

MINUTES OF THE
MEETING OF THE SENATE COMMITTEE
ON FINANCE

SIXTY-FIRST SESSION
NEVADA STATE LEGISLATURE
February 9, 1981

The Senate Committee on Finance was called to order by Vice Chairman James I. Gibson, at 8:00 a.m., Monday, February 9, 1981, in Room 231 of the Legislative Building, Carson City, Nevada. Exhibit A is the Meeting Agenda. Exhibit B is the Attendance Roster.

COMMITTEE MEMBERS PRESENT:

Senator James I. Gibson, Vice Chairman
Senator Eugene V. Echols
Senator Norman D. Glaser
Senator Lawrence E. Jacobsen
Senator Thomas R.C. Wilson

COMMITTEE MEMBERS ABSENT:

Senator Floyd R. Lamb, Chairman
Senator Clifford E. McCorkle

STAFF MEMBERS PRESENT:

Ronald W. Sparks, Chief Fiscal Analyst
Dan Miles, Deputy Fiscal Analyst
Candace Chaney, Secretary

OTHERS PRESENT:

Howard Barrett, Budget Division
John Neill, Budget Division
Bob Guernsey, Mental Hygiene and Mental Retardation
Harry Clemons, " " " " "
Ken Sharigian, " " " " "

Mr. Howard Barrett of the Budget Division announced that his office had received the new gaming figures over the previous weekend. On page A-8 the figure amounting to \$30,717,000 was to be inserted under "Quarterly State License Fee", an increase of 13.2%. On page A-9, under "Casino Entertainment Tax", the figure of \$4,275,096 was to be inserted. Mr. Barrett said he would have a sales tax figure for the committee by either Friday, or next Monday.

DIVISION OF MENTAL HYGIENE AND MENTAL RETARDATION

Dr. Ralph DiSibio, Director of the Department of Human Resources, gave a brief opening statement concerning the Division of Mental Hygiene and Mental Retardation (MHMR). The Director said that the division was the department's most labor and service intensive division. The division contains the largest number of employees in the department and delivers the most comprehensive services. He noted that all bureaus in the MHMR division had undergone a dramatic reorganization a biennium ago which, to date, has been very effective. He also stated that new leadership within the division had taken hold and that all savings derived from the reorganization was real.

Dr. DiSibio introduced Dr. Jerome Griepentrog, Administrator of the MHMR Division, to the committee. Dr. Griepentrog addressed the members concerning the needs of his division and the proposed solutions and recommendations within their budget to deal with these increasing needs.

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Dr. Griepentrog said his division served 15,000 individuals in the mental health system. At the present time, they were accelerating their services at an annualized rate of 2,000 clients. He noted there was a dramatic influx of people coming into the system. He indicated there was an 18% increase in their in-patient demand, and, the in-patient programs were operating at better than 100% occupancy. Dr. Griepentrog commented that there were 407 persons currently on the waiting list for mental health services, mostly in the out-patient area.

The Administration said a major problem at the division was the "recycled patient". He defined this individual as one who comes into the mental health system for treatment, is treated, their illness goes into remission, they are returned to the community, and then return to the mental health facility due to inadequate follow-up procedures. He noted that 42% of their clientele fell into the "recycled patient" category. Dr. Griepentrog said the division budget attempted to address this problem.

Another problem the Administrator mentioned was the distribution of resources of the division which are insufficient in Eastern Clark County. He noted that 30% of the State's population resided in that area, yet, only 3% of current mental health resources were going into that area.

Dr. Griepentrog addressed a few of the approaches the division was taking in terms of recommendations dealing with the aforementioned needs and problems:

1. Deletion of twenty-four positions to help make some of the monies available to areas that are currently lacking services.
2. Attempting to maximize more of the existing resources of the private sector in dealing with mental health problems in Nevada. The division would like to develop common points of entry in partnership with the private sector in Clark and Washoe Counties so people with resources can be screened out and referred to the private sector when possible.
3. The moving of part of the staff from Western Clark County to the eastern portion of the county to make services more accessible. This would be in addition to new positions requested for the facilities in Eastern Clark County.
4. Attempting to meet new demands by putting monies into alternatives to institutions for greater cost-effectiveness. The development of less structured and intensive, but still appropriate treatment for the mentally ill and retarded within the community.

Dr. Griepentrog said the alternative programs would cost from \$35 to \$50 per day as compared to the \$175 per day cost of hospitalization. He noted that the mental retardation in-patient costs would be about \$100 per day next year. He stated they could offer alternatives for this program within the community for \$35-40 per day.

The Administrator indicated that their budget would be 4.7 million dollars less than if they had asked the committee to build new institutions. He noted also that the proposed approaches would offer a substantial solution to the recycled patient problem.

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Dr. Griepentrog said there was a trend toward shifting the State's responsibilities for services away from direction provision, to one of insuring services. He stated that they would be recognizing the capability of the private service provider to develop many of the new services he had mentioned.

The Vice Chairman asked Dr. Griepentrog as to what he meant by a "transitional facility". The Administrator commented that this program contained several levels. He noted that the first level would be immediately below hospitalization and consisted of 24-hour structured living program but a less intensive level. There would be professionals providing services on a consultation and an out-patient basis. A level below that, he said, would consist of a structured and supervised living program with the individual being looked after by another person. He noted that the final level consisted of the moving of people into independent or semi-independent living while monitoring them closely in terms of out-patient and medication follow-ups.

Senator Echols inquired if 42% of their clientele were being recycled, were 48% being rehabilitated. Dr. Griepentrog said yes, these individuals seemed to fit back into community living.

Senator Echols then asked the cause of the deficiency in the lack of services in Eastern Clark County. The Administrator remarked that it was due to a traditional reliance on the programs in the North, and, the location of the Las Vegas Mental Health Center.

Senator Wilson queried Dr. Griepentrog on the differences between Title XIX and Title XX funding sources. The Administrator stated that Title XX funds were to be used to provide social services for non-hospital, non-medical, and non-institutional services. Title XIX was for any programs related to medical services, hospitalization, and the institutional care of the mentally ill, mentally retarded, or significant residential programs.

