SURG 2022 Response Subcommittee Recommendations

Guiding Principle: Harmonize public safety and public and behavioral health responses to substance use in our communities and state.

- 1. Support legislation to establish a statewide and regional Overdose Fatality Review (OFR) committees and recommend an allocation of funding to support the OFR to effectively identify system gaps and innovative community-specific overdose prevention and intervention strategies in accordance with established best practices such as the Bureau of Justice Assistance's Overdose Fatality Review: A Practitioner's Guide to Implementation.
- 2. Revise penalties based on the quantity of Fentanyl, analogs, or other synthetic drugs of high potency that are trafficked. (NRS 453.3385, NRS 453.336, 453.339, 453.3395).
- 3. Leverage existing programs and funding to develop outreach response provider(s) and/or personnel that can respond to any suspected overdose and offer follow-up support, referrals, and services to the individual (and loved ones) following an overdose. Provider(s) and/or personnel to be deployed to anyone being released from institutional and community settings (e.g., hospitals, carceral facilities, and other institutional settings) who is being discharged post overdose or suspected overdose.
- 4. Fund personnel and resources for independent medical examiner(s) for investigations and reports to specify the cause of death in overdose cases.

For Further Review:

Resolve the conflict between the Good Samaritan Drug Overdose Act and Drug Induced Homicide Law; immediate actions may include recommending community-level education using best practice guidelines, as well as education for law enforcement personnel.

Note Support for AB156:

Relating to substance use disorders; establishing the order in which a provider or program is required to prioritize persons for participation in certain publicly funded programs for the treatment of alcohol or other substance use disorders; prescribing certain requirements to ensure the access of offenders or prisoners who have been diagnosed with an opioid use disorder to medication-assisted treatment and the continuation of such treatment upon the release or transfer of such offenders or prisoners; prohibiting certain discrimination regarding such treatment; prescribing certain requirements concerning the diagnosis and treatment of a patient with an opioid use disorder; and providing other matters properly relating thereto