



# Douglas County 2025 Community Partners Year-End Data

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# List of Partners on Community Partner Agreements (No year-end reports or data)

## Economic Development

KU Small Business Development Center (KU SBDC)

## Health & Human Services

Just Food

## Heritage & Land Management

Black Jack Battlefield Historical Society

Clinton Lake Historical Society

Douglas County Fair Board

Eudora Historical Society

Douglas County Extension Council

Freedom's Frontier National Heritage Area (FFNHA)

Lecompton Historical Society

Santa Fe Historical Society

## Targeted Populations

Child Advocacy Center (CAC) of Douglas County

Douglas County Court Appointed Special Advocate (CASA)

The Sexual Trauma and Abuse (STA) Care Center

The Willow Domestic Violence Center

Van Go, Inc.

# List of Partners on Service Agreements

(Click the name of the organization to navigate to its year-end report)

## Economic Development

Economic Development Corporation (EDC) of Lawrence & Douglas County

KU Innovation Park (KUIP)- New to service agreement in 2025

The Dwayne Peaslee Technical Training Center (Peaslee Tech)- New to service agreement in 2025

Tenants to Homeowners (TTH)

## Health & Human Services

Heartland Community Health Center

Lawrence Community Shelter (LCS)

Lawrence-Douglas County Housing Authority

Lawrence-Douglas County Public Health (LDCPH)- New to service agreement in 2025

Lawrence Humane Society (LHS)

## Heritage & Land Management

Douglas County Conservation District- New to service agreement in 2025

Douglas County (Watkins) Historical Society- New to service agreement in 2025

## Targeted Populations

Artists Helping the Homeless (AHH)

Center For Supportive Communities (CSC)- New to service agreement in 2025

Cottonwood Inc.

Independence Inc.

Jayhawk Area Agency on Aging (JAAA) Council

Kansas Statewide Homeless Coalition

Kansas Holistic Defenders

O'Connell Children's Shelter- New to service agreement in 2025

Senior Resource Center (SRC) for Douglas County

Trinity In-Home Care (TIHC)

Douglas County Visiting Nurses Association (VNA)- New to service agreement in 2025

## Behavioral Health

Bert Nash Community Mental Health Center

Cardinal Housing Network- New partner in 2025

DCCCA

Heartland RADAC

Mirror Inc.- New partner in 2025

Ninth Street Missionary Baptist Church (NSMBC) partnering with Lawrence Family Promise-  
New partner in 2025

Treatment and Recovery Center (TRC)

## 2024 Year-End Reports by Partner



Economic Development Corporation (EDC) of Lawrence & Douglas County

Website- [edclawrence.com](http://edclawrence.com)

[Click here to return to list of community partners](#)



# **RISING TOGETHER**

*Investing in our future.*

**July 2024 PES UPDATE**



# Initiative I: Job Creation and Economic Prosperity

**Add 1,500 new target industry jobs in Douglas County over the next five years that pay at least \$38,382. - 300 jobs per year/75 per quarter.**

**EOY 2022** Target Industry job count of 6004

**EOY 2024** Target Industry job count of 6748\* (source: KU IPSR)

Net Gain 744 - Average of 124 jobs per quarter

\*Most recent data available; 6 quarters available

Project opportunities from RFIs and other sources:

2023 - 48

2024 - 35 (to-date)

**Visit 100 existing companies each year to identify potential growth and expansion projects.**

2023 - Visits with 226 companies,  
*Includes 8 community tours to local business operations.*

2024 - Visits with 40+ companies  
*Includes 4-5 community tours to local business operations*

**Participate in at least six meetings with site selectors in target markets annually, and/or host site selectors, RE professionals or companies in Lawrence/Douglas County.**

2023 - 11 events

2024 - 11 events (to date), with 4 more scheduled, including:

Hosted KDOC German Office Representatives

Hosted Director of Taiwan Econ. and Cultural Office and

KDOC Asian market representative

LA Experience Recruitment in Los Angeles, with KCADC

Hosted KCADC recruitment team for tour of properties

Two-day tour of Douglas County for German business

consultant, including Peaslee Anniversary event

Hosted 29 Japanese business leaders on Lawrence tour

**Conduct customer satisfaction surveys with businesses that used EDC programs.**

80% surveyed "Satisfied" or "Very Satisfied" (9/2023)

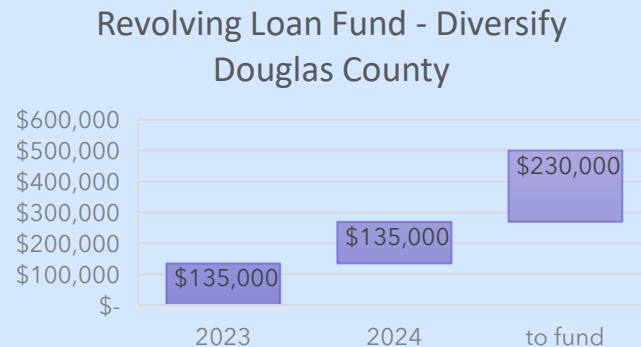
**Increase capital investment by \$100,000,000 over the next five years.** (survey generated information)

Over \$81.5 million invested in 2023; increase expected.

# INITIATIVE II: Innovation and Entrepreneurship

**Establish a \$500,000 revolving loan fund for minority- and woman-owned businesses.**

*2022 and early 2023 work culminated in July 2023 Established Minority Loan fund.*



**Report Diversify Douglas County (DDC) and E-Community loans approved.**

DDC – three \$15,000 loans approved and closed; approx. three working with Certified Program Partner to submit.

E-Community – two loans approved in Q4 2023.

**Report how many total entrepreneurs are assisted across Douglas County.**

2023 – 100+ clients served.

2024 – 100+ Small Business Series/E-Community/DDC increasing those served.

**Increase the number of minority- and women-owned businesses by 10%.**

2023 - Database of 270 DG County minority-owned businesses

*source: DataAxle*

Work to support this measurement:

- 20 minority entrepreneurs provided scholarships and successfully completed Fall '22 and Spring '23 Entrepreneur Business Basics.
- EMPOWER Grant Minority Pitch competition awarded 3 entrepreneurs \$5,000 each.
- KU-IP – 25% of new 2023 business are women-owned.
- Co-sponsorship of E3, Black & Bankable, and Inclusive Holiday Market.

**Chamber/EDC 2024 entrepreneurial supports and planned projects.**

- Spanish language materials for accessibility.
- Technical assistance resources for minority entrepreneurs.
- Empowerment Expo in Oct., partnerships

# Initiative III: Workforce and Talent Development

## **Provide quarterly industry specific networking events with local students and local employers.**

- Supported establishment of Tech Guild in 2022. Monthly meet-ups, socials, and the 1<sup>st</sup> Annual Tech Conference in Lawrence (April 2024).
- Support USD 497 connection to local businesses in Work-Based Learning and “Portrait of a Graduate” programs.
- Regular sponsorship of Manufacturers Forum with Peaslee Tech

### Additional program plans for 2024:

- Currently working with Peaslee Tech to begin additional industry forums in 2024. Transportation and Healthcare are currently the leading candidates for up-coming forums.

## **Support creation of 50 quality, affordable infant/toddler childcare slots for working parents annually over the next five years (250 total).**

- Children’s Community Center project:
  - 138 infant/childcare spots with 24/7 availability. (Late 2024)
- The Hilltop West (The Crossing/KU-IP) childcare project:
  - 138 infant/toddler spots. (Mid 2024)
- Working with and assisting home-based care providers.
- Advocacy at state level for more funding and greater support for childcare-friendly policies.



# Initiative IV: Housing and Land Development

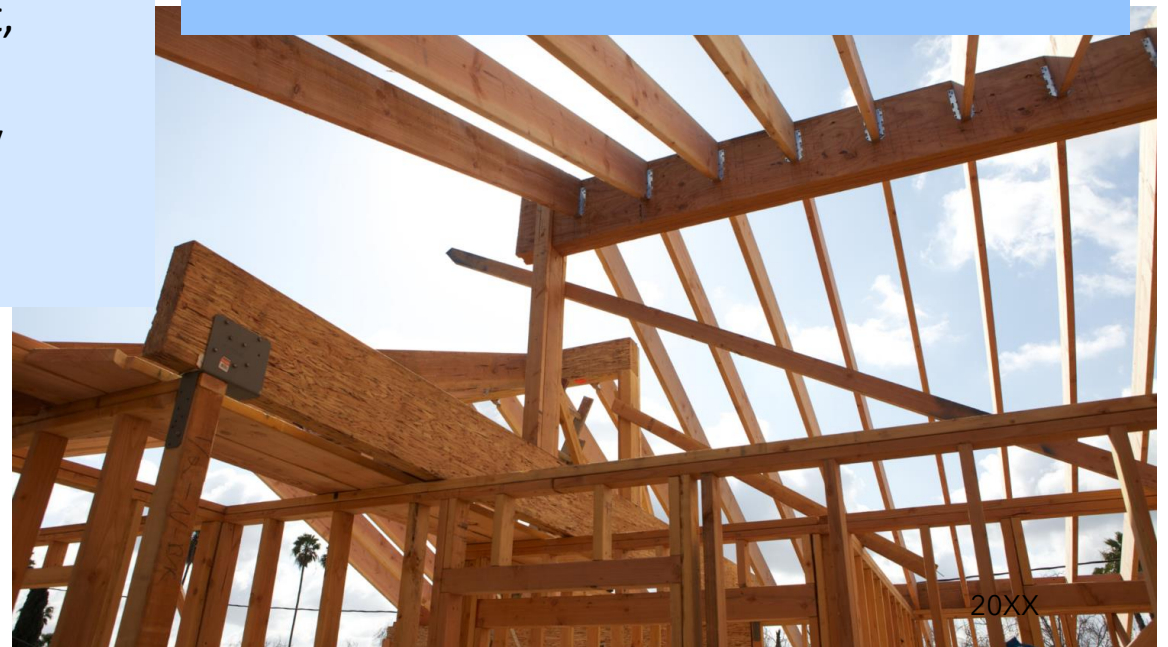
**Have adequate land annexed within three years\* to support the development of 800 housing units, with an annual goal thereafter of issuing a minimum of 300 single family home permits. \*2022 start date**

Recent City of Lawrence annexations provide opportunity for 764 single-family and attached units, and 300 apartments

- KU Crossings will also add much needed housing in mid-Lawrence.
- Chamber proposed CIP increases in City's 2024 budget, which were ultimately approved, adding \$60 to \$70 million in growth-related infrastructure for community expansion.

**Within three to five years, have a minimum of 100 acres annexed that are zoned and shovel ready for industrial development.**

Continue to convene community partners to identify potential new industrial sites. Currently, working with development group on spec building in LVP.



2024 Q1 Report: Chamber/EDC, Small Business Development Center

Agency Name	Program	Amount Awarded	Outcome/Commitment Area	Progress Indicator	Progress Indicator Current Status	Change in Progress Indicator Status Proposed	Notes/Justifications	Q3-2024 Progress Status	2024-Final Report
Lawrence Chamber of Commerce/EDC	Operations	\$206,000.00	<p><b>Community Engagement</b> - Establish Lawrence as the most business friendly community in the region; Make existing businesses a priority, providing robust support for business retention and expansion</p> <p><b>Equity and Inclusion</b> - Ensure greater economic opportunities amongst historically marginalized populations, communities, and businesses.</p> <p><b>Sound Fiscal Stewardship</b> - Attract private development partners based on community plan objectives and goals; Create new incentives that are targeted at businesses and industries that provide pathways to economic success for the employees, the company, and the community.</p>	<p><b>PES-1:</b> % of businesses rating Lawrence as a good or excellent place to do business;</p> <p><b>PES-3:</b> Target industry employment growth</p> <p><b>PES-6:</b> Variance of median income by race;</p> <p><b>PES-9:</b> Percent of private dollars leveraged to City dollars</p>	<p><b>PES-1:</b> 57% of businesses are satisfied with Chamber/EDC services;</p> <p><b>PES-1:</b> 190 number of business retention/networking events hosted by the Chamber;</p> <p><b>PES-3:</b> 300 new employees annually in target industries</p> <p><b>PES-6:</b> 5 number of women/minority individuals provided scholarships for upskill training;</p> <p><b>PES-9:</b> \$56 million of private capital investment within the past year</p>	<p><b>PES-1:</b> 62% of businesses are satisfied with Chamber/EDC services;</p> <p><b>PES-1:</b> 200 number of business retention/networking events hosted by the Chamber;</p> <p><b>PES-3:</b> 300 new employees annually in target industries.</p> <p><b>PES-6:</b> 7 number of women/minority individuals provided scholarships for upskill training;</p> <p><b>PES-9:</b> \$58 million of private capital investment within the past year.</p>	<p>Our Chamber and Rising Together Capital Campaign goals align with the City of Lawrence's Strategic Plans for growth. For example 300 jobs per year, support for small businesses and entrepreneurship. By leveraging other resources we are able to have a significant impact on the economic prosperity of our residents.</p>	<p><b>PES-1:</b> Small business luncheon/discussion held on 10/1 to assess experience in Lawrence. Data still being collected through interviews and assessed. More at year end.</p> <p><b>PES-3:</b> QWI data received through first 7 quarters of our 20 quarter (5-year measurement period) shows net increase of 369 jobs in targeted industries. Losses in 3 target NAICS industries led to job decline from our previous report. Now currently at 25% of goal through 35% of the 5-year period.</p> <p><b>PES-9:</b> Q3 2024 survey data continues to be reported, and private capital investment continues to grow, \$82 million as of Oct. Employment numbers positive and growing.</p>	<p><b>PES-1:</b> Small business luncheon, and the beginning of sector meetings, have been very well attended, and significant positive feedback, support for continuing in 2025. Input from these sessions have informed Development Code conversations and increased retention and expansion activities.</p> <p><b>PES-3:</b> QWI data received through the first 8 quarters of our 20 quarter (5-year) measurement period shows a net increase of 573 jobs in targeted industries. Significant data lag exists, but we've achieved 38% of our targeted jobs total while being 40% of the way through the 5-year measurement period.</p> <p><b>PES-9:</b> Q4 survey results for 2024 show ~\$85 million of private capital investment by Douglas County companies, businesses. All respondents reported steady or growing employment.</p>
	SBDC Support	\$30,000.00	<p><b>Community Engagement</b> - Establish Lawrence as the most business friendly community in the region; Make existing businesses a priority, providing robust support for business retention and expansion; Provide resources and support for small and medium-sized businesses to grow and expand; Increase and focus resources to generate entrepreneurial and tech-related company growth.</p> <p><b>Equity &amp; Inclusion</b> - Ensure greater economic opportunities amongst historically marginalized populations, communities and businesses.</p>	<p><b>PES-1:</b> Percent of businesses rating Lawrence as a good or excellent place to do business;</p> <p><b>PES-5:</b> Women/minority business ownership rate; <b>PES-7:</b> Area median income</p>	<p><b>PES-1:</b> Serve 400 businesses annually</p> <p><b>PES-1:</b> \$16 Million in new capital access annually;</p> <p><b>PES-5:</b> 15% minority-owned business; 60% women owned businesses served</p> <p><b>PES-7:</b> \$10 Million in client revenue growth</p>	<p><b>PES-1:</b> Serve 450 businesses annually</p> <p><b>PES-1:</b> \$17 Million in new capital access annually;</p> <p><b>PES-5:</b> 20% minority-owned business; 60% women owned businesses served.</p> <p><b>PES-7:</b> \$12 Million in client revenue growth;</p>	<p>The goal of the SBDC to serve and support new and existing small businesses which aligns with the City of Lawrence's Strategic Plan. The KU SBDC leverages dollars from other funding partners to make a significant impact on the economic prosperity of our residents.</p>	<p><b>PES-1:</b> To date, the KU SBDC has served 450 clients, and that and that number continues to grow. The Chamber has served nearly 200 small businesses in various capacities, including one-on-one, seminar style meetings, and even a focus group in Oct. for developing clear understanding of challenges.</p> <p><b>PES-1:</b> Approx. \$6.3 million in new capital</p> <p><b>PES-5:</b> 21.4% of clients served by the KU SBDC have been minority-owned business clients. Approx. 56% women-owned businesses make up the SBDC clients served.</p> <p><b>PES-7:</b> Data will be collected in early 2025 when annual survey is conducted.</p>	<p><b>PES-1:</b> Through 2004, the KU SBDC has served 534 clients, even with a smaller staff through transition. The Chamber has served 250-300 small business through various small group and one-on-one engagements with various capital, growth, and other opportunities and challenges.</p> <p><b>PES-1:</b> ~\$8 million new capital, but data incomplete</p> <p><b>PES-5:</b> 21.7% of clients served by the KU SBDC have been minority-owned business clients. Approx. 60% woman-owned businesses make up the SBDC clients served.</p> <p><b>PES-7:</b> ~\$5 million client revenue growth, but data incomplete</p>

Agency Name	Program	Amount Awarded	Outcome/Commitment Area	Progress Indicator	Progress Indicator Current Status	Change in Progress Indicator Status Proposed	Notes/Justifications	Q3-2024 Progress Status	
Lawrence Chamber of Commerce/EDC	Minority Business Support	\$105,000	<b>Community Engagement</b> - Increase and focus resources to generate entrepreneurial and tech-related company growth.	<b>PES-2:</b> Percent of residents rating Lawrence as a good or excellent place to work		<b>PES-2:</b> 25 average number of attendees BIPOC networking/resource sessions.	Program has not officially started yet, baseline will be established by year- end average	<b>PES-2:</b> Primary focus on Empowerment Expo on 10/10, a business conference that includes many partners who serve diverse businesses and owners in inclusive ways, including Elevate, Mid-America LGBT Chamber, Haskell, Toolbox, Omni Circle, and others.	<b>PES-2:</b> Attendance, feedback from Empowerment Expo, an inclusive business conference, included partners that look to engage in more opportunities, and deeper, in 2025 to support entrepreneurship, inclusive business topics, and resource sharing. 120 attendees on 10/10.
			<b>Equity and Inclusion</b> - Ensure greater economic opportunities amongst historically marginalized populations, communities and businesses.	<b>PES-5:</b> Women/minority business ownership rate		<b>PES-5:</b> 15 number of participants in entrepreneurship training <b>PES-5:</b> 5 number of Minority Revolving Loan Funds granted/\$500,000 amount in total	Program has not officially started yet, baseline will be established by year- end calculations	<b>PES-5:</b> Online Restaurant Academy pilot is launched and active to support minority-owned food business launch. <b>PES-5:</b> Financial Review Board for E-Community and DDC welcomed two new members and met with NWKS President on 9/25. Business Beat feature of Blinded Collections, a DDC recipient. Continued work with applicants in progress. <b>PES-5:</b> Spanish language materials completed for DDC flyer, FAQ sheet, Empowerment Expo info sheet - live translation service being utilized for Expo.	<b>PES-5:</b> Engaged with KU Entrepreneurship program, Haskell Summit, and supported Inclusive Winter Market in 2024. <b>PES-5:</b> Increasing and diverse engagement with DDC, including six approved loans, one who is utilizing TA assistance funds. Approx. \$85,000 disbursed. We continue to connect, engage, and support throughout. <b>PES-5:</b> Continued conversation with DEI committee will support continued inclusion of Spanish-speaking, rural, and other Douglas County communities.



Tenants to Homeowners (TTH)

Website- [tenants-to-homeowners.org](http://tenants-to-homeowners.org)

[Click here to return to list of community partners](#)



# TENANTS TO HOMEOWNERS

## 2022-2023 ANNUAL REPORT



Affordable Housing  
Starts Here

Supported by the City of  
Lawrence Affordable  
Housing Trust Fund.

City of Lawrence





# BOARD OF DIRECTORS and STAFF

## President

Lloyd Rainge, Director 2012 - 2023  
VP Community Investment, Capitol Federal

## Vice President

Ashley Zeller, Director since 2020  
Bank Midwest

## Treasurer

Amy Cleavinger, Director 2016 - 2023  
Former lender and title agent

## Secretary

Suzanne Kerich, Director since 2017  
KU Facility Manager

Mike Myers, Director since 2011  
Hernly & Associates

Chad Krause Director since 2023  
KU School of Architecture & Design

Chelsea Benoit, Director since 2018  
First Management

Raven Harper, Director 2021-2023  
Prairie Moon Waldorf

Emily Blevins, Director since 2019  
Truity Credit Union

Rachel Royer, Director 2019 - 2022  
Kaw Valley Bank

Marie-Alice L'Heureux, Director since 2022  
KU School of Architecture & Design

Selene Zepeda, Director 2021-2023  
US Bank

Aaron Clopton, Director 2022-2022  
KW Commercial

Gregory Crichlow, Director 2022-2022  
KU School of Architecture and Design

Tricia Spencer, Director 2023 - 2023  
Professional Musician/Artist

Angela Winn, Director since 2023  
Kansas Children's Service League

Erin Maigaard, Director since 2023  
Realtor

## STAFF

**Executive Director**  
Rebecca Buford

**Assistant Director**  
Nicholas Ward

**Rental Program Manager**  
Liza Pehrson  
Chassidy Bryan (outgoing)

**Housing Care Coordinator**  
Angie Bauer

**Rental Compliance Manager**  
Kathy Sposato

**Finance Manager**  
Whitney Valasquez

**Administrative Manager**  
Pat Payne

**Homebuyer Program Manager**  
Ashley Taylor  
Michelle Pyle (outgoing)  
Jasmine Bates (outgoing)

**General Contractor & Rental  
Maintenance Manager**  
Jeremi Lewis

**Rental Maintenance  
Assistant**  
Dylan Swain

# ADDRESSING THE NEED

The economic consequences of the pandemic are still felt and the gap between incomes and housing costs in our community continues to increase—with home prices appreciating by another 13% in 22-23. Pandemic anxiety and rippling instability have created more experiences of homelessness and community members need more supports to remain sustainably housed. Although the Housing Stabilization Collaborative and state rental and mortgage assistance programs helped many maintain a roof over their heads, the end of 22/23 saw those assistance funds shrink. At the same time, the disparity between what the community needs to be safely housed and what current housing supply provides, continues to grow.

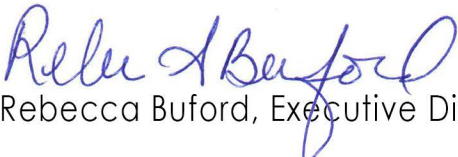
Fortunately, federal recovery funding is providing a once in a lifetime opportunity to put significant resources into housing. Building truly affordable housing supply that can be managed by not-for-profit housing providers who have the expertise to build functional housing that serves a spectrum of needs seems possible.



Erika Zimmerman and Rebecca Buford sign for the purchase of Kasold on the Curve.

In an effort to strategically leverage recovery funding, TTH requested 3.3 million from Douglas County ARPA funds to ensure that land could be obtained throughout the community for development. TTH closed on 10 sites for future development. 5 of those sites included 25 units of rental housing that are already housing families. We will continue to plan new development projects that will allow us to leverage additional ARPA funds with requests for proposals that are being opened in 2023. In this way, we want to design a good mixture of affordable housing types at these locations. Many aim to house those with the most complex needs.

In 2022 TTH purchased land that will provide the groundwork for a pipeline of over 250 affordable units. In 2023, we applied for additional building funds and grew our capacity to serve those coming out of complex situations with partnerships, small housing units, collaborations with Peaslee Technical Training Center and Kansas University architecture students and increase our capacity to build quality housing for less. Investing in the Lawrence Community Housing Trust and its appreciating supply of well-built units will ensure that truly affordable housing remains to serve the community long after this one-time funding is gone.

  
Rebecca Buford, Executive Director

# HOMEBUYER PROGRAM

## **TTH Homebuyer program and the Community Land Trust:**

Tenants to Homeowners, Inc. provides a unique Homebuyer program made possible through the Community Land Trust (CLT) ownership model. As a CLT, TTH purchases land and places that land permanently into trust.

When a homebuyer purchases a home from TTH, TTH maintains ownership of the land which is then leased to the homeowner for full use, at a very low fee (\$30/month in 2022). The homeowner has all rights to use and enjoy the land through a 99-year term ground lease. This ground lease is the CLT's legal instrument to ensure permanent affordability.

Because TTH maintains ownership of the land, the value of the land is subtracted from the cost of the home. Through this model...

**Homeownership through TTH allows low-moderate income buyers a chance to build wealth while living within their means.**

**TTH is able to offer homeownership units to buyers at \$50-80k below market value!**



## **Home Resale:**

TTH uses a special resale formula to determine the sales price of a TTH home. This formula is agreed to upfront as part of the land trust agreement when a homeowner first purchases their home.

The land trust agreement and TTH's active role in the resale process, ensure that TTH homes remain permanently affordable for each subsequent homebuyer.

TTH maintains a waiting pool of income-eligible buyers who meet all program criteria. When a home comes up for resale, TTH reaches out to the waiting pool to determine which applicant is eligible for the size of home that is ready for purchase at that time.

Homeownership with TTH allows sellers to build wealth in two ways: When a home is resold, the seller receives the equity they have worked to build in the home. In addition, homeowners receive 25% of the increase in market value. Ideally, this model allows the seller to build a nest egg of wealth that gives them the financial security to later move into the unrestricted home buying market.

# RENTAL PROGRAMS

## TTH Rental:

Tenants to Homeowners owns and maintains more than 130 affordable rental units located throughout Lawrence and Douglas County. TTH units provide safe and affordable rental options for individuals and families with low to moderate incomes.

TTH currently stewards several rental programs each designed to support an expressed community need.

- 47 Regular TTH
- 29 Supportive Housing units
- 24 units for seniors 55+
- 20 accessible units
- 14 units for seniors 62+



**Average income of all households in all programs: 40% of Area Median Income**

**Total BIPOC residents in TTH rental programs: 65 (34% of all residents)**

**Total children in TTH rental programs: 46 (24% of all residents)**

- Currently TTH has 124 occupied households (as of 05/19/23)
- Households with Children in all programs: 23 (19% of households)
- Households with BIPOC in all programs: 23 (19% of households)
- Total residents in all programs: 194

# HOUSING CARE COORDINATION

## Housing success comes in all shapes and sizes

TTH serves each client based on their own set of unique needs and goals. For some, this means guiding a pathway towards successful homeownership. For others, we offer a variety of rental programs with opportunities for tenants to receive special one-on-one support. We serve seniors, those with physical and mental health conditions, those transitioning out of foster care, homelessness, and situations of domestic violence. We believe by treating each situation with intentional support, empowerment, and healthy boundaries, we are providing those we serve with the tools necessary to achieve long lasting housing stability.



## TTH's Housing Care coordination addresses the unique needs of tenants and homeowners:

Care Coordination staff works with residents on interpersonal skills to develop healthy boundaries and to foster healthy relationships. Staff members also provide daily living and household management skill building so that residents can function independently within a household.

# EDUCATION

## TTH provides regular community education

- Homebuyer Workshops
- Homeowner Maintenance Workshops
- Post-Purchase Counseling and Foreclosure Prevention
- Pre-Qualification and Credit Counseling
- Senior Education for Cedarwood Senior Cottages and other tax credit partnerships
- Consultation for regional housing groups and new Community Land Trusts
- Program education for Housing Care Coordination clients



**Housing education needs** for the Lawrence community are as diverse as the community itself. Each TTH program offers different types of support meant to aid residents in the process of becoming successfully and sustainably housed. For some, this is purely a financial consideration and a short-term subsidy is all that is required. For others, needs range from accessibility requirements to financial literacy education and more intensive care coordination.

Our community education efforts include presentations to area neighborhood associations, serving in a leadership capacity on the City of Lawrence Affordable Housing Advisory Board, offering consultation services to new and beginning affordable housing organizations in the region and much, much more.

# NEW HOME CONSTRUCTION

## COLLABORATION

TTH continues to develop partnerships with local vendors, financial institutions, educational institutions, support agencies, community members and city leaders. Each year TTH works to strengthen these bonds through our programs, construction projects, public events and volunteer opportunities. In 2022-23, partnerships with Peaslee Tech, Dirtworks Studio, and Limestone Community school brought about new opportunities promoting an intersection of affordable housing development and hands-on affordable housing education.

## POLICY

TTH works closely with city leaders to inform and improve new policies for affordable housing. In 2019, TTH collaborated with Lawrence City Planning to draft and pass the Affordable Housing Density Bonus. In 2022, TTH began working with city leaders on improvements to the City's development code. These improvements will be of direct benefit to affordable housing and will allow for development types and density types that are new to our community and region.



## BUILDING A SUSTAINABLE FUTURE FOR AFFORDABLE HOUSING



### ACCESSIBILITY

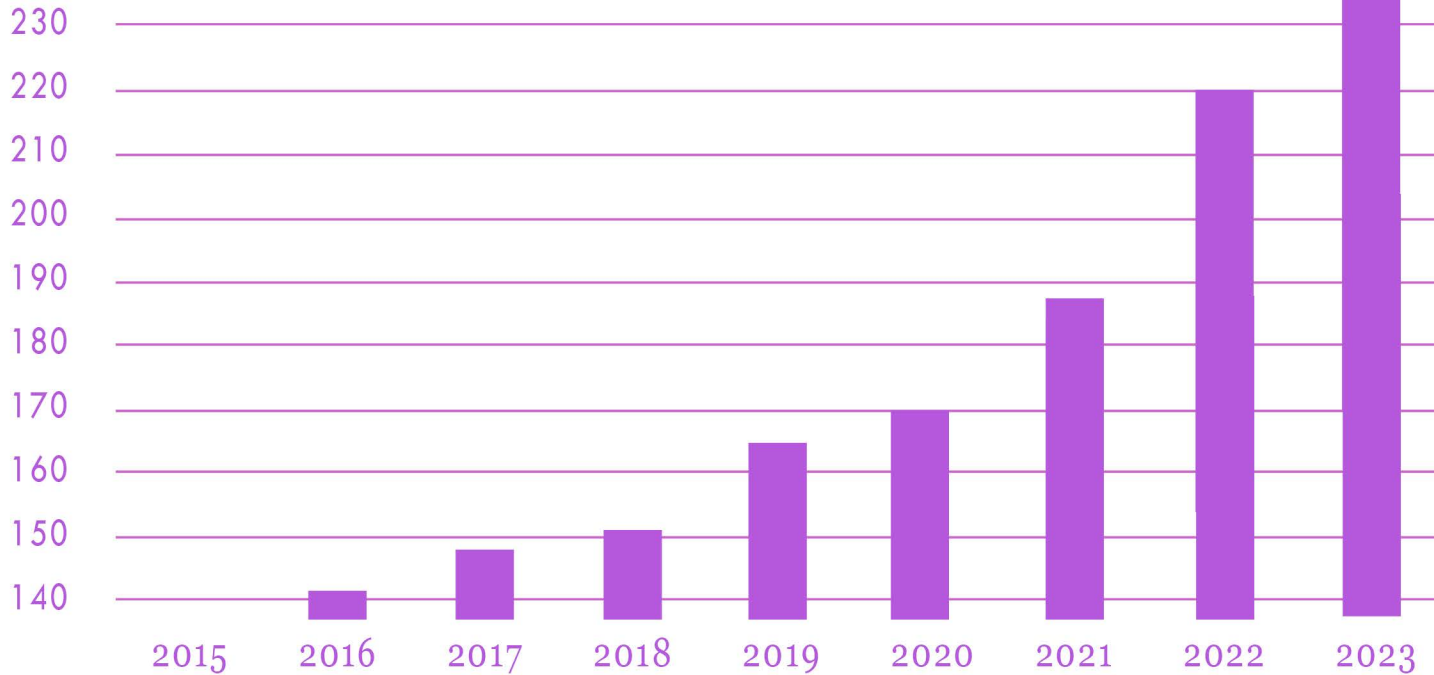
Fully accessible and visitable homes are a staple of the TTH development model. Whenever possible, new construction is built with an accessible entrance, turning radius' and bath, making TTH homes fully accessible or "visitable." TTH works closely with buyers to install features that meet their specific needs. For rehabilitated housing, TTH makes necessary improvements ensuring that the future of Lawrence's housing stock is one of accessibility. Additional considerations include building units on a level slab instead of a lifted crawl space or basement, lower placement of switches and outlets for those who might be confined to a mobility assistance device and inclusion of grab bars and other mobility assisting amenities (when applicable).

### SUSTAINABILITY

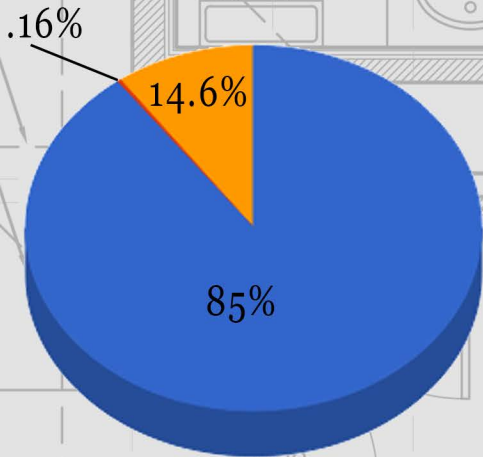
Being an Energy Star partner means that newly built TTH homes pass rigorous tests by a certified energy auditor. The payoff? TTH homeowners enjoy heating and cooling costs of less than \$125 per month! With the addition of renewables like solar energy, TTH is able to get annual energy costs as low as \$447. The combination of superb insulation, high quality windows, insulated slabs and solar energy exemplifies how sustainability and energy efficiency are standard features of TTH's growing stock of permanently affordable housing. With interest rates on the rise, TTH has worked with local lenders to incorporate decreased utility costs when calculating monthly mortgage. In this way, energy efficiency is making ownership possible for buyers who are struggling to purchase.



# CLOSING THE GAP

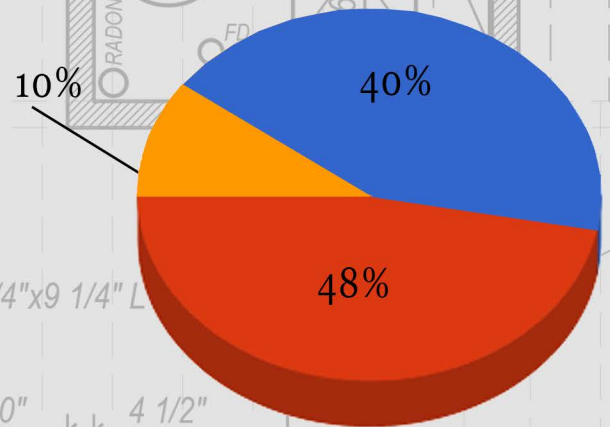


TTH PERMANENTLY AFFORDABLE HOUSING UNITS IN TRUST



TOP 3 EXPENSE SUMMARY

- PROGRAM
- ADMINISTRATIVE
- FUNDRAISING



TOP 3 INCOME SUMMARY

- PROJECT INCOME
- GRANTS
- HOME SALES AND PROGRAMS

# 2023 FINANCIALS

## Statement of Financial Position December 31, 2023

### Assets

Cash assets	437,966
Real Estate Under Development	3,775,398
Fixed Assets Rental Property	5,608,852
Land held in trust	3,008,290
Notes Receivable	791,513
Prepays	120,623
LCHT-Accessible-Housing Equity	66,622
Other Current Assets Accounts	8,610
Accounts Receivable	113,373

Total Assets \$13,941,247

### Liabilities & Net Assets

Security Deposits and Prepays	67,985
Accounts Payable	964,325
Accrued Payroll	61,807
Mortgages	2,567,770
Refundable Advances	1,370,588
Restricted Net Assets	146,700
Unrestricted Net Assets	8,762,072

Total Liabilities and net Assets \$13,941,247

## Statement of Activities for the year ended December, 31 2023

### Revenues and Other Support

House Sales and Program Income	807,094
Grants	3,188,209
Contributions	119,532
Project Income	3,837,024

Total Revenue \$7,951,536

### Expenditure

Program	4,604,053
Fundraising	8,880
Administrative	790,201

Total Expenditures \$5,403,134

### Change in Net Assets from December 31, 2022 - December 31, 2023

\$1,828,725

\*All information audited by SSC CPA'S. PA 2023 Audit available by request.

# IN HOUSING

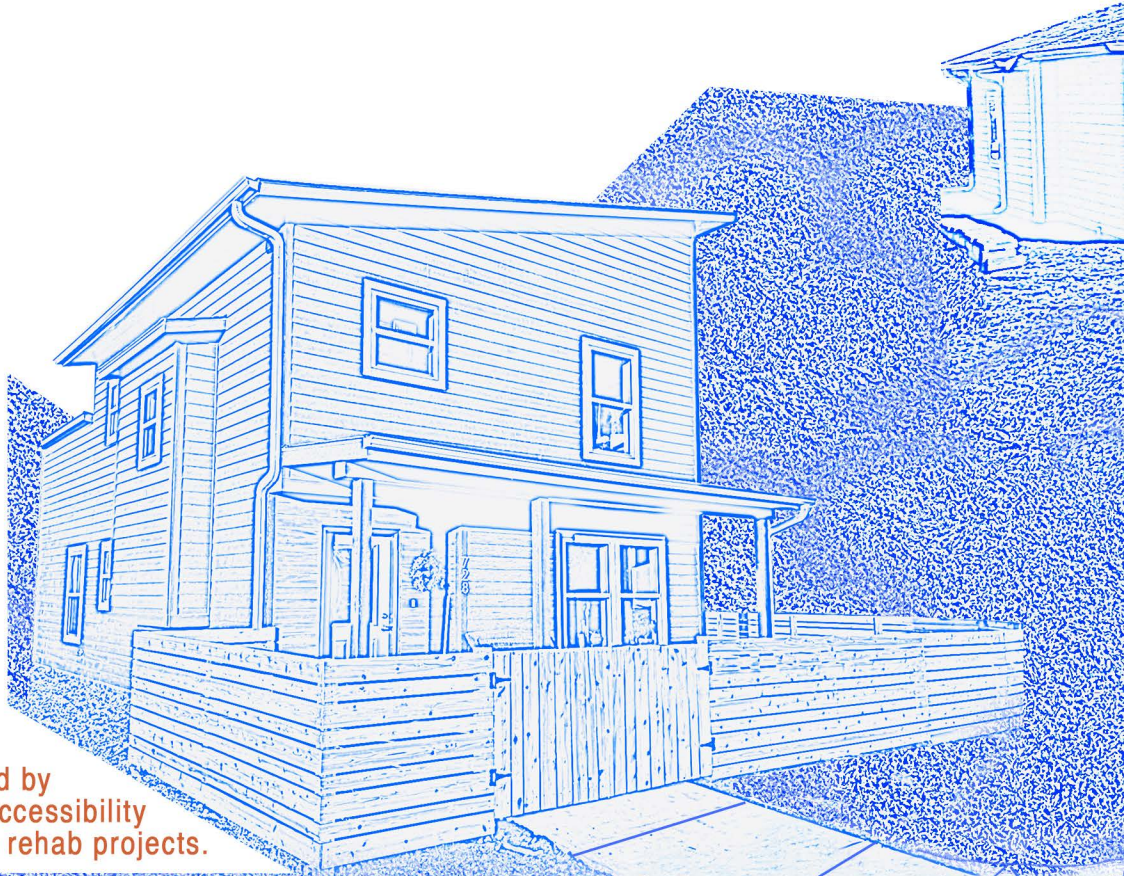
TENANTS TO HOMEOWNERS EMPLOYS AN ON-STAFF GENERAL CONTRACTOR AND WORKS WITH QUALIFIED AREA SUB-CONTRACTORS FOR ALL REHAB, NEW-CONSTRUCTION AND GENERAL MAINTENANCE.

