

Meeting Agenda

SUD OVERSIGHT POLICY BOARD

Wednesday, March 1, 2023

4:00 PM

Board Room - Community Mental Health of Ottawa County
12265 James Street, Holland, MI 49424

1. Call to Order: Chair
2. Roll Call/Introductions: Chair
3. Public Comment: Chair
4. Conflict of Interest: Chair
5. Review/Approval of Agenda-Chair (Attachment 1)
Suggested Motion: To approve the March 1, 2023 LRE Oversight Policy Board meeting agenda as presented.
6. Review/Approval of Minutes-Chair (Attachment 2)
Suggested Motion: To approve the September 7, 2022 LRE Oversight Policy Board meeting minutes as presented.
7. Old Business
8. New Business
Election Officers – Patrick Sweeney
Nomination and Selection of Officers
Suggested Motion: To approve the recommendations for OPB Chair, Vice Chair and Secretary as nominated by the members.
9. Finance Report (Maxine Coleman)
 - a. Statement of Activities (Attachment 3)
 - b. FY23 Budget Amendment #1 (Attachment 4)
Suggested Motion: To approve FY23 Budget Amendment #1 as presented
10. State/Regional Updates (Stephanie VanDerKooi/Mark DeYoung)
 - a. HealthWest Leadership Changes
 - b. Updated Board Roster (Attachment 5)
 - c. Strategic Planning Update (Attachment 6)
 - d. Opiate Settlement (Attachment 7)
 - e. Legislative Update (Attachment 8)
11. Prevention Updates – Amy Embury
 - a. FY22 Summary of Prevention Providers Report (Attachment 9)
 - b. FY22 Gambling Disorder Report (Attachment 10)
 - c. FY22 TalkSooner Report (Attachment 11)

12. SUD Treatment Updates – Amanda Tarantowski

- a. FY22 SUD Treatment Evaluation Report (*Attachment 12*)
- b. FY22 SUD Treatment Community Impact Report (*Attachment 13*)

13. Next Meeting

June 7, 2023 – 4:00 PM

CMHOC Board Room

Meeting Minutes (proposed)
SUD OVERSIGHT POLICY BOARD
 Wednesday, September 28, 2022 4:00 PM
 Board Room - Community Mental Health of Ottawa County
 12265 James Street, Holland, MI 49424

CALL TO ORDER

Mr. Patrick Sweeney, LRE Oversight Policy Board Chair, Called the September 22, 2022 meeting to order at 4:05

ROLL CALL/INTRODUCTION– Chair

Present at Roll Call:

MEMBER	P	A		MEMBER	P	A
Martha Burkett	x			Dawn Martin		x
Shelly Cole-Mickens		x		David Parnin	x	
Mark DeYoung	x			Stan Ponstein	x	
Henry Fuhs		x		Andrew Sebolt		x
Marcia Hovey-Wright	x			Sarah Sobel	x	
Rebecca Lange	x			James Storey	x	
Richard Kanten	x			Patrick Sweeney	x	
				Doug Zylstra	X	

PUBLIC COMMENT

No public comment offered.

CONFLICT OF INTEREST

No conflict of interest declared.

REVIEW/APPROVAL OF AGENDA

OPB 22-05 Motion: To approve the September 28, 2022, LRE Oversight Policy Board meeting agenda as presented.

Moved by: Storey

Support: Kanten

MOTION CARRIED

REVIEW/APPROVAL OF MINUTES

OPB 22-06 Motion: To approve the March 2, 2022, LRE Oversight Policy Board meeting minutes as presented.

Moved by: Ponstein

Support: DeYoung

MOTION CARRIED

OLD BUSINESS

No old business

NEW BUSINESS

FY23 Budget Proposal –Maxine Coleman

Ms. Coleman reviewed the proposed FY23 Operating Budget. State Opioid Response (SOR1 & SOR 2) grants end on September 30, 2022. ARPA funds have been included. Gambling disorder funds are

increased. Medicaid and Healthy Michigan projections are higher. PA2 allocations for all counties except Kent is lower than in the past. Adjustments have been made in PA2 funded programs. There are unallocated funds under the COVID grant; allocations will be presented in the first budget amendment.

OPB 22-07 Motion: The Oversight Policy Board:

- (a) Approves the allocation of PA2 funds for the FY23 LRE SUD Budget as summarized in Attachment 3.
- (b) Advises and recommends that the LRE Board approve the non-PA2 fund budgets for SUD services.

Moved by: Ponstein

Support: Storey

MOTION CARRIED

FY22 Budget Amendment #2

The final amendment for FY22 presented for review. The amendment includes additional SOR funding, COVID 19 funds, PA2 funds, and Drug Free Coalition funds. Increase to prevention of approximately \$250 thousand and treatment of \$750 thousand.

OPB 22-08 Motion: To approve FY22 Budget Amendment #2 as presented.

Moved by: Kanten

Support: Parnin

MOTION CARRIED

Finance Report - Maxine Coleman

Statement of Activities –

Current budget compared to actual spending and any variances are reflected in this status report. Report helps to determine what amendments may be needed. Approval of Amendment 2 addresses these variances.

PA2 expenditures are down this year; any excess will be carried forward. It is the LRE's practice to maximize grant dollars prior to using PA2 funds. Where possible, excess funds (COVID, ARPA) will be carried forward. COVID funds have been extended through September 2024.

STATE/REGIONAL UPDATES (Stephanie VanDerKooi/Amanda Tarantowski/Amy Embury)

Bylaws/Operating Agreement Updates

Lakeshore Regional Entity updated bylaws and operating agreement have been adopted by the Board of Directors. Board makeup has been revised for equal representation from each CMHSP. Funding methodology has been updated as well.

LRE Staffing Updates - Organizational Chart

Two financial analysts, a customer services specialist, and a utilization management coordinator have joined the LRE team. Quality team has added four staff to complete provider site reviews.

LRE Strategic Planning

Strategic Planning has begun. A Survey has been distributed to OPB members and other stakeholders. KWB strategies will develop a report of general themes based on the survey responses to begin the conversation on the focus of the strategic plan. It is anticipated that the plan will be complete in Spring of 2023. Ms. VanDerKooi requested that OPB members respond to the survey by Friday, October 7, 2022.

Grant Updates

- i. ARPA Funds – expanded telehealth and behavioral health treatment for minorities

- ii. COVID-19 –includes expansion of Recovery Coach services, MAT, and WSS programs.
- iii. SOR II – Treatment: Peer outreach, mobile care, jail based recovery and recovery housing. Prevention enhancement
- iv. Gambling Disorders – Four prevention providers are participating
- v. Smoking Cessation –two-year grant with participation of all member CMHSPs. Additional funding has been requested for FY23 and FY24

Prevention Updates – Amy Embury

- i. Synar compliance checks are conducted during the month of June. Youth decoys enter retail site and attempt to purchase tobacco. Data is collected on whether the clerk allows for the purchase. Each county has a designated number of checks that are required. Results impact block grant funding. The standard is 80 percent compliance; regional result was 92 percent compliance.
- ii. TalkSooner – a wrapped car is present at various community events across the region to educate parents and parent groups.

SUD Conference – Grand Rapids – September 18-20, 2022

Next year's conference will be in Lansing – September 24 – 26.

SUD Treatment Updates

- i. 2Q22 SUD Treatment Evaluation Data – presented for information. 3rd quarter report will be shared when available.
- ii. Treatment Manual – no discussion

BOARD MEMBER COMMENTS

Stan Ponstein requested that Talk Sooner information be shared with the community to promote the message.

NEXT MEETING

December 7, 2022 – 4:00 PM

CMHOC Board Room

ADJOURN

Mr. Sweeney adjourned the September 28, 2022 Lakeshore Regional Entity Oversight Policy Board meeting at 4:51 PM

Board Chair

**Lakeshore Regional Entity
Substance Use Disorders
FY23 Block Grant Expenditures**

	Year Ending 9/30/2023	Year To Date 1/31/2023	Budget to Actual Variance	
	FY23 Budget Initial Budget	FY23 Budget to Date	Actual	
Block Grant				
Operating Revenues				
SUD Block Grant (includes SDA)	6,422,632	2,140,877	2,307,385	(166,508)
SUD Block Grant SOR	3,451,558	1,150,519	762,848	387,671
SUD Block Grant Gambling	240,000	80,000	39,456	40,544
SUD Block Grant COVID	1,573,368	524,456	514,235	10,221
Drug Free Communities (DFC) Grant	125,000	41,667	46,017	(4,350)
SUD Block Grant Amer Rescue Plan Act (ARPA)	644,060	214,687	131,533	83,154
Total Operating Revenues	12,456,618	4,152,206	3,801,474	350,732
Expenditures - Treatment				
LRE Direct & Regional Administration - Treatment	75,000	25,000	13,592	11,408
LRE Administration - SOR	250,768	83,589	9,031	74,558
LRE Administration - COVID	10,000	3,333	4,911	(1,578)
Treatment Payments to Members				
OnPoint (Allegan Co CMH) - Treatment	454,395	151,465	0	151,465
OnPoint (Allegan Co CMH) - SOR	278,375	92,792	18,880	73,912
OnPoint (Allegan Co CMH) - COVID	218,597	72,866	3,431	69,435
Healthwest - Treatment	903,290	301,097	140,521	160,576
Healthwest ARPA	100,000	33,333	0	33,333
Healthwest SOR	964,454	321,485	0	321,485
Healthwest - COVID	293,580	97,860	65,941	31,919
Network180 - Treatment	2,524,216	841,405	603,522	237,884
Network 180 - SOR	1,246,476	415,492	50,247	365,245
Network 180 - ARPA	175,000	58,333	13,738	44,596
Network180 - COVID	240,367	80,122	0	80,122
CMH of Ottawa County - Treatment	858,610	286,203	159,216	126,988
CMH of Ottawa County - SOR	257,295	85,765	2,456	83,309
CMH of Ottawa County - ARPA	200,000	66,667	0	66,667
CMH of Ottawa County - COVID	341,870	113,957	0	113,957
West Michigan CMH - Treatment	358,839	119,613	92,783	26,830
West Michigan CMH - SOR	198,900	66,300	16,630	49,671
West Michigan CMH - COVID	67,800	22,600	0	22,600
Expenditures - Prevention				
LRE Direct & Regional Administration - Prevention	229,399	76,466	89,358	(12,891)
LRE Direct & Regional Administration - COVID	104,372	34,791	1,399	33,392
LRE Direct & Regional Administration - ARPA	22,500	7,500	5,000	2,500
LRE Direct & Regional Administration - Prevention SOR	41,090	13,697	3,722	9,975
LRE Direct Administration - Gambling	118,600	39,533	18,952	20,581
LRE Direct Administration - DFC	25,000	8,333	898	7,435

Expenditures - Prevention - continued

OnPoint (Allegan Co CMH) - Prevention	214,011	71,337	101,650	(30,313)
OnPoint (Allegan Co CMH) - Prevention SOR	39,000	13,000	15,175	(2,175)
OnPoint (Allegan Co CMH) - Prevention ARPA	16,666	5,555	9,068	(3,512)
OnPoint (Allegan Co CMH) - Prevention COVID	36,369	12,123	8,492	3,631
Arbor Circle / Pathways - Prevention	175,273	58,424	143,721	(85,297)
Arbor Circle / Pathways - Prevention SOR	25,000	8,333	4,290	4,043
Arbor Circle / Pathways - Prevention Gambling	27,400	9,133	8,205	929
Arbor Circle / Pathways - ARPA	31,908	10,636	14,460	(3,824)
Arbor Circle - COVID	87,418	29,139	39,723	(10,584)
District 10 Health Department - Prevention	57,259	19,086	15,300	3,787
District 10 Health Department - SOR	37,200	12,400	9,192	3,208
District 10 Health Department - ARPA	14,766	4,922	0	4,922
District 10 Health Department - DFC	100,000	33,333	45,134	(11,801)
District 10 Health Department - Gambling	32,000	10,667	2,533	8,133
Family Outreach Center - Prevention	27,467	9,156	15,715	(6,559)
Family Outreach Center - Prevention Gambling	31,000	10,333	9,532	801
Family Outreach Center - ARPA	13,930	4,643	0	4,643
Family Outreach Center - COVID	53,143	17,714	9,699	8,016
Kent County Health Department - Prevention	54,839	18,280	54,839	(36,559)
Kent County Health Department - Prevention SOR	65,000	21,667	12,866	8,801
Kent County Health Department - ARPA	16,667	5,556	9,505	(3,949)
Mercy Health - Prevention	35,839	11,946	17,082	(5,136)
Mercy Health - COVID	24,096	8,032	4,818	3,214
Mercy Health - ARPA	9,168	3,056	300	2,756
Network 180 - Prevention	79,687	26,562	61,970	(35,408)
Network 180 - COVID	32,434	10,811	5,172	5,640
Ottawa County Health Department - Prevention	16,517	5,506	29,152	(23,647)
Ottawa County Health Department - Prevention SOR	28,000	9,333	6,069	3,265
Ottawa County Health Department - ARPA	8,810	2,937	0	2,937
Community Mental Health of Ottawa County - COVID	22,912	7,637	963	6,674
Community Mental Health of Ottawa County - ARPA	8,810	2,937	0	2,937
Public Health Muskegon County - Prevention	294,025	98,008	139,495	(41,487)
Public Health Muskegon County - Prevention Gambling	31,000	10,333	12,313	(1,979)
Public Health Muskegon County - Prevention SOR	20,000	6,667	1,355	5,312
Public Health Muskegon County - ARPA	9,168	3,056	0	3,056
Wedgwood Christian Services - Prevention	63,966	21,322	37,480	(16,158)
Wedgwood Christian Services - COVID	40,410	13,470	18,484	(5,014)
Wedgwood Christian Services - ARPA	16,667	5,556	2,207	3,349

Total Expenditures	12,456,618	4,152,206	2,180,183	1,972,023
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Total Change in Net Assets	0	0	1,621,291	(1,621,291)
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As of 2/24/23

Lakeshore Regional Entity Substance Use Disorders FY23 PA2 Expenditures

	Year Ending 9/30/2023	Year To Date 1/31/2023		
	FY23 Budget Initial	FY23 Budget to Date	Actual	Budget to Actual Variance
PA2				
Operating Revenues				
PA2 Liquor Tax - Current FY	3,249,131	1,083,044	502,433	580,611
PA2 Liquor Tax - Reserves	0	0	0	0
Total Operating Revenues	3,249,131	1,083,044	502,433	580,611
Expenditures - Prevention				
OnPoint (Allegan Co CMH) - Prevention	90,039	30,013	0	30,013
Arbor Circle / Pathways - Prevention	283,227	94,409	0	94,409
District 10 Health Department - Prevention	48,681	16,227	1,339	14,888
Family Outreach Center - Prevention	35,533	11,844	0	11,844
Kent County Health Department - Prevention	267,161	89,054	4,815	84,239
Mercy Health - Prevention	23,818	7,939	11,388	(3,449)
Network 180 - Prevention	270,313	90,104	0	90,104
Community Mental Health of Ottawa County	61,000	20,333	17,283	3,051
Ottawa County Health Department - Prevention	75,408	25,136	0	25,136
Public Health Muskegon County - Prevention	40,975	13,658	0	13,658
Wedgwood Christian Services - Prevention	61,034	20,345	0	20,345
Expenditures - Treatment				
Treatment Payments to Members				
OnPoint (Allegan Co CMH)	101,887	33,962	0	33,962
Healthwest	355,144	118,381	0	118,381
Network180	1,228,280	409,427	0	409,427
CMH of Ottawa County	210,615	70,205	0	70,205
West Michigan CMH	96,016	32,005	0	32,005
Total Expenditures	3,249,131	1,083,044	34,824	1,048,220
Total Change in Net Assets	0	0	467,609	(467,609)

As of 2-24-23

**Lakeshore Regional Entity
Substance Use Disorders
FY23 Medicaid Treatment Expenditures**

Year To Date Through 1/31/23

CATEGORY	CMHSP Medicaid YTD Totals	LRE Admin Med YTD Totals	LRE Medicaid Budget Totals	LRE % of Budget Spent
Total Expenditures for Treatment Services	\$ 626,275.05	\$ -	\$ 7,645,064	8.19%
Women's Specialty Services	\$ 28,211.56	\$ -	\$ 837,600	3.37%
Other Specialty Services	\$ -	\$ -	\$ -	0.00%
Access Management System	\$ 38,291.30	\$ -	\$ 140,202	27.31%
General Administration	\$ 24,853.50	\$ 62,693.00	\$ 487,276	17.97%
GRAND TOTAL OF SA EXPENDITURES	\$ 717,631.41	\$ 62,693.00	\$ 9,110,142	8.57%
SOURCE OF FUNDS				
Medicaid	\$ 717,631.41	\$ 62,693.00	\$ 9,110,142	8.57%
Other: Local	\$ -	\$ -	\$ -	0.00%
Other: Federal	\$ -	\$ -	\$ -	0.00%
Fees	\$ -	\$ -	\$ -	0.00%
TOTAL FUNDING	\$ 717,631.41	\$ 62,693.00	\$ 9,110,142	8.57%

As of 2-24-23

**Lakeshore Regional Entity
Substance Use Disorders
FY23 Healthy MI Plan Treatment Expenditures**

Year To Date Through 1/31/23

CATEGORY	CMHSP HMP YTD Totals	LRE Admin HMP YTD Totals	LRE HMP Budget Totals	LRE % of Budget Spent
Total Expenditures for Treatment Services	\$ 1,048,450.84	\$ -	\$ 19,077,031	5.50%
Women's Specialty Services	\$ 23,867.79	\$ -	\$ 567,561	4.21%
Other Specialty Services		\$ -	\$ -	0.00%
Access Management System	\$ 65,238.55	\$ -	\$ 210,777	30.95%
General Administration	\$ 35,411.10	\$ 138,470.72	\$ 933,710	18.62%
GRAND TOTAL OF SA EXPENDITURES	\$ 1,172,968.28	\$ 138,470.72	\$ 20,789,079	6.31%
SOURCE OF FUNDS				
Healthy MI Plan	\$ 1,172,968.28	\$ 138,470.72	\$ 20,789,079	6.31%
Other: Local	\$ -	\$ -	\$ -	0.00%
Other: Federal	\$ -	\$ -	\$ -	0.00%
Fees	\$ -	\$ -	\$ -	0.00%
TOTAL FUNDING	\$ 1,172,968.28	\$ 138,470.72	\$ 20,789,079	6.31%

As of 2-24-23

Lakeshore Regional Entity Oversight Policy Board

ACTION REQUEST**SUBJECT: FY2023 LRE SUD Budget Amendment 1**

- Approval of PA2 Funds
- Advice and Recommendation to LRE Board for Budgets Containing non-PA2 Funds

MEETING DATE: March 22, 2023**PREPARED BY:** Stacia Chick, LRE Chief Financial Officer**RECOMMENDED MOTION:****The Oversight Policy Board:**

- (a) Approves the allocation of PA2 funds for the LRE SUD Budget as summarized below.
- (b) Advises and recommends that the LRE Board approve the non-PA2 fund budgets for SUD services as summarized below.

PROPOSED TO GO TO THE BOARD ON MARCH 22, 2023**SUMMARY OF REQUEST/INFORMATION:**

- Public Act 500 of 2012 requires each PIHP region to establish an Oversight Policy Board with certain roles and responsibilities relative to substance abuse services.
- The Lakeshore Regional Entity Oversight Policy Board is the Oversight Policy Board for Region 3 PIHP.
- Among other functions, the Oversight Policy Board is responsible to approve budgets which contain local funds and to advise and recommend budgets containing non-local funds to the LRE board for services within the region.

STAFF: Stacia Chick, LRE Chief Financial Officer**DATE:** March 22, 2023**FY2023 LRE SUD Budget Amendment 1 Summary:**

<u>PREVENTION (direct by LRE)</u>	<u>PA2</u>	<u>Block Grant</u>	<u>SOR</u>	<u>ARPA</u>	<u>COVID-19</u>	<u>Gambling</u>	<u>DFC</u>	<u>Medicaid</u>	<u>Healthy Michigan</u>	<u>Total</u>
<i>Allegan County</i>	\$ 90,039	\$ 214,011	\$ 39,000	\$ 16,666	\$ 86,802	\$ -	\$ -	\$ -		\$ 446,518
<i>Kent County</i>	\$ 699,091	\$ 271,909	\$ 65,000	\$ 47,264	\$ 391,176	\$ 31,000	\$ -	\$ -	\$ -	\$ 1,505,440
<i>Lake County</i>	\$ 3,533	\$ 12,175	\$ -	\$ -	\$ 14,690	\$ 10,666	\$ -	\$ -	\$ -	\$ 41,064
<i>Oceana County</i>	\$ 10,148	\$ 19,621	\$ -	\$ -	\$ 14,539	\$ 10,666	\$ -	\$ -	\$ -	\$ 54,974
<i>Mason County</i>	\$ 35,000	\$ 25,463	\$ 37,200	\$ 14,766	\$ 28,601	\$ 10,668	\$ 100,000	\$ -	\$ -	\$ 251,698
<i>Muskegon County</i>	\$ 64,793	\$ 342,364	\$ 20,000	\$ 18,336	\$ 138,851	\$ 31,000	\$ -	\$ -	\$ -	\$ 615,344
<i>Ottawa County</i>	\$ 354,585	\$ 133,340	\$ 53,000	\$ 49,528	\$ 160,495	\$ 27,400	\$ -	\$ -	\$ -	\$ 778,348
<i>LRE Regional Projects</i>	\$ -	\$ 82,500	\$ -	\$ 22,500	\$ 135,961	\$ 35,000	\$ -	\$ -	\$ -	\$ 275,961
<i>LRE Staffing</i>	\$ -	\$ 146,899	\$ 41,090	\$ -	\$ 24,039	\$ 15,401	\$ 25,000	\$ -	\$ -	\$ 252,429
<i>Unallocated</i>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
PREVENTION TOTAL	\$ 1,257,189	\$ 1,248,282	\$ 255,290	\$ 169,060	\$ 995,154	\$ 171,801	\$ 125,000	\$ -	\$ -	\$ 4,221,776

<u>TREATMENT (delegated to CMH memb</u>	<u>PA2</u>	<u>Block Grant</u>	<u>SOR</u>	<u>ARPA</u>	<u>COVID-19</u>	<u>Gambling</u>	<u>DFC</u>	<u>Medicaid</u>	<u>Healthy Michigan</u>	<u>Total</u>
<i>Allegan</i>	\$ 101,887	\$ 454,395	\$ 278,375	\$ 75,000	\$ 70,629	\$ -	\$ -	\$ 815,936	\$ 1,454,502	\$ 3,250,724
<i>Healthwest</i>	\$ 355,144	\$ 903,290	\$ 964,454	\$ 25,000	\$ 256,015	\$ -	\$ -	\$ 2,134,404	\$ 3,960,848	\$ 8,599,155
<i>Network 180</i>	\$ 1,228,280	\$ 2,524,216	\$ 1,246,476	\$ 175,000	\$ 529,537	\$ -	\$ -	\$ 5,029,816	\$ 9,759,721	\$ 20,493,046
<i>Ottawa</i>	\$ 210,615	\$ 858,610	\$ 257,295	\$ 200,000	\$ 548,233	\$ -	\$ -	\$ 1,273,175	\$ 2,650,446	\$ 5,998,374
<i>West Michigan (Lake, Mason, Oceana)</i>	\$ 96,016	\$ 358,839	\$ 198,900	\$ -	\$ 52,800	\$ -	\$ -	\$ 758,903	\$ 1,389,391	\$ 2,854,849
<i>LRE Staffing</i>	\$ -	\$ 225,000	\$ 250,768	\$ -	\$ 10,000	\$ -	\$ -	\$ 360,388	\$ 691,589	\$ 1,537,745
TREATMENT TOTAL	\$ 1,991,942	\$ 5,324,350	\$ 3,196,268	\$ 475,000	\$ 1,467,214	\$ -	\$ -	\$ 10,372,622	\$ 19,906,496	\$ 42,733,893

TOTAL PREVENTION & TREATMENT	\$ 3,249,131	\$ 6,572,632	\$ 3,451,558	\$ 644,060	\$ 2,462,368	\$ 171,801	\$ 125,000	\$ 10,372,622	\$ 19,906,496	\$ 46,955,669
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Lakeshore Regional Entity FY 2023 SUD Budget

Prevention	Initial FY23 Allocation	Proposed FY23 Am 1	Block Grants	SOR	Amer Rescue Plan Act	COVID-19	PA2	Gambling	DFC
Allegan County									
OnPoint (Allegan Co CMH)	396,085	446,518	214,011	39,000	16,666	86,802	90,039	-	-
Total	396,085	446,518	214,011	39,000	16,666	86,802	90,039	-	-
Kent County									
Arbor Circle	151,410	202,042	45,950	-	-	91,042	65,050	-	-
Family Outreach	161,073	184,214	27,467	-	13,930	76,284	35,533	31,000	-
Kent County Health Department	403,667	486,098	54,839	65,000	16,667	82,431	267,161	-	-
Network 180	382,434	433,431	79,687	-	-	83,431	270,313	-	-
Wedgwood	182,077	199,655	63,966	-	16,667	57,988	61,034	-	-
Total	1,280,661	1,505,440	271,909	65,000	47,264	391,176	699,091	31,000	-
Lake County									
District Health Department #10	26,374	41,064	12,175	-	-	14,690	3,533	10,666	-
Total	26,374	41,064	12,175	-	-	14,690	3,533	10,666	-
Oceana County									
District Health Department #10	40,435	54,974	19,621	-	-	14,539	10,148	10,666	-
Total	40,435	54,974	19,621	-	-	14,539	10,148	10,666	-
Mason County									
District Health Department #10	223,097	251,698	25,463	37,200	14,766	28,601	35,000	10,668	100,000
Total	223,097	251,698	25,463	37,200	14,766	28,601	35,000	10,668	100,000
Muskegon County									
Arbor Circle (Muskegon Co)	36,596	70,387	12,500	-	-	57,887	-	-	-
Public Health Muskegon County	395,168	437,839	294,025	20,000	9,168	42,671	40,975	31,000	-
Mercy Health	92,921	107,118	35,839	-	9,168	38,293	23,818	-	-
Total	524,685	615,344	342,364	20,000	18,336	138,851	64,793	31,000	-
Ottawa County									
Arbor Circle (Ottawa Co)	442,220	482,661	116,823	25,000	31,908	63,353	218,177	27,400	-
CMH of Ottawa County	92,722	121,079	-	-	8,810	51,269	61,000	-	-
Ottawa County Department of Public Health	128,735	174,608	16,517	28,000	8,810	45,873	75,408	-	-
Total	663,677	778,348	133,340	53,000	49,528	160,495	354,585	27,400	-
LRE Regional Projects (TalkSooner, Trainings, Conference, Tech. Assistance, Family Meals Month)	188,000	275,961	82,500	-	22,500	135,961	-	35,000	-
LRE Staffing	248,589	252,429	146,899	41,090	-	24,039	-	15,401	25,000
Unallocated	104,372	-	-	-	-	-	-	-	-
Total	540,961	528,390	229,399	41,090	22,500	160,000	-	50,401	25,000
Overall Prevention Total	3,695,975	4,221,776	1,248,282	255,290	169,060	995,154	1,257,189	171,801	125,000

Treatment	Initial FY23 Allocation	Proposed FY23 Am 1	Block Grants (incl. SDA)	SOR	Amer Rescue Plan Act	COVID-19	PA2	Medicaid	Healthy Michigan
OnPoint (Allegan Co CMH)	3,325,804	3,250,724	454,395	278,375	75,000	70,629	101,887	815,936	1,454,502
Healthwest	8,736,711	8,599,155	903,290	964,454	25,000	256,015	355,144	2,134,404	3,960,848
Network 180	20,258,958	20,493,046	2,524,216	1,246,476	175,000	529,537	1,228,280	5,029,816	9,759,721
CMH of Ottawa County	5,801,737	5,998,374	858,610	257,295	200,000	548,233	210,615	1,273,175	2,650,446
West Michigan CMH (Lake, Mason Oceana)	2,846,525	2,854,849	358,839	198,900	-	52,800	96,016	758,903	1,389,391
LRE Staffing & Regional Projects	939,259	1,537,745	225,000	250,768	-	10,000	-	360,388	691,589
Overall Treatment Total	41,908,995	42,733,893	5,324,350	3,196,268	475,000	1,467,214	1,991,942	10,372,622	19,906,496

SUD Total Prevention + Treatment:	45,604,969	46,955,669	6,572,632	3,451,558	644,060	2,462,368	3,249,131	10,544,423	20,031,496
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**Substance Use Disorder
Oversight Policy Board Roster**
1/1/2023

Seat	County	Member	Contact Information	Term Notes
1	ALLEGAN	Mark DeYoung Commissioner	4169 Hickory Street Dorr, Michigan 49323 (616) 681-9413 – home/business (616) 318-9612 – cell mdeyoung@allegancounty.org	Appoint: 5/2016 Expire: 12/31/2017 Re-appt: 1/1/2018 Expire: 12/31/2020 Re-appt: 1/1/2021 Expire: 12/31/2023
2	ALLEGAN	James Storey Commissioner	344 W 35th Street Holland, MI 49423 (616) 848-9767 jstorey@allegancounty.org	Appoint: 10/1/2014 Expire: 12/31/2017 Re-appt: 1/1/2018 Expire: 12/31/2020 Re-appt: 1/1/2021 Expire: 12/31/2023
3	KENT	Martha Burkett	1180 Griswold SE Grand Rapids, MI 49507 (616) 401-1370 Momsky12000@yahoo.com	Appoint: 5/13/2021 Expire: 12/31/2022 Re-appt: 1/1/2023 Expire: 12/31/2025
4	KENT	Shellie Cole-Mickens	1137 Kalamazoo SE Grand Rapids, MI 49507 (616) 634-1972 – work (616) 634-1972 – cell shelliec123@yahoo.com	Appoint: 10/2016 Expire: 12/31/2018 Re-appt: 1/1/2019 Expire: 12/31/2021 Re-appt: 1/1/2021 Expire: 12/31/2024
5	KENT	Bethany Fisk	479 Donna Street Sparta, MI 49345 (616) 204-8344 bfisk01@gmail.com	Appoint: 1/1/2023 Expire: 12/31/2025
6	KENT	Stan Ponstein	3967 Edgewood Grandville, MI 49418 sjponstein@gmail.com (616) 460-8138	Appoint: 1/1/2019 Expire: 12/31/2019 Re-appt: 1/1/2020 Expire: 12/31/2022 Re-appt: 1/1/2023 Expire: 12/31/2025
7	KENT	Julie Sanford	370 Nelson St Sparta, MI 49345 616-887-6377 julsanford@gmail.com	Appoint: 1/1/2021 Expire: 12/31/2023
8	KENT	Sarah Sobel	865 Anita Ave. NW Grand Rapids, MI 49534 H – 616.453.8240 W – 616.588.2732 Cell: 616.283.6281 sarahmsobel@gmail.com	Appoint: 1/1/2019 Expire: 12/31/2020 Re-appt: 1/1/2021 Expire: 12/31/2023

9	KENT	Patrick Sweeney Chair	233 Centennial Ave Grand Rapids, MI 49504 (989) 854-2444 – cell (616) 233-5262 – work psweeney@rhoadesmckee.com	Appoint: 10/2014 Expire: 12/31/2016 Re-appt: 1/1/2017 Expire: 12/31/2020 Re-appt: 1/1/2021 Expire: 12/31/2023
10	LAKE	Dawn Martin Commissioner	4851 E. 3 ½ Mile Luther, MI 49656 (231) 760-1446 District4dm@co.lake.mi.us	Appoint: 1/2021 Expire: 12/31/2022 Re-appt: 1/1/2023 Expire: 12/31/2023
11	MASON	Rebecca Lange	503 N. Delia St. Ludington, MI 49431 (231) 425-4325 – home (231) 852-0744 – cell beckylange80@hotmail.com	Appoint: 10/1/2014 Expire: 12/31/2016 Re-appt: 1/1/2017 Expire: 12/31/2020 Re-appt:
12	MUSKEGON	VACANT		Appoint: Expire: 12/31/2023
13	MUSKEGON	Marcia Hovey- Wright Commissioner	3430 Pigeon Hill Court, Muskegon 49441 (231) 740-8492 hoveywrightma@muskegoncounty.net	Appoint: 12/2019 Expire: 12/31/2020 Re-appt: 1/5/2021 Expire: 12/31/2022 Re-appt: 1/4/2023 Expire: 12/31/2024
14	OCEANA	Andrew Sebolt	4124 E Hazel Rd Hart, MI 49420 (231) 923-6881 – cell andysebolt@yahoo.com	Appoint: 1/1/2021 Expire: 12/31/2023
15	OTTAWA	David Parnin	14466 Brigham Drive Grand Haven, MI 49417 (231) 206-3834 drparnin@msn.com	Appoint: 12/1/2017 Expire: 12/31/2020 Re-appt: 2/9/2021 Expire: 12/31/2023
16	OTTAWA	Richard Kanten	3112 Beech Forest Street Hudsonville, MI 49426 (616) 669-0863 richardkanten1953@gmail.com	Appoint: 10/2014 Expire: 12/31/2017 Re-appt: 1/1/2018 Expire: 12/31/2020 Re-appt: 2/9/2021 Expire: 12/31/2023
17	OTTAWA	Doug Zylstra Commissioner	152 E. 24 th Street Holland, MI 49423 (616) 443-4281 dzylstra@miottawa.org	Appoint: 1/1/2021 Expire: 12/31/2023

Regional Leadership. Local Excellence.