Senator Gibson asked if the division felt secure regarding Federal funding in their programs. Dr. Griepentrog felt that most of the programs were fairly solid with regards to Federal monies based on the Community Mental Health Systems Act which funds the community mental health centers. He noted the problem might be in the Title XIX area. He said if the State was forced to cut back in these medical areas, some problems would ensue.

The Vice Chairman inquired if staffing was adequate at the present time with all authorized positions filled. Dr. Griepentrog stated that there were always positions in the transitional period of being filled. He noted, that on the whole, staffing was satisfactory, especially so in areas such as the rural clinics.

Senator Jacobsen asked why the division had requested funds for feasibility and productivity studies when monies were tight due to the economic situation. The Senator stated that he felt that these types of studies could be done as in-house projects. Dr. Griepentrog indicated that a feasibility study was aimed at the potential coming of the MX, would more services by his division be required. He thought there might be a need for someone with expertise to work with the MX people. He noted that funds for this project might be available through the Federal government. He added that concerning the productivity study, his division would do most of the work but were requesting a small amount of money to get into some specialized areas that couldn't be handled in the Central Office.

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Senator Glaser asked what the division was doing to increase receipts and recoveries. Dr. Griepentrog felt that previously the division had not been aggressive enough in third party and private collection pursuit. He noted that these collections were now being more diligently pursued and a good track record had been established at the present time.

Senator Wilson asked Mr. Howard Barrett if his department had any information regarding the amount of money President Reagan had proposed to reduce in either Title XIX or XX. Mr. Barrett said he had no information concerning this matter. Senator Gibson stated that President Reagan was proposing to put a lid on these funding sources in an attempt to arrest the upward pressure.

Central Office (Pg 472). Dr. Griepentrog indicated to the committee several highlights of this budget:

1. There would be staff reductions at the Central Office with 2½ positions being deleted. This would be due to the co-location proposed between the Central Office and rural clinics to attain greater efficiency.
2. The Administrator noted that the Psychologist V position authorized by the Legislature last session had made possible the development of a uniform data collection system. He said there had been budget cuts as a direct result of now having good data and productivity evaluation.
3. The budget requested on new position, that of Training Officer. This position would coordinate all of the training funds and all divisional budgets.
4. Dr. Griepentrog said that a requirement for participation in the Federal Community Health Systems Act was that only the Division Administrator and the Deputy Division Administrator could be unclassified positions. The Federal government required that the rest of the employees be in a merit or State personnel system. The division was re-question that of the two unclassified area mental health coordinator positions, one be classified and the other be deleted.

Senator Gibson asked if any problems might occur with the deletion of the unclassified position of Northern Mental Health Coordinator. Dr. Griepentrog said the Medical Program Director position authorized last session by the Legislature could handle the responsibilities of both positions.

5. The Administrator noted that the budget contained a \$5,000 increase for In-State Travel.

Senator Wilson inquired if the division could fare without the Management Analyst position deleted from the budget. Dr. Griepentrog felt they could.

Senator Wilson asked if the agency had any influence in the selection of the deputy attorney generals assigned to the agency. Dr. Griepentrog said the agency did not select these individuals, only on an extremely informal basis. If the division was not satisfied with the performance of these deputies, the Attorney General would receive their suggestions.

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6. Dr. Griepentrog indicated a line item that referred to "Other Building Rent". He said because of the co-location proposal with the rural clinics, space would be saved and a \$10,000 per year savings would be derived and could be removed from this budget.

Senator Wilson asked if the Rural Clinics rent would increase. The Administrator said their rent budget would not increase either.

Mr. Sparks inquired if the \$10,000 could come off the Governor's recommendation for building rent. Dr. Griepentrog said that for both years it would, \$10,000 the first year and \$10,000 for the second year. He noted that the amount might even be greater than the \$10,000 figure.

Senator Wilson referred to Contract Services and noted that the agency requested \$15,000 and \$16,000 respectively in each year of the biennium while the Governor had recommended \$600 and \$2,000 for this same category. Dr. Griepentrog stated their request was made to provide more productivity studies and for the contracting of special studies in terms of legislation. These studies were an attempt to bring their budget more into the fiscal restraint area. He added that the agency had asked the Attorney General's office to now put some of those legislative packages together for the division.

Senator Wilson asked the Administrator if he wanted an Interim study during the biennium. Dr. Griepentrog said he thought it would be a good idea.

Senator Jacobsen inquired how productive the agency felt the Governor's Advisory Board was. Dr. Griepentrog felt the Board was becoming much more active.

Dr. Ralph DiSibio introduced the Reverend Blakenship to the committee. He noted that Rev. Blankenship was President of the Governor's Advisory Board.

Regional Training (Pg. 554). Dr. Griepentrog said this budget attempted to reduce duplication from agencies in the establishment of training programs. Funds are consolidated into one area where it will be managed out of the Central Office.

The Administrator described the professional teaching parent as being two professionally training spouses who supervise the children's residential programs. He noted that it was a more cost-effective way of delivering services.

Rural Clinics (Pg. 525). The Administrator noted that in the Elko, Hawthorne, Ely, Fallon, and Winnemucca offices five positions have been deleted. These deletions related directly to a productivity study conducted on the agency in terms of number of people being seen by the agency in comparison to similar existing offices. He said the five offices were not as productive as they could have been. The agency was recommending that the Personnel Technician be cut back to a half-time position.

Dr. Griepentrog noted that this bureau had experienced a 30% expansion in services, and that a new position was being requested, that of a psychiatrist. Presently psychiatrists are obtained on contract at the cost of \$60 to \$75 per hour. The proposed new position of psychiatrist would save the agency \$33,000. The position would be based in Carson City serving all the local offices within a day's drive of the base location.

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Dr. Griepentrog commented that this was one of the few agency budgets that contained out-of-state travel monies. He noted if the category remained in the budget, the Federal government would participate in the costs of the budget. These funds were necessary to send administration personnel to Region IX offices as required, to attend conferences.

Senator Wilson asked how "stand-by" pay was determined. Dr. Griepentrog said "stand-by" was paid to staff kept on-call 24 hours a day in the offices to deal with mental health emergencies. The pay for this on-call service constituted 5% of their salary. "Stand-by" pay does have a special category in the budget.

The Administrator stated that in this budget, also, they were requesting that the position of Clinic Director be shifted to a classified position in order to be consistent with Federal regulations.

