

IMPROVING ATTENDANCE: A SIMPLE APPROACH!

Hypothesis / aims of study

The financial cost of missed appointments in the NHS has been estimated at £360 million per year¹ most of this accounted for by non-attendance in hospital out-patient clinics. Service barriers and administrative errors are common but are often overlooked in the absence of feedback from patients.

The aim of this audit was to improve attendance at our bladder retraining classes. We focused upon re-writing our out-patient appointment letter.

Study design, materials and methods

Attendance at our bladder retraining classes was audited for one year. Attendance rate was approximately 29%. Our bladder retraining letter was very similar to the pelvic floor muscle physiotherapy letter. Therefore, patients presumed they were getting double appointments. The letter provided excessive information on how to cancel the appointment rather than providing the information about the class. We simply reworded the letter in a patient-friendly manner that was conducive to the socio-economic and educational status of our clients. Then we re-audited our service over a three month period.

Results

70 out of 108 patients attended the class, improving our attendance rate to 65%. With an estimated cost of £99 per patient per class the financial gain of increasing our attendance rate was £1283 month.

Interpretation of results

By inviting patient's to provide feedback on the services that we provide enables them to feel more involved in their care and valued for their opinions on the service that we can deliver. It also ensures that the views and perceptions of our patient population are considered to ensure our service is accessible, appropriate and designed to meet their needs.

Concluding message

It is important not to overlook simple measures when trying to improve quality of care, recognising that patient information should be tailored to meet the specific needs of the patient population. By changing patient's perception about the value of bladder retraining we improve the use of our resources, and reduce waiting lists.

References

1. Reducing nonattendance at outpatient clinics. Journal of the Royal Society of Medicine, (1992) 92, 114-18

<i>Specify source of funding or grant</i>	No grant or funding was necessary as it was an audit as part of our service delivery
<i>Is this a clinical trial?</i>	No
<i>What were the subjects in the study?</i>	HUMAN
<i>Was this study approved by an ethics committee?</i>	No
<i>This study did not require ethics committee approval because</i>	Ethical approval was not required as this is an audit presentation
<i>Was the Declaration of Helsinki followed?</i>	Yes
<i>Was informed consent obtained from the patients?</i>	Yes