

**Community Service Network 6 Meeting
Sheraton Hotel, So. Portland
October 19, 2007**

Approved Minutes

Members Present:

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| <ul style="list-style-type: none"> • Don Harden, Catholic Charities • Karen Evans, Consumer Council of Maine • Susan Percy, Creative Work Systems • Phoebe Prosky, Freeport Counseling • Glenn Shelton, Goodwill Industries • Burma Wilkins, Mercy Hospital • Pam Dyer, Mid Coast Hospital | <ul style="list-style-type: none"> • Jennifer Tingley Prince, NOE • Jon Bradley, Preble Street • Carl Cappello, Shalom House Inc • Amy Thomas, Smart Child & Family • Joyce Cotton, Spring Harbor Hospital • Catherine Snow, Spurwink/Portland Help Ctr | <ul style="list-style-type: none"> • Alex Veguilla, Sweetser Peer Center • Kelli Star Fox, Transitions Counseling • Christine Holler, Transition Planning Group • Sarah Rawlings, VOA • Joanie Klayman, Youth Alternatives/Ingraham |
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Members Absent:

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| <ul style="list-style-type: none"> • Amistad • AIN • Casco Bay Mental Health • Community Mediation Services • Counseling Services Inc. (excused) | <ul style="list-style-type: none"> • Crossroads for Women • Gorham House • Hawthorne House • MMC/Vocational Services (excused) • NAMI Families (excused) | <ul style="list-style-type: none"> • Parkview Adventist Medical Center • PSL Services • Sweetser (excused) • Work Opportunities Unlimited |
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Alternates/Others present:

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| <ul style="list-style-type: none"> • Todd Goodwin, Community Counseling Center | <ul style="list-style-type: none"> • Lori Tully, Transitions Counseling |
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Staff present: DHHS/OAMHS: Don Chamberlain, Marya Faust, Leticia Huttman, Jamie Morrill, Carlton Lewis. Muskie School: Elaine Ecker.

Agenda Item	Presentation, Discussion
I. Welcome and Introductions	Carlton opened the meeting and participants introduced themselves.
II. Review and Approval of Minutes	The September minutes were approved as written.
III. Budget Update	Ron Welch was unable to attend the meeting to give an update on the budget process.
IV. Work Plan Subcommittee Reports	<p>Housing – Standards 12(1), 13, 14</p> <p>The subcommittee had no report per se, except to remind members that Joe Brannigan is working on the BRAP funding issue, as directed at the last CSN meeting.</p> <p>Later in the meeting, Don Harden asked for more clarification on his role as the CSN contact person for responses on the BRAP effort. Since the last meeting at which the CSN authorized Joe to draft a notice to government officials about the shortage of BRAP funds, the following took place: Draft notice was sent to CSN 6 members for comment and Joe's office sent the final notice to a list of government officials a few days later (Sept. 28). On Oct. 2, as previously directed by the CSN 6 membership, the notice, some talking points, and the mailing list were forwarded to all members of the CSNs for their information and to act upon as they saw fit. This final notice erroneously listed Elaine Ecker as the person for recipients to contact with responses. Don Harden was asked to take over that role and he agreed to do so. To date, he has received no responses.</p>

