

TECHNOLOGY IMPLEMENTATION PLAYBOOK

Orange County Health Care Agency
405 W. 5th St., Santa Ana, CA 92701

www.ochealthinfo.com



Table of Contents

<u>Introduction</u>	1
<i><u>Overview</u></i>	2
<i><u>Playbook Intent & Audience</u></i>	3
<i><u>How to Use this Playbook</u></i>	4
<i><u>Lessons Learned</u></i>	5
<u>Getting Started</u>	6
<i><u>Identify Core Values</u></i>	7
<i><u>Interconnected Parts</u></i>	8
<i><u>Program Ecosystem</u></i>	9
<i><u>It Takes a Village</u></i>	10
<u>Goodness of Fit</u>	11
<i><u>Community Needs & Interests</u></i>	12
<i><u>System/Program Fit</u></i>	13
<i><u>Technology Fit</u></i>	14
<i><u>Internal Fit</u></i>	15
<u>Implementation Planning</u>	16
<i><u>Eligibility & Access Criteria</u></i>	17
<i><u>Leadership Engagement</u></i>	18
<i><u>Consumer Outreach</u></i>	19
<i><u>Operational Readiness</u></i>	20
<i><u>Monitor, Evaluate, & Improve</u></i>	21
<u>Key Takeaways</u>	22
<u>Appendix</u>	24

Introduction

- [Overview](#)
- [Playbook Intent & Audience](#)
- [How to Use this Playbook](#)
- [Lessons Learned](#)

Overview

In 2018, Orange County sought to integrate innovative digital mental health solutions into the public system. The initial launch, scheduled for January 2020, coincided with the onset of the COVID-19 pandemic. The OC system was able to acclimate, mobilize, and continue its objective to provide accessible mental health services to a public in need. This guide serves as an advisory roadmap for future innovative technology implementations.

Case Study Context

Orange County HCA partnered with a large hospital system to offer Mindstrong, a virtual therapy platform accessed through a mobile app, to deliver virtual therapy and support services to eligible community members. Orange County HCA established project goals and collaborated with Mindstrong to understand the capacity and capabilities of Mindstrong's system in order to determine the most effective approach to supporting the community's needs.

Reference Materials

The Playbook [Appendix](#) includes work samples that may be used as references to tailor to your own project needs. Throughout the Playbook, specific resources are hyperlinked and may also be accessed through the [Appendix Table of Contents](#).

What is your role?

- Leadership
- Manager or Supervisor
- Partner or Collaborator



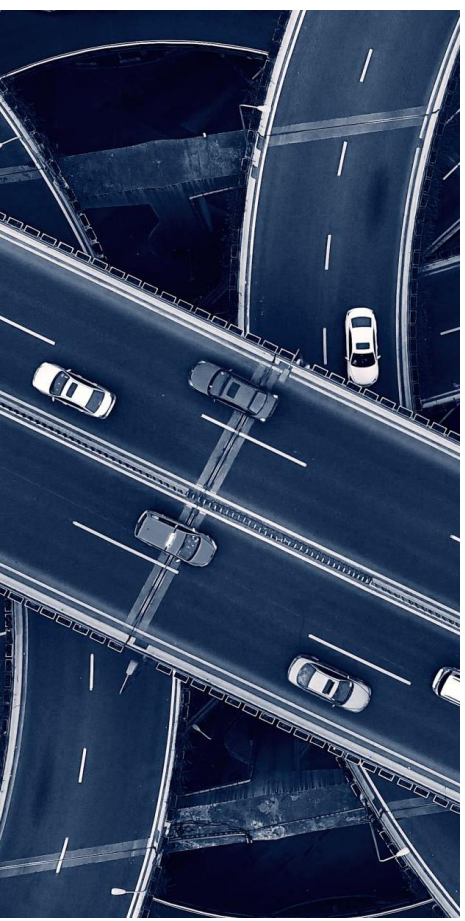
Playbook Intent & Audience

This playbook is intended to provide guidance for public organizations embarking on a technology innovation project to improve population health and wellbeing. Programs undertaking this effort will have multidisciplinary teams to carry out the mission. This playbook provides something for each respective audience in support of their role on the project.

- **Leadership:** Makes key decisions, reviews high level processes and guides the team in the overall direction with a focus on strategy.
- **Manager/Supervisor:** Takes strategic direction from leadership and serves as the tactical leader by guiding the project day to day.
- **Partner/Collaborator:** Any external team who is involved in the project, this could be an implementation team brought in from the outside, or partners with which the County is engaging in the project.

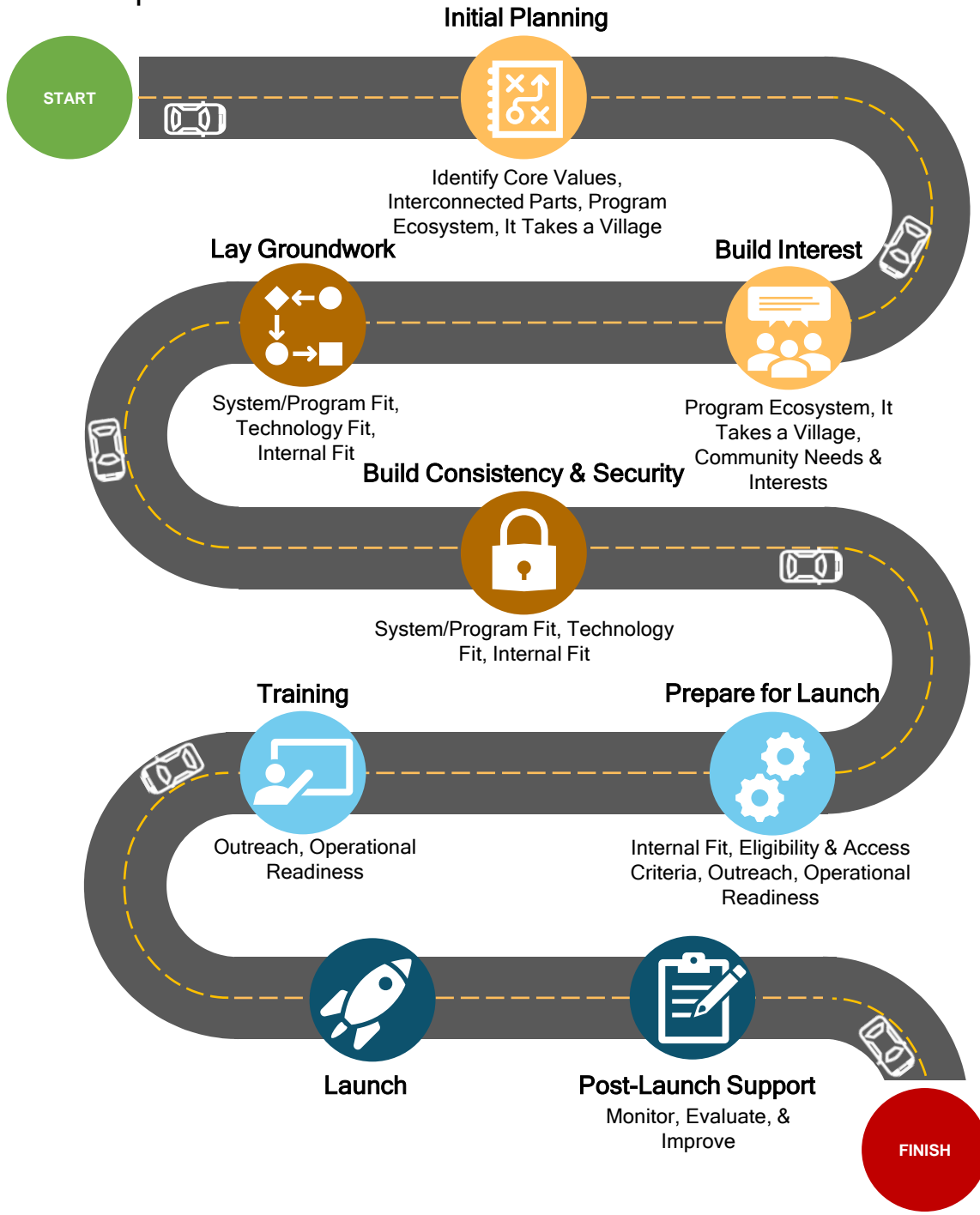
Let's get started!

- Orient yourself in your journey using the circles and corresponding chapters.
- Most chapters have a "Case Study" based on OC's experience.
- Callout boxes contain key takeaways from each topic.



How to Use this Playbook

Below is a roadmap to help guide your own technology implementation journey, each circle a step in your journey. Wherever you are in the road, there are key topics listed you will find helpful.

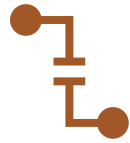


Themes:

- Work in parallel streams
- Agree on definition of key terms
- Expect change

Lessons Learned

Orange County recorded lessons learned for the duration of the project and three major themes emerged:



Things are not Sequential

Multiple work efforts within various work streams may happen in parallel. Tasks differ in time and effort required, many of which are dependent on others. If some efforts are not started early (or in tangent of others) it may prohibit completion or initiation of other tasks, some of which may be both time and budget sensitive.



Get on the Same Page

Finding mutual understanding and agreement of common terminology is essential for stakeholder alignment of expectations. This is especially important with specific subject areas like healthcare, where private and public institutions may have different understanding of concepts. For example, a clear understanding of program eligibility requirements is critical.



Technology is Agile

Internal county systems and processes are usually highly structured while technology is constantly evolving, potentially causing friction. Employing flexibility and adaptability throughout the project aids in reducing that friction and improving odds of success.

