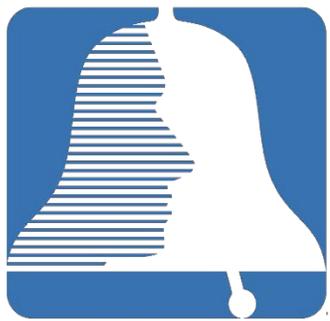


# Guide to Consumer Services



# MHA

of South Central Kansas

Empowering Lives. Impacting Community.

## 2020

## *Welcome from the President*

Our goal is to serve you in every way we can to help you live in our community with a quality of life that meets your needs. We are honored that you have sought our services and we will make every effort to meet your expectations. MHA has a long history of advocating for persons who experience a mental illness. Advocacy and education are at the very core of our purpose; we want to serve you in a manner that reflects the spirit of advocacy, as well as the commitment to service.

Clifford Beers, who founded the Mental Health Association in the early 1900s, was both a person who experienced a severe mental illness and a leader who spoke up for more humane service. He understood the dignity of each individual and that person's right to full community citizenship. The Mental Health Association was founded to spread those beliefs and practices across our land. Our organization has been pursuing those efforts in the Wichita area for over sixty years. We are proud of our achievements and the partnerships that have made our services possible. We are an affiliate of COMCARE, a member agency of United Way of the Plains and a chapter affiliate of the National Mental Health America. We work with those organizations and many others, including family and consumer groups.

You are our primary customer. The guidelines included in this booklet help identify the ways in which we provide services. Working together with you in a spirit of teamwork is our goal and will result in the most positive outcome. Thank you for choosing the MHA. WELCOME!

Sincerely,

Mary Jones President & CEO

## *Our Mission and Values*

**Mission:** The mission of the Mental Health Association is to empower and assist youth, families, and adults in our community to achieve optimal mental health and wellness through education, advocacy and service.

### **Values:**

**Consumer & Family Driven Services:** Involving consumers and family fully, in the delivery of mental health services toward recovery.

**Access:** Ensuring individual choice and timely access to high quality community based, integrated mental health services.

**Evidence Based Practices:** Achieving outcomes in treatment, recovery, and rehabilitation through evidence-based practices that improve the quality of life for persons served.

**Excellence:** Fostering the professional development of a workforce equipped in meeting human service needs in the ever-changing system of care.

**Prevention:** Assisting children and families in the prevention of mental illness, substance abuse, and related disorders.

**Across the Lifespan:** Bridging gaps in service across the life span, from early childhood through senior years.

**Parity:** Supporting and advocating parity in insurance coverage for mental health services.

**Cultural Diversity:** Advancing a culture of service that respects diversity and promotes the dignity and rights of every person, in an environment free from stigma and discrimination.

**Administration Integrity:** Maintaining an organization that is fiscally and administratively accountable, consistent with Board governance. Generating the resources necessary to fulfill the mission of the organization.

**Valued Employees:** Recognizing and respecting the dedicated service of employees and volunteers.

**Education:** Providing educational opportunities in the promotion of mental health and wellness.

**Overall Health and Wellness:** Ensuring we provide environments which foster health for all employees and those served and that approach to service is holistic.

**Collaboration:** Networking and collaborating with other organizations to improve the quality of life for members of our community.

## Services Available

All services at the Mental Health Association reflect research-based practices and are driven by the consumer movement and mental health reform.

### ADULT SERVICES

**Adult Case Management:** Individuals participating in this program work collaboratively with a case manager on recovery and reintegration into the community. Case management focuses on accessing medical and social services, problem-solving, crisis support, resource linking, individual skill building and empowering consumers to reach their education, employment and other life goals. The principles of Integrated Dual Diagnosis Treatment (IDDT) for persons with both a substance abuse and mental illness and Strengths-Based Case Management guide service delivery.

**Adult Attendant Care:** Works collaboratively with consumers to accomplish goals related to life skills such as cooking, grocery shopping, laundry, housekeeping, budgeting, hygiene, medication compliance, problem solving, utilization of community resources, crisis support, and social/emotional support.

**Employment and Education:** Works with consumers to set and achieve education and employment goals. Employment services adhere to the nationally recognized guidelines of the Individual Placement and Support model of Supported Employment Evidence-Based Practice.

**Ticket to Work:** MHA is also approved by the Social Security Administration as an employment network for Ticket to Work. Ticket to Work offers employment services to individuals who have Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) due to a disability. The goal of Ticket to Work is to assist these individuals with obtaining and maintaining employment and earning enough money that they are no longer in need of Social Security benefits.

