



Improving the no-show rate in an academic Internal Medicine clinic

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Background

- No-show rates are typically higher in an academic ambulatory setting
- Multiple barriers affect patients' ability to make scheduled appointments
 - Patients of low SES are disproportionately affected
- Frequent no-shows impact:
 - Productivity
 - Outcomes
 - Provider job satisfaction

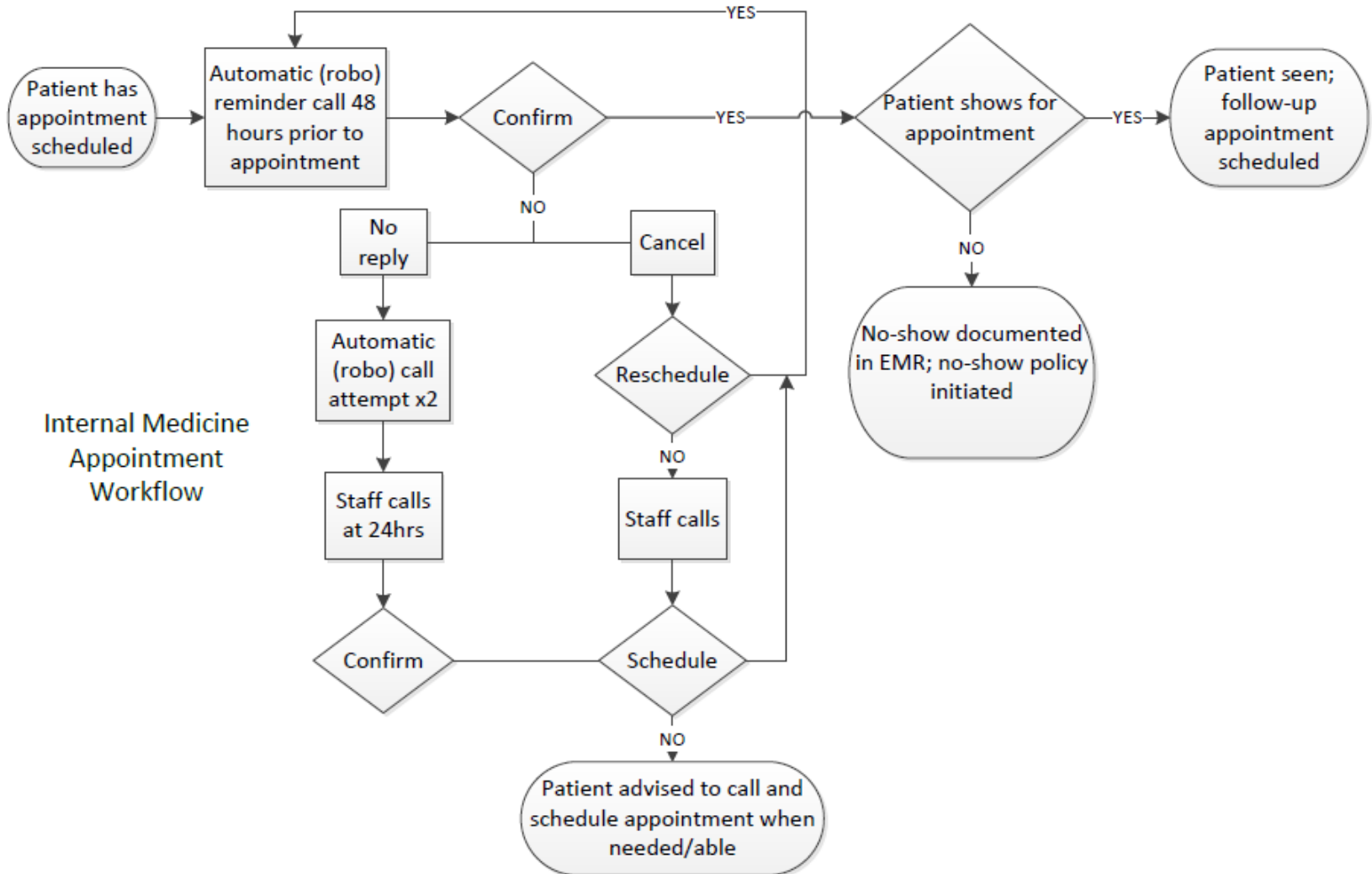


Aim

We designed and implemented a quality improvement project aimed at reducing the no-show rate in the OU Internal Medicine practice in Tulsa from 22% to 15% by May 31, 2017.

