



2019 HUMAN DEVELOPMENT & EDUCATION POLICY STATEMENT

1 **I. HUMAN DEVELOPMENT**

2 The strength of our communities determines
3 the strength of our democracy. Emotional,
4 social, and economic poverty weakens the
5 fabric of our society and threatens our
6 democracy. Policy leaders must ensure
7 access to opportunities and invest the proper
8 resources necessary for all children to grow
9 up in nurturing surroundings, and to
10 reconnect and strengthen the bonds of
11 individuals and institutions in communities
12 so that they thrive and favorably compete in
13 the global economy.

14 15 **A PLATFORM FOR CHILDREN & 16 FAMILIES**

17 VML endorses the National League of
18 Cities' Platform for Children and Families
19 that recognizes that strong communities are
20 built on a foundation of strong families and
21 neighborhoods. VML supports and
22 encourages efforts by our communities and
23 the state that emphasize:

- 24 • **Opportunities to learn and grow:**
25 family literacy programs, quality
26 out-of-school time programs and
27 early childhood programs;
- 28 • **Safe neighborhoods to call home:**
29 sufficient state support for local law
30 enforcement, juvenile justice, and
31 prisoner re-entry programs;
- 32 • **Healthy lifestyles & environment:**
33 improving access to healthy foods,
34 physical activity and recreation
35 programs; and
- 36 • **Financially fit families:** workforce
37 development, curbing predatory
38 lenders, and increasing access to
39 low-cost bank accounts and
40 mainstream financial services.

41

42 VML supports approaches (such as the
43 Virginia Grocery Incentive Fund as one
44 example) to provide financial and technical
45 support for businesses to help expand and
46 ensure greater access to healthy food for
47 residents of the state.

48 49 **INTERGOVERNMENTAL ISSUES & 50 FUNDING**

51 Federal, state and local governments share
52 the same citizens and same taxpayers. Local
53 governments request a restoration of a
54 meaningful and fiscally-balanced
55 intergovernmental partnership in human
56 services and education.

57 58 **A working partnership.**

- 59 • The federal and state governments
60 should allow local governments
61 maximum flexibility in developing
62 and funding public/private
63 partnerships to address human
64 service needs.
- 65 • Local government must be a partner
66 with the state and federal
67 government in the process of
68 developing regulations, policies, and
69 allocation methods.
- 70 • The State should require interagency
71 review of regulations to reconcile
72 existing conflicts and to avoid
73 duplication or conflict among
74 agencies.
- 75 • The State should share data with
76 communities and build a
77 comprehensive human services data
78 base to promote greater planning
79 coordination and evaluation of
80 services.

81

82 **Funding commitments.** Human services
83 funding formulae should reflect identified

1 needs, adequate resources to meet those
2 needs, and not pit localities against each
3 other. Equity in funding cannot be achieved
4 by simply redistributing insufficient existing
5 state aid among jurisdictions.

6
7 **Cost shifting and unfunded mandates.**

8 VML opposes the imposition of new federal
9 or state requirements without the funding to
10 pay for them. In the case of state mandates,
11 as the state reduces its funding and
12 assistance to localities, it must ease or
13 eliminate requirements it is unwilling to
14 support. In the case of federal mandates, the
15 state must at the very least maintain its share
16 of responsibility for program supervision
17 and funding. For example:

- 18
- 19 • funding the administration of the
- 20 FAMIS eligibility and case
- 21 management without state support;
- 22 • paying the cost of federal penalties
- 23 when the state does not meet its
- 24 obligations for human services
- 25 programs, including adequate
- 26 administrative funding, technology,
- 27 training, and technical assistance
- 28 necessary to properly do the job;
- 29 • maintaining state funding for the
- 30 costs for federally-mandated and
- 31 state-supervised programs such as
- 32 adoption assistance, and
- 33 • restoring the state funding ratio for
- 34 local welfare administrative costs, in
- 35 which the state pays 80 percent and
- 36 the localities pay 20 percent.

37
38 **AGING SERVICES**

39 **Community programs.** As alternatives to
40 institutionalized care wherever appropriate,
41 the state should develop Medicaid waivers
42 or otherwise fully fund community-based

43 programs like companion services, respite
44 care, homemaker services, adult group
45 homes and adult day care for the elderly.

