2022 CHIP Annual Report

2020-22 COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)
SEDGWICK COUNTY HEALTH DEPARTMENT
WRITTEN BY: KELSEY LIPKEA, MPH, COMMUNITY HEALTH ANALYST
Executive Summary:

The 2020-22 Community Health Improvement Plan (CHIP) provides a comprehensive, three-year strategy with county-specific key health issues and goals for improving the health of Sedgwick County Residents. A Community Health Assessment (CHA) is completed every three years as a precursor to the development of the CHIP. Under the guidance of the CHA/CHIP Steering Committee, community partners* selected the three key health issues Mental Health, Healthcare Access, and Substance Misuse for the 2020-22 CHIP. Four overarching goals were selected to address the three health issues. They are:

1. Increase community knowledge of health-related services and resources through education.
2. Increase the use of evidence-based screening tools for substance misuse and mental health in health service delivery systems.
3. Improve referral network and service integration between Sedgwick County community partners.
4. Reduce suicide death numbers in high-risk populations.

*See the 2020-22 CHIP Report for organizations involved in the creation and ongoing efforts of the 2020-22 CHIP for Sedgwick County.
The 2022 Annual Report includes data from January through December 2022 for all the partners working on the 2020-22 CHIP. This report serves as a progress update to partner organizations and Sedgwick County community residents on the four overarching goals of the plan. Each overarching goal has a designated workgroup of community partners working to achieve the activities, strategies and outcomes associated with the goal. Due to COVID-19, the Sedgwick County Health Department (SCHD) and partners held CHIP meetings in 2022 via Zoom.

Progress on each overarching goal is shown below. For a Definition of Abbreviations, see Appendix A.

**Overarching Goal #1: Increase community knowledge of health-related services and resources through education.**

**Long-Term Goal:**

- By 2026, reduce the number of non-emergency low acuity, non-acute Emergency Department visits by 5% (2019 data = 676 per 100,000 residents).
- By 2026, increase the percentage of Sedgwick County adults who identify with a healthcare provider by 5% (2019 data = 77.9%).

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<tr>
<th>#</th>
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<th>Strategies</th>
<th>Activities</th>
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<tbody>
<tr>
<td>1</td>
<td>By 2023, increase the number of contacts to UW 211 about mental health, healthcare, or substance misuse services from priority ZIP Codes (located in the Wichita area) by 20%.</td>
<td>Expand or establish a comprehensive resource guide for use by providers, partners, and community residents</td>
<td>Partner with United Way of the Plains (UW) to improve and increase access to UW 211 service; Promote the SG Drug Misuse Information website among partners and residents</td>
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<td>2</td>
<td>By 2023, increase the rate of participation in evidence-based prevention and other programs by 50%.</td>
<td>Implement or expand evidence-based prevention including culturally grounded programs for all age groups</td>
<td>Identify programs, increase awareness of such programs, and explore possibility of expanding programs by addressing any barriers that may affect expansion.</td>
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**Progress**

**Short-term outcome #1:**

By 2023, increase the number of contacts to United Way of the Plains (UWP) 2-1-1 about mental health, healthcare, or substance misuse services from priority ZIP Codes in Wichita by 20%.

- In 2019, there were 513 calls meeting outcome criteria.
- In 2020, the number of calls increased to 697. This is a 26 percent annual increase.
- In 2021, these calls increased to 1,239. This is a 142 percent increase since 2019, which meets short-term outcome #1.
- In 2022, these calls increased to 1,631. This is a 218 percent increase since 2019, which meets short-term outcome #1.
With the help of community partners, SCHD also continues to promote the Sedgwick County Drug Misuse information website among partners and residents.

- In 2019, there were 256 page views.
- In 2020, page views reached 7,253. This is a 2,733 percent annual increase.
- In 2021, page views reached 1,989. This is a 677 percent increase since 2019.
- In 2022, page views reached 15,019. This is a 5,767 percent increase since 2019 due to multiple promotional campaigns and agency recommendations (including from law enforcement) to the public, resulting in expanded use by community members.

**Short-term outcome #2:**

By 2023, increase the rate of participation in evidence-based prevention programs by 50%. SCHD has identified the following two evidence-based programs: Safe Sleep offered by the KIDS Network and Botvin Life Skills offered by Safe Streets.

