9-8-8 IN GEORGIA

SYSTEM AND MENTAL HEALTH CRISIS NATIONAL SUICIDE PREVENTION



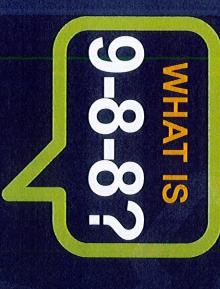
Georgia Department of Behavioral Health & Developmental Disabilities

Proposed 9-8-8 Plans

As of December 16, 2021

Agenda

- Provide background on 9-8-8
- N Share an overview of the Georgia 9-8-8 Planning Coalition
- ယ Discuss the current state crisis system and challenges
- Share the projected impact of 9-8-8 on the crisis system
- Discuss proposed approach to expanding capacity



9-8-8 is a direct, national three-digit line that will connect individuals with suicide prevention and mental health crisis resources.

Starting July 2022, 9-8-8 calls in Georgia will be answered by the Georgia Crisis and Access Line (GCAL), 24 hours a day, 7 days a week, 365 days a year.

9-8-8 Proposed Plans as of 12/16/2021

should Right now, in Georgia, anyone experiencing a suicidal crisis or emotional distress

available on both iOS and Android devices, to access GCAL via text and chat. call GCAL at 1-800-715-4225 or download the My GCAL app.

GCAL is available 24 hours a day, 7 days a week.

Some of 9-8-8's key features include:

- Connect a person with immediate and ongoing resources
- Promote cost efficiency
- Reduce burden on safety resources
- Help end stigma of seeking care



Why Do We Need 9-8-8?

most effective response for the individual experiencing the behavioral health crisis. unnecessary burden on local law enforcement and emergency services, which rarely provide the Many do not know what to do in the event of a mental health crisis and their actions can place

experiencing a behavioral health crisis by providing: The 9-8-8 law requires Georgia to enhance the current system's ability to respond to those



Someone to talk to

- Available 24/7 for calls, text and chat
- emotional support, staffed by Peer-run hotline offering callers individuals who are in recovery themselves, also called a peer warm



Someone to respond



- Coordinate with 9-1-1/ EMS as appropriate

Mobile crisis available statewide

Outpatient community provider

- - Somewhere to go
- Crisis service center

Crisis stabilization units

- Peer wellness respite
- Detox and Substance Use Disorder (SUD) treatment
- Inpatient beds
- Outpatient crisis

Georgia's Response



D.B.H.D.D

In Georgia, the Department of Behavioral Health and Developmental Disabilities (DBHDD) is the state behavioral health authority as designated in O.C.G.A. § 37-1-20 and, as such, is the lead agency for the 9-8-8 implementation.

9-8-8 Proposed Plans as of 12/16/2021

9-8-8 planning efforts and implementation activities are led by DBHDD with input from additional stakeholders:

DBHDD Steering Committee

9-8-8 Planning Coalition

9-8-8 Planning Workgroups

DBHDD Subject Matter Experts

Additional Planning Constituents

9-8-8 Planning Coalition

A coalition was assembled with members who play a role in delivering crisis and behavioral health services in Georgia. Our charge to the coalition members is to:

Share with DBHDD your unique perspectives related to the crisis response system

Help project the needs of your constituents as DBHDD works to fully recognize the opportunities of 9-8-8

Coalition Representation

- 9-1-1
- American Foundation for Suicide Prevention Georgia (AFSP)
- Behavioral Health Link (BHL)
- Benchmark
- Children's Healthcare of Atlanta
- Community Service Boards (CSBs)
- CSU and BHCC providers
- DBHDD Suicide Prevention
- Department of Public Health EMS
- Georgia Collaborative ASO
- Georgia Council on Substance Abuse (GCSA)

- Georgia Crisis and Access Line (GCAL)
- Georgia Emergency Communication Authority (GECA)
- Georgia Mental Health Consumer Network (GMHCN)
- Georgia Parent Support Network (GPSN)
- Governor's Office of Planning and Budget
- Grady
- Mental Health America of Georgia
- National Alliance on Mental Illness Georgia (NAMI)
- Police Departments
- Sheriffs
- Veteran's Administration

Coalition Sessions

discussions and group activities with members on topics ranging from Georgia's current crisis system to 9-8-8. Virtual two-hour sessions offered the opportunity to hear from voices of recovery and conduct presentations



