

County's crisis receiving center taking shape

Kaine, local leaders visit Woodbridge site

» BY JARED FORETEK
jforetek@insidenova.com

The former Gander Mountain store in Woodbridge didn't look like much Monday morning, its shop floor empty, concrete flooring exposed and paint peeling in places.

But in Prince William County Community Services Director Lisa Madron's hands were plans of what the 79,000-square-foot space could soon be for those in desperate need of mental health services.

Madron was leading Sen. Tim Kaine, D-Va., and over a dozen other elected officials and local health care leaders on a tour Monday of what will soon be the county's first crisis receiving center, a project Kaine and his congressional colleagues helped fund through an appropriations request.

Scheduled to open in 2024, the center will have 16 units for 23-hour observation of adults and 16 in-patient beds for those who require monitoring beyond 23 hours, typically three to five days, according to Madron. As of right now, the plan is for eight youth observation units and eight youth beds, although leaders are hopeful that they can attain approval for a 16-by-16 youth setup as well.

The space is there for additional units, Madron said. And increasing the number of beds could actually be more cost-effective, as the additional beds would require minimal additional staffing but would increase reimbursement revenues. Most importantly, allowing for more youth beds and observation units would do more to meet the growing community needs.

GAME-CHANGING MODEL

At a roundtable discussion at Sentara Northern Virginia Medical Center in Woodbridge, Chris Pierson, Sentara's vice president of operations, said the hospital saw a 22% increase in the number of patients requiring psychiatric evaluations in just the last year.

"It's an epidemic across the country," he said.

The center – staffed with psychiatric providers, registered nurses, licensed care managers and behavioral health technicians – will also have withdrawal management resources for those who need it.

And unlike similar centers that require a referral of some sort, the county's receiving center will accept walk-ins and drop-offs, as well as people under temporary detention orders and others who meet criteria for admission to an inpatient psychiatric unit.

"Here, they walk in and it's, 'How can we help you? What do you need?'" Madron told the assembled crowd. "This model, I think, is game-changing."

The big idea for the county is to have somewhere with a full suite of mental health services that isn't the hospital – where psychiatric visits are an ever-growing burden – or a jail. According to the county's statistics, of the five big Northern



Rev. Keith Savage of VOICE, left, and Sen. Tim Kaine, center left, discuss plans for the county's crisis receiving center inside the old Gander Mountain store in Woodbridge March 20.

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Virginia counties, Prince William has by far the highest percentage of "temporary detention order" patients who need to be placed out of area due to capacity issues.

And because of its unique operating model, Kaine said, the county's center could become a model for elsewhere in the commonwealth.

"We're going to watch this very, very closely," Kaine said. "If it works in Prince William, well what about Roanoke and Salem?"

Kaine and Sen. Mark Warner, D-Va., helped the county secure over \$2 million in one-time federal earmark funding last year to help with the center's buildout. The bulk of the funding to stand up the facility is coming from the state, which is kicking in over \$10 million. Prince William County, which is contributing over \$4 million to open the center, will pay the majority of its operating expenses with \$2.7 million.

The county expects the center to bring in about \$8.3 million in revenue annually from Medicaid, Medicare and private insurance reimbursements. Annual operating costs are projected at about \$15 million.

MORE WORK TO BE DONE

At the roundtable discussion with several mental health professionals, there was acknowledgement that the center's model – while potentially a "game-changer" for the county and its ability to divert patients from jail or the hospital – has some limitations.

A lot of the discussion centered around those reimbursements. Advocates and many experts say the reimbursement rates for mental health service providers are inadequate and have led to a significant shortage of providers, some of whom don't take insurance because of the onerous regulations and lower pay.

Steve Liga, executive director of the Potomac Health Foundation, told Kaine that the staffing situation for many nonprofits

has become so challenging that his foundation will sometimes have to reject grant requests just because it knows the recipient won't be able to staff up to carry out the programming the funding is for. Last year, he said, his organization received more grant proposals for mental health services than any time he could remember.

"We know they'll never be able to hire the staff to do the work that they would like to do," Liga told Kaine. He said he had to leave a prior job as a substance abuse treatment provider because of the pay. "What types of solutions might you be thinking about in order to help get people to want to come into the field ... and then keep them in the field? You can't really make a good living if you're working at a nonprofit and you're the only breadwinner and you're doing sub-

stance abuse treatment ... You're struggling."

Kaine said the federal government would need to start offering more public service loan forgiveness for all kinds of mental health providers, and he agreed that more should be done to streamline the licensing process and add more interstate licensing reciprocity.

State Del. Elizabeth Guzman, D-31st, also said she had made licensing issues a priority for her office and that a bill of hers, if signed by Gov. Glenn Youngkin, would kick off a study about improving reciprocity.

Just as the county has worked to invest more in its behavioral health services through the crisis receiving center, Youngkin and officials at the state level have made mental health funding a priority in Richmond. But as state Sen. Jeremy McPike, D-29th, pointed out at Sentara on Monday, a lot of money is riding on the ongoing state budget showdown.

