



2022 HUMAN DEVELOPMENT AND EDUCATION POLICY STATEMENT

1 **I. HUMAN DEVELOPMENT**

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

10 **A PLATFORM FOR CHILDREN & FAMILIES**

11 VML endorses the National League of Cities’ Platform for Children and Families that recognizes
12 that strong communities are built on a foundation of strong families and neighborhoods. VML
13 supports and encourages efforts by our communities and the state that emphasize:

- 14 • **Opportunities to learn and grow:** family literacy programs, quality out-of-school time
15 programs and early childhood programs;
- 16 • **Safe neighborhoods to call home:** sufficient state support for local law enforcement,
17 juvenile justice, and prisoner re-entry programs;
- 18 • **Healthy lifestyles & environment:** improving access to healthy foods, physical activity
19 and recreation programs; and
- 20 • **Financially fit families:** workforce development, curbing predatory lenders, and
21 increasing access to mainstream banking and financial services.
22

23 VML supports approaches (such as the Virginia Grocery Incentive Fund as one example) to
24 provide financial and technical support for businesses to help expand and ensure greater access
25 to healthy food for residents of the state.
26

27 **INTERGOVERNMENTAL ISSUES & FUNDING**

28 Federal, state, and local governments share the same citizens and same taxpayers. Local
29 governments request a restoration of a meaningful and fiscally-balanced intergovernmental
30 partnership in human services and education.
31

32 **A working partnership.**

- 33 • The federal and state governments should allow local governments maximum flexibility
34 in developing and funding public/private partnerships to address human service needs.
- 35 • Local government must be a partner with the state and federal government in the process
36 of developing regulations, policies, and funding allocation methods.

- The State should require interagency review of regulations to reconcile existing conflicts and to avoid duplication or conflict among agencies.
- The State should share data with communities and build a comprehensive human services data base to promote greater planning coordination and evaluation of services.

Funding commitments. Human services funding formulae should reflect identified needs, adequate resources to meet those needs, and not pit localities against each other. Equity in funding cannot be achieved by simply redistributing insufficient existing state aid among jurisdictions.

Cost shifting and unfunded mandates. VML opposes the imposition of new federal or state requirements without the funding to pay for them. In the case of state mandates, as the state reduces its funding and assistance to localities, it must ease or eliminate requirements it is unwilling to support. In the case of federal mandates, the state must at the very least maintain its share of responsibility for program supervision and funding. For example:

- funding the administration of the FAMIS eligibility and case management;
- paying the cost of federal penalties when the state does not meet its obligations for human services programs, including adequate administrative funding, technology, training, and technical assistance necessary to properly do the job;
- maintaining state funding for the costs for federally-mandated and state-supervised programs such as adoption assistance, and
- restoring the state funding ratio for local welfare administrative costs, in which the state pays 80 percent and the localities pay 20 percent.

AGING SERVICES

Community programs. As alternatives to institutionalized care wherever appropriate, the state should develop Medicaid waivers or otherwise fully fund community-based programs like companion services, respite care, homemaker services, adult group homes and adult day care for the elderly.

Housing. The state should support policies that increase the affordability and availability of senior housing throughout the Commonwealth.

OPIOIDS, HEROIN, SYNTHETIC DRUGS

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

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

- 1) prevention – reduction in the supply of legal opiates, and tracking and reduction of the supply of illegal opiates such as heroin and synthetic substances;
- 2) harm reduction – active intervention until treatment is available and accepted;
- 3) treatment – for those who are addicted, and support/recovery resources for family members of people in treatment; and

- 1 4) culture change - discourage use/overuse of legal opioids, change pain management
2 expectations, and remove stigma regarding addiction treatment and recovery.
3

4 **BEHAVIORAL HEALTH**

5 **Planning for the future of the community & facility system.**

6 Any plan for the publicly-funded behavioral health and developmental services system should
7 include adequate state funding for:

- 8 • A community-based, comprehensive system of care;
- 9 • Crisis intervention teams and centers to ensure that adults and children experiencing a
10 mental health crisis are able to obtain timely evaluation and assistance as close to their
11 home community as possible;
- 12 • A robust statewide system of alternative transportation options to help individuals in
13 crisis get to evaluation services and treatment that eliminates the reliance on local law
14 enforcement for extended transportation and custody services;
- 15 • Accessibility to inpatient beds and crisis services-on a regional basis, potentially through
16 public-private partnerships, to decrease the need for long-distance transports for critical
17 care;
- 18 • Comprehensive services and supports for people returning to the community from any
19 type of state facilities (public safety as well as behavioral health), as well as for people
20 diverted from state facilities.
- 21 • Children’s mental health services, including community-based early interventions and the
22 Mental Health Initiative;
- 23 • Medicaid waivers to eliminate service waiting lists; and
- 24 • Availability of services for consumers voluntarily seeking treatment services, regardless
25 of their ability to pay.

26
27 Federal ARPA funds and robust state revenues offer an opportunity for the state to make new
28 investments in the community-based system of care (which includes public and private service
29 providers) and to state hospitals to maintain vital services.
30

31 Investments must go to both build the community network of care and assist state hospital to
32 mend the safety-net and create necessary the infrastructure necessary to serve Virginians of all
33 ages. This cannot be a zero-sum funding situation whether one part of the system benefits at the
34 cost of the parts of the system.
35

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

39 Any restructuring plan should assure the following:

- 40 • Local flexibility in planning and service provision, particularly for local-only funds;
- 41 • No changes in the local match that would increase the burden on local budgets;
- 42 • Meaningful consultation with local officials and community services boards regarding
43 strategies and funding proposals for publicly-funded services;
- 44 • Sufficient time and opportunity for public comment on legislative proposals;
- 45 • Strategies to overcome past de-institutionalization errors, particularly the shifting of the
46 burden of care to communities;

- 1 • Strategies to discourage the concentration of consumers in facility communities and in urban
2 centers; and
- 3 • State facilities are not so drastically reduced in size and scope that the potential for inpatient
4 care is effectively eliminated.

5
6 **Crisis response and Marcus Alert.** Successful implementation of crisis response component of
7 the STEP-VA program and the Marcus Alert program and protocols requires sufficient and
8 sustained state funding and technical assistance to communities. This funding should not come
9 at the expense of other community-based service initiatives and requirements; nor should the
10 burden of funding these initiatives be shifted to local governments.

11
12 **Part C early intervention.** VML urges the General Assembly to assure full state funding for
13 infants and toddlers eligible for therapeutic services under Part C of IDEA to improve their
14 school readiness and quality of life.

15
16 **Behavioral health services for youth**

17 **funding.** The state should build upon its funding and seek federal-state funded waivers to
18 provide behavioral health services, in particular, prevention services for youth. VML supports
19 greater state funding to the Mental Health Initiative and other community-based initiatives to
20 diagnose and serve children with behavioral health needs early, to prevent more complex, costly,
21 and restrictive interventions.

22
23 **Treatment beds.** The state has greatly decreased state facility beds and state-funded services for
24 children, including those with long-term or hard-to-treat conditions, and those in the state and
25 local juvenile detention system. VML urges the state to continue its support of the
26 Commonwealth Center for Children and Adolescents as a part of the array of behavioral health
27 services, and to fund treatment beds for those committed to the juvenile justice system. Further,
28 the state should fund supportive services for children leaving treatment and their families to
29 further stabilize their living situations and allow for recovery.

30
31 **Service capacity.** VML encourages the state to establish a children’s behavioral health
32 workforce development initiative to build service capacity throughout the state.

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

37
38
39 **Mental health parity.** The Federal Mental Health Parity and Addiction Equity Act of 2008
40 (MHPAEA) generally provides that financial requirements - such as co-pays and coinsurance -
41 and treatment limitation - such as visit limits - imposed on mental health or substance use
42 disorders (MH/SUD) cannot be more restrictive than those applied to substantially all
43 medical/surgical benefits.

