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Improving Efficiency of Referrals and Documentation at Drive Well Michigan Driver

Rehabilitation Clinic

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OT 7202: Doctoral Capstone Project and Experience

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Abstract

The doctoral capstone project focused on developing a current website for Drive Well Michigan driver rehabilitation clinic that incorporated web content accessibility strategies and increased patient autonomy by allowing them to initiate referrals, schedule appointments online, and pay online. This mechanism was concurrently developed to decrease the amount of time that occupational therapists on site previously dedicated towards completing the entire referral, scheduling and payment process over the phone. Additionally, two electronic record systems were researched, demonstrated, and presented to site mentor, and two documentation summary templates were designed to be integrated into the chosen future system. Lastly, practice management documents, an updated brochure, and next step planning documents were created to enhance organization, broaden community outreach, maximize financial resources, and sustain the efforts of the fourteen week capstone experience.

Introduction to Capstone Project

Drive Well Michigan is a driver rehabilitation clinic with two West Michigan locations: Kalamazoo and Battle Creek, Michigan. Services provided at Drive Well Michigan include clinical evaluation of driving skills, behind-the-wheel evaluations of driving skills, driver rehabilitation and training sessions, and adaptive equipment conformance (D. Andert, personal communication, June 2022). Before the current capstone project, Drive Well Michigan had a text-based website with outdated information and no method for patients to submit referrals, make appointments, or make payments other than over the phone with one of two occupational therapists on site (D. Andert, personal communication, June 2022). Additionally, prior to the capstone project, the site mentor was dissatisfied with the current electronic health record (EHR) system, EThomas/Genius Solutions, and other medical providers had voiced concerns about the

presentation of client results in the current reports as it was difficult to pinpoint (D. Andert, personal communication, June 2022).

The capstone project aimed to improve the efficiency of referrals, appointments and payments by expanding these functions to an online platform, as well as contribute towards the organization's decision on an EHR system moving forward. The capstone project also aimed to improve the accessibility of web content displayed on the organization's website. Therefore, the capstone project focused on the ACOTE concentration area of Leadership and Administration.

Promoting patient autonomy, or the right for a patient to have control over their choices, is a guiding principle of the Occupational Therapy Code of Ethics (AOTA 2020 Occupational Therapy Code of Ethics, 2020). By establishing a mechanism that allowed patients to submit referrals, schedule appointments, and make payments themselves online, the autonomy of patients and amount of time that staff can allot towards occupational therapy services and documentation production was increased. Additionally, patient autonomy was improved by designing website content that incorporated accessibility strategies for persons with disabilities, screen readers, and older adults. Web content accessibility strategies were guided using Worldwide Web Consortium Web Content Accessibility Guidelines (*Web content accessibility guidelines*, n.d.).

The capstone site mentor was Diane Andert, who is a licensed occupational therapist, certified driver education instructor (CDI), and The Association for Driver Rehabilitation Specialists (ADED) certified driver rehabilitation specialist (CRDS). Collaborating with Diane served as a means to developing an in-depth knowledge of the organization's practice and administrative functions, as well as identify the administrative goals of the company to improve upon with the capstone project. Diane Andert provided a copy of ADED Best Practice

Guidelines for the Delivery of Driver Rehabilitation Services to the capstone student (*ADED best practice guidelines for the delivery of driver rehabilitation services*, 2016). Diane Andert also provided a copy of ADED Code of Ethics to the capstone student (*ADED Code of ethics*, 2018).

Additionally, email and virtual interviews were conducted with Clay Jewell, an occupational therapist and CRDS in Grand Rapids, Michigan (C. Jewell, personal communication, June 2022). Clay Jewell's organization is called Automobility (Automobility, n.d.). His interview answers and website provided substantial guidance for a driver rehabilitation clinic website design and insight into the EHR system used at his company, IntakeQ (C. Jewell, personal communication, June 2022). Interviews with Clock Mobility adaptive equipment specialist, Matt Goodlock, were also conducted to obtain knowledge about adaptive equipment available and financing options (M. Goodlock, personal communication, March 2023).

After investigating the needs of the organization and administrative goals of the site mentor, various phone meetings, virtual meetings, and program demos were scheduled and conducted with the previous web domain holder, GoDaddy, and the EHR systems considered: IntakeQ and E-Thomas Genius Solutions (Erika Ehmann & Andrew Marsh, personal communication, March/April 2023). The design of the updated website and new online administrative functions were continually monitored by the site mentor and feedback was provided to enhance project. In addition to content accessibility, an important component of web design for the capstone project was simplicity and user-friendliness of programs used for development so that staff could easily adopt them and contribute to successful sustainability of the project.

In efforts to consolidate organization subscription expenses and organize additional administrative components, the following documents were produced: expense tracker, password tracker, and next steps planning list. Lastly, in efforts to improve community outreach, an

updated Drive Well Michigan brochure was designed and sent to twenty-two Kalamazoo and Battle Creek area organizations that serve persons with disabilities and older adults.

Literature Review of Capstone Topic

According to the American Occupational Therapy Association's (AOTA) Find a Driving Specialist online resource, only fifteen driver rehabilitation services exist in the state of Michigan in 2022, indicating that there is a very limited opportunity for these services to be received by clients in need (*Driver search*, n.d.). Occupational therapists must obtain a Certified Driver Rehabilitation Specialist (CDRS) credential from the Association for Driver Rehabilitation Specialists (ADED) to administer these services, and there are currently only about 370 active CDRS in the U.S. and Canada (*CDRS vs DRS*, n.d.). When organizational information is unclear to clients and administrative tasks are not systemized, the occupational therapists at an organization must allocate more time towards managing referrals or documenting and less time treating clients directly. Following a needs assessment at Drive Well, a West Michigan driver rehabilitation clinic, an imbalance between direct treatment time of clients and handling administrative operations was identified by the CDRS occupational therapists on site. Increasing website accessibility to support an online referral mechanism and creating systematic documentation templates are administrative updates that would contribute to efficiency of a rehabilitation business and allow for increased time to allocate towards delivery of these specialty services. This review discusses the value of increasing web content accessibility and referral access to promote health literacy and autonomy of clients, the value of organizing documentation processes, and the role of occupational therapy within driver rehabilitation.

Web Content Accessibility

Website accessibility can be impacted by a user's ability to see, hear, move, process information, use a keyboard or mouse, read or comprehend text, understand a language fluently, and can be further negatively influenced by slow internet operating systems (Curran et al., 2007). A study by Curran et al. (2007) identifies usability barriers that affect disabled individuals and older adults, as well as recommends the integration of guidelines set by the Web Accessibility Initiative (WAI). Guidelines set by the WAI, called the Web Content Accessibility Guidelines, are further recommended by a related article that compares disability laws impacting web accessibility for older adults (Yang & Chen, 2015).

