



COMMONWEALTH OF VIRGINIA  
*Virginia Board for People with Disabilities*


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TO: Holly Mortlock, Policy Director  
Policy & Public Affairs Division  
Dept. of Behavioral Health & Developmental Services

FROM: Heidi L. Lawyer 

RE: State Board of Behavioral Health and Developmental Disabilities POLICY 1007 (SYS) 86-2,  
BEHAVIORAL HEALTH AND DEVELOPMENTAL SERVICES FOR CHILDREN AND ADOLESCENTS AND THEIR  
FAMILIES

On behalf of the Virginia Board for People with Disabilities (the Board), thank you for the opportunity to provide comment on the field review of the above referenced policy.

- The Background section should be updated to include studies and reports that have been completed since this policy was last updated in 2009.
- The State Board should consider whether it is appropriate to change references to intellectual disability to developmental disability in light of the ID/DD waiver redesign.
- References to Policy 4037, Early Intervention, are included and reference services available to infants and toddlers from birth to 2. In Virginia Part C services are available to infants and toddlers birth to 3.
- The State Board should consider updating the language "mental health" to behavioral health consistent with the name of the department and other policies and documents.
- Under the Policy section, # 5, we recommend using language consistent with the ADA as interpreted by the Supreme Court in its *Olmstead* decision. The ADA requires that services are provided in the most integrated setting appropriate to the child's needs. We recommend removing the references to child welfare and public safety needs which

are subjective. The language “most appropriate to the child’s needs” will take this into account.

- Under Policy, section, #6, the definition of surrogate families is unclear in terms of who would be included.
- Under Policy section, #7, we recommend that you add gender identify and sexual orientation, and change spoken language to mode of communication.

In the Policy section on Page 4, following the numerical listing, we recommend that the following:

- Strengthen the language regarding transition into home and community-based settings by referencing the CMS Final Rule on Integrated settings and the state’s requirements under the ADA and Olmstead.
- We also recommend that the language that the “CSBs, shall, whenever possible provide care coordination to ensure consistent access to services and to increase community-based services alternatives to prevent out of home placements” be similar strengthened to reflect federal requirements, and the state’s progress in these areas.

Under the final Policy section on page 4

- Reference should be made to CSBs now being the single point of entry for services for all children with developmental disabilities.
- The reference to expanding training center support options for families of children and young adults should be eliminated, and language should clearly indicate the importance of serving children and adolescents in their homes, or if that is not possible, in their communities close to family.
- References to employment opportunities should mention the Commonwealth’s Employment First policy as well as work with schools and the importance of transition planning at an early age.
- The Policy should be updated to reflect recent changes to the program both in the background section and as they relate to program implementation at the state and local level. There have been significant changes to the Part C program in the last 7 years since this policy was last updated in December 2009, including development of the Medicaid Early Intervention Program which now serves a significant number of children.
- Agency references should be updated to reflect current names (DARS, OCS).
- The bullet point on development and implementation of an automated information system may need to be updated to reflect actual developments over the last 7 years.

Thank you for the opportunity to comment on this policy during the policy review process. We look forward to the 2<sup>nd</sup> field review that reflect updates determined appropriate by the State Board.