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Webinar on Resources Available to Mental Health Providers via GLMHTTC Announced

As the readers of the Weekly Update may remember, the CMH Association of Michigan is the Michigan link/partner to the Great Lakes Mental Health Technology Transfer Center (GLMHTTC). GLMHTTC is part of a national network funded by SAMHSA to provide training and technical assistance (TA) to mental health treatment providers in Health and Human Services Region 5, which covers Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin.

The GLMHTTC invites you to join their introductory webinar to learn more about the GLMHTTC team, the structure of the Center, and regional training and TA needs. Hear more about our supplemental initiative focused on school-based mental health will also be presented. You will also learn how to access training and TA through your state provider association.

The webinar is scheduled for:
April 9
12:00 noon EST
Register at: https://mhttcnetwork.org/centers/great-lakes-mhttc/welcome-great-lakes-mhttc-webinar

St. Clair CMH Announces 11th Annual Healthy Minds Run

The 11th annual Healthy Minds, Healthy Bodies, Run for Recovery will be held on Saturday, May 11th at the SCCCMH Building located at 3111 Electric Avenue in Port Huron. Each year St. Clair County Community Mental Health (SCCCMH) host the annual 5k run/1 Mile Walk/1 Mile Timed run for kids. This event is one of the many ways our agency works to draw attention to the connection between good mental and physical health. Funds raised at this year’s event will benefit local non-profit organizations that share our commitment to improving the health and wellness of our community. Awards will be given to the top 5 finishers in each age group for the 5k and 1 Mile Times Kids Run, male and female.

For more information and to register please visit: https://scccmh.org/events/run-for-recovery/.
News from Our Corporate Partners:

Abilita Provides Story Highlighting Risk of Ransomware Attacks

Below are excerpts from a recent news story, provided by Abilita, a corporate partner of the CMH Association, that underscores the risks of ransomware attacks on healthcare providers.

**Michigan Practice to Shutter after Hackers Delete Patient Files**

The owners of Brookside ENT and Hearing Center have decided to retire early following a ransomware attack, where they refused to pay the ransom, and the hackers deleted all patient data.

The full story can be found at: [https://healthitsecurity.com/news/michigan-practice-to-shutter-after-hackers-delete-patient-files?fbclid=IwAR3RFfc_cQmChCOMhsbWClA3qKTPoCYMyV58_1IMzh8MD42GzFs6iWPq](https://healthitsecurity.com/news/michigan-practice-to-shutter-after-hackers-delete-patient-files?fbclid=IwAR3RFfc_cQmChCOMhsbWClA3qKTPoCYMyV58_1IMzh8MD42GzFs6iWPq)

State and National Developments and Resources:

Report Cites $150M Gap in Mental Health Funding

Below are excerpts from a recent article in MIRS, one of the two pre-eminent capitol news outlets, underscoring the systemic underfunding of Michigan’s public mental health system.

There’s a $150 million gap between the cost of health care and what’s provided to Michigan’s public mental health system, according to a recent analysis released by the Community Mental Health Association of Michigan (CMHAM).


Among the recommendations include restoring General Fund dollars to the system, setting Medicaid rates to match demands and costs, and removing the local match draw-down obligation from budget boilerplate. CMHAM sees these changes and others as ways to modernize the funding system.

“There are new demands, new crises and new conditions in every community throughout Michigan, which the original financing structure did not account for,” said CMHAM CEO Robert SHEEHAN, in a statement. “These include the opioid crisis, incarceration of those with mental health needs, the recognition of the prevalence of autism, increased homelessness and more -- yet the system is still operating from a decades-old funding structure.”

Only 4 percent of the funding provided to the CMH system is available to serve Michiganders without Medicaid who need mental health services, according to the CMHAM press release.
"Lawmakers and community members may argue the public system has been functioning well despite funding gaps, but CMHAM warns that the current underfunded system is not sustainable long-term,” according to the release.

CMHAM believes its recommendations would pave the way to stemming homelessness, poverty, incarceration and the premature death of Michiganders with intellectual and developmental disabilities, mental illness, and substance use disorders.

**Report: Michigan Shorts Mental Health Industry by $150 Million Annually**

Below is an excerpt from a recent article, in Crain’s Detroit Business, highlighting the gap in funding for Michigan’s public mental health system

- Report by mental health providers calls for increase in funding
- Underfunding, increased demands have led to more homelessness, poverty, incarceration and unnecessary deaths
- Pilot studies to test theory that integration of physical and mental health can save costs, expand care

Increased homelessness, poverty, incarceration and deaths are predicted in Michigan by a new report that concludes there is a $150 million gap between the cost of health care and the funding provided to the state’s $2.8 billion-plus public mental health system.

