BYLAWS
OF
THE RURAL CHILDREN'S MENTAL HEALTH CONSORTIUM

Article I
Name

The name of this organization shall be the Rural Children's Mental Health Consortium, which in these Bylaws will herein be referred to as the "Consortium."

Article II
Purpose

Section 2.1 Mission
The mission of the Consortium is set forth in Nevada Revised Statues ("NRS") 433B.335 (See Exhibit A, attached).

Section 2.2 Place of Business
The Consortium may have such place or places of business as the purposes of the Consortium might require, and as Consortium members may, from time to time, appoint.

Article III
Consortium Members

Section 3.1 Voting Membership
The Consortium shall consist of the following persons, as mandated in NRS 433B.333 (See Exhibit B, attached):

A representative of the Division of Public and Behavioral Health of the Department;
A representative of the agency which provides child welfare services in the region;
A representative of the Division of Health Care Financing and Policy of the Department;
A representative of the boards of trustees of the school districts in the region;
A representative of the local juvenile probation departments;
A representative of the chambers of commerce or business community in the region;
A private provider of mental health care;
A provider of foster care;
A parent of a child with an emotional disturbance; and
A representative of an agency which provides services for the treatment and prevention of substance abuse.

The Consortium may also consist of but is not limited to the following persons:
A representative of the State of Welfare Division;
A representative of a parent advocacy group;
A provider of child/adolescent substance abuse treatment;
A representative from a tribal provider of mental health services in the region;
A provider of primary health care services for children and adolescents; and
A representative of a private industry related to children's health care in the region.

Prospective members will be asked to complete an application before being selected as a member of the
Consortium.

The maximum number of voting Consortium members shall not exceed seventeen (17).

Section 3.2 Composition
The Consortium shall be composed of the officers and members of the Consortium. Consideration shall be given to retaining the demographic, geographic and ethnic balance of the Consortium.

Section 3.3 Appointment
Upon the recommendation of the Consortium, the Administrator of the Division of Child and Family Services (hereinafter, "Administrator") shall appoint persons to the Consortium.

Section 3.4 Term of Office
The members of the Consortium shall hold office until registration, disqualification, removal, or other cause requires removal.

Section 3.5 Filling of Vacancies
In the case of a vacancy on the Consortium through death, resignation, disqualification, removal, or other cause, the Consortium shall make recommendations to the Administrator so that the Administrator may fill the vacancy.

Section 3.6 Consortium Duties
Members of the Consortium shall:

- Work to develop a coordinated and integrated behavioral health system for children and families in rural Nevada;
- Implement a system of services and supports that is customized to meet the needs of families;
- Support the development and expansion of human resources to meet the needs of rural Nevada families and children;
- Expand consumer involvement at all levels of decision making that involves behavioral health services for rural Nevada families and children;
- Advocate for state-wide behavioral health changes for families with children with serious emotional disturbance;
- Adhere to System of Care principles

Additional duties shall include duties as assigned in NRS 433B.335 (See Exhibit A, attached).

Section 3.7 General Powers
The property and business of the Consortium shall be managed by the Consortium who shall exercise all powers under the law of the State of Nevada and other such provisions of federal and state law and regulations as may apply to the Consortium.

Section 3.8 Attendance
Members are required to attend all regularly scheduled meetings. Members who are unable to attend a meeting must contact the Chair, and/or an individual designated by the Chair, prior to the meeting. Attendance via proxy will not be permitted. Any member who is absent without informing the Chair, or his/her designee for 4 or more meetings per year, may be asked to resign from his/her position as a voting member. Members who are removed as voting members will receive written notification from the Chair.

Section 3.9 Entitlement of Vote
Each Consortium member shall be entitled to one vote in any manner of general business before the Consortium. A Consortium member may not designate an alternate manner (proxy) to vote on his/her
Sections 3.10 **Conflicts of Interest**
In discharging the duties of the Consortium, members shall act at all time in accordance with ethical standards and avoid creating the appearance of impropriety as defined under the laws of Nevada. A Consortium member shall declare his/her conflict, and not participate in the approval, disapproval or recommendation of any application, grant, contract, or any other matter in which he or she has a financial or other beneficial interest.

