

# 2017-2018 REGION 1 TOP PRIORITIES WITH KEY STRATEGIES

Below are the three top priorities for **Region 1** for 2017-18

## Priority 1: Judicial System

**Reduce inappropriate involvement in the justice system by persons with mental illness, intellectual/developmental disabilities, and/or substance abuse.**

Key Strategies:

1. Prevention/early intervention in elementary school populations
  - (1) Engage RAC members and local stakeholders in identifying a population of elementary and middle school students who are deemed to be at risk of becoming involved with the Juvenile Justice System. (2) Provide an evidence-based intervention (best and promising practices) for a defined group of these students. (3) Identify a similar group of students who are not exposed to the intervention. (4) Determine measurable and desirable outcomes. (5) Measure those outcomes in both populations over a period of time. (6) Expand the program as appropriate.
2. Training for first responders to improve responses to people in crisis
  - (1) Engage RAC members and local stakeholders in identifying select groups of first responders in need of training to improve their responses to people in crisis (e.g., school system emergency room personnel, law enforcement, fire department, and ambulance/emergency response personnel). (2) Provide an evidence-based intervention (best and promising practices) for a defined component of these groups. (Potential models include: *Mental Health First Aid for Public Safety* and *Crisis Intervention Team (CIT)* program. (3) Determine measurable and desirable outcomes. (4) Measure those outcomes over a defined period of time. (5) Expand the program as appropriate.
3. Reduce recidivism rates through accountability courts  
(Note: Accountability courts include but are not limited to: Drug Court, Family Drug Court, Mental Health (Help Court), and Veterans Court.)
  - (1) In the Appalachian Judicial Circuit (Pickens, Gilmer, and Fannin counties) there are 50+ members in Help Court (formerly known as Mental Health Court). There are only two case workers to supervise them. This is a caseload of 25 participants per case worker. (2) An acceptable ratio is one case worker for every 15 participants. (3) Increased funding to existing Accountability Courts would allow them to hire the additional staff necessary to more effectively supervise the participants. This includes drug testing, home checks, and in some cases supervising the taking of medication. (4) There are currently those in need who are being declined entry into this program due to aforementioned lack of staff. More money should be allocated for additional staff, which would lead to a greater number of individuals receiving services in the program.

Priorities 2 and 3 on back

## Priority 2: Housing

**Increase availability and enhance residential care for individuals with intellectual/developmental disabilities, mental illness, and or addictive diseases which would foster safe, comfortable home environments.**

Key Strategies:

1. Review and revise the standards for staffing credentials and improve training to better meet the needs of individuals served. (Better trained personal care staff can command a higher salary commensurate with the level of care required by the individuals they serve.)
2. Review and upgrade the amount and frequency of clinical oversight/supervision based on the population being served and provide proper ratio of Developmental Disability Professionals (DDPs) required to effectively implement person-centered care.

## Priority 3: Services

**Improve access to and navigation of Department of Behavioral Health and Developmental Disabilities (DBHDD) services.**

Key Strategies:

1. Improve public understanding of the system and how to engage in services.  
(1) Require in 2018 contracts that all providers develop and implement an annual marketing plan, including the development and distribution of a resource toolkit that describes available providers, contact information, and how-to guide. (2) Require providers to attend (at a minimum) quarterly local interagency council meetings to be available to answer questions and to communicate to the broad community available services and how to access them. (3) Develop a campaign to promote available services through social media, PSAs, and apps to increase awareness of how to access and navigate services. (4) Encourage DBHDD to continue to improve its website to make it user-friendly for all levels of people. Gather satisfaction survey data annually and use this information to conduct continuous quality improvement.
2. Increase availability of peer supports to help people stay engaged in services.  
(1) Recruit 30 consumers to apply to participate in Peer Specialists Training during 2018. (2) In 2018 contracts require increased inclusion of Certified Peer Specialists in the workforce. (3) Open a new Peer Support, Wellness, and Respite Center in the region by the end of FY2018.