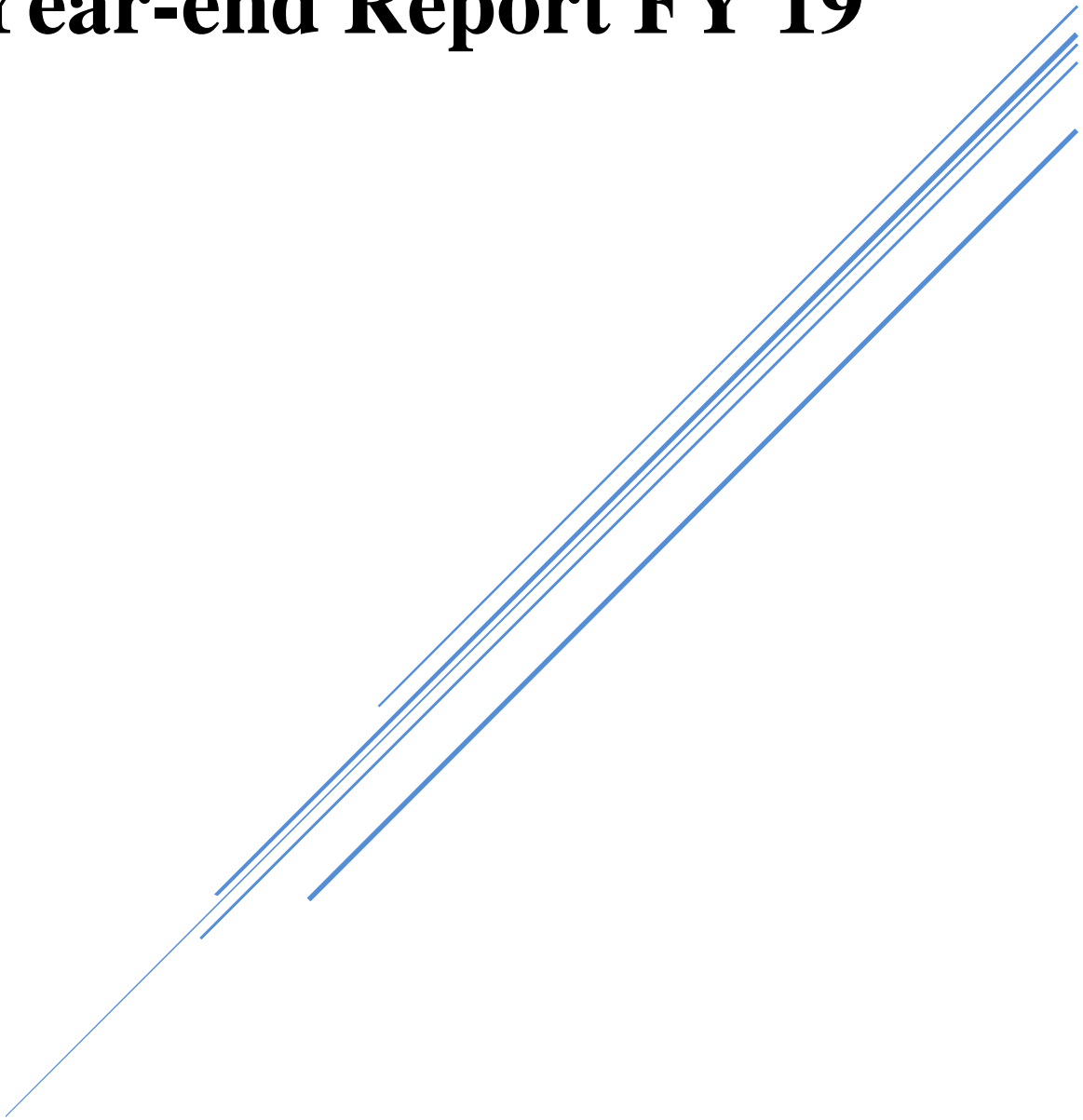


SUBSTANCE USE DISORDER
INITIATIVES

Substance Use Disorder Year-end Report FY 19



Darlene D. Owens, Director, Substance Use Disorder Initiatives
Prevention, Treatment and Recovery

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Detroit Wayne Integrated Health Network (DWIHN) Substance Use Disorders (SUD) FY 19

Executive Summary

DWUHN's SUD department developed strategies using a data informed process to implement innovative programming. This report uses data to generate a more complete analysis of need in our region. It demonstrates emerging drug problems in the Detroit Wayne County area. It contains data from Michigan Prevention Data System (MPDS) and our Mental Health Wellness Information Network (MH WIN) web based technology system, and the Wayne County Medical Examiner's office. As a result, DWIHN has been strategic in meeting the challenges presented to allocate resources using the information available.

Substance use disorders touch many lives in many ways, DWIHN coordinates prevention, treatment and recovery efforts for Wayne County residents. Our data collection shows that heroin and alcohol use are higher in our region, and while some areas experience greater consequences, use and associated problems are spread throughout the region. DWIHN believes that there is a continued need for SUD education and having a recovery oriented system of care that is consumer, community and data driven.

The data will illustrate how many clients we served for prevention and treatment and how the drug problem has impacted our community. DWIHN has created some initiatives that target or address Heroin/Opioid efforts going on in the Detroit Wayne County area. It is evident that substance abusers suffer from mental health issues and many have criminal justice involvement. We have created some innovative programs that target or address these for risk(s) factors.

Department Objectives

The SUD Department creates an environment conducive to recovery of clients in prevention and substance abuse treatment programs. Recovery from alcohol and drug problems is a process of change through which an individual achieves abstinence and improved health, wellness and quality of life.

DWIHN provides a comprehensive, integrated, evidence-based practices, trauma informed care, gender specific, and a culturally sensitive service array. Serving individuals from 11 years of age to 65+ years seeking help. Services are holistic, treating a person's mind body and spirit; our services are individualized, client-centered and work with each person's strengths, and abilities.

Major Department Initiatives

- Naloxone Initiative, on going
- Increase Prescription and Heroin Efforts, on going
- Increase Marijuana awareness facts, on going
- Reduce Childhood and Underage Drinking, on going
- Reduce Prescription and Over the Counter Drug Abuse/Misuse, on going
- Reduce Youth Access to Tobacco, on going
- Reduce Illicit Drug Use, on going
- Increase Environmental Change, on going
- Increase Community Advocacy, on going
- Increase Multimedia campaign to encourage prevention, treatment and recovery services through: television public service advertisement (PSAs), billboards, bus signage, radio, ongoing
- Increase Harm Reduction Strategies, on going

SUD Block Grant Initiatives

1. State Target Grants:
 - a. Strengthening Families Program
 - b. Motivational Interviewing in Medication Assisted Treatment (MAT) Programs
 - c. Project Assert
 - d. Enhancement & Implementation in MAT Programs
 - e. Maintaining Independence and Sobriety through Systems Integration, Outreach, and Networking – Michigan Reentry Program (MISSION-CJ MI-REP) Project

2. State Opioid Response Grants:
 - a. Youth/Family Oriented Prevention Evidence Base Practices (EBPs)
 - b. Overdose Education and Naloxone Distribution (OEND) with Harm Reduction
 - c. Peers in Federally Qualified Health centers (FQHCs), Urgent Care, and other outpatient settings for Screening Brief Intervention, Referral to Treatment (SBIRT)
 - d. Opioid Use Disorder (OUD) Treatment Costs
 - e. Jail-Based (Medication Assisted Treatment (MAT) Expansion
 - f. Recovery Housing
 - g. OUD Recovery Services Costs
 - h. Mobile Care Units
 - i. GPRA Incentives
3. Gambling Program Initiative:
 - a. Increase Gambling Disorder (GD) awareness via media campaigns and related awareness methods;
 - b. Provide prevention and outreach services;
 - c. Increase use of the GD Help-line;
 - d. Implement and perform GD assessment and referral to treatment services;
 - e. Address the prevalence of GD across all populations.
4. Michigan Youth Treatment Infrastructure Enhancement (MYTIE)
 - a. The purpose of the MYTIE project is to increase access to and improve the quality of treatment and recovery support services for adolescent and transitional age youth 16 to 21 years, including those transitioning out of foster care, and their caregivers.

Prevention Data

DWIHN's prevention services were provided to 363,656 persons in the Detroit Wayne County area. Prevention services were provided as Individual-Based Programs and Strategies by the Number of Persons Served by Age, Gender, Race, and Ethnicity. Also they were addressed by Population-Based Programs and Strategies through the Number of Persons Served by Age, Gender, Race, and Ethnicity.

Detroit Wayne Take Back Day Results

Totals prescriptions collected for DEA National Take back for the Detroit Wayne County area in October 2018, April 2019 and October 2019:

- October 2018 = Totals 98 boxes 1994.4 lbs.
- April 2019 = Totals 71 boxes 1,348 lbs. (Increase access to deterra bags and utilization of deterra bags distributed in FY 19 helped to decrease the poundage of prescription drugs collected at takeback days)
- October 2019 = No information to date

The above collection locations were staffed by DWHIN SUD providers along with authorized law enforcement officials from 10:00 a.m. to 2:00 p.m. at various predetermined community sites.

Faith Based Initiatives (FBI)

DWIHN's Faith-Based Committee met at various locations in FY 2019. The FBI committee members meet monthly with the purpose of connecting faith-based leaders with educators, researchers and professionals within our network to create progressive dialogue and to address real concerns that faith-based organizations face within the communities they serve. Among the issues addressed are prevention, treatment, recovery, along with human-trafficking, trauma, mental health first aide, suicide prevention, gambling and youth engagement.



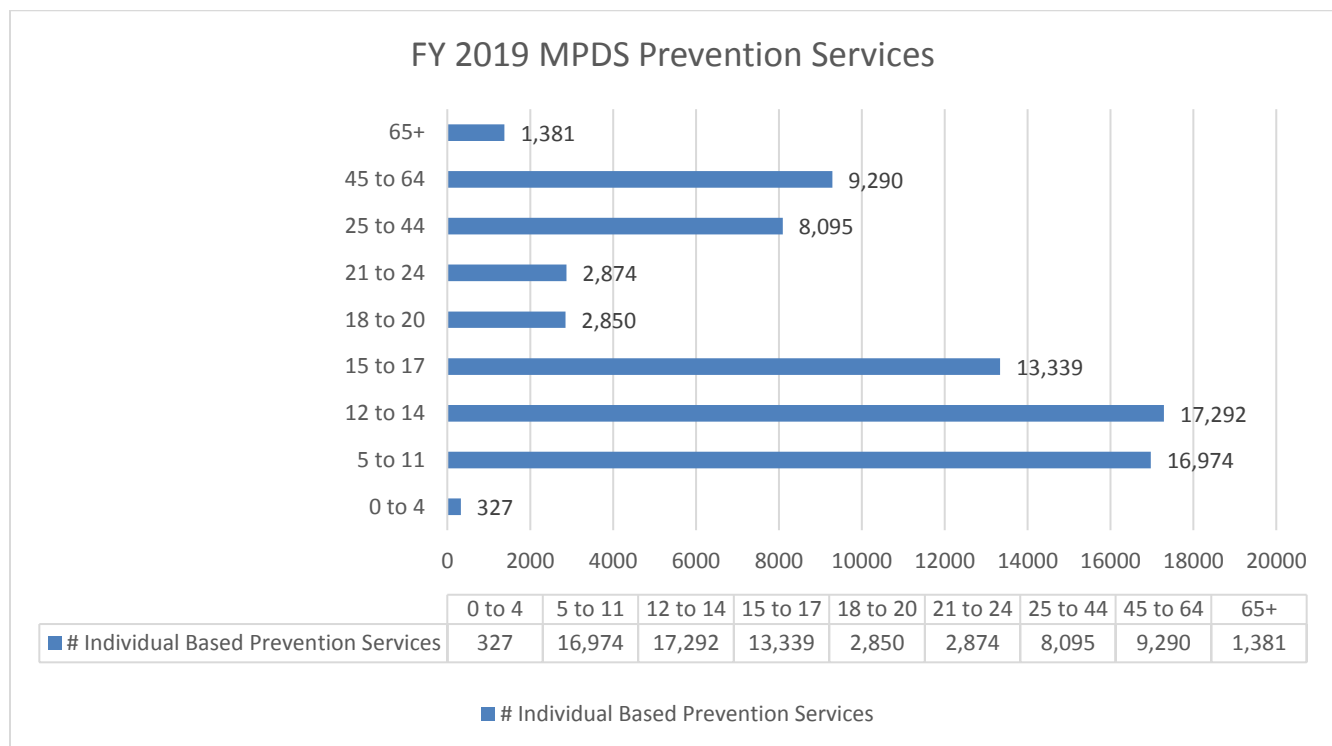
BABESWORLD prevention place is pictured above one of the hosts along with other Wayne County Faith Based Organizations.

