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Searching for past articles in Weekly Update: Weekly Update readers often remember seeing a past article or announcement that they would like to retrieve – but are unable to recall the date of the Weekly Update in which the article or announcement was published.

CMHA has now added a search feature to its website that allows the readers to search within past Weekly Update articles and announcements. This search feature can retrieve articles by key words in the title of the Weekly Update article/announcement. This feature also brings up any other resources, anywhere on the CMHA website, with that key word in their title – a useful feature given that sometimes the CMHA member or stakeholder is unclear as to the source of the information for which they are searching.

This Weekly Update search feature is accessed via the standard “search” box on the CMHA website: <https://cmham.org/> at the top right side of the website.

We hope you find this new feature useful in making the most of the information captured by the Weekly Update.

Note: To aid Weekly Update readers in finding the newest resources, those Weekly Update articles that are new are noted as “**New!**” in the table of contents and in the body of the document.

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CMH Association and Member Activities:

New! CMHA and members attend NACBHDD hill day and conference

Every year, NACBHDD, holds its Legislative and Policy Conference, one of the most resource-rich, intentionally-intimate conferences focused, exclusively, on the nation’s locally-based public mental health systems. The speakers found at the NACBHDD Legislative and Policy Conference, held in Washington DC, are those that you would expect to find at a conference attended by thousands. However, the NACBHDD Legislative Policy Conference brings together a much more focused group of under 100 local and state leaders, such as you, from across the country, to hear nationally renowned speakers, allowing you the opportunity (not available at the large conferences at which you would typically hear such speakers) to interact with those speakers, before, during, and after their presentations. This type of access to this caliber of national speakers is unheard of – expect at the NACBHDD Legislative and Policy Conference.

This year’s NACBHDD’s annual Legislative and Policy Conference in Washington DC ran from March 2-4, 2020 and provided participants with an in-depth look at national policy and practices and those of states from across the country.

The sizeable Michigan contingent came away with many sound practices and concepts that they can apply in their home communities, across Michigan, as well as newly forming relationships with national thought leaders.



As a part of this year's conference, Michigan's Senior United State Senator, Senator Debbie Stabenow, was recognized for her longstanding advocacy for mental health services. Specifically recognized, was Senator Stabenow's leadership of the Certified Community Behavioral Healthcare Centers (CCBHC) – through which a number of CMHA members, who obtained certification as a CCBHC, received a sizeable federal grant award.

At left is a picture other Michigan contingent with Senator Stabenow, immediately after her receipt of the award.

New! CMHA public relations firm recognized as national leader

Below is a recent announcement, from Lambert, the public relations firm with whom CMHA has had a long partnership, regarding their recent recognition as one of the nation's best PR firms.

Thanks to you, we've been named a Top-5 deal PR advisor nationally and Top-10 in the world for M&A Deal Count by Mergermarket. We worked on nearly 100 deals in 2019, a new record for Lambert and our former Blicksilver team. This included messaging strategy, marketing due diligence, and M&A and transaction communication for organizations spanning public companies to PE and VC firms.

Lambert & Co. is a national award-winning public relations, investor relations and integrated marketing firm. Lambert is a top-50 PR firm, top-10 financial and investor relations firm, and a top-10 M&A and deal PR firm nationally. Partnering with clients across the globe, the company's portfolio spans a broad spectrum of industries including automotive and mobility, consumer brands, education and social impact, healthcare and biotech, and financial services. Lambert has also been named Firm of the Year by PRWeek and PRNews and listed on the Inc. 5000 list five times.

To learn more visit www.lambert.com.

CMHA Committee Schedules, Membership, Minutes, and Information

Visit our website at <https://www.cmham.org/committees>

State and National Developments and Resources:

New! MDHHS, Michigan 2-1-1 promote helpline during 2-1-1 Awareness Month in February

The Michigan Department of Health and Human Services (MDHHS) and Michigan 2-1-1 have been promoting 2-1-1 helpline resources throughout 2-1-1 Awareness Month in February. Michigan residents are encouraged to continue promoting this crucial helpline that provides support to those who struggle to pay their bills or put food on the table.

