

LIVINGSTON WASHTENAW SUBSTANCE ABUSE ADVISORY COUNCIL

Monday, February 26, 2007
555 Towner, Ypsilanti, MI 48197

MEMBERS PRESENT: Sally Amos, Glynis Anderson, Peggy Comstock, Therese Doud, Jane George, Suzanne Gondek, Anne King-Hudson, Cassandra McCallister, Mark Robinson, Marci Scalera, Ruth Shabazz, Ted Westmeier, Paul Wojewuczki,

MEMBERS ABSENT: Jenna Bacolor, Terri Beadlescomb, Lacy Horne, Jack LaBelle, Beth Glover Reed, Anne Savickas, Sharon Sheldon

G. Anderson called the meeting to order at 9:00 a.m.

I. Review of Agenda

1. The council was informed that Jack L. is resigning and recommends that Mark R. be accepted in his position. Bylaws state that a quarter of the members must be providers and with Lacy that would be 4 out of 12. Cassandra McCallister has joined the council. Suzanne will be taking minutes for the council and the Provider Relations Unit (PRU) staff will be invited as needed.

II. Review of Minutes from 11/27/06

1. There were no minutes from the retreat. Ted has notes we will use and Marci will send with attachment updates.
2. Positions held will be Glynis (Chair), Ted (Vice Chair) and Terri (secretary)
3. Correction in section IV to change acronym to HARC.
4. Motion by Anne King Hudson, supported by Peggy Comstock to accept November 2006 minutes with correction.

III. SPF/SIG Presentation

1. SPF/SIG presentation by Jane George and Therese Doud. A quick overview was given for new members. The Strategic Prevention Framework (SPF) with State Incentive Grant (SIG) focuses on prevention and treatment for underage drinking with a grant funded program from the state. Each state obtains data differently; we mirror the state's process to produce information. The rollout assessment planning was discussed with handout examples showing web sites with a variety of resources and a funnel diagram. The committees charge would be to analyze all data, set up a data matrix, prioritize issues and then send to the state for approval. It may be that identifying issue to focus on will become more aware to us through the initial data research. Marci heard in previous meetings that we will have to work on traffic fatalities and then we can choose other issues of priority. *The timeframe for the turnaround from the state will only be three (3) to four (4) months and at this time we do not know when the information will come from the state. Given this short turnaround time the committee(s) and workgroups needs to start collecting data now; qualitative data will be a start and an important part of getting to that data. A list of possible community members has been started: the court systems, law enforcements, parents from each county, hospital representation, local universities, and "gems" in the community.

- ◆ Committee members should email Jane G. on other possible issues to add to the list and any other information that would be helpful.
- ◆ Jane will email a draft letter for review.

The state will fund a number of Counties and specific issues and close technical assistance to work on the specific issues. Our surveys can be geared as indicators to back up our data.

IV. **State Updates – Marci**

1. SA would not be receiving a funding cut this year which will allow work at the shelter to continue, but if there are changes then we probably will have to cut areas. The PA2 money can be used for prevention and other service level program needs. Unless there is a massive cut, we don't foresee any funding changes. There may be cuts in Medicaid budget due to eligibility of the state wide plan, but we won't know until state government updates us on Medicaid. If the state stops the spending on the general fund, as with substance abuse fund, of the maintenance from past to now the overall block grant will be reduced. So far substance abuse funds have been flat, but the general fund budget may become an issue for us...however, it looks like we will be o.k.
2. There is a new initiative through MASACA to look at outcomes of Intensive Outpatient Programs (IOP's) and their effectiveness.
3. The early intervention and peer recovery/mentorship technical assistance document is being worked on by committee. Several programs have been looked at. The Detroit Recovery Project is similar to our Full Circle program in Washtenaw County. The "peer recovery model" is one that the state is looking at. There is a comparison to the mental health certified peer recovery specialist, but there are some differences with substance abuse. Full Circle is consumer run with some technical assistance from staff with open hours being Monday through Friday from 8:00a.m. to 3:00p.m. Consumers help each other to work on building skills, getting their GED, job applications, computer training and support groups with focus on socialization.
 - ◆ The Methadone group is looking at opiate replacement therapy (ORT) and has made recommendations to MASACA. A special training module is being looked at for those working in an ORT program to ensure they meet competency standards. The state has been asked to consider ORT as needing special certification. Finally, there is some focus on looking at developing a state wide survey of who is using buprenorphine (Suboxone) and whether is it being used as a longer treatment instead of just for detox.

V. **Local Updates - Marci**

1. Recovery access program workgroup made recommendations that we need transitional housing, case management module and a recovery access center. A finished report will go to the blueprint committee will address areas of:
 - ◆ Planning for 'what we want in Washtenaw County'; this short term model would have intoxicated persons go to the center instead of the hospital emergency room, hopefully move into treatment, as well as connect with recovery within the community.
 - ◆ Work with hospitals/doctors who are key stakeholders to fund the program.
 - ◆ Develop a budget using savings from the diversion of consumers to the center from the emergency rooms. Other contributors might be HVA, WCHO and see if the County can give us some space.
2. ACCESS has decided not to refer anyone to Brighton hospital unless they are a Livingston county resident because no more than 5 WCHO clients total will

be admitted at any one time. Transitional housing issue is going to need a lot of work.

