# **2024 State of Behavioral Health in Adams County Community Forum**

May 15, 2024 9:00 – 10:30 AM



ADAMS COUNTY HEALTH DEPARTMENT Your Health. Our Mission.

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# Housekeeping

Welcome!

- ✓ Spanish interpretation
- $\checkmark$  Recording and sharing of presentation
- $\checkmark$  Please practice self-care and self-support
- ✓ Q&A function

# **Our Road Ahead**

Time	Description
9:00 – 9:10 AM	Welcome
9:10 – 10:00 AM	Adams County Behavioral Health Services and Supports Assessment: A Blueprint for Action
10:00 – 10:25 AM	High Impact Behavioral Health Strategies Panel
10:25 – 10:30 AM	Looking Ahead Together

# May is Mental Health Awareness Month!



# "Where to Start: Mental Health in a Changing World"

Please share with the group one (or more) of the following on <u>Padlet</u>:

- Wellness podcast, book, other reading or audio material
- Self-care activity that you either practice or would like to practice
- Quote or piece of advice for the group





# Welcome and Introduction

Dr. Kelly Weidenbach, DrPh, MPH

Executive Director Adams County Health Department



# Adams County Behavioral Health Services & Supports Assessment: A BLUEPRINT FOR ACTION REPORT



# Purpose

To assess the county's behavioral health services continuum and determine the system's capacity to provide direct services and supports to people with the greatest needs.

What is behavioral health?

What is the behavioral health services continuum?



Let's Talk Behavioral Health Behavioral health encompasses all contributions to mental health including substances and their misuse, behavior, habits, and other external factors. Mental health refers to the emotions, behaviors, and biology relating to a person's mental wellbeing, their ability to function in everyday life, and their concept of self.



### SOCIAL & INSTITUTIONAL Inequities

Socioeconomic forces; Structural racism; Systems of power and priviledge; Political forces

### What do we mean by the Behavioral Health Services Continuum?

### EARLY IDENTIFICATION & INTERVENTION

Screening, assessment and diagnosis; Integrated care services

### COMMUNITY-BASED SERVICES & TREATMENT

Outpatient mental health and substance use disorder treatment; Day treatment; Wraparound services; Partial hospitalization; Intensive outpatient mental health; Substance use disorder treatment

### **CRISIS CARE**

Withdrawal management services; Walk-in crisis services; Co-responder programs; Mobile crisis care; First responders; Emergency departments

THE WHOLE PERSON Health Continuum

### LIVING CONDITIONS

Physical environments; Social environments; Work environments; Service environments

### RECOVERY & RELAPSE PREVENTION

Recovery support services; Clubhouse services; Recovery residences; Supportive housing, employment, and education

### **ACUTE & RESIDENTIAL CARE**

Step-down services; Behavioral health residential services; Inpatient services; Hospitals; Hospital alternatives; Intermediate care facilities for individuals with developmental disabilities

Adapted from the Colorado Behavioral Health Administration Strategic Plan

COMMUNITY HEALTH

**PROMOTION & PREVENTION** 

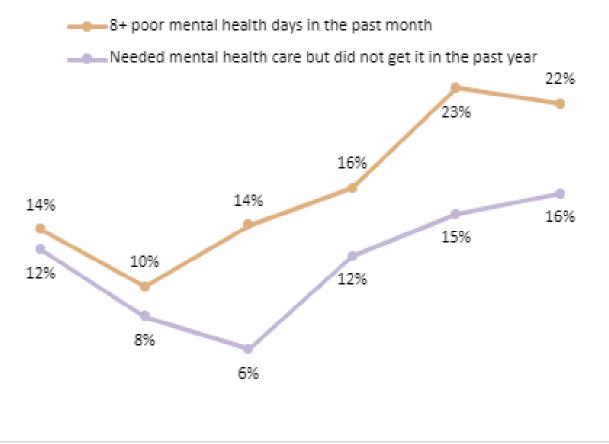
Education; Universal

and tailored prevention;

Outreach; Engagement

# **Background Data**





2019

2021

2023

1 in 5 Adams County residents ages five years and older reported having poor mental health for eight or more days over the past month.

STATISTICS ARF

- Irving J. Selikoff, M.D.