The study, which was commissioned by the Community Mental Health Association of Michigan, outlines several major changes in the population served since the current managed health care funding model was established in 1997.

Besides the opioid crisis — which resulted in more than 1,700 deaths in Michigan in 2016 alone and tens of thousands of addictions — the increased rates of incarceration of those with mental health needs and autism have caused many more problems within the system and society, the report says.

"Michiganders do not face the same mental health and substance use disorder needs that they had 20 years ago,” Robert Sheehan, the mental health association’s CEO, said in a statement. “There are new demands, new crises and new conditions in every community throughout Michigan, which the original financing structure did not account for. ... yet the system is still operating from a decades-old funding structure. This is the reality that the public mental health system in Michigan has faced for decades.

"Without moving toward the ambitious vision outlined by the association and addressing this outdated funding structure, Michiganders will continue to live without the mental health care that they need and expect.”

Sheehan outlined five recommendations in the report to address unmet mental health and substance use disorder needs:

- Set Medicaid rates to match demands and costs. Medicaid rates account for 90 percent of the system’s funding.
- Mandate Medicaid rates include contributions to risk reserves. Because of rising demand, some mental health organizations have drawn down reserves to the point where they are structurally insolvent.
- Allow for the public mental health system to hold sufficient risk reserves. Mental health agencies are not allowed to retain Medicaid savings that they generate through efficiencies and effective clinical practices.
- Remove the obligation to match state funding with local dollars to cover the gap between mandated Medicaid funding and the actual cost of care.
• Restore general fund dollars to the public mental health system. Since 2014, the state has cut general funding from agency budgets to allow people not covered by Medicaid to have access to mental health services.

The full article can be found at: https://www.crainsdetroit.com/health-care/report-michigan-shorts-mental-health-industry-150-million-annually

CMH Association Develops Focused Graphics Outlining the Causes and Solutions to the Underfunding of Michigan’s Public Mental Health System

Recently, the Community Mental Health Association developed two infographics which depict, with clarity and focus, the components of the problem and solutions to the systemic underfunding of Michigan’s public mental health system. These infographics can be found at:


Opinion | Hiring Workers with Autism is Good Business, Not Charity

Below are excerpts from a recent editorial in Bridge magazine, from Brian Calley, President of the Small Business Association of Michigan and former Lieutenant Governor, on the value of hiring persons with autism.

Imagine this: You sit down for a job interview, wearing a pressed suit or dress, every hair in the right place. Big smile, ready to talk about the skills that make you right for the position. As the interviewer begins, he looks up and says, “Let’s talk about your weaknesses. Why aren’t you a very good writer? Why should I have to deal with this problem at my company?”

For many, this might seem unthinkable. However, for someone with autism attempting to enter the workforce, this is exactly the reception they receive. While we build our lives to highlight individual strengths, too often people with autism are immediately and unfairly judged by their perceived shortcomings. It is time to change our view and tap into this highly-skilled workforce. Michigan can’t afford to leave these passionate and talented people behind.

The full editorial can be found at: https://www.bridgemi.com/guest-commentary/opinion-hiring-workers-autism-good-business-not-charity

Nonopioid Directive Form Helps Fight Opioid Epidemic by Allowing Patients to Notify Health Professionals They Don’t Want Opioids

Below is a recent press release from MDHHS regarding another tool in the state’s efforts to combat the opioid epidemic.

Patients can now fill out a state form that directs health professionals and emergency medical services personnel to not administer opioids to them.

Today the Michigan Department of Health and Human Services (MDHHS) made the nonopioid directive form available to the public on its website in response to a new state
The nonopioid directive is part of the State of Michigan’s multifaceted plan to address the opioid epidemic.

“This law helps ensure nonopioid options to pain management are considered in the medical treatment of Michigan patients,” said Dr. Debra Pinals, MDHHS medical director of Behavioral Health and Forensic Programs. “Providing this supportive tool for patients to notify their health professionals that they are seeking alternatives for pain treatment is critically important for those who are most at-risk of misusing opioids, including those with a history of an opioid disorder.”

A link to the directive form can be found under “Additional Resources” at the bottom of the “Find Help Page” on Michigan’s Opioid Addiction Resources website, www.michigan.gov/opioids, along with other information.

