United States v. Georgia  
Civil No. 1:10-CV-249-CAP  
Settlement Agreement fact sheet  
October 19, 2010

The Settlement Agreement resolves the Civil Rights Division’s complaint against the State of Georgia regarding the State’s failure to serve individuals with developmental disabilities and mental illness in the most integrated setting appropriate to those individuals’ needs. Under the Agreement:

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- Georgia will cease all admissions of individuals with developmental disabilities to their State Hospitals by July 1, 2011

- Georgia will transition all individuals with developmental disabilities in the State Hospitals from the Hospitals to community settings by July 1, 2015

- Georgia will create 1150 home and community based waivers for individuals with developmental disabilities by July 1, 2015: 750 waivers to help transition individuals from the State Hospitals to community settings, and 400 waivers to help prevent the institutionalization of those individuals currently living in the community

- Georgia will serve those individuals receiving home and community based waivers under the Agreement in their own home or their family’s home consistent with each individual’s informed choice

- Georgia will provide those individuals receiving home and community based waivers under the Agreement with support coordination to assist them in gaining access to medical, social, education, transportation, housing, nutritional, and other needed services

- Georgia will provide family supports to 2350 families of individuals with developmental disabilities by July 1, 2015, to help those families continue to care for a family member with developmental disabilities at home

- Georgia will have six mobile crisis teams by July 1, 2012, to respond to individuals with developmental disabilities experiencing a crisis anywhere in the community

- Georgia will establish 12 crisis respite homes by July 1, 2014, to provide respite services to individuals with developmental disabilities and their families
Georgia will serve in community settings by July 1, 2015, 9000 individuals with serious and persistent mental illness who currently are served in the State Hospitals, frequently readmitted to the State Hospitals, frequently seen in Emergency Rooms, chronically homeless, and/or being released from jails or prisons.

Georgia will have 22 Assertive Community Treatment (“ACT”) teams by July 1, 2013, that operate with fidelity to the Dartmouth ACT model.

Georgia will have eight Community Support Teams (“CST”) by July 1, 2014, that provide services to individuals in their own home and ensure that community resources needed for the individual to remain in the community are in place.

Georgia will have 14 Intensive Case Management teams by July 1, 2015, comprising 10 full-time case managers per team, that coordinate treatment and support services and assist individuals with accessing community resources.

Georgia will have 45 Case Management service providers by July 1, 2015, that coordinate treatment and support services and help maintain services and supports already in place.

Georgia will establish six Crisis Services Centers by July 1, 2015, to provide walk-in psychiatric and counseling services in a center that is clinically staffed 24 hours per day, 7 days per week, to receive individuals in crisis.

Georgia will establish three additional Crisis Stabilization Programs by July 1, 2014, to provide psychiatric stabilization and detoxification services in a community-based setting.

Georgia will fund 35 community-based psychiatric hospital beds in non-State community hospitals.

Georgia will operate a toll-free statewide telephone system for persons to access information about resources in the community to assist with a mental health crisis.

Georgia will have mental health mobile crisis teams to respond to individuals experiencing a crisis anywhere in the community in every county in the State by July 1, 2015.

Georgia will have 18 crisis apartments by July 1, 2015, to serve as an alternative to crisis stabilization programs and to psychiatric hospitalization.
• Georgia will have the capacity by July 1, 2015, to provide supported housing to any of the 9000 individuals with serious and persistent mental illness served under the Agreement who need such support, with 50% of the supported housing units being provided in scattered-site housing where no more than 20% or two of the units, whichever number is greater, are used to provide supported housing under this Agreement.

• Georgia will provide by July 1, 2015, housing supports to 2000 individuals who are deemed ineligible for any other benefits.

• Georgia will provide bridge funding to 540 individuals by July 1, 2014, to support a transition to supported housing during the time needed for those individuals to become eligible and a recipient of other supplemental income.

• Georgia will provide supported employment to 550 individuals by July 1, 2015, in accordance with an evidence-based supported employment model.

• Georgia will provide peer support services to individuals receiving ACT and CST services and, by July 1, 2014, to an additional 835 individuals.

• Georgia will have one case manager and one transition specialist per State Hospital by July 1, 2012, to help coordinate the transition of individuals from State Hospitals to community settings.

Implementation and Quality Assurance

• Georgia will begin performing by July 1, 2012, an annual network analysis to assess the availability in the community of supports and services for individuals with developmental disabilities and serious and persistent mental illness.

• Georgia will institute a quality management system by July 1, 2012, to perform annual quality service reviews of the community services provided under the Agreement.

• The Parties selected Elizabeth Jones to serve as an Independent Reviewer to assess the State’s compliance with the terms of the Agreement.