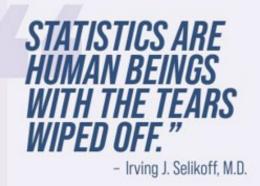
Source: Colorado Health Access Survey

2017

2013

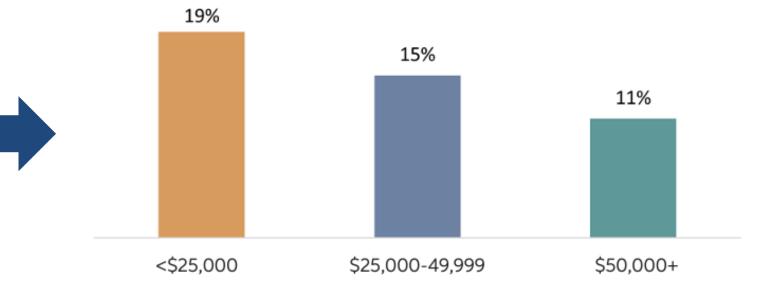
2015

# **Background Data**



**Disparities and inequities appear** in behavioral health outcomes by age, race/ethnicity, income, sexual orientation, gender identity, and geographic area.

People with lower incomes tend to experience poor mental health status more often than people with higher incomes in Adams County Figure 9. Percent of People Reporting Poor Mental Health for 14 or More Days During the Past 30 days, by Annual Household Income, Adams County, 2019 and 2021 combined.



Source: Behavioral Risk Factor Surveillance System

# Methodology

Ten populations of focus were identified based on behavioral health disparities and inequities documented in state and local assessments within the last 3-5 years.



- 1) Youth and Young Adults
- 2) Older Adults
- 3) Black, Indigenous, and People of Color (BIPOC)
- 4) Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, Intersex, Asexual, Plus, and other sexual/gender populations (LGBTQIA+)
- 5) People without documentation
- 6) People who are unhoused
- 7) People with low incomes
- 8) People who are pregnant and postpartum
- 9) People with disabilities
- 10) People who have interfaced with the carceral system

# Methodology

### **Data Collection**

**Quantitative:** Reviewed over 60 timely and relevant data sources (past 3-5 years)

### Qualitative:

- ✓ Focus Groups:
  - 1) People with lived substance misuse experience
  - 2) Parents (Spanish-speaking only)
  - 3) Behavioral Health Providers
  - 4) Home Visitation Programs
- ✓ Key Informant Interviews: engaged over 75 professionals representing multiple sectors

### DATA EQUITY PRINCIPLES & VALUES

Use Data to Inform, Drive Action, and Impact Health Outcomes



Keep Data Timely and Relevant



Ensure Transparency Regarding Limitations of Data Collection



Disaggregate Data to Understand Who is Most Impacted



Communicate Historical Context



Name Disparities and Inequities



Tell the Story of Intersectionality



Take a Strengths-Based Approach



Communicate Data to Partners and Residents Effectively

Sources: Adapted from Center for Disease Control and Prevention, Urban Institute (2020), and The White House (2022).

# **KEY FINDINGS**

### **Adams County Behavioral Health Service and Support Needs**

- 1. Accessing behavioral health services and supports is very difficult in Adams County.
- 2. There is a need in Adams County for linguistically congruent, culturally congruent, and tailored behavioral health services and supports.

### Adams County Behavioral Health Provider Capacity and Capabilities

- 3. Adams County's behavioral health system does not meet the need for behavioral health services across the continuum of care.
- 4. Organizations serving Adams County residents with behavioral health challenges have difficulty connecting residents to needed behavioral health services and supports.
- 5. Primary care is a critical setting for increasing access to behavioral health services and supports in Adams County.
- 6. Utilization of telehealth services increased during the COVID-19 pandemic and remains a common delivery method for behavioral health services.
- 7. Behavioral health workforce recruitment and retention challenges in Adams County have a negative impact on provider service capacity.

# Accessing behavioral health services and supports is very difficult in Adams County.

Data Reminder: In 2023, over 75,000 residents reported there was a time in the past year when they needed but did not get mental healthcare or counseling services.

# Mental Health Care

### Figure 6: Barriers to Mental Health Care in Adams County, 2023

Source: Colorado Health Access Survey

60% of people with public insurance (Medicaid, Medicare, CHP+) reported having a hard time getting an appointment.
 54% of people with private

**insurance** reported the same.

→ Community Voice: Community partners conveyed that even for Medicaid members who can make appointments, waitlists can be months long. A local behavioral health provider reported their waitlist has 200 people on it.

