

Behavioral Health Coordinating Council Meeting

BE D·B·H·D·D

Georgia Department of Behavioral Health & Developmental Disabilities

August 5, 2025



Agenda

Roll Call

Call to Order

Recovery Speaker

Action Items

- May 8, 2025 Meeting Minutes

BHCC Initiative Updates

- Mindworks Georgia
 - MATCH
-

Forensic Peer Mentors:
DBHDD-DJJ Partnership

Next Meeting Date

Roll Call

Chelsee Nabritt

Board and Special Project Manager

Call to Order

Christopher Nunn
Commissioner

Recovery Speaker

Ashley Black

Program Director, Rise Up

Action Items:

- May 8, 2025 Meeting Minutes

BHCC Initiatives

Mindworks Georgia

Ashlie Oliver, Sr. Policy Advisor, Mindworks GA
Center of Excellence for Behavioral Health and Wellbeing
August 5, 2025



Georgia Department of Behavioral Health
& Developmental Disabilities

Overview

Q2
Implementation
Highlights

Local
Interagency
Planning Teams
(LIPTs)

GMAP Updates

Q2 Implementation Highlights

Mindworks Vision: *We exist to connect the dots of the behavioral health system to improve access and outcomes for Georgia families.*

- **Therapeutic Care Model (TCM)** state plan amendment (SPA) is now with CMS and DCH is in the very early stages of working to get approval.
- **Data Usage Agreement (DUA)** has been updated in partnership with DCH leadership and is currently being routed through legal for approval – the final step before execution.
- **New Executive Committee Members**
 - Mark Muma, *Assistant Director of the Office of Whole Child's Safety, Health, and Wellbeing Division, GaDOE*
 - Christy Doyle, *Sr. Director Office Children Young Adults & Families – DBHDD*
 - Arianne Weldon, *Georgia Family Connection Partnership, MATCH Chair*
 - **VACANT – DHS/DFCS Seat**
- **HB268 Policy Brief** breaks down the key components of the bill and highlights how the state is addressing student mental health and school safety.
- **Strategic Plan Updates** Health Management Associates (HMA) is actively conducting focus groups, key informant interviews, and research/evaluation to update The Georgia System of Care State Plan. Update plan and recommendations will be completed by **October 2025**.

HB 268:

GEORGIA'S STEPS TOWARD IMPROVING SCHOOL CLIMATE, SCHOOL SAFETY, AND STUDENT WELLBEING



School safety and school climate are top priorities of state leadership this year following the mass casualty incident at Apalachee High School in Winder, Ga., in September 2024. Following this incident, Georgia lawmakers expressed commitment to preventing further tragedies by improving safety in schools and ensuring student well-being. Several bills related to addressing school safety and improving mental health in schools were introduced during the 2025 legislative session.

The largest of these bills was **HB 268**, a comprehensive bill aimed at ensuring school safety primarily by increasing mental health services in schools and improving student data tracking. This bill was signed into law by Gov. Brian P. Kemp in April 2025. The General Assembly also **appropriated** funding for state fiscal year 2026 to implement the items in this bill, including \$108 million to provide grants to schools to support school security needs and to provide for student mental health support and \$19.6 million to the Department of Behavioral Health and Developmental Disabilities (DBHDD) to establish student mental health support grants. There are also several appropriations for specific line items.

- **4 in 5** children (aged 6-17) with mental health challenges receive no treatment.
- **Suicide** is the leading cause of death for young people (aged 5-24).
- **1 in 10** children has a mental health condition that impairs daily functioning.
- **1 in 4** high school students reports feelings of depression.
- **Elementary students with mental health needs are 3 times more likely to face suspension or expulsion.**

Source: Georgia HOPE (2025)

- **40.68%** of Georgia middle and high school students surveyed in 2022 reported anxiety or fear disrupting their daily lives within the past 30 days.
- **73,000** students reported seriously considering self-harm in the past year.
- **46%** of Georgia children needing mental health services struggle to access care, meaning nearly half of the 515,491 children (aged 3-17) seeking help may go without essential support.

Source: School-Based Behavioral Health Collaborative (2025)

HB 268 is critical to Georgia's behavioral health system of care because it directs the state to prioritize services across all levels of the continuum of care, recognizing schools as an access point for many children and families. The bill includes prevention services such as Tier 1 Positive Behavioral Interventions and Supports (PBIS) and violence and suicide prevention training. The bill is also unprecedented in its requirement for school safety plans to address behavioral health needs and include a behavioral threat assessment, an evidence-based plan to identify and mitigate potential threats.

