Boulder County: Community of Hope

White Paper
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Community of hope

Moving toward a more family driven, prevention oriented and holistic safety net.
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Boulder County: Community of Hope

Introduction

On September 26, 2014, we gathered our staff and community partners for a Boulder County Community of Hope Summit. The purpose was two-fold: to celebrate our excellent outcomes with children and families and to begin a conversation around our community’s safety net. We have such an excellent community of partners in Boulder County, and as a result our safety net is very strong. We also know we have opportunities to build strength by ensuring we have collaborative partnerships based on common goals, using data-driven community indicators to measure need and progress, and utilizing a funding and implementation system that is informed by our community. The Community of Hope Summit was designed to focus on these opportunities.

The Boulder County community is a leader in Colorado around outcomes for those we serve. We also recognize that by strengthening and deepening our collaborations and connections among our agencies - always keeping our clients at the forefront of our thinking - we will continue to move toward our ultimate goal: a more family driven, prevention oriented, and holistic approach to serving our community.

That is, a generative safety net.

The Generative Model for Human Services Delivery was developed to help guide communities’ work on evolving their systems. The model prompts systems to be supportive of people in need in ways that are fully timely and accessible, de-stigmatizing, and ultimately informed by the community members themselves. Boulder County is embracing this concept alongside the Social Determinants of Health model, which represents the many ways in which people can be supported in their quest to live happy, healthy lives.

The Community of Hope Summit had two important goals: develop next steps in our collective work, and set us off on these steps together. In support of these goals, we’ve read through all 1,260 statements made at the event, transcribed them into a spreadsheet, and analyzed them for guidance. Let’s take a look at some of the early messages we’re getting from this information.

Table Discussions - Major Themes

Here are some of the common themes that emerged from discussions at the 22 tables during the summit:

- Through collaboration and communication, we are doing a better job at serving families and individuals when crisis hits.
- Keeping the family voice in the center, and in focus, helps us all succeed; we need to work together to find more ways to do this.
• Less duplication of services and more coordination of services will help us achieve better outcomes.
• Collaboration is critical to our long-term success as a community. We’ve come a long way, and have ample opportunity to continue our progress.
• Smaller, focused working groups on specific topics and issues are needed to continue this progress.
• Sharing and using data in meaningful ways to improve decision making across all levels will also help us make further progress.
• Education in all forms, from early childhood through adulthood, is one of the most important tools to combat inter-generational poverty and improve outcomes; we should increase our focus on education, particularly early childhood.
• We need to focus collectively on the development of additional affordable housing resources across our community, including a comprehensive and cohesive approach to advocacy.
• Leadership’s support of front-line workers and collaborative efforts is critical to long-term success.
• Policies and regulations need work to allow for and support generative work. Our elected and appointed leaders should advocate for these changes.

Table Discussions – Suggestions for Action

• Share and use data effectively
• Improve communication across the county
• Enhance collaboration between agencies, families, and the county
• Keep families first and foremost in all our work
• Standardize processes and service delivery
• Increase access to services like transportation
• Work more closely with schools
• Work on policy

Table Discussions – Suggestions for Next Steps

• Gather work groups / collaboratives of interested parties to work on initiatives from the data
• Engage leadership to work on policy changes to support this movement and focus on the Social Determinants of Health
• Continue marketing efforts to keep these issues front and center
• Collaboratively create a 12-24 month work plan that incorporates the COH feedback

Your post-event surveys collectively and repeatedly expressed a desire to break the conversation down into more focused topic areas, take deeper dives into the data and create next steps collectively. Please look for invitations for additional community conversations in the future, as well as more opportunities to provide input and feedback in a variety of ways.
Table Discussions– Takeaways by Objective

We had four major objectives (questions to address) during the table discussions: 1) what’s working well today, 2) our areas of greatest opportunity moving forward, 3) major challenges we face, and 4) next steps in our collective work.

Below is a “word cloud” of the keywords from the “what’s working well” section of our table discussions. The larger a word appears, the more frequently it was mentioned in a table’s conversation.

Looking at this, we might say that our approach to working in collaboration as a community to provide services is benefiting families. But let’s dig deeper. Here are some phrases recorded at the table discussions related to these top keywords above.