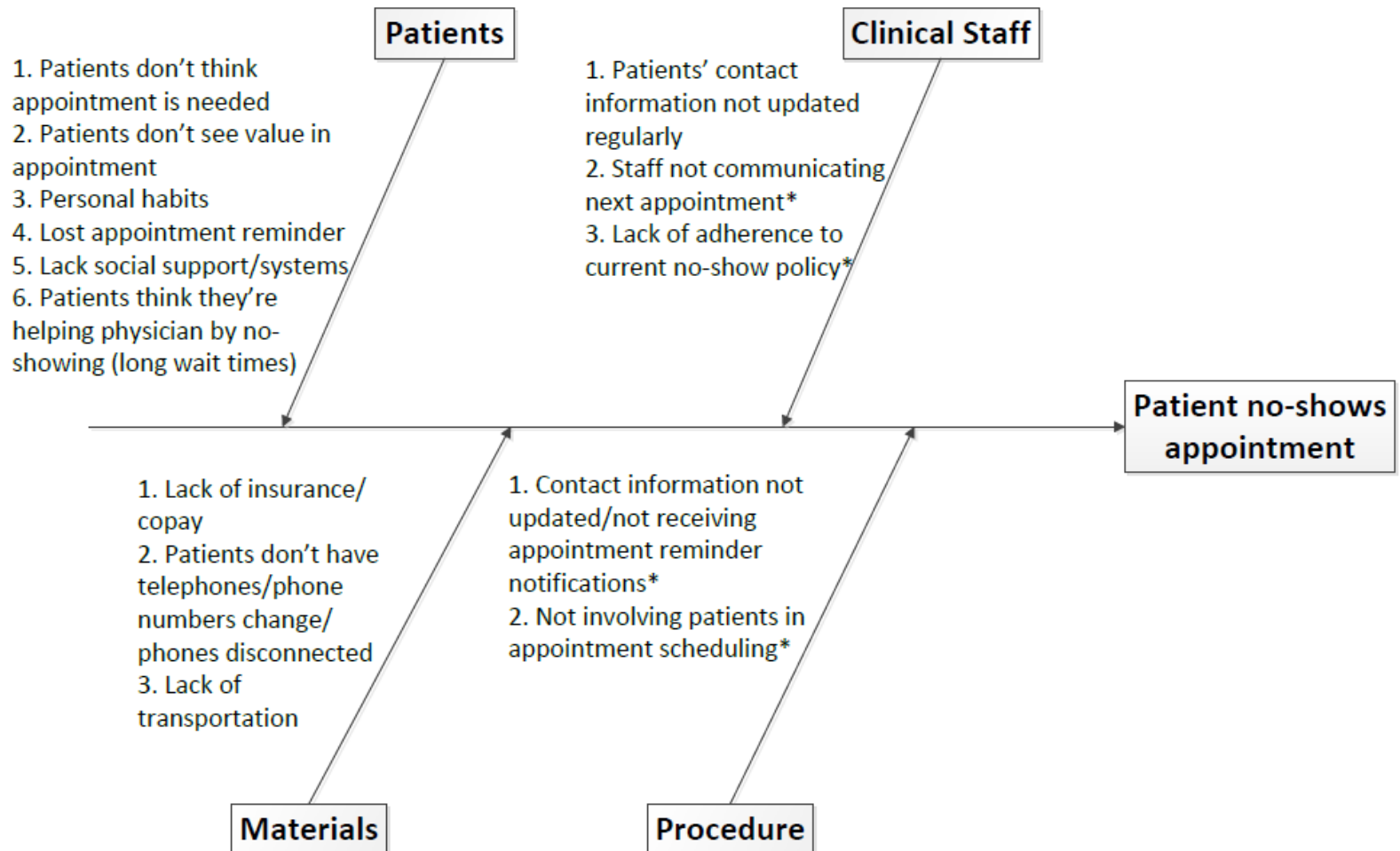


Current state--workflow





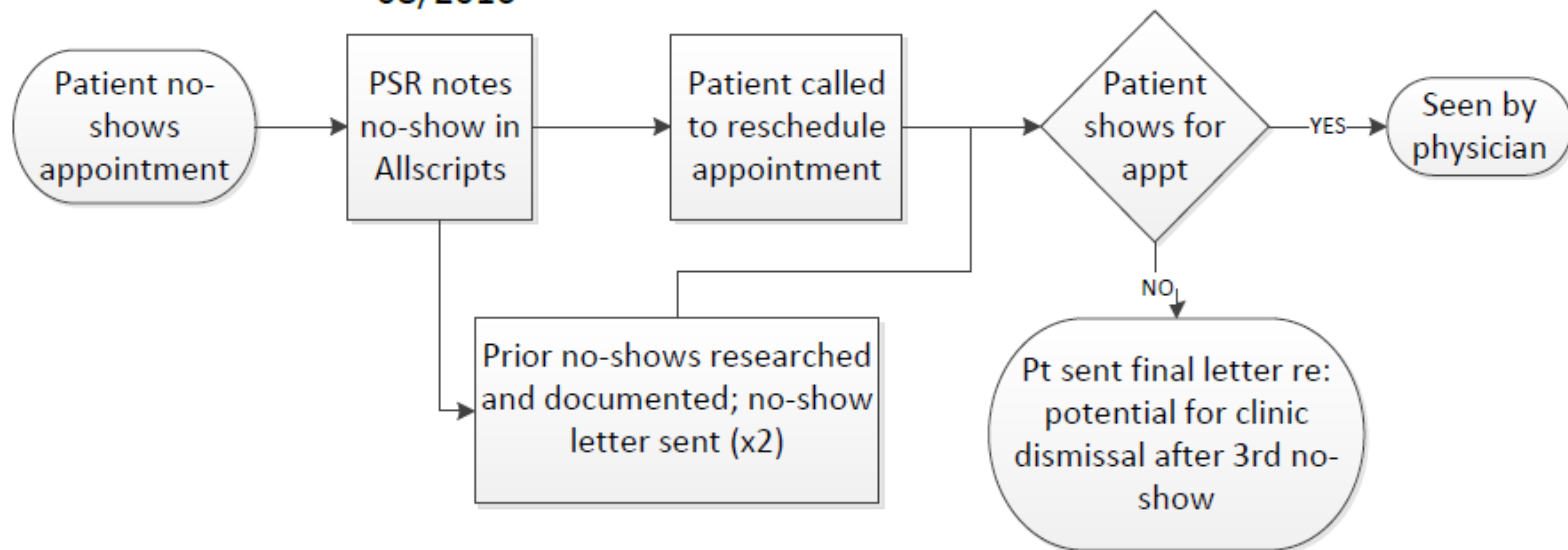
Root Cause Analysis





Current state—no-show policy

Internal Medicine No-Show Policy
08/2016





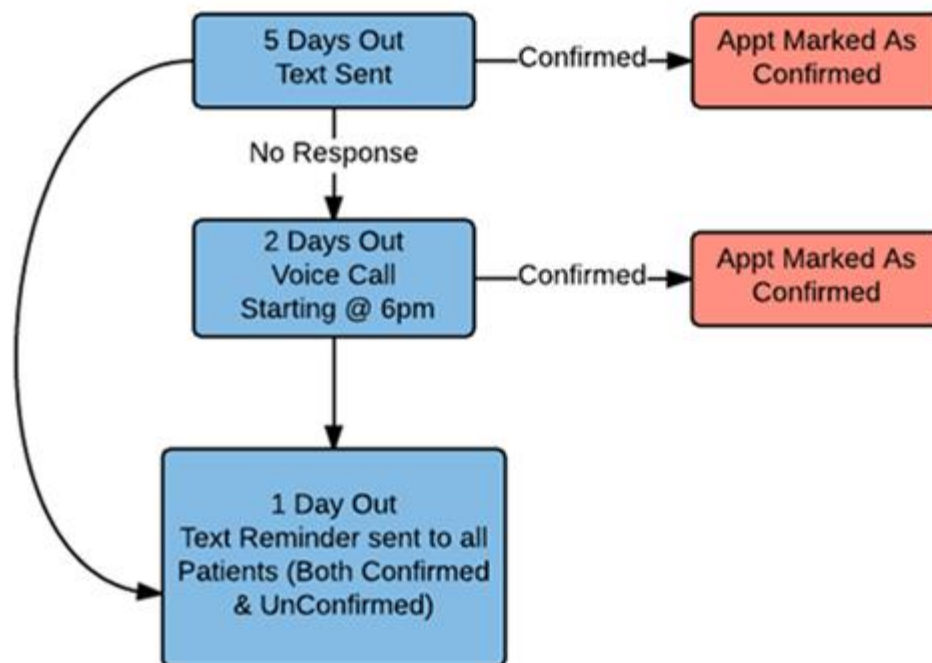
Ideas for change

1. Improve appointment reminder system
2. Update patient contact information at every visit
3. Involve patient in appointment scheduling*
4. Adhere to existing no-show policy*



PDSA 1—Improve appointment reminder system

- QI team members contacted staff responsible for managing reminder system
- Found reminder system to be appropriate



Appointment reminder text:
"Patient name, your appointment is at 3:30 PM on Wednesday, 10/16/2016 with OUP Internal Medicine, (918) 619-4400, OU Physicians. Reply 'Yes' to confirm."

*New patients asked to arrive 15 minutes early with their copay and medications.

*Existing patients are asked to arrive 15 minutes early with their copay.



PDSA 2—Patient contact information

- QI team members observed front desk staff interacting with patients at check-in to learn about existing practice of collecting patient contact information
- Observation: Patients were asked, “Is the phone number and address listed in our records the same?”
- Plan: Patients will be asked, “What is your current phone number and address?”



PDSA 3—Involve patients in appointment-making

Current practice:

1. Provider informs nurse when patient should be seen for follow-up (2 weeks, 4 weeks, etc.)
2. Nurse schedules the appointment in the given time frame
3. Nurse provides patient with appointment card with date and time of next appointment

Plan:

1. Provider informs nurse when patient should be seen for follow-up
2. Nurse consults with patient on day of week/time of day best for patient
3. Nurse schedules the appointment and provides patient with appointment card with date and time of next appointment