HB 268 addresses several of Mindworks' 2024-2026 priority objectives, including increasing awareness of and counteracting stigma around mental health challenges and advancing expanded roles of child-serving state agencies in prevention and early intervention. HB 268 also designates DBHDD as the

Q2 Implementation Highlights

Mindworks secured support to sustain and scale programs that improve outcomes for children and families, thereby strengthening Georgia's System of Care.

- **CAPTA Grant (Division of Family and Children Services)** - Support services for families affected by substance abuse in Coweta, Meriwether, and Troup counties. (Plans of Safe Care, Evidence-Based Home Visiting, Behavioral/Mental Health Services)
- **Georgia THRIVE Pathways (Georgia Opioid Crisis Abatement Trust)**- Support services for pregnant or parenting families in Clayton County. (Utilization of Community Resource HUB, Evidence-Based Home Visiting, and access to Behavioral/Mental Health Services)
- **Community Transformation (Department of Early Care and Learning)**—Funding supports a pilot in Athens/Clarke County focused on providing Local Interagency Planning Team (LIPT) services to families with children 0-3. The pilot features a partnership between the local LIPT and Babies Can't Wait Program. Output(s): Best practices on how LIPT and BCW programs statewide can operate in tandem to ensure a continuity of care for children.



An empowered parent invests in their child's future, a supported parent can be present for their child, and a healing parent can heal their child."

—Kimberly Nabarro
parent with lived experience

Who is eligible?

Pregnant OR parenting a child 0-3 years of age

AND

Has detectable signs or symptoms foreshadowing mental, emotional, behavioral, substance use, or opioid use disorders.

OR

Family member or loved one of the above

What services are offered?

- Enhanced home visiting
- Peer support
- Clinical services
- Child-Parent Psychotherapy
- Plans of safe care
- Medication-assistance treatment
- Education
- Resources

WHAT DOES GEORGIA THRIVE PATHWAYS DO?

Georgia THRIVE Pathways is a program designed to support families impacted by substance use disorder and opioid challenges. It provides personalized care through screening; connecting individuals and families to treatment services; and offering enhanced home visiting programs, educational resources, and peer support. Its goal is to help families navigate recovery, improve health outcomes, and build stronger, safer communities.



Local Interagency Planning Team (LIPTs)

Purpose: *to improve and facilitate the local coordination of services to youth with or at risk for mental or behavioral health challenges.*

LIPT Strategic Planning:

- Development of *The Unrealized Potential of Local Interagency Planning Teams (LIPT)* brief. Prioritized recommendations include:
 - ✓ Investment in a centralized data portal (Unite Us launched in April 2025)
 - ✓ Medicaid reimbursement for Certified Peer Specialist time w/LIPT.
 - ✓ Update Georgia code language from severe emotional disturbance diagnosis to youth with or at risk of a BH diagnosis or SU disorder (language drafted and updated).
 - ✓ Review of mandated partner participation (drafted recommendations).
 - ✓ Strengthen communication and collaboration between LIPTs and care management organizations.

Policy intersection:

- *HB268: LIPT alignment w/school safety and community BH support*
- *HR611: Improve LIPT work with CMOs to improve coordination (mentioned as recommendation in LIPT brief)*

LIPT Update Overview

TRAINING AND PRESENTATIONS

- Ongoing LIPT Training & Presentations
 - GA-AIMH Conference
 - APHA EXPO
 - IECMH Workshop w/LIPTS
- GA THRIVE LMS platform collaboration for training and educational resources
- LIPT-IECMH Pilot (Clarke Co.)

DOCUMENTS

- LIPT Brief (Key Recommendations One-Pager)
 - Code Language Pullouts
- Multi-Disciplinary Team (MDT) Resource Directory
- LIPT Postcard
- SOC Green Book (Pocket-sized book)

TECHNOLOGY

- Unite Us (closed loop referral tracking platform)
 - LIPT-MATCH Pilot
 - LIPT-DECAL Pilot (TBD)
- Little Green Book Phone App (*statewide behavioral health dictionary and resource*)
- New MWG Website will be launched in August

GA Mental Health Access in Pediatrics (GMAP)

- Purpose: Aimed at coordinating increased access to pediatric mental health services, especially in underserved communities, through telehealth-based health integration in pediatric primary care in Georgia. Implemented in 2021, funded by HRSA
- Participating GMAP providers gain access to:
 - **Provider Education** through [Project ECHO](#), an interactive telementoring learning approach between behavioral health specialists and pediatric providers,
 - **Teleconsultation** guidance on cases through two telephone advice lines (one operated through behavioral health specialists at CHOA, and the other operated through Child Psychiatrists at Augusta University), and
 - **Care coordination** services for families they serve, through a directory of behavioral health providers by Georgia county.

