

Antenatal DNA Policy - Follow up of Women Who Fail to Attend Their Appointment for Antenatal Care

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Approved by Maternity Quality Governance Meeting on:	17 th January 2020
Review Date This is the most current document and should be used until a revised version is in place:	15 th November 2022

Key Amendment

Date	Amendment	Approved by
17 th Jan 2020	New document	Maternity Governance

Introduction

Saving Mothers Lives (CEMACH 2007) identifies that around 20% of women who died from direct or indirect causes missed more than four routine appointments, did not seek care at all or actively concealed their pregnancies. This delay denied them the opportunities that early maternity care provides for mother, baby and family.

This guideline includes guidance on action to be taken when women fail to keep any antenatal appointment in any care setting. Women who fail to attend their appointments require follow up to ensure they are offered appropriate care.

Midwives have a responsibility to ensure that services are accessible to women in the local community that women and their families are aware of the services available to them and that women who do not attend for appropriate care are followed up and given every reasonable opportunity to receive midwifery care.

Guideline

See also **Antenatal Non-attenders Flow Chart (appendix 1)**

Missed appointments

Responsibilities of relevant staff group. It is the responsibility of all staff groups to document when a woman fails to attend any appointment during the antenatal period, detailing the type of appointment missed.

Follow up of women who fail to attend a Consultant Antenatal Clinic appointment

Women who fail to attend a Consultant Obstetrician's Antenatal Clinic appointment should be followed up to ensure they are offered appropriate care. Non-attendance is a known risk factor for poor outcomes and a possible indicator of domestic violence, see appendix 1 of Domestic Abuse guideline.

All booked appointments should be recorded on the electronic booking system. All case notes should be available at the time of the appointment.

At the end of the clinic women who have not attended need to be followed up by a midwife.

The midwife must discuss with the Consultant and decide on the timing of the follow-up appointment.

Before further appointments are sent out all written or electronic records need to be checked to establish any possible reason for the non-attendance e.g. miscarriage, delivery, transfer to another hospital or change of address.

A new appointment should be sent to the woman for the next available clinic for their designated consultant.

After a **second** consecutive non-attendance the notes/records and alert register are checked and confirmation of the woman's contact details should be obtained from the GP's surgery. **The midwife must discuss with the Consultant** and decide on the timing of the follow-up appointment. This must be actioned within 48 hours.

If there is no obvious reason for the non-attendance then a follow-up of non-attendance form (WR1806) is sent out to the woman's community midwife to contact and visit the woman to ascertain the reason for non-attendance and take appropriate action and arrange further appointment as required.

The community midwife should return the completed non-attendance form to the antenatal clinic within 14 working days. Antenatal clinic midwives will update their records and hospital notes with this information.

The Specialist Midwife should be contacted to see if the patient is known to her and to check if there are any outstanding safeguarding issues.

N.B. Risk factors and gestation should be taken into account when reviewing the notes. Earlier intervention may be required i.e. do not wait for a second non-attendance.

Follow-up of women who fail to access midwifery care during the antenatal period:

Responsibilities

Midwives are responsible for ensuring that services are accessible to women in the local community; that women and their families are aware of the services available to them, and that women who do not attend for appropriate care are followed up and given every reasonable opportunity to receive midwifery care.

All midwives must provide care that is safe and effective for women and their families.

All women who do not attend a midwifery appointment are followed up to ensure appropriate midwifery care has been/will be received.

All women who are not at home for an agreed visit will be followed up to ensure appropriate care has been/will be received.

All women will be made aware of the importance of antenatal and postnatal care for the health and wellbeing of themselves and their babies.

Objectives

Midwives will be aware of the increased risk to women and their babies of frequent non-attendance for midwifery care. Midwives should be aware of the guidelines for appropriate follow up of non-attendees. Midwives should offer women reasonable access to midwifery care in the community.

