



Notice of Public Meeting

Advisory Committee for a Resilient Nevada (ACRN)

Wednesday, June 8, 2022, 9:00 a.m.

DRAFT Minutes

- I. Call to Order, Roll Call of Members, and Establish Quorum
Chair Sanchez determined a quorum was present.
Members Present: Chair David Sanchez, Jessica Barlow, Brittney Collins-Jefferson, Ryan Gustafson, Lilnetra Grady, Dr. Fazad Kamyar, Karissa Loper, Katherine Loudon, Cecilia Maria, Elyse Monroy, Darcy Patterson, Ariana Saunders, Cornelius Sheehan, Laura Sherwood, Dr. Karla Wagner, Quinnie Winbush
Members Absent (excused): Pauline Salla, Elyse Monroy
Staff and Guests Present: Dr. Stephanie Woodard, Dawn Yohey, Dr. Terry Kerns, Dr. Courtney Cantrell, Henna Rasul, Kendall Holcomb, Katree Saunders, Adrienne Navarro, Allison Genco, Chelsi Cheatom, Dominique Seck, Jeanette Belz, Kadie Zeller, Lea Tauchen, Linda Lang, Mary-Sarah Kinner, Tyler Shaw, Vanessa Dunn, Shayla Holmes, Jeanette Belz, Lea Tauchen, Linda Lang, Kadie Zeller, Jennifer Atlas, Amanda Haboush Deloye, Adrienne Navarro, Tammie Shemensi, Lea Case
- II. Public Comment #1
Ms. Katree Saunders asked if there would be any funding for people who were affected by the opioid epidemic. She will send an email to dyohey@dhhs.nv.gov.
- III. Approval of the Minutes from the May 18, 2022, Meeting
Ms. Loper moved to approve the minutes. Ms. Collins-Jefferson seconded the motion. The motion passed without opposition or abstention.
- IV. Presentation and Discussion of the Mercer Objective Tool and Rated ACRN, Mercer, and Public Recommendations Concerning the Allocation and Distribution of Money from the Fund for a Resilient Nevada and Possible Approval of Recommendations
Chair Sanchez reminded members of the Committee that, per Senate Bill (SB) 390, they are to include priorities related to the prevention of overdoses and addressing disparities in access to care and the prevention of substance use among youth. The One Nevada Agreement's approved purposes are to remediate the harms, risks, and impacts caused by the opioid epidemic, consistent with SB 390 or listed as an approved use for abatement purposes in any plan approved by a bankruptcy court.

Dr. Cantrell explained SB 390 required use of an objective scoring criteria for recommendations to determine what would impact the most people. She shared [how recommendations were scored](#)—by their impact, urgency, feasibility, and whether they met the legislative target. The results are in a [spreadsheet](#) she provided. Mercer attempted to make their recommendations specific enough to target populations and activities, but not so specific that there is not freedom to determine which program would meet the recommendation’s goals or could be tailored for a region. They developed recommendations from the identified gaps and then prioritized them. The Committee can use the tool to see the rankings to help decide which priorities to put in their report to the Director’s Office.

Dr. Woodard reminded them that ACRN, Mercer, and government agencies have made their recommendations based on the gaps. The ACRN has all available recommendations. She noted another need to be considered for the state plan is an overdose fatality review committee. It is a critical part of what is needed for surveillance and to provide a pulse of what is happening in communities as the overdose crisis evolves; it will help drive our recommended interventions.

Dr. Cantrell explained how they worked on scoring.

Ms. Saunders asked what data sources they used to inform impact. Dr. Cantrell replied it was limited to what is known about Nevada. Chair Sanchez members to let staff know if they feel something is missing or does not belong.

Dr. Kamyar summarized that individual members should look at the summary recommendations and determine which categories they fall into. If there are additional recommendations, they will send them to staff. He asked if they should review priorities on a regular basis to stay current with trends. Chair Sanchez stated the plan is to leave the Committee with homework. They will have a week to review the recommendations and rankings and to make sure their personal recommendations are tied to these. At the next meeting, members can present their top ten for prioritization. They will vote on them at that meeting.

Dr. Woodard said they are legislatively required to update the needs assessment every three years. She expects many of the recommendations to be relevant and pertinent through the next three years; but, if there is a significant shift in what is happening in Nevada, nothing prohibits the Committee from meeting to bring forward new or different recommendations or to amplify something that was not ranked as high in priority as needed.

Items V and VI were combined and discussed together.

V. Discussion and Possible Approval of ACRN Recommendations Concerning the Allocation and Distribution of Money from the Fund for a Resilient Nevada

Chair Sanchez asked members to consider whether they wanted to move all the recommendations forward as ranked or if there were other recommendations they felt strongly about that needed to be prioritized. Mr. Sheehan noted he did not think it wise to set a limit on how many recommendations members bring forward at the next meeting. Chair Sanchez noted they received an editable [spreadsheet](#) that in unrated. Ms. Loper clarified she is writing her notes in the marked column in the ranked documents. Ms. Yohey suggested members bring their notes with them to the June 15 meeting; those who cannot attend that meeting may send their notes to staff. Dr. Kamyar asked if they could also bring recommendations they feel are missing. He was assured he could. Ms. Yohey informed them the recommendations she received were mapped to the recommendations Mercer did. Chair Sanchez suggested additional comments can be added to the list and will be tied into the existing recommendations. Ms. Yohey added there were recommendations that are missing that will need to go through the

objective tool. If there are recommendations that cannot be mapped directly to recommendations that have been ranked, they can be added and ranked using the objective tool.

