

STANDARD OPERATING PROCEDURE DOCUMENT (SOP)

Title		Child/Young Person Was Not Brought to an Appointment – Sefton Practices	Doc. No.	PCS039			
Scope		Primary Care Administrative Teams / Clinicians					
Purpose		This process has been developed to ensure that the circumstances and consequences of any child and/or young person failing to attend a health appointment are assessed and managed with consideration to their welfare.					
Guidelines		 GP and Practice Staff guidance on Children and Young People was not brought to health care appointments. Missing appointments for some children may be an indicator that they are at increased risk of neglect. Within health there is a move towards the concept of 'Was not Brought' (WNB) rather than did not attend for children and young people. This acknowledges that it is rarely the child's fault that they miss appointments. Repeated cancellation and rescheduling of appointments should be treated with the same degree of concern as non-attendance, potentially harmful and possibly a feature of disguised compliance Parents have the right to make decisions in respect of their child's health. However if this is seen detrimental to the child or young person's health, growth and development an assessment of the risk to the child or young person should be made. 					
PRO	CEDURE		RESPONSIBILITY				
1.	When a child/young person was not brought for their appointment the EMIS system will automatically note this as a DNA after their appointment time.						
2.	The clinician who should have seen the child/young person should review the reason for the child appointment and assess if further action is required considering: • Is there any clinical consequences as a result of the child/young person missing the appointment • Previous non-attendance/ cancellations and rescheduling • Reasons given for non-attendance • Potential impact of non-attendance on child's health • Any child protection concerns past and present						

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	 Is the child looked after? Any concerns related to the childs parents which may impact on their ability to parent Note if there are any other episodes where the child WNB in any other health setting 		
3.	Attempt to contact with the parent/carer of the child/young person who has not been brought for appointment especially if there are multiple occasions	Clinician	
4.	Clearly document in the clinical notes that the child/young person WNB include any subsequent actions taken as a result	Clinician	
5.	If the Clinician has any concerns they can discuss these with the child/young person's Health Visitor and/or School Nurse to agree the best way forward	Clinician	
6.	The Clinician should follow the PC24 Safeguarding Policy and Child protection processes if the child/young person is considered to be at risk of significant harm or in need of additional support and/or requires a safeguarding referral	Clinician	
7.	Baby Checks & Immunisations The parent/s should be contacted on a minimum of 3 separate occasions to schedule a baby check/immunisations appointment for their child. Each attempted must be clearly documented within the patient's clinical record. Inform the Health Visiting team that the baby has not been brought for their baby check/immunisations.	Practice Manager	



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		Person Was Not Brought to an – Sefton Practices			Doc. No.	PCS039		
Version				v1				
Supersec	les			N/A – New SOP				
Approving	g Managers	/Committ	ee	Deputy Director of Urgent Care/ Clinical Lead				
Date Rati	fied			July 2020				
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Responsible Executive Director				Director of Service Delivery				
Responsi	ble Manage	r/Suppor	t	Deputy Director of Service Delivery				
Date Issued				July 2020				
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Target Au	udience			Primary Care Receptionist and Practice Managers				
Version	Date	Contro	l Rea	ason	Accountable Person for this Version			
v1	July 2020	SOP cr	eate	d	Primary Care Nurse Lead & DDoUC			
Refere	ence docun	nents	E	Electronic Locations	Locatio	ations for Hard Copies		
Cor				nary Care 24 Intranet / porate Policies/ Current PS/	Standard Operating Procedures File in the Call Centre.			
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