44 For Virginia, failure of insurance plans to adhere to federal and state standards can shift the
45 burden of costs to the public system (such as CSA and CSBs), often at the point when an
46 individual requires more intensive services.

1
2 VML supports the 2020 recommendations of the Joint Legislative Audit and Review
3 Commission (JLARC) to strengthen and expand the Virginia Bureau of Insurance oversight of
4 insurance plans and compliance with federal and state mental health parity requirements.

5
6 **Mental health service access for community college students.** VML supports efforts by the
7 Virginia Community College System to seek funding through ARPA or state general funds to
8 address the mental health needs of students through partnerships with community services boards
9 in order to support and keep adult learners in school and on track to meet career goals and greater
10 financial independence. Such partnerships with CSBs should be separate from the local match
11 for CSB services.

12
13 **Needs of military veterans and families.**

14 Given the number of active military members, veterans, and military families living in Virginia,
15 it is clear that behavioral health needs of soldiers returning home with PTSD and their families
16 must be swiftly and adequately addressed. VML urges the federal government to increase
17 funding and access to behavioral health and addiction treatment services for active members of
18 the military (including National Guard and Reserves), returning veterans, and their family
19 members.

20
21 **CHILDREN’S SERVICES ACT**

22 When the CSA was developed in the early 1990s, the plan called for comprehensive prevention
23 programs for at risk youth and families. Unless and until the state commits to developing and
24 funding services that address the roots of issues that bring children and families into CSA, the
25 CSA program will continue as an expensive “catch-up” approach to addressing the complex
26 needs of children and families.

27
28 **A realistic partnership.** The Commonwealth should establish a statutory provision for
29 operation of this state-local partnership that appropriately reflects the shared responsibilities, the
30 need for sufficient “rules and tools,” and recognizes the practical reality that correcting policy
31 and procedural errors may take substantial time and resources.

32
33 **Administrative funding.** VML supports greater funding from the state to support the program’s
34 substantial administrative requirements carried out at the local level.

35
36 **Base-budget funding.** The costs of CSA should be fully funded in the state’s base budget.

37
38 **Expansion of the mandated population.** VML opposes attempts to expand the CSA mandated
39 population or turn CSA into the children’s mental health program. VML also opposes efforts to
40 expand local responsibility for Medicaid match to new categories of individuals, or to require
41 localities to pay the educational costs for children placed in residential treatment outside of the
42 local FAPT process.

43
44 **Incentive funding.** The CSA funding formula should include an incentive component that
45 rewards those local governments implementing innovative and cost-effective interventions.

1 **State agency policy coordination.** The State Executive Council must ensure that the
2 administrative and policy requirements of the state agencies involved in the CSA are consistent
3 with one another and consistently applied to local governments.
4

5 **Service coordination.** State and local governments should work together to ensure the greatest
6 degree of coordination between Individual Education Plans (IEPs) and CSA service plans.
7

8 **Sum sufficiency.** CSA serves many children who are entitled to sum sufficient services; the
9 state must keep its commitment to fund its share of services costs for this population.
10

11 **Utilization review.** Local governments must maintain the flexibility to develop utilization
12 management processes that are approved by the State Executive Council.
13

14 **Rate setting.** VML supports state rate setting for special education private day and residential
15 programs. VML supports state contracts that localities may use to procure such services for
16 children covered by CSA.
17

18 **FACILITIES FOR ADULTS AND YOUTH**

19 **Auxiliary grant program.** The state should assume full responsibility for the cost of the
20 auxiliary grant program for elderly persons and people with disabilities.
21

22 **Licensure and regulation of group homes.** VML urges the state to continue to work with local
23 governments to assure adequate licensure and regulatory requirements are in place to assure
24 community safety and well-being.
25

26 **HOMELESSNESS**

27 VML supports measures to prevent homelessness in Virginia and to assist the chronic homeless,
28 including veterans, in obtaining appropriate rehabilitative and recovery services, job training and
29 support, and affordable and appropriate housing. VML supports measures to remove barriers this
30 population faces in meeting identification and residency requirements for valid state-issued
31 identification cards. VML urges further state support for the housing trust fund to help
32 communities develop and support housing for this population.
33

