Novelhealth

consulting report

Workit Health

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Executive Summary

Workit Health is an outpatient addiction clinic that primarily uses telehealth to deliver care. While addiction services have been long standing, their innovative approach is entering a new space without established processes. This means that they are creating their own path as they go and with that comes its unique set of challenges. They recently launched their Rapid Access Opioid Program, to provide better and faster care to those struggling with an opioid addiction. Workflow has posed to be a significant challenge for Workit Health, especially with their new program as intake can be more complicated and requires more steps than their other services. Many contributing factors can make intake difficult. As already mentioned, they have needed to establish their own processes. Working in the addiction space makes this especially difficult as they must comply with existing regulations, such as HIPAA, when caring for patients and managing sensitive medical information.

Our team was brought on to find solutions to better their workflow and gain an understanding to what barriers they may be facing. We conducted several contextual inquiry interviews with staff members who fill different roles within the company. Once completed, the qualitative data collected was interpreted in order to determine solutions and recommendations on how to improve their workflow. The recommendations were evaluated based on short- and long-term goals, taking into account the ease or difficulty they would have in completing them.

Recommendations were then split into three categories:

- Short-term solutions: those that we consider the most viable.
- Intermediate solutions: require more time and finances, but are still attainable in the near future.
- Long-term solutions: not currently feasible, but would provide significant improvements to workflow.

Short term recommendations relate to communication among staff members and resources available to patients. Our recommendation to improve communication builds on the existing channels they already have in place. Workit Health staff currently use a number of different communication channels where tasks can get lost. We found that

one of the communication portals they use, Asana, may be able to consolidate many of these channels. We suggest more training and research be done on this platform to discover its full potential. Meetings conducted with their California location we found could be improved with a better video setup. The current method used is a small laptop which is less than ideal when there are a group of participants. If a larger monitor were to be installed, this would provide a better setting for these meetings as it would provide a better visual for staff members. Additional resources such as brochures and one pagers which provide information about the clinic and the intake process we feel would also be a relatively simple task that would greatly improve workflow, especially for incoming patients.

Intermediate recommendations primarily connect to the intake process improvements for both staff and patients. Currently the initial calls from patients seeking care are all taken personally by one staff member. An automated phone system would reduce the burden on staff members and provide a more streamlined process for incoming calls. We also propose improvements to the mobile app and website. The Workit Health mobile app should be in the app store for both Apple and Android devices so it is easy to find. We also suggest for the app to be more comprehensive in assisting patients in the Rapid Access Opioid Program through the intake process. Adding interactive features that show where in the process they are and upcoming steps, would help assist patients through intake and provide a simple visualization for them. The website we feel should also be simplified and slightly redesigned to make sure information and pricing is clearer to those inquiring through the site.

Long-term recommendations seek to tackle the workflow concerns on a much grander scale. A major pain point we discovered is issues with their current EHR. While not presently available, an EHR that could consolidate all their communication portals while still being HIPAA compliant would streamline patient intake on the back end drastically. Additional staff and physicians in the future would also improve workflow and help delegate tasks.

These solutions we propose are detailed below, and we feel will provide Workit Health a clear guideline to follow as they make improvements to their processes.

Introduction

OVERVIEW

Workit Health is a passionate health firm that seeks to become a virtual "Mayo Clinic for addiction."[1] The group has a variety of services to combat addictions, most recently they have launched their Rapid Access Opioid Program to combat Opioid addiction. Workit believes in expanding opportunities for treatment in the addiction community to connect with a greater proportion of its individuals.[2]

Workit Health has built on its services over time, but remained true to improving resources for addiction communities. The organization brings a modern edge to addiction care by incorporating technology and user-centered design throughout their resources. The group originally focused on behavioral coaching, but in response to the growing severity of the opioid epidemic has entered the realm of medical and clinical treatment.[3]

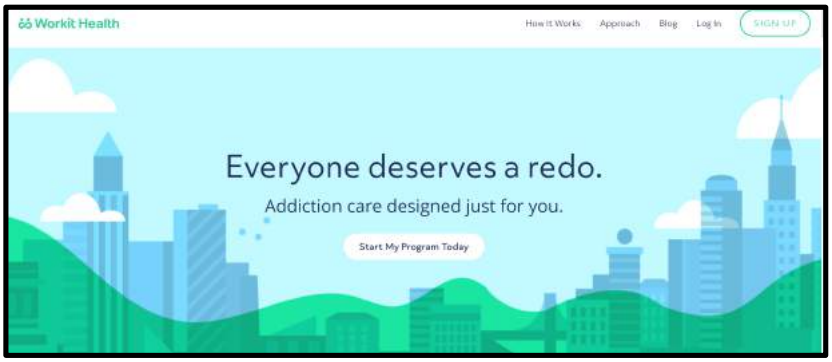

Fig 1: Workit Health's homepage, with their foundational belief, "Everyone deserves a redo". Retrieved from www.workithealth.com.

CORE VALUES

Workit Health values their idea that "Everyone deserves a redo."[4] The firm allows individuals with a history of substance-use disorders a unique opportunity to use technology and personalized coaching to work through their personal battles with addiction.

The Workit Health approach, unlike many other addiction care groups, is not specific to one type of addiction. Their openness to treating many types of addictions (i.e.

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[1] Staff, S. (n.d.). Ann Arbor firm wants to be digital "Mayo Clinic for addiction". Retrieved October 20, 2017, from http://michiganradio.org/post/ann-arbor-firm-wants-be-digital-mayo-clinic-addiction

[2] McLaughlin, L. (2017, October 20). Workit Interview [Personal interview].

[3] Weidmayer, K., & Hayes,K. (2017, September 29). Initial Client Contact [Personal interview].

[4] Home. (n.d.). Retrieved October 20, 2017, from https://workithealth.com/

gambling, smoking, drinking, and opiates) allows them to appeal to a much larger population of clients. They are science-based and non-secular, to reach more clients.[5]

MISSION

Workit Health's mission is two-fold. First, expand the environment of addiction care by providing a telehealth model in communities that lack the treatment resources. Second, Workit aims to care for clients with as many addictions as possible.[6] The group primarily uses behavioral interventions for treatment of all addictions, but additional medical interventions are used for opioid treatment. The company believes that many current methods of addiction care are not well suited for individuals battling addiction.

Workit has technology at the core of their workflow model to communicate with clients through coaching and online interventions. The group wants to develop technology in their treatment and reach out to communities who suffer the most from addiction and don't have resources for treatment. While many previously established groups (e.g. Alcohol Anonymous) require more in-person and specific criteria to be involved Workit seeks to expand the net of addiction and location through introducing a telehealth care model.

"Resources don't exist yet so we are in uncharted territory."

Workit has recently expanded their Rapid Access Opioid Program (RAOP) to help individuals battling opiate use disorder through their standard coaching program along with clinical coaching and medical prescriptions. Workit seeks to reach out to the communities that don't have a doctor down the street by using telecommunications to bridge the gap of physical distance. This newer tech-centered form of treatment has been historically in-person, but with Workit Health's "Telehealth Model" clients can check-in with their doctors remotely. The flexibility in location allows for busy clients to stay on track in their care programs without having to frequently find transportation to the physician's office responsible for treatment.[7]

[5] McLaughlin, L. (2017, October 20). Workit Interview [Personal interview].

