



Human Connection as Harm Reduction

*Participant Stories from the
Longmont Department of Public Safety's
Case Management Team*

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Longmont Public Safety's Case Management team provides four pathways to support for those who struggle with substance use and mental health conditions: Law Enforcement Assisted Diversion (LEAD,) the Angel Initiative, Community Health, and Crisis Outreach Response and Engagement (CORE.) The team approaches its work through peer-based intensive case management.

When a community member is referred to case management, the case manager and participant begin building a relationship, working together to assist the case manager in understanding historical information that may be impacting the person's current behavior, and identify person-centered goals to guide their partnership and work. Case managers approach these relationships from a harm reduction philosophy, with a spirit of acceptance, compassion and respect for autonomy. We believe the participant is the expert on their needs and has the capability to determine the best approach to creating change. This is not always an easy or intuitive role; however, it does lend to case managers building transparent relationships with participants and truly walking alongside them as they work together to improve the participant's quality of life. This includes but is not limited to transportation assistance to vital medical or mental health appointments, comprehensive care coordination with external community partners (i.e. probation, primary care providers, hospital staff, jail personnel, housing partners/housing authorities, mental health providers, and employment services), linking to housing resources, managing housing needs within the LEAD apartments, assisting with applying for eligible benefits and health insurance, and building life skills aligned with the participant's goals. Our case management philosophy is one of assertive outreach. We do our work in the community, with our participants. The goal is to build a trusting individual relationship that allows us to "bridge the gap" when services are unavailable or the individual is not yet ready or the resource does not yet exist.

Although we cannot always create or "fix" the gaps throughout systems, we know meaningful relationship with others is imperative for the health and well-being of every human. When things are not working, our solution is to refocus on meaningful relationship(s) and nurture the healing power human connection can bring to the participant and our community. The following stories illustrate how positive change can happen when we work together.

"Through acceptance and partnership, we emphasize self-determination and value the journey of meeting people where they are at, while caring enough not to stop there."

- Public Safety's Case Management Team Mission Statement

Participant Stories

Names have been changed to protect participants' privacy.

Danny

LEAD participant Danny was referred to the program as a result of his substance use disorder and began working closely with one of our Peer Case Managers in June of 2018. Danny was homeless and well known to Longmont Public Safety, having generated hundreds of calls for service from police and fire with many transports to the emergency room. He was well known to community service providers as someone with a history of behaving in a hostile and antagonistic manner, resulting in Danny's isolation from independently accessing services to improve his quality of life. Due to his lack of housing, we chose to take a "housing first" approach with Danny and moved him in to one of the LEAD apartments.

One of the first things he did after joining LEAD was to begin to repair relationships with the front line staff at many of the agencies from which he had been banned. He wrote letters of apology and asked for forgiveness. People were willing to give him another chance with the understanding LEAD staff would walk alongside him as he rebuilt vital interpersonal skills. Danny also set a goal to reconcile with his mom, and has since re-established communication with her, and is continuing to work toward strengthening their relationship. He shared recently that he has a completely different, and positive, relationship with Longmont's police officers than he did prior to joining LEAD. In his words, "The Longmont Police are great, and I even call some of the officers my friends." Over the past year, he has become a passionate advocate of the LEAD program and has shared his story and insights at several community forums.

During his engagement with LEAD, Danny was able to start focusing on his health and medical care needs. He now has glasses and received significant dental care including dentures. Through our harm reduction approach, Danny was able to reduce his drug use significantly within the first six months of participation in the program, and after one year of engagement in LEAD, Danny entered a 12-month treatment program that focuses on helping men who are coming out of homelessness and addiction to achieve self-sufficiency, from which he graduated in May of 2020. Since then, he has achieved stable housing and is now working full-time.

Melinda

Melinda was the first referral to LEAD with an Officer completing the form for a social referral the weekend before our launch date in July 2018. Melinda and her partner were well known by Public Safety. They had been homeless for several years and interacting with Law Enforcement

when they were moved along from a spot in town, experiencing a crisis or simply stopping to chat with an officer to thank them for their service and build relationship.

When we first met Melinda, she and her partner were inseparable and struggled to see where one person's autonomy began and ended. Melinda and her partner were quickly placed in a LEAD apartment. Having consistent and stable housing was the first step for Melinda to begin to explore and re-create her identity beyond the one she became accustomed to when living in "survival mode" every moment of every day. This work took time and has had many natural joys and sorrows. While housed, Melinda took the incredibly courageous step of building a meaningful relationship with her primary case manager and the LEAD case management team; a relationship rooted in trust, empathy, partnership, acceptance and autonomy.

