

# Interim President and CEO Report Eric Doeh June 2021

Significant time has been spent focusing on our response to the series of bills by Rep. Mary Whiteford aimed at eliminating the PIHPs and replacing them with a single Administrative Service Organization (ASO). The flagship bill HB 4925 is Rep. Mary Whiteford's version of a system redesign that is focused on the following: 1) eliminating the PIHPs (10); 2) creating an ASO to manage behavioral health care for the entire State; 3) ASO would bear zero risk; 4) create a 15-member public behavioral health oversight council; 5) supposedly the ASO structure would eliminate administrative barriers.

I had an opportunity to meet with Rep. Mary Whiteford to address significant issues the bill, if passed, would present. She appears to be open to revisions and even other ideas aimed at achieving accessibility and efficiency. Rep. Mary Whiteford is schedule to conduct a listening tour this summer and we are looking forward to hosting her in August.

Our core principles remain the same no matter Rep. Mary Whiteford's redesign plan or that which has been led by Sen. Mike Shirkey. The following must remain:

- 1) Behavioral health redesign inclusive of integration must remain within the public mental health system.
- 2) Services must remain consistent and uninterrupted for the individuals we serve no matter where they reside.
- 3) Ultimate control of the finances must remain in the public sphere.
- 4) If a system redesign is contemplated, each entity must retain its own risk.
- 5) Shared savings must be reinvested in services to improve the lives of the individuals we serve.

It appears that the timing on Rep. Whiteford's redesign is not necessarily in accordance with the budget (the budget is due to the Governor on July 1, 2021). The July 1 date was self-imposed by the legislators and it is anticipated that that deadline will be extended. The good news about this is that it provides additional time to organize and advocate against this redesign.

Additional good news is the fact that May's revenue topped forecast by \$1 billion—that is the revenues to the State's General and School Aid funds. This also means that Gov. Whitmer and the Legislature now have \$4.5 billion more in General and School Aid fund revenues avalable to spend than expected at the start of the calendar year for the current 2020 – 2021 and upcoming 2021 – 2022 fiscal years. This news provides for a positive outlook regarding our general fund request.

As DWIHN prepares for the future, we must ensure that we are leaders in this region. To do so, we must set a plan that makes us indispensiable no matter the redesign. To guarantee

that, we must be willing to be bold and innovative in ideas and implementation of those ideas. For example, our clinical plan of developing opioid health homes, behavioral health homes, Certified Community Behavioral Health Clinics, mobile crisis services, and our crisis continuum must remain on course. Our operational plan of bringing in our access center, developing a care coordination platform that links behavioral health and physical health in real time, universal credentialing, universal recipient rights training, a risk matrix that evaluates our providers, and innovative and alternative payment models must drive us towards better delivery of services and administrative efficiency.

## **ADVOCACY/LEGISLATIVE EFFORTS**

A Resolution is being developed, advocating for the sustainment of community mental health services that protects the needs of people served. Shared with elected leaders, MDHHS, Downriver Community Conference and Western Conference of Mayors, advocacy groups and persons served, this resolution is aimed at highlighting all of the many accomplishments by DWIHN/CMHs as well as our innovation and reasons of keeping behavioral health in the public sphere. We are also working with the Association and the other PIHPs to develop a cohesive and coherent plan in opposition to Rep. Mary Whiteford's redesign plan.

We distributed a position paper on DWIHN's perspective on <u>Integrated Healthcare That</u> <u>Prioritizes People and The Public Mental Health System</u>. The paper was shared widely with our providers, people served, community stakeholders, legislators and advocacy groups. <u>https://dwihn.org/carousel-IHC-Prioritizes-People-Public-Health-System.pdf</u>

We continue to work with our lobbyists, Public Affairs Associates (PAA), to engage legislators on their ideas on reshaping our behavioral healthcare system. Ongoing conversations are being held with MDHHS leadership.

The shortage of workers, in particular clinicians, continues to be a major concern for our providers and the network. We have developed a work group with the provider network to share some ideas and come up with solutions to address this issue. We have also had communications with MDHHS so that we look at other options, including licensing requirements and certification programs that allow for upward mobility.

### MAY MENTAL HEALTH AWARENESS MONTH AND STAFF APPRECIATION

DWIHN held a Staff Appreciation/Mental Health Break for our employees on May 25 at the DWIHN building. About 200 people participated. It was also the kickoff of the Employee Appreciation program called "Shining Star", where employees and departments are recognized for their hard work.