46
47 **Housing.** The state should support policies
48 that increase the affordability and
49 availability of senior housing throughout the
50 commonwealth.

51
52 **OPIOIDS, HEROIN, SYNTHETIC**
53 **DRUGS**

54 VML supports an intergovernmental and
55 interdisciplinary partnership to address the
56 epidemic of opioid and heroin overdoses in
57 Virginia. Further, VML urges the federal
58 government to actively address the public
59 health threats posed by any emerging
60 synthetic drugs that pose a similar
61 addiction/overdose threat.

62
63 VML supports the Commonwealth's policy
64 framework that targets the following:

- 65 1) prevention – reduction in the supply
66 of legal opiates, and tracking and
67 reduction of the supply of illegal
68 opiates such as heroin and synthetic
69 substances;
 - 70 2) harm reduction – active intervention
71 until treatment is available and
72 accepted;
 - 73 3) treatment – for those who are
74 addicted, and support/recovery
75 resources for family members of
76 people in treatment; and
 - 77 4) culture change - discourage
78 use/overuse of legal opioids, change
79 pain management expectations, and
80 remove stigma regarding addiction
81 treatment and recovery.
- 82

1 **BEHAVIORAL HEALTH**
 2 **Planning for the future of the community**
 3 **& facility system.**
 4 Any plan for the future of the publicly-
 5 funded behavioral health and developmental
 6 services system should include adequate
 7 state funding for:

- 8 • A community-based, comprehensive
- 9 system of care;
- 10 • Urgent care needs in each
- 11 community, including crisis
- 12 intervention teams (CIT);
- 13 • Accessibility to inpatient beds and
- 14 crisis services on a regional basis,
- 15 potentially through public-private
- 16 partnerships, to decrease the need for
- 17 long-distance transports to access
- 18 needed services for critical care;
- 19 • Comprehensive services and
- 20 supports for people returning to the
- 21 community from any type of state
- 22 facilities (public safety as well as
- 23 behavioral health), as well as for
- 24 people diverted from state facilities.
- 25 • Children’s mental health services,
- 26 including community-based early
- 27 interventions and the Mental Health
- 28 Initiative;
- 29 • Medicaid waivers to eliminate
- 30 service waiting lists; and
- 31 • Availability of services for
- 32 consumers voluntarily seeking
- 33 treatment services, regardless of their
- 34 ability to pay.

35
 36 Further, VML supports Community Services
 37 Boards (CSBs) as the single point-of-entry
 38 into the publicly-funded system of care and
 39 as a choice for services to individuals and
 40 families.
 41

42 Any restructuring plan should assure the
 43 following:

- 44 • Local flexibility in planning and service
- 45 provision, particularly for local-only
- 46 funds;
- 47 • No changes in the local match that
- 48 would increase the burden on local taxes
- 49 and budgets;
- 50 • Meaningful consultation with local
- 51 officials and community services boards
- 52 regarding strategies and funding
- 53 proposals for publicly-funded services;
- 54 • Sufficient time and opportunity for
- 55 public comment on any legislative
- 56 proposals;
- 57 • Strategies to overcome past de-
- 58 institutionalization errors, particularly
- 59 the shifting of the burden of care to
- 60 communities;
- 61 • Strategies to discourage the
- 62 concentration of consumers in facility
- 63 communities and in urban centers; and
- 64 • State facilities are not so drastically
- 65 reduced in size and scope that the
- 66 potential for inpatient care is effectively
- 67 eliminated.

68
 69 **Part C early intervention.** VML urges the
 70 General Assembly to assure full state
 71 funding for infants and toddlers eligible for
 72 therapeutic services under Part C of IDEA to
 73 improve their school readiness and quality
 74 of life.
 75
 76 **Behavioral health services for youth**
 77 **funding.** The state should build upon its
 78 funding and seek federal-state funded
 79 waivers to provide behavioral health
 80 services, in particular, prevention services
 81 for youth. VML supports greater state
 82 funding to the Mental Health Initiative and

1 other community-based initiatives to
2 diagnose and serve children with behavioral
3 health needs early, to prevent more complex,
4 costly, and restrictive interventions from
5 CSA or the juvenile justice system.

