

## Contents:

CMH Association and Member Activities:.....	2
CMH Association of Michigan Launches New Website.....	2
CMHAM Committee Schedules, Membership, Minutes, and Information.....	3
News from Our Corporate Partners:.....	3
New myStrength Mobile App: Evidence-Based Behavioral Health Support Anytime, Anywhere.....	3
State and National Developments and Resources:.....	3
Change Leader Academy Available to CMH Association Member.....	3
MHEF Behavioral Health Grant Opportunity.....	4
NAMI Michigan Announces 2019 Honors Gala.....	5
Grants for Expansion and Sustainability of the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances.....	5
CHRT Releases Access to Health Care in Michigan Study.....	6
IPPSR Announces Forum on Innovative Ex-Offender Transition Approaches.....	6
Rural Substance Use Report Issued.....	7
Mental Health in Rural Communities Toolkit.....	7
CDH Issues Children’s ADHD Resources.....	8
Loneliness Is Bad for Your Health. An App May Help.....	8
CMS Issues Update on Efforts to Fight Opioid Crisis.....	9
State Legislative Update:.....	11
SUD Funding Bill Passes Full House.....	11
Governor’s Budget Unveil Next Week.....	11
Federal Update:.....	12
CMS’ Medicaid Guidance Describes Non-Opioid Options for Pain Management.....	12
Education Opportunities:.....	13
Pain Management Training for Social Work Professionals – Required for Licensure Renewal.....	13
Technical Assistance in the Area of Best Practices to Promote Recruitment and retention of Direct Support Professionals.....	13
Dialectical Behavior Therapy (DBT) Trainings for 2018/2019.....	13
Implementation of Integrated Dual Disorder Treatment (IDDT) and Co-Occurring Evidence-Based Practices Annual Trainings for 2018/2019.....	14
Motivational Interviewing College Trainings for 2018/2019.....	15

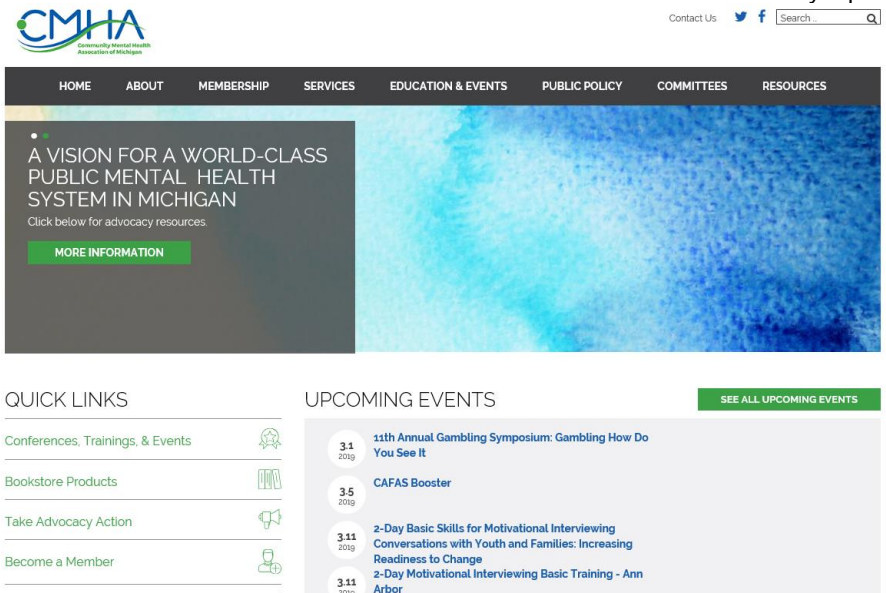
# **CMHA WEEKLY UPDATE**

Individualized Service Plans Using the ASAM Criteria and Motivational Interviewing Trainings .....	16
SAVE THE DATE: 20th Annual Substance Use and Co-Occurring Disorders Conference .....	16
Ethics for Social Work & Substance Use Disorder Professionals Trainings for 2018/2019.....	16
Basic Skills for Motivational Interviewing Conversations with Youth and Families: Increasing Readiness to Change ~ March 11-12, 2019 .....	16
CMHAM Annual Spring Conference .....	16
Second Annual Michigan CIT Conference Save-the-Date .....	17
Workshop: Finding Possibility in a Sea of Challenges: Building a Quality Direct Support Workforce .....	17
35th Annual Developmental Disabilities Conference .....	18
2019 Building Michigan Communities Conference .....	19
2019 Annual Michigan Rural Health Conference Announced.....	20
Miscellaneous News and Information: .....	21
Job Opportunity: CEO of Rose Hill Center .....	21
Job Opportunity: Project Coordinator for Arc Michigan .....	21
Job Opportunity: Executive Director of Network 180.....	22
CMH Association’s Officers and Staff Contact Information: .....	22
CMHAM Officers Contact Information:.....	22
CMHAM Staff Contact Information:.....	23

## CMH Association and Member Activities:

### CMH Association of Michigan Launches New Website

The Community Mental Health Association of Michigan recently launched its new website. The website (the cover page of which is pictured below), is greatly modernized with a fuller range of features – from information and registration for hundreds of professional development and education offerings to access to white papers from the Association’s Center for Healthcare Integration and Innovation (CHI2), from contact information on the Association’s members and staff to access to the Association’s Weekly Update.



The new website can be found at: <https://cmham.org/>

## CMHAM Committee Schedules, Membership, Minutes, and Information

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

## News from Our Corporate Partners:

### New myStrength Mobile App: Evidence-Based Behavioral Health Support Anytime, Anywhere

myStrength's new and enhanced mobile app for Android and iOS devices is proving its value in engaging and retaining consumer attention. Thousands of individuals\* have downloaded the app to become inspired, cultivate resilience, and strengthen skills to build strong mental health.