## TTH HOUSING

Beatnik Court (Pictured)

TTH Ownership and Rental	Units
Built Ownership	79
Built Rental	26
Acquired Ownership	38
Acquired Rental	79
In production pipeline	300
Total in Trust	100

TTH stewards both rental and homeownership single-family units. Homes ranging from 1-4 bedrooms are dispersed throughout the Lawrence community and into Douglas County. TTH focuses on meeting the expressed community demand by including energy efficiency and accessibility in all new construction and home rehab projects.



## GROUP AND SUPPORTIVE SERVICE

Yale property (pictured)

Targeted Population	Units
Domestic Violence Survivors	11
Youth Aging Out of Foster Care	3
Accessible Housing	20
Homeless Transition Housing	20



TTH provides needs-specific affordable living for individuals experiencing mobility impairments, survivors of domestic violence, young adults aging out of foster care, those transitioning out of homelessness, and individuals in need of supportive services.

# WE TRUST!

## SENIOR HOUSING

Cedarwood Senior cottages (pictured)

Senior Housing	Units
Rentals Owned	14
Rentals Managed	38
LCHT senior ownership	12

Cedarwood Senior Cottages is a 14-unit townhome community for those aged 62 and over. Cedarwood offers a community cottage, 4 different floorplans, accessible walking paths and raised-bed community gardens.

## MULTI-FAMILY HOUSING AND TAX-CREDIT PROJECTS

9 Dell Lofts (pictured)

Multi-Family and Tax-Credit Projects	Units
9 Del Lofts	43
Bethel Estates	36
Bethel Estates, Gardner	48
Newcastle	42

TTH completed its first LCHT accessible housing tax credit project in 2011. Since then TTH has partnered on another 4 tax credit rental projects some senior, some affordable family w/market rate units. We are currently working on a westside project (Floret Hill) with 110 affordable units.



# COMMUNITY PARTNERSHIPS

## PEASLEE TECHNICAL INSTITUTE



We have partnered with Peaslee Technical Institute, where trade school students get practical building experience while creating small units at affordable prices. We love our mutually beneficial relationships that really bring a community together!

## LIMESTONE COMMUNITY SCHOOL



The Limestone School's 1st and 2nd graders wanted to explore the problem of housing supply for those experiencing houselessness. They worked with architects from Multistudio to design some simple units that TTH will build. One of these is for their teacher who is eligible and on the waiting list for our homeownership program. This partnership is getting national attention and helping us remind people about the need for workforce housing for our teachers and social workers, as well as those who are experiencing houselessness.

## DIRTWORKS STUDIO



A partnership with Dirtworks Studio, a KU Architecture design-build studio, is allowing us to experiment with different building materials while keeping costs affordable due to architecture student labor and donations from material sponsors. This is a win-win for teaching the next generation of architects about affordable design and creating affordable supply.

**Community Partners also include:** Kansas Housing Resources Corporation, Douglas County, City of Lawrence, Douglas County Community Foundation, Habitat for Humanity, Bert Nash, Senior Resource Center, Sabatini Architects, The Willow, Multistudio, Wood Haven, Good Energy Solutions.

# ARPA FUNDING

## ARPA

### AMERICAN RESCUE PLAN ACT

The U.S. Department of the Treasury has updated guidance that expands the use of the American Rescue Plan Act State and Local Fiscal Recovery Funds for affordable housing.

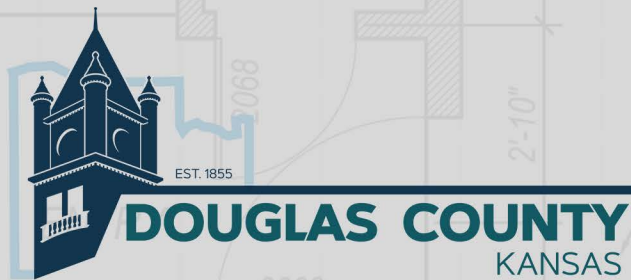
The Treasury released a How-to Guide that demonstrates how recipients can leverage the fiscal recovery funding with other sources to maximize resources to meet housing needs. This article summarizes the expanded options that states may pursue to invest State and Local Fiscal Recovery funding in affordable housing.

# \$4,725,000

## CITY OF LAWRENCE & DOUGLAS COUNTY



City of Lawrence



To date, both **Douglas County** and The **City of Lawrence** have invested ARPA dollars in affordable housing solutions. TTH has received \$3,725,000 from **Douglas County** towards the acquisition of land and affordable units to meet the needs of individuals requiring supportive services and transitional housing.

The **City of Lawrence** has provided TTH with \$1,000,000 in funding to support permanently affordable housing that meets the needs of low-moderate income Lawrence residents. These allocations of federal funding are ensuring a future of affordability for Lawrence and Douglas County residents.

# EXPANDING THE TRUST

EUDORA /  
BALDWIN CITY



## LANDTRUST EXPANSION (Homeownership)

In 2022 TTH began construction on several permanently affordable homes in Baldwin City. Made possible through State Moderate Income Housing, these homes along with three Habitat homes located in Eudora, mark the first LCHT landtrust units located outside the city limits of Lawrence.

# NEW HOMES COMING SOON!

### PERMANENTLY AFFORDABLE HOMEOWNERSHIP FOR BALDWIN CITY

REACH OUT TO TENANTS TO HOMEOWNERS AT (785) 842-5494 TO  
LEARN MORE ABOUT OUR HOUSING PROGRAMS AND HOW YOU CAN  
HELP SUPPORT AFFORDABLE HOUSING IN BALDWIN CITY.



## GOLD LEAF SENIOR LIVING (Rental)



In 2021, TTH acquired management of 24 new construction units of moderate-income senior rental housing in Baldwin City. This marks TTH's first foray into affordable housing management beyond the city limits of Lawrence. Gold Leaf provides 24 2-bedroom accessible townhomes for those aged 55+. Units rent for 575-775/month

# GIVE THE GIFT OF HOME PLANNED GIVING

## WHAT IS PLANNED GIVING AND WHY DOES IT MATTER?

Planned gifts are contributions, large and small, that donors arrange in the present and allocate at a future date. Most often they are made through a will or trust and given to TTH once the donor has passed away.

The most common models utilized is a Retained Life Estate which retains full use of assets for the owner for the duration of their life. When they pass, The asset is then bequeathed to the Community Land Trust to support affordable housing in Douglas County.

## BENEFITS OF PLANNED GIVING

Planned gifts can offer substantial tax savings by reducing income tax and avoiding capital gains tax or lowering property tax.

You decide how your money is spent. Support social services, small home development, green initiatives, senior housing, or a family's first home. When your assets support the Lawrence Community Housing Trust, they are creating a legacy of affordability that will serve generations to come.

Your tax exempt donation of a home or land into trust creates permanent affordability



Affordable Housing Starts Here

Supported by the City of Lawrence Affordable Housing Trust Fund.

City of Lawrence





# BATTLE OF THE BUILDERS

2022-23' Annual Events



5k Fun Run



Framers framing



Bouncy house crew

# OVER \$50K RAISED!



The 2022 TTH annual event was held at Beatnik Court. This year we debuted our first ever 5k Fun Run which saw attendance from more than 30 (new to TTH) event participants.

Our 2023 event was held at 1718 Harper (Harper7). Participants enjoyed live music, a medley of kids crafts, fresh food, tabling from TTH partners, an open house, and the first ever TTH Cornhole tournament.

Event participants play an integral role, helping TTH to fund more housing!



# SELECTED ACCOMPLISHMENTS

## 2022-23



- TTH currently provides 465 individuals with housing including 134 permanently affordable rentals and 104 ownership homes in trust.
- In 2022-23, TTH completed 17 real estate transactions, adding 12 new homes to trust. TTH's sales had an average market value of \$195,900. The average subsidy per home was \$56,782 plus closing costs of \$4,000, allowing income eligible families to have an average affordable price of only \$135,350. The Lawrence Board of Realtors reports the average 2023 sale price was \$303,100 with homes selling for an average of 100% of their listed sales price. LCHT homes—were purchased for \$167,750 below the average sale price in Lawrence—TRULY AFFORDABLE!
- TTH acquired and leased 19 new rental units in partnership with The Willow Domestic Violence Center. Restoration House and 7 additional homes provide transitional housing and case management for survivors as they build stability and move towards permanent housing.
- TTH's Helping Hammer Senior Home Repair Program provided sliding-scale home repairs to 32 Douglas County households including consultation, accessibility improvements, and general maintenance.
- In 2022, TTH completed ARM renovations to 313 Clayton and 912 w 24th Street to ensure a 4 bedroom house and a 14 unit building remain permanently affordable after being purchased with ARPA Funding. Working with the City of Lawrence and private owners, ARM is bringing previously vacant units into good standing by making basic repairs and stewarding these rehabilitated affordable rentals.
- Restoration House, Phoenix House, and 7 Maine homes provide transitional housing with care coordination for survivors of domestic violence and young adults aging out of foster care. This year TTH and Willow housed 50 survivors, ensuring they did not have to choose between violence and homelessness.
- TTH continued construction at Harper 7, Ward, Perry and Beatnik Court and on two homes in Baldwin City. All new construction has a focus on energy efficiency, including solar panels to help reduce monthly utility costs.
- TTH received grants and donations from 64 different supporters in 22'-23' totaling over 6 million in current and future funding for the acquisition, development and administration of affordable housing.

# THANKS FOR YOUR SUPPORT

SUNDERLAND FOUNDATION, DOUGLAS COUNTY COMMUNITY FOUNDATION, UNITED WAY OF DOUGLAS COUNTY, LAWRENCE BOARD OF REALTORS, CHUCK AND DEE BLASER, TRUITY CREDIT UNION, JOHN AND VALERIE ROPER CHARITABLE FUND, PERSHING ADVISOR SOLUTIONS, BELL'S TURF, PRO-PRINT, GOOD ENERGY SOLUTIONS, FLINT HILLS HOLDINGS, BUILD SMART, PROSOCO, KANSAS SECURED TITTLE, ELIZABETH SCHULTZ ENVIRONMENTAL FUND, WINTER FAMILY FUND, GEORGIA WILLMAN CHARITABLE TRUST, SCOTT TEMPERATURE, WHEATLAND INVESTMENTS, ROGER JOHNSON & ALCOVE DEVELOPMENT, CEK INSURANCE, U.S. BANK, KASTL PLUMBING, SSC CPA'S, P.A., HERNLY AND ASSOCIATES, FLOOR TRADER, ROBERT AND AMY CLEAVINGER, RICK RENFRO, MARIE ALICE L'HEUREUX, BASIC CARPET CARE, MARCUS RAINGE, WOOD N STUFF CABINETS, FIRST CONSTRUCTION, ERICKSON SOLUTIONS GROUP, SCHONBERG TREE SERVICE, LASER PEST MANAGEMENT, DANIELLE DAVEY, GREY STAG LLC, DANIEL AND NICOLE SABATINI, FAST SIGNS, CAPITOL FEDERAL FOUNDATION, TRUITY CREDIT UNION, CENTRAL BANK OF THE MIDWEST, BEAUTIFUL MUSIC VIOLIN SHOP, GROB ENGINEERING, ERIC DEGENHARDT, LINDA AND KEVIN CARR





# HEARTLAND

COMMUNITY HEALTH CENTER

Heartland Community Health Center

Website- [heartlandhealth.org](http://heartlandhealth.org)

[Click here to return to list of community partners](#)

Exhibit A

Heartland Community Health Center - Scope of Services

**Substance Use Disorder and Medical Assisted Treatment Program**

- 1. Target Population:** Patients with Substance Use Disorder who are candidates for MAT services. Additionally, prioritize patients with needs for integrated care and are under or uninsured.
- 2. Support:** Douglas County funding supports SUD services as a community leader in integrated healthcare and accessible community support. This is in response to the growing SUD prevalence in Douglas County. Supports include access to MAT treatment and medication in addition to integrated care including primary care, behavioral health and dental care
- 3. Accountability Measures:** Heartland Community Health Center provides comprehensive care for patients with substance use disorders (SUDs), with a focus on addressing alcohol and opioid addictions. This comprehensive care includes primary care, dental and behavioral health. Access to integrated care improved outcomes in MAT continuity and compliance. Heartland continues to see a growth in patients experiencing substance use disorder. Measures are as follows:

	2024				
SUD/MAT Information	Q1	Q2	Q3	Q4	Total
Active patients with substance use disorder	367	347	384	326	1,424
Substance use disorder services	220	231	242	244	937
Patients actively enrolled in MAT	88	88	80	75	331
New patients enrolled in MAT	40	35	37	77	189
Number of patients with med continuity	32 (> 6 months)	18 (> 6 months)	17 (> 6 months)	18 (> 6 months)	85
Number of patients receiving integrated care					
Dental	23	19	25	69	136
Primary Care	143	121	165	176	605
Behavioral Health	30	27	39	48	144

**Community Health Worker**

- 1. Target Population:** Douglas County residents with barriers to care with a priority patient population that is low income and have a high rate of no shows for appointments.
- 2. Support:** Funds are used to support a portion of the cost of a Community Health Worker (CHW). CHW's collaborates with Heartland's integrated medical team and community-based social services agencies to provide short term care coordination and connection to resources at Heartland. This position will support clients to improve their health and general well-being through education and provision of coordination of care and services. Works in both clinical and community-based settings, May act as a peer support worker, where applicable.
- 3. Accountability Measures:** CHWs at Heartland help patients and care teams overcome the care gaps that arise in an exam room or in the community when trying to access care. That is broad and can range from various needs. A CHW must be a trusted source of the community and function as a bridge to resources and eager to work alongside and with care teams. CHWs programs are created to break down barriers and go beyond the typical four walls to reach and connect with the community, and in our case, patients. Measures are as follows:

	2024				
CHW Information	Q1	Q2	Q3	Q4	Total
Referrals to CHW	159	138	200	279	776
Patients with identified barriers to care TYD	159	138	200	279	776

Patients with barriers to care successfully addressed	153	121	168	184	626
CHW visits	170	168	262	572	1,172
Number of active CHW patients	101	84	134	289	608

**Psych Supplemental:**

- 1. Target Population:** Douglas County patients in need of psychiatric care with a emphasis on those who are uninsured or underinsured.
- 2. Support:** Funds support cost sharing from Psychiatric Infrastructure funds through Douglas County by offsetting the deficit of Heartland’s psychiatry staffing. Heartland has increased support in psychiatric care for Douglas County and currently has 3 FTE of psychiatric providers in addition to their care teams. This service expansion was in response directly to the community's need for psychiatric services for children and youth. Projected revenue for the department is \$766,914 and the total cost is \$1,164,364.
- 3. Accountability Measures:** Heartland’s pediatric psychiatrist and two APRNs maintain a panel of 500 patients each. Heartland currently projects each psychiatrist FTE to see 1,800 to 2,000 encounters per year. A reduction in providers would further limit access to psychiatry for those patients currently receiving care and waiting for care. Measures are as follows:

	2024						
Psychiatry Information	Q1	Q2	Q3	Q4	Total	Average/Qtr	%/Qtr
Total Patient Encounters	983	1271	1268	1090	4,612	1,153	
Total Patients by Provider							
R. Loehr	178	85	240	212	715	179	30.5%
A. Dunham	130	90	206	131	557	139	23.7%
Dr. Evangelidis	269	101	312	301	983	246	41.9%
A. Weiser	---	---	---	111	111	N/A	4.7%
Total Patients Served	577	276	758	755	2,346	587	
Total New Patients YTD	13	126	114				
Average wait time	5 mins, 57 seconds	6 mins, 35 secs	7 mins, 13 secs	8 mins 25 secs		7 mins, 2 secs	



Lawrence Community Shelter (LCS)

Website- [www.lawrenceshelter.org](http://www.lawrenceshelter.org)

[Click here to return to list of community partners](#)

**The Lawrence Community Shelter, Inc.  
City/County Quarterly Report Oct.-Dec. 2024**

**1. Number of unique individuals served per program**

<b>Total unique clients served</b>	<b>Entry/Exit: 90-day program</b>	<b>Entry/Exit: The Village</b>	<b>Night by Night</b>	<b>Reentry</b>
341	48	74	262	8

**Narrative:** 48 individuals participated in our 90-day program during the fourth quarter of 2024. 262 individuals participated in night by night services; this number includes those who attended while Weather Emergency Shelter was in effect, as well as those who moved to or from other programs during this time. The Village remained in full operation, with 74 individuals participating during the quarter.

**2. Summary of case management services**

**Number of individuals receiving assistance related to identification and government benefits**

<b>SNAP benefits</b>	<b>Medicaid or Medicare</b>	<b>Social Security benefits</b>	<b>Employment assistance</b>	<b>Birth Certificate</b>	<b>Social Security Card</b>	<b>State ID or driver's license</b>
10	2	10	23	14	3	5

**Narrative:** All in all, 20 unique individuals received services relating to obtaining identification documents, 17 individuals received services relating to obtaining government benefits, and 23 individuals received assistance with obtaining employment.

**Number of individuals referred to Coordinated Entry**

<b>HMIS Enrollments</b>	<b>CES HOMELESS Assessments</b>	<b>Coordinated Entry referrals</b>
58	34	29

**Narrative:** LCS has been a significant contributor in the field of data collection in support of the city's Five-Year Plan, enrolling 58 new individuals into the HMIS software that powers the



county by-name list, performing 34 CES assessments, and referring 29 individuals to Coordinated Entry.

**3. Housing services:**

**Permanent Housing or Programs:**

<b>Referrals from CES</b>	<b>Housed by RRH</b>	<b>Housed with Voucher</b>	<b>Long-term care</b>	<b>Other permanent housing</b>
1	0	5	0	19

**Narrative:** 24 clients were exited to permanent housing during this quarter. No clients were placed in long-term care, and none moved into permanent supportive housing—though 5 were placed in transitional housing programs within the community. 12 clients found permanent housing alongside family or friends, and 7 were housed without subsidy. 5 clients were housed with subsidy, either through HUD-VASH vouchers or within project-based Section 8 housing units.

**Other assistance:**

<b>Voucher application assistance</b>	<b>Other housing assistance</b>
14	24

**Narrative:** LCS has assisted with 14 Emergency Housing Voucher applications during the quarter. Of the other forms of housing assistance, they consist of a mixture of assisting with apartment applications, coordinating with other community-based housing programs, move-in assistance, and stabilization visits for those housed through our RRH program.

**4. Number of referrals to Heartland RADAC**

<b>Referrals to Heartland RADAC</b>
6

**Narrative:** This number only includes the number of RADAC referrals made by case management specifically. Clients still have the ability to self-refer to RADAC and begin receiving services.

**5. Number of referrals to mental health services**

<b>BN HOT</b>	<b>BN ACT</b>	<b>Mobile Response</b>	<b>Treatment and Recovery Center</b>
1	1	1	2

**Narrative:** Two referrals were made to Bert Nash programs during this quarter.

**6. Number of referrals to medical services**

<b>Assisted obtaining medical services</b>
7

**Narrative:** Seven individuals were referred by case management to local medical services during this quarter, including Heartland and LMH. This number does not include individuals who received emergency medical services while on-premises.

**7. Number of referrals to Lawrence Douglas County Housing Authority**

<b>LDCHA Voucher Applications</b>
17

**Narrative:** LCS submitted or helped with these applications.

**8. Number of referrals to Housing Stabilization Collaborative**

<b>Referrals to HSC</b>
0

**Narrative:** In late 2023, HSC voted to no longer provide move-in assistance to unhoused community members. Thus, no referrals to HSC were made this quarter.

**9. Attach any addendums and or changes added/made to the LCS Operational Guide and or Shelter Policies within this past quarter.**

(Attached)

**10. Attach financial statements and personnel expenditures for the reporting period.**

(Attached)

**11. Attach current Board Members and their roles.**

<b>Board Member</b>	<b>Role</b>
Charlie Bryan	President
Shannon Oury	Vice-President
Christina Gentry	Secretary
Rebekah Gaston	Treasurer
Chuck Magerl	Member
John Krehbiel	Member
Chaconie Baker	Member

**Narrative:** In November 2024, LCS welcomed Chaconie Baker to its Board of Directors, replacing Elizabeth Keever.

**12. Attach Shelter Organizational Chart (to include positions, number of current staff, and vacant positions needing filled).**

(See attached)

**13. Attach HMIS shelter program data for the reporting period including client demographics and bed utilization rate.**

Client demographic data for the ESG ES, NBN and Village programs are included.

<b>90 Day</b>	<b>NBN</b>	<b>Village</b>	<b>Overall</b>
---------------	------------	----------------	----------------

103%	74%	85%	80%
------	-----	-----	-----

**Narrative:** The 90 day program expanded its serving capacity from 25 to 30 in November 2024; even still, the program has operated at capacity during the entirety of the quarter and occasionally going over capacity as determined by need. The Village averaged 85% bed utilization for the quarter, with this percentage trending upwards toward the quarter’s end. Attendance rates for the night by night program are prone to fluctuation, often due to external circumstances, but bed utilization has averaged around 74%. This number is also trending upwards, with December 2024 averaging 90% utilization from day to day.

**14. Attach HMIS housing program data for the reporting period including number of guests served in RRH, number of guests housed through RRH, and average number of days between RRH enrollment to housing.**

Served by RRH	Housed through RRH	Already housed	Avg. Days to Housing
17	0	8	N/A

**Narrative:** 17 individuals were actively enrolled in Rapid Re-housing at any point within the quarter. As nearly all Rapid Re-housing funding was already allocated for this fiscal year, no new clients were moved in during Q4. Instead, the bulk of the remaining funding for the year was used for providing stabilization to those who moved in during the previous quarters. Two RRH clients moved into transitional housing during this quarter; RRH funds were used to pay for related fees and these clients are still receiving case management services as they search for permanent housing. One client was successfully exited from the RRH program while in permanent housing after reaching self-sufficiency.

**15. The number of persons who have been “dropped off” in the community without a “warm hand-off” from other counties, cities, agencies, or the like.**

Dropped off by out-of-county organizations	Out-of-county arrivals
0	8

**Narrative:** LCS has experienced individuals presenting for shelter from other counties. A majority of these individuals report they were encouraged to come to LCS by other agencies because of our respite policy. Our case management team fields a number of calls from such agencies inquiring about our services, and they work with the external agencies to find a more fitting solution within their own regions. With the establishment of the city’s Homeless Response

Team, out-of-county arrivals now have a dedicated point of contact to which they can be referred.



Lawrence-Douglas County Housing Authority (LDCHA)

Website- [ldcha.org](http://ldcha.org)

[Click here to return to list of community partners](#)



## New Horizons Progress Report: Lawrence Douglas County Housing Authority Quarterly Report: December 2024

The LDCHA's New Horizons Transitional program provides the most significant opportunity for permanent housing assistance to families experiencing homelessness in Douglas County. This program assists in the achievement of the county and city's affordable housing goals by creating a pathway to permanent housing assistance for families experiencing homelessness. This program as whole has a success rate of 81%. Rental assistance with 24 months of case management has for years proven to be a successful process for helping households find stability when it comes to housing and the barriers that exist around homelessness.

### 2025 Awarded Funding

- \$50,000 Douglas County.
- \$50,000 AHTF

### 2024 Funding

- \$50,000 awarded by Douglas County.
- \$50,000 awarded by the AHTF

### Program Summary

- 50 households have been housed through New Horizons since 2016; for a total of 178 individuals, 118 of which are children,
- 19 families are actively housed; 6 households on the waitlist.
- 50% of New Horizon participants identify as BIPOC.
- 84% of participants are low-income with an AMI of 0-30%.
- Average housing assistance payments: \$9,900 annually.
- **New Horizons has a success rate of 81%:**
  - 21 households successfully exited the program and received a permanent housing voucher;
  - 4 households left the program in good standing;
    - 1 moved to Colorado for a job;

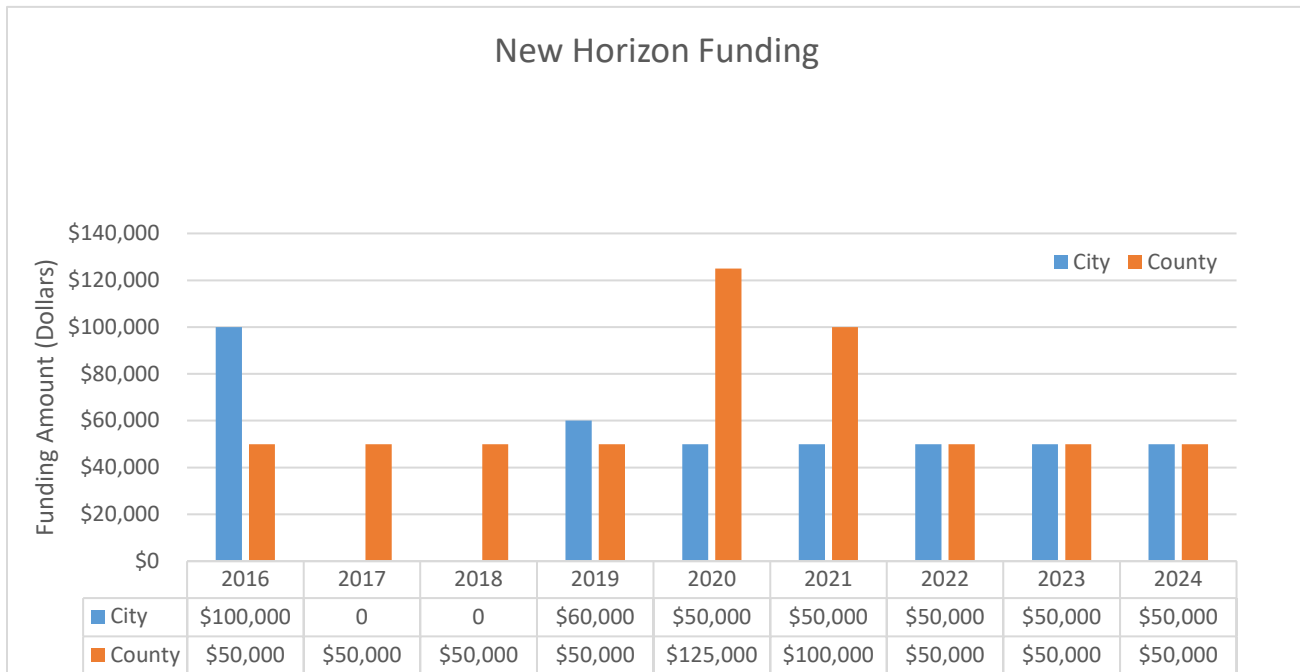


- 3 households were employed in town and decided to go into market rent structures;
- 6 households did not successfully complete the program.

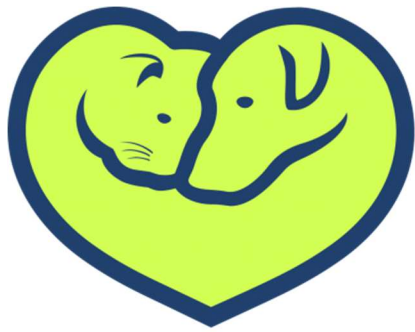
Families enrolled in the New Horizons Housing Program participate in self- sufficiency activities including Renter’s Education courses. The courses provide education and tools for families to be successful in their housing goals and to understand their rights and obligations as tenants. Families also have access to the Resident Services office, which provides additional self- sufficiency supports including:

- youth programs,
- wellness,
- employment,
- educational/vocational assistance,
- financial literacy,
- transportation,
- and case management services.

LDCHA collaborates with other social service agencies who provide ongoing case management supports to the families housed in the New Horizons program.







*Lawrence*  
**HUMANE**

Lawrence Humane Society (LHS)

Website- [lawrencehumane.org](http://lawrencehumane.org)

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Lawrence  
**HUMANE**

FIELD SERVICES &  
ANIMAL SHELTERING SERVICES



785-843-6835



15805 E 19th St, Lawrence, KS 66046



lawrencehumane.org

## Intake and Disposition Statistics Unincorporated Douglas County

*January 1, 2024 to December 31, 2024*

<b>TOTAL Intakes</b>	<b>349</b>
Trap-Neuter-Release	33
Stray	190
Service In	46
Owner Surrender	58
DOA	3
Euthanasia Request	4
Return	1
Born	10
Confiscate	4

<b>TOTAL Dispositions</b>	<b>345</b>
Died in Care	2
Adoption	194
DOA	3
Euthanasia	19
Return to Owner	50
Service Out	44
Trap-Neuter-Release	31
Transfer	2

<b>TOTAL Still in Care</b>	<b>4</b>
In Shelter	1
In Foster Care	3



Artists Helping the Homeless (AHH)

Website- [ahh.org](http://ahh.org)

[Click here to return to list of community partners](#)

# AHH Men's Program - Douglas County

Month:

December

Year:

2024

## Goal:

To provide a clean/sober environment with peer support and a diverse menu of wrap-around services to assist residents in addressing issues that led to or resulted from being homeless or incarcerated, get stable jobs and long term housing where they will not merely survive, but thrive.

## Outputs:

# of Admits :	3	# of Meetings (Kairos/Meraki):	20/21
# of Discharges:	4	# Continuing Education :	1
# of Days Housed:	442	# of Total Clients Housed :	19
# of Successful Discharges:	4	Average # of Residents	15
# of Unsuccessful Discharges:	1	# Discharged to Oxford or Other Pgms	2
Employment Rate (Kairos/Meraki):	54% (70%)/100%*	# Discharged to Independent Living	0
# of Rides :	484	# Discharged to Family/Friends	2
# of Relapses :	1	# Progressed to AHH transitional housing	1

## Individual Progress/Outcomes:

### Kairos:

Community Agency Enrollment during the month:  
 11 residents enrolled with DCCCA, 3 with Bert Nash, 10 in Heartland Community Health (3 awaiting intake), 4 engaged HRADAC, 2 participating in Decision Points, 3 participating in Drug Court.  
 1 resident leveled up in Drug Court  
 1 resident gained Drug Court supervised visitation with children with house visit privalenges.  
 6 residents reunited with family over the holidays.  
 2 residents got jobs and 1 who was employed got a new job, 2 residents got birth certificates, 1 a driver's license.  
 1 resident completed MADD Victim Impact Panel and 1 completed electronic monitoring  
 1 resident started counseling for the first time, 1 excelling in job training course and 1 completed Hep C treatments.

### Meraki

1 resident completed DCCCA outpatient treatment, applied for graduation from specialty court.  
 1 completed job training at work, 1 promoted after 30 days at work, 1 in managerial position at work  
 1 got driver's license after 12 year suspension.  
 1 got to visit family, some of whom he hadn't seen in over a year, during the holidays  
 1 celebrated 18 mos sober, another led his first H&I NA meeting at the Village  
 1 paid \$50 probation fees, another met his savings goal for the year.

### Additional Data:

The program's demographic breakdown is 10.5% Black, 15.8% Native American with an average age of 35. AHH staff is 14.3% each Black, Native American and Mixed/Other.  
 A resident staff member paid off \$4,000 in old debt, \$250 toward fines/fees and completed peer support svpr training  
 \* The numbers shown are percent of eligible residents employed. The number in parenthesis indates percentage of all current Kairos residents employed. The 3 at Kairos without jobs are in first 30 days (1), inpatient treatment pending (1) and waiting on an out of state birth certificate (1).

### Comments:

The unsuccessful discharge was for repeated rule violations. The individual was transported to a temporary living location of his  
 The relapse was off site and immediately self-reported

Kairos saw a number of residents move on to their next steps and replaced by men taking the initial steps of getting documentation and enrolling in services. At Meraki, residents have made strides toward their recovery, professional, financial and legal goals while progressing in reuniting with family.

## Prior Resident Updates:

### Kairos:

The lifelong Lawrence resident, an alcoholic since his teenage years, struggled with being unhoused in recent years before being accepted for long-term housing for men in recovery. He entered Kairos directly from detox, suffering with liver disease and COPD, to bridge a housing gap until intake into the other program. He immediately set out to build a foundation with involvement in the recovery community. He is 2 years sober, has a management position at work and has moved to an Oxford House. Of his time at Kairos he said, "I learned how important it is for the local area and for my own spiritual health to begin to give back all the grace I had been given. AHH was not just a suitable home for me, but one where I was understood."

### Meraki

Because Meraki has fewer graduates, they will provide stories less frequently than Kairos

### Completed By:

Kaw Was President



Cottonwood Inc.

Website- [cwood.org](http://cwood.org)

[Click here to return to list of community partners](#)

Outcomes Report  
October 1, 2024 through December 31, 2024

1. # of Admissions

	1Q24	2Q24	3Q24	4Q24
Retirement	--	1	2	--
Work Enrichment	--	--	--	--
CORE	3	5	4	4
Residential	2	1	--	--
CWI	--	3	1	1
Total	5	10	7	5

2. # of Community Access Opportunities

	1Q24	2Q24	3Q24	4Q24
Retirement	30	70	67	42
Work Enrichment	146	160	132	141
CORE	152	225	240	223
Tours/Programs of Cottonwood	12	18	7	8
Total	340	473	446	414

3. # of Contracts in CWI

	1Q24	2Q24	3Q24	4Q24
Total	37	32	11	13

4. Quarterly Consumer Payroll (% Change)

	1Q24	2Q24	3Q24	4Q24
Total	(4.52) %	(0.16)%	+ 10.24%	(4.20)%

Grant Updates

A. Cottonwood Industries (CWI)

	1Q24	2Q24	3Q24	4Q24
Forklift	\$0.00	\$34,464.00	-----	-----
Product Mover	\$15,008.00	-----	-----	-----
Taping Machine	\$6,566.86	-----	-----	-----
Engineering Support	\$9,319.30	\$3,242.06	\$1,876.51	-----
Misc. Furniture Replacement	\$3,837.80	-----	-----	-----
Upgraded sewing machines	-----	-----	-----	-----
New Conveyor System	\$73,646.15	(\$12,586.15)	-----	-----

B. Technology

	1Q24	2Q24	3Q24	4Q24
Hardware + equipment	\$4,287.29	\$1,647.00	-----	-----
Software Upgrades	\$857.50	\$3,959.25	\$5,561.46	-----
Licensing	\$0.00	\$0.00	\$0.00	\$8,780.00
Data migration to cloud-based	\$18,715.50	\$21,427.65	\$47,348.85	\$997.61
Leverage MS Platform	\$0.00	\$0.00	\$0.00	-----

C. CORE Services

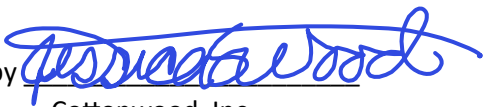
	1Q24	2Q24	3Q24	4Q24
Furniture	\$7,589.36	-----	-----	-----
Appliances	\$217.99	-----	-----	-----
W/D Hook Up + Water Heater	\$7,201.82	-----	-----	-----
Tech Equipment	\$1,561.38	-----	-----	-----
Carpeting	\$3,048.30	-----	-----	-----
Accessibility Upgrades	\$219.62	-----	-----	-----
Accessible Mini Van	\$80,932.77	-----	-----	-----
Misc.	\$1,310.44	-----	-----	-----

D. Residential

	1Q24	2Q24	3Q24	4Q24
Replace Flooring	\$0.00	\$0.00	\$22,300.00	\$2,058.35
Replace Dining Room Furniture	\$0.00	\$0.00	\$0.00	-----
Replace Living Room Furniture	\$0.00	\$0.00	\$0.00	-----
Replace Washer/Dryer Sets	\$3,595.00	\$899.00	\$0.00	-----
Replace Outdoor Grill	\$210.64	\$0.00	\$0.00	-----

E. CDDO Offices

	1Q24	2Q24	3Q24	4Q24
HVAC Add Ons	\$5,850.00	\$848.69	-----	-----

Submitted by   
Cottonwood, Inc.



Independence Inc.

Website- [independenceinc.org](http://independenceinc.org)

[Click here to return to list of community partners](#)



Independence, Inc.  
Q4 Outcome Report

October 1, 2024 through December 31, 2024

Submitted by Jill Dudley

**Outcome Goal:** To provide over 1600 rides in 2024.

**Performance Goal:** To increase Douglas County rides by 5% by December 31, 2024.

**Process Goal:** To outreach to 2 key partners in rural Douglas County each quarter.

	Qtr.1	Qtr. 2	Qtr. 3	Qtr.4
County Rides	504	519	549	538
Percent of Increase/Rides	N/A	2.9%	8.9%	2.2% decrease from Qtr. 3
Outreach: # of partners contacted	4	3	7	6

\*We had a 2% decrease in county rides from Qtr.3 to Qtr.4 but overall met our goal of a 5% increase in county ridership for the year. We provided 2,110 rides, well over the 1600 we hoped to provide.

The transportation manager provided outreach to Eudora, Lecompton, and Baldwin City. Baldwin City: library, recreation center, Signal Ride Villas, Baldwin Retirement Complex. Lecompton: Post office. Eudora: Recreation Center.

Social Media: We have been sending out targeted ads to communities outside the Lawrence City limits regarding Independence, Inc. transportation.



