



GP and Practice Staff Guidance on Children and Young People Who Are Not Brought To Healthcare Appointments (WNB / DNA)



April 2015

Produced by the Safeguarding Children Team

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NB. For the purpose of this policy we refer to the child missing a healthcare appointment as Was Not Brought (WNB) rather than Did Not Attend (DNA). We wish to acknowledge and emphasise that it is rarely the child’s fault that they miss appointments and that patterns of WNB may trigger concerns about welfare, given that they are reliant on their parent or carer to take them to the appointment.

Introduction

Missing appointments for some children may be an indicator that they are at an increased risk of abuse. There are many innocent reasons why children miss appointments but numerous studies have shown that missing healthcare appointments is a feature in many Serious Case Reviews, including those into child deaths.

Within Health there is now a move towards the concept of Was Not Brought (WNB) rather than Did Not Attend (DNA) for children and young people. It is rarely the child's fault that they miss appointments. The National Service Framework for Children (2004) states that:

Children or young people failing to attend clinic appointments “may trigger concern, given that they are reliant on their parent or carer to take them to the appointment. Failure to attend can be indicator of a family's vulnerability, potentially placing the child's welfare in jeopardy.”

Not addressing missed appointments may disadvantage the child involved.

In their 2008 report on Serious Case Reviews, the Confidential Enquiry into Maternal and Child Health (CEMACH) noted how frequently children who died had previously been identified as recurrent non-attendees, including hospital and community appointments. They also commented on the deleterious consequences for children who had failed to attend out-patient appointments on one or more occasions and were not followed up.

Recommendations from CEMACH include:

- Health Services, including Child and Adolescent Mental Health Services should proactively follow up children who do not attend appointments.
- When a child or young person doesn't attend an appointment with any health service, they should be contacted and the appointment should be rearranged.
- Children with chronic illnesses who do not attend hospital appointments should be followed up in primary care to discuss reasons for non-attendance.

The CQC review of safeguarding children arrangements in the NHS (July 2009), identified that there should be a process in place for following up children who fail to attend appointments.

The RCGP/NSPCC Safeguarding Toolkit for General Practice makes the recommendations that practices have in place:

- Procedures for identifying and following children who do not attend scheduled appointments within the Practice or with other Agencies such as therapies, secondary or community care;
- Procedures to identify and follow up children with more than expected unscheduled appointments at the Practice, OOHs, A&E Departments, Walk-in Centres.

It should be remembered that parents have the right to make decisions in respect of their child's health. The concept of Parental Responsibility gives a legal definition to the rights and responsibilities of a person with parental responsibility. Parental responsibility allows a parent or carer to accept or decline a health service or treatment on behalf of their child.

However if by declining a health service or treatment this may be detrimental to the child or young person's health, growth or development, an assessment should be made of the risk this poses to the child or young person.

The United Nations Convention on the Rights of the Child recognises the right of the child to enjoy the highest attainable standard of health including the treatment of illness and rehabilitation of health. It requires that organisations strive to ensure that no child is deprived of his or her right of access to health care services.

It is therefore important that Primary Care has processes in place to deal with children and young people who are not brought to appointments both in Secondary and Primary Care; therefore this guidance document specifically explains the responsibility of Primary Care practitioners in relation to safeguarding children and young people who are not brought to appointments both in Primary Care and any Secondary Care providers or other Health Professionals that they have referred to.

Please note that Secondary Care / other health care provider units will have their own Safeguarding WNB/DNA Policy that they will follow.

Guidance

Children and Young People Not Attending Appointments in Primary Care

It is clear that a lot of missed appointments in Primary Care are due to the transient nature of many conditions and do not give rise to concerns.

However if we do not have a process in place we cannot recognise when vulnerable children are not brought or there are multiple missed appointments.

Therefore, Primary Care Practices need to have a WNB Policy for children that should include:

- Identifying when children are not brought for appointments;
- If the appointment is known to be as a consequence of a referral/recommendation of other Healthcare Professionals, notifying them of the failure to attend;
- If the reason for the appointment is known, consideration as to whether there are any clinical consequences and if any actions are required;
- Consideration of any safeguarding concerns, especially when there are multiple episodes of WNB in Primary Care or other settings;
- Appropriate action if there are clinical or safeguarding concerns;

- Consideration of contacting the family about children not being brought for appointments especially if there are multiple instances;
- Ensuring that there is a robust system in place for documenting this process, including any actions taken as a result.

Children Not Attending Appointments with Other Health Professionals

Other Health Providers' WNB/DNA policies should state that when children miss appointments the referring clinician is notified. It is recognised that missing appointments can be an indicator of neglect.

In Primary Care there should be a process in place to:

- Identify WNB/DNA notifications for children;
- Review the reason for referral and assess if any further action is required to manage the clinical problem that prompted the referral;
- Note if there have been any other episodes of missing appointments in any setting including Primary Care;
- Consider whether there are any safeguarding concerns and if there are take any appropriate action;
- Consider contacting the family about children not being brought for appointments especially if there are multiple instances;
- Document this process including any subsequent actions taken as a result.

References

['The voice of the child: learning lessons from serious case reviews: A thematic report from Ofsted's evaluation of Serious Case Reviews from April 1st to September 30th 2010.'](#)
[Ofsted 2011](#)

['Why Children Die' Report: RCPCH/NCB 2014](#)

[National Service Framework for Children, Young People and Maternity Services; DfES, DH 2004](#)

[Safeguarding Children. A review of arrangements in the NHS for safeguarding Children; Care Quality Commission July 2009](#)

[The RCGP/NSPCC Safeguarding Children Toolkit 2014](#)