

NAMI Coastal Virginia Proposed Mental Health Priorities (2024)

Our national and state mental health system continues to be broken. A record number of children and adults are experiencing serious mental health and substance use challenges. Governor Youngkin's 2024 "Right Help, Right Now" plan and budget amendments include record investments in mental health. We urge continued support for these investments as a starting point, along with additional improvements.

Virginia's 40 Community Services Boards (CSBs) serve individuals with severe behavioral health conditions and developmental disabilities. They provide a public safety net of care that promotes wellness in Virginia's communities by meeting the complex needs relating to mental illness, substance use disorders and developmental disabilities. To maintain high quality of services, Virginia must invest in a robust mental health workforce to meet the demanding needs and increase funding for crisis care and mobile crisis teams.

Priority 1. Funding the Mental Health Workforce Development. Virginia ranks 23rd in prevalence of mental health needs. However, Virginia ranks 34th in access to behavioral healthcare for all ages. Essential care is delayed or not available for people in need due to staffing challenges. In fiscal year 2023 (July 1, 2022 – June 30, 2023), CSBs spent a significant amount of money on recruitment and retention efforts simply to maintain service delivery, without any additional allocations from the general state fund. The average turnover rate among CSB direct care staff in FY22 was 25.2%, with some CSBs reported vacancy rates above 30%. To address the critical behavioral health workforce needs, Virginia must commit investments and apply resources to attract and retain staff in all settings and in all related disciplines, for our local Community Services Boards.

ASK: Fund the CSB's to create a pipeline of professionals and expand recruitment through incentive programs, such as paid internships, clinical supervision hours so CSBs staff can work toward licensure, student loan repayment programs, and scholarship programs, so CSB staff can increase educational attainment.

Priority 2. Establish 24/7 Crisis Receiving Centers and Mobile Crisis Units in ALL communities throughout Virginia. One of eight emergency room visits involves a mental health or substance abuse condition. Virginians in a mental health crisis are waiting an average of 44 hours in emergency rooms before getting treatment, if at all. A full toolkit of proven community care options is planned, but needs funding. Mobile crisis units, crisis receiving centers, and mobile crisis teams provide the community with highly trained individuals that can apply de-escalatory techniques and prevent situations from becoming uncontrolled or even fatal. <u>Evidentiary Proof:</u> from 2018-2023, the Virginia Beach Mobile Co-Responder Team (MCRT) received 2458 calls for service, 60% were handled in the field, 33% were deferred to MH providers, 14% resulted in ECO/TDO, 9% referred for medical admission, only 2% resulted in arrest. There is similar data from the state of Illinois based on a 3-month 2020 study with 61 calls with 3% in arrests. Unfortunately, in Virginia, only communities with 40,000 or more residents qualify for mobile crisis units, which eliminates many of the rural communities and displaced individuals that could benefit.

ASK: Fully fund the Governors "Right Help, Right Now" 3-year plan. Provide \$20M to fully fund 30+ mobile crisis teams for improved same day access. Expand access to 988 access to rural and displaced individuals. Maintain all portions of STEP-VA and increase funding to compensate for inflation adjustments.

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