The 5th Annual Wellness Beyond the Walls conference focused on “Prevention In the Faith Community During the Opioid Crisis!”

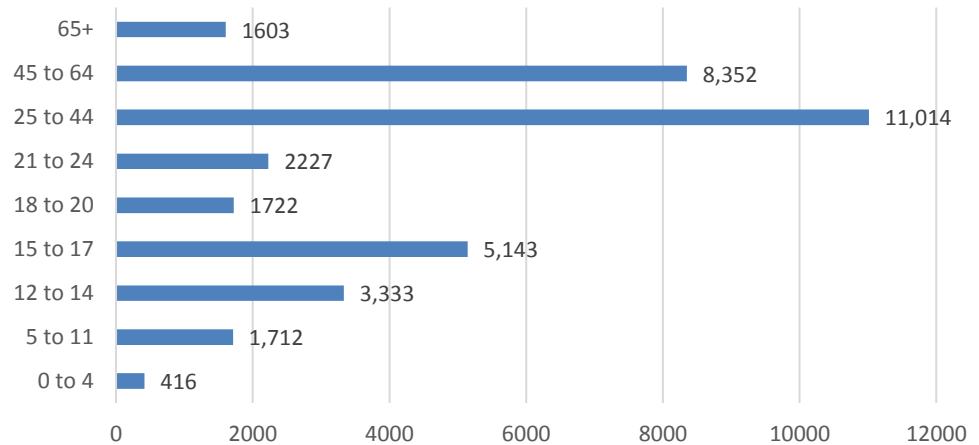


Michigan Prevention Data System

Michigan Prevention Data System (MPDS) for Substance Use Disorder Services (SUDS) is a staff activity reporting system that collects information about the recipients of service and type of activity. All Prevention Providers input data by type of intervention from service activities. They organize the data activities in the system monthly. MPDS maintains the prevention service strategies and activities that are conducted.



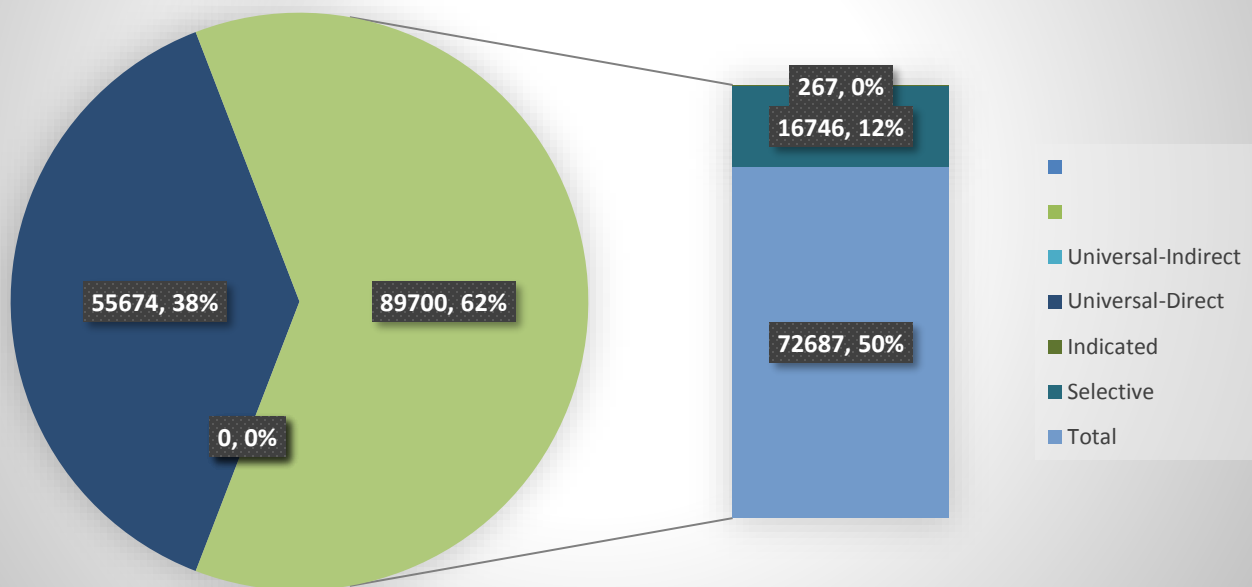
MPDS FY 2019 Prevention Services



	0 to 4	5 to 11	12 to 14	15 to 17	18 to 20	21 to 24	25 to 44	45 to 64	65+
# Population Based Prevention Services	416	1,712	3,333	5,143	1,722	2,227	11,014	8,352	1,603

■ # Population Based Prevention Services

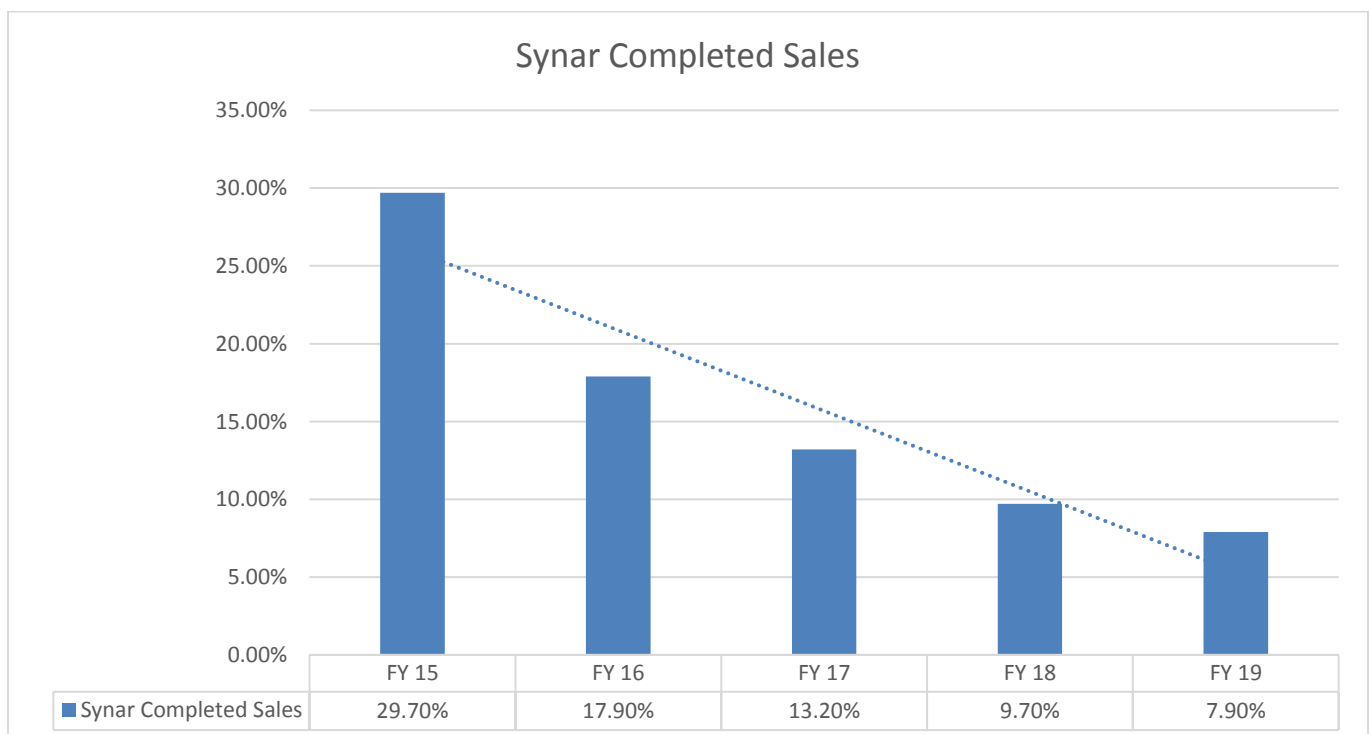
FY 2019 October 2018-September 2019 Number of Persons Served by Individual- or Population- Based Program or Strategy



Synar

The primary Designated Youth Tobacco Use Representatives (DYTUR) Synar Compliance Check providers. The DYTUR providers conduct tobacco compliance checks for all tobacco retailers in the county each summer as part of the activities surrounding the federal Synar amendment. As part of the project, these providers will work with local youth, substance abuse prevention agency partners, and local law enforcement to conduct compliance checks on stores that are randomly selected by the State of Michigan. Each spring, DWIHN and its partners receive the list of stores to be included in the project and begin work training youth, scheduling with our partners, and getting the compliance check forms ready for use. All youth and chaperones are trained in compliance with State of Michigan regulations and permission slips are signed by parents indicating their approval of their son/daughter's participation. In an effort to dismiss any gender bias, youth compliance checks are done with an equal number of male and female youth decoys. After completion of the checks, reports are submitted through DWIHN to the State of Michigan for reporting and analysis.

This graph shows another great improvement of the Synar program in Region 7 – the number of Synar completed sales to minors is steadily decreasing year after year. Again, the efforts of DWIHN's providers during the vendor education part of the Synar program (more direct visits and outreach) are working to improve our overall sales rate in the Region.



State Target Response (STR) Prevention Activities

STR fiscal year activities are from May 2018 to April 2019

Strengthening Families Program (SFP) 10-14

DWIHN is using SFP Iowa Model for Parents and Youth 10-14 in the Detroit Wayne area for those youth and families impacted by opioid dependence.

Our prevention providers are training youth ages (10-14) and families at high risk of prescription and opioid misuse and overdose with the Strengthen Families Model. They are improving the families involved social competencies; youths school performance; handling peer pressure; parent-child bonds and relationships; effective parenting skills; and family relationships.

There were a total of 78 parents and youth registered for SFP. The total number that completed the SFP as of May 2019 was 61 people.

Project ASSERT

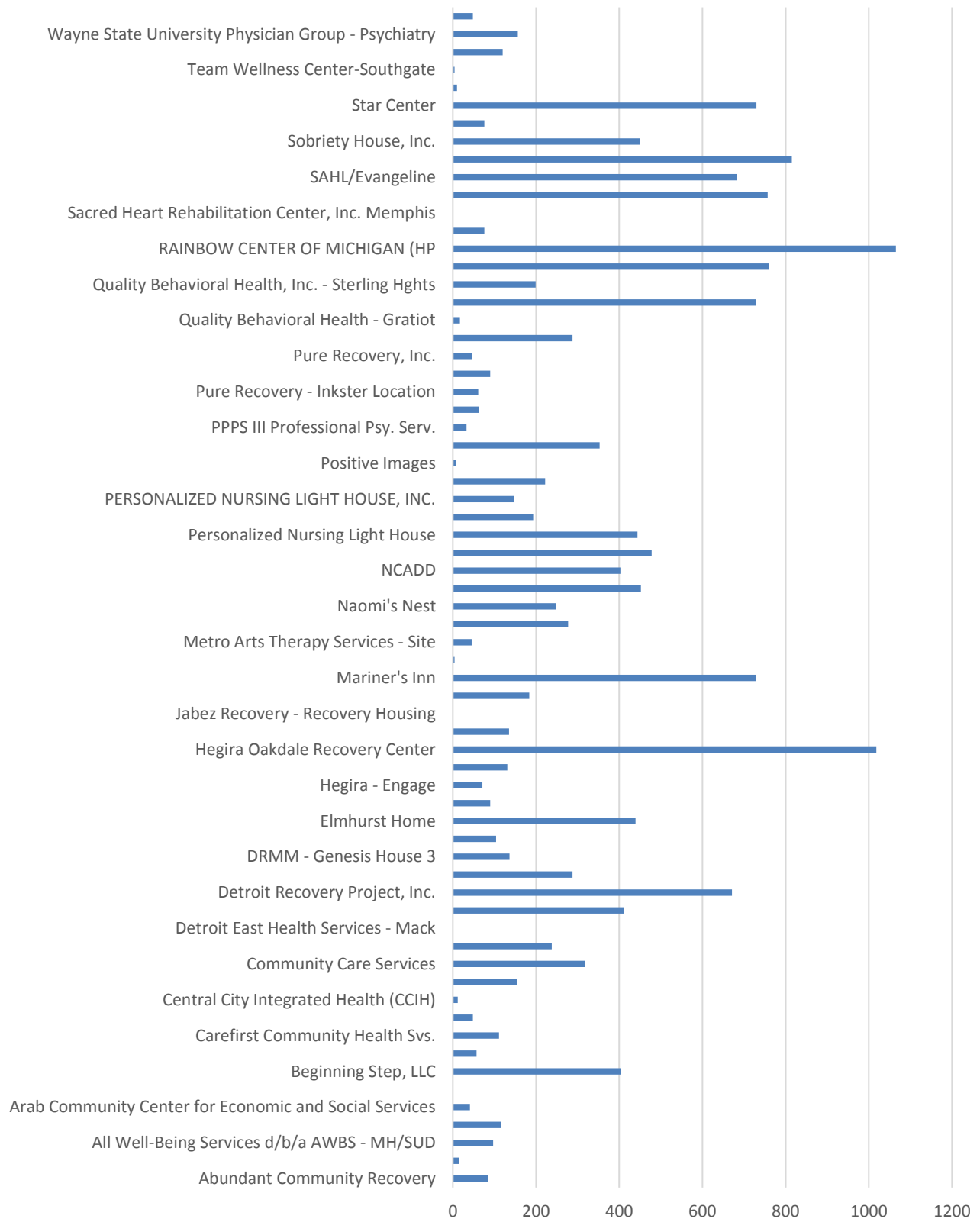
Preventionist or peer recovery coaches/mentors provided 504 brief screening to persons that present in ERs, FQHC, schools clinics and primary care settings that are in need of treatment or recovery services.

