

# Board of Behavioral Health and Developmental Disabilities

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**BE D·B·H·D·D**

Georgia Department of Behavioral Health & Developmental Disabilities

June 11, 2020



# Agenda

Call to Order

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Recovery Speaker

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Action Items

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Commissioner's Report

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Chair's Report

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Public Comment

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Next Meeting Date

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# Call to Order

Kim Ryan  
Chair

# Recovery Speaker

Jeff Breedlove

Georgia Council on Substance Abuse

# Action Items:

- Past Meeting Minutes

# Commissioner's Report

Judy Fitzgerald  
Commissioner

# Legislative and Budget Update

**Doug Reineke**

Legislative Director



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# COVID-19 Update: DBHDD Hospitals

**Emile Risby, M.D.**  
Medical Director



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# DBHDD Hospitals: The New Normal, June 2020

# DBHDD Hospitals New Normal – June 2020

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- COVID-19 screening of all employees upon arrival and mid-shift
- Rescinded the position of denying positive COVID-19 referrals
- COVID-19 testing on all new admissions
- COVID-19 screening of all in-patients twice a day
- Quarantine procedures/units
- Isolation procedures/units
- Only necessary visitations

# Recent changes at DBHDD Hospitals – June 2020

- Employees

- Education and training
- Assistance with COVID-19 testing
- Face covering required in patient care areas
- Arrival and mid-shift screening
- Adequate PPE
  - Patient care areas
  - Quarantine units
  - Isolation units

- Patients

- All admissions tested
  - Negative test go to quarantine
  - Positive test go to isolation
  - **Significant impact on pace of admissions**
- Twice a day screening of all in-patients
- Any in-patient who develops symptoms sent to isolation; unit quarantined until full infection control assessment done

# Future Plans for the New Normal – June 2020

- Point-of-Care (POC) Testing Kits
  - Antibody Test
    - Gives us broader exposure history
  - Antigen Test
    - Lets us know if the patient is positive at the time of the test
  - CLIA\* Waiver Limitations
    - Requesting an exemption during the emergency period
- Develop Policy for POC Testing
  - All new admissions
  - In-patients who develop symptoms
  - Do we test all patients on the unit when one develops symptoms?
  - Can we/should we test staff, and when?

\*Clinical Laboratory Improvement Amendments

# COVID-19 Update: Community Behavioral Health

**Monica S. Johnson, MA, LPC**

Director

Division of Behavioral Health



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# Supporting the Community and Providers

# Strategies for Community Behavioral Health Network

**Stay informed on federal activity**

**Telehealth and Allowances**

**Provider Webinars and Support**

**Collaboration with Other States**

**Behavioral Health Support**

# Georgia COVID-19 Emotional Support Line

- 310 calls (from April 6 to May 13)



**Georgia COVID-19  
Emotional Support Line  
866-399-8938**

 **DBHDD** Georgia Department of Behavioral Health & Developmental Disabilities

 **BHL** Behavioral Health Link

 **beacon** health options



# 2x2 Webinar Series

## 2x2 Series: Daily Self-Care Tips and Support for Health Care and Emergency Response Workers

These WebEx events are designed to provide daily self-care tips and support for health care and emergency response workers.

Each session will provide attendees with mental health tips about managing stress, grief, work/life balance, and wellness.

**3,721 participants (from April 1 to June 5)**



# COVID-19 Update: Intellectual and Developmental Disabilities

**Ronald Wakefield**

Director

Division of Developmental Disabilities

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# IDD Guidance for Providers and Families

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- How to reduce risks related to COVID-19
- Social Stories
- Fact Sheets
- COVID-19 Health Care Plan
- Webinars for Families and Providers

# COVID-19 Fact Sheet

A **coronavirus** is one of a large group of viruses that can cause illness in animals and humans. Most viruses in this group cause upper respiratory symptoms, such as cough and runny nose. Some types of coronavirus can cause more severe symptoms.

