NHS
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Missed Appointment Policy

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This policy is based on a template originally obtained from Practice Index and has been adapted for use by The Village Practice.

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1 Introduction

1.1 Policy statement

The purpose of this document is to provide guidance regarding the management of patients who do not attend their appointments. It is essential to make the best use of the clinicians' availability to ensure that all patients have access to appointments within an acceptable time frame.

This document sets out the procedures for monitoring and recording, and the required actions to be taken to effectively manage missed appointments at The Village Practice. Unfortunately, due to various reasons patients missing appointment is commonplace and General Practice has a high rate of DNAs. In particular, the Village Practice is also in an area of high deprivation where DNA rates are often higher. It is therefore essential that an efficient management system is in place. https://www.england.nhs.uk/long-read/reducing-did-not-attends-dnas-in-outpatient-services/

Although missed healthcare appointments have been a longstanding focus of policy, practice, and research, efforts have primarily centred on reducing isolated missed appointments and mitigating their impact on service delivery. Comparatively less attention has been given to understanding the underlying causes and consequences of repeated missed appointments in primary care, and the extent to which these patterns may reflect or contribute to health inequalities.

Given the nature of our patient population, a traditional approach to 'Did Not Attend' (DNA) management may not always be appropriate. Instead, a more proactive and patient-centred approach is required, recognising that repeated missed appointments may be an indicator of vulnerability, barriers to access, or unmet health and social needs, rather than simply non-engagement with services.

Related studies from
University of Glasgow - Schools - School of Health & Wellbeing - Research - General Practice and Primary Care - Research - Developing interventions to reduce "missingness" in healthcare

Understanding the causes of missingness in primary care: a realist review | BMC Medicine | Springer Nature Link

1.2 Status

The Village Practice will aim to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the Equality Act 2010. Consideration has been given to the impact this policy might have regarding the individual protected characteristics of those to whom it applies.

2 Policy

2.1 Overview

A missed appointment occurs when a patient does not attend a scheduled appointment and has not provided at least 24 hours' notice to cancel or rearrange. Within this policy, such instances will be referred to as *Missed Appointments*. For appointments involving children and young people, non-attendance will be recorded as *Child Was Not Brought to Appointment (WNB)*, recognising the responsibility of parents, carers, or guardians in facilitating attendance.

To support consistency in clinical systems and reporting, the clinical coding term *Did Not Attend (DNA)* will continue to be used where required. However, in all patient-facing communications and throughout this policy, the preferred term will be *Missed Appointment*, reflecting a more patient-centred approach and recognising that non-attendance may be influenced by a range of personal, social, health, or practical factors.

2.2 Recording Missed Appointments

All missed appointments are to be recorded on the clinical system in the individual's healthcare record with the following SNOMED CT CODES:

- Did not attend – Reason given – 185326000
- Did not attend – No reason given – 270426007
- Did not attend – appointment mix-up – 185329007

Note - This should not be recorded as an active problem but as a code within the comments section.

The Village Practice will audit and review 'DNA' statistics on a regular basis, presenting this information at Practice Strategy meetings.

2.3 Preventative measures

In order to reduce the number of Missed Appointments, we will offer:

Easy cancellation: Rapid access is provided for patients who wish to contact the organisation to cancel an appointment, such as online cancellation functionality.

Appointment reminders: Patients are sent a text message to remind them about a forthcoming appointment. The reminder includes an explanation of how to cancel the appointment if it is no longer wanted.

Read back: The administrative team will ask the patient to repeat the details of the appointment to them to check that they have remembered and recorded it correctly.

Patient engagement: Discuss the issue with the Patient Participation Group (PPG) to highlight the numbers and plans for improving the DNA rates.

Patient information on website: This will detail the policy for dealing with patients who fail to attend their appointments.

2.4 Managing Missed Appointments (face-to-face appointment)

New Missed Appointment Follow-Up Process

Given the nature of our patient population, the Practice recognises that missed appointments may be associated with a range of factors, including health conditions, social circumstances, vulnerability, communication barriers, or competing priorities. As such, the Practice will adopt a supportive and patient-centred approach to managing missed appointments. We will no longer send letters to patients, unless they have opted out of SMS text messaging. In these cases, we will send a letter as per annex A.

