



STATE OF NEVADA
BOARD OF EXAMINERS FOR SOCIAL WORKERS (BESW)
4600 Kietzke Lane, Suite C121, Reno, Nevada 89502
775-688-2555

PUBLIC NOTICE OF BOARD MEETING

9:00 am on Wednesday, July 20, 2022

BESW strives to maintain government transparency and protect public safety. We are offering a virtual option for attendance via Zoom conference. Cameras will be on for the duration of the meeting. Supporting materials will be available electronically at the BESW website: <http://socwork.nv.gov/board/Mtgs/>.

***NOTE: Per Open Meeting Law, before speaking, please state your full name for the record.**

The Board of Examiners for Social Workers is inviting you to a scheduled Zoom meeting.

Time: July 20, 2022, 09:00 AM Pacific Time (US and Canada)

Invite Link: <https://us02web.zoom.us/j/89334318384>

Meeting ID: 893 3431 8384

One tap mobile

+12532158782,,89334318384# US (Tacoma)

+13462487799,,89334318384# US (Houston)

Dial by your location

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

Please Note: The Board of Examiners for Social Workers may address agenda items out of sequence, combine the agenda items, pull, or remove the agenda items, to aid the efficiency or effectiveness of the meeting or to accommodate persons appearing before the Board. The Board may continue agenda items to the next meeting as needed. (NRS 241.020)

Public comment is welcomed by the Board and will be heard at the beginning of the Board meeting following the Call to Order and Roll and at the end of the agenda prior to the adjournment of the Board meeting. Public comment may be limited to three (3) minutes per person. The Board meeting Chair may allow additional time to be given a speaker as time allows and at his/ her sole discretion. Once all items on the agenda are completed the meeting will adjourn. Prior to the commencement and conclusion of a contested case or a quasi-judicial proceeding that may affect the due process rights of an individual, the Board may refuse to consider public comment. See NRS 233B.126.

AGENDA

Items may be taken out of order; Items may be combined for consideration by the public body; Items may be pulled or removed from the agenda at any time; the public body may place reasonable restrictions on the time, place, and manner of public comments, but may not restrict comments based upon viewpoint.

Pursuant to NRS 241.030 the Board may conduct a closed session to consider the character, allegations of misconduct, professional competence, or physical and mental health of a person.

1. Call to Order, Roll Call.

2. Public Comment.

Note: No vote may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020). Public comment may be limited to three (3) minutes.

3. Board Operations:

A. Review and Discuss June 15th, 2022, Board Minutes. (For Possible Action).

B. Review and Discuss Fiscal Year End Financials – July 1, 2021, through June 30, 2022. (For Possible Action).

C. Review and Discuss Fiscal Year End Statistics – July 1, 2021, through June 30, 2022. (For Possible Action).

D. Review and Discuss Updates Licensure Processes and Potential Solutions. (For Discussion Only).

- i. "Understanding the Challenge of Significant Shortages in All Mental Health Professions" Summary Report.
- ii. Letter from SAPTA (Substance Abuse Prevention and Treatment Agency) Advisory Board.
- iii. Updated Presentation (originally March 2022) of Implementation of SB44 as Requested by Rural Regional Behavioral Health Policy Board.

E. Board Review of Hearing for Virgilio DeSio, License No. 6200-C. (For Possible Action).

F. Review and Discuss Creation of BESW Strategic Plan July 1, 2023 – June 30, 2026. (For Possible Action).

G. Review and Discuss NRS 41 Legal Representation Handout. (For Discussion Only).

H. Executive Director's Report (Informational).

- i. NASW Presentation Request Denied; and
- ii. Update on Interstate Compacts; and
- iii. Pending Litigation Matter in the United States District Court for the District of Nevada - Case No. 3:20-cv-571-MMD-WG; and
- iv. Contract with Auditor Casey Neilon; and
- v. Future Agenda Items: 1) Address items outlined by previous auditor; 2) Revisiting relinquishments; 3) NRS and NAC changes; (4) Contract for Lobbyist; (5) Financial Management of Board's Reserves (Checking accounts, Savings accounts, Money market deposit accounts, Certificate of deposit accounts; and etcetera; and
- vi. Next Board Meeting is 9 a.m. Wednesday, August 17, 2022.

4. Public Comment.

Note: No vote may be taken upon a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken. (NRS 241.020). Public comment will be limited to three (3) minutes.

5. Adjournment.

Please contact Karen Oppenlander, LISW at (775) 688-2555 for information regarding the meeting. Supporting materials can be accessed electronically at the BESW website: <http://socwork.nv.gov/board/Mtgs/>.

This notice has been posted at the office of the Board of Examiners for Social Workers; the Board's Web Site www.socwork.nv.gov; and the State of Nevada's Public Notice Website <http://notice.nv.gov>.

3A

Meeting Minutes – March 2022



STATE OF NEVADA
BOARD OF EXAMINERS FOR SOCIAL WORKERS
4600 Kietzke Lane, Suite C121, Reno,
Nevada 89502 775-688-2555

BOARD MEETING MINUTES
Wednesday, June 15, 2022

President Esther **Langston** called the Board of Examiners for Social Workers (BESW) meeting to order at 9 A.M. A roll call of Board Members and Guests was conducted. Members **Linda Holland Browne**, **Abigail Klimas**, **Esther Langston**, **Susan Nielsen** (arrived later), **Jacqueline Sanders**, and **Esther Langston** were present; and Guests **Valerie Haskin**, Regional Behavioral Health Coordinator, **Sarah Hunt**, Assistant Dean of Behavioral Health Sciences at the School of Medicine, and **Jamie Ross**, Executive Director, PACT Coalition and co-chair of the SAPTA Advisory Board (arrived later) were present at the June 15, 2022, meeting.

Langston moved to **Agenda Item 2 – Public Comment**. **Oppenlander** indicated that there was no public comment via email. **Langston** made a public comment and said, "We have a letter from the Office of the Governor dated June 15th, 2022," as follows:

Dear Nevada Board of Examiners for Social Workers,

It is my honor to take this opportunity to recognize the Board of Examiners for Social Workers and their 35th year of commitment to the wellbeing of Nevada. Since its creation in 1987, the Nevada Board of Examiners for Social Workers has issued over 10,000 Nevada social work licenses. And as of today, there are more than 4,000 individuals holding current Nevada licenses. In addition, the Board of Examiners for Social Workers has issued 850 licenses for master social workers after legislation was implemented for this new licensing category, July 1st, 2021. Social workers work in all facets of our society to improve human wellbeing and enhance the basic needs of all people, no matter their circumstances. They work hard to empower the people to meet their fullest potential. As Governor of the State of Nevada, I applaud the Nevada Board of Examiners for Social Workers for their steadfast commitment to our State and wish them continued success as they help our communities. Again, I'm grateful for the vision and commitment of the Nevada Board of Examiners for Social Workers. And I am honored to wish you all a Happy 35th Anniversary.

*Sincerely,
Governor Steve Sisolak
State of Nevada*

Continuing to **Item 3A, Board Review and Discussion of Commemorative Statement (Informational)**, **Langston** commented that she had just read that commemorative statement from the Governor into public comment. **Holland Browne** stated, "That was lovely". **Langston** said, "Congratulations on our 35th anniversary ... That means I have been licensed in the State of Nevada for 35 years". She described that she has been a licensed clinical social worker for 50 years because she was an ACSW before there was ever licensing in the State of Nevada. ACSW was a licensing exam that was done by the National Association of Social Workers. You still had to do 3000 hours, with one thousand of the hours in clinical practice. And she was in the first cohort group that had to take the exam to be licensed in 1972 and closed by adding, "I'm proud of that and I still carry my ACSW to this day".

Next, **Langston** moved to **Agenda Item 3B, Review and Discuss the May 18th, 2022, Board Minutes (For Possible Action)** stating that the Members had received the Board minutes in their packet. She entertained a motion regarding these minutes.

Holland Browne motioned to approve the **May 18th, 2022, Board Minutes; Sanders** seconded the motion. **All Board members voted in favor and the minutes were approved as presented.**

Following, **Langston** moved to **Agenda Item 3C, Review and Discuss Updates from Rural Regional Behavioral Health Policy Board (RRBHPB). (For Discussion Only)**. **Oppenlander** introduced Valerie M. C Haskin, MA, MPH, Rural Regional Behavioral Health Coordinator who was prepared to read a letter from RRBHPB to BESW. The letter is related to continuing concerns of RRBHPB regarding the licensure process and identifies potential solutions and this letter had already been presented to the Board President and Executive Director.

Before reading the letter into the record, Haskins spoke briefly about the background of the RRBHPB and about the development of Senate Bill 44. This policy Board represents Elko, Eureka, Humboldt, Lander, Pershing, and White Pine counties. RRBHPB is made up of between 7 to 13 members representing different aspects of the behavioral health system (treatment providers), an appointed legislator, representatives from the criminal justice system, emergency services, hospitals and etcetera. One of the main purposes of policy Boards is to affect state level policies. So, every year each Board writes a letter to the Commission on Behavioral Health stating its concerns, giving updates, submitting an annual report, and making recommendations for the Commission's letter to the Governor so that he can take that into consideration when building out his budget. Also, each legislative session, each policy Board gets a Bill Draft Request (BDR). During the last legislative session, RRBHPB had the opportunity to work with Karen **Oppenlander** as the representative from your Board, as well as four other Boards. This bill looked at licensing, licensure by endorsement, as well as supervision for interns. Within SB44, we were also able to include the component that put the license Master of Social Work (LMSW) into the books for BESW. We did that to help you align with other states to improve the chance of entering an interstate compact. These compacts are what our Board feels is the gold standard for making sure that we have high quality providers that can either be in Nevada or may also practice in other states due to the location of the region we serve and represent. A lot of our community members may go to Salt Lake City or up to Idaho for treatment. Ideally, having some sort of mechanism where providers could also work in Nevada if they were from Idaho or Utah would really be the ideal.

