

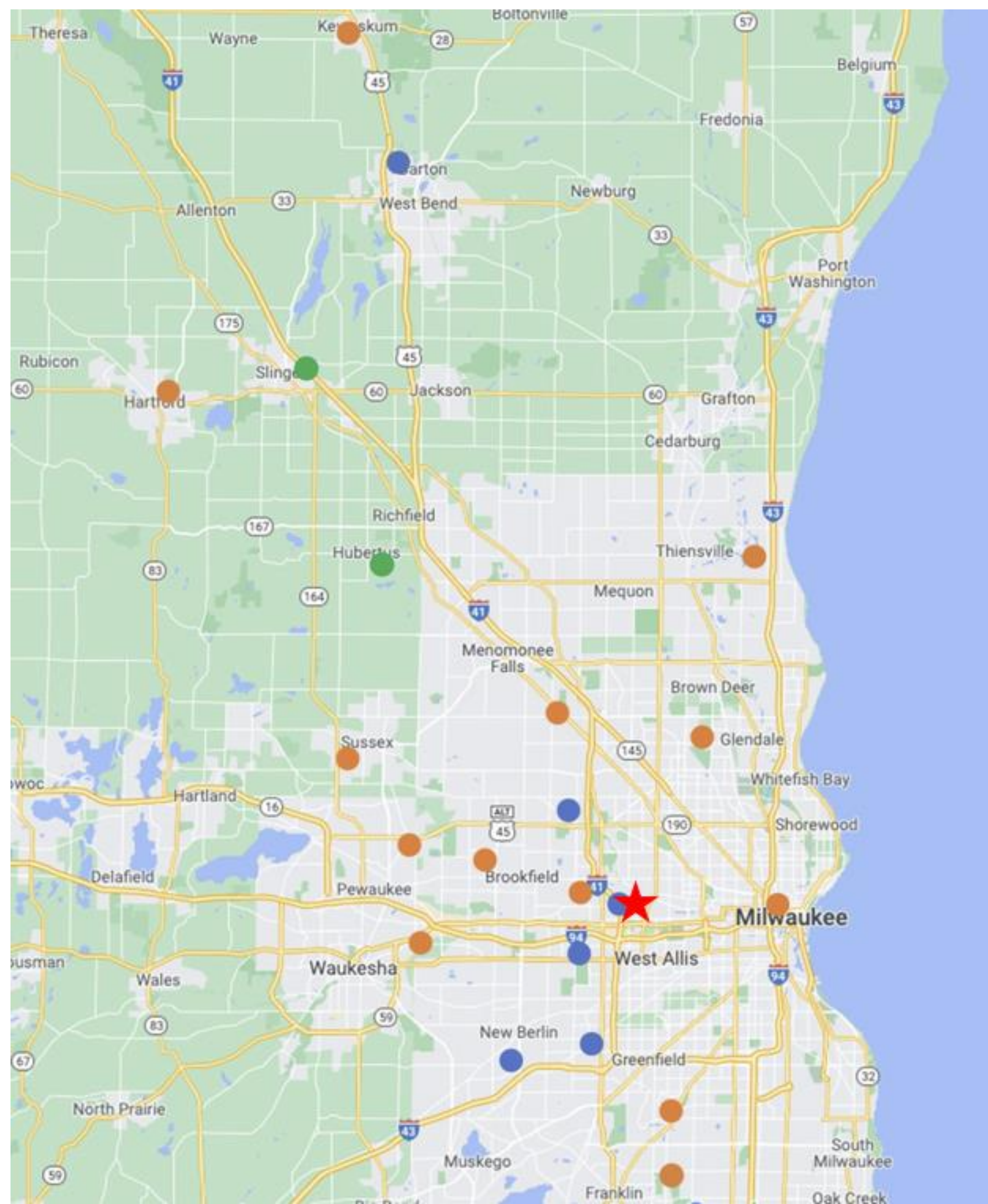
Patient Perspectives on No-Shows in Behavioral Health Settings

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Background

Froedtert provides behavioral health care via the Integrated Behavioral Health (IBH) program and Psychiatry Specialty Clinic. Our goal is to identify patterns in no-show rates between the two care models to improve overall appointment retention in behavioral health settings.



