

FAIRFAX COUNTY OPIOID RESPONSE PLAN FY 26-28



JULY 2025



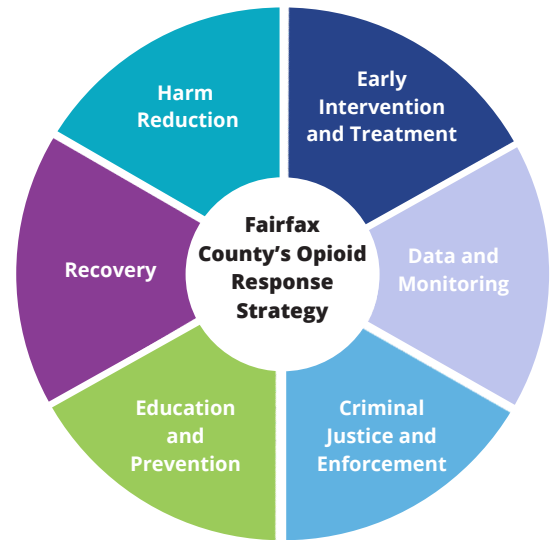
More information on Fairfax County's Opioid Response is available online at www.fairfaxcounty.gov/topics/opioids



INTRODUCTION

Addressing the opioid epidemic is a longstanding priority in Fairfax County. Since 2017, Fairfax County has worked to address the local impacts of the national opioid epidemic through a multi-pronged strategy involving a wide range of stakeholders. Significant local funding, strong cross-system collaboration, and County leadership united in their commitment to this issue has made it possible to launch and expand the many programs/activities that comprise the County's opioid response strategy. Similar to prior plans, this fourth iteration of the County's opioid response plan for FY 26-28 includes six priority areas: Education and Prevention; Early Intervention and Treatment; Data and Monitoring; Criminal Justice and Enforcement; Harm Reduction; and Recovery. Together, all of these programs/activities aim to:

- Reduce deaths from opioids.
- Prevent opioid misuse.
- Improve the quality of life of individuals impacted by opioid use disorder.
- Use data to describe the problem, target and improve interventions, and evaluate effectiveness.



Fairfax County's Opioid Response Plan is advanced by the Opioid and Substance Use Task Force, which includes representatives from public safety, criminal justice, and health and human services agencies, as well as Fairfax County Public Schools (FCPS) and other stakeholders. The Opioid Steering Committee, comprised of county and FCPS leadership, provides strategic guidance. The Fairfax Prevention Coalition is the community engagement arm with diverse community membership.

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Individuals who have been impacted by the opioid epidemic will continue to inform the county's opioid response strategy through participation on the Opioid and Substance Use Task Force; the Fairfax Prevention Coalition; focus groups/surveys as relevant/applicable; and as program staff for various opioid-related activities. Additionally, the Opioid and Substance Use Task Force collaborates with adjacent county/community initiatives such as Diversion First, the Partnership for a Healthier Fairfax, and Healthy Minds Fairfax, among others.

With opioid settlements now paying out to jurisdictions/states across the country, Fairfax County is well positioned to share lessons learned on local promising practices. There are also more opportunities to link and leverage programs, services and resources developed by other organizations. The Virginia Opioid Abatement Authority (OAA), the independent state entity guiding and overseeing Virginia's implementation of opioid settlement funds, is facilitating knowledge sharing while also managing and overseeing the distribution of funds. Like other counties and cities

in Virginia, Fairfax County receives opioid settlement funds directly and is also eligible to receive funds from the OAA through competitive and noncompetitive grant processes.

Fairfax County's guiding principles for using opioid settlement funds is depicted below. In 2023, Fairfax County identified eight projects to advance with opioid settlement funds. Collectively, these projects reflect the multi-pronged, cross-systems approach that guides the County's opioid response and are aligned with commonly identified community needs. The projects are in varying phases of implementation and include: increased jail-based behavioral health services; an additional track tailored to 18-25 year olds in the Fairfax Recovery Court; an additional nurse practitioner to prescribe medications for opioid use disorder (MOUD) to individuals incarcerated in the Fairfax Adult Detention Center; a research study on the jail-based MOUD program; a prevention campaign and anti-stigma initiative; community dialogue sessions to identify and address the root causes of youth substance use; expanded capacity to provide MOUD for youth (YMAT-E); and a cooperative regional project aiming to bring youth detoxification and residential substance use treatment to the Northern Virginia region.

Currently, these projects fully utilize the projected funding the County will receive from the opioid settlements. Additional settlements and payments are anticipated in the future, though the amount and timing is unclear. In FY 26-28, currently funded opioid settlement projects will be reviewed along with current and projected future available opioid settlement funds to inform sustainability planning and assess the potential to fund other projects. Additional information on the County's use of opioid settlement funds is available online here: www.fairfaxcounty.gov/topics/opioid-settlement-funds

In the pages that follow, data on local opioid trends is presented, followed by an inventory of current opioid programs/activities organized by the six priority areas noted above. A purple diamond icon identifies programs/activities funded with opioid settlement funds. While other federal and state grant funds are also used to support several programs/activities, the majority of programs/activities that comprise the county's opioid response are locally funded, reflecting the county's longstanding commitment to address the opioid epidemic's profound impact on the Fairfax community.

VOICES OF RECOVERY

"It's very complicated to stop using. It's complicated because when you are trying to stop using the pill (fentanyl) after two days, your body aches and you don't feel like going out... I've had three overdoses. Thank God, I was able to survive this, and for the program [YMAT-E]."

