

ACTION Campaign

Promising Practices



Improving Client Engagement

*Use Confirmation Systems
that Work
Action Guide*

ACTION CAMPAIGN
Making an Impact on Addiction Treatment and Recovery



Use Confirmation Systems that Work

Purpose:

This ACTION Campaign promising practice describes how checking in on clients to make sure that they are planning to come for treatment and following up when they no-show are easy practices to use to increase engagement and retention.

Introduction: In today's world everyone is overbooked and it's easy to forget appointments. Most service providers, from dentists to piano tuners, use reminder or confirmation systems to ensure that people show up for or reschedule appointments.

Plan: Identify a staff person to make calls, or use an automated system and develop a script that reminds clients of their appointment or asks if they intend to come in. Offer to help reduce barriers, such as child care or transportation, that might make it hard for the client to make the appointment. To protect client confidentiality, make sure it's OK to leave the client a message via voice mail or an answering machine. Note: you will need to obtain client permission to leave messages before you begin your Change Project.

If you have already implemented reminder or confirmation calls, making follow-up calls to clients who no-show has been an effective practice for some agencies. Ask similar questions about what prevented the person from coming for their treatment session, offer help with overcoming barriers, and schedule another session if the client wants to return.

A third level of implementation, if the first two are already in place, is to reward clients for meeting attendance goals. Many businesses use punch cards and provide rewards for a particular level of use. Treatment agencies have found that rewarding people for attending four or six consecutive sessions increases group attendance. **Before testing one of the recommended changes, measure your treatment no-show rate using the data collection tools in this kit.**

Do: Implement one of the above changes for two weeks, possibly with only a few clinicians. Collect the data on the attached data collection form to measure your no-show rate during the Change Project.

Study: Review your pre-and post-change data. Has your no-show rate changed? Discuss "Why?" or "Why not?" with clinical and clerical staff. Ask clients if the reminder/confirmation calls help them remember appointments. Ask what else you could do to encourage attendance. Identify any modifications you may need to make to try your change again, or move into full implementation.

Act: If your change made a measurable impact on no-show rates, implement it broadly, and begin the PDSA Cycle again with a different change. If you are unsure about the effect of your change, pilot it again, making modifications as necessary, or broaden your pilot to include more people or a somewhat longer (a week or two more) trial period. If your change project was unsuccessful, modify as decided in the study phase and pilot again. **Submit your data to the ACTION Campaign Web site.**





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Measuring the Impact of Change:

The length of time necessary to test a change will vary depending on an agency's size. Scientifically, the preferred sample size is at least 40 clients. However, since you are testing a hypothesis, what you need are just enough clients before and after the change to see a trend. Pilots should not last more than a month, or they tend to lose their pilot status. We recommend that you run your change project pilot long enough to have at least 20 clients experience your new way of operating. For smaller agencies, depending on the change, this may take a month. Larger agencies probably should run a change for at least a week, even if that gives a sample larger than 40.

The Practice Measure for this Action Promising Practice depends on the change target.

a) If it is a change that uses reminder/confirmation call prior to an appointment, then you want to track:

- # of cancelled appointments (baseline only)
- # of appointments scheduled vs. appointment kept

You may also want to track the number of successful and unsuccessful calls where success is measured by actually leaving a message for the client

b) If you are already using reminder or confirmation calls before an appointment, test calling clients after a no-show to find out what prevented the client from attending. Then you might want to track:

- # of missed appointments
- # of successful follow-up calls
- # of kept appointments after the phone call

Consider also recording the barriers to attendance that the client identifies.

c) Finally, if you are already using the two previous changes and you decide to reward clients for attending a specific number of sessions, then you might want to track:

- # of clients admitted to treatment
- # of clients who receive an award for attending a specific number of sessions

You also might want to track the average number of sessions attended by all clients who were offered a reward for attending a specific number of treatment session.