Our Mission: Through regional support and leadership for collaboration and innovation, we work to strengthen the public behavioral health system and ensure excellence in services.

ATTACHMENT 6

Our Values:



LOCAL SOLUTIONS

VALUE LOCAL DIFFERENCES

We value locally unique service systems that are responsive to local needs, partnerships, & available resources.



FISCAL RESPONSIBILITY

ACCOUNTABLE & RESPONSIBLE WITH FUNDS

Transparent & accountable use of public funds.

Maximize available resources.



COLLABORATIVE RELATIONSHIPS

FOSTER EFFECTIVE PARTNERSHIPS

Nurture collaboration based on mutual trust & shared commitment to quality.

Approach all interactions with respect, openness, & a commitment to proactively resolve conflict.



INNOVATION

BOLDLY PURSUE EXCELLENCE

Pursue audacious goals by challenging the status quo & trying new things.

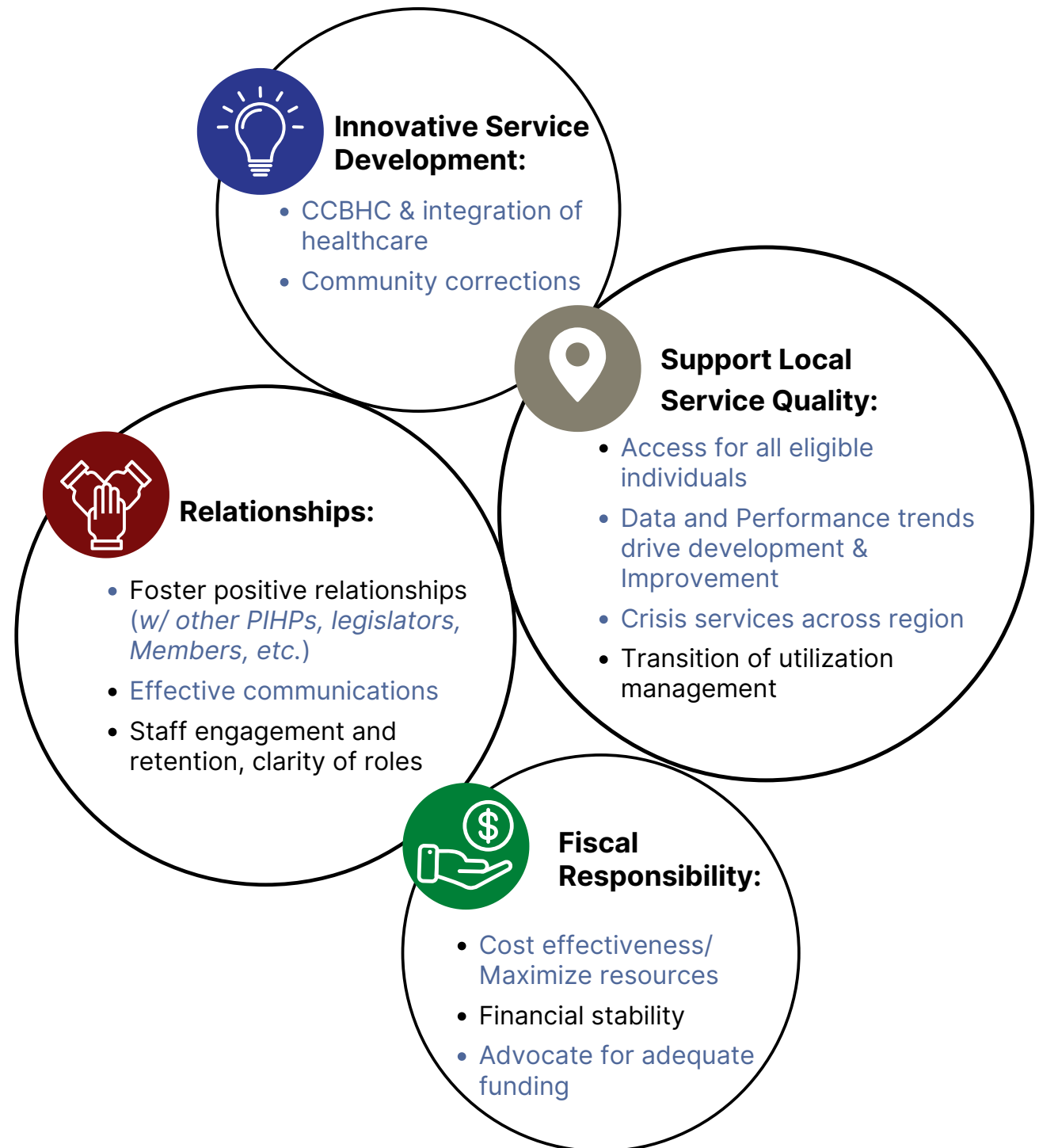
Actively work to identify & support opportunities for innovation.

The LRE serves as one of ten Prepaid Inpatient Health Plans (PIHP) in Michigan, as the public behavioral health plan for people with mental illness, developmental disability, and substance use disorders in Allegan, Kent, Lake, Mason, Muskegon, Oceana, and Ottawa counties.

Strategic Priorities

These strategic priorities, in no particular order, have been identified for exploration during strategic planning. Items included were identified from unfinished work in the prior tactical plan and discussion with the LRE Board of Directors (BOD) in Oct. & Nov. 2022. BOD identified Items are identified with blue text.

Discovery regarding these strategic priorities is being done through discussions with LRE ROAT groups, staff, and the Operations Advisory Committee. Following this, it will be determined which strategic priorities require action.



Strategic Planning Overview

What?

Engage stakeholders to ID strategic priorities and related actions for a 3-year strategic plan.
Will address operations of the LRE, including management and oversight* of funded services.

**Will not address programmatic aspects of service delivery.*

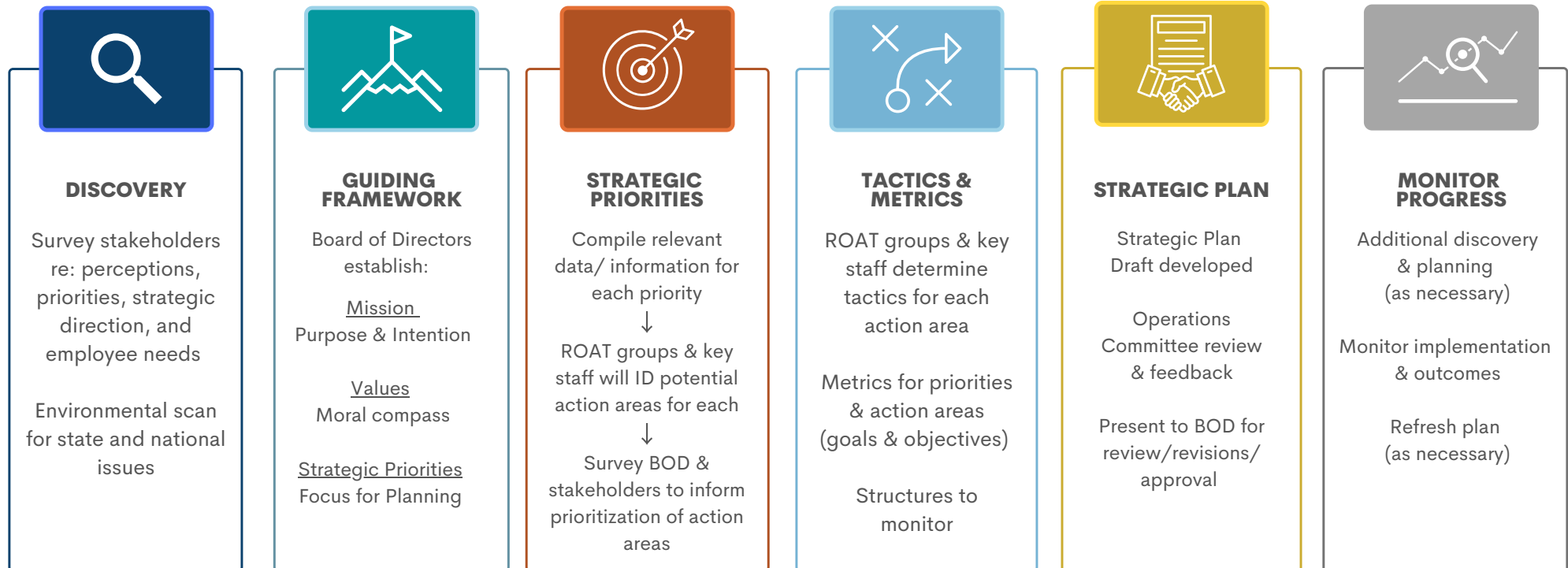
Who?

- LRE Board of Directors (BOD)
- CMHSP Members
- ROAT workgroups
- LRE staff

Why?

Empower the LRE to effectively direct their efforts to address priorities.

Process



Timeline



OPIOIDS SETTLEMENT: FY2023 SPEND PLAN

PROPOSED EFFORTS

MDHHS has developed a proposed Opioid Settlement Spend Plan for the State of Michigan's Fiscal Year (FY) 2023 funding that has been driven by data, including the [Opioid Settlement Prioritization Survey 2021–22](#), as well as ongoing programming needs and gaps due to federal funding restrictions. Proposed FY23 Spend Plan efforts relate to MDHHS' overarching goal to reduce harm associated with the opioid crisis. A brief overview of key efforts and investments are summarized below.



TREATMENT

- Invest in initiatives aimed to increase substance use disorder (SUD) treatment capacity, such as workforce training and loan repayment incentives, and infrastructure grants.
- Invest in capacity building for evidence-based practices for stimulant and polysubstance use.



PREVENTION

- Increase awareness and education around adverse child experiences (ACEs) by exploring ways to impact or reduce ACEs by bringing awareness to the relationship between ACEs and SUDs and implementing evidence-based primary prevention programming with a goal to foster positive experiences and health outcomes at the individual, family and community levels.
- Expand Quick Response Teams, a collaborative and community-led initiative that focuses on promoting pathways to treatment and recovery and preventing fatal drug overdoses. The expansion of this initiative aims to increase presence in rural counties, homeless populations and parents exiting criminal justice systems.



RECOVERY

- Expand recovery housing sites to offer stable, safe and sober housing options that are critical to those in recovery.
- Provide grant opportunities to Recovery Community Organizations that help ensure community supports are available for those in recovery.



HARM REDUCTION

- Invest in resources that reduce harm associated with substance use, such as overdose and infectious disease. Continue to fund the MDHHS Naloxone portal, which supplies an overdose reversal medication to community organizations, as well as syringe service programs, which provide access to supplies including, but not limited to, fentanyl test strips, naloxone and sterile syringes.



CRIMINAL-LEGAL

- Support the provision of Medications to treat Opioid Use Disorder in jails and prisons, which are medications that have been proven to reduce the risk of overdose.



PREGNANT & PARENTING

- Expand capacity in hospitals to support “Rooming In,” where mothers with infants experiencing Neonatal Abstinence Syndrome can stay together promoting recovery and family preservation.
- Expand the implementation of evidenced-based screening tools designed to identify SUDs in pregnant women; to be used in prenatal clinics across the state.
- Invest in supports for families vulnerable to child removal due to involvement with substance use, with the goal of reducing the rate of children removed from family homes and supporting family recovery and family reunification.



DATA

- Allow state-level data infrastructure investments with settlement funds for critical data capturing and monitoring.



EQUITY

- Fund recommendations of the Opioid Task Force’s Racial Equity Workgroup to reduce disparities in substance use.



LOCAL GOVERNMENT TECHNICAL ASSISTANCE & RESOURCES

- Funds will allow experts from Michigan State University, University of Michigan and Wayne State University to provide technical assistance to interested communities regarding best practices for addressing opioid use disorders. The universities will also be able to provide technical assistance in tailoring programs to vulnerable populations, such as the justice-involved and pregnant and parenting populations.
- Create an Opioid Settlement website that will serve as a resource hub for local governments to utilize as they determine how to invest their settlement allocations.



ADMINISTRATION

- Invest approximately 5% of all settlement dollars to fund the necessary staff to successfully implement projects related to the settlement dollars. This follows requirements of Substance Abuse and Mental Health Services Administration grants that has historically been sufficient to administer funds while maximizing service dollars.



Lakeshore Regional Entity's Legislative Update – 2/16/2023

This document contains a summary and status of bills in the House and Senate, and other political and noteworthy happenings that pertain to both mental and behavioral health, and substance use disorder in Michigan and the United States.



Prepared by Melanie Misiuk, SEDW & 1915(i)SPA Specialist & Stephanie VanDerKooi, Chief Operating Officer

Highlight=new updates

ATTACHMENT 8

STATE LEGISLATION

BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH				
Priority	BILL #	SUMMARY	SPONSOR	ACTION DATE
	SB 27	Legislation that would require insurers to provide coverage for mental health and substance abuse disorder services on the same level as that of coverage for physical illness. Federal law requires mental health coverage to be equal to physical illness. The bill would require insurance coverage for mental health conditions, including substance use disorders, to be no more restrictive than insurance coverage for other medical conditions.	Sarah Anthony	1/18/23 – Introduced to the Senate; Referred to Committee on Health Policy

BILLS & REGULATIONS PERTAINING TO SUD				
Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HB 6474	A bill to prohibit municipalities from adopting ordinances that would require caregivers or qualified medical marijuana patients to report use or growth, pay a tax to municipality, grow marijuana according to the MRTMA, forced inspections of property by municipality, among other requirements that would create an undue burden on caregiver or qualified medical marijuana patient	Steve Carra	11/9/22-Introduced and referred to Committee on Regulatory Reform
	S 1170/1171	Bills to make prescribers and agencies who are trained to distribute naloxone immune from prosecution for distribution, administration, or failure to administer naloxone.	Dale Zorn	9/20/22-Introduced and referred to Committee on Health Policy and Human Services
	SB 1222-1223	A two-bill package designed to extend the capture of liquor tax revenue that counties use for substance abuse programs. Beginning in 2023, the baseline allocation in liquor tax dollars for counties will increase by approximately 48 percent (\$25 million). It is an amendment to the State Convention Facilities Authority Act. Current law states 50 percent of the liquor tax revenue	Wayne Schmidt	12/29/22 – signed by the Governor

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
		received by counties must be allocated to substance abuse programs. SBs 1222-23 will change that requirement to 40 percent (though no less than the amount allocated in FY22). This will be a significant increase in funds toward substance abuse programs, and an increase in the amount counties can allocate to their general funds. 2021-SFA-1222-F.pdf (mi.gov)		
	TBD	Keep MI Kids Tobacco Free Alliance is working on a legislative package that will address the areas of Tobacco Retail Licensure, Taxation on Vaping Products & Parity, Ending the Sale of Flavored Tobacco, and Preemption Removal (Restoration of local authority to regulate tobacco control at the municipal level)	Keep MI Kids Tobacco Free Alliance Sam Singh	

FEDERAL LEGISLATION

BILLS & REGULATIONS PERTAINING TO MENTAL HEALTH

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
	HR 8454	Medical Marijuana and Cannabidiol Research Expansion Act: Establishes a new, separate registration process to facilitate research on marijuana; directs DEA to follow specified procedures to register practitioners to conduct marijuana research, and manufacturers to supply marijuana for research; Bill also includes various other provisions including: require the DEA to assess whether there is an adequate and uninterrupted supply of marijuana for research purposes; prohibit the Department of Health and Human Services (HHS) from reinstating the interdisciplinary review process for marijuana research; allow physicians to discuss the potential harms and benefits of marijuana and its derivatives (including CBD) with patients; and require HHS, in coordination with the National Institutes of Health and relevant	Earl Blumenauer	11/16/22-Passed Senate

BILLS & REGULATIONS PERTAINING TO SUD

Priority	BILL #	SUMMARY	SPONSOR(s)	STATUS/ACTION DATE
		federal agencies, to report on the therapeutic potential of marijuana for various conditions such as epilepsy, as well as the impact on adolescent brains and on the ability to operate a motor vehicle.		
	HR 9221	Bruce's Law: This bill reauthorizes certain grants through FY2027 and sets out other activities to address drug overdoses, with a particular focus on contamination with fentanyl or other synthetic opioids.	David Trone	10/20/22-Introduced and referred to House Committee on Energy and Commerce
	HR 39	A res. Requesting that all illicit fentanyl and illicit fentanyl-related substances should be permanently placed in Schedule I; and for other purposes.	Neal Dunn	1/17/22-Introduced and referred to Committee on Energy and Commerce & Committee on the Judiciary
	N/A – Proposed Rule	There is a proposed rule by the Substance Abuse and Mental Health Services Administration (SAMHSA) that would permanently allow providers to prescribe buprenorphine specifically for opioid use disorder treatment without an in-person visit in an opioid treatment program, but this is still in the proposal phase with comments due on Feb. 14, 2023.	SAMHSA	12/16/22 – Proposed 2/14/23 – Public Comment Due Federal Register :: Medications for the Treatment of Opioid Use Disorder

LEGISLATIVE CONCERNS

LOCAL THREATS AND CHALLENGES

ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS
State Medicaid Redeterminations	Emergency Medicaid coverage protection extended during the COVID-19 pandemic is set to expire April 1 st . This could result in up to 400,000 Michigan residents losing Medicaid coverage.		Medicaid review could drop 400,000 Michigan residents from coverage Bridge Michigan

MISCELLANEOUS UPDATES

ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS

ISSUE	SUMMARY	COUNTY	ADDITIONAL INFORMATION/LINKS
FY24 State Budget Recommendations	<p>Governor Whitmer’s FY2024 State Budget Recommendation includes the following areas related to behavioral health and SUD:</p> <ul style="list-style-type: none">• \$300 million for student mental health to ensure students’ needs can be identified and provided with the right support.• \$210.1 million for Direct Care Worker Wages (\$74.5 million general fund) to increase wage support to direct care professionals providing Medicaid behavioral health services, care at skilled nursing facilities, community-based supports through MI Choice, MI Health Link, and Home Help programs and in-home services funded through area agencies on agencies. These funds support an increase that would average about \$1.50 / hour (10%)• \$5 million for behavioral health recruitment supports (general fund) that would fund scholarships and other recruiting tools to attract and support people interested in training to become behavioral health providers.		<p>Access budget material at: https://www.michigan.gov/budget</p>
MIHealthyLife	<p>In fall 2023, MDHHS will ask Medicaid health plans for new contract proposals to provide health services to people enrolled in Medicaid, including Behavioral Health. MDHHS is providing a survey for stakeholders to submit ideas to make the program better and collecting input about potential changes to the new contracts.</p>		<p>MIHealthyLife (michigan.gov)</p>



LAKESHORE REGIONAL ENTITY

SUMMARY OF ACTIVITIES FY21 & FY22

PREVENTION SERVICES

PREPARED BY:



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INTRODUCTION

Background Information:

The following report provides an overview of substance use disorder (SUD) prevention initiatives supported through the LRE during fiscal year 2020/2021 (FY21) and 2021/2022 (FY22). As one of ten Prepaid Inpatient Health Plans (PIHP) in Michigan, the LRE is responsible for managing substance abuse prevention services provided under contract with the Michigan Department of Health and Human Services (MDHHS). The LRE service region includes Allegan, Kent, Lake, Mason, Muskegon, Oceana, and Ottawa counties.

Funding to support the initiatives discussed in this report were provided by Block Grant, Public Act 2, and other short-term specialty grants managed by the LRE and dedicated to SUD prevention services. Initiatives supported under the Medical Marijuana Operation and Oversight Grants are not managed by the LRE, however initiatives are referenced throughout this report where they overlap with LRE supported initiatives.

This report, along with future annual summary of activity reports, will provide a record of activities conducted to inform multi-year outcome evaluation for regional prevention services.

Prevention providers funded through the LRE during FY21 & FY 22 include the following:

OnPoint - *formerly Allegan County Community Mental Health Services*
Arbor Circle (AC)

Community Mental Health of Ottawa County (CMHOC)

District 10 Health Department (D10HD)

Family Outreach Centers (FOC)

Kent County Health Department (KCHD)

Network 180 (N180)

Muskegon Community Health Project, Trinity Health (MCHP)

Ottawa County Department of Public Health (OCDPH)

Public Health Muskegon County (PHMC)

Wedgwood Christian Services (WW)

*The acronyms provided above will be referenced throughout this report.

SERVICES PROVIDED

During FY 21, prevention providers proactively responded to limitations caused by COVID-19. Prevention providers digitized existing programs and resources that schools that could use in remote settings which ensured service continuation. Providers remained flexible and accommodating to ensure communities received the services needed as situations evolved.

Persons Served: 231,055

During FY 21, over 160,000 individuals received prevention services throughout the region, decreasing to around 68,000 in FY22. This decrease is primarily due to Kent County.

During FY21, many services were delivered using a virtual format rather than in-person due to Covid-19. Virtual programming continued for many initiatives in FY22.

Persons Served	FY21	FY22
Allegan	8,660	10,356
Kent	137,260	41,156
Lake, Mason & Oceana	4,219	4,860
Muskegon	5,278	3,801
Ottawa	7,073	8,392
Total	162,490	68,565

Estimated Reach: 13.9M

Estimated reach is collected for activities where when an official count of persons is not possible. Providers estimate that they have achieved more than 13 million impressions through campaigns such as TalkSooner, Above the Influence, and others. In FY21 estimated reach for the LRE region totaled 3M, increasing to 10.9M in FY22. This increase may be due to additional time-limited specialty grants, many of which were used to support marketing campaigns.

Hours of Service: 23,414

More than 23,000 hours of service were provided in the following strategies:

	FY21	FY22
Education	2,969	3,822
Community-Based	5,329	4,306
Environmental	3,664	705
Information Dissemination	561	212
Student Assistance/ Prevention Assessment	632	664
Alternative	383	168
Total	13,537	9,877

Prevention Goal Areas:

Efforts throughout the region are developed to align with the LRE's regional prevention strategic plan. A corresponding logic model provides a framework for how local efforts across the region work together to cumulatively impact regional priorities. Each provider uses local data to determine which priorities of the LRE strategic plan to address within their area.

Priorities established in the strategic plan, the targeted intervening variables for each, and the page on which you will find information about each are as follows. Attachment A provides an overview of regional data trends for all targeted indicators (pg.30).

Reduce Underage Alcohol Usep.4

Reducing youth access
Increasing awareness of consequences
Promoting accurate perceptions of use

Reduce Underage Marijuana Usep.9

Reducing youth access
Increasing perception of risk

Reduce Underage Tobacco Use, inc. Vaping p.12

Reducing youth access
Increasing perception of risk

Reduce Opioid and Prescription Drug Misusep.16

Reducing youth access
Increasing perception of risk

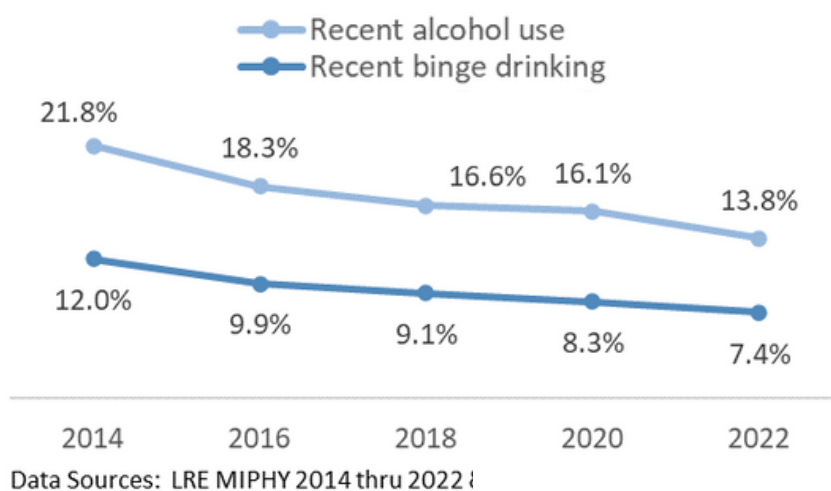
Reduce Early Initiation of Substance Usep.19

Increase perception of risk
Association with positive peers
Promote positive family dynamics
Coping with life stressors

ALCOHOL

Within the LRE region, the rate of high school students reporting recent alcohol use decreased between 2020 and 2022 to a low of 13.8%. Rates of recent binge drinking also decreased to a low of 7.4% in 2022. Childhood and underage drinking use has been declining in the LRE region and continues to be lower than statewide rates with 25.4% of high school (HS) students state-wide.

Recent Alcohol Use Among HS Students, LRE Region



To address underage drinking, the LRE has developed strategies targeting the following:

Easy Access: In 2020, more than half (59%) of HS students in the region, reported it would be 'sort of' or 'very easy' to get alcohol. The rate remained stable in 2022 at 58%.

Low Perception of Risk: In 2020, 29.2% of HS students in the region reported that drinking 5+ drinks once or twice each weekend is 'no risk' or 'slight risk'. The rate remained stable in 2022 at 30.4%.

Perception of Peer Use: In 2020, more than 1-in-4 HS students (26.6%) reported believing that more than half of the students in their grade had drunk alcohol in the past month, when only 16% actually had. The rate worsened slightly in 2022 (28.7%).

ACCESS: SOCIAL

Reduce access to alcohol in the home, and from family members.

Regional Strategies:

Increase awareness of social host laws and the legal consequences of providing alcohol to a minor for parents & college students age 21+.

Incorporate parent responsibility info into existing programs serving parents throughout the region.

Enhance enforcement for underage drinking parties to raise visibility of enforcement and encourage community reporting.

Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
	✓		✓ FY21			✓
	✓		✓ FY21		✓ FY22	✓
	✓		✓ FY21			✓

Local Programming:

- **Kent County**
 - N180: All populations targeted through Above the Influence Campaign activities.
- **Mason County**
 - D10HD: Created and distributed post card with social hosting laws and consequences to parents through various methods.
- **Oceana County**
 - D10HD: Created and distributed post card with social hosting laws and consequences to parents through various methods.
- **Ottawa County:**
 - AC: Through the ROADD Task Force the following initiatives were implemented:
 - Education on the consequences of providing alcohol to minors in partnership with local colleges and universities through informational resources for parents provided to schools.
 - Party patrols in the fall and spring resulted in 99 law enforcement encounters in FY21 where they issued citations and provided prevention education. This program continued in FY22.
 - Distributed information on the risks of alcohol and marijuana use on youth bodies at events, in partnership with teen driving schools, and through the schools.
 - Offered information to retailers.

ACCESS: RETAIL

Ensure alcohol retailers do not sell to underage individuals.

Regional Strategies:

Support and education for retailers to prevent sales to minors through responsible beverage and vendor education.

Safe Prom and Graduation initiatives to inform retailers of upcoming local events to be vigilant to avoid alcohol sales to youth. Often paired with increased enforcement efforts.

Partner with law enforcement to conduct compliance checks.

Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
✓	✓		✓ FY21	✓		✓
	✓			✓		✓
✓	✓			✓		✓

Local Programming:

- **Allegan County**
 - OnPoint: Provided in-person TIPS training for retailers.
- **Kent County**
 - KCHD: Partnered with Kent County Sheriff Department during DYTUR activities.
 - N180: Above the Influence Campaign activities including Sticker Shock which provides messaging to deter social provision of alcohol to minors.
- **Mason County**
 - D10HD: Referred area businesses interested in training to TIPS online training resources.
- **Muskegon County**
 - PHMC: Provided TIPS training and technical assistance for retailers who had a liquor control violation or requested additional information.
 - MCHP: ALI coalition members supported retailer education, compliance checks, and recognize retailers that successfully restrict sales to minors.
- **Ottawa County**
 - AC: ROADD task force offered information to retailers; limited due to COVID-19 in FY21. Safe Prom implemented in FY22 reaching over 200 alcohol retailers and 400 other businesses associated with Prom to prevent alcohol sales to minors.

PERCEPTION OF RISK

Increase awareness of the legal consequences of underage alcohol use.

Regional Strategies:	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Increase efforts and visibility of Minor-In-Possession (MIP) enforcement at prom, graduations, and underage drinking parties.					✓		✓
MIP brochure distribution with local law enforcement.							✓
FaceTheBook Campaign					✓		

Note: Additional efforts targeting perception of risk included under Early Age of Onset.

Local Programming:

- **Muskegon County**
 - MCHP: Annual campaigns for middle and high schools through media contest promoting the FacetheBook Campaign. Coordinated by MCHP's coalitions.
- **Ottawa County**
 - OCDPH: Developed a flyer outlining MIP consequences, amnesty laws, and Good Moral Standing criteria for college program admission.

