## **Improving the Front Door Experience**

For several years now, SCCMHA has taken steps to improve the consumer experience when requesting services for the first time. This began with a complete renovation of the Centralized Access/Intake and Crisis space in 2015. The goal of the renovation was to create a more welcoming and safe space for individuals when they entered services. This newly redesigned space opened officially on May 12, 2015.

Having this beautiful space available made it possible to begin to look at other changes to the process. Through a SAMHSA System of Care grant, we identified the need to add Family Guides to the Unit. Families identified their struggles with navigating the community mental health intake process and these positions were created to help support them. Family Guides were individuals with lived experience (they had raised a child who had been in the system) thus they were able to relate to parents calling for services and were able to help them to go through the process. Today, when a parent calls for services, they are immediately connected to a Family Guide who can help to schedule an appointment and help them choose services that best meet the needs of their child.

The next area of improvement was around the no show rate. Data revealed that nearly 53% (slightly higher than the national average of 50%) of persons calling for services did not show up for their scheduled intake appointment. We understood how hard it was for an individual to make that first call asking for help. We also knew that the research showed that the longer a person waits to get an appointment the more likely they are not to show. By State standard, SCCMHA has up to 14 days from the time the person calls for services to their actual intake appointment. We were fairly certain that this long wait between the first call and the intake was likely adding to our high no show rate. On 1/30/17, SCCMHA implemented same day/next day services. Any individual calling for an intake appointment was offered the opportunity to come in that same day for services, come in the next day or schedule an appointment within the required 14 days. One year after implementation, the data revealed that 41% of callers were choosing same/day or next day appointments. The best news was that with this change in process, we were able to reduce the no show rate to 15%!

Having improved upon the no show rate, we were able to move forward with looking at ways to improve the front door experience for families presenting for services. We had been hearing from families and system partners (DHHS, Court staff) that it was taking families too long to get to needed mental health services. Though well within State timeliness guidelines, our review of data helped to uncover why this frustration existed. First of all, a review of data from fiscal years 2013 through 2015 showed that 84% of youth had severe functional impairment and/or high risk behaviors at the time of intake. This would suggest that the family is likely in a state of crisis at the time of their call. In addition, we learned that only 39.6% of these families completed the intake appointment activities during the first session. 60.4% had to return for at least one additional intake appointment. With that being understood, we discovered that by the time a family completed the intake and their first orientation meeting it could be up to 54 days from that first phone call before the child had their first therapy appointment. For a family in crisis, this is far too long. SCCMHA is currently in the process of redesigning this front door process. We have identified a model that will help us to provide stabilization services immediately for families while we take time to explore which of the many evidence based practices SCCMHA offers might best meet the needs of their family. We began piloting this new model this year. Stay tuned for updates.