IBH Clinic Locations
 ● Current
 ● Dec 2021 Roll Out
 ● Future
 ★ Froedtert Specialty Clinics

Objective:

1. Identify barriers that prevent patients from making their scheduled appointments.
2. Assess patients' attitudes towards receiving mental health care.
3. Analyze key factors that explain why IBH patients are less likely to no-show than specialty clinic patients.

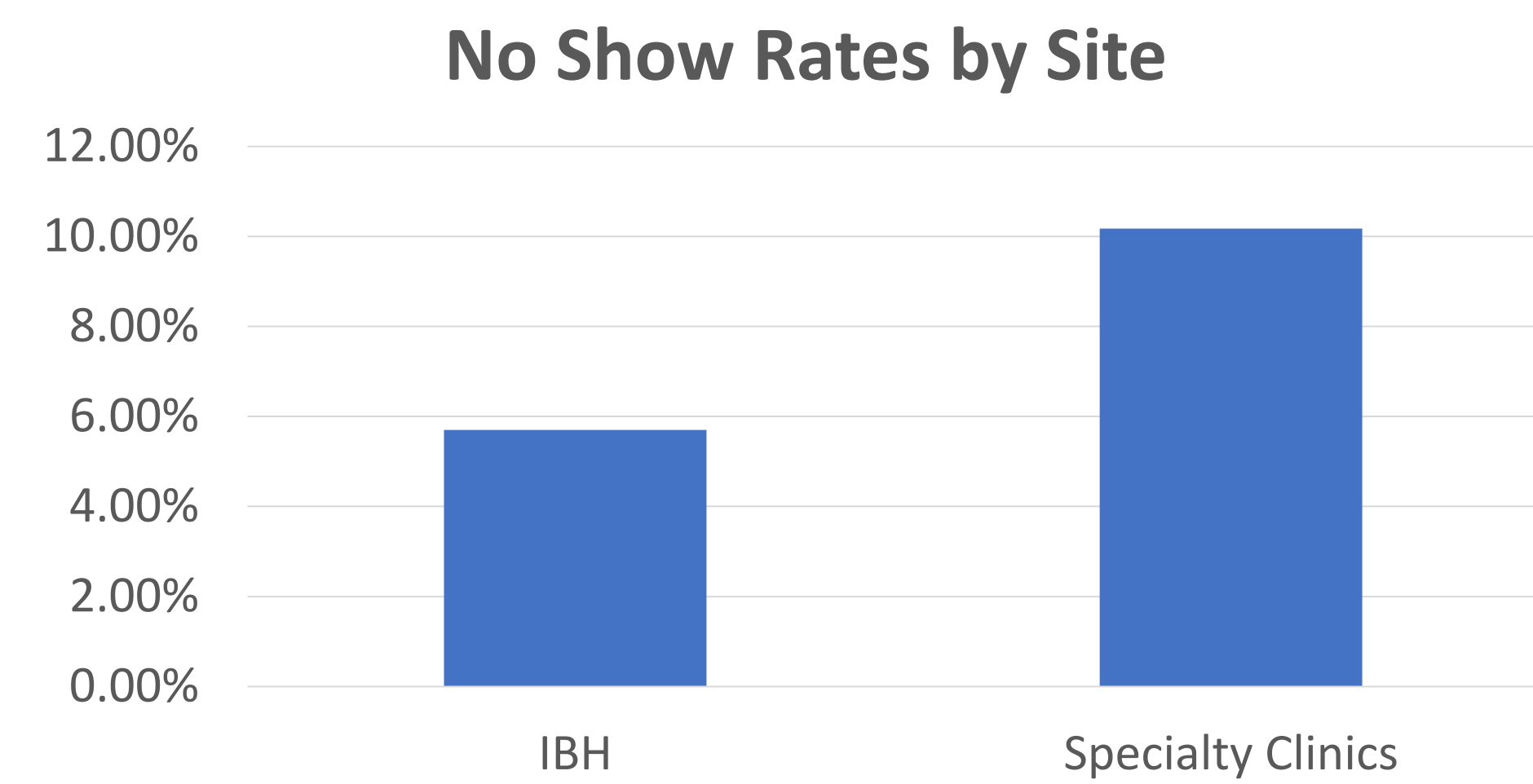
Hypothesis: We predict that the IBH clinics have lower no-show rates than the specialty clinics because their patients feel better supported and less stigmatized when receiving mental health care.