Youngkin's budget proposal included \$58 million for more crisis centers, while the Republican-controlled House of Delegates' budget included \$83 million and the Democratic-controlled Senate's had over \$88 million. The Senate budget also included additional money to help recruit more psychiatric nurse instructors and \$17 million for an increase to the Medicaid reimbursement rate for some services. Both the Senate and House budgets include over \$16 million for youth mental health services.

Kaine said the county's work serves as a sort of pilot for the new crisis center funding coming through the upcoming state budget, whichever side wins out.

"One of the reasons you do these ... expenditures is to do a pilot, do an experiment, and then learn from it," Kaine said. "This is bipartisan. The state's interested in it ... and we're interested in Congress."



Prince William County Community Services Director Lisa Madron, right, shows a proposed layout for the 79,000-square-foot crisis receiving center on March 20.

JARED FORETEK | INSIDENOVA

Opioid settlement funds flowing to county, cities

Leaders look to establish 'peer recovery pipeline'

» BY JARED FORETEK
jforetek@insidenova.com

Prince William County is eying what to do next with its slice of the \$50 billion coming from opioid-related lawsuit settlements, with new plans to partner with Manassas, Manassas Park and George Mason University on its new opioid addiction center.

The county is eligible for \$4.3 million in a direct distribution from the Virginia Opioid Abatement Authority, which was established by the General Assembly to disburse the commonwealth's portion of two major opioid settlements. It can also receive an additional \$1.9 million for meeting certain other standards for use of the funds. From those two allotments, the county is estimated to receive \$350,000 annually from the state authority for the next 18 years.

From a third tranche of money, the county is looking for \$1.4 million to partner with the two cities and George Mason for a new Mason Empowerment Center, which the university recently announced would receive \$1 million in federal earmarks to get off the ground. According to their application for funding to the VOAA, the three cities would go in on a new community opioid coordinator, which would

coordinate the opioid response efforts in the Prince William region and collect data on those efforts.

In a separate application, the three localities and Mason would set up a "peer recovery pipeline" meant to "train and develop work-ready peer recovery specialists for employment with public or private agencies," Lisa Madron, Prince William County's director of community services, said Tuesday.

Peer recovery specialists are people who have successfully gone through recovery and work with those suffering from addiction. Right now, specialists have to go through a state-certification process that takes 500 hours – often unpaid – to complete. With the VOAA money, George Mason would build out a pathway for paid, work-based training with the aim of strengthening the peer-recovery workforce in the region.

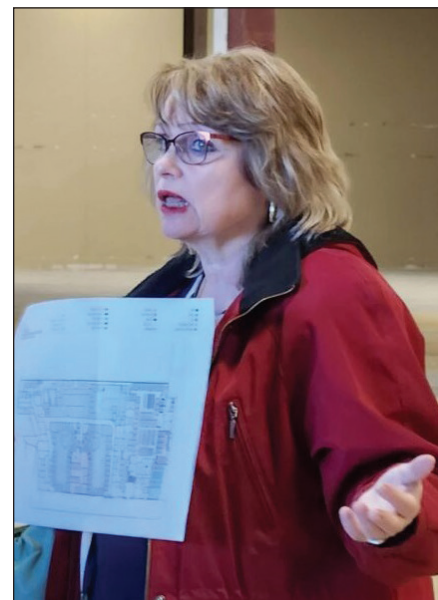
"We believe that this peer pipeline will create work-ready peers that are in high demand across our region," Madron said.

According to the Virginia Department of Health, the county shattered previous overdose death records in 2020 and 2021, the last full year for which data is available, with 103 and 95, respectively. All opioids accounted for 89 and 83 of those deaths, respectively, while fentanyl – the extremely potent, addictive and deadly synthetic opioid – accounted for 75 of the county's 95 overdose deaths in 2021.



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— LISA MADRON, DIRECTOR OF COMMUNITY SERVICES



Lisa Madron

In 2013, fatal drug overdoses became the leading cause of unnatural death in Virginia, beating out gun deaths and motor vehicle deaths. Since then, the number of yearly overdose deaths have nearly tripled, going from 914 in 2013 to 2,669 in 2021. Similar trends have occurred across the country.

The settlement money from which VOAA draws came primarily through a \$26 billion settlement between Johnson & Johnson, the country's three largest pharmaceutical distributors and states and cities throughout the U.S. Finalized in 2022, the settlements did not force the pharmaceutical companies to admit

guilt, but they were brought due to the industry's role in aggressively marketing and distributing opioids, often with false claims about their addictiveness and little oversight about the volume of drugs being prescribed.

Prince William County has already received its first two distributions of money from the first tranche of settlement funding, using it for educational campaigns aimed at youths and "leave behind bags" with overdose referral information for the fire department to leave after handling an overdose.