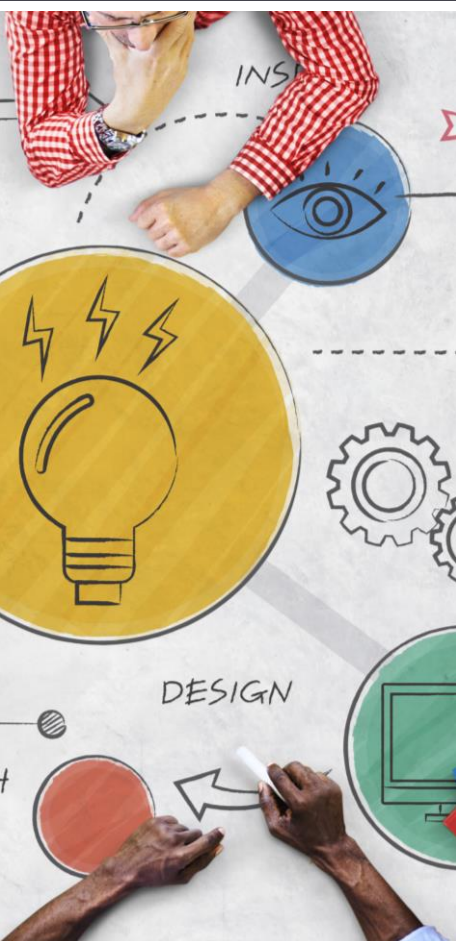
Getting Started

- Identify Core Values
- Interconnected Parts
- Program Ecosystem
- It Takes a Village



Core Values Guide & Support:

- Direction
- Decisions
- Project Scope



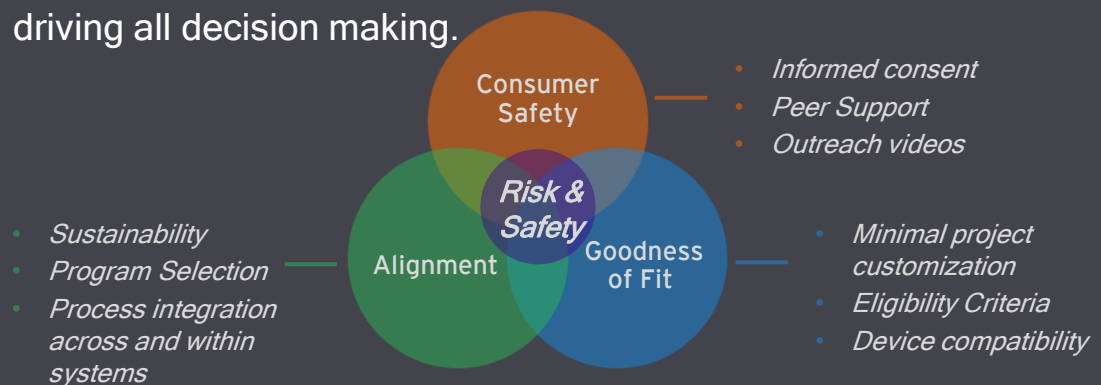
Identify Core Values

Incorporating Core Values into the project will help drive the overall purpose and support the decision-making process. Core Values provide foundational, guiding principles and support motivation for the project. They can be identified using:

- **County Vision and Mission Statements** that provide operational goals and the inspiration for how to get it done.
- **Needs Assessments** that narrow down the project scope and identify core values necessary for success.
- **The Project Plan** that documents various sources of insight and core values to directly support decision making.
- **Requirements of funding source(s)** that should be considered to ensure the project outcome meets any contractual or regulatory requirements.

CASE STUDY

The “why” of Orange County HCA’s project was guided by the theme of safety and awareness of risks based upon the core values of Consumer Safety, Alignment and Goodness of Fit driving all decision making.



Identify impacts:

- People (consumers, partners, staff)
- Processes (marketing, data transfer, consumer journey)
- Finances (budgets, costs)
- Technology (software, assets)



Interconnected Parts

“...everything is connected, everything is interwoven, everything changes with everything, everything merges from one into another.”

~Gotthold Ephraim Lessing, “The Hamburg Dramaturgy”

Consider the phenomenon of the Butterfly Effect theory, and how even minor changes could impact various aspects of the project, the project as a whole, and beyond or outside the project. Proactively managing and effectively responding to change builds resiliency throughout infrastructure. This is important within highly structured government environments where adjusting to change requires significant time and effort.

CASE STUDY

After the pilot launch of the digital solution with an outpatient psychiatry clinic, the clinic’s director and Project Champion requested expansion to additional departments. Despite the seemingly small change to expand within the same partnering organization, a thoughtful review of the consumer’s journey revealed a variety of changes that needed to be made across the project:

- Adjustment of the referral process
- Creation of new outreach materials
- Updates to the data tracking process

Communication & Collaboration

Project Team

Regularly schedule touchpoints (frequency depending on the group)

Partners

Regular communication to ascertain project health and to identify and address risks

Consumers

Build in a feedback loop through the referring organization and through third party evaluation

Program Ecosystem

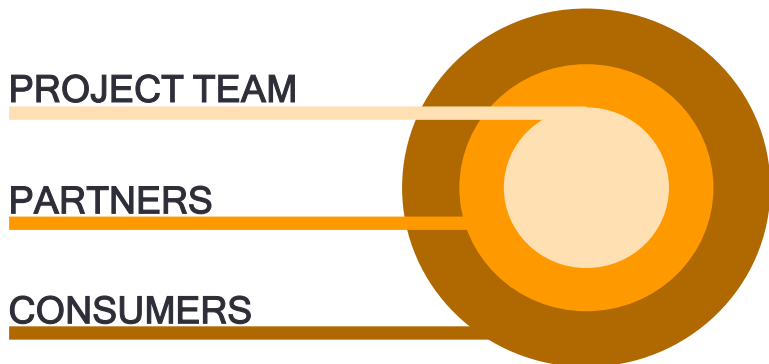
A variety of individuals and groups are directly or indirectly involved in a program. This includes three basic groups: the **project team**, the **partners**, and the **consumers**.

Who is included in the program ecosystem?

Project Team: Core staff and those responsible for the implementation and execution of the project such as IT, Legal, Internal County Staff, Implementation Support, etc.

Partners: Organizations who are involved in the project and not part of the day-to-day work. These organizations often interface with the consumer (health providers, wellness centers).

Consumers: End users or individuals who receive the service, often referred through various partnering organizations.



Defining roles and responsibilities help each group understand and identify their contributions and accountability in the implementation efforts (e.g., project plan, communication plan, change management, etc.).

Identify Your Village

1. Define needs
2. Find experts
3. Assemble village



It Takes a Village

“It takes a village to raise a child.”

~African Proverb

Successful project execution requires a variety of people with experience and expertise in a wide range of categories and specialties. They need to be engaged in the planning, readiness, and launch of a project, especially when the processes and results affect and ultimately benefit so many people. Effective collaboration and communication among contributors from a variety of backgrounds will enhance the success of a project (e.g., technology, security and privacy, contracts, industry, end users, support staff).

CASE STUDY

Orange County HCA’s project “village” included various entities within and outside of the County.

- County entities included: Authority and Quality Improvement Services, Communications (Public Information Officer), Compliance, Legal, Contracts, Fiscal, IT/Security, other County programs, and Innovation (INN).
- County Peer Support Specialists provided the consumer’s perspective throughout the referral and enrollment processes.
- A dedicated implementation team supported, facilitated, and originated work efforts within the project’s day-to-day work.

Goodness of Fit

- Community Needs & Interests
- System/Program Fit
- Technology Fit
- Internal Fit

Consider:

- **Who** would benefit most from the technology?
- **How** would you reach your intended audience?
- **What** device would potential users need?



Community Needs & Interests

Utilize multiple strategies such as research review, workshops, surveys, focus groups, consulting with subject matter experts (SMEs), and soliciting community feedback to understand the current state of the community and what is needed to move forward. Identify:

- **Population:** Who could benefit most? And how can that population be supported with this technology?
- **Preference:** How does the population want to be supported?
- **Accessibility:** Can the population access this service with the resources available to them (e.g., technology needed, language, digital literacy)?

CASE STUDY

Research was conducted to understand whether the Orange County community would be able to utilize this new technology. Specifically, topics of interest included:

- Who uses smartphones and how are they used?
- Do consumers have devices that can support this technology?
- Do consumers have sufficient access to internet and data?
- Which [Lifeline phones](#) (free government cell phone service for low-income households) support this technology?
- What was the consumer's preferred method of contact?

Evaluate potential partners for:

- Consumer base
- Interest
- Capacity
- Core value alignment

System/Program Fit

Identify internal and external entities (e.g., businesses, services, community providers, and agencies) that could have potential interest and impact on the program. Determine which are the best fit by considering:

- Whom do they serve?
- Do their consumers have access to appropriate devices?
- Does the program fit their vision and mission?

Then, consider which entities have:

- Expressed interest?
- Capacity to engage?
- Experience implementing similar endeavors?



CASE STUDY

Orange County HCA leadership presented the program to community providers like Wellness Centers, the Recovery Education Institute, and community colleges/universities. The leadership of these providers communicated interest or were directly contacted for project engagement. Based on interest, [research](#) was conducted regarding community provider capacity, size, and consumer-base.

While many potential partners expressed interest, one-on-one conversations and [further evaluation](#) revealed some providers did not have the capacity to engage given the timeline and staffing resources required. Partners were determined based on capacity, fit, and program core values.

