



OFFICE OF THE ATTORNEY GENERAL

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Statewide Substance Use Response Working Group Meeting

January 11, 2023



1. Call to Order and Roll Call to Establish Quorum

Chair Ford



2. Public Comment

(Discussion Only.)

Public Comment

Attending Virtually

- Public comment shall be limited to three (3) minutes per person.
- Please use the “raise hand” feature to indicate you would like to provide public comment so the host can prompt you to unmute.
- If you are dialing in from a telephone and would like to provide public comment, please press *9 so the host can prompt you to unmute.
- Before commenting, please state your full name for the record.
- Comments can also be emailed to lhale@socialent.com. These comments and questions will be recorded in meeting minutes.



3. Review and Approve Minutes for December 14, 2022 SURG Meeting

(For Possible Action.)

Chair Ford



4. Election of SURG Vice Chair

(For Possible Action.)

Chair Ford



5. Update on Opioid Litigation, Settlement Funds, and Distribution

(Information Only.)

Chief Deputy Attorney General (DAG) Mark Krueger, Bureau of Consumer Protection, Office of the Attorney General

Opioid Settlement and Bankruptcy Actual and Estimated Annual Payments and Allocations under the One Nevada Agreement

(assumes no default in payments)

(CMS Medicaid Costs, if any, not deducted)

(assumes no administrative fees for Court appointed Third Party Administrator)

Settlement/Bankruptcy Name	Estimated Payment Year	Estimated Payment Month	State and Signatories of One Nevada Agreement Share of Settlements	Costs	Total Amount to be Allocated	Attorney Fees	Total Allocation after Fees	Actual/Estimated Allocation Month/Year
J&J	2022	April	\$50,833,353.00	\$3,897,545.43	\$46,935,807.57	\$7,037,053.92	\$39,898,753.65	July, 2022
Distributors	2022	August	\$9,897,161.96	\$0.00	\$9,897,161.96	\$1,724,851.29	\$8,172,310.67	August, 2022
Distributors	2022	September	\$10,401,434.73	\$0.00	\$10,401,434.73	\$1,724,851.29	\$8,676,583.44	September, 2022
American Drug Stores	2022	November	\$1,500,000.00	\$0.00	\$1,500,000.00	\$337,815.52	\$1,162,184.48	December, 2022
Mallinckrodt	2022	November	\$1,849,733.70	\$0.00	\$1,849,733.70	\$416,579.22	\$1,433,154.48	December, 2022
Distributors	2023	July	\$10,401,434.73	\$0.00	\$10,401,434.73	\$1,724,851.29	\$8,676,583.44	July, 2023
Distributors	2024	July	\$13,018,868.99	\$0.00	\$13,018,868.99	\$2,158,895.73	\$10,859,973.26	July, 2024
J&J	2025	April	\$2,675,439.64	\$0.00	\$2,675,439.64	\$443,663.37	\$2,231,776.27	July, 2025
Distributors	2025	July	\$13,018,868.99	\$0.00	\$13,018,868.99	\$2,158,895.73	\$10,859,973.26	July, 2025
Distributors	2026	July	\$13,018,868.99	\$0.00	\$13,018,868.99	\$2,158,895.73	\$10,859,973.26	July, 2026
Distributors	2027	July	\$13,018,868.99	\$0.00	\$13,018,868.99	\$2,158,895.73	\$10,859,973.26	July, 2027
Distributors	2028	July	\$15,311,758.47	\$0.00	\$15,311,758.47	\$2,539,121.46	\$12,772,637.01	July, 2028
Distributors	2029	July	\$15,311,758.47	\$0.00	\$15,311,758.47	\$2,539,121.46	\$12,772,637.01	July, 2029
Distributors	2030	July	\$15,311,758.47	\$0.00	\$15,311,758.47	\$2,539,121.46	\$12,772,637.01	July, 2030
Distributors	2031	July	\$12,871,078.28	\$0.00	\$12,871,078.28	\$2,134,387.83	\$10,736,690.45	July, 2031
Distributors	2032	July	\$12,871,078.28	\$0.00	\$12,871,078.28	\$2,134,387.83	\$10,736,690.45	July, 2032
Distributors	2033	July	\$12,871,078.28	\$0.00	\$12,871,078.28	\$2,134,387.83	\$10,736,690.45	July, 2033
Distributors	2034	July	\$12,871,078.28	\$0.00	\$12,871,078.28	\$2,134,387.83	\$10,736,690.45	July, 2034
Distributors	2035	July	\$12,871,078.28	\$0.00	\$12,871,078.28	\$2,134,387.83	\$10,736,690.45	July, 2035
Distributors	2036	July	\$12,871,078.28	\$0.00	\$12,871,078.28	\$2,134,387.83	\$10,736,690.45	July, 2036
Distributors	2037	July	\$12,871,078.28	\$0.00	\$12,871,078.28	\$2,134,387.83	\$10,736,690.45	July, 2037
Distributors	2038	July	\$12,871,078.28	\$0.00	\$12,871,078.28	\$2,134,387.83	\$10,736,690.45	July, 2038
Totals			\$288,537,935.37	\$3,897,545.43	\$284,640,389.94	\$46,737,715.84	\$237,902,674.10	