#### Mobile App Features:

- New look with a seamless experience between myStrength on mobile and web
- Self-care tools for stress, depression, substance use, chronic pain, and more
- Intuitive thumb swipe navigation plus quick access to popular features
- Emoticon support, text entry dictation, and downloadable inspirational images

Request a demo at:

<https://mystrength.com/contact>

## State and National Developments and Resources:

### Change Leader Academy Available to CMH Association Member



Great Lakes (HHS Region 5)

**ATTC**

Addiction Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

The nationally known *NIATx* Change Leader Academy (CLA) is a **one-day face-to-face workshop followed by three months of peer networking and support from a NIATx coach**. The CLA trains change leaders in the *NIATx model of process improvement*: a structured, team-based approach to change management for organizations large and small.

With support from peer and a NIATx Coach, CLA participants will select a change project, set a project aim, engage senior leaders and staff in the change process, and achieve measurable, sustainable improvements. Past CLA participants have led successful projects to:

- Reduce waiting time between first request for service and first treatment session
- Reduce no-shows by reducing the number of patients who do not keep an appointment
- Increase admission to treatment
- Increase continuation from the first through the fourth treatment session

#### Who Should Attend?

*Anyone* interested in leading change, improving service delivery, or guiding staff to do the same: senior leaders, managers, supervisors, and front-line staff are all encouraged to attend. The CLA provides both beginners and those with some experience in process improvement with the tools to lead change projects within their

## CMHA WEEKLY UPDATE

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organization. Organizations may send **up to five representatives**; change projects are most successful when organizations send a small, diverse team.

When and Where?

The CLA will kick off with a face-to-face workshop this **May**. A registration fee of **less than \$150 per person** will cover:

- Registration for the face-to-face kick off
- Three months of individualized coaching and support from national NIATx/CLA consultants
- 4.5 CEUs

**We want to hear from you** about how many people from your organization are interested and where you would prefer the training be held. Please follow this link to provide your feedback by Friday, March 15:

<https://www.surveymonkey.com/r/XRX696K>

Learning Objectives & Deliverables:

At the end of the workshop, participants will be able to:

- Explain the NIATx principles and change model to team members and begin a change project.
- Use four, key quality improvement tools - the walk-through; flowcharting; the nominal group technique; and Plan-Do-Study-Act (PDSA) rapid cycle testing.
- Commit to carrying out a 3-month change project in their organization with one NIATx coaching call and three peer learning follow-up calls.
- Offer a standard approach to process improvement in their agency and begin to develop staff to be change leaders and engaged, change team members.

Don't miss this opportunity! Visit <https://www.surveymonkey.com/r/XRX696K> to confirm your interest by Friday, March 15.

Questions? Contact Chris Ward at [cward@cmham.org](mailto:cward@cmham.org)

### MHEF Behavioral Health Grant Opportunity



The Michigan Health Endowment Fund's 2019 Behavioral Health Initiative opened on February 27 and will award up to \$7 million in grants up to \$500,000 to Michigan organizations. The Health Fund is seeking proposals that improve prevention, early identification, and treatment of mental health and substance use disorders, especially for children and older adults.

To be considered, grants must address at least one of the Health Fund's two cross-cutting goals: workforce and integration. Workforce refers to methods that build, extend, and strengthen behavioral health workforce capacity through training and development for clinicians, program staff, and informal caregivers. For example, the TRAILS to Wellness program uses a train-the-trainer model to coach school professionals to provide effective mental health services for students statewide.

Integration involves models that coordinate care, services, and community resources to promote better health. The Health Fund is specifically interested in projects that systematically integrate mental health, substance use, and medical care providers to meet all of a person's health needs, no matter where they seek care. For example, the Ruth Ellis Integrated Health and Wellness Center was established to provide an integrated primary and behavioral health center co-located within a comprehensive drop-in center for homeless, runaway and at-risk LGBTQ children, youth and young adults.

## **CMHA WEEKLY UPDATE**

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Proposals are due April 23. For more information, visit their website (<https://www.mihealthfund.org/grantmaking/behavioral-health-initiative>) or register for their March 4 informational webinar. ([https://zoom.us/webinar/register/WN\\_UI-enRTUTqmULLIOw2mrLiA](https://zoom.us/webinar/register/WN_UI-enRTUTqmULLIOw2mrLiA))

### **NAMI Michigan Announces 2019 Honors Gala**



Below is a recent announcement from NAMI-Michigan, a longtime ally of this Association, regarding its annual NAMI Honors Gala.

Join us Saturday, March 16th for the NAMI Michigan Honors Black-Tie Gala as we celebrate the tens of thousands of individuals and organizations dedicated to building better lives for everyone affected by mental illness. In addition to a number of Honorees in specific categories, this year's Special Honorees are Alpha Kappa Alpha Sorority, Inc., Mark Reinstein, PhD, President & CEO of the Mental Health Association in Michigan and Waltraud E. ("Wally") Prechter, founder of the Heinz C. Prechter Bipolar Research Program at the University of Michigan Depression Center. Event and ticket information is available at [www.namimi.org](http://www.namimi.org).

### **Grants for Expansion and Sustainability of the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances**

Below is a recent announcement, from SAMHSA, regarding the children's system of care initiative.

Short Title: System of Care (SOC) Expansion and Sustainability Grants

Funding Opportunity Announcement (FOA) Information FOA Number: SM-19-009  
Posted on Grants.gov: Tuesday, February 19, 2019

Application Due Date: Friday, April 19, 2019  
Catalog of Federal Domestic Assistance (CFDA) Number: 93.104

Intergovernmental Review (E.O. 12372): Applicants must comply with E.O. 12372 if their state(s) participates. Review process recommendations from the State Single Point of Contact (SPOC) are due no later than 60 days after application deadline.

Public Health System Impact Statement (PHSIS) / Single State Agency Coordination: Applicants must send the PHSIS to appropriate State and local health agencies by application deadline. Comments from Single State Agency are due no later than 60 days after application deadline.

