

## 1 VIRGINIA ACTS OF ASSEMBLY — CHAPTER

2 *An Act to amend and reenact § 37.2-311.1 of the Code of Virginia, relating to comprehensive crisis system;*  
 3 *Marcus alert system; powers and duties of the Department of Behavioral Health and Developmental*  
 4 *Services related to comprehensive mental health, substance abuse, and developmental disability crisis*  
 5 *services; written plan.*

6 [H 453]

7 Approved

8 **Be it enacted by the General Assembly of Virginia:**9 **1. That § 37.2-311.1 of the Code of Virginia is amended and reenacted as follows:**10 **§ 37.2-311.1. Comprehensive crisis system; Marcus alert system; powers and duties of the**  
 11 **Department related to comprehensive mental health, substance abuse, and developmental disability**  
 12 **crisis services.**13 A. As used in this section and §§ 37.2-311.2 through 37.2-311.6, unless the context requires a different  
 14 meaning:15 "Community care team" means a team of mental health service providers, and may include registered peer  
 16 recovery specialists and law-enforcement officers as a team, with the mental health service providers leading  
 17 such team, to help stabilize individuals in crisis situations. Law enforcement may provide backup support as  
 18 needed to a community care team in accordance with the protocols and best practices developed pursuant to  
 19 § 9.1-193. In addition to serving as a co-response unit, community care teams may, at the discretion of the  
 20 employing locality, engage in community mental health awareness and services.21 "Comprehensive crisis system" means the continuum of care established by the Department of Behavioral  
 22 Health and Developmental Services pursuant to this section.23 "Crisis call center" means a call center that provides crisis intervention that meets NSPL standards for risk  
 24 assessment and engagement and the requirements of § 37.2-311.2.25 "Crisis stabilization center" means a facility providing short-term (under 24 hours) observation and crisis  
 26 stabilization services to all referrals in a home-like, nonhospital environment.

27 "Fund" means the Crisis Call Center Fund established under § 37.2-311.4.

28 "Historically economically disadvantaged community" means the same as that term is defined in  
 29 § 56-576.30 "Mental health awareness response and community understanding services alert system" or "Marcus alert  
 31 system" means a set of protocols to (i) initiate a behavioral health response to a behavioral health crisis,  
 32 including for individuals experiencing a behavioral health crisis secondary to mental illness, substance abuse,  
 33 developmental disabilities, or any combination thereof; (ii) divert such individuals to the behavioral health or  
 34 developmental services system whenever feasible; and (iii) facilitate a specialized response in accordance  
 35 with § 9.1-193 when diversion is not feasible.36 "Mobile crisis response" means the provision of professional, same-day intervention for children or adults  
 37 who are experiencing crises and whose behaviors are consistent with mental illness or substance abuse, or  
 38 both, including individuals experiencing a behavioral health crisis that is secondary to mental illness,  
 39 substance abuse, developmental or intellectual disability, brain injury, or any combination thereof. "Mobile  
 40 crisis response" may be provided by a community care team or a mobile crisis team, and a locality may  
 41 establish either or both types of teams to best meet its needs.42 "Mobile crisis team" means a team of one or more qualified or licensed mental health professionals and  
 43 may include a registered peer recovery specialist or a family support partner. A law-enforcement officer shall  
 44 not be a member of a mobile crisis team, but law enforcement may provide backup support as needed to a  
 45 mobile crisis team in accordance with the protocols and best practices developed pursuant to § 9.1-193.46 "NSPL" or "National Suicide Prevention Lifeline" means the national suicide prevention and mental  
 47 health crisis hotline established by the federal government in accordance with 42 U.S.C. § 290bb—36c to  
 48 provide a national network of crisis centers linked by a toll-free number to route callers in suicidal crisis or  
 49 emotional distress to the closest certified local crisis center.

50 "NSPL Administrator" means the entity designated by the federal government to administer the NSPL.

51 "Registered peer recovery specialist" means the same as such term is defined in § 54.1-3500.

52 "SAMHSA" or "Substance Abuse and Mental Health Services Administration" means the agency within  
 53 the U.S. Department of Health and Human Services that leads federal behavioral health efforts.54 B. The Department shall have the following duties and responsibilities for the provision of crisis services  
 55 and support for individuals with mental illness, substance abuse, developmental or intellectual disabilities, or  
 56 brain injury who are experiencing a crisis related to mental health, substance abuse, or behavioral support

57 needs:

58 1. The Department shall develop a comprehensive crisis system, with such funds as may be appropriated  
59 for such purpose, based on national best practice models and composed of a crisis call center, community  
60 care and mobile crisis teams, crisis stabilization centers, and the Marcus alert system. In addition to all  
61 requirements under this section, the crisis call center shall meet the requirements of § 37.2-311.2.