**Novel (new) coronavirus** is a new virus that first appeared in humans in Wuhan, China in 2019. This new virus causes **Coronavirus Disease 2019 (COVID-19)**. Symptoms of **COVID-19** include fever, cough, and shortness of breath. Symptoms can appear 2-14 days after exposure to the virus.

Any person can develop COVID-19 after being exposed to novel coronavirus. Based upon available information, the Centers for Disease Control and Prevention (CDC) has identified people with the following conditions as being at higher risk of developing more severe symptoms:

- People aged 65 years and older
- People who live in a nursing home or long-term care facility
- Other high-risk conditions could include:
  - People with chronic breathing problems, such as COPD or asthma
  - People who have heart disease with complications
  - People who are *immunocompromised*\* including cancer treatment
  - People of any age with severe obesity (body mass index  $\geq 40$ ) or certain underlying medical conditions, particularly if not well controlled, such as those with diabetes, renal failure, or liver disease might also be at risk
- Women who are pregnant should be monitored since they are known to be at risk with severe viral illness; however, to date, data on COVID-19 has not shown increased risk

\*Many conditions can cause a person to be immunocompromised, including cancer treatment, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune-weakening medications.

People can catch this new coronavirus and spread the virus to others *before showing any signs of the illness*.

## Know the Signs

Symptoms can be mild or severe.

The three main symptoms of COVID-19 are:

- **Cough**
- **Fever**
- **Shortness of Breath**

# Fact Sheet

## Know What To Do

### **EVERYONE should:**

- Wash your hands frequently. Use soap and water, and wash for at least 20 seconds, especially after you have been in a public place or have coughed or sneezed.
- Avoid contact with people who are sick.
- Put distance between yourself and other people. Avoid crowded places.
- Regularly clean and disinfect frequently touched surfaces. This includes phones and keyboards.

### **IF YOU ARE SICK:**

Stay home if you are sick. If you must go out, avoid public transportation.

- Cover coughs and sneezes. Do not re-use tissues. Throw used tissues away.
- Wash your hands after you cough or sneeze.
- Separate yourself from other people in your home.
- Call ahead before visiting your doctor. Follow your doctor's instructions carefully. Only go to a doctor's office or hospital when instructed to do so.
- Monitor your symptoms.

Do not share personal household items (towels, dishes, utensils, bedding, etc.)

Wear a mask if your doctor tells you to.

### **IN AN EMERGENCY, Call 9-1-1 immediately if a person in your care:**

- Appears to have difficulty breathing or shortness of breath
- High fever, possibly with chills
- Has persistent pain or feeling of pressure in the chest Is confused or difficult to arouse
- Has bluish color to lips or face
- Has any other severe or concerning symptoms

