

# CCBHC-E National Training and Technical Assistance Center Criteria Series:

## Access - Strategies for Meeting Access Criteria

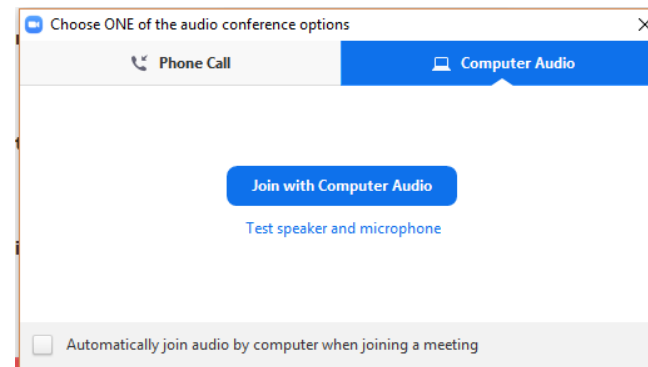
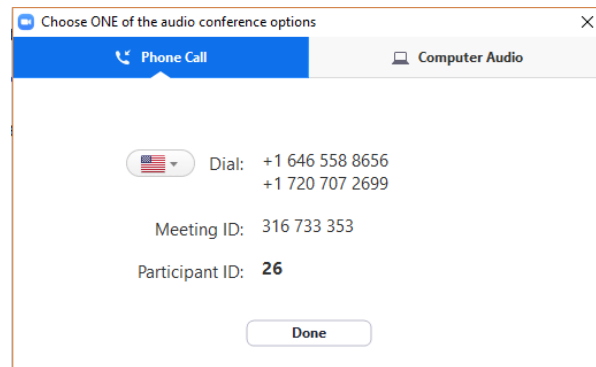
February 22, 2022

**CCBHC-E National Training and Technical Assistance Center**

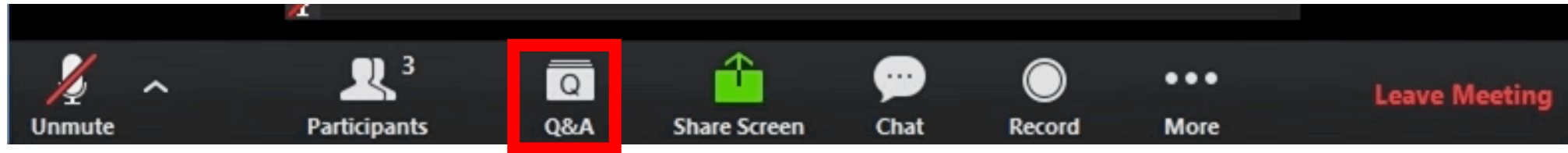
*Funded by Substance Abuse and Mental Health Services Administration and operated by the National Council for Mental Wellbeing*

# Zoom Logistics

- Call in on your telephone, or use your computer audio option
- If you are on the phone, remember to enter your Audio PIN so your audio and computer logins are linked



# How to Ask a Question



Share questions throughout today's session using the **Q&A Feature** on your Zoom toolbar. **We'll answer as many questions as we can throughout today's session.**

# Acknowledgements and Disclaimer

*This publication was made possible by Grant Number 1H79SM085856 from the Substance Abuse and Mental Health Services Administration (SAMHSA). Its contents are solely the responsibility of the authors and do not necessarily represent the official views, opinions, or policies of SAMHSA, or the U.S. Department of Health and Human Services (HHS).*



# Agenda

- Welcome
- Today's Presenters
- 5 Steps to Same Day Access and Virtual SDA – MTM Services
- Clinic Perspectives – Nord Center and Horizon Health
- Q&A Period

# Today's Presenters



**Samantha Holcombe**  
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Practice Improvement  
Center Director  
National Council for  
Mental Wellbeing



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Change Consultant  
MTM Services



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CCBHC Project  
Director  
The Nord Center

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Manager of Adult  
Counseling  
The Nord Center



