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

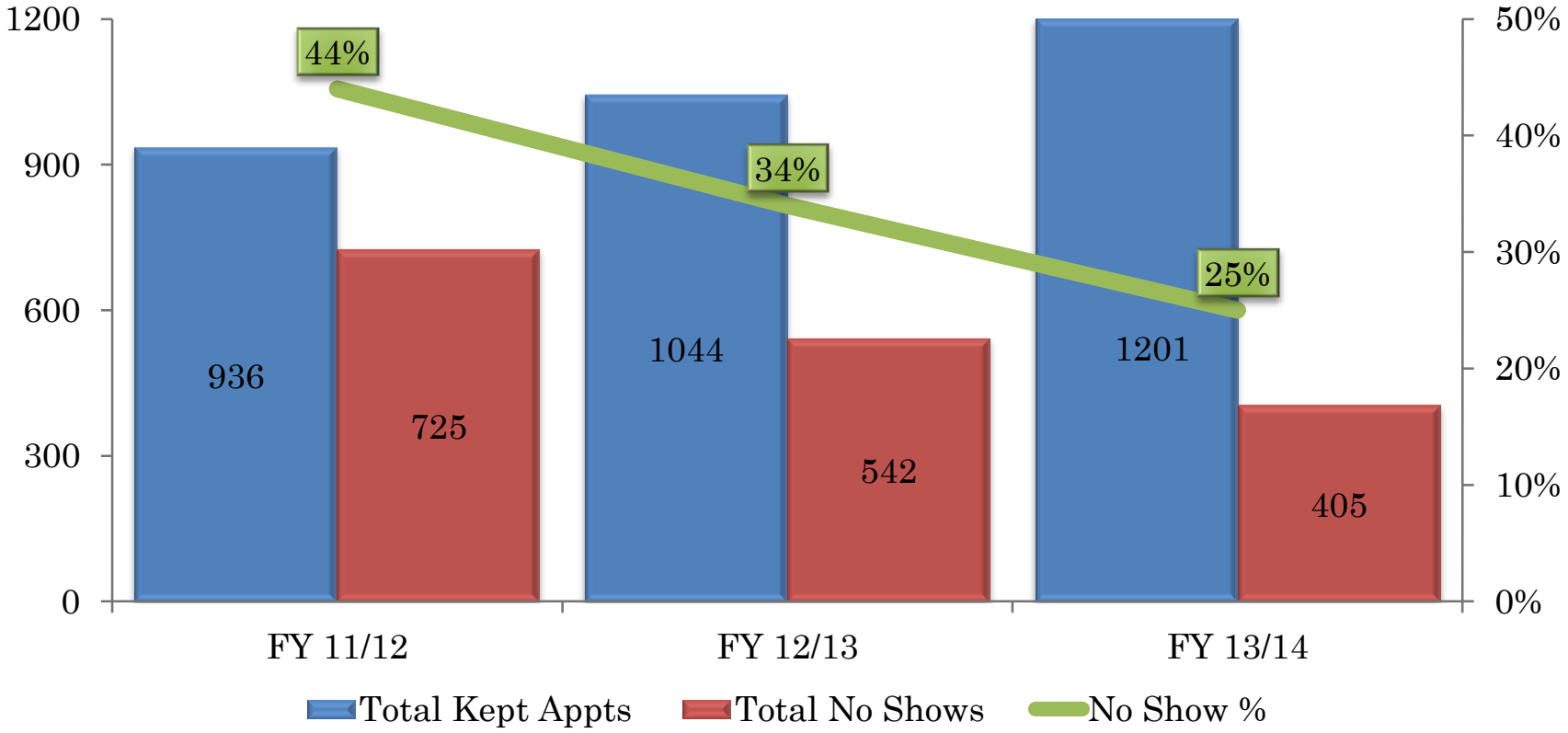
Psychiatric Appointment No Shows

