Department on Aging
Mission is to provide services to seniors in Sedgwick County in an effort to assist them in maintaining independence.

Community Based Services
- Services assist seniors to maintain health, community living and avoid more costly levels of service, and assist individuals to remain in their homes and community. Some funding is provided to Senior Centers located throughout Sedgwick County that are designed to provide assistance in fulfilling the social, educational, recreational, physical, emotional, and nutritional needs of participants through programs that meet their various needs.

In-Home Services
- Services assist seniors at risk who need help to maintain health, avoid deterioration in health, and delay/prevent out of home placement.

Physical Disabilities
- Provides services to enable individuals with disabilities of all ages to remain in the community and maintain health and independence.

Transportation
- Assures accessibility of transportation services through collaborative partnerships to help individuals remain in their homes and community.

Central Plains Area Agency on Aging (CPAAA) serves seniors and caregivers in Butler, Harvey and Sedgwick County. Services provided directly include:
- Functional Assessments, for seniors, individuals with a physical disability or traumatic brain injury who are considering entering a nursing home or applying for a Medicaid Waiver program.
- Kansas Aging and Disability Resource Center Call Center serves all communities in Kansas a single point of access for people of all incomes and ages, provides information on the full range of long term private pay and government funded supports and services, local and statewide resources, options counseling and information/assistance and referral by calling 1-855-200-2372.
- Care management, coordination of services available to seniors who meet program criteria including age and income guidelines.
- Caregiver programs and support for adults of any age providing care for a person 60+.
- Diabetes classes for all ages, Diabetes Prevention Program (referrals welcome), emphasis on senior population.
- Matter of Balance Classes for seniors at risk for falls, Master trainer in house, offering training to new coaches, classes usually held at local senior centers.
- Hoarding Coalition, CPAAA coordinates the coalition, receives intakes on Hoarding situations, completes in-home assessments and coordinates community response across the responding entities.
- Housing Options, options counseling on housing resources and referrals.
- Medicare counseling, assistance with understanding general Medicare and Part D counseling during open enrollment and for new enrollees.
- Minor home repair, conducts assessments and assists seniors with minor repairs (grab bars, plumbing, ramps).
- Options counseling, one on one conversation to discuss the individual’s situation and suggest and refer to potential programs, services and long term care options.
- Transportation coordination for rides in the Sedgwick County area, including rides for caregivers and medical and non-medical rides for seniors or persons with disabilities and the general public in the rural areas.
- Volunteer options, provides volunteer options for adults 55+.
CPAAA funds services in the community through a network of aging service providers. Some of our partnerships include:

**Mobile Farmer’s Market**

In 2014, CPAAA connected with a local produce farmer to develop a mobile farmers market that would go to senior centers and senior focused housing sites in Sedgwick County to provide access to fresh fruits and vegetables for seniors who were not able to access a farmer’s market location. Specifics include:

- Utilizing her own truck she began delivering to 11 sites and served 500 customers in 2014. This resulted in a dramatic increase in the utilization of the Farmer’s Market vouchers.
- Since that time the, the mobile farmers market has expanded service to CPAAA’s entire tri-county area. Partnerships with local senior properties and senior centers in the tri-county have expanded and now include 35 rural sites.
- In 2018, between the months of June and November the mobile farmers market was running non-stop.
- In 2018, an estimated 850 older adults who received the Farmer’s Market Voucher in the tri-county area took advantage of the mobile market.
- In 2018, the mobile farmer’s market served 1,650 non-Farmer’s Market voucher customers by taking their mobile farmers market to low income areas in surrounding communities, churches and local events in rural areas.
- Since this mobile farmers market developed, our partner has expanded to a non-profit mobile farmers market called Common Grounds Producers and Growers, Inc. and this continues to grow and serve others outside of the Kansas Senior Farmers Market Nutrition Program (KSFMNP) program expanding to working with inner city or at-risk youth to provide opportunity for them to experience working on a farm and helping with the mobile farmers market in their own communities.
- The CPAAA looks forward to seeing how this non-profit continues expansion in the future and their exciting results.