FINDING 2

There is a need in Adams County for linguistically congruent, culturally congruent, and tailored behavioral health services and supports.

**Linguistically Congruent Care** is care that is communicated in an individual's primary and/ or preferred language.



- **29%** of Adams County residents ages five and older speak a language other than English at home.
- **1 in 4** Adams County residents report Spanish as either their primary or preferred language.

"Language – other than Spanish and English, the options are limited. If you're from a different culture or speak another language, you're less likely to reach out for assistance." – Human Services Provider

There is a need in Adams County for linguistically congruent, culturally congruent, and tailored behavioral health services and supports.

**Culturally Congruent Care** happens when providers and clients create an appropriate fit between professional practice and what patients and families need and want in the context of their culture.

### → Community Voice:

Community partners engaged in increasing access to culturally responsive services in Adams County expressed the importance of integrating informal supports.

"There is a lack of therapists who understand our [Latino] culture." – Parent Focus Group (Spanish speaking only)

"Our success stories often come from programs that dare to step outside conventional treatment models, incorporating art, music, and community storytelling." – **Behavioral Health Provider**  "We offer non-traditional supports, like acudetox, indigenous healers, limpias, sweat lodge, etc. We also host peer services support groups in English and Spanish and host twice monthly outings with this group." – Social Service Organization

# There is a need in Adams County for linguistically congruent, culturally congruent, and tailored behavioral health services and supports.

**Tailored Care** is person-centered, trauma-informed and integrated care and acknowledges the need to understand a patient's life experiences to deliver effective care.

### → Community Voice:

"There's an alarming rise in anxiety and depression among teenagers in our community, but a stark lack of available services tailored to their unique developmental needs." – **Behavioral Health Provider** 

"There are a lot of [upstream] causes of behavioral health needs, like domestic violence, parental substance use, immigration trauma, racism, and systemic barriers. A lot of issues are made worse by the journey immigrant/refugees [without documents] face." – Social Service Organization

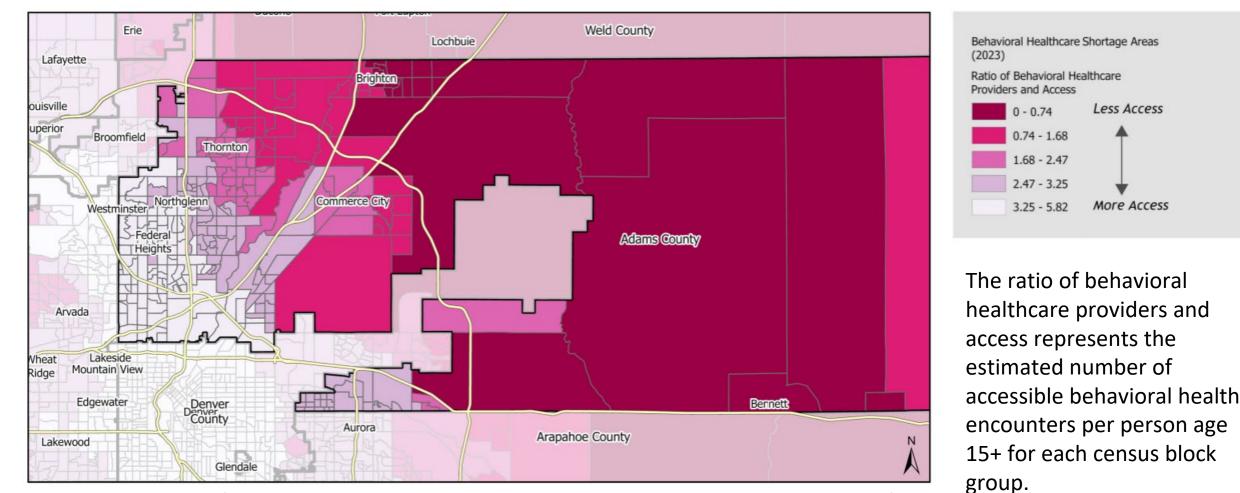


"They're [parents of children and youth with special healthcare needs] are so isolated. They need childcare so they can attend this stuff." – Home Visitation Program Focus Group



Adams County's behavioral health system does not meet the need for behavioral health services across the continuum of care.

