

DOJ/State of Georgia Settlement – Acute Care Task Force Report - Federally Qualified Health Centers - (1-31-11)

DOJ/State of Georgia Settlement http://www.namiga.org/DOJ/index.htm	Acute Care Task Force Report http://www.dhs.state.ga.us/mhdd/docs/20091202_AcuteCareTFrecommendations.pdf	Federally Qualified Health Centers
The targeted population to be helped in Georgia are those with serious and persistent Mental Illness , those in state hospitals, those frequently admitted to state hospitals, those frequently admitted to emergency rooms, those chronically homeless, those released from jail or prisons and those who have co-occurring conditions such as substance abuse or traumatic brain injury.	One of the top priorities that emerged out of several workgroups was the importance of creating a statewide acute mental health care service system , allowing for all Iowans to access critical mental health care for urgent/emergent needs.	Federally designated and funded – not for profit corporations (consumer led boards) Comprehensive primary health care regardless of ability to pay – fees are on sliding fee schedule
Georgia has a population of 9.8 million with area of 57,906 sq. mi. Iowa has a population of 3 million with area of 55,869 sq. mi.	The long term plan requires a shift in philosophy from “triage to recovery” with the following principles: self-direction (choice), individualized and person-centered, strengths based, responsibility, respect (self and society), empowerment (needs, wants, goals), holistic (community, housing, spirituality, etc), non-linear (recovery), peer support, hope .	-located in high need areas (elevated poverty, higher than average infant mortality, and where few physicians practice) -open to all residents -offer enabling services that help patients access health care
22 Assertive Community Treatment teams by 7-1-13		Must provide access to comprehensive primary care (medical, dental, mental health, OB/GYN, voluntary family planning), lab, X-ray, pharmacy, referrals, hospitalizations, services provided onsite or via referral/contractual agreements
8 Community Support teams by 7-1-14 for rural areas		
14 Intensive Case management teams (10 case managers, 1 supervisor in each) by 7-2015		
45 case managers by 7-1-15		
6 Crisis Service Centers with walk-in psych & counseling services 24 hours per day 7 days per week by 7-1-15 (to replace going to hospital emergency rooms)	Psychiatric ER Screening	
3 Crisis Stabilizations programs – 16 beds each that provide psych stabilizations and detoxification	Crisis stabilization Centers for Adults and Children and Adolescents – 24 hour access – average length of stay – 2 weeks (for those who do not meet criteria for inpatient care) Subacute Services (care between inpatient care and home)	Enabling Services include: Case mgmt assessment, treatment and referral, eligibility assistance/financial counseling, health education/supportive counseling – individual, interpretation, outreach, transportation and other (to reduce access barriers)
Retain funding for 35 community hospital beds	Commitment Diversion/Chapter 229 Revisions	
24 hour/7 days per week crisis line	Jail Diversion program	
Mobile crisis services in all 159 counties by 7-1-15	Mobile crisis outreach services for youth and adolescents in the home, school, and community	13 Iowa grantees + 1 look alike (about 75 delivery sites in Iowa)
18 Crisis apartments by 7-1-15 each serving 2 staffed by paraprofessionals and a peer specialist	Expanded role of designated community mental health centers	Contact Deb Kasmerzak 244-9610 dkazmerzak@ianepca.com
Housing supports for the targeted population – 50% in scattered site housing, 60% in 2 BR units, bridge funding for initially setting up a household – obtain help from HUD and other programming for housing assistance – state provided support for up to 2000 ineligible under federal programs, bridge funding for up to 1800	School based mental health services	Affordable Care Act - \$11 billion in funding over the next 5 years \$9.5 to create new health center sites and expand services \$1.5 for major construction and renovation projects Will double patients seen
Supported employment for up to 550 by 7-1-15		
Peer support services for up to 835 by 7-1-14.		
Developmental Disabilities		
They are to cease admissions to state hospitals by 7-1-11	By 7-1-12 – 6 mobile crisis teams for persons w/DD	Program to educate judges and law enforcement officials
Those in state hospitals to go to their own home or their family's home, or to a host home (no more than 2) or congregate home (no more than 4) consistent with each individual's informed choice. Each will have an individual service plan.	By 7-1-14 – 12 crisis respite homes Quality improvement organization for oversight	Each year from 7-1-11 through 7-1-15 – 150 moved from hospitals to community w/waiver assistance and family supports provided to 400-500 additional families each year