SOCIAL NORMS:

Increase visibility of youth who choose to not use substances and work to offset the common youth perception that most of their peers drink alcohol.

Regional Strategies:

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Engage area HS groups in development and distribution of normative messaging.		✓ FY21			✓		✓
Train local youth to promote messaging among their peers.	✓	✓ FY21			✓		
Provide youth leadership development opportunities.	✓	✓			✓		
Support youth-developed messaging.		✓			✓		
Education and messaging to decrease normality of heavy/excessive drinking among adults.		✓			✓		✓

Local Programming:

• Allegan County

- OnPoint: The Pro Youth Team attended the Youth-to-Youth conference to develop leadership skills in FY22.

• Kent County

- AC: Began promoting the "Make Good Choices, Your Future Awaits" materials in FY22 through various events. In addition, began a campaign where youth share why they don't use substances and how they cope with mental health challenges.
- FOC: leadership opportunities focused on programming that strengthened the leadership skills of the individual students.
- KCHD: Adult Heavy Drinking Campaign, 'About Last Night'. Messaging released just before holidays. Campaign materials were refreshed in FY22 and promoted through digital media, billboards, bud ads, Johnny ads, and display ads with partnering companies.
- N180: Above the Influence Campaign.
- WW: Teens provide input into awareness campaigns at their school each year. They are encouraged to submit blogs and videos that address the challenges teens face and positive ways to respond. The blogs and videos are then posted on the website and social media pages.

• Muskegon County

- PHMC: Messaging distributed concerning alcohol use among older adults.

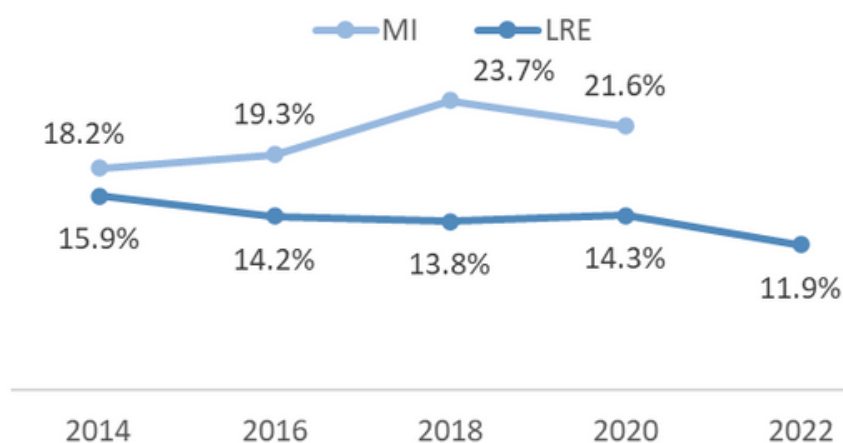
• Ottawa County

- AC: Provide educational information about serving size in partnership with our colleges and universities. Partnered with SLIC youth coalition to develop messaging that was distributed throughout the year. Safe Summer promotion through driving schools with 800 post cards mailed.
- OCDPH: Prime for life programming provided.

MARIJUANA

In 2020, 14.3% of HS students in the LRE region reported recent use of marijuana, decreasing to 11.9% in 2022. Rates remain lower than state-wide and remained relatively stable following legalization of recreational marijuana use in 2019.

**Recent Marijuana Use Among HS Students,
LRE Region vs. Michigan**



Data Sources: LRE: MIPHY 2014 - 2022 & MI: YRBS 2013 - 2019

To address underage marijuana use, the LRE has developed strategies targeting the following:

Easy Access: In 2020, almost half (47%) of HS students in the region, reported it would be 'sort of' or 'very easy' to get marijuana. The rate decreased by 10% in 2022 to 43%.

Low Perception of Risk: In 2020, more than half (55%) of HS students in the region reported that using marijuana once or twice per week is 'no risk' or 'slight risk'. The rate remained stable in 2022 at 55%.

REDUCE YOUTH ACCESS

Ensure proper storage of marijuana in the home to prevent youth access and advocate for appropriate regulatory oversight of marijuana sales and distribution.

Regional Strategies:

Promote safe storage of marijuana in the home through education of consumers and distribution of lockboxes to medical marijuana consumers.

Advocate for appropriate regulatory oversight including standards for packaging, distribution, sales, and adequate monitoring for compliance.

Promote local policies that restrict or disallow retailer density, dispensaries near places frequented by youth such as schools and churches, and/or free samples and community events with marijuana.

Develop and promote model policies for local adoption.

Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
✓				✓	✓ FY22	✓
				✓		
				✓		✓
			✓ FY22	✓		✓ FY22

Local Programming:

- **Allegan County**
 - OnPoint: Distributed several hundred lock bags each year to local dispensaries for distribution to families. Schools were also provided bags to distribute as needed.
- **Kent County**
 - KCHD: Worked on Medical marijuana efforts, including a comprehensive safe storage messaging campaign. *Effort supported with LARA funds.*
- **Mason County**
 - D10HD: Hosted speakers for city officials to educate re. marijuana policies.
- **Muskegon County**
 - PHMC: Distributed lock bags to provisioning centers along with other youth access messaging. Worked with Michigan Prevention Association to assure legislators are aware of issues and needs for regulation. Worked with local municipalities to consider long term public health impact of marijuana use/sales in public spaces and neighborhoods.
- **Oceana County**
 - D10HD: Promoted and distributed lock boxes for safe storage in the home.
- **Ottawa County**
 - AC: Promoted safe storage and monitoring of marijuana in the home. Hosted a training around marijuana policy for local municipalities in FY21.
 - OCPHD: Provided lock bags free to the public and distributed at multiple locations. Disseminated information promoting effective marijuana dispensary policy (re. advertising, location and staff training).

PERCEPTION OF RISK

Increase awareness of the risks of marijuana use.

Regional Strategies:

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Incorporate marijuana info into existing educational efforts, including Prime For Life's new curricula component for marijuana.	✓	✓			✓	✓ FY22	
Provide information on the risks of marijuana use while pregnant.	✓	✓		✓	✓	✓ FY22	✓
Raise awareness of the risks of driving after using marijuana.		✓		✓	✓	✓	✓

Note: Additional efforts targeting perception of risk included under Early Age of Onset.

Local Programming:

• Allegan County

- OnPoint: Brochures were created and distributed on marijuana and pregnancy. Prime for Life programming provided at local high schools when teens are caught with marijuana at school or school events.

• Kent County:

- AC: School groups using the Prime for Life curriculum for youth who self-identified as wanting to avoid risky behaviors despite primary peer groups engaging in harmful use behaviors.
- KCHD: In FY22, COVID SUD funds were used to develop a campaign on the risks of driving under the influence of marijuana, alcohol or pills; 8 messages were designed.
- N180: Above the Influence campaign.
- WW: Risks covered in Project SUCCESS and small group education including suspension reduction groups for students caught vaping and/or using marijuana.

• Mason County

- D10HD: Hosted a presentation for coalition members on the impact of marijuana legalization on communities. Staff provided webinar training to on risks of marijuana use while pregnant.

• Muskegon County

- MCHP: "Shattering the Myths" campaign of Alliance for Marijuana Prevention Coalition conducted annually within the Muskegon Area School Districts.

• Oceana County

- D10HD: Press release and social media messaging on risks of driving under the influence of substances, including marijuana. Emphasis during National Driving Impaired Awareness Month in FY22 and materials about risks of using marijuana were distributed to WIC clients.

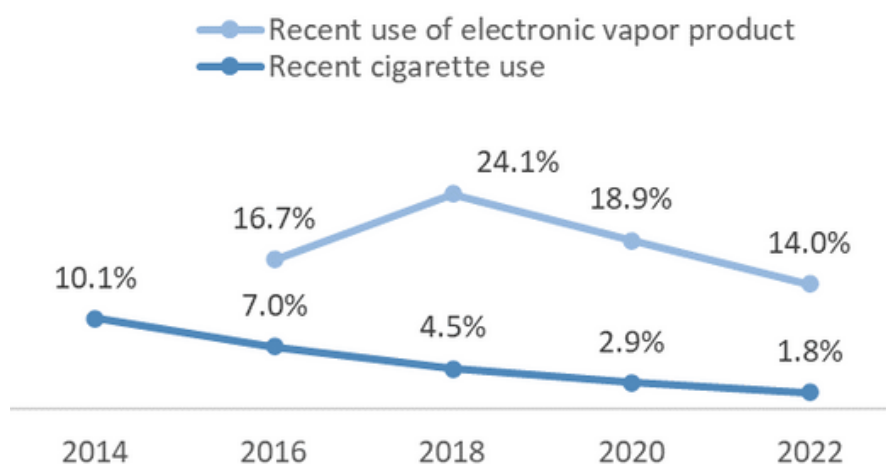
• Ottawa County

- AC: In FY22 promoted the "Don't Drive Buzzed" campaign to raise awareness of driving under the influence of marijuana or alcohol.
- OCDPH: Distributed educational materials and provided marijuana lock bags.

TOBACCO

In 2020, only 2.9% of HS students in the region reported recent smoking, lower than state-wide (4.5%) and decreasing substantially in recent years. Rates of HS students reporting recent vaping has been decreasing since a high of 24.1% in 2018 to 18.9% in 2020 and 14.0% in 2022.

Recent Tobacco Use Among HS Students, LRE Region



Data Sources: LRE: MIPHY 2014-2022

To address underage use of tobacco and vaping products, the LRE has developed strategies designed to address the following:

Easy Access: In 2020, 38% of HS students in the region, reported it would be 'sort of' or 'very easy' to get cigarettes, improving substantially in 2022 to 20%. In FY20, 1-in-10 tobacco retailers (9.5%) were willing to sell to an underage decoy during compliance checks, decreasing to 5.4% in 2021, then increasing again in 2022 to 9.9%.

Low Perception of Risk: In 2020, almost 1-in-5 (18%) of HS students in the region reported that smoking one or more packs per day is 'no risk' or 'slight risk'. The rate remained stable in 2022 at 17%.

Regional data is not available for vaping, however data was collected in Ottawa and Lake counties. In Ottawa County in 2019, 24% of Ottawa HS students reported vaping is low risk, improving in 2021 to 20.1%. In Lake County, 39% of HS students (in 2020) reported that vaping is low-risk, in 2022 this worsened to 47%.

REDUCE YOUTH ACCESS

Ensure retailers do not sell tobacco products to persons under age 21.

Regional Strategies:

Utilized Regional No Cigs For Our Kids Campaign which consists of year-round law enforcement compliance checks for retailers, education and support for retailers. Consistent branding is used to enhance visibility.

Incorporated efforts to ensure retailers do not sell vaping products to minors. *

Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
✓	✓	✓	✓	✓	✓	✓
✓	✓	✓	✓	✓	✓	✓

Youth Tobacco Access: In 1992, Congress enacted the Federal Synar Amendment requiring states to enact and enforce laws prohibiting the sale of tobacco products to individuals under the age of 18. Each state must conduct annual unannounced inspections of a random sample of tobacco retailers and achieve a compliance rate of at least 80%, or the state risks a loss of up to 40% of the Substance Abuse Prevention and Treatment (SAPT) Block Grant funds.

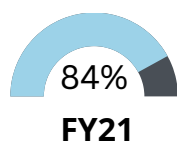
In response to this, the No Cigs for Our Kids Campaign, which began in 2004, works to eliminate sales of tobacco to youth under the age of 18 and has been expanded throughout the region since 2012.

In each county of the region, compliance checks are conducted by law enforcement throughout the year that result in citations for those who fail, and vendor education visits to provide education and support.

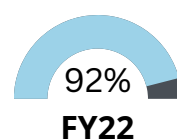
To monitor state's compliance with the Federal Synar Amendment the state conducts compliance checks with a sampling of retailers statewide each year. Results of recent checks occurring in the LRE region to fulfill this state assessment are summarized below.

In December of 2019 Tobacco 21 was enacted nationally. Since then, tobacco products sales are restricted to anyone under the age of 21 including cigarettes, cigars, and e-cigarettes.

Synar Compliance Rate:



For statewide assessment purposes, a random selection of retailers is selected annually for a compliance check. The sample size provides meaningful results statewide, but the number of retailers selected for the region is too small to provide meaningful results for the region.



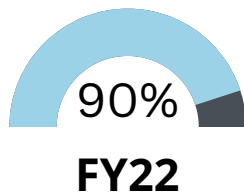
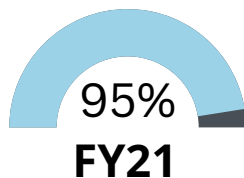
In FY21, 45 retailers in the region were selected for a Synar check. Of these, 38 refused to sell to an underage decoy, resulting in a compliance rate of 84.4%, meeting the requirement of achieving 80% compliance. In FY22 rates improved with 58 of the 63 selected retailers refusing to sell to an underage decoy, resulting in a compliance rate of 92.1%

REDUCE YOUTH ACCESS

Ensure retailers do not sell tobacco products to underage youth.

Activities are conducted throughout the year to improve retailer compliance during the statewide Synar assessment including non-Synar compliance checks and vendor education.

Non-Synar Compliance Rate:



During FY21, 27% of retailers received a non-Synar compliance check.

In FY22, 448 checks were conducted representing 49% of the retailers in the region.

In FY21 95% of retailers passed and in FY22 90% passed.

All retailers that fail the compliance check are issued a citation.

All retailers that pass a compliance check are mailed a letter notifying them of the results along with a Certificate of Compliance for the store.

Corporate headquarters of retailers receiving a compliance check that are part of a larger corporation are sent a letter to notify them of the results.

County	FY21	FY22
Allegan	94	83
Kent	74	104
Lake	0	12
Mason	0	28
Muskegon	77	92
Oceana	0	27
Ottawa	0	102
Total	245	448

Vendor Education:



Vendor education is provided to tobacco retailers to support them in the knowledge and skills necessary to avoid selling to underage persons. During FY21, 85 tobacco retailers were visited for vendor education and in FY22 another 85 retailers received a vendor education visit.

During each fiscal year:

- All retailers that received a non-compliant check were visited, called, or mailed information (due to Covid-19).
- In most counties, retailers in the targeted areas were visited for vendor education prior to law enforcement compliance checks.

PERCEPTION OF RISK

Educate youth on risks of tobacco use:	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Education on risks of tobacco use, including vaping.	✓	✓	✓	✓	✓	✓	✓
Incorporate info on e-cigs into educational programming, materials and presentations.	✓	✓	✓	✓ FY22	✓		✓
Increase Parent Communication:	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Presentations, workshops, and informational materials to help parents and caregivers understand the health risks of vaping, identify use in their child, and communicate risks to their youth.		✓					✓
Increase consequences for vaping:	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Promote enhanced school policy and enforcement for vaping.							
Develop model policies regarding vaping and promote adoption.							
Support school personnel in identifying vaping use, provide appropriate consequences, and support youth who vape.					✓		

Local Programming:

• Kent County

- KCHD: Updated educational material for all programming with most current info. Vape Education classes included parents as well as MS and HS students.
- N180: Provided information through ATI.
- WW: Info on risks of vaping included in Project SUCCESS, small group education, and parent education workshops/videos.

• Lake County

- D10HD: Distributed recorded presentation for community-wide sharing.

• Muskegon County

- MCHP: Annual campaign with most districts in the county. FaceTheBook campaign incorporated vaping information in FY22.
- PHMC: Included vaping in tobacco outreach efforts. Provided model ordinances for local municipalities and helped to develop compliance check efforts with law enforcement. In FY22 added vaping education for students and promoted through the Intermediate School District; also coordinated a vape disposal program.

• Oceana County

- D10HD: In FY21 provided educational sessions with youth caught vaping at school and virtual vaping presentations for youth were shared with the schools. In FY22 provided Vape Educate licenses to all schools as an alternative to suspension. Presentations provided to MS/HS students, partnered with TOPPC youth to present to MS students.

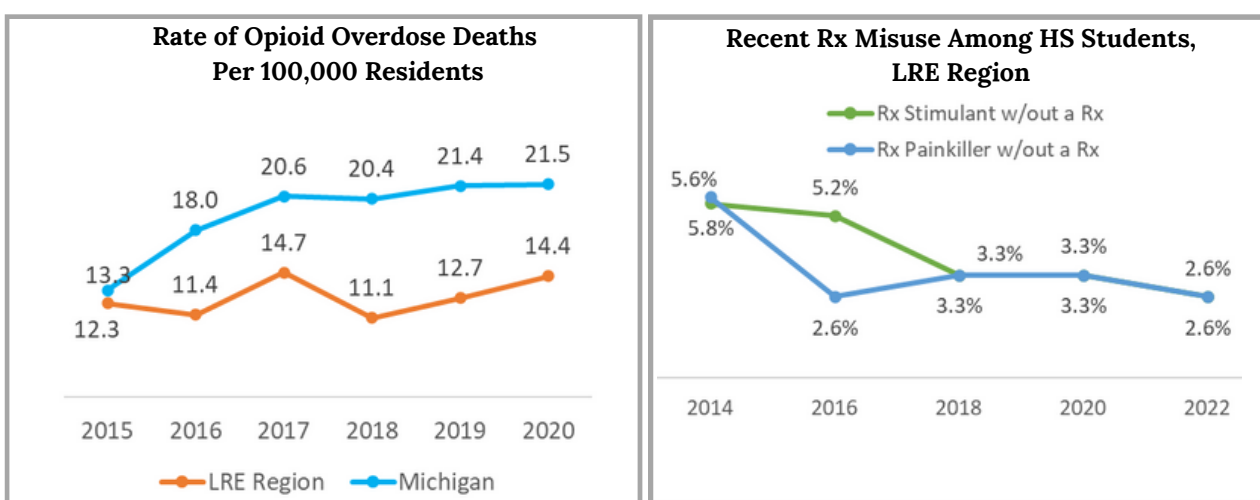
• Ottawa County

- AC: Provided info on My Life, My Quit including social media ads in FY21. Info on vaping provided in all youth and adult programming each year. Promoted the virtual teen room and promoted vape disposal.
- OCDPH: Vape Education class provided in FY21. In FY22 supported school staff to provide vape prevention education to students during detention, being implemented in Holland and Hudsonville public schools.

OPIOID AND PRESCRIPTION DRUG MISUSE

In 2019, there were 145 deaths in the LRE region due to opioid related overdoses (prescription and illicit). The rate of opioid overdose deaths increased between 2018 and 2020 yet remain lower than state-wide.

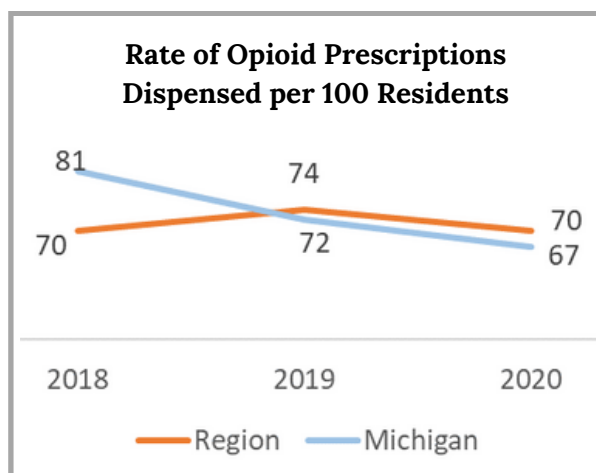
Prescription drug (Rx) misuse among HS students has decreased in recent years to a low of 3.1% for Rx stimulants and 3.3% for Rx painkillers.



To address opioid misuse, the LRE has developed strategies targeting the following:

Reduce Youth Access: The rate of opioid prescriptions dispensed has been decreasing statewide since 2018 but have remained relatively stable in the LRE region. In 2020 rates varied greatly by county with the lowest in Kent (51) and Allegan (55) and the highest in Muskegon (141) and Oceana (138).

Low Perception of Risk: In 2020, 1-in-5 (21.3%) HS students reported that taking a prescription drug not prescribed to you is 'no risk' or 'slight risk'. The rate remained stable in 2022 at 20.9%.



REDUCE YOUTH ACCESS

To reduce over-prescribing and educate about storage and disposal of medications.

Regional Strategies:

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Education and support for pharmacists and physicians to support safe prescribing, promote disposal, identification and referral to treatment.			✓		✓		✓
Increase proper disposal of medications through disposal opportunities and awareness of the importance of proper disposal.	✓		✓	✓	✓	✓	✓
Education and resources to support parents to manage, monitor, and dispose of medications in the home.	✓		✓	✓	✓	✓	✓
Raise awareness of the risks and legal consequences of sharing prescribed medications.		✓					

Local Programming:

• Allegan County

- OnPoint: Safe disposal locations are promoted at all events and brochures are distributed. Also promote safe syringe disposal at these locations.

• Kent County

- AC: In FY22, developed and distributed approximately 40 packets to schools on the impact of youth substance use disorder.
- KCHD: SOR funds supported a messaging campaign for ages 14 - 25.

• Mason County

- D10HD: Supported household hazardous waste event. Created and distributed a mailer to county residents noting proper disposal methods and local options for disposal. Social media posts on storage and disposal.

• Muskegon County

- MCHP: Hosted 2 take back events and permanent take backs at all law enforcement agencies and Mercy Health pharmacies.
- PHMC: Created MAPS awareness campaign; supported pharmacies to advertise use of system. Provided ad printing, staffing, & distribution for local collection events. Lock box exchange program.

• Oceana County

- D10HD: Partnered with household waste efforts for drug take back and provided educational materials on proper storage and disposal of medications. Distributed Dispose Rx packets for safe drug disposal at home in FY21. In FY 22 also provided medication lock boxes as a resource.

• Ottawa County

- AC: Partnered with local municipalities to place bill stuffers in each water bill to promote the prescription drug disposal boxes and take back events throughout the county. In FY22 promotion increased with social media ads. Communicated to parents about managing and monitoring prescription medication.
- CMHOC: Through efforts of the Opiate Taskforce, permanent disposal sites have significantly increased. Took back 400+ pounds of medications and 120 pounds of sharps in FY21. Provide medication lock boxes to community members to safely lock prescriptions. Developed a list of Suboxone providers in Ottawa County and provided this list to treatment providers.

PERCEPTION OF RISK

Regional Strategies:

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Develop materials for schools and organizations to share with youth and families on signs, symptoms, consequences of RX abuse, and resources for youth who need help.		✓			✓		
Incorporate information into presentations for health education classes and other community presentations.		✓			✓	✓	✓
Promote the risks of Rx drug misuse through the Talk Sooner Campaign.		✓	✓	✓	✓		
Partner with pharmacists to develop and promote information to patients on the risks of Rx opioids.					✓ FY21		✓ FY21

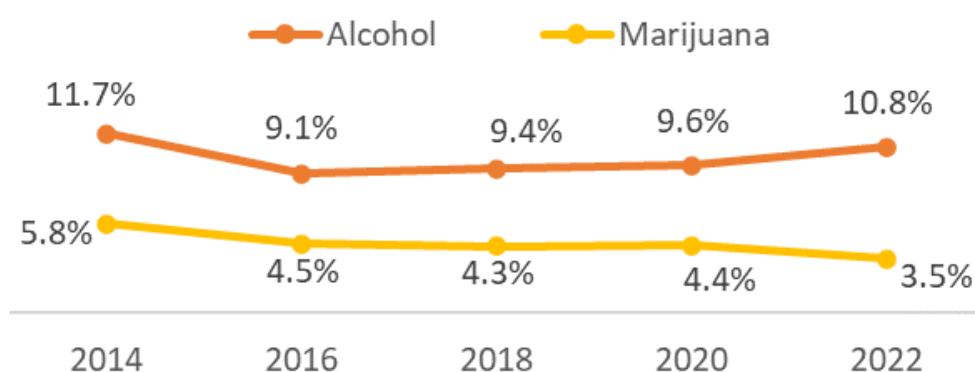
Local Programming:

- **Kent County**
 - N180: Provided information through our work via ATI and the regional marketing implementation plan.
- **Mason County**
 - D10HD: Promoted TalkSooner at a variety of events and outreach opportunities. This program includes RX abuse education. Distributed materials at medication take back events with information on risks.
- **Muskegon County**
 - AC: Included information for parents in parenting classes.
- **Oceana County**
 - D10HD: Coalition hosted a harm reduction presentation.
- **Ottawa County**
 - AC: Provided information in presentations, parenting classes, Botvin's Transitions Programs, and Raise Your Voice programming.
 - CMHOC: Partnered with a pharmacist to develop a list of dangerous co-prescriptions and disseminated this information to stakeholders in FY21. In FY22, the pharmacist and local providers have taken responsibility for this education.
 - OCDPH: Included in Prevention Education as well as parent education on current trends in drug use.

EARLY INITIATION

Research has consistently found that alcohol or drug use at an early age increases the likelihood of developing addiction as an adult. In 2020, 9.6% of high school students in the LRE region reported use of alcohol before the age of 13 and 4.4% reported use of marijuana before age 13. Across the region, early use of alcohol ranges from a high of 20.4% in Mason, to a low of 7.4% in Oceana. Early use of marijuana ranges from a low of 2.7% in Oceana to a high of 12.6% in Lake County.

HS Students Reporting Use Before Age 13, LRE Region



To delay the onset of substance misuse among youth, the LRE has developed strategies targeting the following:

Low Perception of Risk: Among MS students,

- Two-fifths (41%) reported marijuana use is low risk, remaining stable in 2022 (41%).
- One-third (32%) reported binge drinking once or twice per weekend is low risk in 2020, improving to 29% in 2022.
- One-fourth reported that taking a prescription drug not prescribed to you is low risk in 2020, remaining relatively stable at 23% in 2022.

Positive Peers: In 2020, 72% of students (MS and HS) in the region reported they had at least one close friend who had committed to being drug-free in the past year, remaining relatively stable at 74% in 2022.

Family Dynamics: In 2020, 84% of MS students reported they could ask their mom or dad for help with a personal problem, remaining relatively stable at 83% in 2022.

Family Communication: In 2020, 67% of MS students reported that their parents had ever talked to them about their expectations regarding alcohol and other drugs, remaining stable in 2022 at 68%.

Life Stressors: In 2020, 28% of MS students reported depression in the past year increasing to 30% in 2022. Among HS students, in 2020, 18% reported having seriously considered suicide in the past year, increasing to 20% in 2022.

PERCEPTION OF RISK

Increase awareness of risks among elementary & middle school aged youth

Regional Strategies:

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Educate elementary and MS students about immediate and long-term effects of alcohol and other drug use through youth and family programming.	✓	✓	✓	✓	✓		✓
Peer refusal skills training of high school students. In addition, presenting this training to younger students as well as peer counseling.		✓	✓ FY22		✓		✓
Provide Drug Risk Teaching Toolkit to teachers to provide relevant content on the risks of youth substance abuse.		✓					✓
Participate in national awareness weeks to promote true alcohol facts and educate youth on the risks of underage drinking (i.e. National Drug Facts Week, Red Ribbon Week, etc.)	✓	✓	✓ FY22	✓	✓	✓	✓

Local Programming:

• Allegan County

- OnPoint In FY 22, created a 15-minute video on the effects of vaping on the body and shared with middle schools (MS). Otsego MS participated in Red Ribbon Week in FY21 and 22. In FY22, Fennville also participated. During these weeks, resources and promotional items were distributed.

• Kent County

- AC: Presentations on recognizing risk factors/behaviors. Groups on decision-making and learning ways to identify activities that have a positive impact. Risk information is incorporated into the Total Trek Quest program for MS students.
- FOC: Used PALS curriculum to teach about the effects of ATOD, inc. refusal skills. Worked to increase community partnerships and expanding service sites in FY22.
- KCHD: Elementary, MS, and HS LifeSkills Trainings, Yo Puedo Program provides ongoing education during school year, Juvenile Detention LifeSkills Training, and Girl's Court Programming.
- N180: All strategies incorporated in the ATI mobile experiences. Youth Summit, Mobile Pop Up via prevention on wheels; Classroom Mobile Experiences; ICreate Art Prize; ATI Chronicles, and Faith Based Experience.
- WW: Project SUCCESS includes lessons on the effects of alcohol and other drugs as well as strategies for saying no to alcohol and drugs and is provided to MS and HS based on needs. Promoted Red Ribbon Week and National Drug Facts Week. In FY22 after school prevention programming with focus on employment training was delivered to 45 youth from middle and high school, alternative schools, probation, and local clinical service participants.

• Lake County

- D10HD: Red ribbon mailer promotion. Info distributed as part of a toolkit for parents and kids.

PERCEPTION OF RISK

Local Programming, continued:

- **Mason County**
 - D10HD: Provided education to students caught vaping. Shared info on social media for National Drug Facts Week. Summer media campaign educating youth on risks of underage drinking.
- **Muskegon County**
 - AC: Provided Strengthening Families Program (SFP 10-14) and booster session, includes risks of SUD in youth portion. Total Trek Quest program educates youth on the risks of substance use.
 - PHMC Muskegon: Prime for Life, LifeSkills, and working with ALI coalition on national awareness week.
- **Oceana County**
 - D10HD: Promoted posts for youth on social media to promote national drug facts week. TOPPC youth committee implemented a vaping presentation with MS students including refusal skills.
- **Ottawa County**
 - AC: Info about risks of alcohol and other drug use through TTQ and SFP 10-14. Updated and promoted virtual DRTT and in FY22 incorporated a video on mental health skills. Promoted National Drug Facts week, Red Ribbon Week and Prevention week. In FY22 provided Raise Your Voice in 2 schools, training 22 HS students who then presented to 1,000 MS students.
 - OCDPH: Vape Education classes and Prime for Life for MS and HS students, including peer refusal and risks.

POSITIVE PEERS

Support youth in developing relationships with positive peers.

Regional Strategies:

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Peer refusal skills training of HS students. Inc. training younger peers and peer counseling.	✓ FY22	✓					✓
Youth leadership opportunities to develop leadership skills and provide opportunities for projects, including Annual Youth Summit.		✓				✓	✓
Project Success- School wide awareness & community outreach activities inc. alcohol free activities, campaigns to increase awareness & student-developed, pro-social messaging.		✓					
Yo Puedo Program - Recruitment of high-risk youth, visits to local universities, community service projects and recreational activities.		✓					
Strong Voices. Bold Choices - Youth promote messaging to peers		✓					

Local Programming:

- **Allegan County**
 - OnPoint: In FY22, began implementing a peer refusal skills curricula.
- **Kent County**
 - AC: Presentations provided to MS and HS youth on how to identify mental health red-flags and seek help and support. Presentations targeted to youth who identified that mental health concerns were connected to poor decision making and unhealthy behaviors.
 - N180: Mobilization of thousands of youth via the creation and advancement of the Above the Influence (ATI) -Kent County movement which celebrates the choices youth make daily to live above negative influences around them. Through ATI, the coalition creates spaces for even the most vulnerable to use their voice to make a difference.
 - WW: Student input is sought each year in planning school awareness campaigns encouraging youth leadership opportunities. School-wide awareness campaigns beyond Red Ribbon Week and National Drug Fact Week included Skills for Success at school, and social media safety.
- **Oceana County**
 - D10HD: Hosted TOPPC youth meetings and youth participated in community service projects and attended the Youth Summit, leading the icebreaker and an activity.
- **Ottawa County**
 - AC: Continued to provide the SLIC youth coalition with meetings once a month. Provided monthly youth leadership trainings on various topics of interest to youth.
 - OCDPH: Prime for Life taught to MS and HS students.

