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Mental Health Crisis Recommendations Submitted By The Southern Nevada Mental Health Coalition and The Chronic Public Inebriate Task Force July 17, 2002

The Chronic Public Inebriate Task Force was formed in 1999 by a group of medical professionals working to resolve the problems associated with emergency room overcrowding and the divert situation that was plaguing the Las Vegas Valley. The group consisted of key stakeholders from hospital emergency departments, the Clark County Health District Emergency Medical Services, area police and fire departments, ambulance services, and providers of mental health, alcohol and substance abuse treatment. The issue of divert was severely affecting the abilities of emergency responders throughout the valley and placed people who needed emergency care in jeopardy. The hospitals hired a consultant to assist in identifying several procedural changes that could be implemented to lesson the problems. However, paramedics were still being forced to remain with patients in their vehicles for extended periods of time or were being routed to another hospital further away.

The major contributing factor was determined to be the significant number of chronic inebriates and mentally ill persons who were being held in emergency rooms for long periods of time because there were insufficient mental health beds available. State and local regulations required that these individuals be taken to hospitals for medical clearance before being transferred to a mental health or substance abuse facility for treatment. While Southern Nevada Adult Mental Health was consistently at capacity with only 10 crisis observation beds and 78 inpatient beds, area emergency rooms were forced to hold as many as 45 patients who were waiting for days to be transferred. Not only were these patients consuming needed and costly hospital and paramedic resources while patients with critical emergency needs were being diverted to other hospitals, they were not receiving appropriate care. A large percentage must be released without ever accessing needed services and they continue to cycle through the hospital or criminal justice systems.

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ASSEMBLY WAYS AND MEANS
DATE: 3-12-03 ROOM: 3/37 EXHIBIT F
SUBMITTED BY: Assemblyman Horne

The group approached Larry Brown, Ward 4 Councilman for the city of Las Vegas, seeking support for their efforts and, at his suggestion, they went before the Southern Nevada Regional Planning Coalition. The SNRPC, which includes elected representatives from Clark County, Las Vegas, North Las Vegas, Henderson, Boulder City and the Clark County School District, recognized this to be a regional issue. They directed staff to assist the Task Force in developing an action plan (attached) to alleviate the problems associated with emergency room overcrowding and the impact to public safety resources.

A request for a variance was granted by the Clark County Health District to allow paramedics and police to transport inebriates who did not need emergency medical care directly to a treatment facility rather than a hospital. WestCare, a non-profit provider of alcohol and substance use treatment with approximately 4,000 clients, offered to provide the necessary services and expand their facilities to meet this need. Additional funding is necessary to accommodate the estimated 8,000 who would now be accessing services at their facility. The Task Force has developed a possible funding formula that would include state and local governments and area hospitals.

The group continued to gather data that showed the number of persons in emergency rooms with co-occurring mental health and substance abuse disorders was increasing. They focused on their primary goal of establishing a centralized triage facility that would allow emergency personnel to quickly drop off individuals experiencing crisis who do not require emergency room care. Once there, patients would be evaluated, stabilized and directed to the appropriate level of treatment and given access to available services - whether it be for substance or alcohol use, mental illness, mental retardation, dementia, or Alzheimer's disease. This facility would allow emergency responders to get back in service in a timely manner, free the emergency rooms to handle patients with medical emergencies and prevent the same individuals from repeatedly cycling through the hospitals and detention systems.

Recognizing the increasing impact to police and detention services and the demand on resources, Sheriff Jerry Keller formed the Southern Nevada Mental Health Coalition in the Spring of 2001. Their initial task was to consider ways for