



## President and CEO Report to the Board November 2024

### FINANCE

Detroit Wayne Integrated Health Network's (DWIHN) will have its audited September 30, 2024 financial statements available in accordance with the State of Michigan reporting deadline of March 31, 2025. Consistent with prior years, DWIHN's finance team is actively working on closing the books to meet this deadline.

### LEGISLATIVE EFFORTS

On November 20, Public Affairs Associates (PAA) is scheduled to present at the November Full Board Meeting on Post Election - Legislative Outlook.

During the CMHAM Fall Conference, Board Member Bernard Parker was selected to represent the Tri-County region on the Contract and Financial Issues (CFI) Committee, which focuses on the CMHSP and PIHP Contracts with MDHHS.

### ADVOCACY AND ENGAGEMENT

- November 13: DWIHN's efforts were recognized as we won the 2024 Public Safety Partner Award for our partnership with the Detroit Police Department in training their officers in CIT and Co-Response efforts at the Above and Beyond event held by the Detroit Public Safety Foundation.
- November 6: DWIHN's Youth United Group held a Courageous Conversation Town Hall on Gun Violence, along with CeaseFire Detroit, OK2Say and the Detroit Police Department to address conflict resolution and offer healthy community resources.
- October 31: DWIHN's 1<sup>ST</sup> Annual Trunk or Treat was held at the new Administration Building lot and hosted neighborhood families and shared DWIHN behavioral health resources.
- October 21: DWIHN's Drs. Faheem and Mammo gave a poster presentation at the 10<sup>th</sup> Annual ACCESS Arab Health Summit. The presentation focused on DWIHN's crisis services, addressing a critical need for mental health treatment amidst crisis and providing immediate access to mental health services.
- October: Dr. Kanzoni Asabigi, SUD Board Member, appeared in Bridge Magazine recognizing Substance Use Prevention Month. Michigan is seeing a decline in opioid overdoses and deaths. Now is the time for increased strategies like school-based programs to break the cycle of addiction for future generations.

## **INTEGRATED HEALTH PILOT UPDATE**

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**

DWIHN and IHC meet monthly for care coordination. Due to Health Plan One not having staff to complete care coordination, this has been put on hold. DWIHN staff will continue to assist members with care.

### **Health Plan Partner Two**

Care Coordination with Health Plan Two was initiated in September 2020. These meetings occur monthly. Health Plan Two had twenty-four members identified as having gaps in care that were coordinated with care teams to develop care plans and those care gaps were addressed. Presently 146 members have received care coordination.

### **Health Plan Partner Three**

DWIHN staff are working with Health Plan Three on a project of monitoring individuals who utilized the emergency room department units and how to perform data sharing. There are four CRSP's in the pilot: Neighborhood Services Organization, Lincoln Behavioral Services, Hegira and The Guidance Center. DWIHN in the Month of October the Health Plan met with the CRSP to reeducate on why a release of information is needed.

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

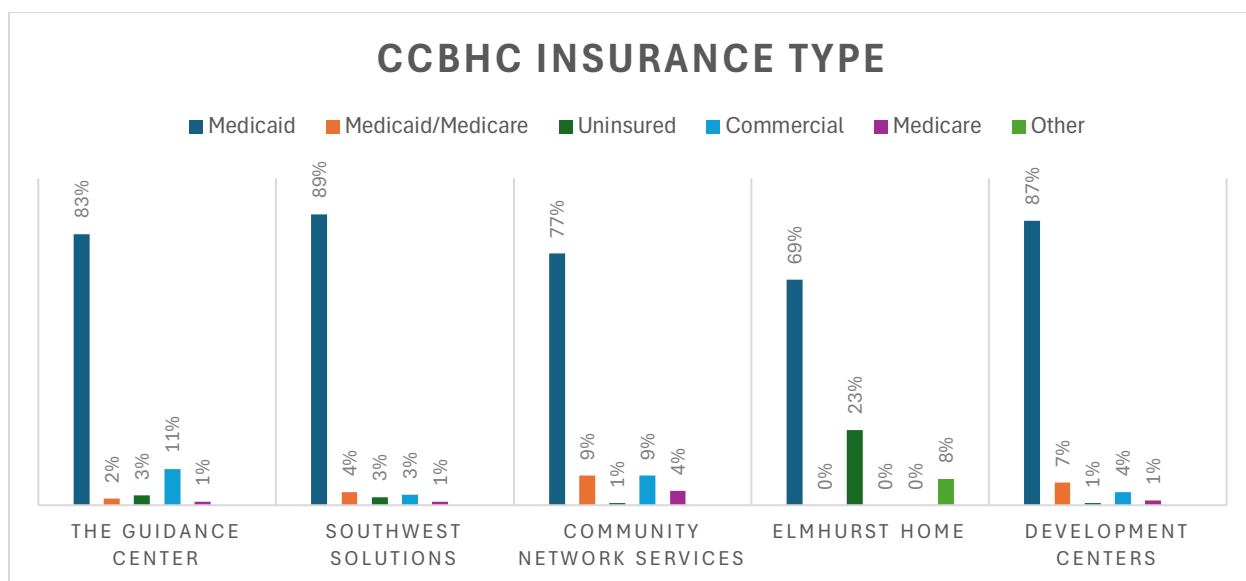
Healthcare Effectiveness Data and Information Set (HEDIS) is a tool used by health plans to measure performance on important areas of care. DWIHN has developed a HEDIS scorecard based on claims from our CRSP and claims pulled from the MDHHS claims warehouse CC360. DWIHN is following the guidelines set by the National Committee for Quality Assurance (NCQA) as to the behavioral health HEDIS measures to monitor and report on. These measures are a combination of medical interventions and behavioral health interventions that affect one's recovery and independence in the community. During the month of October, the HEDIS scorecard was reviewed at thirteen CRSP monthly meetings and FUH data and two CRSP's requested individual training on all HEDIS measures.

