



Pitkin Area Co-Responder Teams (PACT): 2024 Annual Data Review



The Pitkin Area Co-Responder Teams (PACT) is a collaborative community program that brings together law enforcement and mental health professionals. PACT pairs a mental health clinician with local law enforcement who respond jointly to calls for service where mental health (MH) or substance use (SU) challenges may exist in the community and/or other at-risk populations. Wraparound services, which provide longer-term support, are available through case management and peer support programs.

The PACT program is a collaborative effort between:

- Pitkin County Public Health
- Health Solutions West
- Aspen Police Department
- Pitkin County Sheriff’s Office
- Snowmass Village Police Department



In September 2024, the PACT Program was awarded a DOJ 3-year grant, Connect & Protect, and received funding from grants from the Colorado Behavioral Health Administration’s (BHA) Co-Responder program and the Colorado Department of Public Health and Environment’s (CDPHE) Harm Reduction Grant Fund. The data in this report represent information tracked for the awarded grants, coupled with dispatch data for co-responder encounters in Pitkin County. For more information about the PACT teams, please visit our website [HERE](#).

Data Collection Processes

This report presents data collected through the Pitkin County Co-Responder program from January to December 2024. Pitkin County Public Health has partnered with Omni Institute, a social science consultancy, to analyze and report performance measurements and other process and outcome data, monitoring PACT’s progress. Below are the two data sources used to capture program impact.

Julota

Julota is a community information data platform.

- The PACT teams tracks their encounters with clients.
- Law enforcement enters referral information for the teams.
- Demographics, substance use data, and data on referrals to agencies are tracked here.

Dispatch

The PACT teams gathers data shared through Dispatch

- Law enforcement tracks active calls as well as follow-ups by clinicians when occupied by law enforcement.
- Referrals and/or any behavioral health related calls when PACT is not on duty (RPACT) tracked in Spillman.
- The day of the week and time of day for each encounter are pulled from Dispatch.

PACT Program Goals

This report represents a look at PACT efforts, focusing on the following program goals derived from community needs assessments, funding requirements, and program strategic planning grounded in best practices in the field.

Data collected by PACT focuses on the following goals:

- GOAL 1** Improve individual outcomes for PACT clients.
- GOAL 2** Identify and address health barriers and inequities for PACT clients.
- GOAL 3** Enhance coordinated responses to the behavioral health needs of PACT clients and increase cross-system efficiency and capacity.



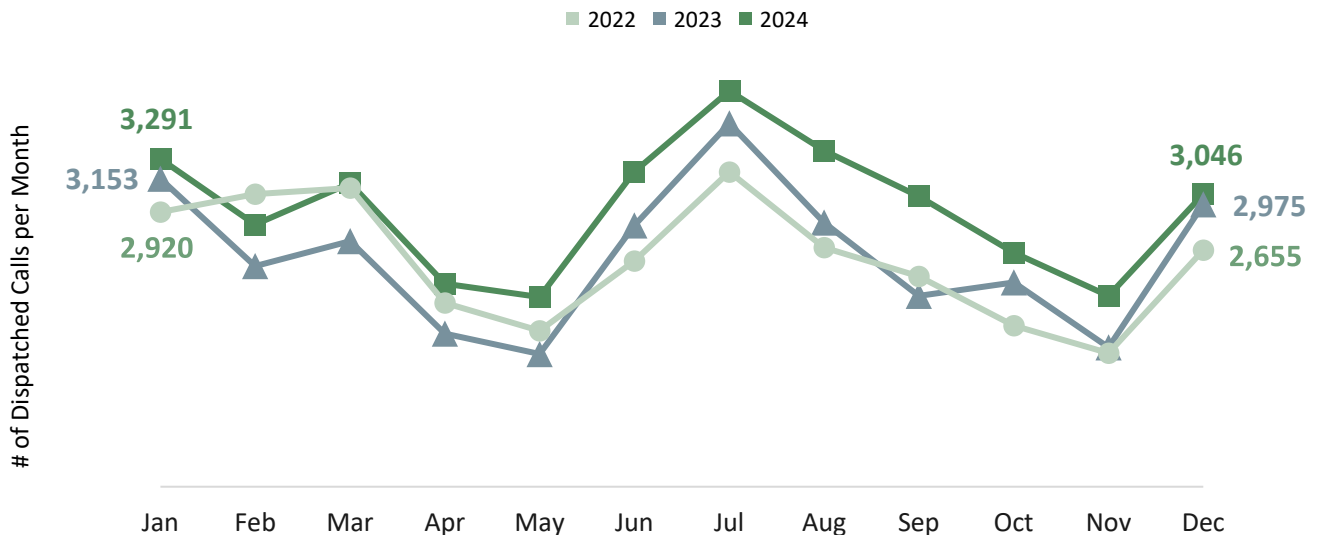
GOAL 1 Improving Individual Outcomes

OBJECTIVE 1. Increase early identification and crisis intervention for persons with behavioral health needs in the community.

The following graphs show the prevalence of all dispatched calls and those specifically related to behavioral health throughout 2024. The total number of dispatched calls includes all calls to police across participating jurisdictions. These results highlight the scope of community needs.

