

AMERICAN RESCUE PLAN ACT - PROJECT TRACKING SHEET

1. PROJECT NAME

Continuation of Colorado Spirit program

2. PROJECT DESCRIPTION (50-250 words)

AllHealth Network proposes the continuation of our Colorado Spirit program to support the mental health needs of our community. The Colorado Spirit program offers free individual and group counseling and support to assist individuals and communities in recovering from the challenging effects of the COVID-19 pandemic through the provision of community-based, telephonic and web-based outreach and psychoeducational services.

The goals of the program are to reach large numbers of people affected by the pandemic and to assess the emotional needs of those impacted by the pandemic and make referrals to transitional behavioral health services when necessary. The team is responsible for identifying tangible needs and to link the public to community resources. The team provides a warmline as well as telephonic and video-based emotional support, education, basic crisis counseling and connection to community referrals. In addition, Colorado Spirit staff train and educate organizations and community-based groups on how to support others to promote community resilience and recovery. This work is intended to leave behind a permanent legacy of improved coping skills, educational and resource materials, and enhanced community linkages.

This program fills a critical gap by providing free psychological support for our community during a time of remarkably high demand for behavioral health services. Studies have shown the importance of providing ongoing resources, awareness, and training to support mental health outcomes in communities¹. As more than one program participant in Colorado Spirit has exclaimed, "I don't know what I would do without you!" We aim to continue to offer this service at no charge to support the public health of our community.

3. PROJECT FUNDING "BUCKET" (Select One)

Mental Health

4. PROJECT ELIGIBILITY NEXUS DESCRIPTION:

COVID-19 has exacerbated the behavioral health needs of our community. During the COVID-19 pandemic, concerns about mental health and substance use have grown, including concerns about suicidal ideation. As noted by the Kaiser Family Foundation, 41% of adults reported symptoms of anxiety and/or depressive disorder during the pandemic. In a survey from June 2020, 13% of adults reported new or increased substance use due to coronavirus-related stress, and 11% of adults reported thoughts of suicide in the past 30 days³. There are a variety of ways the pandemic has likely affected mental health, particularly with widespread social isolation resulting from necessary safety measures. A broad body of research links social isolation and loneliness to both poor mental and physical health.

5. PROJECT EXPENDITURE CATEGORY (Select one):

1.10 Mental Health Services*

NOTE: If the category selected above has a * or ^ at the end of the title, please complete the appropriate sections below.

6. PROJECT EXPENDITURE ESTIMATE (Total):

\$	488,060				
		FY 21	FY 22	FY 23	FY 24
One-Time Costs:		-	488,060	-	-
Ongoing Costs:		-	-	-	-
Total:		-	488,060	-	-

If ongoing funds extend beyond FY24, please describe how it will be funded below:

7. PROJECT LEVERAGE/PARTNERSHIPS:

All Health's budget to continue this program from January 2022-January 2023 includes a reduced staff to operate the Colorado Spirit program. These staff are expected to be able to maintain the program's reach, community connection and behavioral health support. We are requesting funding coverage for staff costs including 3 crisis counselors, 1 community liaison, a web marketing specialist, and 50% of expenses for a program leader.

8. PROJECT STATUS (Select):

Completed 50 percent or more

9. PROJECT DEMOGRAPHIC DISTRIBUTION *(Expenditure Category above with an asterisk (*)) :****The Program/Service will serve, or have (select best option):***

Eligibility criteria are such that the primary intended beneficiaries earn <60% of median income for county.

Notes/Further Description:**10. USE OF EVIDENCE/EVIDENCE BASED APPROACH** *(Exp. Category above with a carrot (^)) :*

The Colorado Spirit program is the name given in our state for a US Department of Health and Human Services FEMA program called Crisis Counseling Assistance and Training Program. The program is based on two evidence-based practices: Psychological First Aid and Skills for Psychological Recovery. Both of these practices were developed by the National Child Traumatic Stress Network and apply to all ages. All Colorado Spirit staff are required to be trained in both practices.

The goals of Psychological First Aid (PFA) are broadly recognized as reducing immediate distress and

11. POPULATION SERVED:

Since June 2020, the program has had more than 300 in-person, brief supportive contact, more than 1,500 individuals attend a group services, had almost 11,000 telephone contacts by a crisis counselor, and more than 2,000 email communications in response to requests. The reach to our community via networking and community building has included almost 500 contacts about the program and other mental health/mental well-being resources distributed to more than 26,000 individuals. The program has disseminated over 215,000 pieces of mailed materials to people's homes and/or left materials at a person's unattended home plus more than 6,500 flyers left in public places such as libraries, grocery stores, food pantries, and human service organizations. The team publishes a weekly Wellness Wednesday social media post and has had a total of 661 social networking messages since the program's inception. In total, the program has tracked 250,591 indirect contacts and 13,796 direct contacts in our community.

No. of Unique Individuals Served:
Percent that are Low-Income/Disproportionately Impacted:

12. ORGANIZATIONAL ABILITY/CAPACITY:

AllHealth Network is a safety-net community mental health provider for Arapahoe County residents. Safety net is a term that describes an organization that offers care to low-income, uninsured and/or underinsured residents as well as people who are enrolled in publicly funded health insurance programs. AllHealth Network is a safety-net community mental health provider for Arapahoe County residents. Safety net is a term that describes an organization that offers care to low-income, uninsured and/or underinsured residents as well as people who are enrolled in publicly funded health insurance programs, regardless of their ability to pay. Although we accept most commercial payors and serve individuals across all socioeconomic groups, many of our services are targeted and available to marginalized populations who may not have resources to seek care elsewhere. The Colorado Spirit program offers a community resource for all. Free, high quality, reputable services from a licensed community mental health center helps promote equitable access, service provision and outcomes for all populations.

