



**Item 329.A.3. – Progress Report on the Plan for the
Housing of Additional Individuals
Committed for Treatment at the
Virginia Center for Behavioral Rehabilitation**

to the Governor and Members of the General Assembly

July 1, 2012



COMMONWEALTH of VIRGINIA

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COMMISSIONER

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July 1, 2012

To: The Honorable Robert F. McDonnell, Governor
And
Members, Virginia General Assembly

Item 329.A.3 of the 2012 *Appropriation Act* requires the Department of Behavioral Health and Developmental Services (DBHDS) to submit a quarterly report on the plan to house additional individuals committed for treatment to the Virginia Center for Behavior Rehabilitation (VCBR). In Item C-76.15., the 2011 *Appropriation Act* also requires the Department of General Services, with the cooperation and support of the Department of Behavioral Health and Developmental Services and the Secretary of Health and Human Resources, to manage the project. This is the fifth quarterly report on the expansion of the occupancy at VCBR.

The next plan update will be submitted on October 1, 2012. Should you have questions in the interim regarding the progress of this project or the estimated timeline, please feel free to contact me at (804) 786-3921.

Sincerely,

A handwritten signature in cursive script that reads 'James W. Stewart, III'.

James W. Stewart, III
Commissioner

CC: Hon. William A. Hazel Jr., MD
Keith Hare
Olivia J. Garland, Ph.D.
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TABLE OF CONTENTS

I.	Executive Summary	2
II.	Census Factors	4
III.	Plan for Accommodating Increases in the Sexually Violent Predator Population	4
	Progress Update	
	• Double-occupancy Rooms	
	• ADA Accessible	
	• Remodeling or Repurposing Existing spaces	
	• Revised Construction Timeline	
I.	Risk Assessments and Considerations	6
II.	PPEA to Consider Privatization	6

**Item 329.A.1-3 - Progress Report on the Plan for the Housing of
Additional Individuals Committed for Treatment at the
Virginia Center for Behavioral Rehabilitation**

**QUARTERLY UPDATE
July 1, 2012**

I. Executive Summary

Item 329.A.1-3 of the 2012 *Appropriation Act* requires the Commissioner of the Department of Behavioral Health and Developmental Services (DBHDS) to submit a quarterly report on the plan to house additional individuals committed for treatment to the Virginia Center for Behavior Rehabilitation (VCBR). The language is outlined below:

A.1. The Department of Behavioral Health and Developmental Services (DBHDS) shall implement a plan to accommodate additional sexually violent predators committed to the Virginia Center for Behavioral Rehabilitation (VCBR). Such plan may include double-bunking dormitory-style, repurposing existing space, or the addition of new housing units at the current VCBR site. The department shall not reopen a temporary facility for the housing, confinement and treatment of civilly committed sexually violent predators at the Southside Virginia Training Center in Dinwiddie County. Further, the department shall not undertake a capital project to expand or construct additional units or facilities at a new site for the housing, confinement and treatment of these individuals until a comprehensive review of the current program for the civil commitment of sexually violent predators is completed. The Department of Corrections shall assist DBHDS in developing the plan to accommodate additional capacity and shall provide risk assessment data of the affected population. The department may make necessary capital renovations to the facility in Nottoway County to accommodate the increased capacity in order to ensure resident safety.

2. In the event that services are not available in Virginia to address the specific needs of an individual committed for treatment at the VCBR or conditionally released, or additional capacity cannot be met at the VCBR, the Commissioner is authorized to seek such services from another state.

3. Beginning on July 1, 2011, the department shall provide quarterly reports to the Governor and the Chairmen of the House Appropriations and Senate Finance Committees on the plan for the housing of additional individual committed for treatment.

The 2012 *Appropriation Act* also requires:

C-76.15 Life Safety Code and Major Mechanical Repairs: In furtherance of the provisions of Item 329 pertaining to the Virginia Center for Behavioral Rehabilitation in Nottoway County, the Secretary of Finance is authorized to transfer an amount not to exceed \$7,000,000 of the appropriation of Virginia Public Building Authority bond funds for project 17596 to a new separate subproject to be used to address capital costs related to the increased capacity, including equipment, furnishings, and renovations. With the cooperation and support of the Department of Behavioral Health and Developmental Services and the Secretary of Health and Human Resources, the Department of General Services is authorized to manage such funds transferred by the Secretary of Finance.

The last quarterly report was submitted on April 6, 2012 (Report Document 122). Since that time, notable progress with the project includes:

- All selected residential rooms are converted for double-occupancy.

- Initial design and cost estimation on converting the present kitchen from cook-chill to cafeteria service was completed. Review by the Bureau of Capital Outlay Management (BCOM) is underway. Details regarding the construction process, including contract award and project completion, are listed in the Revised Project Schedule on page 6.
- An interim foodservice model, utilizing cook-serve and serving cafeteria style, was implemented on May 7, 2012.

II. Census Factors

Beginning in 2006, DBHDS has submitted an annual forecast of census growth at VCBR to the General Assembly as the *Sexually Violent Predator Referrals, Commitments, and Bed Utilization Forecast* report, most recently submitted as Report Document No. 378 (2011). It was forecast in that document that the VCBR would reach maximum census of 300 residents by the end of 2011, but as of May 30, 2012, census stood at 291 residents. In fact, as a result of the reasons listed below, the census of persons currently in residence at VCBR has remained almost constant at 280 since July 2011. Since completion of Report Document 378, the average monthly admission rate to VCBR for the past seven months has been 5 per month. At this rate, census will reach 450 (the expanded capacity) in late 2014.

