

Behavioral Health Coordinating Council Meeting

BE D·B·H·D·D

Georgia Department of Behavioral Health & Developmental Disabilities

February 10, 2021



Agenda

Roll Call / Call to Order

Recovery Speaker

Action Items

BHCC Initiatives

Chair's Report

Next Meeting Date

Roll Call

David Sofferin

Director, Public Affairs

Call to Order

Judy Fitzgerald
Commissioner

Recovery Speaker

Larissa Hanger

RESPECT Institute of Georgia

Action Item:

November 18, 2020 Meeting Minutes

BHCC Initiatives

Interagency Director's Team

Renee Johnson, MPA

System of Care Director

Center of Excellence for Children's Behavioral Health

February 10, 2021



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Georgia Department of Behavioral Health
& Developmental Disabilities

Overview

System of Care Updates

SOC Framework

Current Updates

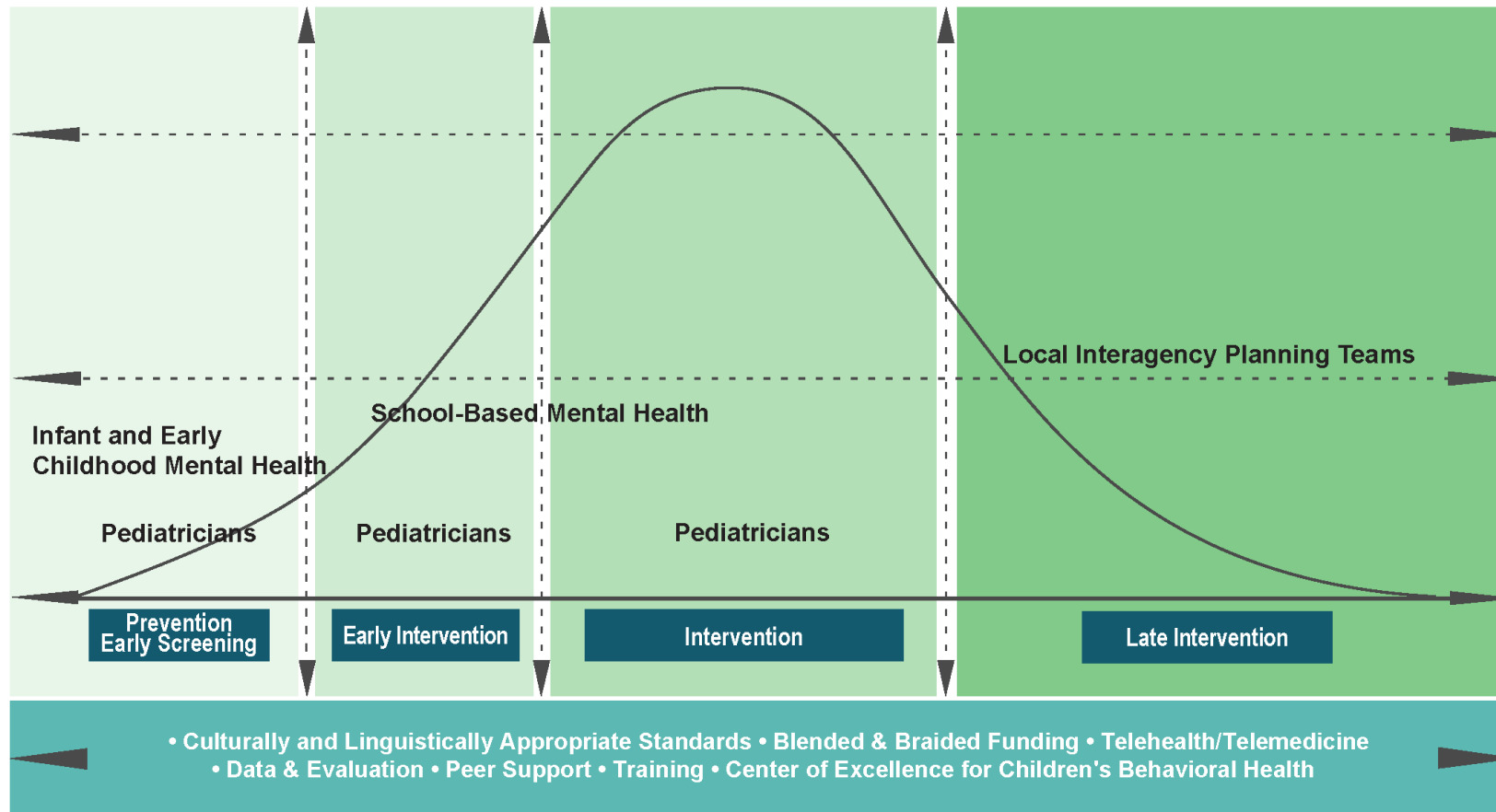
Interagency Director's Team members are working diligently to implement the new State Plan work.