– YMAT-E Participant

Guiding Principles for Using Opioid Settlement Funds

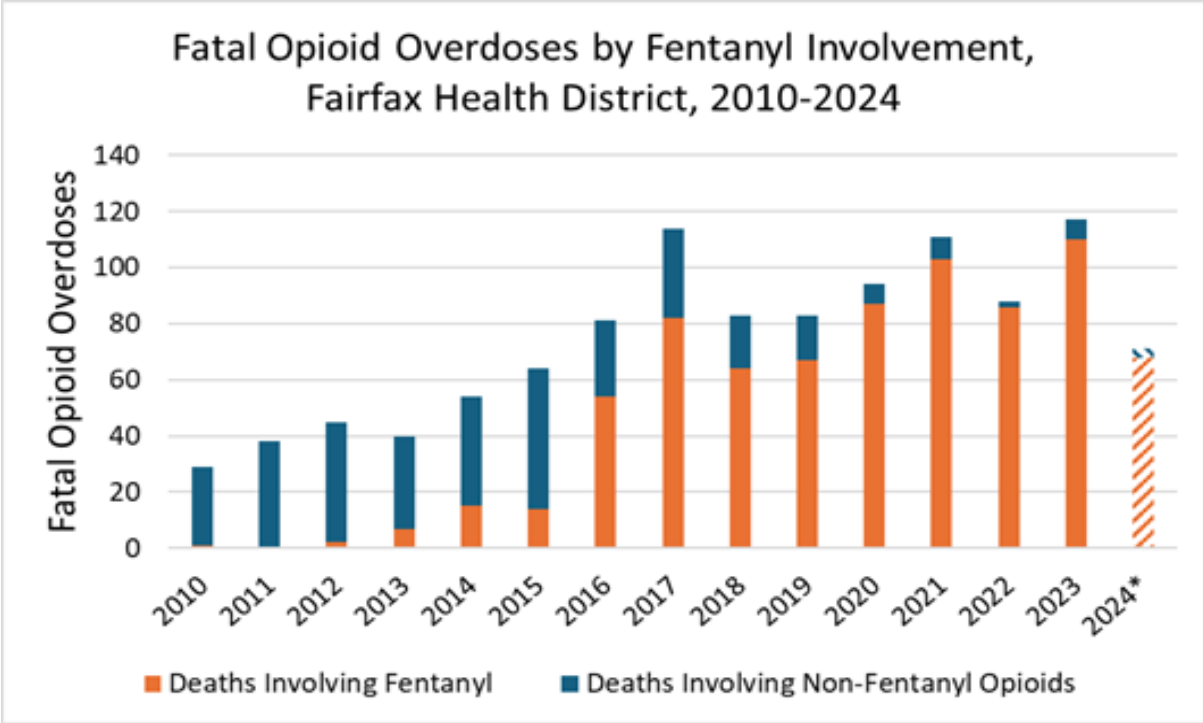
- Align with the County's Opioid Response Plan
- Fill critical system gaps (i.e. youth treatment services)
- Optimize existing programs/projects
- Invest in system transformation
- Balance timely use of funds with fiscal responsibility
- Utilize evidence-based/informed approaches
- Continue to leverage existing funding sources where possible

BY THE NUMBERS: THE OPIOID EPIDEMIC IN FAIRFAX COUNTY

Across the United States and Virginia, fatal drug overdoses surged following the beginning of the COVID-19 pandemic in 2020, and remained elevated through 2023.^{1,2} While preliminary data from the Virginia Department of Health (VDH) Office of the Chief Medical Examiner (OCME) show a substantial decline in statewide drug overdose deaths in 2024 (1,677 deaths) compared to 2023 (2,544 deaths), the number of deaths remains higher than was observed before the start of the pandemic.² Locally, fatal drug overdoses occurring in Fairfax Health District (includes Fairfax County, Fairfax City, and Falls Church City) increased 44% from 106 in 2019 to 153 in 2023, with a preliminary count of 105 fatal drug overdoses occurring in 2024.²

As has been observed in Virginia and the United States at-large, the majority of fatal drug overdoses occurring in Fairfax Health District involve opioids (71/105 or 68% in 2024).^{2,3} In fact, opioids are the leading cause of unnatural death in Fairfax Health District, surpassing deaths due to firearms and motor vehicle crashes.⁴ Over the past 15 years, a total of 1,112 people have died in Fairfax Health District from overdoses involving opioids. An increasing proportion of opioid deaths over time have involved fentanyl, a potent synthetic opioid, with 96% (68/71) of preliminary local fatal opioid overdoses involving fentanyl in 2024 (see chart below).²

Driven in part by the increasing availability and potency of fentanyl, local non-fatal opioid overdoses (measured by emergency department [ED] visits occurring at Fairfax Health District facilities) more than doubled from 202 in 2019 to 406 in 2023.⁵ There were 290 total ED visits for opioid overdoses in 2024, which is a 29% decrease from the previous year and similar to the counts observed in Fairfax Health District from 2020



Source: Office of the Chief Medical Examiner, Virginia Department of Health. *Data for 2024 are preliminary.

through 2022. Preliminary data for 2025 through April show a further 32% decrease in the number of opioid overdose ED visits (67 visits) compared to this same point in 2024 (98 visits). In 2024, opioid overdose ED visit rates were highest among young adults ages 18 to 24 (48.9 visits per 100,000 residents), followed by adults ages 25 to 34 years old (45.4 visits per 100,000 residents). Notably, the opioid overdose ED visit rate increased substantially among adolescents ages 10 to 17 and young adults ages 18 to 24 from 2021 through 2023, before these groups experienced significant decreases in 2024.⁵

