UNIVERSITY OF VIRGINIA SCHOOL OF LAW



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To: Joint Commission on Health Care

Re: Progress Report on College Mental Health Study

Date: October 16, 2012

Dear Senator Puller and Members of the Joint Commission,

I presented the Virginia College Mental Health Study to the Joint Commission in October, 2011. Among other issues, the Task Force expressed concerns about whether the Commonwealth's community colleges currently have sufficient capacity to respond to students who appear to be experiencing mental health crises, including the expertise required for participation on threat assessment teams. Recognizing the wide variations in size and resources among the colleges, the Study urged the Community College System to consider how individual colleges and campuses might increase their capacity for screening and referral, either by adding these duties to existing positions or contracting with a CSB or other community mental health providers to provide the necessary services. The Study specifically recommended that each institution of higher education in the Commonwealth, including community colleges, enter into a memorandum of understanding with the local CSB to facilitate evaluation and referral of students who might be experiencing a mental health crisis. The Study also recommended that the Community College Board modify its policy manual to permit colleges to provide mental health evaluation and counseling services to their students if they chose to do so.

Several bills were introduced in the 2012 session to implement the recommendations set forth in the College Mental Health Study. All of these bills were enacted except for the bills -- introduced by Senator Barker and Delegate Surovell -- that were designed to address the Task Force's concerns relating to mental health capacities of community colleges. Representatives of the community colleges did not support these bills based on concerns that community colleges would eventually be required to provide mental health counseling services to their students, despite assurances that this was not the intention of the College Mental Health Study or the patrons of the respective bills. In retrospect, I believe that this misunderstanding could have been avoided if the VCCS had been given more time to review and comment on the Study before I presented it to the Joint Commission. Be that as it may, I am pleased to inform you that substantial progress has been made in reaching a consensus position since the General Assembly adjourned last spring.

First, I understand that representatives of the VCCS are meeting with Senator Barker and Delegate Surovell to work out a successor bill that will include language requiring the colleges to designate a contact person to coordinate with CSBs (or other providers) for screening and referral, one of the key recommendations of the College Mental Health Study, I also understand that representatives of the VCCS and the VACSB have already been meeting to work out these arrangements.

Second, I understand that the presidents of the community colleges are meeting this week to consider two proposed changes to the Board policy manual that would not only require designation of such a contact person to coordinate with CSBs but would also allow qualified staff at community colleges to provide initial assessments and referrals to appropriate mental health services when necessary.

As you can see, if brought to fruition, these initiatives will successfully address the two main concerns identified in the College Mental Health Study.

Sincerely,