Community (referenced 32 times):
- The collaborations and relationships that exist between Boulder County and community partners are increasingly strong.
- We have a community health focus that is tying insurance to health outcomes.
- We have stronger community-based case management.
- The Social Determinants of Health model is now becoming more widely utilized throughout the community.
- Family engagement is being strengthened by our community network.
- We have a demonstrated commitment to investments in the community.
- There is community confidence to commit taxpayer funding to the safety net.
- We have a sense of community connection.
Dental Aid hygienists in the **community** are moving away from reactive to proactive approach to services.

**Families** or **Family** (referenced 63 times):
- We have a food distribution system that is coordinating food assistance with the food banks; emergency service agencies have de-stigmatized access to food and reduced hunger without stigma for **families**.
- The first point of contact with any agency is becoming more seamless; the **family** is able to get the support right away when the need presents.
- We’ve had incredible changes in Child Welfare! We are seeing the shift to where all partners are involved in keeping **families** together.
- The **Family** is involved from the word “go”.
- We have more collaboration and coordination between **families**, DHHS, and community partners.
- We are hearing the voices of **families** from the beginning; **Families** drive the train.
- **Family** engagement is being strengthened by our community network.
- Support for **families** is now better based on the root cause of their crisis and not merely a symptom.
- **Families** see change now, making it easier for them to buy in to the work we do.
- Hope is inspiring our practices with **families**.
- We are shifting to **family** as the experts
- We are helping Empower **families** to talk to and learn from each other.
- We are aligning services to get on the same page on how we work with **families**.
- Our **Family** Resource Schools and **Family** Resource Centers are working well.

**Services** (referenced 31 times):
- Site-based **services** are tremendous in the Family Resource School and Family Resource Center model.
- We are seeing greater accessibility of **services**.
- We have more crossover **services** for clients before they are in crisis.
- We are approaching housing with wrap around **services**.
- We are coming together across agencies for **services** for home visits and beginning to think through the coordination of those **services**.
- There is a desire from all folks to integrate and deliver site-based **services**.
- We are now balancing **services** better without overwhelming families.
- We are aligning **services** to get on the same page about how we work with families.
- **Services** have been moved upstream due to collaboration.

**Collaboration** (referenced 19 times):
- **Collaboration** is bringing agencies together.
- **Collaboration** and relationships that exist between Boulder County and community partners are increasingly strong.
- We have a real commitment to **collaboration**.
- **Collaboration** is up, competition is down.
- **Collaboration** and coordination between families, DHHS, and partners is stronger.
• Home visitation collaboration is now more approachable.
• We are seeing increased education and collaboration.
• We are funding collaboration that helps families over the long term.
• We now have more intentional collaboration and improved systems integration.

Now, when we go back to our original statement (our approach to working in collaboration as a community to provide services is benefiting families), we see that while it is accurate, it also has many opportunities for additional exploration. As we move forward with this work, many of the above statements will become part of a planning effort around making our safety net more family driven, prevention oriented, and holistic. This first set – what’s working well - shows us that we’re already making good progress, and gives us a good idea of things we can continue to strengthen.

But what about what’s not working as well? Clearly that is equally important to us in this work. Here is the word cloud for the "major challenges we face to maximizing our opportunities":

**What are the major challenges we face?**

There are many takeaways here that are useful, certainly. Let’s look first at housing (referenced 27 times):

• There is limited housing stock.
• We face high cost and low availability of transitional and permanent housing.
• There is a lack of affordable housing.
• We don’t have enough affordable housing.
• The cost of housing is a barrier for too many community members.
• We need more housing for domestic violence survivors – from 3 months to 2 years.
• Zoning limits in the county are preventing additional affordable housing facilities to be built.
• Rental housing in Boulder County has an extremely low vacancy rate, driving up prices.

This is not necessarily surprising, but very helpful when seen as a whole. Clearly, this will need to continue to be an area of focus for us over the next 12-24 months. The questions might now be: how do we as a community come together to ensure more affordable housing resources are available in Boulder County? What can we do collectively to create a vision for affordable housing that helps us all meet the needs of our clients?

Now let’s review funding (referenced 17 times):
• Funding is being siloed; we need to leverage it better.
• We have too many funding barriers and siloes.
• We need funding for building more affordable housing.
• Disasters created less money and low funding for services.
• There isn’t enough transparency of funding and information about community engagement.
• There are funding siloes and limitations.
• We have too many funding barriers (this impacts seamless services; for example, Connect for Health Colorado vs. Medicaid).
• We need more resources, including funding for housing.
• Disasters have created a low funding pool alongside increased need and compassion fatigue.
• Housing funding is rigid.
• There isn’t enough advocacy at the state and fed level for flexible funding.
• We need to focus more on Funding availability and priority in terms of policy.

A key takeaway here? Perhaps that much more needs to be done (driven by a collective force within Boulder County) to help create more flexibility with funding at the federal and state level, with one focus area being affordable housing development.
Now, let’s look at the word cloud for “the biggest opportunities for us to improve our safety net work together”:

**What are the biggest opportunities we have?**

When it comes to opportunities, it’s clear that services, education, funding, housing, communication, families, and access are all standouts. As it was with “what’s working well,” Community was also a major piece of the opportunity puzzle. Let’s look more closely:

Participants referenced **services** 37 times:

- Create a variety of **services** at multiple locations.
- Integrate **services** to provide easier access (for example, a TANF worker at Mental Health Partners).
- Integrate **services** to remove the confusion of how or where to get help.
- Strengthen coordinated case management and provide a one-stop shop with access to multiple **services**.
- Increasingly wrap **services** around families and individuals.
- Identify and create more **services** for young people aging out of the system.
- Establish a BCHelp-type system that includes most **services**.
- Set up **services** for people age 18 to 25 based on brain development.
- Increase collaboration and integration of **services** to meet people where they are.
- Looking at each role, strengthen the seamlessness of **services**.
- Increase collaboration in areas that overlap non-profit-delivered **services**.
- Create more education about **services** to reduce duplication.
Here are the more common takeaways from **education** (referenced 28 times):

- Within coordinated case management approach, provide **education** about programs, services, referral processes, and the population across the county.
- Use data to create models for identifying outreach and **education** opportunities, and for locating gaps and risks.
- Create **educational** videos that highlight agency programs for both staff and clients.
- Develop more family planning **education**, including about birth control and the realities of raising a child.
- Provide more **education** on community resources.
- Get more **education** to clients on health and well-being before crises occur.
- Provide more prevention **education** for the community.
- Increase access and availability of early childhood **education** resources.
- Provide **education** around health insurance, including how to use it and how it helps boost preventive care.
- Develop more **education** and skill building for staff to better engage families.
- Provide more **education** of the private sector about the benefits of their involvement.
- Provide more **education** in the schools on available programs and services.

And while **communication** (referenced 15 times) is closely related to **education**, we see some standouts here as well:

- Create more opportunities for collaboration and **communication** between private and public agencies and organizations.
- Reduce the duplication and redundancy of **communications**.
- Provide more cross-sector **communication** about implementation successes.
- Increase transparency with **communication**: opportunities to overcome barriers, information about specific program eligibility requirements.
- Increase **communication** with clients about services and potential early intervention points.
- Establish common **communications** to better convey our safety net framework.
- Increase **communication** to those who have authority over funding.

And a look at **community** (referenced 42 times) reveals some interesting opportunities:

- Make more **community** referrals.
- Make sure all **community** partners know what other partners are involved with a family.
- Create a **community**-wide plan for each family.
- Create a sincere atmosphere for the **community** (the family) to be involved in planning and development of services.
- Expand the county’s **community** voice united in advocacy (instead of numerous individual voices), focusing particularly on the legislative level.
- Put mechanisms and systems in place to connect **community** partners more deeply and frequently; use as an opportunity to look at gaps and expand partner scope.
- Create a prevention movement – think big and get **community** buy-in.
- Focus on funding opportunities for **community**-based organizations with services that span the community.
- Find, support, and train more leaders from within our **community**.
- Work more with closely with schools, including **community** colleges.