Jayhawk Area Agency on Aging (JAAA) Council

Website- [jhawkaaa.org](http://jhawkaaa.org)

[Click here to return to list of community partners](#)

## Exhibit A – Scope of Services

### **Older Americans Act Fund**

Help cover administrative costs, provide match funding for Older Americans Act fund and administer the Choosing Healthy Appetizing Meal Program Solutions in Douglas County

### **Project Lively**

Project Lively provides crisis intervention case management and serves older adults over the age of 60 in Douglas County.

Project Lively works with Emergency Medical Services (EMS) or other community agencies to identify a unique set of issues for each person referred. When an individual is in crisis, Project Lively utilizes a coordination of state and local services to help lower the risks that are identified by EMS, the Case Manager and the individual. Every individual's need for services are assessed and then, addressed to improve a lifestyle towards healthy living.

#### Examples of crisis for an older adult are:

No natural supports

Sudden mental or physical decline

Unsafe housing or homeless

Using 911 inappropriately

Need for Home modification

Healthcare inconsistent

Inpatient without a discharge plan

Without resources

Needs help reaching stability goals

Communication difficulties

Examples of Case Management services:

Financial issues

Housing

Home Modification

Legal (assistance for obtaining guardianship or conservatorship)

Medication management (working with pharmacy)

Medical (coordination with medical personnel)

Nutritional needs

Referrals to other community services

Arranging for transportation

## JAAA Project Lively

### Goals:

- 1) Provide crisis intervention case management to those aged 60 or older.
- 2) Provide timely access to social services when referred by Emergency Medical Services, community referral or individual referral.
- 3) Lower the cost and number of EMS runs for individuals who utilize 911 inappropriately or have non-medical needs.

### Outputs:

- # of EMS referrals using MyRC for individuals over 60 years of age = 87
- # of cases handled by Project Lively for individuals over 60 years of age= 23
- # of referrals sent to other community agencies = 5
- # of referrals from community agencies = 0
- # of referrals from individuals = 0
- Outcomes: 87 referrals for Project Lively and MIH (Mobile Integrated Health) over 60 years
- Gender of **Project Lively** clients
  - Men 53 %
  - Women 47 %
- Race of Project Lively clients
  - White, non-Hispanic 23
  - White, Hispanic 0
  - African American/Black 0
  - Asian 0
  - Native American 0
  - Biracial/Multiracial 0
  - Other, Single Race 0
  - Unknown 0

### Story:

A woman who lives in a rural home was recently referred to Project Lively due to needing assistance at home. She is paraplegic with one shortened arm and one eye due to birth defects. She was a professor at the University of Kansas and has been a world-renowned artist over the years. Approximately a year ago, she has become bed bound because of needing a long recuperation time from a major surgery. Currently, she is hiring her caregivers at home from Grub-hub. Her latest time in the hospital was due to pulmonary embolisms and the discovery of her needing an aortic valve replacement in the near future. She is unable to cook for herself and therefore has food delivered from restaurants. Her care is becoming expensive and her financial resources are dwindling. Project Lively is working to get homemaking, personal care in place and continued case management in place.

# KANSAS HOLISTIC DEFENDERS

Kansas Holistic Defenders

Website- [kansasholisticdefenders.org](http://kansasholisticdefenders.org)

[Click here to return to list of community partners](#)

**2024 Monthly Measures from Kansas Holistic Defenders:**

Measure	January	February	March	April	May	June	July	August	September	October	November	December
Cases Accepted	69	37	69	53	55	49	54	42	12	40	23	46
Chief Defender Caseload	146	161	119	126	148	140	135	122	109	149	138	134
Staff Attny Caseload	85	87	76	66	78	85	85	73	52	67	67	70
Staff Attny Caseload	83	90	79	90	81	83	90	73	71	32	30	45
Avg Caseload	105	113	91	94	102	102	103	89	77	82	79	83
Immigration Consultations	0	0	0	0	0	0	0	0	0	2	2	0

Periods of Pauses in Accepting Cases from District Court in 2024:

- \* Case Pause for one week; 4/29-5/4
- \*Case Pause for one week; 6/20-6/28
- \* Case Pause for one week; 7/22-7/26
- \*Case Pause for one week; 8/5-8/9
- \*Case Pause for one month; 9/3-9/30**
- \*Case Pause for one week, 10/7-10/11

**2025 Monthly Measures from Kansas Holistic Defenders:**

Total Misdemeanor Cases Accepted

Misdemeanor Cases Accepted by Case Type

Total Felony Cases Accepted (KHD can only accept Felony cases when they are representing the defendant on a Misdemeanor per the 2025 Service Agreement)

Felony Cases Accepted by Case Type

Number of Cases Closed per Month

Monthly Caseload of Each Attorney

Average Attorney Caseload

Immigration Consultations performed each month

**2025 Quarterly Measures from Kansas Holistic Defenders:**

Case Resolutions/Outcomes, including information organized by race, gender, and ethnicity

**2025 Annual Measures from Kansas Holistic Defenders:**

Time to Disposition:

Avg number of court dates in cases that reached resolution; Organized by case type

Avg days from first appearance to disposition; Organized by case type

Referrals to Services:

Number of referrals made to other service providers by service type:

Mental Health Treatment

Drug/Alcohol Treatment

Domestic violence/Batterers intervention services

Anger Management

Housing Supports

Job Training

Expungements

Other, please specify





Senior Resource Center (SRC) for Douglas County

Website- [yoursrc.org](http://yoursrc.org)

[Click here to return to list of community partners](#)

## Senior Resource Center for Douglas County 2024 Q4 Outcomes Report

October 1—December 31, 2024  
Submitted by Megan Poindexter

### Visits to 745 Vermont Street:

- **October: 1630** (22 days = average of 74/day)
- **November: 1410** (17 days = average of 83/day)
- **December: 900 + 231** (19 days = average of 60/day)
- **\*\*Quarter 4 total: 4,171**  
**(\*\*Q3 total: 2,930—a 1,200 difference!)**

4th quarter is when SRC really shines! Between special holiday events, Open Enrollment for Medicare, Silver Bells Holiday Gifts, Safe Winter Walkways, generous financial donations, and more, SRC bustles our way out of the calendar year.

Due to the Medicare Open Enrollment period, SRC always experiences very high foot traffic from Oct. 15—Dec. 7. Typically, SRC's team mainly counsels those with Part D who are on original Medicare. However, 2024 was unprecedented because LMHHealth discontinued two Medicare Advantage plans, meaning thousands of area seniors needed assistance with changing plans. More info on that below!

Additionally exciting: SRC made the transition mid-December to our new guest management/ data management system (called MySeniorCenter.com—aka MSC). We rolled it out after Open Enrollment ended and in the weeks around the holidays—when we have lower foot traffic—to allow staff to practice managing the management system. So far so good. Future reports will be more accurate and we are so excited to see the results!

**\*\*Note:** Previous reports of “Visits to 745 Vermont” were done by hand on a piece of paper. The numbers were rounded to the nearest 10. The new MSC system will allow us to run a report that will give specifics.

### Transportation:

- Total Dg Co rides provided: 3,064
  - 277 with Baldwin Wheels (108 of these were a collaborative effort with Indy Inc)
  - 184 with Eudora Wheels
  - 2,601 with Lawrence Wheel (66 of these were a collaborative effort with Indy Inc and Jeff Co. transportation)
  - Rural Dg Co: 417
  - Lecompton: 1

- Unduplicated riders: 235 (39 first time riders!)
- Requests unable to meet due to capacity or request outside of scope: 125 in-town, 42 rural, 8 outside of Douglas County.
- Narrative of anything noteworthy, new, or unique:
  - Engaged in conversation with Good Life because their clients with disabilities are experiencing difficulties with the T-Lift or they live outside of T-Lift service area. These are specifically people under SRC's age range, so typically we would help out on a periodic basis, but are not their primary source of transportation. These individuals and their caregivers (and Good Life staff) have begun to abuse the "back up plan" position of SRC, and have started acting like SRC is their primary transportation. This pushes SRC into a difficult position because then we have to turn away more seniors who ask for rides. We are working to resolve this issue in the bigger picture without preventing any of the populations from their services.
  - Retired an old van. We are now down to 6 vehicles until our new KDOT vehicle is delivered. No ETA at this time.
  - Considering a private purchase of another vehicle using fund balance. This will cost between \$60,000 and \$100,000.
  - Hosted an RTAP training event (Rural Transportation Assoc. Program) for local and regional ADA drivers

#### Health & Human Services and Programs:

- Medicare counseling: Number of interactions (note that the large majority of this occurs during Medicare Open Enrollment, Oct. 15—Dec. 7): 1,508 (101 were attendees to Welcome to Medicare)
  - *Q3 for comparison: 202 (86 were Welcome to Medicare)*
- Emergency assistance requests:
  - Total requests: 47
  - Requests fulfilled: 13
  - Reason requests not met: no funds available, age (under 60), residence requirements, or request was withdrawn/ no follow up from client.
  - Total disbursed: \$12,766.66
    - SRC's internal funds: \$768
    - AHTF: \$5,600
    - HSC: \$6,398.66
    - Warm Hearts: none yet.... Starts 1/1/25
- Number of contacts from seniors via phone and email *in addition to visitors to the Center*:
  - General Info: 103
  - Housing: 45
  - Legal/ Taxes/ Estate Planning: 46
  - Health Insurance (other than Medicare): 367

- Task assistance: 12
  - Financial assistance: 22
  - Transportation: 25 (in addition to all calls directly for Senior Wheels)
  - Home needs (home repairs, yard assistance, etc): 17
  - Silver Bells holiday gifts: 146
  - Safe Winter Walkways: 80
  - Info about SRC activities: 221
  - Coordination of SRC activities with comm. partners: 150
  - Aging in Place Needs: 43
  - Caregiver Issues: 39
  - Medical Issues: 14 (not related to insurance)
  - Other referrals and inquiries: 92
- Total: 1,4456
- Narrative of anything noteworthy, new, or unique:
    - Multiple high-intensity clients required many hours of intensive interactions and community coordination
    - Fielded a large number of calls regarding LMH Health terminating their contracts with 2 Advantage Plans. Provided multiple public outreach presentations on this issue.
    - Silver Bells Holiday gifts—76 low-income seniors were provided holiday gift packages (based on the seniors' wish lists) by area donors
    - Safe Winter Walkways- 79 seniors have been matched with volunteer snow shovelers, and around 30 more are pending (after the Jan. 7<sup>th</sup> blizzard which wasn't in 2024, but thought you'd want to know)
    - Monthly *Better Senior Living* newsletter provided information in Q3 on:
      - Day of the Dead/ Dia de los Muertos
      - info for transportation options to get outside of Douglas County (esp. for ADA needs)
      - 2025 Medicare prescription coverage changes
      - understanding Viatical Settlements
      - Caring for mental health with in-home health/ home based settings
      - Fire prevention, esp during winter/ holidays
      - Native American Heritage Month
      - SRC bringing on new guest management system
      - Things you need/ preparation for Open Enrollment
      - New KS grant for caregivers
      - Food safety and food culture around the holidays
      - Online scam awareness
      - Holiday events throughout Douglas County
      - More preparation for SRC's new guest management system
      - Dropping retiree insurance for traditional Medicare
      - Understanding reverse mortgages
      - Shifting traditions during the holidays

- Sleep issue and what to do

Other organizational noteworthy tidbits:

- More exciting conversations with the County! 😊
- Partnered with Somos Lawrence and Percolator as part of the 2024 Day of the Dead/ Dia de los Muertos event—it was so amazing to be part of!
- Transitioned in December to new guest management system. Completed extensive staff training and launched on Dec. 16! So far so good... Is taking some getting used to but generally it is awesome!
- Received grant from Lawrence Board of REALTORS to help with rent/ utility assistance in 2025
- Grant request to Rice Foundation for maintenance of Senior Wheels vans was declined—mostly likely because of the narrative that the vans will be maintained by the County in the future (grant application was submitted before the county convos began)
- Received Affordable Housing Trust Fund award of \$25,000 for low-income senior's home repair and modification program to continue
- Participated in DCCF's Giving for Good campaign—goal to help pay for gas for Wheels (maximum grant goal of \$5,000 was met)



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Trinity In-Home Care (TIHC)

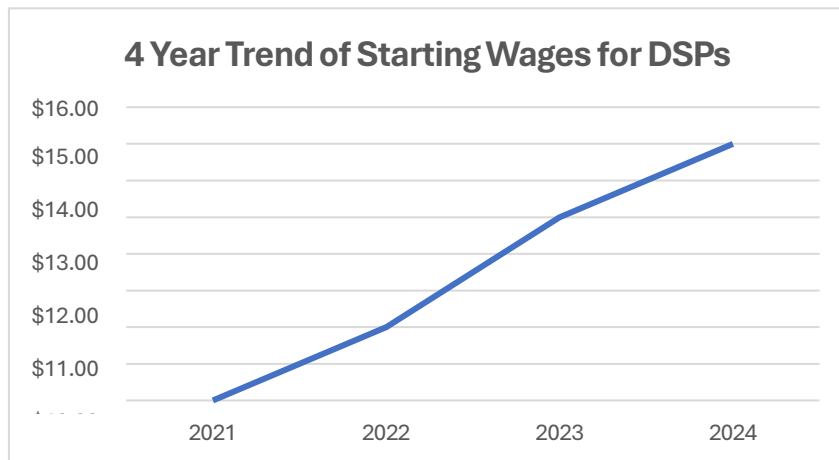
Website- [tihc.org](http://tihc.org)

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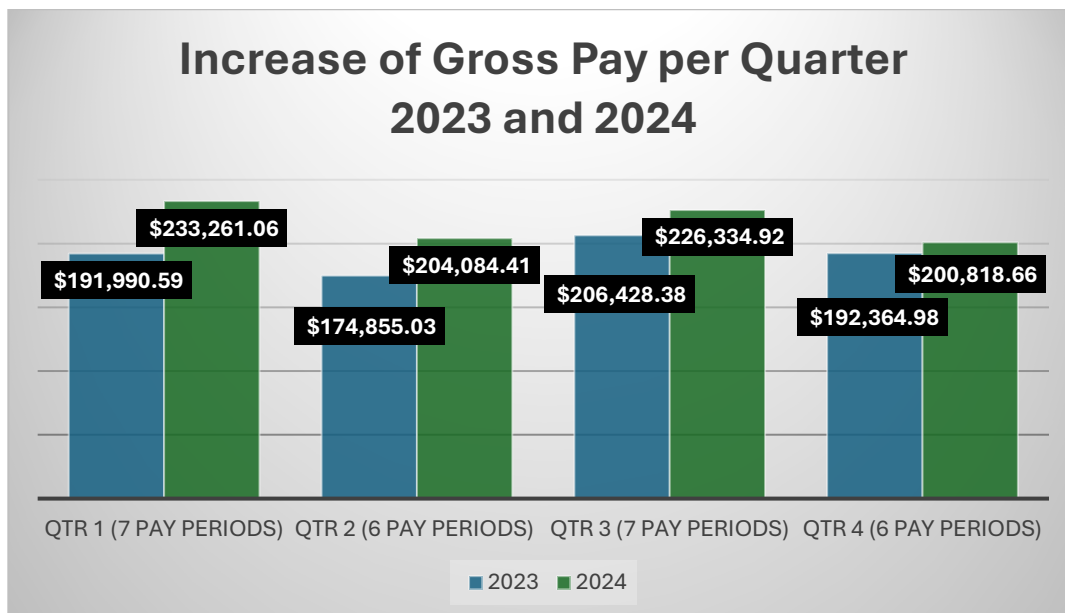
**Trinity In-Home Care  
Q4 Outcomes Report  
October 1, 2024, through December 31, 2024**

- A. Use a Research-Based approach to determine appropriate caregiver wage adjustments. Follow the Board of Director’s goals of raising caregiver wages to living wage.**

Overall, since January 2021 Trinity has increased starting wages for our Direct Support Professionals (DSPs) by 65%. And we are not done, as for-profit agencies continue to increase their starting wages. As local research indicated, to compete for the same workers, Trinity must continue to increase our starting pay closer to \$16.00.



In December 2023, the Trinity Board of Directors voted to increase DSP wages to no less than \$14.00 beginning the first full pay period of 2024. The wage increase during the first 3 Quarters of 2024 cost Trinity an additional \$90,406 compared to 2023. At the December 2024 Board of Directors meeting, the 2025 budget was approved with DSPs making no less than \$15.00 per hour beginning January 2025.



**B. Implement new training and professional development monthly workshops. Enhance caregiver skills and qualifications.**

The First Quarter of 2024 was spent in research to select the best professional development program that fits Trinity’s workforce development standards. The In-Home Aide Monthly Newsletter through the Kansas Home Care & Hospice Association was chosen to enhance our DSP’s skills. This publication includes an informative newsletter, posttest, and certificate of completion. The Second Quarter kicked off the Pilot Program of the online program. Trinity’s year-end fundraising will focus on backing the new TRAIN- DSPs (Trinity Reinforcing All & Instructing New–Direct Support Professionals). Funding this project will assist us in paying our DSPs Training time. By offering educational credits and training pay, Trinity In-Home Care is investing in both the professional development of its caregivers and the quality of care provided to clients. This approach helps foster a knowledgeable and confident workforce, ultimately benefiting everyone involved.

The pilot program of the project received high marks from our DSPs. Specifically, one expressed thankfulness for learning something new from the respiratory disease study. Another said, "I have a nursing degree, and this continuing education was an excellent review!" Caregivers mentioned that after the continuing education program, they felt prepared to handle on-the-job stress, juggle communication with family members and healthcare providers, and ensure safe and compliant interactions in the client's home.

**2024 Topics:**

January- Managing Stress	
February- Infection Control	
March- Observe, Record, Report	
April- Communication Skills	15 DSPs Completed Training
May- Assisting with ADL’s	22 DSPs Completed Training
June- Home Care Safety	21 DSPs Completed Training
July- Respiratory Disease	14 DSPs Completed Training
August- Nutrition	19 DSPs Completed Training
September- Falls Risk Reduction	16 DSPs Completed Training
October- Heart Disease	18 DSPs Completed Training
November- Diabetes	13 DSPs Completed Training
December- Professionalism	19 DSPs Completed Training

**C. Advocate for Medicaid reimbursement increases.**

**Encourage local and state policymakers to advocate for policies supporting fair wages for caregivers by increasing Medicaid reimbursement.**

Trinity Board of Directors advocated for Medicaid expansion as well as an increase for Medicaid reimbursement. Expansion did not happen during the Spring 2024 Legislative Session. Recent Medicaid advancements that recognize improvements in maternal and child health, increased reimbursement for Community Health Workers and increased access to mental health care



services within schools should be celebrated, but expansion is still needed. An increase in reimbursement for physical disability and Frail Elderly took effect July 1<sup>st</sup>. In 2025 Staff and Board will educate legislators concerning the need for increased reimbursement to take care of the most vulnerable in our county.

Submitted by:

*Janine Gracy*

Executive Director



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Trinity In-Home Care

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Q Lawrence, KS

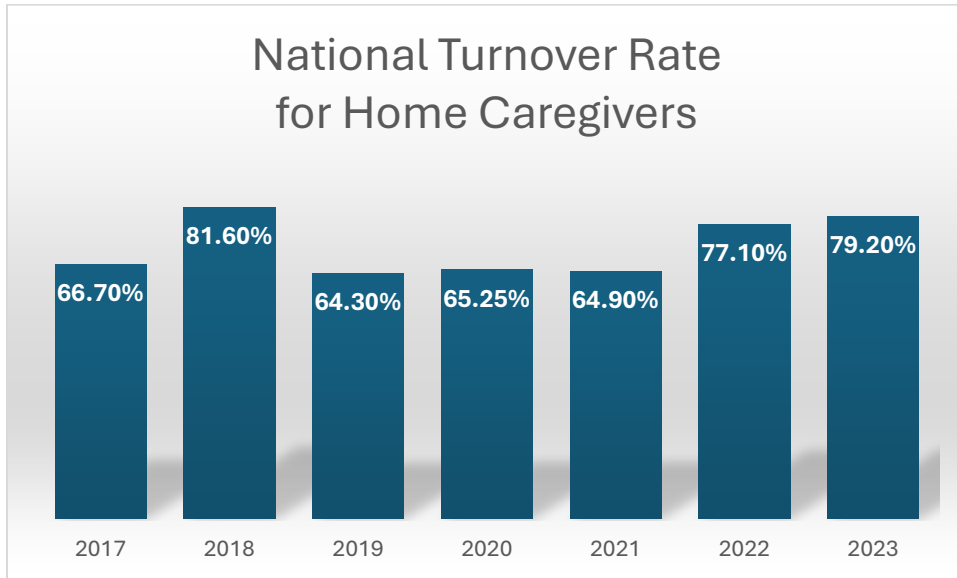
66047 [www.tihc.org](http://www.tihc.org)

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3159 F:785-

842-7061

**Trinity In-Home Care  
Churn Rate  
2024**



The 2023 HCP Benchmarking Report described that the median turnover rate jumped from 65% in 2021 to 77% in 2022 to **79.2% in 2023**. This comes as no surprise to most agencies, who are struggling with caregiver recruitment and retention amidst the ongoing workforce crisis. Jun 14, 2023 However, Trinity In-Home Care has a much lower turnover/churn rate.

Number of DSPs on 12/31/2023	79
Number of DSPs hired in Qtr. 1	9
Number of DSPs who left	16
Number of DSPs on 3/31/2024	71
Churn rate 1 <sup>st</sup> Qtr.	<b>20.25 %</b>
Number of DSPs on 3/31/2024	71
Number of DSPs hired in Qtr. 2	7
Number of DSPs who left	19 (7 KU students left for summer)
Number of DSPs on 6/30/2024	67
Churn rate 2 <sup>nd</sup> Qtr.	<b>26.76%</b>
Number of DSPs on 6/30/2024	67
Number of DSPS hired in QTR 3	8
Number of DSPs who left	11
Number of DSPs on 9/30/2024	63
Churn rate 3 <sup>rd</sup> Qtr.	<b>11.94%</b>
Number of DSPs on 9/30/2024	63
Number of DSPS hired in QTR 3	2
Number of DSPs who left	3
Churn rate 4 <sup>th</sup> Qtr.	<b>4.76%</b>



# Employee List Report

## Trinity In-Home Care

From 10/01/2024 to 12/31/2024

# Employee Name	Job Title	FT / PT	\$ / Hr
1	DSP	PT	14.00/hr
4	DSP	PT	14.50/hr
7	DSP	PT	14.00/hr
151 .	DSP	PT	15.00/hr
111 .	DSP	PT	14.00/hr
10	DSP	PT	14.00/hr
110 .	DSP	PT	14.00/hr
121	DSP	PT	14.00/hr
14	DSP	PT	14.00/hr
16	DSP	PT	15.00/hr
135	DSP	PT	14.00/hr
18 .	DSP	PT	14.00/hr
148	DSP	PT	15.00/hr
142	DSP	PT	15.00/hr
88	DSP	PT	15.00/hr
19	DSP	PT	14.00/hr
75	DSP	FT	15.00/hr
24	DSP	PT	14.00/hr
101	DSP	PT	15.00/hr
137 .	DSP	PT	14.00/hr
28	Executive Director	FT	Salaried
29	DSP	PT	14.00/hr
30	DSP	PT	14.50/hr
31	DSP	PT	14.00/hr
141 .	DSP	PT	15.00/hr
70	DSP	PT	15.00/hr
149	DSP	PT	15.00/hr
143	DSP	PT	15.00/hr
38	DSP	PT	14.00/hr
138	DSP	PT	15.00/hr
92	DSP	PT	15.00/hr
41 .	DSP	PT	14.00/hr
133 .	DSP	PT	14.00/hr
146	DSP	PT	15.00/hr
123	DSP	PT	14.00/hr
44 .	DSP	PT	14.00/hr
78 .	DSP	PT	14.00/hr
49 .	Office Manager	FT	Salaried
50 .	DSP	PT	14.50/hr
147 .	DSP	PT	15.00/hr
105	DSP	PT	14.00/hr
144	DSP	PT	15.00/hr
52	Client Coordinator	FT	Salaried
53	DSP	PT	14.00/hr
90	DSP	PT	14.00/hr



# Employee List Report

## Trinity In-Home Care

From 10/01/2024 to 12/31/2024

# Employee Name	Job Title	FT / PT	\$ / Hr
95	DSP	PT	14.50/hr
57	DSP	PT	14.00/hr
56	DSP	PT	14.00/hr
100	DSP	PT	14.00/hr
145 .	DSP	PT	15.00/hr
65	DSP	PT	14.00/hr
59 .	DSP	PT	14.00/hr
94	DSP	PT	14.00/hr
85 .	DSP	PT	14.00/hr
124	DSP	PT	14.00/hr
150	DSP	PT	15.00/hr
61 .	DSP	PT	14.00/hr
62	DSP	PT	15.00/hr
63 .	DSP	PT	14.00/hr
72	DSP	PT	15.00/hr
64	DSP	PT	14.00/hr

Total Employees: 61



Bert Nash Community Mental Health Center & Treatment and Recovery Center (TRC)

Website- [bertnash.org](http://bertnash.org)

[Click here to return to list of community partners](#)



2024

## Douglas County 4th Quarter Report

### [About Bert Nash Center](#)

The Bert Nash Center is a nonprofit community mental health organization offering a wide range of outpatient services. It was founded in 1950 in memory of Dr. Bert Nash (1898-1947), a University of Kansas educational psychologist and community leader dedicated to improving the health of Kansas children. Today, the Center is a licensed, comprehensive mental health facility committed to providing research-based services to improve the lives of Douglas County residents. The Center provides a number of outpatient therapy options for adults and children, including individual and group therapy and several specialized services.

For additional information or questions, please contact Tim Nolte

[tnolte@bertnash.org](mailto:tnolte@bertnash.org)

# Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

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## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

### Commitment to Serve Douglas County

Bert Nash Community Mental Health Center is thankful for the support received from the Douglas County Government. The Bert Nash Center takes pride in integrity and transparency throughout efforts to advance the health of the Douglas County community. Comprised below is a detailed funding-specific summary of Bert Nash Center's dedication to Douglas County.

### Client Demographics

Demographic data collected offers important insight on the population of clients that the Bert Nash Center serves. The data tables below offer further understanding on those clients that received care at Bert Nash throughout the year. Please note that this data

Bert Nash Center	2024												Total	Avg/Mo	%/Mo
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec			
<b>Service Totals</b>															
Total Clients Served	2274	2394	2418	2451	2452	2258	2390	2512	2558	2706	2550	2507	6140	2456	-
Total Services	12642	13269	13352	14688	14132	12519	13732	13918	14098	15553	12660	12302	162865	13572	-
Total Hours	10691.4	11198.0	11265.7	12150.2	11514.7	15721.0	20549.4	19640.5	18962.1	20832.2	18266.5	18546.5	189338.4	15778.2	-
<b>Clients With Veteran Status</b>															
Number of Clients w/ Veteran Status	11	9	11	19	10	11	12	13	11	16	17	20	49	13	-
Percent of Clients w/ Veteran Status	0.48%	0.38%	0.45%	0.78%	0.41%	0.49%	0.50%	0.52%	0.43%	0.59%	0.67%	0.80%	-	-	0.5%
<b>Clients with Military Status</b>															
Number of Clients w/ Military Status	13	9	14	21	14	15	18	17	14	19	16	14	45	15	-
Percent of Clients w/ Military Status	0.57%	0.38%	0.58%	0.86%	0.57%	0.66%	0.75%	0.68%	0.55%	0.70%	0.63%	0.56%	-	-	0.6%
<b>Clients Age</b>															
0-17	603	655	649	699	670	531	513	646	700	739	715	689	1421	651	26.5%
18-24	360	389	396	396	369	330	368	363	370	397	352	352	1153	370	15.1%
25-44	763	782	795	771	826	799	863	873	850	900	845	816	2235	824	33.5%
45-64	433	450	451	470	464	475	504	495	505	529	494	503	1153	481	19.6%
65-74	99	101	106	103	102	105	117	111	111	120	121	115	260	109	4.4%
75+	17	21	26	18	29	23	32	26	28	26	28	33	81	26	1.0%
Unknown	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-





## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

Bert Nash Center	2024														
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%/Mo
<b>Client Sex</b>															
Male	996	1031	1037	1078	1075	1019	1048	1136	1127	1222	1136	1127	2815	1086	44.2%
Female	1257	1332	1358	1346	1362	1232	1334	1351	1397	1442	1372	1351	3160	1345	54.7%
Unknown	0	1	1	1	1	1	1	1	2	1	1	1	2	1	0.0%
Not Specified	21	30	22	26	14	6	7	24	32	41	41	28	163	24	1.0%
<b>Client Gender Identity</b>															
Male	832	847	842	895	881	836	865	938	935	1023	950	950	2290	900	36.6%
Female	1019	1084	1107	1093	1116	1008	1093	1099	1143	1189	1142	1113	2524	1101	44.8%
Transgender	15	14	16	14	15	16	14	14	13	13	14	12	22	14	0.6%
Transgender Male to Female	16	17	16	16	20	21	28	27	28	26	27	24	42	22	0.9%
Transgender Female to Male	25	22	27	26	25	20	25	33	27	32	30	30	56	27	1.1%
Genderqueer, Neither Exclusively Male or Female	25	33	37	31	25	33	33	38	35	38	33	38	70	33	1.4%
Other	23	23	23	23	28	26	26	29	29	26	23	25	50	25	1.0%
Blank	319	354	350	353	342	298	306	334	348	359	331	315	1086	334	13.6%
<b>Client Race</b>															
American Indian and Alaskan Native	80	86	83	89	83	68	79	108	106	101	99	100	254	90	3.7%
Asian	26	32	29	30	30	25	26	32	31	30	30	27	70	29	1.2%
Black/African American	218	232	208	215	213	204	217	215	210	214	214	209	512	214	8.7%
Native Hawaiian or Other Pacific Islander	8	5	7	4	7	8	6	7	10	6	4	6	20	7	0.3%
Other Single Race	8	10	12	15	14	13	20	13	25	29	26	21	63	17	0.7%
Two or More Races	24	34	34	41	43	41	38	43	47	48	48	52	129	41	1.7%
Unknown	178	169	171	169	167	148	148	145	155	164	149	153	336	160	6.5%
White	1609	1679	1716	1723	1745	1619	1706	1774	1777	1913	1796	1770	4055	1736	70.7%
Blank	123	147	158	165	150	132	150	175	197	201	184	169	701	163	6.6%
<b>Client Ethnicity</b>															
Dominican	0	0	0	0	0	1	1	0	3	1	0	0	3	1	0.0%
Hispanic or Latino	142	152	140	152	147	125	129	146	158	176	160	160	394	149	6.1%
Not Hispanic or Latino	2002	2090	2119	2125	2149	1995	2105	2180	2179	2306	2185	2154	4972	2132	86.8%
Blank	130	152	159	174	156	137	155	186	218	223	205	193	771	174	7.1%



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

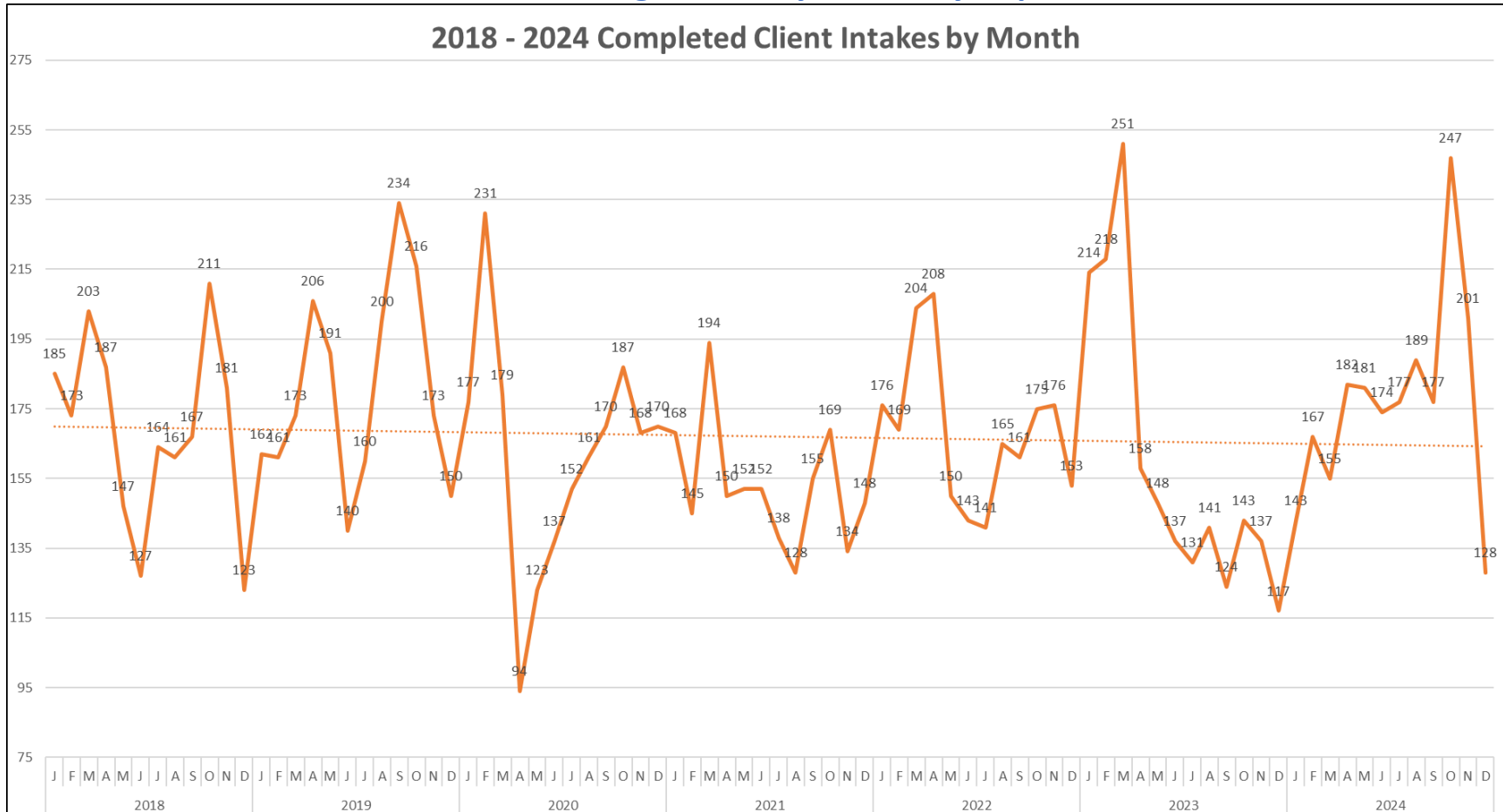
### Access to Care

In 2024, Bert Nash Center achieved significant advancements in expanding and enhancing access to care for our community. Through the remarkable growth of our outpatient services, we hired additional staff, launched innovative programs—including new CFS and AOP groups, a Dual Diagnosis IOP program for adolescents, and updated adult IOP programming—and created new teams such as the Acute Care team. To ensure high-quality interventions, we invested in staff development with extensive training in evidence-based practices like DBT, CAMS for suicide prevention, play therapy certification, Trauma-Focused CBT, and substance-use interventions. Improvements in operational efficiency, such as the implementation of the Eleos technology tool for timely documentation, streamlined workflows, and enhanced coordination with partners like TRC, have further supported our mission. Expanded services now include dedicated intake staff for hospital discharges and corrections system transitions, increased walk-in availability, and coverage for unexpected staff absences. By continuously innovating and increasing our capacity, Bert Nash Center continues to serve a record number of clients with effective, high-quality care, ensuring behavioral health services remain accessible to all in our community.



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

### 2018 - 2024 Completed Client Intakes by Month



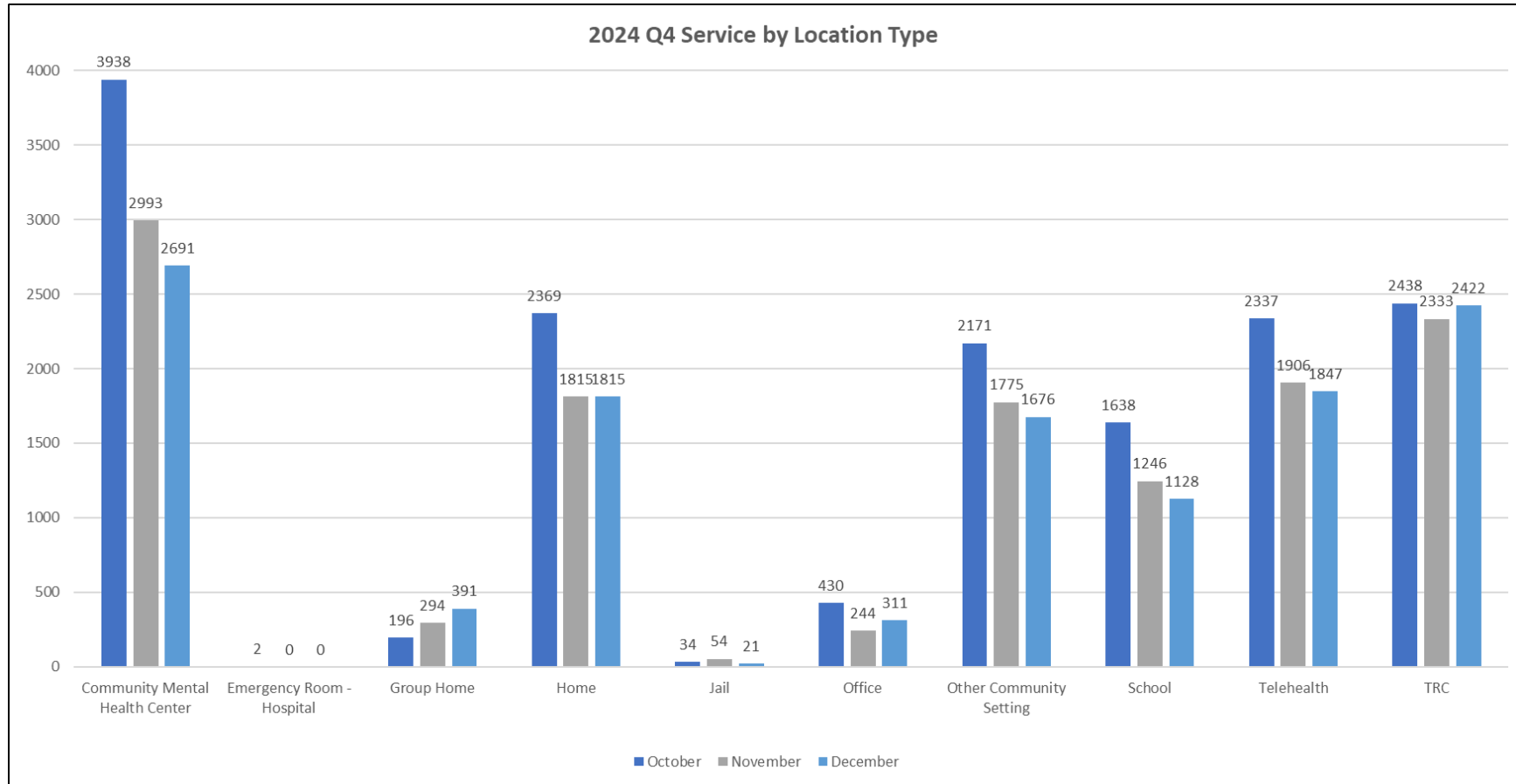
2018 through 2024 data is highlighted above to show intake trends over time. The Center saw 2021 intakes in 2022, 1919 intakes in 2023, and 2121 intakes in 2024. A decrease in intakes took place after the first quarter in 2023 with the TRC being readily available for high needs clients. BNC has taken additional steps to increase intake availability in Q2 & Q3 of 2024, including designating more outpatient staff and appointments for intakes, and an increase in completed intakes shows this has helped get more individuals into services than in previous months and quarters.