- 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

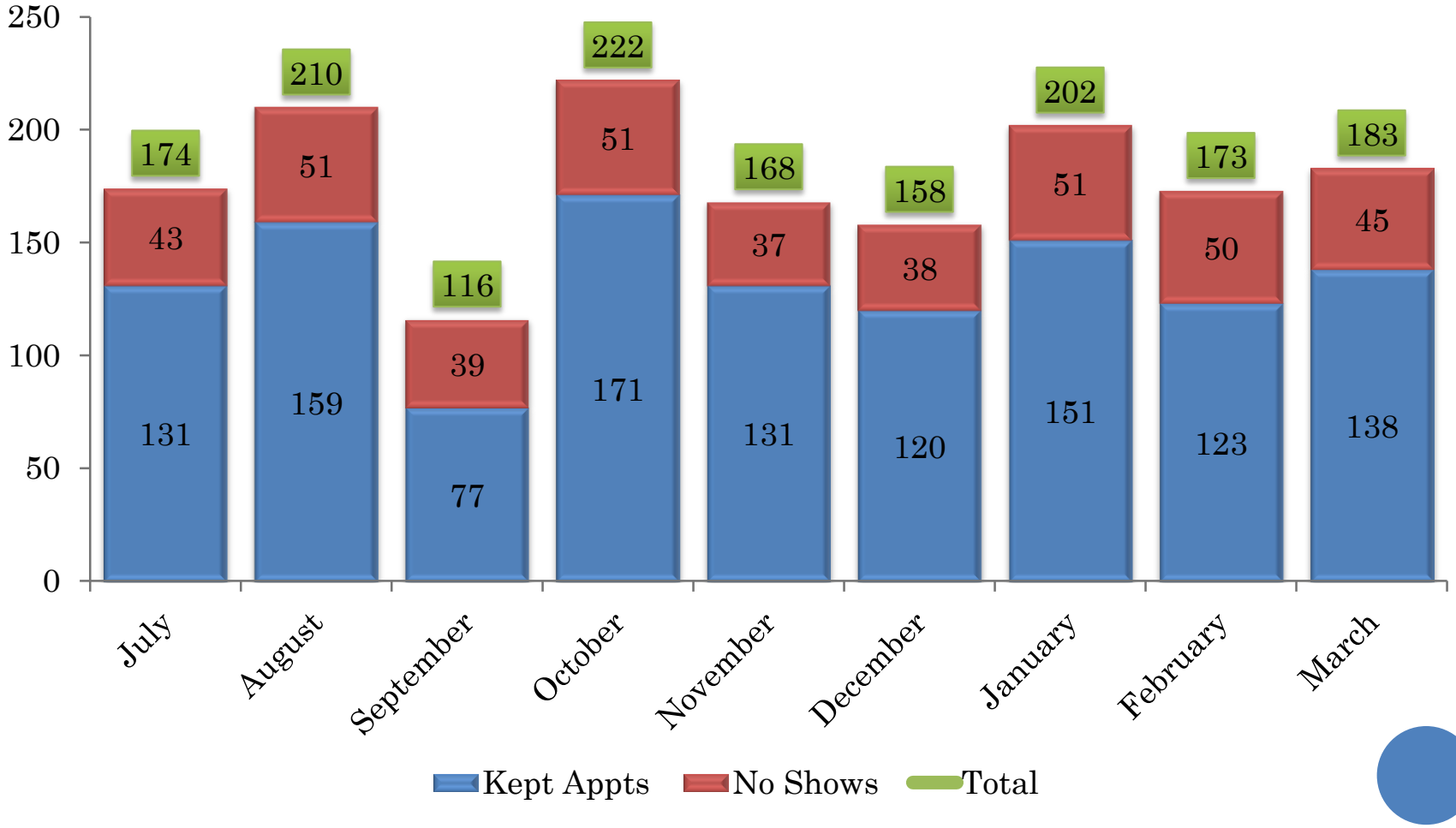
Identified Challenges/Barriers & Applied Interventions