- **Botvin Life Skills**
  - In 2019, Botvin Life Skills had 68 participants.
  - In 2020, no Botvin Life Skills training were offered due to COVID-19.
  - In 2021, Botvin Life Skills had 44 participants.
  - In 2022, no Botvin Life Skills trainings were offered due to funding limitations.

- **Safe Sleep**
  - In 2019-20, Safe Sleep conducted Community Baby Showers with 296 participants.
  - In 2020-21, due to COVID-19, Safe Sleep conducted virtual crib clinics with 53 participants.
    - Note that Safe Sleep conducts data gathering on a fiscal year of (July 1-June 30).
  - In 2021-22, Safe Sleep conducted Community Baby Showers with 84 participants.
    - Note that Safe Sleep conducts data gathering on a fiscal year of (July 1-June 30).

**Summary**

In 2022, the Community Health Analyst and community partners continued to work to bring more partners into the workgroup to increase access to and awareness of UWP 2-1-1:

- A community webinar was hosted by UWP during June 2022 that educated stakeholders and community members on the services of UWP 2-1-1. The goal of this webinar was to help increase awareness of UWP 2-1-1 and to help organizations learn how to get services added to the comprehensive resource guide.
- A community training was hosted by 2-1-1 to increase awareness about available resources.
- SCHD collaborated with a local Spanish-language radio station (Radio Lobo) to bring awareness of UWP 2-1-1 to the community. Increasing access to and awareness of UWP 2-1-1 services has led to an influx of calls to UWP 2-1-1 services since 2019.

Additionally, the promotion of the Sedgwick County Drug Misuse website has increased utilization throughout the community, surpassing the goal dramatically with a 5,767 percent increase since 2019.

The strengths of overarching goal #1 outcomes are not without weaknesses. COVID-19 negatively influenced the participation rates of the two evidence-based prevention programs identified in the CHIP: Botvin Life Skills training sessions and Safe Sleep. The
Community Health Analyst and Community partners have worked to identify additional evidence-based programs in Sedgwick County.

Overarching Goal #2: Increase the use of evidence-based screening tools for substance misuse and mental health in health service delivery systems.

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<td>1</td>
<td>By 2023, 13 organizations (5 medical practices, 3 FQHC’s, and 5 other organizations) will implement screening tools for mental health.</td>
<td>Increase the use of screening tools for mental health in Sedgwick County</td>
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<td>2</td>
<td>By 2023, 13 organizations (5 medical practices, 3 FQHC’s and 5 other organizations) will implement screening tools for tobacco dependence.</td>
<td>Increase the use of screening tools for tobacco dependence in Sedgwick County</td>
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<td>3</td>
<td>By 2023, 13 organizations (5 medical practices, 3 FQHC’s and 5 other organizations) will implement SBIRT for substance misuse.</td>
<td>Increase the use of SBIRT for substance misuse in Sedgwick County</td>
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Summary

Throughout 2022:

- SCHD distributed mental health and substance misuse screening tools to providers, including a tool on brief intervention to increase the referral to treatment (SBIRT) to identify and address substance misuse. Despite kit distribution efforts, there was limited participation in this project. This is not a reflection on the SBIRT tool; rather, outcomes were impacted due to difficulty recruiting practices to participate. SCHD has evaluated their distribution plan and will be working with other partners to improve participation.
- To strengthen the workgroup, SCHD worked to connect with partners that showed interest in the workgroup and held four meetings to identify additional coalitions or organizations to join the workgroup. Identifying champions to lead this work proved challenging, and no progress was made.
Overarching Goal #3: Improve referral network and service integration between Sedgwick County partners.

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| 1  | By 2023, increase the number of programs that have sent/received a referral on IRIS by 50%. (2019 data=10) | Expand a referral system through increasing awareness, conducting trainings, and recruiting organizations | • Integrated Referral and Intake System (IRIS) implementation (IRIS training on August 14, 9 am),  
• Mental Health and Substance Abuse coalition of Sedgwick County are discussing universal releases that will improve referrals and information sharing. |
| 2  | By 2023, increase referrals between programs on IRIS by 50%. (2019 data=587)         | Expand a referral system through increasing awareness, conducting trainings, and recruiting organizations | • Partner with entities that have such programs to help with recruitment and creating awareness.       |
| 3  | By 2023, increase the number of community partners that are super implementers by 8.   | Expand a referral system through increasing awareness, conducting trainings, and recruiting organizations | • Super implementers are defined as an organization that sends/receives a minimum of 10 referrals per quarter or 40 referrals per year. |
| 4  | By 2023, increase the number of certified medication assisted treatment (MAT) providers in Sedgwick County by 20%. (2019 data=32) | Increase Knowledge about MAT use among Sedgwick County providers | • Anti-stigma training for providers  
• Work with provider to breakdown barriers to obtaining buprenorphine (Suboxone) waiver (BUP) |

