Reducing No-Show to First Appointment
What Works?
What didn’t?
Decrease No-Show Rate at Breathitt County Outpatient

Robert Jackson
Kentucky River Community Care

Reduce Waiting & No-Shows • Increase Admissions & Continuation
Change Project Information

• Aim Addressed:
  – Reduce no-shows from 65% to 35%

• Level of Care: Outpatient

• Client Population Served: Substance Abuse
Why is this Problem?

• 65% of clients scheduled for services were not keeping appointments
• Clinician productivity was very low resulting in decreased revenue
Changes Made

• Called clients the day before appointment as a reminder
• Mailed reminder letters one week prior to appointment
• Provided on-demand scheduling for new SA clients vs. specific intake times.
• De-mystified first appointment by informing new clients of what to expect during the first visit
Organizational Impact

Percentage of No-shows

- December 2004: 65%
- January 2005: 52.3%
- February 2005: 27%
- March 2005: 20%
- April 2005: 42%
- May 2005: 44%
- June 2005: 42%
Key Lessons

• Change leader allowed the team to make decisions regarding which changes to try and in what order to try them, giving the team control over their success.

• Impact on organization: Productivity increased. Breathitt County Outpatient saw their first revenue surplus of the fiscal year in April and has steadily been decreasing their deficit.
Future Plans

• Review data quarterly to ensure change results are being sustained at 35% no-show rate or less.

• Decrease time from 1\textsuperscript{st} contact to 1\textsuperscript{st} scheduled appointment from 22 days to 72 hours.
TERROS
Thriving in Pandora’s Box:
Exploring the use of evidence-based practice using process improvement strategies

Presented by:
John Greenawalt, MA, LPC
Director of Quality Management
Cathy Paddack
Director of Prevention & Outreach
NIATx Learning Session V
October 5–7, 2005 Baltimore, Maryland

Reduce Waiting & No-Show • Increase Admissions & Continuation
The Purpose

- To introduce how TERROS incorporated a best practice through five rapid cycle process improvement strategies
- To share the effects these strategies had on client access
- To highlight some unexpected effects (Pandora’s Box) of the rapid cycle changes and how TERROS is dealing with them
Best Practice

• Motivational Enhancement Strategies
The Outreach Team

Also called: the PEP Team (Pathway Enhancement Program)

Purpose: to heighten the engagement level of the client
Best Practice

• The PEP Team (Pathway Enhancement Program)

• Motivational Enhancement
  – Heightening the engagement level of the consumer
  – Five improvement cycles:
    • Elimination of an intrusive screening tool
    • Positive Scripting / Dialog
    • Paperwork in home
    • Reminder Calls
    • Transportation
The SASSI-3

- Negative client response
- Eliminate this as a screening tool
- Use the time to begin building the relationship
Scripting

• Positive aspects:
  – Standardizes the outreach approach
  – Incorporates ‘motivational’ techniques
  – Covers all the necessary material

• Challenges:
  – Restricts open dialogue
  – Uncomfortable for staff
Paperwork in the Home

- Positive aspects:
  - Reduces wait time at the office
  - Builds the personal relationship with the client
  - Increases the likelihood that the client will show up

- Challenges:
  - Increases outlay of staff time
  - Requires additional coordination of duties
Reminder Calls

• Positive aspects:
  – Have not experienced any

• Negative aspects:
  – Reduces the show rate
    • Consistent with a previous TERROS improvement change and NIATx national input
  – Uses staff time with no benefit
Transportation

• Positive aspects:
  – Assists clients who need this service
  – Increases show rate for this population

• Challenges:
  – Very time consuming for staff
  – Expensive
Motivational Enhancement
Data

• Data Report
  – By John
Families FIRST Show Rates
Graph

FF Intake Show Rates

- Stay Rate
- Show rate
- Targeted

www.NIATx.net

Reduce Waiting & No-Shows • Increase Admissions & Continuation
Pandora’s Box

• Surprising to horrifying
• Hair-raising to teeth chattering
• Fingernails on the chalkboard to eyes popping out
• Screaming at the top of your lungs to fainting dead away
Some real examples

1. Clients showing up!

Soooo many intakes, which led to

Overcrowded schedules, which led to

Numbers of clients in Groups, which led to

Insufficient Group Rooms

How we are coping with this....
Examples

- 2. Clients showing up!
- Having to wait, which led to
- Clients leaving before they were seen, which led to...
- How we are coping with this....
Some more examples

• 3. Offering clients transportation is a great thing, but what about staff resources? And time?
• 4. Reminder calls? Sounds Great! But what a surprise!
• 5. Collecting data on the Wrong Thing!!—Go back and do it again.
• Special Note: The Learning Curve
So what have we learned?

