



A Patient Survey to Explore Why Patients 'Did Not Attend' in a Large Inner-city HIV Service

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Background

'Did Not Attends' (DNAs) are multifaceted and impacts both patient care and health care resources.

Recent data from the clinic has shown a high DNA rate amongst our clinic cohort ~20%.

We conducted this survey to explore the reasons for having DNAs and factors to improve patient attendance. .

Objectives

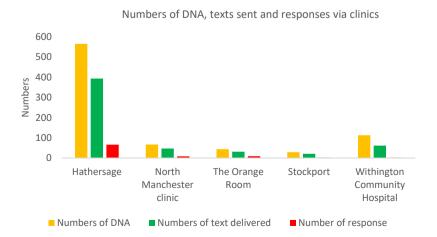
- To identify the reasons for missing appointments among the patients living with HIV.
- To get the feedbacks from the patients regarding current appointment management process.

Methods

- An anonymised survey was texted to the patients who DNA their appointments between 01/03/24 to 31/05/24 across five HIV clinics under our HIV service in Manchester. The text link was sent only once and did not repeat on subsequent DNAs.
- Exclusion criteria are patients who do not use English as first language and who do not have eligible mobile phone number.
- The results were collected via Microsoft Form and reviewed.

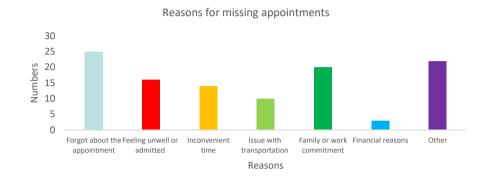
Results

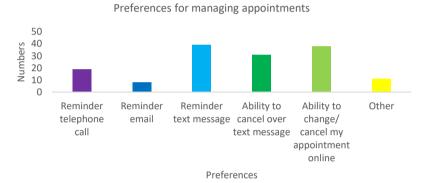
- During the review period, 2,938 appointments were booked with an overall DNAs rate of 27.8% (818/2938).
- The survey was sent to 594 patients after applying exclusion criteria and 93% (553/594) texts were delivered. The rest showed failed or undelivered or sending.
- 90 patients responded to the survey resulting in a 16% response rate.



Among the responders, 29% (26/90) were signed up to the Personal Health Record (PHR) where they can check their appointments, however, 62% (56/90) were not aware of PHR.

52% (47/90) tried to contact the clinics to cancel their appointments but the appointments did not get cancelled. 80% (72/90) got reminder text message.







Discussion

- The low response rate (target 25%) may impact the interpretation of the information available in this survey.
- Patients should be advised to use the PHR app to check their appointments and to contact to the clinic if they cannot attend, but the digital illiteracy can become a barrier for using it because most of our patients are living in most deprived areas.

Conclusions

- The survey demonstrates that patients prefer to manage their appointments according to their work/life/health conditions.
- A user-friendly digital platform for appointment management is imperative to improve DNAs rate in the future, whilst ensuring we continue to meet the needs of more vulnerable patients, and in whom English is not their first language.
- A further review of DNAs is planned once improvements in PHR have been deployed.