

Behavioral Health Recovery Act (BHRA) and RHC Projects

Regional Health Connectors (RHCs) are a community-embedded workforce that connect the systems that keep us healthy. Serving as trusted local conveners, RHCs work within 21 regions across Colorado building relationships between primary care, behavioral health, social and human resources, and community assets to form a statewide network of public health and health resources.



In 2021, the program received funding through Colorado Senate Bill 137 **to improve behavioral and mental healthcare systems**. Each RHC conducted a local needs assessment of their Region by analyzing national, state, and local data to **identify priority gaps in behavioral and mental health services**. Based on this data, the RHCs proposed projects intended to address these priority gaps and **improve health equity using local knowledge, services, and assets**. They are supported in these efforts by their local host organizations and community partners.

Key Highlights

- Needs assessments were completed by end of November 2021.
- Action plans will be implemented February – June 2022.
- All RHC BHRA projects focus on one of four dimensions of behavioral and mental health system support: prevention, intervention, treatment, recovery.



Through these projects, **all RHCs are addressing health equity in their communities** by supporting specific populations for which the data indicates have insufficient access to mental and behavioral health services. These populations include:

- Young people and adolescents (Regions 2, 4, 7, 8, 16, and 18)
- Racial and ethnic groups, specifically Latino/a, American Indian and Alaska Native, and Afghan refugee populations (Regions 2, 9, 12, 14, and 18)
- LGBTQ+ (Regions 4 and 16)
- People in recovery or seeking recovery from substance use disorders (Regions 13 and 19)
- Rural and frontier (Regions 1 and 5)
- Health First Colorado (Medicaid) members (Regions 14, 15 and 20)
- Veterans (Region 6)
- Men in high-risk industries (Region 11)
- People seeking political asylum in the United States (Region 14)
- People for whom English is not their first language (Region 14 and 21)

Additionally, Regions 4, 9, and 10 are focusing on supporting medical, behavioral, and mental health providers.

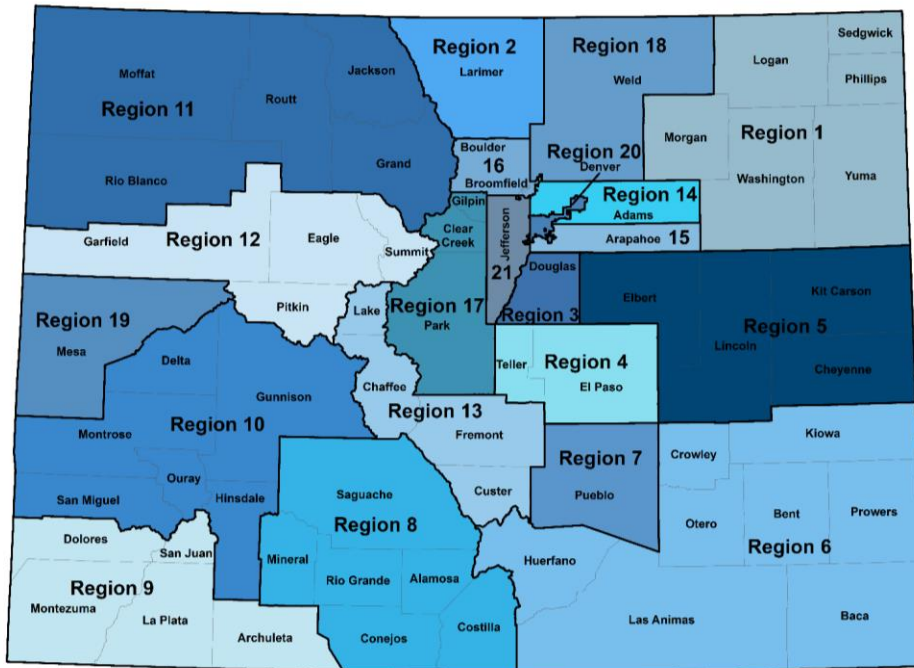
All BHRA plans have **1-3 goals that prioritize inclusion** of the populations listed above in the design and implementation of action plans.

Updated March 29, 2022

Regional Health Connector Behavioral Health Recovery Act Projects Implementation Period: February – June 2022



COLORADO
REGIONAL HEALTH CONNECTORS



Pictured Left:

Map of the 21 regions where Regional Health Connectors live and work in Colorado.

Regions are based on Colorado Department of Health & Environment’s [health statistics regions](#).

