

**Grants to Expand Care Coordination
Through the Use of Technology Assisted
Care in Targeted Areas of Need
(TCE-TAC)**

RFA # TI-024757

CSAT BIENNIAL PROGRAMMATIC REPORT

Program Reporting Period:

February 1 2015 – July 31 2015

Instructions for Completing this Report

1. Save the report to your computer.
2. Click on the darkened box next to each item to fill in your response.
3. Save your completed survey BEFORE returning it.
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**TCE-Technology Assisted Care (TAC)
SAMHSA/CSAT
1 Choke Cherry Road, Room 5-1055
Rockville, MD 20850**

1. Reporting Period: August 1, 2014 – January 31, 2015
2. RFA #: TI-024757
3. Grantee: Prestera Center for Mental Health Services, Inc.
4. Provider Site(s):

Provider Site Name	Address	Contact Person	Phone/Email
Prestera Center for Mental Health - Cabell County	Pinecrest 5600 US Rt. 60 E. Huntington, WV 25705 Rt 60 3375 US Rt. 60 E. Huntington, WV 25705	Joshua Cardwell	304-525-7851 Ext. 1113
Prestera Center - Lincoln County	25 Lincoln Plaza Branchland, WV 25506	Joshua Cardwell	304-525-7851 Ext. 1113
Prestera Center - Wayne County	146 Kenova Avenue Wayne, WV 25570	Joshua Cardwell	304-525-7851 Ext. 1113
Prestera Center - Boone County	376 Kenmore Drive Danville, WV 25053	Joshua Cardwell	304-525-7851 Ext. 1113
Prestera Center - Mason County	715 Main Street Point Pleasant, WV 25550	Joshua Cardwell	304-525-7851 Ext. 1113
Prestera Center - Kanawha County	511 Morris Street Charleston, WV 25301	Joshua Cardwell	304-525-7851 Ext. 1113
Prestera Center - Clay County	180 Main Street Clay, WV 25043	Joshua Cardwell	304-525-7851 Ext. 1113

5. Project Director: Joshua Cardwell
6. Evaluator: Dr. Girmay Berhie

7. Evaluator Phone/Email: berhie@marshall.edu - 304-696-2718

8. Signature _____

Project Director Signature

Date

9. List any changes in key staff contact information here:

Staff Member	Add/Loss	Effective Date	Email	Phone
Brent Burgess	Loss	5/31/2015	Brent.burgess@prestera.org	304-525-7851 ext 1125
Matthew Kinkead	Add	09/10/2015	Matt.Kinkead@prestera.org	304-525-7851 ext 1125

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BACKGROUND

Provide the abstract from your grant application. Specify all technologies being used in the project and any changes from the initial application.

Abstract. Prester's Technology Assisted Care is a two pronged project which serves to address the behavioral health needs of rural, isolated and economically disadvantaged Appalachians by: 1- enhancing Prester's Center's Electronic Health Record System to include a Patient Portal and 2 - expanding Prester's limited telemedicine capabilities to reach clients throughout the Center's 8 county catchment area. It is expected that at least 2,000 of Prester's Centers clients will access the Patient Portal over the 3-year life of the program. It is also expected that a minimum of 900 individuals will utilize the expanded telemedicine capabilities to manage their medications, access their care provider or receive specialty services which are otherwise unavailable to them.

The first goal of TAC is to improve client treatment outcomes through the use of technology assisted care by enhancing the functionality of CareLogic by the implementation of a secure, HIPAA /HITECH compliant Patient Portal. Through implementing a personal health record system (PHR), Prester's Center clients can access their specific behavioral health information, communicate with providers about their medications, set or adjust appointments, communicate with their provider regarding issues of concern, and access educational information that they need to cope with their illness. Objectives include promoting wellness by increasing the engagement of 2000 clients in their treatment through their use of the TAC patient portal to access services, information and support measured by the types of hits made to the portal site;

supporting recovery and resiliency by providing tools for ongoing monitoring of health status as evidenced by the number of hits made to the portal site; increasing treatment compliance as evidenced by a reduced no show rate from the current 22% to 12%; and by a minimum of 60% attendance to appointments; and improving health outcomes of clients.