Gambling Disorder (GD) Initiative

Three prevention programs are increasing GD awareness via media campaigns and related awareness methods. They are providing prevention and outreach services and increasing use of the GD Help-line. These providers are implemented and performed 609 GD assessment and providing referrals to treatment services. These providers were trained on the Stacked Deck Model for youth that gambles.

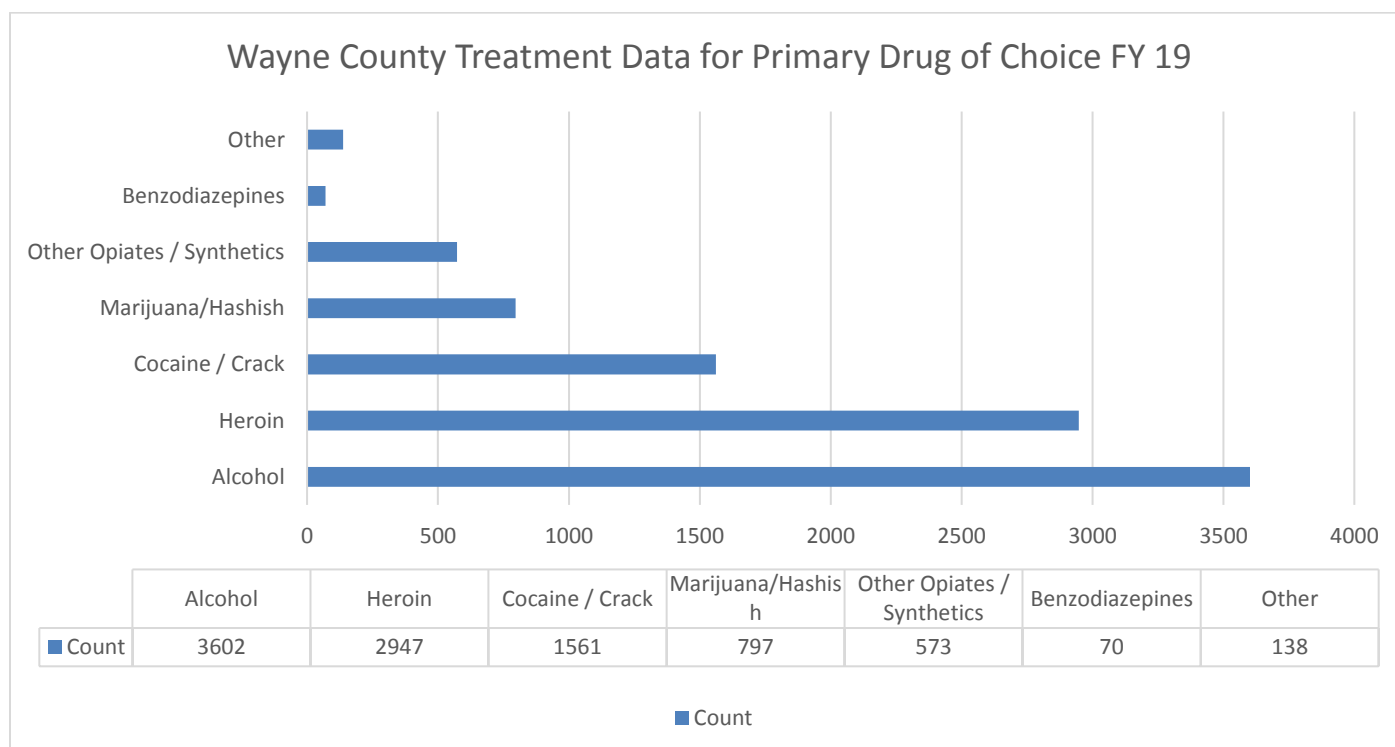
TREATMENT DATA

NUMBER OF CLIENTS SERVED PER PROVIDER IN FY 19 CHART



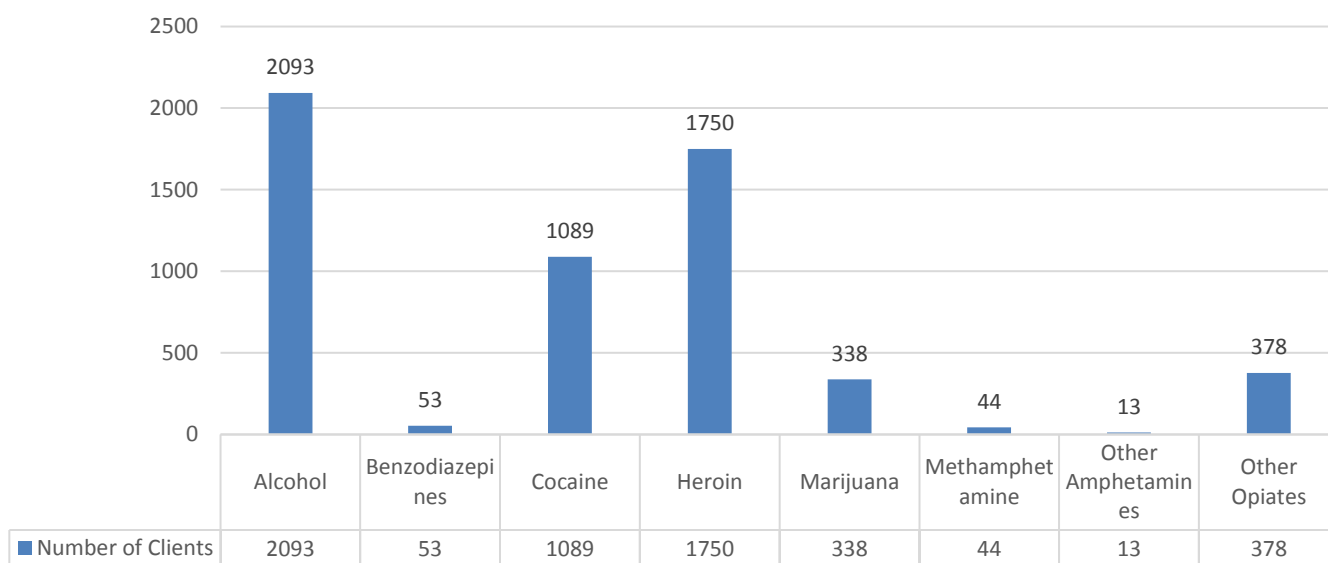
Provider	Number of Clients Served
Abundant Community Recovery Services	84
All Well-Being Services d/b/a AWBS	14
All Well-Being Services d/b/a AWBS – MH/SUD	97
All Well-Being Services d/b/a AWBS – Middlebelt	115
Arab Community Center for Economic and Social Services	41
Assured Family Services – Site	1
Beginning Step, LLC	404
Black Family Development – Conner	57
Carefirst Community Health Svs.	111
Carefirst Community Health Svs. – Site	48
Central City Integrated Health	12
Collingwood House	155
Community Care Services	317
Community Care Services – Taylor Outpatient	238
Detroit East Health Services – Mack	1
Detroit Recovery Project, Inc.	671
DRMM – Christian Guidance Center	288
DRMM – Genesis House 3	136
Eastwood Clinics Residential	104
Elmhurst Home	439
Growth Works – SUD	90
Hegira – Engage	71
Hegira – Westland SUD	131
Hegira Oakdale Recovery center	1,018
Hegira Programs SUD	135
Jabez Recovery – Recovery Housing	1
Lakeridge Village	184
Mariner’s Inn	728
Metro Arts Therapy Services	4
Metro Arts Therapy Services – Site	45
Metro East Harper/Chalmers Clinic	277
Naomis Nest	248
Nardin Park Recovery Center	452
NCADD	403
New Light Recovery Center	478
Personalized Nursing Light House	444
Personalized Nursing Light House – Canton	193
Personalized Nursing Light House Inc	146
Personalized Nursing Light House – SUD	222
Positive Images	7
Positive Images – SUD	353
PPPS III Professional Psy. Services	33
Pure Recovery	62
Pure Recovery Inkster Location	61
Pure Recovery Inc	46

Provider	Number of Clients Served
Quality Behavioral Health	288
Quality Behavioral Health – Gratiot	17
Quality Behavioral Health, Inc	728
Quality Behavioral Health, Inc – Sterling Heights	199
Quality Behavioral Health, Inc – Grand Blvd	760
Rainbow Center of Michigan	1,065
Redford Counseling	76
Sacred Heart Rehabilitation Center, Inc. Memphis	1
Sacred Heart/Clearview	757
SAHL/Evangeline	683
Self Help Addiction Rehabilitation, Inc. – SHAR	815
Sobriety House Inc.	449
Spectrum Child and Family Services	76
Star Center	730
Team Wellness Center- Russell	10
Team Wellness Center- Southgate	4
The Guidance Center	120
Wayne State University Physicians Group – Psych	156
Wolverine Human Services	48

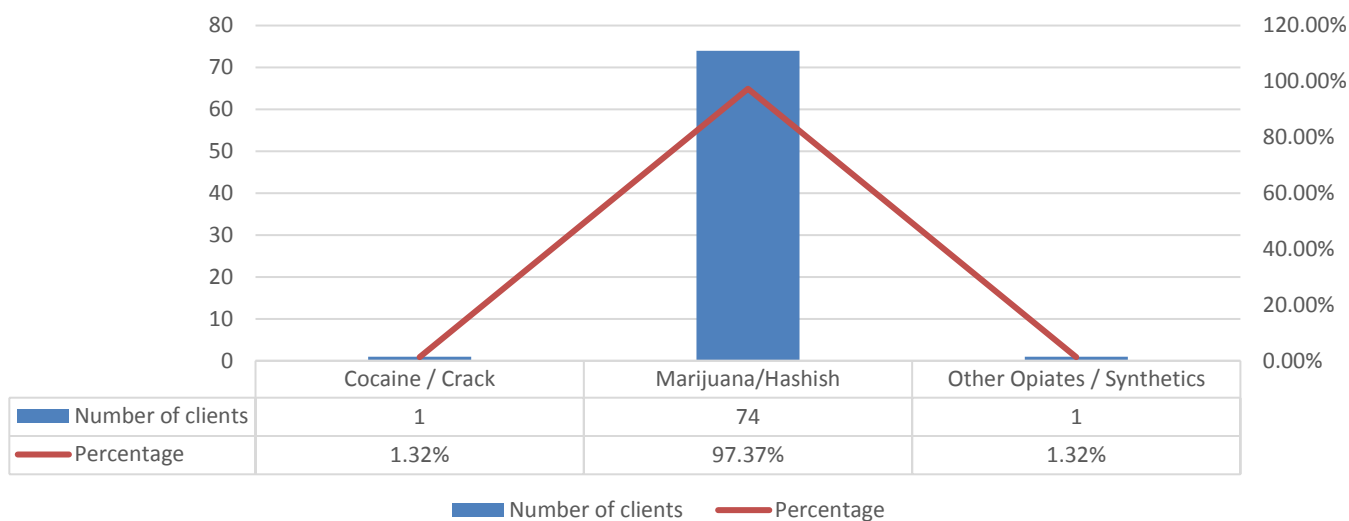


The primary drug of choice in Wayne County has shifted from Opioids to Alcohol in FY 19. We attribute this to ease of access and commercialization of alcohol and increase of funding for the opioid epidemic, as well as prescriber rates slowly decreasing.