## **CLINICAL OPERATIONS**

### **Home Health Initiatives:**

Certified Community Behavioral Health Clinic (CCBHC) - 12,333 members enrolled:

The Health Home team continues to support Hegira as a new CCBHC State Demonstration Expansion site. The number of CCBHC enrollees is expected to climb to approximately 16,000 by the time Hegira has rolled their CCBHC eligible population into the demonstration. The following graph demonstrates member insurance type by CCBHC provider. DWIHN is missing this information from ACCESS as they did not provide the required data to MDHHS and have been placed on a Plan of Correction.



Mark Matthews, CCBHC Program Analyst, started with the Health Home team in mid-October. Mark will serve as a key technical assistance contact and liaison for demonstration sites in the region and create, direct, and implement CCBHC demonstration policies and procedures. The Health Homes team is hard at work implementing the many changes required in the CCBHC Handbook for FY2025. The results of the Fiscal Year 23-24 State reported outcome measures will be available in March of 2025.

#### Behavioral Health Home (BHH) - 807 members enrolled:

The Health Home team will be presenting two new sites for the Board's consideration to join the BHH program: Elmhurst Home and Neighborhood Service Organization. The Health Home team is focused on providing data to our provider partners to ensure effective utilization of Health Home services and improved outcomes; both for Pay for Performance Measures and for the general health status of members in the programs. Key activities include development of ADT reports to flag health events among Health Home beneficiaries, and a 30/60/90-day report sent to providers to encourage consistent engagement with enrollees.

#### Substance Use Disorder Health Home (SUDHH) - 663 members enrolled:

The diagnosis expansion was effective October 1st and includes stimulant use disorder and alcohol use disorder. This has resulted in approximately 130 new enrollments thus far, and most of those members indicate an issue with alcohol use disorder. The Health Home team will be presenting a new site for the Board's consideration to join the program: Elmhurst Home.

#### FY23-24 Health Home Highlights:

This was a big year for CCBHC expansion; certified providers in Wayne County expanded from a single provider to six providers. The DWIHN CCBHC PIHP team provided technical assistance to all six of these providers in their initial onboarding and FY24 recertification with MDHHS. In fiscal year 2023, DWIHN's Health Homes achieved 5 of 6 Pay for Performance measures set by MDHHS, and Region 7 was awarded a total of \$183,603.35 in Pay for Performance dollars across both health home programs. The team is very focused on these measures and improving outcomes in the current measurement year and beyond.

## **CHIEF MEDICAL OFFICER**

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

The student rotations have been going well. One PA student completed their Psychiatry rotation, and another one started in November. It was well received on both ends. Two Psych NP students started at the end of October.

Dr. Mammo presented at ACCESS's 10<sup>th</sup> Arab Health Summit on DWIHN's crisis services addressing a critical need for mental health crises and providing immediate access to mental health services.

Our internal team met with the University of Michigan Child and Adolescent Psychiatry Department to further discuss collaboration. They have an educational grant to provide Autism education and consultation groups with a goal to increase knowledge of providers who treat individuals with Autism Spectrum Disorder and/or Developmental Disability. The resource links will be added to DWIHN's website soon. ABA providers are encouraged to participate in group consultations to connect directly with other experts in the field of autism.

### **MDHHS Updates:**

#### **PIHP/CMHSP Medical Director Meeting**

Dr. Pinals updated on the progress of State constriction of Walter reuther psychiatric hospital which is going well, and is set to open beginning of 2026. It will be serving 80 youth and 260 adult. She talked about the 2 State certified CSU sites including DWIHN as one of them that are expanding the crisis continuum in State. There was discussion on 1115 Medicaid waiver demonstration that would provide Medicaid coverage to adults and youth in jails and prisons 90 days before release. There was discussion on CCBHC expansion sites.

There was discussion on Opioid settlement and its focus on expanding MAT services and an overall update that the State is heading in better direction in terms of overdose deaths. On Children side, Michicans went live Oct 1<sup>st</sup>. They saw some issues for children served under SED waiver and 1915i waiver so they will continue using CAFAS for that population for now.

### **Crisis Center Medical Director Updates:**

Dr. Mammo has worked in this capacity for more than a year and the Crisis Center has now been open for 6 months.