The Web Content Accessibility Guidelines (WCAG) 2.1 is the most current set of commonly used accessibility standards and provides specific recommendations on how to make online content accessible to users with cognitive, sensory, or physical impairments (*Web content accessibility guidelines*, n.d.). These guidelines not only make content more accessible to a wider range of people with disabilities, but also address accessibility across a range of electronic devices, including laptops, tablets, or cell phones.

There are three levels of website classification: low accessibility (A), high accessibility (AA), and highest accessibility (AAA); however, Level AAA has a rare prevalence in practice (Schmutz et al., 2016). A study by Schmutz et al. (2016), indicates that Level AA websites promote faster performance, higher task completion rates, and higher participant ratings of usability, aesthetics, and trustworthiness without producing detrimental effects for nondisabled users. A WCAG quick reference guide is available with full descriptions of each guideline, along with techniques and failure examples for each (*How to meet WCAG*, n.d.). The WCAG website also presents tools and techniques that people with disabilities use to access the web; as well as examples of accessibility features surrounding the following: "(1) tools and preferences, (2)

perception: hearing, feeling, and seeing, (3) presentation: distinguishing and understanding, (4) input typing, writing, and clicking, and (5) interaction navigating and finding” (*Tools and techniques in how people with disabilities use the web*, n.d.). The Worldwide Web Consortium (W3C) provides an online course called Digital Accessibility Foundations that focuses on beginner coding, web design for disabilities and older adults, writing a business case for management, advocating, managing accessibility in projects, and accessibility checks (Worldwide Web Consortium, 2023). Additionally, an article by Curran, Walters, and Robinson provides basic accessibility solution recommendations for websites based on the WCAG guidelines (Curran et al., 2007).

Lastly, federal standards within Section 508 of the Rehabilitation Act “requires electronic document accessibility for individuals with disabilities that may use a screen reader or other assistive device” (Michigan Department of Transportation, n.d.). The Michigan Department of Transportation developed an accessibility formatting guide that abides by these standards (Michigan Department of Transportation, n.d.). The resources previously described served as guidelines when implementing website accessibility for the capstone project at Drive Well.

Online Referral Mechanism and Documentation Efficiency

In addition to information accessibility limitations, administrative obstacles can also impede an organization’s ability to deliver services efficiently. A study conducted by Stav et. al (2011) surveyed 3,191 occupational therapy practitioners, managers, and administrators about the barriers to driver rehabilitation program development, and barriers such as “standard business operations”, “infrastructure to support referral and use”, and “administrative support” were identified by 41.5%, 40.1%, and 37.1% of respondents, respectively. These administrative

barriers uncovered by this qualitative study mimic the administrative barriers identified in the Drive Well's needs assessment (Stav et. al, 2011).

ADED states that referrals to a driver rehabilitation program for clients with disabilities can be made by “physicians, specialists, eye doctors, occupational therapists, driving schools, gerontologists, parents or spouses, the individuals themselves, or other sources” (*CDRS vs DRS*, n.d.). This statement justified the need for a referral mechanism that is accessible by referral sources, including the clients themselves, at Drive Well. Additionally, AOTA provides a driving rehabilitation program development toolkit with information regarding referrals, building program and service awareness, and promoting participation in drivers programs that was used when conducting the current capstone project (*Driving rehabilitation program development*, n.d.).

Occupational therapy documentation defines a client's need for therapy services and reimbursement justification (Stressel & Dickerson, 2014). ADED states that the driver evaluation process “includes tests of physical function, vision, perception, attention, motor function, reaction time, and actual driving performance tests”, all of which then must be documented to create a report for the client (*CDRS vs DRS*, n.d.). An article by Stressel and Dickerson (2014) provides guidelines for Medicare reimbursement and examples of how driver rehabilitation occupational therapy services can be reimbursed by third party payers, as well as examples of Medicare letters of appeal. Although driver rehabilitation services are largely out-of-pocket services at Drive Well Michigan, this article served as a resource for creating thorough documentation templates within the electronic record system at Drive Well, in addition to site-specific documentation requirements, as it informed on correct documentation for medical necessity of services. Additionally, this article supported creation of thorough documentation

templates that would support reimbursement through contract organizations that support persons with disabilities, such as Michigan Rehabilitation Services (MRS).

Role of Occupational Therapy

Driving and community mobility are described in the Occupational Therapy Practice Framework, 4th Edition (2020) as an instrumental activity of daily living (IADL) involving “planning and moving around in the community using public or private transportation, such as driving, walking, bicycling, or accessing and riding in buses, taxi cabs, ride shares, or other transportation systems”. In addition to being a recognized IADL, driving and community mobility are also “occupation enablers” because it contributes to engagement in other areas of occupation, including social participation, maintenance of life routines, and participation in work or leisure activities (Stav et al., 2011).

Occupational therapists are qualified to provide necessary services related to driving including “(1) assessing the impact of a medical condition on fitness to drive, (2) providing training in the use of adaptive driving equipment or compensatory strategies, (3) making recommendations for adaptive driving equipment or restrictions, and (4) when necessary, assisting in transitioning the person to alternative methods of transportation” (Stressel & Dickerson, 2014). A client’s ability to continue driving should be determined by skilled evaluation of performance and safety by a CDRS, and not by age or diagnosis, since there is extensive variability between health and functional capacities of older adults (Stav et al., 2011). In addition to older adults, the limited availability of driver rehabilitation programs and specialists also directly affects younger drivers with disabilities who require services due to disabling conditions including traumatic brain injuries, spinal cord injuries, and amputations (Stav et al., 2011). ADED also specifies that management of disabilities such as cerebral palsy,

Parkinson's disease, stroke, sensory impairments, dementia, Down syndrome, and psychiatric conditions can also be supported by referral to a CDRS (*CDRS vs DRS*, n.d.). The Clinician's Guide to Assessing and Counseling Older Drivers reiterates these notions throughout the textbook while providing helpful information to patients, caregivers, and providers that was incorporated into the development of the capstone project (United States National Highway Traffic Safety Administration, issuing body, and author American Geriatrics Society, 2019).

