

COLORADO CRISIS SERVICES



System Overview

- The annual budget for Fiscal Year 2020-2021 is \$35.2 million, which has steadily increased from the initial allocation of approximately \$22 million
- Components of the BH crisis response system reflects a continuum of care from crisis response through stabilization and safe return to the community with adequate support for transitions to each stage
- Statewide telephone crisis line
- Walk-in crisis centers and crisis stabilization units
- Mobile crisis response
- Respite services

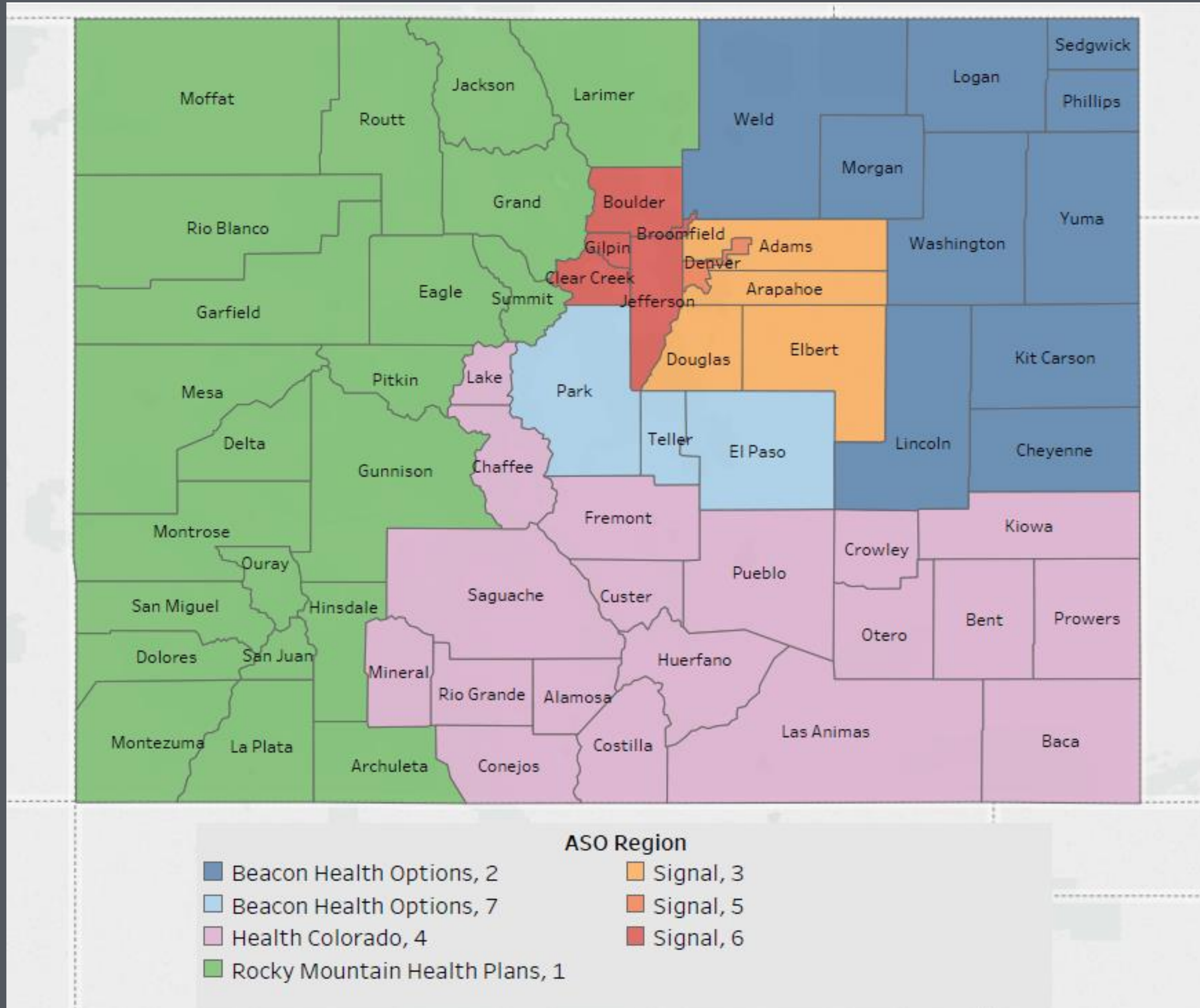


Overview Continued...

- Services available to all ages
- Self-defined crisis
- Services available regardless of ability to pay
- Mobile dispatch through the statewide hotline
- Utilization of peers / individuals with lived experience
- Trauma-informed lens

Administrative Service Organizations (ASO)

- Responsible for fiscal and data reporting
- Indirect/Administrative cost for the ASO has increased to better support shared capacity for data collection and reporting, information technology, including telehealth and community partnerships, and performance management.
- Manage performance-based payments as available
- Maintain a crisis network capable of ensuring access and continuity of all contracted services within the region(s)



Crisis Line

The Crisis Line remains the statewide point of entry and can connect callers to a mobile crisis response, local walk-in center and other local resources, as well as initiate a H+W check or 911 / EMS. Follow-up is available depending on an individual's risk level. Individuals do not need to call the hotline before going to a walk-in center.

- Hotline 24/7
- Support line 7am-12am
- Text 24/7
- Chat 4pm-12am



Walk-In Centers

- One walk-in required per region
- Leveraging ASO to expand network capacity rather than expanding actual brick and mortar locations
- Develop protocols to bypass referrals to a Hospital Emergency Department for “medical clearance” when an individual requires a higher level of care
- Need two staff on site at all times and at least one of those staff is a skilled professional

Walk-In Center Locations

WALK-IN LOCATIONS



Most of our centers are open 24/7 unless noted otherwise** below and offer confidential, in-person crisis support, information and referrals to anyone in need. View the map to find walk-in crisis services near you.

