

Michigan Department of Health and Human Services, Behavioral Health and Developmental Disabilities Admin.

Office of Recovery Oriented Systems of Care Strategic Plan FY 2018 – FY 2020

The Office of Recovery Oriented Systems of Care (OROSC) aligns services and priorities consistent with the February 2015 Executive Order and Reinventing Michigan’s Healthcare System Blueprint for Health Innovation. OROSC implements a recovery-oriented system of care in which specialty behavioral health services are delivered within a full continuum of care. In addition, we have identified strategic priorities that target the prevention and treatment of substance use, trauma, and mental health disorders across the lifespan of individuals and families in Michigan. OROSC will continue the process of building a healthier Michigan serving as a leader in recovery-oriented services and health innovation.

Mission

The Michigan Department of Health and Human Services (MDHHS) provides opportunities, services and programs that promote a healthy, safe, and stable environment for residents to be self-sufficient. (Source: MDHHS)

Vision

Develop and encourage measurable health, safety and self-sufficiency outcomes that reduce and prevent risks, promote equity, foster healthy habits, and transform the health and human services system to improve the lives of Michigan families. (Source: MDHHS)

Purpose

By promoting wellness, strengthening communities, and facilitating recovery for the people of Michigan, Behavioral Health and Developmental Disabilities Administration (BHDDA) serves citizens by diminishing the impact and incidence of addiction, emotional disturbance, mental illness, and developmental disability. (Source: BHDDA)

Guiding Principles

Promote and strengthen OROSC’s delivery of specialty behavioral health services including behavioral health promotion, prevention, treatment, and recovery efforts across the lifespan of individuals and families.

- *Further enhance an interagency collaborative approach aimed to improve behavioral health through services that include prevention, treatment, and recovery*
- *Promote behavioral health wellness and recovery for individuals across the lifespan with*

dignity and respect

- *Develop innovative practices to improve behavioral health outcomes that result in the reduction of the misuse of alcohol and other drugs*
- *Promote an interagency collaborative approach to Gambling Disorder prevention and treatment using evidence-based practices and recovery support services to increase abstinence and improve overall health and wellness*
- *Increase access to all behavioral health services for persons residing in communities with significant health disparities*
- *Increase access to integrated health care for persons receiving recovery services*
- *Support safe and healthy behavioral health services to Michiganders across the lifespan in a culturally and developmentally competent manner*
- *Promote the use of a Strategic Planning Framework to address behavioral health needs and reduce preventable substance use and mental health disorders across all service systems (e.g. primary care settings, criminal justice, and child welfare)*
- *Implement evidence-based, promising, and best practices that support a recovery-oriented system of care*
- *Promote emotional health and reduces the impact of mental health and substance use disorders*
- *Implement a trauma informed system of care that includes evidence-based and promising practice*
- *Collect, analyze, and report on behavioral health trends and emerging issues*

Strategic Priorities

Children: Improve Outcomes for Children (youth and families)

Goal 1: Reduce underage drinking

Performance Indicator: Reduce past 30-day use of alcohol among youth by FY 19 - Target: 14% (Source: Youth Risk Behavior Survey [YRBS])

- Objective 1.1: Conduct Epidemiological (EPI) profile to track prevalence, mortality, and trend data
- Objective 1.2: Increase visibility of anti-use campaign (Do Your Part)
- Objective 1.3: Convene Michigan Higher Education Network (MIHEN)
- Objective 1.4: Convene State Epidemiological Outcomes Workgroup (SEOW) to address data
- Objective 1.5: Impaired Driving Action Team participation
- Objective 1.6: Convene Recovery Oriented Systems of Care, Transformation Steering Committee (ROSC/TSC) Prevention Workgroup
- Objective 1.7: Establish prevention programming and partnership with adolescent health centers
- Objective 1.8: Establish and increase peer recovery community for adolescents
- Objective 1.9: Promote utilization of the Michigan Model statewide
- Objective 1.10: Secure training and technical assistance
- Objective 1.11: Encourage the use of evidence-based programs, practices and strategies shown to impact underage drinking

Goal 2: Reduce Youth Access to Tobacco and Illegal Sales to Minors

Performance Indicator: Effect a 10.79 percent tobacco sales rate to minors by FY 19 (Source: SYNAR Survey Results)

