## April 2024 Update Data Report





GRANTS, RESEARCH AND EVALUATION April 2024 Update Data Report

Prepared by
The Learning Tree Institute at Greenbush
Research & Evaluation Department

## April 2024 Update Data Report

Learning Tree Institute at Greenbush May 2024

Learning Tree Institute at Greenbush. (May 2024). April 2024 Update Data Report. *Learning Tree Institute at Greenbush* on behalf of the *Kansas Department for Aging and Disability Services (KDADS)*.

## Report: State of Kansas and Sedgwick County Psychiatric Hospital April 2024 Community Update

#### **Executive Summary**

On behalf of The State of Kansas and Sedgwick County, Greenbush emailed an update to the community and provided an opportunity for the community to provide feedback through a survey. The update provided information about the project to date. Greenbush administered the survey for 15 days and addressed four key questions. Community members completed 22 surveys.

Question one (What factors do you believe contribute to providing high-quality mental health care within our community?) responses include:

- Accessibility
- Integrated Care
- Continuity of Care

Question two (What are the most important priorities for long-term planning and investment in mental health services?) responses include:

- Prevention and Early Intervention
- Crisis Response and De-escalation Training
- Supportive Housing
- Long-term Sustainability

Question three (As a community member, how do you anticipate the new state psychiatric hospital contributing to the Wichita and Sedgwick County community?) themes include:

- Reduction of Criminalization of Mental Health
- Provisions of Appropriate Treatment and Support
- Addressing Community Needs
- Support for the Homeless Population
- Relief for Overburdened Emergency Services
- Employment and Community Contribution
- Long Overdue and Necessary Development
- Accessibility and Affordability of Mental Health Services
- Comprehensive and Integrated Care
- Personal Stories and Emotional Appeals

Question four (What collaborative opportunities could exist between the hospital, law enforcement, and workforce development initiatives to address community needs and concerns?) themes include:

- Integrated Training Programs
- Regular Interaction Initiatives
- Comprehensive Workforce Development
- Collaborative Response Teams
- Continuous and Updated Training
- Transparent Communication Channels
- Safety and Risk Management
- Holistic Support Systems
- Community Involvement
- Accountability and Monitoring

Appendix A displays a copy of the email sent to the community. Appendix B displays a copy of the update included in the survey. Appendix C displays unedited survey data submitted by respondents.

## Report

#### **General Information**

From April 26, 2024, to May 10, 2024 (15 days), an email was sent via HubSpot to Sedgwick County community members who desired to receive updates or provide feedback on future surveys.

## Survey Sample

Two hundred and two emails were sent, and according to HubSpot, 81 emails were opened. Of the opened emails, 34 opened the survey link. HubSpot analytics predicts approximately 55.6% of the opened emails were read, and approximately 44.4% were skimmed.

Greenbush collected twenty-two complete surveys. In addition, sixteen partial surveys were collected. Data for the partials was omitted due to missing data.

This convenience sample comprises a segment of the population requesting to be informed. Community members are added to the listserv per request. The data collected from the survey can not be generalized to the total population.

#### Limitations

- This survey is not representative of the population density of Sedgwick County.
- Survey non-responders may have different characteristics or opinions than those who respond; this may impact validity. (non-response bias)
- Respondents may provide answers they believe are socially acceptable rather than expressing true opinions. (social desirability bias)
- Cross-cultural issues may affect the interpretation of the survey question and/or responses. (cross-cultural issues)

### **Survey Highlights**

- 1. When asked what factors contribute to providing high-quality mental health care within the community, the top three responses were:
  - Accessibility (e.g., easy access to services without barriers such as cost, location, or stigma) (95.5%)
  - Integrated Care (e.g., coordination and collaboration between different healthcare providers, including primary care physicians, specialists, and mental health professionals) (95.5%)
  - Continuity of Care (e.g., seamless transition between different levels of care, including inpatient and outpatient) (95.5%)
- 2. When asked what the most critical priorities for long-term planning and investment in mental health services should be, the top four responses were:

- **Prevention and Early Intervention** (e.g., early identification and intervention for mental health issues) (77.3%)
- Crisis Response and De-escalation Training (e.g., training for safe and effective crisis management) (77.3%)
- **Supportive Housing** (e.g., stable housing options for individuals with mental illness) (72.7%)
- **Long-Term Sustainability** (e.g., planning for ongoing accessibility and effectiveness) (72.7%)

## 3. When asked how community members anticipate the new state psychiatric hospital contributing to the community, responses varied, but general themes include:

### • Reduction of Criminalization of Mental Health

• Respondents express hope the hospital will reduce the number of people with mental health issues being jailed due to a lack of appropriate facilities.

## • Provision of Appropriate Treatment and Support

 Many emphasize the need for proper mental health care and the potential for the hospital to offer necessary treatments, helping individuals live up to their potential.

#### • Addressing Community Needs

• There's a strong sentiment the hospital will help address urgent mental health needs within the community, improving overall societal well-being.

## • Support for Homeless Population

 Several responses highlight the potential benefits for homeless individuals with mental health issues, suggesting the hospital could help them become productive members of society.

#### • Relief for Overburdened Emergency Services

• There is concern about the current strain on emergency rooms, with hopes the new facility will alleviate some of this pressure by providing specialized care.

#### • Employment and Community Contribution

• Some responses mention the hospital's potential to employ local community members and contribute positively to the local economy.

## • Long Overdue and Necessary Development

• Many respondents feel such a facility is long overdue and crucial for the community's mental health infrastructure.

### • Accessibility and Affordability of Mental Health Services

• The hospital is seen as a means to provide mental health services to those who cannot afford them otherwise.

#### • Comprehensive and Integrated Care

• There is hope for a comprehensive approach, integrating services like housing and MAC (My Access Center) to provide a holistic solution to mental health issues.

### • Personal Stories and Emotional Appeals

 Some respondents share personal stories to illustrate the dire need for better mental health facilities, emphasizing the emotional and practical challenges faced by families dealing with mental health crises.

# 4. When asked what collaborative opportunities could exist between the hospital, law enforcement, and workforce development initiatives to address community needs, responses include:

#### • Integrated Training Programs

 Develop and implement joint training programs where law enforcement officers and hospital staff learn together about mental health issues, de-escalation techniques, and sensitivity training, including simulations of mental health conditions and shared group activities to foster understanding and break stereotypes.

## • Regular Interaction Initiatives

 Organize monthly shifts where law enforcement officers spend time at the hospital interacting with patients through group therapy sessions, sports, and meals, humanizing both parties and building mutual respect and understanding.

## Comprehensive Workforce Development

o Partner with local municipalities to create job opportunities for patients in public works, sanitation, parks, and other essential services. Ensure these jobs have protections and support to avoid overworking or underpaying the individuals.

### • Collaborative Response Teams

 Form cooperative teams consisting of hospital staff, law enforcement, and social workers to respond to mental health crises in the community, which can be modeled after successful programs like ICT One, providing immediate and coordinated care.

### • Continuous and Updated Training

 Establish a system for ongoing training for law enforcement provided by the hospital and mental health associations. Regularly update this training to inform officers about the latest treatment options and best practices in mental health care.

#### • Transparent Communication Channels

 Set up monthly online meetings and other forms of transparent communication to inform the community about the collaborations and address any concerns, including public forums for feedback and updates.

### • Safety and Risk Management

 Develop protocols to ensure the safety of law enforcement and hospital staff while addressing community concerns about the potential release of individuals deemed dangerous, which involves careful assessment and coordinated support for re-entry.

#### • Holistic Support Systems

 Provide comprehensive support for patients transitioning back into the community, including housing, childcare, and continuous mental health care, ensuring patients are not just placed into jobs, but are holistically supported to succeed.

#### • Community Involvement

• Engage the community in regular public meetings to discuss the collaboration efforts, gather feedback, and adjust programs as needed. This involvement can help build trust and ensure the initiatives meet community needs.