2-1-1 is a free and confidential helpline providing referrals for food, shelter, medical assistance, childcare and other statewide assistance programs. The helpline provides a wide range of resources such as:

- Parenting and caregiver resources
- Utility assistance
- Free tax preparation services
- Food pantry locations
- Job finding assistance
- Automobile payment assistance
- Mental health support group information
- Healthcare expense assistance

Nearly half of households in Michigan struggle to meet their basic needs. 2-1-1 provides access to more than 30,000 resources for people and families throughout Michigan.

Those looking for assistance can call 2-1-1 to speak to a representative 24 hours a day, seven days a week. Residents can also access 2-1-1 resources through the MI Bridges website. Since 2018, residents have used MI Bridges over 750,000 times to search for services and organizations in their communities.

To learn more about Michigan 2-1-1 or the helpline, please visit mi211.org.

New! Seeds of despair

Below are excerpts from a recent article on the growing incidence of suicide in farming communities across America.

One by one, three men from the same close-knit community took their own lives.

Their deaths spanned a two-year stretch starting in mid-2015 and shook the village of Georgetown, Ohio, about 40 miles southeast of Cincinnati.

All were in their 50s and 60s.

All were farmers.

The full article can be found [here](#).

New! Hill briefing held on financing care for decarceration of persons with behavioral health conditions

The National Association of Counties and the National Sheriffs' Association held a Capitol Hill briefing on March 3 called "The Intersection of Health and Justice: A Look Inside County Jails." The National Association of Social Workers cosponsored the briefing along with the Grand Challenges for Social Work, the National Association of County Behavioral Health & Developmental Disability Directors, and the American Academy of Social Work & Social Welfare.

The National Association of Counties and the National Sheriffs' Association are supporting counties' efforts to improve health care services for justice-involved individuals and to reduce the number people with mental illness in jails. Specifically, they support legislation that would allow individuals in custody to continue to receive Medicaid and other federal health benefits until they have gone through due process and are convicted.

Currently, the Medicaid Inmate Exclusion Policy puts undue hardships on county and parish jails, supporters say, by having them finance the expense of mental health treatment, which can also disrupt the person's care and contributes to recidivism. By providing access to federal health benefits for those awaiting trial and verdict decisions would help counties break the cycle of recidivism caused or exacerbated by untreated mental illness and/or substance use disorders, thereby improving public safety, supporters said.

Among the speakers were U.S. Sen. Jeff Merkley, D-Ore., who introduced S. 2626. It calls for an eligible individual who is in custody pending charges to receive Medicare, Children's Health Insurance Program (CHIP), or veterans' health benefits.

Merkley said removing federal health benefits for a person awaiting charges creates chaos and it also becomes a justice issue. Those who are wealthy enough to pay bail, continue their federal health care benefits, he noted. Those who cannot afford bail lose their health care, he said.

"This amounts to a penalty before adjudication," he said. "We're saying we presume you are innocent, but we are penalizing you by interrupting, terminating your health care. That's a pretty big penalty and it's just wrong...."

Also speaking at the briefing were U.S. Sen. Bill Cassidy, R-La.; Greg Champagne, Sheriff of St. Charles Parish, La.; Nancy Sharpe, Commissioner for Arapahoe County, Colo.; and Ed Zackery, Director of the Veterans Service Office in Medina County, Ohio.

You can view a recording of the event [here](#). Learn more about NACo [here](#).

State Legislative Update:

House DHHS Subcommittee Public Testimony

Committee(s) Appropriations Subcommittee on Health and Human Services

Chair Rep. Mary Whiteford

Clerk Name [Sue Frey](#)

Clerk Phone 517.373.8080

Location Room 352, House Appropriations, State Capitol Building, Lansing, MI

Date Monday, 3/9/2020

Time 1:00 PM

Agenda Public Testimony on the FY 2020-21 Executive Budget Recommendation for Department of Health and Human Services

New! House DHHS Subcommittee Meeting

Committee(s) Appropriations Subcommittee on Health and Human Services

Chair Rep. Mary Whiteford

Clerk Name [Sue Frey](#)

Clerk Phone 517.373.8080

Location Room 352, House Appropriations, State Capitol Building, Lansing, MI

Date Wednesday, 3/11/2020

Time 10:30 AM

Agenda Department of Health and Human Services Presentations on the FY 2020-21 Executive Budget Recommendations for:

Medicaid

Healthy Michigan Plan

New! Federal Judge Invalidates Michigan's Medicaid Work Requirements

On Wednesday, a District of Columbia-based federal judge invalidated Michigan's Medicaid work requirements as unlawful. The decision came shortly before Michigan Department of Health and Human Services Director Robert Gordon's presentation to the Senate Appropriations Subcommittee on Health & Human Services about how the state has spent more than \$30 million as it worked to comply with the requirements in the Healthy Michigan Plan (HMP) waiver.