Progress

Short-term outcome #1:
By 2023, increase the number of programs that have sent/received a referral on IRIS by 50%

- In 2019, 10 programs sent/received a referral in IRIS.
- In 2020, 34 programs sent/received a referral in IRIS. This is a 240 percent annual increase.
- In 2021, 53 programs sent/received a referral in IRIS. This is a 430 percent increase since 2019, which exceeds short-term outcome #1.
- In 2022, 103 programs sent/received a referral in IRIS. This is a 930 percent increase since 2019, which exceeds short-term outcome #1.

Short-term outcome #2:
By 2023, increase referrals between programs on IRIS by 50%.

- In 2019, organizations made 587 referrals between programs in IRIS.
- In 2020, organizations made 617 referrals between programs in IRIS. This is a 5 percent annual increase.
- In 2021, organizations made 1,284 referrals between programs in IRIS. This is a 119 percent increase since 2019, which exceeds short-term outcome #2.
- In 2022, organizations made 3,699 referrals between programs in IRIS. This is a 530 percent increase since 2019, which exceeds short-term outcome #2.

Short-term outcome #3:
By 2023, increase the number of community partners that are super implementers by eight. Super implementers are defined as organizations that send/receive a minimum of 10 referrals per quarter or 40 referrals per year.

- In 2019, there were zero super implementers.
- In 2020, there were 13 organizations identified as super implementers.
- In 2021, there were 22 organizations identified as super implementers, which exceeds short-term outcome #3.
- In 2022, there were 63 organizations identified as super implementers, which exceeds short-term outcome #3.

**Short-term outcome #4:**

By 2023, increase the number of certified medication-assisted treatment (MAT) providers in Sedgwick County by 20%.

- In 2019, SCHD and community partners identified 32 MAT providers in Sedgwick County.
- In 2020, the number of identified MAT providers continues at 32.
- In 2021, the number of identified MAT providers continues at 32.
- In 2022, the number of identified MAT providers increased to 35. This is a 9 percent increase since 2019.

**Summary**

Throughout 2022:

- Workgroup partners continued to collaborate to increase awareness of IRIS and to connect potential organizations with the SCHD IRIS Program Manager.
- The expansion of referral systems were driven by an increase of awareness, trainings, and the recruitment of organizations. Through these modes, there has been an increase of information-sharing to IRIS and referrals between programs in IRIS. These efforts have led to an increase of super implementers among community partners.
- The Community Health Analyst connected with two MAT providers to aid in the creation of action steps to increase the number of MAT providers in Sedgwick County.

The increase of MAT providers in Sedgwick County has been limited due to the difficulties of implementing certification training.

**Overarching Goal #4: Reduce suicide death numbers in high priority populations.**

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| 1   | By January 1, 2023, decrease the number of deaths by suicide by 20% in high-risk populations (e.g. middle-aged white men). | Expand the use of evidence-based suicide prevention/postvention practices | • Joint marketing efforts  
• Question Persuade Refer (QPR)  
• Zero suicide framework system (Suicide Prevention Coalition is working on this) |
| 2   | By 2023, decrease the number of self-induced firearm deaths by 20% in high-risk populations (e.g. middle-aged white men). | Increase community knowledge of safe storage and making our community safer | • Joint marketing efforts  
• Training and education in male dominant groups/workplaces/gun ranges or shops, etc. |
| 3   | By 2023, increase the rate of participation in evidence-based training programs by 50%. | Increase knowledge of mental health and suicide through training | • #we support u; suicide prevention program training  
• Training on crisis intervention and referral (ASIST, MHFA, CALM, etc.)  
• Mental wellness training during new employee orientation |
Progress

Short-term outcome #1:
By 2023, decrease the number of deaths by suicide in high-risk populations such as middle-aged white men ages 35-54 by 20%.

