



The Opioid Initiative 2.0
**A Statewide Response to Opioid Use
and Other Substance Misuse**

Pūpūkahi i holomua:
Unite to move forward

January 2019

INTRODUCTION

The Hawaii Opioid Initiative – A Statewide Response for Opioid and Other Substance Misuse issues (HOI) is entering its second year of implementation and coordination among stakeholders to address opioid and other substance misuse issues. The initiative was launched on July 2017 by Governor David Ige in response to the national opioid crisis to develop and implement a proactive coordinated statewide Action Plan in order to avoid the tragedies experienced in other parts of the nation. The plan served as a roadmap for a focused and sustainable response to opioid and other substance misuse in Hawaii. Over the course of the year, the opioid initiative was highly successful in achieving the goals and objectives outlined in the original response plan which can be found here: [The Hawaii Opioid Initiative – A Statewide Response for Opioid and Other Substance Misuse Issues](#), and are highlighted in this document.

Adhering to the Governor’s guidance, one of the key elements attributing to the broad effectiveness in successfully achieving many of the goals in the Plan was the strong commitment to collaborate and coordinate across a wide spectrum of stakeholders and organizations. The framework of the opioid initiative, and its various workgroups forms the backbone of the initiative and serves as a focal point for exchanging information, coordinating efforts, and maintaining momentum. This underlying philosophy of “linking and syncing” efforts for the benefit of the broader community has overcome barriers that would have been insurmountable if faced independently by individual stakeholders. As a result, the goals met by the initiative in the last year were achieved in less time and with greater ease. It could be said that the most important achievement of the opioid initiative over the last year is that it has demonstrated what can be achieved when a community unites toward a common cause, Pūpūkahi i holomua.

A key concern from the outset of the Hawaii Opioid Initiative (HOI) was that the opioid response plan remains a “living document” that evolves as the needs and focuses of the initiative and the state evolve. It was understood that any successful plan could remain static and requires continuous review and adaptation to promote sustained effort and coordination of policy. This document is a manifestation of the commitment to keep the plan as a living document.

The HOI should be seen and used as an extension and evolution of the initial Hawaii Opioid Action Plan (The Plan). The HOI focuses on the status of the goals and objectives as identified by workgroups of the seven (7) focus areas. The HOI will continue and expand efforts and accomplishments achieved thus far.

While some discussion of the underlying framework, philosophy and driving principles of the Opioid Initiative can be found in this document, readers are encouraged to review the initial plan for further content and a more in-depth discussion.

In this iteration of the opioid plan, each of the 7 workgroups have a dedicated section that includes:

- a brief review of the objectives achieved in each workgroup focus area;
- those that will be continued into the upcoming year; and
- new objectives that have been added.

Additionally, data comparisons and updates can be found on the data dashboard at [The Hawaii Opioid Initiative \(www.hawaiiopioid.org\)](https://www.hawaiiopioid.org) website.

It is challenging to adequately describe within this short introduction how the opioid initiative has impacted policy, grown and strengthened collaborative relationships, and enhanced efforts. However, Hawaii has achieved a lot in a short period of time and continues to share our accomplishments with our national partners.

The Hawaii Opioid Initiative: Primary Themes, Framework, Philosophy and Driving Principles

In the Hawaii Opioid Initiative: A Statewide Response, Hawaii described how the national opioid epidemic presented simultaneously both a threat to public health and an opportunity to engage a multitude of community organizations, public and private sector groups, and other key stakeholders to organize resources, activities and efforts to reduce opioid overdoses and prevent opioid addiction. The focus was to leverage the expertise and efforts of individuals, groups, and organizations across the State and to harmonize these efforts to design and implement a unified plan of action. This unified effort will continue in the implementation of the HOI 2.0.