This stems from a main concern that Nevada doesn't have enough providers, particularly LCSWs and that there has been difficulty in the past recruiting LCSWs from out of state who have experience because of the licensure for endorsement process. We have also heard concern from stakeholders regarding the ability of interns in rural, frontier communities to find supervision. When COVID hit and Governor's Declaration 11 was implemented, the behavioral Board processes for licensure by endorsement was expedited and that helped a lot of organizations. Also, with the Governor's emergency declaration, interns could work with completely remote supervision. In summary, with SB44, the RRBHPB goal was to institute or make permanent the licensure by endorsement processes from the emergency declaration as well as simplify and improve the ability for remote supervision for interns.

At this point, Haskins read the letter after mentioning that a similar letter went out to the other behavioral Boards e.g., MFT/ CPC Board, the Board of Psych Examiners and the Drug and Alcohol Board.

*Rural Regional Behavioral Health Policy Board
Serving Elko, Eureka, Humboldt, Lander, Pershing, and White Pine Counties*

May 17, 2022

*Nevada Board of Examiners for Social Workers
C/o: Dr. Esther Langston, Board President; Karen Oppenlander, Executive Director*

Dear Dr. Langston and Ms. Oppenlander,

First, the Rural Regional Behavioral Health Policy Board (Rural RBHPB) would like to thank you for the cooperation and participation of members and staff of the Nevada Board of Examiners for Social Workers during the development and passing of Rural RBHPB's bill for the 2021 Legislative Session, SB44. We are happy that through this bill we were able assist your Board in aligning the licensure offerings of Nevada with that of other states with the addition of the LMSW licensure type.

Thank you again for Karen's presentation to the Rural RBHPB during its March meeting. It was helpful to hear from your Board's Executive Director regarding the "ins and outs" of current licensure processes. However, it is the opinion of the Rural RBHPB that further work remains to be done to align with both the spirit and the letter of SB 44, as well as other areas outside of the bill to ensure that all possible efforts are being made to remediate Nevada's chronic shortage of treatment providers (in this case, we'll be focusing on LCSWs), which has only become more poignant over the course of the COVID-19 pandemic. Ultimately, the Rural RBHPB wanted to use SB 44 to ensure that the components of the Governor's Emergency Directive 011 that allowed for remote supervision and expedited licensure for endorsement were made permanent in an attempt to improve paths to licensure for both experienced and potential professionals. Unfortunately, it does not seem to the Rural RBHPB that this was accomplished.

First, the Rural RBHPB's purpose of mandating that your Board, along with three others, develops and implements regulation to allow for remote supervision of interns was to enable potential clinicians who are living and/or have the opportunity to work in rural and frontier Nevada to gain better access to high-quality supervision. We have heard numerous stories from both individuals who have attempted to complete their clinical hours, as well as treatment organizations which choose to host interns, that the requirements to be approved by your Board for clinical supervisors are very difficult to meet. With few clinicians in the region our Board serves, and even fewer of them willing to take on the responsibilities of supervision, the number of available supervisors does not meet the need of the volume of potential interns. Furthermore, the requirements for administrative supervisors for interns that are able to connect with a clinical professional to offer remote supervision are equally challenging, as the region is

not just at a loss for a sufficient number of LCSWs, but also for all other mental and physical health care provider types. In fact, there are fewer medical professionals with related education/experience or LMFTs, CPCs, or Psychologists in our service area than LCSWs to begin with. The spirit of the remote supervision component of SB 44 was to allow interns to work in a setting where they would have access to their clinical supervisor by phone or other electronic means, but an administrative supervisor would be just that; someone who facilitates human resources activities and administrative tasks, for which professional licensure as a treatment provider is not necessary.

Our Board is under the impression that the purpose of having the role of administrative supervisor filled by a licensed provider is likely related to many concerns, including: safety of the intern and/or the patient during crisis; liability; and enrichment of the clinical internship experience. However, there are other solutions that should be considered in place of requiring another clinician on-site. These solutions might include:

- Requiring that the intern and at least one staff member on the premises have sufficient training in crisis de-escalation. Crisis call lines are largely staffed by non-clinicians who have completed a specific training curriculum that ensures they have the skills necessary to appropriately handle crises as they arise. These trainings may include ASIST, mental health first aid, and others, depending on the organization. While we are certainly not inferring that completion of such training meets the same skill set a licensed professional may have, but rather that the skills necessary to navigate a crisis and know when to call for emergency services may not be unique to licensed professionals.*
- Other licensing Boards have been clear that the administrative or secondary supervisor for clinical interns needs only to be available by phone. If your Board does not already have this mechanism in place, this may provide the flexibility necessary to ensure that interns have access to a clinician in their community, without having additional burdens of finding not only an acceptable supervisor but also a site that can also meet requirements with the supervisor on site.*
- It has come to our attention that there is at least one collaborative being developed between NSHE institutions and licensing Boards being built in this state to build a stronger network of approved clinical supervisors and clinical supervision sites. We ask that you make best efforts to join such a collaborative when the opportunity arises. Participation in such a collaborative will ensure more clinical internship opportunities for soon-to-be providers, as well as a more robust system of approved supervisors.*

The Rural RBHPB has also written a letter to the Joint Interim Committee on Health and Human Services regarding workforce development and professional licensure. This letter outlined the following strategies that affect your Board and others related to behavioral health professionals, and are recommending the following strategies to further address the shortage of LCSWs and other behavioral health providers across the state:

- Allowing for a provisional, "temporary" licensure type for applicants for licensure by endorsement whose applications are currently being processed by your Board. While we recognize that this step has not been taken by your Board and the other three licensing Boards affected by SB 44 due to patient safety concerns, it must also be understood that the Nevada State Board of Nursing allows for provisional licensure. One could argue that while a person who is receiving the services of an LCSW is oftentimes incredibly vulnerable, the services received by nursing patients are often just as vulnerable, and may sometimes be completely unconscious, depending on the setting. Thus, the Rural RBHPB would strongly recommend your Board reconsider this step to allow licensed professionals from other states to begin practicing in Nevada.*
- The Rural RBHPB would like to lend your Board any support necessary in entering into interstate compacts for licensure. Please let us know if there's any way in which we can help facilitate these contracts.*
- The streamlining of all licensure processes through the implementation of a one-stop portal for all of Nevada's occupational licensure. In conversations had with other occupational licensure Boards from other sectors, the use of technology to assist both applicants and Board staff in the licensure process was vital to their success in creating truly efficient licensure processes. Use of ARPA or other large funding streams that have recently become available could be used to build and launch the portal. By having the portal serve all occupational licensure types, the cost of maintenance and upgrades could be spread out across many Boards and would create less of a fiscal burden on any particular entity. This*

would also allow for improved workforce data collection and reporting. Furthermore, this portal would allow for both improved tracking of licensure process time data, while assisting the licensing Boards with rapidly increasing efficiency. This strategy could take the place of a previously suggested "Super Board", which would also ensure your Board and others maintain autonomy.

- Each licensing Board we have connected with, and many agencies hiring professionals have noted lags in background check processes on the part of the Department of Public Safety or other entities through which these checks are made (i.e., the FBI, etc.) being a major contributor to longer times for licensure approval. We encourage the Joint Interim Committee on HHS to work with their colleagues to find a solution that would expedite these processes at the state level.
- Stronger, more formalized professional pipelines across health care and behavioral health should be encouraged, developed, and well-funded. This requires strong partnerships between K-12 education, the NSHE system, the respective occupational licensing Boards, and other organizations to assist in enrichment activities, such as Area Health Education Centers (AHECs). The responsibility for the development of these pipelines does not fall squarely on the shoulders of any one entity and should take a collaborative approach.
- In addition to pipelines, Career and Technical Education (CTE) educational opportunities for Nevada K-12 students should be expanded across the state, particularly relating to health care and behavioral health. The Department of Education should reconsider their requirement of CTE educators being full-time teaching staff at schools hosting these programs, as a background in education and licensure is not currently required, but many professionals are not willing or able to leave their full-time work in their field to work for less money at a school.
- The statutorily capped salaries for state-employed providers across divisions of DHHS should be raised to better match those available at private employment. One stakeholder mentioned the current salaries for state-funded providers in DCFS, DPBH, and other branches sit approximately 20% below the current market rate. The chronic vacancy of these key positions over the last several years could be considered a symptom of this wage gap, which has only been sharpened by the COVID-19 pandemic and today's economic climate.

Again, the Rural RBHPB thanks your Board and Ms. Oppenlander for participation during the last legislative session. Our Board would like to keep working together to address some of our concerns outside of the legislative session, if possible.