- 11 Total Subgroups
- Each IDT member is a member of at least one group
- All groups are meeting and developing action plans to implement SOC State Plan strategies and objectives

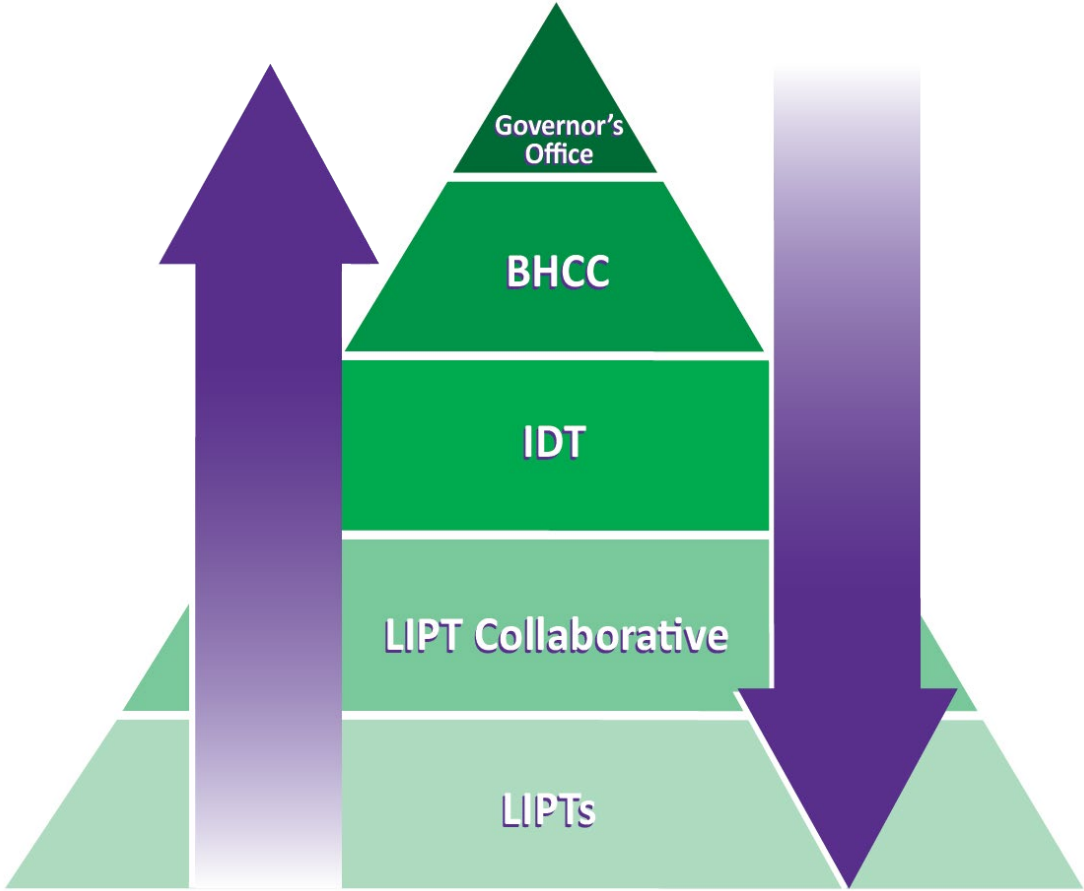
Highlights

- Cross-Agency Collaboration

System of Care Continuum of Care



Updated SOC Triangle



Behavioral Health Coordinating Council Transition – Reentry Committee

Co-Chairperson Terri Timberlake, Ph.D.

Director,

Office of Adult Mental Health

Division of Behavioral Health

DBHDD

Co-Chairperson Michelle Stanley

Deputy Director,

Office of Reentry Services

Field Operations Division

DCS



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BHCC transition reentry committee current areas of focus

- 1 Access to Respect Institute speakers for partnering agencies
- 2 Forensic Peer Mentor Program
- 3 Employment for returning citizens
- 4 Family Reunification Project

Returning Citizens with Behavioral Health Classification

Returning citizens who paroled from GDC back into the community with classification Mental Health Level's 2, 3 and 4

Level	Nov 2020	Dec 2020	Jan 2021
Level 2- Outpatient Treatment	224	225	258
Level 3- Inpatient Moderate	18	18	18
Level 4- Inpatient Intensive	2	5	4
TOTALS	244	248	280
	773		