- Motivational strategies help to reduce the no-show rate;
- Spending time with the client at their home & assisting with the initial paperwork really helps;
- Some things may help, but not be practical for the agency—i.e., transportation;
Learned?

• Some things—reminder calls—may require further investigation;

• Like dominoes, one change may lead to another; (when you open up the ‘Box’, what will you let out?)—a new investigation into the issues surrounding showing up vs. staying.
The End

• Questions?
Reducing No-Shows at VIP Community Services

John Carway
Ana Matos Delgado
VIP Community Services
GOALS

– Reduce No Shows
– Improve Timeliness
– Increase Admissions
– Improve Continuation Rates

www.NIATx.net
Identifying the changes

• Our first step was to identify the changes that we needed to make in order to meet the NIATx aims.

• In making these changes we found that changes made in one area and achievement of the primary goal of reducing no shows, impacted on all of the other aims.
Identifying the changes

- **Action:**
  - Walk through of Admissions to
  - identify barriers to referring and admitting
  - a client.
Identifying the Changes

• **Results:**
  - Calls were going to voice mail
  - **Large number of no-shows**
  - Length of time from first contact (phone call) to first appointment too long.
Plan

• Restructure Reception to address how calls were received and responded to by staff.

• Study Actual Admission Process
Actions

– Created Change Teams to access staff
– expertise:

– **Change Team #1**: Receptionist, Administrative Assistants and Clerical Support Staff from both the IOP and the Admissions Department.
– **Change Team #2**: Admission Counselors & Support Staff.
Changes

• **Tools:**
  – The staff designed a Pre-screening tool for telephone screening.
  – Change Team #1 members were trained on a standard format for responding to calls.

• **Results:**
  • More appointments made for assessments.
Positive Results

• Increase in Visits
Negative Results

- Increase in no-shows for first appointment
- Length of time from assessment to admission increased
- Increase in no-shows after second appointment
Action

• Increased appointments by double and triple booking to avoid wasting time when prospective clients did not show.

• Started discussion on streamlining assessment process; scaling back on paperwork and eliminating the need for two assessment appointments.
Results

- Still too many no-shows for first and second appointments
- Outreach to clients before each appointment and after a missed appointment did not help
Lessons Learned

• False assumptions
  – Clients are good at keeping appointments
  – Appointment with VIP was first priority in their life
  – We must show them the better way
Critical Findings

We can search for the causes of no-shows or change the system and forget about the “whys”
A Leap of Faith

- Eliminated appointments except for HRA and criminal justice
- Accepted and encouraged all others to come in on the same day (walk-ins)
- Streamlined assessment process by eliminating need for a second visit
Positive Results—Agency

- Fewer no-shows
- Time from first contact to assessment decreased considerably
Positive Results
Clients & Staff

- Less sense of constraint
- More of a personal choice
- Meeting the clients where they are at
- Less wasted time for staff
- Less frustration with a rigid, artificial system.
Walk-ins vs. Appointments

IOP

<table>
<thead>
<tr>
<th></th>
<th>4/04-6/04</th>
<th>7/04-9/04</th>
<th>10/04-12/04</th>
<th>1/05-3/05</th>
<th>4/05-6/05</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appointments</td>
<td>430</td>
<td>508</td>
<td>323</td>
<td>121</td>
<td>83</td>
</tr>
<tr>
<td>No Shows</td>
<td>199</td>
<td>240</td>
<td>139</td>
<td>57</td>
<td>46</td>
</tr>
<tr>
<td>Same Day/Walk Ins</td>
<td>0</td>
<td>16</td>
<td>96</td>
<td>181</td>
<td>229</td>
</tr>
<tr>
<td>Clients Serviced</td>
<td>231</td>
<td>284</td>
<td>280</td>
<td>245</td>
<td>265</td>
</tr>
</tbody>
</table>
Walk-ins vs. Appointments
All programs