**Vocational Rehabilitation:** Provides employment services to individuals with any type of disability.

**Peer Support Services:** Is intended to promote skills for coping with and managing mental health symptoms as well as developing a network of information and support from others who have been through similar experiences. Services provided individually and in group settings.

### CHILDREN'S SERVICES

**Children's Case Management:** Case Managers works collaboratively with families to develop treatment to meet the youth's mental health needs. Case Managers work one-on-one with the youth to assist with symptom management and skill building; and work on behalf of the youth by collaborating with the important people involved in the child's or youth's life and making referrals as needed to ensure success.

**Children's Attendant Care:** Promotes recovery, positive problem-solving, coping skills, behavior management, school success, community tenure, and socialization through the development of appropriate interpersonal relationships on a 1:1 basis.

### HOUSING

**Residential Care:** Offers an array of housing options to individuals recovering from mental illness who are in need of housing. Residents of group homes, crisis homes, and supported apartments participate in services to help build skills needed for successful community living. MHA also operates independent living apartments for adults that have been diagnosed with a serious mental illness. The residential facilities are an essential resource and are designed to provide effective transition from treatment to independent living and provide safe and affordable housing.

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## Services Available (continued)

### OUTPATIENT SERVICES

**The Counseling Center at MHA:** Offers therapy services for adults, children, adolescents, families, and the elderly. Services include individual, family, group and in-home therapy. A wide variety of treatments are available such as Play therapy, Parent-Child Relational therapy, EMDR, prolonged exposure, eating disorder treatment, and mindfulness.

**Medication Management:** Evaluation, diagnosis, and medication interventions for the treatment of mental health disorders. Individuals receiving medication are monitored for progress, ongoing evaluation of symptoms and quality of life improvement.

**Substance Abuse Services:** Offers assessment and outpatient treatment that includes a combination of individual, family, and group counseling for adolescent and adults. DUI Evaluations, family education and early intervention are provided. Co-occurring treatments available as well.

**Batterer's Intervention Program (BIP):** BIP is a court-ordered, 24-week class for people convicted of domestic violence. Client's attend one class per week, however, several class times are offered each week. To participate in BIP, clients must go to the Counseling Center to enroll and pay for the class in full before an assessment can be scheduled.

### PREVENTION SERVICES

**PATHS for Kids:** Offers a 12-session early intervention and violence prevention program targeted to children grades kindergarten through 5th that are at risk of juvenile delinquency, school suspensions/expulsions, truancy and/or academic performance failure.

**Girl Empowerment Program** is a structured gender specific support group for girls ages 9 to 18. It targets girls at-risk for juvenile delinquency, school suspension/expulsion, alcohol/substance use, and/or school performance failure. GEP utilizes Girls Circle, a research-based curriculum which aims to counteract social and interpersonal forces that impede girls' growth and development by promoting an emotionally safe setting and structure within which girls can develop caring relationships and use authentic voices. Sessions are held weekly for 12-15 weeks at area schools and community centers.

**Boys 2 Men Empowerment Project** is a strengths-based character development and mentoring program for boys ages 12 to 18. The program targets boys who are at-risk for juvenile delinquency, school suspension/expulsion, alcohol/substance use, and/or school performance failure. Sessions are held weekly for 10-12 weeks at area schools and community centers.

**Pathways** serves middle and high school students ages 11 to 18 that are at high risk for substance abuse, academic failure, and other delinquent behaviors. Life Skills Training (LST) is the curriculum utilized for Pathways. It is a research-based curriculum designed to decrease the risk factors associated with juvenile delinquency. Sessions are held weekly for 10-12 weeks at area schools and community centers.

### COMPEER

**Community-Based Friendships:** Volunteer mentors spend 4-8 hours per month on a weekly basis with an adult diagnosed with mental illness or child with a serious emotional disturbance to increase their social skills, self-esteem, healthy choices and academics.

**Lunch Buddy Mentoring:** Volunteers spend one hour a week mentoring a child at their school over the lunch hour, providing positive role modeling, encouragement, and academic support. Many matches continue to meet over the summer period in the community to offer consistency and on-going support.

**Group Matches:** Compeer staff and volunteers conduct multiple outreach groups in the community to provide skill-building and social interaction between consumers and non-disabled peers. Community Outreach includes regular visits with the adult SPMI homeless population and various apartment complex settings.

