

MEETING NOTES

Statewide Substance Use Response Working Group
Treatment and Recovery Subcommittee Meeting

Tuesday, May 7, 2024
12:00 p.m.

Zoom Meeting ID: 894 8937 5298
No Physical Public Location

Members Present via Zoom or Telephone

Dr. Lesley Dickson, Dorothy Edwards, Jeffrey Iverson, and Assemblywoman Claire Thomas

Members Absent

Chelsea Cheatom and Steve Shell

Social Entrepreneurs, Inc. Support Team

Kelly Marschall and Laura Hale

Office of the Attorney General

Deputy Attorney General Rosalie Bordelove, Dr. Terry Kerns, and Ashley Tackett

Members of the Public via Zoom

Tray Abney, Lauren Beal, Belz & Case Government Affairs (scribe), Michael Berry, Morgan Biaselli, Hannah Branch, Trey Delap, Donna Laffey, Notetaker Morgan, Ezra Rose, Sabrina Schnur, Lea Tauchen, Joan Waldock (DHHS), and Stephanie Woodard (Guinn Center)

1. Call to Order and Roll Call to Establish Quorum

Acting Chair Edwards called the meeting to order at 12:01p.m. Ms. Marschall called the roll and established a quorum.

2. Public Comment

Acting Chair Edwards read the statement on public comment and Ms. Marschall provided call-in information.

There was no public comment.

3. Review and Approve Meeting Minutes from March 27, 2024, Treatment and Recovery Subcommittee Meeting

- Mr. Iverson made the motion to approve the minutes.
- Dr. Dickson seconded the motion.
- The motion carried unanimously.

4. 2023 Presentation Safer Consumption Sites Discussion for 2024

Acting Chair Edwards referenced the 2023 presentation and asked members for any related recommendations for 2024.

Ms. Marschall summarized the previous presentation from Kailin See in the Fall of 2023 when this subcommittee was finalizing recommendations. Members had agreed to workshop recommendations for this item in 2024. Individual subcommittee members can make recommendations through the link

sent to all members, or this item could be agendized for a future meeting. The recording of the prior meeting can be made available to members of the subcommittee and the public for review if wanted.

Assemblywoman Thomas appreciated the reintroduction of this topic, recalling the importance of Ms. See's presentation. Ms. Marschall explained that there was a timing issue with trying to build out justifications and research links for a related recommendation in 2023. She asked if there was a subcommittee member who would like to draft the recommendation submission for further review.

Dr. Dickson agreed she would like to workshop this, and she believed Safer Consumption Sites would need to go through the Nevada legislature. She thought Dr. Stephanie Woodard might be able to address that question. Ms. Bordelove confirmed it would be allowable for Dr. Woodard to respond as a member of the public.

Dr. Woodard, Guinn Center, recalled that this question had come before the Nevada legislature in previous sessions. She believed statutory language would be needed to enable consumption sites. Members could include legislative history in their future discussion and possible workshopping of the recommendation.¹

Acting Chair Edwards summarized the need for a review before making a recommendation. Ms. Marschall noted that Ms. Hale tracks legislation related to the SURG and their recommendations and could follow up on this item.

Acting Chair Edwards asked for a motion to add this item to the next agenda.

- Assemblywoman Thomas made the motion.
- Mr. Iverson seconded the motion.
- The motion carried unanimously.

5. Priority Issues and Presentations for 2024

Acting Chair Edwards asked Ms. Marschall to review the following slides (available on the [SURG website](#)):

Planning for 2024 Treatment and Recovery Subcommittee Meetings

Current Presenter/Topic Suggestions for Upcoming Meetings:

- Alternative Pain Management – Sanje Sedera, Las Vegas Integrative Medicine (outreach conducted in April but not scheduled yet)
- Josh Luftig, National Implementation Leader, Director of Harm Reduction – National Bridge Network
- Sarah Windels, National Program Director – National Bridge Network; Fellow – Johns Hopkins Bloomberg American Health Initiative (Presented to the Response Subcommittee in May 2023)

Treatment and Recovery Meeting Dates:

- June 4, August 6, September 3, November 5 from 12:00 - 1:30pm

¹ Dr. Woodard followed up with links for [Assembly Bill 345](#) from 2021, and suggested the [Clark County Regional Opioid Task Force](#) could leverage data to recommend safe consumption sites.

