

FIELD REPORT - OPERATIONAL OUTCOMES

Fewer cancellations. Faster readiness. *In under ninety days.*

A multi-site US healthcare client deployed Spryt's Asa platform to address chronic leakage across its outpatient network. Within a single quarter, the engagement returned measurable gains in utilization, patient readiness, and operational efficiency.

-28%

NO-SHOW REDUCTION
across booked appointments

+35%

PATIENT READINESS
at point of service

-42%

CALL-CENTER LOAD
inbound volume reduction

01 THE PROBLEM

Quiet revenue leakage at scale.

Before engaging Spryt, the client faced recurring friction across its multi-site network: inconsistent patient preparation, fragmented outreach, and a call-center burden that grew linearly with volume. Readiness workflows were siloed, manual, and under-measured.

Annual revenue exposure	\$3.7M – \$13.4M
Core gap	Readiness workflow
Secondary cost	Staff capacity

02 THE ENGAGEMENT

Direct integration. Thirty-day time-to-value.

Asa was deployed against the client's existing systems without re-platforming — preserving staff workflows, data integrity, and reporting cadence. Meaningful signal was measurable within the first month; the full outcome window closed in under ninety days.

Deployment window	< 90 days
Time-to-value	30 days
Integration model	Direct, native

INDEPENDENT VALIDATION · NHS MULTI-SITE DEPLOYMENT

Asa is live across multi-site NHS GP federations, delivering measurable operational uplift in primary care.

+160%

Increase in bookings

-33%

Reduction in no-shows

8+hrs

Saved per GP practice, per week

LIVE

Operational across NHS GP federations

MEASURED OUTCOMES - Q1 POST-LAUNCH (US CLIENT)

28%

FEWER NO-SHOWS

35%

READINESS UPLIFT

6-10%

UTILIZATION GAIN

<90d

PAYBACK PERIOD

*A blueprint for multi-site outpatient operations — **reducing leakage by 20 to 40 percent** without adding more headcount.*