

**Department of Human Services
Office of Mental Health and Addiction Services
Children's System Advisory Committee
March 24, 2006**

IN ATTENDANCE: Bob Lieberman, Lynne Saxton, Shelley Joyce, Paula Bauer Jammie Farish, Debra Depew, Angela Kimball, Bruce Abel, Kris Anderson, Phil Cox, Bill Wellard, Mitch Anderson, Lee Coleman, Mark McKechnie, Diane Wells (by Phone), Christianna Hughes, Michelle Westfall, Carol Wire, Dr Kirk Wolfe,

OMHAS: Bob Nikkel, Madeline Olson, Ralph Summers, Bill Bouska, Judy Rinkin, Jeannine Beatrice, Matthew Pearl, Kathleen Burns, Janet Zeyen-Hall (note taker)

GUESTS: Nancy Koroloff, PSU, Kathy Koontz PSU, Mary Suever-Moore/Pendleton Academy, George Longden/Family Friends Day Treatment

ABSENT: Ron Sipress, Jeanne Schulz, Ann O'Connell, Maria Martinez, Diane Wells, Dr. Larry Marx, Lisa Smith, Roxanne Miller, Jean Vanlue, Janet Arenz

TOPIC	Key Discussion Points	Action/Task/Decision Log	Responsible Party	Due Date
Introductions/ Agenda Review / Minute Review/ Approval	Bob Lieberman and Jammie Farish Agenda Review February Minute Discussion -- People that are on the phone need to be moved to in attendance. Motion made to approve with changes.	Lee Coleman/ Motion Michelle Westfall/ Second - Passed		
Professional Profile	Bruce and Amelia Abel Amelia – not able to attend.		Bruce	
Committee Business	A. Sharing of information and feed back The family homework form will be sent out again and after each CSAC meeting to keep a flow of continuity with current updated information on family experience, skills, and updates on area's we have and		Jammie	

	haven't reached. Judy will also be getting the Professional version of the form out to obtain the same information.		Judy	
Policy Issues	<p>A. Policy Option Package – Bill Bouska</p> <p>The list that CSAC developed at the last meeting (see February Minutes) to Bob Nikkel and Madeline Olson (OMHAS). The following are Option Packages being worked on.</p> <ul style="list-style-type: none"> • Children/Families not Medicaid eligible/under insured, and no insurance • Services for transition age youth • Peer to Peer with family members (professional service) • Mental health assessments and identified services for youth identified through Juvenile Justice screening process • Services for youth with co-occurring Alcohol and Drug and Mental Health needs • Early Childhood Mental Health • Full Time FTE for a Family Coordinator • Juvenile Psychiatric Security Review Board <p>The work that was done at the last meeting to comprise the list and prioritize it was not wasted and is being utilized in the development of Policy Option packages.</p>		Bill	
	<p>B. Grievance Issue Brief – Kris Anderson</p> <p>No comments were received from CSAC members. Two forms are not needed; it is the responsibility of the Professional to complete/guide, the family through the next steps towards a grievance if resolution of a “concern/comment” is not reached. It is not the</p>	Complete form for presentation at next meeting.	Kris Anderson Debra Depew Lee Coleman Mitch Anderson	April Meeting

	responsibility of the family to fill out another form. Professionals are tasked with talking and approving using another form.			
	C. Policy up-date Foster Care / Homeless Youth – This policy recommendation has been placed on the PAMAC agenda for April 6 th . Jammie will be presenting the Policy.		Judy	
System Monitoring	A. Children’s System Change Analysis – Bob and Jammie Portland State University (PSU) is formally evaluating the Children’s System Change Initiative. The discussions today about the strengths and concerns with CSCI will feed into the PSU’s evaluation. Describe that CSAC distributed a survey for the purpose of receiving strengths, concerns that have occurred since the implementation of CSCI October 1, 2005. CSAC divided into three groups; State level, Regional (MHO) level, and Local level for discussion and review input submitted though the CSAC survey process.	Continue talking about questions	Bob/Jammie	April / May Agenda
	B. Bob Nikkel, Madeline, Olson, Ralph Summers CSAC members presented the following Strengths, Concerns and Solutions/Action Steps. Concerns #1 Lack of understanding or vision regarding Local system of care. o Who is change agent?			

	<ul style="list-style-type: none"> ○ 4 C's committees – functioning? Transparency ○ CASII as gate keeper ○ Family participation ○ Integration ICTS, ITS, outpatient money in silos ○ Different interpretations across the state – differing philosophies <p>#2 Eligibility/Enrollment</p> <ul style="list-style-type: none"> ○ Resource gaps and inequities <p>#3 Role Confusion</p> <p>#4 Funding</p> <ul style="list-style-type: none"> ○ Not Enough ○ Allocation of available dollars ○ Resource gaps and inequities ○ Open Card Enrollment ○ Cost of System Change <ul style="list-style-type: none"> Risk – Cost of Development ○ Expectations exceed dollars ○ MHO's expending enough, being creative enough, hiding money? <p>#5 Transition into community – Complex coordination issues w/ local partners. (No notification at times.)</p>			
	<p>Strengths</p> <ul style="list-style-type: none"> ○ Re-Configuring Service based on strengths and needs ○ Flexibility ○ Family Involvement “at the table” ○ New roles for families (as providers) ○ 4C – committee are developing and evolving ○ Opportunity to use dollars flexibly 			

	<ul style="list-style-type: none"> ○ Shared ownership for planning. ○ Creating new connections ○ Family involvement/Integrated System Planning & Design ○ Child and Family Teams ○ Strong Advisory Councils ○ More people/entities are talking ○ Doing things differently to reflect regions ○ Design of System Mandated community based service ○ Use of CASII & tools to access. 			
	<p>Solutions/Action Steps –</p> <p>#1 Revisit vision – clear up definitions, understanding. Define differential roles. More frequent communications.</p> <p>#2 Revisit letter of agreement. Give local feedback-clarifying roles. State Level –direction, leadership, ect...</p> <p>#3 TA/Training: Wraparound, funding issues – blended funding – develop local policies to blend ITS, ICTS, outpatient.</p> <p>#4 Ongoing plan to increase family involvement, mentorship, leadership training.</p> <p>#5 Interim indicators – short term/long term.</p> <p>#6 Develop performance measure.</p> <p>#7 MHO’s do local needs assessment – Resources into communities</p> <p>#8 Directory – Who to go to for what at OMHAS – Statewide.</p> <p>#9 Establish more uniform system, procedures, and processes (CASII?)</p> <p>#10 Funding</p> <ul style="list-style-type: none"> ○ More resources at community level 	<p>Directory to be sent out</p>	<p>Judy Rinkin</p>	<p>Next Week</p>

	<ul style="list-style-type: none"> ○ Accountability for current dollars. ○ Open care/enrollment issues. ○ Integrate across systems ○ Clarify expectations when Kids move from one funding responsibility to another. ○ Blend funding ITS, ICTS, outpatient. <p>#11 Transition</p> <ul style="list-style-type: none"> ○ Active case planning by team ○ Role clarification – task assignment ○ Notice/Discharge planning at admission. 			
	<p>NEXT meeting – April 28, 2006 WESD</p>			