

Virginia Opioid Abatement Authority Application for Awards for Cooperative Projects Involving Cities and Counties

1. Contact Information

This application is for cooperative projects consisting of a cooperative partnership between at least two cities and/or counties within the same Department of Behavioral Health and Developmental Services (DBHDS) region.

Complete this table for all cities and/or counties involved in the cooperative partnership.

Name of City/County	Contact Person	Mailing Address	Phone #	Email
Rockingham County	Trish Davidson	20 E Gay Street Harrisonburg, VA 22802	540-564-3010	tdavidson@rockinghamcountyva.gov
Rockingham County	Ann Marie Ritchie	20 E Gay Street Harrisonburg, VA 22802	540-564-3010	amritchie@rockinghamcountyva.gov
Harrisonburg City	Luke Morgan	409 S Main Street Harrisonburg, VA 22801	540-432-7739	luke.morgan@harrisonburgva.gov

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2. Fiscal Agent

- a. One of the participating cities or counties must serve as the fiscal agent for the cooperative project. The fiscal agent will be responsible to ensuring compliance with both financial and programmatic reporting requirements on behalf of the cooperative partnership.
- b. City/County Serving as Fiscal Agent Rockingham County city county
- c. Physical address: 20 E Gay Street, Harrisonburg VA 22802
- d. Mailing address: 20 E Gay Street, Harrisonburg VA 22802
(if different than physical address)
- e. Contact Person for this application
- i. Name: Trish Davidson
- ii. Job Title: Assistant County Administrator
- iii. Office Phone: 540-564-3010 Cell Phone: 540-578-6712
- iv. Email: tdavidson@rockinghamcountyva.gov

3. Agreements

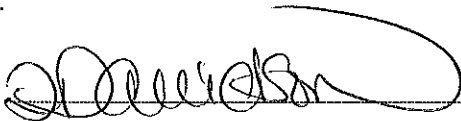
- a. Attach a copy of the cooperative partnership agreement between the participating cities and/or counties for the project. The agreement should also designate the city or county selected as fiscal agent for the cooperative project. A SAMPLE agreement is available here.
- i. If any participating city and/or county elects to allocate a portion of its Individual Distribution from the OAA to this regional project, the Cooperative Partnership Agreement should clearly document the commitment and amount.

4. Signature

Signature section must be completed by a person designated with signatory authority in the MOU/MOA noted in Part 3.a of this application.

"I swear or affirm that all information contained in and attached to this application is true to the best of my knowledge."

Signature



Print Name

Trish Davidson

Title

Assistant County Administrator

Date

May 5, 2023

5. Project Proposal

Complete the information below for the project the cooperative partnership is requesting to be funded.

a. Is this project:

A new effort for the participating cities/counties.

A proposed supplement or enhancement to a project or effort that is already in place.

How long has the project existed? 2015

A combination of enhancing an existing project/effort with new components.

How long has the project existed? _____

b. Provide a brief narrative description of the proposed project including the requested term (1-5 years).

The proposed project will divert individuals with MHD's and SUMHD's from arrest and hospitalization. The region's crisis co-response unit will be an effective and efficient way to enhance support for individuals with MHD's and SUMHD's in order to prevent re-hospitalization and re-incarceration. The CRU currently serves both Harrisonburg and Rockingham County.

More than half of referrals (58.2%) in 2021-22 were for individuals residing in Harrisonburg, which is reflective of the proportion of calls for service in the region (57.6%), though not of the city population, which comprises just 38.2% of the service area. Of note, 2.3% of those served were active military service members and 4.5% were veterans. Additionally, 3.6% spoke English as a Second Language. A majority (63.5%) of those served by CRU had a previous mental health diagnosis, 40.7% were enrolled in mental health services at the time of assessment. 42.1% had been prescribed medication, although just 32% were taking their prescribed medication.

In 2019, a JMHCP grant allowed RHJMHC to expand from a part-time team to a full-time co-response unit (CRU), consisting of a certified mental health clinician and a law enforcement officer who provide support to first responders and individual follow-up, including wellness checks and emergency case management. Additionally, the project created a specialized program for female offenders with MHDs/SUMHDs that offers expanded treatment, supervision, and residential support. As a specific response to opioid abatement, the CRU will expand screening and tracking for substance use (including opioid use) and distribute material on treatment and harm reduction outreach efforts (e.g., medically assisted treatment (MAT), Naloxone, fentanyl test strips, etc.).

