As GHS begins FY20, it is important to assess where we have come in the previous year. Some of the larger achievements of FY19 include releasing a COD Competency and Standards policy, completing a COD training needs assessment of GHS staff and providers, re-establishing the GHS SUD Advisory Council that meets monthly, providing technical assistance to GHS departments and providers to complete a self-assessment tool, and implementing a COD Training Series training over 450 professionals in Genesee County. Baseline data for FY20 includes: no secured funding for training program, 10% of MI-FAST recommendations implemented for GHS ACT team, one GHS department with self-assessment complete, no county-wide group who meets around the topic of COD, no GHS COD training plan, 0% of the IDDT supervising staff have a CCS credential. The objectives listed below support GHS’ overall goal to improve the COD treatment service capacity and delivery of all GHS programs including network providers. GHS will continue to utilize internal quality improvement processes to achieve the listed objectives for this fiscal year.

**Quarter 1 (October 2019 - December 2019):**

**OBJECTIVE 1:** By December 31, 2019, submit a proposal to Region 10 for funding to support a training program for GHS employees and Genesee County providers

**OBJECTIVE 2:** By December 31, 2019, implement 50% of the MI-FAST recommendations to improve GHS ACT team fidelity (ie. IDDT outcomes monitoring)

**OBJECTIVE 3:** By December 31, 2019, implement the DDCMHT or COMPASS-EZ assessment for GHS departments

**OBJECTIVE 4:** By December 31, 2019, create a county wide COD learning collaborative with representation from GHS departments and providers that meets quarterly to discuss implementation and progress of COD quality measures

**Quarter 2 (January 2020 – March 2020):**

**OBJECTIVE 5:** By January 31, 2020, conduct an annual provider assessment and survey of GHS staff and provider network on clinical training needs COD

**OBJECTIVE 6:** By January 31, 2020, identify GHS staff COD training plan with phases: who, what (MI, DBT skills, other EBPs, secondary trauma, etc.), where, with goals/objectives for outcomes and plans to measure

**OBJECTIVE 7:** By March 31, 2020, review and revise all GHS COD policies

**OBJECTIVE 8:** By March 31, 2020, assure 100% of supervising staff of the Integrated Dual Disorder Treatment (IDDT) and Contingency Management (MST CM) programs possess a CCS (Certified Clinical Supervisor) credential (or development plan) from Michigan Certification Board for Addiction Professionals (MCBAP)

**OBJECTIVE 9:** By March 31, 2020, assure that GHS clinical programs that serve individuals with COD, contain minimally one staff member who is a Substance Abuse Treatment Practitioner (SATP) or Substance Abuse Treatment Specialist (SATS) as defined by Michigan PIHP/CMHSP Provider Qualifications

**Quarter 3 (April 2020 – June 2020):**

**OBJECTIVE 10:** By June 30, 2020, ensure COD competencies are included in staff job descriptions in positions with high prevalence of COD consumers served

**Quarter 4 (July 2020 – September 2020):**
OBJECTIVE 11: By September 30, 2020, implement the remainder of the GHS staff COD training phases, identify gaps and modify the plan.