13. PROJECT READINESS:

Design/Pre-Work Needed (Yes/No)? No
Ready to Begin Services/Construction (Yes/No)? yes

Notes:

14. ALIGNMENT WITH RECOVERY PLAN:

Support the most vulnerable across the county.

15. ALIGNMENT WITH STRATEGIC PLAN:

Be Community Focused
Support opportunities for physical health and mental health

16. PROJECT SUBAWARDS:

Organization Name	Amount	Reimburse?

17. PROJECT PERFORMANCE MEASURE DESCRIPTIONS:

AllHealth Network will measure pre and posttest staff perceptions of preparedness and confidence to provide psychological assistance for future disasters following training in PFA and SPR. Staff perceived competence in PFA and SPR skills, and perceived preparedness and confidence to provide psychological assistance for future disasters are commonly used measures of fidelity to these practices.

2. Staff cultural sensitivity/cultural humility will be measured pre and post training in cultural competency given the diversity of community members connected to the Colorado Spirit program.

3. AllHealth Network will provide community member (“client”) counts of the following program activities:

- ☐ Number of in-person brief educational or supportive contact
- ☐ Number of telephone contacts by crisis counselor
- ☐ Number of groups held and number of group participants
- ☐ Number of email contacts
- ☐ Number of community networking and coalition building contacts
- ☐ Number of social media networking messages
- ☐ Number of Colorado Spirit participants receiving referrals for behavioral health or human services

18. PROJECT LEAD DEPT/OFFICE:

Communication & Admin Svcs

19. PROJECT LEAD - INDIVIDUAL

20. STAFF REVIEW:

DATE:

21. BOCC REVIEW

DATE:

22. TREASURY PROJECT NUMBER:

23. INTERNAL ORDER #:

AMERICAN RESCUE PLAN ACT - PROJECT TRACKING SHEET

1. PROJECT NAME

AuMHC Potomac Safety Net Campus

2. PROJECT DESCRIPTION (50-250 words)

Aurora Mental Health Center currently operates immediate access acute-care services at three separate locations: Walk-In Center and a 16-bed Crisis Stabilization Unit on the Anschutz Medical Campus; our Connect to Care walk-in access point at 791 Chambers Road; and Withdrawal Management (Detox) services at 1290 S. Potomac. These disparate locations require first responders and the public to determine which location to access, creating unnecessary confusion, as well as the need to move clients across sites when required. The 2020 Behavioral Health Needs Assessment prepared for the Colorado Department of Human Services Office of Behavioral Health identified confusion regarding availability and access to crisis services as well as need for a more complete continuum of substance use disorder care as two priorities statewide and in our service area.

We are investing in a new multidisciplinary safety net campus at 1290 South Potomac Street. This facility

3. PROJECT FUNDING "BUCKET" (Select One)

Mental Health

4. PROJECT ELIGIBILITY NEXUS DESCRIPTION:

Approximately 6 months into the pandemic, researchers were able to start examining evidence that showed how profound the impact of COVID was in terms of psychological and social effects. Specifically, researchers found that COVID was associated with distress, anxiety, fear of contagion, depression and insomnia in the general population and among health care professionals. It is important to note that social isolation, anxiety, fear of contagion, uncertainty, chronic stress and economic difficulties may lead to the development or exacerbation of depressive, anxiety, substance use and other psychiatric disorders in vulnerable populations including individuals with pre-existing psychiatric disorders and people who reside in high COVID prevalence areas (e.g., Arapahoe County throughout the past year). Though research is still new given we are only one year into the COVID-19 pandemic, the CDC has been able to confirm that symptoms of anxiety disorder and depressive disorder increased considerably in the United States during April–June of 2020, compared with the same period in 2019. A survey administered by the CDC to 5,470 individuals the week of June 24-30, 2020 found:

- 40.9% of respondents reported at least one adverse mental or behavioral health condition, including symptoms of anxiety disorder or depressive disorder,
- 26.3% of respondents noted symptoms of a trauma- and stressor-related disorder (TSRD) related to the pandemic
- 13.3% increased substance use to cope with stress or emotions related to COVID-19
- The percentage of respondents who reported having seriously considered suicide in the 30 days before completing the survey (10.7%) was significantly higher among respondents aged 18–24 years (25.5%), minority racial/ethnic groups (Hispanic respondents [18.6%], non-Hispanic black [black] respondents [15.1%]), self-reported unpaid caregivers for adults (30.7%), and essential workers (21.7%).

5. PROJECT EXPENDITURE CATEGORY (Select one):

1.10 Mental Health Services*

NOTE: If the category selected above has a * or ^ at the end of the title, please complete the appropriate sections below.

6. PROJECT EXPENDITURE ESTIMATE (Total):

\$	5,000,000				
		FY 21	FY 22	FY 23	FY 24
One-Time Costs:			5,000,000	-	-
Ongoing Costs:		-	-	-	-
Total:		-	5,000,000	-	-

If ongoing funds extend beyond FY24, please describe how it will be funded below:

Total Project Cost: \$29,1500,000; Land/Acquisition: \$5,400,000; Construction: \$20,200,000; Finishes: \$3,550,000

7. PROJECT LEVERAGE/PARTNERSHIPS:

AuMHC has engaged with the Mayor of Aurora, Aurora City Council members, the Aurora City Manager and other staff, Arapahoe County Commissioners, Adams County Officials, officials from a number of law enforcement agencies who utilize acute-care services regarding the plan to relocate current services to a one-stop facility, and have received full support in moving this project forward. We also enjoy the support of Signal Behavioral Health Network, who has been selected by the State Department of Human Services Office of Behavioral Health contracted Management Services Organization administering state and federal-level funds for crisis services and as the Administrative Services Organization administering state and federal-level funds for substance use disorder services.

