

MINUTE RECORD

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH, BUREAU OF SUBSTANCE ABUSE AND ADDICTION SERVICES RECOVERY ORIENTED SYSTEM OF CARE TRANSFORMATION STEERING COMMITTEE PREVENTION WORKGROUP MEETING

WORKGROUP NAME:	Recovery Oriented System of Care (ROSC) Transformation Steering Committee (TSC) Prevention Workgroup
DATE:	May 17, 2012
TIME:	10:00 a.m. – 12:00 p.m.
LOCATION:	Prevention Network, Lansing, MI
CONFERENCE CALL:	Participation was available via phone.
BUREAU OF SUBSTANCE ABUSE AND ADDICTION SERVICES (BSAAS):	Larry Scott, Prevention Section Manager and Project Director
CHAIRPERSON:	Larry Scott
RECORDER:	Lori Caputo

INTENDED MEETING OUTCOME

This meeting was conducted for the following purposes:

- Strategic Prevention Enhancement (SPE) Project Status.

SUMMARY OF KEY POINTS

Introductions and Welcome: No introductions were needed; however, it was learned that Lauren Kazee, Gery Shelafoe, and Jim O'Brien were on the phone.

Approval of Agenda: Approved by consensus.

Approval of Meeting Minutes: Minutes from April 5, 2012, were approved by consensus.

BSAAS Updates:

- None

SPE Project Status:

- A. **Environmental Scans:** Liz Aguis is in France but was able to submit final reports of the two scans she did, which are currently in BSAAS management review. Key conclusions and recommendations from the results of the Environmental Scan Survey include:
- a. One third of agency respondents, regardless of prevention focus, need work on developing cooperative and collaborative relationships across agencies; an important concept for future integration.
 - b. Most respondents had positive perceptions about their organizational readiness to participate in Prevention Prepared Communities (PPCs).
 - c. There is some ambivalence as to whether PPCs will make their job easier or whether they can handle the tasks required. In addition, only about half believe that their board will support the efforts and only half see an organizational champion for the work.
 - d. Respondents were positive about readiness for participating in recovery oriented systems of care (ROSC).
 - e. The most frequently mentioned barriers to system integration are a lack of staff, and a lack of financial resources. In comments, respondents also noted the lack of cross-system knowledge and sharing among prevention, mental health and primary care institutions.
 - f. Regardless of budget devoted to prevention, all respondents agreed that training was needed for the provision of integrated services.
 - g. In response to training needs for staff, the highest rated item was training in Screening, Brief Intervention, and Referral to Treatment (SBIRT). This evidence-based practice is an excellent public health approach to achieve additional system integration.
 - h. Respondents may need additional preparation to participate in more expansive parts of the ROSC including public policy advocacy, providing social marketing campaigns, and reducing stigma and discrimination regarding substance use in the community.

Jill asked how many participated in the survey; the answer was just over 60. This was later clarified by e-mail as 67 on the Environmental Scan and 62 on the Workforce Development Scan. It was asked if there were any thoughts in regards to the scan. Denise asked what the other coordinating agencies (CAs) are doing as it relates to the screening tool SBIRT. Achilles said his CA has developed an in-house tool called Prevention Placement Questionnaire. They identify students who have potential substance abuse issues based on the questionnaire, they then refer the student to one of their prevention programs, or they refer the student to have an assessment with a treatment specialist. He will share the tool with the other CAs. Jill replied that her CA is not there as far as SBIRT is concerned and not really sure how they will get there as they don't have the funds or staffing to support it. As far as prevention, they have early intervention for adolescence, school support groups, and have moved the treatment realm to the adults. Denise asked if she could get trained as a trainer for SBIRT, Brenda said that is possibly in the works. Achilles recognized BSAAS for inserting a very specific and decisive requirement in the SBIRT RFP requiring formal involvement of substance abuse prevention intervention and programming, a specification that is well aligned with the ROSC concept of integrated services to person (and their families) in recovery. Lauren asked if we could include a link on MDCH's website for where school health-based clinics are located. She emailed the link.