Sincerest regards,
Fergus Laughridge
Chair, Rural Regional Behavioral Health Policy Board
Heath Director/Health Officer, Fort McDermitt Tribal Health Center
Fergus.laughridge@fmcdbc.org

Valerie M.C. Haskin, MA, MPH
Rural Regional Behavioral Health Coordinator
vcauhape@thefamilysupportcenter.org

After reading her Board's letter into the BESW record, Haskin stated that she believed that BESW would be hearing from Dr. Sarah Hunt regarding a workforce pipeline model originally from Nebraska. In the RRBHPB's next meeting, they will be voting on whether this is going to be a bill draft request for the next legislative session. The RRBHPB wants to really help stitch together what's happening with the NSHE institutions and be certain that they're best preparing students to move into licensure and then also vice versa. She asked if the Board had questions for her.

Langston asked Members of the Board for their questions, comments. **Klimas** asked **Oppenlander** how long the endorsement process takes from submitting the application to getting it endorsed in Nevada.

Oppenlander reported that this week, BESW had an endorsement that took one hour. But the question is, "How long it takes BESW to go through the endorsement process?" And it depends on when the applicant gives BESW all the necessary information. Related to this, when we are working on applications, we work with the Department of Public Safety. We were told by DPS that for a recent period, DPS had a 45 day wait, just to input the payment information into the system so that DPS could then begin the background process for the Nevada and FBI background reports. This is because they only had one person to input the payment data and the other six positions at DPS were vacant. Since then, they have hired temps and the wait to start the background check process is down to two weeks. This is one example of trying to pull the multiple parts of the application together. So, even when the Boards expedite processes and skip over parts now and revisit certain requirements later to wrap up the applications, there can be difficulties that arise. The entire licensing process is complex and when we talk about collective solutions, we are talking about fixing problems that some people have known about for years. It's not something any of us can instantaneously fix, but we want to begin to share some of the perceived problems today and offer what a collective solution might look like, which is where our next presenter will come into the picture.

Holland Browne said that she has been a clinical supervisor for roughly a dozen LCSWs over the years in Northern Nevada. One of the frustrations in the rural areas is that some of those providers literally are all there is in that community. One process that worked successfully was to provide supervision by going to the rural community and spending four hours or a day with a clinician with some prearrangements. For example, she'd sit in on a session with a client that had signed a release or participated in a group review of records. She would do this in chunks of time and then was available by phone to intermittently answer questions. The flip side is that rural providers are often in a peculiar position ethically as they must contend with dual relationships in small communities; and **Holland Browne** doesn't think people are prepared for that. Also, she hears complaints about how long it takes to get things done at the Board to get paperwork pushed through, to get approval for licensure. I don't think anybody has any idea how sophisticated the process is and that the Board is frequently at the mercy of other agencies and institutions submitting things in a timely fashion. Those are three things that I think we need to look at to provide more support to people in the rural areas. And we will need to think outside of the box. What we want are competent people available out in each community even when some of these communities are a hundred miles apart.

Langston said that this has been an issue in the State of Nevada for many years. This is my 50th year in social work in education, so this has been an ongoing issue. Maybe with technology, we can begin to look at some creative solutions and how we solve problems, stay within our ethical guidelines, as well as provide the quality of supervision that is needed in those communities. And, and we will not solve this in a day. But at least we can begin to think about this creatively, how we can do some things to serve those communities. And, at the early onset of the Board, the Board used to travel around the state for their meetings and they would meet in these little communities and people from Reno and especially Las Vegas were always surprised at the distance; and about the services that could or could not be offered; and that the dual relationships are 'real'.

Haskin said that she sees that technology comes into play with the licensure by endorsement and people not getting their documents in. What they've seen with various licensing Boards is that there are completely different processes. Some Boards are communicating by fax and some of them are submitting paper copies. She suggested an online portal that had a checklist when the paperwork is uploaded, then applicants could see where they are at in their process to help improve communications.

At this time, **Langston** asked for input from Jamie Ross about a suggestion that Ross had put into the 'chat' function of the online Zoom meeting. Ross stated that she sits on the executive committee of the Nevada certification Board for peer recovery support specialists. They use an online portal that is not very expensive, and it is easy to upload everything and has saved more than it costs. And that she would be able to make connections to the CERTEMY organization.

Klimas asked if the main problems are that background checks take a lot of time, and that there is confusion with applicants following along with where they are at in the application process. **Oppenlander** agreed that these are both issues that must be discussed further. Moving to a solution for these and related issues aren't addressed easily. For example, our Board will need to release a new RFP for software provision soon. This might be an opportune time to look at CERTEMY as discussed by Ross earlier. Or stay with the company that we've invested time and money with that has helped BESW to digitize its process (moving from paper to the computer to the clouds). On the other hand, she shared that a bill draft request may be coming forward for a Composite Board again. This may influence a 'solution' that goes down an entirely different statewide path that may be influenced by another entity e.g., Business and Industry (as presented during the last legislative session). Furthermore, in her Executive Director's report, she would be updating the Board on the Interstate Compact that BESW is invited to be part of. These statewide, national, and/ or independent Board visions/ ideas/ solutions may very well influence how our portal selection would be handled in the future. All these ideas are on the table right now. Furthermore, the State of Nevada is aware of these bigger issues and has put into effect a new review process for future software vendor selections requiring an extra level of review by EITS (Nevada's Enterprise IT System).

Also, **Sanders** brought up another national option after reviewing the letter and listening. It seems like the some of the issues that have been referred to may lead some to explore the idea of a composite type of Board. However, **Sanders** hears concerns that may be easily remedied by looking to ASWB to see how they may be able to help address BESW needs and be a resource to minimize unnecessary expense. She saw that the policy board letter refers to licensure, flexibility, remote supervision, and provisional licensing. I understand that we do have provisional licensing; and maybe we can take a closer look at it so that we can better address people's needs. We're already in a new environment in remote supervision. She realized that Reno had it in place for someone that she had I just trained a few weeks ago; and that sort of thing is new and may help to expand the number of LMSW or LCSW licenses that we offer.

Also, **Sanders** added, it may boil down to whether someone gives us the information that is required. It may be good to look at how we can have some additional notices sent out automatically by the database (if affordable) to reduce phone calls by letting individuals know that information has been received by the Board.

Sanders continued to speak in favor of enhancements so that others would not issue statements that could justify a composite board. While we can look at a composite board later, right now we want to look at how we can get people to pay to be licensed in the State of Nevada, and to be able to work from outside of the state. We have removed quite a few restrictions already as we were compliant with the Governor's mandate throughout the COVID epidemic. She added that the Board is aware that some did not renew after the directive was lifted. We can research this to understand how to reduce concerns using simple measures to remove barriers (e.g., reviewing provisional license option).

Next, **Langston** asked **Oppenlander** to introduce Dr. Sarah Hunt from UNLV. Dr. Hunt is the Assistant Dean of Behavioral Health Sciences at the Kerkorian School of Medicine. She also directs the UNLV Mental and Behavioral Health Training Coalition. As a psychologist, she is licensed by the Board of Psychological Examiners in Nevada. Next, Dr. Hunt launched into a presentation about mental health

workforce development in the State of Nevada. She started by sharing about significant shortages in all mental health professions across the state. Currently 95% of Nevadans live in a mental health professional shortage area that includes all of Clark County and the rural areas. The Reno area seems to be doing a bit better with regards to the number of mental health professionals per population.

Dr. Hunt presented slides showing that Nevada ranks 51st in mental health in the U.S. overall. That basically boils down to the facts that the high prevalence rates of mental health issues, substance use issues and low access to care, lands Nevada in that 51st spot. She then compared Nevada to the top five states, which are Massachusetts, New Jersey, Pennsylvania, Connecticut, and Vermont. She explained how the charts compare the prevalence of mental illness per population, compared to other states ranking for access to care. She went on to discuss the mental health workforce availability ratio in other states compared to Nevada. And went on to highlight the significant shortages we have in numbers of Nevada's school based mental health professionals including for school social workers. We are not the only state that struggles with a shortage of mental health professionals. And what that does is tend to make us compete for licensed mental health professionals to come to our state. And that is certainly one approach to workforce development is to recruit from other states. But another piece, is that we can focus on how we can grow our own mental health workforce. She delved into a Nebraska model that overhauled how they provide mental healthcare through a piece of 2009 legislature that recognized the importance of focusing on recruitment and retention of behavioral health professionals. It specifically called out that there was an insufficient number of behavioral health professionals in the workforce. Dr. Hunt discussed details of the University of Nebraska and Creighton University initiative. One of the things they wanted to do for many of their mental health students was to really expand the opportunity for them to have practicum sites or internship sites in integrated healthcare settings. So going into those primary care settings, especially in the rural/ frontier areas and underserved urban areas and embed mental health services into those primary care clinics. And they said for all these great efforts, they were going to come back to their legislators and give them a report every two years showing their outcomes. The model really focuses on three pieces. One is to engage and recruit. So, they spent a lot of resources building what they call the ambassador program. And that essentially means they go out to the K-12 system mainly focusing on high school students across Nebraska and have provided education about mental health topics. And then at the end of the teaching, they tacked on a bit about how they could turn this into a career if the students really liked learning about this. Out of those trainings for high school students, they added a mentorship piece. So those students would receive this training and identify with a social worker, psychiatrist, marriage and family therapist, and then the student would be paired with a mentor. And importantly, they tried to make that mentor a licensed mental health professional that was in the same geographic location, as much as they could, for that student. As that high school student went into the higher ed system in Nebraska, they had a touch point back to their community. Somebody who was there to support them while they were going to college in general, but especially learning about mental health issues. And hopefully they would be drawn back to the community for that pre-licensure internship setting, and then want to set up shop there once they were licensed.

