



## President and CEO Report to the Board

### Eric Doeh

### May 2023

#### LEGISLATIVE EFFORTS

We are working with our lobbyists, Public Affairs Associates (PAA), as we continue having conversations with legislators and leadership in Lansing surrounding support for DWIHN's Crisis Continuum for persons served throughout Wayne County, including step-down long-term care, expanded residential services, programs for youth aging out of foster care and offering behavioral health interventions for families to connect them with programs and services.

On April 19, PAA presented at the DWIHN Full Board Meeting to go over legislative objectives for 2023.

On April 26, DWIHN held a Press Conference regarding the \$227 million plan to expand mental health treatment and add 450 behavioral health beds to the crisis continuum in Wayne County.

#### ADVOCACY AND ENGAGEMENT

On April 25, DWIHN met with O'Hair Park Neighborhood Association to gather community input and provide updates on our Integrated Behavioral Wellness Campus on 7 Mile.

On May 3, Youth United kicked off Mental Health Awareness Month with a special on CBS Detroit addressing youth mental health, stigma, and isolation; highlighting that there are resources out there for assistance and normalizing open discussions about mental health.

Roncelli Construction announced that they selected DWIHN's Youth Initiatives, along with the YMCA and the Parade Company, to be a recipient at their upcoming fundraising event scheduled for June 15<sup>th</sup>.

#### INTEGRATED HEALTH REPORT

The Detroit Wayne Integrated Health Network (DWIHN) continues to make progress with integrating with Medicaid Health Plans. Below is a list of updates of the collaborations with Medicaid Health Plan Partners One, Two, and Three.

##### **Health Plan Partner One**

Health Plan 1 and DWIHN are using the shared platform in care coordination meeting to stratify shared members based on HEDIS measures due and follow up after hospitalization. Eight members were discussed in April for care coordination that had needs after hospitalization. Four of those had successful outcomes. Five members were discussed for data sharing.

DWIHN and Health Plan 1 are working on individuals who present at the Emergency Department for substance use-related issues (FUA). DWIHN pulls data from CC360 and filters the information. DWIHN follows up with open cases and gives other names to Health Plan 1. There were two FUA shared members who had an ED visit in April.

##### **Health Plan Partner Two**

DWIHN IHC staff and Health Plan 2 continue with monthly care coordination meetings to review a sample of shared members who experienced psychiatric inpatient admission within the past month. DWIHN and Health Plan 2 use the Vital Data Shared Platform to find new members and see what claims and diagnosis

there are. Six members were discussed and two attended the FUH appointment. Five members were discussed in data sharing.

DWIHN and Health Plan 2 are working on individuals who present at the Emergency Department for substance use-related issues. DWIHN pulls data from CC360 and filters the information. DWIHN follows up with open cases and gives other names to Health Plan 2. There was two FUA shared members who had an ED visit in April.

DWIHN and Health Plan 2 met in March to discuss further projects. DWIHN expressed concern over members in the ED and difficulty of coordination. Health Plan 2 agreed this is an area of concern and will take it back to the hospital system to see if a pilot project can be created. DWIHN informed Health Plan 2 of a similar project that is being piloted with another health system.

### **Health Plan Partner Three**

DWIHN staff are working with Health Plan 3 on a new project of monitoring individuals who utilized the emergency room department or inpatient psychiatric unit and how to perform data sharing.

Health Plan 3 will be able to obtain the CRSP's name for a member in the ED (for any reason) and start coordination of care with that CRSP. There are four CRSP's in the pilot: Neighborhood Services Organization, Lincoln Behavioral, Hegira and Guidance Center. This started on June 16, 2022.

Data was shared at the next meeting in April 2023. One location of Health Plan 3 is making more referrals. Health Plan 3 will look into this. DWIHN needs to pull data on the CRSP appointments and if they are happening.

### **Shared Platform and HEDIS Scorecard**

DWIHN and VDT continue to conduct weekly collaboration meetings to review project timelines, tools, and trainings.

DWIHN and VDT continue to work on updating the scorecard with new data feed, adding all members into Carespace, this will allow all Medicaid health plans and CRSP to see shared members and careflow rules created. DWIHN can now filter members by CRSP and Health plan. Member demographics, encounters, conditions diagnosed and physicians can be seen for behavioral health and medical. This has been presented to CRSP's in the 45-day meeting.

DWIHN and VDT met on the mobile app and gave feedback for changes and it was decided not to roll out the trainings until phase two is complete this was to be in May, but it was discovered there is a security issue with documents coming from a PCE system to the mobile app. IHC is meeting with PCE to discuss other options.

The HEDIS Scorecard was rolled out to all CRSP providers. DWIHN IHC staff has met with CRSP's individually to help them better understand the platform and the capabilities. IHC has been added to the 45-day meeting with CRSP's and the FUH score is added to the measures tracked. IHC has attended 9 of these meetings in April.

Below are the HEDIS scores as shown in the Scorecard as of January 2023. This is all CRSP scores combined.

Measure	Measure Name	Eligible	Total Com	Non Comp	HP Goal	Jan-23
ADD	Follow-Up Care for Children Prescribed ADHD Medication Continuation P	244	132	112	70.25	54.1
ADD	Follow-Up Care for Children Prescribed ADHD Medication Initiation Phase	399	248	151	58.95	62.16
AMM	Antidepressant Medication Management Acute Phase	3240	1217	2023	77.32	37.56
AMM	Antidepressant Medication Management Continuation	3240	489	2751	63.41	15.09
APM	Metabolic Monitoring for Children and Adolescents on Antipsychotics					
APM	Blood Glucose and Cholesterol 1-11 age	23	0	23	23.36	0
APM	Blood Glucose and Cholesterol 12-17 age	53	5	48	32.71	9.43
APP	Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics					
APP	Ages 1-11	70	43	27	67.39	73.2
APP	Ages 12-17	87	67	20	71.16	77.01
BCS	Breast Cancer Screening	7909	597	7312	59.29	7.55
CBP	Controlling High Blood Pressure	11997	795	11202	79.08	6.63
CCS	Cervical Cancer Screening	16167	3068	13099	63.99	18.98
COL	Colorectal Cancer Screening	0	0	0	0	0
FUH	Follow-Up After Hospitalization for Mental Illness 30 day					
FUH	Ages 6-17	71	35	36	70	49.3
FUH	Ages 18-64	733	226	507	58	30.83
FUM	Follow-Up After Emergency Department Visit for Mental Illness					
FUM	Ages 6-17	76	57	19	84.33	75
FUM	Ages 18-64	178	57	121	61.05	32.02
SAA	Adherence to Antipsychotic Medications for Individuals With Schizophrenia	56	54	2	85.09	96.43
SMD	Diabetes Monitoring for People With Diabetes and Schizophrenia	209	4	205	85.71	1.91
SPR	Use of Spirometry Testing in the Assessment	854	142	712	31.48	16.63
SSD	Diabetes Screening for People With Schizophrenia or Bipolar Disorder With	229	67	162	86.36	29.26
UAM45	Use of three or more antipsychotics for 45 or more days	166	0	166	<10	0

## VICE PRESIDENT OF CLINICAL OPERATIONS

### Putting Children First:

#### Access:

DHHS Trauma Checklist Pilot: Effective May 1, 2023 DHHS North Central Office Child Welfare Specialists are to contact Children Providers directly to submit Trauma Screening Checklists and request for community mental health services. This new process has been communicated to Children Providers, DWIHN Access Department and DHHS North Central Office as well. This change in process occurred with the goal of removing barriers to children involved in child welfare system receiving screenings for mental health services.