6
7 **Treatment beds.** The state has greatly
8 decreased state facility beds and state-
9 funded services for children, including those
10 with long-term or hard-to-treat conditions,
11 and those in the state and local juvenile
12 detention system. VML urges the state to
13 continue its support of the Commonwealth
14 Center for Children and Adolescents as a
15 part of the array of behavioral health
16 services, and to fund treatment beds for
17 those committed to the juvenile justice
18 system. Further, the state should fund
19 supportive services for children leaving
20 treatment and their families to further
21 stabilize their living situations and allow for
22 recovery.

23
24 **Service capacity.** VML encourages the
25 state to establish a children’s behavioral
26 health workforce development initiative to
27 build service capacity throughout the state.

28
29 **Medicaid accountability and quality of
30 care.** The league encourages adequate state
31 oversight of, and accountability for,
32 community-level services funded by
33 Medicaid, whether those services are
34 furnished through private or public
35 providers.

36
37 **Substance abuse and behavioral health
38 needs in the justice system.** VML supports
39 the creation of state-funded programs and
40 facilities, and funding of current programs,
41 such as drug courts and day reporting
42 centers, to divert individuals with mental

43 illness from jails and juvenile detention into
44 more appropriate community-based or in-
45 patient treatment programs. VML opposes
46 changes in state funding formulae to turn
47 local and regional jails into in-patient
48 behavioral health treatment centers.

49
50 **Needs of military veterans and families**
51 Given the number of active military
52 members, veterans, and military families
53 living in Virginia, it is clear that behavioral
54 health needs of soldiers returning home with
55 PTSD and their families must be swiftly and
56 adequately addressed. VML urges the
57 federal government to increase funding and
58 access to behavioral health and addiction
59 treatment services for active members of the
60 military (including National Guard and
61 Reserves), returning veterans, and their
62 family members.

63 **CHILDREN’S SERVICES ACT**

64
65 In the last 20+ years Virginia has
66 implemented just half of the CSA program.
67 When the CSA was developed in the early
68 1990s, the plan called for comprehensive
69 prevention programs for at risk youth and
70 families. Unless and until the state commits
71 to developing and funding services that
72 address the roots of issues that bring
73 children and families into CSA, the CSA
74 program will continue as an expensive
75 “catch-up” approach to addressing the
76 complex needs of children and families.

77
78 **A realistic partnership.** The
79 Commonwealth should establish a statutory
80 provision for operation of this state-local
81 partnership that appropriately reflects the
82 shared responsibilities, the need for
83 sufficient “rules and tools,” and recognizes
84 the practical reality that correcting policy

1 and procedural errors may take substantial
2 time and resources.

3
4 **Administrative funding.** VML supports
5 greater funding from the state to support the
6 program's substantial administrative
7 requirements carried out at the local level.

8
9 **Base-budget funding.** The costs of CSA
10 should be fully funded in the state's base
11 budget.

12
13 **Expansion of the mandated population.**
14 VML opposes attempts to expand the CSA
15 mandated population or turn CSA into the
16 children's mental health program. VML
17 also opposes efforts to expand local
18 responsibility for Medicaid match to new
19 categories of individuals, or to require
20 localities to pay the educational costs for
21 children placed in residential treatment
22 outside of the local FAPT process.

23
24 **Incentive funding.** The CSA funding
25 formula should include an incentive
26 component that rewards those local
27 governments implementing innovative and
28 cost-effective interventions.

29
30 **State agency policy coordination.** The
31 State Executive Council must ensure that the
32 administrative and policy requirements of
33 the state agencies involved in the CSA are
34 consistent with one another and consistently
35 applied to local governments.

36
37 **Service coordination.** State and local
38 governments should work together to ensure
39 the greatest degree of coordination between
40 Individual Education Plans (IEPs) and CSA
41 service plans.

42

43 **Sum sufficiency.** CSA serves many
44 children who are entitled to sum sufficient
45 services; the state must keep its commitment
46 to fund its share of services costs for this
47 population.

