

A large, faint, light gray outline of the state of Michigan serves as a background for the central text.

State Targeted Response to the Opioid Crisis

Project Year 1 Report

May 1, 2017 - April 30, 2018

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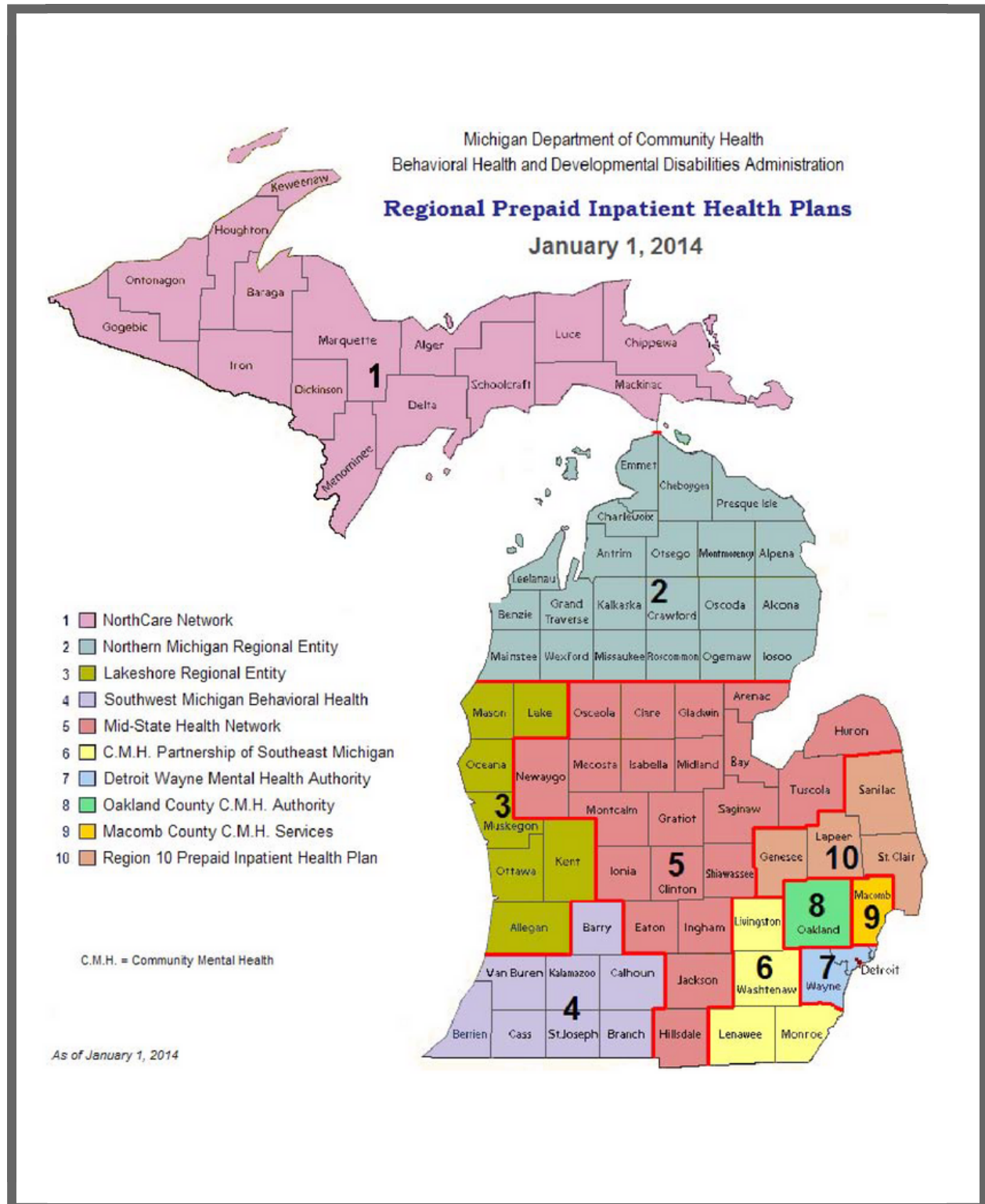
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Acronym Guide