Midwives should ensure that women who do not present for care are identified, clear records kept and alternative access to care offered. Where a woman is identified as not accessing appropriate midwifery care, midwives should communicate with all relevant agencies. [GP, Hospital, Midwives, Specialist Midwives, Health Visitors, Children's Social Services]

Process

If a woman fails to make herself available for an initial booking appointment:

- Midwives should review records, contact GP or Hospital to confirm that the pregnancy is still ongoing. Check if address correct. If the woman has pre-school/school age children, midwives should liaise with health visitor and/or school nurse.
- Midwives should contact the woman and arrange an alternative appointment.
- Where telephone contact cannot be made a further appointment should be sent by post.
- If a woman fails to be available for a second appointment a further letter should be sent encouraging the woman to contact the midwives.
- The case should be discussed with the relevant specialist midwife to see if they are aware of the patient and if there are any outstanding safeguarding issues.
- If a woman fails to contact the midwives, the midwife responsible for coordinating her care should arrange to visit the woman's home and offer to discuss when it would be appropriate for her to complete the booking process.
- If the named midwife fails to gain access at this point, she should: contact the woman's GP explaining her concerns; contact the Community Team Leader to inform of concerns; discuss the case with the Specialist midwife, for her to follow-up the patient if appropriate and refer the woman to the consultant unit.
- Midwives should keep accurate records of contacts made and appointments offered within the community midwife team office. Copies of letters should be included in a woman's hospital notes.
- If a woman fails to make herself available for subsequent antenatal care the above actions should be repeated.

When women do not attend midwives should consider:

- Are there domestic abuse issues?
- Are there child protection issues?
- Are there social problems?
- Is the woman fully aware of the need to access care?
- Has the woman been offered appropriate and accessible care?
- Has the woman left the area? If so, midwives need to pass on information to the new area when known or to social services if destination not known. If the woman has left the area and the Safeguarding Children team has been involved please notify team so they can liaise with the specialist nurse in that area.

Documentation

Good communication is vital between the multidisciplinary team to ensure everyone involved is aware that the woman is not accessing antenatal care. Each time a woman fails to attend an antenatal appointment, the Midwife involved in the care is responsible for ensuring that this is documented in the maternal records. **A missed appointment proforma should be completed for each appointment missed.**

Missed antenatal ultrasound appointments

If any obstetric ultrasound appointment is missed, midwife sonographer or midwife working in Antenatal Clinic will investigate if woman has:-

- Miscarried
- Given birth or is a hospital inpatient
- Moved out of area or is still registered with the same GP
- Has an appointment elsewhere or has changed her appointment

If none of the above is applicable the midwife sonographer/Antenatal Clinic midwife will contact the woman by telephone or send a further appointment by letter.

If a woman does not attend an ultrasound department appointment the sonographer informs the Antenatal Clinic, and the Antenatal Clinic midwife will contact the woman as above. All missed appointments and actions taken should be documented in the hospital maternal records and discussed with the Consultant.

Missed Antenatal Day assessment Unit (DAU) appointments

If any woman fails to attend a DAU appointment the Midwife running the DAU is responsible for contacting the woman and rearranging the appointment.

If the woman needs to be reviewed the same day and the DAU Midwife is unable to make contact within working hours, the labour ward co-ordinator must be informed and follow up arranged. This should be documented in the DAU diary.

If contact with the woman not possible the Midwife in DAU will need to inform original referrer to follow up.

All missed appointments and actions taken should be documented in the hospital notes.

