



OFFICE OF THE ATTORNEY GENERAL

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TREATMENT & RECOVERY SUBCOMMITTEE

Substance Use Response Group (SURG)

June 17, 2025

3:00 pm

1. CALL TO ORDER AND ROLL CALL TO ESTABLISH QUORUM

Chair Shell

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

Member	SURG Role	Committee Role
Chelsi Cheatom	Harm Reduction Program	Member
Dr. Lesley Dickson	Healthcare Provider with SUD Expertise	Member
Dorothy Edwards	Washoe County Services Agency Representative	Member
Assemblymember Heather Goulding	Member of the Assembly who is appointed by the Speaker	Member
Jeffrey Iverson	Person in Recovery from an SUD	Member
Steve Shell	Hospital Representative	Chair

2. PUBLIC COMMENT

Public Comment

- Public comment will be received via Zoom by raising your hand or unmuting yourself when asked for public comment. Public comment shall be limited to three (3) minutes per person (this is a period devoted to comments by the general public, if any, and discussion of those comments). No action may be taken upon a matter raised during a period devoted to comments by the general public until the matter itself has been specifically included on an agenda as an item upon which action may be taken pursuant to NRS 241.020.
- If you are dialing in from a telephone:
 - Dial (253) 205-0468
 - When prompted enter the Meeting ID: 894 8937 5298
 - Please press *6 so the host can prompt you to unmute.
- Members of the public are requested to refrain from commenting outside the designated public comment periods, unless specifically called upon by the Chair.

3. REVIEW AND APPROVE MINUTES FROM MAY 22, 2025 TREATMENT & RECOVERY SUBCOMMITTEE MEETING

Chair Shell

**4. PRESENTATION RELATED TO PROPOSED
RECOMMENDATION: “A RETROSPECTIVE
ASSESSMENT OR/ AND PROSPECTIVE STUDY
WOULD BE CONDUCTED TO ASSESS THE
OUTCOMES OF PATIENTS FOLLOWING
DISCHARGE FROM DETOXIFICATION AND
EXAMINE MORTALITY AND OVERDOSE”**

John Hamilton, Liberation Programs, Inc.

Outcomes of Patients Following Discharge from Detoxification

John Hamilton

President and CEO

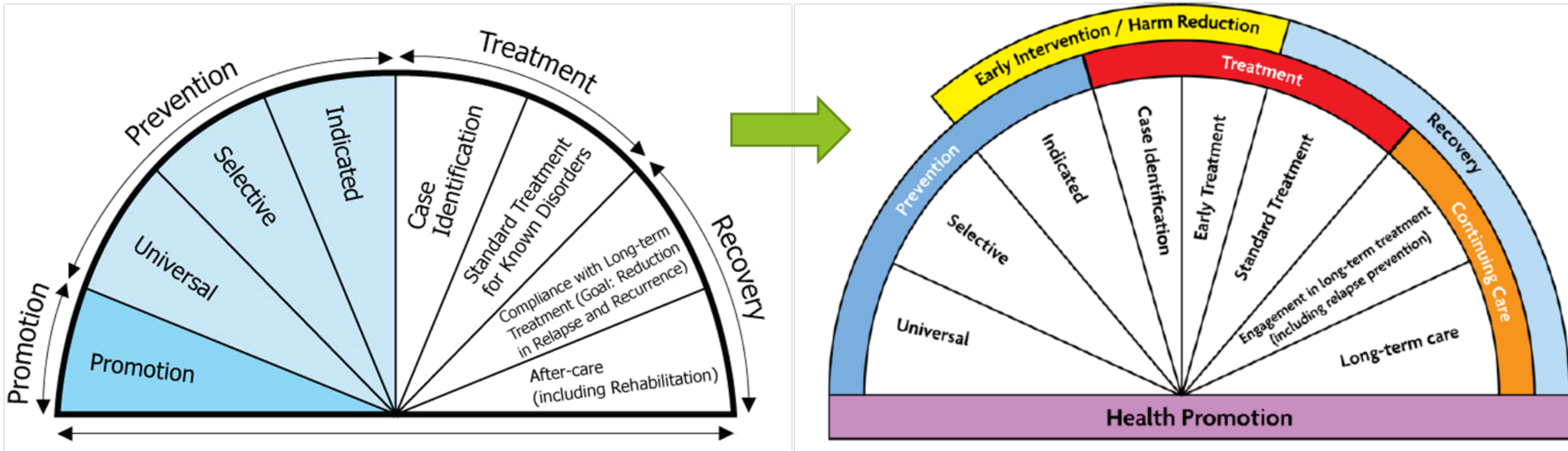
Liberation Programs, Inc.