Coalition Kick-Off

- Welcome and charge Introduction to 9-8-8
- Overview of current crisis system



Someone to Talk to

- Overview of GCAL and 9-1-1
- Group activity on planning for Someone to Talk to



Somewhere to Go

- Overview of Crisis Stabilization Unit and Behavioral Health Crisis Center models
- Presentations from providers
- Group activity on planning for Somewhere to Go



Peer Support and Recovery

- Overview of Peer Certification
- Presentations from advocacy partners
- Group activity on peer support and recovery



Someone to Respond

Group activity on planning for Someone to Presentations from mobile crisis teams Overview of GCAL mobile crisis dispatch

Respond

Draft Plan Review

- Overview of DBHDD's draft planning report
- Group activity on communications and messaging for stakeholders and constituents

Georgia's Current Crisis System

Resources and services currently exist to provide mental health crisis and suicide prevention resources to Georgians across the crisis continuum. During FY2021, the crisis system experienced the following volume:



Current State Challenges

Some of the challenges our current crisis system faces include:

- Workforce shortages across the crisis continuum
- Access to CSUs/BHCCs is limited in some geographic areas
- CSUs/BHCCs have not all been updated to the purpose-built model
- Long wait times in jails and hospitals
- Wait list to access substance abuse treatment programs
- Bi-furcated children's crisis system
- Police ability to identify need of individual in crisis
- Designing crisis response for children and youth to include family systems
- Dually diagnosed with intellectual and developmental disabilities (I/DD) and behavioral challenges

Future State Crisis System

9-8-8 Year 1 Projections

requires enhancements to the current crisis response infrastructure and expansion of capacity. The continued increase in demand for crisis services in conjunction with the implementation of 9-8-8





Proposed Plans to Expand Capacity

we are proposing the following: To support the anticipated demand for services 9-8-8 will bring to CSUs and BHCCs across the state,

- Enhance front-door staffing
- Expand Temporary Observation, where possible
- Convert existing CSUs to purpose-built BHCCs
- Build new purpose-built BHCCs where capacity is needed
- Enhance and build purpose-built child and adolescent (C&A) CSUs

Feedback from Coalition CSU/BHCC Representatives

In early December, DBHDD met with the CSU and BHCC providers that serve as 9-8-8 Planning Coalition members for a preliminary discussion on the proposed plans to expand capacity.

CSU/BHCC Planning Discussion Takeaways

- roles/shifts to attract talent and compete in the current market Discussed need for competitive hourly rates and shift differentials for certain
- Providers are supportive of efforts to build a pipeline of Certified Peer Specialists (CPSs)
- Reviewed proposed plans for conversions and new construction to expand capacity
- Providers agree developing baseline architectural plans for BHCCs would be beneficial to streamline the construction process and potentially cut down on
- Providers were aligned with proposed additions to front door staffing model

Proposed Front Door Staffing Enhancements

optimize the front-door staffing model: temporary observation, the living room, and CSU, we are prioritizing the following changes to To better support walk-in volume while also enabling staff to simultaneously manage care in

BHCC Front Door - 24 Hour Walk-In Enhancement	Enhancement			
Job Title	Current Staffing	Optimal Staffing	FTE Increase	New Staff per Shift (24/7/365)
Nurse Practitioner (NP)/Physician Assistant (PA)	0	4.7	4.7	
Certified Peer Specialist (CPS)	4.7	18.8	14.1	4
Licensed Clinician	4.7	14.1	9.4	ယ
Health Service Technician (HST)	4.7	9.42	4.72	2
Registered Nurse (RN)	0	4.7	4.7	_
То	Total 14.1	51.72	37.62	⇉

Proposed CSU and BHCC Capacity Expansion (1/2)

			Cui	Current	Prop	Proposed
Provider	City	County	# Beds	# Temp Obs	# Beds	# Temp Obs
Advantage	Athens	Clarke	30	8	30	œ
Avita	Gainesville	Hall	30	15	30	15
Albany Area CSB	Albany	Dougherty	30	O	30	16
CSB of Middle GA	Dublin	Laurens	16	0	24	16
Cobb County CSB	Marietta	Cobb	24	o	24	16
DeKalb CSB (current convert to detox center)	Decatur	DeKalb	36	ത	36	0
DeKalb County	Decatur	DeKalb	0	0	36	30
East Central CSB (Serenity)	Augusta	Richmond	16	0	24	16
Fulton County	Atlanta	Fulton	0	0	30	24
Fulton-DeKalb (Grady)*	Atlanta	Fulton	14	16	14	16
Gateway (Brunswick)	Brunswick	Glynn	24	ത	24	O
Gateway (Savannah)	Savannah	Chatham	24	O	24	12
Georgia Pines CSB	Thomasville	Thomas	24	6	24	ത