As part of our outreach efforts, DWIHN held our "My Mental Health Hero" Campaign on our social media sites. We reached out to staff, providers and people we serve to ask them to share the name of their mental health hero. It was so well received that Senator Debbie Stabenow even participated and shared her hero as well. About 30-40 people participated in this campaign.

## **INTERIM CHIEF NETWORK OFFICER**

I have appointed Manny Singla as Interim Chief Network Officer. He will serve in this role to assist me during my appointment as Interim President and CEO. Manny will continue to serve in his role as Chief Information Officer during this period.

## **COVID-19 EFFORTS**

DWIHN continues to provide resources for our members during this pandemic including Behavioral Health Urgent Care Services, COVID recovery homes, COVID residential homes, crisis stabilization services, and access to Personal Protection Equipment (PPE). COVID-19 positive numbers had sharp increase in March and April, but we started to see some decline in May. DWIHN continues to share COVID vaccine information in Town Hall meetings and through events with the City of Detroit.

# **ACCESS CENTER**

We continued our efforts to hire three part-time staff in the SUD Area of the Call Center. We have implemented performance metrics for each call center unit. We are focusing our processes towards "First Call Resolution" and continue to work with staff on processing techniques, managing staff schedules to leverage ultimate coverage, implementation of a quality program, created standardized quality rating standard, began silent monitoring with real-time feedback, and began bi-weekly all staff/training meetings. We are also holding ongoing meetings with our CRSP Providers to increase communication and improve processes.

### **CUSTOMER SERVICE**

On June 9, DWIHN collaborated with the City of Detroit to host the "Vaccine Town Hall Discussion for People with Disabilities" with our very own Dr. Shama Faheem and Chief Public Health Officer, Denise Fair. This conversation highlighted the partnership of one of our very own peer mentors, Jaime Junior, who is a member of the City of Detroit's Office of Disability Rights. This town hall was meant to educate and offer resources to the people we serve about the COVID-19 vaccination. The Detroit Office for Disabilities Affairs is designed to increase independence, opportunities, community participation, safety, and wellness of persons with disabilities in the City of Detroit. Our peers work to advocate and ensure inclusion, representation, and equity of persons with disabilities as it relates to the City's programs and services, including housing, transportation, communications and employment opportunities.

DWIHN staff planned, coordinated and facilitated the "Bridging the Gap" monthly series, for peers and community health workers. The focus is social determinants of health and the monthly speakers addressed reducing stigma and labels.

# FACILITIES



### **Crisis Assessment Center**

- ✓ January Prelim meeting with community
- ✓ February All mechanical, abatement, plumbing, electrical, stormwater plans uploaded to City
- ✓ February Prelim paperwork submitted to Flagstar Bank
- ✓ March Construction site plans delivered to City Final Plan Review
- ✓ End of March Public hearing with City of Detroit
- ✓ April 12 Issue RFP
- ✓ May 4 Community Meeting
- ✓ May 19 POSTPONED 2 WEEKS TO ALLOW FOR ADDT'L QUESTIONS
- ✓ June 2-8 RFP Interview Process
- June 11 Board Executive Committee
- June 16 Full Board Meeting
- June 29 City of Detroit Building Zoning Appeals Dept Hearing

# **Milwaukee Building**

- ✓ Social Distancing/Glass Installation completed the week of March 22
- Board Room Renovation
  - relocation/renovation of the board table waiting on two pieces to arrive for max social distancing
  - $\circ$   $\;$  installation of carpet ordered, to be installed after table moved
  - moving electrical
  - paint/touch-up to be done after table moved

# **INTEGRATED HEALTHCARE**

DWIHN continues to meet with MDHHS on an ongoing basis to advocate for the expansion of Behavioral Health Homes throughout the State of Michigan and to include Region 7 (Detroit Wayne) in that expansion. Additional funding is being recommended at the State level to add at least two regions to this program. DWIHN is working with a consultant from The National Council of Behavioral Health on a Behavioral Health Home work plan to ensure DWIHN is well positioned to take on this responsibility. This model is an integrated care approach to services that treats the whole person in regard to both behavioral and physical health. The target date for this expansion is October of 2021. DWIHN is partnering with Wayne Health and Ford X to provide mobile physical and behavioral health outreach and engagement for members of our community. This will be accomplished through identifying area "hot spots" and providing mental health screening, referral and treatment services in those areas. This utilizes a "no 4-wall approach", which improves timely access into services.

