



DBHDD

**Georgia Department of Behavioral Health & Developmental  
Disabilities**

*Frank W. Berry, Commissioner*

**DBHDD Region Six Office**

3000 Schatulga Road • Columbus, GA • 31907-2435 Phone: 706-565-7835 • Fax: 706-565-3565

January 13, 2014

Pam McCollum  
Chief Executive Officer  
McIntosh Trail Community Service Board  
P.O. Box 1320  
Griffin, GA 30224

Dear Ms. McCollum:

This correspondence is to confirm Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) intent to contract with McIntosh Trail Community Service Board for a twenty-four (24) bed Crisis Stabilization Unit, six (6) Observation beds and a "Walk-in" Crisis Service Center.

McIntosh Trail CSB agrees that the above mentioned services will be fully operational by January 1, 2015.

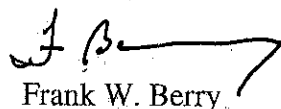
Both parties agree that the beds will be utilized on as-needed-basis. The estimated annual value of this commitment is the combination of existing CSU funding and new additional funds for the combined total of approximately five million and three hundred thousand dollars (\$5,300,000.00) in the first year and may be renewable annually thereafter.

Both parties further agree that this letter of intent to contract with McIntosh Trail CSB is subject to availability of funding appropriations to DBHDD and satisfactory performance of identified services by McIntosh Trail CSB.

It is my understanding that your organization requested this letter in order to commence preparatory work prior to the effective date of the contract stated above.

Please contact our Director for Regional Operations, Mr. Michael Link at 404/463-7161 or [mlink@dhr.state.ga.us](mailto:mlink@dhr.state.ga.us) or Region 6 Coordinator, Leland Johnson at 706/565-3478 or [lhjohnson1@dhr.state.ga.us](mailto:lhjohnson1@dhr.state.ga.us) if you have any questions.

Sincerely,

  
Frank W. Berry

Cc: Michael Link  
Leland Johnson  
Jeff Minor  
Judy Fitzgerald

## **Behavioral Health Crisis Center (BHCC)**

### ***General Description***

A Behavioral Health Crisis Center is a facility that utilizes a comprehensive service model that includes three co-located services:

- Crisis Service Center (CSC),
- Temporary Observation area, and
- Crisis Stabilization Unit (CSU)

Since a CSU may operate independently from the other two services and other combinations of two of these three services (CSC and Temporary Observation; Temporary Observation and CSU) may exist in other program models, the service definitions for the three component services are provided individually. The three service definitions are designed to complement each other and to be used in a flexible manner according to the needs of the individuals presenting to the BHCC.

### ***Staffing***

Within the DBHDD service delivery system, there are facility-specific variations in the number of beds in a CSU, the number of observation chairs/beds in a Temporary Observation area, and the volume of service demand in a given location. Therefore, specifications regarding numbers of staff and numbers of beds/chairs are generally defined in individual contracts rather than in the service definitions. When a minimum number of staff or a minimum ratio of staff:patients must be maintained within a specific component of the service, this will be specified. When the number of staff on duty exceeds the minimum requirement for a particular service area, these staff may float to other areas of the BHCC as determined appropriate by the facility to meet patient care needs.

