PSYCHIATRIC APPOINTMENT NO SHOWS AT TAO

May 2014 Steering Committee
Juan Corral
Purpose of Presentation

- Sharing of performance outcomes data
  - Shows Transparency and Accountability
  - What has the process been like?
- Importance of being an outcomes driven program
  - Keeps feedback loop open
  - Identify challenges and barriers
  - Develop strategies and interventions
    - Interventions can be data driven
  - Increase staff buy-in and ownership over the program and services provided
- Psychiatric appointment outcomes data will be the topic
PSYCHIATRIC APPOINTMENT
NO SHOWS

- Estimates found on SAMHSA’s website list psychiatric appointment now show rates as low as 30% and as high as 40%
- TAO’s no show rate in FY 11/12 was over 40%
- How do “no shows” impact programs like TAO?
  - Psychiatric care is an important component of some members recovery journey
  - High cost resource that impacts budget
- Consequences of missed appointments include
  - Further deterioration, relapses, increased symptoms, and hospitalizations
PSYCHIATRIC APPOINTMENTS AT TAO

- Period analyzed
  - Fiscal year 13/14 - July to March
  - Data for the month of April not yet finalized
- 258 members served during the period
  - 43 admissions
  - 35 discharges
- 168 unduplicated members had a no show
  - 65% of members served have had a no show during FY
- Monthly averages
  - 178 appointments made
    - 133 appointments kept
    - 45 no shows
    - 25% no show rate
**Psychiatric Appointments at TAO by FY**

- **Total appointments made by FY**
  - FY 11/12 – 1661, FY12/13 – 1586, FY 13/14 – 1606
Predictors of No Shows Related to the Members that TAO Serves

- Environmental and Demographic
  - Lower socio-economic status
  - Homeless or at risk of becoming homeless
  - Transportation problems

- Member related
  - Forgetting or getting the date wrong
  - Too symptomatic

- Diagnosis
  - Personality disorders
  - Co-Occurring
  - Neurotic disorders
Identified Challenges/Barriers & Applied Interventions

- Member’s lack of transportation & living situation
  - Further develop team approach and communication
- Member diagnosis (including co occurring disorders)
  - Identification of members that could be highly symptomatic or decompressing
  - Utilization of MORS Scores
- Hi frequency “no show” members
  - Members with multiple “no shows”
  - Identification of potential “no show” members
- Lack of last minute openings
  - Incorporate emergency slots into schedule
  - Convert “no show” slots into walk in slots
BACKGROUND INFORMATION

- Appointment Duration
  - 30 minutes for regular appointments
  - 60 minutes for Initial evaluations and home visits

- Psychiatrist weekly availability
  - 1 Dr. 4 days
  - 1 Dr. 2 days
  - 1 Dr. 1 day
<table>
<thead>
<tr>
<th>Month</th>
<th>Kept Appts</th>
<th>No Shows</th>
<th>Total</th>
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<tbody>
<tr>
<td>July</td>
<td>131</td>
<td>43</td>
<td>174</td>
</tr>
<tr>
<td>August</td>
<td>159</td>
<td>51</td>
<td>210</td>
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<tr>
<td>September</td>
<td>77</td>
<td>39</td>
<td>116</td>
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<tr>
<td>October</td>
<td>171</td>
<td>37</td>
<td>208</td>
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<tr>
<td>November</td>
<td>131</td>
<td>38</td>
<td>169</td>
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<tr>
<td>December</td>
<td>120</td>
<td>38</td>
<td>158</td>
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<tr>
<td>January</td>
<td>151</td>
<td>51</td>
<td>202</td>
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<tr>
<td>February</td>
<td>123</td>
<td>50</td>
<td>173</td>
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<tr>
<td>March</td>
<td>138</td>
<td>45</td>
<td>183</td>
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PSYCHIATRIC APPOINTMENTS

Kept Appts | No Shows | No Show %
--- | --- | ---
July | 131 | 43 | 25%
August | 159 | 51 | 24%
September | 77 | 39 | 34%
October | 171 | 51 | 23%
November | 131 | 37 | 22%
December | 120 | 38 | 24%
January | 151 | 51 | 25%
February | 123 | 50 | 29%
March | 138 | 45 | 25%

July | August | September | October | November | December | January | February | March
--- | --- | --- | --- | --- | --- | --- | --- | ---
0% | 25% | 24% | 34% | 23% | 22% | 24% | 25% | 29% | 25% | 100%
# No Show Member Diagnosis

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<tr>
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<td>Bipolar II Disorder</td>
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<tr>
<td>Depressive Disorder NOS</td>
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</table>

N = 168
MEMBERS WITH CO-OCCURRING DISORDERS

Severe Mental Illness & Substance Abuse

- 117, 70%

Severe Mental Illness

- 51, 30%

N = 168
MEMBERS WITH MULTIPLE NO SHOWS

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Questions
PSYCHIATRIC APPOINTMENT NO SHOWS AT TAO

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