

CBHC BOARD POSITION STATEMENT 18.0:

The Colorado Crisis Services System

Position Statement

Every Coloradan must have access to comprehensive and sustainable behavioral health crisis services regardless of geographic location or ability to pay.

Background

Until 2014, Colorado lacked dedicated funding and coordination for behavioral health crisis stabilization services. For decades, the statewide community mental health center system strived to meet the incredible demand for these services despite the shortfall of resources. Creative partnerships were developed, scarce dollars were braided together, and the foundation for a crisis services system was laid. Despite their best efforts, however, a lack of funding, coordination, and unified vision for crisis services left many Coloradans falling through gaps, often landing in hospital emergency departments or the criminal justice system.

It wasn't until 2013 that the culmination of multiple tragic events in Colorado and around the country galvanized Colorado to focus on these critical services. That year, Colorado's Governor and legislature enacted a landmark effort to create a statewide behavioral health crisis system, giving Coloradans a direct line to a robust array of acute, community-based services. With the Governor's leadership, the Colorado General Assembly successfully appropriated funding to launch this ambitious vision for crisis services. This nascent system has taken on the challenge of meeting pent up demand and developing a national model for behavioral health crisis response.

Since its inception, the Colorado crisis service system, operated by four Crisis Service Organizations (CSOs) and the statewide Crisis Hotline has steadily increased access to and utilization of a continuum of services across various modalities. The system continues to be built on core values that prioritize an individual's ability to get rapid services close to home and with as little hassle as possible. Anybody can seek crisis services for any self-defined crisis regardless of a diagnosis, ability to pay, or geographic location. With a local and community focus, the CSOs connect individuals to ongoing services at community mental health centers and other community supports.

The CSOs strongly believe that Colorado's crisis system is most effective due to its nature as a community-based service delivery system. The benefits of local and regional coordinator help shape Colorado's visions for how an individual in crisis can best be served, stabilized, and connected to ongoing supports. As this system grows and matures, it is necessary to carefully and strategically plan for its successful, long-term future in our state.

Establishing the System		
Legislation SB12-266	Procurement	Contracting
Directed OBH to RFP and create a statewide behavioral health crisis system with defined elements.	In summer 2013, the original crisis stabilization services RFP was issued.	The services outlined in the contract became available December of 2014. Not all modalities were ready from the
Required components included 24- hour phone crisis services, walk-in	 Following CDHS announced intent to award to an out-of-state bidder, legal debate and litigation lead to a "failed 	start across the regions.
services and crisis stabilization, mobile crisis, residential and respite services, and a public information	procurement".	The original RFP indicated that OBH would enter a total of five annual contracts with the selected
campaign.	 In June 2014, the contracts were awarded to the current four crisis contractors made up of community 	vendor.
 Required principles included strong community relationships, using peer supports, cultural competence, and building on existing foundations with 	behavioral health providers statewide.	
an eye to innovation.		

Policy Priorities

18.1 Leveraging Existing Infrastructure

Behavioral health emergency services have been provided by the Community Mental Health Center system and its partners since before Colorado passed official legislation to fortify and fund a statewide coordinated system. It is important to preserve and build on this existing infrastructure as we increase investment and support for an enhanced statewide system that efficiently and effectively meets the needs of Colorado communities.

- CBHC supports policies and legislation that solidify the crisis system providers as the primary delivery system for acute behavioral health services, including:
 - o Defining the role of Community Mental Health Centers in delivering crisis services, and
 - Ensuring an appropriate network of partnerships across systems to allow for a whole-person approach to crisis stabilization and resolution.
- CBHC supports system reform that clarifies the role of the Crisis Service Organizations in monitoring, maintaining access to, and enhancing services.
- CBHC does <u>not</u> support policies and legislation that increase reliance on grants, requests for proposals (RFP), or other inconsistent or temporary funding mechanisms for crisis services.
 - Inconsistent and uncertain funding models create a detriment to the crisis system and reduce investors, partners, and providers safety in making long-term investment and creating comprehensive partnerships.
 - Effective crisis care must be delivered in a local manner, by a system that understands individual's unique circumstances and needs; relying on open RFPs reduces opportunities for local partnerships and developments and puts client care in danger.
 - RFP or requests for application (RFA) for specific projects and demonstrations may be appropriate only when they leverage existing system and infrastructure and do not create unnecessary inefficiencies.

18.2 Local Responsiveness and Partnerships

Policies and legislation related to crisis must leverage partnerships throughout the state, build trust among all public and private stakeholders, and increase community engagement to ensure the crisis system is meeting the needs of all Coloradans. These partnerships depend on the flexibility to design locally responsive solutions.

- CBHC supports policies that increase service capacity as well as the operational and financial stability and sustainability of the crisis system, including:
 - Funding opportunities based on stakeholder-directed initiatives and community responsiveness.
 - o Funding structures that consider capacity and need for growth in each community, and
 - Protocols and procedures between local partners which formalize how each community responds to a behavioral health crisis.
- CBHC is committed to recognizing and leveraging the local contributions made to the crisis system by Community Mental Health Centers, local funders, local provider systems, and private contributors. CBHC supports policies and legislation that leverages these contributions to enhance access to services across Colorado.
- CBHC supports processes, policies, and legislation that leverage partnerships between the crisis system and other community systems to maximize efficiency.
 - Partnerships with law enforcement, hospitals and emergency departments, first responders, schools, local human services, and local public health are a critical component of a full continuum of crisis services.
 - Partnerships which emphasize joint programming and collaboration to maximize innovative opportunities.

18.3 Statewide Hotline and Remote Resources

The Colorado statewide crisis hotline is a critical component of the crisis system that should be leveraged while also allowing local communities to utilize the processes that work best for them.

- CBHC supports policies, regulations, and contract reforms that increase the connection between the statewide hotline and the Crisis Service Organizations.
 - o Increase collaborative approaches and operations, and
 - Increase ability for joint decision making.
- CBHC supports policies that support the evidence-based use of telehealth to support crisis stabilization services
- CBHC does <u>not</u> support policies that require local communities to eliminate local hotlines or other resources which are established, long-standing, and locally controlled.

18.4 Clinically Appropriate Regulatory Structures & Facility Licensure

To maximize the efficiency of the crisis services sites and facilities, it is critical to modernize regulation and legislation to account for current best practices and future innovation.

- CBHC supports a creation of the Crisis Stabilization Unit (CSU) specific facility licensure and regulation set that:
 - Houses CSU regulations in one State Department, and
 - Creates CSU regulations that do not rely on waivers.
- CBHC supports aligning regulations across acute behavioral health services to allow for innovative programming that increases access to care by:
 - Aligning crisis stabilization and substance detoxification facility regulations to allow for joint facilities, and
 - Aligning behavioral health workforce regulations to allow for appropriate joint operations to remove arbitrary silos.
- CBHC supports cross-Departmental collaboration to align regulations among the various State Departments that regulate crisis system services and facilities.

Effective Period

The Colorado Behavioral Healthcare Council (CBHC) Board of Directors approved this policy on 2/16/2018. It is reviewed as required by the Public Policy Advisory Committee.

Policy Updated

Updates to this policy position were approved by the CBHC Board of Directors on 2/16/2018.

Expiration: 2/16/2020