- We lost some APPs but were fortunate to find and hire two full-time APPs that started in October 2024 for day and evening coverage. Two full-time APPs will start in November 2024 for day and evening coverage. One contingent APP started in October 2024 to help with coverage. We have now hired all full-time APP positions
- We have interviewed two contingent psychiatrists and a few more interviews are continuing; we will be sending offers subsequently. Our goal is to have a large contingent pool to avoid any coverage issues.
- Psychiatrists and APPs continue to regularly receive training on updated policies and procedures and evidence-based practices. Last month, they were trained on medication processes for minors.
- In October, there were over 170 presentations to the Crisis Care Center. Children and adolescent evaluations notably increased (120 adults and 50 children).
  - Top diagnoses in October for children and adolescents include Depressive disorders and Disruptive and impulse control disorders

- Top diagnoses in October for adults include Bipolar disorders, Depressive disorders, and Psychotic disorders
- In October, there were zero physical or mechanical restraints, and zero use of emergency involuntary medications. Daily case discussions have optimized care of individuals.

### **Outpatient Clinic/CCBHC Medical Director Updates:**

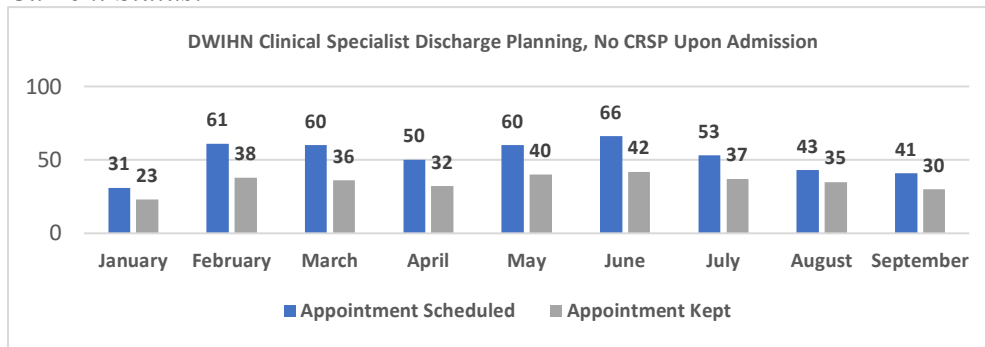
Dr. Severe started in July and is the Medical Director and Adult Psychiatrist for the Outpatient Clinic. We also hired a part-time child psychiatrist for Dr. Brinkiji. These doctors, along with the rest of the team hired under Ms. Ebony Reynolds, have started serving both adult and children's populations. The goal is to have a hub location with multiple satellite locations that provide fully integrated care under CCBHC certification, in collaboration with primary care providers such as FQHCs, that address physical and behavioral health needs of individuals.

## **CRISIS SERVICES**

### **Inpatient Discharge Planning:**

Beginning in January 2024, Clinical Specialists in the PIHP Crisis Services Department met with members admitted to an inpatient level of care without an assigned provider, face-to-face at Beaumont Behavioral Health (BBH), BCA Stonecrest, and Henry Ford Kingswood (HFK). The team ensured members were engaged in their own discharge planning, identifying barriers and supports for a successful transition to services in the community.

#### *Current Status:*



The PIHP Crisis Team saw 465 members face-to-face in FY 23-24 and helped support 313 members to attend their aftercare appointments after their inpatient hospitalization. The Clinical Specialists were able to work with DWIHN Access, the member, and the assigned provider to connect members to their chosen provider for ongoing treatment services in the community. The team has recognized the need to expand these services and to identify areas of need within claims data. The team will identify hospitals that have low rates of service connection upon discharge and target those areas with this process. The team will look to expand into hospitals beyond BBH, BCA, and HFK.

## **DIRECT CLINICAL SERVICES**

DWIHN Community Care Clinic is open and provides in-person and telehealth services on the third floor of the 707 Milwaukee building for both children and adults. Services include intake assessment, treatment planning, outpatient therapy, case management, psychiatric evaluation and management. These services are in line with the core set of services required to be delivered by a CCBHC, for which DWIHN has provisional certification. A second site location, in the Detroit

area, has been identified on 6 Mile and Greenfield as a co-location clinic within the federally qualified health center (FQHC), Advantage Health. This temporary site location will also be aligned with the CCBHC model of providing whole-person physical and behavioral health care. This location is near the upcoming 7-Mile campus, which will be the permanent site location upon completion. Lastly, DWIHN is in the process of securing a location in the Wyandotte service area, with plans to finalize terms soon to request board approval.