Once settled in her apartment, Melinda began to explore what recovery meant to her and establish goals she wanted to achieve within her work with her case manager. Melinda participated in and graduated from several treatment programs; some outpatient, some inpatient. All the while, sobriety in and of itself, was not the primary focus for Melinda or her case manager; rather, improving her quality of life was and sobriety was *a part* of that. Melinda's choices around substance use ebbed and flowed and she learned something about herself and her needs at each opportunity. She continued/s to believe she can grow and is grateful someone is walking alongside her every step of the way.

Melinda has continued to be courageous in participating in the care of her overall health (physical and behavioral/emotional), has obtained employment, left a job and regained employment, is rebuilding her credit, taking steps to enroll in school, and has built skills aligned with establishing boundaries in her interpersonal relationships. Melinda has transitioned from her LEAD apartment and now pays her own rent as a participant in the transitional housing program where she has lived for the last two years. She will be able to stay in her current apartment for another 24 months should she continue to pay her rent and comply with the lease; which is entirely probable for Melinda to achieve. Melinda often reflects on her journey the last two and a half years with her primary case manager and has said (several times), "LEAD saved my life."

Beth

Beth was also one of LEAD's first referrals back in July of 2018. At that time, she was struggling with substance use, experiencing homelessness, and trying to cope with many physical ailments. Beth has had a consistent relationship with Longmont Public Safety (Law Enforcement in particular) and because of this trusting relationship, Officers [and Beth] felt compelled to give LEAD a try.

From the moment of her referral until now, she has experienced challenges related to the reasons she was referred. Based on Beth's life experience, it is challenging to trust others and she often has a hard time maintaining healthy relationships. Following a staffing change on the LEAD team, her current case manager focused on relationship throughout every interaction to build the foundation for their work together; a relationship rooted in acceptance, self-determination and partnership.

Case management has walked alongside Beth through many ups and downs, such as gaining housing only to find herself back experiencing homelessness. Just as well, for a short time, experiencing moments of sobriety, followed by moments of relapse. These moments of relapse were some of her most significant struggles due to the amount of shame Beth felt following a relapse. This shame, at times, would nearly prevent her from re-engaging. Due to the meaningful connection fostered by the intention Beth and her case manager put toward their relationship, shame did not win. Through these ups and downs, she has persisted in finding and receiving help, whether that be in her engagement with LEAD or other community partners. For example, despite four hospitalizations for physical and mental health care, as well as numerous Emergency Room visits, Beth has worked with LEAD case management to coordinate care, address root causes of the chronic health conditions she experiences and navigate permanent housing options. As of September 2020, she has gained housing, is staying on top of her physical health following an invasive surgery, which was a result of years of not being able to access and manage care due to homelessness and is taking her sobriety seriously. Beth is working closely with her LEAD case manager and other community partners to ensure she keeps these goals in place for the long term.

Sarah

Sarah was referred into LEAD as a social referral in October 2019 after a welfare check. Sarah had been known to CORE, our co-responder team, for two months prior due to her history of mental illness and substance use resulting in many welfare checks and Mental Health (M1) holds. At the time, Sarah had been living with her mother in a small one bedroom apartment because she was asked to leave her last residence. Two months after referral, Sarah was able to move into a LEAD apartment. Since then, she has gained employment, regularly attends formal support groups, and has over seven months of sobriety! Sarah reports that she would like to move on to another housing unit, one that she can pay for on her own and is actively working to achieve this goal with her primary case manager.

Nick

Nick was referred into LEAD in May 2020. Nick had expressed to the referring officer that he did not trust Police after he had a negative experience with Law Enforcement in the past; because of this, the officer decided LEAD would be a great way to build a different kind of relationship with *our* public safety personnel. Even though Nick had a negative experience with Law Enforcement, he was willing to give LEAD a try. Coordination between the LEAD and CORE teams was imperative to start to build a different relationship between Nick and Public Safety. Due to case management being rooted in the principles of harm reduction, Nick and his Peer Case Manager were able to immediately start building rapport.

