

BHA Referrals Platform

Test User Group 2 Feedback

This is a preliminary report on feedback from test users of the BHA’s in-progress Referrals Platform from September 2023.

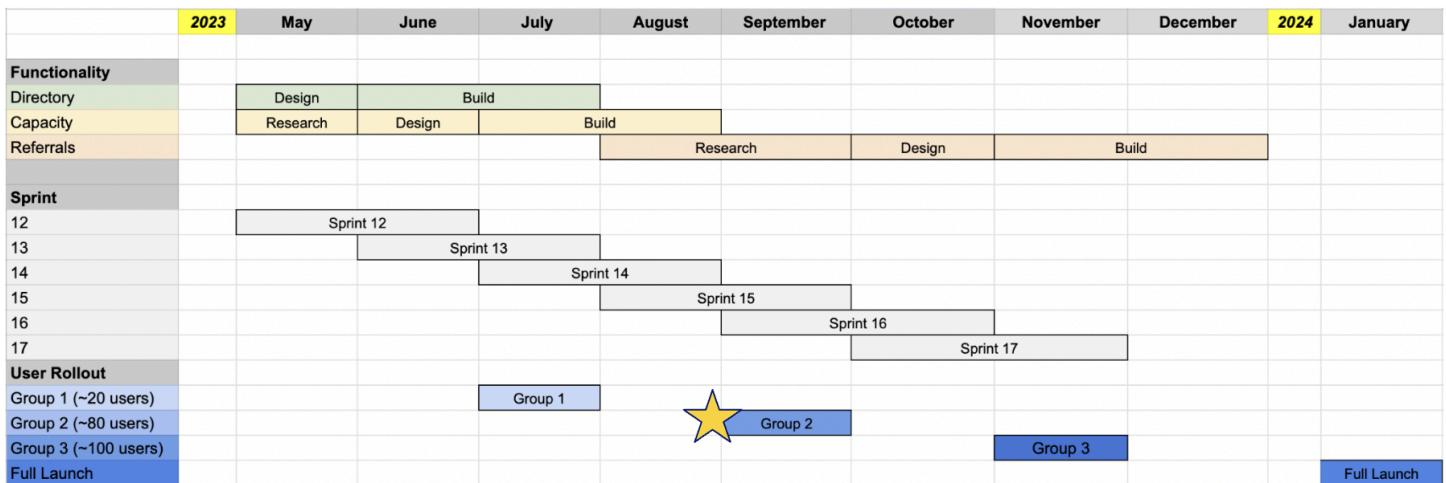
Background

“Usability testing refers to evaluating a product or service by testing it with representative users. Typically, during a test, participants will try to complete typical tasks while observers watch, listen and takes notes.” - Usability.gov

The purpose of the usability testing the in-development Referrals Platform is to get feedback early and often about whether the system:

1. Is easy and intuitive to use for a variety of roles and specialties.
2. Supports more efficient provider processes and cross-provider communication.
3. Fosters behavioral health equity in Colorado.

Before launch, we plan to facilitate three test user groups made up of representative types of organizations and roles that will ultimately use this platform. This document is the synthesis of the second test user group’s feedback.



Key Insights

We've identified key themes from the feedback provided by test users across areas including user interface design, navigation, search functionality, terminology, training/onboarding procedures, and data reports. As user testing is ongoing, we anticipate additional refinements to both the platform and our findings.

User Interface Design & Navigation

User Feedback

Users generally found the login process straightforward. A few users suggested that a link to the application be included in the CommCare invitation so that they could save the application as a bookmark in their browser.

Users found the icons used in the Search for Facilities module and View Facility and Unit Information form informative and appropriate. Users suggested that the unit icon should have more than one bed within the "house" to more clearly differentiate between the bed icon and the unit icon.

Users noted that displaying capacity information within search results was very helpful and would allow them to quickly decide whether to contact or refer to a facility. One user suggested implementing a color coding system for the capacity table to better visually indicate available beds. Additionally, users praised the inclusion of the facilities map in the search results as a way to easily see facilities in proximity to their clients.

Users provided feedback that they would like to see age range displayed more prominently in the facility and unit information so that they can more easily identify facilities appropriate for their clients.

Users said the platform name "Referrals Platform" is not descriptive enough.

Recommended Improvements

- Include a link to the platform in email communications, including invites, to let users more easily navigate to and bookmark the platform.
- Display age range more prominently in the facility and unit information.
- Update the unit icon to be a house with multiple beds inside it.
- Continue to explore a better formal name for the platform for launch.