### FAMILY SERVICES

**Family Services:** provides individualized, family centered case management, and flex fund distribution services to families who are experiencing issues that increase the risk of out-of-home placement for their children and further involvement with DCF. This program utilizes parents as members of a multidisciplinary team who can assist families with parenting education, employment/education activities, benefits acquisition, housing and economic stabilization.

**Youth and Family Services:** Services at-risk families who have children ages 5-24 in prevention and early intervention services to reduce poverty, prevent youth from engaging in high-risk behaviors and to help families achieve and maintain stability.

## *Services Available (continued)*

### **AGING SERVICES**

**Senior Companion Program:** provide companionship and respite services to frail elderly and their family members. These volunteers focus on the health and safety of their client.

**Mid-Kansas Senior Outreach** is a Gatekeeper program that identifies frail at-risk seniors, age 60 and over, and then provides comprehensive in-home behavioral health services to ensure these older adults have the ability to live independently and safely.

### **OneCare Kansas (OCK)**

**OCK** coordinates communication between all of the professionals involved in a client's care so that their medical and behavioral health and social service needs are addressed in a comprehensive manner. The coordination of care is done through a dedicated care manager who oversees and coordinates access to all the services a client requires to optimize member health.

*If you would like information about the accreditation visit, results, program outcomes or satisfaction surveys please let us know.*

*If the Mental Health Association is unable to provide services for you, we will be happy to refer you to another agency.*

## *Telehealth Services*

### **Definition of Telemental Health Services:**

Telemental Health Services is the delivery of health care services using interactive video technology, permitting real-time communication between the client and the therapist/med provider, for the purpose of diagnosis and/or treatment.

We feel it is important that, as our client, you are fully informed about the services you will be receiving. Your signature below indicates that you have read and understand the practice policies of the services in helping you make an informed decision about entering telemental health services.

- 1.** I understand that telemental health is being offered by The Mental Health Association of South Central Kansas to allow for continuation of services in the midst of the COVID-19 outbreak, can be ongoing if agreed by your provider.
- 2.** I understand the same rights to confidentiality and limits to confidentiality that apply in face-to-face sessions also apply to telemental health services. I understand that, due to legal or ethical obligation, specific circumstances may require my provider to break confidentiality and report information obtained as a result of the therapy process. Those circumstances exist when: a) a provider believes a client may be a danger to him or herself or to others; b) the provider believes that a child, elderly or disabled person may be subject to abuse or neglect; and/or c) a court order exists that information regarding the services provided. I understand that in any such breaches of my right to confidentiality I would follow the MHA Counseling Center Grievance Process.
- 3.** I understand that all consent forms signed at my initial appointment are still in effect.
- 4.** I understand that telemental health does not provide emergency services. If I am experiencing an emergency situation, I understand that I can call COMCARE Crisis (316) 660-7500, 911 or proceed to the nearest hospital emergency room for help.
- 5.** I understand that I am responsible for (1) providing the equipment and internet access for my telemental health services, (2) the security of my electronic device, and (3) arranging a location with sufficient privacy that is free from distractions or intrusions for my session(s).
- 6.** I understand that there are potential benefits to participating in telemental health sessions. One such benefit includes the ability to continue care with my current provider during the COVID-19 outbreak, but that no results can be guaranteed or assured.
- 7.** I understand that there are potential risks by participating in telemental health. I understand my provider utilizes secure audio/video transmission software to deliver telemental health services. However, risks might still exist despite all efforts taken to secure my confidentiality and privacy.
- 8.** Despite reasonable efforts on the part of the provider, sessions may be disrupted or distorted by technical failures or difficulties.
- 9.** I understand that I have the right to withhold or withdraw my consent to the use of telemental health in the course of my care at any time, without affecting my right to future care or treatment. In such cases, I have the right to temporarily suspend my services or request a referral.

