

2015 ANNUAL EXECUTIVE SUMMARY
of the Activity and Work of the
STATE BOARD of
BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES



TO THE GOVERNOR AND GENERAL ASSEMBLY

JANUARY 1, 2016

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COMMONWEALTH of VIRGINIA
DEPARTMENT OF
BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES
Post Office Box 1797

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January 1, 2016

The Honorable Terry R. McAuliffe
Governor of Virginia
Patrick Henry Building
P.O. Box 1475
Richmond, Virginia 23218

Dear Governor McAuliffe:

I am writing on behalf of the State Board of Behavioral Health and Developmental Services. The purpose of this letter is to provide a copy of the Annual Executive Summary submitted to the Governor and the General Assembly in accordance with subsection E of § 37.2-200 of the *Code of Virginia*.

The membership of the Board includes individuals who have received services, family members of people with disabilities, a local elected official, a psychiatrist and citizens at large. We feel it is important to make the case that, of all the demands presented each year for state support, the needs of Virginians with mental health or substance use disorders or intellectual or developmental disabilities and their families are particularly important and deserving of increased resources.

In 2015, the Board visited Eastern State Hospital, Colonial Behavioral Health, Region Ten CSB, and St. Joseph's Villa Children's Crisis Stabilization Center. Through these visits and reports from the DBHDS Commissioner, we heard presentations on the Hancock Geriatric Center, Certified Community Behavioral Health Clinics, Waiver Redesign, the DOJ Settlement, system transformation efforts, and changes to the involuntary commitment process. The Board would like to thank Interim Commissioner Barber, DBHDS staff, the Legislature, and your administration for your hard work to transform our behavioral health and developmental services system into one that serves all Virginians.

For the coming biennium, the board endorsed as its own priorities the following areas:

- Provide substantial funding for mental health outpatient assessment and treatment to allow citizens to receive more timely services;
- Initiate rapid change of the ID/DD waiver redesign as proposed. This would allow for an increase of services through an assessment of specific needs rather than a "broad array of services" based on the current system;
- Increase the funding for the Program for Assertive Community Treatment (PACT) to establish teams throughout the Commonwealth. This will assist in keeping individuals in the community and reducing the number of facility beds needed for care. Funding also needs to address the regions of the state that have difficulty staffing these programs;

- Support efforts for Virginia to develop Certified Community Behavioral Health Clinics;
- Expand housing assistance to support individuals in more integrated settings in the community;
- Increase relationships with other agencies to reduce redundancy in programs. Have the DBHDS establish MOUs with DVS, DPH, DOC and Courts. The formation of "TEAMS" from these alignments will assist in education for suicide prevention, transition of individuals from DOC/Courts to assist in the early release of individuals in jails/prisons with mental health and substance use conditions;
- Increase education of Mental Health First Aid programs in schools, government agencies, primary care providers, jails, and other community programs; and
- Expand substance abuse services.

The board urges that behavioral health and developmental services priorities remain in the forefront of all those issues before the legislature as we move into the New Year. If there are helpful ways we might highlight the need for these services, we are eager to support such efforts.

Sincerely,



Paula Mitchell
Chair

Cc: The Honorable Thomas K. Norment
The Honorable William J. Howell
The Honorable William A. Hazel Jr., MD
Members, State Board of Behavioral Health and Developmental Services
Joe Flores
Jack Barber, M.D, Interim-Commissioner, DBHDS

TABLE OF CONTENTS

<i>Introduction</i>	5
<i>Board Membership</i>	5
<i>Review of Statutory Authority</i>	6
<i>FY 2015 Accomplishments</i>	8
<i>Area of Responsibility-A: Policy Development and Monitoring</i>	8
<i>Area of Responsibility-B: Ensure the Development of Programs and Plans</i>	8
<i>Area of Responsibility-C: Review and Comment on All Budgets and Requests</i>	8
<i>Area of Responsibility-D: Adopt Regulations</i>	8
<i>Area of Responsibility-E: Communication, Coordination & Collaboration</i>	9
<i>Summary and Next Steps</i>	9
<i>Appendices</i>	10
<i>Appendix A: List of Current State Board Policies</i>	10
<i>Appendix B: 2014 Annual Regulatory Status Report</i>	12
<i>Appendix C: 2016 Meeting Schedule</i>	13

Information about the Board can be found at this link:

<http://www.dbhds.virginia.gov/about-dbhds/boards-and-councils/stateboardofbhds>

INTRODUCTION

Board Membership

The State Board of Behavioral Health and Developmental Services is established by § 37.2-200 of the *Code of Virginia* as a policy board in the executive branch of Virginia government. Citizen board members are appointed by the Governor and subject to confirmation by the General Assembly. Terms are for four years each, except appointments to fill vacancies. Members may be reappointed; however, no member may serve more than two full four-year terms.

