MACHINE TRANSCRIPT · CORAGGIO CONSULTING

Fairfax County Board of Supervisors Health & Human Services Committee, Tuesday, February 28, 2023

Date	Tuesday, February 28, 2023
Place	Fairfax County Board of Supervisors, Virginia
Length	1h 29m (video)

- Official meeting video (Fairfax County): https://video.fairfaxcounty.gov/player/clip/2767
- Official Board of Supervisors page (Fairfax County): https://www.fairfaxcounty.gov/boardofsupervisors/

> Machine transcript (speech-to-text) produced by Coraggio Consulting. Not an official county record. Names and numbers may be misspelled; check the video at the timestamp before quoting.

Speech-to-text: whisper.cpp, model large-v3-turbo. Produced 2026-11-04. Each paragraph starts with its time [HH:MM:SS] in the meeting video.

[00:00:07] all righty we are going to go ahead and get started with our uh health and human services committee meeting um we've got a full agenda and a full room so we'll go ahead and um move along i just want to thank one thank everyone briefly for joining us thank all the agencies and committee members for joining us um today we'll be hearing first of all from my brother's keeper uh followed by our children's behavior health plan and finally our opioid response efforts and we have that whole team here with us today but before i move on to the first item i want to turn it over to deputy

[00:00:43] county executive chris leonard for an update on the pending step down of the pandemic era federal benefits thank you supervisor pelczyk and good afternoon everyone board members i just want to acknowledge take some time brief time to acknowledge that we're aware of some of the concerns and questions you're getting in your offices with regards to the the pending step of the pandemic era federal benefits you will recall that we first brought this to your attention in a memo January 13th I believe it was where we talked about Medicaid unwinding and the expiration of the snap benefits admittedly

[00:01:20] that memo was really focused in on our kind of our lead social services agency Department of Family Services and how we were getting ramped up now we were prepared and hopefully giving you in the community some reassurances that we're We were ready for this. And in that memo, we did talk a little bit about some of the coming impacts on food access and food security.

[00:01:40] But admittedly, we could probably do a better job of kind of packaging all of it together and some of the strategies that we have that are going on. The one thing I will call back to that January 13th memo is we told you this wasn't a surprise.

[00:01:56] We knew it was coming. Our state and federal partners have been very clear about what happens when we get to this point. So, and I'll just point out one thing that we'll be in, that I'll share with you in a memo, but our bridge program, you may be aware of our rent assistance bridge program.

[00:02:14] That all was created last April, May timeframe when we looked at the data and we saw what was coming And we saw that we needed something to get us from our pandemic era, 68 plus million dollars that the federal government provided for rent assistance to our whatever our post pandemic rent assistance efforts are going to be, which we know they're going to be greater than what we had pre pandemic.

[00:02:38] So as we figure that out, we did put together the bridge program. That bridge program exists right now. We have partners in the legal services that are helping folks that are having to go through an eviction process. So we continue to be on the ground working with our partners there.

[00:02:56] Acknowledging, though, that maybe all of that needs to be packaged together into a memo. So we're committed. We'll get a memo out to you, let's say, within a week that we'll have that and a lot more around what we're doing, what our strategies are. But certainly after you get that, if you've got more questions or if something doesn't sound quite right, please don't hesitate to pick up the phone, give me a call, and we'll make sure that we're responsive to whatever the questions or needs that you and your constituents have.

[00:03:21] So I just wanted to say that before we got started. Thank you so much, Chris. I very much appreciate that, and I know we won't hesitate to reach out with questions. Thank you. Moving on to our first presentation, and we're excited to have the Brothers Keeper team here. Supervisor Luskina and I have the privilege of sitting on the SCIP, the Successful Children and Youth Policy team, jointly with the school board members, And so we've been able to see the progression and the work, both with My Brother's Keeper as well as with the Children's Behavioral Health Plan that you'll see today.

[00:03:54] But we wanted to make sure that it came to the full board, that they were able to present the progress so far and their commitment, hopefully our commitment, moving forward and to be able to answer any of the questions you may have. So with us today, let me just introduce you and you can take it away, Talika.

[00:04:11] We have Talika Brooks from Venture Philanthropy Partners. Isaac King from the Capital Youth Empowerment Program, and I think we all know Jorge Figueredo from Edu Futuro Executive Director, as well as they are joined today by Carla Bruce, our Chief Equity Officer. So, Ms. Brooks, it is all yours. Thank you so much, Supervisor Paulczyk. And we are so excited to be here today and talk about My Brother's Keeper Fairfax and why and where we are today. So, again, to Laker Brooks and our colleagues, this is really a community-based initiative and so I am going to say that we'll talk about what is My Brother's Keeper, why we

[00:04:48] should join it, what My Brother's Keeper Fairfax is going to focus on, how does it align with and leverage other county priorities, and what our next steps are. And so for that I'm going to turn it over to Isaac King. Good afternoon Board of Supervisors. My name is Isaac King and I serve as the Chief Financial

Officer and one of the co-founders of the Capital Youth Empowerment Program. The My Brothers Keeper Initiative was founded or created in 2014 by President Obama to address opportunity gaps that boys of color face which prevent them from reaching their full

[00:05:26] potential, specifically Black and Latino boys. What we're proposing today is that Fairfax County, led by CYEP and Ediferturo, partner with the My Brothers Keeper Alliance to combine our resources and unleash the power of community working together.

[00:05:43] We want to collaborate with the local government to solve real problems that boys of color face in Fairfax County. Our goal is to improve real-life outcomes and level the playing field when it comes to career readiness and economic mobility so that boys of color can afford to not only live but thrive in Fairfax County after high school.

[00:06:03] The My Brother's Keeper Alliance work is really rooted in six key life milestones. The research shows are especially predictive of later success and where interventions can have the greatest impact. By focusing on these milestones, doing what works, and removing or avoiding roadblocks that hinder systems change, we are working to provide boys and young men of color the opportunity and tools to get ahead.

[00:06:30] And as you can see from the slide, the six key life milestones for boys are kindergarten readiness, third grade reading, graduating from high school, college, and career ready, completing post-secondary education or training, entering the workforce, and keeping kids on track and re-engaging them when they need it. Our work will not solely be focused on educational outcomes, but will focus more on life outcomes, sort of like cradle to career, making sure the youth are ready and prepared to go to work and have a fulfilling career, not just find a job to struggle to make

[00:07:08] ends meet. Our work will specifically focus on boys of color because when we look at the data, it shows us there is a gap, especially around career readiness and economic mobility. For just real quick, for purposes of economic mobility, it describes how someone's economic well-being changes over time. Most often, economic mobility looks at how someone's income changes over their lifetime. When someone improves economically over their life, they're considered upwardly mobile.

[00:07:35] This means their income situation is getting better over the course of their life. And by contrast, when someone's income is flat or decreases over their life, that person is considered downwardly mobile. When you look at all six of the key life milestones for boys and young men of color, three of them tie back to being career ready and in a position to be upwardly mobile so that these people can thrive.

[00:08:00] The three are graduating from high school and being career ready, completing post-secondary education or training and entering the workforce. These are and these are the three milestones that we're planning to work on. I know you're asking yourself, why should Fairfax County join the My Brother's Keeper Alliance?

[00:08:19] That's a great question. This My Brother's Keeper Alliance work already aligns perfectly with the work the county is doing around one Fairfax. The social policy and racial equity work has been going on in Fairfax County, and the My Brothers Keeper Alliance will further link this work to community-based organizations and improve systems to work better for boys and young men of color, and level change at the community level.

[00:08:45] I'll now pass it on to Jorge to talk about some of the data. Yeah, I think that... Thank you so much. When you look at the table that is right in front of you, it is really concerning that in Fairfax County Public Schools and when we're looking at these young students, male students, that when you see the dropout rate for white males, it's only 0.83%, less than 1%.

[00:09:19] But when you look at English language learners, 27.15%. That is unacceptable. And when you look at the Hispanic males, 18.69%. And we know that this is something that is directly related also to the post-pandemic and how the pandemic hit this ethnic group the highest. And when you look at all the other groups, ethnic groups and races,

[00:09:49] We also have a high dropout rate for the Native American and Alaskan males, and this is also something that when you look at Native Hawaiian or Pacific Islander, it's not significant. But again, the one part that we are going to continue fine-tuning this data is that those percentages don't tell you much if they don't have the absolute numbers.

