

THE VIRGINIA BOARD OF CORRECTIONS

The Virginia Board of Corrections (Board) met on Wednesday, June 24, 2020 by **TELECONFERENCE** to Discuss Minimum Standards for Behavioral Health Services in Local Correctional Facilities

BOARD MEMBERS PRESENT: The Honorable Vernie W. Francis, Jr., Chairman
Bobby Vassar, Vice Chairman
John F. Anderson, Jr., Secretary
William T. Dean
Olivia Garland, PhD
Heather Masters, M.D., S.F.H.M., F.A.C.P.
Karen Nicely, LPC
Reverend Kevin L. Sykes

BOARD COUNSEL: Phillip Figura, Office of the Attorney General

ATTENDEES: Jacquelyn Katuin, Secretary of Public Safety Office
Emmanuel Fontenot, Virginia Department of Corrections
Robyn deSocio, Compensation Board
Tawana Ferguson, Virginia Department of Corrections
Timothy Trent, Blue Ridge Regional Jail
Amber Hostetter, Middle River Regional Jail
Robin Marshall, Middle River Regional Jail
Renee Walker, Department of Behavioral Health & Development Services
Michelle Lewis, Department of Behavioral Health & Development Services
Amy Dameron, Northern Neck Regional Jail
Katie Boyle, Virginia Association of Counties
Janet Areson, Virginia Municipal League
Gregory Winston, New River Valley Regional Jail
Tricia Oliver

BOARD ATTENDANCE ROLL CALL:

John F. Anderson, Jr.	Yay
William T. Dean	Yay
Vernie, W. Francis, Jr.	Yay
Dr. Olivia Garland	Yay

Dr. Heather Masters	Yay
Karen Nicely	Yay
Reverend Kevin Sykes	Yay
Bobby Vassar	Yay

Charles Jett	Absent
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8 Board members in attendance, one **ABSENT – Quorum Present**

Chairman Vernie Francis called the meeting to order with the following:

As you know, the Governor declared a state of emergency in effect until June 10, 2020 because of the potential spread of COVID-19, a communicable disease of public health threat and the anticipated effects of that spread. Given this threat, the Board cannot assemble in person because of the need for social distancing for a prolonged period of time. The work of the Board*

As you may know, Governor Northam amended the state budget to include the use of electronic meetings in HB30 (Chapter 1289) Section 4-0.01 It provides that this Board may conduct a public electronic meeting during a state of emergency if: “(i) the nature of the declared emergency makes it impracticable or unsafe for the public body or governing board to assemble in a single location; [and] (ii) the purpose of the meeting is to discuss or transact the business statutorily required.” The law requires that this Board “shall make available a recording or transcript of the meeting on its website ...and... Distribute minutes of a meeting.”

The purpose of the meeting is to take action on certain minimum standards for behavioral health as mandated by law. In light of this, I’ll entertain a MOTION with respect to this Emergency Electronic Meeting.

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MOTION: Mr. Chairman I MOVE that this Board conduct an Emergency Electronic Meeting to take action on certain minimum standards for behavioral health as mandated by law. I ALSO MOVE that this Board recognize that the Governor declared a state of emergency which remains in effect because of the potential spread of COVID-19, a communicable disease of public health threat, and the anticipated effects of that spread. I FURTHER MOVE that the Board FIND that because of this threat, the Board cannot assemble in person because of the need for social distancing for a prolonged period of time. Finally Mr. Chairman, I MOVE that this Board FIND that an electronic meeting in the midst of this state of emergency is not only permissible, it is necessary

Motion read by Chairman Francis, Made by Bobby Vassar and Seconded by Olivia Garland

ROLL CALL VOTE:

John F. Anderson, Jr.	Yay
William T. Dean	Yay
Vernie, W. Francis, Jr.	Yay
Dr. Olivia Garland	Yay
Dr. Heather Masters	Yay
Karen Nicely	Yay
Reverend Kevin Sykes	Yay
Bobby Vassar	Yay

8 Votes in **FAVOR** of the **MOTION**, one **ABSENT** – **MOTION CARRIES**

That motion being carried unanimously among attendees we can begin this Electronic Meeting.

Chairman Francis asked for a motion to approve the April 10th, 2020 minutes.

Motion made by John Anderson, Jr., seconded by Dr. Olivia Garland.