8. PROJECT STATUS (Select):

Not Started

9. PROJECT DEMOGRAPHIC DISTRIBUTION (Expenditure Category above with an asterisk (*)) :***The Program/Service will serve, or have (select best option):***

Eligibility criteria are such that over 25% of intended beneficiaries are below federal poverty line.

Notes/Further Description:**10. USE OF EVIDENCE/EVIDENCE BASED APPROACH** (Exp. Category above with a carrot (^)) :

It is essential to build architectural and design plans for the facilities that incorporate components of trauma-informed design to create healing spaces and components of universal design to promote environments that will be accessible to the diverse community we serve. Research indicates that building design can directly contribute to the safety, satisfaction and access for both clients and staff. Buildings that are not designed with these concepts may have literal structure barriers, such as poor lighting and difficult to navigate floor plans, which may prevent clients from experiencing the healing environment they need, while staff may be forced to work in an environment that feels unsafe and strained. Numerous studies, as well as the National Council for Behavioral Health's principles of trauma-informed design indicate the following components of healing healthcare spaces: deinstitutionalization; visual or physical access to nature; damage-resistant, attractive and culturally sensitive décor and furnishings; use of natural light; availability of staff respite areas; orderly and clean spaces; and balance between social and private spaces for client interactions. This project will support incorporation of these research-based design principles into our facilities. The health campus model will enable clients to access mental health, addictions, crisis, primary care and oral health services at a single trauma-informed and healing location, eliminating barriers to access for both clients and community partners.

11. POPULATION SERVED:

AuMHC typically serves over 20,000 individuals annually, and reaches an additional 2,300 community members through trainings and events. We serve a diverse client population, including children under age 18 (31%), older adults (6%), and individuals below 150% of federal poverty limit (56%), and individuals who identify as a racial or ethnic minority (16% Black, 5% multiracial, 2% Asian, 1% American Indian/Alaska Native, and 23% who identify as Hispanic). Our staff speak nearly 50 different languages and we offer specialized services for immigrants, refugees, and asylum-seekers.

No. of Unique Individuals Served:

Percent that are Low-Income/Disproportionately Impacted:

12. ORGANIZATIONAL ABILITY/CAPACITY:

Aurora Mental Health Center is a key member of the healthcare safety net for Arapahoe County, providing a comprehensive continuum of proven prevention, treatment intervention, and wraparound recovery support services since 1975. Our dedicated staff provide individual, group and family counseling, medication-focused care, substance use and recovery services, crisis services, and a variety of supportive services that help people navigate the challenges they face in their lives. AuMHC typically serves over 20,000 individuals annually, and reaches an additional 2,300 community members through trainings and events.

13. PROJECT READINESS:

Design/Pre-Work Needed (Yes/No)?

Yes

Ready to Begin Services/Construction (Yes/No)?

No

Notes:

14. ALIGNMENT WITH RECOVERY PLAN:

Support the most vulnerable across the county.
 Make strategic and impactful investments that position Arapahoe County for long-term vs. short-term success in alignment with the County's overall vision and strategic plan.
 Leverage data-driven decision-making models to assess public health, economic recovery, and funding impacts.

15. ALIGNMENT WITH STRATEGIC PLAN:

Be Community Focused
 Support opportunities for physical health and mental health
 Promote thriving communities

16. PROJECT SUBAWARDS:

Organization Name	Amount	Reimburse?

17. PROJECT PERFORMANCE MEASURE DESCRIPTIONS:

18. PROJECT LEAD DEPT/OFFICE:

Communication & Admin Svcs

19. PROJECT LEAD - INDIVIDUAL

20. STAFF REVIEW:

Eligible

DATE:

10/11/2021

21. BOCC REVIEW

DATE:

22. TREASURY PROJECT NUMBER:

23. INTERNAL ORDER #:

AMERICAN RESCUE PLAN ACT - PROJECT TRACKING SHEET

1. PROJECT NAME

AuMHC Suicide Prevention

2. PROJECT DESCRIPTION (50-250 words)

AuMHC requests support to invest in the infrastructure needed to fully adopt the seven principles of the Zero Suicide Framework, enabling us to better identify suicide risk, train staff how to engage clients, implement evidence-based treatments for suicide ideation, and conduct ongoing data collection and measurement to provide measurement-based performance improvement and care. We will establish a Suicide Prevention Pathway, which will provide guidelines and monitoring mechanisms to ensure that suicide risk assessments are completed, a safety plan is created for all clients with risk, and both risk and treatment plan are documented and communicated among treatment team members. We will provide training to staff to improve ability to recognize and address risk, for both administrative and clinical staff, as well as to increase capacity in evidence-based treatments, such as Cognitive Behavioral Therapy for Suicide Prevention (CBT-SP), dialectical behavior therapy (DBT), and the Collaborative Assessment and Management of Suicide (CAMS), that have demonstrated impact on suicide risk.

3. PROJECT FUNDING "BUCKET" (Select One)

Mental Health

4. PROJECT ELIGIBILITY NEXUS DESCRIPTION:

Suicide remains a major public health crisis. Prior to the pandemic, contributing factors included mental illness, problems in relationships or losses, substance misuse, general health problems, and overall basic needs stress. Tri-County Health Department identified that suicide was the 7th leading cause of death among Arapahoe County residents in 2016. The risk of suicide has only increased as a result of the pandemic. Initial research during the pandemic has indicated a significant increase in depression and suicide ideation, with potential for increased risk of suicide due to challenges with job loss, insecure housing, lack of access to healthcare and resources, and ongoing isolation as a result of the pandemic.

