Non-attendance in first appointments with clinical psychology in a public outpatient mental health centre

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Introduction

Non-attendance at initial appointments is an important problem in our outpatient settings, compromising the quality of care. It decreases the efficiency of resources, delaying attending patients' treatment.

Objectives

To compare the characteristics of patients attending or not their first appointment with clinical psychology in an adult outpatient mental health center located in a deprived area of Barcelona.

Method

Retrospective study. The sample was made up from all patients who had a first appointment with clinical psychology during 2014. Sociodemographic and clinical data (sex, age, reason for consultation, origin of derivation, priority, history of mental health problems) were described and compared. Non-parametric tests were used to compare both groups in the study variables.

Results

A total of 127 patients were included. The 31.5% (40) did not attend their first appointment. Age, sex, consultation reason, derivation origin, priority and psychiatric history were not significantly different among attenders and non-attenders.

Table 1. Main characteristics of first appointments

	Non-attenders mean (SD)	Attenders mean (SD)
	31,5 (40)	68,5 (87)
Age	39,3 (13,1)	40,5 (13,7)
Gender (men) History of previous vinculation to the mental health centre Current vinculation to the mental health centre	% (n) 42,7 (17) 45 (18) 5 (2)	% (n) 42,5 (37) 41,5 (36) 36,8 (32)

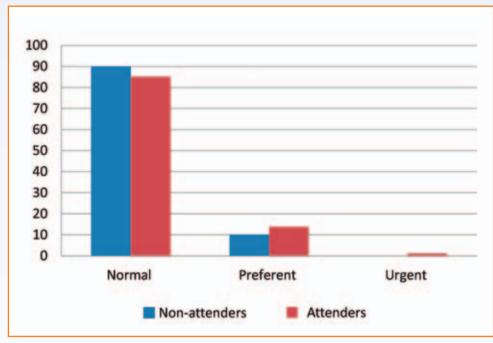
Table 2. Reason for consultation (%; n)

	Non-attenders	Attenders
Anxiety	45 (18)	40,2 (35)
Depression	22,5 (9)	31 (27)
Psychosis	2,5 (1)	3,4 (3)
Behavioural disorders	2,5 (1)	3,4 (3)
Use of drugs	5 (2)	5,7 (5)
Others (social problems)	22,5 (9)	16 (14)

Table 3. First appointment's origin (%; n)

	Non-attenders	Attenders	
Primary care	87,5 (35)	85,1 (74)	
Other outpatient psychiatric centre	2,5 (1)	3,4 (3)	
Social services	7,5 (3)	3,4 (3)	
Psychiatric emergencies	2,5 (1)	0	
Outpatient drug centre	0	1,1 (1)	
Other	0	6,9 (6)	

Figure 1. Priority (%)



Conclusions

We couldn't find any clinical or demographical difference among attenders and non attenders. However, developing mechanisms that can reduce the incidence of first non-attended appointments is critically important. In our case, 85% of the patients are sent by primary care physicians. Thus, providing guidelines for family doctors for assessing and facilitating patients' motivation for psychological treatment might improve attendance. According to our data, these interventions should be undergone with different patients' profiles.



