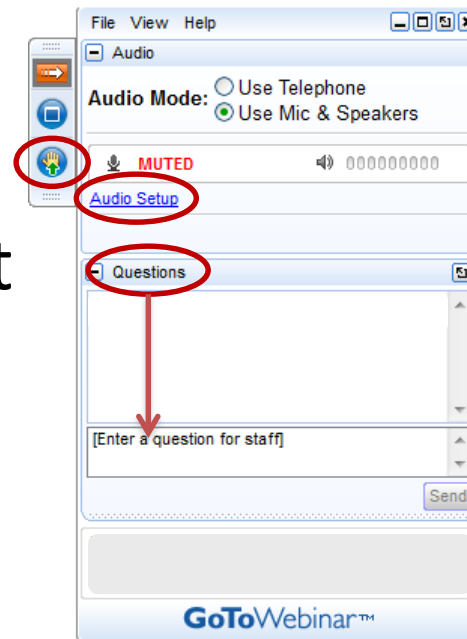


# Best Practices in Appointment Scheduling

Dawn Middleton, VP Performance Management and CQI  
October 11, 2017 [10:00AM – 11:30AM]

# Logistics

- Panel
- Live questions
- Typed questions/chat
- Raise hand
- Tech Difficulties
  - 1-888-259-8414



# IMPORTANT NOTICE:

- This GotoWebinar/GotoMeeting service includes a feature that allows audio and any documents and other materials exchanged or viewed during the session to be recorded.
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# Webinar Objectives

- Describe how the design of an appointment scheduling system impacts efficiency and effectiveness of family planning services
- Identify best practices in the design, implementation and evaluation of appointment scheduling systems
- Strategize ways to plan appointment scheduling to maximize staff productivity and minimize client wait time



Ensuring timely access

# **APPOINTMENT SCHEDULING**

# Impacts...

- Ability to meet program goals
- Health Care Provider Productivity
- Clinic Flow
- Client Cycle Time
- Client Wait Time for Appointment
- Client Outcomes
- Client and Staff Satisfaction
- Fiscal Reimbursement/Balanced Budget

# Appointment Schedule Should...

- Facilitate the steady stream of clients throughout the workday, resulting in
  - Maximum staff productivity
  - Minimum client wait
- Designed to primarily meet the needs of clients served

Planning to Achieve Goals

# **FOUNDATIONS OF EFFECTIVE APPOINTMENT SCHEDULING SYSTEM**



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# Match Supply and Demand

- Supply – Provider's availability
- Demand – Client need for visits

# Grounded in Unduplicated User Goals

- Appointment template should be designed to support achievement of goals associated with the number of visits unduplicated users make annually
- Assumption: User goals are an accurate reflection of anticipated client demand for services within a given service area

# Grounded in Goals - # of Visits

- **EXAMPLE:** Site B Visit Goals:
  - Unduplicated User Goal = 2100 users/year
  - Average Visits/User = 2
  - Projected # of Visits to Meet Goal?

# Poll – Client Visits



- **EXAMPLE:** Site B Visit Goals:
  - Unduplicated User Goal = 2100 users/year
  - Average Visits/User = 2
- What are the projected number of visits clients will make if Site B achieves their user goal?
  - A) 2100 annual visits
  - B) 4200 annual visits
  - C) 3200 annual visits

# Grounded in Goals - # of Visits

- **ANSWER:** Site B Visit Goals:
  - Unduplicated User Goal = 2100 users/year
  - Average Visits/User = 2
  - Projected Required Annual Visits to Meet Goal:
    - 2100 users/year x 2 visits/year = 4200 visits/year

# Goals – Appointment Slots Needed

- Site B – Appointment Slots Needed Annually
  - Unduplicated User Goal: 2100
  - Users make, on average, 2 visits/annually
  - Unduplicated Users will make: 4200 visits annually
- How Many Appointment Slots Will Need to Be Available Annually to meet User Goals?

