State Opioid Response

The Nevada State Opioid Response grant program is funded through the Substance Use Mental Health Services Administration (SAMHSA). The purpose of this program is to address the opioid overdose crisis by providing resources to states and territories for increasing access to FDA-approved medications for the treatment of opioid use disorder (MOUD), and for supporting the continuum of prevention, harm reduction, treatment, and recovery support services for opioid use disorder (OUD) and other concurrent substance use disorders. The SOR program also supports the continuum of care for stimulant misuse and use disorders, including for cocaine and methamphetamine. The SOR program aims to help reduce unmet treatment needs and opioid-related overdose deaths.

Test Strip Legality. Nevada Legislation:

AB 345

- Reframes testing products as independent from drug paraphernalia
  - An individual is able to provide, administer or use a testing product to assist a person in determining what is present in a controlled substance
  - An individual acting in good faith and with reasonable care in providing, administering or using a testing product for the purpose of determining what is present in a controlled substance is exempted from professional discipline and/or civil liability
  - Removes testing products from the definition of “drug paraphernalia”

- “Fentanyl test strip” means a strip used to rapidly test for the presence of fentanyl or other synthetic opiates.
- (b) “Testing product” means a product, including, without limitation, a fentanyl test strip, that analyzes a controlled substance for the presence of adulterants.
Outreach Efforts:

The project has partnered with several organizations that provide outreach to high priority populations to distribute naloxone and fentanyl test strips and continues to recruit for more. Among the active organizations, some of the highlights include:

- Black Wall Street (Washoe County) that targets minority communities, transient populations, and youth/adolescents
- SWAID Vegas (Las Vegas) that works with individuals involved in the sex entertainment industry
- Harm Reduction Circle (Clark County) active at events (i.e. concerts, raves, burning man, etc)
- The Holland Project (Washoe County) works with adolescents and young adult culture
- Our Place/RISE (Washoe County) offers shelter and support for transient populations and their pets
- Reno/Sparks Tribal Health Center (Reno/Sparks) serves the Reno/Sparks Indian Colony
- Washoe Tribal Health Center (Alpine county California through Carson City, Nevada) serves the Washoe Tribe
- Fallon Tribal Health Center (Fallon & surrounding area including Lovelock, Yomba and Yerington) serves the Fallon Paiute Shoshone Tribe
- Substance Abuse Prevention Coalitions (throughout the State) are able to respond to community specific needs and populations

SNHD. Southern Nevada Health District has developed and distributed materials for Spanish speakers throughout Clark County.

Overdose to Action. The OD2A program developed a social media toolkit to give to partners engaging content that could be shared via social media platforms about the dangers of fentanyl, and where to find, and how to use harm reduction tools like naloxone and fentanyl test strips. The toolkit resources contain sample text for posting, as well as hashtags to use in postings.

Four weekly themes are highlighted in the toolkit:

- Week 1. What is Fentanyl?
- Week 2. What are Fentanyl Test Strips?
- Week 3. Where can you get Fentanyl Test Strips?
- Week 4. How do you use Fentanyl Test Strips?

Data Trends:

The State Overdose to Action Grant has been providing monthly Syndromic Surveillance reports tracking various aspects of opioid use and overdose across the state. Reports can be found here. Monthly reports contain information on overdose within the state of Nevada utilizing emergency department (ED) visits
data from the National Syndromic Surveillance Program and data from the Prescription Drug Monitoring Program (PDMP).

III. Fatal Overdose Data

Table 1. Drug- and opioid-related overdose deaths of any intent in Nevada among residents by month, 2020-2021

<table>
<thead>
<tr>
<th></th>
<th>Drug-related Overdose</th>
<th>Opioid-related Overdose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Month</td>
<td>2020</td>
<td>2021</td>
</tr>
<tr>
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<td>50</td>
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</tr>
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<td>Dec</td>
<td>79</td>
<td>73</td>
</tr>
<tr>
<td>Total</td>
<td>805</td>
<td>883</td>
</tr>
</tbody>
</table>

