

**MINUTES OF THE MEETING
OF THE
ASSEMBLY COMMITTEE ON JUDICIARY**

**Eightieth Session
May 22, 2019**

The Committee on Judiciary was called to order by Chairman Steve Yeager at 9:07 a.m. on Wednesday, May 22, 2019, in Room 3138 of the Legislative Building, 401 South Carson Street, Carson City, Nevada. The meeting was videoconferenced to Room 4406 of the Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, Nevada. Copies of the minutes, including the Agenda ([Exhibit A](#)), the Attendance Roster ([Exhibit B](#)), and other substantive exhibits, are available and on file in the Research Library of the Legislative Counsel Bureau and on the Nevada Legislature's website at www.leg.state.nv.us/App/NELIS/REL/80th2019.

COMMITTEE MEMBERS PRESENT:

Assemblyman Steve Yeager, Chairman
Assemblywoman Lesley E. Cohen, Vice Chairwoman
Assemblywoman Shea Backus
Assemblyman Skip Daly
Assemblyman Chris Edwards
Assemblyman Ozzie Fumo
Assemblywoman Alexis Hansen
Assemblywoman Lisa Krasner
Assemblywoman Brittney Miller
Assemblywoman Rochelle T. Nguyen
Assemblywoman Sarah Peters
Assemblyman Tom Roberts
Assemblywoman Jill Tolles
Assemblywoman Selena Torres
Assemblyman Howard Watts

COMMITTEE MEMBERS ABSENT:

None

GUEST LEGISLATORS PRESENT:

None



STAFF MEMBERS PRESENT:

Diane C. Thornton, Committee Policy Analyst
Bradley A. Wilkinson, Committee Counsel
Lucas Glanzmann, Committee Secretary
Melissa Loomis, Committee Assistant

OTHERS PRESENT:

Allison Combs, Policy Director, Office of the Governor
Ross E. Armstrong, Administrator, Division of Child and Family Services,
Department of Health and Human Services
Tennille K. Pereira, Director, Vegas Strong Resiliency Center, Legal Aid Center of
Southern Nevada
Tom Clark, representing Board of Medical Examiners
Michael D. Hillerby, representing State Board of Nursing
Izzy Youngs, representing Nevada Women's Lobby
Tyler J. Winkler, Staff Attorney, Vegas Strong Resiliency Center, Legal Aid Center
of Southern Nevada
Robert L. Gipson II, Legal Victim Advocate, Vegas Strong Resiliency Center, Legal
Aid Center of Southern Nevada

Chairman Yeager:

[Roll was taken. Committee protocol was explained.] As you can see, we only have one bill on the agenda this morning. I will open the hearing on Assembly Bill 534.

**Assembly Bill 534: Revises provisions regarding response to emergencies.
(BDR 16-1220)**

Allison Combs, Policy Director, Office of the Governor:

I am here on behalf of the Office of the Governor to introduce Assembly Bill 534. It is an important bill, strategically drafted to improve the way our state serves victims of crime based on lessons learned in recent years. I will be asking folks here at the table and in Las Vegas to present the details of the bill, but I would like to provide a brief overview to start.

The bill includes two major components. First, the bill transfers the administration of the Victims of Crime Program (VOCP) from the Department of Administration to the Department of Health and Human Services (DHHS). This program has served victims well for more than 20 years within the Department of Administration, and the transfer to DHHS will provide an opportunity to better serve victims through the wider spectrum of services available through DHHS—more of a wraparound approach. Secondly, the bill addresses lessons learned following the events of October 1, 2017. The bill ensures victim advocates are included in the development of state emergency plans and includes provisions to expand

the pool of licensed emergency medical providers and mental health providers during and immediately following a state of emergency.

We have two technical amendments that were submitted yesterday ([Exhibit C](#)). The first relates to the transfer of the program to DHHS and updates the references to the State Board of Examiners. We just missed some of these references initially. The second was requested after consulting with the licensing boards and is intended to ensure the new provisions work well within the existing licensing procedures. I am happy to go into more detail into those amendments whenever you would like. At this time, I will turn it over to Mr. Armstrong.

