

System Management Group
Executive Directors' Minutes
October 10, 2011

Present:

Cary Moller, CAPS
Geoff Heatherington, PCMH
Jennifer Lief, PCMH
Laura Hammack, Bridgeway

Scott Smith, CAPS
Teri Morgan, MC A & D
Tomoko Gersch, Clear Paths
Trish Davis, MC A & D

Absent: Annee Belanger, Advocate

I. Announcements and Introductions

- Jennifer from Polk County talked about their 2nd chance act grant for \$303,000 that will be used to provide services in the Jail for the next two years to help people transition into Polk County drug and alcohol or mental health services. Mostly will be people with co-occurring conditions, high risk & medium risk criminality, and all females.
- Laura from Bridgeway announced that they have a new counselor for A & D outpatient services.
- Trish from Marion County announced that they completed there first Systems Trauma group and it was a success. The name will be changed for the next session to Power and Recovery. The next class will be co-ed.

II. Purpose of Empanelled Clinical Supervisor Meetings – Scott/Everyone

Discuss purpose of monthly meetings

- Keep us updated with each other
- New ideas
- Strategize system response
- Talk about how to achieve and improve outcomes
 - Development of Evidence based practices
- Review changes and updates
- Help with training issues and workforce development

What do supervisors want/expect from monthly meetings?

- Ideas about working with adolescents
- How many adolescents are being served currently
 - Bridgeway - 50-65
 - Clear Paths-16

- MC Salem - 15-20
- MC Woodburn - 12-20
- Polk - 18-25

III. Data Tracking – Cary, Scott/Everyone

Why is data being collected?

- Help respond to community need
- Help with outcome measures that are going to be coming from AMH

What is done with the data collected?

- Reported back to the SMG group.

Review suggested changes to data collection sheet.(Contract/OHA handout)

- Successful completion. If a client completes 2/3 of their program and is drug and alcohol free at the time of leaving it can be considered complete.
 - Will change the form to match AMH definitions
- Broaden the definition of “family” supports to include social and natural supports
- Add a place to know if client is getting Mental Health treatment somewhere else
- Primary care provider

Outcome data report-Family/Social/Community based support, adolescent treatment completion rate Jan-July 2011 (ISSR handout)

- The numbers don’t seem to be reflecting the work that is being done

CPMS Payor Code 65-Indigent funds, successful if 2/3 of ISSP is completed and AOD free.

- Successful completion. If a client completes 2/3 of their program and is drug and alcohol free at the time of leaving it can be considered complete.

IV. Clinical Practice- Scott/Everyone

Review ISSR as it relates to family and community based support (handout)

- All kinds of support can be considered. Family of origin, family of choice, natural supports (sponsor, pastor, friend, etc.).

Agency philosophy as it relates to family and community based support

- MC A & D presents it as part of the program to bring someone for support. Part of the assessment to have someone listed as a support.
- Clear paths has a great family member questionnaire

Next Meeting November 14, 2011
Minutes by Janette Cotton