The Board held four meetings in 2015 to effectively address policy, regulatory, and systems change issues as follows:

April 14, Williamsburg
July 15-16, Richmond
October 9, Charlottesville
December 8, Richmond

Board membership consists of nine non-legislative citizen members. The Board is required to have individuals receiving services and family members, one elected local government official, one psychiatrist licensed to practice in Virginia, and four citizens at large. The current membership of the Board meets the statutory criteria and is constituted as follows:

Gretta Doering, Winchester;
Sandra A. Hermann, Virginia Beach;
Calendria Jones, Richmond;
Thomas J. Kirkup, Henrico;
Paula N. Mitchell, Roanoke, Chair;
Dr. James S. Reinhard, Blacksburg;
Sandra Price-Stroble, Harrisonburg
The Hon. Amelia Ross-Hammond, Virginia Beach; and
Anthony W. Soltys, Hampton, Vice-Chair.

The current Board membership consists of individuals who have been appointed as early as 2009, with the last appointments in 2015.

Review of Statutory Authority

State Board of Behavioral Health and Developmental Services (§ 37.2-200).

- A. The State Board of Behavioral Health and Developmental Services is established as a policy board ...in the executive branch of government.
- D. ...The Board shall meet quarterly and at such other times as it deems proper. ...The meetings of the Board shall be held at the call of the chairman or whenever the majority of the members so request....
- E. The chairman of the Board shall submit to the Governor and the General Assembly an annual executive summary of the activity and work of the Board no later than the first day of each regular session of the General Assembly.

Classification of executive branch boards, commissions and councils (§2.2-2100).

"Policy" - A board, commission or council shall be classified as policy if it is specifically charged by statute to promulgate public policies or regulations. It may also be charged with adjudicating violations of those policies or regulations. Specific functions of the board, commission or council may include, but are not limited to, rate setting, distributing federal funds, and adjudicating regulatory or statutory violations, but each power shall be enumerated by law. Policy boards, commissions or councils are not responsible for supervising agencies or employing personnel. They may review and comment on agency budget requests.

Powers and duties of the Board (§ 37.2-203).

1. To develop and establish programmatic and fiscal policies governing the operation of state hospitals, training centers, community services boards, and behavioral health authorities;
2. To ensure the development of long-range programs and plans for mental health, developmental, and substance abuse services provided by the Department, community services boards, and behavioral health authorities;
3. To review and comment on all budgets and requests for appropriations for the Department prior to their submission to the Governor and on all applications for federal funds;
4. To monitor the activities of the Department and its effectiveness in implementing the policies of the Board;
5. To advise the Governor, Commissioner, and General Assembly on matters relating to mental health, developmental, and substance abuse services;
6. To adopt regulations that may be necessary to carry out the provisions of this title and other laws of the Commonwealth administered by the Commissioner or the Department;
7. To ensure the development of programs to educate citizens about and elicit public support for the activities of the Department, community services boards, and behavioral health authorities;
8. To ensure that the Department assumes the responsibility for providing for education and training of school-age individuals receiving services in state facilities, pursuant to § [37.2-312](#); and
9. To change the names of state facilities.

Additional Responsibilities (State Board of BHDS Bylaws Article 6 – Powers and duties of the Board).

The Board shall appoint members of the State Human Rights Committee pursuant to §37.2-204 of the Code of Virginia. The Board may appoint other advisory councils or committees, as it deems necessary or appropriate.

FY 2015 ACCOMPLISHMENTS

The Board utilizes a framework of five areas of statutory responsibility as an organizational structure for planning.