Co-Occurring Consumers Primary Drug of Choice

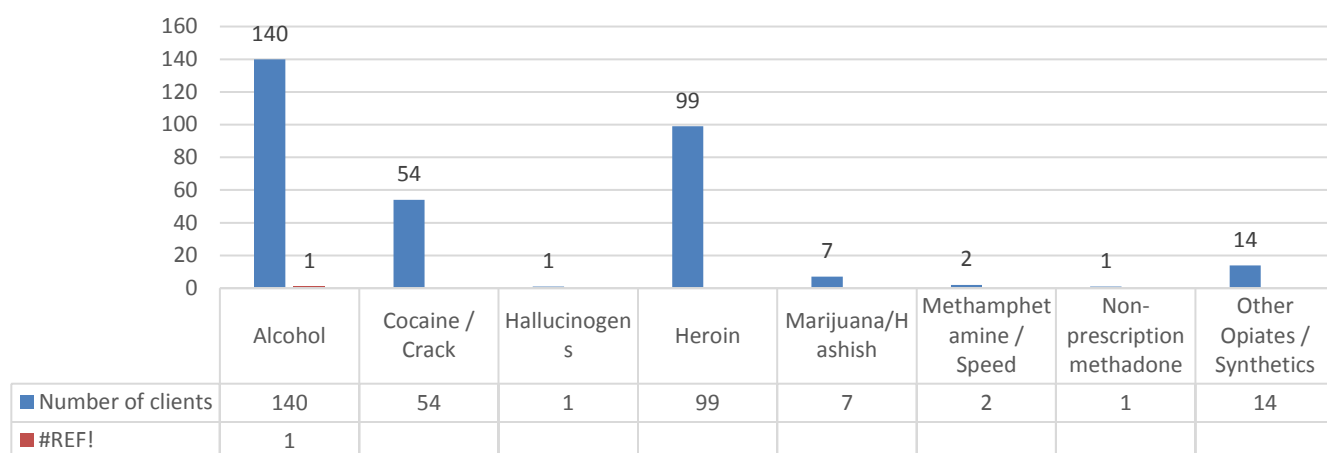


Adolescents Served Primary Drug of Choice



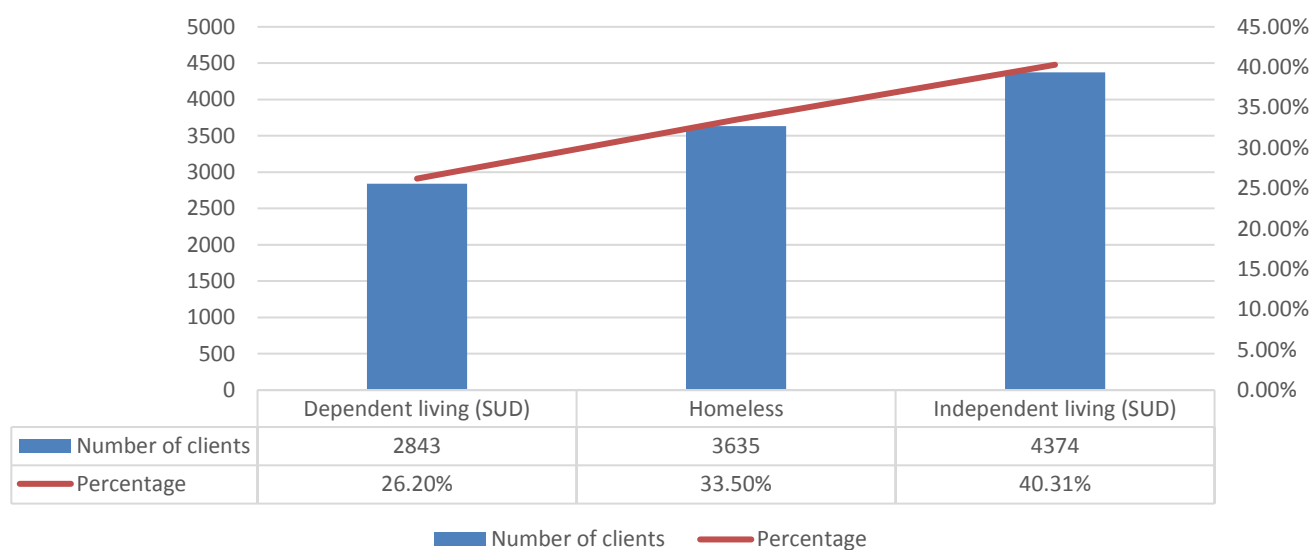
97.37% of adolescents sent to treatment for substance use disorder are presenting with marijuana as the primary drug of choice. This may be attributed to recent legislative changes, changes in perception of harm, and the commercialization and industrialization of marijuana.

Primary Drug of Choice for Veteran Consumers



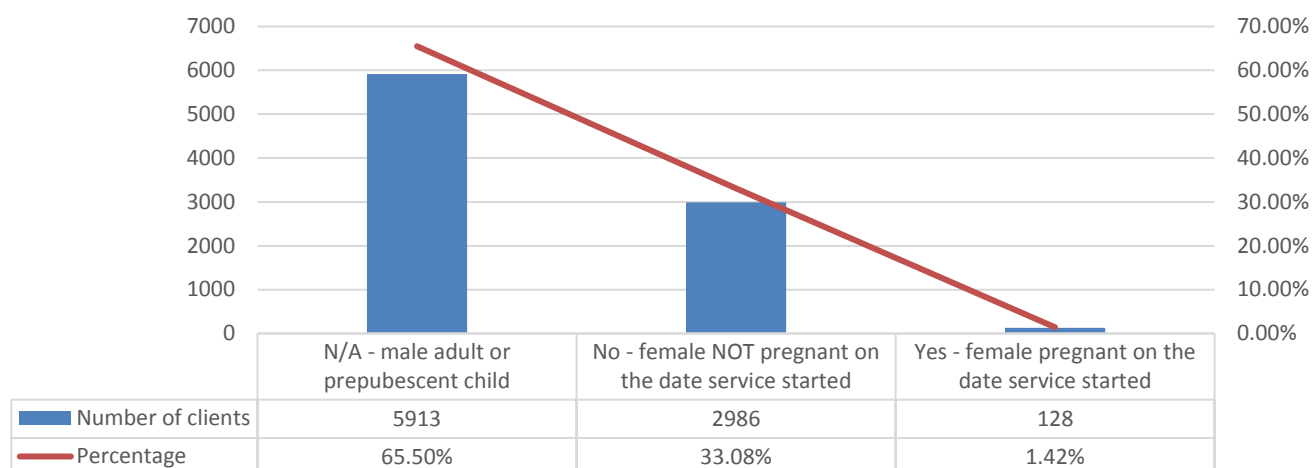
The primary drug of choice for veterans is alcohol, followed closely by heroin. This is attributed to ease of access to alcohol.

Living arrangements of Consumers Served

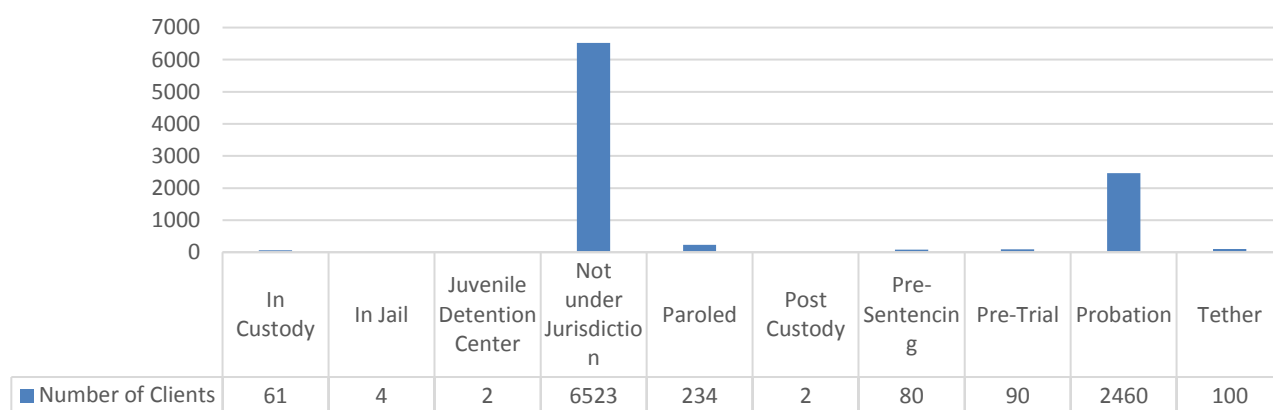


The majority of our SUD clients are living independently or otherwise in stable housing. Although 33.5% of our clients reported living arrangements as homeless.

Consumers Served and Pregnancy

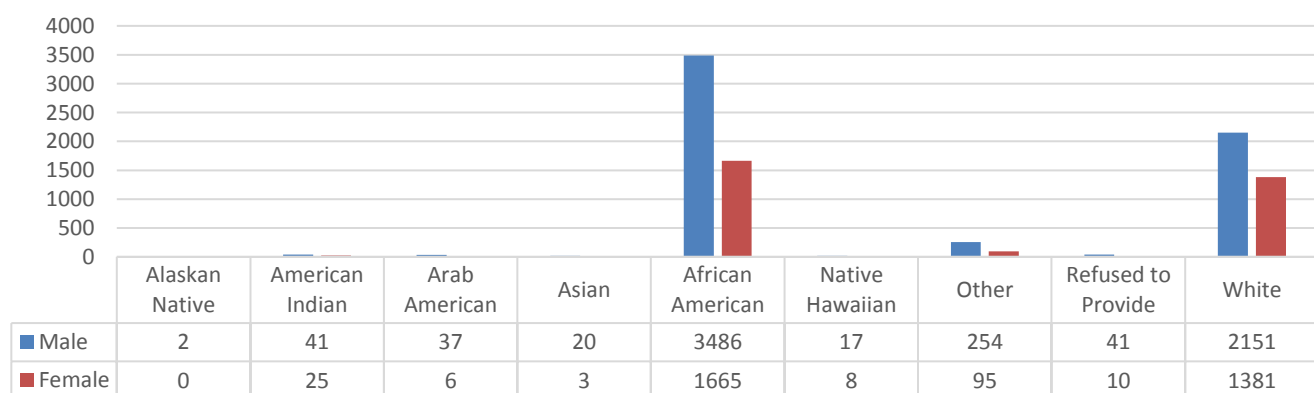


Correctional Status of Consumers Served



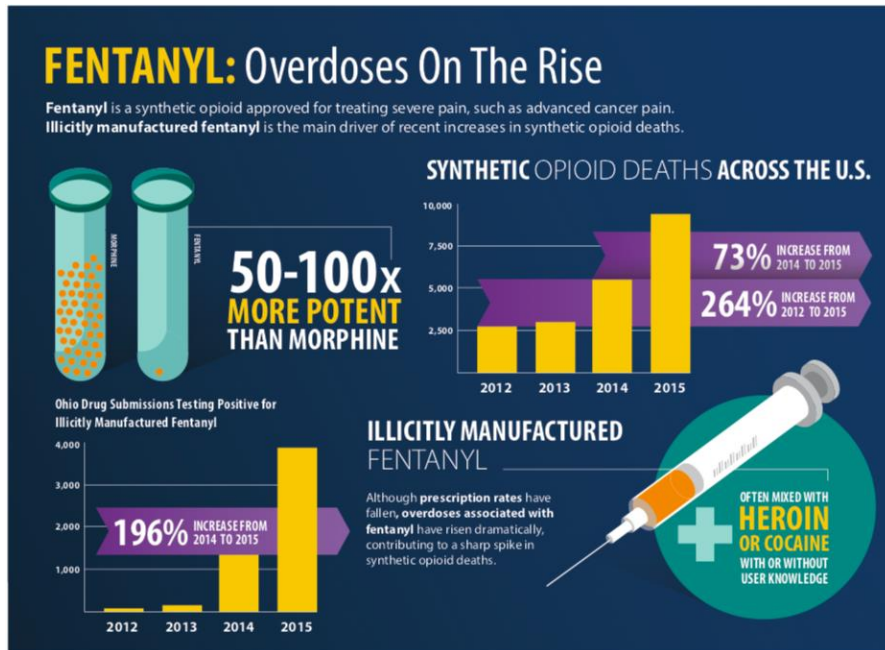
FY 19, 25.74 % of SUD consumers are on probation through Michigan Department of Corrections (MDOC).

