

None Attendance of Hospital Appointments – Children who are not brought to their appointments

This protocol does not override the individual responsibility of health professionals to make appropriate decision according to the circumstances of the individual patient in consultation with the patient and /or carer. Health care professionals must be prepared to justify any deviation from this guidance.

INTRODUCTION

The protocol is intended to guide audiology clinicians on how to manage children who failed to attend their audiology appointments. It should be read in conjunction with the Trust’s Safeguarding Children Policy and DNA policy (Appendix1). Was not brought (WNB) is the preferred terminology for children who have not attended their appointments. This replaces Did Not Attend (DNA).

THIS PROTOCOL IS FOR USE BY THE FOLLOWING STAFF GROUPS:

Lead Clinician(s)

Edward Southan Jessica Scully	Interim Countywide Audiology Services Manager Paediatric Audiology manager
Approved by Surgery Divisional Governance Board	17 th September, 2024
Review Date: This is the most current document and should be used until a revised version is in place	17 th September, 2027

Key amendments to this guideline

Date	Amendment	Approved by: (name of committee or accountable director)
27 th September 2023	New document approved at Surgery Divisional Governance Board	Surgery Divisional Governance Board
17 th September 2024	Document Approved	Audiology Governance Meeting

None Attendance of Hospital Appointments – Children who are not brought to their appointments

INTRODUCTION

The protocol is intended to guide audiology clinicians on how to manage children who failed to attend their audiology appointments. It should be read alongside the Trusts Safeguarding Children's Policy WAHT-TP-037 and DNA policy. Was not brought (WNB) is the preferred terminology for children who have not attended their appointments. This replaces Did Not Attend (DNA).

Process following missed appointment:

1) Initial missed appointment

- Explore reasons why the child was not brought.
- Check with the child's GP surgery that the address/contact details are correct and match where the appointment letter was sent. Ask if the child has attended the surgery recently and if any concerns have been raised.
- Check child details on NHS Spine Portal
- Attempt to contact the child's legal guardian to ascertain why the child was not brought and arrange another appointment for a suitable date/time with their agreement.
- Inform GP / Referrer of non-attendance and record this in the patient's Audiology notes.
- Inform the Health Visitor of the new appointment to encourage attendance if applicable.

2) Second Missed appointment

- Check PAS to ascertain if the child is known to Children's Services under the safeguarding umbrella. If this is the case, the social worker involved with the child's care must be informed immediately (details will be on PAS) and a note made in the patient's records that this has been done.
- If there is a concern that the medical needs of the child are being neglected contact the area Social Work team via Worcestershire Family Front Door 01905 822666 to establish if the child is known to Children's Social Care.
- If the child is a Looked After Child, Beverley Downing (Named nurse for looked after children) should be informed on Tel: 07918747471 or 01905 843004 or email: whcnhs.snlac@nhs.net
- If the child is not known to social services an email must be sent to the Trust's Integrated safeguarding team listing the child's details including the NHS number and the nature of the concern to: wah-tr.SafeguardingWorcsacute@nhs.net and the Paediatric Liaison team at WHCNHS.PaediatricLiaisonService@nhs.net. This must be recorded in the patient's notes.
- Following discussions with those above a decision will be taken regarding re-appointment of the child.
- If the child is reappointed the new appointment details must be relayed to the professional team involved above to encourage attendance.
- If the decision is to discharge the child, this should be communicated to the team above, the GP/Referrer and the parents or carers of the child, with details of how the child can re-enter the service.