# Poll – Appointment Slots Annually



- Site B – Appointment Slots Needed Annually
  - Unduplicated User Goal: 2100
  - Users make, on average, 2 visits/annually
  - Unduplicated Users will make: 4200 visits annually
- How Many Appointment Slots Will Need to Be Available Annually to meet User Goals?
  - A) 4200
  - B) 3800
  - C) 5000
  - D) Not enough information

# Goals – Appointment Slots Needed

- Site B – Appointment Slots Needed Annually:
  - Visit Goal: 4200 visits/annually
  - 27% average appointment no show rate
  - $4200 \text{ visits/annually} \times .27 = 1134 \text{ appointments}$
  - $4200 + 1134 = \underline{5,334 \text{ appointments/annually}}$



# Goals – Appointment Slots Needed

- Site B – Appointment Slots Needed Annually:
  - $4200 + 1134 = \underline{5,334}$  appointments/annually
- Site B – Appointment Slots Needed Weekly
  - $5,334 \text{ appointments} / 42 \text{ weeks} = \underline{127}$  appointments/week
- Site B – Appointment Slots Needed Hourly
  - Site B is open 24 hours/week
  - $127 \text{ appts./week} / 24 \text{ hours/week} = \underline{5.3}$  appointments/hour

# Questions?



Appointment Visit and Schedule Framework

# **APPOINTMENT SCHEDULE DEVELOPMENT**



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# Appointment Schedule Design

- Appointment Visit:
  - Single Interval
  - Multiple Interval
- Appointment Schedule Design Frameworks
  - Block Interval
  - Wave Interval
  - Modified Wave
  - Stream
  - Open Access

# Appointment Visit

- **Single Interval:** each visit receives the same amount of time on the schedule regardless of the type of visit
- **Multiple Interval:** different visit types receive different amounts of time on the schedule

# Poll – Visit Intervals



- How many appointment visit “intervals” do your clinic sites use?
  - A) 1 interval
  - B) 2 intervals
  - C) 3 intervals
  - D) >3 intervals

# Chat – Visit Intervals

- For those of you who use 2 or more intervals – why?

# Appointment Schedule Framework

- **Block Interval:** each client gets the same appointment time
- **Wave Interval:** Appointments are double booked during the first portion of the session with no appointments scheduled during the later hours. Often called “front loading”



# Appointment Schedule Framework

- **Modified Wave:** Strategic double-booking, permitting a long and a short visit to be scheduled simultaneously.
- **Stream Interval:** clients given appointments with equal intervals between appointments. Limited double booking

# Poll – Appt. Schedule



- Site C schedules all of their visits at 9:00am and then again at 1:00pm. What type of appointment scheduling framework do they use?
  - A) Modified Wave
  - B) Stream Interval
  - C) Wave Interval
  - D) Block Interval

Design of Appointment Schedule

# **BEST PRACTICES**



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# Best Practices - Design

- Incorporate appointment No Show Rates into appointment template design
- Reduce schedule complexity
  - Extensive triage process to identify right appointment slot has not proven to be effective
- Reduce appointment type variability
  - Standardize appointment type
  - Standardize appointment length
- Reduce scheduling restrictions
  - New clients only on Wednesday and Friday mornings
  - LARC insertions once a month
  - Avoid closing for lunch

# Best Practices - Design

- Templates by provider not service
  - Each provider should have their own template
- Carve outs
  - Leave some appointments open until the day of the clinic session
- Schedule responsive to client demand

# Poll – Carve Outs



- Do any of your sites “carve out” appointment slots on the schedule for same-day appointments?
  - A) YES
  - B) NO
  - C) Not Sure

# Chat – Carve Outs

- How does your agency decide where to place the “carve-out” appointment slots?