**Because COVID-19 is a new disease and we are still learning about it, this list may not be complete.**

# Social Stories

We Need to Stay at Home



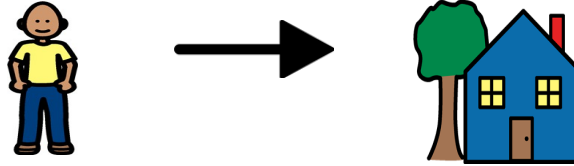
I might miss my family and my



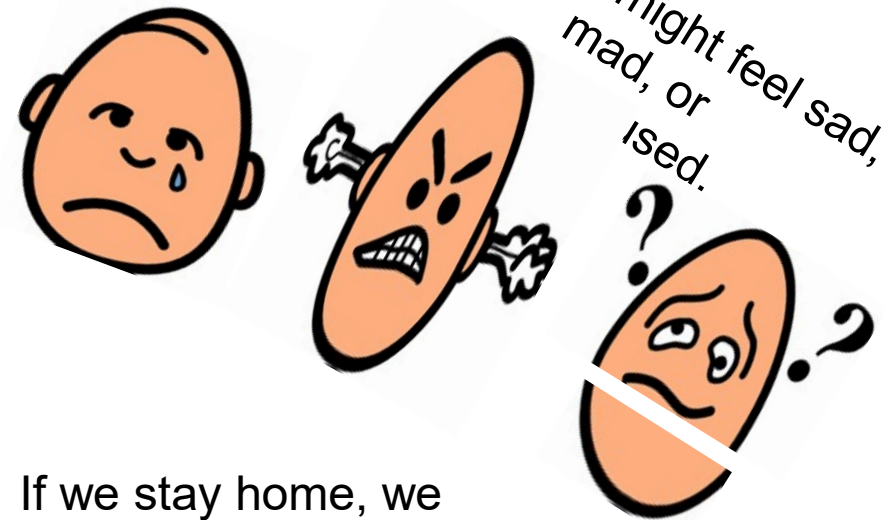
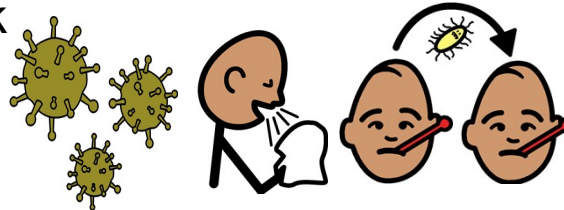
Right now, we can't go out.



Right now, everyone has to stay at home.

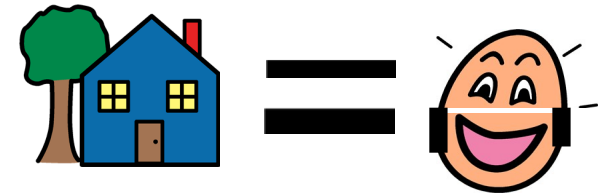


There are germs called coronavirus that can make people sick



I might feel sad, mad, or confused.

If we stay home, we can stay healthy.



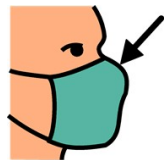
We can all keep healthy



Washing our hands  
Covering our mouth when we sneeze



covering our mouth when we cough



Wearing a face mask

We are going to have a lot more days at home.



But at home, we can do a lot of fun things!



Read



Watch tv



Play



Make art projects



Listen to music



# Example Provider Response

The team has really come together during this time to ensure that our participants are receiving the best care and quality services. Through the implementation of appendix K, we have been able to keep all of our team members on board and have been able to keep our participants who receive CRA services, engaged. We have done so by utilizing our day services team members in the homes to provide activities and a meaningful day. It would be easy during a time when everyone is being asked to stay home and away from others to disengage and spend the days both passively and idly. We knew that this would be the worst thing that we could do for the folks we serve. Our team members have been very creative and innovative in many ways to ensure that meaningful days take place. One of our team members is a former special educator. She helped the residential directors develop a curriculum that could be used by each home utilizing a weekly theme. This curriculum has been invaluable to the team members. With the curriculum, we have been able to help the participants remain active through exercise programs and virtual contests, where the houses have competed in various exercise programs. They have kept some of their prevocational activities going through contactless car washes where vehicles are dropped off, cleaned/washed, and then picked back up with no

# Example Provider Response (continued)

contact with the “customers.” The homes have participated in virtual baking contests, where each home bakes an item to be judged in several categories by the administration through video conferencing. We have also kept social connections in place by letting each participant video conference with families, other participants, and friends. Our team members have also kept spiritual connections in place by utilizing Facebook live on Sundays for church services that are being streamed. The leadership team has also felt a need to remain connected to our participants. Our day services directors have been making personal calls to all of our participants (residential and day) and their families to touch base, lend support, offer advice, and keep them informed. The leadership team also organized a leadership “parade” to each residential home and host home. All of our leadership team met, decorated our vehicles, and paraded past each residential site.

While this has been a most challenging time, the support of DBHDD has made it possible for us to remain a family. We have definitely learned a different way to deliver services, but through it all, we’ve learned that together, we can do anything!



