

1. Problem Assessment: the challenge or need that prompted program development

Community Mental Health and Substance Abuse Partnership of Larimer County

By the late 1990s, providing adequate mental health and substance abuse services for the Fort Collins and Larimer County community had become increasingly challenging. Several national, state and local trends contributed to those challenges and for years the community's mental health and substance abuse service providers planned and implemented their services essentially independently from one another.

No mechanism existed to evaluate the total mental health and substance abuse needs of the community, review the services available, and implement a community plan. People who were experiencing mental illness or substance use disorders were having difficulty finding and accessing the services most likely to help them, including area affordable housing options. Additionally, Police staff were typically under-trained in working with this population. In short, the existing system wasn't responsive enough to the needs of those with mental illness or substance abuse issues. Case studies of the old system revealed four common problem themes:

- 1) Management by Crisis** — Overloaded and fragmented services were driven by the crisis at hand with little time for prevention or early intervention.
- 2) "Punting"** — Consumers/families felt "punted" or shuffled from service to service.
- 3) Lack of Coordinated Care** — Providers rarely knew what treatment, if any, was tried as a client moved from agency to agency.
- 4) Insurance limitations** — Having insurance with mental health coverage did not guarantee access to adequate and appropriate mental health services.

An intensive system assessment was launched, which ultimately resulted in significantly restructuring how area service providers help those with mental illness and substance abuse, in

order to best meet patient needs and promote a healthier community. To date, 35 organizations have joined in this partnership to create a change in our mental health and substance abuse systems, including: the City of Fort Collins, Larimer County, the Health District, consumer advocates, hospital system, schools, the faith community, Colorado State University, the criminal justice system, housing agencies, private therapists, mental health and substance abuse service agencies, state offices, and cognitive disability service providers.

The vision of the Partnership is to obtain a well-coordinated, well-funded continuum of mental health and substance abuse services that will achieve the maximum potential for meeting community needs and promoting a healthier community through healthier individuals and families. This will be accomplished by systematically restructuring and improving how services are provided for those with mental illness and substance use disorders.

2. Program implementation and costs.

A steering committee was appointed and refined a three-phase implementation process. Phase One clarified the key issues and identified potential next steps; Phase Two developed a structure to address key issues; Phase Three focused on implementing those solutions. The committee decided to create a partnership in which the oversight, administration and functions would operate out of the Health District of Northern Larimer County, while the overall program direction would be determined by the ongoing Steering Committee, which includes a representative from the Fort Collins City Manager's Office. Partnership priorities were determined to include:

- Assure Adequate Connections to Services
- Maximize Capacity for Diagnosis, Prescriptions and Treatment

- Create and Re-Create Essential Services
- Improve Information Sharing
- Advocate Policy Changes

The Partnership has been funded over the years by more than 43 organizations and foundations as well as several individuals. The Steering Committee felt that two things were essential to the program's effectiveness: 1) a base of funding from which to keep the work organized, and 2) to assure commitment on the part of each person involved. They required that each organization represented on the Steering Committee would contribute both time and dollars, although each organization determines its own level of financial contribution.

3. Tangible results or measurable outcomes of the program.

Assure Adequate Connections to Services

In 2002, Connections was established to provide comprehensive, specialized mental health and substance abuse information, referral and assistance. To date, 50,675 people have been served (tally of annual services, does not take repeat clients into account), and on average, more than 3,700 people receive services each year.

Consumer results (data reported for services received in 2006):

- 89% report being successfully connected to appropriate services with a client satisfaction ranging from 90% satisfied or very satisfied to 100% satisfied or very satisfied, depending on the specific type of service received.
- 99% were satisfied with services at intake.
- 88% improved their ability to function as reported by therapists.
- 90% of clients self-reported the services as being helpful.

Service providers who work with the program report a 100% satisfaction rate. In focus groups and interviews, the program is seen as a significant improvement for the community. In particular, clergy and school personnel appreciate having one source for comprehensive information when trying to help a client/student. School personnel also mentioned the importance of the liaison program with the schools, which focuses on building relationships with school district personnel and conducting on-site assessments of need with students.

Building Knowledge

Since the beginning of the project, 2,295 people have attended educational sessions designed to encourage appropriate referrals and treatment options:

- More than 100 local law enforcement officers participated and report that it has had a profound effect on their approach to those with mental illness and substance abuse
- In the '03-'04 school year school personnel referred 101 clients to the program
- 100% of primary care physicians who attended said the training “would influence my practice or assist me in treating patients more effectively.” 96% were satisfied with the quality of the training.
- More than 382 mental health and substance abuse professionals have attended skill enhancement training programs.

Police officers at the Downtown/District One station, as well as police staff psychologists, also participated in the training. District One officers reported that the training helped them considerably in working with the homeless population downtown, who often also had mental health and/or substance abuse issues.

Creating a Simpler, Better Crisis Response System

A new model for a re-engineered crisis response system, involving 22 organizations, was implemented in February 2005. This model included developing a 24/7 Crisis Assessment Center in the Emergency Department of Poudre Valley Hospital, 24/7 transport to detox services when needed, working with the client or family immediately the next day, and training for key personnel. Since its inception, the Crisis Assessment Center has served 12,205 people.

4. Lessons learned during planning, implementation, and analysis of the program.

The majority of the lessons learned through this process were about the system-wide issues that contributed to the original problems in serving mental health and substance abuse patients, and ultimately, in creating this community Partnership. The effectiveness and success of the Partnership is largely due to the ongoing support and commitment to system change by the providers, consumers, advocates and others who make up its membership. By 2006, the Partnership had brought about many system changes; however with each accomplishment additional areas of need are revealed. The Partnership continues to address logistical challenges most associated with combining and coordinating the efforts of so many different agencies and service providers and has tentatively identified new priorities for 2008: envision and create a different approach for those with moderately- to immensely-complex needs, co-occurring conditions of mental health and substance use disorders; increase early identification and early intervention to prevent or lessen serious illness; create a local combined acute treatment unit and detox center; support improvements in the criminal justice system that will result in better identification and treatment of mental illness and substance use disorders; and continue to identify and advocate for policy changes. Despite the challenges, consumers, families and partner organizations are overwhelmingly supportive of the changes in the system.