#### • Accountability and Monitoring

Create teams where members from the hospital, law enforcement, and workforce
development initiatives work together and hold each other accountable, including
regular reviews and evaluations of the collaborative efforts to ensure they are
effective and meet their goals.

**Appendix A: Copy of Email Appendix B: Copy of Update** 

**Appendix C: Survey Responses (unedited)** 

## Appendix A Copy of Email

Dear Kansas Resident,

Thank you for agreeing to provide *The State of Kansas* and *Sedgwick County* feedback on the new psychiatric hospital. Click the link below to view a project update and access the survey. The survey window will be open from April 26, 2024, to May 10, 2024, at 5:00 p.m.

Sedgwick County April Update and Survey

Sincerely, The Greenbush Team

If you want to unsubscribe from these emails, please reply "stop."

## Appendix B Copy of Update

April 2024 Updates on the South Central Regional State Hospital:

- A site has been selected at the Southwest corner of MacArthur and Meridian.
- A Town Hall meeting was held at nearby South High School on February 26, allowing
  for questions to be asked. Surveys were completed at that time, and results were provided
  to the South Central Regional State Psychiatric Hospital Advisory Panel, which can be
  accessed on the Greenbush website at
  www.greenbush.org/south-central-regional-psychiatric-hospital/
- The Kansas Department for Aging and Disability Services (KDADS) and Sedgwick County continue to work with architects on design. Now that the schematic design is completed, the design process has turned to finishes and fixtures, along with creating a secure exterior design.
- This spring zoning meetings will occur to request a zone change from General Commercial to Limited Industrial. The zoning process involves three essential meeting dates: April 1, the District Advisory Board; April 11, the Metropolitan Area Planning Commission; and May 14, before the City Council.
- The Advisory Panel continues to address topics assigned to it for further research and recommendations. In April, subpanels, including panel members and community experts, have begun to work on recommendations. The subpanel focusing on the workforce met on April 12 and will meet to finish recommendations on April 25. The subpanel on law enforcement met on April 12 and will finish recommendations on April 26. The subpanel recommendations will be provided to the Advisory Panel on May 17, 2024.

## Appendix C Survey Responses (unedited)

## **Response Statistics**

	Count	Percent
Complete	22	100
Partial	(16)	0
Disqualified	0	0
Totals	22	

## 1. What factors do you believe contribute to providing high-quality mental health care within our community? (Select all that apply.)

Value	Percent
Accessibility (e.g., easy access to services without barriers such as cost, location, or stigma)	95.5%
Integrated Care (e.g., coordination and collaboration between different healthcare providers, including primary care physicians, specialists, and mental health professionals)	95.5%
Continuity of Care (e.g, seamless transition between different levels of care, including inpatient and outpatient)	95.5%
Qualified Professionals (e.g., well-trained and experienced mental health professionals, including psychiatrists, psychologists, and counselors)	90.9%
Access to Resources (e.g., availability of additional resources such as support groups, helplines, and educational materials)	90.9%

Individualized Treatment (e.g., treatment plans to meet unique needs and preferences of each person)	77.3%
Family and Community Involvement (e.g., involvement of family members, caregivers, and support networks)	77.3%
Cultural Competence (e.g., respect and understanding for diverse cultural backgrounds, beliefs, and values)	72.7%
Prevention and Early Intervention (e.g., programs and initiatives aimed at preventing mental health problems)	72.7%
Quality Assurance and Accountability (e.g., regular monitor and evaluation of services)	72.7%
Trauma-Informed Care (e.g., approaches that promote safety, trust, and empowerment)	68.2%
Emphasis on Recovery (e.g., focus on recovery and resilience)	68.2%
Peer Support (e.g., involvement of individuals with lived experiences of mental illness)	59.1%
Evidence-Based Practices (e.g., treatments and interventions that are supported by scientific research and proven effective)	54.5%
Research and Innovation (e.g., support of ongoing research and innovation in the field of mental health to improve care and outcomes)	40.9%
Other - Write In	18.2%

## Other - Write In

#### **MEDITATION**

Working with law enforcement

more options for transitional group housing upon discharge.

structural things that lead to mental health impacts; for example please pay all workers (including "unskilled" workers) a good living wage and don't overwork or understaff. workers and residents/patients are all part of the same greater ict community. btw research and innovation could be vague enough to be a red flag. don't do tech-enabled privacy erosion or like weird AI shit okay?

