# NNBHC Meeting

## September 10, 2019

## 9:00 -10:30 AMUNR Redfield Campus Room 214

Jake Wiskerchen. Zephyr Wellness. Welcome. Explained NNBHC to the group. Invite your friends who you think would benefit from attending. All of us got here because someone invited us, and we’ve been having this meeting for 5 years now.

**Agenda Item #1 – Stephanie Brown – Willow Springs**

Willow is higher acuity locked facility. 116 beds. At 53 today. Primary referral source is acute care psychiatric hospitals, pediatricians, schools, probation, DCFS.

Referral and intake. Call admissions dept. Send over clinical documents and recent notes. Increasing census. No wait right now on any of the units. They receive about 5-10 calls a day and process them accordingly. Every kid does need a Psych eval…… Medicaid also requires a Psych referral and evaluation. Psych APRN is approved except for Medicaid.

Willow is a Tri care preferred provider; they take kiddos from all over the country. A lot of military kids. Residential treatment for kids ag 5-17. Live there 3-6 months. Problems sometimes with insurance who will not pay for longer stays. Kiddos come from acute care psychiatric hospitals that provide treatment and programming for the kids to manage their mental illness when they return to community. Push to keep the kids in the community. Tri care pays for transportation for families if they are out of the area, from anywhere they are located.

Peds Unit ages 5-12- segregated from the other kids

Adolescent unit ages 12-17 separated by gender. Both boys and girls are CBT model. Adolescent girls also have DBT model. Willow does a DBT skills weekend, put families up at Peppermill. This is to get parents on board with DBT, need family support.

They use medical model for all kiddos. Medication management is important. Psychiatrist sees kids once a week. Therapy also 1x week also family therapy 1x week. Groups every day. Recreation (ropes course etc.) and therapy.

Schooling is secondary to treatment. Cater to IEP plan and nutrition. School is 4 hours a day. Fully accredited to graduate kiddos from school.

Level system with rewards so kids can get passes to go outside of the facility.

Nutrition – cafeteria includes fruit and veggies as well as fun kid food such as burgers and spaghetti

Nevada vs other states population? More kiddos from out of State than Nevada.

New CEO – making programming more robust. Adam McLain. Staffing is a challenge.

Will treat SUD if also have MH diagnosis. Secondary diagnosis. Do not take kiddos with aggression against authority or sexual violation, animal killing, fire setting, low cognitive functioning (lower than 70 IQ).

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**Community Announcements**

* Jon Ray with Maple Star asked about Family first Act – keep kiddos at home by providing services in the home through family drug court. Preventative short-term intensive services. Federal Govt is Funding 50% of the funds…where are the other funds coming from? Is Washoe County doing this and how?
* Communities Act – provides incentive for providers to stay in State of Nevada, Tuition reimbursement etc.
* Jan from West Hills hospital – they DO take pediatric patients. 5-12 and 13-17. In case you heard otherwise. They DID NOT shut down pediatric unit.
* Conversation about the system and barriers to treatment…. why are acute care beds empty? Ideas?
* Need more care coordination in the community.
* Take fee for service IMD exclusion barriers off Rural
* Transportation for Rural
* One umbrella for ALL behavioral health providers in Nevada
* Dawn Yohey DPBH– All CCBHC’s are required to have an ACT team including Carson Tahoe Hospital. There will be 10 statewide. There is a provider type for CCBHC in Medicaid. Uncompensated care at CCBHC. All ACT teams need to be up and running a year from Oct 1. Jeanyne to invite Dennis Humphreys
* Crisis Now model being rolled out as well to meet individual where they are in crisis. Crisis stabilization centers being built. 2 facilities approved through legislation. 1 in North 1 in South.
* Jake asked Dawn about Sapta and Medicaid. Who funds residential treatment? Aurelia Jensen from Sapta says SAPTA funds residential which includes treatment. Sapta funds transitional/residential housing and the other services are covered by Medicaid. Patients must apply for Medicaid first. Medicaid will approve in 1 day or less. Medicaid can go to the treatment sites if needed to help people get signed up. Usually part of intake process at treatment facility (SUD).
* New emergency mental health line – 988. When will it launch?
* Any additional suggestions, send to Jeanyne Ward at mailto:mjward@casat.org, or Sandy Stamates at mailto:askstamates@gmail.com, or Jake Wiskerchen at mailto:jake@zephyrwellness.org.

**ANNOUNCEMENT**
All information regarding the NNBHC Meetings has been moved to a new website: <https://casatondemand.org/nnbhc-2/>