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c. Describe the objectives of this project

The projects objectives include: 1) Provide funding and training for first responders to participate in pre-arrest diversion programs, post-overdose response teams, or similar strategies that connect at-risk individuals to behavioral health services and supports; 2) Provide treatment and recovery support services; 3) Provide comprehensive wrap-around services to individuals with OUD, including housing transportation, job placement/training, and childcare; and 4) Support mobile intervention, treatment, and recovery services, offered by qualified professionals and service providers, such as peer recovery coaches for persons with OUD and any co-occurring SUD/MH conditions and for persons who have experienced an opioid overdose; 5) Expand harm prevention outreach efforts with distribution of Naloxene and Fentanyl test strips to at-risk individuals.

d. How was the need determined and how does that need relate to abatement?

A recent analysis of 911 calls showed that mental health-related calls for service (MH CFS) have increased by 10% over the past three years, from 2,510 unique CFS in 2019-20 to 3,040 in 2021-22. Rural townships in the county experienced the greatest growth, with an increase of 47.6%. Over two-thirds of calls (68.9%) were motivated primarily by mental health concerns, in which no additional law enforcement issues were noted by dispatch (e.g., suspicious or disorderly contact, weapons, drugs and alcohol, etc.). MH CFS include mental health calls (32.4%), suicide threats or attempts (16.2%), magistrate-issued emergency custody orders (ECO) and temporary detention orders (TDO) (11.5%), and welfare checks (8.5%). The increase in MH calls surpassed population growth in the region (US Census, n.d.). In addition, in 2020-21, HRC SB Emergency Services fielded more than 1,100 emergency crisis calls, the area's co-response unit (CRU) recorded more than 630 follow-up visits and wellness checks, and nearly 500 people were hospitalized for mental health.

There is a high prevalence of mental illness among individuals with opioid use disorders (OUD), increasing their risk of engagement with the criminal justice system. Recent research estimates that among individuals with OUD, 64.3% reported mental illness in the previous year, while 26.9% had a serious mental illness (SMI) (Jones & McCance-Katz, 2019). Limited treatment options and over reliance on the criminal justice system have resulted in disproportionate rates of incarcerations among individuals with OUD and MHDs. For example, a recent report by the Virginia State Compensation Board (2022) on mental illness in local and regional jails revealed that in June 2022, more than two thirds (78.8%) of the 679 inmates at Middle River Regional Jail (MRRJ) had been diagnosed with mental illness, with 319 identified as having a serious mental illness (SMI).

In addition, lack of follow-up care and connections to treatment contribute to higher rates of overdose, suicide, recidivism and continued capacity constraint on the community MH crisis response. RHJMHC must evolve to meet changing community needs and to develop comprehensive systems-level solutions. The RHJMHC advisory committee (see attached RHJMHC Management Structure) has identified several gaps that need to be addressed to strengthen collaboration between law enforcement and behavioral health, develop effective and efficient responses to individuals with SUMHDs.

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e. Who are the targeted beneficiaries, and how many persons are expected to participate per year?

While the overall target population for RHJMHC is individuals with mental illness or co-occurring mental illness and substance abuse (MI/CMISA), each of the CRU programmatic components has specific criteria for eligibility. In order to determine program eligibility, once an individual is referred to CRU via a request for First Responder Support or Wellness Check, the CRU clinician screens them using the Field Assessment to determine whether they present with a MI/CMISA. In order to determine eligibility for further CRU services. Eligibility is as follows:

- _First Responder Support: Individuals presenting with a serious MI or CMISA, as identified by emergency dispatch (i.e., a 911 call) or by first responders when they arrive on the scene.
- _Wellness Checks: Individuals with MI/CMISA who have been referred to CRU for a wellness check directly to the Project Coordinator or by the Harrisonburg Rockingham Community Services Board (HRCSB) Emergency Services Supervisor, via HRCSB staff, law enforcement, the hospital, and other community organizations.
- _Short-Term Follow-Up: Individuals referred to CRU for a wellness check and who CRU determines in need of additional follow-up but do not qualify for or are not interested in HRCSB case management services.
- _Specialized Services for Female Offenders: Women with MI/CMISA who have been assessed as moderate to high risk/high need at any point in the sequential intercept, including 1) women awaiting sentencing (Intercept 2); 2) women released from jail/prison in District 39 (Intercept 4); and 3) women currently under District 39 supervision (Intercept 5).

f. Briefly describe (name or organization, description of role, budget, etc.) the organization(s), including any sub-recipients or contractors (if known) that will be involved in this project. Attach any contracts and/or memoranda of understanding/agreement. If not fully executed, a draft or a narrative describing the scope of services may suffice.

Harrisonburg-Rockingham Court Services Unit, a department shared between the County and the City will be the manager of the project. No sub recipients or contractors are proposed to be used.

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g. Is the project classified as evidence-based?

Yes

No

If yes, attach supporting information to this application.

h. Is the project classified as evidence-informed?

Yes

No

If yes, attach supporting information to this application.

i. Has this project been certified or credentialed by a state/federal government agency, or other organization/non-profit?

Yes

No

If yes, attach supporting information to this application.

j. Has this project received any awards or recognition?

Yes

No

If yes, attach supporting information to this application.

k. Does this project have components other than opioid-related treatment as defined?

No, it is 100% related to opioid treatment

Yes, there are other substances involved

If yes, what is the approximate percentage of the project that covers opioid-related abatement (i.e., 20% of the patients who seek services have opioid-related disorders)?

An estimated 15%-20% of individuals in contact with the Crisis Response Unit had reported SUD (CAGE assessment). 100% of individuals will be provided with material on treatment and harm reduction strategies. (Medically assisted treatment, Naloxone, Fentanyl Test Strips, etc.)

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- l. Attach a budget for that minimally includes FY2024 with line-item details for the project. If carry-over of OAA funds from FY2024 into FY2025 is expected, include this in the line-item budget. If there is intention to renew the funding (maximum of 4 renewals), include the projected budget for each subsequent fiscal year.
 - i. If a city or county in the cooperative partnership is allocating any of its Direct Distributions and/or any of its Individual Distributions from the OAA to this cooperative project, include line items for each as funding sources for the project.
- m. Complete and attach the project timeline workbook for the project minimally for FY2024. If there is intention to renew the funding (maximum of 4 renewals), complete the timeline for each subsequent fiscal year.
- n. Complete and attach the performance measurement workbook for the project minimally for FY2024. If there is intention to renew the funding (maximum of 4 renewals), include the complete the performance measures for each subsequent fiscal year.
- o. *(Optional)* Attach any additional narrative materials explaining the project, along with any research, data, plans, letters of support, articles, or other items that may assist the OAA Board of Directors in making an award decision for this project.



STEPHEN G. KING
County Administrator



ROCKINGHAM COUNTY

BOARD OF SUPERVISORS
DEWEY L. RITCHIE
Election District No. 1
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Election District No. 2
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Election District No. 3
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Election District No. 4
MICHAEL A. BREEDEN
Election District No. 5

RESOLUTION FOR SUPPORT AND AUTHORIZATION FOR VIRGINIA OPIOID AUTHORITY COOPERATIVE PARTNERSHIP APPLICATIONS

WHEREAS, the mission of the Virginia Opioid Abatement Authority (OAA) is to abate and remediate the opioid epidemic in the Commonwealth through financial support in the form of grants, donations, or other assistance; and

WHEREAS, the OAA operates a financial assistance program to support certain cooperative partnerships of cities and/or counties in Virginia that implement regional efforts to treat, prevent, and reduce opioid use disorder and the misuse of opioids; and

WHEREAS, Rockingham County and the City of Harrisonburg have committed to work together to develop and jointly submit applications for regional cooperative partnership funding from the OAA for the following projects:

- Enhance and expand the capacity of the regional mental health Crisis Intervention Team Assessment Center (CITAC); and
- Maintain and enhance the regional Crisis Response Unit (CRU) consisting of a certified mental health clinician and a Rockingham County Sheriff's Deputy; and

WHEREAS, Rockingham County agrees it will execute a legally binding agreement formalizing the cooperating partnership with the City of Harrisonburg if the application for financial assistance is approved; and

WHEREAS, Rockingham County agrees that it will serve as the fiscal agent for the cooperative partnership if it is awarded; and

WHEREAS, the City of Harrisonburg and Rockingham County seek a total of \$85,000 for the CITAC project and \$150,000 for the CRU project in cooperative partnership grant funding from the OAA for Fiscal Year 2024.

WHEREAS, the City of Harrisonburg has committed to allocate \$19,632 of its Individual Distribution from the OAA to the CITAC project and \$39,264 of its Individual Distribution from the OAA to the CRU project for Fiscal Year 2024.

WHEREAS, the County of Rockingham has committed to allocate \$19,632 of its Direct Distribution to the CITAC project and \$39,264 of its Direct Distribution to the CRU project for Fiscal Year 2024.

NOW, THEREFORE, BE IT RESOLVED, the Rockingham County Board of Supervisors hereby authorizes Rockingham County to act as fiscal agent and to execute the cooperative partnership grant application to the Virginia Opioid Abatement Authority and to execute all documents in connection therewith.

ADOPTED this 26th day of April, 2023.

Chairman Dewey L. Ritchie

ATTEST:

County Clerk

**RESOLUTION FOR SUPPORT AND AUTHORIZATION FOR VIRGINIA OPIOID AUTHORITY
COOPERATIVE PARTNERSHIP APPLICATIONS**

WHEREAS, the mission of the Virginia Opioid Abatement Authority (OAA) is to abate and remediate the opioid epidemic in the Commonwealth through financial support in the form of grants, donations, or other assistance; and

WHEREAS, the OAA operates a financial assistance program to support certain cooperative partnerships of cities and/or counties in Virginia that implement regional efforts to treat, prevent, and reduce opioid use disorder and the misuse of opioids; and

WHEREAS, Rockingham County and the City of Harrisonburg have committed to work together to develop and jointly submit applications for regional cooperative partnership funding from the OAA for the following projects:

- Enhance and expand the capacity of the regional mental health Crisis Intervention Team Assessment Center (CITAC); and
- Maintain and enhance the regional Crisis Response Unit (CRU) consisting of a certified mental health clinician and a Rockingham County Sheriff's Deputy; and

WHEREAS, the City of Harrisonburg and Rockingham County are located within the same region of the Department of Behavioral Health and Developmental Services; and

WHEREAS, the City of Harrisonburg agrees it will execute a legally binding agreement formalizing the cooperating partnership with Rockingham County if the application for financial assistance is approved; and

WHEREAS, the City of Harrisonburg agrees that Rockingham County will serve as the fiscal agent for the cooperative partnership if it is awarded; and

WHEREAS, the City of Harrisonburg and Rockingham County seek a total of \$85,000 for the CITAC project and \$150,000 for the CRU project in cooperative partnership grant funding from the OAA for Fiscal Year 2024.

WHEREAS, the City of Harrisonburg has committed to allocate \$19,632 of its Individual Distribution from the OAA to the CITAC project and \$39,264 of its Individual Distribution from the OAA to the CRU project for Fiscal Year 2024.

WHEREAS, the Rockingham County has committed to allocate \$19,632 of its Direct Distribution to the CITAC project and \$39,264 of its Direct Distribution to the CRU project for Fiscal Year 2024.

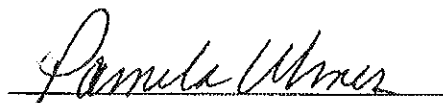
NOW, THEREFORE, BE IT RESOLVED, the City of Harrisonburg City Council hereby authorizes Rockingham County acting as fiscal agent to execute the cooperative partnership grant application to the Virginia Opioid Abatement Authority and to execute all documents in connection therewith.

ADOPTED this 25th day of April, 2023.



Deanna R. Reed, Mayor

ATTEST:



Pam Ulmer, City Clerk