“When working with jails you need to clarify that we are here to help you and your staff.”

Project Background, Vision, and Outcomes

In 2011, Colorado established the Jail-Based Behavioral Health Services (JBBS) program to oversee behavioral health contracts and provide technical assistance for the delivery and coordination of jail-based mental health, substance use, and co-occurring treatment services for the 46 jails in Colorado. Colorado wished to expand and enhance the current JBBS to provide targeted technical assistance for up to six rural jails to assist them with their population with serious mental illness (SMI), assess the quality of their services and overall service provision, and evaluate referral and linkages processes. Colorado also partnered with the University of Colorado to create and facilitate an integrated peer support community to foster successful implementation of best practices and the sharing of team successes, barriers, lessons learned, and problem solving amongst the participating jails. The vision expanded during the funding period to include more community outreach than originally intended, which was reported as helpful for establishing and strengthening relationships and creating a continuity of care pipeline for patients.

Outcomes included the establishment of biweekly meetings with the six participating jails (measure of engagement); the creation of a more consistent intake process; improvement with Medicaid enrollment at time of reentry; and the implementation of warm handoffs through peer recovery specialists. Additionally, one of the project outcomes was the development of an intake process map and this activity will continue to inform and frame the JBBS program (Figure 1). More information and up-to-date resources can be accessed on the JBBS resource page at: https://bha.colorado.gov/behavioral-health/jbbs

Project Implementation: Challenges and Lessons Learned

Challenges during the project period included troubles with hiring providers, the Transformation (continued)
Transfer Initiative (TTI) award’s short time limitations, limiting SMI inclusion criteria, and barriers to hiring peer support specialists. To overcome some of these challenges, Colorado stated that additional planning time before implementation as well as the expansion of SMI inclusion criteria for other behavioral health populations such as those with substance use disorders would be helpful. More funding and more flexibility for case exemptions for peers undergoing background checks would help address other challenges.

Additionally, the ongoing Covid-19 pandemic limited physical access to jails and prevented in-person meetings. However, the latter turned into a positive because learning communities, etc. were moved to virtual platforms and that greatly improved attendance, particularly from people who lived far from Denver.

Sustainability and Project Legacy

The TTI funds were used to enhance the continuity of care already established by the JBBS project to reach people in rural and frontier jails who would be returning to the community. When TTI funding ends, Colorado plans to provide ongoing facilitation with the jails to support them in the adoption of peer recovery and patient care coordination models. The project legacy highlights that TTI funding helped establish good processes with the jails including ongoing learning communities with various speakers and training sharing best practices on diverse topics.

Health Equity

This project was designed to address the needs and improve equity of people with mental illness, substance use, or co-occurring disorders in rural and frontier jails preparing to return to the community; both legal-involved and rural/frontier health patients represent marginalized groups.

Peer Services Utilization

Peer support services are incorporated into the JBBS program, and peers have been added as a paid role though JBBS and other counties. Colorado is still navigating background check barriers so that peers can gain on-site access to jails.

Trauma Informed Care

The JBBS program was established as a trauma-informed program, and remained trauma informed throughout the TTI funding period.

For further information about this project contact Danielle Culp at danielle.culp@state.co.us or Kelley Russell at kelly.russell2@state.co.us.

This work is licensed under Creative Commons Attribution-ShareAlike 4.0 International License (CC BY-SA 4.0) unless otherwise stated or superseded by another license. You are free to share, copy, and remix this content so long as it is attributed, and done so under a license similar to this one.

This work was funded by the Substance Abuse & Mental Health Services Administration under Contract HHSS283201700024I75S20321F42001, Task 5.4., and the National Association of State Mental Health Program Directors (NASMHPD), Inc.