Consider:

- **Effort:** identify the areas of technical review required (data privacy, system security, etc.)
- **People:** team(s) who will be involved in the fit evaluation effort
- **Time:** start the fit evaluation efforts early and in parallel to other efforts (marketing, outreach, etc.)



Technology Fit

Evaluate program goals to determine the technology can meet program objectives. Does it fit required elements of the project, such as supporting adequate level of security and opportunities for scalability? Additional project goals may be prioritized and considered as needed. Recommended reviews:

- **Research:** Review supporting research to understand the scientific basis for the technology.
- **Scalability:** Determine the technology and service capacity to support the identified volume of the target population.
- **Security:** Consider the technology's alignment with security policy requirements.

CASE STUDY

- County leadership reviewed a variety of scientific articles related to the technology.
- It was determined that the technology had the capacity to support the identified need (number of potential consumers).
- The project provided significant lead time (nearly a year) to allow County IT to complete a thorough review of the selected vendor's technology. The in-depth security review was important given the sensitive information involving PHI/PII that was to be handled by the vendor.

Check the internal fit with:

- Staff (knowledge, experience and bandwidth)
- Processes (established, fixed vs. adjustable)
- Technology (software and devices)



Internal Fit

Identify existing internal resources to determine the capacity and ascertain outside resource needs. Perform a gap analysis and determine if the project team has:

- Sufficient knowledge and experience
- Availability to support the project as needed
- Expertise (e.g., county policy, contract development, data management, understanding of customer experience) needed to deliver the project
- Established processes, policies and technologies

Once gaps have been identified, supplement with external SMEs and full-time project support.

CASE STUDY

- The County utilized internal Peer Support Specialist staff for community outreach and enrollment efforts.
- The County leveraged existing technology platforms (e.g., Qualtrics, County website) which required the training of internal staff as well as contracted SMEs.
- The County relied on an external Project Champion, the director of the partnering county-based medical organization, considered essential in providing SME insight and advice, identifying and supporting process changes, and ongoing advocacy for colleagues to implement into their practice.
- An external, full-time project team was contracted to support Organizational Change Management and oversee implementation activities.

Implementation Planning

- Eligibility & Access Criteria
- Leadership Engagement
- Consumer Outreach
- Operational Readiness
- Monitor, Evaluate, & Improve

When determining eligibility, consider:

- Consumer need
- Purpose of technology
- Capability of partnering organizations

Eligibility & Access Criteria

Determining eligibility and access is a major component in providing services. Eligibility is determined through evaluating and then aligning community need, purpose of the vendor technology, and capacity of partnering organizations. The way the vendor defines the intended user and their use of the technology plays an essential role. Additionally, consider the partnering organization's capability to integrate with County and vendor processes.

CASE STUDY

Multiple factors were considered for eligibility based on who the technology was intended to serve, project goals and partnering organization needs:

- **Vendor Technology**
 - Age 18 or older (able to provide consent)
 - Living with a qualified MH condition
 - English fluency
 - Device
 - Primary user of eligible device
 - Access to Wi-Fi and/or Cellular Data
- **Partnering Organization**
 - Exclusion criteria was developed to avoid duplication of services



Empower Project Champions with:

- Educational materials and training
- Informative fact sheets, checklists, and process flows
- Talking points, scripts, and communications templates



Leadership Engagement

Partnering organization leadership and project champions can facilitate adoption across their organization(s) through education, information, and supporting documentation. Create engagement activities and informational materials that can support project champions' dissemination and education activities in a virtual and in-person environment.

CASE STUDY

The Orange County HCA project team created numerous items to support leadership and project champions in understanding the project and sharing it with the referring providers across their organization:

Educating and Informing

- Frequently Asked Questions
- Information in a templated format (ex: email templates) for ease of dissemination across the partnering organization
- [Educational videos](#)
- Digital and printed [informational brochures](#)

Training and Supporting

- One-page [informational sheets](#) and [flyers](#) with eligibility criteria and overview of the referral process
- Scripts and talking points to refer consumers
- Information to include in the after-visit summary
- Training and process flows to educate about various [processes](#) (referral, onboarding, care coordination, etc.)

When crafting messages, consider:

- Audience needs
- Communications channels
- Key points

Consumer Outreach

Consumer communications outreach is an effort where the County and partnering organizations are aligned in their message and communication activities. Consider:

- Writing at a **reading level** that the audience will understand; effective outreach will attract and engage your audience.
- Applying **culturally and contextually appropriate language** suitable to the audience.
- Utilizing **appropriate channels** of communication so messages will be seen by your audience (e.g., email, bulletin boards, postcards, flyers, community announcements, etc.)
- Speaking to **audience needs**. Why should they engage? What do they need that your program can provide?

CASE STUDY

Orange County HCA developed a variety of materials with collaboration of Peer Support Specialists, who helped ensure messaging consistency and appropriateness (i.e., recovery-oriented, effective, relevant, engaging). Examples of collateral include:

- Electronic messaging across multiple websites (Orange County HCA, Qualtrics, MHA, Mindstrong, etc.)
- Scripts to use in the verbal consenting process
- [Outreach video](#)
- [Informed consent document](#) converted into digital format and [scripts](#) for audio and [video](#)
- Informational [brochures](#) and [postcards](#)



Readiness Assessment Checklist

- ✓ Consider the end-to-end processes
- ✓ Verify all systems are functioning
- ✓ Confirm the ecosystem is ready for implementation



Operational Readiness

Operational Readiness determines that adequate processes (e.g., technology and manual) exist for project success. This could include processes to confirm consent, deliver services, provide avenues for grievances and follow-on questions, and accommodate emergency services.

Sometimes, the policies and procedures of partnering organizations or County cannot adapt to meet the project needs and a workaround should be developed and implemented.

Once processes and workarounds are identified and defined, document processes to provide training support materials for internal staff and partner training.

CASE STUDY

Orange County HCA identified/defined the following:

- [*Referral Process*](#). The County initially developed processes for consumer referral, informed consent, and handoff to the vendor. These were adapted to include a self-guided informed consent on the Qualtrics platform as part of the new automated digital referral process.
- *Referral & Data Tracking Process*. This process required the exchange of PHI/PII data across multiple entities. Information security was a large part of operational readiness.
- *Grievance Process*. A process was created for addressing consumer concerns as well as any other grievances.
- *Defining Crisis Response*. It was important for the project to establish clear crisis protocol and response timing.

Potential Data Sources

- Internal
- Partners
- Third-Party
- Vendors

Monitor, Evaluate, & Improve

Programs and technology continue to grow and improve with active management, monitoring, and evaluation of:

- Conversion and Enrollment Rates
- Consumer Adoption and Satisfaction
- Potential Adoption and Use Barriers
- Process Inefficiencies

Third party evaluations deliver an objective view of operations that limit bias. Regular data evaluation informs project status to determine if processes need to be adjusted to meet defined goals. Consider using automated systems for accurate and consistent tracking, resulting in reliable data.

CASE STUDY

Orange County HCA used various data sources to gain understanding and determine opportunities for improvement.

Tracking logs were used to evaluate enrollment rates and efficiency of the referral process. Partner and vendor data were used to evaluate the consumer hand-off process, adoption rate, and level of activity and use. A third-party evaluation team:

- Surveyed referring providers on their attitude toward the product, barriers to enrollment and consumer perception of the product and services
- Surveyed consumers using the product as well as those who declined
- Analyzed user data to gain insight to consumer use



Key Takeaways

A close-up photograph of a person's hands writing in a notebook. The person is using a black pen with a wooden barrel. The notebook is open, and the person's left hand is resting on the page. The background is blurred, showing what appears to be a laptop screen. A dark grey rectangular overlay is positioned in the upper half of the image, containing the text 'Key Takeaways' in white.

Pay Attention to:

- Budget & Funding
- Time & Planning
- Staffing
- Consumer Needs
- Project Objectives
- Data Tracking



Key Takeaways

**"Expect the best, plan for the worst,
and prepare to be surprised."**

~Denis Waitley

Your implementation will be unique; some things remain true:

- 1) **Give yourself time.** Plan in advance and execute various work efforts in parallel.
- 2) **Determine staffing needs.** A gap analysis will identify staff knowledge and experience needed for the project. This will help determine additional support needs.
- 3) **Communicate regularly.** You can never over-clarify; lack of clarity can lead to negative impact down the line.
- 4) **Be open to change.** Adapting is a continuous process. Do not be discouraged if you must create workarounds; the adjustments may lead to a better direction.
- 5) **Automate data tracking.** Avoid manual data tracking processes where possible as this may result in inconsistent and inaccurate reporting.

A stack of books with various colored covers (red, blue, brown) is shown. A dark blue semi-transparent rectangle is overlaid on the top half of the image, containing the word "Appendix" in a large, white, sans-serif font.

Appendix

Appendix

Table of Contents

Research

[Initial Planning & Building Interest](#)

[Smartphone Ownership & Use](#)

[Lifeline Phone Testing](#)

[Hospital Discharge Research](#)

Internal County Processes

[Informed Consent](#)

[Referral Process](#)

Communications & Outreach

For Providers:

[Referral Flyer](#)

[Brochure](#)

[One Sheet](#)

For Consumers:

[Brochure](#)

[Postcard](#)

[Informed Consent Script](#)

[Informed Consent Videos](#)

Initial Planning & Building Interest: OC Tech Suite Program Readiness & Evaluation

Purpose

Orange County Health Care Agency undertook a process of determining potential partners based on capacity, fit, and program core values using a Readiness and Evaluation matrix. Leadership evaluated several programs against a variety of criteria listed in the table below.

