Michigan Department of Community Health, Behavioral Health and Developmental Disabilities Administration BUREAU OF SUBSTANCE ABUSE AND ADDICTION SERVICES

Recovery Oriented System of Care Transformation Steering Committee Meeting

MINUTES

| SEPTEMBER 20, 2012 | 9:00 a.m. – 3:00 p.m. | OKEMOS CONFERENCE CENTER 2187 UNIVERSITY PARK DR., OKEMOS, MICHIGAN | |
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| MEETING CALLED BY | The Bureau of Substance A | The Bureau of Substance Abuse and Addiction Services (BSAAS) | |
| TYPE OF MEETING | Quarterly Meeting of the Recovery Oriented System of Care (ROSC) Transformation Steering Committee (TSC) | | |
| FACILITATOR | Jeff Wieferich | | |
| NOTE TAKER | Lisa Miller and Jeff Wieferich | | |
| TIMEKEEPER | Jeff Wieferich | | |
| ATTENDEES | Ron Brown, Lisa Miller, Kevin O'Hare, Darlene Owens, Dawn Radzioch, Marci Scalera, Felix Sharpe, Brenda Stoneburner, Ronny Tyson, Brad VanZanten, Jeff Wieferich, Mark Witte, and Cathy Worthem Guests: Dr. Elizabeth Aguis, Researcher, Wayne State University | | |
| | Jackie Savage, Social Work Intern, network180 | | |
| TOPIC SUMMARIES | | | |

TOPIC SUMMARIES

| INTRODUCTIONS, | DEPARTMENT NEWS, AND |
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| PLAN FOR THE DA | \mathbf{Y} |

FELIX SHARPE

DISCUSSION

Meeting was called to order at 9:10 am and the group introduced themselves.

Felix informed the group about the new Michigan Department of Community Health Director, James Haveman. He was characterized as a 'change agent' and will be moving ahead with integration.

The receipt of a new prevention grant was announced, the Strategic Prevention Framework Partnerships for Success II Grant, it will bring in \$3.6 million over the next three years.

Felix also shared that the 13th Annual Statewide Substance Use Disorder (SUD) Conference was held on September 13 and 14, 2012, and it went very well.

CONCLUSIONS

N/A

| ACTION ITEMS | PERSON RESPONSIBLE | DEADLINE |
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| N/A | N/A | N/A |
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| | MENTAL HEALTH SURVEY RESULTS | LIZ AGIUS |
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DISCUSSION

Dr. Agius spoke about a survey developed through prevention that went to out to mental health providers. The results are very preliminary, as the survey was only recently completed and more data may need to be gathered.

The survey indicated that there is minimal work in the mental health system with regard to prevention-related activities.

Twenty-two percent of persons surveyed in the mental health field say that they rarely or seldom meet with the coordinating agencies; the mental health system seems to be trained on treatment rather than prevention. Both mental health and SUD service providers say that they are not involved in providing mental health prevention.

With regard to integration perceptions, most mental health providers indicated they "don't know" about integration. There seems to be a lot of confusion around language that is used between the two systems. A glossary of terms was suggested as a possible aid in this area. A discussion ensued about the importance to describe our work as part of the development or continuation of what is already in progress. There is a tendency to describe functions by grant titles and not a universal language understood by everyone.

CONCLUSIONS

More information will be provided once the results are more thoroughly analyzed.

| ACTION ITEMS | PERSON RESPONSIBLE | DEADLINE |
|--------------|--------------------|----------|
| N/A | N/A | N/A |

ROSC EVALUATION PROCESS

LIZ AGIUS

DISCUSSION

Dr. Agius spoke about a proposed survey tool that was developed with BSAAS assistance after the TSC meeting in June. The purpose of the tool is to get an idea about what has changed in the SUD service system since the transformation started, what still needs to change, and what training needs exist to continue to support ROSC. We need to know what we have accomplished, and what we still need to do.

The group indicated that it will be very important to identify the types of organizations that the survey will be given to, as this will impact how the questions are answered. It was also suggested that some questions may be more appropriate if just addressed to specific audiences. In addition, the survey seemed to be long, and there was concern that people would not complete it.

