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## HOUSE JOINT RESOLUTION NO. 682

Offered January 13, 2011

*Directing the Joint Commission on Health Care to study involuntary admission of persons in need of substance abuse treatment in the Commonwealth. Report.*

Patrons—O'Bannon, Carr, Cox, M.K., Ingram, Janis, Loupassi, Robinson and Ware, R.L.

Referred to Committee on Rules

WHEREAS, in 2006, the National Survey on Drug Use and Health found that an estimated 517,000 Virginians ages 12 and older, or approximately 8.38 percent of Virginians ages 12 and older, abused either alcohol or illicit drugs or both in 2006; and

WHEREAS, in that same year, nearly 1,800 Virginians died from conditions related to substance abuse; and

WHEREAS, individuals who abuse substances or who are addicted to substances may not be willing or able to seek treatment on their own; and

WHEREAS, laws of the Commonwealth provide for emergency custody, involuntary temporary detention, and involuntary admission for treatment of persons with mental illness; and

WHEREAS, the Code of Virginia states that, for the purpose of statutes governing emergency custody, involuntary temporary detention, and involuntary admission, the term "mental illness" includes substance abuse; and

WHEREAS, emergency custody, involuntary temporary detention, and involuntary admission, where appropriate, may provide a mechanism for ensuring that persons with substance abuse or addiction disorders receive treatment necessary to address their substance use and protect their health and safety and the health and safety of others; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Joint Commission on Health Care be directed to study involuntary admission of persons in need of substance abuse treatment in the Commonwealth.

In conducting its study, the Joint Commission on Health Care shall (i) determine whether procedures for emergency custody, involuntary temporary detention, and involuntary admission for treatment are currently being used to commit persons with substance abuse or addiction disorders whose substance use creates a substantial likelihood that the person will cause serious physical harm to himself or others or suffer serious harm due to his lack of capacity to protect himself from harm or to provide for his basic human needs; (ii) if involuntary admission procedures are not being used for such purpose, determine whether individuals with substance abuse or addiction disorders might benefit from use of emergency custody, involuntary temporary detention, and involuntary admission procedures when statutory criteria are met; and (iii) if use of involuntary commitment procedures are found to offer potential benefits for persons with substance abuse or addiction disorders, provide recommendations for increasing the use of such procedures to protect the health and safety of individuals with substance abuse or addiction disorders and other residents of the Commonwealth.

All agencies of the Commonwealth shall provide assistance to the Joint Commission on Health Care for this study, upon request.

The Joint Commission on Health Care shall complete its meetings by November 30, 2011, and the Chairman shall submit to the Division of Legislative Automated Systems an executive summary of its findings and recommendations no later than the first day of the 2012 Regular Session of the General Assembly. The executive summary shall state whether the Joint Commission on Health Care intends to submit to the General Assembly and the Governor a report of its findings and recommendations for publication as a House or Senate document. The executive summary and report shall be submitted as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents and reports and shall be posted on the General Assembly's website.

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