

*Michigan Recovery Council Vision:  
To lead the transformation of the public mental health  
system to one based on a recovery foundation*

**Michigan Department of Community Health  
Recovery Council Meeting  
September 16, 2011  
9:30 am – 2:30 pm  
LCC West Campus Facility**

- I: Introductions/Announcements  
Elizabeth K. welcomed Deputy Director Lynda Zeller. She stated that Lynda brings passion for recovery to her position. Members present were: Regina Allen, Tish Anderson, Nancy Auger, Patrick Baker, Tom Burden, Linda Burghardt, Rich Casteels, Norm DeLisle, Jean Dukarski, MaryBeth Evans, Cheryl Flowers, David Friday, John Fryer, Colleen Jasper, Amy Juntunen, Ron Kidder, Elizabeth Knisely, Carmela Kudyba, Tina Lauer, Marlene Lawrence, Jessica Lezman Dahlke, Cheryl Pace, Greg Paffhouse, Edward Painter, Danielle Parpart, Marcia Probst, Ernest Reynolds, Pam Werner. Partners and guests present were: Julie Barron, Stacy Bart, Stephen Batson, Michelle Bidigare, Kris Burgess, Karen Cashen, Anna-Magdalena Christianson, Ryan Christman, Lisa Edgar, Debbie Freed, Patti Freese, Stephanie Harris-Frischknecht, Kim Johnson, Sue Kennedy, Charlotte Lamb, Pamela Lang, Janet Maki, Amy Miller, Deborah Monroe, Jennifer O'Brien, Lucy Olson, Shelley Olson, Dana Parker Mathis, Marty Raaymakers, Deborah Reynolds, Alyson Rush, Becki West-Russell, Felicia Simpson, Margaret Stooksberry, Rosa Thomas, Jim Wargel, Stephen Wiland Connie Wolven Lynda Zeller and Kim Zimmerman.
- II: Meeting Minutes from July 15, 2011. Motion to approve the minutes. Motion passed and minutes were approved.
- III: Director's Comments: Lynda shared her experience in the mental health system. She worked in the Department of Corrections for four years. She reported that when she was with Corrections 8% of the prisoners received mental health services and now 20% of all prisoners receive mental health services. She stated that on a personal note, she has family members that have received services and supports including an individual in a journey of mental health recovery and a person with a developmental disability. Lynda understands the importance of mental health services and she wholeheartedly supports what the Recovery Council is doing. She specifically stated that the peer support specialist initiative is a strong example of the significant progress made in the mental health system over the past 10 years. She discussed state and national issues regarding health care reform and Michigan's partnership with the Center for Medicare and Medicaid Services (CMS) in developing a plan for comprehensive integrated care for persons that are covered by both Medicaid and Medicare.

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- IV: Integrated Care for Dual Eligibles: A powerpoint presentation provided by Lynda Zeller was shown regarding integrated care for dual eligibles. It was reported that people with dual eligibility have health care that is often not coordinated. Michigan is in process of making a plan to address concerns. The plan will be presented to all stakeholders around April. In November work groups will be appointed with a variety of stakeholders to provide input and direction in formulating the plan. The goal is how to better deliver coordinated, cost effective and quality care. There will be 3 or 4 work groups. Requests for input went out in September. Lynda emphasizes how important it is to make sure we communicate the information about dual eligible's and receive feedback from the community. Funding streams need to be blended with a focus on the whole person. The goal is to improve the health care system while at the same time reducing costs. Discussion occurred around expected outcomes. Council members and partners asked questions and clarified information that was provided. Lynda encouraged everyone to sign up for the work groups.
- V: Funding Priorities: Discussion occurred on what Council Member's priorities are for this fiscal year. Liz Knisely shared that funding cuts have occurred and that the SAMHSA mental health block grant was reduced for all states. Strong support of continuing on going follow up peer trainings and moving forward on the recovery curriculum.
- VI: Recovery Statewide Curriculum: Jim Wargel, Lisa Edgar and Rosa Thomas from Macomb County CMH Services presented. Pam Werner talked about the REE and recommended outcomes of following up on the findings. The formal report was disseminated statewide and has received national attention including a strong interest by SAMHSA. The question arose -- what do you do with the data? The data showed that when asked what recovery is, a large percentage of individuals reported that they did not know what recovery was. Discussion on searching for curriculums to educate individuals who receive services while at the same time providing information to all community stakeholders became one of the tasks from the standing committee of group 5. Macomb County volunteered to be the first pilot for the statewide curriculum. Jim, Lisa and Rosa provided a presentation with powerpoint slides on lessons learned. Rosa shared that who better to train on recovery than those who are in recovery. They reported the curriculum was a huge success and decided to train teams of individuals first and then the case managers that worked directly with those individuals. Recovery Council Members and partners asked a variety of questions. Moving forward to other pilot areas was recommended as part of the statewide implementation efforts.

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VII: Recovery Policy Committee to Develop Measurements and Council Priorities: We should start talking about how do you measure recovery? How is the system providing recovery? Does the system understand what it needs? How do we want to use our block grant money to further the work of the Council? Discussion was opened up to the Council -- how are we going to prioritize next year? Peer training should be a priority. What does the Recovery Council think the priorities should be? Ernie and others stated that it should not be the number of peers; it should be the quality of peers. John Fryer suggested that we increase recovery training. We need to implement the recovery curriculum across the state. Recovery needs to begin at intake. Patrick Baker said all CMHs should take part in the curriculum. Then measurements can begin. CMHs need to be on board. Marlene stated that we need to increase size and quality of the workforce. Tom B. suggested that we need more qualified peers. Ernie stated that the Anti-Stigma Tool Kit should be passed out in every training. Police, hospitals, and emergency rooms could employ peers. JIMHO is currently offering peer support services to those aging out of foster care. Jean said that we need peers at every level and every stage. Peers make services more successful. Rich C said that supervisors should have some training in order to work with peers. Discussion centered on supporting the statewide recovery curriculum. Agencies must understand what recovery is.

Measuring Recovery Policy: Ed Painter and John Fryer. Discussed outcomes for the recovery policy and practice guidelines. They went through the document line by line to determine what is measureable. Topics included peer workforce, recovery, self determination (interview people randomly at CMHs and agencies). Provide estimate cost of services. One goal is to have doctors communicate back and forth. How they are communicating should be measured. There should be a seamless reentry for people coming back after leaving. People should be told that they can come back if they need to. John will present additional information at the next Recovery Council meeting.

VIII: MRCE and Editorial Board Overview. Rich offered a debriefing on MRCE. The contract ends soon. Rich thanked everyone for the opportunity to serve. He thanked the steering committee and editorial board for their work and guidance. The website is better now than it has ever been. He thanked the content writers. We need to continue with diverse writers. He encouraged people to share their story. He believes we need to reach deeper into the community to move recovery forward.

IX: Public Comment. Marty suggested that future lunches served at the meeting offer a more healthy selection.

X: 2011 Meeting Date (9:30 am to 2:30 pm at LCC West in Lansing)

- Friday, November 18

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- Friday, January 20
- Friday, March 2 (note date change to the first Friday of the month)
- Friday, May 18
- Friday, July 20
- Friday, September 21
- Friday, November 16

XI: Adjournment