There are disparities in opioid overdoses by race and ethnicity in Fairfax Health District.⁵ Opioid overdose ED visit rates increased among Black/African American residents from 2019 to 2023, and among Hispanic residents from 2020 to 2023, while remaining comparatively stable among Non-Hispanic White and Asian American/Pacific Islander residents. In 2024, the rates among Black/African American (46.4 visits per 100,000 residents) and Hispanic residents (35.1 visits per 100,000 residents) were 2.8 and 2.1 times that of Non-Hispanic White residents (16.4 visits per 100,000 residents), respectively.⁵ From 2022 through 2024, Black/African American residents (13.1 deaths per 100,000 residents), residents with other or multiple race/ethnicity groups (12.0 deaths per 100,000 residents), and Hispanic residents (11.6 deaths per 100,000 residents) had the highest fatal opioid overdose rates in Fairfax Health District.² While fatal opioid overdose rates decreased from 2023 to 2024 among Non-Hispanic White, Hispanic, and Asian American/Pacific Islander residents, the fatal opioid overdose rate among Black/African American residents increased slightly.²

As these data illustrate, opioid overdose trends (both total counts and demographic rates in different population groups) change over time as new substances enter the region, social conditions change, and prevention, intervention, and harm reduction programs are implemented. Regular monitoring of emerging trends allows programs and activities to adapt and respond to this changing environment, as well as provide tailored support to populations experiencing increased burden. To view regularly updated data on fatal and non-fatal opioid overdoses in Fairfax Health District, visit the Fairfax County Opioid Overdose Dashboard at www.fairfaxcounty.gov/health/opioid-overdoses-data.

¹ Ahmad FB, Cisevski JA, Rossen LM, Sutton P. (2025, Mar 12.) Provisional drug overdose death counts. National Center for Health Statistics. <https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>

² Fatal drug overdose data from the Virginia Department of Health (VDH) Office of the Chief Medical Examiner. <https://www.vdh.virginia.gov/medical-examiner/forensic-epidemiology/>. Preliminary counts for 2024 are expected to increase slightly as pending investigations are completed.

³ Centers for Disease Control and Prevention. (2024, Nov 1.) Understanding the Opioid Overdose Epidemic. <https://www.cdc.gov/overdose-prevention/about/understanding-the-opioid-overdose-epidemic.html>

⁴ Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Mortality 2018-2023 on CDC WONDER Online Database, released in 2024. Data are from the Multiple Cause of Death Files, 2023. Accessed at <http://wonder.cdc.gov/ucd-icd10-expanded.html>

⁵ Emergency department data are from the Virginia Department of Health (VDH) Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE). Population estimates are American Community Survey 5-Year Estimates from 2016-2023. 2023 5-Year Estimates are used for 2024 as 2024 5-Year Estimates have not yet been released.

FY 26-28 STRATEGIES, PROGRAMS AND ACTIVITIES

Addressing the opioid epidemic requires a multi-pronged strategy spanning from activities aimed at preventing opioid misuse from ever starting to those that support individuals in recovery — and everything in between. The many opioid-related activities and programs underway and/or planned for the future in Fairfax County are categorized into six priority areas, all with the goals of reducing opioid deaths, preventing opioid misuse, improving the quality of life for those impacted by opioid use disorder and using data to inform the county's opioid response activities/programs (see summary of Fairfax's opioid response strategy to the right).

EDUCATION AND PREVENTION

Education and prevention programs/activities are key, aiming to prevent opioid misuse from ever starting and increasing awareness of opioid use disorders (OUD) and how to access support services.

OBJECTIVES

- Increase awareness of evidence-based prevention strategies and OUD, treatment and recovery resources.
- Promote year-round safe disposal and storage of all prescription medications.
- Increase county staff understanding of OUD and knowledge of supports available for the individuals they serve.
- Reduce stigma and increase help-seeking behaviors for substance use disorders (SUD).

KEY ACTIVITIES

Public Communications Outreach/Campaign

The countywide opioid communication toolkit will continue to be available online at fairfaxcounty.gov/topics/opioids, as will the FCPS “Become Unskippable” campaign providing tips to caregivers on how to have conversations with teens about fentanyl. “Become Unskippable” was funded with opioid settlement funds and is available online at <https://www.fcps.edu/becomeunskippable>. National, state and regional communication materials will also be integrated into the county's opioid communications, as appropriate and relevant. In FY 26-28, opportunities will be explored to enhance culturally competent communication/outreach strategies.

Fairfax's Opioid Response Strategy Summary

Goals

Reduce deaths from opioids

Prevent Opioid Misuse

Improve the quality of life of individuals impacted by opioid use disorder

Use data to describe the problem, target and improve interventions, and evaluate effectiveness

Priority Areas

- Education and Prevention
- Early Intervention and Treatment
- Data and Monitoring
- Criminal Justice and Enforcement
- Harm Reduction
- Recovery

 items with this icon are supported with Opioid Settlement Funds

Community Coalition

The Fairfax Prevention Coalition (FPC) — online at fairfaxpreventioncoalition.com — is the County’s mechanism for community engagement in substance misuse prevention. In FY 26-28, the FPC will continue to implement awareness/prevention campaigns, explore strategies to center youth voice in prevention activities, and tailor activities based on community needs throughout the county.



Presentations to Community Groups

Presentations on local opioid trends and evidence-based prevention, treatment, harm reduction and recovery resources will continue to be provided upon request to community groups, including private schools. In FY 26-28, data-informed, targeted outreach to community organizations and residents will be a focus to amplify the reach of evidence-based prevention, treatment and recovery messages. For example, Neighborhood and Community Services (NCS) in partnership with the Fairfax-Falls Church Community Services Board (CSB), FCPS and the Virginia Foundation for Healthy Youth will provide the Dangers of Fentanyl Lesson to youth at NCS community centers and the Values in Prevention summer camp; notably, feedback from the participating youth will be obtained to inform future prevention activities and engage youth in drug prevention initiatives.