Ross E. Armstrong, Administrator, Division of Child and Family Services, Department of Health and Human Services:

As indicated, this bill would transfer the operations of the Victims of Crime Program from the Department of Administration to DHHS. It is important to note that DHHS is currently the largest funder of victim services in the state. The federal Victims of Crime Act (VOCA) has two main programs: the Victim Assistance Grant Program, which funds service providers, and the VOCA Victim Compensation Program, which directly benefits victims. This would bring both of those programs under one roof. Section 2 is the provision that does that. It looks just like a definitional change, but it is actually a pretty substantive change in terms of bringing that program into DHHS.

Some of the benefits—other than just bringing them under the same roof—would be that the program would be able to ensure compensation is included in a planning of the delivery of victim services and we would be able to weave the program into other DHHS supports. Something we are already discussing is integrating the application program with those for other benefit programs offered by DHHS. For example, a victim might apply, and it may be determined that they do not qualify for the VOCP, but they do qualify for other benefits such as the Supplemental Nutrition Assistance Program or Temporary Assistance for Needy Families. Even if there is a denial of reimbursement in this particular program, DHHS will be there to help the victim on their healing journey through all the different resources we have within DHHS.

I would also note that in *Nevada Revised Statutes* (NRS) Chapter 217, there are two other programs related to victims: the Contingency Account for Victims of Human Trafficking and the confidential address program. Both of those are currently managed by DHHS. By pulling this into the DHHS family, we think we will be able to better serve those victims who not only qualify for this program, but also those who do not qualify but still need assistance in becoming whole.

Section 3 of the bill removes the requirement of physical injury. As we work toward parity between mental and physical health, we know that the requirement of a physical injury does not necessarily make someone more or less of a victim, especially in these mass events such as 1 October. There are a lot of folks who may not have been physically injured, but who have very serious needs following that event.

Section 4 formally sets a two-year filing period for the program. Currently, there is a one-year period that can be waived in certain instances. Section 4 would ensure there are two years for a victim to file. Sections 8 and 9 ensure that the whole process of the state plan for victim services has to go through the formal Administrative Procedures Act. It looks more like adopting a state plan for services under Medicaid the way we typically do to ensure there is public input, but it is also nimble in changing our emergency dynamics. Section 9 ensures there is confidentiality of individual information and those victim applications are not subject to public records requests. At this point I will toss the presentation over to Tennille Pereira down in Las Vegas to cover other critical sections of the bill.

Tennille K. Pereira, Director, Vegas Strong Resiliency Center, Legal Aid Center of Southern Nevada:

On October 1, 2017, I was a practicing staff attorney at the Legal Aid Center of Southern Nevada. Because of our connections in the community, we were asked to come and staff the family assistance center with a legal team to provide civil legal aid to all of the survivors of Route 91 and the families of the victims. It was a natural fit for us to serve victims of crime as we have victims of crime in every department we currently have at the main office. At that time, the Vegas Strong Resiliency Center was being set up, and we were asked to come in and consult on continuing to provide legal services at the Resiliency Center. We staffed a full legal team at the Resiliency Center from day one, worked with the national consultants, and dove headfirst into the victim services world, advocating on victims' behalf, and looking at the system and how it currently operates.

We have attended a mass violence conference on a national level and explored best practices throughout the other states in the country. We have learned many lessons and learned a lot about our system. We learned a lot about best practices. All of that has led us to believe the most important thing we can do is set up a system in which we provide victim-centered services. We commend the Governor's Office for bringing this proposal. We believe these changes will bring our victim services more in line with providing victim-centered services.

Section 1 basically streamlines and modernizes the application process by having one application qualify for all victim services. Currently, individuals have to fill out a paper form and get it to the agency they are applying for services from. They have to do that for every agency they are applying for benefits through. When you are dealing with victims who are traumatized, they have a really hard time just completing basic tasks. They have a hard time focusing and concentrating. Sometimes just getting out of their homes to hand in an application and take some of these steps can be overwhelming. At the Vegas Strong Resiliency Center, we have navigators who are able to help the victims fill out forms, do the applications, walk them through it, and really hold their hand. What we have seen is that when we do that process with them, they are able to step back and feel some comfort from their community and focus on their healing. Modernizing the process and making it easier for them to access benefits is going to be more victim-centered and give all victims in Nevada that benefit of the easier process.