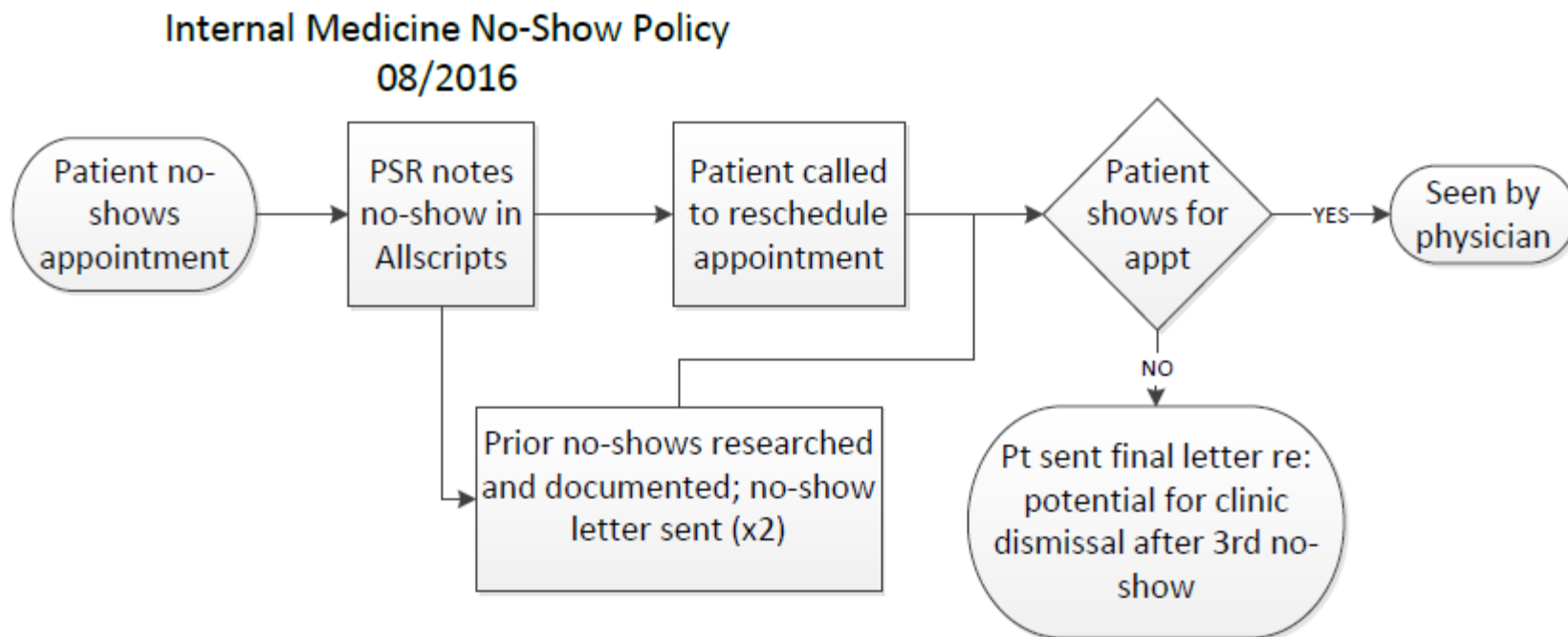
*PDSA 3—Involve patients in appointment-making

- Plan discussed with clinic manager but never formally integrated into our clinic protocol
- Some nurses began to involve patients in appointment scheduling as a result of conversations with providers



PDSA 4—Adherence to no-show policy

- Internal medicine had existing no-show policy:





PDSA 4—Adherence to no-show policy

Current practice:

1. Not all clinic staff aware of policy
2. Patients not informed of policy

Plan:

1. Educate clinic staff, including physicians, on policy
2. Educate patients on policy



PDSA 4—Adherence to no-show policy

Educate clinic staff

- No-show policy presented and discussed at clinic team meeting



PDSA 4—Adherence to no-show policy

Educate patients

- No-show policy printed and posted in exam rooms and throughout clinic



OU PHYSICIANS
The UNIVERSITY of OKLAHOMA - TULSA

What you need to know about your appointments with OU Internal Medicine

We understand that sometimes things come up that do not allow you to make your appointment. However, when patients cancel appointments without notice or fail to show up to appointments, it creates a hardship for other patients, the physician or provider, and clinic staff. Below is our no-show policy, effective as of February 2016.

- To reschedule your appointment, please notify the office at least 24 hours in advance by calling (918) 619-4180.
- After each missed appointment we will send you a letter with our policy and phone number asking you to reschedule.
- If you miss 3 consecutive appointments or 75% (3 out of 4) of all the appointments you had in one year, we will send a warning letter providing information on our “no show” policy and you might be asked to find another clinic that may be more accessible to your needs.



