

# Target Capacity Expansion-Health Information Technology (TCE-HIT)

## 1<sup>st</sup> Cohort Implementation Site Visit

### First Call Alcohol/Drug Prevention & Recovery, Inc.



Kansas City, MO



Prepared by JBS International, Inc. for the Department of Health and Human Services, Substance Abuse  
and Mental Health Services Administration, Center for Substance Abuse Treatment



# TCE-HIT Service Design Visit

<b>Grantee Name</b>	First Call Alcohol/Drug Prevention & Recovery Inc.
<b>Grantee Project Name</b>	Mobile MET
<b>Address</b>	633 E. 63 <sup>RD</sup> St., Kansas City, MO
<b>Grant Number</b>	TI1023792-01
<b>Date of Site Visit</b>	October 22–23, 2012
<b>Grantee Contact Person</b>	Ken Ortals
<b>Grantee Agency Director</b>	Molly O'Neill
<b>Government Project Officer</b>	Wilson Washington
<b>Site Visit Team Members</b>	Dave Wanser; Ph.D., Afriika McKinnon, and Alaysia Phillips

<b>Grantee Project Team Member Participants</b>
<p>Keith Gary-Chairman, First Call Board of Trustees  Molly O'Neil, President and CEO  Susan Whitmore, Vice President of Development  Ken Ortals, Project Director  Emily Hage, Project Manager  David and Lucy Brown, Counselors  Stephanie Boyer, Counselor  Lori Worth, Marketing Consultant</p>

# Overview and Summary of Findings

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## Site Visit Overview

The First Call Alcohol/Drug Prevention & Recovery, Inc. (First Call) is a 54-year-old program with multiple private benefactors, including Bank of America and the Health Care Foundation of Greater Kansas. In 2004, First Call created an electronic health record (EHR), called Community Care Link (CCL), to streamline data amongst seven community based social service organizations. In 2008, First Call continued to improve the CCL application by expanding community partnership agencies, blending assessment tools from each agency, eliminating screening tool redundancies, adding missing critical information, and establishing priorities for action and intervention. In 2011, First Call developed Center for Substance Abuse and Treatment's (CSAT's) Health Information Technology (HIT) funded "Mobile Motivational Enhancement Therapy (MET)" project. Mobile MET is an extension of the CCL application designed to increase clients' motivation for sustained engagement with treatment providers through the use of a web-based, client-driven EHR. It is hosted by the coalition known as the Community-Backed Anti-Drug Tax of Jackson County (COMBAT) Connections.

COMBAT Connections Mobile MET is accessible on a wide variety of platforms including Apple and Android devices. Functionality includes text messaging; electronic enrollment forms, screening and assessment tool, appointment scheduling; and mobile applications. The overall project goal is to increase engagement among pre-treatment clients who use Mobile MET services and increase treatment retention for clients who utilize technology-based services from treatment admission to discharge. The population served is predominantly uninsured and underserved individuals aged 18 and over who reside in Jackson County, Missouri. Clients have access to and may receive services from 26 community behavioral health and social service agencies. The 26 agencies connected to the EHR represent a wide range in service providers, such as the drug court system, residential treatment facilities, child welfare system, women and family treatment centers, and faith-based organizations.

Over the course of 1.5 days, the site visit focused on the following goals:

1. Meet with key stakeholders including staff and clients to observe program operations and gain a full understanding of the program's history and current operations.
2. Review the grant implementation and service delivery process to support programmatic strengths while suggesting technical assistance (TA) opportunities to effectively meet challenges.
3. Provide the Substance Abuse and Mental Health Services Administration (SAMHSA) with data on the following factors that will aid in determining opportunities to support the grantee efforts to achieve success:
  - a) Program vision and design
  - b) Program leadership
  - c) Data collection and evaluation
  - d) Community partners, client outreach and implementation plan

e) Sustainability and scalability plan

The meetings were held at the First Call main headquarters in Kansas City, Missouri. Staff members present included the Board Chair Keith Gary; the Chief Executive Officer, Molly O'Neill; and Project Director, Ken Orbals. Molly O'Neill began the day with an overview of the history of the Mobile MET program and its services. The rest of the morning and early afternoon were spent meeting users of the system. Mobile MET's strengths are strong community linkages, a comprehensive and advanced EHR that electronically links 26 agencies. Since development of the CCL platform the 26 agencies have established service records for over 13,000 clients. Mobile MET has the potential to expand and be utilized by most agencies connected to COMBAT connections interface. Additionally, the Mobile MET EHR has the capacity to connect to the local health information exchange (HIE), a noteworthy accomplishment. First Call has an accomplished team, a plethora of resources and utilizes software that has the potential to provide a technology solution for many other behavioral health organizations.

