

## Was Not Brought (WNB) Guidance for RACH out-patient areas

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### Background

*Children do not fail to attend - they fail to be brought.*

Repeated WNBs may be part of a bigger picture of neglect/other forms of abuse (NICE, 2009).

WNB may indicate a family needing support or a child "In Need".

CQC requires trusts to have guidance around paediatric non-attendance.

Reason for DNAs include: admin errors/confusion over changed appointment dates, medical problem has resolved, parents forgetting.

BSUH has a 2017 text service to remind parents of their appointments (if contact number held by BSUH)- parents have option to cancel/reappoint by text. The Hub *aims* to contact all new patient referrals by phone to arrange time.

### Assessing social risk

The clinician must assess whether the child in question is high risk based on their medical history and the social information you have available to you.

- Clinic "pick lists" include an "Abbreviated Patient Warning" - this flags up those children on a Child Protection Plan (It does NOT show children who are Child In Need).
- If a child WNB/cancels OPD staff can print a "screenshot diary" for that patient which will list all WNB/cancelled appointments from all specialities within BSUH. You can also review this on the PANDA system under appointments.

### Whenever a low risk child is not brought to clinic appointment

1. Admin to check contact details. Consultant to review notes and risk assess based on the symptoms/differential diagnosis and other relevant information in the notes/referral. Letter to inform of the WNB and decision to reappoint.
2. If child WNBs a 2<sup>nd</sup> time: Write to GP (copying to parent, HV & social worker if they have one) to inform of DNA and decision to reappoint or not. [See template 2.](#)

### Whenever a high risk child is not brought to clinic appointment

1. Doctor to contact the carers/GP/social worker by telephone.
2. Failing which, doctor to dictate letter clearly explaining to parent/GP/health visitor attempts to telephone and the clinical concern *e.g) untreated squint, repeated WNBs and potential for resultant amblyopia.*
3. If child WNBs a 2<sup>nd</sup> time: dictate a letter reiterating above clinical concerns and expectations and outcomes if child not brought for further appointment. [See template 1.](#)

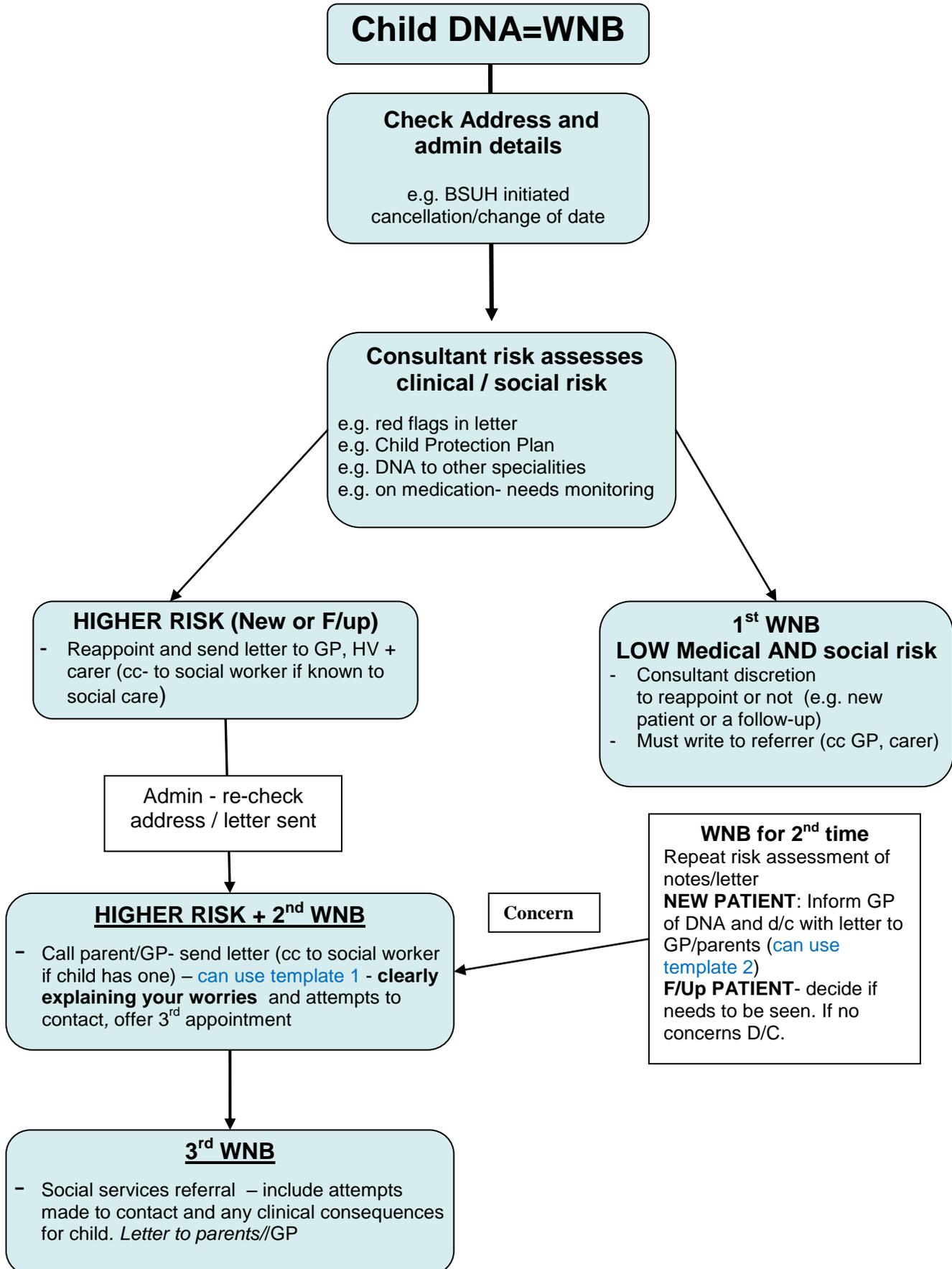
**Children with > 3 consecutive WNBs** – should be referred to social services by the treating clinician. Referral to state clearly any medical consequences for non-attendance *e.g) child has repeated A+E attendances with severe asthma, but WNB to respiratory f/up.*