DWIHN launched a shared electronic data platform with Health Plan #1 on June 1, 2021. This platform is being utilized to improve care coordination and consultation.

# **Residential Services**

Residential staff continue to closely monitoring COVID-19 related issues including tracking the number of COVID positive adult foster care staff and members and number of persons receiving Covid-19 vaccinations. Each month we are seeing an improvement in overall vaccination numbers. Eighty percent (86%) of persons living in licensed residential settings have been fully vaccinated. If you include persons that have received the first dose, it increases to 88%.

## **CHILDREN'S INITIATIVES**

<u>Autism</u> - DWIHN closed its' RFP expansion grant and is currently reviewing all applications. There has recently been an identified need for more autism evaluation services due to a workforce shortage and DWIHN is working with an identified provider to provide temporary assistance in this area.

<u>School Success Initiative</u> - DPSCD reported no issue with the curriculum DWIHN submitted. School-based providers have been trained in the Michigan Model for Health. It is reported that the training was well received. DPSCD expressed the value of having CMH agencies in the schools and will work to ensure that the schools are aware of the services that are being offered/provided. DPSCD has requested DWIHN to provide training on the Question Persuade Response model. This will be coordinated through our Workforce Development Department. DWIHN has also began working on phase three of the initiative, which consists of establishing Memorandums of Understanding (MOU) with the schools that have schoolbased health centers. DWIHN met with Ascension (who are in five of our School Success Initiative schools) to discuss the establishment of a MOU. This will assist in linking Tier 1 and two youth to the school-based health centers and linking Tier 3 youth to behavioral health services through our CMH agencies.

### **SUBSTANCE USE SERVICES**

DWIHN continues to establish an Opioid Health Home. The team meets weekly on its implementation plan to ensure DWIHN is capturing all needed information in our electronic health record. DWIHN received technical assistance from MDHHS and the three regions who have been utilizing this model over the past year. DWIHN is the Lead Entity for our region and has nine Health Partners providing the direct services. There are 111 individuals currently receiving services through the Opioid Health Home. DWIHN has expanded SBIRT services to three SUD agencies. DWIHN is receiving additional Covid-19 Relief funding (\$3 Million) through the State of Michigan.

# FINANCE

Based on projections as of December 31, 2020, our CFO determined that DWIHN had a minimum of \$5 million in additional State general fund for allocation to eligible programs in an effort to not lapse these funds at September 30, 2021. DWIHN's executive team presented recommendations to the Finance Committee on June 2, 2021. These recommendations were approved by the Finance Committee. Some of the recommendations included: 1) augmenting funding for our summer youth program; 2) providing technology and equipment to our residential communities; and 3) extending our jail diversion law enforcement pilot program with five additional cities. Board actions were presented at the Program Compliance Committee meeting on June 9, 2021. The CFO will review general fund spending in August to determine if any additional State general fund dollars will likely be available for allocation and spent by September 30, 2021. If so, recommendations will be presented to the Chair of the Finance Committee for review and approval to seek exigent approval from the Board Chair. This is a critical issue.

The proposed FY22 budget is being prepared for submission, review and approval pursuant to Act 258 of the Public Acts of 1974 (Michigan Mental Health Code), Section 330.1226. The joint Finance/Program Compliance Committee meeting is scheduled for August 4, 2021.

DWIHN has requested the submission of certain data by May 31, 2021 from thirteen (13) skill building providers in an effort to evaluate the amount of financial assistance DWIHN would provide immediately. Skill building providers have incurred over 75% in lost revenue post the pandemic. Providing immediate assistance is necessary to ensure these providers remain in business to service our members once the pandemic subsides.

The Finance and Children's divisions of DWIHN are working on the development of a payment incentive model for our Children's providers. We anticipate the framework will be developed, provider review and MDHHS approval in time for an October 1, 2021 implementation. Given this timeline, DWIHN will present this model for approval at the September Full Board meeting.

# **RECIPIENT RIGHTS**

The Recipient Rights department is working with IT to develop an online complaint process to reduce paper and improve efficiency. Staff has completed most of the online data fields. We are now in phase two of moving to "Therefore" in the training module section of our process. This will test the process to ensure the data and documents are captured to retrieve on a later date for an appeal or completing an assessment for the State of Michigan.

Another project was to implement the \$50.00 provider fee for all providers failing to train their employees within 30 days of their hire date. This means they are not in compliance with the Mental Health Code. We have developed the provider letter explaining the details of their violation and its fees. After executive review, it will move for our Legal team's approval.