Senator Echols inquired why there were salary discrepancies related to the Psychologist V position. The Administrator noted that individuals who hold this position are paid according to their level of education, experience, and skills.

Senator Wilson requested Dr. Griepentrog to break down the components of "transitional home care". The Senator asked how the agency was going to spend their monies on this program. Dr. Griepentrog said that "transitional home care" was a program developed to move the patient from a very intensive hospital program back into independent living. The emphasis is on rehabilitation and getting the patient jobs in the community. He noted that they are planning to purchase most of the transitional home care services from the private sector.

Senator Wilson asked to be furnished a "pro forma" for each budget involving transitional home care showing how the monies will be utilized. Dr. Griepentrog said his office would furnish the material to the Senator.

The Vice Chairman inquired why there was a training category in this budget. The Administrator indicated that if this category was deleted from the budget, the agency would lose Federal participation in funding.

Senator Gibson asked if the division had any programs where the individual could be kept in his own home at less cost. Dr. Griepentrog said it was very difficult to determine the criteria for this type of program; the problem was who will receive money and who will not. He marked that the division would have to give the problem a more in-depth study. Senator Gibson concurred with the remark pertaining to more study of that type of program because resources were going to be limited.

Las Vegas Mental Health Center (Pg. 502). Dr. Griepentrog asked the committee to refer to the document distributed to the members entitled "Restructuring of Clark County Mental Health Budgets." (See Exhibit D.) He noted that the major accomplishment of this budget was the consolidation of adolescent services with the Children's Behavioral Service from the Las Vegas Mental Health Center.

Senator Wilson inquired how patients who were chronically ill were identified. Dr. Griepentrog stated that the primary criteria utilized would be the reoccurrence of the patient's illness. He added that illnesses such as schizophrenia never go away completely, they only go into periodic remission.

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The Administrator noted that the in-state travel budget was going up despite the fact that the adolescent staff was being transferred out. He said the agency was shifting to a substantial after-care and monitoring program for the chronically mentally ill. He stated that the staff was planning to travel more to improve follow-up programs.

Dr. Griepentrog said the operating expense category reflected the transfer of the adolescent unit from the Las Vegas facility to the CBS program. He added that specialized equipment was requested in this budget in the amount of \$32,000 to provide a more economical and efficient way of maintaining records by use of microfilm.

He stated that monies in the contract category were being reduced by approximately \$150,000 and shifted to the transitional living category.

Senator Wilson asked if there was a dependence upon accreditation for Title XIX funds by this facility. Dr. Griepentrog stated that the Title XIX program would reflect in the second year upon receipt of Joint Commission on Accreditation of Hospitals, then the facility would receive Federal funds for individuals under the age of 21. He noted that the \$150,000 listed for the first year reflected the monies that the institution could draw on without JCAH accreditation under the clinic/out-patient option. That money would be continued in the second year as well.

Dr. Griepentrog introduced Dr. Ken Sharigian, Deputy Administrator of the Division of Mental Hygiene and Mental Retardation to the committee. He remarked that Dr. Sharigian would be glad to answer any questions posed by the committee.

Senator Wilson inquired as to the consequences if accreditation was not received. Dr. Ralph DiSibio said he felt there would be no problems and was optimistic that they would be in compliance for Title XIX funds. He noted that all the budgets the MHRM division had put before the committee take advantage fully of Title XIX and XX funds. They are using every federal dollar presently available.

Dr. Griepentrog noted that the Las Vegas facility was requesting a one-shot appropriation of \$40,000 to be used to paint the entire exterior of the Las Vegas Mental Health Center buildings.

Two CIP's were also recommended:

1. Monies to put lighting in the facility parking lot. (Pg.1042/81-7)
2. Funds for a joint storage building and maintenance repair building between the Las Vegas facility and the Desert center. There is not adequate storage at either facility at the present time.

The Vice Chairman asked what positions at this facility received stand-by pay. Dr. Griepentrog said the psychiatrists who deal with emergency admissions were given a flat rate to cover the whole day.

Senator Wilson inquired as to whom overtime was paid. The Administrator noted that particularly in the in-patient units there were staff who sometimes had to work double shifts as a result of other staff calling in sick or no-shows.

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Children's Behavioral Services - Las Vegas (Pg.510). Dr. Griepentrog addressed highlights of the CBS facility's budget.

1. **Secure Unit.** This unit house the more seriously disturbed individuals who required a secure unit. He noted that construction was currently taking place on this unit. When the unit became more secure two more positions would be requested to deal with the increased caseload, that of a Registered Nurse and an Administrative Aide.
2. **Adolescent Residential.** A new 24-bed unit was approved last session and should be completed by January 1, 1982. The agency is requesting that the unit be staffed by professional teaching parents, the most cost-effective way. Dr. Griepentrog noted that a psychiatrist would be transferred to this budget. Also requested was a new position under maintenance of buildings and grounds to work on the new buildings as proposed by the CIP.
3. **JCAH Accreditation.** Two new positions are being requested which directly related to Title XIX funding. In order to comply with JCAH accreditation requirements, the facility must have a medical record system. Consequently, a Medical Record Librarian position is needed. The agency also requested a Social Worker position to do community consultation education, a required service under the accreditation program.
4. **Operating Expenses.** Reflected the cost of the new 24-bed unit and the transfer of the existing adolescent staff.
5. **Contractual Services.** This budget was reduced by \$65,000 reflecting the shifting the transitional living into the transitional living category. All will be earmarked in one budget item.
6. **Medical/Dental.** Increase reflected a Region IX Federal Welfare ruling that persons in welfare custody would no longer have their medical and dental bills paid for by federal funds while they were in residence in the facility. They must now be paid from the agency's budget.
7. **Improvements To Structure.** Monies requested to replace carpeting and drapes in the older cottages on the CBS campus.

The Vice Chairman asked what the special NIC rate constituted. Dr. Griepentrog said this was a flat rate the facility was billed against by the NIC due to higher risk exposure to the CBS staff. The rate is higher than normal for the staff because of the type of clientele with whom they deal.

Senator Wilson inquired as to the cost benefit of shifting from Title XX funds to Title XIX funds on this budget. Dr. Griepentrog stated that the spending of Title XIX funds could only be done on a very few programs, CBS being one of them. He noted that Title XX funds were being shifted to another program where the monies could be spent. He said they were not cutting Title XX expenditures, merely shifting them to another budget. Dr. DiSibio added that Title XX dollars were finite and what the State allocated to each agency was also finite. With that information, he said, the agencies then predict where they can use their dollars most readily.