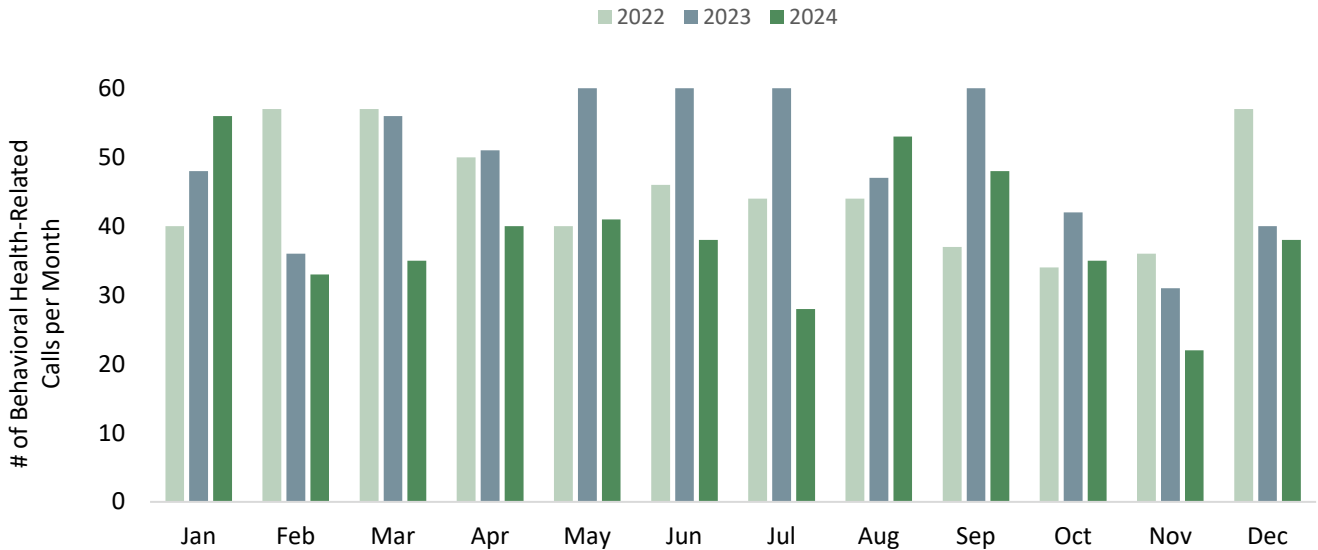


A total of 35,357 calls were dispatched in 2024, up from the 2023 total of 31,332.





467 of the total calls in 2024 were **behavioral health-related**, a decrease from 641 in 2023.

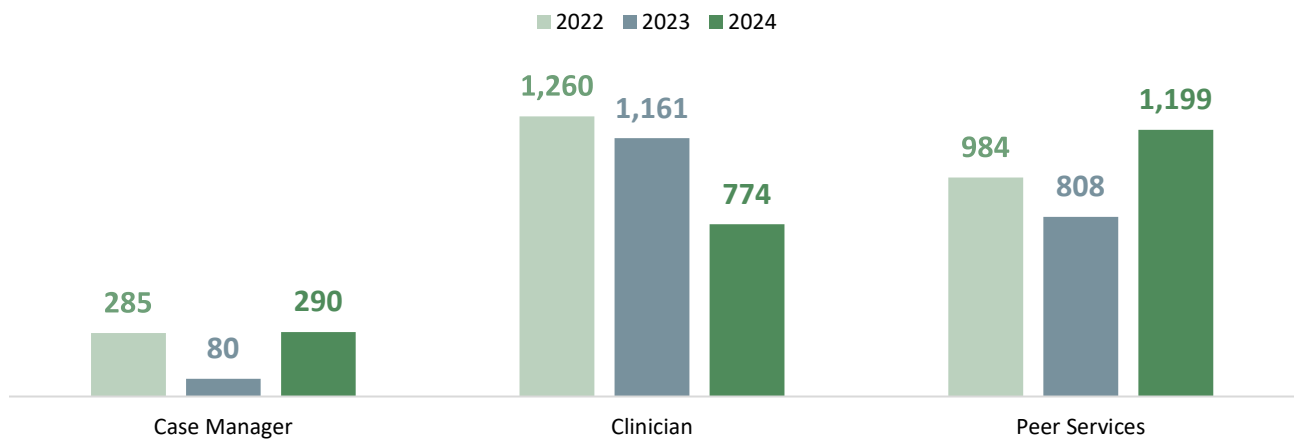


*2023 data was edited from previous year's report to reflect corrections to December numbers.

Interactions between the PACT teams and the community are categorized as "encounters." These interactions may involve a clinician, a case manager, or a peer support specialist and their clients. Depending on their needs, individuals can have multiple encounters with PACT staff, such as ongoing peer support or case management. Below is the total number of encounters broken out by PACT staff category.



2,263 total PACT encounters* in 2024, up from 2,050 in 2023.

