D11 Oliwia Opacka

Advisor(s): Ratna Basak

Reduction of no-show rate in the Kings County Pediatric Endocrinology, Nephrology, Gastroenterology and Neurology clinic.

Introduction: Patient continuity of care are important contributors to health outcomes, especially in managing chronic diseases in specialty clinics. Lack of attendance to scheduled appointments leads to longer wait time, waste of the resources, waste of healthcare providers time, and financial costs. We identified subspecialty clinics at Kings County Pediatric Clinic with highest appointments with a no-show status which are pediatric nephrology (32%), gastroenterology (31.6%), endocrinology (30%) and neurology (27%). We aim to reduce the no-show rate to minus 5% from the current percentage.

Methods: Upon literature review we identified possible reasons for missed appointments such as unawareness of the appointment, long lead to appointment time, language barrier, transportation difficulty, and communication errors. Currently patients are receiving phone call reminders one day prior to the visit. We plan to perform four cycles of Plan-Do-Study-Act (PDSA) conducted over a 2 weeks period each. Firstly, we will educate clinic staff about the current practice and how to instruct about MyChart activation. Secondly, we will encourage MyChart activation for all clinic patients including new patients. Thirdly, we will provide reminder calls 3 days prior to the scheduled appointment. Fourth intervention will be to encourage patients to use MyChart to cancel or reschedule appointments if they are unable to attend. Lastly, our fifth intervention will be to provide patients incentives for attended appointments. We will use chart review to assess the results of our interventions.

Results: Given we are currently undergoing the first PDSA cycle, no results have been observed yet. However, by the time of the conference we will complete the first intervention cycle.

Conclusions: Patients may not receive adequate medical care for their needs when they miss their follow-up visits. Actions should be taken to improve continuity of care and efficiency in use of available resources.