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Senator Wilson asked if the Federal money available was capped and if projected increases and demand for services by the agency exceeded the amount of the cap, what control valve was there to keep expenditures within the cap level; how would the curtailment be administered. Dr. DiSibio replied that probably transitional care and similar programs would have to be severely curtailed. He said the entire department was in the process of drawing together some kind of plan/programs or prioritization of the delivery of services. He said they had to be prepared for contingencies.

Senator Glaser asked for an explanation of the large increase in holiday and shift differential pay. Dr. Griepentrog said that hazardous pay was rolled up into the shift differential pay category by the budget office. He noted that hazardous pay was given to those staff who worked on units containing the very seriously disturbed individuals where the employees were prone to get injured and only those who worked with the adolescent clientele. It constitutes a 5% pay differential. Holiday pay is paid to the staff that is being transferred with the adolescent unit.

Senator Gibson requested an explanation of Title 189-313. The Administrator replied that this had to do with Title I of the Education Act which provided supplemental funds from the Federal government for supplemental educational experience to the children in institutions like CBS.

Senator Jacobsen asked what the difference was between "other contract services" and "contract services". Mr. Barrett said "other contract services" usually referred to leases of equipment, maintenance agreements, etc. He noted "contract services" provided the services of technicians, consultants, etc.

Mr. Sparks asked Dr. Sharigian to clarify the point of whether holiday pay would decrease in the Las Vegas Mental Health Center when the adolescent unit is transferred to CBS. Dr. Sharigian stated that the holiday pay is not for the staff of the adolescent unit, and the program is not reflected in the Las Vegas facility's budget any longer. He said he did not know if holiday pay would decrease.

Henderson Mental Health Center (Pg. 516). (See Exhibit C)

Dr. Griepentrog stated that they were recommending acceptance of this program if approved by the Federal government under the Mental Health Center Act. In addition to new staff positions they were requesting that staff be transferred from the Las Vegas facility to Eastern Clark County. He noted that they would have satellite offices in North Las Vegas, Paradise Valley, and in Henderson. He highlighted other portions of the budget:

1. New Positions. Requested seven new positions. He noted that this center had the largest waiting list for out-patient services. They projected the center will be serving 2,000 out-patients per day.
2. Day Treatment. Currently there are no day-treatment services offered in Eastern Clark County. Soon, day-treatment services will be located in North Las Vegas and Henderson.
3. Adult Case Management. This program would monitor approximately 360 individuals whom have already been identified as being high-risk, chronically mentally ill persons. Transfers from the Las Vegas Mental Health Center and new staff would enable the program to monitor these individuals.

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4. Support Services. These are support positions that would be required to deal with the expansion, staffing, and the Federal grant terms of business accounting.
5. In-State Travel. Increase reflects increased staff and greater emphasis on monitoring the chronically mentally ill. Also would provide transportation for day-treatment patients to day-treatment locations in Henderson and North Las Vegas.
6. Operating Expense. Reflects the increased staff programs.
7. Contractual Services. Shifted \$100,000 in monies down to the transitional living category.
8. Other Contractual Services. Request for a System Six, a data processing piece of equipment that enables the agency to track chronically mentally ill persons.
9. Crisis Intervention. A service currently in existence at the Southern Nevada Memorial Hospital. Staff is being kept in this budget due to Federal participation funds.
10. Other Rent. Increase due to additional space leased for the two new day-treatment centers.

Senator Wilson asked why there was no participation in legal and court expense. Dr. Griepentrog said the agency did not anticipate any. He noted they did have an attorney general who serviced the agencies and whose costs were absorbed by the Central Office.

Senator Jacobsen inquired as to the benefits of Federal recognition for this program. The Administration said the Federal government starts out heavily with an 80% involvement, and tapers out over eight years. He noted that for those eight years the program could use these Federal funds in providing assistance in services.

Senator Jacobsen asked if there was any relation to where the services were located and where the clients lived. Dr. Griepentrog replied that previously the accessibility of these services in Eastern Clark County had been a major problem. He noted that this program would attempt to provide more accessible services to that particular population.

Senator Jacobsen asked the Administrator how he felt in regard to the satellite situations in the rural areas. Dr. Griepentrog said that it was essential to continue the pattern already established. There are currently seven main satellite offices with the staff traveling to many other communities on a once or twice a week basis. He said that compared to Eastern Clark County, service in the rural areas was very good.

Senator Echols requested an explanation of day-treatment services. The Administrator said these were services to help the client start functioning in daily living skills to a point where he could become more independent in the community. Out-patient counseling differed from day-treatment in terms of intensity of services.

Senator Jacobsen noted that a greater understanding of the problems of the MHMR division would be gained by visiting the different facilities. Dr. DiSibio said the committee was more than welcome to visit any of the facilities at any time.

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Institute Land Exchange (Pg. 476). This budget related to a project approved by the previous legislative session. It dealt with a street that runs along the south side of the Nevada Mental Health Institute and the Sierra Developmental Center. The Administrator said the City plans to widen the street during the next biennium. The funds in this budget were carry-over monies to be used for landscaping and for fencing, to keep mentally retarded persons from wandering into the busy thoroughfare.

Mental Health Institute-Sparks (Pg. 477). Dr. Griepentrog highlighted portions of this budget.

1. In-Patient Service. Increased performance in terms of generating third-party revenues. Heavy revenue item in this budget was for "meals". It is to the advantage of the facility in terms of existing Federal funds that are available to the agency through the mental retardation program. Federal funds pay for full cost of "meals".
2. Policy Issue. The agency has budget for other counties, besides solely Clark County, to contribute payment for emergency mental health services for in-patients. The law currently permits and requires this contribution of payment.
3. Personnel. The deletion of two laundry workers and three food-service workers as a result of efficiency programs.
4. New Positions. A Custodian position is requested to comply with deficiencies cited by the Health Department and JCAH. A Grounds Worker has been requested to service six acres of new landscaping approved by the last legislative session.

Two positions requested related to billing and purchasing which would reflect increased workloads in those areas.

