Streamline Paperwork between Levels of Care

Problem

Clients and staff spend too much time on paperwork during transitions between levels of care.

Solution

Streamline the paperwork process between the referral source and program to eliminate duplication of effort.

Featured Stories

Central New York Services in Syracuse, New York increased referrals by 86 percent by condensing and eliminating paperwork for internal referrals. The referring counselor completed the assessment and referral paperwork.

SSTAR in Fall River, Massachusetts increased the average daily census on its Dual Diagnosis Services Unit from 13.86 to 15.86 by streamlining the process for admission for five priority hospitals that were making appropriate referrals. They eliminated the requirement of a records review for an admission decision, although records still were needed for coordination of care. The five priority hospitals also had access to a telephone "hotline" that the admissions clerk answered on a portable phone which she kept with her at all times. For further information, see the SSTAR case study.

Lessons Learned

- Send demographic information and assessment findings from the referring agency to the program.

- Have the referring counselor complete paperwork required by the treatment agency.

Tracking Measures

Cycle Measure	Data Collection Forms
Percentage of referred clients who were admitted	Referred Clients Admitted Tracking Form (Transition Clients)

Action Steps

Plan
1. Select one referral source.

2. Collect samples of all the paperwork that the referrer and the program at the next level of care collect, including pre-authorization forms, applications, clinical records, and transfer forms.

3. Identify ways of transferring the information from the referrer to the treatment agency at the next level of care.

NIATx Aims

Reduce waiting time
Reduce no-shows
✔Increase continuation
✔Increase admissions

Financial Impact

✔Increase revenue
✔Increase staff retention
Reduce costs

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4. Focus on eliminating duplication of effort and communicating the information in a timely manner.

5. Collect baseline data for the percentage of referred clients who were admitted for two weeks.

Do   6. Test the new paperwork system for the next two weeks.

7. Track the percentage of referred clients who were admitted.

Study   8. Check the fidelity of the change. Was the change implemented as planned?

9. Evaluate the change:

- Did counselors and clients spend less time filling out paperwork?

- Did the new process provide for the appropriate information? Too much information? Too little?

- Was the information available when needed?

- Did the percentage of referred clients who were admitted increase?

Act   10. If this change was an improvement:

- Adopt this change or adapt it for more improvement and re-test it with the same referral source.

- Expand the use of this process to other referral sources.

- Document the processes that resulted in an improvement so that you can continue to use them efficiently.

- Test other, related promising practices that apply to your setting.

If this change was not an improvement and you can't make it work, abandon this practice and test other promising practices that might be more successful in your setting.

Related Promising Practices

- [Eliminate Excessive Paperwork](#)

More Stories

Palladia, Inc. in New York, New York improved communication between residential and outpatient staff by sending the discharge application from residential treatment to the outpatient program thirty days before the client was discharged. They also transferred the clients' files so that outpatient counselors could read about the client's experience in residential care. For more information about this and other changes that Palladia made, see Palladia's [case study](#).

The Patrician Movement in San Antonio, Texas increased the percentage of clients who continued from residential treatment to outpatient care from 10 percent to 30 percent, by changing their procedures to transfer client paperwork from residential treatment to the outpatient program, and by making other changes.

Signal Behavioral Health Network in Denver, Colorado reduced the steps in the authorization and referral process.

STEP 2 in Reno, Nevada decreased the risk that clients would drop out of treatment because they were not in the most appropriate level of care for a week while their paperwork was processed. They streamlined the application process for transitioning clients from intensive outpatient treatment to outpatient care.