- GMAP is Ga's PMHCA Program
- Over 54 PMHCA Programs across United States
- According to the 2025 State of Child Health and Well-Being in Georgia report parents statewide reported that 15% of Georgia children experience anxiety and 5% experience depression, and the state now ranks 48th in the country for access to mental health care



Pediatric Mental Health Care Access (PMHCA) Program Fact Sheet

PMHCA Overarching Program Goal

Promote behavioral health integration into pediatric primary care by using telehealth modalities to provide high quality and timely detection, assessment, treatment and referral for children and adolescents, with behavioral health conditions, using evidence-based practices and methods.



PMHCA Program Purpose

- Promote** behavioral health integration in pediatric primary care telehealth access programs.
- Provide** training and education to support the treatment of children and adolescents with behavioral disorders.
- Support** telehealth consultation and referral to a local pediatric provider, to the extent possible.
- Serve** as a resource for pediatric primary care providers, psychiatric health professionals, and care coordinators.

Key Program Results

- Growing Reach
 - Since 2021, GMAP has enrolled 171 pediatric providers across all six regions of the state.
- Teleconsultation Impact
 - Over 740 consultations and referrals have been completed.
 - Most focused on common challenges like anxiety, ADHD, depression, autism, and behavioral issues.
- High Satisfaction
 - 96% of providers who used the advice line said their questions were answered by a mental health expert.
 - 80% would recommend the program to others.
 - Many reported they now feel better able to help children with behavioral health needs.

Key Program Results

- Training and Education
 - GMAP has led 22 Project ECHO training cohorts on important topics like
 - *anxiety,*
 - *ADHD,*
 - *early childhood mental health,*
 - *autism,*
 - *pediatric firearm injury prevention and intervention,*
 - *the impact of school violence on pediatric mental and behavioral health,*
and
 - *and building resilience in children.*

Sustaining GMAP (*Recommendations*)

- **Create a Dedicated Line Item in the Governor's FY27 Budget** under the Department of Behavioral Health and Developmental Disabilities (DBHDD) Child and Adolescent Mental Health Services
- **Strengthen Medicaid Policy to Support Integrated Care, Managed Care Organization (MCO) Incentives, and Telehealth Waivers**
 1. **CPT 99451**: Interprofessional telephone/internet/electronic health record assessment and management by a consulting physician (typically used for one-time consults).
 2. **CPT 99452**: Referral service provided by the treating/requesting provider
 3. **CPT 99492–99494**: Used for the Collaborative Care Model (CoCM), which involve psychiatric case review and care coordination with a behavioral care manager in primary care.

GREEN: Georgia Medicaid **does** currently reimburse

RED: Georgia Medicaid **does not** currently reimburse

Sustaining GMAP (*Recommendations*)

- **Integrate GMAP with DBHDD's Certified Community Behavioral Health Clinics (CCBHCs)**
 - Missouri & Oklahoma were early adopters of the CCBHC model and have used CCBHCs to expand access to child & adolescent mental health services, including consultation, care coordination, and crisis services.

Return on Investment

- GMAP helps prevent costly emergency room visits, hospitalizations, and crisis services.
- Evidence from similar programs shows that every \$1 invested can save approximately \$1.70 to \$2.00 in avoided healthcare costs.
 - Based on the evaluation of similar mental health access programs in other states such as VMAP in Virginia, a \$4 million annual appropriation is expected to yield at least \$6–7 million in system savings each year,
- Improving outcomes for children, keeping families out of crisis, and easing the burden on Georgia's already strained mental health system.
- This is a cost-effective investment that delivers measurable returns for both Georgia families and taxpayers.

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Georgia Department of Behavioral Health & Developmental Disabilities

Heather Stanley ATR-BC, LPAT
MATCH Program Director

August 5, 2025





BE INSPIRED

Success Stories

RECORD BREAKING MATCH PILOTS

LOCAL FAMILIES OVERCOME CHALLENGES THROUGH INNOVATIVE THERAPY PROGRAMS



In a heartwarming story of resilience, a local family successfully overcame significant challenges with the help of Function Family Therapy (FFT). Beginning in February 2024, they sought assistance for their 12-year-old child, who experienced school avoidance due to anxiety, trauma, and family conflict. Despite facing difficulties, including emotional struggles from loss and past abuse, the family worked with skilled therapists to improve communication and problem-solving skills. Their efforts led to remarkable changes, with the youth and their oldest sibling attending school consistently and experiencing reduced anxiety, resulting in a more harmonious home environment. By August 2024, the family proudly graduated from the FFT program, showcasing their dedication and the transformative power of therapy. Their journey serves as a beacon of hope for others facing similar struggles, demonstrating that positive change is achievable with support and hard work.