2020 Rate     | 2021 Rate | % Change |
Drug-related deaths | 25.9     | 28.4     | +9.3%     |
Opioid-related deaths | 17.2     | 17.8     | +3.3%     |

Highlights of the most recent report include:

- Suspected drug-related overdose ED visit rates increased by 10% from April 2022 to May 2022.
- From April 2022 to May 2022, suspected opioid-related overdose ED visit rates increased by 4%.
- Opioid prescription rates per 1,000 residents decreased by 2% from April 2022 to May 2022.
- Co-preservation rates of opioids and benzodiazepines per 1,000 residents did not change much from April 2022 to May 2022.
- Patients that visited the ED for drug-related overdose in May 2022 were mostly male, White, and between the ages of 25-44. Highest rates were among Black, non-Hispanic.

Naloxone distribution

Data range: February 8, 2020 - March 30, 2022

- 29,638 Naloxone kits dispensed
- 1,695 Reported reversals using naloxone
- 8,044 Kits distributed to first responder agencies
SOR. Naloxone distribution has expanded to 36 community distributing partners. In addition to community providers, over the past year many schools in Nevada already carried naloxone in case of an incident, but 10 new schools were provided overdose education and naloxone distribution to school nurses, counselors, principals, or teachers.

The project has been partnering with criminal justice programs to provide naloxone and overdose education to those being released. Currently two counties (Washoe and Mineral) jail facilities have programs to distribute naloxone to individuals being released from jail. Other facilities are working with 3rd parties (ie. treatment programs) to screen and make naloxone accessible to individuals leaving their facilities. Additionally, Law Enforcement Patrol/First Responder Leave Behind Programs have been initiated and have been provided educational training and ongoing support through STR and SOR funding.

**Jail Programs (SOR supported)- Naloxone upon release**

- Mineral County Jail
- Washoe County Sheriff’s Office
- Carson City Sheriff’s Department is working with Partnership Carson City and Carson Community Counseling to provide naloxone

**Law Enforcement Patrol Leave Behind Programs**

- Mineral County Sheriff’s Office
- Washoe County Sheriff’s Office
- REMSA EMS

Trac-B Exchange has harm reduction vending machines that distribute naloxone among other harm reduction items to registered clients in Las Vegas and have been able to place one in the rural community of Hawthorne, NV. They will be placing six new vending machines in a variety of rural and urban locations.

**Fentanyl Test Strips**

SOR. SOR purchased Fentanyl Test Strips October 2021. Education and Distribution was developed targeting highest need populations. Priority was given to:

- Harm reduction organizations, Needle Exchange Programs
- Organizations that engage in street outreach and work directly with high-risk populations
- Law Enforcement/First Responders, Leave Behind Programs
- Existing Naloxone Distribution Sites and Prevention Coalitions
The full distribution project launched March 2022

Number of Current Distributing Partners: 26

Test Strips Distributed to Date: 12,600

**Clark County Overdose Data to Action Implementation Plan.** Clark County launched FTS distribution December 2021.

As of March 2022:

- 32 stakeholders from 6 agencies completed training
- 4 Distribution sites
- 2,400 strips out at distro sites

**Recovery Resources:**

Recovery Resources are highlighted on the following website: [https://behavioralhealthnv.org/get-help/](https://behavioralhealthnv.org/get-help/)

The Nevada Center for Excellence in Disabilities has started the Parenting as a Path to Recovery program. A majority of parents enter treatment as a means through which to retain or regain custody of their children; however, the stresses of parenting often leave people vulnerable to relapse. Parenting children with developmental and behavioral challenges without support further exacerbates parental stress. A 90-minute introductory class is being held at treatment centers to recruit for the 4-week course.
Other Program Initiatives

**Recovery Friendly Workplace Initiative.** The Recovery Friendly Workplace Initiative, which first started under STR, with the development of on demand trainings and materials to help employers create recovery friendly workplace policies has expanded under SOR II. In 2021, videos were created that focus on the Nevada Recovery Friendly Workplace Initiative by highlighting why it is beneficial for companies around the state of Nevada to get involved by supporting those in recovery. Videos produced included:

- 30-second TV spot
- Long-form video that explains the Nevada Recovery Friendly Workplace Initiative Program
- 60-second vignettes for social media
Ads aired through on Facebook, LinkedIn, StackAdapt (ads appear on various websites including Forbes, Fast Company, and Inc.), and TV streaming and were targeted to different audiences such as small businesses, executives, and human resources. The campaign kicked off in November 2021 with digital ads, TV commercials, public relations, and organic social media. The approach was rooted in strategy. We honed in on audiences and developed key messaging that would speak to both the heart and the mind.