And participants mentioned **data** 15 times in terms of opportunities:
- Use **data** to determine focus for funding.
- Take **data** sharing to the next level with common goals and measures.
- Use **data** to determine what’s working well.
- Remove barriers to **data** sharing.
- Look at all **data** for clients to get services to them before they are in crisis.
- Shift to longer-term analysis using longer-term **data**.
- Ensure the **data** support movement toward the larger goals.
- Share and integrate **data** outcomes between community partners.
- Make it easier for community partners to access all **data**.
- Use **data** to inform our progress and next steps.

**Data** also came up 10 times in table discussions around challenges, particularly with regard to the utilization of shared data and building a system of analysis of the data that helps us understand better how our work is impacting our community. Data was also referenced numerous times in the “next steps” discussions. As noted in the “Where We Go” section at the end of this paper, the collaborative development of common shared data-sets alongside community-wide indicators seems to be a critical next step in this work.

Our opportunities for working together to improve our safety net are many and varied. However, these key takeaways will help us focus our efforts in the months and years to come. Speaking of which, here is the word cloud for “Next Steps”:

What are the next steps in our work together?
Here, we see many of the same ideas as we did in the “What’s Working Well” word cloud, which seems to indicate a need to focus largely on continuing to improve many of the areas of progress we’ve already seen. Beyond community and families, housing and data are again stand-outs, and the recommendations for next steps are similar to the “Opportunities” section. Additional highlights include the mention of work (referenced 13 times):

- Create shared ownership, risk, and community involvement, and invest in more work efforts at all levels.
- Focus on economic opportunity, housing, and workforce development.
- Ensure child care is offered at the workplace.
- Take care of the workforce.
- Focus on workplace wellness.

Another takeaway is the concept of “sharing” or “shared” (referenced 6 times)

- Take care of the health of the workforce by increasing shared ownership.
- Reduce barriers to shared data.
- Create and use shared indicators.
- Connect data to shared data and outcomes.
- View shared funding opportunities across agencies.

A more comprehensive focus on the Boulder County workplace (including workforce training and development, work supports, and wellness) certainly matches the vision of a more family driven, prevention oriented, and holistic safety net.

We have known that working together as a community is critical when it comes to ensuring Boulder County residents have the full range of services they need when they need them. Combined with the major Community of Hope takeaways on data, we also clearly have momentum for evolving this partnership to a new level by developing shared sets of community indicators, opening the doors to more and better data sharing, and creating a shared approach to utilizing funding.

The Six Safety Net Pillars

For the Community of Hope Summit discussions, we also provided a set of safety net “pillars” to help guide the conversations around the four primary objectives. These pillars represent six major areas of community health and are tied very closely to the Social Determinants of Health model. This model is the basis for the work of organizations around the world that are focusing on addressing inequities affecting people’s well-being. These six pillars encompass all of the work we do with our partners here in Boulder County:
Below is a sample of the information collected at the Community of Hope Summit organized by these pillars. Please note that this is a sample and is designed to demonstrate the diversity of input received. While “Opportunities” may not seem to match “Next Steps” in every case, all elements will need to be considered holistically to determine the future phases of Community of Hope work.

**Education**

**What’s working well**
- Parenting classes
- Site-based services like Family Resource Centers
- Our collective early childhood focus

**Opportunities**
- Create more Early Head Start slots
- Add education in schools on available programs and services
- Increase collaboration between schools and the child welfare community
- Engage families and mentor them to improve outcomes

**Challenges**
- We need to educate the public and policy makers on the educational needs of our community
- We must improve access to current resources by lowering barriers and increasing affordable slots
- We need assistance from leadership in defragmenting the education system

**Next Steps**
- Create a resources guide for families to improve their access to services
- Create a video of all resources in the Safety Net
- Expand Early Childhood opportunities across Boulder County
- Educate decision-makers about specific programs and how they can support them

**Employment & Income Stability**

**What’s working well**
- We are making referrals for our families through Work Supports
- We have enhanced access to Child Care (CCAP) so parents can maintain employment
- We have good access to financial and food services within DHHS

**Opportunities**
- Focus on job retention programming, like Circles
• Increase job opportunities for high-barrier clients
• Shift from job focus to career focus

Challenges
• Increase access to current employment supportive services at Workforce
• Increase child care slots
• Create jobs with livable wages, not just minimum wage