Source: Georgia Department of Corrections

Forensic Peer Mentor Program Locations and Current Census

Department of Corrections Facilities Day Reporting Centers		State Hospitals Mental Health Treatment Courts	
<p>7 State Prisons (5 - Positions, 5 filled)</p> <ul style="list-style-type: none">• Lee Arrendale State• Pulaski State• Baldwin State• Phillips State• Rutledge State• Metro Atlanta• Phillips Transitional Center	<p>8 Day Reporting Centers (5 - Positions, 5 filled)</p> <ul style="list-style-type: none">• Atlanta DRC• Athens DRC• Griffin DRC• Morrow DRC• Gainesville DRC• Gwinnett DRC• Columbus DRC• Rome DRC	<p>1 State Hospitals (0 – Positions)</p> <ul style="list-style-type: none">• Central State (Milledgeville)	<p>6 Mental Health Treatment Courts (5 - Positions, 5 filled)</p> <ul style="list-style-type: none">• Avita (Hall/Dawson Co.)• Cobb CSB (Cobb Co.)• Highland Rivers (Fannin/Gilmer/Pickens Co.)• River Edge CSB (Bibb Co.)• McIntosh Trail (Spalding Co.)
<p><u>Current Census</u></p> <p>49</p>	<p><u>Current Census</u></p> <p>78</p>	<p><u>Current Census</u></p> <p>0</p>	<p><u>Current Census</u></p> <p>108</p>

Current Total Census (as of Dec 31, 2020): **235**

Peers Served/Enrolled (FY21)

**Department of Corrections Facilities
Day Reporting Centers** **DBHDD State Hospitals
Mental Health Treatment Courts**

State Prisons

Total Peer Served
91

Day Reporting Centers

Total Peers Served
135

State Hospitals

Total Peers Served
17

Mental Health Treatment Courts

Total Peers Served
153

Total Peers served YTD: 379

Forensic Peer Mentor Program Outcomes

Recidivism/Re-arrest Readmissions

Post-Prison Release in Community	FY21TD
Peers Served	26
Psychiatric hospital readmission	0
Re-arrest	0
Re-Conviction:	0
Probation/Parole Revocations	0
Daily Report Centers:	
Peers Served	135
Psychiatric hospital admission	(2) 1%
Re-arrest	(2) 1% (Shoplifting, Drug)
Re-Conviction	0
Probation/Parole Revocations	1 <1%

Forensic Peer Mentor Program Outcomes

Community Outcomes FY21

July 1, 2020 - Dec 31, 2020

Outcome	Post-Prison Release in Community		DRC	
Peers Served	26		135	
Employed or Receiving Benefits	17	65%	98	73%
Enrolled in Community Mental Health Services	16	62%	63	47%
Housed	26	100%	134	99%
Incidents of Homelessness	1		2	

Forensic Peer Mentors in Treatment Courts

YTD Program Outcome Highlights

Participants Served by AMH Funded FPM FY 21 YTD

Participants Served by FPM	153
Re-arrests (new charges)	(3) 2%
Admission CSU/Psyc Hospital	(3) 2%
Episodes of Homelessness	(2) <1%

On Current Caseload

Permanently Housed	84%
Temporary/Residential Treatment	16%
Employed/Benefits/Student	95%

All Courts AMH Funded

Individuals served	183
Graduates	34



Ramona (right) with The Honorable Judge Mary Staley, Cobb County Superior Court

“Having been in the system as a convicted felon in that revolving door of substance use, illness, and trouble with law enforcement, as well as my experience with homelessness, despair, estrangement from family and profound loneliness [gives] me a perspective that comes with that lived experience. I know that if I can recover, anyone can. I try to offer unconditional positive regard and carry hope for others until people find it for themselves, because Recovery is Real and Possible and available to All.”

**--Ramona Burkett, Forensic Peer Mentor
Cobb County Mental Health Court/Cobb Douglas CSB**

Employment for returning citizens

Engage

- Individuals with criminal justice involvement and an SPMI with opportunities for gainful employment
- Employers in dialogue that leads to employing talent from this pool

Educate

- Individuals on strategies for maintaining employment (including soft skills)
- Employers about the benefits of recruiting and hiring from this rehabilitated talent pool
- Service providers on resources available to Returning Citizens

Connect

- Individuals with opportunities
- Employers to benefits and recruitment resources
- Agencies doing similar work

Employment for returning citizens

Current Project and Focus

- Focus on accessibility of resources for linking Employers and returning citizens
- Use of state agency websites for publicizing information, programs resources

Partners Involved

- Georgia Department of Community Supervision
- Georgia Vocation and Rehabilitation Agency
- Georgia Department of Labor
- Georgia Justice Project
- Urban League
- United States Department of Justice/ Attorney's Office
- Worksource Atlanta
- Technical College System of GA

Family Reunification Initiative

FREE: Family Reunification, Education, & Empowerment Project

Psychoeducation, Counseling, and Peer Support to Facilitate Successful Re-Entry for Georgia's Returning Citizens

- New family focused- peer facilitated multi-session project
- Forensic Peer Mentors and *Certified Peer Specialist-Parent*
- Returning Citizens and their family/support network
- Improving communication
- Strengthen family support
- Supporting successful transition into the community

- Pilot sites: **Metro Atlanta Reentry Center-** FPM is in place, next step is training on the curriculum.
- **Central State Prison-** Initial meeting 1/29/21
- Proposed 20 Returning Citizens in first Cohort
- Provider has been contracted and is hiring CPS'
- Training for staff mid-March 2021

Commissioner's Report:

Judy Fitzgerald
Commissioner

A close-up photograph of a hand holding a blue pen, poised to write on a spiral-bound notebook. The notebook's black spiral binding is visible on the left side. The background is a soft, out-of-focus brownish-tan color.