#### Crisis Intervention:

Juvenile Justice Partnership: Meetings were held with MDHHS, DWIHN, Children Providers, and Care Management Organizations to brainstorm resources and referral pathways for youth discharging from juvenile justice placements. Children's Initiative, Crisis Department, and Access Departments are currently participating in subcommittees to offer support.

#### Treatment:

1915i SPA: Clinical Officer, Ebony Reynolds facilitated a meeting with Children Providers to explain the 1915i SPA expectations. All forms are to be submitted to the WSA system by 9/30/2023.

HEDIS Performance Improvement Plan (PIP): Children's Initiative presented the two HEDIS Performance Improvement Plans (ADD Medication Performance Improvement Plan and Antipsychotic Medication Performance Improvement Plan): to both the Improving Practices Leadership Team (IPLT) and Quality Improvement Steering Committee (QISC) this month.

Next Steps: 1). Review raw data with Providers to determine explanation or decrease in eligible members and research consistency of members receiving medications.

MDHHS Home Based Recertification: Children’s Initiative Department held a training this month for Children Providers on how to submit recertification application for Home Based Services. MDHHS developed a new electronic system for DWIHN to upload applications by 5/31/23.

## **CHIEF MEDICAL OFFICER**

### **Behavioral Health Education and Outreach:**

DWIHN has continued outreach efforts for behavioral health services. Ask the Doc Newsletter on Mental Health Awareness Month is completed and will address the importance of mental health, common warning signs and coping strategies.

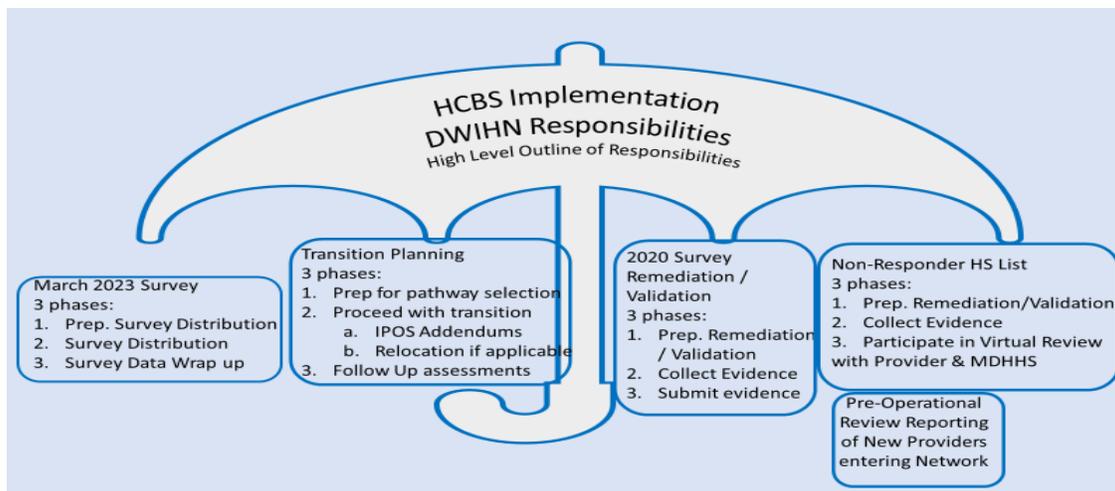
### **State Hospital Update:**

The State has announced the location of a new inpatient psychiatric hospital. The southeastern Michigan facility will be located at the current site of Hawthorn Center, 18471 Haggerty Road in Northville Township. The new hospital is being made possible by a \$325 million FY23 budget allocation by Gov. Gretchen Whitmer and the legislature. The two facilities serve nearly 200 patients and are among the state’s five inpatient psychiatric hospitals for individuals who have severe mental illness or intellectual and developmental disabilities. More information is available at:

<https://www.michigan.gov/mdhhs/inside-mdhhs/newsroom/2023/04/17/new-psychiatric-hospital>

The Hawthorn site is temporarily closing and the children at Hawthorn will be temporarily accommodated at Walter Reuther Psychiatric Hospital. Currently, the State has been going through updates at 2 floors of Walter Reuther Hospital to accommodate for Children. We have asked for information regarding those improvements to assure smooth and safe transition and have also requested a tour before the move.

### **HCBS Status Update:**



### **Transition Project:**

DWIHN completed transition planning for 51 members from previous surveys and are continuing to follow up to ensure member needs are being met and satisfaction with services. Members who chose to stay in noncompliant/non-responsive settings had their funding suspended for HCBS services. Residential Department and Clinical Department coordinated with Quality to help with member transition and IPOS reflecting it.

**March/April 2023 Survey:** These surveys involved multiple smaller projects such as creating a Master list before survey, sending test emails to providers, distributing and monitoring survey completion, providing

Technical assistance, sending reminders. 310 HCBS surveys needed to be completed by May 5<sup>th</sup>. 99% of Surveys were completed.

Remediation and Validation of 2020 State Survey: DWIHN is responsible for validating accuracy of survey responses from the HCBS Survey completed in 2020 and audit provider for validation of compliance collect evidence of compliance and submit evidence to MDHHS. This project involves:

- 97 providers
- 356 members
- 656 HCBS standards need remediating
- 4,326 HCBS standards need validating
- a total of 4,982 HCBS standards need remediating or validating

Due date for completion has not been identified by MDHHS at this time.

Non-responders on Heightened Scrutiny: Providers surveyed in the past that did not respond to the survey; were given a second chance and completed the survey and were found to not meet HCBS requirements. These providers then completed remediation work and after review by MDHHS, were placed on Heightened Scrutiny (HS) because the evidence was not clear if they were HCBS compliant. All Virtual Reviews with MDHHS Rep. must be completed by June 23, 2023. This project involves 37 providers and DWIHN must:

- Provide TA on remediation needed
- Collect evidence of HCBS remediation / HCBS readiness
- Complete attestation of HCBS remediation / HCBS readiness
- Schedule virtual review with MDHHS representative
- Participate in virtual review with provider and MDHHS Rep.

## **CRISIS SERVICES**

### **DWVHN Crisis Center Updates:**

Facilities: Construction is going timely. Generator is expected in August/September with anticipated October 1<sup>st</sup> start date. Equipment and various other vendors such as food service, telephone/fax, pharmacy and lab are been explored.

