<u>Meeting Participants</u>: Nicole Adelman, Steve Batson, Mary Baukus, Jennifer Burger, Latina Cates, Carrie Chanter, Nancy Chin, Robert Compton, Stacey Dettloff-Jones, Michelle Dickinson, Lorianne Fall, Mark Lowis – 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

- o 93% agree or strongly agree on evaluations feedback
- o 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

- 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 Lowis via email LowisM@michigan.gov or Lorianne Fall at FallL2@michigan.gov
- o 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

- o Focusing on practice has been the requested topic for the past few years
- o 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

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 selfassessments 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

- <u>Leslie Pitts</u> 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

- 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