

Labette Center for Mental Health Services Inc.

2025 CCBHC

Needs Assessment
Summary





Data Collection



Key Finding

LCMHS highlights a strong foundation of community stability, high client satisfaction, and a well-trained workforce, alongside persistent structural and access-related challenges that affect service delivery and outcomes.





**DEMOGRAPHIC &
ENVIRONMENTAL
CONSIDERATIONS**

Key Strengths:

Higher Homeownership Rate- Labette has 74.0% suggesting greater residential stability, compared to the state average of 67.2%

Lower Suicide Rate- at 10.1 compared to the state average of 19.0, which may reflect community protective factors.

Higher Employment rate- Labette County has a larger percentage of individuals in the labor force at 96.8% compared to state average of 94.8%



Demographic Review

Key Needs & Considerations:

Higher Disability Prevalence- Labette County has a larger share of residents living with a disability compared to the state average. This may increase demand for healthcare, housing, transportation and supported employment programs.

Higher Percentage of Single-Father Households- at 6.1% more than the state average this may relate to need of increasing family support services, childcare resources and parenting programs.

Higher Uninsured Rate- A larger percentage of residents lack health insurance coverage, resulting in barriers to accessing health care and preventative services.

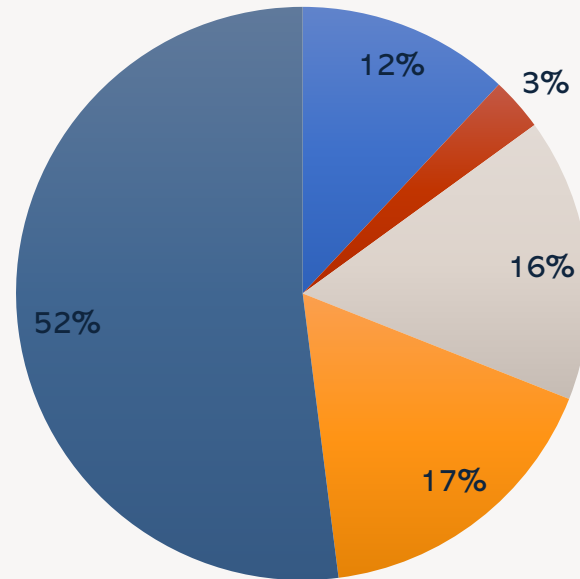
Lower Educational Attainment & Lower Median Household Income- A smaller percentage of residents hold college degrees, which can increase the need for adult career, technical and educational opportunities. Lower household income can increase demand for affordable housing, financial assistance programs and food security services.

Other Challenges- Include higher reported substance use, slightly more youth in foster care, and slightly higher number of new court commitments.

Client Perception of Care: 87 clients completed survey

Conducted September- October 2025

Time in Services



■ 0 to 3 months ■ 3 to 6 months ■ 6mo to 1 year ■ 1 to 3 years ■ 3+ years ■

Key Strengths



Staff Interaction & Respect

- 98.8%- Respected religious/spiritual beliefs
- 97.6 % Communicated in a way they understood
- 97.4% Showed cultural/ethnic sensitivity
- 96.4% Treated clients with respect

Supportive Relationships

- 96.3% Staff believe in recovery
- 95.0% Clients feel supported “no matter what”
- 92.7% Someone is there to talk to when troubled

Client Engagement

- 95.2% Participation in treatment
- 95.1% Involvement in treatment service decisions



