Community Service Board Resources and Challenges in Rural Areas

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ACCG Mental Health Summit
August 1, 2018
Macon, Georgia
LASSIE! GET HELP!!
What is the Georgia Association of Community Service Boards? (gacsb.org)

- Represents interests of the 25 Georgia safety-net CSBs
- Supports the ongoing existence and wellbeing of the Georgia behavioral health public safety net
- Platform to share, exchange and benchmark information, ideas, solutions to problems and development of resources
- Provides the public with education and information about the purpose, role and services of CSBs
What are Community Service Boards?

- Part of Georgia’s public system of care for behavioral health
- Georgia’s public “safety net” for behavioral health
- 25 independent provider organizations
- Public companies and Instrumentalities of the State
- Boards are appointed by the County Commission
Georgia DBHDD Regions, State Psychiatric Hospitals, and Community Service Boards
• 481,000 popn in 10 counties
• 17 facilities, 100 vehicles
• 9,000 clients
• $32 M annual budget
• 420 employees
• CARF accredited
How is Advantage funded?

- 40% Medicaid
- 27% Private Insurance, Medicare
- 25% State Contracts
- 7% County Contributions
- 1% Other
- 1% Other
Who do we serve?

• Children, adolescents, and adults
• Mental illness, addictive disease, and/or developmental disabilities.
• Severe and Persistent Mental Illness (SPMI)
• Schizophrenia, Major Depression, and Bipolar Disorder.
<table>
<thead>
<tr>
<th>Diagnosis Cat/Age Group</th>
<th>Number of Persons Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>MH and AD Adults</td>
<td>113,755</td>
</tr>
<tr>
<td>MH and AD C&amp;A</td>
<td>20,323</td>
</tr>
<tr>
<td>IDD Adults</td>
<td>4,424</td>
</tr>
<tr>
<td>Total</td>
<td>138,502</td>
</tr>
</tbody>
</table>

* 18 CSBs using SPQM Data Warehouse
Where are services delivered?

- Clinics/Day Programs
- Schools/Workplace
- Emergency Rooms
- Medical Offices
- Homeless Centers
- Day Reporting Centers
- Probation Offices
- Court Houses
- Clients’ Homes
- Under Bridges/in Tent Cities
Primary Partners in the Community

- Sheriffs’ Offices
- Local ERs & Hospitals
- Probate & other Judges
- Day Reporting Centers
- Homeless Coalitions
- County Commissions
- Landlords
- Police Departments
- FQHCs
- Prisons and Jails
- Probation Officers
- Regional Development
- Faith Communities
- DFCS
- Employers
- Labor Department
- Vocational Rehab
Provide Coordination and Linkage to Comprehensive Treatment, Recovery and Supportive Services

Partnership and Connection with Community Resources

- Intake processing, assessment
- Treatment plan
- Substance use monitoring
- Self help, peer support
- Crisis services
- Pharmacotherapy
- Clinical & case management
- Behavioral therapy & counseling
- Family services
- Vocational services
- Mental health services
- Medical services
- Educational services
- HIV/AIDS services
- Housing, transportation
- Financial services
- Legal services
- Child care services

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- Vocational services
- Mental health services
- Medical services
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- HIV/AIDS services
- Housing, transportation
- Financial services
- Legal services
- Child care services

- Provide Coordination and Linkage to Comprehensive Treatment, Recovery and Supportive Services
Service Delivery Continuum of Care
Rural Challenges (and some urban!)

• Business related
  • Population density and volume
  • Economy of scale
  • Bricks and mortar rent/cost
  • Access - transportation

• Workforce
  • Competition for scarce clinical staff
Initiatives / grants / programs

• Opioid treatment funding – CARES Act, State Targeted Response

• Criminal Justice Partnerships
  • Accountability courts X 7
  • Justice and Mental Health Collaboration – BJA grant. ACCPD, Jail, etc.
  • Clarke – Stepping Up Initiative
  • CIT, MHFA
  • Reentry and forensic housing

• Youth programs
  • Zero Suicide Initiative
  • Youth MH Clubhouse
  • EPIC
  • APEX
1842 individuals arrested during the study window
(October to December 2015)

- Advantage clients (706) - 38%
- Referred to Advantage but never seen (40) - 2%
- Unaffiliated with Advantage (1,096) - 60%