### Behavioral Healthcare Shortage Areas, Adams County Colorado, October 2023

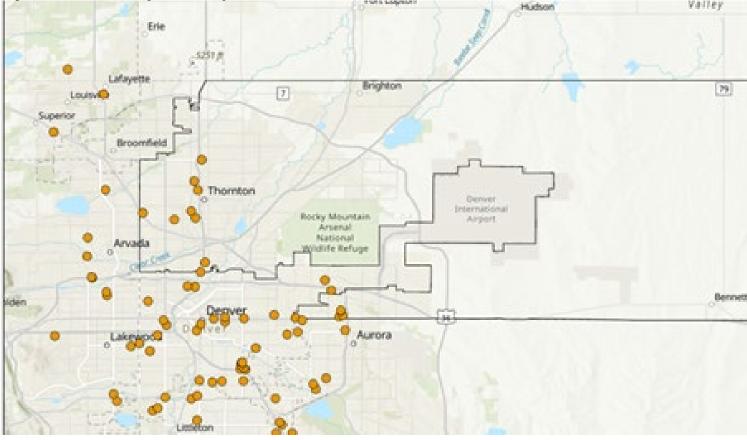


Source: Colorado Department of Public Health and Environment, Colorado Health Systems Directory administered by the Colorado Department of Public Health and Environment's Primary Care, 2023



Adams County's behavioral health system does not meet the need for behavioral health services across the continuum of care.

Map: Inpatient and Outpatient Mental Health Facilities within a 30-minute Drive of Adams County Municipalities, 2023



- 93 inpatient and outpatient
  mental health facilities and 295
  substance use treatment facilities
  are located within a 30-minute
  drive of Adams County's highest
  populated municipalities.
- There are only seven licensed mental health facilities within Adams County; the other 55 are in neighboring counties.

Source: Colorado Licensing and Designation Database and Electronic Records System, 2023



Adams County's behavioral health system does not meet the need for behavioral health services across the continuum of care.

### **Key Sub-findings**



Total clients served by Adams County **Community Mental Health Centers** (CMHCs) declined during the COVID-19 pandemic and remain lower than pre-pandemic levels.



No **school district** in Adams County meets the recommended ratio of students-to-behavioral health professionals.



There are not enough **24/7 crisis services and withdrawal management (detox)** facilities in Adams County.



**Hospitals and emergency departments (EDs)** continue to be a main source of support for Adams County residents experiencing behavioral health crises especially among youth and young adults.



Adams County **co-responder service** reach and capacity is limited by internal and external challenges. Commerce City is the only municipality without a co-responder program.



Adams County residents have limited access to recovery residences and supports.



Behavioral health workforce recruitment and retention challenges in Adams County have a negative impact on provider service capacity.

**Burnout** More than 9 in 10 behavioral health workers said they have experienced burnout.

Salaries Without adequate rate increases, providers in the safety net system cannot compete, especially when Colorado communities need more services.

**Safety** High levels of violence in the mental healthcare sector directly contribute to the behavioral health workforce shortage.

Workload Increase 58% of those who provide care to clients say their waitlist is longer than ever.



### → Community Voice:

"People [behavioral health professionals] are going to private practice as well as other CMHCs and small groups. It comes down to money, caseload, and flexibility." – Behavioral Health Provider

"Turnover... is because people come in who are used to therapeutic/outpatient mental health and the co-responder role is very different and very demanding. And you are getting paid less than private practice and the hours/schedule are worse than private practice." – Co-responder Program Representative

### **Reflections – "Where to Start"**

### Learn

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What data or information stuck out to you today?

What do you want to learn more about?

✤ Please share on <u>Padlet</u>.

### **I**

### KEY RECOMMENDATIONS

### SYSTEMATIC APPROACH

- 1. Organized all key findings into broad categories to identify major cross-cutting themes.
- 2. Drafted recommendations that address the largest number of key findings.

### RECOMMENDATIONS

A: Expand the behavioral health workforce in Adams County.

B: Increase universal screening, referral and integrated care for behavioral health within all critical settings, including schools, primary care, and specialty services.

C: Improve and increase care coordination and case management among providers, systems, and across jurisdictions.

D: Provide public health leadership that engages critical behavioral health partners to improve access to behavioral health services and supports and integrate promotion and prevention strategies.

