

Did Not Attend / Cancellation Policy

v1.0

Document Information

Title of document	Did Not Attend/Cancellation Policy
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Type of document	Level 1 Policy
Purpose of document	This policy provides the process for dealing with Wheelchair Service users who Did Not Attend (DNA), cancel or re-arrange first or subsequent appointments for each episode of care, whether this is for the first time, or multiple times. It also details the process for children who Were Not Brought (WNB) to their appointments by those with parental responsibility.
Target audience	All Millbrook Healthcare Wheelchair Staff and Service Users
Distribution	Millbrook Healthcare Intranet (electronic) AssessNET Portal (electronic incident reporting system) Wheelchair Service websites
Consultation	Directors, Service Managers, Clinical Leads
Approved by	Tim Pollard, Director of Contracts and Tenders
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Document Control

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1.0	New document		Initial Issue	Lesley Papworth, National Wheelchair OT

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1. Introduction

Millbrook Healthcare is a national service provider to the NHS and Local Authorities for community equipment services, wheelchair services, home improvements and assistive technology.

The length of time that a service user waits for an appointment or treatment can impact on their experience with the Wheelchair Service. It is also an important quality issue, and is a visible public indicator of the efficiency of the wheelchair contract.

The NHS constitution provides service users with the right to access services within maximum waiting times. Commissioners have also identified a number of local targets whereby service users must be offered an appointment and seen, within a set number of weeks.

Millbrook Healthcare will seek to ensure that all service users are seen as early as possible during their pathway. However, one of the major obstacles to this is when a service user Does Not Attend (DNA) or cancels their appointment. This results in an inefficient use of clinical time and an appointment slot remains unused rather than being offered to another service user, thereby impacting on the waiting time for all service users. Throughout this policy, the term "DNA" also refers to situations when children are not brought to their appointment by those with parental responsibility, i.e. Was Not Brought (WNB).

2. Purpose

This policy aims to inform all relevant staff and service users about how Millbrook Healthcare will respond when service users DNA or cancel appointments and clarifies the exceptions to the policy. It adheres to the principles of the Referral to Treatment (RTT) national guidance (although not mandatory for Wheelchair Services) and aims to ensure that all service users receive treatment in accordance with the NHS Constitution. It also ensures that all relevant staff employed by Millbrook Healthcare apply a clear and consistent approach to dealing with service users who DNA or cancel their appointment. To encourage maximum awareness and the implications of this policy, it will be disseminated to service user groups and local healthcare partners.

The principle of the policy is to support the effective treatment of service users through their respective pathways, in terms of their safety and clinical outcome, as well as providing an efficient service for all users.

Whilst it is acknowledged that there are many reasons appointments may need to be rearranged, even at short notice, this can hinder a service user's treatment and support. In addition, DNAs and cancellations lead to unused appointment slots, which is both an inefficient use of staff time and delays the treatment of other service users.

We recognise that service users may choose to wait longer for an appointment and we are keen to support service user choice. However, Millbrook Healthcare should not be penalised if their waiting time performance is negatively affected by facilitating service user choice. It is therefore essential that procedures are in place to mitigate this. As a result, this policy also includes reference to how DNAs and cancellations impact on waiting time. We will also consider ways to reduce DNAs where possible by utilising technologies to send reminders prior to appointments and ensure that service users are contacted in the most appropriate manner taking into account their diverse needs.

Variations from the policy will be according to clinical risk and will be fully documented; the Wheelchair Service reserves the right to advise and consult with health and social care and education colleagues on missed appointments and non-engagement with bookings, without

the service user’s permission, if it is felt to be in the interest of safety for that service user. Standard Operating Procedures (SOPs) will give specific guidance to staff.

3. Scope

This policy applies to all staff employed by Millbrook Healthcare regardless of their job role, length of service, seniority, type of employment, length of contract, place of employment or the service they are employed in. The policy also applies to all service users or persons for whom we are commissioned to provide a wheelchair service.

The policy will be applied fairly and consistently to all employees and service users regardless of their protected characteristics as defined by the Equality Act 2010 i.e. age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation.