5. PROJECT EXPENDITURE CATEGORY (Select one):

1.10 Mental Health Services*

*NOTE: If the category selected above has a * or ^ at the end of the title, please complete the appropriate sections below.*

6. PROJECT EXPENDITURE ESTIMATE (Total):

\$	104,000				
		FY 21	FY 22	FY 23	FY 24
One-Time Costs:			104,000	-	-
Ongoing Costs:		-	-	-	-
Total:		-	104,000	-	-

If ongoing funds extend beyond FY24, please describe how it will be funded below:

7. PROJECT LEVERAGE/PARTNERSHIPS:

8. PROJECT STATUS (Select):

Not Started

9. PROJECT DEMOGRAPHIC DISTRIBUTION (Expenditure Category above with an asterisk (*) :**The Program/Service will serve, or have (select best option):**

Eligibility criteria are such that the primary intended beneficiaries earn <60% of median income for county.

Notes/Further Description:**10. USE OF EVIDENCE/EVIDENCE BASED APPROACH** (Exp. Category above with a carrot (^) :

We will provide training to staff to improve ability to recognize and address risk, for both administrative and clinical staff, as well as to increase capacity in evidence-based treatments, such as Cognitive Behavioral Therapy for Suicide Prevention (CBT-SP), dialectical behavior therapy (DBT), and the Collaborative Assessment and Management of Suicide (CAMS), that have demonstrated impact on suicide risk.

11. POPULATION SERVED:

AuMHC typically serves over 20,000 individuals annually, and reaches an additional 2,300 community members through trainings and events. We serve a diverse client population, including children under age 18 (31%), older adults (6%), and individuals below 150% of federal poverty limit (56%), and individuals who identify as a racial or ethnic minority (16% Black, 5% multiracial, 2% Asian, 1% American Indian/Alaska Native, and 23% who identify as Hispanic). Our staff speak nearly 50 different languages and we offer specialized services for immigrants, refugees, and asylum-seekers.

No. of Unique Individuals Served:**Percent that are Low-Income/Disproportionately Impacted:****12. ORGANIZATIONAL ABILITY/CAPACITY:**

Aurora Mental Health Center is a key member of the healthcare safety net for Arapahoe County, providing a comprehensive continuum of proven prevention, treatment intervention, and wraparound recovery support services since 1975. Our dedicated staff provide individual, group and family counseling, medication-focused care, substance use and recovery services, crisis services, and a variety of supportive services that help people navigate the challenges they face in their lives. AuMHC typically serves over 20,000 individuals annually, and reaches an additional 2,300 community members through trainings and events.

13. PROJECT READINESS:**Design/Pre-Work Needed (Yes/No)?**

Yes

Ready to Begin Services/Construction (Yes/No)?

No

Notes:**14. ALIGNMENT WITH RECOVERY PLAN:**

Support the most vulnerable across the county.

15. ALIGNMENT WITH STRATEGIC PLAN:

Be Community Focused

Support opportunities for physical health and mental health

16. PROJECT SUBAWARDS:**Organization Name****Amount****Reimburse?****17. PROJECT PERFORMANCE MEASURE DESCRIPTIONS:****18. PROJECT LEAD DEPT/OFFICE:**

Communication & Admin Svcs

19. PROJECT LEAD - INDIVIDUAL**20. STAFF REVIEW:****DATE:****21. BOCC REVIEW****DATE:****22. TREASURY PROJECT NUMBER:****23. INTERNAL ORDER #:**

AMERICAN RESCUE PLAN ACT - PROJECT TRACKING SHEET

1. PROJECT NAME

Pretrial Mental Health Program Expansion

2. PROJECT DESCRIPTION (50-250 words)

The pretrial mental health program is proven to improve the lives of its clients, and in so doing, reduce the chance of treatment relapse or recidivism. This program has resulted in millions of dollars avoided in justice system costs, namely jail bed days, and has streamlined an approach to connecting the justice-involved population to necessary services. This program should be expanded to serve a much broader population of criminal-accused clients. Expanding this existing program temporarily by two temporary grant funded navigator positions, during an increased time of need, will serve the goal of keeping the jail population low and due to intensive case management, it will not sacrifice public safety to achieve it.

3. PROJECT FUNDING "BUCKET" (Select One)

Mental Health

4. PROJECT ELIGIBILITY NEXUS DESCRIPTION:

Incidences of mental health issues among residents of Arapahoe County has increased due to the pandemic. At the same time, there has been a decrease in economic opportunity, as well as the increased utilization of limited mental health treatment options. These factors all make it more likely that mental health concerns will increasingly be present in the justice-involved population. The justice-involved population is a disproportionately impacted population in the pandemic, as they are largely unemployed and underemployed. Expanding the county's ability to respond to the needs of this population is important to ensure not only that the mental health needs of this population are treated, but also to deter individuals from incarceration and recidivism when mental health treatment is need. This also improves public safety. Arapahoe County has seen success with its current pretrial mental health program in the ability to ensure justice involved experiencing mental health disorders receive treatment, with a goal of reduced recidivism and increased public safety. The pandemic has demonstrated that there is an increased need for mental health services and considerations, which we can assist with by expanding this program.

5. PROJECT EXPENDITURE CATEGORY (Select one):

1.10 Mental Health Services*

*NOTE: If the category selected above has a * or ^ at the end of the title, please complete the appropriate sections below.*

6. PROJECT EXPENDITURE ESTIMATE (Total):

\$	480,000				
		FY 21	FY 22	FY 23	FY 24
One-Time Costs:		80,000	160,000	160,000	80,000
Ongoing Costs:		-	-	-	-
Total:		80,000	160,000	160,000	80,000

If ongoing funds extend beyond FY24, please describe how it will be funded below:

Once the funding for this program ends, the temporary grant funded position will end unless other grant funding is obtained

7. PROJECT LEVERAGE/PARTNERSHIPS:

This project would expand the existing pretrial mental health program and would leverage existing partnerships in place with the 18th Judicial Courts, Probation, the District Attorney's Office, and the Public Defender's Office.