FAMILY DYNAMICS

Parent education and skills training.

Regional Strategies:

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Parenting Skills programming					✓		✓
Parent workshops on how to identify and respond to drug use.	✓	✓			✓ FY22		✓
Teach communication skills and how to prevent substance use and promote healthy choices.	✓	✓		✓			
Coordinate a collaborative committee to plan and implement enhanced parenting services and supports.	✓		✓	✓	✓		✓

Local Programming:

- **Allegan County**

- OnPoint: Promoted virtual teen room as a resource for parents and continued to promote in FY22 through newsletters, open houses and other events. A video was created and distributed to schools to use with staff and parents on current trends which was promoted in FY21 and FY22. Parent resource training from the national traumatic stress network, was provided in collaboration with Great Start.

- **Kent County**

- AC: Groups with MS and HS youth on healthy relationships and building positive, pro-social communication skills.
- KCHD: Parent programming was conducted for Girl's Court groups. In FY22 Yo Puedo parent groups were also provided.
- N180: Annual Lunch & Learns and Family Day activities
- WW: Parent workshop on current trends in substance use, how to recognize a problem, talking to your child about substance use and resources for help. A video encouraging healthy communication with teens was developed for parents. In FY22 two virtual parent workshops were provided that include current trends, how to recognize and respond to youth substance use, and how to talk to your child about substance use. In addition, an in-person workshop was offered on social media safety and a video about social media safety was promoted to parents.

- **Lake County**

- D10HD: An ACEs committee was established as part of the prevention coalition. Presentations and resources were shared with healthcare provider providers, community health workers and board members from Children's Trust Fund and community members.

FAMILY DYNAMICS

Local Programming, continued:

- **Mason County**
 - D10HD: Parent prevention packets shared through community partners (ex. libraries). Coordinated with great start collaborative to plan parent/family events.
- **Muskegon County**
 - AC: Provided the SFP 10-14 program, Nurturing Parenting Program, and 24/7 dads' programs. Provided a virtual parenting program similar to Circle of Parents bi-weekly. Coordinated collaborative with the Muskegon Parents' Initiative to increase parent education and support. Distributed interactive vaping graphic and virtual teen room to educate on signs and symptoms. Began offering Conscious Discipline skills in FY22.
 - MCHP: Provided 2 Hidden in Plain Sight presentations in two schools in FY22.
 - PHMC: Offered Parent Cafes, facilitated Fathers Matter Collaborative; participated in Muskegon Parenting Collaborative activities. During FY22 worked with released offenders through the EXIT program and Fresh Coast Alliance program to provide parenting skills. Also used the Dad Movement Podcast to promote and reinforce positive parenting skills.
- **Ottawa County**
 - AC: Provided the SFP 10-14 program, Nurturing Parenting Program, and 24/7 dads' programs. Provided a virtual parenting program similar to Circle of Parents bi-weekly. Coordinated collaborative with Ottawa County SCAN Council that works to increase parent education and support. Creation of a digital interactive Vaping Graphic and interactive virtual teen room to educate parents on signs and symptoms, also a parent education video series. Began offering Conscious Discipline skills training for parents in FY22.

FAMILY COMMUNICATION

Encourage parent communication regarding substance use.

Regional Strategies:

Promoted Talk Sooner Campaign to educate parents on the consequences of teen use, how to talk to their youth about the consequences through community events, social media, lunch and learns, and newsletters.

Had Family Meals Month to promote TalkSooner & family communication.

Provided info to parents at community events on how to talk to their kids.

	Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
Promoted Talk Sooner Campaign to educate parents on the consequences of teen use, how to talk to their youth about the consequences through community events, social media, lunch and learns, and newsletters.	✓	✓	✓	✓	✓	✓	✓
Had Family Meals Month to promote TalkSooner & family communication.	✓	✓ FY21	✓	✓ FY21		✓	✓
Provided info to parents at community events on how to talk to their kids.	✓	✓	✓	✓	✓	✓	✓ FY22

Regional Efforts:

TalkSooner.org

brought to you by Lakeshore Regional Entity

The regional TalkSooner campaign continued in FY21 and FY22. This campaign, developed in 2007, encourages parents of youth ages 10-18 to begin talking to their children about alcohol and other drugs at an earlier age. Marketing materials direct parents to visit the locally managed Talksooner.org website and to download the app on their smartphone. The campaign has continued to expand with more than 30 counties throughout Michigan participating.

TalkSooner is also used as a platform to promote Family Meals Month. This nationwide event is designed to underscore the benefits of family meals and help families share one more meal at home per week.

The LRE and prevention providers work collectively to promote Family Meals Month, host local events and develop regional promotional materials to support local efforts and to promote TalkSooner & family communication and involvement.

FAMILY COMMUNICATION, CONTINUED...

TalkSooner Campaign: FY21

During FY21, TalkSooner.org was visited 210 times, by 98 unique individuals resulting in 558 page visits. The average session duration was 1 minute and 45 seconds and the most frequently visited page was the 'What's Trending?' page.

- Homepage updated to include a new cover image and promote testimonials.
- Social posts on Facebook promoted the partnership between local healthcare providers, educators, law officials, and other community members with TalkSooner. Over a dozen posts with individual testimonies were shared.
- Partnered with mParks and the Michigan DNR to place promotional materials at ten Michigan parks, 77 rest stops, and 14 MDOT Welcome Centers. The posters will remain displayed indefinitely.



Media Coverage and Partner Shares

In addition to the paid promotion the following free coverage was received through media coverage and promotion by partner organizations.

- Cherry Health publicly shared its partnership with TalkSooner.
- Interview ran on WGVU news radio with a supplemental web story.
- Interview including a pediatrician at Metro Health – University of Michigan Health – with Channel 17's WXMI.
- Priority Heath published a 'Think Health' article on website promoting TalkSooner.
- WOODTV/Channel 8 and WGVU Morning Show published stories regarding National Drug Take Back Day.
- WILX News in Lansing, and Fox 17 News ran stories about TalkSooner partnership with MDNR/mParks.
- MDOT issued a news release announcing its partnership with Talksooner.
- Channel 13/WZZM aired public service announcements regarding Family Meals Month, and a sponsored Facebook article and banner ads on their website.
- Michigan State Parks distributed an e-newsletter to 595,047 people with article about TalkSooner resulting in 99 visits to the site.



FAMILY COMMUNICATION, CONTINUED...

TalkSooner Campaign: FY22

During FY2, Talksooner.org and the Lakeshore Regional Entity teamed up with Maranda from WOTV 4/WOOD-TV/Channel 8 to bring an original streaming “series” of mini segments on the “Truth About Teen Vaping” to West Michigan.

The series ran from April 18 through April 22, with a special all-day streaming on 4/20/22. Maranda canvassed all seven counties, interviewing more than twenty-five teens, parents, prevention specialists, principals, physicians, a prosecutor and more.

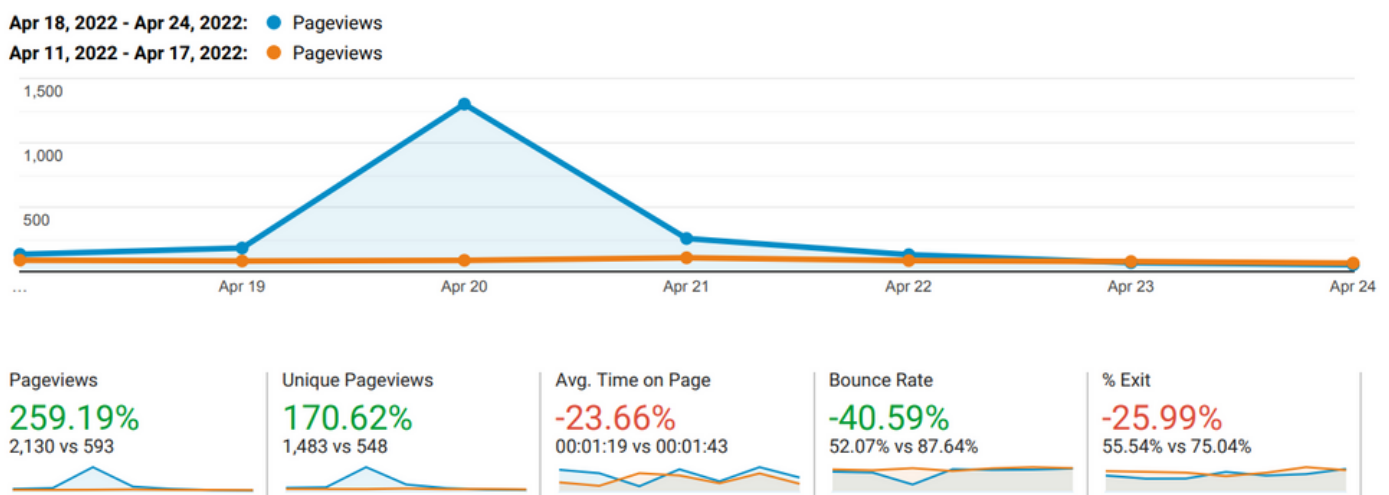
These segments continue to be available via: [Watch: Talk Sooner anti-vaping program](#)

Among visitors during the campaign week the majority were from Norton Shores (25%), followed by Grand Rapids (10%), Grand haven (4%), Wyoming (3%), and Allegan (2%).

Throughout the five-day campaign push, website traffic increased from an average of 104 users the previous week to an average of 196 users per day during the campaign. In addition, the bounce rate decreased indicating that more people were navigated beyond the homepage to explore the content, tips, and information TalkSooner has to offer.



Website traffic analysis during the campaign, compared to the prior week is summarized below:



FAMILY COMMUNICATION, CONTINUED...

Local Programming:

- **Allegan County**
 - OnPoint: During FY21 and FY22 all events (virtual and in-person) are promoted along with TalkSooner resources and materials. Virtual promotion of Family Meals Month via flyers and social media was also conducted.
- **Kent County**
 - AC: During FY22 began promoting TalkSooner throughout prevention programming.
 - FOC: Disseminated TalkSooner brochures during resource fairs and community events and spoke to parents on how to talk to their kids about drugs and alcohol.
 - KCHD: In FY22 coordinated a youth vaping event with local news personality emceeding; event was offered in-person, streamed live, and was available for streaming 3 weeks following the event. The recording was watched approximately 750 times. TalkSooner info was promoted throughout the event and also included in all parent programming.
 - Network 180: In FY21 promoted via the region's TalkSooner marketing implementation plan.
 - WW: Information about the TalkSooner website and app is always included in parent presentations and community resource fairs that we participate in.
- **Lake County**
 - D10HD: Social media posts on TalkSooner. Family meals month promoted with bag giveaway. Partnered with food pantry and also Spectrum Health's Veggie Van on events. Toolkits provided at local library included TalkSooner information. TalkSooner info shared at various community events.
- **Mason County:**
 - D10HD: Promoted TalkSooner campaign and Family Meals Month by providing info to parents at community outreach events. Partnered with local food pantry in FY22 to hand out prevention packets, including a family baking activity. In FY22 created family friendly 'escape the vape' portable escape room where families work together to solve riddles while learning about the risks of vaping.
- **Muskegon County**
 - AC: Provided TalkSooner information to families at all events and programming.
 - PHMC: In FY21 promoted TalkSooner at all outreach events. Worked with Fathers Matter collaborative membership at outreach events to assure awareness of resources in the community.
- **Oceana County**
 - D10HD: TS included in all community outreach, social media efforts were implemented, and partnered with Shelby Public Schools for family meals month in FY21 and the county's annual coat drive in FY22. Provided bags with educational materials during a local food distribution event.
- **Ottawa County**
 - AC: Promoted TalkSooner through our OSAP Digital Ecosystem (communication platforms), youth and parenting programming, and at community events. Promoted Family Meals Month through local food pantries, other organizations working on food insecurity, and OSAP Coalition.
 - OCDPH: TalkSooner is promoted on Marijuana lock bag information sheets and as a resource provided to parents during the Vape Education class.

LIFE STRESSORS

Develop coping and refusal skills.

Regional Strategies:

Disseminate educational prevention material at community events.

Youth education and early intervention programs that teach refusal skills, social emotional skills, and encourage healthy choices.

Train students to provide support/mentoring to other students.

Allegan	Kent	Lake	Mason	Musk.	Oceana	Ottawa
✓	✓			✓	✓	✓
✓	✓			✓		✓
✓ FY22	✓	✓ FY21				

Local Programming:

During the pandemic, youth experienced enhanced stressors that exacerbated mental health issues. Providers and coalitions throughout the region expanded efforts to support youth and their families to enhance coping skills and promote resiliency.

• Allegan County

- OnPoint: Educational materials for suicide prevention were disseminated at every parent event, school open houses etc. The Early Risers after school and summer program was conducted at Fennville Elementary. PAL's program completed at 5 schools each year.

• Kent County

- AC: School groups and after-school programming on social skill building, relational aggression, positive peer relationships, and healthy life skills. ABC groups focused on decision making and caregiver-child relationships to reduce delinquent behaviors.
- FOC Kent: Youth leadership programming included strategies for making good choices and peer pressure. In FY22 used the PALs curriculum in area after school programs which incorporates leadership as well as social-emotional skills building and making healthy choices.
- KCHD: MIP Diversion Program offered monthly to youth referred by the courts.
- N180: ATI Kent County. Youth Mental Health First Aid.

• Muskegon County

- AC: Total Trek Quest teaches peer refusal skills, coping skills, and how to make healthy choices.
- PHMC: Offered Mental Health First Aid and QPR trainings.

• Oceana County

- D10HD: TOPPC youth group conducted a community service project with outreach on suicide prevention.

• Ottawa County

- AC: Provided suicide prevention info at events and assisted the Ottawa County Suicide Prevention Coalition in sending a mass mailing to every home in the county in FY21. Coordinated Building Resilient Youth who attend events and promotes suicide prevention info. Provided QPR Presentations to youth and adults. Coordinated a youth mental health first aid training. In FY22 provided peer refusal skills presentations to HS students and produced 24 youth-driven videos on mental health promotion skills.
- OCDPH: Addressed within Prime for Life programming.

Attachment A

Lakeshore Regional Entity, Prevention Metrics Tracking FY21 thru FY24

The following provides a summary of indicators targeted by Lakeshore Regional Entity, substance abuse prevention in the counties of Allegan, Kent, Lake, Mason, Muskegon, Oceana, and Ottawa. Unless otherwise specified, regional data was calculated using results from the Michigan Profile for Healthy Youth, Ottawa County Youth Assessment Survey, and Lake County Youth Survey. 'HS students' include 9th and 11th grades, with the exception of Ottawa County which includes 10th and 12th. 'MS Students' includes 7th grade, with the exception of Ottawa County which includes 8th grade.

Childhood and Underage Drinking	Progress Tracking				% Change
	2018	2020	2022	2024	
% HS students reporting recent alcohol use	16.6%	16.1%	16.1%		↓ 3%
% HS students reporting it would be easy to get alcohol	57.9%	58.8%	57.8%		~
% HS students report binge drinking is low risk	29.4%	29.2%	30.4%		↑ 3%
% HS students reporting 50% of peers drank in past month	31.9%	26.6%	28.7%		↓ 10%
Underage Marijuana Use	Progress Tracking				% Change
	2018	2020	2022	2024	
% HS students reporting recent marijuana use	13.8%	14.3%	11.9%		↓ 14%
% HS students reporting it would be easy to get marijuana	45.2%	46.7%	42.8%		↓ 5%
% HS students reporting marijuana use is low risk	55.0%	55.0%	55.2%		~
Underage Tobacco Use	Progress Tracking				% Change
	2018	2020	2022	2024	
% HS students reporting recent cigarette use	4.5%	2.9%	1.8%		↓ 60%
% HS students reporting recent vaping	24.1%	18.9%	14.0%		↓ 42%
% HS students reporting it would be easy to get cigarettes	44.5%	38.5%	20.3%		↓ 54%
Maintain formal Synar non-compliance (fail) rate at ≤20%	2.9%	9.5%	7.9%		↑ 172%
% HS students reporting smoking cigarettes is low risk	17.8%	18.0%	16.8%		↓ 6%

Prescription Drug Misuse	Progress Tracking				% Change
	2018	2020	2022	2024	
% HS students reporting recent misuse of Rx painkiller	3.7%	3.3%	2.6%		↓ 30%
% HS students reporting recent misuse of Rx stimulant	3.3%	3.1%	2.6%		↓ 21%
% HS students reporting using a Rx drug w/out Rx is low risk	22.0%	21.3%	20.9%		↓ 5%
Opioids	Progress Tracking				% Change
	2018	2019	2020	2021	
# Opioid related overdose deaths (MI-SUDDR)	123	145	189		↑ 54%
Rate Opioid related overdose deaths per 100k residents	11.1	12.7	14.4		↑ 30%
Opiate prescriptions written, rate per 10,000 residents (MI-SUDDR)	70	74	70		~
Early Initiation of Substance Use	Progress Tracking				% Change
	2018	2020	2022	2024	
% HS students reporting alcohol use of before age 13	9.1%	9.6%	10.8%		↑ 19%
% HS students reporting marijuana use before age 13	4.3%	4.4%	3.5%		↓ 19%
% MS students reporting marijuana use is low risk	38.2%	41.0%	39.9%		↑ 4%
% MS students reporting Rx misuse is low risk	24.2%	25.7%	23.3%		↓ 4%
% MS students reporting binge drinking is low risk	30.7%	31.9%	29.1%		↓ 5%
% MS/HS students reporting at least one best friend committed to being drug free (exc. Lake and Ottawa)	72.8%	72.1%	74.2%		↑ 2%
% MS students could ask parents for help with a personal problem	85.4%	83.5%	82.7%		↓ 3%
% MS student's family have talked to them about alcohol or other drugs	69.8%	67.4%	67.7%		↓ 3%
% MS students reporting depression in past year*	25.0%	28.0%	30.2%		↑ 21%
% HS students who seriously considered suicide, past year*	20.5%	17.7%	20.1%		~

* There are many efforts other than those within this plan working to address mental health issues. This plan is a component of larger community efforts to address this complex issue.



GAMBLING DISORDER PREVENTION PROJECT

SUMMARY OF ACTIVITIES

FY22 UPDATE

A summary of activities for the Gambling Disorder Prevention Project in the LRE region during FY22.



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Background

The Michigan Gambling Disorder Prevention Project (MGDPP) of the Lakeshore Regional Entity (LRE) is funded by the Michigan Department of Health and Human Services (MDHHS), Behavioral Health and Developmental Disabilities Administration. Funds that support this project are provided exclusively from the Compulsive Gaming Prevention Fund.

With these funds, the LRE uses the strategic planning framework (SPF) to enhance capacity throughout the region to address problem gambling. The state partners with pre-paid inpatient health plans (PIHP) for this project because individuals experiencing gambling disorder (GD) have been found to present with a broad range of co-occurring behavioral health disorders.

The state-intended purpose of MGDPPs is to increase Gambling Disorder (GD) awareness, promote treatment, and reduce GD among youth, young adult, and adult populations.

The LRE periodically conducts a needs assessment related to problem gambling in the region which is used to inform development of a regional strategic plan to prevent and reduce gambling disorders in the region. The most recent needs assessment was completed in 2021 and results were reviewed at a regional meeting resulting in an updated strategic plan for FY22 - FY27. The most recent needs assessment can be found [here](#).











FY22 Highlights

During FY22, the LRE utilized the Strategic Prevention Framework to organize the work of this project with provision of the following services:

- Supported five local provider projects to address prevention and treatment for gambling disorders in the LRE region with allocations totaling \$193,148 in FY22.
- Conducted a regional marketing campaign with the goal of educating seniors, parents, and young men (18-25) on the warning signs of problem gambling. This campaign was designed to target audiences that interact with populations that are at high risk of gambling disorder (GD).
- Maintained a regional youth gambling prevention curriculum used by local providers in Kent, Lake, Mason, and Oceana Counties.
- Offered scholarships for clinicians to attend the National Conference on Problem Gambling.

Strategic Plan At-a-Glance

The table below provides an overview of objectives and strategies in the strategic plan with a summary of activities during FY22.

 Objective	 Strategies	 FY22 Activities
Improve treatment availability for individuals with a gambling use disorder	<ul style="list-style-type: none"> • Provide scholarships for GD training among SUD clinicians to address problem gambling. • Advocate for integration of GD Tx with other behavioral health Treatment to ensure coordination of care. • Decrease stigma for problem gambling so individuals will seek help. • Assess reimbursement levels for publicly funded GD Treatment; advocate for parity with other behavioral health services. • Partner with SUD providers to identify problem gambling among the clients served and address within treatment plan. • Increase availability of self-help groups/support groups for individuals that have gambling disorder and their families. Explore possibility of online groups. 	 <ul style="list-style-type: none"> • Provided scholarships for GD Tx symposium • Promoted resources for best practices and trainings with clinicians in the LRE provider network. • Advertised resources and support groups for individuals with GD in the region.
Improve identification and referral to treatment for gambling disorders	<ul style="list-style-type: none"> • Increase public knowledge of how to identify when someone may be developing a gambling problem. • Provide tools, resources and training to assist lottery retailers in identifying and providing resources to individuals demonstrating signs of GD. 	 Articles and media campaign focused on how to ID when someone may be developing a problem.
Prevent problem gambling among adults	<ul style="list-style-type: none"> • Raise community awareness of the risks of gambling, strategies to reduce risk, and actual likelihood of 'winning'. • Partner w/ gambling venues to provide info to consumers on strategies to reduce risk and risk factors for gambling problems. 	 News stories focused on community awareness about risks of gambling and strategies to reduce risks.
Prevent problem gambling among youth	<ul style="list-style-type: none"> • Educate parents about the risks of on-line gambling and how to support their youth in avoiding risky behavior. • Educate youth on gambling risks and to off-set 'magical thinking'; incorporate into other programming and curricula. 	 Youth prevention curricula delivered in Kent, Lake, Mason, and Oceana counties. Mlive campaign and press coverage ts to educate parents about risks of online gaming. LRE website has a dedicated section for parent education.
Prevent problem gambling among the senior population	<ul style="list-style-type: none"> • Raise awareness among seniors of risk factors for developing a problem with gambling and strategies to reduce risk. • Promote availability of 'day-trips' for seniors for outings other than gambling. 	 Mlive campaigns focused on seniors about risk factors for gambling + reducing risk.
Support locally developed planning to ID culturally appropriate solutions	<ul style="list-style-type: none"> • Empower counties to develop and implement solutions specific to their culture and community. • Conduct research to understand beliefs surrounding gambling among specific cultural groups to guide development of effective messaging. 	 No activities during FY22 due to no provider requesting to conduct these efforts.
Promote advocacy for gambling related issues	<ul style="list-style-type: none"> • Advocate for warnings to be required for gambling materials and on-line pop-ups. • Advocate for policies that would delay youth exposure and reduce access to gambling. 	 No activities during FY22

Regional Initiatives

MARKETING CAMPAIGN

A regional marketing plan was developed in partnership with MLive Media Group throughout FY22. The media campaign was designed to reach:

- Young men (18-25): To educate on gambling responsibly.
- Parents: To raise awareness about risks that youth face with online gambling.
- Older Adults: To provide resources and increase awareness of the warning signs of problem gambling.



Educational articles

One component of the MLive partnership was partnering with local media to garner the following educational articles about gambling. Underlined text indicates a hyperlink to the news coverage online.

 Reduce risk of GD	3/22	El Vocero Hispano, Times Indicator	Fox 17
 Reduce risk of GD	3/22	<u>Michigan's Gambling Industry Grows, Experts Advise Responsible Gambling</u>	News Channel 3
 What Tx looks like	5/22	<u>Understanding Gambling Disorders - Stay Outta the Danger Zone</u>	Positively Muskegon
 Parent education	5/22	<u>More Michigan Kids Experience Problem Gambling Experts Warn</u>	News Channel 3
 Support for GD	7/22	<u>Local Group Hopes \$1.1B jackpot can start conversations about gambling</u>	WZZM 13



Digital Ads

Digital ads were created on Mlive.com and shared across networks to raise awareness about GD and directed individuals to <https://www.lsre.org/stayouttathedangerzone> for additional resources and education.

MLive utilized Geofencing, which is a location-based tool to reach individuals visiting the 25 identified locations within the region. The chosen locations were at gas stations, convenience stores and grocery stores as all three of these locations are distributors of lottery tickets.



Gas station



Grocery store



Convenience Store

1. <https://muskegonchannel.com/muskegon-metro-area/2010-understanding-gambling-disorders-stay-outta-the-danger-zone>

CLINICIAN SCHOLARSHIPS

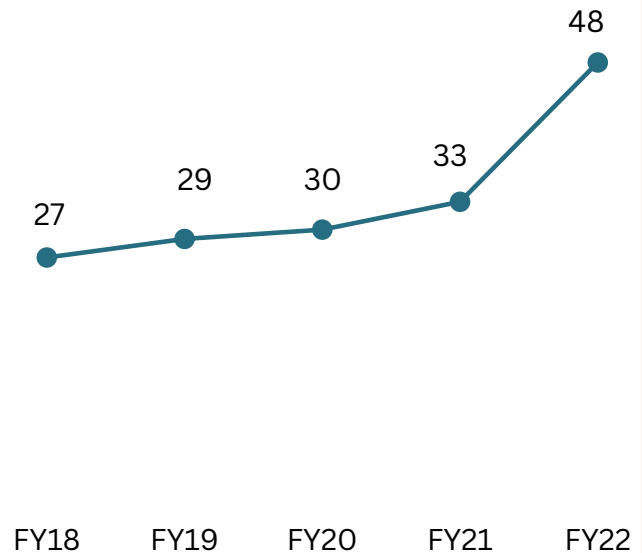
Publicly funded treatment services for problem gambling in Michigan are coordinated by the Michigan Department of Health and Human Services (MDHHS). A state-wide helpline serves as the point of access for publicly funded gambling disorder treatment. Callers are screened and those determined to need treatment (who do not have private insurance which covers gambling disorder treatment), are referred to the nearest provider under contract with MDHHS.

To improve access to GD treatment, the LRE has encouraged the pursuit of gambling specialization for clinicians as well as screening for individuals seeking SUD treatment.

In previous years, the LRE provided scholarships for interested clinicians within the Substance Use Disorder (SUD) treatment system to complete the required training to serve on the state panel as a GD Provider. Due to this effort, GD clinicians in the LRE region increased substantially. Treatment admissions for residents of the region have increased in recent years with 48 publicly funded treatment admissions in FY22.

During FY22 the LRE offered scholarships for clinicians to attend the National Conference on Problem Gambling. Due to low interest this will be discontinued in FY23 and the LRE will promote other available trainings in the state that are available to clinicians.

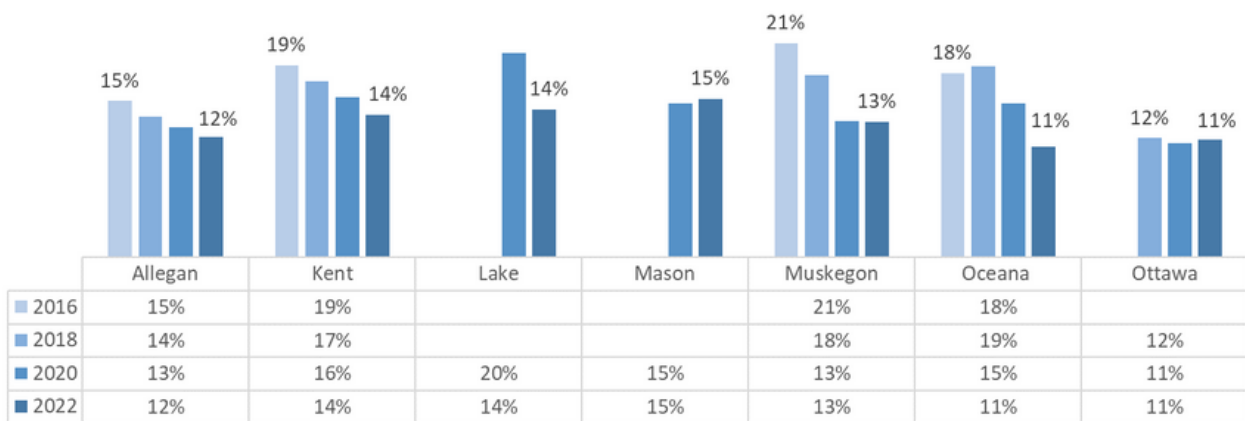
Number of Publicly Funded GD Treatment Admissions, Residents of LRE Region



YOUTH PREVENTION

Another focus of regional efforts is to prevent youth gambling. As shown in the chart below, rates of recent gambling among high school (HS) students have been declining for most counties in the region, ranging from a low of 11% in Ottawa and Oceana Counties to a high of 15% in Mason County.

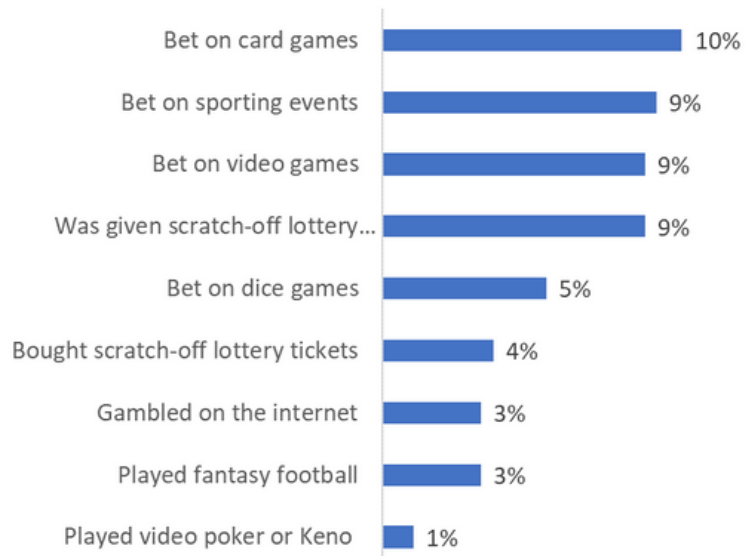
High School Students that Report Placing Bets or Gambling in the Past 30 days by County



Among the 247 students who participated in a prevention program using the youth gambling curriculum, 25% reported they had done at least one type of placing bets or gambling in the 30 days prior to programming. The type most frequently reported was betting on card games (10%), followed by betting on sporting events, video games, and being given scratch off lottery tickets (9% each).