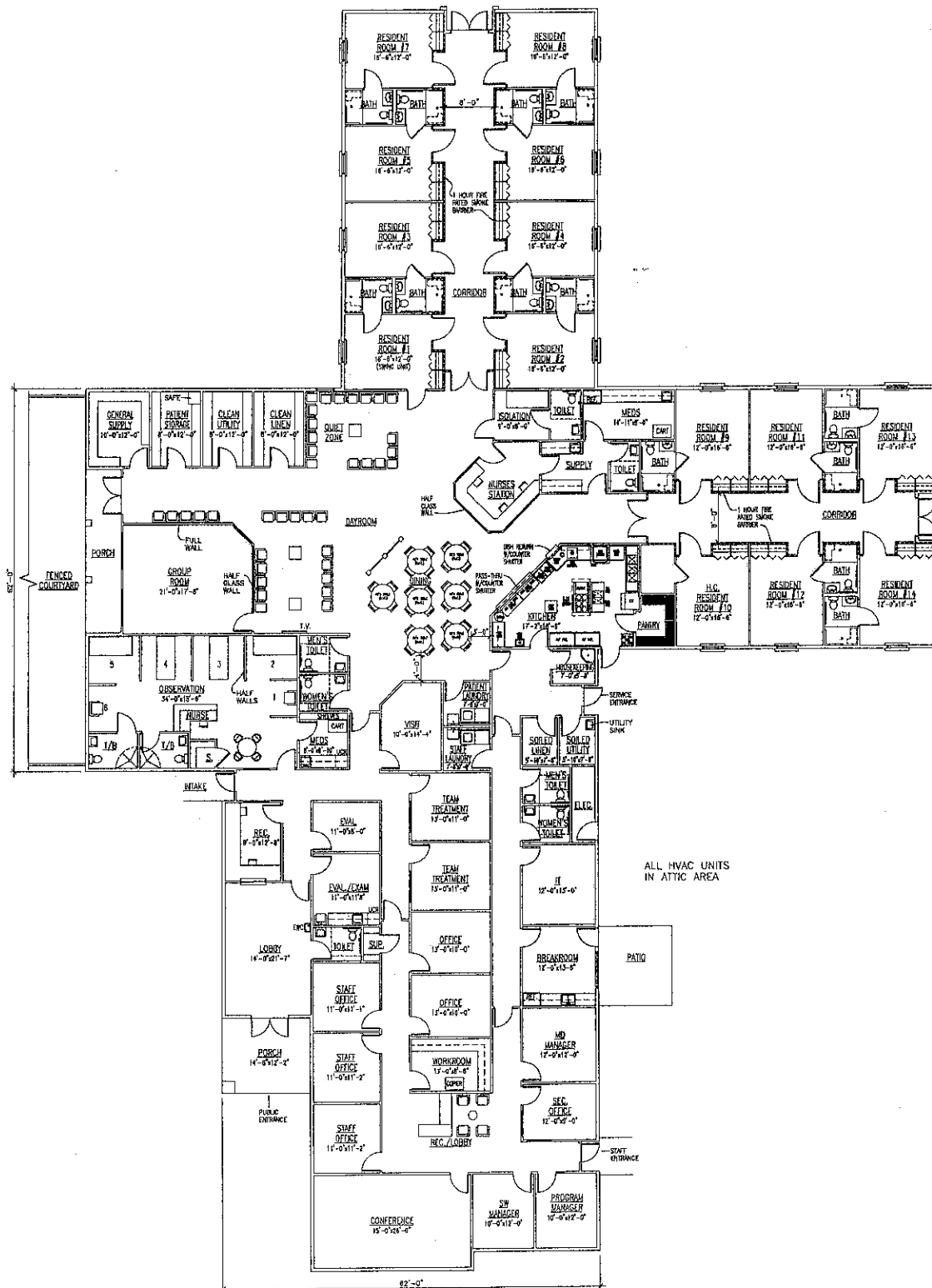
### ***Access to Services***

Individuals are provided easy access to a Behavioral Health Crisis Center 24 hours per day, 365 days per year. It is expected that individuals may enter a BHCC via the Crisis Services Center, the Temporary Observation unit or may be admitted directly to the Crisis Stabilization Unit. While walk-ins will always enter through the Crisis Services Center, there is no expectation that an individual must go through either the CSC or the Temporary Observation unit prior to admission to the CSU. It is expected that the Temporary Observation unit will be utilized in situations in which diversion from CSU admission or an inpatient psychiatric facility is possible.

### ***Emergency Receiving Facility Designation***

BHCCs are designed to be emergency receiving facilities (ERF). In the same way that hospitals and CSUs are designated as emergency receiving facilities, the *facility* is designated as an emergency receiving facility. Therefore, the facility has been determined to have the capacity to perform all of the functions of an emergency receiving facility. Specific parts, areas, or rooms within a facility are not designated by DBHDD as an ERF. The facility will determine, based on the individual's presentation and their unique physical layout and space, where within their facility it is safe and appropriate to bring people into the facility, where to perform the required evaluations of individuals brought to the facility on an involuntary basis, and how they will ensure access to the required components of an emergency receiving facility as needed.

Behavioral Health Crisis Centers must accept individuals referred under emergency conditions (1013/2013/probate court order) and perform a face-to-face evaluation in order to determine the most appropriate level of care. If after face-to-face assessment by licensed staff, if it is determined that the severity of clinical issues precludes provision of services at this level of care, the BHCC will arrange for and facilitate the transfer to an appropriate higher or lower level of care.



# FLOOR PLAN 'B'

SCALE: 1/16"=1'-0"  
AREA = 14,331 S.F.  
MAY 31, 2013

**ADULT CRISIS STABILIZATION CENTER**  
VALDOSTA, GEORGIA

**RHA RICHARD HILL ASSOCIATES**  
ARCHITECTS PLANNERS  
2014 BENJAMIN ROAD • VALDOSTA, GEORGIA 31002 • 229-333-0243