Bridgeport, Connecticut

John.hamilton@liberationprograms.org



Prevention in Context – Continuum of Care



Sources: www.ncbi.nlm.nih.gov; www.iknowmine.org

Why People Take Drugs



To feel good

To have novel:
Feelings
Sensations
Experiences
And
To share them
(Connection)



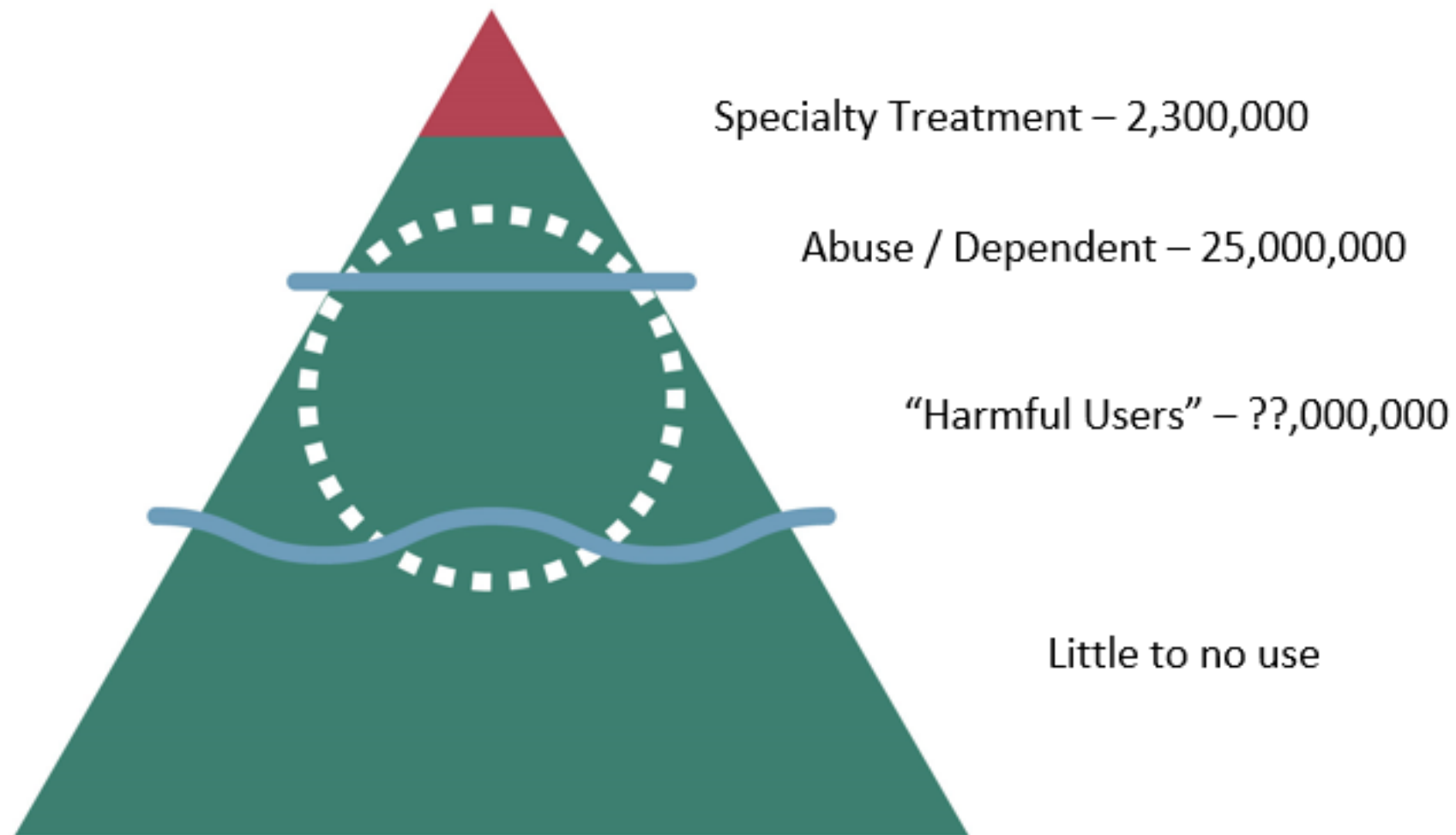
To feel better

To lessen:
Anxiety
Worries
Fears
Depression
Hopelessness
Withdrawal
(Disconnection)



