

## POLICY MANUAL

### State Mental Health, Mental Retardation and Substance Abuse Services Board Department of Mental Health, Mental Retardation and Substance Abuse Services

#### Policy 1004 (SYS) 83-7 Prevention Services

<b>Authority</b>	Board Minutes Dated <u>July 27, 1983</u> Effective Date <u>August 24, 1983</u> Approved by Board Chairman <u>/s/ James C. Windsor</u>
<b>References</b>	§ 37.2-312.1, §37.2-500, and §37.2-602 of the <i>Code of Virginia</i> (1950), as amended Bylaws of the State Mental Health, Mental Retardation and Substance Abuse Services Board Bylaws of the Prevention and Promotion Advisory Council <i>Plan for Prevention Services, Phase I</i> (1988), <i>Phase II</i> , (1994) and <i>Phase III</i> , (2002), Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services <i>Core Service Taxonomy 7</i> , CSB Service Definitions <i>Comprehensive State Plan 2006-2012</i> Institute of Medicine. <i>Reducing Risks for Mental Disorders</i> . Washington, D.C.: National Academy Press, 1994. Woodward, Albert. (1998). <i>Overview of Methods: Cost-effectiveness, Cost-benefits, and Cost-offsets of Prevention</i> . In National Institute of Drug Abuse. <i>Cost Benefit/Cost Effectiveness Research of Drug Abuse</i> .
<b>Background</b>	<p>Prevention services are identified in §37.2-500 and §37.2-602 of the <i>Code of Virginia</i> as part of the array of core services that may be provided by community services boards or behavioral health authorities, hereinafter referred to as CSBs. Core Service Taxonomy 7 states that prevention services are designed to prevent mental illness, mental retardation, or substance use disorders. According to the Taxonomy, prevention services involve people, families, communities, and systems working together to promote their strengths and potentials. Prevention is aimed at substantially reducing the incidence of mental illness, mental retardation and substance use disorders. The emphasis is on the enhancement of protective factors and the reduction of risk factors.</p> <p>The following principles are the basis for prevention strategies in the public mental health, mental retardation, and substance abuse services system:</p>

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**Background**  
*(continued)*

- Healthy lifestyles and practices reduce the risks of future problems and disorders;
- There are effective prevention services substantiated and proven through rigorous research; and
- These prevention efforts are economically beneficial to the Commonwealth by reducing the need of individuals for treatment services in the future.

Evidence from research studies reviewed in the Institute of Medicine Study (1994), DMHMRSAS' Prevention Guidelines Phase I (1988), Phase II (1994), and Phase III (2002), and from cost-benefit and cost-effectiveness studies, indicates that some preventive measures reduce the incidence of disease and related cost of treatment, and the impact on family and the economy (Woodward, 1998).

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**Purpose**

To articulate policy and identify priorities for prevention services in the public mental health, mental retardation, and substance abuse services system and to establish the Prevention and Promotion Advisory Council (PPAC).

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**Policy**

It is the policy of the Board to promote and support effective prevention services in the public mental health, mental retardation, and substance abuse services system. The Department shall provide leadership for technical assistance and consultation about, and monitoring and evaluation of community prevention services. CSBs shall develop and implement prevention services to the greatest extent possible that enhance protective factors and reduce risk factors. These prevention efforts should involve families, communities, and public and private service systems and organizations.

Further, it is the policy of the Board that planning for prevention activities shall incorporate a community-based needs assessment. Interagency, constituency, and public-private partnerships shall be emphasized and serve as a means of gaining the widest commitment, understanding, and support for prevention activities.

It is also the policy of the Board that prevention services shall be considered in policy development and the allocation of resources for community mental health, mental retardation and substance abuse service. Prevention services shall be evidence-based or innovative and include a strong evaluation component to measure their effectiveness.

It is also the policy of the Board that statewide efforts shall continue to target prevention service priorities identified in the current Comprehensive State Plan, including the following:

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**POLICY 1004(SYS)83-7, Continued**

**Policy**

(continued)

1. Substance abuse prevention services aimed at substantially reducing the incidence of alcohol, tobacco, and other drug abuse.

Based on statewide prevention planning efforts, CSBs reported that the most significant risk factors for substance use disorders are availability of drugs, family management problems, and early initiation of problem behavior. Populations identified in need of intervention were school age youth and families. The PPAC has also identified the need to focus on prevention services for the family.

2. Suicide prevention efforts across the life span.

The General Assembly designated the Department in 2005 as the Commonwealth's lead agency for suicide prevention efforts across the life span pursuant to § 37.2-312.1 of the *Code of Virginia*. In collaboration with other Virginia agencies, the Department has developed a plan titled *Suicide Prevention Across the Lifespan for the Commonwealth of Virginia* that identifies several broad statewide objectives including prevention of death from suicide, reduction of the occurrence of other self-harmful acts, increased risk recognition and access to care.

3. Prevention of youth access to tobacco products.

The Synar Amendment to the federal Alcohol, Drug Abuse, and Mental Health Administration Reorganization Act requires that states conduct annual inspections of randomly selected tobacco retail outlets to determine how likely it is that underage youth are able to purchase tobacco products. The rate of vendor noncompliance must not exceed a previously agreed upon target rate as a condition for the receipt of federal Substance Abuse Prevention and Treatment (SAPT) Block Grant funds, which support community substance abuse treatment and prevention services

Finally, the Board shall establish the PPAC to serve as its advisory body in the formulation and review of prevention goals and policies and designate one Board member to serve as its liaison to the PPAC. The members of the PPAC shall be appointed by the Board and the PPAC shall operate under bylaws that address its:

- Objective, purpose, and responsibilities and relationship to the State Board, Department, and other appropriate organizations and agencies;
- Membership;
- Organization; and
- Meetings.

The by-laws shall be reviewed, revised as required, and submitted to the State Board by April 1 of each year for approval by the Board with an effective date of July 1 of the same year.