

### OFFICE OF THE ATTORNEY GENERAL

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# Statewide Substance Use Response Working Group Meeting

April 10, 2024

# 1. Call to Order and Roll Call to Establish Quorum

Chair Ford

## 2. Public Comment

(Discussion Only)

### Public Comment

• Public comment shall be limited to three (3) minutes per person. We will begin with comments from Las Vegas and then invite comments from Carson City, followed by virtual participants.

#### In Person

- Please form a line.
- Before commenting, please state your full name for the record.

# Public Comment

#### **Attending Virtually**

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- •When prompted enter the Webinar ID: 841 1615 6896
- •Then enter the Meeting Passcode: 676835
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\*Comments can also be emailed to <a href="mailto:lhale@socialent.com">lhale@socialent.com</a>.
These comments and questions will be recorded in meeting minutes.

# 3. Review and Approve Minutes for January 10, 2024, SURG Meeting

(For Possible Action)

Chair Ford

# 4. Update on Opioid Litigation, Settlement Funds, and Distribution

(Information and Discussion)

Mark Krueger, Office of the Attorney General, or designee

# 5. Jail Medications for Opioid Use Disorder (MOUD), Community Continuation of Care (CCC) Model.

(Information and Discussion)

Bill Teel, Las Vegas Metropolitan Police Department (LVMPD), Captain Retired/Jail Industry Consultant



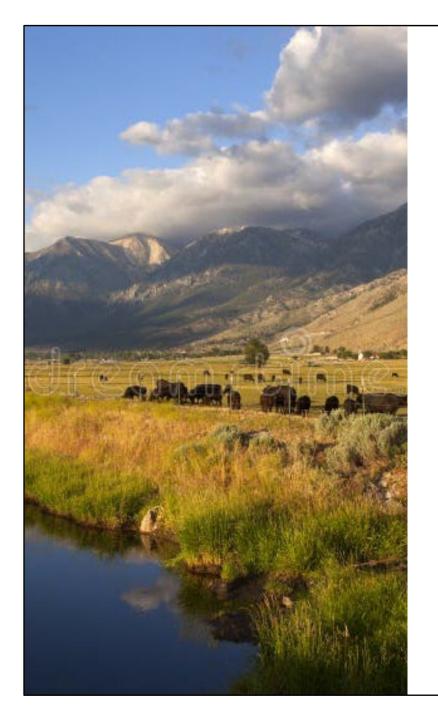
# PRESENTATION TO THE SUBSTANCE USE RESPONSE GROUP (SURG)

Bill Teel

LVMPD Captain (Retired) - Consultant

Contracted with the State of Nevada DHHS / NPHF

Fund For a Resilient Nevada



### Disclosures

Pursuant to NRS 433.734, one of the DHHS's responsibilities is the development of the statewide needs assessment and a statewide plan to identify priorities. FRN recoveries must be used to address risk, harms and impacts of the opioid crisis on the state, using a data-driven and evidence-based approach. The Jail MOUD / Community Continuation of Care effort is funded through the FRN.

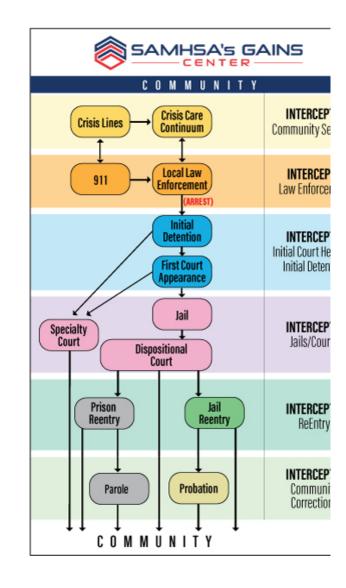
### Introduction

- 2023 Nevada Risk Needs Assessment / Research Phase
  - Opioid Use Disorder (OUD) and its impact on rural jails.
    - Identify the barriers and pain points to implementing a medication assisted treatment program (MAT)
- 2024 Implementation Phase
  - Jail Medication Opioid Use Disorder (MOUD) / Community Continuation of Care Plan (CCC) - Model Development
    - Pilot Programs in Lander and Esmeralda Counties



