

Co-occurring Disorders Leadership Committee Statewide Meeting - Agenda August 22, 2019

Meeting Participants: Nicole Adelman, Steve Batson, Mary Bankus, Jennifer Burger, Latina Cates, Carrie Chanter, Nancy Chin, Robert Compton, Stacey Dettloff-Jones, Michelle Dickinson, Lorianne Fall, Mark Lewis – Chair, Deana Mason, Tom Moore, Brittany Pietsch, Leslie Pitts, Brenda Stoneburner, Deb Willard

Welcome and Introductions

Welcome and introductions were made

Review of Previous Minutes – Go to www.improvingmipractices.org

Co-occurring Disorders College

- **Carlo DiClemente** was the plenary speaker and he also did a few of the breakout sessions which were the most attended
 - Stages of Change – Developing your approach
 - Breakout sessions: Mechanisms of Change; Relapse & Recycling; and How Severity of Addiction & Mental Health Disorders Impact Self-Regulation
 - Folks really enjoyed his presentation and breakout sessions
- **Tom Moore** did a 2-part workshop: Part one focused on demonstrations of dialog and interaction; and Part two focused on interaction
 - He might need to do some role playing and do a demonstrate on doing concurrent COD documentation with dialogue
 - Tom had the 2nd most well attended workshop
- **Randy Estes** did a brief 1 and ½ hour introduction to Motivational Interviewing and how it fits into COD dialogue
- **John Moir & Laura Moore** did an engagement strategy for COD titled Getting Engaged
- **Steve Batson and Ambrosia Jackson** did a Trauma and Substance Use presentation
 - He started off the presentation with The Sound of Silence by Disturbed because a lot of folks with trauma and COD have a lot of darkness and to get to the emotional base of that and to really focus on it
 - He then went through Eric Ericson's The Stages of Development and the challenges and skills required
- **Feedback Received**
 - 93% agree or strongly agree on evaluations feedback
 - Meeting participates also got really good feedback from employees who attended
- **Issues Identified for COD College**
 - Issues identified from the workshops include: the need to document; folks don't have time for dialog because of the paperwork; need to address comorbidity - comorbidity is a common element that is there; maybe looking at time management skills (some folks have those skills and some don't); and maybe some training on COD for supervisors
- **Ways to Strengthen COD**
 - Additional trainings
 - For FY20, ways the department can provide TA: by looking at ACT/IDDT and Dual Diagnosis in Community Mental Health Treatment (DDCMHT) outpatient reviews
 - Mark will send the SAMHSA toolkit out for outpatient DDCMHT MIFAST to folks

Co-occurring Disorders Leadership Committee Statewide Meeting - Agenda August 22, 2019

- Providing technical assistance depending on the areas that might need strengthening identified in the MIFAST review
- MIFAST reviews are peer driven and not led by the state
- To schedule a MIFAST review, contact Mark Lewis via email LowisM@michigan.gov or Lorianne Fall at FallL2@michigan.gov
- Committee members going back to their agencies and asking folks
- More role-playing demonstrations
- More trainings for supervisors: accessing, addressing it, case management and skills needed, evaluating the way plans are developed, and supports and service
- Clinicians - depending on the student's internship, they may or may not have learned these skills
 - Learning skills on how to address those when they are practicing in one of their first positions
 - Boundaries
 - Counter transference
 - Time management
 - American Society of Addiction Medicine (ASAM) Training
 - On assessment but not everyone really understands it
 - Clinicians advocating for the wrong level of care for what is going on and getting frustrated
 - How to navigate intensive outpatient when SUD is identified
 - Who meets the MAT criteria?
 - When do they make that referral?
 - Training is missing on this piece in the field
- FY20 COD College Suggestions
 - Focusing on practice has been the requested topic for the past few years
 - Mark asked for suggestions for the next COD College for presenters from folks
 - Design a training with the focus on supervisors