Seeing an opportunity to be proactive, the Hawaii Director of Health and the Governor initiated an inter-departmental effort within the DOH to evaluate how existing healthcare integration and system transformation efforts in the State could be aligned to address the opioid crisis in Hawaii. Hawaii created a framework which provided a structured approach to coordinating efforts across various state and community systems. Hawaii also based the work on common themes that span all focus areas which served as a “muster” test for objectives or action items each workgroup developed. The agreement and commitment were that all objectives and action items were to support one or more of the following three themes, which will continue in the implementation of HOI 2.0:

PRIMARY THEME 1: System Improvement Through Collaborative Response: Identify and foster key systems level coordination to positively impact statewide policy.

PRIMARY THEME 2: Balanced Public Health / Public Safety Approach: Identify and foster key systems level coordination to balance public health with public safety needs.

PRIMARY THEME 3: Healthcare Integration: Ensure that Hawaii’s healthcare system continues to develop as an integrated system that serves Hawaii’s people with continuity along the behavioral and primary care spectrum.

Hawaii Opioid Initiative Framework

The HOI framework consists of the following Workgroups and Committees:

- Executive Substance Use Policy Steering Committee (ESC) provides executive level support and input on policy and program initiatives.
- Operational Working Group - Planning Committee (OWG) consists of chairpersons of the individual working groups who meet regularly to process and synthesize information and recommendations into a multi-systemic proposal.
- Work Groups 1-7 (WG) made up of more than 150 stakeholders with relevant expertise from various fields, each WG contributing to and coordinating on goals and objectives of specific focus areas. Focus area (FA) themes were developed by the WGs to focus and filter efforts across the system.

The HOI began with six (6) focus areas:

- 1) Access to Treatment
- 2) Prescriber Education and Pain Management Practices
- 3) Data Informed Decision Making
- 4) Prevention and Public Education
- 5) Pharmacy-Based Interventions
- 6) Support Law Enforcement and First Responders

During Year 1 of the implementation of the Hawaii Opioid Initiative, the DOH simultaneously implemented Screening, Brief Intervention, and Referral to Treatment (SBIRT) throughout the state. Identifying that the activities of this program were aligned with all three themes of the HOI, the OWG recommended and the ESC agreed that a seventh Focus Area on SBIRT be created.

The HOI Framework will continue to work together to provide a proactive and sustainable response to opioids and other substance misuse. The HOI is a living document that is intended to be reviewed and adapted by the individual and institutional stakeholders as deemed appropriate.



Hawai`i Opioid Initiative

Focus Area #1: Expanding Access to Treatment



Objective 1-1: By January 2018, establish a pilot coordinated entry system to process and coordinate SUD treatment referrals



Objective 1-2: By October 2017, all ADAD contracted substance misuse providers will be eligible to bill MAT services in both outpatient and inpatient settings. Providers can do this in one of two ways: (1) Hire qualified staff to provide the services on site (2) Develop a partnership with a pre-existing Opioid Treatment Program (OTP) or Office-based Opioid Treatment (OBOT) entity to provide on-site MAT services to enrolled clients



Objective 1-3: By December 2018, increase the number of prescribers licensed to prescribe and administer Medicated-Assisted Treatment (MAT) such as buprenorphine and Suboxone by 25%.

Hawai`i Opioid Initiative Focus Areas




Treatment
Access


Prescriber Education
& Pain Management


Data-Informed Decision
Making & Evaluation


Prevention & Public
Education


Pharmacy-Based
Intervention


Law Enforcement &
First Responders


SBIRT

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SAMHSA

Focus Area 1: Treatment Access

Improve and modernize healthcare strategies and access for opioid and other substance misuse treatment and recovery services.

Objectives Currently in Progress from 2018:

- Increase the number of providers licensed to prescribe and administer MAT to 25%.

Summary:

While Hawaii has a significant inventory of SAMHSA-credentialed prescribers (125) for the administration of buprenorphine and suboxone to patients with opioid use disorders, many of those prescribers are either not taking OUD patients or are not practicing.

The Initiative will continue to engage prescribers to increase awareness of protocols for administration and services for SUD clients prescribed medication for SUD treatment (MAT).

