



Georgia Department of Behavioral Health & Developmental Disabilities

Frank Berry, Commissioner

Region 2 DBHDD Office

3405 Mike Padgett Highway, Bldg. 3, Augusta, Georgia 30906

Toll Free: 1-866-380-4835

Phone: 706-792-7733 Fax: 706-792-7740

REGION TWO MHDDAD PLANNING BOARD MEETING THURSDAY, FEBRUARY 21, 2013 AT 1:00 PM MEETING SUMMARY

The Region Two MHDDAD Planning Board met at 1:00 P.M. on Thursday, February 21, 2013 via video conferences taking place at: the Northeast Health District Office, 189 Paradise Blvd., Athens, Georgia 30605; the North Central Health District Office, 811 Hemlock Street, Macon, Georgia 30507; and the Richmond County Health District Office, 1916 North Leg Road, MIS Conference Room Bldg B, Augusta, Georgia 30909.

BOARD MEMBERS PRESENT

Gloria Berry, Walton; Sandra Brown, Bibb; Bessie Bonds, Twiggs; Andrew Chase, Morgan; Laverne Crawford, Richmond; Martha Crumbley, Burke; Linda Echols, Wilkes; Linda Ellis, Bibb; Ed Glauser, Clarke; Nan Gunn, Jefferson; Debbie Harbin, Monroe; Tammy Hearing, McDuffie; Ann Hester, Oconee; Lisa Jones, Columbia; Geneice McCoy, Richmond; Don Wilkes, Emanuel

EXCUSED ABSENCES

Josette Akhras, Putnam; Cathy Hayes, Columbia;

UNEXCUSED ABSENCES

Rosie Cullars, Taliaferro; Margaree Gibson, Wilkinson; Mandy Underwood, Jenkins

REGIONAL OFFICE STAFF PRESENT

Karla Brown, DD RSA; Keith Edmonds, BH RSA; Jessica Seigler, Executive Secretary; Audrey Sumner, Regional Coordinator

GUESTS

Jeff Blakely

VACANCIES AS OF 2/21/2012

Baldwin (1), Barrow (1), Bibb (3), Clarke (2), Elbert (1), Glascock (1), Greene (1), Hancock (1), Jackson (1), Jasper (1), Lincoln (1), Jones (1), Madison (1), Oglethorpe (1), Richmond (2), Screven (1), Twiggs (1), Walton (1), Warren (1), Washington (1)

CALL TO ORDER

Geneice McCoy, Board Chair, called the meeting to order at 1:00 PM.

ROLL CALL

Present Board members were accounted for and are reflected in the attendance above.

DECEMBER 8, 2012 MEETING MINUTES

The December 8, 2012 meeting minutes were approved as written.

PUBLIC COMMENTS

There were no public comments.

BOARD MEMBER APPOINTMENTS/ RESIGNATIONS/NEW VACANCIES

Kathy Fitzner, Screven County, has resigned from the Board.

BOARD TERMS AND SERVICE

The Bylaws were reviewed regarding term expirations.

It is recommended that Board Members periodically read House Bill 228, the Leadership Council Bylaws and the planning Board Bylaws.

NOMINATING COMMITTEE SELECTION

A committee was formed to identify nominees for the positions of Chair, Eastern Vice-Chair, Western Vice-Chair, Northern Vice-Chair and Leadership Council representatives. Don Wilkes, Andrew Chase and Linda Ellis volunteered to serve on the Nominating Committee. Don Wilkes will Chair the committee.

The Board chose not to fill the position of Parliamentarian at this time, with a vote of 12-3.

DEVELOPMENTAL DISABILITIES REPORT

Karla Brown presented the DD report. (*Attachment 1*).

REGIONAL COORDINATOR’S REPORT

Audrey Sumner presented the RC Report.

DBHDD LEADERSHIP COUNCIL REPORT

Debbie Harbin presented the LC Report. During the last session, they worked on updating the LC Mission and Bylaws.

Business Cards and ID Badges for Board Members have been approved.

It is recommended that County Commissioners are invited to attend Regional Planning Board Meetings.

ANNOUNCEMENTS/BOARD MEMBER ACTIVITIES

Debbie Harbin announced a “Lunch and Learn” event and will e-mail the details to the Board.

Josette Akhras and Debbie Harbin attended a panel discussion at the Carter Center and listened to speakers, including DBHDD Commissioner Frank Berry.

Geneice McCoy visited with Representative Quincy Murphy and has an upcoming visit planned with Hardy Davis.

ADJOURN

Hearing no further comments, Geneice McCoy adjourned the meeting at 3:01 PM.

