

# **WEST VIRGINIA LEGISLATURE**

## **2025 REGULAR SESSION**

**Introduced**

### **House Bill 2935**

By Delegate B. Smith

[Introduced February 25, 2025; referred to the

Committee on the Judiciary then Finance]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding a new article,  
2 designated §9-11-1, §9-11-2, §9-11-3, §9-11-4, and §9-11-5, relating to creating the West  
3 Virginia Comprehensive Approach to Homelessness, Substance Abuse, and Prisoner  
4 Reintegration Pilot Program; defining the mission of the program; and providing for the  
5 administration of said program.

*Be it enacted by the Legislature of West Virginia:*

**ARTICLE 11. WEST VIRGINIA COMPREHENSIVE APPROACH TO HOMELESSNESS,**  
**SUBSTANCE ABUSE, AND PRISONER REINTEGRATION PILOT PROGRAM.**

**§9-11-1. Mission.**

1 The mission of this pilot program is to create two comprehensive facilities dedicated to  
2 addressing the root causes of homelessness, substance abuse, and prisoner reintegration and to  
3 measure the effectiveness of these facilities. The aim is to provide holistic rehabilitation services  
4 that encompass mental, physical, and medical care, ensuring individuals receive the support they  
5 need to rebuild their lives.

**§9-11-2. Key program provisions.**

1 (a) The West Virginia Comprehensive Approach to Homelessness, Substance Abuse, and  
2 Prisoner Reintegration Pilot Program shall operate for one year from the passage of this bill to  
3 measure to practicality and effectiveness of this program. The pilot program will include two  
4 facilities in the following locations:

5 (1) One facility will be located in north-central West Virginia, serve the areas surrounding  
6 Morgantown and the norther portion of the state, and include the accommodations provided for in  
7 this article; and

8 (2) One facility shall be located in south-central West Virginia, serve the areas surrounding  
9 Charleston and the southern portion of the state, and include the accommodations provided for in  
10 this article.

11        (b) After the completion of the pilot program, the permanent program shall consist of West  
12    Virginia being divided into 11 districts comprised of five counties each with a facility in each district.

13    The facilities will be designed to resemble hotels and provide a comfortable, healing environment.

14        (c) The components of these facilities shall include:

15        (1) Private, residential rooms that will provide a suitable environment for patient treatment.

16        (2) Separate, family accommodations that will provide lodging for families visiting patients  
17    in the program.

18        (3) Medical staff that will be staffed around the clock to provide as needed medical  
19    services.

20        (4) Each facility will be equipped with a kitchen and garden sufficient in size and means to  
21    provide patients with the opportunity to grow, harvest, and prepare their own food. The fruits and  
22    vegetables harvested will also be offered to local food pantries to help feed the communities in  
23    which the facilities operate.

24        (5) Classrooms sufficient to host financial literacy and vocational classes.

25        (6) Programs designed to provide patients with volunteer opportunities to serve their local  
26    community and learn social skills.

**§9-11-3. Treatment Phases; Financial support and housing assistance; Community**  
**integration; and Completion mandate.**

1        (a) Treatment will be broken down into the following phases:

2        (1) Enrollment: Once a patient is enrolled either voluntarily or by a court, the patient will not  
3    be allowed to leave until they have successfully completed all aspects of the program.

4        (2) Detoxification: Patients will undergo detox under medical supervision.

5        (3) Rehabilitation: Treatment will focus on overcoming addiction.

6        (4) Financial Education: Patients will learn money management skills.

7        (5) Vocational Training: The program will collaborate with trade schools, colleges, and  
8    unemployment offices to provide job training.

9           (b) The facility will assist patients in reestablishing credit and finding housing after  
10        treatment.

11           (c) The program will coordinate with federal and state agencies, nonprofit organizations,  
12        trade schools, colleges, and universities to provide a robust network of resources and  
13        opportunities.