- In 2019, Sedgwick County had 32 deaths in the high-risk population.
- In 2020, Sedgwick County had 30 deaths in the high-risk population. This is a 6 percent annual decrease.
  - Note that the total deaths by suicide in Sedgwick County numbered 94 in 2019 and 105 in 2020.
- In 2021, Sedgwick County had 23 deaths in the high-risk population. This is a 32 percent decrease since 2019.
- In 2022, Sedgwick County had 29 deaths in the high-risk population. This is a 9 percent decrease since 2019.

Short-term outcome #2:
By 2023, decrease the number of self-induced firearm deaths by 20% in high-risk populations like middle-aged white men ages 35-54.

- In 2019, there were 13 deaths.
- In 2020, there were 19 deaths. This is a 46 percent annual increase.
- In 2021, there were 15 deaths. This is a 15 percent increase since 2019.
- In 2022, there were 14 deaths. This is a 7 percent increase since 2019.
- In August of 2020, a campaign called Ichoosetotalk was started to provide resources in an effort to decrease suicide. Stop Suicide ICT and the Sedgwick County Suicide Prevention Coalition support this campaign.
  - In 2020, there were 347 website views.
  - In 2021, there were 1,430 website views.
  - In 2022, there were 1,504 website views. Note that no data were collected April-June.

Short-term outcome #3:
By 2023, increase by 50% the rate of participation in evidence-based training programs wesupportu, Applied Suicide Intervention Skills Training (ASIST), Mental Health First Aid (MHFA), and Counseling on Access to Lethal Means (CALM). These programs were impacted by COVID-19 but continue to be offered either in small groups or via Zoom.

- Wesupportu
  - In 2019, wesupportu had 289 participants.
  - In 2020, wesupportu had 437 participants. This is a 51 percent annual increase.
  - In 2021, wesupportu had 2,067 participants. This is a 615 percent increase since 2019, which exceeded short-term outcome #3.
  - In 2022, wesupportu had 1,404 participants. This is a 386 percent increase since 2019, which exceeded short-term outcome #3.

- ASIST
  - In 2019, ASIST had 90 participants.
  - In 2020, no ASIST trainings were offered due to COVID-19.
  - In 2021, no ASIST trainings were offered due to COVID-19.
  - In 2022, no ASIST trainings were offered due to COVID-19.

- MHFA
  - In 2019, MHFA had 259 participants.
  - In 2020, MHFA had 104 participants.
  - In 2021, MHFA had 87 participants.
In 2022, MHFA had 469 participants. This is a 81 percent increase since 2019, which exceeded short-term outcome #3.

- CALM
  - In 2019, CALM had zero participants.
  - In 2020, CALM had 100 participants.
  - In 2021, CALM had 62 participants.
  - In 2022, CALM had 21 participants.

Summary

In 2022, community partners continued to work on increasing awareness of evidence-based programs that strive to increase knowledge of mental health and suicide through training:

- The Community Health Analyst collaborated with the Sedgwick County Suicide Prevention Coalition to continue the expansion of evidence-based suicide prevention/postvention training practices and to make the community safer.
- Several free trainings were offered throughout 2022, such as QPR, Adult/Child MHFA, and #Wesupportu Preventing Suicide training.
- Wichita State University (WSU), Valley of Hope, The Phoenix and SCHD partnered to provide in-person suicide prevention-training events in July and September with the goal of increasing community knowledge in an effort to reduce suicide.
- These trainings led to the formation of a separate gun-safety workgroup that will collaborate with gun ranges, gun shops, law enforcement, and veterans to develop a gun safety video.

Participation rates in evidence-based training programs such as ASIST and CALM were negatively impacted by COVID-19, resulting in fewer-than-expected counts of participants.
Conclusion

Upon completion of this CHIP cycle in 2022, the pertaining data collection will not be continued. However, community partners and organizations continue to implement these activities. The 2023-25 CHIP also contains Mental Health and Healthcare Access as health issues; however, the goals, strategies, and activities selected by community partners are different.

For more information about the 2023-25 CHIP, please follow the link here: Community Health Assessment and Planning | Sedgwick County, Kansas
Appendices

Appendix A: Definition of abbreviations

- ASIST - Applied Suicide Intervention Skills Training
- CALM - Counseling on Access to Lethal Means Training
- CHA – Community Health Assessment
- CHIP - Community Health Improvement Plan
- IRIS – Integrated Referral and Intake System
- MAT – Medication Assisted Treatment
- MHFA - Mental Health First Aid Training
- UWP- United Way of the Plains
- WSU-Wichita State University