8. PROJECT STATUS (Select):

Completed

9. PROJECT DEMOGRAPHIC DISTRIBUTION (Expenditure Category above with an asterisk (*):

This project would expand the ability to serve the criminally-charged population who are also experiencing mental health disorders that need treatment. This population is largely unemployed and underemployed.

10. USE OF EVIDENCE/EVIDENCE BASED APPROACH (Exp. Category above with a carrot (^):

\$2,654,311 saved in jail bed days during lifetime of program; \$420,000 in savings for 2021 (through July); FTA rate reduced by 27%; 1529 connections to services

11. POPULATION SERVED:

This project would serve additional individuals who are criminally charged in the 18th Judicial District and are in need of mental health services.

No. of Unique Individuals Served:

80.00

Percent that are Low-Income/Disproportionately Impacted:

100%

12. ORGANIZATIONAL ABILITY/CAPACITY:

The organization is currently running a pretrial mental health program and has the ability and capacity to expand the number served with this additional funding.

13. PROJECT READINESS:

Design/Pre-Work Needed (Yes/No)?

No

Ready to Begin Services/Construction (Yes/No)?

Yes

Notes:

14. ALIGNMENT WITH RECOVERY PLAN:

1. Support the most vulnerable across the county.

15. ALIGNMENT WITH STRATEGIC PLAN:

Goal and Outcome: Be Community Focused-Provide thriving communities, foster personal safety and security; Guiding Principles: Support economic vibrancy, protect community quality/wellbeing, understand and respond to what our community values

16. PROJECT SUBAWARDS:

Organization Name	Amount	Reimburse?
N/A		

17. PROJECT PERFORMANCE MEASURE DESCRIPTIONS:

Number of additional clients served, services provided, outcomes of clients served after pretrial mental health program involvement

18. PROJECT LEAD DEPT/OFFICE:		19. PROJECT LEAD - INDIVIDUAL	
Community Resources		Brad Kamby	
20. STAFF REVIEW:	DATE:	21. BOCC REVIEW	DATE:
Community Resources	9/8/2021		
22. TREASURY PROJECT NUMBER:		23. INTERNAL ORDER #:	

AMERICAN RESCUE PLAN ACT - PROJECT TRACKING SHEET

1. PROJECT NAME

Arapahoe County Detention Center Diversion Project

2. PROJECT DESCRIPTION (50-250 words)

Housing behavioral health impacted jail inmates in the unused wing of a community corrections facility, estimated service to 60 individuals at a time. Given the high prevalence of mental health and/or substance use disorders among inmates at the Arapahoe County Detention Facility, establishing an alternative, treatment-based facility, to serve these inmates in lieu of jail custody, is a means by which the County can meet these individuals' needs in a trauma-informed and clinical setting. Jail is a poor setting for treatment. Establishing a separate treatment facility for the justice involved whose nexus to their charge is due to untreated disorder or symptoms will reduce population pressure from the jail and extend the usable life of the facility. Additionally, the core competency of jail staff is to provide security and deterrence from crime. Adding a behavioral health treatment mission onto that staff creates conflict between core competency and mission. Establishing a separate unit within the Sheriff's Office to operate a care facility will closely align the core competency of that unit with the mission of mental health and substance use recovery. Arapahoe County's Justice Coordinating Committee has prioritized the need to explore providing comprehensive behavioral health alternatives to the jail. Currently, Arapahoe County's female community corrections facility (Arapahoe County Rehabilitation Center- ACRC) is owned and operated by the GEO group. This facility has been approved to be reconstructed to meet the needs of multiple populations. Arapahoe County would like to utilize this building to implement a pilot program that will work to truly serve as an alternative to the jail for those experiencing behavioral health needs. This would serve around 80 individuals who would otherwise be served in the Arapahoe County Detention Center, but are in need of mental health and substance abuse treatment to ensure success upon reentry into society.

3. PROJECT FUNDING "BUCKET" (Select One)

Mental Health

4. PROJECT ELIGIBILITY NEXUS DESCRIPTION:

Incidences of mental health concerns among residents in Arapahoe County has increased due to the pandemic. At the same time, there has been a decrease in economic opportunity, as well as the increased utilization of limited mental health treatment resources. These factors all make it more likely that mental health will increasingly be present in the justice involved population. The justice involved population is a disproportionately impacted population by the pandemic based on employment status, income levels, as well as racial disparities. The county currently has an opportunity with a vacant community corrections building to begin a pilot to provide true diversion services to those incarcerated who are experiencing behavioral health needs. This pilot would create a new location to divert our justice involved to ensure behavioral health needs are met to reduce recidivism. Arapahoe County has recently identified the increased need to ensure we are meeting the mental health needs of our citizens who are justice involved, especially since the rise of mental health and substance abuse needs due to the pandemic. Utilizing this funding to create a pilot program at the ACRC site would be a beneficial start to a possible long term program to address the mental and behavioral health needs in the county.

5. PROJECT EXPENDITURE CATEGORY (Select one):

1.10 Mental Health Services*

NOTE: If the category selected above has a * or ^ at the end of the title, please complete the appropriate sections below.