They also recognized that they needed to expand the training that was already provided in the higher ed system. So that goes back to funding more of those internships, residencies, practicum placements that Dr. Hunt talked about. And they also really needed to focus on their already existing mental health workforce and how to retain them in Nebraska. And so that takes the shape of doing a lot of continuing education conferences, trainings across the state, and they also expanded their efforts to focus on provider wellness. Dr. Hunt discussed the funding sources that support the work in Nebraska. Outcomes have included the ambassador program connecting with more than 5,000 high school and college

students about careers in mental health. And they grew the University of Nebraska/ Creighton University partnership out to include the other state colleges, community colleges, integrated practicum sites, with training sites in behavioral mental primary care clinics across the state with 25 of those in rural counties. She also talked about a Job Board that was created for any mental health positions across the State of Nebraska that has had over 300,000 hits. They've had a 32% increase in the number of psychiatric prescribers in Nebraska (psychiatrist, psychiatric nurse practitioners), a 39% increase among psychologists and mental health therapists which include LCSW's, marriage and family therapists, and CPCs. Now because of this great work, Illinois decided to model something similar there. Their timeline and funding process is a little different and they are combining funds from their State Department of Health and Human Services and their Board of Higher Education to the tune of \$6 million to start a Center that they are hoping to open in the beginning of 2023. Dr. Hunt also has learned that Kansas is exploring the model. She said there's a lot of things that would make sense for Nevada to think about e.g., how we could create our own mental health workforce education network. So, if we step back and think about this whole pipeline, we could go out, promote mental health careers to K-12, and to adults who are looking for a career change who are unemployed. We give them the information about mental health careers. We get them into the Nevada system of higher education. We get them through graduation, they complete their internship hours for licensure. Then you all license them. Dr. Hunt went on to discuss several related possibilities that would connect many stakeholders and then offered to answer questions.

Klimas thanked Dr. Hunt for her presentation. She recalled a recent conversation about the Board's strategic plan for the next few years; and she could understand where the Board might look further into growth and retention of social workers. What's the next step for this process that Dr. Hunt has described? Hunt stated that she has presented the model to all the regional behavioral health policy Boards in hopes that it might spark some interest for them as a bill draft request. And as Valerie stated, the Rural Regional Behavioral Health Policy Board felt a strong connection to this and may vote to accept this as their bill draft request in their meeting next week. So then after that we'll pull together a work group to put together the language of what that BDR would look like. But I think in general, if it's something that your Board feels strongly about the Board could support the effort whether it's writing a letter or anything like that. I think those are the things that after this work group gets going, we'll need to find our champions across the state.

Langston thanked Dr. Hunt for present the model and giving the Board the data. As BESW moves forward in our discussions, we have some foundational information on which to build. Dr. Hunt appreciated time with the Board and offered to speak with anyone that has thoughts, comments, feedback.

Langston next moved to **Agenda Item 3D - Board Review of Hearing for Virgilio DeSio, License No. 6200-C. (For Possible Action)**. For the record, **Harry Ward**, Deputy Attorney General, stated that we are trying to hammer out a settlement or a consent decree in this matter. And thus, **Ward** requested that it be placed on next month's agenda. **Langston** agreed to move this item to next month's agenda.

Langston then followed this with **Agenda Item 3E Review and Discuss Budget, July 1, 2022 – June 30, 2023. (For Possible Action)**. **Oppenlander** shared the budget which remains generally the same as covered in May when it was brought to the Board as a draft budget. It covers the new EITS (Enterprise IT System) SLA (service level agreement) and this we have included those changes into this budget; also discussed were wage and benefits increases for two staff members after a review of their State of Nevada job classifications, with one employee moving from a pay grade 25 to pay grade 27, and the

other employee moving from a pay grade 27 to a pay grade 29; funding for the potential adoption of a policy to pay Board members salary / per diem if that policy is approved later in this agenda; we've included increases in postage due to new rates at USPS; and removed a small COVID line item. After walking through several items, she asked for a motion to approve the budget.

Linda Holland Browne Moved to Accept the Budget as Presented; Motion was Seconded by Jacqueline Sanders. In a Roll Call Vote, All Board Members Approved, Motion Passed Unanimously.

Langston moved to **Agenda Item 3F, Review and Discuss Board Reserves Draft Policy. (For Possible Action).** **Oppenlander** reminded the Board of a simple Board Reserves policy included with Loretta Pontoon's presentation materials in May 2022. In this month's Board Packet, she provided the current 2019 Board Reserves Policy (that was a response to a legislature mandate); and a copy of the proposed 2022 Board Reserves Policy that she chose to recommend today. The recommended policy was adapted from the Accountancy Board. Their policy seemed to provide a reasonable explanation of the basis for their setting aside 12 months of reserves. Their policy also has additional funds set aside for other purposes. If you further into it, they chose to add a risk management portion for another year of 70% of a year's operating expenses, as well as a technology part for 30%. So, they decided to set aside 24 months for reserves. There were some good reasons why they did this, and for **Oppenlander** one of the biggest concerns could be in risk management especially as it might pertain to compliance unit issues disciplinary cases.

Altogether, it sets aside two years of operating funds. **Oppenlander** chose the Accountancy Board Policy model mainly as they have expertise in this; and their policy is very thoroughly laid out. Their policy also contains a potential 'review' procedure that would take place when BESW budgets next Spring (2023). It would give the Board an opportunity to see how far they can get towards a 24-month operating reserves goal this upcoming year. This "review" suggestion gives the Board a target date that could also be an opportunity for the Board to update this policy if it chooses to.

She also decided to provide the most thorough policy for 2 main reasons. (1) She recalled the 2021 legislative session when the State was behind authoring a bill draft that said BESW (along with other Boards and Commissions) would be handing over 5% of net income every year until Business and Industry had set aside enough money to build a Composite Board. While this bill didn't get passed in 2021, she has heard that there is another bill of this type that will be created for the upcoming session. And (2) then she remembered the Governor's Directive in 2020 when he determined that our agency (along with others) would provide free opportunities for licensees from other states to get a free Nevada endorsed license to increase the numbers of those available to help Nevada during the pandemic. After two years and a loss of potential income combined with a bigger workload for staff, these Directives were recently lifted. We have ballparked the loss of income to the Board at approximately \$90K per year for 2 years for a total of \$180K.

Langston asked a question about risk management and the Board's insurance. The Board's insurance is established for various purposes including litigation against the Board. After a brief discussion, **Sanders** summarized her understanding that while the insurance would provide certain protections, there would be funds set aside for other things that may not be covered by the insurance.

Oppenlander spoke about how many complaints might be filed against licensees. In reviewing backlogged cases over her past four years (cases that dated from 2009 through 2017), she has arrived at certain conclusions. The Board wants to make sure that it has sufficient financial wherewithal to investigate and prosecute complaints submitted to the Board from the public and otherwise brought to the Board's attention. The Board does not want to be in the position of not being able to investigate and prosecute complaints against licensees, because it does not have the enough money to pay investigative and or legal expenses as this would be a disservice to the public. She recalled that in recent years, a board was shut down by the State of Nevada's Sunset Committee because it didn't have enough money to repay the Attorney General's Office for legal expenses it had incurred. This was a matter that would not be covered by an insurance policy. On the other hand, it appears to her that the Board may have had to make particular prosecutorial decisions as it wasn't in a strong enough financial position to pursue some cases as fully as it may have wanted to (not enough time for limited staff, investigators to pursue).

Deputy Attorney General **Ward** gave another example. Let's say, for example, the Board is named in a lawsuit and other Boards have been in my experience, and individuals or boards have been sued in federal court for various reasons, and they name the Board and then they name the individual, and Board members as individual defendants. The Attorney General's Office by statute will provide legal representation. However, if it's not a general fund client (like this Board), the Board is billed on a billable hour that is negotiated for all boards. What Executive Director **Oppenlander** is saying is that the Legislature wants the boards to set aside money if this Board is sued and needs a cushion so that it can provide defense and pay the AGs office. Also, the Board would want the ability to prosecute a licensee and not be held back because they don't have the financial funds to pay the deputy attorney general to prosecute the case. In a nutshell, I think that's where this Board is going with the idea of having reserves and having a budget and dealing with individual cases. In another recent situation, a board was sued in federal court, and that case consumed almost all that board's fiscal legal budget last year and they were struggling. Fortunately, they did have some reserves as any single case can really consume a lot of a legal budget. Also, he added that this Board has been doing a really good job on deciding which cases to pursue and he commended Ms. **Oppenlander** regarding each case that we are prosecuting.

Holland Browne commented that there are difficult uncertainties that we face as a Board, as individuals, as practitioners, and there is no country in the world that is as litigious as the United States. I would be very much in favor of us having a reserve for this purpose.

Abigail Klimas made a Motion to Approve the Board Reserve Policy as Presented; Motion was seconded by Linda Holland Browne. A Vote was Taken and All Board Members Voted in Favor of the Motion which Passed Unanimously.