METRO DENVER REGION

📍 Wheat Ridge Walk-In Crisis Services

4643 Wadsworth Blvd.
Wheat Ridge, CO 80033

📍 Littleton Walk-In Crisis Services

6509 S. Santa Fe Drive
Littleton, CO 80120

📍 Boulder Walk-in Crisis Services

3180 Airport Road
Boulder, CO 80301

📍 Denver Walk-In Crisis Services

4353 E. Colfax Avenue
Denver, CO 80220

📍 **Aurora Walk-in Crisis Services

Anschutz Medical Campus
2206 Victor Street
Aurora, CO 80045
8am-11pm

NORTHEAST REGION

📍 Fort Collins Walk-In Crisis Services

1217 Riverside Ave
Fort Collins, CO 80524

📍 Greeley Walk-In Crisis Services

928 12th Street
Greeley, CO 80631

SOUTHEAST REGION

📍 Pueblo Walk-In Crisis Services

1310 Chinook Lane
Pueblo, CO 81001

📍 Colorado Springs Walk-In Crisis Services

115 S Parkside Drive
Colorado Springs, CO 80910

WESTERN SLOPE REGION

📍 Montrose Walk-In Crisis Services

300 N. Cascade Avenue
Montrose, CO 81401

Mobile Crisis Response

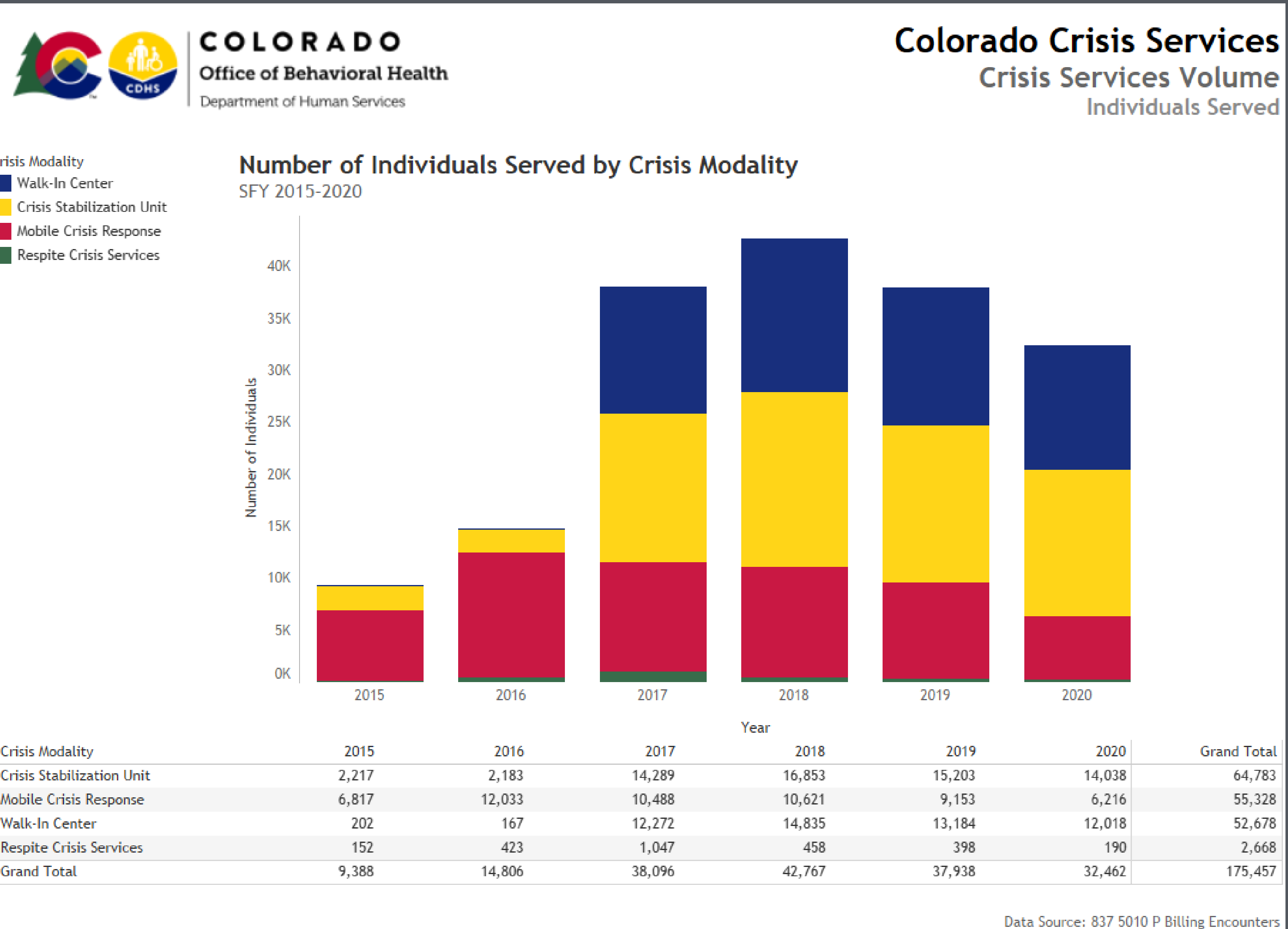
- Paired mobile response dependent on risk factors such as responding to a client at home
- Prioritize community response (non-ED, non-facility)
- Follow up within one day for those individuals that did not go to a higher level of care (by ASO or provider)
- Hotline is contracted with a training organization to establish a triage protocol for mobile response that dictates whether mobile is dispatched or not as well as other safety and practice protocols
- Request for mobile services must be accepted from law enforcement and child welfare, unless exigent circumstances exist

Stabilization Units + Respite

Bed-based crisis stabilization services

- CSU:
- 1-5 days community based; voluntary or involuntary; psychiatric prescriber; clinical staff; case managers; peers
- Respite:
- Facility or in-home support; lowest acuity; voluntary; often peer-managed; some clinical services – varies upon location

