

High DNAs are seen across NWL

Some North West London Group Consultation providers report DNA rates of **50 – 60%**

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Here's what
PCNs are saying
about DNAs so
far:

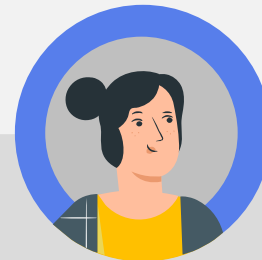
*Only 7 patients attended.
The problem was patient
mistrust and hesitancy
at initial point of contact
from admin team and
during VGC itself.*

A PCN in Brent



*We had 12 booked
patients and only 3
came. This is the most
difficult part. We tried
calling and all sorts, but
that didn't help.*

A PCN in Ealing



*We invited 12 people. 1-2
turned up.*

*We are worried about
turnout.*

A PCN in Hillingdon



One PCN has done an in-depth review of DNAs

Identifying DNAs

A PCN held a session with 19 patients invited and confirmed. However, only 9 attended the entire session and 1 dropped off due to technical issues. The Project Manager carried out a deep dive exercise to understand why patients did not attend and any barriers preventing patients from attending. This was done by ringing the patients that did not attend to find out their reasons and if they would be interested in attending a future session. A high level analysis was carried out and the outcome/reason listed below.

They have been grouped into themes.

- Two patients **woke up late**
- Two patients had to **work**
- **Language barrier** was an issue for three patients and would need a translator
- One patient could only do evenings
- Approximately six patients had **technical issues** and gave up rather than ringing the K&W dedicated helpline that was included on their AccuRx text message
- Two patients had committed to another appointment
- The rest of the patients were not contactable

Potential solutions identified

- Holding some sessions later than 10am, and offering evening sessions, especially to those who work full time (office hours)
- Making calls during sessions to rectify IT issues
- Holding sessions in different spoken languages or having a translator on hand

What PCNs are doing to improve DNA rates

Next session, we will look at your individual metrics to prompt attendance.

A PCN in Hillingdon



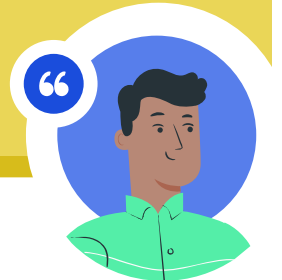
During first 5 minutes, the facilitator called the patients and then they joined. We got 5 - 6 after that.

A PCN in Hillingdon



Attendance was fine once we overbooked by 60%.

A PCN in Hillingdon



Trying first face-to-face session today to see if that increases engagement.

A PCN in Hillingdon



Might need to offer weekend and out of office hours slots

A PCN in Hounslow



Mitigation routes of DNAs in Group Consultations (1/2)

Issue: patients do not attend due to language barriers



- Consider holding sessions for certain groups of patients in their spoken language.
- Consider having a translator present during the GC session.
- Consider translating important Fresh Start documents in their spoken language.

Issue: patients do not attend due to schedule conflict



- Consider holding sessions in the evenings for patients that are working professionals.
- Consider holding sessions on the weekends for patients that are working professionals.
- Keep in mind religious or cultural time commitments for certain groups of patients.


Issue: patients do not attend due to technical difficulties



- Consider having an IT support helpline that patients can contact.
- Provide detailed instructions on how to join GC virtually in appointment reminder.
- Consider having IT support contact patients on the day of GC to provide support.


Mitigation routes of DNAs in Group Consultations (2/2)

Issue: patients do not attend as they forget about appointment




- Send SMS or call patient to remind them of appointment, some do not check emails.
- Use triage system to filter out patients who habitually make appointments when there is no clinical need.

Issue: patients do not attend as they do not consider GC as important



- Ensure that it is explicitly stated that the GC is a regular medical appointment, and not an optional educational session.
- Consider hosting the first GC face-to-face as patients are more likely to treat it as a regular medical appointment.

Issue: patients do not want to share personal medical information in group setting



- Consider using Discussion Board only for those patients who are willing to share.
- Consider using remainder of Discussion Board time to share tips and reminders instead.
- Consider allowing these patients to only speak with the clinician during 1-2-1 time of the GC.
- Reassure patients that all information shared during GC will remain confidential.