PROSPERO International prospective register of systematic reviews

Interventions to prevent non-attendance in outpatient clinics: a systematic review

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Review question(s)

What kinds of interventions to minimize non-attendance – for example charging a fine, reminder letter or telephone reminder – at outpatient clinics have been studied and what are the effects of the interventions?

What are the demographic characteristics of non-attending patients at outpatient clinics?

Are the interventions cost-effective?

How do patients acknowledge or experience the risk of receiving a fee for non-attendance in outpatient clinics?

Searches

No restrictions will be place on publication period. We will search for studies in English, Danish, Swedish and Norwegian.

The following sources are to be searched:

Electronic sources:

1. Cochrane Central Register of Controlled Trials (CENTRAL)

2. MEDLINE

3. PsycINFO

4. PubMed

5. EconLit

6. CRD-databases

7. EMBASE

8. CINAHL

9. Internet/Google

Other sources

- Reference lists of included studies

- Reference lists of reviews identified

- Correspondence with experts

Full search strategy will be available on request

Types of study to be included

Randomised Controlled Trials (RCT).

Cluster-randomised trails.

Case-control studies.

Cohort studies.

Qualitative reports.

Case studies/series.

Before and after studies.

Quasi-randomised trials.

Reviews

Meta-analysis

Exclusion criteria: None.

Condition or domain being studied

The possible effects from different strategies to prevent non-attendance in outpatient's clinics. To our knowledge, it is unknown if any strategy results in less non-attendance and whether the strategies are cost-effective. Furthermore, it is unknown if any demographic variables, i.e. age, sex, unemployed vs. employed etc., could characterize patients not showing up for their appointments in outpatient clinics. Such knowledge is of importance since it enables informed decision on using or not using fees on non-attendees. Furthermore, the knowledge enables focused interventions to prevent non-attendance.

Participants/ population

Inclusion criteria: Patients with appointments for treatment in outpatient's clinics.

Exclusion criteria: None.

Intervention(s), exposure(s)

Inclusion criteria:

Any intervention with the explicit intention to increase appointment attendance or reduce appointment non-attendance.

All research on characteristics of non-attendee.

All research on patient´ experience of fees for non-attendance.

Exclusion criteria: None

Comparator(s)/ control

Inclusion criteria: Routine procedure or any active comparator.

Exclusion criteria: None.

Context

Outpatient clinics

Dentists

Hospitals

Outcome(s)

Primary outcomes

Rates of attendance/non-attendance

Synthesis of possible strategies to prevent non-attendance

Cost of non-attendance

Cost-effectiviness of interventions to minimize non-attendance

Demographic characteristics of non-attending patients

Secondary outcomes

Patients experiences with fees for non-attendance

Data extraction, (selection and coding)

Selection of studies:

Titles and abstracts that are identified through electronic searching will be screened by the review team to identify if they are potentially relevant for this review. Two reviewers will independently screen the titles and abstracts and mark them as “not relevant” or “potential”. In case of any disagreements, the study will be marked as “potential”.

Full reports will thereafter be obtained for all of the studies marked as potentially relevant. After this, two reviewers will independently apply the inclusion and exclusion criteria to the obtained studies. The reviewers will discuss any disagreements and, if no agreement can be reached, a third researcher will decide if the study is to be included.

Data extraction and management:

The following information will be extracted from the included studies: study setting, study population and participant demographics, details of intervention and control conditions, outcomes; rate of non-attendance, various strategies to prevent non-attendance, cost-effectiveness and patients experiences with fees for non-attendance and information for quality assessment.

If possible a meta-analysis will be conducted for the outcome rates of non-attendance. In order to do so, total number of patients and total number of patient’s non-attending will be extracted from the studies. If necessary, main authors will be contacted for further information. Analysis of the data will be undertaken through the Review Manager 5.0 (RevMan), a software package developed by the Cochrane Collaboration.

Risk of bias (quality) assessment

The assessment of the risk of bias will be evaluated by two review authors, independently assessing the studies using the Critical Appraisal Skills Programme (CASP) checklists. For each individual included study a CASP checklists will be chosen based on the study design in the current study. Discrepancies between the review authors will be resolved through discussion, and if no consensus can be agreed, a third author will decide the outcome.

Strategy for data synthesis

A narrative synthesis will be provided to summarize the results from the included studies. If appropriate, results will be presented in tables and a discussion of the results and trends from the included studies will be conducted.

Assessment of heterogeneity:

If a meta-analysis is undertaken heterogeneity will be explored and presented statistically through the Chi-squared test and the I-squared statistics with $P < 0.1$ being statistically significant. A random effects model will be used in

order to reduce bias from the potential systematic errors of the included studies.

Analysis of subgroups or subsets
None planned

Dissemination plans
The completed review will be submitted to a leading journal in the field.

A free of charge, report in Danish including analysis of a trial on fees for non-attendees in Denmark will be accessible online on KORAs website.

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02 February 2015

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03 August 2015

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Danish Regions

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Conflicts of interest
None known

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English, Danish

Country
Denmark

Subject index terms status
Subject indexing assigned by CRD

Subject index terms
Humans; Ambulatory Care Facilities; Appointments and Schedules; Patient Compliance

Stage of review
Ongoing

Date of registration in PROSPERO
13 January 2015

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Stage of review at time of this submission	Started	Completed
Preliminary searches	No	No
Piloting of the study selection process	No	No
Formal screening of search results against eligibility criteria	No	No
Data extraction	No	No
Risk of bias (quality) assessment	No	No
Data analysis	No	No