- 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

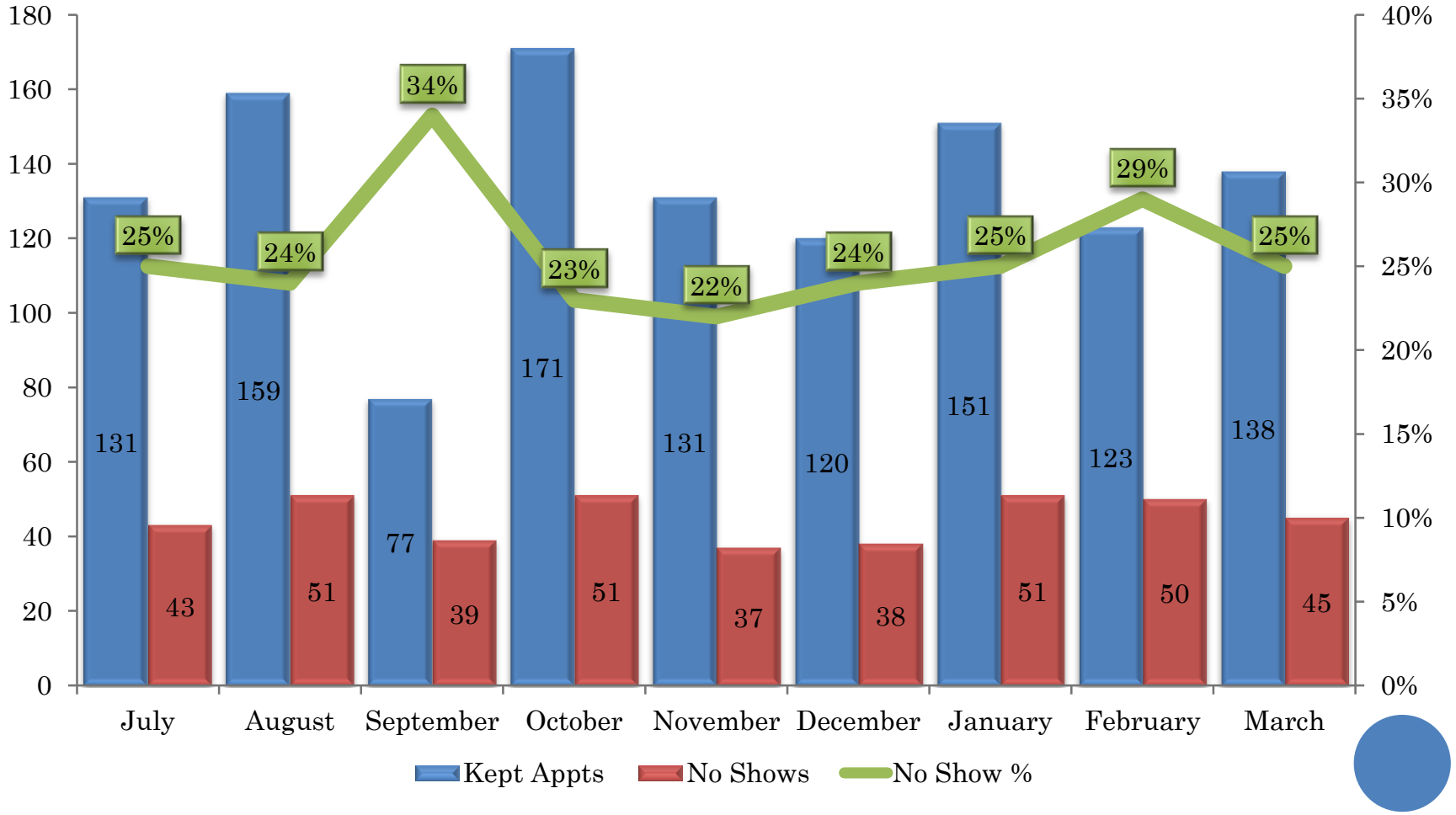
Background Information