6. PROJECT EXPENDITURE ESTIMATE (Total):

\$	2,500,000				
		FY 21	FY 22	FY 23	FY 24
One-Time Costs:			1,250,000	1,250,000	-
Ongoing Costs:		-	-	-	-
Total:		-	1,250,000	1,250,000	-

If ongoing funds extend beyond FY24, please describe how it will be funded below:

This will be a one-time investment for a pilot program. Once this \$2.5 million is expended, the pilot program will end or alternate funding through grants or sales taxes will need to be approved and located.

7. PROJECT LEVERAGE/PARTNERSHIPS:

The Arapahoe County Justice Coordinating Committee's commitment to this will be essential. Members of the ACJCC, to include the Sheriff's Office, The 18th Judicial Courts, The District Attorney's Office, the Public Defender's Office, Community Resources, and Human Services will leverage existing partnerships and programs to provide service delivery. In addition, partnerships will need to be utilized related to specified service providers in the community to deliver necessary behavioral health services onsite. A partnership with the GEO group for use of the building and possible use of the GEO staff will be necessary. This project also leverages state-provided funding for community corrections. The ACRC facility is primarily supported by this funding source, which provides a per-diem amount for each offender housed at the facility. The facility, which is for female community corrections clients, is larger than the state correctional system can support, so the facility owner has asked that the County develop alternatives to fill the unused space.

8. PROJECT STATUS (Select):

Not Started

9. PROJECT DEMOGRAPHIC DISTRIBUTION (Expenditure Category above with an asterisk (*)) :

This project will serve incarcerated individuals with identified behavioral health needs. These individuals will be homeless and unemployed, making them disproportionately impacted. The population demographics of the Arapahoe County Detention Facility, a proxy for the target population of this program, between May-July 2021, are as follows: White = 51%, Black = 24%, Hispanic = 23%, Other Race = 2%; male = 79%, female = 21%; average age 35.4 years.

10. USE OF EVIDENCE/EVIDENCE BASED APPROACH (Exp. Category above with a carrot (^)) :

Bear County TX: Saves more than \$10 million per year on averted jail costs and ER costs; 89% of those that exited did not return to homelessness after 1 year; in first year of operation 3,323 fewer jail bookings; Jail bookings in 2018 were 5,360 less than in 2010 Davidson County TN: 21% reidivism demonstrated in first year

11. POPULATION SERVED:

Incarcerated individuals in Arapahoe County who are homeless, unemployed, and have identified behavioral health treatment needs. The facility will serve around 60 individuals at a time.

No. of Unique Individuals Served: 250/yr

Percent that are Low-Income/Disproportionately Impacted: 100%

12. ORGANIZATIONAL ABILITY/CAPACITY:

The Arapahoe County Detention Center is currently assessing the ability/capacity for current staffing to implement the program and may need to utilize the staffing available through the GEO group as well as community providers to meet the needs of the facility. At this time, the group is assessing cost and staffing levels. There are no concerns that Arapahoe County will be able to ensure ability and capacity for the project with the funding provided. Partnering entities include: ACSO, GEO Group, Inc., and Judicial Services. The capacity of each entity is well-suited to take on this program with current level of resources.

13. PROJECT READINESS:

Design/Pre-Work Needed (Yes/No)?

Yes

Ready to Begin Services/Construction (Yes/No)?

Yes

Notes:

14. ALIGNMENT WITH RECOVERY PLAN:

1. Support the most vulnerable across the county. 2. Make strategic and impactful investments that position Arapahoe County for long-term vs. short-term success in alignment with the County's overall vision and strategic plan.

15. ALIGNMENT WITH STRATEGIC PLAN:

Goals: Be Community Focused- Support opportunities for physical health and mental health
Principles: Protect community quality/well-being

16. PROJECT SUBAWARDS:

<i>Organization Name</i>	<i>Amount</i>	<i>Reimburse?</i>
Possibly GEO group- amount and need yet to be determined		

17. PROJECT PERFORMANCE MEASURE DESCRIPTIONS:

Number of individuals served; number and type of services provided; time served by individual; offense specific information; outcomes of participants 60, 90, and 120 after release; rate of recidivism; cost of previous law enforcement/emergency personnel involvement vs after treatment;

18. PROJECT LEAD DEPT/OFFICE:

Sheriff's Office

19. PROJECT LEAD - INDIVIDUAL

Jared Rowlison/Mark Nicastle

20. STAFF REVIEW:

Community Resources and Sheriff's Office

DATE:

9/8/2021

21. BOCC REVIEW

DATE:

22. TREASURY PROJECT NUMBER:

23. INTERNAL ORDER #:

AMERICAN RESCUE PLAN ACT - PROJECT TRACKING SHEET

1. PROJECT NAME

Mental Health and Care Management Support for Seniors

2. PROJECT DESCRIPTION (50-250 words)

Innovative Housing Concepts (also known as the Englewood Housing Authority) mission is to assist lower-income families in a non-discriminating manner, with safe, decent and affordable housing opportunities as they strive to achieve self-sufficiency and improve the quality of their lives. To this end, the Innovative Housing Concepts is committed to operating in an efficient, ethical, fiscally-responsible and professional manner. Innovative Housing Concepts operates two federally subsidized buildings; Simon Center Apartments and Orchard Place Apartments. Both of these buildings house residents who are low-income and either disabled, senior, or both. The average income for these properties is \$15,603.50.

3. PROJECT FUNDING "BUCKET" (Select One)

Mental Health

4. PROJECT ELIGIBILITY NEXUS DESCRIPTION:

Mental health support and intensive care management services has been a persisting, undeniable need of the residents at Innovative Housing Concepts. As seniors age in place, they are faced with immense grief as they face the passing of their peers. Support in dealing with this grief is an important part to their mental health. Additionally, it supports isolation intervention, another key component in aging healthy, in place. To support the ongoing, multi-faceted needs of residents, care management can serve as a useful resource for residents to have their physical, emotional, mental health, community, and benefits/system navigation needs addressed. Care management is another crucial component in assisting to maintaining housing and physical/mental well-being of our residents.