Description: The Substance Abuse and Mental Health Services Administration, Center for Mental Health Services (CMHS), is accepting applications for fiscal year (FY) 2019 Grants for Expansion and Sustainability of the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances (Short title: System of Care (SOC) Expansion and Sustainability Grants). The purpose of this program is to improve the mental health outcomes for children and youth, birth through age 21, with serious emotional disturbance (SED), and their families. This program will support the implementation, expansion, and integration of the SOC approach by creating sustainable infrastructure and services that are required as part of the Comprehensive Community Mental Health

## CMHA WEEKLY UPDATE

Services for Children and their Families Program (also known as the Children's Mental Health Initiative or CMHI).

This grant will support the provision of mental health and related recovery support services to children and youth with SED and those with early signs and symptoms of serious mental illness (SMI), including first episode psychosis (FEP). The intent is to build upon progress made in developing comprehensive SOC by focusing on sustainable financing, cross-agency collaboration, the creation of policy and infrastructure, and the development and implementation of evidence-based and evidence-informed services and supports.

The full announcement is at: <https://www.samhsa.gov/grants/grant-announcements/sm-19-009>

### CHRT Releases Access to Health Care in Michigan Study



The Center for Health and Research Transformation's (CHRT) 2018 Cover Michigan Survey asked Michigan residents about their experiences in accessing health care, specifically how easy or difficult it was to get appointments with different providers. The survey found that two factors—the presence of primary care providers (PCP), and whether or not people had a Medical Home—figured prominently in reported ease of access to care. Read the entire brief here: [https://www.chrt.org/publication/access-to-health-care-in-michigan/?utm\\_source=access+to+health+care+in+MI&utm\\_campaign=access+to+health+care+in+MI&utm\\_medium=email](https://www.chrt.org/publication/access-to-health-care-in-michigan/?utm_source=access+to+health+care+in+MI&utm_campaign=access+to+health+care+in+MI&utm_medium=email)

### IPPSR Announces Forum on Innovative Ex-Offender Transition Approaches

The Institute for Public Policy and Social Research (IPPSR) at Michigan State University invites you to attend the upcoming public policy forum entitled, Keeping the Ex in Ex-Offender, set for March 13 from 11:30 a.m. to 1:30 p.m. in the Lansing Community College Building at 309 N. Washington Square in downtown Lansing, Michigan.

**Keeping the Ex in ExOffender:** The recent bipartisan passage of The First Step Act has sparked discussion of criminal justice reform at the state and local level. The federal act is viewed as a modest move to ease punitive prison sentencing and provide credits for some federal offenders who avoid disciplinary actions and enroll in skill training. The act also moves to improve federal prison conditions. One intention outcome of this act is to reduce the prison population by increasing an offender's chances at rehabilitation and enabling their transition into an independent, community life with skills that will keep them permanently out of the prison system. This forum discussion will focus on the likely impact of The First Step Act and its implications for Michigan's sentencing practices, prison environments, and transitional assistance intended to reduce prison re-entry.

The forum will be held in downtown Lansing in Suite 203 of the LCC Building at 309 N. Washington Square, around the corner from Anderson House Office Building and immediately across from the MEDC Building at N. Washington and Ionia Street. (Look for AARP in the window!) Registration and lunch will begin at 11:30 a.m. The discussion will begin at approximately 11:45 a.m. and run through 1:30 p.m. The forum is free and open to the public. Pre-registration is strongly encouraged online at <http://bit.ly/IPPSRForum> as open seats and lunch is on a first-come, first-serve basis. Reserve a seat today at: <http://ippsr.msu.edu/public-policy/public-policy-forums/schedule-registration>



Please plan to join us to learn the impact of this federal act and what it means to our State. We hope you will contribute to the open discussion, and network with others who have interest in the topic. We hope to see you on March 13.

Panelists to date include:

Jay P. Kennedy, PhD is an Assistant Professor jointly appointed to the School of Criminal Justice and the Center for Anti-Counterfeiting and Product Protection at MSU.

Derek Cohen, PhD is the Director of the Center for Effective Justice and Right on Crime at the Texas Public Policy Foundation.

Jennifer E. Cobbina, PhD is an Associate Professor in the School of Criminal Justice at Michigan State University, focused on corrections and prisoner re-entry.

### Rural Substance Use Report Issued

There is a significant need for mental health services in rural America. According to the [Results from the 2017 National Survey on Drug Use and Health: Detailed Tables](http://ippsr.msu.edu/public-policy/public-policy-forums/schedule-registration), (<http://ippsr.msu.edu/public-policy/public-policy-forums/schedule-registration>) 19.1% of residents aged 18 or older of nonmetropolitan counties had any mental illness (AMI) in 2017, approximately 6.8 million people. In addition, 4.9%, or nearly 1.7 million, of residents of nonmetropolitan counties experienced serious thoughts of suicide during the year.

While the prevalence of mental illness is similar between rural and urban residents, the services available are very different. Mental healthcare needs are not met in many rural communities across the country because adequate services are not present. Providing mental health services can be challenging in rural areas. According to WICHE's [Rural Mental Health: Challenges and Opportunities Caring for the Country](#), the following factors are particular challenges to the provision of mental health services in rural communities:

**Accessibility** – Rural residents often travel long distances to receive services, are less likely to be insured for mental health services, and are less likely to recognize an illness.

**Availability** – Chronic shortages of mental health professionals exist and mental health providers are more likely to practice in urban centers.

**Acceptability** – The stigma of needing or receiving mental healthcare and fewer choices of trained professionals who work in rural areas create barriers to care.