ASSERT	Alcohol and Substance Abuse Services, Education, and Referral to Treatment
BHC	Behavioral Health Consultant
ITC	Inter-Tribal Council
LARA	Department of Licensing and Regulatory Affairs
MDHHS	Michigan Department of Health and Human Services
MAT	Medication Assisted Treatment
MI	Motivational Interviewing
MI-OPEN II	Michigan Opioid Prescribing Engagement Network II
MI-REP	MISSION Michigan Re-Entry Program
MOC	Michigan Opioid Collaborative
MSP	Michigan State Police
NP	Nurse Practitioner
OE/ND	Overdose Education/ Naloxone Distribution
OROSC	Office of Recovery Oriented Systems of Care
ODU	Opioid Use Disorder
PIHP	Prepaid Inpatient Health Plan
SBIRT	Screening, Brief Intervention, and Referral to Treatment
SFP 10-14	Strengthening Families Program 10-14
STR	State Targeted Response to the Opioid Crisis
SUD	Substance Use Disorder
TOP	Tribal Opioid Prevention
TOTR	Tribal Opioid Treatment and Recovery

Map of PIHP Regions



Overview

Michigan is a state deeply impacted by the opioid crisis. In 2012, Michigan was ranked 10th in the nation in per capita prescribing rates of opioid pain relievers. In 2016, 1,786 individuals in Michigan died from a drug overdose involving illicit and/or prescription opioids – an increase of 1,450% since 1999.

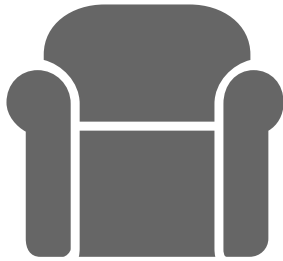
On December 14th, 2016 the Substance Abuse and Mental Health Services Administration (SAMHSA) released the funding opportunity announcement for the State Targeted Response to the Opioid Crisis (STR) grant, a 2-year funding package with specific allocations for all states and U.S. territories. On February 17th, 2017 the Michigan Department of Health and Human Services (MDHHS) - through the Office of Recovery Oriented Systems of Care (OROSC) - submitted the application for the STR Grant.

MDHHS received notification on April 21st, 2017 that the full \$16,372,680 designated for Michigan had been awarded to the state - with a 5% allocation for administration, 15% for prevention, and 80% for treatment and recovery initiatives. With the STR grant year beginning on May 1st, 2017, there were significant challenges to overcome to ensure that grantees quickly progressed to implementation given the crisis context of the funding. By working closely with grantees, state partners, and stakeholders, STR implementation was able to begin by August 2017. Through the first year of the STR grant, MDHHS built and expanded on partnerships with the Inter-Tribal Council, Tribal Governments, the PIHPs, the Michigan State Police, the Department of Licensing and Regulatory Affairs, the Michigan Department of Corrections, the Michigan Public Health Institute (MPHI), the Community Mental Health Association of Michigan (CMHAM), Michigan State University, the University of Michigan, and Wayne State University.

Within this report, you will find brief summaries of the initiatives developed under the STR grant and highlights of implementation during the first grant year: May 1, 2017 – April 30, 2018. Through this pivotal grant, MDHHS is working to increase access to treatment for OUD, reduce unmet treatment need, and reduce opioid overdose related deaths through provision of prevention, treatment, and recovery activities.

Key Accomplishments

TREATMENT



2,974

individuals received treatment services across all STR initiatives

NALOXONE

5,326

naloxone kits were distributed throughout Michigan in Year 1.