Langston went to **Agenda Item 3G - Board Compensation Draft Policy. (For Possible Action).** **Oppenlander** reintroduced a board compensation policy draft that was included in the prior Board meeting's materials. She took that Board of Massage Therapy policy and substituted the Board of Examiners for Social Workers. While not an expert, it seemed to her that the Board could take this policy and procedures, and work with it this year. If wanted, the Board can revise it. The other thing that she reflected on is that there were basically three positions last month. When the Board discussed Board Compensation, one position was opposed to the concept; and another one was a favorable, positive response to the concept; and then there was a neutral position expressed. As I was taking the

minutes for that meeting it occurred to me that everyone might reflect on the various ideas shared and may have changed after thinking through this. This policy that I've brought forward doesn't address the different perspectives that were shared at the last Board meeting, I was asked to bring forward a policy and I'm bringing that forward to the best of my ability. With that, I would ask for a motion to approve this. And then as part of our strategic plan, we could review how this works out and see if it's a good policy.

Holland Browne asked if the approved budget provided funding for the adoption of this policy. **Oppenlander** replied that staff included in the budget and that staff estimated numbers to cover salary and per diem travel in the amount of \$10,000 knowing that if this wasn't spent entirely, then the balance would go to help fund the reserves; or if the line item is overspent, then it will lower the total reserves collected. This was followed by a brief discussion of other key points in the policy.

Jacqueline Sanders **Motioned to Approve the Board Compensation Policy as Presented; Motion was Seconded by Abigail Klimas. A Roll Call Vote was Taken, Klimas – Aye, Sanders – Aye, Nielsen – Aye, Holland Browne – Aye, Langston – Aye. The Motion was Passed Unanimously.**

Langston went to **Agenda Item 3H - Review and Discussion of the Strategic Plan for 2023. (For Possible Action).** **Oppenlander** indicated that this was the same strategic plan brought forward to the Board last month with some minor changes made to the language in Action 3A.4.2 under Goal 3A and Action 5B.1.1 under Goal 5B. These changes were made based on the feedback that was received from the Board at the May meeting. She asked for a motion to approve.

Abigail Klimas **made a Motion to Approve the BESW Strategic Plan for 2022 – 2023; Linda Holland Browne** **Seconded the Motion. A Vote was Taken, and the Motion was Passed Unanimously.**

Langston moved forward to **Agenda Item 3I – Review and Discussion of Upcoming NASW Presentation. (For Possible Action).** **Langston** stated that she had sent a request to the Executive Director advising that BESW have a presentation at the upcoming NASW conference. And she suggested that since a conference event is for the Nevada and North Dakota Chapters that she co-present with her counterpart. She said that we hear that BESW licensees have all kind of questions about what's going on with the Board. At prior conferences, there was always a presentation at the annual conference from the Nevada Board of Directors for Social Workers and **Langston** asked **Oppenlander** about the status of her suggestion to the conference committee. **Oppenlander** stated that the conference was brought to her attention both by Member **Sanders** and President **Langston**. What she realized was that there are some great topics that Board members and staff can present at NASW conferences, both in Nevada and nationally. She asked for an extension from the conference staff and did not get a spot on the agenda. In fact, it's been 2 years since **Oppenlander** last presented (June 2020). The feedback was positive because the attendees wanted to know about what the Board is accomplishing. What held her up on submitting for this conference presentation opportunity was that it was a multi-state conference, and she didn't have a prepared presentation on a topic that was appropriate for two states. Although we did come up with a topic, it wasn't approved. **Oppenlander** shared that the Board could decide on several preselected topics for the future as part of its strategic plan in communications. In the meantime, **Langston** determined that she would resend the request to NASW and hope that it will be granted.

Langston went on to **Agenda Item 3J - Executive Director's Report (Informational)**. **Oppenlander** started with an update on the June 8, 2022, FBI Audit. The FBI Auditor from Virginia met with the Board Executive Director and Deputy Director; The Audit lasted approximately 2 hours; He gave us an overview and then went through a questionnaire and reviewed 20 of our BESW applicant files; He indicated that if he found any compliance issues that he would file a report within 60-90 days; and if there were compliance issues then the Department of Public Safety would work with BESW to resolve the issues. At the end of the 2 hours, the Auditor concluded our meeting by stating that BESW has NO compliance issues, everything looks great, our records look great, and that we have an outstanding process.

Next, she gave an update on Pending Litigation Matter in the United States District Court for the District of Nevada - Case No. 3:20-cv-571-MMD-WG; and Judge Traum has not issued any additional orders in this matter. At this time, DAG Bhalla is still awaiting a decision on the most recent motion that he and his colleague have submitted to dismiss.

Then, she updated the Board about welcoming Nevada licensee, Dr. Stacey Harding Chandler LCSW as the incoming CEO for the Association of Social Work Boards.

She reminded Members that she requested for them to contact her to discuss submissions of names for open Board positions. At this time, Member **Nielsen** continues to voluntarily continue in her role while she has fulfilled her agreed to term some time ago. Last Thursday on June 9, the Sunset Committee has determined that the onus for recruiting new Board members will now be placed on the Boards. They want Board Members to actively help the Governor's Office to recruit potential new Board members. In our case, there is an open Board position would be for a public member. Also, if someone applies, it is helpful for the Governor's Office to receive letters of support that come from Board members to support the application. In terms of having a northern Board Member that could sign checks (in addition to signers **Oppenlander** and **Holland Browne**) it was determined that if the Board needed a second signature when they are unavailable, BESW could get the second signature by overnighting checks to Las Vegas and then returning the checks overnight to the selected person.

Following, **Oppenlander** updated the Board about the status of the Interstate Licensure Compacts. The development of an Interstate Compact for social work licensure has been underway for nearly a year with draft legislation expected to be released for stakeholder review and public comments in July 2022. The goal is to have model legislation available to the states, including Nevada, for passage during the 2023 legislative session(s). This changes our need for a lobbyist that can assist BESW to carry a bill. The development of a social work licensure compact is vital to ensuring license portability and interstate and interstate practice, especially as the landscape of practice continues to evolve, including the expansion of telehealth and the reexamination of how and where social workers engage with clients during the ongoing pandemic and beyond. The social work compact development process has been led by the Council of State Governments with funding from the Department of Defense. The Association of Social Work Boards is staffing the effort. Also at the table are NASW, and more.

She discussed Future Agenda Items: 1) Address items outlined by auditor; 2) Might revisit the topic of relinquishments; 3) NRS and NAC changes; (4) Contracts e.g., Lobbyist, Audit; 5) continue today's topic regarding licensure concerns brought forward by a policy board; and 6) starting next month we will start creating a new three-year strategic plan. She asked the Board for additional items. Hearing none, she reminded everyone that the next Board Meeting is 9 a.m. Wednesday, July 20, 2022. **Langston** mentioned a training that she will be attending on July 20th and lined up an alternate person to chair the upcoming Board meeting; **Holland Browne** indicated her availability if necessary.

Agenda Item 4 – Public Comment, Langston checked to see if there was any public comment and **Oppenlander** indicated that there was not any online public comment. As **Langston** found there was no other public comment via the Zoom meeting platform, she asked for a motion to adjourn.

Abigail Klimas made a Motion to Adjourn, seconded by Jacqueline Sanders. And the Motion to Adjourn was Passed Unanimously.

Langston adjourned the meeting at 11:26 a.m.