Youngkin pledges to transform behavioral health system

Event in Triangle draws hundreds

» BY JARED FORETEK
jforetek@insidenova.com

There's another pandemic facing young people.

That was the message from faith leaders, health officials and Gov. Glenn Youngkin at Mt. Zion Baptist Church in Triangle Sunday, as they gathered to discuss potential solutions to troubling behavioral health trends facing young people in Northern Virginia and beyond.

"We have another pandemic. It is the pandemic of behavioral health, and it affects everyone," Youngkin said.

Sunday's event was organized by VOICE, an interfaith coalition of religious communities and civic organizations in Northern Virginia. Members from dozens of houses of worship and community groups were in attendance, as well as public officials from Northern Virginia localities and school systems.

Amid the Christian, Jewish and Muslim prayers spoken from the Mt. Zion pulpit Sunday, Jennifer Wicker of the Virginia Hospital & Healthcare Association read some sobering statistics:

- Between 2018 and 2022, 12.4 per 100,000 Virginia teenagers died by suicide, above the national average of 10.9.
- Between October 2022 and March 2023, Northern Virginia saw a 10% increase in youth emergency room visits for opioid and other drug overdoses.
- The annual number of overdose deaths in Virginia has more than doubled since 2015, reaching more than 2,500 in 2022.

At the same time, the levels of behavioral health staffing in the state continue to lag: 88 of Virginia's 133 localities have no child or adolescent psychiatrist, many areas across the state lack crisis receiving centers, and hospital beds continue to fill up with patients in the midst of mental or behavioral health crisis without a better option for treatment.

Youngkin and the hundreds in attendance listened as Rev. Andra Hoxie of Faith A.M.E. Woodbridge told the story of a parent from her community driving home to find two ambulances for their two children who had overdosed.

"We are not seeking sympathy. We are looking for empathy," she said.

Herndon Police Chief Maggie DeBoard discussed how law enforcement is increasingly coming into contact with young people in crisis.

Melissa Garcia from Dominion Hospital in Falls Church talked about the de-stigmatization that still needs to take place around issues of mental health.

And Kayla Bravo, a Virginia Commonwealth University student from Northern Virginia, told the story of her 19-year-old friend dying of a fentanyl overdose.

"It was absolutely heartbreaking. There is absolutely no excuse for the pain that has been brought to my generation and to our families," Bravo said.

COMMITTING RESOURCES

In response, Youngkin laid out his commitment: a comprehensive reform of the state's behavioral health system and a pledge to make the issue his administration's top priority over his remaining two-and-a-half years in the governor's office.



Gov. Glenn Youngkin pledged comprehensive reform of the state's behavioral health system at Mt. Zion Baptist Church in Triangle Sunday. JARED FORETEK | INSIDENOVA

The state budget includes over \$430 million in incremental behavioral health funding for the current fiscal year, and he urged the General Assembly to reach an agreement on his new budget proposal, which would add another \$230 million in funding for mobile crisis teams, school-based mental health programs and more. More than \$50 million would also go to increasing the number of crisis receiving centers like the one Prince William County is set to open in Woodbridge next year, which Youngkin said would soon be the "best in the nation."

"This isn't a partisan moment. It's a chance to say that there's plenty of money in the system. We can pass a budget that can fund this and we can get going, be-

cause I don't think Virginians should wait any longer," Youngkin said.

He also committed to meeting with VOICE and other groups again in September to hear their specific requests for the fiscal 2025-26 budget.

"We look forward to meeting with Gov. Youngkin and his leadership team again in September to discuss our concrete proposals for additional reforms and funding, building off the important foundation provided by the Right Help, Right Now plan," VOICE Co-Chair and Emmaus United Church of Christ pastor Kristen McBrayer told InsideNoVa, referencing the Youngkin administration's name for his reform plan. "This issue is not going away. Tragically, there will be more overdose deaths, more suicides, and more youth mental health crises to come, and as a community we will have to repeatedly ask ourselves if we are ready for the hard work required to make change."

Three days before the VOICE event, it was reported that Youngkin's administration had quietly removed LGBTQ+ youth resources from the Virginia Department of Health's website. A 2022 Trevor Project survey found that nearly half of LGBTQ youth seriously considered attempting suicide last year.

Youngkin administration Press Secretary Macaulay Porter told the Washington Post the move was part of his emphasis on parents' rights. VOICE declined to comment on the change to the VDH website, and it was not discussed Sunday.

Youngkin told the faith and community groups in attendance that it would take more than just the state government to help young people overcome the growing challenges they face. It would take faith communities, local governments, non-profits and involved parents.

But as for his administration, he said, his priorities should be clear to everyone.

"Nobody should hear anything different," Youngkin said. "Top priority for what we're going to do over the next two-and-a-half years is to transform our behavioral health system."



Hundreds gathered at Mt. Zion Baptist Church in Triangle Sunday to discuss increasing behavioral health problems faced by Northern Virginia's youth. JARED FORETEK | INSIDENOVA