[6] Hayes, K. (2017, October 20). Contextual Interview [Personal interview].

[7] McLaughlin, L. (2017, October 20). Workit Interview [Personal interview].

Fig 2: Workit Health values care for addictions across a spectrum of substances and habits. Retrieved from www.workithealth.com.

GOALS

Workit has presented several objectives in their organization, ranging from ongoing goals to others more long-term. Workit really seeks to be a service for companies by serving as an outlet for employees to get professional help through their employer for addiction.[8] Additionally, Workit reaches many of their clients on an individual level, excluding the employer process entirely. Workit wants to be inside companies and inside neighborhoods to find people battling addiction and provide addiction care.[9]

At the individual level, Workit seeks to catch clients in a very fragile "moment of willingness." Many individuals with substance-use disorder may only reach out one time in what is called a "moment of willingness." If that opportunity is not maximized these people may not seek help again and fall deeper into their addiction habits.[10] Workit Health wants to be as close to the communities as possible who are battling addiction and believe that Ypsilanti, Michigan was a strong location to set up their Headquarters. Originally based out of Ann Arbor, they felt that Ann Arbor had an over saturation of addiction care and did not need treatment resources to the degree of Ypsilanti. Workit Health continues to expand in its locations and would like to reach as many domestic addiction communities as possible.[11]

[8] For Employers. (n.d.). Retrieved October 22, 2017, from https://workithealth.com/for-employers/

[9] Hayes, K. (2017, October 20). Contextual Interview [Personal interview].

[10] Hayes, K. (2017, October 20). Contextual Interview [Personal interview].

[11] McLaughlin, L. (2017, October 20). Workit Interview [Personal interview].

Fig 3: The evolution of clinical records from paper-based, to computer/portal centered, to potentially app-focused. This evolution mirrors Workit Health's model regarding the later stages. Retrieved from https://www.du.edu/admission-aid/.

Finally, a long-term goal of Workit Health is to build a self-sufficient mobile platform for clients. Originally much of healthcare treatments were recorded on paper. Workit Health has centered on using the Internet to create an interactive website to serve as a portal between Workit staff and clients. Eventually, Workit hopes to build an all-encompassing application for mobile phones. In their application, they plan to reach more people than a paper based, in-person treatment system ever could. With the mobile app, they would also have potential to always be by their clients' side and could build a strong rapport and trust with their clients. This application is Workit's ultimate goal of becoming a convenient portal for all parties to stay involved in timely care.[12]

[12] Weidmayer, K., & Hayes, K. (2017, September 29). Initial Client Contact [Personal interview].

Background

HISTORY

Workit has built itself at an exponential pace in its short lifespan. The Co-CEOs Lisa McLaughlin and Robin McIntosh developed Workit Health as a startup to expand care resources for the addiction community. They have placed a tremendous amount of effort into this organization from employee recruitment to securing funding. The passion that resides throughout Workit Health is necessary to combat the deep and expanding problem of the Opioid Epidemic. With their expansion of the company into the clinical space, the group has continued to push the boundary of what they can do and most importantly, who they can help.[13]

Fig 4: Telehealth has the potential to connect many avenues of medicine, from ambulatory care to managing substance-use disorders. Retrieved from https://mhealthintelligence.com/news/michigans-new-telehealth-law-requires-patient-consent.

COMPANY BACKGROUND

Workit Health began from internal motivations by the company's two CEOs, Lisa McLaughlin and Robin McIntosh. With personal drives to build up a stronger and more comprehensive care for addiction they sought to develop a model of care that maximizes the use of modern technologies. The CEOs launched the company in 2015 to improve outcomes after losing personal friends in the recovery community.[14]

Workit launched with primarily behavioral treatment for addiction care. Originally, they focused their services on helping all types of addiction through an online coaching program where clients received a lesson plan and personal coach. This behavioral-focused plan looks at tailoring the recovery path to each client and serving as a system that values the client on a personal level. The original program was working well, but with the opioid epidemic continuing, Workit Health wanted to do more for these

[13] McLaughlin, L. (2017, October 20). Workit Interview [Personal interview].

[14] L. (2017, July 10). Interview with Workit Health's Co-Founder, Robin McIntosh. Retrieved October 22, 2017, from https://livsrecoverykitchen.com/interview-workit-healths-co-founder-robin-mcintosh/

clients. They decided that launching the Rapid Access Opioid Program, a telehealth program, could build medical treatment into the behavioral treatment plan for individuals battling Opioid addictions.[15]

The new idea of treatment of Telemedicine centers around using mobile connections to pair a patient and their relevant health information with a practicing clinician. Telehealth as an industry has evolved in tandem with smartphones and improved telecommunications. Regarding care to opioid recovery telehealth has been relatively unused until more recent times. Workit Health's Rapid Access Opioid Program is their newest service for their clients. This service takes in clients requesting medical treatment and physician support along with the behavioral components of Workit Health's program.[16]

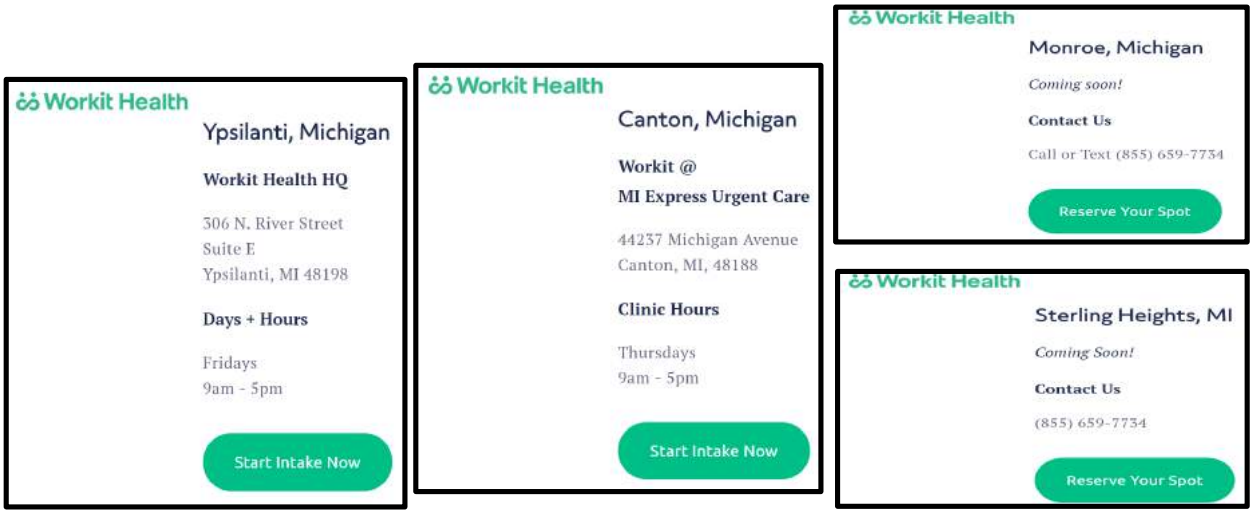


Fig 5: Workit Health's multiple offices – the company intends to branch out into new locations in the near future. Retrieved from www.workithealth.com.

