

CPMS¹ Messenger

a timely newsletter for those completing the CPMS forms

December 2007 Prepared by Piet Vermeer & the CPMS Data Team, AMH

Vol. 14, No. 12

Questions?

Give us a call



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Summary of A&D form changes as of 07/01/2007

Last month we showed you the changes that were made regarding Referral Source(s) code on the A&D forms. We also mentioned the new box on the enrollment and termination form called "recent arrests". This should capture the number of arrests during the last 30 days before the start of treatment on the enrollment form and the number of arrests during the last 30 days of treatment on the termination form.

Also, there were minor changes we made in the codes and descriptions of the "living arrangement" box.

The next issue will not concern you if you are sending your CPMS data to us in an electronic way.

For those of you who send us CPMS data using paper forms, what I did not repeat was that for the A&D forms we now request the "white" copy of the form to be sent to us and not the yellow anymore.



The grace period we established for receiving old forms (revision date 01/05) is coming to an end. We set the ending date for receiving old on December 31st 2007. This rule is set for enrollments only. Enrollments coming in after 12/31/2007 on old forms are no longer accepted. We will be sending those forms back as a belated Holiday gift. If you need new forms please call Bonnie Landers at 504-945-6188.

¹ Client Process Monitoring System (data system for mental health and chemical dependency treatment services).

Kudo's!

We use the Messenger often to point out things that are not going as planned or mention mistakes that are commonly made. Not this time. We would like to give thanks and words of appreciation to all of you who work hard and try their best to accommodate us in our quest for good clean data.

I received several e-mails from the data team with special requests to thank the following people.

A special thank you to Pam Parvin at Polk County from Dianna Bernards.

"Because Pam covers so many providers and hardly ever has any errors".

Also kudo's to Sammie Petty at Lifeways from Stan Usher, he says:

"Sammie is always punctual and pleasant with her responses to any question that we send. A real pleasure to work with!"



BHIP Update

(By Ben Kahn, BHIP Manager)

A lot is happening currently with the Behavioral Health Integration Project (BHIP). And it's only going to get more

frenzied as we move forward with the project.



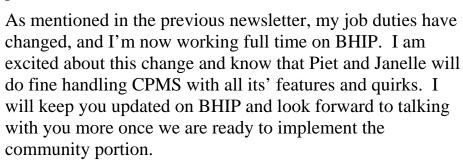
As I write this update, we are right smack in the middle of our BHIP Vendor Fair. Behavioral Health Software Vendors are here in Salem to present their products, answer our questions, and help us understand if

our requirements are on track. We want to know if there is software out there that can meet all our needs. If so, great! If not, we may need to prioritize our initial requirements to ensure that there is software that can support us.

Also, at this time, we are also finalizing the <u>detailed</u> functional requirements for the hospital portion of BHIP. Remember, BHIP is an <u>integrated</u> system, to bring together the community and the hospital. Some time ago, we identified the detailed community requirements, and now are working to define the hospital detailed requirements. These include things like pharmacy, laboratory services, medical and food services, scheduling, and others. Because the

Oregon State Hospital is moving towards a treatment mall model, scheduling is a <u>huge</u> component of the desired solution.

We will implement the BHIP solution in the Hospital environment first, then the community. So for the community treatment providers, it's still CPMS . . . for now.



If you have any questions, please email: bhip.project@state.or.us.