Methods

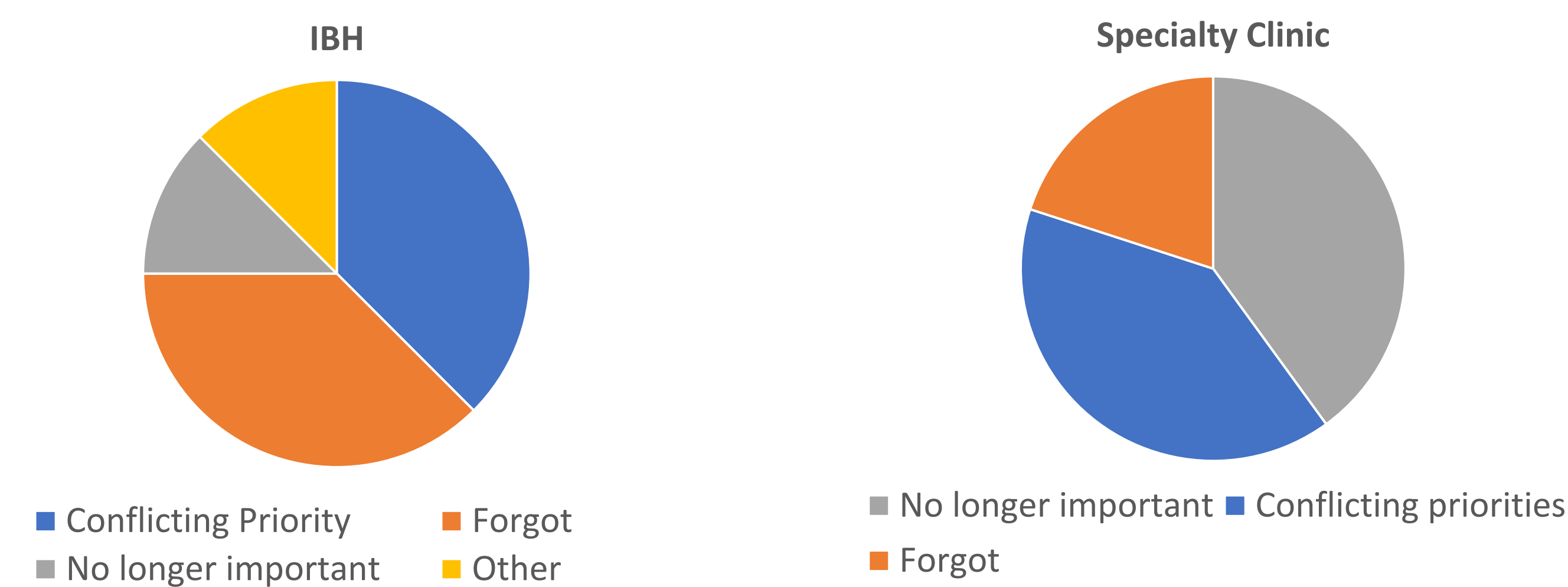
1. We analyzed the no-show rates between Froedtert's Integrated Behavioral Health (IBH) clinics and Froedtert's Psychiatry specialty clinics from 3/12/20 – 3/12/21.
2. We then interviewed 8 IBH patients and 6 psychiatry specialty clinic patients, asking them a series of 10 questions asking them why they couldn't keep their scheduled appointment, what barriers they experienced while scheduling/attending their appointment, and what aspects of their behavioral health treatment they like/dislike.
3. We consolidated the patients' responses and used the immersion-crystallization method¹ to identify patterns to no-show rates.