With the success of the SBIRT pilot project which coordinated activities with other state projects such as LEAD and HELP Honolulu, the DOH moves to develop and implement a broader and comprehensive statewide coordinated entry system in HOI 2.0, Year 2.

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	DOH - Alcohol and Drug Abuse Division (ADAD) Hawaii Substance Abuse Coalition (HSAC) Statewide treatment and recovery service providers
Status	In progress

Focus Area 1: Treatment Access

New Objectives:

1-1: Expand coordinated entry system pilot to a statewide system for all ADAD-contracted providers by December 2019.

The implementation of a statewide coordinated entry system will serve to:

- Expand available crisis services by increasing ability to maintain a universal and real time inventory of available services that will more effectively increase immediate access to care.

This includes implementation of transitional bed stays throughout an episode of care where they are needed and that can be used as pre-treatment stabilization beds, or post-treatment for transitioning into Clean and Sober housing.

- Expand the coordination of care that better links all communities to a continuum of care through a coordinated entry and referral network that reduces access barriers for neighbor island communities. This would allow, for example, a client from Molokai to more readily enter residential treatment.
- Better Integrated components of the system to facilitate clients entering SUD treatment and recovery support service as they need it, when they need, and how they need it.

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	Alcohol and Drug Abuse Division Hawaii Substance Abuse Coalition Statewide treatment and recovery service providers
Status	New for 2019

Hawai`i Opioid Initiative

Focus Area #2: Prescriber Education & Pain Management



Objective 2-1: By December 2018, increase primary care provider PMP registration rates by 25% by providing training to prescribers
Objective 2-1a: By December 2018, increase prescriber PMP utilization rates by 10%



Objective 2-2: By 2020, assure universal screening for substance misuse in hospital and primary care settings Statewide



Objective 2-3: By March 2018, engage payers and physician organizations to disseminate basic best practice information on opioid-prescribing Statewide.
Objective 2-3a: By December 2019, develop a standardized training on opioid-prescribing best practices and provide training to 50% of prescribers Statewide



Objective 2-4: By July 2018, implement informed consent template as outlined in ACT 66.

Hawai`i Opioid Initiative Focus Areas



Treatment Access



Prescriber Education & Pain Management



Data-Informed Decision Making & Evaluation



Prevention & Public Education



Pharmacy-Based Intervention



Law Enforcement & First Responders



SBIRT

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SAMHSA

Focus Area 2: Prescriber Education & Pain Management

Improve opioid and related prescribing practices by working with healthcare providers.

All goals and objectives of this focus area were identified as completed in 2018.

Objective 2-3a is continuing on in 2019. Prescriber education is an ongoing effort. Workgroup 2 stakeholders are corroborating with Workgroup 5 members to develop multiple prescriber education opportunities in 2019 (Project ECHO, Mocha Minutes).

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	DOH (ADAD / Emergency Medical Services – Injury Prevention Branch (EMS-IPB)) Narcotics Enforcement Division (NED) John A. Burns UH School of Medicine (JABSOM) Hawaii APRN Nursing Program Workgroup 2
Status	In progress

Focus Area 2: Prescriber Education & Pain Management

New Objectives:

2-1: By November 2019 establish a process within the Medical Review Board for professional or institutional review and engagement with prescribers who may be over-prescribing or who are engaged in prescribing practices that are of concern (separate from law enforcement).

2-2: By December 2019 develop and recommend a plan for education for physicians specific to opioid prescribing and pain management practices that includes oversight to ensure that content remains relevant and current.

2-3: By October 2019 identify and evaluate mechanisms to increase use of opioid/pain management education for prescribers upon relicensing or renewal of prescriptive authority.

2-4: By April 2019 promote UH Project ECHO Series on Opioid and Pain management information.

2-5 By April 2019 promote educational offerings that provide relevant opioid and pain management information. This will include development of a minimum of 8 short video clips that can be distributed widely to enhance prescriber knowledge of relevant topics (“MOCHA MINUTES”).