Average of 7.7 Advantage clients getting arrested EVERY DAY

CRIMINAL HISTORY (of 1,842 arrested)

<table>
<thead>
<tr>
<th></th>
<th>706 Advantage Clients</th>
<th>1135 Not Advantage Clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>History of multiple arrests</td>
<td>91%</td>
<td>68%</td>
</tr>
<tr>
<td>Avg # of lifetime arrests</td>
<td>12.7</td>
<td>5.4</td>
</tr>
<tr>
<td>Total lifetime arrests</td>
<td>8986</td>
<td>6095</td>
</tr>
<tr>
<td>Avg length of stay in jail</td>
<td>22.7 days</td>
<td>8.1 days</td>
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<tr>
<td>Return to jail in 2016</td>
<td>53%</td>
<td>36%</td>
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</table>
Crisis Stabilization Units (CSUs)

- 24 hour units providing stabilization to those experiencing mental health crises or needing detoxification from substances.

- Provides medically monitored residential services for the purpose of providing psychiatric stabilization and substance withdrawal management services on a short-term basis.

- Can take individuals who are involuntarily committed.
Behavioral Health Crisis Centers (BHCCs)

• Short-term, 24/7, walk-in crisis intervention and counseling services with emergency receiving capability and crisis stabilization beds.

• Individuals who are experiencing behavioral health crises are provided assessment, short-term crisis counseling, supportive services and referrals for ongoing care.

• Staffing includes physicians, nurses, licensed clinicians and other behavioral health professionals to provide interventions designed to de-escalate crisis situations and prevent out-of-community treatment or hospitalization.

• If individuals need a higher level of care, the attached CSU allows for admissions for short-term residential treatment.
Our Hope....

...is to create complimentary systems of care in the community

...is to promote collaboration with community partners

...is to avoid silos of care and work to reduce them

...is to use evidence based practice in caring for our clients, and...

...to provide easy access to high-quality care that leads to a life of recovery and independence for the people we serve.
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Connect with us!

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<table>
<thead>
<tr>
<th>County</th>
<th>Sq Mi</th>
<th>Popn</th>
<th>Pop/SqMi</th>
<th>Adult @75%</th>
<th>SMI @ 4.2%</th>
<th>Treatment @64.8%</th>
</tr>
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<tbody>
<tr>
<td>Clarke</td>
<td>121</td>
<td>123,912</td>
<td>1,024.07</td>
<td>92,934</td>
<td>3,903</td>
<td>2,529</td>
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<tr>
<td>Walton</td>
<td>330</td>
<td>88,399</td>
<td>267.88</td>
<td>66,299</td>
<td>2,785</td>
<td>1,804</td>
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<tr>
<td>Barrow</td>
<td>163</td>
<td>75,370</td>
<td>462.39</td>
<td>56,528</td>
<td>2,374</td>
<td>1,538</td>
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<tr>
<td>Jackson</td>
<td>343</td>
<td>63,360</td>
<td>184.72</td>
<td>47,520</td>
<td>1,996</td>
<td>1,293</td>
</tr>
<tr>
<td>Oconee</td>
<td>186</td>
<td>32,808</td>
<td>176.39</td>
<td>24,606</td>
<td>1,033</td>
<td>670</td>
</tr>
<tr>
<td>Madison</td>
<td>286</td>
<td>28,441</td>
<td>99.44</td>
<td>21,331</td>
<td>896</td>
<td>581</td>
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<tr>
<td>Elbert</td>
<td>374</td>
<td>19,364</td>
<td>51.78</td>
<td>14,523</td>
<td>610</td>
<td>395</td>
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<tr>
<td>Morgan</td>
<td>355</td>
<td>18,046</td>
<td>50.83</td>
<td>13,535</td>
<td>568</td>
<td>368</td>
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<tr>
<td>Greene</td>
<td>406</td>
<td>16,710</td>
<td>41.16</td>
<td>12,533</td>
<td>526</td>
<td>341</td>
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<tr>
<td>Oglethorpe</td>
<td>442</td>
<td>14,871</td>
<td>33.64</td>
<td>11,153</td>
<td>468</td>
<td>304</td>
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<tr>
<td><strong>Total</strong></td>
<td>3006</td>
<td>481,281</td>
<td>160.11</td>
<td>360,961</td>
<td>15,160</td>
<td>9,824</td>
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