Results

IBH clinics have 50% less no-shows than the Specialty Clinic

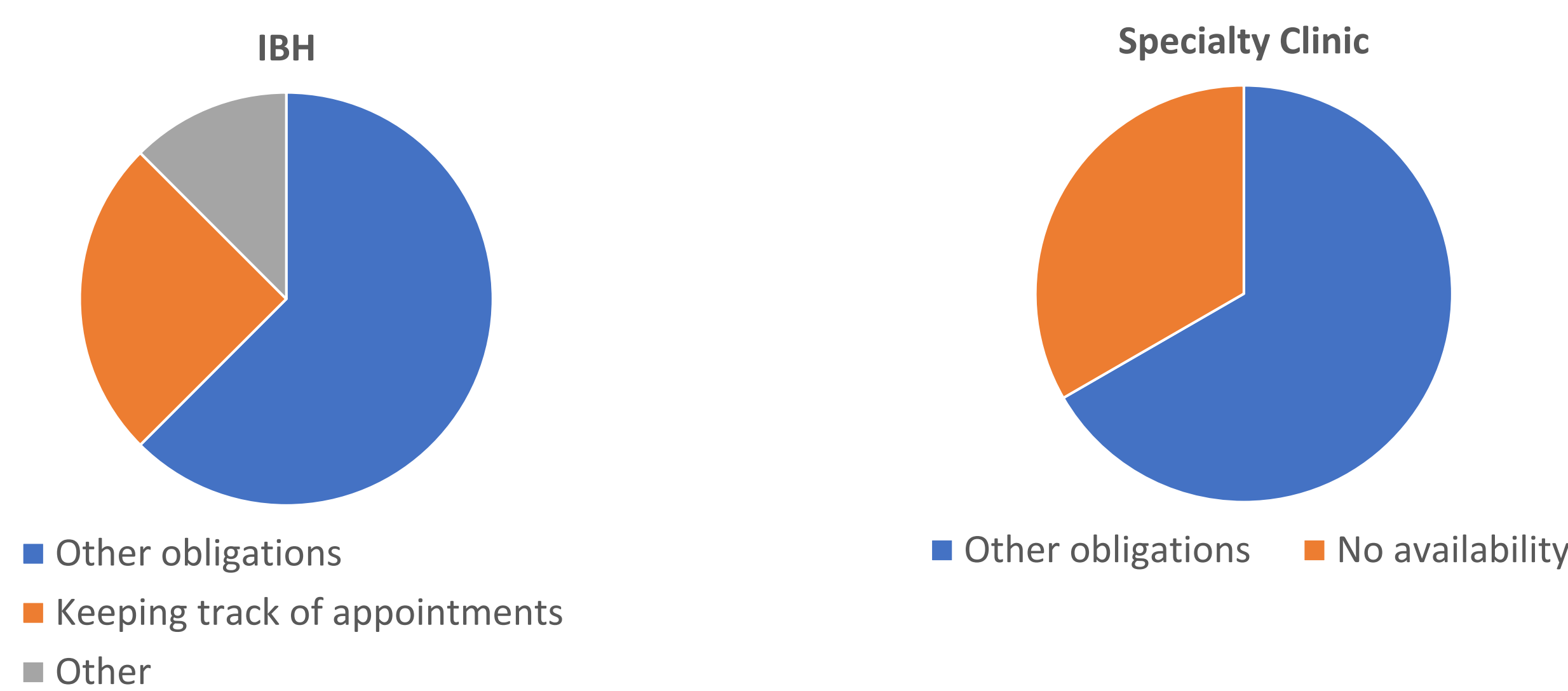


Why didn't you show up to your scheduled appointment?



It's hard because I made that appointment 2 months ago, and I don't know what my schedule is like that far ahead. By the time my appointment comes around, I have other things going on.

What barriers do you face when scheduling appointments?



What aspects of your behavioral health treatment do you like/dislike?



