Board Meeting

BE D·B·H·D·D

Georgia Department of Behavioral Health & Developmental Disabilities

October 24, 2024



Agenda

Roll Call

Call to Order

Introduction to Recovery Speaker

Action Items

- Board Meeting Minutes August 29, 2024
- Election of Board Chair, Vice-Chair and Secretary

Commissioner's Report

- Deaf Services & the Belton Case: An Ongoing Success Story
- DOJ v. GA Updates
- Behavioral Health and Law / L.E.A.P. Training

Chair's Report

Public Comment

Roll Call

Ashley Dickson Board and Special Project Analyst

Call to Order

David Glass Chair

Introduction of Recovery Speaker

Robin McCown Georgia Professionals Health Program, Inc.

Action Item

• Board Meeting Minutes – August 29, 2024

Action Item

• Election of Board Chair, Vice-Chair and Secretary

Commissioner's Report

Kevin Tanner Commissioner Deaf Services and the *Belton* Case: an Ongoing Success Story

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Georgia Department of Behavioral Health and Developmental Disabilities





History

Consent Order overview

Current status

Acknowledgment

History



The Belton Case: Origins

- Class action suit filed against DBHDD in Federal court on March 3, 2010, alleging violations of the Americans with Disabilities Act and of Section 504 of the Rehabilitation Act of 1973.
- Complaint centered on plaintiffs' inability to find DBHDD-authorized services accommodated to individuals who are deaf.
- By consent of the parties, the Court appointed Roger Williams as the independent Monitor and Independent Expert for the case.
- DBHDD and the Plaintiffs entered a Consent Order in October 2014.
- This Consent Order required certain measurable improvements from DBHDD, and regular reporting to the Monitor.
- The Consent Order covered both Behavioral Health (BH) and Intellectual/Developmental Disabilities (I/DD) services.

The Belt

- May 22, 2024 Order provisio
- Judge Richar instances, <u>ex</u> Order."
- Roger Willian

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 interpreters."

UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF GEORGIA ATLANTA DIVISION

RENITA BELTON and	:		
MATTHEW ERICKSON on	:		
behalf of themselves and all those	:		
similarly situated,	:	Civil Action File No.	
	:		
Plaintiffs,	:	1:10-CV-0583-RWS	
	:		
vs.	:		
	:		
STATE OF GEORGIA, et. al	:		
	:		
Defendants.	:		

ORDER AMENDING CONSENT DECREE

This matter is before the Court on the parties' joint motion to amend the Consent Decree [Dkt. 215] and the Court's February 24, 2020 Order [Dkt. 277] to remove certain obligations of the State in light of the significant progress made toward compliance with this Court's remedial orders. According to the parties and the Court's appointed Monitor, the Department of Behavioral Health and Developmental Disabilities ("DBHDD") has made significant progress in the provision of accessible public mental health services to deaf and mentally ill Georgians over the past several years. It has met and, in some instances, exceeded the requirements of the October 2014 Consent Order and the goals the Court established in 2020, and the Monitor, Roger Williams, is satisfied that this progress will continue in the absence of Court scrutiny. DD from the Consent rvices. It and, in some tober 2014 Consent

uary 2024: "If there s, it is the steady ing [ASL-accessible] goal which was al of hiring sufficient lified mental health

Consent Order overview (selected sections)

Consent Order Requirements

Deaf Services Office

- Continues requirement for existence of Office of Deaf Services with three required positions:
 - Director
 - Community Service Coordinator
 - Interpreter Coordinator

Office of Deaf Services has three specified roles:

- Receive notifications of initial intake of deaf individuals from CSBs/
- Develop policy and programming that supports provision of/access to appropriate accommodations for Deaf Individuals in DBHDD services
- Work with DBHDD Constituent Services to process and resolve complaints related to deaf individuals

Consent Order Requirements (cont'd)

Services for D/MI Class Members

- "D/MI Class members" includes any deaf or hard of can g individuals vur eling or therapy with DBHDD authorizations for non-crisis outpationt services provided by ASL-fluent counselors or **SL** interpreters agi
- tobelivered Increasing percentage of counseling/there was Ś. TCP ped at 6 through ASL-fluent counselors/therap
- ASL-fluent case managers musicalso de casi management services for D/MI Class members.
- DBHDD must contract vit. Designed Por ders to provide ASL-fluent counselors/therapist and los mana s, and must pay the costs of employing those
- QIS uses by CSBs. DBHDD must et otherwise pay for

Consent Order Requirements

Services for D/DD Class Members

- "D/DD Class member" includes any developmentally disabled individuals who are deaf and who receive DBHDD-authorized services, regardless of DBHDD's funding source.
- After the communication assessment, the communication assessor must attend the first ISP meeting to help inform ISP development.
- All DD providers serving D/DD Class members whose ISP requires sign language communication must have staff sufficient to meet the requirements of the ISP.
- DBHDD will collaborate with deaf advocacy organizations to recruit providers to serve D/DD Class members who choose to live in group or host homes.