- **Alternative Pain Management**
Ms. Marschall clarified that there was a separate presentation from Dr. Nairizi on Alternative Pain Management, but the Integrative Medicine suggested presentation is about alternative therapy such as acupuncture and yoga.

Assemblywoman Thomas clarified that Sanje Sedera is the owner of Las Vegas Integrative Medicine, but his wife is the doctor. She will follow up with them and connect them with Kelly to schedule a presentation.

- **National Bridge Network**
Ms. Marschall recalled LAPP (Legislative Analysis and Public Policy Association) recommendations from the last SURG meeting related to bridge programs in Emergency Rooms, and that Dr. Dickson had also brought forward a recommendation in 2022.² Sarah Windels from the National Bridge Network presented to the Response Subcommittee in May 2023, so members may want to review previous presentations before scheduling another presentation.

Dr. Dickson serves on the Bridge Program Committee for Nevada which has made progress with some emergency rooms. Recently, a patient was given buprenorphine when they left the emergency room. She thought Dr. Kelly Morgan would be a good spokesperson for Nevada and said she would provide her contact information.

Acting Chair Edwards reviewed Recommendation #1 from the next slide:

Recommendations Received and Next Steps

• **Recommendation #1:** Based on presentation to the WRBHPB: A bill that would ensure Narcan be wherever an AED machine is located, and on all campuses under our Nevada System for Higher Education.

- Student unions
- Health centers
- All levels of the dormitories
- Within Residential Advisor's domiciles

A bill that would advocate for the training of the administration of Narcan which can take place:

- During online Freshman orientations much like we already disseminate information about Title IX
- During orientation week
- Training could be offered throughout the year by various clubs and programs within each institution's design.

• **Submitted by:** Dorothy Edwards

² This recommendation was combined with a broader recommendation approved by the SURG: *Expand access to MAT and recovery support for SUD, limit barriers to individuals seeking treatment regardless of the ability to pay, and encourage the use of hub and spoke systems, as well as recovery support, including use and promotion of telehealth, considering the modifications that have been made under the emergency policies, and pursuing innovative programs such as establishing bridge MAT programs in emergency departments.* (Treatment and Recovery #1, Prevention #8c)

Part of Ms. Edwards' role is to facilitate the Washoe Regional Behavior Health Policy Board, which is one of five regional boards in Nevada. Each Board is allocated bill draft requests (BDRs) for changes, revisions, or legislative action on behavioral health activities. The Washoe Board has done outreach with various community stakeholders for input including presentations. Michael Berry, a Peer Support Specialist at Northern Nevada HOPES, proposed expanded availability of Narcan beyond the Student Health Center at University of Nevada, Reno, including the Student Union and in the dormitories. Further, Resident Advisors (RAs) should have the agency to assist with this lifesaving care for people in the throes of overdose. Acting Chair Edwards suggested adjustment of student health fees to support placement of Naloxone.

Dr. Dickson thought this sounded great and she wants to get Narcan into more places where it will be used and agreed that funding would be an issue.

Mr. Berry attended this meeting and responded to Dr. Dickson's question, upon request from Acting Chair Edwards. Mr. Berry understands that Naloxone is already being provided by the state of Nevada. Distribution sites such as the University can sign up for this program, which requires a short training. The cost could be absorbed through fees, as Ms. Edwards suggested. He reiterated that the state of Nevada has already supported distribution. Acting Chair Edwards thanked Mr. Berry for providing information.

