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COMCARE

A Licensed Community Mental Health Center and Certified Addiction Treatment Program

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Testimony to House Health and Human Services Committee on House Bill 2281

Good afternoon, Madame Chair, and members of the committee. My name is Joan Tammany, and I am the Executive Director of COMCARE of Sedgwick County, the community mental health center serving Sedgwick County. I want to thank you for allowing me to testify today as a proponent of House Bill 2281. I also wish to express my genuine appreciation of this committee's work on this important 988 legislation during the 2021 session, providing funding for some startup costs for this national lifeline planning and rollout in Kansas.

COMCARE is one of currently three lifeline centers answering calls from the National Suicide Prevention Lifeline, attempting to meet the needs of those in our community. We have worked hard in the past six months to increase our response rate from 60-65% to 85% but this is not going to be sufficient come July 16, 2022, when the national 988 number goes live. It will require increased staffing to manage the anticipated increased volume of calls and potential mobile crisis activity. We will need to enhance our technology to capture data around response time, dropped calls, etc. and eventually the addition of chat capabilities for those who prefer a text option to be answered locally.

This legislation is important to all Kansans as the prevalence of persons experiencing an emotional crisis has been evident and increasing in southcentral Kansas and all over the state. Statistically we have a larger number of youth being admitted to hospitals for suicidal ideation and behavior and it is not unusual for our hospital to have patients waiting in the Emergency room for a psychiatric bed. At COMCARE and likely so across the state the acuity of the person calling our crisis line has increased significantly in the past few years from those reaching out proactively to many now being in significant distress at time of call to our crisis center. In response our mobile crisis activity has increased by close to 20% in the past year and would be higher if we had the staffing resources to meet the demand. In addition, 70% of those in need of crisis mobile services following a call to our crisis line are unknown to COMCARE, indicating the increased need for these crisis services.

Adequate and stable funding for 988 implementation is of paramount importance. Without a sustainable model, community mental health centers doing this work will continue to lose employees due to poor pay, difficult work and secondary trauma leading to burnout. It should go without saying that persons in a mental health crisis should have a safe and reliable resource to call when in distress. Imagine if we could be there for more persons reaching out for help and being able to deliver that help locally where follow up can be achieved.

As with other proponents of HB 2281 I am advocating that once the 988 NSPL number is implemented, Kansas should collect fees via cellular phone bills to support increasing the in-state answer rate and ensure that callers are connected to in-state crisis and stabilization resources. Thank you for the opportunity to testify and I stand for any questions.