Minutes: January 9, 2019

Alan EveridgeHoustonLaVonne HarnHoustonCynthia SmithMAnnie DavisMuscogeeBJ LawrencePikeKattie KendrickPeConference Call:Edward BarnwellMuscogeeJodie SmithCarrollRyran TraylorLaTed KirkFayetteMike PattersonMaconJan RayfieldHeAbsent:Betty CasonCarrollSher'Londa WalkerTalbotSyntel BrownSpCeleta CavenderCarrollCathy McGillCrispFrancis PeedHe	Valerie West	Troup	Irene Cheyne	Fayette	Jeffrey Cantor	Coweta
Annie DavisMuscogeeBJ LawrencePikeKattie KendrickPeConference Call:Edward BarnwellMuscogeeJodie SmithCarrollRyran TraylorLaEdward BarnwellMuscogeeJodie SmithCarrollRyran TraylorLaTed KirkFayetteMike PattersonMaconJan RayfieldHeAbsent:Betty CasonCarrollSher'Londa WalkerTalbotSyntel BrownSpCeleta CavenderCarrollCathy McGillCrispFrancis PeedHeChanda MooreCowetaStarla DeSaussureHarrisTomika SalesM	Geraldine Jackson	Spalding	Lisa Fort	Stewart	Geraldine Jackson	Spalding
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Guest: Consuela Allen Respect Institute Speaker Jennifer Denny Lorie McSwain		Respect Insti	tute Speaker	lennifer De	nny Iorie McSwa	in
	Consuela Allen Respect Institute Speaker					
	DBHDD Staff: Kerrie Roberts		(Presenting on behal	f of Valona Bal	dwin)	
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Kerrie Roberts(Presenting on behalf of Valona Baldwin)		Administrative Assis				

	AGENDA ITEMS	PRESENTER(S)	DISCUSSION

I. Call to Order	Valerie West, Chair	Meeting called to order – 1:05PM
		A. Welcome and Introductions
		• Valerie West – Good afternoon. I'm Valerie West, Chair for the
		Advisory Council and the representative for Troup County. Let's
		start with introductions and if you are new, tell us something about
		you and why you were interested in joining the Advisory Council
		B. Review of January 9, 2019 Meeting Minutes
		<ul> <li>Valerie West – Please review the minutes from our last meeting,</li> </ul>
		they can be found in your folder, at this time if any corrections or
		additions need to be made let's take this time to do so. If there are
		no corrections needed, I motion to accept the minutes as is.
		Jeffrey Cantor – I accept
		• Alan Everidge – I second.
		Valerie West - Motion accepted to approve the minutes.
II. Guest Presentation	-	A. Respect Institute Speaker
and Public Comments		Consuela Allen, Respect Institute Speaker (Presentation)
		B. Public Comments (3 minutes max per comment)
		• N/A
III. Membership	Lawonna Parks, RAC	A. Informational Review of the Roster and Membership Changes
Updates and Actions	Assistant	Lawonna Parks – Roster has been updated to reflect the newest
		members, those who have resigned or have not been active since
		their appoint. No new members have been appointed as of this time.
		B. Meeting Attendance
		<ul> <li>Valerie West – A few days ago, we had a Committee Meeting and</li> </ul>
		one of the topics discussed was attendance. Points covered were to
		ensure we had members appointed to represent their county. As
		you glance at our roster, we have vacancies and some have been
		vacant since I been here. We discussed ways to increase
		attendance and in the By-Laws, it speaks on attending in person
		unless you have a valid excuse. We are only allowed to miss two

meetings. We have six meetings per year, every other month and I want to encourage everyone to attend in person. We have a lot of work we could be getting done if we have everyone here and attending in person helps put a name with a face, helps us to get to know each other better and hopefully delegate some of the task we have. We have those who take on multiple task and they are the same ones who always volunteer. Some of you may be apprehensive about taking on a task but you'll never know how you will do until you try. We will not let you fail and there are plenty of people here to help you if you need help so don't be shy about excepting a role. These are learning opportunities which makes a mark on what we are doing. It reminds me of when I started out as an advocate due to my son being diagnosed with schizophrenia. I was having difficulty getting access to services. Thru volunteering with Nami, serving on the Board at Pathways Homeless Coalition and Troup Transformation, I was able to learn a lot more concerning what I needed to do. Everyone on this Council should take the opportunity volunteer so we may be able to accomplish some things for ourselves as well as those we serve. Our next meeting is March 13<sup>th</sup> at 1pm, mark your calendars and I hope to see everyone here. Does anyone have suggestions on how to approve the attendance? What are some of the barriers you face when attending in person?