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

### Service Location

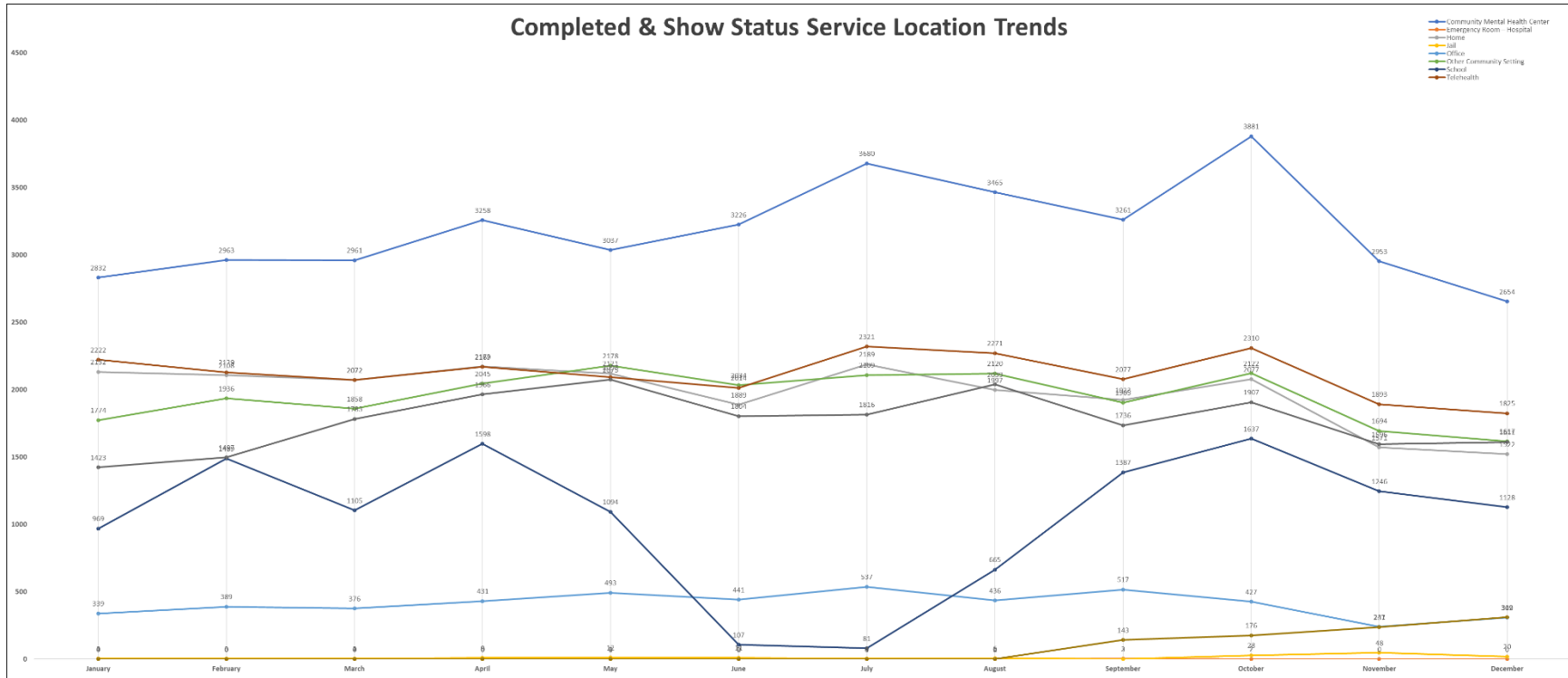
Bert Nash Center continues to find balance and flexibility for both providers and those receiving care through different ways and locations that services can be provided. Below is a breakout of all billing locations for the quarter and associated service counts.



2024 Q4 service location types are found above. Services provided by location fell for all location types but the TRC. This can be associated with the holiday season and time off from school.



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report



2024 service location types are depicted above to further display where services are taking place. This allows viewers the ability to distinguish the Center’s service density by location type.

\*Location Type Other Community Setting includes, but is not limited to, McDonalds, Starbucks, Public Parks, and the Lawrence Public Library.



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

### Sliding Fee Scale Services

Fee Waiver and Sliding Fee items are now live within Streamline SmartCare, Bert Nash Center's current EHR. Our Electronic Health Record team is working on creating reports for quarterly reporting and hope to have these items active in the coming weeks. Fee Waiver and Sliding Fee information will be shared once these reports are complete.



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

### Wrap Services

In addition to the support of Douglas County funding and as a program of Bert Nash, the WRAP program continued utilize the CCBHC funding and service model in the fourth quarter. The WRAP program continued its partnership with the Perry Lecompton (USD 343) school district as part of an MHIT (Mental Health Intervention Team) program grant and continued providing services at JDC the Detention Center and Day School. We were also awarded an MHIT grant to hire an additional therapist in the Baldwin (USD 348) school district, and we added assessment and referral services at JDC as part of the response to HB2021 that requires all juvenile detention centers in the state of Kansas to have youth complete a behavioral health screener within 72 hours of arrival at the facility.

We learned in the Fall, that we were not awarded the School Based Mental Health Grant that we submitted in the second quarter. However, the application process provided the opportunity to have more discussions with the school districts about their needs and how we can develop an approach to workforce development that can possibly be funded through other grant opportunities. Through these discussions, we moved the process forward with the Lawrence (USD 497) school district about applying for MHIT grant funding. We expect that the school district will submit this application in January of 2025 and they will be asking for money to help support six WRAP therapists in the district.



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

Lawrence	Non-CCBHC Services			CCBHC Services		
Number of Services	Non-Bill WRAP Intervention	Non-Bill Case Consultation	Individual Psychosocial	Crisis Therapy	Therapy Ind/Family	Individual Support (CPST)
Oct	85	81	13	2	565	196
Nov	84	57	6	0	422	198
Dec	62	53	9	0	383	218
<b>Total</b>	<b>231</b>	<b>191</b>	<b>28</b>	<b>2</b>	<b>1370</b>	<b>612</b>
Minutes of Service	Non-Bill WRAP Intervention	Non-Bill Case Consultation	Individual Psychosocial	Crisis Therapy	Therapy Ind/Family	Individual Support (CPST)
Oct	2707	2712	699	130	25992	7034
Nov	2912	1609	830	0	19774	7372
Dec	2014	1685	993	0	17392	8095
<b>Total</b>	<b>7633</b>	<b>6006</b>	<b>2522</b>	<b>130</b>	<b>63158</b>	<b>22501</b>

Eudora	Non-CCBHC Services			CCBHC Services		
Number of Services	Non-Bill WRAP Intervention	Non-Bill Case Consultation	Individual Psychosocial	Crisis Therapy	Therapy Ind/Family	Individual Support (CPST)
Oct	7	21	26	5	139	83
Nov	2	16	7	4	97	60
Dec	4	21	5	4	86	46
<b>Total</b>	<b>13</b>	<b>58</b>	<b>38</b>	<b>13</b>	<b>322</b>	<b>189</b>
Minutes of Service	Non-Bill WRAP Intervention	Non-Bill Case Consultation	Individual Psychosocial	Crisis Therapy	Therapy Ind/Family	Individual Support (CPST)
Oct	285	715	1181	518	6532	3035
Nov	135	751	330	309	4604	2161
Dec	136	974	330	310	4233	2141
<b>Total</b>	<b>556</b>	<b>2440</b>	<b>1841</b>	<b>1137</b>	<b>15369</b>	<b>7337</b>





## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

Baldwin	Non-CCBHC Services			CCBHC Services		
Number of Services	Non-Bill WRAP Intervention	Non-Bill Case Consultation	Individual Psychosocial	Crisis Therapy	Therapy Ind/Family	Individual Support (CPST)
Oct	0	10	0	0	23	60
Nov	0	8	0	0	16	29
Dec	4	16	0	0	27	67
<b>Total</b>	<b>4</b>	<b>34</b>	<b>0</b>	<b>0</b>	<b>66</b>	<b>156</b>
Minutes of Service	Non-Bill WRAP Intervention	Non-Bill Case Consultation	Individual Psychosocial	Crisis Therapy	Therapy Ind/Family	Individual Support (CPST)
Oct	0	258	0	0	987	1167
Nov	0	208	0	0	748	523
Dec	0.83	261	0	0	1319	1459
<b>Total</b>	<b>0.83</b>	<b>727</b>	<b>0</b>	<b>0</b>	<b>3054</b>	<b>3149</b>

Perry	Non-CCBHC Services			CCBHC Services		
Number of Services	Non-Bill WRAP Intervention	Non-Bill Case Consultation	Individual Psychosocial	Crisis Therapy	Therapy Ind/Family	Individual Support (CPST)
Oct	6	15	0	4	96	22
Nov	2	10	0	0	87	20
Dec	2	1	0	0	56	13
<b>Total</b>	<b>10</b>	<b>26</b>	<b>0</b>	<b>4</b>	<b>239</b>	<b>55</b>
Minutes of Service	Non-Bill WRAP Intervention	Non-Bill Case Consultation	Individual Psychosocial	Crisis Therapy	Therapy Ind/Family	Individual Support (CPST)
Oct	132	350	0	659	4256	798
Nov	45	241	0	0	3877	714
Dec	60	10	0	0	2391	385
<b>Total</b>	<b>237</b>	<b>601</b>	<b>0</b>	<b>659</b>	<b>10524</b>	<b>1897</b>

## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

### Psychiatry Services

The fourth quarter data for psychiatry services showed an increase in patient services, both patient encounters and total patients served, as predicted. Hiring additional providers reflects the positive impact for increasing our access to care. Total patient encounters almost doubled from 2023, increasing from 9,813 to 16,541 for 2024. The total number of new patients increased, but not at the rate expected. The department is reviewing how new patients from TRC may be potentially impacting the outpatient data, due to medication referrals not being submitted. However, the overall data still supports an increase in access to care for new patients. Another positive trend is the decrease in wait time from medication referral to medication evaluation. The data from 2023 reflects a wait time from medication referral to medication evaluation of 22.44 business days. Fourth quarter reflects a significant decrease in wait times to 7.60 business days, with a year-end wait time of 10.81 business days for 2024.

Psychiatry Information	2023			2024						
	Total	Avg/Qtr	%/Qtr	Q1	Q2	Q3	Q4	Total	Avg/Qtr	%/Qtr
<b>Total Patient Encounters</b>	<b>9813</b>	<b>2453</b>	-	3758	4294	4104	4385	<b>16541</b>	<b>4135</b>	-
<b>Total Patients Served</b>	<b>3033</b>	<b>1701</b>	-	1902	1932	2033	2157	<b>3647</b>	<b>2006</b>	-
<b>Total New Patients</b>	<b>1169</b>	<b>292</b>	-	280	287	310	316	<b>1193</b>	<b>298</b>	-
<b>Total Primary Caseload</b>	<b>10597</b>	<b>2649</b>	-	2189	2448	2829	3240	<b>10706</b>	<b>2677</b>	-



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

Psychiatry Information Breakout	2023			2024						
	Total	Avg/Qtr	%/Qtr	Q1	Q2	Q3	Q4	Total	Avg/Qtr	%/Qtr
<b>Outpatient Medication Services</b>										
<i>Patient Encounters</i>	<b>6299</b>	<b>1575</b>	-	2050	2249	2407	2738	<b>9444</b>	<b>2361</b>	-
<i>Patients Served</i>	<b>2203</b>	<b>1315</b>	-	1518	1579	1723	1849	<b>2909</b>	<b>1667</b>	-
<i>New Patients</i>	<b>521</b>	<b>130</b>	-	120	153	206	198	<b>677</b>	<b>169</b>	-
<i>Primary Caseload</i>	<b>9369</b>	<b>2342</b>	-	2044	2326	2694	3094	<b>10158</b>	<b>2540</b>	-
<b>Treatment &amp; Recovery Center of Douglas County</b>										
<i>Patient Encounters</i>	<b>3084</b>	<b>771</b>	-	1502	1887	1533	1506	<b>6428</b>	<b>1607</b>	-
<i>Patients Served</i>	<b>1304</b>	<b>484</b>	-	375	366	322	330	<b>1079</b>	<b>348</b>	-
<i>New Patients</i>	<b>1072</b>	<b>268</b>	-	197	161	130	150	<b>638</b>	<b>160</b>	-
<i>Primary Caseload</i>	<b>1010</b>	<b>253</b>	-	12	10	14	16	<b>52</b>	<b>13</b>	-
<b>Assertive Community Treatment (ACT)</b>										
<i>Patient Encounters</i>	<b>430</b>	<b>108</b>	-	206	158	164	141	<b>669</b>	<b>167</b>	-
<i>Patients Served</i>	<b>300</b>	<b>83</b>	-	129	110	98	95	<b>202</b>	<b>108</b>	-
<i>New Patients</i>	<b>26</b>	<b>7</b>	-	5	4	1	4	<b>14</b>	<b>4</b>	-
<i>Primary Caseload</i>	<b>218</b>	<b>55</b>	-	133	112	121	130	<b>496</b>	<b>124</b>	-



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

Psychiatry Referral Times	2023			2024						
	Total	Avg/Qtr	%/Qtr	Q1	Q2	Q3	Q4	Total	Avg/Qtr	%/Qtr
<b>Referral Request to Scheduled Appointment</b>										
<i>Business Days</i>	<b>22.44</b>	<b>24.71</b>	-	16.52	11.86	9.42	7.60	<b>10.81</b>	<b>11.35</b>	-
<i>Calendar Days</i>	<b>30.41</b>	<b>33.88</b>	-	21.26	14.69	11.11	8.55	<b>13.13</b>	<b>13.90</b>	-
<b>Child Referral Request to Scheduled Appointment</b>										
<i>Business Days (0-17 yrs)</i>	<b>24.06</b>	<b>26.67</b>	-	26.33	17.73	8.69	7.54	<b>14.85</b>	<b>15.07</b>	-
<i>Calendar Days (0-17 yrs)</i>	<b>32.93</b>	<b>36.84</b>	-	35.01	22.71	9.85	8.41	<b>18.68</b>	<b>19.00</b>	-
<b>Adult Referral Request to Scheduled Appointment</b>										
<i>Business Days (&gt;17 yrs)</i>	<b>21.80</b>	<b>23.75</b>	-	12.99	10.35	9.57	7.61	<b>9.79</b>	<b>10.13</b>	-
<i>Calendar Days (&gt;17 yrs)</i>	<b>29.44</b>	<b>32.46</b>	-	16.31	12.63	11.37	8.58	<b>11.73</b>	<b>12.22</b>	-

\*It is important to note that any outstanding referrals from prior months and/or quarters will result in these 2024 numbers changing during the next reporting period.

Psychiatry Service Attendance Rates	2023			2024						
	Total	Avg/Qtr	%/Qtr	Q1	Q2	Q3	Q4	Total	Avg/Qtr	%/Qtr
<b>Completed</b>	-	-	<b>59.47%</b>	<b>61.69%</b>	<b>64.15%</b>	<b>64.62%</b>	<b>64.55%</b>	<b>63.83%</b>	-	<b>63.75%</b>
<b>Canceled</b>	-	-	<b>40.53%</b>	<b>38.30%</b>	<b>35.86%</b>	<b>35.38%</b>	<b>35.45%</b>	<b>36.17%</b>	-	<b>36.25%</b>
<i>Cancel</i>	-	-	<b>12.80%</b>	17.60%	14.95%	16.86%	16.42%	16.45%	-	16.46%
<i>No Show</i>	-	-	<b>20.72%</b>	20.70%	20.91%	18.52%	19.03%	19.72%	-	19.79%
<i>Late Cancel</i>	-	-	<b>1.31%</b>	0.00%	0.00%	0.00%	0.00%	-	-	0.00%
<i>Staff Cancel</i>	-	-	<b>4.16%</b>	0.00%	0.00%	0.00%	0.00%	-	-	0.00%
<i>Client Cancel</i>	-	-	<b>0.93%</b>	0.00%	0.00%	0.00%	0.00%	-	-	0.00%
<i>Admin Cancel</i>	-	-	<b>0.01%</b>	0.00%	0.00%	0.00%	0.00%	-	-	0.00%
<i>Rescheduled to Earlier Date</i>	-	-	<b>0.60%</b>	0.00%	0.00%	0.00%	0.00%	-	-	0.00%
<b>Total</b>	-	-	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	-	<b>100%</b>



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

### Behavioral Health Court

The Behavioral Court is a voluntary Specialty Court Program serving Douglas County residents that have been charged with a crime that was related to symptoms of a mental illness. The BHC Docket occurs on Thursdays at 1:30 PM. The BHC team meets prior to court to review a participant's progress on their goals. Every third Thursday, every participant is required to attend court.

Graduations occur on “Third Thursdays” as well as the monthly gift basket drawing. In addition, every participant gets to “Spin the Wheel” to win a prize. Incentives are an important part of the program, and these activities provide encouragement for participants to make progress on their goals

This quarter ended with 22 active participants, 2 graduations, 2 terminations and one voluntary exit. There are also several pending referrals. BHC tries not to have over 25 active participants.

\*The Douglas County Government generously provides funding for three supportive housing beds and services throughout the fiscal year in addition to the numerous services located on the next page.



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

Q4 BHC Service Items	Total Services	Total Hours	Total Charges	Total Payments	Non-Medicaid Charges	Non-Medicaid Payments	Net Allowable Difference
ACT Services	6	7.93	\$678.28	\$0.00	\$678.28	\$0.00	\$678.28
Adult Psychosocial Group	538	669.33	\$33,437.50	(\$2,261.35)	\$29,250.00	(\$2,261.35)	\$26,988.65
Attendant Care	185	153.00	\$13,478.08	(\$870.00)	\$11,727.68	(\$612.48)	\$11,115.20
Clinical Information	17	1.50	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CPST Adult	184	203.25	\$28,490.00	\$0.00	\$15,995.00	\$0.00	\$15,995.00
CPST IDDT	34	53.62	\$7,490.00	\$0.00	\$3,605.00	\$0.00	\$3,605.00
CPST Medicaid Working Healthy	2	0.75	\$105.00	(\$49.78)	\$105.00	(\$49.78)	\$55.22
CPST Strengths Based EBP	9	5.53	\$770.00	\$0.00	\$770.00	\$0.00	\$770.00
Crisis Intervention	11	6.90	\$1,995.00	(\$411.25)	\$1,820.00	(\$411.25)	\$1,408.75
Crisis Peer Support Individual	2	0.10	\$0.00	\$0.00	0.00	0.00	\$0.00
Crisis TCM	2	0.08	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
EM Est. Pt. Lvl 3 (99213)	4	1.75	\$500.00	(\$112.62)	\$375.00	(\$112.62)	\$262.38
EM Est. Pt. Lvl 4 (99214)	27	12.00	\$3,375.00	(\$1,132.72)	\$2,250.00	(\$1,132.72)	\$1,117.28
EM Est. Pt. Lvl 5 (99215)	4	2.50	\$900.00	(\$276.85)	\$900.00	(\$276.85)	\$623.15
Group Therapy	9	8.60	\$450.00	\$0.00	\$450.00	\$0.00	\$450.00
Individual Tx	39	32.65	\$4,200.00	(\$706.52)	\$3,570.00	(\$706.52)	\$2,863.48
Initial Assessment	9	11.27	\$1,350.00	(\$130.00)	\$1,350.00	(\$130.00)	\$1,220.00
IPS Services	4	4.13	\$371.96	\$0.00	\$43.76	\$0.00	\$43.76
Jail After Hours Eva	2	2.50	\$300.00	\$0.00	\$300.00	\$0.00	\$300.00
Med Evaluation	2	2.00	\$450.00	\$0.00	\$450.00	\$0.00	\$450.00
MRT Service	3	0.52	\$87.50	\$0.00	\$87.50	\$0.00	\$87.50
NB - Care Coordination	12	2.28	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
NB - Case Consultation	3	4.73	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
NB - Indiv Tx Student	1	0.75	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
NB - TRC Soap Note	1	0.17	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
NB Crisis Follow-up	1	1.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Peer Support Indiv	9	9.17	\$582.75	\$0.00	\$582.75	\$0.00	\$582.75
Psychosocial Ind	289	174.20	\$15,272.24	(\$2,736.74)	\$9,780.36	(\$311.96)	\$9,468.40
Target Case Mgmt	224	157.42	\$9,938.25	(\$32.49)	\$8,788.50	(\$32.49)	\$8,756.01
Tele Group Therapy	12	12.00	\$600.00	(\$123.93)	\$600.00	(\$123.93)	\$476.07
Tele Indv Tx	6	4.02	\$700.00	(\$180.58)	\$560.00	(\$180.58)	\$379.42
TRC - Nurse Progress Note	15	150.85	\$27,900.00	(\$1,250.00)	\$10,250.00	(\$1,250.00)	\$9,000.00
<b>Grand Total</b>	<b>1666</b>	<b>1696.50</b>	<b>\$153,421.56</b>	<b>(\$10,274.83)</b>	<b>\$104,288.83</b>	<b>(\$7,592.53)</b>	<b>\$96,696.30</b>
<b>Total Charges of Non-Medicaid Services Provided @ TRC</b>							<b>(\$12,570.00)</b>
<b>Total Net Allowable for BHC</b>							<b>\$84,126.30</b>



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

Q4 BHC Individuals	Total Services	Total Hours	Total Charges	Total Payments	Non-Medicaid Charges	Non-Medicaid Payments	Net Allowable Difference	Admission Date	Discharge Date	Status Type	Housing Type
Individual 43	28	23.32	\$3,122.50	(\$403.16)	\$3,122.50	(\$403.16)	\$2,719.34	8/6/2024		Active	Housed w/ Roommate
Individual 44	14	12.65	\$1,136.25	\$0.00	\$1,136.25	\$0.00	\$1,136.25	10/1/2024	12/5/2024	Voluntary Withdrawal	Living w/ Family
Individual 51	1	0.50	\$125.00	\$0.00	\$125.00	\$0.00	\$0.00	12/5/2024		Pending	Housed w/ Roommate
Individual 52	5	2.93	\$302.25	\$0.00	\$302.25	\$0.00	\$302.25	11/8/2024		Active	Living w/ Family
Individual 53	1	1.25	\$150.00	\$0.00	\$150.00	\$0.00	\$150.00	10/15/2024	10/16/2024	Not Accepted	
Individual 33	29	24.35	\$1,560.75	(\$123.93)	\$1,560.75	(\$123.93)	\$1,436.82	4/23/2024		Active	Housed Alone
Individual 34	9	6.37	\$781.00	\$0.00	\$781.00	\$0.00	\$781.00	10/31/2024	12/7/2024	Failure/Termination	
Individual 35	21	15.70	\$1,518.28	(\$151.39)	\$1,518.28	(\$151.39)	\$1,366.89	6/3/2024		Active	Homeless at Shelter
Individual 3	237	265.93	\$22,160.50	(\$125.40)	\$17,496.75	(\$125.40)	\$17,371.35	12/5/2023		Active	Housed Alone
Individual 36	143	202.02	\$27,530.41	(\$1,602.34)	\$0.00	\$0.00	\$0.00	7/1/2024		Active	Housed Alone
Individual 37	29	18.93	\$2,547.51	\$0.00	\$2,547.51	\$0.00	\$2,547.51	6/10/2024		Active	Jail
Individual 54	1	1.25	\$150.00	\$0.00	\$150.00	\$0.00	\$150.00	12/5/2024		Active	Living w/ Family
Individual 38	11	7.47	\$787.50	\$0.00	\$787.50	\$0.00	\$787.50	5/2/2024		Active	Jail
Individual 45	21	18.92	\$2,427.00	\$0.00	\$2,427.00	\$0.00	\$2,427.00	8/5/2024		Active	Living w/ Family
Individual 55	296	304.58	\$25,265.48	(\$1,440.03)	\$25,265.48	(\$1,440.03)	\$23,825.45	10/31/2024		Active	Transitions
Individual 56	17	9.50	\$1,090.50	(\$449.70)	\$1,090.50	(\$449.70)	\$640.80	11/7/2024		Active	Housed w/ Roommate
Individual 46	6	2.33	\$331.50	(\$180.94)	\$331.50	(\$180.94)	\$150.56	7/19/2024	10/24/2024	Failure/Termination	Homeless
Individual 57	26	20.75	\$1,527.75	\$0.00	\$1,527.75	\$0.00	\$1,527.75	11/14/2024		Active	Living w/ Family
Individual 39	183	183.83	\$11,472.51	(\$3,770.78)	\$8,986.77	(\$3,231.94)	\$5,754.83	4/12/2024		Active	Bridges
Individual 10	28	32.62	\$3,682.19	(\$90.48)	0.00	0.00	\$0.00	12/5/2023		Active	Housed Alone
Individual 13	324	330.35	\$22,438.93	\$0.00	\$22,438.93	\$0.00	\$22,438.93	7/11/2023		Active	Bridges
Individual 47	22	12.73	\$1,787.50	(\$241.53)	\$615.00	(\$241.53)	\$373.47	7/19/2024		Active	Living w/ Family
Individual 48	12	5.75	\$670.25	\$0.00	\$670.25	\$0.00	\$670.25	7/19/2024		Active	Homeless at Shelter
Individual 17	6	7.75	\$1,065.75	\$0.00	\$1,065.75	\$0.00	\$1,065.75	5/1/2023	10/17/2024	Successful Completion	Homeless at Shelter
Individual 58	1	0.83	\$150.00	\$0.00	\$150.00	\$0.00	\$150.00	11/19/2024	11/19/2024	Not Accepted	Homeless at Shelter
Individual 22	42	48.77	\$8,521.20	(\$1,181.09)	\$6,511.25	(\$1,181.09)	\$5,330.16	9/19/2023		Active	Housed w/ Roommate
Individual 25	1	0.25	\$15.75	\$0.00	\$15.75	\$0.00	\$15.75	3/5/2024	10/24/2024	Failure/Termination	
Individual 59	1	1.10	\$150.00	\$0.00	\$150.00	\$0.00	\$150.00	10/25/2024		Pending	Housed Alone
Individual 50	142	127.33	\$10,321.55	(\$514.06)	\$3,490.11	(\$63.42)	\$3,426.69	7/19/2024		Active	Transitions
Individual 28	9	6.43	\$631.75	\$0.00	\$0.00	\$0.00	\$0.00	9/6/2023	12/19/2024	Successful Completion	Oxford



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

### Mobile Response Team (MRT)

**MRT Impact** – The Mobile Response Team (MRT) at Bert Nash Center plays a crucial role in the Douglas County Crisis Continuum by collaborating with service recipients and emergency systems to effectively manage distress in the least restrictive environment. MRT focuses on high acuity community members and individuals with complex circumstances, providing clinical assessment, safety planning, and crisis stabilization. The primary objective of MRT services is to ensure the safety of individuals within the community, supported by our expertise in identifying and responding to potential risks in complex situations.

The MRT is dedicated to implementing solution-focused interventions aimed at enhancing and restoring pre-crisis functioning for individuals, families, and community members. We are committed to referring individuals in crisis to a wide range of behavioral health services, including both in-patient and out-patient treatment options. Additionally, we actively facilitate access to various community resources as required.

During the fourth quarter of 2024 MRT responded to 199 referrals. As steps continue to be taken to formalize our program model as an Alternative 911 Emergency Response, it is promising to see that we have an increasing number of referrals beginning with Law Enforcement which divert to MRT for intervention.

Throughout the fourth quarter of 2024, MRT consistently maintained its service availability and response seven days a week from 8am-2am. MRT programming has developed and incorporated a PRN pool of hourly Mobile Crisis Specialists and Mobile Crisis Clinicians to help ensure staffing throughout hours of operations as the circumstance arise for staffing support. MRT was able to hire 5 PRN Crisis Specialists, 1 PRN Crisis Clinician, and 1 full time Crisis Clinician.

Continuing through the fourth quarter, MRT has continued diligently conducting jail assessments for the Douglas County Jail, both after hours and on weekends when the Bert Nash Jail Team is unavailable. These assessments provide crucial opportunities to develop safety plans with individuals in a confined and controlled setting, as well as to establish or re-establish connections to outpatient support and community resources tailored to everyone's crisis. MRT has continued to consistently complete Pre-Admission Screening and Resident Review (PASRR) assessments to evaluate the appropriateness, success, or challenges of meeting an individual's behavioral health needs with the least restrictive options, and to recommend suitable resources or services.

Throughout the fourth quarter of 2024, MRT has continued to skillfully navigate and complete Mental Health Reform (MHR) screens, enhancing clinical and navigational skills across the crisis continuum and various levels of care in response to facility requests or identified needs when an individual poses a danger to themselves or others. Notably, there have been more opportunities for MRT to conduct these assessments in the community in response to identified acuity. By integrating clinical assessment methodologies into our mobile responses, we aim to minimize unnecessary system contact at this crisis level and expedite the transition to a necessary higher level of care.





## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

MRT continues our responses to community requests to provide psychoeducation or interventions of Mental Health First Aid, crisis de-escalation, and support in managing stress responses (i.e., debriefing/postvention) to critical or sentinel events in the community throughout 2024. These offerings demonstrate dedication by the MRT to provide behavioral health-related mobile responses to multiple community events that have had a broader crisis impact on community members, student communities, local businesses, city or county employees, and specialty populations within Douglas County.

During the fourth quarter of 2024 MRT has continued identifying and establishing new marketing efforts to increase awareness of our services and promote additional methods of activating our services. MRT has participated in various health fairs in the Douglas County area, including a community resource fair and a health fair at the Eudora fire station. Additionally, MRT leadership has engaged with first responder agencies and local safety net health clinics to disseminate information about MRT services and address any inquiries they may have about the program. MRT has also updated informational door hangers and postcards to keep the community apprised of advances in our program model and modes of contact.

On July 14, 2024, MRT successfully launched the pilot program for LEO signal 4T (suicidal threats) calls in partnership with the local 911/Douglas County Emergency Communications Center. Douglas County ECC is currently dispatching Mobile Response Team (MRT) for services. When a law enforcement officer responds to a behavioral crisis call and requires assistance from MRT, the dispatch contacts MRT and requests their service at the officer's location. Upon arrival, MRT obtains pertinent information from the officer and engages with the individual experiencing the behavioral health crisis to facilitate de-escalation, assessment, and safety planning. Following the collection of necessary information, the officer may either remain on site or be released by MRT personnel. This initiative aims to expedite services to the community and marks the first step towards an Alternative response. The pilot program has successfully diverted individuals from unnecessary involvement in the criminal justice system and has alleviated pressures on the court and correctional systems. Additionally, it has helped to reduce the impact on police resources when responding to behavioral crises.

2024 has been a successful year in refining a mobile response system as an alternative to Law Enforcement and EMS response. The initiative aimed to maximize collaborative partnerships and expand awareness of the alternative response across Douglas County in collaboration with ECC. This has involved collaboration across various organizations and establishing a consensus-driven, evidence-based decision-making model for alternative response system call types, team roles, and dispatch methods. The primary objective has been to establish effective partnerships among law enforcement agencies, healthcare providers, and communities. The aim has been to enhance the overall system by improving the experiences of individuals and caregivers while also working to reduce the stigma associated with mental health and addiction issues.



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

MRT Referral & Response Information	2023			2024						
	Total	Avg/Qtr	%/Qtr	Q1	Q2	Q3	Q4	Total	Avg/Qtr	%/Qtr
<b>Number of Referrals</b>	<b>414</b>	<b>104</b>	<b>100%</b>	142	195	207	199	<b>743</b>	<b>185.8</b>	<b>100%</b>
<i>Self-Referral</i>	-	-	-	67	42	42	19	170	42.5	23%
<i>Family Referral</i>	-	-	-	30	18	27	11	86	21.5	12%
<i>Law Enforcement</i>	34	9	8%	12	19	92	136	259	64.8	35%
<i>Other</i>	380	95	92%	33	116	46	33	228	57.0	31%
<b>Distinct Clients</b>	<b>246</b>	<b>68</b>	-	93	125	160	160	<b>327</b>	<b>134.5</b>	-
<b>Repeat Clients in Quarter</b>	-	<b>12.75</b>	-	14	19	14	23	-	<b>18</b>	-
<b>Repeat Clients Year-to-Date</b>	-	<b>31</b>	-	14	39	73	100	-	<b>57</b>	-
<b>Number of Dispatches</b>	<b>399</b>	<b>100</b>	-	122	120	187	199	<b>628</b>	<b>157</b>	-
<b>Number of Interventions/Services Provided</b>	<b>671</b>	<b>168</b>	-	182	254	526	708	<b>1670</b>	<b>417.5</b>	-
<b>Total Average Time to Clinical Intervention</b>	<b>0:33</b>	<b>0:32</b>	-	0:41	0:34	1:13	0:34	-	<b>0:45</b>	-
<i>Average Time to Intervention for Self-Referrals</i>	-	-	-	0:22	0:24	1:32	0:19	-	0:39	-
<i>Average Time to Intervention for Family Referrals</i>	-	-	-	0:46	0:35	1:03	0:27	-	0:42	-
<i>Average Time to Intervention for L.E. Referrals</i>	0:31	0:30	-	0:33	0:37	1:01	0:35	-	0:41	-
<i>Average Time to Intervention for Other Referrals</i>	0:34	0:32	-	1:15	0:39	0:57	0:30	-	0:50	-
<b>Disposition Types:</b>	<b>414</b>	<b>104</b>	<b>100%</b>	142	148	207	199	<b>696</b>	<b>174</b>	<b>94%</b>
<i>Resolved in Community</i>	287	72	69%	94	108	80	89	371	93	50%
<i>In-Patient (Voluntary)</i>	26	7	6%	2	2	4	5	13	3	2%
<i>In-Patient (Involuntary)</i>	2	1	0%	13	8	5	3	29	7	4%
<i>Emergency Department</i>	0	0	0%	4	10	10	15	39	10	5%
<i>Crisis Center (CSU/CIS)</i>	28	7	7%	1	0	3	12	16	4	2%
<i>Jail</i>	0	0	0%	4	11	15	41	71	18	10%
<i>Other</i>	71	18	17%	24	9	87	34	154	39	21%
<b>Percent of Referrals Referred to Ongoing Services</b>	<b>31%</b>	<b>31%</b>	-	39%	21%	37%	63%	-	<b>40%</b>	-



**Bert Nash Community Mental Health Center**  
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MRT Referral Demographic Information	2023			2024						
	Total	Avg/Qtr	%/Qtr	Q1	Q2	Q3	Q4	Total	Avg/Qtr	%/Qtr
<b>Referral Counts by Age:</b>	<b>414</b>	<b>104</b>	<b>100%</b>	142	195	207	199	<b>743</b>	<b>185.8</b>	<b>100%</b>
<i>0-17</i>	54	14	13%	18	15	23	9	65	16.3	9%
<i>18-24</i>	59	15	14%	9	19	38	27	93	23.3	13%
<i>25-44</i>	142	36	34%	46	60	74	88	268	67.0	36%
<i>45-64</i>	115	29	28%	57	43	52	54	206	51.5	28%
<i>65-74</i>	21	5	5%	3	7	8	16	34	8.5	5%
<i>75+</i>	4	1	1%	2	0	9	4	15	3.8	2%
<i>Other/Unknown</i>	19	5	5%	7	51	3	1	62	15.5	8%
<b>Referral Counts by Gender Identity:</b>	<b>414</b>	<b>104</b>	<b>100%</b>	142	195	207	199	<b>743</b>	<b>185.8</b>	<b>100%</b>
<i>Male</i>	246	62	59%	91	80	81	88	340	85.0	46%
<i>Female</i>	140	35	34%	46	68	117	105	336	84.0	45%
<i>Trans Man</i>	10	3	2%	0	0	1	3	4	1.0	1%
<i>Trans Woman</i>	9	2	2%	2	0	5	2	9	2.3	1%
<i>Declined to Answer</i>	2	1	0%	0	0	1	0	1	0.3	0%
<i>Other/Unknown</i>	7	2	2%	3	47	2	1	53	13.3	7%
<b>Referral Counts by Race:</b>	<b>414</b>	<b>104</b>	<b>100%</b>	142	195	207	199	<b>743</b>	<b>185.8</b>	<b>100%</b>
<i>White</i>	279	70	67%	109	93	146	141	489	122.3	66%
<i>Black or African American</i>	67	17	16%	18	30	25	27	100	25.0	13%
<i>American Indian or Alaska Native</i>	24	6	6%	4	4	10	14	32	8.0	4%
<i>Asian</i>	5	1	1%	1	1	1	0	3	0.8	0%
<i>Native Hawaiian or Other Pacific Islander</i>	1	0	0%	0	0	2	1	3	0.8	0%
<i>Other/Unknown</i>	38	10	9%	10	67	23	16	116	29.0	16%
<b>Referral Counts by Ethnicity:</b>	<b>414</b>	<b>104</b>	<b>100%</b>	142	195	207	199	<b>743</b>	<b>185.8</b>	<b>100%</b>
<i>Hispanic or Latino</i>	16	4	4%	3	1	6	13	23	5.8	3%
<i>Not Hispanic or Latino</i>	386	97	93%	138	134	197	183	652	163.0	88%
<i>Other/Unknown</i>	12	3	3%	1	60	4	3	68	17.0	9%



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<b>MRT Referral Demographic Information Cont.</b>	<b>2023</b>			<b>2024</b>						
	Total	Avg/Qtr	%/Qtr	Q1	Q2	Q3	Q4	Total	Avg/Qtr	%/Qtr
<b>Referral Counts by Zip-Code:</b>	<b>414</b>	<b>104</b>	<b>100%</b>	142	195	207	199	<b>743</b>	<b>185.8</b>	<b>100%</b>
<i>66006</i>	9	2	2%	6	6	1	1	14	3.5	2%
<i>66025</i>	3	1	1%	0	2	2	3	7	1.8	1%
<i>66044</i>	112	28	27%	76	61	80	93	310	77.5	42%
<i>66045</i>	7	2	2%	0	0	0	1	1	0.3	0%
<i>66046</i>	177	44	43%	34	47	69	60	210	52.5	28%
<i>66047</i>	32	8	8%	9	14	22	23	68	17.0	9%
<i>66048</i>	1	0	0%	0	0	0	0	0	0.0	0%
<i>66049</i>	59	15	14%	16	17	22	16	71	17.8	10%
<i>66050</i>	0	0	0%	0	0	1	1	2	0.5	0%
<i>Other/Unknown</i>	13	3	3%	1	47	10	1	59	14.8	8%



**Bert Nash Community Mental Health Center**  
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<b>MRT Satisfaction Information</b>	<b>2023</b>			<b>2024</b>						
	<b>Total</b>	<b>Avg/Qtr</b>	<b>%/Qtr</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Total</b>	<b>Avg/Qtr</b>	<b>%/Qtr</b>
<b>Helpful in supporting you through your crisis?</b>										
<i>Very Poor</i>	-	-	-	0%	3.33%	0.00%	-	2%	-	1%
<i>Poor</i>	-	-	-	9.10%	3.33%	17.65%	-	9%	-	10%
<i>Good</i>	-	-	-	45.50%	56.67%	41.18%	-	49%	-	48%
<i>Very Good</i>	-	-	-	45.50%	36.67%	41.18%	-	40%	-	41%
<b>Available in your moment of need?</b>										
<i>Very Poor</i>	-	-	-	0%	3.33%	0.00%	-	2%	-	1%
<i>Poor</i>	-	-	-	9.10%	3.33%	11.76%	-	7%	-	8%
<i>Good</i>	-	-	-	45.50%	56.67%	52.94%	-	53%	-	52%
<i>Very Good</i>	-	-	-	45.50%	36.67%	35.29%	-	39%	-	39%
<b>Able to meet your needs?</b>										
<i>Very Poor</i>	-	-	-	0%	3.33%	5.88%	-	4%	-	3%
<i>Poor</i>	-	-	-	9.10%	6.67%	11.76%	-	9%	-	9%
<i>Good</i>	-	-	-	45.50%	53.33%	41.18%	-	47%	-	47%
<i>Very Good</i>	-	-	-	45.50%	36.67%	41.18%	-	40%	-	41%
<b>Able to support and prompt you through crisis?</b>										
<i>Very Poor</i>	-	-	-	0%	3.33%	5.88%	-	4%	-	3%
<i>Poor</i>	-	-	-	9.10%	0%	11.76%	-	5%	-	7%
<i>Good</i>	-	-	-	45.50%	60.00%	41.18%	-	51%	-	49%
<i>Very Good</i>	-	-	-	45.50%	36.67%	41.18%	-	40%	-	41%
<b>How likely are you to recommend the Mobile Response Team to a friend or colleague? (Net Promoter Score)</b>				<b>64</b>	<b>23</b>	<b>64</b>	-	<b>40</b>	-	<b>41</b>



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

### Assertive Community Treatment (ACT)

**ACT Impact** – During the fourth quarter of the 2024 operation year, the Bert Nash ACT team client to staff ratio returned to 7:1 as the team paused onboarding new clients due to understaffing of the team. The program manager position remains vacant, while the center continues to actively recruit candidates. One CM position has been filled, and the center continues to actively recruit to fill the remaining 2. 1 client obtained housing during the quarter, while 21 maintained housing. The team achieved 31 diversions from crisis services or inpatient services. ACT clients visited the LMH ED 7 times this quarter, down from 83 ED visits in the previous quarter. ACT clients logged 68 TRC episodes, up from 50 in the previous quarter. 3 clients were hospitalized during the quarter. 6 clients were booked into jail. EMS calls fell from 43 to 3 for the quarter. 3 clients obtained employment: 3 obtained SSI/SSDI. And 1 client graduated to less intensive service.

