

DBHDS

Virginia Department of
**Behavioral Health and
Developmental Services**

Virginia's Sexually Violent Predator Program and the Virginia Center for Behavioral Rehabilitation

House Appropriations Committee
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Sexually Violent Predators (SVP) Civil Commitment Mandate

1998 – GA created a system of screening, evaluating and treating persons found to be SVP:

- Convicted of a SVP predicate crime or found Unrestorably Incompetent to Stand Trial for same.
- Found to score at or above the qualifying threshold on the RRASOR.
- Evaluated by DBHDS, processed by the Commitment Review Committee, taken to trial for commitment by OAG, and found by the court to meet the SVP criteria.
- Committed to DBHDS Commissioner for treatment. The goal of psycho-social treatment program is to reduce the re-offense risk of residents.

SVP Secure Care

- **2003** – GA directed DBHDS to construct and operate a secure facility for the control, care, and treatment of persons found SVP. DBHDS converted existing facilities at SVTC to temporarily house the Virginia Center for Behavioral Rehabilitation (VCBR).
- **2006** – GA expanded the list of SVP qualifying crimes, increasing the number of persons becoming eligible for SVP civil commitment and changed the actuarial screening instrument from the RRASOR to the Static-99.
- **2008** – DBHDS opened the new 300 bed VCBR, \$62M SVP facility in Burkeville in Nottoway County.

Current List of Predicate Crimes

| | |
|------------------|--|
| 18-54 | Rape, 1950 Code |
| 18.1-44 | Rape, 1950 Code |
| 18.2-31 (5) | Capital Murder with sexual assault |
| 18.2-61 | Rape |
| 18.2-67.1 | Forcible Sodomy |
| 18.2-67.2 | Object Sexual Penetration |
| 18.2-48 (ii) | Abduction with sexual intent |
| 18.2-48 (iii) | Abduction of a child < 16 with intent for concubinage or prostitution |
| 18.2-63 | Carnal Knowledge of child, 13 to 15 year old |
| 18.2-64.1 | Carnal Knowledge of minor in care by caregiver |
| 18.2-67.3 | Aggravated Sexual Battery |
| 18.2-31 (1) | Capital Murder in commission of abduction with intent to defile |
| 18.2-32 | 1st or 2nd degree murder when present with intent to rape, forcible sodomy or inanimate or animate object sexual penetration |
| | Forcible sexual offense committed prior to July 1, 1981 that constitutes forcible sodomy, object sexual penetration or aggravated sexual battery |
| | With conspiracy or attempt to commit or attempt any of the above offenses |

**Distribution of convictions for predicate crimes among
residents civilly committed to VCBR**

| Predicate Crime Description | Predicate Crime | Attempt/ Conspire | Total | % |
|---|------------------------|------------------------------|--------------|----------|
| Rape, 1950 Code | 0 | 0 | 0 | 0% |
| Rape, 1950 Code | 0 | 0 | 0 | 0% |
| Capital Murder with Sexual Assault | 1 | 0 | 1 | .3% |
| Rape* | 73 | 22 | 95 | 25.5% |
| Forcible Sodomy* | 71 | 4 | 75 | 20.1% |
| Object Sexual Penetration* | 10 | 0 | 10 | 2.6% |
| Abduction with sexual intent | 23 | 0 | 23 | 6.2% |
| Abduction of a child <16 with intent for concubinage or prostitution | 0 | 0 | 0 | 0% |
| Carnal Knowledge of child 13 to 15 | 20 | 0 | 20 | 5.4% |
| Carnal Knowledge of minor in care by caregiver | 1 | 0 | 1 | .3% |
| Aggravated Sexual Battery* | 144 | 2 | 146 | 39.3% |
| Capital Murder in commission of abduction with intent to defile | 0 | 0 | 0 | 0% |
| 1st or 2nd degree murder when present with intent to rape, forcible sodomy or object sexual penetration | 1 | 0 | 1 | .3% |