Annie Davis – We talked about this last year. We were considering changing the meeting location venue. We have four representatives from Muscogee County and one of them is with the School System. The hours the Advisory meeting is scheduled for could be a conflict with her schedule. I can only speak on behalf of the female representatives, I'm not sure what Mr. Barnwell dilemma may be. Being Participant Direct, it keeps us from moving away from home as we all know life happens, it takes us an hour to travel to the meeting then sit for another three, that's five hours we are away from our children. Changing to a closer location occasionally, (for those who travel far) may help boost the attendance. Utilizing the conference line is very difficult due to its hard to hear and because

of that may cause less participation from others who also use the line.

- LaVonne Harn To validate what Annie said, I would rather consider not using the conference line. It's easy to rely on but being here in person validates your attendance, per the By-laws and keeps you active within the Council. You can't contribute if you can't hear. I suggest we take a break from the conference line give them those the option of show up in person or read the minutes.
- Lisa Fort For me I think the location should be changed. As for me it's an hour and a half drive minimum and we don't have representatives for Quitman, Clay and they would be farther than what I drive to get here.
- Jeffrey Cantor The call-in conference line is very difficult to hear, you can't contribute if you can't hear. Maybe we should not give the line as an option, it encourages people to not make the trip or give an excuse to not show up. Remove the option of the conference line for a trail period and see what the outcome would be.
- Kattie Kendrick I agree with those who have said everything about the conference line. I tried it once and I felt as if I was in a room by myself. Zoom or Go To Meeting gives you the option to see those who are attending the meeting. Some facilities are set up for this type of meeting.
- Alan Everidge If we put a limit on it how many times they can utilize the conference line or whatever the case may be, it may help with getting more Members to attend in person. A conference line with extended mics could also be beneficial to help elevate that issue as well.
- Lawonna Parks I have order a second conference line with extended mics to help with the issue. At our next meeting let's try it out and if we continue to have those problems, let's move forward with other options.
- Jeffrey Cantor At a previous Statewide Leadership Council Meeting, the Attorney from the main office address Conference Calling was not a legitimate source for attending a Regional

	<ul> <li>Advisory Council Meeting. How does that play into everything we just discussed?</li> <li>Valerie West – Recently we received some information concerning "Open Meetings" so I'm not sure if that fell under that category.</li> <li>Irene Cheyne – As stated in Robert's Rule and Orders, I believed that pertain to us not accepting any votes over the phone in open meetings. I like Alan's idea, I suggest the material we give to the Counties when recruiting should read, out of the six meetings per year only two of those meetings you can utilize the conference line, all others you should attend in person.</li> <li>Valerie West – We talked about having break-out sessions but it's kind of hard to do when we only have two people attending. We wanted to get ideas about things that were coming up for instance the survey which is very important and is being distributed throughout the counties. We need participation from everyone to make this work and what their contribution could be. Location – We talked about this in our previous meetings and we found that Talbot County was the must centralized location and our current location is just fifteen minutes away. We need for someone to visit the facility and see if it can accommodate our needs. The only issue I see with changing locations is that people will get confused on where to be on which dates, trying to find the facility and if we use mobile devices to connect with the conference line, our southern counties may not have adequate mobile service. Let's form a committee to visit the facility and tackel some of the issues we addressed and take a vote at our next meeting if this is a facility to accommodate our needs.</li> <li>Kattie Kendrick – For our Council members who work full time, do you think because of their employment hinders them from being here in person and cause them to utilize the conference line more?</li> <li>Valerie West – When you apply to a Board, you are committing and agreeing that you are available and can attend meetings. Our County Commissioners</li></ul>
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V. Region 6 RAC/ Field	A. 2017-2018 Priority Process Update – RSA Report
Office	<ul> <li>Ann Riley (BH) – Just a brief update, the Telemedicine training</li> </ul>
Office	<ul> <li>originally scheduled for December has now been rescheduled for January 25, 2019 on the West Central Georgia Regional Hospital campus. This training is in line with the Priorities related to Workforce Development in Telemedicine to help extend services further than what they are currently providing and it's for the clinicians.</li> <li>Irene Cheyne – I attended a meeting last week and several people there stated that the Health Departments has this set up in place and can use their equipment. I thought this was wonderful and could you ask at the training if this is in place?</li> <li>Ann Riley (BH) – I never heard of that and this training is for TeleMental Health dealing more with the legal and ethical use. The composite board for professional counselors, marriage family therapist and social workers must have six hours of TeleMental</li> </ul>
	Health Medicine training before you can use that modality in the state of Georgia.
	<ul> <li>Kattie Kendrick – Some Health Departments have them but it is not set up for telemedicine yet. They are set up for meetings.</li> <li>Ann Riley (BH) – We continue to work filling the newly funded Supported Employment slots within Behavioral Health. All providers have received an increase and those slots are being filled as we speak.</li> </ul>
	<ul> <li>Kerrie Robertson (IDD) – The new Participant Direction Coordinator was hired and her name is Adrienne Johnson and she is one of two working alongside Kingsley Uwa. She will coordinate trainings to help families direct their own services. Vivian Black is the new RSA (DD) for Region 2.</li> </ul>
	<ul> <li>Irene Cheyne – We have a new Psychologist?</li> <li>Komia Pakantaan</li> </ul>
	<ul> <li>Kerrie Robertson – No, we have coverage from other Regions helping until we can replace Dr. McQueeney who retired. There is a new state Psychologist and she is supervising the other</li> </ul>
	psychologists with helping all the Regions to get on the same page on how they process applications guidelines. The turnaround for processing new applications is transitioning more smoothly, it has

