

**Michigan Department of Health and Human Services (MDHHS)
Behavioral Health and Developmental Disabilities Administration (BHDDA)
OFFICE OF RECOVERY ORIENTED SYSTEMS OF CARE (OROSC)**

**Recovery Oriented System of Care, Transformation Steering Committee Meeting
(ROSC/TSC)**

MINUTES

DATE/TIME: January 19, 2017; 10:00 am to 3:00 pm

LOCATION: Horatio Earle Learning Center
7575 Crouner Drive
Dimondale, MI

FACILITATOR: Larry P. Scott

NOTE TAKER: Recorded (D)

ATTENDEES: **In Person:** Liz Agius, Sandra Bullard, Beth Cooley, Yarrow Halstead, Denise Herbert, Colleen Jasper, Darlene Owens, Kelli Martin, Lisa Miller, Su Min Oh, Sam Price, Marci Scalera, Jane Terwilliger, Jeff Van Treese, Ronnie Tyson, Pam Werner, Cathy Worthem

Phone: Kelli Martin, Dawn Radzioch, Joel Smith, Angie Smith-Butterwick

TOPIC SUMMARIES

I. WELCOME AND INTRODUCTIONS – *Larry Scott*

Larry welcomed the Transformation Steering Committee (TSC). Everyone introduced themselves.

II. REVIEW AGENDA AND MINUTES

The agenda was reviewed with one correction to the date in Item III. A. to March 21-23, 2017, after which they were approved by consensus. Minutes from the September 15, 2016 meeting were reviewed and Darlene Owens was added to the attendees, after which they were approved by consensus.

III. OROSC UPDATES

A. SAMHSA Core Site Visit March 21-23, 2020 – *Larry Scott*

Larry explained the site visit, as well as all the federal teams that will be involved/coming; including the Centers for Medicare and Medicaid Services (CMS), Center for Substance Abuse Treatment (CSAT), and Center for Substance Abuse Prevention (CSAP). Some of the federal teams will be conducting site visits at some Prepaid Inpatient Health Plans (PIHPs), as well as conduct three Synar retailer inspections, and a Medication Assisted Treatment (MAT) program visit.

B. State Epidemiological Outcomes Workgroup - *Su Min Oh*

Su Min explained substance use disorder (SUD) indicators and Michigan being among 21 states being coordinated by the Office of Drug Control Policy second quarter data. Su Min proceeded to report data during the first, second, and third quarter 2016. She also states improvements to the Central Data Repository and indicated that the State Epidemiological Outcomes Workgroup (SEOW) now has a listserv and encouraged those interested to contact her at ohs@michigan.gov.

C. State Targeted Response (STR) to the Opioid Crisis Grants – Larry Scott, Angela Smith-Butterwick

Larry explained the STR grant, as well as who can apply (Single State Agency's (SSA) only), funding at 16.3 million per year for a total of 32 million to address opioid misuse; including deaths related to opioid misuse. He also explained requirement details, and data and plans. Other areas will include MAT guidelines and expanded MAT and prisoner re-entry. Darlene explained Detroit's preparation for prisoner re-entry. Marci explained Washtenaw's peer initiatives. Questions may be e-mailed to Larry at scottL11@michigan.gov.

D. Request for Applications for Innovative Practices (Block Grant Funding) - Larry Scott

Larry explained the RFA for Innovative Practices for BG funding.

E. Partnership for Success (PFS) 2015-2020 – Kelli Martin

Kelli reported the progress of the PFS grant, which included addressing underage drinking among persons age 12-20, prescription drug misuse and abuse among persons 12-25, and targeting nine underserved communities (Love Detroit, Taylor Teen Center, Macomb County, St. Joseph, Muskegon, Oceana, Mason, Bay City, and Genesee) based on the following data:

- Overall health disparities;
- Past 30-day and binge use of alcohol among those age 12-20;
- Nonmedical use of pain relievers;
- Unintentional poisoning and overdose deaths among youth and young adults;
- Substance abuse treatment admission data;
- Suicide rates; and
- Medicaid eligibility.

Kelli also reported on PFS grant activities, which include coalition building. The website can be visited at <https://www.samhsa.gov/capt/tools-learning-resources/components-effective-coalition>, such as clear organizational structure, membership capacity to do the work, and sustainability. Activities included:

- Mason and Oceana have created new coalitions;
- Genesee County Prevention Coalition is rebuilding;
- Coalition for a Drug-Free Muskegon;
- Substance Abuse Task Force of St. Joseph County;
- Bay County Prevention Network;
- Macomb Prevention Network;
- Warren/Center Line Coalition;
- Love Detroit Prevention Coalition; and
- Taylor Substance Abuse Prevention Task Force.

She also reported on prevention infrastructure building and building a referral network, physician education & SBIRT, as well as the use of evidence-based programs that Include:

- ✓ **Strengthening Families:** The Strengthening Families Program (SFP) is a nationally and internationally recognized parenting and family strengthening program for high-risk and general population families. SFP is an evidence-based family skills training program found to significantly improve parenting skills and family relationships, reduce problem behaviors, delinquency and alcohol and drug abuse in children and to improve social competencies and school performance. Child maltreatment also decreases as parents strengthen bonds with their children and learn more effective parenting skills.