Nick opened up about his experience with addiction, the impact it has had on his relationships and the reasons why he feels ambivalent about decreasing or stopping his use. Within his work with his case manager, Nick has linked to resources such as the Boulder County Works program, medical care to address abscesses and has begun to explore what further behavioral health support may look like for him. Nick shared that talking about his trauma and current concerns helps him feel better and he is currently exploring therapy services that will help him continue to heal from the guilt and shame he associates with his use.

Nick and his case manager consistently meet weekly so she can continue to provide peer counseling and supportive counseling as well as help him connect with other resources in the community. Nick often reflects on how grateful he is to be a part of LEAD and how much he feels like it is good for him. All of these connections have not only improved Nick's overall quality of life, but have worked to serve and protect both Nick and our community.

Gene

Gene entered our Angel Initiative program in October of 2019. Gene, like many, self-medicated with Meth for health reasons. Gene was in the middle of the process of losing custody of his son and had lost his housing voucher due to being in jail for too long when he first entered our program. Gene regularly engaged with his case manager as he continued to reach his goals. Eventually, he received housing in Boulder and continues to do well managing his daily life.

Nate

Nate is someone who entered LEAD shortly after its start and is currently in a long-term residential treatment program. Nate shared a thank you to his Public Safety case manager, Michaela, supervisor, Emily, and the whole team. This was his reply after receiving a card Michaela sent him offering encouragement while he is away: "Hey Michaela, just wanted to say again how grateful I am and how good I've been feeling lately. I got the card from you guys

at LEAD and it made me feel great! You guys didn't have to do that, and it was insanely thoughtful and caring...even motivational. So please forward my thanks to Emily and the rest of the staff. Really amazing, thank you."

"Hey Michaela, just wanted to say again how grateful I am and how good I've been feeling lately. I got the card from you guys at LEAD and it made me feel great! You guys didn't have to do that, and it was insanely thoughtful and caring...even motivational. So please forward my thanks to Emily and the rest of the staff. Really amazing, thank you."

Marcus

Marcus was referred to LEAD in January 2019 following Marcus self-advocating with his probation officer and Longmont Law Enforcement (LE) to be referred to LEAD case management services. When Marcus initially connected with the team, he was experiencing housing insecurity and was using substances to cope with much of his emotional and physical discomfort. When initially interacting with case managers, Marcus was often agitated, felt pressured to solve many of his struggles in one day and often felt discouraged about the length of time it takes to address long standing psychosocial stressors. In August 2019, Marcus moved into housing for the first time in several years. Initially, this went well and Marcus began to take care of some of his ongoing physical and behavioral health concerns/symptoms which had a negative impact on his overall well-being for a significant amount of time. Through his housing opportunity, Marcus struggled to comply with parts of his lease. Case management walked alongside him while he built relationship with his landlord, advocated for himself where appropriate and asked questions to better understand the lease. Case management also walked alongside the landlord as they built relationship with Marcus, communicated their expectations and made decisions based on Marcus's continued behaviors. In January 2020, Marcus was asked to vacate his unit due to not meeting expectations of his lease. Case management continued to walk alongside Marcus as he returned to living in his car. Despite what felt like a significant setback to Marcus, he continued to engage with case management. At times, interactions would be challenging as he again felt frustrated with the timeline of sorting through some of his most pressing needs. Following this change from living in an apartment to living in his car, Marcus completed some paperwork with a case manager and one of the initial questions was "What brought you in today?" Marcus responded, "This just works". Marcus is

still struggling to find consistent housing he can afford. He has had a consistent goal of completing probation so he can move to another state where the cost of living isn't as high and he has a stronger primary support system. Through it all, he has remained engaged in his work with case management, even if there have been long periods of time he knows there is not anything tangible for us to provide for him. Marcus understands case management certainly doesn't have all the answers, and we certainly don't have all the resources to magically get people through life's challenges, but we do have the heart. We will continue to meet with Marcus and give it our all to foster a meaningful relationship because as Marcus said, "[That] just works."

Jake

Jake was referred to LEAD case management in June of 2019 and after several months of outreach, began regularly engaging with the team in September 2019. His case manager quickly discovered multiple community agencies had prohibited Jake from utilizing their services due to his substance use, mental health symptoms and corresponding behavior due to these behavioral health diagnoses. Subsequently, Jake turned to local hospitals for shelter, food and rest. Due to not having his foundational needs met consistently and struggling with his substance use and mental health symptoms, Jake was also generating multiple calls for service per week, resulting in frequent interactions with Law Enforcement for behavioral health concerns.