"The money was not well spent," Gordon told reporters after the meeting, adding: "I don't think work requirements promote work. There's evidence showing this. "In Arkansas, work requirements led to zero increase in employment," he added. "Health insurance promotes work. Since we've had Healthy Michigan, those people working has increased by 6 percentage points." DHHS' efforts, however, now shifts to other matters, Gordon said, in light of the court's ruling today.

Judge James Boasberg granted the state's motion for partial summary judgment, vacating the approval of the work and community engagement requirements in the HMP waiver in light of the U.S. Court of Appeals' decision finding similar work requirements in Arkansas as unlawful. Boasberg's ruling doesn't specifically rule to the substance of Michigan's law, however. He said he will determine the validity of the remaining issues once both sides submit briefs.

Gov. Gretchen Whitmer's administration asked for an expedited decision on the requirements -- imposed by Republican legislative leaders -- in an effort to preempt the March 10 notice to more than 80,000 individuals who didn't comply with the work requirements in January. Whitmer said she is pleased with the court's actions. She had asked the Legislature to pause the work requirements in December, but legislators did not do so, prompting the Michigan Department of Health and Human Services (DHHS) to

mail 238,000 notices to individuals subject to reporting their work activities.

U.S. Attorney General William Barr did not oppose the state's motion. Whether the government will seek an appeal with the U.S. Supreme Court was not immediately known.

The U.S. Department of Health and Human Services approved the work requirements as part of a Section 1115 Medicaid waiver project and the GOP-controlled Michigan Legislature approved the work requirements in June 2018. HMP participants who failed to meet the requirements for three months faced a loss of coverage.

Committee Members Question DHHS Spending

Committee Chair Sen. Peter MacGregor (R-Rockford), who opened the meeting with a warning that the conversation would not delve into the court's decision, said today's court ruling is likely not the last word and the Legislature needs to stay "vigilant" in how the appropriated monies are spent. He also asked if employees would face layoffs.

After the hearing, Gordon said he hopes no employees will be laid off, but rather be absorbed in another area.

MacGregor and other committee members asked Gordon to provide a detailed list of how the appropriations were spent. "In my eyes, to lift these individuals up, the Legislature should be looking for ways to make sure that these people are lifted up and not just given handouts," MacGregor said. "We need to make sure we help these people out of this and workforce engagement was one of those tools we could use."

Federal Update:

White House Releases FY 2021 Budget Request

On Monday the Trump Administration released its Fiscal Year (FY) 2021 budget request which totals \$4.8 trillion. The proposal includes significant nondefense discretionary cuts including a nine percent cut to the Department of Health and Human Services (HHS) and its agencies. The proposed budget does, however, include \$906 million to extend the Certified Community Behavioral Health Clinic (CCBHC) demonstration program as well as \$225 million in CCBHC expansion grants. These funds would enable CCBHCs to continue offering the full range of required mental health and addiction treatment services. Despite the positive signal of support for CCBHCs, the budget also includes major cuts to Medicaid and other critical behavioral health programs that would significantly harm Americans living with mental illness and addiction.

National Council for Behavioral Health President and CEO Chuck Ingoglia released a statement affirming that "We applaud the White House and bipartisan leaders in Congress for their continued efforts to expand access to high-quality addiction and mental health treatment. Much work remains to ensure that every American has access to life-saving treatment available at CCBHCs and we are grateful for the bipartisan support that has brought us this far."

It is important to remember that this is a proposal and represents President Trump and his Administration's goals and priorities but is not likely to be enacted into law as written. Congressional appropriators do not have an obligation to enact the President's budget and are considering their own priorities and calculations. Members of Congress are currently working on their budget by engaging with stakeholders, including the National Council, on their requests. We anticipate that appropriations committee hearings will be completed by the end of March and that subcommittee markups will begin in April.