Area of Responsibility-A: Policy Development and Monitoring (Powers & Duties 1 & 4)

These duties are addressed by the Board's Policy Development and Evaluation Committee through the State Board Policy 2010 (ADM ST BD) 88-2 Policy Development and Evaluation. All Board policies are accessible online (<http://www.dbhds.virginia.gov/about-dbhds/boards-and-councils/stateboardofbhds>). See the list of current State Board policies with the last review date attached as Appendix A.

In 2015, the Board reviewed the following policies:

- 1036(SYS)05-3 Vision Statement
- 4010(CSB)83-6 Local Match Requirements for Community Services Boards
- 1021(SYS)87-9 Core Services
- 1015(SYS)86-22 Services for Individuals with Co-occurring Disorders

Area of Responsibility-B: Ensure the Development of Programs and Plans (Powers & Duties 2)

Section § 37.2-315 of the *Code of Virginia* directs the Department to produce and biennially update a comprehensive six year plan that identifies services and supports needs of individuals with mental health or substance use disorders or intellectual disability; proposes strategies to meet those needs; and defines resource requirements for behavioral health and developmental services. The Comprehensive State Plan is developed in odd-numbered years to inform the agency's biennial budget submission. The Department is currently working to restructure the comprehensive six year plan.

Area of Responsibility-C: Review and Comment on All Budgets and Requests (Powers & Duties 3)

The Board Bylaws (*Article 7 – Committees, A.2.b. Planning and Budget Committee Powers and Duties*) states that the Planning and Budget review Committee shall ensure development of Board long-range plans and budgets. In addition, the Board's Grant Review Committee, exists specifically to review requests for federal grant funds. In September 2010, the Board adopted POLICY 2010 (ADM ST BD) 10-1 *Review and Comment on Behavioral Health and Developmental Services Budget Priorities* (formerly Policy 6001(FIN) 86-1). The Board heard a presentation about Agency budget submissions at its December meeting. Comments on these submissions are included in the cover letter to this report.

Area of Responsibility-D: Adopt Regulations (Powers & Duties 6)

These duties are addressed by the full Board. See the list of regulatory actions in Appendix B Status and Pending Action on Board Regulations.

Area of Responsibility-E: Communication, Coordination and Collaboration (Powers & Duties 5,7,8,9 & Art.6 b)

These duties are addressed by the entire Board. Within the DBHDS system, members of the Board attend meetings in different localities, and serve as liaisons to regions. The Board received information on its stated priorities. In order to address and fulfill its duties and responsibilities, it continued revision of current policies, and maintained internal mechanisms to ensure appropriate levels of engagement and information were in place for all areas of Board responsibility.

Board members maintained contact with and informed their area's respective legislators and local government officials of pressing issues and concerns. New assignments of liaison areas were reviewed as new board members were appointed. Members also have representation on the Prevention and Promotion Advisory Council (PPAC), State Human Rights Committee (SHRC), and Behavioral Health Planning Council.

SUMMARY AND NEXT STEPS

The Board will continue to work with staff and other interested individuals to identify relevant issues that it should address in policy in the future, in conjunction with ongoing review of all existing policies on a scheduled basis.

Appendix A: List of Current State Board Policies (April 2015)

Six Year Review Schedule

<u>Policy Number</u>	<u>Policy Name</u>	<u>Last Review Date</u>	<u>Next Scheduled Review Due</u>
#1000 (SYS) --- SYSTEM MISSION AND DIRECTION			
1004(SYS)83-7	Prevention Services	7/23/14	July 2020
1007(SYS)86-2	Behavioral Health and Developmental Services for Children and Adolescents and Their Families	12/8/09	Fall 2015
1008(SYS)86-3	Services for Older Adults with Mental Illness, Mental Retardation, or Substance Use Disorders	7/23/2013	Summer 2019
1010(SYS)86-7	Board Role in the Development of the Department's Comprehensive State Plan for Mental Health, Mental Retardation and Substance Abuse Services	4/3/07	July 2020
1015(SYS)86-22	Services for Individuals with Co-occurring Disorders	4/7/09	Spring 2015
1016(SYS)86-23	Policy Goal of the Commonwealth for a Comprehensive, Community-Based System of Services	12/4/12	Fall 2018
1021(SYS)87-9	Core Services	12/2/08	Spring 2015
1023(SYS)89-1	Workforce Cultural and Linguistic Competency	6/3/08	July 2020
1028(SYS)90-1	Human Resource Development	4/27/11	Spring 2017
1030(SYS)90-3	Consistent Collection and Utilization of Data in State Facilities and Community Services Boards	4/9/2013	Spring 2019
1034(SYS)05-1	Partnership Agreement	12/4/12	Fall 2018
1035(SYS)05-2	Single Point of Entry and Case Management Services	7/23/13	Summer 2019
1036(SYS)05-3	Vision Statement	12/4/12	Fall 2018
1038(SYS)06-1	The Safety Net of Public Services	12/6/13	Fall 2019
1039(SYS)06-2	Availability of Minimum Core Services	7/23/2013	Summer 2019
1040(SYS)06-3	Consumer and Family Member Involvement and Participation	7/23/2013	Summer 2019
1041(SYS)06-4	Services for Individuals with Mental Illnesses, Mental Retardation, or Substance Use Disorders Who are at Imminent Risk of Becoming Involved with the Criminal Justice System	12/6/13	Fall 2019
1042(SYS)07-1	Primary Health Care	12/6/13	Fall 2019
1043(SYS)08-1	Disaster Preparedness	7/23/14	July 2020
1044(SYS)12-1	Employment First	12/4/12	Fall 2018