- Objective 2.1: Conduct an EPI Profile
- Objective 2.2: Provide training and technical assistance (TA) to Designated Youth Tobacco Use Representative (DYTUR) on SYNAR regulations and policy
- Objective 2.3: Convene Youth Access to Tobacco Workgroup (YATTW)
- Objective 2.4: Continue collaboration w/tobacco section
- Objective 2.5: Continue collaboration w/attorney general
- Objective 2.6: Continue implementation of the Federal Drug Administration (FDA) retailer inspection program in the state
- Objective 2.7: Continue implementation of the SYNAR retailer inspection program in the state
- Objective 2.8: Track and report on legislation regarding youth access to tobacco
- Objective 2.9: Develop and submit the annual SYNAR report to Substance Abuse and Mental Health Administration (SAMHSA)
- Objective 2.10: Update Do Your Part campaign
- Objective 2.11: Improving MI Practices campaign for retailer education

Goal 3: Reduce Substance Exposed Births

Performance Indicator: Increase number of drug-free births by FY 19 - Target: 200

- Objective 3.1: Review analysis of Women’s Specialty Services report
- Objective 3.2: Review data related to impact of substance use provided by Population Health and Children’s Protective Services
- Objective 3.3: Increase access to treatment for pregnant women
- Objective 3.4: Decrease the stigma for pregnant women who seek treatment
- Objective 3.5: Outreach to other agencies that serve children and families to improve education
- Objective 3.6: Align policies regarding substance exposed births across the state
- Objective 3.7: Reduce the impact of substance use in families by enhancing and improving access to treatment
- Objective 3.8: Establish and increase community support to families with children recovery
- Objective 3.9: Secure federal grants to reduce the impact of substance abuse in families

Goal 4: Increase youth awareness of Gambling Disorder

Performance Indicator: Reduce past 30-day gambling activity among youth (Source: Michigan Profile for Healthy Youth [MiPHY])

- Objective 4.1: Use existing infrastructure to expand Gambling Disorder prevention efforts to youth and adolescents
- Objective 4.2: Provide training opportunities and technical assistance for effective prevention service development and implementation
- Objective 4.3: Revise media campaign to target youth and adolescents
- Objective 4.4: Promote parent utilization of Gambling Disorder help-line
- Objective 4.5: Continue participation with ROSC/TSC workgroup

Goal 5: Reduce the effects of parental substance use on youth

Performance Indicator: Increase the number of students and children receiving indicated services

- Objective 5.1: Improve screening of youth whose parents are served in pregnant and parenting women’s programs
- Objective 5.2: Provide training and technical assistance to pregnant and parenting women’s

programs, regarding Adverse Childhood Experiences (ACEs) and resiliency factors that can be enhanced by the treatment provider

Objective 5.3: Review pregnant and parenting women's programming referral process to ensure that children are receiving the services indicated by screening

Adults and Family Support: Promote and Protect Health, Wellness, and Safety (across the lifespan within communities)

Goal 1: Build community assets to address behavioral health needs

Performance Indicator: Increase number of consumer-run drop-in centers in the state

Performance Indicator: Increase number of naloxone kits distributed by start of FY20 (Source: Reported by Prepaid Inpatient Health Plans [PIHPs])

Performance Indicator: Increase number of environmental and community-based prevention strategies by FY20 (Source: Michigan Prevention Data System)

Objective 1.1: Create and develop drop-in recovery support pilots to provide resources and movement of peers back to the community

Objective 1.2: Promote consumer-run drop-in center locations in the community

Objective 1.3: Conduct and implement the Anti-Stigma Educational Day, which promotes anti-stigma initiatives in the community

Objective 1.4: Involvement of community interactions, outings, and connectedness by the implementation of the Federal Block Grant, Health and Wellness Grant to consumer-run drop-in centers

Objective 1.5: Implement training of trauma informed care in Community Mental Health Service Providers (CMHSPs) and their communities with adults

Objective 1.6: Promote community-wide overdose education and training on use of naloxone

Objective 1.7: Promote purchase and distribution of naloxone statewide

Objective 1.8: Track distribution of naloxone kits

Objective 1.9: Promote utilization of Naloxone Standing Order

Objective 1.10: Creation and distribution of statewide language regarding definition of and Frequently Asked Questions (FAQs) regarding behavioral health needs

Objective 1.11: Encourage multi-system collaboration to implement prevention and mental health promotion strategies

Objective 1.12: Continue to build and enhance community prevention infrastructure and capacity

Goal 2: Reduce prescription and over-the-counter drug misuse and abuse

Performance Indicator: Reduce non-medical use of prescription drugs, including opiates

Performance Indicator: Increase the number of prescription drug collection sites

- Objective 2.1: Collaborate with community programs, organizations, health centers and law enforcement to be area specific when planning permanent collection sites or take-back day events
- Objective 2.2: Encourage multi-system collaboration at state and community levels, including leadership development to oversee surveillance, intervention, education, and enforcement
- Objective 2.3: Broaden the use of brief screenings in behavioral and primary care settings
- Objective 2.4: Promote increased access to and use of prescription drug monitoring program
- Objective 2.5: Provide training and technical assistance for communities to address emerging issue of unprecedented increases in opioid use among adults age 55 and older

Goal 3: Reduce misuse and abuse of alcohol, opioid medications, and illicit drugs.