Health care requests in the President's budget include:

- **Mental Health:** Although the President calls on the importance of addressing mental health in his budget, he is simultaneously proposing a cut of \$139 million to the Substance Abuse and Mental Health Services Administration (SAMHSA). In addition to the **\$906 million to extend the CCBHC Medicaid demonstration, there is \$225 million for CCBHC expansion**, an increase of \$25 million over last Fiscal Year. The budget allocates \$156 million, an increase of \$2 million, for school-based mental health programs such as Project AWARE, Healthy Transitions, and Mental Health First Aid. The budget modifies the Medicaid Institutes for Mental Diseases (IMD) exclusion to provide targeted flexibility to states to provide inpatient mental health services to Medicaid beneficiaries with serious mental illnesses, as part of a comprehensive strategy that includes improvements to community-based treatment. Further, Qualified Residential Treatment Programs (QRTPs) would be exempt from the IMD exclusion, allowing children in foster care to have Medicaid coverage in these facilities.
- **Integrated care:** The President's budget proposes eliminating the Primary and Behavioral Health Care Integration (PBHCI) program "due to other funding sources available for integrated care." Discontinuing this program would disrupt progress in this area that has been building since it began in 2009 addressing the intersection between primary care and treatment for mental illness and co-occurring addiction.
- **Opioids:** State Targeted Opioid Response grants received a request increase of \$85 million to support prevention, treatment, and recovery support services. States are also given flexibility to use these funds to address the emerging drug issue, which is the increasing number of overdoses related to psychostimulants, including methamphetamines.
- **Medicaid and Medicare:** The Administration proposes almost \$1 trillion in cuts over ten years from its proposals to reform Medicaid, the Children's Health Insurance Program (CHIP), and Medicare. The budget proposes cuts by instituting nationwide Medicaid work requirements and allowing asset tests for individuals who are eligible for Medicaid based on their modified adjusted gross income and for reducing the maximum allowable home equity for Medicaid eligibility. Additionally, the budget has proposed changes to Medicare including site-neutral payments and tying future funds available for Medicare payments for uncompensated care to FY 2019 uncompensated care funding levels. The budget does also propose prohibiting states from terminating Medicaid coverage for the first six months of a person's incarceration, and instead suspending that coverage during incarceration to ease individuals' transition back into the community upon release.
- **Drug Pricing:** The drug pricing proposals in the budget were left intentionally vague to allow continued negotiations in Congress. The Administration projects \$135 billion in savings over ten years from potential drug pricing reforms, pointing to some of the estimated savings from plans in Congress. This number is similar to estimates for reforms proposed by Senate Finance Chairman Chuck Grassley (R-IA) and Ranking Member Ron Wyden (D-OR) to restructure the Part

D benefit and to place inflation caps on drug prices in Parts B and D. This proposal by Senators Grassley and Wyden includes a two year extension and 11 state expansion for CCBHCs.

- **Telehealth:** The budget calls for expanding the telehealth benefit in Medicare fee-for-service, permitting more providers to participate in telehealth.

Additional details on the President's HHS budget request are outlined in the Department's budget-in-brief document. Further policy details have yet to be released that would outline how the President proposes to achieve the level of cuts to public health care programs included in the proposal. The National Council will monitor the appropriations process and will continue to share updates in Capitol Connector.

Education Opportunities:

Call for Presentations: CMHA 2020 Annual Spring Conference



New Location for Annual Spring Conference: Grand Traverse Resort, Traverse City, Michigan! The conference will be held on:

2020 Annual Spring Conference

June 8, 2020: Pre-conference Institutes

June 9 & 10, 2020

Grand Traverse Resort, Traverse City

[Click Here to Download the Workshop Submission Form](#)

Deadline to Respond to Call for Presentations: Friday, March 13, 2020

Conference Registration & Hotel Reservations are not available at this time.

COD Regional Trainings: Co-Occurring, Opioid Use, and Cannabis Use Disorder Treatment Planning

Course Description:

Treatment planning for adults with complex mental health, substance use, and physical health needs involves understanding stages of change and system navigation. Collaborating with these individuals on their wellness and recovery planning requires motivational approaches and often interventions that are more effective for early stage readiness. The prevalence of cannabis and opioid use makes these cases even more demanding to navigate.

