The Agreement resolves the Civil Rights Division’s investigation and will ensure the State’s mental health service system is in compliance with the Americans with Disabilities Act (ADA) and the Rehabilitation Act. Under the Agreement, over the next eight years, North Carolina’s system will expand community-based services and supported housing that promote inclusion and independence and enable people with mental illness to participate fully in community life.

OVERVIEW

• The Agreement will transform North Carolina’s mental health system from one that is heavily reliant on large, institutional settings, to one that is focused on providing community-based services and housing that enable individuals to live, work, and participate fully in community life.

• The Agreement provides community-based supported housing to 3,000 individuals unnecessarily segregated in, or at risk of entry into, adult care homes.

• The Agreement also provides thousands of people with mental illness access to critical community-based mental health services – including Assertive Community Treatment (ACT) teams, crisis services and supported employment services. The State will also implement a person-centered discharge planning process to help individuals transition to the community and a pre-admission screening process to prevent individuals from becoming unnecessarily institutionalized.

RELIEF IN SETTLEMENT AGREEMENT

• Community-Based Supported Housing
  o Provides at least 3,000 housing slots over eight years (by July 2020) to enable people with mental illness to transition to community-based supported housing and to ensure that those at risk of entering adult care homes will be offered supported housing in the community.
    ▪ Housing slots are a package of housing vouchers or rental subsidies, tenancy supports, and transition supports that enable residents to maintain integrated, affordable supported housing.
    ▪ Community-based supported housing is permanent housing with tenancy rights, where individuals have access to flexible support services as needed and desired. Supported housing affords individuals choice in their daily lives and enables them to interact with individuals without disabilities to the fullest extent possible.

• Community-Based Mental Health Services
  o Ensures that individuals with mental illness receive the array and intensity of services to enable them to successfully transition to, and remain in, community-based settings. These services include ACT, Community Support Teams, case management services, peer support services, and psychosocial rehabilitation services.
    ▪ Following a nationally recognized fidelity model, the number of ACT teams throughout the State will expand to 50 ACT teams with the capacity to serve 5,000 individuals by July 1, 2019.
- Requires development of a crisis service system that offers timely and accessible services and supports in the least restrictive setting, including mobile crisis teams, walk-in crisis clinics, short-term community hospital beds, and 24/7 crisis hotlines.
- Significant expansion of supported employment, which assists individuals in preparing for, identifying, and maintaining integrated, paid, competitive employment.

**Discharge Planning and Diversion Process**
- Implements procedures for discharge planning that ensure that individuals with serious mental illness in, or later admitted to, an adult care home or State psychiatric hospital are fully informed about all community-based options, including supported housing.
- Provides information frequently about the benefits of supported housing.
- Provides each individual with serious mental illness in, or later admitted to, an adult care home or State psychiatric hospital with a written discharge plan that is:
  - Person-centered and strengths-based
  - Based on the principles of self-determination and integration
  - Implemented by a transition team
- Includes a process to identify barriers to discharge and ensure a safe and timely transition.
- Implements a pre-admission screening and diversion process to prevent unnecessary institutionalization.
- Develops and implements person-centered service plans for each individual that will be implemented by a qualified professional in a coordinated manner.

**IMD-Related Provisions**
- Priority for housing slots is given to people with mental illness in adult care homes determined to be institutions for mental disease (“IMDs”).
- Requires individuals in adult care homes determined to be at risk of IMD status to be connected with appropriate alternate settings and mental health services.
- Will track the location of individuals with mental illness who move out of an adult care home that it is at risk of an IMD determination, to ensure that such individuals will be offered the relief provided under the Agreement.

**Additional Provisions**
- Develops a quality assurance and performance improvement monitoring system to ensure individuals receive community-based services that they need to maintain their health, safety, and welfare.
- Appoints an independent reviewer who will assist with and evaluate compliance.
- Provides for court enforcement if there is a dispute regarding compliance and the parties cannot agree on a plan to resolve the alleged non-compliance.