



Kentucky River Community Care ***Reducing Time Between First Request and First Appointment***

April, 2005

NIATx member Kentucky River Community Care (KRCC) implemented changes in their Perry County outpatient services to significantly decrease the wait time from when a prospective client calls to inquire about addiction treatment, to the day they receive an assessment and intake appointment. As a result of changes in their phone system, staff scheduling procedures, admissions process and use of physical plant space, KRCC reduced from 21 days to within 24 hours the wait time between the first call for services and the offer of a first appointment.

Aim – Reduce to within 24 hours the time between first request and available opening for first appointment.

Paths – [First contact](#), [scheduling](#), [paperwork](#)

Key Words

[Walk-through exercise](#), [change team](#), [aim](#), [first request](#), first contact,
immediate access, on-demand [scheduling](#)



Harry's Problem: An Addiction Story

Harry is a man in his fifties who used to lead a hard-working and well-respected life in his community. Harry served as the chief of police, and didn't miss a day of work until an accident changed the routine of his life. A few months ago, Harry had a car accident and was hospitalized with a back injury. The injury knocked him out of commission for a few weeks, but something else happened during his time in the hospital. Harry was prescribed OxyContin for his back pain, and left the hospital with an addiction that has caused him ongoing grief and trouble with his wife, his job and his finances.

Harry's wife recently gave him an ultimatum to get help or find another place to live. Still trying to figure out how his life had fallen apart so quickly, Harry called the only place he knew to seek treatment in his community. He was greeted by a voicemail system. The voicemail options were confusing to Harry, who wasn't sure what he was looking for, or where he should leave his voicemail message. After three more attempts, Harry was finally able to talk directly to someone by phone, only to learn there were no intake appointments available for almost three weeks. He hung up, thinking that it was easier to get more drugs than to work on getting treatment for his addiction.

About Kentucky River Community Care

Kentucky River Community Care (KRCC) provides addiction treatment services across several counties in eastern Kentucky. KRCC is a member of the Network for the Improvement of Addiction Treatment (NIATx) which works to improve access to and retention in addiction treatment. The population served at KRCC has an average range of 25-35 years of age, and is predominantly male. The most common addictions for which people seek treatment there include nicotine, alcohol, marijuana and opiates. Of the approximately 1,000 people treated annually at KRCC, about 400 go through the Perry County site.

Over the course of a year, the Perry County outpatient site provides services that include a set number of court-ordered Driving Under the Influence (DUI) groups. People seeking treatment voluntarily are typically offered a combination of individual and group treatment options. There also is a daily women's program called Project Advance. Clients and their counselor(s) work together to develop a treatment plan by the fourth session.

KRCC knew they had a problem with an excessive period of time between first request and first appointment, and that this decreased their show rates for intake appointments. Prior to beginning their process improvements, agency administrators wanted to determine baseline information and gather information about their services.



Background Information

Between fall 2002 and spring 2003, KRCC began assessing the waiting period for addiction treatment services, as well as the agency's treatment completion rates. The primary methods of gathering information were the [walk-through exercises](#) and data compilation. At the Perry County outpatient site, information collected made it clear that: 1) people seeking outpatient addiction treatment at the site commonly had difficulty establishing initial contact due to an over-reliance on the automated phone system; and 2) subsequently, often had an extended wait until their first appointment.

The average wait time between [first request](#) and [first appointment](#) at the Perry County outpatient site was determined to be 21 days. Understanding that motivation is generally highest at the time people seek treatment, KRCC knew this lengthy wait was unacceptable, and set out to significantly decrease it. In conjunction with focus groups, the walk-through exercise provided additional information about the barriers that prospective consumers faced when trying to set up an initial appointment.

Steps Toward Improvement

KRCC formed a [change team](#)ⁱ to address the average length of time between first request and first appointment. The change team began meeting in spring 2003, and quickly set an [aim](#) to:

Reduce the time between first request and first appointment offered within 24 hours.

The Change Team wanted the Perry County outpatient addiction treatment site to get people into treatment as quickly as possible. The time frame of 24 hours from first contact to first appointment seemed reasonable, even though it would be a significant change from the baseline of 21 days. The ability to offer initial appointments within 24 hours also meant that the site would be providing [immediate access](#), which is considered to be the standard of quality care. Basically, the agency wanted to make it easier for people to get treatment than to get more drugs.

Determining What to Change

The pre-change wait time was established through the walk-through exercise and data review. Staff members involved in the walk-through reported an interesting phenomenon about the system. Some staff posing as prospective consumers phoned the Perry County outpatient treatment site. Such calls were sometimes answered directly by or routed to voicemail, because staff members designated to schedule appointments were not readily available. Even when callers did reach someone live, expressing urgency about getting into treatment, they were told no intake appointments available for approximately three weeks. However, other staff who went in person to the Perry County outpatient site, posing as someone requesting an intake appointment, would generally be worked into the schedule that same day.



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The phone records indicated many people who called to inquire about treatment, and who set up appointments several weeks out never came in for their first appointment. In addition, those transferred to voicemail were often unreachable at the phone number they left, or simply never returned any of KRCC's follow-up calls. On the other hand, people who came to the site without an appointment, asking for treatment, were often worked in for an intake that same day. As documented with "walk-ins" who took part in the walk-through exercise, front-line staff reported those showing up on site were generally given a same-day intake and assessment appointment, and were also the people more likely to begin treatment. This information also indicated there was appointment capacity available, due to the high rate of no-shows for scheduled intake appointments.

The change team felt more information was needed to determine specific reasons for the long waiting period, and to figure out what process changes were likely to reduce the wait time. Focus groups were conducted to gather feedback. These included: clinicians and front-line staff at the Perry County site; persons receiving treatment; and referral sources.

