

Chronological History of the Virginia Department of Behavioral Health and Developmental Services

- 1773** Public Hospital for Persons of Insane and Disordered Minds (currently known as Eastern State Hospital) is established in Williamsburg, Virginia. This facility is the first in the new world designed exclusively for the treatment of people with mental illness.
- 1825** Western State Hospital is established in Staunton, Virginia.
- 1841** Public Hospital for Persons of Insane and Disordered Minds changes its name to Eastern Lunatic Asylum.
- 1858** The Virginia General Assembly approves funding for the construction of the Trans-Allegheny Lunatic Asylum in what is currently Lewis County West Virginia. This facility, later named Weston State Hospital, was officially opened in 1864 one year after West Virginia gained official statehood. Virginia demanded that unexpended balances be returned to it once the state of West Virginia was formed. West Virginia refused and used some of the unexpended balances to establish the initial West Virginia state government.
- 1869** Central State Hospital is established in Howards Grove, Virginia.
- 1885** Central State Hospital is moved to Petersburg, Virginia.
- 1887** Southwestern State Hospital (currently known as Southwestern Va. Mental Health Institute) is established in Marion, Virginia.
- 1894** Eastern Lunatic Asylum changes its name to Eastern State Hospital.
- 1909** Catawba Hospital is established near Salem, Virginia.
- 1910** The Virginia State Colony for the Epileptics and Feebleminded (currently known as Central Virginia Training Center) is established in Lynchburg, Virginia. This facility is the first in Virginia to treat individuals with intellectual disabilities.
- 1911** Separate boards are created to govern each state hospital and the state colony in Lynchburg.
- 1918** Piedmont Hospital (currently known as Piedmont Geriatric Hospital) is established near Burkeville, Virginia.
- 1924** The 1924 Virginia Eugenic Sterilization Act is enacted by the Virginia General Assembly. Sterilizations begin at certain facilities.
- 1929** DeJarnette Center is established in Staunton, Virginia.

- 1936** The first state hospital board is established. This is currently the State Board of Behavioral Health and Developmental Disabilities.
- 1939** Petersburg Colony (the former Southside Virginia Training Center) is established in Petersburg to serve African American individuals with intellectual disabilities.
- 1940** The Virginia State Colony for the Epileptics and Feebleminded changes its name to the Lynchburg State Colony.
- 1942** The Virginia Department of Mental Hygiene and Hospitals is established in Richmond, Virginia. This is the initial formation of the current department Central Office. Hugh C. Henry, MD, is appointed as the first commissioner. Daily average census for the hospitals is 14,189.
- 1946** Joseph E. Barrett, MD is appointed as the second commissioner. Daily average patient census is 13,656.
- 1954** The Lynchburg State Colony changes its name to the Lynchburg Training School and Hospital.
- 1956** The Virginia Treatment Center for Children is established in Richmond, Virginia.
- 1957** Hiram W. Davis, MD is appointed as the third commissioner. Daily average hospital census is 13,706.
- 1968** The General Assembly passes legislation allowing the establishment of community services boards.
- Northern Virginia Mental Health Institute is established in Falls Church, Virginia.
- 1969** William Allerton, MD, is appointed fourth commissioner. Daily average census is 14,501.
- 1971** The Petersburg Colony changes its name to the Petersburg Training School and Hospital.
- 1973** Northern Virginia Training Center, Southwestern Virginia Training Center and Southeastern Virginia Training Center are established in Fairfax, Hillsville and Chesapeake, respectively.
- The Department of Mental Hygiene and Hospitals changes its name to the Department of Mental Health and Mental Retardation.

1974 The Petersburg Training School and Hospital changes its name to Southside Virginia Training Center. The 1924 Virginia Eugenic Sterilization Act is repealed.

1976 The General Assembly merges the Division of Drug Abuse Control with the Bureau of Drug Rehabilitation to form the Division of Substance Abuse within the Department of Mental Health and Mental Retardation.

The Southside Mental Health and Mental Retardation Support Services Unit is formed in Petersburg. The purpose is to consolidate administrative and support services functions into one unit serving Central State Hospital, Southside Virginia Training Center and Hiram Davis Medical Center.

Leo Kirven, MD, is appointed fifth commissioner. Average daily inpatient census is 10,227.

1977 Southern Virginia Mental Health Institute is established in Danville, Virginia.

1979 Hiram Davis Medical Center is established in Petersburg, Virginia.

1980 The General Assembly amends Chapter 10 of the Code of Virginia requiring all cities and counties to establish a community services board by July 1, 1983.

1981 Joseph Bevilacqua, Ph.D., is the sixth commissioner appointed. Average daily patient census is 8,024.

1983 Statewide coverage of community services boards is achieved. Alleghany Highlands is the last of the community services boards formed.

1985 The Lynchburg Training School and Hospital changes its name to Central Virginia Training Center.

1986 Howard Cullum is appointed as the seventh commissioner. Daily average inpatient census is 6,154.

1987 The Department of Mental Health and Mental Retardation changes its name to the Department of Mental Health, Mental Retardation, and Substance Abuse Services.

1988 The General Assembly enacts a \$68 million community services initiative, the single largest infusion of state funding to the

community at that time.

The Southside Mental Health and Mental Retardation Support Unit is merged with Southside Virginia Training Center.

1990 King E. Davis, Ph.D., is appointed and is the eighth commissioner of the agency.

The geriatric unit at Western State Hospital and the adolescent Unit at Eastern State Hospital are closed and patients transferred.

Average daily patient census is 5,714.

