Board of Behavioral Health and Developmental Disabilities

BED·B·H·D·D

Georgia Department of Behavioral Health & Developmental Disabilities



October 8, 2020



Roll Call / Call to Order

Recovery Speaker

Action Items

Commissioner's Report

Action Item

Chair's Report

Public Comment

Next Meeting Date

Roll Call

Call to Order

Kim Ryan Chair **Recovery Speaker**

Deb Esposito Georgia Council on Substance Abuse

Action Items:

• Board Meeting Minutes – August 25, 2020

Commissioner's Report

Judy Fitzgerald Commissioner

DBHDD Hospitals COVID-19 Co-existence

- Screening of all employees upon arrival and mid-shift
- Eye protection added to face coverings for employees working in any patient care areas of the hospitals (not just quarantine or isolation units)
- Monitor employee compliance for proper PPE use (consistently >95%)
- Each hospital has quarantine and isolation procedures/areas
- Twice per day screening of all patients
- COVID-19 testing on all new admissions (patient goes to quarantine or isolation depending on results)

DBHDD Hospitals COVID-19 Co-existence

- Converted previously non-patient care areas into quarantine or isolation areas – this has resulted in some facility utilization challenges (treatment mall, gym, office spaces)
- The hospitals have become competent in managing COVID-related issues when they occur on the campus.
- Only necessary visitations
- Discharge planning no longer do temporary visits or trial overnight visits.
 Patients leaving the hospital for placement in the community are placed on temporary leave for 7 days to ensure successful placement before discharge
- Weekly RHA call to specifically discuss COVID at each hospital share lessons learned (and frustrations)

Future plans for the Co-existence with COVID-19

- Point of Care Testing: AbbottLabs BinaxNow rapid antigen test kits
 - Instant Results
 - All new admissions AND In-patients on unit with COVID
- Policy for POC Testing
 - Employees TBD
 - Procedures being reviewed by
 - H.R. and Legal Department
 - Mandatory reporting to GDPH
- CMS issued new requirements for testing for staff and residents at SNF's we have established templates to ensure we stay compliant with the frequency of the new CMS requirements

Future plans for the Co-existence with COVID-19

- Continued daily reporting on DBHDD website of all new positive staff and patient tests across hospital system
- Staff augmentation support from GA's contract with Jackson Healthcare
- Mandatory flu vaccine for hospital system
- Continuous learning and vigilance have been the hallmarks of hospital leadership

Behavioral Health COVID-19 Co-Existence

- The office of Children, Young Adults & Families facilitated one of our largest conferences virtually – The System of Care Academy. Provided event at reduced; CEUS for 311 clinicians
- Debuted the state opioid response documentary with partnership with the GPB Network
- Office of Prevention led kickoff event for law enforcement as a part of the state opioid prevention response work.
- Ongoing responses to requests by the BH Commission.
- Ribbon Cutting for new BHCC in Macon / River Edge

Behavioral Health COVID 19 Co-Existence

- The Division of Behavioral Health has landed the following federal grants since COVID:
 - SAMSHSA COVID Emergency Response Grant
 - Continuation of Targeted State Opioid Response Grant
 - SAMSHA COVID Suicide Prevention Grant
 - SAMSHA Crisis Response / Disaster Grant
- Partnership with UGA's CVIOG: Survey provider network and consumers on telehealth experiences/ January results

Intellectual/Developmental Disabilities

- Appendix K: still in effect for NOW/COMP waivers allows flexibility in service delivery
- Day Service Facilities: Most Day Service Providers developed re-opening plans, and some had re-opened and had to close as a result of COVID positive results.
- Mobile Crisis: Resumed in person responses, except for when the caller requesting telephonic response only.
- IDD Crisis Services: Operate as usual for the DD Crisis Homes, with PPE.
- Forensic/AMH Transitions: continue to progress, with following protocols for monitoring14 days prior to someone discharge from the hospital into the home. All meetings virtual.