[00:10:13] When you look at the absolute numbers next time, that's going to be even more eye-opening for you. So this is the reason why it is so critical that we partner with My Brother's Keepers Alliance because it is a way that we're going to build the capacity that we need to tackle these serious challenges that we're facing right now.

[00:10:33] I mean, we have right now high dropout rates, chronic absenteeism, and we also are having right now issues with the opioids. All of that is hitting our schools and our students right now, especially the kids of color. So that's something that we need to address.

[00:10:50] Mental health is there, it's on top of the line. We are already seeing kids that are overdosing more and more, and that's something that is not right. So we need to think about supporting this as one part of the strategy of what we're doing with everything else.

[00:11:09] Next, please. So what we're going to try to do is to adopt all six of the, well, out of the six life milestones of the MBK, we are going to focus on three, and that's going to be improving on time high school graduation rates by these young males of color, increasing the number and percentages of the BIMOC obtaining the advanced diploma, because that's another thing that is extremely important, is that we don't want them just only to graduate.

[00:11:39] We want them to have an advanced diploma that will help them secure jobs that are going to be helping them to go with upper mobility. We're also going to be working on reducing the percentage of the BIMOC who are dropping out of high school. This is another thing that I mentioned, which includes going back there, looking at why they have stopped, reengaging them, and bringing them back, and making sure that they will be finishing high school.

[00:12:08] We know that if you don't finish high school, especially in this region, you're not going to be able to do much there. Next. So with MBK Fairfax, we will bring a focus on improving outcomes, specifically for the BIMOC to our work.

[00:12:23] And it does not replace the work that is going on for all boys and even all students. I want to make that clear. This is just a special focus. Same as when we are dealing with the issue of the opioids, we're going to be focusing on that. but that does not mean that we're taking an approach that is to help everybody, because it's all about all the Fairfax County residents.

[00:12:44] We have, MBK was identified by the Chairman's Task Force on Equity and Opportunity, and that was a very smart move. And I think that, you know, looking at us and being part of the One Fairfax, I can tell you, being an organization that serves students regionally, so as you know, Edu Futuro works in Arlington County, Fairfax County, the city of Alexandria, Prince William County, the most progressive county right now is Fairfax.

[00:13:10] And I'm not saying this to, you know, just feel proud, because what you have said is happening. I can tell you, I've been working for more than 23 years. Penny is my supervisor, and she knows his Hispanic committee, and we have seen the changes.

[00:13:29] Things are changing. I can tell you that taking kids that go from, you know, families that make less than $40,000 a year, six years later they are making $100,000 together, that's really impacted. And that's what we plan to do. So that's it.

[00:13:45] So, Terec. So, excuse me. So we have some next. Thank you, Isaac. So we have some next steps, which are, of course, to obtain approval here from this committee, Health and Human Services Committee. And if we are successful, then we will hopefully present in March to the full Board of Supervisors again and then accept the challenge from the Obama Foundation, which requires just writing a letter that we submit to them.

[00:14:15] And then we would have about 180 days to host a local action summit. Usually you also complete a policy audit and a data assessment, but we've already done those components as well so that we can have the time to really focus on having a local action summit that would be really community-led and community-forward.

[00:14:38] So those are our next steps, and we are here to entertain any questions. Wonderful. Well, thank you all very much for the presentation. I've had a chance to see it. I have just a couple of questions, comments. I will turn it over to the chairman and then to my colleagues, and I'll start with Supervisor Luska after the chairman, as he and I have been working with you on this.

[00:14:58] So, number one, what I really appreciate about this is that I know that we'll be taking on all six initiatives, but, you know, targeting on three of them, and I assume we'll continue the work. For me, early childhood is so critical, but as we continue the work there, we'll look at it here.

[00:15:18] Number one, I really appreciate that it is targeted, that we have the data, that you've done the policy audit. I'm looking at Carla, this reminds me quite a bit of targeted universalism and ensuring that we are targeting resources and that you do have the information here from the schools.

[00:15:37] And I think what it shows to me as well is that the schools can't do it alone. Absolutely, you know, we put a lot on our school system. We expect a lot of our school system. They serve a whole variety of students and families. And I think being able to bring these additional resources and that coordination with the county and with our partners is so critical.

[00:15:58] But to that, I guess my only question is I assume that while they are not here at the table with us today, that there is coordination with the schools. And if you could share a little bit more of kind of what the steps will be to create that local action summit and for the partners involved in that.

[00:16:18] And so thank you for that question. so yes this is about community not only we're not putting the weight of this work on the school system and so our two co-chairing organizations are really going to

bring together we have a steering committee for the local action summit we would lean into that steering committee and expand it to look at other community based partners who are working on the ground with boys and young men of color to come together and help us work with the school system but also with a broader Fairfax County government organizations and agencies to have a community local action

[00:16:53] summit. And so it really is where you bring together community stakeholders and boys of color to talk about the challenges they face and also start to posit some potential strategies, right?

[00:17:08] And so after you gather the strategies at that community action summit, which would likely be held in the evening so that we could get kids after school, youth after school, and parents and everyone together, you would gather the strategies and then the steering committee along with our co-chairs would call that down and then really present probably to Deputy County Executive Leonard what those strategies are and really look at what we would focus on and develop a plan for how we could move forward for the next probably three to five years.

[00:17:38] And I really appreciate that because I think giving both agency and empowering the boys to come up with the solutions they know better than we do what they need. And we are here to help support that. And Supervisor, may I? Yes, go ahead. One thing that also is happening with EduFuturo is that EduFuturo is an Ignite partner already at the schools, which means that we have a blank MOU where we can go at any of the schools that we have where we deliver services at the elementary, middle school, and high school level.

[00:18:06] And I'm also part of the current five-year strategic core planning group, and we're going to start meeting monthly with the Director of English Language Learners. So this is something that you can rest assured that we will make sure to bring it to the table when the time is appropriate.

[00:18:27] Excellent. And then I assume all of us here will want to know as soon as we have dates and the possibility to share out and communicate this with our communities, we'll want to. absolutely and and we also will keep the skip very much informed right thank you well now we have a lot of questions I'll turn it over to the chairman uh thank you very much and I I'm elated to see this coming forward and and to see our interest in and I think it's a it's a no-brainer uh for me I'm sure it will be for the rest of the board and you know I I'm um uh touched a little bit by what Jorge said because I think it's exactly right which is this these disparities exist um but if

[00:19:04] we're not serious about addressing them at this moment in time with all the other stresses that are on our young people with opioid with mental health with bullying with gun violence with all the other things that unfortunately some communities in the county are more susceptible to then when would we do this and so I think time is of the essence and you know I think our young people they need a lot of help they need it now I guess a couple questions that I have is the outcome areas. There's for good reason a focus on advanced diplomas, but I just want to make sure

[00:19:40] that we're also focused on employment and opportunities for training and certificates and other things because the diploma in a lot of ways, I think it's absolutely right. You have to get a high school degree or what can you do? But in terms of a college diploma, to a certain extent is less and less a critical document that you need to be economically very successful in the county. And we know that, you know, some people more focused on that advanced diploma, some for good reason, more focused on getting a job and not racking up a lot of college debt. And so I just

[00:20:17] want to make sure whenever we talk about advanced diploma that we're also focused on the end goal here is healthy families, people who can earn good incomes and get good jobs and fill jobs that are in this region and can stay in this region and be able to afford to live here. And so I know that will be a part of the focus. The other question that I have with the local action summit, you know, I don't know if that's a one-time thing. It sounds like it is, but I would just suggest, given how big this county is, that we'd be really strategic about thinking about where we would do

[00:20:51] that and also letting our data inform some of the decisions here. Because it's a massive county, And, you know, there's 200 plus schools in the county and, you know, unknown number of nonprofit partners. I think we need to be really strategic and targeted here to make sure that, you know, under our one Fairfax notion that we are targeting the areas that have the most acute challenges and trying to make a big difference in those communities as opposed to just spreading resources very thin across every square inch of the county where there might not be the data to support the need

[00:21:29] that's out there. And so, you know, I would hope that when we think about the local action summit, when we think about the scope of what this engagement could be, that we're following the data so that we can make a real-time difference and make sure that the resources associated with this are being used well. And then lastly, because I know there will be, you know, a price tag to this there always is down the road I would just say that you know we really need to think about this as an investment more than an expense because when kids drop out of school they for the rest of their lives will have a different impact on the county than if they have a good job and that's an

[00:22:09] immeasurable cost not just a moral one but a direct financial cost and so we need to be looking at programs like this especially with getting kids graduated getting them in jobs or getting them a diploma as an investment in economic development and investment in them and not not a cost and and we all know that kids are caught by different people in their life so not everyone might have a parent that they're going to get guidance from might be a pastor it might be a program like this it might be a school counselor and so what I like about this particular program is meeting kids where they are and identifying other people in the community that

[00:22:46] and help mentor kids who might be challenged really finding those mentors now. And so I think this has a lot of great potential, and I thank you for the work you've already done on it. Thank you so much, Chairman McKay. I will say in response, yes, making sure that these boys and young men of color are career and college ready.

