

Standard Operating Procedure 10 (SOP 10)

Management of DNA (Was not Brought) Appointments – Health Visiting And FNP

Why we have a procedure?

- To help protect children and young people by supporting flexibility in accessing services.
- To manage non-attendance within the Pre-school service.
- To protect vulnerable children and families.

What overarching policy the procedure links to?

Did Not Attend (DNA) and Cancellation Policy.

Which services of the trust does this apply to? **Where** is it in operation?

Group	Inpatients	Community	Locations
Mental Health Services	x	x	x
Learning Disabilities Services	x	x	x
Children and Young People Services	x	✓	Pre-school Service

Who does the procedure apply to?

All Pre-school staffs.

When should the procedure be applied?

For all children aged between 0-5 years on the Health Visiting caseload (0-2 years on Family Nurse Partnership (FNP) caseload).

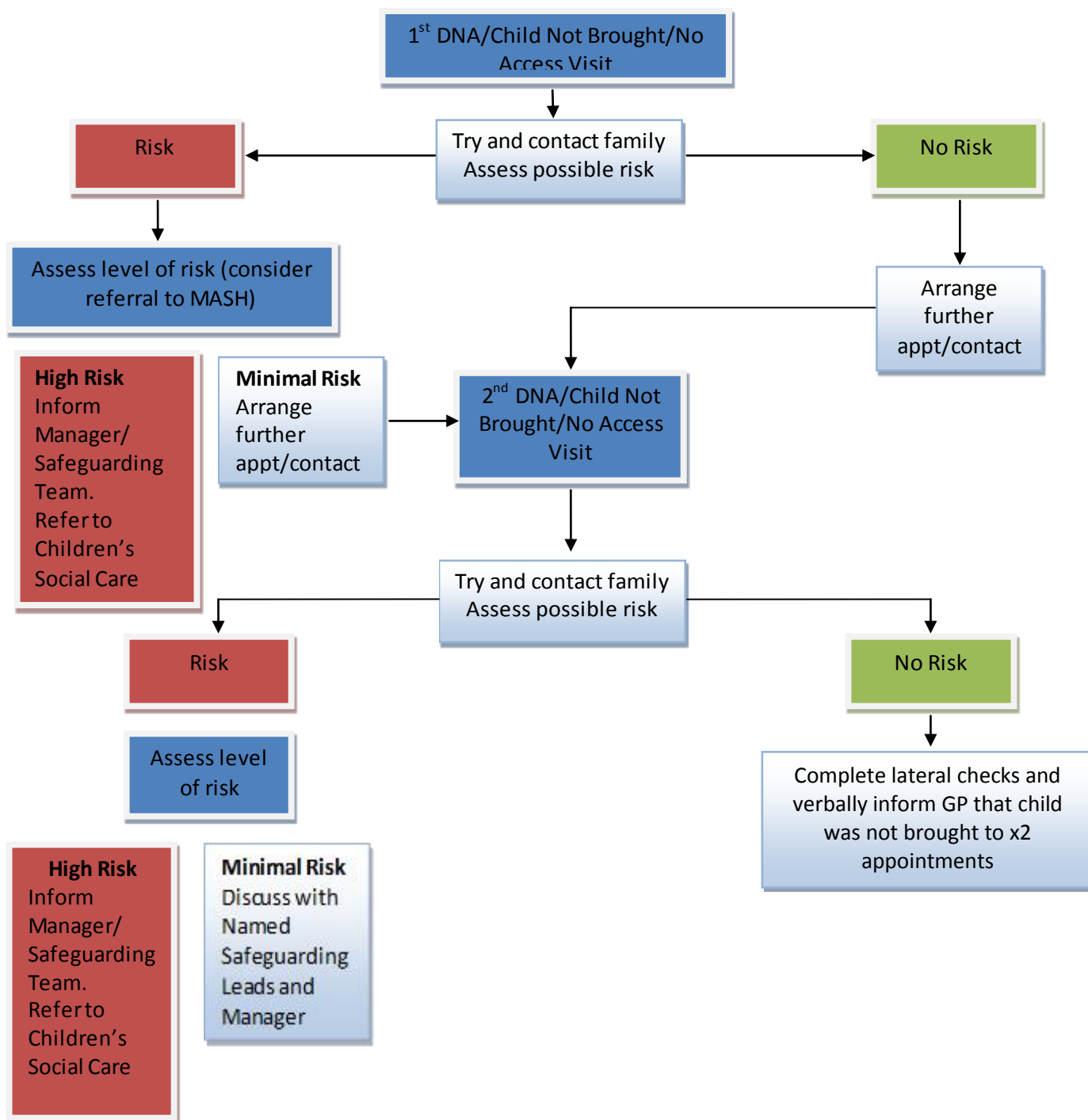
For all mothers on Health Visiting and FNP caseload.

