

Reducing No-Show Appointments at a Free Clinic by Providing Free Transportation



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Background and Problem

- No-shows are an international issue (Alawadhi et al., 2021).
- No-shows increase emergency room visits,
- Little use of public transportation to free clinic at site (Pinellas Suncoast Transit Authority [PSTA], 2022).
- Transportation is a top reason for missed clinic appointments.
- At clinic 20% of no-show appointments are due to lack of transportation (Clearwater Free Clinic [CFC], 2020).
- No-shows increase propensity to continued illness.
- Public buses have drawbacks for disadvantaged and elderly residents.

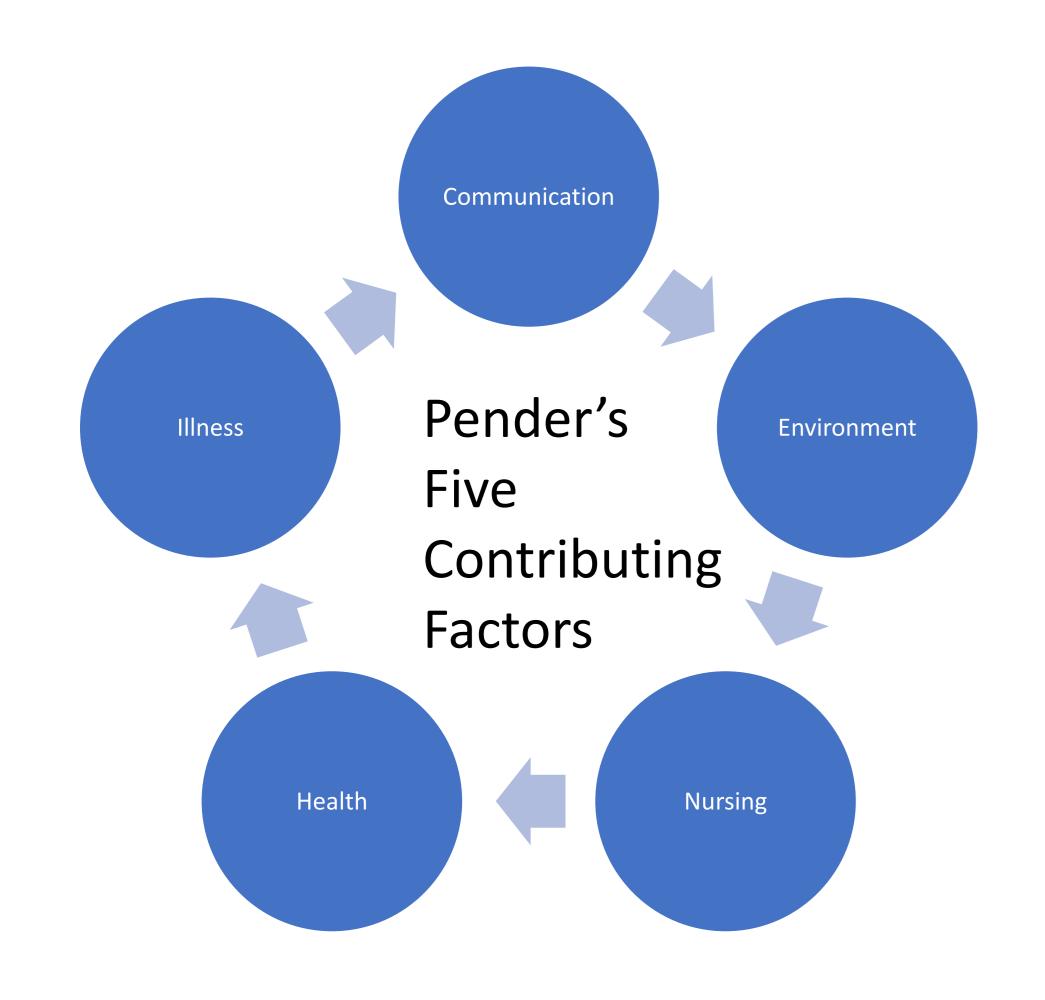
Question Guiding Inquiry and Purpose Statement

For transportation-challenged patients ages 60 to 65 at the free clinic, what is the impact of providing transportation for 3 months on the rate of no-show appointments?

The purpose of this research was to determine if offering and providing free transportation would decrease the number of no-shows, no-call, missed appointments, and same-day canceled appointments for the 60–65-year-old population served by the free clinic.

Theoretical Framework

- Pender's Health Promotion Model (HPM)
- Considers the behavior of the patient/client
- Individual experiences of the patient, comprehension, and attitudes
- Promote health and wellness choices (Cardoso et al., 2022)