#### CCBHC Demonstration Expansion:

DWIHN has received provisional certification to become a CCBHC demonstration site effective January 2025. The DWIHN clinical team is finalizing paperwork items due to the State by November 22, 2024 and, upon approval, DWIHN will be granted full certification. This certification will greatly expand access of behavioral health services to individuals with severe mental illness and individuals with mild to moderate mental health diagnosis regardless of residency, insurance or ability to pay. CCBHC demonstration sites are required to provide nine core services to its beneficiaries. Those services are Crisis Services, Screening Assessment and Diagnosis, Outpatient Behavioral Health Services, Person Centered Planning, Outpatient Primary Screening and Monitoring, Behavioral Health Urgent Care, Targeted Case Management, Psychiatric Rehabilitation, Peer and Family Supports and Intensive Community Based Services to Veterans. In addition, the State requires the use of specific evidence-based practices (EBP) to deliver CCBHC services. Those EBP's are as follows: Air Traffic Control Crisis Model with MiCAL, Assertive Community Treatment (ACT), Cognitive Behavioral Therapy (CBT), Dialectical Behavior Therapy (DBT), Infant Mental Health, Integrated Dual Disorder Treatment (IDDT), Motivational Interviewing (MI) for adults, children, and youth, Medication Assisted Treatment (MAT), Parent Management Training – Oregon (PMTO) and/or Parenting through Change (PTC), Screening, Brief Intervention, and Referral to Treatment (SBIRT), Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and Zero Suicide. For the services that DWIHN does not directly provide, CCBHC allows agreements with designated collaborating organizations (DCO). This certification will be a huge shift for DWIHN and will positively broaden the scope of services delivered to members in the community.

#### Direct Services Next Steps:

- Continue development of direct service model of practice around CCBHC performance measures.
- Continue to build and enhance direct services to serve up to 200 children and adult individuals by December 2024. This will improve the timeliness performance indicator for children and adults non-emergent request for service.
- Continue to build home based and outpatient services for children. This will improve the children's timeliness performance indicator and support reduction of children's hospital recidivism.
- Build ACT services for adults with mental illness.
- Apply for Joint Commission accreditation to deliver substance use disorder services.
- Improve compliance with follow-up after acute care settings by offering same day access to individuals.
- Enhance electronic medical records to meet contractual quality performance measures.

## HUMAN RESOURCES

DWIHN was awarded one of the Detroit Free Press' "Top Workplaces 2024" in the Midsize Business Category. The award ceremony was held on November 14, 2024. This is the second year in a row that DWIHN has received this honor.



During the past month, DWIHN hired the following staff:

Behavioral Health Clinician (Home Based Services)	2
Call Center Representative	
Clinical Specialist - Crisis Services	
Credentialing and Impaneling Specialist	
Dispatch Coordinator	2
Dispatch Coordinator - PAR Services	4
Dispatch Coordinator - PAR Services (Part-Time)	3
Grants Fiscal Manager	
Mobile Crisis Clinician	2
Nurse Practitioner (Contingent)	
Peer Support Specialist - Crisis Services	
Physician Assistant	
Registered Nurse - Crisis Services	3
Registered Nurse - Crisis Services (Contingent)	2
Systems Administrator	

### *Promotions:*

Associate Vice President of Access and Strategy  
Associate Vice President of Clinical Operations  
Behavioral Health Technician  
Call Center Manager  
Clinical Specialist - Performance Monitor



Director of Utilization Management	
Dispatch Coordinator - Mobile Crisis (Contingent)	
Dispatch Coordinator - PAR Services	3
Dispatch Manager - Crisis Services	
Nurse Practitioner - Crisis Services	
Peer Support - Crisis Services	
Program Analyst – CCBHC	
Registered Nurse - Crisis Services	
Senior Director of Grants and Community Engagement	

DWIHN HR has reached a tentative agreement with AFSCME and begun contract negotiations with GAA. DWIHN HR completed the Annual Performance Evaluation. The Supervisor Institute is still ongoing. Plans have begun to identify the next group of supervisors for the training.

## **INFORMATION TECHNOLOGY**

### **Business Processes/Service Desk**

- Autism Risk Matrix
  - Autism Risk Matrix continues to be programmed.
- CCBHC
  - Working internally with staff and PCE to ensure MHWIN has all the necessary components.
  - PCE facilitated a demo of the CCBHC requirements for business
- Wrike
  - Technician and Manager trainings held for the IT department
  - Completed the close-out of Wrike in terms of implementation
  - Launched Wrike within the IT dept and staff are adding projects to the platform
- NeoGov Learn
  - Continue to complete the upload of trainings and transcripts for DWIHN staff
- PAR Dispatch
  - Finalized all components of this project within MHWIN and is ready for launch
- Laptop Deployment
  - Deploying approximately 250 new laptops to DWIHN staff
  - Scheduled deployment meetings with staff and majority have been completed while finishing up in the beginning of November
- Questica
  - Automated processes to upload data to Questica completed and tested, currently being vetted by the budgeting team.
- Henry Ford Joint Project
  - Continued data loads for project
- Provider Network Adequacy Dashboard
  - Added more columns to data export
- EQI reporting
  - Conducted P1 assessment of data results
- Building Desk Hoteling