2-6: By July 2019 develop a sub-group that focuses on Alternative to Pain Management practices such as physical therapy, chiropractic, acupuncture, etc.

2-7: By July 2019 develop *locum* packets for physicians that include brief handouts for *locum* placements so that they are aware of these strategies and are oriented to Hawaii’s opioid prescribing guidelines and legislation.

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	DOH (ADAD / EMS-IPB) NED JABSOM Hawaii APRN Nursing Program Workgroup 2
Status	New for 2019

Hawai`i Opioid Initiative

Focus Area #3: Data-Informed Decision Making



Objective 3-1: By July 2018, amend HRS 329-104 to allow limited release of data by NED to DOH for purposes of public health surveillance



Objective 3-2: By September 2018, develop a standardized framework for the collection, synthesis, and dissemination of data



Objective 3-3: By 2020, increase electronic health records integration between hospital and primary care settings Statewide

Hawai`i Opioid Initiative Focus Areas



Treatment Access



Prescriber Education & Pain Management



Data-Informed Decision Making & Evaluation



Prevention & Public Education



Pharmacy-Based Intervention



Law Enforcement & First Responders



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SAMHSA

Focus Area 3: Data-Informed Decision Making

Implement system-wide routine data collection, sharing and dissemination to increase knowledge and inform practice.

Objectives Currently in Progress from 2018:

- Support and recommend legislature that allows data sharing between the Narcotic Enforcement Division (NED) and DOH.
- Standardize a framework for collecting, synthesizing and disseminating data.
- Develop electronic health record (EHR) interface between hospital and primary care settings.

Summary:

Develop a data collection system that incorporates and addresses the needs of the seven focus areas. Coordinates with all workgroups in developing system requirements, and address barriers to share such data. In working with NED and the PMP, Workgroup3 intends to develop that access and identify the pertinent data.

An EHR accessible by hospitals and primary care settings that can be synchronized through a coordinated entry system promotes accessibility to care. Developing a system that utilizes standardized tools for intake and screening support that standardization and accessibility for a coordinated system of care. This is a goal for Workgroups 1, 3 and 7.

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	DOH (ADAD / EMS-IPB) NED Hawaii Health & Harm Reduction Center (HHRC)
Status	In progress

Focus Area 3: Data-Informed Decision Making

New Objectives:

3-1: By October 2019 identify methods to optimize the completeness of PMP data through additional software enhancements and personnel support.

3-2: Coordinate with Workgroup 2 in developing an electronic health record (EHR) interface between hospitals and primary care settings.

3-3: By October 2019 increase prescriber education regarding access to and use of PMP, including delegates by an additional 20%.

3-4: a. By October 2019 increase capacity of the data dashboard through a standardized framework for data to be utilized by all workgroups and published on www.hawaiiopioid.org.

b. By December 2019 increase data collection by pulling in additional data sets and continue to apply analytics to the data to describe, predict, and improve each of the workgroup’s performance. Workgroup 3 will work on the interpretation of the data and continue to communicate the meaningful patterns in various data sets and applying those patterns towards effective decision making.

3-5: By October 2019 coordinate with all workgroups to develop a centralized system for naloxone distribution, utilization and tracking.

3-6: By December 2019 develop a data summary on medical cannabis statutes and patterns of utilization through a literature review. By November 2019 establish a process within the Medical Review Board for professional or institutional review and engagement with prescribers who may be over-prescribing or who are engaged in prescribing practices that are of concern (separate from law enforcement).

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	DOH (ADAD / EMS–IPB) NED HHHRC
Status	New for 2019

Hawai`i Opioid Initiative

Focus Area #4: Prevention & Public Education



Objective 4-1: By April 2018, launch a public awareness campaign that includes a website and collateral material to increase awareness of opioid issues, risks and centralize resources in Hawaii.



