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HOUSE BILL NO. 968

Offered January 24, 2000

A BILL to amend and reenact § 37.1-197.1 of the Code of Virginia, relating to prescription teams.

Patron—DeBoer

Referred to Committee on Health, Welfare and Institutions

Be it enacted by the General Assembly of Virginia:

1. That § 37.1-197.1 of the Code of Virginia is amended and reenacted as follows:

§ 37.1-197.1. Prescription team; prescreening; predischarge planning. A. In order to provide comprehensive mental health, mental retardation and substance abuse services within a continuum of care, the operating community services board, administrative policy board or local government department with a policy-advisory board shall function as the single point of entry into the publicly funded mental health, mental retardation and substance abuse services system and shall fulfill the following responsibilities:

- 1. Establish and coordinate the operation of a prescription team that shall be composed of representatives from the operating community services board, administrative policy board or local government department with a policy-advisory board, social services or public welfare department, health department, Department of Rehabilitative Services office serving in the community services board's area and, as appropriate, the social services staff of the state institution(s) serving the community services board's catchment area and the local school division. Such other human resources agency personnel may serve on the team as the team deems necessary. The team, under the direction of the operating community services board, administrative policy board or the local government department with a policy-advisory board, shall be responsible for integrating the community services necessary to accomplish effective prescreening and predischarge planning for consumers referred to the operating community services board, administrative policy community services board, or local government department with a policy-advisory board. When prescreening reports are required by the court on an emergency basis pursuant to § 37.1-67.3, the team may designate one team member to develop the report for the court and report thereafter to the team.
- 2. Provide prescreening services prior to the admission for treatment pursuant to § 37.1-65 or § 37.1-67.3 of any person who requires emergency mental health services while in a political subdivision served by the operating community services board, administrative policy board or local government department with a policy-advisory board.
- 3. Provide, in consultation with the appropriate state mental health facility or training center, predischarge planning for any person who, prior to admission, resided in a political subdivision served by the operating community services board, administrative policy board, or local government department with a policy-advisory board or who chooses to reside after hospitalization in a political subdivision served by the board, and who is to be released from a state mental health facility or training center pursuant to § 37.1-98. The predischarge plan shall be completed prior to the person's discharge. The plan shall be prepared with the involvement and participation of the consumer or his representative and must reflect the consumer's preferences to the greatest extent possible. The plan shall include the mental health, mental retardation, substance abuse, social, educational, medical, employment, housing, legal, advocacy, transportation, and other services that the consumer will need upon discharge into the community and identify the public or private agencies that have agreed to provide them.
- 4. No person shall be discharged from a state mental health facility or training center without completion by the operating board, administrative policy board, or local government department with a policy-advisory board of the predischarge plan described in subdivision 3 of this subsection. If state facility staff identify a patient or resident as ready for discharge and the operating board, administrative policy board, or local government department with a policy-advisory board that is responsible for the person's care disagrees, the operating board, administrative policy board or local government department with a policy-advisory board shall document in the treatment plan within thirty days of such person's identification any reasons for not accepting the person for discharge. If the state facility disagrees with the operating board, administrative policy board, or local government department with a policy-advisory board and the operating board, administrative policy board, or local government department with a policy-advisory board refuses to develop a predischarge plan to accept the person back into the community, the state facility or the operating board, administrative policy board, or local government department with a policy-advisory board shall request the Commissioner to review the state facility's determination that the person is ready for discharge in accordance with procedures established in the

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HB968 2 of 2

performance contract. If the Commissioner determines that the person is ready for discharge, a predischarge plan shall be developed by the Department to ensure the availability of adequate services for the consumer and the protection of the community. The Commissioner shall also verify that sufficient state-controlled funds have been allocated to the operating board, administrative policy board, or local government department with a policy-advisory board through the performance contract. If sufficient state-controlled funds have been allocated, the Commissioner may contract with a private provider or another operating board, administrative policy board, or local government department with a policy-advisory board to deliver the services specified in the predischarge plan and withhold funds allocated applicable to that consumer's predischarge plan from the operating board, administrative policy board, or local government department with a policy-advisory board in accordance with § 37.1-198 C and E. However, no state funds shall be expended for residential services in political subdivisions where such would cause the proportion of persons receiving residential services in that political subdivision to the total population of that political subdivision to be greater than the proportion of persons receiving residential services in the Commonwealth.

B. The operating community services board, administrative policy board, or local government department with a policy-advisory board may perform the functions set out in subdivision A 1, regarding the prescription team, in the case of children by referring consumers who are minors to the locality's family assessment and planning team and by cooperating with the community policy and management team in the coordination of services for troubled youths and their families. The operating board, administrative policy board, or local government department with a policy-advisory board may involve the family assessment and planning team and the community policy and management team, but it remains responsible for performing the functions set out in subdivisions A 2 and A 3 in the case of

children.