Gap Analysis Statement

Previously at Drive Well driver rehabilitation clinic, there was limited website accessibility for older adults and clients with disabilities, no system in place for online referrals, and outdated documentation templates. Referrals were managed entirely over the phone by the two occupational therapists and CDRS on site, and documentation requirements were unorganized within the electronic record system and when sent to other medical providers. This former inefficient approach to referral information and documentation completion resulted in increased time of occupational therapists spent managing administrative operations and decreased client autonomy, supported by a needs assessment of the organization and by the literature.

The literature unveiled a gap between web content accessibility and creating a successful online referral mechanism, as well as creating efficient documentation templates for a driver rehabilitation program. The literature demonstrated that web content accessibility guidelines can have a positive impact on both disabled and nondisabled users' online navigation ability. The literature stated that clients themselves, in addition to medical professionals, are within jurisdiction to create their own referrals to driver rehabilitation programs. The literature also stated that thorough documentation of driver rehabilitation services can result in third party payer

reimbursement of services for clients. Furthermore, the literature supported the qualifications of occupational therapists in delivering driver rehabilitation services through skilled evaluations, trialing adaptive equipment or compensatory strategies, or transitioning to alternative transportation methods.

This capstone project aimed to fill those gaps by developing an online referral mechanism on the Drive Well website that incorporates evidence-based web accessibility standards. The capstone project also aimed to fill that gap by updating documentation templates and investigating options for an electronic record system to reflect the needs of the organization, promote maximum reimbursement by third party payer sources, and increase the efficiency of client report production. Lastly, the site employees were provided with practice management documents, an updated Drive Well Michigan brochure, and an interactive presentation detailing the administrative changes and instructions on how to edit and use both the web domain and documentation templates after the project is complete.

Needs Assessment

Based on the literature review and collaboration with capstone mentor, a SWOT analysis was conducted to identify the needs of the organization to be targeted with the current capstone project. Strengths of the organization included lack of financial barriers and functions of the former EHR. Weaknesses included formerly conducting all referrals and appointment scheduling over the phone, former website accessibility limitations, cohesiveness of functions performed by former EHR system, documentation coherency for other medical providers, and disorganization of subscriptions and passwords. Opportunities included the user-friendly functions of the organization's web domain, updating the organization's brochure, and the site mentor's collaborative relationship with a Grand Rapids area CDRS named Clay Jewell, who served as a

wealth of knowledge on various administrative products that succeed at his organization. Threats included length and delay of documentation report production, as well as the complexity of online appointments and payments in compliance with required client pre-screening data. The SWOT analysis chart is listed below for an in-depth visualization of the process.

Strengths	Weaknesses
<ul style="list-style-type: none"> • Current electronic health record system (eThomas) allows access for CDRS employees to control scheduling, check what they are evaluating/training, and use as a communication tool. • Diane expressed that there are not substantial financial barriers, and that other electronic or web-based services can be explored. Diane also mentioned available funding for a web-design specialist, if necessary. 	<ul style="list-style-type: none"> • Drive Well’s current method of referral is done entirely over the phone. Clients are faced with waiting for a call back while CDRS are with clients. • Drive Well often serves clients with low vision, amputations, neuro-progressive conditions, neuropathies, and older adults; The current website uses a text-based format with limited accessibility to many of these populations. The information is outdated by 4+ years. • Currently, electronic reports from eThomas are sent through Word and email, but Diane would like documentation and billing to go out together all under one system. eThomas representatives have also been historically unresponsive and unhelpful to site employees • Physicians have expressed that the current documentation reports pose difficulty to finding important results and recommendations due to length • Site mentor has various subscription services that may be unnecessary and clash with the functions of each other; passwords are unorganized and hard to find for each.
Opportunities	Threats

<ul style="list-style-type: none"> • Current web domain (GoDaddy) and electronic health record system (eThomas) both have online resources or trainings available for understanding features (GoDaddy, n.d.) • Various organizations in Kalamazoo and Battle Creek could benefit from an updated brochure detailing Drive Well’s services • Diane has a collaborative relationship with Grand Rapids CDRS, Clay Jewell, who has a thorough referral information section on his website for Automobility. He shared the following insight: <ol style="list-style-type: none"> 1. Website domain purchased through Google; Wix used for website design 2. Popular option for online referrals: Great Lakes Health Connect; physicians use Athena. 3. Clay uses electronic fax that shows up in iCloud: SR Fax (integrates with electronic record for monthly subscription) 4. National association website for Drivers Rehab Specialists for website ideas 5. Clay uses IntakeQ for electronic health records which records patient information, sends questionnaires, appointment reminders, notes and documentation, and can build templates but comes blank. (IntakeQ, n.d.) 	<ul style="list-style-type: none"> • A 5 page report must be produced to ensure that the individual is tested thoroughly with a specific series of evaluations required by the state of Michigan • This report is often delayed because time is required to score, but clients are eager for results as they pertain to driving clearance • There are still so many individuals who are underserved because many people are not aware of the services until they are needed. • Automatic scheduling online may not work because there is a lot of pre-screening data that needs to be verified
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Objectives Achieved during the Capstone

In preparation for the capstone experience, six objectives were developed in tandem with the goals of the site mentor. The objectives were continuously monitored and adjusted to reflect the organizational needs of Drive Well Michigan. The objectives, objective status, and weekly task breakdown are provided below as a visual of how each objective was met.

Objective	Status
1. Explore and gain competency with features and use of Drive Well website domain (GoDaddy) to prepare for website creation by end of week 2. (GoDaddy, n.d.)	Met
2. Upgrade organization's website to adhere to evidence-based web-accessibility strategies and include an online referral feature that combines pre-screening client data and common diagnoses specific to Drive Well by the end of the 14 week experience.	Met
3. Educate personnel on implementation of new documentation templates, web-based referral mechanism, and site website that adheres to WCAG web accessibility guidelines by the end of the 14 week capstone.	Met
4. Evaluate differences in cost and functionality of two major electronic record systems (Ethomas/Genius Solutions, IntakeQ) and present data to site mentor by the end of the capstone experience.	Met
5. Compose new or modify existing documentation templates to improve communication of results to physicians and organizations that support client funding by end of week 8.	Met
6. Create an informational brochure for dissemination to West Michigan organizations that support persons with disabilities and aging to increase community outreach of Drive Well by the end of the 14 week experience.	Met

Doctoral Capstone Project	
Week 1	<ul style="list-style-type: none"> ● Orient to organization ● Learn about needs of organization in terms of documentation and referrals ● Review literature review, current Drive Well website, set up Signaturely, organize assignment schedule ● Visit Portage location, gain access to website domain, explore current EHR system, gather evaluation forms and other documentation used ● Read/organize information and resources regarding driver rehabilitation program development