Two programmatic positions, a Psychiatric Social Worker and a Mental Health Technician, under case management. Attempt to provide on a limited scale in the North a more expanded follow-up program to the chronically mentally ill.

5. Operating Costs. Food costs reflect actual costs of all food purchased for the institute and the other MH and MR programs in the North.

Senator Wilson inquired as to why the transitional living program was limited to in-patients in cottages, as opposed to traditional institutional facilities. Dr. Griepentrog described the Halfway House as a transitional living program. The staff there operate two 7-bed transitional living units at the present time. He said there were changes being proposed in the use of beds at the institute. He noted that a current problem was the continual overcrowding in the closed intensive care unit. The agency was recommending that particular unit be moved to a more roomy environment, and an increase in beds from 24 to 32. He added that considerable flexibility had to be maintained on the labeling of beds at the institute. At times, the institute receives a large influx of people who need a closed/secure unit. At other times, there is a greater influx of those who would benefit from transitional living.

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Senator Jacobsen asked what the trend was in alcohol services at the center. Dr. Griepentrog said they had no trouble in keeping their limited services filled. The demand seemed to be very high.

Senator Jacobsen inquired if the Outreach Program, on Apple Street, was a success. The Administrator replied that it was becoming a well-utilized facility.

The Vice Chairman asked what the arrangement was with the Medical School concerning the Medical Program Coordinator. Dr. Griepentrog said the Medical School was cooperating on two levels. One way related to making available, both at this facility and at Lake's Crossing, a placement for medical students in residency to give them experience in mental health problems. He noted, in addition, there had been difficulty in recruiting a top-level mental health administrator with a professional psychiatric background. The University helped with this problem by contributing funds for this position. The medical health administrator, in turn, works with the University in terms of practical placements for its students, while at the same time, is administratively responsible to the center for the implementing of its programs.

Senator Gibson asked if salary was the only cost budgeted for the Medical Program Coordinator. Dr. Griepentrog said the University would contribute the cost of medical supervision of the students. He noted that the University had been putting up more than their fair share, but the division was requesting the assumption of a more legitimate portion to bring the sharing more in balance. He expected that the level of the University's contribution would be in the neighborhood of \$4,000 to \$5,000 over the next year.

The Vice Chairman inquired as to what comprised "contract services". Dr. Griepentrog stated the major portion of that budget, \$73,000, related to special medical services the institute could not provide. The amount of \$33,000 was to purchase pastoral services for the facility, a continuation of previous services. Another \$14,000 item related to supplementing group home living.

Senator Gibson asked how many patients were in the institute. The Administrator said the population of the center ran between 108 and 110 clients. The Senator then asked if the expansion in the budget was due to increased out-patient services. Dr. Griepentrog affirmed this statement; expansion was due to improved and increased monitoring of out-patient services.

Dr. DiSibio asked the committee to notice that in the budget there were no increases for construction. He said that would not be the case two years from present when, particularly, a Lake's Crossing-type facility would probably be required in the southern portion of the State.

Senator Jacobsen asked how much the State Printing Office was used by the division. Dr. DiSibio replied, except for the Welfare Department, it was used almost exclusively by every other agency.

Dr. Griepentrog addressed one-shot appropriations requested by the facility:

1. \$124,000 - Related to the development of computerized data processing for all of the Northern mental health services.
2. \$105,000 - Related to clean-up and repair work needed at the center for Buildings 1 and 8.

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Facility for the Mental Offender - Lake's Crossing (Pg.486).

Dr. Griepentrog stated this facility provided services to individuals who are found not competent to stand trial. The facility attempts to restore these persons to a level of competency. The institute also provides some limited services to individuals who are found "Not guilty" by reason of insanity. Services are also provided to individuals who are highly assaultive or highly aggressive and have to be contained in this type of environment. He noted that the average stay per client was three months.

Dr. Griepentrog said that "contract services" had increased significantly. Jointly with the University, the facility obtained the services of a contract psychiatrist to be in charge of the medical direction of this program. He noted that the cost of this contract would be increasing to \$62,000 next biennium. Another \$7,000 was to purchase other medical speciality services.

The Administrator noted that the food increase reflects the rise in labor costs previously absorbed by the institute. This item is now being budgeted for separately.

Dr. Griepentrog addressed the problem caused by sanity evaluations. He said the law required that before a person returned to stand trial, he must be evaluated by three independent psychiatrists at the cost of \$150 per psychiatrist, per evaluation. He noted that the cost of these evaluations would cost \$28,000 the next year but that it was a State law. He added that the division had proposed a bill which would allow at least one of the psychiatrists to be a division employee, thereby cutting the cost of the evaluation by one-third.

Senator Wilson said he believed the present situation to be decided was what happened if one is found not competent to stand trial unless there was a finding of insanity to commit them in the first place. He asked if the court had decided on that question, or, if not, which way the division thought the decision might go. Dr. Griepentrog said he had read that a local judge had ruled that a person could be admitted without a finding of insanity on the basis that they needed treatment. He did not know if that ruling has been sustained.

Senator Wilson asked if the ruling was not sustained, would there be an additional budget item impacting there to determine whether or not one could be certified insane or not competent generally. Dr. DiSibio said it would absolutely have an impact on the division because for no reason at all, except merely a question as to whether the person was competent or not, it would have to be checked out at Lake's Crossing.

Dr. Sharigian noted there was some legislation that was being considered at the request of a district court judge in Clark County. The legislation says that when an individual is returned as competent to stand trial and is found guilty by reason of insanity, it be required they go through the typical civil commitment procedure. He said there was also legislation under consideration which would state that an individual who was not competent to stand trial for an inordinate amount of time must have the charges dropped and be considered for civil commitment. Dr. DiSibio commented that more and more beds at the Lake's Crossing facility were being taken up by full-timers. He said they would be there forever unless the courts did something to ease the situation. He added that the agency had attempted in their budget to adequately prepare for the full utilization of that facility; beyond that, they have no control.

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Senator Glaser asked how many patients were at Lake's Crossing. Dr. Griepentrog stated the facility had the capacity for a maximum of 32 patients and their operating average was usually 30 patients. He noted that there were 102 admissions in 1980.

Senator Glaser inquired as why an academic teacher was employed at the facility. The Administrator said the teacher's primary responsibility was to deal with those individuals who were in the facility on a long-term basis. He added that the law specifically stated that an individual could not be confined unless provided treatment and training.

