

FACULTY PRACTICE GROUP – Ambulatory Operations

STANDARDS AND GUIDELINES

The logo for UCLA Health System, featuring the text "UCLA Health System" in a blue and white color scheme.**SECTION:** Ambulatory Score Card Metrics**SUBJECT:** Call Abandonment Rate

REFERENCE #:

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APPROVALS: FPG: CAO-SC: APCA: N/A EAC: N/A

EFFECTIVE: 05/2011

PURPOSE:

The purpose of this guideline is to assure telephone access to our callers. It is important that our callers can readily contact their physicians and/or health care provider to request an appointment, seek answer to their questions and provide appropriate information to their health care provider.

POLICY:

The FPG Ambulatory practice target for the Call Abandonment Rate (CAR) is <8%. The impact of CAR on overall service and quality can lead to decreased access for patients to (re) schedule, lower patient satisfaction, and result in the loss of revenue.

REPORTING AND MEASUREMENT:

The Call Abandonment Rate will be monitored through the Ambulatory Scorecard which is distributed monthly. The Call Abandonment Rate is calculated using - Total calls abandoned (caller disconnects after the queued recorded announcement) ÷ total # of incoming calls.

DEFINITIONS:

Call Abandonment number refers to the total inbound calls that are disconnected by the caller after the queued recorded announcement. Call abandonment Rate is the percentage of calls disconnected compared to the total number of incoming calls. A high call abandonment rate is most likely an indication that the wait to speak to a representative is too long.

PROCEDURE:

1. There are several Automated Call Distributor systems that are used throughout the UCLA Health System outpatient practices (Symposium, Wintern and Infocus). Each system provides monthly reports which include the Call Abandonment Rate. These reports are generated the first week of every month for the previous month's activity. This report represents the total number of ACD calls abandoned after hearing the queue recorded announcement and before speaking to agents.
2. Call Abandonment Rate will be reported on the Ambulatory Scorecard on a monthly basis. Practice manager will review Call Abandonment Rate for trends.

OPERATIONAL PROCESS

1. Each practice manager is responsible for reviewing telephone reports on a monthly basis to determine their Call Abandonment Rate.
2. Practice Managers will make the appropriate interventions if Call Abandonment Rate is not meeting the target:
 - a. Review of resources
 - i. Determine if correct level of staffing is allocated to answering telephones
 - ii. Determine need for staff training
 - b. Review of reports for trends
 - i. Determine if there are peaks in the day when the call abandonment rate is higher and staff accordingly
 - c. Review of how telephone system is set up and determine if additional efficiencies can be obtained to decrease the Call Abandonment Rate
 - i. Determine if the caller can get information from another source (message, website)
 - ii. Consider decreasing the length of time between “ points of information” while patient is in queue
 - iii. Consider providing information about UCLA Health System events and/or practice policies as “ points of information” in effort to keep caller in the queue.
 - iv. Review how options are set up and determine whether options can be included in the greeting so that the caller hangs up prior to being placed in a queue.

REFERENCES

POLICY AUTHORITY:

UCLA Faculty Practice Group Ambulatory Operations

COGNIZANT OFFICE:

For interpretations of this policy, resolution of problems and special situations, contact:

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REVISION HISTORY

Original Policy issued: October 2008

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