

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

August 27, 2024

9:00 am – 11:00 am

Members Present: Ku ulei Salzer-Vitale, MSW, Chair; Greg Tjapkes, Vice Chair; Emily Andrade; Diana Felton, MD; John Paul Moses III, APRN-R; Jawana Ready, MD.

Members Absent: Jon Fujii, MBA; Lilinoe Kauahikaua, MSW; Erika Vargas, LCSW.

Staff Present: John Valera, AICP; Robyn Loudermilk, AICP,

Guests Present: Shari Lynn, Ka Hale Pomaika'i

AGENDA ITEM	DISCUSSION	RECOMMENDATIONS/ ACTIONS/ CONCLUSIONS	PERSON(S) RESPONSIBLE	DUE DATE
1. Call to Order	The meeting was called to order at 9:05 am.			
2. Consideration and approval of meeting minutes of July 23, 2024.	Motion by Commissioner Felton and seconded by Chair Salzer to adopt amended meeting minutes from the July 23, 2024, meeting. Motion approved.	Motion Approved.		
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 input provided.			
4. Alcohol and Drug Abuse Division (ADAD) Report. <ul style="list-style-type: none"> • Share highlights on recently completed INSPIRE-PLUS Planning and Discovery Sessions. • Update of Staff Recruitment 	Mr. Valera reported on the INSPIRE – PLUS planning and discovery sessions and an update on staff recruitment. <ul style="list-style-type: none"> • INSPIRE-PLUS is a new electronic health management system that will replace WITS and is targeted to go live in the later part of 2025. This new system will be nimble to address changes in reporting requirements and provide online storage for uploaded documents. It will also support ADADs certification functions which is currently 			

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	<p>paper based. There is also the potential for AI functions.</p> <ul style="list-style-type: none"> • ADAD will be adding on to an existing system used by the DOH Developmental Disabilities and the Child and Adolescent Mental Health Divisions. • Planning and discovery sessions occurred in July and August with ADAD staff, ADAD service providers, and the Hawai'i Health and Harm Reduction Center. There was good engagement by the providers. Since the completion of the sessions, ADAD has had a number of follow up sessions with the vendor RSM. • The next step is the development of user stories that will then be used to develop required coding. • One of ADADs position, Program Specialist Substance Abuse, is part of the Hawai'i State Department of Human Resources pilot project to streamline the hiring process. A number of hard to fill classes were identified for inclusion in this pilot project which seeks to reduce the time between when a person applies, is interviewed, and hired. • ADAD has several temporary staff through the ALTRES contract as well as an intern from the State Department of Labor and Industrial Relations. Have had good success in recruiting and hiring permanent staff from ALTRES staff who have “tested out” positions. 			
<p>5. Update on meeting topics and presentations for upcoming HACDACS meetings:</p> <ul style="list-style-type: none"> • October 2024 • November 2024 	<p>Chair Salzer led group discussion related to planning and any schedules or topics that the group would like to discuss:</p> <ul style="list-style-type: none"> • September 2024 – Office of Medical Cannabis Control Regulations Activities 	<p>Contact Office on Medical Cannabis Control Registration (OMCCR).</p>	<p>ADAD Confirmed.</p>	

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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.	<ul style="list-style-type: none"> • October 2024 – No presentation. • November 2024 – No presentation. 			
6. Review of By-Laws.	<p>Chair Salzer led the discussion on the review of the by-laws. There is a need to update the by-laws as they are 30 years old. A focus of the update will be to incorporate recovery and harm reduction. Suggested revisions were noted on an electronic version of the by-laws</p> <ul style="list-style-type: none"> • Ms. Loudermilk relayed that ADAD will need to review proposed revisions to ensure conformance with current Hawai'i Revised Statutes. • A link to an electronic version of the by-laws will be provided to members so that they can recommend proposed revisions. 			
7. Election of Chairperson and Vice-Chairperson.		Deferred.		
8. Identification of Areas of Focus for the Next Twelve Months.		Deferred.		
9. Presentation by Sharri Lynn, Executive Director/Clinical Supervisor of Ka Hale Pomaikai, on Cultural Perspectives of Recovery Communities and Local Initiatives.	<p>Ms. Shari Lynn presented on cultural perspectives of recovery communities and local initiatives.</p> <ul style="list-style-type: none"> • Ka Hale Pomaika'i was formed on Moloka'i in 1996, as an all-volunteer recovery community organization (RCO), to fulfill a community need. Established a number of initiatives such as a clean and sober house, 12-step support groups, and a farm. All volunteers were people in recovery. Passion was the driving force that kept people engaged with each other. 			