Demographic Breakdown of Individuals committed to VCBR

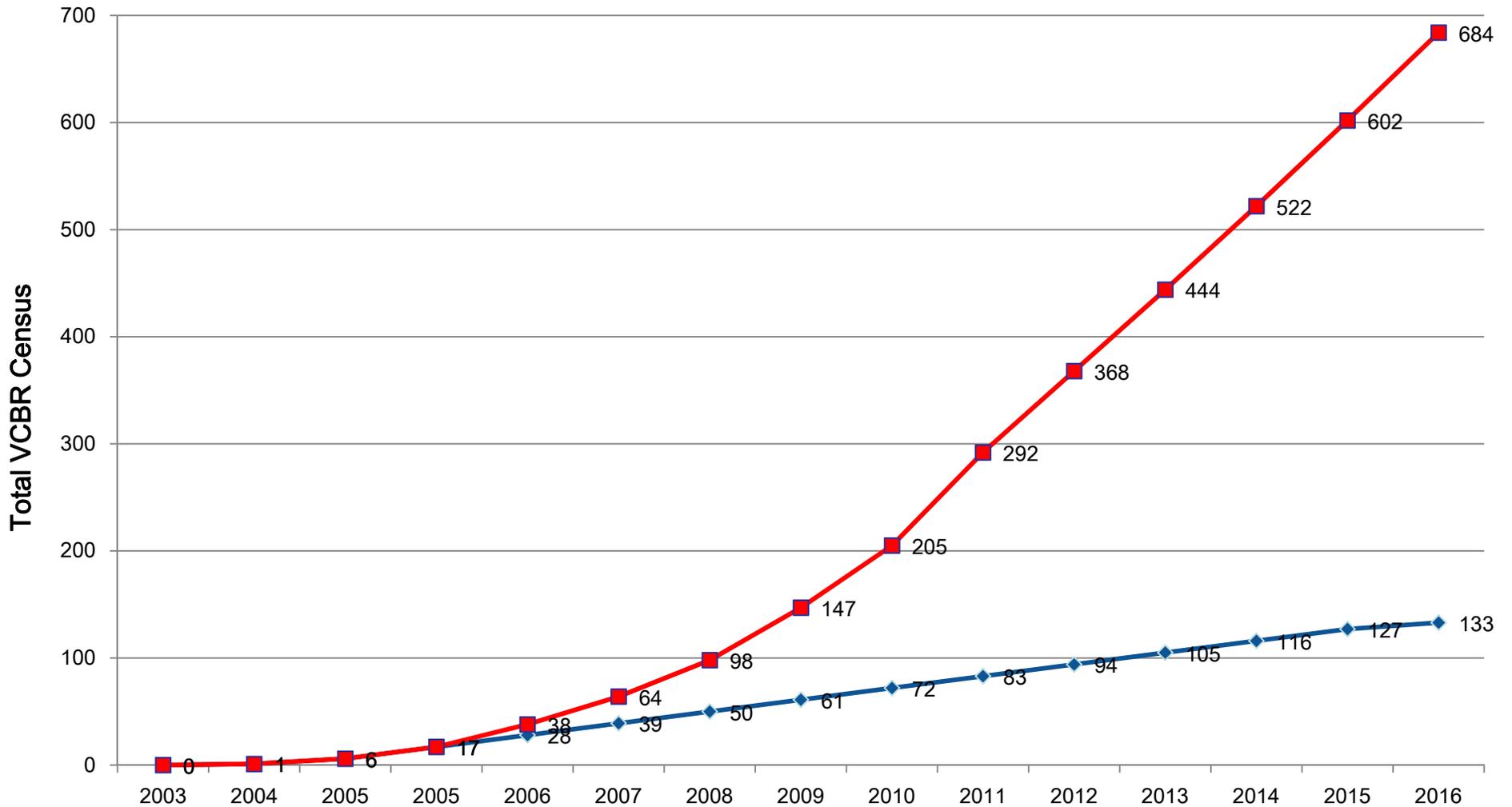
| AGES | |
|-------|-----|
| 20-29 | 11% |
| 30-39 | 24% |
| 40-49 | 36% |
| 50-59 | 23% |
| 60-73 | 6% |

| RACE | |
|---------------------------|-----|
| White/Caucasian | 48% |
| Black/African American | 51% |
| Other | 1% |

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Projected Commitment Rate to VCBR



Blue = Pre-2006

Red = Post-2006

VCBR Census Projection

VCBR is currently funded and staffed at 200 beds. As of 12/30/10, there were 243 individuals at VCBR. The census is expected to be 300 by late summer/early fall 2011 and will reach 684 in FY16.

| SVP Program Estimated Census | End of FY10 | End of FY11 | End of FY12 |
|---|------------------------|------------------------|------------------------|
| Total persons found SVP | 212 males | 354 males | 427 males |
| | 2 female | 2 females | 3 females |
| Total persons at VCBR | 201 | 284 | 356 |

VCBR Appropriations

| Fiscal Year | Staff | Appropriation |
|--------------------|--------------|----------------------|
| 2004 | 61 | \$2,731,438 |
| 2005 | 69 | \$4,157,793 |
| 2006 | 91 | \$5,397,523 |
| 2007 | 126 | \$6,327,545 |
| 2008 | 178 | \$10,687,680 |
| 2009 | 243 | \$14,951,965 |
| 2010 | 297 | \$17,343,462 |