## 2. What are the most important priorities for long-term planning and investment in mental health services?

Value	Percent
Prevention and Early Intervention (e.g., early identification and intervention for mental health issues)	77.3%
Crisis Response and De-escalation Training (e.g., training for safe and effective crisis management)	77.3%
Supportive Housing (e.g., stable housing options for individuals with mental illness)	72.7%
Long-Term Sustainability (e.g., planning for ongoing accessibility and effectiveness)	72.7%
Community-Based Services (e.g., accessible mental health support within local communities)	68.2%
Diversion Programs (e.g., redirecting individuals from the criminal justice system to treatment)	68.2%
Specialized Training for Law Enforcement (e.g., enhanced skills for responding to mental health crises)	68.2%

Public Education and Awareness (e.g., reducing stigma and promoting help-seeking behavior)	59.1%
Workforce Development (e.g., training programs to meet demand for mental health services)	54.5%
Collaborative Care Model (e.g., coordination between healthcare providers for holistic care)	50.0%
Peer Support Programs (e.g., support from individuals with lived experience of mental illness)	45.5%
Expansion of Mental Health Courts (e.g., alternative approach to legal proceedings for mental health cases)	40.9%
Cultural Competence Training (e.g., understanding and sensitivity to diverse cultural backgrounds)	40.9%
Telehealth and Telepsychiatry (e.g., remote access to mental health care services)	36.4%
Data Collection and Evaluation (e.g., informed decision-making and quality improvement)	31.8%
Other - Write In	9.1%

## Other - Write In

Regular audit/assessments to determine if the programs are cost effective as well as successful. Similar to recidivism deterrents.

bout a month ago i watched at least half a dozen cops point guns at a guy who was already pointing a gun at himself, up on 21st. i left the area before they killed him. can we PLEASE have mental health first responders who are NOT cops

## 3. As a community member, how do you anticipate the new state psychiatric hospital contributing to the Wichita and Sedgwick County community?

#### Response

My hope is that this hospital will reduce the number of people with mental health related issues who are put in jail because society has nowhere else to put them. Giving people help rather than punishment may enable them to live up to their full potential.

I feel it will assist many, but certainly not all, in addressing this emergency in our community and society.

like a bandaid on a bullet wound?

It is my hope that it will provide those in need of psychiatric care with additional options for treatment, perhaps clean up the streets & provide housing for mentally ill individuals.

I'm fairly new to the county; I feel that a new state hospital will go far is treating those homeless that need to get their mental health in order and then address the needs to be a productive member of society.

## I think it is long overdue

This is a poorly worded question. How do you anticipate the new state psychiatric hospital will contribute to the Wichita and Sedgwick County community? If that's your question; my answer is: I don't know.

My expectations is that the hospital would be a final option to a variety of other services, MAC, housing etc. Offered at the south campus.

It will help provide mental health services to those who otherwise can't afford it.

If set up and ran appropriately, the hospital can be a huge contributor to the community. Employing community members is essential. Providing a safe environment for the mentally ill to receive treatment and then transition back into society with essential resources is a priority.

I believe this will help us with filling some of the gaps for mental health services in the area.

Hopefully, limit the revolving door of on the street, off the street for the mentally ill homeless. Offer successful treatment and positive results for those that also are constantly having problems.

Speedier access to treatment and saved costs on transporting.

I think that having more places for people in need to go is great!

Needed capacity great - helps jail and hospitals. Concerned about talent

My hope is that psychiatric patients are treated with dignity and not stuck in the St. Joseph ER hallways anymore for 4 or 5 days at a time. Our ER rooms are overwhelmed and under trained to meet mental health needs.