48
49 **Utilization review.** Local governments
50 must maintain the flexibility to develop
51 utilization management processes that are
52 approved by the State Executive Council.

53
54 **FACILITIES FOR ADULTS AND**
55 **YOUTH**

56 **Auxiliary grant program.** The state should
57 assume full responsibility for the cost of the
58 auxiliary grant program for elderly persons
59 and people with disabilities.

60
61 **Licensure and regulation of group homes.**
62 VML urges the state to continue to work
63 with local governments to assure adequate
64 licensure and regulatory requirements are in
65 place to assure community safety and well-
66 being.

67
68 **HOMELESSNESS**

69 VML supports measures to prevent
70 homelessness in Virginia and to assist the
71 chronic homeless, including veterans, in
72 obtaining appropriate rehabilitative and
73 recovery services, job training and support,
74 and affordable and appropriate housing.
75 VML supports measures to remove barriers
76 this population faces in meeting
77 identification and residency requirements for
78 valid state-issued identification cards. VML
79 urges the state to create a housing trust fund
80 and to work with communities to develop
81 and otherwise support housing for this
82 population.

83
84 **JUVENILE JUSTICE PROGRAMS**

1 **Virginia Juvenile Community Crime**
2 **Control Act (VJCCCA).** The Virginia
3 Municipal League urges the General
4 Assembly to restore the 71 percent funding
5 reduction taken in the early 2000s to the
6 Virginia Juvenile Community Crime Control
7 Act (VJCCCA) program, and to support an
8 equitable and stable funding allocation
9 process for the program.
10
11 The VJCCCA directs localities, in
12 cooperation with judges, court-services unit
13 directors, and Community Policy and
14 Management Teams under the Children’s
15 Services Act to implement programs that
16 divert youth from state or local confinement
17 or help ensure the success of those re-
18 entering the community from confinement.
19 Every city and county participate in the
20 program.
21
22 VJCCCA gives judges the ability to order
23 first-time and less serious offenders to
24 services such as electronic monitoring,
25 intensive individual or family counseling,
26 and group homes. Such appropriate services
27 reduce costlier and less suitable placements
28 in local secure detention or state correctional
29 facilities. It also effectively serves non-
30 mandated youth under the Children’s
31 Services Act.
32
33 VML opposes any effort to divert existing
34 VJCCCA funds for other purposes; any new
35 populations proposed for services under this
36 program must be accompanied by additional
37 state funding.
38
39 **System transformation.** VML supports
40 juvenile justice system transformation that:
41 • Gives juvenile detention centers
42 flexibility, not mandates, to contract

43 with the state to house lower-risk
44 offenders from state facilities;
45 • Pays juvenile detention facilities the
46 actual costs for housing and serving
47 lower-risk offenders from the state;
48 and
49 • Allows the Department to reinvest
50 savings or otherwise provides
51 sufficient, stable funding to
52 implement a treatment continuum
53 with more service and treatment
54 options and supports to ensure better
55 outcomes and lower recidivism.
56

57 **SOCIAL SERVICES**

58 **Family First Prevention Services Act.**
59 Approved by Congress in 2018, the FFPS
60 Act is the first major revision of the title IV-
61 E foster care program since the early 1980s.
62 Changes in the program’s requirements and
63 allowable services will require cooperation
64 between the state, local governments, and
65 private service providers to ensure
66 successful implementation. VML supports
67 this cooperative effort but opposes any
68 proposal to impose new local match
69 requirements to this program.
70

71 **Child and family services program**
72 **improvement plan.** The state must fund the
73 technology and systems to improve the
74 quality of all casework activities related to
75 child welfare services (prevention of child
76 abuse/neglect; prevention foster care, foster
77 care and adoption)
78

79 **Child care.** Affordable, high-quality child
80 care is crucial to parents in the Temporary
81 Assistance to Needy Families (TANF)
82 program and to low-income parents whose
83 wages simply cannot cover child care costs.
84 The state must help fund child care costs to

1 help these families. The state should
2 consider ways to ensure safe, affordable
3 child care, such as grants for nonprofit or
4 public organizations offering child care, and
5 employer incentives to provide child care
6 centers or other assistance for their
7 employees.