**Congregate Meal Sites**

- A continual decrease in congregate meal site attendance is a national trend while the percent of older adults experiencing food insecurity is increasing. CPAAA staff completed research in the three county service area to identify significant areas of need and potential partners/opportunities for site development.
- Staff identified potential opportunities to expand and enhance congregate meal service through innovative partnerships with housing properties, rural towns and one rural hospital.
- Creative thinking and collaboration resulted in three unique congregate sites, and a centralized kitchen resulting in two new congregate sites.
- Through the efforts of the CPAAA program manager relationships were developed and maximized to establish community support in the rural areas, engage with new partners and service providers to accomplish this unique and much needed expansion of congregate nutrition program in our region. This has resulted in increased utilization of this program which impacts nutrition, health and socialization.
- Another creative nutrition program was established in partnership with a rural hospital. The CPAAA program manager worked with a rural hospital that was providing home delivered meals. They were asked to participate in a pilot project to expand nutrition choices and provide a congregate nutrition site at their hospital that would allow flexibility of time of meal and choice of menu items to participants. This program is moving into its second year and participation has increased steadily.
**COMCARE of Sedgwick County**

Mission is to help people with mental health and substance use needs to improve the quality of their lives.

**Homeless Programs**

- **Center City**: Co-located at United Methodist Open Door for one stop homeless services. Provides outreach and treatment to mentally ill persons who are homeless.
- **Shelter Plus Care**: Combines housing voucher with supportive services to special population of homeless individuals experiencing severe and persistent mental illness, substance abuse disorders, and/or HIV/AIDS-related illness and their families.
- **Housing First**: COMCARE partners with the City of Wichita to move single, chronically homeless individuals experiencing a disability from homelessness into housing.

**Addiction Treatment Services (ATS)**

Treatment for individuals struggling with alcohol or other drug use, includes group individual counseling and therapy.

**Crisis Services**

Services include:

- 24/7 Crisis Hotline – over 60,000 calls in 2018
- 24/7 walk-in crisis intervention services
- 23 hour adult crisis observation unit
- Adult crisis stabilization unit
- Children’s crisis beds
- Mobile crisis services
- Sobering and social detox services with partner agency
- Weekly family support (NAMI)

**Sedgwick County Offender Assessment Program (SCOAP)**

Serves Sedgwick County residents who suffer from a diagnosable mental illness and who come into contact with the criminal justice system; most crimes are misdemeanor offenses. Through treatment, SCOAP addresses the causes of the arresting behavior to reduce recidivism among mentally ill persons.

**Community Support Services (CSS)**

Provides rehabilitative behavioral health services to those with a severe and persistent mental illness (SPMI) who need support to function in the community.

**Children’s Services**

Serves children through medical and therapy services and case management, up to age 21, who have a serious emotional disturbance (SED) and are at risk of hospitalization.

**Outpatient Services (OPS)**

Individual and group therapy for adults 18 and older for a variety of mental health concerns.

**School Mental Health Intervention Program**: Through legislative action, a pilot collaboration between the State Board of Education, local school districts and Community Mental Health Centers was established. The specifics of the program are:

- Six partnership (3 rural, 3 urban) sites were selected and provided partial funding for Mental Health Intervention teams.
- These teams are comprised of a Behavioral Health Liaison employed by the school district and both a master level clinician and case manager employed by the community mental health center.
- COMCARE was selected for a partnership with Wichita Public Schools for the school year 2018-2019. The goal is to provide treatment to address mental health and behavioral needs of youth in USD 259.
- Wichita is by far the largest pilot site.
- COMCARE works in coordination and cooperation with Wichita Public Schools to identify youth in need of these services, and then space is provided in the schools for COMCARE staff. There are 22 schools involved in the Wichita project.
- Youth served are divided into two groups for this pilot project.
  - The alpha group consists of youth who are Children in Need of Care (CINC) and in state custody. They have experienced multiple placements resulting in moving school districts as well as residents.
• The beta group consists of youth who are not in state's custody but are still in need of additional services. These are youth who need behavioral health treatment but may be stable in their community and school setting.