VCBR Staffing Requirements

| Date | VCBR Census | Positions/FTEs |
|---------------------------|------------------------|-----------------------|
| Jan. 2011 | 248 | 442 |
| July 2011 | 284 | 500 |
| Jan. 2012 | 320 | 610 |
| TOTAL July 2012 | 356 | 640 |

VCBR Operating Cost Estimate

| Facility Budget - VCBR | FY2011 | FY2012 | Annualized |
|-------------------------------|------------------------|------------------------|----------------------|
| Census | From 212 to 284 | From 284 to 356 | For 356 beds |
| Staffing Costs | \$ 19,536,721 | \$ 26,148,335 | \$ 28,703,000 |
| Special Hospitalization | \$ 1,150,000 | \$ 1,521,600 | \$ 1,521,600 |
| Food Costs | \$ 1,025,479 | \$ 1,384,397 | \$ 2,304,000 |
| Drug Costs | \$ 525,000 | \$ 680,000 | \$ 782,239 |
| Pharmacy Staff | \$ 220,000 | \$ 290,000 | \$ 290,000 |
| Utilities | \$ 600,000 | \$ 800,000 | \$ 800,000 |
| Others | \$ 1,000,000 | \$ 1,000,000 | \$ 1,200,000 |
| Reopen @ SVTC | | \$ 207,000 | |
| Total | \$ 24,057,451 | \$ 31,824,332 | \$ 35,600,839 |
| Existing Budget | \$ 15,743,277 | \$ 15,743,277 | |
| Add'l Funding Needs | \$ 8,314,174 | \$ 16,081,055 | |

DBHDS Office of SVP Program

The SVP Office manages evaluations for admission, training of VCBR staff, and the conditional release program. Staffing must reflect increasing caseload.

| | FY10 | FY11 | FY12 |
|---|-------------|-------------|-------------|
| Evaluations | 165 | 185 | 187 |
| Total conditional releases from VCBR | 7 | 12 | 18 |
| Total person on SVP conditional release | 36 | 55 | 75 |

DBHDS Office of SVP Programs Cost Estimate

| Community Budget | FY2011 | FY2012 |
|---------------------------------|----------------------|----------------------|
| Census | From 34 to 55 | From 55 to 75 |
| Conditional Release | \$ 346,043 | \$ 553,000 |
| Evaluation | \$ 602,700 | \$ 602,700 |
| Training, travel, & others | \$ 20,000 | \$ 40,000 |
| Total | \$ 968,743 | \$ 1,195,700 |
| Existing Budget | \$ 776,019 | \$ 776,019 |
| Additional Funding Needs | \$ 192,724 | \$ 419,681 |

Addressing Over-Capacity

Two actions will help address over-capacity issues at VCBR-Burkeville:

- 1) Re-open 48-bed former temporary VCBR on the Petersburg Behavioral Health campus
- 2) Open a new, dual-purposed 300-bed facility
 - The new facility's main function would be a "step-down" from VCBR-Burkeville to transition those who are responding well to treatment before they are ready for strictly monitored conditional release to their home communities.
 - Also would be an intensive-security unit for those that resist or refuse to participate in treatment and are a disruptive element in the treatment venue. They would reside in a separate unit designed for more intensive security and control while continuing to offer treatment.

Building Option 1

OPTION 1: Repurposing the existing physical plant at the closed Brunswick Correctional Center

- A number of existing buildings on this site will not be used. Because the repurposing process will not require their demolition, these costs are eliminated from the present estimate.
- The existing food service building was designed for DOC and based on the availability of a large inmate work force being paid less than one dollar an hour. Because the DBHDS operates under different regulations, resident labor must be paid minimum wage, making the present labor intensive kitchen complex unusable. Instead, part of the existing dining facility will be converted to handle storage and distribution of cook-chill meal services.
- Meals, in bulk form, will be prepared by the kitchen at DBHDS Petersburg and delivered to Brunswick.
- The construction of the warehouse facility targeted for repurposing as a residential living is such that minimum demolition will be required.
- Existing buildings can be updated for administrative, treatment programming, educational, vocational, and medical space.

Options 2 and 3

OPTION 2: Expansion onto land next to or near the temporary SVP facility in Petersburg

- This site will require the demolition of several existing buildings to clear sufficient land for the construction of a new facility.
- Food service will be cook-chill and provided by DBHDS Petersburg.
- Construction of the new facility can be phased in with demolition of existing buildings.
- Better recruitment of staff.
- Existing sewer and water availability

OPTION 3: Expansion onto land close to the VCBR facility in Nottoway

- No land is presently available for this project. Land purchase price is unknown.
- Construction of a food service facility is included in this option to serve the existing VCBR facility, and the Piedmont Geriatric Hospital.
- Public sewer and water at this site are of insufficient capacity to meet the needs of an additional 300 bed facility.

