Increasing Outpatient Psychiatric Appointment Adherence
Rachel Appoo, DNP, FNP-C, ARNP and Michele Creamer, DNP, FNP-C, ARNP (Jonas Recipient)
University of South Florida

Purpose
• Do consistent follow up appointment reminders during the first 30 days of post psychiatric inpatient discharge increase appointment show rates?
• To elicit a more effective method of consistent appointment reminders for new all patients to increase show up rates by using a Root Cause Analysis
• To minimize mortality and morbidity for the Mental Health population by encouraging outpatient appointment adherence

Methods
• Data collection was taken at two different locations in Southeastern United States, the labeled Site A and Site B
• John Hopkins Nursing Evidence-Based Appraisal (JHNEBP) tools were used as a foundation for this project
• Interviewed key stakeholders on current process
• A 6-month Retrospective Chart review was conducted from January 2017 to June 2017
  o Variables collected gender, age, insurance type, co-pay required, appointment reminder completed or not, seen, cancel, and no-show
• Five Step Root Cause Analysis approach was used

Results
• Total sample size of 921 patients, 300 were confirmed and 621 not confirmed
  • A combined 36% no show rate (Site A and Site B)
  • 19.05% no show rate Site A
  • 17.07% no show rate Site B
  • Total visits seen 596, cancelled 152, and no-show 173

  ![Root Cause Analysis Diagram](Diagram.png)

  **Revenue in a Six Month Period**

<table>
<thead>
<tr>
<th>Visit Status</th>
<th># Patients</th>
<th>Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seen</td>
<td>596</td>
<td>$157,940</td>
</tr>
<tr>
<td>Cancel</td>
<td>152</td>
<td>$40,280</td>
</tr>
<tr>
<td>No Show</td>
<td>173</td>
<td>$45,875</td>
</tr>
</tbody>
</table>

  *Organization average billing per visit $265

  ![Revenue Table](Table.png)

Discussions
• Pertinent project findings were presented to the stakeholders at the organization
• Organizations’ feedback consisted of the importance of the project, the need for patient appointment adherence, and past methods the organization has tried
• Stakeholders dismayed of the considerable amount of loss in 6 months revenue
• Possible solutions entailed hiring a part-time staff member, utilizing other methods of reminders, or purchase new/adaptive software

Limitations
• Limitations included: low to no income, lack of transportation, lack of follow up address, limited technology, and the impact of staff shortages on the organization
• Biggest concern the organization is facing is finding solutions
• Transportation, lack of follow up address, limited medical staff
• Lack of staff to assist with conducting follow up phone calls to patients who have missed appointments and to set up transportation with their insurance companies
• There is a current deviation in the organization that is causing a delay in implementing these possible solutions

Acknowledgements
The authors of this presentation would like to acknowledge
• Dr. Catherine Gaines-Ling for her guidance and continued support throughout the project
• Participating Psychiatry Groups
• Special thanks to the Jonas Center