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Recommendations	Examples
Expand and support the behavioral health workforce in Adams County.	<ul> <li>Incentivize participation in local clinical training programs for future mental health professionals.</li> <li>Examples: Aurora Mental Health and Recovery, Children's Hospital Colorado, Reaching HOPE, Regis University, Servicios de la Raza, Salud Family Health</li> <li>Promote, expand, and incentivize culturally congruent and tailored trainings and certifications.</li> <li>Certifications (examples):</li> <li>Colorado School of Public Health Latino Research and Policy Center certificate in Latino Health</li> <li>E4 Center for Excellence for Behavioral Health Disparities in Aging Older Adult Mental Health Certificate Program</li> <li>Community-based and Community-initiated care trainings (examples):</li> <li>Mental Health First Aid</li> <li>Naloxone</li> <li>Question, Persuade, Refer Gatekeeper Training for Suicide Prevention</li> <li>Social Justice Approach to Prevention and Policy</li> <li>Strengthening Families Five Protective Factors</li> <li>Trauma-Informed Practices</li> </ul>

Recommendations	Examples
Increase universal screening, referral and integrated care for behavioral health in critical settings. • Schools • Primary care Specialty services	<ul> <li>Increase Screening in Schools</li> <li>➢ 2024 Behavioral Health Administration mental health screening in schools program</li> <li>Increase Comprehensive School Behavioral Health Systems</li> <li>➢ Colorado Framework for School Behavioral Health Services</li> <li>➢ ARPA funding</li> <li>Increase Screening in Primary and Specialty Care</li> <li>➢ Screening for early detection and treatment of mental health and substance use disorders in primary care settings can improve quality of life, help contain healthcare costs, and reduce complications from co-ocurring behavioral health and medical conditions.</li> <li>➢ Health First Colorado (CO Medicaid) covers behavioral health screening services in a wide variety of settings.</li> </ul>

### Increase Integrated Behavioral Healthcare in Primary Care and Specialty Settings

Integrated behavioral health is found in primary care and in specialty settings, such as oncology, cardiology, neurology, pediatrics, obstetrics and rehabilitation

Recommendations	Examples
Improve and increase care coordination and case management among providers, systems, and across jurisdictions.	<ul> <li>By incentivizing providers to employ the 'supportive behavioral health workforce', Adams County can increase access to wraparound whole-person behavioral healthcare.</li> <li>Community Health Workers (CHWs)</li> <li>&gt; CHWs, also referred to as promotores de salud, are frontline public health workers who are members of the communities they serve, sharing language and cultural identities.</li> <li>Peer Support Professionals</li> <li>&gt; Peer support encompasses a range of activities and interactions between people who have shared similar experiences of living with mental health or substance use conditions.</li> <li>Qualified Behavioral Health Assistants (QBHAs)</li> <li>&gt; This paraprofessional will assist licensed and certified clinicians with navigation and other nonclinical services in behavioral health.</li> </ul>

Recommendations	Examples
Provide public health leadership that engages	Public health is charged with meeting the challenges of the 21st century by assuming the role of <b>Chief Health Strategist</b> and rethinking the way community- wide issues and priorities like behavioral health are addressed while drawing on existing data and evidence base.
critical behavioral health partners to improve access to	A <b>collective impact approach</b> that brings together the multiple sectors and critical behavioral health partners who work together to address access to services and supports while strategically investing in promotion and prevention strategies. This
behavioral health services and supports and integrates	includes addressing the drivers of health, like economic security and housing required for long-term impact.
promotion and prevention strategies.	Community Voice:     "More providers and clinicians will help, but that won't change the stigma or other things

"More providers and clinicians will help, but that won't change the stigma or other things that we're hearing. We need more alternatives. We can't workforce our way out of it. We can't force a therapist on [people who don't want it]." - Home Visitation Focus Group

## **Reflections – "Where to Start"**

Act

What action, small or big, might you take after today's presentation?

Advocate

What ways can you/we advocate for mental health in our personal and/or professional life?

Please share on <u>Padlet</u>.

