

**INFORMAL SESSION MINUTES**

**March 14, 2017**

2:00 p.m.

Commissioners' Office Conference Room

PRESENT: Commissioners Stan Primozich, Mary Starrett, and Richard L. "Rick" Olson.

Staff: Laura Tschabold, Christian Boenisch, Mikalie Frei, Stephanie Teahn, and Silas O'Halloran-Steiner.

\* indicates item forwarded to formal agenda

Commissioner Primozich called the meeting to order at 2:00 p.m.

\* Minutes – see agenda for details.

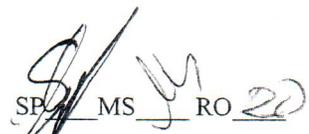
\* Contracts – see agenda for details.

**Health and Human Services Update** – Silas Halloran-Steiner provided a brief overview of the National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD) seminar that he attended in Washington, DC. Mr. Halloran-Steiner said the seminar reinforced how critical peer and natural support is in the recovery process. He discussed the Certified Community Behavioral Health Clinics program that is funded by the Excellence Act. He stated that Oregon has been selected as one of the twenty-four participating states and that Yamhill County was one of eight counties selected within the state. (See exhibit A for details.) Mr. Halloran-Steiner stated the State of Oregon is trying to create a shared agreement with veteran affairs and over time it will create better access to patients. He said his department is working with a local contractor for a potential sixteen unit complex for a transitional housing project and has sent out a request for proposal quote to potentially bring interested parties to the table to do further housing development in Yamhill County. Mr. Halloran-Steiner discussed the Transition Treatment Recovery Program (TTRS). He reported that since May 2014 sixteen women and twelve men have successfully graduated from the program. (See exhibit B for details.)

Following commissioner updates, the meeting adjourned at 2:49 p.m.

Crystal Cox  
Secretary

Accepted by Yamhill County  
Board of Commissioners on  
4-6-17 by Board Order  
# 17-109

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# CCBHC: Certified Community Behavioral Health Clinics



Are you ready?

## What is a CCBHC?

Defined for the first time in the Excellence in Mental Health Act, Certified Community Behavioral Health Clinics (CCBHCs) are designed to provide a comprehensive range of mental health and substance use disorder services, particularly to vulnerable individuals with the most complex needs during a federal demonstration program with participating states.

States must certify that each CCBHC offers the following services either directly or through a formal contract with a designated collaborating organization (DCO). Through the demonstration, the following services must be offered and will be paid for even if they are not included in a state's Medicaid plans:

- Crisis mental health services including 24-hour mobile crisis teams, emergency crisis intervention and crisis stabilization\*
- Screening, assessment and diagnosis including risk management\*
- Patient-centered treatment planning\*
- Outpatient mental health and substance use services\*
- Primary care screening and monitoring\*\*
- Targeted case-management\*\*
- Psychiatric rehabilitation services\*\*
- Peer support, counseling services, and family support services\*\*
- Services for members of the armed services and veterans\*\*
- Connections with other providers and systems (criminal justice, foster care, child welfare, education, primary care, hospitals, etc.)\*\*