TRAINING



33

statewide trainings were held with 468 participants

RECOVERY SUPPORT

1,367

individuals received recovery support services across all STR initiatives



Prevention Programs

Michigan Opioid Prescribing Engagement Network II

SUMMARY

The Michigan Opioid Prescribing Engagement Network II (MI-OPEN II) is an expansion of the MI-OPEN program started at the University of Michigan. MI-OPEN II's goals include identifying and communicating best practices in opioid prescribing for common surgical and dental procedures, optimizing transitions from surgical to primary care, highlighting alternative pain management strategies, improving patient education, and ensuring options for safe opioid disposal and storage. The program has created data-driven prescribing guidelines, patient education brochures that can be utilized by any institution/organization, a continuing education curriculum for dentists, a statewide drug take-back event, and more. The physicians and dentists heading MI-OPEN II also present regularly throughout the state and country on opioid prescribing practices.

EDUCATION

9,455

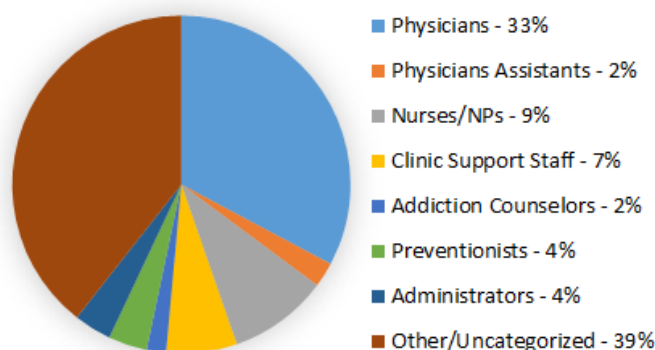
individuals received education on better prescribing practices.

DISPOSAL

27

new drug takeback sites have been set up statewide.

Individuals trained in prescriber education by title



Michigan State Police Angel Program

SUMMARY

The Michigan State Police (MSP) Angel Program aims to combat opioid overdoses and death. The program allows an individual struggling with OUD to walk into a MSP post during regular business hours and ask for assistance, without fear of being charged for possession of substances or paraphernalia. Additionally, Angel Project seeks to increase MSP's ability to respond to overdose emergencies and administer life-saving Narcan Nasal Spray by distributing naloxone units to all MSP posts statewide. MSP was able to obtain the Michigan Attorney General's approval and overcome barriers in order to purchase 300 naloxone kits for distribution to all posts statewide.

NarxCare Update and Integration

SUMMARY

Through a partnership between the Michigan Department of Licensing and Regulatory Affairs (LARA) and MDHHS, Michigan's Prescription Drug Monitoring Program (PDMP) is being updated by the integration of NarxCare. NarxCare is a platform that compiles opioid and benzodiazepene prescription records into easily understandable figures and risk scores. The use of NarxCare supplements ongoing activities that LARA has implemented in the area of monitoring and regulation. In Year 1, LARA launched NarxCare into the PDMP in December 2017. By the end of the first grant year, there were 31 integrations bringing easier access to over 4000 healthcare professionals.

Overdose Education and Naloxone Distribution

SUMMARY

One of the goals of STR is to provide overdose education and naloxone distribution (OEND) throughout Michigan to a wide audience. The PIHPs were provided with funding to accomplish these goals. Several regions partnered with the Grand Rapids Red Project, a pioneer in Michigan's opioid overdose prevention efforts. Other regions created programs unique to their counties including a hub-and-spoke distribution with Community Mental Health agencies in Region 5 and a partnership with Families Against Narcotics in Region 4.

NALOXONE

4,723

naloxone kits were distributed through the PIHPs in Year 1.

TRAINING

1,786

individuals throughout Michigan were trained in overdose prevention.

REGIONAL HIGHLIGHTS

Region 6 has partnered with and provided OEND for several non-traditional stakeholder groups including employees and residents at a homeless shelter, school nurses, probation officers, court officers, and high school students.