**Jana Capaccio**  
Director of Clinical  
Initiative Implementation  
Horizon Health Services



# Access Criteria 2.A – 2.E

- General Requirements of Access and Availability (2.A)
- Requirements for Timely Access to Services and Initial and Comprehensive Evaluation for New Consumers (2.B)
- 24/7 Access to Crisis Management Services (2.C)
- No Refusal of Services due to Inability to Pay (2.D)
- Provision of Services Regardless of Residence (2.E)

## Key Highlights

- The opportunity of same day/open access strategies for meeting timely access requirements



# 5 Steps to Same Day Access and Virtual SDA

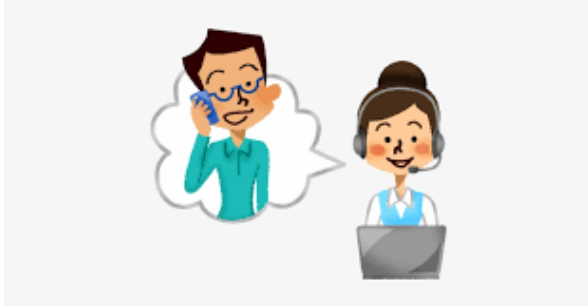
Joy Fruth, MSW



# What is Same Day Access?

- Components of the Traditional SDA model:
  1. BHO offers blocks of time when a client can walk-in *unscheduled* and have an assessment.
  2. When the client walks-in, a clinician completes an assessment and at least one goal of the treatment plan based on the client's presenting problem.
  3. Client leaves with a return appointment for Treatment (target: <8 days) and a psych eval appointment (target: <5 days), if warranted.
- An engagement strategy whereby organizations offer an ***assessment*** on the same day it is requested by the consumer, without a scheduling delay or waitlist, eliminating consumer no-shows for assessment.
- Meets CCBHC access timelines for clients screened as emergency/urgent and ***exceeds*** CCBHC access expectation for routine consumers.

# Traditional Same Day Access



## Screening Call:

- Rule out crisis
- Confirm service need matches services provided
- Insurance?
- Invite client in and give the Same Day Access hours

Target: 3-4 minutes



Client Walks Into the Community BH Center  
for a Clinical Assessment

Credit: dribbble.com Guna D (artist)



TheNationalCouncil.org



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# Traditional Same Day Access

Client Walks Into the Community BH Center



Photo Source: Amerymedicalcenter.org



Photo Source: Pinterest



Photo Source: tampabaytherapist.com



Photo Source: NBC

## Waiting Room:

- Initial Screening (confirm)
- Administrative Forms
- Business/Financial Forms
- Health Questionnaires
- Basic ROIs

Target: 30-60 minutes

## Therapist Office:

- Diagnostic Assessment
- At least one individualized Treatment Plan goal

Target: 60 minutes

## Reception:

- Schedule next appointments
- Target <8 days to return for treatment.