Training for County Staff and Partner Providers

Staff in public safety and health and human service agencies and partner organizations work with community members with OUD and their families and ongoing education and awareness is essential to ensure individuals impacted by OUD/SUD are supported on their path to recovery. Educating staff on opioid and substance use disorder and how to engage with and connect individuals to opioid-related support services will continue in FY 26-28 as training needs are identified.

Prevention Resources for Parents and Caregivers ✦

In FY 25, Healthy Minds Fairfax used opioid settlement funds to convene community dialogue sessions with caregivers and youth to explore the root causes of substance use and identify prevention strategies. Based on those sessions, a key focus area in FY 26-28 will be identifying and executing culturally-competent strategies to more effectively raise awareness of and engagement in prevention services/resources, including tips for helping caregivers improve communication with youth. The FCPS “Become Unskippable” campaign (see page 7) is one local resource that can be used and there are national resources available as well.

Stigma

Stigma around OUD creates barriers for people to seek treatment and access care. In FY 26-28, the importance of using recovery-oriented, rather than stigmatizing, language and approaches will continue to be promoted through presentations and outreach materials. Additionally, the Partnership for a Healthier Fairfax will pursue strategies to enhance understanding and discussion of behavioral health among Fairfax community members; in particular, community champions/ambassadors will be engaged to guide and lead activities.

Safe Storage and Disposal of Prescription Medication

Safely storing and disposing of unused prescription medication helps prevent misuse of prescription pills. This includes championing the biannual Drug Take Back Days, maintaining disposal boxes at county police stations for the public to access year-round, and raising awareness of disposal box locations and year-round safe disposal methods (i.e., distribution of drug disposal pouches and medication lock boxes at community events). Outreach efforts also include partnership with the Department of Public Works and Environmental Sciences to advertise safe drug disposal as part of their human health and environmental outreach.



EARLY INTERVENTION AND TREATMENT

Treatment options ranging from outpatient to residential are critical to ensure the appropriate level of care is available when individuals – both youth and adults – are ready to begin their recovery journey.

OBJECTIVES

- Increase access and reduce wait times to treatment for opioid use disorder (OUD), including medication for opioid use disorder (MOUD).
- Expand public and private treatment options for individuals of all ages in the Fairfax community.
- Enhance staff capacity to assist families affected by opioid and substance use disorders.

KEY ACTIVITIES

Substance Abuse Prevention Specialists (SAPS) Program

This collaborative program involving the CSB, FCPS and Juvenile and Domestic Relations District Court's (JDRDC) Intake Office provides substance use prevention, education and intervention services to youth identified as using substances or at risk of misusing substances. In FY 26-28, the cross-systems team will review program data/trends and explore strategies to increase program utilization and impact on youth struggling with substance misuse and their families.

Outreach and Resource Navigation Services for Families/Youth

Navigating substance use treatment and support services can be confusing and difficult. The CSB PORT (see page 16) is available to assist individuals 18 and older. For families of youth up to age 25, Care Navigation launched in FY 25; this service facilitates connection to longer term youth mental health and substance use treatment services. A web-based platform launched in FY 25 to help family and community members more easily find local children's behavioral health resources. In FY 26-28, there will be a focus on integrating these new resources into existing county services to ensure families/youth are able to easily receive resource navigation support when needed.

Expertise on OUD within the Maternal and Child Health (MCH) Program

A full-time public health nurse within the Health Department's MCH Program provides service coordination, maternal/infant home visiting, and case management services and serves as an expert resource for home visitors and community partners supporting opioid-exposed infants and families impacted by OUD. In FY 26-28, a focus will be strengthening collaborations with community and health providers to improve early identification and referral of pregnant and postpartum individuals with substance use disorders to better meet physical and behavioral health needs and promote positive maternal-child outcomes.

Intensive Substance Use Outpatient Treatment Services

The CSB's Behavioral Health Outpatient Services Intensive Outpatient Program (IOP) for substance use disorders serves individuals with OUD and other substance use/co-occurring disorders. Available in English and Spanish at three CSB locations across the County, the program is nine hours/week for 16-20 weeks and includes group and individual therapy sessions as well as regular urine drug

SNAPSHOT OF SUCCESS

A pregnant individual who was referred to MCH by public safety partners following an overdose is engaged in treatment and has been substance-free for several months. She delivered a healthy baby and is excited about being a new mom, actively participating in home visiting support services.

testing. Participants are connected to a wide range of services based on their individual needs/goals, such as medication assisted treatment, psychiatric services, trauma counseling, self-help groups, employment services, and primary health/dental care.

Community-based Medication for Opioid Use Disorder (MOUD) Programs ♦

MOUD is an evidence-based, highly effective FDA-approved treatment that significantly increases an individual's likelihood of success in recovery. In 2019, the CSB Addiction Medicine Clinic (AMC) launched Office Based Addiction Treatment (OBAT) which provides outpatient MOUD services, as well as medication for other substance use disorders, to individuals 18 and older. The CSB has expanded MOUD (also known

SNAPSHOT OF SUCCESS

Three youth receiving YMAT-E services successfully graduated high school in summer 2025. Being on MOUD helped them abstain from fentanyl and regularly attend school, making graduation possible.

as medication-assisted treatment, or MAT) services to youth through the creation of the Youth MAT-Expansion (YMAT-E) program, which is funded with opioid settlement funds. YMAT-E provides comprehensive clinical services including FDA-approved medications (such as suboxone, naltrexone and naloxone), individual and group counseling, behavioral therapy, peer support and care coordination. Both AMC and YMAT-E collaborate with many stakeholders to reduce barriers in accessing treatment for individuals referred for MOUD treatment. In FY 26-28, the AMC will utilize a federal grant to make it easier and quicker for individuals to start and continue MOUD treatment; this includes partnering with Fairfax County Fire and Rescue (FRD) to explore opportunities to connect individuals encountered by FRD for nonfatal opioid overdose and other opioid-related complications to the AMC.