STATE OF NEVADA

*(assumes no default in payments)**(CMS Medicaid Costs, if any, not deducted)*

<u>Settlement Name</u>	<u>Estimated Payment Date</u>	<u>Estimated Payment Month</u>	<u>Gross Allocation</u>	<u>Fees at 19%</u>	<u>Net Allocation</u>
J&J	2022	April	\$18,612,345.20	\$3,536,345.59	\$15,075,999.61
Distributors	2022	August	\$4,340,895.22	\$824,770.09	\$3,516,125.13
Distributors	2022	September	\$4,562,069.29	\$866,793.17	\$3,695,276.12
American Drug Stores	2022	November	\$657,900.01	\$125,180.00	\$526,320.01
Mallinckrodt	2022	November	\$811,293.19	\$162,238.64	\$649,034.55
Distributors	2023	July	\$4,562,069.29	\$866,793.17	\$3,695,276.12
Distributors	2024	July	\$3,710,075.94	\$1,084,914.43	\$4,623,161.51
J&J	2025	April	\$1,173,447.81	\$222,955.08	\$950,492.73
Distributors	2025	July	\$3,710,075.94	\$1,084,914.43	\$4,623,161.51
Distributors	2026	July	\$3,710,075.94	\$1,084,914.43	\$4,623,161.51
Distributors	2027	July	\$3,710,075.94	\$1,084,914.43	\$4,623,161.51
Distributors	2028	July	\$6,715,737.27	\$1,275,990.08	\$5,439,747.19
Distributors	2029	July	\$6,715,737.27	\$1,275,990.08	\$5,439,747.19
Distributors	2030	July	\$6,715,737.27	\$1,275,990.08	\$5,439,747.19
Distributors	2031	July	\$3,645,254.94	\$1,072,598.44	\$4,572,656.50
Distributors	2032	July	\$3,645,254.94	\$1,072,598.44	\$4,572,656.50
Distributors	2033	July	\$3,645,254.94	\$1,072,598.44	\$4,572,656.50
Distributors	2034	July	\$3,645,254.94	\$1,072,598.44	\$4,572,656.50
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Distributors	2037	July	\$3,645,254.94	\$1,072,598.44	\$4,572,656.50
Distributors	2038	July	\$3,645,254.94	\$1,072,598.44	\$4,572,656.50
		TOTAL	\$122,869,575.10	\$23,359,911.22	\$99,509,663.88

6. Review Proposed Amended Bylaws with Updated Member Appointments and Terms

(For Discussion and Possible Action.)

Terry Kerns, Ph.D., Substance Abuse/Law Enforcement Coordinator, Office of the Attorney General

7. Overview Roles and Purpose of SURG, ACRN and Cross Sector-Task Force

(For Information and Discussion.)