The second goal is to improve client treatment outcomes through the expansion of Prester's Center's existing electronic telemedicine system to improve services and communication between providers and clients. By expanding the Center's existing telemedicine system, clients will obtain behavioral health treatment and specialty care without barriers such as transportation, lack of qualified provider, or stigma which may be inhibiting their access to care. Objectives for this goal include **treatment access** through an expanded telemedicine system which will be provided to 900 clients over the course of the program's three years: 200 in Year 1, 300 in Year 2, and 400 in Year 3; **integration of the use of technology in client treatment** measured by tracking utilization of enhanced technology as evidenced by deployment of portable equipment and secure apps allowing increased client access to treatment and improved client treatment adherence. Prester's Center's certified electronic behavioral healthcare system (EHR), CareLogic by Qualifacts, will support the Patient Portal and will be used to document telemedicine use. Outcomes will be shared among all Prester's Center providers engaged in the provision of care to clients through use of expanded telemedicine use, measured by monthly utilization reports.

Technologies being used in the project and any changes from the initial application.

A) Technologies employed in the project:

Hardware	Quantity	Specs	Vendor	Installation location
Apple iPad	20	32Gb w/WiFi	PC Mall - best price on apple products.	Rt60 Huntington Pinecrest Lincoln county Wayne county Mason county 8 th St Huntington Dunbar 511 Morris Clay county Boone county
Stand and Mount components	20	Weighted caster carts, Ipad secure mount, and cable extension.	TigerDirect - Preferred vendor	Rt60 Huntington Pinecrest Lincoln county Wayne county Mason county 8 th St Huntington Dunbar 511 Morris Clay county Boone county
D-Link Access Point	20	Plenum rated, dual	TigerDirect - Preferred	Rt60 Huntington

			band 802.11n	vendor	Pinecrest Lincoln county Wayne county Mason county Putnam county 8 th St Huntington Dunbar 511 Morris Clay county Boone county
	Lifesize UVC 3300 Server	1	ClearSea/multipoint server and maintenance	CDW-G - Preferred vendor for Lifesize equipment	RT60 Huntington
	Laptop's with webcam capability	>20	ClearSea desktop client	Various	Route 60 Mason 511 Morris

PROJECT IMPLEMENTATION

Project Goals and Objectives

Provide status reports of all current project goals and objectives, including lessons learned and best practices using the technologies.

Goal 1: To improve client treatment outcomes through the use of technology assisted care by enhancing the functionality of CareLogic by the implementation of a secure, HIPAA /HITECH compliant Patient Portal.

Status: We have implemented both a “MyHealth” portal which is a portal into the Qualifacts CareLogic product and the “Viverae Health” portal, formally OneHealth”, which is an online recovery community. The MyHealth portal offers consumers the ability to see portions of their health record and upcoming appointments and their demographics. The Viverae Health portal is an online recovery community similar to “facebook” but geared for recovery and wellness. We have integrated a single portal location on our company website which gives information about the services, offers signup instructions, and

provides links to the respective service.

Objective 1-1: Promote wellness by increasing the engagement of 2000 clients in their treatment through their use of the TAC patient portal to access services, information and support measured by the types of hits made to the portal site. For the time frame of Aug 1 – Jan 31, one additional consumer have signed up to be able to access MyHealth (PHR). Unfortunately, our EHR provider has ended support for the portal and is in the process of transitioning to Health Vault for access to clinical records and communication. This transition has been extremely slow and has left us without access. The transition to the portal is still being worked on. There are current legal concerning the way our EHR will be handling the exposure of your PHI.

Objective 1-2: Support recovery and resiliency by providing tools for ongoing monitoring of health status as evidenced by the number of hits made to the portal site. The Viverae Health was very successful, but unfortunately since our last reporting the Viverae health portal has discontinued providing such portal. A replacement has yet to be found. Staff have participated in demonstrations of other online recovery programs.

