



Advisory Committee for a Resilient Nevada (ACRN)

June 11, 2024, 10:00 AM to Adjournment

DRAFT MINUTES

I. Call to Order, Roll Call of Members, and Establish Quorum

Chair Sanchez announced that Dr. Karla Wagner resigned from her seat on the Advisory Committee. State staff will recruit for a member who “represents a program to prevent overdoses or otherwise reduce the harm caused by the use of substances.”

Members Present: Chair David Sanchez, Jessica Barlow, Brittney Collins-Jefferson, Karissa Loper, Katherine Loudon, Elyse Monroy-Marsala, Lilnetra Grady, Ryan Gustafson, Dr. Farzad Kamyar, Jamie Ross, Pauline Salla, Malieka Toston

Members Absent: Darcy Patterson, Ariana Saunders, Cornelius Sheehan, Quintella Winbush

Staff and Guests Present: Julie Knight, Morgan Biaselli, Allison Genco, Debra DeCius, Terry Kerns, Vanessa Diaz, Henna Rasul, Lauren Beal, Alex Tanchek, Evelyn Donis de Miranda, Amanda Annan, Natalie Bladis, Tray Abney, Olivia G., Tina Dortch, Devon Pickles, Lea Tauchen, Elizabeth Scott, Karina Fox, Joseph Filippi, Nhobelyn Kho, Sarah Dearborn, Joan Waldock

II. Public Comment #1

There was no public comment.

III. Review and Approve Minutes from May 14, 2024, ACRN Meeting

Mr. Gustafson moved to approve the minutes. Ms. Monroy-Marsala seconded the motion. The motion passed without opposition. Ms. Collins-Jefferson, Ms. Salla, and Ms. Loper abstained as they were not present at the May meeting.

IV. Public Comment on ACRN Funding Recommendations for the ACRN Report to the Director's Office

Nevada Revised Statutes 433.730.4 states the Advisory Committee is to solicit comments from the public concerning the recommendations and make any revisions to the recommendations determined, as a result of the public comment received, to be necessary.

Mr. Sanchez reminded the public that the committee reviewed its recommendations in previous meetings. He asked for public input.

Ms. Ross asked whether her emailed recommendations were included in the report. Ms. Diaz confirmed they were.

There was no other public comment.

V. Review and Approve ACRN Report to the Director's Office

Ms. Diaz and Chair Sanchez reviewed the draft report. Ms. Diaz explained it contains wording that ACRN rolled over all previous recommendations.

- Goal 1: Ensure local programs have the capacity to implement recommendations effectively and sustainably.

The report lists funded agencies. There was an additional recommendation.

- Increase the funding and support for local community health programs to ensure they have the necessary resources and capacity to implement evidence-based strategies for opioid misuse, prevention, treatment, and recovery.

Ms. Monroy-Marsala asked if the recommendation came from their May 14 meeting. Ms. Diaz confirmed it did.

- Goal 2: Prevent the misuse of opioids.

There were two additional recommendations from the previous meeting.

- Expand school-based prevention programs and public awareness campaigns targeting youth and high-risk populations; and
- Reduce first use of opioids through primary prevention and programming.

- Goal 3: Reduce harm related to opioid use.

New recommendations include:

- Broaden access to naloxone and other harm reduction services, including syringe exchange programs and safe consumption sites;
- Create street outreach teams to provide street medicine programs, harm reduction, psychiatry, and case management;
- Expand access to long-acting buprenorphine medication; and
- Low threshold prescribing for buprenorphine treatment.

Ms. Salla asked for a definition of “low threshold prescribing for buprenorphine treatment.”

Dr. Kamyar explained it means not waiting until a person overdoses to prescribe buprenorphine. Many providers are fearful of buprenorphine overdose or diversion and do not prescribe it. With low threshold prescribing, a person going into an emergency department can leave with a 30-day supply of buprenorphine and a referral to treatment.

Ms. Monroy-Marsala noted the initial report allocated funding amounts for each goal. She asked if they would adjust those allocations.