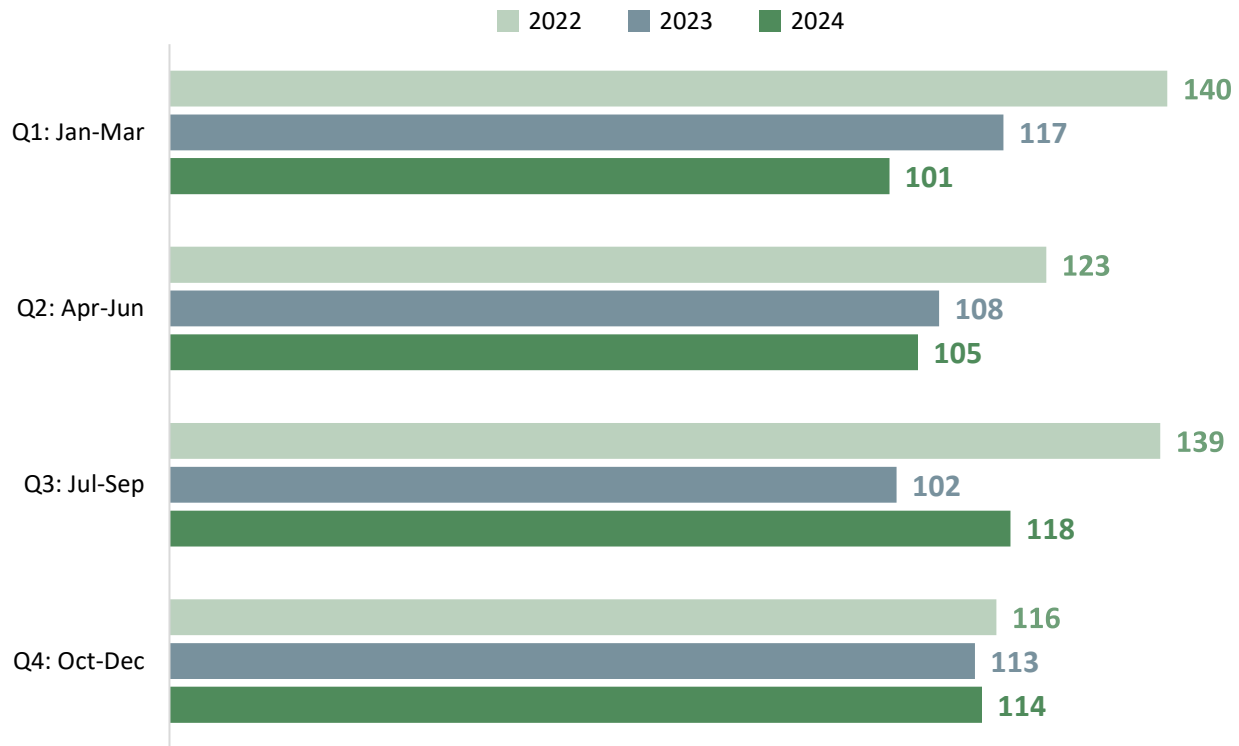


*In 2022, staffing included two full-time equivalent (FTE) Clinicians, one FTE Case Manager who began in June 2022, and one FTE Peer Support Specialist. In 2023, staffing consisted of one FTE Clinician who took five weeks of extended leave, one part-time Clinician working two days per week from January through November, one FTE Case Manager who left the position in March and was replaced by a new FTE Case Manager in August, and one FTE Peer Support Specialist who also took some extended leave during the year. In 2024, staffing included one FTE Clinician who took extended leave in October, one FTE Case Manager whose role ended in October, and two FTE Peer Support Specialists, one of whom began employment in May 2024.

Often, the PACT teams is called to assist individuals more than once. The data below shows the number of individuals uniquely served throughout the year.




In 2024, PACT served 291 unique individuals, a number similar to the 288 served in 2023.



Note: The number of unique clients per quarter may exceed the number of unique clients per year as a client seen in quarters 1 and 2 will count as unique in quarters 1 and 2 but will not be “double-counted” when the timeframe is the whole year.


Supporting harm reduction is a fundamental objective of the PACT teams. Below are the reported substance use needs of PACT clients and the services to which they were referred for additional support.



193 (66%)
individuals served by PACT in 2024 reported a **substance use issue**.

When compared to 2023, there has been an increase in reported substance use issues.

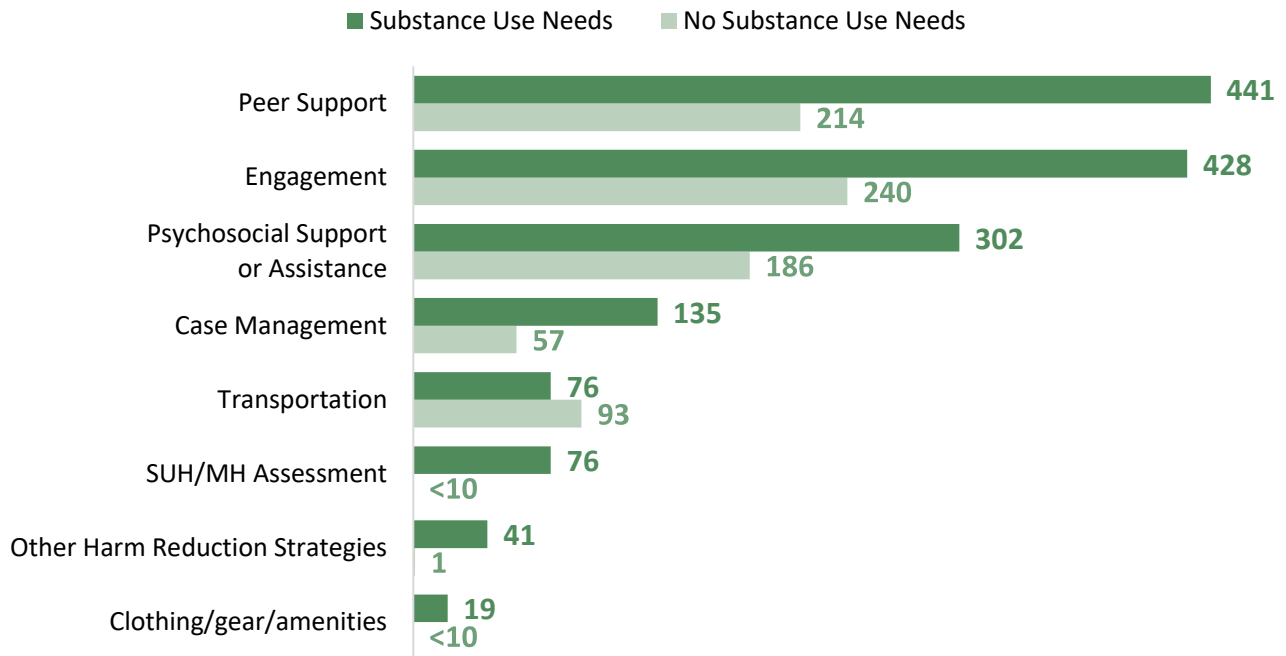
- **146 (51%)** individuals served by PACT in 2023 reported a **substance use issue**.
- Of those 146 individuals reporting a substance use issue, **115 (79%) used alcohol** (the most common substance used).



