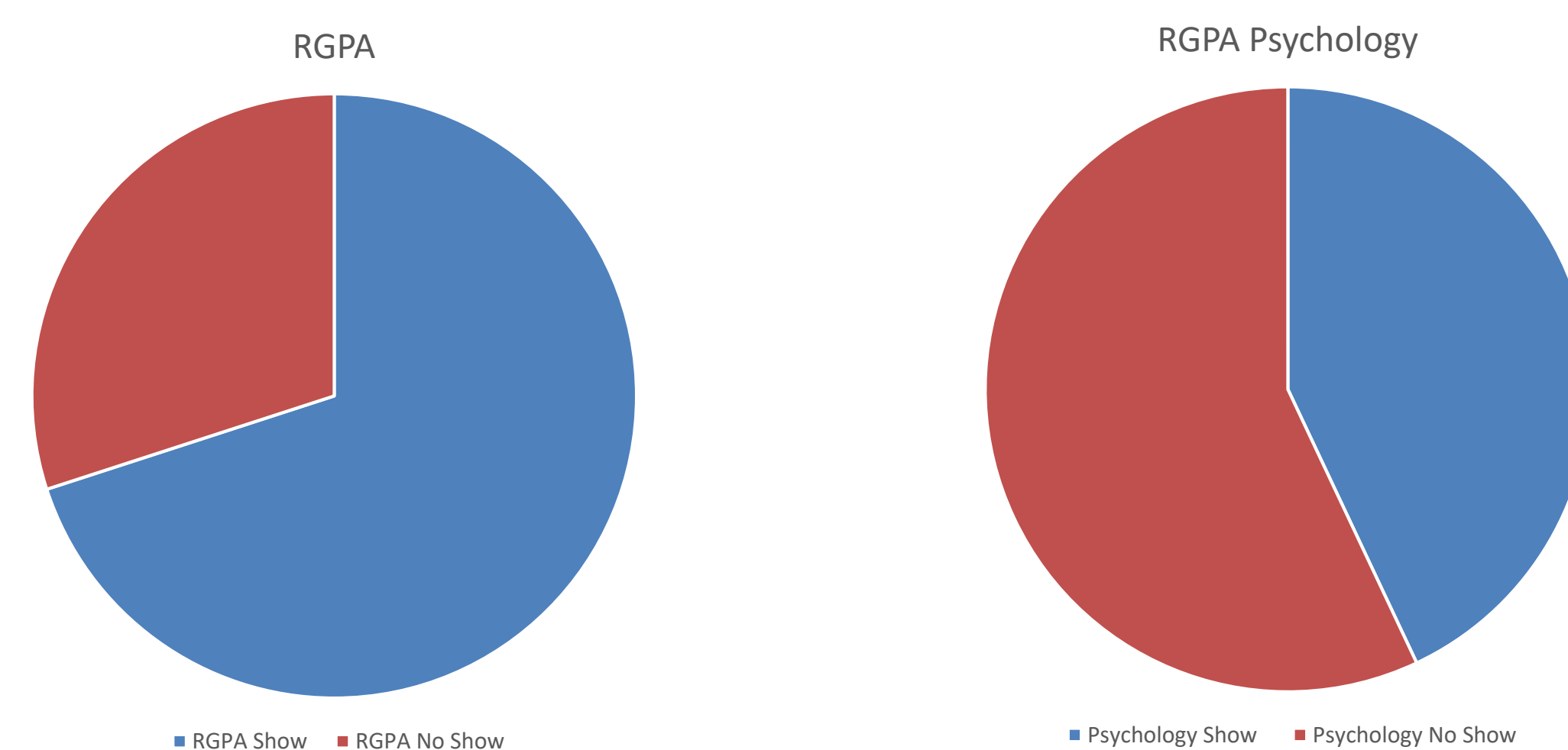


## Background

- Integrated mental health care can be one way in which to serve a broader population and increase access to care
- A common barrier to integrated services is the often high rate of no shows with the literature suggesting no show rates ranging from 19.53 % (in collocated settings; Guck, et al., 2007) to 42 % (Macharia, et al., 1992)
- At Rochester General Pediatric Associates (RGPA), show rates for first appointments have decreased significantly over the last year
- Given many practice level changes, including expansion and relocation to a new space, identification of factors impacting the current show rate are important to better serve a growing and changing patient population