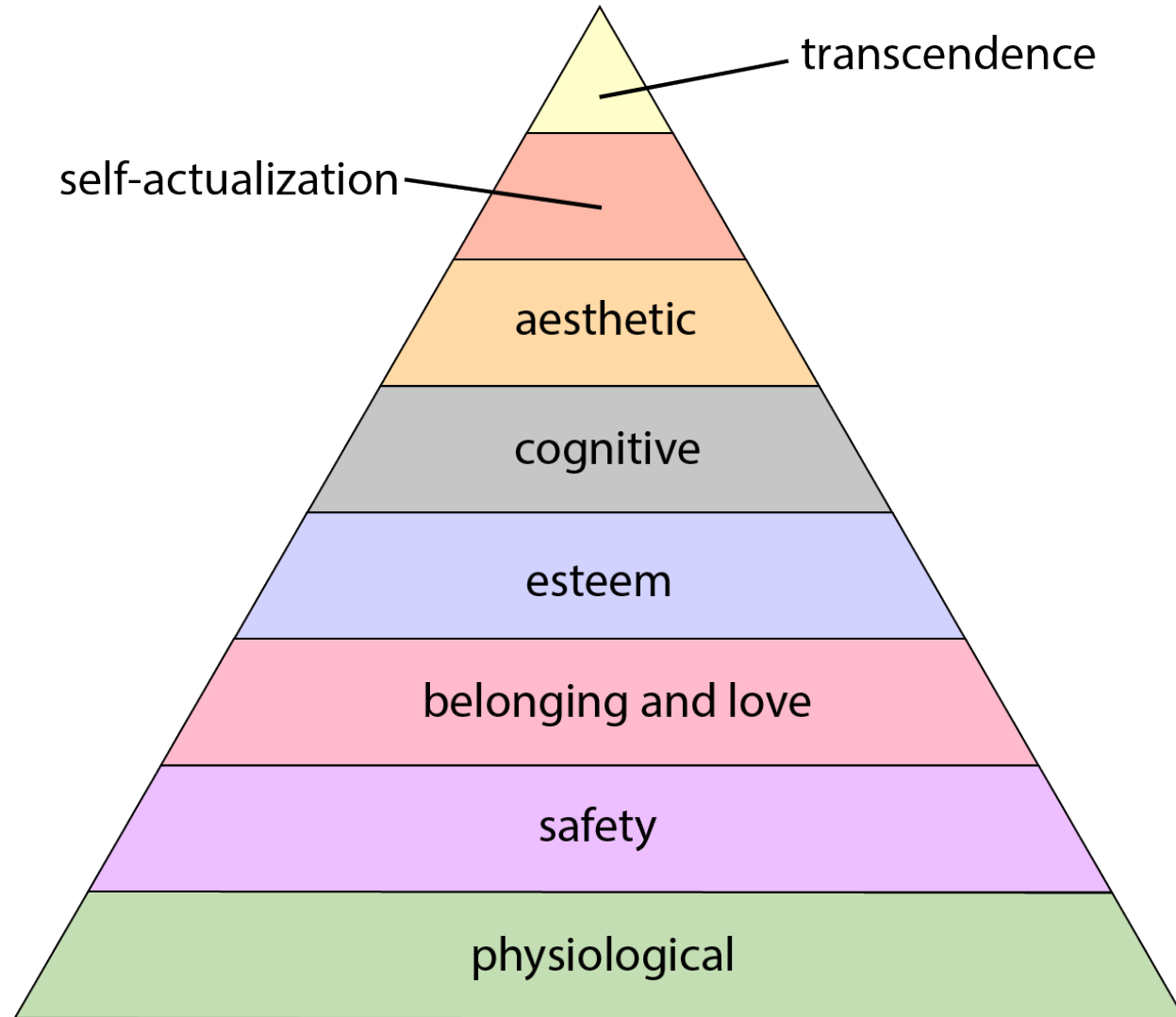
“The opposite of addiction is not sobriety. The opposite of addiction is connection.”
-Johann Hari

WHO GETS TREATMENT?