The Vice Chairman asked if the administrator of this facility was the Psychologist V position. Dr. Griepentrog said yes, this position was the Clinical Director.

Senator Echols asked the meaning of the sentence, "Staff utilize a therapeutic milieu approach to treatment and draw on the principles of a token economy to facilitate behavior change", in the program statement. Dr. Sharigian clarified this statement and said for each activity successfully completed by the patient, the patient would get a point reward for it. He added that it was a positive motivation program, the buying of good behavior from the patient. He noted the use of this program was largely for the severely disturbed client.

Senator Gibson inquired about the arrangement with the Medical School concerning the contract psychiatrist. He noted that the amount budgeted for this position was a full-time salary, yet he was on the staff of the Medical School. Dr. Griepentrog remarked that the psychiatrist was working full-time at the facility. The Medical School contributed a portion of this position's salary as he provides supervision to medical students at the facility when they are practicing at Lake's Crossing.

Children's Behavioral Service - Washoe (Pg. 494). Dr. Griepentrog said last year this program provided services to approximately 494 families and children on an out-patient basis. Thirty children were served in the residential program, and 60 children were served in the pre-school program. The Administrator indicated some highlights of this budget:

1. Staff. Deletion of 3½ positions because Washoe School District will be assuming their rightful responsibilities in providing academic training. In addition, 6½ more positions would be deleted during the course of the first year due to the termination of the social effectiveness training grant, a federally funded program to generic service providers. The division did not recommend the continuation of the program beyond the termination of Federal funds.
2. New positions. Upon receipt of JCAH accreditation, a revenue source of Title XIX funds would become available. They have requested two new positions, a Psychologist V to do program evaluation which is a requirement of the accreditation, and, a Psychiatric Social Worker to do community consultation which is also a requirement of accreditation. Dr. Griepentrog noted this was a very cost effective program.
3. Medical/Dental. Increased due to welfare no longer being able to pay these expenses.

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Senator Jacobsen commented that there seemed to have been a lack of attention to audit procedures. Dr. Griepentrog said he had required agencies to implement corrective action which was presently on file in the Central Office and with the Legislative Council Bureau. He added that they had developed some specific standards for staff performance in all areas which would be monitored.

Senator Gibson inquired if the community awareness program was an Outreach program. The Administrator replied it was a Title I program whereby the agency provided supplemental services to children from Federal funds. These were supplemental education services. The division does not seek clients for this program.

Reno Mental Health Center (Pg. 490). Dr. Griepentrog said this served approximately 225 families and adolescents on an out-patient basis. Their current caseload was about 90. He noted the facility served 32 emotionally disturbed adolescents in a day-treatment program labeled "Crossroads" in the budget. The facility served 10 persons residentially in a group home called "Achievement Place West" in the budget. In addition, the center served 22 seriously disturbed adolescents at an in-patient residential program on the institute campus called "Nisus" in the budget.

Dr. Griepentrog indicated Title XIX monies were plugged in the budget as a result of achieving JCAH accreditation and were consequently not asking for any new positions.

The Administrator said the agency was requesting a new program for the second year of the biennium called "Achievement Place West II". He described it as being a new improved treatment center in the community which would provide services to people whose emotional problems precluded their continued living in their home environment; but, usually would have a home environment to return to if their behavior could be brought under control.

Senator Gibson asked what in-state travel was budgeted for in this facility. Dr. Sharigian stated there was much staff travel to the homes of the clients and to various referral sources. He added that there was some travel where the staff had gone to sister programs in Las Vegas to work on mutually developed programs.

Reverend Blankenship addressed the committee on the fact that pastoral care services at the mental health institute was done by contract. Some clergymen provided services without cost. He noted there was no full-time positions for pastoral services at the institute.

Senator Gibson requested Senator Echols to make sure audit exceptions were brought before the hearings.

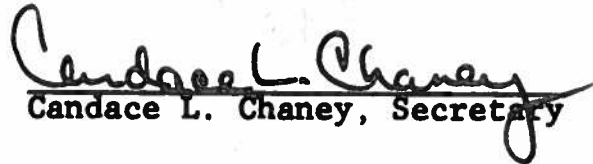
The Vice Chairman also requested Senator Glaser to monitor the Governor's Task Force recommendations to implement reviewing by the committee for discussion at agency presentations.

Senator Gibson stated that he planned to suggest to Senator Lamb, upon his return, that a subcommittee be formed to address the whole mental health area to permit a deeper understanding of pressures that were developing in this area.

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There being no further business, the meeting adjourned at
10:45 a.m.

Respectfully submitted by:


Candace L. Chaney, Secretary

APPROVED BY:


Senator Floyd R. Lamb, Chairman

DATE: 2/23/81

SENATE AGENDA

COMMITTEE MEETINGS

Committee on FINANCE, Room 231.

Day (See Below), Date (See Below), Time 8:00 a.m.

MONDAY, FEBRUARY 9, 1981

1. Division of Mental Hygiene and Mental Retardation (Pg. 472 - Jerome Griepentrog - ALL AGENCIES).
2. Regional Training (Pg. 554).
3. Rural Clinics (Pg. 524).
4. Las Vegas Mental Health Center (Pg. 502).
5. CBS - Las Vegas (Pg. 500).
6. Henderson Mental Health Center (Pg. 516)
7. Institute Land Exchange (Pg. 476).
8. Mental Health Institute (Pg. 477).
9. Facility for the Mental Offender (Pg. 486).
10. CBS - Washoe (Pg. 494).
11. Reno Mental Health Center (Pg. 490)

TUESDAY, FEBRUARY 10, 1981

1. Genetics (Pg. 499 - Jerome Griepentrog - ALL AGENCIES).
2. Northern Mental Retardation Services (Pg. 529).
3. Southern Mental Retardation Services (Pg. 534).
4. Southern Mental Retardation Food Services (Pg. 521).
5. Community Training Centers (Pg. 540).
6. Resident Placement Fund (Pg. 550).
7. Retired Senior Volunteer Program (Pg. 543).
8. Senior Companions (Pg. 545).
9. Foster Grandparents (Pg. 547).
10. Community Awareness (Pg. 551).