[00:23:05] Part of it is the advanced diploma so that they could go into college and thrive, but a big part of it is targeted workforce development and training to have them ready for some of the on-demand careers. high demand careers that are happening here in the county as for the local action summit you brought up a very interesting point when we looked at the opportunity neighborhoods um there were well one concentrations of boys and young men of color who are experiencing lower graduation rates and higher dropout rates in those opportunity neighborhoods some in particular rise up right

[00:23:38] so comore or crossroads area rises up as one and so we could look at having decentralized programming right so it's hard sometimes for people to make it out here to the government center even though you have great space for some something like this it might be better to push into a community where people are already experiencing those challenges so we definitely have that data so thank you very much and one of the things that is absolutely key and you just said it is we have to bring

[00:24:13] these programs and services to where they are. We have to stop the expectation of they have to come here. They are working. They are busy. You know, as you know, we keep saying that we have situations where parents have three jobs and they are leaving their older siblings to be the ones that become the ones that are going to be taking care of the younger siblings. That's not right.

[00:24:37] They need to be in the schools and they need to be studying and they need to be doing well. And then for those that have dropped out, yes, re-engaging them is so important, GED, and put them in training programs. And this is something that we're looking at, and this is extremely exciting because I would love to see this going beyond, you know, Springfield.

[00:24:57] I would love to see training centers in every single district in Fairfax County. So then, or at least where the kids are, you know, where those islands of poverty are. So that's where, to me, that's why we are going to keep looking at this with that laser scope.

[00:25:14] Absolutely. And I know they're kind of hiding in the back, but Ms. Allen and Ms. Carroll are with us here from NCS. And I know that their work was skipped, and Ramona Carroll is the new coordinator for skipped, as well as with their work through Neighborhood Community Services will help ensure that we are pushing out and working in the community.

[00:25:34] So thank you for that. I will go to Supervisor Lusk and then Supervisor Smith and then Supervisor Gross. Go ahead. Thank you very much. Let me start by saying I'm excited about the evolution and the progress that's been made. So, Talayka, I want to commend you on your tenacity, your commitment, your passion.

[00:25:52] This is so very critical and so very important. I agree with the comment of the chairman and the chairman of this committee. This is necessary. I mean, you look at the slide on page six, and clearly the data demonstrates the disparity that we have with the graduation.

[00:26:10] So clearly there's a problem. When we get a trip, find a solution to that problem. And I would like to state my interest and my commitment as it relates to helping on the post-secondary education or training. I think this is a critical point.

[00:26:26] I think the chairman was getting to the thing that I've been kind of thinking about for so long here, And I think we are making some progress as it relates to starting a center in the Richmond Highway Corridor, specifically targeted to a community of disadvantaged. And we know it's an opportunity neighborhood.

[00:26:43] And I think we're going to be able to partner directly as it relates to servicing and helping those residents who will be a part of this program in that community. And I want to commit that that is something that we should and will do.

[00:27:00] Acknowledging, too, this point about, you know, access to higher-paying jobs, access to quality of life is predicated on having a decent wage. And as we look at the folks who are living in Colmar, who are living in the Richmond Highway Corridor, many of them are subjected to jobs that are in retail, services-based.

[00:27:25] And not to say these are bad jobs. These are not bad jobs. They are simply jobs. and they're only going to pay people a minimum wage. You cannot, you cannot carve out a living in Fairfax County on a minimum wage job.

[00:27:43] So we've got to intervene. We have to intervene and do something to help our residents, particularly those who are in this disadvantaged category, get the opportunities and get the jobs that will pay them competitive wage.

[00:28:01] And I see this program as being a model, And I see this as an avenue and a vehicle to help in that regard. So I'm delighted, delighted to see where this is coming, and I'm delighted to see where it's going to go, and I'm going to commit to do everything in my power to assist and help.

[00:28:20] So thank you. Thank you, Supervisor Lusk. Thank you. Supervisor Smith and Gross, if there are others who would like to speak, please let me know. Excellent. Thank you. Thank you. I'm excited to see this. I think community has to be involved with our kids.

[00:28:37] it just really can't be the schools. And so I'm really excited about that. I understand why you're focusing on these issues at the high school level to really make a difference there. But, you know, as my former work as a school board member, we need to prepare kids for that pipeline of choices of courses, right? You can't get to high school and decide, I want to take a lot of advanced math.

[00:28:59] You need to work your way up to that. So I'm hoping there's other groups that will focus on that piece for kids. Now, which kids, right? When I got on this board in 2016, one of the things I really talked about a lot that I felt was not noticed was the poverty and the issues in Sully District. And when we talk about, I'm sorry, this is getting me emotional. When we talk about big numbers of kids, that's not always Sully District. But we have boys that need help in Sully District.

[00:29:37] I can't believe I got so emotional. I'm really sorry. And so that's my question. What part of the county, years ago and in the budget, we were going to add opportunity neighborhoods in Sully District, and there wasn't funding. And so what about the boys in Sully District?

[00:29:57] So one of the things I'll say, and I appreciate your comments and your passion, thank you, Supervisor Smith, I will say is this is a countywide initiative. And so one of the things that really enables you to be able to do a county-wide initiative like this, not only because you have the backing of the Obama Foundation, which has a national network of funders that are focused in on this issue, but because it is a community-led initiative. And so you really have to affirmatively engage and tap into not only organizations like EduFuturo and CYEP, but you really look at a broader range of organizations and

[00:30:35] agencies that are already active and on the ground. This is really providing a common through line for all of us to work together on, right? Not that these organizations aren't already working together, but this is a way to create a concrete safety net specifically for these boys of color, boys and young men of color throughout the county, right? So yes, there will be some county resources, some county investments that will have to be made, but you also will have much more in community investments and the philanthropic community coming in so that we're really doing it together. I keep making this basket with my hands, but it really is all hands

[00:31:14] joining together. Thank you. I would like to add to that. I am frustrated. I'm as frustrated as you are. I mean, like, we have a contract with the CCFP, and we have applied over and over and over to get funding for that area because we know that there is a big island of poverty there, and we don't get it. And again, I think the issue is because of the way the contracts are being looked at. They've looked at, this is this part of money, this is how much we're going to add, you know, for this time, and that's it. So then they will defund something to fund something else.

[00:31:54] Instead of looking at it again with that looked, you know, with that disparity, with, okay, who are the ones that are being most affected? And this is the reason why we can justify another X number of dollars, so then organizations like Edu Futuro can go to the solid district. So we will try again next time. But until the dollars are not there, there is nothing we can do. If I could just quickly. So the thing about My Brother's Keeper, I want to make it, it's not a program in the sense that we are traditionally sort of, we traditionally sort of think of as a program. It's about an

[00:32:33] alliance. One, we're joining a national alliance in, you know, working with other jurisdictions who recognize that boys and young men of color in their communities are not achieving at the levels across several different indicators. And sort of forging what, you know, as Talika was saying, this partnership, right? It's not just the role of the schools. It's not just the role of government. It's really something that we're owning with the community. But our strategy is very targeted and focused on data and focused on the population, but also the place. And so while

[00:33:07] we can use opportunity neighborhoods as sort of a rough way to say that, you know, these are the neighborhoods that we're focusing on. We also know the data for neighborhoods that lacking an opportunity designation, opportunity neighborhoods designation, would generally qualify as an opportunity neighborhood. And so we're talking about areas in Chantilly and in Centerville that again meet the general qualifications but may not have the specific designation of an opportunity neighborhood so just to be clear that there is very much not just a population focus in

[00:33:46] terms of boys and young men of color but also a place focus and being driven and guided by our data to be you know sort of target this in the areas of the county where we see those higher concentrations thank you and thank you for bringing that up I know the no I mean I think it's critical that in and our discussions about the CCFP you know and I think that there's a lot that works well about it and perhaps we can start looking at continue to look at new categories new ways to target the way we do the targeted funding and and I'm hoping initiatives like these and working

[00:34:26] with miss Bruce's office that we can address that I did I know that my brother creeper sounded very familiar um and i just want to uh miss the chairman reminded us at the beginning of the pandemic i believe yeah that he came to us with this initiative i mean i you know one of my focuses on why it's so important to do it now is because my my board matter to do this was on june 23rd of 2020 that's when i brought this issue up so i just you know i'm just saying that because let's go. Come on. We are, and we will fund it. All right. I have

[00:35:03] Supervisor Gross followed by Supervisor Herity and Supervisor Stork, and I think we'll move on. We have two more big issues today. And Carla, thank you. One of my questions was going to be, how does this differ from other programs? You know, we've had Boys and Girls Clubs, Barrios Unidos a long time ago, character clubs, but this would be sort of, if some of those and some of those still do exist, but they would be part of this alliance. Okay, this is really all about, I think, building self-esteem and confidence and providing the tools for that, and certainly

[00:35:37] the data is there. I think this is a good approach, but, and there's a big but here, and I'm going to direct this, I think, to Chris Leonard. What about the girls? You knew I was going to say that.