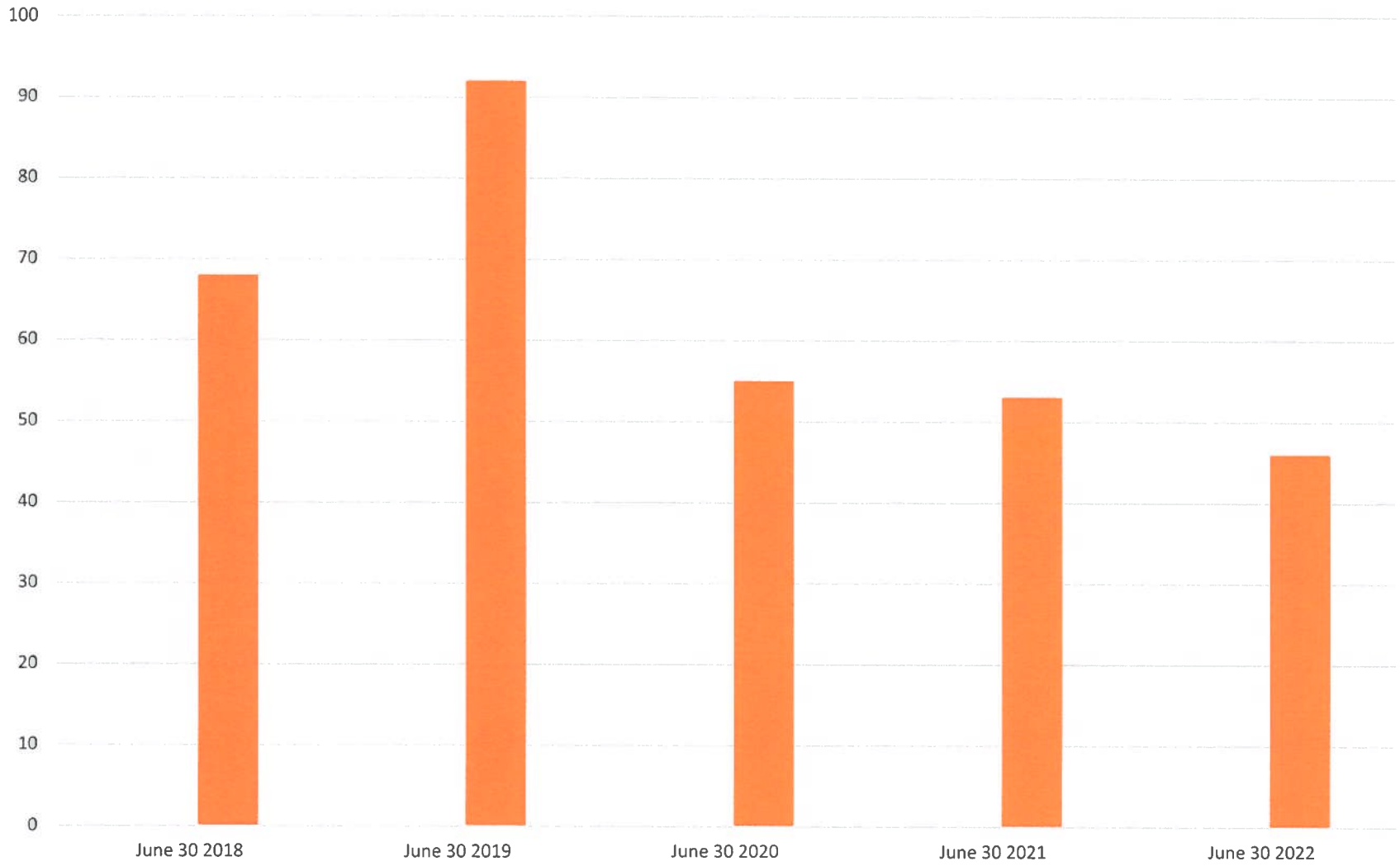
Respectfully Submitted by Karen Oppenlander, Executive Director.

3B

Fiscal Year End Financial Statistics – July 1, 2021 through June
30, 2022

Fiscal Year End Statistics – July 1, 2021 through June 30, 2022

Compliance Unit Back Log



**Licensure Statistics for Social Workers
July 2021 through June 2022**

| | LCSW | LCSW App | LISW | LISW App | LSW | LSWP | LSW App | LMSW | LMSWP | LMSW App | LASW | |
|-----------------------------|------|----------|------|----------|------|------|---------|------|-------|----------|------|------|
| JULY, AUG., SEPT. | 1642 | 118 | 13 | 0 | 1401 | 102 | 13 | 715 | 28 | 52 | 47 | 3948 |
| OCT., NOV., DEC. | 1691 | 85 | 12 | 0 | 1314 | 77 | 20 | 854 | 24 | 59 | 46 | 4018 |
| JAN., FEB., MAR. | 1759 | 101 | 12 | 0 | 1214 | 49 | 18 | 967 | 19 | 133 | 46 | 4066 |
| APR., MAY, JUNE | 1822 | 138 | 12 | 0 | 1174 | 8 | 32 | 1066 | 13 | 112 | 43 | 4138 |
| Licenses via Endorsement | 178 | | | | 2 | | | 49 | | | | 229 |

3D

**“Understanding the Challenges of Significant Shortage in all
Mental Health Professions” Summary Report**

**Letter from Substance Abuse Prevention and Treatment Agency
(SAPTA) Advisory Board**

**Updated Presentation of Implementation of SB 44 as Requested
by Rural Regional Behavioral Health Policy Board**

I. Understanding the Challenge: There are significant shortages in all mental health professions across the State of Nevada.

a. Mental Health Providers Ratios

- i. Overall: Mental Health Workforce Availability in Nevada is 420:1 (professionals per population)
- ii. Top US Performers 250:1 (90th percentile).
- iii. 95% of Nevadans live in a mental health professional shortage area.

II. Brainstorming Solutions to Challenge

a. Mental Health Workforce Development in the State of Nevada

- i. On June 15, 2022, a presentation was made to BESW by Dr. Sarah Hunt from UNLV, Assistant Dean of Behavioral Health Sciences at the Kerkorian School of Medicine, Director of UNLV Mental and Behavioral Health Training Coalition.
- ii. Presentation focused on how Nevada can grow its own mental health workforce. Focus was on expanding opportunities for mental health students to have practicum sites or internship sites in integrated healthcare settings; development of a mentor/ ambassador process (proven to work in Nebraska) to attract and then help interested students from K-12 through college; intent is to increase the mental health workforce in Nevada; Encourage graduating students to be licensed in Nevada and work in primary care settings, providing mental health services especially in the rural/ frontier areas and underserved urban areas.
- iii. The following week, the Rural Regional Behavioral Health Policy Board (RRBHPB) agreed to craft a Bill Draft Request (BDR) using the mental health workforce development model briefly described above.

b. Interstate Compact

- i. The Council of State Governments (CSG) is partnering with Department of Defense (DoD) and the Association of Social Work Boards (ASWB) to support the mobility of licensed social workers through the development of a new interstate compact. Current Status is that an initial draft of the social work compact is under development. CSG anticipates that a preliminary draft of the compact will be available for public comment and review in July of 2022.
- ii. An interstate compact is an initiative to create a legal contract among states / territories enabling social workers to practice in each other's jurisdiction, once practitioners demonstrate that they meet the compact requirements.
- iii. CSG will host regular webinars and other public review sessions to provide information, review the draft and solicit feedback.
- iv. Goal is to complete the editing process in fall of 2022 to make the finalized model legislation available to states for their 2023 legislative sessions. Typically, seven to 10 states, must pass the enabling legislation. State legislatures must enact compact legislation to become a member state of a compact.
- v. RRBHPB has indicated that the Interstate Compact is the gold standard for making sure that we have high quality providers that can either be in Nevada or may also practice in other states. This is ideal due to the rural region they serve and represent. RRBHPB has offered to lend BESW any support necessary in entering

interstate compacts for licensure.

c. Other Ideas to Address Challenge

- i. RRBHPB concerns were shared with BESW after its presentation to the Commission on Behavioral Health as they make recommendations for the Commission's letter to the Governor so that he can take this into consideration when building out his budget; And information on this topic was presented to the Joint Interim Committee on Health and Human Services regarding workforce development and professional licensure. A similar letter went out to the other behavioral Boards e.g., MFT/ CPC Board, the Board of Psych Examiners and the Drug and Alcohol Board.
 1. Licensure by endorsement: RRBHPB intent to make permanent the licensure by endorsement processes from Governor's emergency declaration.
 2. Improve ability of interns in rural, frontier communities to find supervision.
 - a. Simplify e.g., with the Governor's emergency declaration, as all interns could work with completely remote supervision.
 3. BESW was thanked for the presentation to the Rural RBHPB during its March 2022 meeting finding it helpful to hear about the "ins and outs" of current licensure processes.
 4. RRBHPB indicates that further work remains to be done to align with both the spirit and the letter of SB 44, as well as other areas outside of the bill to ensure that all possible efforts are being made to remediate Nevada's chronic shortage of treatment providers (in this case, primarily focusing on LCSWs).
 5. RRBHPB wanted to use SB 44 to ensure that the components of the Governor's emergency directive that allowed for remote supervision and expedited licensure for endorsement were made permanent to improve paths to licensure for both experienced and potential professionals. RRBHPB does not believe this was accomplished.
 - a. They have heard stories from both individuals who have attempted to complete their clinical hours, as well as treatment organizations which choose to host interns, that the requirements for clinical supervisors are very difficult to meet.
 - b. With few clinicians in the region, and even fewer of them willing to take on the responsibilities of supervision, the number of available supervisors does not meet the volume of potential interns.
 - c. Furthermore, the requirements for administrative supervisors for interns that can connect with a clinical professional to offer remote supervision are equally challenging, as the region is not just at a loss for enough LCSWs, but also for all other mental and physical health care provider types.
 - d. The RRBHPB perspective was that the spirit of the remote supervision component of SB 44 was to allow interns to work in a setting where they would have access to their clinical

supervisor by phone or other electronic means, but an administrative supervisor would be just that; someone who facilitates human resources activities and administrative tasks, for which professional licensure as a treatment provider is not necessary.