The organisation will also make reasonable adjustments to the processes within this policy so as not to disadvantage any employees or service users with disabilities. On request, any employee or service user who has difficulty in communicating, verbally or in writing, will have arrangements put in place as necessary to ensure that this policy and the processes within are understood, and that they are not disadvantaged in any way.

4. Explanation of Terms

For the purposes of this policy the following terms apply:

Term	Explanation
DNA / did not attend WNB / was not brought	Where a service user misses an appointment with no prior notice and without a valid reason (see UTA definition). A DNA or WNB is considered to have occurred when the service user had a written reminder of the appointment (i.e. appointment letter).
Cancellation UTA / unable to attend	Where a service user gives less than 24 hours’ prior notice that they are unable to attend a previously agreed appointment, where they miss an appointment with no prior notice but were not sent a written reminder of their appointment, or where they miss an appointment without prior notice but non-attendance was beyond their control (eg. transport was late, or they required urgent medical treatment or hospital admission)
Cancellation re-arrange	Where the service user has cancelled an appointment more than 24 hours’ prior to the commencement time of the appointment, or where the service itself re-arranges an appointment at any point

Vulnerable Adult	A person aged 18 years and over “who is or may be in need of community care services by reason of mental or other disability, age or illness”; and Including some people who may have capacity as well as those who do not. Who is or may be unable to take care of him or herself or unable to protect him or herself against significant harm or exploitation
Child	Anyone under the age of 18. If a child has reached 16 years of age, is living independently, is in further education, is a member of the armed forces, is in hospital, or in custody does, this does not change their status or entitlements to services or protection.

5. Duties and Responsibilities

The **Clinical Director** is responsible for ensuring that they and those employed within their directorate fully understand and comply with this policy, associated policies and any relevant legislation.

All **Managers** are responsible for ensuring that they and any staff they manage fully understand and comply with this policy, associated policies and any relevant legislation.

All **staff** are responsible for ensuring documentation, and information for service users is legible and free of abbreviations, dated and timed, and signed with their name and designation clearly printed. Any information given to service users should be made available in the appropriate language and format preferred by the service user. Interpreters should be engaged where necessary to ensure service users have as full an understanding as possible as to the implications of this policy.

It is also the responsibility of all staff who arrange or conduct appointments with service users to ensure that they are familiarised with the requirements of the policy and that they are assured that these requirements have been conveyed to service users. Service users will be advised of the policy in the appointment letter.

6. Exceptions

All DNAs, cancellations and re-arranged appointments will be noted in the service user’s record. Millbrook Healthcare is committed to ensuring the safety of our service users.

Flexibility will be maintained where a clinician has judged that it is in the best interests of the service user to refrain from any part of the policy (other than a DNA for a first appointment). Other exceptions include children and vulnerable adults.

Reasonable exceptions to being able to attend an appointment include emergency medical appointments, hospital admission, unexpected non-availability of carers or next of kin or booked transport being too late to enable attendance.

7. Children, vulnerable adults and non-attendance of appointments

A heightened response by Millbrook Healthcare staff must be evident for non-attendance of appointments for children who are reliant on others to bring them to appointments. This is in

order to help reduce the risk associated with the needs of children, who typically do not have control over such matters.

To this end, non-attendance of any paediatric appointment will be highlighted to a clinician for assessment of risk.

It should be remembered that the Wheelchair Service, by its nature, is involved with a child's care infrequently, and therefore staff are not likely to be as familiar with circumstances around the child as other external professionals may be.

In the first place, the Service will be reliant on information provided by other professionals and organisations, for example if the child is under Child Protection or a Child in Need plan. Should the Wheelchair Service be advised of this, an alert will be put on the child's database (MillFlow) record, and an incident raised on AssessNET for information purposes. In these cases, the first non-attendance or cancellation of any appointment will be reported on AssessNET and raised with associated professionals by either the allocated or Duty Therapist.

Where children are not under Child Protection or Child in Need plans, the third actual WNB will result in the therapist raising an incident on AssessNET, or this may occur earlier if the therapist deems it appropriate.

However, whatever the circumstances for the child, it is essential that the Wheelchair Service is recognised as part of the multi-disciplinary team around the child, and therefore vigilance is required at all times by all Wheelchair Service staff, and contact made with external professionals if there is concern for the welfare of the child.