## *Consumer Rights*

### YOU HAVE THE RIGHT TO:

1. Ask for help and be treated with dignity and respect
2. Be informed about your treatment/service and be told of any potential benefits/risks of treatment
3. Help make decisions about your service, participate in the development and review of an individualized treatment plan and in planning for discharge
4. Know how long you will be involved in treatment/service
5. Receive treatment at convenient times and places
6. Refuse treatment/service
7. Ask for other treatment that may work for you
8. Know the name of the person(s) providing your treatment and to request other staff be assigned to provide your treatment
9. Be referred to another provider for service
10. Confidentiality
11. Include other persons in your treatment
12. Be told of any research or educational activities that are part of your treatment and to refuse to participate
13. Have bills and charges explained
14. Make a written complaint
15. A safe environment and freedom from verbal, physical or financial abuse or exploitation or restraint/seclusion that is used as a means of coercion, discipline, convenience, or retaliation
16. Receive treatment in the least restrictive appropriate manner
17. Be informed that there may be consequences for failing to comply with court-ordered treatment
18. See or request a copy of your clinical record in accordance with MHA policy
19. Make healthcare decisions through advanced directives, living will, and durable power of attorney
20. Express preference regarding choice of service providers
21. Receive information about your managed care company
22. Free exercise of rights without adversely impacting treatment
23. Obtain access to services within specified access standards
24. Right to request a 2nd opinion

## *Consumer Responsibilities*

### YOU HAVE THE RESPONSIBILITY TO:

1. Provide information needed for treatment/service
2. Plan your service with the assistance of treatment providers and follow the plan.
3. Let us know of special needs
4. Keep and be on time for appointments and bring your insurance cards
5. Arrange for care of your children while you are receiving services
6. Let us know if you stop taking your medications or have problems with them
7. Collaborate with your treatment provider to develop a crisis plan and work with provider to implement plan as needed
8. Respect others confidentiality
9. Let us know if your address, name, phone number or insurance information changes
10. Tell us of all insurances carried
11. Let us know if you are unhappy with services
12. Let us know if you are not coming back
13. Pay us in a timely manner
14. Treat staff and consumers with respect
15. Maintain a safe environment by not possessing weapons or using intoxicating or illegal drugs while receiving services
16. Not come for services while under the influence of drugs or alcohol
17. Notify staff of any unsafe situations you observe
18. Not ask your treatment provider to purchase items for you out of their own funds
19. Ensure a healthy environment for MHA staff by not smoking in close proximity to the service provider

## ***Standards You Can Expect From Your Service Provider***

- Service that promotes safety and well-being for consumers and staff regardless of race, color, religion, ethnicity, veteran status, age, physical or mental disability, gender or sexual orientation.
- Informed consent for all services with an explanation of services in an understandable manner.
- Provision of services that take into account preferences, strengths and culture.
- Staff who only provide services for which they are trained.
- Services which are provided in environments free from intimidation, insult, and harassment.
- Services that avoid conflict of interest, self-promotion, exploitation, or invasion of privacy.
- No employees are allowed to accept gifts or payment for services.
- Services which are billed through our business office to the appropriate funding source.
- Services which are guided by an assessment of needs and subsequent treatment planning and directed by the consumer.
- Opportunity to complete satisfaction surveys and to address questions/comments to program managers at any time.
- Staff who do not use tobacco products during service.

## ***Standards Expected of Individuals Served***

Persons may be excluded from services due to the following:

- Pattern of missed appointments.
- Violent, abusive, or behavior that constitutes harassment toward staff or other consumers.
- Unwillingness to substantially comply with treatment plan.
- See program guidelines for other exclusions. A referral to other services will be made upon request.
- Reinstatement to service is based upon individual program guidelines.

## ***Satisfaction Surveys***

In an effort to continue to provide you the best service possible, MHA conducts satisfaction surveys at various times throughout the year. These surveys are done via email, phone calls, electronic and paper forms. If you have suggestions for how to improve our services between survey times, please feel free to drop a note with your ideas into the suggestion box at any location or send an email to [suggestionbox@masck.org](mailto:suggestionbox@masck.org).

## ***Advance Directives***

Planning is essential in the case of medical emergencies. Consumers should let their service provider know their wishes regarding artificial life support (advanced directives), utilizing living wills or durable powers of attorney.

## ***Confidentiality Policy***

To respect the privacy and the dignity of consumers, employees and volunteers are required to keep all information in the strictest of confidence.

For confidential information to be released, a written Release of Information is required. Releases may be withdrawn at any time to prevent further disclosure. Exceptions to confidentiality do exist where information may be released without authorization. Some examples would be: if a medical emergency occurs where failing to release confidential information would endanger life; where a psychological emergency occurs that may endanger the consumer or others; where disclosure is required by a court order or bench warrant; or because staff is required by law to report all cases of suspected child/adult abuse or neglect.

