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

June 5, 2018, Central State Hospital, Petersburg Meeting Summary

Members Present: Senator Deeds (Chair), Delegate Bell (Vice-Chair), Senator Barker, Senator Cosgrove, Senator Hanger, Senator Howell, Delegate Hope, Delegate Ransone, Delegate Watts.

The Joint Subcommittee to Study Mental Health Services in the Commonwealth in the 21st Century (the Joint Subcommittee) held its third meeting of the 2018 interim on June 5, 2018, at Central State Hospital in Petersburg, Virginia. Upon convening, the Joint Subcommittee immediately recessed to allow Work Group 2 (Jail Diversion) to meet. Following adjournment of the Work Group 2 meeting, the Joint Subcommittee reconvened.

Discussion of Tour of Central State Hospital

Prior to the meeting, members of the Joint Subcommittee toured Central State Hospital. Following opening remarks, the Joint Subcommittee discussed the tour. Members noted the need to consider the therapeutic appropriateness of state hospital facilities, including the distance between residential areas of the facility and areas in which treatment is provided, as well as the burden created by the need to create and maintain paper records rather than electronic health records. Members also noted the absence of video monitoring of areas of the facility and the need to consider the need for and appropriateness of video monitoring in state hospitals.

<u>Presentation: Update on Budget Items Related to Mental Health Services; Mike Tweedy, Legislative Fiscal Analyst, Virginia Senate Finance Committee</u>

Mr. Tweedy provided information on items affecting mental health services included in the 2018–2020 biennial budget. He reported that the General Assembly included \$11.2 million in FY 2019 and \$21.9 million in FY 2020 for community behavioral health services for implementation of STEP-VA, including \$7.5 million in each year for same-day access at 22 community services boards (CSBs) that had not yet implemented same-day access, \$15 million in FY 2020 for outpatient services at CSBs, \$3.7 million in FY 2019 and \$7.4 million in FY 2020 for primary care screenings at CSBs, and \$2 million in FY 2020 for detoxification services at CSBs. Other community behavioral health services funded in the biennial budget include permanent supportive housing for up to 200 adults with serious mental illness and 75 pregnant women, alternative transportation for individuals subject to temporary detention orders, additional Discharge Assistance Planning (DAP) funds to pay for services for 92 individuals, funding for medication-assisted treatment for individuals with substance use disorder, funding for development of appropriate housing options to address issues related to state hospital capacity, funding for jail discharge planning, a tele-mental health pilot program, CIT assessment sites for six rural unserved communities, CIT training for six rural communities, and Intercept 2 diversion programs in three rural communities. Mr. Tweedy also reported on budget items providing funding for the Commonwealth's behavioral health facilities, including funding to implement electronic health records at all state facilities, additional funding to increase salaries for direct service associates employed at state facilities, expansion of Western State Hospital, temporary beds at the Piedmont Geriatric facility for Virginia Center for Behavioral Rehabilitation (VCBR)

residents, funding for the first phase of expansion at VCBR, funding for hepatitis C treatment for residents at VCBR, and additional funding to support monitoring of individuals conditionally released from VCBR.

At the end of the presentation, members of the Joint Subcommittee discussed issues related to improving existing behavioral health facilities, including shortening the timeline for investment in existing facilities and extending the time period for emergency custody orders to address pressure on state hospitals required to accept individuals subject to temporary detention orders when no alternative treatment option can be found.

Public comment

Rhonda Thissen, Executive Director of NAMI Virginia, spoke about the need to address mental health treatment of individuals in prisons as well as individuals in jails and concerns around the use of solitary confinement.

A member of the public whose spouse has been a patient at Central State Hospital stated concerns about the treatment of individuals receiving services at state facilities, including the use of isolation, the need for individualized treatment for individuals receiving services, the need for diversion and CIT programs for individuals accused of felonies as well as misdemeanors, and the need to ensure that law-enforcement officers are trained to identify and interact with individuals with mental illness.

Future Meetings

At the end of the meeting, Senator Deeds announced that future meetings of the Joint Subcommittee would be held at various state hospitals around the Commonwealth. Dates for future meetings will be announced as they are determined.