Section 3 takes out the requirement for a victim to have a physical injury to be considered a victim. The greatest injury we are seeing from Route 91 is post-traumatic stress disorder (PTSD). It is very difficult to tell a victim they do not qualify for certain benefits because they do not have a physical injury. To them, the injury, the PTSD, is very real. Just because you cannot see it does not mean they are not really suffering from an injury. This would be a great change.

Section 4 increases the application deadline for the VOCP from 12 months to 24 months. I will tell you this is the trend of the country. All the states are increasing this timeline. We are understanding on a greater level what trauma does to an individual and how individuals heal. They do not heal on a timeline that is in a statute. They heal at their own pace, and many Route 91 survivors closed themselves off from the world and really took a break from everything and did not look out to see what benefits they qualified for or anything. After the 12-month mark, we have received many phone calls in which they have said, Okay, I think I am ready now. I think I am ready to go and get help. What do I need to do? We want to make sure we provide a bigger window to capture as many victims as we can to make sure they get the benefits they need toward healing.

Sections 5 and 6 deal with the appeals process. Currently, a VOCP appeal from the appeals officer goes to the State Board of Examiners. This is a public hearing process, and it causes a chilling effect on individuals willing to appeal their case up to that level. Generally, the VOCP has a lot of medical records with a lot of sensitive, detailed information on these survivors, information they do not want in a public forum. This would be a much better change so we do not put a chilling effect on them when they want to appeal. We believe it is a better, more victim-centered process.

Section 7 awards compensation unless the victim's actions substantially contributed to the injury. Currently, there is a lot of discretion allowed to deny an application based on the victim's actions. They can even consider a prior case—not even the current case they are seeking benefits for—or even their social history. We believe this change is a lot more appropriate. It reduces the amount of discretion, but it also still allows for discretion if the victim's action substantially contributed to their injuries. We believe this is an appropriate change that is definitely more victim-centered.

Section 10 provides that the victim's voice will be at all levels of planning through the emergency response to incidents. It requires emergency response plans to include victim advocates and victim advocate groups, and they must also include the chain of command for carrying out each portion of that plan. We believe the victim's voice should be at every stage to make sure we are protecting the victims and looking at things through their perspective all the way through the process. This is also best practices throughout the country and the direction the country is going in from the research we did.

Section 11 enables our governor, in a state of emergency, to permit providers of emergency services and mental health providers that are credentialed in another jurisdiction to provide services in response to the emergency during the immediate response and the direct

aftermath. This basically gives our governor another tool to be able to respond quickly and provide the services immediately that are needed for victims.

Sections 12 through 17 require certain medical and mental health providers to provide information to their licensing boards about their experience with emotional and mental trauma. One of the issues observed immediately after Route 91 was the need for trauma-trained professionals onsite to provide immediate mental health services to lessen the trauma and begin to promote healing. What we have discovered is that the initial time period right after the trauma happens is a very critical time, and sometimes you can do more harm if you have a professional who is not trauma-trained trying to provide services. We want to make sure we provide that critical service right after the trauma, and this is a way to make sure we have access to those trauma-trained professionals. We did not have that at Route 91. We have learned some really valuable lessons.

In closing, I just want to say that we have been honored to work with the Route 91 survivors. We have learned a lot through this process. We are really grateful for that knowledge. We commend the Governor's Office for bringing these proposals forward so the lessons learned can make things better for all victims in Nevada.

Assemblywoman Backus:

My question is about the amendment ([Exhibit C](#)). With respect to sections 12 through 17, it originally made sense that there was the removal of inquiring of those seeking the initial application for their license to not include any training they had received or to put them on the list. Because Nevada is a great state where a lot of people end up moving to after they finish the military or something, we may be excluding a group of individuals who may already be coming to our state and have adequate training. Am I missing something about why that was removed?

Allison Combs:

As the boards are going to implement these new procedures, we would initially like to focus on the renewal of licenses to make sure that goes through smoothly and works well within their current process. We may come back at some point and decide to include the initial application, but at this time, we would like to focus on the renewal to make sure we work within existing procedures. Your point is right on target.

Assemblywoman Cohen:

In section 4, subsection 1(b), there is the provision whereby if someone is mentally incapacitated, the application can be made on his or her behalf by a parent, guardian, or other person authorized to administer his or her estate. I am just wondering if we are encompassing support decision-making. We passed that this session, so I want to make sure that if someone is incapacitated but is utilizing the services of assisted decision-making, they can get help with that.