Despite being hesitant to trust new people, Jake quickly became comfortable with all LEAD staff and felt the LEAD office was one of the safest places in the community for him to be. Jake and his case manager spent many hours a week building coping skills related to living with symptoms associated with his behavioral health concerns. Jake was housed twice while working closely with LEAD; both times, Jake was asked to leave due to having trouble meeting expectations of his lease and the participating housing programs. In the winter of 2019/2020, Jake found himself on the roof of a grocery store experiencing behavioral health symptoms. Due to these symptoms, reality was distorted and he believed the safest action was for him to jump from the roof. He landed on the ground, experiencing significant injuries that resulted in many surgeries and a four week recovery in the hospital. Following this hospital admission, Jake needed to find a stable place to heal in and continue to recover. Jake, his case manager and multiple staff of Longmont Public Safety's case management team coordinated with hospital staff, multiple inpatient substance-misuse treatment centers and psychiatric hospitals to see if they would accept Jake. Each agency had a set of requirements that, for one reason or another, Jake did not meet. Despite all this, he remained positive and motivated to move forward. With much advocacy from the LEAD team, one agency agreed to provide shelter until a long-term opportunity could be found. During this time, Jake decided to put in an

application to a long-term sober living community in rural Colorado. Acceptance into this sober living community/agency required many action steps for him to complete.

As a result of his determination, Jake was accepted to this long term sober living community. He boarded a bus and arrived at his new place to call home just before the most demanding restrictions of COVID-19 took effect. It seemed like a modern day miracle all of this was accomplished amidst an ever growing pandemic. Jake participated in this program for nearly 10 weeks and was checking in with his case manager regularly before his behavioral health symptoms started to negatively impact his experience with his new community. Despite much effort to help him implement and expand his coping skills, he decided to leave this community and return to Longmont/Boulder. Despite the anticipation of watching him experience significant distress, Jake remained doing well and enrolled in another sober living program in Boulder which supports the residents with housing, support services, and job skills building on site. He did well at this program for approximately 3-4 months.

Although we are at another crossroads which feels like a “setback”, Jake is now at a place where consistent meetings with his case manager can start again and he has learned a lot from this period of time when shelter and care surrounded him. We will continue to walk alongside him as he experiences life’s joys and sorrows and makes informed choices about his recovery.

Kelly

Kelly was referred into Longmont Public Safety’s Community Health program in late January 2020.

Kelly was referred due to accessing the emergency departments to treat symptoms of chronic health conditions due to significant barriers to accessing a primary care provider for treatment. In the three months prior to her referral to Longmont Public Safety’s Community Health program, Kelly was transported by Emergency Medical Services to the emergency department (ED) five times. Kelly did not have a working phone number at the time and after extensive outreach, Kelly’s primary case manager was finally able to meet her in mid-February 2020.

Kelly’s case manager learned that Kelly faced two significant barriers to connecting to her Primary Care Physician (PCP): a language barrier and a transportation barrier. Kelly and her case manager worked to overcome their own language barrier and established a solid solution to make sure they were able to communicate and build meaningful relationship. Kelly’s case manager also provided transportation and helped Kelly learn how to schedule appointments with her PCP, an OB/GYN, and a Physical Therapist. Kelly’s case manager also helped her navigate the buses from her home to all the clinics. When it was determined Kelly needed to have surgery at University Hospital, her case manager arranged transportation for Kelly so she

was able to attend pre-op and post-op appointments. We also worked together with our medical personnel through the Community Health program to review medical records and have conversations with Kelly about the importance of seeing her doctor frequently to help manage a condition that could be fatal if she does not keep up with treatment. Our Community Health team paramedic also walked her through her medications, their purpose, and their proper use.

Kelly was discharged from the program in March after she could manage her health and appointments without outside help. Since her work with the Community Health program, she has had no EMS transports to the ED and continues to schedule and attend her PCP appointments.

Alex

Alex is a participant of Longmont Public Safety's Community Health Program. Alex has faced barriers when it comes to his health for a long time. His health condition causes sudden drops in blood glucose which results in a related seizure disorder. Fortunately, there is medical equipment that alerts someone when their blood glucose is dropping; however, Medicaid does not cover this specific medical equipment. After exploring several alternative options (other than Medicaid coverage), we were able to access funds to provide the medical equipment for Alex so that he can monitor his blood glucose more effectively which decreases the chances he will have a seizure. This allows Alex to spend more time caring for his overall health, his son, their home and nurturing meaningful connection with his family.