HILLSIDE IN COMMUNITY EXPANDS IN-HOME DBT PROGRAM WITH DBHDD MATCH SUPPORT

NOVEMBER 2024 - THANKS TO THE DBHDD MATCH PILOT PROJECT, HILLSIDE IS EXPANDING ITS IN-HOME DIALECTICAL BEHAVIOR THERAPY (DBT) PROGRAM INTO MORE COUNTIES ACROSS GEORGIA. THIS INITIATIVE AIMS TO SUPPORT CHILDREN AND FAMILIES FACING SIGNIFICANT MENTAL HEALTH CHALLENGES, MANY OF WHOM HAVE EXPERIENCED MULTIPLE TREATMENT FAILURES AT THE COMMUNITY LEVEL.



SINCE LAUNCHING IN NOVEMBER, HILLSIDE HAS SERVED EIGHT CHILDREN, WITH AN AVERAGE PROGRAM DURATION OF SIX MONTHS. THIS EFFORT HIGHLIGHTS THE IMPORTANCE OF COMMUNITY SUPPORT IN PROMOTING MENTAL HEALTH RESOURCES AND ENSURING THAT NO CHILD FEELS LIKE A FAILURE IN THEIR JOURNEY TOWARD RECOVERY.

*SPECIAL
EDITION*

Breaking News

*SPECIAL
EDITION*

VOL. 1, NO. 1



MATCH PILOTS



08/04/2025



A YOUNG GIRL'S JOURNEY TO STABILITY HAS CAPTURED THE ATTENTION OF THE COMMUNITY AFTER SUCCESSFULLY COMPLETING THE INTERCEPT PROGRAM, FOLLOWING A TURBULENT PERIOD MARKED BY CHALLENGING BEHAVIORS AND FAMILY CONFLICTS.

THE YOUTH, WHO HAD BEEN AWAY FROM HOME FOR OVER TWO MONTHS, INITIALLY RAN AWAY AND WAS LIVING WITH AN ADULT MALE, WHICH RAISED CONCERNS THAT LED TO HER REFERRAL TO THE INTERCEPT PROGRAM BY DOUGLAS COUNTY FAMILY AND CHILDREN SERVICES. THIS INITIATIVE SEEKS TO ASSIST AT-RISK YOUTH IN NAVIGATING THEIR EMOTIONAL AND BEHAVIORAL CHALLENGES.

UPON ENTERING THE PROGRAM TWO MONTHS AGO, THE YOUTH WAS MONITORED CLOSELY, INCLUDING THE USE OF AN ANKLE DEVICE FOR SAFETY. HOWEVER, AFTER THE DEVICE WAS REMOVED IN HER FIRST WEEK, SHE FACED DIFFICULTIES IN REGULATING HER EMOTIONS. A NOTABLE INCIDENT OCCURRED SHORTLY THEREAFTER WHEN THE YOUTH BECAME VERBALLY AGGRESSIVE TOWARD HER MOTHER AFTER BEING DENIED PERMISSION FOR A SLEEPOVER WITH ACQUAINTANCES HER MOTHER DID NOT KNOW.

DURING THE ESCALATION, A SPECIALIST FROM THE INTERCEPT PROGRAM PROVIDED ON-SITE SUPPORT TO HELP DE-ESCALATE THE SITUATION. THANKS TO THE SPECIALIST'S INTERVENTION, BOTH THE MOTHER AND DAUGHTER WERE ABLE TO COMMUNICATE EFFECTIVELY AND ADDRESS THE TENSIONS PRESENT IN THEIR RELATIONSHIP.

DESPITE THE POSITIVE INTERVENTION, THINGS TOOK A TROUBLING TURN WHEN THE YOUTH WAS DETAINED FOR THREATENING HER SISTER WITH A KNIFE. FOLLOWING THIS INCIDENT, COURT PROCEEDINGS ENSUED, AND THE MOTHER EXPRESSED SAFETY CONCERNS THAT LED HER TO CONSIDER FOSTER CARE FOR HER DAUGHTER. THE SPECIALIST REASSURED THE MOTHER THAT KEEPING THE FAMILY UNIT INTACT, ALONG WITH CONTINUED SUPPORT FROM THE INTERCEPT PROGRAM, WAS KEY TO THEIR HEALING PROCESS.

WITH GUIDANCE FROM THE PROGRAM, THE YOUTH WAS GRANTED ACCESS TO DOUGLAS COUNTY'S CHANCE COURT, WHERE ADDITIONAL RESOURCES WERE CONNECTED, ALLOWING TARGETED SUPPORT FOR HER SITUATION. THE SPECIALIST MAINTAINED COMMUNICATION WITH THE FAMILY DURING AND AFTER THE YOUTH'S STAY AT THE REGIONAL YOUTH DETENTION CENTER (RYDC).