Race of Consumers Served in SUD FY 19



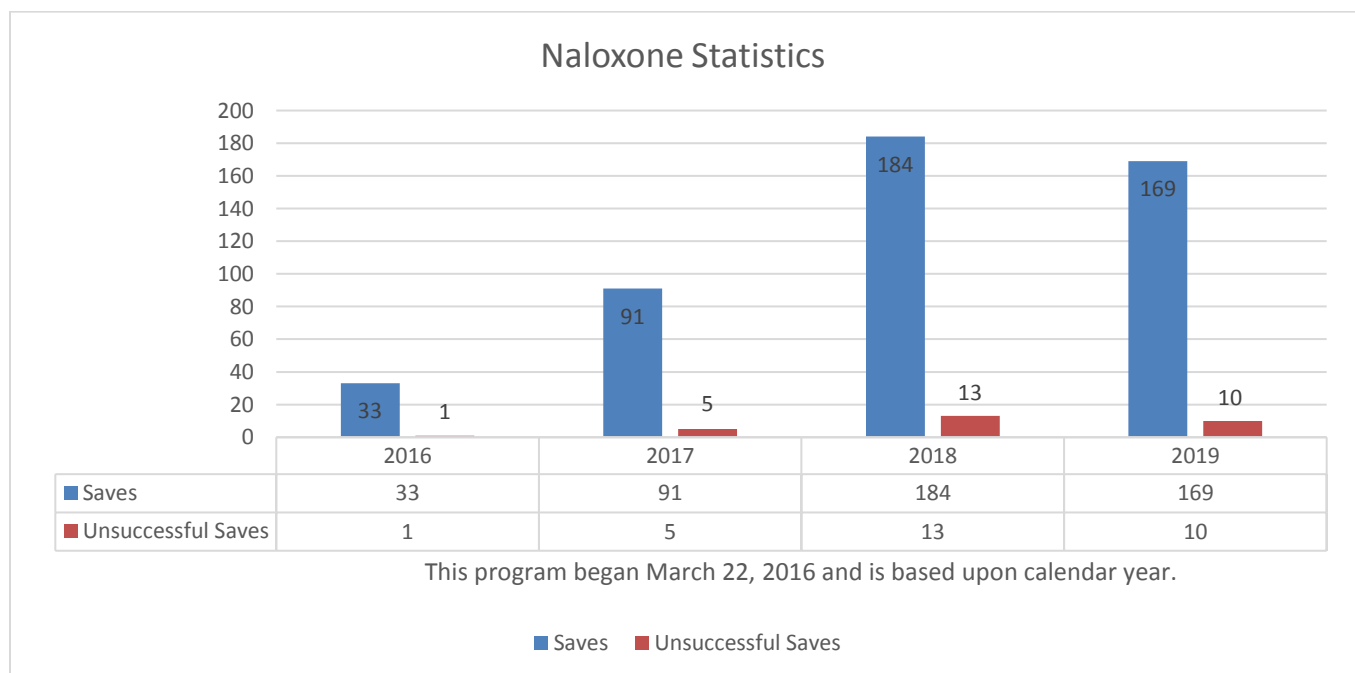
Naloxone Update

DWIHN began providing free training and distributing Naloxone kits March 22, 2016 to Wayne County law enforcement, our provider network, and the community. Naloxone blocks or reverses the effects of opioid medication, including extreme drowsiness, slowed breathing, or loss of consciousness. This initiative was implemented to respond to the increase in opioid overdose related deaths and to save lives in the Detroit Wayne County area.



DWIHN have trained 9,911 people this includes a variety of law enforcements officers, providers and people in the communities we serve as of September 30, 2019. DWIHN's Naloxone Initiative program has saved **477** lives since its inception. The saved lives are under reported. DWIHN only reports those saves that we have documentation to support this initiative.

Fentanyl is the driving force in the drug overdose deaths.



Heroin/Opioid Efforts



Deterra Bags:

► DWMHA purchased the Deterra Bags to aid in addressing the prescription abuse problem in the Detroit/Wayne County area. Deterra bags provide a convenient, discreet, environmentally and socially responsible method for getting rid of unused, unwanted, or expired prescription pills, liquids, and patches. Medications are deactivated, rendering them ineffective for misuse or abuse. The biodegradable bags contain an activated carbon that breaks down chemical compounds in the drugs, making them safe for landfill disposal.

► DWMHA launched the Deterra bags in the summer of 2016 that deactivates and dissolves unused prescriptions. It is eco-friendly just add water and throw in the kitchen trash. It is for patches, pills and liquids. We have distributed to senior citizens facilities. Distributed at town hall meetings and at health fairs.

Permanent Prescription Boxes Locations



Hamtramck Drug Free Community Coalition - Hamtramck Police Department, 3401 Evaline Hamtramck, MI 48212

Inkster Police Department

Abundant Community Services sites: Kiosk #1 located at 9600 Dexter, Detroit, MI 48221 Office of Doctor Craig A. Bailey M.D.

Kiosk #2 located at 15885 Woodward, Highland Park, MI 48203
Offices of B.A.S.S. Inc.

Kiosk #3 located at 9740 Conant Ave. Hamtramck, MI 48212, Office of Hamtramck Urgent Care.

Grosse Point (Beaumont) Community Health Coalition sites: #1) Grosse Pointe Woods Public Safety -20025 Mack Plaza Dr., Grosse Point, MI 48236

#2) City of Grosse Pointe Public Safety -17145 Maumee Avenue, Grosse Point, MI 48230

#3) Grosse Pointe Park Public Safety -15115 E Jefferson Avenue, Grosse Pointe Park, MI 48230

Allen Park Police Department- 16850 Southfield Road, Allen Park, MI 48101

Van Buren Township Police Dept.

River Rouge Police Dept.

Flat Rock Police Department 25500 Gibraltar Rd, Flat Rock, MI 48134

Grosse Ile Police Department – 24525 Meridian Rd, Grosse Ile Township, MI 48138 Phone:(734) 676-7100

Gibraltar Police Department- 29450 Munro Street, Gibraltar, MI 48173

Harper Woods Police Department -19617 Harper Ave., Harper Woods, MI 48225

Lincoln Park Police Department - 1427 Cleophus Pkwy, Lincoln Park, MI 48146

Livonia Police Department - 15050 Farmington Rd, Livonia, MI 48154

Melvindale Police Department- 3100 Oakwood Boulevard, Melvindale, MI 48122

Riverview Police Department- 14100 Civic Park Drive, Riverview, MI 48193

Rockwood Police Department- 32409 Fort Street, Rockwood, MI 48173

Wayne State University Police Dept.

Southgate Police Department - 14710 Reaume Parkway, Southgate, MI 48195

Taylor Police Department - 23515 Goddard Rd, Taylor, MI 48180

Romulus Police Department - 11165 Olive St, Romulus, MI 48174

Westland Police Department - 36701 Ford Rd, Westland, MI 48185

Woodhaven Police Department- 21869 West Road, Woodhaven, MI 48183

Wyandotte Police Department - 2015 Biddle Ave # 1, Wyandotte, MI 48192

Sumpter Township Police Department 23501 Sumpter Rd., Belleville, MI 48111

Wayne State University, 6050 Cass Ave., Detroit, MI 48202

Dearborn Police Department – 16099 Michigan Ave., Dearborn, MI 48126

Trenton Police Department 2800 Third St., Trenton, MI 48183

DWIHN Partnerships

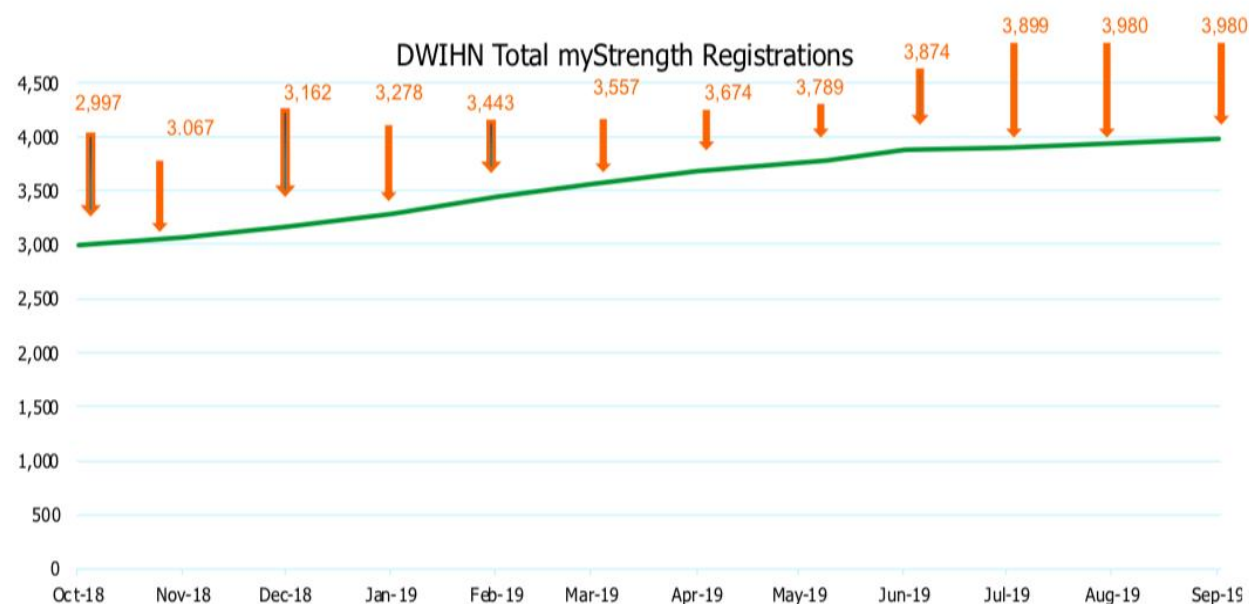
DWIHN works with two **Families Against Narcotics (FAN)** chapters and provides seed funding that bring law enforcement and community organizations together in an effort to find viable treatment options for individuals seeking assistance.

Detroit Opioid Prevention Collaboration (DOPC)- a new partnership collaboration, related to the overdose crisis, the goal is to reach students and people in the community regarding the dispensing for the naloxone medication.

Hope Not Handcuffs/Angel Project - a collaborative project in which someone in need of SUD treatment can enter into a police station or Michigan State Police (MSP) Post and ask to receive help for their drug problem.

MyStrength is an evidence-based application grounded in Cognitive Behavioral Therapy, Mindfulness, Positive Psychology, Motivational Interviewing and other empirically, validated therapeutic approaches. The program is designed to be used independently or in conjunction with other care.

Detroit Wayne Integrated Health Network myStrength Registrations – October 2018 – September 2019



5 | Proprietary

DWIHN – Consumer Quotes How has myStrength been helpful to you?

- o It has helped me with stress management. I was able to view the mediation section and it helped me to relax.
- o myStrength has offered me words of encouragement to deal with stress situations and has helped me reduce my stress.
- o It helps me understand and get through things when I need help or some reinsurance
- o Tracking sleep patterns and how it connects to my mood.

E.W. Scripps (Scripps Digital, WXYZ - Channel 7, TV20 Detroit & Bounce TV)

Launched Conquering Addiction? Conquering Addiction was a multi-platform media campaign that was developed to bring awareness to the public on the most current issues around substance abuse and addiction in their communities. This campaign covered a broad range of topics customized for unique local addiction challenges, cultures, lifestyles and diversity in the market. The goal of Conquering Addiction is to bring awareness to the most current substance abuse issues, educate people on how to identify challenges within themselves and the people that surround them and direct people to the local help and resources that are available to them.

State Opioid Response (SOR) Grant Project Accomplishments for Fiscal Year 2019



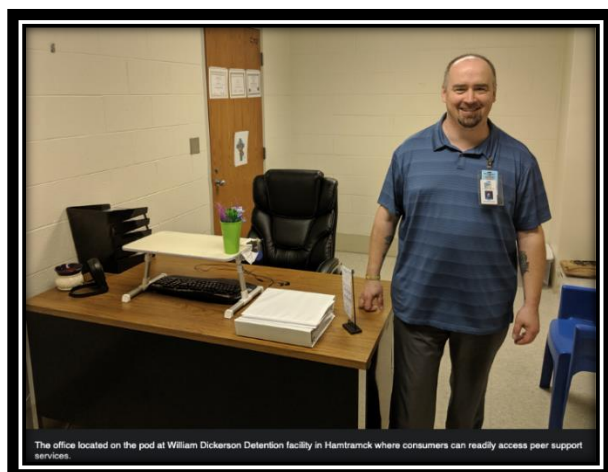
The SOR Programs began February 2019.

Mobile Units

DWIHN has two mobiles units that provide: SUD screenings for services, referrals to treatment, peer services, drug screenings, therapy and relapse recovery services, Naloxone trainings and distribution.

- 568 consumers served by mobile units
- 126 referrals made to SUD treatment by mobile units
- 180 drug screens by mobile units
- 246 individual therapy sessions by mobile units
- 490 peer support activities by mobile units
- 346 naloxone kits distributed with SOR funding by mobile units
- 16 naloxone saves reported from naloxone distributed by mobile units

Jail Based Medication Assisted Treatment (MAT)



There are twenty-six inmates at William Dickerson Detention Facility in Hamtramck have been served by the jail-based program.

The inmates receive individual and group peer support activities.

There have been sixteen inmates that have been released and are receiving post release follow up peer supports. Upon release inmates are offered Vivitrol medication, and given a Naloxone kit and are trained on its use.

The Jail Based Medication Assisted Treatment (MAT) program recruits consumers in partnership with the jail-based therapist, medical staff, officers and a self-referral system through advertisement and promotions by the use of flyers posted around the jail where inmates can view them.

There is one full time staff member who has an office on the community center of the pod, where inmates can easily access the staff (pictured above).