The nonopioid directive can be filled out by the patient or a person’s legal guardian or patient advocate. Once submitted, the directive must be included in the patient’s medical records. There are exceptions in the law, such as a provision that a prescriber or a nurse under the order of a prescriber may administer an opioid if it is deemed medically necessary for treatment.

Public Act 554 of 2018 amended the Public Health Code to provide for the form and required MDHHS to make it available on its website by today.

Michigan has been significantly affected by the national opioid epidemic. The number of annual opioid-related overdose deaths in the state have more than tripled since 2011, from 622 to 2,053. As part of the state-government-wide plan to address the issue, MDHHS has developed an action plan that is focused on prevention, early intervention and treatment.

**Latest on Michigan-Based Efforts to Ensure Access to Medications for Persons With Mental Illness or Epilepsy**

Below is a recent communication, from Mark Reinstein, of the Mental Health Association in Michigan and Brianna Romines, with the Epilepsy Foundation of Michigan, regarding the most recent advocacy work, led by their associations, to ensure open access to psychiatric and epilepsy medications for Michigan’s Medicaid enrollees.

This is to update you on where matters stand in the continuing effort to protect access to Medicaid prescriptions for vulnerable state residents with certain chronic conditions. You have supported this effort in the past, and we are grateful. We expect there will be opportunities for sign-on support in the near future, and we look forward to getting you materials for sign-on soon. If you no longer wish to receive them, please let us know.

Since 2004, thanks to former Sen. Hammerstrom’s law, Medicaid FFS prescriptions for mental health (including substance use disorder), epilepsy, HIV-AIDS, organ replacement, and cancer have been freed from coming under prior authorization and step therapy requirements.

Although a last-minute change to that law exempted Medicaid Health Plans, MDHHS policy since then has carved out these medications (excepting cancer) from the Health Plans, with the state retaining responsibility for them and following the parameters of PA 248 of ’04. The advent of the state’s 2015-16 Common Formulary for Medicaid HMOs did not change this.
More recently, there has been budget boilerplate the last three years that, across all of Medicaid, the protections remain in place for mental health, epilepsy, HIV-AIDS and organ replacement therapy drugs that were being protected as of May 2016.

Gov. Whitmer’s proposed MDHHS budget for FY-20 would continue this language. We are supporting this and seeking to have the October 2016 qualifier removed or replaced with a later date.

We are also exploring possible sponsors for a statutory bill that would remove the exemption of Medicaid Health Plans from Sen. Hammerstrom’s 2004 law. Doing so would be consistent with recommendations from the MDHHS Section 298 Facilitation Workgroup and a special task force on psychotropics that was required by the Legislature and has issued its report. Last year, then-Senator O’Brien introduced SB 823 to do this. It received one non-voting hearing from the Senate Health Policy Committee. We will have something similar introduced for this session of the Legislature.

We’re most appreciative of all you’ve done on this over the years. Against difficult odds, your support has helped us prevail on the issue for 15 years. We intend to keep it that way, and to settle this completely in state statute.

You can reach Mark at 734-646-8099 or msrmha@aol.com. For Brianna, it’s 248-351-7979 or bromines@epilepsymichigan.org

State Legislative Update:

House Upcoming Budget Hearings

1. House Health and Human Services subcommittee of the Standing Committee on Appropriations Rep. Mary Whiteford, Chair

   DATE: Monday, April 8, 2019
   TIME: 1:00 PM
   PLACE: Room 352, House Appropriations, State Capitol Building, Lansing, MI

   AGENDA: Public Testimony on the FY 2019-20 Executive Budget Recommendation for the Department of Health and Human Services

   OR ANY BUSINESS PROPERLY BEFORE THIS COMMITTEE

2. House Health and Human Services subcommittee of the Standing Committee on Appropriations, Rep. Mary Whiteford, Chair

   DATE: Thursday, April 11, 2019
   TIME: 1:30 PM or after committees are given leave by the House to meet, whichever time is later.
   PLACE: Room 352, House Appropriations, State Capitol Building, Lansing, MI

   AGENDA: Department of Health and Human Services Presentations:
Whitmer Won’t Sign Budget Without Road Funding Fix

Gov. Gretchen Whitmer said this week she will not sign any FY20 spending plan that doesn’t include a road-funding piece, a response to House and Senate Republicans ranking road funding third on their 2019 session priority list behind auto-insurance reform and the budget. Senate Majority Leader Mike Shirkey (R-Clarklake) said last week that the road funding issue and the budget process are separate, as far as the Senate Republicans are concerned.