BE INFORMED

General Assembly Update

Certified Peer Specialist in Georgia

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Georgia Department of Behavioral Health & Developmental Disabilities

Tony Sanchez, Director

Office of Recovery Transformation

February 10, 2021

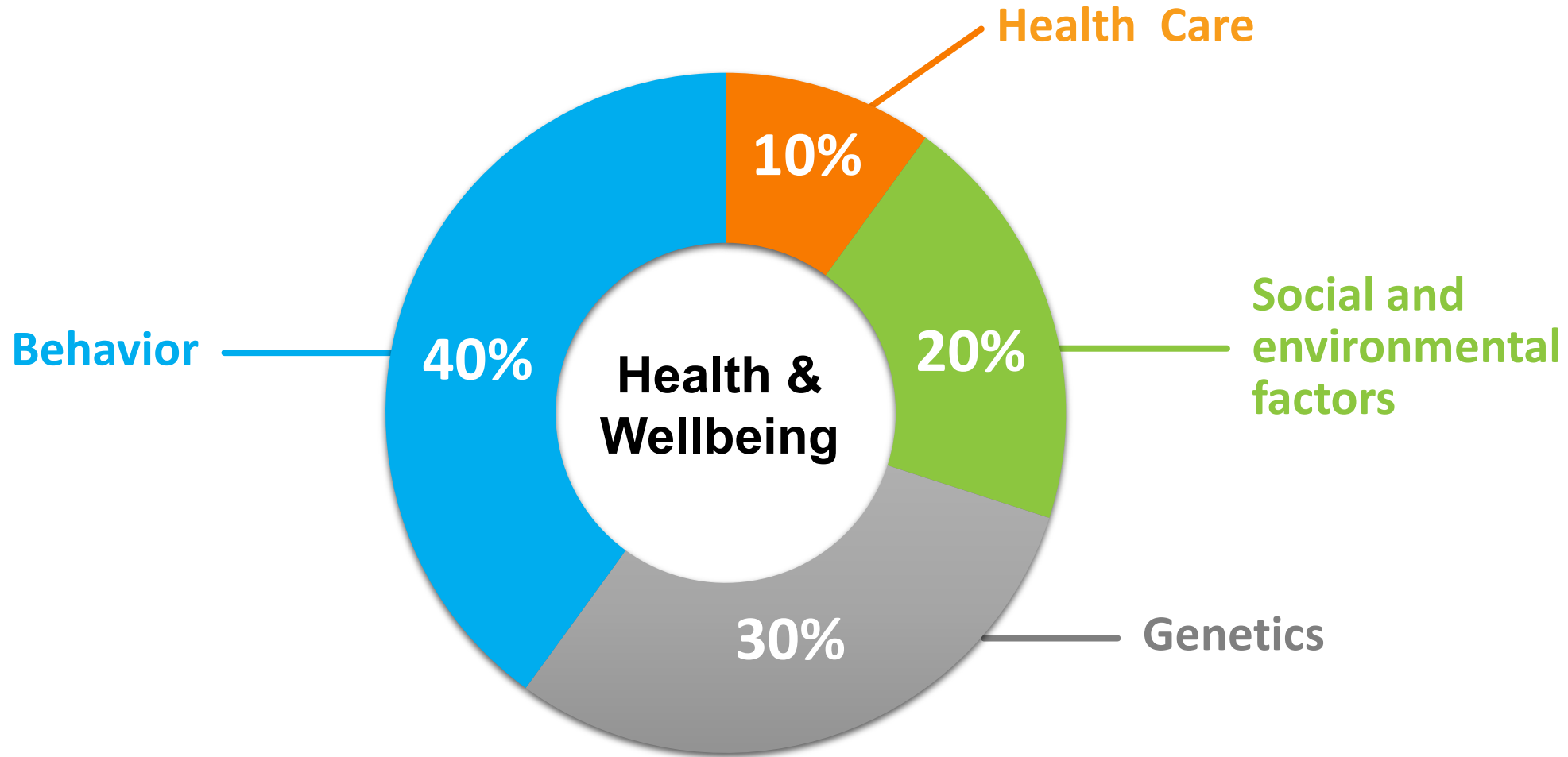




HOPE



Why Are Peer Support Services Important?



Source: Steven A. Schroeder, "We Can Do Better — Improving the Health of the American People," *New England Journal of Medicine* 357 (Sept. 20, 2007):1221-122.

