Learning Collaborative Update

September continued to be a month of learning and networking for OneCare Kansas partners! On September 15, WSU CEI hosted the OneCare Kansas Learning Collaborative for directors and managers in the OCK network of providers. This month, the group was asked to participate in small group discussions related to challenges and opportunities that the partners have experienced in the first six months of the program’s implementation. Thanks to everyone who shared their time and expertise! The next event is scheduled for October 20 at 3:00 p.m., so watch your inboxes for how to register and participate!

Learning Opportunities for OCK Partners

On September 17, WSU CEI hosted the monthly virtual Community of Practice for Care Coordinators and Social Workers within the OCK partner network. Providers from across the state shared strategies and challenges related to developing quality health action plans. Our next session of the OCK Community of Practice will be on October 15 at 3:00 p.m. We look forward to continuing our learning together in October!
Helping people live healthier lives by integrating and coordinating services and supports to treat the “whole-person” across the lifespan.

OCK Highlights

While we continue to improve and grow OCK, we would also like to share success stories that highlight the impact the program has on our members. The following success story came from Community Health Center of Southeast Kansas. If you have a story to share, please send it to OneCareKansas@ks.gov.

Our story today comes to us from Leah at CHCSEK. “In April, we first started working with a member in her mid-30s who primarily wanted our help in obtaining a wheelchair for lifelong use. She has a complex medical history, was reporting high levels of pain, and had multiple specialists involved in her care. She was against receiving behavioral health services because of past negative experiences.

Our OCK team worked to build trust by getting to know the member and her family, providing transportation to the grocery store, and helping her mom find a PCP. All the while, we were working with her providers to order a wheelchair, although the order was only approved temporarily due to her age.

By June, the member decided to establish with a therapist and has since been attending weekly sessions. Unfortunately, in mid-summer she ended up going to the ER three times in one week. Our nurse case manager asked if she would be comfortable seeing a PCP that specializes in chronic pain management to follow up. She decided to establish care with this provider and, working together as a care team, arranged for the member to visit with a fitness trainer. The member began focusing on her independence and thinking about what it might be like to no longer need the wheelchair.

By August, the member returned her wheelchair to the equipment supplier and she is now stronger, more independent, and only uses a walker as needed. On her most recent HAP update, her PHQ-9 score decreased by 15 points.

It has been such a privilege to coordinate care for her and walk alongside this member as she continues the hard work of learning about her conditions and what she can do to manage them.”

Great job, Leah and CHCSEK team. Keep up the good work!
Behavioral Health Tobacco Project

Expansion of Free Nicotine Replacement Therapy from the Kansas Tobacco Quitline

Effective October 5, 2020, individuals who qualify and enroll in the Kansas Tobacco Quitline Behavioral Health Program will receive 4 weeks of Nicotine Replacement Therapy after the completion of the second coaching call. The NRT will be shipped to the home of the enrollee free of charge. Prior to this change, only 2 weeks of NRT was provided after the completion of the first coaching call. The Behavioral Health Program includes a total of 7 calls.

How to Qualify for the Behavioral Health Program

During the Quitline’s intake process, the caller will be asked if they live with mental illness or drug or alcohol use disorder. Diagnoses included are bipolar disorder, depression, generalized anxiety disorder, PTSD, schizophrenia, or ADHD. Callers who report being diagnosed with any of these conditions will be offered enrollment in the Behavioral Health Program. For questions, contact Matthew Schrock, Cessation Coordinator, KDHE Bureau of Health Promotion, Matthew.Schrock@ks.gov, 316-207-2244.

Free Online Tobacco Cessation Groups

The Masonic Cancer Alliance, the outreach network of The University of Kansas Cancer Center, offers free tobacco cessation groups. These groups are open to anyone in the state. For questions, contact Karla Van Goethem, kvangoethem@kumc.edu, or Karin Denes-Collar, kdenescollar@kumc.edu. You may also call 913-945-6823.

Kansas Tobacco Guideline for Behavioral Health Care: Online Self-Assessment

Thanks to KDADS staff for their help in getting the Self-Assessment into an online survey format. The NAMI Kansas tobacco web page, as well as the KDADS tobacco page, have been updated to provide a link to the new online tool.

- Complete the Self-Assessment online on the KDADS website and print a copy of your results for your records before submitting.
- You can also download the Self-Assessment tool to provide members of your team with the questions in advance of completing the online assessment.

Information about the Kansas Tobacco Guideline for Behavioral Health Care can be found at https://namikansas.org/resources/smoking-cessation-information/.

Tobacco Treatment Provider Survey

If you have not already done so, please consider taking a short survey (estimated time is 8 minutes to complete), which can be accessed at the following link: https://www.surveymonkey.com/r/TobaccoProjectMailingList.

This survey is designed to collect essential information about the capacity of health care practitioners to provide evidence-based tobacco dependence treatment. Survey responses will be used in part to publish a directory of providers for those who wish to be included. The Kansas Tobacco Quitline, KanCare MCOs, and other entities may use the directory to provide referrals for tobacco treatment. We would appreciate your participation in the survey regardless of your level of tobacco treatment services and/or desire to be included in the directory.
October 10, 2020 is World Mental Health Day. This year’s World Mental Health Day comes at a time when our daily lives have changed considerably because of the COVID-19 pandemic.

The past months have brought many challenges. Healthcare workers have been forced to provide care in difficult and dangerous circumstances, often putting their health, as well as their family’s health, at risk. Students have been forced to adapt to learning in a pandemic by attending virtual classes with little contact with teachers and friends. Many workers have lost their jobs as companies have been forced to shut down temporarily, or possibly for good. Individuals in poverty or in fragile humanitarian settings have been put at enormous risk with very little help during the pandemic. People with mental health conditions have been cut off from crucial support during a time of isolation, loss, and fear. Of course, this is all dwarfed by those individuals dealing with the loss of loved ones without the normal mourning rituals, such as funerals or religious customs.

Given past experience with emergencies, it is expected that the need for mental health and psychosocial support will substantially increase in the coming months and years. Investment in mental health programs at the national and international levels, which have already suffered from years of chronic underfunding, is now more important than ever. With these current circumstances, the goal of this year’s World Mental Health Day campaign is increased investment in mental health.