ACT Referral Information	2023			2024						
	Total	Avg/Qtr	%/Qtr	Q1	Q2	Q3	Q4	Total	Avg/Qtr	%/Qtr
<b>Number of Referrals Received</b>	<b>91</b>	<b>22.75</b>	<b>-</b>	20	16	10	2	<b>48</b>	<b>12.0</b>	<b>-</b>
<b>Number of Referrals Accepted</b>	<b>25</b>	<b>6.25</b>	<b>27.5%</b>	10	2	2	0	<b>14</b>	<b>3.5</b>	<b>15.4%</b>
<i>Percent of Referrals Accepted</i>	-	25.5%	-	50.0%	12.5%	20.0%	0.0%	-	21%	-
<b>Number Onboarding/Assessing</b>	<b>6</b>	<b>1.5</b>	<b>6.6%</b>	0	1	1	0	<b>2</b>	<b>1</b>	<b>2.2%</b>
<b>Number on Hold</b>	<b>10</b>	<b>2.5</b>	<b>11.0%</b>	6	8	7	2	<b>23</b>	<b>6</b>	<b>25.3%</b>
<b>Number Denied</b>	<b>50</b>	<b>12.5</b>	<b>54.9%</b>	4	5	0	0	<b>9</b>	<b>2</b>	<b>9.9%</b>
<i>Not SPMI</i>	1	1	8.0%	0	4	0	0	4	1	8.0%
<i>Personality Disorder</i>	2	2	16.0%	1	1	0	0	2	1	4.0%
<i>Less Intensive Services More Applicable</i>	3	3	24.0%	1	0	0	0	1	0	2.0%
<i>Client Declines Services</i>	2	2	16.0%	1	0	0	0	1	0	2.0%
<i>Client Unwilling to Pursue Mental Healthcare</i>	0	0	0.0%	1	0	0	0	1	0	2.0%
<b>Clients Served</b>	-	<b>53</b>	<b>-</b>	50	50	49	41	-	<b>48</b>	<b>-</b>
<b>Staffing Average</b>	-	<b>9</b>	<b>-</b>	7	7	6	6	-	<b>7</b>	<b>-</b>
<b>Client to Staff Ratio</b>	-	<b>6:1</b>	<b>-</b>	7:1	7:1	8:1	7:1	-	<b>6:1</b>	<b>-</b>
<b>Clients Discharged</b>	<b>16</b>	<b>4</b>	<b>-</b>	5	6	5	4	<b>20</b>	<b>5</b>	<b>-</b>



## Bert Nash Community Mental Health Center 2024 Q4 Douglas County Quarterly Report

ACT Service Information	2023			2024						
	Total	Avg/Qtr	%/Qtr	Q1	Q2	Q3	Q4	Total	Avg/Qtr	%/Qtr
TRC Episodes	33	33	-	52	70	50	68	240	60	-
ED Visits	51	51	-	15	27	83	7	132	33	-
Hospitalization	2	2	-	6	3	5	3	17	4	-
Number of Jail Bookings	11	11	-	1	7	6	6	20	5	-
Number of EMS Calls	41	41	-	161	13	43	6	223	56	-
Obtained Housing	7	7	-	4	7	4	1	16	4	-
Maintained Housing	29	29	-	31	31	27	21	110	28	-
Deviations from Medication Adherence	13	13	-	11	16	18	18	63	16	-
Number of Crisis Diversions (Diversion from TRC, OSH etc.)	48	48	-	83	20	18	31	152	38	-
Observed Reduction in Substance Use	12	12	-	4	7	11	9	31	8	-
Obtained Employment/Increased Income	6	6	-	2	4	6	3	15	4	-
Obtained SSI/SSDI	1	1	-	0	1	2	3	6	2	-
Successful Discharge to Less Intensive Service	1	1	-	0	1	2	1	4	1	-
Returned to ACT from Less Intensive Service	1	1	-	0	1	1	1	3	1	-



Treatment Recovery Center Douglas County Agreement			
Pillar/Domain	Measurement	2023 Goal	Frequency
Service	Total Admissions	-	Monthly
Service*	Total Voluntary Admissions	-	Monthly
Service*	Total Involuntary Admissions	-	Monthly
Efficiency*	Median Minutes for Urgent Services Registration to Disposition Time	<2 Hours	Monthly
Efficiency*	Average Urgent Services Registration to Clinical Intervention Time	≤30 Minutes	Monthly
Effectiveness*	Number of Clients Staying >72 Hours	3 month track	Monthly
Efficiency*	Mean Law Enforcement Wait Time	≤10 Minutes	Monthly
Efficiency*	Range Law Enforcement Wait Time	≤30 Minutes	Monthly
Service*	Total Number of Adults Brought to TRC by Law Enforcement	3 month track	Monthly
Service*	Percent of Adults Brought to TRC by Law Enforcement	3 month track	Monthly
Satisfaction	Overall Satisfaction	≥0 Promoter Score (NPS)	Monthly
Satisfaction*	Overall Client Satisfaction	≥0 Promoter Score (NPS)	Monthly
Satisfaction*	Overall Family Member/Guardian Satisfaction	≥0 Promoter Score (NPS)	Monthly
Access*	Percent of Referrals Accepted	≥95%	Monthly
Effectiveness*	Percentage Discharged to the Community	≥80%	Monthly
Access*	Percent of Clients Receiving Referral at Discharge	≥90%	Monthly
Access*	Percentage Completing an Outpatient Follow-Up Visit After Discharge	≥80%	Monthly
People*	TRC Turnover (Employees who left/Average number of Employees)*100	≤20% EOY	Monthly
People*	TRC Leadership Turnover (Employees who left/Average number of Employees)*100	≤0% EOY	Monthly
Finance*	Performance Relative to Approved Budget	Within 5% of Budget	Monthly
Finance*	Revenue Relative to Expenses	=	Monthly
Access*	Number of Transfers to ED for Medical Clearance	6 month track	Monthly



2023			2024														
Total	Avg/Mo	%/Mo	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%/Mo
948	119	100%	173	175	239	231	238	198	187	186	164	182	152	159	2284	190	100%
912	114	96%	171	171	233	222	223	188	178	177	154	169	140	149	2175	181	95%
36	5	4%	2	4	6	9	15	10	9	9	10	13	12	10	109	9	5%
-	0:59	-	1:04	0:57	0:55	0:58	1:05	1:03	1:04	0:58	1:06	1:08	1:00	1:07	-	1:02	-
-	0:24	-	0:17	0:17	0:19	0:17	0:24	0:19	0:23	0:17	0:20	0:20	0:23	0:11	-	0:18	-
87	11	9%	20	7	25	37	29	23	27	22	29	21	21	29	290	24	13%
-	4	-	5	9	6	9	3	4	7	7	9	8	10	9	-	7	-
-	15	-	35	55	86	30	20	24	27	34	30	29	51	46	-	39	-
185	21	-	40	33	48	41	29	17	29	21	19	28	17	31	353	29	-
-	12%	-	20%	19%	24%	20%	14%	9%	16%	10%	9%	14%	10%	16%	-	15%	-
57	53	-	79	75	75	56	81	75	40	100	100	50	60	83	70	73	-
62	64	-	78	75	75	53	79	74	40	100	100	48	60	83	68.5	72	-
56	25	-	100	-	-	100	100	100	-	100	100	100	-	-	100	100	-
-	100%	-	100%	100%	100%	100%	100%	99.7%	100%	100%	100%	100%	100%	100%	-	100%	-
-	98%	-	98%	98%	98%	98%	97%	98%	98%	98%	98%	96%	96%	97%	-	98%	-
-	86%	-	91%	80%	90%	89%	93%	66%	55%	60%	63%	58%	58%	54%	-	71%	-
-	61%	-	67%	68%	64%	73%	52%	66%	61%	53%	84%	84%	84%	77%	-	69%	-
62.0%	6.4%	-	5.67%	4.44%	6.52%	1.16%	4.10%	7.40%	2.67%	0.98%	5.69%	2.76%	2.80%	2.80%	42.59%	4.0%	-
0.0%	0.0%	-	0.00%	0.00%	0.00%	0.00%	16.70%	0.00%	0.00%	17.47%	0.00%	0.00%	0.00%	0.00%	34.48%	3.1%	-
-	26%	-	9.70%	13.30%	6.80%	7.60%	5.60%	3.90%	6.50%	5.40%	5.00%	3.90%	3.20%	1.80%	-	6%	-
-	121%	-	116%	96%	101%	95%	93%	91%	92%	93%	99%	99%	101%	101%	-	98%	-
28	3	-	3	2	4	3	0	6	2	1	1	1	2	3	28	2	-



Client Zip-Codes																		
66006	25	3	2%	5	6	4	3	3	5	1	4	4	2	7	1	36	4	2%
66025	46	5	3%	3	5	6	7	5	1	1	6	4	4	4	3	37	4	2%
66044	689	77	45%	100	84	91	110	97	101	96	109	103	95	89	83	609	97	45%
66045	7	1	0%	2	3	6	1	1	0	0	1	1	0	1	2	13	2	1%
66046	264	29	17%	34	30	49	37	42	33	31	44	50	36	41	38	282	39	18%
66047	135	15	9%	17	14	23	27	28	23	19	13	22	27	21	29	159	22	10%
66048	4	0	0%	0	0	1	0	0	0	0	0	0	0	0	1	2	0	0%
66049	211	23	14%	32	30	21	31	19	21	14	19	27	25	16	17	202	23	11%
66050	3	0	0%	0	1	1	0	1	0	3	1	1	1	1	1	10	1	0%
Other	159	18	10%	27	20	26	16	27	26	28	28	28	26	17	32	232	25	12%
Sex																		
Male	836	93	54%	115	91	117	126	117	110	103	127	117	112	116	120	782	114	53%
Female	704	78	46%	105	102	110	106	105	99	90	97	123	102	80	86	792	100	47%
Not Provided	3	0	0%	0	0	1	0	1	1	0	1	0	2	1	1	8	1	0%
Gender Identity																		
Male	475	53	31%	102	75	92	107	94	92	88	115	101	92	99	102	640	97	45%
Female	370	41	24%	79	75	87	80	78	69	73	77	88	81	65	69	599	77	36%
Transgender	4	0	0%	1	0	3	1	2	0	1	0	1	0	0	0	6	1	0%
Transgender Male to Female	14	2	1%	2	4	4	3	4	4	4	2	3	2	3	1	14	3	1%
Transgender Female to Male	9	1	1%	3	2	0	2	1	1	1	2	5	1	2	1	14	2	1%
Genderqueer, Neither Exclusively Male or Female	15	2	1%	4	6	7	4	2	4	4	6	4	6	5	7	26	5	2%
Other	656	73	43%	29	31	35	35	42	40	22	23	38	34	23	27	283	32	15%
Race																		
American Indian and Alaskan Native	79	9	5%	23	21	9	12	9	11	13	19	21	16	9	13	93	15	7%
Asian	17	2	1%	3	1	5	2	2	1	2	2	3	2	2	1	12	2	1%
Black/African American	171	19	11%	28	22	23	22	19	22	23	20	24	19	21	23	134	22	10%
Native Hawaiian or Other Pacific Islander	3	0	0%	3	0	1	1	2	4	1	2	4	0	0	0	13	2	1%
Other Single Race	6	1	0%	3	2	1	2	4	0	1	0	3	1	0	1	12	2	1%
Two or More Races	23	3	1%	6	5	7	4	9	12	4	6	9	11	8	10	58	8	4%
Unknown	306	34	20%	28	26	38	41	47	35	25	25	28	30	22	19	279	30	14%
White	938	104	61%	126	116	144	148	131	125	124	151	148	137	135	140	981	135	63%
Ethnicity																		
Dominican	1	0	0%	0	0	0	0	0	1	1	0	2	1	0	0	2	0	0%
Hispanic or Latino	71	8	5%	17	16	11	12	21	7	12	18	16	16	14	12	107	14	7%
Not Hispanic or Latino	1190	132	77%	176	153	183	186	161	165	157	180	184	166	153	171	1179	170	79%
Unknown	281	31	18%	27	24	34	34	41	37	23	27	38	33	30	24	294	31	14%

Treatment Recovery Center	2023			2024									
	Total	Avg/Mo	%/Mo	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%/Mo
<b>Total Clients Served</b>	<b>1074</b>	<b>171</b>	<b>71%</b>	<b>210</b>	<b>193</b>	<b>225</b>	<b>240</b>	<b>216</b>	<b>197</b>	<b>207</b>	<b>899</b>	<b>215.3</b>	<b>70%</b>
Internal Referral	-	-	-	63	41	51	61	53	63	50	-	54.6	-
Reconnected w/ Treatment Team - Already Engaged or Referred	-	-	-	85	66	93	93	70	59	71	-	76.7	-
External Referral	-	-	-	43	44	31	31	48	19	13	-	32.7	-
No Referral	-	-	-	72	64	67	55	100	110	92	-	80.0	-
<b>Total Clients Referred/Connected</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>138</b>	<b>107</b>	<b>135</b>	<b>150</b>	<b>126</b>	<b>115</b>	<b>112</b>	<b>-</b>	<b>126.1</b>	<b>-</b>
<b>Percent of Clients Referred/Connected</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>66%</b>	<b>55%</b>	<b>60%</b>	<b>63%</b>	<b>58%</b>	<b>58%</b>	<b>54%</b>	<b>-</b>	<b>0.6</b>	<b>59%</b>

Total Internal Referrals	2023			2024									
	Total	Avg/Mo	%/Mo	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%/Mo
<b>Child &amp; Family Service</b>	<b>0</b>	<b>-</b>	<b>-</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>8</b>	<b>4</b>	<b>14</b>	<b>2.0</b>	<b>2%</b>
Respite Care	0	-	-	0	0	0	0	0	0	0	0	0.0	0%
Attendant Care & PRI	0	-	-	0	0	0	0	0	0	0	0	0.0	0%
Parent Support	0	-	-	0	0	0	0	0	1	0	1	0.1	7%
Individual or Family Therapy	0	-	-	1	0	0	0	0	6	1	8	1.1	57%
CFS Outpatient Group Therapy	0	-	-	0	0	0	0	0	0	1	1	0.1	7%
Psychosocial Group	0	-	-	0	0	0	0	0	0	0	0	0.0	0%
Case Management	0	-	-	0	0	0	0	0	1	1	2	0.3	14%
SED Waiver	0	-	-	0	0	0	0	0	0	1	1	0.1	7%
Dual Diagnosis Intensive Outpatient Group	0	-	-	1	0	0	0	0	0	0	1	0.1	7%
<b>Adult Services</b>	<b>0</b>	<b>-</b>	<b>-</b>	<b>23</b>	<b>33</b>	<b>26</b>	<b>38</b>	<b>19</b>	<b>35</b>	<b>29</b>	<b>203</b>	<b>29.0</b>	<b>35%</b>
ACT (Assertive Community Treatment)	0	-	-	0	0	2	0	0	0	0	2	0.3	1%
Acute Care Team	0	-	-	0	0	0	0	8	17	11	36	5.1	18%
AOP (Adult Outpatient Therapy)	0	-	-	10	15	16	18	8	6	6	79	11.3	39%
Adult Outpatient Group Therapy	0	-	-	0	1	2	7	0	3	1	14	2.0	7%
DBT (Dialectical Behavior Therapy)	0	-	-	2	0	0	1	2	0	1	6	0.9	3%
IOP (Intensive Outpatient Group Therapy)	0	-	-	2	7	4	4	1	1	2	21	3.0	10%
BHS	0	-	-	0	0	0	0	0	0	0	0	0.0	0%
Peer Support Services	0	-	-	0	0	0	0	0	0	0	0	0.0	0%
SEED Case Management (Supported Employment & Education Development)	0	-	-	0	1	0	2	0	1	1	5	0.7	2%
IDDT Case Management (Integrate Dual Diagnosis Treatment)	0	-	-	3	2	1	1	0	3	2	12	1.7	6%
Supportive Housing Case Management	0	-	-	1	1	0	1	0	0	1	4	0.6	2%
HOT Case Management (Homeless Outreach Team)	0	-	-	3	4	1	3	0	3	4	18	2.6	9%
Strengths Case Management	0	-	-	2	2	0	1	0	1	0	6	0.9	3%
<b>Medical Services</b>	<b>0</b>	<b>-</b>	<b>-</b>	<b>8</b>	<b>5</b>	<b>5</b>	<b>7</b>	<b>7</b>	<b>12</b>	<b>7</b>	<b>51</b>	<b>7.3</b>	<b>9%</b>
Psychiatric Services	0	-	-	7	5	4	6	7	11	7	47	6.7	92%
Nutrition Services	0	-	-	0	0	0	0	0	0	0	0	0.0	0%
Opioid & Alcohol Medication Assisted Treatment (MAT)	0	-	-	1	0	1	1	0	1	0	4	0.6	8%
<b>Psychological Testing</b>	<b>0</b>	<b>-</b>	<b>-</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0%</b>
Adult Psych Testing	0	-	-	0	0	0	0	0	0	0	0	0.0	-
Child Psych Testing	0	-	-	0	0	0	0	0	0	0	0	0.0	-
<b>Admissions</b>	<b>0</b>	<b>-</b>	<b>-</b>	<b>54</b>	<b>29</b>	<b>41</b>	<b>52</b>	<b>49</b>	<b>50</b>	<b>40</b>	<b>315</b>	<b>45.0</b>	<b>54%</b>
Scheduled Initial Assessment	0	-	-	54	29	41	52	49	50	40	315	45.0	54%
<b>Grand Total Internal Referrals Made</b>	<b>0</b>	<b>-</b>	<b>-</b>	<b>87</b>	<b>67</b>	<b>72</b>	<b>97</b>	<b>75</b>	<b>105</b>	<b>80</b>	<b>583</b>	<b>83.3</b>	<b>100%</b>

Total External Referrals	2023			2024									
100 Good Women	0	-	-	0	0	0	0	1	1	1	3	0.4	1%
988- Suicide and Crisis Lifeline	0	-	-	6	1	0	0	0	0	0	7	1.0	1%
A Compass Project	0	-	-	0	0	0	0	0	0	1	1	0.1	0%
Ability KS	0	-	-	0	0	1	0	0	0	0	1	0.1	0%
AdventHealth Medical Group Primary	0	-	-	1	0	0	0	0	0	0	1	0.1	0%
ARC (Adult Recovery Center)	0	-	-	0	0	2	0	0	0	0	2	0.3	0%
Artist Helping the Homeless	0	-	-	0	0	0	0	1	1	0	2	0.3	0%
Ballard Center	0	-	-	0	0	0	0	3	1	0	4	0.6	1%
Boys and Girls Club	0	-	-	0	0	0	0	0	1	0	1	0.1	0%
Catholic Charities of NE Kansas	0	-	-	2	2	1	0	1	1	0	7	1.0	1%
Catholic Charities of NE KS	0	-	-	0	0	0	2	3	1	0	6	0.9	1%
Catholic Charities Workforce Dept	0	-	-	0	1	0	1	4	3	0	9	1.3	2%
Child Abuse and Neglect Hotline	0	-	-	0	0	0	0	0	1	0	1	0.1	0%
City of Lawrence	0	-	-	0	0	0	2	3	1	0	6	0.9	1%
Cold Weather Rule	0	-	-	0	0	0	0	1	0	0	1	0.1	0%
Community Children's Center	0	-	-	0	0	0	0	0	1	0	1	0.1	0%
Cottonwood CDDO	0	-	-	1	0	0	0	0	0	1	2	0.3	0%
Cottonwood Industries Career Training Program	0	-	-	0	0	0	0	1	1	0	2	0.3	0%
DARE Center	0	-	-	5	1	1	0	1	0	0	8	1.1	2%
DBT Center of Lawrence	0	-	-	0	0	0	1	0	0	0	1	0.1	0%
DCCCA, Inc	0	-	-	7	3	4	0	1	3	1	19	2.7	4%
DCF-KS Dept for Children and Families	0	-	-	0	0	0	0	1	1	2	4	0.6	1%
Dg CO Court Services	0	-	-	1	1	0	0	1	0	0	3	0.4	1%
DG CO Housing and Human Service: Housing Stabilization Collaborative	0	-	-	0	0	0	2	5	0	0	7	1.0	1%
Dg CO Housing and Human Services: Housing Stabilization Collaborative	0	-	-	0	0	0	1	3	2	1	7	1.0	1%
Disability Rights Center	0	-	-	0	0	0	1	1	0	1	3	0.4	1%
East Heights Clinic	0	-	-	0	0	0	1	0	0	0	1	0.1	0%
ECKAN	0	-	-	0	0	0	1	2	1	0	4	0.6	1%
Eudora Unified School District 491	0	-	-	0	0	0	0	1	0	0	1	0.1	0%
Family Centered Medicine	0	-	-	0	0	0	0	2	0	0	2	0.3	0%
Family Promise of Lawrence	0	-	-	0	0	0	0	1	0	0	1	0.1	0%
Family Service and Guidance Center	0	-	-	0	0	0	0	1	0	0	1	0.1	0%
GeneSight (Myriad Neuroscience)	0	-	-	0	1	0	0	0	0	0	1	0.1	0%
Harvester's SNAP Helpline	0	-	-	0	0	0	0	2	0	0	2	0.3	0%
Haskell Indian Clinic	0	-	-	0	0	0	0	0	1	0	1	0.1	0%
Heartland Community Health	0	-	-	5	0	1	1	0	1	2	10	1.4	2%
Heartland Community Health Center	0	-	-	3	1	2	4	5	1	1	17	2.4	3%
Heartland Community Health Center-Care Cupboard	0	-	-	1	2	0	0	1	0	0	4	0.6	1%
Heartland RADAC	0	-	-	12	3	4	4	1	2	1	27	3.9	5%
Heartland RADAC, Intensive Care Coordination	0	-	-	18	18	21	16	23	11	4	111	15.9	21%
Housing and Credit Counseling	0	-	-	0	0	0	0	1	0	0	1	0.1	0%
Housing Stabilization Collaboration	0	-	-	0	0	1	0	0	0	0	1	0.1	0%
HRADAC	0	-	-	0	0	0	0	0	1	0	1	0.1	0%
Independence Inc.	0	-	-	0	0	0	0	0	2	1	3	0.4	1%
Interpersonal Psychiatry	0	-	-	0	0	1	0	0	0	0	1	0.1	0%
JAAA- Jayhawk Area Agency on Aging	0	-	-	0	2	0	0	0	0	1	3	0.4	1%
Jubilee Cafe	0	-	-	2	0	0	0	0	0	0	2	0.3	0%
Just Food	0	-	-	4	3	0	2	0	1	0	10	1.4	2%

Justice Advice Line	0	-	-	0	0	0	1	0	0	0	1	0.1	0%
KanCare	0	-	-	0	0	0	0	0	0	1	1	0.1	0%
Kansas Legal Services	0	-	-	0	0	0	1	0	0	0	1	0.1	0%
KS Commission on Disability Concerns	0	-	-	0	0	0	1	0	0	0	1	0.1	0%
KU Legal Aid Clinic/DG CO Legal Aid Society	0	-	-	0	0	0	1	0	0	0	1	0.1	0%
KU Student Access Center	0	-	-	0	0	0	0	1	0	0	1	0.1	0%
Lawrence Community Shelter	0	-	-	6	0	1	1	3	3	0	14	2.0	3%
Lawrence DG CO Housing Authority	0	-	-	2	1	1	2	5	0	0	11	1.6	2%
Lawrence Family Medicine	0	-	-	0	0	1	0	0	0	0	1	0.1	0%
Lawrence Family Practice	0	-	-	0	0	1	0	0	0	0	1	0.1	0%
Lawrence Family Practice Center	0	-	-	0	0	0	3	0	0	0	3	0.4	1%
Lawrence Humane Society/Crisis Pet Retention Program	0	-	-	0	1	0	0	1	0	0	2	0.3	0%
Lawrence School District #497	0	-	-	2	0	2	0	1	1	0	6	0.9	1%
Lawrence Transit	0	-	-	0	3	0	0	0	0	0	3	0.4	1%
Lawrence VA Clinic	0	-	-	0	0	0	0	0	1	0	1	0.1	0%
Lawrence Workforce Center	0	-	-	1	1	0	1	4	3	0	10	1.4	2%
LIEAP- Low Income Energy Assistance Program	0	-	-	0	0	0	1	0	3	1	5	0.7	1%
LMH	0	-	-	1	0	0	0	0	0	0	1	0.1	0%
LMH Neurology Department	0	-	-	0	0	0	0	0	0	1	1	0.1	0%
LMH Postpartum Support	0	-	-	0	1	0	0	0	0	0	1	0.1	0%
LMH Primary Healthcare	0	-	-	2	1	0	0	1	1	0	5	0.7	1%
Marillac	0	-	-	0	0	0	1	0	0	0	1	0.1	0%
Midland Care	0	-	-	0	0	0	0	0	0	1	1	0.1	0%
Minds Matter	0	-	-	1	0	0	0	0	0	0	1	0.1	0%
Mirrow, Inc. Work for Success Program	0	-	-	0	0	0	0	0	0	1	1	0.1	0%
Neucare Family Medicine	0	-	-	1	1	1	0	0	0	0	3	0.4	1%
NULL	0	-	-	0	0	0	0	1	0	0	1	0.1	0%
O'Connell Children's Shelter (Satellite)	0	-	-	0	1	0	0	4	1	0	6	0.9	1%
Other	0	-	-	11	10	6	9	10	12	6	64	9.1	12%
Panda Pediatrics	0	-	-	0	0	0	1	0	1	0	2	0.3	0%
Pediatric Associates of Topeka	0	-	-	1	0	0	0	0	0	0	1	0.1	0%
Perry-LeCompton School District USD 343	0	-	-	1	0	0	0	0	0	0	1	0.1	0%
PFLAG	0	-	-	0	0	0	1	0	0	0	1	0.1	0%
Plymouth Church	0	-	-	0	0	0	0	0	1	0	1	0.1	0%
Positive Bright Star	0	-	-	0	0	0	0	0	1	0	1	0.1	0%
Positive Connections	0	-	-	0	0	0	1	0	0	0	1	0.1	0%
Primary Care Of Kansas	0	-	-	0	1	0	0	0	0	0	1	0.1	0%
Senior Resource Center	0	-	-	0	0	0	0	1	1	0	2	0.3	0%
Sexual Trauma and Abuse Care Center	0	-	-	1	1	0	1	0	0	0	3	0.4	1%
SMART Recovery Groups	0	-	-	0	1	2	0	1	0	0	4	0.6	1%
SNAP- Supplemental Nutrition Assistance Program (DCF)	0	-	-	1	3	1	0	2	1	2	10	1.4	2%
Social Security Office	0	-	-	1	0	0	1	1	1	1	5	0.7	1%
Social Service League	0	-	-	0	0	0	0	1	0	0	1	0.1	0%
Support Housing Funds- KDADS	0	-	-	0	0	1	2	0	0	1	4	0.6	1%
Tenant Based Rental Assistance	0	-	-	0	0	0	2	0	0	0	2	0.3	0%
Tenants to Homeowners	0	-	-	0	0	0	0	1	0	0	1	0.1	0%
The Sexual Trauma Adn Abuse Care Center	0	-	-	1	0	0	0	1	0	0	2	0.3	0%
The University of Kansas Health	0	-	-	0	0	0	0	0	1	0	1	0.1	0%
Trans Clothing Closet	0	-	-	0	0	0	1	0	0	0	1	0.1	0%
Treatment and Recovery Center of DG CO	0	-	-	4	1	0	0	0	0	0	5	0.7	1%
Visiting Nurses Association	0	-	-	0	0	0	0	0	0	1	1	0.1	0%
Visiting Nurses Association	0	-	-	2	0	0	0	0	0	0	2	0.3	0%
WIC Nutrition (Women, Infants, and Children)	0	-	-	0	0	0	0	0	1	0	1	0.1	0%
Willow Domestic Violence Center	0	-	-	1	1	1	0	0	1	0	4	0.6	1%
Willow Domestic Violence Shelter	0	-	-	1	0	0	0	0	0	0	1	0.1	0%
Working Healthy Kansas	0	-	-	1	0	0	0	0	1	0	2	0.3	0%
<b>Grand Total External Referrals Made</b>	<b>0</b>	<b>-</b>	<b>-</b>	<b>110</b>	<b>67</b>	<b>57</b>	<b>71</b>	<b>110</b>	<b>75</b>	<b>34</b>	<b>524</b>	<b>74.9</b>	<b>100%</b>

Treatment Recovery Center		
<i>Total Budgeted FTEs per Phasing Plan</i>		
<i>Filled FTEs</i>		
<i>% FTEs Filled</i>		
Pillar/Domain	Position Detail	
People	Crisis Behavioral Health Specialist	
<i>Total Budgeted FTEs per Phasing Plan</i>		
<i>Filled FTEs</i>		
<i>% FTEs Filled</i>		
<i>Applications</i>		
<i>Interviews Scheduled</i>		
<i>Offers Made</i>		
People	Crisis Case Manager	
<i>Total Budgeted FTEs per Phasing Plan</i>		
<i>Filled FTEs</i>		
<i>% FTEs Filled</i>		
<i>Applications</i>		
<i>Interviews Scheduled</i>		
<i>Offers Made</i>		
People	Crisis Peer Support	
<i>Total Budgeted FTEs per Phasing Plan</i>		
<i>Filled FTEs</i>		
<i>% FTEs Filled</i>		
<i>Applications</i>		
<i>Interviews Scheduled</i>		
<i>Offers Made</i>		
People	Crisis Therapist (QMHP)	
<i>Total Budgeted FTEs per Phasing Plan</i>		
<i>Filled FTEs</i>		
<i>% FTEs Filled</i>		
<i>Applications</i>		
<i>Interviews Scheduled</i>		
<i>Offers Made</i>		

2023			2024														
Total	Avg/Mo	%/Mo	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%/Mo
-	53.7	-	84.9	84.9	84.9	84.9	84.9	84.9	84.9	84.9	84.9	84.9	84.9	84.9	-	84.9	-
-	52.9	-	68.77	72.37	72.12	74.54	80.24	69.94	75.44	75.71	79.26	76.68	77.80	80.50	-	75.3	-
-	-	98%	81%	85%	85%	88%	95%	82%	89%	89%	93%	90%	92%	95%	-	-	89%
Total	Avg/Mo	%	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%
-	14.3	-	29.1	29.1	29.1	29.1	29.1	29.1	29.1	29.1	29.1	29.1	29.1	29.1	-	29.1	-
-	15.8	-	21.36	25.08	26.46	26.1	30.78	28.08	25.38	25.38	24.73	21.65	23.35	24.25	-	25.2	-
-	-	110%	73%	86%	91%	90%	106%	96%	87%	87%	85%	74%	80%	83%	-	-	87%
-	13	-	20	19	17	11	5	5	5	11	7	9	10	5	-	10	-
-	5	-	9	5	3	4	1	2	0	0	3	7	2	3	-	3	-
-	3	-	1	1	0	0	0	0	0	0	4	2	2	2	-	1	-
-	1.0	-	3	3	3	3	3	3	3	3	3	3	3	3	-	3.0	-
-	1.8	-	3	3	1.9	2.9	2.9	2.9	2.9	2.9	2.4	2.8	2.8	2.8	-	2.8	-
-	-	178%	100%	100%	63%	97%	97%	97%	97%	97%	80%	93%	93%	93%	-	-	92%
-	1	-	0	0	0	0	0	0	0	0	0	2	0	0	-	0	-
-	0	-	0	0	0	0	0	0	0	0	0	2	0	0	-	0	-
-	0	-	0	0	0	0	0	0	0	0	0	1	0	0	-	0	-
-	4.3	-	3.5	3.5	3.5	3.5	3.5	3.5	3.5	3.5	3.5	3.5	3.5	3.5	-	3.5	-
-	0.0	-	0	0.48	0.48	0.48	0.48	1.48	1.48	1.48	2.23	2.23	0.75	0.75	-	1.0	-
-	-	0%	0%	14%	14%	14%	14%	42%	42%	42%	64%	64%	21%	21%	-	-	29%
-	0	-	13	0	8	6	0	0	0	0	0	0	0	0	-	2	-
-	0	-	4	0	2	1	0	0	0	0	0	0	0	0	-	1	-
-	0	-	0	0	1	0	0	0	0	0	0	0	0	0	-	0	-
-	8.1	-	9.9	9.9	9.9	9.9	9.9	9.9	9.9	9.9	9.9	9.9	9.9	9.9	-	9.9	-
-	6.3	-	7.5	8.1	8.95	9.45	9.25	11.05	11.05	11.25	11.05	11.25	11.25	11.25	-	10.1	-
-	-	78%	76%	82%	90%	95%	93%	112%	112%	114%	112%	114%	114%	114%	-	-	102%
-	2	-	1	2	0	0	0	0	0	0	0	0	0	0	-	0	-
-	1	-	1	1	0	0	0	0	0	0	0	0	0	0	-	0	-
-	1	-	1	1	0	0	0	0	0	0	0	0	0	0	-	0	-