Target: 1-5 minutes



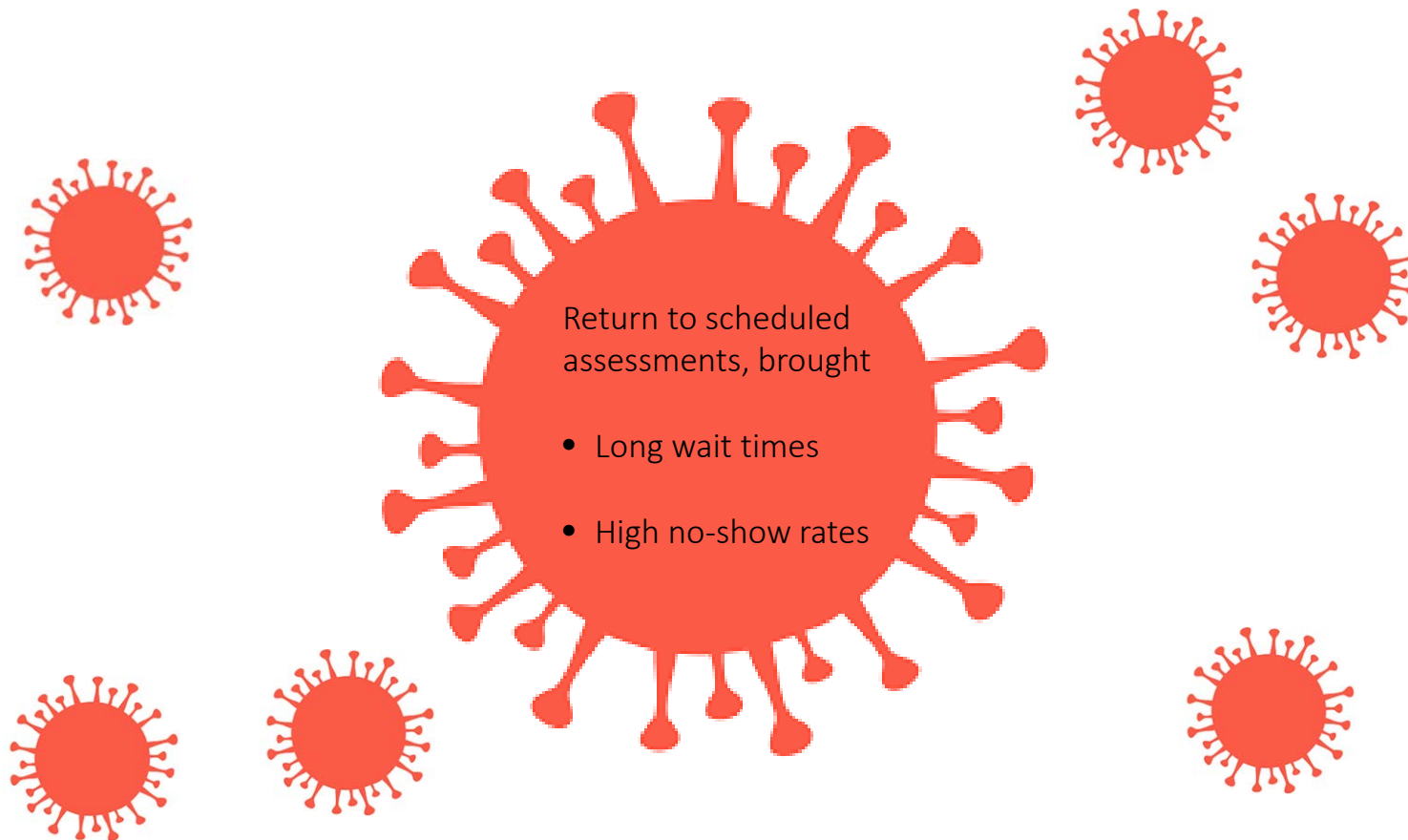
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# Traditional Same Day Access

- Around since the 1980s.
- Considered a best practice.
- Worked well, until...



# Virtual Same Day Access

Based on the Traditional Model of Same Day (walk-in) Access, but entirely *virtual*.



## Screening Call:

- Rule out crisis
- Confirm service need matches services provided
- Insurance?
- Confirm client's available technology and give login hours and login details (no password/account required)

Target: 5-6 minutes

Client *Logs In* to the BH Virtual Waiting Room



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# Virtual Same Day Access



Credit: Healthcarefinancenews.com

- Enter the virtual waiting room
- Greeted by administrative support staff
- Complete consents and release forms digitally
- Return to the virtual waiting room until the clinician is ready.