Jamie

Jamie was referred to the Longmont LEAD program in February of 2019. Upon beginning our relationship with him, he expressed his desire to return to a sober living community in rural Colorado. He shared this community had been a previous support to him and he believed the self-directed programming at this community would again support him in achieving his goals, which were to minimize his substance use and increase his reliability and contribution to his community and to society.

Early in his work with LEAD, Jamie identified his experience of homelessness as one of the biggest barriers he had when it came to maintaining sobriety. After a few appointments, Jamie's engagement with LEAD fizzled due to the need to survive on the street ultimately being a more pressing demand on his life. In January of 2020 Jamie reached out to LEAD, expressing his desire to re-engage in order to continue to work on his goals, described above.

Jamie and his current case manager began the intake process with a couple of intensive residential treatment programs. Jamie actively participated in this process and was placed on

waitlists for these residential programs; which is a normal part of the process. Jamie continued to stay engaged with LEAD and worked on a safety plan for living on the street. He also began to sporadically attend AA gatherings. During this time, Jamie and his case manager explored housing options. Jamie was able to apply for and move in to a LEAD apartment.

Jamie moved into the apartment in April 2020. Although there have been some bumps along the way, Jamie has maintained his housing with great success and recently was placed on a waitlist for permanent housing. Throughout his time living in his apartment, Jamie has focused on building skills aligned with advocating for himself, making informed choices about his substance use, addressing chronic medical conditions following years of not having consistent and safe shelter and expanded his primary support system. Jamie is regularly attending support group meetings where he finds fellowship and friends. He also looks forward to entering the workforce again and continuing to heal through meaningful connection with others.

Victor

One of our first LEAD referrals was a well-known community member Victor, who had been struggling with homelessness and substance use for over 15 years. Victor frequently interfaced with Law Enforcement throughout the years, sometimes multiple times a day and had the fifth-most individual contacts with Patrol in the year prior to his referral. These contacts consisted mostly of officers issuing tickets for open container and trespassing as Victor attempted to find safe places to be while living on the street. Officers chose to refer Victor to LEAD because of the frequency and nature of his calls for service. Once our case management team made contact, it was discovered Victor's feet were causing him significant pain. Victor was in so much pain, it made it difficult to walk, which only fueled his desire to use; in order to numb the physical [and emotional] pain he had been enduring. Victor and his case manager decided it was best to start by taking him to see a primary care provider in order to address the pain in his feet. While doing this tangible task, they began building a meaningful relationship, which proved to be the foundation to Victor's healing process.

Victor continued to build a relationship with each case manager on the case management team and felt the support of a true community. He worked with his case manager to complete his probation expectations and take care of all lingering legal expectations from years of receiving summonses, as described above.

Victor moved into a LEAD apartment in the fall of 2018. It took time for Victor to relearn what it meant to care for himself and his surroundings after nearly two decades on the street. Victor, his case manager and a trusting community partner helped break down barriers for Victor to reestablish his permanent residency and he became eligible for stable income. Once he earned

stable income, Victor was able to transition from a LEAD apartment to a permanent housing opportunity.

Even while all these great events were happening, Victor continued to experience emotional pain that resulted in him choosing to numb with his use. This is not unique to Victor and the LEAD case management team knew it was imperative to Victor's well-being to encourage and provide opportunity for him to build meaningful relationship with people other than the professionals supporting him.

Today, Victor has built a primary support system and a network of friendships that sustain him through most of life's sorrows. He continues to struggle from time to time; this is what makes him deeply human. What matters is he has the support of people he loves and cares about which is the opposite of the isolation he experienced for some many years. Many of Longmont Public Safety's veteran officers would have never guessed Victor would be in the position he is in today when they referred him to LEAD in 2018. Today, Victor is unknown to newly hired officers and veteran officers sometimes do not even recognize him. Victor's relationship with Law Enforcement is now one he has nurtured on his terms and he is extremely grateful for the Longmont Public Safety department and our shared belief [alongside Victor] that his life matters.

