

**ADVISORY COMMISSION ON DRUG ABUSE AND CONTROLLED SUBSTANCES (HACDACs)**

Alcohol and Drug Abuse Division (ADAD), Department of Health (DOH), State of Hawai'i

**Kākuhihewa Building, 601 Kamokila Boulevard, Room 360, Kapolei, Hawai'i**

**May 28, 2024**

**9:00 am – 11:00 am**

Members Present: Ku ulei Salzer-Vitale, MSW, Chair; Greg Tjapkes, Vice Chair; Diana Felton, MD; Jon Fujii, MBA; Lilinoe Kauahikaua, MSW.

Members Absent: Adam Gratz, DO; Erika Vargas, LCSW.

Staff Present: John Valera, AICP; Robyn Loudermilk, AICP; Merrick Lambaco, Jr., Brenda Wong.

Guests Present: Sasha Farmer, Danic Gamboa, Joshua Osequeda.

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS/ ACTIONS/ CONCLUSIONS	PERSON(S) RESPONSIBLE	DUE DATE
1. Call to Order:	The meeting was called to order at 9:04 am.			
2. Consideration and approval of meeting minutes of April 23, 2024.	<b>Motion by Commissioner Felton and seconded by Commissioner Fujii to adopt minutes from the April 23, 2024, meeting. Motion approved.</b>	<b>Motion approved.</b>		
3. Community Input:  [Pursuant to section 92-3, Hawaii Revised Statutes, all interested persons will have three (3) minutes to speak, i.e., per person, per item, or written testimony can be submitted on agenda items]	No community comments provided.  .			
4. Alcohol and Drug Abuse Division (ADAD) Report <ul style="list-style-type: none"> <li>• Overdose to Action in States Grant (OD2AS) <ul style="list-style-type: none"> <li>o Share lessons learned from OD2AS.Kick-off Conference held May 2024 in Atlanta, Georgia.</li> </ul> </li> <li>• 2024 Legislative Session Update <ul style="list-style-type: none"> <li>o Update on activities on Senate Bill 2885 SD2 HD2, regarding the establishment of</li> </ul> </li> </ul>	Mr. Valera reported on the OD2AS Kick-Off Conference and provided an update on the 2024 Legislation Session <ul style="list-style-type: none"> <li>• An annual meeting required for all Center for Disease Control (CDC) OD2A States and OD2A Local grant recipients. Goal of the grant is to develop data driven statewide/local initiatives and to work with community prevention providers to respond to overdoses.</li> <li>• Conference goal was to learn from one another and how collaborations are occurring with other entities to reduce overdose. A number of webinars</li> </ul>			

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<p>a working group to develop a statewide homeless triage and treatment center program, and why it did not pass this session.</p>	<p>and resources were provided prior to attending conference to learn what it would be like.</p> <ul style="list-style-type: none"> <li>• Numerous CDC presentations on how to obtain technical assistance to develop overdose response strategies. Resources provided on the grant, how best to work with the CDC project officer/staff and request technical assistance.</li> <li>• Learned about other CDC grants and programs, such as drug free coalitions, and how to engage local partners to increase network of prevention providers. Also learned that State Opioid Settlement funds can be used as a match with drug free coalition (DFC) grant funds.</li> <li>• Opportunity to meet with the various Hawaii project officers who offered a range of tools/tips/takeaways for improving current programs.</li> <li>• Grant Coordinator is working with Surveillance Principle Investigator to better work with our community partners.</li> <li>• Senate Bill 2885 SD2 HD2 did not pass this session as time ran out for it to be heard. There is a high likelihood that a new bill will emerge in next year's session.</li> </ul> <p>Chair Salzer led the discussion on ADADs report. Mr. Valera's immediate takeaway from the conference is the need to build better bridges with Hawaii's CDC CFDs. ADAD has reached out to several CFDs to establish relationships and increase the prevention network. Each CFD has its own focus. HACDACS support can be provided through the annual report by recommending the development of a prevention strategy, assisting local coalitions, and identify ADAD as a potential financial resource if coalitions are looking for a state match.</p>			