Georgia Led the Way

- Georgia was the first state to bill Medicaid for peer services (CPS-MH, 1999)
- Expanded Medicaid coverage to include addiction recovery and whole health (1st in the country)
- CPS-Y and CPS-P Medicaid-reimbursable as of late 2017
- Georgia model became basis for 40+states and a dozen countries to adopt mental health Peer Support
- We have approximately 2,800 (unduplicated CPS) certified in Georgia and 3,700+ roles due to multiple certifications

Supporting Recovery Policies

- **DBHDD Policy 15-150 | Recovery, Wellness & Independence-Guiding Principles & Values**
- **DBHDD Policy 01-123 | Training & Certification of Peer Specialists**
 - DBHDD is the sole certification body for Certified Peer Specialists in Georgia. Certification certificates are only valid if signed by a DBHDD official.

Types of Peer Certifications

Certified Peer Specialist – Mental Health (CPS-MH)

- Age 18 and older
- Living in recovery with a mental health condition and is practicing recovery as related to that condition.
- Supports other adults on their journey of recovery with a mental health condition

Certified Peer Specialist - Addictive Diseases (CPS-AD)

- Age 18 and older
- Living in recovery from addiction and abstinent from any drug use for over (2) years
- Supports other adults on their journey of recovery from substance use

Certified Peer Specialist - Youth (CPS-Y)

- Ages 18 - 30
- Living with a behavioral health condition and self-identifies as a person who has or is receiving behavioral health services
- Uses experience to help other youth living with similar conditions

Certified Peer Specialist - Parent (CPS-P)

- Parent or legal guardian of a child who is living with a mental health, substance use or a co-occurring diagnosis
- Provides support to other parents who are raising a child with similar behavioral health conditions

Types of Peer Certifications – Ancillary CPS Credentials

MH & Whole Health

- Certified as an Adult CPS
- Earned additional certification to support individuals living with a MH condition in creating a plan that considers mental and physical wellness
- Support individuals with prevention, balancing healthcare, wellness, and navigating the health care system

MH & Forensic

- Age 18 and older
- Living in recovery from addiction and abstinent from any drug use for over (2) years
- Support other adults on their journey of recovery from substance use