Sheri

Sheri was referred to LEAD in December 2019. One of the Officers on the CORE team had consistent contact with Sheri and referred her to LEAD following Sheri telling him she was desperate for help finding inpatient treatment and help navigating other resources. Her ultimate goal has always been to seek the care she needs to be able to reunify with her three young children.

From the very beginning of their relationship, Sheri's LEAD case manager noticed and affirmed Sheri's efforts to stabilize her mental health and create an environment where she can provide the best life for her children. As she worked hard to stabilize her mental health, Sheri identified she needed to address her substance use and find other ways to cope with the distress she often feels due to her mental health disorder and life experience. Sheri identified steps to begin her recovery and her LEAD case manager helped link her to the care she envisioned for herself, as well as provide ongoing care coordination.

Sheri has also engaged with a sober community and feels warmly accepted by this community. Sheri values being able to support and seek support from a group of peers that weave one's faith with one's recovery as they are not exclusive to Sheri. As they built a meaningful relationship, Sheri's LEAD case manager has started addressing relapse prevention plans,

creating goals aligned with improving Sheri's overall quality of life. Most recently, Sheri's LEAD case manager had the opportunity to be an integral part in Sheri working with the courts to determine custody of her children; in the past, this would have been an immensely challenging trigger that could have led to an undesirable outcome.

Although the outcome of the custody hearings and the pandemic have uprooted much of Sheri's ways of coping through crisis, the LEAD case management team continues to believe Sheri has the skillset to determine her best decisions and continue to be ready to again work closely with her when she is feeling ready to be vulnerable with our staff again.

Trace

Trace was referred to LEAD case management in July of 2018. Trace had been struggling with substance use for some time, was no longer living with his daughters or their mother and was struggling to find meaningful work. Trace was living with his parents and his substance use was placing a significant strain on his relationship with them, despite their family historically being close.

Case management started by asking Trace what contributed to his sense of self, what areas of his life he would like to see be different, and what areas of his life he currently liked. Trace responded well to this form of relationship building and quickly built trust with his case managers. Trace started to engage in an intensive outpatient treatment program where he began his initial journey exploring the root causes of his choices to use substances. He eventually outgrew this group and explored additional supports. Trace began looking into work again and moved into a LEAD apartment. Trace did well there despite several ups-and-downs with various roommates.

After working very closely with case management staff to address the root causes of his substance use, Trace decided to enter into a long-term residential treatment program in Northern Colorado in January 2019. Trace only participated in this program for a short time due to extenuating circumstances that caused him to return to Longmont. Trace felt like he was floundering and again turned to the LEAD staff to explore how to heal from the last six months' sorrows. Trace ultimately decided to return to the long-term residential treatment facility and participated well for nearly 10 months. He recently "graduated" from the program meeting the program's criteria to receive a vehicle upon program completion, something that will be invaluable to Trace as he continues to build his primary supports and begin work.

Trace moved into a sober living house with some financial assistance from LEAD to break down the barriers of initial deposit and first month's rent. Trace has since started a job and is planning

to enroll in school and/or technical training in order to advance his career. Trace would like to reach a place where he has the financial means to provide for his children in a meaningful way. Having a team of case managers who deeply care about Trace's ambitions and dreams as well as value who he is as a person has been profoundly impactful to his recovery. Empowering others through care and love is as vital as breaking down barriers to access the appropriate resources to create change in one's life.

Karla, Detective Campanella, and Case Manager Annabel

Each day the case managers strive to serve and build relationships with their participants. They also continue to build relationships with the detectives and patrol officers to help them to understand more about Longmont Public Safety's Case Management team (often referred to as the LEAD team due to the prominence of the LEAD program and because it's shorter than saying, "Longmont Public Safety's Case Management team), our approach and to facilitate referrals. After a recent referral to the Angel Initiative, the following email was sent to the LEAD Program Director and LEAD Program Manager from one of Longmont's detectives, Sandie Campanella:

"I wanted to express my profound appreciation and gratitude for Annabel. She was the on-call LEAD case manager on Thursday (01/23/20) when a DV (Domestic Violence) victim with whom I've worked for nine years came in, asking me for help. She has an extensive trauma history and does not really trust the system or the police. She also struggles with addiction and has long used drugs and alcohol to cope with her dire circumstances. However, on that pivotal day, she chose to come here instead of "burying her face in a bowl of meth." We have discussed the possibility of rehab for years and she was never ready – until last Thursday.