5. PROJECT EXPENDITURE CATEGORY (Select one):

1.10 Mental Health Services*

*NOTE: If the category selected above has a * or ^ at the end of the title, please complete the appropriate sections below.*

6. PROJECT EXPENDITURE ESTIMATE (Total):

\$	12,960				
		FY 21	FY 22	FY 23	FY 24
One-Time Costs:		-	12,960	-	-
Ongoing Costs:				-	-
Total:		-	12,960	-	-

If ongoing funds extend beyond FY24, please describe how it will be funded below:

7. PROJECT LEVERAGE/PARTNERSHIPS:

Partnering with Jewish Family Services (JFS) to provide contracted services.

8. PROJECT STATUS (Select):

Not Started

9. PROJECT DEMOGRAPHIC DISTRIBUTION (Expenditure Category above with an asterisk (*)) :

The Program/Service will serve, or have (select best option):

Eligibility criteria are such that over 25% of intended beneficiaries are below federal poverty line.

Notes/Further Description:

10. USE OF EVIDENCE/EVIDENCE BASED APPROACH (Exp. Category above with a carrot (^)) :

The services of bereavement groups and a care manager onsite would be delivered by qualified therapists/staff through Jewish Family Services Desired outcomes would be higher-level coping skills with residents and engagement in both services amongst the residents, resulting in their multipart service needs being fulfilled.

11. POPULATION SERVED:

Senior residents who are low-income and either disabled, senior, or both. The average income for these properties is \$15,603.50

No. of Unique Individuals Served:

Percent that are Low-Income/Disproportionately Impacted:

12. ORGANIZATIONAL ABILITY/CAPACITY:

13. PROJECT READINESS:

Design/Pre-Work Needed (Yes/No)?

No

Ready to Begin Services/Construction (Yes/No)?

Yes

Notes:

14. ALIGNMENT WITH RECOVERY PLAN:

Support the most vulnerable across the county.

15. ALIGNMENT WITH STRATEGIC PLAN:

Be Community Focused

Support opportunities for physical health and mental health

16. PROJECT SUBAWARDS:

Organization Name

Amount

Reimburse?

17. PROJECT PERFORMANCE MEASURE DESCRIPTIONS:			
Program outcomes would be evaluated through monthly resident attendance numbers to both the bereavement groups and case management and baseline/follow up surveys on the effectiveness and satisfaction of both programs			
18. PROJECT LEAD DEPT/OFFICE:		19. PROJECT LEAD - INDIVIDUAL	
Communication & Admin Svcs			
20. STAFF REVIEW:	DATE:	21. BOCC REVIEW	DATE:
22. TREASURY PROJECT NUMBER:		23. INTERNAL ORDER #:	

AMERICAN RESCUE PLAN ACT - PROJECT TRACKING SHEET

1. PROJECT NAME				
AuMHC Safety Implementation and Preparedness				
2. PROJECT DESCRIPTION (50-250 words)				
We will invest in an expert consultant to provide technical assistance in three key areas to develop and implement comprehensive safety and infection control policies, processes, and training across the agency: 1) infection control to understand local and federal regulations, appropriate use of PPE, and other recommendations to prevent the spread of COVID-19 and other infectious diseases; 2) occupational health to provide consultation to our Human Resources Department regarding response to staff exposures and cases, contact tracing, and staff training; and 3) facility design and flow to create safer environments for work and clinical care and improved response to incidents at both building-level and system-level.				
3. PROJECT FUNDING "BUCKET" (Select One)				
COVID Response				
4. PROJECT ELIGIBILITY NEXUS DESCRIPTION:				
There are continued changes in recommended COVID-19 precautionary measures and required safety measures in the healthcare setting to address changes in the incidence and impact of the pandemic both locally and nationally. These measures are essential to keep both staff and our clients as safe as possible, to reduce the risk of transmission and build sustainable safety practices that meet the needs of our high risk and high needs clients. Additionally, effective measures increase our ability to maintain essential services, such as acute care and residential, open to the community during the pandemic and any future public health emergencies. We anticipate that recommendations will continue to evolve over the next few years to mitigate the impact of COVID-19 and to improve preparedness for future local and regional health disasters.				
5. PROJECT EXPENDITURE CATEGORY (Select one):				
1.7 Capital Investments or Physical Plant Changes to Public Facilities that respond to the COVID-19 public health emergency				
NOTE: If the category selected above has a * or ^ at the end of the title, please complete the appropriate sections below.				
6. PROJECT EXPENDITURE ESTIMATE (Total):				
\$	163,000			
		FY 21	FY 22	FY 23
				FY 24
One-Time Costs:			163,000	-
Ongoing Costs:		-	-	-
Total:		-	163,000	-
If ongoing funds extend beyond FY24, please describe how it will be funded below:				
7. PROJECT LEVERAGE/PARTNERSHIPS:				
8. PROJECT STATUS (Select):				
Not Started				

9. PROJECT DEMOGRAPHIC DISTRIBUTION (Expenditure Category above with an asterisk (*)) :

The Program/Service will serve, or have (select best option):

Notes/Further Description:

10. USE OF EVIDENCE/EVIDENCE BASED APPROACH (Exp. Category above with a carrot (^)) :**11. POPULATION SERVED:**

AuMHC typically serves over 20,000 individuals annually, and reaches an additional 2,300 community members through trainings and events. We serve a diverse client population, including children under age 18 (31%), older adults (6%), and individuals below 150% of federal poverty limit (56%), and individuals who identify as a racial or ethnic minority (16% Black, 5% multiracial, 2% Asian, 1% American Indian/Alaska Native, and 23% who identify as Hispanic). Our staff speak nearly 50 different languages and we offer specialized services for immigrants, refugees, and asylum-seekers.