Methods

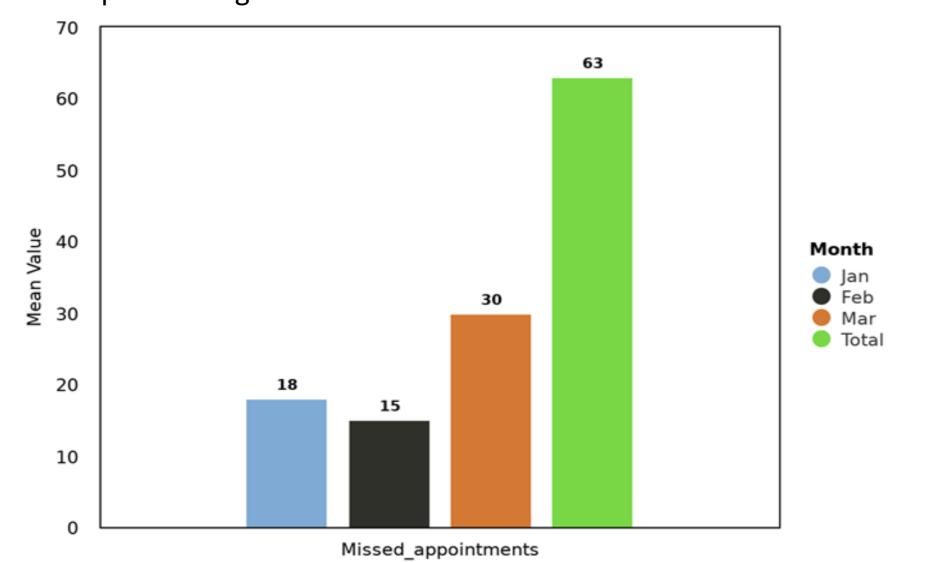
- Evidenced-based project; retrospective study with quantitative methodology.
- Plan-Do-Study-Act method used for this study.
- Convenience sample of all patients meeting inclusion criteria with scheduled appointments during the implementation timeframe: January, February, March.
- Staff education of patients on importance of keeping appointments.
- Calculation of patients' missed appointments pre- and postintervention of provision of transportation for clinic appointments over 3 months.

• Two proportions z-test used to determine number and possible significance of the differences in attendance rates before and after intervention.

Number of Missed Appointments per Month and Total

691

February (15)



Results

• Two proportions z-test was conducted for January (preimplementation) no-shows and February-March (postimplementation no-show.

6.5%

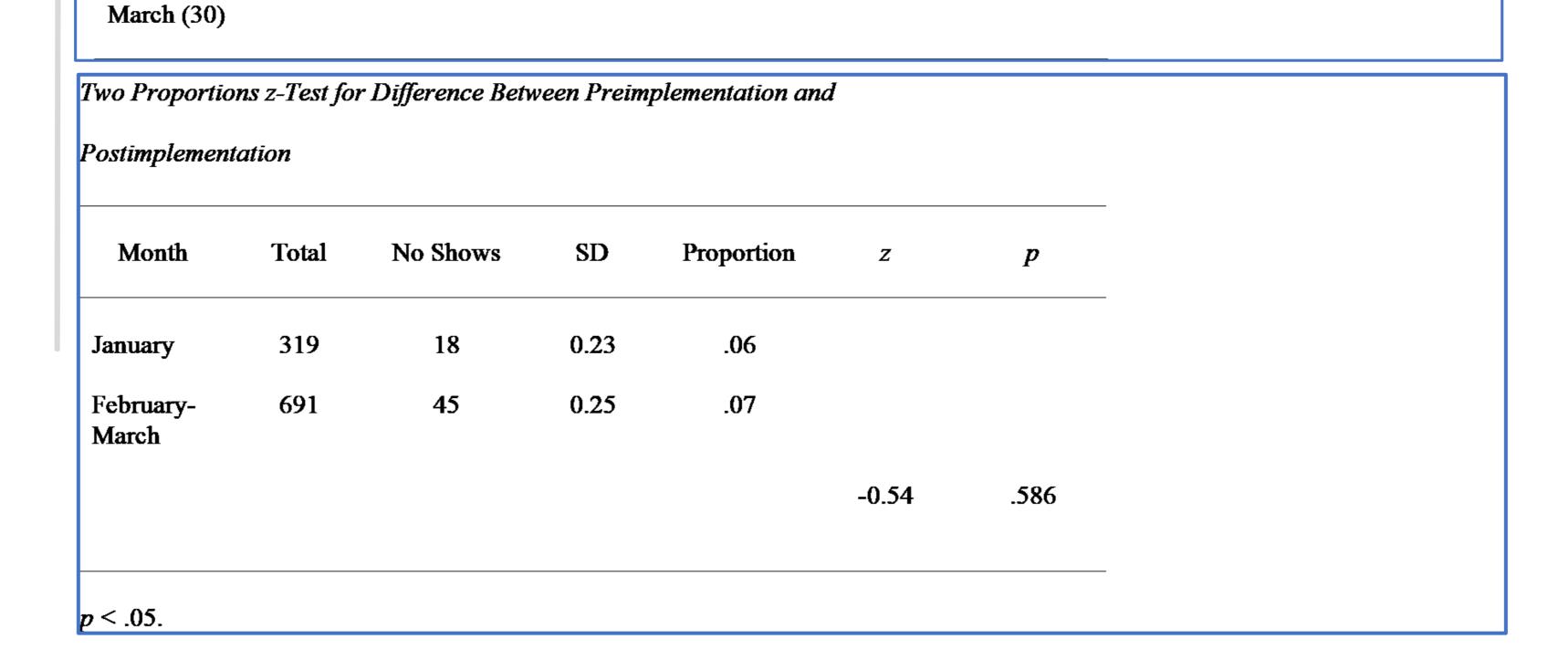
Month Total Percentage of No Shows to Appointments No Shows Total Appointments

No Shows Total Appointments

January 319 18 5.6%

• No significant difference between the preimplementation and postimplementation no-shows, (p = .586)

45



Discussion & Conclusions

- Strengths
- Required no funding
- Minimal burden to staff
- Initiated by patient
- Patient autonomy and accountability
- Limitations
- Patient autonomy and accountability
- Limited age range (60-65)
- Other variables affecting no-shows
- Pre-COVID information
- Use of transportation is unknown
- Lack of adequate transportation could still be an issue for this population.
- Large part of the clinic population was not provided with free transportation
- Further research is called for with:
- more extensive patient education
- more tracking of no-shows
- more availability of free transportation for clinic patients



Acknowledgements

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References

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