<table>
<thead>
<tr>
<th>Period</th>
<th>Appointments</th>
<th>No Shows</th>
<th>Same Day/Walk Ins</th>
<th>Unique Clients Serviced</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/04- 6/04</td>
<td>882</td>
<td>444</td>
<td>0</td>
<td>309</td>
</tr>
<tr>
<td>7/04 - 9/04</td>
<td>1016</td>
<td>509</td>
<td>41</td>
<td>548</td>
</tr>
<tr>
<td>10/04-12/04</td>
<td>706</td>
<td>323</td>
<td>196</td>
<td>579</td>
</tr>
<tr>
<td>1/05 - 3/05</td>
<td>323</td>
<td>168</td>
<td>342</td>
<td>497</td>
</tr>
<tr>
<td>4/05 - 6/05</td>
<td>268</td>
<td>138</td>
<td>491</td>
<td>621</td>
</tr>
</tbody>
</table>

Reduce Waiting & No-Shows • Increase Admissions & Continuation
Walk-ins vs. Appointments
All programs

<table>
<thead>
<tr>
<th></th>
<th>4/04-6/04</th>
<th>10/04-12/04</th>
<th>1/05-3/05</th>
<th>4/05-6/05</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appointments</td>
<td>882</td>
<td>706</td>
<td>323</td>
<td>268</td>
</tr>
<tr>
<td>No Shows</td>
<td>444</td>
<td>323</td>
<td>168</td>
<td>138</td>
</tr>
<tr>
<td>Same Day/Walk Ins</td>
<td>0</td>
<td>196</td>
<td>342</td>
<td>491</td>
</tr>
<tr>
<td>Unique Clients Serviced</td>
<td>309</td>
<td>579</td>
<td>497</td>
<td>621</td>
</tr>
</tbody>
</table>
Action

- Streamlined Admission Process
- Elimination of appointments
- Immediate response to request for services
- Counselors assigned immediately
- Clients’ immediate needs addressed at first point of contact (e.g. entitlements, detox, etc.)
- Treatment plan initiated immediately
Integration of Services

- Incorporated Entitlements into the assessment process at the Admissions Office. Access to their staff and expertise facilitated the admission process.
- Streamlined referral process with Health Services and Wellness to insure continuity and rapid delivery of services.
Positive Results

• Clients engaged faster into the treatment process
Reduce Waiting & No-Shows

Increase Admissions & Continuation

Timeliness

Intensive Outpatient

AIM 1 - Time Between First Request and First Treatment Session

# of Days

Month

www.NIATx.net
Positive Results

- Increased admissions
- Better retention
- Increased Positive Discharges
Positive Discharges

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Men's Residence</td>
<td>51.45</td>
<td>52.31</td>
<td>86.49</td>
</tr>
<tr>
<td>Women's Residence</td>
<td>91.89</td>
<td>87.23</td>
<td>89.29</td>
</tr>
<tr>
<td>822</td>
<td>41.58</td>
<td>38.1</td>
<td>59.21</td>
</tr>
</tbody>
</table>

www.NIATx.net
Reduce Waiting & No-Shows • Increase Admissions & Continuation
Admissions

Reduce Waiting & No-Shows • Increase Admissions & Continuation

www.NIATx.net

<table>
<thead>
<tr>
<th>Time Period</th>
<th>Men's Residence</th>
<th>Women's Residence</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/2002 - 9/2003</td>
<td>130</td>
<td>37</td>
<td>225</td>
</tr>
<tr>
<td>10/2003 - 9/2004</td>
<td>141</td>
<td>51</td>
<td>333</td>
</tr>
<tr>
<td>Total</td>
<td>487</td>
<td>129</td>
<td>616</td>
</tr>
</tbody>
</table>
Sustaining the changes

• We have confidence that we will be able to sustain this system since we have eliminated the possibility of appointments.

• Achievement of the Goal, does not mean that the process of improvement has ended.

• An immediate response to barriers and implementing changes is necessary to sustain improvement.
Sustaining the changes

• To insure the sustainability of any change, data must be monitored regularly by the Change Leader, who is now also the Admissions Director,
• Thresholds of a minimum of five, with a goal of fifteen assessments per day in place.
• Sustaining change is difficult but not impossible.
Open to Change

- Our no-show figures are now based solely on appointments made for Human Resources Administration and Criminal Justice Agencies. We have informed these agencies of our “no appointments needed policy” but they still insist on making appointments.
- We are open to suggestions for changing their process.