No. of Unique Individuals Served:

Percent that are Low-Income/Disproportionately Impacted:

12. ORGANIZATIONAL ABILITY/CAPACITY:

Aurora Mental Health Center is a key member of the healthcare safety net for Arapahoe County, providing a comprehensive continuum of proven prevention, treatment intervention, and wraparound recovery support services since 1975. Our dedicated staff provide individual, group and family counseling, medication-focused care, substance use and recovery services, crisis services, and a variety of supportive services that help people navigate the challenges they face in their lives. AuMHC typically serves over 20,000 individuals annually, and reaches an additional 2,300 community members through trainings and events.

13. PROJECT READINESS:

Design/Pre-Work Needed (Yes/No)?

Yes

Ready to Begin Services/Construction (Yes/No)?

No

Notes:

14. ALIGNMENT WITH RECOVERY PLAN:**15. ALIGNMENT WITH STRATEGIC PLAN:**

Be Community Focused

Support opportunities for physical health and mental health

16. PROJECT SUBAWARDS:		
Organization Name	Amount	Reimburse?
17. PROJECT PERFORMANCE MEASURE DESCRIPTIONS:		
18. PROJECT LEAD DEPT/OFFICE:		19. PROJECT LEAD - INDIVIDUAL
Communication & Admin Svcs		
20. STAFF REVIEW:	DATE:	21. BOCC REVIEW DATE:
22. TREASURY PROJECT NUMBER:		23. INTERNAL ORDER #:

AMERICAN RESCUE PLAN ACT - PROJECT TRACKING SHEET

1. PROJECT NAME

AuMHC Telehealth Access

2. PROJECT DESCRIPTION (50-250 words)

To support client access to resources, services, and their health record, we request funding to develop and implement a new client portal. The portal will be custom designed to meet both client needs, such as appointment scheduling, access to health record, downloading prevention and recovery resources, and sending secure messages to their treatment team, and staff needs, such as sending self-assessments to complete, treatment reminders, and follow-up contacts to support ongoing recovery. The portal will help clients feel more in control of and engaged in their treatment plan, promoting self-sufficiency, communication and active use of recovery resources. The portal will serve as our digital front door for access to care.

3. PROJECT FUNDING "BUCKET" (Select One)

Public Health

4. PROJECT ELIGIBILITY NEXUS DESCRIPTION:

The pandemic resulted in a rapid transition to telehealth services across most of our service lines. Many clients now prefer telehealth for both safety and convenience, and are seeking to enhance treatment through other web-based resources and communication platforms. With rising behavioral health needs, many clients need and demand in-the-moment care, whether that is direct communication with their provider, access to a coping tool, or scheduling an appointment.

5. PROJECT EXPENDITURE CATEGORY (Select one):

1.12 Other Public Health Services

*NOTE: If the category selected above has a * or ^ at the end of the title, please complete the appropriate sections below.*

6. PROJECT EXPENDITURE ESTIMATE (Total):

\$	130,000				
		FY 21	FY 22	FY 23	FY 24
One-Time Costs:			130,000	-	-
Ongoing Costs:		-	-	-	-
Total:		-	130,000	-	-

If ongoing funds extend beyond FY24, please describe how it will be funded below:

7. PROJECT LEVERAGE/PARTNERSHIPS:

8. PROJECT STATUS (Select):

Not Started

9. PROJECT DEMOGRAPHIC DISTRIBUTION (Expenditure Category above with an asterisk (*)) :

The Program/Service will serve, or have (select best option):

Notes/Further Description:

10. USE OF EVIDENCE/EVIDENCE BASED APPROACH (Exp. Category above with a carrot (^) :

The pandemic resulted in a rapid transition to telehealth services across most of our service lines. Many clients now prefer telehealth for both safety and convenience, and are seeking to enhance treatment through other web-based resources and communication platforms. With rising behavioral health needs, many clients need and demand in-the-moment care, whether that is direct communication with their provider, access to a coping tool, or scheduling an appointment.

11. POPULATION SERVED:

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No. of Unique Individuals Served:

Percent that are Low-Income/Disproportionately Impacted:

12. ORGANIZATIONAL ABILITY/CAPACITY:

Aurora Mental Health Center is a key member of the healthcare safety net for Arapahoe County, providing a comprehensive continuum of proven prevention, treatment intervention, and wraparound recovery support services since 1975. Our dedicated staff provide individual, group and family counseling, medication-focused care, substance use and recovery services, crisis services, and a variety of supportive services that help people navigate the challenges they face in their lives. AuMHC typically serves over 20,000 individuals annually, and reaches an additional 2,300 community members through trainings and events.

13. PROJECT READINESS:

Design/Pre-Work Needed (Yes/No)?

Yes

Ready to Begin Services/Construction (Yes/No)?

No

Notes:

14. ALIGNMENT WITH RECOVERY PLAN:

Support the most vulnerable across the county.

15. ALIGNMENT WITH STRATEGIC PLAN:

Be Community Focused

Support opportunities for physical health and mental health

16. PROJECT SUBAWARDS:

Organization Name

Amount

Reimburse?

17. PROJECT PERFORMANCE MEASURE DESCRIPTIONS:			
18. PROJECT LEAD DEPT/OFFICE:		19. PROJECT LEAD - INDIVIDUAL	
Communication & Admin Svcs			
20. STAFF REVIEW:	DATE:	21. BOCC REVIEW	DATE:
22. TREASURY PROJECT NUMBER:		23. INTERNAL ORDER #:	