Objective 4-2: By January 2019, implement year-round drop off / "take back" sites at a minimum of 2 county police stations within the State to include protocols for disposal of unused medications in a safe and secured manner.



Objective 4-3: By July 2018, Develop and disseminate an evidence-based training module on opioid use, misuse, overdose and related harms for non-prescribers.

Hawai`i Opioid Initiative Focus Areas



Treatment Access



Prescriber Education & Pain Management



Data-Informed Decision Making & Evaluation



Prevention & Public Education



Pharmacy-Based Intervention



Law Enforcement & First Responders



SBIRT

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Focus Area 4: Prevention and Public Education

Improve community-based programs and public education to prevent substance misuse and related harms.

Objectives Currently in Progress from 2018:

- Continue developing and establishing a media campaign that encompasses themes and topics from all focus areas.
- Continue to develop and disseminate an evidenced-based training module on opioid use, misuse, overdose and harms. resources in Hawaii.

Summary:

Workgroup 4 will continue to collaborate with the DOH Communications Office and all workgroups in branding and public messaging for all aspects of the HOI. Key components that are to be focused on include the new law for prescription and distribution of Naloxone by pharmacists, prescriber education regarding prescribed medication for SUD treatment (MAT), the drop box and take back campaigns, and harm reduction resources.

Regarding each of the areas of focus, the DOH Communications Office will begin to take an active role in the development and implementation of the public awareness and media campaign and establish coordination with the chairs of each workgroup.

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	DOH (ADAD / EMS-IPB) NED HHHRC
Status	In progress

Focus Area 4: Prevention and Public Education

New Objectives:

4-1: Public Awareness Campaign. By October 2019, create a comprehensive 2 year marketing campaign that serves to develop, finalize, and disseminate branding and products (e.g. evidence-based training module on opioid use, misuse, overdose and related harms for non-prescribers) as the next stage in a multi-modal public awareness campaign to increase awareness of opioid issues, risks and centralize resources in Hawaii.

4-2: Expanding Drug Take-Back Options. By December 2019, promote awareness of existing “take back” sites through www.hawaiiopioid.org and other channels (e.g. infographics), and increase access by implementing at least 2 additional year-round “take back” sites on Oahu.

4-3: Developing Local Innovations. By December 2019, establish partnerships with at least 10 new organizational allies (e.g. hepatitis coalitions, faith-based groups, environmental justice, hygiene centers, youth groups) to develop, implement, and evaluate at least 2 locally-based prevention projects that can be shared as successful models of care.

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	DOH (ADAD / DOH Communications Office) NED HHHRC High Intensity Drug Trafficking Area (HIDTA) Honolulu Police Department (HPD) Maui Police Department (MPD) Hawaii County PD (HCPD) Office of the Lieutenant Governor Department of the Attorney General
Status	New for 2019

Hawai`i Opioid Initiative

Focus Area #5: Pharmacy-Based Intervention



Objective 5-1a: By April 2018, establish a standing order through the DOH to allow pharmacists to dispense Naloxone to patients and community members to increase access to life-saving medication.



Objective 5-1b: By July 2019, modify Hawaii Revised Statutes to allow pharmacists prescriptive authority to prescribe Naloxone to patients and community members to increase access to life-saving medication.



Objective 5-2: By June 2018, provide continuing education presentation on pharmacist role in screening for risk for patients with opioid prescriptions.



Objective 5-3: By October 2018, develop Naloxone training program for pharmacists.

Act 151:
Relating to Opioids
requires use of a warning label stating the risk for addiction and death on the packaging of all opioids dispensed by a provider

Act 152:
Relating to the Uniformed Controlled Substance Act
enables properly registered providers to give prescriptions to patients who are participating in medically manageable withdrawal treatment programs



Act 154: *Relating to Opioid Antagonists*
authorizes pharmacists to prescribe, dispense, and provide related education on opioid antagonists for those at risk of overdose

Hawai`i Opioid Initiative Focus Areas



Treatment Access



Prescriber Education & Pain Management



Data-Informed Decision Making & Evaluation



Prevention & Public Education



Pharmacy-Based Intervention



Law Enforcement & First Responders



SBIRT

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Data Driven Prevention Initiative



SAMHSA

Focus Area 5: Pharmacy-based Interventions

Increase consumer education and prescription harm management through pharmacy-based strategies.