People	Unit Coordinator	
	Total Budgeted FTEs per Phasing Plan	
	-	3.5
	Filled FTEs	
	-	8.7
	% FTEs Filled	
	-	250%
	Applications	
	-	3
	Interviews Scheduled	
	-	1
	Offers Made	
	-	1
People	Registered Nurse	
	Total Budgeted FTEs per Phasing Plan	
	-	12.4
	Filled FTEs	
	-	11.7
	% FTEs Filled	
	-	95%
	Applications	
	-	6
	Interviews Scheduled	
	-	3
	Offers Made	
	-	2
People	APRN	
	Total Budgeted FTEs per Phasing Plan	
	-	3.6
	Filled FTEs	
	-	3.5
	% FTEs Filled	
	-	97%
	Applications	
	-	3
	Interviews Scheduled	
	-	1
	Offers Made	
	-	1
People	Peer Supervisor	
	Total Budgeted FTEs per Phasing Plan	
	-	0.8
	Filled FTEs	
	-	0.0
	% FTEs Filled	
	-	0%
	Applications	
	-	0
	Interviews Scheduled	
	-	0
	Offers Made	
	-	0
People	Clinical Educator	
	Total Budgeted FTEs per Phasing Plan	
	-	1.0
	Filled FTEs	
	-	1.0
	% FTEs Filled	
	-	100%
	Applications	
	-	0
	Interviews Scheduled	
	-	0
	Offers Made	
	-	0

-	3.5	-	9.9	9.9	9.9	9.9	9.9	9.9	9.9	9.9	9.9	9.9	9.9	9.9	9.9	9.9	-	9.9	-
-	8.7	-	9.9	9.6	9.6	8.7	9.6	9	9	9	9.1	8.1	9	9	-	-	-	9.1	-
-	-	250%	100%	97%	97%	88%	97%	91%	91%	91%	92%	82%	91%	91%	-	-	-	-	92%
-	3	-	2	0	4	0	8	0	0	0	0	0	0	11	-	-	-	2	-
-	1	-	2	0	0	0	0	0	0	0	0	0	0	3	-	-	-	0	-
-	1	-	2	0	0	0	0	0	0	0	0	0	0	0	-	-	-	0	-
-	12.4	-	18	18	18	18	18	18	18	18	18	18	18	18	18	18	-	18.0	-
-	11.7	-	16.61	15.71	14.33	16.91	17.03	8.03	15.23	16.3	18.35	19.25	19.25	21.05	-	-	-	16.5	-
-	-	95%	92%	87%	80%	94%	95%	45%	85%	91%	102%	107%	107%	117%	-	-	-	-	92%
-	6	-	1	8	3	4	3	0	11	6	1	0	1	4	-	-	-	4	-
-	3	-	1	0	2	0	2	0	2	2	1	4	0	0	-	-	-	1	-
-	2	-	1	0	1	0	1	0	2	1	3	3	0	2	-	-	-	1	-
-	3.6	-	4.5	4.5	4.5	4.5	4.5	4.5	4.5	4.5	4.5	4.5	4.5	4.5	4.5	4.5	-	4.5	-
-	3.5	-	4.4	4.4	4.4	4	4.4	4.4	4.4	4.4	5.4	5.4	5.4	5.4	-	-	-	4.7	-
-	-	97%	98%	98%	98%	89%	98%	98%	98%	98%	120%	120%	120%	120%	-	-	-	-	104%
-	3	-	8	5	0	5	0	3	2	3	0	0	0	0	-	-	-	0	0
-	1	-	1	0	0	0	0	0	1	1	0	0	0	0	-	-	-	0	0
-	1	-	1	0	0	0	0	0	0	1	1	0	0	0	-	-	-	0	0
-	0.8	-	1	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1.0	-
-	0.0	-	0	0	0	0	0	0	1	1	1	1	1	1	-	-	-	0.5	-
-	-	0%	0%	0%	0%	0%	0%	0%	100%	100%	100%	100%	100%	100%	-	-	-	-	50%
-	0	-	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-	0	-
-	0	-	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-	0	-
-	0	-	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-	0	-
-	1.0	-	1	1	1	1	1	1	1	1	1	1	1	1	-	-	-	1.0	-
-	1.0	-	1	1	1	1	1	1	1	0	0	0	0	0	-	-	-	0.6	-
-	-	100%	100%	100%	100%	100%	100%	100%	100%	0%	0%	0%	0%	0%	-	-	-	-	58%
-	0	-	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-	0	-
-	0	-	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-	0	-
-	0	-	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-	0	-



People	Nurse Manager	
Total Budgeted FTEs per Phasing Plan	-	2.0
Filled FTEs	-	2.0
% FTEs Filled	-	100%
Applications	-	0
Interviews Scheduled	-	0
Offers Made	-	0
People	Program Manager (Urgent Care)	
Total Budgeted FTEs per Phasing Plan	-	1.0
Filled FTEs	-	0.8
% FTEs Filled	-	83%
Applications	-	0
Interviews Scheduled	-	0
Offers Made	-	0
People	Director of Operations	
Total Budgeted FTEs per Phasing Plan	-	1.0
Filled FTEs	-	0.4
% FTEs Filled	-	42%
Applications	-	3
Interviews Scheduled	-	2
Offers Made	-	0
People	Director of Nursing	
Total Budgeted FTEs per Phasing Plan	-	-
Filled FTEs	-	-
% FTEs Filled	-	-
Applications	-	0
Interviews Scheduled	-	0
Offers Made	-	0
People	Medical Director	
Total Budgeted FTEs per Phasing Plan	-	0.8
Filled FTEs	-	0.8
% FTEs Filled	-	100%
Applications	-	1
Interviews Scheduled	-	0
Offers Made	-	0

-	2.0	-	2	2	2	2	2	2	2	2	2	2	2	2	2	2	-	2.0	-
-	2.0	-	2	2	2	2	1.8	1	1	0	1	1	1	1	1	1	-	1.3	-
-	-	100%	100%	100%	100%	90%	50%	50%	0%	50%	50%	50%	50%	50%	50%	-	-	66%	-
-	0	-	0	0	0	0	0	0	0	1	0	0	0	0	0	-	0	-	-
-	0	-	0	0	0	0	0	0	0	1	0	0	0	0	0	-	0	-	-
-	0	-	0	0	0	0	0	0	0	1	1	0	0	0	0	-	0	-	-
-	1.0	-	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1.0	-	-
-	0.8	-	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1.0	-	-
-	-	83%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	-	-	100%	-
-	0	-	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0	-	-
-	0	-	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0	-	-
-	0	-	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0	-	-
-	1.0	-	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1.0	-	-
-	0.4	-	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1.0	-	-
-	-	42%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	-	-	100%	-
-	3	-	0	0	1	0	0	0	0	0	0	0	0	0	0	-	0	-	-
-	2	-	0	0	1	0	0	0	0	0	0	0	0	0	0	-	0	-	-
-	0	-	0	0	1	0	0	0	0	0	0	0	0	0	0	-	0	-	-
-	-	-	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0.0	-	-
-	-	-	0	0	0	0	0	0	0	0	1	1	1	1	1	-	0.4	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0	-	-
-	-	-	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0	-	-
-	-	-	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0	-	-
-	-	-	0	0	0	0	0	0	0	0	1	0	0	0	0	-	0	-	-
-	0.8	-	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1.0	-	-
-	0.8	-	1	1	1	1	1	1	1	1	1	1	1	1	1	-	1.0	-	-
-	-	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	-	-	100%	-
-	1	-	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0	-	-
-	0	-	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0	-	-
-	0	-	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0	-	-

Treatment Recovery Center - Crisis Intervention			
Pillar/Domain	Measurement	2023 Goal	Frequency
Service	Total Client Episodes	6 Month Track	Monthly
Service	Total Visits	6 Month Track	Monthly
Service	Total Unique Clients	6 Month Track	Monthly
Service	Total Services	6 Month Track	Monthly
Service	Total Client Hours	6 Month Track	Monthly
Service	Total Voluntary Admissions	-	Monthly
Service	Total Involuntary Admissions	-	Monthly
Service	Percentage of Urgent Services Visits Requiring Admission to Observation	6 Month Track	Monthly
Service	Percentage of Urgent Care Visiting Assessed as Level I	6 Month Track	Monthly
Service	Percentage of Urgent Care Visiting Assessed as Level II	6 Month Track	Monthly
Service	Percentage of Urgent Care Visiting Assessed as Level III	6 Month Track	Monthly
Service	Median Minutes for Urgent Care Registration to Disposition Time	<2 Hours to Disposition	Monthly
Service	Average Urgent Care Registration to Clinical Intervention Time	≤30 Minutes on Median	Monthly
Service	Percentage of Urgent Care Visitors Leaving Prior to Clinical Intervention	≤5 Percent on Average	Monthly
Access	Admissions to ED after being sent for Medical Clearance	≤2.5%	Monthly
Access	Mean Law Enforcement Wait Time	≤10 Minutes	Monthly
Access	Range Law Enforcement Wait Time	≤30 Minutes	Monthly
Access	Total Number Brought to TRC by Law Enforcement	6 Month Track	Monthly
Service	Total Number Brought to TRC by Emergency Medical (EMS)	6 Month Track	Monthly
Service	Total Number Brought to TRC by Mobile Response Team	6 Month Track	Monthly
Service	Total Number of Walk In's	6 Month Track	Monthly
Access	Total Number of Involuntary Clients Brought to the TRC by Law Enforcement	6 Month Track	Monthly
Service	Total Number of Involuntary Clients Brought to TRC by Emergency Medical (EMS)	6 Month Track	Monthly
Service	Total Number of Involuntary Clients Brought to TRC by Mobile Response Team	6 Month Track	Monthly
Access	Percentage of Clients Brought to TRC by Law Enforcement	6 Month Track	Monthly
Access	Percentage of Clients Brought to TRC by Emergency Medical (EMS)	6 Month Track	Monthly
Access	Percentage of Clients Brought to TRC by Mobile Response Team	6 Month Track	Monthly
Access	Percent of Referrals Accepted	≥95%	Monthly
Pillar/Domain	Total Episodes by Day of Week	2023 Goal	Frequency
Access	Monday	-	Monthly
Access	Tuesday	-	Monthly
Access	Wednesday	-	Monthly
Access	Thursday	-	Monthly
Access	Friday	-	Monthly
Access	Saturday	-	Monthly
Access	Sunday	-	Monthly
Access	Total Admissions	-	Monthly

2023			2024															
Total	Avg/Mo	%	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%	
1805	201	-	255	256	328	329	332	312	303	339	316	312	271	330	3683	307	-	
1619	180	-	221	214	297	296	299	267	298	320	298	236	234	275	3255	271	-	
-	163	-	213	184	217	219	213	196	186	211	232	211	189	201	1544	206	-	
3040	338	-	441	414	533	573	581	488	486	580	540	513	459	474	6082	507	-	
1473.4	164	-	172.13	152.57	194.12	203.47	224.63	274.23	315.63	356.30	300.53	307.32	233.18	287.92	3022.0	251.8	-	
912	114	96%	171	171	233	222	223	188	178	177	154	169	140	149	2175	181	95%	
36	5	4%	2	4	6	9	15	10	9	9	10	13	12	10	109	9	5%	
-	28.7%	-	68%	68%	73%	70%	72%	63%	62%	55%	52%	58%	56%	48%	-	62%	-	
-	52.7%	-	34.51%	25.98%	22.39%	25.53%	19.27%	21.59%	21.60%	14.20%	19.11%	16.45%	19.55%	16.41%	-	21.4%	-	
-	38.4%	-	33.73%	45.28%	43.25%	40.43%	38.84%	44.19%	41.11%	44.38%	41.72%	45.16%	46.99%	44.98%	-	42.5%	-	
-	33.0%	-	31.76%	28.74%	34.36%	34.04%	41.90%	34.22%	37.28%	41.42%	39.17%	38.39%	33.46%	38.60%	-	36.1%	-	
-	0:59	-	1:04	0:57	0:55	0:58	1:05	1:03	1:04	0:58	1:06	1:08	1:00	1:07	-	1:02	-	
-	0:24	-	0:17	0:17	0:19	0:17	0:24	0:19	0:23	0:17	0:20	0:20	0:23	0:11	-	0:18	-	
-	2%	-	3%	2%	4%	4%	4%	4%	4%	5%	4%	7%	7%	9%	-	5%	-	
2.0%	0.2%	-	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.0%	0.0%	-	
-	4.1	-	5	9	6	9	3	4	7	7	9	8	10	9	-	7.2	-	
-	14.9	-	35	55	86	30	20	24	27	34	30	29	51	46	-	38.9	-	
192	21.3	10%	42	33	51	43	30	17	29	21	19	29	19	31	364	30.3	10%	
56	6.2	3%	9	7	5	12	10	6	8	6	6	6	6	7	88	7.3	2%	
32	3.6	2%	7	4	1	1	1	1	0	1	3	4	4	7	34	2.8	1%	
1581	175.7	85%	197	212	271	273	291	288	266	311	288	273	242	285	3197	266.4	87%	
15	2.1	1	2	2	4	2	0	0	1	1	0	0	0	1	13	1.1	1	
0	0.0	-	0	1	0	0	0	0	0	0	0	0	0	0	1	0.1	1	
1	0.1	1	0	0	0	0	0	0	0	1	1	0	0	1	3	0.3	1	
-	9.8%	-	16.47%	12.89%	15.55%	13.07%	9.04%	5.45%	9.57%	6.19%	6.01%	9.29%	7.01%	9.39%	-	10.0%	-	
-	2.6%	-	3.53%	2.73%	1.52%	3.65%	3.01%	1.92%	2.64%	1.77%	1.90%	1.92%	2.21%	2.12%	-	2.4%	-	
-	1.9%	-	2.75%	1.56%	0.30%	0.30%	0.30%	0.32%	0.00%	0.29%	0.95%	1.28%	1.48%	2.12%	-	1.0%	-	
-	99.67%	-	100%	100%	100%	100%	100%	99.7%	100%	100%	100%	100%	100%	100%	-	99.98%	-	
Total	Avg/Mo	%/Mo	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%/Mo	
320	36	18%	42	53	47	59	60	47	39	54	60	47	34	58	600	50	16%	
364	40	20%	39	40	49	57	55	46	50	37	53	50	42	52	570	48	15%	
292	32	16%	52	41	57	44	54	43	65	51	42	53	39	39	580	48	16%	
283	31	16%	44	42	47	48	44	58	41	64	57	62	37	53	597	50	16%	
280	31	16%	31	32	56	59	60	41	35	54	36	45	47	42	538	45	15%	
154	17	9%	24	26	36	32	31	38	33	40	27	30	45	43	405	34	11%	
168	19	9%	23	20	36	30	28	39	40	39	41	25	27	43	391	33	11%	
1861	207	103%	255	254	328	329	332	312	303	339	316	312	271	330	3681	307	100%	

Pillar/Domain	Total Episodes by Time of Day	2023 Goal	Frequency
Access	12:00 AM	-	Monthly
Access	1:00 AM	-	Monthly
Access	2:00 AM	-	Monthly
Access	3:00 AM	-	Monthly
Access	4:00 AM	-	Monthly
Access	5:00 AM	-	Monthly
Access	6:00 AM	-	Monthly
Access	7:00 AM	-	Monthly
Access	8:00 AM	-	Monthly
Access	9:00 AM	-	Monthly
Access	10:00 AM	-	Monthly
Access	11:00 AM	-	Monthly
Access	12:00 PM	-	Monthly
Access	1:00 PM	-	Monthly
Access	2:00 PM	-	Monthly
Access	3:00 PM	-	Monthly
Access	4:00 PM	-	Monthly
Access	5:00 PM	-	Monthly
Access	6:00 PM	-	Monthly
Access	7:00 PM	-	Monthly
Access	8:00 PM	-	Monthly
Access	9:00 PM	-	Monthly
Access	10:00 PM	-	Monthly
Access	11:00 PM	-	Monthly
Access	Total Episodes	-	Monthly
Pillar/Domain	Total Episodes by Primary Payor Type	2023 Goal	Frequency
Finance	Medicaid	-	Monthly
Finance	Medicare	-	Monthly
Finance	Uninsured	-	Monthly
Finance	Commercial	-	Monthly
Finance	Contract Payors	-	Monthly
Access	Total Episodes	-	Monthly

Total	Avg/Mo	-	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%/Mo
50	6	3%	10	9	8	9	14	12	8	17	13	15	8	9	132	11	4%
32	4	2%	6	4	12	17	5	7	8	15	6	5	6	12	103	9	3%
30	3	2%	5	5	4	5	11	9	12	9	8	7	8	1	84	7	2%
23	3	1%	6	3	7	5	7	4	8	3	6	5	9	2	65	5	2%
15	2	1%	6	3	5	6	7	5	4	7	1	5	0	10	59	5	2%
15	2	1%	3	1	1	3	4	2	1	3	4	5	3	4	34	3	1%
17	2	1%	3	2	6	2	5	12	2	10	3	6	2	3	56	5	2%
19	2	1%	6	6	5	8	6	9	7	4	7	3	3	9	73	6	2%
56	6	3%	14	7	9	8	6	6	14	6	13	11	10	10	114	10	3%
104	12	6%	6	11	7	9	16	5	12	13	11	19	10	19	138	12	4%
140	16	8%	18	15	14	26	13	19	15	22	17	20	16	22	217	18	6%
164	18	9%	16	17	16	21	19	12	12	15	17	14	17	15	191	16	5%
160	18	9%	18	15	15	22	20	16	12	22	20	12	22	31	225	19	6%
144	16	8%	14	16	14	19	19	22	15	16	21	13	10	16	195	16	5%
123	14	7%	18	18	14	18	22	14	19	22	30	21	12	20	228	19	6%
159	18	9%	16	24	18	14	17	21	17	14	17	16	25	32	231	19	6%
136	15	8%	17	11	17	18	15	19	13	15	16	15	17	16	189	16	5%
102	11	6%	7	13	23	19	27	17	11	14	18	15	23	17	204	17	6%
75	8	4%	8	11	12	13	20	14	20	16	11	17	15	23	180	15	5%
76	8	4%	12	12	27	13	17	13	14	19	14	22	13	13	189	16	5%
65	7	4%	10	21	30	24	23	19	20	16	24	22	8	10	227	19	6%
56	6	3%	12	9	30	21	19	22	29	26	18	17	12	14	229	19	6%
52	6	3%	14	10	22	18	8	19	21	26	12	17	13	12	192	16	5%
48	5	3%	10	11	12	11	12	14	9	9	9	10	9	10	126	11	3%
1861	207	103%	255	254	328	329	332	312	303	339	316	312	271	330	3681	307	100%
Total	Avg/Mo	-	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%/Mo
476	53	26%	43	53	72	75	79	63	73	41	97	92	85	68	841	70	23%
136	15	8%	26	27	28	40	25	34	14	69	21	12	9	14	319	27	9%
792	88	44%	126	111	167	144	148	138	150	169	136	154	123	184	1750	146	48%
439	49	24%	52	57	58	55	71	68	52	50	54	43	50	55	665	55	18%
18	2	1%	8	6	3	15	9	9	14	10	8	11	4	9	106	9	3%
1843	207	103%	255	254	328	329	332	312	303	339	316	312	271	330	3575	307	100%

Treatment Recovery Center - Crisis Intervention			
Pillar/Domain	Measurement	2023 Goal	Frequency
Service	Total Client Episodes	6 Month Track	Monthly
Service	Total Visits	6 Month Track	Monthly
Service	Total Unique Clients	6 Month Track	Monthly
Service	Total Services	6 Month Track	Monthly
Service	Total Client Hours	6 Month Track	Monthly
Service	Average Daily Census	6 Month Track	Monthly
Efficiency	Mean Observation Length of Stay (H:M:S)	6 Month Track	Monthly
Efficiency	Median Observation Length of Stay (H:M:S)	6 Month Track	Monthly
Efficiency	Range Observation Length of Stay (H:M:S)	6 Month Track	Monthly
Efficiency	Hours Observation Length of Stay (H:M:S)	6 Month Track	Monthly
Effectiveness	Total Hours of Restraint use per 100 Client Hours	0 Total Hours	Monthly
Effectiveness	Total Hours of Seclusion use per 100 Client Hours	0 Total Hours	Monthly
Effectiveness	Total Number of Restraint Episodes per 100 Visits	0 Total Hours	Monthly
Effectiveness	Average time in Restraint	0 Total Hours	Monthly
Effectiveness	Average time in Seclusion	0 Total Hours	Monthly
Effectiveness	Median time in Restraint	0 Total Hours	Monthly
Effectiveness	Median time in Seclusion	0 Total Hours	Monthly
Effectiveness	Range in Restraint	0 Total Hours	Monthly
Effectiveness	Range in Seclusion	0 Total Hours	Monthly
Effectiveness	Count of Involuntary Chemical Restraints	0	Monthly
Effectiveness	Client Falls	0	Monthly
Effectiveness	Client Injuries	0	Monthly
Effectiveness	Staff Injuries	0	Monthly
Effectiveness	Elopements	0	Monthly

2023			2024															
Total	Avg/Mo	%	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%	
890	111	-	166	168	231	225	228	187	177	175	158	176	146	157	2194	183	100%	
885	126	-	206	252	291	314	318	292	312	304	282	297	275	290	3433	286	100%	
-	89	-	125	120	141	142	137	129	114	121	125	120	98	105	885	123	100%	
3880	485	-	766	955	1102	1071	1123	948	1033	1043	933	1153	929	966	12022	1002	100%	
19439.2	2430	-	3401.6	3802.05	4442.31	4989.77	5443.17	6134.8	8743.1	8380.95	7544.76	7929.9	6944.83	7748:25:00	68080.1	5673	100%	
-	7	-	9	11	13	13	13	11	10	10	10	10	10	10	-	11	-	
-	20:56:40	-	20:08:06	22:11:08	19:35:51	21:40:53	23:45:39	21:39:13	23:17:03	22:41:12	23:40:48	20:04:33	21:38:03	21:46:37	-	21:50:46	-	
-	21:27:49	-	20:58:30	21:44:30	21:07:00	22:56:00	23:06:00	21:43:00	21:39:00	21:02:00	22:18:30	20:26:30	20:54:30	21:31:00	-	21:37:13	-	
-	67:00:07	-	66:05:00	93:24:00	63:41:00	77:06:00	131:51:00	79:01:00	101:24:00	224:09:00	82:43:00	93:07:00	69:00:00	98:38:00	-	98:20:45	-	
-	2344:59:56	-	3261:51:00	3638:25:00	4252:41:05	4791:37:00	5251:07:18	3962:37:00	4028:11:00	3902:05:00	3694:06:00	3493:13:00	3115:19:20	3387:25:00	-	3898:13:09	-	
0.1	0.0	-	0	0	0	0.01	0.02	0.02	0.01	0.01	0	0.01	0.04	0.01	0.1	0.0	100%	
0.4	0.0	-	0	0	0	0	0	0.01	0.02	0	0	0	0.04	0	0.1	0.0	100%	
5.5	0.6	-	0	0	0	0.3	0.6	1.0	0.3	0.3	0	0.3	0.7	0.7	4.4	0.4	100%	
1.2	0.1	-	0	0	0	0.4	0.5	0.5	0.6	0.9	0	0.5	1.2	0.5	5.1	0.4	-	
2.7	0.3	-	0	0	0	0	0	0.4	2.0	0	0	0	1.2	0	3.5	0.3	100%	
1.2	0.1	-	0	0	0	0.4	0.5	0.3	0.6	0.9	0	0.5	1.2	0.5	4.9	0.4	100%	
2.5	0.3	-	0	0	0	0	0	0.4	2.0	0	0	0	1.2	0	3.5	0.3	100%	
0.7	0.1	-	0	0	0	0	0.5	0.8	0	0	0	0	1.8	0.1	3.2	0.3	100%	
1.3	0.1	-	0	0	0	0	0	0	0	0	0	0	1.2	0	1.2	0.1	100%	
8	0.9	-	0	0	0	2	2	2	1	1	0	1	3	0	12	1.0	100%	
2	0.2	-	1	1	0	1	0	1	0	1	0	0	0	0	5	0.4	100%	
2	0.2	-	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	-	
4	0.4	-	1	1	0	1	1	1	0	1	0	0	1	0	7	0.6	100%	
1	0.1	-	0	0	0	0	2	0	1	1	0	0	0	0	4	0.3	100%	

Treatment Recovery Center - Crisis Stabilization			
Pillar/Domain	Measurement	2023 Goal	Frequency
Service	TRC Total Episodes	6 Month Track	Monthly
Service	Total Visits	6 Month Track	Monthly
Service	Total Unique Clients	6 Month Track	Monthly
Service	Total Services	6 Month Track	Monthly
Service	Total Client Hours (H:M:S)	6 Month Track	Monthly
Service	Total Client Days	6 Month Track	Monthly
Service	Average Daily Census	6 Month Track	Monthly
Efficiency	Mean Stabilization Length of Stay (H:M:S)	6 Month Track	Monthly
Efficiency	Median Stabilization Length of Stay (H:M:S)	6 Month Track	Monthly
Efficiency	Range Stabilization Length of Stay (H:M:S)	6 Month Track	Monthly
Efficiency	Hours Stabilization Length of Stay	6 Month Track	Monthly
Effectiveness	Number of Clients Staying >72 Hours	3 month track	Monthly
Effectiveness	Total Hours of Restraint use per 100 Client Hours	0 Total Hours	Monthly
Effectiveness	Total Hours of Secclusion use per 100 Client Hours	0 Total Hours	Monthly
Effectiveness	Total Number of Restraint Episodes per 100 Visits	0 Total Hours	Monthly
Effectiveness	Average time in Restraint	0 Total Hours	Monthly
Effectiveness	Average time in Secclusion	0 Total Hours	Monthly
Effectiveness	Median time in Restraint	0 Total Hours	Monthly
Effectiveness	Median time in Secclusion	0 Total Hours	Monthly
Effectiveness	Range in Restraint	0 Total Hours	Monthly
Effectiveness	Range in Secclusion	0 Total Hours	Monthly
Effectiveness	Count of Involuntary Chemical Restraints	0 Total Hours	Monthly
Effectiveness	Client Falls	0	Monthly
Effectiveness	Client Injuries	0	Monthly
Effectiveness	Staff Injuries	0	Monthly
Effectiveness	Elopements	0	Monthly

2023			2024															
Total	Avg/Mo	%	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%	
538	67	-	104	98	133	145	151	131	110	114	104	105	108	110	1413	117.75	-	
1172	147	-	198	143	229	274	278	297	288	315	286	229	281	293	3111	259.3	-	
539	67	-	95	79	101	110	116	103	88	101	92	90	81	85	690	95.1	-	
4221	528	-	-	-	-	-	-	-	-	-	-	-	-	-	0	-	-	
19085:57:00	2726:33:51	-	3739:00:00	2645:18:00	4735:03:00	5677:50:00	5825:40:00	6823:00:00	8180:00:00	8820:10:00	7623:15:00	7180:01:00	8579:20:00	9253:30:00	79082:07:00	6590:10:35	-	
1533.00	191.63	-	245	197	329	379	400	326	279	292	266	262	275	291	3541	295	-	
-	5	-	5	4	7	8	9	7	6	7	6	6	6	6	-	6	-	
-	39:18:52	-	34:27:53	26:17:24	35:35:55	38:01:34	37:34:00	34:44:30	36:44:10	37:01:24	36:16:42	34:54:56	38:02:53	41:36:07	-	35:56:27	-	
-	33:51:30	-	26:54:30	24:35:00	28:51:00	36:38:00	38:47:30	28:28:00	30:23:30	37:04:30	31:58:00	26:39:30	30:42:00	42:59:30	-	32:00:05	-	
-	139:20:37	-	76:38:00	99:55:00	136:27:00	196:01:00	236:28:00	122:12:00	143:14:00	123:02:00	168:18:00	150:18:00	158:44:25	215:24:00	-	152:13:27	-	
-	2644:48:00	-	3584:19:00	2550:08:00	4592:13:00	5513:46:00	5634:59:00	4342:42:00	3967:30:00	4220:40:00	3772:56:00	3631:13:00	4071:08:35	4493:01:00	-	4197:52:58	-	
77	10	-	6	1	11	9	9	8	4	8	2	11	9	11	89	7.42	-	
0.16	0.02	-	0	0	0.03	0.05	0	0.00	0.01	0	0.03	0	0	0	0.12	0.01	-	
2.7	0.3	-	0	0	0	0	0	0	0.03	0.01	0.25	0	0	0	0.3	0.02	-	
5.9	0.7	-	0	0	0.4	1.1	0	0.3	0.3	0	0.3	0	0	0	2.6	0.21	-	
2.5	0.3	-	0	0	1.3	1.0	0	0.2	0.5	0	2.0	0	0	0	5.0	0.42	-	
2.5	0.3	-	0	0	0	0	0	0	2.5	1.2	18.7	0	0	0	22.4	1.87	-	
2.3	0.3	-	0	0	1.3	1.3	0	0.2	0.5	0	2.0	0	0	0	5.2	0.44	-	
2.8	0.4	-	0	0	0	0	0	0	2.5	1.2	18.7	0	0	0	22.4	1.87	-	
2.4	0.3	-	0	0	0	1.6	0	0	0	0	0	0	0	0	1.6	0.13	-	
1.9	0.2	-	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.00	-	
7	0.9	-	0	0	1	4	0	1	1	0	1	0	0	0	8	0.67	-	
8	1.0	-	0	0	0	2	1	0	0	0	0	0	0	0	3	0.25	-	
0.0	0.0	-	0	0	0	0	1	0	0	0	1	0	0	0	2.0	0.17	-	
4	0.5	-	1	0	0	0	1	4	0	0	0	0	0	0	6	0.50	-	
0.0	0.0	-	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.00	-	

Treatment Recovery Center - Detox & Withdrawal Management		
Measurement	2024 Goal	Frequency
Number of Individuals Seen - COWS	Track Over Time	Monthly
Number of Individuals Seen - CIWA	Track Over Time	Monthly
Total Detox Individuals Seen	Track Over Time	Monthly
Time to Clinical Intervention for Detox Clients	Track Over Time	Monthly
Admission - Average Length of Stay at TRC	Track Over Time	Monthly

Measurement	2024 Goal	Frequency
<i>MAT</i>	Track Over Time	Monthly
<i>IOP</i>	Track Over Time	Monthly
<i>Outpatient Therapy</i>	Track Over Time	Monthly
<b>Total Referred to Internal Services</b>	Track Over Time	Monthly

Measurement	2024 Goal	Frequency
<i>DCCCA</i>	Track Over Time	Monthly
<i>Heartland CHC</i>	Track Over Time	Monthly
<i>Heartland RADAC</i>	Track Over Time	Monthly
<i>Mirror Inc</i>	Track Over Time	Monthly
<i>Other</i>	Track Over Time	Monthly
<b>Total Referred to External Services</b>	Track Over Time	Monthly

2024									
Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%/Mo
8	10	11	6	2	2	6	-	6	-
44	24	37	35	35	36	25	-	34	-
50	34	45	41	37	37	30	-	39	-
0:24	0:16	0:26	0:12	0:15	0:11	0:11	-	0:16	-
45:06:55	46:49:40	47:45:13	49:22:04	40:40:24	50:56:59	45:32:56	-	46:36:19	-

Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%/Mo
1	0	1	0	0	0	0	2	0.3	15%
0	0	1	1	0	0	0	2	0.3	15%
3	0	2	0	4	0	0	9	1.3	69%
4	0	4	1	4	0	0	13	1.9	100%

Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%/Mo
2	0	0	0	0	3	0	5	1	5%
2	0	1	0	2	1	0	6	1	6%
17	10	6	6	5	4	1	49	7	48%
0	0	0	0	0	0	0	0	0	0%
12	5	1	6	5	12	1	42	6	41%
33	15	8	12	12	20	2	102	14.6	100%

Treatment Recovery Center Business Function Agreement			
Pillar/Domain	Measurement	2023 Goal	Frequency
People	Employee Turnover (Employees who left/Average number of Employees)*100	≤20% EOY	Monthly
People	TRC Leadership Turnover (Employees who left/Average number of Employees)*100	≤0% EOY	Monthly
People	Percentage of Families Engaged in Process with Client	-	Monthly
Service	Percentage of Clients Engaged with Peer Support	6 Month Track	Monthly
Satisfaction	Percentage of Consumers Reporting Having a Welcoming or Hopeful Experience	≥90%	Monthly
Satisfaction	Total Number of Client Complaints	0	Monthly
Satisfaction	Qualitative Measures	-	Monthly
Finance	Total Expenditures	-	Monthly
Finance	Total Crisis Episodes	-	Monthly
Finance	Total Clients Served	-	Monthly
Finance	Total Bed Days	-	Monthly
Finance	Cost of Care per Crisis Episode	-	Monthly
Finance	Cost of Care per Client Served	-	Monthly
Finance	Cost of Care per Bed Day	-	Monthly
Finance	Number of Commercial Managed Care Agreements Secured at 6, 9 and 12 months	-	Monthly
Finance	Percent of Commercial Insurance Revenue as a Percentage of Total Revenue	6 Month Track	Monthly
Finance	Percent of Medicaid Revenue as a Percentage of Total Revenue	≥41%	Monthly
Finance	Performance Relative to Approved Budget	Within 5% of Budget	Monthly
Finance	Revenue Relative to Expenses	=	Monthly

2023			2024														
Total	Avg/Mo	%	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg/Mo	%
62.0%	6.4%	-	5.67%	4.44%	6.52%	1.16%	4.1%	7.40%	2.67%	0.98%	5.69%	2.76%	2.80%	2.80%	42.59%	3.9%	-
0.0%	0.0%	-	0%	0%	0%	0%	16.7%	0%	0%	17.47%	0%	0%	0.00%	0.00%	34.48%	2.8%	-
-	20%	-	14%	12%	15%	12%	9%	9%	6%	10%	16%	15%	13%	15%	-	12%	-
-	0%	-	0%	0%	15%	19%	9%	12%	27%	42%	42%	44%	37%	19%	-	22%	-
-	92%	-	92%	100%	100%	100%	94%	95%	100%	100%	100%	92%	100%	100%	-	98%	-
7	1	-	1	0	0	0	1	0	0	1	0	0	1	2	6	1	-
Please See Narrative Document																	
\$6,646,555.06	\$738,506.12	-	\$848,403.11	\$780,050.62	\$914,979.09	\$819,288.10	\$966,457.62	\$972,239.32	\$731,163.12	\$958,909.40	\$922,664.56	\$994,586.25	\$967,180.15	\$1,070,802.69	\$10,946,724.03	\$912,227.00	-
1861	207	-	255	256	328	329	332	312	303	339	316	312	271	330	3683	307	-
1074	171	-	220	193	228	232	223	210	193	225	240	216	197	207	1464	215	-
2690.00	336.25	-	432	438	634	660	689	537	520	532	477	488	456	484	6347	529	-
-	\$3,871.19	-	\$3,327.07	\$3,047.07	\$2,789.57	\$2,490.24	\$2,911.02	\$3,116.15	\$2,413.08	\$2,828.64	\$2,919.82	\$3,187.78	\$3,568.93	\$3,244.86	-	\$2,987.02	-
-	\$4,585.10	-	\$3,856.38	\$4,041.71	\$4,013.07	\$3,531.41	\$4,333.89	\$4,629.71	\$3,788.41	\$4,261.82	\$3,844.44	\$4,604.57	\$4,909.54	\$5,172.96	-	\$4,248.99	-
-	\$3,352.22	-	\$1,963.90	\$1,780.94	\$1,443.18	\$1,241.35	\$1,402.70	\$1,810.50	\$1,406.08	\$1,802.46	\$1,934.31	\$2,038.09	\$2,121.01	\$2,212.40	-	\$1,763.08	-
-	3	-	3	3	3	3	3	3	3	3	3	3	3	3	-	3	-
-	0%	-	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	2%	2%	-	0%	-
-	38%	-	55%	69%	66%	69%	67%	66%	67%	66%	65%	65%	63%	61%	-	65%	-
-	26%	-	10%	13%	7%	8%	6%	4%	7%	5%	5%	4%	3%	2%	-	6%	-
-	121%	-	116%	96%	101%	95%	93%	91%	92%	93%	99%	99%	101%	101%	-	98%	-



**DCCCA**

*Improving Lives...Close to Home*

DCCCA

Website- [dcca.org](http://dcca.org)

[Click here to return to list of community partners](#)



# DCCCA Peer Led Social Detox Project

CY 2024

<b>Demographics, Admissions</b>	Q1	Q2	Q3	Q4	2024 YTD
<b>Age at Referral</b>					
18 - 25	3	7	1	2	13
26 - 40	13	9	1	3	26
41 - 60	4	6	11	9	30
60+	0	3	1	1	5
<b>Race</b>					
Alaskan Native	0	0	1	2	3
Asian	0	0	0	0	0
Black	1	7	0	0	8
Native American	5	0	1	2	8
Pacific Islander/Hawaiian	0	0	1	0	1
White - Hispanic	2	1	0	0	3
White - NonHispanic	11	16	11	11	49
Multi	1	0	0	0	1
<b>Ethnicity</b>					
Cuban	0	0	0	0	0
Mexican	0	0	0	0	0
Puerto Rican	0	0	0	0	0
Other	0	0	3	4	7
Unspecified	2	1	0	0	3
Not of Hispanic Origin	0	0	11	11	22
<b>Sex</b>					
Male	2	0	1	1	4
Female	18	25	13	14	70

<b>Drug of Choice, Admissions</b>	Q1	Q2	Q3	Q4	2024 YTD
Alcohol	3	11	8	7	29
Benzodiazepines	0	0	0	0	0
Cannabis	0	0	0	0	0
Cocaine	1	1	0	0	2
Fentanyl	4	5	0	0	9
Heroin	0	0	0	0	0
Inhalants	0	0	0	0	0
Methamphetamine	12	8	6	6	32
Opiates (not fentanyl)	0	0	0	0	0
Other Stimulant	0	0	0	2	2

<b>Access To Care, Admissions</b>	Q1	Q2	Q3	Q4	2024 YTD
<b>Referral Day of Week</b>					
Monday	2	2	3	2	9
Tuesday	4	8	6	7	25
Wednesday	3	6	1	4	14
Thursday	7	5	0	0	12
Friday	2	3	3	2	10
Saturday	2	1	1	0	4
Sunday	0	0	0	0	0

# DCCCA Peer Led Social Detox Project

CY 2024

<b>Placement Site</b>	Q1	Q2	Q3	Q4	2024 YTD
First Step at Lakeview (DCCCA)	0	0	1	10	11
Valeo Recovery Center	0	1	0	1	2
Johnson County Adult Detox Unit	0	1	4	1	6
Treatment and Recovery Center	20	23	9	3	55

<b>Placement site by Sex</b>	Q1	Q2	Q3	Q4	2024 YTD
<b>Male</b>					
First Step at Lakeview (DCCCA)	0	0	0	0	0
Valeo Recovery Center	0	0	0	1	1
Johnson County Adult Detox Unit	0	0	0	0	0
Treatment and Recovery Center	2	0	1	0	3

<b>Female</b>					
First Step at Lakeview (DCCCA)	0	0	1	10	11
Valeo Recovery Center	0	1	0	0	1
Johnson County Adult Detox Unit	0	1	4	1	6
Treatment and Recovery Center	18	23	8	3	52

<b>Discharge Status - Successful</b>	Q1	Q2	Q3	Q4	2024 YTD
First Step at Lakeview (DCCCA)	0	0	0	9	9
Valeo Recovery Center	0	1	0	1	2
Johnson County Adult Detox Unit	0	1	1	1	3
Treatment and Recovery Center	18	20	2	3	43

<b>Discharge Status - Unsuccessful</b>	Q1	Q2	Q3	Q4	2024 YTD
First Step at Lakeview (DCCCA)	0	0	1	1	2
Valeo Recovery Center	0	0	0	0	0
Johnson County Adult Detox Unit	0	0	3	0	3
Treatment and Recovery Center	2	2	7	0	11

<b>Other Dispositions</b>	Q1	Q2	Q3	Q4	2024 YTD
Transfer to Medical	0	1	0	0	1
Transfer to Psychiatric	0	0	0	0	0
Changed mind during engagement	0	0	0	0	0
Other/unknown	0	0	0	15	15

<b>Total Days in Care</b>	Q1	Q2	Q3	Q4	2024 YTD
First Step at Lakeview (DCCCA)	0	0	2	40	42
Valeo Recovery Center	0	5	0	2	7
Johnson County Adult Detox Unit	0	5	9	5	19
Treatment and Recovery Center	58	63	22	9	152

<b><i>Average Days in Care Per Episode</i></b>	Q1	Q2	Q3	Q4	2024 YTD
First Step at Lakeview (DCCCA)	0	0	2	4	6
Valeo Recovery Center	0	5	0	2	7
Johnson County Adult Detox Unit	0	5	1.8	5	11.8
Treatment and Recovery Center	2.9	2.63	2.75	3	11.28

## Douglas County Prevention Initiatives

### Progress Update

April 1<sup>st</sup>- June 30<sup>th</sup>, 2024

#### Engage Douglas County

Engage Douglas County met as a coalition on April 25<sup>th</sup> and May 23<sup>rd</sup>. Workgroups met during the following days:

- Eudora- 4/09, 5/14, 6/11
- Suicide Prevention Needs- 5/22, 6/26

On April 25<sup>th</sup>, the coalition met virtually. Partner updates were shared, and upcoming events were discussed, including the Leading Causes of Life 5K and Festival, YEP! Year End Celebration and Virtual Town Hall Update. The remainder of the meeting was devoted to the gaps in the Suicide Prevention Needs in Douglas County. Coalition members (Brooks Robertson, Laura Smith, Sherry Thomas, and Shannon VanLandigham agreed to dive further into the work.

