No-Show Reduction

Expanding Access through Team Care
Monthly Technical Assistance Webinar #5
December 18, 2014
Agenda

1. Session Overview- Hunter Gatewood
2. No-Show Reduction Presentation & Clinic Input- Coleman Associates
3. Additional pearls of wisdom- Dr. Carolyn Shepherd
4. Action steps & reminders- Susannah Brouwer
Announcement:
Official Launch of Team Guide

Congratulations to the MacColl Center on the official launch of the “Improving Primary Care Team Guide”!

www.improvingprimarycare.org
Program goals

- **Expand access** to primary care services
- **Foster innovation** in the safety net
- **Improve the efficiency and effectiveness** of team care models
## Technical Assistance

<table>
<thead>
<tr>
<th>Two all-day in-person workshops</th>
<th>Site visits to exemplary organizations</th>
<th>As-needed resources</th>
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<tbody>
<tr>
<td>Monthly webinars</td>
<td>Peer learning network</td>
<td>Ongoing measurement and improvement efforts</td>
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Expanding Access through Team Care

The program’s network of clinics

Map locations are very approximate
No-Show Reduction

Coleman Associates
**What is Your Current No-Show Rate?**

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<tr>
<th>Currently doing</th>
<th>Just getting started</th>
<th>Not doing and need help!</th>
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**PREPARE: Minimize delays for In-person visits**

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<tr>
<th>Simple schedule</th>
<th>Minimal no-shows</th>
<th>“Yes” to walk-ins</th>
<th>Active schedule mgmt. during session</th>
<th>Last Quarter:</th>
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Some of you had successes with No-Show Reduction…

**What did you do to dramatically lower your No-Show Rate?**

- Coastal Health Alliance – Jeanne (with Meghan observations)
- Mendocino - Mary Lou, Darcy and or Justin – MA calling day before with clinical experience and able to make last minute adjustments
- Bridget & Misty – three days out, “hard confirmations” through repeat calls
- Other strategies? Indian Health Center of Santa Clara? Livingston? (both at 13%)
For those of you who have not yet met your goal...

What’s standing in your way?

A.) We can’t yet identify the staffing to get started.
B.) We can’t find the time.
C.) We’re focused on other issues right now.
D.) We have bad phone numbers for our patients/so many are unreachable. This confirmation call thing doesn’t work.
E.) Our patients are not engaged in their own healthcare.
F.) We don’t have provider buy-in to reduce the No-Show rate.
G.) Other. Type a response.
As you prepped for this webinar, did you see patterns of high No-Shows?

- Reason for visit/type of visit
- Established vs. New Patients
- Greater than 2-week wait vs. Same Day

Did you use the Go Deep Play?

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**Research the Roots of Your Problem**

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<tr>
<th>#</th>
<th>Code</th>
<th>Description of play</th>
<th>Grade</th>
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<tbody>
<tr>
<td>9</td>
<td>R-1</td>
<td><strong>The Go Deep</strong></td>
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<td>Interview by phone patients that have three or more no-shows. Ask them:</td>
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<td></td>
<td>☰ Can you tell me why you missed your last appointments?</td>
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<td></td>
<td></td>
<td>☰ Is there anything we can do to help you keep your next appointment?</td>
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<td>Report findings back to the team.</td>
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<tr>
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<td></td>
<td>Remember, patients miss appointments for lots of reasons, and many of them are because of things we could do better.</td>
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Why do Patients No-Show? New Patients vs. Established

New Patients No-Show Because:
- We try to schedule them in longer appointment slots to establish care vs. take care of their acute issue. (And those are few and far between.)
- They have no compelling reason to call us to cancel/reschedule. The only relationship they have with us is the wait time on the phone and the conversation with the receptionist.

Solutions:
- If your practice is looking to add new patients, consider having new patient outreach (the Coastal Health example)
- Spend more time communicating who the provider and care team members are -- connecting them to the practice.
- Let them know to expect a confirmation call.
- Suggest they save the practice number in their phone for easier ID.
Established Patients No-Show because:

- They know to expect long cycle times.
- They can’t get through on the phones to cancel or reschedule.
- The appointment time didn’t work for them in the first place.
  (Dr. Shepherd will speak to this later.)
- They don’t know their Patient Care Team and don’t feel a sense of personal accountability.