Persons in treatment, as well as referral sources, reported a significant problem with the site's phone system and administrative functions. Registrations for people coming to and going from appointments were all being conducted within the same office space. This meant that people had to wait to check in and out while phone calls were being handled. It also meant that people calling in had to be put on hold regularly, and/or quickly transferred to what was typically a voicemail service. This left the staff, the people checking in and out, and the callers all frustrated. Focus group participants also noted that within this chaotic environment, callers could sometimes be lost, transferred to the wrong place or inadvertently put on hold for extended periods.

These focus group responses, along with walk-through exercise results, helped the change team to pinpoint agency-based barriers to accessing treatment: significant changes were needed in how both registrations and phone calls were handled.

Making Changes

With more insight about their scheduling and registration systems and practices, KRCC made changes to improve customer service and reduce the wait time for an initial appointment. The key factor was to revise the intake system so that fewer people were put on hold, routed to voicemail or told they were unable to schedule an appointment for three weeks.

KRCC relocated their Perry County customer service staff into separate offices, so that multiple registrations could be done concurrently, rather than conducted one at a time. The staff designated to answer the general phone lines were also moved out of the front office area, so that the heavy volume of incoming calls would no longer interfere with client check-in and check-out. As a result, the average number of calls coming into the front office area went from approximately 1,000 to about 150 per day. One staff member also went from part-time to full-time employment, in conjunction with the call



center's move from the front desk area. Other staff members were accessed to cover the phones as needed.

At the same time, the telephone auto-attendant was revamped, so that callers had immediate access to someone who could schedule an appointment for them during their first call. This change eliminated the practice of asking people to leave a message or call back for someone else, thus eliminating steps, waiting and frustration for people seeking addiction treatment.

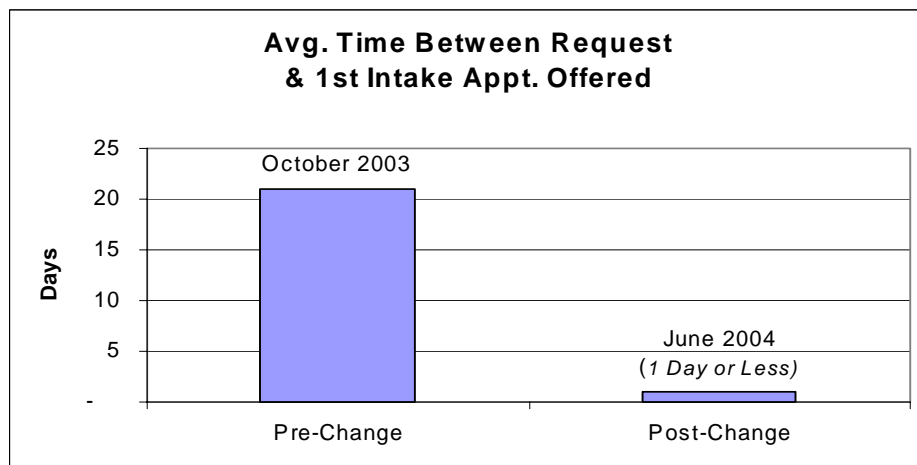
To facilitate intake changes, existing office space was modified so that the three registration staff could have separate, private spaces at times when multiple registrations needed to be done concurrently. This increased the intake team's ability to accommodate more than one appointment at a time.

Overall, the changes have improved the quality of customer service and clarified the roles of staff members. According to the change leader, staff have not complained about being overwhelmed with additional work or adjustment to the changes. Since the front office area is less hectic, and people checking in and out are not delayed while staff handle incoming phone calls, both staff and consumers seem less frustrated.

After initial changes were made, KRCC found it needed to further revise the telephone auto-attendant message (at Perry County only) to insure that callers received consistent information. Each department needed to include similar information in their recorded message, because callers were given the option to dial a specific department directly. A standardized script was developed to provide people with the clear message that anyone seeking immediate (within 24 hours) treatment could get it.

Outcome of the Changes

Since June 2004, the Perry County outpatient site has been able to offer intake appointments within 24 hours of a first request. This is a significant decrease in the pre-change average wait time of 21 days for a scheduled intake appointment.





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Despite that offer, many people choose to schedule appointments a few days out, instead of the same-day or next-day option. The change team has investigated the reasons for this common preference. People calling in often say they cannot line up transportation that quickly. KRCC Perry County began to offer transportation to people who said that was the barrier to coming in within 24 hours; however, people did not want to utilize this option.

Many people continue to choose appointments several days beyond the date that they first call the KRCC Perry County site. The average time between first contact and first appointment ranges from 6-7 days. This is, however, a reflection of consumer choice, or **on-demand scheduling**, rather than of the Perry County site's capacity to provide immediate access.

The change team continues to monitor the improvement in access at Perry County by periodically conducting walk-through exercises, and also placing anonymous calls to see if the first appointments continue to be offered within 24 hours.

These changes, along with the improved access results, are being shared with KRCC sites in other counties. The agency hopes to offer the same 24-hour first appointment availability at all locations in the near future.

For further information, please contact: Robert Jackson, Change Leader and Director of Residential Services at KRCC, 606-666-9006 ext. 1990, krccrjackson@yahoo.com

ⁱ Members of the Change Team: Robert Jackson, Change Leader; other members included: Mike Kadish, Area Director; Sheila Allen, Executive Services Administrator; Christa White, Human Resources Coordinator; Ernie Howard, Fiscal Operations Director; David Mathews, Associate Director; Vicky Hardin, Data Management Clerk; and Tanya Rice, Administrative Assistant.