

**Michigan Department of Health and Human Services
Behavioral Health and Developmental Disabilities Administration
OFFICE OF RECOVERY ORIENTED SYSTEMS OF CARE**

Michigan Youth Treatment Infrastructure Enhancement (MYTIE) Initiative Meeting

MINUTES

DATE/TIME: July 15, 2016; 9:00 am to 11:00 am
LOCATION: Horatio Earle Center
7575 Crowner Drive
Dimondale, Michigan

FACILITATOR: Beth Cooley
NOTE TAKER: Recorded (B)

ATTENDEES: **In Person:** Liz Agius, Bradley Allen, Beth Cooley, Shaun Cooper, Brooke Dudek, Julia Hitchingham, Jan Kaley, Larry Scott, Angie Smith- Butterwick, Will Volesky, and Jackie Wood

CONFERENCED IN: Herman McCall, Lauren Kazee, Charlie Yaeger, Mike Tobias, Jamie Balavich

TOPIC SUMMARIES

I. Welcome and Introductions – *Beth Cooley*

Beth welcomed the attendees, the attendees announced themselves including their affiliations.

II. Update on Financial Subcommittee Meeting – *Beth Cooley*

- **Review Continuum of Care Summary Report**

- **Continuum of Care Survey**

We learned that there are gaps in Service based on the American Society of Addiction Medicine (ASAM) criteria. Brook compiled the data which she describes and explains the results, as well as the color coding. She goes on to explain that programs are screening and early intervention. To note, there are not as many treatment programs and they fall off. Someone asked for a regional map and Beth will fulfill that request by sending everyone a link to the Prepaid Inpatient Health Plan (PIHP) regional map. Further discussion took place on the definition of programs in which may or may not have impacted the response rate. Some of the responses require follow-up. Beth asks the group if they see any other way that the data that could be more useful. A question was asked regarding the financial aspects related to this data. Beth mentions what is going on with the financial plan and the next step is to look at both (continuum of care survey and financial map/plan) together. Liz suggests considering focus groups/interviews with treatment directors as another vehicle to obtain more data. Beth asks if anyone feels we need to explore further that has not been touched on. No response. Angie asks three members regarding improving recovery supports and about the experience that took place by their sons when they were released from Treatment. One member responded that as parents, there was too much delayed time to transition to a half-way house closer to home. Another member expressed that there is little recovery support in terms of half-way houses in Shiawassee County. Beth mentions action items below.

- Reminder financial template due 08/05.

III. Update on Strategic Planning Subcommittee – *Beth Cooley*

- Tentative 8/1/16 Technical Assistance (TA) sent the appointment out with location and how to create the plan
- No call ins. Come if you can.

IV. Workforce – Beth Cooley

- We will not be creating a workforce subcommittee instead will address workforce items in the Interagency Council. Next we will review the workforce data.

- **Workforce Data/Map PowerPoint - Liz Agius**

Liz presents the PowerPoint (attached). Beth says the map has been distributed to everyone and the wider Transformation Steering Committee Workforce subgroup, PIHP and Substance Abuse Prevention and Treatment Directors. Liz goes on to talk about how there are fewer responses from those that deal with adolescents. Survey response rate was 244.

Liz continues by summarizing the demographics, gender (more female than male), military, race, age breakdown. She also went on to tell about fields of education and about how there should be more of the workforce that should have family therapy backgrounds, certification; of note, 52% certified, 23% are working on a development plan, while 25% are not certified, full-time/part-time, benefits, \$30-\$49K salary and the national average according the Bureau of Labor and Statistics is \$43.9K, which means that 41% are earning less than the national average. Liz also suggests looking at age and pay as a crosstab to see if older staff are making more and in time your salary is increasing and some of that 43% is due to those who are newer in the field. Respondents included 57 out of 83 counties, mostly Wayne, Kent, Oakland, Washtenaw, etc. Age group includes those served at 64% 18-59, about 30% serving treatment for children and adolescents, and only 1% serving the senior population. Liz suggests more be done with the senior population. Will compare this survey to the Prevention workforce survey and how they differentiate/compare. Liz went on to explain and describe other aspects of the workforce data, such as training (trauma, among others) received, time on tasks received, employment/employer change plans, job satisfaction, dissatisfaction (salary and benefits), among others.