Glossary

- LOS: Length of stay
- TAY: Transitional Age Youth
- PACT: Program for Assertive Community Treatment
- CREW: Center for Resiliency, Education, and Wellness
- CYBH: Children and Youth Behavioral Health Services
- IRIS: Integrated Records Information System
- EHR/EMR: Electronic Health Record/Electronic Medical Record
- PANSS: Positive and Negative Syndrome Scale
- YOQ/OQ: Youth Outcome Questionnaire/Outcome Questionnaire
- SMI: Serious Mental Illness
- SPMI: Severe and Persistent Mental Illness

Program Name/ Process	TAY PACT	Parent Wellness Program (PWP)	OC CREW
Client Population/Target Audience	SMI/ SPMI TAY and a high level of functional impairment	Pregnant and new parents who have had a child within the last 12 months and exp. mild-mod anxiety or depression due to pregnancy/ birth	Adolescents exper. early onset psychosis
Timeline for implementation (Planned Trainings)	Phase I	Phase I	Phase II
What is/are the outcome(s) or clinical process(es) the program is attempting to change?	same as CYBH PACT	Does monitoring provided by Mindstrong, (relative to care as usual?), help prevent mental health symptoms from becoming severe and disabling?	Does monitoring provided by Mindstrong, (relative to care as usual?), help prevent mental health symptoms from becoming severe and disabling?
What existing measures are available to assess each outcome or process?	same as CYBH PACT	YOQ 30.2 / OQ 30.2	PANSS
Proposed Data Source(s) for each measure	MS Access db; IRIS County EHR?	IRIS County EHR	IRIS County EHR
Est. # to be served in FY 18/19		700	70
# served in a FY (ages 13+)		465 (16+ yrs)	69
Est. % with a smart-phone		78%	80-85%
Est % w/ consistent access to data plan		50-55%	65-70%
% high utilizers (crisis/CAT)		0	50%
Number of clinicians/program providers		9	5
Aver. LOS		6 months	2.5 yrs
Staff access to mobile tech. (if yes, specify)		iPhone, laptop	flip phones
Program Provider Name		County	County
Notes		<ul style="list-style-type: none"> • About 15% of OCPWP participants' cell phones are obtained through a discounted program (i.e. California LifeLine Program) which data is limited and the type of phones provided to them varies (i.e. flip phone, smartphones); frequent changes in phones • 10-15% of OCPWP participants do not have internet/Wi-Fi at their home • One cell phone is shared/rotated amongst different family members throughout the day/week • Children have access to participant's cellphone throughout the day for app games • Roughly 75% of enrolled participants are monolingual Spanish speaking 	<ul style="list-style-type: none"> • About 10% obtained phones through a discounted program with limited data • Several reported instances of misplaced/lost phones

Smartphone Ownership and Use in the U.S.

Summary:

It is estimated that about 81% of U.S. adults own smartphones. The highest rate of smartphone ownership is between ages 18-49 at about 94%. The number significantly drops off after 65, at 53%. Income also plays a role in smartphone ownership – 95% of individuals with incomes \$75,000 and higher own smartphones compared to 71% of individuals who earn below \$30,000. Nearly 17% of all those who own smartphones do not have Broadband at home. ([Pew Research Center](#)). This does not necessarily mean that they have access to unlimited data on their mobile, but they are relying on their phone more than those who have Wi-Fi at home. Since the introduction of unlimited plans, the use of Broadband for data needs has gone down about 3% in a year ([OpenSignal](#)), even though total data traffic has gone up significantly ([Digital Future Report](#)). In 2017, about 25% of consumers had unlimited data plans, that number rose to 37% in 2018. ([Deloitte](#)) It is estimated that in 2019 about 10% of data usage comes from mobile plans and will grow to 20% in 2021. ([Cisco](#))

Example:

Using a sample of 100 people, 81 would own smartphones and 37 would have an unlimited data plan.

Companies specializing in this research:

- [Ovum](#)
- [YesMarketing](#)
- [Strategy Analytics](#)

Sources:

- <https://www.fool.com/investing/2018/10/28/heres-how-much-smartphone-data-americans-are-using.aspx>
- <https://www.strategyanalytics.com/strategy-analytics/news/strategy-analytics-press-releases/2018/03/22/cellular-and-wi-fi-use-by-operator-and-data-plan-type-for-verizon-at-t-t-mobile-and-sprint-february-2018>
- <https://www.strategyanalytics.com/strategy-analytics/what-we-do/consumer-telemetry#.WleUR6inGyl>
- <https://blogs.cisco.com/sp/the-latest-mobile-makeover-why-and-how-unlimited-data-plans-have-re-emerged>
- <https://ovum.informa.com/resources/product-content/2018/09/12/20/18/research-agenda-2019>
- <https://www.pewinternet.org/fact-sheet/mobile/>
- <https://www.emarketer.com/content/us-time-spent-with-mobile-2019>
- <https://www.slideshare.net/kleinerperkins/internet-trends-report-2018-99574140>
- <https://www.forbes.com/sites/forbescommunicationscouncil/2018/08/30/why-catering-to-mobile-users-is-vital-for-todays-services/#b264454736a9>

- <https://www.brightedge.com/resources/research-reports/brightedge-2018-mid-year-mobile-research-roundup>
- <https://www.statista.com/topics/779/mobile-internet/>

Help@Hand Lifeline Phones Testing Plan

1 Introduction

The California Public Utilities Commission's (CPUC's) LifeLine program provides free or discounted wireless phone service to about 1.4 million low-income¹ households² in California. This is about 3.5 percent of state's population³ and accounts for nearly 40 percent of low-income eligible households.

Help@Hand intends to serve diverse populations which include those who experience more intense mental health symptoms and are in duress from their mental health issues. Statistics show that a low-income is associated with higher risk for mental disorders, suicide attempts, anxiety, substance use, and mood disorders.⁴ As such, these vulnerable populations are in need of and can potentially benefit most from the Help@Hand technologies.

The results of testing will be used to inform the county's options of serving clients with LifeLine phones, which could potentially include, depending on the results, the need for acquiring and or renting devices for that population. This is in service of increasing access to underserved groups and improving the quality and outcome of services.

This document outlines the testing plan of LifeLine mobile devices.

2 Goals

The project goal is to uncover potential issues occurring when various technologies offered by Help@Hand run on the mobile devices currently provided by the LifeLine program.

- Identify how low-income populations participating in the LifeLine program may utilize the Help@Hand technologies
- Evaluate LifeLine phone compatibility with Help@Hand technologies

3 Objectives

The testing is to uncover technological incompatibilities of Help@Hand technologies with LifeLine phone devices that could be caused by:

- Software

- Hardware
- Device reliability (Service quality, battery life, etc.)

4 Outcomes

The outcome of this testing is preparation and education of LifeLine phone users in utilization of Help@Hand technologies.

5 Types of Testing

Testing will be focused on functionality and user experience. Functionality will test for whether the technology can technically run on the device given its hardware and software. The User Experience will be testing for ease of use of the technology and the likelihood of consumers using the it on the device.

Functionality testing will include the following:

- Uploading the technology to the device
- Running the technology on the device
- Sending and receiving data from the device
- Battery use
- Data use
- Video use
- Audio use
- QR Code use
- Browser use

User Experience testing will include activities necessary for the technology to function at a necessary level:

- Registering an account
- Signing into the account
- Signing out of the account
- Password protection functionality
- App-specific keyboard use
- Receiving texts/calls
- Stability of internet connectivity
- Entering inputs both in and out of app
 - Messages
 - Data
 - Other inputs
- Receiving outputs in-app
 - Messages

- Charts/Graphs
- Alerts
- Surveys
- Video or audio quality, if applicable (ex: teletherapy, watching an information video, etc.)
- Other app specific functions

6 Risks

The test plan is meant to address various major risks associated with the use of technologies offered by Help@Hand on the Lifeline phones. Nearly 2/3 of technologies offered through the Tech Suite⁵ have a mobile app platform, and many of them only function on a mobile device. If these LifeLine devices are not able to support a technology offered through Help@Hand, it would automatically exclude vulnerable populations using these phones which could trigger a community response regarding discriminatory practices. If the users are unable to use the technology easily, it will discourage members of this group from using the technology that could be helpful to their mental health care and be regarded as limiting these populations' access to these services.

7 Constraints

There will be a limited variety of Lifeline phones which will be tested for functionality and user experience. Although there are some similarities in Lifeline phones used, every provider has a variety of Android models they provide to customers. Therefore, it will be impossible to test every model used. Testing will try to include the simplest (oldest make/model) LifeLine phones. In addition, given that there are new phones being introduced every year, it will be unrealistic to test every kind of model version. Additionally, because the phones are refurbished, it is impossible to test for quality of refurbishing. The Lifeline phones are tied to specific providers which may or may not have sufficient coverage. Because it will be impossible for a tester to check coverage in every location within various counties, the test plan will not include comprehensive of coverage.

8 Resources

The testing oversight will be implemented by the Cambria team. As the testing implementation goes through the planning, development, and deployment phases, the Cambria team will be collaborating with the UCI Evaluation team in communicating the test plan, training, as well as summarizing the outcomes. The UCI Evaluation team will be responsible for recruiting and vetting the testers. In addition, the UCI Evaluation team will communicate with the testers as needed.