3. March 1st the ACCESS department will shift to CMH and be funding a part time position there; a flyer has been created. This will expand the impact of coverage and provide cross training for mental health staff. The Livingston CMH jail diversion representative will also serve on the drug court.

VI. Prevention Update

1. Therese gave reminder and has sent notice of the March 14th training. Offered that prevention group can talk about *REALITY CHECK*, staff with the public health program if anyone is interested to raise awareness in the community contact Therese or Michelle.
2. Lincoln schools have life skills program that has changed the atmosphere and improved the attitude throughout the school learning and accepting others who struggle with fitting into society. They have a video that is shown through time and the help kids to make decisions and skills to use. Students are saying they want more and are bored at school. They had a fund raiser and gave gifts to SOS, and to the family with fire a few weeks ago.

VII. County-Specific Committee Updates

1. Anne – Monday a meeting is scheduled with Mark and the same issues we discussed here will be the focal points of the meeting. In the next few meetings we will be looking at the work we did last year and decide on the direction and action to take. We will set up stages of changes, matrix and what is available and look at the needs in the County and what we need to do.
2. Ted – The prisoner reentry will be placed in Oakland County and there are two subgroups to work on issues
3. Marci – One building of Jackson prison will be closed and those prisoners will be shifted, released, moved.
4. There is an expressed interest in substance abuse by Washtenaw County Commissioners who have asked to meet with Marci. They have been working with Donna Sabourin have supported funding to CSTS for jail diversion and want to know how they can help us.
5. Marci - The Washtenaw group in regards to the prevention side came together with a goal to gather information from grass roots groups and coalitions for their thoughts and objectives.
 - ♦ Put on a 'come together' for community groups and coalition that are interested in substance abuse. Bring together to identify issues of importance and offer assistance to them.
 - ♦ See what groups are out there in the community that could use our help and support. While we gather information for what they are doing we could possibly encourage further collaboration/mergers and work together. Bring someone to do technical assistance on how coalitions get their jobs done.
 - ♦ Visibility presentations would be helpful and a calendar is being set up. We want to increase the impact and support we can give the community as the Coordinating Agency, and increase awareness
 - ♦ Consumer speakers can be introduced to a professional to offer help and support.

VI. Other items

1. **Committee assignments (handout)**

- ◆ Visibility – Anne K., Glynis, Paul, Marci, Rhonda, Cassandra
- ◆ Data Evaluations – Ted(chair), Jane, Alias, Peggy, Julie, Terry, Marci
- ◆ Work force development – Marci, Therese, Beth(may resign)
 - Focus on evaluation training
- ◆ Systems(new) - Glynis, Mark(chair), Marci, Ruth
- ◆ Prevention - Marci, Therese(chair)

2. Items for follow-up:

- ◆ Marci will check with Anne Savakis to see which committee she would like to join.
- ◆ Marci will contact Bob Collier to see if it would help to have Lacy attended the Washtenaw group and the council.
- ◆ Mark could be part of a committee if his appointment occurs.
- ◆ Each committee needs to get a structured work plan using same template.
- ◆ Some members may be pulled into the Prevention Committee.
- ◆ Visibility will help to recruit more members. If we get the information out there, we'll get feedback, find out who is interested; the more the better. It will help to give trainings and then those people will be able to present to others.
- ◆ Provider Surveys are being conducted by student via phone. He has reached several non-contracted agencies. This info will go first to the Evaluation committee when completed.
- ◆ Marci will send out email to work groups to initiate setting up their meeting times and schedules. Part of Marci's work plan is to participate in the above committees. She will share her work plan with the council.
- ◆ Glynis will get Mark caught up on schedules.

3. **Licensing:** Marci stated a new request for new Substance Abuse License was received from, Burns & Burns Psychotherapy & Counseling Services in Brighton. They have marked off all areas of service on the application and appear to be a private practice that is not accredited. We have reviewed the application and will notify the state. Personalized nursing also has a new license for outpatient peer support and case management license.
4. **Finances:** Marci updated the council on the management of treatment services dollars. With the cold weather the CA has intentionally caused an over budget spending and will pull back dollars to balance as necessary. The percentage of consumers is greater than last year, more coming in, engaging and getting treatment. The budget is being monitored carefully. Marci will provide updates.
5. **Prevention:** Therese updated that the providers using the grants website for reporting has gone through refresher training. We are in the process of working on gathering and analyzing data, and accurate reports for listed programs.
6. **Other:** Mark wanted to bring to light the importance of speaking opportunities, visibility and networking a wide variety of groups. Cassandra stated she was interested.

VII. Pending Issues/Follow-up

1. Marci would like assistance in setting up meetings
2. Work group tasks completed before March 26th SAAC meeting

- ◆ Outline of work plan for each work group
- ◆ Have at least one meeting
- ◆ Standing meeting updates at each monthly meeting

XII. Adjournment at 11:00 a.m.

March 26th SAAC meeting at Livingston