



**WAHT-TP-094**

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### Introduction

#### Follow up of Women who fail to attend a Consultant Antenatal Clinic Appointment

Women who fail to attend a Consultant Obstetrician's Antenatal Clinic appointment should be followed up to ensure they are offered appropriate care. Non-attendance is a known risk factor for poor outcomes and a possible indicator of domestic violence, see appendix 1 of Domestic Abuse guideline.

All booked appointments should be recorded on the electronic booking system and Badgernet. Maternity notes are accessed on the Badgernet system. At the end of the clinic Women who have not attended need to be followed up by an antenatal clinic midwife. **The midwife must discuss with the Consultant** and decide on the timing of the follow-up appointment.

Before further appointments are sent out Badgernet and clinical systems need to be checked to establish any possible reason for the non-attendance e.g. miscarriage, delivery, transfer to another hospital or change of address.

A new appointment should be sent to the Woman for the next available clinic for their designated consultant.

After a **second** consecutive non-attendance the notes/records and alert register should be checked and confirmation of the Woman's contact details should be obtained from the GP's surgery. **The midwife must discuss with the Consultant** and decide on the timing of the follow-up appointment. This must be actioned within 48 hours.

If there is no obvious reason for the non-attendance, then an email should be sent to the named midwife and community midwifery team to contact and visit the Woman to ascertain the reason for non-attendance and take appropriate action and arrange further appointment as required.

The Specialist Midwife should be contacted to see if the patient is known to her and to check if there are any outstanding safeguarding issues.

**N.B. Risk factors and gestation should be taken into account when reviewing the notes. Earlier intervention may be required i.e. do not wait for a second non-attendance.**

#### Follow-up of Women who fail to access midwifery care during the antenatal period:

##### Responsibilities

- Midwives are responsible for ensuring that services are accessible to Women in the local community; that Women and their families are aware of the services available to them, and that Women who do not attend for appropriate care are followed up and given every reasonable opportunity to receive midwifery care.
- All midwives must provide care that is safe and effective for Women and their families.
- All Women who do not attend a midwifery appointment are followed up to ensure appropriate midwifery care has been/will be received.
- All Women who are not at home for an agreed visit will be followed up to ensure appropriate care has been/will be received.
- All Women will be made aware of the importance of antenatal and postnatal care for the health and wellbeing of themselves and their babies.

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### Objectives

Midwives will be aware of the increased risk to Women and their babies of frequent non- attendance for midwifery care. Midwives should be aware of the guidelines for appropriate follow up of non-attendees. Midwives should offer Women reasonable access to midwifery care in the community.

Midwives should ensure that Women who do not present for care are identified, clear records kept and alternative access to care offered. Where a Woman is identified as not accessing appropriate midwifery care, midwives should communicate with all relevant agencies. [GP, Hospital, Midwives, Specialist Midwives, Health Visitors, Children's Social Services]

### Process

If a Woman fails to make herself available for an initial booking appointment:

- Midwives should review records, contact GP or Hospital to confirm that the pregnancy is still ongoing. Check if address correct. If the Woman has pre-school/school age children, midwives should liaise with health visitor and/or school nurse.
- Midwives should contact the Woman and arrange an alternative appointment.
- Where telephone contact cannot be made a further appointment should be sent by post.
- If a second appointment is missed a further letter should be sent encouraging the Women to contact the midwives.
- The case should be discussed with the relevant specialist midwife to see if they are aware of the patient and if there are any outstanding safeguarding issues.
- If a Woman fails to contact the midwives, the midwife responsible for coordinating her care should arrange to visit the Woman's home and offer to discuss when it would be appropriate for her to complete the booking process.
- If the named midwife fails to gain access at this point, she should: contact the Woman's GP explaining her concerns; contact the Community Team Leader to inform of concerns; discuss the case with the Specialist midwife, for her to follow-up the patient if appropriate and refer the Woman to the consultant unit.
- Midwives should keep accurate records of contacts made and appointments offered on Badgernet. Copies of letters should be Scanned into Badgernet.
- If a Woman fails to make herself available for subsequent antenatal care the above actions should be repeated.

### When Women do not attend midwives should consider:

- Are there domestic abuse issues?
- Are there child protection issues?
- Are there social problems?
- Is the Woman fully aware of the need to access care?
- Has the Woman been offered appropriate and accessible care?
- Has the Woman left the area? If so, midwives need to pass on information to the new area when known or to social services if destination not known. If the Woman has left the area and the Safeguarding Children team has been involved, please notify team so they can liaise with the safeguarding team in that area.