34 **LOCAL AND REGIONAL JAILS**

35
36 **Jail per diems.** There is no requirement in the Code of Virginia to adjust per diem rates to keep
37 pace with actual costs. VML requests that the Code of Virginia be amended to require that jail
38 per diem rates be regularly adjusted for inflation in line with the Consumer Price Index so that
39 per diem payments keep pace with actual costs, such as is done with other areas of the budget
40 (like the Standards of Quality)
41

42 **State-responsible inmates in local/regional jails.** Local and regional jails should have a choice
43 as to whether it will keep state-responsible inmates in their facility after the 60-days from the
44 date of final sentencing order has passed. Willing facilities could contract with the state to keep
45 such inmates past the 60-day period; those jails unable to keep state-responsible inmates due to

1 space or resource limitations should not be compelled to contract with the state or otherwise keep
2 state inmates past the 60-day period.

3
4 **Behavioral health regulations for jails.** The 2019 General Assembly approved legislation
5 directing the Board of Local and Regional Jails to draft standards for new regulations to address
6 health and behavioral health service needs in local and regional jails, as well as discharge
7 planning for inmates with behavioral health needs. It is clear that new behavioral health
8 regulations will create a fiscal impact for communities and their jails. The state must find a way
9 to alleviate those new costs. This could include creating a health/behavioral health add-on to
10 state per diem payments or otherwise funding new positions and associated costs through the
11 Compensation Board for newly required services.

12
13 **Substance abuse and behavioral health needs in the justice system.** VML supports the
14 creation of state-funded programs and facilities, and funding of current programs, such as drug
15 courts and day reporting centers, to divert individuals with mental illness and substance use
16 disorders from jails and juvenile detention into appropriate community-based or in-patient
17 treatment programs. VML opposes changes in state funding formulae to turn local and regional
18 jails into in-patient behavioral health treatment centers.

19 20 **JUVENILE JUSTICE PROGRAMS**

21 **Virginia Juvenile Community Crime Control Act (VJCCCA).** The Virginia Municipal
22 League urges the General Assembly to restore the 71 percent funding reduction taken in the early
23 2000s to the Virginia Juvenile Community Crime Control Act (VJCCCA) program, and to
24 support an equitable and stable funding allocation process for the program.

25
26 The VJCCCA directs localities, in cooperation with judges, court-services unit directors, and
27 Community Policy and Management Teams under the Children’s Services Act to implement
28 programs that divert youth from state or local confinement or help ensure the success of those re-
29 entering the community from confinement. Every city and county participate in the program.

30
31 VJCCCA gives judges the ability to order first-time and less serious offenders to services such as
32 electronic monitoring, intensive individual or family counseling, and group homes. Such
33 appropriate services reduce costlier and less suitable placements in local secure detention or state
34 correctional facilities. It also effectively serves non-mandated youth under the Children’s
35 Services Act.

36
37 VML opposes any effort to divert existing VJCCCA funds for other purposes; any new
38 populations proposed for services under this program must be accompanied by additional state
39 funding.

40
41 **System transformation.** VML supports juvenile justice system transformation that:

- 42 • Gives juvenile detention centers flexibility, not mandates, to contract with the state to
43 house lower-risk offenders from state facilities;
- 44 • Pays juvenile detention facilities the actual costs for housing and serving lower-risk
45 offenders from the state; and

- Allows the Department to reinvest savings or otherwise provides sufficient, stable funding to implement a treatment continuum with more service and treatment options and supports to ensure better outcomes and lower recidivism.

SOCIAL SERVICES

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

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

Child care. Affordable, high-quality child care is crucial to parents in the Temporary Assistance to Needy Families (TANF) program and to low-income parents whose wages simply cannot cover child care costs. The state must help fund child care costs to help these families. The state should consider ways to ensure safe, affordable child care, such as grants for nonprofit or public organizations offering child care, and employer incentives to provide child care centers or other assistance for their employees.

