



Joint Subcommittee to Study Mental Health Services in the 21st Century

July 15, 2021, at 1:00 p.m.

Pocahontas Building, Senate Committee Room A

http://dls.virginia.gov/interim_studies_MHS.html

The Joint Subcommittee to Study Mental Health Services in the 21st Century (the Joint Subcommittee) met with Senator R. Creigh Deeds, chair, presiding.¹ The meeting began with introductions and opening remarks followed by presentations and discussion. Materials presented at the meeting are accessible through the [Joint Subcommittee's webpage](#).

Presentation: Update on State Hospital Bed Census and DBHDS Initiatives

Alison Land, FACHE, Commissioner, Department of Behavioral Health and Developmental Services (DBHDS)

Commissioner Land began her presentation with an update on the state hospital bed census crisis. Recently, facility closures and several incidents resulting in serious injury have led to a decrease in census numbers. Commissioner Land noted that these injurious incidents have also resulted in the loss of contracted staff, either because those workers left before their contracts expired or did not renew expiring contracts. To address this shortage, Commissioner Land said DBHDS is currently utilizing its reserve fund to offer employee bonuses and fund the hiring of out-of-state contractors to staff Virginia facilities. She also explained that the two primary causes of staff exodus are safety and mandatory overtime policies.

Additionally, five out of eight adult state hospitals have closed admissions temporarily to reduce bed capacity. She noted that these closures will not result in unsafe discharges but added that the affected state hospitals will not be accepting any new admissions until staffing numbers rise to safer levels. The Joint Subcommittee members addressed the issue of hospital closures at length and were primarily concerned with the role of community hospitals and community services boards in assisting with this crisis.

Commissioner Land outlined DBHDS's proposals for the use of American Rescue Plan Act funds, adding that the proposals focus on four main areas: (i) growing equity, data, workforce, and quality; (ii) building community capacity; (iii) addressing capital and COVID-19; and (iv) resolving the state hospital staffing and census crisis. DBHDS's requests and dollar amounts can be found in the meeting materials on the Joint Subcommittee's webpage.

Discussion: LEO-TDO/ECO Work Group Recommendations

Senator T. Montgomery Mason reviewed the recommendations for consideration offered by the Law-Enforcement Officer-Temporary Detention Order/Emergency Custody Order (LEO-TDO/ECO) Work Group (the Work Group). The recommendations were as follows:

¹ **Members Present:** Senator R. Creigh Deeds (chair), Delegate Robert B. Bell (vice-chair), Senator Emmett W. Hanger, Jr., Senator T. Montgomery Mason, Delegate Patrick A. Hope, Delegate Marcia Price, Delegate Margaret B. Ransone, Delegate Mark D. Sickles, Delegate Vivian E. Watts

Members Absent: Senator George L. Barker, Senator Janet D. Howell, Delegate Nick Rush

1. Provide funding for clinical staffing and law enforcement at existing Crisis Intervention Team Assessment Centers (CITACs) to allow existing CITACs to fully meet local demand;
2. Provide funding to up to five existing CITACs to establish regional receiving centers by expanding the scope of services to include medical and psychiatric services, peer services, and case management;
3. Provide funding to DBHDS to add and retain staff at state hospitals;
4. Provide funding for private behavioral health facilities to staff beds at facilities that are currently licensed but not staffed;
5. Provide funding to incentivize private behavioral health facilities to open more units or modify existing units to accept more challenging patients, including patients with a history of aggressive behavior or patients with complex medical needs, directly or as a step-down from DBHDS facilities;
6. Explore options for reducing the impact of the forensic population on availability of beds for individuals involved in the temporary detention order (TDO) or civil commitment process, including establishing designated forensic-only facilities that are separate from facilities that provide services for individuals who are subject to a TDO or are civilly committed;
7. Incentivize private hospitals to provide security necessary to allow a law-enforcement officer to transfer to the facility custody of individuals who are subject to a TDO and then return to work;
8. Expand the contract with G4S, the company currently contracted to provide alternative transportation to individuals in the involuntary commitment process, to provide security to allow law-enforcement officers to transfer to the facility at which an evaluation will be performed custody of individuals who are subject to a TDO and then return to work; and
9. Provide funding to localities to cover the cost of overtime pay for deputies who remain with individuals who are subject to a TDO until a bed is available.

More details about these recommendations can be found in the meeting materials on the Joint Subcommittee's webpage.

After some discussion, there was a motion and second to pass all of the recommendations. The members of the Joint Subcommittee voted, and the motion was passed.

Public Comment

The Joint Subcommittee members then heard public testimony. Anna Mendez commented that none of the Work Group's recommendations address funding services to keep short-term, acute patients out of state facilities to assist with the census crisis. Patrick Halpern of the New River Valley Crisis Intervention Team, addressing comments that had been made during the presentations, noted that community services boards have been seeing patients in person since March. Jennifer Faison stated that community services boards are facing the same workforce shortage challenges as state hospitals.

Dr. Heather Zelle addressed two of the Work Group's recommendations, noting that patients with complex medical needs should not be hospitalized in state facilities because those facilities are



not equipped to handle such medical needs. Dr. Zelle recommended looking into how other states handle these types of patients and possibly extending the emergency custody order period. No date was set for the next meeting of the Joint Subcommittee.

For more information, see the [*Joint Subcommittee's webpage*](#) or contact the Division of Legislative Services staff:

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