Fort Collins: Police Force Using Specialized Training in Mental Health

OVERVIEW
Fort Collins, Colorado is the fourth-largest city in the state, with a population of nearly 168,000. Seventeen percent of Fort Collins’ residents live below the federal poverty level; higher than the state-level poverty rate of 10.3 percent. Meanwhile, the statewide overdose death rate is 17.6 per 100,000 population, 33rd highest in the nation.

Fort Collins has developed a number of innovative programs that target the intersecting challenges of substance use disorder (SUD), homelessness and mental health issues. This case study focuses on the Fort Collins Police Services (FCPS) mental health co-responder program and presents key takeaways for cities and counties considering similar initiatives.

PROGRAM DESCRIPTION
Fort Collins Police Force Mental Health Co-Responder Program

Beginning in 2019, the FCPS partnered with SummitStone Health Partners (a community mental health care provider) and the University of Colorado Health System (UCHS) to create a new response model for mental health-related police calls. The resulting mental health co-responder program facilitates a more coordinated approach to mental health-related police calls by helping to divert individuals away from emergency healthcare or the criminal justice system and into appropriate treatment services.

The mental health co-responder is a licensed professional counselor and addiction specialist with experience working with justice-involved individuals. The mental health co-responder works in a variety of settings and responds to mental health related emergency calls with FCPS officers. The co-responder receives dual-track training from SummitStone in trauma-informed care and
Fort Collins: Police Force Using Specialized Training in Mental Health

from FCPS in police protocols to prepare for their role as a crisis responder.

Upon arriving at the scene of a 911 call, the mental health co-responder assesses the situation by interviewing the individual and any family or friends who are present. In typical emergency encounters, individuals experiencing a mental health crisis are taken to a hospital emergency department (ED). Through Fort Collins’ collaborative approach, the mental health co-responder assesses the individual’s unique needs and connects them with the most appropriate services.

As an alternative to the ED, the mental health co-responder may refer individuals experiencing a mental health, domestic abuse or substance use crisis who can be treated in an outpatient setting to SummitStone Health Partners’ 24/7 walk-in clinic. Crisis services available at the clinic include screening, crisis intervention and de-escalation; follow-up care, such as clinical and psychiatric assessments, medication evaluation, therapy, peer support and case management services; and referrals to mental health and addiction treatment services.

RESULTS

In the first month following the implementation of the co-responder program, the program responded to 76 incidents. Due to the demand for the program’s services within its first year, the Larimer County Sheriff’s Office is in the process of selecting another mental health specialist to form a second co-responder team. Although the program is in its infancy, city leaders expect the program to improve outcomes for people experiencing mental health, substance use and homelessness challenges in Fort Collins and throughout Larimer County, and have committed to expanding co-responder programming.

FINANCING AND SUSTAINABILITY

The FCPS, SummitStone Health Partners and UCHS collectively fund the mental health co-responder program. Major budget items for the mental health co-responder program include salary ($30 per hour) and benefits; equipment, including a computer and phone; and access to a company vehicle.

The city of Fort Collins receives funding for its co-responder program through multiple sources. The Colorado Department of Human Services Office of Behavioral Health initially granted the Board of Larimer County Commissioners $397,428 to help fund the program. The city itself contributes $100,000 annually (an increase from $80,000 in the first three years). Contributions are also made by the Colorado Nonprofit Development Corporation, and numerous foundations and third-party entities. Additionally, in recognition of its direct benefit from the program, UCHS contributes $20,000.

In a show of community support for Fort Collins’ broad goals around emergency response and crisis stabilization, Larimer County voters passed a ballot initiative to levy a tax increase to continuously fund the program in November 2018. Funds from the .25 percent tax (25 cents per $100) will be used to create a treatment and detox facility for Fort Collins and its neighbor, Loveland, CO, facilitate the coordination of multiple services and providers, and expand and enrich county-wide behavioral health services. This includes the city budget for the mental health co-responder. Over the 20-year duration of the tax, the county expects to generate between $15,700,000 to $19,000,000 annually to support the facility’s construction, operations and service delivery.
COLLABORATION ACROSS SYSTEMS

The mental health co-responder program would not be possible without the coordinated effort and support of numerous community partners. Key organizations and alliances include:

Outreach Fort Collins
Outreach Fort Collins is an outreach program intended to keep the downtown area safe and welcoming while connecting the community’s most vulnerable to the services and supportive networks they need. Outreach Fort Collins’ professional mobile response team de-escalates and resolves conflicts involving individuals experiencing homelessness, streamlines referrals and supports first responders. In addition to responding to crises, the organization proactively engages with residents at risk of or currently experiencing homelessness. This outreach program is distinct from the FCPS co-responder program in that it is community-rather than first responder-driven, focusing primarily on individuals experiencing homelessness, and operating in the downtown area. Nevertheless, clients of Outreach Fort Collins may also interact with the FCPS co-responder program and vice versa. Additionally, Outreach Fort Collins works closely with the city’s transitional sentencing program to connect formerly incarcerated individuals to appropriate services so that they may re-enter the community with better support.

The Murphy Center
The FCPS-run Murphy Center is a “one-stop-shop” for services that support those experiencing homelessness, facilitating collaboration among 20 agencies that collectively offer 40 programs and services. It serves over 160 individuals per day and over 40,000 annually. Services include access to everyday necessities, such as showers and food, as well as benefits enrollment, health screenings and medical referrals. In partnership with the city and multiple community stakeholders, the Center facilitates the Housing First initiative, providing case management for highly-vulnerable individuals and serving as a data collection tool for the city.

