Tri-County Batterer Intervention Provider Network Minutes: November 14, 2000

Present: Gary Cohen (Polk County Mental Health), Michael Davis (Changepoint), Antonio Centurion (Changepoint), Chris Huffine (Men's Resource Center), Devarshi Bajpai (AIDS Treatment Services), Margaret Langslet (PSU) and Meleshiw Agegnehu (PSU)

Minutes by Margaret Langslet

Topic of Discussion: Intake Procedures

- Multnomah County drug and alcohol packet plus a supplement that asks about the arrest event and then they look at how it compares with the police report. It also covers past events and what kind of abuse the client has used. It includes a space for comments about the client's response to the questions. Davis would like to see the intake updated to include spousal risk assessment and the relationship that the batterer has with weapons. He would like to see drugs and alcohol less and risk assessment more.
- 2) Chris asked what the drug and alcohol questions covered. Davis said that it covers first use of drugs and present use of drugs. It also includes perception of use, withdrawal, physical health like medications or chronic physical problems, any history of detox, arrest and convictions, delusions, confusion and depression. The problem is that these answers are only based on the client's report. The client goes through an orientation that lasts one hour and then the intake that lasts about two hours
- 3) Devarshi Bajpai described the ASAP treatment services intake for clients. He said their intake was very similar to Changepoint. They also ask clients about their cultural history, gender issues, religious beliefs and vocation. Bajpai said they use the same Multnomah County drug and alcohol assessment as Changepoint. He said that they are planning on using a substance abuse screening soon called SASSI-3. Also, in the intake sheet it asks about police, depression and jealousy. He said that about 5%

- of their clients go into an anger management program instead of a batterer intervention program. They have an orientation that lasts ½ an hour and the assessment lasts about two hours.
- 4) Chris Huffine said that Men's Resource Center does a briefer intake process. The client completes some initial written information, including a brief self-reported drug and alcohol history and a checklist of current mental health symptoms. The intake includes a typical psychosocial history (i.e., family history, marital history, education, work history, medical history, legal history, mental health history, brief drug and alcohol history). A brief inventory of abusive behaviors is collected where behaviors from six different categories are listed (physical, verbal, psychological, property, animal, sexual) and the client is asked to report what he has done. In addition, each client is asked about controlling behavior (both their own assessment and what they think their partner's assessment of them would be), violent thoughts, and violent threats. The goal is not to get a complete history, since it is certain not to be complete, but to get a general sense of the client's past abuse as well as his current level of accountability and awareness. This information is enough to do an informal risk assessment. Some general information about the group is provided. This is all done in a one hour intake session.
- 5) Gary Cohen reports that when he worked in Spokane they were able to do a very extensive and elaborate intake that would take two days and involve a multi-disciplinary team. The intake would include a medical examination, psychological testing,
- 6) substance abuse evaluation, and a number of other written screening tools including child abuse screening, marital satisfaction scale, and a stress scale. He doesn't expect that he'll ever again have the time and money to do such extensive evaluations.