Healthy families. VML supports expanded use of state general funds for the Healthy Families program, a voluntary program that offers parental education, support, and assistance to help families succeed and prevent the need for costlier interventions.

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

PARKS & RECREATION

Recreational programs. Local parks and recreation departments offer a variety of affordable activities and programs for children, teenagers, and adults. These programs abide by local health, safety, and risk-management requirements and are ultimately accountable to the local governing body of a city, town, or county. Efforts to categorize these programs as child care are inappropriate, and such recreation programs should not be subject to duplicative state agency regulation and oversight.

HEALTH

Cooperative health budget. The General Assembly should provide sufficient funding to local health departments.

1 **Local flexibility.** District health offices should be locally controlled to the maximum extent
2 consistent with protecting public health.

3
4 **Emergency-related infrastructure and needs.** Sufficient state fund should be provided for
5 public health emergency services to enable the state and local health departments and
6 stakeholders to better prepare for and respond to public health emergencies, such as a pandemic.

7 **Health IT needs.** Increased investment is needed for public health information technology and
8 staff so that critical, timely information about public health emergencies is made available to
9 policy makers, first responders, and the public.

10 11 **HEALTH CARE REFORM**

12 VML supports continued state funding for Medicaid eligibility determination services.

13
14 Imposing work requirements on certain Medicaid recipients will also increase workload on local
15 social services staff. The state must provide sufficient state funding and technical assistance for
16 local social services staff who will work with this population.

17 18 **HUMAN TRAFFICKING**

19 VML supports the state’s efforts to address human trafficking, including the appointment of a
20 sex trafficking response coordinator at the Department of Criminal Justice Services and the
21 proposed development of much-needed public outreach, education, and treatment services.

22 Outreach efforts and avenues for reporting trafficking must address language barriers for those
23 reporting and those seeking rescue from trafficking. Since human trafficking also includes labor
24 trafficking and affects a wide range of ages, all types of trafficking situations should ultimately
25 be addressed in Virginia’s response plan.

26 27 **II. EDUCATION**

28
29 The Virginia Municipal League supports the goal of ensuring quality, well-funded and effective
30 teaching in every classroom in the Commonwealth. Localities have greatly exceeded their
31 responsibilities for K-12 education funding. It is essential for the state to meet fully its
32 responsibilities to fund education.

33 **VISION**

34 A strong public education system is the pillar of American society and a passport to the future.
35 Our country cannot be strong without an excellent education system that prepares students for
36 the future with the critical thinking skills that will enable them to be productive citizens. A solid
37 foundation of learning is essential for our communities, state, and country. A strong public
38 school system is essential to economic development and prosperity.

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

1 Students, parents, school administrators and teachers all have roles in the educational system and
2 have to be part of that accountability system. Parents should be involved with their children’s
3 education, but support for parents is essential, particularly for those whose children have
4 behavioral health issues, physical disabilities, substance abuse disorders or bullying problems.
5

6 Not all children should or need to prepare to attend college, but students across the economic
7 spectrum should have equitable opportunities to learn.

8 A sound education system puts resources where they can be most effective, includes
9 collaboration between school boards and local governing bodies, uses technology effectively,
10 embraces innovation and regional opportunities and focuses on early intervention to tackle
11 problems at the earliest time possible.
12

13 **STANDARDS OF QUALITY**

14 The SOQ should be broad enough to include the major components of what is required for a
15 quality educational program.
16

17 The current SOQ do not reflect the cost of a sound public education system. The SOQ are not
18 based on prevailing practices, nor do they reflect the cost of meeting state accountability
19 standards. Because of this disconnect between the accountability standards and the SOQ, the cost
20 that the state recognizes in its funding formulas is too low, and too much of the burden of
21 funding public education falls on local governments.
22

23 The state and local governments should partner to determine the minimum funding levels
24 necessary to sustain high quality services for schools and other local government operations
25 while also addressing capital and maintenance needs.
26