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	<ul style="list-style-type: none"> • Provided resources to the community a number of ways. Shared experiences and recovery stories at community events, conducted sign holding during Recovery Month, and partnered with and aided other agencies as well as community initiatives, i.e. food distribution. • Encountered funding challenges to support culturally based programs. Initial funding of \$2,000 provided by Papa Ola Lokahi. Later on, the late Senator Dan Inouye secured \$200,000 in federal funding after a visit to Moloka'i where he spent the day observing services provided to the community. • The transition to provide treatment occurred in 2009. As a proactive RCO, helped former recovery partners go back to school and became CSACs. Who were then available to provide needed treatment services. Only treatment facility on Moloka'i. Provides wrap around services to support recovery and teach social skills. Continues to be able to hire peers from the program who became CSACs. • Vision: Life is a gift from <i>Akua</i> to us and for us. We will work to cherish and sustain a life rooted in being <i>pono</i> with ourselves, our family, and our community. • Restorative Agency Goals: <ul style="list-style-type: none"> ○ Embrace anti-racist and approaches that recognize the intersection of race, gender, and class oppression, as well as other forms of discrimination and exclusion. ○ Restore access and support traditional food cultivation. ○ Acknowledge, honor, and incorporate Hawaiian culture. ○ Foster and build a workforce reflective of Moloka'i's community. • Producing Positive Outcomes: <ul style="list-style-type: none"> ○ Native Hawaiian haumana engaged in Ka Hale Pomaika'i services inclusive of SUD treatment, and/or recovery support addressing sobriety and food security. ○ Alumni peers continue to assist in weekly supported ohana activities held off campus. ○ Former alumni are now CSACs – educated, empowered, and employed. • Treatment providers are often called on to ensure that evidence-based practices are used. However, found that practice-based evidence had more positive sustained results. Use of traditionally respected Hawaiian cultural values, practices, and teachings have greater positive outcomes. • Isolation is the hallmark of addiction. There is a need to build relationships to fix isolation. Pilina ends isolation. • Continues to maintain involvement with the community to help end stigma. A positive public image is key to respect for those in recovery. Also involve the Ohana groups as they are part of a person's recovery process. • Programs have a strong cultural focus because it fits the need of the community. • Mala Farm helps in the healing process as well as provides organic food to the community. A produce stand provides food to the community. When harvesting at the farm, each person leaves with three bags; one for themselves, one for the community, and one to share with someone who has helped them in the past. This strengthens the tradition of giving first not just giving back. • Recovery Ambassadors are peers who transitioned out the program that welcome and support newcomers • In response to a question, Ms. Lynn clarified that she has been talking about current operations which also includes Intensive Outpatient and Outpatient treatment. 			

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	<ul style="list-style-type: none"> • The Substance Abuse and Mental Health Services Administration (SAMHSA) came to Moloka'i to visit the organization. About a year later presented on the following successes, challenges & barriers, and what to look forward to with SAMHSA Region IX. • Successes include utilizing an 'aina based cultural approach, only safe and sober living program addressing houselessness, and addressing food insecurity through farming combined with traditional resources. • Challenges & barriers include limited resources associated with living in rural communities, hiring and retaining employees ma'a to Moloka'i ways, and the normalization of AOD use and gambling in the Ohana. • Looking forward to including scholarships as an incentive for local folks in recovery to go to school and be able to give back to their community, reducing stigma through community events, and honoring the past. • Presented a video of one person sharing their journey to recovery. • Chair Salzer led the discussion on clients; the availability of providers to prescribe buprenorphine, vivitrol, sublocade , and other assisted medications; and recommendations for inclusion in the HACDACS annual report. Clients mainly from Moloka'i but do have clients from off island. The challenge for outpatient treatment clients is finding housing. Conducts outreach on Lanai as there are no services available on the island. Clean and sober home is mainly for Moloka'i residents, though they have taken in clients from Kauai. When the Maui fires occurred, it was opened up to people from Maui who were clean, sober, and who had lost their homes. A current challenge is that there are no doctors on Moloka'i to provide MAT. Three months ago, fentanyl started showing up in drug testing for methamphetamine. Until then, fentanyl was not known to be on Moloka'i. Now drug testing shows 100% of methamphetamine on island contains fentanyl. The Commission suggested that the Hawai'i Health and Harm Reduction Center may be an avenue for MAT. The concern for Moloka'i is that with no provider on island to distribute medication daily, those prescribed a 30-day supply of medication may not take it as prescribed. The HACDACS annual report could recommend medically monitored stabilization beds at the hospital, so patients do not have to fly off island prior to outpatient treatment on island; and address the lack of/inconsistency of air transportation serving Moloka'i (Mokulele Airline). 			
<p>10. Open Forum:</p> <p>Public comment on issues not on the agenda, for consideration of Board's agenda at the next meeting.</p>	No community comments provided.			
11. Adjournment	11:07 a.m.			

Next Meeting: September 24, 2024
9:00 am to 11:00 am
Zoom Meeting