What is Colorado Crisis Services?
Colorado Crisis Services is the statewide behavioral health crisis response system offering residents mental health, substance use or emotional crisis help, information and referrals. Its mission is to strengthen Colorado’s mental health system by providing Coloradans with greater access to crisis services wherever they are at 24/7/365 regardless of ability to pay.

How can Colorado Crisis Services help?
Colorado Crisis Services provides free, confidential and immediate support. Our crisis clinicians and peer specialists are available 24/7/365 via phone, text, or in-person at our walk-in centers. If you don’t know where to begin getting help with a mental health, substance use or emotional concern—for you, or for someone you know—start here. Our clinicians will listen and care. We are dedicated to offering guidance, no matter what the issue.

What can I expect when I call?
When you call Colorado Crisis Services, you will be connected to a clinician—or you can choose to speak with a peer specialist who has gone through experiences similar to yours. We offer translation services in more than 200 languages for non-English speakers, we engage in immediate problem solving, and we can even make follow-up calls to ensure you receive continued care.

What kinds of people are answering the phones? What are their backgrounds?
Depending on the reason for your call, you will either be connected to a clinician, or you can choose to speak with a peer specialist.

What are the backgrounds of your clinicians and peer specialists?
Our crisis clinicians are trained mental health professionals, and our peer specialists are individuals who have gone through experiences similar to yours and are now trained to provide support and guidance to others on a variety of topics.

What kinds of things can I call about?
Crisis looks and feels different for everyone—so if you find yourself struggling with any mental health, substance use, or emotional challenge, our services are for you. No problem is too small. Common call topics include: depression, substance use, grief and loss, self-injury, suicidal thoughts, bullying, stress, parenting concerns, trauma, drugs and alcohol, relationship problems, family crisis, anxiety, COVID-related challenges, domestic violence, homelessness, disability, concerns for a friend or family member, recovery support, and resource questions.

What is the difference between the Colorado Crisis Services line and the Suicide hotline?
The National Suicide Prevention Lifeline is 1-800-273-8255 (TALK). Calls are routed by area code to regional providers. The area codes for Colorado are routed to one local certified Lifeline provider, which also happens to be the Colorado Crisis Services line provider. Most calls to The National Suicide Prevention Lifeline are related to suicide prevention or rescue. The National Suicide Prevention Lifeline number (1-800-273-8255 (TALK)) will become 988 on July 16, 2022.

The Colorado Crisis Services Line is dedicated to Colorado and provides access to Colorado’s statewide crisis system. Anyone can call either number and get access to the same professional and expert response for any mental health or substance use crisis or resource need.
What will happen to the Colorado Crisis Services line when 988 is operational?

988—the new, nationally available three-digit number for connecting with suicide prevention and mental health crisis clinicians—is expected to be fully operational by July 16, 2022. All calls to 988 from a phone number with a Colorado area code will be routed to the Colorado Crisis Services line. Anyone in Colorado, regardless of area code, may continue to call 1-844-493-TALK (8255) or text TALK to 38255 for 24/7 counseling support from Colorado Crisis Services.

Do I have to tell them my name when I call in?
The clinician will ask for at least a first name and call-back number in case the call gets dropped or disconnected. However, it is not required to give your name.

Are my messages confidential?
The confidentiality and security of texts is ensured through the software provider, which uses the same encryption and data protection standards required by major financial institutions to transact business with one another. When using our text service, keep in mind that your information is being sent through your cell phone and involves technology outside of our platform. Contact your cell service providers for more information about security on their end.

Please note that text services are only available in English at this time.

Where can I get help in person?
Most of our walk-in centers are open 24/7 and offer confidential, in-person crisis support, information and referrals to anyone in need. If you need in-person assistance, or are helping someone with a crisis, you can always go to the walk-in center closest to you. Walk-in centers are located statewide, including the Denver Metro region, Northeast region, Western Slope region and Southeast region.

What happens when I go to a walk-in center?
You’ll check in at the front desk and be asked to complete a brief screening to determine the next steps, which will likely involve meeting with a clinician for a thorough evaluation. This process helps decide what next steps are needed. This may also include a brief physical health screening by a medical professional.

How often can I call or walk in?
You can use our services whenever you are experiencing any sort of mental health, substance use or emotional issue. No matter what you’re going through, we’re here to help. No problem is too small.

Do your clinicians speak other languages?
Our phone clinicians, as well as the staff at our walk-in centers, have access to more than 200 languages via telephonic translation services. Some of the walk-in locations may also have bilingual staff. Please note that text services are only available in English at this time.

Can you come to me?
If a clinician determines that the best intervention requires face-to-face interaction, a Mobile Crisis Clinician may be dispatched. A mobile clinician may travel to a variety of locations in the community (schools, homes, churches, etc.), including a discrete location of your choosing. In rural areas, it could take up to two hours for the team to arrive and up to one hour in urban areas. A telehealth option may also be utilized.

Are walk-in services free?
Crisis walk-in services are available regardless of one’s ability to pay. If an individual has private insurance, a co-payment and other out-of-pocket expenses may be required depending on the plan coverage to your insurance provider. However, no payment is required at the time of service, and no one will be turned away for crisis services, regardless of ability to pay.

Are call and text services free?
It is free to speak with a clinician via our phone and text options. However, for texts, standard text message rates from your cell phone provider will apply (consult your cell provider for clarification). Please note that text services are only available in English at this time.

Can I request help for a family member or friend?
A family member or friend of an individual in crisis may certainly call the hotline and discuss the situation with the clinician to determine the best plan.

What is opioid use disorder?
Opioid use disorder occurs when a person’s consistent use of opioids changes the chemistry of their brain, causing them to become reliant on the drug. If you are unable to stop despite the emotional, physical and social impacts it may be having on your life, don’t feel ashamed, we are here to help.

How do you recognize the signs of opioid use disorder?
- Strong desire for opioids and inability to control or reduce use
- Continued use despite interference with major obligations
- Use of larger amounts over time
- Secretive behavior/disappearing for hours without explanation
- Nodding off, pinpoint pupils, slurred speech and drowsiness, and/or impaired memory and attention
- Development of tolerance
- Spending a great deal of time to obtain and use opioids
- High levels of spending or constant need for money
- Withdrawal symptoms that occur after stopping or reducing use, such as: Negative mood/mood swings, nausea or vomiting, muscle aches, fever, diarrhea, insomnia