HR: VP of Crisis Operations, 707 Site Director, Unit Administrator and Quality Manager have been hired. Draft Staffing plan established with some ongoing changes based on State's draft guidelines. Nursing Administrator and Unit Administrator have been posted with ongoing interviews, Draft list of staff training created. Unit Administrator and Quality Director scheduled for CIT instructor training this month. Most of the job descriptions are completed. Bulk hiring expected in June/July.

Credentialing: Developing expedited Credentialing process for new hires for Care Center

Quality Control, Policies and Procedures: State requirements as well as JAHCO accreditation requirements are reviewed. Draft versions of more than 55 policies and procedures have been created. Consents are being finalized.

IT/Electronic Health Record: PCE is working on developing Crisis Module for DWIHN.

Draft versions and requirements of assessments such as Intake BH assessment, Nursing assessment, Triage form, Shift note, Progress note, Crisis Safety Plan, Medication Administration Record, Bed Board with Bed availability have been submitted and some are available for review in demo environment. Ongoing work in progress with PCE on remaining forms, notes and documents. Other IT equipment needs are being reviewed with IT department.

Finance: Draft version of Operational Budget created. Started discussions on codes that are applicable to the setting.

Crisis Clinical Operations: Draft work flows and SOPs created for each unit. 6 bed Pilot Project criteria, staffing requirements and SOPs being developed.

## HUMAN RESOURCES

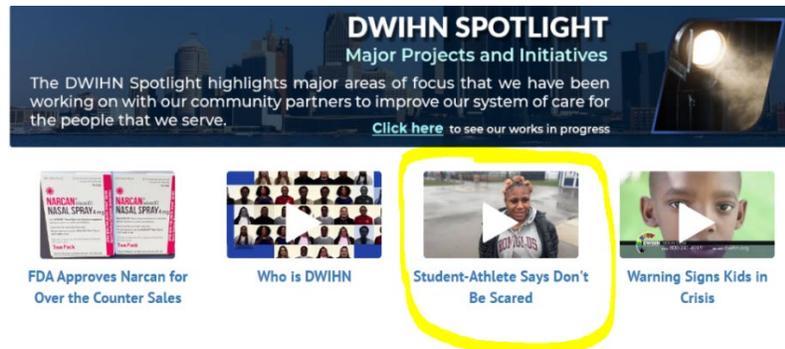
The Department of Human Resources hired 14 new employees, including our new Mobile Crisis Director, JaKeya Kellom. In addition, DWIHN terminated the contract with NSO regarding OBRA services. The Department successfully hired the required staff for the OBRA program for the April 1, 2023 start date and this program implementation was approved by the State of Michigan.

DWIHN continues with Supervisory Institute Training for upper-level management. In addition, DWIHN started open enrollment with TMR Associates and AFLAC to provide additional voluntary benefits for DWIHN employees. Finally, DWIHN HR has continued its Financial Wellness seminars for DWIHN employees.

## COMMUNICATIONS

### Student Athlete Campaign Update:

Romulus High School Student Athlete Cierra Hughes discusses mental health. The video is posted on the home page of the DWIHN website.



Below is the activity for Social Media Influencer Sports Psychology Solutions (SPS Edge) for April:

### April 12, 2023

- Horatio Williams Foundation Annual Coaches Forum Highlights:
- Interview with University of Michigan Head Coach Juwan Howard-*DWIHN will re-post on May 18th*
- Interview with University of Massachusetts Head Coach Frank Martin
- Interview with Kent State University Head Coach Rob Senderoff
- Interview with Grand Valley State University Head Coach Cornel Mann
- Interview with Detroit King's Chas Lewless-*posted on DWIHN website and DWIHN You Tube channel 4/27*

### April 15, 2023

Lady Ballers Insider Girls AAU Basketball Event: Interview with Grosse Pointe South's Maddy Benard-*will re-post on social and website 5/15*; Interview with Renaissance High School Imani Johnson-*will re-post on social and website 5/29*

April 24, 2023

SPS Team of the Week Romulus High School Track & Field

April 29, 2023

SPS Game of the Week "Courageous Invitational" Track Meet

April 30, 2023

Championship Sunday Podcast Guests: Wayne County Community College Women's Basketball Coach Eric Sharps; Renaissance High School Girls Basketball Coach Dashaun Wood; Macomb County Community College Basketball Coach Hassan Nizam

The SPS Edge Digital Platforms Include:

- Sport Psychology Solutions Facebook
- Sport Psychology Solutions Twitter (@TheSPSEdge)
- Sports Psychology Solutions Instagram (SPS Edge)
- Sports Psychology Solutions YouTube (The SPS Edge)
- [www.TheSPSEdge.org](http://www.TheSPSEdge.org)

DWIHN Outreach to student athletes also includes (some May events):

Wednesday, May 10 - Northwestern vs Cody baseball game

Thursday, May 11 - Southeastern vs EEVPA softball game

Saturday, May 13 - Strong Body and Strong Minds event.

May 27 - DPSCD City Championship at Renaissance High School

We are planning student athlete Courageous Conversation with Youth United in early June. We will begin partnering with Detroit PAL in June.

### Social Media Performance Summary:



Impressions: 529,334 **up 56.4%**, Engagements: 8,256 **up 102.3%**, Post Click Links: 2,159 **up 24.1%**, Engagement Rate: 1.6% **up 29.3%**, Total Audience Growth over the last month was 11,537 **up 2.9%**. Impressions are different from reach because **it doesn't count people who click or engage with your content, just those who are exposed to it**. If your ad was displayed 500 times on social media, your impressions would be 500. On all social media accounts, impressions, engagements, and post link clicks grew in March. Our net audience growth across all platforms increased by 10.9%.

Some of the increases in social media traffic are due to our influencers (Detroit Youth Choir, Capital Brand and SPS Edge). Our three influencers have boosted our following by **150** in the April. You can also see that they are helping our message and reach expand into neighboring cities in Oakland County, Southfield, and Farmington Hills, which contribute to **7.1%** of our followers and that percentage will continue to grow.

### **Top Performing Posts:**

Facebook

[2023 Men of Excellence honorees](#)

LinkedIn:

[Join us at Say Detroit Play Center](#)

Instagram:

[FREE food distributions is back](#)

Twitter:

[There's no shame in reaching out](#)

### **Website Analytics:**

In April 2023, website sessions increased by an **impressive 109%** when compared to April 2022, totaling 27,701 sessions. The number of users entering via social media saw a growth of **321%**. Facebook was the top social media platform driving the most users to the website. Paid ads brought in the highest percentage of users at 38%. The top pages (excluding the Home page) were "**Substance Use Disorders**" with **10,177 views**, *This is significant as The SUD page recorded over 10K sessions just for the month of April 2023.* "**For Providers**" with **4,937 views**, and "**Programs and Services**" with **879 views**. User engagement varied across pages, with "Contact Us" having the highest average session duration of 2 minutes and 41 seconds.