Dr. Terry Kerns and Dawn Yohey, MFT, LCADC, Clinical Program Planner,
Department of Health and Human Services (DHHS)

SURG

- Background and Purpose:
 - Created by AB374
 - Convenes subject matter experts, including individuals in recovery, as well as elected officials and state program leads to examine issues related to substance use disorder prevention and treatment and puts forth recommendations in an annual report
- Status:
 - Annual report pending approval January 2023
 - Subcommittees to reconvene in 2023 to develop recommendations for next annual report

Advisory Committee for a Resilient Nevada (ACRN)

The Advisory Committee for a Resilient Nevada (ACRN) was established in Nevada Revised Statutes (NRS) 433.712-433.744 by the 2021 Nevada Legislature to obtain advice and counsel from persons and entities who possess knowledge and experience related to the prevention of opioid misuse, opioid related deaths, and injury, as well as addiction and opioid use disorders within the State of Nevada.

The goal is to effectively address risks, impacts, and harms of the opioid crisis in the State through the Fund for a Resilient Nevada.

Goals of ACRN

On or before June 30 of each even-numbered year, the ACRN shall submit to the Director of the Department a report of recommendations concerning:

- a) The statewide needs assessment (developed every 4 years)
- b) The statewide plan to allocate money from the Fund (revised as applicable)

Cross-Sector Task Force

- Background and Purpose
 - Created by DHHS to establish a joint cross-sector task force
 - Comprised of both SURG and ACRN members working together
 - Tasked with determining action to reduce the risk of overdose, prepare responses in the event an increase in overdoses occurs, and provide technical assistance, guidance and resources to rapidly implement best practices to reduce the risk for overdoses, enhance capacity to respond to events, and recover should such overdose events occur
- Status
 - Survey to help compile action plan was distributed for cross-sector task force members to complete; deadline was extended and can be extended again if it will increase survey response

8. Annual Report to SURG from Department of Health and Human Services on Receipt or Expenditure of Funds Related to Substance Misuse or Substance Use Disorders

(For Information and Discussion.)

Dawn Yohey, DHHS

9. Review Subcommittee Assignments and Chairs, and Sample Meeting Schedule

(For Information and Discussion.)

Dr. Terry Kerns

SURG Subcommittee Assignments: Prevention Subcommittee

- Jessica Johnson, Chair
- Erik Schoen, Vice Chair
- Debi Nadler
- Angela Nickels

To be appointed after conclusion of 82nd (2023) legislative session:

- Senator Heidi Seevers-Gansert
- Senator Fabian Doñate

SURG Subcommittee Assignments: Treatment and Recovery Subcommittee

- Lisa Lee, Chair
- Steve Shell, Vice Chair
- Chelsi Cheatom
- Dr. Lesley Dixon

To be appointed after conclusion of 82nd (2023) legislative session:

- Assemblywoman Claire Thomas

SURG Subcommittee Assignments: Response Subcommittee

- Dr. Terry Kerns, Chair
- Shayla Holmes, Vice Chair
- Gina Flores-O'Toole
- Christine Payson
- Dr. Stephanie Woodard

2023 Meeting Schedule Outline

2023 Full SURG Meeting Tentative Dates

- January 11, 2023
- TBD March/April – Harm Reduction Meeting
- June 14 or July 12 at 2 p.m.
- October 11 at 2 p.m.
- December 13 at 2 p.m.

2023 SURG Subcommittee Meeting Plan

- ~ every other month from March-October
- Subcommittees can select a reoccurring date/time
 - Ex: Response subcommittee to meet the 3rd Monday at noon in March, May, July and August

Survey Feedback: What worked well?

- Subcommittees (5)
 - “Able to cover more ground and move things along”
 - “Prioritization process”
 - “Discussion of recommendations”
- SEI coordination and staff organization (4)
- Shared documents to compile information (2)

Survey Feedback: What could be improved?