Action Campaign Metrics Evaluation Tool

Agency Name _____

Level of Care _____

Action Promising Practice _____

Change Idea A: Appointment Reminder/Confirmation Call Tool for Tracking Kept Appointments by Week

Instructions:

1. Enter the dates for a specific week that your agency will implement the change.
2. Enter the actual number of scheduled appointments on that day (A)
3. At the end of the day, enter the actual number of kept appointments (B)
4. If you wish, you may calculate the % kept vs. scheduled daily appointments by $(A-B)/A$
See example below.
5. At the end of the week, summarize the weekly scheduled and kept appointments
6. If you wish, you may calculate the % of kept vs. scheduled weekly appointments by $(A-B)/A$
7. For multiple cycles, please use a separate form for each cycle

	Date	No. of Scheduled Appointments (A)	No. of Kept Appointments (B)	Daily % of Kept Appointments $(A-B)/A$
	9/1/07-9/7/07	20	10	50%
Totals				



Action Campaign Metrics Evaluation Tool

Agency Name _____

Level of Care _____

Action Promising Practice _____

Change Idea B: Follow-up Phone Call for a Missed Appointment
Tool for Tracking Kept Appointments by Week

Instructions

- 1. Enter the dates for a specific week that your agency will implement the change (A)
2. Enter an agency unique client identification number (only for track the client internally) (B)
3. Enter the date of the missed appointment (C)
4. Enter if the Follow-up Call was Successful or Not (D)
5. Enter the date of the scheduled follow-up appointment (E)
6. Enter if the client attended the next scheduled appointment after the follow-up call (F)
7. If you wish, you may record barriers to attending the appointment identified by the client (G)
8. At the end of the specific time period, you can summarize the number of missed appointments, successful follow-up calls and the number of next appointments kept
9. For multiple cycles, please use a separate form for each cycle

Table with 7 columns: Date (A), Unique Agency Client Identifier (B), Date of the Missed Appointment (C), Successful Follow-up Phone Call (Yes/No) (D), Date of the Re-scheduled Follow-up Appointment (E), Client Attended the Next Scheduled Appointment (Yes/No) (F), Client Identified Barriers (G). Includes a pre-filled row with data: 9/10-14, A0001, 9/12/07, Y, 9/17/07, N, Child Care.



Action Campaign Metrics Evaluation Tool

Agency Name _____

Level of Care _____

Action Promising Practice _____

Change Idea C: Rewarding Client Attendance for a Specific Number of Sessions Tools for Tracking Kept Appointments by Week

Instructions:

1. Determine the time frame for the change
2. Enter the date (A)
3. Enter Client Name/Unique Identifier (B)
4. Enter the No. of Sessions needed to qualify for Award Activity (C)
5. Enter if the client actually attended the next set of appointments associated with the reward (D)
6. If you wish, enter the actual number of sessions attended by each client even if they did not complete the reward goal

Example shown below.

7. If you wish, you may calculate the % of clients that received the award by: Total yes in (D)/ Total # Clients (B)
8. At the end of the week, summarize the number of clients who qualified for the award, completed the required number of appointments and average the actual number of sessions attended.

Date (A)	Unique Agency Client Identifier (B)	No. of Sessions needed to qualify for Award Activity (C)	Did the Client Attend the Specific Number of Sessions Associated with the Award (Yes/No) (D)	If No, Actual No. of Sessions Attended by the Client (E)	% Clients that received award: Total # Yes in (D)/ Total # Clients (B)
2/12/07	AB1001	4	No	3	
	Total No. of Clients: 20		Total Yes: 16		16/20=80%



Use Confirmation Systems that Work

Mid-Columbia Center for Living

The Dalles, OR



Project Aim

Increase Outpatient Continuation at Hood River

Change Leader / Executive Sponsor

Sharon Guidera

Goals & Measures

Continuation at the Hood River outpatient site had been low, about 44 percent. Staff were not aware of the low rate of continuation because the high demand for services kept them working at capacity. The agency also had low no-show and cancellation rates for scheduled appointments. After recognizing the low continuation rates, Hood River set a target of increasing continuation of clients, defined as four post-assessment treatment sessions, to 53 percent.

