BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM EXPANSION

Planning and Design

- 1. Identify Goals
 - a. Improve outcomes for people experiencing behavioral health crises
 - b. Enhance integrated systems of behavioral health response & support
 - c. Safely reduce unnecessary law enforcement dispatches
- 2. Identify population we intend to serve
- 3. Research elements of successful programming
 - a. Program components
 - b. Resources needed personnel, vehicles, community supports
 - c. Consider Cost vs. Return on Investment
- 4. Collect data to understand the problem(s) and potential points of intercept
- 5. Identify current resources, processes, and then assess community capacity
 - a. Dispatch call centers (911 and Crisis Line)
 - b. Outreach and Engagement Teams (HOT, CORS, MCOT, DCR)
 - c. GRACE and LEAD
 - d. Community Paramedicine/Integrated Health Response programs
 - e. Behavioral Health Law Enforcement personnel
 - f. Intensive Behavioral Health programs (PACT, IOP)
 - g. Specialty Courts (Mental Health and Drug Court)
 - h. Personnel expertise and availability
 - i. Create flow chart of current crisis response programs/connections/linkages
- 6. Determine what/where/how existing programs may align to achieve goals
 - a. Build upon current programs, services, and response systems
 - b. Create bridges or new alignments among programs
 - c. Establish Crisis Stabilization Center as the hub
 - d. Identify and confirm Behavioral Health and Social Service partnerships
- 7. Determine what services/programs may need to be created anew
- 8. Engage stakeholders and funders
- 9. Develop program/services and budget
- 10. Recruit Providers