Section #3 Transcript

Section #3: Applying Data-to-Wisdom in Behavioral Health [Example]

Stage #1: (Data) Tackling No-Show Rates

Now let's take a look at our example of how an Outpatient Mental Health program might use the Data-to-Wisdom Continuum to improve their contact with clients by reducing no-show rates.

The program enters the first stage of the Continuum by determining what data to collect. To decide, they refer back to the strategic objective they created, which was to positively impact outcomes by increasing the number of client visits. One of the ways the organization plans to implement that strategy is to reduce the amount of no shows.

For a quick refresher, data is individual fields that by themselves, are relatively meaningless and represent the past. The Outpatient Clinic that we are looking at sees that they have a problem with clients missing appointments. They don't know why, they just know that a large number of patients are skipping appointments.

They want to find out why the clients are missing appointments, so they ask clinicians to follow up and see if they can find out why. But before asking clinicians to do so, a new field is going to be created in their electronic health record to capture a "no-show reason." Now, they begin the process of collecting data on the reason appointments are missed.

To ensure the data's collected discretely, the organization creates a drop-down list of reasons someone might miss an appointment. This ensures they have consistency and Fidelity of Data. They have conversations with therapists and clinic directors about why they "think" notionally, clients miss their appointments, and it proves to be a good starting point. The following drop-down list is created from the conversations:

1. Forgot Appointment
2. No Transportation
3. Scheduling Conflict
4. Other

Section 2, Stage #1 of this course about data told us that by including a drop-down menu, the agency can ensure consistency and Fidelity of Data. The organization believes that by decreasing the number of appointment no-shows, they will be able to increase treatment effectiveness, and therefore improve the client's outcomes which aligns with their overall strategic plan.

Now we will look at the organization's results after they collected data for a six-month period.

Stage #2: (Information) Monthly Report on No-Shows by Reason

Now it's time for Stage #2, the Information Stage of the Data-to-Wisdom Continuum for our Outpatient Mental Health clinic.

Before we get started, make sure to remember that information is discrete data fields that have been combined together in the form of a report. For the purposes of this example, we are going to assume that the organization has an electronic health record that can enable them to visualize the data. Reports are going to be much easier to read as visuals than as tabulated numbers.

After six months of collecting data, the organization has a total of 200 no-shows, which confirms their previous notion that clients were missing appointments, but now they also have a breakdown of the reasons why.

First, they noticed that the largest percentage of the no-shows are the result of clients "Forgetting their Appointment." Forgetting the appointment alone equals all three other reasons combined.

Of all the no-shows, forgot appointment represents 50%, no transportation reflects 25%, the "other" option is 20%, and scheduling conflicts make up the last 5%.

Now here at the Information Stage, you want to make sure that you don't stop. To continue tracking these metrics without taking any actions to improve them is falling into the Chasm. To take no action is to begin collecting data for data's sake. It won't help you improve, and isn't fair to those who you've asked to collect the data in the first place.

The organization takes action on the largest deficiency first, so we can see what results the clinic has in another six months.

Stage 3: (Knowledge) Take Action on the Largest Deficiency

After all the hard work of planning, setting their EHR for data collection, and waiting patiently for a reliable sample size, our Outpatient Mental Health program is finally ready to start making some changes.

Remember from the earlier lesson that, knowledge is where you draw conclusions from your information in the context of your strategic plan. Now it's time for the organization to ask questions of that information: "Why is it that clients are missing appointments?"

Well, it appears that one of the organization's suggested insights was correct. The clients are forgetting their appointments. 'Forgot appointment' is the biggest culprit, making up over half of the no-shows. The next largest percentage is "no transportation," followed by our "other field," and the last is scheduling conflicts. Now, let's see what can be done to improve on that.

The organization decides to implement a phone call reminder system to see if they can reduce the number of appointments missed due to clients' forgetfulness. The organization takes this approach because they want to take action on the largest deficiency first. Doing so ensures that they make the biggest impact on the largest number of clients first. The phone call reminder

system will be an automated dialer that will remind the client of their appointment some time period in advance.

After six months of using the automated dialer, the organization runs the same report again, only this time they can see that the overall number of no-shows has been reduced by half! With the drop in the overall no-show rate, there is also a drop in the percentage of appointments that were missed because of clients forgetting about them.

The knowledge gained here is this: if positive action is taken at the client level, the number of appointments missed will be reduced.

Now the organization realizes that getting clients to show up for their appointments is something that can be improved. They know because they did it.

Now, let's see how they turn the newfound knowledge into wisdom to predict the success of their next action.

Stage 4: (Wisdom) Predict Success and Take More Action

We saw how the organization was able to measure the effectiveness of their phone call reminder system, in reducing the number of no-shows in their program due to clients forgetting about their appointments. Now, they have the wisdom to know that they can affect no-show rates, so they can begin tackling other deficiencies.

The agency's next largest deficiency is a lack of transportation to appointments, so the next step would be to try different things to improve accessibility.

They could institute a transportation plan as part of treatment to have clients plan how they will get to their appointments, or they could provide bus vouchers for individuals that need them.

Whatever they choose as a best course of action, now that they have the wisdom that people will make their appointments if the organization can help them reduce the obstacles driving their investments.

This process of methodically taking actions to reduce your deficiencies is known as draining the swamp. Your largest deficiency will stick out above the swamp line, but when you reduce it, a new largest deficiency will emerge out above the new swamp line. If you keep taking actions against the deficiencies that are having the largest impact, you will be able to use wisdom to systematically improve your outcomes and achieve your strategic goals and objectives.

Once you have used the Data-to-Wisdom Continuum to reduce deficiencies across all of your business areas, then you can revisit your strategic plan, and begin the process again. We hope that this course has provided you with valuable insight into how you can use the data captured in your EHR, not just to measure your outcomes, but actually improve them.

Remember, Reports Don't Improve Outcomes, you do!