

## Department of Planning and Budget 2024 Session Fiscal Impact Statement

1. **Bill Number:** HB586E

**House of Origin**    ☐ Introduced    ☐ Substitute    ☒ Engrossed  
**Second House**    ☐ In Committee    ☐ Substitute    ☐ Enrolled

2. **Patron:** McClure

3. **Committee:** Committee on Public Safety

4. **Title:** Training standards for law-enforcement officers; drug use.

5. **Summary:** The engrossed bill requires the Department of Criminal Justice Services to develop model policies for law-enforcement personnel on use of naloxone or other opioid antagonists to prevent opioid overdose deaths, in coordination with statewide naloxone training programs developed by the Department of Behavioral Health and Developmental Services and the Virginia Department of Health.

6. **Budget Amendment Necessary:** Yes, Item 391.

7. **Fiscal Impact Estimates:** Preliminary (see Item 8 below).

8. **Fiscal Implications:** The engrossed bill requires the Department of Criminal Justice Services (DCJS) to establish training standards and periodically update model policies for law enforcement on the use of naloxone or other opioid to prevent overdose deaths. The bill requires DCJS to coordinate with statewide naloxone training programs developed by the Department of Behavioral Health and Developmental Services, and the Virginia Department of Health. Currently, there are programs within these sister agencies that train law enforcement and other first responders. DCJS expects to assess the programs currently available; therefore, the potential cost to establish such a model is unknown. However, to the extent DCJS needs to hire a subject matter expert, it estimates a one-time cost of up to be \$50,000 in general fund resources.

The Virginia Department of Health (VDH) and the Department of Behavioral Health and Developmental Services (DBHDS) both report that the bill is not expected to have a material fiscal impact on agency resources.

9. **Specific Agency or Political Subdivisions Affected:** Department of Criminal Justice Services, Department of Behavioral Health and Developmental Services, Department of Health.

10. **Technical Amendment Necessary:** No.

11. **Other Comments:** None.