Objective 1-3: Increase treatment compliance as evidenced by a reduced no show rate from the current 22% to 12%; and by a minimum of 60% attendance to appointments. Communication with provider and medication management will also be monitored. Currently we have a slightly higher no show rate, for the reporting period 23% and we have increased our attendance to appointments to 64%.

Objective 1-4: Improve health outcomes of clients, including those with co-occurring substance use disorders and bipolar disease as evidenced by longer periods of stability of their condition. At this point in time, based on our GPRA data, we have seen a positive rate change of 11.8% in employment and education, a 5.8% positive rate change in housing stability, and a positive rate change of 81.8% in social connectedness.

Goal 2: To improve client treatment outcomes through the expansion of Presteria Center's existing electronic telemedicine system to improve services and communication between providers and clients in treatment.

Status: Initially we implemented a Lifesize Clearsea deployment which allows for mobile devices as well as traditional videoconference equipment to communicate throughout our internal network as well as over the Internet. We have deployed an additional 10 portable iPads on mobile carts as well as 20 additional desktop webcam deployments throughout the agency to allow more clinician availability. This allows our consumers to receive specialized services in rural locations where our doctors may not visit on a regular basis or at all due to the vast geographical distances of rural West Virginia.

Objective 2-1: Treatment access through an expanded telemedicine system will be provided to 900 clients over the course of the three years of the program: 200 in Year 1, 300 in Year 2 and 400 in Year 3. There have been a total of 549 GPRA intakes submitted since grant start and 96 occurred during this 6 month reporting period. This number exceeded the target of 325 by (169%).

Objective 2-2: Integrate the use of technology in client treatment measured by tracking utilization of enhanced technology as evidenced by deployment of portable equipment and secure apps allowing increased client access to treatment and improved client treatment

adherence. Prestera Center's certified electronic behavioral healthcare system (EHR), CareLogic by Qualifacts, will support the Patient Portal and will be used to document telemedicine use. Carelogic and the client portal are in a transition period but will once again provide consumer portal integration and the Lifesize Clearsea deployment continues to expand our Telemedicine capabilities.

Table 1: TAC Services Provided for 8 Counties by Prestera Center Mental Health Telepsychiatry Data

January 31, 2015 – July 31, 2015

Total Number of Unduplicated Consumers	1049
Adult	949
Children	100
Total Number of Unique Services Provided	1049
Total Number of Medical Service Providers (Psychiatric/Nurse Practitioner)	15
Unduplicated Consumers Served by County	
Mason	116
Cabell	226
Clay	148
Boone	343
Lincoln	37
Wayne	21
Kanawha	6
Putnam	158

Objective 2-3: Share outcomes among all Prestera Center providers engaged in providing care to clients through use of expanded telemedicine use, measured by monthly utilization reports discussed and documented during staff meetings. Monthly clinical meetings are conducted and information shared.

Objective 2-4: Improve health outcomes of clients, including those co-occurring substance use disorders and bipolar disease as evidenced by longer periods of stability of their condition measured by follow-up GPRA data collected. At the end of this 6 month reporting period we have

seen a positive rate change of 11.8% in employment and education, a 5.8% positive rate change in housing stability, and a positive rate change of 81.8% in social connectedness.

Goal: NA

Status:

Goal: NA

Status:

Status Toward Goals

If you are falling short in meeting any project objectives, please explain and provide your plan for catching up. Include anticipated date of resolution.

We are falling short entering our data into the designated SAMHSA website because the federal site has been down since February 2015. A waiver was obtained due to site problems. Ongoing phone calls have been held and it is anticipated that the problem may be resolved by the end of December. At the present time we cannot see what data has been uploaded by us and cannot upload additional data. Once the website problem is corrected, Pretera will enter all the outstanding information.

If you changed any project goals or objectives (including GPRA targets) during the reporting period, state the changes, the date changes were approved and how the approval was transmitted.

N/A

If you intend to request approval of changes in any project goals or objectives during the next reporting period, state the changes and the reasons for wanting to make them. (Remember that you need prior approval from SAMHSA to make these changes.)

N/A

ORGANIZATION AND MANAGEMENT

Personnel

List all positions supported by the grant, filled and vacant.