This topic guide focuses on mental health in rural areas and helps health and human services providers in their efforts to develop, maintain, and expand mental health services in rural communities. It also highlights challenges and important issues in mental healthcare delivery, such as workforce shortages, access issues, anonymity, stigma, integration of mental health services into primary care, and suicide prevention. Information regarding substance use disorder (SUD) can be found in RHIhub's [Substance Abuse in Rural Areas](https://www.ruralhealthinfo.org/topics/substance-abuse) topic guide (<https://www.ruralhealthinfo.org/topics/substance-abuse>).

### Mental Health in Rural Communities Toolkit



Welcome to the Mental Health in Rural Communities Toolkit. The toolkit compiles evidence-based and promising models and resources to support organizations implementing mental health programs in rural communities across the United States, with a primary focus on adult mental health.

The modules in the toolkit contain resources and information focused on developing, implementing, evaluating, and sustaining rural mental health programs.

## CMHA WEEKLY UPDATE

There are more resources on general community health strategies available in the Rural Community Health Toolkit (<https://www.ruralhealthinfo.org/toolkits/rural-toolkit>)

### CDH Issues Children's ADHD Resources



#### **New Publications about Attention-Deficit/Hyperactivity Disorder (ADHD)**

Learn more about the U.S. Centers for Disease Control and Prevention's (CDC) latest work to support children with attention-deficit/hyperactivity disorder (ADHD).

#### **Treatment Patterns and Costs Among Children Aged 2-17 years with Attention-Deficit/Hyperactivity Disorder in New York State Medicaid in 2013**

Published in the Journal of Attention Disorders, this new study identified children with ADHD enrolled in New York state (NYS) Medicaid and characterized ADHD-associated costs by treatment category. The study found that, although the ADHD cohort comprised only 5.4% of all children enrolled in NYS Medicaid, the total costs for the ADHD cohort accounted for 18.1% of the total costs for all children enrolled in Medicaid in 2013. The average cost per child for the ADHD cohort was approximately 3.2 times the average cost per child for all children enrolled in Medicaid. [Read the abstract:](#)

<https://journals.sagepub.com/doi/abs/10.1177/1087054718816176?journalCode=jada>

#### **Predictors of Receipt of School Services in a National Sample of Youth with Attention-Deficit/Hyperactivity Disorder**

Published in the Journal of Attention Disorders, this study describes the percentage and characteristics of children and adolescents with ADHD who had ever received and were currently receiving school-based treatment and services in 2014. The study found that at least 1 in 5 students with academic and/or social impairment from ADHD did not receive school services, a gap that is particularly evident for adolescents and youth from non-English speaking and/or lower income families. Read the abstract:

<https://journals.sagepub.com/doi/abs/10.1177/1087054718816169?journalCode=jada>

#### **Adherence to Recommended Care Guidelines in the Treatment of Preschool-Age Medicaid-Enrolled Children with a Diagnosis of ADHD**

Published in Psychiatric Services, a recent study of healthcare claims information from seven southeastern states found that, for children with ADHD ages 2-5 years enrolled in Medicaid during 2005–2012, only about 1 in 6 children (16%) received psychological services before medication was tried. American Academy of Pediatrics clinical practice guidelines suggest that doctors refer parents of children younger than 6 years old for training in behavior therapy before prescribing ADHD medicine. The study found that the children who started with psychological services had a low likelihood of receiving medication before turning 6 years of age. [Read the abstract:](#)

<https://ps.psychiatryonline.org/doi/10.1176/appi.ps.201800204>

### **Loneliness Is Bad for Your Health. An App May Help**

Below are excerpts from a recent New York Times article on the health-related impact of loneliness.

Loneliness is bad for your health. Social isolation is associated with a significantly increased risk of premature death. And the problem resists fixing; solitary people who participate in experiments meant to nudge them into joining groups tend to have high rates of recidivism. According to a study published this month in Proceedings of the National Academy of Science, however, it might be possible to reduce loneliness by using cellphones to teach a particular type of meditation.



Researchers from Carnegie Mellon University and several other institutions recruited 153 men and women who considered themselves stressed out — the study was slightly mischaracterized to disguise a primary concern, loneliness. Next, the volunteers completed questionnaires: They were asked about their social networks, their interactions with others and their feelings of loneliness, if any. Their baseline levels of sociability were established through texts that prodded them to answer questions about what they were doing and with whom. This monitoring lasted three days.

The subjects were then randomly divided into three groups and given an app for their phones. The app gave the control group general techniques for coping with stress. Another group was taught mindfulness through the meditative method of paying close attention to the moment and focusing on breathing and other sensations. The third group received those and additional instructions: Take note of and say “yes” aloud to all sensations, a process that trained the subjects to be attentive and approach what the researchers dubbed “equanimity.” Every day for two weeks, the subjects were tasked with using their app for 20 minutes and practicing for another 10 minutes. Afterward, they filled out the questionnaires again and went through another three days of monitoring.

Little changed for those in either the control group or the one taught attention-only mindfulness. But the subjects whose training included acceptance and equanimity were measurably more sociable. Their daily routines, after using the app for two weeks, typically included several more interactions with people that lasted at least a few minutes, and their questionnaires showed a decline in their feelings of loneliness.

The full article can be found at:

<https://www.nytimes.com/2019/02/20/well/mind/loneliness-is-bad-for-your-health-an-app-may-help.html>

### **CMS Issues Update on Efforts to Fight Opioid Crisis**



Addressing the opioid crisis is a top priority for the Administration and the Centers for Medicare & Medicaid Services (CMS). CMS is responding by promoting safe and responsible pain management, making sure patients can access treatment for opioid use disorder, and using data to target prevention and treatment. Over the last several years, we have issued several bulletins outlining state approaches and effective practices for addressing the opioid overdose epidemic within Medicaid.

