

Mental Health and Substance Use Alliance

A collective of community members and agencies working to improve behavioral health in our community.

ONE-YEAR PROGRESS REPORT

mhsu alliance
— of larimer county —

Acknowledgments

As we celebrate one year of progress on our strategic plan, we'd like to acknowledge our members — all the people and community organizations informing and leading our work. Many have stepped up to be part of the Mental Health and Substance Use Alliance, and our membership is currently 92 strong and growing. We'd also like to thank and recognize our current Steering Committee members, who guide the Alliance as our decision-making body.

The following people and organizations provide collective leadership and drive progress on our Strategic Plan:

Lived and living experts

Kristy Brewbaker
Isabel Serafin
Bryan Sutherland

Poudre School District

Whitney Bennett-Clear
Kelly Glick
Shayna Seitchik

The Yarrow Collective

Mia Campbell

SummitStone Health Partners

Cyndi Dodds

Bridges of Colorado

Emily Drake

UCHealth – Behavioral Health

Daphne Huegerich

Larimer County, Community Justice Alternatives

Emily Humphrey

Thompson School District

Shannon Jenkins

Health District

Alyson Williams (interim)

North Colorado Health Alliance

MJ Jorgensen

Larimer County, Behavioral Health Services

Amy Martonis

Alliance for Suicide Prevention

Rachel Olsen-Towlen

Housing Catalyst

Carri Ratazzi



The Mental Health and Substance Use Alliance (the Alliance) is facilitated and supported by the Community Impact Team at the Health District. To learn more, please visit healthdistrict.org.

Get Involved, Stay Informed, Join a Workgroup

We'd love your help! We're inviting community members to join the Alliance and participate in our workgroups. No expertise required — just your interest and unique perspective.

Want to stay informed? Become an Alliance Member to get our latest updates and newsletters.

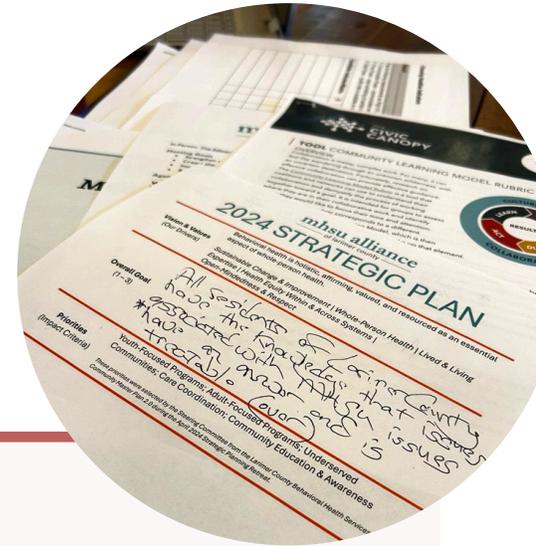
Get involved by emailing us at CIT@healthdistrict.org or filling out our interest form: bit.ly/JoinTheMHSUAlliance.

Everyone is welcome! Your voice matters in making Larimer County's behavioral health system stronger.

Six-Month Summary

Note: Since the launch of the 2024 Strategic Plan in October 2024, the Alliance has been publishing six-month progress reports to track and share our advancements. Moving forward, these reports will be published annually.

This Annual Strategic Plan Progress Report was prepared by Hannah Groves, Shelley Marie, Alyson Williams, the Communications Team and others at the Health District who support the Alliance. It represents the time and effort by Alliance Members from May to October 2025.



Key Achievements

Steering Committee Retreat builds momentum

During a June retreat, we focused on deepening relationships, building shared understanding and aligning around a common goal for the Alliance. Together, members explored ideas to guide our shared measurement approach and helped shape the final components of our strategic plan.

Strategic Plan completed

Thanks to the insights and direction from the retreat, we finalized the MHSU Alliance Strategic Plan in August 2025.

First workgroup kickoff and strategy development

This summer, we launched our first workgroup focused on promoting behavioral health through nonclinical methods. The group has begun a learning and strategy-development process, working to design locally tailored solutions.

The Steering Committee plans to adopt the strategies in early 2026, turning vision into action.

