



www.acmhck.org

**Proponent Testimony of HB 2669
For the Senate Education Committee
Joan Tammany, Executive Director
COMCARE of Sedgwick County**

Chair Baumgardner and members of the committee, good afternoon and thank you for the opportunity to provide proponent testimony in support of HB 2669 on behalf of COMCARE of Sedgwick County. My name is Joan Tammany, and I am the Executive Director of COMCARE, the Certified Community Behavioral Health Clinic (CCBHC) and Community Mental Health Center (CMHC) in Sedgwick County. This year COMCARE celebrates 64 years of providing behavioral health services to our community and the landscape has changed significantly in those 60 plus years. COMCARE serves between 12,000 and 15,000 individuals a year, is a 988-lifeline center and has a large crisis center serving our area. We have a long history of serving the most vulnerable and complex members of our community and are the financial safety net in Sedgwick County.

I had the privilege of being one of the early provider partner agencies of this program and have also had the pleasure of testifying before the legislature as a strong proponent of the Mental Health Intervention Teams program since its inception in 2018. Since then, the program has seen significant success and growth. In my community alone the program has grown from one school district to six, providing critical behavioral health services in 52 schools now. We have touched the lives of so many youth who would otherwise not have had access to these critical services.

The Mental Health Intervention Teams are a collaborative innovation between so many including schools and mental health centers, legislators and state departments and focuses on building resilient youth and emotional wellbeing. I am here to confidently state that this program has demonstrated success and quality outcomes each and every year. Kids in the program are doing better in school and gaining skills they will carry into adulthood. It is my hope that this committee will advance the bill to move the Mental Health Intervention Team program to permanent status in statute rather than necessitating annual legislative renewal and allocation of funding for the program. I understand this bill would also move the program from the Kansas Department of Education to the Kansas Department for Aging and Disability Services.

COMCARE is a strong proponent because we see the impact the Mental Health Intervention Teams have on the lives of youth. This year to date we have provided services to more than 900 school-aged youth. We grew the program to two new districts because they were seeing the benefits from other districts in the area. In Sedgwick County we also partner with other key providers like Mental Health America to cover even more schools, thus expanding impact farther and are in discussion with local private schools to



COMCARE - CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC

Joan M. Tammany, LMLP, Executive Director

271 W. Third St. N - Suite 600, Wichita, KS 67202 • Phone (316) 660-7600 • Fax (316) 660-7510

SEDGWICKCOUNTY.ORG

explore feasibility of developing similar programs in those schools. All of this communicates the continued and growing need for these school-based services because they not only reach children in their natural setting, but they assist families with accepting services as the program breaks down barriers of transportation, lost work time and multiple social determinants of health.

But the most vital and compelling evidence as to the importance of making the Mental Health Intervention Team program permanent is how lives are transformed. Lives of children who are struggling and families who are just trying to cope. We have had youth and parents report resuming family activities that had stopped due to behavioral health issues. We have youth who have lost siblings open up and start working through their grief. We have had youth who are depressed due to parental divorce or separation who report increased energy and joy of simple things again. We have youth who have learned better communication skills to open up dialogue with family members. We have youth who through hard work have started getting school assignments in on time and staying focused in the classroom. We have youth who are reporting less anxiety and avoidant behavior. And we have youth who entered the program with suicidal ideation and/or intent who report feeling connected to others again with a desire to live. In fact, greater than 15 percent of youth in the Mental Health Intervention Team program with COMCARE have had need to access our 24/7 crisis services in the past year and an additional number of family members have needed this resource as well. We have also deployed mobile crisis response to schools and family homes or other community locations when warranted – all services that are required parts of this program.

This is important work, it is necessary work and as an advocate for youth, I know this committee and so many other legislators want to see this program continue. Another unique aspect of the program is the case management piece of the program – not just coordination of resources, but actual skill building and management of symptoms while working with these youth as a member of the mental health intervention team. This is more than a therapy program, it is wrap around supports for these youth who grow their emotional and behavioral wellbeing while participating in the program.

Those are just a few key areas of success COMCARE, and our school districts have experienced this year and each year since launching the Mental Health Intervention Teams in 2018. I strongly support the intent of HB 2669 and with that, I will stand for any questions at the appropriate time. Thank you.