Section 3.11 **Compensation**
No Consortium member shall receive compensation for his/her services, unless such compensation is provided directly to the member by his/her employer. Exceptions may be made for parents, family or affected clients under extenuating circumstances and if funding is available. Consortium members working on behalf of the Consortium may receive reimbursement for expenses.

Section 3.12 **Associate Membership**
Once the capacity of voting membership has been reached, other persons interested in the activities of the Consortium shall be granted Associate Member status. Associate members shall be afforded the opportunity to become voting members if a vacancy occurs. Associate members may participate in any and all workgroups. Associate members shall also receive all regular Consortium communication and/or correspondence, such as minutes, agendas, meeting notices, etc.

**Article IV**

**Workgroups**

Section 4.1 **Workgroups**
The Chair may designate one or more Workgroups with the advice of the Consortium. Such Workgroups shall have the names and duties as may be determined from time to time and adopt at a regular or special meeting.

Section 4.2 **Composition**
The Chair shall appoint members of the Workgroups. Workgroups shall consist of no fewer than three (3) members. Members of Workgroups are not limited to voting members of the Consortium.

Section 4.3 **Workgroup Activities**
A Workgroup's main function is to submit recommendations to the Consortium. A Workgroup requires a quorum and majority vote for acceptance. In some instances the Consortium may grant a Workgroup the authority to carry out activities to further the work of the Consortium. In these instances the parameters of the activities will be discussed by the Consortium and voted on during a Consortium meeting prior to a Workgroup's meeting.

Workgroup products and deliverables will be Consortium-driven as well as Consortium-supported. All Workgroups will be accountable to the Consortium via written reports and minutes. Workgroups will:

a. Be mission-driven and product-oriented, with an expectation that activities will result in measurable, visible outcomes;
b. Operate on a timeline established by the Consortium, and agreed to by the Workgroup Chair;
c. Be designated by the Consortium to fit a specifically identified strategy, rather than a general philosophy;
d. Utilize formal agendas;
e. Report progress and results to the Consortium utilizing a formatted report.

All Workgroup meetings are subject to the Nevada Open meeting laws, including posting notices, establishing agendas and recording minutes.

Article V
Meetings

Section 5.1 Regular Meetings
The Consortium shall meet at least six times per year at such places as may be determined by the Consortium. All Consortium members shall be given notice no less than three (3) business days prior to such meeting, not including the day of the meeting, and such notice shall set the time and place of the meeting and agenda. The Nevada Open Meeting Law shall govern such regular meetings.

Section 5.2 Special Meetings
Special meetings of the Consortium shall be held whenever called by the Chair, or whenever called by three (3) or more Consortium members. The Consortium members shall be given notice of each special meetings of the Consortium by mail, by telephone, by fax or by otherwise electronic means three (3) business days prior, excluding the day of the meeting, unless a resolution or agreement or the Consortium requires otherwise. The Nevada Open Meeting Law shall govern such special meetings.

Section 5.3 Agenda
The order of business on the agenda may be determined by the chair, with the assistance of committee members and staff. All agenda items shall be submitted to the secretary, and/or designee, at least five (5) business days prior to the scheduled meeting. The format and posting of the agenda shall be in accordance with the Nevada Open Meeting Law.

Section 5.4 Quorum
A simple majority of the Consortium members constitutes a quorum for the transaction of business. An affirmative vote of the majority of those Consortium members who are present at a regular or special meeting at which there is a quorum shall by sufficient to approve or disapprove any motion before the Consortium.

Section 5.5 Business
Unless otherwise indicated in the notice thereof, any and all business may be transacted at any regular or special meeting or the Consortium.

Section 5.6 Minutes
Minutes of each regular, special and Workgroup meetings of the Consortium shall be maintained.