[00:35:52] What about the girls? So there are, this is a program for boys and young men of color. Girls and young women have many of the same challenges. The data may not be exactly the same, but I would like to ask for additional information if we could get a list or an outline of the programs that we have in the

county that would serve girls and young women in a similar vein, because I do not want to see them left behind.

[00:36:26] Somebody will call us on it, and I'm not going to allow that. But I know we have the programs, but let's make sure we know which ones they are. Thank you. Yes, excellent. As a hashtag girl dad of three daughters, I completely concur, and we will certainly be responsive of getting that back out to you.

[00:36:47] Briefly, Hornet, go ahead. Yeah, the data, this is also data and it's cultural. In the Latino community, there is a pride, you know, where as a brother, I'm going to take care of my sister and I'm going to do whatever I need to do to make sure that my sister does well.

[00:37:04] If that means that I have to sacrifice myself and I have to go to work and drop out of school, I'll do that. Because my sister and my mother, and you know, the mother is the queen and the sister is the princess. So you are, this is something that is very, very much cultural.

[00:37:21] Now, this applies to many other cultures. I mean, we know that. So, in general, female students tend to do better and graduate at higher levels than the males. So, that's why we're focusing. But I agree with you completely. I mean, we have programs that, you know, we don't care about gender.

[00:37:40] We don't care about identity. We just want to make sure that you are going to succeed regardless. So, we will not put that apart. If you talk to girls I know, especially at Justice High School, girls of color, and you talk to them and it's sort of like, well, I'm just going to do this.

[00:37:59] I'm just going to do this. And it's just the whole attitude and the whole sense that, you know, like, well, I'm just going to go to NOVA. No, you're going to go to NOVA. You know, so there's an esteem building piece here, but there's also a confidence that needs to be instilled and I think is often not there.

[00:38:15] We need to make sure of that, but I don't want to belabor that. Thank you. Thank you, Ms. Chairman Gross. Thank you, Supervisor. I will just quickly remind the board that we are in the midst of planning a study of women and girls in the county, and I do think that out of that will be an opportunity to be, again, data-informed about how we are addressing the need.

[00:38:37] Absolutely. And I just want to say, when I started coaching girls on the run in Falls Church, we got the question of what about the boys? But to me, it was so critical that these girls, especially Latino girls, do have the confidence and the support and the ability to have those partnerships.

[00:38:53] So I think it is critical that we look at both, but find the right programming and the right way to do that. All right, Supervisor Herity, then Supervisor Stork. I'll try to be quick. There is no better deal than going to NOVA, so that shouldn't ever be looked down. NOVA, and then you do well there. Your options are limited, so that's a smart decision.

[00:39:14] I'm going to pile on Supervisor Gross, but from a different angle. I think this is great. I want to see metrics for success. I want to see what comes out of this is as important as putting the investment in. But, you know, when I look at the numbers on slide six, you know, Supervisor Gross would like to see them for women.

[00:39:32] I'd like to see them on poverty because, Jorge, you keep referencing islands of poverty. And I want to make sure we're not just focusing in on certain races that we help everybody because poverty is one of the prime drivers here. And we really need to drill down, focus on that, and make sure that we're helping across the board.

[00:39:53] So I'd love to see the numbers with that kind of look at it as well. And I was going to say I'd also appreciate you bringing up the – we're going to talk fentanyl later and the challenges, the pandemic. And just that is something we need to be refocusing on.

[00:40:13] did back in 2016 when it was first an issue, but we're going to have a whole presentation on that later. So that's it for me. All right. Thank you very much. Advisor Stork? I would like to say thank you. We will look into that. Definitely there is an alignment there between races, ethnicities, and poverty. I'm sorry.

[00:40:36] I concur with the poverty focus, too. Just to make the point, too, that just because you have an opportunity in the neighborhood, there's huge numbers of areas of poverty in this county, and I think of other areas that are outside of opportunity, just along Richmond Highway, Lorton, and so on.

[00:40:52] So the needs, they're there across the board of Jefferson County. So I understand the passion, and I support the need to make sure that we're not singling and focused on just one area. I do want to thank you for, I think the focus you have is the right one.

[00:41:09] I know I look at, I know, again, I was on the school board. I know we looked at the early childhood development. That's essential. We also know that's a huge money cost to do that. I know the superintendent is now refocused on that, and I know at least talking to individual board members about how do we do that.

[00:41:25] I think the third-grade reading readiness is essential. I think that's also important. I think where the county and our resources can have the most impact is really what you brought forward, which is on the high school. And obviously, diploma is a key part of that, but workforce readiness is an essential part of that.

[00:41:44] And certifications are a key part of that. And then, frankly, the most cost-effective post-high school education you can get is a dual enrollment work that we do in our high school. So it's even cheaper than NOVA because you can literally, you know, graduate from high school with a two-year degree and so then be ready to move on.

[00:42:04] And so I think we're doing the right thing with the focus, and I wanted to just kind of weigh in on I think that's the right focus for us. And we have resources in the county that I think can complement what's there. And I know there's more to be done. I'm not naive or delusional about that, but I think that gives us the best place to invest our resources and time at this particular point in time.

[00:42:26] So thank you. Thank you very much. Thank you. Looking at time, I just really want to thank all of you for working on this. I know it's a long time coming, and we're, as a board, so thrilled and excited to see the work ahead and to support you as we go forward. Looking at the time, we will go very briefly to the Children's Behavioral Health Plan.

[00:42:46] I want to make sure we have a few minutes to look at that. We may hold questions on that until the end because we do have people from inside, outside the county, across the board here for our opioid response efforts. And just a request to my colleagues, when we do get to the question-answer period, if we could keep it brief, keep it to points that haven't been shared yet.

[00:43:08] and I know there are probably going to be quite a few questions that you'd like to follow up with staff individually I know that again on this topic supervisor Lusk and I have had the privilege of seeing this through skipped but we do want to make sure the county has a chance to see this and let's try to

keep most of our questions until the last presentation so to that with us here today we have daryl washington the executive director of the community services board michelle boyd uh are you dr boyd here oh there she is i didn't recognize her um the assistant superintendent

[00:43:45] for special services from scps peter steinberg the program manager for healthy minds fairfax and laverne williams the division director for csb thank you uh go ahead daryl say good afternoon and thank you.

[00:44:02] So my colleagues have already been introduced here. So as I kick off and start talking about youth behavioral health, I just want to just highlight that this effort really is a collaborative work between the Community Services Board, the school system, as well as Department of Family Services, where Healthy Mind Fairfax sits, where the Children's Services Act and the CPMT sits, and the work that's done there, as well as the private behavioral health care providers in our community, and last but most important, the parents and the kids that have behavioral health issues within our community.

[00:44:40] So today I just wanted to provide a brief update on behavioral health, as well as give you a snapshot in time of where we're heading with kind of the next step in the plan. So next slide, please. So I won't spend a whole lot of time on this, but essentially this graph really highlights that Fairfax is not immune to what we're seeing as a nationwide issue that's happening with youth behavioral health care issues across the board. The good news is Fairfax continues to be below the national average and all of the major measures as it relates to behavioral health care, but we are definitely seeing the spike, and that has continued throughout the pandemic with youth that are experiencing

[00:45:18] increased stress and increased behavioral health care issues. Next slide, please. So this is really just a snapshot, and I just want to give you my thanks for your support as a board. One of the things that we provide to the CSB board on a monthly basis is what we call time to treatment.