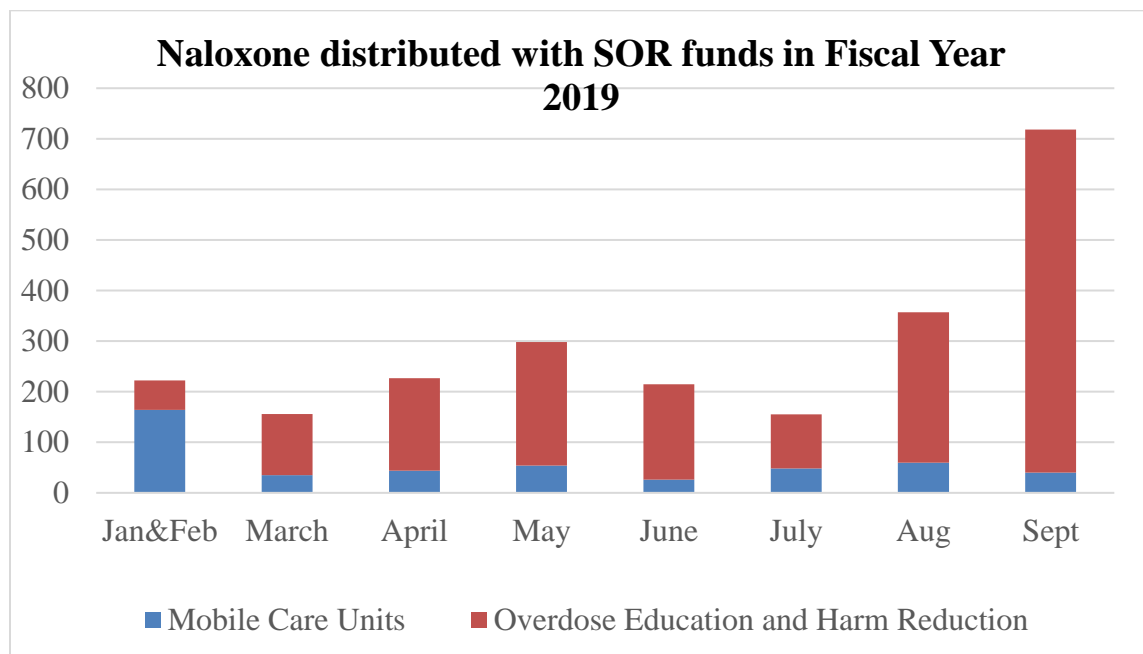
Screening Brief Intervention Referral to Treatment (SBIRT) Programs

Peers in Federal Qualified Health Centers (FQHCs) are designed to increase access to treatment for individuals that are not aware of services offered.

Name of FQHCs	Number of brief screenings	Number of Wellness Check-ups	Total Services Provided
Wayne County Healthy Communities	30	68	98
Western Wayne Family Health Centers	23	14	37
Detroit Community Health Connection	64	24	88
Central City Integrated Health	53	15	68
Total	170	121	291

Overdose Education and Naloxone Distribution (OEND) with Harm Reduction Services

The OEND with harm reduction program enhances and expands our existing naloxone training within different caveats in the community. In fiscal year 2019 our SOR Programs distributed one thousand nine hundred thirty-five Naloxone kits in Wayne County.



Youth and Family Oriented Evidenced Based Practice Programs

Providers have served six hundred and sixty-one individuals including family members using these two-evidenced based curriculums, Botvin Lifeskills and Project Toward No Drug Abuse.

Recovery Housing & Supports

SUD programs are providing recovery-housing services to Opioid Use Disorder (OUD) clients, and enhancing their recovery homes, i.e. purchased new air conditioning units due to the heat warning periods we had this summer some of the SOR houses, which were lacking updates units to combat the extreme temperatures. Also purchased were generators and updating appliances and much more. All providers are in process of receiving Michigan Association of Recovery Residences (MARR) Certification.

There were ninety-eight consumers were served by Opioid Use Disorder Recovery Services with new groups beginning implementation this month.

State Target Response (STR) Grants

Maintaining Independence and Sobriety through Systems, Integration, Outreach and Network-Michigan Reentry Program (MISSION MI-REP)

One accomplishment worthy of special mention is the MI-REP Program. This program enhances services to individuals with opioid use disorders who are entering their communities from prisons within Michigan. The MI-REP team is made up of peer recovery coaches and case managers, who are committed to improving the lives of the individuals struggling with this disorder.

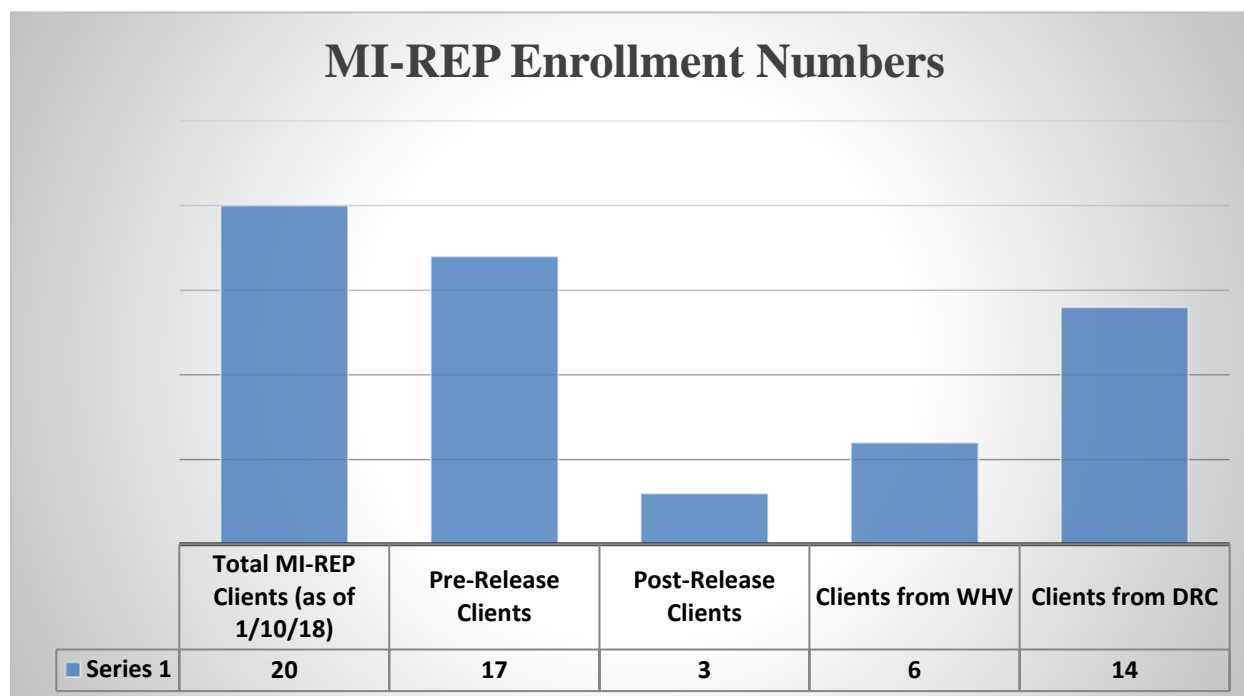
These services include medication-assisted treatment, mental health and trauma-informed therapy, employment opportunities and housing through intensive case management and peer- support activities. The grant project was awarded to Personalize Nursing Lighthouse in 2018 and is carefully monitored by Michigan Department of Health and Human Services (MDHHS) and DWIHN. Ongoing monthly meetings co-jointly with case managers, peer recovery coaches, Michigan Department of Corrections (MDOC), and Wayne State University (WSU) are managed with continuous improvement to merit continued progress.

In general, the program focus on two-prison systems aimed at increasing access to treatment services. These two prisons are Women Huron Valley (WHV) and the Detroit Reentry Center (DRC). Baseline data for services rendered in FY 2019 are below:

Enrollment Numbers

- ❖ Total MI-REP Clients (as of 9/30/2019): 51
- ❖ Pre-Release Clients: 30
- ❖ Post-Release Clients: 21
- ❖ Clients from WHV: 32
- ❖ Clients from DRC: 149
- ❖ Clients released were released in less than 7 days

This initiative has been very successful and will be implemented for another year.



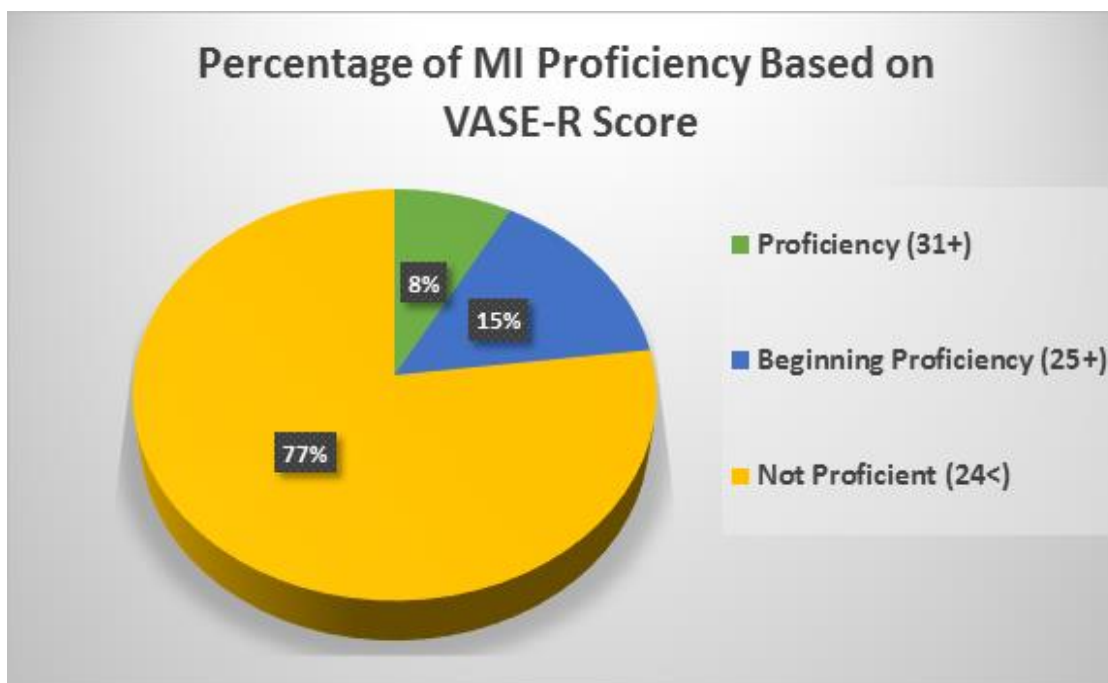
Motivational Interviewing (MI)

DWIHN administered the video assessment of simulated encounters (VASE-R) for assessing motivational interviewing (MI) skills on July 15th and 23rd 2019. The VASE-R consisted of a video presentation of three vignettes in which actors portrayed substance abusers. Respondents were prompted to identify or generate written responses consistent with particular MI principles. The VASE-R included eighteen items (six per vignette) that produced a total score and five subscale scores (i.e., Reflective Listening, Responding to Resistance, Summarizing, Eliciting Change Talk, & Developing Discrepancy).

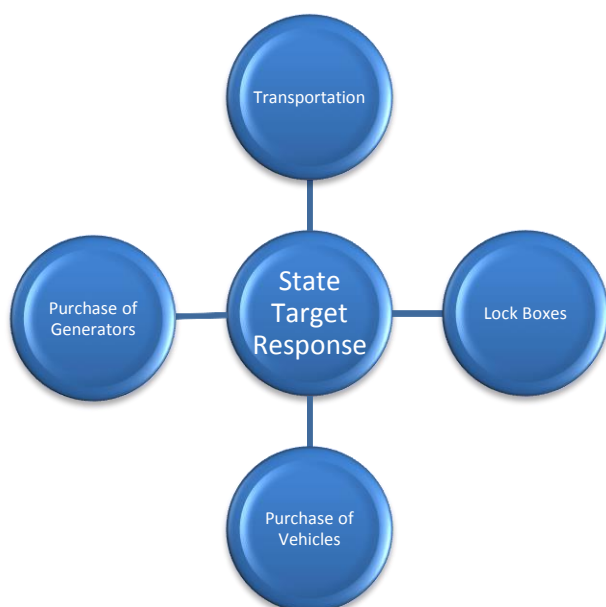
Twenty-five clinicians participated in the review. Clinician's racial background was (60%) African American and 4% White and 36% did not report their race. Clinician range in age from 26-72 years, with a mean of 55 years. Educational attainment levels among clinicians varied; 45% of clinicians had earned an undergraduate degree, 35% earned Masters' degrees, and 2% did not report their education level. All clinicians had motivational skills training. Prior to the training, the participants were advised to complete MI training on the www.improvingmipractices.org website as a booster for this review.

According to the results from this review, the network motivational interviewing skills levels were in the low range. On the VASE-R, clinicians fared well using the MI in the area of reflective listening skills. Significant and large decreases were observed in the areas for responding to resistance, summaries, developing discrepancy and change talk.