REGION 1
Logan, Morgan, Phillips, Sedgwick, Washington, Yuma

RHC/HOST ORGANIZATION
Erika Greenberg
Centennial Area Health Education Center

AREA OF FOCUS
Intervention

POPULATION OF FOCUS: Rural communities in RHC region (including medical providers and community members)

IDENTIFIED GAP: Lack of providers and use of resources in the region

PROPOSED SOLUTION

- Evidence-based workshop series for healthcare and behavioral health professionals, recovery coaches, social workers, law enforcement, students, loved ones, and community members to address [“Overcoming Addiction Together”](#).
- Catalyze community movement to support behavioral health in region.

Regions 1 and 5 are coordinating on this project.

REGION 2
Larimer

RHC/ HOST ORGANIZATION
Gena Duran
North Colorado Health Alliance

AREA OF FOCUS
Prevention

POPULATION OF FOCUS: Latino youth in Estes Park school district

IDENTIFIED GAP: Culturally relevant prevention education and family support

PROPOSED SOLUTION: Piloting evidence-based [Familia Adelante](#) program in the Estes Park school district with Latino youth.

Gena is also the Region 18 RHC and is implementing a similar project.

REGION 3

Douglas

RHC/HOST ORGANIZATION

TBD

Currently seeking a contractor for this position. Please contact [Gillian Grant](#) for more details if interested.

REGION 4

El Paso, Teller

RHC/HOST ORGANIZATION

Susan Garrett

THEARI

AREA OF FOCUS

Part A: Treatment

POPULATION OF FOCUS: LGBTQ+ youth

IDENTIFIED GAP: Access to safe and affirming behavioral health care to address the disproportionately high suicide rate.

PROPOSED SOLUTION:

- Educate primary care providers about the increased risk for suicide among LGBTQ+ youth and the need for safe and affirming behavioral health care.
- Develop an easily accessible method of locating safe and affirming behavioral health providers serving LGBTQ+ youth.

Susan will be supported by the Region 17 RHC, Jamie Fanselow, and h THEARI's AmeriCorps volunteers.

AREA OF FOCUS

Part B: Prevention

POPULATION OF FOCUS: Health care providers

IDENTIFIED GAP: Resilience resources that can be integrated into the workflow and do not place additional burdens on the healthcare workforce.

PROPOSED SOLUTION: Build and promote a toolkit of evidence-based practices (mindfulness, gratitude, physical activity, focused breathing) that can be integrated into the workflow for health care workers.

REGION 5

Cheyenne, Ebert, Kit Carson, Lincoln

RHC

TBH

Centennial Area Health Education Center

AREA OF FOCUS

Intervention

POPULATION OF FOCUS: Rural residents in Elbert, Lincoln, Cheyenne and Kit Carson Counties

IDENTIFIED GAP: Behavioral health providers need more training on priority population specific needs and culture. Many of the priority populations have challenges accessing appropriate care because providers lack cultural competence to help engage and support them in treatment.

PROPOSED SOLUTION

- Evidence-based workshop series for healthcare and behavioral health professionals, recovery coaches, social workers, law enforcement, students, loved ones, and community members to address ["Overcoming Addiction Together"](#).
- Catalyze community movement to support behavioral health in region.

Regions 1 and 5 are coordinating on this project.

REGION 6

Baca, Bent, Crowley,
Huerfano, Kiowa, Las Animas,
Otero, Prowers

RHC/HOST ORGANIZATION

Christine Coffield
Otero County Health
Department

AREA OF FOCUS

Intervention

POPULATION OF FOCUS: Male Veterans ages 45-64 in Otero and Crowley Counties of Colorado

IDENTIFIED GAP: Access/awareness of mental and behavioral health resources for Veterans

PROPOSED SOLUTION: Promote and integrate mental and behavioral health supports and volunteer opportunities for Veterans into a community project, Ark Valley Kitchen of Kindness.

REGION 7

Pueblo

RHC/HOST ORGANIZATION

Hannah Kochen
Pueblo Department of Public
Health and Environment

AREA OF FOCUS

Intervention

POPULATION OF FOCUS: High-school age youth

IDENTIFIED GAP: Awareness of existing resources that support youth mental health, especially for high school age youth.

PROPOSED SOLUTION: Share information with providers in roundtables, connecting existing resources including Crisis Line, Community mental health center, providers, schools.