## Program Vision and Design

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Mobile MET has connected 26 agencies utilizing the CCL software. Each partner was able to beta test, provide feedback, and help to make the portal as useful as possible from both a clinical and client centered standpoint. The web-based portal's major strength is that it's user friendly. The current CCL software minimizes the need for extensive training and start-up challenges. The web-based client portal/EHR can aid efforts of the participating agencies to be successful in participating in local efforts to adapt systems to the challenges and opportunities inherent in Health Care Reform, particularly given their ability to connect to the HIE. Future plans also include allowing the portal to directly connect with CSAT's SAIS (Services Accountability Improvement System) GPRA (Government Performance and Results Act) system so that data can be uploaded real-time and without duplicate data entry.

The client portal facilitates client engagement by allowing each participant to access their client record at any time. Currently, there are approximately 90 clients accessing the Mobile MET program. First Call hopes to expand its clients to meet its current grant target of 200 clients. To increase First Call's engagement and retention rates, First Call may benefit in implement a marketing plan that will result in increased referrals to treatment. First Call's marketing consultant should partner with JBS marketing's team to create concepts for reaching consumers through: podcasting, fliers, public service announcements, social media outreach and other strategies. Additionally, First Call should consider developing various intervention packages for pre-contemplators, who may not be ready to engage in treatment, but might be willing to learn more about the consequences of harmful substance use. Intervention and engagement packages could be accessible through a variety of web sources and can provide health risk assessments and patient education materials as an additional meaningful use feature of the EHR. The site visit team also suggests First Call seek TA from JBS to create a focus group with clients, clinicians, and other agencies to determine opportunities for additional self-help tools to add to the EHR. Finally, the site visit team also thinks it may be helpful for First Call to link with other grantees to provide for a collaborative approach to the development of best practice social media tools—including tool-kits and training materials.

## Community Partners, Client Outreach, Sustainability, and Scalability Plan

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First Call was awarded grants in support of its collaborative HIT initiatives by the Health Care Foundation of Greater Kansas City, COMBAT, H&R Block Foundation, Jackson County Community Mental Health Fund and Bank of America. Additionally, First Call launched a technology subsidiary in 2010- that, generates income from CCL licensing fees and IT services provided to outside customers in need of behavioral health EHR's. The business plan projects sufficient earned income to support the Mobile MET project beyond year three of the grant. Additionally, the project has the potential to expand further and has exhibited growth since its development. There are efforts to grow more partners and increasing accessibility for the target population seeking treatment.

First Call has an active and committed board of directors. The board chair, Keith Gary, works in the health care field and has established relationships with most of the major area primary care organizations. At the time of the site visit First Call leadership stated that efforts to establish partnerships with area primary care organizations were in the beginning stages. First Call could benefit from TA towards creating and maintaining primary care partners, particularly with the advent of primary care health homes and Accountable Care Organizations being created as a result of health reform policy implementation.

First call has hired a marketing consultant who is developing a social marketing plan in hopes of gaining expanded potential client and community organization awareness and increased client engagement through FaceBook, YouTube, Twitter and LinkedIn. First Call continues to address resource development and sustainability by maintain a balance between earned income (30 percent), public support (30 percent) and other philanthropic support such as foundation grants (30 percent) in support of service delivery.

## Data Collection and Evaluation Summary

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First Call's capacity for data collection is commendable due to the ability of the EHR collect detailed client information for several years. Reposting capabilities within the application allow for the generation of on-demand reports and the data base can also be utilized by statistical analytic software. Also valuable in utilizing the potential of the system to provide for clinical decision support capability is the high degree of interoperability which allows for connection to State-mandated databases and e-Health Align, the area HIE. Additionally, First Call hopes to interface their database to SAMHSA's SAIS system for ease of uploading required data.

First Call recently switched their contracted evaluator and re-hired the original evaluator from the 2004 pilot program which has slightly delayed work in this area. The evaluation plan has three areas of focus in addition to collecting the required GPRA data. Additional evaluation questions seek to identify specific characteristics of clinicians, clients, and organizations that most successfully implement the portal and mobile applications including secure messaging and the use of the features available on the portal.

## **Technical Assistance Recommendations:**

### **Site Visit Debriefing and Recommendations TA**

- 1) Ensure best practices for marketing/recruiting consumers.
    - a. Develop and implement a marketing plan that will result in increased referrals.
    - b. Partner with JBS marketing team to create concepts for reaching consumers through:
      - i. Podcasting
      - ii. Fliers
      - iii. Marketing slogans
      - iv. Community outreach
      - v. Broadcast and social media
      - vi. Determining the best outreach approaches
      - vii. Developing an intervention package for pre-contemplators, who may not be ready to engage in treatment, but might be willing to learn more about the consequences of substance use.
  - 2) Provide additional meaningful use features to the current EHR.
    - a. Create a focus group with clients, clinicians, and other agencies to determine opportunities for additional health risk assessments, patient education materials and self-help tools to add to the web portal.
    - b. Link with other grantees to provide best practice guidance for social media tools.
    - c. Create tool-kits and training tools to aid in the success of the self-help guidance tools.
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