Colorado Behavioral Healthcare Council | CBHC

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Program Title: Solvista Connect

Organization: Solvista Health

Program Abstract (50 words max, please)**:**

Solvista Connect (https://solvistaconnect.org) is a digital front door and data warehouse developed to allow clients to start the admission process any time that is convenient for them, from their phone or computer. This microsite allows clients to express interest in seeking treatment, complete basic information about reason for seeking care, preferences for care, and insurance. Form submission initiates follow up contacts from Solvista Health staff to connect them to care. Data from the website provides Solvista Health with a better understanding of client preferences for program development.

Program Description (*Include program development, program information, staffing requirements, pertinent data and start-up costs.*)*: *Please limit to 2 pages, and remember to address all criteria specified.*

Program Development: In the fall of 2019, a multidisciplinary team of Solvista Health staff from IT, Administrative Services, Clinical and Executive areas were selected participate in human centered design training made possible through a grant from Centers for Care Innovation (CCI). The final project in the summer of 2020 was technology focused, and the team chose a solution to make it easier for clients to connect virtually to care in a way that prioritized client experience. With COVID-19, there was a new urgency for virtual availability. Our pre-Covid process included 100% in person options, where clients came to the center to complete their paperwork and assessment. With COVID, we quickly created a link on our website to request care, and provide limited information, and were using that along with DocuSign and an increased number of phone calls with clients to explain enrollment steps. It was not uncommon for the process to last 2 to 3 hours, which didn't always lead to a great client experience and was also cumbersome to staff. Feedback from our clients and Member Advisory Council was that it often felt like administrative details and paperwork were the main focus of the first contact and the client's needs got lost in the mix.

Through the CCI grant ($75,000 from the Tide Foundation) we were able to create a microsite or digital front door that would allow clients to provide valuable information about why they were seeking treatment, complete and sign their paperwork, and start the process of matching them with a clinician, based on the identified client needs. Key goals of the microsite were to create a warmer, easier, client-focused process, to gather data about their needs which could be helpful to treatment, and also to provide us with ongoing data about our client population to allow for further program development and staffing. Having this critical data on a regular basis would also allow us to also track referral sources, as well as to see any trends in the types of treatment/programs needed.

Program development lasted from July to October 2020 and we launched the site in November 2020. Workflow development included collaboration with multiple departments to create the structure to support the online requests and a thorough client follow up process to help get them to their appointment/assessment. In addition, we created workflows to allow any crisis needs to be connected with our crisis team. We incorporated feedback from our Member Advisory Council to allow key words to be chosen within free text forms, that would flag a potential crisis for further outreach, even if a client did not choose the crisis option at the start of form completion.

Our IT team created all the technical functionality to support the workflows, using platforms such as Gravity Forms to create custom forms. They also coordinated all of the other technology including

Microsoft SQL, for reporting/analytics, MySQL replication service, and HTTPS (SSL) web traffic encryption, and OpenSSL . Sophos Enterprise Anti-Virus, Wordfence Web Application Firewall were used for security. They also coordinated an independent security audit of the site by Xerox. While they focused on operationalizing workflow functionality this was in close partnership with A-Train Marketing, who built the microsite.

Program Information

The Solvista Connect website allows clients to complete intake paperwork any time that works for them 24/7. Clients can complete questions and submit the form or save the information to receive an email link so they can finish later. Information is routed to our staff, who review the information, reach out to answer questions and connect them to our intake process. This creates avenues for clients who are in different places of the change process or who may have some ambivalence about starting therapy.

Clients answer key questions through the website, including whether crisis services are needed, what type of treatment they are looking for, what issues they would like to address and free text fields that allow clients to elaborate on anything they would like their therapist to know. They can also provide insurance information or indicate they need information about payment options. Their treatment preferences including days and times that are better for their appointment, and whether they are interested in telehealth services is also collected.

To date, we've had about 600 clients access care through the site. An unexpected bonus has been that staff who are onsite with clients in the community can also use the website to start the enrollment process with clients, and we have been able to share it with community partners for an easy way they can provide for their clients to begin care.

Improved client experience: A small phone survey of the first 54 clients who used the microsite in November 2020—17 clients answered questions, amounting to a 31 percent response rate—. All respondents said that the microsite questions show that the agency cares about clients and their needs. Eighty-eight percent said they would recommend it to family or friends and almost 65 percent said the process was easy to use.

Integrating with programming: The site has already provided helpful information for data driven decision making as we continue to provide services during the public health emergency. Our data analytics and IT team have created reports that we can customize by timeframe so we can track responses for various timeframes to look for trends or changes over time. For example, in November 2020, 77% of clients would like to receive services via telehealth or receive more information about telehealth, versus 74% as of July 2021. So, we know that the demand for telehealth is remaining strong. We know that the top five services clients are seeking are individual therapy, medication, family therapy, parenting support and couple's therapy. Most common reasons for seeking treatment include anxiety, depression, general support and relationships. This is helpful for program development and workforce prioritization.

 Staffing requirements: The site is primarily maintained by our IT department, along with our administrative assistants and peers who provide client outreach. The site was developed in collaboration between 7 staff members, who provided about 4-6 hours of work per week from July through November to get the project implemented. The team now meets twice a month for 30 minutes to review any issues and also to review requests from staff or clients for additional enhancements to the site. In all, we had an in-kind investment of approximately $26,000 of staff time for the development and launch. Current staff respond to approximatelyc15-20 clients per week who have submitted forms through the site.

Start up cost: We had a $75,000 grant, which covered most of our costs. $45,000 was spent on technical design, licenses for software, IT security review, legal review and marketing costs to develop the actual site. The largest cost was staff time which came to approximately $81,000 and included a percentage of dedicated time allocated from seven staff members:

Devon Grier, System Administrator/Manager

Erica Elliot, Program Supervisor

Ruth Hart- Administrative Program Director

Kevin Mills, Database Administrator

Gwen Ferguson, Public Information Coordinator

Mandy Kaisner, Chief Operating Officer

Amie Adams, Chief Administrative Officer

It should be noted that we were already using DocuSign as an agency, so those costs are not included in this project.

Additional information- future plans and portability: The site has spurred additional innovation from our staff who are currently in the midst of developing a clinician/client matching tool to support client engagement, as well as plans to enhance the community partner referral function of the site. Early in the project, we explored ways for the site to be integrated with our electronic health record, but in the end, we decided to create a site we would own and be able to modify and maintain. This was key in our decision as this site can continue to grow and evolve in the future, with no concerns as to potential changes in electronic health records that may take place. This made the investment of effort more worthwhile for our team as we can use this technology as potential building block for our own more robust client portal in the future.