Ms. Marschall read Recommendation #2 submitted by Chelsi Cheatom:

Recommendations Received and Next Steps

- **Recommendation #2:** Support access and linkage for treatment of trauma for people with substance use disorder (SUD) or those who have overdosed and for surviving family members after an overdose fatality. Support training for healthcare professionals to identify and address trauma.
 - **Submitted by:** Chelsi Cheatom
 - **Justification:** Treating trauma is an important step in supporting people with SUD and mental health. Trauma -informed treatment would include looking at the effects of violence, adverse childhood experiences (ACES) , sexual assault, incarceration, overdose, etc. as well as supporting trauma related care for surviving family members after an overdose or overdose fatality.
 - According to SAMHSA, The impact of child traumatic stress can last well beyond childhood. In fact, research shows that child trauma survivors are more likely to have:
 - Learning problems, including lower grades and more suspensions and expulsions
 - Increased use of health services, including mental health services
 - Increased involvement with the child welfare and juvenile justice systems
 - Long term health problems, such as diabetes and heart disease
 - Trauma is a risk factor for nearly all behavioral health and substance use disorders (<https://www.samhsa.gov/child-trauma/recognizing-and-treating-child-traumatic-stress#impact>).

Ms. Marschall asked if members wanted to move this recommendation forward with a presentation from Becky Haas, an experienced trainer on adverse childhood experiences (ACES), or Dr. Dan Sumrok, a Trauma Informed Care expert. Alternatively, Ms. Cheatom could walk them through her recommendation at a future meeting.

Mr. Iverson said he was okay moving forward with the recommendation without a presentation. Dr. Dickson supported inviting one or both presenters to a future meeting. Acting Chair Edwards asked if

a motion was needed. Ms. Bordelove said requests for future agenda items do not require a motion, but determining items for reporting out recommendations to the full SURG requires a motion. Mr. Iverson said he wasn't opposed to a presentation if it would be helpful to other committee members. Acting Chair Edwards would also like to see a presentation, as a newer member of the SURG. Ms. Marschall will follow up with Ms. Cheatom for a June presentation.

Ms. Marschall read Recommendation #3 from Mr. Shell

Recommendations Received and Next Steps

- **Recommendation #3 Justification:** Individuals who have felony backgrounds have limited opportunities to work as certified peer recovery support specialists in hospitals, including behavioral health hospitals, due to requirements that are set by the Nevada Bureau of Health Care Quality and Compliance. Current requirements do not allow a hospital to hire a peer specialist who has had a felony in the last five years. As a result, this has excluded some peers who are stable and in recovery but are still within the five-year period from their felony conviction. I believe individuals who were convicted of drug offenses or other offenses that do not involve violent acts or sexual exploitation should be considered. In a hospital setting peers would only work under the supervision of a physician, nurse or a therapist and would not be working independently with patients.
- **Research link(s):** N/A
- **Possible presenters:** A representative from the Nevada Bureau of Health Care Quality and Compliance or Division of Public and Behavioral Health.

Assemblywoman Thomas asked about the need for Nevada Revised Statutes (NRS) related to this question. Ms. Bordelove said she is not an expert on the NRS in this area, but members can make recommendations to revise NRS through requests for bill drafts. Assemblywoman Thomas believes this will require a BDR. Ms. Marschall suggested staff from the Bureau of Health Care Quality and Compliance (HCQC) could address whether there is something in NRS that would govern this issue. She will follow up with Chair Shell to determine the need for input from HCQC staff.

Ms. Marschall summarized that the subcommittee has these three recommendations to workshop, in addition to a fourth on safe consumption sites and potentially a fifth with the Bridge program. Subcommittee members can also submit additional recommendations through the survey link from Social Entrepreneurs, Inc.

6. Discuss Report Out for July SURG Meeting

Ms. Marschall noted the opportunity to share information with the larger SURG group and to align on similar issues. They could request that Chair Shell report out in July on the list of recommendations they are working on. There was no further discussion from members. Acting Chair Edwards supported this next step on behalf of the members.

7. Public Comment

Acting Chair Edwards read instructions for public comment and call-in information.

Michael Berry expressed his gratitude to Acting Chair Edwards for bringing his suggestion to the subcommittee. He appreciated the members' time and consideration.

8. Adjournment

This meeting was adjourned at 12:59 p.m.

Chat File

00:33:13 Laura Hale: Happy to track that information

00:52:49 Asm Claire Thomas: Just spoke with Sanje Sedera and he will contact Kelly today.

00:54:07 michael berry (he/him): May I make a comment on that

DRAFT