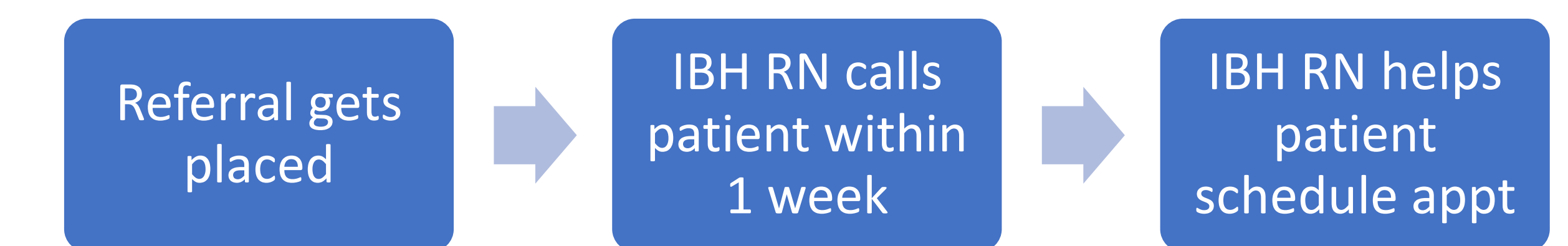
My nurse calls me regularly to check in and see how I'm doing. I appreciate that he cares and wants to see what I've been up to and if I need any help.

Discussion

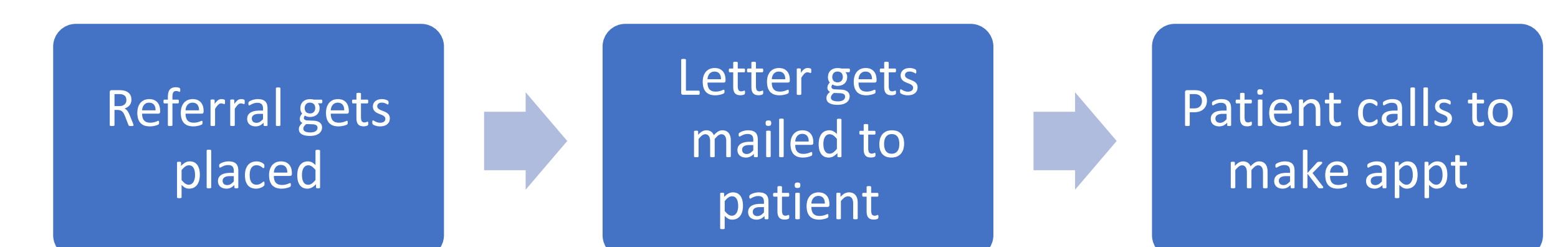
We suspect the following factors contribute to the lower no-show rates within the IBH clinics compared to the Specialty Clinic:

IBH	Specialty Clinic
<input checked="" type="checkbox"/> Multiple locations across greater Milwaukee	<input type="checkbox"/> One central location
<input checked="" type="checkbox"/> Same location as PCP office	<input type="checkbox"/> Need to establish care at new facility
<input checked="" type="checkbox"/> Nurses make appointments at the patient's earliest convenience	<input type="checkbox"/> Patients call to make appointments according to clinic availability
<input checked="" type="checkbox"/> Nurse checks in with patient weekly	<input type="checkbox"/> Patient responsible for communicating their needs

IBH Scheduling Workflow



Psychiatry Specialty Clinic Scheduling Workflow



We suspect that IBH patients have lower no-show rates because of increased accessibility and ease of scheduling. Our interviews suggest patients are more likely to attend appointments they find beneficial, such as when they want to address active symptoms. Nearly all patients we interviewed reported busy schedules and find it difficult to prioritize their mental health care above conflicting obligations. Thus, they are more likely to attend appointments they perceive as urgent and useful. Clinics can encourage appointment retention by making it easy for patients to schedule appointments soon after they have a need, rather than months out in advance.

References

1. Borkan, J. M. (n.d.). Immersion—Crystallization: a valuable analytic tool for healthcare research. Family Practice. Retrieved from <https://academic.oup.com/fampra/advance-article/doi/10.1093/fampra/cmab158/6439963>
2. Lacy, N. L., Paulman, A., Reuter, M. D., & Lovejoy, B. (2003). Why We Don't Come – Patient Perceptions on No-Shows. The Annals of Family Medicine, 1(1), 2–4. <https://doi.org/10.1370/afm.46>