Table continued next page....

#2000 (ADM ST BD) --- ADMINISTRATION			
2012 (ADM ST BD) 10-1	Policy Review and Comment on BHDS Budget Priorities (6001(FIN)86-1)	9/14/10	Fall 2016
2010(ADM)88-2	Policy Development and Evaluation- RESCINDED?	4/7/06	April 2014
2011(ADM)88-3	Naming of Buildings, Rooms and Other Areas at State Facilities	12/6/11	Fall 2017
#3000 (C O) --- CENTRAL OFFICE			
3000(CO)74-10	Department Employee Appointments to Community Services Boards	12/6/11	Fall 2017
#4000 (CSB) --- COMMUNITY SERVICES BOARDS/COMMUNITY PROGRAMS			
4010(CSB)83-6	Local Match Requirements for Community Services Boards	10/7/08	Spring 2015
4018(CSB)86-9	Community Services Board Performance Contracts	10/7/08	Spring 2015
4023(CSB)86-24	Housing Supports	9/14/10	Fall 2016
4037(CSB)91-2	Early Intervention Services for Infants and Toddlers with Disabilities and Their Families	12/8/09	Fall 2015
4038(CSB)94-1	Department and CSB Roles in Providing Services to Children Under the Comprehensive Services Act for At-Risk Youth and Families	12/8/09	Fall 2015
#5000 (FAC) --- STATE MENTAL HEALTH AND MENTAL RETARDATION FACILITIES			
5006(FAC)86-29	Razing of Dilapidated Buildings	12/6/11	Fall 2017
5008(FAC)87-12	Accreditation/Certification	12/6/11	Fall 2017
5010(FAC)00-1	State Facility Uniform Clinical and Operational Policies and Procedures	9/14/10	Fall 2016
#6000 (FIN) --- FINANCIAL MANAGEMENT			
6005(FIN)94-2	Retention of Unspent State Funds by Community Services Boards	7/26/11	Summer 2017

Appendix B: 2015 Annual Regulatory Status Report (December 2015)

2015 ACTION TAKEN

DBHDS Regulatory Actions

VAC Number	Title	Purpose	Regulations in Process		Last Activity
			Stage	Status	
12 VAC 35-240	Victims of Sterilization Fund Program Promulgate a new regulation governing compensation to victims of forced sterilization	To provide compensation to individuals who were victims of forced sterilization pursuant to the Virginia Eugenic Sterilization Act and who were living as of February 1, 2015.	Emergency/NOIRA	Submitted to the Registrar and awaiting publication (12/14/2015).	12/14/2015

Other Regulatory Actions

VAC CITATION	TITLE	PURPOSE	REGULATIONS IN PROCESS		LAST ACTIVITY
			Stage	Status	
12 VAC 35-225	Part C Requirements for Virginia's Early Intervention System	To ensure that a system of appropriate early intervention services are available to all eligible infants and toddlers with disabilities	Fast-Track.	Governor's office review in progress.	

Appendix C: 2016 Meeting Schedule

State Board of Behavioral Health and Developmental Services

2016 MEETING SCHEDULE

April 2016

July 2016

October 2016

December 2016