Article VI
Officers

Section 6.1 Officers
The officers of the Consortium shall include a Chair, an Immediate Past Chair, a Vice Chair, and Secretary.

Section 6.2 Selection
The regular election of officers shall be held biennially at a meeting of the Consortium in even numbered
years. In order to preserve Consortium continuity, persons may move progressively upward through the offices.

Section 6.3 Absence or Inability
In the event of absence or inability of any officer to act, the Consortium may delegate the powers or duties of such officer to any other member of the Consortium.

Section 6.4 Removal of Officers
The Consortium may remove any officer, agent or employee whenever in its judgment the best interests of the Consortium shall be therefore saved.

Section 6.5 Filling of Vacancies
A special election to fill any vacancy in such offices may be held by the Consortium at the next regularly scheduled meeting after the vacancy occurs. Any officers elected to fill a vacancy shall serve until the next regularly scheduled election of officers.

Section 6.6 Appointments
The Consortium may appoint such additional officers, agents and employees as it deems necessary, who shall hold offices for such terms and shall exercise such powers and perform such duties as shall be determined from time to time by the Consortium.

Section 6.7 Chair Duties
The Chair shall see that the orders and resolutions of the Consortium are carried into effect. The Chair shall preside at meetings of the Consortium. Additionally, the Chair, or designee, shall represent the Washoe County Consortium at all meetings where the Consortium has been requested to attend.

Section 6.8 Vice Chair Duties
The Vice Chair shall carry out the duties of the Chair in the Chair’s absence.

Section 6.9 Secretary Duties
The Secretary, or designee, is the recording officer of the Consortium and the custodian on records. The Secretary, or designee, shall keep the minutes and audio recordings of all meetings, certificates, contracts, resolutions, and all Consortium acts that shall be open to the inspection of the public and all interested parties.

Article VII
Dissolution

Upon dissolution of the Consortium, Consortium members shall, after paying or making provision for the payment of all liabilities of the Consortium, transfer all of the assets of the Consortium to the Division of Child and Family Services.

Article VIII
Savings Clause

Should any provision contained in these Bylaws, or any amendments hereafter, be found to be unlawful or
contrary to public policy by any court or competent jurisdiction or any authority having jurisdiction in such matters, such decisions or ruling shall in no way be construed so as to affect any of the remaining provisions of these Bylaws or any amendments thereto.

Article IX
Amendment to the Bylaws

The Consortium shall have the power and authority to amend, alter or repeal these Bylaws or any provision thereof, and may, from time to time, make additional Bylaws by a vote of a majority of those Consortium members who are present at the meeting at which there is a quorum. Proposed changes to the Bylaws must be presented at one meeting of the Consortium and may not be amended, altered or repealed until a subsequent meeting of the Consortium.

Article X
Contracts and Fiscal Agreements

The Consortium may enter into contracts and agreements, apply for and accept gifts, grants, donations and bequests from any source to carry out the provisions of NRS 433B.335 and 433B.337 (See Exhibit A & C, attached). Money collected must be deposited in the State Treasury and accounted for separately in the State General Fund; and except as otherwise provided by the terms of a specific gift, grant, donation or bequest, must only be expended, under the direction of the Consortium to carry out the provisions of NRS 433B.335 and 433B.337. The Administrator shall administer the account maintained for the Consortium as set forth in NRS. 433.339 (See Exhibit D, attached).

Article XI
Miscellaneous

Section 10.1 Fiscal Year
The fiscal year of the Consortium shall be from July 1 to June 30.

Section 10.2 Notices
Whenever, under the provision of these Bylaws, notice is required to be given to any Consortium member, it shall be construed to mean personal notice, unless otherwise specified in these Bylaws. The notice shall be given in writing, by United States mail, by telephone, by fax or by other electronic means, unless a resolution or agreement of the Consortium members requires otherwise.

Section 10.3 Parliamentary Authority
Consortium Meetings shall be conducted in accordance with NRS Chapter 241, known as Nevada Open Meeting Law. So far as practical, and where not in conflict with applicable law, Robert's Rules of Order Newly Revised, shall be complied with at the meetings of the Consortium.