We are committed to preventing and reducing opioid use disorder by promoting safe opioid prescribing and encouraging non-opioid pain treatments. Today we are issuing a Bulletin to expand on earlier guidance by providing information to states looking for ways to promote non-opioid options for chronic pain management in their Medicaid programs. This Bulletin supports the goal of reducing the use of opioids in pain management included in the President’s Initiative to Stop Opioid Abuse and Reduce Drug Supply and Demand and is consistent with the U.S. Department of Health and Human Service (HHS) 5-Point Strategy to Combat the Opioid Crisis. This Bulletin meets the requirements of Section 1010 of the SUPPORT for Patients and Communities Act (Pub. L. 1115-271), which requires CMS to issue guidance to states on mandatory and optional items and services for non-opioid treatment and management of pain that may be provided in the state Medicaid program.

## CMHA WEEKLY UPDATE

The Bulletin is available on Medicaid.gov here: <https://www.medicaid.gov/federal-policy-Guidance/index.html>.

National Center for School Mental Health issues call for presentations

### The 2019 Annual Conference on Advancing School Mental Health



November 7-9, 2019  
Austin, TX

Safe and Supportive  
Schools for All Students!

We invite you to submit a proposal to present at the 2019 Annual Conference on Advancing School Mental Health, held in Austin, Texas, November 7-9, 2019!

The full call for presentations:

[https://umbpsychiatry.az1.qualtrics.com/jfe/form/SV\\_d5Vh4AQGIV1RTGB](https://umbpsychiatry.az1.qualtrics.com/jfe/form/SV_d5Vh4AQGIV1RTGB)

The theme of this year's conference is Safe and Supportive Schools for All Students. Each year, the Annual Conference on Advancing School Mental Health brings together leaders, practitioners, researchers, and other stakeholders in the school mental health field to share the latest research and best practices. The conference emphasizes a shared school-family-community agenda to bring high quality and evidence-based mental health promotion, prevention, and intervention to students and families as part of a multi-tiered system of supports.

The submission deadline is 11:59 PM EST, March 11, 2019.  
All proposals must be submitted online.

We hope you will consider submitting a proposal to present at this year's conference! Presentation options include workshops, symposia, intensive trainings, and posters. Presenters receive a discounted registration rate to attend the conference.

The conference is hosted by the National Center for School Mental Health (NCSMH; funded in part by the Health Resources and Services Administration). If you have any questions, please contact NCSMH at 410-706-0980 or [ncsmh@som.umaryland.edu](mailto:ncsmh@som.umaryland.edu). To view programs or presentations from previous years, please visit our website: <http://csmh.umaryland.edu/Conferences/Annual-Conference-on-Advancing-School-Mental-Health/>

**Essay: Change Medicaid Law to Improve Care for Those Incarcerated in County and City Jails**

## **CMHA WEEKLY UPDATE**

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Below is an excerpt from a recent editorial in Behavioral Healthcare Executive on the need to improve mental healthcare for persons who are incarcerated. The editorial, by the CEO of NACBHDD (of which this Association is a longtime member) echoes one of planks of the advocacy platform of NACBHDD.

Literally, tens of millions of words have been written about the crisis of over-incarceration in county and city jails. Much of this dialogue focuses on those with behavioral health and intellectual/developmental disability conditions. The volume of this concern reflects the gravity of the crisis we face.

On any given night, about 730,000 persons are incarcerated in our county and city jails. Of this total, one quarter or even more have a mental health condition; half have a substance use or opioid condition; and a small but growing proportion have an intellectual/developmental disability condition. In some county and city jails, these groups collectively constitute more than 90% of the jail population.

To the growing credit of the behavioral health field, we now are developing new diversion procedures that stem the flow of persons with these conditions into our jails. Innovative, walk-in, urgent care centers, mobile crisis response teams, extensive and effective warm and hot lines, and rejuvenated care coordination are noteworthy examples.

Read more at: <https://www.behavioral.net/blog-entry/change-medicaid-law-improve-care-those-incarcerated-county-and-city-jails>

## **State Legislative Update:**

### **SUD Funding Bill Passes Full House**

This week, HB 4057 introduced by State Rep. Steve Marino (Harrison Township), which would increase funding for substance use disorder services passed the House Health Policy committee. HB 4057 is an identical bill from last year's version 5085 and was one of the recommendations from the CARES task force.

HB 4057 would dedicate 4% of the unmarked money raised through Michigan's liquor sales and fees and earmark it specifically for substance use disorder treatment and prevention services. HB 4057 could provide more than \$18 million a year to combat alcohol-related disorders, opiate addiction and other substance use disorders.

"Substance abuse is a major problem in Michigan," Marino said. "This bill will deliver more resources to agencies on the front lines of this fight."

Early this year, the final report was released of the House of Representatives' CARES (Community, Access, Resources, Education and Safety) Task Force, which convened last summer to explore Michigan's mental health system. Increasing funding for substance use disorder services was one of the 50 recommendations in that final report.

HB 4057 now moves to the House Ways & Means Committee for review, which is part of the new House committee process.

### **Governor's Budget Unveil Next Week**

## **CMHA WEEKLY UPDATE**

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Governor Whitmer will roll out her first executive budget recommendation on Tuesday, March 5 at 11am. The FY20 budget will set the Governor's funding priorities.

Committee: Appropriations, Joint Meeting with Senate Appropriations

Location: Senate Hearing Room, Ground Floor, Boji Tower, 124 W. Allegan, Lansing, MI

Date: Tuesday, 3/5/2019

Time: 11:00 AM

Agenda: Presentation of Governor Whitmer's Fiscal Year 2020 and 2021 Budget Recommendation

OR ANY BUSINESS PROPERLY BEFORE THIS COMMITTEE

Chair: Representative Shane Hernandez

### **Federal Update:**

#### **CMS' Medicaid Guidance Describes Non-Opioid Options for Pain Management**

A [new informational bulletin](#) from the Centers for Medicare and Medicaid Services (CMS) suggests a range of strategies for states to promote non-opioid chronic pain management options within their Medicaid programs by leveraging waivers, bundled payments, and other mechanisms. The bulletin builds upon previous CMS guidance to highlight successful programs already in place in some states and to describe Medicaid authorities at states' disposal.