[00:45:38] When the youth comes in for an assessment, how long does it take to get them linked up with an ongoing case management or therapy appointment? And as you can see, where we're at right now is the lowest that it's been in two-plus years. And I think that is in large due part to the support that you provided to the Community Services Board last spring and the fact that we've been able to make significant changes in our hiring and bringing down the number of youth outpatient therapist vacancies that we have.

[00:46:05] And we're seeing it in how quickly youth can access care at the Community Services Board. Next slide. So to address the issues that are happening behavioral health-wise, the schools are really taking a lead with, I think, some of the global actions that are happening.

[00:46:21] and i'm not going to read through all of these in the in the spirit of time here and really the approach that they did take is looking at it from a division standpoint and then also drilling down to more specific things that could happen according to the school the youth survey is a gold mine as as my boss has said multiple times of data and information and i know what we have tried to do and in partnership with the schools is really tailor those interventions school by school to what we're seeing that's coming out of what the greatest needs are from that youth survey action.

[00:46:53] Next slide. And what we're doing right now is moving from the blueprint to a plan. We've sort of not finished the blueprint, but we've did a significant amount of work with that. And we really wanted to come here and provide you an update with kind of the next steps and kind of our five-year, four-year look at creating a children's behavioral health plan. Next slide.

[00:47:17] In developing this plan, we did outreach to the community, pulled together focus groups, we had community events, and we held multiple surveys. We really wanted to get the input from the individuals, the families, the kids that are impacted by behavioral health care issues in our community.

[00:47:36] And in doing that, there are a couple of key areas that did come up and themes that we saw that came about. Next slide. And those key areas are prevention and education, access to services, making some system level changes, and then navigation of services.

[00:47:54] And those are really the four key areas that we're going to be looking at continuing to focus on over the next handful of years to really strengthen our cross-agency, cross-community behavioral health system of care here in Fairfax. Next slide. So these are just a few highlights of the steps and what we're looking at doing to really as a highlight and focus in on with prevention and education, and also access the behavioral healthcare services. One of the things that I just wanted to highlight really with access and the navigation with behavioral healthcare service, which I think is on the next slide, this is one

[00:48:30] of the themes that we heard consistently, and it's one of the things that we're seeing even as behavioral health experts that navigating the system, finding if you have a youth, a family with behavioral healthcare issues going on, finding a therapist that has the skill set and content expertise and is willing to take the insurance that you have is a significant issue in our community. We have a lot of economic success here in Fairfax, but as a result of that economic success, a lot of private providers do not accept insurance, and that's a huge issue.

[00:49:07] The going rate for an initial assessment is around $200. The ongoing individual therapy assessment is around $150. So you can start stacking up the math if somebody has to be seen for 10 to 12 weeks for a course of behavioral health treatment and therapy if they have to pay out of pocket for those costs. And that's the reality of what a significant portion of folks are dealing with within our community. So being able to find clinicians that can accept insurance or willing to accept insurance and navigate through that system, I think, is a critical and a vital thing that we need to be doing as a community. Next slide. So next steps. And I know I'm going

[00:49:47] through this super fast, but I'm mindful of the time, and I wanted to give the board as many chance and much time to answer questions as possible. Really, we're going to be identifying champions. We're going to provide quarterly reviews to the different stakeholders, and then we're going to be measuring and looking at our success, so we know if we need to change things, we need to target interventions and do things differently, that we will pivot and do that.

[00:50:11] So I know that's a lot of information in a short period of time, but I did want to get it out to you so you have a chance to kind of look at that and then ask any questions about youth behavior health care issues that you may have. Thank you. Awesome. Daryl, you get a gold star today in your whole team. And I know there are probably quite a few questions, but I do want to make sure we have a chance to get to the opioid piece, which really is part of the larger youth mental health and mental health issues. I just first of all want to thank you and your team. I know we had a chance to really work through this and skipped the navigation, the things we can control right at this point we cannot control access to services in the

[00:50:49] community I think we need to continue to advocate for it and and innovate where we can and support the flexibility in the telehealth because we know even people who are able to afford it are really struggling and while we're dealing with opioids now I'm worried that as we move through that what will be the new areas and the new challenges ahead so absolutely I know you have a lot of data data and the

quarterly reviews I think will be critical and be happy to bring those to the board as we'd like. But before we move on, I do want to just turn over to the chairman for his one question. But before that, can I just say, I know we were both looking at the chart on page three.

[00:51:28] So while there's a lot of concern, we just want to say that there is both, I know in the workforce and in seeing in the impact on our youth behavioral health services, there is some positive movement forward, and I think it's just really important to acknowledge that and to know that it was hard before the pandemic, and it only got harder, and just want to, any positive news, and I think this is some positive news, we want to acknowledge that. Yeah, definitely, and I was going to start with that, so I'm glad you did, because well done. I know we got a long way to go, but that's going, every, that graphic's certainly going in the right direction. I guess my question is, you know,

[00:52:04] I understand the insurance piece and that we don't have control over. I'm just wondering, at one point in time I saw a map where, you know, clinical professionals and their practices were located across the county. And if I remember that map, they were pretty clustered in some parts of the county and almost did not exist in other parts of the county.

[00:52:26] And so I think it would be helpful for us to look at that again. While we might not be able to control the insurance piece, I do think we should be looking at our own assets, our own buildings, as opportunities maybe to have clinicians travel to parts of the county and to be able to provide services to parts of the county that it's impossible for them to get services now.

[00:52:48] And so when we're looking at the access piece, let's make sure in play is where our county facilities are that might be able to foster that type of environment and work with our clinicians on how we can get them interested maybe in perhaps using those buildings and those opportunities to serve parts of the community right now that are just not served.

[00:53:10] All right, thank you, Mr. Chairman, and we'll work with Daryl and his team to look at those and look at how we can address those. Again, if you have questions specifically for Mr. Washington, Dr. Boyd, thank you on the school side for joining us, to the team.

[00:53:27] I know they'd be happy to follow up with additional information and presentations. We'll be sure to bring you back as well as we go through this quarterly review, so thank you so much. We will now turn it over to our, you can stay up here, Daryl, to the Fairfax County Opioid Response Effort.

[00:53:45] I will name everyone on my list as they walk up here. I'm not sure how many are with us here today. The coordinator is Ellen Volo for the Fairfax County Opioid and Substance Use Task Force. We have Michael Axler, the Acting Director of Intervention and Prevention Services for FCPS.

[00:54:05] Dr. Boyd is with us from FCPS. Jenny Brophy is our epidemiologist from Fairfax County Health Department on the team. Steve Hartman, captain from Fairfax County Fire and Rescue Department. I don't know if I've seen Sheriff Stacy, but I think she's got members from her team here, from the Sheriff's Office.

[00:54:26] Stefan Maskell, coordinator for student safety and wellness from FCPS is here. Anne Rizza, the lieutenant from Fairbanks County Police Department. There she is. I saw Matt Thompson earlier. There he is. The new-ish director of the court services unit for JDRDC.

[00:54:48] And finally, our very own Daryl Washington, executive director of the CSB. I know this is a topic that is very much in our minds and very much as the information is coming to us on the opioid litigation, as well as how those funds will be used, both the county-level funds as well as the state-level funds. And Daryl Washington, as most of us know, does sit on the state opioid task force group looking at the opioid abatement funds. And finally, I would be remiss if I didn't mention Mr. Tom Arnold, deputy county executive, who's staying

[00:55:27] back there so that Chris can take all the heat. All right, to that, am I turning it over to Ms. Willow? All right, go ahead. Good afternoon, and thank you. So I put together the slides to be a comprehensive resource. I'm not going to talk through every slide today, but there are a fair amount of resources, especially on the end slides. So just a brief recap, as it was referenced earlier, yes, Fairfax County has had a concentrated opioid task force since about 2017. Structurally, the task force. That's the entity that's really moving forward the many activities on the day-to-day.

[00:56:03] That includes over 15 different county agencies and in partnership, very close partnership with the public school system. We have strategic guidance provided by the steering committee, and then our mechanism for community outreach and engagement is the Fairfax Prevention Coalition.