Article XII
Nondiscrimination Policy

Section 11.1 Memberships and Officers
The Consortium does not discriminate on the basis of race, color, religion, sex, age, national origin, disability, or sexual orientation with respect to membership on or the election to the position of officers
for the Consortium.

Section 11.2 Nondiscrimination Policy
The Consortium does not discriminate on the basis of race, color, religion, sex, age, national origin, disability, or sexual orientation with respect to its membership on the Consortium, the opportunity to be heard at meetings, or its discharge of its official duties, including but not limited to, its plan for delivery or mental health services.

Article XIII Grievances

Section 12.1 Grievance Rights
Grievances are limited to deviations from or violations of the Bylaws established by the Rural Children's Mental Health Consortium.

Section 12.2 Grievance Procedure
1. The grievance process will be fair, impartial and responsive to all parties.
2. A grievant shall not be discriminated against, nor suffer any retaliation, as a result of filing or participating in the grievance process.
3. A complaint or grievance must be submitted to one of the people noted on the bottom of the Grievance Form within 30 days of the date the alleged episode causing the grievance became known.
4. Upon receipt of a grievance the Consortium Chair will form an Ad Hoc Grievance Workgroup to address and resolve the grievance. The membership of the Ad Hoc Grievance Workgroup will not include anyone associated with the grievance.
5. The Grievance Workgroup shall address grievances for the Consortium, including making a formal recommendation to the Consortium. The Grievance Workgroup will bring the formal recommendation before the Consortium at the next regularly scheduled Consortium meeting, which will be presented as an agenda item. The Consortium will then, by majority vote, agree or disagree with the Grievance Committee's formal recommendation in determining the final action regarding the grievance. If the Consortium agrees with the grievant it must suggest how the grievance may be remediated or resolved. If the Consortium disagrees with the grievance it must state why, and if appropriate, offer an alternative suggestion. The Grievant may attend in person, or, if not in person, elect to submit a letter on his or her behalf. NRS 241.033 and 241.035 permit the Grievance Workgroup to address all issues of the grievance in a closed hearing/meeting provided the specific elements of the statute are followed.
6. Any grievance filed must be submitted on the “Rural Children’s Mental Health Consortium Grievance Form.” (See Exhibit E, Attached)
7. In the event the Grievant does not agree with the Consortium’s final decision, the grievant may appeal to the administrator of the Division of Child and Family Services.

By These Present:
The undersigned Officers of the Consortium, organized and existing under the laws of the State of Nevada, do hereby certify that the foregoing Bylaws, consisting of twelve (13) articles, were duly adopted as the Bylaws of the Consortium by appropriate resolution of the members of the Rural Children's Mental Health Consortium on this ______ day of ________________________, in the year ______________.

_______________________________________
Secretary, Rural Children's Mental Health Consortium
ADOPTED AND APPROVED this _____ day of ____________________, in the year ______.

APPROVED:

Administrator, Division of Child and Family Services

EXHIBIT A

NRS 433B.335  Long-term strategic plan for provision of services to children with emotional disturbance: Preparation by consortium; requirements; submission; consideration of priorities of and requests for allocations to consortium in agency’s biennial budget request.

1. Each mental health consortium established pursuant to NRS 433B.333 shall prepare and submit to the Director of the Department a long-term strategic plan for the provision of mental health services to children with emotional disturbance in the jurisdiction of the consortium. A plan submitted pursuant to this section is valid for 10 years after the date of submission, and each consortium shall submit a new plan upon its expiration.

2. In preparing the long-term strategic plan pursuant to subsection 1, each mental health consortium must be guided by the following principles:

(a) The system of mental health services set forth in the plan should be centered on children with emotional disturbance and their families, with the needs and strengths of those children and their families dictating the types and mix of services provided.

(b) The families of children with emotional disturbance, including, without limitation, foster parents, should be active participants in all aspects of planning, selecting and delivering mental health services at the local level.