Jail-based MOUD Program ♦

Since July 2020 when this program launched, over 5,500 individuals have received MOUD (i.e., suboxone, methadone and vivitrol) while incarcerated in the Fairfax Adult Detention Center – underscoring the huge need for this critical treatment in the correctional setting. Along with medication, individuals participating in this program receive trauma-informed behavioral health services and peer support while incarcerated, as well as robust resources (including naloxone and fentanyl and xylazine test strips) during the reentry period (also see HOPE on 17). Opioid settlement funds are being used to expand jail-based behavioral and medical health treatment capacity for this program. Focus areas in FY 26-28 will include: incorporating new treatment options; integrating advanced technology to improve individual care and outcomes; and, assessing/refining release planning and re-entry supports and connections (such as transportation, housing, employment, etc.) to improve the likelihood of continued MOUD treatment in the community (at the CSB AMC or another provider).



1 in 5

Inmates at the Adult Detention Center Screened for Opioid Use Disorder Received MOUD Treatment

Juvenile Justice System Pathways to MOUD

Similar to the adult correctional setting, there is a need in the juvenile justice system to ensure youth with OUD have access to MOUD, both in residential and community settings. In FY 26-28, processes for connecting youth residing in juvenile justice residential facilities (including the juvenile detention center) and youth on probation in the community with CSB YMAT-E services will be streamlined and enhanced.

George Mason University Mason and Partners (GMU MAP) MOUD Bridge Clinic

This regional program provides low-barrier and same-day access to MOUD for new patients, on-demand, serving insured and uninsured patients of all ages. A multi-disciplinary team comprised of a medical provider, counselor, social worker and peer recovery specialist incorporate harm reduction (naloxone and overdose prevention) and mental health screenings into care. The program is a “Bridge” model, accepting referrals from

a wide range of community stakeholders (i.e., primary care providers, emergency departments (ED), non-profit partners, schools) with the goal of ultimately connecting patients to community-based providers for ongoing, long-term treatment. A key focus in FY 26-28 will be creating and strengthening referral pathways to and from the GMU MAP Bridge Clinic.

Detoxification Services for Adults

The CSB's Fairfax Detoxification Center (which operates 24/7/365) provides short-term residential detoxification services for individuals 18+ years old who need help to safely detoxify from the effects of opioids and other substances. A specialized outreach team, Detox Diversion, focuses on engaging directly with individuals who are struggling with substance misuse in the community, with the goal of bringing them to the Fairfax Detoxification Center to assist them in their recovery journey. Contracted hospital detoxification services are also available for individuals with medical complexity.

Residential Substance Use Disorder Treatment Services for Adults

For several decades, the CSB has provided intermediate and long-term comprehensive residential substance use disorder treatment for individuals 18+ years old. In FY 25, a system redesign to maximize utilization led to the consolidation of four programs into two: Crossroads and A New Beginning.

In FY 26-28, key focus areas will be optimizing this system redesign and ensuring continuity of services while the building(s) housing Crossroads is renovated. Specialized treatment services are provided for pregnant and post-partum women; individuals with co-occurring disorders; and individuals with language barriers. In addition to CSB operated services, contracted intensive residential substance use disorder services are also available, with the goal of minimizing the length of time individuals are waiting for services in the community.



Youth Detoxification and Residential Treatment Services ✦

To address a gap in the local continuum of substance use treatment services for youth, the five CSBs in Northern Virginia are utilizing opioid settlement funds and local funds to bring youth detoxification, residential treatment and crisis stabilization services to the region. After significant challenges finding a vendor to provide this critical service, a contract was awarded in FY 25 with services scheduled to begin in the first half of calendar year 2026. In FY 26-28, a significant focus will be ensuring this critical service is optimized and integrated well into the regional youth substance use treatment continuum.

Coordination with Local Hospitals

Timely and effective connections to community-based treatment (both public and private), harm reduction and recovery resources are critical for individuals who receive medical treatment related to opioid overdose and OUD in local hospitals. Key focus areas in FY 26-28 include continuing to collaborate with local hospitals to strengthen the transition of care from the ED to community treatment, harm reduction and recovery and working with Inova to optimize their innovative ED-based peer support program.

Private Medical Provider Education

Private medical providers, including nurses, pediatricians, general practitioners, OB/GYNs, specialists and ED personnel, can help to identify patients with OUD, connect them with services and, in some cases, even prescribe MOUD. In FY 26-28, insights obtained through a survey of medical professionals (see page 13) will inform strategies/activities to increase local private medical providers' knowledge and use of substance use disorder screening and treatment tools and local support services available. Prospective activities include outreach and education to medical associations and a continuing education (CEU) training for providers on MOUD.

Local Public and Private Substance Use Treatment Services Continuum

Substance use treatment services are available both through the CSB and private providers in the Fairfax community. In FY 26-28, services currently available for adults and youth will continue to be reviewed to assess capacity/utilization and identify gaps where additional resources are needed.

DATA AND MONITORING

Analysis of national, state and local opioid and other drug data and cross-agency data sharing provide essential insights on opioid and other drug use and overdose trends in the Fairfax community, allowing agencies to target and improve interventions, assess program effectiveness, and promptly respond to emerging issues.

OBJECTIVES

- Identify, collect, and analyze national, state and local data to enhance understanding of local overdose trends and substance use prevention factors.
- Educate stakeholders and community members on local opioid and other drug data and trends.
- Use data to design, target, evaluate, and improve interventions.
- Identify potential overdose clusters for investigation and response.

