

Appointment Reminders

Developed February 2024 with input from members of the NEO QI Hub Patient Advisory Council to help health care teams provide more patient-centered diabetes care.

Appointment Reminders and Scheduling Communication

Try This:

- Sending appointment reminders at least 1 week and 1 day before the appointment
- Treating reminders like a “personal assistant” and part of modern bedside manner
- Sending a scheduling confirmation after an appointment is booked
- Delivering reminders during business hours only
- Offering reminders across multiple channels: text message, phone call or voicemail, email, patient portal notification, printed reminder, mailed letter



Instead of This:

- Assuming one reminder is enough
- Sending reminders late at night or early in the morning
- Relying on a single communication method for all patients



Personalization and Patient Preferences

Try This:

- Asking patients how they prefer to receive reminders
- Recognizing that reminder preferences vary by age and comfort with technology
- Allowing patients to tailor reminder frequency and format
- Offering patients the option to designate a caregiver to receive reminders



Instead of This:

- Assuming all patients prefer to communicate via text messages or patient portal notifications
- Ignoring caregiver involvement when it would support attendance



Patient Portal Access and Support

Try This:

- Asking patients if they know how to use the patient portal:
 - On pre-visit forms
 - At check-in
 - During visits
- Providing education and support if patients are unfamiliar
- Confirming that patient portal notifications are enabled
- Designating a patient portal navigator for on-site help
- Offering face-to-face, one-on-one training in addition to online materials
- Making sure patients know about the patient portal helpline



Instead of This:

- Assuming patients understand or use patient portal
- Relying on online instructions alone
- Leaving patients to troubleshoot technology on their own



Missed Appointments and Follow-Up

Try This:

- Proactively contacting patients who miss appointments using multiple channels
- Having a staff member call patients to reschedule
- Framing outreach as personalized support, not punishment
- Rescheduling with a trusted care team member whenever possible
- Offering a waitlist option to help patients get seen sooner



Instead of This:

- Relying on patient portal alone to reschedule missed appointments
- Treating missed appointments as patient failure
- Assigning patients to unfamiliar providers without explanation



This resource is part of the AHEAD Initiative Diabetes QI Clinical Toolkit. For access to this toolkit and additional resources, please visit NEOQIHub.org.

In partnership with



The Northeast Ohio Quality Improvement Hub is funded by the Ohio Department of Medicaid and administered by the Ohio Colleges of Medicine Government Resource Center. The views expressed in this website are solely those of the authors and do not represent the views of the state of Ohio or federal Medicaid programs.