**Project: Education to reduce late cancellations on the CCTS Clinical Services Core**

**Team Members:**
Rob Singleton, CSC Director; Deanna Palma, CSC Nurse Manager; Cynthia Jones, CSC IT Specialist; Michelle Allred, CSC Nurse Laurene Vickers, CSC Nurse Assistant Manager; Therese Berry, Research Coordinator; Spencer Daines, Dental Clinic Manager; Bryan Hepworth, Lean Intern; Sadie Gabler, CCTS Participant Ombudsman

<table>
<thead>
<tr>
<th>Start Date: Nov 11, 2013</th>
<th>Completion Date: Dec 12, 2013</th>
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<tr>
<td>Faculty Unit/Department: Center for Clinical &amp; Translational Sciences</td>
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**V. Countermeasures**
- Behavioral modification targeting high cancellation study teams
- Improve CSC scheduling efficiency, ease of access
  - Compensate for late cancellations
  - Targeted overbooking for CSC beds
  - “late schedule” list of flexible participants
  - Priority scheduling to study teams able to fill late cancellations

**VI. Implementation**

**Implemented:**
Educational interview targeting high cancellation study teams
- Financial impact education
- SOPs: reminders/phone contact
- CSCTS resources
Study initiation good practice education
CCTS website, newsletter topic
Public recognition for good performance

**VII. Follow Up**
- Compare protocol cancellation rates at 3, 6 & 12 months

**$$ Impact:**
Achieving goal will:
- Capture an estimated $130,000 in lost CSC nursing effort per year
- Make available 1070 hours of CSC bed space

### I. Problem Situation
Late Cancellations and No Shows exceed 20% of scheduled visits
- Loss, underutilization of committed nursing resources
- Reduced efficiency
- Increased per-visit nursing costs
- Additional effort to reschedule for CCTS and study team

### II. Current Situation
- Consistent monthly cancellation rate across seasons, months
- No strong correlation between protocol acuity and late cancellation rate
- Participants in legacy protocols are more likely to cancel

### III. Target/Goal
Reduce CSC unutilized nursing time and bed space by 50%

### IV. Root Cause Analysis

<table>
<thead>
<tr>
<th>Participant factors</th>
<th>Study team factors</th>
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<tbody>
<tr>
<td>Disease state</td>
<td>Reminder calling</td>
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<tr>
<td>Immobility</td>
<td>Standardized scheduling process</td>
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<td>Transportation Issues</td>
<td>Reliable point of contact for</td>
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<tr>
<td>Socioeconomic Status</td>
<td>Participant with study team</td>
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