Chair Sanchez stated they would not approve the prioritized recommendations today. Instead, members will review the documents, add their notes, and determine what is important to each of them. They need to identify the recommendations they want to move forward, whether all or some of them. They will vote to approve those at the next meeting. If there are additional recommendations, those can be approved to move forward. Dr. Wagner clarified their report will make recommendations concerning the allocation and distribution of money from the Fund for a Resilient Nevada. They are not making recommendations on how to solve the overdose crisis in the state; they are making funding recommendations to remediate harms caused by the opioid epidemic. The funds are available as part of a settlement designed to remediate harms created by opioids. Dr. Woodard said they are to address the harms, risks, and impacts of opioid use. Dr. Wagner said she would think, "The ACRN recommends this action be taken to remediate the harms, risks, and impacts of opioids" as a framework for staying focused. Ms. Saunders asked if they need to provide recommendations for each legislative category. Dr. Woodard said they do not, and they are not limited to the areas suggested in SB 390. Dr. Kamyar clarified that they will come forward with their prioritized list, recommendations that do not fit, and recommendations that are missing. Will those need to go through the objective tool? Ms. Yohey anything the ACRN team feels strongly about can be added to the report as a suggestion. Dr. Kamyar said he would want recommendations to be evaluated. He mentioned he did not see a lot about evaluating existing programs, but he feels strongly about that when it comes to the quality of addiction or substance use treatment. He would want that to be ranked, justified, and agreed upon rather than just added to the report. Dr. Cantrell said they should form their recommendations to be specific about which things they want measured. Dr. Woodard said they could, as a Committee, put into their report that program evaluation is anchored to all their recommendations. Chair Sanchez asked if they could make a pre-statement that all of the recommendations include program evaluation to confirm that certain things are being affected. Dr. Woodard agreed. Dr. Kamyar asked if they were to make recommendations from a planning perspective, such as these funds are coming in and this chunk should be allocated and used in these ways on an annual basis for five years. Dr. Woodard replied the legislation is not specific. In what ever way they want to frame their recommendations they are free to do. She noted the Attorney General's Substance Use Response Working Group (SURG) received a detailed presentation by the Office of the Attorney General that explained the allocation of funds and where those dollars are going. She recommended this group familiarize themselves with the information that was shared. She reminded them the state's allocation is only a portion of the funding coming into the state; the cities and counties that participated in the litigation will be receiving allocations also. She stated \$44 million should be awarded in July, but only the state will receive allocations of \$2 million to \$4 million annually for the next 15 or 16 years. Mr. Sheehan noted the importance of remembering they are all coming with different areas of expertise in considering these recommendations. Some Committee members will need to contextualize items for other members who are not familiar with them. Chair Sanchez reminded them they can move forward with these recommendations and add what they see is missing into the report. They can specify what was important to the Committee and prioritize them. If

members do not touch on all of them, we can leave those on the bottom and prioritize the ones that were important to us.

Mr. Sanchez said they have a lot of work to do. Each member will bring their expertise to bear on the recommendations so when we meet next time, we can go over these, group them, and vote to approve them. He asked them to be prepared for the next meeting so they can work together on the recommendations.

- VI. **For Possible Action** Discussion and Possible Approval of Prioritized Recommendations Concerning the Allocation and Distribution of Money from the Fund for a Resilient Nevada [Discussed above]
- VII. **For Possible Action** Discussion and Possible Approval of the Draft ACRN Report
This item was tabled to next week's meeting.
- VIII. Public Comment #2
Dr. Kerns said she will send a link to the SURG meeting when it becomes available. She
Mr. Sanchez read public comment sent in by the regional vice president of [Acadia Healthcare](#) regarding the efficacy of opioid treatment programs (OTPs) in Nevada and workforce difficulties.
Mr. Sheehan suggested members view the June 7 Bill Maher's *Real Time*. A segment of the show included a panel discussion mocking flyers regarding harm reduction needle-exchange programs. They misunderstood harm reduction, and the audience bought into the mocking of harm reduction. He noted it was illustrative of the need for education about stigma. The show's point was resources should be directed at getting people better instead of encouraging more people to become addicts. He added if you keep people alive you have an opportunity to get them better. Mr. Sanchez stated there is a need for educating the general public on how to understand harm reduction and the damage of stigma.
Dr. Wagner alerted members to a two-day Harm Reduction Summit sponsored by Nevada's Overdose Date to Action. Chair Sanchez said it was his hope this Committee would be able to be a part of helping someone develop something that would not have even been considered years ago and that now is becoming generally accepted. Harm reduction has not always been accepted, but we are seeing gains and it is becoming the standard.
- IX. Notice of the Date for the Next ACRN Meeting to be held on June 15, 2022
Chair Sanchez reminded members to do their homework. They should plan on a three-hour meeting to approve the recommendations and to review a draft of the report.
- X. Adjournment
The meeting adjourned at 10:36 a.m.