- e. RRBHPB is under the impression that the purpose of having the role of administrative supervisor filled by a licensed provider is likely related to many concerns, including safety of the intern and/ or the patient during crisis; liability; and enrichment of the clinical internship experience. However, there are other solutions that should be considered in place of requiring another clinician on-site. These solutions might include:
 - i. Requiring that the intern and at least one staff member on the premises have sufficient training in crisis de-escalation.
 - ii. Other licensing boards have been clear that the administrative or secondary supervisor for clinical interns needs only to be available by phone. (Perhaps RRBHPB has misunderstood the BESW terminology in 641B that is different than other boards).
 - iii. Requests for BESW to participate in a collaborative being developed between NSHE institutions and licensing Boards to build a stronger network of approved clinical supervisors and clinical supervision sites.
 6. Allow for a provisional, "temporary" licensure type for applicants for licensure by endorsement whose applications are currently being processed by BESW. While RRBHPB recognized that this step has not been taken by BESW and the other three licensing Boards affected by SB4 due to patient safety concerns, it must also be understood that the Nevada State Board of Nursing allows for provisional licensure.
 7. Recommends the streamlining of all licensure processes through the implementation of a one-stop portal for all of Nevada's occupational licensure. And later Haskins added: An online portal could have a checklist when the paperwork is uploaded, then applicants could see where they are at in their process to help improve communications.
- ii. Substance Abuse Prevention and Treatment Agency (SAPTA) Advisory Board concerns (under authority of Administrator Whitley):
 1. Understanding that workforce development is not inherently in the purview of regulatory boards, and we also know that work around licensure, policy, and regulation are multifaceted.
 2. Nevada continues to rank 51st in the nation for Mental Health, according to Mental Health America.
 3. This cannot be a problem we collectively continue to neglect. We all should require action in the areas we have oversight or influence on. The areas of concern generally fall into one of five categories, listed below:
 - a. A better workforce pipeline from high school and higher education, through job placement

- b. Increased availability of Internships and practicums
 - c. Supervision tailored toward workforce development
 - d. More efficiency and smoother transitions in certifications
 - e. Increased exposure to the field of behavioral health to increase interest in the field across the lifespan.
 4. SAPTA requests for BESW to lean on the expertise of the stakeholders assembled at the SAPTA Advisory Board to help systemically address the gaps and shortages in our behavioral health workforce to create a safer and healthier Nevada.
- iii. Linda Holland Browne (BESW Board member)
 1. Stated that one process that worked successfully was to provide supervision by going to the rural community and spending four hours or a day with a clinician with some prearrangements. For example, she'd sit in on a session with a client that had signed a release or participated in a group review of records. She would do this in chunks of time and then was available by phone to intermittently answer questions.
 2. She also discussed that rural providers are often in a peculiar position ethically as they must contend with dual relationships in small communities; and she doesn't think that people are prepared for that.
 3. Also, she hears complaints about how long it takes to get things done at the Board, to get paperwork pushed through, to get approval for licensure. She doesn't think anybody has any idea how sophisticated the process is and that the Board is frequently at the mercy of other agencies and institutions submitting things in a timely fashion.
- iv. Jamie Ross suggested using CERTEMYs online portal. This is based on her being on the executive committee of the Nevada certification Board for peer recovery support specialists that uses this online portal.
- v. Karen Oppenlander outlined how the use of a 'portal'/ database may be influenced in the future and that the Board will need to discuss this further.
 1. BESW will need to release a new RFP for software provision soon creating an opportune time to look at all software providers including the current company (Albertsons/ Big Picture Software) that BESW has invested time and money with that has helped BESW to digitize its process (moving from paper to the computer to the clouds). And the current company has helped BESW to already establish a licensee checklist on the online portal.
 2. Another BDR may be introduced for a Composite Board again. An 'online portal' may be influenced by another entity e.g., Business and Industry (as was presented during the 2021 legislative session).
 3. Nevada may move forward as part of the Interstate Compact for Social Workers, and this may influence the 'portal' / database discussion.
 4. The State of Nevada has is aware of these bigger issues and has put into effect a new review process for future software vendor selections requiring an extra level of review by EITS (Nevada's Enterprise IT System).
 5. Sanders brought up another national option vs moving to a composite type of Board. BESW may want to look to ASWB to see how they may be

able to help address BESW needs and be a resource to minimize unnecessary expense.

vi. Jacqueline Sanders (BESW Board member)

1. Sanders suggested revisiting provisional licensing to take a closer look at it so that we better address people's needs.
2. Sanders shared that BESW is already in a new environment in remote supervision. She realized that Reno had it in place for someone that she had trained a few weeks ago; and that sort of thing is new and may help to expand the number of LMSW or LCSW licenses that we offer.
3. Sanders added that it may be good to see if we can send out additional notices automatically via the database (if affordable) to reduce incoming phone calls by letting individuals know that information has been received by the Board.
4. Sanders spoke in favor of enhancements so that others would not issue statements that could justify a composite board at this point. While BESW can look at a composite board later, right now we want to look at how we can get people to pay to be licensed in the State of Nevada, and to be able to work from outside of the state.
5. She emphasized that BESW has removed quite a few restrictions already as we were compliant with the Governor's mandate throughout the COVID epidemic. She added that the Board is aware that some did not renew after the directive was lifted. We can research this to better understand how to reduce concerns using simple measures to remove barriers (e.g., reviewing provisional license option).

III. Picking the Best Strategy for BESW Support

- a. Nevada's 2022 County Health Rankings and Roadmaps: To learn more about what works to improve the ratio of population to mental health providers, please link to:
<https://www.countyhealthrankings.org/app/nevada/2022/measure/factors/62/policies>
 - i. Some of the 34 suggested strategies include topics referred to in previous Board meetings and during recent conversations with Board staff:
 1. Higher education financial incentives for health professionals serving underserved areas
 2. Rural training in medical education
 3. Support of Federally qualified health centers (FQHCs)
 4. Support of Medical homes
 5. Tele-mental health services.
- b. And please see Roman Numeral "II" above.

IV. Deploying the 'Solution'.

To whom it may concern:

We are writing on behalf of the SAPTA (Substance Abuse Prevention and Treatment Agency) Advisory Board. We advise the Division of Public and Behavioral Health concerning services for treatment and prevention of substance use under authority of Administrator Whitley.

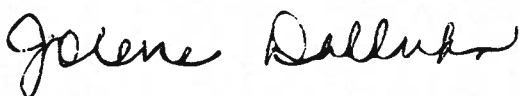
In the many years the Advisory Board has met, a continuing struggle has been workforce challenges in the behavioral health workforce space. We understand that workforce development is not inherently in the purview of the regulatory boards, and we also know that work around licensure, policy, and regulation are multifaceted.

While we understand this issue is difficult to address, Nevada continues to rank 51st in the nation for Mental Health, according to Mental Health America. This can not be a problem we collectively continue to neglect. We all should require action in the areas we have oversight or influence on. The areas of concern generally fall into one of five categories, listed below:

- A better workforce pipeline from high school and higher education, through job placement
- Increased availability of Internships and practicums
- Supervision tailored toward workforce development
- More efficiency and smoother transitions in certifications
- Increased exposure to the field of behavioral health to increase interest in the field across the lifespan

We hope that you lean on the expertise of the stakeholders assembled at the SAPTA Advisory Board to help systemically address the gaps and shortages in our behavioral health workforce to create a safer and healthier Nevada.

Thank you for your consideration,



Jolene Dalluhn and Jamie Ross
Co-Chairs of the SAPTA Advisory Board



3E

Hearing for Virgilio DeSio, License #6200-C

3F

**Creation of BESW Strategic Plan, July 1, 2023
through June 30, 2026.**

3G

NRS 41 Legal Representation Handout

Legal Representation in NRS 41

NRS 41.0339 and NRS 41.0347 may answer most Board member questions about legal representation. I also asked if Nevada had additional insurance and Nevada does not cover any “additional” insurance as there is a limitation of liability – see NRS 41.035.

NRS 41.0339 Circumstances under which official attorney to provide defense or employ special counsel. 1. The official attorney shall provide for the defense, including the defense of cross-claims and counterclaims, of any present or former local judicial officer, state judicial officer, officer or employee of the State or a political subdivision, immune contractor or State Legislator in any civil action brought against that person based on any alleged act or omission relating to the person’s public duties or employment, or any other person who is named as a defendant in a civil action solely because of an alleged act or omission relating to the public duties or employment of a local judicial officer, state judicial officer, officer or employee of the State or a political subdivision, immune contractor or State Legislator, if: (a) Within 15 days after service of a copy of the summons and complaint or other legal document commencing the action, the person submits a written request for defense: (1) To the official attorney; or (2) If the officer, employee or immune contractor has an administrative superior, to the administrator of the person’s agency and the official attorney; and (b) The official attorney has determined that the act or omission on which the action is based appears to be within the course and scope of public duty or employment and appears to have been performed or omitted in good faith. 2. Of the official attorney determines that it is impracticable, uneconomical or could constitute a conflict of interest for the legal service to be rendered by the official attorney or a deputy of the official attorney, the official attorney must employ special counsel pursuant to NRS 41.03435 or 41.0344, whichever is applicable. (Added to NRS by 1979, 1733; A 1987, 541; 2013, 1495)

NRS 41.0347 Liability of State or political subdivision for failure to provide defense. 1. If the official attorney does not provide for the defense of a present or former local judicial officer, state judicial officer, officer, employee, immune contractor, member of a board or commission of the State or any political subdivision or State Legislator in any civil action in which the State or political subdivision is also a named defendant, or which was brought in a court other than a court of competent jurisdiction of this state, and if it is judicially determined that the injuries arose out of an act or omission of that person during the performance of any duty within the course and scope of the person’s public duty or employment and that the person’s act or omission was not wanton or malicious: (a) If the Attorney General was responsible for providing the defense, the State is liable to that person for reasonable expenses in prosecuting the person’s own defense, including court costs and attorney’s fees. These expenses must be paid, upon approval by the State Board of Examiners, from the Reserve for Statutory Contingency Account. (b) If the chief legal officer or attorney of a political subdivision was responsible for providing the defense, the political subdivision is liable to that person for reasonable expenses in carrying on the person’s own defense, including court costs and attorney’s fees. 2. If the official attorney does not provide for the defense of a person who is named a defendant in any civil action solely because of an alleged act or omission relating to the public duties or employment of a present or former local judicial officer, state judicial officer, officer or employee of the State or any political subdivision, immune contractor or State Legislator and the State or political subdivision is also named a defendant, or the civil action was brought in a court other than a court of competent jurisdiction of this State, and if it is judicially determined that the injuries arose out of an act or omission of a local judicial officer, state judicial officer, officer or employee of the State or any political subdivision, immune contractor or State