Historical Utilization Data



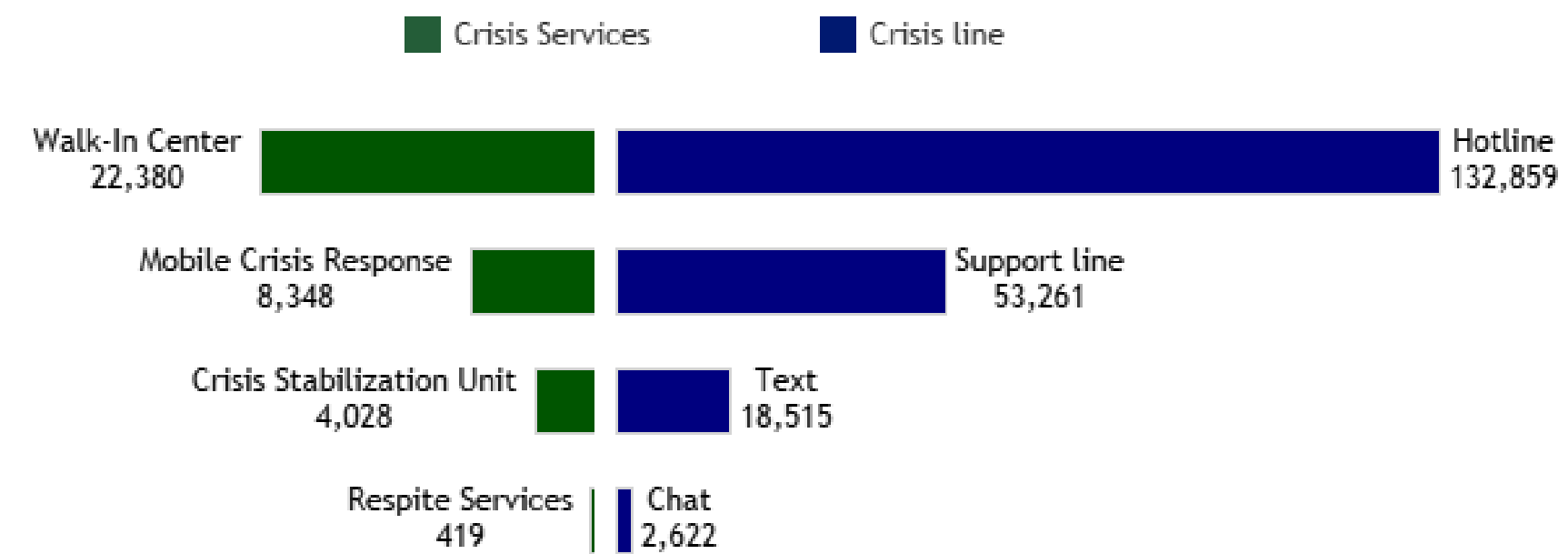
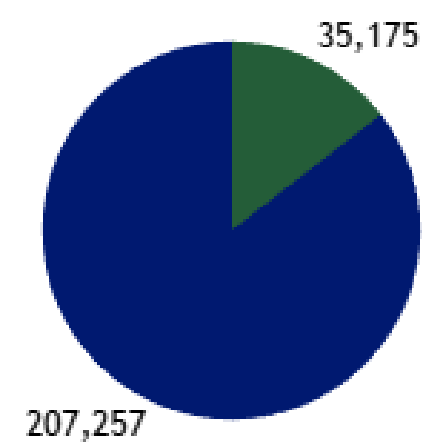
New Utilization Data



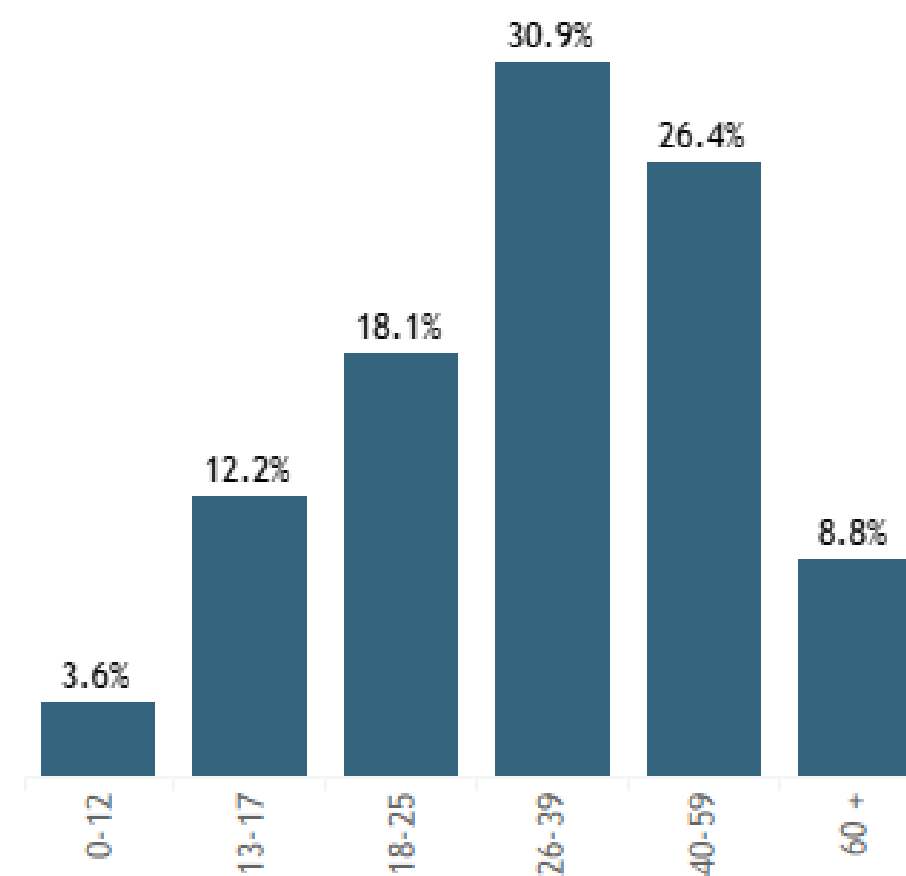
COLORADO
Office of Behavioral Health
Department of Human Services