- Presentations on contested recommendations at SURG
- Better definition of subcommittees or full SURG meeting dedicated to the cross over recommendations
- Clarification on the recommendation ranking process
- More predictable schedule of meetings, especially for subcommittees
- Length of meetings should be shortened to 90 minutes or less
- Addressing harm reduction in its own separate capacity, harm reduction-specific subcommittee
- Asking SURG members what they would like to learn from presentations
- More presentations from providers instead of from the state
- Better adherence to public comment period time limits

10. Harm Reduction Presentation

(For Information and Discussion.)

Lisa Lee, MA, CPRSS, Program Specialist, Washoe County Human Services Agency and Rick Reich, Program Director, Trac-B Exchange

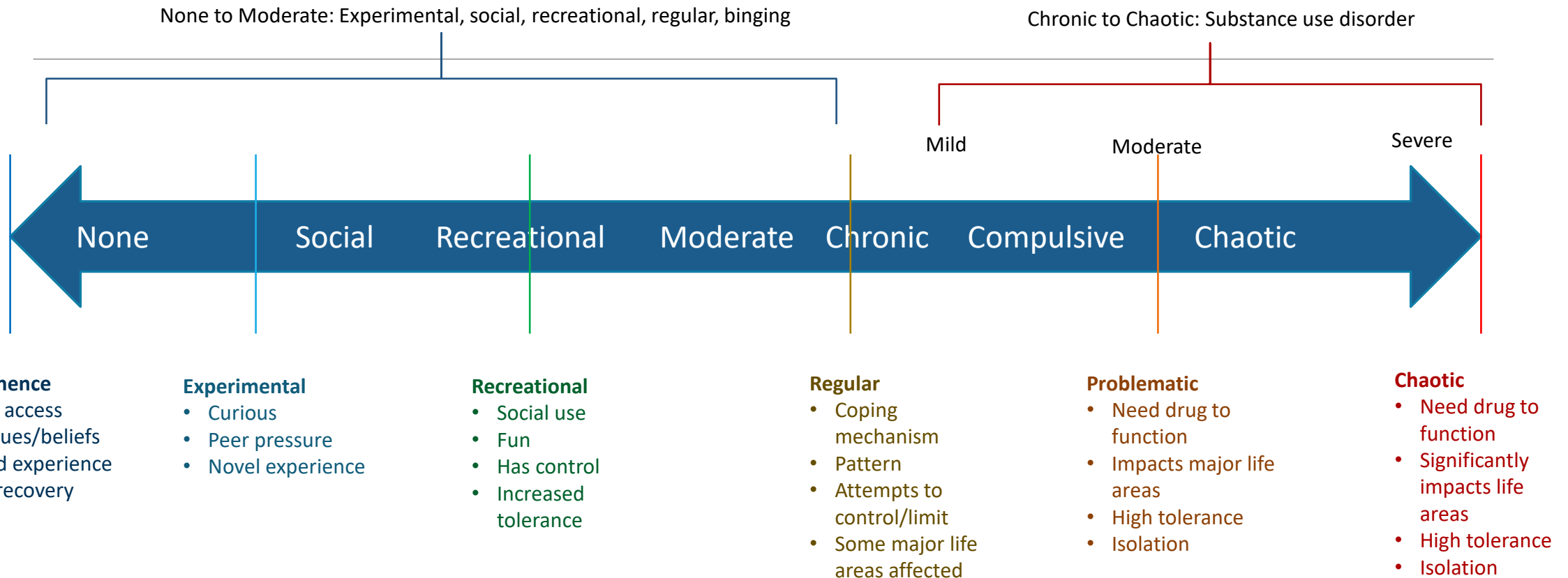
Lisa Lee, MA, CPRSS, CPRSS-S, DrPH Candidate



Credit: Nigel Bruns

Harm Reduction 101

Continuum of drug use





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This Photo by Unknown Author is licensed under [CC BY-NC-ND](#)

Familiar Practices

History of Harm Reduction

Liverpool 1980s: "Mersey Harm Reduction Model" utilized outreach workers, harm reduction education, and sterile injection equipment was effective (no HIV epidemic in Mersey)

People to know: Edith Springer, Dave Purchase, Jon Stuen-Parker, Joyce Rivera, Dan Bigg, Imani Wood

"How does this work?" a person who used drugs asked.