KEY ACTIVITIES

Opioid Data Dashboard

The public-facing opioid data dashboard, developed and regularly updated by the Fairfax County Health Department, displays local fatal and non-fatal overdose trends over time and by demographic groups (e.g., age, gender, race/ethnicity). In addition to sharing the most recent opioid overdose counts with community members, the dashboard informs cross-agency opioid response priorities and programming. In FY 26-28, the Health Department will continue to make the Fairfax opioid data dashboard available to the public, transition data sources to align with Virginia Department of Health reporting requirements, provide ongoing maintenance and education on its use, and explore enhancements to improve readability/use.

Interventions from Surveillance Data

The Health Department will continue to analyze local emergency department, emergency medical services, and mortality data from local, state, and national data to design and inform opioid-related interventions. This monitoring and analysis yields data-driven insights (e.g., emerging substances, overdose spikes/clusters, etc.) that can be used to identify the need for further investigation and targeting of response activities.

Applying National and State Data Tools

Several national and state opioid-related data tools are available/in development. Examples include the Washington-Baltimore High-Intensity Drug Trafficking Area (W/B HIDTA)'s Overdose Detection Mapping Application Program (ODMAP), which provides regional information on the geographic locations of suspected overdoses, and Virginia Commonwealth University's Opioid Abatement Toolkit, which shares evidence-based strategies for opioid prevention, intervention, and harm reduction. In FY 26-28, county agencies will continue to assess these tools for opportunities to inform and enhance Fairfax County's opioid response.

Data Collection/Monitoring and Research on Trends and Interventions ♦

Data collection activities and research on interventions underway will continue to inform program design and effectiveness and identify process improvements needed. Efforts in progress include: an evaluation of the jail-

based MOUD program (funded with opioid settlement funds) and, building upon findings of a 2024 program evaluability study, data collection on process/outcome measures in three CSB peer recovery programs. In FY 26-28, the Fairfax County Health Department will expand collaboration with program managers to define and monitor indicators to assess and improve programs/activities.

Fairfax County Youth Survey Assets Analysis

The Fairfax County Health Department and Department of Management and Budget Countywide Data Analytics team will analyze Fairfax County Youth Survey data for factors (also referred to as assets) correlated with improved substance use and mental health outcomes among youth within demographic subgroups (i.e., race/ethnicity, gender). The findings will be used to inform prevention and intervention programming tailored to youth within specific demographic subgroups.

Survey Local Medical Providers

National research illustrates that there are opportunities to improve primary care provider knowledge and prescribing of MOUD in the primary care setting. In FY 26-28, the Fairfax Health Department will pursue a survey of local medical providers to assess their knowledge/attitudes and barriers to prescribing MOUD to identify systemic barriers that could be addressed to improve access to MOUD in the primary care setting.

Overdose Fatality Review (OFR)

A nationally recognized model similar to Domestic Violence Fatality Review Teams, many communities across the country are using OFRs to strengthen their opioid response strategies by generating recommendations to address system, agency, population, research, and policy needs. OFRs require significant resources – best practice guidelines recommend a full-time staff position to coordinate the OFR and monthly 2-3 hour meetings involving a multidisciplinary team of professionals. In FY 26-28, the Opioid and Substance Use Task Force will explore launching an OFR in Fairfax, taking into consideration resource/funding needs and assessing whether the potential benefits could be realized through alternative, possibly less resource-intensive approaches.

CRIMINAL JUSTICE AND ENFORCEMENT

Programs/activities in this priority area focus on law enforcement efforts to limit the supply of deadly opioids in the Fairfax community, and connecting individuals who come into contact with the criminal justice system for substance use-related offenses to treatment and recovery supports.

OBJECTIVES

- Investigate overdoses with the goal of prosecuting those who distribute illegal and deadly drugs into the community.
- Divert individuals who come into contact with the criminal justice system for drug-related offenses.

KEY PROGRAMS/ACTIVITIES

Fairfax County Police Department (FCPD) Overdose Investigation Unit (OIU)

Established as part of the 2018 opioid plan, this unit investigates persons involved in the distribution of drugs resulting in overdoses. In 2024, the unit investigated 70 fatal overdoses (~90 hours/ investigation) and 228 nonfatal overdoses. The unit also collects and analyzes data on individuals

SNAPSHOT OF SUCCESS

An FCPD OIU investigation led to the arrest of an individual for distributing fentanyl which caused at least one fatal overdose. The thoroughness of the investigation, which also revealed other fatal and nonfatal overdose victims, led the individual to plead guilty in federal court. The guilty plea carries a mandatory minimum sentence of 20 years in prison.

encountered by FCPD for nonfatal overdoses, providing partner agencies with important and timely information to monitor emerging trends and treatment and recovery needs. Individuals encountered by FCPD for nonfatal overdoses are referred to the CSB for post-overdose follow-up as part of 4Recovery (see also page 16).

Recovery Court (formerly known as Drug Treatment Docket) ♦

The mission of this specialty docket is to enhance public safety through cost-effective, research-based interventions that integrate treatment and court supervision and to connect individuals who come into contact with the criminal justice system for substance use-related offenses with treatment and recovery resources. In FY 25, a Young Adult Track for individuals 18-25 year old was established with opioid settlement funds; this specialized track expands the Recovery Court capacity to 50 and provides targeted supports for young adults. In FY 26-FY 28, the Recovery Court will explore strategies to ensure all participants and their families have access to peer recovery specialists whose lived experience and success in recovery can be a source of support, strength and inspiration.