Colorado Crisis Services
State Fiscal Year 2020
July 2019 - June 2020

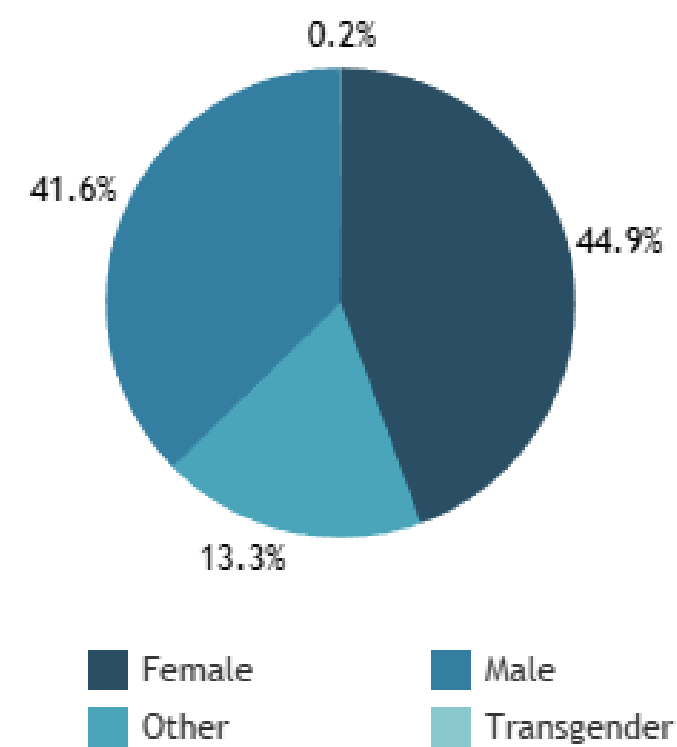
Colorado Crisis Services Service Volume



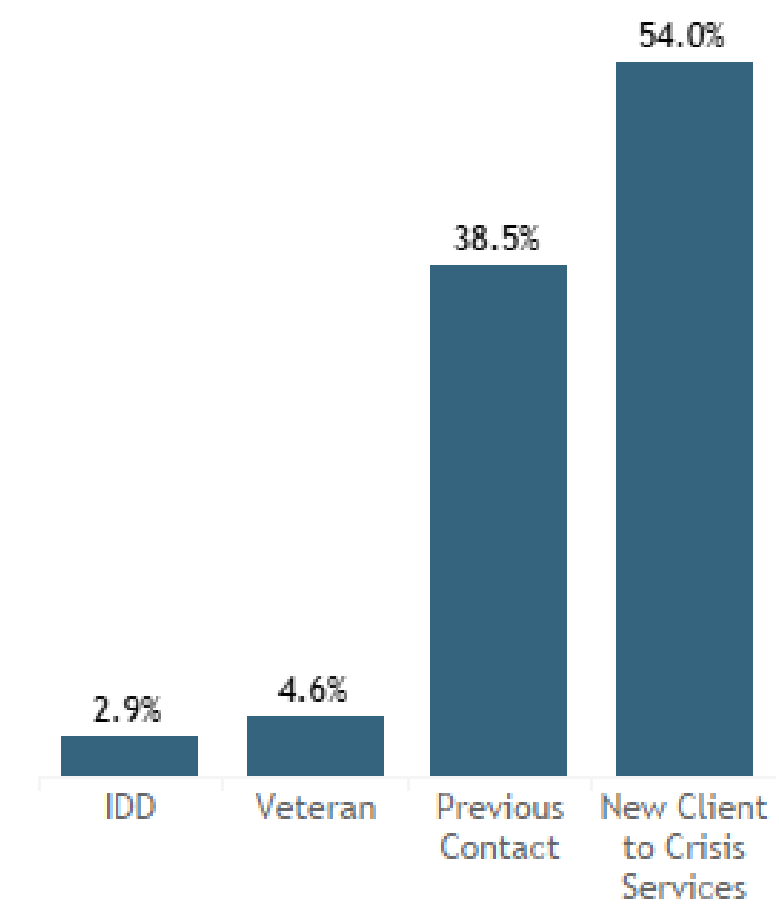
Client Age



Client Gender



Target Populations



Data Source: OBH Monthly Aggregate Reporting

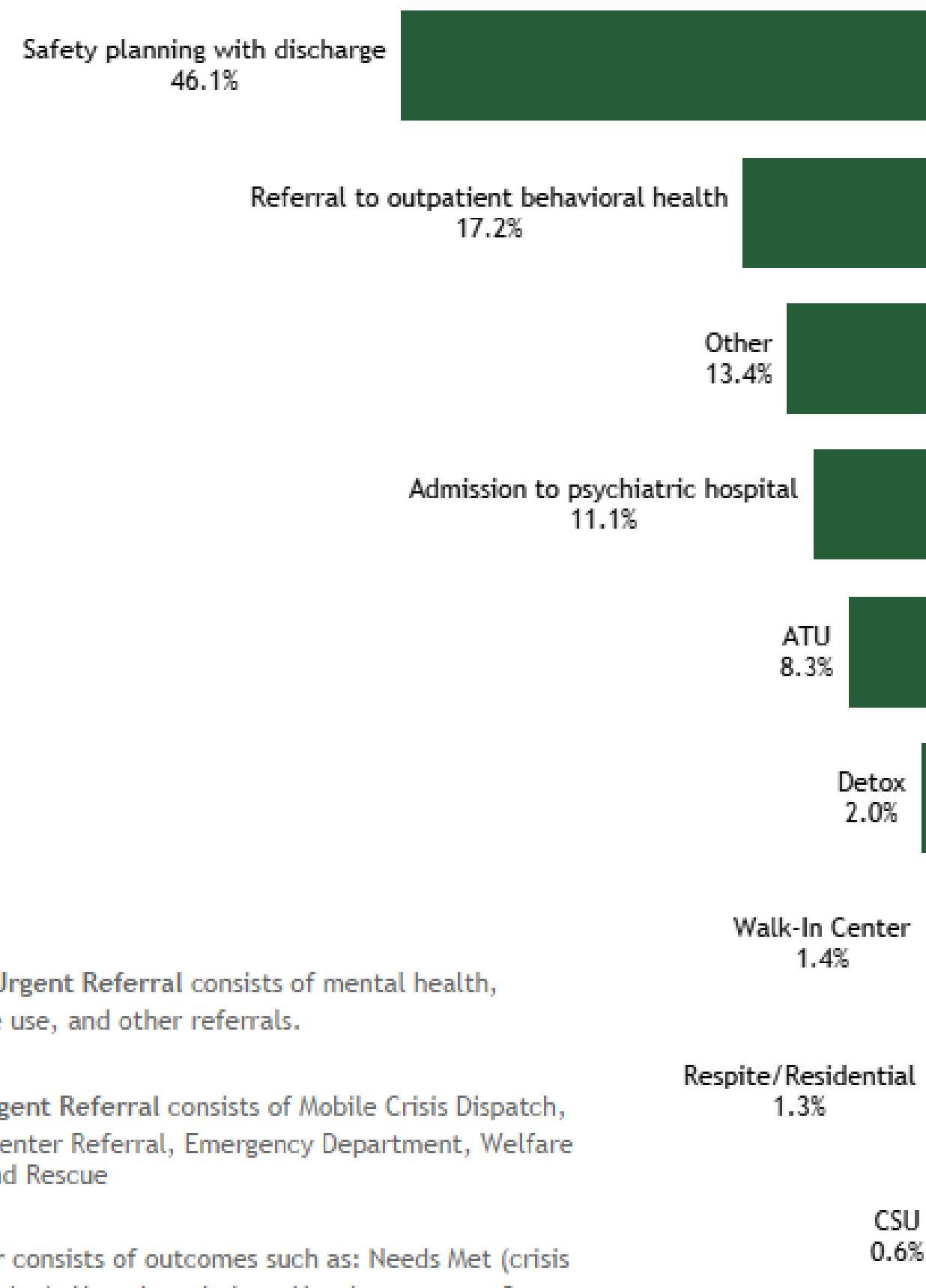
New Outcomes Data



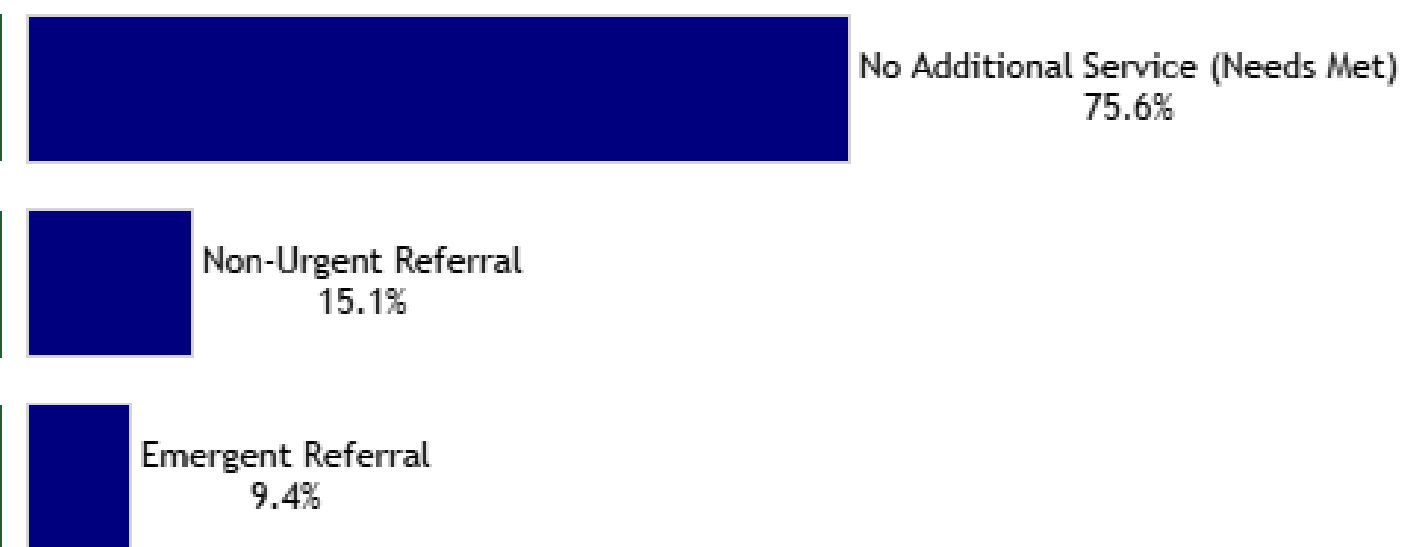
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Office of Behavioral Health
Department of Human Services