Intellectual/Developmental Disabilities

- Continued update of communications regarding regulatory changes related to COVID related practices
- Continue to debrief next steps as they continue to be impacted by COVID outbreak
- Continue to review Day Program re-opening plans
- Serve as vehicle of communication of notification of alterations in staffing due to COVID related shortages
- Return to web-based provider trainings for process implementation related to provision of support

Intellectual/Developmental Disabilities

Support Coordination Agencies

- Support Coordination/Intensive Support Coordination:
 - Met with all 7 SC agencies to begin work on the drafting of re-engagement plans for a phased approach to begin in-person visits with individuals in waiver
 - focus on the most vulnerable of this population
- Remain available to offer clinically related feedback on submitted re-engagement plans
- Prioritize the uninterrupted provision of clinical assessments and authorization of supports

Internal DBHDD procedures

- Continued conduction of annual and initial assessment to continue or initiate services
- Provider outreach: continued surveillance identifying COVID outbreak that require division
 awareness
- Resumed Participant Directed training in September for new families and it is now conducted virtually.

The Power of Response: Prevention 2020 Update

BE D·B·H·D·D

Georgia Department of Behavioral Health & Developmental Disabilities





Good Afternoon



Jill Mays Director, Office of Behavioral Health Prevention & Federal Grants (OBHPFG)

⁴⁴Between stimulus and response there is a space. In that space is our power to choose our RESPONSE. In our response lies our growth and our freedom.³³

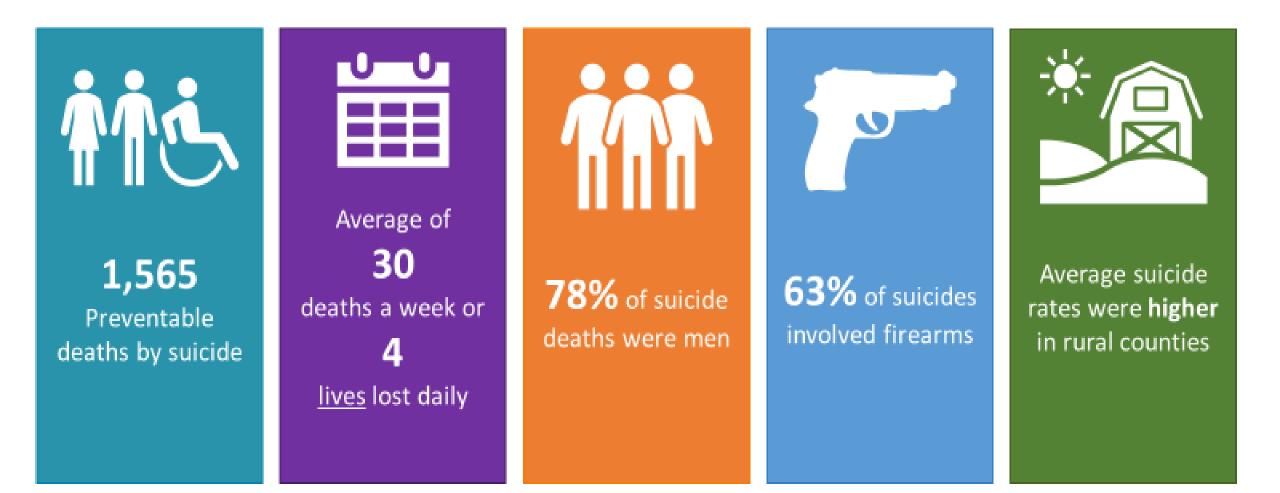
— Viktor E. Frankl

DBHDD's Response



Suicide Strategic Response

Suicide Fact & Figures



Suicide Facts & Figures: Georgia 2020



On average, one person died by suicide every six hours in the state.

Nearly four times as many people died by suicide in Georgia in 2017 than in alcohol related motor vehicle accidents.

The total deaths to suicide reflected a total of 32,720 years of potential life lost (YPLL) before age 65.