• Outcomes are measured on all youth in the project, such as school attendance, grades, and behavioral incidences.

• COMCARE will provide services year round for youth and families. Services include both therapy and case management services in primarily the school setting, but case management may also occur in the home and community.

• Through this collaboration, youth in need of services can be more easily identified and services can be delivered before, during, or after the school day in hopes of making services more readily available.

• Expansion opportunities across the state of Kansas are available for this next coming school year. This pilot will continue for a second year and additional districts in Sedgwick County have applied but outcomes of those applications are not known yet. Over 730 youth have been served in year one of this pilot program.

Photovoice: Photovoice is a captivating technique or project used as a component to adult case management. It allows patients to use photos to express thoughts and feelings. Patients can more readily express and tell part of their journey with mental illness and recovery by using a photo to give more meaning. It could be one photo with words written underneath, or it could be photos with the patient telling the story and meaning behind the photos. Time is spent in taking the pictures or searching through available photos to find just the right depiction. It also allows for those observing or listening to understand more deeply what someone is going through with symptoms or stigma, for example. This technique has been used with both adults and children. Participants report great satisfaction with this project and spend time talking about it with others.

We are proud to offer this to our patients through a group process as part of their case management treatment. Photovoice has three main goals:

1) To help those who are often unheard gain a voice, enabling them to record and reflect on their experiences and their communities' conditions, both positive and negative.

2) To encourage critical consciousness. Through choosing, discussing, and reflecting on the subjects of their photographs, the photographers can come to a clearer understanding of their circumstances and the economic, social, psychological, and political forces that shape them.

3) To bring about change that will improve conditions and enhance lives by reaching and influencing policy makers.
Sedgwick County Developmental Disability Organization (SCDDO)
Mission is to assist people with Intellectual and Developmental Disabilities (IDD) to receive quality services and achieve greater independence.
- SCDDO is the single point of entry for people with IDD.
- Timely access to residential and day supports to individuals experiencing a crisis or in need of immediate access based upon State contract.
- Manages State funded programs which may include access to transportation, children’s services, non-Medicaid eligible case management and flex funds.
- Quality Assurance through site visits, record reviews, contract monitoring, and quality improvement efforts, division staff ensure individuals receive quality services.
- Special projects focused on enhancing employment options for individuals with IDD:
  - **Project Search**: Evidence based program focused on employment preparation for young adults. Partnerships with local school districts and employers to offer education and internship opportunities.
  - **Business leadership Network of Sedgwick County**: Employer led nonprofit organization offering education and training programs and other benefits to enhance a company’s performance through tapping into the talent of workers with disabilities.
- SCDDO efforts to enhance community capacity in the IDD service system have largely been inspired by the “Report to the President 2017 America’s Direct Support Workforce Crisis: Effects on People with Intellectual Disabilities, Families, Communities and the U.S. Economy. Projects include:
  - Working with the Ohio Alliance of Direct Support Professionals to replicate their successful Community Connections Career Partnership program in Sedgwick County. The program exposes high school juniors/seniors to the field of direct support through an integrated classroom and internship program and creates a new workforce pipeline.
  - Awarded grants for two projects designed to address the shortage of qualified direct support professionals and/or increase client independence through innovative use of technology.
  - A direct support professional recruitment marketing campaign is in the development phase. The goal of the campaign is to raise awareness in the community of the important work done by direct support professionals and inspire quality candidates to apply for vacant positions.
  - A recognition program where affiliated provider staff are recognized for their exceptional performance. The program was recently expanded to include direct support professionals, supervisors and targeted case managers nominated by SCDDO QA staff or community members, persons served, affiliate agencies or volunteers.
Sedgwick County Health Department
Mission is to improve the health of Sedgwick County residents by preventing disease, promoting wellness and protecting the public from health threats.

- Provides funding to Project Access, a partnership program administered by Central Plains Regional Health Care Foundation. Project Access provides access to donated medical care, prescription medications, and durable medical equipment for uninsured low income Sedgwick County residents.