Funding Opportunities from Adams County Health Department



## American Rescue Plan Act Funds Tranche II

In 2023, the Adams County Board of County Commissioners allocated almost \$9 million ARPA Tranche II funds to support the Behavioral Health Services and Supports Assessment and the following behavioral health strategies:

Training and Stigma Reduction Funds (\$1.6 M)

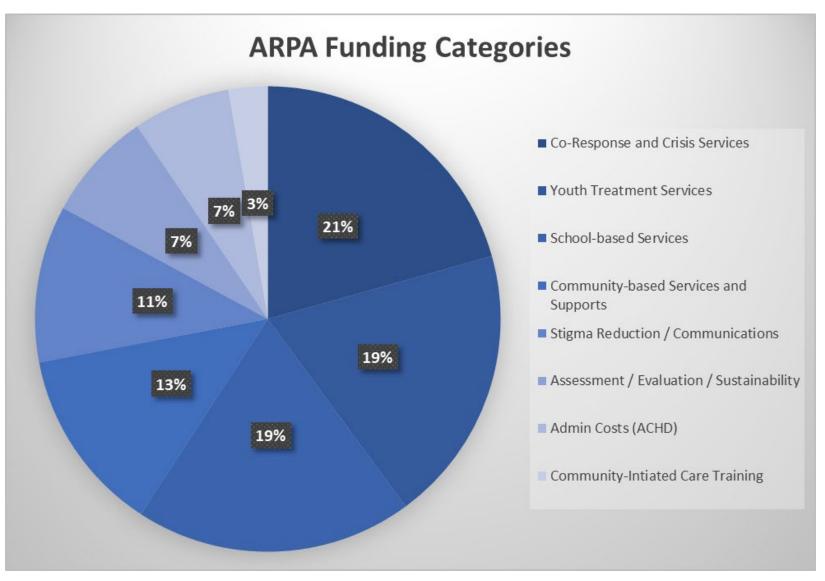
**Co-Responder Programming Funds (\$1.9 M)** 

Behavioral Health Services and Supports Funds (\$4.2 M)

Strengthening Families Funds (\$1.1 M)



**TOTAL FUNDING AMOUNT\*:** ~\$7,780,000



\*These funding categories do not include the \$1.1 M allocated to Strengthening Families Partnership

### **Co-Responder Response Funds (\$1.9 M)** *Notice of Funding Opportunity and Request for Application*

Competitive Co-Responder Grants to address co-responder programming gaps

Request for Applications process to select a third-party experienced vendor to support evaluation and sustainability planning

Co-Responder NOFO		
LIVE LAUNCH!	May 15 <sup>th</sup> – June 16 <sup>th</sup>	
Virtual Information Session	May 22 <sup>nd</sup>	
Proposal Scoring	by June 26 <sup>th</sup>	
BOCC Approval and Award Ceremony	August 6 <sup>th</sup>	
Kick-off Meeting w/Grantees	August 22 <sup>nd</sup>	

### **Co-Responder Evaluation/Sustainability RFA**

Est. Release/End Date	May 15 <sup>th</sup> – June 16 <sup>th</sup>
Application Scoring	by June 26 <sup>th</sup>
Kick-off Meeting w/Grantees	August 22 <sup>nd</sup>

Behavioral Health Service and Support Response Funds (\$2.5M) Notice of Funding Opportunity

Competitive Community-based and School-based Grants to address BH services and supports gaps (\$2.5 M)

BH Services and Supports NOFO		
Pre-launch Information Session	May 29 <sup>th</sup>	
Est. Release/End Date	June 5 <sup>th</sup> – July 14 <sup>th</sup>	
Proposal Scoring	by July 31st	
BOCC Approval and Award Ceremony	Q3/Q4	
Kick-off Meeting w/Grantees	Q3/Q4	

# **Questions?**

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# Examples of High Impact Behavioral Health Strategies in Adams County

#### SOCIAL & INSTITUTIONAL Inequities

Socioeconomic forces; Structural racism; Systems of power and priviledge; Political forces

#### Figure 1: Behavioral Health Services Continuum

#### EARLY IDENTIFICATION & INTERVENTION

Screening, assessment and diagnosis; Integrated care services

#### COMMUNITY-BASED SERVICES & TREATMENT

Outpatient mental health and substance use disorder treatment; Day treatment; Wraparound services; Partial hospitalization; Intensive outpatient mental health; Substance use disorder treatment

#### **CRISIS CARE**

Withdrawal management services; Walk-in crisis services; Co-responder programs; Mobile crisis care; First responders; Emergency departments

THE WHOLE PERSON HEALTH CONTINUUM

#### LIVING CONDITIONS

Physical environments; Social environments; Work environments; Service environments