149 (77%)
of the 193 individuals reporting a substance use issue **used alcohol** (the most frequently reported substance).

For the following substances, fewer than ten individuals reported use: Cannabis, Psilocybin, Ecstasy/MDMA, Klonopin/Clonazepam, Xanax/Alprazolam, Fentanyl, Adderall/Dextroamphetamine and Amphetamine, Tobacco, Cocaine/Crack, Oxycodone, Heroin.

The PACT team provides direct support tailored to each client's needs. Below is the number of services provided, including support for individuals with and without substance use issues.

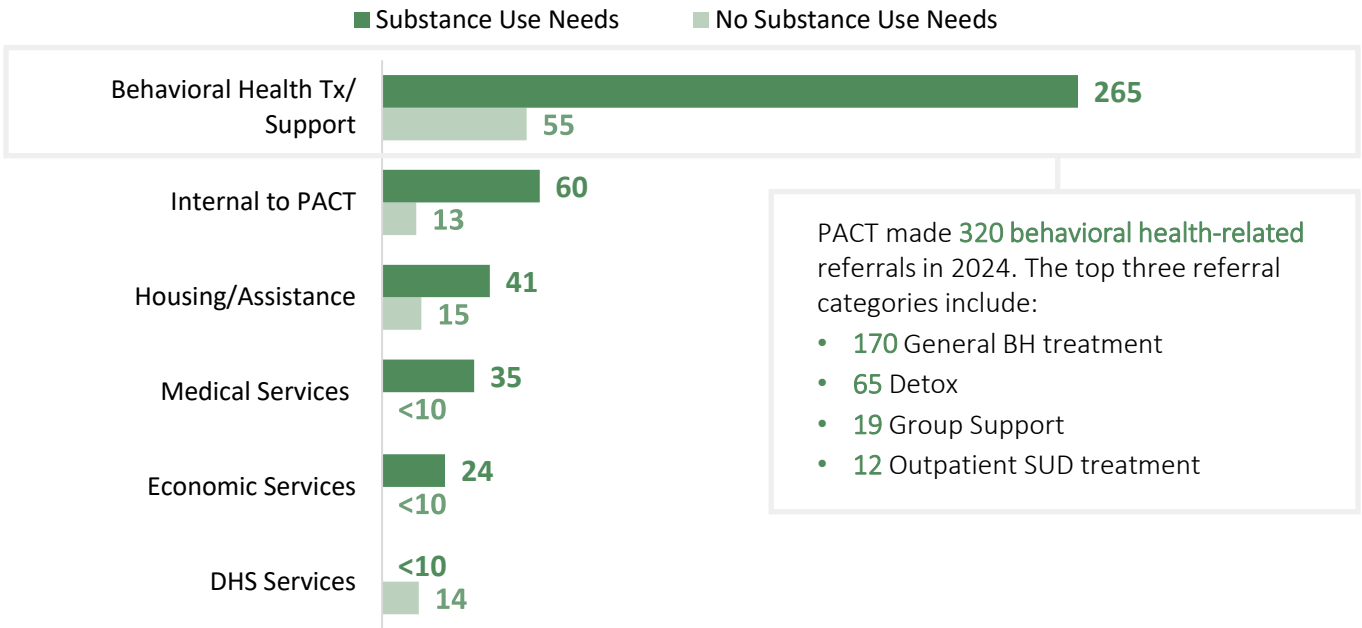


- PACT provided harm reduction services, including:
- Distributing Fentanyl Test Strips
 - Use Reduction/Access Interventions
 - Distributing Narcan
 - Health Education

One unique benefit of the PACT is its ability to facilitate warm handoffs and provide direct community referrals to individuals in crisis. This wraparound approach to services enhances community connections and helps to reduce the ongoing reliance on police interventions. Below are the types of referrals made for those who reported substance use issues and those who did not.



More service referrals were made for **individuals with substance use-related needs (455)** than those without (131).



Fewer than ten individuals with or without substance use-related needs received the following service referrals: food, transportation, family & youth, veterans, and legal services.



OBJECTIVES 2 & 3. Prevent unnecessary legal system involvement and incarceration of PACT clients; Reduce unnecessary emergency room admissions and hospitalizations.

One of the primary objectives of the PACT program is to minimize the reliance on jail or emergency department transports by connecting clients to essential services directly at the scene. The following numbers represent data collected in 2024 from 84 active encounters.

	<p>2 Arresting Incidents involving new charges</p>	<p>Similar to 2023, numerous efforts were made to reduce the need for hospital or justice system involvement.</p> <p>In 2023:</p> <ul style="list-style-type: none"> • 0 Arresting Incidents involving new charges. • 68 (46%) active calls involved de-escalation. • 13 (9%) individuals were transported to the emergency department. • 90 (61%) calls were resolved on scene.
	<p>55 (66%) active calls involved de-escalation</p>	
	<p>11 (13%) individuals were transported to the emergency department</p>	
	<p>54 (64%) calls were resolved on scene</p>	

OBJECTIVES 4. Connect PACT clients to appropriate wraparound services and effective treatment in a timely manner in the least restrictive setting through a client-centered coordinated approach.

Below is a breakdown of the services provided by the PACT teams, organized by encounter type. This data encompasses all 2,467 encounters, including manual entries, recorded in 2024.

- **84 Active Calls** = PACT clinician on scene.
- **162 Referrals** = Referral for the PACT teams after an active call or from a community partner.
- **2,017 Follow-Ups** = PACT follow-ups with individuals after initial PACT encounter or referral.