### Documentation

- Good communication is vital between the multidisciplinary team to ensure everyone involved is aware that the Woman is not accessing antenatal care.
- Each time a Woman fails to attend an antenatal appointment, the Midwife involved in the care is responsible for ensuring that this is documented in the maternal records.
- **All appointment attendance including DNA should be recorded on Badgernet for each appointment, this allows a clear view of the pattern of appointments attended/missed.**

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### Missed Antenatal Ultrasound Appointments

If any obstetric ultrasound appointment is missed, midwife sonographer or midwife working in Antenatal Clinic will investigate if Woman has: -

- Miscarried
- Given birth or is a hospital inpatient
- Moved out of area or is still registered with the same GP
- Has an appointment elsewhere or has changed her appointment?
  
- If none of the above is applicable the midwife sonographer/Antenatal Clinic midwife will contact the Woman by telephone. In the event where she is not able to reach the women via phone, an e mail will be sent to the named Community Midwifery team to let them know of the DNA and ask to follow it up/check address and contact details. On response from the Community Midwife, the midwife sonographer/ANC Midwife will send another appointment or will update the hospital systems if patient is no longer pregnant or has moved area.
  
- If a Woman does not attend an ultrasound department appointment the sonographer informs the Antenatal Clinic, and the Antenatal Clinic midwife will contact the Woman as above.
- All missed appointments and actions taken should be documented on Badgernet and discussed with the Consultant.

### Missed Antenatal Day assessment Unit (DAU) appointments

- If any Woman fails to attend a DAU appointment the Midwife running the DAU is responsible for contacting the Woman and rearranging the appointment.
- If the Woman needs to be reviewed the same day and the DAU Midwife is unable to make contact within working hours, the labour ward co-ordinator must be informed and follow up arranged. This should be documented in the DAU diary.
- If contact with the Woman not possible the Midwife in DAU will need to inform original referrer to follow up.
- All missed appointments and actions taken should be documented in the hospital notes.
- Glucose Tolerance Tests should be rebooked ASAP and the woman contacted by telephone if non-attendance. If telephone contact cannot be made, then an appointment letter should be sent as a matter of priority and community midwifery teams informed of non-attendance and unsuccessful contact. If second DNA, this should be escalated to community team and team leader.

### Missed Triage appointments

- If patient does not attend after being accepted for a Triage appointment, the Triage Team should attempt to contact within four hours.
- If unable to make contact the labour ward co-ordinator must be informed and follow up arranged as per individual indication.

### Missed Quad Clinic appointments

- If any Woman fails to attend a quad clinic appointment, it is the responsibility of the midwife running the clinic to contact the Woman directly by telephone and re-arrange the appointment.
- If the Woman cannot be contacted by telephone a letter with the new appointment is sent to her home address. This letter should outline the gestation-limited timeframe for testing.
- The screening coordinator and community midwife should be informed of the non-attendance. If a further appointment is missed, the community midwife will be asked to visit the Woman at home to clarify the situation.

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### DNA Scheduled Induction of Labour

- If a Woman does not attend for Induction of Labour, telephone contact should be made to the Woman to ascertain the reason for non-attendance. The Woman should be offered to come in for IOL at a convenient time the same day.
- **If IOL is declined** - Refer to [Induction of Labour Guideline](#) and follow guidance. If the Woman is CLC this should also be discussed with the consultant on-call.
- If no contact can be made with the woman, this should be escalated to the 223 bleep holder.
- If contact fails – 223 Bleep Holder should contact CMW team to attend the Woman's address to attempt to make contact, ascertain the reason for non-attendance and explain the importance of attending for IOL.
  - If woman is at home address then Community Midwife should encourage woman to attend for Induction ASAP, maternal wellbeing should be assessed and communication should be made to the antenatal ward midwife in charge.
  - If the woman is not present at home address, this should be escalated to 223 Bleep Holder.

### Non-attendance of Postnatal appointments/ Home Visits

#### Postnatal Appointments in Maternity Hubs or Clinic

- Documentation should be made on Badgernet for non-attendance.
- Contact should be made by telephone to ascertain reason for non-attendance. A Postnatal check should be performed over the phone if the woman is unable to attend appointment on the same day to determine mother and baby wellbeing.
- If urgent appointment or any concerns raised on the phone – i.e. Day 5 NBBS Screening, Reweigh, BP Check, Suture removal etc. Home visit should be arranged by midwife completing visits on the same day. If Woman is not at home address and is not local, then an appointment should be made ASAP (within 24 hours) in postnatal clinic or at home.
- If woman is planning to remain out of area, then arrangements should be made with appropriate team/hospital for handover of care
- Contacts and discussions should be documented on Badgernet and all new appointments should be added.

