**GP Appointments**

***Failed encounter for planned face to face***

Depending on booking reason consider either clinician contacting or asking admin to contact same day.

**Hospital / Community/ Allied health services**

Letter / notification received regarding a failed encounter (was not brought)

**GP Appointments**

***Failed telephone encounters***

-Consider calling twice

-text prompt and option to reply

*If older YP (with capacity) ensure you get permission from YP to talk to parent/carer*

Child not brought to health appointment guidance for primary care (previously DNA)

Consider : Do other agencies need to be informed? Children’s social care / secondary care/ CAMHS etc

Yes

No

**Code on EMIS**

**Child not brought to appointment 9Nz1**

Consider using cSG template to document your SG review/plan

**Please Consider:**

Are there any safeguarding concerns or indicators of neglect?

Is the child subject to a plan or looked after?

Have there been multiple DNA’s?

Are there MH, DV, substance misuse etc issues?

at home that may be compromising parenting?

If secondary care failed encounter they may need re- referral for the original complaint

To be decided on a case by case basis but consider rebook via either:

* Admin to call
* Clinician to call
* Text to prompt them to pick up/attend/reply
* Letter
* Consider use of safety net template to ensure they take up offer of appointment

**Child subject to a plan or looked after?** –Inform allocated social worker

**Under 5?** Bring to vulnerable child MDT to discuss with colleagues and health visitor. Do you need to refer to MASH?

**Over 5?** Consider discussing with school nurse and your colleagues. Do you need to refer to MASH? If sub threshold consider early help

**Doesn’t meet referral threshold?** Review case in meeting in 3-6 months