Region 2 provided naloxone training to staff from 13 county jails with STR funding and distributed naloxone kits to attendees. 20 counties have agreed to participate in STR funded naloxone programs.

Statewide Media Campaign

SUMMARY

MDHHS contracted with Brogan & Partners to create a statewide media campaign promoting awareness of the opioid crisis and reducing stigma towards individuals with opioid use disorder. The first iteration of the campaign launched in December 2017 and ran through May 2018. Brogan & Partners completed a pre-survey with 500 participants to gather baseline awareness data before the campaign was fully disseminated and also carried out a 500 participant post-survey as part of the evaluation. The target audience of this campaign was the major age demographic affected by overdose deaths: adults 25-44. The campaign utilized radio spots through the Michigan Association of Broadcasters as well as traditional radio, cable spots in high impact areas, digital engagement units, ads on the music streaming site Pandora, social media ads through Facebook, and targeted ads through Google Search. In addition to bringing awareness and reducing stigma, the campaign also provides a link to the Stop Overdoses resource page on the OROSC website.



Strengthening Families Program 10-14

SUMMARY

The Strengthening Families Program: For Parents and Youth 10-14 (SFP 10-14) is a 7-week family skills training intervention designed to enhance school success and reduce youth substance use and aggression among 10- to 14-year-olds. Funding was provided to the PIHPs to organize and implement SFP 10-14 cohorts, with the goal of expanding the use of SFP 10-14 throughout Michigan. Nine of ten regions were able to hold one or more 7-week trainings during STR Grant Year 1.

PARTICIPANTS

202 **253**
adults & youth
completed the SFP 10-14
program in Year 1.

TRAINING

101

staff were trained in SFP
10-14 in Year 1.

PROGRAMMING

32

7-week SFP 10-14
sessions were held
throughout Michigan.

REGIONAL HIGHLIGHTS

Region 3 finds creative ways to incentivize families to participate - such as offering gas cards for transportation assistance and gift baskets for completion.

Region 7 is leveraging community connections, especially with faith-based organizations, to provide meals and recruit families. So far, Region 7 has started the most cohorts with 11 in Year 1.

Tribal Opioid Prevention

SUMMARY

The Inter-Tribal Council (ITC) is supporting the Tribal Opioid Prevention (TOP) initiative as the fiduciary of STR funding for the federally recognized tribes in Michigan. Of the 12 federally recognized tribes, ten confirmed their readiness to develop prevention initiatives and created prevention-based strategic plans. ITC staff developed a logic model to support coordination of efforts and strategy. Many of the prevention initiatives implemented in Grant Year 1 focused on building awareness at the local level. Tribes used STR funding to create culturally relevant local media campaigns, initiate and expand overdose education and naloxone distribution, implement evidence-based programming such as Project Towards No Drugs, and enable local policy development. The Inter-Tribal Council also provides technical assistance to tribes through this grant to develop local prevention initiatives.

MEDIA CAMPAIGNS

6

tribes are developing local media campaigns.

NALOXONE ACCESS

302

kits were purchased during Grant Year 1.

The tribes using their STR funding towards media campaigns have developed a number of innovative ways to promote awareness of the opioid crisis in their communities. Through behavioral health games at powwows, billboards, bus wrapping, and video projects capturing the stories of individuals who have struggled with addiction, the campaigns are carefully tailored to meet local needs.

Treatment and Recovery Programs

MAT Enhancement

SUMMARY

The enhancement and implementation of Medication Assisted Treatment (MAT) focuses on increasing access to and utilization of MAT services statewide. This initiative funds PIHPs to focus on both MAT services and MAT reimbursement rates with emphasis in the areas of training, promising practices, implementation of MAT standards of practice, and incentivizing MAT rates. The PIHPs were given the opportunity to submit proposals pertaining to a variety of topics to enhance MAT regionally. Many PIHPs chose to focus on reducing transportation barriers by funding the distribution of gas cards, bus tokens, shuttles/bus lines, and Uber/Lyft rides. MAT Enhancement funding has been used to increase access by increasing the number and availability of MAT providers as well as increasing coverage of MAT for uninsured/under-insured patients. Jail-based MAT programs were started with STR funding in Regions 5 and 8 and are in the planning stages for STR Grant Year 2 implementation in Regions 3 and 4. At least 5 new recovery coaches were hired through STR and 61 coaches received training on MAT through the Medication Assisted Recovery Services training.