Solutions:

- Create an cancellation phone-tree option (*Play 16-Where the Rubber meets the Road*)
- Schedule patients at times convenient for them. Even though this is obvious, this will save you oodles of time in the long run.
- Establish greater relationship with the patient care team. The front desk/phones should be part of the team.
The No-Show Reduction PlayBook

A Tool for DPI Teams
The Top 7 Plays to Try

- **The Carrot (Play 22)** - Reward staff team with the greatest No-Show reduction. Choose carrots that are both fun and meaningful.

- **Shoot For the Moon (Play 3)** – set the bar high and keep pushing the No-Show rate goal.

- **The Marquee (Play 5)** – post results in a public area.

- **The New Script (Play 12)** – keep revisiting the script to make sure it’s getting what you need.

- **Variety is the Spice of Life (Play 13)** – experiment with what time of day you make confirmation calls.

- **Pack your Parachute (Play 15)** – Make sure calls are done by someone who cares if the patients show up for their appointments.

- **Just Do It Play (Play 6)** Calculate the No-Show rate as the day unfolds… You’ll see the impact on staff as you bring down the No-Show rate.
### Clinic Data

<table>
<thead>
<tr>
<th>Nejra</th>
<th>Tally</th>
<th>Shaw</th>
<th>DeLeo</th>
<th>Kwiatkowski</th>
<th>Liang</th>
<th>Uppery</th>
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<tbody>
<tr>
<td>No Show</td>
<td>3.5</td>
<td>12.8</td>
<td>0</td>
<td>7.5</td>
<td>7.6</td>
<td>12</td>
</tr>
<tr>
<td>Capacity</td>
<td>108</td>
<td>84.8</td>
<td>105</td>
<td>96</td>
<td>91.3</td>
<td>107</td>
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<tr>
<td>Productivity</td>
<td>4.5</td>
<td>3</td>
<td>4.9</td>
<td>3.4</td>
<td>3.0</td>
<td>4.1</td>
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**Clinic:** 6.64/No Show, 4 26 Productivity
98.1% Capacity

**Week of:** 8/5
Change the Culture…

- Remember: the first step is to create dissatisfaction with No-Shows

- The biggest challenge is to make the leap from “we want No-Show’s” to “our clinic and our patients suffer when we have high No-Shows.”

- Use the data to connect the dots for providers and staff

Beauty is in the Eye of the Beholder (Play 22)  
Remind yourselves why you’re here. Keep a patient-centered attitude at the heart of all work.
Additional Pearls of Wisdom

Dr. Carolyn Shepherd
Lessons Learned: Same Day No-shows

- Established patients, supply≈demand
- Encouraged to take an appt. slot
  - Pressure to fill schedule
  - Patient wants to accommodate clinic
  - Patients in slots they don’t want
- Follow no-show rates for same-day appts
  - Appointments booked today for today
- Create demand by expanding panels
  - Don’t book patients into slots they don’t want

Carolyn Shepherd, M.D.
Leibig Shepherd
Next Steps & Reminders

Complete list of events and reminders on program page: www.expandingaccess.wikidot.com

Upcoming Events

- Next monthly webinar- **Jan 15, 12-1 pm**
- In-Person Workshop #2- **Noon Feb 18- Noon Feb 19**, Preservation Park, Oakland- *Invitation coming soon*
- Monthly “Roundtable Calls” starting on **Feb 5, 12-1 pm**- *Details coming in January*

Notes & Reminders

- Sign up for coaching options online- sites can participate in multiple options
  - Internal facilitator webinar scheduled for **Jan 27, 2015, 10-11 am**. Facilitator nominations must be submitted using the coaching request form by **Wed, Dec 24**.
- Next quarterly reporting due **Jan 30**
- Keep on keepin’ on … **and happy holidays!**