This bulletin fulfills a mandate from the [package of opioid legislation](#) that passed last year requiring CMS to issue guidance on safer alternatives to opioids for managing chronic pain, and it also aligns with the Department of Health and Human Services' (HHS) five-point strategy to combat the opioid crisis. Recommendations for states cover a wide range of strategies, including the following:

- **Home and Community-Based Services:** States can apply for 1915(c) Home and Community-Based Services (HCBS) waivers to target certain populations by location, age, or diagnosis. This can allow states to target chronic pain management strategies to populations most in need without covering expensive services for all beneficiaries. Additionally, states can use state plan amendments (SPAs) to establish new eligibility groups to allow certain beneficiaries to receive HCBS for a limited period of time with a limited scope of services.
- **1115 Demonstrations:** States can use 1115 demonstration waivers to test treatment options for subsets of the Medicaid population, like a program in Rhode Island highlighted in the bulletin. Rhode Island created a multi-modal, multi-disciplinary program for chronic pain management under an 1115 waiver, and CMS suggests that states could implement similar waivers and design programs that fit their populations.
- **Managed Care:** Chronic pain management care can be delivered through a risk-based arrangement. Managed care plans have flexibility to provide alternative pain management services as well as supplemental benefits. Alternatives must be medically appropriate and cost-effective substitutes.
- **Bundled Payments:** States may design alternative payment methodologies for chronic pain management services associated with a given condition. In particular, CMS points to bundled payments,

## **CMHA WEEKLY UPDATE**

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under which a state would pay a provider or group of providers one unified rate for pain management services, which could include cognitive behavioral therapy, physical therapy, and education.

CMS also suggests a variety of education and utilization management strategies for opioid prescriptions, including provider education, patient education, mandatory prescribing guidelines, prior authorization, and pharmacy lock-in programs. [Read the bulletin in full here.](#)

### **Education Opportunities:**

#### **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.*

**2 Date Options:**

March 19, 2019 - 2:00pm – 4:00pm (registration at 1:30pm)

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 March 19 from 2-4 Training!](#)

[Click Here to Register for the April 25 from 9-11 Training!](#)

#### **Technical Assistance in the Area of Best Practices to Promote Recruitment and retention of Direct Support Professionals**

The State of Michigan has secured Technical Assistance from the Department of Labor's Office of Disability Employment Policy (ODEP), in the area of best practices to promote recruitment and retention of direct support professionals. One element of this TA will be two separate one-day training sessions - one in the Metro Detroit area on March 21 and one in Lansing on March 22. The Subject Matter Expert and presenter for these sessions will be Kelly Nye-Lengerman, Research Associate at the University of Minnesota. Additional information about the training is available through the link below. Here is an excerpt from the outline of this element of the Technical Assistance: *A cross-systems statewide awareness-raising and knowledge acquisition initiative which targets providers in Michigan which serve both individuals with mental illness and intellectual and developmental disabilities, and people with dual diagnosis. This initiative proposes two regional trainings, which will each be one day in length and will present a comprehensive overview of research-informed best and evidence-based organizational practices to maximize retention and recruitment of direct service professionals (DSPs).*

For additional information, and to register:

<http://campaign.r20.constantcontact.com/render?m=1102591619935&ca=58703865-e507-496e-81d9-9c05ec232a78>

#### **Dialectical Behavior Therapy (DBT) Trainings for 2018/2019**

##### **2-Day Introduction to DBT Trainings**

## **CMHA WEEKLY UPDATE**

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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 18-19, 2019 | Great Wolf Lodge, Traverse City – **TRAINING FULL**

May 13-14, 2019 | Kellogg Center, East Lansing – **TRAINING FULL**

### 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.

**All 2-Day Introduction DBT Trainings are now full. Email Bethany Rademacher at [brademacher@cmham.org](mailto:brademacher@cmham.org) to be placed on a waiting list.**

## **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**



## **CMHA WEEKLY UPDATE**

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### 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.

### Dates/Locations:

March – Weber's Ann Arbor

Basic: Monday & Tuesday, March 11-12, 2019

Advanced: Monday & Tuesday, March 11-12, 2019

Supervisory: Tuesday, March 12, 2019

Teaching MI: Wednesday & Thursday, March 13-14, 2019

April – Shoreline Inn Muskegon

Basic: Monday & Tuesday, April 8-9, 2019

Advanced: Monday & Tuesday, April 8-9, 2019

Supervisory: Tuesday, April 9, 2019

Teaching MI: Wednesday & Thursday, April 10-11, 2019

June – Holiday Inn Marquette

Basic: Monday & Tuesday, June 10-11, 2019

Advanced: Monday & Tuesday, June 10-11, 2019

Supervisory: Monday, June 10, 2019

Teaching MI: Wednesday & Thursday, June 12-13, 2019

# **CMHA WEEKLY UPDATE**

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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.

## **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](http://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

## **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 dates.

- March 13 – Lansing [Click Here to Register for March 13](#)
- 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

## **Basic Skills for Motivational Interviewing Conversations with Youth and Families: Increasing Readiness to Change ~ March 11-12, 2019**

Motivational Interviewing (MI) is a method of having a conversation to help the speaker increase readiness for making healthy changes in their life. A substantial (and still growing) body of research evidence verifies the effectiveness of MI for a wide variety of ages, cultures, socio-economic conditions, and diagnoses. This interactive workshop will familiarize participants with the core concepts of Motivational Interviewing and discuss special considerations and benefits of MI with youth and families. Space is limited. Register online at [www.cmham.org](http://www.cmham.org)

## **CMHAM Annual Spring Conference**

Save the Date: The CMHAM Annual Spring Conference will be held on:

## **CMHA WEEKLY UPDATE**

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June 10, 2019: Pre-Conference Institutes  
June 11 & 12, 2019: Full Conference  
Suburban Collection Showplace  
Novi, Michigan

*Note: Hotel reservation and Conference registration are not available at this time.*

### **Second Annual Michigan CIT Conference Save-the-Date**



Crisis Intervention Teams (CIT) were established in 1988 in response to an officer killing a young man experiencing a mental health crisis. Since that event, crisis interventions teams across the country have formed to develop better ways to actively intervene real time with individuals in a mental health crisis and establish improved community partnerships that support community members to obtain mental health treatment first rather than involvement with the judicial system.