Key Needs & Considerations

Smaller Percentages

88.5% Reported Symptoms Improved

91.1% Received as much help as they needed

91.3% Received the help they wanted

Qualitative Data

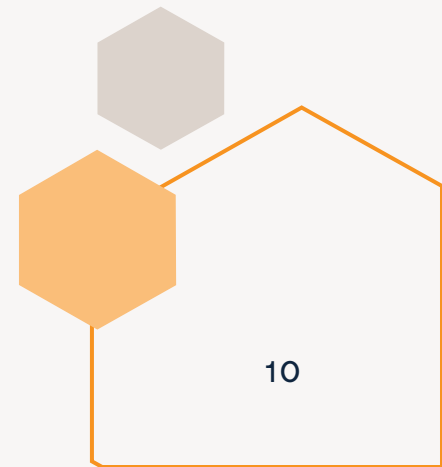
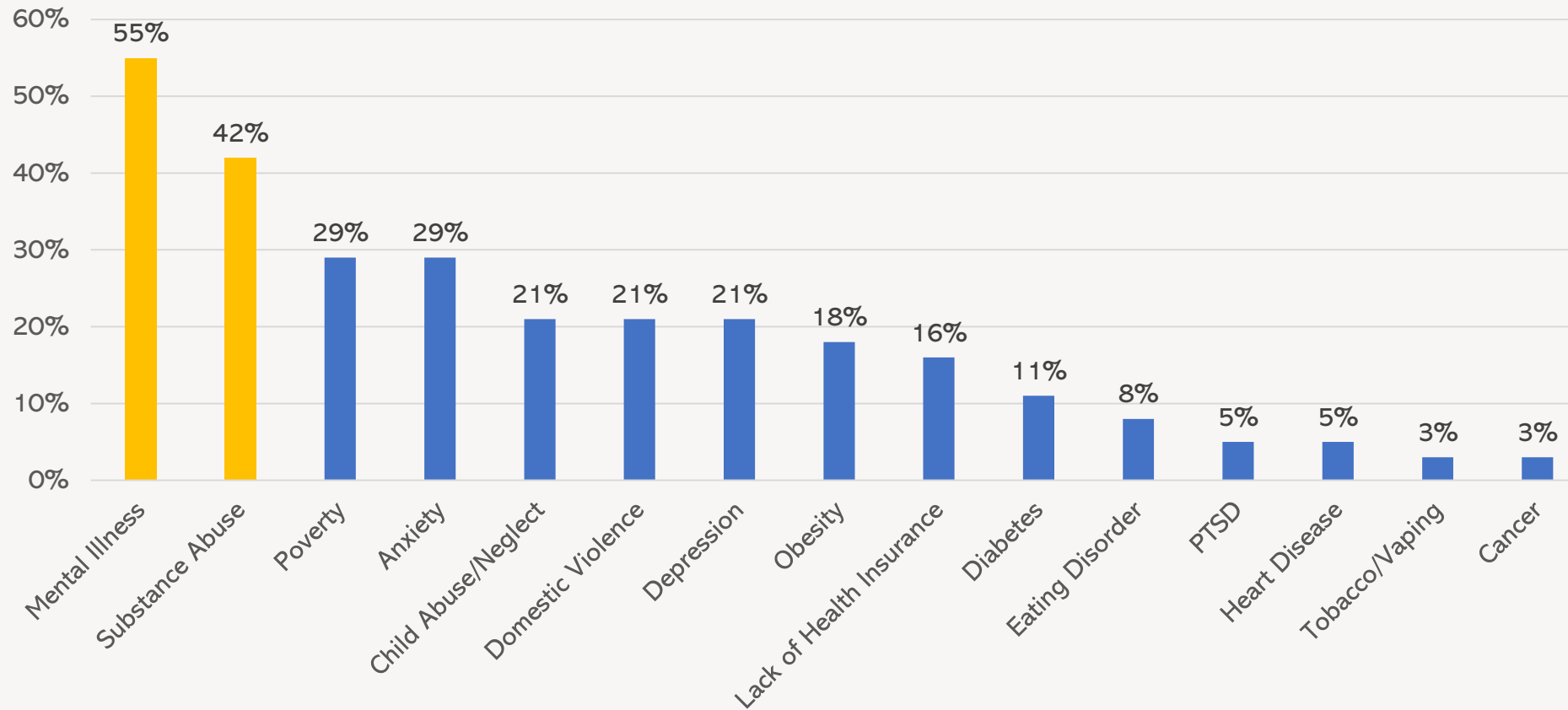
- Difficulty reaching providers/ lack of call backs
- Medication provider communication gaps
- Appointment reminder system inconsistencies
- Inconsistent front desk experiences
- Crisis response concerns