- 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

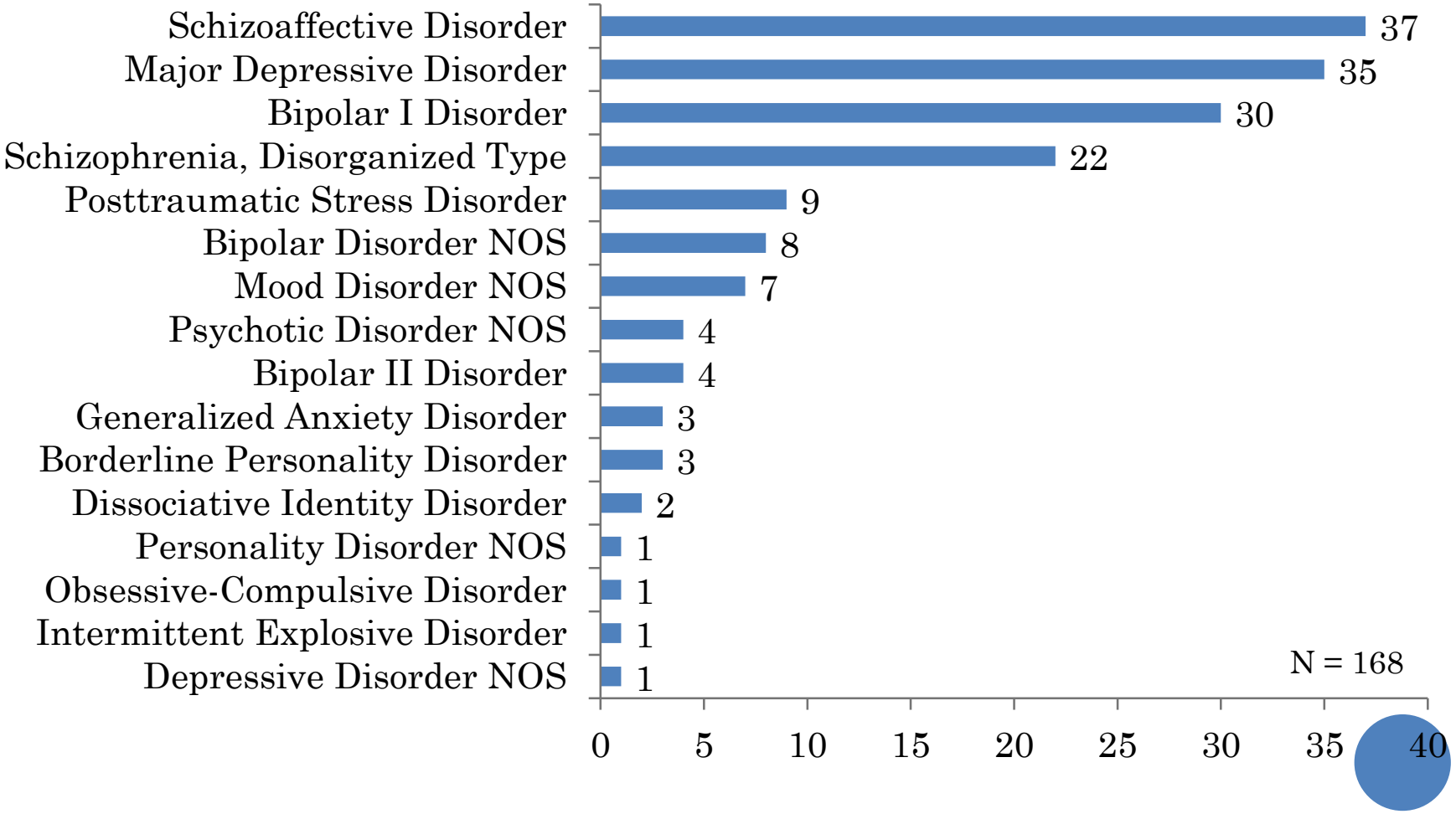
Psychiatric Appointments by Month