### **Google Analytics:**

In April, our Google profile was viewed by **2,824 users** utilizing different platforms and devices. Of those users 1,872 (66%) searched and discovered our profile via Google Search from their desktop or laptop, 904 (32%) searched and discovered our profile via Google Search from their mobile device, 39 (1%) searched and found our profile via Google Maps on their mobile device, and 9 (0%) searched and found our profile via Google Maps on their desktop or laptop. The Google Business Profile received 770 interactions such as when people call, message, ask for directions, and more from the Business Profile on Google.

Also, DWIHN's Google Business Profile appeared in 1,721 search results. Users have used a variety of words to find DWIHN when searching or discovering us on Google; dwihn (1,287), Detroit Wayne Integrated Health Network (190), dwihn (141), dwihn (54), dwihn training (54), dhwin (32), and dwihn detroit (17).

### **Media:**

DWIHN received significant coverage of its press conference where it's partnered with the city of Detroit, Wayne County to ask the State of Michigan for \$227 million dollars to build several long-term facilities:

#### **Fox 2:**

<https://www.fox2detroit.com/news/detroit-wayne-integrated-health-network-seeks-227-million-from-state-to-expand-mental-health-care>

#### **Detroit News:**

<https://www.detroitnews.com/story/news/local/wayne-county/2023/04/26/detroit-wayne-integrated-health-network-to-see-200-million-state-funding/70154083007/>

#### **WDET Radio:**

<https://wdet.org/2023/04/27/detroit-wayne-county-mental-health-care-funding/>

#### **The Michigan Chronicle:**

<https://www.thechronicle.com.au/news/world/dwihn-announces-mental-health-care-expansion-plan/video/4305acc9760aab29f2a621fd18ea6750>

**Free Press:**

<https://www.freep.com/story/news/local/michigan/wayne/2023/04/27/detroit-mental-health-care-expansion/70154443007/>

**WWJ:**

Ryan Marshall from WWJ tweeted about the press conference, [Here](#) is the tweet thread.

**Latino Press:** <https://latinodetroit.com/Apr28/2023.html>

**El Central newspaper:**

**DWIHN Announces Four-Point Plan to Expand Mental Health Treatment in Metro Detroit**

On April 26, the Detroit Wayne Integrated Health Network (DWIHN) announced a four-point comprehensive plan to improve behavioral health treatment care capacity in Metro Detroit by seeking the state's support to invest \$27 million in construction and residential housing.

DWIHN President and CEO Tom Doch was joined by Mayor Mike Duggan, Wayne County Executive Warren C. Evans, and state health officials to address gaps in mental health care services for vulnerable populations. The plan includes increasing capacity for short-term and long-term residential treatment by providing an additional 450 beds at a newly developed Crisis Care Center and specialized holistic and integrated treatment center. DWIHN recognizes that behavioral healthcare changes are needed throughout our community. The need to improve mental health capacities and the infrastructure in Metro Detroit is essential.

"Creating more opportunities for our region's most vulnerable persons by tackling step-down approaches to long-term care, expanded residential services,

and the ability to offer behavioral health interventions for families are critical, and the time to act is now," Eric Doch, President, and CEO of DWIHN.

DWIHN is the largest community mental health organization in the state and is currently in the process of expanding needed behavioral health services with the goal of establishing a fully integrated care continuum that is able to best serve our vulnerable residents. This infrastructure will help persons suffering with mental illness, intellectual and developmental disabilities, substance use disorders and children with serious emotional disturbance. By utilizing a data-driven, solution-oriented approach, residents will benefit from increased access to recovery-oriented care through a person-centered and trauma-informed model of behavioral service delivery.

DWIHN has been working with the Wayne County Executive's Office and a coalition of community stakeholders to improve the resources available throughout our region. By implementing crisis intervention training for first

responders, emergency service providers can intervene on crisis management, apply appropriate de-escalation skills, and manage cases that require psychological intervention rather than making arrests and incarcerating the mentally ill.

"DWIHN's plan to rebuild mental health treatment capacity for our most vulnerable residents will fill the gaps in mental healthcare systems that have existed for decades now," said Mayor Duggan. "Providing the added capacity will save lives by helping to prevent individuals experiencing a mental health crisis from coming harm to themselves or others, or just getting caught up in a criminal justice system that is not equipped to meet their needs. We have the data to demonstrate the need for these additional beds and support DWIHN's efforts in working with the state to secure the funding needed to support them."

Currently, residents with severe mental health issues are waitlisted for inpatient treatment. Law enforcement is often the first to engage with untreated individuals when families become overwhelmed with what to do with

their loved ones. As a result, too often our emergency departments and jails are the first stop for persons experiencing a behavioral health crisis.

"It is so acute that I've spent more than half of my life in law enforcement," said Wayne County Executive Warren C. Evans. "It is so acute where mental health was a factor. Since 1992, when Governor Engler signed State Funding to the Lafayette Clinic, we've searched for ways to treat and care for those with severe mental illness, who find themselves in the criminal justice system. These individuals do not need jails, they need treatment. These individuals do not need professionals, and a safe place where they can receive treatment. That's why I'm proud to stand alongside DWIHN on this initiative to Expand Mental Health Treatment Capacity. This will not only serve the residents of Wayne County, but it'll expand our ability to truly impact an overwhelmed system."

Current Behavioral Healthcare Funding Does Not Fully Support and Reported Users of Emergency Services with Serious Mental Illness (SMI) become a part

of the mental health system's "revolving door," in which SMI patients cycle through the emergency care and justice systems due to insufficient or unavailable treatment options.

DWIHN's solution centers on a comprehensive 4-point plan to address long and short-term treatment capacity:  
1. Crisis Care Center: +60 beds  
2. Inpatient Psychiatric Care: +160 beds  
3. Specialized Residential Housing: +120 beds  
4. Integrated Residential Housing: +10 beds  
These new accommodations would add a capacity of 450 beds to facilitate individualized and comprehensive care for the targeted group of "revolving door" individuals, as well as alleviate the region's overwhelmed justice and mental services.  
If you or someone you know is interested in learning more about DWIHN's programs and services, please call 800.241.4949 or visit [www.dwihn.org](http://www.dwihn.org). Residents can speak to a trained staff member that is available 24/7 to help get you or a loved one connected to behavioral healthcare services.

**WDIV TV 4:**

As part of the Channel 4 Who is DWIHN campaign, on May 8, a new educational message began airing called *Who does DWIHN Help?* The messaging consists of people served by DWIHN, providers and community members talking about DWIHN services. The message can be seen on the DWIHN YouTube channel and the DWIHN website:



**Outdoor Media:**

Below is an installer photo of one of DWIHN's billboards located at Southfield Freeway near Warren. Weekly impressions 449,554. Between both the SUD and Communications campaigns, thousands of people see the DWIHN billboards every day and on average about two million impressions are estimated weekly.



10 SUD posters were just installed in the following areas:

Cadieux near I-94 Freeway (weekly impressions 501,410) Conner St/Maiden (88,717) Gratiot/Glenwood (90,791), I-96 Freeway/Evergreen (198,048), Joy near Quincy (57,857), Middlebelt near Mackenzie (108,394), Telegraph/Van Born (170,494), Tireman/Prest (60,947), West Jefferson/Labadie (47,004), West McNichols/Sunderland (52,796).