8
9 **Healthy families.** VML supports expanded
10 use of state general funds for the Healthy
11 Families program, a voluntary program that
12 offers parental education, support, and
13 assistance to help prevent the need for
14 costlier human services and public safety
15 programs in the future.

16
17 **Social Services Block Grant.** Virginia uses
18 Title XX-Social Services Block Grant
19 (SSBG) funding for a variety of non-cash-
20 assistance services, including in-home
21 services for the elderly, child and adult
22 abuse investigators, and domestic abuse and
23 family preservation services. Congress has
24 consistently underfunded the SSBG at the
25 levels authorized in the 1996 federal welfare
26 reform law. VML urges Congress to live up
27 to its commitment to fully fund the SSBG.
28 Until the federal budget fully funds SSBG,
29 VML urges the General Assembly to
30 continue to first use any Temporary
31 Assistance for Needy Families (TANF)
32 balances to replace SSBG funds.

33
34
35 **PARKS & RECREATION**

36 **Recreational programs.** Local parks and
37 recreation departments offer a variety of
38 affordable activities and programs for
39 children, teenagers, and adults. These
40 programs abide by local health, safety, and
41 risk-management requirements and are
42 ultimately accountable to the local

43 governing body of a city, town, or county.
44 Efforts to categorize these programs as child
45 care are inappropriate, and such recreation
46 programs should not be subject to
47 duplicative state agency regulation and
48 oversight.

49
50 **HEALTH**

51 **Cooperative health budget.** The General
52 Assembly should provide sufficient funding
53 to local health departments.

54
55 **Local flexibility.** District health offices
56 should be locally controlled to the maximum
57 extent consistent with protecting public
58 health.

59
60 **MARIJUANA: DECRIMINALIZATION**

61 VML supports a change to the Code of
62 Virginia to make anyone convicted of the
63 simple possession of no more than 0.5 oz. of
64 marijuana for personal use subject to a civil
65 rather than criminal penalty. Individuals
66 under 21 years of age found to be in
67 possession should still be required to
68 undergo drug screening and participation in
69 a treatment or education program as a
70 condition for the suspension of a conviction
71 if appropriate.

72
73 **HEALTH CARE REFORM**

74 Expansion of state Medicaid eligibility will
75 increase the workload and costs for local
76 departments of social services, which
77 perform eligibility determination and
78 redetermination on behalf of the state. Any
79 expansion of the caseload must be
80 accompanied by sufficient, sustained state
81 funding for staffing and technology to
82 properly do the job.

83

1 Imposing work requirements on certain
2 Medicaid recipients will also increase
3 workload on local social services staff. The
4 state must provide sufficient state funding
5 and technical assistance for local social
6 services staff who will work with this
7 population.

9 **II. EDUCATION**

10 The Virginia Municipal League supports the
11 goal of ensuring quality, well-funded and
12 effective teaching in every classroom in the
13 Commonwealth. Localities have greatly
14 exceeded their responsibilities for K-12
15 education funding. It is essential for the state
16 to meet fully its responsibilities to fund
17 education.

18 **VISION**

19 A strong public education system is the
20 pillar of American society and a passport to
21 the future. Our country cannot be strong
22 without an excellent education system that
23 prepares students for the future with the
24 critical thinking skills that will enable them
25 to be productive citizens. A solid foundation
26 of learning is essential for our communities,
27 state, and country. A strong public school
28 system is essential to economic development
29 and prosperity.

30 A strong educational system requires
31 accountability; parental, community and
32 business involvement; and the wise and
33 efficient use of resources. Standards are an
34 essential part of the accountability system
35 but cannot be measured simply by
36 standardized tests. Students need to learn not
37 only facts and figures, but also those critical
38 learning skills that will enable them to leave
39 high school prepared for either the
40 workplace or higher education.

43 School safety is a critical issue for every
44 community. VML supports strong
45 partnerships and communication between
46 local police departments and school
47 divisions and encourages sustained financial
48 assistance from the state and federal
49 governments to help school divisions with
50 safety-related infrastructure, technology, and
51 personnel. Additionally, VML supports the
52 work of the special statewide committees
53 studying student and school safety and
54 encourages continued examination of the
55 root causes of violence in schools and best
56 practices to address those causes.