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	<p>Vice-Chair Tjapkes shared that there are a number of community coalitions and that ADADs current State Prevention Strategy initiative would guide prevention efforts. He is part of a group working to develop a statewide prevention network, build prevention networks on each island, create additional communication channels, and create some synergy to develop goals. In June there are a number of prevention related meetings by the ADAD Prevention Advisory Committee and the Prevention Network.</p>			
<p>5. Discussion on Commission Recruitment and Interim Appointments.</p>	<p>Ms. Loudermilk provided an update on ADAD activities that occurred after the April 23, 2024, meeting.</p> <ul style="list-style-type: none"> <li>• The Governor’s Office informed ADAD that due to the likelihood of a Special Session, they are scrutinizing interim appointment to be sent to the Senate. And that HACDACS was not a high priority. It was suggested that ADAD send an email to the Governor’s Office regarding the current situation and the need for the interim appointments.</li> <li>• ADAD’s email to the Governor’s Office stressed the need for these interim appointments to meet statutory membership requirements.</li> <li>• The statutes requires a minimum of nine members. There are currently seven members, that will decrease to six as one members term expires on June 30. 2024.</li> <li>• As of this morning, there has been no change to the Governor’s Office strategy. Was informed that the effective date for interim appointments are July 1, 2024.</li> <li>• ADAD will continue to follow up with the Governor’s Office. Once interim appointees have been submitted to the Senate, will reach out to provide information on HACDACS so they are prepared before their first meeting.</li> </ul>			

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	Chair Salzer led the discussion on interim appointments to HACDACS and noted that she will send an email to the Governor’s Office. Also shared that she has never encountered this type of treatment with members, memberships, and recruitment. Will continue to operate as is since meeting quorum is based upon a simple majority. ADAD will forward information up to the Director.			
6. Discussion on Conducting an In-Person Commission Orientation at the July 23, 2024, Meeting	Chair Salzer reminded Commissioners that the meeting will be both hybrid and in person at the ADAD Conference Room.			
7. Update on meeting topics and presentations for HACDACS meetings in: <ul style="list-style-type: none"> <li>• June 2024</li> <li>• July 2024</li> <li>• July 2024</li> <li>• August 2024</li> <li>• September 2024</li> </ul> <p>Potential topics include Medical Cannabis Safety and Testing Policies; Harm Reduction Review based on substance use; Status of Residential Treatment Programs and their trends and needs, Prevention Initiatives, Medication Assisted Treatment for Methamphetamine Use Disorder, the intersection of substance use treatment and the criminal justice system. New topic ideas are encouraged.</p>	Chair Salzer led the group discussion related to planning and any schedules or topics that the group would like to discuss: <p>The following is the tentative monthly schedule:</p> <ul style="list-style-type: none"> <li>• June 2024 – Vaping Targeting Youth in Hawaii</li> <li>• July 2024 – To Be Determined</li> <li>• August 2024 – Local Recovery Communities</li> <li>• September 2024 – Office on Medical Cannabis Control Regulation Activities</li> </ul>	<p>Contact Hawaii Public Health Institute (HIPHI)</p> <p>Contact Aunty Shari Lynn, Ka Hale Pomaika`i</p> <p>Contact Office on Medical Cannabis Control Registration (OMCCR).</p>	<p>Vice Chair Tjapkes to contact HIPHI.</p> <p>ADAD Confirmed.</p> <p>ADAD Confirmed.</p>	
8. Presentation by Aloha United Way (AUW) and Care Hawaii Inc., on substance use and mental health	Ms. Sasha Farmer and Ms. Danic Gamboa of Care Hawaii Inc. and Mr. Joshua Osequeda of the AUW presented on mental health and substance use populations served by Hawaii CARES.			