Workgroup Updates

The Alliance has identified four focus areas, alongside policy, to enhance behavioral health in Larimer County: Coordination of Care, Data Infrastructure, Clinical Systems, and Infrastructure and Policy. The first workgroup has started to hold meetings, and we're in the recruitment and planning phases of developing workgroups to develop localized strategies for each area. Alliance staff are working diligently with other community groups and agencies to de-silo and align efforts for efficiency and impact.

Alliance Staff Strategy Updates

Supporting the Alliance

Alliance staff have been organizing meetings, sending updates and helping with outreach, recruitment and onboarding of new members. This is a continuous process.

Building skills and capacity

Alliance staff worked with a Colorado-based consultant to understand and support the five conditions of collective impact. Alliance staff also attended a training session to build skills to support Alliance meetings.

Tracking community needs and informing countywide efforts

Alliance staff have kept a close eye on changes in funding and priorities, both locally and nationally, representing the Alliance in many community meetings and groups to reinforce alignment with the strategic plan.

Building relationships

We're constantly meeting new partners, joining local events and strengthening community connections to keep behavioral health a shared priority across Larimer County.

Awareness and outreach

Alliance staff and members hosted an informative session on "Community-Centered Changemaking" at the 2025 Rethinking Addiction and Recovery Conference to an audience of more than 200 people.

Member Updates

In July, the [Health District](#) opened a new client campus at its Bristlecone location, improving access to behavioral health and dental care, as well as to health insurance enrollment and literacy services.

The Health District, [Poudre School District](#) and [SummitStone Health Partners](#) have formed a collaborative Behavioral Health Referral System to streamline access to care for PSD students and families. The system provides a single referral pathway, with care coordinators guiding families and improving communication across agencies. From April to June, 75 referrals were processed. From August to October, that number rose to 130, with 76 more in progress. This demonstrates both growing need and the success of this coordinated model.

The Larimer Integrated Network of Care Data Project across several Alliance members, including [Larimer County Community Justice Alternatives](#) and [SummitStone Health Partners](#) began to build a centralized data system that connects health care, government and community organizations. This system aims to improve coordination and outcomes for those with behavioral health needs. A pilot launch is expected in early 2026.

In spring 2025, local partners — including individuals with lived experience — mapped how to better support people with mental health and substance use challenges in the justice system through a [Sequential Intercept Model](#) workshop. A final report with key priorities is now complete, and planning for next steps is in progress. This project was led by [Larimer County Community Justice Alternatives](#) and funded by the [Larimer County Sheriff's Office](#).

[NorthPoint Colorado](#) continues to enhance care coordination across northern Colorado, working with hospitals, schools and community partners to support smooth transitions across treatment levels. [Imagine by NorthPoint](#), based in Fort Collins, provides specialized behavioral health services for adolescents through a structured partial hospitalization program and intensive outpatient programs, with a strong focus on family and community collaboration.

[Housing Catalyst](#) continues to expand behavioral health supports within its affordable and permanent supportive housing communities. Recent efforts have focused on strengthening onsite services at Mason Place and Redtail Ponds, enhancing coordination between Resident Services and Property Operations, and preparing for Medicaid Provider Type 89 enrollment for long-term sustainability. A redesigned Resident Services model now emphasizes proactive engagement, wellness events, financial education and community-building to reduce isolation and promote stability. Camp Catalyst supports youth residents through social-emotional learning and sensory-based practices. Improved data tracking across programs is also helping measure impact and prepare for future Medicaid billing.

The Teen Self Care Fair, held Oct. 12 at the Fort Collins Museum of Discovery, welcomed more than 725 attendees. The event offered youth hands-on opportunities to explore mental health and suicide prevention through activities like art, aerial silks, boxing, and Dungeons and Dragons. More than 25 community booths connected youth to local resources, while therapy dogs, food trucks and giveaways made it a fun and meaningful day for youth and families to engage with wellness supports in Larimer County. This event was coordinated by the [Alliance for Suicide Prevention of Larimer County](#).