Preventive Health
- **Family Planning:** Services and education to uninsured and underinsured women. Prevents low birth weight, premature births, and infant death through healthy birth spacing and well-women examinations.
- **Maternal and Child Health Care Coordination (MCHCC):** Provides health counseling to Family Planning and STI clients under the age of 22 and pregnant to reduce low birth weight and premature births.
- **Sexually Transmitted Infection Clinic:** Prevents spread of infectious diseases through testing, diagnosis, treatment and counseling.
- **Immunizations:** Protects community against vaccine preventable/contagious diseases. Adult and children and travel vaccines provided, as well as Tuberculosis testing, blood pressure checks, and other health screenings.
- Provides lab services, call center and medical records assistance.

Children & Family Health
- **Women, Infant, & Children (WIC):** Public health education and nutrition program. Reduction of low birth weight babies and nutritional support for low income families with children under the age of five.
- **Healthy Babies:** Provides services to increase healthy pregnancy and baby through child’s 2nd birthday.
- **Children’s Dental Clinic:** Provides dental care to qualifying children between the ages of four and 17.
- **Fetal Infant Mortality Review:** Provides case review and community action teams to examine infant demise cases with goal to identify and reduce risk factors for infant mortality.

Health Protection
- **Sexually Transmitted Infection Control:** Intervenes in the spread of disease by providing education, testing and treatment for people infected at risk for sexually transmitted infections and HIV.
- **Tuberculosis (TB) Control:** Services for the treatment of TB.
- **Public Health Performance:** Monitors and accesses the community’s health, and data monitoring for the Community Health Improvement Plan.
- **Epidemiology:** Monitors and investigates diseases to protect the health of the community.
- **Animal Control:** Promotes and provides health and safety for both citizens and animals.
- **Health Planning:** Includes the Community Health Advocates program which is responsible for recruiting and training volunteers to be advocates and educators about access to community health clinics and other health resources. This section also works with community partners on data collection for the Community Health Assessment and Community Health Improvement Plan.

Mosquito Monitoring
In 2013, the Sedgwick County Health Department (SCHD) began collaborating with the Kansas Department of Health and Environment (KDHE), City of Wichita Stormwater Program, and the Kansas Biological Survey for mosquito surveillance to reduce the number of human cases of West Nile virus infection. In 2018, changes to the program resulted in trapping performed by SCHD-coordinated volunteers and a new ArcGIS software map application. Funding was provided by KDHE. Mosquito surveillance was conducted weekly from May 17 through October 25, 2018. Encephalitis Vector Surveillance traps were set in five pre-determined locations every week (240 trap-days) by four trained Sedgwick County Master Gardeners volunteers, one student and, later in the summer, four SCHD staff. In 2018, mosquito traps were set up and removed 100% of total season trap-days. Volunteers and SCHD staff spent 240 trap-days and accrued 4,928 mileage working in the program. The traps yielded a total of 4,497 mosquitoes (including 2,279 Culex mosquitoes which may carry West
Nile virus) with three traps testing positive for West Nile virus during the season. For mosquito abatement, a total of 273 larvicidal dunks were applied by City of Wichita Stormwater and Sedgwick County Animal Control staff throughout the season in areas around traps with greater than 20 Culex mosquitoes. A mosquito program survey was sent to volunteers at the end of the surveillance season. Of the participants, 78% responded to the survey and identified strong partnerships, easy to understand program structure, and well-organized SCHD staff as the program’s strengths. The ArcGIS software application allowed field staff to easily identify trap and abatement locations. For SCHD reports, the ArcGIS program saved approximately two hours in staff time compared to 2017. Ongoing evaluation by KDHE shows the mosquito monitoring program is effective in reducing the number of human West Nile virus cases in Sedgwick County. Two cases were reported in 2018.