### Issues

- Identifying solutions to the gaps within the Sequential Intercept Model:
  - Deflection: Access to community services
  - Diversion: Law Enforcement engagement
  - Intake: Initial detention / Initial court hearings)
  - Jail/Courts: Access to care & programs / Specialty courts
  - ReEntry Jail / Prison
  - Community Corrections: Parole / Probation / Home Detention



## **Special Populations**

- Incarcerated adults in Nevada rural jails
- Developing an approach for incarcerated youth

# What's Working Well / Evidence Based Practice

• 2023 Research phase provided awareness of the gaps

- 2024 Implementation phase has demonstrated that:
  - Counties are willing to work on solutions with the State of Nevada
  - Solutions to implementing Jail MOUD Program and a Community Continuation of Care Model are available

## Gaps to implementing Jail MOUD

- Lack of access to medical and mental health resources
  - Community & Jail
- Lack of funding
- Lack of pharmacy access to MAT Medications (Buprenorphine, Naltrexone, Methadone)
- Lack of discharge planning / reentry process

Key Takeaways of 23 Jails surveyed:

- 87% don't have community deflection
- 74% don't have diversion alternatives
- 78% are reactive & reliant on EMS most of the time
- Only 1 jail is using a Telehealth option
- 65% don't screen specifically for OUD at intake
- 91% don't have a formal MAT Program
- 65% don't have access to MAT Medications
- 1 jail does not have access to Narcan
- Only 1 site (Douglas) indicated they have CHW's
  - I believe there is a statewide lack of understanding about CHW's and requires more education



Key Takeaways of departments surveyed: Top three (3) barriers to implementing

- **MAT Program** 
  - Lack of onsite medical & mental health resources
  - Lack of funding
  - Lack of community resources
- 87% don't have MDT's to case manage those most at risk
- 65% don't incorporate discharge planning (to include FASST's)
- 70% don't offer Medicaid enrollment
- 22 out of 23 jails willing to work with state on developing MOUD Model



## Recommendation(s)

- Be engaged during this Jail MOUD / CCC Model development process
  - I can provide status updates to the appropriate SURG Sub-Committees

### References

- <u>Americans with Disabilities Act keywords Burton Blatt Institute Syracuse University</u>. As reviewed on March 15, 2024.
- <u>Criminal Justice System Sequential Intercept Model | SAMHSA</u>. As reviewed on March 15, 2024.

### **Contact Information**

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Title	Consultant
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# 6. Report on Expenditure of Funds from the Fund for a Resilient Nevada

(Information and Discussion)

Vanessa Diaz, Quality Assurance Specialist II, Department of Health and Human Services – Director's Office, Fund for a Resilient Nevada

# 7. SURG Tracker for Selected Items Under the Joint Interim Standing Committee on Health and Human Services

(Information and Discussion)

Laura Hale, Social Entrepreneurs, Inc.

# 8. Annual Survey Results from SURG Members

(Information and Discussion)

Emma Rodriguez, Social Entrepreneurs, Inc.

### Annual Survey for SURG Members

- Survey link distributed to SURG members on March 7, 2024.
- Survey closed on March 27, 2024.
- Nine responses received from SURG members.
- Complete responses are posted on SURG website and are summarized on the following slides.