On May 23<sup>rd</sup>, the coalition met in person. Partner updates were shared, as well as a review of the Leading Causes of Like 5K and Festival and YEP! Year End Celebration were discussed. The Suicide Prevention Needs group provided an update from the committee meeting. The committee focused on creating more intentional goals, such as providing schools with support staff and community health workers, outreach to organizations, connection to youth and university communities, and partnership with mobile phone carriers.

On June 27<sup>th</sup>, the coalition hosted the 3<sup>rd</sup> annual Engaged in Action Awards. A committee of coalition members selected the winners in each category. They demonstrated a commitment to reducing substance misuse and/or promoting mental health, active engagement in issues that affect residents in Douglas County, and dedication to serving the community. Youth- Kelli Spreer (Perry- Lecompton High School), Adult- James Browning (Billy Mills Middle School), and Organization- Baldwin City Police Department. We had a total of 18 nominations this year.

The Engaged in Action selection committee includes Anabel Feauto (DCCCA), Ariel Cohn (DCCCA), Brooks Robertson (HeadQuarters Kansas), Chrissy Mayer (DCCCA), George Diepenbrock (Douglas County Sheriff's Office) and Ginny Bernard (LiveWell Douglas County).

#### Engage Douglas County Media

April

Total Reach	19,964
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Total Impressions	25,068
Total Posts Sent	33
Total Profile Visits	958
Total Engagements	799
Total Website Visits	595
Total Website Visitors	476

May

Total Reach	12,269
Total Impressions	13,921
Total Posts Sent	23
Total Profile Visits	446
Total Engagements	385
Total Website Visits	478

Total Website Visitors	372
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## June

Total Reach	3,283
Total Impressions	3,548
Total Posts Sent	20
Total Profile Visits	449
Total Engagements	341
Total Website Visits	319
Total Website Visitors	252

## Strategies

EDC Townhall—The Engage Douglas County Town Hall was held via Zoom on Tuesday, April 23rd. It featured Monica Jackson, Shannon VanLandingham, Meg Hasselman, Ariel Cohn, and Bob Tryanski.

Summer Wellness Series- The Summer Wellness Series will comprise virtual recordings posted on the Engage Douglas County website and social media. The dates and topics include:

- June 11<sup>th</sup>- Safety Planning, Brooks Robertson, HeadQuarters Kansas
- June 25<sup>th</sup>- Beyond Relationships, Sydney Goodwin, The Willow DV Center
- July 9<sup>th</sup>- Opioid Overdose and Naloxone, Ariel Cohn and Anabel Feauto, DCCCA
- July 30<sup>th</sup>- Empowering Youth in the Digital Age, Sydney Goodwin, The Willow DV Center

Recordings for the Townhall and Summer Wellness series can be viewed here - <https://www.engagedouglascounty.org/videos>.

### **KDADS Suicide Prevention Grant**

Leading Causes of Life 5K and Festival: A 5k and Festival for suicide awareness and prevention took place April 27<sup>th</sup>, 2024, at Broken Arrow Park in Lawrence. There were about 100 registrations for the 5k. We had vendors including: Bert Nash, Connection And Synergy, HQ Kansas, Children's Advocacy Center of Douglas County, #BeMoreLikeClaire, Center for Supportive Communities, DCCCA CPA, Six Feet Over, Kantodeia Schnabel, YEP!, and Students in the KU School of Social Work. Barbwire BBQ, Uplift Coffee Truck, and JB's Cali Fusion were food vendors for the event.

Youth Mental Health First Aid:

- Lawrence High School - April 2<sup>nd</sup>, 2024
- Perry-Lecompton Middle School - April 29<sup>th</sup>, 2024

### **Other Partnership Collaborations**

Early Intervention Drug-Free Alternatives

- Theatre Lawrence- 46 youth participated in a Disney Production Project Workshop at Theatre Lawrence. The workshop was held every day from noon to 4 p.m. from June 1st to 27th. The project included stage management, lighting, sound technical, and a breakdown of performing a Disney performance of Descendants on June 28th. Due to a sell-out, Theatre Lawrence added a performance on June 29<sup>th</sup>. A total of 878 patrons attended the Disney performance of The Descendants, the musical.
- Eudora Parks and Recreation- Eudora Parks and Recreation hosted a Movie in the Park event showing "Sandlot." Over 100 attendees were at the event, which included mini golf, a jungle gym, a balloon maker, and frisbee golf. It was a huge success and provided a safe and fun environment for youth and families.
- Baldwin City Recreation Commission- In collaboration with the Baldwin City Chamber of Commerce, the Baldwin City Recreation Commission hosted the first Third Friday event in Baldwin City on June 21<sup>st</sup>. Baldwin City Recreation Commission is celebrating 40 years of recreation. The event was a Summer Concert Movie with the screening of The Natural, a baseball classic. There was live entertainment from a Lawrence-based band, Howard Mahan and Friends. 35 vendors were selling handmade items and fresh produce. The Baldwin City Recreation booth offered free face painting, which the summer camp staff provided. There were approximately 300 attendees.

### **Douglas County Behavioral Health Summit**

DCCCA has started planning the prevention summit with Engage Douglas County partners. An in-person kickoff event will be held on September 4th at KU Memorial Ballroom, with a presentation from the Highway Patrol on Drug Recognition in schools. Follow-up virtual sessions will be held every Tuesday

(12:00-1:00 PM) and Thursday (6:00-7:00 PM) during September. We have begun speaker outreach with three sessions lined up. Save-the-date cards and a landing page for the summit are being created.

- Tuesday, September 10<sup>th</sup> - 12 PM - HealthSource- Monica Kurz: 988 and Suicide Prevention
- Thursday, September 12<sup>th</sup> – 6 PM - Sources of Strength- Lydia Fuqua: Elementary Sources of Strength Overview
- Tuesday, September 17<sup>th</sup> - 12 PM - Evolve MD/ DCCCA Medical Provider- Anthony J. Strickland: MAT Presentation
- Thursday, September 19<sup>th</sup> – 6 PM - Screen Sanity- Abby Doyle: Parents and Community Roadmap to Social Media/Smartphone Use
- Tuesday, September 24<sup>th</sup> – 12 PM - ThYrve- Jomella Watson-Thompson: ThrYve (Together Helping Reduce Youth Violence Through Equity): Preventing Youth Violence through Multisector Collaboration
- Thursday, September 26<sup>th</sup> – 6 PM - PAXIS: PAX Tools= Evidence-based Programming Across the Youth System of Care

### **Zero Suicide Initiative**

Erica Molde has contracted with DCCCA to provide support. She is helping to design the completed pathways for the CBS and Operations, so they match the look of the Lawrence Outpatient Erica had assisted with. The Zero Suicide team will reconvene on August 6th and have regular scheduled meetings on the first Tuesdays of the month. An agency-wide workforce survey was completed, and results were compiled. The team has reviewed the results and will identify recommendations and next steps in August. The team has a Lived Experience committee that has gathered stories that have been accessible to the organization's internal workforce.

### **Youth Empowerment and Prevention (YEP!)**

The YEP! Year End Celebration was held on Tuesday, May 7<sup>th</sup>. The yearly award recipients included Liberty Memorial Central Middle School for Promising New Chapter, Billy Mills Middle School for Honorable Mention, and Lawrence College and Career Center for Chapter of the Year. Over 50 YEP! students enjoyed playing games and learned from a presentation about medication safety from Abby Jackson (DCCCA). The YEP! Kickoff will be on September 17<sup>th</sup>, 2024.

### **Douglas County Youth Focus Group**

DCCCA completed 6 focus groups with 71 students in Douglas County middle and high schools, both public and private schools. The focus group format consisted of a variety of questions related to substance use and mental health among young people in the county. Schools were asked to select a variety of students from different backgrounds and social groups to ensure that multiple perspectives were heard. Each focus group lasted 45-60 minutes. A summary of the focus group is attached at the end of this report.



### Presentations

On April 4<sup>th</sup>, Chrissy Mayer presented to a University of Kansas class on Douglas County Prevention efforts. There were 14 individuals in the class.

On May 28<sup>th</sup>, Chrissy Mayer and Anabel Feauto presented to Interfaith Mental Health Outreach on BAFUA, Engage Douglas County and YEP!.

### Training

PAX Training- Offered PAX Tools for Human Services training to Engage Douglas County members and DCCCA staff.

### **Naloxone Distribution**

<b>Agency</b>	<b>Number of Kits</b>	<b>Delivered</b>
Haskell University	41	Yes
Lawrence Public Health Department	48	Yes
Lawrence Community Shelter	10	Yes

	<b>Date</b>	<b>Number of Naloxone Kits Placed in machine</b>
Douglas County Transit Vending Machine	4/04/24	177 Kits
Douglas County Transit Vending Machine	6/28/24	88 Kits

### **Naloxone Trainings**

<b>Agency</b>	<b>Date</b>	<b># of Participants</b>
KU MedSim Club	4/04/24	20

### **Deterra Bags**

<b>Agency</b>	<b>Date</b>	<b>Number of Bags</b>
Sherrif's Office- Drug Take Back Day	4/04/24	600
Lawrence Community Shelter	6/26/24	9

### **Fentanyl Test Strips**

<b>Agency</b>	<b>Date</b>	<b>Number of Test Strips</b>
Haskell University	4/26/24	50
Lawrence Community Shelter	6/26/24	45

**Douglas County Youth Focus Groups**  
**Final Summary**  
**Spring 2024**

DCCCA completed 6 focus groups with 71 students in Douglas County middle and high schools, both public and private schools. The focus group format consisted of a variety of questions related to substance use and mental health among young people in the county. Schools were asked to select a variety of students from different backgrounds and social groups to ensure that multiple perspectives were heard. Each focus group lasted 45-60 minutes.

The list of questions presented to the students included –

- What do you think are the two most widely used substances by youth in your community?
- What issues are teens facing as a result of substance abuse?
- Where do youth typically get the substance?
- Where do youth typically use the substance and when?
- How likely are they to be caught using the substance and by whom? What type of consequences would a teen experience if they were caught?
- My family has clear rules about the substance.
- Are youth in your school recognized for positive actions?
- When teens are recognized in your school for positive action how does this happen?
- Do you think all youth feel welcome to participate in extra-curricular activities or clubs? If not, what would be the barriers?
- What are things in your school or community that keep youth from feeling like they belong?
- Are teens involved in school activities (sports or clubs) more or less likely to use substances?
- What do you think are the most challenging issues that teens are facing regarding mental health issues?
- Do teens with mental health challenges have someone to talk to about the issue? If so, who?
- What do you think impacts mental health issues among your peers the most?
- What are the barriers for your peers to get help with their mental health?
- What are the barriers for your peers to get help with their substance use?
- Is there anything about substance abuse or mental health that we haven't discussed that you'd like to share?
- What would help make a change in the community?

**SUBSTANCE USE**

**Question 1 – Most widely used substances**

When asked about the two most widely used substances by young people in their community, every school mentioned vaping, 5 mentioned marijuana, and 2 mentioned alcohol. One school mentioned vaping, marijuana, and alcohol as the top three.

**Question 2 – Issues teen face from substance abuse**

When asked about issues that young people are facing as a result of substance use, students from three schools reported its effects on mental health. Some noted that it can impact a family dynamic and home environment. Most students said that using substances can hurt school performance. One group from a middle school brought up that students feel peer pressure both ways around substance use; they feel pressured to participate but also feel pressured to quit if they do engage in it. A few students shared that substance use could result in social isolation.

### **Question 3 – Where youth get substances**

Middle and high schoolers agreed that youth typically get alcohol from parents, family, and older friends or take it from their homes.

Youth reported that they typically get marijuana from older people in their lives. This includes parents, some who will purchase it for their children, and friends over the age of 21. Some high schoolers use fake IDs to go into stores that sell Delta8 products and purchase items that way.

Youth get tobacco products similarly to how they access marijuana. They get products from older friends, older siblings, or parents. Youth said some parents will purchase tobacco products for their children, and some youth steal them from family members. The participants also shared that some young people use fake IDs to purchase vapes and know what stores will not check IDs.

### **Question 4 – Where youth use substances and when**

For schools that identified alcohol as a widely used substance, they reported that alcohol is typically consumed at parties at friends' houses, sleepovers, or meet-ups with friends. One group of high school students shared that they use fake IDs to go into bars and drink alcohol there.

Youth explained that their peers typically use marijuana at home in their bedrooms or with friends after school. A few believe marijuana is being used in school bathrooms or in cars before school as well.

Every school noted that vapes are used in school bathrooms. Other times and places where vape and tobacco products are used include school locker rooms, in the school parking lot before and after school, in cars, at home, in their bedrooms, after school with friends, at a friend's house, and house parties. Students from 3 different schools said some peers "stealth vape," which means they vape in the classroom and exhale into their shirt or jacket to hide it.

### **Question 5 – Likelihood of being caught and consequences**

When it comes to getting caught with alcohol, students reported that it is unlikely that their peers would get caught because students do not bring it to school. If family members caught them, they would likely get their phone and/or car taken away.

Students from 3 schools reported that if a student uses marijuana, they are likely to be caught by teachers. One group explained that upperclassmen are most likely to be caught with marijuana as they do not try to conceal it as much as other grade levels might. This may be due to being mentally checked out of school and apathetic to consequences. Suspension or expulsion (for multiple offenses) was the

most mentioned consequence for marijuana use at school. Being caught with marijuana in the home was not of concern to some students as their families have normalized marijuana use.

Students' responses varied when asked about being caught with vapes. Some said they are not likely to be caught because they know how to hide it. Others said they are likely to be caught at school because teachers patrol bathrooms. Some shared that other students will report a student for vaping. School consequences for vaping include detention or suspension, which may include suspension from sports. Students said they are not very likely to be caught by parents and think the consequence at home would be grounding.

### **Question 6 – Family rules about substances**

When asked if their family has clear rules about alcohol, most students said they do. Some said no, and a few said, "not really."

At 3 of the 6 schools, all students in the focus group said "yes" when asked if their family has clear rules about marijuana. A few of the students who said yes explained that they know not to do it, but their families have not had conversations about it with them. At the other schools, most answered that they do have clear rules, but a few students said no. Those that said no explained that some parents do not care and believe marijuana is less harmful than vaping.

At 3 of the 6 schools, all students said their families have clear rules about vaping. The students at the other schools had mixed responses, with the majority saying yes. Those who said no explained that they had not yet had conversations about vaping with family members.

## **MENTAL HEALTH QUESTIONS**

### **Question 1 – Positive actions and recognition**

When asked about students being recognized for positive actions, half of the schools said they are recognized for positive actions, while the other half disagreed. At one middle school, they expressed that "nobody really cares" about positive action or recognition for it. For the schools that said there is recognition for positive actions, they shared the many ways it is shown. For some, they receive certificates or social media posts, while others have announcements over the intercom or emails sent out to the school staff, parents, and students. Many students from multiple schools reported that sports get more recognition than clubs.

### **Question 2 – Extra-curriculars**

The next topic in the focus group centered around students feeling welcome to participate in extra-curricular activities and clubs. This topic had a wide range of opinions. 2 schools reported that all students feel welcome to participate in activities and that there were no barriers. 3 of the schools said it depends on many factors. If someone thinks they are not good enough at a sport or activity, they might be afraid to join the group because they do not want to be picked on or made fun of. Another barrier is grade requirements – one school mentioned that a student must have below a certain number of absences and cannot have more than one "F" in a class. Another student shared that some clubs or

activities are seen as “weird,” which could make them a target for bullying if they participated. 1 school said that students do not feel welcome to join clubs or activities. The reasoning behind this also led back to bullying – saying that if a student did not look the part or the activity was not what “popular kids” were doing, they were more likely to become a target of bullying.

### **Question 3 – Belonging**

When asked what keeps youth from feeling like they belong, one school felt that there is nothing at their school to make people feel like they do not belong. The other 5 schools had different thoughts. A common theme among 4 of the schools were topics like differing political beliefs, racism, sexism, and homophobia. Lack of respect for others and bullying, specifically about one’s appearance, also came up. One group of students shared that some teachers who observe this behavior choose to ignore it, which the students feel contributes to bullying and lack of belonging.

### **Question 4 – Activities and Substance Use**

There were many different perspectives when asked if students involved in school activities were more or less likely to use substances than students not involved. About half of the students said involved students are less likely to use substances because they have less free time and a solid support system, they are set to a higher standard, and have more severe repercussions like being suspended or kicked off the team. However, one school mentioned that students who are a part of sports, namely football, are typically excused for using substances because of their role on the team. The other half of the students felt that people involved in activities are more likely to use substances. One school shared that students might do this due to having a lack of downtime and wanting to feel “happy” or “relieved.” A different group of students felt that having the added pressure and stress of being in a school activity could cause students to “self-medicate” with substances. Another shared that there is peer pressure to look “cool,” so they are more inclined to use substances.

### **Question 5 – Challenges regarding mental health**

Students had a wide range of thoughts when asked about the challenges teens are facing regarding mental health. Some shared that they do not know who to talk to about these issues. Many students reported that stress and anxiety related to schoolwork and grades was a significant challenge for most of their peers. Having a lack of free time for activities and homework was also mentioned as a factor in the mental health of students. They shared that time management and having a lot on their plate with school, clubs, and work can be overwhelming. Some students feel a lack of confidence in their body image, appearance, and feel left out, disconnected, and like they do not belong. Peer pressure, bullying, and stress with friends also take a toll on the mental health of students. Students also shared that family issues, home life, and pressure from parents and themselves to do well factor into mental health challenges. One student shared that they wish there was more education on trauma and how it can impact students.

### **Question 6 – Who youth can talk to**

One of the first challenges students identified with their mental health is not knowing who to talk to about these issues. Students at half of the schools said they do have someone to talk to, such as parents, friends, teachers, counselors, or siblings. One student shared that they know they have people to talk to but will not reach out. They are uncomfortable talking to teachers and other school staff about things because they feel the information will be shared with other staff or their parents. They do not feel comfortable going to their parents because of the fear of punishment, judgment, and disappointment. Some students said they do not want to burden their parents with their own issues and often, parents do not understand. Students at one school reported that if they are struggling with depression or anxiety, they would feel comfortable going to an adult in the school, but do not trust the adults to know how to handle other mental health challenges. Overall, students explained that they feel most comfortable going to friends or siblings because of their closeness in age and believe they have a better understanding of their challenges.

### **Question 7 – What impacts mental health**

When asked what impacts mental health among peers, students shared many different factors that fell into the categories of home life, peer relationships, and school. Students mentioned home life experiences, family issues, living with parents with mental health challenges, and having high expectations from family members all factor into their mental health. Peer relationships are another stressor, which can include bullying, having “drama” within friend groups, peer pressure, feeling like they do not belong, and the stress of social media. School-related stressors include grades, workload, holding certain expectations for themselves, exams, and being able to manage everything. One group of students shared that the fear of a school shooting impacts their mental health as they do not feel safe in their school.

### **Question 8 – Barriers to get mental health help**

Students discussed barriers to getting help with mental health. One barrier that was mentioned at all schools was the stigma around mental health. Some students said they would feel embarrassed, are afraid they would get bullied, do not want parents to find out, are afraid of how others might view them, or think their problems are unimportant. One student reported that the stigma around mental health in men is still very prevalent and may prevent them from reaching out. Students mentioned that getting bullied or having parents find out about their challenges might make the problem worse. Some students who had reached out to counselors in the past said they would not reach out again because the counselor notified parents which affected their relationship. Students also shared that not knowing who to trust or go to for help might act as a barrier to receiving help. One school reported that money can be a barrier to receiving help for their mental health.

### **Question 9 – Barriers to getting substance use help**

Students shared some of the barriers to reaching out for help with substance use. Every school had students who reported a fear of getting in trouble or being punished either at school or in their home. Students at one school mentioned that they have been told that reaching out for help will not get them in as much trouble, but they still understand that it is against the law and will result in repercussions.

Students are also concerned with disappointing parents and other family members if they share that they are struggling with substance use. The last barrier students reported is their peers not identifying that they need help. Some young people do not believe they have an addiction or do not want to admit that they are addicted and might need help. Some young people believe that using substances helps them, so they are not interested in seeking help.

#### **Question 10 - Other issues related to mental health or substance use**

Students at two schools reported that lack of teacher intervention is an issue at their schools. Bullying might happen in front of teachers, and they ignore it or do not take steps to address the situation. Students from one school shared that suicide is not taken seriously and some students make fun of others if they know that they have attempted suicide. If students are disciplined with detention, most young people do not view it as a punishment, and focus group members do not believe it leads to any behavior change. Students also noted that body image and appearance play a big role in a young person's mental health. Some students shared their struggles with body dysmorphia. They also mentioned that there is a beauty standard to be part of certain friend groups. One group of high schoolers reported that they need more resources for students who adults might not expect to need mental health support, such as students who are involved in activities, have strong relationships, and have good grades.

#### **Question 11 - Possible changes**

Students made the following suggestions –

- More resources and education on substance use and mental health
- Create a safe plan with a person to go to, a place to go to, and tactics
- Stricter tobacco sale laws
- Fines for littering tobacco products
- Change the mindset in older populations
- Less stigma
- Hang up posters to educate on the harms of substance use
- Raise awareness
- Have teachers address bullying
- Exposure to other races and cultures to eliminate racism
- More severe punishments in school
- More education in school about suicide prevention
- Limit the number of students in the bathroom at a time

## **Douglas County Prevention Initiatives**

### **Progress Update**

**July 1<sup>st</sup>- September 30<sup>th</sup>, 2024**

#### **Engage Douglas County**

Engage Douglas County met as a coalition on August 29<sup>th</sup> and September 26<sup>th</sup>. Workgroups met during the following days:

- Eudora- 8/13, 9/10
- Suicide Prevention- 7/23

On August 29<sup>th</sup>, the coalition met in person. Partner updates and upcoming events were shared. The Eudora workgroup shared about the upcoming Eudora Community Needs Assessment and Embrace Eudora Health Fair. The Suicide Needs Prevention workgroup shared their upcoming student-led art campaign for Suicide Prevention Awareness Month.

On September 26<sup>th</sup>, the coalition met virtually. Partner updates and upcoming events were shared, and the coalition reviewed the youth focus group that took place in Spring 2024. The group talked about the role of adults and parents in the lives of youth. The group shared they are also interested in understanding the disparities between larger and smaller schools, rural and urban schools, etc.

#### **YEP!**

YEP! held their kickoff event on September 17<sup>th</sup>, where they completed a Sources of Strength training with food and games. They had 129 students in attendance, including representation from each public middle and high school in Douglas County. They'll have their first county meeting of the year on October 8<sup>th</sup> so that the students can learn from each other and get ideas about spreading the message of YEP!. The Youth Empowerment Summit (YES) is scheduled for October 22<sup>nd</sup>. YES is a one-day summit event where students learn about substance use prevention, suicide prevention, and healthy relationships. The Keynote speaker is DA Valdez who will talk about being a leader and changemaker in the community.

Four YEP! students attended the CADCA Mid-Year in Chicago from July 14 to 18. The four students represented Eudora Middle and High School.

#### **KDADS Suicide Prevention Grant**

DCCCA/Engage Douglas County was awarded a grant from the Kansas Department for Aging and Disability Services to carry out suicide prevention initiatives in Douglas County. The funding is available through April 2025.



Student-Led Art Campaign: For September Suicide Prevention Awareness Month, the Engage Douglas County Suicide Prevention Needs workgroup created a student-led art campaign called “Stories We Tell Ourselves,” which provided a space for youth in grades 6-12 to submit artwork or poetry, expressing their feelings about mental health. The schools, social media, and Engage Douglas County website promoted the campaign. There was a total of 5 artwork pieces submitted for the campaign. The webpage for the art campaign had 763 views, and the form for the submission was viewed 33 times.

Leading Causes of Life 5k and Festival: The Suicide Prevention and Awareness event will be the second annual Leading Causes of Life 5k and Festival on April 26th. In August, the Special Use Permit Application was submitted for using Broken Arrow Park, and Anabel met with the Parks and Recreation Department to finalize the event's layout. The Engage Douglas County coalition will form a subcommittee to oversee event planning and coordination.

Lock Bags: 166 lock bags have been purchased, and distribution has already begun.

Medication Disposal: 5 cases of medication disposal bags have been purchased, with distribution underway.

Youth Mental Health First Aid: Plans are in progress to schedule four sessions.

- Perry Lecompton- November 8<sup>th</sup>
- Eudora- Date TBD

### **Other Partnership Collaboration**

Engage Douglas County participated in the new podcast, CocoonChat, which discussed Engage Douglas County and the YEP! program. The podcast is scheduled to record two YEP! students to talk about their experience with YEP! on October 9<sup>th</sup>.

DCCCA participated in Wellness Wednesdays at the Lawrence Shelter, providing Naloxone kits (16).

DCCCA provided \$200 stipends for five Elementary Schools: Eudora, Sunset Hill, Cordley, Hillcrest, and Woodlawn, for Red Ribbon Week activities.

DCCCA/Engage Douglas County created a webinar on collaboration and drug-free alternatives for youth in collaboration with Baldwin City Recreation Commission and DFC. The topic is Parks and Recreation collaboration with CDC’s Drug-Free Communities (DFC) Support Program.

### **Douglas County Behavioral Health Prevention Summit**

DCCCA/Engage Douglas County hosted a Douglas County Behavioral Health Prevention Summit. An in-person kickoff event was planned for September 4<sup>th</sup> at the KU Memorial Ballroom. Due to

low registration, the in-person event was canceled. The virtual sessions continued as scheduled. There were 38 registrants for the virtual sessions.

- Tuesday, September 10<sup>th</sup> - 12 PM - HealthSource- Monica Kurz: 988 and Suicide Prevention
- Thursday, September 12<sup>th</sup> – 6 PM - Sources of Strength- Lydia Fuqua: Elementary Sources of Strength Overview
- Tuesday, September 17<sup>th</sup> - 12 PM - Evolve MD/ DCCCA Medical Provider- Dr. Anthony J. Strickland: MAT Presentation
- Thursday, September 19<sup>th</sup> – 6 PM - Screen Sanity- Abby Doyle: Parents and Community Roadmap to Social Media/Smartphone Use
- Tuesday, September 24<sup>th</sup> – 12 PM - ThYrve- Dr. Jomella Watson-Thompson: ThrYve (Together Helping Reduce Youth Violence Through Equity): Preventing Youth Violence through Multisector Collaboration
- Thursday, September 26<sup>th</sup> – 6 PM - PAX Director- Jeanette Puskas: PAXIS: PAX Tools= Evidence-based Programming Across the Youth System of Care

Speaker gifts have been purchased and will be sent to all speakers for the event. The sessions' recordings will be posted to the Engage Douglas County website.

Survey Results: [https://www.surveymonkey.com/results/SM-ixMhAl\\_2BY4QERpl76ptXKEA\\_3D\\_3D/](https://www.surveymonkey.com/results/SM-ixMhAl_2BY4QERpl76ptXKEA_3D_3D/)

### **Training**

- 9/16/2024- Four DCCCA staff were trained in PAX Good Behavior Game
- 9/26/2024-9/27/2024- School-Based Prevention Specialists were trained in the PAX Partner Good Behavior Game

### **Pharmacy Initiatives**

Between July 1st and September 30th, 69.30 pounds of medication were returned to MedSafe from our Douglas County pharmacies to be destroyed. Two MedSafe liners were provided to Watkins Health Center on July 19<sup>th</sup>, and 4 MedSafe liners were provided to Jayhawk Pharmacy on July 8<sup>th</sup>.

**Resource Distribution:**

**Naloxone (SOR Funded)**

<b>Agency</b>	<b>Number of Naloxone Kits</b>	<b>Date</b>
DCCCA	12	7/16/2024
Lawrence Community Shelter	16	7/31/2024
Transit Center Vending Machine	119	8/05/2024
Transit Center Vending Machine	167	9/10/2024
Embrace Eudora Health Fair	2	9/21/2024
KU Pharmacy School	199	9/26/2024
Douglas County Parent Class	9	9/30/2024

**Deterra Bags**

<b>Agency</b>	<b>Number of Bags</b>	<b>Date</b>
Bert Nash Community Resource Fair	20	9/12/2024
Embrace Eudora Health Fair	6	9/21/2024
Bert Nash Treatment and Recovery Center	50	9/26/2024
DCCCA- Behavioral Health Department	75	9/26/2024
Douglas County Parent Class	9	9/30/2024

**Lock Bags**

<b>Agency</b>	<b>Number of Bags</b>	<b>Date</b>
DCCCA	3	8/29/2024
Bert Nash Treatment and Recovery Center	20	9/26/2024

**Gun Locks**

<b>Agency</b>	<b>Number of Gun Locks</b>	<b>Date</b>
Bert Nash Community Resource Fair	12	9/12/2024
Douglas County Parent Class	9	9/30/2024

## **Douglas County Prevention Initiatives**

### **Progress Update**

**October 1<sup>st</sup>- December 31<sup>st</sup> 2024**

#### **Engage Douglas County**

Engage Douglas County met as a coalition on October 24<sup>th</sup> and November 21<sup>st</sup>. Workgroups met during the following days:

- Eudora- 11/12, 12/10
- Douglas County Action Plan- 12/19

On October 24<sup>th</sup>, the coalition met in person. Partner updates were shared, and upcoming community events were highlighted. The Suicide Needs Prevention reviewed the five student submissions from the student-led art campaign. Additionally, the group discussed plans for the upcoming Drug Take Back Day, and the availability of medication disposal bags and lock meds for Douglas County residents.

On November 21<sup>st</sup>, the coalition met virtually. Partner updates and upcoming events were shared, and the coalition reviewed the CHP strategies for prevention. Discussed an action plan being developed specifically for the Douglas County work and recruited coalition members to assist.

Douglas County Action Plan: On 12/19, several coalition members convened as a committee to review the updated CHP strategies, including initiatives for relationship violence prevention, truancy prevention, prescription medication safety, vaping prevention, and suicide prevention. A comprehensive Douglas County Action Plan is being developed to prioritize the focus areas for 2025.

#### **YEP!**

This year's Youth Empowerment Summit (YES) was held on October 22<sup>nd</sup> at Flory Hall. We had 49 youth in attendance from a variety of middle and high schools in the county. Students learned about fentanyl and opioids, mental health, and healthy relationships from a variety of speakers. We also had DA Susanne Valdez give a great keynote speech during lunch, during which she shared the meaning of empowerment and the importance of making an impact in the community. Students then had the opportunity to pick an issue they see in their schools and create an action plan to address it. Throughout the day, students also got to connect with local resources like The Willow Domestic Violence Center, #BeMoreLikeClaire, HeadQuarters Kansas, Bert Nash, Lawrence-Douglas County Health Dept, KDADS, Boys & Girls Club, Kansas Youth Advisory Council, and Engage Douglas County.

Four students from Eudora received the Culture of Health Award through LiveWell Douglas County for their work with vape disposal boxes. Next YEP! County meeting is in January. Eudora, YEP! did a food drive and received over 1,000 items to donate.

**Engage Douglas County Media**

**October:**

Total Reach	7036
Total Impressions	7825
Total Posts Sent	21
Total Profile Visits	203
Total Engagements	487
Total Website Visits	348
Total Website Visitors	275

**November:**

Total Reach	821
Total Impressions	1236
Total Posts Sent	12

Total Profile Visits	62
Total Engagements	464
Total Website Visits	230
Total Website Visitors	197

**December:**

Total Reach	1037
Total Impressions	2300
Total Posts Sent	28
Total Profile Visits	55
Total Engagements	487
Total Website Visits	246
Total Website Visitors	214

### **KDADS Suicide Prevention Grant**

Leading Causes of Life 5K and Festival: Planning for the 5K and festival is underway, with a committee meeting monthly to coordinate and refine event details. We've secured two food trucks, Barbwire Barbeque and Uplift Coffee, with Ragusa's currently in the reservation process. The event has been promoted in newsletters, and a flyer has been distributed to the coalition for sharing. MERC is donating post-race snacks and bottled water; a balloon arch has also been contributed to the festival. SWAG items have been purchased to include in the tote bag for every registrant. Currently, there are 96 registrations for runners/walkers and 6 vendor registrations.

Youth Mental Health First Aid:

- Perry Le-Compton- November 8<sup>th</sup> (Canceled) In progress for 2025
- Eudora- Tentative March 14<sup>th</sup>
- Baldwin- Baldwin Library TBD
- Lawrence- January 31<sup>st</sup>

### **Other Partnership Collaboration**

Engage Douglas County participated in a panel discussion, sharing insights about the coalition's funding strategies and sustainability efforts at the Kansas Prevention Coalition Conference.

Engage Douglas County partnered with Haskell University for the second annual Wellbriety Wellness Walk, bringing awareness to substance use prevention with around 100 attendees, including students and community members.

Substance Use Prevention Presentations with Van Go:

- On 10/22, the presentation focused on alcohol prevention and discussed naloxone with 20 attendees.
- On 11/15, participants utilized VR headsets to experience scenarios simulating overdose situations, providing an interactive training experience with 9 attendees.

### **Training**

<b>Agency</b>	<b>Type of Training</b>	<b>Number of Attendees</b>	<b>Date</b>
KU Psych533 Class	Overdose & Naloxone	26	10/08/2024
YEP!	Opioids/Fentanyl Prevention	49	10/22/2024



Boys & Girls Club	Vaping Presentation	36	10/23/2024
Cromwell Environmental	Overdose & Naloxone	25	11/05/2024
Lawrence High School	Vaping Presentation	175	11/06/2024
Lawrence High School	Vaping Presentation	175	11/07/2024
KU Women in Medicine Club	Overdose & Naloxone	18	11/21/2024

**Pharmacy Initiatives**

Between October 1<sup>st</sup> and December 31<sup>st</sup>, 41.25 pounds of medication were returned to MedSafe from our Douglas County pharmacies to be destroyed.

The Lawrence Police Department contacted DCCA in inquiry for the placement of a MedSafe. The MOU has been signed with the LPD, the MedSafe has been purchased and is in the process of shipment at 5100 Overland Drive, Lawrence, Kansas 66049

**Resource Distribution:**

**Naloxone (SOR Funded)**

Agency	Number of Naloxone Kits	Date
Transit Center Vending Machine	192	10/24/2024
Haskell Red Road Sobriety Walk	12	10/24/2024
Lawrence Public Library	36	11/2/2024
Transit Center Vending Machine	153	11/26/2024

**Deterra Bags**

Agency	Number of Bags	Date
#BeMoreLikeClaire	4	10/01/2024
Lawrence Public Library	38	11/02/2024
Perry Le-Compton Schools	50	11/25/2024
Boys and Girls Club	3	12/06/2024

Heartland Community Health Center	10	12/31/2024
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### Lock Bags

Agency	Number of Bags	Date
#BeMoreLikeClaire	3	10/01/2024
DCCCA	1	10/04/2024
DCCCA	1	10/22/2024
Lawrence Public Library	44	11/2/2024
Oxford House	2	12/16/2024

### Fentanyl Test Strips

Agency	Number of Gun Locks	Date
Bert Nash CMHC	100	10/04/2024
Lawrence Public Library	15	11/02/2024

### Gun Locks

Agency	Number of Gun Locks	Date
Boys and Girls Club	7	12/06/2024



Heartland Regional Alcohol & Drug Assessment Center (RADAC)

Website- [hradac.com](http://hradac.com)

[Click here to return to list of community partners](#)

**Heartland RADAC  
Intensive Care Coordination (ICC) Douglas County  
Quarterly Summary: October-December 2024**

***ICC Douglas County – Client Success Story***

Beth (not real name) was referred to ICC services from Bert Nash’s intake coordinator. Beth was in the lobby in crisis presenting with auditory and visual hallucinations and having difficulty walking. The on-call ICC was able to meet with Beth immediately, obtained a wheelchair and walked her to TRC for mental health support. Beth had been at TRC, LMH ED, and Missouri emergency departments on multiple occasions within the past few months, seeking connection to needed resources. Initially, Beth was slow to build rapport due to her mental acuity and extensive history of trauma. The Care Coordinator (CC) quickly learned that Beth was a Veteran, identified as transgender, had physical health issues with her feet and legs making it difficult to walk, and a trauma history that included domestic violence. Beth was actively using Methamphetamine, marijuana and was homeless. She also was receiving SSI/SSDI but was unable to identify where the money was being deposited.