# Virtual Same Day Access



Credit: Healthcarefinancenews.com



# Virtual Same Day Access



Credit: Healthcarefinancenews.com

# Virtual Same Day Access

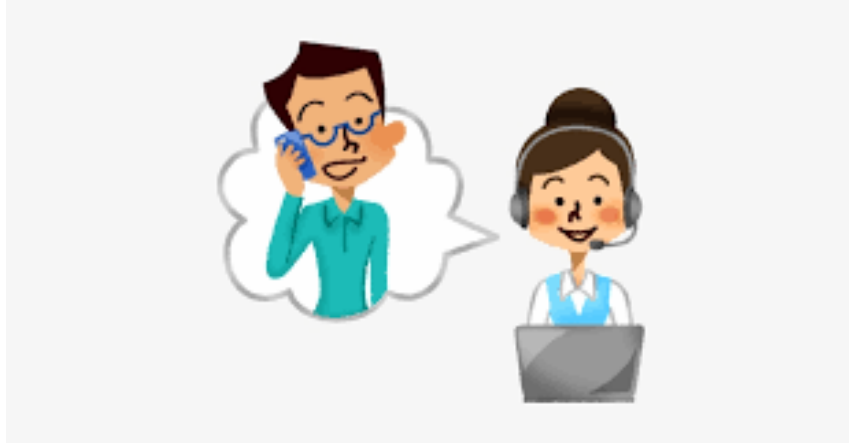
With Clinician

- Complete Assessment
- One Treatment Plan goal
- Leave with a scheduled appointment to return within 5-8 days.



Credit: Healthcarefinancenews.com

# What if client can't connect virtually?



## Screening Call:

- Rule out crisis
- Confirm service need matches services provided
- Insurance?
- What if client has no telehealth capability? Invite client in and give the Same Day Access hours.

Target: 3-4 minutes



Invite them to walk-in but be seen virtually.



# Traditional Same Day Access, Virtual Assessment

Client Walks Into the Community BH Center



Photo Source: Amerymedicalcenter.org



Photo Source: Pinterest

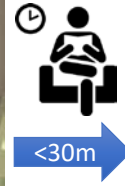


Photo Source: NBC

## Waiting Room:

- Initial Screening (confirm)
- Administrative Forms
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- Basic ROIs

Target: 30-60 minutes

## ZOOM Room:

- Diagnostic Assessment
- At least one individualized Treatment Plan goal

Target: 60 minutes

## Reception:

- Schedule next appointments
- Target <8 days to return for treatment.

Target: 1-5 minutes



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# 5 Steps to Same Day Access and virtual SDA

Step 1: Confirm SDA “fits” and select your telehealth platform.

# 5 Steps to Same Day Access and Virtual SDA

Step 1: Confirm SDA “fits” and select your telehealth platform.

- Basic guidelines:
  - Are your no-show rates for assessment higher than 10%?
  - Do you do more than 10 new assessments per month?
  - Are your wait times to assessment longer than same day/next day?

If YES to any of the above, then Same Day Access might be right for you!



# 5 Steps to Same Day Access and virtual SDA

Step 1: Confirm SDA “fits” and select your telehealth platform.

- Virtual waiting room capability.
- No login or client password required.
- Meeting link never changes so it could be published in standard emails and on your website.



# 5 Steps to Same Day Access and Virtual SDA

Step 1: Confirm SDA “fits” and select your telehealth platform.

Step 2: Choreograph the Client’s Journey (and your workflow).



# Step 2: Choreograph the Client's Journey

## Script Initial Phone Call



### Recommendations:

- Target 5-6 minutes.
- Never Say  
“First Come, First Served”.

When we say, “first come, first served”

**What we mean**



**What the client assumes**



**What will happen**



# Step 2: Choreograph the Client's Journey

## Client Walks In to the Community BH Center



Photo Source: Amerymedicalcenter.org



Photo Source: Pinterest



Photo Source: tampabaytherapist.com



Photo Source: NBC

### Waiting Room:

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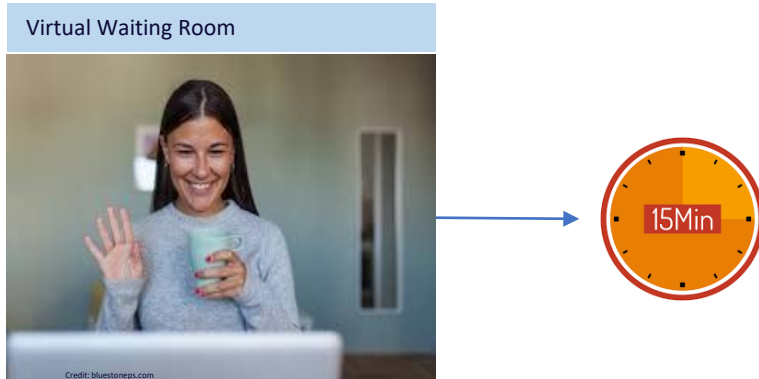
### Reception:

- Schedule next appointments
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Target: 1-5 minutes



# Step 2: Choreograph the Client's Journey



## Recommendations:

- Target 30-60 minutes
- Complete all administrative forms digitally.
- Reduce assessment session time by gathering information like health history, education, medications, etc.