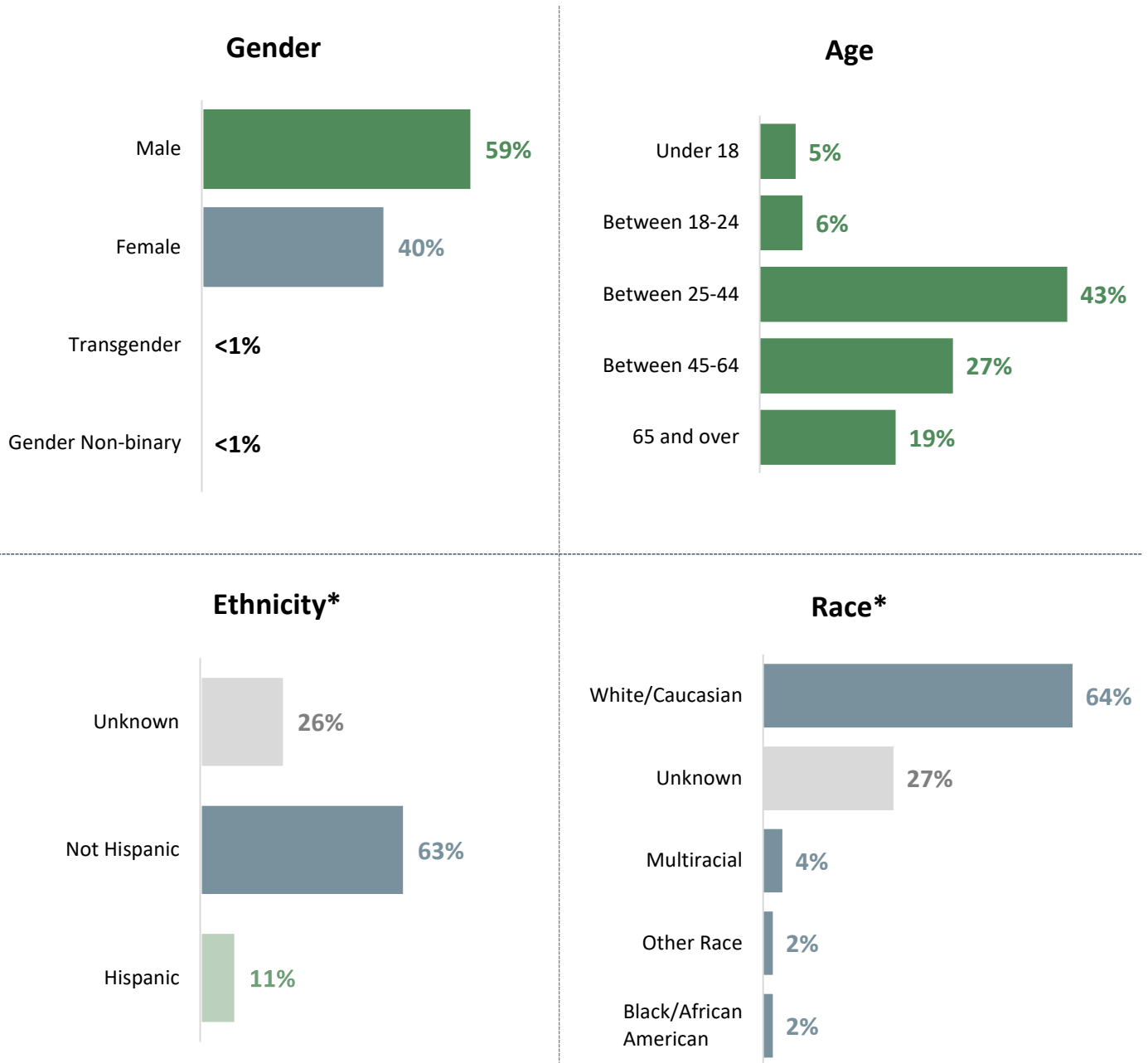
	<p>Out of the 84 Active Calls:</p> <p>4 (5%) individuals were placed on Involuntary Holds</p> <ul style="list-style-type: none"> • 3 individuals were placed on M-0.5 Holds • 1 individual was placed on an M-1 Hold 	<p>Compared to 2023, the same percentage of individuals were placed on involuntary holds.</p> <p>In 2023, out of the 148 Active Calls:</p> <ul style="list-style-type: none"> • 8 (5%) individuals were placed on Involuntary Holds <ul style="list-style-type: none"> ○ All individuals were placed on M-0.5 Holds
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*Note: The total encounters include manual encounters. NA contact types are mostly driven by NA contact types in the manual encounter data.

GOAL 2 Addressing Health Barriers and Inequities

OBJECTIVE 1. Ensure equitable access to PACT services.

The data below outlines the demographics of 291 unique individuals who participated in PACT service encounters in 2024, including active calls, referrals, and follow-ups. This information serves as a baseline for comparison with the demographics of law enforcement and other partners reported in future reports.



*Note: 27% of race and 26% of ethnicity data were unknown. For cases where race was available, race was assumed by the co-responder (rather than self-identified) 70% of the time. For cases where ethnicity was available, ethnicity was assumed by the co-responder (rather than self-identified) 71% of the time.

GOAL 3 Enhanced Coordination Across Systems

OBJECTIVE 1 & 2. Facilitate the return of law enforcement units to patrol activities; Support law enforcement with appropriate on-scene resolution of behavioral health calls.

One of the goals of the PACT program is to provide relief to first responders. The following data illustrates the significant impact that co-responders have on first responders. Through needs assessments, referrals, and connections to community partners, co-responders help facilitate on-scene resolutions for individuals requiring behavioral health support. This assistance enables law enforcement to return to service and focus on maintaining public safety.

During 84 active encounters in 2024:



29 (35%)

calls resulted in the **return of law enforcement to service**.



54

officers in total were **relieved back to service** due to the 29 calls that resulted in the return of law enforcement.



54 (64%)

incidents were **resolved on the scene**.