TRAINING

61

Peers trained on Medication Assisted Recovery Services.

TREATMENT

1,098

individuals received treatment services

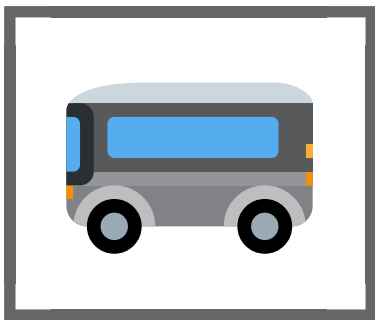
PROPOSAL TOPIC AREAS

- Incentivizing MAT rates
- MAT Trained Peers
- Peer Navigators and Peer Recovery Coaches
- Additional funding for Vivitrol and Suboxone
- Transportation to clinics for dosing
- Funding prescription medication medical and psychiatric disorders

MAT Enhancement

REGIONAL HIGHLIGHT

Region 10 has partnered with the Blue Water Area Transportation Commission to provide a new bus route specifically for MAT clients. Four new stops were added. The bus is often full and transports approximately 40 clients each day. Overall, 140 individuals have received STR funded transportation assistance in region 10.



REGIONAL HIGHLIGHT

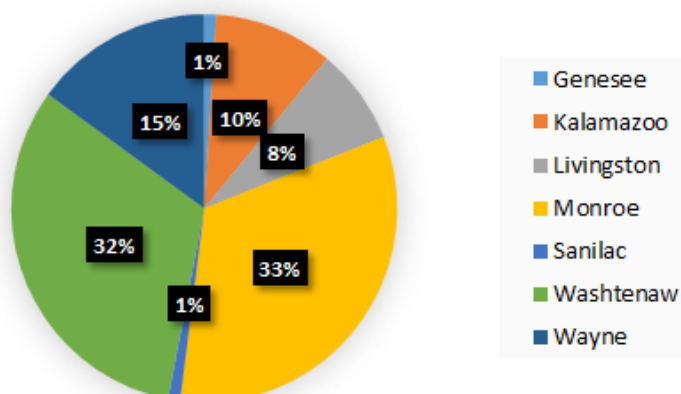
Region 8 started a jail-based pilot MAT program in February 2018 with a target of 24 participants initially. By the end of the first grant year in April 2018, 17 participants were enrolled. Buprenorphine and Naltrexone are available for program participants, as well as methadone for certain individuals who were receiving methadone MAT prior to their incarceration. Participants also receive group counseling while in the program and a warm transfer to a community MAT clinic upon release.