B. Capacity Development Plan/Future Trainings and Next Steps for the Five Communities: Marie provided a review of the trainings in the five regions. The five State Prevention Enhancement (SPE) Regional Trainings were completed in the month of April. A compilation of the evaluations is in process by Wayne State University. 134 individuals attended the trainings: Western Upper Peninsula (UP) (14), Eastern UP (23), Kalamazoo (46), Bay Arenac/Riverhaven (21), and Mid-South (30). In every case, the CAs handled registration for the event and identified the location. Knopf Co. made the contractual arrangements with the locations, figured out room set-ups and technology and arranged for food and beverages. The two trainings in the Upper Peninsula were scheduled for four hours and the three in the Lower Peninsula were scheduled for three hours. The agenda included a PowerPoint presentation developed by the ROSC TSC Prevention Workgroup, completion of an extensive Local Community Readiness Assessment activity, a case study on ROSC, updates on training plans, and a brief discussion on forming relationships with other agencies, groups, and organizations. Generally, the trainings were well received though reactions were different in each of the regions. Comments about what was most helpful about the training were mixed but people definitely liked and intended to use the Local Community Readiness Assessment tools. Many people found the PowerPoint presentation to be helpful. After receiving feedback in the UP on the PowerPoint presentation, the acronyms were spelled out, the SPF charts were printed on full sheets of paper to be more legible, and "tobacco use" was substituted for "smoking."

Comments were: Achilles said that he had not anticipated that participants in the training would react as though PPCs were a whole new thing, rather than understanding that this is an expansion of what they are already doing – "SPF with a Twist." There was a discussion about how Liz's circle diagram with prevention on the outside could help explain the relation between SPF, SPE, and ROSC. Marie asked Jim and Gery what their reaction to the discussion was. Jim said it made a lot of sense. Marie said that Liz's staff is doing a compilation of the feedback and it would be provided to the group once it was complete.

Marie indicated that four suicide prevention prepared communities trainings will be offered through Knopf. Two in the UP will be offered, Iron Mountain – June 20, and Marquette – June 21. Each will be from 10:00 a.m. to 3:45 p.m. Cost is \$30.00 and six MCBAP CEUs. Trainer is Patricia Smith of MDCH. The training will be fairly interactive with specific activities and will give an overview of what is happening nationally and in Michigan. Two additional trainings will be held in Lansing – June 26, and Kalamazoo – June 28. In July there will be SBIRT training for trainers, dates are not set yet but tentative dates are July 12 and 13; a northern location is quite likely. Also looking at peer-to-peer training for August. More information will be provided closer to the dates. Jill mentioned that there is a need to invite suicide coalitions. Gery mentioned that she is having trouble identifying all the coalitions that exist in the eastern UP. Jill said to check with Department of Human Services. Marie will provide a link to the suicide UP wide suicide coalition.

C. Mental Health Environmental Scan: It was asked who would complete this scan. Answer was mental health providers. Brenda mentioned that colleagues in MDCH, within mental health are providing input. It is anticipated to be ready in about a month and ideally by mid-June. It was asked if there was a deadline for feedback. Brenda responded that feedback should be provided within the next week, by May 25.

NEXT STEPS

- Review environmental scan.

ADDITIONAL COMMENTS

- None.

ATTENDANCE

Member and Guest Names		Organization	Affiliation	Present
Elizabeth	Agius	Wayne State University	Member	No
Kathleen	Altman	Oakland Coordinating Agency	Member	No
Lori	Caputo	MDCH / BSAAS	BSAAS Staff	Yes
Ken	Dail	Prevention Network	Member	No
Kyle	Guerrant	Michigan Department of Education	Member	No
Marie	Hansen	MDCH / BSAAS	BSAAS Staff	Yes
Marie	Helveston	Northern Michigan Sub. Abuse Srvs. CA	Member	No
Denise	Herbert	network180 Coordinating Agency	Member	Yes
Joel	Hoepfner	Mid-South Coordinating Agency	Member	No
Lt. Mindy	Hughes	Michigan Army National Guard, Detroit	Member	No
Lauren	Kazee	Michigan Department of Education	Member	Yes (phone)
Stephanie	Lange	Macomb CMH and Macomb High School	Member	No
Achilles	Malta	Kalamazoo Coordinating Agency	Member	Yes
Jim	O'Brien	Western UP Sub. Abuse Srvs. CA	Member	Yes (phone)
Dianne	Perukel	Michigan State Police	Member	No
Dawn	Radzioch	Macomb Coordinating Agency	Member	No
Kristie	Schmiege	Genesee Coordinating Agency	Member	No
Larry P.	Scott	MDCH / BSAAS	BSAAS Staff	No
Felix	Sharpe	MDCH / BSAAS	BSAAS Staff	No
Gery	Shelafoe	Pathways Coordinating Agency	Member	Yes (phone)
Brenda	Stoneburner	MDCH / BSAAS	BSAAS Staff	Yes
Kori	White-Bissot	Lakeshore Coordinating Agency	Member	No
Jill	Worden	BABHA/Riverhaven	Member	Yes

NEXT MEETING

DATE:	June 7, 2012
TIME:	2:00 p.m. – 4:00 p.m.
LOCATION:	Face-to-Face at Prevention Network