Additional User Research Required

Visual and UX redesign of capacity table.

Search Functionality

User Feedback

Users expressed an interest in refining the platform's search criteria. They appreciated the existing search options but were keen on having more detailed dropdown selections and different filter options.

Users stated that they would prefer to have the My Favorites feature folded into the Search for Facilities page instead of as a standalone page. They also noted that the ability to favorite a facility is useful and aligns with common practices in their current referral processes, and that they would like to be able to easily share their favorites list.

Across the user groups, users noted confusion regarding certain terms used within the platform. The interpretation of these terms varied between users, potentially leading to miscommunication and incorrect usage of the platform. Users were unsure of the definition for some of the residential services listed in the search and suggested that definitions be made available.

A few users expressed their desire to link to their active waitlist within their facility or unit profile.

Users thought that it would be beneficial to be able to search for a particular clinic/facility location at a large organization (ex. a specific Denver Health location that supports a particular ASAM level) in order to quickly scan relevant requirements.

The language on the “Distance” filter was confusing to users.

Recommended Improvements

- Freeze search fields on the left panel of the Search for Facilities screen so that users can see, scroll through, and select relevant facilities simultaneously.
- Add “search only open beds” as a filter.
- Incorporate My Favorites Facilities list and functionality into the Search for Facilities page. Explore a share feature so providers can easily share their favorite list with colleagues.
- Insert additional help text or tooltips where possible to provide context and clarify meaning.
- Include extended descriptions in a help or FAQ section to provide additional guidance and help users understand and use these terms correctly.
- Employ more explicit terminology to clearly differentiate between adult and adolescent/child services.
- Add a text box to the facility/unit profile so users can link to their comprehensive and/or public waitlist as applicable.
- Explore options for a search filter that allows users to search for all locations of an org, with the potential to further filter specific locations within an org based on client criteria.

- Explore different language options like “Client Location” or “Distance From Client”.

Additional User Research Required

- Edit data model used to structure the search dropdown options including the following considerations:
 - Include more gender and population options (ex. cisgender, justice-involvement, offender status)
 - Better distinguish a “client need” from a facility’s accessibility capabilities. Example: “Deaf” should not be listed under “Accessibility”
 - Add more language options and also designate somewhere if a facility/unit has interpreter/language services.
 - Add “Smoking/Non Smoking” as a facility/unit descriptor, especially important for SUD facilities.
 - Need to add options for “IDD” and “TBI” as dropdowns for “Client Treatment Need”
 - Consider edits to “Client Age” filter, entering a number seems to confuse users.
 - Add a space to facility/unit profile for transportation options.
- Explore notation for single beds vs. shared beds in the Unit bed descriptors.
- This revised data model must be validated with test users.

Support, Training, and Onboarding

User Feedback

Users stated that their preference would be to have self-guided video and written training materials in addition to live training sessions where they would be able to ask questions.

Users indicated that people at their organizations should be able to opt-in to the platform and sign up for their own account.

For ongoing support after the initial onboarding, users expressed that they would be interested in the BHA exploring access to a live chat with the tech and/or care coordination support team.

Users also said that BHA and/or Colorado State Government branding on all materials would help to foster trust.

Users brought up the necessity for the BHA to put into guidance how to handle weekend and holiday bed availability updates.

Users expressed interest in having a test user work group every 6 months or so to continue improving and co-creating the platform.

Recommended Improvements

- Create video and written training materials and post them in a central repository.
- Allow organizations to create and manage their own users on the platform.
- Explore feasibility of chat features for tech and care coordination support teams.
- All platform pages, communications and user guides should be BHA/CO State Government branded.
- BHA to write specific guidance about weekend and holiday bed updates.
- BHA to formulate a plan on continued user engagement post-launch.

Reports & Data

User Feedback

Users expressed a desire to have access to the following reports:

- Length of time from initial request for placement to actual placement
- Number of involuntary placements
- Number of people served by population (age, gender, diagnosis, bed type needed)
- Waitlist data, bed availability time estimates
- Frequency of rejected referrals by facility and reason for rejection, aggregate care level data (where are care shortages and why)
- Monthly availability by facility
- Search / referral request frequency for facilities

Facilities would also like to have audit data on how often their facilities come up in a search. Additionally, users stated that an EHR integration would reduce the burden on users to regularly update capacity information and would ensure that the system showed close to real-time data.

Recommended Improvements

- We will work to provide some basic report types for providers based on this feedback for product launch.
- We will tie into the larger EHR interoperability strategy the BHA technology team is kicking off yet this year.