UPON RETURNING HOME, THE FAMILY FOCUSED ON ENHANCING THEIR COMMUNICATION SKILLS AND REBUILDING RELATIONSHIPS. OVER THE PAST TWO MONTHS, THE YOUTH HAS DEMONSTRATED REMARKABLE IMPROVEMENT IN MANAGING HER EMOTIONS AND HAS MADE SIGNIFICANT STRIDES IN HER RELATIONSHIP WITH HER MOTHER AND SISTER.



SHE HAS MET ALL REQUIREMENTS SET FORTH BY THE CHANCE COURT AND SUCCESSFULLY PASSED ALL DRUG SCREENINGS, A NOTABLE FEAT CONSIDERING HER PREVIOUS CHALLENGES.

THE PROACTIVE STEPS TAKEN BY THE FAMILY, INCLUDING SECURING POTENTIALLY HARMFUL OBJECTS IN THE HOME, REFLECT A COMMITMENT TO SAFETY AND A COLLECTIVE EFFORT TO MAINTAIN THE POSITIVE PROGRESS ACHIEVED THROUGH THE INTERCEPT PROGRAM. THIS CASE UNDERSCORES THE POTENTIAL FOR RECOVERY AND THE POSITIVE IMPACT OF COMMUNITY SUPPORT SYSTEMS IN HELPING FAMILIES NAVIGATE AND OVERCOME DIFFICULT TIMES, OFFERING HOPE THAT WITH THE RIGHT RESOURCES AND COMMITMENT, CHANGE IS POSSIBLE.

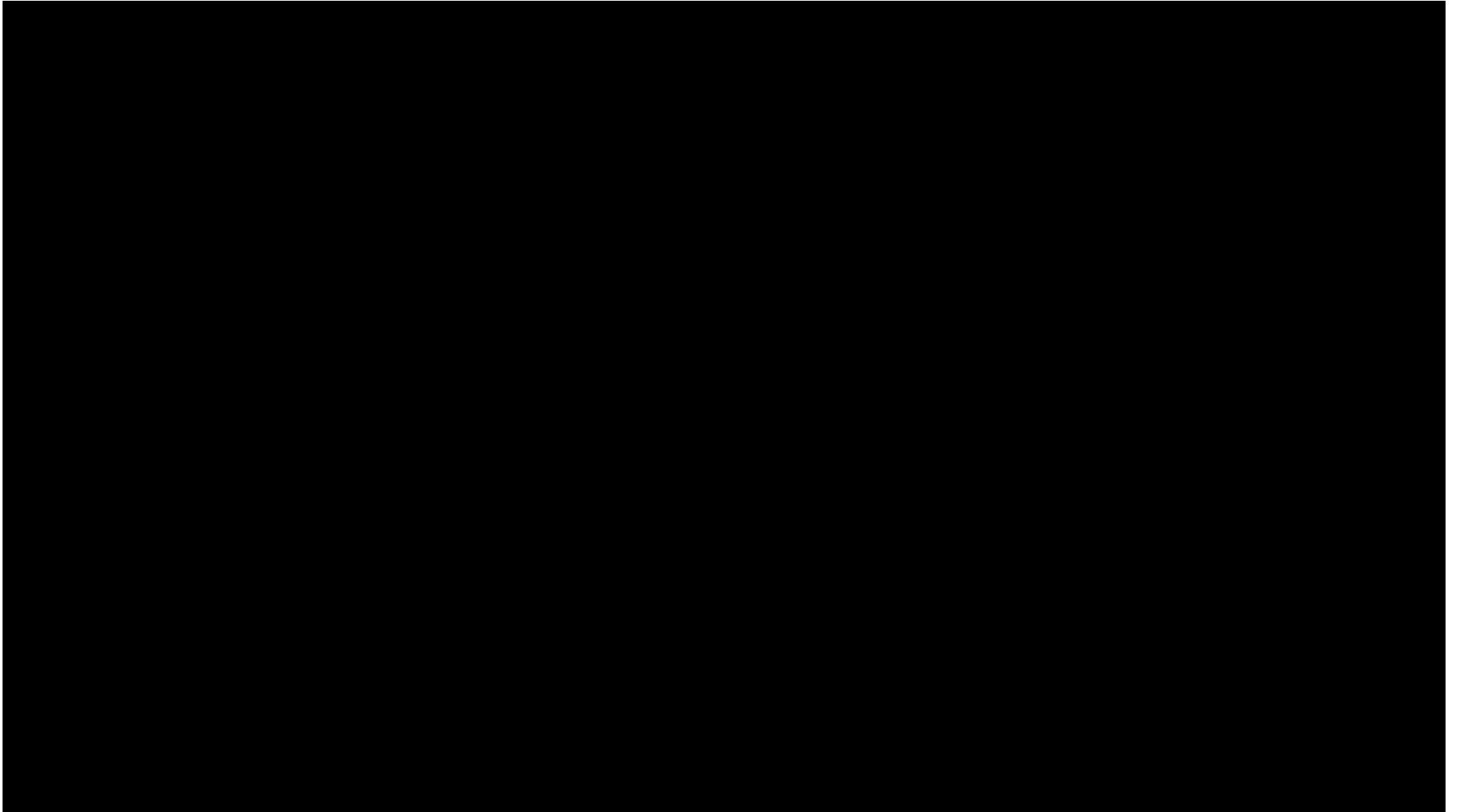
COMMUNITY MEMBERS AND LOCAL OFFICIALS CONTINUE TO RALLY AROUND THE YOUTH AND HER FAMILY, EMPHASIZING THE IMPORTANCE OF ONGOING SUPPORT FOR FAMILIES IN SIMILAR CIRCUMSTANCES.