Although the number of active calls was lower than 2023, similar goals were achieved proportionally.

During the 148 active encounters in 2023:

- Co-responders facilitated the **return of law enforcement to service 49 (33%) times**.
- **87 officers** in total were **relieved back to service** due to the 49 calls that resulted in the return of law enforcement.
- **90 (61%)** incidents were **resolved on scene**.

OBJECTIVES 3. Expand the capacity of the three law enforcement agencies and mental health providers in Pitkin County to respond to individuals experiencing behavioral health needs appropriately.

When a call comes in through dispatch, law enforcement determines if there is a behavioral health component and classifies it as either PACT or RPACT. PACT calls request the on-duty PACT clinician, while RPACT calls are referrals for PACT to follow up on when they are available and/or behavioral-health related calls that do not need PACT follow-up.

Of the **467 behavioral health** calls dispatch recorded in 2024:



205 (44%)

were classified as PACT, therefore handled directly by a PACT clinician.

Peak activity occurred on Tuesdays, Wednesdays, and Thursdays.

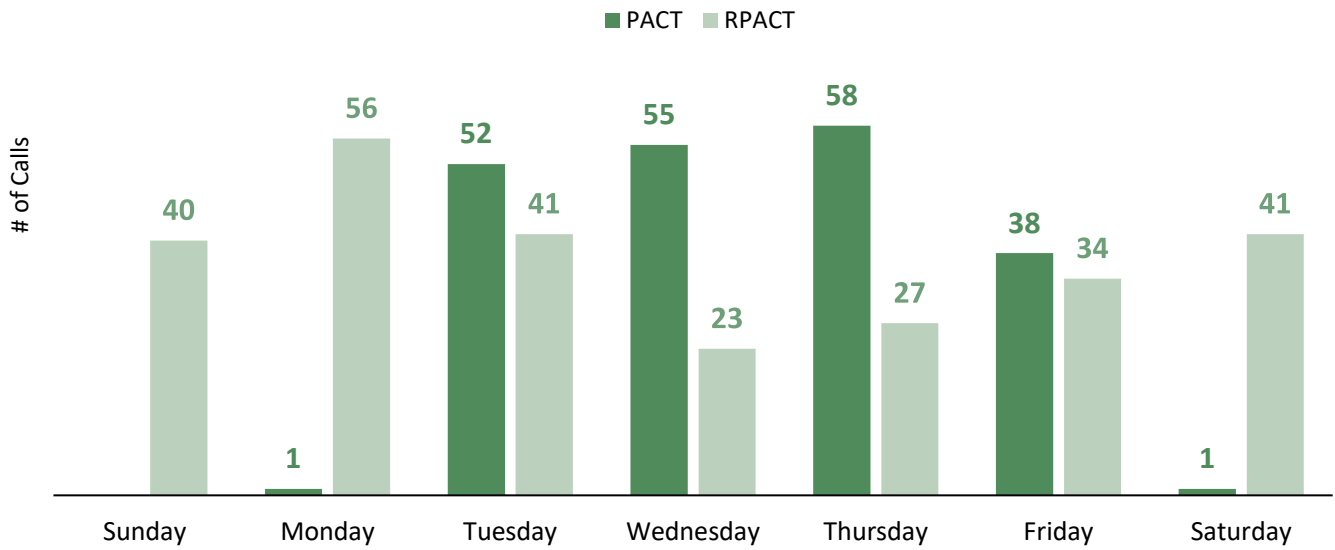


262 (56%)

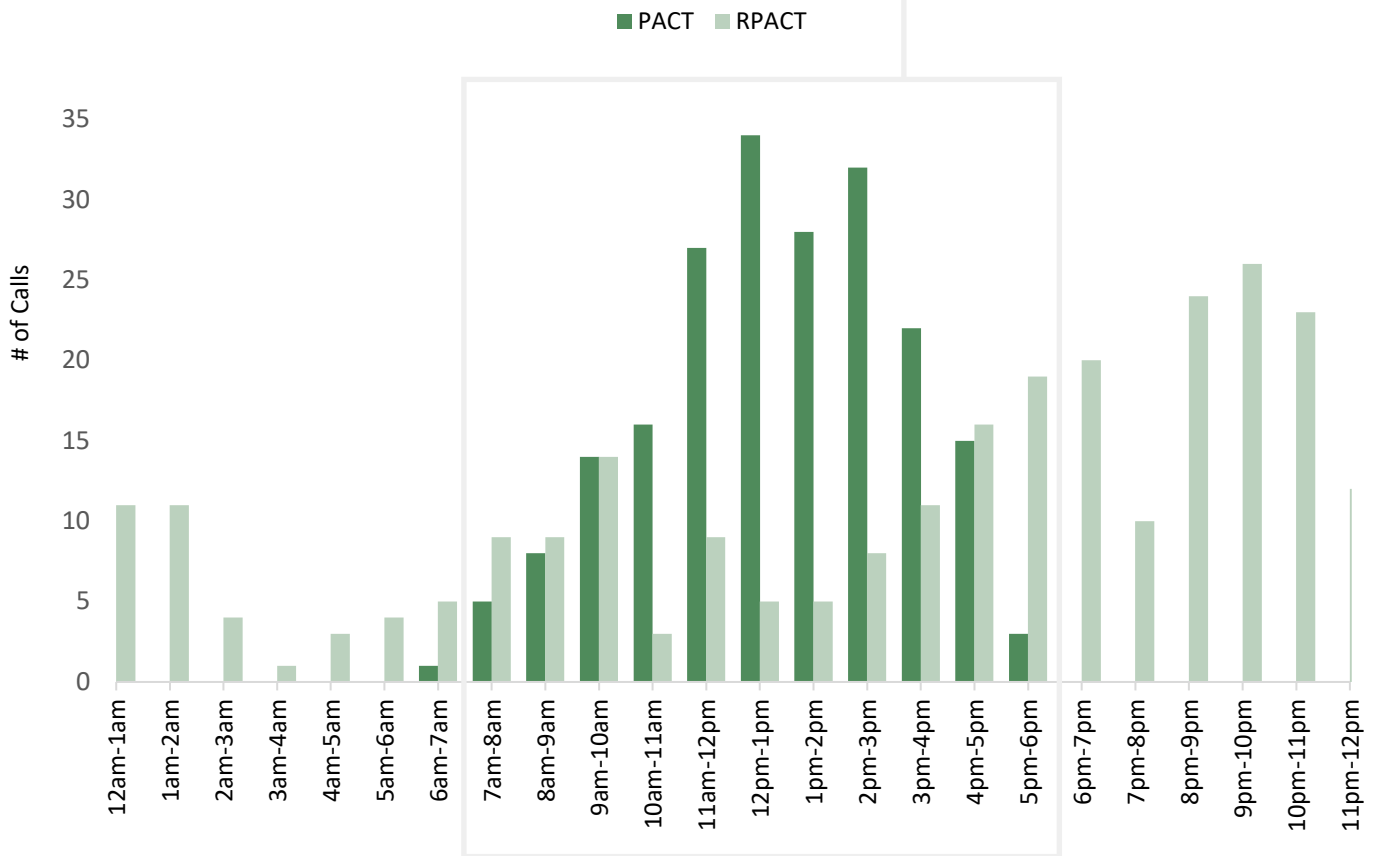
were classified as RPACT, referred for follow-up when available.