# Step 2: Choreograph the Client's Journey



## Step 2: Choreograph the Client's Journey



- Attention spans are short online, so minimize downtime in your vSDA design.
- Create things for the client to do in the virtual waiting room to stay engaged.
  - Fact sheets / reading materials
  - Organizational / educational videos



# Step 2: Choreograph the Client's Journey



# Step 2: Choreograph the Client's Journey

## Virtual Waiting Room



Credit: bluestoneps.com

### Recommendations:

- Target 30-60 minutes
- Complete all administrative forms digitally.
- Reduce assessment session time by gathering information like health history, education, medications, etc.



## With Clinician

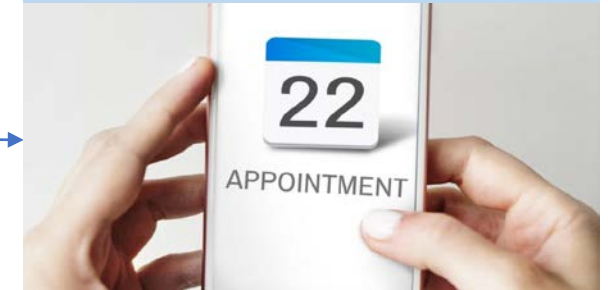


Credit: healthcarefinancialnews.com

### Recommendations:

- Target a 60-minute session.
- Complete one treatment plan goal so that next client session can be therapy.
- If your assessment can't be done in 60 minutes, then.

## With Scheduler



Credit: patientpop.com

### Recommendations:

- Next client appointment should be scheduled within 8 calendar days.
- Scheduling beyond will undermine client engagement.

Entire process should not exceed 2.5 hours.



# Step 2: Choreograph the Client's Journey



Design contingency plan to implement if:

- Assessor is out sick,
- Demand exceeds capacity,
- Wait times to the assessor exceed 15-30 minutes.

Typical Contingency plan:

First: Is there another clinician available d/t no-show or late cancel?

Next: Is there a supervisor available to complete the assessment?

Last Resort: If none of the above, then give a Fast Pass for the next day.

If you turn clients away routinely, something is wrong with your design. Diagnose the problem and fix it!



# 5 Steps to Same Day Access and virtual SDA

Step 1: Confirm SDA “fits” and select your telehealth platform.

Step 2: Choreograph the Client’s Journey (and your workflow).

Step 3: Establish Clinician Hours.

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Use a formula:

$(\text{assessments completed} * \text{minutes per assessment}) + \% \text{ of projected increase in assessments completed} = \text{Total clinician hours needed}$

$30 (\text{assessments per week}) * 60 (\text{minutes per assessment})$

$= 30 \text{ clinician hours needed per week}$

$30 \text{ clinician hours per week} + 15\% = \sim 34.5 \text{ hours needed per week.}$

By comparison, if you completed 30 assessments per week and had a 25% no-show rate, that means you actually *scheduled* 40 assessments or 40 clinician hours per week.

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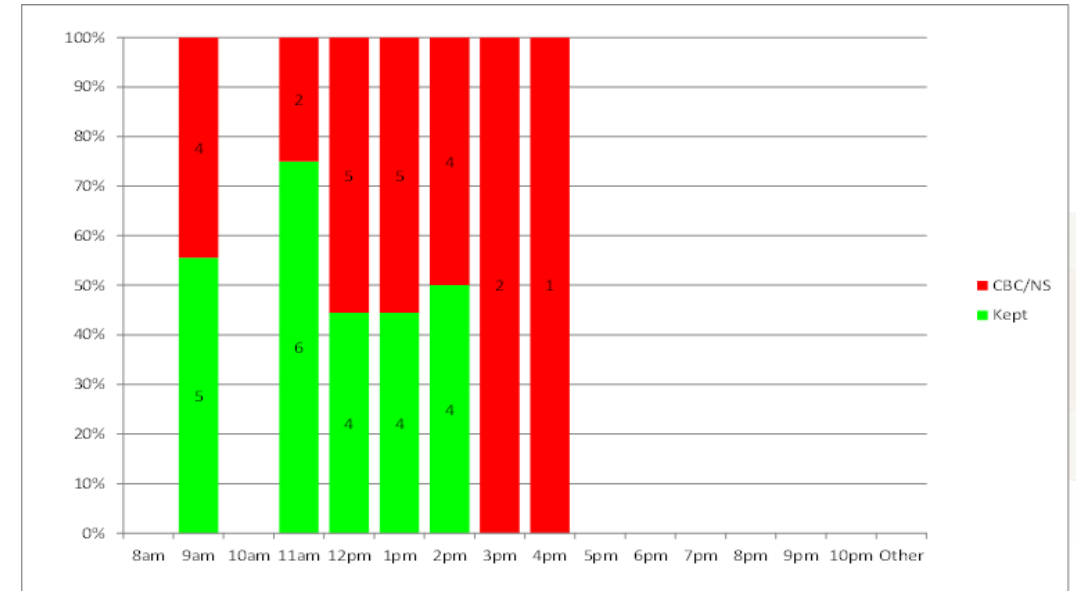
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- Use current data to determine *when* clients are more likely to show up *now* for their assessments.
- What clients do when scheduled is a good predictor of what they will do unscheduled.
- Look for variance by TOD and DOW.
- Offer SDA during popular times.



# 5 Steps to Same Day Access and virtual SDA

Step 1: Confirm SDA “fits” and select your telehealth platform.

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Step 3: Establish Clinician Hours.

Step 4: Test Everything

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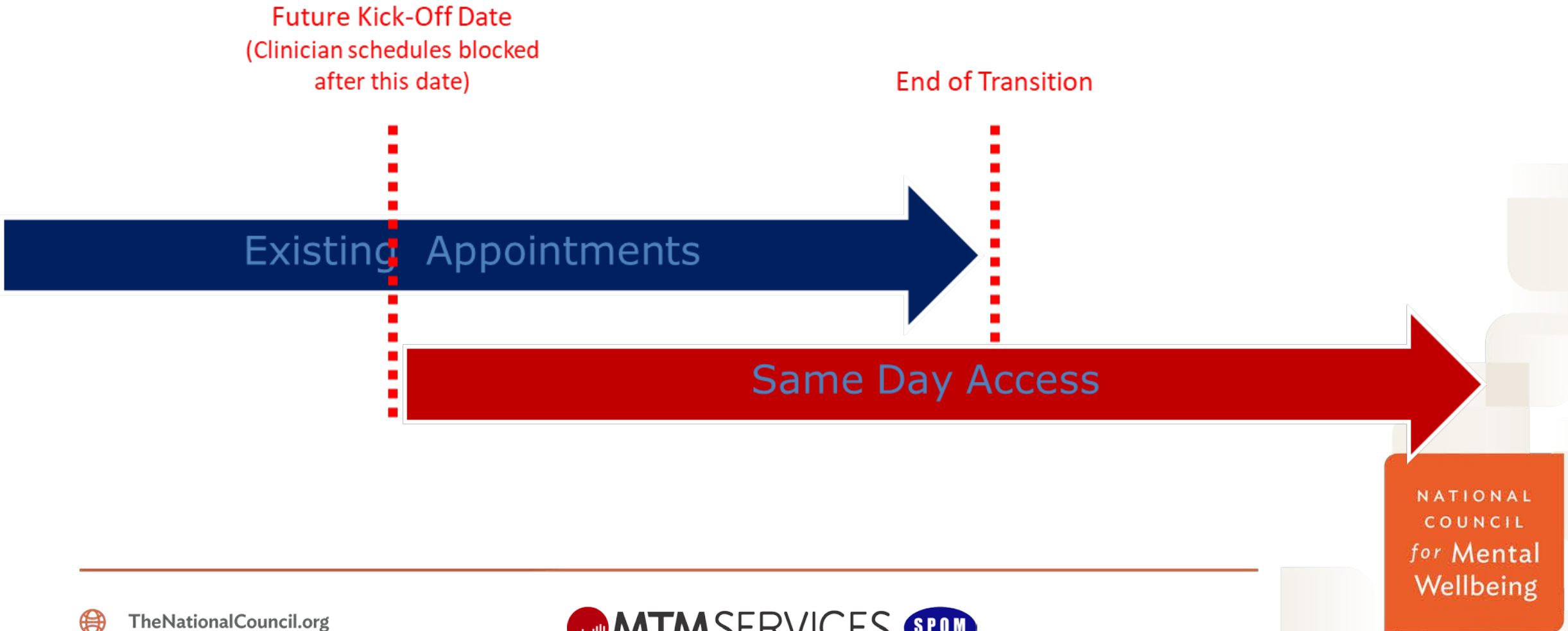
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Step 5: Plan Your Transition.

# Step 5: Plan your Transition



# 5 Steps to Same Day Access and virtual SDA

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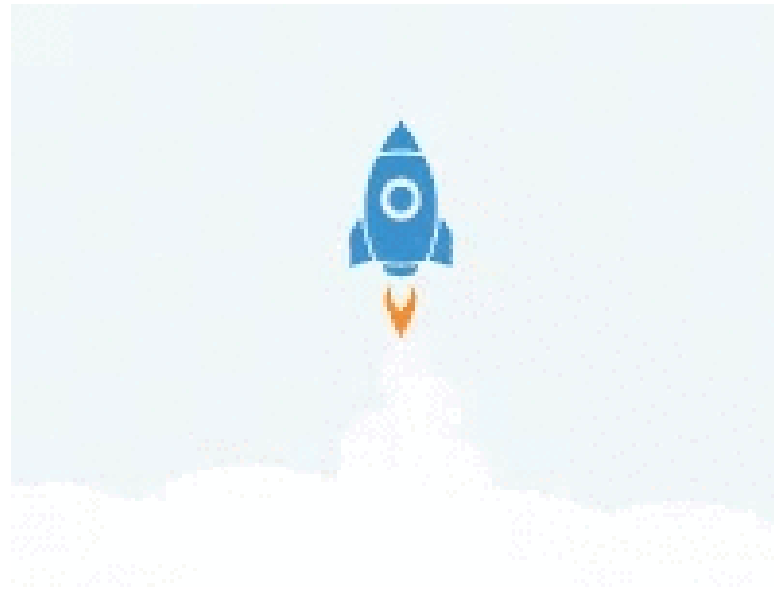
Step 2: Choreograph the Client’s Journey (and your workflow).

Step 3: Establish Clinician Hours.

Step 4: Test Everything

Step 5: Plan Your Transition

GO!





# Commonly Asked Questions

What about a hybrid model?



# Hybrid model? NOT recommended



- 30 new assessments completed per week

- Scheduled model  
25% no-show rate, so schedule 40 assessments per week
- Hybrid Model
  - Offer scheduled appointments and SDA on Wednesdays for 8 hours.
  - Most clients choose to schedule, but still have a 25% no-show rate.
- Same Day Access  
0% no-show rate

# Hybrid Model Challenges



30 new assessments  
completed per week

- Scheduled model = **40** clinician hours  
25% no-show rate, so schedule 40 assessments per week
- Hybrid Model = **48** clinician hours
  - Offer scheduled appointments and SDA on Wednesdays for 8 hours.
  - Most clients choose to schedule, but still have a 25% no-show rate.
- Same Day Access = **34.5** clinician hours  
0% no-show rate