Currently, Workit Health employs over ten full-time staff members and more than twenty-five other associates including clinicians and interns between its California and Michigan offices.[17] The group proceeds into the future with a vision to continue to

[15] Utley, T. (2017, June 01). The Tech Startup Bringing Addiction Recovery To The Workplace Through Science And Design. Retrieved September 30, 2017, from https://www.forbes.com/forbes/welcome/?toURL=https://www.forbes.com/sites/toriutley/2017/05/31/the-tech-startup-bringing-addiction-recovery-to-the-workplace-through-science-and-design/2/&refURL=&referrer=#3437c6b0498c

[16] Weidmayer, K., & Hayes,K. (2017, September 29). Initial Client Contact [Personal interview].

[17] Team. (n.d.). Retrieved October 22, 2017, from https://workithealth.com/workit-team

grow both in their number of clinics, and the size of their staff. They plan to expand soon to new locations in Michigan and from there look toward building clinics at a national level.[18] They look toward building the comprehensive application to maximize their onboarding and patient communications, especially for when they begin opening more clinics. Workit Health plans to continue putting their clients as the top priority and to support them throughout the recovery process.[19]

OPIOID EPIDEMIC

Workit developed their Rapid Access Opioid Response Program in response to the surging Opioid Epidemic plaguing the United States.[20] The Center for Disease Control and Prevention (CDC) reports that opioid overdose deaths have quadrupled since 1999.[21] The CDC additionally reports that approximately 91 citizens of the United States lose their life every day from overdosing on opioids.[22]

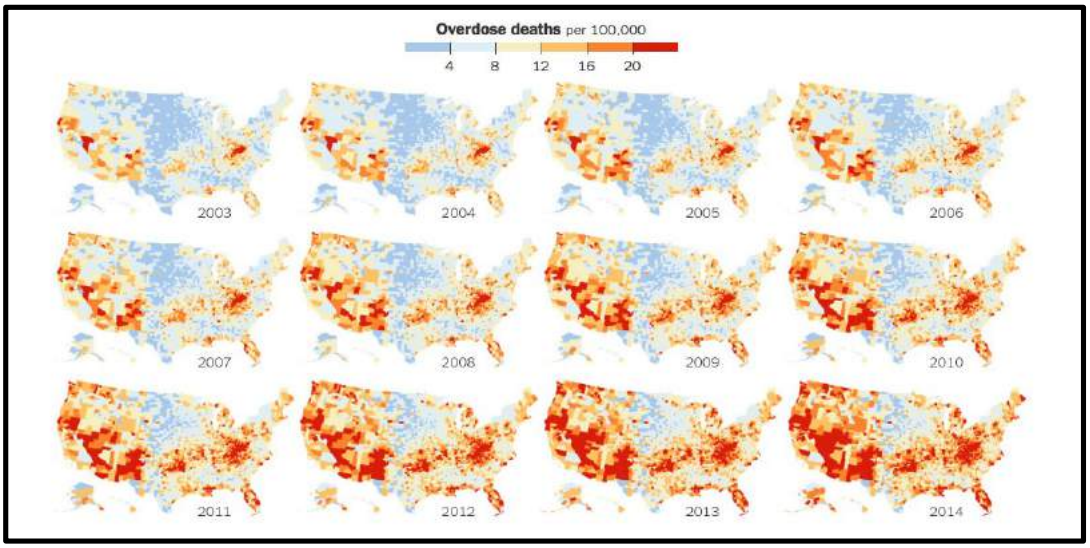


Fig 6: The New York Times demonstrates the growth of Opioid Overdosing in the U.S.A. over time. Retrieved from https://www.nytimes.com/2017/10/26/us/opioid-crisis-public-health-emergency.html.

[18] Weidmayer, K. (2017, October 27). Contextual Interview [Personal interview].

[19] McLaughlin, L. (2017, October 20). Workit Interview [Personal interview].

[20] Hayes, K. (2017, October 20). Contextual Interview [Personal interview].

[21] Centers for Disease Control and Prevention. (2017, August 30). Opioid Overdose. Retrieved December 08, 2017, from https://www.cdc.gov/drugoverdose/epidemic/index.html

[22] Centers for Disease Control and Prevention. (2017, August 30). Opioid Overdose. Retrieved December 08, 2017, from https://www.cdc.gov/drugoverdose/epidemic/index.html

Workit Health fights against one of the largest domestic public health problems in the United States. In addition to the magnitude of opioid users in the United States, Workit Health also must work with the common behaviors of those facing substance use disorders. For example, many in the recovery community for substance use disorder are described to fall off from treatment plans. The staff must be cautious to keep their vulnerable clients engaged in their treatment plans to minimize the fall off potential.[23]

Fig 7: The opioid epidemic in numbers. Retrieved from https://www.hhs.gov/opioids/about-the-epidemic/index.html.

With a huge spread of opioid use disorders, Workit needs to work quickly and carefully. The Opioid Epidemic has recently been declared a Public Health Emergency, which has potential to impact the number of individuals that Workit can reach. One final consideration is the majority of their clients come in that "Moment of Willingness", described earlier in this report, presenting one opportunity for staff to connect.[24]

PROPOSED PROBLEM

Our proposed problem, presented by Workit Health was the following:

"Workit Health recently launched a Rapid Access Opioid Program to address the Opioid Epidemic. A collaborative effort between our product, design, clinical, and content teams. The 501 team will be interviewing the key stakeholders on the team to identify opportunities to improve the workflow for new patients coming into our mobile clinics."

[23] Feldman, B. M. (2016, March 23). 3 Things That Really Made My Addiction Recovery Possible. Retrieved October 22, 2017, from https://www.huffingtonpost.com/brooke-m-feldman/3-things-really-responsib_b_9527888.html

[24] McLaughlin, L. (2017, October 20). Workit Interview [Personal interview].

To start, our team conducted background research about Workit's company and more about the dynamics surrounding Opioid recovery and clinical care. The team analyzed for breakdowns in internal workflow and communication shortcomings with respect to onboarding new patients. After several detailed interviews with Workit staff our team proceeded to analyze how the information we learned about the company can be applied in ways that we believe can improve workflow regarding the Rapid Access Opioid Program that Workit has recently launched.

With Workit Health's addition of Opioid use disorder care they have been introduced to many novel challenges. The legal and medical landscape of opioid use disorder is more complex than their behavioral treatment services, but they continue to adapt to the challenges. Workit has faced challenges pertaining to the clinical regulations around patient security being very strict. The group also has not dedicated a set team to exclusively work on the Rapid Opioid Access Program. Our team aims to present our methodology and findings regarding our task to improve the workflow of the new Rapid Access Opioid Program.

Methodological Overview

To fully understand Workit Health's issues and provide recommendations to remedy them, each team member from NovelHealth first conducted background research in the following areas – Workit Health's target population, Workit Health's competitors, telehealth, the opioid epidemic, and general organizational and management strategies. With a basic understanding of Workit Health's environment and problem scope, we then employed a human-centered, contextual inquiry method to gather qualitative data and perform analysis. We completed this method in three steps: conduct interviews, interpret interview data, and formulate recommendations.