Allison Combs:

That is a good question. I would be happy to check on the bill that has already been moving through and how that may intersect with the existing law under this bill.

Assemblywoman Cohen:

When we bring in professionals when there is some sort of large trauma within this state, I know that sometimes not only do we need the medical professionals for people, but we also need them for animals. Do we allow that in the state? If there is some big calamity from one state to another state, veterinarian care will come in. Are we including that as well?

Allison Combs:

I will need to double-check on that unless there is someone at the table who is able to answer that question. I know that Caleb Cage submitted a letter of support ([Exhibit D](#)) and he may have the answer to that question.

Ross Armstrong:

When there is a large-scale emergency, the state sets up an emergency operation center here in Carson City. It is what you would imagine an emergency operation center to be. There is a big room with lots of desks and different agencies come to those desks. They are assigned. One of those is related to the Public Health Preparedness program out of DHHS. The whole purpose of that operation center is to get feedback from the ground on what the needs are and then push it up to the state resources to figure out what resources can be harnessed and brought to help with that emergency. Through that process, if there was an emergency in which it was identified by a local agency that there was assistance needed for animals based on the particular emergency, that would be the route by which that assistance could come forward.

Assemblywoman Cohen:

Ms. Pereira had mentioned PTSD and that we are starting to see how many people will take more than a year before they start to come forward and say they need help. You mentioned two years being the trend across the country, but is that enough? Should we be looking out further than that? Are we going to find that five or ten years from now there are people who were affected by Route 91 and they are just then able to come forward and say they need help?

Tennille Pereira:

It is a balance because we also have to consider the state resources and how far out it can be projected. Services need to be received. We believe two years is a proper balance. California's is 36 months, but the majority of that is captured within 24 months. I do believe 24 months does capture a good balance.

Assemblyman Daly:

I have two questions. The first is about section 5 in which there is an appeal process and you are proposing to eliminate the second step of the appeal and put it into a regulation. Do you have any idea where it might be and where you might end up? There is a process in

place now. Are you planning on following that? When you answer this question, of course it is not binding. It could be anything from there being no appeal all the way to eventually being some type of judicial review, which is being struck out now. It was not subject to judicial review. Do you think you are going to add that? Where are you going with that?

Ross Armstrong:

Currently, you go to a hearing master, the hearing master determines you are not eligible, and then you, as a victim, prepare to go tell the Governor, Attorney General, and the Secretary of State in an open forum all about the circumstances of your becoming a victim and why you think you deserve the benefits. Section 5 is really meant to set up a system by regulation through DHHS. We will set up an appeals process. It could be just to the director. It could be to a panel of folks at DHHS. We do not intend to strike out that third level of review. It would still be there, and it would be subject to judicial review according to the amendment.

Assemblyman Daly:

My second question is about section 6. We have had many people trying to get out of the NRS Chapter 233B Nevada Administrative Procedure Act. People said we need to be nimble. Of course, you have your procedure that is set up and you have all of the same steps, except you do not have the two-step procedure; you have to have a workshop and then a hearing under NRS Chapter 233B; you have to give 30-days notice; you have to design what your regulation or rule change is going to be; you have to give people notice; you have to have at least one meeting or hearing to get input from affected parties; you have to do an impact statement on small businesses. All of those things are in NRS Chapter 233B. The only thing you are cutting out is the review by the Legislative Commission—the legislative oversight that we have on regulations. I am not seeing that this is nimble.

I equate it to this: Well, we want to get out of this because we do not like certain procedures and it does not move fast enough, would be the same as if you said, Well, the Legislature is not quite fast enough for us either. They take 120 days. They only meet every two years. So exempt us. Let us just make whatever rule, law, or change we want without coming to the Legislature. That is the way I view agencies trying to get out of the oversight and the process established. Those rules are set up to protect the public, to give everybody that opportunity, and to make sure there is a third-party review before it gets put into place. You are not going to convince me you need to be out of it, but I would like to hear your response.