Performance Indicator: Decrease in overdose deaths due to any opioid, heroin, synthetic or non-synthetic non-heroin opioids - rate and number (Source: Michigan Death Certificates); Decrease in hospitalizations due to opioid overdose (Source: Michigan Inpatient Database)

Performance Indicator: Decrease in past 30-day use of alcohol among young adults (18 to 25 years) and older adults (age 55+) by FY20

- Objective 3.1: Promote the utilization of best practice guidelines for opioid prescribing
- Objective 3.2: Promote alternative pain management strategies to patients and medical providers
- Objective 3.3: Increase visibility of the [stopoverdose](#) website
- Objective 3.4: Increase utilization of the state prescription drug monitoring program (PDMP) to reduce overprescribing of prescription opioids
- Objective 3.5: Develop and promote campaign to increase awareness of opioid misuse and abuse
- Objective 3.6: Support the development of culturally competent messaging for tribal communities on opioid misuse and abuse
- Objective 3.7: Implement evidence-based primary prevention practices to reduce opioid misuse and abuse
- Objective 3.8: Outreach to other agencies that implement educational initiatives
- Objective 3.9: Implement evidence-based alcohol misuse/abuse prevention strategies specific to young adults and older adults
- Objective 3.10: Engage all segments of the community in establishing a recovery-oriented system of care and increase the use of brief intervention
- Objective 3.11: Provide technical assistance and resources to the Higher Education Network, to address problem drinking and other drug use among college students

Goal 4: Reduce barriers to accessing treatment for opioid use disorders

Performance Indicator: Increase the number of individuals accessing treatment, by county, by FY20
(Source: Encounter Database and Behavioral Health Treatment Episode Data Set [BH TEDS])

Performance Indicator: Expansion and collaboration with community partners

- Objective 4.1: Review BH TEDS and other data sources for identification of gaps in treatment
- Objective 4.2: Expand use of peers in healthcare settings, to increase early referral to treatment
- Objective 4.3: Increase TA to treatment providers for persons with opioid use disorder
- Objective 4.4: Increase transportation resources for persons seeking treatment for opioid use disorder
- Objective 4.5: Promote expansion of treatment options for incarcerated populations
- Objective 4.6: Increase coverage of uninsured and underinsured persons seeking various treatment and recovery support options for opioid use disorder
- Objective 4.7: Identify and share community resources to support recovery
- Objective 4.8: Train program employees in evidence-based programs, such as Motivational Interviewing and Trauma Focused Cognitive Behavioral Therapy
- Objective 4.9: Disseminate information and training to the field for a statewide assessment
- Objective 4.10: Increase collaboration between programs, including sharing of assessments
- Objective 4.11: Provide health disparity reports, regarding gaps in services to Michiganders, to continue creation of services to underserved areas
- Objective 4.12: Creation of financial map of the state, to evaluate current trends and influence future financial priorities

Goal 5: Increase longevity and quality of life, by reducing health disparities and improving self-management

Performance Indicator: Increase in treatment usage; decrease in injuries and deaths related to substance use disorders

Performance Indicator: Increase medication assisted treatment services to specialty populations, such as expectant mothers and adolescents

Performance Indicator: Reduce past 30-day gambling activity (Source: Behavioral Risk Factors Surveillance System [BRFSS])

- Objective 5.1: Develop statewide activities during Gambling Disorder Awareness Month
- Objective 5.2: Support and participate in workgroups tasked with further developing Gambling Disorder prevention services
- Objective 5.3: Promote utilization of peer-led recovery support services within populations receiving treatment for opioid use disorder
- Objective 5.4: Yearly disparity reports, regarding gaps in services to Michiganders, to continue creation of services to underserved areas
- Objective 5.5: Delay initiation of first use of drugs or alcohol
- Objective 5.6: Increase exposure of behavioral health resources