Chair Sanchez said the committee made recommendations which guided the Director’s Office’s release of notices of funding opportunities (NOFOs). The needs assessment guided how much should be spent under each goal. ACRN recommendations on how funding was allocated to different areas of spending was taken into consideration.

Ms. Diaz clarified their recommendations went to the Director’s Office, but the Director’s Office made the spending decisions.

Chair Sanchez noted the report listed currently funded programs and current recommendations but is not a comprehensive list of activities or recommendations that fit under each goal.

Dr. Kamyar asked where the recommendations originated.

Ms. Diaz stated the recommendations were gathered from ACRN meeting discussions.

Dr. Kamyar asked to put “expand access to long-acting buprenorphine medication” in Goal 4.

Chair Sanchez asked members to identify anything that should be changed or added to the draft. Dr. Kamyar asked if recommendations rolled over from the previous report lost priority.

Ms. Diaz explained the statement about previous recommendations would be part of the report. Dr. Kamyar noted providing access to long-acting buprenorphine had been part of the plan for several years but showed up in the report as recommended.

Chair Sanchez was unsure whether new recommendations would appear to be of higher priority than rolled-over ones. In past meetings, members were encouraged to prioritize recommendations, which included reviewing previous recommendations. The process was messy for the 2022 report. Their task was to make recommendations and send them to the Director's Office. The Director's Office will consider them and their comments about what will impact the community to abate the opioid epidemic and make funding decisions accordingly.

Dr. Kamyar was not aware he should have prioritized recommendations before this meeting. He expressed his concern that the original list was distilled into fewer recommendations and the committee was not involved in making funding decisions.

Chair Sanchez stated he asked members to speak up in previous meetings when they noted things that stood out to them. Three members sent staff items to include in the recommendations, and recommendations were prioritized during meetings. Their past recommendations were implemented by the Director's Office.

- Goal 4: Provide behavioral health treatment.

Dr. Kamyar did not recall discussing the Goal 3 activity, "Create street outreach teams to provide street medicine programs, harm reduction, psychiatry, and case management" as an evidence-based practice to be ranked, prioritized, and placed on their list of recommendations. He pointed out it should be in Goal 4.

Chair Sanchez clarified the item was in their 2022 report. In a previous meeting, a committee member asked to highlight it. Regardless, it was a recommendation that was rolled over.

Dr. Kamyar pointed out added recommendations would appear to be prioritized because they were placed in the table. He asked if they could highlight all recommendations from the state plan. He was concerned the Director's Office would see which recommendations for each goal were funded and prioritize the unfunded ones without looking at those not listed in the table.

Ms. Diaz reminded the committee that the office funded programs chosen from NOFO applications. Applications were evaluated based on whether they met the specific goal and could only go to agencies that applied. Programs receiving funds were not selected because the activities they provide were a priority but because they fit the goals and activities.

Dr. Kamyar thought they had to prioritize what was not currently funded to give the Director's Office guidance on which items would have greater impact on communities, and NOFOs were created based on those priorities.

Ms. Diaz explained NOFOs identified the goals the state wanted met; the most recent one was open for all seven goals. ACRN recommendations provided guidance and helped build the goals and identified which needs should be met.

Ms. Monroy-Marsala stated their issue was not the NOFOs; their issue was the removal of many of the original recommendations. The committee did not know how they scored or why they were removed, but they were not in the 2022 report. They asked questions at the time but did not receive answers. They felt they made recommendations, but state staff decided what to fund, removing recommendations not ranking highly enough. Had there been transparency two years

ago, things would be different. She insisted which goal an activity was under mattered because the state allocated funding per goal with harm reduction receiving the smallest allocation. She added they did not determine the allocations per goal. She noted Dr. Kamyar spoke in the past four meetings about the importance of ensuring perinatal issues were addressed; “Eat, Sleep, Console,” fell off in the original culling of recommendations and was not in the current recommendations. She was unaware they were asked to send recommendations to the FRN team. She reiterated that Dr. Kamyar asked for a year how and why recommendations were removed and asked to have them added. The process is not working.