Add to this, the opioid crisis in the U.S. Since 1999, sales of opioids in the U.S. have quadrupled. From 1999-2015, more than 180,000 people died from overdoses related to prescription opioids. In Michigan, in 2017, there were 1,600 opioid overdose deaths, an increase of 57% from 2016. It is now the #1 cause of accidental death for people under 50. The Centers for Disease Control (CDC) have issued recommendations that include a preference for non-pharmacological therapy. This presentation will provide an overview of a biopsychosocial model of pain, current best practices in pain management, and treatment planning and interventions. Finally, social justice issues for pain management will be addressed with constructs to improve organizationally and individually.

Who Should Attend?

This event is sponsored by the adult mental health block grant and is **only intended for persons who serve adults through CMH, CMH Service Providers, PIHP, and PIHP providers 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 level of practice. This training is designed for persons providing COD services in Adult Mental Health and Substance Use services, including Integrated Dual Disorder Treatment teams.

Dates/Locations:

- May 4, 2020 – Delta Hotels Kalamazoo Conference Center | [CLICK HERE](#) for more information and to register now
- July 23, 2020 – Park Place Hotel & Conference Center, Traverse City | [CLICK HERE](#) for more information and to register now

Be sure to register as soon as possible, training space is limited and will fill up quickly!

Training Fee:

\$65 per person. The fee includes training materials, continental breakfast and lunch.

FY20 Motivational Interviewing College regional trainings

Registration is now open for the FY20 Motivational Interviewing College regional trainings which includes Basic, Advanced, Supervisory, and the TNT course: Teaching Motivational Interviewing! [For more information and to register now, click the links below.](#)

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.

Dates/Locations:

April – DoubleTree Detroit – Dearborn

Basic: [Monday & Tuesday, April 20-21, 2020](#)

Advanced: [Monday & Tuesday, April 20-21, 2020](#)

Supervisory: [Tuesday, April 21, 2020](#)

Teaching MI: [Wednesday & Thursday, April 22-23, 2020](#)

July – Hotel Indigo, Traverse City

Basic: [Monday & Tuesday, July 20-21, 2020](#)

Advanced: [Monday & Tuesday, July 20-21, 2020](#)

Supervisory: [Tuesday, July 21, 2020](#)

Times:

Registration starts at 8:30am & the training will run from 9:00am-4:15pm for all trainings.

Training Fees:

\$125 per person for all 2-day trainings / \$69 per person for the 1-day Supervisory training. The fee includes training materials, continental breakfast and lunch each day.

Be sure to register as soon as possible, training space is limited and will fill up quickly!

Please be sure you're clicking on the correct registration link in the brochure for the date/location you want; unfortunately, full refunds cannot be made when registering for the incorrect date.

FY20 DBT Trainings

2-Day Introduction to DBT Trainings

This 2-Day introduction to DBT training is intended for persons who serve adults through CMH, CMH Service Providers, PIHP, and PIHP providers in the state of Michigan who are interested in learning the theoretical underpinnings of the treatment. It will explain what the key ingredients are in DBT that make up its empirical base. A basic overview of the original DBT skills will be covered along with how to structure and format skills training groups. This training is targeted toward those who are new to DBT with limited experience and who are looking to fulfill the pre-requisite to attend more comprehensive DBT training in the future.

Dates/Locations:

- March 30-31, 2020 – Hilton Garden Inn Lansing West | **SOLD OUT** – email Bethany Rademacher at brademacher@cmham.org to be placed on a waiting list
- April 14-15, 2020 – Great Wolf Lodge, Traverse City | **SOLD OUT** – email Bethany Rademacher at brademacher@cmham.org to be placed on a waiting list

Who Should Attend?

This event is sponsored by the adult mental health block grant and is *only intended for persons who serve adults through CMH, CMH Service Providers, PIHP, and PIHP providers in the state of Michigan*. This seminar contains content appropriate for medical directors, clinical directors, case workers, supports coordinators, and other practitioners at all beginning level of practice.