Suicide cost Georgia a total of \$1,318,204,000 combined lifetime medical and work loss cost in 2010, or an average of \$1,163,463 per suicide death. 10th leading cause of death in Georgia

2nd leading cause of death for ages 10-34

4th leading cause of death for ages 35-54

10th leading cause of death for ages 55-64

17th leading cause of death for ages 65+

Suicide Death Rates

	Number of Deaths by Suicide	Rate per 100,000 Population	State Rank
Georgia	1,569	14.53	34
Nationally	48,344	14.21	

CDC, 2018 Fatal Injury Reports (accessed from www.cdc.gov/injury/wisqars/fatal.html on 3/1/2020).

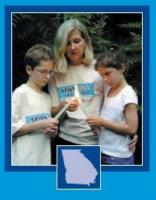


American Foundation for Suicide Prevention

Through the Years



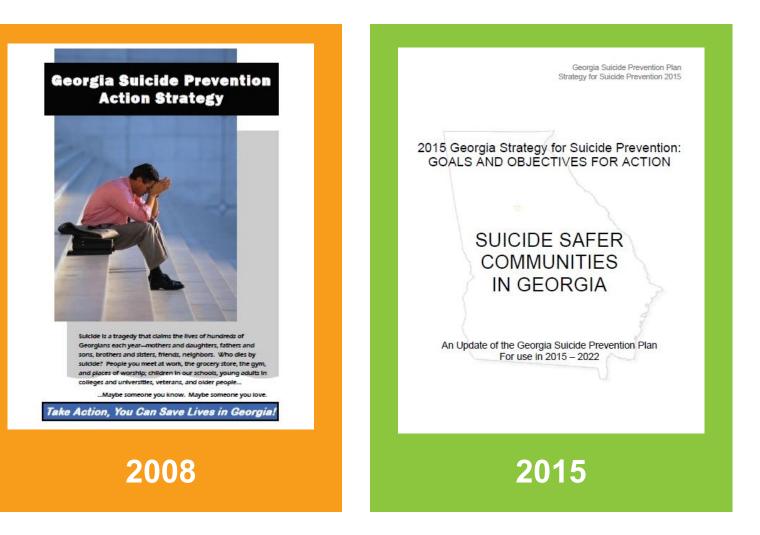
Together We Can

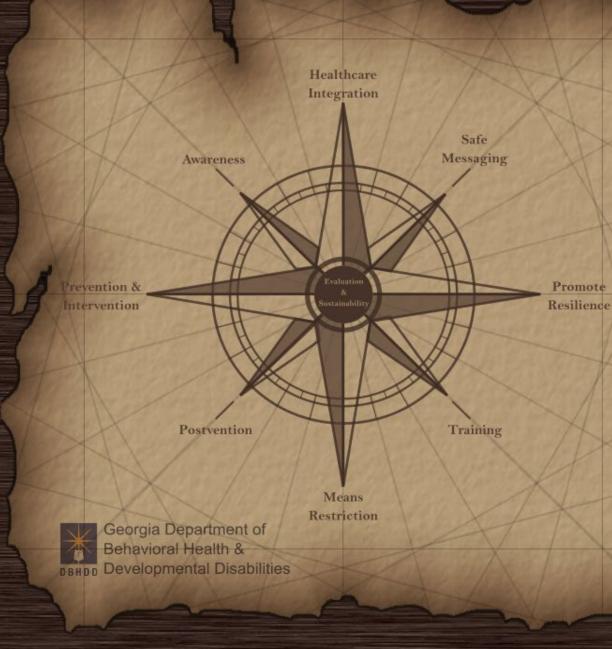


Georgia Suicide Prevention Plan Strengthening Protective Factors and Reducing Risk Factors

June 30, 2001

2001





Charting the Course for Suicide Prevention 2020-2025 Georgia Suicide Prevention Strategic Plan

Strategic Plan: Goals 1-3

Promote the integration of suicide prevention as a core component of public and private behavioral health and healthcare systems. Increase public knowledge of suicide risk, warning signs, protective factors, and precipitating factors across the lifespan. Build capacity for protective factors, resiliency, and stigmareduction in communities and schools.

Strategic Plan: Goals 4-6

Support the adoption of suicide safe messaging through media and public education. Target high burden counties and communities to promote the adoption of evidence-based and evidence-informed suicide prevention and intervention strategies.