"People need to prepare to work here and stay here until the job is done because that budget is absolutely interlinked," Whitmer said. "Our ability to fund our education system, to clean up drinking water is linked with our ability to rebuild roads in this state. So, I’m not signing anything until it’s all done together.” Asked if this meant this could put state government into a potential shutdown-like situation, Whitmer said, "We’re not going to shut down because we’re going to stay working here all summer long to get this done. "I am serious about it. The people of the state elected me because I believe they want me to fix the damn roads. They want honesty in budgeting. They want real solutions, not half measures and shell games and that’s exactly what I put on the table."

An answer doesn’t have to be a 45-cent-a-gallon gas tax, she repeated. If their alternative gets the state $2.5 billion in additional funding on a yearly basis for the next 10 years, "I’m all ears. But until then, let’s get serious about talking about my budget and getting it passed to fix these problems."

The scenario Whitmer is trying to head off is the Republicans sending her an FY20 spending plan with possibly some additional road-funding dollars, but nothing close to $2.5 billion. Under the 2015 road-funding plan, the state is required to put in $325 million in additional income tax money into the roads.

Federal Update:

Court Blocks Medicaid Work Requirements in Arkansas, Kentucky

On Wednesday, a district court judge issued a pair of decisions blocking Medicaid work requirements in Kentucky and Arkansas. Consistent with an earlier ruling, the court found that the federal government had failed to justify how adding employment requirements advanced Medicaid’s central statutory objective to provide medical assistance to the state’s citizens. The impact of the ruling is likely to extend beyond these two states and complicate Trump Administration plans to expand Medicaid work requirements more broadly.

IMPLICATIONS

While Judge James Boasberg’s ruling applies only to Kentucky and Arkansas’ programs, his reasoning for overturning the Centers for Medicare and Medicaid’s (CMS) decision to approve these initiatives could extend to the other seven states that CMS has approved for work requirements in addition to the seven other states whose waiver applications are currently being reviewed by the federal government. Joan Alker, head of Georgetown’s Center for Children & Families, told Politico, "The judge’s ruling is a wake-up call for states considering work requirements or other barriers to coverage in Medicaid."

Although the decision did not outlaw Medicaid work requirements outright, it makes clear that the Department of Health and Human Services (HHS) Secretary does not have unlimited authority to approve waivers or “refashion the program Congress designed in any way they choose.” In other words, as Joan Alker explains “Medicaid was designed by Congress to be a health insurance program for low income people and the Trump Administration can not arbitrarily change that.”
WHAT’S NEXT?

HHS must now reevaluate Kentucky and Arkansas’ waiver approvals and decide whether they will seek an appeal. As a result, HHS may hold off on announcing any additional work requirement approvals — and states may wait to submit their requests — until this legal battle reaches its conclusion.

Kentucky Gov. Matt Bevin (R) has threatened to reverse the state’s Medicaid expansion if his Medicaid reforms do not survive legal challenges.

Education Opportunities:

Practicing Effective Management: A Two-Day Training for Improving Relationships and Results

TBD Solutions is hosting its next Practicing Effective Management Training May 8th & 9th at the Grand Rapids Chamber of Commerce. This training provides practical guidance for enhancing relationships and improving results through structured supervision, effective feedback, delegation, interviewing, time management, and employee development. This dynamic, interactive training is relevant for all levels of management.

Since 2016, TBD Solutions has proudly trained over 250 supervisors, managers, and directors from CMHs, PIHPs, and nonprofit organizations, maintaining a 98% satisfaction rate.

Cost for this two-day training is $500, and lunch is provided. Group discounts are also available.
To learn more or register for the training, visit www.eventbrite.com/e/practicing-effective-management-training-registration-58010345505. For questions about the training, email training@TBDSolutions.com.

Pain Management Training for Social Work Professionals – Required for Licensure Renewal

Community Mental Health Association of Michigan Presents: 2-HOUR TRAINING: PAIN MANAGEMENT AND MINDFULNESS. This course qualifies for 2 CEs and fulfills the Michigan Social Work Licensing Board’s requirement for licensure renewal for pain management.

April 25, 2019 - 9:00am – 11:00am (registration at 8:30am)

Location:
Community Mental Health Association of Michigan at 426 S. Walnut, Lansing, Michigan 48933

Training Fee: (includes training materials)
$39 CMHAM Members
$47 Non-Members

To Register: Click Here to Register for the April 25 from 9-11 Training!

Dialectical Behavior Therapy (DBT) Trainings for 2018/2019

5-Day Comprehensive DBT Trainings
• This training is designed for CMH, CMH service providers, PIHP, and PIHP service provider staff who are directly responsible for delivering DBT.
• Due to the fact DBT is a comprehensive treatment that treats high-risk individuals, one’s core training ought to be comprehensive as well.
• IT IS EXPECTED THAT ALL PARTICIPANTS WILL MAKE A FULL COMMITMENT TO ATTEND ALL 5 DAYS mindfully and will participate fully in discussion, role-plays and complete daily homework assignments.
• Participants are asked to bring a copy of “Cognitive Behavioral Treatment of Borderline Personality Disorder” by Marsha Linehan, PhD, with them to the training.
• COMPLETION OF A 2-DAY INTRODUCTION TO DBT TRAINING OR EQUIVALENT IS A PRE-REQUISITE FOR ATTENDING THIS TRAINING.
• This is NOT a training that teaches DBT skills. There will be very little focus on DBT skills. The majority of the focus of this training will be to help clinicians on how to conduct individual DBT sessions. If your goal is to come to this training in order to learn DBT skills, do not attend. By attending, you understand and consent to knowing this ahead of time.

Training Fee:
$250 per person. Fee includes training materials, continental breakfast and lunch for 5 days.

Dates/Locations:
May 20-24, 2019 | Detroit Marriott Livonia | REGISTER HERE
June 3-7, 2019 | Best Western, Okemos | REGISTER HERE
August 12-16, 2019 | Great Wolf Lodge, Traverse City | REGISTER HERE

Implementation of Integrated Dual Disorder Treatment (IDDT) and Co-Occurring Evidence-Based Practices Annual Trainings for 2018/2019

Course Description:
Adults with co-occurring mental illness and substance use disorders have far worse outcomes in employment, hospitalization, housing, and criminal justice involvement than their single disordered peers. This co-prevalence has been studied since the 1980s, yet despite this substantive increased risk, most service systems were organized to treat individuals with a single disorder, excluding those with co-occurring disorders, or providing sequential or parallel treatments that were incompatible or in conflict with each other. Integrated services offer superior outcomes to parallel or sequential treatments and call on providers to develop interventions to assist individuals in moving toward recovery for both illnesses simultaneously. Recovery-oriented care requires changes at a systems and individual practitioner level in areas including assessment, treatment planning, and delivery. Integrated co-occurring providers will learn about the research on integrated care including evidence-based practices (EBP), and ways to develop stage-matched assessment, treatment planning, and treatment interventions for adults with co-occurring mental health and substance use disorders.

This training fulfills the annual requirement for persons who are part of an IDDT team, as well as for persons providing COD services in Adult Mental Health outpatient services.

Training Fee:
$65 per person. The fee includes training materials, continental breakfast and lunch.

Dates/Locations:
April 26, 2019 | Hotel Indigo, Traverse City | REGISTER HERE
June 19, 2019 | Okemos Conference Center | REGISTER HERE
Motivational Interviewing College Trainings for 2018/2019

4 Levels of M.I. Training offered together at 4 convenient locations!

This event is sponsored by the adult mental health block grant and is intended for persons who serve adults only through the mental health and substance abuse provider network in the state of Michigan. It contains content appropriate for CEOs, COOs, clinical directors, supervisors, case managers, support coordinators, therapists, crisis workers, peer support specialists and any other practitioners at the beginning, advanced and supervisory levels of practice.

New This Year! We are excited to add a new 2-Day TNT: Teaching Motivational Interviewing training to the lineup.

Remaining Dates/Locations:
June – Holiday Inn Marquette
  Basic: Monday & Tuesday, June 10-11, 2019
  Advanced: Monday & Tuesday, June 10-11, 2019
  Supervisory: Monday, June 10, 2019
  TNT: Teaching MI: Wednesday & Thursday, June 12-13, 2019

Training Fees: (The fees include training materials, continental breakfast and lunch each day.)
$125 per person for all 2-day trainings (Basic, Advanced
$69 per person for the 1-day Supervisory training.

CLICK HERE for full training details, CE information, overnight accommodations and registration links.

Register Now for Fetal Alcohol Spectrum Disorder Trainings

Register now for three Fetal Alcohol Spectrum Disorder Trainings with presenter Dan Dubovsky, MSW – a National FASD Specialist. Registration online at www.cmham.org - We have 300 training spaces available.
  May 6 – Mackinaw City
  May 8 – Ann Arbor
  May 9 – Kalamazoo

Individualized Service Plans Using the ASAM Criteria and Motivational Interviewing Trainings

- April 30-May 1, 2019 – Drury Inn & Suites, Grand Rapids
- June 18-19, 2019 – Holiday Inn, Marquette
- July 16-17, 2019 – Best Western/Okemos Conference Center, Okemos
- August 13-14, 2019 – Hilton Garden Inn, Detroit
- August 27-28, 2019 – Radisson Plaza Hotel, Kalamazoo
- September 24-25, 2019 – Great Wolf Lodge, Traverse City

Visit www.cmham.org for more information.

SAVE THE DATE: 20th Annual Substance Use and Co-Occurring Disorders Conference

- September 15, 2019 - Pre-Conference Workshops – Cobo Hall, Detroit
- September 16-17, 2019 – Cobo Hall, Detroit
CMHA WEEKLY UPDATE

Ethics for Social Work & Substance Use Disorder Professionals Trainings for 2018/2019

Community Mental Health Association of Michigan is pleased to offer 6 Ethics for Social Work & Substance Use Disorder Professionals Trainings presented by Tom Moore, LMSW, LLP, CCS, Owner and Principal, Two Moons, LLC.

This training fulfills the Michigan Social Work Licensing Board’s requirement for licensure renewal for ethics. This training fulfills the MCBAP approved treatment ethics code education – specific.

Trainings offered on the following date.
- April 24 – Troy Click Here to Register for April 24

Training Fees: (fee includes training material, coffee, lunch and refreshments.
- $115 CMHAM Members
- $138 Non-Members

Writing Quality and Comprehensive Behavioral Support Plans

The Writing Quality and Comprehensive Behavioral Support Plans training will be held April 12, 2019 at the Holiday Inn Express & Suites, Gaylord. This training is intended for practitioners who are responsible for writing behavior support plans through a functional analysis, as well as members of behavior support committees who are responsible for reviewing plans. Registration fee is $45 per person. Must be pre-approved to attend. Click here to get application form and information.

Eye Movement Desensitization and Reprocessing (EMDR) Trainings

Trauma Recovery/EMDR Humanitarian Assistance Programs presents Eye Movement Desensitization and Reprocessing (EMDR). EMDR Basic Training consists of Weekend I and Weekend II Training. Each training event is three days of didactic and supervised practice. To complete Trauma Recovery/HAP’s EMDR Training, each participant is required to complete 10 hours of consultation. Each participant/agency must arrange for consultation hours on their own, through the HAP Consultant Directory. Location of Training: Kellogg Hotel and Conference Center, 219 S Harrison Rd, East Lansing, MI 48824
Dates: May 16-18, 2019 (Thursday-Saturday). Registration: 8:00am-8:30am and Training: 8:30 a.m. to 5:00 p.m. Part II – Dates to be determined by the group
Cost: $150.00 fee for Part I (fee does not include consultation and books). The fee for each staff person is $300 (which includes Part I and Part II). Both Part I and Part II are required to be completed as part of the training. Participants will be responsible for own hotel/mileage and some meals. The average range consultants tend to charge is between $25 to $50 per person per group consultation hour; and between $50 to $100 per person for individual consultation hour. If interested in EMDR, please email awilson@cmham.org

35th Annual Developmental Disabilities Conference

The Annual Developmental Disabilities Conference will focus on issues related to healthcare, social, community, and educational services which are of critical importance to the future of persons with DD. The program will provide an overview of issues related to the spectrum of services currently available as well as strategies for enhancing these services. This educational program is designed for physicians, nurses, psychologists, social workers, therapists, dietitians, educators, home care providers, and other professionals interested in the delivery of care and services to persons with developmental disabilities.

For more information, please contact Courtney Puffer. Courtney.Puffer@med.wmich.edu or (269) 337-4305

Date & Location
Objectives
- Identify effective methods for the practical application of concepts related to improving the delivery of services for persons with developmental disabilities.
- Identify advances in clinical assessment and management of selected health care issues related to persons with developmental disabilities.
- Discuss the ethical issues related to persons with developmental disabilities.
- Identify and emphasize attitudes that enhance the opportunities for persons with developmental disabilities to achieve their optimal potential.
- Develop strategies to promote community inclusion in meeting the needs of persons with developmental disabilities.