Implementation of Appointment Schedule and  
Improving No Show Rates

# **BEST PRACTICES**



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# Poll – Appointment No Show Rate



- What would you say the average appointment no show rate is among your clinic sites?
  - A) Less than 15%
  - B) Between 16% and 25%
  - C) Greater than 25%
  - D) Not Sure

# Best Practices - Implementation

- Limit availability of schedule - don't schedule too far out
- Stop automatically re-scheduling follow-up appointments
- Don't schedule visits that are not clinically required
- Schedule based on client preferences

# Best Practices - Implementation

- Protocols and scripts to encourage clients to call and cancel
- Carve outs
  - Leave some appointments open until the day of the clinic session
- Web-based appointment scheduling systems
- Open Access Scheduling systems

# Client Engagement and No Shows

- Reminder calls
  - Give option for more personal touch
- Reminder texts
  - Options to respond to affirm will be attending appointment or to cancel
  - Options to add appointment to e-calendar
- Informational or fun texts
  - New service, new hours, new provider
  - Birthday
- Marketing patient portals

# Questions?



# CAPACITY AND DEMAND



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# Capacity and Demand

## Capacity

- Number of clinician FTEs
- Clinical hours available to provide services
- Average clinician time per client visit
- Number of exam rooms, equipment
- Other: staff roles and responsibilities, workflow, paperwork, EHR

## Demand

- Client requests for services
- Type of services requested
- Variation by month, day, hour

# Measuring “True” Client Demand

- Track on a daily basis:
  - Number of calls/requests for appointments
  - Number of referred for an appointment
  - Number of walk-ins
  - Follow-up visits booked on the day



# Best Practices – Shape Capacity

- Staff start and end time
- Lunch breaks
- Staggered staff schedules
- Add provider time during “peak” hours
- Re-align staff roles and responsibilities
- Nursing standing orders
- Team-based care models of care
- Staff operate at top of license
- Pre-visit planning or team huddles
- Ensure all needed equipment in every exam room (e.g., “LARC Exam Room Ready”)

# Best Practices – Shape Demand

- Triage
- Fast track, Quick Start
- Revisit or follow-up visit policies
- “Virtual visit” by phone call or email
- Hours of operation

# Performance Measures and Monitoring

# **APPOINTMENT SYSTEMS**



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# Performance Metrics

- Third next available appointment
- Average appointment no show rates
- Office visit cycle time
  - Majority of time spent in clinic should be in face to face contact with a staff member

# Performance Monitoring

- Supply - clinician hours available
- Appointments available
- Appointments booked
- Request for services by type
- Appointment no show rates
- Walk-ins
- By month, day, hour of the day (trends are predictable)

Agency/Site Reflection, Review and CQI

# **APPOINTMENT TEMPLATE**



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<b>PLANNING TO ACHIEVE GOALS</b>	<b>Day of the Week:</b> MON TUES WED THURS FRI SAT				
	<b>Clinic Start Time:</b> _____ <b>and End Time:</b> _____ <b>1<sup>st</sup> Staff Start Time:</b> _____ <b>and Last Staff End Time:</b> _____ <b>Total Hours of Clinic Session:</b> _____ <b>Hours of Clinician Time Available During the Clinic Session:</b> _____				
	<b>Total Number of Visits Needed on This Day to Achieve Unduplicated User Goal:</b> _____				
	<b>Hour of the Day</b>	<b># Appointment Slots Available</b>	<b># Appointments Scheduled</b>	<b># Appointments Scheduled Seen</b>	<b># Walk-ins</b>
8-9am					
9-10am					
10-11am					
11-12pm					
12-1pm					

# Review – Guiding Questions

- **What do you notice about appointment intervals and schedule framework being used?**
  - Single, Multiple Interval?
  - Block, Stream, Wave, Modified Wave, Something else?
  - Carve Outs - When? Why?



# Review – Guiding Questions

- **What do you notice about appointment no show rates?**
  - By day or hour?
  - If no show rates are particularly high during a given hour are there opportunities to insert an appointment slot that can be saved for same-day services?

# Review – Guiding Questions

- **What do you notice about distribution of appointments and visits throughout the day?**
  - When is the first and last appointment time? How does it correspond to when the site opens and closes?
  - How many clients are scheduled or being seen in the last 2 hours of the day, last hour of the day, or the first hour of the day? Is this time being maximized?
  - Are there “clumps” of client visits during specific time periods?
  - Are there opportunities to distribute appointment slots more evenly throughout the day?

# Review – Guiding Questions

- What best practices could be incorporated into the design and implementation of appointment schedule moving forward to increase access?

“Each System is designed  
perfectly to get the results that  
it gets.”

W. Edward Deming

# Questions?



# Thank you!

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