Ross Armstrong:

Currently, the plan, policies, and procedures just go to the State Board of Examiners since everything is currently living in the Department of Administration. We were trying to find the balance that allows for changes at any given time as well as ensuring public input. We modeled this process after amendments to the state Medicaid plan in viewing victim services as a type of medical, behavioral health service that is going to be covered by the state. So that process of the 30 days and the public input is all still there. There are complications from putting it all into the *Nevada Administrative Code*. As indicated, there is the extra review, but there are also big chunks of time when the Legislature is not in session and we are not allowed to make those changes except in an emergency, temporary sort of way.

We modeled the process setting up this actual state plan for services for victims of crime after the Medicaid process to allow for public comment while still allowing for changes in a quicker fashion.

Assemblyman Daly:

I understand what you are saying. I am not familiar with what process is being done now under the Department of Administration, but if you are going to establish a rule, regulation, or policy that goes outside of your agency and applies across county lines throughout the state and is a general rule applicable to everyone, it is a regulation and the law requires you to go through that process. That is why you are asking for an exemption. If the changes are internal policy, that is one thing. If they are going outside to the general public and it is an agency rule applicable across the board, it is a regulation, and you should go through the process.

Where are the rules going to be published under your process? Obviously, you are not going through the Legislative Counsel Bureau. It says you are going to send it to the Interim Finance Committee. I do not know what you propose they are supposed to do with it other than receive it. It does not say anything after that. Are they supposed to review it? Are they supposed to give you their blessing? There is no process there for that, so to me, sending it to the Interim Finance Committee is a gesture, at best, and useless.

Assemblyman Watts:

I just have a question about section 3. In section 3, subsection 1(a), you have removed the word "physically." You may have already talked about this, but I just want to be clear that the intent is to expand the range of injuries outside of the physical to include emotional and mental injuries. Can you please explain that and why you just struck "physically" instead of defining different types of injuries? I also see in paragraphs (d), (e), and (g) there are still mentions of physical injuries. To me, that looks somewhat redundant since a lot of those are still related to criminal acts, which I thought would be covered under paragraph (a). I am just wondering why there was a decision to leave "physically injured" in those paragraphs but not in paragraph (a).

Allison Combs:

In looking at other states, these programs have been around for many years, and many other states have taken out their references to "physically injured." Section 3, subsection 1, paragraph (a) is independent of the other paragraphs and will allow a broader consideration of other types of injuries that occur as a result of a criminal act. As you stated, the intent is to broaden that option in terms of the policies that have already been adopted and will continue to be adopted for governing the program. I will yield to Ms. Pereira in Las Vegas if there are any additional comments.

Tennille Pereira:

I would just echo that, yes, it was intended to broaden who would be identified as a victim who would be able to qualify for benefits.

Assemblyman Roberts:

It makes sense to align everything we are doing with victims of crime. I appreciate your bringing this forward. I was involved in the Resiliency Center in Las Vegas when I worked with the Las Vegas Metropolitan Police Department. I know we used a lot of federal funds and some nonprofit funds. I noticed in this bill we are expanding services for mental health, and there is no fiscal note. Is that because there are funds available in other areas other than state funding for those types of services?

Ross Armstrong:

Yes. The VOCP has a number of funding streams, including federal funds from the Department of Justice and some different fines and fees. Over the last 18 months, all the state agencies that fund victim services have been meeting monthly as a collaborative to figure out the best ways to leverage and maximize funding for victims and to streamline the process for victims. That has been a successful collaboration. That is why there is no fiscal note on it. All of the funds come from outside sources.

Assemblywoman Peters:

I find this really interesting. I do not work in the world of criminal emergency, but I do work in the world of natural resource emergency and development emergency, and planning for different scenarios. My question has to do with section 1, subsection 5, which is the survey to determine effectiveness. I am just curious about the decision to use a survey rather than some kind of exit interview process. It is harder to get people to fully invest and participate in written surveys or online surveys, which can be biased, rather than having some kind of interview process that allows for a more personal touch, getting some more personal reaction and a narrative going instead of having it be a bit more proscribed and often biased. Can you tell us about that decision?

Allison Combs:

The survey is a step that is designed to evaluate the program. Exit interviews would certainly be an equally optimal option to try to determine how the services are received from the victims. I think it is the same concept, so we can work with that going forward. There was not a decision to not do an exit interview. It was more just an attempt to evaluate the program.

Assemblywoman Peters:

Maybe you could even do a hybrid whereby you pick a percentage of victims to do some kind of in-person survey just to get some additional, less biased information on the process.

Assemblywoman Miller:

My colleague brought up his role during 1 October. One of the things that was pretty resounding to me, one message that kept coming across, was about our first responders to that incident. I would include not only police officers and firefighters, but nurses, doctors, social workers, counselors, and the workers at Mandalay Bay as first responders to that. How does this apply to them? One of the things we know is that even the counselors and social workers in that field had PTSD and were expressing that they were suffering because they were providing for everyone else and had no rest and had put in long hours, especially that first week just to literally hold our town together. I know that some workplaces offer mental health relief or counseling, but it is often minimal and not all of these people work for public agencies. Even counselors or social workers may be independent contractors who work for private agencies. I was just wondering, as we were talking about PTSD, if there has been any consideration on what we can do for our people in service?

Ross Armstrong:

Because the VOCP and the other VOCA program that is currently administered by the DHHS Division of Child and Family Services are federal programs, they have some pretty limited language about what a victim is. The Victim Assistance Grant Program is a little bit looser, but it still does not encompass those first responders. Because of 1 October, we did receive an antiterrorism emergency assistance grant from the Department of Justice that is coming through the Division of Child and Family Services because, in the eyes of the feds, we are the victim service agency and we have the VOCA assistance grant. That grant, understanding the unique nature of mass trauma, includes funding for first responders and allows services to be paid for them. Say we have a first responder who applies for the Victim Compensation Program and is denied. Rather than just giving that denial notice and saying, Good luck, we can say, And here is the DHHS agency that can help you. Here is the Department of Public and Behavioral Health, and we have resources for you no matter how you came to have this injury based on this horrific event. We are here for you. That is an example of one of the benefits of pulling it into the DHHS family.

Assemblywoman Miller:

I appreciate that because sometimes people forget that our first responders are people too. Here at the Legislature, we just experienced a loss within the past few weeks. One of the questions people kept asking was, How do you guys just keep going? I am a teacher when I am not up here. That is what we do as public servants; we just get up and keep serving. Yet, we know that we personally experience things and still have to go through things with a smile on our face and be there for other people, so I really appreciate that this kind of action is going to happen.

Chairman Yeager:

At this time, I will open it up for additional testimony in support.

Tom Clark, representing Board of Medical Examiners:

To your question regarding section 12, Assemblywoman Backus, as far as the licensing is concerned, we did not want it to appear that having this training and volunteering for this was an actual requirement for licensure. Collecting information and data upon renewal is the best way for us to accomplish that goal. The moving of the effective date is good. There are a number of other changes that are coming out of this legislation process whereby our applications will change, so it will just roll that into the changes we are going to be making going forward.

Michael D. Hillerby, representing State Board of Nursing:

I would echo my colleague's comments. We are happy to support this. We are happy to collect this information and, at the same time, remain ever-hopeful that we never have to use it again.

Izzy Youngs, representing Nevada Women's Lobby:

We know a lot of these VOCP funds also go to victims of domestic violence, who are often women. We really support combining this with DHHS in order to streamline this process.

Tyler J. Winkler, Staff Attorney, Vegas Strong Resiliency Center, Legal Aid Center of Southern Nevada:

From my perspective, some of the most important changes in the legislation strengthen Nevada's VOCP. They guarantee a greater focus on helping applicants. A lot that has been shared today really emphasizes that. I do want to hit again on how there is a better emphasis and focus on what contributory misconduct means so there is no confusion and people who might not have committed any wrongdoing are not denied compensation when they need it. Also, there is a focus on expanding what injury means and what a victim is to make sure we capture people who might have mental issues following a victimization.

Robert L. Gipson II, Legal Victim Advocate, Vegas Strong Resiliency Center, Legal Aid Center of Southern Nevada:

I just want to touch on the victim-centered service that is provided by the Vegas Strong Resiliency Center. I do believe this is emerging as a model for the rest of the country. Most of the victims throughout our state will not have this resource, and they are still going to need to navigate this system and deal with their trauma. We have come across some of these victims who are underresourced because they do not necessarily have the sort of resources that would exist for survivors of Route 91.

I do want to illuminate one particular situation. One applicant came to us. We learned that her child had long been suffering from mental illness. The perpetrator was facing a charge of murder with a deadly weapon. Nonetheless, the parent was unsuccessful in obtaining burial reimbursement. She could not afford legal counsel to review the facts until she discovered us. Under current law, such results can and will continue to occur, but I do take heart in the sense that this legislation will work to close that gap and promote more victim-centered service.

Chairman Yeager:

I want to take a moment to thank all of you who worked with the Resiliency Center. Obviously, 1 October was a very difficult time for the City of Las Vegas and for the state as a whole. I was encouraged and still am encouraged to see the tremendous outpouring of support from our community coming from virtually everywhere. I do not think we can thank those who pitched in enough, including all of our first responders who ran into the face of danger that evening.

I want to let Committee members know there is a memorandum on the Nevada Electronic Legislative Information System from Caleb Cage, Chief of the Department of Public Safety's Division of Emergency Management ([Exhibit D](#)). He has indicated his support for the bill but was not able to be here this morning. I encourage Committee members to read that memorandum.

Is there anyone opposed to this bill? [There was no one.] Is there anyone neutral? [There was no one.] I will invite our sponsors back up for any concluding remarks.

Allison Combs:

I appreciate your consideration of the measure, and if there are any other questions following the hearing, I am happy to try to facilitate those.

Chairman Yeager:

I did want to say I really like one thing Mr. Armstrong noted. Moving this program over to DHHS accomplishes one thing we have tried to accomplish in this building for years, which is to have agencies communicate with one another and to have one-stop-shops and "no wrong door" policies, particularly for victims of crime. I like the idea that even if someone comes in the door and is not entitled to relief under this particular program, there are a number of other programs that he or she can be referred to right then and there. I think that is obviously how we do right by the victims of crime in our state to make this as easy as possible for them to get help without having to jump through a myriad of hoops. Assuming we get this through the Legislature, I think it is going to be extremely beneficial to victims of crime.

[[\(Exhibit E\)](#), [\(Exhibit F\)](#), and [\(Exhibit G\)](#) were submitted but not discussed and will become part of the record.]

I will now close the hearing on A.B. 534. We do not have any other bills on our agenda, so I will open it up for public comment. Would anyone like to give public comment? [There was no one.]

We do not have any additional bills to hear in this Committee right now. There is a possibility we might receive a bill or two on the floor today. We are planning to have a Judiciary Committee meeting tomorrow, which will begin at 9:30 a.m. If nothing else, we are going to try to do a work session. If we do get a bill on the floor this morning, we will see if we can possibly get that agendized for tomorrow as well. As far as Friday goes, we will just have to wait to see if we get anything. My inclination is that we will probably not have a meeting on Friday. With that being said, I hope everyone has a wonderful day. This meeting is adjourned [at 9:58 a.m.].

RESPECTFULLY SUBMITTED:

Lucas Glanzmann
Committee Secretary

APPROVED BY:

Assemblyman Steve Yeager, Chairman

DATE: _____

EXHIBITS

[Exhibit A](#) is the Agenda.

[Exhibit B](#) is the Attendance Roster.

[Exhibit C](#) is a proposed amendment to Assembly Bill 534, dated May 22, 2019, submitted by the Office of the Governor.

[Exhibit D](#) is a memorandum dated May 21, 2019, to Chairman Steve Yeager, submitted by Caleb Cage, Chief, Division of Emergency Management, Department of Public Safety, in support of Assembly Bill 534.

[Exhibit E](#) is written testimony dated May 22, 2019, submitted by Tennille K. Pereira, Director, Vegas Strong Resiliency Center, Legal Aid Center of Southern Nevada, in support of Assembly Bill 534.

[Exhibit F](#) is written testimony dated May 22, 2019, submitted by Tyler J. Winkler, Staff Attorney, Vegas Strong Resiliency Center, Legal Aid Center of Southern Nevada, in support of Assembly Bill 534.

[Exhibit G](#) is written testimony dated May 22, 2019, submitted by Robert L. Gipson II, Legal Victim Advocate, Vegas Strong Resiliency Center, Legal Aid Center of Southern Nevada, in support of Assembly Bill 534.