



DBHDD

Behavioral Health Coordinating Council Meeting Minutes

March 25, 2015

10 a.m.

24th Floor Conference Room

Notice: Quorum was not met.

Meeting Called by: Commissioner Clyde Reese (DCH); 10:05 a.m.

Facilitator: Commissioner Clyde Reese

Note Taker: Tracy Gamble (DBHDD)

Members Present: Commissioner Clyde Reese
Stanley Jones (family representative)
Diane Reeder (parent representative)

Members

Teleconferencing: Julie Spores (consumer)

Members Absent: Commissioner Frank Berry (DBHDD)
Commissioner Camila Knowles (DCA)
Commissioner Brenda Fitzgerald (DPH)
State Representative Katie Dempsey
Superintendent Richard Woods (DOE)
Commissioner Mark Butler (DOL)
Chairman Terry Barnard (PAP), *represented by Brian Owens*
Commissioner Avery Niles (DJJ), *represented by Miguel Fernandez*
Commissioner Homer Bryson (DOC), *represented by Arnold Smith*
Commissioner Keith Horton (DHS), *represented by Dr. Deborah Johnson*

Agenda

Call to Order: Commissioner Clyde Reese

Discussion: Commissioner Reese called the meeting to order at 10:05 a.m. Although the new council members were not present, Reese recognized new members Commissioner Camila Knowles (DCA), Commissioner Homer Bryson (DOC) and Superintendent of Schools Richard Woods (DOE).

*Georgia Department of Behavioral Health and Developmental Disabilities
Frank W. Berry, Commissioner*

Recovery Presentation

Reese welcomed guest speaker Florence Daniels, a graduate of the RESPECT Institute. Daniels gave a candid presentation of her life experiences. She is a peer support specialist who is in recovery from a substance use disorder. She also has a felony record. Daniels served in the military, but when she finished her tour, she had low self-esteem and felt her life was difficult. She started using drugs. Daniels was in prison seven times. Eventually, she participated in the Tapestry program, a behavioral modification program offered in some correctional facilities. Daniels identified with the staff and became very involved. “The Tapestry program was the best thing that happened in my life,” she said. Daniels followed a treatment plan and became a leader. She was able to get a job and find housing at a halfway house. Today, Daniels is a peer support specialist for the Department of Veterans Affairs in Atlanta. She is also a new homeowner. Daniels said she is the evidence that the program offered will work if you try: she wears sunglasses because her future is so bright. She asked the council not to give up on the individuals who are still trying to get where she is today.

Action Items *Because the quorum was not met, no action items were approved at this meeting.* In accordance with the BHCC bylaws, the quorum must be met by the council members. Representatives attending on behalf of council member cannot vote. Commissioner Reese reviewed the following action items to be voted on at the next council meeting:

- Approval of the December 17, 2014 meeting minutes
- 2015 BHCC meeting calendar
- 2014 BHCC annual report

BHCC Initiatives

Interagency Directors Team (IDT)

Deborah Gay, director of special education services and support for the Department of Education, presented the IDT’s strategic plan for fiscal year 2015, which focuses on transition-age youth and young adults (ages 14–26). She provided an overview of goals and steps being taken in 2015:

- Develop an easily accessible repository for agency protocols or policies on transition-age youth and young adults.
- Create a transition-age youth and young adult competency tool and make available within the system of care.
- Identify best programs and practices for transition-age youth and young adults; share among agencies.
- Identify current services and service gaps for Georgia’s transition-age youth and young adults.
- DPH and the Centers for Disease Control and Prevention (CDC) are working to establish an evidence-based behavioral training program and sustainability model for children’s behavioral health in Muscogee County. The program is funded through SAMSHA’s Project LAUNCH grant.

The Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) serves individuals with mental health challenges, substance use disorders, and intellectual and developmental disabilities. Our vision is easy access to high-quality care that leads to a life of recovery and independence for the people we serve. To fulfill this vision, the department leads an accountable and effective continuum of care in a dynamic health care environment. Frank Berry has served as the commissioner of DBHDD since 2012. To access services or learn more about the agency, visit dbhdd.ga.gov.

- The IDT plans to survey school personnel's knowledge of the new Children in Need of Services (CHINS) protocols. The IDT has created the survey which will be distributed to schools in positive behavioral intervention and support districts.
- The CDC is leading an evaluation of the impact of Amerigroup's policy on ADHD treatment for young children who are receiving foster care, adoption assistance, or services from the Department of Juvenile Justice.
- The IDT has drafted a memorandum of understanding to be proposed to and signed by the participating agencies. Its purpose is to ensure sustainability and effectiveness of the group.

Transition Support and Re-entry Workgroup

This workgroup was created in 2012 to identify barriers and challengers that an individual may encounter in the process of transitioning from correctional facilities back into the community. Nationally, 16% of jail and prison populations have behavioral health diagnoses. Terri Timberlake, director of the Office of Adult Mental Health at DBHDD, introduced Stefanie McClain, re-entry services community coordinator at Georgia Department of Corrections (GDC), to give an update on mental health data as of March 25, 2015. McClain shared the following:

GDC Population: 57,275

- Mental Health Population: 9,549 (17% of total)
 - level 2 (mild impairment): 7,687 (81% of mental health population)
 - level 3 (moderate impairment): 1,510 (16% of mental health population)
 - level 4 (moderate to severe impairment): 352 (3% of mental health population)

Inmates Using Psychotropic Medications

- January 2015: 6,227 (65% of mental health population)
 - level 2: 4,528 (47% of mental health population)
 - level 3: 1,356 (14% of mental health population)
 - level 4: 343 (4% of mental health population)
- February 2015: 5,498 (58% of mental health population)
 - level 2: 3,798 (40% of mental health population)
 - level 3: 1,350 (14% of mental health population)
 - level 4: 350 (4% of mental health population)

Admissions and Mental Health Screenings

- January 2015
 - 1,463 admissions
 - 1,405 mental health screenings
 - 220 (15%) of admissions referred for mental health services
- February 2015
 - 1,299 admissions
 - 1,120 mental health screenings
 - 180 (14%) of admissions referred for mental health services

- March 2015
 - 1,284 admissions
 - Data on the number of screens and referrals were not available on meeting date

Releases

- January 2015: 1,373
- February 2015: 1,341
- March 24, 2015: 1,194

Timberlake reported that the workgroup is currently working on background information, which has presented some challenges. When approved, she said, it will be a win for all parties involved.

- “Breaking the Silence and Coming out Proud” was selected for training materials.
- The workgroup is working on the survey for Phillips and Lee Arrendale state prisons to ask re-offenders about services that could have prevented them from re-offending.
- The workgroup has hired a consultant to create a Georgia specific curriculum for the Forensic Peer Mentor Project.

Commissioner’s Report

No report was given.

Public Comment

A question was posed to Commissioner Reese about a CMO contract in reference to the aged, blind and disabled population. Reese responded that the contract does not include this population but only low income and Medicaid.

Adjournment

Commissioner Reese called for a motion to adjourn the meeting. Diane Reeder made the motion, which was seconded by Commissioner Reese. The meeting was adjourned at 11:45 a.m.

Special Notes

The next scheduled meeting of the Behavioral Health Coordinating Council will be held on **Wednesday, June 24, 2015.**

Respectfully submitted by:

Tracy Gamble, council and committee liaison

Signatures:


Chair


Secretary