Ms. Diaz stated some recommendations were consolidated in the previous report. They could be added to this one.

Ms. Monroy-Marsala insisted they do not want them highlighted; they want them funded.

Ms. Diaz explained that was why FRN needed their participation—they are subject matter experts, and their input is essential.

Ms. Monroy-Marsala reminded her they submitted their recommendations two years ago. The information about which recommendations were removed was not available to them. She asked if staff could add them in this report.

Dr. Kamyar said he received an email asking members to add items that had been missed. He did not want to add things based on his opinion or go through the list of recommendations again to see what was missing, and he did not want committee members to do that either. They might miss something; they might focus on recommendations they submitted; they might not feel comfortable looking through the list in a meeting. He suggested they remove all activities that have been funded and recommend what they previously recommended.

Chair Sanchez said they could use the suggestions and feedback to adjust the list to show what was funded and include a statement to move forward the recommendations from the previous report. He said he would push harder to ensure their meetings clarified and refined the process rather than spending time on reports or information about programs that were funded in communities. He reminded them their vote in this meeting would be to accept the draft with changes. He stated the list would show what was funded with a statement that the committee moved their recommendations from two years ago forward.

Ms. Diaz clarified there are no new recommendations to add in the 2024 report.

Chair Sanchez said none were needed since there was a statement that they rolled over the previous recommendations. He suggested they develop a statement about the Substance Use Response Working Group (SURG) recommendations.

Ms. Monroy-Marsala pointed out the recommendation to increase primary prevention funding by \$12 million recommended using state funding; it did not specify that FRN should fund it. She asked why they would adopt that recommendation. She said it was an example of why their committee process should be facilitated by an outside entity. She recommended the report include a statement that the process needed to change.

Dr. Kamyar thought the SURG recommendations were distilled. He thought they were not going to endorse SURG list, but they would include it in their report.

Chair Sanchez reminded them SURG has submitted its own report to the state. He asked whether they wanted to adopt the SURG recommendations in their report.

Ms. Monroy-Marsala stated only recommendations earmarked for funding from FRN should be included as the ACRN report is specific to opioid abatement funding and cannot be used for all substance use.

Chair Sanchez reiterated they needed a better process for funding recommendations. He suggested they not include SURG recommendations in their report. He could make a comment about them in the section of the report covering highlights from meetings.

Ms. Salla agreed.

Chair Sanchez said he would note in their report that they needed someone to help guide their decision-making process.

Ms. Monroy-Marsala stated SURG used an outside facilitator for their meetings and asked if ACRN could do the same. She requested greater transparency in how recommendations were eliminated and whether the state process could be changed. ACRN should not be asked to accept SURG's recommendations because their scopes do not fully align. SURG focuses on all substance use; FRN funds can only fund opioid-related activities. She asked the state to ensure SURG recommendations presented to ACRN align with what they can fund.

Ms. Diaz responded that state staff has begun the process of engaging an outside facilitator. She noted the SURG recommendations presented to ACRN related to opioid use.

Ms. Monroy-Marsala argued that the recommendation to increase total prevention funding by \$12 million did not recommend FRN funding. It recommended the dollars come from all funding sources, including the general funds and federal grants. It should be a recommendation for the Division of Public and Behavioral Health.

Ms. Diaz noted FRN could fund it. She reminded them they did not need to accept all SURG recommendations. Other SURG recommendations were not far off from what FRN could fund. The recommendations they viewed were the ones SURG wanted ACRN to look at; all of them tied to opioids. ACRN was asked to rank their recommendations via a poll; only a few responded. She pointed out they asked for facilitation, but staff needs members' participation as well. She asked for confirmation to not include SURG recommendations in their report.

Chair Sanchez explained the committee would vote after they completed their review of the draft report. He needed committee input on how to submit rolling over last term's recommendations and how to report on SURG recommendations. With SURG recommendations removed and an agreement on wording for rolling over previous recommendations, they could move forward.

Ms. Loper asked if the reference to discussions about SURG recommendations would be removed from the report.

Ms. Diaz removed those comments from the report.