Current status

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Office of Deaf Services

Interpreter Coordinator Sereta Campbell QMHI-S

Interpreter Data/Logistics Coordinator Debra Walker QMHI

Region 1 Interpreter Samantha Ferrell QMHI **Region 1 Assessor** Patty Gunnels

Region 3 Interpreter Persis Bristol QMHI Region 3 Assessor Juan Posada

Region 5 Interpreter (Vacant-*Jasmine Lowe) Region 5 Assessor *Karen Bonner **Community Services Coordinator** Paige Greene

Business Analyst Tylian Goss

Region 2 Interpreter Erin Salmon QMHI-S Region 2 Assessor Karen Bonner

Region 4 Interpreter Kelly Spell QMHI Region 4 Assessor *Kaitlin Wells

Region 6 Interpreter Jasmine Lowe QMHI-S Region 6 Assessor Kaitlin Wells

*denotes staff which are covering an additional area outside of primary assigned area

Georgia's Deaf Services: Signs of Progress

THEN

Dec 2015-statewide:

- Office of Deaf Services (ODS) provides 24/7 coverage of Georgia Crisis Access Line (GCAL) calls/Mobile Crisis Response Team (MCRT) calls involving someone who benefits from sign language interpreters.
- Deaf Services contract only covers 13 counties in NE Georgia
- 1 ASL-fluent Behavioral Health clinician within provider network covering
- 1 ASL-fluent Behavioral Health case manager
- ODS provides Crisis Training to regional MCRT contractors
- 5 Qualified Interpreters available
- Caringworks Inc Deaf men's residential substance use treatment

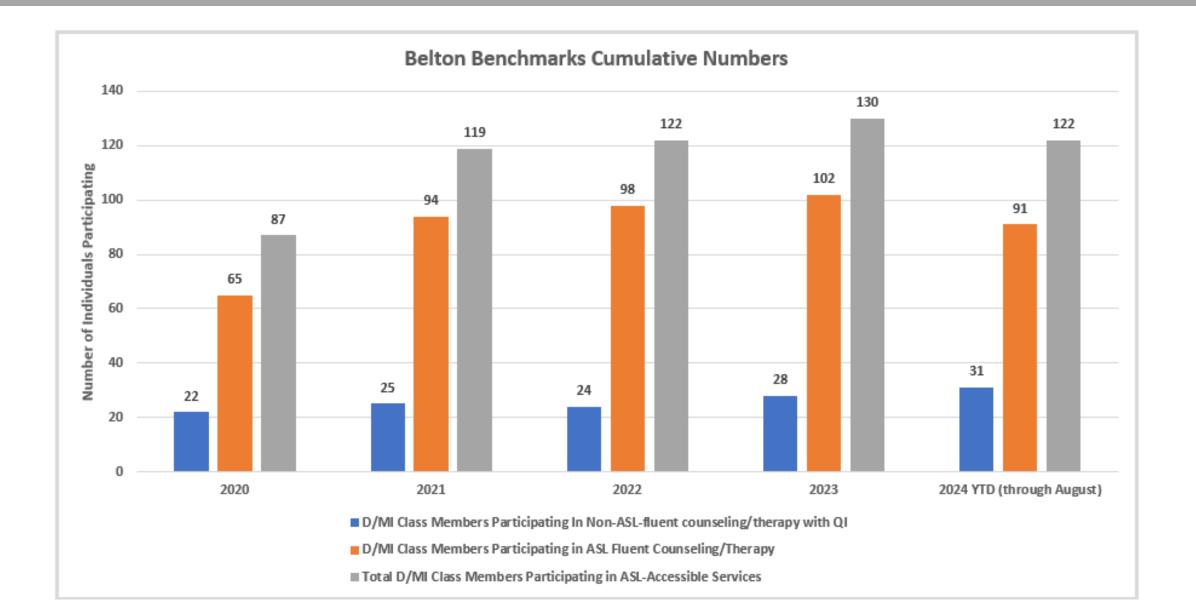
NOW

Oct 2024—statewide:

- GCAL Text Chat available
- GCAL/MCRT(988) have funding to support in person interpreter needs as well as video remote interpreting (VRI) needs
- DBHDD Crisis providers required to access DBHDD crisis training on working with individuals with hearing loss
- Statewide DBHDD funded ASL Fluent resources
- DBHDD's Provider Network 6 ASL-fluent clinicians 2 recently hired Deaf clinicians.
- 4 ASL-fluent case managers
- Deaf Peer Support
- > 21 Qualified Mental Health Interpreters
- Caringworks Inc Deaf men's residential substance use treatment
- MARR-Interpreter supported female residential substance use treatment

D/MI Class (Behavioral Health)

- 384 D/MI class members
- DBHDD Behavioral Health services accessible through Qualified Interpreters
- Direct ASL services available through designated provider
- Avita Community Partners (Georgia Mountains CSB) is DBHDD's designated provider of ASL-fluent counseling/therapy services
- Currently, Avita employs 5 counselors who are ASL-fluent as defined by the Consent Order (i.e. have scored "Advanced" or higher on the Sign Language Proficiency Interview (SLPI)).
- Avita also recently employed 2 additional counselors who are deaf and know ASL, but who have not yet taken the SLPI.
- Avita also employs 3 ASL-fluent case managers, and 1 recently employed case manager who is deaf but has not yet taken the SLPI.