**Appendix 1
Key Information for Staff**



Safeguarding
Children Policy.pdf

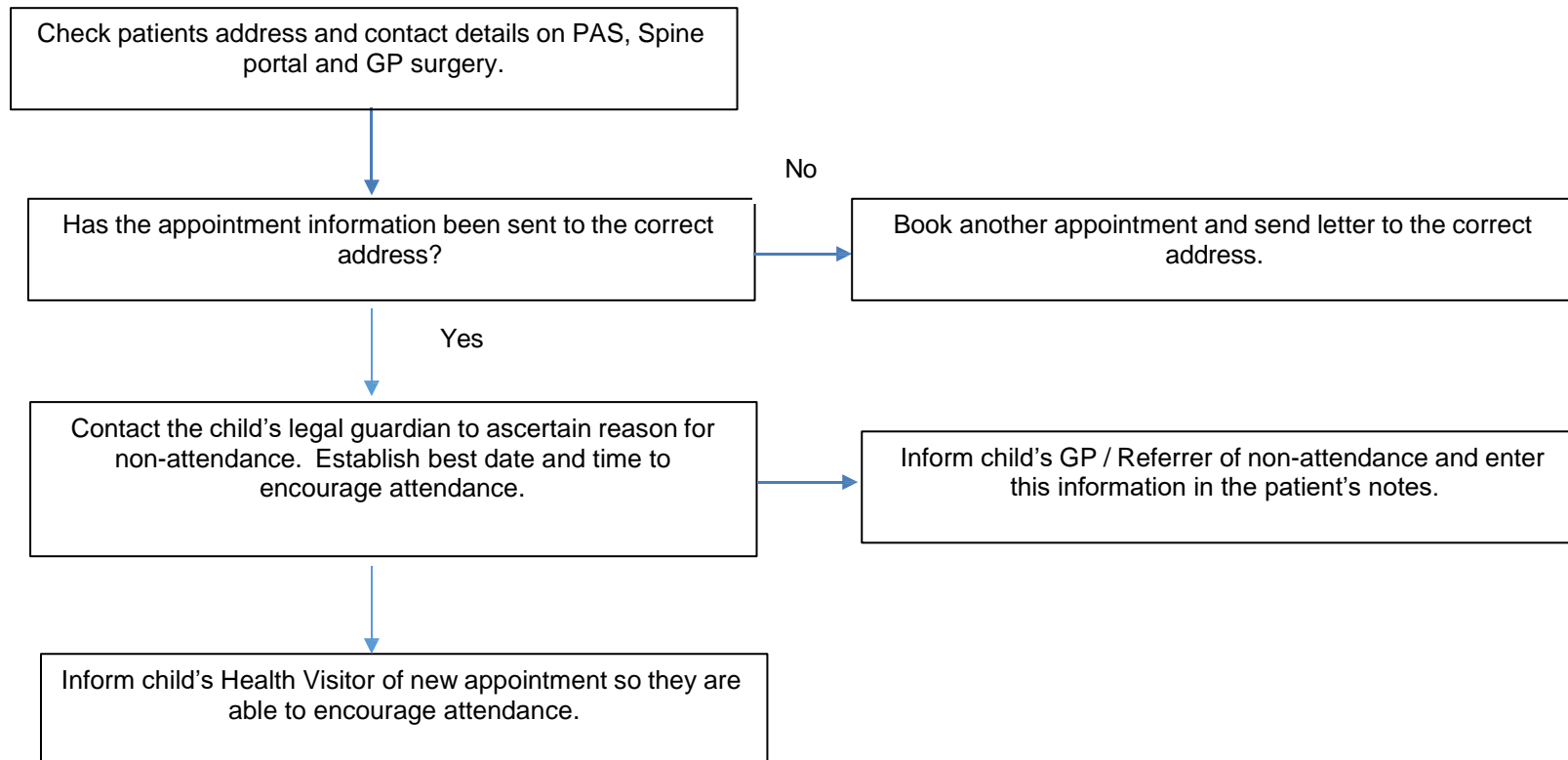


DNA Policy.doc

Appendix 2

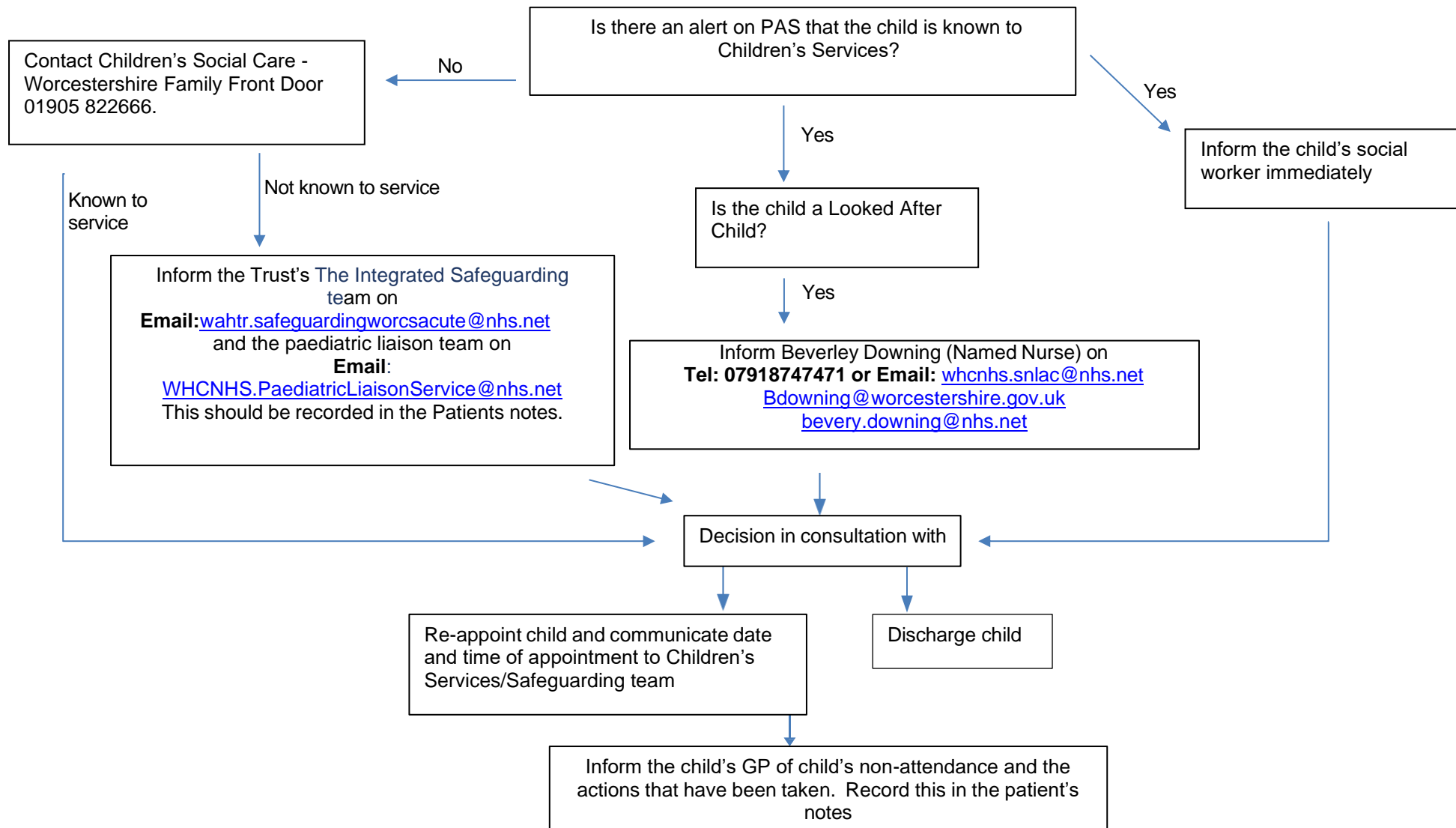
Children who are not brought to their appointment

First Appointment



Appendix 3

Children who are not brought to their Second Appointment and there is a concern of medical neglect



Monitoring Tool

This should include realistic goals, timeframes and measurable outcomes.

How will monitoring be carried out?

Who will monitor compliance with the guideline?

Page/ Section of Key Document	Key control:	Checks to be carried out to confirm compliance with the policy:	How often the check will be carried out:	Responsible for carrying out the check:	Results of check reported to: <i>(Responsible for also ensuring actions are developed to address any areas of non-compliance)</i>	Frequency of reporting:
	WHAT?	HOW?	WHEN?	WHO?	WHERE?	WHEN?
2	All children who are not bought to appointments will follow the pathway	A routine Was Not Bought (WNB) Audit will be undertaken to ensure that the process is followed correctly.	1 times a year	Paediatric Audiology Service Lead	Audiology Service Manager /Governance Team	1 times a year following audit

Contribution List

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

Designation
Edward Southan- Principal Audiologist
Lesley Peplow- Audiology Service Improvement Lead

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

Committee

Supporting Document 1 - Equality Impact Assessment Tool



Herefordshire & Worcestershire STP - Equality Impact Assessment (EIA) Form
Please read EIA guidelines when completing this form

Section 1 - Name of Organisation (please tick)

Herefordshire & Worcestershire STP		Herefordshire Council		Herefordshire CCG	
Worcestershire Acute Hospitals NHS Trust		Worcestershire County Council		Worcestershire CCGs	
Worcestershire Health and Care NHS Trust	<input checked="" type="checkbox"/>	Wye Valley NHS Trust		Other (please state)	

Name of Lead for Activity	Edward Southan
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Details of individuals completing this assessment	Name	Job title	e-mail contact
	Edward Southan	Interim Audiology manager	Edward.southan@nhs.net
Date assessment completed	26/10/23		