Based on the score levels in this first round of testing, several recommendations will be employed to foster increased proficiency with MI concepts and execution.



Medication Assisted Treatment Programs

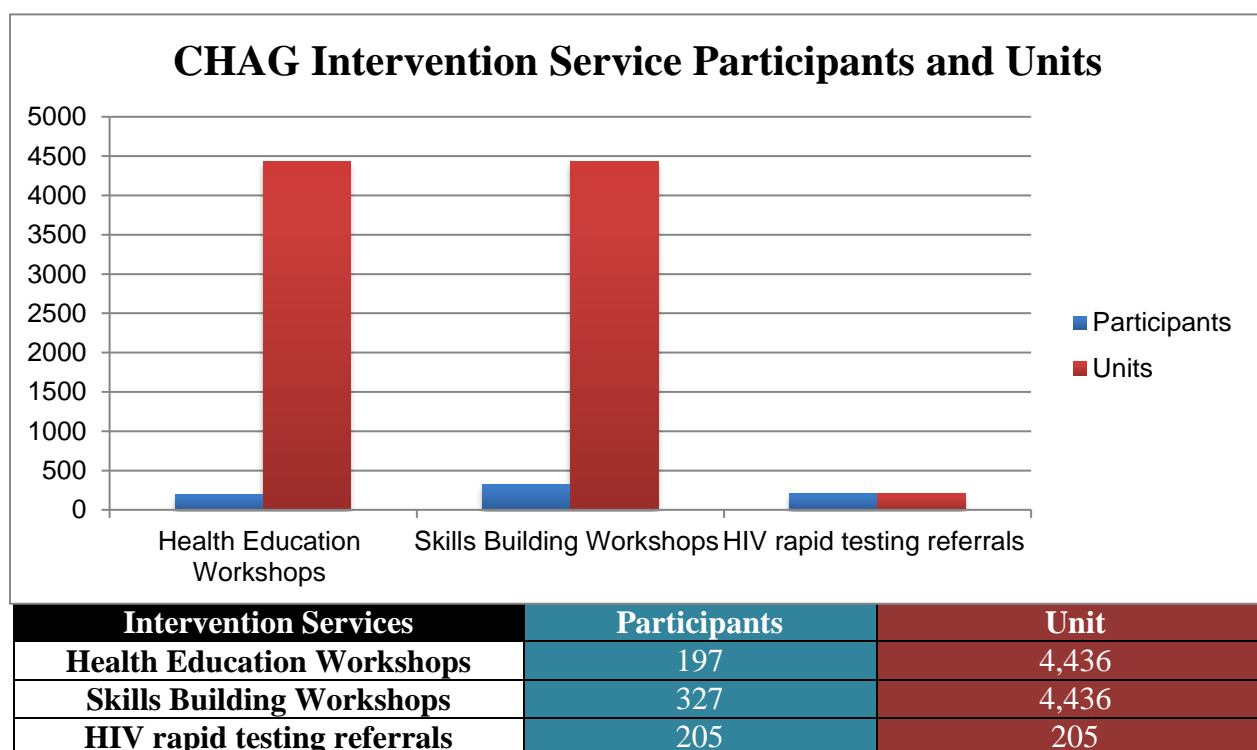


DWIHN is addressing the opioid epidemic through various enhanced programs. We have collaborated with six MAT providers in our region to ensure that individuals residing in the county of Wayne receive enhanced MAT services. The first year of DWIHN's MAT expansion project has met with a number of significant successes as well as some challenges. In terms of successes, DWIHN has developed an infrastructure to manage the grant and meet reporting requirements. Further providers are actively engaged in identifying and screening individuals for MAT services. To date five hundred and forty-six individuals have received MAT services and ancillary supports such as (new vans, generators, locked boxes for their medication and others) through the STR grant. MAT providers have substantially increased the availability of a number of services in their communities in a very short period of time.

Communicable Disease and Outreach

DWIHN has Community Health Awareness Group (CHAG) to address current health disparities and concerns of the citizens in Wayne County. Through PA2 funding CHAG program provided persons with substance use disorder at risk for and/ or living with HIV/AIDS, sexually transmitted infections (STIs), tuberculosis (TB), viral hepatitis and other communicable disease with access to health education risk reduction counseling, screenings and access to testing services as appropriate. This is in an effort to assist the client to gain knowledge, skills and resources needed to achieve personalized goals in relation to their substance use disorder and its impact on their life. The program also provide State of Michigan required Level I and II trainings to provider staff in the DWIHN network.

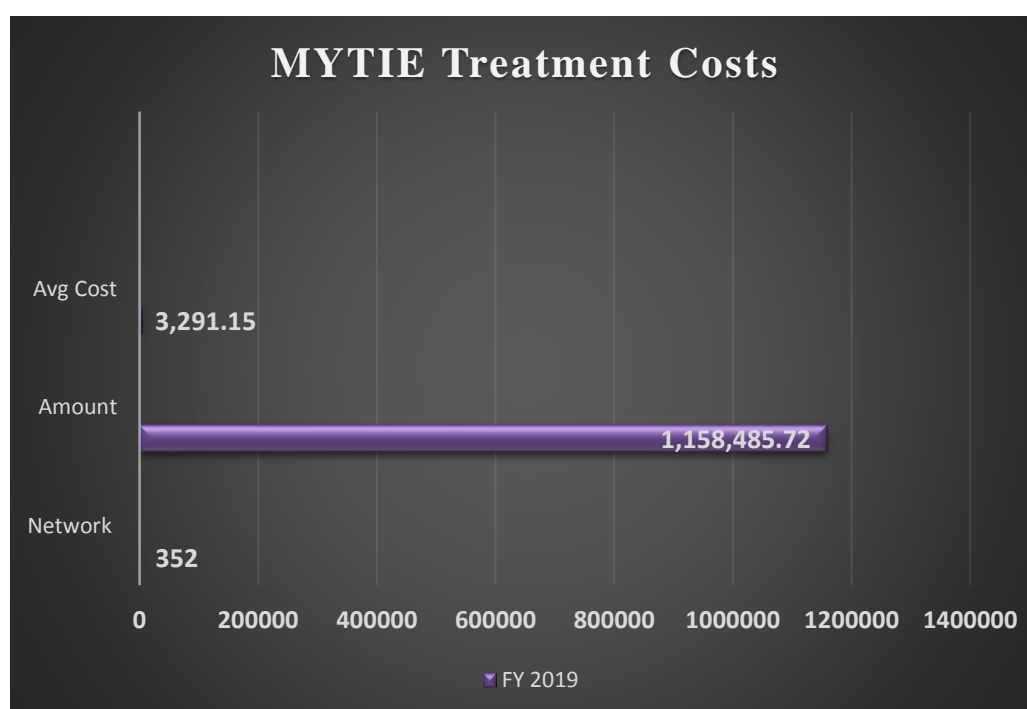
Reaching out to the Lesbian, Gay, Bi-Sexual and Transgender (LGBT+) population, CHAG launched a Street Outreach Program for the LGBT community to help change norms within the gay community. The program targeted bars and businesses in the gay community distributing educational and referral information and guides. More than forty agencies received gay sensitivity trainings by CHAG's Communicable Disease Prevention Team. In addition, a total of seven hundred twenty-nine high- risk individuals were provided nine-thousand-one units (one hour = one unit) of services that included the following:



Michigan Youth Treatment Improvement Enhancement (MYTIE)

The MYTIE project is to increase access to and improve the quality of treatment and recovery support services for adolescent and transitional age youth 16 to 21 years, including those transitioning out of foster care, and their caregivers. MDHHS established a financial map of Michigan's area youth portrayed by a rising number of adolescents and transitioned youth out of foster care ages 16-21 (4,658) were served.

Fiscal Year	Network Served 16-21	Amount Spent	Average Cost
2019	352	\$1,158,485.72	\$3,291.15



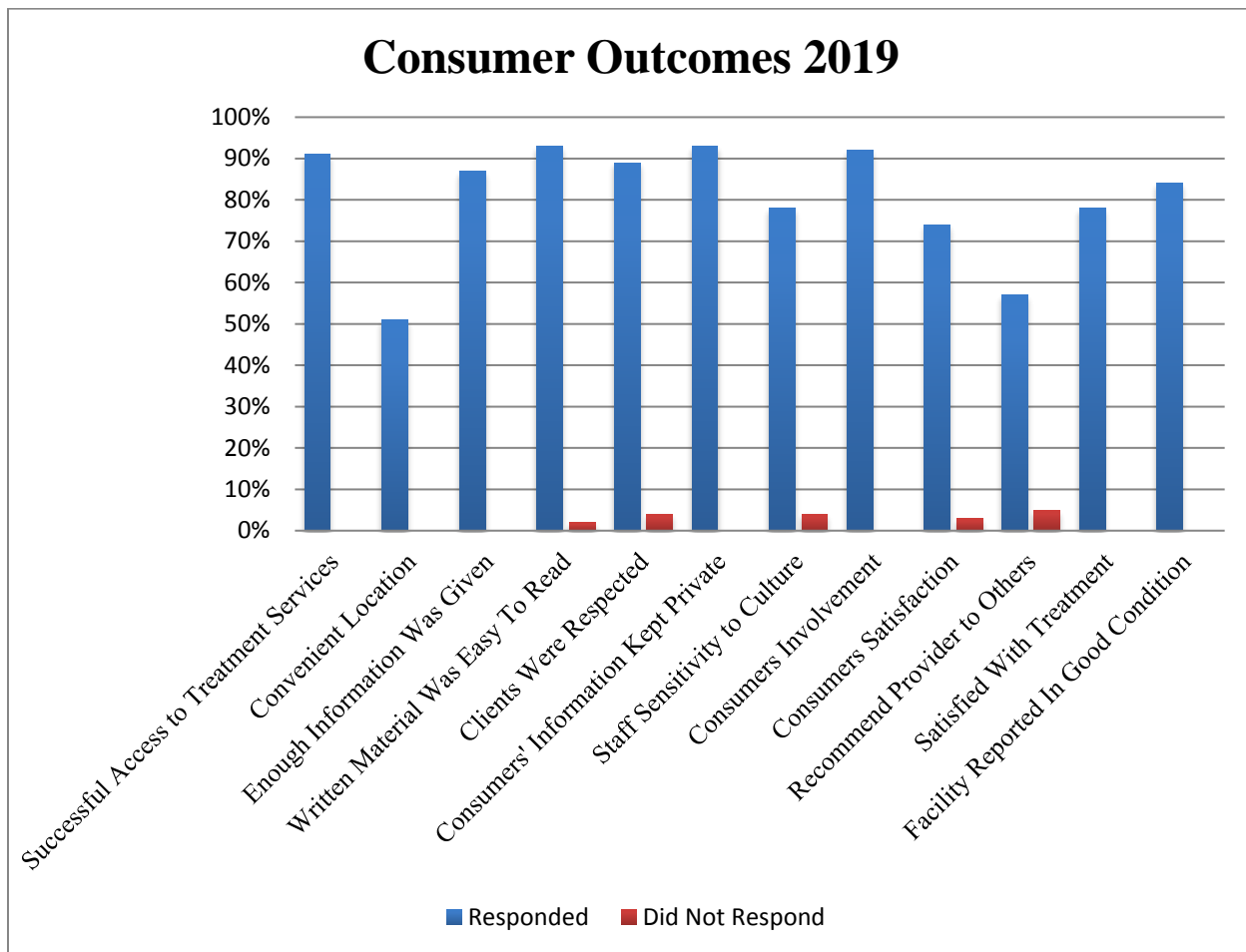
Through the MYTIE grant, several Evidence Based Programs (EBP) were approved for reimbursement. The provider staff completed training and received credentialing in Motivational Interviewing (MI) Trauma Focus-Cognitive Behavioral Therapy (TF-CBT) and the Global Assessment of Individual Needs (GAIN) to comply with standards set forth by the MYTIE grant. Historically many providers receive referrals through the Access Center for DWIHN as one of many avenues to obtain referrals. Our providers are committed to build and address various efforts to obtain referrals and take substantial steps to seek and strengthen their referral efforts.

Consumer Satisfaction Outcomes

These outcomes are based on a written consumer satisfaction survey administered to a sample of seven hundred fifty-one consumers who were receiving substance use disorder service in Detroit Wayne Integrated Health Network programs between the July and September. The purpose was to collect information on consumer satisfaction with treatment in order to assess the extent to which these programs provided high quality service to Wayne County consumers.

Of the total of seven hundred-fifty one (751) overall scores ranged from 57% to 93% this year as compared to a range of 43% to 84% in the previous year. One major component of satisfaction with which providers struggle is they would recommend the Treatment Provider to a friend and the consumers agreed with the goals in their treatment plan. This review point to the client's perception of the program and could be reviewed as an early indicator of program's performance. The SUD provider network will continue to distribute the surveys quarterly.