Colorado Crisis Services Crisis Services Outcomes SFY20 (July 2019 - June 2020)

Crisis Services Outcomes

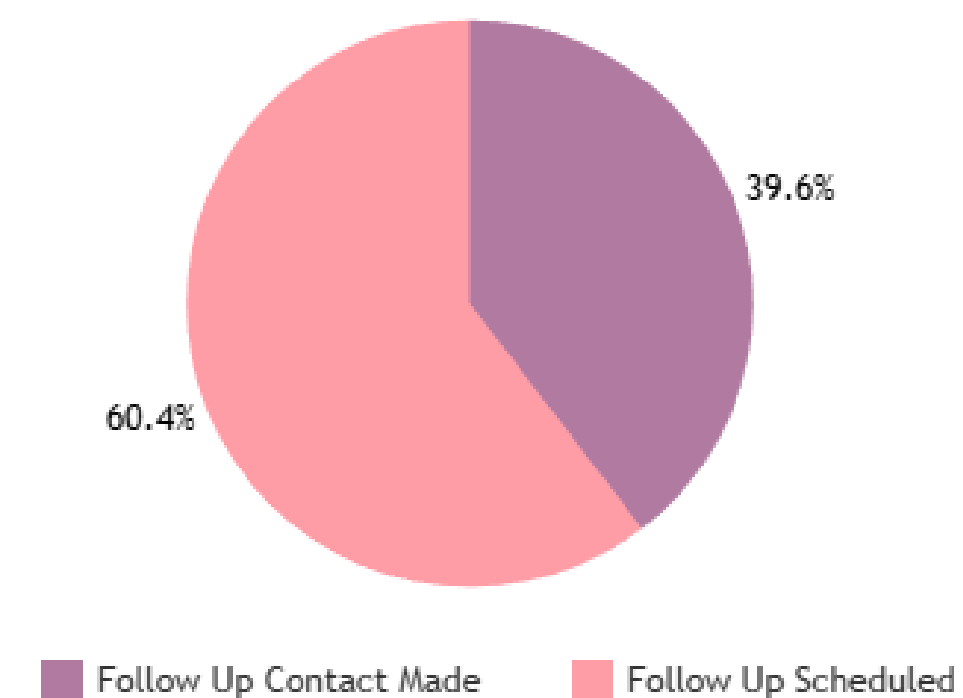


Crisis Line Outcomes



- Non-Urgent Referral consists of mental health, substance use, and other referrals.
- Emergent Referral consists of Mobile Crisis Dispatch, Walk-In Center Referral, Emergency Department, Welfare Check, and Rescue
- Other consists of outcomes such as: Needs Met (crisis de-escalation), Homeless shelter, Housing support, Care coordination, community referrals, and medical referrals.