May was Mental Health month and our Recipient Rights department conducted outreach at the Clubhouse to develop a working relationship with staff and recipients, which was very

successful. The team volunteered in a safe manner and developed a memorable day for the staff and the recipients. Staff is currently working with Constituents' Voice to develop a program to ensure our recipients can and will be afforded the opportunity to vote. We also conducted a virtual staff picnic and played an online scavenger hunt game as a morale booster. Both were successful and the team was excited and everybody participated.

### **COMMUNICATIONS**

Our "Ask the Doc" segments continue to be disseminated throughout our provider network and community stakeholders to help address and educate people about COVID-19. The newsletters help answer questions and address myths and some of the hesitancy surrounding vaccinations. Several surveys, including those collected by the Centers for Disease Control (CDC), have shown increases in self-reported behavioral health symptoms. We have seen tremendous feedback and address a lot of good topics. Please visit <u>AskTheDoc@dwihn.org</u>.

May was a very busy month as we recognized Mental Health Awareness month with several outreach events, social media campaigns and media mentions.

<u>Teens for Vaccines</u>: On May 3-19, in partnership with the Detroit Health Department, Ascension and Henry Ford Health, DPSCD offered virtual education information sessions and vaccinations for everyone 12 and up.

<u>Courageous Conversations for Students & Parents</u>: On May 25, a virtual town hall conversation was held in partnership with Black Family Development and Community Living Services to find out why parents and students are faced with more mental health concerns during the pandemic, what some of those issues have been and how to deal with them. There was community coverage by Local 4 and WWJ.

On June 17-18, DWIHN will partner with LAHC and CUYFD in recognition of Men's Health Awareness Month for the <u>Man in the Midst of a Pandemic</u> conference, with Fox 2's Josh Landon to address a variety of health issues specific to men, highlighting physical as well as mental health conditions that may cause varying symptoms affecting men differently than women.

### In the Media

WDIV-TV4 - Channel 4 promoted the DWIHN Mental Health Town Hall in which DWIHN Chief Clinical Officer, Melissa Moody, and DWIHN Chief Clinical Officer, Dr. Shama Faheem, participated. It was a conversation geared toward families and children. The story also mentioned the Mindwise assessment tool on the DWIHN website.

https://www.clickondetroit.com/health/2021/05/25/detroit-wayne-integrated-healthnetwork-hosts-virtual-conversation-on-mental-health-for-parents-students/

WWJ Newsradio 950AM - promoted the DWIHN Mental Health Town Hall and the Mindwise assessment tool also on the day of the event with a soundbite from Melissa Moody. As a bonus, they aired it the next day discussing the DWIHN Mindwise tool.

WDIV-TV4 & Scripps-Mental Health messaging aired on both Channel 4 and all Scripps outlets (Channel 7, TV 20 & Bounce) promoting the resources that are available to anyone with mental health concerns, as well as sharing the 24/7 Access Helpline 24/7.

Beasley Media Group - Radio messages are airing across several Beasley Media Group radio stations promoting the ReachUsDetroit.org therapy line. The stations included are KISS FM 105.9 & Bounce.

Comcast – DWIHN's SUD department has a partnership with Comcast. The 6-month agreement allows Comcast to air SUD messages on various platforms. So far over 100,000 impressions have been delivered.

Community Newspapers – DWIHN's partnership continues with the Michigan Chronicle as we are participated in a Mental Health section in the June 24th issue. There is also DWIHN messaging in the Arab American News.

### Social Media

MI Unites for Mental Health Awareness - DWIHN along with several other community mental health organizations submitted videos and photos of people served sharing their mental health tips and successes. Chief Medical Officer Dr. Shama Faheem also submitted a video sharing the importance of taking care of your mental health.

MDHHS Stay Well Campaign - DWIHN social media posts share the workshops and webinars focused on "Uplifting our Unemployed Community" as well as other conversations focused on teen mental wellness, immigrant communities and direct care supervisory personnel.

Top Performing Posts - Social media saw an increase in followers and impressions over Facebook, LinkedIn and Instagram. Top performing posts included the Everybody vs. Stigma picture posted from the Staff Appreciation event, as well as My Mental Health Hero campaign.

### **COMMUNITY OUTREACH**

Children's Initiatives-Children's Mental Health Awareness Day: This was a virtual workshop for children and families to learn about what DWIHN resources are available to the community.