57 Students, parents, administrators and
58 teachers all have roles in the educational
59 system and have to be part of that
60 accountability system. Parents should be
61 involved with their children's education, but
62 family support for parents is essential,
63 particularly for those whose children have
64 behavioral health issues, physical
65 disabilities, substance abuse disorders or
66 bullying problems. Not all children should
67 or need to prepare to attend college, but
68 students across the economic spectrum
69 should have equitable opportunities to learn.

70 A sound education system puts resources
71 where they can be most effective, includes
72 collaboration between school boards and
73 local governing bodies, uses technology
74 effectively, embraces innovation and
75 regional opportunities and focuses on early
76 intervention to tackle problems at the
77 earliest time possible.

81

1 **STANDARDS OF QUALITY**
2 The SOQ should be broad enough to include
3 the major components of what is required
4 for a quality educational program.

5
6 The current SOQ do not reflect the cost of a
7 sound public education system. The SOQ
8 are not based on prevailing practices, nor do
9 they reflect the cost of meeting state
10 accountability standards. Because of this
11 disconnect between the accountability
12 standards and the SOQ, the cost that the
13 state recognizes in its funding formulas is
14 too low, and too much of the burden of
15 funding public education falls on local
16 governments.

17
18 The state and local governments should
19 partner to determine the minimum funding
20 levels necessary to sustain high quality
21 services for schools and other local
22 government operations while also
23 addressing capital and maintenance needs.

24
25 VML supports a JLARC or other state study
26 that examines the ways other states fund
27 education and whether the Commonwealth
28 should use a funding strategy that
29 establishes a more realistic base foundation
30 amount per pupil – plus add-on funding to
31 reflect higher costs for educating at-risk,
32 disabled, ESL, and gifted students, etc. as
33 well as funding for capital costs.

34
35 VML supports a study by the Joint
36 Legislative Audit and Review Commission
37 to determine how the SOQ may be revised
38 and adequately funded to meet the
39 requirements contained in the Standards of
40 Learning and Standards of Accreditation.
41 VML also supports implementation of

42 JLARC recommendations to promote 3rd
43 grade reading performance.

44 **SOQ FUNDING**

45 VML supports full funding of the state's
46 share of the actual costs of the SOQ based
47 on prevailing practices, and full funding of
48 the state's share of categorical educational
49 mandates in areas such as special education,
50 alternative education and gifted education.

51
52
53 The state should fully recognize and fund
54 the costs of rebenchmarking of the various
55 educational programs including the
56 Standards of Quality, incentive, categorical,
57 and school facilities programs. Changing
58 the process of rebenchmarking to artificially
59 lower recognized costs does not change
60 what it actually costs to provide education.
61 Instead, it simply transfers additional costs
62 to local governments, and ultimately to the
63 local real estate tax base.

64
65 The state must be a reliable funding partner
66 in accordance with the Virginia Constitution
67 and state statutes. The Standards of Quality
68 should recognize resources, including
69 positions, required for a high-quality public
70 education system.

71 Funding for the SOQ should include:

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83
1. Establishment of a new, predictable and meaningful source of funding for construction, including funding for new construction, renovation, maintenance and land purchase. The Literary Fund and the Virginia Public School Authority are not sufficient means for the state to help localities pay for capital needs. Options could include creating a two-year pilot program of