	Doctoral Capstone Project
Week 2	<ul style="list-style-type: none"> • Complete website domain (GoDaddy) online training videos regarding the following: content creation, eCommerce, website domain, website building, online stores, advanced design and media, search engine optimization, and website security (GoDaddy, n.d.) • Created detailed notes during the learning process to aid in the website design process • Discover GoDaddy Website Builder functions; present findings to site mentor for her consideration
Week 3	<ul style="list-style-type: none"> • Review forms currently used at Drive Well and available resources to guide documentation requirements for driver rehabilitation programs • Explore documentation strategies related to Medicare coverage at site • Organize meeting with site mentor to gather information on major referral sources; find additional sources via Google search
Week 4	<ul style="list-style-type: none"> • Strategies and organize implementation of WCAG guidelines into website design plans • Research automatic WCAG widget products for website; prepare findings to present • Begin W3C course
Week 5	<ul style="list-style-type: none"> • Find e-fax options suitable for Drive Well needs; prepare meeting materials • Meeting with site mentor to discuss driver license restrictions codes used in Michigan and at site • Organize client outreach/referral sources for brochure planning
Week 6	<ul style="list-style-type: none"> • Organize meeting with site mentor to discuss physician/provider concerns about current documentation and brainstorm solutions • Create template for summary page of reports, to be placed on top of current reports for quick location of results/recommendations. Make adjustments as needed. • Prepare for reaching out to E-Thomas/Genius solution by collaborating with site mentor on her questions and needs • Work on W3C course
Week 7	<ul style="list-style-type: none"> • Work on building website using GoDaddy Website Builder • Prepare for midterms and meeting with site mentor • Prepare expense sheet for project in Excel • Meet with site mentor; create referral forms based on discussed organization needs and using AOTA toolkit
Week 8	<ul style="list-style-type: none"> • Gather information about E-Thomas; be persistent with organizing a meeting with a representative despite unresponsive customer service • Create visual aid for meeting with site mentor • Create photo checklist • Add appointments and downloadable PDFs (referral forms) to webpage
Week 9	<ul style="list-style-type: none"> • Refine website

	Doctoral Capstone Project
	<ul style="list-style-type: none"> • Organize meeting with site mentor and adaptive equipment partners about type of equipment trialed at Drive Well • Meeting with site mentor: collaborate over website content, identify changes, and refine
Week 10	<ul style="list-style-type: none"> • Update expense list • Meeting with E-Thomas representative • Plan for sustainability of project • Refine web page; meet with site mentor to discuss next week's plans due to accommodate for her traveling out of town
Week 11	<ul style="list-style-type: none"> • Refine web page functions for smooth operation • Find sources to add to webpage's informational section – collect citations to add on website • Progress W3C course • Organize meeting with site OT employee for web page content collection
Week 12	<ul style="list-style-type: none"> • Adjust current privacy policy to reflect current processes • Transform Word documents into fillable PDF forms • Visit Portage site; site visit from capstone coordinator • Progress with web content refining
Week 13	<ul style="list-style-type: none"> • Finish web content • Finish updated brochure • Prepare site materials/guides relating to referrals, appts, payments, web content, organization materials, and next steps planning (sustainability).
Week 14	<ul style="list-style-type: none"> • Troubleshoot accessibility widget roadblocks; brainstorm alternative solutions • Increase accessibility manually using knowledge from cited resources and W3C course; add instructions to staff web content guide • Organize site materials, practice efficiently presenting; compile assignment materials • 2-hour site presentation with interactive components to ensure site employees have adequate training of new resources

Implications of Capstone

Following completion of the doctoral capstone experience, Drive Well Michigan holds a website complete with current and accurate information about the organization, downloadable and fillable self-referral and provider referral forms, a contact form to submit referrals, an online appointment calendar where clients can schedule themselves, and an online payment method. Occupational therapists at Drive Well Michigan no longer have to

conduct the entire referral, appointment scheduling, and payment process over the phone and can devote more time towards serving individuals. Drive Well Michigan has also made the decision moving forward to switch EHR systems from E-Thomas/Genius Solutions to IntakeQ based on information relating to goals of the organization, customer service, and usability for all skill levels gathered by the capstone student and presented to the site mentor (IntakeQ, n.d.). Drive Well Michigan will utilize documentation summary templates created during the capstone project when designing templates in IntakeQ that aid in communicating important evaluation results to other medical providers by placing such information at the forefront. Drive Well Michigan staff have web content and website function guides that details how to use design, appointment, and payment functions of the web domain and website builder, as well as how to incorporate five important WCAG guidelines to enhance accessibility. The web accessibility guidelines were limited to five to match the web content design skill level of site employees. Lastly, Drive Well Michigan has been equipped with a password tracker document, expense tracker document, and next steps planning document that details eight additional actions that the company can take to save money and sustain the benefits set by the capstone project.

The capstone project serves as an example of a mechanism that increases patient autonomy by allowing them to understand web content, initiate the referral process, schedule appointments, and make payments all by themselves. The capstone project has demonstrated that an occupational therapy small business clinic can allow for such patient autonomy by researching and selecting administrative products that encompass the goals of the organization.

Conclusion

The updated website for Drive Well Michigan includes a referral mechanism, online appointment scheduling, online payments, and is designed with web content accessibility strategies outlined by the WCAG 2.1. Appendix A provides a QR code and URL that leads to the completed website. Appendix B shows the referral form PDFs that were created based on the organization's documentation requirements.

Documentation summary templates for clinical and behind-the-wheel evaluations were created in Word and supplied to Drive Well Michigan for future use when switching EHR systems and designing templates. The summary templates were designed by inspecting the former reports and putting the important results from each of the evaluation subtests at the forefront of the documentation. This strategy was chosen to provide a solution to a concern about clarity of results posed by other medical providers. Appendix C shows the documentation templates created.

The capstone project resulted in the adoption of GoDaddy Website Builder, and Drive Well Michigan staff were provided with guides that detailed how to edit and create web content, how to incorporate five simple web accessibility strategies, manage appointments and payments, and manage the new functions of the website. Appendix D illustrates the content of the staff guides provided during the two hour on site training presentation.