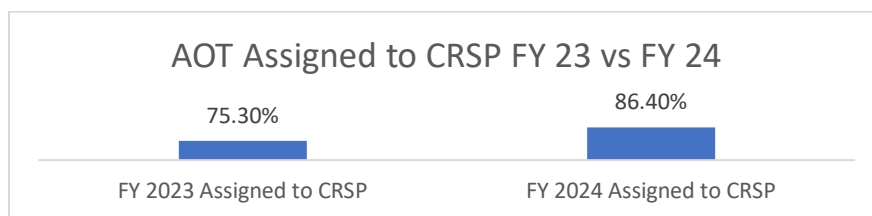
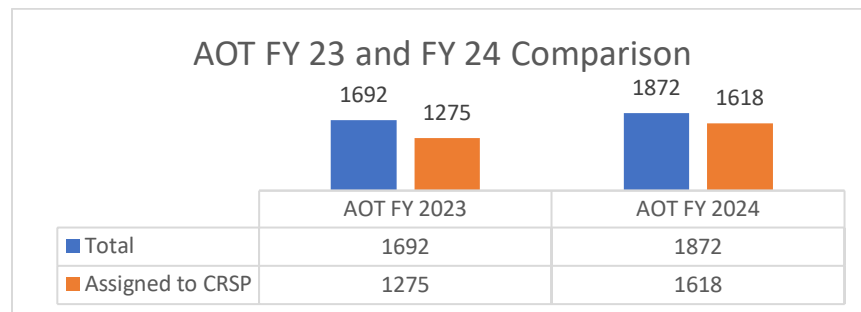
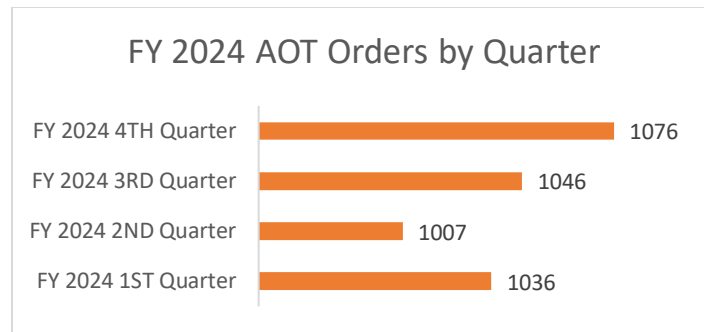
- Awaiting scheduled opening of floors 3,4,5 at Milwaukee before starting deployment at that facility.

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

- Building Construction
  - Woodward/Milwaukee still pending blueprint and diagram from vendor (Bluestone).
  - 707 W. Milwaukee all floors configured and available for staff working on site.
- Security
  - ArcticWolf hardware and software installed ready on the DWIHN side, awaiting handover from provisioning to concierge (operations) side at ArcticWolf to begin SOC/SEIM setup.
  - Two of the five ICO audits completed, expecting the others at any time.
  - Working with Legal, vCISO, Compliance, Administration, and external forensic examiners on a security incident resulting from an employee allowing remote control of PC by threat actor.
  - Currently working on RBAC (Role Based Access Controls) and incident response playbooks.
  - Continuing working with business units on the DWIHN BCP/DR plan, transitioning from information gathering to action planning.
  - Enabled policies in Cisco UMBRELLA and continue to work with Security and Compliance to validate blocks.
  - Vetting and removing Azure SSO applications.
- Onboarding/Offboarding
  - Collaborating with HR to integrate the onboarding/offboarding process into the NeoGov system.
  - Data protection/Backups continue to progress without causing volatile issues with the operating system. Successfully tested new process against NPI with little to no impact to server stability.
- Genesys Phone System
  - Collaborating with TTEC Consulting to review processes within the Contact Center, identifying optimal opportunities in the Genesys system.

### **ADULT INITIATIVES**

Assisted Outpatient Treatment (AOT) is a civil commitment that places individuals diagnosed with a severe mental illness and a history of nonadherence to voluntary treatment under court order to follow a prescribed treatment plan while living in the community. Wayne County Probate Court has created a Behavioral Health Unit (BHU) to provide oversight and assist in ensuring AOT compliance. FY 2024 AOT data is outlined below:



Adult Initiatives expanded the AOT team to include two coordinators, a care manager, and a peer support specialist. With the addition of these staff members, the AOT Team will be able to monitor the orders and collect and analyze data more efficiently. Adult Initiatives has worked with our providers to increase their attendance at deferral conferences and court hearings regarding AOT petitions. Providers have reported positive feedback regarding notifications and explanations of the deferral procedure. The team launched a monthly AOT/NGRI workgroup in April 2024 to provide education, feedback and problem-solving for providers navigating the administration of the orders. In addition to the monthly workgroups, CRSP's have the opportunity for individualized training by request.

Adult Initiatives increased collaboration with Wayne State University's Center for Behavioral Health and Justice on the Foundational Strengthening Initiative grant. DWIHN was one of ten counties awarded this grant to strengthen their AOT processes, procedures, and practices. The role that CBHJ's AOT initiative team will have in this project is to be a facilitator in executing technical assistance and data collection. The State has recently proposed that all persons with mental illness who have been charged with a misdemeanor be put on an AOT.

## CHILDREN'S INITIATIVES

### Children's Network Capacity:

Due to current providers experiencing capacity challenges to accept referrals and complete intake assessments within the 14-day requirement, the expansion of children services provider network was necessary.

During August 2023, a Request for Proposals was issued seeking additional providers to deliver children's services in Wayne County for ages 0 to 21<sup>st</sup> birthday for specific services: Targeted case management, outpatient therapy, home based therapy, wrap around, SED Waiver, Children's Waiver, and psychiatric services. As a result of the RFP, additional providers were added to the network and current providers expanded services to increase the capacity to provide the more intensive community-based services such as home-based therapy and wrap around.