Services for Court-Involved Individuals

Both Juvenile and Domestic Relations District Court and General District Court work with court-involved individuals with opioid and substance use issues. Identifying court-involved individuals with OUD is key in connecting them with treatment, harm reduction and recovery supports. In FY 26-28, opportunities to expand and enhance prevention, treatment, harm reduction and recovery supports for court-involved individuals will be pursued; for example, General District Court will explore partnering with external organizations to connect court-involved individuals with OUD to harm reduction and recovery supports.

HARM REDUCTION

Harm reduction is a set of practical strategies and ideas to reduce negative consequences associated with drug use.

OBJECTIVES

- Provide harm-mitigating resources in culturally competent ways to individuals with substance use disorders and their families.
- Utilize culturally competent strategies to increase awareness and use of harm reduction strategies such as fentanyl test strips and naloxone.

KEY PROGRAMS/ACTIVITIES

Naloxone (also known as Narcan)

Naloxone is the opioid overdose reversal medication (often referred to by the brand name Narcan). In addition to being used by first responders during 911 calls involving suspected opioid overdoses, it is a key harm reduction tool that has been incorporated into several programs/activities throughout the County's opioid response. In FY 26-28, naloxone – along with education on how to

VOICES OF RECOVERY

“Addiction is something that someone who doesn’t suffer from it rarely understands. And Drug Court is an incredible alternative to incarceration for someone who is struggling with addiction. It is the opportunity that many of us need to be able to get back on track. And because of this opportunity, my life and the life of my family and everybody that I come into contact with is so much better.”

– Recovery Court Graduate

16,000+
people
trained to
recognize and
reverse overdoses



(through Feb 2025)

recognize and reverse an opioid overdose – will continue to be made available to County staff and community members through:

- Opioid Overdose and Naloxone Education (OONE) (formerly known as REVIVE!), provided by the CSB — a free training for community members on how to recognize and reverse an overdose. The training is available in English and Spanish in virtual/in-person format; community groups can also request the training. A free, 10-minute video on how to recognize and reverse an overdose is also available on the County web site.
- Jail-based staff who provide naloxone and fentanyl test strips (FTS) to individuals being released from the Adult Detention Center. Connections to community-based treatment and recovery supports are also provided upon release (see also page 10 and 17).
- Leave Behind Kits provided by the Fairfax County Fire and Rescue Department (FRD, in partnership with the CSB) to individuals (the patient and/or family members/friends) encountered on overdose calls. The kits include naloxone for future use and information on available treatment and recovery services. This is part of the 4Recovery Project (see also page 16).
- Behavioral health treatment staff who provide naloxone and FTS to individuals receiving treatment and recovery support services for substance use disorder.
- Nurse practitioners who provide naloxone and FTS to individuals in housing shelters and individuals who are unsheltered/homeless.
- Placement in FCPS schools, programs and buses, along with training for staff to administer naloxone in the event of an overdose on school property. In addition to school personnel, FCPD school resource officers also carry naloxone.
- The County Workplace Naloxone Program, which ensures staff at select County facilities have access to naloxone at the worksite (similar to fire extinguishers) and are trained in how to recognize and respond to an opioid overdose.



Fentanyl and Other Drug Test Strips

Since most fatal overdoses in the Fairfax Health District in recent years have involved fentanyl, the CSB provides FTS to individuals participating in various programs. In FY 26-28, expanding access to FTS will be explored, along with the distribution of xylazine test strips given concerns about the presence of the animal tranquilizer xylazine in the national illicit drug supply. The efficacy of test strips for other drugs (i.e., benzodiazepine, etc.) will also be monitored.

Comprehensive Harm Reduction (CHR) Programs

CHR programs are evidence-based and effective in preventing overdoses, disease and fatality, connecting people to peer support treatment for substance use and related infections, and reducing drug use. The Chris Atwood Foundation (CAF), a local nonprofit, runs a Virginia Department of Health funded and authorized CHR program in Northern Virginia. The CHR program is staffed by certified peer recovery specialists and provides free naloxone; overdose prevention training; fentanyl, benzodiazepine, and xylazine test strips; sterile syringes and safe syringe disposal; wound care; HIV and Hepatitis C testing; peer counseling and linkages to treatment, medical care and social services. It is operated out of a mobile van with stop locations throughout the Northern Virginia region. Since program



inception in June 2021, the CHR has dispensed over 12,200 doses of naloxone and received reports of over 600 overdose reversal/lives saved with CAF-dispensed naloxone. In FY 26-28, coordination between the CHR and county agencies will continue to assist the CHR in reaching those who could benefit from its services.

Relapse Prevention Education

Individuals participating in CSB treatment services currently receive relapse prevention education. In FY 26-28, resources for relapse prevention education for the general population will be explored.

RECOVERY

Recovery is a process of change through which people with substance use disorders improve their health and wellness, live self-directed lives and strive to reach their full potential.

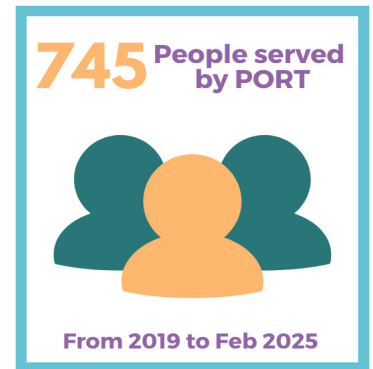
OBJECTIVES

- Expand access to culturally competent recovery support services.
- Strengthen recovery-oriented systems of care.
- Increase local social and recreational recovery assets.