COD Barriers

- We still have agencies where they fight against intergrading COD treatment and / or SUD agencies who are fighting against the mental health side
- Directors who are against intergrading services
- Hospital ER personnel turning away folks with a mental illness and who are intoxicated

Regional Activity Reports

- Region 1
 - Brittany Pietsch reported one CMH that lost a handful of upper-level staff, so they are experiencing challenges with employment
- Region 2
 - Nancy Chin stated they have lost a lot of staff across the agency
 - From the exit interviews they are hearing the intake is set at a 60-minute timeframe and it needs to be longer; upper management plans to extend it to a 90-minute timeframe especially for COD
 - They will be hiring case managers for their SUD program, so their COD specialist are not spread so thin

Co-occurring Disorders Leadership Committee Statewide Meeting - Agenda August 22, 2019

➤ Region 5

- Mary Bankus has taken over for Sara Denmann
 - They are looking for a Jail Diversion specialist and to backfill her old position
 - A ton of changes in roles within the agency
 - Looking at doing a specific fidelity related meeting for IDDT to stay on top of things
- Deana Mason stated that over the last couple of years, they have expanded their partnership with Recovery Pathways (MAT providers in their region)
 - They have Recovery Pathways in four of their locations / sub-leasing spaces to them
 - They can walk mental health clients down once they are ready to engage in that level of treatment / vice versa
- Deb Willard said for the last quarter, they had an emphasis on training: sending folks to the COD College; and looking forward to the SUD/COD conference coming up in September
 - For the third and fourth quarter, focus has been on treatment planning and integrating Person-Centered Plans (PCP)
 - Managing some of the changes in staff and getting back to the basics
 - They have the Certified Community Behavioral Health Center (CCBHC) grant
 - Urgent care programs are expanding from crisis services to mobile crisis to urgent care
 - ✓ Following up and looking at their high utilizers of the police departments, emergency rooms, and crisis services
 - Cohort training at the community health centers with behavioral health consultants who are master level clinicians
 - Expanding MAT opportunities with the grant

➤ Region 10

- Carrie Chanter shared they are finishing up a yearlong COD training series that was funded by Region 10 mostly for Genesee County folks, practitioners, and providers
 - Dr. Kenneth Minkoff will be coming in September
 - They have done 3 different sessions on different topics and each are a day long
 - She has been working with providers to make sure they are taking self-assessments and working with them through those results, making action plans and things
- Latina Cates stated they applied for and received a CCBHC grant
 - With that they have added strictly SUD population to their roster
 - They have hired a number of new staff
 - They are fully integrated and have a health clinic onsite

➤ Contractors for MDHHS

- Leslie Pitts talked about running a transition aged 16-26 evidence-based practice (EBP) mental health pilot program through a SAMSHA grant in Kalamazoo and Kent counties
 - There is a lot of COD within that age population and the crossover of child adolescent and adult services
 - Looking at peer services and EBP for that age range

Co-occurring Disorders Leadership Committee Statewide Meeting - Agenda August 22, 2019

- Looking at MYTIE due to the transitional youth and substance abuse treatment
 - She has been attending those meetings
- Tom Moore has had a number of trainings contracted by ACCESS in Dearborn working towards COD capacity and they are experiencing the same employment challenges with folks leaving and hiring a bunch of new grads
 - In Grand Rapids, he did some work with the Red Project (a prime reduction organization) who also have an HIV positive team with case managers
 - They just did some work with MI and building engagement skills and things like that

Future Agenda Items

- Make sure the information gets integrated
- Decisions around MIFAST and which teams need TA, staff training, development, and consultations following a visit
- Teaching supervisors
- Need to hear back from more case managers
- Focus on case management

FY20 Ideas

How do we as a committee energize the implementation of COD capabilities and how to go about doing that and what makes sense.

- All ideas are welcome

Future Meetings

November 7, 2019

February 20, 2020

May 21, 2020

August 20, 2020

November 19, 2020