Crisis Services Follow Up 5,375 Follow Services Scheduled



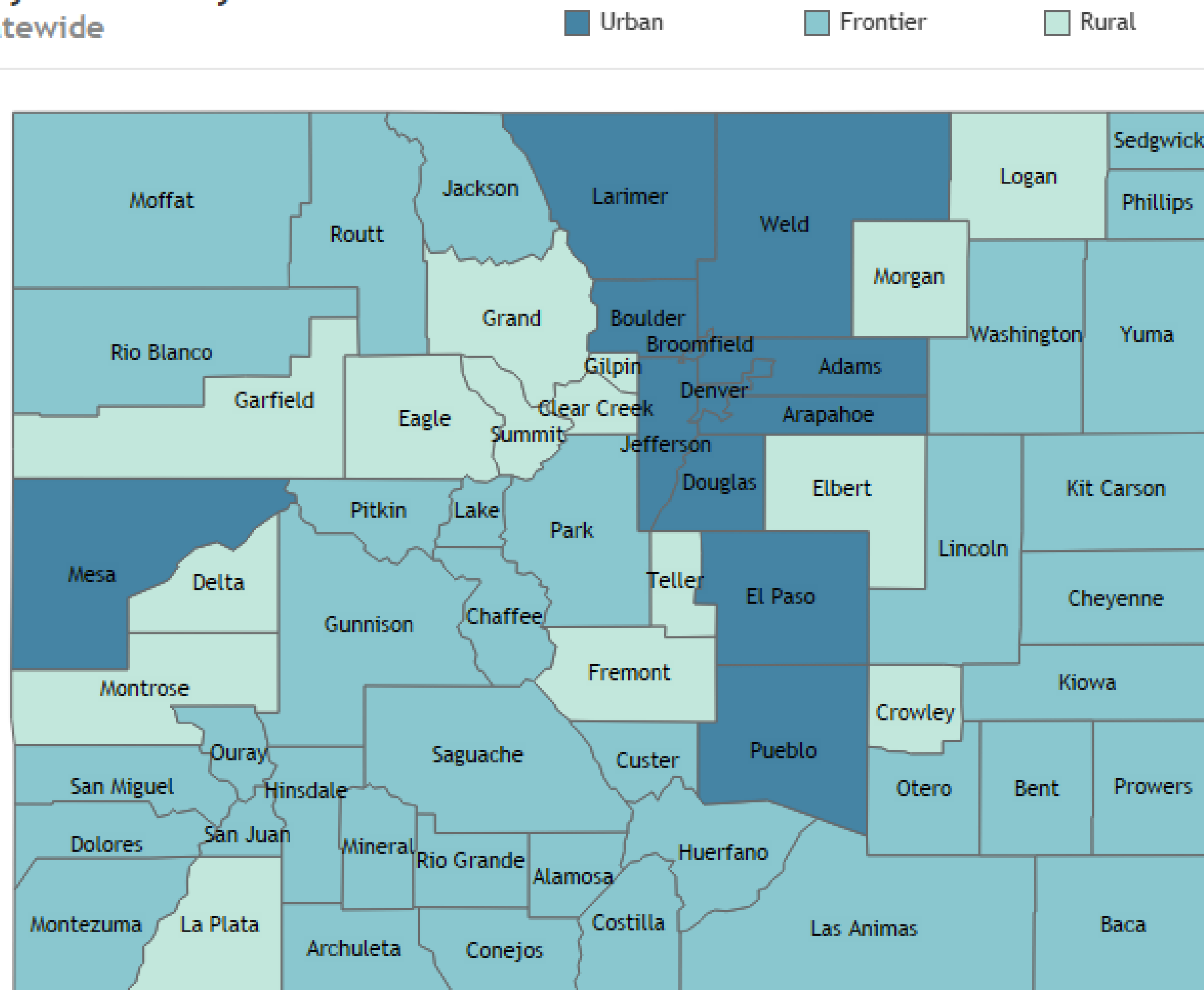
Data Source: OBH Monthly Aggregate Reporting