DBHDD Approved CPS Certification Training Bodies

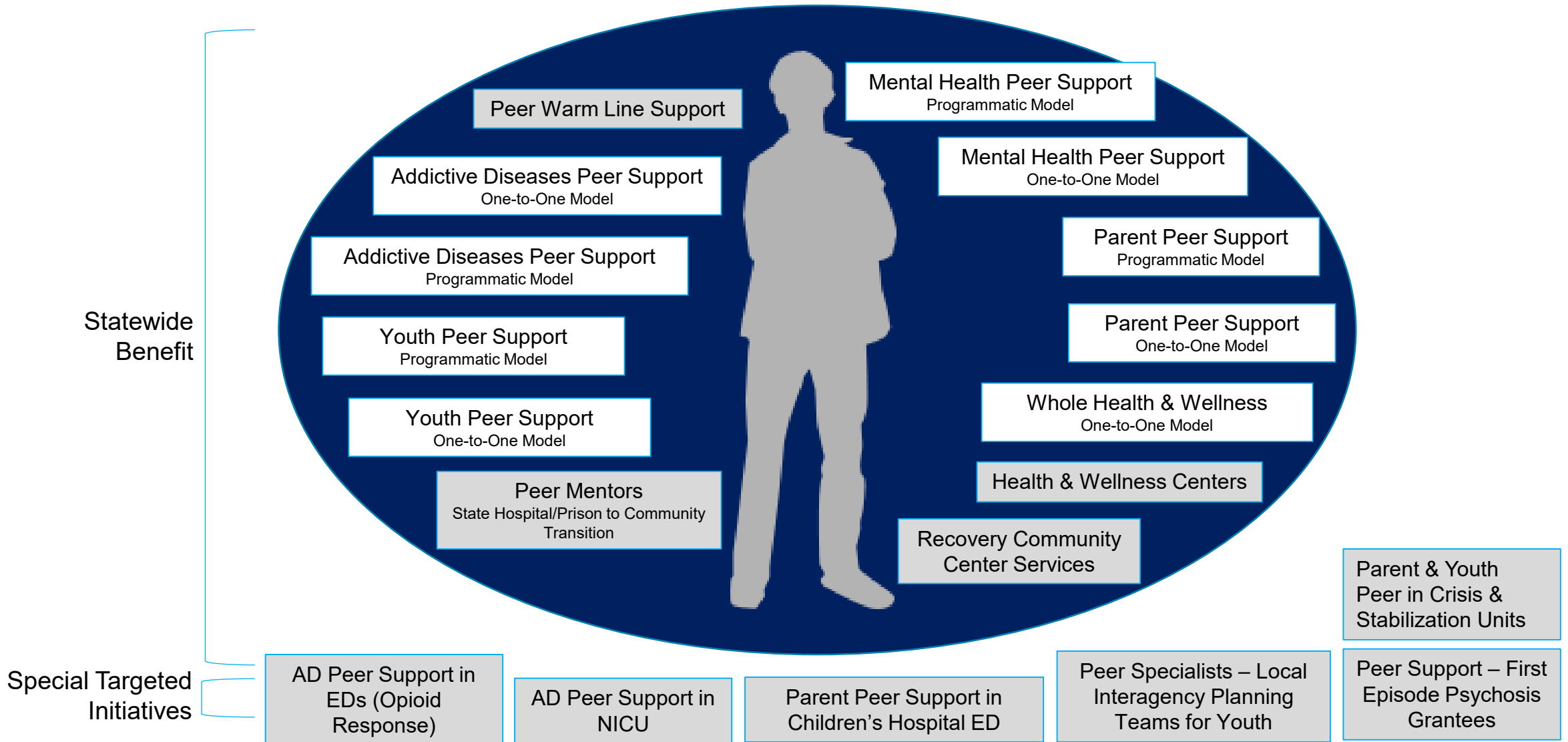


A close-up photograph of a person's hands gripping the handlebars of a blue bicycle. The background is a soft-focus outdoor scene with green grass and a blurred path. The text "BE INSPIRED" is overlaid on the left side of the image.