Chair Sanchez reminded them they needed to cover administrative aspects of the report.

Ms. Toston asked what it meant when a recommendation was marked "internal."

Ms. Diaz explained those are the ones the Fund for a Resilient Nevada Unit was working on.

Ms. Toston asked if it covered documentation, data sets, and analysis—not what they are working toward funding.

Ms. Diaz replied she was correct.

Chair Sanchez asked Ms. Diaz to continue going through the report. He explained state staff would format it properly, confirm the membership list and roles and the nonmember roles, update the table of contents, remove the SURG recommendations section, and provide public comment from meetings.

They reviewed the meeting highlights section. He noted their request for outside facilitation here. He listed the funded providers in the report and reviewed the wording for rolling over the recommendations from their previous report.

Ms. Salla asked if the rolled over recommendations would be included.

Ms. Diaz replied they were not included in the tables in the report; they were in the 2022 report. Ms. Salla asked how the Director's Office would access them.

Chair Sanchez said the table would show currently funded programs. Under it will be a link to a list of the previous recommendations. He wanted to ensure that the entire list of recommendations from the last term was included. He asked for confirmation from state staff.

Ms. Diaz said they would add a link to the previous recommendations made.

Ms. Salla stated she could not support moving the report forward if it did not include their previous recommendations.

Chair Sanchez confirmed the report would include the funded recommendations and all previous recommendations.

Ms. Salla said she could vote on this section if their previous recommendations were included.

Chair Sanchez continued leading the committee through the rest of the report. He reminded them the section on goals section would show what was being funded. He moved on to the next section, "ACRN Recommendations Based on the Goals of the Statewide Plan." There were no concerns or comments relating to that section.

The Summary of ACRN Meetings and Committee Input section was opened for discussion. No one had comments.

He directed Ms. Diaz to remove the SURG Recommendations and ACRN Deliberations section—a summary of what they discussed in their meetings over the last two years.

Ms. Loper suggested deleting the section because it connected to SURG recommendations. She did not agree they should summarize the meeting minutes in this report.

Ms. Diaz removed it from the report.

The Chair asked state staff to complete the public comment section.

Ms. Loper suggested they summarize the public comment.

Chair Sanchez noted the section on Bylaws was straightforward, but he added a section in ACRN next steps noting the need to review the bylaws. He asked if anyone had problems with what was in the report. None were mentioned.

Ms. Salla asked when the report was due.

Chair Sanchez replied it was due by June 30.

Ms. Toston asked if the link to the original recommendations would be added to the report.

Chair Sanchez said it would. The section on Advisory Committee Recommendations Moving Forward will have verbiage about rolling over the previous recommendations and include a way for the reader to access those recommendations.

Ms. Monroy-Marsala said she was as comfortable as she could be with the report with adding the comment they need to change the process. She was uncomfortable with where they were with recommendations. Since the beginning, things were left out that should not have been left out, and they are now stuck. Money should be pushed out, and there are previous recommendations identified for funding that have not been funded. She stated it was important to change the process going forward. She was tired of working on this and cannot think about it anymore. The recommendations they have are here, and they are incorporating the previous list of recommendations. She is as comfortable as she can be. She made a motion to approve the draft report with the edits they discussed.

Ms. Ross seconded the motion.

Chair Sanchez said he appreciated their calling to light the things that are causing confusion and conflict and discomfort. They will start over after submitting this year's report moving forward

with an outside entity to help them use a proven decision-making process, facilitate discussions, and work on recommendations to leave the committee in a better place when their terms expire. The facilitator will also hold the state staff accountable for transparency on funding decisions. The motion passed. No one abstained, and none were opposed.

VI. Public Comment #2

There was no public comment.

Chair Sanchez thanked members for their time, energy, and effort. He asked them to continue to help him bring the committee to a more comfortable and better functioning place in which to make decisions without confusion. He suggested they work on this so they can make evidence-based and practical decisions about what they are trying to do.

VII. Adjournment

The meeting was adjourned at 12:30 p.m.

DRAFT