Agenda Item	Presentation, Discussion
	<p>Vocational – Standard 26: No subcommittee members were present to report.</p> <p>Recovery – Standard 33 Members received a handout of minutes of the Recovery subcommittee meeting of Oct. 10, and Karen Evans reviewed it with the group: Andrew Hardy from the QI met with them, and provided copies of the results of the 2006 Consumer Satisfaction Survey. This led to a discussion of the sort of mental health system they hope to see in the region and a follow-up discussion on the data that currently exists that would indicate how well things are going. Karen reviewed the elements of a compassionate system of care the subcommittee listed, as well as the current data sources the subcommittee wants to look at. The subcommittee plans to meet again on Oct. 31st, and will have a report for the next CSN meeting. The subcommittee also extended an invitation for more members, especially would welcome someone from Youth Alternatives to replace Kirk Little.</p> <p>The discussion then turned to Medicaid policies re: recovery and rehabilitation. Don Chamberlain said that nationally, rehabilitation is the driving issue, and Medicaid is focused on “symptom reduction” and “medical necessity.” For example, teaching skills where people have deficits fits in to rehabilitation, but ongoing supports or community support might not “have a leg to stand on” [under rehabilitation funding].</p> <p>Hospital Readmissions The subcommittee had nothing additional to report, as they are waiting to find out if OAMHS will obtain access to data from the Maine Health Data Organization. Marya reported that OAMHS is now working Maine Health Data Organization and has hired a consultant to “get a data feed” and start looking at multiple hospital admissions.</p>
<p>V. Report from Spring Harbor on Gatekeeper Function</p>	<p>Joyce Cotton distributed a handout of data related to admission requests to Riverview from February 21 to August 31 including disposition of calls and referral sources. Highlights:</p> <ul style="list-style-type: none"> • Received 214 calls for Riverview admission: 86 admitted to Riverview, 38 admitted to Spring Harbor, 90 withdrawn or treated elsewhere. • 38 people, who would previously gone to Riverview, admitted to Spring Harbor—integrated back into the community much quicker than would have been at Riverview. • S.H. staff have been asked to provide data on disposition of the 90 withdrawn or treated elsewhere. • Numbers under Referral Sources reflect number of patients, not number of calls (unduplicated numbers). <p>Discussion:</p> <ul style="list-style-type: none"> • Would be helpful to have referrals separated re: hospital ED or inpatient requiring higher level of care. The number of inpatient referrals may indicate a lack of needed service. • “All Others” under Referral Sources includes many others with either 1 or 2 referrals over the time period. <p>Don said he would like to see how many of those treated elsewhere were due to lack of bed availability at Riverview and Spring Harbor.</p> <p>ACTION: Spring Harbor will provide additional data at the next meeting.</p>
<p>VI. Other</p>	<p>Budget Work Groups Update Administrative Burden, System Redesign, Rate Standardization <u>Rate Standardization:</u> Don reported that the members have largely come to agreement on the broad structure of rate setting, noting it was similar to that which the Department used for FY 08.</p>

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	<p><u>System Redesign</u>: Marya said the work group is focusing on savings not already identified by other means, e.g. administrative burden, etc. The work group has gone through children’s and adult services, and next week plans to vote on recommendations to include in a draft report (which is due first part of November). She also noted how difficult it is to get a complete picture—and said the work group will recommend a careful look at the impact of all recommendations made by all of the work groups.</p> <p><u>Administrative Burden</u>: Recommendations are due from this work group in the next couple of weeks.</p> <p>Consumer Council System Karen Evans reported on the ongoing progress of the Consumer Council System of Maine, noting that Statewide Consumer Council (SCC) has elected officers. The SCC’s next meeting is October 24 at the Pine Tree Arboretum in Augusta.</p> <p>Preble Street Area providers met with Preble Street to address the issue of following through with case management among the homeless seeking shelter there. Preble Street is experiencing record numbers, and the overload is driving the need to find solutions to a continuing issue: “Why should Preble Street work with folks who have case management with another agency?”</p> <p>Issues:</p> <ul style="list-style-type: none"> • Need for more case managers to come to the homeless community. • Need to do better referring people to see their case manager. <p>The following points were reported as results/understandings of above-mentioned meeting:</p> <ul style="list-style-type: none"> • Case managers need to come to the site under certain circumstances. • Preble Street will change intake process to find out more quickly if person has case management elsewhere. • Preble will provide space for case managers to meet with clients. • Need to address billing issues re: MaineCare: How to pay for getting services started? How to pay for assessment? • Department’s reallocation of ICMs is helpful—can be bridge for people not yet receiving MaineCare. <p>ACTION: A follow-up meeting will be held, and the CSN will be updated at the November meeting.</p> <p>Upcoming Meeting Schedule The members decided to hold the next regular meeting (November 16) and to cancel the December meeting.</p>
VII. Public Comment	No members of the public made comments at this time.
VIII. Agenda for Next Meeting	Subcommittee Reports CSN Direction re: Work of Subcommittees Update on Homeless/Case Management Spring Harbor Gatekeeper Additional Data Update on Budget Work Groups