



**Detroit Wayne Mental Health Authority
Substance Use Disorders (SUD)
State Targeted Response
State Opioid Response:
A Breakdown of Services**

Overview

- ▶ Innovative Opioid Programs in Wayne County
- ▶ A look at treatment on demand



Naloxone Kit



Our Trainings

- ▶ We train:
 - ▶ Law Enforcement
 - ▶ Civic Groups
 - ▶ Faith Based Organizations
 - ▶ Business Leaders
 - ▶ The community at large
- ▶ Our Trainings are specifically tailored to meet the needs of our audience



State Targeted Response Programs

Strengthening Families Program:

Strengthening Families Program (SFP): for Parents and Youth 10-14 (SFP Iowa Model) to expanding SFP utilizing the Iowa Model in the Detroit Wayne area for those youth and families impacted by opioid dependence.

Goals

- ▶ To train youth ages (10-14) and families at high risk of prescription and opioid misuse and overdose with Strengthen Families Model.
- ▶ To improve social competencies; school performance; handling peer pressure; parent-child bonds and relationships; effective parenting skills; and family relationships.
- ▶ To ensure access to prevention services.



State Targeted Response Programs - Continue

Project Assert

- ▶ To provide a brief screening to persons that present in ERs, FQHC, schools clinics and primary care settings that are in need of treatment or recovery services.
- ▶ To offer screening, brief intervention, referral and treatment (SBIRT) and information to health resources at the point of service in the hospital environment or individuals at risk of developing SUD disorders.
- ▶ To provide comprehensive care and prevention by putting substance abuse in the context of other health and safety needs.
- ▶ To decrease over-utilization of ERs for those that use ERs inappropriately but require SUD services.

State Targeted Response Programs – Continue

Project Assert Model continued.

- ▶ To educate the persons screened about resources in the community to address SUD issues.
- ▶ To affirm the dignity of persons and their cultural backgrounds, beliefs, and values during their hospital visit by establishing a relationship with patients based on emotional support and advocacy.
- ▶ To engage peer recovery coaches in referring potential clients in to substance use and mental health services.
- ▶ To provide persons with the opportunity to explore change through a non-judgmental conversation combined with increased access to various health and treatment services if desired.

State Targeted Response Programs - Continue

Motivational Interviewing (MI) utilized in Medication Assisted Treatment (MAT) Programs. The trainings enhanced MAT clinicians/peer recovery coaches skills in engagement and reduced client's recidivism.

Goals:

- ▶ To train DWMHA MAT Programs clinicians/peers on how to effectively use MI techniques with our Opioid and Heroin user population.
- ▶ To develop the MI tool to promote creativity and innovation strategies for the MAT team.
- ▶ To support continued change and relapse prevention.



State Targeted Response Programs - Continue

- ▶ To identify and select evidence-based strategies that address the prioritized risk/protective factors.
- ▶ To uncover a person's underlying motivations allowing MAT staff to work to and establish desirable and achievable master treatment plan goals to improve clients health.
- ▶ To enhance the MAT provider's ability to motivate and keep clients engaged in treatment.

State Targeted Response Programs - Continue

Enhancement and Implementation of Medication Assisted Treatment (MAT)

Goals

- ▶ To pay for Vivitrol and Suboxone as needed to those clients without health insurance, under insured or have exhausted their medical insurance and continue to meet criteria for the medication.
- ▶ To provide transportation for MAT services, i.e. dosing. By using UBER, Lyft, cab service or the use of their agency van.
- ▶ To pay for medications that will aid in MAT client mental and physical wellbeing.

State Targeted Response Programs – Continue

- ▶ Training peer recovery coaches/clinical staff to work in MAT Programs.
- ▶ DWMHA have trained our MAT providers staff to use Naloxone to reverse opioid overdoses.
- ▶ DWMHA pays for national and statewide trainings on MAT, COD that are evidenced based and will aid our MAT network with Opioid and Heroin issues.
- ▶ DWMHA is increasing its capacity and expanding the availability of MAT services.



State Targeted Response Programs - Continue

Mission Rep Project

- ▶ *Maintaining Independence and Sobriety through Systems Integration, Outreach, and Networking – Michigan Reentry Program (MISSION-CJ MI-REP) project.*
- ▶ The project is to increase access to treatment, reduce unmet treatment needs, provide referral and linkages to services, provide support and care coordination, and reduce recidivism amongst the prison population pre- and post-release to the community. This project provides services to inmates with identified co-occurring Opioid Use and Mental Health disorders.



State Targeted Response Programs - Continue

Mission Rep Project

- Services include: identification and screening of eligible inmates, the provision of in reach services (including peer recovery coach mentoring, establishment of release plan, development of MAT linkage, and release of information for parole, MI-REP staff and behavioral health treatment), linkages provided to community behavioral health providers, six month follow up, and post service follow up. Services are provided to identified eligible inmates three months prior to release, continuing upon release, and ongoing for six months.

Special Project (Growth Works)

- ▶ The creation of a 7-10 day specialized detoxification in collaboration with Growth Works Incorporated and St. Mary's Hospital.
- ▶ 1. Users identified by public safety/Emergency room/by personal request
- ▶ 2. St. Mary has committed 10-12 beds for this project (current- old Emergency Room)
- ▶ 3. Growth Works partners with St. Mary ENHANCING the current detoxification process by embedding a Specialized Trauma Therapy Protocol to work with users - focused on specialized protocol to reduce anxiety (mostly non-talk trauma therapy)
- ▶ 4. Purpose – outcome - stabilize brain/body state during the first 48-72 hours (most critical to retention)
- ▶ 5. Program Duration - 7 to 10 days - eligibility for Medically Assisted Treatment (when applicable - preferably Vivitrol)
- ▶ 6. All participants will be offered a Peer recovery coach who will “case manage” them from the point of first contact, through detoxification and then into a menu of community services already established post-detoxification to collect follow up data and enhance success post detoxification (up to 1 year)
- ▶ 7. Growth Works/St. Mary will collect outcome data for up to 1 year post-detoxification to establish measureable outcomes/adjust programming



Other Heroin/Opioid Efforts - Continue

Multimedia Campaign

- ▶ The prevention and treatment messages highlight our access number 1-800-241-4949 for SUD and Mental Health services that are available 24 hours a day, 7 days a week, and 365 days of the year. These prevention messages are advertised across the Detroit Wayne County area in high traffic and high risk areas, such as freeways, major streets and buses (interior & exterior).



Other Heroin/Opioid Efforts

Multimedia Campaigns

- ▶ DWMHA launched a multimedia campaign using billboards, buses signage, television and radio to bring awareness to the resources available to residents in the Detroit Wayne County area. These efforts have increased SUD outreach to a larger audience using SCRIPPS, TV stations, Bounce, Channel 20 and ABC.
- ▶ Conquering Addiction series via SCRIPPS brought awareness to the most current substance abuse issues, educate people on how to identify challenges within themselves and the people that surround them and direct people to DWMHA for help and resources that are available to them.
- ▶ <https://vimeo.com/wxyz/review/270085350/28a9cc104c>



State Opioid Response (SOR)

- ▶ Youth/Family Oriented Prevention Evidence Based Practices (EBPs)
- ▶ Overdose Education and Naloxone Distribution (OEND) with Harm Reduction
- ▶ Peers in Federally Qualified Health centers (FQHCs), Urgent Care, and other out-patient settings for (Screening Brief Intervention, Referral to Treatment (SBIRT)
- ▶ Opioid Use Disorder (OUD) Treatment Costs
- ▶ Jail-Based (Medication Assisted Treatment (MAT) Expansion
- ▶ Recovery Housing
- ▶ OUD Recovery Services Costs
- ▶ Mobile Care Units



Youth/Family Oriented Prevention Evidence Base Practices (EBPs)

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- ▶ Several prevention providers are providing evidence-based practices (EBPs) selected from MDHHS to expand efforts to middle and high school age youth services that complements the Strengthening Families Program Iowa 10-14.
- ▶ 4 providers are implementing EBPs in over 13 different schools in Wayne county

Overdose Education and Naloxone Distribution (OEND) with Harm Reduction

- ▶ Prevention providers have purchased Naloxone and provide training. They are also implementing harm reduction activities including but not limited to infectious disease education, immunizations, and Naloxone distribution.

OVERDOSE
DEATH IS
PREVENTABLE.

31 AUGUST

—
INTERNATIONAL OVERDOSE
AWARENESS DAY

Peers in FQHCs, Urgent Care, and other Out-Patient Settings for Screening Brief intervention Referral to treatment (SBIRT)

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- ▶ Similar to the Project Assert Initiative under the STR grant, this project will implement Peer Recovery Coaching services in outpatient settings such as FQHC's or Urgent Care facilities.
- ▶ Peer Recovery Coaches will be provided referrals within these outpatient settings for clients presenting with an OUD. An SBIRT model will be applied upon assessment with a resulting referral to treatment and recovery services. Follow up on referred clients will be required by the coaches within 30 days to assess for the need of additional services and peer support.



Mobile Care Units

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- ▶ Mobile care units are retrofitted recreational vehicles/vans/buses that will bring counseling, therapeutic, and physical health services to OUD patients. The units have an area for intake and scheduling, a restroom to incorporate urine screening, and at least one private room for counseling.
- ▶ Harm reduction activities including overdose education and Naloxone distribution are expected to be provided within the mobile care units. The units may also have a telehealth component.



Mobile Care Units



Jail-Based MAT Expansion

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- ▶ Implementing jail-based Medication Assisted Treatment (MAT) programs in Wayne County jails. Collaboration with jail-based partners established for the expansion of MAT services to individuals presenting with an OUD currently incarcerated. Linkages with peer support upon re-entry into the community.

Recovery Housing

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- ▶ Recovery housing for Opioid Use Disorders (OUD) clients. The providers selected will cover the housing costs of individuals with OUD. Funding may also be used to provide minor updates and repairs to existing recovery housing to house individuals with OUD and/or assist recovery housing facilities in bringing outpatient services to the location as needed. All recovery houses must be in compliance with the National Alliance for Recovery Residencies (NARR) guidelines.

OUD Recovery Services Costs

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- ▶ OUD recovery services (ex. Peer Recovery Coach Services, Alumni Groups, peer supports) are to cover the costs of uninsured/under-insured patients and the provision of recovery services.

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Questions

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