D/DD Class members (I/DD Services)

- 252 Class members
- Communication Assessments incorporated into ISP
- ODS involvement in ISP meetings with assessor and interpreter team. Informs providers of ADA accommodation needs and how to support the participant in services.
- Provider communication expectations for supporting participants who use either ASL or "single words and gestures" ("SWG") signed communication as their preferred mode of communication,
- DBHDD contracts with the Georgia Center of the Deaf and Hard of Hearing to provide staff trainings in ASL for providers serving D/DD Class members who communicate in ASL or SWG
- Providers are also required to have environmental accommodations (visual fire alarms, visual door knocker alerts, etc.) in place in service settings
- ASL Fluent Group Home Project

Acknowledgment

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Georgia Department of Behavioral Health & Developmental Disabilities

Theodore Carter, Jr. Sr. Director Learning and Talent Acquisition

October 24, 2024



- Key Conference Objectives
 - To foster understanding,
 - Dispel misconceptions,
 - Challenge stigma,
 - Spotlight the pivotal role of behavioral health within the legal framework, and
 - To bring together dedicated law enforcement leaders and behavioral health practitioners who work at the intersection of behavioral health and law.

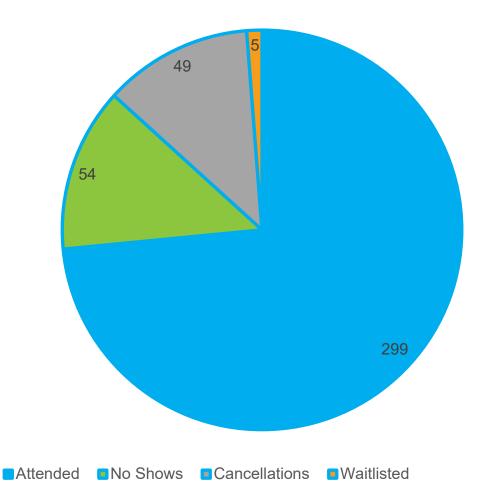


- Jekyll Island Convention Center
 - Forensics Pre-Conference September 23 25, 2024
 - BH & the Law Conference September 25 27, 2024
- Key Agenda Highlights:
 - Juvenile Judge Panel,
 - LEAP presented by Dr. Xavier Amador,
 - 14th Amendment and Involuntary Commitment presented by Glyn Corbitt,
 - Crisis Intervention Team (CIT) programming,
 - Co-Responder Training Program, and
 - Competency to Stand Trial
- CEU
 - Forensic Pre-Conference 12.0 hours
 - General Conference 12.0 hours

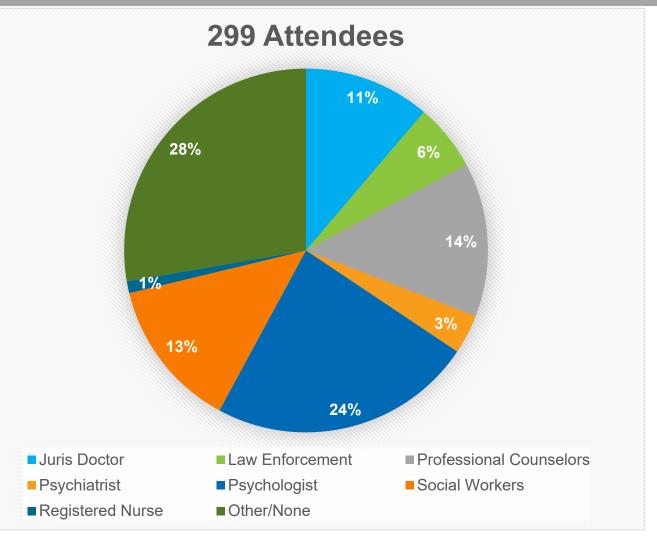


407 Total Registrations

- Total Registrations- 407 (356)
- Attended- 299 (297)
- No Shows- 54
- Canceled- 49
- Waitlist- 5
- Expected attendance was 407, with an attendance rate of 73%.



•	Juris Doctor	11%
•	Psychologist	22%
•	Psychiatrist	3%
•	Professional Counselors	13%
•	Social Workers	13%
•	Law Enforcement	6%
•	Registered Nurse	1%
•	Other/None	26%



Chair's Report

David Glass Chair

Public Comment



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