REGION 8

Alamosa, Conejos, Costilla,
Mineral, Rio Grande, and
Saguache

RHC/HOST ORGANIZATION

Dee Kessler
Rio Grande Public Health
Department

AREA OF FOCUS

Prevention

POPULATION OF FOCUS: Adolescents (age 10-14)

IDENTIFIED GAP: Substance Use Disorder (SUD) prevention and life skills training to promote mental health

PROPOSED SOLUTION: INTRODUCE THE PROSPER Partnership Model to San Luis Valley school districts and potential partners, and coordinate programs like Strengthening Families 10-14 and Botvin Life Skills train the trainer.

REGION 9

Archuleta, Dolores, La Plata,
Montezuma, San Juan

RHC/HOST ORGANIZATION

Imo Succo
Southwestern Colorado Area
Health Education Center

AREA OF FOCUS

Recovery

POPULATION OF FOCUS: American Indian/Alaska Native community

IDENTIFIED GAP: Culturally relevant education and training; Alternative cultural substance abuse peer recovery support

PROPOSED SOLUTION: Providing culturally relevant education and training to healthcare, behavioral health agencies, substance use and addictions counseling agencies, local non-profit organizations, community resource agencies, government entities and secondary school faculty and/or staff in southwest Colorado. As well as connecting priority population to resources and build community in non-AI/AN community, including connection to evidence-based peer recovery program, Wellbriety with White Bison.

REGION 10

Delta, Gunnison, Hinsdale,
Montrose, Ouray, San Miguel

RHC/HOST ORGANIZATION

Mary Burt
Tri-County Health Network

AREA OF FOCUS

Intervention

POPULATION OF FOCUS: Healthcare staff in Delta, Ouray, Montrose, San Miguel, Gunnison and Hinsdale Counties

IDENTIFIED GAP: Underutilization of the existing directory of evidence based Behavioral Health Interventions and resources by healthcare staff in San Miguel, Ouray, Montrose and Delta Counties. Directory needs to be updated and does not include resources to appropriately serve certain groups (such as Black, Indigenous, and People Of Color – BIPOC and Spanish speaking individuals).

PROPOSED SOLUTION: Update and expand the Tri-County Health Network’s online Behavioral Health Directory to all 6 Counties and promote this resource to the health clinics who participate in quality improvement programs and the communities they serve. Providing up to date resources and starting the conversation around Behavioral Health will promote mental wellness and support clinical transitions in a coordinated and culturally appropriate way.

REGION 11

Grand, Jackson, Moffat, Rio
Blanco, and Routt

RHC/HOST ORGANIZATION

Erik Plate
Northwest Colorado
Community Health Partnership

AREA OF FOCUS

Prevention

POPULATION OF FOCUS: Males, age 25-54 (prioritizing those who work in certain industries)

IDENTIFIED GAP: Adult prevention services for suicide, especially follow-up after an attempt

PROPOSED SOLUTION:

- Outreach strategy for business engagement for mental health education/awareness among employees.
- Provider referral/workflow project to address gaps in follow-up for suicide attempts.

REGION 12

Eagle, Garfield, Pitkin, Summit

RHC/HOST ORGANIZATION

Mari Plaza-Munet, with support from Namrata Shrestha

West Mountain Regional Health Alliance

AREA OF FOCUS

Prevention

POPULATION OF FOCUS: Latinx women with children

IDENTIFIED GAP: System gaps in providing resources to the Latinx community, specifically updated unified messaging for this population.

PROPOSED SOLUTION: Create and disseminate culturally relevant and translated messaging to normalize seeking behavioral health services for Latinx mothers and their children

REGION 13

Chaffee, Custer, Fremont, Lake

RHC/HOST ORGANIZATION

Mike Orrill

Chaffee County Public Health Department

AREA OF FOCUS

Recovery

POPULATION OF FOCUS: Adults in long-term recovery, aged 24-65

IDENTIFIED GAP: Access to peer recovery support groups

PROPOSED SOLUTION: Support expansion of the Peer Empowered Recovery Community Solutions (PERCS).

REGION 14

Adams

RHC/HOST ORGANIZATION

Greta Macey

Tri-County Health Department

AREA OF FOCUS

Intervention

POPULATION OF FOCUS: Afghan Humanitarian Parolees, Special Immigrant Visas (SIVs), and Asylees in Adams County

IDENTIFIED GAP: Limited long-term behavioral health options for refugees in Adams County. With a high volume of arrivals, an already limited system may not be able to meet the needs of families from Afghanistan.