Next Steps
• Increase the slots in quality child care
• Create incentives for employers to hire and house high risk populations
• Provide more on-the-job training internships that can lead to full-time work
• Create a system of work cards for undocumented families
• Provide more job training

Access to Adequate Food and Nutrition

What’s working well
• Emergency food assistance and food banks
• Food distribution system that has reduced stigma
• Grocery assistance at the farmers markets
• WIC’s partnership with Family and Children Services

Opportunities
• Provide “food prescriptions” where doctors prescribe food to a Hospital Food Market
• Create more access to free & reduced lunches for children
• Develop a “Food R Us” model – through the use of subsidizing vouchers

Health and Well-Being

What’s working well
• Health care safety net: Medicaid expansion, using PEAK as a launching pad for other resources
• Clinica model for preventive physical and mental health
• Programs like Genesis, Genesister, Nurse-Family-Partnerships, Parents As Teachers, Dental Aid
• We have more mental health services
• Our Social Determinants of Health focus

Opportunities
• Expand addiction recovery resources
• Provide more family planning education, increasing health & sexual education in schools
• Focus on workplace wellness
• Recruit more specialty care providers to Boulder County
• Expand access to long-term reversible birth control
• Expand and integrate Genesister and Genesis to access housing

Challenges
• Utilize Navigators to help access services
• Health care links for infants/toddlers
• Less punitive resources for mental health services

Next Steps
• Develop creative linkages (i.e., schools & Dental Aid)
• Use ACA as entry to connecting with additional services
• Take care of the health of the workforce

Housing

What's working well
• Housing with wrap-around services
• The increase in housing programs
• Collaborative management & access to housing resources
• Housing policy

Opportunities
• Provide more family shelter
• Focus on more supportive housing
• Create a Gaps Group for housing
• Focus on more relationship building with landlord community

Challenges
• Limited housing stock
• Tenant instability
• Extremely low vacancy rates
• Low stock of supportive housing
• Zoning can make it difficult to create additional affordable housing

Next Steps
• Engage landlords in conversations about affordable housing
• Work for policy change in housing, funding and zoning
• Use more creative thinking around housing
• Create a collective vision and shared priorities among all agencies and stakeholders around economic opportunity, housing and Workforce development
Safety

What’s working well
- Family focus and family engagement
- Domestic Abuse Review Committee (DARC) that involves Longmont Police Department, LEVI, Child Protection with regular meetings
- Home visitation
- Kinship support
- Family Resource Center/Family Resource School supportive services
- Availability and use of data

Opportunities
- Adult protection – focus on more collaboration and a multi-disciplinary approach
- Develop a coordinated after-hours response for emergencies
- Focus on higher intensity services offered with adoption
- Provide more respite care for foster care
- Focus on human trafficking

Challenges
- Resourcing the very high risk persistent cases
- Recruitment for foster care/adoption
- BCDHHS closing cases too soon
- Lack of domestic violence education in schools and other agencies
- There is no common language between communities, agencies, program-to-program, and agency-to-family

Next Steps
- Continue enhancing the family voice – similar to the Illinois “Safe Families” non-governmental approach
- Empower families
- Work with teenagers in foster care
- Create resources for data collection and information sharing that is driven by families

All Six Pillars

What’s working well
- Solution-focused thinking has become the norm within the community
- Communication between agencies has grown in real and substantive ways
- Complex client meetings with multiple agencies are led by the families
- There is more cooperative case management between Boulder County and community partners
- Outreach, policy changes, and marketing efforts are working together to allow systematic changes that keep families out of poverty
Opportunities

- Collaborate with school districts
- Share integrated data outcomes and ability to access these data
- Identify gaps in services and work to fill them collaboratively
- Increase communication to decrease duplication
- Leverage funding with cross-community grants and shared initiatives
- Interject Social Determinants focus into local policy, and practice inclusion across all systems
- Find more ways to amplify the family voice within the system
- Focus on supportive services for children age 0 through 5
- Improve access for families to find services when they need them (211 navigators)

Challenges

- Cultural and language barriers to access services and information
- Silos of agencies and government
- Maintaining client confidentiality while increasing inter-agency collaboration
- Less money and lower funding for non-repair-services created by disasters
- Moving from crisis to prevention requires leap-frogging from where we are now
- Access to transportation and housing that stabilize families
- Getting school districts on board and buy-in when they also have staffing shortages

Next Steps

- Create joint agency communication conversations – gather the voice of the neighborhood
- Continue the Community of Hope Summits and engage in these dialogs
- Create a county-wide strategy based on the six priority pillars
- Utilize long term data analysis to inform and change decision making, including robust data collection and data sharing systems
- Use social media to increase community knowledge of preventive services
- Create shared ownership, risk and community involvement in more work efforts at all levels

Where Do We Go From Here?