Section 2

Activity being assessed (e.g. policy/procedure, document, service redesign, policy, strategy etc.)	Title: None Attendance of Hospital Appointments – Children who are not bought to their appointments. Protocol			
What is the aim, purpose and/or intended outcomes of this Activity?	To check that children who are not brought to their audiology appointments, are managed in a consistent way between different staff members and departments across Worcestershire.			
Who will be affected by the development & implementation of this activity?	<input checked="" type="checkbox"/> Service User	<input checked="" type="checkbox"/> Staff	<input type="checkbox"/> Communities	<input type="checkbox"/> Other _____
	<input checked="" type="checkbox"/> Patient	<input type="checkbox"/>		
	<input checked="" type="checkbox"/> Carers	<input type="checkbox"/>		

	<input type="checkbox"/>	Visitors	<input type="checkbox"/>
Is this:	<input type="checkbox"/> Review of an existing activity <input checked="" type="checkbox"/> New activity <input type="checkbox"/> Planning to withdraw or reduce a service, activity or presence?		
What information and evidence have you reviewed to help inform this assessment? (Please name sources, e.g. demographic information for patients / services / staff groups affected, complaints etc.)			
Summary of engagement or consultation undertaken (e.g. who and how have you engaged with, or why do you believe this is not required)	Discussion with colleagues		
Summary of relevant findings			

Section 3

Please consider the potential impact of this activity (during development & implementation) on each of the equality groups outlined below. **Please tick one or more impact box below for each Equality Group and explain your rationale.** Please note it is possible for the potential impact to be both positive and negative within the same equality group and this should be recorded. Remember to consider the impact on e.g. staff, public, patients, carers etc. in these equality groups.

Equality Group	Potential positive impact	Potential neutral impact	Potential negative impact	Please explain your reasons for any potential positive, neutral or negative impact identified
Age	✓			Patients are of the age they cannot be held responsibly for not attending an appointment. Reducing WNB will positively impact this user group.
Disability	✓			Patients who are not brought to their appointments due to a carers/childs disability will be identified and addition support can be offered to enable attendance
Gender Reassignment		✓		Will not impact
Marriage & Civil Partnerships		✓		Will not impact.
Pregnancy & Maternity	✓			Parents/Carers who do not bring their children to appointments due to pregnancy of maternity reasons can be identified and addition support offered.
Race including Traveling Communities	✓			Children who may move out of area will be identified and neighbouring trusts can be notified to continue care plans
Religion & Belief		✓		Will not impact
Sex		✓		Will not impact

Equality Group	Potential positive impact	Potential neutral impact	Potential negative impact	Please explain your reasons for any potential positive, neutral or negative impact identified
Sexual Orientation		✓		Will not impact
Other Vulnerable and Disadvantaged Groups (e.g. carers; care leavers; homeless; Social/Economic deprivation, travelling communities etc.)				
Health Inequalities (any preventable, unfair & unjust differences in health status between groups, populations or individuals that arise from the unequal distribution of social, environmental & economic conditions within societies)				

Section 4

What actions will you take to mitigate any potential negative impacts?	Risk identified	Actions required to reduce / eliminate negative impact	Who will lead on the action?	Timeframe
	No Negative risks identified	.		
How will you monitor these actions?				
When will you review this EIA? (e.g. in a service redesign, this EIA should be revisited regularly throughout the design & implementation)				

Section 5 - Please read and agree to the following Equality Statement

1. Equality Statement

1.1. All public bodies have a statutory duty under the Equality Act 2010 to set out arrangements to assess and consult on how their policies and functions impact on the 9 protected characteristics: Age; Disability; Gender Reassignment; Marriage & Civil Partnership; Pregnancy & Maternity; Race; Religion & Belief; Sex; Sexual Orientation

1.2. Our Organisations will challenge discrimination, promote equality, respect human rights, and aims to design and implement services, policies and measures that meet the diverse needs of our service, and population, ensuring that none are placed at a disadvantage over others.

1.3. All staff are expected to deliver services and provide services and care in a manner which respects the individuality of service users, patients, carer's etc., and as such treat them and members of the workforce respectfully, paying due regard to the 9 protected characteristics.

Signature of person completing EIA	
Date signed	
Comments:	
Signature of person the Leader Person for this activity	
Date signed	
Comments:	



Supporting Document 2 – Financial Impact Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

	Title of document:	Yes/No
1.	Does the implementation of this document require any additional Capital resources	No
2.	Does the implementation of this document require additional revenue	No
3.	Does the implementation of this document require additional manpower	No
4.	Does the implementation of this document release any manpower costs through a change in practice	No
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	No
	Other comments:	

If the response to any of the above is yes, please complete a business case and which is signed by your Finance Manager and Directorate Manager for consideration by the Accountable Director before progressing to the relevant committee for approval