PREPARED BY Jessica B. Seigler
Executive Secretary

APPROVED AT _____ BOARD MEETING

**DD Planning Board Report
February 21, 2013**

Changes in Department/Region

- New org chart indicating new appointments and title changes
- Judy Fitzgerald remains Deputy Commissioner for Programs, as well as Jeff Minor as Deputy Commissioner and COO
- Dr. Emile Risby is now Assistant Commissioner and Chief Medical Officer.
- Dr. Charles Li is now in a permanent role as Assistant Director for DD Services.
- Michael Link is now Director of Regional Operations
- Sara Case has been named Director of Division – DD Programs
- Dave Blanchard has been named Director of Division – DD Service Support
- Betty Dyches has been promoted to Intake & Evaluation Manager for the Region 2 Office
- Sanora Hughes is now the PLA Program Assistant
- DD Services in the Region has 4 unfilled positions – Executive Secretary, Nurse, Social Worker, and Case Expediter

Initiatives and Funding for FY '13

- Moving more to a Regional System with regions having a larger role in contract management. We are now receiving both the programmatic and financial reports from contracted providers, and authorizing payment. If the provider is billing for someone we did not authorize, we are not allowing payment for services to that person.
- We are also trying to capture any unused dollars with state contracted providers so that we know every month what dollars are available. Say, an individual leaves community access services (\$17,520 per year) on December 15, and we back-fill the slot with someone else on January 30, we will have unused dollars for that service for 32 service days. We would have \$2334.72 available to serve someone else with. It has been a very painful process to get down to that level of dollars as this has not been done before.
- We are increasing rates to the published capped rates for all services – I.e., the Community Access rate has typically been \$10,454, but for some individual it has been \$17,510. The rates for all individuals receiving 5 days of services for 6 hours per day will now be \$17,510.
- We have filled all vacancies with state contracted providers, and when an individual leaves services, we are back-filling so that the providers are able to maximize their billing.
- Recently, we have been receiving as many as 30 requests for additional services every week. Our funding resources are low, so our RFAS committee is being required to scrutinize every request to make sure that we are able to fund those people with the greatest need.
- Increased funding provided under the ADA Settlement Agreement means that we will now have close to \$3 million in new Family Support funds, which will be spent between now and June 30, 2013. These funds are annualized, so will remain in the future.

Hospital Transitions

- Continuing focus on getting individuals moved from ICF's into the community. There are 332 individuals in ICF's statewide, down from 349 at our last meeting, with 253 (down from 267) individuals in East Central – Gracewood. We have obtained providers for many individuals.
- Continuing focus on getting individuals moved from Craig Nursing Center, CSH, into the community, with closure planned by 1/1/14. Region 2 is responsible for placing 20 of 55 individuals with DD in Craig. Although a physician from Emory has been determined that all of these individuals can be supported in the community, we are finding that the families of some of them would rather their family member remain in a skilled nursing facility or nursing home. We are working with the families to offer them options in the community so that they can make informed choices.

- Continuing focus on getting folks with DD transitioned out of the hospital psych units and into the community. We have a provider who has agreed to support 14 individuals in psych and forensic units.
- Dr. Li has developed a work plan which was presented to the Court Monitor appointed by the Dept. of Justice for Georgia's ADA Settlement Agreement. This work plan has several components:
 - Develop a transition plan for EACH individual remaining in a state hospital to include services needed and a potential date of discharge.
 - Develop provider capacity which will include identifying current capacity, identifying gaps, and recruiting providers to fill those gaps.
 - Develop a comprehensive follow-up and monitoring plan which ensures quality services to individuals who have transitioned to the community. We are currently evaluating every individual who has transitioned from the hospital, and if issues are found, we are putting those providers under corrective action until those issues are rectified. This also includes tracking and trending data to make sure we choose quality providers in future.
 - Revise the current transition process so that we can assure better outcomes in the future.
 - Develop a new DD quality management plan which will include quality indicators for providers, and statewide provider training on improving quality. A statewide provider meeting/training to let providers know our expectations is being held in March.
 - Initiate plans to improve provider oversight which will include combining some of the DCH program integrity and DBHDD quality reviews, redefining roles of our contracted quality provider, and redefining support coordinator roles.
 - Improve our Critical Incident Management processes to better assure that we close the loop on any issues identified.
 - Improve our Waiver Management System to include developing a better database to maintain all data, streamline the exceptional rate process, and improve allocations and rates to more adequately fund individual services.

Provider Capacity

- A survey has been done via Survey Monkey to determine which providers are currently providing residential supports, which are serving individuals with challenging behavioral and medical needs, and which would be interested in expanding their services, as well as expansion in what areas.
- There have been 21 Letters of Intent submitted from potential providers who want to support individuals in Region 2. They are offering to provide the entire gamut of services – transportation, prevoc, supported employment, respite, residential, community living support, community access, behavioral support consultation, and specialized medical supplies. Most of them are interested in providing more than just residential services, which is good for our region. We have many residential providers but fewer providers of the other services.

Community Forums

- We often participate in community fairs offered by school systems and aging services. We want to let families know that our services may be an option. But, we often provide information about resources outside DBHDD that may help individuals.
- Region 2 participated in several Community Awareness Campaigns in January. They have been provided statewide to include meetings/forums in each region. The purpose was to engage law enforcement, judges, etc. with DBHDD in partnership and to help them learn what services options are available.

Georgia Crisis Response System:

- Many of the individuals who have accessed our Crisis System would have once gone to one of the state hospitals, so our system is doing what it was designed to do.
- Continuing to work on options for Emergency Respite so individuals don't have to go to the Crisis Home when we don't have placement options.

- Continuing to see lots of individuals who have never applied for services before, or who are on the planning list with no services, although we occasionally find that someone in services requires additional provider support or a few days in the crisis home.
- Crisis #: 1-800-715-4225