Peak activity occurred on Mondays, Tuesdays, Fridays, and Saturdays.

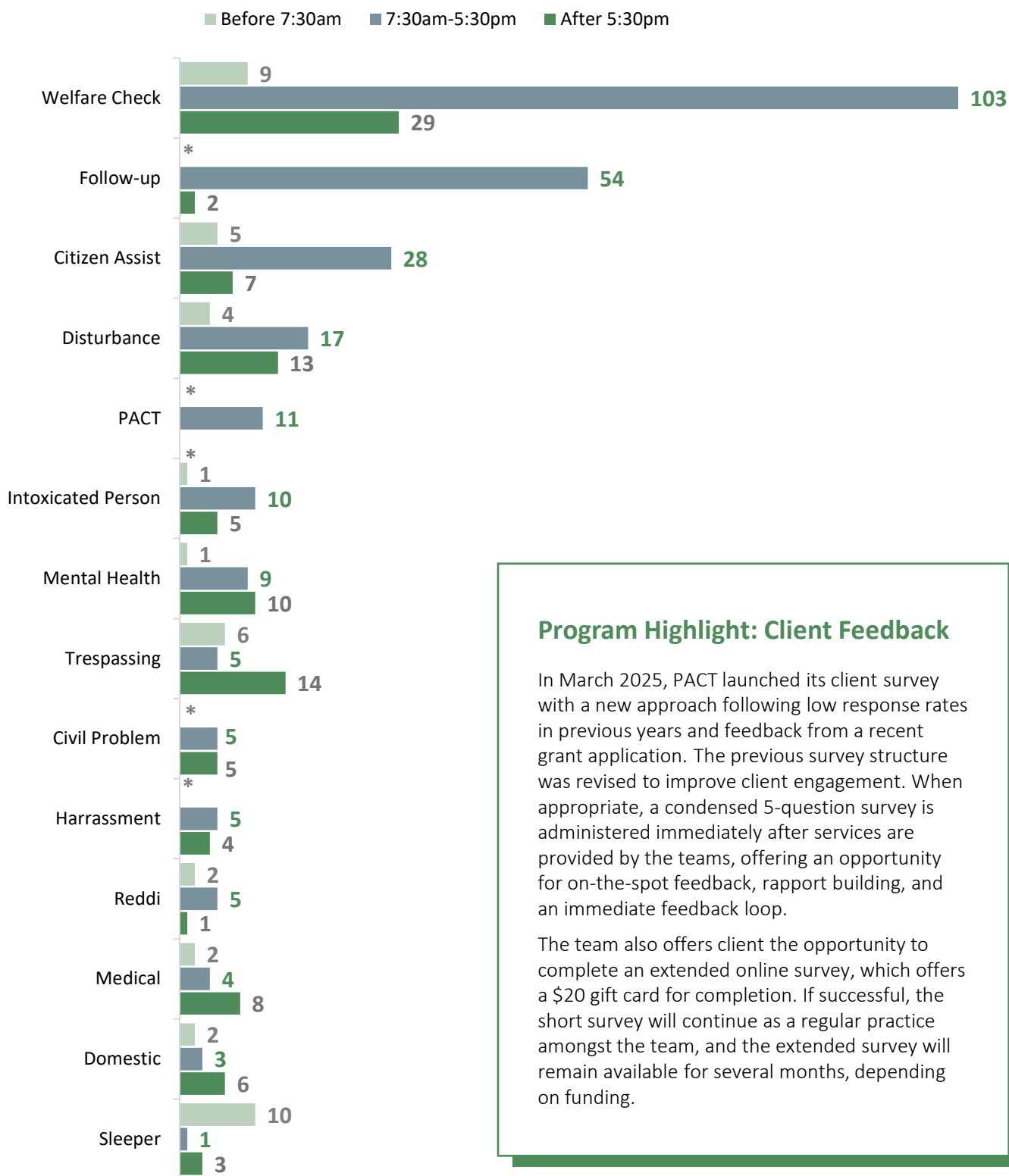
Analyzing peak times for PACT referrals through dispatch can help the teams identify programmatic needs and potential gaps in service. Below is a breakdown of dispatched calls to PACT by day of the week and time of day.