# Sustainability

If you only implement SDA, you will likely run into trouble within about 6 months. Your changes must be more complete to sustain SDA and maximize your service capacity. Often, teams need outside help to make this transition successfully:

- Collaborative Documentation
- Centralized Scheduling
- No-Show Management for established consumers (no more than 15%)
- Just-In-Time Scheduling for Prescribers
- Episode of Care Management
- Use more treatment groups to help with increase in volume

# The Nord Center

Melissa Myers  
CCBHC Project Director

Sarah Papesh, LPCC-S, CTP  
Manager of Adult Counseling

**CCBHC-E National Training and Technical Assistance Center**

Funded by Substance Abuse and Mental Health Services Administration and operated by the National Council for Mental Wellbeing



**The Nord Center** is located in Lorain County, Ohio and is the largest provider of comprehensive behavioral health services in the county providing services over multiple locations with an agency budget of 28 million dollars.

In 2021, The Nord Center provided services to over 8,000 clients under five main core services: Behavioral Health Services for Adolescents & Youth, Behavioral Health Services for Adults, Residential and Housing Services, Crisis Service, Sexual Assault Services.

As a CCBHC-E grantee, resources became available to support consultation by organizations like MTM Consulting. *Same Day Access* is allowing the agency to meet defined metrics for access to care.

Care Coordination under the CCBHC model is providing linkage from those receiving crisis services to ongoing services at Nord. *Same Day Access* helps to further eliminate barriers to access.



# Same Day Access The Nord Center

- Considerations for choosing SDA
  - Domino effect: Workforce shortage > Longer wait times > Higher no show rates > Lost productivity
  - Hybrid model not highly effective
- Critical pieces to making SDA work
  - Staff buy in - highlighting benefits and improved workflows to make their jobs easier
  - Reworking roles to assist SDA
- Lessons learned
  - Change is hard but not impossible





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# Horizon Health Services



Jana Capaccio, MA, LMHC  
Director of Clinical Implementation Initiative

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# Horizon Health Services – Quick Facts

- Founded in 1975
- Horizon is composed of 3 affiliated not-for-profits
  - Horizon Health Services
  - Horizon Village
  - Health Management Group
- 20+ locations across WNY in Erie, Niagara and Genesee counties.



# Horizon Health Services – Services & Programs

- Outpatient
  - Mental health and substance use treatment for adults, adolescents & children
- Horizon Village Terrace House
  - Detox & stabilization
- Horizon Village Campus
  - Residential treatment for severe substance use disorders
  - Horizon Village, Freedom Village, Delta Village, Aurora Village, & Wellness Center
- Adolescent and adult psychiatry
- Telehealth
- Parent & Family Support Coordinator
- Family counseling and education
- Medication-assisted treatment
- Opiate Overdose Prevention training
- Continuing care & support services
  - Care Coordination
  - Recovery Coaching
  - Job skills and vocational services
- & more!

# Horizon Health Services – Same Day Access

- Why we made the transition to Same Day Access (SDA)
  - Reduce no show rate
  - Reduce unnecessary prep work
  - Provide meaningful treatment interventions during the first visit
- Virtual SDA
  - Virtual Waiting Room
  - Things to consider (SDA vs. Virtual SDA)
  - Lessons learned



# Questions?

# Reminder: Sign up for Office Hours

**Thursday, February 24, 2022 – 1:00-2:00pm ET**

Register [here](#)

Looking for more time to dive deeper with our presenters,  
get your questions answered or exchange ideas?

Join our follow-up office hours session!



# Questions or Looking for Support?



## Receive assistance from our team of experts!

The CCBHC-E National Training and Technical Assistance Center provides consultation and technical assistance on CCBHC implementation to expansion grantees. Fill out this form to request assistance today.

Request Training/Assistance

Fields marked with an (\*) are required.

First name *	Last name *
<input type="text"/>	<input type="text"/>
Title *	Organization/Company *
<input type="text"/>	<input type="text"/>

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<https://www.thenationalcouncil.org/ccbhc-e-nttac/>



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# Thank You

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It will pop up once the webinar is closed.