Youth United 20<sup>th</sup> Anniversary billboards are located at the following locations:

Milwaukee/Third Avenue-Detroit (weekly impressions 25,138), Ford Rd/Oakman-Dearborn (116,119) Fenkell near Steel-Detroit (43,002) and Eureka near Pearl-Southgate (81,207).



### **SUD Messaging:**

DWIHN continues its SUD messaging with various local media and on social media platforms including: Ask the Messengers, Comcast, Cumulus Radio, Fox 2 News, Global Media Television (formerly Middle Eastern TV), Mind Matters with Dr. Michele Leno, Scripps Media, WDIV-TV 4, Facebook, Instagram, Linked In, Twitter, Tik Tok, SnapChat, streaming platforms include Pandora and Spotify. This month's Recovery Live Global show which can be seen on YouTube focuses on Black Family Development a SUD treatment and prevention provider: <https://www.youtube.com/watch?v=rrqBPH143WQ>.

### **Community Outreach: DWIHN/Youth United/ Youth Move Detroit Community Outreach Recap:**

April 8 - DWIHN hosted a resource table at the Michigan Science Center Autism Acceptance Month Event in Detroit.

April 9 – Youth United (YU) participated in Impact Detroit Youth Community's Easter "Eggtravaganza" at True Love Christian Ministries in Detroit.

April 15 - YU Staff participated in the Youth Driven Space (YDS) conference: Transitioning into Adulthood, Eastern Michigan University's McKenny Hall.

April 19 - Youth MOVE Detroit hosted a Movie Night, at The Children's Center

April 20 - YU participated in the Disability Resource Expo, at WCCCD's Downriver Campus

April 20 - YU hosted a Stigma Busting Workshop for MDHHS in Detroit

April 24 - DWIHN hosted a resource table at the MDHHS Pathways to Potential event in Detroit

April 27 - YU participated in the Children's Advocacy Summit in Lansing



April 27 - YU/DWIHN hosted a resource table at the Wayne County Women's Commission Women's Resource Fair.

April 27 - DWIHN also participated in Community Outreach Event with Potential Rehoboth International Ministries in Detroit.

April 29 - YU hosted a resource table at the Plymouth-Canton Community Schools Mental Health and Wellness Fair at Kellogg Park in Downtown Plymouth.

## CHILDREN'S INITIATIVES

### School Success Initiative:

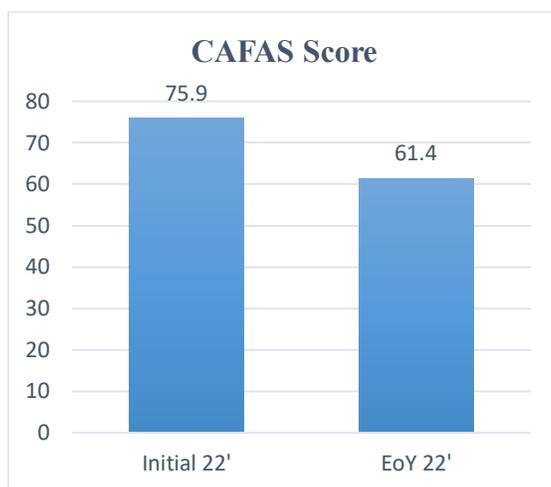
Children's Initiative Department met with the Access Department to review the status of SSI referrals from FY 2022 to present time. There were barriers with students and families completing the screening to start the SSI Program. Barriers included: 1) Families avoiding answering unknown phone numbers when screeners make phone calls, 2) Families not being available to complete the screening, 3) Longer wait time when families call for the screening. As a result, discussed proposed solutions of SSI Providers also being able to complete screenings; however, Access Department preferred either DWIHN Access Department or Children Provider complete the screenings. Next Steps: Discuss the two options during the next SSI Provider meeting in May 2023.

### Goal Line:

GOAL Line informed they administer the Devereux Student Strengths Assessment (DESSA) through Aperture Education. This screening tool is normed for K-8 that measures outcomes for social emotional learning in the areas of 8 core competencies: 1) Self Awareness, 2) Self-Management, 3) Social Awareness, 4) Relationship Skills, 5) Goal Directed Behavior, 6) Personal Responsibility, 7) Decision Making, 8) Optimistic Thinking.

### Child and Adolescent Functional Assessment Scale (CAFAS):

The CAFAS is used to assess functioning across critical life domains and yield a total score and subscale scores for children 7-21 years of age. The total score ranges from 0-240 and measures overall impairment. A 20-point decrease is considered to be meaningful improvement. Subscales are rated 0 (no impairment) to 30 (severe impairment). Subscales include School, Home, Community, Behavior, Mood, Self-Harm, Substance Use, and Thinking.



-47% of youth had a reduction in total score by at least 20 points from their initial score.

### Juvenile Detention Facility (JDF) Treatment Services:

DW IHN is working on two programs to assist youth to receive behavioral health treatment services. The first is a partnership between DWIHN, Team Wellness, and JDF. Team Wellness has established a partial day treatment program for adjudicated youth. This will be at Team Wellness location. Currently six (6)

youth have been identified for the program, but it is projected that it could increase to upwards of 70 youth. This program will offer mental health and co-occurring treatment, education, recreational activities, and community living skills. This program is projected to start by June 2023. The second program is working with JDF, Growth Works and Havenwyck on a program for youth identified as needing hospital stabilization that may require a longer than average stay. This program is targeted to begin 10/1/2023.

## **FACILITIES**

On April 25, there was a meeting with O’Hair Park Neighborhood Association to gather community input and provide updates on our Integrated Behavioral Wellness Campus on 7 Mile.

On May 4, a DWIHN survey was shared with all staff, board, and surrounding community members to vote gather input on the exterior color of the new Clinical Care Center.

## **ADULT INITIATIVES**

### **Assertive Community Treatment (ACT):**

There are currently 835 individuals receiving ACT services from eight (8) service providers in Wayne County. The monthly ACT forum discussed completion of clinical documentation with regards to the Pre-admission Review (PAR), PHQ-9 updates, hospital recidivism, Assisted Outpatient Treatment orders, ways to engage members, and coordinating care. For the month of April there were nine (9) ACT members who were hospitalized out of 835 members (1.07% of total members).

### **PHQ-9 Performance Improvement Project:**

DWVHN monitors network providers PHQ-9 performance at intake and at the 90 day follow up period. The PHQ9 is a self-report tool administered to screen, diagnose, and measure the severity of depression. It is required that all providers administer this tool with at least a 95% completion rate. For the month of April 2023, it is currently 100.0% completion at intake (up .8% from March). The 90-day follow-up completion within 90 days is currently at 81.2% completion (an 11.9% improvement from March). DWIHN is currently working with the provider network to increase the 90-day compliance rate using monitoring and training tools.