allowed us to speed up our timelines and if the supporting documentation is available at the time the application was submitted, the eligibility determine is within forty-five days. Annie Davis – What is making things easier? Kerrie Robertson – We have been given a lot of help to clear up our backlog, psychologists are allowed to increase their hours because they are all contracted employers where they couldn't work over twenty-nine hours per week. They have been approved to increase their hours to help clear up the backlog so we have more resources. At first, we were using a Field Office model but more of a Region base model not everyone was doing things in the same way, now everything is pulled into the State Office where there is more oversight. Region 6 in the past six months has moved more people into services than any of the other Regions and we also are leading the other Regions as top performers when placing individuals into services. B. 2019 Priority Process • Irene Cheyne – Towards the summer we will be determining the three priorities for our Region. We have a priority report for 2017 that has three priorities for the state of Georgia and for each Region. I'm going to send the document out to everyone and I need for each of you to take a closer look at it before we set the priorities. In the report, you see one priority and several strategies, it has been determined by the Delphi Team that this year there will be only two to three strategies per priority. To hold the state and the Regions accountable and accomplish our goal we would need to narrow down our strategies. The priority process for 2017 were annual reports put together by the RSA's and Regional Advisory Councils. Those reports were then submitted to headquarters and at their own admission was never read. With the approval of Commissioner Fitzgerald, the priority process replaced those reports. In 2017 we haven't done a lot of public involvement because it was a new process for us and we were determined to do better so last year we did the Delphi Study. Twenty questions were created and we had one hundred and twenty-six experts to respond to the questions. We used that study to develop the

guestionnaire and it's the first time we have done this on a statewide basis and it's our most extensive public involvement process. I had a meeting with Association of County Commissioners of Georgia yesterday and I want to share with all of you how I became involved in advocating for our loved ones with Mental Illness. My son had a psychotic breakdown 9/11 and it was a frustrating time for me and my husband. My son felt he caused the tragedy that took so many lives and he confessed to many other incidents that he was not involved in as well. Furious I contacted my family physician and explain to him what was going on with my son and he responded by saying he didn't treat mental illness. At this point I had no clue as to what to do and how to get him some help. Luckily, we had the resources, we talked with a psychologist and he was a life saver. Through our first initial visit with the psychologist he helped us find a psychologist who treats psychotic episodes in young adolescents and from there our journey begins. Through trial and tribulations my son is now thirty years old, married, starting a family, has a job, does not take any medications and is mental illness free. I made a pledge to myself that when I retired from the university that I would dedicate my life to mental illness and the ideal of early intervention. I love when the Respect Institute comes to our meetings and the speakers share their story. Recovery works and DBHDD is doing a very good job but can do better, we can do better to help our communities. The survey is a big help, reading some of the comments, there are people out there who need services and didn't know there are services are out there. I have more surveys if any of you need more as well as the survey cards that has the link and the QR code that if you scan with your phone it will take you directly to the survey. The questionnaire can also be accessed through survey monkey. Alan Everidge – We all look at this survey from different aspects.

