

OFFICE OF THE ATTORNEY GENERAL

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TREATMENT AND RECOVERY SUBCOMMITTEE

Substance Use Response Group (SURG)

September 23, 2022

10:00 a.m.

1. CALL TO ORDER AND ROLL CALL TO ESTABLISH QUORUM

Assemblywoman Claire Thomas

1. Call to Order and Roll Call to Establish Quorum

Member	SURG Role	Committee Role
Assemblywoman Claire Thomas	Assembly Member Appointee	Chair
Chelsi Cheatom	Harm Reduction Program	Member
Dr. Lesley Dickson	Healthcare Provider with SUD Expertise	Member
Jeffrey Iverson	Person in Recovery from an SUD	Member
Lisa Lee	Urban Human Services (Washoe County)	Member
Steve Shell	Hospital	Member

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.

3. REVIEW AND APPROVE MINUTES FROM AUGUST 12, 2022 SUBCOMMITTEE MEETING

Assemblywoman Claire Thomas

4. PRESENTATIONS FROM SUBJECT MATTER EXPERTS

Presentation

Tina Willauer, MPA

Program Director,

Children and Family Futures

Presentation

Honorable Chief Judge Lynne K. Simons

Second Judicial District Court

Department 6

5. REVIEW PROCESS FOR PRIORITIZING RECOMMENDATIONS

Assemblywoman Claire Thomas

Timeline & Process

July

- ✓ Subject Matter Expert Presentations
- ✓ Review and Discuss Initial Priority Recommendations

August

- ✓ Subject Matter Expert Presentations
- ✓ Discuss and Refine Recommendations

September

- Allowance for additional Subject Matter Expert Presentations
- Finalize First Subcommittee Recommendations for SURG for presentation in October

Process to Rate Recommendations Received from Presenters

- Other Subcommittees re-rated recommendations as they received new recommendations from presenters
- Treatment and Recovery Subcommittee has continued with the original slate of recommendations and worked to refine them
- Today we will discuss and refine motions and take action to finalize our slate of recommendations to the full SURG committee on October 3.

6. REVIEW SUBCOMMITTEE RECOMMENDATIONS AND FINALIZE PRIORITIZATION

Previous Recommendations

- Expand access to MAT and recovery supports for OUD, 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 (Dr. Woodard) (Weighted score=150)
- Establish a bridge MAT program in emergency departments (Dr. Woodard) (Weighted score=140)
- Use and promote telehealth for MAT, considering the modifications that have been made under the emergency policies (Dr. Woodard and Dr. Capurro) (Weighted score=100)

Suggested Recommendation based on 8/12/22 Revisions

1. 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.

(Subcommittee approved a motion to collapse these three recommendations and Chair Thomas suggested revisiting wording at the September meeting)

2. Engage individuals with lived experience in programming design considerations (Dr. Woodard) (Weighted Score=80)

Previous Recommendations

• Implement follow ups and referrals to support and care; linkage of care for incarcerated court involved individuals and pregnant women with OUD (Dr. Woodard) (Weighted score=70)

Suggested Recommendation based on 8/12/22 Revisions

3. Implement follow ups and referrals to support and care; linkage of care for justice involved individuals and pregnant or birthing persons with opioid use disorder. (approved motion from Subcommittee) (Weighted score=70)

4. Consider **radical changes** to recruitment, retention, and compensation of state frontline health care workers and enhance compensation (Dr. Freeman, DCFS) (weighted score=10) (compensation added at the August Subcommittee meeting)

https://dpbh.nv.gov/uploadedFiles/dpbhnvgov/content/Boards/CBH/Meetings/ 2022/COBH%20Letter%20To%20Governor%20-%20Draft%20June%202022 ADA.2(1).pdf

5. Ensure that BIPOC communities are receiving overdose prevention, recognition, and reversal training and overdose prevention supplies such as fentanyl test strips and naloxone to reduce fatal overdoses among Black and Latinx/Hispanic individuals in Nevada (Lisa Lee) (Weighted Score=50)

- Invest in behavioral health workforce mitigating stress and burn out covid-19 has caused (Dr. Freeman, DCFS) (weighted score=40)
- Consider the parity in coverage and participation in a statewide hub and spoke model across all payers with limitations on fail-first treatment options, prior authorization, and coverage limits (Dr. Woodard and Dr. Capurro) (weighted score=30)
- Fiscal support for the Nevada Certification Board to expand PRSS, CHW, PS, and doula certification in Nevada to expand our workforce and ameliorate drug related harms in Nevada (Lisa Lee) (Weighted Score=30)

Other Weighted Recommendations

- Provide educational opportunities to increase competency of clinicians providing adolescent care (overlap) (Mark Disselkoen, CASAT) (weighted score=20)
- Proactively develop and implement a state plan/infrastructure for pediatric disaster behavioral health response and recovery as well as general hospital consultation-liaison services and more effort in youth substance use disorder services (Dr. Freeman, DCFS) (weighted score =20)
- Significantly increased capacity is needed for intensive care coordination to facilitate transitions and to divert youth at risk of higher level of care and/or system involvement. Support the mental health needs of youth in the child welfare system. Fully support alternative funding and service delivery models for intensive care coordination (Dr. Freeman, DCFS) (weighted score=10)

Additional Recommendations from Presentations

Many recommendations were made by Dr. Megan Freeman and Dr. Andrew Freeman, DCFS, including the following:

- Mobile Crisis Team safety checks;
- Co-response models with true para-response professionals;
- Intensive in-home services, peer operated respite care, and short-term residential facilities;
- Expand clinical quality oversight of residential care systems, and support facilities remediation;
- Develop and implement state plan/infrastructure for pediatric disaster behavioral health response and recovery, as well as hospital consultation-liaison services for youth SUD;
- Increase timely data collection and research to identify and respond to youth mental health needs with resiliency-based solutions;
- Consider ways to get all payers in the system to reimburse for crisis services and include federal funding for access to services; and
- Invest in and expand masters level clinicians' programs.

Other Recommendations from Presentations

7. SUBJECT MATTER EXPERTS FOR FUTURE MEETINGS

Pending Future Presentations

Children, Youth, and Families:

- Adelson Clinic, Child and Adolescent Treatment
- Washoe County Juvenile Services Not available in August

Special Populations:

- Foundation for Recovery
- Chad Sambora, Executive Director of Missouri Network for Opiate Reform and Recovery
- Nevada Department of Veteran's Services

Treatment Modalities:

• Dr. John F. Kelly, Recovery Research Institute, Harvard Medical School

System Levers:

• Kailin See, Washington Heights Corner Project, Safe Consumption Sites—confirmed interest, unavailable in August

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9. ADJOURNMENT

ADDITIONAL INFORMATION, RESOURCES & UPDATES AVAILABLE AT:

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



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