- 91% of the consumers who completed the survey reported they are able to get treatment services when they need it.
- Of those who responded 51% reported the location of treatment services was convenient.
- 87% of the consumers who completed the survey reported enough information was given to make decisions about how to meet my needs.
- 93% reported written material about my treatment was easy for me to read, 2% did not respond.
- 89% reported staff respected me as a person, 4% did not respond.
- Of those who responded 93% reported information about consumers are kept private.
- 78% reported staff was sensitive to my cultural background, 4% did not respond.
- 92% of the consumers who completed survey reported they were actively involved in deciding my treatment goals.
- 74% of the consumers reported they agreed with the goals in their treatment plan, 3% did not respond
- 57% report they would recommend their Treatment Provider to a friend or family member, 5% did not answer.
- Of those who responded 78% reported they were satisfied with the treatment they received.
- 84% of the consumers who completed the survey reported the facility is good condition.



2018 Provisional Drug Overdose Deaths, Wayne County

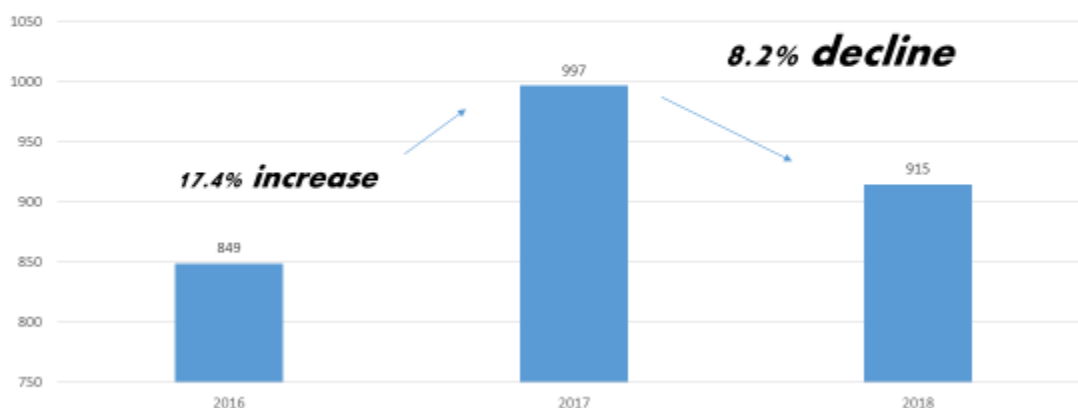
Supplied by the Office of the Wayne County Medical Examiner with special thanks to Amanda Kogowski

Summarized by Cynthia L. Arfken, PhD

Provisional data for Wayne County Office of Medical Examiner

- These data are subject to change as more cases are closed
- These data reflect people who died in Wayne County, had cause of death indicating drug overdose death (7 removed from carbon monoxide poisoning, no drug or alcohol found)
- These data will differ from Death Certificates (based upon county of residence)
- Almost all of these deaths were considered accidental (96.4%) but also included suicide (n=17) and those deemed natural (n=9)

Number of drug overdose deaths over past 3 years



Were the declines in drug overdose deaths across race/ethnicities?

• DECREASE

- Whites had a decrease of 17.6%

• INCREASE

- African Americans had an increase of 4%
- Arab Americans had an increase of 6 deaths (200%)
- Asian Americans had an increase of 2 to 3.
- Latinos had an increase of 9.5%

Wayne County Drug Overdose Deaths: Comparison of 2018 to mid2019

Cynthia L. Arfken

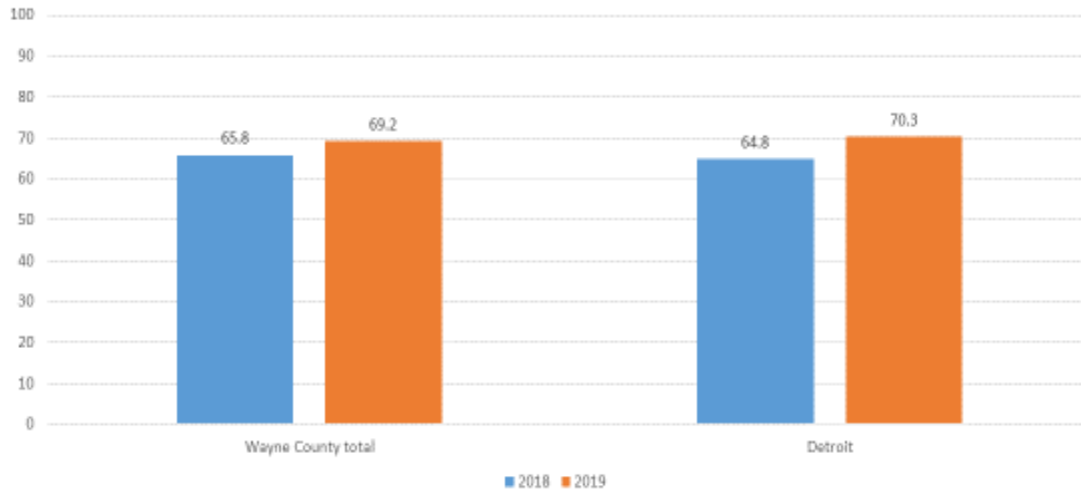
Data provided by Amanda Kogowski from Wayne County Office of Medical Examiner

Data are preliminary and subject to change

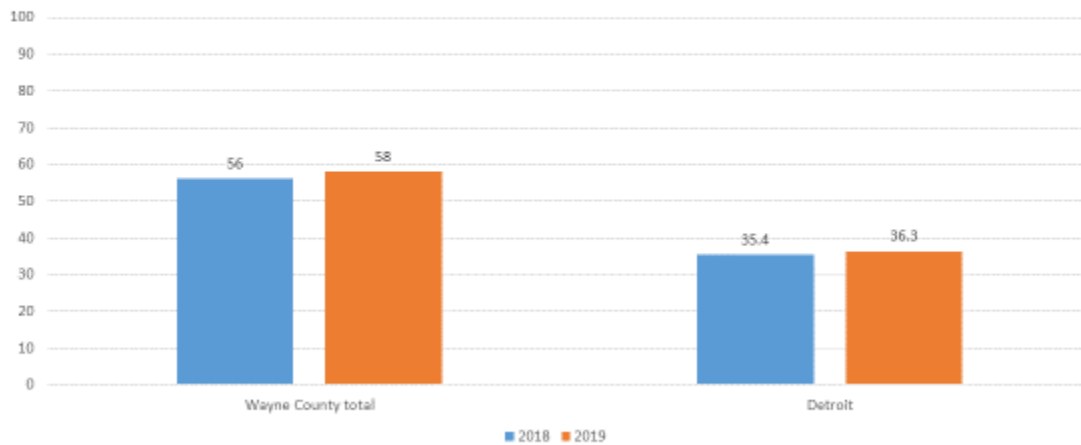
Caveats

- These data are preliminary. In past years, examining the data prior to the closing of the year lead to underestimates of the number of drug overdose deaths.
- Monitoring is still necessary to track any sudden increase or dramatic changes in drugs causing deaths or demographic trends. Small differences between 2018 and 2019 do not indicate changes.
- 2019, there have been 491 deaths (52.8% in Detroit)
- 2018, there were 915 deaths (54.3% in Detroit)

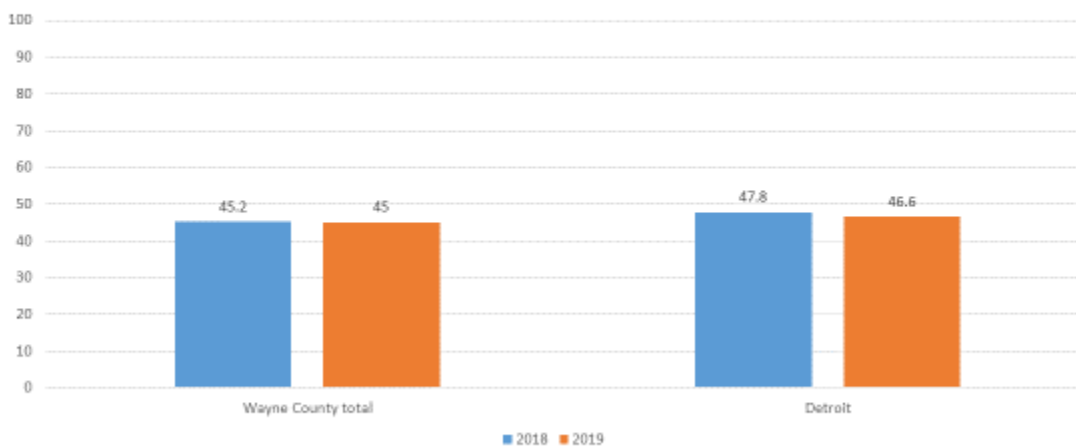
Demographics – percentage male



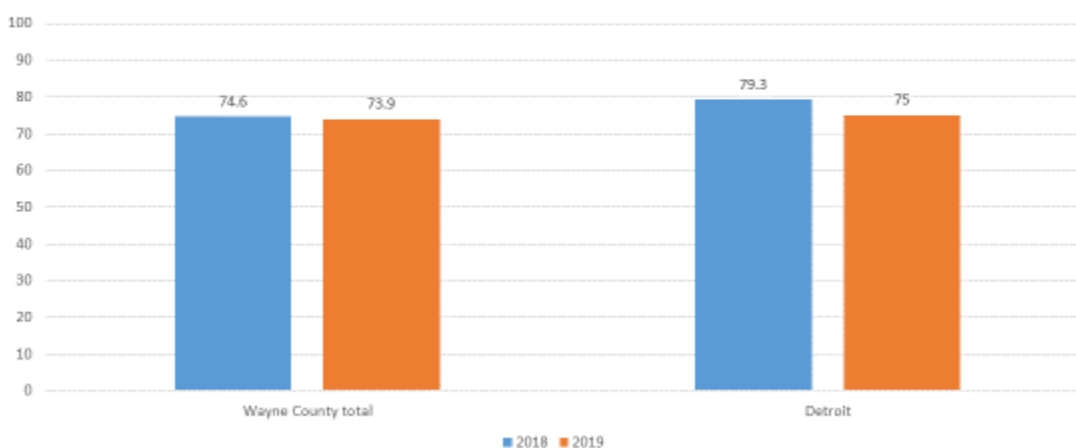
Demographics – percentage White



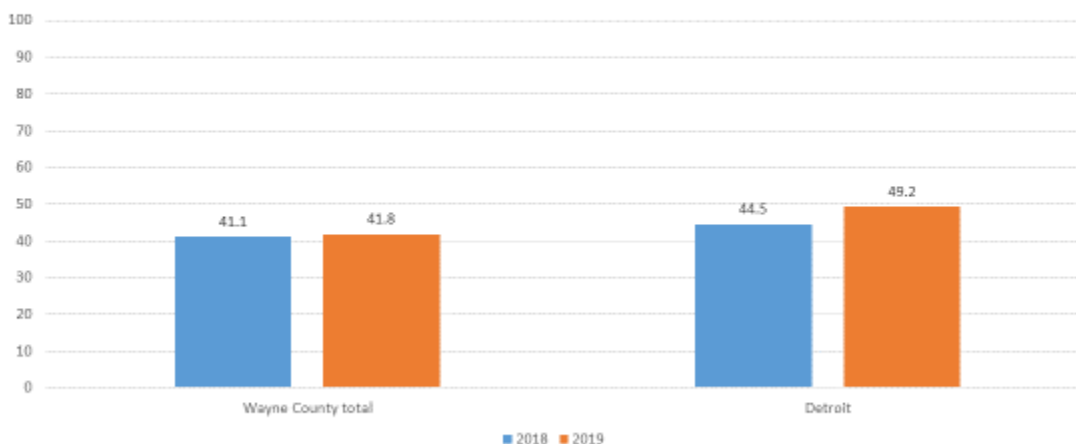
Demographics – mean age



Fentanyl as a cause of death



Cocaine as a cause of death



Interpretation

- It is too early to say if the number of drug overdose deaths will exceed or be lower in 2019 than 2018.
- *However, there is no evidence of large increase.*
- The demographics data on the decedents are quite similar between 2018 and 2019, both for Wayne County as a whole and for the city of Detroit.
- The two drugs that are major causes of deaths (fentanyl and cocaine) show similar patterns in 2019 as they did in 2018.

Summary

In summary, as evidenced in the data Substance Use Disorders (SUD) prevention, treatment and recovery continues to be a relevant and necessary services for Wayne County residents. All SUD activities are inclusive and engaging for all ages across the community. Our innovative approaches highlights our results and demonstrates our work servicing and providing hope to our community. With the many programs and initiatives currently in place and those planned for the future, SUD is aspiring to provide innovative programs to address substance abuse prevention, treatment and recovery with the goal of decreasing the detrimental impact of drug use in our community.