We have many options in front of us in terms of advancing the excellent and thoughtful work done at the 2014 Community of Hope Summit. Among them, **supporting working groups** to further analyze the top takeaways and create a community-wide action plan that prioritizes action steps and begins to lay the groundwork for an increasingly holistic approach to human services funding in Boulder County. We will continue to focus on many of the summit’s top takeaways for opportunities (including services, education, communication, data). A team of county and community leaders is in the beginning stages of discussing the Community of Hope framework, including improving coordination and
addressing the issues identified at the summit. Additional communications will outline this team’s progress.

In order to address the major areas of focus in this paper, it seems clear that we will need to utilize a set of community-wide indicators on which we can begin to build our action plan and target our work toward. Some work on community indicators has already been done, and our work ahead will take this into account during further development of the Community of Hope framework. As identified at the summit, data is a central piece of this work, representing a support for measuring our progress and defining our opportunities in a consistent and compelling way. Simultaneously, we will strengthen our efforts to support community-wide data sharing that could boost all of our work, collectively and individually.

We are also committed to enhancing opportunities for communication in three major areas. We know our partners want to hear more from us about what we’re doing, why we’re doing it, and the opportunities that are being created as a result of our approach to housing and human services delivery. At the same time, we also want to hear more directly and regularly from our partners about their work and the opportunities they see, as well as questions for us. We also want to help ensure there are more opportunities for our partners to hear from each other. We plan to support this as part of our overall approach to helping lead this Community of Hope initiative.

In that spirit, you’ll be hearing more from us in the weeks and months to come. In addition to this white paper, we have developed a Community of Hope electronic newsletter that will provide regular updates on the work being done to build on the foundation that the summit provided. There is a set of web pages focusing on the Community of Hope initiative, including partner stories and some of the takeaways from the summit. And in partnership with our community, we will also develop and distribute a 2015 Community of Hope Report that digs deeper into some of the summit’s major takeaways and begins to anticipate what our safety net looks like when it is more generative.

One very important note: in order for the Community of Hope initiative to be truly generative, increasingly the work focus will evolve into our community itself: non-profit partners, governmental partners and other community leaders, and – our clients. The next steps in this work will be determined by a coalition of non-profit, county, and city leaders who have dedicated their lives to helping our neighbors avoid or overcome crisis and become more self-sufficient. Boulder County will help provide leadership for this effort as it is increasingly absorbed into our community.

Here are our next steps as we see them today:

1. Based in part on the priorities determined at the summit, establish a structure for supporting the work ahead (including workgroups).
2. Continue to increase and enhance communications, strengthening the feedback loop between Boulder County and our partners.
We also understand there is significant value in holding additional summits that focus on specific opportunities we have across our community. These future summits would most likely be created by a team of county and community leaders to reflect the focus areas of the workgroups.

While we know there’s much work ahead in our striving toward a more generative safety net and this work will take some time, we know that the Boulder County community stands out as a leader in this effort nationwide. We already have the tools to further enhance what’s working well and dive fully into the numerous opportunities in front of us. With a thoughtful, measured approach, and the full support and collaboration of our community, we can build a safety net that is family driven, prevention oriented, and holistic.

Thank you for all you do in our community. We look forward to continuing to work more closely with you in the months and years ahead. We are fortunate to be part of this Community of Hope in Boulder County.
Community of Hope

Moving toward a more family driven, prevention oriented and holistic safety net.

Boulder County Department of Housing & Human Services

3460 Broadway
Boulder, CO 80304

1921 Corporate Center Circle, Suite 3-F
Longmont, CO 80501

Feedback/questions: jcwilliams@bouldercounty.org, 303-441-1260

www.BoulderCountyHope.org