We acquired qualitative data from interviews and observations with key stakeholders in the organization – Workit Health's Co-Founder/Co-CEO, Head of Operations, Business Development Representative, Physician, and Counselor. The observations and interviews were conducted at separate times between October 18th and October 30th, 2017, at the location of the individual's work. Each session lasted on average 60 minutes and at each interview, we had two members of our team present, one as the interviewer and the other the note taker. We also recorded our interviews on audio files to refer back to during our analysis. Our goal for the interview was to obtain concrete qualitative information from each party. We asked about their individual roles, how they relate to the rest of the team, and the specifics of the workflow and of their service.

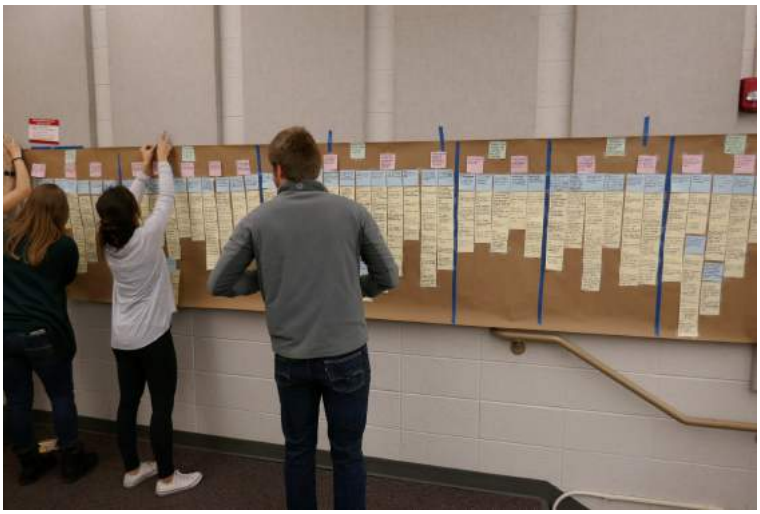


Fig 8: The NovelHealth team puts together the affinity wall.

After each interview, our team gathered together for debriefing sessions to interpret and annotate our interview notes. We continued our analysis by producing an affinity wall, in which we organized roughly 250 individual qualitative data points into a hierarchical map, clustered into themes.

Our affinity wall created a clear visual compilation of all of our interviews. Through this diagram, we were able to find overarching themes that illuminate underlying issues and areas for improvement. We then were able to extract findings, brainstorm design ideas and formulate recommendations.

Findings and Recommendations

OVERVIEW

Workit Health's Rapid Access Opioid Addiction Program is considerably more challenging and time-consuming than any other addiction assistance offered by the organization. Multiple additional steps draw out the intake process, and additional staff members are required to assist clients in this program. There are many areas for improvement in refining this program.

Using interviews and additional research, our team worked to compile a series of recommendations that can be incorporated by Workit Health to improve overall workflow concerns in their Rapid Access Opioid Addiction Program. Through these interviews and the contextual inquiry process, we determined that Workit Health had a decent understanding of the issues, and further needed assistance in determining the best areas for improvement.

Interviews suggested that the resources currently available to Workit Health clients are in significant need of improvement

By designing a feasibility score to organize our list of recommendations, we separated potential solutions into three categories, beginning with **short-term**, immediate changes that would be easily employed without much effort. From there, we have noted **intermediate** recommendations that may need more time, effort, or financial cost, but which, if realized, could significantly enhance and improve Workit Health's operations. And finally, we have listed some **long-term** recommendations that might not be feasible for a while, but should be eventual goals that Workit Health can work towards implementing at a later date.

Fig 9: The feasibility score is broken into 6 categories: **cost**, **how easy it would be to do**, **benefits for staff**, **benefits for patients**, **time needed to complete**, and **how many people would need to be involved**. Each solution was rated out of 5 for each category.

SHORT-TERM

The following findings and recommendations can be implemented immediately. They require low cost – either in person-hours or financially, and will not be time-consuming to execute.

COMMUNICATIONS

Finding: There is a breakdown of communication between Workit Health staff members within the office and between the two office locations (Michigan and California).

Evidence: When interviewing several Workit Health staff members, we discovered multiple issues as they relate to communications within the organization. Workit Health has two offices, in Michigan and California. Currently, these two offices communicate daily to address tasks and other duties. Also mentioned was how time-consuming these meetings could be, taking up at least one hour every day that could be better spent on other obligations. "We need better communication between the offices," one interviewee commented. Further research and interviews uncovered several areas where communication was made substantially more difficult. Currently, Workit Health staff utilize many different platforms when communicating with other staff – Slack, Asana, G-Suite, Toggle, and Zendesk, to name a few. Each of these tools are used for different purposes – assignments, chats, notes, deadlines for projects, etcetera. Having multiple portals makes it more difficult to ensure all tasks are completed on time, and there is a significantly higher chance of some assignments being missed due to the multitude of portals; this is an issue that has occurred in the past.

> "We need a centralized communication tool, a command center that compiles project management tasks, communication, calendar, etc."

Recommendation: Asana, a platform for communication that Workit Health is currently using, offers many of the features that are currently being used across the different portals. However, it seems as if many employees are

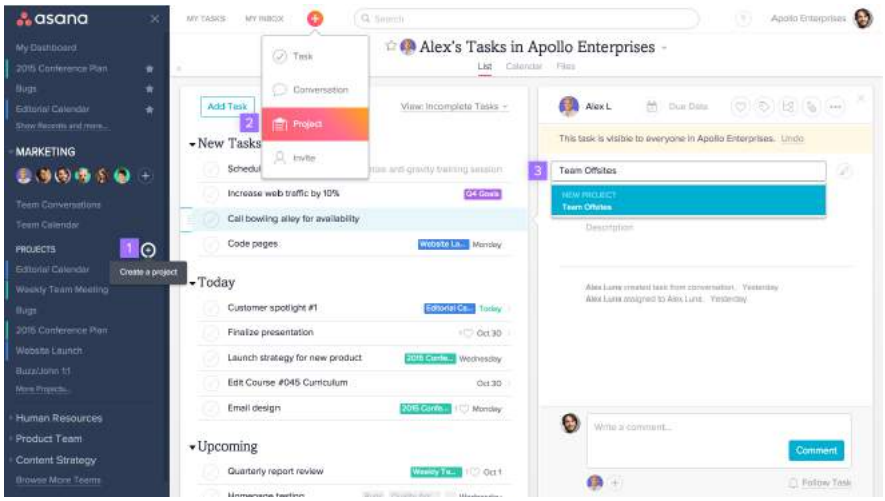


Fig 10: Example of Asana software homepage. Retrieved from https://luna1.co/123094.png.

unaware of all of the features, or do not use them all to the extent that they could be used. Offering a workshop on Asana, including these different features and how they can improve workflow, could significantly reduce the number of communications platforms in use. Using Asana more than they currently are could also improve communication between the two offices, and reduce the amount of time spent in meetings. We posit that increasing use of Asana will reduce the current daily required meetings to a weekly meeting between the two office locations, which in turn will allow staff to spend more time working on other tasks.

Recommendation: One issue highlighted through the interviews indicated that the resources being used for communication hampered workflow. Currently, these inter-state meetings are held by crowding around one small laptop. If Workit Health were to install a larger monitor, or TV screen, they could then hook the laptop up to the larger screen, which would make it easier to see the team at the other office, and easier to follow along while taking notes to ensure no important details are missed.