### Survey: What Worked Well in 2023?

- Presentations from subject matter experts
- Communication from subcommittees to the full SURG
- Good collaboration
- Presenting recommendations/voting on them
- Entire process has worked well

### Survey: What Could be Improved?

- Structure and focus of subcommittee
- Have all SURG members speak and contribute
- Have everyone present at the start of the meeting
- Slido ranking process
- Handling of recommendations that do not get ranked

### Distribution of Annual Report

### Suggestions from January SURG meeting:

- Regional Behavioral Health Policy Boards
- Prevention Coalitions
- All funded cities/counties in the One Nevada agreement
- Clark County Opioid Task Force
- Southern Nevada Opioid Advisory Council (SNOAC)
- Press conference

### Survey: Distribution of Annual Report

- Shared report:
  - Nevada Sheriffs' and Chiefs' Association at their quarterly meeting
  - DPBH shared via email with SUPTRS staff
- Additional suggestions:
  - Nevada Psychiatric Association
  - Hospital Association
  - Nursing Association
  - Social Work Association
  - School boards
  - Continually share with regular reminders to RBH policy boards, prevention coalitions, etc.

# Survey: Choice Point Thinking/Racial and Health Equity

- Discuss further at April SURG meeting (5 responses)
- Continue the process of evaluating how the recommendations advance racial and health equity (3 responses)
- Need more information (2 responses)
- Use Choice Point Thinking Tool (1 response)
- Not sure (1 response)

# Survey: LAPPA 2023 State of the States Legislative Roadmap Question

The LAPPA 2023 State of the States Legislative Roadmap for Reducing Overdose Deaths and Increasing Access to Treatment identifies four strategies that Nevada has not adopted:

- STRATEGY 5: REQUIRE STATE AND LOCAL CORRECTIONAL SETTINGS TO PROVIDE WITHDRAWAL MANAGEMENT SERVICES
- STRATEGY 7: REQUIRE ALL PUBLIC HIGH SCHOOLS TO STORE NALOXONE ON SITE FOR RESPONDING TO OVERDOSES AT SCHOOL AND AT SCHOOL-SPONSORED EVENTS
- STRATEGY 8: INCREASE ACCESS TO SUBSTANCE USE TREATMENT IN EMERGENCY DEPARTMENT SETTINGS
- STRATEGY 10: SUPPORT INFORMATION SHARING WITH OVERDOSE FATALITY REVIEW TEAMS

Do you agree that Nevada is not currently implementing the strategies above, and if so, should Nevada try to implement them? (Responses summarized on following slides.)

## Survey: LAPPA 2023 State of the States Legislative Roadmap Responses (Part 1)

- STRATEGY 5: REQUIRE STATE AND LOCAL CORRECTIONAL SETTINGS TO PROVIDE WITHDRAWAL MANAGEMENT SERVICES
  - Agree unless it comes in the form of an unfunded mandate
  - Some jurisdictions do support withdrawal management in correctional settings
  - I am aware of work being done to address number 5
  - Thought this was proposed during last legislative session
  - Strongly support

### Survey: LAPPA 2023 State of the States Legislative Roadmap Responses (Part 2)

- STRATEGY 7: REQUIRE ALL PUBLIC HIGH SCHOOLS TO STORE NALOXONE ON SITE FOR RESPONDING TO OVERDOSES AT SCHOOL AND AT SCHOOL-SPONSORED EVENTS
  - Agree
  - Under the impression that all public high schools have Naloxone onsite, would like to get clarification
  - Sounds like an enhancement to AB205 from the 2021 legislative session; barrier to mandating this is the cost to schools, so if there is an opportunity to address the ongoing cost then this is a good idea

### Survey: LAPPA 2023 State of the States Legislative Roadmap Responses (Part 3)

- STRATEGY 8: INCREASE ACCESS TO SUBSTANCE USE TREATMENT IN EMERGENCY DEPARTMENT SETTINGS
  - Agree/Strongly Support
  - Some Emergency Departments do take-home Buprenorphine
  - There are some efforts around this and I think we should do it; recommend seeking expertise from National Bridge (formerly California Bridge) who has set the standard for how to do this.