CONCLUSIONS

N/A

| ACTION ITEMS | PERSON RESPONSIBLE | DEADLINE |
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| Send suggestions and comments to BSAAS | Lisa Miller (receive information) | 10-31-2012 |
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| DISCUSSION OF LINDA ZELLER'S |
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| QUESTIONS/REQUESTS AND THE ROLE AND |
| FUNCTION OF THE TSC |

LISA MILLER

DISCUSSION

Lisa led a discussion to gather information for Deputy Director Lynda Zeller. This will assist Deputy Director Zeller in effectively communicating about the SUD service system to legislators and other stakeholders within the state. The information gathered will be compiled into one document and provided to the deputy director. Some of the important points made by the group were:

- Criminal justice is not only a law enforcement problem; it is an untreated behavioral health problem.
- Access to service needs to increase with money going to support that increase.
- Recovery is a lived experience, not a treatment event.
- People need to hear recovery stories to really understand the impact.
- To understand our communities we need good data one thing that would help is to make the Michigan Profile for Healthy Youth (MiPHY) survey mandatory for all schools.
- Investing in a statewide electronic medical record would benefit all health care services and support behavioral health and primary care integration.

The next part of the discussion led by Lisa focused on the role and purpose of the TSC and the necessity to keep our momentum as we continue with transformation. Overall, the group indicated that the effort and impact of the TSC has been good, but we are still isolated in several key areas – we need Department of Corrections and Department of Human Services participation, and more primary care involvement.

The group indicated that the established workgroups provided a lot of energy and focus, and when they were disbanded, a lot of life seemed to leave the TSC. This type of work is important if the TSC is going to support transformation and it will help to develop action items that can get other systems involved. Other suggestions by the group involved functioning more as an advocacy organization, to empower the group to make policy-related decisions and target those in need of change, get legislators or at least their aides involved in our meetings or hold a caucus similar to how the federal government works.

Some concrete steps that can be taken involved making sure that meetings are scheduled well in advance, have agendas with specific work items, identify roles for people, set deadlines for work and have people report back on activities. Quarterly meetings are appropriate and the length of the meeting was not an issue.

The final item discussed was the potential need for an external facilitator. The group expressed that the TSC seems to have lost some ground since there are no longer consultants working with them. Having the state facilitate the meeting has been okay but sometimes, in order to have real conversations, a more neutral party would help.

CONCLUSIONS

N/A

| ACTION ITEMS | PERSON RESPONSIBLE | DEADLINE |
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| Compile response for Lynda | Lisa Miller | 10-31-2012 |

BEHAVIORAL HEALTH UPDATES FELIX SHARPE

DISCUSSION

Felix provided an update of activities within the department:

- There was a substitute bill to the Poleski bills introduced yesterday, September 19, and it is in review by Behavioral Health and Development Disabilities Administration staff there is a desire to see this legislation completed by the end of fiscal year 2013.
- Brief discussion on the peer recovery associate component of the Recovery Coaching TA. The

- members of the workgroup that were present, shared how and why the decision was made for the length of recovery time for an associate. The decision was based on the level of supervision that the person would have and limited scope of interaction.
- Discussed the potential role of the TSC within the Behavioral Health Advisory Committee that is being developed to support the efforts of the combined block grant application for 2014-2015. More information will be shared as the group is established.
- Discussed the impact on the block grant if the federal government does not get a budget and sequestration takes place which would mean an eight percent cut.
- The dual diagnosis capability and mental health treatment tool and its sister tool, the dual diagnosis capability and addictions treatment (DDCAT) was discussed and Mark Witte indicated that the CAs would like concrete steps from BSAAS to begin using the DDCAT.
- An inquiry was made as to the status of the Benefits Package and Felix indicated that it had been passed on to upper administration but we do not know how it is being used.

CONCLUSIONS

N/A

| ACTION ITEMS | PERSON RESPONSIBLE | DEADLINE |
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| N/A | N/A | N/A |

| ROSC Strategic Plan | JEFF WIEFERICH |
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DISCUSSION

Jeff used this time to review the implementation plan with the TSC in an effort to begin the discussion on how to identify what to pursue as we enter the last year of our initial plan. The goals, objectives, and strategies were reviewed along with any associated accomplishments.

Consistent with the discussion on the role of the TSC, the membership identified policy development, task specific workgroups, and education/advocacy as items that need to continue to be a focus.

CONCLUSIONS

It was decided that the next step with the implementation plan would be to remove goals/objectives that have been completed, and then re-prioritize the remaining goals/objectives at our next meeting.

| ACTION ITEMS | PERSON RESPONSIBLE | DEADLINE |
|------------------------------|--------------------|------------|
| Review plan with small group | Lisa Miller | 11-30-2012 |

| ADDITIONAL INFORMATION | |
|------------------------|---|
| OBSERVERS | N/A |
| RESOURCE PERSONS | N/A |
| SPECIAL NOTES | NEXT MEETING: Thursday, December 13, 2012, 9:00 am to 3:00 pm Okemos Conference Center, 2187 University Park Drive, Okemos, Michigan 48864 |