Two press releases were issued and picked up by local press.

The Governor aided in promoting the initiative by tweeting about it and sharing the long-form video.
The campaign earned **3,685,424 impressions** and had nearly **4,000 people** within our target audience visit the website—spending an average of three minutes on the site—where they were learning more about what it means to become a Nevada Recovery Friendly Workplace. These website visitors are informed about the program and could, at any point, make the decision to become a Nevada Recovery Friendly Workplace.

More information for the initiative can be found on its [website](#).

One of the resources made available to workplaces that became a designated recovery friendly workplace is Anonymous Support Boxes. Boxes are filled with resources for employees and are placed in an inconspicuous location where materials can be picked by employees at any time. The workplace can order more materials by scanning the QR code on the box. Boxes include such items as a brochure to the local Recovery Community Organization and naloxone kits.

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Success Stories:

Carson Community Counseling
One young lady who was in TL back in December delivered a healthy baby boy in May!

High Risk Pregnancy Center
One patient delivered successfully with no CPS involvement needs and negative testing for illicit drug use in mother and baby. Patient is continuing in the MOTHER Program postpartum with weekly individual substance abuse counseling per her request and motivation for treatment.

One patient successfully stabilized in MAT with Buprenorphine in the MOTHER Program and was able to find alternative housing to remove herself from a domestic violence situation.

Bristlecone Family Resources
The client started heroin detox last year, as of May 2022 has been sober for one year. The client has just completed his CDL training program and is testing May 17th. After he gets his CDL is interviewing for a dumpster truck driver position with Waste Management where he is already employed with a promised transferred date as early as the first week of July 2022. He has also maintained an environment of sober independent living by having his own apartment and was able to get his belongings out of storage. The client has a well-planned out one-year plan and a long-term five-year plan. The client continues to work on financial stability and faithfully deposits funds into his savings. The client has tapered off from MAT services.

Roseman University
We have been working with a client who has had so many barriers. She has lived in Nevada for over a year and has been trying to obtain a government issued ID the entire time. It has been a very difficult process. We provided transportation and paid the fee and she and our peer spent all afternoon at the DMV yesterday and she finally got her ID! She called our case manager this morning to thank us and to say that having an ID is “life changing for her.” She was so grateful.

We also had a very exciting outcome in a program participant who delivered her baby at Summerlin Hospital. EMPOWERED staff worked with her OB and nursing staff at Summerlin to ensure that her baby was monitored for NAS for 5 days prior to discharge. The infant stayed with her in her room for the entire stay as she utilized tools taught to her by program staff members to minimize the effects of NAS. EMPOWERED reached out to and successfully worked with Anthem Medicaid during this time to arrange for housing for the entire family unit (mom, baby and father) and actively communicated with CPS without an active case being opened.

The Empowerment Center
A court ordered client obtained a job where she became a manager within her first month. She found an apartment, saved up to buy a car, and graduated the program successfully.
Las Vegas Misdemeanor Treatment Court
Despite a few barriers our participants experienced which was listed above we are proud to say we had 2 graduates who successfully completed the MTC program and accomplished all their goals. We strongly feel, they are set up to be successful and they both have a very strong support network in place in order to hopefully stay successful or reach out in case they need help. The success of the MTC program expansion has grown beyond what many expected, and the Bureau of Justice Assistance (BJA) has reached out to us appointing the MTC staff to be expert panelists at the next National Association of Drug Court Professionals (NADCP) in July of 2022 to speak on the success of our courts expansion and how we were able to create effective innovative responses to Low Level Misdemeanor charges.

