



DBHDD

## Behavioral Health Coordinating Council Meeting Minutes

February 15, 2017

10:00 a.m.

Coverdell Legislative Office Building  
18 Capitol Square SW, Room 310  
Atlanta, GA 30334

---

### **A QUORUM WAS NOT MET!**

- Meeting Called by:** Commissioner Judy Fitzgerald (DBHDD); 10:05 a.m.
- Facilitator:** Commissioner Judy Fitzgerald
- Members Present:** Commissioner Frank Berry (DCH)  
Commissioner Judy Fitzgerald (DBHDD)  
Commissioner Brenda Fitzgerald, M.D. (DPH)  
Diane Reeder, Parent Representative  
Stanley Jones, Esq. (Family Representative)
- Members Absent:** Representative Katie Dempsey  
Senator Renee Unterman (District 45)  
Chairman Terry Barnard (PAP)  
Commissioner Mark Butler (DOL)  
Commissioner Robin Crittenden (DHS)  
Commissioner Greg Dozier (DOC)  
Commissioner Camila Knowles (DCA)  
Disability Services Ombudsman Lavinia Luca (ODSO)  
Commissioner Michael Nail (DCS)  
Commissioner Avery Niles (DJJ)  
Superintendent Richard Woods (DOE)  
Julie Spores Adult (Consumer Representative)
- Others Present:** Margaret Kaywood, Assistant Deputy Commissioner (DJJ)  
Scott Mauer, Assistant Commissioner (DCS)  
Donna Tebought, Director of Transitional Support (DOC)
- DBHDD Leadership:** Amy Howell, Assistant Commissioner & General Counsel  
Lavin Gartland Briggs, Director of Special Projects  
David Sofferin, Director, Office of Public Affairs

## Agenda

**Call to Order:** Commissioner Judy Fitzgerald called the meeting to order at 10:05 a.m.

### Recovery Presentation

Lindsey Sizemore, Outreach Coordinator for RESPECT Institute introduced our guest speaker Kathy Prather who is a graduate. Kathy was raised in a home with two parents, two sisters and a brother. One morning when she was little, she was suddenly shipped off to her grandparents. Her father was sent to prison and the family was reconnected three years later, but she was always seeking her mother's approval and always felt like the little girl who was abandoned. She got pregnant while in college and once she had her son, he was sent to his grandparents. She hung out with the wrong crowd, got arrested for the first time and the judge sent her to therapy. This was the first time she saw a therapist and was diagnosed with depression. For the next 25 years she was in and out of hospitals and prison. She was self-medicating and hiding her addiction. In 2010, she was arrested for possession. It was recommended by DOC that she take the 12-step program of recovery. She is now working as a **Georgia Certified Forensic Peer Specialist and Georgia Certified Addiction Specialist**. She credits the program for her recovery process and thanked the council for the opportunity to share her story.

### Action Items

Since we did not have a quorum, there were no action items. The December meeting minutes and 2016 BHCC Annual Report are in process and will be voted on at a later date.

### BHCC Updates

Fitzgerald introduced Doug Reineke, DBHDD Legislative Liaison, to give a legislative update.

#### *Legislative Update*

The FY 18 Budget has passed the House and is in the Senate to be voted on first of next week and the FY 17 Amended Budget is already on the Governor's desk. SB 70 the Hospital Provider Fee bill was signed by the Governor yesterday.

Though there are no agency bills this year, there are several bills that are focused on mental health.

- SB4 (Unterman 45<sup>th</sup>) Establish the Georgia Mental Health Taskforce
- SB40 (Unterman 45<sup>th</sup>) Authorizing emergency medical services personnel to transport mentally ill patients under certain circumstances to a facility for assessment
- SB81 (Unterman 45<sup>th</sup>) Permitting certain persons and entities to obtain opioid antagonists under the conditions the state health officer may impose
- SB88 (Mullis 53<sup>rd</sup>) Regulation of Narcotic Treatment Programs

### *Brain Trust for Babies*

Commissioner Brenda Fitzgerald talked about early brain development in babies and a public private initiative to promote language and social/emotional interaction with babies to help with brain development.