Caller Location

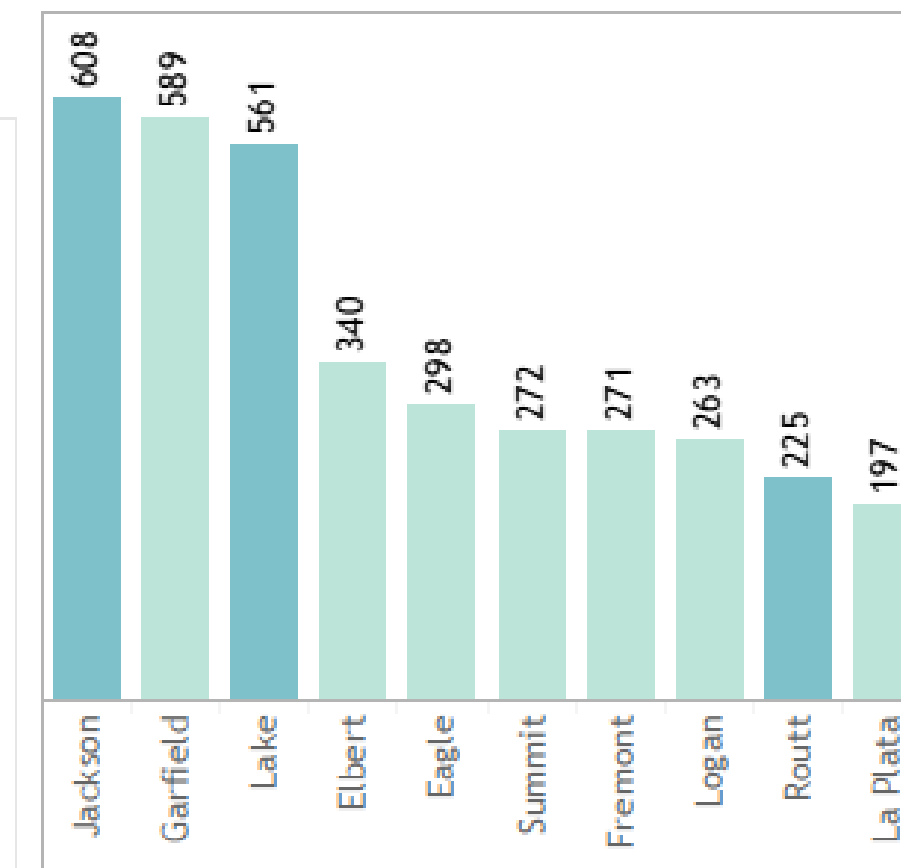


Colorado Crisis Services Crisis Line Data Known Caller Location

Known Caller Location by County July 2019 - July 2020 Statewide

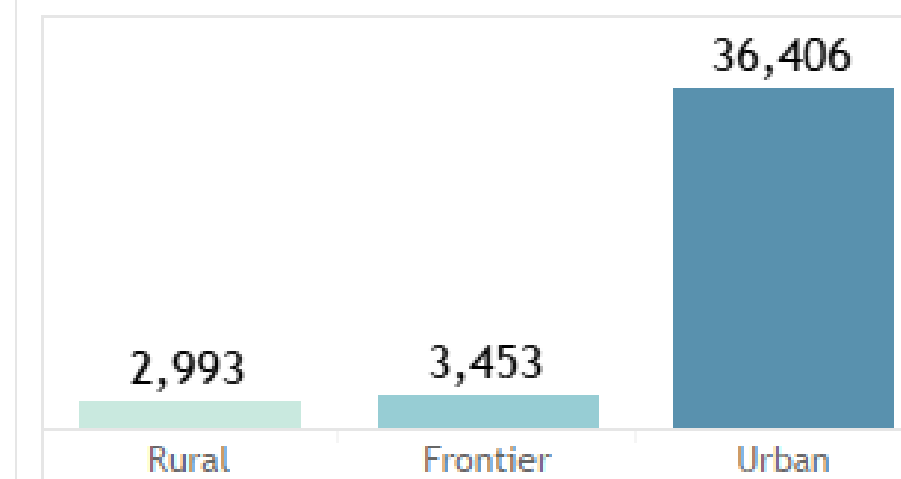


Top 10 Rural / Frontier Counties Highest Caller Volume



County Type

Statewide
July 2019 - July 2020



County Type Definitions

Urban: Population total > 50,000
Rural: Population total < 50,000
Frontier: Population < 20 people per square mile

*Known caller location represents clients who voluntarily provided county demographics when seeking services. Clients are not required to provide county demographics and may remain anonymous. This data is not reflective of all services provided.

Vision for the Future

- Greater emphasis on mobile response
- Building out telemedicine capacity in difficult to serve regions, leveraging existing resources by equipping with a tele-device to connect to a licensed practitioner
- Increased emphasis on care coordination and follow-up after Mobile and WIC visits, including quicker and more frequent follow-up, coordinating with community resources and family/trusted individuals, standardized risk assessments and safety planning

Growing Crisis in Rural/Ag Communities

- A recent study from the CDC found that rural counties in the U.S. had the highest rates of suicide in the country and that farmers are among the most likely to die by suicide compared with other occupations.
- In the last 5 years, net income for farmers has dropped by more than 50% (USDA)
- Circumstances like weather, trade and market prices are uncontrollable
- A strong majority of farmers and farmworkers say financial issues, farm or business problems and fear of losing the farm impact farmers' mental health (AFB)

Lack of Rural Resources Requires Collaboration

- One provider per 6,000 rural residents
- 11 counties in Colorado have no hospital at all
- Support and partnership through private donors, ag stakeholders and agencies like CDHS is helping us reach those in remote areas in culturally effective ways



CO L O R A D O

Department of Agriculture

Department of Human Services

New Rural Mental Health Outreach Campaign

**GET FREE, CONFIDENTIAL,
24/7 SUPPORT**

REACH OUT



**COLORADO
CRISIS SERVICES**

**OBTENGA AYUDA GRATUITA
Y CONFIDENCIAL, 24/7**

CONTÁCTENOS



**COLORADO
CRISIS SERVICES**

New Rural Mental Health Outreach Campaign



“

I WAS SUPPOSED TO BE A ROCK, BUT INSIDE I WAS CRUMBLING.

When I reached out, I was seconds away from ending my life. Financially, things on our ranch were falling apart—and I felt like a failure. I didn't want my problems to burden anyone else, so I buried 'em inside. And that's what almost buried me. Thankfully, I picked up my phone and called Colorado Crisis Services. I was able to finally get out everything I'd been holding inside, and I realized that trying to be a rock of strength for everyone else had actually caused me to start crumbling inside.

No matter what you're going through, you don't have to go through it alone.