From April to October, [SummitStone Health Partners](#) prepared for the December opening of a new Adolescent Crisis Stabilization Unit at the Longview Campus, which will provide eight crisis beds for youth ages 12 – 17, initially through referrals from the Larimer County Department of Human Services. SummitStone also continued its street outreach program in Loveland, connecting individuals experiencing homelessness with behavioral health services. It also laid the groundwork for a new harm-reduction partnership with the Loveland Police Department to expand Narcan access, culminating in the installation of a community Narcan kiosk in November.

[Larimer County Behavioral Health Services](#) is developing a [multi-year funding framework](#) to complement its current investments, focusing on workforce development, cross-agency collaboration and system navigation. This is expected to begin in 2026, following Larimer County Commissioner guidance.

The [Impact Fund Grant Program](#) has now awarded \$17.7 million to 77 organizations, strengthening behavioral health services across the county. The [Acute Care facility at Longview Campus](#) is nearing its two-year anniversary. Since opening in December 2023, it has served 6,827 unique clients across nearly 13,800 visits, with hundreds of monthly walk-ins and urgent care admissions. The facility operates 24/7 and is a cornerstone of crisis and substance use care in Larimer County.

[Thompson School District](#) has partnered with the [North Colorado Health Alliance](#) to provide families with case management and care coordination, with early use demonstrating both strong need and positive impact. TSD's Mental Health Team is also expanding its work with SummitStone Health Partners and other community partners and liaisons to enhance case consultation and wraparound support for students, families and staff. These efforts are strengthening both new and existing partnerships across the district.

For Overdose Awareness Day, [North Colorado Health Alliance](#) ramped up events across Fort Collins, Estes Park and Loveland, fostering community engagement, sharing resources and hope and honoring those affected by overdose. NCHA also hosted another successful Rethinking Addiction and Recovery Event in October, which brought together partners locally and across the state to share strategies and strengthen collaboration around behavioral health, and in particular, substance use. NCHA also concluded the first cohort of the Center of Excellence Peer Recovery Leadership Development Program and is launching the second cohort in December, with strong participation. These efforts continue to deepen cross-sector partnerships and build capacity for community-led solutions.

Mental Health and Substance Use Alliance Overview

The MHSU Alliance (the Alliance) is a collaborative group of individuals and organizations across Larimer County in northern Colorado, united by a shared commitment to improving behavioral health care in our community.

Founded in 1999, the Alliance is proud to celebrate 26 years of partnership and progress in 2025.

Over the past two years, Alliance members have come together to refresh our collective vision, values, goals and shared measurement indicators. This work ensures our direction remains responsive to the evolving needs of our community. Our vision and values serve as our guiding light. As the Alliance continues to grow, we expect them to evolve alongside us. on promoting behavioral health through nonclinical methods. The group has begun a learning and strategy-development process, working to design locally tailored solutions. The Steering Committee plans to adopt the strategies in early 2026, turning vision into action.

Our Vision

Behavioral health is holistic, affirming, valued and resourced as an essential aspect of whole-person health.

Our Values

Sustainable Change and Improvement

We make a real difference through our work by finding and using strategies that bring lasting, positive change. We focus on accountability, affordability and the involvement of lived/living expertise to ensure equity, sustainability and effectiveness.

Whole-Person Health

Behavioral health is an integral and essential component of health. We support people in ways that respect and embrace their whole selves, including their culture and identities, so they can reach the level of health and well-being that they desire.

Lived and Living Expertise

We value the direct involvement and input of people with lived/living expertise in everything we do. We see all people as complete individuals. We're against thinking of "us vs. them" and are learning to address our own biases and discomfort with difficult subjects.

Health Equity Within and Across Systems

Health should not be compromised or disadvantaged because of an individual’s or population group’s identity(ies), including but not limited to race, ethnicity, gender expression or identity, income, ability, sexual orientation and neighborhood. We work together to reduce and eliminate inequities and differences in health outcomes. This means adapting systems so that providers in behavioral health take responsibility for addressing equity individually and collectively.

Open-Mindedness and Respect

We actively seek out diverse perspectives, ideas and expertise. We strive to recognize and address our biases, promote inclusivity and work to understand, respect and accept differences. We lean into uncomfortable and/or difficult discussions and actively work to repair any harm.