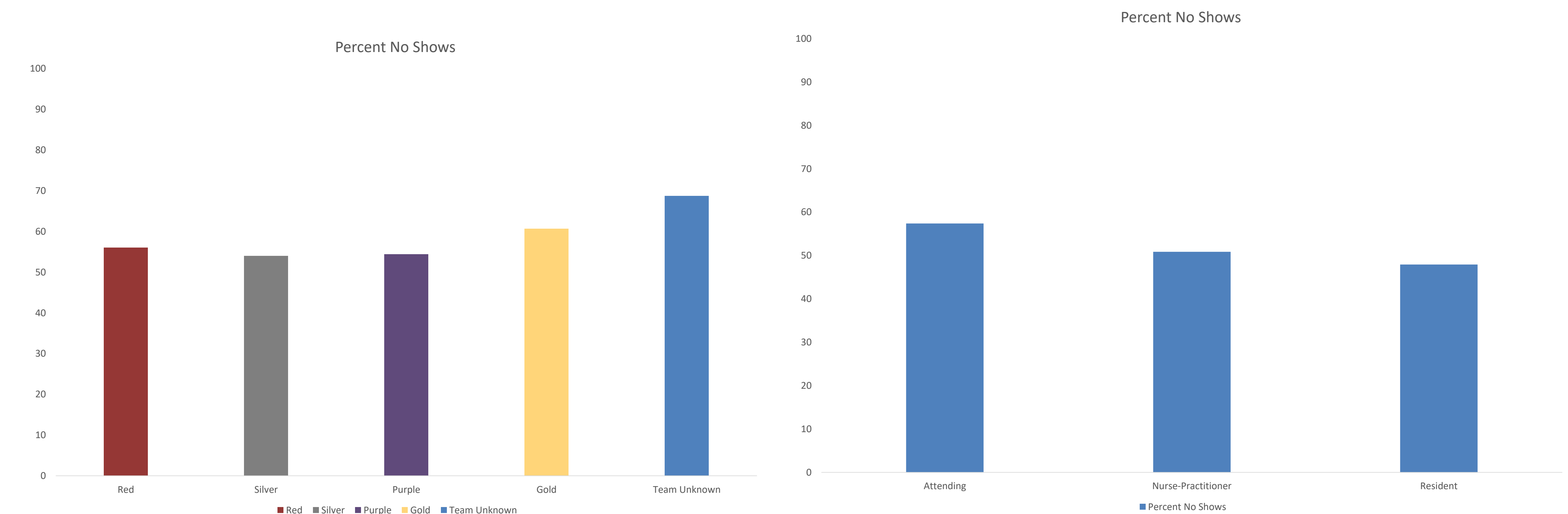


## Current Project: Objectives

- This project aims to inform ongoing practices and improved integration at RGPA
- The primary goal of the current project was to identify factors that could improve the show rate for psychology intakes at RGPA, thus leading to improved patient outcomes and more efficient scheduling
- Assessment of factors was a two-step process involving evaluation of existing information and implementation of changes based on this information to improve workflow and staff understanding of referral process

## Step One: Data Review

- First, overall data regarding psychology referrals was tracked for six months following practice relocation (September 2018 to February 2019) to identify any patterns or trends (with the goal of then targeting specific practice needs)
- Items tracked included:
  - Time since referral (range of 2 days to 13 months, including patients with repeat no shows)
  - Show status
  - Referring clinician level and team assignment (physician, nurse practitioner, resident)
- Review of this information demonstrated consistent findings across variables, suggesting no patterns based on team status or clinician training
- 70 % of patients were able to schedule appointments within four weeks of referral



## Step Two: Interventions & Systemic Changes

Following review of data, the following areas were identified to target systemic changes to support referral process:

Medical Team	
<ul style="list-style-type: none"> <li>• Provide review of psychology services to increase appropriateness of presenting concern</li> <li>• Offer smart phrases to clarify documentation of presenting concern and conversation offered during visit</li> <li>• Increase awareness of patient barriers and indicators of waiting to schedule</li> <li>• Clarify referral process in medical record</li> </ul>	<ul style="list-style-type: none"> <li>• Offered teaching during continuity clinic which covered: <ul style="list-style-type: none"> <li>• Role of psychology</li> <li>• Review of integrated care</li> <li>• Clarification of appropriate referrals</li> <li>• Decision tree for aiding in referral process</li> </ul> </li> <li>• Creation of smart phrases for medical team to use when referring to psychology</li> <li>• Updated language for referrals in medical record</li> </ul>
Access Associates/Scheduling Team	
<ul style="list-style-type: none"> <li>• Ensure team is up to date on language and how to schedule subsequent referrals</li> <li>• Offer updated information on wait times and community resources</li> </ul>	<ul style="list-style-type: none"> <li>• Brief education during team meeting about how to clarify with families and medical team</li> <li>• Offered all staff members (medical and support) with updated list of community resources</li> </ul>
Psychology	
<ul style="list-style-type: none"> <li>• Increase transparency regarding availability</li> <li>• Ensure medical team is aware of how to initiate meet and greets/warm handoffs</li> </ul>	<ul style="list-style-type: none"> <li>• Schedule posted indicating who is in clinic so clinicians know who to find</li> <li>• Increase visibility and accessibility for paging (spending time in resident workroom)</li> </ul>

## Future Directions

The following goals are ongoing as the team works to improve outcomes for patients and families:

- Ongoing assessment of show rates and utilization of skills taught to medical team
  - Team asked to forward referrals via the medical record to account for this
- Continued tracking of meet and greets/warm handoffs to determine how needs can be better met by psychology team
- Maintaining updated list of resources and ensuring all team members have access to this to allow for streamlined patient care
- Ongoing evaluation of how psychology can continue to provide appropriate level of patient care to all patients
- Consideration of joint visits with medical team