1. Following a Missed Appointment

- After each missed appointment, a standard text message (See Template A on page 8) will be sent to the patient informing them that they missed their appointment and inviting them to contact the Practice if they require further support or wish to re-book. The clinician responsible for the appointment must ensure that the appropriate 'DNA' code is entered into EMIS and that the text message is issued.

- Where a patient is identified as having mental health needs, safeguarding concerns, learning disabilities, social vulnerabilities, or other known barriers to engagement, an alternative text message will be used – template B. This message may be personalised to reflect the individual's circumstances and signpost them to appropriate support where required.

2. Repeated Missed Appointments

- Where a patient has missed more than two appointments within a 3-month period, Patient Services Team Manager will attempt to contact the patient by telephone.

The purpose of this discussion will be to:

  - Understand any factors contributing to the missed appointments.
  - Identify any support that may help the patient attend future appointments.
  - Consider whether reasonable adjustments or alternative methods of access are required.
  - Reinforce the importance of attending booked appointments or notifying the Practice if they are unable to attend.

- Explain the potential consequences of persistent, missed appointments, including the possibility of removal from the Practice list as a last resort and in accordance with NHS guidance and Practice procedures.

3. Exemptions

This process will not apply to patients who are homeless or those identified as vulnerable and who have been specifically authorised to access healthcare through a drop-in appointment model. The Practice recognises that traditional appointment systems may present significant barriers for these groups, and alternative arrangements will remain in place to support equitable access to care.

4. Cancelled appointments via text message

Patients who cancel an appointment by text message and are therefore excluded from the missed appointment process may still require safeguarding consideration if they are vulnerable or experience difficulties accessing services. In these circumstances, the practice has limited opportunities to safety-net non-attendance other than adding a note to the triage record for Patient Services to alert the GP if the patient does not attend. Where there are concerns about a particular patient, the GP should send an administrative task on EMIS as a reminder and notify the practice Safeguarding Manager, for review and case management as appropriate.

5. Removal from the Practice List

Removal from the Practice list will only be considered as a final option after all reasonable efforts have been made to engage with the patient, understand and address any barriers to attendance, and provide appropriate support. Any decision to remove a patient from the Practice list will be made in accordance with relevant NHS contractual requirements, safeguarding responsibilities, and Practice policies and made by the Partners and senior management team.

Prior to informing the patient using the most appropriate communication method for the patient, the GP partner will assess whether removing the patient from the organisation's list would be detrimental to the patient's health or wellbeing and cause significant harm. Should the decision be made to remove the patient from the list, the organisation will consider this BMA guidance.

Text messages (or letters for digitally excluded patients) sent to patients are valid for a 12-month period.

2.5 Managing failed telephone encounters

To ensure patient safety and continuity of care, all failed telephone consultations must be appropriately documented and followed up.

Pre-booked Telephone Consultations

Where a patient does not answer a pre-booked telephone consultation:

1. The clinician must record the encounter using the code "*Failed Encounter – No Answer When Rang Back*".

2. The clinician should send a text message in the first instance – template D page 8, or request that the Patient Services Team contacts the patient to rearrange the appointment if there are any clinical concerns. Any action delegated to the Patient Services Team must be documented in the patient's record.
3. If the Patient Services Team attempts contact, this should be recorded as "Telephone Call to a Patient".
4. If the patient does not answer the follow-up call, this should also be coded as "Failed Encounter – No Answer When Rang Back".
5. A text message should then be sent asking the patient to contact the practice to rearrange their appointment. This must be recorded in the patient's healthcare record.
6. When the patient contacts the practice, staff should establish the reason the call was missed and document this in the patient record where relevant. This information may help identify barriers to access and improve future engagement.