The first annual Michigan CIT conference was hosted by Riverwood Community Mental Health in Berrien County. After this conference, a state collaborative was formed to support Michigan CIT programs and to establish standards for CIT initiatives across the state. The next conference will be hosted by Summit Pointe Community Mental Health in Battle Creek. Law enforcement personnel, corrections personnel, behavioral health professionals, persons living with behavioral health disorders, family members, advocates, judges / court personnel, public defenders / prosecutors and policy makers are encouraged to attend!

Mark your calendars and join us in Battle Creek for the second annual CIT: Crisis Intervention Team Conference October 2-4, 2019. Hear from various presenters on strategies to start your CIT in your community, or ways to improve your existing program. Also, learn more about how CIT is benefiting communities in our state and how to collaborate with other counties. CIT is more than just a training! We look forward to seeing you at our conference as we 'Bring it All Together'. For more information, please email [MICITConference2019@gmail.com](mailto:MICITConference2019@gmail.com).

### **Workshop: Finding Possibility in a Sea of Challenges: Building a Quality Direct Support Workforce**

#### **Finding possibility in a sea of challenges: building a quality direct support workforce**

Presenter: Kelly Nye-Lengerman, PhD University of Minnesota

The goal of the session will be to equip provider organizations with knowledge and awareness of the organizational models, strategies and tools correlated with higher rates of DSP retention and more successful DSP recruitment.

## **CMHA WEEKLY UPDATE**

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Who Should Attend: Targeted participants include all providers serving persons with mental illness and intellectual/developmental disabilities.

Some priority will be given to employment service providers that have received prior federal (ODEP) or state technical assistance in provider transformation through the Employment First Initiative.

A quality Direct Support workforce is a key ingredient to supporting people with disabilities to live their best, most inclusive lives in the community. Now more than ever, almost every industry in health and human services is affected by the Direct Support workforce crisis. The crisis represents more than just a shortage of workers, but it also reflects the many challenges Direct Support Professionals (DSPs) and organizations face: wages, benefits, education, certification, professional standards, and budgets. While there is no quick fix to these longstanding issues, there are proven solutions that can assist organizations and state agencies in addressing the crisis. Investment in, and commitment to, building and sustaining a strong Direct Support workforce will pay dividends for the individuals supported.

This session will:

- Explore the context for the Direct Support workforce crisis;
- Discuss strategies for developing knowledge, skills, and abilities in Direct Support workers and frontline supervisors;
- Examine various strategies and interventions for workforce stabilization and growth;
- Identify key tools and resources for workforce development
- Identify key tools and resources for workforce development
- Present a comprehensive overview of research-informed best practices and evidence-based organizational practices to maximize retention and recruitment of direct service professionals (DSPs).
- The DSP workforce is critical to realizing the goals of Employment First and community living, including job developers and job coaches who are an essential link between people with disabilities seeking employment and the employers/business community that can hire them. To achieve the desired outcomes of increased employment for people with disabilities, and ensure high quality employment services, organizations engaged in provider transformation must adopt transformation plans that address DSP workforce stabilization and empowerment.

As noted above, all service providers employing Direct Support Professionals are welcome to register for one of the seminar options below - but seating is limited!

Registration Fee is \$30 per person.

Session Offerings:

Thursday March 21, 2019 at OCHN 5505 Corporate Dr, Troy, MI 48098

Click here to register: <https://maro.org/events/dsp-training-ochn/>

Friday March 22, 2019 at Lansing Community College West 5708 Cornerstone Dr, Lansing, MI 48917 Click here

to register: <https://maro.org/events/dsp-training-lansing/>

### **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 // (269) 337-4305

# **CMHA WEEKLY UPDATE**

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## Date & Location

Tuesday, April 16, 2019, 7:30 AM - Wednesday, April 17, 2019, 4:30 PM, Kellogg Hotel & Conference Center, East Lansing, MI

## 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: Register at: [wmed.cloud-cme.com/2019DDConference](http://wmed.cloud-cme.com/2019DDConference)

## 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](mailto: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](mailto:ce@med.wmich.edu).

## **2019 Building Michigan Communities Conference**

The 2019 Building Michigan Communities Conference will be April 29 – May 1, at the Lansing Center. Conference details and registration information will be available soon at <https://buildingmicommunities.org/>

The Building Michigan Communities Conference (BMCC) offers two-and-a-half days of informative, educational sessions with leading industry professionals and special guests. Attendees from across the state represent a wide range of organization types and interests, including nonprofit organizations, homeless service providers,

## **CMHA WEEKLY UPDATE**

developers, government agencies and the lender community. What brings them all together is a unified focus on building healthy, vibrant and inclusive Michigan communities for one and all.

During the BMCC, the 1,300+ attendees have the opportunity to swap ideas with sponsors and exhibitors, learn and refine best practices from over 100 breakout sessions and grow mindsets in the plenary sessions that feature a winning combination of industry experts and inspirational messages. The 2019 conference planning committee has been hard at work to bring more information on creative uses of financing and leveraging financial resources, prioritizing innovative ideas to increase affordable housing, and heightening awareness around equality, inclusion and community engagement.