Training Fee:

\$125 per person. The fee includes training materials, continental breakfast and lunch for both days.

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.

Dates/Locations:

- May 18-22, 2020 – Holiday Inn Grand Rapids Airport West | **SOLD OUT** – email Bethany Rademacher at brademacher@cmham.org to be placed on a waiting list

- June 8-12, 2020 – Park Place Hotel & Conference Center, Traverse City | [CLICK HERE](#) for more information and to register now

Who Should Attend?

This event is sponsored by the adult mental health block grant and is *only intended for persons who serve adults through CMH, CMH Service Providers, PIHP, and PIHP providers in the state of Michigan.* This seminar contains content appropriate for medical directors, clinical directors, case workers, supports coordinators, and other practitioners at all beginning level of practice.

Training Fee:

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

Save the Date: Self-Determination Conference

This conference will broaden and deepen your understanding of the crucial elements of Self-Direction and the importance of Self-Determination in Behavioral Health. It will provide training and technical assistance on the topics of Effective Person-Centered Planning, Independent Facilitation, Supported Decision-Making, Fiscal Intermediaries, How to Structure Self-Directed Service Arrangements, Budget Development, and more. Dynamic presenters and speakers will reenergize your commitment to the principles and practice of Self-Determination!

Date & Time:

May 5, 2020
8am – 5pm
Lansing, MI 48933

Location:

Lansing Center
333 E. Michigan Ave.

Who Should Attend?:

This conference contains content tracks appropriate for all individuals who receive services, family members, case managers, supports coordinators, clinicians, CMH administrative and clinical staff, providers, HCBS and waiver coordinators, fiscal intermediaries and independent facilitators.

Registration available soon, check [CMHA website](#) for more information and updates.

Ethics for Social Work & Substance Use Disorder Professionals & Psychologists Trainings

Community Mental Health Association of Michigan is pleased to offer Ethics for Social Work & Substance Use Disorder Professionals & Psychologists 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.

This training fulfills the MPA requirements for psychologists.

Trainings offered on the following dates:

March 18, 2020 – Lansing | **Registration Full!**

April 15, 2020 – Kalamazoo | [CLICK HERE](#) for more information and to register now

April 22, 2020 – Detroit | [CLICK HERE](#) for more information and to register now

Training Fees: (fee includes training material, coffee, lunch and refreshments)

\$115 CMHA Members

\$138 Non-Members

Pain Management and Mindfulness Trainings

Community Mental Health Association of Michigan is pleased to offer Pain Management Trainings presented by Tom Moore, LMSW, LLP, CCS, Owner and Principal, Two Moons, LLC.

This course qualifies for 2 CEs and fulfills the Michigan Social Work Licensing Board's requirement for licensure renewal for pain management.

Mindfulness is recognized as a component of DBT, however it has now been expanded into Mindfulness Based Stress Response, Mindfulness Based Cognitive Therapy, and Mindfulness Based Relapse Prevention. Mindfulness proves an effective intervention with any type of impulse control issues. In addition, research proves Mindfulness as an important strategy with chronic pain. Participants attending this training should expect an overview of mindfulness applications in regard to pain management; realizing the relationship between nociceptive, neuropathic, and affective pain; and understanding the benefits of Mindfulness regarding chronic pain management and being able to determine appropriate candidates for Mindfulness. This two-hour training WILL NOT provide a level of competency in Mindfulness interventions within clinical sessions.

Trainings offered on the following dates:

March 17, 2020, 2:00pm-4:00pm – Lansing | **Registration Full!**

April 23, 2020, 9:00am-11:00am – Detroit | [CLICK HERE](#) for more information & to register

Training Fees: (fee includes training material)

\$39 CMHA Members

\$47 Non-Members

Fetal Alcohol Spectrum Disorder Trainings

Fetal Alcohol Spectrum Disorder Training: Improving Outcomes for Youth, Families, and Agencies by Recognizing and Responding to Fetal Alcohol Spectrum Disorders (FASD) and Other Neurocognitive Impairments. Featuring Presenter: Daniel Dubovsky. This is a free training.

Monday, March 16, 2020 – Gaylord = <https://cmham.org/events/?EventId=5591>

Monday, April 6, 2020 – Jackson = <https://cmham.org/events/?EventId=5592>

Time: 9:00am* – 5:00pm (registration at 8:30am)

Who Should Attend?

