

Disaster Behavioral Health Services in Virginia

Behavioral healthcare is an integral part of the broader healthcare industry and, as such, is fully integrated as a function of the health and medical emergency support function (ESF#8). Community Services Boards (CSBs) are the primary provider of disaster behavioral health support to citizens following a disaster or critical incident. Delivery and scope of disaster behavioral health services in Virginia are determined by each CSB and are subject to the size, scale and nature of the event as well as the availability of resources. To find the CSB in your area you can visit <https://vacsb.org/csb-bha-directory/>. Disaster behavioral health service delivery may include, but may not be limited to the following:

- Brief encounters with community members to support short and long-term adaptive functioning, resilience and coping skills associated with disaster reactions
- Psychoeducation materials with information on disaster or stress reactions and how to address them
- Referral to ongoing support with CSB, victim services or other vetted organization for recovery support
- Critical Incident Stress Management (Individual and/or Group model)
- FEMA funded Crisis Counseling Program when available following a presidential disaster declaration
- Crisis and/or grief support during an activated emergency response operation such as shelter operations, Family Assistance Centers, memorials or other community event

Planning Assumptions about behavioral health support following a disaster

- Local jurisdictions maintain primary responsibility to coordinate emergency response to include disaster behavioral health services.
- Existing systems that provide behavioral health services may be damaged, disrupted, or overwhelmed during an emergency.
- The local CSB is the first responder for disaster behavioral health services. If a CSB has exhausted its capabilities, the CSB may request support from the state via a request from the Executive Director (or designee) of the local CSB for assistance through the DBHDS mutual aid agreement protocol.
- Local disaster behavioral response resources will vary from one locality to another.
- Disaster behavioral health responders will triage, assess, provide intervention or make referrals within the scope of their training and practice.
- Delivery of disaster behavioral health services should be based on current, evidence-based models and widely accepted national guidelines.
- Whenever possible, disasters should be managed locally with state support upon local request.
- If an incident has a significant potential mental/behavioral health impact, the local jurisdiction should notify the local Community Services Board as soon as practical to allow coordination of response.