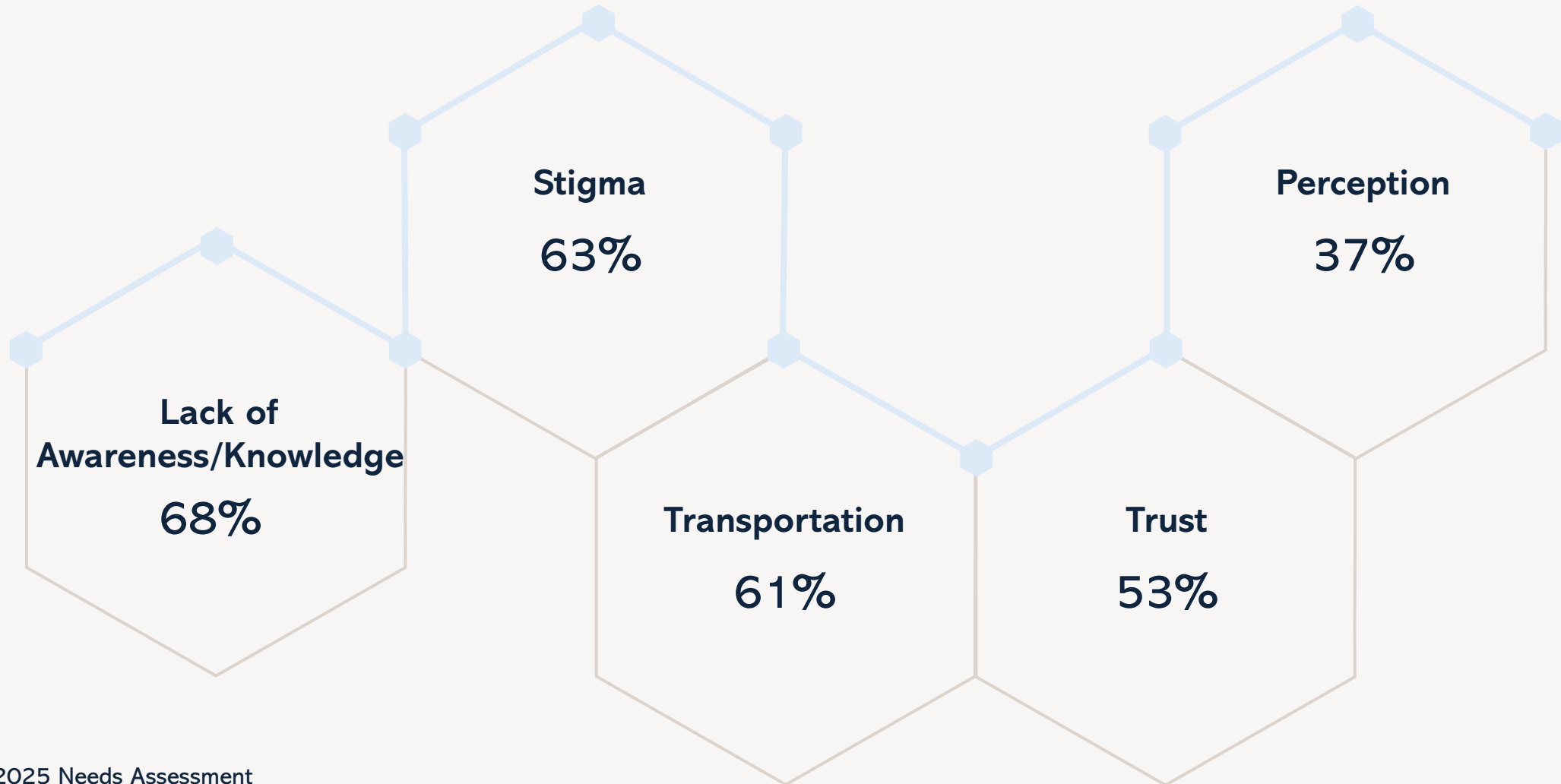
Community Survey: September- October 2025

38 Responses total: 18 had not personally received services, but knew someone who had

Community Survey- Health Concerns



Community Survey- Barriers to Mental Health Care





Staff Survey: Perception of Clinical Service Needs

26 Staff completed the survey from September to
October 2025

Key Strengths

- **Training** received the strongest rating across all service areas
 - Staff agreed that training addresses cultural competence; person and family-centered, recovery oriented; evidence-based; trauma-informed care; and primary care/behavioral health integration were provided.
- **Staffing Capacity** across most categories, respondent agreed that staffing is appropriate in terms of size and composition of service providers for serving the population.