9 Timeline

Estimated duration of testing is 8 weeks and will be broken into phases:

- Obtaining Resources: 2 weeks
- Training and Instruction: 1 week
- Testing: 4 weeks
- Collecting and Integrating feedback: 2 weeks

10 Testing Criteria

10.1 Service Providers

Of the service providers available, there are top 5 available in California. As they offer the most generous data plans and best coverage, the following service providers are recommended to be tested⁷:

- Access Wireless
- Assurance Wireless
- EnTouch Wireless
- Safelink Wireless
- SafetyNet Wireless

10.2 Devices:

Testing will include the simplest LifeLine phones, or the oldest make/model being distributed. This is based on the assumption that if the technology works on that make/model, it will likely work on an upgraded version or a better make/model. It is best if the testers obtain the LifeLine phones from each of the service providers⁶ in California. However, it is also possible that the testers are given specific models listed as available to LifeLine phone customers through LifeLine service providers. Of the phones known to be available through the LifeLine service providers, the following Android models on an Android platform version 6 or higher are proposed to be tested⁶ :

- ANS UL40
- ANS Rapidz / ANS Wiko Life
- Coolpad Avail / Coolpad Illumnia
- Unimax U673c / Unimax U683CL

10.3 Technologies

For testing, it is optimal to upload some of the more complex technologies available in Help@Hand Technology suite which would require a more advanced device, such as Mindstrong.

DRAFT

Sources:

- 1) To qualify for California's LifeLine program, a household must have income below 150 percent of the federal poverty level (FPL) (for example, currently about \$38,000 annually for a family of four to qualify) <https://lao.ca.gov/Publications/Report/3995>
- 2) <https://lao.ca.gov/Publications/Report/3995>
- 3) <https://www.census.gov/quickfacts/CA>
- 4) <https://www.sciencedaily.com/releases/2011/04/110404161716.htm>,
<https://www.ncbi.nlm.nih.gov/pubmed/21464366>,
https://www.samhsa.gov/data/sites/default/files/report_2720/Spotlight-2720.html
- 5) See the CalMHSA Help@Hand breakdown of technologies in [Minimum Technical Requirements for RFSQ Vendors](#)
- 6) Based on research of free or low cost Lifeline phones offered through various services (refer to [Lifeline Phone in California](#))
- 7) Based on a report <https://www.wirelessdevicesreviews.com/2019/08/lifeline-cellphone-providers-in-california.html>

Hospital Discharge Research

Purpose

The purpose of this data analysis is to ascertain which hospitals in California (specifically in Orange County) would have a need for applications available through the Help@Hand program.

Dataset

The dataset used to conduct the analysis contains the distribution of inpatient discharges by licensed bed type of care for each California hospital, 2009 - 2015.

Source: <https://data.chhs.ca.gov/dataset>.

Glossary

- Disp: Dispositions, or destination of the patient after hospital discharge
- Psych: Psychiatric
- TOC: Transitions of Care

Rank	Facility Name	Disp Psych Care	TOC Psych	Total Discharge Days	Diagnosis Mental Disorders	Mental Disorder % of total	Psych bed numbers	Type of Psych Beds	Contract with County	% English speakers
1	COLLEGE HOSPITAL COSTA MESA	21	2,919	41,683	3,938	21.5%	104	Adult, Adolescent	Yes	Unknown
2	ANAHEIM GLOBAL MEDICAL CENTER	89	2,041	42,269	2,114	11.6%	90	Adult, Geriatric	Yes	42%
3	MISSION HOSPITAL LAGUNA BEACH	49	1,018	16,100	1,925	10.5%	30	Adult	No	92%
4	ST. JOSEPH HOSPITAL - ORANGE	31	1,432	90,139	1,555	8.5%	36	Adult	Yes	38%
5	UNIVERSITY OF CALIFORNIA IRVINE MEDICAL CENTER	125	1,042	133,718	1,255	6.9%	48	Adult, Adolescent	Yes	57%
6	NEWPORT BAY HOSPITAL	2	905	11,327	863	4.7%	36	Adult	No	Unknown
7	HUNTINGTON BEACH HOSPITAL	104	587	21,938	787	4.3%	49	Adult, Geriatric	No	73%
8	CHAPMAN GLOBAL MEDICAL CENTER	23	341	10,616	644	3.5%	12	Adult	No	54%
9	COLLEGE HOSPITAL LONG BEACH	Unknown	Unknown	Unknown	Unknown	Unknown	72	Adult, Geriatric	Yes	Unknown

Digital Informed Consent for Mindstrong Services

Orange County is offering a groundbreaking new technology-based service to qualified consumers through a time-limited, MHSA Innovation project called Help@Hand. This service, developed by Mindstrong Inc., provides access to telehealth support 24 hours a day, 7 days a week (24/7) and a new form of digital mood and cognitive measurement (described below). These services are available through the Mindstrong application (“Mindstrong app”) that I download on my smartphone.

Mindstrong Telehealth Services

Mindstrong provides behavioral telehealth services through the Mindstrong app. These services are delivered by a team of licensed psychiatrists and licensed or supervised therapists who can help me maintain my wellbeing between appointments or after office hours. I can also reach out to my Mindstrong Care Team anytime I am experiencing a crisis. I can do this by sending a secure message through the Mindstrong app on my smartphone. My Mindstrong Care Team is available 24/7 through the Mindstrong app.

I Understand

Care Coordination

If I am currently receiving behavioral health care, the Mindstrong Care Team does not take the place of my clinician (“local provider”) but can provide additional support whenever I need it. To better coordinate my care, Mindstrong clinicians will sometimes communicate with my local provider(s) to better support my wellbeing. This may include discussing potentially important changes in my mood. My local provider(s) will not be able to see my Mindstrong app information, such as biomarker graphs, in-app texts, etc., unless I permit Mindstrong to do so in writing, or I show my Mindstrong app to my local provider(s).

I Understand

Mindstrong App: Biomarkers

While telehealth services are an established behavioral health practice, I understand that Mindstrong biomarkers are a new and emerging approach to care. Biomarkers are derived from the touches, scrolls and taps I make on my phone, and I can see these measurements after they post to the Mindstrong app about one to two days later. The Mindstrong app notifies my Mindstrong Care Team when the way I touch my phone significantly changes.

This project is about learning how Mindstrong biomarkers may provide an early indication of how I am feeling and any symptoms associated with my condition. I understand this form of measurement is new so it is important for me to remember that sometimes my biomarkers may not match how I feel or act. Mindstrong keeps learning how to make the app better at understanding my unique patterns.

Because the app measures how I touch my phone throughout the day, it is important that I do not share my phone with others. The potential accuracy of the biomarkers depends on the Mindstrong app's understanding of my unique touch, tap and scroll patterns. I Understand

If I Experience a Behavioral Health Crisis

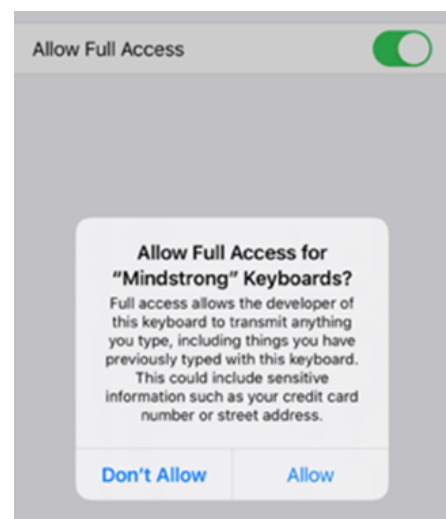
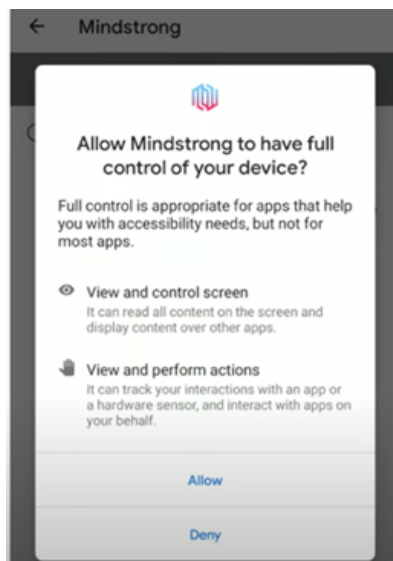
If I report thinking of harming myself or someone else, the Mindstrong Care Team will offer support by speaking with me. After assessing for safety, they may also contact my local provider(s), the emergency contacts I provide, emergency services including 9-1-1 and/or other local crisis support services that can help keep me and others safe. The Mindstrong app or biomarker notifications will never automatically contact my emergency contacts or other emergency services directly. Only the Mindstrong Care Team will do so if appropriate. I Understand

Data Collection

The Mindstrong app **only** looks at the patterns and timing of my touches to measure biomarkers. It does **not** measure, record or access any personal information outside of the Mindstrong app, such as what I type, which apps I use, who I talk to, or my location, passwords or browser activity. In-app messages between me and Mindstrong become part of my record.

During the app download process, a notification will pop up on the screen requesting permission for Mindstrong to access my phone. This is an automatic notification that Apple and Google use to let users know that an app will be collecting information from their phone. This pop up message is generic and cannot be customized to describe what a specific app does and does not collect. I understand that, despite this automatic pop up message saying Mindstrong will have "full access or control" of my phone, Mindstrong **does not** collect my credit card information, control my screen and/or read my messages or emails.