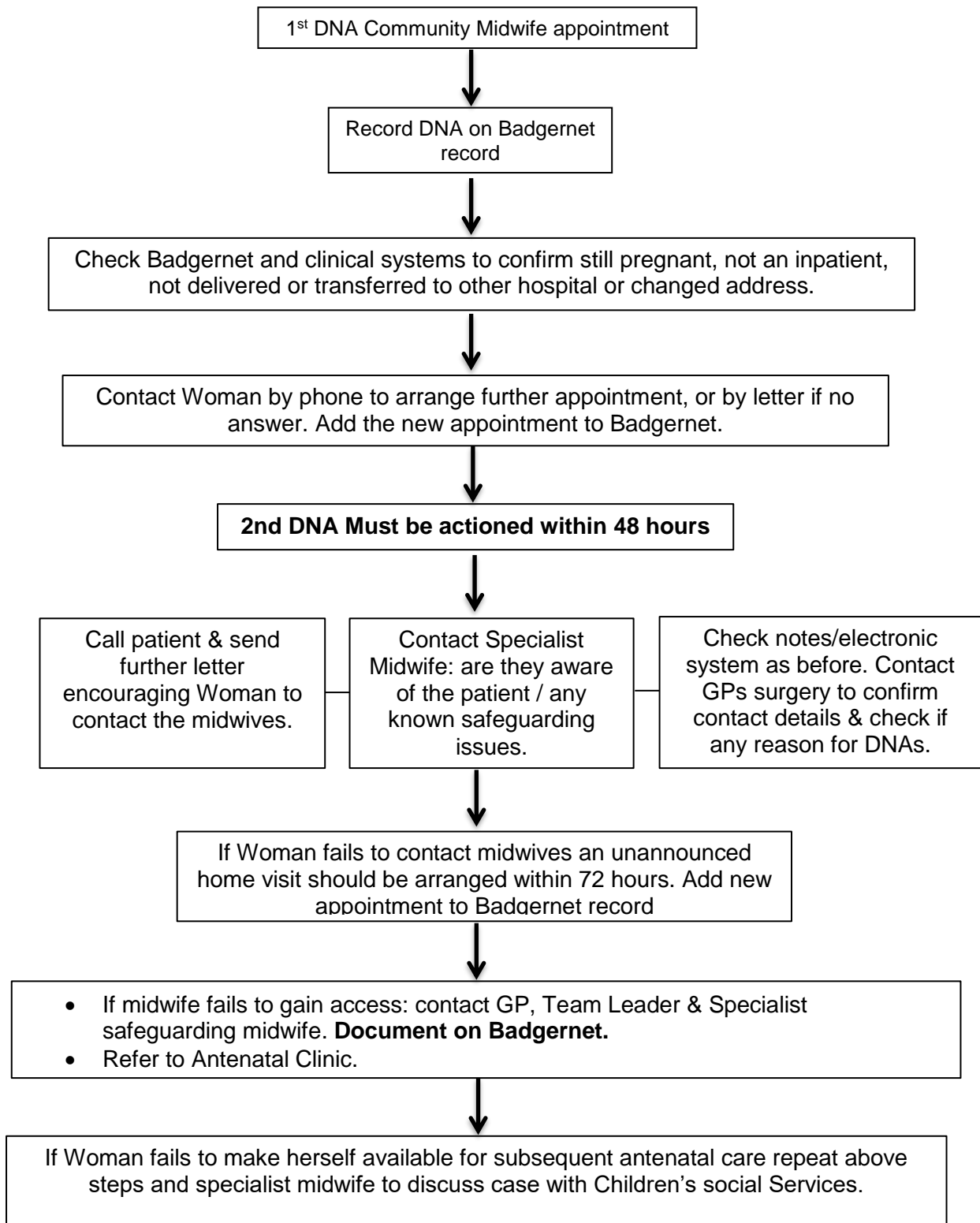
#### Postnatal Home Visits

- If no answer at door on scheduled appointment day, contact should be attempted by telephone whilst at the address.
- If initial home visit, check documentation to confirm any temporary/new address provided, as well as any updated contact details.
- If no contact can be made, then a note should be left at the address/voicemail left if confident in correct number (personalised answerphone message).
- Contact should be attempted later in working day. (Either via phone call or later visit)
- If no contact remains – visit should be attempted on the next day
- If no contact on following day – escalation to team leader/allocated band 7 and safeguarding team midwives.

