

Division of Services Improvement, Clinical Technical Assistance Project
Technology-Assisted Care
Forest County Potawatomi Health & Wellness Center
Call Summary
February 18, 2014 • 2:00 pm ET

Attendees

FCP HWC: Chris Skaggs, Tina Garcia, and Mary Pfeiffer

JBS International (JBS): Leslie McElligott and Iris Chai

Program Progress

How is the program helping engage clients' use of technology?

- Clients actively use text messaging to interact with recovery coaches. Client messages are sent continuously as a means for them to seek support from the coaches. Clients are more receptive to texting than phone calls. There is no mass texting capability yet where FCP can send texts to all the clients (i.e., texting inspirational messages).
- It is anticipated that clients will have access to iPads in the AODA building in a few weeks. This feature is particularly helpful for this location because it is a convenient place where community members frequently drop by. The iPad can provide resources while clients wait to be seen by the next available counselor, without turning individuals away and asking them to come back.
- The staff at FCP is considering providing iPads to clients during treatment. Since the IT department already understands how to track and limit use on the iPad, this piece will not be difficult to implement. JBS suggested FCP contact Susie Mullens at First Choice to learn about their experiences with providing technology to clients. Susie's contact information is susie@wvfallconference.com.
- In about 3 months, FCP hopes to expand on Webex, integrating it with the extranet for clients. This will act as a portal and be mobile responsive. Currently, there is an extranet for tribal members where they can login through the FCP website. The extranet for the clients will emulate the tribal site. The servers for the member and client servers will be separate. WebEx expansion will be the focus for the next fiscal year.
- FCP leadership feels that clients are more tech savvy than the team members so they do not anticipate engagement issues with rolling out new technology.
- The program plans to offer life skills training and workforce development opportunities like resume building. Since the tribal members get a certain per capita income, there is low employment, and the members are not aware how to create resumes, look for a job, interview for a job, etc. FCP hopes to use technology as a way for clients to work through these skills at their own pace on the iPad or personal device.

Intake

- GPRA is not collected using iPads. The new EHR— Athena Health— claims there are integrating capabilities between GPRA and the EHR, but FCP is not at this stage of EHR implementation.
- Tina Garcia (FCP) developed a spreadsheet to help each provider/coach complete GPRA intakes. The spreadsheet has a tracker and reminder for each client.
- Tina asked if the 80% GPRA goal was to be maintained throughout the grant cycle or only at the end of the 3-year grant. JBS recommended maintaining at least 80% throughout the grant cycle so the program does not fall behind with intakes or follow-ups.
- It is hoped that the potential partnership with Gerald L. Ignace Indian Health Center, Inc. will increase GPRA intake numbers.

Other program updates

- Since the main Health and Wellness Center building is a distance from the AODA building, the leadership is making sure to increase communication with the AODA counselors through weekly meetings. They are also emphasizing the importance of meeting GPRA targets.