How to carry out this procedure (step-by-step information)

- All universal families will be offered a maximum of two appointments for each contact as specified in the Healthy Child Programme with the exception of the New Birth Visit where every attempt will be made regardless of the amount of DNA/No access appointments.
- Appointments for Universal Plus and Partnership Plus will be continually followed up and completed as appropriate.
- Practitioners should determine follow up requirements on an individual basis. The welfare of the child or young person is the most important consideration when making decisions about follow up following non-attendance.

- Telephone contact will be made where possible if the child is not brought to the appointment/not at home for home visit to ascertain the reason for non-attendance. Practitioners should work with other professionals to ensure the family's contact details are up to date
- Parent/Carer will be offered an alternative appointment and a letter confirming the appointment will be sent via post.
- Parent/carer will be notified that another appointment will not be made if they do not attend the rearranged appointment.
- Health Visitors should risk assess if the child is at any risk and whether they may require further investigations.
- Opportunistic visits should be made as and when appropriate, calling card should be left asking parent to contact the team. If family no longer at address, follow No Trace Procedure.
- All non-attendance will be documented in the child's record.
- If a universal child DNAX2 appointments, the Health Visitor will complete lateral checks with the GP including checking address and any flags on the GP system, as well as checks with social care. The Health Visitor will verbally inform the GP that the child has failed to attend x2 appointments.
- If a universal plus or universal partnership plus child DNAX2 appointments, the Health Visitor will complete lateral checks with the GP including checking address and any flags on the GP system. The Health Visitor will also liaise with the other professionals involved and social care as appropriate and every effort will be made to complete the necessary contact.
- All non-attendance will be recorded on Oasis.
- At each stage, professional judgement, informed by an assessment based on a child's development, current family situation must be made in order to consider whether further action should be taken.
- Neglecting health needs (by not being brought to appointments) can become a safeguarding issue.
- Practitioners have a responsibility to inform others involved in a child's care if they are concerned about disengagement.
- By declining health services or treatment there may be a detrimental effect on the child or young person's health, growth or development, an assessment should be made of the risk this may pose to the child or young person. Declining the service should be documented within the child's record.
- If the child or young person is known to Children's Social Care Services; is a looked after child, child in need, subject to Early Help or subject to a child protection plan; the practitioner will inform the social worker (and/or Early Help

Lead if child is subject to Early Help) or residential unit involved. If there is no allocated social worker and/or the health professional considers the child or young person to be vulnerable or at risk of harm, a referral should be made as per the Trust Safeguarding Children and Young People Policy.



Families on Family Nurse Partnership (FNP) Programme

FNP is voluntary, home visiting programme offered to first time teenage parents 19 years and under. The Family Nurse completes all elements of the Healthy Child Programme. The visit are usually home visits and due to the voluntary nature of the programme Did Not Attend/Not brought SOP/No Access is always considered within the holistic social, emotional, physical, environmental context and from a safeguarding perspective.

National FNP guidance should be referred to: http://api.ning.com/files/p856-sPv3R-Rf9kR92yeEYTV3C*VV8tHOH2behOhEaAO8-hSBHjWp3MihYjEEEWUJVw-hKaz4EFLD*020ZaRKdZkDdvmpXeB/DisengagementExitTransferofanFNPclient.pdf

Where do I go for further advice or information?

Dudley Safeguarding Team
CYPF Risk and Safety
CYPF Service Manager for Pre-school and Specialist Nursing Services
Pre-school Team Leaders
Healthy Child Programme

Training

Staff may receive training in relation to this procedure, where it is identified in their appraisal as part of the specific development needs for their role and responsibilities. Please refer to the Trust's Mandatory & Risk Management Training Needs Analysis for further details on training requirements, target audiences and update frequencies.

Monitoring / Review of this Procedure

In the event of planned change in the process(es) described within this document or an incident involving the described process(es) within the review cycle, this SOP will be reviewed and revised as necessary to maintain its accuracy and effectiveness.

Equality Impact Assessment

Please refer to overarching policy.

Data Protection Act and Freedom of Information Act

Please refer to overarching policy.

Standard Operating Procedure Details – to be completed by Corporate Governance

Unique Identifier for this SOP is	BCPFT-CYPF-SOP-03-10
State if SOP is New or Revised	New
Policy Category	Dudley CYPF – Pre-school
Executive Director whose portfolio this SOP comes under	Executive Director of Nursing, AHPs and Governance
Policy Lead/Author Job titles only	Project Support Officer CYPF
Committee/Group Responsible for Approval of this SOP	CYPF – Quality & Safety
Month/year consultation process completed	October 2018
Month/year SOP was approved	April 2019
Next review due	April 2022
Disclosure Status	'B' can be disclosed to patients and the public

Review and Amendment History - to be completed by Corporate Governance

Version	Date	Description of Change
1.0	Oct 2018	New SOP for BCPFT