I Understand



Privacy

The Mindstrong Care Team follows the same privacy laws as other clinicians and protects my personal information and protected health information. My information will not be shared unless I give my permission or it is required or permitted by law. In an emergency, Mindstrong may share my information with my local provider(s), crisis services and/or emergency contacts to help keep me and others safe. I can refer to the *Privacy Practices* contained in the “Account” tab of the Mindstrong app for more detailed information. I can find Mindstrong’s HIPAA Notice of Privacy Practices at <https://mindstronghealth.com/hipaa-notice-of-privacy-practice/>

I Understand

Security

Mindstrong uses state-of-the-art security measures to protect against hacking and data breaches. I understand, however, that information security is a constantly changing field and anything shared online may not be secure from these kinds of risks at all times.

The Mindstrong app requires a passcode each time I open the app. I understand that if I share my phone or Mindstrong app passcodes with anyone, they may be able to see my personal health information.

I Understand

Participation

My participation is voluntary. I can let Mindstrong know I want to end services and uninstall the Mindstrong app at any time. If I uninstall the app, I understand I won’t be able to use any Mindstrong services until I reinstall the app. Mindstrong works alongside the UCI Health Services I am receiving. If I am no longer a consumer with UCI Health Services I will no longer receive Mindstrong services.

I Understand

Costs to Participate

I will not be charged for any Mindstrong services while they are provided during the MSHA Innovation project period, which is expected to last through April 26, 2023. I will not be charged for downloading the Mindstrong app. I will not be billed for Mindstrong telehealth services, including in-app texting and/or talking to a member of my Mindstrong Care Team. However, the Mindstrong app uses some cellular data, and phone calls with the Mindstrong Care Team use my voice plan minutes.

If I have a limited data plan, I understand it is my responsibility to adjust my phone settings if I do not want the Mindstrong app to use cellular data. If I do not use cellular data, I understand that my biomarkers will only update when I am connected to Wi-Fi, which may delay my daily biomarker data, and I will only be able to text in the Mindstrong app while connected to Wi-Fi.

It is also my responsibility to keep track of my voice minutes. I am responsible for any overage charges and will not be reimbursed if I go over my data, text and/or voice plan.

I Understand

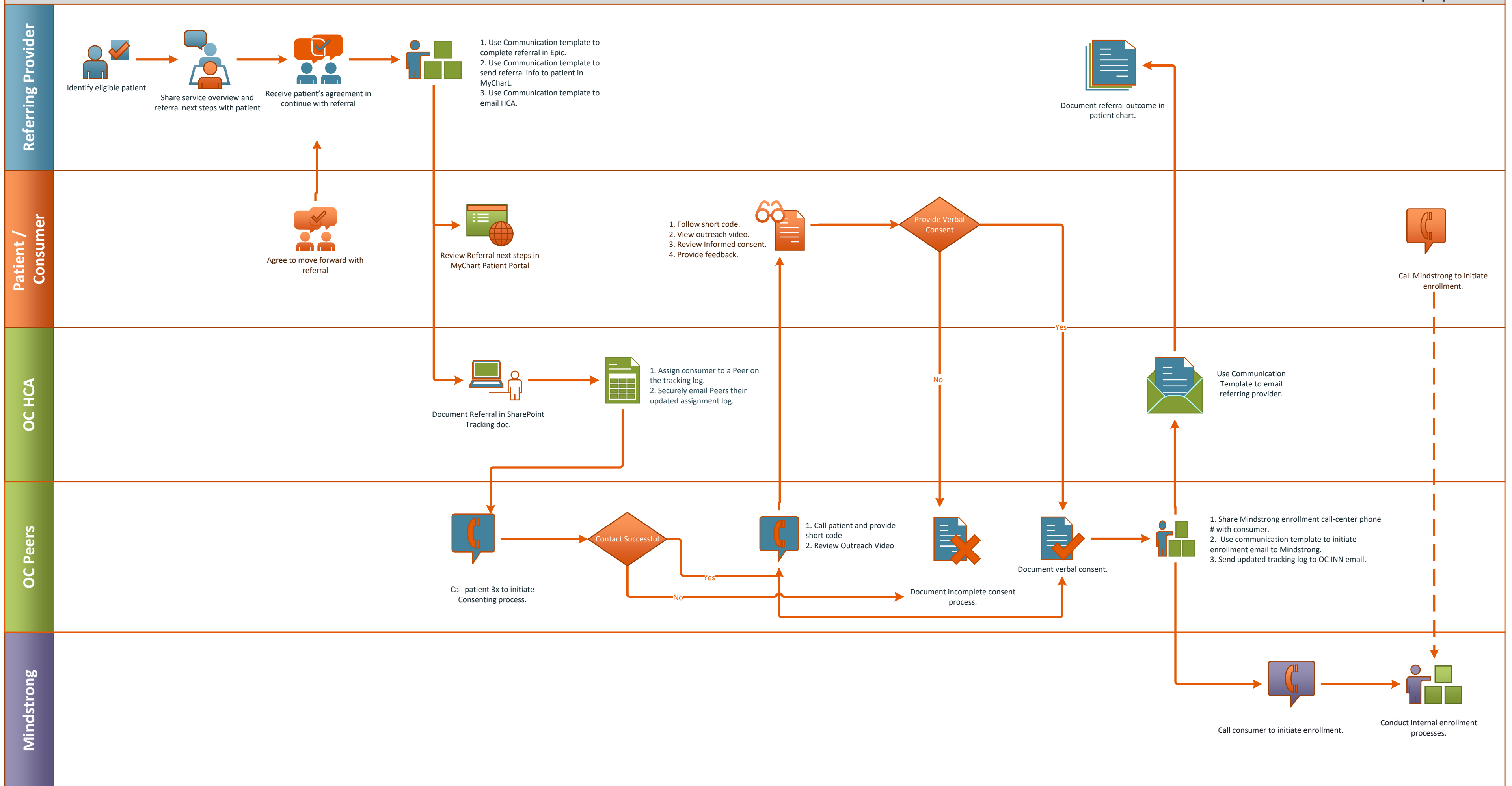
If I choose to use the Mindstrong app and related services, I agree and consent to the following:

- I may inform Mindstrong I want to end services and uninstall the Mindstrong app at any time.
- If I inform Mindstrong I want to end services and uninstall the Mindstrong app, I will no longer receive any services from Mindstrong, including telehealth support or biomarker notifications.
- If I choose to stop using the Mindstrong app, this will not affect my care with my local provider(s) or Orange County Behavioral Health Services, now or in the future.
- As part of my ongoing treatment, information about my care will be shared between my local provider(s) and the Mindstrong Care Team.
- Sometimes my biomarkers may not seem to match how I feel or act. This is why it is important for me to keep working with my local provider(s) and Care Team to help the Mindstrong app get better at understanding my unique patterns.
- I can use Mindstrong for free while the Orange County Health Care Agency (HCA) has approval to participate in the Help@Hand Innovation Project. The HCA expects to participate in the Innovation project through April 26, 2023. It is possible I will no longer be able to use the Mindstrong app and related services for free after the Innovation project expires.
- If I have a limited data and/or voice plan, any overages are solely my responsibility, or I may adjust my phone settings so the Mindstrong app does not use cellular data.
- If I do not use cellular data, I understand that my biomarkers will only update when I am connected to Wi-Fi, which may delay my daily biomarker data. If I do not use cellular data, I also understand that I can only receive and send texts in the Mindstrong app while connected to Wi-Fi.

INITIAL BOX

OC HCA Mindstrong Launch with Medical Outpatient Psychiatry Dept.*

Deployment



* This workflow is unique to OC HCA's implementation.



What is Mindstrong?

Mindstrong is a digital mental health app through which licensed therapists, psychiatrists and/or care partners (i.e., Care Team) provide access to telehealth services via phone, video or in-app texting, and virtual 24-hour crisis support.

The secure smartphone app also uses innovative and proprietary algorithms to anticipate when a person may benefit from additional support, prompting someone from the Care Team to reach out proactively and provide additional, unscheduled support before the person experiences a mental health emergency.



Mindstrong Services

- Therapy (telehealth via secure in-app messaging, phone or video)
- Psychiatry Services
- 24/7 Crisis Telehealth Services
- Mindstrong App educational materials
- Proactive Outreach



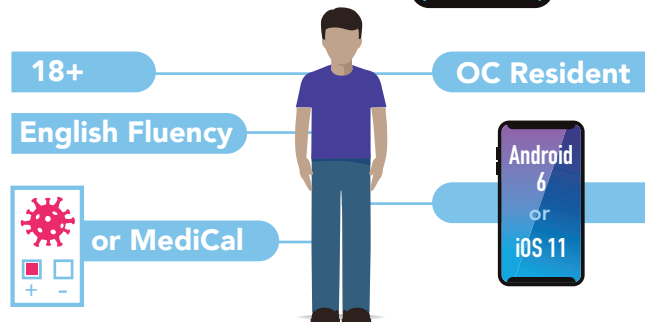
What do patients need?

- **Smartphone:** Compatible with Android 6 or iOS 11 and above.
- **Internet data access:** Wi-Fi at home, work, school or cellular data plan
- **Primary user** of their smartphone device.



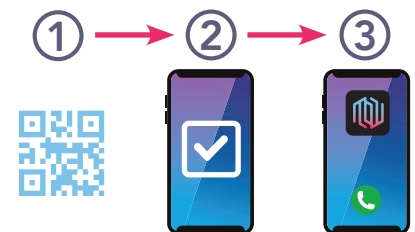
Patient Eligibility

- 18+
- English Fluency
- Resident of Orange County
- Device Eligibility: owns a smartphone (either Android 6 and above or iOS 11 and above)
- Tested positive for COVID (any/no insurance) or MediCal with PHQ9 ≥ 10



Process

- Step 1:** Refer eligible adults via QR code/link to Digital Eligibility and Consent Form
- Step 2:** Patient completes Digital Eligibility and Consent Form
- Step 3:** If eligible, Mindstrong contacts patient for enrollment & permissions. Patient **should not** download the app without guidance from a Mindstrong rep.