Our Structure

The Alliance operates with an open, tiered structure designed to support strong leadership, clear roles and flexible ways for members to get involved. This approach helps ensure that our work is collaborative, well-coordinated and inclusive of diverse voices.

Mental Health & Substance Use Alliance of Larimer County



In addition to the member categories above, Alliance staff are also a key element of its structure. They provide administrative and operational support for the Alliance, which includes tracking, measuring and communicating progress on the Strategic Plan.

Our Strategic Plan

In 2024, the Alliance worked collaboratively to develop a new Strategic Plan to guide our collective efforts to improve behavioral health in Larimer County. With support from Alliance staff and a consulting partner, this process took place from January through September.

The 2024 Strategic Plan is grounded in the Alliance’s shared vision and values, informed by local, state and national data, and shaped by the guidance of the Steering Committee. Its purpose is to identify and track locally driven, actionable strategies that will improve behavioral health outcomes and promote equity in access to care. This is particularly true for communities in Fort Collins that have historically been underserved or excluded from behavioral health systems.

Building upon the groundwork and realignment from 2024, the Alliance focused on leveraging the newly formed Steering Committee to finalize the Strategic Plan in 2025. This included establishing an overall goal and a set of measurement indicators to track progress. This work was completed in August 2025, marking a major milestone for the Alliance.

Looking ahead, workgroups will use the Strategic Plan as a guidepost and framework to develop actionable strategies. These strategies will be reviewed and adopted by the Steering Committee and integrated into the plan. As implementation begins, the Alliance will share progress, challenges, and lessons learned through this living document and future progress reports.

Because strategic plans can vary widely in form and function, we’ve included a guide below to clarify what this plan is — and what it isn’t.



The Alliance Strategic Plan IS:

- A living document that will evolve as our community learns and grows
- A foundation for future work plans and progress tracking
- A communication tool to keep Alliance members and the broader community informed
- An invitation for individuals and organizations to get involved in improving behavioral health
- A collaborative, consensus-based roadmap for collective action



The Alliance Strategic Plan IS NOT:

- A static report to be filed away and forgotten
- The only effort addressing behavioral health in our community. Many partners are doing important work in this space.
- A perfect or exhaustive solution to every behavioral health need or gap in Larimer County or Colorado



2024 Strategic Plan

VISION: Behavioral health is holistic, affirming, valued, and resourced as an essential aspect of whole-Vision person health.

Values (Our Drivers) Sustainable Change and Improvement | Whole-Person Health | Lived & Living Expertise | Health Equity Within and Across Systems | Open-Mindedness & Respect

NEW! Overall Goal: All people in Larimer County across the lifespan are thriving, feel safe and resourced, and have a sense of belonging.

NEW! Metrics:

1. Deaths by Intentional Self Harm {CoHID}
2. Drug-Related Deaths {CoHID}
3. Days of Poor Mental Health {CHAS}
4. Needed Mental Health Care, Did Not Get It & Why {CHAS}
5. Felt Disrespected When Seeking Health Services in the Past Year & Why {CHAS}
6. Data Development Plan: Creating a shared metric(s) for youth behavioral health