"You give me an old one, I give you a sterile one, and it keeps your butt alive," Mr. Purchase responded.



The group began the challenging task of creating a unified definition of harm reduction. Pictured from left to right first row: Dave Purchase, Rod Sorge, Dan Bigg, Stephanie Comer, Sara Kershner, Charles Collins, Jon Paul Hammond second row: facilitator, Pat Garrett, Ricky Bluthenthal, Renee Edgington, Edith Springer, Joyce Rivera, Lisa Moore third row: Scott Stokes, George Clark, Delia Garcia, Heather Edney, Mark Gerse, Kevin Zeese, Gerald Lenoir

Source: Comer Family Foundation. (2013, November 18). Two decades of positive change: A brief history of the Harm Reduction Coalition. <https://www.comerfamilyfoundation.org/articles/two-decades-of-positive-change-a-brief-history-of-the-harm-reduction-coalition>



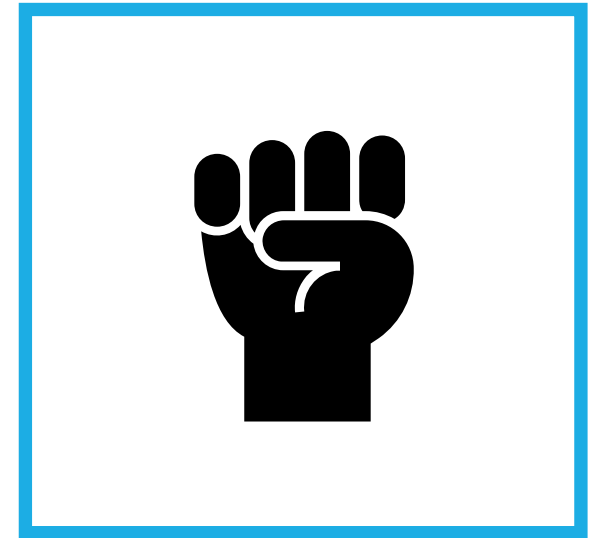
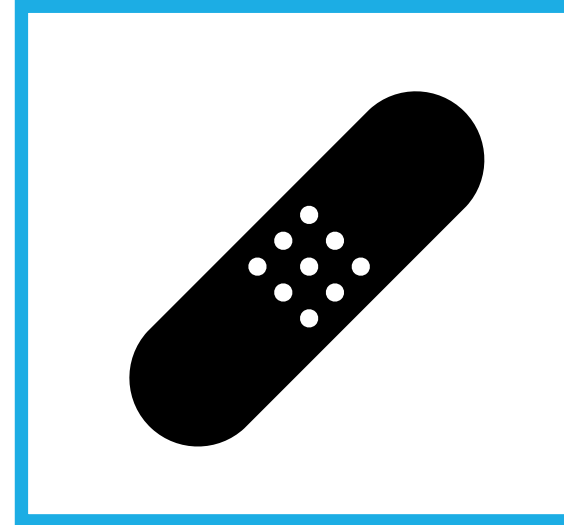
What is Harm Reduction?

Small h, small r

“A set of practical strategies and ideas aimed at reducing negative consequences associated with drug use.”

Big H, big R

“A movement for social justice built on a belief in, and respect for, the rights of people who use drugs.”



Meet people where
they're at...

BUT DON'T LEAVE THEM THERE.

Principles of Harm Reduction

Accepts, for better or worse, that licit and illicit drug use is part of our world and chooses to work to minimize its harmful effects rather than simply ignore or condemn them.

Understands drug use as a complex, multi-faceted phenomenon that encompasses a continuum of behaviors from severe use to total abstinence and acknowledges that some ways of using drugs are clearly safer than others.

Establishes quality of individual and community life and well-being — not necessarily cessation of all drug use — as the criteria for successful interventions and policies.

Calls for the non-judgmental, non-coercive provision of services and resources to people who use drugs and the communities in which they live in order to assist them in reducing attendant harm.

Principles of Harm Reduction Continued

Ensures that people who use drugs and those with a history of drug use routinely have a real voice in the creation of programs and policies designed to serve them.