[HTTPS://DBHDD.GEORGIA.GOV/BE-DBHDD/BE-SUPPORTED/MENTAL-HEALTH-CHILDREN-YOUNG-ADULTS-AND-FAMILIES/MATCH](https://dbhdd.georgia.gov/be-dbhdd/be-supported/mental-health-children-young-adults-and-families/match)



Provider Success



A close-up photograph of a hand holding a blue pen, poised to write on a spiral-bound notebook. The notebook's pages are white, and the black spiral binding is visible on the left. The background is a soft, out-of-focus brown surface.

BE INFORMED

Magic Moments

The Impact of MATCH in Georgia: Magic Moments Detailed

System Growth

- Increased purposeful communication
- Solution-focused cross-agency collaborations
- Creative growth approaches
- Facilitated joint funding among state agencies

Strengthening the System of Care

- Fostered meaningful and transparent collaborations
- Expanded and fortified the System of Care

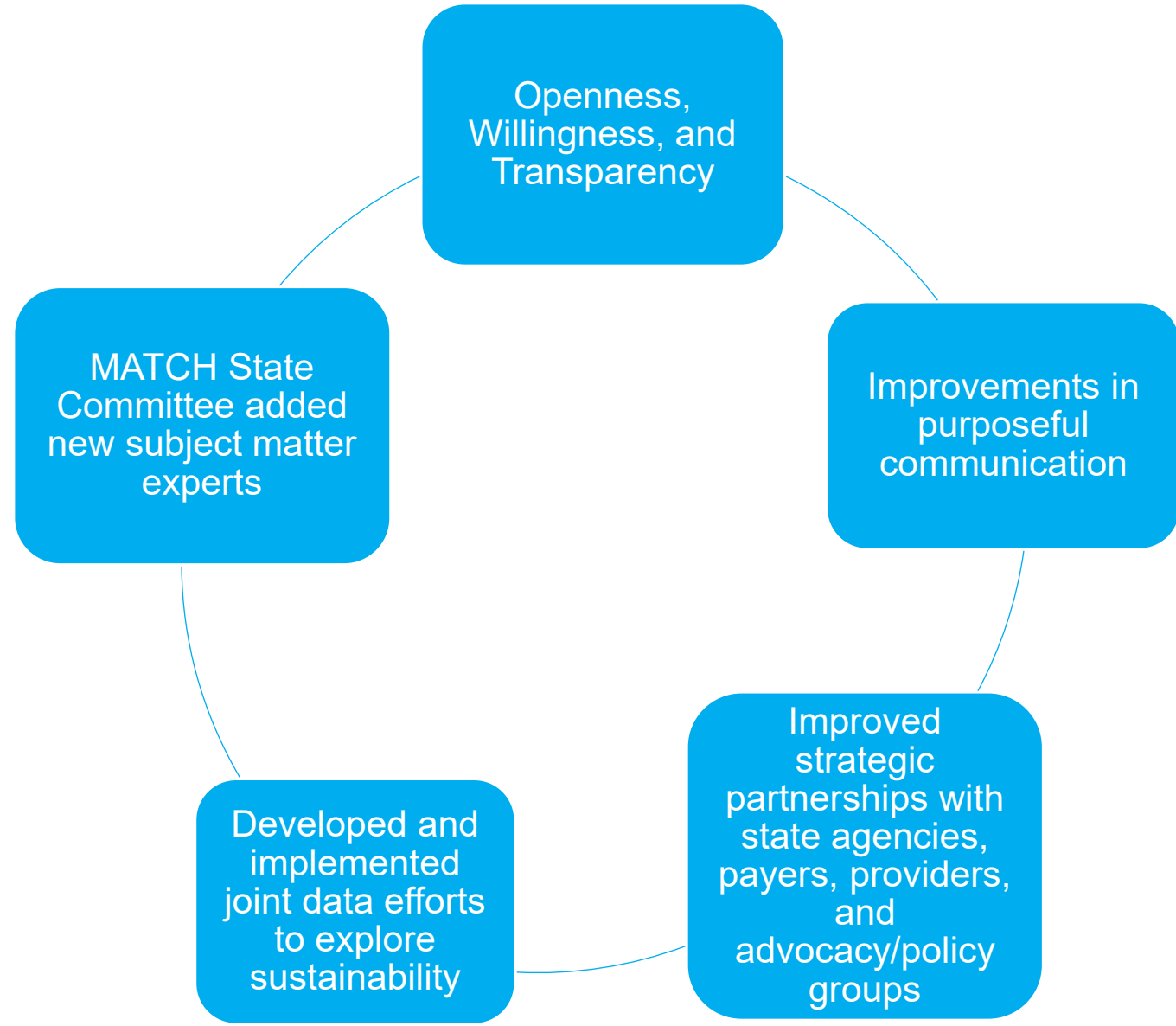
Policy Clarification

- Assisted a state agency in clarifying policies
- Increased access for children, youth, and families

System Growth: Cross System Collaboration Improvements

Through MATCH subgroups:

- HR 611
- Sustainability
- DCH/CMO/MATCH
- Operations Team



Provider Relations: Strengthening the System of Care

Providers report:

Confidence



Providers have renewed confidence in state agencies, the workforce, and their sustainability

Expand



Providers have expanded their coverage areas

Eligibility



Providers have expanded their scope of work to become Medicaid Billable Providers

Found Support



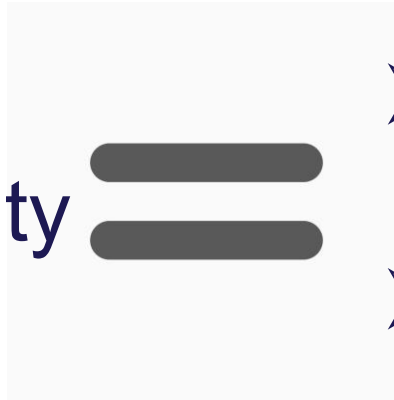
Providers have been able to transparently connect with other providers to share resources, brainstorm solutions, and develop community connections

Policy