Cost and Timeline

Estimated capital and operating costs of each option:

| | Repurposing of Brunswick | Petersburg Complex | New Construction |
|--|--------------------------|--------------------|------------------|
| Capital Costs | \$45,000,000 | \$65,000,000 | \$71,000,000 |
| Operational Costs | 33,750,000 | 22,500,000 | 22,500,000 |
| Estimated time from funding to occupancy | 24 – 30 months | 30 to 36 months | 30 to 36 months |

Construction time for these options ranges between 18 and 36 months.

Projected Operating Cost for 48- bed VCBR-Petersburg

| | FY12* | Annualized |
|-------------------------|---------------------|---------------------|
| Re-open | \$ 207,000 | |
| Staffing | \$ 3,338,635 | \$ 6,075,940 |
| Special Hospitalization | \$ 300,000 | \$ 400,000 |
| Food Costs | \$ 146,513 | \$ 362,247 |
| Drug Costs | \$ 61,765 | \$ 123,049 |
| Pharmacy staff | \$ - | \$ 100,000 |
| Utilities | \$ 150,000 | \$ 150,000 |
| others | \$ 90,000 | \$ 190,000 |
| TOTAL | \$ 4,293,913 | \$ 7,401,236 |

* Gradually increasing census and staffing

Projected Operating Cost for 300- bed VCBR-Brunswick

| | FY12 |
|-------------------------|---------------------|
| Staffing | \$24,530,540 |
| Special Hospitalization | \$600,000 |
| Food Costs | \$1,600,000 |
| Drug Costs | \$750,000 |
| Pharmacy staff | \$300,000 |
| Utilities | \$850,000 |
| Insurance | \$3,000,000 |
| Other | \$2,119,460 |
| TOTAL | \$33,750,000 |

SVP/VCBR Budget

The Governor approved a decision brief to cover the FY11 shortfall by moving the FY12 appropriation to FY11. The Governor's budget amendments include:

| Item | Total |
|---|--|
| Fund operation and expansion of staffing to serve full 300-bed capacity at VCBR-Burkeville and temporary 48-bed facility in Petersburg. | \$24.4M |
| Increase staffing levels at DBHDS to handle increased caseload of the SVP conditional release program. | \$612K |
| Provide bond authority to plan for and renovate 300-bed step-down facility. | \$43.5M bond |
| TOTAL | \$25M – GF \$43.5M – Bond |

Comparative Data

- 20 states have SVP programs including Virginia
- All are similar except Texas, Arizona and Pennsylvania – different types of commitment
- All states prefer single occupancy rooms

Other State Programs Similar to Virginia's

| State | # of residents | Operating cost per resident per year | | Projected Adm/Disc 2011 |
|-----------|----------------|--------------------------------------|------------------------|-------------------------|
| Wisconsin | 365 | \$150,000 In-patient | \$75,000 Supervised | 15/15 |
| New York | 230 | \$175,000 In-patient | \$30,000 Supervised | 40 |
| Florida | 657 | \$100,000 In-patient | | 85-100/85-100 |
| Virginia | 300 | \$91,000 In-patient | \$21,000 Supervised | 77 |

SVP Programs Nationwide

2005 data of resident per day costs show Virginia to be roughly at the national average.

| | |
|---------------|-------|
| Massachusetts | \$136 |
| Maine | \$136 |
| Florida | \$137 |
| Kansas | \$145 |
| New Jersey | \$164 |
| Illinois | \$227 |
| North Dakota | \$267 |
| Wisconsin | \$273 |
| Virginia | \$279 |
| Washington | \$289 |
| California | \$293 |
| Minnesota | \$314 |

Staffing Ratios

- Ratios are consistent with other behavioral health facilities
- The staffing levels include all staff – Admin, B&G, Food Service, Clinical Medical, Security, etc.
- The acuity and diversity of the population
 - Medically complex
 - URIST (Unrestorably Incompetent
 - Behavioral Problems

Types of Commitments

- VA's predicate offenses are not that different than other states.
- There is a difference in who we commit to the SVP program than other states
 - Other states do not admit Unrestorably Incompetent to Stand Trial (URIST)
 - Other states require a history of sexually dangerous behaviors or a pattern – more than one offense
 - Other states send MI individuals to forensic programs

Treatment for Residents

- New Leadership
- Revamping the program - best practices
- Designated treatment hours/week
- Rehabilitation and occupational therapy
- Developing an internal work program