 Alan Everidge – We all look at this survey from different aspects. The ones who can really benefit from this questionnaire/ survey are the families who have a family member who is struggling with Mental Health and the individual themselves. We must reach out to those just as we reach out to those who work with the individual in a jail setting, hospital setting or those who are with a provider or

someone who is incline and have the knowledge to access services. I took on the initiative to approach the Mental Health Court Coordinator and the Crisis Unit at Phoenix and suggested allowing those who are clients and those who are out but going through mental health court through probation. I also talked with the Police Chief, head of the Sheriff Association, the executive officer, I also will be allowed to speak at our annual jail manager training which one hundred and fifty-nine counties are scheduled to be there my goal is to at least get a questionnaire or a flyer in their hand with hopes that they will take it back to their communities and help spread the word. We also gave those who were in jail primarily with mental health issues to take the questionnaire. We all know where our comfort zone is and we should step outside of that to help our communities deal with mental health issues.

- Lisa Fort When individuals come into the DBHDD offices, do they have access to these services?
- Irene Cheyne Individuals do not come to the offices, they visit their CSB (Community Service Board) in their area. We can contact them to ensure this process is happening and if you are not sure what CSB is in your county, I can give you that information after the meeting.
- Jeffrey Cantor I reached out to the Coweta Chamber of Commerce in regards to distributing the questionnaire through their newsletter and they jumped right on it. On their Board of directors, the President of Piedmont Hospital Newnan, Cancer Centers of America and large, small non-profit and profit organizations distributed it through their January newsletter and within overnight thirty of the thirty-six questionnaires where completed. Two of Coweta County libraries have the cards sitting on their check-out counters for easy access.
- Valerie West I reached out to the lead trainer for NAMI Georgia and she will address the program director to see if they can distribute through their network. If I do the training in February for Family Support and Connections, I will take some questionnaires with me and make sure they get them.

C. ASD Study Committee
<ul> <li>Irene Cheyne – We have celebrated an anniversary, this will be our</li> </ul>
third year of meeting monthly and we have recently moved our
meeting location. January 16 <sup>th</sup> will be our first meeting and will be
held at the Columbus Technical College. We have been meeting at
the North Columbus Library however due to conflicting scheduling
with schools we lose the use of the meeting room.
D. Survey Funding Decision
<ul> <li>Jeffrey Cantor – The Delphi Study Phase I mid-year 2018 several of</li> </ul>
us from the Leadership Council met with the Commissioner to
present the findings of the Delphi Studies. At that meeting we
spoke about the intern we had working with us during the study,
request of additional funding to keep that relationship ongoing
with a second year of funding for the present projects. When the
funding came down at the end of 2018 we were informed that the
budget would be cut by one-thousand dollars less than the original
funding for last year due to agency priorities. This was a major set-
back however we had to move forward, we were able to recruit
another intern through the higher education community. The funds
that goes to the Georgia Mental Health Association, which is the
agency that receives DBHDD funds, after their percentage off the
top, the remainder is what Irene has left to work with. One of the
suggestions discussed were to search for additional funding outside
of DBHDD like Mental Health America could underwrite
somewhere down the line. We have an upcoming meeting with
Mental Health America to propose the idea of letting us help find
additional funding. With the help of the agency, the agency will
handle all the funds with the intent of hiring a second intern. We
will control the interviewing process and selection of electing who
we need to continue the work we are currently doing and in the
near future. I have already completed the spin search online
searching for potential funding sources who are willing to spend
money on the kind of projects we are talking about. We must seek
other options because we can't keep depending on the agency to
fund us at low budget and expect us to continue the work we need
to accomplish.