Many video games offer players the opportunity to purchase loot boxes containing unknown prizes. Because of the unknown outcome, loot boxes have been likened to gambling and there is growing concern that they may increase future propensity for gambling. Among students participating in GD prevention programming, 7% reported having purchased in-game loot boxes in the 30 days prior to programming.

Percent of Students reporting they had done the following in the Past 30 days at First GD Lesson



Prevention Curricula

To support the region's local providers in offering programming to youth, a two-lesson GD prevention curriculum was developed in 2019 for use with middle and high school students and has been approved for use by the Michigan Department of Health and Human Services (MDHHS). The curriculum covers the basics of gambling as well as what is currently legal in Michigan. An overview of gambling is included as well as information about how to get help for gambling disorders. Parent letters are included as a resource which covers gambling as well as gaming issues.

The Prevention Coordinator provides support regarding the curriculum. During FY22, this included working to update an educational video used in the curriculum on the potential risks of gambling.

To monitor the effectiveness of this curricula, a regional on-line pre and posttest questionnaire is maintained to assess improvements in the knowledge and attitudes that the curriculum seeks to impact.

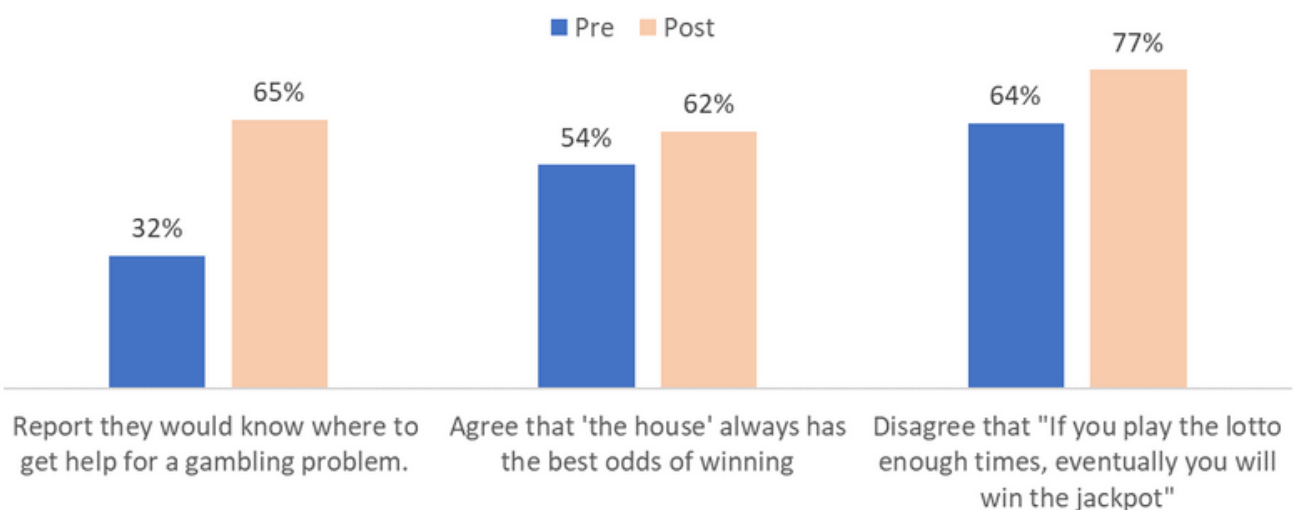
During FY22, the region has collected 247 pretests and 229 posttests representing youth from Kent, Lake, Mason, and Oceana counties. Participants age 11-13 made up 57% of respondents, while participants age 14-17 made up 36% of participants.

Among youth participants, between pre and posttest, there was a:

- 103% increase in participants reporting they would know where to get help for a gambling problem.
- 15% improvement in youth reporting that the 'house' always has the best odds of winning.
- 20% in youth correctly disagreeing with the statement 'if you play the lotto enough times you will eventually win the jackpot'.

Detailed results for FY22 are provided in Attachment A

Pre vs. Post Test Results, LRE Region FY22



Local Initiatives

Each year the LRE puts out a request for proposal for local providers to apply for funds to implement projects to address objectives and strategies found in the strategic plan. Five applications were submitted for FY22, and each was approved for funding.

ARBOR CIRCLE

Arbor Circle incorporated gambling curriculum into **all** youth and parent substance misuse prevention education programming this past year in Ottawa County and Muskegon County.

- Youth ages 10-14 in the Strengthening Families Program received peer refusal education about gambling. Their parents also received resources for problem gambling during their session.
- The Nurturing Parent Program provides gambling prevention information to parents in the program.
- Total Trek Quest has educated several students throughout the year about gambling education.
- Gambling was incorporated into Raise Your Voice curriculum for Middle School and High School students.
- OSAP launched parent education videos about gambling. Both received 63 views and 71,000 impressions.

DISTRICT HEALTH DEPARTMENT #10

District Health Department 10 developed existing relationships with schools to provide gambling education and fostered new relationships in order to provide this education to middle school and high school students within the area.

- Worked with middle schools and high schools in Lake, Mason and Oceana Counties to share about prevention programming. Shelby High School is scheduled to begin the gambling curriculum in FY 23.
- Gambling educational materials were shared at county fairs, back to school nights, and other community events.
- Developed a social media ad educating the community about gaming and gambling. The ad directed the person to a page on the DHD10 website dedicated to problem gambling. This [webpage](#) provides information on the warning signs of gambling and where to access support. The ad reached 23,776 people within the community and 1,101 people clicked to the webpage for more information.
- Presented to senior centers about the risk of gambling.

FAMILY OUTREACH CENTER

Family Outreach Center provided youth gambling prevention education in Kent and Ottawa County.

- Facilitated group sessions about gambling for 81 participants in Kent and Ottawa counties.
- Shared gambling treatment and screening tools with clinicians in Kent and Ottawa counties
- Provided community-based gambling prevention trainings for youth and parents.
- Created and shared social media posts to raise awareness of the risks of gambling and information about a gambling course with opportunities to register.

PUBLIC HEALTH OF MUSKEGON COUNTY

Muskegon focused on raising awareness of gambling through social media and reaching out to adult and senior community members.

- Coordinated with Senior Perspectives, a local publication for seniors, to place an educational ad about gambling. 18,000 copies were published and distributed within the community.
- Ran four ads targeting adults from August - September 2022 to raise awareness about warning signs and resources to access help. Individuals that engaged with the ad were directed to stayouttathedangerzone.org. The Facebook ad reached 66,129 people with 87 individuals following the link to further resources.
- Resources and promotional items were distributed throughout the community at a variety of events.
- Ads for seniors were created and distributed in May for Older Americans Month. These were launched online and on paper through organizations that work directly with seniors.
- Messaging was created for Problem Gambling Awareness Month (March) to promote the LRE website for resources. This ad reached 928 people with 40 people that interacted with the ad and visited the website for further resources.



SALVATION ARMY

Salvation Army Turning Point is a local detox and short-term residential treatment facility for Substance Use Disorder (SUD) Treatment. They provided the following gambling resources to individuals served by their program during FY22:

- Recovery coaches discussed gambling habits with clients who are pursuing treatment for SUD at the program.
- Concerns identified regarding gambling are elevated to the individual's treatment clinician.
- At discharge, the case manager refers individuals to local gamblers anonymous support groups as appropriate.

Salvation Army has found that discussing gambling issues during SUD treatment and referring individuals to additional resources can be well received. The program has found that a common conversation staff often has with clients is that one dependency can often be substituted for another and sobriety requires replacement with healthy habits.

484 total responses

229 post-test responses

Demographics



Response type	Number of responses
Pre-test	247
Post-test received one lesson	118
Post-test received both lessons	111

Respondent County of residence	Pre-test	Pre-test #	Post-test %	Post-test #
Kent County	28%	68	24%	56
Lake County	30%	74	32%	73
Mason County	27%	66	27%	62
Oceana County	16%	39	17%	38

⊛ No questionnaires were completed for youth from Allegan, Ottawa, or Muskegon Counties in FY22.

Participant Age	Pre-test %	Pre-test #	Post-test %	Post-test #
11-13	57%	142	59%	135
14-17	37%	92	35%	81
Did not answer	5%	13	6%	13

Participant gender	Pre-test %	Pre-test #	Post-test %	Post-test #
Female	51%	125	54%	124
Male	38%	93	33%	75
Other/prefer not to say	5%	13	7%	16
Did not answer	6%	16	6%	14

Student quiz results



Students report that they 'disagree' or 'strongly disagree' with the following statements:	Pre-test %	Pre-test #	Post-test %	Post-test #	% Change
Gambling is a fun way to spend time with friends and family	63%	155	69%	159	10%
A person can't become addicted to gambling	82%	202	85%	194	4%
There is no harm in gambling as long as you have the money to spend	72%	178	70%	161	3%

Students who answered the following quiz questions correctly	Pre-test %	Pre-test #	Post-test %	Post-test #	% Change
When gambling, the 'house' (e.g., a dealer at a casino) always has the best odds of winning.	54%	134	62%	142	15%
If you play the lotto enough times, eventually you will win the jackpot.	64%	158	77%	177	20%
Would know where to get help if I, or someone I knew, had a gambling problem.	32%	79	65%	148	103%
Online betting is legal in MI for adults only.	67%	165	75%	172	12%
Gambling doesn't just involve winning or losing money. People could gamble material things like jewelry or clothes or even doing someone else's chores.	83%	205	88%	202	6%

Students who report that the following would be considered gambling:	Pre-test %	Pre-test #	Post-test %	Post-test #	% Change
horse racing	56%	134	78%	174	40%
games with dice	68%	164	84%	187	23%
card games	67%	161	80%	178	19%
50/50 raffle to raise money	48%	115	77%	172	62%
purchasing loot boxes in a video game	27%	66	69%	154	152%
betting money on winner of a football game	78%	189	86%	191	9%
bingo	46%	112	72%	160	54%
slot machines	74%	178	87%	194	18%
fantasy football	32%	77	72%	161	126%
scratch off lottery tickets	71%	172	86%	192	21%
None of these could be considered gambling	4%	10	3%	6	35%



TalkSooner.org

Campaign Evaluation
Fiscal Year 2022

Introduction

This evaluation will review fiscal year (FY) 2022 campaign efforts and share TalkSooner website traffic data related to those efforts. Data will show an overall view of traffic throughout the FY and proceed into more detail for each traffic source and the user's location. Due to the media-heavy approach during this FY, data will include how those efforts influenced traffic to the TalkSooner website from users located in Michigan compared to all traffic globally.

Campaign Efforts and Media Coverage

- Throughout the fiscal year, TalkSooner produced six news alerts that go to all partners.



- On **December 30, 2021**, *Maranda* aired "What's Hiding in Plain Sight" – a story regarding the virtual teen room parents can tour to identify vapes and other substance concealment containers their teens may use.
- On **January 24, 2022**, WGVU News aired the story, "What's hiding in teens' texts; DEA and emoji codes." ²
- On **March 6 & 7 2022**, Vicki Kavanaugh received an invitation to present to approximately 100 Michigan Parks and Recreation Association community programmers and managers about TalkSooner.
- From **April 1 – April 20, 2022**, Various promotions begin for the WOOD-TV/Channel 8, *Maranda: Truth About Youth Vaping* special presentation.
 - Utilized two Lamar outdoor billboards
 - Printed and distributed 100 posters, 1,000 postcards, and wallet cards throughout April



- Delivered posters (20-25/location) to Fifth Third Bank, Muskegon County Courthouse, Spectrum Health Freemont, Kent County Health Department, and other outlets and partners.
- April 16-20, one of five different 5-minute video segments aired each day on WOOD-TV/ Channel 8, culminating in a 30-min live stream special on April 20.
- WOOD-TV created a TalkSooner page that “lives” on the WOOD-TV site into perpetuity. The vaping special continues to air throughout 2022 during community programming periods.

Special segments aired:

- **On April 19** – Eight West/Channel 8 aired a story about the April 20 full program, “Exploring the dangers of vaping with Talksooner.org”³
- **On April 20** – We strategically chose to air the full special on 4-20 or April 20 due to its long-term association as a day of marijuana consumption in popular culture; our goal was to try to change the narrative. Coverage included:
 - Maranda: Where You Live⁴
 - WOOD TV news story⁵
 - WOOD Newsradio
 - WOOD TV news story about the Maranda special⁶
- **On June 23**, WOOD TV aired a news story about the JUUL ban⁷
- From **August 4-October 15**, TalkSooner core team members traveled with the new TalkSooner-wrapped vehicle to each of the seven counties for various parades and events. Team members also distributed the wallet cards and posters at each event.



- **On September 1**, Big Rapid News covers story, “TalkSooner brings vaping education to West Michigan schools”⁸
- **On September 7**, WZZM News airs story “DEA warns Michiganders of ‘rainbow’ fentanyl targeting kids and young people”, with an interview from TalkSooner’s Vicki Kavanaugh.⁹
- Following the success of the vaping series, the Kent County Health Department (KCHD) partnered with Maranda and TalkSooner to develop a community conversation through an in-person and streaming event for September 2022. An in-person event was held at the KCHD on September 8 from 4:30 to 5:30 p.m., which included a live stream on YouTube and WOOD-TV Channel 8. Approximately 40 attendees participated in the in-person event on **September 8** event. Maranda emceed, and panelists included Carolyn Taylor, whose son is in long-term recovery, and Shelley Schmidt, M.D. As of November 2022, the KCHD reports more than 630 downloads of the program.¹⁰
 - **On September 2**, School News Network ran the story “Community invited to discussion on youth vaping” to promote the September 8 event¹¹
- **On September 26**, WOOD-TV aired “Opening the door for conversation at family meal time”, featuring TalkSooner’s trips across West Michigan to engage families in conversations at meal time¹²

Website Traffic Overview

Glossary of Terms

Page Views: The total number of times a page is view. This can include multiple the from the same user.

Reach: The number of individual people who saw at least one ad. Each person is only counted one time.

Sessions: The number of times a user visited and scrolled through a website. This can include the same person multiple times.

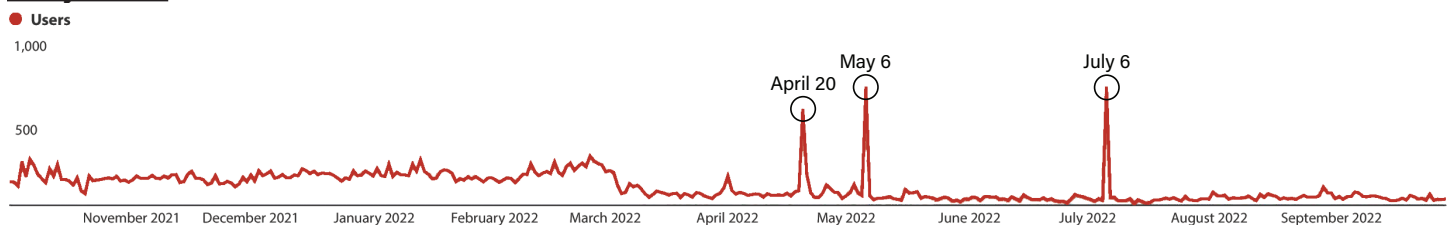
Users: The number of individual people who use an app or visit or website.

Monthly Traffic Breakdown

	Users (% New)	Sessions (Sessions/User)	Avg. Session	Page Views (Pages/Session)	Avg. Time on Page	Top Page (% of pageviews)
Oct. 2021	4,432 (90.4%)	5,329 (1.20)	00:00:57	7,475 (1.40)	00:02:21	Lean (Spanish) (21.91%)
Nov. 2021	4,327 (90.9%)	4,860 (1.12)	00:00:39	5,985 (1.23)	00:02:50	Lean (Spanish) (28.99%)
Dec. 2021	5,032 (92.5%)	5,812 (1.10)	00:00:32	6,920 (1.19)	00:02:47	Lean (Spanish) (24.77%)
Jan. 2022	5,000 (90.5%)	6,053 (1.21)	00:00:59	8,753 (1.45)	00:02:13	Lean (Spanish) (24.69%)
Feb. 2022	5,381 (91.9%)	5,948 (1.11)	00:00:40	7,268 (1.22)	00:03:02	Lean (Spanish) (31.91%)
Mar. 2022	2,471 (91.6%)	2,788 (1.13)	00:00:44	3,727 (1.34)	00:02:10	Lean (Spanish) (30.27%)
April 2022*	2,522 (90.8%)	2,935 (1.16)	00:00:53	4,694 (1.60)	00:01:29	Home (44.44%)
May 2022	2,105 (85.3%)	2,406 (1.14)	00:01:16	3,473 (1.44)	00:02:52	Home (50.48%)
June 2022	1,109 (92.2%)	1,229 (1.11)	00:00:35	1,590 (1.29)	00:02:00	Home (35.03%)
July 2022	1,571 (71.8%)	1,867 (1.19)	00:01:30	3,099 (1.66)	00:02:17	Home (66.09%)
Aug. 2022	1,463 (91.7%)	1,632 (1.11)	00:00:44	2,271 (1.39)	00:01:52	Home (30.65%)
Sept. 2022	1,267 (91.8%)	1,394 (1.10)	00:00:42	1,909 (1.37)	00:01:54	Home (31.17%)
FY 2022	36,434 (90.9%)	42,253 (1.16)	00:00:49	57,164 (1.35)	00:02:20	Home (17.26%)
FY 2021	80,432	89,965	00:00:33	109,990	00:02:28	Lean (Spanish)

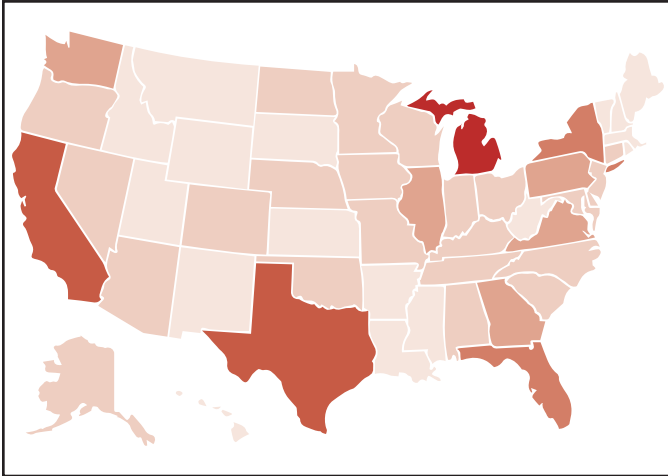
*Media-intensive campaign regarding vaping ran April 1-April 20

Daily Users



Website User Demographics

Geographic Location



United States: 17,701 users (48.82% of total users)

1. Michigan: 4,267 users (23.93%)*
2. California: 1,370 users (7.68%)
3. Texas: 1,245 users (6.98%)
4. New York: 1,015 users (5.69%)
5. Florida: 868 users (4.87%)

*Michigan residents maintained an average session length of 2:03; overall average session was 58 seconds.

Michigan: 4,267 users

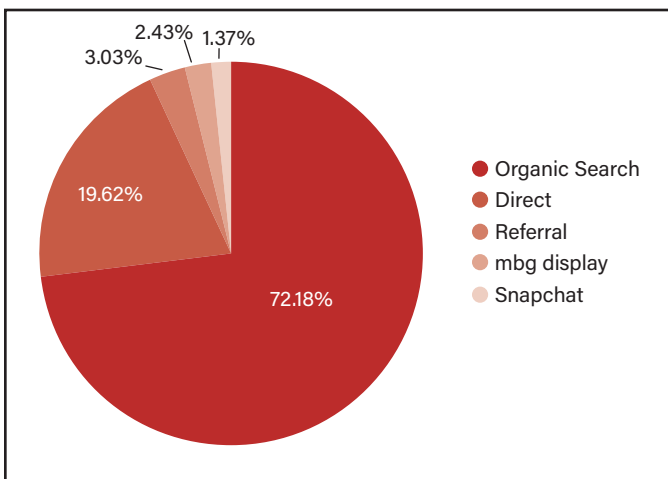
1. Lansing: 947 users (21.17%)
2. Grand Rapids: 465 users (10.40%)
3. Norton Shores: 332 users (7.42%)
4. Detroit: 197 users (4.40%)
5. Not set: 159 users (3.55%)

Nationally, access remains consistent across states with a higher population from FY 2021. All 50 states show users are accessing the TalkSooner website. Focusing on Michigan, traffic remains consistent among larger cities, with Lansing still reflecting the highest access. Although overall use across Michigan is down compared to 2021, Lansing saw an increase by 71.25 percent, with 100 percent of users directly accessing site.

Age and Gender

Through March 2022, 18 to 24-year-old persons comprise 32.05 percent of users accessing the TalkSooner website. This demographic continues to access the website more than all other ages; persons aged 25-34 continue in second, making up 25.04 percent of users. After March 2022, the TalkSooner website data reflects minimal or no age and gender demographic data.

Website Acquisition



Top sources:

1. Google/Organic: 26,486 users
2. Direct: 7,199 users
3. Referral: 1,113 users
4. mgb display: 884 users
5. Social: 855 users

Google/Organic Search

Throughout the FY, 99.98 percent of organic searches through Google didn't specify a search term. However, the search phrases collected are similar in their quest for information. Search trends transitioned in early March, coinciding with the downturn of website traffic.

The following searches comprise .01% of phrases that bring users to the TalkSooner website.

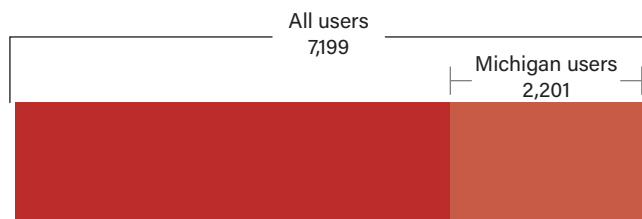
Search Terms: Oct 1, 2021-Feb 28, 2022*	All Search Terms: Mar 1, 2022-Sep 30, 2022
como hacer metanfetamina	drug issues where to talk to someone in Wexford County**
how to make lean	how long does bathsalts lasts when you inhale
aceite de coca y marihuana	pre-tween age 7-9
aceite de marihuana	talk early talk often talksooner
bebida lean para que sirve	talk Sooner**
codeina bebida lean	Talk Sooner in CAdillac, MI**

* The first six searches compared to Mar-Sept. 2022. All but one of these searches occurred from a location outside of the United States.

** Initiated by a user located within Michigan.

Direct

Users that typed [TalkSooner.org](https://talksooner.org) directly into their browser, or who had bookmarked the site.

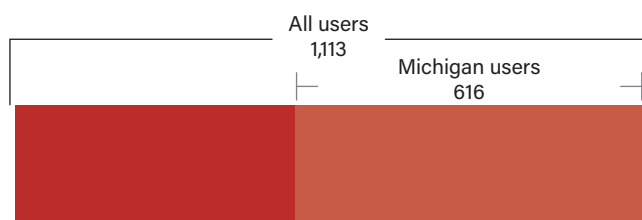


Top landing pages among Michigan users (Michigan/United States users)

1. TalkSooner.org (Home): 1,268/4,211 users
2. /category/drug-trends: 262/262 users
3. /drug-trends/hallucinogenic-drugs: 250/255 users
4. /drug-trends/marijuana: 59/76 users
5. /drug-trends/e-cigarettes-vapes: 38/46 users

Referral

Traffic that arrives on TalkSooner by clicking a link from another source.



Top referral sources among all users (Michigan/United States users)

1. classroom.google.com: 284/288 users
2. engine.presearch.org: 0/236 users
3. googleads.g.doubleclick.net: 86/103 users
4. drugfreelivingston.com: 26/27 users
5. es.m.wikipedia.org: 0/20 users

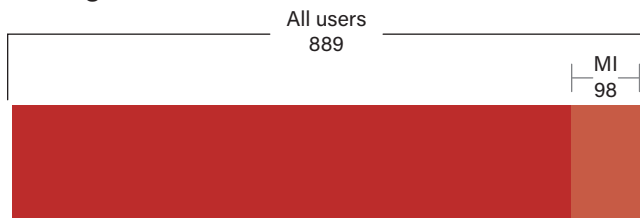
Partner referrals

Partnerships across Michigan account for 50 referrals to the TalkSooner website. Of those referrals, 47 were from users located within Michigan. In order of referral numbers:

1. miottawa.org
2. stmarysl.org
3. accesskent.com
4. lsre.org
5. barryeatonhealth.org
6. focgr.org
7. hd.ingham.org
8. mychart.spectrumhealth.org
9. upnorthprevention.org
10. drugfreemuskegon.org
11. drugfreenorthernmichigan.net
12. bchdmi.org
13. berriencounty.org

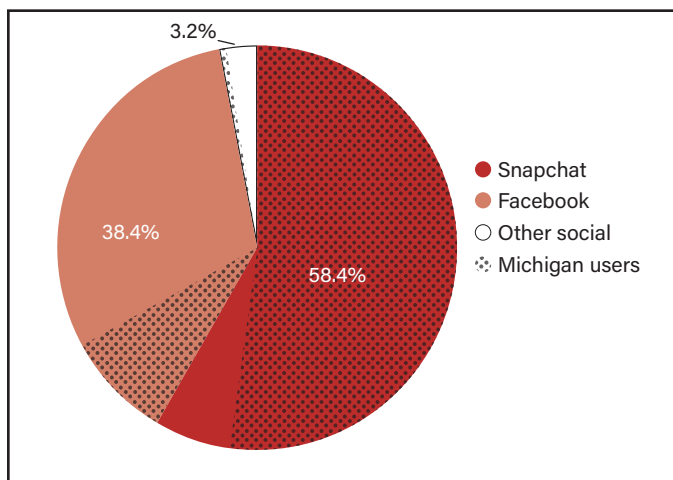
mgb display

Traffic that arrives on the TalkSooner website by clicking on a display image or ad located on a different website. Source of the display is not known. Traffic from this source began April 1, 2022 and concluded in September. Peak traffic times occurred in April (52.6%) and September (15.8%). Of the users from Michigan, 74.4% traveled to the TalkSooner website in April or September.



Social

Users that came to the TalkSooner website after clicking on a post, image, or link from a social platform.



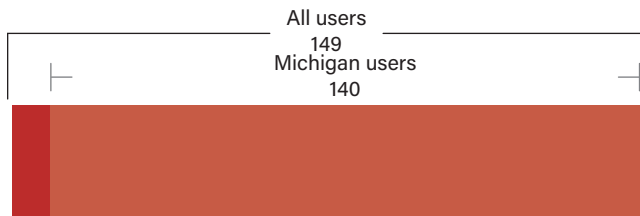
Social Media Sources:

1. Snapchat: 500 users (Dec. 4-Dec 31, 2021)
2. Facebook: 329 users*
3. Other social platforms: 26 users
 - Pinterest
 - Twitter
 - Classmates
 - Instagram
 - Screen Rant
 - TypePad
 - wikiHow
 - YouTube

*Spikes (more than five users) in clicks from Facebook occurred on April 20, August 30, September 9, and September 12.

mmg display

Traffic that arrives on the TalkSooner website by clicking on a display image or ad located on a different website. Source of the display is not known. It is important to note that all of the the traffic from this source occurred between April 21 and June 13, with 93.9% of visits occurring between May 3 and May 31.



Evaluation

The 2022 campaign reflects a tremendous effort toward educating parents about vaping risks and their youth. Focused media efforts influenced a traffic spike in April and minor increases in September, where the media voice was more prominent.

The data also shows that 66.3% of website traffic occurred before March and the media-heavy campaign in April 2022. This traffic decline after March coincides with a shift in search terms that bring people to the TalkSooner website. A change in website content or search engine optimization may have affected this shift in a user's search results, preventing TalkSooner from appearing or pushing the site further down the webpage.

While organic searches to TalkSooner decreased by 74.9% in March, the number of users who directly typed TalkSooner.org into their browser increased by 92.4% around the same time. This increase connects to the several media pushes throughout April and additional efforts in August and September. However, despite the media campaign, overall traffic declined by 54.7% and 24.9% from FY 2021 and FY 2020 campaigns, respectively.

Comparing campaign strategies, consistent and long-term media coverage, geo-targeted ads, and in-person events result in more direct traffic to time-focused media bursts.

-
1. <https://www.woodtv.com/abc4/maranda/ottawa-county-substance-abuse-prevention-coalition-helps-parents-to-recognize-substance-abuse-in-their-teens/>
 2. <https://www.wgvtv.com/the-wgvtv-morning-show/2022-01-24/talk-sooner>
 3. <https://www.woodtv.com/eightwest/exploring-the-dangers-of-teen-vaping-with-talk-sooner/>
 4. <https://www.woodtv.com/video/talk-sooner-a-special-program-from-maranda-where-you-live/7616848/>
 5. <https://www.woodtv.com/talk-sooner/watch-talk-sooner-antivaping-program/>
 6. <https://www.woodtv.com/video/maranda-helps-you-talk-sooner-with-your-kids-about-vaping/7619346/>
 7. <https://www.woodtv.com/news/grand-rapids/group-says-potential-juul-ban-very-important-step/>
 8. <https://www.bigrapidsnews.com/news/article/TalkSooner-brings-vaping-education-to-Baldwin-17408113.php>
 9. <https://www.wzzm13.com/article/news/crime/dea-warns-of-rainbow-fentanyl-targeting-kids-and-young-people/69-9d92e26f-24fa-4246-924c-da7a08478b00>
 10. <https://www.youtube.com/watch?v=YzetHK2iYUc;>
<https://www.woodtv.com/abc4/maranda/the-truth-about-youth-vaping/>
 11. <https://www.schoolnewsnetwork.org/2022/09/02/community-invited-to-discussion-on-youth-vaping>
 12. <https://www.woodtv.com/abc4/maranda/opening-the-door-for-conversation-at-family-meal-time/>

Substance Use Disorder Treatment

FY22 ANNUAL EVALUATION UPDATE
FEBRUARY 2023



Introduction

Since 2014 the Lakeshore Regional Entity (LRE), the PIHP for Region 3, has maintained a system for providing substance use disorder (SUD) treatment and recovery services which delegates responsibility for managing treatment and recovery services to each of the five member Community Mental Health Service Programs (CMHSP's) through subcontracts.

The 5 CMHSPs subcontracted to manage these services include:

- OnPoint (Allegan County)
- Community Mental Health of Ottawa County
- HealthWest (Muskegon County)
- Network180 (Kent County)
- West Michigan Community Mental Health System (Lake, Mason, and Oceana Counties)

A Strategic Plan for SUD Treatment services was developed to guide efforts during FY21 through FY23. This plan identified priority areas with metrics to monitor progress. An overview of the plan and evaluation framework is provided in the [LRE SUD Treatment Logic Model](#).

This report provides an annual update on efforts and trend data through FY22. Service access by priority populations and Treatment Performance Measures as reported for National Outcome Measures are also reviewed.

Data to inform this report includes Behavioral Health Treatment Episode Data Set (BH TEDS) (refreshed on 1/10/23) and encounter data for services provided (refreshed on 1/11/23). It should be noted that data for prior fiscal years may change from previous reports due to ongoing data entry.

Contents

Throughout this report underlined text indicates a hyperlink to additional information. When viewing this report electronically, clicking on the underlined text will direct you to another portion of the report or an external resource for more information.