WEDNESDAY, FEBRUARY 11, 1981

1. Bureau of Vocation Rehabilitation (Pg. 373-404...Del Frost).
(Beginning of the Health Division if time allows)

THURSDAY, FEBRUARY 12, 1981

1. Health Division (Pg. 406 - Dr. John Carr).
2. Radioactive Material Disposal (Pg. 336).

RESTRUCTURING OF CLARK COUNTY MENTAL HEALTH BUDGETS

The Mental Health budgets for Clark County (Las Vegas Mental Health Center, Henderson Mental Health Center and Children's Behavioral Services/Clark) propose a restructuring of services. This restructuring is designed to:

Increase services to chronic mentally disabled adults and children and adolescents in Clark County. Service to the chronic mentally disabled would emphasize less costly alternatives to institutionalization including a systematic aftercare system;

Increase services in the Eastern portion of Clark County where the majority of the residents live;

Consolidate children and adolescent services so as to avoid organizational and bureaucratic barriers to continuity of care to this group.

To accomplish these goals, the budgets propose:

The transfer of 30 existing adolescent staff of Las Vegas Mental Health Center to Children's Behavioral Services/Clark, to create a single children and adolescent program for the county. Las Vegas Mental Health Center would focus entirely on adults.

The transfer of 11 existing staff from the Las Vegas Mental Health Center to Henderson Mental Health Center to increase services in Eastern Clark County.

The transfer of one existing staff from CBS/Clark to Las Vegas Mental Health Center to continue working in the Las Vegas Mental Health Center's countywide crisis program.

The adding of 20.5 new staff to the Henderson Mental Health Center to serve chronic mentally disabled adults and children and adolescents.

The adding of 12 new staff to Children's Behavioral Services/Clark, to operate the 24-bed adolescent CIP approved by the 1979 State Legislature as well as converting the existing open adolescent unit and a secure locked program. Construction for the security project will be completed in the Spring of 1981 and construction of the 24-bed CIP will be completed in January, 1982.

The closing of the temporary 26-bed adult inpatient unit at Southern Nevada Memorial Hospital. Expanding the Las Vegas Mental Health Center permanent 24-bed adult closed unit to 36 beds (24 closed and 12 open beds). Staff from the 26-bed unit would be used to expand the current unit and provide additional aftercare services to discharged adults. These services are less costly and more clinically appropriate than hospital level care.

Increasing community living placements for chronic mentally disabled adults by purchasing up to 192 such placements a year (96 from the Las Vegas Mental Health Center budget and 96 from the Henderson Mental Health Center budget).

The following charts specify the numbers and types of existing transferred and new positions in each of the three Clark County mental health budgets:

LAS VEGAS MENTAL HEALTH CENTER

ADULT SERVICES

PROGRAMS	Existing	Transfer In. From CBS	New	Totals	Number Served
OUTPATIENT COUNSELING (W. Charleston)	Psych V (4) Psych IV (1) Psych III (1) PSW II (3) Mgmt. Assit. I (1) Adm. Aide II (1)			14 Existing	Annually will serve 1425
OUTPATIENT COUNSELING (Westside)	Psych V (1) MHT IV (1) Adm. Aide II (1)				
OUTPATIENT COUNSELING - ELDERLY	PSW II (1) OT II (.5) OT Tech II (1) PRN (1) OT III (1)			4.5 Existing	Annually will serve 525
DAY TREATMENT (W. Charleston)	Psych I (1) RT I (1) MHT IV (1) MHT III (2) Adm. Aide II (1) Chauffeur (1)			10 Existing	Annually will serve 300 Focus will be on chronically disabled.
DAY TREATMENT (Westside)	PSW II (1) MHT III (2) (Reclassifications)				
CRISIS	Psych III (1) MHT IV (1) Sr. PRN (1) Mgmt. Asst. I (1)	Psych II (1)		4 Existing 1 Transfer <hr/> 5	Will provide 24-hour , seven day/week crisis face-to-face and phone services to Clark County residents.
RESIDENTIAL - CASE MGMT. (W. Charleston).	PSW III (1) (Reclassification) MHT IV (1) MHT III (1)			6 Existing	Annually will serve 360

PROGRAMS	Existing	Transfer In. From CBS New Totals	Number Served
RESIDENTIAL - CASE MGMT. (Westside)	MHT III (2) (1 Reclassification) Sr. LPN (1)				
LVMHC INPATIENT	Sr. Psychia. (1) Sr. PRN (2) PRN (4) Psych V (.5) PSW II (1) P/LPN (2) MHT IV (1) MHT III (12.5) (6 Reclassifications) MHT I (.5) RT II (1) OT Tech II (1) Mgmt. Asst. I (1) Career Aide IV (1) PSW II (1) SUP. PRN (1) PRN (2) P/LPN (1) Sr. P/LPN (1) MHT III (6) (1 Reclassification)			40.5 Existing	
MEDICAL/PSYCHIATRIC	Sr. Psychia. (2) Sr. LPN (1) Med. Rec. Lib. II (1) Mgmt. Asst. I (1.5)			5.5 Existing	

PROGRAMS	Existing	Transfer In. From CBS New	Totals	Number Served
BUSINESS/RECPT/SUPPORT	Bus. Mgr. III (1) Accountant (1) Personnel Tech III (1) Social Wkr I (1) Prin. Act. Clk. (1) Sr. Act. Clk. (2) Act. Clk. (2) Admin. Sec. I (1) Mgmt. Asst. I (2) Career Aide III (1)			13 Existing	
BUILDINGS AND GROUNDS	Bld. Supt. (1) Gen. Bld. Trds. (1) Custodial Wkr. (3) Gardener (1)			6 Existing	
PROGRAM EVALUATION	Psych V (1) Stat. Clk. II (1)			2 Existing	
CONSULT/EDUC/VOL. SERVICES	PSW II (1) Dir. of Volun. (1)			2 Existing	
OMBUDSPERSON/TRAINING	PSW II (1)			1 Existing	
COURT SCREENING	Psych V (.5)			.5 Existing	
PROGRAM ADMINISTRATION	Psych V (1)			1 Existing	
				111 Existing 1 Transfer 112	

CHILDREN'S BEHAVIORAL SERVICES--LAS VEGAS
PROGRAM ORGANIZATION OF SERVICE PERSONNEL FOR CHILDREN AND ADOLESCENT MENTAL HEALTH