Source: Executive Office of the President of the United States

Maslow's Hierarchy of Needs



State Level

- ADPC (Alcohol and Drug Policy Council) Prevention Subcommittee recommended to have DMHAS and the State of CT adopt Harm Reduction Principles in their drug treatment programs



Study: Receipt of opioid use disorder treatments prior to fatal overdoses and comparison to no treatment in Connecticut, 2016–17

Robert Heimer a,* , Anne C. Black b,d, Hsiuju Lin c, Laretta E. Grau a, David A. Fiellin a,b, Benjamin A. Howell b, Kathryn Hawk a,b, Gail D'Onofrio a,b, William C. Becker b,

- 38% decrease with exposure to Methadone
- 34% decrease with exposure to Buprenorphine
- 70% increase in likelihood of fatal overdose with exposure to 30-day abstinence in treatment
- Informed consent we adapted for our residential programs is being used by the Department of Mental Health and Addiction Services as an informed consent to share the risks and benefits of not being on a medication assisted treatment when one discharges for opioid use disorder.



Informed Consent

Informed Consent for Accepting or Refusing Medications for Opioid Use Disorder (MOUD)

Medications for an opioid disorder are available and considered the “gold-standard” of treatment and are an evidence-based treatment for individuals with an opioid use disorder. Counseling and behavioral therapies may be an important part of treatment alongside medications; however, medications alone are effective by themselves. Medications are also used to relieve cravings, relieve withdrawal symptoms and block the euphoric effects of opioids. These medications do not “cure” the disorder, but rather improve safety and prevent withdrawal symptoms which can lead to relapse or continued substance use.

Informed Consent

Liberation Programs offers the following medications and suggest anyone with an Opiate use disorder receive one of these approved medications:

- Methadone – Prevents withdrawal symptoms and reduces cravings in people with OUD. It does not cause a euphoric feeling once patients become tolerant to its effects. It is available only in specially regulated clinics.
- Buprenorphine (Subutex)– Partially blocks the effects of other opioids, displaces current opioids in the body, and reduces or eliminates withdrawal symptoms and cravings. Buprenorphine treatment (detoxification or maintenance) is provided by specially trained and qualified clinicians who have received a waiver from the DEA).
- Naltrexone – Blocks the effects of other opioids preventing the feeling of euphoria. It is available from office-based providers in pill form or monthly injection.



Informed Consent

In addition, all clients discharged from Liberation Programs will receive Narcan: Naloxone (Narcan) is a life-saving medication used to quickly reverse an opioid overdose. Naloxone is safe and has no effects if administered to someone not experiencing an opioid overdose.

I have been educated on the risks and benefits of both taking and/or refusing MOUD and have willingly:

Accepted Medication

Refused Medication

Client Name Printed: _____

Client Signature: _____

Date: _____

Staff Signature: _____



DIGNITY AND RESPECT

IT IS MORE IMPORTANT TO
SHOW THEM HOW MUCH YOU
CARE BEFORE
YOU SHOW THEM HOW MUCH
YOU KNOW

Enabling

Everyone shows love the best they know how.

- Help family members realign and redefine relationships in a manner that promotes recovery for each family member.
- The more you show your humanness, the more you are lovable.
- It is more important to show people how much you care before you show them how much you know.

Mental Health means being:

- Lovable
- Capable
- Connected

5. REVIEW PROGRESS ON PRIOR SURG SUBCOMMITTEE RECOMMENDATIONS

Laura Hale
Social Entrepreneurs, Inc.

6. DISCUSS 2025 TREATMENT AND RECOVERY SUBCOMMITTEE RECOMMENDATIONS PROCESS AND ANY PROPOSED RECOMMENDATIONS

Chair Shell

Planning for 2025 Treatment & Recovery Subcommittee Meetings

- Subcommittee members submit recommendations via SurveyMonkey.
- The earlier recommendations are submitted, the more time we have to schedule presentations and to refine the recommendation. **Please submit your ideas as early as possible!**
- All subcommittee members are encouraged to submit at least one recommendation.

Treatment & Recovery Upcoming Subcommittee Meeting Dates:

August 19, September 16, November 18 from 3:00 pm - 4:30 pm

Please email Subcommittee staff with any other speaker recommendations.

Recommendation: A retrospective assessment or/ and prospective study would be conducted to assess the outcomes of patients following discharge from detoxification and examine mortality and overdose.

Submitted by: Chelsi Cheatom

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8. 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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