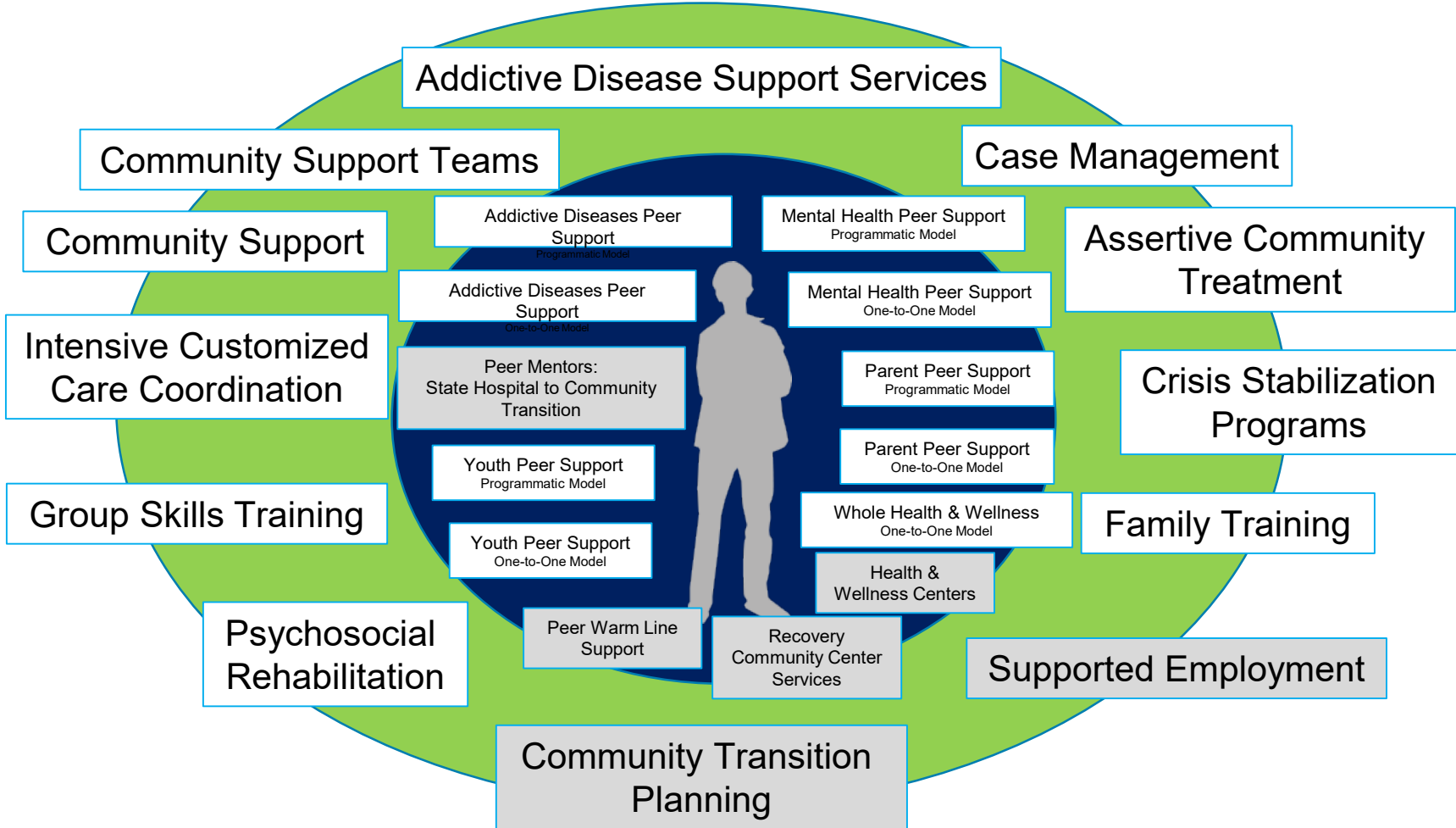
BE INSPIRED

Peer Support as a
Medicaid Billable Service

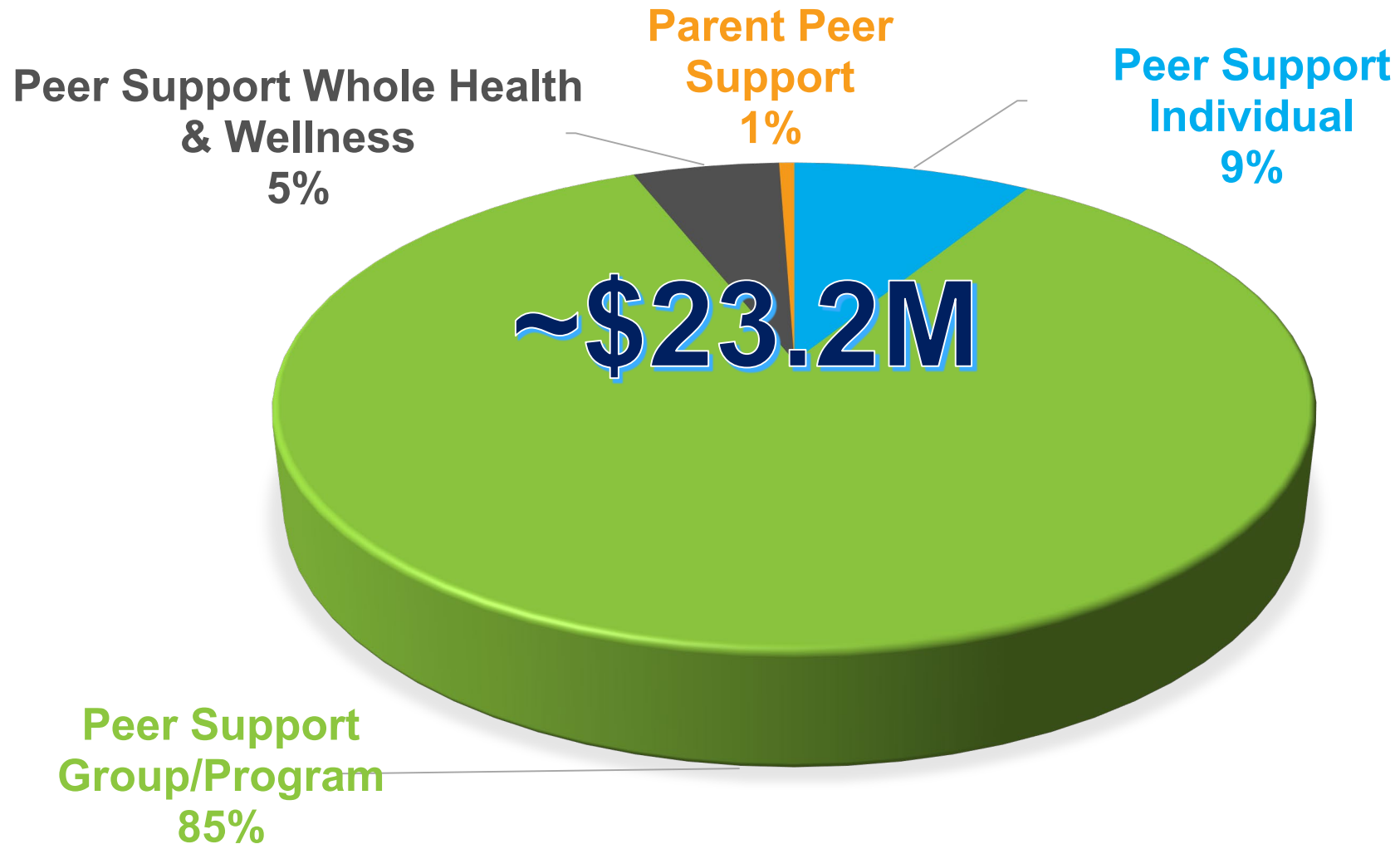
Georgia's Foundation: Peer-Specific Services