Michigan Opioid Collaborative

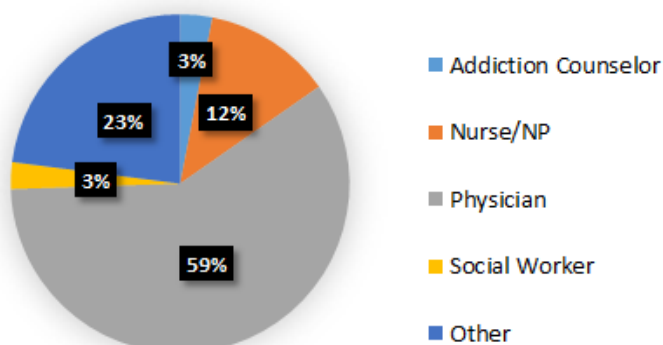
SUMMARY

The Michigan Opioid Collaborative (MOC) was created at the University of Michigan to address provider barriers to MAT delivery in both the addictions specialty and in other clinical settings. Modeled after the Michigan Child Collaborative Care Program, MOC works to address the barriers preventing potential MAT prescribers from providing. In Year 1, MOC provided in-person and telephone-based support and technical assistance on prescribing guidelines, clinic processes, and patient-specific consultations to providers in nine counties throughout six PIHP regions. MOC provided 34 clinic consultations to 196 physicians and clinical staff as well as 5 patient consultations. Washtenaw and Livingston counties have a designated Behavioral Health Consultant (BHC) with expansion next into Monroe/Lenawee, Kalamazoo/Calhoun, the Upper Peninsula, and the rest of the state starting soon.

Consultations by County



Consultation by Provider Type



MISSION Michigan Re-Entry Program

SUMMARY

The MISSION Michigan Re-Entry Program (MI-REP) uses the MISSION-CJ model, an evidence based wraparound treatment program designed specifically to serve individuals with co-occurring substance use disorders and mental health conditions. MI-REP is a partnership between the PIHPs, MDOC, MDHHS, and Michigan State University with support from the University of Massachusetts Medical School. In the MI-REP program, individuals with a history of opioid use and mental health conditions receive programming and services from a case manager and peer support specialist. MI-REP is currently operating at the Detroit Re-Entry Program and Women's Huron Valley Correctional Facility and enrolling participants from Wayne, Oakland, and Macomb counties. Participants receive up to 3 months of seamless programming and support inside the facility and up to 6 months after release from the facility.

ENROLLMENT

61

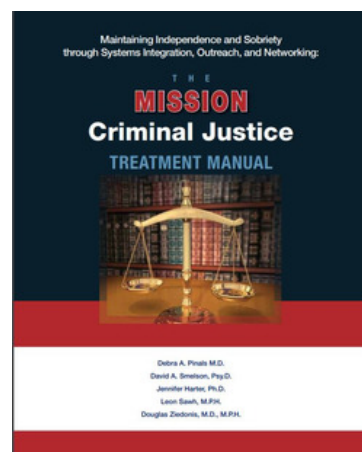
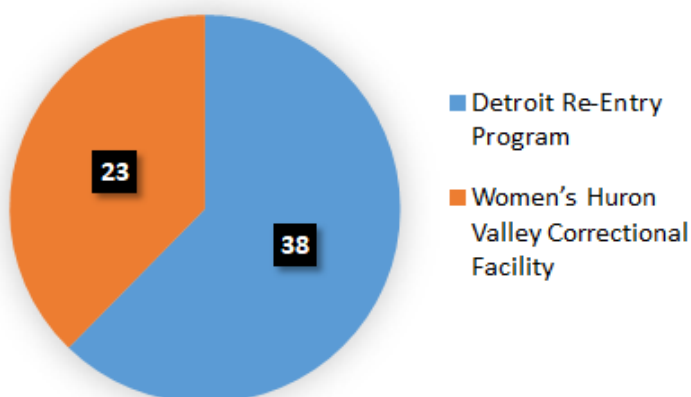
participants enrolled in MI-REP during Grant Year 1.

PARTICIPANTS

27

participants were post-release at the end of Grant Year 1.