Objectives Currently in Progress from 2018:

- Train pharmacists to screen for opioid users for SUD. This can be coordinated with implementation of SBIRT project activities.
- Continue developing the Pharmacist Naloxone training program.

Summary:

Provide continue education units (CEU's) for Naloxone training to pharmacists in order to incentivize the training. The workgroup will coordinate with ADAD to identify resources for this objective. In addition to the Naloxone training, also work with SBIRT trainers to develop screening tools and protocols for pharmacists to screen opioid users for other SUDs.

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	DOH (ADAD) Department of Commerce and Consumer Affairs (Board of Pharmacy) University of Hawaii, School of Pharmacy
Status	In progress

Focus Area 5: Pharmacy-based Interventions

New Objectives:

5-1: By October 2019 coordinate with Workgroup 4 to create a marketing campaign to increase awareness about Act 154 and the availability of Naloxone. Group will identify their targeted audience for campaigns and will ensure there is agreement about messaging as to not confuse viewers.

5-2: By October 2019 review preauthorization requirements for Naloxone that may be potential barrier for pharmacists prescribing under Act 154 and provide an action plan to resolve.

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	DCCA (Board of Pharmacy) UH School of Pharmacy DOH (ADAD)
Status	New for 2019

Hawai`i Opioid Initiative

Focus Area #6: Law Enforcement & First Responders



Objective 6-1: By April 2018, develop a recommended course of action to be taken by first responders when encountering opioid overdose victims using a clearly defined recommended protocol.



Objective 6-1a: By September 2018, train 30% of law enforcement/first responders in all four counties on the training program that is developed by the law enforcement group.



Objective 6-2: By March 2018, develop and recommend standard procedures for first responders on treatment referrals at initial contact by law enforcement/first responders.



Objective 6-2a: By June 2018, coordinate with other working groups and stakeholders to create a list of diversion programs for law enforcement/first responders to use as a reference when referring overdose victims.



Objective 6-3: By December 2018, create a mechanism for real time reporting and data collection for opioid related incidents and emergencies.

Hawai`i Opioid Initiative Focus Areas



Treatment Access



Prescriber Education & Pain Management



Data-Informed Decision Making & Evaluation



Prevention & Public Education



Pharmacy-Based Intervention



Law Enforcement & First Responders



SBIRT

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SAMHSA

Focus Area 6: Support for Law Enforcement and First Responders

Coordinate operations and services, support specialized training for first responders and assure effective laws and policies.

Objectives Currently in Progress from 2018:

- Establish LEAD in Maui and Hawaii Counties
- Develop mechanism for real time reporting and data collection for opioid related incidents and emergencies.

Summary:

LEAD projects have been approved by the Governor for implementation in Maui and Hawaii Counties. Through collaboration between Maui PD, Hawaii County PD and ADAD, procurement for LEAD services are targeted to begin by spring 2019. Workgroup 6 is also continuing to develop data tools to provide real time information that will provide law enforcement and first responders opioid related incidents and emergencies in order to enhance the coordination between agencies and support data driven decisions.

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	County Police Departments DOH (ADAD) HIDTA NED
Status	In progress

Focus Area 6: Support for Law Enforcement and First Responders

New Objectives:

6-1: By October 2019 coordinate with Workgroup 4 to develop a resource card or an infographic about the availability and effectiveness of treatment options for both the opioid users and their families in healthcare settings. This resource card may also be utilized for first responders (collaborating with HIDTA).

6-2: By October 2019 collect data on implementation and utilization of ODOM Mapping pilot and discuss expansion project. Maui PD has piloted the ODOM Mapping system to disseminate real time data reporting of SUD related or crisis incidents for coordinated response efforts by available community resources.