## Payment for Service

**INSURANCE:** MHA will file insurance claims on behalf of the client and accept the maximum allowable reimbursement for services. The client is responsible for any deductible, co-insurance, and co-payment due and is 100% responsible for any non-covered services rendered. The Counseling Center will not become involved in disputes between the client and the insurance carrier. The client is responsible for timely payment on the account and to inform us of any insurance changes, including additional or new policies.

**CO-PAYS:** Co-payments are due at the time of service or prior to the service. Failure to have co-payment at the time of service will result in rescheduling of appointment.

**UN-PAID BALANCES:** Clients normally receive a statement from the Mental Health Association monthly, after the insurance company has processed the claims. The statement reflects charges that insurance company has not paid. Payment is due within 30 days of the statement date. An account is considered past due if not paid by the date on the statement unless prior arrangements have been made with the billing office. Payment arrangements can be made by 316-685-1821 and asking for billing. We accept cash, check, money orders, debit cards, MasterCard, and Visa. *If no attempts at payments have been made, the account maybe referred to a collection agency.*

**RETURNED CHECK FEES:** The charge for a returned check is \$25.00 payable by cash or money order. This fee will be applied to the client account in addition to the insufficient fund amount. MHA reserves the right to prohibit this payment method if this occurs.

## Treatment of Minors

MHA is proud to provide services to children. Each program may have its own age limits and requirements but generally, we serve children from age 4 and up. In order to engage in services a parent or legal guardian will need to be sign the child's intake forms and be present at the intake. Parents/guardians are also expected to be part of the treatment planning process throughout the course of the child's treatment.

## Pest Management Policy

At any given time, individuals and families could experience an infestation of various pests (including but not limited to bed bugs, cockroaches, scabies, lice, fleas, etc.). MHA services will continue while you are taking proper suggested precautions to reduce risk of spreading pests to additional locations.

### Pest Management Precaution

- Gain as much knowledge as you can on pests, pest management, and prevention.
- If you are renting, report all pest sightings to your landlord as soon as possible.
- Let your MHA provider know as soon as possible as well to assist you in reducing the risk of transferring pests to other locations as well as developing a plan to address the matter.
- Only bring necessary items into offices, buildings, or other's homes to reduce the risk of transferring pests. (Your service provider may ask you to withhold bringing certain items.)
- Maintain a clean-living environment.
- Vacuum your living environment regularly.
- Wash clothing and bedding regularly to minimize risks of bringing outside pests into your home.
- Take all efforts to minimize pests access to food, water, or hiding places.

In most cases the infestation is to the degree that services are interrupted please note that MHA will work with individuals and families to explore resolutions to the infestation and identify any action plan to meet their behavioral needs without increasing risk or transference of such pests.

## Planning for Discharge

Planning for discharge is an important part of service provision and begins at the time of admission. It is important that you participate actively in this planning. Typically, discharges occur in the following manner:

- Consumer decides service is no longer needed and notifies service providers of desire to terminate service. Consumer achieves treatment plan goals and is able to maintain community living without assistance.
- Consumer and service provider plan for a gradual termination from services over time.
- Consumer refuses to participate in the service, work on established goals, or follow program guidelines, and service provider discontinues service.

## ***Policy on Accessibility***

The Association also adheres to the standards set forth in Section 504 of the Rehabilitation Act of 1973. Specifically, no qualified individual with handicaps shall, solely on the basis of handicap, be excluded from participation in, be denied the benefit of, or otherwise be subjected to discrimination under any Federally assisted program or activity administered by the Mental Health Association.

## ***Service Animal Policy***

For the health and safety of our clients, staff and stakeholders MHA has a NO-PETS Policy. Although MHA has a respect and understanding of the role pets play in one's life, we ask that you please leave your pet at home during your visit/business to MHA.

This NO-PET policy applies to:

All Pets

Emotional Support Animals Comfort Animals

Therapy Animals

MHA does allow a federally certified service animal to accompany clients to appointments. Under the ADA Section II and III, a service animal is identified as a dog that has been individually trained to do work or perform specific tasks for people with disabilities. As of March 15, 2011, there are no protections for emotional support animals in terms of access to public accommodations and public entities.

Service animals are required to be leashed or harnessed except when performing tasks where such tethering would interfere with the dog's ability to perform specific tasks. Service dogs must have up to date vaccinations, per ADA guidelines. Clients must always attend to and be in control of the service dog and may be asked to leave if unable to control the dog. Clients are asked to follow all city and state ordinances regarding dog waste.

Thank you for your cooperation and consideration of others.