RESOURCES

Finding: There is a significant need for additional physical and patient resources to provide to clients.

Evidence: Interviews indicated that many resources are needed to pass along information to clients. A theme among several interviews showed that this would be a relatively easy task; however, it would take some time, because there aren't any existing templates currently in place for the creation of these resources. "Resources don't exist yet so we're in uncharted territory," was one interviewee's complaint. Technology can be a cause for concern for some clients, with bad cell phone connections, differences in technological literacy, and other issues that are specific to

Fig 11: The waiting room at Workit Health would be an ideal location to stock one-page informational sheets and brochures.

technology (layout problems on mobile devices, not having a phone, computer, or tablet, lack of data, unsure of how to use a mobile device, etcetera).

Recommendation: There are a lot of details on the website, but having that information in concise and brief forms at the office location could improve client satisfaction. The office has a waiting room for clients; providing brochures and one-page informational sheets about the intake process, available resources, and Workit Health's programs could prove useful. In addition, Workit Health could pass these brochures and one-pagers along to fellow assistance organizations in the community, some of which they are already partnering with. With some of the technological concerns outlined through interviews – including trouble viewing pages from mobile devices and lack of data – having physical resources available would eliminate many of the challenges that come up due to technology.

INTERMEDIATE

These findings and recommendations may take more effort to execute. They will require more of a time commitment, and potentially more financial burden, but should be doable in the near future, and will further improve Workit Health's overall flow and use.

INTAKE PROCESS

Finding: The intake process is time-consuming and inefficient for Workit Health staff. Clients could also benefit from improving this process.

Evidence: Currently, many intake duties fall on one Workit Health staff member, who acts as the point person for new and prospective clients, in addition to other tasks and duties. A Workit Health staff member must assist clients through the process, in addition to following up with those who start but have not completed all intake forms. It requires calling, emailing, and texting prospective clients, and anyone who calls intending to begin the intake process must be assisted by a staff member.

Recommendation: An automated phone system would reduce the amount of time staff members spend assisting clients through the process. Adding a menu to the phones that separates topics of calls could further streamline clients. This would funnel the phone traffic to those who are best equipped to handle each call. This menu would be the first step; further additions could add a more automated system for the intake process, cutting down the number of time staff members must physically spend collecting and gathering information on each client. Those looking to sign up and begin intake would begin with the automated system for some details, and then be transferred to a staff member to complete the process.

RESOURCES

Finding: Clients and Workit Health staff have outlined a real need for more resources to be available through the website and mobile app.

Evidence: While the need for more physical resources has been highlighted earlier in this section, there is also a need to improve the mobile resources. Interviews showed several key issues with both the website and the mobile application. The website layout is inefficient and confusing in some areas; there are conflicting prices (listing weekly fees on one page, and monthly fees on another page, for example). One interviewee commented that "users are often lost and can't find the information they need." Additionally, several interviews commented on additions they would like to see to improve the mobile application. "[I] want a more comprehensive app," said one interviewee. Currently, the app is very basic and not easily accessible to clients. These additions could further improve the intake process, in addition to improving client participation and satisfaction.

Recommendation: There are many features that could be added to improve the mobile application. First and foremost, the app should be added to the Apple and Google app stores. At the very least, it should be easily downloadable from the Workit Health website's homepage. As it is now, instructions for how to download the app are nearly nonexistent, and cause further confusion. Several key features could also be added: a checklist for patients, to keep track of tasks

they need to complete – filling out all required forms, scheduling and attending an appointment with the physician, etcetera. An intake tracker would also be a welcome addition: this tracker would be a visual representation of where the client is in the intake process, something to show the patient their overall process with a clear end goal. Another feature that would be useful for clients would be a pharmacy tracking element. This part of the app would highlight pharmacies near the client that carry Suboxone, the medication prescribed for opioid addiction treatment. This medication is not carried by all pharmacies, so having a location-based map with details on the pharmacies that do will ease the process for clients.

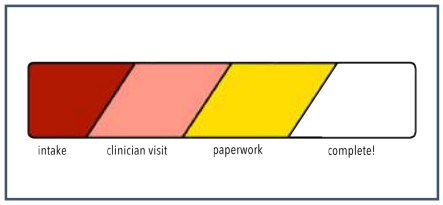


Fig 12: Adding a feature like a simple tracker would give clients a visual representation of their intake status.

Recommendation: The website could use several key updates to improve the features and make the process easier on clients. The home page has a plethora of information that can be difficult to scroll through. Some of this information is repeated on other pages. Cleaning up this homepage and moving the extraneous information to additional pages may make the website easier to navigate. As previously noted, some of the pricing is confusing, listing different prices and different payment schemes. Making this uniform will reduce confusion.

LONG-TERM

The following recommendations are considered not currently feasible. They are suggestions that could considerably improve Workit Health's systems, but may not be possible to realize without substantial effort, time, and cost.

INTAKE

Finding: The intake process is confusing, time consuming, and messy for Workit Health staff.

Evidence: There are currently multiple portals being used by Workit Health staff. Patients can intake through the website, by phone, or in person. Their information may be entered through Google Forms or through Kareo, the Electronic Health Record (EHR) being used by Workit Health's physician. All of the information entered through Google Forms must be copied into the EHR, which is time consuming and provides opportunities for confusion or lost records. Information may be accidentally entered wrong, or key details may not be transferred over to the EHR. Having these multiple portals slows down the workflow process; with the lack of EHR interoperability, many details can get lost. All of these portals costs time and effort that could be better put to use on other tasks and duties.

> We need something where patient health info can be available to us and the physician in a HIPAA-compliant system that doesn't involve copying and pasting."

Recommendation: An ideal scenario, and perhaps the overarching goal for Workit Health, would be to implement an EHR that combines all of the portals currently being used. An EHR where Workit Health staff could enter intake data for new clients, that the physician could then access to update and expand on. An ideal EHR would eliminate most if not all of the other portals used, and be tailored to Workit Health's specific needs.

> "Having everything in one place would be incredible!"

STAFFING

Finding: Many Workit Health staff have indicated that they are handling a multitude of tasks, roles, and responsibilities, and may be unable to cope with the patient volume indefinitely.

Evidence: There is ample evidence showing a need to redistribute tasks. Many interviews highlighted that some staff members are handling multiple roles and responsibilities. A lot of time is currently being spent organizing and delegating tasks; this in turn slows down workflow and creates more confusion. In addition, evidence supports a need to hire more physicians. "We'd love to have more dedicated physicians," was one interviewee's wish. However, physician recruitment, especially for addiction care, is unique, limited, and requires careful

vetting. The patient volume is becoming overwhelming for the physician, who only works with Workit Health once a week and is close to retirement.

Recommendation: Adding an additional staff member or intern to Workit Health's employee roster could reduce the pressure on key personnel, allowing for a more even distribution of tasks. If adding a staff member is not feasible, redistributing the tasks among already employed staff would lighten the load and could significantly improve workflow.

Recommendation: Adding more physicians to Workit Health's staff would significantly improve workflow. Currently there is only one physician working with the organization, and she is close to retirement. To provide adequate care for patients, Workit Health should consider adding more physicians to their team.