- With support and guidance from DBHDD legal, the MATCH State Committee requested and received DHS clarification of the licensing rule for respite care providers so that custody would not be a barrier to participation.
- The MATCH State Committee is reviewing recommendations for legislative Study Committee HR 611 to support families with children admitted to Psychiatric Residential Treatment Facilities with accessing Community Transitional Planning at admission.

Magic Summary

- Expanded and Enhanced Provider Network
- Increased Connections
- Cross Agency Sustainability
- Frequent and Purposeful Communication
- Enhanced Collaboration among state agencies



- Lasting Systemic Change
- System of Care Fortification
- Better Outcomes for families and youth in Georgia
- Improved Safety Net

The MAGIC of MATCH has opened doors to positive change, ensuring a better future for Georgia's children, youth, and families.



**Forensic Peer Mentors:
DBHDD & DJJ
Partnership**

**Ladji Ruffin, Forensic Peer Mentor Trainer/
Liaison, DBHDD**

**Cathy Smith-Curry, Director Re-Entry
Services, DJJ**



Georgia Department of Juvenile Justice

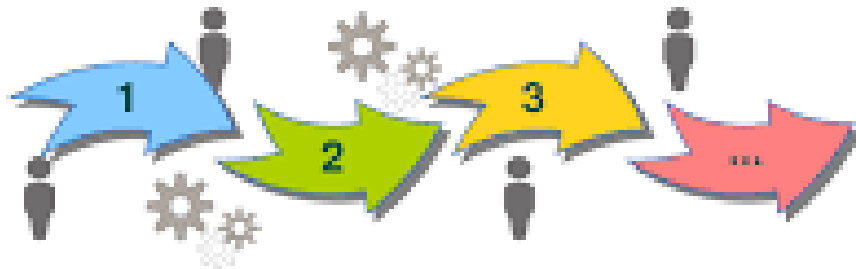


A Forensic Peer Mentor is an individual who has lived experience and a behavioral health diagnosis and/or a co-occurring substance use diagnosis. The Georgia Department of Juvenile Justice and Georgia Department of Behavioral Health and Developmental Disabilities have partnered to support this project with an overarching goal of providing a comprehensive and individualized transition planning process for all committed youth screened for long-term restrictive custody exiting a DJJ facility. This presentation will highlight the integrated strategic process of engaging families, youth, and community stakeholders to achieve successful outcomes for justice-involved youth.