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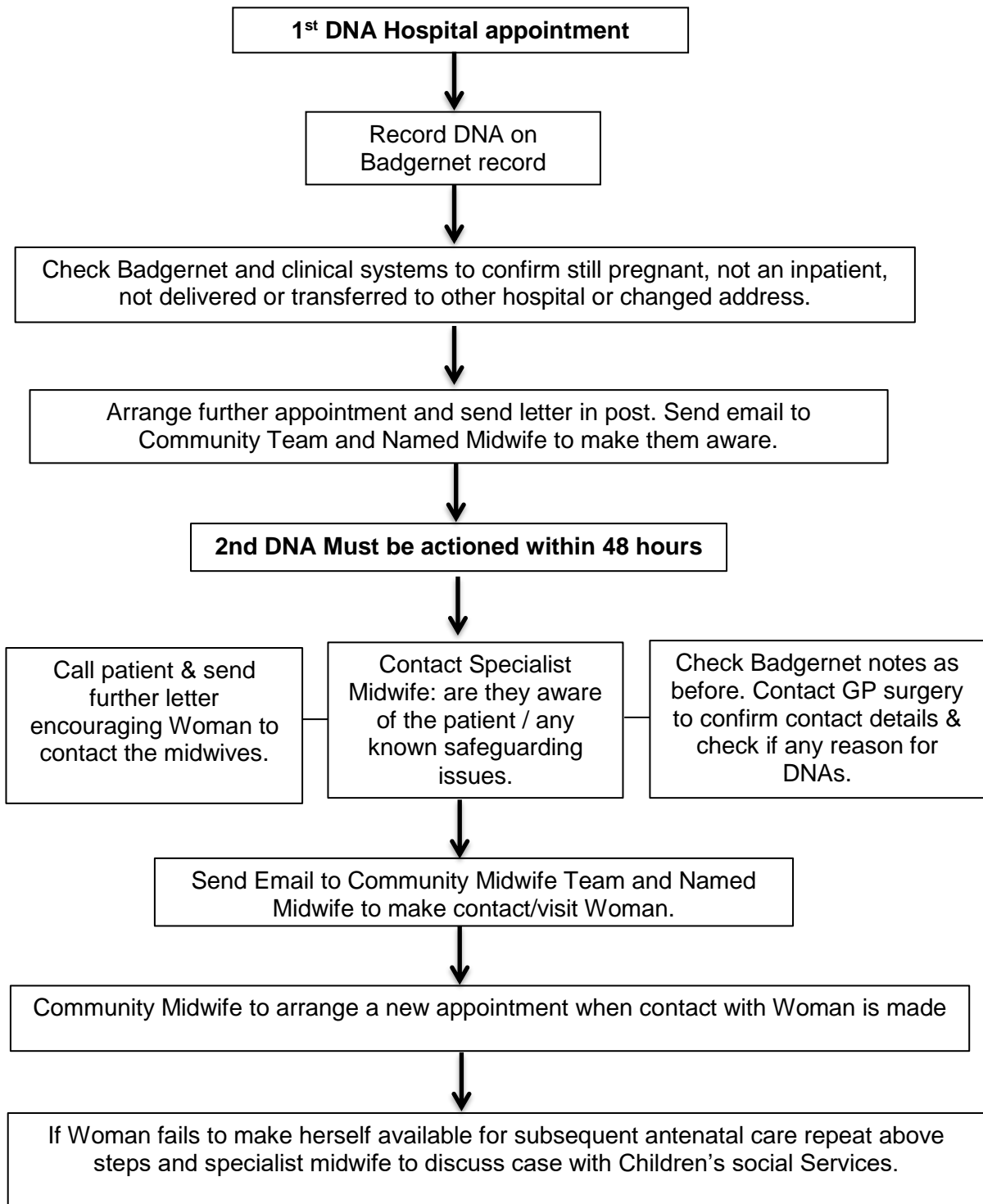
**Appendix 1: Antenatal Community DNA Flow Chart**