Out of the five (5) providers who applied to the RFP, three (3) providers successfully met minimum qualifications and received updated contracts to deliver services. In addition, DWIHN Community of Care is also a new provider for children services and offers targeted case management, outpatient therapy, home based therapy, and psychiatric services. Lastly, there has been noted improvement with intake appointments occurring within 14 days of the screening date.

Performance Indicator 2a (PI2a):

The percentage of new persons during the Period receiving a completed Biopsychosocial Assessment within 14 calendar days of a non-emergency request for service.

- Goal = 57%

Population	FY24/Q1	FY24/Q2	FY24/Q3	FY24/Q4 <i>Preliminary</i>	FY24 Total
SED	30.21%	51.78% (+)	59.06% (+)	50.72% (-)	49.94%
IDD	21.78%	27.92% (+)	31.44% (+)	56.03% (+)	34.29%
Population	FY23/Q1	FY23/Q2	FY23/Q3	FY23/Q4	FY23 Total
SED	28.81%	31.42% (+)	26.57% (-)	32.49% (+)	29.82%
IDD	28.71%	32.08% (+)	32.60% (+)	46.03% (+)	34.85%

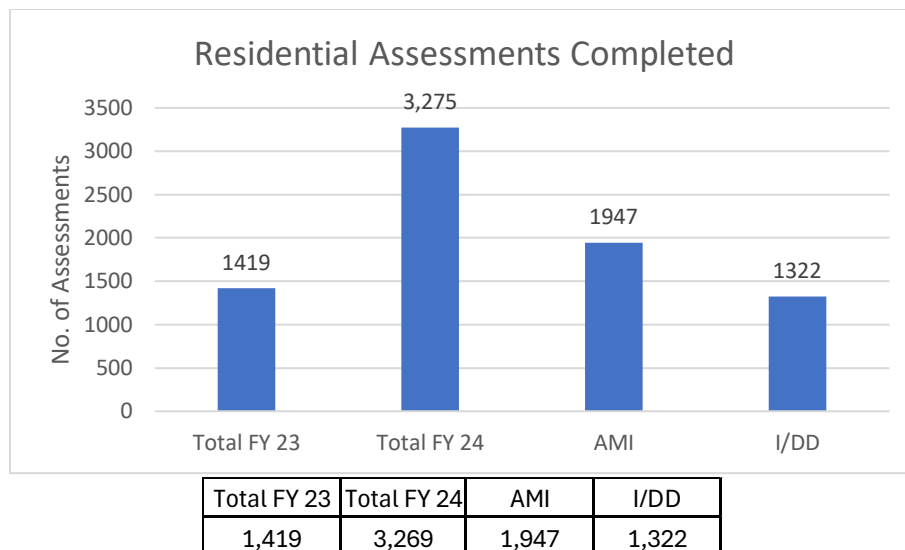
The Goal for PI2a is 57%, which DWIHN has not yet achieved, but we have seen consistent improvement over the course of the year and will continue to augment our network and work with our current providers on strategies to improve timeliness on access to services.

## RESIDENTIAL SERVICES

There are currently 2,878 members (1,374 AMI; 1,504 IDD) receiving residential services through the Detroit Wayne Integrated Health Network (DWIHN). This includes persons living in either specialized residential settings or semi-independent placements.

Residential Assessments:

For Fiscal Year 2024, the Residential Services Department was tasked with ensuring that all new and existing members had up to date residential assessments that were reflective of their current needs and abilities. It is important that all members have updated assessments to ensure that they are receiving the medically necessary services suited to their condition.



The Residential Services Department continues to make progress in ensuring that all members have up to date assessments. The department completed the process of updating all AMI assessments in April and has since progressed to updating I/DD assessments. The department completed a total of 3,269 residential assessments over FY24. 1,947 were completed with the AMI population and 1,322 were completed with the I/DD population. This is compared to 1,419 total assessments completed for FY 23.

To maintain compliance in ensuring that assessments are updated annually, the department adopted a forward-thinking approach. The Authorization Unit Manager provides a report of expiring treatment plans three (3) months in advance. This allows time for Residential Care Specialists to coordinate with provider staff to ensure completion. We are working with the Information Technology Department to refine a report that indicates assessments that are overdue and allows management to track progress.

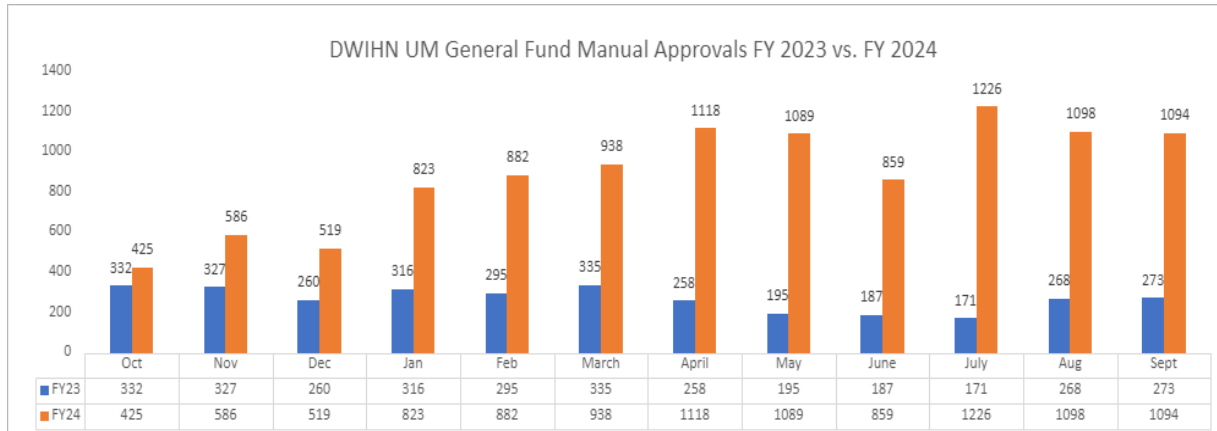
#### FY23-24 Residential Service Highlights:

The Residential Services Department saw outcome improvements (reductions) in both the number of member hospitalizations and the time it takes for members to be discharged from a hospital to a residential setting. Regarding members residing within residential facilities, DWIHN saw the highest number of members hospitalized in Quarter 1 with a continued decline in hospitalizations over the course of the year. Additionally, in June 2004 the Residential Department implemented an internal plan to decrease the number of days it takes to assist a member to discharge from a hospital setting into a residential setting. Initial reports are promising, and the department will continue to assess, monitor, and modify the plan to continue to decrease these timeframes.

#### **UTILIZATION MANAGEMENT**

The General Fund (GF) Exception process is designed to prevent the interruption of needed services while the insurance acquisition/reinstatement effort is underway. There was a significant increase in General Fund Exception manual approvals between FY-23 & FY-24, following termination of the Pandemic Emergency Order. During the Order, changes were made to Medicaid program eligibility, administration, and policies to prevent beneficiaries from losing health

insurance. Now, many members are no longer eligible or failing to take the necessary steps to keep their benefits active (e.g., missed redetermination dates).



To address this increase, the UM Department implemented the following:

- Revised General Fund Benefit Grid.
- Utilization Management met with leaders and subject matter experts from Autism Services and Residential Services to discuss provisional tracking measures and procedural updates to accompany the rollout of the revised benefit grid.
- Utilization Management has scheduled meetings with Autism Services and Residential Services to review and update procedures for managing members utilizing General Fund. This includes the development of a clinical consultation referral procedure for cases presenting with extenuating circumstances, prior to rendering a disposition.
- UM worked with DWIHN's Quality Department to do an internal plan to educate members on the importance of timely benefit application.
- Providers are tasked with taking greater responsibility and accountability for managing these GF cases. This will also require amendment of some internal DWIHN processes and procedures. As noted in previous reports, we fully acknowledge that some members will experience extenuating circumstances. These requests will be reviewed by our team on a case-by-case basis.
- Department leadership is also working with the General Fund UM Specialist in updating verbiage within CRSP communications, as well as how to effectively communicate changes in the benefit grid to the provider network at large.

#### FY23-24 Utilization Management Highlights:

The Habilitation Supports Waiver (HSW) program provides home and community-based services to Medicaid beneficiaries with intellectual or developmental disabilities. HSW's goal is to assist people with developing skills to live independently in community settings (vs. institutions or more restrictive settings).

The HSW program continues to exceed the State program requirement of 95% slot utilization. This improved performance resulted in the State providing DWIHN 41 additional HSW slots for our members. DWIHN's HSW utilization was 97.6% in the month of October; this is after being provided the additional 41 additional HSW slots on 10/1/24.

HSW Utilization Fiscal Year 2023-24												
	Oct	Nov	Dec	Jan	Feb	March	April	May	June	July	Aug	Sept
<b>Total Slots Owned</b>	1084	1084	1084	1084	1084	1084	1084	1084	1084	1084	1084	1084
<b>Used</b>	1062	1080	1084	1084	1083	1083	1083	1084	1078	1082	1082	1082
<b>Available</b>	22	4	0	0	1	1	1	0	0	2	2	2
<b>New Enrollments</b>	12	27	10	4	6	8	4	4	8	3	13	22
<b>Disenrollments</b>	2	4	2	2	5	3	1	9	2	8	2	2
<b>Utilization</b>	98%	99.6%	100%	100%	99.9%	99.9%	99.9%	100%	100%	99.8%	99.8%	99.8%

In addition, The UM Director has initiated a Tri-County Utilization Management Workgroup, where DWIHN, Macomb County CMH, and OCHN can share ideas, align processes, and promote consistency in communication with mutual providers. The UM Department has received valuable information from other counties to assist in providing more departmental efficiency, including the addition of Substance Use Disorder Service Utilization Guidelines.

## COMMUNICATIONS

### Main Activities During Quarter 4: July-September:

- Media Outreach
- Advocacy/Legislative Efforts
- Mobile Outreach
- Access Call Center calls related to Comms outreach
- Community Events and Outreach
- Social Media Outreach

### Media Outreach:

The Communications department is always looking for ways to work with the media and share stories about how people are affected by the services and resources that are available. During November, the Communications department garnered multiple media stories including the below examples (hyperlinks connect to stories and interviews):

### CEO Selection:

DWIDN was a headline news topic since the beginning of the search process in July all the way into November. The following list shows some of the major outlets who provided coverage last month.