SERVICE PRIORITIES

Access to Services - Summary of Trends page 4

- Criminal Justice Involved
- Persons Living with an Opioid Use Disorder (OUD)
- Rural Communities
- Older Adults (age 55-69)

Engagement and Retention - Summary of Trends page 9

- Integrated Treatment
- Continuity of Care Following Detox and Short-Term Residential (ST Res)
- Initial Engagement
- Methamphetamine (MA)-Involved Admissions

Connection to Community Supports - Summary of Trends page 15

- Support Groups
- Women's Specialty Services (WSS)

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SUMMARY OF TRENDS

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<u>OnPoint</u>	page 36	<u>Ottawa</u>	page 42
<u>HealthWest</u>	page 38	<u>West MI</u>	page 44

Services Priorities



The following pages provide an overview of metrics related to service priorities identified within the LRE Strategic Plan for Substance Use Disorder (SUD) services, including

- Access to Services
- Engagement and Retention
- Connection to Community Supports

Access to Services

Summary of Trends for Targeted Metrics:

The following provides a summary of trends in targeted metrics related to access for these prioritized populations as identified within the Strategic Plan.

Targeted Metrics: Access		FY17	FY18	FY19	FY20	FY21	FY22	Trend* FY17-22
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	21.9%	21.1%	20.6%	20.2%	20.3%	21.9%	→
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.3%	0.5%	0.3%	0.3%	0.3%	0.5%	→
	↑ admissions with legal status as 'in jail' (% of all admissions)	7.6%	7.9%	8.4%	6.8%	5.5%	6.8%	→
Persons with Opioid Use Disorder (OUD)	↓ avg days between request for medication assisted treatment (MAT) and first service	4.2	5.9	13.7	7.0	13.4	5.7	↗
	Maintain an average wait time of less than 3 days for persons with IVDU	4.2	5.7	6.6	6.4	9.8	7.1	↗
	↓ average days' time to service for Outpatient Level of Care for persons with intravenous drug use (IVDU)	4.3	5.1	7.6	6.9	10.6	6.7	↗
Older Adults	↑ in # of admissions for individuals age 55-69	593	559	595	471	580	583	→

*  Improving  Worsening  Relatively stable

Criminal Justice

In April of 2020, LRE became responsible for supporting substance use disorder services for individuals transitioning into the community who are on probation after having been incarcerated.

Improvement Efforts

Working together with the Michigan Department of Corrections, the LRE has partnered with the SUD Regional Operations Advisory Team (ROAT) to identify ways to improve coordination and services for this population as they return to their communities. MDOC representatives attend meetings quarterly to discuss challenges and foster coordination. In March 2022, MDOC reported challenges with provider communication. CMHSP Members communicated with the provider network and the issue has not since been reported as a problem.

Efforts to expand services in the jail have been a priority, primarily with State Opioid Response funds. Medication assisted treatment (MAT) services are now offered in 5-of-7 county jails in the region.

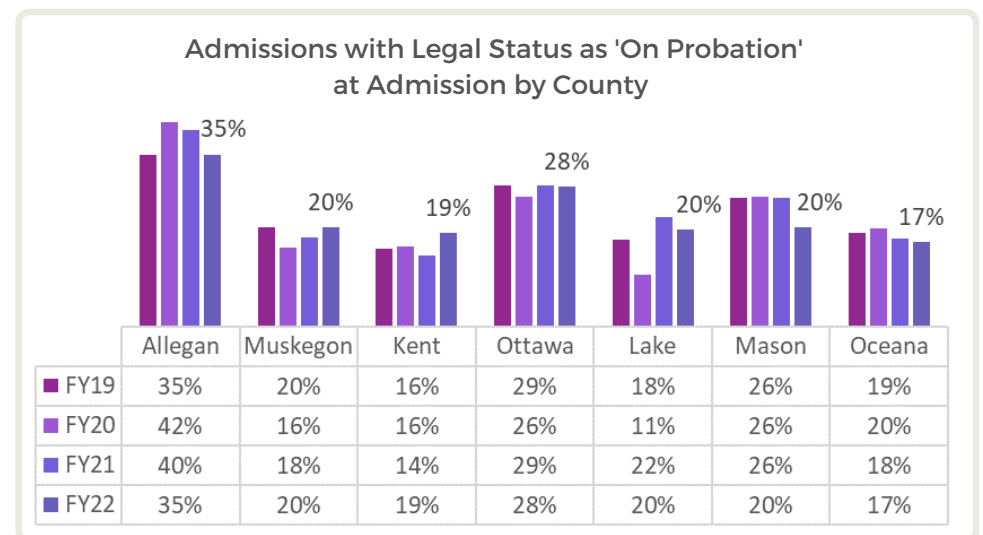
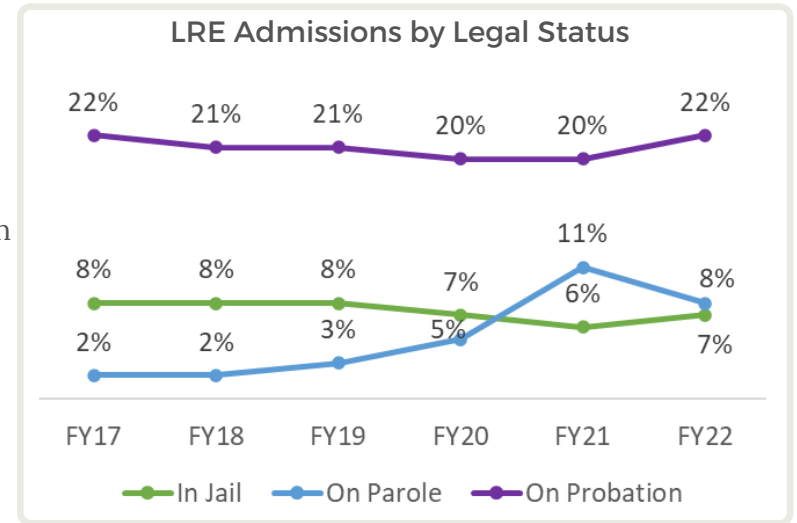
In FY21, Muskegon County established a peer recovery coach in the jail to support individuals receiving MAT while incarcerated to engage in services following release.

In FY23 the LRE will hire a Priority Population Specialist to support coordination between MDOC and CMHSPs for this population.

Data Highlights

Between FY19 and FY22 the percent of admissions for individuals whose legal status was identified as 'on parole' or on 'probation' increased (from 23.2% to 29.5%) and the percent of admissions for individuals 'in jail' decreased slightly. Less than 1% of admissions reported the legal status as a 'pre booking' or 'post booking' diversion.

The percent of admissions for individuals on probation is highest in Allegan County and increased in Muskegon and Kent counties in FY22.



Persons with OUD

In recent years, the rate of opioid use and the need for treatment for individuals with an opioid use disorder (OUD) has increased significantly. Of note, was the need for increased medication assisted treatment (MAT) throughout the region.

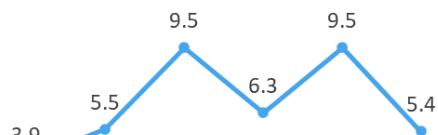
Data Highlights

Between FY19 and FY22, the average time to service (TTS) for all levels of care varied over the years with a substantial improvement between FY21 and FY22 (from 9.5 to 5.4 days).

During FY21 delays in TTS were primarily due to medication assisted treatment (MAT) caused by intermittent use of a waitlist at a provider in Muskegon County. This improved substantially in FY22, with the TTS for Muskegon County's MAT services from 28.5 in FY21 and to 4.8 in FY22.

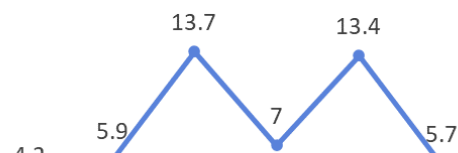
When trends in time to service for MAT are reviewed by county, TTS in F22 was highest in Allegan County at 9.0. The remaining counties range from between 4.8 and 6.6.

LRE Average TTS for Admissions with OUD



FY17 FY18 FY19 FY20 FY21 FY22

LRE Average TTS for Outpatient MAT Services



FY17 FY18 FY19 FY20 FY21 FY22

Improvement Efforts

State Opioid Response (SOR), State Targeted Response (STR), American Rescue Plan Act (ARPA), and COVID-19 Block grants allowed expansion of MAT services throughout the region. Projects included the addition of new Suboxone providers, providing transportation to MAT services, supporting recovery homes, and recovery management teams. In addition, these funds expanded Narcan distribution and education throughout all counties.

During FY21, efforts to and address the waitlist in Muskegon County included transitioning the screening and medical assessment scheduling and managing the waitlist to HealthWest. HealthWest also began offering open intake assessment appointments and doing well-being check-ins with those on the waitlist as well as offering interim services. In addition, WCMCHS started jail-based MAT services in Lake County and provided stipends to support community-based MAT services in all 3 counties.

During FY22, efforts to increase MAT capacity include:

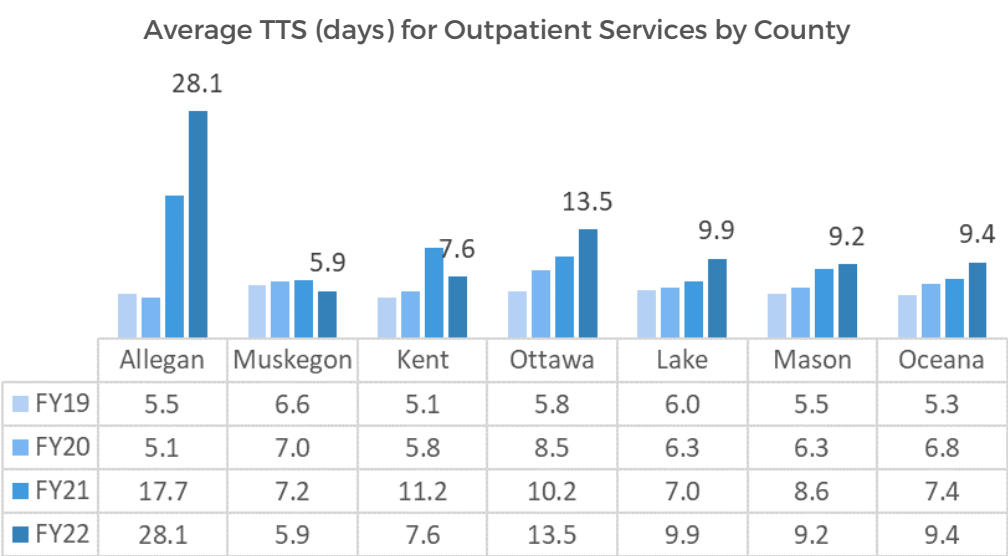
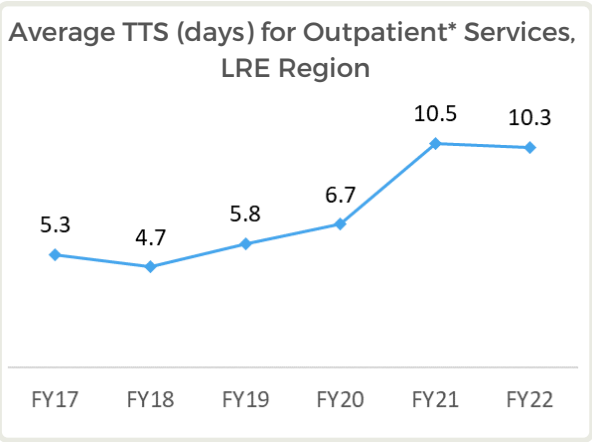
- N180 and HealthWest worked to engage additional MAT providers and provided assistance with the credentialing process. In Muskegon, Eastside began services on 10.1.22.
- To address staffing shortages N180 provided staff retention and new hire bonuses.
- HealthWest hired a recovery coach for the jail to coordinate treatment following release from jail.
- WCMCHS built capacity to provide MAT services when the provider in their counties discontinued services. Began 1.1.23 with no interruption.
- Allegan and Ottawa began providing jail-based MAT services.

Rural Communities

Access to services in rural areas has been identified as a challenge. Counties considered rural in the LRE region include Allegan, Lake, Mason, and Oceana.

To support access and respond to Covid-19 restrictions, tele-health services were established once state policy changed to allow for provider reimbursement. Innovative methods to support transportation needs includes incentives for volunteers to drive consumers to and from treatment facilities in some of the rural communities in the region.

During FY22 a provider in Allegan was identified with extensive delays in TTS and a corrective action plan was put in place; improvements expected to reflect in FY23 data. In addition, it was identified that some providers were using an incorrect date for the request for service for referred individuals. During FY23 the LRE will work to ensure the date of request for service is being accurately recorded.



Data Highlights

Time to Service (TTS) for Outpatient services increased substantially in FY21 and remained high in FY22.

Among rural counties the TTS for Outpatient services have been increasing. Allegan County had substantial increases in FY21 and FY22 to 28.1 days. Lake Mason, and Oceana County worsened slightly to between 9 and 10 for each county.

It should be noted that:

- TTS does not provide adjustments for limited client availability which delays the appointment or for the client rescheduling their appointment.
- Interim services are provided in some instances, such as peer recovery coach support, which are not reflected in the BHTEDS due to being funded by other sources.

*non-intensive & excludes MAT)

Older Adults

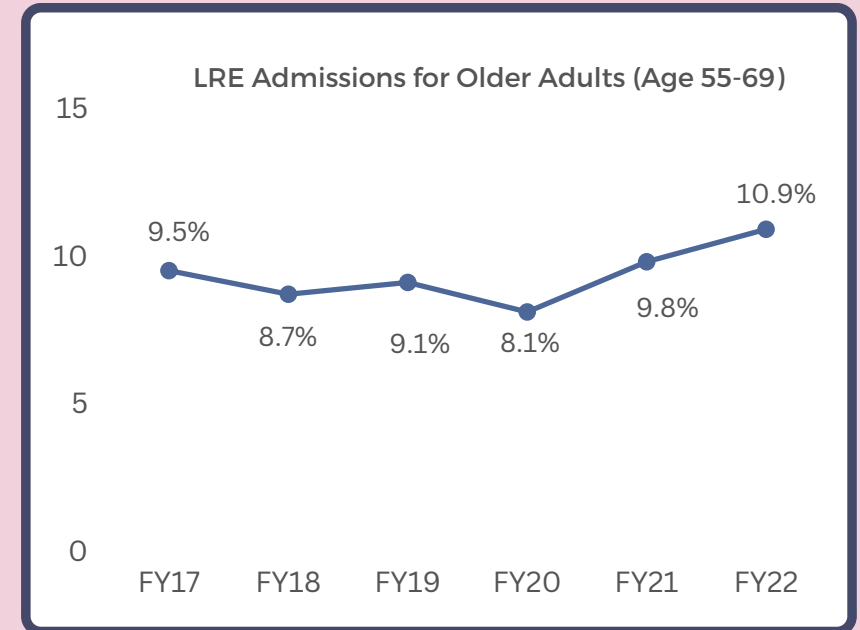
Improving access to services for older adults is currently a state-mandated priority. Planned efforts in the LRE region include promoting availability of services and the ability to access services, as well as providing training for providers on addressing behavioral health needs of older adults.

LRE leadership participated in state-level strategic planning for older adult services, which is available [here](#).

The LRE discussed older adults at the SUD ROAT and prevention meetings to assess community readiness for providing services for older adults. Potential trainings available to providers were reviewed and state trainings on the topic were promoted.

Data Highlights

The number of admissions in the region for older adults decreased substantially in FY20 which may have been due to Covid-19 restrictions. The percentage of admissions that were for older adults has been increasing since FY20 to a high of 10.9% in FY22.














	FY17	FY18	FY19	FY20	FY21	FY22
# Admissions Older Adults	593	559	595	471	580	583



Engagement and Retention

Summary of Trends for Targeted Metrics:

The following provides a summary of trends in targeted metrics related to engagement and retention in care as identified in the Strategic Plan.

Targeted Metrics: Engagement and Retention		FY17	FY18	FY19	FY20	FY21	FY22	Trend* FY17-22
Integrated Treatment	↑ in % of clients w/ co-occurring diagnosis who received integrated svcs	4.8%	7.1%	6.1%	7.3%	10.5%	13.8%	
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next level of care w/in 7 days	16.9%	26.0%	28.7%	25.8%	26.7%	35.2%	
	↓ average # days between discharge and admission to next level of care following ST residential							
	w/in 7 days	1.6	2.0	2.0	2.4	1.6	1.8	
	7+ days	15.4	15.3	15.5	17.3	14.6	14.2	
	Overall	6.8	9.4	7.9	9.0	9.1	8.3	
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'							
	Detox	20.7%	19.7%	25.4%	19.1%	17.7%	18.2%	
	ST Res	67.7%	66.3%	67.6%	73.5%	70.6%	54.3%	
	↑ % discharges from residential svcs w/reason as 'transfer/ completed level of care'							
	Detox	37.4%	50.2%	42.0%	51.7%	53.3%	49.5%	
Initial Engagement	ST Res	1.3%	2.9%	1.7%	1.5%	1.8%	18.5%	
	↓ % of treatment episodes with no 2nd visit	15.2%	10.6%	11.9%	11.5%	10.5%	11.6%	
	↑ clients seen for a 2nd encounter w/in 14 days of 1st service (of those w/ a 2nd encounter)	83.4%	86.5%	87.3%	88.6%	88.1%	92.4%	

*  Improving  Worsening  Relatively stable

Integrated Treatment

The percent of clients with a co-occurring disorder that are reported as having received integrated treatment has been historically low in the LRE region, with only 6% in FY19.

For a client to be counted as having received integrated treatment services, services can be provided by one provider, or multiple providers as long as services are coordinated and there is a joint treatment plan with input from both disciplines. A billing modifier code must also be used when reporting all encounters (HH).

IMPROVEMENT EFFORTS

The SUD ROAT reviewed this issue in FY21 and determined that data entry guidance was unclear and was being used with varying interpretations by the provider network resulting in underreporting. To address this, and other data entry issues, the LRE hosted a BH TEDS training in August 2021. The trainer was asked to address this issue. As this occurred late in the FY, improvements in data accuracy were expected to be reflected in FY22 records which did show improvement. In FY22 CMHSP Members worked to ensure that providers had the HH modifier activated for billing purposes..

DATA HIGHLIGHTS

Between FY19 and FY22, the percent of clients with co-occurring disorder who received integrated treatment

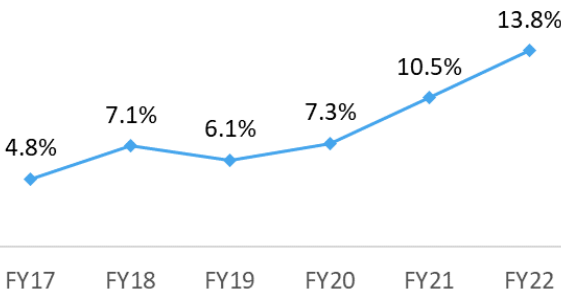
increased to 13.8% for the region.

While the rate is still low, the region has achieved substantial and continual improvements.

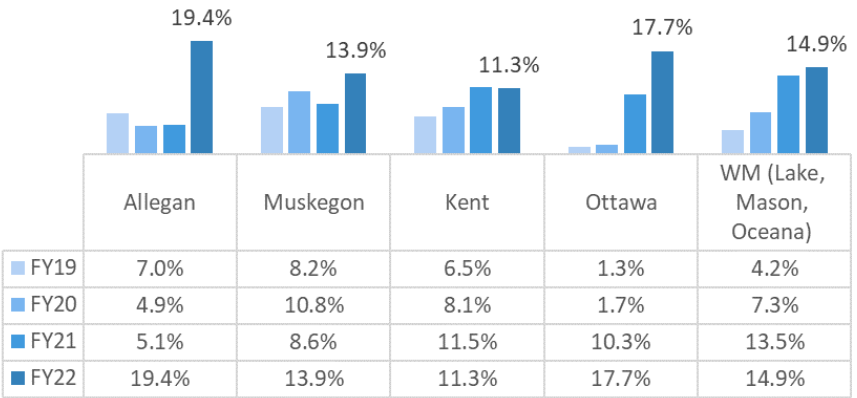
In FY22 Allegan, Muskegon, and Ottawa counties

achieved substantial increases with Allegan County moving from the lowest in FY21 to the highest in FY22 at 19.4%.

Clients with Co-Occurring Disorders that Received Integrated Treatment



Clients with Co-Occurring Disorders that Received Integrated Treatment by CMHSP



Continuity of Care

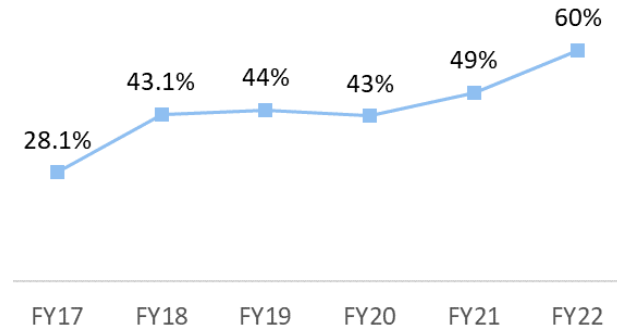
It is important that clients who complete sub-acute detox and then short-term residential (ST Res) services engage in treatment at the next level of care (LOC) as soon as possible to reduce the likelihood of relapse. Also, because detox and ST Res should always be followed by a lower LOC, the discharge reason should be recorded as "Transferring/Completed Level of Care" and should **not** be recorded as "Completed Treatment".

Improvement Efforts

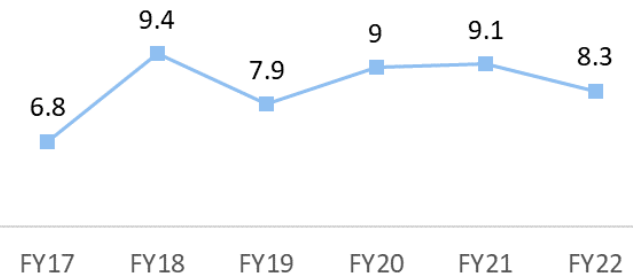
To address this issue during FY21, data was reviewed and discussed with the SUD ROAT and reviewed quarterly thereafter. In response, each CMHSP reviewed data with their staff and provider networks. Ottawa, West MI, and Muskegon CMHSPs also engaged peer recovery coaches to assist these individuals and support engagement in local services following discharge from ST Res. In addition, accurate recording of the discharge reason was addressed during the BH TEDS training in August 2021. As these efforts occurred late in FY21, we anticipated that improvements would be reflected in FY22 data which is the case.

Data Highlights

Percent of Discharges from ST Res Admitted to the Next level of care w/in 30 Days

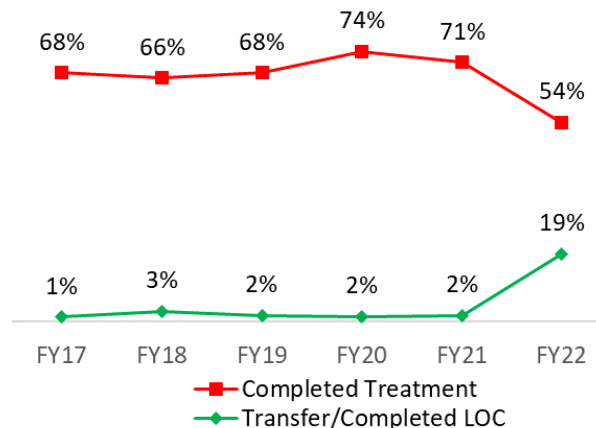


Average # Days Between ST Res Discharge and Admission to Next LOC*



*For those w/an admission within 30 days of discharge

Discharge Reason for Discharges from ST Res (Discharges from ST Res should not be recorded as 'completed treatment')

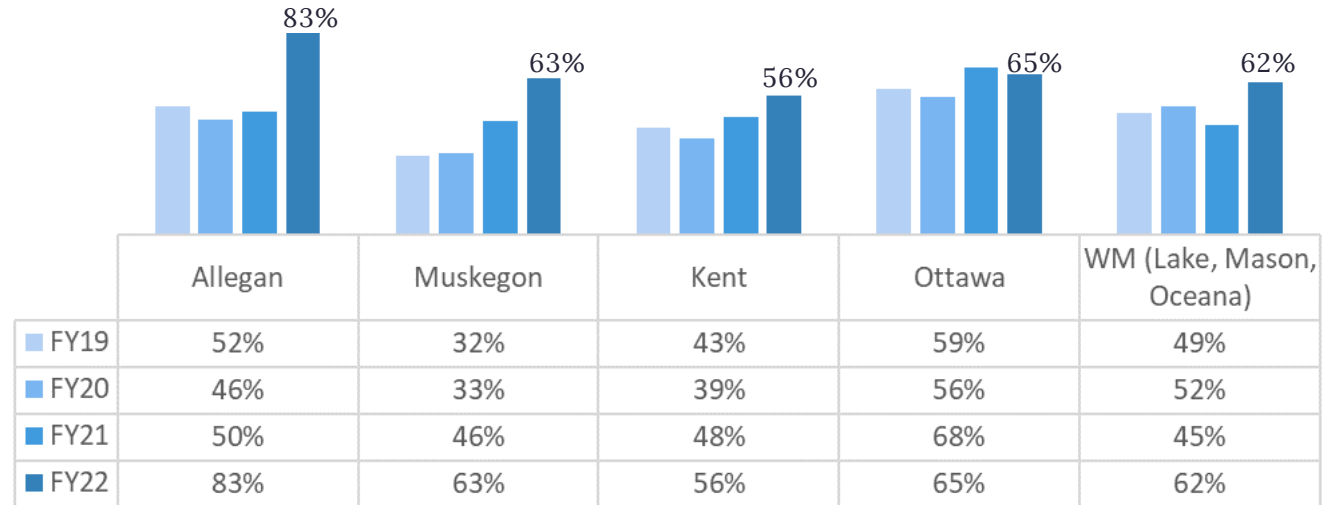


Continuity of Care Data Highlights

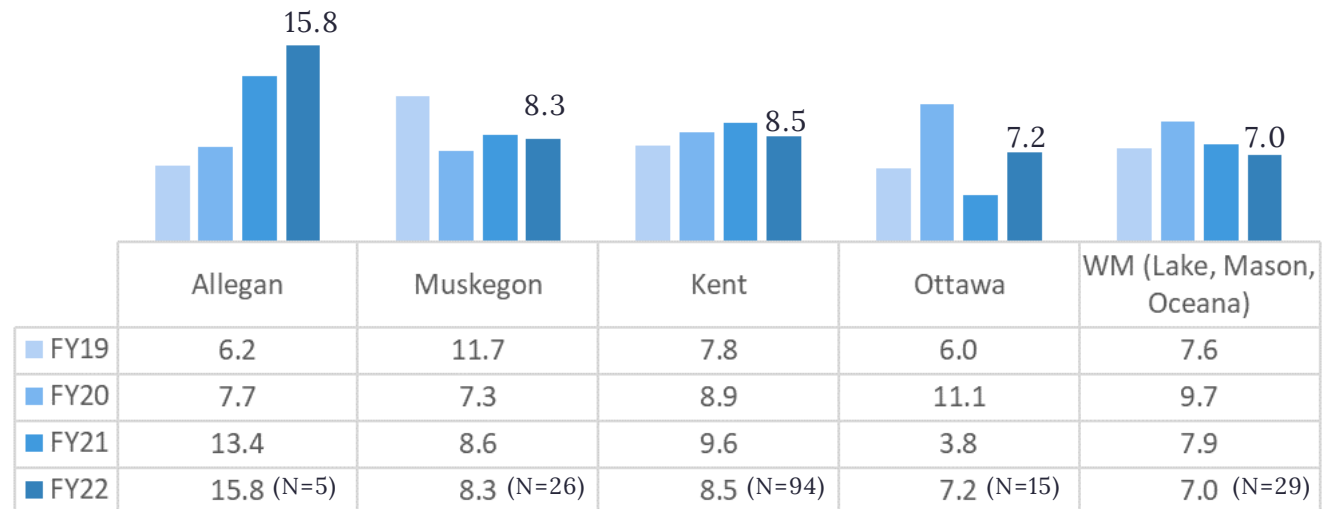
Between FY19 and FY22, the percent of clients being discharged from ST Res who were admitted to the next level of care within 30 days continued to increase region-wide, achieving a high of 60%. this improved between FY20 and FY22 for each CMHSP with Allegan achieving the highest rate in FY22 at 83%.

The average number of days between discharge from ST Res and admission to the next LOC improved slightly in FY22 to 8.3 days region-wide.

Percent of Discharges from ST Res Admitted to the Next level of care w/in 30 Days
by CMHSP



Average # Days Between ST Res Discharge and Admission to Next LOC*
by CMHSP



Initial Engagement

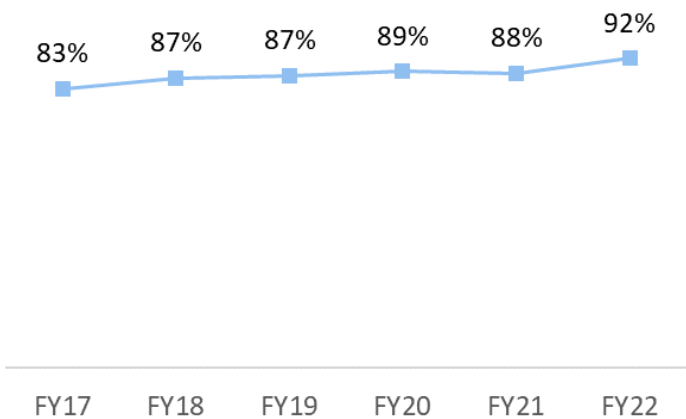
Metrics to monitor whether clients successfully engage in services after initial contact the LRE monitors how many clients had only one encounter (excluding those who did not require a second visit) and whether a client's 2nd visits occurred within 14 days of the first.

Data Highlights

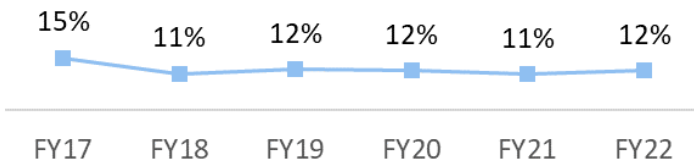
Overall data indicates that the region's initial engagement of clients in SUD treatment is going well. The rate of admissions with only one visit remained low in FY22 (12%). Service categories with the highest rate of only one visit were Outpatient (19%) and Intensive Outpatient (16%), followed by medication assisted treatment (MAT) and detox at 10% each.

The percent of treatment episodes with the second visit occurring within 14 days of the first has been improving and achieved a high of 92% in FY22.