Similar guidance will be employed when dealing with non-attendance of appointments by vulnerable adults, but the term WNB will not be used. However, it should be remembered that Customer Services will not know when an adult is vulnerable, and therefore response to risk will only occur after the first appointment and when the non-attendance has been referred to a clinician for consideration.

8. DNA / UTA / Re-arrange Process

a. DNA

- i. Service users who DNA any appointment will automatically receive communication along with the original referrer within five working days.
- ii. It is important that Millbrook Healthcare can demonstrate that the appointment was formally communicated to the service user, therefore this must be recorded within the service user record.

Multiple DNAs will not result in the referral being closed, without due clinical consideration to safeguarding and risk.

Millbrook Healthcare should endeavour to ascertain reasons for DNAs in order to identify any recurring themes and identify any improvements required to the appointment booking process.

b. Cancellations / UTA

- i. Service users who are unable to attend for valid reason will be offered a further appointment, and the referrer will only receive notification should it be deemed clinically necessary

c. Cancellations / re-arrangements

- i. Where the service user requests to re-arrange an appointment, a new appointment will be booked; the referrer will not be advised
- ii. If it is necessary for the service to re-arrange an appointment at any point (eg. due to unplanned sickness, or equipment will not be received in time), the service user will be contacted accordingly; the referrer will not be advised

If a service user cancels or re-arranges multiple appointments, the matter will be raised by Customer Services to the allocated or Duty Therapist, who will consider the clinical risk and action accordingly. This may include contacting other health, social care or education professionals in order to obtain information and facilitate a multi-disciplinary approach, and may also include raising an incident on AssessNET. This would also be considered if a service user cancels the first appointment of pathway, where the service user is already known to the service and has a history of not attending appointments. For example, if a service user has a history of cancellations from previous closed referrals.

Where a service user cancels their first appointment of their first episode of care to the service, stating that treatment is no longer required, the service user is removed from any waiting list and their clock stopped (i.e. the referral is closed). A closure letter will be sent to the service user, the referrer and their GP, detailing the reason for the service user's decision to cancel the referral pathway. If the service user cancels the first appointment of any subsequent episode of care, this will be referred to the Duty Therapist for consideration of risk.

Where a service user advises the Wheelchair Service that treatment is no longer required at any later point in the pathway, the allocated therapist will consider if this action is introducing risk and ensure that there are no safeguarding concerns

Any first or subsequent non-attendance for a child, at any point in the pathway, whether this is a WNB, a cancellation or a re-arranged appointment, will be highlighted to a therapist for consideration of risk, possible action or advice to Customer Services on action to take.

- iii. Local waiting time targets
 - At the earliest opportunity following receipt of a referral at the Wheelchair Service, a service user will be offered up to three appointments. The appointments offered must be within a reasonable time period for the service user to be able to accept them. (i.e. 5 working days in the future, in order to allow them to arrange availability of carers and transport, and for them to receive an appointment letter).

9. Training

A suitable training package is being developed for all appropriate staff to ensure the awareness of the policy and the RTT/waiting times. These are currently covered in clinical operations meetings but a more tailored approach will be adopted and implemented locally.

10. Associated Documents

NHS Constitution:

<http://www.nhs.uk/choiceintheNHS/Rightsandpledges/NHSConstitution/Pages/Overview.aspx>

Consultant-led RTT Guidance:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/198930/Referral_to_treatment_Rules_Suite.pdf

Allied Health Professional RTT Guidance:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/215248/dh_131969.pdf

Safeguarding Policy:

<https://portal.assessweb.co.uk/uploads/317372/4otl1OuoVAoQgxc/Safeguarding%20Policy%20v2.1.pdf>

11. Policy Review

This Policy will be formally reviewed every 2 years by the Clinical Director. Any amendments undertaken during this period as a result of legislative or organisational change or as a result of the monitoring process will be notified to staff.

12. Policy Monitoring

Compliance with this Policy will be monitored as part of the Clinical Audit Programme which audits all Service Centres annually and is overseen by the Clinical Governance Group.