Children's Services Staff from CMHSP and their network providers' (specifically Children's Services clinicians - OP, Home-based Services), case managers, Parent Support Partners, Wraparound Facilitators, and supervisors are a priority for training. Parents and caregivers of a child or youth with a suspected or confirmed FASD are encouraged to attend. Educators, Child Welfare staff, Juvenile Court staff, Substance Abuse Prevention Staff and Substance Use Disorder Treatment Staff, health care providers and other child/youth service providers are invited to attend as space is available. This seminar contains content appropriate for Michigan clinical staff (social work micro) at all levels of practice.

Please email awilson@cmham.org for information.

TREM and M-TREM Trainings

Michigan Department of Health and Human Services and Community Mental Health Association of Michigan present: TREM AND M-TREM TRAININGS Featuring: Community Connections, Washington, DC. Based on both clinical experience and research literature, TREM has become one of the major trauma recovery interventions for women and men. TREM and MTREM are fully manualized group interventions for trauma survivors served by behavioral health providers.

LOCATION, DATES AND AGENDA

- Holiday Inn Airport - Grand Rapids - April 28-30, 2020
- Community Mental Health Association of Michigan (CMHAM), Lansing - June 2-4, 2020

Registration: 8:30a.m. - 9:00 a.m.; Training: 9:00 a.m. - 4:00 p.m.

Open to individuals working in the public Mental Health System. Note: The trauma policy is now an amendment to the CMHSP contract. PARTICIPANTS: Master's prepared clinicians (men and women), their clinical supervisor from CMHSPs. CMHSPs that currently DO NOT have trained TREM/M-TREM clinical staff will be prioritized for the training.

Cost is \$150 per participant. Registration fees, hotel, travel and additional meals are at the agency's expense.

EXPECTATION: Clinicians and Clinical Supervisors registering for the training will be expected to:

1. Participate in 3-day TREM/M-TREM training
2. Participate in 12 monthly coaching calls (1-hour calls)

Clinicians will be expected to: Conduct 2 TREM or M-TREM groups in the year following the training

Teams are comprised of 1 limited licensed supervisor and, at a minimum, 2 limited licensed clinicians. All team members are expected to attend the three days of training. Participate in the monthly coaching calls; and implement 2 TREM/M-TREM groups in the next year.

Please email awilson@cmham.org for information. No continuing education credits available.

Managing Mental Health Crisis

Program Overview:

This course is designed to provide participants with a better understanding of mental illness as it relates to law enforcement. Managing a Mental Health Crisis (MMHC) is a culmination of knowledge and skills developed by law enforcement and mental health professionals with the intention of promoting effective and high-quality responses to mental health related incidents.

Dates:

March 17th – 18th, 2020 - Bay College – Joseph Heirman University Center

April 15th – 16th, 2020 - M-TEC University Center

For more information and to register, see training flyers [HERE](#).

News from Our Preferred Corporate Partners:

Relias: Help Your Staff Understand Trauma-Informed Care

Implementing trauma-informed care involves everyone, including your administrative staff and assistants. Every interaction with a client can either:

- Contribute to a safe and trusting healing environment
- Detract from a safe and trusting healing environment

Research shows that interactions with non-clinical staff often set the tone of the practitioner-patient relationship, making it critical for administrative staff and assistants to understand trauma-informed care.

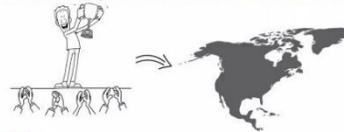
[Read the Blog](#)

Read this Q&A blog, You Asked, We Answered; 12 Questions About Trauma-Informed Care, to learn how supervisors and managers can help non-clinical staff leverage trauma-informed practices.

Abilita provides telecommunication guidance



Finding a good Telecom Consultant is difficult



There are many secrets we have learned and refined over the years as communications technology consultants. Here are our top 6 cost reduction secrets:

1. Start with the easy stuff

Sometimes there's SO MUCH to do, you don't know where to start. Start with the no brainer, slam dunk, home-run tasks: telecom bills that are largest. These have the most potential for savings and will make the biggest impact.