PROPOSED SOLUTION: Design and implement peer support/peer mentorship for priority population mental health.

REGION 15

Arapahoe

RHC/HOST ORGANIZATION

Laura Don

Tri-County Health Department

AREA OF FOCUS

Intervention

POPULATION OF FOCUS: Individuals that attributed to a Primary Care Provider in Aurora (serving a significant percentage of Medicaid patients).

IDENTIFIED GAP: Provider awareness of and confidence in making referrals to clinical and non-clinical services, particularly for the Medicaid population.

PROPOSED SOLUTION:

- Increase understanding among providers with a significant Medicaid population in Aurora of the clinical and non-clinical resources available to support mental health.
- Create warm connections and referral processes between practices and outside behavioral health supports.

REGION 16

Boulder, Broomfield

RHC/HOST ORGANIZATION

February Hall

THEARI

AREA OF FOCUS

Prevention

POPULATION OF FOCUS: LGBTQ+ youth and young adults aged 14-30

IDENTIFIED GAP: Community-based, peer-led suicide prevention specifically for LGBTQ+ young adults and high-school aged-youth.

PROPOSED SOLUTION: Expanded suicide-prevention training through key organizations.

REGION 17

Clear Creek, Gilpin, Park

RHC/HOST ORGANIZATION

Jamie Fanselow

THEARI

AREA OF FOCUS

Prevention

POPULATION OF FOCUS: Rural adult caregivers, early learning/youth program support staff, and school district staff.

IDENTIFIED GAP: Adults who care for mountain communities need resources that strengthen self-care skills and skills for supporting the needs of youth/children.

PROPOSED SOLUTION:

- Connect adults supporting youth/children to supportive mental health programming.
- Increase effectiveness of the promotion of existing and new behavioral health services.

REGION 18

Weld

RHC/HOST ORGANIZATION

Gena Duran

North Colorado Health

Alliance

AREA OF FOCUS

Prevention

POPULATION OF FOCUS: Latino youth in Johnston-Milliken school district

IDENTIFIED GAP: Culturally relevant prevention education and family support

PROPOSED SOLUTION: Pilot evidence-based [Familia Adelante](#) program in the Johnston-Milliken school district with Latino youth.

REGION 19

Mesa

RHC/HOST ORGANIZATION

Jackie Sievers, with support
from Jeff Stoddart
Quality Health Network

AREA OF FOCUS

Intervention

POPULATION OF FOCUS: People presenting to the Emergency Department for SUD, especially alcohol

IDENTIFIED GAP: Overuse of Emergency Departments for behavioral health and SUD issues.

PROPOSED SOLUTION: Support Peer 180 to place Peer Recovery Coaches in Emergency Departments (ED) to link people in the ED with immediate support and resources regarding recovery programs to reduce future use of the ED for SUD issues.

REGION 20

Denver

RHC/HOST ORGANIZATION

Kim McDevitt
Mile High Health Alliance

AREA OF FOCUS

Intervention

POPULATION OF FOCUS: Neighborhoods of Southwest Denver, including: Sun Valley, Valverde, Villa Park, West Colfax, Westwood, College View-South Platte, Ruby Hill, Barnum (specifically Medicaid populations)

IDENTIFIED GAP: Significant shortage of BH providers who accept private insurance, Medicaid, or sliding-scale fees.

PROPOSED SOLUTION: Close the gap between primary care screening and access to behavioral health/mental health treatment by offering primary care providers information on non-clinical community-oriented resources.

REGION 21

Jefferson

RHC/HOST ORGANIZATION

Cynthia Farrar
Jefferson County Public Health

AREA OF FOCUS

Intervention

POPULATION OF FOCUS: Non-English-speaking individuals looking to access behavioral health services through their primary care providers

IDENTIFIED GAP: Access to mental health resources that are relevant or preferred by non-English speaking patients

PROPOSED SOLUTION: Creating warm connections between primary care and behavioral health may address the gap in completed referrals for mental health services.

The work of the RHCs would not be possible without the partnership and collaboration of the RHC host organizations across the state. We'd like to extend our thanks and appreciation to these local organizations who support the mission and vision of the RHC Program.

For more on the RHC program, and how to connect with a RHC by Region,

visit our website at: www.regionalhealthconnectors.org