Funding and Timeline

Help@Hand is a time-limited Orange County Innovation Project funded by the Mental Health Services Act. The project and free access to Mindstrong services are provided through March 2023. The standard mobile rates and the cost of medication are the patient's responsibility.



Why refer to Mindstrong?

With the Mindstrong app, it's easy for your consumers to connect to a behavioral health clinician whenever, wherever they need it. Eligible* consumers will receive:

- **Therapy & 24/7 Support.**
Schedule text- or phone-based therapy sessions. Access crisis support anytime, day or night.
- **Easy Accessibility.**
Easy to use from an app downloaded on an iOS/Android smartphone.
- **Safe and Secure Experience.**
Connect with a Mindstrong Care Team via telephone or in-app texts sent through the safe, secure and HIPAA-compliant Mindstrong app.
- **No Cost.**
Mindstrong services are free during the Orange County Help@Hand Innovation project. (Mobile provider's standard rates for any voice or data overages still apply.)

*Mindstrong works alongside [PROVIDER]. The consumer must be referred by their provider to be eligible. If they are no longer a consumer with [PROVIDER], they will no longer be eligible to receive Mindstrong services.



Consumer Eligibility

- ✓ 18+
- ✓ English Fluency
- ✓ Resident of Orange County
- ✓ Device Eligibility: owns a smartphone (either Android 6 and above or iOS 11 and above)
- ✓ Does not currently have a psychotherapist
- ✓ Diagnosis of Major Depressive Disorder, Bipolar Disorder, Schizophrenia, Schizoaffective or other Psychotic Disorder
 - Co-occurring anxiety disorders, substance use disorders or other secondary diagnoses are ok **as long as a qualifying diagnosis is present**
 - **May have** history of 1+ psychiatric hospitalizations and/or crisis evaluations within past 12 months

Mental health services that are safe, secure and easily accessible.

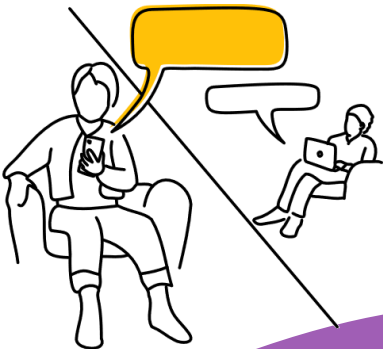


What is Mindstrong?

Mindstrong provides access to scheduled text- or phone-based therapy sessions, as well as 24/7 behavioral health crisis support through the Mindstrong app on a smartphone. This support is provided by the Mindstrong Care Team.

What makes Mindstrong Innovative?

The Mindstrong Research Team has created new ways to measure brain health based on the consumer's touch and interaction with their smartphone (i.e. "biomarkers"). It does so **without** recording any sensitive data and lets the Mindstrong Care Team know when the consumer's touch patterns significantly change. When these changes occur, the Mindstrong Care Team may reach out and offer the consumer additional support.



What information is collected?

The Mindstrong app only uses the patterns and timing of touches on the smartphone. It **does not** measure, record or access any personal information, such as:

- What is typed or texted
- Which apps are used
- Who someone talks to
- Location
- Logins and Passwords
- Browser Activity



Is the information secure?

Mindstrong complies with all California and Federal privacy laws (such as HIPAA). The Mindstrong Care Team follows the same laws as any other health care provider and protects personal health information.

What do they need?

- ✓ **Smartphone:** Compatible with Android 6 or iOS 11 and above.
- ✓ **Data:** Some data will be used by the Mindstrong app, their mobile provider's standard data rates and any overage rates still apply.
- ✓ **Internet access:** Wi-Fi at home, work, school or cellular data plan.
- ✓ Be the **primary user** of their smartphone device.



What a referred consumer can expect:

Step 1: Initial Contact – Consent Form

Consumer reviews and provides consent to enroll in Mindstrong services through the Help@Hand* project.

Step 2: Second Contact – Enrollment & Permissions

Consumer connects with Mindstrong to answer questions about their physical and behavioral health history.

Consumer provides permission to share information with their provider so their Mindstrong Care Team and [PROVIDER] can coordinate and provide high quality care.

* Help@Hand is a time-limited Orange County Innovation Project funded by the Mental Health Services Act. The project and free access to Mindstrong services will end April 26, 2023

Use this pitch to introduce your patients to Mindstrong.



WELLNESS • RECOVERY • RESILIENCE

"I'd like to refer you to Mindstrong, which offers therapy support over the phone or secure texting on an app you would download on your smartphone."

Eligibility Criteria

INCLUSION	CLINICAL	Diagnosis of Major Depressive Disorder, Bipolar Disorder, Schizophrenia, Schizoaffective Disorder, Post-traumatic Stress Disorder, Obsessive Compulsive Disorder, or Severe Anxiety. <i>Co-occurring anxiety disorders, substance use disorders, or other secondary diagnoses are ok when above qualifying diagnosis is present</i>
	DEMOGRAPHIC	Adults 18+ English fluency Resident of Orange County
	DEVICE	Android 6 / iOS 11 or newer Smartphone Internet access: Wi-Fi at home, work, school and/or cellular data plan Primary user of smartphone device user and comfortable using messaging applications

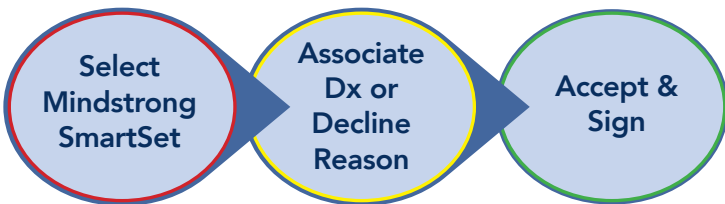
Exclusion: Has a psychotherapist and is consistently attending scheduled psychotherapy sessions provided by a licensed psychotherapist, defined as MFT/LCSW/LPCC or intern, or license-waivered clinician

Mindstrong SmartSet Entry

REFERRAL ACCEPTED

- 1 Open an encounter. Select 'SmartSets' located in the Video Visit (left column) or Plan (right column) tabs.
- 2 Type 'MindStrong' or 'OCHCA' in the Search field and click Add. Click the 'Enroll in OCHCA Mind Strong Program' checkbox. Click Open SmartSets to begin the order.

* To add to Favorites, select 'Enroll in OCHCA Mind Strong Program' check box under Favorites.
- 3 When patients accept the referral, select the 'Order Referral' check box. #See step 5 if patient declines.
- 4 Associate an Inclusion Criteria diagnosis and Sign the order.



SmartSets

Search for your +Add

Search Results

Enroll in OCHCA Mind Strong Program

Favorites (2)

Enroll in OCHCA Mind Strong Program

✓ Open SmartSets ✗ Close Selection

Enroll in OCHCA Mind Strong Program Manage User Versions

Refer to OCHCA

OCHCA-Mind Strong Enrollment

Order Referral

Patient Declined Referral to OCHCA/MindStrong

Enroll in OCHCA Mind Strong Program Manage User Versions

Refer to OCHCA

OCHCA-Mind Strong Enrollment

Order Referral

OCHCA - Enroll in MindStrong

Routine External referral, "Your can select either a discrete Referral: "To loc/pos" (Referring Location OR "TO Provider" (Referring Provider) OR you can free text this info in the Comments (Fill) field"

Has the patient consented for this referral? Yes
Patient's preferred language: English
Name: Son P Nisaks DOB:5/7/2008 Preferred Ph. 415-513-7948 email: tina.meaks@gmail.com

Add Referral information and next steps to the AVS

Patient Declined Referral to OCHCA/MindStrong

Additional Orders

search

You can search for an order by typing in the header of this section.

Associates Edit Multiple Providers Remove Print Sign

REFERRAL DECLINED

- 5 When patients decline referral select 'Patient Declined Referral to OCHCA/Mindstrong'.
- 6 Click the 'Normal, Routine' hyperlink.
- 7 Select relevant 'Reason not Referred' checkboxes and add Comments if appropriate.
- 8 Click Accept and Sign the Referral order.

Refer to OCHCA

OCHCA-Mind Strong Enrollment

Order Referral

Patient Declined Referral to OCHCA/MindStrong

Normal, Routine

Patient Declined Referral to OCHCA/MindStrong Accept Cancel Remove

Priority

Reason not Referred Prefers face-to-face privacy concerns safety/security concerns content with current care

no time no cell phone/data other

Comments

Why use Mindstrong?

With the Mindstrong app, it's easy to connect to a behavioral health clinician whenever, wherever you need them.

Eligible* consumers receive:

- **Therapy & 24/7 Support.**
Schedule text- or phone-based therapy sessions. Access crisis support anytime, day or night.
- **Easy Accessibility.**
Easy to use from an app you download on your iOS/Android smartphone.
- **Safe and Secure Experience.**
Connect with your Mindstrong Care Team via telephone or in-app texts sent through the safe, secure and HIPAA-compliant Mindstrong app.
- **No Cost.**
Mindstrong services are free to you during the Orange County Help@Hand Innovation project. (Your mobile provider's standard rates for any voice or data overages still apply.)

* Mindstrong works alongside [PROVIDER]. You must be referred by your provider to be eligible. If you are no longer a consumer with [PROVIDER], you will no longer be eligible to receive Mindstrong services.