During the capstone project, various roadblocks relating to clashing and forgotten service subscriptions with disorganized passwords. For example, an accessibility widget, accessiBe, was researched, presented to site mentor, and approved for the project within the fourth week (accessiBe, n.d.). However, in week thirteen, it was uncovered that the widget was not compatible with the GoDaddy Website Builder used at the site. To

contribute to web content accessibility, the following strategies were selected and employed based on the overlap of population served and ease of application for site employees to sustain project:

1. ALT text for all images was inserted
2. Action buttons to homepage was inserted on each page
3. Stark color contrast with color choices was used
4. Each page has the same layout design
5. Each page uses clear language and avoids excessive medical jargon

In response to the project roadblocks, password tracker and expense tracker documents were created and given to site mentor for practice management use. These documents are not included in the appendices because they contain private information about the organization. Additionally, a next steps planning document was created to include eight steps to further save money and sustain the benefits of the capstone project; this document can be found within Appendix E.

In efforts to increase community outreach, an updated brochure was created for Drive Well Michigan and sent to twenty-two Kalamazoo and Battle Creek area organizations that support persons with disabilities and older adults. The brochure can be found in Appendix F.

Following the capstone project, Drive Well Michigan obtains a more accessible and current website that allows for patient self-referrals, appointment scheduling, and payments. At the end of the fourteen week experience, Drive Well Michigan is equipped with documentation templates that will aid in the clarity of results communication after switching to IntakeQ EHR system. Lastly, Drive Well Michigan can enhance organization and optimize financial resources

with the password tracker, expense tracker, and next steps planning document produced throughout the capstone project.

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<https://www.safemobilityfl.com/pdfs/CliniciansGuide/CliniciansGuideOlderDriversComplete4thEdition.pdf>

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Worldwide Web Consortium. (2023, March 17). *Digital accessibility foundations: free online course.* W3C WAI Courses. <https://www.w3.org/WAI/courses/foundations-course/>

Yang, Y. T., & Chen, B. (2015). Web Accessibility for Older Adults: A Comparative Analysis of Disability Laws. *The Gerontologist*, 55(5), 854–864.

<https://doi.org/10.1093/geront/gnv057>

Appendix A

SCAN THE QR CODE BELOW

Or visit www.drivewellmichigan.com



Appendix B



Battle Creek Location: 7 Heritage Oak Ln, Battle Creek, MI 49015
 Kalamazoo Location: 5401 Portage Rd, Unit 2B, Portage, MI 49002

Provider Referral Form			
Please complete all sections and upload completed referral form to the contact form at the bottom of Drive Well's homepage: https://drivewellmichigan.com . You may also email completed referrals to dandert@drivewellmi.com . Self-referrals or family referrals are for the Clinical Driving Evaluation only; clients must be medically cleared for the Behind-the-Wheel portions of a driving evaluation.			
A. Client Information:			
Full Name:	D.O.B.:		
Street Address:			
City:	State:	Zip:	Phone:
E-mail Address:			
Driver's License Status:			
Active <input type="checkbox"/>	Suspended <input type="checkbox"/>	No License <input type="checkbox"/>	Permit <input type="checkbox"/>
Emergency Contact:			
B. Client Medical Information:			
Diagnosis/Symptoms:			
Onset Date:			
Current medications that may impact driving:			
# of seizures within the last 6 months? <input type="checkbox"/> No <input type="checkbox"/> Yes Date: _____			

Service(s) Requested:

- Comprehensive Driving Evaluation:** Includes clinical and behind-the-wheel portion
- Clinical Driving Evaluation:** Assesses strength, range of motion, brake reaction time, vision, visual perception, endurance, and cognition. Does not include Behind-the-Wheel portions.
- Behind the Wheel Evaluation Only:** Assesses driving skills including observation, communication, speed adjustment, vehicle positioning, time and space judgement, and vehicle response.
- Vehicle Modification Evaluation:** Includes trialing adaptive equipment in testing vehicles, assessment of client vehicle for adaptive equipment installation, and training with new equipment in client vehicle.
- Driver Readiness Training/Rehabilitation Treatment(s):** Remediation of physical, cognitive, visual, or safety awareness skills relating to driving.

Signature: _____

Date: _____

Location Requested:

Kalamazoo

Battle Creek



Battle Creek Location: 7 Heritage Oak Ln, Battle Creek, MI 49015
Kalamazoo Location: 5401 Portage Rd, Unit 28, Portage, MI 49002

Provider Referral Form

Please complete all sections and upload completed referral form to the contact form at the bottom of Drive Well's homepage: <https://drivewellmichigan.com>. You may also email completed referrals to dandert@drivewellmi.com. Self-referrals or family referrals are for the Clinical Driving Evaluation only; clients must be medically cleared for the Behind-the-Wheel portions of a driving evaluation.

A. Client Information:

Full Name:	D.O.B.:		
Street Address:			
City:	State:	Zip:	Phone:
E-mail Address:			
Driver's License Status:			
Active <input type="checkbox"/>	Suspended <input type="checkbox"/>	No License <input type="checkbox"/>	Permit <input type="checkbox"/>
Emergency Contact:			

B. Client Medical Information:

Diagnosis/Symptoms:
Onset Date:
Current medications that may impact driving:
Hx of seizures within the last 6 months? <input type="checkbox"/> No <input type="checkbox"/> Yes Date: _____

Service(s) Requested:

- Comprehensive Driving Evaluation:** Includes clinical and behind-the-wheel portion
- Clinical Driving Evaluation:** Assesses strength, range of motion, brake reaction time, vision, visual perception, endurance, and cognition. Does not include Behind-the-Wheel portions.
- Behind the Wheel Evaluation Only:** Assesses driving skills including observation, communication, speed adjustment, vehicle positioning, time and space judgement, and vehicle response.
- Vehicle Modification Evaluation:** Includes trialing adaptive equipment in testing vehicles, assessment of client vehicle for adaptive equipment installation, and training with new equipment in client vehicle.
- Driver Readiness Training/Rehabilitation Treatment(s):** Remediation of physical, cognitive, visual, or safety awareness skills relating to driving.