\*CCBHC must directly provide

\*\*May be provided by CCBHC and/or DCO

## Why these services, and why together?

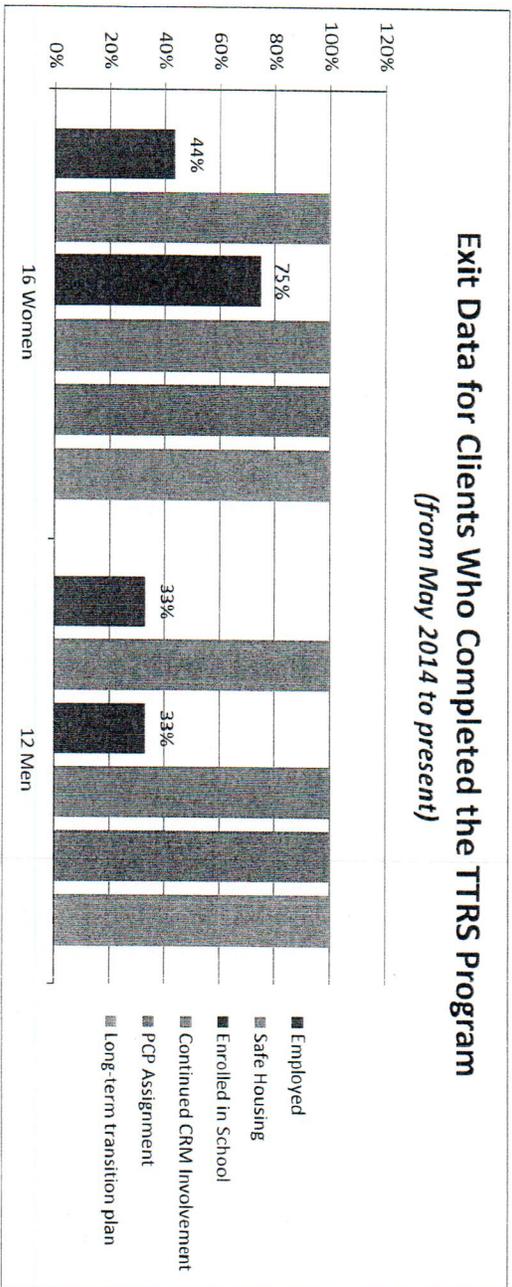
The service array is deliberate. CCBHCs provide the comprehensive array of services that are necessary to create access, stabilize people in crisis, and provide the necessary treatment for those with the most serious, complex mental illnesses and addictions. CCBHCs also integrate additional services to ensure an approach to health care that emphasizes recovery, wellness, trauma-informed care, and physical-behavioral health integration. Highlights regarding this comprehensive array include:

- Easy and welcoming access to services regardless of ability to pay or location of residence to ensure those who need services are able to receive them.
- Immediate screening, assessment, and risk assessment for mental health, addictions, and basic primary care needs to ameliorate the chronic co-morbidities that drive poor health outcomes and high costs for those with behavioral health disorders.
- 24/7/365 crisis services to help people stabilize in the most clinically appropriate, least restrictive, least traumatizing, and most cost-effective settings.
- Full clinical, operational, and financial commitment to peer and family support, recognizing these elements as essential for recovery.
- Tailored emphasis on active and veteran military, who have served our country with honor, to ensure they receive the unique health care support they need.
- Expanded coordination with other health care and social service providers, with a focus on whole health and comprehensive access to a full range of medical, behavioral and supportive services.



**Yamhill County  
Health and Human Services**

**Exit Data for Clients Who Completed the TTRS Program  
(from May 2014 to present)**



**Employment:** The TTRS team is currently working on establishing an in-home employment/job-skills service to assist parents in obtaining gainful employment upon completion of the TTRS program.

**Safe Housing:** All 28 families have obtained safe and stable housing after completing the TTRS program. Most utilized the DHS family reunification voucher.

**Education:** Parents have shown great interest in education (GED/college) while participating in the TTRS program. Many parents have established short- and long-term educational goals, and have thoughtful career ideas. Parents have expressed an interest in giving back to those struggling with addiction through work as Certified Recovery Mentors.

**Certified Recovery Mentor (CRM) Involvement:** The Certified Recovery Mentors are an invaluable service provided by HHS and Provoing Hope. Parents/families have built strong relationships with CRMs and Provoing Hope. These families have access to CRMs and Provoing Hope after completing the TTRS program and are able to access similar services directly through Provoing Hope.

**Primary Care Provider (PCP) Assignment:** All of the families who have completed the TTRS program have established primary care doctors. These families have gained a better understanding of the importance of medical care for the parents and children.

**Long-Term Transition Plan:** The long-term transition plan involves working with their treatment counselors, Certified Recovery Mentors, and house staff on relapse prevention strategies as well as continued improvement with all social, life, and parenting skills.