- WJBK 2 – 10.16
- WDIV 4 – 10.16
- WXYZ 7 – 10.16
- Detroit Free Press – 10.16
- Detroit News - 10.16
- Bridge Media – 10.16
- Arab American News – 10.18
- Outlier Media – 10.26

**Advocacy/Legislative Efforts:**

Several DWIHN substance use disorder (SUD) providers have been involved in legislation that would affect the sale of tobacco. The House Committee on Families, Children and Seniors are considering House Bills 6002 & 6003 (Rep. Kristian Grant & Rep. Abraham Aiyash), which is legislation to create a statewide tobacco retail licensure program; HB 6004 & HB 6005 (Rep. Stephanie Young), would repeal youth purchase, use, and possession penalties, and House Bill 6022 (Rep. Helena Scott), would restore local control on tobacco sales.

Also, look for action next week in the Michigan Senate on Senate Bills 651 & 652 (Sen. Sam Singh), the Senate companion bill that creates a tobacco retail licensure program; and Senate Bills 653 & 654 (Sen. Mary Cavanaugh and Sen. Paul Wojno), the Senate companion legislation to repeal youth purchase, use, and possession penalties. The Communications department monitors these activities as to work with the media on stories related to SUD and resources available to the community.

**Mobile Outreach:**

The DWIHN Mobile Outreach Clinician, Kevin Giles, was able to add new events to the calendar and continued the partnership with Wayne Metro and Black Family Development.

In September, Mr. Giles attended large city-wide and regional expos while he participated in smaller community-based events, from church health fairs to trunk or treat activities.

Category	September	October
Number of mobile events attended	8	11
Number of meaningful engagements	1,028	780
Number of screenings in the system	0	0
Number of follow-up calls made	34	15
Number of referrals made as a result of follow up	5	4
Benefit assistance referral	0	0
Bill payment referral	0	0
Complex Case Management referral	0	0
Connection to Access Center	6	4
Housing referral	0	0

**Access Call Center Calls Related to Outreach:**

Each quarter the Access Call Center asked callers "How Did you Hear About Us?" During the 4th quarter of FY '23-'24, the total number of calls managed by the Call Center was 46,306. The numbers show a significant increase in awareness due to advertising.

Category	3rd Qtr	4th Qtr
Total Number of Calls	44,567	46,306
Callers who Answered the Question	44,567	44,601
Billboard of Bus Advertisement	26	233
Website/Online/Flyer/Hotline/TV/Radio/internet/ Google/Social Media/MyDWIHNapp	587	607



### **Community Outreach:**

This quarter, DWIHN staff actively engaged in various outreach initiatives, including the "Walk a Mile in My Shoes Rally" in Lansing, the "Celebrate Recovery Walk & Rally," the "Peacenic," and several back-to-school rallies, health fairs, and resource events.

DWIHN organized the "Rescue Ready: Opioid Overdose Training Event" in partnership with WDIV, Mariner's Inn and MASCO at WCCC's Downriver Campus. We also hosted a Men's Conference and supported the 25th Annual Substance Use & Co-occurring Disorder Conference. This quarter marked the launch of our first official "DWIHN Days" event: a Trunk-or-Treat.

Youth United organized a Statewide Youth Summit, the Annual Youth Spotlight Awards, and several powerful Courageous Conversations events, all aimed at empowering youth voices and fostering community dialogue.

### **Upcoming Events:**

- November 23<sup>rd</sup> - Survivors Day of Loss, 8726 Woodward, Detroit, 11am- 2pm
- November 28<sup>th</sup> - Holiday S.O.U.L.S. Chat Thanksgiving- Virtual 1p-2p
- December 7<sup>th</sup> - Noel Night, Midtown Detroit & Cultural Center, 11am- 9pm
- December 14<sup>th</sup> - Santa Day, Heilmann Community Center, 12-4pm
- Jan. 23-25, 2025, Kevin's Song, Suicide Prevention Conference, St. John's Inn, 9-5pm

### **Social Media:**

#### **Influencer Marketing Update:**

<b>Social Media Influencer</b>	<b># of Posts</b>	<b>Engagement/Impressions</b>
The Capital Brand/Randi Rosario	1 Post, 3 Story Posts	Over 70K total views
Kathleen Springer	4 Posts	Over 4.5k total views

#### **Social Media Performance Report Summary**

- Impressions: 107,536 down 4.1%
- Engagements: 9,385 up 43.8%
- Post Click Links: 3,346 up 22%
- Engagement Rate: 8.7% up 50.3%
- Total Audience Growth over the last month was 20,234.

#### **Google Analytics**

- 2,662 Business Profile interactions
- 5,192 People viewed the DWIHN Business Profile
  - 3,139 (60% Google search - desktop)
  - 1,784 (34% Google search - mobile)
  - 213 (4% Google Maps - mobile)
  - 56 (1% Google Maps - desktop)
- 2,666 Searches - DWIHN was shown in users search results:
  - DWIHN – 869
  - mental health services detroit – 160
  - wayne county community mental health – 122
  - dwhin – 102
  - wayne county mental health - 91