KEY ACTIVITIES

Peer Outreach Response Team (PORT)

This CSB team of peer recovery support specialists (initially established as part of the 2018 opioid plan) with experience in recovery from substance use disorders provides culturally competent resource navigation, one-on-one peer support, post-overdose support, harm reduction principles and more to county residents 18 years old and older. Individuals do not need to be receiving other CSB services to work with PORT and can connect with PORT via their preferred communication mode, location and frequency. In FY 26-28, PORT will continue to foster partnerships with new referral sources (county agencies and community stakeholders).



VOICES OF RECOVERY

“Drug use and alcohol use, I thought it was normal. In my family, it’s a tradition. This program has given me so much knowledge and hope. I never thought I would be grateful to be in jail. I am proud to say, I am grateful. The Sheriff and all the people here ... believe in us. When I leave here, I want to spread awareness among young people. I can say, we’ve been where you are. Recovery is possible.”

– STAR Participant

The 4Recovery (Rapid Referrals and Resources for Recovery) Project

Through this activity, individuals encountered by FCPD and/or FRD for nonfatal opioid overdoses are connected to CSB for post-overdose follow-up and support services. This cross-agency effort has saved lives and improved the quality of life for community members with OUD. In FY 26-28, continuous refinements will be made to increase engagement, impact (i.e. exploring broadening the eligibility criteria for referrals to include substances other than opioids), and coordination with other systems/ programs (i.e. the Inova Emergency Department peer support specialists).

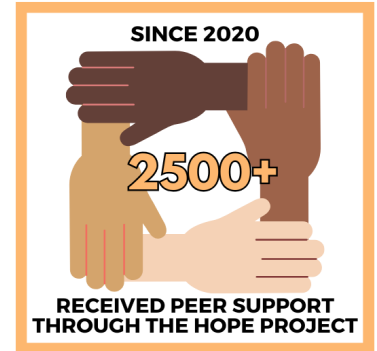
Striving to Achieve Recovery (STAR) Program

This voluntary, peer-led treatment and recovery program in the Adult Detention Center, a partnership between the Sheriff’s Office and CSB, provides individuals an opportunity to work on their recovery while

incarcerated. In FY 26-28, the STAR program will expand programming capacity, as well as access to recovery resources (examples include bringing in guest speakers and virtual and in-person 12-step meetings).

HOPE (Harm Reduction and Overdose Prevention with Lived Experience) Project

This collaborative effort involving the CAF, CSB and Sheriff's Office provides peer support services to individuals incarcerated at the Adult Detention Center and during the re-entry period. To ensure individuals have the tools needed to be successful in treatment/ recovery as they transition back to the community, recovery housing grants, basic needs assistance, linkage to healthcare, employment services, transportation to the Recovery Community Center and cell phones with additional resource information are provided. In FY 26-28, the HOPE Project will expand support for jail-based MOUD patients before and after release from jail.



Support for Those Impacted by Overdoses/Substance Misuse

When a loved one is struggling with substance misuse and/or has experienced an overdose (nonfatal or fatal), it can be traumatic and difficult for friends and family members. One example of a County-affiliated support group is the Parent Support Group, offered by JDRDC for parents/guardians of teens under 18 with behavioral issues, including substance use. In FY 26-28, national, state and local supports/trainings for family members will be identified and linkages with various programs/activities will be made. This will include resources to assist family members/friends in figuring out the best way to support their loved one, as well as grief recovery resources for family/friends following a fatal overdose.



National Recovery Month

Every September, this national observance raises awareness that substance use and mental health services can enable those with a mental and/or substance use disorders to live healthy and rewarding lives. In FY 26-28, opportunities to celebrate and promote recovery will be pursued.

Recovery Community Center

During FY 23-25, the CAF Recovery Community Center opened in Fairfax City, providing people with substance use disorders and their families one-on-one and group peer support, recovery housing grants (1,093 grants provided in FY 23-25), basic needs assistance, education, social connection and educational, legal, employment and health care resources/services that support treatment and recovery. Additionally, a Peer Recovery Specialist Academy (PRSA) operating out of the Recovery Community Center has helped increase Northern Virginia's peer recovery specialist workforce by 135 graduates, several of whom have obtained employment with local organizations. In FY 26-28, the CAF is planning to expand services for adolescent youth, young adults and their families, and enhance the PRSA through additional paid internships and specialized training for youth/family peer support specialists.

Connecting Individuals in Housing Services to OUD Recovery Supports

The Fairfax County Office to Prevent and End Homelessness (OPEH) oversees several contracts for homelessness prevention, hypothermia prevention, outreach, emergency shelter, rapid rehousing, and supportive housing services. Currently, an OPEH staff person provides individual and program level guidance to housing providers on substance use related matters. In FY 26-28, opportunities will be explored to strengthen connections to early intervention/treatment and recovery resources (i.e., peer support, etc.) for individuals with OUD who are receiving housing services.

Wraparound Support Services

Having transportation, stable housing and employment are key to a person's ability to sustain recovery. In FY 26-28, strategies will be explored to enhance housing, employment and transportation supports for individuals in recovery (e.g., Fairfax County's TOPS (Transportation Options, Programs and Services)).

CONCLUSION

Over the next three years, as the county advances these programs/activities in collaboration with community stakeholders, data-informed modifications will be made to adapt to emerging issues/trends and enhance effectiveness. This ongoing assessment and optimization will ensure that every possible tool and resource available to address the opioid epidemic is working towards the goals of reducing opioid deaths, preventing opioid misuse, and improving the lives of those impacted by opioid use disorder. While the national, state and local decline in fatal opioid overdoses from 2023 to 2024 is encouraging, there are still far too many fatal opioid overdoses in the Fairfax Health District and much work to be done in FY 26-28 to meet the associated multi-faceted needs experienced across the community. Fairfax County is well-positioned to tackle this complex national epidemic in large part due to the strong, cross-system collaboration and commitment among county agencies and community partners.

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