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

31 VML supports a study by the Joint Legislative Audit and Review Commission to determine how
32 the SOQ may be revised and adequately funded to meet the requirements contained in the
33 Standards of Learning and Standards of Accreditation. VML also supports implementation of
34 JLARC recommendations to promote third grade reading performance.
35

36 **SOQ FUNDING**

37 VML supports full funding of the state’s share of the actual costs of the SOQ based on prevailing
38 practices, and full funding of the state’s share of categorical educational mandates in areas such
39 as special education, alternative education, and gifted education.
40

41 The state should fully recognize and fund the costs of rebenchmarking of the various educational
42 programs including the Standards of Quality, incentive, categorical, and school facilities
43 programs. Changing the process of rebenchmarking to artificially lower recognized costs does
44 not change what it actually costs to provide education. Instead, it simply transfers additional
45 costs to local governments, and ultimately to the local real estate tax base.
46

1 The state must be a reliable funding partner in accordance with the Virginia Constitution and
2 state statutes. The Standards of Quality should recognize resources, including positions, required
3 for a high-quality public education system.

4 Funding for the SOQ should include:

- 5
- 6 1. Establishment of a new, predictable, and meaningful source of funding for construction,
7 including funding for new construction, renovation, maintenance, and land purchase. The
8 Literary Fund and the Virginia Public School Authority are not sufficient means for the
9 state to help localities pay for capital needs. Options could include creating a two-year
10 pilot program of competitive grants using funds from the Virginia Public Building
11 Authority to offset new construction or renovation costs for publicly owned and operated
12 K-12 schools in fiscally stressed communities as defined by the Virginia Commission on
13 Local Government.
- 14 2. A predictable and reliable source of funding for technology infrastructure and personnel
15 costs.
- 16 3. Realistic state funding for salary increases for professional and non-professional school
17 employees. Salary increases should be funded for a full year starting July 1, the start of
18 the fiscal year.
- 19 4. State funding to meet the goal of the Commonwealth (VA Code §22.1-289.1) that teacher
20 compensation be competitive; at a minimum, at or above national average teacher
21 compensation, provided that the true costs of meeting the SOQ are funded by the state.
- 22 5. Funding to initiate and continue to enable school systems to address school safety issues.
- 23 6. Recognition of adequate support costs based on realistic measures of the importance of
24 support positions to achievement on state accountability standards. Current state funding
25 for support positions is not based on prevailing practices or on any scientifically-derived
26 staffing ratios.
- 27 7. Flexibility where possible in areas such as funding of student health services.
- 28 8. Support for funding of recommendations made by JLARC to promote reading by grade
29 level by the third grade.
- 30 9. Development of realistic cost estimates that are based on prevailing practices and not on
31 the availability of state funding.
- 32 10. Review by JLARC in order that data and information can be provided to the State Board
33 of Education on the cost of meeting the SOQ, SOLs and SOAs.
- 34 11. Lottery funds that are distributed to localities without a corresponding reduction in direct
35 aid.

36

37 The state should not require any maintenance of local effort other than that associated with the
38 SOQ. A maintenance of effort requirement that is not connected to the SOQ will punish those
39 localities that voluntarily spent beyond the required minimum in an effort to achieve a high-
40 quality system of education. Further, it will simply perpetuate the current mismatch in state-local
41 funding for education.

42

43 The General Assembly should recognize that local governments traditionally have funded their
44 share of costs of meeting the SOQ and, in fact, most have funded education beyond their
45 required share in efforts to provide quality education. These higher funding levels have meant

1 that localities have had to raise local taxes and fees and defer spending on other important local
2 priorities including public safety.

3
4 The local composite index (LCI) is a crude and often inaccurate proxy for determining the ability
5 of each locality to pay its share of K-12 expenses as defined by the SOQ. The Commonwealth's
6 education funding formulae (SOQ and LCI) are more sensitive to the state's revenue situation
7 than the educational needs of Virginia's students. VML supports a JLARC or other state study
8 that examines the ways other states fund education and whether the Commonwealth should use a
9 funding strategy that establishes a more realistic base foundation amount per pupil – plus add-on
10 funding to reflect higher costs for educating at-risk, disabled, ESL, and gifted students, etc.