62 2. By July 1, 2021, the Department, in collaboration with the Department of Criminal Justice Services and  
63 law-enforcement, mental health, behavioral health, developmental services, emergency management, brain  
64 injury, and racial equity stakeholders, shall develop a written plan for the development of a Marcus alert  
65 system. Such plan shall (i) inventory past and current crisis intervention teams established pursuant to Article  
66 13 (§ 9.1-187 et seq.) of Chapter 1 of Title 9.1 throughout the Commonwealth that have received state  
67 funding; (ii) inventory the existence, status, and experiences of community services board mobile crisis teams  
68 and crisis stabilization units; (iii) identify any other existing cooperative relationships between community  
69 services boards and law-enforcement agencies; (iv) review the prevalence of crisis situations involving  
70 mental illness or substance abuse, or both, including individuals experiencing a behavioral health crisis that is  
71 secondary to mental illness, substance abuse, developmental or intellectual disability, brain injury, or any  
72 combination thereof; (v) identify state and local funding of emergency and crisis services; (vi) include  
73 protocols to divert calls from the 9-1-1 dispatch and response system to a crisis call center for risk assessment  
74 and engagement, including assessment for mobile crisis or community care team dispatch; (vii) include  
75 protocols for local law-enforcement agencies to enter into memorandums of agreement with mobile crisis  
76 response providers regarding requests for law-enforcement backup during a mobile crisis or community care  
77 team response; (viii) develop minimum standards, best practices, and a system for the review and approval of  
78 protocols for law-enforcement participation in the Marcus alert system set forth in § 9.1-193; (ix) assign  
79 specific responsibilities, duties, and authorities among responsible state and local entities; and (x) assess the  
80 effectiveness of a locality's or area's plan for community involvement, including engaging with and providing  
81 services to historically economically disadvantaged communities, training, and therapeutic response  
82 alternatives.

83 3. *The Department, in collaboration with the Department of Criminal Justice Services, may amend the*  
84 *written plan created pursuant to subdivision 2 after the publication of such written plan, provided that (i) the*  
85 *stakeholders listed in subdivision 2 are consulted during the development of any new language to be added to*  
86 *such written plan and (ii) a public comment period of no less than 30 days is held prior to the finalization of*  
87 *such written plan. The written plan shall serve as the operational framework for relevant components of the*  
88 *comprehensive crisis system and the Marcus alert system. State agencies and local implementing partners*  
89 *shall align their policies, procedures, and operations on an ongoing basis with the requirements and*  
90 *guidance set forth in the written plan, as amended.*

91 C. 1. No later than December 1, 2021, the Department shall establish five Marcus alert programs and  
92 community care or mobile crisis teams, one located in each of the five Department regions.

93 2. No later than July 1, 2023, the Department shall establish five additional Marcus alert system programs  
94 and community care or mobile crisis teams, one located in each of the five Department regions. Community  
95 services boards or behavioral health authorities that serve the largest populations in each region, excluding  
96 those community services boards or behavioral health authorities already selected under subdivision 1, shall  
97 be selected for programs under this subdivision.

98 3. The Department shall establish additional Marcus alert systems and community care teams in  
99 geographical areas served by a community services board or behavioral health authority by July 1, 2024; July  
100 1, 2025; and July 1, 2026. No later than July 1, 2028, all community services board and behavioral health  
101 authority geographical areas shall have established a Marcus alert system that uses a community care or  
102 mobile crisis team.

103 4. All community care teams and mobile crisis teams established under this section shall meet the  
104 standards set forth in § 37.2-311.3.

105 D. The Department shall report annually by November 15 to the Governor and the Chairmen of the House  
106 Committees for Courts of Justice and on Health and Human Services, the Senate Committees for Courts of  
107 Justice and on Education and Health, and the Behavioral Health Commission regarding the comprehensive  
108 crisis system and the effectiveness of such system in meeting the goals set forth in this section. The report  
109 shall include, for the previous calendar year, (i) a description of approved local Marcus alert programs in the  
110 Commonwealth, including the number of such programs operating in the Commonwealth, the number of such  
111 programs added in the previous calendar year, and an analysis of how such programs work to connect the  
112 Commonwealth's comprehensive crisis system and mobile crisis response programs; (ii) the number of calls  
113 received by the crisis call center established pursuant to this section; (iii) the number of mobile crisis  
114 responses undertaken by community care teams and mobile crisis teams in the Commonwealth; (iv) the  
115 number of mobile crisis responses that involved law-enforcement backup; (v) the number of crisis incidents  
116 and injuries to any parties involved; (vi) an analysis of the overall operation of any local protocols adopted or  
117 programs established pursuant to § 9.1-193, including any disparities in response and outcomes by race and  
118 ethnicity of individuals experiencing a behavioral health crisis and recommendations for improvement of the

119 programs; (vii) a description of the overall function of the Marcus alert program and the comprehensive crisis  
120 system, including a description of any successes and any challenges encountered; and (viii) recommendations  
121 for improvement of the Marcus alert system and approved local Marcus alert programs. The report shall also  
122 include (a) a description of barriers to establishment of a local Marcus alert program and community care or  
123 mobile crisis team to provide mobile crisis response in each geographical area served by a community  
124 services board or behavioral health authority in which such program and team has not been established and  
125 (b) a plan for addressing such barriers in order to increase the number of local Marcus alert programs and  
126 community care or mobile crisis teams. The Department of Criminal Justice Services shall assist the  
127 Department in the preparation of the report required by this subsection.

**ENROLLED**

**HB453ER**