Foundation for Recovery
We have a peer who came to us in March of this year and has remained actively engaged with his peer coach through this month. His coach supported him in attending different types of mutual aid meetings and making sure he was meeting all of his obligations related to his court case. FFR supported him in creating a resume and he has been employed full-time since July. FFR also supported him in providing a 15 day bus pass to help him with transportation when he secured new employment so that he could ensure he had transportation to and from work before he would receive his first paycheck. He was able to move out of sober living and begin paying rent on his own place in September. His most recent goal he worked on with his coach is to obtain an immigration attorney.

Center for Behavioral Health
Las Vegas Recovery Center / Landmark Recovery will now be having all inpatient participations watch a recorded version of Krista’s Harm Reduction & Overdose Prevention Training before graduation. Narcan kits will be supplied through CBH.

The Life Change Center
One of our patients recently saved up enough money to buy a car!

Bristlecone Family Resources
This Bristlecone client had been in and out of institutions, treatment facilities, and jail time since she was 13 years old. When she transferred to Bristlecone from jail, she was excited from the very start. She admitted to being sick and tired of being sick and tired of the constant need to escape and stated she was finally ready to stay on the right path. At 20 years old, she came to us with more life experience than other adults in our program but faced more severe charges. A few weeks into the residential program, she was placed under diversion Mental Health court, probation, random drug testing, and psychiatric help from a local mental health clinic. The client was told if she was successful this time around and stayed on the "straight and narrow" for the next year, she would get all charges dropped against her. After the court hearing, she became even more invested and serious about her program. The client ended up graduating from residential treatment and moved into TL housing for a couple of months, which she did so well that she could make an exit plan to go home and continue OP services
shortly after. Today she is still attending Outpatient Services, meets with her PC once a week, attends three groups weekly, and attends AA groups weekly. The client holds a part-time job and participates in everything she requires from the courts. The client will soon have eight months of sobriety!!

*Roseman University*

EMPOWERED program met with Clark County social services 12/6 and was able to successfully refer a postpartum client to their STAR Housing program on 12/15. She had been sleeping in a tent prior to delivery. Housing arrangements were made during her labor and postpartum stay at the hospital.

*TINHIH APG*

Due to the CCSD 5 day pause we were able to adjust our hours to provide a safe place for youth at risk to spend the day in lieu of school on January 14th - 18th.

*TLCC COD Program*

One of our patient’s recently saved up enough money to buy a car!

**State of Nevada: Opioid Antagonist Medication Saturation Plan**

A requirement of the State Opioid Response III Federal Grant Award is that all applying states develop a statewide saturation plan for opioid antagonist medication. This plan is designed to meet the State’s specific needs based upon current trends of misuse/abuse and reduce opioid related overdose deaths. A copy of the plan is included below.

**Opioid Antagonist Medication Saturation Plan**

The state has determined the need to expand the definition beyond naloxone to include opioid antagonist in order to include upcoming reversal medication currently in the process of obtaining FDA approval that is not naloxone based but targeted for fentanyl intervention.

**Saturation rates:** Nevada has set the goal of an opioid antagonist present at 80% of witnessed overdoses. This was based upon the model developed by Irvine et. al. (2022). The Irvine model was based upon old data that did not account for the shift from prescription misuse to fentanyl contamination in the illicit drug supply, changing the needed approach for distribution. During the timeframe July 1, 2021 to June 30, 2022, Nevada reported 420 fatal overdoses with a bystander present. To ensure the probability of having an opioid antagonist present at approximately 80% of witnessed overdoses, the state would need to distribute 115,000 kits annually. Over the noted period of time, 27,916 kits have been distributed into the community. There would need to be an increase of 87,084 kits annually. Nevada does not have the fiscal resources or infrastructure to support this goal. Over the next 2 years, Nevada will work on infrastructure development to support a distribution of 50,000 kits annually.
Targeted distribution and communication strategy: Partnering with Nevada OD2A to analyze the data from SUDORS and Vital Death Records, several locations have been identified as overdose hotspots. To best address greater need in these areas, several actions are being taken to increase the influx of opioid antagonist medication availability:

- Improve relationships with industry, focusing on entertainment to expand more targeted distribution sites related to risky behavior such as casinos, sporting organizations, cannabis dispensaries, bars and clubs, and the sex industry.
- Expand jail-based distribution and relationships with criminal justice agencies outside of the metropolitan areas
- Initiate emergency room opioid antagonist distribution, possibly in partnership with ED Bridge and Zero Suicide
- Increase availability of Harm Reduction Vending Machines into hotspot locations
- Work with the Attorney General’s Office to reduce barriers to access through state legislation

Since the beginning of 2020, the state has seen a 200% increase in opioid-related overdoses among Latinx/Latine populations. This is in addition to the consistently higher rates among other BIPOC populations including members of tribal populations. In order to address the shortfall of opioid antagonist medication available among this population, several programs will be initiated or expanded upon for greater impact:

- Increased production and distribution of culturally appropriate translated materials and direct outreach including trainings given in alternative languages.
- Continued partnership with OD2A to utilize focus group outcomes to tailor approaches.
- Expand partnerships with community organizations that are well connected with BIPOC communities including: human trafficking response programs, vaccination systems, crisis centers.
- Recruit Faith-Based Organizations to expand access to opioid antagonist resources and reduce harm reduction barriers related to stigma
- Engage with the Minority Health Equity Coalition to acquire guidance to identify partners to reach populations that are traditionally more resistant to outreach efforts
- Expand partnerships with peer mutual aid groups and statewide prevention coalitions. These programs are often able to engage directly with specific community networks working with underserved populations.
- Develop relationships and establish distribution through labor associations such as builder associations, culinary associations, and targeted outreach to day laborers.
- Increased partnerships with Nevada’s Tribal Consultation groups to improve relationships and establish distribution sites
- Partner with recipients of Tribal SOR to work alongside and assist with overdose education
**Partnerships:** Several partnerships exist and can be leveraged to support expansion of distribution efforts. These partnerships include:

- Attorney General’s Office
- Fund for a Resilient Nevada (aka. Opioid Litigation Funding)
- Minority Health Equity Coalition
- Nevada Medicaid
- Nevada Prevention Coalitions
- Nevada Tribal Consultation
- Nevada OD2A provides surveillance and assists with targeting at risk locations and populations
- ODMAP
- Recovery Friendly Workplace Initiative
- Southern Nevada Health District, CARA funds

**Detailed timeline:**

<table>
<thead>
<tr>
<th>Goal/Activity to be completed by project staff &amp; partners</th>
<th>Year 1 (in Quarters)</th>
<th>Year 2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Q1</td>
<td>Q2</td>
</tr>
<tr>
<td><strong>Goal 1:</strong> Increase the number of distribution locations serving high risk populations</td>
<td></td>
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<tr>
<td>Activity 1: Increase the number of criminal justice/first responder distribution location by 1 quarterly</td>
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</tr>
<tr>
<td>Activity 2: Increase 2 distribution sites serving the entertainment industry per quarterly</td>
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</tr>
<tr>
<td>Activity 3: Increase the number of 1 medical setting/emergency department distribution location by 1 every 6 months</td>
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</tr>
<tr>
<td>Activity 4: Increase the number of harm reduction vending machines by 4 annually</td>
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<tr>
<td><strong>Goal 2:</strong> Improve outreach and distribution to BIOPC and Latinx populations</td>
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</tr>
<tr>
<td>---</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Activity 1: Produce culturally appropriate translated materials</td>
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<tr>
<td>Activity 2: Increase number of Mutual Aid and Coalition distribution locations by 1 per quarter</td>
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<tr>
<td>Activity 3: Increase Faith Based participation in distribution by 1 every 6 months</td>
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</tr>
<tr>
<td>Activity 4: Distribute through a labor association by 1 every 6 months</td>
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<td>x</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Goal 3:</strong> State litigation to reduce barriers to access naloxone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activity 1: Support Attorney General’s office with needed data, networking, and technical assistance</td>
</tr>
</tbody>
</table>

Procurement will occur upon Nevada IFC approval with an approximate start in December 2022.