11
12 Because spending increases alone may not produce desired levels of student achievement, the
13 State Board of Education and other responsible bodies are urged to develop measures of results
14 to determine the actual effectiveness of expenditures on education. VML supports the use of
15 school efficiency reviews to help determine ways to ensure that public funds are spent as
16 effectively and efficiently as possible.

17
18 VML believes that the methodology for costing the SOQ does not consider the differences in
19 costs in the state's various regions, nor does it adequately address unique local conditions such as
20 small, large, declining, or diverse student populations.

21
22 1) the methodology artificially lowers the state average salary by using the "L-estimator" instead
23 of average salary figures.

24
25 2) the L-estimator is based on dated information that does not reflect current salary levels.

26
27 3) the methodology uses an artificially low limit on the number of professionals per 1,000 pupils
28 for which state aid is given.

29
30 4) the methodology does not address the differences in providing education to students with
31 special needs or the heavy additional cost of educating English as Second Language students.
32 The add-on funding for at-risk students is a start toward meeting unique local circumstances and
33 should be increased.

34
35 The first priority for the use of a state surplus should be the funding of mandated educational
36 programs.

37
38 Disparity should not be addressed by simply redistributing existing state aid among jurisdictions.

39 **LOCAL AUTONOMY**

40 Because public education should be as close as possible to the people, local school decisions
41 cannot and should not be made by the state. Local school boards should be responsible for the
42 direct supervision and management of local schools.

43
44 The state should not take any actions that limit or reduce authority of local school boards and
45 local governing bodies to finance and manage local schools. Local school boards should retain
46 the responsibility for approving applications for charter schools. Otherwise, decisions that affect

1 the funding of public schools potentially could be made by a statewide, appointed body that has
2 no direct connection to the council or board of supervisors.

3
4 **ALTERNATIVE EDUCATION**

5 Traditional approaches to discipline—long-term suspensions and expulsions—transfer the
6 problems of the student from the school division to the general government. There should
7 continue to be school alternatives to the normal school environment for students who do not
8 behave appropriately. The state should develop and fund alternatives, including workforce
9 development grants, for students suspended and expelled from school, such as programs
10 designed to encourage obtainment of GEDs, career education, job skills, self-control training and
11 drug and substance prevention. Finally, there is little effective enforcement of truancy laws for
12 students who are over 16 years of age. Some of these students have full time jobs and school
13 divisions have difficulty in locating them. VML encourages the development of initiatives to
14 better enable schools to track these older students, or otherwise determine if changes are needed
15 to truancy laws.

16
17 **EARLY CHILDHOOD DEVELOPMENT & EDUCATION**

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

22
23 Children who are regularly read to and gain basic language skills, who participate in healthy
24 activities and learning experiences, and who learn basic social skills are more likely to enter
25 kindergarten ready to learn. They are also more likely to read at grade level by the third grade.
26 This early progress can lead to continued success in school and ultimately in the workforce.

27
28 VML supports state and local policies and initiatives that spotlight and encourage greater early
29 learning opportunities for children, along with access to information and resources that will help
30 parents and caregivers give young children the greatest chances to learn and grow in healthy
31 ways. This will ensure a better economic future for families and communities.

32
33 VML supports increased state funding for pre-kindergarten students to ensure that all children
34 entering the public system have the social and intellectual skills necessary to be successful
35 students.

36
37 **HIGHER EDUCATION**

38 Currently, community colleges are required to offer reduced tuition for high school students.
39 Local schools, however, are required to make up the difference in tuition. This clearly is an
40 unfunded mandate. The state should find other resources within its higher education budget to
41 pay for the tuition for these students.

42 **WORKFORCE DEVELOPMENT**

43 VML supports innovative approaches, including creation of satellite campuses, to ensure that
44 training and certification programs are widely available to high school students, GED candidates,
45 returning veterans, and other residents, particularly those representing underserved and at-risk

1 populations. Such programs are vital to prepare Virginians for careers important to Virginia's
2 economic prosperity.