## ***Tobacco Free Campus***

As a health care provider, MHA is committed to providing a healthy and safe environment for employees, consumers, and visitors and to promoting positive, healthy behaviors.

With this policy, we hope to:

Eliminate secondhand smoke so everyone on our campuses can breathe clean air

Demonstrate our commitment to improve the health of consumers, employees, and the community

Increase mental health providers involvement in treating nicotine addiction

Products Covered by the Policy

Tobacco products include, but are not limited to: Cigarettes

Cigars

Chewing tobacco Pipe smoking

Dissolvable tobacco, including strips, sticks, orbs, and other new products Electronic cigarettes and devices

Physical Boundaries of the Policy

This policy shall apply to all indoor and outdoor spaces owned, leased or contracted by MHA, including:

- Parking lots and driveways that are used by MHA
- MHA vehicles
- Vehicles on property that are owned, leased, or used by MHA
- Adjoining sidewalks to MHA owned or leased property, extending 25 feet from MHA property

## *Transportation Information*

Wichita Transit Authority runs city buses ten minutes before every hour. The downtown transit center is open from 6:00 AM to 6:30 PM on weekdays and 7:00 AM to 5:30 PM on Saturdays. The main Mental Health Association office at 555 N. Woodlawn, Suite 3105, is one-half block from the Central and Woodlawn stop on the East Central bus route. For further information about bus schedules, call 316-265-7221.

Wichita Para Transit Service provides curb-to-curb shared ride accessible van service to individuals for a modest fee. Eligibility requirements apply.

Non-Emergency medical transportation is available through various community providers and is reimbursed by Medicaid.

## *Grievance Procedure*

If a consumer feels his/her rights have been infringed upon, he/she has the right to initiate a grievance/complaint process. At no time will the filing of a grievance or complaint result in retaliation or barriers to service. If the grievance/complaint is not resolved at the first level, the consumer may advance to each successive level, until resolution is achieved. Grievance/complaint procedures are reviewed and explained at the onset of the treatment process and as needed thereafter.

These are the steps to follow if you have a grievance/complaint:

### **Level I - Complaint Resolution**

Consumer will discuss the incident with involved party. Assistance may be rendered by any program staff to assist with resolution at this level.

### **Level II - Formal Grievance Process**

If grievance/complaint is not resolved, the consumer will complete a Consumer Grievance Form and file it with the department head of the program where the incident occurred to initiate a formal review. The form should be completed and submitted within 180 days of the incident. The determination of the case, by the department head, will be made within 5 working days and written notification of the decision will be mailed to the consumer. Employees involved in the grievance may submit a written response and submit to the department head. Both parties may be interviewed.

### **Level III - Review**

If grievance/complaint is not resolved to satisfaction, the consumer will submit a grievance form of the incident for review by the President/CEO. A decision regarding the incident will be made within 5 working days and written notification will be mailed to the consumer. The decision of the President/CEO completes the Agency's review of the incident.

Individuals may be assisted with this process by advocates and persons of their choice. Where necessary and appropriate, the director of the service area will initiate contact with the Adult/Children's Protective Service Unit of the State of Kansas Department of Social and Rehabilitation Services.

Members may file a grievance directly with their managed care company and may request a State Fair Hearing at that time. Grievances filed by members who receive psychosocial rehabilitation services will be forwarded to COMCARE and then to the appropriate entity within two business days of receipt.

If concerns are not resolved to the satisfaction of the member, or if it is the member's preference at any point in the process, the member can contact Kansas Department of Aging and Disability Services at:

Kansas Department for Aging and Disability Services  
New England Building  
503 S. Kansas Ave.  
Topeka, KS 66603-3404  
Phone: 785-296-4986 or 1-800-432-3535





Empowering Lives. Impacting Community.

## **Mental Health Association of South Central Kansas**

555 N. WOODLAWN, SUITE 3105  
WICHITA, KS 67208  
(316) 685-1821

### **Counseling Center @MHA Countryside Office**

9415 E. HARRY, SUITE 800  
WICHITA, KS 67207  
(316) 652-2590

### **Residential Care**

805 S Main  
WICHITA, KS 67213  
(316) 651-1259

Office hours are 8:00 a.m. – 5:00 p.m.  
Check with individual programs for specific hours.

***For Mental Health emergencies after hours, contact COMCARE Community Crisis Center (24hrs.)  
(316)-660-7500***

**[www.mhasck.org](http://www.mhasck.org)**