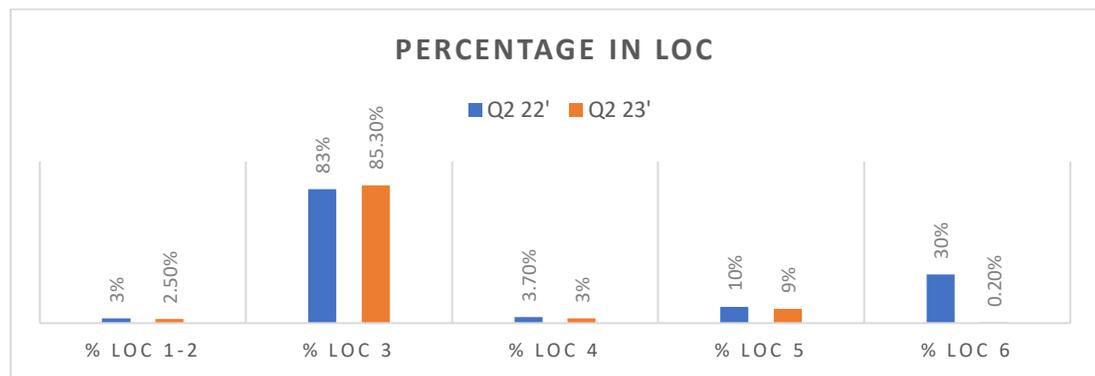
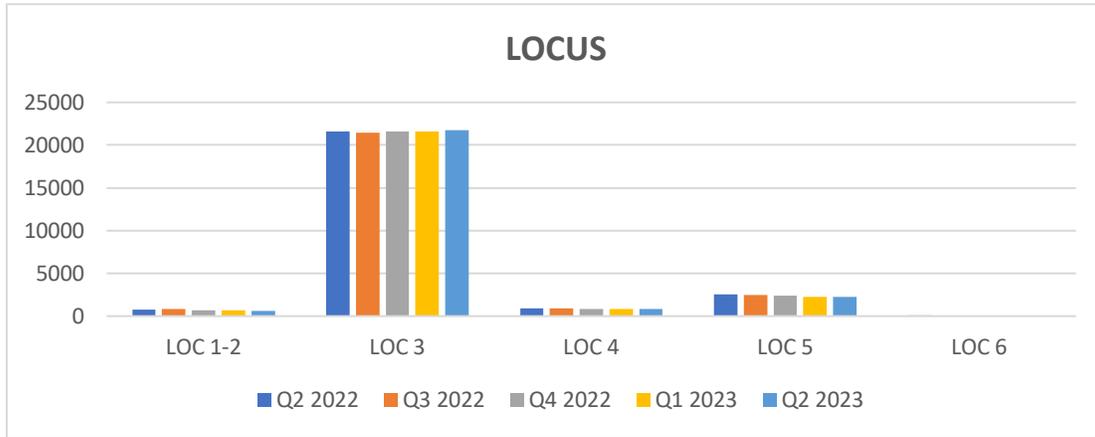
### **1915iSPA:**

MDHHS, as required by CMS, has implemented its new approval process for 1915iSPA services. These services were formally known as Medicaid B3 services and has transitioned to 1915iSPA. These services included: Community Living Supports, Respite, Fiscal Intermediary, Housing Support, Supported Employment, Skill Building, Medical Equipment, Environmental Modification, and Enhanced Pharmacy Services. Individuals recommendation for any of these services are first required to be assessed and referred for approval through DWIHN and then MDHHS. It is projected that DWIHN has over 6,000 members that receive at least one of the above-mentioned services. DWIHN has approved and enrolled over 1,400 members to date. DWIHN has provided additional training for our provider network, which included member-specific information for enrollment. DWIHN has also worked with PCE to add the 1915iSPA application information into the clinical assessment for easier identification and follow-up. DWIHN has provided each provider with their current enrollment status and expectations regarding timely submission.

### **LOCUS Assessments:**

The Level of Care utilization System (LOCUS) is used to assess an individuals’ current mental health, determine intensity of service needs, and make treatment recommendations. It is a scale used to determine what level of care an individual’s needs. It evaluates Risk of Harm, Functional Status, Medical, Addictive & Co-Morbidity, Recovery Environment, Treatment and Recovery History, and Engagement & Recovery Status. A Locus is done at initial Access Screening, upon Intake, and at minimum annually as a part of the person-centered planning process.

	LOC 1-2	LOC 3	LOC 4	LOC 5	LOC 6
Q2 22	725	21582	895	2567	78
Q2 23	624	21718	801	2245	61



Mental Health conditions are chronic in nature and clinicians look for incremental improvements in recovery. The goal is for persons to improve in their mental well-being and be able to move to the least intensive treatment environment as possible. LOC 1&2 is considered mild to low intensity community-based Service needs, LOC 3 is High Intensity Community Based Services, LOC 4 is Medically Monitored Non-Residential Services, LOC 5 is Medically Monitored Residential Services, and LOC 6 Medically Managed Residential Services. When comparing Q2 2023 to Q2 2022, there was a decrease in individuals receiving the three (3) highest levels of care.

## DIVERSITY, EQUITY AND INCLUSION OFFICER

The DEI Office participated in the following trainings/initiatives during the month of April 2023:

- Detroit Partner Call/National Disability Institute: Continuing the Conversation Financial Stability Challenges at the Intersection of Race, Ethnicity, Poverty and Disability – Steering Committee Meeting.
- Black Health & Racial Equity Research Network Meeting
- Panel & Listening Session: Opportunities & Challenges of Community-Engaged Research
- DEI Survey Results (All staff meeting)
- Microaggressions Training Video (Lunch n Learn) – In Progress
- Southern Wayne County Regional Chamber Business Forum – Diversity, Equity & Inclusion: Strategies for a Busy World.

## **INFORMATION TECHNOLOGY**

### **Business Processes:**

- DSM-V Conversion & Social Determinants of Health
  - MHWIN converted to using DSM-V and incorporated the Social Determinants of Health effective 5/1/23.
- 1915(i) SPA
  - Programming and testing MHWIN to include the 1915(I) SPA while also enabling the capability to identify members enrolled in this benefit plan.
- Residential Vacancies
  - Worked with the Residential & MCO Depts. To redefine the approach in capturing residential vacancies & updated MHWIN to incorporate the changes to ensure DWIHN has corporate knowledge of actual vacancies that exist across the network.
- OBRA Implementation
  - Established an OBRA module within MHWIN to capture DWIHN related documentation on behalf of the OBRA implementation.