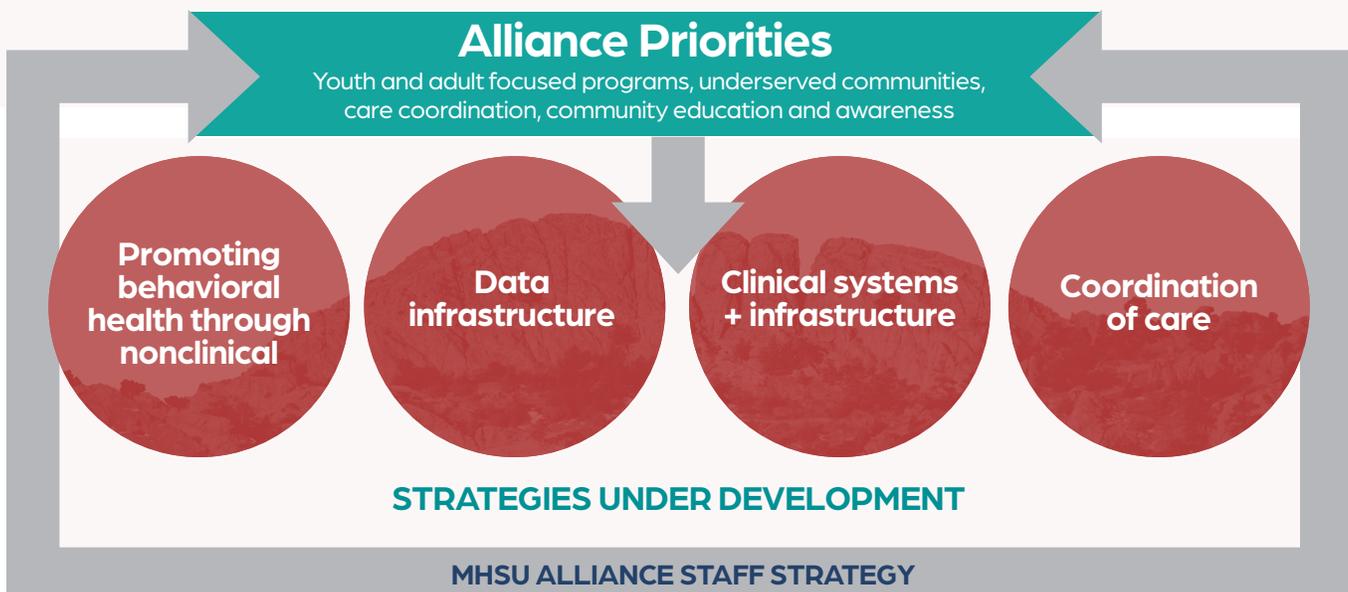


Workgroups:

- Promoting Behavioral Health through Nonclinical Methods
- Coordination of Care
- Data Infrastructure
- Clinical Systems + Infrastructure

Strategies: To be developed. We need your help to figure out what specific, actionable, and locally-tailored strategies will work for our community.

JOIN THE ALLIANCE TO INFORM FUTURE STRATEGIES!



Our Workgroups

Each Alliance workgroup is aligned with a key theme from the Alliance Strategic Plan. These themes were thoughtfully selected by Alliance Members to guide long-term systems change in behavioral health across our community. Below is an overview of each theme and the types of strategies workgroups may support:

Promoting Behavioral Health through Nonclinical Methods

This workgroup is currently meeting, with the goal of recognizing that not all behavioral health needs are met in clinical settings. It focuses on expanding access to healing and wellness through community-based, cultural and creative approaches.

Why it matters:

- Addresses behavioral health needs that clinical services alone can't meet
- Leverages arts, culture, recreation and peer support to promote mental wellness

Potential impacts:

- Benefits both youth and adults
- Can be tailored to specific cultural or demographic needs
- Supports diverse pathways to healing
- Opens new partnership opportunities for the Alliance

Example strategies:

- Public art and creative placemaking
- Peer work and Spaces
- Engagement opportunities for people in recovery and recovery-friendly spaces
- Access to culturally affirming and nonclinical healing methods within health systems



Coordination of Care

This workgroup will focus on improving how systems work together to ensure people receive consistent, connected care across the entire behavioral health continuum — from prevention to crisis response and recovery. Note: This is different from “care coordination,” which refers to services provided to an individual or family.

Why it matters:

- Helps create a seamless, wraparound system of behavioral health services
- Reduces reliance on emergency or institutional care by supporting people earlier and more effectively

Potential impacts:

- Benefits both youth and adults
- Can be adapted to meet the needs of specific populations
- Identifies gaps and opportunities across the full crisis continuum
- Reduces barriers caused by poor communication or fragmented systems

Example strategies:

- Community adoption of a centralized referral platform
- Investment in coordination of crisis response systems

Data Infrastructure

This workgroup focuses on building stronger, more collaborative systems for collecting, sharing and using behavioral health data across organizations.



Why it matters:

- Enhances equity and service quality through better data
- Helps organizations understand needs, track outcomes and improve services

Potential impacts:

- Benefits both youth and adults
- Strengthens connections between providers and the people they serve
- Improves consistency and accuracy of data
- Supports centralized, shareable and community-informed data systems

Example strategies:

- Collect and report standard behavioral health metrics across organizations
- Community-wide framework for documenting successful implementation strategies and modifications
- Data systems to accurately reflect the community and evaluate outcomes



Clinical Systems and Infrastructure

This workgroup looks at how clinical and professional care systems can better integrate behavioral health services and work together more effectively.