Conversion of existing CSU to BHCC

New BHCC

*CSU

Proposed CSU and BHCC Capacity Expansion (2/2)

BHCCs						
) F	?	Cui	Current	Prop	Proposed
riovidei	city	County	# Beds	# Temp Obs	# Beds	# Temp Obs
Highland Rivers CSB	3 locations	Floyd	74	0	98	48
McIntosh Trail CSB	Griffin	Spalding	24	O	24	o
Middle Flint	Warner Robins	Houston	14	0	24	16
North Fulton	Atlanta	Fulton	0	0	30	16
Pathways Center	Newnan	Coweta	24	თ	24	o
Pineland CSB	Statesboro	Bulloch	12	0	24	16
River Edge	Macon	Bibb	30	9	30	16
South Atlanta	Atlanta	Fulton	0	0	16	50
South Georgia CSB	Valdosta	Lowndes	24	0	24	თ
St. Francis Hospital	Columbus	Muscogee	24	6	24	თ
Unison CSB	Nahunta	Brantley	16	O	24	16
ViewPoint Health	Lawrenceville Gwinnett	Gwinnett	23	O	24	16
Total			533	126	716	403
Adult Program Increase					183	277
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9-8-8 Proposed Plans as of 12/16/2021

Conversion of existing CSU to BHCC

New BHCC

Proposed Child and Adolescent CSU Capacity Expansion

C&A CSUs						
			Cu	Current	Pro	Proposed
Provider	City	County	# Beds	# Temp Obs	# Beds	# Temp Obs
Gateway	Bloomingdale Chatham	e Chatham	16	0	16	0
Pathways Center	Greenville	Meriwether	16	0	16	0
River Edge	Macon	Bibb	16	0	16	0
View Point Health	Decatur	DeKalb	16	0	16	0
View Point Health (ASD CSU)	Conyers	Rockdale	10	0	10	0
Region 1			0	0	16	0
Region 4			0	0	16	0
Total			74	0	106	0
C&A Program Increase					32	1

9-8-8 Proposed Plans as of 12/16/2021

Conversion to purpose-built New CSU

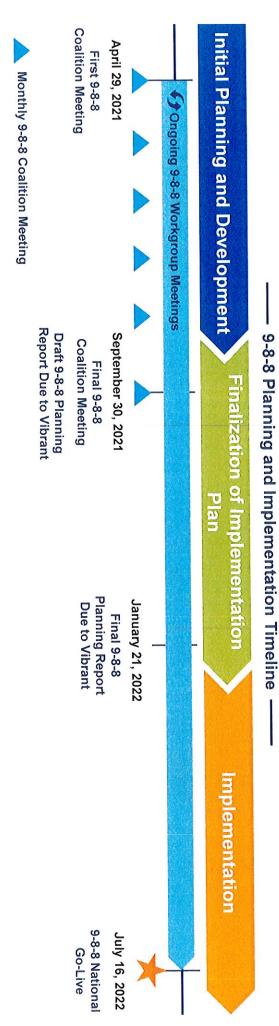
Potential Training Enhancements

training for stakeholders engaging with the crisis system. Some potential training topics identified include: As we prepare for the implementation of 9-8-8, we are also considering enhancements needed to current

- Overview of DBHDD programs and services
- Mental Health 101
- De-escalation techniques
- Risk assessment
- Cultural sensitivity
- Trauma-informed care

- Motivational interviewing
- Overview of the 1013 process
- Tips on engaging with law enforcement
- Engagement training (AIDET)
- Peer training for a crisis setting

Next Steps



Ongoing Work

- Engaging the 9-8-8 Planning Coalition and other stakeholder for input on planning and implementation
- Considering funding opportunities through our Finance and Public Private Partnerships workgroups
- Finalizing our implementation plans to submit to Vibrant and SAMHSA

Questions?

Georgia Department of Behavioral Health & Developmental Disabilities

Georgia 9-8-8 Contacts

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