### Survey: LAPPA 2023 State of the States Legislative Roadmap Responses (Part 4)

- STRATEGY 10: SUPPORT INFORMATION SHARING WITH OVERDOSE FATALITY REVIEW TEAMS
  - Agree
  - The state ODTA group did a report on this and described their recommendations/successes/barriers in this report: https://nvopioidresponse.org/wp-content/uploads/2023/08/NVOD2A-OFR-Final-Report-FINAL-ADA-508.pdf I recommend SURG review the report to see if there are actionable steps to implement this strategy.

## Survey: LAPPA 2023 State of the States Legislative Roadmap Responses (Part 5)

#### Additional comments:

- I think we should implement each of these strategies but also, we should look at what is already being done and how it is working.
- Yes, Nevada should work towards implementing all of them, if work has not been done in those spaces to do so.
- Some of the above are being done in certain jurisdictions, but not all.
- I think some of these strategies are being implemented in certain counties but they are definitely not being implemented across the state. We need to have some kind of nucleus where all information is available to all. It seems that there is a communication gap.
- Some components are implemented but perhaps not to the full extent, i.e., the schools to store naloxone at all public schools and school-sponsored events.

### Survey: Suggestions for developing Recommendations to Address LAPPA Strategies

#### • Funding:

• Ensure that the 4 strategies are addressed using opioid settlement funds only

#### • Presentations:

- Have presentations from SMEs who are in the process/have already implemented these strategies
- Presentation by the school districts or State Department of Education to help develop feasible recommendations
- Presentation from National Bridge

#### • Collaboration:

- Invite representatives from the areas that will need to be involved, such as NV Hospital Association for #8 and NV State Superintendent's Office for #7
- Possible BDRs and/or collaboration with other groups that may be interested in and/or sponsoring BDRs that support one or all of the above strategies

#### • Other:

- Bring these back up as policy recommendations are being considered
- Put a focus on the mental aspect

### Survey: Additional Comments/Feedback

- How do we make an impact on our youth? Prevention is key.
- Thanks to support team for coordination
- Presentation on Oregon's current status on decriminalization and the subsequent recriminalization of drugs

# 9. Potential SURG Expansion and Proposed New Members

(For Possible Action)

Chair Ford

## Potential SURG Expansion and Proposed New Members

- NRS 458.460 designates specific members to serve on the SURG and other members are appointed by the Attorney General, Department of Health and Human Services, Nevada Senate, and Nevada Assembly.
- The *Proposed SURG Membership Additions* document provides details and justifications for the following proposed categories:
  - 1. Member of the General Public
  - 2. Fire/EMS
  - 3. Family Services/Foster Care
  - 4. Director of the Department of Indigent Defense Services, or her designee (Public Defender)
  - 5. Nevada's District Attorney Association

# 10. SURG Annual Report Distribution

(For Possible Action)

Chair Ford

# Report Distribution Suggestions from January Meeting and Survey

- Regional Behavioral Health Policy Boards
- Prevention Coalitions
- All funded cities/counties in the One Nevada agreement
- Clark County Opioid Task Force
- Southern Nevada Opioid Advisory Council (SNOAC)
- Press conference
- Nevada Psychiatric Association
- Hospital Association
- Nursing Association
- Social Work Association
- School Boards
- Continually share with regular reminders to RBH policy boards, prevention coalitions, etc.

# 11. Review and Consider Items for Next Meeting

(Discussion Only)

Dr. Terry Kerns, Office of the Attorney General

### July 10, 2024 Agenda Items

- Subcommittee report out from May and June meetings
- Presentation on the Nevada Behavioral Health Workforce Development Center from Dr. Sara Hunt
- Update on Opioid Litigation, Settlement Funds, and Distribution
- SURG Expansion/Proposed New Members

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## 13. Adjournment

#### Additional Information, Resources & Updates Available At:

https://ag.nv.gov/About/Administration/Substance Use Response Working Group (SURG)/



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