Patient-Initiated Call Backs

Where a patient has requested a call back from a clinician and does not answer:

1. The clinician should make a second attempt to contact the patient later in the same session where clinically appropriate.
2. Before the end of the session, a third and final attempt should be made.
3. If the patient does not answer after three attempts, the clinician should record the encounter using the code *"Failed Encounter – No Answer When Rang Back".*
4. The patient should then be sent a text message asking them to contact the practice, or the Patient Services Team should be asked to contact the patient following the process outlined above.
5. When the patient makes contact, an appropriate appointment should be offered based on clinical need. Where there is any uncertainty regarding urgency or appointment type, advice should be sought from a clinician.

Exception

Clinicians may vary this process where there are concerns regarding patient safety, safeguarding, vulnerability, or urgent clinical need. In such circumstances, additional attempts at contact or alternative follow-up arrangements may be required.

2.6 Children and Young People – Child Was Not Brought (WNB)

The Practice recognises that children and young people are dependent on parents, carers, or guardians to facilitate attendance at healthcare appointments. In this scenario more attention is needed to review the circumstances of the missed appointment and if further action is required, in particular addressing safeguarding concerns if appropriate. Therefore, non-attendance by a child will be recorded as *Child Was Not Brought (WNB*) rather than *Did Not Attend (DNA)*, reflecting a safeguarding-focused approach that considers the child's welfare and any barriers to accessing care.

Where a child is not brought to an appointment, the missed appointment must be reviewed by the responsible clinician on the same day whenever possible.
The clinician will:

- Assess the level of clinical risk associated with the missed appointment.

- Consider whether direct contact with the parent or carer is required following the first missed appointment.
- Determine whether a welfare check, follow-up telephone call, or further action is necessary (i.e referral to Childrens Social Care)
- Consider any safeguarding concerns and escalate in accordance with the Practice Safeguarding Policy where appropriate.
- A summary of this contact and decision should be recorded on the child's record.

Actions following a missed appointment will be undertaken on a case-by-case basis, taking account of the child's clinical needs, vulnerability, safeguarding history, and any known risk factors. The welfare and safety of the child will remain the primary consideration in all decisions relating to missed appointments for children and young people.

Following a Missed Appointment (WNB)

- Where a child is not brought to an appointment, the appointment will be clinically coded as *Child Was Not Brought (WNB*) by the clinician who the appointment was booked with.
- Where no safeguarding or clinical concerns have been identified and attempts to make further contact have been unsuccessful, a text message may be sent to the parent or carer advising that the appointment was missed and encouraging them to contact the Practice to rearrange if required, using template text message C.
- Where safeguarding concerns are identified, this should be flagged with the safeguarding manager for discussion at the practice monthly Child Safeguarding MDT meeting. If urgent action is required, calling the duty Social Worker should be considered or a referral to Childrens Social Care.

Repeated Missed Appointments

- Where a child has not been brought to more than two appointments within a 3-month period, the Patient Services Team Manager or allocated clinician (all children who are Looked After or under Child Protection Plan will have an allocated GP) will attempt to contact the patient/guardian by telephone to:

    - Explore the reasons for the missed appointments.
    - Identify any barriers to attendance.
    - Offer support where appropriate.
    - Discuss any concerns regarding the child's access to healthcare.
    - Consider whether there are any safeguarding concerns that require further action or escalation.
    - A summary of this contact should be recorded on the child's record.

Missed telephone appointment

The same consideration should be given to a missed telephone appointment as a missed face to face appointment for a child, in reviewing any potential access to healthcare, safeguarding or clinical concerns. The template text message E, specifically for children and young people can be used where no concerns are identified.

2.7 Actions needed for missed Vaccinations

Actions following the *first* missed appointment:

- The nurse will send a further invitation to the patient
- A text message the parent or carer to ascertain the reasons behind the non-attendance. If appropriate, a copy of the WHO leaflet titled 'If you choose not to vaccinate your child, understand the risks and responsibilities' is to also be forwarded via text message.
- Any response from the parent or guardian will also be noted in the patient's clinical record, including if there is a valid reason not to attend or to vaccinate

a. Actions following the *second* missed appointment:
   - The responsible clinician will contact the parent or guardian (either face to face or via telephone) to discuss the reasons and the importance of the appointment or vaccination reiterating that this could be considered as a safeguarding concern
   - Additionally, in cases of missed vaccinations, the contents of the WHO leaflet should be reiterated, explaining the importance of childhood immunisations

b. Actions following the *third* missed appointment:
   - The responsible clinician or Patient Services Manager will contact the parent or guardian (either face to face or via telephone) to discuss the reasons why the child was not brought to appointment.
   - A summary of this contact should be recorded on the child's record.
   - Any response from the parent or guardian given face to face, by telephone or by letter will also be noted in the child's clinical record

c. Actions following any further missed appointment or failure to rebook:
   - When a child remains uncontactable and/or unvaccinated after a previous contact, this organisation will mark the patient record as either unable to contact or unvaccinated
   - The clinician noting that the child remains unseen or unvaccinated despite all attempts to recall the patient is to discuss their concerns with the safeguarding lead for referral to the Health Visitor Link meeting.
   - Should any clinician have significant concerns, they are to initiate a child protection referral using the contact numbers as below and as detailed within the Safeguarding Policy

3. Template Text Messages

A) Missed Appointment: DNA - Generic text. *[Snomed Code: Did not attend]*

We noticed you could not attend your appointment today at [time].
If you still need an appointment, please contact the practice on 0207 700 6464 or use our online form: https://accurx.nhs.uk/patient-initiated/f83664.

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If there was anything that made it difficult to attend, please let us know. We'd be happy to help.

B) Missed Appointment: DNA - Vulnerable Patient [adapt as required]
[Snomed Code: Did not attend]

We noticed that you were not able to attend your appointment today at [time].
We are happy to discuss any difficulties you may have attending appointments and how we can best support you. If you need information in a different format or require additional support to access our service, please let us know. To rebook, please contact us at 0207 700 6464 or https://accurx.nhs.uk/patient-initiated/f83664

C) Missed appointment for a child: DNA - CHILD Was Not Brought to appointment – to parent/carer. *[Snomed code: Did not attend]*

We noticed that [child's name] was not brought to their appointment today at [time].
We understand that families can sometimes face difficulties getting to appointments.
If there was a reason you were unable to bring [child's name], please let us know - this will help us understand whether there is any support we can offer.
*To rebook, please contact us on **0207 700 6464** or online https://accurx.nhs.uk/patient-initiated/f83664.*

D) Missed Telephone appointment: DNA Missed Telephone App (Generic)
[Snomed code: failed encounter]

We tried to call you today at [time] but unfortunately were unable to reach you. If you would still like to discuss your health concern, please contact the practice on 0207 700 6464 or use our online form: https://accurx.nhs.uk/patient-initiated/f83664.

E) **CHILD Missed Telephone appointment: DNA – Child Missed Telephone App (parent/carer) *[Snomed code: Failed encounter]***

We tried to contact you today about [child's name]'s appointment, but we were unable to reach you.
*We would like to check whether [child's name] still requires medical attention, and we can support you to access healthcare. Please contact the practice on **0207 700 6464** or https://accurx.nhs.uk/patient-initiated/f83664.*

If you are having difficulties answering calls, please let us know so that we can discuss how best to support you and your family.

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Annex A – Letter to patient

Dear [insert patient name],

We are sorry that you missed your appointment with **[Clinician Name]** on **[Date]**.

We understand that it is not always possible to attend an appointment or answer a phone call.

If you still need medical advice, please contact the practice on 0207 7006464 or use our online form *https://accurx.nhs.uk/patient-initiated/f83664.* . We will be happy to arrange another appointment for you.

If you no longer need an appointment, you do not need to do anything.

If there was a reason why you could not attend or answer our call, please let us know. This helps us understand any difficulties you may have, ensure that you receive the support you need and improve our services.

When appointments are missed, it can delay care and reduce the number of appointments available for other patients. If you cannot attend an appointment in the future, please let us know as soon as possible so we can offer it to another patient.

If your symptoms have changed, become worse, or you are worried about your health, please contact the practice as soon as possible.

Thank you for taking the time to read this letter. We look forward to hearing from you if you still need our support.

Kind regards,

Yours sincerely,

Practice Manager