[00:56:20] So as board members will recall, we finalized our third plan, our third opioid plan this summer. That's this purple document. You may have seen that. And we have about 40 different programs and activities underway, working towards the goal on the slide before you, spread across the categories on the right.

[00:56:36] So the idea is that we're taking a multi-pronged approach here, a lot in the way of prevention and education, all the way over to harm reduction and recovery. And of course, lots of treatment, public safety initiatives, and data as well. So on the topic of data, in the interest of time, I'm not going to do a deep dive on these slides.

[00:56:55] They are a reference for you, and as you hopefully are aware, we do have a public-facing opioid dashboard. That is one of the activities that's part of our plan. That recently was updated to do a more clear picture on what we're seeing in regards to the youth.

[00:57:12] So that's available, as is to the public. So really high level on the data, you know, nationally and across the state, there's been a tremendous, a shocking increase in overdoses in the last couple years, And we have seen an increase across all ages here locally as well.

[00:57:30] And, you know, the majority of the overdoses that we see really are occurring in the 18 and above age range. That being said, we're very concerned about an increase that we're seeing among youth overdoses. And that's a concern that's shared across the northern Virginia region and across the nation as well.

[00:57:50] So one of the, you know, when you look at the fatality data, the substance that's involved in nearly all, literally, of the fatalities is fentanyl. And so, you know, probably everyone in this room is very familiar with that, but I regularly encounter people who are not. So I just want to take a moment to reiterate that this is the substance that's commonly found in the illicit drug supply.

[00:58:11] A very, very small amount can be deadly. We're seeing it in pressed pills, like the picture on the bottom left that's from the DEA. it's nearly impossible to discern an authentic pill from a counterfeit pill that has a deadly amount of fentanyl in it. So really need to continue raising awareness of what fentanyl is

and how widespread it is. It's not just in the press pills. We're also seeing it in cocaine and other substances. And of course, it's life-threatening. So across the board, we have a lot of activities and programs in place. And so just wanted to touch briefly on some of the things

[00:58:47] we're doing that are sort of broadly targeting all of the community and individuals 18 and above. So we have a communications campaign that the Office of Public Affairs is leading in the area of early intervention and treatment. We have a lot of different initiatives. That quote in blue describes the jail-based medication for opioid use disorder program. This program has a huge potential to turn around some of our fatal overdose trends. It's novel, it's really unique, and a lot of jurisdictions are coming to Fairfax to learn how that program works and implement it in their own jurisdictions.

[00:59:24] I mentioned the opioid dashboard. We also have in the police department the overdose investigation unit. This is a very unique feature to Fairfax, and that team has provided really critical kind of on-the-ground, real-time information on trends. They were kind of the folks who raised their hand first about the concerns around the youth overdoses, And so that's very important in terms of investigating fatal and non-fatal overdoses and also in sharing information back to inform the county's overall response plan.

[00:59:57] The Fire and Rescue Department has partnered with the CSB to provide leave behind Narcan to bystanders at the scene of overdose calls. Narcan, of course, is the medication that reverses an overdose. And finally, in the area of recovery, the example here is the Peer Outreach Response Team.

[01:00:15] This is a team within the CSB comprised of peer support specialists. It's a really great resource for community members. So if someone comes forward concerned about a loved one with a substance use challenge, this is a great resource. They meet people where they're at, help them kind of on their path to recovery.

[01:00:32] So now specific to the youth overdoses that we've been concerned about for some time, We have listed out on these slides a number of different activities. This is a work in progress, and we are constantly looking to bring new tools and strategies to bear, and so it's certainly not an exhaustive list, but, you know, some highlights here today.

[01:00:53] So just on this slide, I'll touch on the expanded Narcan availability. So FCPS and the Community Services Board partnered to train over 1,000 FCPS staff last year. So now we have more Narcan more widely available in all of the FCPS schools.

[01:01:10] We also have been doing community presentations this winter and spring. It's kind of a follow on to the presentations we did virtually last spring. And so these community presentations are at the pyramid level. They're led by the public school system in collaboration with police and CSB.

[01:01:27] So some pyramids have already kind of had their turn in January and February. But there are some that are coming up, and there is a virtual session as well. These presentations help educate parents on various trends related to substance use, including opioids, and provide different tools and resources for them.

[01:01:48] There's also a number of different things that the public school system has been doing to really help support youth who are impacted by an overdose, whether it's themselves or that of a loved one. I also do want to remind everyone about the Substance Abuse Prevention Specialist Program.

[01:02:06] This is a program we've had for several years now where we have a SAPS position covering every school pyramid, and they do a lot of prevention and education around substance use. They do work with students who have a substance use concern, and those needing a higher level of intervention are referred over to the CSB.

[01:02:26] We additionally do post-overdose outreach for youth that are encountered by public safety for a non-fatal overdose. We also do this for adults as well, though it's a slightly different format. And then, of course, the big bucket of work has been really trying to enhance and expand substance use treatment options for youth.

[01:02:45] And so, you know, when you look across certainly the region, and I'd venture to guess the nation as well, one of the big challenges with this increase in youth overdoses that we're seeing is the scarcity of appropriate treatment options. So that really compounds this issue overall.

[01:03:01] So again, here we're taking a multi-pronged approach. CSB has taken some steps to build capacity in-house through pilots. They've also canvassed the nation looking for providers and where, you know, it's been very difficult to find providers of detox and residential services, but where we've found those providers, CSB is working to establish partnerships with them.

[01:03:24] And then, you know, of course, it's ideal to have this capacity in the region in-house. And so we are exploring the use of grant and opioid settlement dollars to build that youth detox and residential treatment capacity right here in the Northern Virginia region.

[01:03:40] And so just a couple updates on the opioid settlements, of course, this is the term that refers to the settlements brought by states and localities against numerous organizations in the pharmaceutical supply chain for their role in the opioid epidemic.

[01:03:57] This continues to be a very fluid, evolving landscape. There's a lot of different factors at play. There's multiple lawsuits still pending. Three have reached the payment phase, but there's many still outstanding. And so in your packets today, you have a chart here with some dollar amounts, but we expect these numbers to grow.

[01:04:18] Unclear at exactly what schedule and amount, but they will grow, we hope. And then also, you know, the Opioid Abatement Authority, that's the state entity that's administering the settlement funds, that's just getting established. They're setting up their processes, and so that's another kind of evolving fluid piece as well.

[01:04:42] So the funds generally must be used for abatement purposes, which essentially means to, you know, anything to address the opioid epidemic. We can receive funds directly, and also we can receive funds from the OAA.

[01:04:57] And so in your packets, you also have this pie chart here that kind of helps illustrate the different funding buckets. Board action will be needed for any applications to the OAA. And so some of the funds available at the OAA are competitive, and some are kind of funds that already have our name on it, but we still need to apply to get them.

[01:05:21] So here we have some sort of guiding principles for using opioid settlement dollars locally. As I've mentioned, there's so much already in place here in Fairfax, and so let's try to optimize what we have in place, make it really effective.

[01:05:37] And so where can we enhance and expand what we have in place? But also, when we do identify critical systems gaps, like what we're seeing with the youth treatment needs, look at that to fund with opioid settlement dollars. And then, of course, you know, we really do want to try to balance timely use of these funds with fiscal responsibility.

[01:05:56] If you look at the chart, the funds kind of have, are varied in the amount year to year. And so, we will need to be very strategic with that. And so, the OAA has an application window open this spring.

[01:06:12] It's their first application window. And so, you know, we're still all together with the state figuring out exactly how this will roll. Locally, the CSB, the Fairfax Falls Church CSB, is looking at partnering with the other CSBs in the region to do a cooperative regional project application.

[01:06:33] So this would be a competitive project for youth substance use detox and treatment services. So if we would need to come forward to the board for this, as I mentioned, because that OAA application does require that board action, and the other jurisdictions involved would need to do the same. We're also looking at launching a survey kind of regionally as well to gather both local and regional input on substance use treatment service needs and other opioid related needs. And then in future in future application cycles you know we are going to set up kind of an internal county

[01:07:12] process for the many agencies in the school system involved in this effort to identify projects that they'd like to consider funding with opioid settlement dollars obviously there's a lot of different entities involved in the county's opioid response plan and so want to kind of look across and be really strategic in what we're funding and also kind of what we put forward to the OAA and so those requests would be vetted by the opioid settlement executive committee and so with that I will pause for questions all right well

[01:07:48] thank you very much Ms. Volo I know I truly absolutely appreciate both the work that you are doing to lead this as well as the collaboration of everyone here in the room and working on this we know that they absolutely this is on top of mind and while we are happy to see that there is some funding and thank you for the charts I know we have more coming knowing that you and the county have been already preparing and gearing up to help address this is critical. I have just a couple of questions, some for you, I think some for your partners at the table before I turn it over to

[01:08:26] my colleagues. Let me just share all of them. So number one, youth treatment. And I'm looking at you, Matt over there. I know we heard from our judges and we continue to hear from the community about the lack of the youth treatment services.