VI. Reports – Field	A. Intellectual/ Developmental Disabilities
Office	<ul> <li>Kerrie Robertson (IDD) – Ashleigh Henneberger is the new Directo of Waiver Services. Each Region now has their own Nurse Manager and they report to the Office of Health and Wellness. Before, we only had three Nurse Managers throughout the state and they shared two Regions. The Nurse Manager for Region Six is Tamika Baugh-Allen.</li> <li>Irene Cheyne – Is this primarily for people who have transitioned?</li> <li>Valona Baldwin – No. It's Region wide for anyone who has escalated to a level of care whether they have moved from a new placement, had a critical incident, ER visit or hospital visit. Any factors to where they have increased their risk or changes to their health and wellness. The managers monitor them, make sure we are taking the accurate steps to close the loop with providers and Support Coordination they provide technical assistance to our nursing staff and they work very closely with our ADA population.</li> <li>Irene Cheyne – Why are they through the Office of Health and Wellness and not the Region and how do they get the information about the people in the Region?</li> <li>Valona Baldwin – They have access to the same system we have. About a year ago, the office of Health and Homes wanted to have the nurses under their office because it was overseen mostly by nurses and it's more of a direct clinical oversight of our medical personnel. We have a new case management system which was supposed to launch on October 1st. There are few concerns we need to clear up and our Division Director, Ron Wakfield stated it will be launched and a date has not been set. It will not be launched before the Providers and Support Coordination are trained properly to operate in that new environment. There are some proposed IDD Waiver amendments that are coming aboard next year. There will be changes and updates to our Interpretative Services. This service helps individuals with hearing impairment to communicate, interpretative training with our provider network scommunicate, interpretative tr</li></ul>

settlement agreement. Transition Services will also have waiver amendments. I do not have that information at this time. There also will be waiver amendments regarding Behavioral Support Services the change is to increase the number of hours available and we want to expand those units from 96 per service for Behavioral Supports, Consultation in Behavioral Supports Services is 96 units per year (annually) for each service and of course all of this must first go through CMS for approval and this is what will be presented from DCH. Update, for Supported Employment Services, they want to remove the transportation component due to low reimbursement rates. Routes to and from work are not cost effective for the provider, so removing the transportation component will help elevate duplicating a service if we also give that person transportation as well. This will allow the individual to apply for that service through other means. Additional Residential Staffing is for individuals who require a higher level of care, who may need additional staffing if they are in a Group or Host Home. The proposal is to remove the word residential from that service and just make it additional staffing so that the person can apply and be assessed for additional supports wherever they are. If they meet the clinical criteria, they can get it wherever they are. Additional Residential Services can be approved in Group, Host and CLS Homes. Lastly, we have a new staff with our PLA department, Van Luong is the new PLA Assistant replacing Laurie Barile. Linda Dykes is her direct supervisor. On the division level, Kelli Bishop is now the Director of Eligibility Services and will oversee all Field Office Psychologists.

## B. Behavioral Health

 Ann Riley (BH) – Earlier I spoke about the Telemedicine training on the WCGRH campus in January, if you are interested in joining us, I can email the brochure which gives a brief description, agenda and itinerary of the course. If you look in your folders, there is two invite letters for our upcoming CCM (Crisis Continuum Meeting) held on the WCGRH campus in the Honor Hall. That is a statewide meeting to help improve communication and collaborate more during crisis services provided to our individuals. The RCC (Regional

	Community Collaborative) meeting will be held at the North Columbus Library and this meeting is for the communities New Horizon BH serve. The purpose of this meeting is to improve communications between DBHDD and the communities, knowledge of resources and improve problem solving within the communities. Lastly, there has been a change in the Mobile Crisis response system for Region 6. In the past, BenchMark handle all crisis, however, as of January 1, 2019, BHL (Behavioral Health Link) will now be providing that service.
VII. Other Business	<ul> <li>Valerie West – Irene and myself had a brief conversation and about getting Council Members involved and I thought about when I was on board for Pathways and I'm not sure if the other CSB's do this as well. Each year we had a retreat and we were introduced to all aspects of what they did. I wanted to present to you and give you some time to think this over and see if this is something you would like to have. We would have to consider the cost, if any, location, staff and this would be an annual and mandatory event. This would be different from the annual RAC training we have every year, this retreat would be for Region 6 only. This could be a learning experience for all of us where we can get to know the entails of the Region office, the roles and responsibilities of the staff, the different departments within the office and how stable are we financially.</li> <li>Irene Cheyne – I would like to add to that schedule by inviting representatives from different clubhouses to come and talk with us about what happens in a clubhouse and the CSU (Crisis Stabilization Unit), provide slides of pics showcasing the facility, what are the services you provide and what is happening in our region so we are aware of our regional services.</li> </ul>
VIII. Adjournment	Next Meeting         A. Meeting Adjourn – 4:00 PM         B. Next scheduled meeting – March 13, 2019 - Upson Co. Senior Center

RAC minutes prepared by Lawonna Parks