The 2019 conference will feature the following speakers:

Monday lunch will feature a legislative panel on advocacy. Former Representative Steve Tobocman (now Director of Global Detroit) will moderate the panel of Representative Sarah Anthony (D) and Senator Wayne Schmidt (R).

### **2019 Annual Michigan Rural Health Conference Announced**



The Michigan Center for Rural Health (MCRH) is pleased to invite you to the 2019 Michigan Rural Health Conference on April 25th-26th, 2019 in Mt Pleasant, MI! The theme of this year's conference is, "Roadmap to Improving Rural Health." Participants will gain knowledge of timely and effective methods to enhance their organization. Whether it's concentrating on improving clinical quality, leadership, or focusing on patient satisfaction, participants will have the opportunity to learn from subject matter experts and rural health peers. The conference sessions will feature a variety of informative topics such as Innovations in Rural, Federal Update on Rural Health Issues, National RHC Update, Strategies for Better Recognizing & Engaging Employees, Health Law Update, Multiple Pathways and Recovery Coaches, as well as several other valuable presentations.

WHO'S INVITED? The conference is designed to be of interest to a wide range of rural health advocates including community leaders, clinicians, administrators, board members, public health officials, rural health clinics, federally qualified health centers, local health departments and others interested in the development of healthcare in their community.

#### **WHEN**

Thursday, April 25, 2019 at 7:00 AM EDT

-to-

Friday, April 26, 2019 at 11:45 AM EDT)

#### **WHERE**

Soaring Eagle Casino & Resort

6800 Soaring Eagle Boulevard

Mt Pleasant, MI 48858



# CMHA WEEKLY UPDATE

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REGISTER NOW

<https://events.r20.constantcontact.com/register/eventReg?oeidk=a07eg2d27i600bec3f4&oseq=&c=&ch=>

Agenda:

<https://files.constantcontact.com/ad8db403301/aa9d962c-7390-4b36-9098-196e3f478b89.pdf>

<https://files.constantcontact.com/ad8db403301/aa9d962c-7390-4b36-9098-196e3f478b89.pdf>

HOTEL RESERVATIONS

Soaring Eagle Casino & Resort

877-232-4532

Use the Group Code MC042419

CONTINUING EDUCATION AVAILABLE:

Nursing

Social Work

More info on MCRH Website: [http://mcrh.msu.edu/events/Participants\\_Rural\\_Health\\_Conference.html](http://mcrh.msu.edu/events/Participants_Rural_Health_Conference.html)

CONTACT US!

Michigan Center for Rural Health

[mcrhaa@hc.msu.edu](mailto:mcrhaa@hc.msu.edu)

517.355.7979

## 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: Project Coordinator for Arc Michigan

The Arc Michigan is seeking applicants for a new, full-time position!

Job Title: Project Coordinator

Location: The Arc Michigan, Lansing MI

Job Description: The Project Coordinator and the Arc Michigan will partner with the Michigan Department of Health and Human Services (MDHHS) to enhance and support the department's quality assurance and improvement activities. The project coordinator will 1) supplement the MDHHS site review process by interviewing people who receive CMH services about their experience with the person-centered planning process and 2) support MDHHS efforts to meet the training needs of Pre-paid Inpatient Health Plans (PIHPs),

## **CMHA WEEKLY UPDATE**

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Community Mental Health entities (CMH), other providers, families and people with disabilities, by developing, coordinating and delivering training on the key topics of Person-Centered Planning, Self Determination and Independent Facilitation.

Primary Duties and Responsibilities:

- Conduct interviews with individuals who receive Person Centered Planning services.
- Secure and coordinate subcontractors who will conduct interviews with people who receive mental health services and provide support during the MDHHS site review process.
- Collaborate with evaluation contractor for analysis of interviews.
- Participate in MDHHS department groups related to training areas and support MDHHS in finalizing training policy
- Develop a statewide training plan in partnership with MDHHS
- Help plan yearly Self-Determination conference
- Develop initial training curriculum
- Host train the trainer events
- Evaluate training: refine curriculum and incorporate system updates
- Develop a statewide multi-year training plan in partnership with MDHHS
- Host quarterly technical assistance sessions for trainers

Desired Qualifications:

- Knowledge of, and experience interacting with, MDHHS's behavioral health care system
- Experience working with, for and on behalf of people with disabilities
- Knowledge of person-centered planning, independent facilitation, self-determination and other issues pertinent to people with mental illness and/or intellectual and developmental disabilities who receive state-funded services
- Event planning skills
- Excellent written and oral communication skills
- Computer skills with knowledge of Microsoft programs like Word, Excel and Publisher

Salary Range and Benefits: Salary commensurate based on experience and education

Benefits include: 403B plan with employer match, available medical, dental and vision coverage, paid personal, sick and vacation leave and amazing co-workers!

To Apply:

Submit cover letter, resume and salary requirements to Sherri Boyd, Arc Michigan Executive Director and CEO, at [sherri@arcmi.org](mailto:sherri@arcmi.org) or 1325 S. Washington Avenue, Lansing MI 48910 by February 15, 2019.

### **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>.

## **CMH Association's Officers and Staff Contact Information:**

### **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

## **CMHA WEEKLY UPDATE**

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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](mailto:Stonejoe09@gmail.com); (989) 390-2284  
First Vice President: Lois Shulman; [Loisshulman@comcast.net](mailto:Loisshulman@comcast.net); (248) 361-0219  
Second Vice President: Carl Rice Jr; [cricejr@outlook.com](mailto:cricejr@outlook.com); (517) 745-2124  
Secretary: Cathy Kellerman; [balcat3@live.com](mailto:balcat3@live.com); (231) 924-3972  
Treasurer: Craig Reiter; [gullivercraig@gmail.com](mailto:gullivercraig@gmail.com); (906) 283-3451  
Immediate Past President: Bill Davie; [bill49866@gmail.com](mailto:bill49866@gmail.com); (906) 226-4063

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