Conclusion

Workit Health is providing a new and exciting approach to helping those faced with addiction. With the opioid crisis on the rise, the service they are providing is necessary more now than ever. Entering this space with a new approach comes with many challenges and barriers that they have to face. The recommendations outlined in our proposal are directed to address the challenges that we have identified through our analysis. These solutions consider every step, from new patients inquiring about services, to team operations, and patient intake process. We strongly believe that the solutions we have proposed will improve Workit Health's workflow and provide a clear guideline on how to achieve these goals.

The Team

Michael Cantley

Michael is a first year Masters in Health Informatics student. He completed his Bachelor's at the University of Michigan in 2017. Michael looks forward to applying Health Informatics in his future endeavors to improve workflow and outcomes for clinical patients.

Viktoriya Gulko

Viktoriya spent time in marketing and public relations before moving on to Public Health research and program evaluations. Her interest in technology and healthcare brought her to pursuing a Master's degree in Health Informatics at the University of Michigan where she hopes to find data driven solutions to reduce health disparities while promoting better care and holistic approaches to overall wellbeing.

Rachel Jonassen Bittman

Rachel spent several years working as a freelance videographer after completing her Bachelor's degree. Two years of public service with AmeriCorps preceded her decision to return to school to complete an MPH in Health Behavior & Health Education. Combining this degree with certificates in Health Informatics and Global Health, Rachel intends to pursue a career in global health communication, utilizing technology in public health interventions around the world.

Heidi Li

Heidi worked in the art auction industry before making the transition to healthcare. Realizing the demand and opportunities in the health and technology spaces, Heidi returned to Michigan to complete the Master of Health Informatics program. She is particularly interested in using data analytics to assess and communicate risk.

Appendices

APPENDIX A: Workit Clinic – Before Initial Appointment

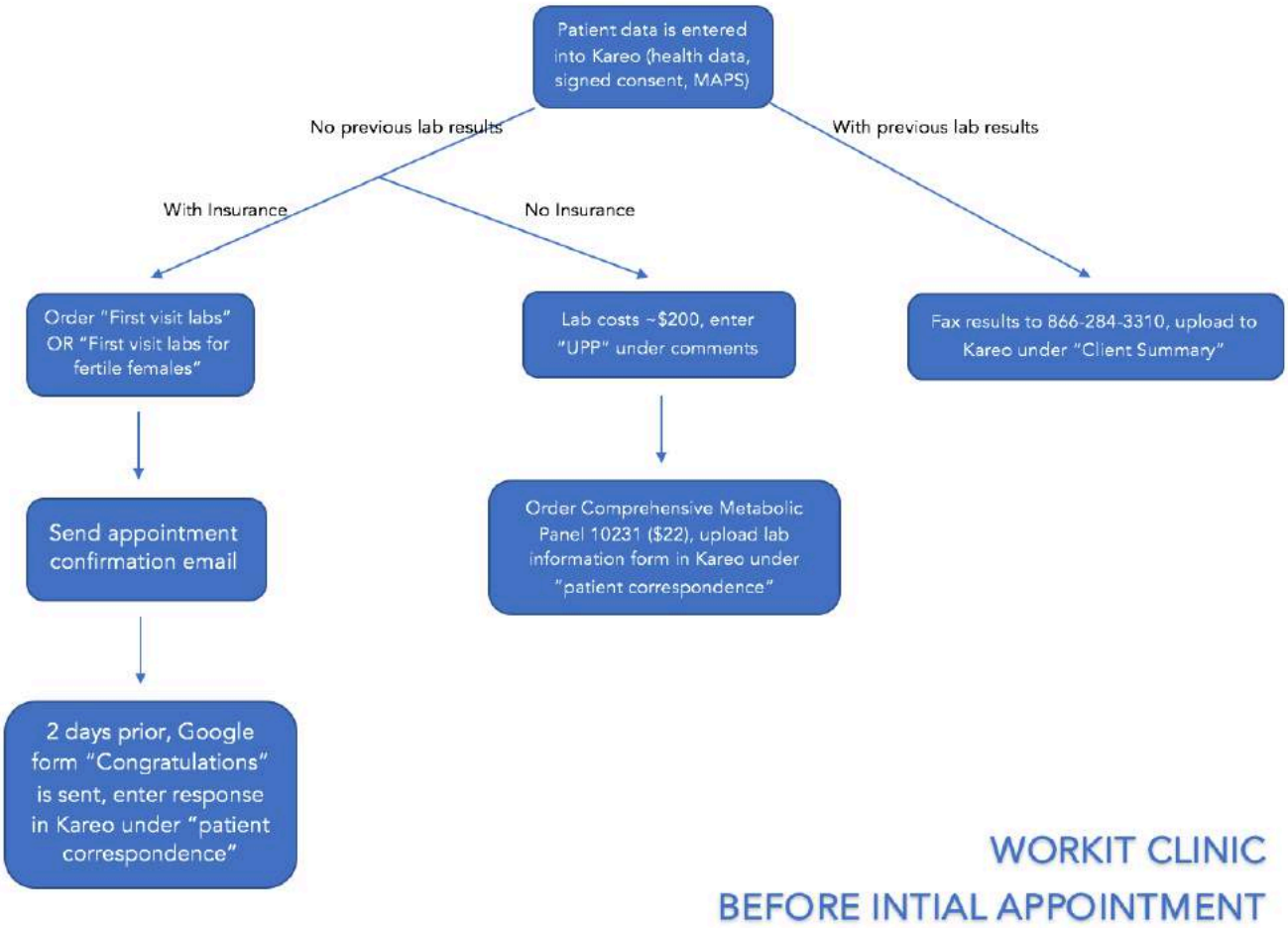


Fig 13: Workflow diagram of the first steps the clinician and patients take before the first appointment.