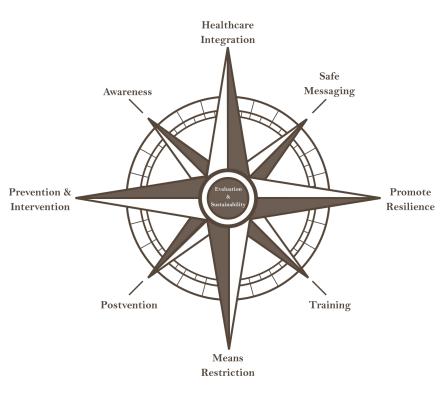
Prioritize at-risk populations to promote the adoption of evidence-based and evidence-informed suicide prevention and intervention strategies.

Strategic Plan: Goals 7-9

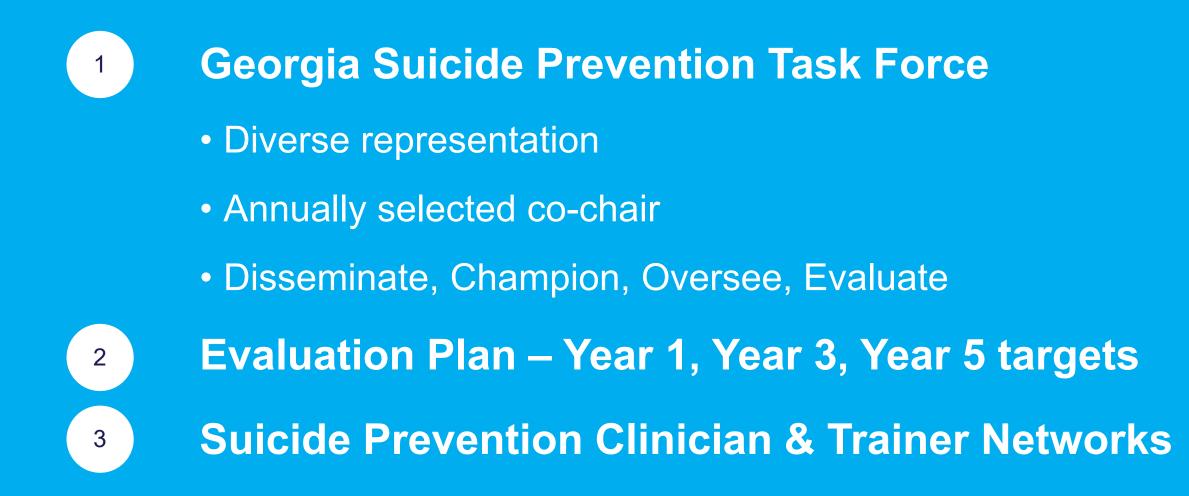
Increase efforts to reduce access to lethal means of suicide. Expand evidencebased suicide prevention trainings for clinicians and gatekeepers. Implement postvention best practices to provide care and support to individuals and communities.

Strategic Plan: Goals 10-11

Increase the timeliness and usefulness of data systems relevant to suicide prevention. Sustain the suicide prevention efforts outlined in this strategic plan.



Next Steps



Georgia Suicide Prevention Task Force

Andy Garner	CIT Program Supervisor
Ann M. DiGirolamo	Georgia State University COE
Britni Overall	Georgia Poison Center
Dorian Lamis	Grady / Emory
Dr. Emile Risby	DBHDD State Hospital System
Erin Harlow-Parker	Children's Healthcare of Atlanta
Eva Trinh	CDC
Gregg Raduka	The Council on Alcohol and Drugs
Jenna Colvin	Georgia Independent College Association
Jewell Gooding	Mental Health America of Georgia
John Zauner	Georgia Schools Superintendents Association
Joyce Jones	Board of Regents
Kay Manning	The Council on Alcohol and Drugs
Kim Ellis	Georgia Technical College System
Kim Jones	NAMI Georgia
	Emory University School of Medicine, Emory Healthcare Veterans
Liza Zwiebach	Program
Rana Bayakly	Department of Public Health
Richard Hawk	Georgia Coroner's Association
Ron Koon	011 11
Ryan Hepworth	Shadow Warrior Foundation
Stuart Bapties	Robins AFB
Stuart Winborne	AFSP
Susi McGhee	CDC
Trebor Randle	GBI
Thom Snyder	
Ursula Michelle	
Davis	Georgia State University COE
Wendy Farmer	Beacon Health Options