REGISTRATION FEES
When registering please use your personal log-in to access your CloudCME account. If you do not have an account, you must create one using your email. If you have trouble navigating this process, please do not hesitate to contact the Conference Coordinator.

- Early Bird Discounts, postmarked before March 1:
  - $185, Tuesday Only; $185, Wednesday Only; $245, Two Days, entire conference
- Regular Registration, postmarked March 1-31:
  - $205, Tuesday Only; $205, Wednesday Only; $260, Two Days, entire conference
- Late Registration, postmarked after April 1 or onsite:
  - $230, Tuesday Only; $230, Wednesday Only; $280, Two Days, entire conference

By registering, you agree to the terms of our photo release policy listed under Conference Info. By registering, you also agree to the current cancellation policy listed below. Your confirmation email will be sent via email. Attendees must log-in to register - if you have issues logging-in, please contact ce@med.wmich.edu for assistance. All cancellations must be received in writing email, and are subject to a 10% cancellation fee. If you cancel with 1-6 business days notice, between April 8th and April 15th, you will receive a 50% refund. No refunds will be issued after the conference begins. Send cancellation notices to ce@med.wmich.edu.

2019 Michigan ACE Initiative Conference

WHEN: May 23, 2019 from 10:00 a.m. to 3:00 p.m.
WHERE: Eagle Eye Banquet Center, 15500 Chandler Road, Bath, MI
WHAT: The Michigan ACE Initiative was created just over two years ago and has successfully devoted its energy to provide awareness of the impact of Adverse Childhood Experiences in Michigan. While we will continue to create awareness, it is now time to shift the focus of our conversation to the next step—resilience.

Our 2019 conference has been designed with resilience in mind, in a way that is coordinated, based on science and best practices, and one in which local and state synergies are created. Join us to continue to reduce the impact of Adverse Childhood Experience in Michigan.

WHO: Our featured speakers include:
- Christina Bethell, PhD, MBA, MPH, Professor, Bloomberg School of Public Health, Johns Hopkins University and Director, Child and Adolescent Health Measurement Initiative, Baltimore, MD
- Lynn Waymer, Vice President of Community Engagement, KPJR Films, Atlanta, GA
- And the premiere of the Michigan ACE Initiative Video: Resilience
Conference: The Whole Person Care Team

The Capital Area Health Alliance (CAHA) is pleased to announce an educational and networking event on The Whole Person Care Team. This event builds on outcomes of CAHA’s 2018 Forum on Integrating Physical Health and Behavioral Health Services where forum participants expressed their desire for educational opportunities to build awareness and understanding of concepts and strategies that support whole person care.

Our presenter is Christopher G. Wise, MHSA, PhD. To offer care that is centered on the needs of patients and their families, health care teams are examining their practices and implementing improvements. Dr. Wise will discuss why such examination is essential to providing value-based care and describe how practices have undertaken this mission. Issues explored will be practice culture, process redesign, and recognition of the skills and licensure of each team member. Linkages with community agencies and resources are increasingly important to address complex needs, and Dr. Wise will offer examples of how communities and practices are communicating and collaborating with those resources.

Learning Outcome: Participants will demonstrate increased knowledge of how healthcare teams have redesigned processes to provide whole person care and identify how resulting changes can affect cost and quality outcomes.

About Christopher Wise: Dr. Wise’s career has been devoted to working with healthcare providers, payers and purchasers to develop, implement and evaluate new models of healthcare delivery that lead to lower population-based healthcare costs and improved quality outcomes. This includes work with Ford Motor Company and General Motors for innovative insurance products with strong medical and disease management foundations, Blue Cross/Blue Shield of Michigan in support of their nationally recognized ‘Physician Group Incentive Program’, and with more than 200 physician practices from 28 separate physician organizations to facilitate their process redesign using the principles and tools of Lean Thinking process improvement. Dr. Wise has also been a co-investigator on several studies to evaluate the limitations and successes of these newer models of care delivery, resulting in multiple publications in peer-reviewed journals. In 2012, he started his own consulting firm to assist payer, provider and community organizations with implementing innovative models of healthcare delivery and building internal capabilities for continuous improvements. He is passionately committed to assisting visionary leaders with their efforts to improve healthcare.