Health Services: Transform the Healthcare System

Goal 1: Continue the implementation of a recovery-oriented system of care across the lifespan

Performance Indicator: Provide increased services to adolescent and transitional aged youth

Performance Indicator: Increase services to adults and older adults (Source: BH TEDS)

Objective 1.1: Increase prevention services to youth and adolescents

Objective 1.2: Increase recovery and outpatient services for adolescents and transitional aged youth

Objective 1.3: Develop community-based recovery opportunities (e.g. support groups, youth peer mentors) for youth and families

Objective 1.4: Collaborate with primary care and the behavioral health field to identify gaps in resources for adults/older adults

Objective 1.5: Offer trainings and technical assistance around the Self-Healing Communities model and how a community's Adverse Childhood Experience score influences all aspects of health

Goal 2: Expand integrated behavioral health and primary care services for persons at risk for and with substance use and mental health disorders

Performance Indicator: Number of consumer-run drop-in center members participating in health activities (per location and statewide)

Performance Indicator: Increase number of resources for co-occurring (MH and SUD) disorders

Objective 2.1: Implement the Health and Wellness Federal Block Grant to 37 consumer-run drop-in centers

Objective 2.2: Promote health care to peers at drop-in centers, support groups, workshops, and conferences

Objective 2.3: Identify, recognize, and acknowledge drop-in centers and peers who are achieving their new health goals

Objective 2.4: Provide training opportunities to programs regarding co-occurring behavioral health and physical disorders

Objective 2.5: Increase number of health homes that include mental health and substance use disorder services onsite

Objective 2.6: Increase the capacity for a community specific prevention referral system, to engage Michigan residents in prevention services

Goal 3: Promote opportunities for individuals with mental health disorders to self-direct their services and supports

Performance Indicator: Increase number of persons involved in Self-Directed Care (SDC) as a part of the Robert Wood Johnson (RWJ) study – Target: 150 by FY20

Objective 3.1: Develop and provide a curriculum for 2-day trainings to Certified Peer Support Specialists (CPSS) on Person-Centered Planning (PCP)

Objective 3.2: Develop and provide Train the Trainer class on PCP curriculum

Objective 3.3: Select CPSS trainers and provide ongoing mentoring

Objective 3.4: Continue to provide technical assistance for SDC to Bay Arenac Behavioral Health (BABH) and other CMHSPs

- Objective 3.5: Develop up to two additional CMHSPs to expand the SDC project
- Objective 3.6: Work with Human Services Research Institute (HSRI) for data collection and interpretation
- Objective 3.7: Update Institutional Review Board (IRB), as needed, and reapply annually
- Objective 3.8: Develop and implement a curriculum of the role of CPSS and independent support brokers and disseminate to the field

Goal 4: Promote and strengthen the role of consumer-run programs

Performance Indicators: Number of activities, contacts of the technical assistance center of Justice in Mental Health Organization (JIMHO) contracted with the State of Michigan

- Objective 4.1: Support, oversee, provide technical assistance to the 50 consumer-run drop-in centers
- Objective 4.2: Implement statewide two self-help support conferences
- Objective 4.3: Provide technical assistance to the drop-in center for the Health & Wellness Grant
- Objective 4.4: Promote the creation of new consumer-run initiatives

Goal 5: Treat addiction as a chronic disease

Performance Indicator: Increase client retention in recovery-based services

- Objective 5.1: Creation of continuum of care for individuals that begins with prevention and follows through to recovery
- Objective 5.2: Increase education to partners and communities to reduce stigma
- Objective 5.3: Increase provider use of Medication Assisted Treatment (MAT)
- Objective 5.4: Increase client use of MAT services

Goal 6: Improve behavioral health outcomes while leveraging efficiencies in cost and societal consequence

Performance Indicators: Decreased cost of behavioral health

- Objective 6.1: Increase length of time in recovery
- Objective 6.2: Collect data from access centers and programs for admitted individuals, through BH TEDS, Global Assessment of Individual Needs (GAIN), M-90, and transfer of GAIN assessment between programs
- Objective 6.3: Gather data from outreach/follow-up services
- Objective 6.4: Explore connection between completion of follow-up services and length of recovery (include MAT data)

Workforce: Strengthen Workforce and Economic Development

Goal 1: Provide statewide training in best-practice behavioral health services including prevention, treatment, and recovery technology

Performance Indicator: Creation of a workforce development plan

Performance Indicator: Increase number of certified individuals providing services to individuals in treatment for mental health and substance use disorders