2. Look at the bills....and don't just assume if the bill is the same as last month, all is good!

We at Abilita normally find ourselves working in between finance and IT. Finance looks at the bills, but doesn't know what the services are for. IT doesn't look at the bills, but generally knows what the bills are for. Document what each telecom bill is for and the services received.

3. Keep contract copies

A LOT of our clients simply don't keep track of their contractual documents with their telecom providers. Having a countersigned copy of the contract is particularly rare, but necessary. Some contracts have an auto-renew clause. Make sure you keep track of contract end dates so you can negotiate better rates upon contract renewal.

4. Make sure everything is under contract

Contract rates will be lower than off-the-shelf pricing. All of your circuits and services should be included in your contract to receive the lower rates.

5. If you don't know what it is, cut it

We consistently find savings on unused and unnecessary services. We suggest you request a CSR (customer service record) to help determine the location and description and eliminate those no longer needed.

6. BUT....be careful what you cut

I realize this contradicts #5, however you will want to identify all of your circuits and Monthly Recurring Costs (MRC). One technique we use is to either unplug or have the LEC "busy out" a circuit. Then if still needed we can turn it back up in a matter of minutes.

All this can be complicated and time-consuming. That's where Abilita can help you and your staff! As leaders in the communications technology consulting industry, we average 28% savings for our clients, and there is great satisfaction in knowing your inventory is up-to-date and your pricing is as low as possible. For help on this or any other communications technology project, contact your Abilita consultant today.

You can also schedule a 10 minute phone call to explore how we can help to reduce costs at your organization. Please forward and share this email with any other interested staff.

Dan Aylward, Managing Consultant
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myStrength: new digital behavioral health resources empower consumers to move beyond trauma



Click at left for a video overview of the new Moving Beyond Trauma program

Trauma is incredibly common. Approximately 90% of U.S. adults have experienced at least one traumatic event in their lives, which can adversely affect emotional well-being and interfere with relationships, work and overall quality of life. Expanding on our diverse whole-person resources, Livongo for Behavioral Health by myStrength is pleased to announce new, digital tools to help individuals Move Beyond Trauma. Leveraging gold-standard, evidence-based approaches including cognitive behavioral therapy (CBT) and mindfulness, these web and mobile resources:

- Address a wide range of trauma types from military deployment and assault, to natural disasters, accidents and other traumatic events.
- Empower individuals to manage discomfort and distress with actionable, in-the-moment coping skills to manage their daily symptoms
- Normalize thoughts, feelings and experiences to help consumers understand that there is a way forward that has been proven to work for so many others
- Complement Livongo's whole-person platform, which addresses chronic physical and behavioral health conditions including diabetes, stress, hypertension, and more.

[Click here to request a demo.](#)

Relias announces CCBHC webinar

Below is an announcement of an upcoming webinar, sponsored by Relias, a Preferred Corporate Partner of CMHA, on the certification criteria for organization's wishing to become Certified Community Behavioral Health Center (CCBHC).

CCBHC Certification Criteria: Hiring, Training, and Reporting

Wednesday, March 18th, 2020

2:00 pm - 3:00 pm EST

In the webinar, you'll learn:

- How to implement and manage the CCBHC model of delivery using Relias as a total performance solution
- How to collect and report on clinical and patient data in accordance with SAMHSA guidelines
- Board member and staff training plans that align with CCBHC required services and certification criteria
- How to advance staff training, implement a culture of learning, and support your team throughout the CCBHC transition

Register for this webinar [here](#).

CMH Association's Officers and Staff Contact Information:

CMHA 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: Carl Rice Jr; cricejr@outlook.com; (517) 745-2124

Second Vice President: Craig Reiter; gullivercraig@gmail.com; (906) 283-3451

Secretary: Cathy Kellerman; balcat3@live.com; (231) 924-3972

Treasurer: Randy Kamps; randyk@4iam.com; (231)392-6670

Immediate Past President: Bill Davie; bill49866@gmail.com; (906) 226-4063

CMHA 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

CMHA WEEKLY UPDATE

Audrey Daul, Administrative Assistant, adaul@cmham.org
Dana Ferguson, Senior Accounting Specialist, dferguson@cmham.org
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