Liz asks the members for their reactions on the survey results. She also mentions items that have to be dealt with; 1) Training needs; prioritizing what do you think they are for; 2) Methods of training; Beth reads the part in the deliverables for the strategic plan about training and explains that it is the requirement of the grant; Angie suggests adding to the workforce survey required activities as a plan for outreach to students entering the workforce as treatment providers.

Discussion continued on the need for the creation of new substance abuse training and the mention that Substance Abuse and Mental Health Services Administration (SAMHSA) has this training; this training must be communicated to educators, probation officers, juvenile justice educators, to name a few, so that they may make referrals for adolescent treatment, and therefore, need to be inclusive. Larry says we are required to produce the deliverable and this report will inform this is process. On workforce development training must occur and thereby must keep in mind a training implementation plan. Need to look at ways to attract people to the field, as well as other training.

- **Begin Discussion on Plan to Improve Workforce Training Plan – Liz Agius**

- **What, how & why**

Liz asks the members for the top five areas of training needs for 16-21 year olds by treatment workers:

- ✓ Understanding the Adolescent Brain
- ✓ Understanding Adolescent Offenders
- ✓ Engage and Assist Families and Substance Users Providers
- ✓ Evidence Based Practice Programs for Adolescents
- ✓ Understanding Trauma and Substance Use Disorder
- ✓ Prioritizing problems through assessment (differential diagnosis)
- ✓ Public Health, other agencies, school health, Criminal Justice (CJ) and Adolescent Criminal Justice (ACJ)
- ✓ Recovery Oriented Systems of Care Overview
- ✓ Trauma Informed Care

Any ideas or thoughts that anyone has had that you have been a part of on trainings you have had that you thought were done well, best methods for training and ways to increase accessibility? Shaun mentions a trauma training conducted by the state called a state cohorts adolescent Cognitive Behavioral Therapy (CBT). It entails coaching calls and trains not only the counselors, but trains different levels of supervision to make sure it remains hard wired and is ongoing throughout the year. Shaun describes this as one of the best trainings he has ever participated in. Beth mentions that how we roll out training is very important.

Liz mentions that Wayne County will be rolling out a Blue Jean Application (APP) and setting up a training room where BCE will be able to track whether a person in training is connected and participating so that you can get CEU via online training. Liz describes the APP in detail. Other training methods/types: MIFAST process; motivational interviewing and enhancement and fidelity reviews where they train an agency or region and the contracted trainers will review the survey, record a video of them doing the intervention, critique the video, specific training on deficits on the survey and video. MTRIM was mentioned also.

- **Adding requirements to contract & policy**
 Tabled until next meeting. Liz asks members to provide their understanding of contract language to Beth.

Other
 N/A

Next Steps/Action Items:

Action Item	Person(s) Responsible	Deadline
Continuum of Care Survey Tasks:	Beth	
➤ E-Mail Regional map website link to group members	Beth	N/A
➤ Region six and eight regarding recovery supports	Beth	N/A
➤ Numbers for intensive outpatient vs outpatient reporting	Beth	N/A
➤ Focus groups with the directors and putting the data in context	Beth	N/A
➤ Reminder regarding the Template that was sent out	Beth	N/A
Improve Workforce Training Plan	Beth and Liz	
➤ Age pay crosstab	Liz	N/A
➤ SAMHSA training	Beth	N/A

ADDITIONAL INFORMATION

None.

WRAP-UP AND ADJOURNMENT

The meeting ended as scheduled.

NEXT MEETING

Date/Time: August 19, 2016; 9:00 am to 11:00 am

Location: Horatio Earle Center
 7575 Crowner Drive
 Dimondale, Michigan