(c) The system of mental health services should be community-based and flexible, with accountability and the focus of the services at the local level.

(d) The system of mental health services should provide timely access to a comprehensive array of cost-effective mental health services.

(e) Children and their families who are in need of mental health services should be identified as early as possible through screening, assessment processes, treatment and systems of support.

(f) Comprehensive mental health services should be made available in the least restrictive but clinically appropriate environment.

(g) The family of a child with an emotional disturbance should be eligible to receive mental health services from the system.

(h) Mental health services should be provided to children with emotional disturbance in a sensitive manner that is responsive to cultural and gender-based differences and the special needs of the children.

3. The long-term strategic plan prepared pursuant to subsection 1 must include:

(a) An assessment of the need for mental health services in the jurisdiction of the consortium;

(b) The long-term strategies and goals of the consortium for providing mental health services to children with emotional disturbance within the jurisdiction of the consortium;
(c) A description of the types of services to be offered to children with emotional disturbance within the jurisdiction of the consortium;
(d) Criteria for eligibility for those services;
(e) A description of the manner in which those services may be obtained by eligible children;
(f) The manner in which the costs for those services will be allocated;
(g) The mechanisms to manage the money provided for those services;
(h) Documentation of the number of children with emotional disturbance who are not currently being provided services, the costs to provide services to those children, the obstacles to providing services to those children and recommendations for removing those obstacles;
(i) Methods for obtaining additional money and services for children with emotional disturbance from private and public entities; and
(j) The manner in which family members of eligible children and other persons may be involved in the treatment of the children.

4. On or before January 31 of each even-numbered year, each mental health consortium shall submit to the Director of the Department and the Commission:
   (a) A list of the priorities of services necessary to implement the long-term strategic plan submitted pursuant to subsection 1 and an itemized list of the costs to provide those services;
   (b) A description of any revisions to the long-term strategic plan adopted by the consortium during the immediately preceding year; and
   (c) Any request for an allocation for administrative expenses of the consortium.

5. In preparing the biennial budget request for the Department, the Director of the Department shall consider the list of priorities and any request for an allocation submitted pursuant to subsection 4 by each mental health consortium. On or before September 30 of each even-numbered year, the Director of the Department shall submit to each mental health consortium a report which includes a description of:
   (a) Each item on the list of priorities of the consortium that was included in the biennial budget request for the Department;
   (b) Each item on the list of priorities of the consortium that was not included in the biennial budget request for the Department and an explanation for the exclusion; and
   (c) Any request for an allocation for administrative expenses of the consortium that was included in the biennial budget request for the Department.

6. On or before January 31 of each odd-numbered year, each consortium shall submit to the Director of the Department and the Commission:
   (a) A report regarding the status of the long-term strategic plan submitted pursuant to subsection 1, including, without limitation, the status of the strategies, goals and services included in the plan;
   (b) A description of any revisions to the long-term strategic plan adopted by the consortium during the immediately preceding year; and
   (c) A report of all expenditures made from an account maintained pursuant to NRS 433B.339, if any.

EXHIBIT B

NRS 433B.333 Establishment of mental health consortia; members.

1. A mental health consortium is hereby established in each of the following jurisdictions:
   (a) A county whose population is 100,000 or more; and
   (b) The region consisting of all counties whose population are less than 100,000.

2. In a county whose population is 100,000 or more, such a consortium must consist of at least the following persons appointed by the Administrator:
   (a) A representative of the Division;
   (b) A representative of the agency which provides child welfare services;
   (c) A representative of the Division of Health Care Financing and Policy of the Department;
(d) A representative of the board of trustees of the school district in the county;
(e) A representative of the local juvenile probation department;
(f) A representative of the local chamber of commerce or business community;
(g) A private provider of mental health care;
(h) A provider of foster care;
(i) A parent of a child with an emotional disturbance; and
(j) A representative of an agency which provides services for the treatment and prevention of substance abuse.