Signature: _____

Date: _____

Location Requested: Kalamazoo

Battle Creek

Appendix C



CLINICAL EVALUATION SUMMARY – OCCUPATIONAL THERAPY

 year referred to Drive Well for a specialized driving evaluation to address concerns relating

Assessment	Adequate: Y/N	Note:
Range of Motion		
Strength		
Brake Reaction Time		Pt score: <u> </u> /100 of a second. Average of three timed trials and compared to national average of 75/100 of a second.
Motor Free Visual Perception Test		Raw score: <u> </u> /45. Visual closure score : <u> </u> /9 Missing three (3) items or more in visual closure indicates the client is at a 4.96% times greater chance of being involved in an at fault accident
Optic Vision		Pt visual acuity score is <u> </u> /20. Pt peripheral vision <u> </u> measure over 120 degrees bilaterally, which is acceptable for driving. Pt achieved passing scores <u> </u> Pt did not achieve passing scores <u> </u>
Brief Cognitive Assessment Tool		Pt score is <u> </u> /50. Pt scoring identifies <u> </u> (normal cognitive functioning, mild cognitive impairment, mild dementia, moderate to severe dementia)
Endurance		

Based on the results of the documented clinical evaluation, a driving assessment was performed to evaluate for the following adaptive

Client performance barriers identified on this date at this

Recommendations

The clinical evaluation was performed

~~Diane Andert~~ OTRL, CDRS, CDI

Diane ~~Andert~~ OTRL, CDRS, CDI
Licensed Occupational Therapist
Certified Driver Rehabilitation Specialist
Certified Driver Education Instructor

Date

- Paige Norgan Client Name
- Paige Norgan age
- Paige Norgan gender
- Paige Norgan referral source
- Paige Norgan Medical condition (past medical)
- Paige Norgan does/does not
- Paige Norgan lateral ~~vision~~ ↓
- Paige Norgan lateral ~~vision~~ ↓
- Paige Norgan none, spinner knob, L/R hand ↓
- Paige Norgan 1. Decreased neck/trunk ↓
- Paige Norgan 1. Medical behind-the-wheel ↓
- Paige Norgan Diane ~~Andert~~ OTRL, CDRS, CDI



BEHIND-THE-WHEEL EVALUATION SUMMARY — OCCUPATIONAL THERAPY

_____ year old _____ referred to Drive Well by _____ for a behind-the-wheel driving assessment to address concerns relating to _____. Pt completed _____ minute behind-the-wheel evaluation on _____ weather _____ road conditions. Pt completed the behind-the-wheel evaluation on _____ route with _____ traffic conditions using _____ equipment.

Behind-the-Wheel Scoring	
Functional Skills	Score
Observation	____/28
Communication	____/24
Speed Adjustment	____/28
Vehicle Positioning	____/24
Time and Space Judgement	____/32
Vehicle Response	____/20
Total Score	____/156

TOTAL: # (S) _____ Rating: _____

Scoring Interpretation:		
Total (S) Score	Rating	Crash Probability
0-50	Very Poor	High
51-101	Poor	
102-127	Good	Medium
128-156	Excellent	Low

Recommendations include _____

The behind-the-wheel evaluation was performed by _____.

Diane Andert, OTR/L, CDRS, CDI

Diane Andert, OTR/L, CDRS, CDI
 Licensed Occupational Therapist
 Certified Driver Rehabilitation Specialist
 Certified Driver Education Instructor

Date _____

- Paige Norgan Client Name
- Paige Norgan age
- Paige Norgan gender
- Paige Norgan referral source
- Paige Norgan Medical condition/past medical
- Paige Norgan Length of time evaluated
- Paige Norgan Clear, rain, fog, snow, partly ↓
- Paige Norgan Dry, wet, slippery
- Paige Norgan Parking lot, rural, suburb, ↓
- Paige Norgan Light, moderate, heavy
- Paige Norgan Can write in or select from: ↓

- Paige Norgan February 07, 2023
1. No restrictions. Pt demonstrates adequate skills to drive with no currently diagnosed medical condition known to increase risk over time.
 2. Return to driving after the vehicle is equipped with adaptive driving equipment to match the individual needs and instruction/training after installation.
 3. Continue to drive with restrictions that are consistent with Michigan State laws.
 4. Pt should participate in approx. _____ hours of training. Based on availability, training should be completed over a period of approx. _____.
 5. Reevaluation on a regular basis due to progressive disorder that may cause future decline.
 6. Temporary driving cessation. Pt shows potential for improvement and driving in the future.
 7. Driving retirement with education for alternative community mobility resources.
 8. Referral to further testing for _____.
 9. Other: _____

Paige Norgan Diane Andert, OTR/L, CDRS, CDI

Appendix D

Drive Well Staff Guide to Maintaining Web Content

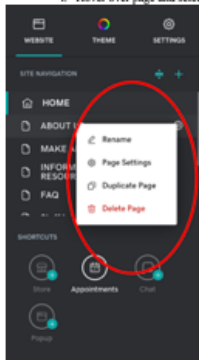
1. GoDaddy Video Library
 - a. This is a helpful link to the entire video library: <https://ca.godaddy.com/how-to>
 - i. The search bar can help you find videos.
 - b. Website Builder help page: <https://ca.godaddy.com/help/websites-marketing-1000041>
2. Accessing the Website Builder (Editor)
 - a. After logging in, select "Diane" in the upper right corner and select "My Products"



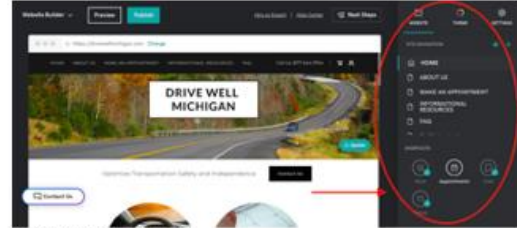
- b. Here you will select Drive Well Michigan, LLC (Website, Domain), which takes you to the Website Builder. Select "Edit Site". Navigate website pages from the black side bar on the right side. You can also click on any element on the page and the black side bar will show every aspect that can be edited. The side bar serves as a place to navigate between pages.



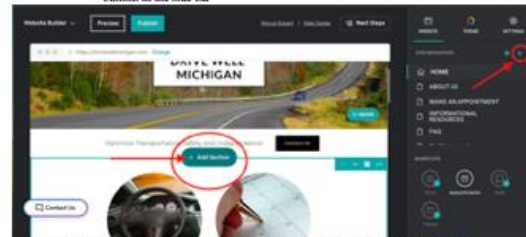
- i. Hover over page and select gear (settings) icon > Delete Page
- d. Changing page names and settings: <https://ca.godaddy.com/help/change-a-page-name-and-settings-on-my-website-24075>
- i. Hover over page and select gear (settings) icon > Rename Page



4.
 - a. Linking pages to each other
 - i. Private pages vs public pages vs non-navigation pages
 1. Private Page: Only you can see; visible to those with a link sent to them
 2. Public Page: Viewable by the public, shown in navigation bar
 3. Non-Navigation pages: Viewable by the public, not shown in navigation bar
 - ii. Action buttons – <https://ca.godaddy.com/help/edit-the-action-button-24710>
 1. These are buttons or photos that link navigation to other pages. It is helpful to put an action button that takes users back to the homepage on each page so that those on screen-readers can easily find how to navigate. You can link the button to different pages or different sections.
 - a. If the layout does not automatically have a button option, select "Add Section" (+) under the section where you would like a button. From templates, type "buttons" and select the buttons