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populations served by Hawaii CARES.	<ul style="list-style-type: none"> <li>• Hawaii Coordinated Access Resource Entry System (CARES) provides assessment and referrals to mental health and substance use disorder (SUD) treatment and services. Referral to mental health services is provided by Hawaii CARES 988 and referrals to SUD treatment is provided by AUW 211. The Hawaii CARES framework implements SAMHSA’s “No wrong door” policy, and helps clients get the help that they need faster.</li> <li>• Hawaii CARES 988 is a crisis and suicide call center providing services 24/7 to adults and children in Hawaii and American Samoa. Staff provides culturally competent services through calls, texts, and chats. Counselors specialize in risk assessment, crisis intervention, suicide intervention, and 24-hour follow up services. Call are categorized to determine level of care and service a caller may need.</li> <li>• The 988 Suicide and Crisis Lifeline was launched in June 2022 and can be accessed by call, text, or chat. Calls and texts with and 808 area code are routed to Hawaii CARES. Services provided 24/7 to adults and children in Hawaii and American Samoa. Also offer follow up calls within 24-72 hours. Implementation of text and chat services in September 2022, has been beneficial to hearing impaired as well as teenagers if their parents are the trigger.</li> <li>• Crisis stabilization beds provide a short-term (3-10 days) sub-acute level of care and are available on Oahu, Maui, and the Big Island. Between July 1, 2002, to June 20, 2023, 31.3% of crisis stabilization beds were utilized for co-occurring mental health and substance use disorder.</li> <li>• In 2023, 98,703 inbound phone calls were received. Approximately 32.45% of these calls were for mental health, substance use, or co-occurring mental health and substance use. Oahu had the highest number of calls followed by Hilo, Kona, Maui, Kauai, Molokai, and Lanai. Calls were also received from American Samoa and other states.</li> <li>• Between 2018-2022 Hawaii had the 12<sup>th</sup> lowest suicide rate nationwide. The City and County of Honolulu has the highest percentage of suicides, followed by Hawaii County, Maui County, and Kauai County.</li> <li>• Crisis Support Services include Crisis Mobile Outreach and Crisis Support Management. Certified Peer Specialist Support Services are also available. Also conducts community outreach to expand awareness of services available.</li> <li>• AUW 211 (AUW) call center is available daily, though not 24 hours. When AUW is not available, crisis calls received by Hawaii CARES 988 related to SUD are referred to AUW. The AUW then follows up with the referred callers the next day. There has been an increase in 211 calls within the past year.</li> <li>• A separate SUD Text Helpline (808) 808-1627 provides information and education through automated and live support as well as automated responses. Can also be used as a call-in number.</li> <li>• Referrals are to ADAD contracted service providers. Care coordination aids clients to make sure they are receiving needed services within the continuum of care. Service gaps exist in the SUD continuum of care treatment on each island.</li> <li>• Between April 2022 to May 2024 the AUW received 8,795 calls. Universal Standardized and Intake Screening (USIS) were completed for 4,711 callers with 3,196 clients referred to ADAD service providers. While ADAD service providers referred 8,386 clients to AUW for review. The AUW made 13,132 outgoing calls, reflecting the amount of care coordination occurring with clients and service providers. Both incoming and outgoing call volumes continues to increase as well as the number of completed USIS.</li> <li>• Between December 2023 to now, approximately 47% of clients were currently taking over the counter or prescription medications. Approximately 90% of clients had health insurance with an estimated 85% covered through Medicaid. A</li> </ul>			

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	<p>number of clients have misused alcohol or drugs within the last 30 days. Substances used from highest to lowest are alcohol, methamphetamine/crystal meth, marijuana/cannabis, other sedatives, cocaine, fentanyl, crack cocaine, and heroin. Location of client by county from highest to lowest are Honolulu, Maui, Hawaii, and Kauai. Client by gender from highest to lowest are male then female.</p> <ul style="list-style-type: none"> <li>• Chair Salzer led the discussion on cultural competency, services for American Samoa, Medicaid clients, youth support lines, and HACDACS support.</li> <li>• Screening questions and availability of native language speakers are utilized to assist in providing cultural competence services. Currently there are no referrals to culturally specific service providers, however, discussions are occurring. Hawaii CARES 988 only provides call center service to American Samoa and that a majority of callers are adults. Working towards providing services in American Samoa. Medicaid clients utilize Hawaii CARES 988, however the number of clients is not readily available for this presentation. HACDACS shared information about Lines for Life, a Portland Oregon based group that administers Youth Line, a peer supported call line for teens. Youth Line is getting calls from across the nation, including Hawaii. Will provide contact information for Lines for Life. The HACDACS annual report could support the expand network of ADAD service providers and increase the level of care, especially on the neighbor islands.</li> </ul>			
<p>9. Open Forum:</p> <p>Public comments on issues not on the agenda, for consideration for Commissions agenda at its next meeting.</p>	<p>No community comments provided.</p>			
<p>10. Adjournment</p>	<p>The meeting was adjourned at 10:41 am</p>			

**Next Meeting:            June 25, 2024**  
**9:00 am to 11:00 am**  
**Zoom Meeting**