**Video Directly Observed Therapy for Tuberculosis Control**

Tuberculosis (TB) is a deadly airborne infectious disease which requires months of daily antibiotic therapy to cure. Sedgwick County Health Department (SCHD) TB nurses follow Centers for Disease Control and Prevention guidance to assess and treat clients with active TB. This includes daily observation of clients taking their medicine, traditionally accomplished by staff travel to the client’s home. To save time and expense in TB Control, Video Directly Observed Therapy (V-DOT) was implemented in 2015. Staff view the client taking medication via video through a tablet, phone or computer link. An evaluation showed that V-DOT saved $1,134 in mileage (2,100 miles of travel) and $457 in staff time (31.5 hours of drive time) for one client over the course of treatment. The time savings with V-DOT allows TB Control nurses more time for case charting and to evaluate new clients who may have TB disease.

**Priority Mapping to Improve Lead Poisoning Outreach and Case Ascertainment**

Lead poisoning is preventable through early case identification and intervention. The CDC estimates that there are more than 500,000 children in the United States with elevated blood lead (EBL). However, the number of children tested in Kansas remains low, with fewer than 10% of children undergoing testing in 2014. Sedgwick County Health Department (SCHD) investigates residents with elevated blood lead (EBL) levels of ≥5 µg/dL to identify risk factors and stop lead exposure. To proactively determine ZIP Codes at greater risk for reporting EBL, SCHD staff studied historical case reports of EBL in children under age six between January 2016 and June 2018 and U.S. Census Bureau data. The analysis identified eight Sedgwick County ZIP Codes with 4 to 10 times greater risk for reporting EBL compared to other areas of Sedgwick County. In the eight ZIP Codes, the rate of EBL in children under six was 8.87 cases per 1,000 children compared to 5.33 cases per 1,000 children in Sedgwick County. The eight ZIP Codes had a high percent of older homes (range: 78.0-96.4%) and a meaningful population of children under six (range: 9.0-11.0%). In the eight ZIP Codes, the percent population living below federal poverty level ranged between 17.4 and 40.4%, and the median income ranged between $30,681 and $50,797. Risk for reporting EBL for all Sedgwick County ZIP Codes was mapped using ArcGIS software and will be used to prioritize areas for outreach and intervention, effectively utilizing resources to decrease childhood lead poisoning in Sedgwick County.

**New STI Control Training Program**

Disease Intervention Specialists (DIS) in the Sedgwick County Health Department Sexually Transmitted Infection (STI) Control Program investigate reported syphilis- and HIV-positive individuals and their contacts to control the spread of disease. A newly hired DIS trains for three to six months before fully investigating cases independently. For three months in 2018, in collaboration with Kansas Department of Health and Environment (KDHE), STI Control completely overhauled the training plan for Sedgwick County DIS, decreasing travel time to Topeka by 75% (from 64 to 16 hours) and saving about $3,300 in grant-funded hotel and per diem expenses per DIS. Implemented in September 2018, the plan is now piloted by two DIS assigned to Sedgwick County. KDHE has adopted much of this plan statewide for DIS in other counties across Kansas.
Local Suicide Trends: Development of a Case File Abstraction Process to Track Sedgwick County Suicide Data

The mission of the Sedgwick County Suicide Prevention Coalition (SCSPC) is to promote and implement evidence-based approaches, local research, and community change to reduce the impact of suicide in Sedgwick County. Timely access to local data are key to developing targeted and effective suicide prevention efforts (National Strategy for Suicide Prevention objective 11.3). While state and national data are often delayed by two years, since 2014, the Sedgwick County Health Department (SCHD) collects and enters autopsy case file data in a database for SCSPC to report annual local data to the community within six to nine months. This helps SCSPC identify local trends and target high-risk populations. In 2017, SCHD enhanced data accuracy and completeness through newly developed detailed case abstraction work. SCHD and partners collected data on suicide deaths from multiple sources, including death certificates; medication inventories; and forensic investigation, emergency medical services and toxicology reports. Compared to previously used autopsy only data, the multiple source case abstraction method resulted in 6% fewer “not mentioned” entries and improved identification of psychosocial stressors, veteran status, and previous suicidal behavior. Improved data will help SCSPC reduce the number of deaths by suicide in Sedgwick County.

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