

SENATE JOINT RESOLUTION NO. 478

Directing the Joint Subcommittee Evaluating the Future Delivery of Publicly Funded Mental Health, Mental Retardation and Substance Abuse Services, in consultation with the Hammond Commission on Community Services and In-Patient Care, to review the recommendations by the Joint Legislative Audit and Review Commission regarding the Comprehensive Services Act (CSA) and identify potential uses of existing mental health and mental retardation facilities for children and families in need of CSA services.

Agreed to by the Senate, February 4, 1999

Agreed to by the House of Delegates, February 25, 1999

WHEREAS, according to a 1998 report by the Joint Legislative Audit and Review Commission, Virginia in 1992 was among the first states to develop, fund, and implement a statewide comprehensive system of care for children with emotional and behavioral problems; and

WHEREAS, that report indicated that over the last two decades an increasing number of children are developing severe mental, emotional, and social problems which thwart their development as productive adults; and

WHEREAS, many of these at-risk children share common problems, including dysfunctional families in which they are subject to varying forms of abuse, neighborhoods lacking positive role models, and failure at school because of truancy, conduct problems and learning disabilities; and

WHEREAS, with the advent of the Comprehensive Services Act (CSA), a new delivery system for at-risk youth was established that identified multiple funding streams, consolidated them into a single pool of funds, and mandated local service coordination among human service agencies which then had greater flexibility to develop treatment plans and use community-based services; and

WHEREAS, when CSA was first implemented in 1994, the program was expected to lower costs but instead the total cost has continued to increase at an annual rate of 17.6 percent; and

WHEREAS, one of the reasons for some of this growth is the reliance upon expensive, private and out-of-state child placements when there are no appropriate programs available in the Commonwealth; and

WHEREAS, with the development and enhancement of community mental health, mental retardation and substance abuse services as recommended by the Hammond Commission on Community Services and In-Patient Care and the Joint Subcommittee Evaluating the Future Delivery of Publicly Funded Mental Health, Mental Retardation and Substance Abuse Services pursuant to House Joint Resolution No. 225 (1998), it is anticipated that at least portions of some public facilities will be available for alternative uses as patients are discharged into the community; and

WHEREAS, it is inherent upon the Commonwealth to determine the most efficacious use of this property; now, therefore, be it

RESOLVED by the Senate, the House of Delegates concurring, That the Joint Subcommittee Evaluating the Future Delivery of Publicly Funded Mental Health, Mental Retardation and Substance Abuse Services, in consultation with the Hammond Commission on Community Services and In-Patient Care, be directed to review the recommendations made by the Joint Legislative Audit and Review Commission and identify potential uses for existing mental health and mental retardation facility properties for children and families in need of CSA services. The joint subcommittee shall specifically examine the feasibility of using such facilities as regional treatment centers for children who are eligible for treatment under CSA and their families.

The joint subcommittee shall include its findings and recommendations in its report submitted pursuant to House Joint Resolution No. 225 (1998) to the Governor and the 2000 Session of the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents.

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