PACT is on duty from 7:30 am to 5:30 pm, Tuesday-Friday, and was on duty for 52% (241) of all PACT and RPACT calls.



Below is the distribution of dispatch call types by time of day, highlighting how the nature of incidents varies throughout a 24-hour period, regardless of the day of the week.



Program Highlight: Client Feedback

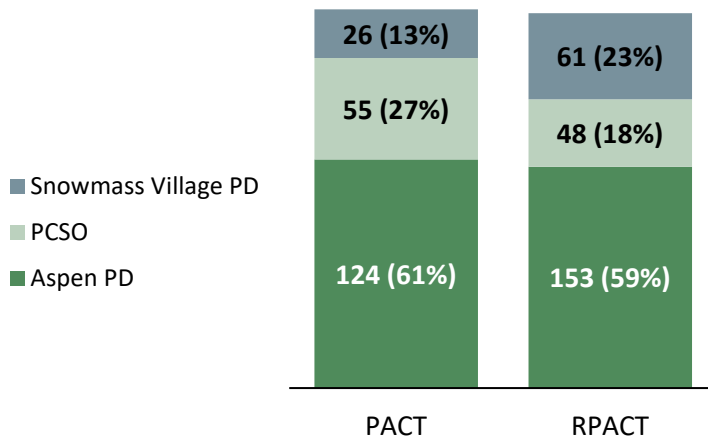
In March 2025, PACT launched its client survey with a new approach following low response rates in previous years and feedback from a recent grant application. The previous survey structure was revised to improve client engagement. When appropriate, a condensed 5-question survey is administered immediately after services are provided by the teams, offering an opportunity for on-the-spot feedback, rapport building, and an immediate feedback loop.

The team also offers client the opportunity to complete an extended online survey, which offers a \$20 gift card for completion. If successful, the short survey will continue as a regular practice amongst the team, and the extended survey will remain available for several months, depending on funding.

Note: An asterisk (*) indicates a value of zero.

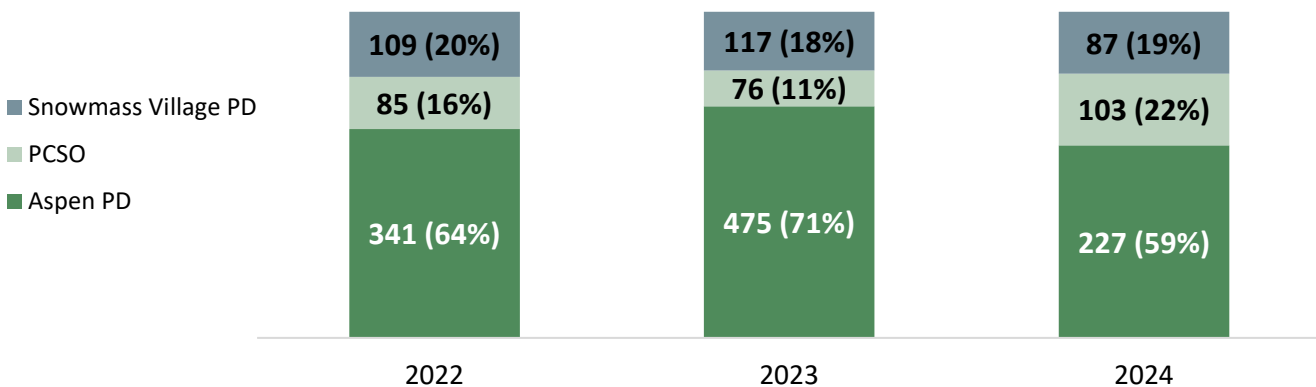


PACT partners with three agencies: the Aspen Police Department, Pitkin County Sheriff’s Office (PCSO), and Snowmass Village Police Department. Below is a breakdown of the PACT response type (PACT and RPACT) by police agency for 2024.



PACT is on duty from 7:30 am to 5:30 pm each day. The PACT teams was **on duty for 52% (241)** of all PACT and RPACT calls.

The figure below examines the total call trends for agencies between 2022, 2023, and 2024.



*The Co-Responder Clinician began spending 1 day/week with the Sheriff’s Office starting in September, 2024. Note that in October, the clinician took some extended leave.

Key Takeaways

Below are some key takeaways from the implementation of the PACT Program in 2024.



Strategic Planning

Over the past year, the PACT program has worked hard to integrate all three goals and their related objectives into its processes and evaluation efforts. To ensure that these goals continue to align with community needs, PACT conducted a comprehensive strategic planning process and updated its evaluation plan as necessary.



Strengthening Relationships

This year, the PACT program has made intentional efforts to improve communication and engagement between the PACT teams and law enforcement. Through coordination meetings and sustainability planning, PACT has enhanced its partnerships with law enforcement to streamline services and data reporting.



Achieving Goals

Co-responders successfully resolved the majority of active crisis cases on-site over the past year, ensuring that clients received the least restrictive options available. They continue to connect clients with appropriate community referrals and services through comprehensive case management and peer support. Additionally, the PACT teams effectively handled behavioral health calls, allowing officers to return to their duties and address more criminogenic needs.



Peer Support

What makes the PACT program unique is its diverse approach to supporting community members, which includes peer support services. Individuals with lived or living experience provide an unparalleled method of assistance to those with mental health and substance use needs. The high utilization of peer support services highlights the importance of connection within the community. The role of peers is essential to the program's ongoing success.



Staffing Impacts

The PACT teams have successfully addressed several staffing challenges related to geographical limitations and workforce shortages. Like last year, some data was affected by open positions, staffing transitions, or time off. Ensuring the teams' stability and filling these positions is crucial for the program's success. Despite these challenges, the PACT program has solidified its core teams, providing high-quality and comprehensive services to meet community needs.

Our Partners