6-3: By October 2019 develop data needs and coordinate with the Department of the Medical Examiner on data resources, collection and reporting.

6-4: Continue providing support to NED for PMP utilization and effectiveness.

6-5: Provide support for coordinated entry and related referral and access efforts such as LEAD implementation on Maui and Hawaii counties. Provide coordination and leadership for community stakeholders and resources for implementing LEAD activities.

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	County Police Departments DOH (ADAD) HIDTA NED
Status	New for 2019

Hawai`i Opioid Initiative

Focus Area #7: Screening, Brief Intervention, and Referral to Treatment (SBIRT)



Objective 7-1: Develop and initiate a pilot program called "The Hawai'i Screening, Brief Intervention, and Referral to Treatment (SBIRT)"



Objective 7-2: Create a hawaiisbirt.org website and link to hawaiiopioid.org



Objective 7-3: Implement SBIRT in ten (10) primary care clinics located within two networks of primary care practices, Pacific Medical Admin Group, Inc. (PMAG) and East Hawai'i Independent Physician Association (East HIPA), and three (3) sites of a Federally Qualified Health Center with Hawai'i Primary Care Associations.

Hawaii SBIRT

Working together to provide comprehensive care.



Hawai`i Opioid Initiative Focus Areas



Treatment Access



Prescriber Education & Pain Management



Data-Informed Decision Making & Evaluation



Prevention & Public Education



Pharmacy-Based Intervention



Law Enforcement & First Responders



SBIRT



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Data Driven Prevention Initiative



SAMHSA

Focus Area 7: Screening, Brief Intervention and Referral to Treatment

Integrate SUD screening in primary care settings and develop referral and entry system into a continuum of care.

Objectives Currently in Progress from 2018:

Integrating with all workgroups continues to be an objective of Workgroup 7 in Year 2 of the HOI.

Summary:

Although Workgroup 7 is a newly implemented focus area of the HOI, the project is in Year 3 of implementation. With this stage of the project underway, expansion is a primary focus. Integration into the broader system of care is another area of focus for this workgroup.

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	DOH (ADAD / Maternal and Child Health Branch) HMIHC HSAC
Status	In progress

Focus Area 7: Screening, Brief Intervention and Referral to Treatment

New Objectives:

7-1: By 2020, assure universal screening for substance misuse in hospital and primary care settings Statewide. It has been determined that this objective should not be part of Workgroup 2, but rather Workgroup 7. It involves implementing a widespread screening and early detection system for individuals at risk for SUD and seeks to assure that brief interventions are utilized where possible to reduce the demand on the treatment care system as well as to support coordinated entry and referral for individuals who need more specialized care.

7-2: By 2020 assure universal screening for substance misuse in hospital and primary care settings Statewide for mother's and new born. The goal of the Hawai'i Maternal and Infant Health Collaborative (HMIHC) is to improve birth outcomes and decrease pre-term births in Hawai'i by reducing risk factors for tobacco, alcohol, and illicit drug use during pregnancy through implementation of a universal statewide system to increase the delivery of prenatal Screening, Brief Intervention, and Referral to Treatment (SBIRT) services that will promote pregnant women's cessation of substance use. Workgroup 7 will collaborate with HMIHC to expand the Hawaii Prenatal SBIRT, Screening, Brief Intervention and Referral to Treatment efforts Statewide.

Related Theme(s)	System Improvement Through Collaborative Response Balanced Public Health / Public Safety Approach Healthcare Integration
Related Focus Area(s)	Treatment Access Data Informed Decision Making Prevention and Public Education
Need(s) Addressed	Data Prevention Activities Training and Education Reduce Stigma Improve Treatment Capacity Policy Coordination
Lead Agency/Partner(s)	DOH (ADAD / Maternal and Child Health Branch) HMIHC HSAC
Status	New for 2019