Changes Implemented

The Change Team implemented the following changes:

- Created a multi-session appointment card to help clients keep better track of their appointments
- Awarded \$10 gift certificates to clients after their fourth post-assessment treatment session
- Offered a pizza party to group counseling attendees after every four sessions in which the group had 100 percent attendance
- Provided court mandated clients with written clarification of expectations for group attendance
- Used a motivational outreach to clients who cancelled or did not show for appointments

Business Case Impact

In the first two months of the Change Project, December 2004 and January 2005, continuation rates showed little improvement, averaging 46 percent. In the next four months (February–May 2005), continuation rates increased to an average of 66 percent, a 40 percent improvement over baseline data. After a few months of sustained improvement, the team ran two additional change cycles. These changes resulted in a 73 percent average continuation rate in August–November 2005.

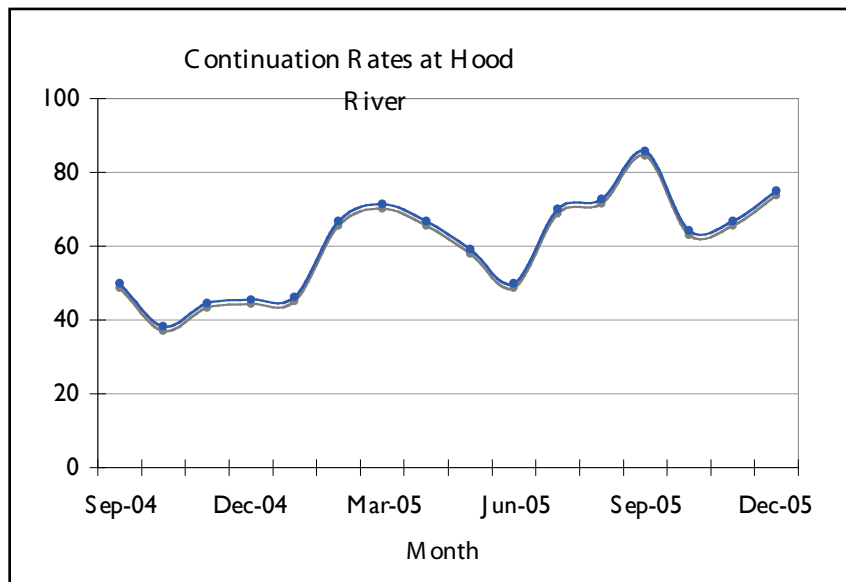
- From a business case perspective, the contribution margin of this program has tripled from change date to the present.



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Lessons Learned

- After studying the problem, the team found that clients were most likely to no-show or cancel for group treatment sessions. The team also observed that attendance in the English-language groups had been lower than the Spanish-language groups—70 percent attendance compared to 94 percent attendance, respectively. After implementing the pizza party group incentive, attendance in the English-language groups increased to 87 percent. Attendance for the Spanish-language group remained stable at 94 percent.
- We learned that regardless of how clearly we provided directions verbally and in writing for a Change Project, there remained a possibility that directions would be misinterpreted. Providing standard information to all clients took a great deal of staff follow-through to ensure that all staff were doing the same activities the same way.
- We have sustained the gains in continuation made in these changes because we have incorporated them into the regular treatment process. We learned through other Change Projects that if a behavior is not made part of a process, it will not be sustained.
- We cannot pinpoint the precise effects of this Change Project on revenues, as we pursued other Change Projects during the same time period.





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Additional Success Stories for Using Confirmation Systems that Work

Agency	Level of Care	Change	Action Impact
Axis	Outpatient	Follow-up Phone Calls with a Case Manager	Reduce No-show Rates by 18%
Colleton Commission on Alcohol and Drug Abuse	Outpatient	Reminder Calls	Reduce No-shows from 64 to 28%
Connecticut Renaissance (see Business Case)	Outpatient	Follow-up Phone Calls	Reduce No-shows by 17%
Daybreak	Outpatient	Counselor Feedback on Missed Appointments; Reminder Phone Calls to Clients and Rewards for Attendance	Reduce No-shows from 28 to 7%
Port Human Services	Outpatient Phone Call	Initial Reminder resulting in admissions	Increased evaluations
Southwest Florida Addiction Services	Outpatient	See LS IV Storyboard	Reduce No-shows from 42 to 27%