Affirms people who use drugs (PWUD) themselves as the primary agents of reducing the harms of their drug use and seeks to empower PWUD to share information and support each other in strategies which meet their actual conditions of use.

Recognizes that the realities of poverty, class, racism, social isolation, past trauma, sex-based discrimination, and other social inequalities affect both people's vulnerability to and capacity for effectively dealing with drug-related harm.

Does not attempt to minimize or ignore the real and tragic harm and danger that can be associated with illicit drug use.

Radical Inclusivity

AND UNCONDITIONAL POSITIVE REGARD

Worker Stances for Clients Who Use Drugs

Edith Springer,
1996

Show client unconditional regard and caring. Acknowledge her or his intrinsic worth and dignity.

Be a real person. Let the client see you as you really are. "Blank screens are for movie theaters."

Don't get caught up in the client's urgency; take your time – practice mindfulness.

Be non-judgmental toward the behaviors of the client.

Be consistent with setting limits: control oneself not the client.

Empower the client.

We are not responsible for rescuing the client who is responsible for his or her own life. We are responsible for the intervention process: the client is responsible for the outcome. Trust the client's strength and ability.

Reinforcement is more effective than punishment. Use incentives when available.

Quality of life and well-being are the criteria for measuring success, not reduction in the consumption of drugs.

Recommended Reading

Worker Stances for Clients Who Use Drugs

- Available at: <https://injuryfreenc.org/wp-content/uploads/sites/19842/2020/05/Worker-Stances-for-Clients-Who-Use-Drugs-E.-Springer.pdf>

How Key Early Ideas Helped Shape Today's Harm Reduction Movement

- Available at: <https://filtermag.org/early-harm-reduction-movement/>

Undoing Drugs

- Available at: <https://www.hachettego.com/titles/maia-szalavitz/undoing-drugs/9780738285757/>

A circular wreath of various botanical illustrations surrounds a central white circle. The plants include green ferns, a red maple leaf, a green leaf with a red vein, a yellow flower, a purple flower, and a green leaf with a red vein. The wreath is set against a light blue background.

IMPACT EXCHANGE

What We Do!



Activities

StoreFront

Prevention

Wellness / Education

Outreach

Vending

Collaboration

Alliance Building



Primarily we are **HARM REDUCTION**

To exist and receive funds other services must be offered to gain funding





“ We believe in the moto
Think Health! Think Harm Reduction ”

Harm Reduction.....because it's the glue!





NEVER STOP WORKING TO MAKE THIS WORLD A BETTER PLACE.
OUR ACTIONS ARE NOT IN VAIN.
SOMEONE IS LISTENING
SOMEONE IS WATCHING.
AND SOMEONE IS BEING EMPOWERED BY YOU.

BE;

ACCEPTING - NON-JUDGEMENTAL - UNDERSTANDING - NON-COERCIVE -ASSURING
WHILE RECOGNIZING THE RESPONSIBILITIES OF OTHERS



Where There IS NO Support



- The 50-75000 syringes a MONTH which translates to 900,000 a YEAR
- Cookers, pipes, foil, literature the encourages any type of safe drug use.
- **Staff** for HARM REDUCTION.
 - There is support for staff associated with carrying out goals for grants but not for staff to run a harm reduction activities and the center. Every staff person has to get tired to a grant with its own deliverables.

Limited Support for:



- Approximately 20 - 40% of
 - Insurance costs for facilities, board of directors, vehicles, machines are covered.
 - required single point audits
 - rents – for store fronts, warehousing, storage
 - land lines, utilities, furniture

Support For Impact Exchange



- Financial help in the form of grants support projects for the following:
 - Disease testing
 - Incentives
 - Staffing to meet grant goals and objectives of grants
 - The Van purchase for outreach
 - IT support for computer and hardware
 - Condoms, covid tests, some medical supplies, literature, printing and some advertising.
 - The majority of the Vending Machines which includes IT software support
 - Sharps bio/Haz disposal by commercial carrier or in-house disposal at store front.