The 2020 - 2025 Georgia Suicide Prevention Strategic Plan can be downloaded from the DBHDD Suicide Prevention webpage:

https://dbhdd.georgia.gov/bh-prevention/suicide-prevention

COVID-19 Response

SAMHSA COVID-19 Emergency Grants

- Emergency Treatment \$2,000,000 through 8/19/21
- Medication Assisted Treatment (MAT) takehome medication + Narcan
- Expand Emotional Support Line to support healthcare workers
- Secondary Trauma support for providers
- Human Trafficking
- Support Virtual SUD Deaf Services at Hope House
- GCSA & GMHCN Warm Lines
- Support implementation of telehealth and other response services
- PPE for provider staff

- Suicide Prevention \$800,000 through 11/30/21
- Gatekeeper Training
 - Department of Labor
 - Department of Family & Children's Services
- Domestic Violence
- Partnership Against Domestic Violence
- Grady/Emory's Project Nia
- Peer Support
 - Grady Hospital ED
 - Division of Aging Services (Older Adults)

Emotional Wellness Postcards

1.1 million information/resource postcards mailed (one per household in rural areas)



Tips for Emotional Wellness During COVID-19

For more information and links to resources on emotional wellness, healthy coping, and helpful initiatives for you and your loved ones during this time, please visit opioidresponse.info/resources

Georgia Crisis & Access
Line (GCAL)
1-800-715-4225
24 hours/7 days a week
Georgia COVID-19 Emotional Support Line 1-866-399-8938 8 am – 11 pm
•
Coorgio Council on

eorgia Council on Substance Abuse CARES warmline 1-844-326-5400 8:30 am - 11 pm

Periods of uncertainty can make our typical worries even worse. In addition to guidelines provided by the Centers for Disease Control (CDC), please consider the following tips from the Georgia Department of **Behavioral Health & Developmental Disabilities.**

FOR THOSE WHO MAY HAVE SUBSTANCE USE ISSUES

- · Consider calling your local Alcoholics Anonymous or Narcotics Anonymous offices for connecting with someone about an ongoing alcohol or drug issue. · Consider keeping some Naloxone on-hand in case of an
- opioid overdose. You can get Naloxone from your local pharmacy
- In case of overdose, you are protected by medical amnesty (Good Samaritan). Don't run, call 911. Stay until help arrives.
- Safely store and lock away medications from children and pets. Old medication can be taken to a local drug drop box.

CONNECT WITH OTHERS

household.

BE YOUR OWN ADVOCATE

well. Social distancing does not mean social isolation.

- MANAGING STRESS Relax your body through taking deep breaths, stretching, meditating, praying, yoga, or other activities you enjoy.
- · Care for yourself in whatever ways work best for you. · Watch funny tv shows or movies because humor can help reduce stress.
- · Try different activities such as reading, playing board
- games, gardening, or assembling puzzles. · Build a schedule and stick to it, but also give yourself
- flexibility to break from that schedule if needed.
- · Limit caffeine intake as caffeine may heighten anxiety.
- Drinks with caffeine include coffee, tea, and soda.

· Reach out to friends and loved ones to check and see how they are feeling, not only physically but emotionally as

· Focus on your own wellness and the wellness of your

- **INCREASE MENTAL STRENGTH** · Make sure to take note of when things are going well
- Get consistent, restful sleep
- Eat balanced meals to fuel your physical strength
- Seek professional support as needed

UNDERSTAND THE RISK

 Use credible sources to stay informed but remember that it's okay to take breaks from the news.

The Georgia COVID-19 Emotional Support Line provides free and confidential assistance to callers needing emotional support or resources information as result of the COVID-19 pandemic. The Emotional Support Line is staffed by volunteers, including mental health professionals and others who have received training in crisis counseling. Hours of operation: 8 am -11 pm. Call (866) 399-8938.