*PDSA 4—Adherence to no-show policy

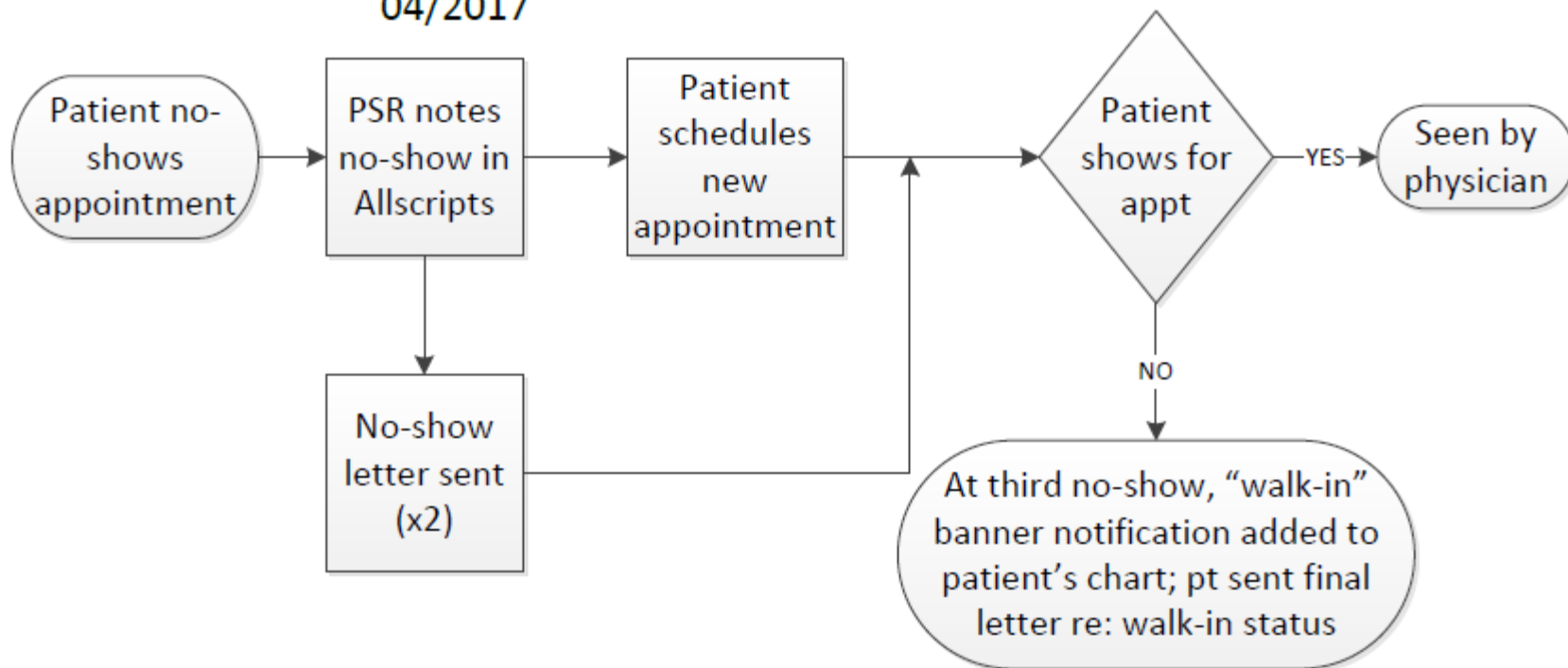
- Clinic leadership revised existing no-show policy during this PDSA cycle
- New no-show policy developed to target frequent no-showers, defined as those who have missed three or more appointments in the last 12 months



PDSA 5—Adherence to no-show policy

New no-show policy:

Internal Medicine No-Show Policy
04/2017





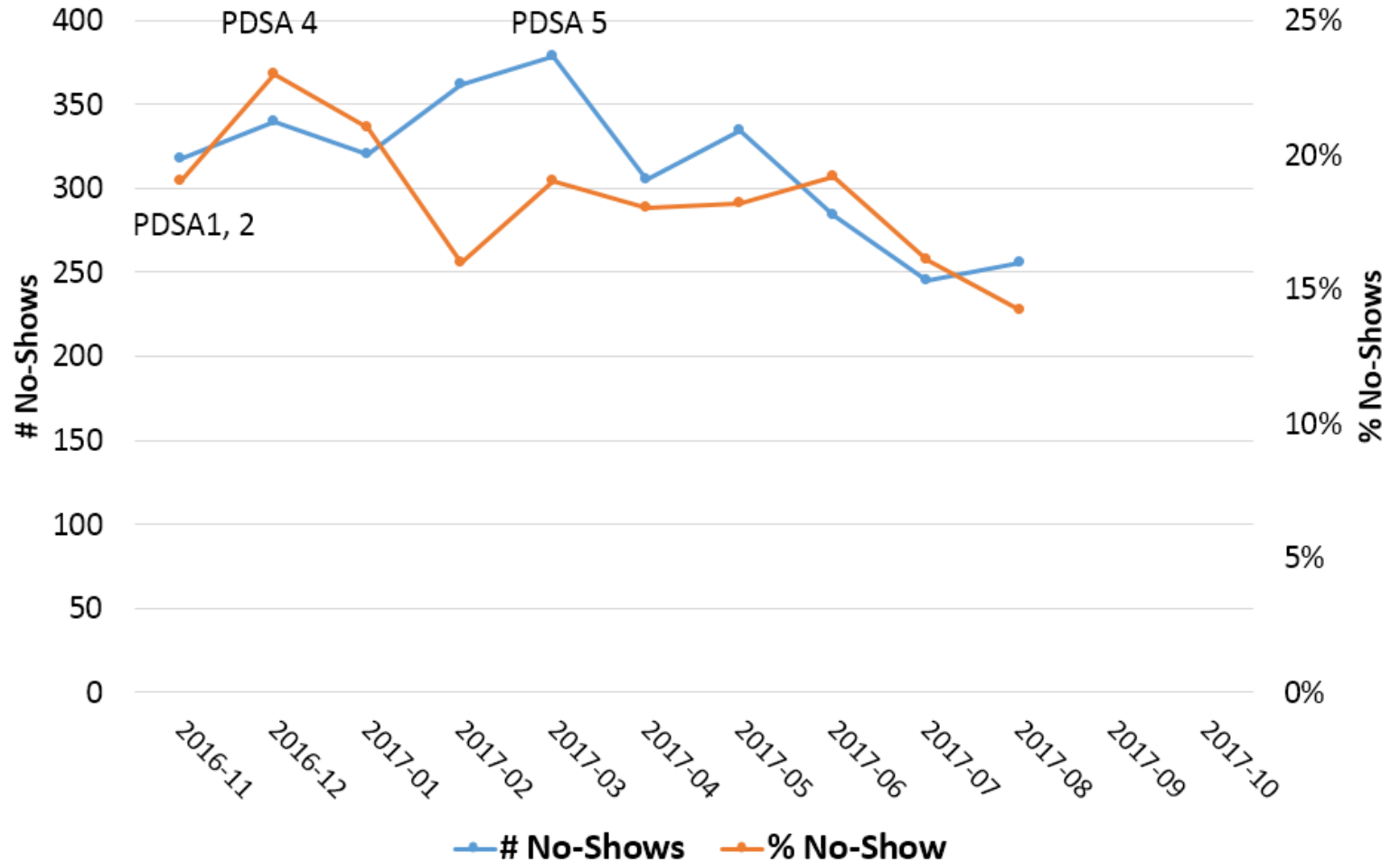
PDSA 5—Adherence to new no-show policy

- IT identified and flagged patients in the EMR and appointment system who met the criteria for “frequent no-shower”
- Patients in this group were no longer scheduled appointments
 - Instead, in accordance with the new policy, they were advised to walk-in to the clinic when needed to be seen by a physician



Results

No Shows





Conclusion

- The no-show rate in our clinic decreased from 22% to 14% in a little over a year
- The decrease is likely attributable to the implementation of the new no-show policy targeting habitual no-showers
- Monthly audits of no-show rate performed to monitor
- New strategies to further improve no-show rate will likely be developed and initiated in the future



Conclusion (cont.)

- Multiple interventions tailored to individual clinic needs are necessary for successful improvement in no-show rate
- Our project involved multiple interventions the results of which proved difficult to measure individually
- Important to involve multiple key stakeholders in project of this magnitude and importance



Acknowledgements

The QI team would like to thank the OU-Physicians leadership staff, care managers, nurses, PSRs, and front desk staff for their participation and assistance in this effort.



QUESTIONS?