### **Applications and Data Management:**

- Henry Ford Joint Project:  
DWIHN team working on expanding this collaboration to develop insights and member engagement for ADT's when members show up in the Emergency Department.
- Dashboards for Behavioral Health Homes and Opioid Health Homes:  
Currently in the process of creating new PowerBI dashboards for monitoring health home information.
- Children's Services Dashboard:  
Delivered the first nine dashboards for Children's services. Continuing to work on additional dashboards.
- Provider Network Adequacy Dashboard:  
In the process of developing dashboards to analyze provider network adequacy as it relates to HSAG standards.
- Warehouse Data Reconfiguration:  
Created partitioned tables and partitioning functions in test database. Volume testing is underway

### **Infrastructure/Security/ IT Compliance:**

#### **Building Construction:**

- Woodward – RFP 2023-006 (Audio/Video) submitted and vendor validation to be completed.
- RFP 2023-003 Phone System evaluation underway. Sandbox testing in progress to evaluate ease of use, functionality and support.
- Network Assessment – Hardware pricing and quotes received and being verified. IT team is continuing to establish labor and vendor selection to finalize prior to submission for board review.
- Crisis Center systems received and evaluation / testing underway for product viability.
- Continuing to work to configure the building security and video camera systems to meet the needs of the new Crisis Center as well as support a Multi-Campus system Going forward.
- Nutanix installation completed. Beginning phase-in migration process.
- Working on the Badging system Camera, Printer, and photo configuration standards needed to support the building access system and other security systems that will dovetail on the photos etc.

#### Security:

- Completed work on the IT security maturity assessment. vCISO project is continuing to identify gaps in various policy and SOP to meet compliance standards.
- USB Block policy established and deployed in phases to DWIHN Departments. To date, no adverse issues reported or impact to users and operations.

#### Onboarding/Offboarding:

- Working with HR to develop a new automated onboarding/offboarding process in Therefore to meet Access Control standards in compliance frameworks.

## AUTISM

The total open cases for the month of April are 2,351, which is a decrease 6 members from March to April (data pulled on 4/26/2023).

To improve access to ABA therapy the Access Call Center and ASD Department coordinated efforts to reestablish scheduling members for intakes with ABA providers within DWIHN's network. The ABA provider network was informed during the monthly meeting and the Access Call Center staff have been trained on the new procedure. The Detroit Wayne Integrated Health Network (DWIHN) offered a training on the Treatment Plan Training Procedure for Direct Support Professionals to ensure all 16 ABA providers in the network were present. DWIHN provided two opportunities to attend and for those that could not attend, the training was videotaped. After the training, ABA providers are expected to internally train staff to ensure a successful roll out date of June 1, 2023. All Treatment Plan training documentation from that date and beyond must occur using both the forms and systems outlined in the training.

## INNOVATION AND COMMUNITY ENGAGEMENT

### **Detroit Police Department Partnership:**

During the month of April, there was participation in weekly Detroit Homeless "DHOT" Outreach Meetings. Identified complex cases and assisted with the coordination of care to address individual needs. There were 107 encounters, 92 individuals received follow-up and one (1) was directly connected to both behavioral health and housing services. A Behavioral Health Specialist (BHS) continues to be embedded at DPD's Communication Center to assist with any calls that need mental health support and resources. At the time of this report, 15 individuals received follow-up support.

In the month of April, DPD co-responders had 222 encounters; 31 of those were suicide-related and 37 were connected to a service. Individuals were provided with various resources for assistance with mental health, substance use, and homelessness.

### **Wayne County Jail:**

Staff met with the Mental Health Director of Naphcare and Wayne County for the second quarter review. The enrollment process was further discussed and how the discharge planners can determine appropriate referrals. It was stated that it seems probable that the mental health designation from the jail will be changed to only indicate current mental health designations, not previous ones. That would allow accurate information on who is a current mental health designee.

### **Veteran Navigator Services:**

Staff interacted with 27 new veterans via face-to-face, phone, text, and email correspondence. DWIHN received several requests from the Veteran Resource Center in Lansing to check in on veterans. There were approximately 17 veterans in the VA inpatient unit. The team met to discuss ways that we can assist Veterans who are released from prison and may need transitional assistance. The same is true for Veterans getting out of jail. Attended food distribution events with Soldiers Angels in Detroit and Veterans Haven in Wayne. Both monthly ongoing events. It was the regular food distribution event with roughly 170 being

served in Detroit and 87 served in Wayne/Romulus. It continues to be a good way to connect with Veterans while they are waiting in their cars to get food. Was able to assist a number of Veterans on the spot with resources.

### **Workforce Development:**

During the month of April, staff continued to monitor DWIHN staff compliance with required training. Weekly notifications are sent to staff in the form of reminders to the DWIHN administrators and supervisors.

Mental Health First Aid and QPR were offered to the network and interest continues to grow from community members and laypersons. Staff approved CEU applications for agency and network-hosted training sessions. Staff conducted a self-audit of the DWC training site to verify that the credit hours listed match on the front end and back end.

This month, staff continued to participate in the facilitation of the all-girls mentorship group at Renaissance High School located in Detroit. The purpose of this mentorship group is to provide sisterhood and advice to girls transitioning from middle school to high school, and high school to college. However, we recently had two males join the group and we are welcoming a more inclusive group approach. Staff have begun taking steps to prepare for the 2023 Summer Youth Employment Program (SYEP) cohort.

## **INTEGRATED HEALTHCARE**

### Behavioral Health Home (BHH):

Current enrollment - 532 members (March- 486):

DW IHN continues to work on increasing enrollment by adding additional Health Home Partners (HHPs) to our BHH network. Working with providers on data clean-up and ensuring members are being seen as expected in this program model. DW IHN will be putting a Request for Information (RFI) to our CRSP provider network to expand BHH services. DW IHN met our BHH incentive goal for year 1.

### Opioid Health Home (OHH):

Current enrollment- 591 members (March- 381): DW IHN continues to work on increasing OHH enrollment and ensuring enrollment data is accurate in both the DW IHN and State systems. DW IHN is working with providers on data clean-up and stress the importance of seeing members as expected in this program model. DW IHN met the MDHHS OHH incentive for this fiscal year.

### Certified Community Behavioral Health Clinic- State Demonstration (CCBHC):

Current enrollment - 3,340 members (March- 3,297):

- A CCBHC site provides a coordinated, integrated, comprehensive services for all individuals diagnosed with a mental illness or substance use disorder. It focuses on increased access to care, 24/7/365 crisis response, and formal coordination with health care.
- The Guidance Center is the designated CCBHC provider for Region 7. The Guidance Center achieved all outcome incentives for the last year:

### **DW IHN CCBHC Efforts:**

DW IHN is currently working on the SAMHSA CCBHC Expansion grant. The application is due May 19, 2023. The State of Michigan has also announced that they are expanding the CCBHC Demonstration in Michigan and the CMHSPs are eligible to apply. DW IHN will be applying for this as well and the application is due by July 1, 2023.

## Omnibus Budget Reconciliation Act/Pre-Admission Screen Annual Resident Review (OBRA/PASRR) Services:

As of April 1 2023, DWIHN is providing OBRA Assessment Services. All staff needed were hired except two evaluators and one support staff.

