

5.5 PDSA – Reducing Missed Appointments for Management plan reviews

Model For Improvement (MFI)

AIM	1. What are we trying to accomplish?
Reduce missed chronic condition management plan review appointments by 20% in the next 3 month.	
MEASURE(S)	2. How will we know that a change is an improvement?
➤ Reduction in missed chronic condition review appointments (target: 25% reduction over 6 weeks). ➤ Increase in rebooked review appointments. ➤ Increase in patient engagement with digital education materials (e.g., GoShare). ➤ Number of patients with documented personalised care goals.	
CHANGE IDEAS	3. What changes can we make that will result in improvement?
Idea 1	Implement structured follow-up processes (calls, letters) for missed appointments using tracking tools like BP, Pracsoft, or Cubiko.
Idea 2	Assign a nurse or designated team member to track and rebook missed reviews.
Idea 3	Use GoShare or similar platforms to re-engage at-risk patients through videos and resources.
Idea 4	Introduce personalised, patient-centred goals into management planning to boost motivation and follow-up rates.
Next steps:	Each idea may involve multiple short and small PDSA cycles.

Plan-Do-Study-Act (PDSA)

Idea	Plan	Do	Study	Act
1.1	Develop a structured follow-up workflow using BP and Cubiko to identify and act on missed chronic condition reviews. Create standard letter and call templates. Prediction: A consistent follow-up process will reduce missed appointments by at least 20% within 6 weeks.	Trial the process for 4–6 weeks with admin staff using the templates to follow up with patients who missed reviews.	Monitor reduction in missed appointments. Cubiko showed a 25% reduction over 6 weeks. Staff reported more confidence in consistency of follow-up.	Adopt the follow-up process as policy. Train all admin staff. Automate reporting and follow-up tracking in Cubiko or equivalent system.
2.1	Test whether having a nurse or admin staff responsible for tracking missed reviews improves rebooking outcomes. Prediction: Assigning a nurse to manage rebooking will improve review attendance rates compared to ad hoc admin follow-up.	Trial with rotating admin and nursing staff for 4 weeks. Track rebooked patients.	Nurse-led follow-up achieved higher rebooking rates compared to admin-only. Fewer patients were lost to follow-up.	Assign this task permanently to nursing staff, with admin backup. Document responsibilities in staff workflows.
2.2	Use GoShare to send targeted educational videos/resources to patients who have missed reviews or show signs of disengagement. Prediction: Sending GoShare resources will re-engage at least 40% of patients who previously missed their review appointment.	Send GoShare resources to at-risk patients. Monitor engagement using platform analytics.	~45% engagement rate. Patients who interacted with content were more likely to rebook and attend their next appointment.	Expand GoShare use to other cohorts (e.g. mental health, lifestyle conditions). Develop SOPs for using digital resources when disengagement risk is flagged.
3.1	Introduce patient-centred goal-setting (e.g. weight, activity, mental health) during care plan reviews to improve follow-through. Prediction: Patients with documented personal goals will be more likely to attend follow-up reviews and report higher satisfaction.	Implement this with a small cohort of patients during routine reviews. Document goals in the care plan.	Patients with personalised goals showed improved motivation and better follow-up attendance. Positive feedback was noted from nurses..	Incorporate personalised goals into all care plan templates. Use Primary Sense reports to monitor patient progress monthly.