



**Adult System of Care Community Council**  
**Magellan Health Services**  
 4129 E. Van Buren, Phoenix, AZ 85008  
 Cottonwood Room  
 February 2, 2011, 6pm  
 Minutes

Meeting Facilitator(s): Gaye Tolman		Recorder/Note Taker: Lynda Anderson
Purpose of Meeting: Community Input to the Adult System of Care		
Attendees: Gloria Abril, Family Member; Pamela Walker, Magellan; Kaj-Willow Kaemmerer, SBH; Carolyn Hinkle, Choices; Don VandenBrul, Family Member; Trish Bleth, Magellan; Jill Hogan; Rich Beeman, NAMI; Jim Dunn, POCN; Mary Robson, Magellan; Carlos Benjamin, Magellan; Erasmo Rodriguez, CPLC; Karan Cole, Family Member; Jennifer Hill, Visions of Hope; Shanna Palumbo, CRN; Denise Baker, CFSS; Chris Damle, Magellan, Gaye Tolman, Magellan; Karrie Steving, CFSS; Bonnie Jobanorski, Family Member; Jill Rowland, Choices; Joseph Grant, EMPACT		
TOPIC	PRESENTER	DISCUSSION
Introductions and Announcements	Gaye Tolman	Introductions were made and the attendees answered the question "What does Family mean to me?"
General Update	Chris Damle	Magellan is moving towards a family engagement system with a "new normal", treat the individual in the community, allow for failure, make their own decisions, move away from a paternalistic system, help connect with those who are family, immerse the individual into the community to work, play and live, move away from the mental health clinic as the central focus of their lives, motivate the individual to enjoy life. We are working to include the family in the treatment plan and will be monitoring family involvement in Record Reviews.
Family Involvement Training	Carlos Benjamin	<p>The Family Involvement Training curriculum was produced in conjunction with seven families to help identify measures of family involvement. The training addresses family involvement all levels of care, the importance of documenting family involvement, looking at the family collaboratively instead of an impediment to progress, identify the dynamics between family members and based on family relationships. The training is working to move from enabling to advocacy and building support for the individual that is rooted in their family/community circles.</p> <p>The treatment team will be looking at the individual's supports similar to a Child and Family Team</p>

		<p>(CFT), look at the crisis plan to identify family members who may not be able to support the individual, and how families relate to positive outcomes. The clinical team will identify those who are supportive, establish on-going communications, avoid negative language, and expect family involvement.</p> <p>Three attendees role played a scenario of case manager, adult child receiving services, and the mom, daughter refusing to take medications, no ROI in place, team wants RTC, daughter wants to live on her own, mom wants the daughter to move back home. Discussion followed on the dynamics of the three, how the dynamics change with an issue, power struggles and how they change, and if they portrayed the characters and issues correctly, what could have been different.</p> <p>This training will be included in new employee orientation, provided training at the clinics, training is for outreach home visits, family and peer mentors are included in the training, treatment planning and family/mentor training, along with on-going training annually.</p> <p>Discussion – training for the children’s system, help families with transition from the children’s system to the adult system, the CFT begins with the family strengths, sets the stage to work together on the needs of the child and family, children’s system can drive changes in the adult system.</p> <p>Attendee asked how the system would move from PNO clinical services to peer and family run organizations (PFRO) and are there family advisory boards at the clinics? There will be some duplication of services, there is a place in the community for both clinics and PFROs, work to transition to the community. Each clinic has a Clinic Advisory Council which encourages family involvement, you do not need to have an ROI to attend, non-titled recipients and any family members can attend.</p> <p>Concern with family members relaying information or concerns to the clinical team, unsure if the team will take action or tell the recipient. Choices encourages all staff to listen, return phone calls, not release confidential information and know that an ROI is not a barrier to communication.</p>
Open Forum	All	<p>Attendee is attending for the first time and is looking on how she can help her adult child who lives alone and pushes family and friends away, he is paranoid, suicidal, and feels helpless, there is no ROI. Mary Robson and Jill Rowland will speak with the attendee after the meeting.</p> <p>The NAMI Walk information has been printed in Spanish and is available for posting in the clinics and PFROs, the information is on the website.</p>
Agenda Items	Act Program	

for Future Meetings	Recovery Roadmap Trauma Informed Care
Next Meeting:	March 2, 2011, 6pm, Learning Center Training Room, 4801 E. Washington
Call to Order:	6:00 pm
Adjourned:	7:30 pm