of MI-REP Participants by Facility

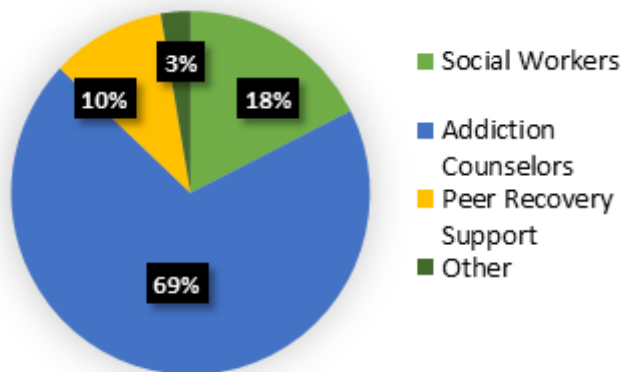


Motivational Interviewing

SUMMARY

Motivational Interviewing (MI) is a therapeutic technique based upon the way the brain responds to dialog. It has been found that individuals who received MI in an opioid treatment program were initially more contemplative of change, complied with the program longer, and relapsed less quickly than individuals who did not receive Motivational Interviewing. The PIHPs received funding to train clinicians in Motivational Interviewing through a 5-month training curriculum developed at MDHHS. The PIHPs were also provided funding to incentivize clinicians to attend all trainings and to promote utilization in clinic. In Year 1, nine out of ten regions were able to hold the Basic MI training - the first training of five. The final region will be holding an MI training early in Year 2. One region was able to finish the full 5-month course during Grant Year 1.

MI Trained Clinicians by Title



PROGRAMS

13

MAT programs are using Motivational Interviewing for the first time

REGIONAL HIGHLIGHTS

Region 1 trained the largest cohort in Basic Motivational Interviewing with 41 participants.

Region 5 developed a fidelity monitoring program to ensure clinicians maintain their new skills after training ends.

TRAINING

262

clinicians trained in Motivational Interviewing in Year 1.

Project ASSERT

SUMMARY

PIHPs were provided funding to implement Project ASSERT, an SBIRT model implemented by Peer Wellness Advocates in Emergency Department settings. Peer Wellness Advocates work with patients who screen positive for substance use and determine that patient's risk level. For higher risk patients, the Peer Wellness Advocate will build rapport and use techniques such as the Brief Negotiated Interview to develop a Plan for Change. The Plan for Change may include referrals to treatment or other services. The Peer Wellness Advocate follows up with the patient after release from the hospital to determine if they were able to utilize the referral and if additional support is needed. To implement this program, PIHPs worked to help secure agreements with Emergency Departments and Recovery Providers to hire Peer Wellness Advocates.

HOSPITALS

11

hospitals began implementing Project ASSERT in Year 1.

TRAINING

62

peers and hospital staff trained in Project ASSERT statewide.

REGIONAL HIGHLIGHTS

Region 9 was able to quickly start funding 8 Peer Wellness Advocates to work in 2 hospitals in Macomb County through CARE of Southeast Michigan. The Peer Wellness Advocates have been able to follow up with approximately 68% of patients - many of whom may not have received a substance use follow up otherwise.

Region 4 secured agreements with 3 emergency departments and hired 1 full-time and 10 on-call peers. The region leveraged existing partnerships with the local Community Mental Health Agency and the hospitals to implement in a timely manner.

Tribal Opioid Treatment and Recovery

SUMMARY

The Inter-Tribal Council is supporting the Tribal Opioid Treatment and Recovery Project (TOTR) as the fiduciary of STR funding for the federally recognized tribes in Michigan. The TOTR project currently focuses on providing services to individuals with OUD through a voucher program with the Tribal Access and Care Coordination Centers. The Inter-Tribal Council also provides technical assistance to tribes through this grant to develop local treatment initiatives for OUD.

ENROLLMENT

315

individuals with OUD
received treatment and/or
recovery services.

PARTNERS

11

tribes participating in
TOTR

<i>Treatment/Recovery Services</i>	<i>Number of Clients Receiving Service</i>
Case Management	175
Transportation	136
Individual Counseling	131
Screening	127
Residential Treatment	70
Group Counseling/Per Person	34
Other Medical Services	32
Other Education Services Group	31
Spiritual Support - Individual	30
Co-Occurring Treatment/Recovery Services	28
Clinical Treatment Plan	20
Relapse Prevention Individual Service	19
Employment Coaching	14
Peer Coaching or Mentoring	12
Medical Care (Vivitrol)	9
Information and Referral	6

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