The StoreFront



- Provides safe injection supplies, in the form of syringes, preparation supplies for skin and injection.
- Provides a syringe disposal service to ensure participants have a safe method of disposing of used injection equipment/syringes.
- Provides overdose training and medication (naloxone – nasal and injectable)
- Provides drug substance and injection device/works testing to establish content present.
- Provides HIV rapid testing with confirmation testing as necessary with referrals for PrEP;
- Hep C rapid testing and specimen collection or referral for confirmation; referral for treatment and/or follow-up along with education concerning transmission.
- COVID testing and self testing education -referral for vaccine follow-up as needed.

The StoreFront Continued



- Provides an array of incentives for participating in harm reduction and returns/disposal of syringes, HIV, Hep-C, and Covid testing
- Clothing, meals-ready-to-eat, bus passes, fast food cards, department store gift cards; sunglasses; hats; sleeping bags/blankets; and water
- Kits for wound care, first aid, safer-sex supplies, pregnancy tests, hygiene products, along with packaged condom/lubricant supplies are available from staff or a free use vending machine.
- Access to related programs working within the shopping mall complex
 - HIV medical transportation through UBER
 - HIV rapid start transportation to participating facilities / programs offering immediate treatment services.
 - PEER Embedded Program for referral to drug treatment services
 - Wound care referral through TracB Wellness and Education

Some numbers from back then!



- April 1, 2017- Feb 21, 2021
- Over 397,000 syringes out
- Over 3,800 naloxone out
- 766 pregnancy tests
- 1,964 safe sex kits
- Opened for SSP services 2/2017 gave out 90 syringes that month, now (2022) we average 45-50,000 and sometimes as high as 77,000.

TracB Wellness and Education Center



Trac-B Wellness offers patients access to:

- ❖ Peer Support & Counseling
- ❖ Hepatitis-C Treatment (end of fire quarter of 2023)
- ❖ Abscess Care
- ❖ STD Screening
- ❖ General Medical Care / referral
- ❖ Collaboration with existing HIV and STI public clinics in So. NV
- ❖ Medication Assisted Treatment (MAT) - buprenorphine & naltrexone (estimated 2nd quarter of 2023)

TracB Wellness and Education Center Continued



When fully operational towards the end of 1st Quarter 2023

- Will be under the leadership of Dr. Jerry Cade
- Part Time NP
- Part Time Medical Assistant
- Laboratory for rapid tests
- Open late afternoons and week ends

Vending Program



- Currently Impact Exchange in collaboration with Trac-B Exchange LLC provides vending services with various community partners throughout the state. This program handles supplies, machine inventory maintenance, insurance, supply development and warehousing.
- Current machines collaboration sites are:
 - Hawthorne-outside location city building;
 - Las Vegas–indoor locations – 6 SSP & 2 “other”
 - The Center - Southern Nevada Health District - Ctr for Behavior Health-Desert Inn and Cheyenne of-Huntridge Family Clinic - TIM Care.
 - Impact Exchange – Safer Sex & Hygiene machine (no SSP supplies)
 - Impact Exchange – donation machine (odd items and snacks)
 - Reno indoors locations – 5 (1-TBD)
 - Washoe Sherriff's Detention - Behavioral Health Group - Life Change Centers Reno and Sparks.

Vending Program Continued



Currently the Vending Program has:

- 3 machines are ready for placement in Clark County area.
 - TIM Care machine currently being repaired,
- All Reno machines inactive pending additional setup. Machines in Reno area are awaiting supplies, card readers, and inventory storage/office space rental and sharps disposal bin delivery from Las Vegas.
 - 1 machine is ready for placement in Reno/Washoe County area.
- 2 temperature-controlled machines, are being prepared for placement in So. NV (rural or urban)

Outreach Stationary SSP Sites



- Two additional fully stocked SSP sites are being developed currently.
- Both will be twice a week – four hours per day – sites
- Plans are for central-south valley and east side valley of Clark County
- These are all supplied through our warehouse facility which allows for development, packaging, inventory and staff space for Impact Exchange.