PROGRAMS	Existing	Transfer In From LVMHC	New	Totals	Number Served
<u>Regional Office</u>	Admin. Sec. I			1 Existing	
<u>Outpatient Counseling</u>	Psych V (1) CDS II (2) Admin. Aide II (1)	Psych V (1) PSW II (1) Mgt. Asst. (1)		4 Existing 3 Transfer In <u>7</u>	Will serve 675
<u>Autism Remediation</u>	CDS II (1)			1 Existing	Will serve 10
<u>Developmental Therapy</u>	Psych V (1) CDS II (1) CDS I (1-Title I) (IFC approved) PSI V (1) (Title I) IFC apprvd. Mgt. Asst. I (1)			5 Existing	Will serve 360
<u>Treatment Center</u>	Special Ed. Teacher (1) PSI V (1/2) MHT III CDS II (1) Chauffeur (1)			4.5 Existing	Will serve 56
<u>Day Treatment</u>	Psych III (1) Admin. Aide II (1)	CDS I (1) PSW II (1) MHT III (1)		2 Existing 3 Transfer In <u>5</u>	Will serve 111
<u>Residential Children</u>	Prof. Teaching Parent I (4) Psych V (1) MHT III (2) (6 mn.)	Rec. Therapist I (1)		7 Existing 1 Transfer In <u>8</u>	Will serve 32

CHILDREN'S BEHAVIORAL SERVICES--LAS VEGAS
PROGRAM ORGANIZATION OF SERVICE PERSONNEL FOR CHILDREN AND ADOLESCENT MENTAL HEALTH

PROGRAMS	Existing	Transfer In From LVMHC	New	Totals	Number Served
<u>Secure Inpatient</u>		Psych V (1) PSI V (1) PSW III (1) Psych Nurse RN (3) MHT IV (1) MHT III (8) Psych LPN (3)	Psych. Nurse RN (1) Admin. Aide I (1)	18 Transfer In <u>2</u> New 20	Will serve 20
<u>Community Transition Treatment Homes (Two Under Contract)</u>					Will serve 22
<u>Adolescent Residential</u>	CDS II (1)		Prof. Teaching Parent II (2) Prof. Teaching Parent I (4) Admin. Aide II (1)	1 Existing <u>7</u> New 8	Will serve 36
<u>Medical & Psychiatric Assessment</u>	Sr. Physician (1)	Sr. Psychiatrist (1)		1 Existing <u>1</u> Transfer 2	
<u>Volunteer Services</u>	Dir./Vol. Serv. (1/2) Sup./Vol. Serv. (1/2)			1 Existing	
<u>Business & Reception Support Functions</u>	Prin. Acct. Clerk (1) Admin. Aide II (2)	Sr. Acct. Clerk (1) Mgt. Analyst II (1)		3 Existing <u>2</u> Transfer In 5	
<u>Maintenance of Bldgs. & Grounds</u>	Sr. Bldg. Custodian (1) Bldg. Custodian (1)	Bldg. Custodian (1)	Sr. Bldg. Custodian (1)	2 Existing <u>1</u> Transfer In <u>1</u> New 4	
<u>Program Evaluation</u>		Statistician II (1)		1 Transfer In	

**CHILDREN'S BEHAVIORAL SERVICES--LAS VEGAS
PROGRAM ORGANIZATION OF SERVICE PERSONNEL FOR CHILDREN AND ADOLESCENT MENTAL HEALTH**

PROGRAMS	Existing	Transfer In. From LVMHC	New	Totals	Number Served
<u>Court Screening</u>	Psych V (1)			1 Existing	
<u>Intake Processing</u>	Mgt. Asst. I (1)			1 Existing	
<u>SAH Accreditation</u>			Med. Recds. Lib II PSW III (1)	2 New	
				34.5 Existing 30 Transfer In 12 New <u>74.5</u>	

HENDERSON MENTAL HEALTH CENTER
PROGRAM ORGANIZATION OF SERVICE PERSONNEL FOR CHILDREN, ADOLESCENT AND ADULT SERVICES - EASTERN CLARK COUNTY

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PROGRAMS	Existing	Transfer In. From LVMHC.	New	Totals	Number Served
<u>Outpatient Counseling</u>	Clinic Director Psych. II PSW II Psych V. Psych II Psych V Psych III	+Psych V	Sr. Psychiatrist Psych. V. PSW II (2) CDS II Psych III CDS II	7 Existing 1 Transfer In. <u>7</u> New 15	Annually will serve 1,090 Annually will serve 900 youth
<u>Day Treatment:</u>		+MHT III (2) +PSW I +MHT III (2) +OT II	Psych I Chauffeur	6 Transfer In <u>2</u> New 8	Annually will serve 240
<u>Crisis Intervention</u>	PSW I Psych I (1/2)		Psych I (1/2) PSW II Sr. Psych. Nurse (2)	1.5 Existing <u>3.5</u> New 5	Will provide 24 hr, 7 day/ wk crisis face-to-face & phone services to Clark County residents. New staff will add outreach capability.
<u>Adult Case Management</u>	MHT IV (1/2) PSW I	+Psych Nurse (2) +MHT IV	MHT IV(1/2) PSW I	1.5 Existing 3 Transfer In <u>1.5</u> New 6	Annually will serve 360
<u>Community Group Home</u>	Psych III			1 Existing	Homes annually serve 20 youth per year through con- tracts plus one staff position serving 60 youths.

HENDERSON MENTAL HEALTH CENTER
 PROGRAM ORGANIZATION OF SERVICE PERSONNEL FOR CHILDREN, ADOLESCENT AND ADULT SERVICES - EASTERN CLARK COUNTY

456

PROGRAMS	Existing	Transfer In. From LVMHC	New	Totals	Number Served
<u>Support Services</u>	Sr. Psychiatrist Accountant Mgt. Asst. I (2) Sr. Account Clerk Admin. Aide II (1/2)	Psych IV	Med. Records Lib. II (1) Bus. Mgr. I (1) Mgt. Asst. II (2) Sr. Acct. Clerk (1) Admin. Aide II (1 1/2)	5.5 Existing 1 Transfer In <u>6.5</u> New 13	
				16.5 Existing 11 Transfer In <u>20.5</u> New 48	