APPENDIX B: Workit Clinic – First Appointment

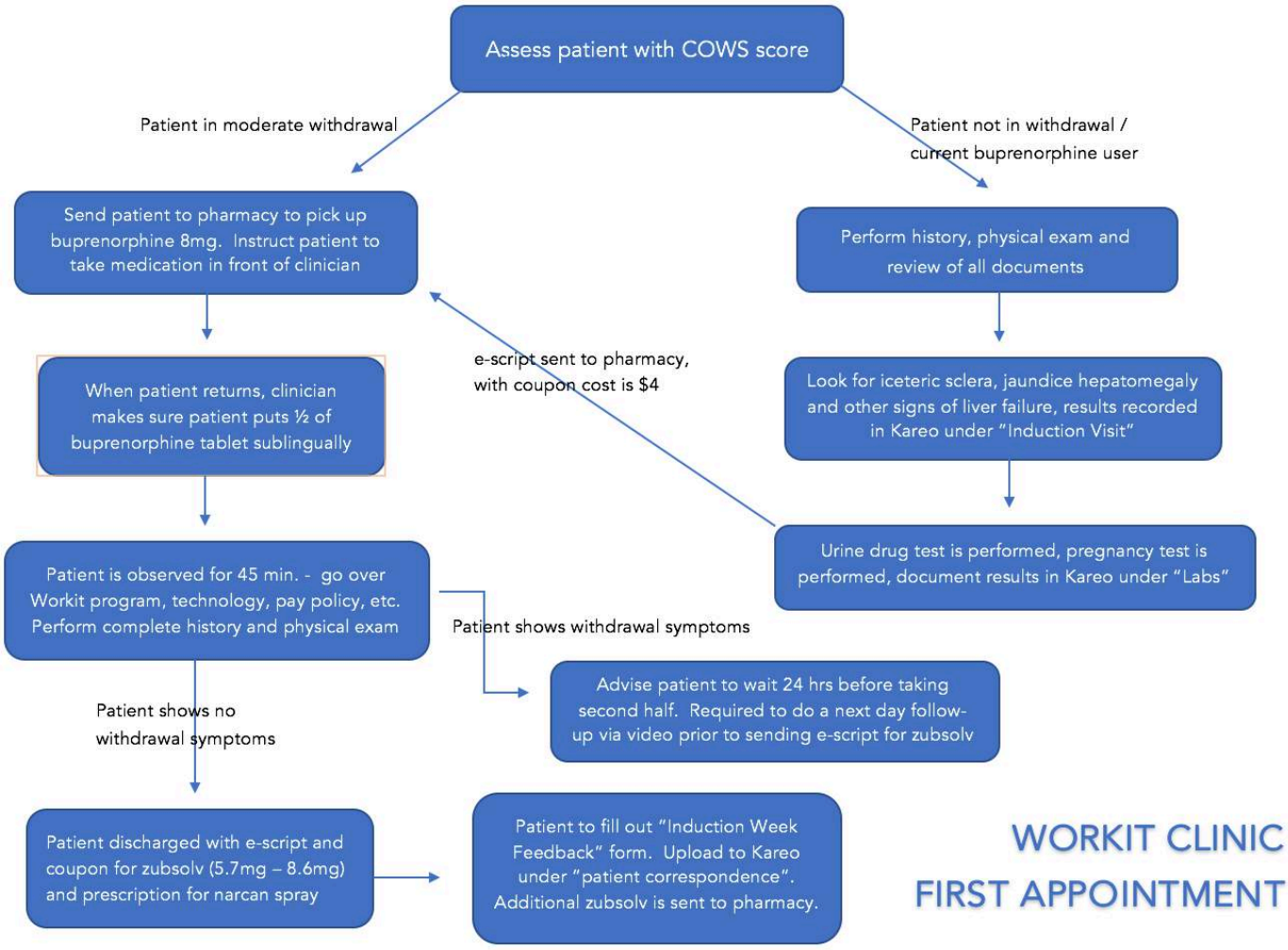


Fig 14: Workflow diagram of the patient's first visit to the clinician.

APPENDIX C: Workit Clinic – Second Appointment and Beyond

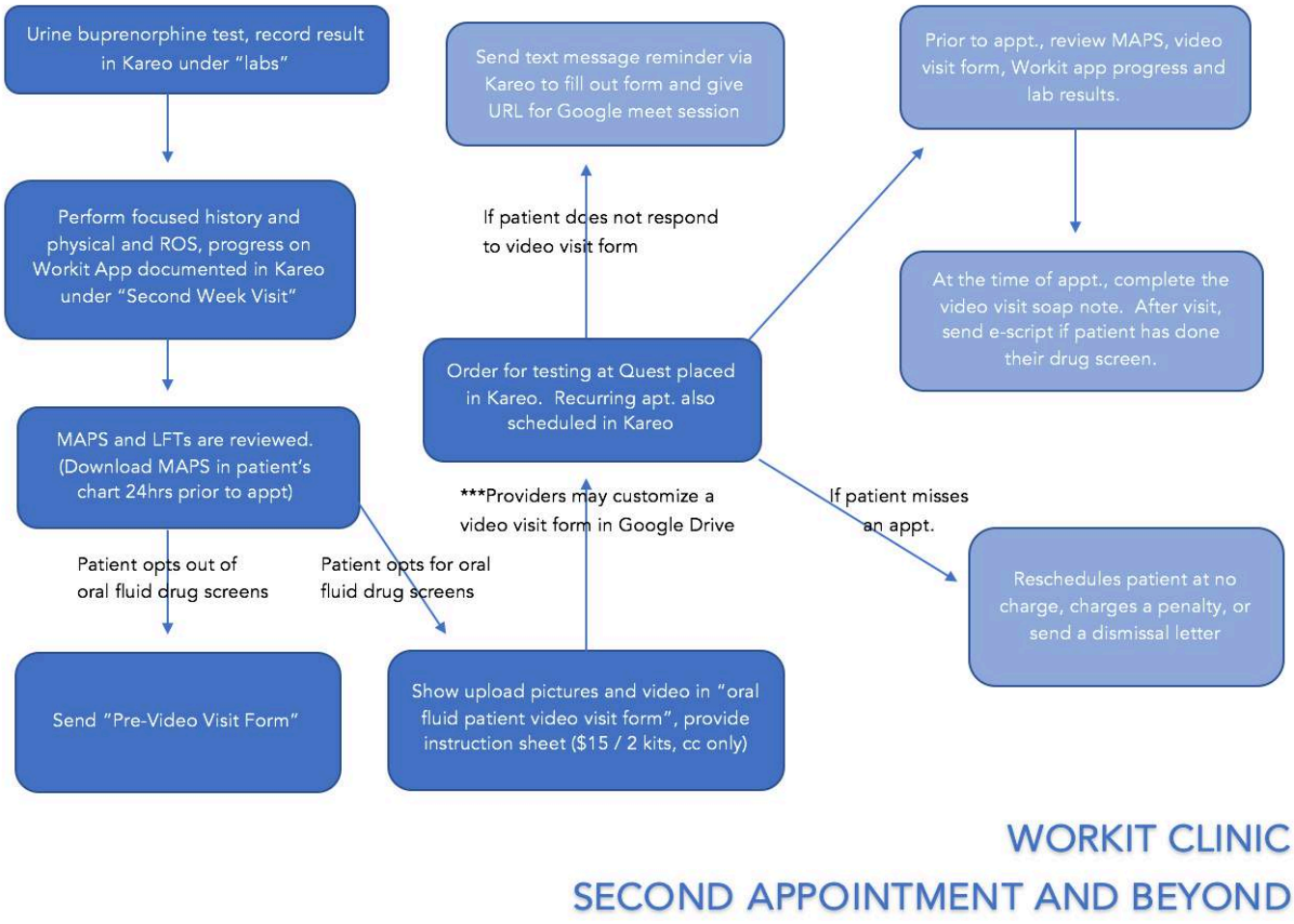


Fig 15: Workflow diagram of the steps taken by the patient and clinician from the second appointment and after.