 **COLORADO** CRISIS SERVICES | 844-493-TALK (8255)
OR TEXT TALK TO 38255

REACH OUT FOR FREE, CONFIDENTIAL, 24/7 SUPPORT

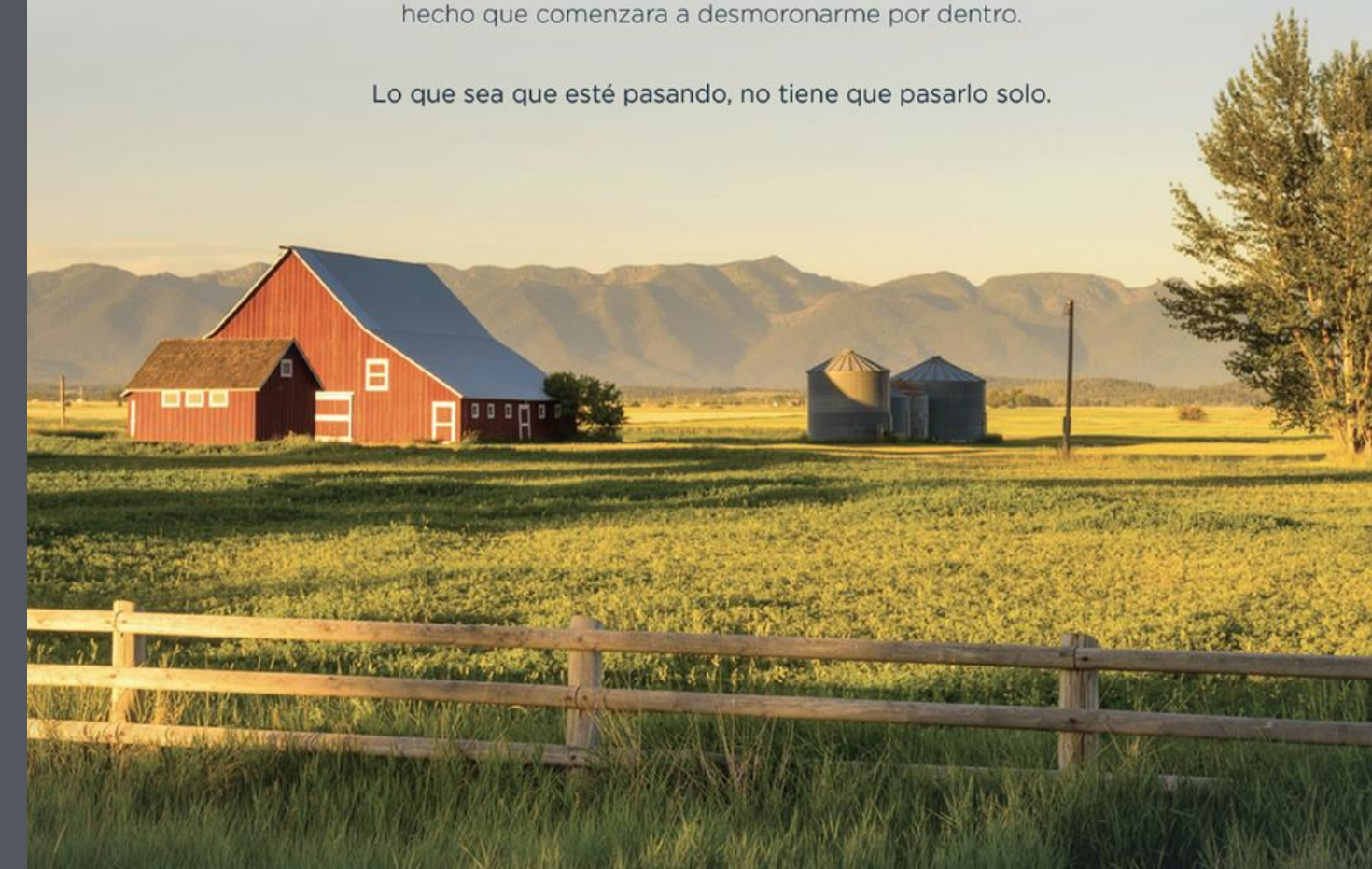


“

QUERÍA SER FUERTE COMO UNA ROCA, PERO ME ESTABA DESMORONANDO POR DENTRO.

Cuando busqué ayuda, estaba a punto de terminar con mi vida. Financieramente, las cosas en el rancho estaban mal—y me sentí fracasado. No quería que mis problemas fueran una carga para los demás, así que me los tragué. Y eso fue lo que casi me tragó a mí. Afortunadamente, levanté mi teléfono y llamé a los Servicios de Crisis de Colorado. Por fin saqué todo lo que me había estado guardando, y entendí que tratar de ser fuerte como una roca para los demás solo había hecho que comenzara a desmoronarme por dentro.

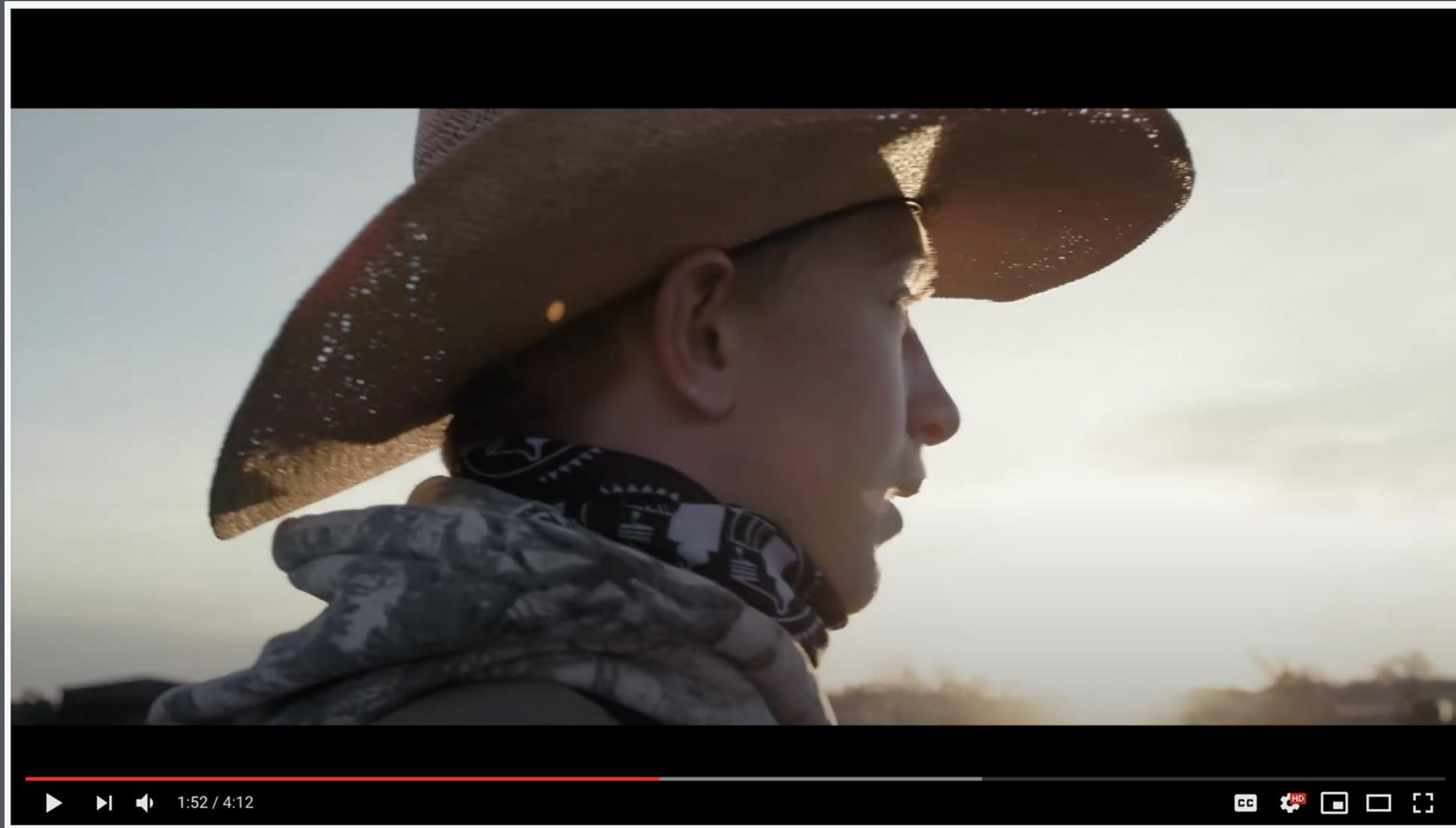
Lo que sea que esté pasando, no tiene que pasarlo solo.



 **COLORADO** CRISIS SERVICES | 844-493-TALK (8255)
O ENVÍE TALK AL 38255

OBTENGA AYUDA GRATUITA Y CONFIDENCIAL, 24/7

Rusty's Story



GENERAL MESSAGING

“

I WAS AFRAID OF WHAT MY FAMILY WOULD THINK.

“



“

MY FARM WAS UNDERWATER, AND I WAS DROWNING.

“



“

I JUST NEEDED SOMEONE WHO WOULD LISTEN.

“



YOUTH CAMPAIGN

**EVERYTHING
IS EASIER**

when I'm numb.

Text **TALK** to **38255**

a personal, confidential
text support line

I'M CONFIDENT

I'll never be good enough.

Text **TALK** to **38255**

a personal, confidential
text support line

I'M IN LOVE

with someone who hurts me.

Text **TALK** to **38255**

a personal, confidential
text support line

Contact Information

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