Providing the help for the people in need but more for those who REALLY want the help. You can't help those who do not want help.

I'm just here to provide support. I'm so glad this is finally being considered as part of the services in Wichita.

I am hoping it'll help our community to have better access to care and continuation to care. I am hoping it'll give more options to those in crisis.

It will hopefully be a good thing and offer more opportunities for care in the area, not long ago my mom who is in her late 60's and had recently retired from being an ICU Nurse for over 25 years suffered a seizure. My amazing mom who has cared for thousands of people throughout her entire life changed that day. She spent weeks in the hospital and was then transferred to a rehab facility too regain strength and to help with the cognitive difficulties that have come from this. The rehab facility was wonderful but not equipped to handle the mental breakdown that she showed, she was frustrated and becoming violent. We worked endlessly with the social workers to try to get her into a psychiatric unit, after 2 weeks and hundreds of phone calls and emails to everywhere within 300 miles we realized there wasn't any help. The rehab center was kicking her out and it was all on us now. My dad who became her primary caregiver is someone that many people have admired throughout his career and has accomplished remarkable things for not only his family but for this city. This is by far the most challenging project he has undertaken. This story all started in Oct 2022, my hope is that this new facility would give hope to families like ours and to those individuals who may not have family to care for them. This is a building of hope and peace and promise.

4. What collaborative opportunities could exist between the hospital, law enforcement, and workforce development initiatives to address community needs and concerns?

Response
----------

It's important for people to feel valued and seen. Often, people with mental health issues are overlooked or treated like ticking time bombs, especially by law enforcement. If officers from across the county were to spend one shift each month at the hospital, stereotypes held by both parties could be broken down. Officers could participate in group therapy sessions, play basketball with patients, play board games, eat a meal alongside patients...basically any interaction where each party can see the other as human beings, not badges and 'criminals'. This could go a long way in fostering a culture shift. For workforce development, patients could be partnered with local municipalities. Public Works departments across the county need park workers, and water operators, sanitation workers, road crews, etc...jobs that are very important but often overlooked as viable, steady, respectable work.

Cooperative teams assembled with the right professionals to respond to shepherd those in need of services. ICT One is a great example and starting point.

do workforce development initiatives involve employee protections? being shunted into jobs where folks are overworked and underpaid, while jumping through hoops to appease parole officers... not gonna improve people's mental health much. if people had resources like housing and childcare first, maybe as they get on their feet they would be ready for the workforce when they're ready instead of being trapped paying monitoring fees and court fees and stuff

Law enforcement NEEDS better training, which could be provided by the hospitals & the Mental Health Assoc. Once law enforcement is trained they could rotate shifts at mental health wards to continue training & stay up to date on treatment options.

Transparency and open communication, monthly online meetings perhaps with information given.

Police and staff safety always comes first.

It's going to increase the risk of dangerous people in our community being released too soon and committing terrible crimes .... so ... I hope the entities you mentioned all work together.

When a resident of the hospital is released, all groups should work together to assist this person with re-entry to the community.

They need to form teams where they learn together, work together and are accountable to one another. If it takes a village to raise a child...it takes a village plus to care for the mentally ill.

I'm not sure because I don't know what collaboration currently exists.

Understanding of mental illness and how to deescalate and treat it in stressful situations.

Improved partnerships as far as accessing other agencies & further collaboration for shared clientele.

That is a good question. I think law enforcement has their hands full, and there is an onslaught of homeless that are mentally encapable of interacting with societal norms.

I think there should be a collaborative between the hospital and law enforcement to develop sensitivity training, De-escalation training, and mental health education. There is not currently enough education with law enforcement to handle these patients outside of the hospital. Workforce opportunities should center around compassion as well as competency. I think they should include schizophrenia simulations and other SPMI barriers specifically during training.

Holding regular public meetings for people to address their concerns.

Developing continuity of care is key to patient success. Putting an emphasis on workforce development, along with care of clients gives a multitude of opportunities for collaboration and innovation.

Trainings for everyone, open communication when dealing with patients, like a team.

Law enforcement needs more training