

Amendment No. 446

Senate Amendment to Senate Bill No. 146	(BDR 39-870)
<b>Proposed by:</b> Senate Committee on Health and Human Services	
<b>Amendment Box:</b> Replaces Amendment No. 93.	
<b>Amends:</b> Summary: No Title: Yes Preamble: No Joint Sponsorship: No Digest: Yes	

ASSEMBLY ACTION			Initial and Date	SENATE ACTION			Initial and Date		
Adopted	<input type="checkbox"/>	Lost	<input type="checkbox"/>	_____	Adopted	<input type="checkbox"/>	Lost	<input type="checkbox"/>	_____
Concurred In	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____	Concurred In	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____
Receded	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____	Receded	<input type="checkbox"/>	Not	<input type="checkbox"/>	_____

EXPLANATION: Matter in (1) *blue bold italics* is new language in the original bill; (2) variations of green bold underlining is language proposed to be added in this amendment; (3) ~~red strikethrough~~ is deleted language in the original bill; (4) ~~purple double strikethrough~~ is language proposed to be deleted in this amendment; (5) orange double underlining is deleted language in the original bill proposed to be retained in this amendment.

EWR



Date: 4/16/2021

S.B. No. 146—Revises provisions relating to mental health services for children.  
(BDR 39-870)





## SENATE BILL NO. 146—SENATOR OHRENSCHALL

FEBRUARY 25, 2021

Referred to Committee on Health and Human Services

SUMMARY—Revises provisions relating to mental health services for children.  
(BDR 39-870)

FISCAL NOTE: Effect on Local Government: No.  
Effect on the State: No.

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EXPLANATION – Matter in *bolded italics* is new; matter between brackets ~~omitted material~~ is material to be omitted.

AN ACT relating to mental health; requiring certain psychiatric facilities to consult with the treating ~~psychiatrist~~ **provider of health care** of a child with an emotional disturbance who is ~~living outside his or her home~~ **subject to the jurisdiction of a juvenile court** under certain circumstances; and providing other matters properly relating thereto.

**Legislative Counsel's Digest:**

Existing law authorizes a child to be taken into protective custody and placed outside of his or her home to protect the child from abuse, neglect or abandonment and in certain other circumstances. (NRS 432B.325-432B.400, 432B.410-432B.5908) ~~Existing law designates certain facilities of the Division of Child and Family Services of the Department of Health and Human Services to provide services for the mental health of children. (NRS 433B.110) Existing law authorizes such a facility to treat a child with an emotional disturbance who is a resident of this State if: (1) the child is committed by court order; or (2) the child's parent, parents or legal guardian makes application for treatment for the child. (NRS 433B.310)} This bill requires the administrative officer or staff of {such} a **public or private inpatient psychiatric treatment** facility to ask the person or entity having **legal** custody of a child with an emotional disturbance who ~~has been placed outside his or her home for protective purposes~~ **is subject to the jurisdiction of a juvenile court for reasons relating to the protection of the child from abuse or neglect** if the child has a treating ~~psychiatrist before~~ **provider of healthcare when** admitting the child. ~~for inpatient care.~~ If the child has a treating ~~psychiatrist~~ **provider of health care**, this bill requires the administrative officer or staff of the facility to **make a reasonable effort to** consult with the treating ~~psychiatrist. This bill prohibits the admission of the child for inpatient care against the recommendation of the child's treating psychiatrist unless avoiding admission is not practicable.~~ **provider of health care concerning the care to be provided to the child.** If the child is admitted, this bill further requires the administrative officer or staff of the facility to: (1) ask the **legal custodian of the child** ~~if he or she wishes for~~ **for consent and make a reasonable attempt to obtain consent from the child to allow** the facility to ~~consult~~ **coordinate the care of the child** with the treating ~~psychiatrist~~ **provider of health care** on an ongoing basis; ~~concerning treatment of the child;~~ and (2) ~~ensure that such consultation occurs if requested by the child.~~ **make a reasonable attempt to coordinate with all treating providers of health care of the child concerning a plan to discharge the child from the facility.**~~

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN  
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

**Section 1.** Chapter 433B of NRS is hereby amended by adding thereto a new section to read as follows:

1. ~~[Before]~~ When admitting a child with an emotional disturbance who has been taken into protective custody or otherwise placed outside his or her home is subject to the jurisdiction of a juvenile court pursuant to chapter 432B of NRS to a public or private inpatient psychiatric treatment facility, for other division facility for inpatient care, the administrative officer of the facility or the staff of the administrative officer ~~[must]~~ shall ask the person or entity having legal custody of the child if the child has a treating [psychiatrist] provider of health care. If the child has a treating [psychiatrist] provider of health care, the [administrator] administrative officer or the staff of the [administrator] administrative officer must [attempt] make a reasonable effort to contact the treating [psychiatrist] provider of health care.

2. If the administrative officer of a public or private inpatient psychiatric treatment facility ~~for other division facility~~ or the staff of the administrative officer is able to contact the treating ~~[psychiatrist]~~ provider of health care pursuant to subsection 1, the administrative officer or staff ~~is~~

~~—(a) Must~~ must make a reasonable effort to consult with and consider any input from the treating [psychiatrist] provider of health care concerning the care to be provided to the child, including, without limitation, the admission of the child. ~~and~~

~~—(b) To the extent practicable, must not admit the child for inpatient care if the treating psychiatrist determines that such admission is not necessary.~~

3. If a child is admitted to a public or private inpatient psychiatric treatment facility ~~for other division facility for inpatient care after consulting with the treating psychiatrist pursuant to subsection 2,~~ the administrative officer of the facility or the staff of the administrative officer must:

(a) Ask the person or entity having legal custody of the child ~~[if he or she wishes for]~~ for consent and make a reasonable attempt to obtain the consent of the child to allow the facility to [consult] coordinate the care of the child with the treating [psychiatrist] provider of health care on an ongoing basis; [concerning treatment of the child]; and

(b) ~~[If the child states that he or she wishes for the facility to consult with the treating psychiatrist on an ongoing basis, ensure that such consultation occurs.]~~ Make a reasonable attempt to coordinate with all treating providers of health care of the child concerning a plan to discharge the child from the facility.

4. Failure of a person or entity having legal custody of a child or a child to provide consent pursuant to paragraph (a) of subsection 3 must not prevent a facility from coordinating the care of the child with the treating provider of health care of the child on an ongoing basis when necessary to protect or improve the health or welfare of the child.

5. As used in this section, “treating [psychiatrist] provider of health care” means, with respect to any child, a [psychiatrist] physician, a physician assistant who practices under the supervision of a psychiatrist, an advanced practice registered nurse who has the psychiatric training and experience prescribed by the State Board of Nursing pursuant to NRS 632.120 or a psychologist who regularly provides mental or behavioral health treatment to the child.

**Sec. 2.** This act becomes effective upon passage and approval.