Re-entry Defined

“Re-entry” is not a specific program, rather a process that starts when a youth initially enters our system and ends when the youth has been successfully re-integrated into his/her community as a law-abiding citizen.





Benefits of Forensic Peer Mentor Services

- ☐ Connect to community mental health services and advocate when the peer cannot.
- ☐ Support youth and family
- ☐ Connect to counseling, medical, and dental services
 - The FPM can accompany the youth & family to initial post-release appointments to facilitate a comfortable connection with providers
- ☐ Educate other judicial agencies about recovery
- ☐ Assist with probation challenges and concerns
- ☐ Connect to food, clothing, and housing resources



Forensic Peer Mentor Services Outcomes (Adults)

- ❑ Since its inception in 2015, outcomes have been promising
 - DRC participants consistently show a reduction in recidivism of 8% to 13% compared to 28% to 30% statewide, as reported by the State Board of Pardons and Paroles
 - Mental Health Court participants have shown marked improvements (success vs. failure)



Forensic Peer Mentor Services Outcomes (Youth)

- ❑ Since its inception in March of 2025, outcomes have been promising
 - Incidents have decreased by 50%
 - Self-injurious behavior has decreased
 - Use of force incidents have decreased



Georgia Department of Juvenile Justice



DJJ Year-over-Year Comparison (April – June)

Facility incidents	April 2024/2025	May 2024/2025	June 2024/2025	% Decreased
Use of Force	15/4	15/5	13/5	67%
Self-injurious behaviors	17/4	17/2	16/4	80%



Highlights from the NYS Justice Peer Conference Phase 3: Driving Change by Elevating Voices

- Workshops and presentations
 - Family dynamics
 - Support for children
 - Mental health and substance use disorders
 - Intellectual and developmental disabilities
 - Food access, etc.
- A visit to the Center of Alternative Sentencing and Employment Services (CASES)
- Team field visits to clients in Staten Island, Crown Heights, and Manhattan





Georgia Department of Juvenile Justice



The Forensic Peer Mentor works to ensure the assigned youth receives the support needed to reach their individual recovery goals, reduce recidivism, and live meaningful and productive lives in the community.

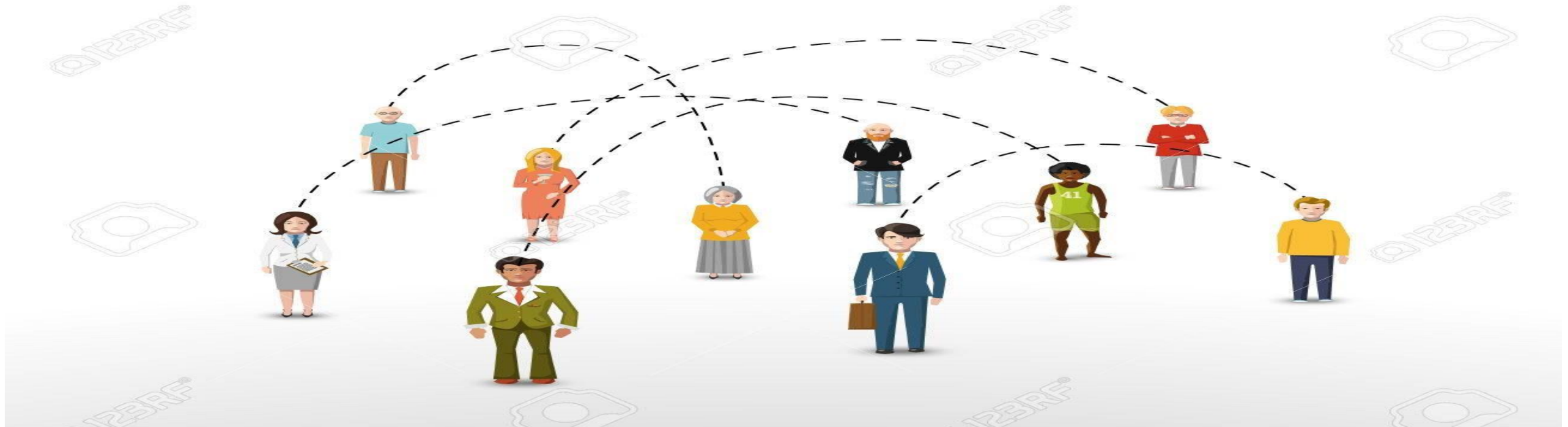


Georgia Department of Juvenile Justice



Provider Connections

"We Connect People to People"





Georgia Department of Juvenile Justice



Thank You!

Ladji Ruffin, Georgia DBHDD

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Cathy Smith-Curry, Georgia DJJ

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Closing Comments

Next BHCC Meeting:

November 20th, 2025

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Georgia Department of Behavioral Health & Developmental Disabilities

