The Department of Mental Health and Developmental Disabilities (TDMHDD) is the state’s mental health, substance abuse, and developmental disabilities authority. Its mission is to plan for and promote the availability of a comprehensive array of quality prevention, early intervention, treatment, habilitation, and rehabilitation services and supports based on the needs and choices of individuals and families served. The department is responsible for system planning, setting policy and quality standards, system monitoring and evaluation, disseminating public information and advocating for persons of all ages who have mental illness, serious emotional disturbance, substance abuse disorders, or developmental disabilities. TDMHDD annually assesses the public’s needs for mental health, substance abuse, and developmental disability services and supports. Title 33 of the Tennessee Code Annotated requires that functions of TDMHDD be carried out in consultation and collaboration with current or former service recipients; their families, guardians, or conservators; advocates; providers; agencies; and other affected persons and organizations.

A planning and policy council advises TDMHDD about plans, policies, legislation, service system needs, and budget requests; a majority of the council’s membership must be service recipients or members of their families.

History

Upon recommendation of then Governor Frank Clement, the Tennessee General Assembly created the department on March 13, 1953, to provide services to persons with mental illness and mental retardation.

In 1973, under the Comprehensive Alcohol and Drug Treatment Act, the General Assembly gave the department responsibility for developing programs for treating and preventing alcohol and drug abuse. In July 1991, the Division of Alcohol and Drug Abuse Services was transferred to the Department of Health and, in February, 2007, back to TDMHDD.

Beginning in 1978, the department was charged with licensing facilities that provide services to persons with mental retardation, mental illness, and alcohol and drug abuse. The responsibility for management and operation of the Division of Mental Retardation Services was transferred to the Department of Finance and Administration by executive order in 1996.

The department’s name was changed to the Tennessee Department of Mental Health and Developmental Disabilities in 2000 as a result of a comprehensive revision of the mental health and developmental disability law. The law revision also expanded the department’s licensure authority from only facilities or agencies to include services, effective March 1, 2001. The revision of the law expanded eligibility for direct services to persons with developmental disabilities, other than mental retardation, beginning March 1, 2002. In 2003, the department celebrated its 50th anniversary.
Mental Health Services

The department serves people with mental illness with a significant focus on adults with serious mental illness and youth who are seriously emotionally disturbed. The department is responsible for service development, planning, evaluation and data analysis; interstate and inter-facility transfers, advocacy, and education; and technical assistance and training. It administers state and federal funds allocated for mental health services and several specialized grants for criminal and juvenile justice activities, housing, and other recovery-based services. The department, through an Interagency Agreement, administers TennCare Partners (the behavioral health program) for the TennCare Bureau. Additionally, in cooperation with the Bureau of TennCare, the department is responsible for Pre-Admission Screening and Resident Reviews (PASRR) for individuals who apply for nursing home care or reside in a nursing home and may be in need of mental health services.

The department operates five regional mental health institutes (RMHI) which provide inpatient psychiatric services for individuals with mental illness or serious emotional disturbance who cannot or will not be served by the private sector due to the intensity of their clinical needs, the behavioral challenges they present, and/or insufficient resources. The RMHIs also serve individuals ordered by the courts for evaluation and/or treatment. All of the RMHIs have been fully accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) since 1978. In addition, they are all certified by the Centers for Medicare & Medicaid Services (CMS) for participation in the Medicare and Medicaid (TennCare) programs.

Alcohol and Drug Abuse Services

The division’s mission is to improve the quality of life of the people of Tennessee by providing an integrated network of comprehensive addiction services that foster self-sufficiency and protect those who are at risk. The Division of Alcohol and Drug Abuse Services’ scope of responsibilities includes planning, developing, administering, and evaluating a statewide system of substance use, abuse, and addiction prevention programs and services for the general public, persons at risk for substance abuse, and persons abusing substances. These responsibilities are carried out through partnering with other government agencies, community organizations, and advocacy groups. Treatment and prevention services are provided by community-based agencies through contracts.

Regional Mental Health Institutes

- Lakeshore Mental Health Institute, Knoxville
- Middle Tennessee Mental Health Institute, Nashville
- Western Mental Health Institute, Bolivar
- Moccasin Bend Mental Health Institute, Chattanooga
- Memphis Mental Health Institute, Memphis
Related Boards and Councils

**TDMHDD Planning and Policy Council.** The council has a minimum of seventeen members, not including ex-officio members, appointed by the Commissioner for three-year terms. The speaker of the Senate and the speaker of the House of Representatives each appoint one legislator as a member of the council. The Governor is an ex-officio member of the council and appoints the chairman and may appoint representatives of state agencies as ex-officio members of the council.

Current or former service recipients or members of service recipient families comprise a majority of the council’s membership and represent mental health, substance abuse and developmental disabilities. Service recipient advocates for children, adults and the elderly, service providers, agencies, and other affected persons and organizations are also represented.

TDMHDD also has a state Developmental Disabilities Planning and Policy Council, a state Mental Health Planning and Policy Council, and regional citizen-based planning and policy councils. These councils advise TDMHDD Planning and Policy Council on the three-year plan, including the desirable array of services and supports for service recipients and their families, and provide information and advice to the department on policy, formulation of budget requests, and development and evaluation of services and supports. These councils provide citizen participation in policy planning. They represent service recipients and their families; service recipient advocates for children, adults and the elderly; service providers; agencies; and other affected persons and organizations. A majority of each council’s membership is made up of current or former service recipients or members of service recipient families.

**Facility Boards of Trustees.** Each of the department’s facilities has a board to advise the chief officers and inform the public about the needs and activities of the facility. Members are appointed by the commissioner for three-year terms.

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**Virginia Trotter Betts**

Virginia Trotter Betts, a well-known leader in the arenas of health and mental health policy, was appointed by Governor Phil Bredesen as Commissioner of the Tennessee Department of Mental Health and Developmental Disabilities in January of 2003 and reappointed in January, 2007. Before her appointment, she was the Director for Health Policy and Professor of Nursing at the University of Tennessee Health Sciences Center (UTHSC). Previously, she served as Senior Advisor on Nursing and Policy to the Secretary and Assistant Secretary of Health at the U.S. Department of Health and Human Services (HHS). She was actively engaged in the Surgeon General’s priorities and initiatives on mental health including development of the Surgeon General’s Call to Action to Prevent Suicide; Mental Health: a Report of the Surgeon General; and the national campaign to combat the stigma of mental illness. She headed the HHS Interdepartmental Mental Health Policy Team, which earned the 2000 DHHS Secretary’s Award for Distinguished Service. Betts is an international expert on nursing and the health care work force as well as mental health and is a past president of both the American and Tennessee Nurses Associations. A nurse attorney, she is a graduate of UTHSC, the Vanderbilt School of Nursing, and the Nashville School of Law and served as a Robert Wood Johnson Health Policy Fellow at the Institute of Medicine. She holds an honorary doctorate from the State University of New York for her work on health, the health professions, and public policy.