COVID-19 Resiliency & Wellness Toolkit for Students, Parents, and Educators



me Toolkit Purpose How to Use Resources Emergency Services

Live Resilient Live Well.

In this toolkit, you will find resources for students, parents, and educators during COVID-19.



How to Use



www.resiliencytoolkit.org

Toolkit Purpose

The goal of the Resiliency & Wellness Toolkit is to provide information and resources to students, parents, and educators in the face of the COVID-19 Pandemic. The resources contained in this toolbox have been specially selected to provide assistance for students return to school. The Resiliency & Wellness Toolkit includes information on Behavioral Health and Wellness, Learning Resources, Parenting Resources and Activities for students.

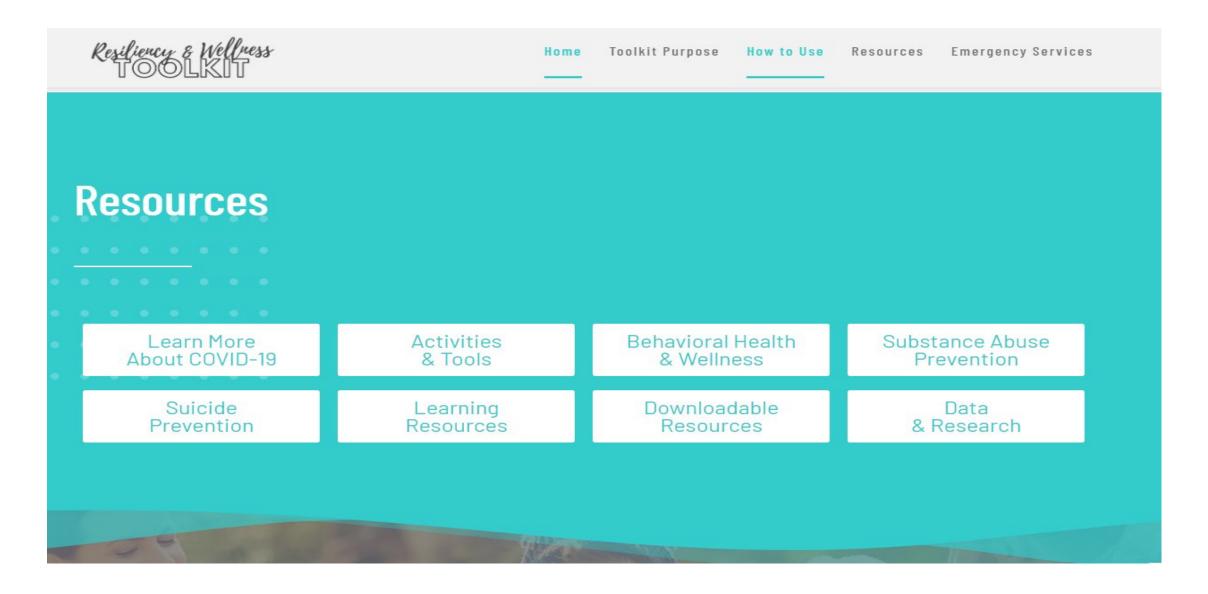
Intended For







Resources Included



Emergency and Mental Health Services



Home Toolkit Purpose How to Use Resources Emergency Services

Emergency

& Other Mental Health Services

The Georgia COVID-19 Emotional Support Line Visit Website 1-866-399-8938	Georgia Crisis and Access Line (GCAL) 1-800-715-4225 mygcal.com	GA Crisis Text LineText: GA to 741741 crisistextline.org/text-us	My GCAL App Download for Apple Download for Android	
National Suicide Prevention Lifeline 1-800-273-8255 suicidepreventionlifeline.org	Translifeline 1-877-565-8860 translifeline.org	Veterans Crisis Line 1-800-273-8255 and Press 1	National Alliance on Mental Health (NAMI) 1-800-950-6264	& More