14           (d) The program will provide participants with the opportunity to plant, maintain, and  
15        harvest a community garden to foster a sense of community, responsibility, and self-sufficiency  
16        which will also provide food for the facility and local food pantries.

17           (e) Participants will not be allowed to leave the facility until they successfully complete the  
18        program, ensuring they are fully prepared for reintegration into society.

#### **§9-11-4. Program Focus Areas.**

1           (a) Substance Abuse Withdrawal Program – Upon entry into the program, patients will  
2        receive a comprehensive medical exam to address physical and mental health issues and needs.  
3        This exam, and the continuing care and support throughout the program, will involve review by:  
4           (1) Doctors who will assess overall health of the patient by conducting physical  
5        examinations, ordering any necessary tests, reviewing medical conditions, medications being  
6        taken, and overseeing the detoxification process.

7           (2) Nurses who will provide day-to-day care through monitoring vital signs, administering  
8        medications, and providing emotional support by being the first point of contact for patients  
9        seeking help.

10           (3) Clinical Associates who will conduct initial assessments, gather patient information,  
11        and assist with the implementation of treatment plans.

12           (4) Psychologists who will focus on the mental health of patients through therapy  
13        addressing the causes of issues patients are facing using various therapeutic techniques.

14           (5) Psychiatrists who will examine patients to help diagnose mental health disorders, treat  
15        said disorders by prescribing medications to help address the disorder, and help the overall

16 treatment plan.

17       (6) Mental Health and Substance Abuse Specialists will help each patient develop  
18 interventions specifically for the patient's individual needs while addressing their mental health  
19 and substance abuse issues.

20       (7) Counselors will provide emotional and psychological support through individual and  
21 group therapy sessions, helping patients explore their own feelings, and helping patients develop  
22 the tools necessary to achieve success in the program.

23       (8) Additionally, the support offered by the program while patients are in the facility will  
24 continue after they leave the program through additional services aimed at helping patients  
25 maintain long-term sobriety and success in the community.

26       (b) Homelessness Reintegration Program – This program will utilize similar staff to the  
27 Substance Abuse Withdrawal Program but will focus on the unique challenges faced by patients  
28 struggling with homelessness and will be designed to help overcome barriers to finding stable  
29 housing and long-term success.

30       (c) Prisoner Reintegration Program – This program will also utilize similar staff to the  
31 preceding programs but will focus on the unique challenges faced by those leaving incarceration  
32 and the struggles they face as they attempt to reintegrate into society.

**§9-11-5. Facility location, layout, and structure; Programs offered for patients in the**  
**program.**

1       (a) Facilities shall be established in serene, rural areas and have access to fully  
2 operational farm. Further, the facilities will resemble a hotel featuring three separate buildings for  
3 different programs. The facilities shall include:

4       (1) Patient rooms that will have their own separate bedrooms and bathrooms, a shared  
5 kitchenette with refrigerator and microwave, and a living room with a desk suitable for writing.

6       (2) An education building that provides space for classes involving literacy, numeracy, and  
7 other academic skills, as well as workshops to learn trades and practical skills.

8        (3) A main building including offices and clinics where the administration of the program  
9        and emergency medical services can be performed.

10        (4) Gym and wellness facilities for the patients to improve their physical health and well-  
11        being.

12        (5) A fully equipped kitchen and dining room where patients can prepare meals and share  
13        a communal space to eat and socialize.

14        (6) An operational farm or garden where patients can grow fruits and vegetables and, if  
15        available, help maintain livestock on a working farm.

16        (b) The utilization of these facilities will help to support various programs, including:

17        (1) Cooking instruction and healthy meal preparation;

18        (2) Financial literacy and management program;

19        (3) Educational and vocational training program;

20        (4) Community service program;

21        (5) Exercise and healthy eating program; and

22        (6) Work programs throughout the community.

NOTE: The purpose of this bill is to create the West Virginia Comprehensive Approach to Homelessness, Substance Abuse, and Prisoner Reintegration Program, define the mission of the program, and provide for the administration of said program.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.