

Outpatient clinic reduces no-shows by 34 percent amid 13 percent patient visit increase

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January 29, 2018—The Elmont Teaching Health Center (ETHC), a community-based health center in Long Island, New York, implemented a program to reduce its patient no-shows in the fourth quarter of 2015. It was successful, achieving a 34 percent decrease, compared to the same quarter in 2014.

Physicians and staff at ETHC first surveyed patients in the third quarter of 2015 to understand the primary reasons they did not show up for appointments. What they learned was used to tailor their interventions, according to the peer-reviewed study published in *The Journal of the American Osteopathic Association*.

"The primary reasons patients missed appointments were simply forgetting the appointment, being called in to work, or not being able reach someone at the center or leave a voicemail to cancel," says Peter Guiney, DO, chairman, Department of Family Medicine at Nassau University Medical Center.

No-shows common and costly

Recent studies have found no-show rates in outpatient settings range between 23.1 and 33.6 percent and result in decreased efficiency, lost time, and higher use of resources. Patient no-shows consume 14 percent of anticipated daily revenue for clinics and can result in longer wait times, a lower quality of care, worse health outcomes, and lower patient

satisfaction.

The patient population at ETHC and other federally qualified health centers typically has significant [chronic health conditions](#) that become especially costly when regular treatment is not maintained.

Prior studies have found patients who don't show up for medical appointments tend to be younger, have a lower socioeconomic status, have a history of failed appointments, and are less likely to understand the purpose of their appointment.

A multi-faceted solution to a varied problemDr. Guiney notes that many external factors in the patients' lives contributed to no-show rates; however, ETHC found improvements they could make within their organization. He adds, "We designed an intervention to address every road block that was within our control."

ETHC staff prioritized the following approaches to reduce patient no-shows.

- Patients were educated on the importance of complying with appointments as well as how to properly cancel or reschedule an appointment at virtually every touch-point. This information was included in reminder phone calls one day prior to the scheduled appointment, in multi-lingual signage at the clinic, in one-on-one conversations during appointments, and in phone calls following a no-show.
- Staff prioritized accessibility and incorporated strategies to answer every incoming call. For example, incoming calls rang on all front desk phones, and all front desk staff were encouraged to answer any phone, regardless of whether it was at their assigned space.
- Managers increased awareness of and attention to the no-show

problem by sending a weekly report on no-show rates to all ETHC health care professionals and office staff. This kept the issue top of mind and celebrated successes when no-show rates declined.

- Specialized, flexible approaches were adopted for each medical specialty. For example, behavioral health providers have patients with more unplanned, crisis-oriented care needs. As a result, providers allowed more direct contact with patients and used existing schedule gaps from no-shows to accommodate [patients](#) experiencing a mental [health](#) crisis.

Significant and fast results

The initial implementation period ran from October to December 2015. Subsequent analysis showed no-show rates for that time were only 15.3 percent, down from 18.2 percent in the previous quarter. Ashwin Mehra, Ph.D., lead study author, believes that drop constitutes a success but the more relevant measure comes from looking at the same quarter in 2014, when the no-show rate was 23.4 percent.

"There are seasonal differences in our patient load," says Dr. Mehra. "So, looking at the same quarter in the prior year is the closest 'apples-to-apples' comparison we can make. From that perspective, we achieved a 34 percent relative reduction in no-shows."

Dr. Guiney says ETHC's patient visits were up 13 percent during the study period, which he says underscores the efficacy of the interventions. Researchers hope the findings can serve as a model to help other outpatient clinics reduce their no-show rates.

More information: Ashwin Mehra et al, Reducing Patient No-Shows: An Initiative at an Integrated Care Teaching Health Center, *The Journal of the American Osteopathic Association* (2018). [DOI:](#)

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