Why it matters:

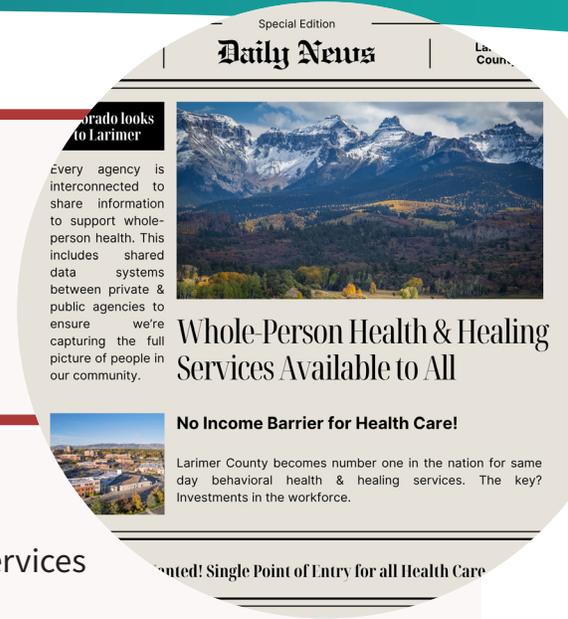
- Strengthens behavioral health networks and improves service delivery
- Promotes equitable access and better outcomes for all

Potential impacts:

- Benefits both youth and adults
- Can be tailored to specific populations
- Drives local systems change
- Encourages adoption of proven, effective practices

Example strategies:

- Access to social-emotional screening
- Investigation of alternative payment models to sustain needed services
- Integration of behavioral and physical health care services
- Engagement with new Regional Accountability Entity (RAE)/Behavioral Health Administrative Service Organization (BHASO)



Our Approach: Strategy Development and Implementation

To ensure a thoughtful and inclusive process, each workgroup will follow a phased approach:

Workgroup Process Overview

1. Learning and assessment (3 – 6 months): Build a shared foundation by exploring root causes, reviewing relevant data and identifying community resources
2. Strategy development (3 – 6 months): Define desired outcomes, engage new and existing partners, and design strategies aligned with the Alliance’s vision, values and goals.
3. Steering Committee adoption (Timeline TBD): Proposed strategies will be reviewed and adopted by consensus for inclusion in the Strategic Plan.
4. Implementation, evaluation and sustainability (ongoing): Workgroups will implement strategies with support from Alliance staff, monitor progress, evaluate outcomes and report back regularly.

This process is intentionally flexible and adaptive, allowing us to adjust based on what we learn along the way.

Glossary of Terms

Behavioral Health: An umbrella term for all “the emotions and behaviors that affect your overall well-being,” which can include mental health challenges, diagnoses, or other struggles including substance use/misuse/disorders. (Source: [Centers for Medicare & Medicaid Services](#))

Behavioral Health Administrative Service Organizations (BHASO): Slated for 2025, BHASOs will “establish, administer, and maintain regional networks of behavioral health care providers that serve people across Colorado.” (Source: [Colorado Behavioral Health Administration, 2024](#))

Care Coordination: The organization of a patient’s care across multiple health care providers. Note this refers to services provided to an individual. (Source: [Centers for Medicare and Medicaid](#))

Coordination of Care: The organization of a patient’s care across multiple healthcare providers to ensure that patient needs are met and high-quality care is delivered. This requires multiple service providers to work together and is conducted at a systems-level. This is often used interchangeably with “care coordination” but for the purposes of the Strategic Plan, we are defining them separately. (Source: [Agency for Healthcare Research & Quality](#))

Collective Impact: A structured approach and model used to solve complex social problems through different organizations and sectors working together towards a shared goal. (Source: [Collective Impact Forum](#))

Crisis Continuum: Also referred to as a “behavioral health crisis system.” Both terms refer to “an organized set of structures, processes and services that are in place to meet all the urgent and emergent behavioral health crisis needs of a defined population in a community, as soon as possible and for as long as necessary.” (Source: [Crisis Roadmap](#))

Intensive Outpatient Program: A structured form of treatment for those who need more support than traditional therapy but do not require inpatient care. IOPs involve attending group therapy, individual sessions, and other support for several hours a day, multiple days a week, while still living at home and maintaining daily responsibilities.