# Behavioral Health Reform and Innovation Commission

**Monica A. Patel, Esq.**

Director

Legal Services



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# Creation

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- House Bill 514
- 2019-2020 Legislative Session
- Effective for 4 years

# Purpose

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Conducting a comprehensive review of the behavioral health system in Georgia to include:

- Behavioral health services and facilities available in this state;
- Identification of behavioral health issues in children adolescents, and adults;
- Role the educational system has in the identification and treatment of behavioral health issues;
- Impact behavioral health issues have on the court system and correctional system;

# Purpose (continued)

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- Legal and systemic barriers to treatment of mental illnesses;
- Workforce shortages that impact the delivery of care;
- Whether there is sufficient access to behavioral health services and supports and the role of payers in such access;
- Impact on how untreated behavioral illness can impact children into adulthood;
- Need for aftercare for persons exiting the criminal justice system; and
- Impact of behavioral illness on the state's homeless population.

# Duties

To review the conditions, needs, issues, and problems related to behavioral health issues and to recommend action, including proposed changes to rules, regulations, policies, and programs, and proposed legislation deemed necessary or appropriate;

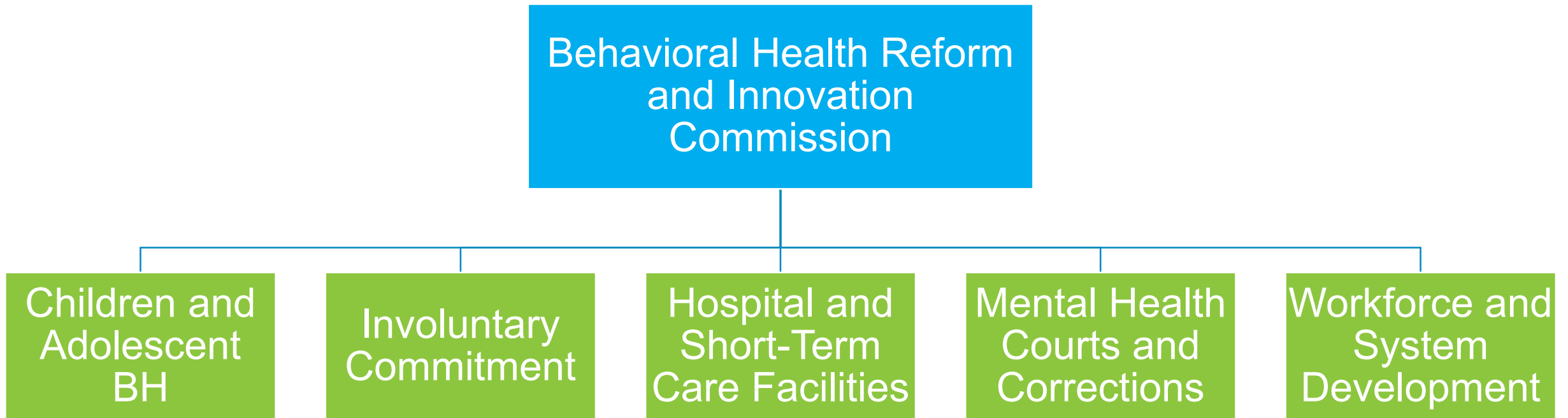
To evaluate and consider the best practices, experiences, and results of legislation in other states with regard to the behavioral health system with respect to both children and adults; and

To annually report on the work of the commission to the Governor, President of the Senate, and Speaker of the House of Representatives.

# Membership

- Psychiatrists: 1 who specializes in children and adolescents and 1 in adults;
- Health care provider with expertise in traumatic brain injuries;
- State education official with broad experience in education policy;
- Chief executive officer of a mental health facility;
- Forensic psychologist;
- Local education official;
- Professional who specializes in substance abuse and addiction;
- Legislators;
- Sheriff;
- Licensed clinical behavioral health professional;
- Behavioral health advocate;
- Police chief;
- Judges (including 1 who presides in an accountability court)

# Subcommittees



# DBHDD Involvement

## Membership

Commissioner Fitzgerald  
Dr. Karen Bailey, Ph.D.

**Presentations to  
Commission and  
Subcommittees**

**On-site meetings**

**Access to DBHDD staff  
for questions**



# Chair's Report

Kim Ryan  
Chair

# Public Comment

# Next Board Meeting

Thursday, August 13, 2020  
1:00 p.m.