Key Needs & Consideration

After-Hours Availability

Showing higher disagreement rates for availability:

Substance use services- 30.8%

Primary care screening-19.2%

Mental health services-19.2%

Screening/assessment -19.2%

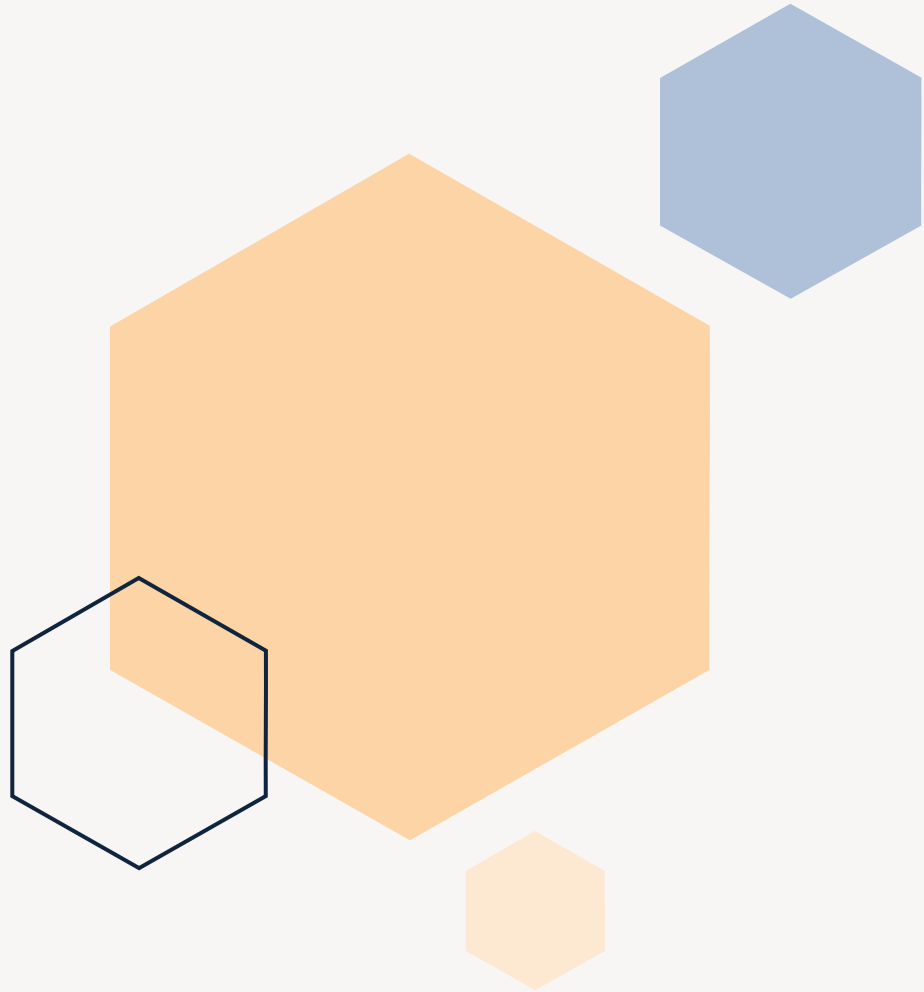
Language Accessibility

Showing disagreement rates for language accessibility:

Screening/assessment- 11.5%

Mental health services- 7.7%

Primary care screening- 3.8%



Focus Group & Client Interviews

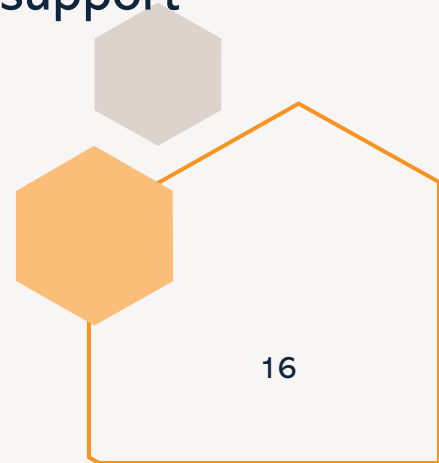
October 2025

Community stakeholder focus group had 7 participants

Client interviews 10 participants

Key Strengths:

- **Trusted Community Partner**
 - LCMHS is viewed as reliable and valued resource in the community
- **Compassionate, Responsive Staff**
 - Therapist, crisis teams and school partnerships are consistently described as caring and effective
- **Positive Service Experience**
 - Many noted experiences were significantly better than what they had experienced elsewhere
- **Strong School-Based Connections**
 - Collaborations with schools are recognized as important access points for youth support



Key Needs & Considerations



Access to Care

- Services are perceived as too centralized in Parsons, limiting rural access
- Families struggle to understand available services
- Increased visibility is needed in everyday community spaces, and reducing stigma
- Transportation is a barrier for some
- Scheduling conflicts for evening hours- after school, after work availability

Continuity of Care

- Reducing staff turnover
- Increase consistency of providers over time
- Enhanced responsiveness and lived-experience understanding
- Overreliance on telehealth during crises
- Expanding crisis response capacity

Trauma-Informed and Supportive Services

- Increased request for in-home services and trauma-informed care
- Interest in support groups, and relationally focused supports
- Interest in trauma dogs

Comments from Clients



Overall Recommendations

These overall recommendations address 5 key focus areas that were identified through the combination of the surveys, focus groups and interviews. Each area has suggested action items for review.

- **Access and Availability of Services**
- **Community Awareness and Engagement**
- **Service Quality, System Responsiveness, and Outcomes**
- **Crisis Response and Continuity of Care**
- **Integrated and Balanced Whole-Person Care**

Access and Availability: Reduce barriers related to geography, transportation, and service capacity.

Action 1	Action 2	Action 3	Action 4	Action 5
Expand mobile clinics and in-home service options	Increase school-based and community-site service delivery	Increase evening, weekend and after-hours availability	Strengthen transportation supports (vouchers, partnerships)	Expand capacity in high-need areas (substance use and crisis services)

Community Awareness and Engagement: Improve service visibility and reduce stigma

Action 1	Action 2	Action 3	Action 4
Launch coordinated outreach and education strategies	Simplify how individuals' access and navigate services	Strengthen partnerships with schools, healthcare, and community organizations	Use peer voices and community events to reduce stigma

Service Quality, System Responsiveness, and Outcomes: Enhance client experience, communication and effectiveness of care

Action 1	Action 2	Action 3	Action 4	Action 5
<p>Improve communication systems (call backs, reminders, care coordination)</p>	<p>Implement standardized customer service practices (call back protocols & response time expectations)</p>	<p>Upgrade phone and messaging systems (centralized scheduling and text reminders)</p>	<p>Implement routine outcome monitoring and strengthen evidenced-based practices and service intensity</p>	<p>Improved care coordination through clearer workflows between clinical and medication providers</p>

Crisis Response and Continuity of Care: Ensure timely, consistent, and reliable care- especially during critical moments

Action 1	Action 2	Action 3	Action 4	Action 5
Promote clear guidance on how to access crisis services	Expand mobile crisis response and reduce reliance on telehealth crisis care	Improve after-hours coverage and crisis access points	Enhance coordination across providers and levels of care	Strengthen provider continuity and reduce staff turnover impacts (enhance staff retention)

Integrated and Balanced Whole-Person Care: Address broader health and social needs through coordinated, inclusive systems.

Action 1	Action 2	Action 3	Action 4	Action 5
Strengthen primary care integration (screening, monitoring, partnerships)	Expand case management and connections to social supports: Increase connections to housing, employment and food assistance resources	Enhance psychiatric rehabilitation and peer support services	Develop specialized and trauma-informed services for high-needs populations	Support insurance enrollment (provide assistance with benefits, navigation and enrollment)

What we have started



- Expansion of mobile crisis response system, 24/7 staff response availability started 11/1/2025
- Increased social media posting regarding crisis availability
- Increased coordination with Labette Health mobile clinic, on-site 2 days a month
- Joined Southeast Kansas Health Cooperative
- Added on-site therapy services at USD 504
- On-site therapy at LCC
- On-site services with Labette County jail to focus on substance use disorder and mental health, started December 2025
- Contingency Management in the SUD Program
- Focused outreach efforts to Edna and Chetopa food pantry with monthly presence
- Working with our E.H.R company on our reminder and patient portal system

Thoughts & Questions





Thank you

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