[01:08:43] I also, I know we heard recently, maybe a couple weeks ago, Daryl, that Arlington is working one of their hospitals to help address those needs, which I believe will target the region. So I really appreciate that we're doing regionally. So I guess my first question on that will be reviewing the gaps, kind of what we're looking at in the immediate future, knowing that we need to catch up to the needs there on the youth side, as well as how we're going to be reviewing those gaps.

[01:09:14] I think it's great that we have so many programs. You have a whole page full of them here. And so how do we ensure that the funding that's coming in really is targeted, really is looking at where we have the biggest needs and gaps geographically as well as programmatically to help address those?

[01:09:29] I think that's my big question. And then the other smaller one, when we talk about Narcan, I think it was just two weeks ago. I don't know if the FDA has formally approved it, but I think they're

hopefully gearing toward approving Narcan or Naloxone to being, I believe, over-the-counter.

[01:09:46] And so I was wondering how that might impact what we're doing, if there are things we can move more quickly on. And I think I'll pause it there because I think everyone has questions. So the big one is just on the youth, where we are, and how we move both quickly and long-term on those services.

[01:10:03] Yeah, and I'll just take the Narcan one first, because that's easier. So, yes, we're still waiting for final action from the FDA on that. I think the big question will be price, because right now, one package of Narcan is $140. And so, you know, I think if FDA does approve it, then we'll have to look at sort of different, you know, what do we do about that cost? That cost will be a barrier for some people. And so, we'll have to look at how that might impact our programming. On the youth treatment piece, you know, we're kind of looking at where we can just

[01:10:38] plug as many holes as we can as quickly as we can. There's a number of different providers that, you know, we're trying to establish relationships with now so that if a youth comes forward, you know, for example, there's a detox facility in D.C. for youth. And so looking at establishing that relationship so that that can be available as quickly as possible, and trying to do as much as we can within existing resources. But certainly building out a whole facility, like the substance use detox in the region, will be a bigger kind of financial lift. And so that's why we're looking

[01:11:15] at that for the opioid settlement dollars. Daryl, did you want to add anything? And really anyone at the table on the youth piece. Go ahead. Yeah, thank you. So to Ellen's point is that, you know, we don't have a robust continuum of substance abuse treatment for youth in our region, quite frankly, not just in Fairfax, but there are some providers out there. So we've been in the process of putting together a one-pager that will be able to walk through from everything from outpatient all the way up to the level of care, which is the highest of a detox facility for youth that's available in our community, in our region, and then sometimes we have to look even outside of the state.

[01:11:53] I was hoping I'd be able to have that one-pager to be able to hand out to you today. We're making a few more tweaks to it, but we'll be able to have that to you within the next week, so you can see that, and we're putting it in a layperson's language, so it'll be something that you can hand out and give to other folks to be able to provide, so they'll be able to have information on who they can pick up the phone, call, and access if the family or if the individual needs access to care for substance abuse treatment.

[01:12:23] Thank you very much. I know we have quite a, I believe most of my bone matters have questions, so I will turn it over to the chairman, and then I will start at this end and move my way down. Well, the good news is you asked almost all of my questions. The only one that I really wanted to ask, and I think I've seen a spike in this lately, it's mentioned in the presentation, but the fake pills versus the authentic.

[01:12:45] Can you speak at all about what we're strategically doing about that? Because that, you know, I know obviously we can't control that, but in particular in our schools and other places, is there anything we're doing specifically to try to educate any way that we can help with that at all?

[01:13:05] There you go. Yeah, so in the schools, our substance abuse prevention specialists, when they provide education to students, that is one of the topics that they cover, right? The difference between what a real pill will look like versus a fake pill.

[01:13:23] We also partner with Fairfax County Police Department, and they have officers that often will collaborate with our specialists and come in and do presentations, not just for students, but also for parents. And they provide a wide variety of information on that very topic. Just to give you an example, some of the fake pills, you can easily crush them in your hands, whereas if you get a real pill from a doctor with a prescription, it's much harder to break that pill up.

[01:13:50] So that's just some of the information that's given, along with the fact that nine times out of the ten, if your doctor prescribes a pill, it's not going to look like Skittles, right? And some of these other pills, unfortunately, they're marketed to young people because they know that young people will gravitate to those colors.

[01:14:06] Right, and from a police standpoint, I mean, obviously, when we have these overdoses, we know we can go back and figure out, you know, if these were likely authentic or fake. And so how are we, from a law enforcement standpoint, handling that? Because I know some of our kids, you know, they're going to be reluctant to come forward and share information.

[01:14:25] But if we don't get to the source, which is the dealers and providers of these, you know, we're constantly chasing this. So what are we doing from a law enforcement standpoint on that? What the police department is doing, our organized crime narcotics unit, we work, we have three units within that umbrella, well, four really.

[01:14:42] We have the narcotics detectives, we have our street crimes, and then we have our overdose unit as well as asset forfeiture. So when our opioid detectives go out and they get a case, they will speak to parents, try to educate them that we're not there to arrest their child who obviously has an addiction, but they're there to find a supplier.

[01:15:01] A lot of times when we get that, have that talk with the parents, even if the kid doesn't want to cooperate, parents are very willing to give consent for electronic devices and things of that sort. so we can look through them. Usually that's where we find the information we need in order to track down suppliers.

[01:15:18] With that piece, we also have our street crimes unit and our narcotics detectives who are out there every day. You know, they have their own investigative techniques that they use to identify people who are selling fentanyl specifically as well as other unknown pills that are usually waste with fentanyl.

[01:15:37] And so with those three pieces together, our opioid detectives get a lot of intel from these phones and from these parents and sometimes from even the kids who are like, yes, I have a problem. Yes, I know I'm in trouble because I can't stop. And yes, like, I want to help. And so those three units together work very collaboratively to make sure that any information that our overdose detectives have, they can then track down with their investigative techniques and we can bring it to a full prosecution.

[01:16:05] On top of that, we have a partnership with the DEA. So we actually have some DEA agents who sit in our building, and that helps us ensure we can take it federally Because right now in Virginia, we can't charge for a death, but if we take it federally, there are enhanced penalties for supplying fentanyl or anything possibly laced with fentanyl, and someone dies, adds on an extra 25 to 30 years, depending.

[01:16:27] Okay. Very helpful. Thank you. Thank you. All right. I will start over here, and we'll work our way down. Please be brief, because we do have joint budget in nine minutes. Yep. I'm going to be as quick as I can. First, thank you so much for all of you because all of you didn't get to speak for everything you're doing because this is a critical topic. We got a lot more going on now than when the first wave came

through in 2016. The challenge really is getting the word out because nobody realizes they have a problem until it's kind of too late. And so I'm with board member Laura Jean Cohen. I'm going to be co-sponsoring a town hall on the 28th dealing with this, more information to come out later. It's going to be at Lake Braddock.

[01:17:07] But my question is, how often is Narcan being used in our schools? So we're still in the process of collecting the exact data that tells us how much Narcan we're using. What I can tell you is that in speaking with our principals anecdotally, the school system has used Narcan twice when responding to a concern of an opioid overdose.

[01:17:36] And when I say twice, I'm referring to twice this school year. This school year. Yes. And I think that's important that we get the word out. There was too often back in 2016 we weren't treating the deaths as drug overdose deaths to respect the parents. But we need to let people know what's going on and how often this is happening in our school system and everywhere across the county.

[01:17:57] And I think we've got a lot of that on the dashboard, so that's good. What I would ask that you all do for us is, you know, a simple, because town halls, you can hold all the town halls in the world, but the people don't come to you that need to come to you.

[01:18:16] But when we go out and talk to HOAs and put our newsletters out, if we could just get something for our newsletters and talking points for HOAs when we go out, and that's what I would encourage. That's what I did in 2016 when kind of the first wave came through, and I think that would make a lot of sense.