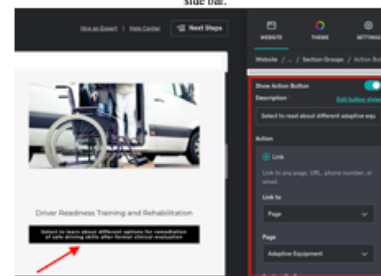


3. Building Web Pages/Content
 - a. Useful GoDaddy Videos
 - i. Build Your Own Website: <https://ca.godaddy.com/how-to/build-your-own-website>
 - ii. Adding Advanced Functionality in Website Builder: <https://ca.godaddy.com/how-to/adding-advanced-functionality-in-website-builder> (Lessons 8, 20, 21, 22)
 - b. Adding a new section: <https://ca.godaddy.com/help/add-a-page-to-my-site-24072>
 - i. Select (+) sign in top right in black side bar for Add Page. Search the templates for one that can present the information how you like and select. Now you can click on elements and edit elements like description, alt text, and buttons in the side bar

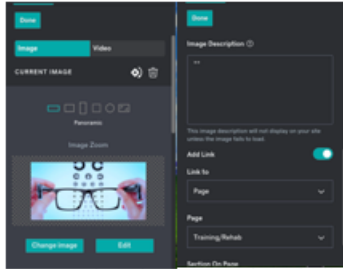


- c. Delete a page: <https://ca.godaddy.com/help/delete-a-page-from-my-website-24073>

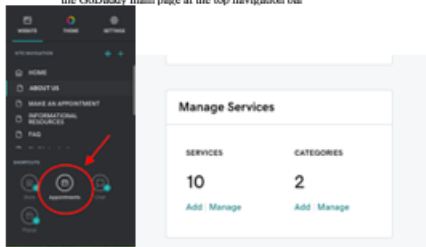
template option. You can delete unused buttons from the black side bar.



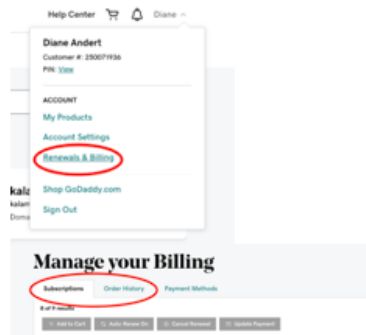
- b. Adjusting images and content – Select from templates to find information and photo layout that presents how you like. Click elements such as paragraphs or images to make editable in black side bar.
 - i. Select an image and write alt text
 1. Writing alt text for photos is helpful for visually impaired users or those with screen readers. For pictures that convey information, describe what the photo shows completely and clearly. For photos that are purely decorative, type two quotation marks (" ") so that screen readers it is a decorative photo for aesthetics and skip it. Alt text is labeled as "Image Description".
 - ii. Linking it to other sections – Images can be used as action buttons; set up this function by selecting the image with your mouse and then selecting the action button switch to create a link to another page.



c. **Managing Appointments:** Access appointments from black side bar shortcuts, or from the GoDaddy main page at the top navigation bar



- i. Adding/Editing Services – Under Manage Services on right side, select Add or Manage under services. May have to scroll down to find!
 - ii. Here you can select to edit existing appointment types or follow the prompts to create a new appointment type.
- d. **Adding/Updating forms**
- i. Privacy and Web Content Accessibility statements must be reviewed yearly and form changed to update date. They are saved in Word form in the folder for easy editing.



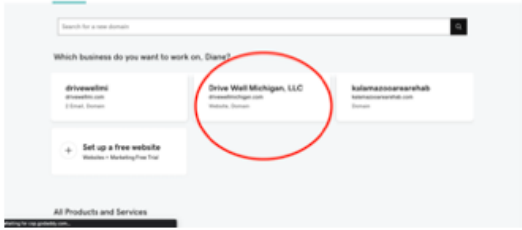
5. Privacy/Security Information
 - a. Go Daddy - <https://ca.godaddy.com/how-to/adding-advanced-functionality-in-website-builder> (Lesson 5)
 - b. **SSL Certificate:** encrypts ingoing and outgoing data so that forms and client info are safe
 - i. Maintaining SSL Certificate eliminates the "Not Secure" site banner
 - ii. Renewing SSL Certificate: <https://ca.godaddy.com/help/renewing-my-ssl-certificate-864> - can set auto-renew with GoDaddy Website Builder
 - iii. **The current GoDaddy Website Builder plan (commerce plus) comes with an SSL certificate**
6. Accessibility
 - a. **Five simple ways to enhance web content accessibility**
 - i. Provide alt text for images: describe the picture fully. For decorative images, put "" to signal to screen readers to skip
 - ii. Provide action buttons to return to homepage easily
 - iii. Use good contrast with color choices (i.e. white text on a black background)
 - iv. Each page should have a consistent layout – GoDaddy allows for uniform design using template tab in Website Builder
 - v. Use concise language throughout web content; avoid medical jargon
7. How to Create Forms in **Adobe PDF**:
 - i. Select Tools > Prepare Forms. Select a file from Word or start from scratch.
 1. This is a great guide to creating forms that details the functions of the toolbar buttons: <https://firmrouter.com/create-fillable-forms-using-adobe-acrobat-dc/>
8. How to find billing/payments for GoDaddy Services
 - a. After login, Select the Diane button with a downward facing arrow in the top right corner. Select "Renewals and Billing".
 - i. "Subscriptions" tab will show what you are paying for
 - ii. "Order History" will break down payment charges