- ✓ **Traditional Strengthening Families. Websites can be visited at:**
 - <http://legacy.nreppadmin.net/ViewIntervention.aspx?id=44>
 - <http://www.strengtheningfamiliesprogram.org>
- ✓ **Strengthening Families Program: For Parents and Youth 10-14:**
 - <http://legacy.nreppadmin.net/ViewIntervention.aspx?id=63>
 - <http://www.extension.iastate.edu/sfp>
- ✓ **Prime for Life:** Prime For Life®, an evidence-based prevention and intervention program, helps people learn to reduce their risks of alcohol and drug related problems throughout life. It is a motivational risk reduction program. It is used most with people who have had a legal or policy violation such as impaired driving, possession, or workplace violation, but it is relevant for everyone. It helps foster attitudes, beliefs, and understanding that helps people reduce risk for any type of alcohol or drug problem. It also creates a unique self-assessment experience to help people be more aware of what they value, what they are risking, and how to protect the things that mean the most in their lives.
 - Southeast (SE) training spring 30 slots
 - Southwest (SW) training this spring 30 slots

Other areas of the PFS Kelli reported on included training on the PFS 2015 Sub-recipient Health Disparities Plans, such as creating dynamic prevention coalitions, prevention in colleges and universities – Dave Closson, Illinois Higher Education Center and motivational interviewing on reaching target populations, such as LGBTQ, engaging urban communities, and PFS sub-recipient Fidelity Training for Evidence-Base practices.

F. Michigan Youth Treatment Infrastructure Enhancement (MYTIE) Grant – Beth Cooley

Beth reported on the MYTIE grant and its progress, communicated proposal highlights, resource network, explained the 18-25 definition. Webinars will be held on how to refer, interviewing, and Adolescent Community Reinforcement Approach (A-CRA).

G. Neonatal Abstinence Syndrome (NAS) Project – Angela Smith-Butterwick

Angie communicated to everyone the progress of the Neonatal Abstinence Syndrome (NAS) project.

H. State Survey – Drop In Centers – Colleen Jasper

Colleen explained to everyone peer run drop in centers and that they were created in the late 1980s and are a 501c3, its organizational structure, funded through Community Mental Health, 50 in Michigan, with seven thousand active members.

IV. BHDDA Leadership Update – Tom Renwick – Tabled

Due to Ton's absence, Larry communicated to everyone 298 strategies with the key being a service delivery system that is carved out (Medicaid funding to PIHPs), the caveat is models and pilots on different ways to deliver services. A study on the duplication of administrative services will be conducted. He also let everyone know that a new Michigan Automated Prescription System (MAPS) presentation was conducted at the BHDDA management team meeting, and that Licensing and Regulatory Affairs (LARA) will be invited to the next ROSC/TSC meeting to present the new MAPS system.

V. PIHP CEO Update – Tabled

VI. SAPT Directors Update – All

A conference call was conducted regarding the opiate grant. A list of MAT needs, gaps, and associated costs will be sent to Lisa Miller. Met with LARA and talked about modifications to administrative rules. A demonstration of LOC list will take place to show the progress in meeting deadlines. A meeting will take place on January 27, 2017.

VII. Innovative ROSC Initiatives – All

Detroit – Darlene reported PA funds, 2nd Annual Heroin Summit on May 3rd, 2017, SUD HIV July and August 2017. Twenty-nine (29) lives were saved using NARCON, and Detroit’s prisoner re-entry preparations.

Washtenaw County – Marci explained peer initiatives for the county and letters will be sent to all PIHPs in April. Jane mentions a heroin summit on neonatal and a Substance Abuse and Mental Health Services Administration (SAMHSA) technical assistance on child welfare on Neonatal Syndrome and that she has been invited to a policy academy.

Wayne State University – Liz reminded everyone of the importance of including indigenous Indian tribes and specialized training.

OROSC – Larry indicated that we are partnering with tribes on opioid reduction. He also said peers are being vetted for assistance in emergency rooms using the New Jersey model. Kelli indicated prevention and underage drinking dollar amounts to target communities, site visit trainings. Beth included the implementation grant by stating proposal highlights, as well as other areas, such as the definition of 18-25 year olds and conducting a webinar on how to refer youth for treatment

VIII. 2017 Workplan for TSC (Discussion Document) – All

A discussion regarding the 2017 TSC Workplan took place that covered:

- Priority review exploring substance abuse disorder barriers by recommendation
- A position paper vs discussion document.
- What’s doable in ROSC action mode?
- A status report is needed on outcomes.
- Letter from Tom on reporting.
- The Behavioral Health Advisory Council (BHAC) and their role in TSC decisions.
- Need a deliverable, backed by BHDDA to report to BHAC and a response from BHAC.
- Benefit package regarding Healthy Michigan and how these benefits are being utilized by requesting feedback.
- How cultural competency is being implemented and CMH System of Care and follow-up, and implementation of the ROSC, such as a chart that would indicate, next meeting, action plan, responsibility, and a deadline.
- There are new ROSC/Recovery planning and reporting requirements in the contract. The FY 2017 plan was due December 31, 2016.

Item	Person(s) Responsible	Deadline
N/A	N/A	N/A

ADDITIONAL INFORMATION

NONE

WRAP-UP AND ADJOURNMENT

The meeting ended at – 2:00 pm

NEXT MEETING

Date/Time: March 16; 10:00 am to 3:00 pm
Location: MDOT Horatio S. Earle Learning Center
7575 Crowner Dr.
Dimondale, MI 48821