### Monthly Referrals

1. # Referrals processed: 844
2. # Referrals requiring an assessment: 417
3. # Referrals requiring as exemption letter: 427
4. Current # of referrals in 14-day que: 380

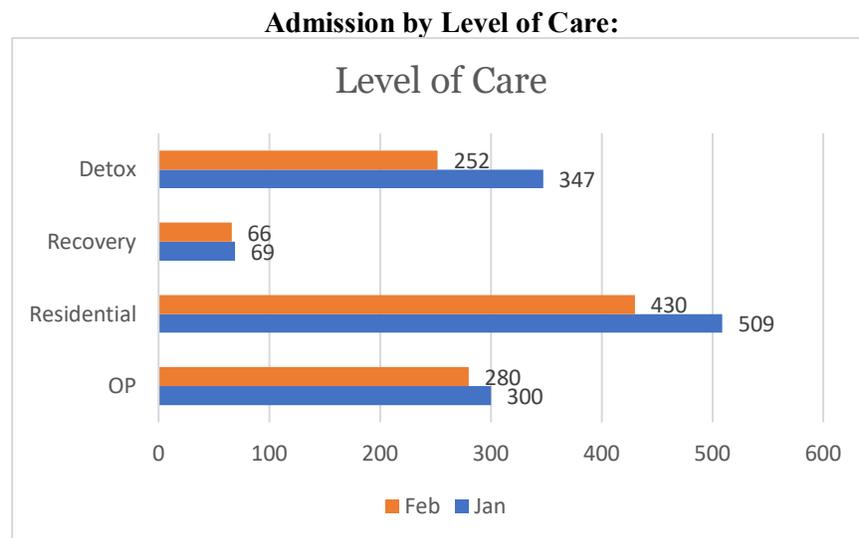
## QUALITY

DWIHN has multiple upcoming Compliance Reviews. HSAF Final year review of the 3-year cycle will happen in August of 2023. Validation Review of our data will happen in June and July.

Quarterly Performance Indicator Review continue with the State. For indicator 2a (Access of services or Biopsychosocial within 14 days of request), the reporting percentage increased from Q4 2022 (44.6%) to (45.15%) for Q1 2023. The preliminary score for Q2 2023 is noted at 49.42% which is a 4.27 percentage point increase from Q1. The average score for the state is noted at **51.57% for Q1 2023**.

For Quarter 1 2023, DWIHN is pleased to meet all of MDHHS' standards for which a benchmark has been identified. We will continue our efforts will continue to try and achieve these rates during future quarters.

## SUBSTANCE USE SERVICES



There are four main levels of treatment for substance use disorder: Outpatient, Residential, Withdrawal Management (Detox) and Recovery. The majority of members are referred to Residential services.

### **Recovery Coach Outreach Initiative:**

Total: 944 SBIRT screenings utilized with 624 referrals confirmed residential treatment admissions from 3/8/2022 to 3/8/2023 which resulted in 66% of persons screened being admitted into residential treatment. Of the number of individuals screened 628 were African American and the 266 where Caucasian, 4 Asian, 5 Hispanics, 1 Chaldean, 1 Polish, 1 Lebanese, 1 Yemeni, and 6 Arabs and 31 were other. 728 were male and the 216 were female between the ages of 21-73.

**SUD Site Review:**

SUD is scheduled for site review with the MDHHS for 1115 Waiver/SABG Region 7. The review will encompass projects from the following grants: American Rescue Plan Act Substance Abuse Block Grant, Partnership for Success, Pregnant and Postpartum Women Pilot Prescription Drug Overdose, State Opioid Response 2 No-Cost Extension, State Opioid Response 3 Tobacco II.

**RESIDENTIAL SERVICES**

There were 153 referrals for residential services in the month of April and seven (7) of those were transferring from I/DD self-directed members. DWIHN had three (3) facility closures in April and all members were successfully relocated. DWIHN saw a significant reduction in returned authorizations in the month of April (from 30% returned to the CRSP provider in March down to 13% returned in April). This shows an improvement of providers submitted the appropriate information to evaluate requests timely.

**UTILIZATION MANAGEMENT****Habilitation Supports Waiver (HSW):**

DWHIN's HSW utilization is currently at 93.6%. MDHHS expects each region to be at 95% utilization. DWIHN has put in corrective efforts to increase these enrollments and we are seeing an overall increase. DWIHN's Residential team has identified 11 potential HSW enrollees that the CRSPs have either completed or are in the process of completing. The residential's team's work on this project continues to be invaluable in supporting the CRSPs and the HSW team in identifying new members that are likely to be appropriate for HSW enrollment. The DWIHNIPPOS initiative identified 11 potential enrollees. The CRSPs have been working to either enroll these members or provide context as to why these members may not be appropriate for HSW enrollment.

The CRSP's have received the IPOS lists for an additional 22 members with IPOS's due in May and June so they can begin working on confirming if these members are eligible for HSW enrollment. The HSW team continues to meet with providers to provide education and training around HSW, the eligibility criteria, and benefits to DWHIN's members. MDHHS has indicated that members without current certification (more than 30 days old) will no longer be certified in HSW as of May 2023. DWIHN is working with providers to ensure these recertification applications are submitted timely.

Fiscal Year to Date												
	Oct	Nov	Dec	Jan	Feb	March	April	May	June	July	Aug	Sept
<b>Total Slots</b>	1084	1084	1084	1084	1084	1084	1084					
<b>Utilized</b>	1009	1009	1008	1007	1007	1005	1015					
<b>Available</b>	76	76	76	77	77	79	69					
<b>New Enrollments</b>	9	5	6	2	7	6	TBD					
<b>Utilization</b>	93%	93.1%	93%	92.9%	92.9%	92.7%	93.6%					

**Outpatient Authorizations:**

DWHIN made a change in our MD-WIN system to improve reporting of our compliance rate for timely authorization approvals. This is to ensure that the count of 14 days will always begin at the original

submission date. SUD UM staff approved 1,459 authorizations between 4/1/23 and 4/30/23. Of these 1,459 authorizations, 1,264 or 86.6% were approved within applicable timeframes. The above- mentioned technical changes will also impact these authorizations and the data that is reported about them.

**Inpatient Admissions:**

In the month of April, the UM Team has managed a total of 831 new hospitalization admissions across the provider network (including MI Health Link members). This data includes inpatient, partial hospitalization, and crisis residential services. In the month of April, there were 721 (non-MI Health Link) admissions for inpatient treatment, reflecting a 3.6% increase from the 701 inpatient admissions during March 2023.

SMI/SED	# Admitted Members	# Admissions	Avg Length Of Stay	Median Length of Stay
IDD	19	19	11.63	11
SED	83	87	9.56	8
SMI	582	611	8.71	8
SUD	7	8	6.00	6
<b>Total</b>	<b>691</b>	<b>725</b>	<b>8.86</b>	<b>9</b>

Source: Power BI - Hospitalizations and Recidivism - Acute Inpatient

The data outlined below reflects the number of admissions as of 4/30/2023:

- Inpatient: 721
- MHL Inpatient: 6
- Partial Hospital: 75
- Crisis Residential: 29 (adults – 21 and children - 8)
- Total Admissions: 831