Event to be held at the following time, date, and location:
Wednesday, April 24, 2019 from 8:30 AM to 10:30 AM (EDT)
Leona Training Center
2123 University Park Drive
Suite 150
Okemos, MI 48864

Register at:
https://www.eventbrite.com/e/the-whole-person-care-team-registration-58389798459?ref=envetefor001&invite=MTYyMjIyNDUvcnNoZWVoYW5AbWFibWhiLm9yZy8w%0A&utm_source=eb_email&utm_medium=email&utm_campaign=inviteformalv2&utm_term=attend
CMHA WEEKLY UPDATE

Miscellaneous News and Information:

Job Opportunity: CEO of Rose Hill Center

Kittleman & Associates is pleased and honored to announce the search for the next President & CEO of Rose Hill Center in Holly, Michigan, and I wanted to make sure that you saw the attached Position Guide.

As one of the nation’s leading long-term mental health facilities, Rose Hill Center in Holly, Michigan offers comprehensive psychiatric treatment and residential rehabilitation programs for adults, 18 and over, on 400 serene acres close to major amenities offered by Ann Arbor and the greater Detroit region. With an emphasis on Recovery, the programs offered by Rose Hill provide individuals with the insights, life skills, attitudes, opportunities and medication management needed to manage their illness and live fulfilling lives. Rose Hill provides five levels of mental health treatment that are supported largely through private pay with financial assistance provided through the Rose Hill Foundation as well as through Community Mental Health (Medicaid) and commercial insurance.  https://www.rosehillcenter.org/

Job Opportunity: Executive Director of Network 180

Network180 is seeking its next Executive Director to direct the management and delivery of a complete array of mental health, intellectual/developmental disability, and substance abuse services to the citizens of Kent County, Michigan. With an annual budget of over $140 million, Network180 annually serves over 18,000 individuals in Kent County through a network of over 30 non-profit providers. Interested candidates can apply through our website at:  http://www.network180.org/en/employment/employment-opportunities.

Job Opportunity: Healthy Transitions Youth/Young Adult Peer Coordinator at ACMH

Association for Children’s Mental Health (ACMH) is currently accepting applications for a Healthy Transitions Youth/Young Adult Peer Coordinator. To apply, mail or email a cover letter and resume to: Jane Shank, Executive Director | 6017 W. St. Joe Hwy, Suite 200, Lansing, MI 48917 acmhjane@sbcglobal.net

To learn more see the complete job posting below or download it here: Healthy Transitions Posting final

CMHAM Officers Contact Information:

The Officers of the CMH Association of Michigan recently proposed, in their commitment to fostering dialogue among the members of the Association with the Association’s leaders, that their contact information be shared with the Association membership. While this dialogue will not take the place of the regular dialogue and decision making that occurs during the meetings of the Association’s Executive Board, Steering Committee, Provider Alliance, Association Committees, Directors Forum, PIHP CEOs meeting, nor any of the great number of Association-sponsored and supported dialogue venues, the Officers want to ensure that the members of the Association can reach them to discuss issues of interest to the Association’s members. The contact information for the officers is provided below:

President: Joe Stone Stonejoe09@gmail.com; (989) 390-2284
First Vice President: Lois Shulman; Loisshulman@comcast.net; (248) 361-0219
Second Vice President: Carl Rice Jr; cricejr@outlook.com; (517) 745-2124
Secretary: Cathy Kellerman; balcat3@live.com; (231) 924-3972
Treasurer: Craig Reiter; gullivercraig@gmail.com; (906) 283-3451
CMHAM Staff Contact Information:

CMH Association staff can be contacted at (517) 374-6848 and via the e-mail addresses below:

Alan Bolter, Associate Director, abolter@cmham.org
Christina Ward, Director of Education and Training, cward@cmham.org
Monique Francis, Executive Secretary/Committee Clerk, mfrancis@cmham.org
Nakia Payton, Data-Entry Clerk/Receptionist, npayton@cmham.org
Dana Ferguson, Accounting Clerk, dferguson@cmham.org
Michelle Dee, Accounting Assistant, acctassistant@cmham.org
Anne Wilson, Training and Meeting Planner, awilson@cmham.org
Chris Lincoln, Training and Meeting Planner, clincoln@cmham.org
Carly Sanford, Training and Meeting Planner, csanford@cmham.org
Bethany Rademacher, Training and Meeting Planner, brademacher@cmham.org
Jodi Johnson, Training and Meeting Planner, jjohnson@cmham.org
Alexandra Risher, Training and Meeting Planner, arisher@cmham.org
Robert Sheehan, CEO, rsheehan@cmham.org