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# COMMONWEALTH OF VIRGINIA



## OFFICE OF THE GOVERNOR

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### **Executive Order No. 68 (2013)**

#### **Governor's Task Force On Improving Mental Health Services and Crisis Response**

##### **Importance of the Initiative**

Over the years, including the events of April 16, 2007, Virginians have experienced tremendous heartache as a result of mental health tragedies. In response to the events at Virginia Tech, then-Governor Kaine, the General Assembly and I, as Attorney General, drew on work done by the Virginia Tech Review Panel and the Commission on Mental Health Law Reform to study and investigate the tragedy to strengthen the civil commitment process through legislation so individuals with serious mental illness can receive needed help in a timely manner. The 2008 budget also included an infusion of funds to build core community services such as emergency services, case management and outpatient commitment. Unfortunately, many of these gains were lost as a result of the economic downturn.

Since that time, the General Assembly and I have worked together to bring targeted and impactful investments in community mental health services to help meet critical needs. These services include children's crisis response services, crisis intervention team (CIT) programs, secure assessment centers, child psychiatry and hospital discharge supports. Many of these investments were recommended through the Governor's Taskforce on School and Campus Safety in response to the tragedy at Sandy Hook Elementary School. These services are intended to prevent a developing crisis from escalating and connect individuals currently experiencing a crisis to appropriate services. While these programs and services are indeed demonstrating their effectiveness, we have recently seen that we must continue to find measures to assure the safety of persons suffering mental health crises along with their families, neighbors, and members of the community.

Virginia's mental health system has transformed toward a community based system for individuals to receive treatment in their homes and community as appropriate. The mental health system is extremely complex and difficult to navigate for families seeking assistance and for workers within the system. Though state law helps guide the process, practices and services are determined locally and therefore vary across the Commonwealth. The mental health system for emergency services is

dependent upon cooperation and communication from a variety of partners, including community services boards, law enforcement, the judicial system and private hospitals. Effective collaboration among these many parties ensures the most favorable outcomes for people in crisis. While emergency mental health services work for most people, it is critical that the mental health safety net responds effectively to all individuals and families in crisis.

It is now time to improve our understanding of the issues facing our mental health system in order to seek solutions. Because the system is multifaceted, the solutions must be as well.

While bolstering our ability to respond to mental health crises when they occur, we must seek ways to intervene early and prevent crises from developing. When interventions occur before mental illness becomes debilitating, people find treatment more manageable and the outcome can be sustained for longer periods. Virginia already has such crisis prevention services in place, such as outpatient psychiatric consultation, suicide prevention psychiatric medication treatment plans and rehabilitation services. However, these services are in high demand, and are not consistently available across the commonwealth.

Through this Executive Order, I am calling for leaders in the mental health field, law enforcement communities, the judicial system, private hospitals, and individuals receiving mental health services and their families to seek and recommend solutions that will improve Virginia's mental health crisis services and help prevent crises from developing.

This group must rely on two principles based on numerous studies: that individuals with mental health disorders are not a greater threat to the community than anyone else unless drugs or alcohol are involved, and that even those with the most serious mental illnesses can recover to manage their symptoms and lead productive lives. Nevertheless, should they experience a mental health crisis, our duty is to connect them with needed services immediately to help ensure their safety and the safety of those around them.

Truly improving Virginia's mental health system requires easing the difficult navigation through laws and procedures and facilitating the tremendous need to collaborate among many partners. It also involves reducing the frequency and intensity of acute mental health emergencies through crisis prevention services.

To accomplish this, in accordance with the authority vested in me by Article V of the Constitution of Virginia and by § 2.2-134 of the *Code of Virginia*, I hereby create the Governor's Task Force on Improving Mental Health Services and Crisis Response.

### **Governor's Task Force on Improving Mental Health Services and Crisis Response**

The Task Force's responsibilities shall include the following:

- Recommend refinements and clarifications of protocols and procedures for community services boards, state hospital, law enforcements and receiving hospitals.
- Review for possible expansion of the programs and services that assure prompt response to individuals in mental health crises and their families such as emergency services teams, law enforcement crisis intervention teams (CIT), secure assessment centers, mobile crisis teams, crisis stabilization centers and mental health first aid.
- Examine possible extensions or adjustments to the emergency custody order and the temporary detention order period.
- Explore technological resources and capabilities, equipment, training and procedures to maximize the use of telepsychiatry.

- Examine the cooperation that exists between the courts, law enforcement and mental health systems in communities that have incorporated crisis intervention teams and cross systems mapping.
- Assess the availability of psychiatric beds in Virginia, the assessment process hospitals use to select which patients are appropriate for those beds, and to explore whether psychiatric bed registries and/or census management teams improve the process for locating beds.
- Review for possible expansion those services that will provide ongoing support for individuals with mental illness and reduce the frequency and intensity of mental health crises. These services may include rapid, consistent access to outpatient treatment and psychiatric services, as well as critical supportive services such as wrap-around stabilizing services, peer support services, programs of assertive community treatment, housing, employment and case management.
- Recommend legislative and budget proposals that will enable implementation of the above.
- Recommend how families and friends of a loved one facing a mental health crisis can be taught to improve the environment and safety of an individual in crisis.
- Examine workforce development activities and recommend any improvements to ensure an adequate mental health workforce.

### **Task Force Membership**

The Task Force shall be co-chaired by the Secretary of Health and Human Resources and the Secretary of Public Safety.

Membership shall include the following individuals or representatives:

- The Attorney General of Virginia or his representative;
- Chief Justice of the Supreme Court of Virginia or her representative;
- Commissioner of the Department of Behavioral Health and Developmental Services;
- Commissioner of the Department of Social Services;
- Superintendent of the Virginia State Police;
- At least three community services board emergency services directors;
- At least three law enforcement officers, including at least one sheriff;
- At least two executive directors of community services boards;
- At least two magistrates;
- At least two private hospital emergency department physicians;
- At least two psychiatrists;
- At least one representative of a state mental health facility;

- At least two representatives from Virginia's private hospital system;
- At least two individuals receiving mental health services;
- At least two family members of individuals receiving services; and
- Two members of the House of Delegates and the Senate of Virginia.

The Governor may appoint other members as he deems necessary.

### **Task Force Staffing and Funding**

Necessary staff support for the Task Force's work during its existence shall be furnished by the Office of the Governor, the Office of the Attorney General, and the Offices of the Secretary of Health and Human Resources and the Secretary of Public Safety, as well as such other agencies and offices as designated by the Governor. An estimated 250 hours of staff time will be required to support the work of the Task Force.

Necessary funding to support the Commission and its staff shall be provided from federal funds, private contributions, and state funds appropriated for the same purposes as the Task Force, as authorized by Section 2.2-135 of the *Code of Virginia*, as well as any other private sources of funding that may be identified. Estimated direct costs for this Commission are \$1,000.00 per year.

The Task Force shall commence its work promptly and send initial recommendations no later than January 31, 2014. The Task Force shall make additional recommendations on an ongoing basis and shall provide a final report to the Governor no later than October 1, 2014. The Task Force shall issue such other reports and recommendations as necessary or as requested by the Governor.

### **Effective Date of the Executive Order**

This Executive Order shall be effective upon signing and pursuant to § 2.2-135 of the *Code of Virginia* shall remain in force and effect for one year from its signing unless amended or rescinded by further executive order.

Given under my hand and under the Seal of the Commonwealth of Virginia, this 10th day of December, 2013.

**/s/ Robert F. McDonnell, Governor**

**Attest:**

**/s/ Secretary of the Commonwealth**