Performance Indicator: Increase number of clinicians trained in best-practice psychosocial techniques (Source: reported by PIHPs and State Training Coordinators [CMHAM])

- Objective 1.1: Promote utilization of best-practice psychosocial techniques for clinicians treating individuals with opioid use disorder
- Objective 1.2: Creation and dissemination of a workforce development ladder for prevention specialists
- Objective 1.3: Creation and dissemination of a workforce development ladder for treatment specialists
- Objective 1.4: Creation and dissemination of a workforce development ladder for recovery specialists
- Objective 1.5: Provide education opportunities that target the components of certification
- Objective 1.6: Work with credentialing body to develop a mechanism to effectively assist those with development plans, to ensure they successfully complete the requirements and pass exams
- Objective 1.7: Ensure that learning opportunities are available to the field related to evidence-based and promising practices and emerging issues impacting the field

Goal 2: Increase the number of individuals certified as peer support specialist and recovery coaches

Performance Indicator: Increase number of individuals certified in each workforce area – Target: 80 CPSS and 550 Certified Peer Recovery Coach (CPRC) for FY 18-19

Performance Indicator: Increase number of training opportunities offered/available to CPSS and CPRC

- Objective 2.1: Compile, interview and approve each CPRC who meet the requirements submitted for grand parenting
- Objective 2.2: Develop and train CPRC trainers to implement the new curriculum
- Objective 2.3: Organize, plan, and implement statewide and regional CPRC trainings
- Objective 2.4: Develop CPRC examination and scoring process
- Objective 2.5: Organize, plan, and implement statewide and regional CPSS trainings
- Objective 2.6: Provide ongoing oversight, technical assistance and mentoring with trainers

Goal 3: Provide training and continuing education to strengthen skills of CPSS and CPRC

Performance Indicator: Increase number of CPSS/CPRC trainings offered – Target: 70 for FY 18-19

- Objective 3.1: Secure training sites and develop a calendar of training dates to send out to stakeholders
- Objective 3.2: Develop and provide classes based on promising, best, and evidence-based practices
- Objective 3.3: Review evaluations and participate in networking during trainings to add new and additional trainings recommended by the workforce
- Objective 3.4: Request information from peer liaisons on training topics beneficial to peers in their agencies
- Objective 3.5: Track and review data for CPRC and CPSS after each training

Goal 4: Expand employment opportunities for Certified Peer Recovery Coaches and Certified Peer Support Specialists in primary and integrated care settings

Performance Indicator: Number of peers trained and certified in the areas of Wellness Recovery Action Planning (WRAP), Whole Health Action Management (WHAM), tobacco recovery and as

certified Community Health Workers (CHW) - Target: 10% of the workforce FY 18-20

Objective 4.1: Organize, plan, and implement 2-day and 5-day WRAP trainings

Objective 4.2: Organize, plan, and implement WHAM trainings

Objective 4.3: Organize, plan, and implement tobacco recovery/smoking cessation trainings

Objective 4.4: Develop and strengthen partnerships with the Michigan Community Health Worker Alliance (MICHWA) to meet entrance requirements for peers to become CHWs

Objective 4.5: Provide CHW certification training

Objective 4.6: Assist and participate in recruiting CPSS and CPRC by providing draft questions for interviewing and using the Microsoft Access database to refer individuals for employment opportunities in gambling

Goal 5: Increase the capacity of prevention efforts to address Gambling Disorder

Performance Indicator: Increase number of Gambling Disorder trained individuals in each workforce area

Objective 5.1: Disseminate Request for Information (RFI) to all PIHPs to assess interest and capacity

Objective 5.2: Equip each PIHP with a Gambling Disorder Prevention Coordinator

Objective 5.3: Organize and implement North American Training Institute (NATI) Gambling Disorder training

Objective 5.4: Educate the prevention workforce about comorbidities, overlapping risk, and protective factors between SUD, MH, and Gambling Disorder

Objective 5.5: Host annual Gambling Disorder Symposium

Objective 5.6: Convene Gambling Disorder TSC workgroup

Objective 5.7: Use existing infrastructure to expand Gambling Disorder prevention efforts

Objective 5.8: Provide training opportunities and technical assistance for effective prevention service development and implementation

Objective 5.9: Enhance Gambling Disorder prevention efforts to underserved populations

Office of Recovery Oriented System of Care Website Development:

Goal 1: Information Dissemination

Performance Indicator: Increase visits on OROSC website

Objective 1.1: Promote OROSC website and ease of access to program information

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