Position Title	Incumbent Name	Percent Time
Principal Investigator	Karen Yost, President & CEO	(5% - Years 1-3)
Clinical Director	Lisa Kaplan, Clinical Director	(5% - Years 1-3)
TAC Project Director	Matthew Kinhead, IT Director	(45% - Y1) (25% - Y2) (30% - Y3)
Qualifacts System Admin	Steven Albrecht	(30% - Year 1&2) (25% - Y3)
IT Systems Engineer	Tony Arthur	(30% - Year 1) (25% - Y2&3)
Evaluation Team Director	Dr. Girmay Berhie	38%

List staff additions or losses including contractors/consultants within the reporting period.

Staff/Contractor Position Title	FTE	Date Change Occurred	Addition or Loss
Brent Burgess / IT Director	1 FTE	5/31/2015	Loss
Steven Albrecht	1 FTE	6/8/2015	Addition
Matthew Kinhead, IT Director	1 FTE	9/10/2015	Addition

Discuss the impact of personnel changes on project progress and strategies for minimizing negative impact.

There was termination of employment for the Project Director, Brent Burgess. Josh Cardwell, Software Engineer continued to provide the technical and reporting responsibilities until the new IT Director, Matthew Kinhead was hired. This has been completed.

Discuss obstacles encountered in filling vacancies (if any); strategies for filling vacancies and anticipated timeline for having positions filled.

The loss of the Project Director was sudden and posed a challenge to recruit and hire. The position was

filled and employment began in early September 2015.

Partnerships

List each of the partner organizations.

Partner

Describe significant changes in relationships and/or working arrangements and summarize the implications of the change.

There have been no significant changes in relationships with the exception of the loss of the online recovery program. There was much satisfaction from our consumers with this tool. We have participated in demonstrations from other online recovery programs and will be identifying a replacement.

Training and Technical Assistance (TA)

Describe staff development activities, including orientation and training for this reporting period.

Staff Development Activity	Date	Number of Participants	Training Provider
None during this reporting period			

If you received technical assistance from a SAMHSA TA provider, describe it.

Type of TA Received	Date	Purpose of Assistance	TA Provider	Additional Assistance Planned for this Issue

If you plan any training or TA activities for the next reporting period, describe the topic and anticipated audience.

Ongoing GPRA training for new staff

PERFORMANCE INFORMATION

GPRA Performance

As close to the last day of the reporting period as possible, check your official GPRA statistics on the SAIS webpage. Complete the table below. Enter the cumulative numbers (from beginning of the grant) from the SAIS reports.

Date on which reporting quarter data was obtained: SAIS site was unavailable to retrieve statistics from. Also the <https://cdp.samhsa.gov/> web site has been unable to receive our GPRA data for the covered date range of this update. Previous data has been left on report.

	Target	Actual	%	Target	Actual	%
Intakes (Baseline)	<i>Example: 10</i>	<i>15</i>	<i>150%</i>	325	402	124%
6-Month Follow	<i>Example: 0 Unavailable</i>	<i>Unavailable</i>	<i>Unavailable</i>	<i>Unavailable</i>	<i>Unavailable</i>	<i>Unavailable</i>

If your intake or follow-up percentages are below 80 percent, please explain and state your plan for reaching your targets.

We were unable to retrieve statistics from the SAIS site, after trying both sites to retrieve data:

<https://cdp.samhsa.gov/>

<https://www.samhsa-gpra.samhsa.gov/>

Also, we have been unable to mass upload our GPRA statistics to the site as well. We have been in discussion with tech support for the site and initially presented this problem via an open ticket in February 2015.

If your count of the number of target or actual persons served (intakes) through your grant or your follow-up rates differ from those shown in your GPRA report, specify and account for the differences. Identify steps taken to seek assistance, if needed, to remedy the discrepancy.

N/A

Evaluation

Describe evaluation activities, progress made/action steps, and changes during the reporting period.

