### Missed Appointments: Characteristics and determinants of families missing appointments at a pediatric rehabilitation centre and improving their access to care

#### **Project Summary**

Centre for Leadership in Child Development

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### Holland Bloorview

Kids Rehabilitation Hospital

## Bloorview RESEARCH INSTITUTE

#### SHARING OUR WORK

- Developed key findings summary and infographic
- Knowledge exchange with clinicians and managers in the Child Development Program
- Bloorview Research Institute Symposium presentation
- HB Family Advisory Committee presentation
- OACRS conference

#### WHAT WAS THIS STUDY ABOUT?

Missed health care appointments have a significant impact on families and health services. Approximately 15% of annual ambulatory care appointments are missed; the majority (74%) being 'no-show' or no notification events. In this study, we aimed to gain insight from parents about their reasons and experiences in missing appointments at Holland Bloorview (HB).

#### WHAT DID WE DO?

- Reviewed the literature and identified a lack of research on the reasons for missed appointments in childhood disability ambulatory care services
- Interviewed 10 parents who missed appointments in the neuromotor ambulatory care services at HB
- Parents shared (i) their experiences, (ii) what made it difficult for them to attend appointments, and (iii) made suggestions on how to improve engagement and access to care and services

# IMPACT FOR CLIENTS, FAMILIES AND CLINICAL PRACTICE

Understanding parents' experiences, their reasons and the barriers they experience in attending appointments will help us to partner in improving client and family engagement and care experiences. We anticipate that service providers will use the study findings and include parent suggestions to improve access, clinical practices and ambulatory care service design and delivery.

#### WHAT DID WE LEARN?

- Parents described competing priorities as a key overarching reason for missed appointments. Parents shared several reasons that included:
  - difficulty with transportation and traffic
  - o bad weather or road conditions, especially when the child was medically fragile
  - competing priorities with their child's school schedule, other appointments and/or parent employment
  - o fatigue or illness in the child or parent; child as medically fragile
  - o low levels of support from family and friends; feeling overwhelmed and alone
  - appointment logistics e.g., rebooking appointments was challenging, missing the appointment was easier, limited daytime hours, limited flexibility, few appointment times, and inconsistent appointment reminders across HB services
  - $\circ$   $\,$  uncertainty about the purpose of the appointment and what to expect
  - interactions with health care providers after they had missed appointments led to feelings of 'made me feel bad for missing', frustrated, anxious and judged

#### **NEXT STEPS?**

Moving forward into Phase II, we will share the findings of Phase I at an organizational and provincial level and create partnerships with the Ontario Association of Children's Rehabilitation Services (OACRS), other Child Treatment Centres (CTCs) and CanChild. We will host a workshop that will bring these partners and families together to co-create recommendations to strengthen engagement and access to ambulatory care services. After completion of the workshop, we will focus our efforts on knowledge translation, intervention development and publication.

#### TO LEARN MORE ABOUT THIS STUDY, PLEASE CONTACT:

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#### WHO ARE WE?

**Laurie Liscumb:** Ambulatory Care Nurse, Child Development Program (CDP)

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