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#### ACUTE & RESIDENTIAL CARE

Step-down services; Behavioral health residential services; Inpatient services; Hospitals; Hospital alternatives; Intermediate care facilities for individuals with developmental disabilities

Adapted from the Colorado Behavioral Health Administration Strategic Plan

COMMUNITY HEALTH

**PROMOTION & PREVENTION** 

Education; Universal

and tailored prevention;

Outreach; Engagement



# **Featured Panelists**

Samantha Decker, School Policy and Prevention Specialist | <u>sdecker@adcogov.org</u>

Madison Soukup, Mental Health Promotion Specialist | <u>msoukup@adcogov.org</u>

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Fran Babrow, Mental Health Promotion Specialist | <u>fbabrow@adcogov.org</u>

Ellen Velez, Harm Reduction Associate Manager | <u>evelez@adcogov.org</u>

# A Shared Risk and Protective Factors Approach

Shared risk and protective factors refer to the common influences that can either increase (risk factors) or decrease (protective factors) the likelihood of a specific outcome (ex: substance misuse).



By identifying and addressing these shared factors across these levels, prevention efforts can be more targeted and effective in addressing complex health outcomes.

# SRPF: Youth Engagement

### What is a Youth Engagement Approach?

 Involving youth in decision-making processes, planning, program development, and implementation

#### **Youth Engagement Core Principles:**

✓ Empowerment, Inclusivity, Authenticity, and Collaboration

#### **Strategies & Techniques:**

✓ Peer Education, Youth-led Initiatives, Youth Advisory Boards/Councils

#### Impact & Benefit:

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 ✓ Increased Program Effectiveness, Greater Community Ownership, Enhanced Youth Leadership Skills, Pipeline to the Public Health Workforce

# **SRPF: Youth Engagement**

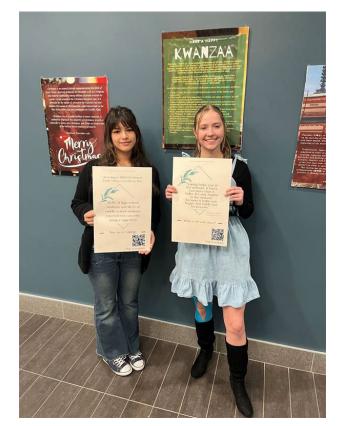
Applying a Shared Risk and Protective Factors and Youth Engagement Approach to Substance Use Prevention – Integrating Youth into Our Work

Examples of Current Youth Engagement

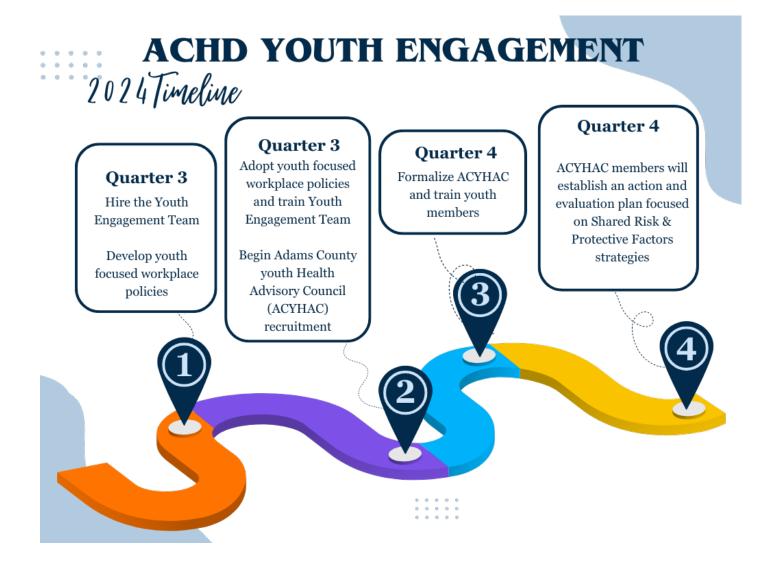
 ✓ Internal School Task Force, Communities That Care, Classroom Education, Legislation/Advocacy

Success Stories:

- ✓ Youth Testified at the Capitol on Tobacco Bill
- ✓ Youth-led Tobacco Cessation Posters