**Risk Factors and Gestation should always be taken into account as earlier intervention may be required. i.e. DO NOT WAIT UNTIL 2<sup>nd</sup> DNA.**

**Midwives should keep accurate records of all appointments offered. Copies of letters should be scanned into the Woman's notes.**

Appendix 2: Antenatal Hospital DNA Flow Chart



Risk Factors and Gestation should always be taken into account; as earlier intervention may be required. i.e. **DO NOT WAIT UNTIL 2<sup>nd</sup> DNA.**

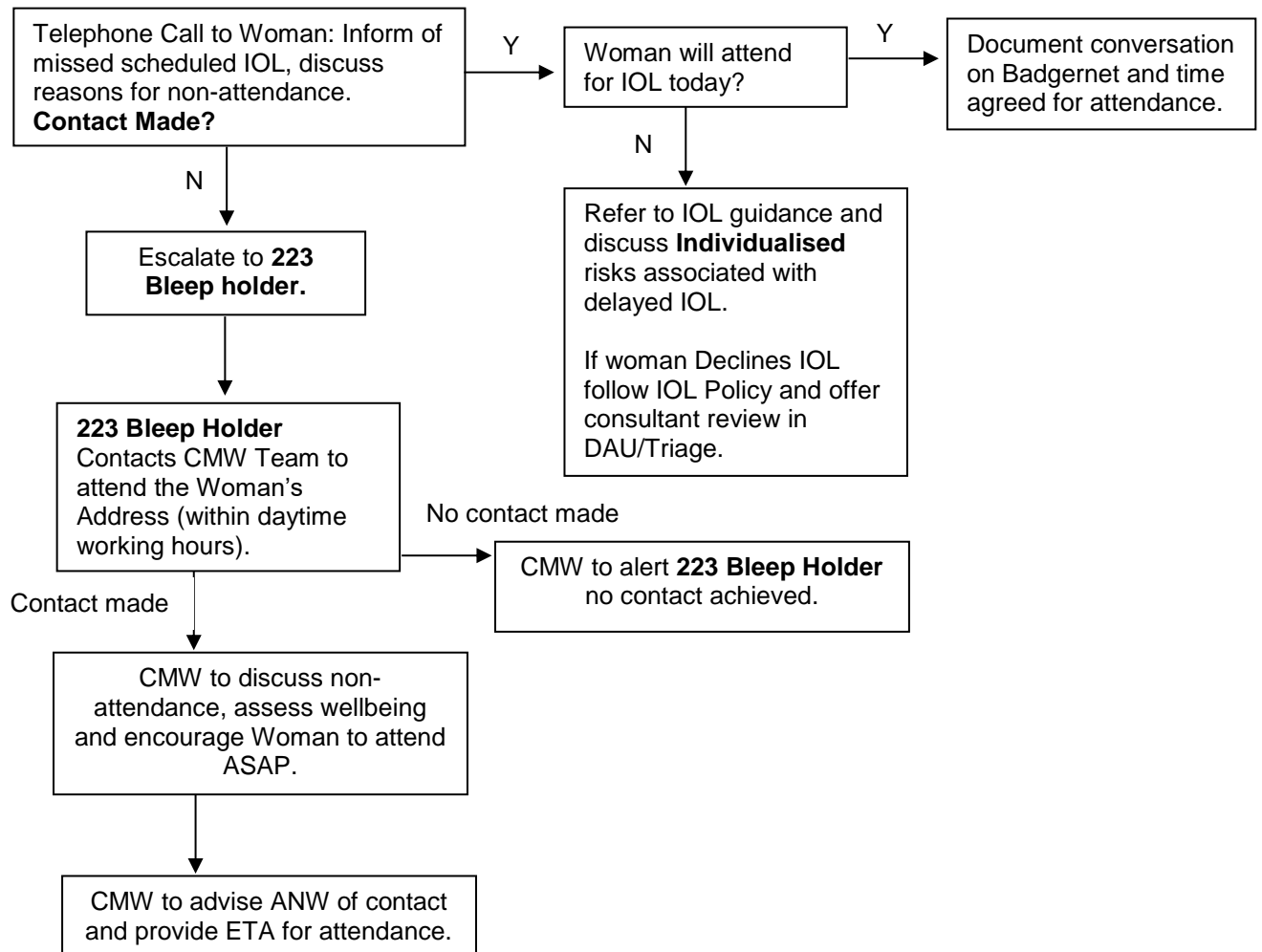
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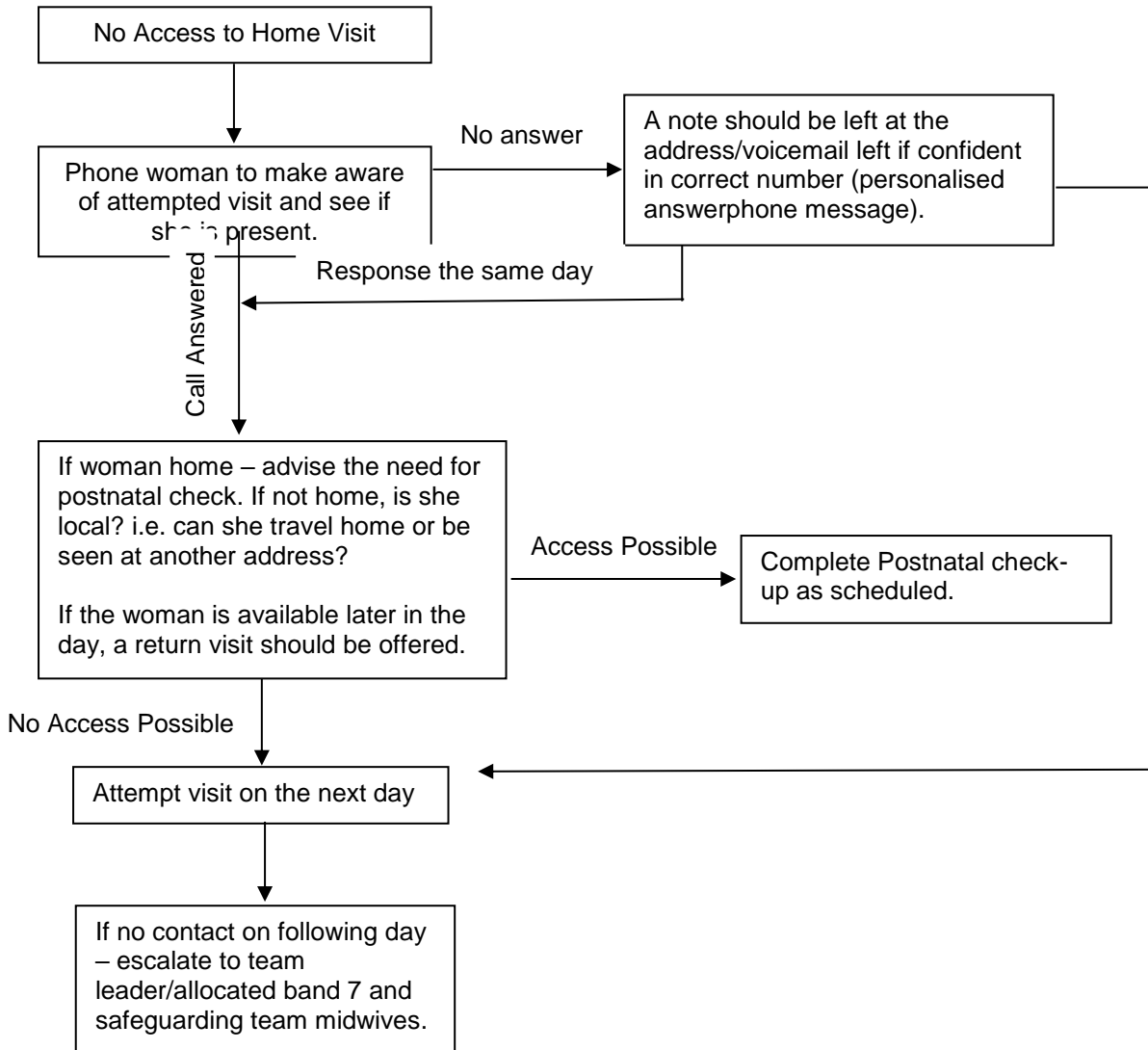
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**Appendix 3: DNA Scheduled Induction of Labour**



**Appendix 4: Postnatal Appointment at home**



**Contribution List****Contribution List**

This key document has been circulated to the following individuals for consultation;

Designation
Community Midwifery Team Leaders
Safeguarding Specialist Midwives
Safeguarding Lead Midwife
Maternity Matrons
Obstetric Medical Staff – all grades
MSWs
Community Midwives
Midwives

This key document has been circulated to the chair(s) of the following committee's / groups for comments;

Committee
Maternity Governance Meeting