- WIC has developed a video to explain how critical this is for the brain development of babies in the early stages of life.
- Visual learning is important for babies who are deaf or hard of hearing. Currently all babies are screened for hearing loss by 1 month and diagnosed by 3 months. Sign language can be taught to babies and help with their development.
- Adverse child events have an effect on brain development also. Training DFACs workers to recognize the signs that a child is in distress before the age of 2 so that we can get the help needed earlier.
- Autism can be diagnosed as early as 6 months to a year. The average diagnosis is much later. If we can help the child earlier in their development, they will do much better later in school, socially, etc.
- Knowledge is key. Parents need to be empowered to help their children using conversation, visual learning, reading, singing, etc.

### *Interagency Directors Team (IDT)*

Linda McCall gave an update of the team's activities and accomplishments.

- The 9<sup>th</sup> annual System of Care Academy will take place July 26-28 at the Evergreen Lodge in Stone Mountain, Georgia. We are seeking speakers and extended a personal invitation to Commissioner Fitzgerald to talk about the Brain Trust for Babies.
- Changes in our operating structure. New groups must be invited by IDT members. If they want to become a member, the majority rules and must be voted on by all current IDT members. Looking for consistency in organization attendees, and may seek to remove those who have poor attendance.
- Continued work on ADHD, which began as a Georgia-specific project and was taken by IDT and CDC members to a national scale.
- Surveying providers about behavioral interventions.
- System of Care plan access coordination and are developing a three year comprehensive plan.
- Continuing to work on a plan for youth, family with a broader input.
- March/April information to be integrated into a final draft and hope to present to the Coordinating Council in May.

### *Transition Support and Re-Entry Workgroup*

Dr. Terri Timberlake, director of DBHDD's Office of Adult Mental Health, gave an overview of the Forensic Peer Mentor program, a partnership between DBHDD, the Georgia Mental Health Consumer Network, the Georgia Department of Corrections, and the Georgia Department of Community Supervision.

Timberlake said the partnership is working, as exhibited by data and success stories. They currently have 32 Peer Mentor Programs, Forensic Peer Mentor Programs working in five prisons, state hospitals and other transitional facilities. The Forensic Peer Mentors will follow the individuals pre-release and post-release to serve as a bridge for them to have continued support. Family Reunification has been identified as a major concern and are working with NAMI Family to Family to foster a relationship with facilities. Out of 420 individuals served,

less than 10% have reentered prison or hospitals. Working to change how entitlements are handled for individuals transitioning back to society, to ensure they are suspended instead of terminated as is current law. There was also discussion about people who are incarcerated without entitlements that are diagnosed while in a facility and how we can help them with supports before they transition out.

The second Respect and Recovery Race 5K Walk/Race will be held on October 13, 2017. It is an inter-agency partnership to end stigma, promote mental health, and highlight Georgia's successful re-entry programs and resources.

### **DBHDD Presentations**

Cassandra Price presented an overview of the Office of Addictive Diseases. Addictive Services are provided to Men, Women, and Adolescents. The women's program is set aside separately because they receive federal funding through SAMSA block grants. There are 22 Adult Crisis Stabilization programs, 7 Transitional Programs that are short term residential intensive programs, 3 stand-alone detox programs, 33 Residential Programs including intense, independent and semi-independent, 3 recovery centers helping to sustain recovery, Non-intensive outpatient services, and intensive outpatient services. Medically assisted treatment is necessary to help people with the physical and mental withdrawal from opioid use addiction. A huge priority which is very critical is getting pregnant women in treatment. We must provide OBGYN, Outpatient labs, etc., while they are waiting for a bed in a treatment facility. Due to the lack of time, Fitzgerald asked her to return to our next meeting to talk about Adolescents.

### **Commissioner's Report**

Fitzgerald provided an update on the following:

- Will get with the council on how we plan to vote on the 2016 BHCC Annual Report once it is completed.

### **Adjournment**

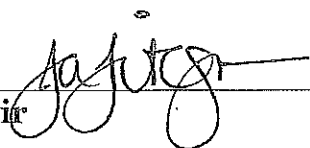
There was no further business. The meeting was adjourned at 11:30 a.m.

**Respectfully submitted by:**

Debra Charnote

**Signatures:**

Chair



Secretary