- 1 competitive grants using funds from 42
- 2 the Virginia Public Building 43
- 3 Authority to offset new construction 44
- 4 or renovation costs for publicly 45
- 5 owned and operated K-12 schools. 46
- 6 2. A predictable and reliable source of 47
- 7 funding for technology infrastructure 48
- 8 and personnel costs. 49
- 9 3. Realistic state funding for salary 50
- 10 increases for professional and non- 51
- 11 professional school employees. 52
- 12 Salary increases should be funded 53
- 13 for a full year starting July 1, the 54
- 14 start of the fiscal year. 55
- 15 4. State funding to meet the goal of the 56
- 16 Commonwealth (VA Code §22.1- 57
- 17 289.1) that teacher compensation be 58
- 18 competitive; at a minimum, at or 59
- 19 above national average teacher 60
- 20 compensation, provided that the true 61
- 21 costs of meeting the SOQ are funded 62
- 22 by the state. 63
- 23 5. Funding to initiate and continue to 64
- 24 enable school systems to address 65
- 25 school safety issues. 66
- 26 6. Recognition of adequate support 67
- 27 costs based on realistic measures of 68
- 28 the importance of support positions 69
- 29 to achievement on state 70
- 30 accountability standards. Current 71
- 31 state funding for support positions is 72
- 32 not based on prevailing practices or 73
- 33 on any scientifically-derived staffing 74
- 34 ratios. 75
- 35 7. Flexibility where possible in areas 76
- 36 such as funding of student health 77
- 37 services. 78
- 38 8. Support for funding of 79
- 39 recommendations made by JLARC 80
- 40 to promote reading by grade level by 81
- 41 the third grade. 82
- 9. Development of realistic cost 83
- estimates that are based on
- prevailing practices and not on the
- availability of state funding.
- 10. Review by JLARC in order that data
- and information can be provided to
- the State Board of Education on the
- cost of meeting the SOQ, SOLs and
- SOAs.
- 11. Lottery funds that are distributed to
- localities without a corresponding
- reduction in direct aid.
- The state should not require any
- maintenance of local effort other than that
- associated with the SOQ. A maintenance of
- effort requirement that is not connected to
- the SOQ will punish those localities that
- voluntarily spent beyond the required
- minimum in an effort to achieve a high-
- quality system of education. Further, it will
- simply perpetuate the current mismatch in
- state-local funding for education.
- The General Assembly should recognize
- that local governments traditionally have
- funded their share of costs of meeting the
- SOQ and, in fact, most have funded
- education beyond their required share in
- efforts to provide quality education. These
- higher funding levels have meant that
- localities have had to raise local taxes and
- fees and defer spending on other important
- local priorities including public safety.
- The local composite index (LCI) is a crude
- and often inaccurate proxy for determining
- the ability of each locality to pay its share of
- K-12 expenses as defined by the SOQ. The
- Commonwealth's education funding
- formulae (SOQ and LCI) are more sensitive
- to the state's revenue situation than the

1 educational needs of Virginia’s students.
2 VML supports a JLARC or other state study
3 that examines the ways other states fund
4 education and whether the Commonwealth
5 should use a funding strategy that
6 establishes a more realistic base foundation
7 amount per pupil – plus add-on funding to
8 reflect higher costs for educating at-risk,
9 disabled, ESL, and gifted students, etc.
10
11 Because spending increases alone may not
12 produce desired levels of student
13 achievement, the State Board of Education
14 and other responsible bodies are urged to
15 develop measures of results to determine the
16 actual effectiveness of expenditures on
17 education. VML supports the use of school
18 efficiency reviews to help determine ways to
19 ensure that public funds are spent as
20 effectively and efficiently as possible.
21
22 VML believes that the methodology for
23 costing the SOQ does not consider the
24 differences in costs in the state’s various
25 regions, nor does it adequately address
26 unique local conditions such as small, large,
27 declining, or diverse student populations.
28 First, the methodology artificially lowers the
29 state average salary by using the “L-
30 estimator” instead of average salary figures.
31 Second, the L-estimator is based on dated
32 information that does not reflect current
33 salary levels. Third, the methodology uses
34 an artificially low limit on the number of
35 professionals per 1,000 pupils for which
36 state aid is given. Fourth, the methodology
37 does not address the differences in providing
38 education to students with special needs or
39 the heavy additional cost of educating
40 English as Second Language students. The
41 add-on funding for at-risk students is a start

42 toward meeting unique local circumstances
43 and should be increased.

44
45 The first priority for the use of a state
46 surplus should be the funding of mandated
47 educational programs.

48
49 Disparity should not be addressed by simply
50 redistributing existing state aid among
51 jurisdictions.

52
53 **LOCAL AUTONOMY**

54 Because public education should be as close
55 as possible to the people, local school
56 decisions cannot and should not be made by
57 the state. Local school boards should be
58 responsible for the direct supervision and
59 management of local schools.

