

Missed appointment support letter – example

[Use practice headed paper with contact details to ensure patient knows where letter is coming from]

Dear [Patient's Name],

We're sorry you weren't able to make it to your appointment with [Clinician's Name] on [Date]. We hope everything is okay.

We understand that many things can make it hard to attend appointments — from health issues or family responsibilities, to stress or worries about coming in. Whatever the reason, please know we're here to support you, not to judge.

We'd really like to talk with you about how we can make it easier for you to get the care you need. If you're happy to, please get in touch with us or pop into reception to arrange a time to speak with our [Practice Manager / Community Links Worker / Admin Team Member / Doctor / Nurse].

You can call us on [Phone Number], or speak to us in person — whichever feels easiest for you.

We'd be grateful to hear from you by [Date – two weeks from letter]. If we haven't heard from you by then, someone from the team may give you a call or send a message to check in and see how we can help.

With warm wishes,

[Your Name]

[Your Role]

[Practice Name]

[Contact Information]

PLEASE NOTE POINTS FOR PRACTICES TO CONSIDER ON THE NEXT PAGE

Points for practices to consider

- Research has shown that there is higher morbidity and mortality in patients who miss multiple appointments suggesting these patients should not be removed from practice lists, which is likely to make their access to health care worse and could be damaging to the patient.
- This is an example letter that reflects this research evidence. It is most appropriate for patients who miss two or more GP appointments.
- We see this letter as a starting point for practices to tailor and adapt to their own circumstances. Practices vary widely in their style of communication and capacity to offer support.
- We recognize that each practice has its own tone and level of formality in communicating with patients. Practices are encouraged to adapt the style to suit them, while retaining the overall message of a supportive rather than a punitive approach.
- Some patients are unable to reliably receive letters in the post or are unable to read English. Could the letter go to the patient via the pharmacy or be translated or would a phone call (with interpreter if indicated) be more appropriate?
- Practices need to be able to deliver whatever follow-up response is committed to in the letter, to avoid patients feeling let down, which would be counterproductive. Practices are encouraged to consider their own capacity and ability to offer support and tailor the letter accordingly. Again, this will vary widely between practices.

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(On behalf of the Scottish Deep End Project)