Legislator during the performance of any duty within the course and scope of such a person's public duty or employment and that the person's act or omission was not wanton or malicious: (a) If the Attorney General was responsible for providing the defense, the State is liable to the person for reasonable expenses in prosecuting the person's own defense, including court costs and attorney's fees. These expenses must be paid, upon approval by the State Board of Examiners, from the Reserve for Statutory Contingency Account. (b) If the chief legal officer or attorney of a political subdivision was responsible for providing the defense, the political subdivision is liable to that person for reasonable expenses in carrying on the person's own defense, including court costs and attorney's fees. (Added to NRS by 1979, 1735; A 1987, 542; 1991, 1751; 2013, 1496)

NRS 41.0349 Indemnification of present or former public officer, employee, immune contractor or State Legislator. In any civil action brought against any present or former officer, employee, immune contractor, member of a board or commission of the State or a political subdivision or State Legislator, in which a judgment is entered against the person based on any act or omission relating to the person's public duty or employment, the State or political subdivision shall indemnify the person unless: 1. The person failed to submit a timely request for defense; 2. The person failed to cooperate in good faith in the defense of the action; 3. The act or omission of the person was not within the scope of the person's public duty or employment; or 4. The act or omission of the person was wanton or malicious. (Added to NRS by 1979, 1735; A 1987, 543)

NRS 41.035 Limitation on award for damages in tort actions. [Effective July 1, 2022.] 1. An award for damages in an action sounding in tort brought under NRS 41.031 or against a present or former officer or employee of the State or any political subdivision, immune contractor or State Legislator arising out of an act or omission within the scope of the person's public duties or employment may not exceed the sum of \$200,000, exclusive of interest computed from the date of judgment, to or for the benefit of any claimant. An award may not include any amount as exemplary or punitive damages. 2. The limitations of subsection 1 upon the amount and nature of damages which may be awarded apply also to any action sounding in tort and arising from any recreational activity or recreational use of land or water which is brought against: (a) Any public or quasi-municipal corporation organized under the laws of this State. (b) Any person with respect to any land or water leased or otherwise made available by that person to any public agency. (c) Any Indian tribe, band, or community whether or not a fee is charged for such activity or use. The provisions of this paragraph do not impair or modify any immunity from liability or action existing on February 26, 1968, or arising after February 26, 1968, in favor of any Indian tribe, band or community. The Legislature declares that the purpose of this subsection is to effectuate the public policy of the State of Nevada by encouraging the recreational use of land, lakes, reservoirs and other water owned or controlled by any public or quasi-municipal agency or corporation of this State, wherever such land or water may be situated. (Added to NRS by 1965, 1414; A 1968, 44; 1973, 1532; 1977, 985, 1539; 1979, 1736; 1987, 543; 1995, 1073; 2007, 3024, 3025; 2019, 3061, effective July 1, 2022)

3H

Executive Director's Report



National Center for Interstate Compacts

THE COUNCIL OF STATE GOVERNMENTS

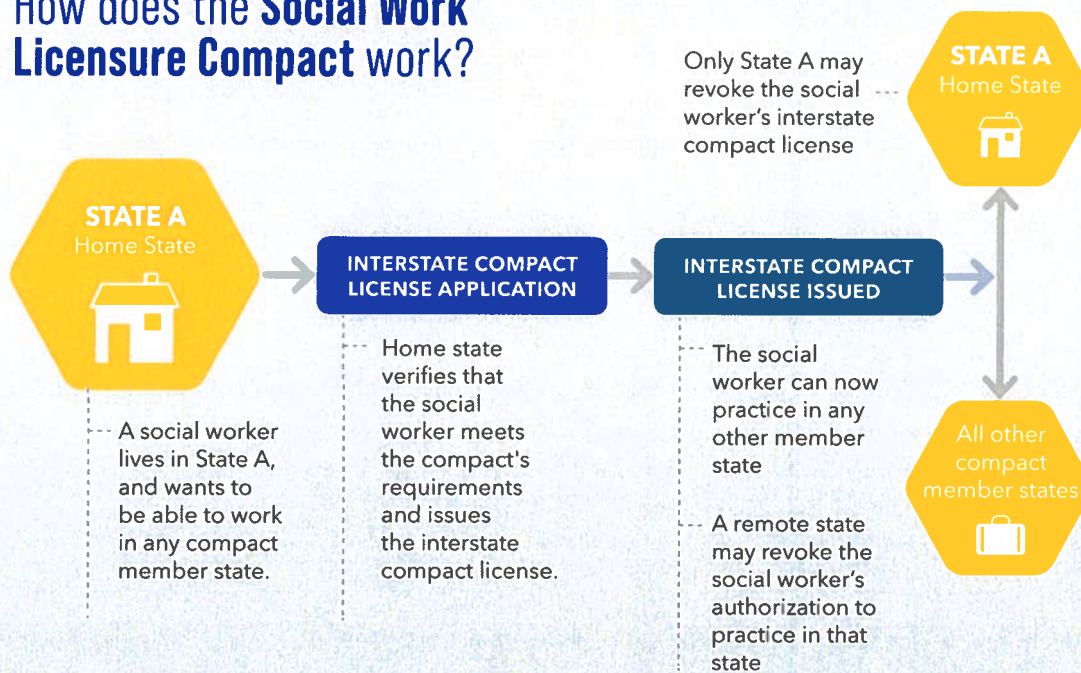
Social Work Licensure Compact Fact Sheet

This project is funded by the Department of Defense

What is the Social Work Licensure Compact?

The Social Work Licensure Compact is an interstate occupational licensure compact. Interstate compacts are constitutionally authorized, legislatively enacted, legally binding agreements among states. This compact will enable regulated social workers with bachelor's, master's and clinical licenses to serve clients in every state that joins the compact, rather than going through the licensure process in every state where they want to practice. Like the compact for a driver's license, each Social Work Licensure Compact member state agrees to mutually recognize the licenses issued by every other member state.

How does the Social Work Licensure Compact work?



What other professions have an interstate compact?

Interstate Medical Licensure Compact (IMLC)

Nurse Licensure Compact (NLC) and Advanced Practice Nurse Compact (APRN Compact)

Emergency Medical Service Officials Licensure Compact (EMS Compact)

Physical Therapists Licensure Compact (PT Compact)

Psychology Interjurisdictional Compact (PSYPACT)

Audiology and Speech-Language Pathology Interstate Compact (ASLP-IC)

Occupational Therapy Interstate Licensure Compact (OT Compact)

Counseling Interstate Licensure Compact

Who can use the Social Work Licensure Compact?

To qualify for an Interstate Compact License, a social worker who lives in a compact member state must hold an active, unencumbered license in their home state and satisfy the following requirements for one of the categories below:

| CATEGORY | EDUCATION | EXAM | SUPERVISION |
|--------------------------|--|--|---|
| Bachelor's Social Worker | Bachelor of Social Work or higher from an accredited program | Bachelors-category national licensure exam | N/A |
| Master's Social Worker | Master of Social Work or higher from an accredited program | Masters-category national licensure exam | N/A |
| Clinical Social Worker | Master of Social Work or higher from an accredited program | Clinical-category national licensure exam | 3,000 hours or two years of full-time, post-graduate supervised clinical practice |

A social worker using the Social Work Licensure Compact to practice in another compact member state must abide by that state's laws and regulations related to the practice of social work.

BENEFITS OF THE SOCIAL WORK LICENSURE COMPACT FOR LICENSEES



Eases mobility for licensees



Expands employment opportunities into new markets



Allows social workers to continue caring for clients who are moving to a new jurisdiction or who frequently relocate



Leverages technological innovations like telehealth



Supports relocating military spouses and families

BENEFITS OF THE SOCIAL WORK LICENSURE COMPACT FOR REGULATORS



Reduces application processing time



Provides access to investigative and disciplinary information about licensees



Expands cooperation among state licensure boards on investigations and disputes



Enhances public safety

BENEFITS OF THE SOCIAL WORK LICENSURE COMPACT FOR STATES



Provides a tool for addressing workforce shortages and strengthening labor markets



Expands consumer access to highly qualified social workers



Preserves state sovereignty

What's Next?

Interstate compacts take time to develop and implement because they enhance the mobility of social workers, preserve state sovereignty and facilitate the ability of state regulatory boards to coordinate and cooperate to protect the public.

Each state must enact the Social Work Licensure Compact model legislation to join the compact. The Council of State Governments (CSG) will facilitate a stakeholder review process to receive input and feedback on the model legislation. The goal is for this legislation to be finalized for introduction during 2023 state legislative sessions.

To get involved in the stakeholder review process or learn more about advocating for the interstate compact, please visit <https://compacts.csg.org/compact-updates/social-work/>.