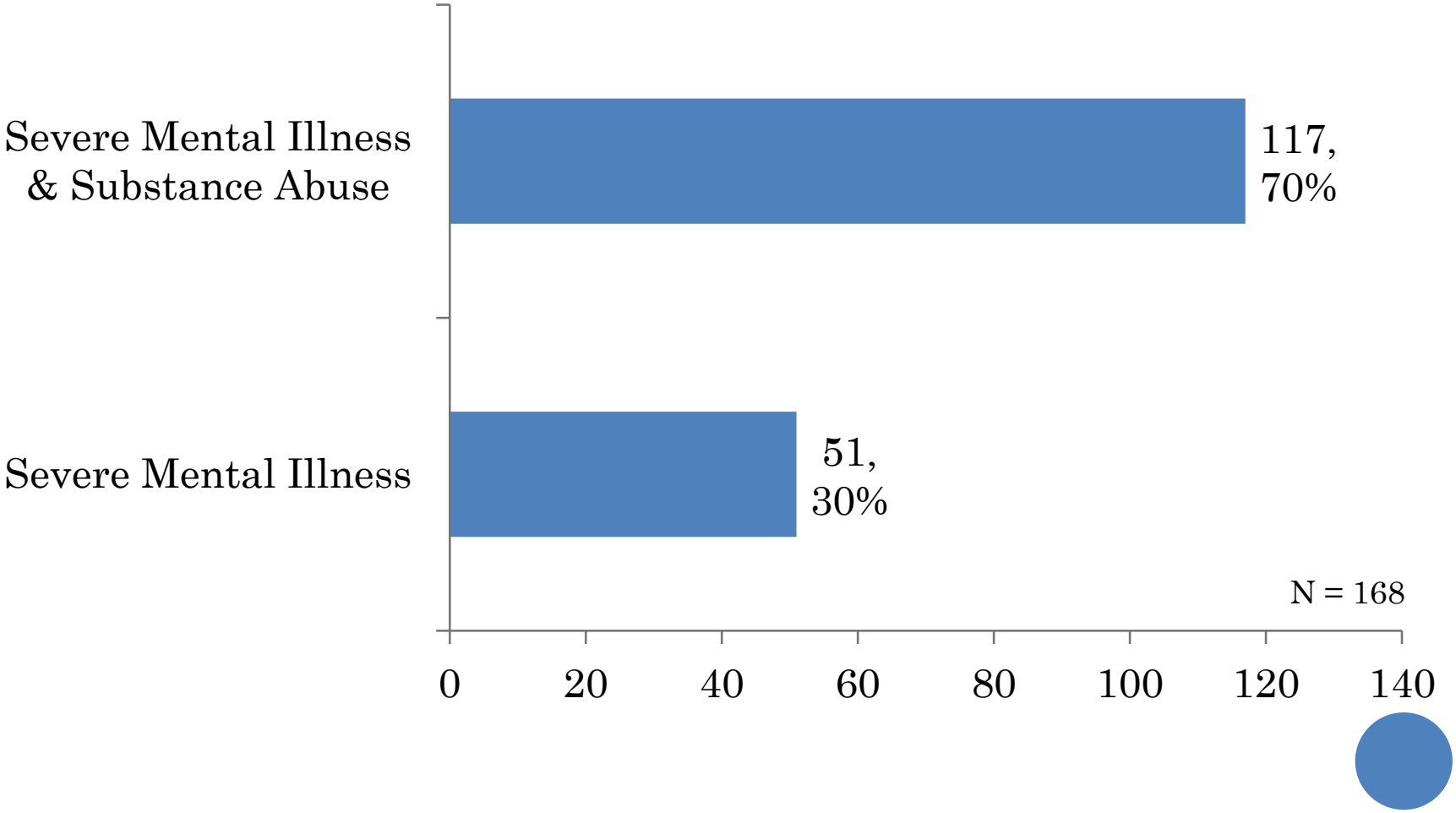
Psychiatric Appointments



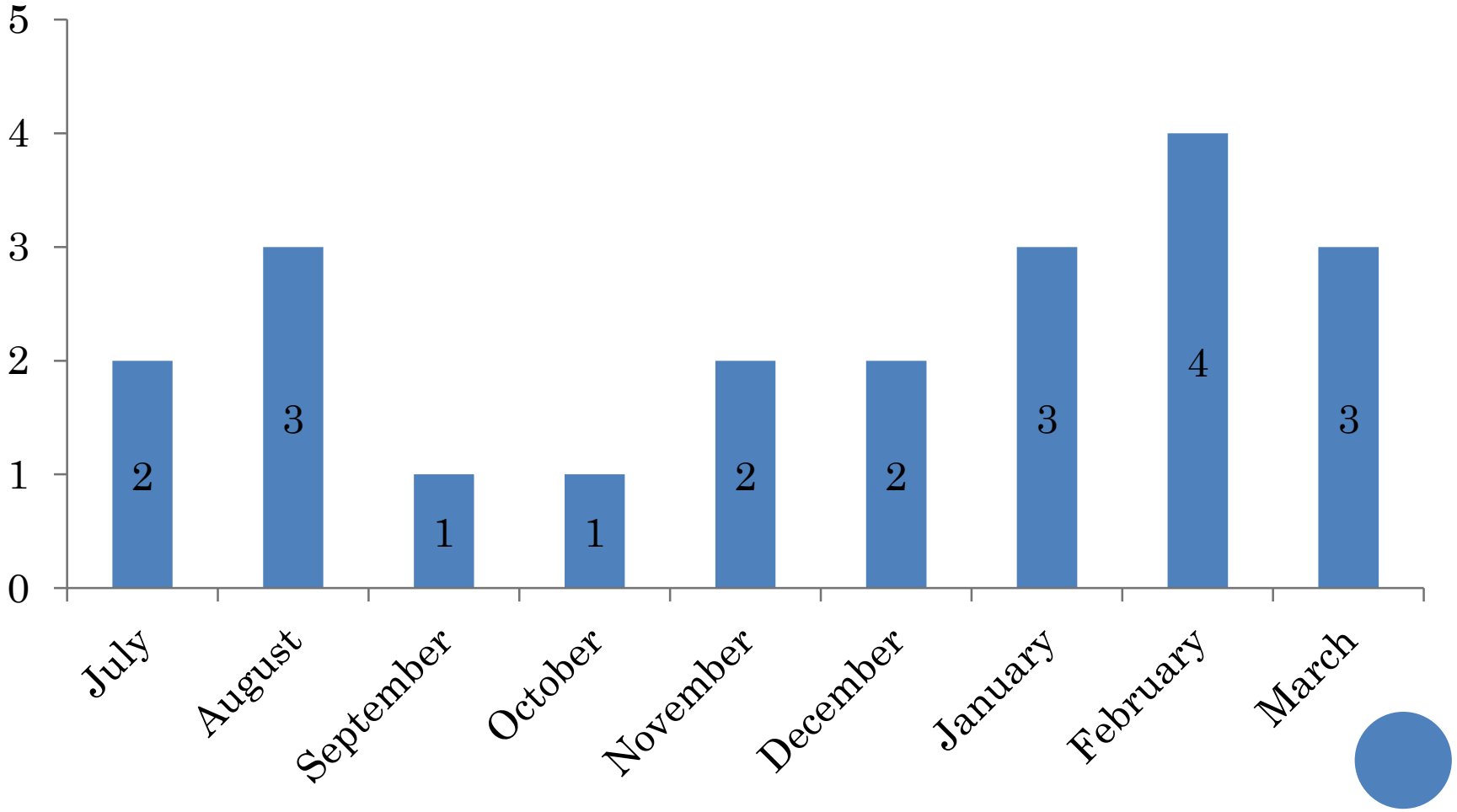
No Show Member Diagnosis



Members With Co-Occurring Disorders



Members With Multiple No Shows



Questions

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