For the reporting period 1/31/15 – 7/31/15, Sheba International, an independent evaluator has mined the GPRA data from the SAMHSA GPRA SAIS online reporting portal on a monthly basis. Additionally, we have received and reviewed monthly reports provided by Pretera from their internal database(s) regarding the utilization of their MyHealth Patient Portal and OneHealth online recovery community. Reports have been sent monthly to Pretera regarding the progress and potential concerns that have been found through the analysis and evaluation process. Pretera is making consistent progress toward their outcomes.

Note any changes to the evaluation plan for this period, and document that GPO approval was received prior to the implementation of the changes.

No changes have been made for this reporting period.

Provide as an attachment the most recent documentation of evaluation findings outside GPRA reporting. Indicate if there are no new evaluation findings from last reporting period.

Evaluation Findings / Current Outcomes have been sent to Pretera as part of their monthly report, with recommendations for improvement included. [see the most recent attached report “Evaluation Report Jan 2015” – section 7 (Outcomes) and section 8 (Recommendations)]. This reporting period (8/1/14 - 1/31/15) has shown that there are concerns regarding the percentage of 6 month follow-ups being completed and subsequently reported in the GPRA SAIS/CDP reporting system.

Discuss any problems encountered in conducting the evaluation, the impact of these problems on the evaluation and on the overall project, and plans for resolving the problems.

The data provided during the evaluation is only as accurate as of 1/31/2015, due to the Common Data Platform, and the respective web site, has been unable to process our GPRA data submissions. We have been granted a waiver for data submission until the problems are resolved.

Discuss how evaluation findings were used to improve the project.

Recommendations for improvement have been sent to Pretera as part of their monthly report (most recent monthly report is attached). Concern regarding the 6 month follow-ups was directly communicated via e-mail on January 14th, 2015 in addition to being referenced in the monthly report.

Attach any written evaluation reports received during the period. Indicate if there are no new evaluation reports from the last reporting period.

Reports sent to Prestera from Sheba International each month in this past reporting period are attached.

Interim Financial Status

Attach an updated program budget and any budget modifications.

Report expenditures, not obligations. For instance, if you have a contract with an evaluator for \$50,000 a year, but pay it monthly, report the amount actually paid, not the amount obligated. Note that we are requesting expenditures for the quarter and from the initiation of the grant, not just expenditures this quarter. [In the 'Total Funding' cell, please enter the total amount of grant funding you have received since the initiation of the grant. For instance, if you are in the second year of the grant and received \$400,000 each year, you would enter \$1,200,000.] Calculate 'Remaining Balance' by subtracting total cumulative expenditures to date from the total funding amount.

Total Funding*:		
Expenditures		
Expense Category	Expenditures This Quarter	Cumulative Expenditures To Date
Staff salaries	\$17,038.54	\$34,073.65
Fringe	\$4,407.68	\$8,568.30
Contracts	\$26,925.00	\$30,775.00
Equipment	\$25,752.69	\$43,386.19
Supplies	\$0	\$0
Travel	\$113.30	\$370.09
Facilities	\$0	\$0
Other	\$0	\$0
Total direct expenditures	\$74,237.21	\$117,173.23

Indirect costs	\$4,770.79	\$4,769.84
Total expenditures	\$79,008.00	\$121,943.07
Remaining balance		\$158,051.93
*Total funding should include supplemental awards if applicable, and supplement expenditures should be included in line item amounts.		

Other Significant Project Activities

Discuss any notable project activities, events, or other issues that occurred during the reporting period not previously described. Describe any problems that emerged, the effect it had on the project and steps taken or planned to overcome the barrier.

N/A

Attach a copy of the project's policies and procedures.

N/A

Attach copies of any publications in professional journals or presentations about your project during the reporting period. Indicate if there have been no publications or presentations since the last reporting period.

N/A

LIST OF ATTACHMENTS

List each attachment separately here and attach to the back of this report.

Attachment 1: GPRA Bi-Annual Evaluation 2 25 2015.docx

Attachment 2: Year 3 Budget Revisions

Attachment 3:

Attachment 4:

Attachment 5:

Attachment 6:

Attachment 7:

Attachment 8:

Attachment 9:

Attachment 10: