

**MSHN Substance Use Disorder (SUD)  
Oversight Policy Advisory Board Meeting  
June 21, 2017 ~ 4:00 p.m.  
Meeting Agenda**

- 1) Call to Order
- 2) Roll Call
- 3) ACTION ITEM: Approval of the Agenda for June 21, 2017
- 4) ACTION ITEM: Approval of Minutes from April 19, 2017 (Item 4)
- 5) Public Comment
- 6) Board Chair Report
  - A. Welcome new member – Christina Harrington
  - B. FY18 Board Meeting Schedule
- 7) ACTION ITEM: Approval of FY18 Board Meeting Calendar (Item 7)
- 8) Deputy Director Report
  - A. 298 Update
  - B. FY2017 PA2 Use by County (Item 8)
- 9) Operating Update
  - A. Block Grant RFI Awards (Item 9A)
  - B. Overdose Death Reports
  - C. Regional SUD Quarterly Report (Item 9C)
- 10) ACTION ITEM: Receive SUD Quarterly Reports  
(Hardcopy of county-specific reports provided onsite within respective Board Member folders)
- 11) Other Business
- 12) Public Comment
- 13) Board Member Comment
- 14) Adjournment

Mid-State Health Network

**SUD Oversight Policy  
Advisory Board  
June 2017 Meeting**



**MEETING LOCATION**

Michigan Association of  
Community Mental Health Boards  
(MACMHB)  
426 S. Walnut, Lansing  
Upstairs Training Room

**TELE-CONFERENCE:**

Call in: 1.888.585.9008  
Conference Room: 182 260 353

Please call/email Merre Ashley to  
confirm your attendance  
517.253.7525  
[merre.ashley@midstatehealthnetwork.org](mailto:merre.ashley@midstatehealthnetwork.org)



**UPCOMING FY17  
BOARD MEETINGS  
August 16, 2017**

All meetings will be held from  
4:00-5:30 p.m. at MACMHB  
unless noted otherwise.



MSHN Board Approved Policies  
May be Found at:  
<http://www.midstatehealthnetwork.org/policies/>

**Mid-State Health Network SUD Oversight Policy Advisory Board**

**Wednesday, April 19, 2017, 4:00 p.m.**

**Michigan Association of CMH Boards (MACMHB)**

**Meeting Minutes**

**1. Call to Order**

Chairperson Hunter called the MSHN SUD Regional Oversight Policy Board of Directors Meeting to order at 4:00 p.m.

**Board Member(s) Present:** Lisa Ashley (Gladwin), Bruce Caswell (Hillsdale), Larry Emig (Osceola), Steve Glaser (Midland), Richard (Dick) Gromaski (Bay), Susan Guernsey (Mecosta) (via phone), John Hunter (Tuscola), Jerry Jaloszynski (Isabella), Bryan Kolk (Newaygo), Tom Lindeman (Montcalm), Carl Rice (Jackson), Vicky Schultz (Shiawassee), Leonard Strouse (Clare), Sabrina Sylvain (Gratiot), Debbie Thalison (Ionia), Kim Thalison (Eaton), Kam Washburn (Clinton), Virginia Zygiel (Arenac)

**Board Member(s) Absent:** Clark Elftman (Huron), Carol Keonig (Ingham), John McKellar (Saginaw)

**Staff Members Present:** Amanda Horgan (Deputy Director), Dr. Dani Meier (Chief Clinical Officer), Carolyn Watters (Director of Provider Network Management), Merre Ashley (Executive Assistant)

**2. Roll Call**

Ms. Merre Ashley provided the Roll Call for Board Attendance.

**3. Approval of Agenda for April 19, 2017**

Board approval was requested for the Agenda of the April 19, 2017 Regular Business Meeting.

**ROPB 16-17-020 MOTION BY DEB THALISON, SUPPORTED BY VIRGINIA ZYGIEL, FOR APPROVAL OF THE AGENDA OF THE APRIL 19, 2017 REGULAR BUSINESS MEETING, AS PRESENTED. MOTION CARRIED: 16-0.**

#### **4. Approval of Minutes from February 15, 2017 Organizational Meeting**

**ROPB 16-17-021 MOTION BY LARRY EMIG, SUPPORTED BY VICKY SCHULTZ, FOR APPROVAL OF THE MINUTES OF THE FEBRUARY 15, 2017 ORGANIZATIONAL MEETING, AS PRESENTED. MOTION CARRIED: 16-0.**

#### **5. Public Comment**

There was no public comment.

#### **6. Board Chair Report**

Chairperson Hunter

- Welcome New Board Members:
  - Lisa Ashley (Gladwin County)
  - Steve Glaser (Midland County)

Ms. Kim Thalison arrived at 4:10 p.m.

#### **7. Deputy Director Report**

Ms. Amanda Horgan provided information and overview of materials related to the following:

- FY2017 PA2 Summary Report
- Chart Summary
- PA2 Future Funding (Longevity of Funds)

#### **8. Approval of FY17 Substance Use Disorder (SUD) PA2 Funding Requests/Contract Listing**

Ms. Carolyn Watters provided an overview of the contract listing, and stating additional detail was incorporated per board member request. Following discussion, it was established a “Snapshot” depicting county-specific service array, funding requests and activity would be very beneficial to board members.

Ms. Horgan stated future contract listings would include the specificity as requested.

**ROPB 16-17-022 MOTION BY BRUCE CASWELL, SUPPORTED BY DICK GROMASKI, FOR APPROVAL OF FY17 SUBSTANCE USE DISORDER (SUD) PA2 FUNDING REQUESTS/CONTRACT LISTING, AS PRESENTED. MOTION CARRIED: 17-0.**

Ms. Watters provided additional information and overview of materials related to the following:

- Mid-Year Funding Requests
- PA2 Funding Criteria

## **9. Operating Update**

Dr. Dani Meier provided information on the following:

- Clinical Staff Updates
- NARCAN Distribution Update

## **10. Receive Substance Use Disorder (SUD) FY17 Quarterly Report (First Quarter)**

Chairman Hunter referenced the county-specific reports, provided onsite within respective Board Member folders.

**ROPB 16-17-023 MOTION BY DICK GROMASKI, SUPPORTED BY JERRY JALOSZYNSKI, TO RECEIVE THE SUBSTANCE USE DISORDER (SUD) FY17 QUARTERLY REPORT (FIRST QUARTER), AS PRESENTED AND PROVIDED. MOTION CARRIED: 17-0.**

Ms. Susan Guernsey disconnected from the call at 4:45 p.m.

## **11. Other Business**

Mr. Bruce Caswell stated he is impressed with the team work of MSHN's clinical team and administration, and thanked them for efforts leading to forward motion of processes. Dr. Meier offered appreciation for the board's ongoing support.

## **12. Public Comment**

There was no public comment.

## **13. Board Member Comment**

Ms. Vicky Schultz stated additional information about PA2 programs would allow board members the opportunity to take ideas back to their communities, and explore ways to potentially expand prevention and treatment locally.

Ms. Kim Thalison offered information on the June 5-6, 2017, Prevention Conference in Frankenmuth. Information would be forwarded to board members following the meeting by MSHN's executive assistant.

**14. Adjournment**

**ROPB 16-17-024 MOTION BY VIRGINIA ZYGIEL, SUPPORTED BY DEB THALISON TO ADJOURN THE APRIL 19, 2017 SUD OVERSIGHT POLICY BOARD MEETING. MOTION CARRIED: 16-0.**

Chairperson Hunter adjourned the April 19, 2017 Substance Use Disorder Oversight Policy Advisory Board of Directors Meeting at 4:51 p.m.

Meeting minutes submitted respectfully by:

Merre Ashley  
Executive Assistant, MSHN

Substance Use Disorder Regional Oversight Policy Board Meetings  
FY18 Meeting Schedule – Tentative\*

MEETING	DATE/TIME	LOCATION
Substance Use Disorder (SUD) Regional Oversight Policy Board of Directors Meeting	October 18, 2017 4:00-5:30 p.m.	MACMHB 426 S. Walnut, Lansing (Upstairs Training Room)
Substance Use Disorder (SUD) Regional Oversight Policy Board of Directors Meeting	December 20, 2017 4:00-5:30 p.m.	MACMHB 426 S. Walnut, Lansing (Upstairs Training Room)
Substance Use Disorder (SUD) Regional Oversight Policy Board of Directors Meeting	February 21, 2018 4:00-5:30 p.m.	MACMHB 426 S. Walnut, Lansing (Upstairs Training Room)
Substance Use Disorder (SUD) Regional Oversight Policy Board of Directors Meeting	April 18, 2018 4:00-5:30 p.m.	MACMHB 426 S. Walnut, Lansing (Upstairs Training Room)
Substance Use Disorder (SUD) Regional Oversight Policy Board of Directors Meeting	June 20, 2018 4:00-5:30 p.m.	MACMHB 426 S. Walnut, Lansing (Upstairs Training Room)
Substance Use Disorder (SUD) Regional Oversight Policy Board of Directors Meeting	August 15, 2018 4:00-5:30 p.m.	MACMHB 426 S. Walnut, Lansing (Upstairs Training Room)

\*Calendar is tentative, pending Board approval

**Mid-State Health Network**  
Summary of PA2 Use of Funds by County and Provider  
October 1, 2016 through April 30, 2017

**Item 8**

County and Provider	Case Management	Detox	Early Intervention	Outpatient	Prevention	Recovery Support	PFS 2015-2020	Grand Total
<b>Arenac</b>					<b>3,100.72</b>	<b>11,304.00</b>		<b>14,404.72</b>
Peer 360 Recovery						11,304.00		11,304.00
Sterling Area Health Center					3,100.72			3,100.72
<b>Bay</b>			<b>7,853.93</b>		<b>44,198.93</b>	<b>32,829.75</b>	<b>623.23</b>	<b>85,505.84</b>
Bay Arenac Behavioral Health							623.23	623.23
Bay Regional Medical Center DBA McLaren Bay					9,560.38			9,560.38
Boys and Girls Club Bay Region					18,204.00			18,204.00
DOT Caring Center, Inc.						1,991.79		1,991.79
List Psychological Services						4,098.15		4,098.15
Peer 360 Recovery						16,955.00		16,955.00
Sacred Heart Rehabilitation			7,853.93		5,113.33	9,784.81		22,752.07
Sterling Area Health Center					11,321.22			11,321.22
<b>Clare</b>						<b>11,893.00</b>		<b>11,893.00</b>
Ten Sixteen Recovery						11,893.00		11,893.00
<b>Clinton</b>	<b>4,262.00</b>			<b>56,309.90</b>	<b>2,568.54</b>			<b>63,140.44</b>
Community Mental Health Authority of Clinton, Eaton, Ingham				56,309.90				56,309.90
Eaton Regional Education Service Agency					2,568.54			2,568.54
State of Michigan MRS	4,262.00							4,262.00
<b>Eaton</b>	<b>4,262.00</b>			<b>76,803.03</b>	<b>45,184.55</b>	<b>11,555.13</b>		<b>137,804.71</b>
Barry Eaton District Health				76,803.03	10,128.97	11,555.13		98,487.13
Eaton Regional Education Service Agency					35,055.58			35,055.58
State of Michigan MRS	4,262.00							4,262.00
<b>Gladwin</b>					<b>302.00</b>	<b>10,597.00</b>		<b>10,899.00</b>
Ten Sixteen Recovery					302.00	10,597.00		10,899.00
<b>Gratiot</b>	<b>222.86</b>			<b>28,257.02</b>	<b>2,818.76</b>	<b>53.77</b>		<b>31,352.41</b>
Addiction-Alma				27,691.72				27,691.72
Gratiot County Child Advocacy Association					2,818.76			2,818.76
Gratiot County CMH	222.86			565.30		53.77		841.93
<b>Hillsdale</b>					<b>2,630.43</b>			<b>2,630.43</b>
McCullough, Vargas, and Associates					2,630.43			2,630.43
<b>Huron</b>					<b>2,851.63</b>	<b>1,109.17</b>		<b>3,960.80</b>
Huron County Health Department					2,851.63			2,851.63
List Psychological Services						1,109.17		1,109.17
<b>Ingham</b>	<b>69,011.00</b>	<b>123,530.42</b>		<b>18,304.12</b>	<b>143,766.17</b>	<b>211,083.10</b>		<b>565,694.81</b>
Child and Family Services					60,030.00	23,824.00		83,854.00
Community Mental Health Authority of Clinton, Eaton, Ingham		123,530.42						123,530.42
Cristo Rey Community Center					38,141.45	34,457.12		72,598.57
Eaton Regional Education Service Agency					45,594.72			45,594.72
Mid-Michigan Recovery Services				18,304.12		8,374.66		26,678.78
State of Michigan MRS	12,785.00							12,785.00
WAI-IAM, Inc. & RISE Recovery Community						12,587.16		12,587.16
Wellness, InX	56,226.00					131,840.16		188,066.16

**Mid-State Health Network**  
Summary of PA2 Use of Funds by County and Provider  
October 1, 2016 through April 30, 2017

County and Provider	Case Management	Detox	Early Intervention	Outpatient	Prevention	Recovery Support	PFS 2015-2020	Grand Total
<b>Ionia</b>					<b>3,116.47</b>			<b>3,116.47</b>
County of Ionia					3,116.47			3,116.47
<b>Isabella</b>					<b>14,397.00</b>	<b>34,481.00</b>		<b>48,878.00</b>
Ten Sixteen Recovery					14,397.00	34,481.00		48,878.00
<b>Jackson</b>					<b>68,013.20</b>	<b>96,359.01</b>		<b>164,372.21</b>
Allegiance Health Foote Memorial					13,230.39			13,230.39
Family Service and Childrens Aid (Born Free)					54,782.81	48,351.56		103,134.37
Home of New Vision						48,007.45		48,007.45
<b>Mecosta</b>					<b>8,747.00</b>	<b>14,727.00</b>		<b>23,474.00</b>
Ten Sixteen Recovery					8,747.00	14,727.00		23,474.00
<b>Midland</b>					<b>16,224.00</b>	<b>28,863.00</b>		<b>45,087.00</b>
Peer 360 Recovery						11,304.00		11,304.00
Ten Sixteen Recovery						17,559.00		17,559.00
The Legacy Center for Community Success					16,224.00			16,224.00
<b>Montcalm</b>						<b>22,706.42</b>		<b>22,706.42</b>
Cherry Street Services						11,653.58		11,653.58
Wedgewood Christian Services						11,052.84		11,052.84
<b>Newaygo</b>					<b>15,588.70</b>			<b>15,588.70</b>
Newaygo County RESA					15,588.70			15,588.70
<b>Osceola</b>					<b>2,149.00</b>			<b>2,149.00</b>
Ten Sixteen Recovery					2,149.00			2,149.00
<b>Saginaw</b>				<b>28,480.00</b>	<b>63,335.22</b>	<b>16,957.00</b>		<b>108,772.22</b>
10th District Court				28,480.00				28,480.00
First Ward Community Service					858.73			858.73
Health Delivery					14,299.08			14,299.08
Parishioners on Patrol					5,000.00			5,000.00
Peer 360 Recovery						16,957.00		16,957.00
Sacred Heart Rehabilitation					21,245.08			21,245.08
Saginaw County Youth Protection Council					21,932.33			21,932.33
<b>Shiawassee</b>	<b>4,262.00</b>				<b>6,111.14</b>			<b>10,373.14</b>
Catholic Charities of Shiawassee and Genesee					5,267.28			5,267.28
Shiawassee County					843.86			843.86
State of Michigan MRS	4,262.00							4,262.00
<b>Tuscola</b>					<b>5,000.00</b>			<b>5,000.00</b>
List Psychological Services					5,000.00			5,000.00
<b>Grand Total</b>	<b>82,019.86</b>	<b>123,530.42</b>	<b>7,853.93</b>	<b>208,154.07</b>	<b>450,103.46</b>	<b>504,518.35</b>	<b>623.23</b>	<b>1,376,803.32</b>



RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
LANSING

NICK LYON  
DIRECTOR

May 5, 2017

Joseph Sedlock, Director  
Region 5 Mid-State Health Network  
530 West Ionia Street, Suite F  
Lansing, MI 48933

Dear Mr. Sedlock:

This is provide feedback to your submission of applications in response to our recent Request for Information regarding strategic initiatives funded by the Substance Abuse Prevention and Treatment Block Grant.

We are pleased to announce that your applications in response to the following Request for Information (RFI) focus areas have been approved:

**RFI#1: Prescription Drug and Opioid Overdose Prevention**

- Amount awarded - \$250,348

**RFI#2: Opioid Overdose Recovery**

- Amount awarded - \$250,000

**RFI#3: Innovative Strategies for Enhancing Treatment Services for Pregnant Women**

- Amount awarded - \$250,000

**RFI#4: Drug Court Recovery Support Program**

- Amount awarded – \$250,000

An allotment letter is forthcoming.

If you have any questions regarding this communication, please let me know.

Sincerely,

Larry P. Scott, Acting Director  
Office of Recovery Oriented Systems of Care

c: Thomas Renwick  
John Duvendeck

Name: \_\_\_\_\_  
 SUD SRE: \_\_\_\_\_  
 Date: \_\_\_\_\_



Region 5 Quarterly Reports  
 2017 FY Quarter #\_2\_\_(Jan-Mar)

PREVENTION GOALS	RESULTS & PROGRESS
Reduce Underage Drinking	Education classes were conducted in schools during this quarter. A Town Hall video was created to increase awareness on underage drinking. Family friendly events (such as movie nights; snow tubing; and bowling) were held. SUD Prevention poster contest was held. TIPs trainings were conducted. Focus groups and one-on-one interviews were held to gather input on local issues; one county expressed concerned about high school and college binge drinking which the coalition is addressing with new strategies. Some counties conducted alcohol compliance checks with mostly favorable results. On track.
Reduce prescription and over-the-counter drug abuse, including opiates	Education/awareness presentations were conducted to community groups (including coalitions) regarding opioid epidemic (problems with Carfental in heroin, use of Vivitrol in community, etc.). Prescription drug boxes and drug collection drop-off dates continue to be well received in all communities hosting them. Opioid surveillance data was shared with coalitions. In March MSHN wrote for four OROSC grants (in collaboration with county providers/coalitions) addressing the opioid epidemic – notice of award of funding will come next quarter. On track.
Reduce youth access to tobacco	The DYTURs in each county conducted vendor education and non-SYNAR checks with tobacco retailers. A minimum of 25% education to providers is required (some DYTURs provide education up to 100% of tobacco retailers in their counties). Tobacco 21 was discussed in several coalitions. Formal SYNAR checks will be conducted in the 3 <sup>rd</sup> quarter. On track.