3. In the region consisting of counties whose population are less than 100,000, such a consortium must consist of at least the following persons appointed by the Administrator:
   (a) A representative of the Division of Public and Behavioral Health of the Department;
   (b) A representative of the agency which provides child welfare services in the region;
   (c) A representative of the Division of Health Care Financing and Policy of the Department;
   (d) A representative of the boards of trustees of the school districts in the region;
   (e) A representative of the local juvenile probation departments;
   (f) A private provider of mental health care;
   (g) A provider of foster care;
   (i) A parent of a child with an emotional disturbance; and
   (j) A representative of an agency which provides services for the treatment and prevention of substance abuse.

(Added to NRS by 2001 Special Session, 52; A 2009, 675)

EXHIBIT C

NRS 433B.337 Authority of mental health consortium to carry out certain activities concerning long-term strategic plan; coordination with Department.

1. A mental health consortium established by NRS 433B.333 may:
   (a) Participate in activities within the jurisdiction of the consortium to:
      (1) Implement the provisions of the long-term strategic plan established by the consortium pursuant to NRS 433B.335; and
      (2) Improve the provision of mental health services to children with emotional disturbance and their families, including, without limitation, advertising the availability of mental health services and carrying out a demonstration project relating to mental health services.
   (b) Take other action to carry out its duties set forth in this section and NRS 433B.335 and 433B.339.

2. To the extent practicable, a mental health consortium shall coordinate with the Department to avoid duplicating or contradicting the efforts of the Department to provide mental health services to children with emotional disturbance and their families.

(Added to NRS by 2011, 1913)

EXHIBIT D

NRS 433B.339 Authority of mental health consortium to enter into contracts and accept gifts, grants and donations; establishment and administration of account for money of consortium.

1. A mental health consortium established by NRS 433B.333 may:
   (a) Enter into contracts and agreements to carry out the provisions of this section and NRS 433B.335 and 433B.337; and
   (b) Apply for and accept gifts, grants, donations and bequests from any source to carry out the provisions of this section and NRS 433B.335 and 433B.337.

2. Any money collected pursuant to subsection 1:
(a) Must be deposited in the State Treasury and accounted for separately in the State General Fund; and
(b) Except as otherwise provided by the terms of a specific gift, grant, donation or bequest, must only be expended, under the direction of the consortium which deposited the money, to carry out the provisions of this section and NRS 433B.335 and 433B.337.
3. The Administrator shall administer the account maintained for each consortium.
4. Any interest or income earned on the money in an account maintained pursuant to this section must be credited to the account and does not revert to the State General Fund at the end of a fiscal year.
5. Any claims against an account maintained pursuant to this section must be paid as other claims against the State are paid.
(Added to NRS by 2011, 1914)

EXHIBIT E
RURAL CHILDREN'S MENTAL HEALTH CONSORTIUM
GRIEVANCE FORM

Name of Person filing Grievance: _____________________________________
Consortium member:  Yes______  No______
If no, how represented: _____________________________________________
Address:__________________________________________________________
City/State/Zip:_______________________________________________________
Telephone Number:__________________________________________________
Fax Number:________________________________________________________
Email Address:______________________________________________________

STATEMENT OF GRIEVANCE

1) Please state how you believe the Rural Children's Mental Health Consortium or any one or more of its members deviated from its established Bylaws, and the date the Consortium decision was made and/or when the conduct occurred.

2) Please state how you were or are directly affected by the decision of the Consortium or one or more of its members
STATEMENT OF SUGGESTED REMEDY

1) Please state what action you would like the Consortium to take to resolve the problem.

2) Please provide any other comments or information pertinent to this grievance.

I affirm the above statements are true and accurate to the best of my knowledge.

__________________________________  ____________________
Signature of Grievant                  Date

Please return this Grievance Form within thirty (30) days you believed the alleged grievous action occurred to:

Jan Marson, Chair  Carol Broersma, Vice Chair

Rural Children’s Mental Health Consortium  OR
5150 Convair Drive
Carson City, NV 89706