It is important to note that this number (admission rate) changes slightly based on a couple of specific factors. We know the number of cases working their way through the civil commitment process at any one time, and can generally predict how many of these will ultimately be committed to VCBR. In the last quarterly report, the rate of individuals committed to the program was expected to be 4.75 per month. This admission rate has been one of the factors responsible for reduced growth in census. Another key factor related to occupancy levels is the intermittent return of individuals from the program to either Department of Corrections or jail for felony offenses within the facility. Further, the number of discharges to conditional release has increased from 12 cases for all of 2010 to 28 for 2011, with 15 discharges occurring during the final six months. This increase in discharges is considered to be a result of the program's maturation, which has created a growing pool of discharge-eligible residents.

III. Plan for Accommodating Increases in Sexually Violent Predator (SVP) Population

The Department's goal for this project is to expand capacity at the current VCBR facility by 150 beds. This is being accomplished by:

- Retrofitting up to 150 existing single occupancy residential rooms at VCBR for double-occupancy;
- Expanding or repurposing existing space for clinical and other residential treatment and support services;
- Creating, interim food service capacity to serve until such time as new and expanded kitchen capacity comes on line at VCBR; and,
- Renovating the kitchen, warehouse, and various areas throughout the facility for additional food service capacity, program space, and staff offices.

As noted in previous quarterly reports, in compliance with Item C-76.15, project management for double-bunking at VCBR is done by DGS. A Memorandum of Understanding (MOU) was executed between DBHDS and DGS, outlining the scope of services.

Progress Update

Double-Occupancy Rooms:

- Conversion of 150 rooms from single to double-occupancy is complete. This includes:
 - Installation of a second bed above the first.
 - Installation of metal steps to assist resident access to top bunk.
 - Installation of a curtain between beds and toilet to provide privacy.
 - Installation of additional electrical outlets for use by second occupant.
 - Revision of hot water delivery to ensure sufficient hot water delivery to resident rooms.
 - Installation of additional storage space for second occupant.
 - Revision and implementation of Facility Instructions to accommodate double-occupancy rooms.
 - Recalibrating HVAC to accommodate increased demand.
- Occupancy status:
 - Beginning on March 14, 2012, the facility began assigning two residents to a room. Currently six rooms or 12 residents are double-bunked. As individuals are admitted to the program, they are double-bunked as long as they meet the criteria established for screening for appropriateness.

ADA Accessibility

- The installation of equipment and hardware for creating a full-access living unit is complete and operational. This includes:
 - Automatic door openers for patio access and, where necessary, to individual rooms;
 - Front-loading laundry equipment; and
 - The conversion of all bathrooms on the targeted living unit to accommodate individuals with physical disabilities.
- The Residential Service Associate (RSA) staff assigned to this unit has completed additional special training on meeting the special needs of this population.

Remodeling or Repurposing Existing Spaces

- Food Service Modification: As part of expanding resources to serve 150 additional residents, the food service operation is being converted from a cook-chill based system to a cook-serve cafeteria. During the renovation of the kitchen and area to serve as the cafeteria, meals are served from the space on each living unit, originally used as re-therm pantries. Beginning the first week of May, food to be delivered to each individual on that unit is plated on a modified tray line in each re-therm pantry . To accomplish this:
 - Re-Therm docking stations on all living units were removed.
 - The original re-therm spaces were rewired to power portable hot and cold well food serving units.
 - Food preparation shifted from cook-chill tray preparation to dispensing bulk food for delivery and serving on each living unit.
 - Kitchen personnel shifted to a 12-hour shift basis.
 - Resident workers are now participating in meal delivery. This will ultimately reduce the need to increase the number of paid FTE food service workers as was originally planned for the bed expansion . As this transformation is completed,

this will result in personnel cost savings for the VCBR.

As kitchen staff will now interact with residents, a new training and qualification process has been introduced. This training includes teaching staff how to use the Therapeutic Options for Virginia (TOVA) behavior management model, and other behavioral skill sets. Over half of all food service personnel have received this training to date.

The full project schedule developed by DGS and DBHDS is outlined in the chart below

**KITCHEN REMODEL, NEW CAFETERIA, KITCHEN WAREHOUSE MODIFICATION
REVISED PROJECT SCHEDULE**

TASK	TARGET DATE	STATUS
Develop and implement plan for double-bunking and project phasing.	August 15 to September 15, 2011	Complete
Schematic Design	September 15, 2011 to December 15, 2011	Complete
BCOM Review	December 15, 2011 to January 15, 2012	Complete
Preliminary Design	January 15, 2012 to April 15, 2012	In progress
BCOM Review of Preliminary Design and Cost Estimates	March 15, 2012 to June 30, 2012	In progress
Authorization to Proceed to working drawings	May 30, 2012 to July 31, 2012	In progress
A/E Contract Issuance & Construction Document	June 30, 2012 to September 30, 2012	
BCOM Review of working drawings	September 30, 2012 to October 30, 2012	
Public Advertisement	November 15 to 25, 2012	
Award Notice To Proceed	December 15, 2012	
Construction Period	January to December 2013	

V. Risk Assessment and Other Considerations

Risk assessments are conducted of the environment as well as review of individual residents on a regular basis to minimize conflict between residents in the facility. There have been no unusual incidents related to double-bunking.

VI. PPEA to Consider Privatization

DBHDS has been evaluating the two unsolicited proposals to consider privatizing operation of the VCBR facility and program. The process was completed in June and a final recommendation will be submitted to the Secretary of Health and Human Resources by June 30, 2012.