I had never requested LEAD support in the past and didn't even specifically know how to get their help (my bad!). Upon calling the LEAD on-call number, I spoke with Annabel and instantly felt SO much relief! In less than five minutes, she responded to Detectives where my victim was waiting. After introducing Annabel to my victim, I left the room. Annabel was able to cultivate trust with her (not easily accomplished) and arranged for another meeting and possible entry into the Angel program. I care for this victim who has suffered so much and often seems mired in self-destructive and unhealthy coping behaviors. I am beyond grateful for Annabel's intervention and inherent kindness that allowed her to connect with my victim.

Words cannot truly express how meaningful and life-changing this meeting was. I just wanted to share.”

“I am beyond grateful for Annabel’s intervention and inherent kindness that allowed her to connect with my victim. Words cannot truly express how meaningful and life-changing this meeting was.”

– Detective Sandie Campanella

David

One of our case managers has been working with David about a year and a half. They have a relationship that has been built on trust, compassion and mutual understanding. He had been doing very well for some time and returned to living with his girlfriend and his daughter in their apartment. David was also working a full time job and made significant changes surrounding his substance use. When one of life’s “big bumps” disrupted this his journey, he turned to his case manager for help. He and his girlfriend had experienced a big conflict and the conflict ended with David needing to leave the apartment with very few resources to help him address the crisis, calm down and do what needed to happen in order to return to the apartment. His case manager met with him and de-escalated the situation, knowing how important it was to David to go through this crisis with someone who knew and understood him, rather than a Law Enforcement Officer he did not know or trust. In similar circumstances, Law Enforcement had been called and it often resulted in further charges or setbacks for him. Following the case manager’s work in de-escalating the situation, she coordinated with David’s girlfriend and returned him home. She received the following text from his girlfriend a short while after dropping David off at home:

“Morgan - I freaking love you! You are so awesome. This is the first time in my entire life that I have genuinely felt a sense of community and truly felt connected to a support system of any kind that responded as fast as you did. In my opinion, feeling connected to a support system such as this one gave me a greater sense of purpose today and inspired me to hopefully be able to give back too. The feeling of helplessness I have endured in the last 2 days has been indescribable. I truly felt defeated but you helped me out of that and I am soooo grateful for you. God bless you. You're an amazing human being. It brings me to tears thinking about the good person you have to be to do what you do. Thank you so much, you should be proud.” The skill set shown in this interaction is something Morgan brings to our team consistently and

although not recognized in this way (through heartwarming texts) all that often, these kinds of situations are handled regularly by our case management team.

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Jason, Case Management, and the District Attorney

Longmont Public Safety Case Management emphasizes the importance of building meaningful relationship at every intersection of our work; this includes building meaningful relationship with our community partners. Recently, one of the case managers was coordinating care with the Boulder County District Attorney's Office and the Boulder County Public Defenders' Office per our usual care coordination regarding ongoing or pending legal hearings for various participants. Within this particular coordination effort, our case manager attended a virtual court hearing with Jason, a participant in custody at our County Jail. At this hearing, the representing attorney for the DA's Office shared with the representing Public Defender and the presiding judge, they have worked with the LEAD program and "they're a solid program, I trust them". The result of such conversation at the hearing was a reduced sentence that positively impacted Jason's ability to access the care and treatment he was hoping for. The group, including the judge, agreed this was a good plan for Jason and work began to find a sober living community that would support him in his recovery journey. While finishing his sentence, he has connected with mental health services while in custody and proactive care coordination has taken place in order to ensure he will be released with medications needed to seamlessly continue to take the medicine he believes to be so helpful. The care coordination efforts will

undoubtedly prepare Jason for integrating into the community of his choice and building skills to maintain the care he believes to be imperative to his overall well-being.

The people we serve continue to inspire us with their tenacity and courage. These are only a few examples of how the Longmont Public Safety Case Management team continues to work toward a more safe, just and inclusive community on behalf of and with some of Longmont's most vulnerable community members. This work is not always linear and is often like the stories of our own lives; full of both joy and hardship. Although the people our team works with may experience life events many of us do not experience, they are also people who have the capacity to be active participants in the richest parts of our community, where people contribute and feel uplifted, loved and valued in return. We know the participants we walk alongside have gifts, talents and expertise we value and hold in high regard. We hold the belief that with some intention, love and care, all people will benefit from the healing power of human connection; which is the heart of harm reduction.