“You need your support system, and when you don’t have one, it’s very useful to send a text to my case worker with Mindstrong.”

-Louisiana Mindstrong User

Mental health services that are safe, secure and easily accessible.



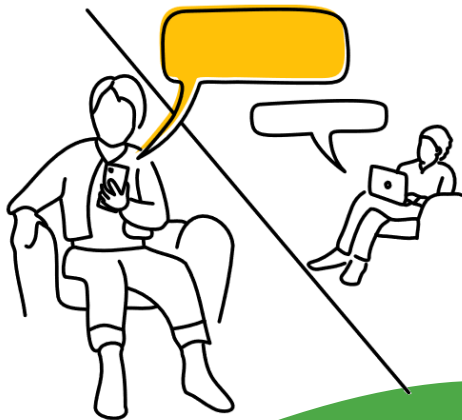
WELLNESS • RECOVERY • RESILIENCE



What is Mindstrong?

Mindstrong provides access to scheduled telehealth therapy sessions, as well as 24/7 behavioral health crisis support through the Mindstrong app on your smartphone. This support is provided by the Mindstrong Care Team.

The Mindstrong Research Team has created new ways to measure your brain health, based on how you touch and interact with your smartphone. It does so **without** recording any sensitive data and lets the Mindstrong Care Team know when your touch patterns significantly change. When these changes occur, the Mindstrong Care team may reach out and offer additional support.



What information is collected?

The Mindstrong app only uses the patterns and timing of your touches on your smartphone. It **does not** measure, record or access any personal information, such as:

- What you type or text
- Which apps you use
- Who you talk to
- Your location
- Logins and Passwords
- Browser activity



Is my information secure?

Mindstrong complies with all California and Federal privacy laws (such as HIPAA). The Mindstrong Care Team follows the same laws as any other health care provider and protects your personal health information.

How do I enroll?

- ✓ **Referral:** Talk to your provider about your interest and eligibility.
- ✓ **Smartphone:** Compatible with Android 6 or iOS 11 and above.
- ✓ **Unlimited Data Plan:** Some data will be used by the app. Without an unlimited data plan, your mobile provider's standard data rates, and any overage rates, still apply and are your responsibility.
- ✓ **Internet access:** Wi-Fi at home, work or school and/or cellular data plan.
- ✓ Be the **primary user** of your smartphone device.

What should I expect?

Step 1: Initial Contact – Consent Form

Review and provide consent to enroll in Mindstrong services through the Help@Hand* project.

Step 2: Second Contact – Enrollment & Permissions

Connect with the Mindstrong Team to answer questions about your physical and behavioral health history.

Provide Mindstrong permission to share information with your provider so your Mindstrong Care Team and [PROVIDER] can coordinate and provide high quality care.

*Help@Hand is a time-limited Orange County Innovation Project funded by the Mental Health Services Act. The project and free access to Mindstrong services will end April 26, 2023.



With the Mindstrong app, it's easy to connect whenever, wherever you need. Features include:

24/7 Mental Health Support

Schedule text- or phone-based therapy sessions. Access crisis support anytime, day or night.

Safe and Secure

Connect with your Mindstrong Care Team through the safe, secure, HIPAA-compliant app.



Easily Accessible

Easy to use from an app you download on your smartphone.

No Cost

Mindstrong services are free at this time thanks to the Orange County Help@Hand MHS Innovation project.

What You Need



Smartphone: Compatible with Android 6 or iOS 11 and above.



Internet Data Access: Wi-Fi at home, work or school and/or cellular data plan.



Be **18+** and the **primary user** of your smartphone.

Getting Started

Complete a brief online eligibility and consent form by using the QR code or link below

[Online Eligibility and Consent](#)



WELLNESS • RECOVERY • RESILIENCE



CONNECTING PEOPLE
WITH CARE

Orange County Mindstrong Informed Consent Video Scripts

November 2020

1. Orange County MHS Innovation Project with Mindstrong Telehealth Services (83 words)

Orange County has joined other California counties to take part in a time-limited project called Help at Hand. Through this project, you can use an app to access a groundbreaking service called Mindstrong. Mindstrong has developed a new form of digital mood and cognitive measurement, and provides you with behavioral telehealth support through your smartphone.

Help at Hand is funded through the Mental Health Services Act, and Mindstrong and its services are free for the length of the project, which ends in April 2023.

2. Care & Care Coordination (75 words)

Mindstrong telehealth services are provided by licensed psychiatrists, and licensed or supervised therapists. These services do not replace any behavioral health care you're already receiving. If you have a local provider, Mindstrong clinicians will sometimes communicate with them to better coordinate your care. This may include discussing potentially important changes in your mood. However, your provider won't have access to your Mindstrong records unless you sign a release or choose to show them the app.

3. Mindstrong App: Biomarkers (174 words)

While telehealth is an established behavioral health practice, Mindstrong biomarkers are a new and emerging approach to care. Biomarkers are created by the touches, scrolls and taps you make on your phone. Your biomarker measurements, updates, and their accuracy depends on the Mindstrong app's understanding of your unique touch, tap and scroll patterns. Your biomarkers won't display in real-time, but you can see them after they post to the Mindstrong app.

The Mindstrong app also notifies your Mindstrong Care Team when the way you touch your phone significantly changes. This project is about learning how Mindstrong biomarkers may provide an early indication of how you're feeling and any symptoms associated with your condition. This form of measurement is new, so it's important to remember that sometimes your biomarkers may not match how you feel or act. Mindstrong keeps learning how to make the app better at understanding your unique patterns. Because the app measures how you touch your phone throughout the day, it's important that you don't share your phone with others.

4. If You Experience a Behavioral Health Crisis (104 words)

If you experience a crisis, you can send a secure message to your Mindstrong Care Team through the app, anytime day or night. In the event you report thoughts of harming yourself or someone else, the

Care Team will reach out to offer support. If, after speaking with you, they're concerned for your safety, they may also contact your local provider, your emergency contacts, or emergency services including 9-1-1. Please be assured that the Mindstrong app or biomarker notifications will never automatically reach out to your emergency contacts or emergency services. Only the people on your Care Team will do so if appropriate.

5. Data Collection (170 words)

The Mindstrong app only looks at the patterns and timing of your touches to measure biomarkers. It does not record or access any personal information outside of the Mindstrong app, such as what you type, what apps you use, who you talk to, your location, passwords or browser activity. However, in-app messages between you and Mindstrong do become part of your record.

During the app download process, a notification will pop up on the screen requesting permission for Mindstrong to access your phone. This is an automatic notification that Apple and Google use to let users know that an app will be collecting information from their phone. Even though the pop-up message says Mindstrong will have "full access or control" of your phone, that is not accurate. This pop-up message is generic and not customized to describe what a specific app does and does not collect. Giving Mindstrong access to your phone does not allow Mindstrong to control your phone, collect payment information, or read your passwords, texts or emails.

6. Privacy (95 words)

The Mindstrong Care Team follows the same privacy laws as other clinicians and protects your personal information and protected health information. Your information will not be shared unless you give permission or it's required or permitted by law. In an emergency, Mindstrong may share your information with your local provider, emergency contacts or crisis services to help keep you and others safe. You can refer to the Privacy Practices contained in the "Account" tab of the Mindstrong app, and you can find Mindstrong's HIPAA Notice of Privacy Practices at the link on this page.

7. Security (71 words)

Mindstrong uses state-of-the-art security measures to protect against hacking and data breaches. However, information security is a constantly changing field, and anything shared online may not be secure from these kinds of risks at all times. To help protect your privacy, Mindstrong uses passwords and phone biometrics, like FaceID or TouchID, each time you open the app. Sharing this information with anyone may allow them to see your personal health information.

8. Participation (75 words)

Your participation is voluntary. You can let Mindstrong know you want to end services and uninstall the app at any time. If you uninstall the app, you won't be able to use Mindstrong services until you reinstall

it. Mindstrong is being provided in partnership with select providers or health plans in Orange County. If you're no longer with the health plan or provider who referred you to Mindstrong, you will no longer receive Mindstrong services.

9. Costs to Participate (170 words)

There's no charge to download and install the Mindstrong app, and Mindstrong clinical services are free during the Help at Hand project period, which is expected to last through April 26, 2023. Please keep in mind that you're still responsible for paying for any prescriptions you might fill following a Mindstrong psychiatry consultation.

The Mindstrong app uses some cellular data, and phone calls with the Mindstrong Care Team use your voice plan minutes. If you have a limited data plan, it's your responsibility to adjust your phone settings so that the Mindstrong app doesn't use cellular data. If you don't use cellular data, your biomarkers will only update when you're connected to Wi-Fi. This may delay your daily biomarker report, and you'll only be able to text in the Mindstrong app while connected to Wi-Fi.

If you have a limited voice plan, please keep track of your voice minutes. You're responsible for any overage charges and will not be reimbursed if you go over your data, text or voice plan.

Informed Consent Videos

Overview

The initial informed consent process required the consumer to read the [Informed Consent document](#), initialing their understanding of nine sections and adding their signature at the bottom. HCA eventually developed a series of nine short consumer videos to provide an alternative consenting experience. The consumer was referred to a link where they could view the videos and provide their informed consent through Qualtrics (a digital platform for surveys and processes).

Process

The Informed Consent document text was used as the foundation for creating [video scripts](#). The Peers provided consumer perspective and helped ensure messaging consistency and appropriateness (i.e., recovery-oriented, effective, relevant, engaging) of the overall appearance, voice and tone of the videos.