Drive Well Referral, Appointment, and Online Payment Guide

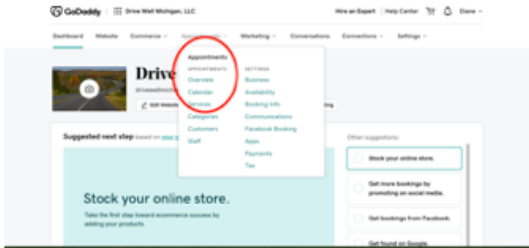
1. Instructing Clients on How to Use Website Referral:
 - a. Tell the client to visit <https://drivewellmichigan.com/make-an-appointment> and download the referral form that is applicable to their case (Self-Referral vs Physician/Organization Referral). Instruct the patient to fill it out and have their provider fill out their portion, if necessary.
 - b. Once filled out completely, have the client go to <https://drivewellmichigan.com/home> and scroll to the bottom of the page where it says "Contact Form". There is also a button that says "Contact Us" that the client can click that will take them there. At the Contact Form, there is a paper clip icon with "Attach Referral Form Here". The client will select that and upload their saved and completed referral form while also filling out the contact form.
 - c. The next step after the referral form is accepted is to book an appointment time. Instruct the client to return to <https://drivewellmichigan.com/make-an-appointment> and scroll down to "Online Appointments". The appointment types are separated into "Out of Pocket" and "With Insurance". Instruct the client to book under the correct appointment type. The choices are:
 - i. Out of Pocket:
 1. Comprehensive Driving Examination
 2. Clinical Driving Evaluation Only
 3. Behind the Wheel Evaluation Only
 4. Vehicle and Equipment Evaluation
 5. Driver Readiness/Rehabilitation Training - First Session
 6. Driver Readiness/Rehabilitation Training - Subsequent Sessions
 7. Adaptive Equipment Conformance
 - ii. With Insurance (or Contract Organization):
 1. Comprehensive Driving Examination
 2. Clinical Driving Evaluation Only
 3. Behind the Wheel Evaluation Only

2. How to Find Appointment Bookings:

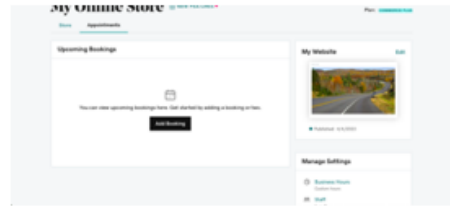
- a. From sign in page, select DriveWellMichigan.com Domain and Website Product.



- b. In the overhead navigation menu, select Appointments > Overview. Calendar and Services are also useful for viewing and editing appointments.

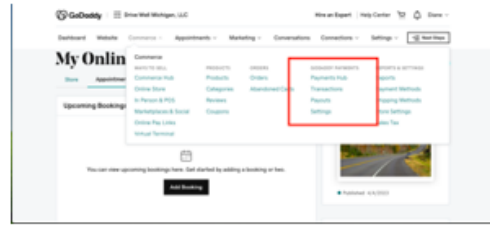


- c. Here you will be able to see upcoming booking and manage appointment settings.

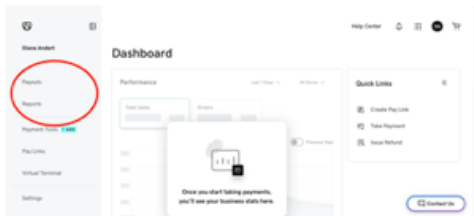


3. How to Manage Payments/Earnings:

- a. From the overhead navigation bar, select Commerce > Payment Hub. All four selections here have payment information.



- b. This will take you to the Dashboard where you can see the status of your payment. Keep in mind with online payments, GoDaddy charges 2.3% + \$0.30 per transaction, so factor the cost into pricing services. The Payouts tab will show processing payments and your transactions/payouts.



Appendix E

Next Steps for Drive Well Michigan:

1. Download all capstone project materials to a safe location or USB backup.
2. Trial IntakeQ and purchase.
 - a. Speak with a representative about integrating Clinical Eval Summary Template and Behind the Wheel Summary Template into the system. The program also allows for creating, editing and sending forms to patients. If integrating forms into program without a representative, the document denotes the dropdown menu and select list options in the comment section.
3. Once email migration is complete, cancel Web66 services (\$84 per year).
4. Once email migration is complete, select the DriveWellMichigan.com Domain and Website Product. Scroll down to the bottom of the dashboard to "Other Ways to Grow"
 - a. Follow the prompts to complete "Connect to Google" so that the new website is connected to the Google Listing
 - i. Access to the Google listing was sent to your son's email, follow up with him and go to products > drivewellmichigan.com domain > scroll to "connect google listing"
 - b. Follow prompts to complete "Manage Booking Notifications" so that each booking and contact form will notify your email. It is already set to text Diane when there is a new booking.
5. Consider cancelling the kalsmzooarehab domain on GoDaddy (\$60/2 years).
6. Ask GoDaddy:
 - a. What are transaction fees?
 - b. What is the clearing house?
 - c. Can I set different availability per employee for appointments?
7. Consider cancelling Square once GoDaddy Payments questions are answered.
8. Set up Payments:
 - a. Go to Commerce tab > Payouts, and enter bank account and routing numbers for payments

Appendix F

Meet our **Occupational Therapists!**



Diane Andert

- State of Michigan Licensed Occupational Therapist
- ADED Certified Driver Rehabilitation Specialist
- Certified Driver Education Instructor

Contact Us!

Address: 7 Heritage Oak Lane, Suite 1
Battle Creek, MI 49015
AND
5401 Portage Rd, Portage, MI 49002

Phone: 877-544-3764

Email: dandert@drivewellmi.com

Website: <https://drivewellmichigan.com/>



Sarah Rider

- State of Michigan Licensed Occupational Therapist
- Certified Driver Education Instructor



Drive Well Michigan
Optimize Transportation Safety and Independence

Driver Evaluations and Rehabilitation


Drive Well Michigan offers both Clinical Driving evaluations and Behind-the-Wheel evaluations conducted by Occupational Therapists who are Certified Driver Education Instructors in the State of Michigan. All evaluations are cosigned by an ADED Certified Driving Rehab Specialist. Standardized assessments are used to collect data on a client's physical, cognitive, and safety awareness.

These reports can fulfill legal requirements set out by the state of Michigan and protect drivers with justification for license enhancements.


Once deficits are identified, driver rehabilitation and training appointments can help a client remediate skills or trial adaptive driving equipment to suit their needs.

Learn more about our services at <https://drivewellmichigan.com>

Check out our **NEW WEBSITE!**



SCAN HERE or visit www.drivewellmichigan.com



Our Website has:

- Online referral forms that clients can download, fill, and submit by themselves
- Online appointment booking and payment methods
- In-depth descriptions of evaluation and training types, types of adaptive equipment, and staff members
- Free informational resources regarding license enhancements, financing options, and safe driving

Our Website is designed with YOU in mind!

Drive Well Michigan aims to provide a website easily accessible to those with physical and cognitive disabilities, as well as older adults. Our goal is to increase independence of clients, starting with navigation of our website.

Drive Well Michigan's website features the following to increase web content accessibility:

- Action buttons that return users easily to the home page
- Alternative text for images
- Sufficient contrast of background and foreground colors
- and MORE!