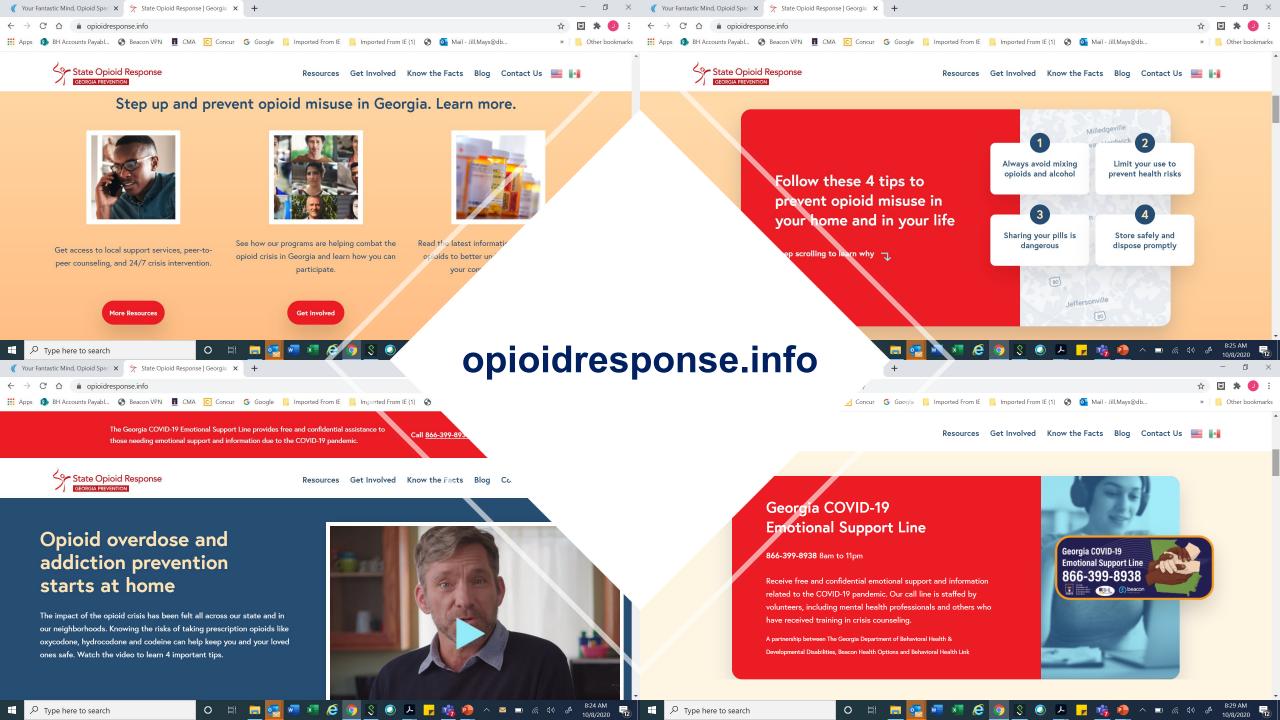
State Opioid Response

GEORGIA PREVENTION

State Opioid Response (SOR)

- 1. Opioidresponse.info interactive website
- The State Opioid Adapted Response (SOAR)--newly developed training for GA Law Enforcement and other First Responders,
- **3. Cumulus Radio MyVoice Facebook Live Events** (Meghan Trainor, Kelly Clarkson, Lee Brice, Montell Jordan, Keri Hilson, etc.
- 4. Your Fantastic Mind GPB Documentary
- 5. "It Takes A Village" Opioid Prevention Media Campaign









101 FIVE

MW VOICE

FTREAMING LIVE ON FACEBOOK



4160C00

MyVoice Community Events

State Opioid Adapted Response (SOAR)

- Partnership among DBHDD, Georgia Public Safety Training Center (GPSTC), and Georgia Public Broadcasting (GPB)
- 2. 4-hour interactive training with three video segments; officer safety, deescalation techniques, proper administration of Narcan to reverse overdose
- 3. Participants completing the training receive free Narcan and can receive additional kit if they inform DBHDD of reversal attempts

















Your Fantastic Mind Documentary 09/28/20

It Takes a Village Media Campaign

State



Chair's Report

Kim Ryan Chair

Public Comment

Next Board Meeting

Thursday, December 10, 2020 1:00 p.m.