1991 Medicaid State Plan Option and the waiver program covering the cost of services by the Medicaid program is implemented at community services boards.

The Virginia Treatment Center for Children is transferred to Virginia Commonwealth University.

1994 Timothy A. Kelly, Ph.D., is appointed as the ninth commissioner of the agency. Daily average patient census is 4,924.

1997 Richard E. Kellogg is appointed Acting Commissioner. Daily average inpatient census is 4,176.

1998 Richard E. Kellogg is appointed tenth commissioner to serve the agency. The legislative Hall-Gartlan Commission completes its work and makes significant recommendations for change to the system of publicly funded mental health, intellectual disabilities and substance use disorder services. This leads to a major rewrite of the Code of Virginia dealing with community treatment.

Daily average inpatient census is 4,048.

1999-2001 Admissions to state hospitals continue to decline. The average daily inpatient census declines from 4,048 in 1998 to 3,191 in 2001.

2001 DeJarnette Center changes its name to the Commonwealth Center for Children and Adolescents.

The General Assembly passes a resolution expressing the legislature's profound regret over the Commonwealth's involvement in the eugenics movement from 1924 until 1979.

2002 James S. Reinhard, MD, is appointed the eleventh commissioner. Daily average census is 3,342. Due to severe economic downturn, the department is required to reduce its budget by \$33.4 million in FY 2003 and \$37.3 million in 2004. Reductions affected community, facility and Central Office operations.

On the 75th anniversary of US Supreme Court's *Buck v. Bell* decision to uphold Virginia's sterilization law, Governor Warner issued a formal apology to the victims of involuntary sterilization, naming the program a "shameful effort." Virginia is the first state to apologize for involuntary eugenical sterilization.

2003 The Virginia Center for Behavioral Rehabilitation is established in Petersburg, Virginia. Its purpose is to serve persons deemed sexually violent predators who have completed their sentences in correctional facilities.

2006 New funding was provided for community initiatives and for construction related to the replacement of Eastern State Hospital, Western State Hospital, Southeastern Virginia Training Center, and Central Virginia Training Center.

Supreme Court of Virginia Chief Justice Leroy Rountree Hassell, Sr., establishes the Virginia Commission on Mental Health Law Reform.

2007 On April 16, 2007, 27 students and 5 faculty members were massacred at Virginia Tech. The gunman, a Virginia Tech student, then took his own life leaving the death toll of the tragedy at 33. In reaction to this incident, Governor Kaine appointed a commission to study the issue and make recommendations for the mental health system. This set the stage for more significant changes to the public mental health system.

2008 Construction of the Hancock Geriatric Center at Eastern State is completed and the unit begins serving geriatric patients.

Construction of the Virginia Center for Behavioral Rehabilitation is completed in Burkeville, Virginia and the facility officially opens.

2009 The Department of Mental Health, Mental Retardation, and Substance Abuse Services changes its name to the Department of Behavioral Health and Developmental Services.

Significant budget reductions take place affecting the 2009 and 2010 fiscal years. The department's budget was reduced by nearly \$100 million including 30% reductions at the Central Office.

2010 James Stewart III is appointed twelfth commissioner. Inpatient average daily census was 2,773.

2011 The work of the Commission on Mental Health Law Reform concludes.

2012 An agreement is reached between the US Department of Justice and the department to significantly downsize training centers for individuals with intellectual disabilities.

To cover the cost of community services for those leaving training centers, plans to close all but the Southeastern Virginia Training Center are put into place by the state.

2013 In November 2013, while in a mental health crisis the son of Virginia State Senator Creigh Deeds physically attacks Senator Deeds and then commits suicide. The event creates the establishment of a mental health task force to examine emergency custody orders and temporary detention order processes. The resulting legislation from these efforts leads to the "last resort" legislation. That legislation requires state hospitals to admit all patients regardless of census and leads to higher admissions rates and average daily census at mental health facilities.

Construction of the new Western State Hospital is completed.

2014 Debra Ferguson, Ph.D., becomes the thirteenth commissioner of the agency. Average daily inpatient census is 2,269.

Southside Virginia Training Center is closed after 75 years of service to Virginians with intellectual disabilities.

2015 Debra Ferguson resigns as commissioner. Jack Barber, MD, is appointed interim commissioner (fourteenth commissioner).

The 2015 Appropriation Act contains language on compensation for victims of eugenical sterilization.

2016 Northern Virginia Training Center is closed after 45 years of service to Virginians with intellectual disabilities.

2018 S. Hughes Melton, MD is appointed as the fifteenth commissioner. Average daily inpatient census is 1,982.

Southwestern Virginia Training Center is closed after 45 years of service to Virginians with intellectual disabilities.

2019 S. Hughes Melton, MD, dies in a fatal automobile crash in August 2019. Mira Signer is appointed as Acting Commissioner. Inpatient census is 1,944. The agency continues to be challenged by mental health facility census increases due to the effects of last resort legislation. Alison Land is appointed as the sixteenth commissioner in December 2019.

2020 The worldwide COVID-19 pandemic strikes the United States, killing over 700,000 Americans and millions worldwide. The effect on DBHDS is reduced staffing, overcrowded facilities, and the need to temporarily halt admissions to some mental health facilities.

2021 COVID-19 vaccines are administered in mass dosages nationwide. DBHDS continues to struggle with direct care staff shortages and high turnover and vacancy rates at the department's mental health hospitals. DBHDS' mental health hospitals tend to operate at capacity while staffing levels are less than adequate.

2022 COVID 19 challenges continue. Nelson Smith is appointed seventeenth commissioner. Average inpatient census is 1,757.