ROLL CALL VOTE:

John F. Anderson, Jr.	Yay
William T. Dean	Yay
Vernie, W. Francis, Jr.	Yay
Dr. Olivia Garland	Yay
Dr. Heather Masters	Yey
Karen Nicely	Yay
Reverend Kevin Sykes	Yay
Bobby Vassar	Yay

8 Votes in **FAVOR** of the **MOTION**, one **ABSENT** – **MOTION CARRIES**

Mr. Fontenot provided a summary of the administrative process for the attendees, stating that an agency coordinator would put the regulation into the regulatory process. The Behavioral Health standards would be added to 6VAC-15-40 as a revision. Rebecca Hancock has offered to assist the Board with this process. She offered to check to see if these revisions can be fast-tracked

through to Notice of Regulatory Action process. Ms. Hancock advised that protests can derail fast-track quickly and requires the process to begin over. There is a three step process for the standard regulatory action. The code would then be amended. Ms. Hancock will update the Board on time requirements and assist to ensure the revisions are completed. Chairman Francis advised that the standard process could require as long as three years to complete. The fiscal impact is under review by the Department of Criminal Justice Services and the Compensation Board to review costs associated with the Behavioral Health standards.

Chairman Francis opened the floor to Dr. Garland to discuss the proposed Behavioral Health standards.

Dr. Garland thanked the Chairman and said she would reference the PowerPoint presentation that she sent to Board members (Attached) including her comments added in red. She noted that the majority of the standards are well crafted and only has a few concerns. During the work group sessions, the jail administrators were primarily concerned with financial impacts, a very legitimate concern. The work group concentrated on creating the standards, not having the time required to consider fiscal impacts. Discussion of the legislation requiring these standards is the introduction to the PowerPoint-House Bill 1942 sponsored by Robert Bell.

Dr. Michael Schaefer wrote the basics of the standards, which require annual inspections of each facility. The advisory group met multiple times basing these standards on standards by the American Correctional Association and the National Commission on Health Care Standards. Each standard include Compliance Indicators

Standard 1-Access to Care

CI (Compliance Indicator) 2 – add Community Services Boards;
CI 3 – The reports are required by the legislature to be posted on the website;

Standard 2 – Policies and Procedures

No recommendations;

Standard 3 – Communication of Inmates' Needs

CI 2 – "...healthcare providers, **Community Services Boards** and....";

Standard 4 – Mental Health Training for Correctional Officers

CI 5 – Crisis Intervention Team (CIT) as an example –Further guidance from DBHDS (Department of Behavioral Health and Developmental Services) – training through CSBs?;
CI 6 – add After Action Reviews for deaths and near death events;

Standard 5 – Medication Services

CI 2 – Determination of “timely” should be clarified in facility policy and procedure;

CI 5 – Strike...”in a timely fashion”;

CI 8 – review wording;

CI 9 – strike;

Standard 6 – Mental Health Screening

CI 4 – add ”...which has been designed by DBHDS,”;

Standard 7 – Mental Health Assessment

The Compliance Indicators will be rearranged into a more appropriate order by urgency and need.

CI 3 – Suicide Watch is an urgent 1st step;

CI 8 – codify;

Standard 8 – Emergency Services

No recommendations;

Standard 9 – Restrictive Housing

No recommendations;

Standard 10 – Continuity and Coordination of Mental Health Care During Incarceration

CI 1 – review pending;

CI 7 – review pending, removal possible;

CI 10 – review pending;

Standard 11 – Discharge Planning

CI 3-c – “Transportation assistance...as resources are available.” sentence review pending;

Standard 12 – Primary Mental Health Services

No recommendations;

Standard 13 – Suicide Prevention Program

The facility identifies ~~suicidal~~ **at risk for suicide** inmates and intervenes appropriately.;

CI 1-d – add “the facility ensure”;

e – Add “Must receive” assessment.....Name who will assess;

CI 2-l – Add “after action review”;

Standard 14 – Identification and Treatment of Substance Abuse Disorders

CI 5 – review pending;

Standard 15 – Management of Intoxication & Withdrawal and Overdose

CI 2 – Protocol review frequency;

CI 4 – Add escalation protocol if symptoms can no longer be managed safely in the facility.

Dr. Garland will work with Ms. Nicely and Dr. Masters to review standards. There may be more or less changes than recommended in these minutes. The crosswalk references current standards when applicable. The committee asked all facilities to participate in a voluntary survey to help determine approximate costs and estimated costs based on facility size for nonparticipants. Their estimate for resources necessary to meet the Behavioral Health standards is \$42.6 million.

Chairman Francis advised the members that there were 246 applicants for the Policy Analyst position. Interviews will be held soon. He added that he hopes the Board can have another meeting in the near future.

Chairman Francis said that this concludes the purpose of this meeting. He thanked everyone for their time. Asking for a motion, Mr. Vassar moved and Mr. Anderson seconded.

Chairman Francis offered the following in the form of a motion:

I MOVE that the meeting be adjourned.

ROLL CALL VOTE:

John F. Anderson, Jr.	Yay
William T. Dean	Yay
Vernie, W. Francis, Jr.	Yay
Dr. Olivia Garland	Yay
Dr. Heather Masters	Yay
Karen Nicely	Yay
Reverend Kevin Sykes	Yay
Bobby Vassar	Yay

8 Votes in **FAVOR** of the **MOTION**, one **ABSENT** – **MOTION CARRIES**

Adjourned