[01:18:31] The other suggestion, and I've talked to Laura Jane Cohen about it, is, you know, at the end of school, we got the downtime between exams when they watch movies until they graduate. I mean, really peer-to-peer counseling is the most impactful thing that can happen.

[01:18:49] But to get a couple of peer-to-peer counselors to scare the crap out of some of our high school students, I think it'd be a very worthwhile thing if we could do mandatory assembly during that period of time. So that's hopefully something that we're going to talk about at the town hall. But I think that makes a lot of sense, and the treatment facility is something we really need to work on.

[01:19:08] Thank you, Pat. For ideas, I'm going to keep working my way down. Any other topics? I see Supervisor Stork and Supervisor Walkinshaw. Thank you, Madam Chairman, and to echo that point, I think outreach is crucial. I know the schools are focused on getting some consistency between schools and pyramids.

[01:19:28] I think there's some differences there. The community really tunes in when they perceive that there's something different happening in their community, and I think it's all of our responsibilities. It's not just a school issue. It's clearly broader than that, and I want to just reinforce that point for everybody. I was shocked at this statistic. DEA lab testing in 2022 reveals six out of every 10 pills with fentanyl contain a lethal dose, which is Percocet and Xanax. So, I mean, that's shocking. I mean, I knew it was high, but I had no idea it was over 50%.

[01:20:02] So that's a message that we all need to spend more time getting out. I took the Revive training. It's simple. I think it took me two hours at the most. I got my Narcan, and I'm ready. But it is a matter of we all need to be, even if you do nothing more than take the training, you'll at least be aware of kind of the steps you can take if you're in that situation, even without Narcan.

[01:20:24] But I just want to encourage everybody to be sensitive to that and make a difference, because for yourself and then ultimately with people that you care about, it can matter. The last thing, which is a question, and it really goes to the point, Dale, that you're talking about, is the Suboxone is clearly a treatment that's becoming more and more important to addressing folks who frankly have a difficult, in fact, almost impossible time kicking this habit, the opioid habit.

[01:20:53] And what do we know about in terms of the provider community around us And what is, in fact, the role that the health department and your agency, how are you all looking at that and trying to look at that as actually a very, very viable and important part of the treatment strategy we should be advocating for for at least most folks who can't do it any other way?

[01:21:15] And maybe you can explain what Suboxone is so people here understand what my point is. Yeah, so in general, I think what Supervisor Stork's talking about, a medication-assisted treatment. It's a medication that can be given either an injectable form once a month or it's a medication, a pill form that you have to take on a daily basis.

[01:21:35] And what it does is it helps decrease cravings and it also helps with essentially making it challenging to experience the high if you're using opioids as well. So it acts in two different ways. And for the youth, the FDA a handful of years ago just changed it so that we could start giving medications for youth down to age 16.

[01:21:58] There's not a whole lot of providers out there. We have our medication-assisted treatment clinic. It's a small one. We've been able to identify a couple of providers in the community that do that. It's at the Sharon Boulevard Center, you know, with that. We're flexible with folks that live in other parts of the county.

[01:22:15] I made that point specifically as you and I have talked. Yes, we have to start somewhere with this. I'm agreeing. I'm hoping to expand that. In the adult world with medication-assisted treatment, we have it in multiple locations where services are provided with the Community Services Board.

[01:22:32] And so private practitioners, is there anything more that we can do as an entity, government, et cetera, to encourage more availability through that? One of the challenges with the private practitioners is this is new to them.

[01:22:48] So it's one step getting the additional training that you need to do to become a provider to give medication-assisted treatment. But then on top of that, there's additional training and also the risk that goes with treating adolescents that are involved with that as well.

[01:23:04] And it really does come down to a comfort level with the prescribers. Even the CSB prescribers that typically have a fairly flexible comfort level, we've not been able to get everybody where we want them to be with this as well. but that is something that we're moving towards. So I think it is something where the practitioners out in the community really have to get that comfort level with prescribing medication-assisted treatment.

[01:23:29] Thank you. And thank you for your leadership, Mr. Shork. I think it's a good reminder that, again, it's not all on the schools, and we all have the opportunity to take the Revive training, to have the Narcan, and to perhaps partner with CSB to help bring the trainings beyond the Sharon Boulevard Centers.

[01:23:46] And you can do it all virtually. There you go. All right, I have some words, you're Walkinshaw, then almost everyone. Go ahead. Thank you, Madam. I will be very brief. So the $140 really jumped out at me. Just so I understand, that's per dose, per?

[01:24:03] That's for a box, as I understand it, and it comes with two doses, but it can take multiple doses sometimes to revive folks. And I think it does kind of depend on insurance coverage, but I think out of pocket, yes, it's $140. I'm just wondering, and I see the Revive training and the MOU with BDH through FCPS.

[01:24:24] I'm just wondering, is there research nationally that demonstrates that distribution of Narcan, for example, to everyone who is in the emergency department for a non-fatal overdose reduces the rate of fatal overdose long-term?

[01:24:40] I mean, should we be putting more of our money and effort into purchasing and distributing those very expensive boxes of Narcan? Or does the research suggest that that's not actually the best way to go? So we are trying to do that here, and that's why we have the Fairfax Fire and Rescue Department partnered with the CSB to do those leave-behind kits, right?

[01:25:03] Because we're giving them to bystanders at the scene of overdose calls. So kind of the same thing just at that fire and rescue touch point. There are a number of different avenues through which we're able to get the Narcan for free for county government programs. So, like, for that program, we get it for free from the state.

[01:25:20] The school system got it for free from the state. Other entities, other county agencies are looking at equipping their staff with Narcan, and so there's a few different ways we can get it for free. But it's really when you start thinking about community members trying to go out and buy it, that's the piece that, you know, if FDA does approve it as an over-the-counter drug, then, you know, what should we do on sort of the government side when that happens? You know, we have the revived training classes through which people who complete that training can get the free Narcan. And so, you know, we just kind of will need to think through what that FDA change

[01:25:59] will will mean and how we strategically help the community. Yeah I mean I think it's obviously wonderful that people like Dan have taken the training of the Narcan but the real population that is most likely to be in a position to use it are folks who are interacting with us in some way shape or form and I just want to make sure at every touch point we're getting it to them and it sounds like we are or we're working in that direction. Yeah that's exactly the strategy like how can we really maximize every touchpoint that a person has with the county government system and also the hospital system to really help them towards that recovery path. I know the Inova

[01:26:38] hospital system, they have their own version of like a take-home Narcan program, and they're right now trying to kind of increase utilization, you know, of that. Thank you. Thank you, Supervisor Rokosha. I have Supervisor Luska and Supervisor Faust. Thank you. I'll go very quickly. I just want to reiterate a point. We had a town hall meeting last summer. We lost a 17-year-old student in my community, and I'm grateful for a number of the folks who are here today. They were part of that discussion. The thing that we heard consistently and specifically was the

[01:27:14] need for additional treatment services and both inpatient and outpatient, but the outpatient services are the critical ones. So I just want to reiterate, and thank you for making the point the settlement

funds would be used for us hopefully to address this.

[01:27:31] And I'm assuming we'll try to find the use of those dollars for a facility in this region, meaning within the geography of Fairfax County. So I hope that that's what that is, excuse me, I hope that's what's intended because that's what the community really needs.

[01:27:53] This idea of having individuals go outside the state, and I know we've had to do that, it's really disheartening. And in many cases, it's hard for the families to agree to do that. And by not doing that, they're putting their kids in jeopardy.

[01:28:11] So I just want to reiterate that point. So thank you very much. Thank you, Mr. Lust. We are over time, so I'm going to let Supervisor Faust wrap us up in respect to our school board members who are here. I'm just going to ask one question, too, just quickly. The presentation says that fentanyl is 50 times more potent than heroin, which I think we've all heard that over and over again.

[01:28:36] But the question I had was, is Narcan as effective against fentanyl as it is against other opioids? It's a dose-based response, so it's going to depend on how much is in there.

[01:28:52] Given that fentanyl and other analogs are so concentrated, it may very well be that it takes one dose and you're awake, or it may take two or three or four or five or six. So sort of generic, or the standard packaging of two is usually effective for the majority of overdoses, but it's certainly not a one-size-fits-all.

[01:29:12] But nor can... It will move towards reversing all opioids, including fentanyl, yes. Thank you. Thank you very much. Well, thank you, Ms. Volo, and to the entire team for your work and your continued work. We really appreciate it. We will now break until 3:10 for our joint budget meeting with the school board and the Board of Supervisors.