Georgia's Foundation: Peer-Engaged Services

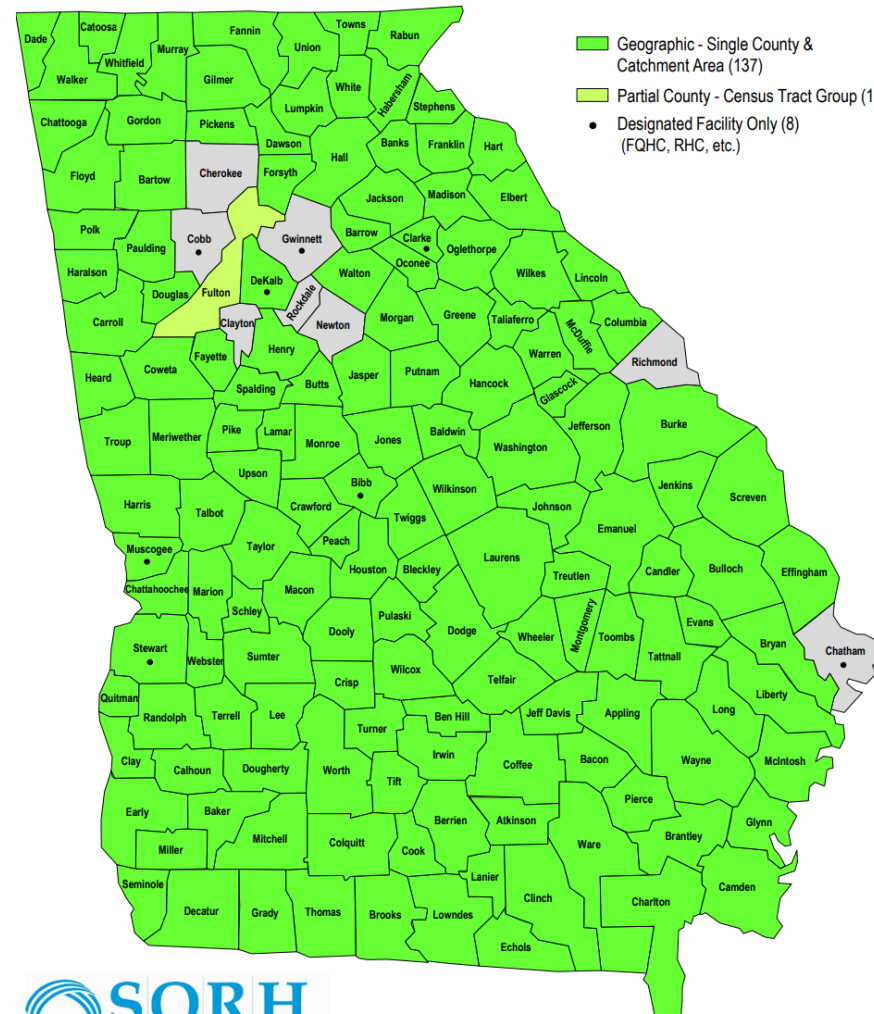


Peer Support FY19 Expenditures



Why Are Peer Support Services Important?

STATE OF GEORGIA MENTAL HEALTH PROFESSIONAL SHORTAGE AREA (MHPSA)



Access to Peer Support

Formal Peer Support

Individual must be living with a Behavioral Health condition and meet DBHDD admission criteria

Must be receiving services from a DBHDD approved provider

Must be ordered on the Individual Recovery/Resiliency (IRP) Plan

Must be authorized by the ASO/Beacon Health

Informal Peer Support

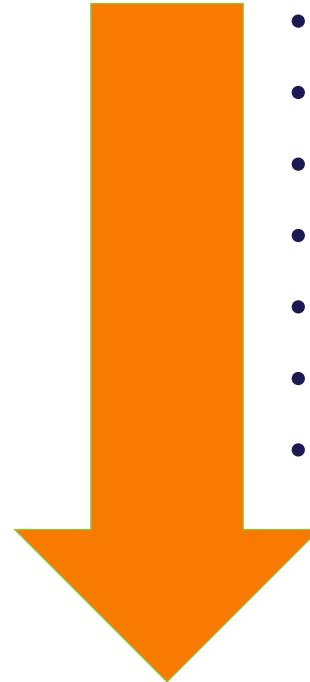
Peer Support received without it being prescribed through a state-funded or peer-run organization

Impact of Peer Support Services

Among other outcomes ...



- “Hard-to-reach” engaged
- Individuals are more involved in their services
- Employment
- Housing
- Provider relationships
- Child Welfare Reunification
- Quality of life



- Substance use
- ED visits
- Inpatient days
- Re-hospitalizations
- Re-incarceration
- Child Welfare Involvement (youth)
- Cost of services

Sources: Mental Health America, *Evidence for Peer Support*, May 2018 (available online); L. Mangrum, R. Spence, M. Nichols, and C. Peterson, *Recovery Support Services Project FY 2015 Final Evaluation Report*, University of Texas Addiction Research Institute, 2016, Anthony et al., 2009; Cameron, 2002; Rauber, 2009

The Focus of the Certified Peer Specialists

One of the primary functions of the Peers is to support and promote **recovery**.



Making a Connection

Addressing Isolation

Building Knowledge and Skills

Cultivating Hope

Peers Can Assist With

- Encouraging personal responsibility
- Building empowerment and self-determination
- Assisting others in skill-building and problem-solving
- Building self-directed recovery tools
- Establishing personal health directives and making informed decisions





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Questions

Next BHCC Meeting

May 12, 2021