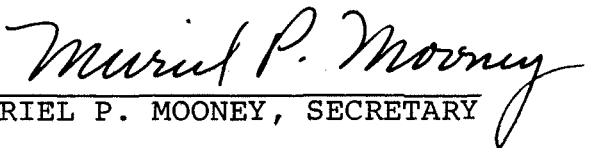
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Dr. O'Bryan said that a survey was done in 1973 to determine what services were needed throughout the State of Nevada for children. Various programs were discussed at that time. The Legislature funded the children's program for Clark County and Washoe County, as far as construction. The third phase of that program was the facility in Elko. This will provide statewide services for children. She described the needs in rural Nevada. The cost of the unit in Elko would have been \$529,000 and would have had the full complement of services for children including residential placement for four. The program which she had given them included programs in rural areas in Elko, Ely and Yerington.

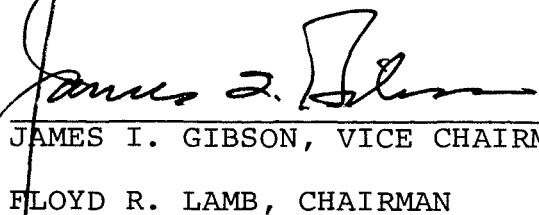
These programs which were not on the recommended list were discussed.

The meeting adjourned at 5:20 P.M.

RESPECTFULLY SUBMITTED:


MURIEL P. MOONEY, SECRETARY

APPROVED:


JAMES I. GIBSON, VICE CHAIRMAN FOR
FLOYD R. LAMB, CHAIRMAN

2/22/77

3:30 PM

Name (Please Print)	Organization	Address	Phone
Joe Ottoma	Nev. Adult Care Assn	1530 Pass De	323-4696
J.I. LAIRD MD	Welfare Div - XIX		
Doris Handley	" "	Carson City	885-4771
Carolyn Taggart	Welfare Div.	Carson City	885-4725
MINOR KELSO	" "	" "	885-4775
J. Fackling	" "	" "	885-4771
W. Johnson	" "	" "	4771
J. Deante	" "	" "	"
J. Mills	" "	" "	"
Kimberly Wood	Budget	Carson	885-4062
Charles L. [unclear]	Dept. of H-R	Carson City	4730
GARY KAUSE		LAS VEGAS	870-399
W. M. Gibson		Reno	747-323
Marjorie Long	Clark County Child Care Assn.	Las Vegas	878-3611
Jan Speck	North Nevada Child Care Assn.	Reno	323-4431
Frank Holzhauser	Dept of H.R.	Carson City	885-4730
Thylis Higgins	Health Planning & Resources	Carson City	885-4720
Adete Rottazzi	Ely City Council	ELY, NV	289-4471