TREATMENT GOALS	RESULTS & PROGRESS
<b>Increase women's specialty service programs</b>	<b>Victory Clinical Services, Saginaw, Michigan became designated as a women's specialty program on May 1, 2017. They are the first designated program in the</b>

Name: \_\_\_\_\_  
 SUD SRE: \_\_\_\_\_  
 Date: \_\_\_\_\_

	State of Michigan for medication assisted treatment. Cristo Rey and Victory Clinical Services in <b>Ingham County are beginning a new women's Specialty</b> program with Sparrow Neonatal Intensive Care Unit (NICU) to assist infants born with Neonatal Abstinence Syndrome (NAS).
Increase array of medication assisted treatment programs	Continuing work with Hillsdale County providers to begin to offer Vivitrol jail-based services. Bay County has begun discussion of similar Vivitrol program for individuals in jail. Recovery Pathways is opening a new Suboxone and Vivitrol assisted treatment program in collaboration with Community Mental Health for Central Michigan in Isabella County one day per week.
Increase engagement, retention & completion of treatment	Continuing to add services such as: case management and peer recovery supports to existing programs throughout the region to aid the client in staying in services by providing added support. The chart below focuses on engagement, retention, and completion of treatment.
Increase inter-agency collaboration of service delivery	Vivitrol jail-based program is a collaborative effort of MSHN, McCullough Vargas and the Hillsdale Treatment Court. MSHN, Cristo Rey Sparrow, and VCS are collaborating in above <b>program for pregnant women's services</b> . Community Mental Health of Central Michigan and Recovery Pathways are collaborating (again) in an effort to offer medication assisted treatment services in Isabella County.

The figures below focus on two out of eleven discharge reason codes; Completion of Treatment (COP) and Continuing in Treatment/Transfer.

FY17 Quarter 2	COP	% COP	Continuing Treatment Transfer	%Continuing Treatment Transfer	Total Discharges
Outpatient	483	29.0%	272	16.3%	1664
Detox	124	27.6%	250	55.7%	449
Long Term Residential	102	37.4%	73	26.7%	273
Short Term Residential	51	16.3%	179	57.2%	2699

## **RESIDENTIAL TREATMENT LEVELS OF CARE:**

**ASAM Level 3.1:** Clinically Managed Low-Intensity Residential Services: These services are directed toward applying recovery skills, preventing relapse, improving emotional functioning, promoting personal responsibility, and reintegrating the individual in the worlds of work, education, and family life. Treatment services are similar to low-intensity outpatient services focusing on improving the individual's functioning and coping skills in Dimension 5 and 6. The functional deficits found in this population may include problems in applying recovery skills to their everyday lives, lack of personal responsibility, or lack of connection to employment, education, or family life. This setting allows clients the opportunity to develop and practice skills while reintegrating into the community.

**ASAM Level 3.3:** Clinically Managed Medium-Intensity Residential Services: These programs provide a structured recovery environment in combination with medium-intensity clinical services to support recovery. Services may be provided in a deliberately repetitive fashion to address the special needs of individuals who are often elderly, cognitively impaired, or developmentally delayed. Typically, they need a slower pace of treatment because of mental health problems or reduced cognitive functioning. The deficits for clients at this level are primarily cognitive, either temporary or permanent. The clients in this level of care have needs that are more intensive and therefore, to benefit effectively from services, they must be provided at a slower pace and over a longer period of time. The client's level of impairment is more severe at this level, requiring services be provided differently in order for maximum benefit to be received.

**ASAM Level 3.5:** Clinically Managed High-Intensity Residential Services: These programs are designed to treat clients who have significant social and psychological problems. Treatment is directed toward diminishing client deficits through targeted interventions. Effective treatment approaches are primarily habilitative in focus; addressing the client's educational and vocational deficits, as well as his or her socially dysfunctional behavior. Clients at this level may have extensive treatment and/or criminal justice histories, limited work and educational experiences, and antisocial value systems. The length of treatment depends on the individual's progress. However, as impairment is considered to be significant at this level, services should be of a duration that will adequately address the many habilitation needs of this population. Very often, the level of impairment will limit the services that can actually be provided to the client resulting in the primary focus of treatment at this level being focused on habilitation and development, or re-development, of life skills. Due to the increased need for habilitation in this client population, the program will have to provide the right mix of services to promote life skill mastery for each individual.