60
61 The state should not take any actions that
62 limit or reduce authority of local school
63 boards and local governing bodies to finance
64 and manage local schools. Local school
65 boards should retain the responsibility for
66 approving applications for charter schools.
67 Otherwise, decisions that affect the funding
68 of public schools potentially could be made
69 by a statewide, appointed body that has no
70 direct connection to the council or board of
71 supervisors.

72
73 **ALTERNATIVE EDUCATION**

74 Traditional approaches to discipline—long-
75 term suspensions and expulsions—transfer
76 the problems of the student from the school
77 division to the general government. There
78 should continue to be school alternatives to
79 the normal school environment for students
80 who do not behave appropriately. The state
81 should develop and fund alternatives,
82 including workforce development grants, for
83 students suspended and expelled from

1 school, such as programs designed to
2 encourage obtainment of GEDs, career
3 education, job skills, self-control training
4 and drug and substance prevention. Finally,
5 there is little effective enforcement of
6 truancy laws for students who are over 16
7 years of age. Some of these students have
8 full time jobs and school divisions have
9 difficulty in locating them. VML encourages
10 the development of initiatives to better
11 enable schools to track these older students,
12 or otherwise determine if changes are
13 needed to truancy laws.

14 **EARLY CHILDHOOD**

15 **DEVELOPMENT & EDUCATION**

16 Research has shown that the early childhood
17 years (from infancy to age five) are critical
18 years for brain development. These early
19 years are also critical for establishing
20 healthy lifestyles – eating nutritious foods,
21 engaging in activities and exercise (i.e.,
22 playing), and learning basic health and
23 safety practices.

24 Children who are regularly read to and gain
25 basic language skills, who participate in
26 healthy activities and learning experiences,
27 and who learn basic social skills, are more
28 likely to enter kindergarten ready to learn.
29 They are also more likely to read at grade
30 level by the third grade. This early progress
31 can lead to continued success in school and
32 ultimately in the workforce.

33 VML supports state and local policies and
34 initiatives that spotlight and encourage
35 greater early learning opportunities for
36 children, along with access to information
37 and resources that will help parents and
38 caregivers give young children the greatest
39 chances to learn and grow in healthy ways.

40 This will ensure a better economic future for
41 families and communities.

42 VML supports increased state funding for
43 pre-kindergarten students to ensure that all
44 children entering the public system have the
45 social and intellectual skills necessary to be
46 successful students.

47 **HIGHER EDUCATION**

48 Virginia's colleges and universities serve as
49 engines of economic growth, cultural
50 enrichment, and intellectual development for
51 communities across the commonwealth.
52 The decline in state support for institutions
53 of higher education and the state's
54 unwillingness to invest in these institutions
55 endangers the economic health of the
56 commonwealth and its cities, towns, and
57 counties.

58 In addition to ensuring a stronger and more
59 diversified economic base, a healthy and
60 vibrant higher education sector, which
61 includes two-year as well as four-year
62 institutions, supplies our communities with
63 an educated and well-trained workforce that
64 attracts new businesses and allows existing
65 businesses to compete effectively in an
66 increasingly competitive global economy.
67 Further, beneficiaries of higher education
68 tend to earn higher incomes, thus expanding
69 the revenue stream to the state, and thereby
70 ensuring the continued provision of quality
71 services for its citizens. Finally, the
72 involvement of institutions, their faculty,
73 and their students in communities across the
74 commonwealth and the expanded cultural
75 opportunities these institutions offer
76 communities enhance the quality of life for
77 all Virginians.

1 Currently, community colleges are required
2 to offer reduced tuition for high school
3 students. Local schools, however, are
4 required to make up the difference in tuition.
5 This clearly is an unfunded mandate. The
6 state should find other resources within its
7 higher education budget to pay for the
8 tuition for these students.

9
10 **WORKFORCE DEVELOPMENT**

11 VML supports innovative approaches,
12 including creation of satellite campuses, to
13 ensure that training and certification
14 programs are widely available to high school
15 students, GED candidates, returning
16 veterans, and other residents, particularly
17 those representing underserved and at-risk
18 populations. Such programs are vital to
19 prepare Virginians for careers important to
20 Virginia's economic prosperity.