# **SRPF: Youth Engagement**





# SRPF: Stigma Reduction through the Community Mental Health Ambassador Model

# Metro Denver Partnership for Health: Mental Health Ambassadors Program

- ✓ Direct funds from Adams County Health Department for stigma reduction
- ✓ 17 partner organizations engaged 6 funded by ACHD
- ✓ Organizations serve diverse populations: LGBTQ+, BIPOC, Muslim, Ethiopian, AANHPI, Immigrants



## ADAMS COUNTY THRIVING COMMUNITIES COLLECTIVE Creating a Healthier Future Together

The Adams County Thriving Communities Collective (ACTCC) is organized by the Adams County Health Department and is made up of:

- Community residents
- Community-based organizations
- Adams County employees

### What has the Collective been working on?

Beginning in Spring 2023, ACHD met with community residents, community-based organizations, and Adams County employees to identify Adams County's health priorities and being to develop the **Community Health Improvement Plan (CHIP)** for the next 5 years.

After many meetings, focus groups, community surveys, and discussions, common themes emerged and the group voted in December 2023 to focus on three **CHIP priority areas**:

## Economic Security

Housing

### Access to Care

## Adams County Community Health Priority Areas





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### **Economic Security**

**Vision**: In a thriving Adams County, there are equitable, reliable, and resilient economic opportunities, including assistance as needed, for all people to build a financial future that can adapt to changes in the economy and needs across the lifespan and benefits future generations.



### Housing

**Vision**: In a thriving Adams County, housing is accessible, affordable, and high quality for all, cultivating a healthy, inclusive, and flourishing community where residents can remain in place and live with dignity.

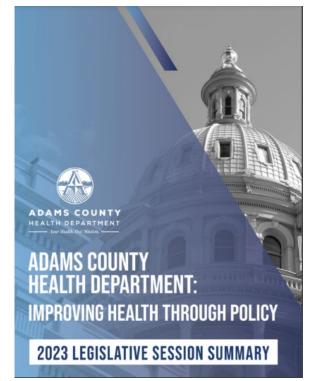


### Access to Care

**Vision**: In a thriving Adams County, every individual has access to timely, compassionate, and culturally-appropriate, whole-person health care.

# **Policy & Behavioral Health**

- ✓ Policy to improve population health
- ✓ ACHD policy engagement
- o SB24-001: Continue Youth Mental Health Services Program
- SB24-007: Behavioral Health First Aid Training Program
- SB24-034: School Based Health Centers
- HB23-1009: Secondary School Student Substance Use (Became Law)
- o HB23-1153: Pathways to Behavioral Health Care (Became Law)
- H.R. 3073: Community Mental Wellness and Resilience Act of 2023
- ✓ Blueprint as guiding document in 2025 and on





# Harm Reduction Services

**Harm Reduction** is a set of strategies aimed at reducing risks related to substance use. We acknowledge that drug use exists in our community. ACHD provides resources to minimize negative impacts, while promoting health and autonomy.

### Services include:

- Naloxone distribution & overdose prevention
- HIV, Hepatitis C and STI Testing
- Safe sex education and resources, i.e.: condoms
- Syringe access & safe use supplies
- Referral & navigation to behavioral health and substance use services



# **Co-Responders Community of Practice**



ACHD convenes a **Community of Practice** (CoP) for all Adams County co-responder programs to share best practices, lessons learned and standard evaluation tools that inform sustainability.

### **Community of Practice Goals and Objectives:**

- Co-response services' reach and impact will have increased, and best practices will have improved
- CoP participants will have developed a "playbook" of tools that reflect learnings and program improvement strategies
- ✓ Co-Responder programs will have completed a tailored evaluation and sustainability report by the end of 2026

# Looking Ahead Together



https://www.surveymonkey.com/r/SWNNQR9





# **Contact Information**

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### **LEARN:**

- ✓ Colorado I Matter Program
- ✓ Adams County Mental Health Resources

## ACT:

- ✓ Mental Health Awareness Bingo!
- ✓ Adams County Behavioral Health Services and Supports Assessment: A Blueprint for Action

## **ADVOCATE:**

✓ Wear Green on May 16<sup>th</sup> – MH Awareness Day
 ✓ Mental Health America toolkit

# **Questions?**



## ADAMS COUNTY

### HEALTH DEPARTMENT

Your Health. Our Mission.

behavioralhealth@adcogov.org