

Department of Alcohol and Drug Programs (ADP)
Outcome Monitoring Program (OMP) Implementation Workgroup (IWG) Meeting
SUMMARY
Thursday, January 20, 2005
1 P.M. - 3 P.M.

Participants

ADP Staff:

Paul Brower
Kami Browning
Larry Carr
Michael Cunningham
Laura Colson
Ann Drolette
Carol Honda
George Lembi
Marjorie McKisson
Jon Meltzer
Rachelle Repace
Rick Richardson
Paul Strandberg
Inna Tysoe

External Participants:

John Bacon
Desiree Crevocoeur
Yolanda Cordero
George Feicht
Gino Giannavola
Jason Kletter
Toni Moore
Rick Rawson
Al Rodriguez
Shirin Vikharia

1. Welcome, Introductions, and Agenda Review – Michael Cunningham

Michael Cunningham opened the meeting by welcoming and thanking everyone for participating. Michael reviewed the agenda with the members.

2. CalOMS Treatment Sub Work Group Update – Toni Moore

Toni provided an update on the Treatment Sub Work Group meeting held on January 19, 2005 via conference call. The Treatment Sub Work Group discussed: T3 sampling, CalOMS county field readiness surveys, and revisions to the CalOMS data matrix. On the data matrix, the date-of-birth was revised to include three options: 1. born in county, 2. born in state, or 3. born in country. Discussion occurred regarding workload associated with county staff familiarizing with country codes.

3. Prevention Sub Work Group Update – Paul Strandburg

Paul reported that the plan is a third-party entity will be doing the data collection for Prevention CalOMS. An RFP is expected to be released in February to obtain the services of a third-party vendor to process prevention data and provide it to ADP. Providers will key in their CalOMS prevention

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data and submit it to the counties who will in turn validate and approve the data prior to submitting it to the third-party vendor and ADP.

Discussion occurred on whether counties will have a fiscal obligation to the prevention system. Counties will not have fiscal responsibility; it will be funded by ADP.

4. County Field Readiness Surveys – Jonathan Meltzer

Jonathan discussed the findings of the county field readiness surveys received since it was distributed to county administrators in October. The purpose of the survey was to obtain county self assessments of their readiness to do CalOMS. The survey covered several areas: familiarity with CalOMS, planning stages; IT strategies, and IT development.

The data obtained from the surveys was not modified; it is exactly as it was provided in the surveys received from counties. About 75% of the counties returned the survey and it is important ADP receive surveys from the remaining 25%. The data obtained from the surveys will be used to help ADP assist counties in implementing CalOMS.

The report Jonathan provided to the IWG will be provided at the CADPAAC quarterly meeting. The report will also be provided to any counties that request it and will be posted on the ADP CalOMS website.

5. T3 Sampling – Larry Carr

Larry provided an overview of the proposed T3 sampling methodology. The methodology would be episode-driven, on an annual cycle. Data would be collected on a monthly basis. A 90% confidence interval will be used for T3 ($p = .01$). The sample will be 10% plus a 15% over sample. The T3 follow-up will not include detox clients. How NTP clients will be sampled is yet to be determined.

Discussion occurred on alternatives to this methodology and ADP solicited participants for their input on the types of statistics they would prefer. Some prefer a statewide average to compare their county to while others preferred averages of other like-sized counties as well as a statewide average.

Two options proposed are: 1. provide ability to make county to statewide average comparisons and 2. provide ability to make like-size county comparisons. It was requested that this be discussed at the next IWG meeting further.

6. NTP Follow-up – Jason Kletter

Jason provided an update on NTP follow-up. Jason reported he contacted all NTP providers in COMP with two questions. The first question, does it make sense to do T3 for NTP patients at twelve months? The second question, would NTP providers be interested in doing the follow-up data collection for patients still in treatment?

Jason reported there was some consensus on doing T3 at twelve months and conducting the follow-up. However, other NTP providers were concerned about the validity of the data if this was done. One reason for this is that the provider staff are not researchers trained to conduct this type of research. Another reason is the clinical relationship the provider has with the patients.

7. Upcoming Issues

Marjorie McKisson provided a brief update on the software development vendor. ADP will update counties when a contract is in place. Marjorie alerted counties that the delays in the procurement could affect the implementation timeline for testing. There are currently no changes to the project scope. ADP also needs to follow-up on findings of the county readiness surveys.

8. Next Meeting and Establish Standing Time

ADP would like to have a standing meeting time for the IWG, one that precedes the sub work group meetings. The idea is to bring issues to the full IWG first then take them to the sub workgroups for further discussion. ADP proposes having a standing meeting from 1 – 3 PM the first Wednesday of each month. The next meeting will be held on Wednesday, February 2, 2005 at this time.

Agenda items for the next meeting:

- T3 sampling update
- Prevention third-party vendor RFP
- County readiness for CalOMS