Harm Reduction in NV



Currently in the State of Nevada – there are the following HR projects

- Las Vegas – Impact Exchange – also called TracB
- Reno – Trac-B Exchange LLC Vending Project in collaboration with Impact Exchange
- Elko* – Trac-B Exchange LLC PEER Project in collaboration with Impact Exchange
- Winnemucca* - Trac-B Exchange LLC PEER Project in collaboration with Impact Exchange
- Reno – HOPES Exchange Point (FQHC)
- Reno* – Black Wall Street Reno

Outreach Services




- Currently two methods are employed in Las Vegas for outreach services:
 - Collaboration with SNHD and other agencies jointly visiting areas with Impact Exchange providing the SSP side of the service delivery
 - Solo outreach utilizing Impact Exchange Van to deliver supplies, incentives, home HIV test kits, and food/water to various encampment throughout Clark County.
 - Both of these programs are building to reach goals of two complete days of outreach.



Summary

Impact Exchange works in conjunction with the communities to provide safe injection supplies; overdose prevention training with accompanying medical supplies; disposal of used syringes and injection supplies; substance and device drug testing; and participant drug testing training. In collaboration with various funding agencies, HIV, Hep-C and Covid testing is available along with referrals for drug and alcohol treatment. Wellness services including disease exams; wound care and evaluation; additionally, drug and alcohol assessments are available through the TracB Wellness and Education facility adjacent to the StoreFront.





Thank you,
Questions



Rickey R. Reich (Rick)

Executive Director

Impact Exchange

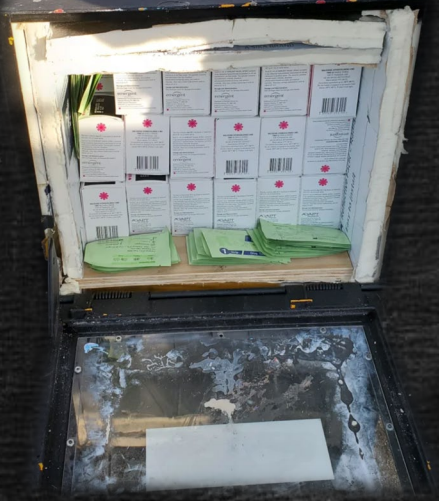
rick@tracbexchange.com

(702) 960-2909

OVERDOSE PREVENTION AND NARCAN EDUCATION

- Gathering and assessing data, Identifying red zones.
- Implementing safety measures within the schools and educating teachers and students on proper usage of Narcan kits.
- Hosting {stop the bleed} and CPR classes.
- To provide counter measures to ensure public safety and decrease overdose and death rates in Washoe county.

**HARAM
REDUCTION
EVERYWHERE!!**



BLACK WALL STREET RENO



NARCAN

Washoe County Opioid Crisis & Overdose
Prevention

Vending Machine with Sharps Bin



11. Review and Approve Annual Report of the SURG

(For Possible Action.)

Dr. Terry Kerns, Office of the Attorney General, and Laura Hale, Subcontractor for Social Entrepreneurs, Inc.

12. Review and Consider Items for Next Meeting

(For Discussion.)

Dr. Terry Kerns and Emma Rodriguez, Social Entrepreneurs, Inc.

Items for Next Meeting

- 82nd (2023) Session of Nevada Legislature Update
- Update on Opioid Litigation, Settlement Funds, and Distribution
- Update on status of SURG, ACRN and Cross-Sector Task Force
- Fund for a Resilient Nevada Update
- SURG Subcommittee Report Outs



13. Public Comment

(Discussion Only.)

Public Comment Cont.

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- Before commenting, please state your full name for the record.
- Comments can also be emailed to lhale@socialent.com. These comments and questions will be recorded in meeting minutes.

14. Adjournment

Additional Information, Resources & Updates Available At:

[https://ag.nv.gov/About/Administration/Substance_Use_Response_Working_Group_\(SURG\)/](https://ag.nv.gov/About/Administration/Substance_Use_Response_Working_Group_(SURG)/)



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