Improving Sick Visit Clinic Access at ECU Health Physicians
Adult and Pediatric Health Care

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BACKGROUND
- 79% of Adult and Pediatric Health Care (APHC) patient requests for non-emergent acute or sick care were unable to be scheduled within 1 week.
- Patients waited weeks for visits or opted to seek emergency or urgent care for non-urgent concerns.
- The clinic had a no-show rate of over 17%.
- Barriers included staff turnover, lack of available appointments, patient and staff education gaps, and a high demand for services with high no-show rates.

PROJECT AIM
- **Global Aim**: To improve clinic access for patients requesting sick care at APHC.
- **Specific Aim**: By August 2023, 40% of all ECU Health APHC calls for sick and acute care visits will be scheduled within one week.

PROJECT DESIGN/STRATEGY
- **Location**: ECU Health APHC
- **Length**: October 2022 – November 2023
- **Stakeholders**: Faculty, advanced practice providers (APPs), nurses, medical and nursing assistants, patient access services (PAS) staff
- **Framework**: Plan-Do-Study-Act (PDSA)
- **Primary Outcome Measure**: Percentage of patients scheduled within one week
- **Secondary Outcome Measure**: No-show rate & completed visits

CHANGES MADE (PDSA CYCLES)

**Plan**
- Fishbone analysis identified barriers including patient/staff education gaps, and high patient demand with high no-show rates
- Project team brainstormed methods including updated workflows and patient/staff education related to clinic no-show and cancellation policies, procedures, and new workflows

**Do**
- Reinforce policies with patients
- No-show education for patients, reminder calls, visual aids

**Act**
- Cycle 1
  - PAS staff workflow updates
  - Feedback from clinical & admin leaders
  - Reinforce need to mark "no-show" patients as no-shows
  - Begin enforcing "provider book only" slots
- Cycle 2
  - Reinforce policies and workflows with PAS and nursing staff
  - Develop new physician template with reserved acute slots

**Study**
- Cycle 1
  - Unreliable automated reminder call system
  - Recognize need for more staff engagement
  - Analyzed clinic utilization, no-show data
- Cycle 2
  - Improved appointment confirmation and documentation
  - Improved nurse triage capabilities due to new PAS workflows
  - Analyzed clinic utilization, no-show, and patient call data

RESULTS

ECU Health Physicians Adult and Pediatric Health Care Clinic Access

- **New PA Started**

**OUTCOMES**
- By August 2023, 100% of patients requesting acute or sick care at APHC were able to be scheduled with a provider within 1 week
- 20% reduction in no-show rate and 33% increase in appointment utilization

LESSONS LEARNED & CHALLENGES
- APPs are valuable in an outpatient setting to help off-load urgent and acute care patient needs.
- Policy education at every point of contact is a simple way to reduce the no-show rate.
- "Urgent Care" template slots may improve outcome measure tracking.
- Increased clinic PAS staff is needed to sustain pre-appointment calls.

NEXT STEPS
- Ongoing improvements to education and engagement of patients ahead of appointment times.
- Improved data collection to confirm and maintain sustainability of recent interventions.

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