APPENDIX D: Feasibility scores

		Ruberic (out of 5)							
Rank	**Specific Solution**	**Cost** (1 - high cost)	**Easy to do** (1 - difficult)	**Benefits for workit health staff**	**Benefits for patients**	**Time needed to complete** (1-a long time)	**people needed to complete task** (1 - more people needed)	**total-**(higher score is "better" solution) 30 is a perfect score	**notes**
8	combine all portals into one EHR	1	1	5	3	1	2	13	ultimate end goal but not feasible at this time
2	update and expand resources for patients - one pager for payment, checklist for what they need to do, how-to pamphlets in waiting room at workit health	5	5	4	5	3	4	26	easy solution, can be done quickly
*7	update and improve the workit health app - add to app store, add new resources (checklist, re dominos app - where's your pizza), pharmacies that carry suboxone	2	2	4	5	2	3	18	
*5	add another intern/staff member (patient contact) - redistribute tasks	2	4	5	3	3	4	21	utilize UM more?
*7	recruit more physicians	1	1	5	5	2	4	18	
*5	worskhop on how to use all features of Asana - to get rid of Slack	3	4	5	2	3	4	21	
1	change daily meetings with both offices to weekly	5	5	5	2	5	5	27	goes with learning how to better utilize Slack
3	improve communications tools - add tv/large monitor to communicate with CA office	3	5	4	4	4	4	24	
6	automated intake system for patients	2	2	5	5	2	3	19	
4	update and improve website - search feature on FAQ page, add 'how did you hear about us' to intake	3	3	4	5	3	4	22	

Fig 16: The feasibility scores for all proposed solutions, with their ratings for each category.

APPENDIX E: Potential Checklist for Patients

Check off each item as you complete it

___ Complete intake

___ Signed consent form(s)

___ Clinician visit 1

___ Complete lab tests

___ Pick up prescription (if indicated by clinician)

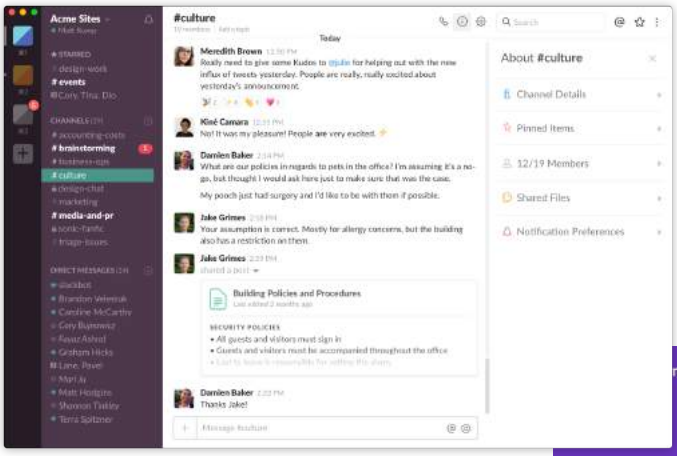
___ Complete Induction week feedback form

___ Clinician visit 2

___ Submit form (***oral fluid patient video visit or pre-video visit)***

Fig 17: As noted in Findings and Recommendations, there are many steps to complete in the first few weeks, and many patients get lost or confused. A checklist such as this one could help patients organize all the steps they need to complete in the first few weeks of their journey with Workit Health.

APPENDIX F: Multiple Portals



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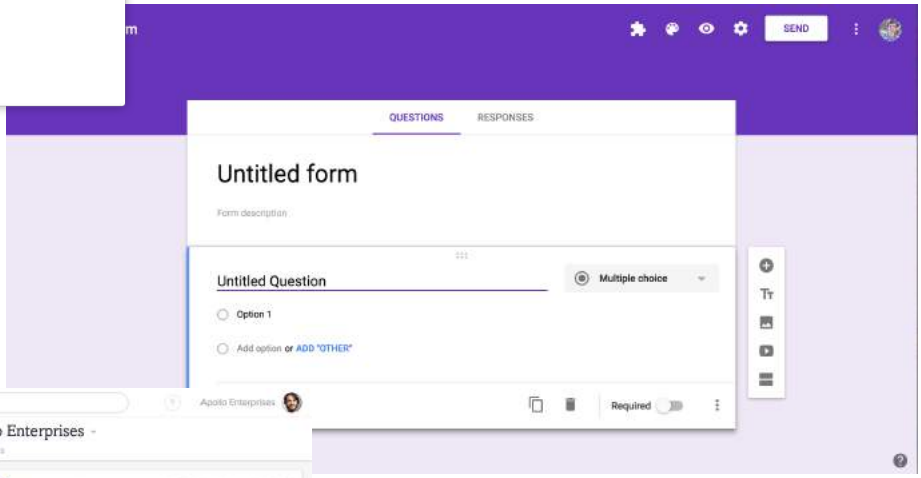

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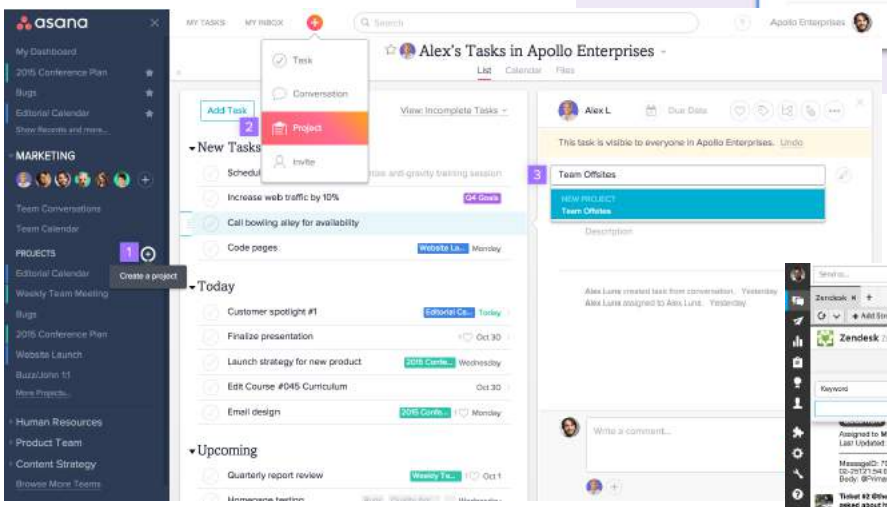

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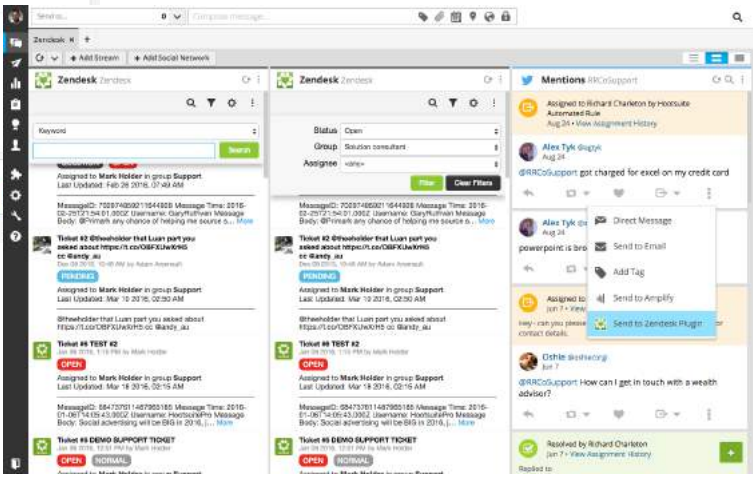

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Fig 18: Workit Health uses multiple portals to complete all tasks. Featured above are (from top to bottom): Slack, Google Forms, Asana, and Zendesk. Combining some of these could significantly enhance workflow.