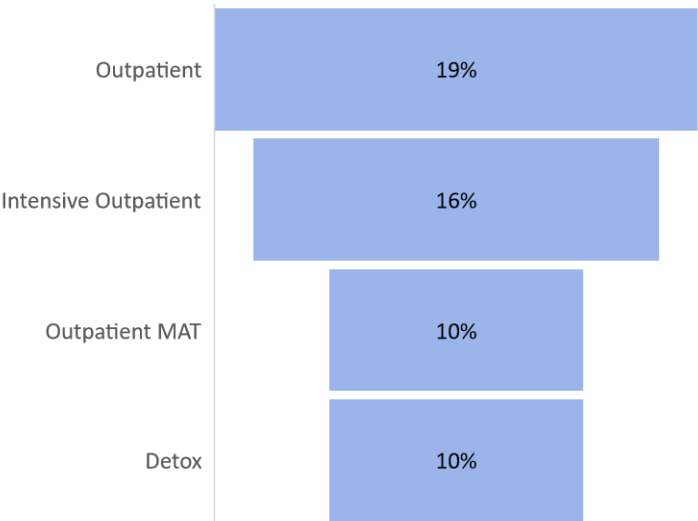
Percent of Treatment Episodes Where the 2nd Visit Occurred Within 14 days of 1st Encounter, LRE Region



Percent of Treatment Episodes With Only One Encounter, LRE Region Overall (All Service Categories)



Percent of Treatment Episodes With Only One Encounter, LRE Region FY22 By Service Category



Responding to Methamphetamine (MA)

Methamphetamine has emerged as a growing problem in recent years with treatment admissions for individuals reporting MA use increasing 400% between FY17 and FY21.

DATA HIGHLIGHTS

MA-involved admissions continued to increase through FY21 and remained relatively stable in FY22. More than one-in-five admissions involved MA and 1-in-10 admissions involved both MA and an opioid.

Counties with the highest rate of MA-involved admissions were Allegan (48%), Lake (37%), and Oceana (39%); and the lowest was Kent (12%).

Counties with the highest rate of admissions involving both MA and an opioid were Mason (26%) and Oceana (21%).

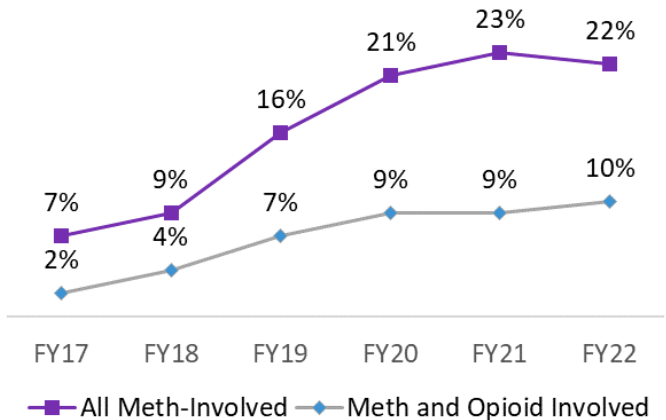
IMPROVEMENT EFFORTS

To address this issue, the LRE partnered with the Allegan Substance Abuse Prevention Task Force to commission a needs assessment for the region. In Feb. 2021, findings were presented followed by discussion to identify opportunities for action. This report is available [here](#).

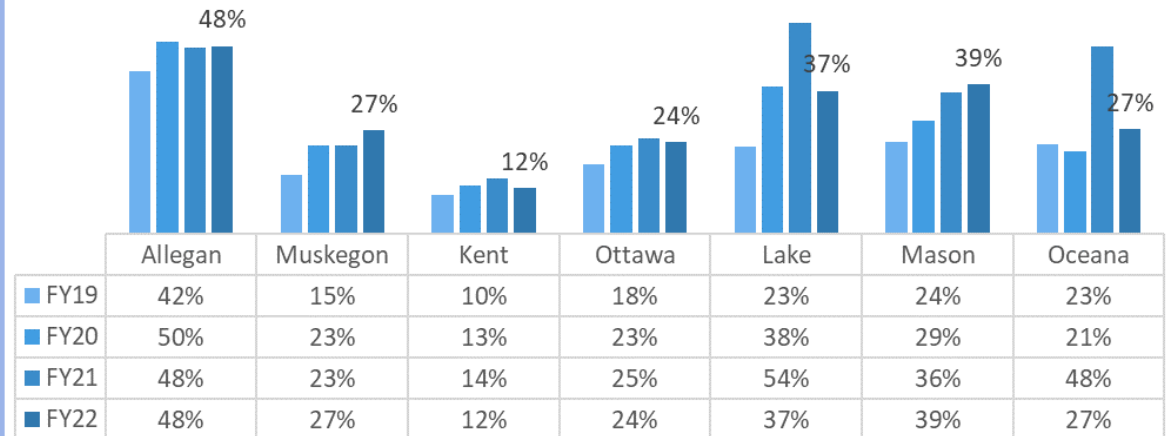
In addition, the LRE promoted state training for providers on evidence-based treatment for MA, including training on Contingency Management and the Matrix Model.

Throughout the region many providers attempted to establish Contingency Management for clients using MA in outpatient settings. Despite ongoing efforts it has been mostly unsuccessful. It may be beneficial in FY23 to discuss challenges and identify support needed.

Percent of Admissions That Were MA-Involved






Percent of Admissions that were MA-Involved by County



Connection to Community Supports

Summary of Trends for Targeted Metrics:

The following provides a summary of trends in targeted metrics related to connecting clients to community supports as identified in the Strategic Plan.

Targeted Metrics: Community Supports		FY17	FY18	FY19	FY20	FY21	FY22	Trend* FY17-22
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	17%	15%	18%	23%	19%	22%	
Women's Specialty Services	↑ # of pregnant women served	110	107	102	80	61	52	
	↑ # of pregnant women served by a Women's Specialty Provider	49	39	45	38	21	24	

*  Improving  Worsening  Relatively stable

Support Groups

To assist individuals in sustaining recovery following discharge from services, providers encourage individuals to attend community support groups such as Alcoholics Anonymous, Narcotics Anonymous, or SMART Recovery.

Planned efforts in the LRE region include expanding SMART recovery, and other support groups and strategies throughout the region.

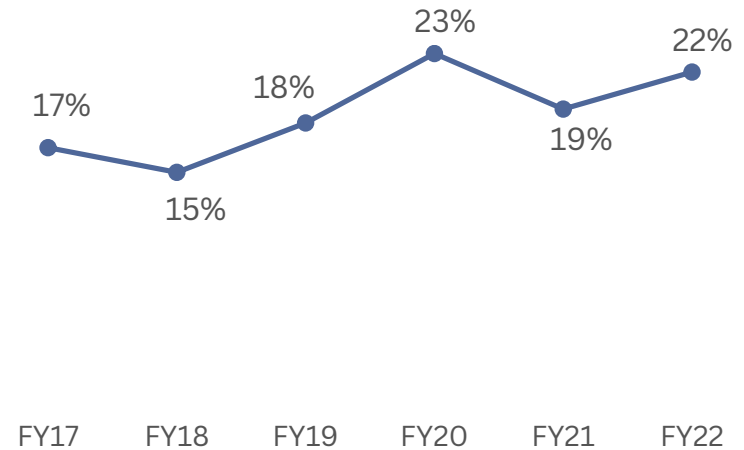
No efforts were reported during FY21 or FY22 related to this priority.

Data Highlights

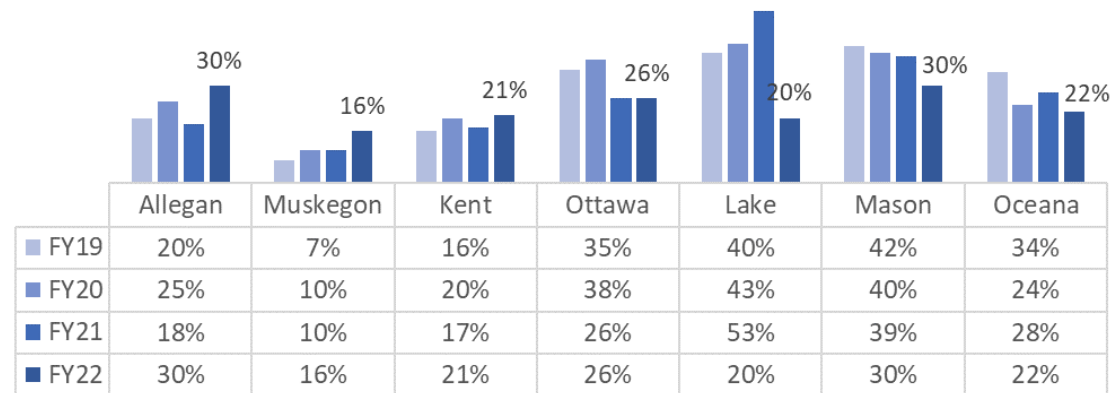
The rate of discharges with the client reporting they had attended a support group have varied since FY20 and improved slightly in FY22 to 22%.

The highest rates of reported support group involvement at discharge were in Mason (30%) and Allegan (30%), followed closely by Ottawa (26%). In FY22 rates improved substantially in Allegan and Muskegon counties while declining in the Lake, Mason, and Oceana counties.

Percent of Discharges With Support Group Attendance in Past 30 Days



Percent of Discharges With Support Group Attendance in Past 30 Days by CMHSP



Women's Specialty Services

In Michigan, women who are pregnant and parenting are given priority for admission to treatment services and Substance Abuse Prevention and Treatment Block Grant requires states to spend a minimum amount each year for treatment and ancillary services for eligible women. To reduce barriers to treatment engagement, Women's Specialty Services (WSS) providers offer gender-responsive services and supports to address the unique needs of pregnant and parenting women. Ancillary services can include childcare, transportation, case management, therapeutic interventions for children, and primary medical and pediatric care.

IMPROVEMENT EFFORTS

To support WSS providers, the LRE established a regional workgroup for WSS providers in FY21. In FY22 it was decided to add Women's Specialty Services to the SUD ROAT for monthly discussion.

During FY21, COVID caused special challenges for mothers. In response WSS providers implemented the following:

- Contingency Management child-based incentives.
- Creative solutions to ensure confidentiality during telehealth visits.
- Outreach through primary care providers, health clinics, and Dept. of Human Services. One physician began referring all pregnant women with a positive drug-screen to the WSS provider.
- Added swings and sandbox for children to use while mother is in treatment.

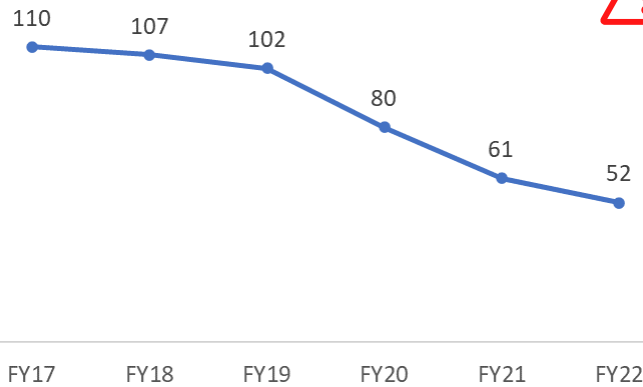
In FY22, WSS providers report the following efforts to support pregnant and parenting women in treatment:

- Onsite childcare so women can focus on just themselves during services.
- Parenting skills programming such as Parenting Wisely, Safe Sleeping, and Love and Logic
- Trauma programs such as Seeking Safety and Beyond Trauma.
- Collaboration with MDHHS to help women to access community resources such as food assistance more easily.
- Working with the public defender's office to coordinate on shared cases.
- Celebrating recovery anniversary dates and client milestones.
- Partnering with the YMCA to provide holistic health programming.
- Mentor program for young sons of moms in treatment to support positive family dynamic and involving fathers.
- Assist moms in getting Christmas presents for their children and back to school shopping in the fall.

Data Highlights

The number of pregnant women served in the region has declined consistently and substantially since FY19, with 52 pregnant women served in FY22. Of these women, 46% received services at a Women's Specialty Services Provider.

Pregnant Women Served, LRE Region



Pregnant Women Served by CMHSP

	FY17	FY18	FY19	FY20	FY21	FY22
Allegan	3	6	6	4	6	4
Muskegon	41	35	34	22	14	24
Kent	47	49	40	43	26	17
Ottawa	14	10	16	8	6	5
West MI	4	5	6	2	7	2
Out of Region	1	2	0	1	2	0
TOTAL	110	107	102	80	61	52

Total Number of Pregnant Women Served by Women's Specialty Providers

Women's Specialty Provider	FY21	FY22
Arbor Circle	10	8
Family Outreach Center	3	4
Mercy Health Life Counseling	1	1
OAR - Harbor House	2	4
OAR - Women's Services (Grand Haven)	0	0
OAR - Women's Services (Holland)	2	3
Our Hope Association	3	2
Wedgwood	0	2
TOTAL	21	24



Performance Indicators

MDHHS compiles and reports treatment performance measures to the federal government. The following pages provide an overview of results for these measures for the LRE region during FY21 and FY22.

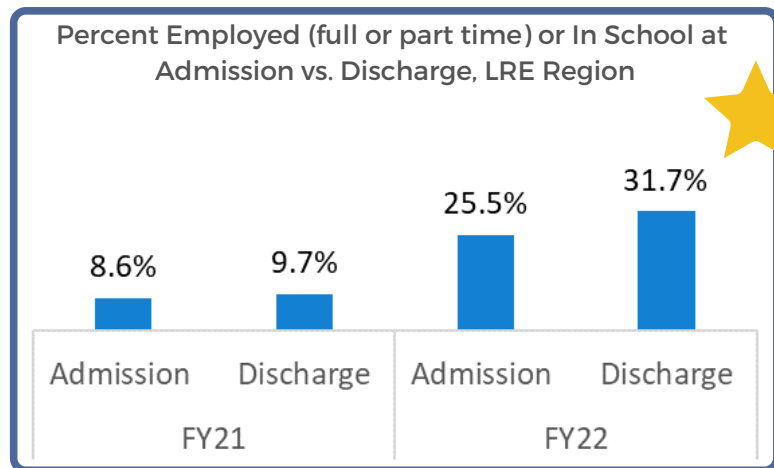


Employment/Education Status

Analysis includes clients who were in services for at least 6 weeks and were discharged as having completed treatment or transferring to another program.

Region-wide during FY22 clients were more likely to report they were employed or in school than in FY21. In addition, the region achieved a greater improvement in FY22 with a 24% increase between admission and discharge, compared to 12% improvement in FY21.

Allegan, Kent and Ottawa counties achieved substantially greater relative change in FY22 than in FY21.



Percent Employed (full or part time) or In School at Admission vs. Discharge

FY21

	Admission	Discharge	Relative Change	Absolute Change
Allegan	11.6%	11.6%	0.0%	0.0%
Muskegon	9.0%	9.5%	5.6%	0.5%
Kent	5.2%	9.5%	8.3%	4.3%
Ottawa	9.3%	9.9%	5.9%	0.5%
West MI	7.0%	8.5%	20.0%	1.4%
REGION	8.6%	9.7%	12.2%	1.0%

FY22

	Admission	Discharge	Relative Change	Absolute Change
Allegan	28.0%	36.0%	28.6%	8.0%
Muskegon	27.0%	29.1%	7.5%	2.0%
Kent	19.7%	25.4%	28.8%	5.7%
Ottawa	34.3%	44.8%	30.4%	10.4%
West MI	29.2%	33.8%	15.8%	4.6%
REGION	25.5%	31.7%	24.0%	6.1%



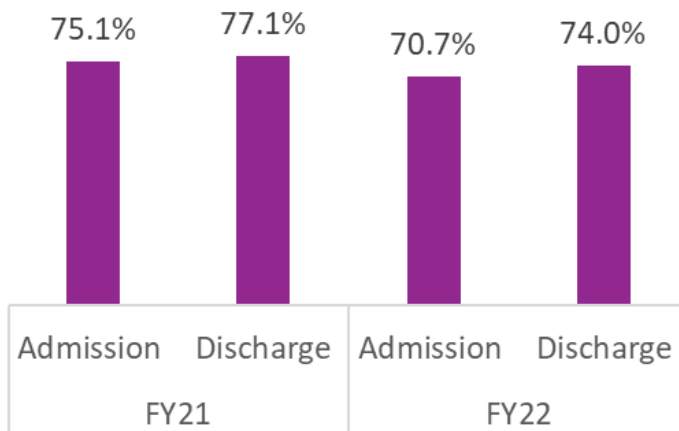
Stability of Housing

Analysis includes clients who were in services for at least 6 weeks and were discharged as having completed treatment or transferring to another program. Stable is defined as independent.

Region-wide, clients achieved a greater improvement from admission to discharge in FY22 with a 4.7% improvement compared to a 2.6% improvement in FY21.

Allegan achieved the greatest improvement (10%), followed by West Michigan (7.3%). In addition, Allegan, Ottawa and West MI saw larger relative change in FY22 than achieved in FY21.

Stable Living Condition at Admission vs. Discharge, LRE Region



Among Clients Discharged During FY21, the Percent Reporting A Stable Living Condition at Admission vs. Discharge*

FY21

	Admission	Discharge	Relative Change	Absolute Change
Allegan	82.6%	86.0%	4.2%	3.5%
Muskegon	67.0%	70.0%	4.5%	3.0%
Kent	75.9%	81.9%	8.0%	6.0%
Ottawa	89.0%	88.5%	-0.6%	-0.5%
West MI	76.1%	69.0%	-9.3%	-7.0%
REGION	75.1%	77.1%	2.6%	2.0%

FY22

	Admission	Discharge	Relative Change	Absolute Change
Allegan	80.0%	88.0%	10.0%	8.0%
Muskegon	77.7%	79.7%	2.6%	2.0%
Kent	64.1%	67.8%	5.9%	3.8%
Ottawa	80.6%	83.6%	3.7%	3.0%
West MI	63.1%	67.7%	7.3%	4.6%
REGION	70.7%	74.0%	4.7%	3.3%



Housing Efforts to Date

- Network 180 partnered with Mel Trotter (who provides services to individuals who are experiencing homelessness) to have two Recovery Coaches engage with guests at Mel Trotter's Engagement Center.
- Community Mental Health of Ottawa County has begun to provide outreach and services with Refresh (a shower program for individuals experiencing homelessness).
- Network180 is working with Pine Rest and Grand Rapids Housing Commission to place a Clinician and a Recovery Coach on-site at Adam's Park Apartments.

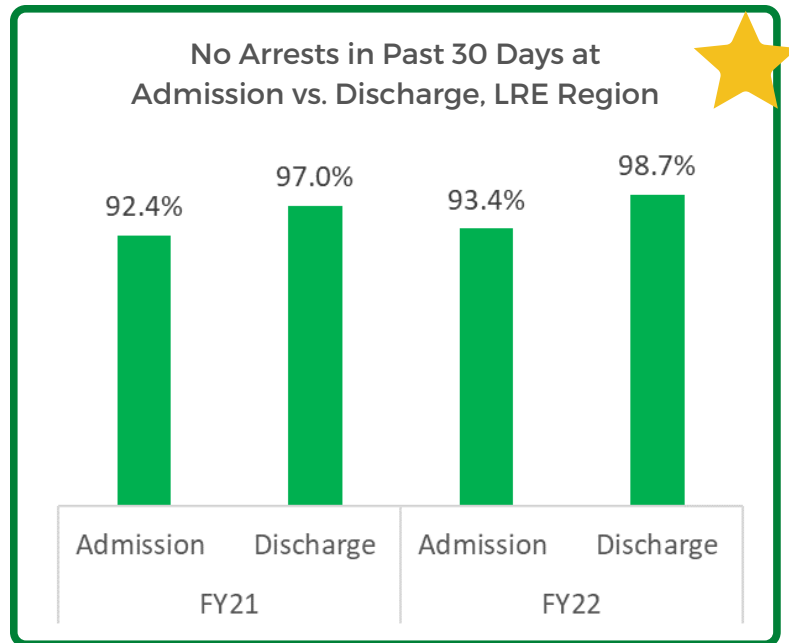


Criminal Justice Involvement

Analysis includes clients who were in services for at least 6 weeks and were discharged as having completed treatment or transferring to another program.

Region-wide, during FY22 the percent of clients with no recent arrest remained high and relatively stable between admission and discharge.

West Michigan achieved the greatest improvement (21%) which is primarily due to a lower rate at admission allowing for greater variation than in other counties. Notable at discharge, each county in the region achieved 98% or higher.



Percent with No Arrest in Prior 30 Days at Admission vs. Discharge

FY21

	Admission	Discharge	Relative Change	Absolute Change
Allegan	90.7%	90.7%	0.0%	0.0%
Muskegon	95.0%	98.8%	3.9%	3.8%
Kent	92.2%	95.7%	3.7%	3.4%
Ottawa	91.8%	97.3%	6.0%	5.5%
West MI	81.7%	95.8%	17.2%	14.1%
REGION	92.4%	97.0%	4.9%	4.5%

FY22

	Admission	Discharge	Relative Change	Absolute Change
Allegan	100%	100%	0.0%	0.0%
Muskegon	95.3%	100%	5.0%	4.7%
Kent	95.4%	98.4%	3.1%	3.0%
Ottawa	93.0%	98.0%	5.3%	5.0%
West MI	81.5%	98.5%	20.8%	16.9%
REGION	93.4%	98.7%	5.7%	5.3%

Priority Populations

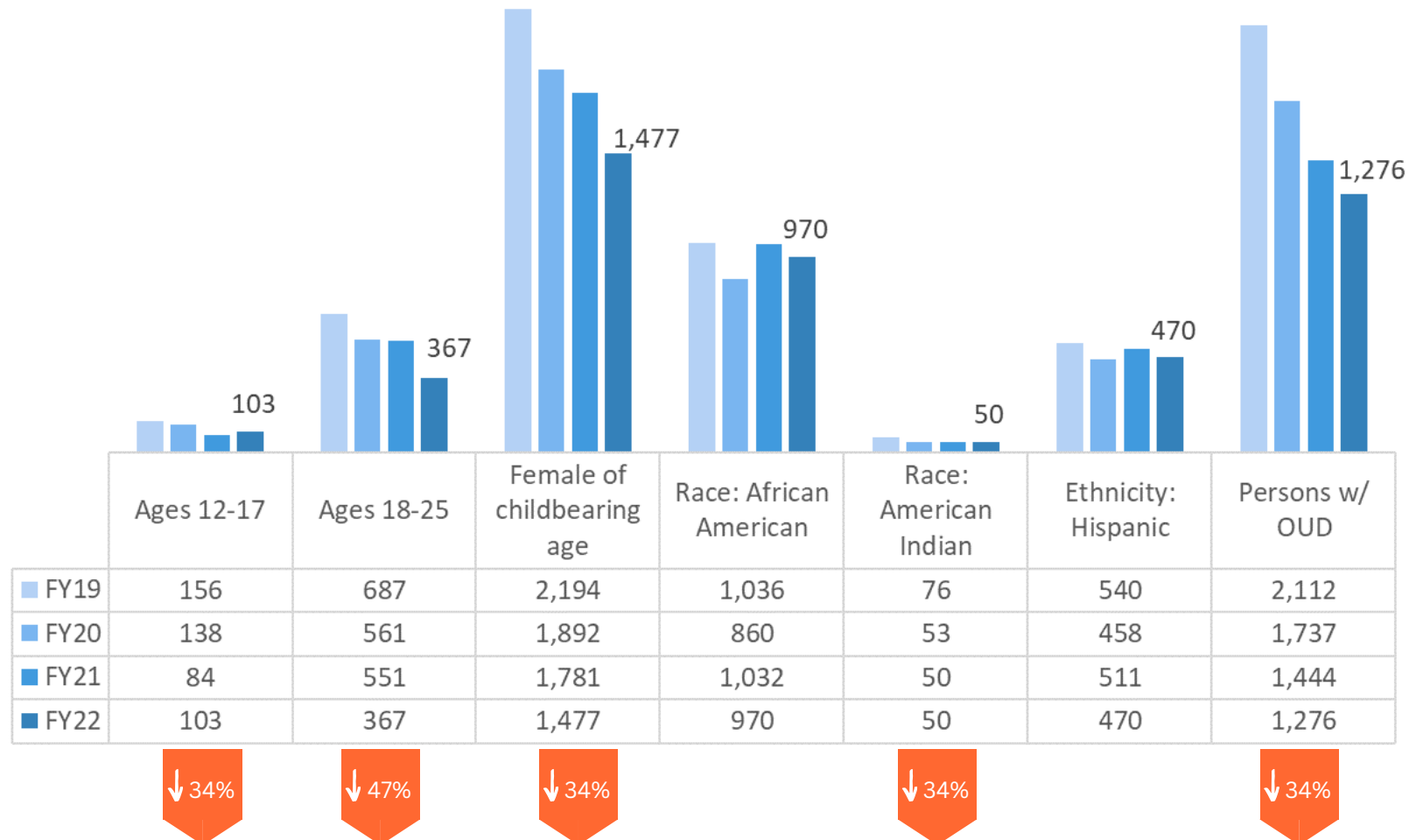
The following pages provide an overview of admissions for populations that MDHHS has identified as a priorities to engage in SUD treatment. To monitor engagement, the number of admissions and percentage of total admissions for each priority population are monitored.



Priority Populations: Overview

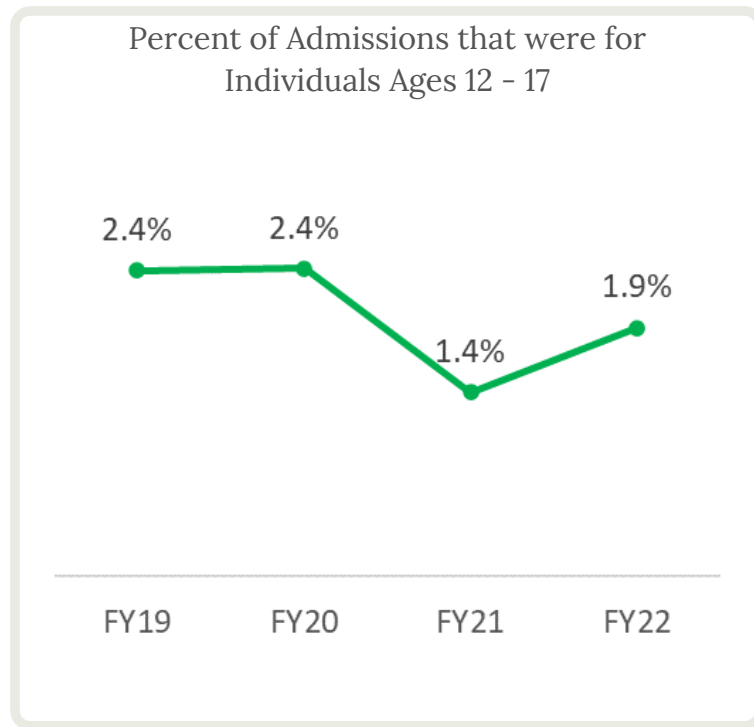
An overview of admissions for priority populations in the region is provided below. The total number of admissions in the region decreased by 18% between FY19 and FY22 (from 6,565 to 5,335). Admissions for five of these priority populations decreased by a greater amount than can be accounted for by the overall decrease in admissions.

Number of Treatment Admissions by Priority Population, LRE Region



Priority Population: Youth Ages 12-17

The number of admissions for youth ages 12 through 17 decreased 34% between FY19 and FY22 (from 156 to 103), with substantial decreases in Muskegon and Ottawa counties. As a proportion of all admissions, admissions for youth ages 12-17 are low and decreased from 2.4% of admissions in FY19 to 1.9% in FY22.

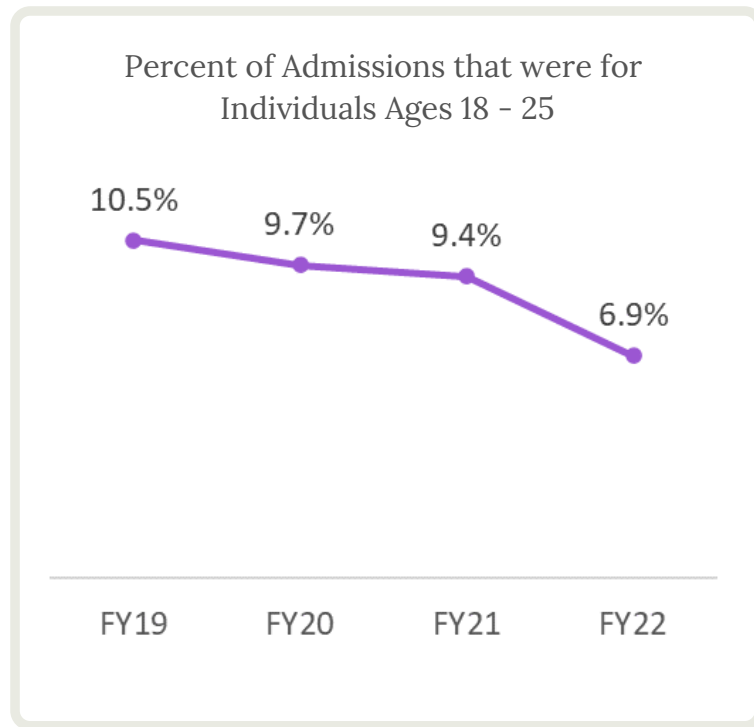


Number of Admissions for Individuals Ages 12 - 17

	FY19	FY20	FY21	FY22
Allegan	5	9	4	1
Muskegon	46	22	0	3
Kent	60	70	48	81
Ottawa	38	33	25	15
Lake	0	2	2	0
Mason	7	2	5	2
Oceana	0	0	0	1
Out of Region	0	0	0	0
REGION	156	138	84	103

Priority Population: Young Adults Ages 18-25

The number of admissions for young adults ages 18-25 decreased 47% between FY19 and FY22 (from 687 to 367), with substantial decreases in Allegan, Muskegon, and Ottawa Counties. As a proportion of all admissions, admissions for youth ages 12-17 are low and decreased from 2.4% of admissions in FY19 to 1.9% in FY22.