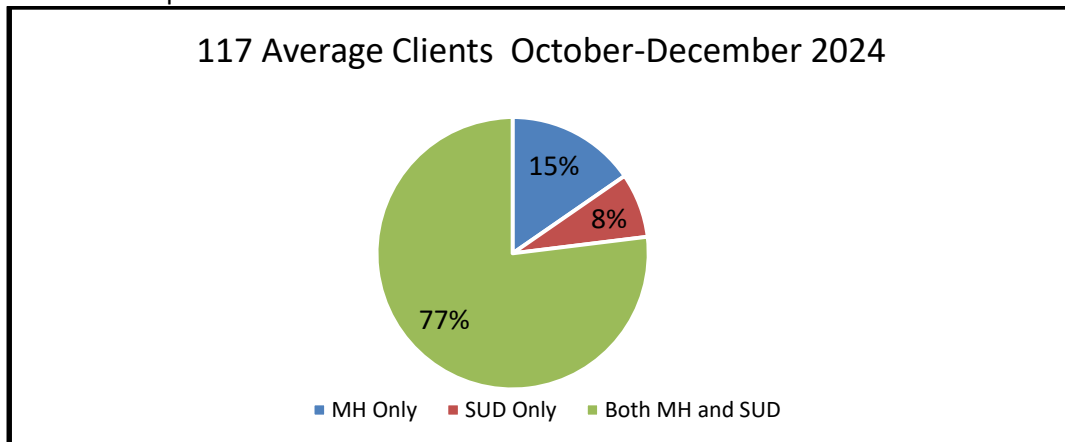
Beth and the CC set several initial goals including securing safe and sober housing, connecting to the VA for services, locating her SSI/SSDI money, and addressing her physical health issues. Beth participated with her CC on a regular basis, however, her follow through with community partners was sporadic. Barrier reduction funds were utilized on multiple occasions to provide transportation via uber to needed appointments, obtain identification, and to assist in obtaining medications. Through multiple efforts of collaborating with community partners, Multi- Team Meetings were facilitated to address Beth’s care and included KDADs, KSHC, Bert Nash and the VA. Beth now has solid wrap around services in place and is accessing them with more consistency.

Beth’s veteran status was confirmed which connected her to VA benefits including a VA navigator. She obtained a Medicaid waiver, located her SDI/SSDI money and was connected to housing. She was also connected to Bert Nash, and Heartland Health Clinic to address her physical health needs. Beth also began actively working with a Recovery Coach for support in recovery, life skills development and building healthy relationships. She is also working to resolve legal issues from prior citations.

Since engaging in ICC services, Beth’s need to access crisis centers and Eds has been reduced dramatically. She continues to work with her Recovery Coach to establish pro-social activities. She reports experiencing a sense of safety and security she has not felt in many years.

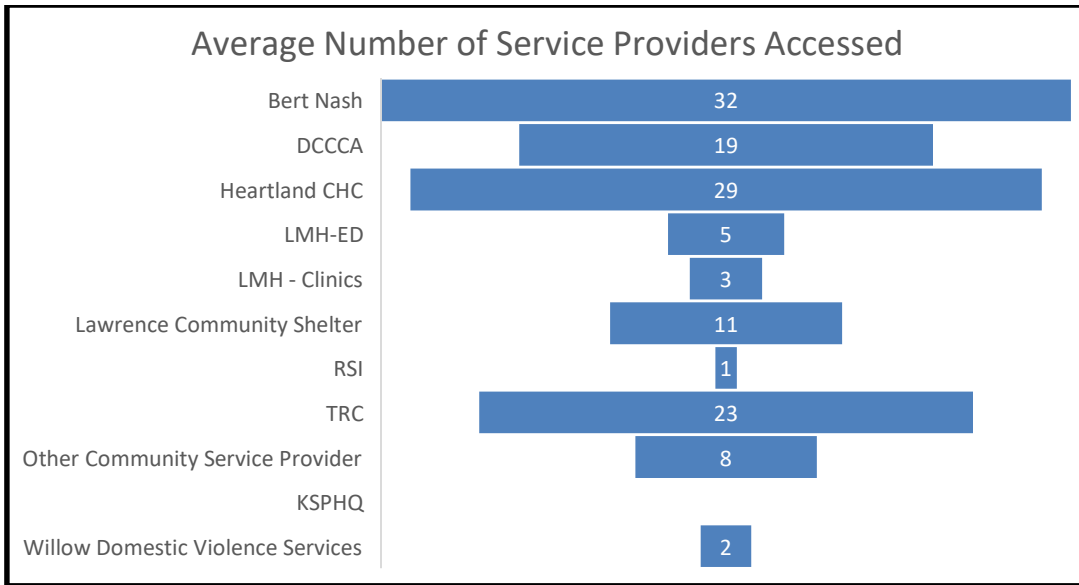
***Client Engagement-ICC & ICM Services***

In the fourth quarter calendar year 2024, 174 unduplicated clients served in received ICC services in Douglas County, an average of 117 clients per month. Of those, an average of 77% had co-occurring substance use and mental health issues. Eighty-six percent (86%) on average were residents of Douglas County, the remaining fourteen percent (14%) referred from one of the ICT partners.



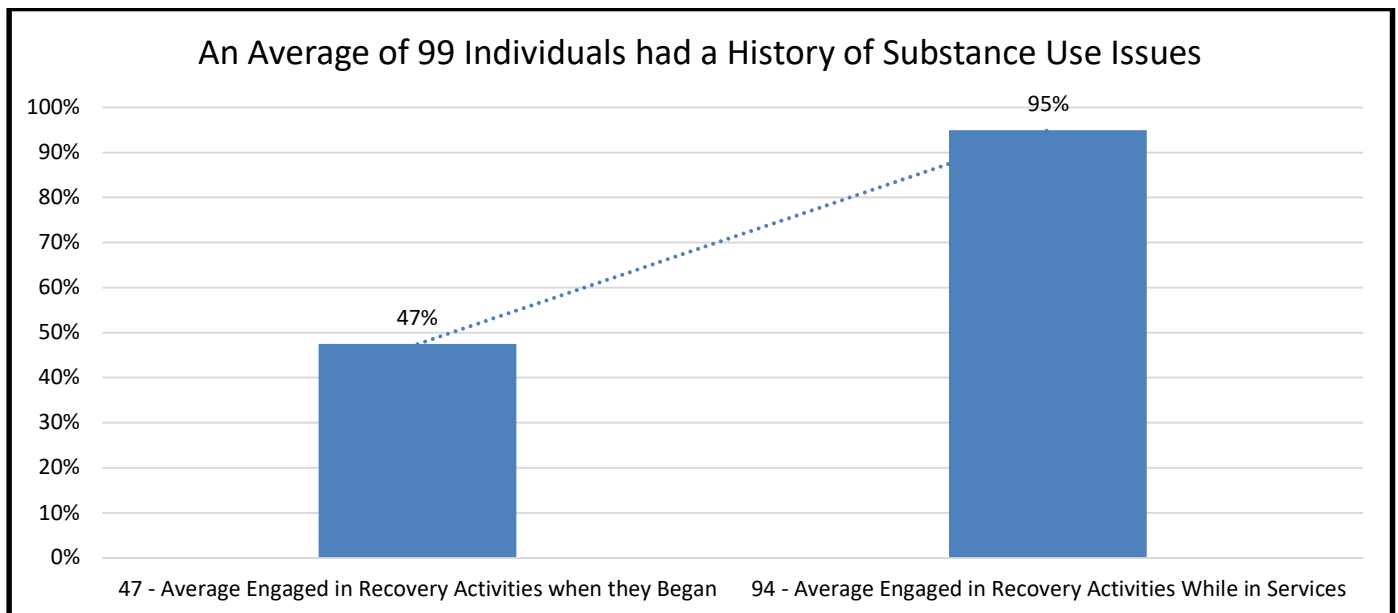
### Service Integration: ICC Clients are Linked Douglas County Partners

ICC clients are linked to service providers in Douglas County. The following graph represents an average number of clients who accessed these providers each month.



### Recovery Measures

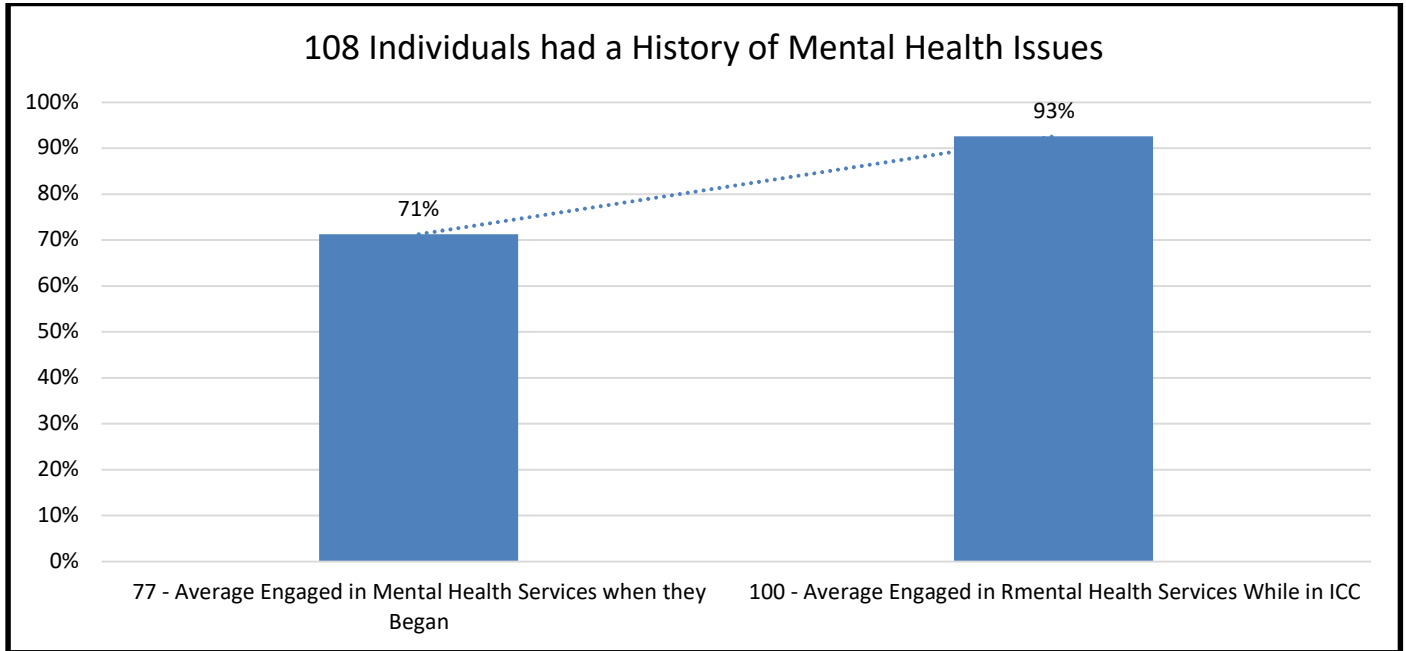
ICC/ICM clients are linked to recovery services and activities such as SUD Treatment, Detox, 12-Step and other community support groups, Medication Assisted Treatment (MAT) and Recovery Coaches. Heartland RADAC measures engagement at the beginning of service, during a reporting period, and “if ever” engaged in recovery activities since services began. During the fourth quarter of 2024, an average of 99 individuals reported a history or substance use or both substance use and mental health issues. Of those, an average of 95% (94) engaged in Recovery Activities since services began.



### Mental Health Measures

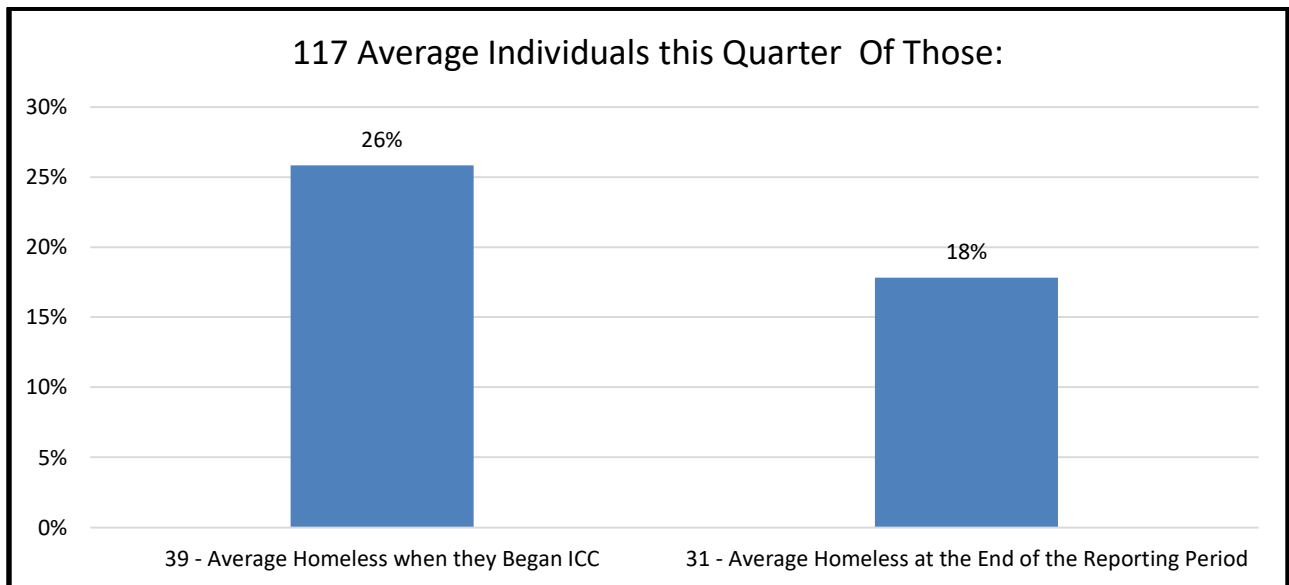
ICC/ICM clients are linked to Mental Health services at Bert Nash, Heartland Community Health Center and other providers. Heartland RADAC measures engagement at the beginning of service, during a reporting period, and “if ever” engaged in mental health activities since services began. During the fourth quarter of 2024, an average of 108

individuals receiving services reported a history of mental health issues or both mental health and substance use issues. Of those, 93% have accessed Mental Health services since CC/CM began.



### Housing Measures

Housing issues are addressed with all ICC/ICM clients to ensure they have safe housing. Housing status is documented at the beginning of service and the end of reporting period. Since clients housing status can change throughout services, Heartland RADAC also documents "if ever housed" since services began.



	January	February	March	April	May	June	July	August	September	October	November	December	Calendar Yr 2024
<b>Referrals (all)</b>													
DCCCA	4	6	4	18	12	15	11	7	7	17	11	11	123
SUD TX Provider (Other than DCCCA)	0	0	0	0	0	0	0	0	0	0	3	0	3
Heartland CHC	3	4	2	1	4	2	5	3	5	7	2	1	39
HRADAC	7	6	6	7	11	10	4	7	5	6	7	7	83
LMH-Hospital	11	12	11	7	9	8	8	15	8	6	6	13	114
LMH-ED	7	7	7	5	12	13	8	9	2	2	4	10	86
LMH - Clinics	6	7	5	7	6	7	4	7	3	1	2	5	60
LMH- OBGYN	0	1	0	0	1	0	0	1	0	0	0	0	3
Bert Nash	5	3	1	3	7	6	6	1	5	2	0	2	41
Lawrence Community Shelter	7	9	4	2	4	1	3	1	0	0	1	1	33
Houseless Camps/Pallets	0	0	0	0	0	0	0	0	0	0	0	0	0
Familiar Faces	1	0	0	0	0	0	0	0	0	0	0	0	1
Criminal Justice System - Jail	0	0	0	0	0	0	0	0	0	0	0	0	0
Criminal Justice System - Court Service / Community Corrections	1	2	3	3	1	2	2	2	0	1	1	1	19
Criminal Justice System - Law Enforcement	1	0	0	1	0	0	0	0	1	0	0	1	4
Douglas County Fire and Med	1	1	1	2	1	0	0	0	0	0	0	0	6
Douglas County Government*	0	0	0	0	0	0	0	3	0	0	0	0	3
Self	3	1	5	0	4	0	5	4	5	2	5	3	37
RSI	0	0	0	1	0	0	0	0	0	0	0	0	1
TRC	29	23	26	21	16	23	30	22	47	43	37	28	345
Other	1	9	6	4	9	7	5	2	4	2	1	3	53
<b>Total</b>	<b>87</b>	<b>91</b>	<b>81</b>	<b>82</b>	<b>97</b>	<b>94</b>	<b>91</b>	<b>84</b>	<b>92</b>	<b>89</b>	<b>80</b>	<b>86</b>	<b>1054</b>
Total New Clients	35	40	44	41	38	33	35	26	29	21	20	28	
%	40%	44%	54%	50%	39%	35%	38%	31%	32%	24%	25%	33%	

\*Added back in August 2024

2024 Annual Data	January	February	March	April	May	June	July	August	September	October	November	December	Total Average YTD	Total Unduplicated	% Unduplicated
<b>Client Engagement</b>															
<b>Client Volume</b>															
Total Clients	154	186	189	198	195	209	163	146	143	126	104	121	161	634	100%
Total New Clients	35	40	44	41	38	33	35	26	29	21	20	28	33	394	62%
Total Inactive Clients - <= 90 Days	190	172	93	80	76	52	103	95	44	28	79	45	88	71	
Total Discharged Clients	94	66	139	14	46	31	41	50	50	45	34	46	55	466	74%
*Average Case Load Size	26	31	32	33	33	35	33	29	29	25	21	24	29	127	
Total Douglas County Residence	143	174	182	187	180	187	146	130	127	111	89	103	147	562	89%
<b>Total Engaged During The Month</b>	<b>154</b>	<b>186</b>	<b>189</b>	<b>198</b>	<b>195</b>	<b>209</b>	<b>163</b>	<b>146</b>	<b>143</b>	<b>126</b>	<b>104</b>	<b>121</b>	<b>161</b>	<b>634</b>	<b>100%</b>
<b>Referral Source</b>															
DCCCA	8	8	9	17	26	35	33	27	29	30	29	31	24	96	15%
SUD TX Provider (Other than DCCCA)	6	6	7	6	8	5	4	4	5	7	6	6	6	22	3%
Heartland CHC	5	4	4	6	7	9	8	6	7	10	10	10	7	26	4%
HRADAC	2	4	10	10	9	11	11	7	6	5	4	7	7	26	4%
LMH-Hospital	9	15	10	7	8	11	8	11	7	4	2	4	8	43	7%
LMH-ED	3	4	3	3	5	5	5	6	6	1	0	0	3	23	4%
LMH - Clinics	11	10	10	8	11	15	7	5	4	5	0	2	7	39	6%
LMH- OBGYN	2	3	3	3	2	1	1	1	0	0	0	0	1	4	1%
Bert Nash	13	15	15	13	13	18	10	9	9	10	6	5	11	50	8%
Lawrence Community Shelter	15	19	14	13	9	10	4	4	3	1	1	2	8	36	6%
Houseless Camps/Pallets	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0%
Douglas County Govt/My RC Algorithm	1	1	0	0	0	1	0	1	1	0	1	1	1	2	0%
Criminal Justice System - Jail	0	1	0	0	0	0	0	0	0	1	0	0	0	2	0%
Crim Justice System - Court Service / Community Corrections	16	17	20	15	16	5	4	9	8	3	0	4	10	33	5%
Law Enforcement - Criminal Justice System - Other	2	4	4	9	3	10	8	1	2	4	3	1	4	11	2%
Douglas County Fire and Med	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0%
Self	11	13	16	16	17	15	14	14	15	9	5	12	13	46	7%
RSI	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0%
TRC	44	57	60	66	57	57	42	36	37	32	33	33	46	149	24%
Other	6	5	4	6	4	1	4	5	4	4	4	3	4	25	4%
<b>Total</b>	<b>154</b>	<b>186</b>	<b>189</b>	<b>198</b>	<b>195</b>	<b>209</b>	<b>163</b>	<b>146</b>	<b>143</b>	<b>126</b>	<b>104</b>	<b>121</b>	<b>161</b>	<b>634</b>	<b>100%</b>
<b>Behavioral Health Presenting Issue</b>															
MH	29	36	31	31	33	44	27	22	21	19	15	20	27	122	19%
SUD	10	14	17	18	18	16	15	9	6	8	10	9	13	50	8%
Both	115	136	141	149	144	149	121	115	116	99	79	92	121	462	73%
<b>Total</b>	<b>154</b>	<b>186</b>	<b>189</b>	<b>198</b>	<b>195</b>	<b>209</b>	<b>163</b>	<b>146</b>	<b>143</b>	<b>126</b>	<b>104</b>	<b>121</b>	<b>161</b>	<b>634</b>	<b>100%</b>
Total Presenting with Mental Health Issues	144	172	172	180	177	193	148	137	137	118	94	112	149	584	92%
Total Presenting with Substance Use Issues	125	150	158	167	162	165	136	124	122	107	89	101	134	512	81%
<b>LOS in Service</b>															
<=90 Days	87	100	114	120	115	105	102	82	87	68	59	65	92	93	15%
91-180 Days	41	56	36	40	50	66	42	47	33	36	25	37	42	270	43%
181-365	19	22	30	30	24	32	14	9	14	14	14	14	20	231	36%
1-2 Years	5	6	7	6	5	5	4	7	8	7	5	4	6	35	6%
> 2 Years	2	2	2	2	1	1	1	1	1	1	1	1	1	5	1%
<b>Total</b>	<b>154</b>	<b>186</b>	<b>189</b>	<b>198</b>	<b>195</b>	<b>209</b>	<b>163</b>	<b>146</b>	<b>143</b>	<b>126</b>	<b>104</b>	<b>121</b>	<b>161</b>	<b>634</b>	<b>100%</b>
<b>Average</b>	<b>117</b>	<b>117</b>	<b>115</b>	<b>115</b>	<b>110</b>	<b>121</b>	<b>97</b>	<b>110</b>	<b>114</b>	<b>120</b>	<b>124</b>	<b>120</b>	<b>115</b>	<b>189</b>	



<b>Recovery Measures**</b>															
Engaged in Recovery Activities at Beginning	38	41	51	51	57	69	59	48	50	49	41	52	51	197	38%
Engaged in Recovery Activities Since ICC Began	111	125	136	146	148	158	128	111	114	102	84	96	122	486	95%
Substance Use Assessment Completed	60	125	76	150	85	99	82	64	63	58	52	48	80	281	55%
SUD Treatment Accessed Since Service Began	43	72	62	58	66	81	60	52	52	47	43	53	57	236	46%
Worked with a Peer Mentor	64	76	88	107	104	116	83	72	78	65	55	58	81	330	64%
Community Support Group (e.g. 12-Step)	57	64	72	75	80	89	76	67	69	60	51	65	69	276	54%
Medication Assisted Treatment (MAT)	18	19	8	19	20	21	14	14	21	23	17	19	18	81	16%
<b>Mental Health Measures***</b>															
Engaged in MH at Beginning				119	118	125	100	89	94	84	67	81	97	367	63%
Accessed MH Since Service Began				160	159	174	135	122	123	108	91	100	130	498	85%
<b>Physical Health Measures</b>															
Engaged in PH at Beginning				85	91	98	80	69	72	67	49	57	74	286	45%
Engaged in PH Since Service Began				47	37	75	54	55	55	41	33	31	48	232	37%
<b>Housing Measures</b>															
Beginning of Service															
Homeless				96	88	93	69	59	50	39	36	41	63	256	40%
Transitional				23	28	34	27	26	30	26	17	22	26	101	16%
Permanent				79	79	82	67	61	63	61	51	58	67	277	44%
<b>Total</b>				<b>198</b>	<b>195</b>	<b>209</b>	<b>163</b>	<b>146</b>	<b>143</b>	<b>126</b>	<b>104</b>	<b>121</b>	<b>634</b>	<b>100%</b>	
End of Reporting Period															
Homeless				78	71	75	50	45	39	34	28	31	50	206	32%
Transitional				28	38	40	30	30	31	22	20	23	29	108	17%
Permanent				92	86	94	83	71	73	70	56	67	77	320	50%
<b>Total</b>				<b>198</b>	<b>195</b>	<b>209</b>	<b>163</b>	<b>146</b>	<b>143</b>	<b>126</b>	<b>104</b>	<b>121</b>	<b>634</b>	<b>100%</b>	
Ever Housed				128	135	146	118	107	110	100	80	94	113	469	74%
<b>Stabilization Measures</b>															
Accessed State Hospital				3	0	4	1	1	3	0	0	1	1	5	1%
Accessed ER				23	23	17	15	15	19	4	6	1	14	113	18%
Admitted to Psych Hospital/Unit				4	3	3	1	1	4	1	1	1	2	19	3%
Accessed a Community Crisis Stabilization Center				56	43	44	28	24	40	25	28	33	36	200	32%
Accessed Community Hospital				6	3	5	3	3	10	2	1	1	4	47	7%
<b>Accessed Crisis Partner This Month</b>															
Bert Nash				66	68	81	56	47	45	38	21	36	51	278	44%
DCCCA				33	31	40	31	34	33	22	12	23	29	152	24%
Heartland CHC				33	35	41	38	37	52	29	22	36	36	177	28%
LMH-ED				16	18	16	14	12	10	7	4	5	11	117	18%
LMH - Clinics				14	11	10	7	4	4	3	1	6	7	72	11%
Lawrence Community Shelter				47	32	37	28	20	20	13	9	10	24	132	21%
RSI				1	1	1	1	0	1	1	1	1	1	4	1%
TRC				51	41	44	29	19	20	24	25	19	30	115	18%
Other Community Service Provider				25	23	25	22	19	21	9	7	9	18	121	19%
KSPHQ				5	0	0	1	1	1	0	0	0	1	7	1%
Willow Domestic Violence Services				3	4	3	1	3	5	3	2	2	3	25	4%
<b>Additional Measures</b>															
Employed at Intake				33	38	38	31	28	29	31	20	25	30	122	19%
Employed Ever Since Intake				61	63	88	52	47	54	50	34	41	54	229	36%
Arrests/Incarcerations since Intake				16	16	14	13	13	15	12	13	9	13	52	8%
Had Medicaid Since Intake				52	52	57	48	39	38	36	27	31	42	149	24%

\*Average Case Load size was defined as total clients divided by 6 FTE Staff; Beginning in July, the denominator was changed to 5, as 1 FTE was assigned to the Jail

\*\*Percentage for Recovery Measure uses the total clients who present to services with substance use or both substance use and mental health issues

\*\*\*Percentage for Mental Health Measures uses the total clients who present to services with mental health or both substance use and mental health issues

	January	February	March	April	May	June	July	August	September	October	November	December	Total Average YTD	Total Unduplicated	% Unduplicated
<b>Demographics</b>															
<b>Age</b>															
10-19	4	5	5	4	3	3	1	0	0	0	0	1	2	7	1%
20-29	23	31	27	31	35	34	24	24	25	27	20	24	27	114	18%
30-39	57	60	64	73	66	62	57	51	54	45	36	45	56	209	33%
40-49	40	49	54	55	51	62	46	39	37	29	25	26	43	173	27%
50-59	19	26	25	26	24	24	20	19	17	14	13	14	20	79	12%
60-69	9	13	13	9	16	23	15	13	9	10	9	10	12	46	7%
70+	2	2	1	0	0	1	0	0	1	1	1	1	1	6	1%
<b>Total</b>	<b>154</b>	<b>186</b>	<b>189</b>	<b>198</b>	<b>195</b>	<b>209</b>	<b>163</b>	<b>146</b>	<b>143</b>	<b>126</b>	<b>104</b>	<b>121</b>	<b>161</b>	<b>634</b>	<b>100%</b>
<b>Veteran Status</b>															
Veteran - Yes	9	7	8	7	7	7	6	4	5	6	5	4	6	20	3%
Veteran - No	144	178	180	190	188	202	157	142	138	120	99	117	155	611	96%
Veteran - Unknown	1	1	1	1	0	0	0	0	0	0	0	0	0	3	0%
<b>Total</b>	<b>154</b>	<b>186</b>	<b>189</b>	<b>198</b>	<b>195</b>	<b>209</b>	<b>163</b>	<b>146</b>	<b>143</b>	<b>126</b>	<b>104</b>	<b>121</b>	<b>161</b>	<b>634</b>	<b>100%</b>
<b>Gender</b>															
Male	80	102	95	97	87	101	73	64	59	49	40	47	75	294	46%
Female	74	84	94	101	108	108	90	82	84	77	64	74	87	340	54%
<b>Total</b>	<b>154</b>	<b>186</b>	<b>189</b>	<b>198</b>	<b>195</b>	<b>209</b>	<b>163</b>	<b>146</b>	<b>143</b>	<b>126</b>	<b>104</b>	<b>121</b>	<b>161</b>	<b>634</b>	<b>100%</b>
<b>Gender Preference</b>															
Transgender	4	3	4	4	3	3	2	1	1	1	1	1	2	9	1%
Non-Binary	1	0	2	4	5	5	4	4	3	3	2	2	3	10	2%
<b>Total</b>	<b>5</b>	<b>3</b>	<b>6</b>	<b>8</b>	<b>8</b>	<b>8</b>	<b>6</b>	<b>5</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>3</b>	<b>5</b>	<b>19</b>	<b>3%</b>
<b>Race</b>															
White	110	125	129	138	137	140	100	90	95	84	67	74	107	438	69%
Black	17	24	20	18	13	19	25	21	16	14	12	17	18	72	11%
Native/Hawaiian	2	0	3	0	1	1	1	1	0	0	0	0	1	1	0%
Asian	0	2	0	3	2	2	1	0	0	0	0	1	1	4	1%
American Indian/Alaska	14	20	20	18	21	23	18	17	20	16	11	10	17	51	8%
Other Single Race	3	4	5	8	7	6	5	4	2	3	4	4	5	15	2%
More than One Race	6	9	11	13	14	17	13	13	10	9	10	15	12	51	8%
Unknown	2	2	1	0	0	1	0	0	0	0	0	0	1	2	0%
<b>Total</b>	<b>154</b>	<b>186</b>	<b>189</b>	<b>198</b>	<b>195</b>	<b>209</b>	<b>163</b>	<b>146</b>	<b>143</b>	<b>126</b>	<b>104</b>	<b>121</b>	<b>161</b>	<b>634</b>	<b>100%</b>
<b>Ethnicity</b>															
Cuban	1	0	0	1	1	1	1	1	1	1	1	1	1	2	0%
Hispanic or Latino- Specific Origin not Identified	9	11	11	12	11	9	7	7	7	7	6	7	9	33	5%
Mexican	4	5	4	5	7	9	9	8	6	6	3	4	6	24	4%
Not of Hispanic or Latino Origin	134	164	169	176	172	184	139	124	123	108	91	106	141	558	88%
Other Specific Hispanic or Latino	2	2	1	1	1	1	2	2	1	2	0	0	1	4	1%
Puerto Rican	0	0	2	2	2	2	2	2	2	2	2	2	2	4	1%
Unknown	4	4	2	1	1	3	3	2	3	0	1	1	2	9	1%
<b>Total</b>	<b>154</b>	<b>186</b>	<b>189</b>	<b>198</b>	<b>195</b>	<b>209</b>	<b>163</b>	<b>146</b>	<b>143</b>	<b>126</b>	<b>104</b>	<b>121</b>	<b>161</b>	<b>634</b>	<b>100%</b>

Measure/Field	Definition
<b>Referrals During the Month</b>	The following are the referral source of all referrals during the current month- it does not reflect whether clients engage in services or not.
DCCCA	
SUD TX Provider (Other than DCCCA)	
Heartland CHC	
HRADAC	
LMH-Hospital	
LMH-ED	
LMH - Clinics	
LMH- OBGYN	
Bert Nash	
Lawrence Community Shelter	
Houseless Camps/Pallets	
Douglas County Govt/My RC Algorithm	
Criminal Justice System - Jail	
Criminal Justice System - Court Service / Community Corrections	
Criminal Justice System - Other	
Self	
RSI	
TRC	
Other	
<b>Client Engagement</b>	The following data reflects totals for all clients who were engaged in services during the current month
<b>Client Volume</b>	
Total Clients	Total clients in level of active status during the month
Total New Clients	Total clients who began services during this month
Total Inactive Clients - >=31- 90 Days	Total clients who did not have contact with their ICC for 31+ days. These Clients are not counted in the Client Engagement or Demographic Data.
Total Discharged Clients	Total clients who were DCd from services during this month
Average Case Load Size	Average case load size - total clients divided by 6 FTEs change to 5 FTEs moving forward
Total Douglas County Residence	Total number of clients who's residence was in Douglas County (beginning of service or currently)
<b>Referral Source</b>	The following reflect the referrals sources for clients who were engaged in services during the month
DCCCA	
SUD TX Provider (Other than DCCCA)	
Heartland CHC	
HRADAC	
LMH-Hospital	
LMH-ED	
LMH - Clinics	
LMH- OBGYN	
Bert Nash	
Lawrence Community Shelter	
Houseless Camps/Pallets	
Douglas County Govt/My RC Algorithm	
Criminal Justice System - Jail	
Criminal Justice System - Court Service / Community Corrections	
Criminal Justice System - Other	
Self	
RSI	
TRC	
Other	
<b>Total</b>	

<b>Behavioral Health Presenting Issue</b>		
MH	Total clients presenting with Mental Health issues only	
SUD	Total clients presenting with Substance Use Issues only	
Both	Total clients presenting with both MH and SU issues	
<b>Total</b>		
Total Presenting with Mental Health Issues	Total presenting with MH + Total presenting with both	
Total Presenting with Substance Use Issues	Total presenting with SUD + Total presenting with both; becomes the "N" in Row 66, Recovery Measures	
<b>LOS in Service</b>		The following reflects the total # of days clients have been in services; becomes the "N" in Row 75, Mental Health Measures
<=90 Days		
91-180 Days		
181-365		
1-2 Years	365-730	
> 2 Years	731	
<b>Total</b>		
<b>Average</b>		The average # of days clients are in services
<b>Recovery Measures (N=X)</b>		N = Row 57
Engaged in Recovery Activities at Beginning	Engaged in any recovery activity when client began services. Can include (but not limited to), SUD TX, attending 12-Step or other Community support group, working with a Peer, and/or ROSC	
Engaged in Recovery Activities Since ICC Began	Engaged in any recovery activity since services began	
Substance Use Assessment Completed	Completed a comprehensive, clinical Substance Use Assessment	
SUD Treatment Accessed Since Service Began	Accessed formal SUD treatment	
Worked with a Peer Mentor	Met with and/or worked with a Peer Mentor since services began	
Community Support Group (e.g. 12-Step)	Attended a community support group since services began	
Medication Assisted Treatment (MAT)	Accessed MAT since services began	
<b>Mental Health Measures (N=X)</b>		N = Row 56
Engaged in MH at Beginning	Engaged in any MH activities when began services	
Accessed MH Since Service Began	Engaged in any MH activity since service began	
<b>Physical Health Measures</b>		
Engaged in PH at Beginning	Had access to a Primary HC Provider when services began	
Engaged in PH Since Service Began	Accessed Primary HC Provider	
<b>Housing Measures</b>		
Beginning of Service		
Homeless	Homeless or precariously housed	
Transitional	residing in a transitional housing program	
Permanent	living in permanent housing	
<b>Total</b>		
End of Reporting Period		
Homeless	Homeless or precariously housed	
Transitional	residing in a transitional housing program	
Permanent	living in permanent housing	
<b>Total</b>		
Ever Housed	Housed in transitional or permanent housing since services began	
<b>Stabilization Measures</b>		
Accessed State Hospital	Admitted to a State Hospital during this reporting period	
Accessed ER	Accessed a community hospital ER during this reporting period	
Admitted to Psych Hospital/Unit	Admitted to a psychiatric hospital during this reporting period	
Accessed a Community Crisis Stabilization Center	Admitted to a community crisis stabilization center during this report period	
Accessed Community Hospital	Admitted to a community hospital during this reporting period	
<b>Accessed Crisis Partner This Month</b>		Note: these have historically been since services began
Bert Nash		
DCCCA		
Heartland CHC		
LMH-ED		
LMH - Clinics		
Lawrence Community Shelter		
RSI		
TRC		
Other Community Service Provider		
KSPHQ		
Willow Domestic Violence Services		

Note: these have historically been since services began

Note: these have historically been since services began

Additional Measures	
Employed at Intake	
Employed Ever Since Intake	
Arrests/Incarcerations	
Had Medicaid Since Intake	

Employed either temporarily, part time, full-time, odd jobs etc.

Arrested or incarcerated during reporting month

Do we need this?

Demographics	
<b>Age</b>	
	10-19
	20-29
	30-39
	40-49
	50-59
	60-69
	70+
<b>Total</b>	
<b>Veteran Status</b>	
	Veteran - Yes
	Veteran - No
	Veteran - Unknown
<b>Total</b>	
<b>Gender</b>	
	Male
	Female
<b>Total</b>	
<b>Gender Preference</b>	
	Transgender
	Non-Binary
<b>Total</b>	
<b>Race</b>	
	White
	Black
	Native/Hawaiian
	Asian
	American Indian/Alaska
	Other Single Race
	More than One Race
	Unknown
<b>Total</b>	
<b>Ethnicity</b>	
	Cuban
	Hispanic or Latino- Specific Origin not Identified
	Mexican
	Not of Hispanic or Latino Origin
	Other Specific Hispanic or Latino
	Puerto Rican
	Unknown
<b>Total</b>	