Interoperable: The ability of different information systems to work together and share information. (Source: [Colorado Health Institute and The Office of Health Information Exchange](#), 2021)

Lived and Living Experts: Also called “people with lived and living experience,” these are individuals in the community who identify as having direct experience with mental health, substance use, or other behavioral health struggles and/or triumphs and are engaging with the Alliance outside of an organization. In other words, they are participating on their own time. These individuals have interacted with behavioral health systems, treatment, or resources as clients/patients seeking services.

Partial Hospitalization Program: A structured, intensive treatment that bridges the gap between inpatient care and standard outpatient therapy. Patients attend therapy and group sessions for several hours on weekdays but return home at night, allowing them to receive intensive support while maintaining their connection to their home life.

Peer/Peer Support/Peer Work: A “peer” refers to someone who shares lived and/or living experience with another person and can guide or walk with them as they navigate their lives, including specific challenges with behavioral health. For more/different perspectives, please refer to some of our members that provide peer services in Larimer County, [The Yarrow Collective](#) and [North Colorado Health Alliance](#).

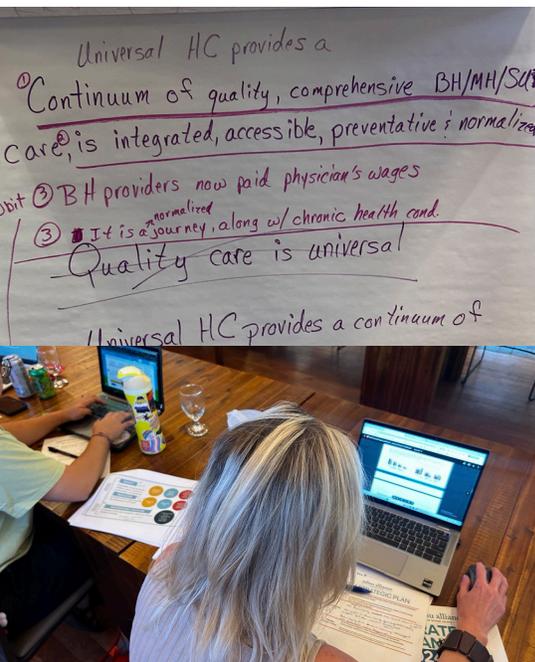
Regional Accountability Entities: Organizations that coordinate the health care of Health First Colorado (Colorado’s Medicaid program) members. (Source: [Colorado Health Institute](#))

Sequential Intercept Model: A method of detailing how individuals with behavioral health challenges come into contact with and move through the criminal justice system. (Source: [Substance Abuse and Mental Health Services Administration](#))

Social-Emotional Screening: Social-emotional screening is an applied method for detecting and monitoring signals that indicate whether a young child may be delayed in aspects of social-emotional development, such as communication, autonomy, affect, and interaction with people. (Source: [Ages and Stages](#))

Recovery: A process of change that helps people improve their health and/or well-being. (Source: [SAMHSA](#)) Every person in recovery has unique goals and sources of truth and healing. Please note that recovery may or may not include abstinence from substances or other behaviors. The path of recovery is up to the individual!

Wraparound Support (or Services): A holistic, patient-centered approach to providing support to an individual with behavioral health challenges, ensuring support and continued care in and out of clinical spaces. Wraparound services can include case management, counseling, medical care and health services, family services, social work, housing assistance, and dietitian assistance. (Sources: [Rural Health Information Hub](#), [National Wraparound Initiative](#))



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NOCO LEADS THE WAY

Harm reduction philosophies & strategies become the number one pathway into care.

NIMBY No More: Communities recognize individual needs over individualism.

Colorado follows Larimer County’s lead in expanding limitless

STIGMA FALLS OFF TOP TEN BARRIERS TO ACCESSING CARE





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