Interagency Workgroup
Fort Collins’ interagency workgroup meets monthly to align the crisis response protocols among the city’s various agencies. Because so many frequent users rely upon services from the workgroup’s 27 participating agencies, communication among them allows for coordinated responses. For example, the Murphy Center, Outreach Fort Collins and the mental health co-responder work in distinct areas of the Fort Collins area to avoid duplication of efforts and resources. The groups interface at the workgroup meetings to ensure their efforts are aligned.

Other members of the Workgroup include community mental health and social services providers, and experts in criminal justice, psychiatry and other related fields.
Fort Collins: Police Force Using Specialized Training in Mental Health

ROLE OF CITY LEADERSHIP

While the idea of bringing in a mental health first responder into the police force was first met with skepticism, city leadership strongly supported the goal of creating a strategy to address homelessness, substance use and mental health crises. City leadership advocated among local providers, agencies and other stakeholders to build support for and increase participation in the development of a comprehensive approach to emergency response and crisis stabilization for vulnerable populations. Cities throughout Colorado have since taken up similar positions and models.

KEY TAKEAWAYS FOR CITY LEADERS

For city leaders considering similar approaches to addressing SUD, homelessness and mental health challenges, there are several key lessons that can be learned from the FCPS mental health co-responder program and its collaboration with other stakeholders and programs.

Integrate mental health specialists into the police force. Police officers’ job descriptions and training are not ideally suited to mental health calls. Responding to these calls imposes unique stresses on officers, and appropriate responses require an understanding of multiple interrelated systems. With the addition of a mental health specialist in the force, officers can learn to respond more effectively to these calls while community members in need can receive immediate, effective care and case management.

Create community partnerships. Especially in cities for which mental health crises are a significant public issue, potential partners may already exist within the community. Partnering with these agencies not only streamlines efforts but also creates the opportunity to align protocols among these entities to improve the experience for those in need.

Understand data needs and limitations early on. It can be difficult to extract meaningful information about a program from different agencies using multiple data collection processes. In Fort Collins, substantial data related to mental health needs were available, but information that was beneficial to the FCPS was difficult to discern. To capture data that not only paralleled but reflected those gathered by SummitStone and other mental health providers, FCPS began coding mental health responses and educating its officers about how to use this system to track mental health-related calls. Understanding which data are needed for self-assessment, which are available, and how these data are handled by various agencies can expedite the process of establishing effective data collection and analysis.

Align protocols among agencies. Fine-tuning officers’ call response protocols, as well as educating officers about these protocols, is essential to keeping an integrated crisis-response model efficient. FCPS aims to provide officers with concrete protocols and the rationales behind them. In line with these expectations, FCPS also educates officers about mental health first aid to prepare them to provide the initial stabilizing care that may be necessary to get an individual safely to a mental health care provider. Providing this information enables officers to be efficient with their calls and act as useful partners for their mental health care colleagues.

Standardize data collection and entry to facilitate data-sharing. In the initial phases of implementation, Fort Collins’ interagency workgroup struggled to collect the data
needed for self-assessment. Improving the program requires information about resource allocation, the number of officers required on calls, and how officers spend their time. These data are difficult to collect. Police officers may code mental health calls similarly, but hospitals and mental health centers have different codes for related care; the exact information collected may also differ. To solve this problem, workgroup leaders worked with agency data analysts from Fort Collins, Larimer County, and Loveland to hone in on what information was needed and to set up the systems to efficiently obtain that information.

**Address burnout and compassion fatigue.**

To ensure safety, police officers in Fort Collins are always the first responders to the scene so that they can stabilize and provide an initial assessment of the situation. However, mental health cases require a somewhat different set of coping strategies than officers’ other calls. Responding to these calls can wear on the officers, who have not necessarily built the resiliency necessary to respond to mental health calls. To help prevent burnout, Fort Collins has taken a number of measures:

- Spreading out the mental health caseload among many officers limits individual exposure to challenging calls. The mental health co-responder rides with different officers at different times, and she sometimes dispatches on her own, so that she can step in quickly once the situation is stabilized.

- Providing police officers with CIT and related education about mental health first aid helps officers both in responding to mental health calls and also in adopting stress-reducing self-care habits.

**Identify community champion(s).** Having a champion with a vision for the program makes accessing relationships, meeting spaces and communication channels easier, especially when the champion has an existing platform or audience with key players in the region. Champions can also help build momentum whether programs are in development, being implemented or being maintained, encouraging a wide array of stakeholders to work together toward a common goal.
ENDNOTES

1. U.S. Census Bureau, Fort Collins city, Colorado; Colorado, Quick Facts, available at: https://www.census.gov/quickfacts/fact/table/fortcollinscitycolorado,CO/PST045218

2. U.S. Census Bureau, Colorado, Quick Facts, available at: https://www.census.gov/quickfacts/CO


11. Murphy Center for Hope, Rebuilding One Life at a Time, Homeward Alliance, available at: https://www.murphycenter.org/

12. Murphy Center for Hope, Our Services, Homeward Alliance, available at: https://www.murphycenter.org/our-services/

13. Murphy Center for Hope, Outcomes, Homeward Alliance, available at: https://www.murphycenter.org/outcomes/