**BOTTOM LINE:**

**Repeated WNB is worrying, if you fail to contact family and you are concerned about negative health/social consequences then referral to social services is indicated.**

**You do not need to wait for 3 DNAs if you have concern. See page 3 for cancellations**

FLOWCHART for DNAs



## **CANCELLATIONS** (Action for Hub/Admin)

Parents can cancel an appointment by text message (if BSUH hold a phone number for them) or over the phone.

-NEW PATIENT- if parent phones/texts to cancel.- Booking Hub sends a letter to GP and parent saying that cancellation requested.

-F/up Appointment- parent wishes to cancel -admin staff to **contact the Consultant** (attaching last clinic letter)- consultant to decide whether to reappoint or not.

***When writing clinic letters if you book an appointment with a view to possible cancellation if condition improves - please state this clearly on your letter.***

## **Template Letters**

### [WNB Template letter 1](#)

As health professionals we have a duty to protect children and follow current NICE guidance we therefore have a clear pathway to identify children who are not brought to their appointments.

It has come to our attention that [patient x](#) has not been brought to two paediatric outpatient appointments at the Royal Alexandra Hospital. Whilst we appreciate that there may be many different reasons for this, we have clinical concerns and believe that [patient x](#) requires further follow-up (*be clear what is risk*).

For this reason we are offering you a further appointment and we expect attendance, this is important to prevent any deterioration.

If [patient x](#) is not brought to this appointment it may be considered a safeguarding issue. In some instances referral to our colleagues in social care is necessary. If you feel you have received this letter in error or your child has improved please do not hesitate to contact us.

[Cc – GP/Parents/Social care - if known social worker](#)

### [WNB template letter 2](#)

[Patient X](#) has not been brought to two outpatient appointments at the Royal Alexandra Hospital. In reference to our local guidelines and current NICE recommendations we have assessed the medical and social risk of non-attendance for this child to be low. We have therefore discharged the patient into your care, however if you have any concerns regarding this patient, please do not hesitate to contact us.

[Cc – GP/Parents](#)

## **References**

Did not attends in Children 0-10 years : Scoping Review Child Care, Health and Development [Arai et al. Full text](#)

Lisa Arai, Terence Stephenson and Helen Roberts, The unseen child and safeguarding: 'Did not attend' guidelines in the NHS, *Archives of Disease in Childhood*, **100**, 6, (517), (2015).