Virtual Same Day Access – The Future is Now

Same Day Access (SDA) provides clients with unscheduled access to a clinical assessment either the same day they request it or the next day. Unscheduled assessments reduce wait times and eliminate no-show rates, improve clinician productivity while increasing client engagement. Rapid access is a key requirement for CCBHCs and a best practice for all provider organizations.

In the wake of the COVID-19 pandemic, many organizations successfully shifted to a virtual SDA model, where all the elements of “traditional” SDA are conducted in a telehealth environment. And having made that change, they are committed to keeping it going as part of the “new normal.”

How does virtual SDA work?

- **Step 1 - Screening**: The process begins with a short screening phone call to rule out a crisis, confirm match of service needs and client access to necessary technology – smart phone, iPad/tablet or computer. The screening call takes 5-6 minutes at which point the client is invited to log into the virtual platform. Common platforms include doxy.me, GoToMeeting and Zoom. Ideally, a single link is provided on the organization’s website and anyone can log in during open access hours; no password or account set up is required.

- **Step 2 - Client Logs In**: The client clicks the link to enter a virtual waiting room, where they are greeted by administrative support staff and asked to complete consent and release forms digitally. Once finished, they return to the virtual waiting room until the assessment clinician is ready – ideally, less than 15 minutes.

- **Step 3 - Virtual Assessment**: The clinician will retrieve the client from the virtual waiting room and bring them into a live telehealth session where the assessment will be conducted in approximately 60 minutes. The appointment will end with an established treatment plan goal and a scheduled appointment to return for a treatment session within 5-8 days.
How do you make the shift to virtual SDA?

- **Communicate** with staff to address every possible question or scenario. Shifting to virtual creates anxiety, but it's really no different than the in-person model. The team needs to know that the organization has a good plan in place to make it work – for staff and clients.

- **Testing** is essential. Regardless of the platform, a variety of team members should test every aspect of both the host and client experience before going live.

- **Trust** has to be built over time. All that testing and planning provides staff with the confidence to know that the system works. And of course, when things come up, adjustments can be made – this is not a system you just implement and forget about.

For many organizations, there are unexpected benefits of operating in a virtual environment:

- Expanded pool of clinicians, as they are no longer limited by location or geography;
- Ability to serve more people, especially those who face transportation challenges;
- Reduced paperwork challenges – clients can retrieve needed documents at home;
- Increased accessibility, easier scheduling and transitions, especially for families;
- No more crowded, overwhelming in-person waiting rooms; and
- Robust data analytics that allow for more efficient and predictable scheduling of staff.

“If the goal is to get more people into care quickly, then Virtual Same Day Access is essential and truly a win-win, for both clinicians and clients. As we have seen across the nation, if we build it right, they will come.”

**Joy Fruth**, MSW and Lead Process Change Consultant at MTM Services

Same Day Access works. And telehealth is here to stay. Indeed, as many organizations are discovering, virtual SDA may even be the best of both worlds. For more information on Same Day Access and the MTM Consultation Team, please visit [www.mtmservices.org/sda](http://www.mtmservices.org/sda) or to schedule a free planning meeting, please email MTM director of operations Jodie Giboney or call (919) 387-9892.