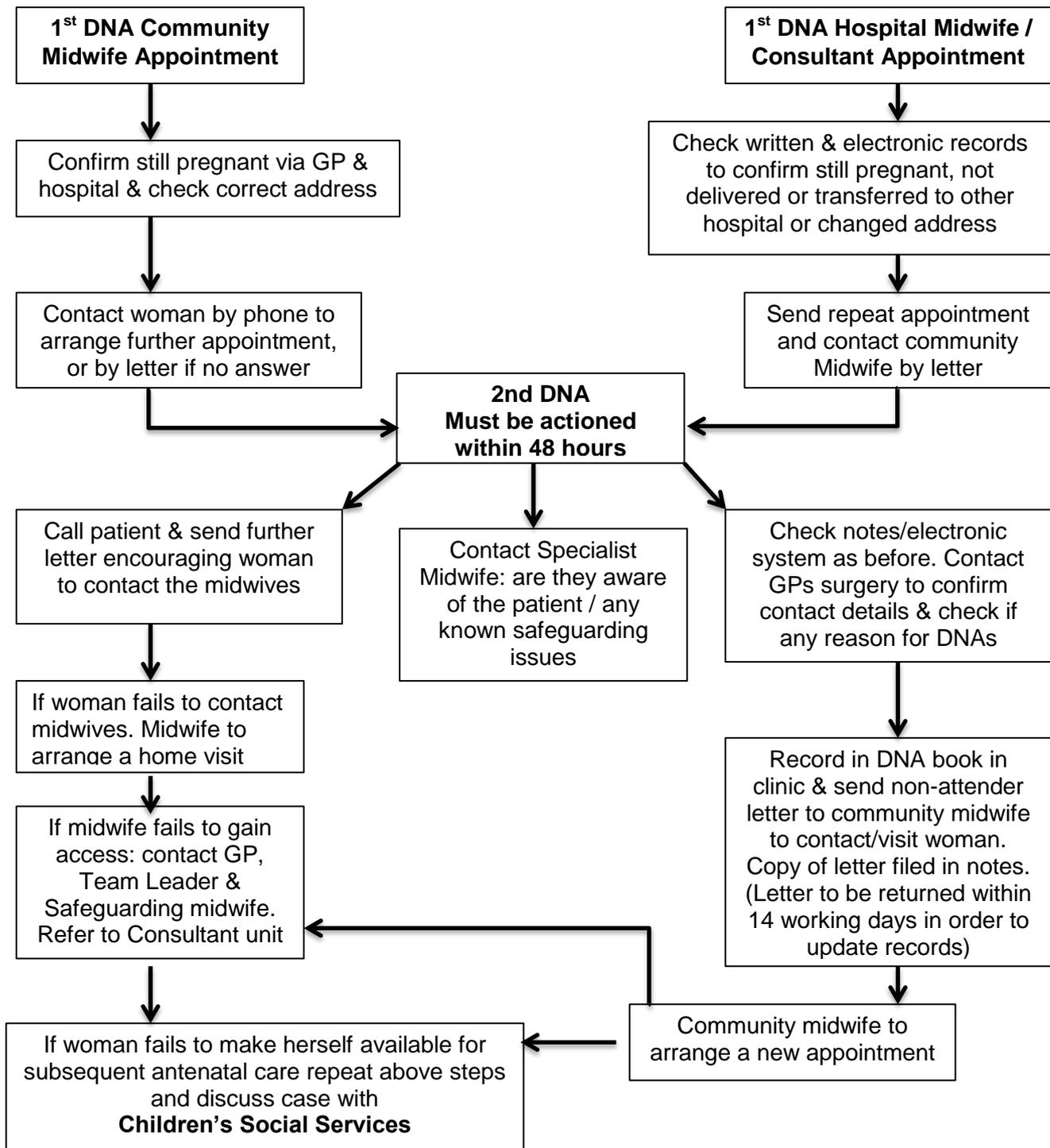
Missed Triage appointments

If patient does not attend after being accepted for a Triage appointment, the Triage Team should attempt to contact within four hours. If unable to make contact the labour ward co-ordinator must be informed and follow up arranged as per individual indication.

Missed Quad Clinic appointments

If any woman fails to attend a quad clinic appointment, it is the responsibility of the midwife running the clinic to contact the woman directly by telephone and re-arrange the appointment. If the woman cannot be contacted by telephone a letter with the new appointment is sent to her home address. This letter should outline the gestation-limited timeframe for testing. The screening coordinator and community midwife should be informed of the non-attendance. If a further appointment is missed, the community midwife will be asked to visit the woman at home to clarify the situation.

Appendix 1 - Antenatal non-attenders flow chart



Risk Factors and Gestation should always be taken into account, as earlier intervention may be required. i.e. DO NOT WAIT UNTIL 2nd DNA. Midwives should keep accurate records of all appointments offered. Copies of letters should be included in the woman's notes.

References

Contribution List

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

Designation
All members of the Maternity Quality Governance Meeting

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

Committee
Maternity Quality Governance Meeting

Supporting Document 1 - Equality Impact Assessment Tool

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

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	Race		
	Ethnic origins (including gypsies and travellers)		
	Nationality		
	Gender		
	Culture		
	Religion or belief		
	Sexual orientation including lesbian, gay and bisexual people		
	Age		
2.	Is there any evidence that some groups are affected differently?		
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?		
4.	Is the impact of the policy/guidance likely to be negative?		
5.	If so can the impact be avoided?		
6.	What alternatives are there to achieving the policy/guidance without the impact?		
7.	Can we reduce the impact by taking different action?		

If you have identified a potential discriminatory impact of this key document, please refer it to Human Resources, together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact Human Resources.

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	
2.	Does the implementation of this document require additional revenue	
3.	Does the implementation of this document require additional manpower	
4.	Does the implementation of this document release any manpower costs through a change in practice	
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	
	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.