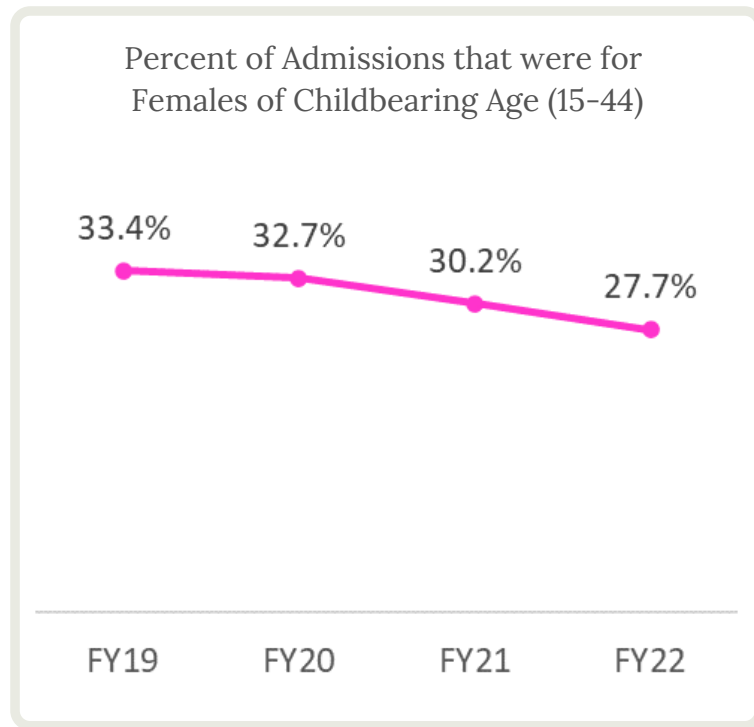


Number of Admissions for Individuals Ages 18-25

	FY19	FY20	FY21	FY22
Allegan	54	43	44	35
Muskegon	165	121	95	63
Kent	252	206	214	138
Ottawa	102	123	132	90
Lake	9	4	8	8
Mason	70	39	41	12
Oceana	30	22	13	14
Out of Region	5	3	4	7
REGION	687	561	551	367

Priority Population: Females of Childbearing Age (15-44)

Region-wide, between FY19 and FY22 the number of admissions for females in this age range decreased 33% (from 2,194 to 1,477) with substantial decreases in each county except Lake. As a proportion of all admissions, admissions for this population declined continually from 33.4% of admissions in FY19 to 27.7% in FY22.

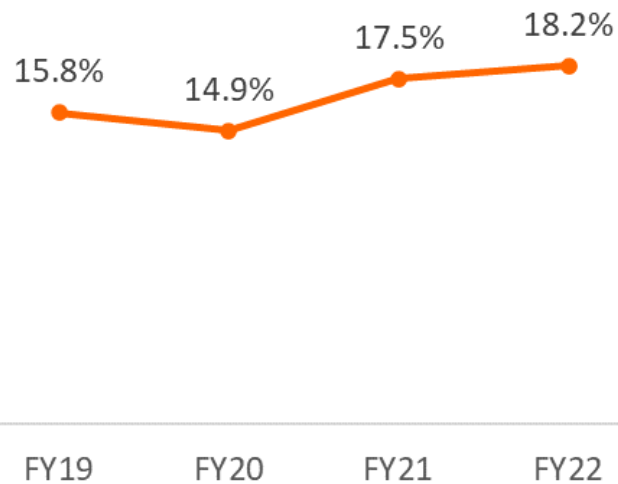


	Number of Admissions for Females of Childbearing Age (15-44)			
	FY19	FY20	FY21	FY22
Allegan	156	150	129	91
Muskegon	601	451	404	378
Kent	903	833	733	573
Ottawa	318	321	330	266
Lake	23	27	33	23
Mason	121	59	90	83
Oceana	63	44	57	46
Out of Region	9	7	5	17
REGION	2,194	1,892	1,781	1,477

Priority Population: African American

Region-wide, between FY19 and FY22 the number of admissions for African American individuals 6% (from 1,036 to 970) with a substantial decrease in Muskegon County while admissions increased for both Kent and Ottawa counties. Although the number of admissions decreased, the proportion of total admissions that were representing this population has increased overall with continual increases since FY20.

Percent of Admissions that were for Individuals with Race Identified as African American



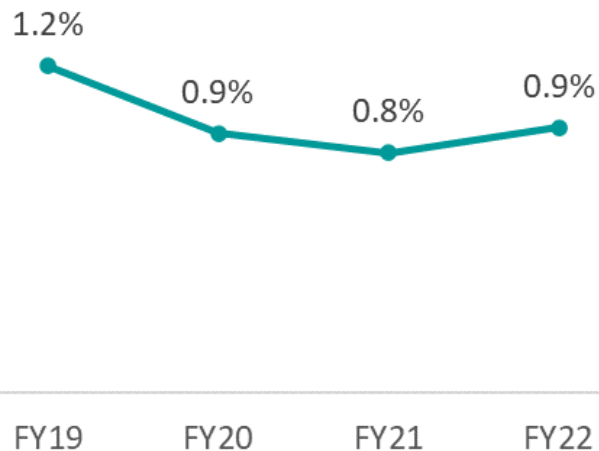
Number of Admissions with Race Identified as African American

	FY19	FY20	FY21	FY22
Allegan	8	20	17	13
Muskegon	373	218	245	229
Kent	594	560	686	623
Ottawa	47	56	71	91
Lake	6	3	8	6
Mason	5	2	2	3
Oceana	1	0	2	3
Out of Region	2	1	1	2
REGION	1,036	860	1,032	970

Priority Population: American Indian (non-Alaskan Native)

Region-wide, between FY19 and FY22 the number of admissions for American Indian individuals decreased 34% (from 76 to 50). The proportion of all admissions that were for this population remain very low and have decreased slightly since FY19.

Percent of Admissions that were for Individuals with Race Identified as American Indian



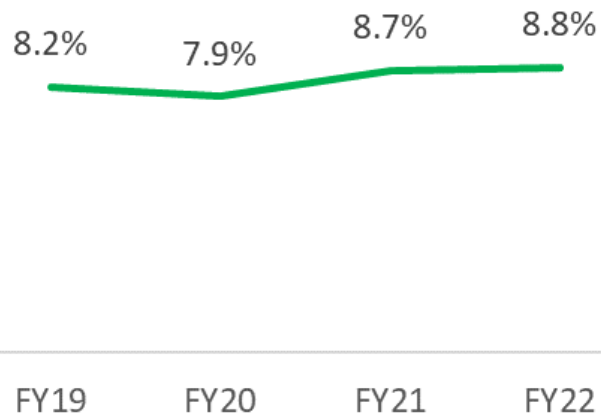
Number of Admissions for Individuals with Race Identified as American Indian

	FY19	FY20	FY21	FY22
Allegan	6	7	4	0
Muskegon	18	13	11	20
Kent	36	22	18	23
Ottawa	7	6	9	4
Lake	3	2	0	1
Mason	5	2	6	2
Oceana	1	1	2	0
Out of Region	0	0	0	0
REGION	76	53	50	50

Priority Population: Hispanic or Latino

Region-wide, between FY19 and FY22 the number of admissions for Hispanic or Latino individuals decreased 13% (from 540 to 470) with a substantial decrease in Kent County and a substantial increase in Ottawa County. Although the number of admissions decreased, the proportion of all admissions that were for this population remained relatively stable at around 8%.

Percent of Admissions for Individuals with Ethnicity Identified as Hispanic or Latino



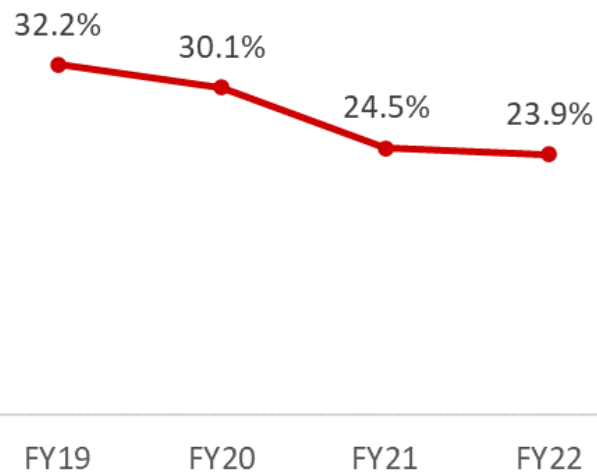
Number of Admissions for Individuals with Ethnicity Identified as Hispanic or Latino

	FY19	FY20	FY21	FY22
Allegan	31	31	29	27
Muskegon	63	49	37	60
Kent	279	206	235	194
Ottawa	99	123	163	151
Lake	3	3	4	3
Mason	29	16	12	7
Oceana	33	28	30	26
Out of Region	3	2	1	2
REGION	540	458	511	470

Priority Population: Persons with Opioid Use Disorder

Region-wide, between FY19 and FY22 the number of admissions for persons with an opioid use disorder decreased 40% (from 2,112 to 1,276) with a substantial reduction in all counties except Lake and Oceana. The percentage of total admissions that were for persons with an opioid use disorder also decreased between FY19 and FY22 (from 32.2% to 23.9%).

Percentage of SUD Treatment Admissions that were for Persons with an Opioid Use Disorder



Number of SUD Treatment Admissions for Persons with an Opioid Use Disorder

	FY19	FY20	FY21	FY22
Allegan	78	64	50	38
Muskegon	744	531	466	488
Kent	810	715	543	403
Ottawa	235	233	199	138
Lake	17	25	19	28
Mason	148	103	108	105
Oceana	70	50	54	63
Out of Region	10	16	5	13
REGION	2,112	1,737	1,444	1,276











Summary of Trends



The following pages provide a snapshot of trend data for all metrics targeted in the LRE SUD Strategic Plan for the region and each CMHSP.

Summary of Trends, LRE Region















Lakeshore Regional Entity

Treatment Access		FY17	FY18	FY19	FY20	FY21	FY22	Trend*
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	21.9%	21.1%	20.6%	20.2%	20.3%	21.9%	
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.3%	0.5%	0.3%	0.3%	0.3%	0.5%	
	↑ admissions with legal status as 'in jail' (% of all admissions)	7.6%	7.9%	8.4%	6.8%	5.5%	6.8%	
Persons with Opioid Use Disorder (OUD)	↓ avg days between request for MAT and first service	4.2	5.9	13.7	7.0	13.4	5.7	
	Maintain an average wait time of less than 3 days for persons with IVDU	4.2	5.7	6.6	6.4	9.8	7.1	
	↓ average days' time to service for Outpatient Level of Care for persons with IVDU	4.3	5.1	7.6	6.9	10.6	6.7	
Older Adults	↑ in # of admissions for individuals age 55-69	593	559	595	471	580	583	
Connection to Community Supports		FY17	FY18	FY19	FY20	FY21	FY22	Relative Change
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	17%	15%	18%	23%	19%	22%	
Women's Specialty Services	↑ # of pregnant women served	110	107	102	80	61	52	
	↑ # of pregnant women served by a Women's Specialty Provider	49	39	45	38	21	24	

*  Improving  Worsening  Relatively stable

LRE Region, continued

Engagement and Retention

		FY17	FY18	FY19	FY20	FY21	FY22	Trend*
Integrated Treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	4.8%	7.1%	6.1%	7.3%	10.5%	13.8%	
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next level of care w/in 7 days	16.9%	26.0%	28.7%	25.8%	26.7%	35.2%	
	↓ average # days between discharge and admission to next level of care following ST residential	1.6	2.0	2.0	2.4	1.6	1.8	
	w/in 7 days	15.4	15.3	15.5	17.3	14.6	14.2	
	7+ days	6.8	9.4	7.9	9.0	9.1	8.3	
	Overall	20.7%	19.7%	25.4%	19.1%	17.7%	18.2%	
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'	67.7%	66.3%	67.6%	73.5%	70.6%	54.3%	
	Detox	37.4%	50.2%	42.0%	51.7%	53.3%	49.5%	
Indicators of Successful Engagement	↑ % discharges from residential level of care with the reason as 'transfer/ completed level of care'	1.3%	2.9%	1.7%	1.5%	1.8%	18.5%	
	ST Res	15.2%	10.6%	11.9%	11.5%	10.5%	11.6%	
	↓ % of treatment episodes with no 2nd visit (% of all admissions)	83.4%	86.5%	87.3%	88.6%	88.1%	92.4%	
	↑ % of clients seen for 2nd appt w/in 14 days of initial service (of those with a 2nd encounter)	23.0	22.5	21.1	20.6	17.8	16.1	
	↑ average # of treatment encounters per treatment episode (all Levels of care)	38.5%	36.8%	37.8%	36.8%	34.7%	37.9%	
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	42.6%	40.4%	40.1%	40.9%	33.7%	41.7%	
	↑ % of discharges from outpatient w/ discharge reason as 'completed treatment'							

*  Improving  Worsening  Relatively stable

Summary of Trends, Allegan County

OnPoint

Treatment Access		FY17	FY18	FY19	FY20	FY21	FY22	Region FY22
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	37.0%	29.7%	34.8%	41.5%	39.9%	34.9%	29.5%
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.5%	4.1%	0.0%	0.0%	0.7%	2.7%	0.5%
	↑ admissions with legal status as 'in jail' (% of all admissions)	6.8%	9.2%	12.5%	6.2%	1.4%	3.4%	6.8%
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons w/an OUD	4.8	6.7	5.2	3.4	8.8	14.7	5.4
	↓ average days between request for service for Medication Assisted Treatment (MAT)	2.7	6.4	3.1	3.3	6.6	9.0	5.7
Rural Communities	↓ average days' time to service for Outpatient* services	10	4.2	5.5	5.1	17.7	28.1	10.3
Older Adults	↑ # of admissions for individuals age 55-69	17	28	25	31	24	22	583
*Non-intensive outpatient services and excluding medication assisted treatment								
Connection to Community Supports		FY17	FY18	FY19	FY20	FY21	FY22	Region FY22
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	8.6%	9.8%	20.2%	25%	18.1%	29.5%	21.6%
Women's Specialty Services	↑ # of pregnant women served	3	6	6	4	6	4	52

OnPoint, Allegan County, continued

Engagement and Retention		FY17	FY18	FY19	FY20	FY21	FY22	Region FY 22
Integrated Treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	5.9%	2.7%	7.0%	4.9%	5.1%	19.4%. (N=27)	13.8%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next level of care w/in 7 days	37.5%	43.8%	40.0%	32.1%	9.4%	16.7% (N=1)	35.2%
	↓ average # days between discharge and admission to next level of care following ST residential							
	w/in 7 days	0	1.3	2.4	3.3	4.3	6.0 (N=1)	1.8
	7+ days		15.3	14.8	12.8	15.5	18.3 (N=4)	16.7
	Overall	0	6.0	6.2	7.7	13.4	15.8 (N=5)	8.3
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'							
Indicators of Successful Engagement	Detox	16.7%	39.4%	13.2%	9.7%	20.4%	61.9%	18.2%5
	ST Res	25.0%	55.0%	54.3%	57.9%	53.4%	63.2%	4.3%
	↑ % discharges from residential level of care with the reason as 'transfer/ completed level of care'							
	Detox	29.2%	36.4%	73.7%	74.2%	51.0%	0%	49.5%
	ST Res	0%	5.0%	2.2%	5.3%	0%	10.5%	18.5%
	↓ % of Outpatient* treatment episodes with no 2nd visit	13.1%	7.4%	12.7%	16.4%	17.2%	17.4%.	19.2%
Indicators of Successful Engagement	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	61.1%	72.1%	76.5%	72.5%	71.8%	62.5%	84%
	↑ average # of treatment encounters per treatment episode	17.1	18.6	17.0	16.2	8.6	9.5	12.2
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	24.4%	28.2%	38.2%	48.1%	40.8%	60.9%.	41.7%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	16.8%	23.5%	25.0%	23.5%	21.5%	23.4%	25.6%

*Non-intensive outpatient services and excluding medication assisted treatment

Summary of Trends, Muskegon County

HealthWest

Treatment Access		FY17	FY18	FY19	FY20	FY21	FY22	Region FY 22
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	37.0%	29.7%	34.8%	41.5%	39.9%	34.9%	29.5%
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.2%	0.2%	0.4%	0.6%	0.4%	0.3%	0.5%
	↑ admissions with legal status as 'in jail' (% of all admissions)	11.8%	14.1%	16.5%	17.5%	15.6%	17.1%	6.8%
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons with an OUD	3	5.4	16.6	7.4	16	3.9	5.4
	↓ average days between request for service for Medication Assisted Treatment (MAT)	1.4	5.2	27	9.6	28.5	4.8	5.7
Rural Communities	↓ average days' time to service for Outpatient* services	7.7	7.8	6.6	7	7.2	5.9	10.3
Older Adults	↑ # of admissions for individuals age 55-69	172	128	160	83	84	78	583
Connection to Community Supports		FY17	FY18	FY19	FY20	FY21	FY22	Region FY21
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	4.8%	5.5%	6.9%	10.2%	9.9%	16.1%	21.6%
Women's Specialty Services	↑ # of pregnant women served	41	35	34	22	14	24	52

*Non-intensive outpatient services and excluding medication assisted treatment

Muskegon County, continued

Engagement and Retention		FY17	FY18	FY19	FY20	FY21	FY22	Region FY 22
Integrated Treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	0.4%	2.7%	8.2%	10.8%	8.6%	13.9%. (N=123)	13.8%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next level of care w/in 7 days	15.5%	37.5%	12.8%	22.2%	26.9%	41.5% (N=17)	35.2%
	↓ average # days between discharge and admission to next level of care following ST residential							
	w/in 7 days	1.3	2.4	2.2	1.4	1.7	2.9 (N=17)	1.8
	7+ days	11.1	17.5	18.1	14.8	18.2	18.6 (N=9)	16.7
	Overall	6.2	7.3	11.7	7.3	8.6	8.3 (N=26)	8.3
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'							
Indicators of Successful Engagement	Detox	8.8%	22.2%	12.9%	30.6%	27.6%	18.2%	18.2%
	ST Res	72.1%	71%	73.1%	72.5%	3.3%	56.9%	54.3%
	↑ % discharges from residential level of care with the reason as 'transfer/ completed level of care'							
	Detox	1.1%	0%	20%	14.3%	12.1%	23.2%	49.5%
	ST Res	0%	0%	0%	0.7%	0.7%	18.2%	18.5%
	↓ % of Outpatient* treatment episodes with no 2nd visit	20.7%	22%	32.3%	43.3%	28.7%	23.7%.	19.2%
	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	66.6%	73.1%	74.3%	74.5%	84.2%	88.3%.	84%
	↑ average # of treatment encounters per treatment episode	16.2	13.6	12.8	17.4	10.2	11.7	12.2
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	37.6%	26.7%	31.5%	21.7%	20.1%	27%.	41.7%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	27.7%	20.5%	17.9%	16%	10.7%	12.4%	25.6%

*Non-intensive outpatient services and excluding medication assisted treatment

Summary of Trends, Kent County

Network 180

Treatment Access		FY17	FY18	FY19	FY20	FY21	FY22	Region FY22
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	16.2%	14.8%	15.9%	16.2%	14.4%	18.9%	29.5%
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.3%	0.5%	0.3%	0.3%	0.2%	0.4%	0.5%
	↑ admissions with legal status as 'in jail' (% of all admissions)	4.4%	4.4%	4.5%	3.1%	1.8%	2.9%	6.8%
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons with an OUD	5	5.1	4.1	6.5	6.7	5.6	5.4
	↓ average days between request for service for Medication Assisted Treatment (MAT)	8.5	6	4	7.1	6.6	6.1	5.7
Rural Communities	↓ average days' time to service for Outpatient* services	1.4	2	5.1	5.8	11.2	7.6	10.3
Older Adults	↑ # of admissions for individuals age 55-69	288	292	277	241	335	317	583
*Non-intensive outpatient services and excluding medication assisted treatment								
Connection to Community Supports		FY17	FY18	FY19	FY20	FY21	FY22	Region FY22
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	16.1%	10.8%	15.5%	20.3%	16.6%	20.6%	21.6%
Women's Specialty Services	↑ # of pregnant women served	47	49	40	43	26	17	52

Kent County, continued

Engagement and Retention

		FY17	FY18	FY19	FY20	FY21	FY22	Region FY 22
Integrated Treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	10.7%	12.4%	6.5%	8.1%	11.5%	11.3%. (N=202)	13.8%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next level of care w/in 7 days	16.6%	22.4%	28.2%	24.1%	26.6%	32.3% (N=54)	35.2%
	↓ average # days between discharge and admission to next level of care following ST residential	2	1.9	1.9	2.2	1.5	1.1 (N=52)	1.8
	w/in 7 days	14	20	18.2	19	18.4.	17.6 (N=42)	16.7
	7+ days	6.8	10.8	7.8	8.9	9.6.	8.5 (N=94)	8.3
	Overall							
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'							
Indicators of Successful Engagement	Detox	24.9%	17.1%	28.9%	17.6%	10.7%	12.8%	18.2%
	ST Res	69.4%	66.8%	63.2%	75.9%	74.4%	55.8%	54.3%
	↑ % discharges from residential level of care with the reason as 'transfer/ completed level of care'							
	Detox	50.4%	60.4%	46%	57.6%	65.2%	64.4%	49.5%
	ST Res	0%	1.7%	2.1%	0.5%	1%	16.2%	18.5%
	↓ % of Outpatient* treatment episodes with no 2nd visit	14.6%	13%	17.2%	14.1%	9.2%	26.8%.	19.2%
Indicators of Successful Engagement	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	76.9%	82.4%	78.7%	76.7%	79.6%	80%.0	84.0%
	↑ average # of treatment encounters per treatment episode	19.3	22.4	20	19.5	16.6	9.4	12.2
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	50.7%	46.7%	39.2%	36.7%	26.4%	44%	41.7%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	30.9%	31.1%	30.6%	34.4%	54.9%	33.5%	25.6%

*Non-intensive outpatient services and excluding medication assisted treatment

Summary of Trends, Ottawa County

Community Mental Health of Ottawa County

Treatment Access		FY17	FY18	FY19	FY20	FY21	FY22	Region FY22
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	28.3%	32.7%	28.6%	26.4%	28.7%	28.3%	29.5%
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	0.1%	0.2%	0.7%	0.1%	0.5%	0.5%	0.5%
	↑ admissions with legal status as 'in jail' (% of all admissions)	0.1%	0.8%	0.3%	2.5%	2.6%	0.5%	6.8%
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons with an OUD	5	6.5	9.6	5.9	6.2	6.4	5.4
	↓ average days between request for service for Medication Assisted Treatment (MAT)	3.7	6.9	13.5	4.4	5.2	6.6	5.7
Rural Communities	↓ average days' time to service for Outpatient* services	7.8	5.7	5.8	8.5	10.2	13.5	10.3
Older Adults	↑ # of admissions for individuals age 55-69	65	66	84	75	111	118	583
*Non-intensive outpatient services and excluding medication assisted treatment								
Connection to Community Supports		FY17	FY18	FY19	FY20	FY21	FY22	Region FY22
Support Groups	↑ % of discharges with clients reporting attendance at a support group in past 30 days	40%	36.7%	34.7%	37.8%	26.2%	26.4%	21.6%
Women's Specialty Services	↑ # of pregnant women served	14	10	16	8	6	5	52

Ottawa County, continued

Engagement and Retention

		FY17	FY18	FY19	FY20	FY21	FY22	Region FY 22
Integrated Treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services	0.2%	1.5%	1.3%	1.7%	10.3%	17.7%. (N=141)	13.8%
Continuity of Care	↑ % of clients discharged from ST residential that transitioned to the next level of care w/in 7 days	44.4%	29.4%	44.4%	26.5%	46.4%	39.1% (N=9)	35.2%
	↓ average # days between discharge and admission to next level of care following ST residential							
	w/in 7 days	0	1.2	1.9	2	0.2	1.7 (N=7)	1.8
	7+ days	15.5	19	18.3	17.6	11.5	12 (N=8)	16.7
	Overall	5.2	6.3	6	11.1	3.8	7.2 (N=15)	8.3
	↓ % of discharges from detox and ST Res with reason as 'completed treatment'							
Indicators of Successful Engagement	Detox	21.2%	20%	19%	23.5%	41.4%	16.4%	18.2%
	ST Res	69.3%	70.7%	70.7%	69.1%	62.1%	45.6%	54.3%
	↑ % discharges from residential level of care with the reason as 'transfer/ completed level of care'							
	Detox	1.9%	0%	4.8%	23.5%	11.4%	41.1%	49.5%
	ST Res	0%	0%	0%	2.1%	2.1%	23.3%	18.5%
	↓ % of Outpatient* treatment episodes with no 2nd visit	19.1%	16.5%	15.6%	19.8%	20.7%	18.5%.	19.2%
Indicators of Successful Engagement	↑ % of clients seen for 2nd appt w/in 14 days of initial Outpatient* service (of those w/ a 2nd encounter)	72.3%	79.3%	85.4%	73.1%	69.3%	73.6%.	84%
	↑ average # of treatment encounters per treatment episode	11.4	16.1	15.3	13.9	15.7	12.6	12.2
	↓ % of discharges with reason as 'dropped out' for all levels of care (% of all admissions)	42.5%	44%	40.7%	43.7%	34.8%	34.5%	41.7%
	↑ % of discharges from Outpatient* services w/ discharge reason as 'completed treatment'	28.7%	26.9%	27.4%	27.4%	26.7%	38%	25.6%

*Non-intensive outpatient services and excluding medication assisted treatment

Summary of Trends: Lake, Mason and Oceana Counties

West Michigan Community Mental Health Services

Treatment Access

			FY17	FY18	FY19	FY20	FY21	FY22	Region FY22
Criminal Justice Involved	↑ admissions with legal status as on probation (% of all admissions)	Lake	22.4%	18.2%	17.7%	10.6%	19.7%	23.1%	29.5%
		Mason	30.7%	27.8%	26.1%	26.3%	20.1%	29.3%	
		Oceana	22.6%	22.7%	19.0%	20.0%	17.1%	24.4%	
	↑ admissions with legal status as diversion pre or post booking (% of all admissions)	Lake	0%	0%	0%	0%	0%	0%	0.5%
		Mason	0%	0.3%	0.3%	0%	0.7%	0%	
		Oceana	0.6%	0%	0%	0%	0%	0.6%	
	↑ admissions with legal status as 'in jail' (% of all admissions)	Lake	13.3%	18.2%	9.7%	10.6%	26.3%	0.5%	6.8%
		Mason	22.7%	19.7%	16.3%	10.0%	11.3%	12.1%	
		Oceana	16.1%	15.2%	10.6%	9.4%	13.0%	19.4%	
Persons with Opioid Use Disorder (OUD)	↓ average days between request for service and first service for persons with an OUD	Lake	2	3.2	5.1	3.2	3.1	5.5	5.4
		Mason	3.9	7.0	4.7	5.0	5.4	6	
		Oceana	4.2	6.1	13	4.3	4.2	6.6	
	↓ average days between request for service for Medication Assisted Treatment (MAT)	Lake	1.6	9.0	7.0	2.3	1.4	6.2	5.7
		Mason	3	9.3	3.8	2.0	3.5	5	
		Oceana	2.3	6.7	22.4	1.3	1.2	6	
Rural Communities	↓ average days' time to service for Outpatient* services	Lake	5.9	5.9	6.0	6.3	7	9.9	10.3
		Mason	5.2	5.3	5.5	6.3	8.6	9.2	
		Oceana	6.5	5.3	5.3	6.8	7.4	9.4	
Older Adults	↑ # of admissions for individuals age 55-69		50	44	49	39	26	48	583

Connection to Community Supports

			FY17	FY18	FY19	FY20	FY21	FY22	Region FY22
Support Groups	↑ % of discharges with clients attending a support group in past 30 days	Lake	15.2%	29.3%	40%	43.1%	52.8%	19.7%	21.6%
		Mason	32.7%	39.5%	42.1%	40.4%	38.7%	29.6%	
		Oceana	19.5%	29.3%	33.8%	24.4%	28%	21.9%	
Women's Specialty	↑ # of pregnant women served		4	5	6	2	7	2	52

Lake, Mason and Oceana Counties, Continued...

Engagement and Retention			FY17	FY18	FY19	FY20	FY21	FY22	Region FY22
Integrated Treatment	↑ in % of clients w/ co-occurring diagnosis that received integrated services		0.7%	3.3%	4.2%	7.3%	13.5%	14.9%	13.8%
Continuity of Care	↑ % of clients discharged from ST Res that successfully transitioned to the next level of care w/in 7 days		9.3%	27.1%	32.7%	30.8%	26.8%	40.4%	35.2%
	↓ average # days between discharge and admission to next level of care from ST residential	w/in 7 days	1.8	2.4	2.3	3.7	2.6	2.7 (N=18)	1.8
		7+ days	15.4	15.3	15.5	17.3	14.6	14.2 (N=11)	16.7
		Overall	10.5	7.2	7.6	9.7	7.9	7 (N=29)	8.3
	↓ % of discharges from detox & ST Res with reason as 'completed treatment'	Detox	15.6%	21.9%	28.8%	22.4%	36.3%	27.1%	18.2%
		ST Res	49.3%	48.7%	78%	75.3%	69.6%	51.5%	54.3%
	↑ % discharges from detox and residential level of care with the reason as 'transfer/ completed level of care'	Detox	50%	53.1%	48.1%	51.7%	46.3%	50%	49.5%
		ST Res	13.3%	20.5%	6.1%	6.2%	7.6%	23.7%	18.5%
Indicators of Successful Engagement	↓ % of Outpatient (exc. MAT) treatment episodes with no 2nd visit (% of all admissions)		10.1%	8.7%	13.1%	10.2%	9.3%	9.3%	19.2%
	↑ % of clients seen for 2nd appt w/in 14 days of initial OP (exc. MAT) service (of those with a 2nd encounter)		80.7%	81.9%	72.8%	79.1%	81.6%	92.6%	84%
	↑ average # of treatment encounters per treatment episode		21.7	21.9	23.3	21.7	24.4	17.9	12.2
	↓ % of OP discharges reasons as 'dropped out' (% of all admissions)		40.5%	54.3%	61.4%	69.5%	64.3%	64.2%	41.7%
	↑ % of discharges from outpatient w/ discharge reason as 'completed treatment'		39.4%	30%	20.4%	11.5%	17.6%	11%	25.6%

FY 22 Impact Report Information for SUD Treatment

- **SOR2/3-** We served 229 people with Jail MAT and Recovery Coaching and 862 people with harm reduction services and naloxone via the Mobile Health Unit.
- **Native Grant-** in FY 22 we served 26 indigenous individuals with behavioral health services.
- **WSS**
 - This year with women's specialty dollars we were able to take mothers and their children back to school shopping in the fall, and took the mother's shopping for Christmas presents for their children.
 - We were able to provide onsite childcare, so that women can come to outpatient care and just focus on themselves for an hour.
 - This year we piloted a teen mentor program for young sons of moms in SUD treatment. It has shown some promising outcomes, especially with respect to the dynamic of the father's involvement in the family unit.
 - We've placed a staff person at the public defenders office, building relationships, educating them, and working on cases we have in common.
- **ARPA/COVID Grants:**
 - Public Housing Support: Placing a therapist and a recovery coach at a public housing complex to provide services and support to residents.
 - New OBOT Program: 119 clients were served with a 71% retention rate.
 - Mother-Child Recovery Residence: The grant funds the employment of two part-time House Managers, on-site services provided by a Master's Level Clinician, and improvements to the living spaces through the purchase of needed supplies and furnishings. House Managers are individuals with lived experience navigating substance use disorders who are in recovery and are uniquely poised to support and connect with the residents.
 - Engagement Center: Working with a local homeless shelter working to interest people in treatment and recovery. Two Recovery Coaches have tracked relationships with 319 individuals thus far.
 - Seeking Safety for African American Men: The therapist has held 42 group sessions, with 40 individuals attending the groups. The therapist is seeing 3 adults and 12 youth for one-on-one therapy who were group participants. The therapist has also visited 59 community sites performing outreach and engagement for this program.