

# **CASTLEGATE AND DERWENT SURGERY**

## **Missed Appointments Policy**

## DOCUMENT CONTROL

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<b>List of Stakeholders who have reviewed the document</b>	
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### SUMMARY

This policy sets out the practices aims for how it will proactively deal with patients who fail to attend their appointments without providing the practice with advance notice (DNA's). It has been reviewed and updated to add further information relating to queries and issues raised by partners and patients since the introduction of the policy.

## **INTRODUCTION**

Over the past 12 months (October 2016-September 2017) there has been approximately 240 appointments per month where the patient 'Did Not Attend' (DNA), this means that there was either insufficient notice provided (less than 1 hour) or no notice at all that the patient could not attend for their appointment. As a result of these DNA's the practice's waiting times for next routine appointments cannot decrease and also resources and staff time are wasted.

The Practice and the Patient Participation Group (PPG) feel that action needs to be taken to reduce the level of DNA's to a minimum and has already increased the publicity around the number of DNA's the practice experiences each month. However, there needs to be further action taken to reduce the number of patients who persistently DNA. Therefore this policy has been created to outline how the practice intends to tackle patients who DNA for any appointment – GP, nurse or HCA without providing advance notification.

## **APPLICABILITY**

This policy is applicable to all patients registered with the Practice.

## **PURPOSE**

The purpose of this policy is to reduce the number of wasted appointments caused by patients who do not attend. This will be monitored through monthly Key Performance Indicators (KPI) which can be obtained from the clinical system.

## **DUTIES & RESPONSIBILITIES**

### **PRACTICE STAFF**

Practice staff have a responsibility to ensure that patients who fail to attend their appointments are accurately recorded on the clinical system to ensure that reporting for DNA's is accurate.

### **PRACTICE MANAGER**

The Practice Manager has responsibility for enforcing this policy, ensuring that staff members within individual teams are aware of their roles. They will also ensure that regular updates are provided to the PPG for monitoring.

### **PATIENT PARTICIPATION GROUP (PPG)**

The PPG are responsible for reviewing this policy and the KPI data which will be provided by the practice. KPI data will be made available at each PPG meeting where the figures can be discussed. Under no circumstances will individual patient information be discussed by the PPG.

## **PROCESS**

Within the clinical system (EMIS) where patients fail to provide advance notice that they are unable to attend for an appointment they are shown as "D" for DNA.

On a daily basis, or if this is not feasible the day after, reception personnel will check DNA status on EMIS to ensure it has been correctly recorded and that the patient did not provide any advance warning. They will then attempt to contact these patients via a phone call on a case by case basis to identify why the patient was unable to attend, this interaction will be recorded within EMIS using code 9N41.

Should any patient fail to attend more than 2 appointments within a 6 month period this will then trigger a letter from the practice – see Appendix A (also coded on 9NC3). The letter from the practice will remain valid for 12 months, should further DNA's occur then the patient will be asked to attend the practice and further advice regarding their care may be sought from NHS England if this is felt appropriate action.

The number of DNA's in each month and those that breach 3 will be monitored on a monthly basis and reported to the PPG.

It should be noted that exceptions will apply to this policy and special consideration be granted for patients with learning difficulties, severe mental illness, patients who are resident in nursing or residential homes and palliative care patients.

**If you have any concerns about this policy please contact the practice to discuss.**

## **REFERENCES**

“Best Practice for Did Not Attend Policies in GP Practices”, Healthwatch NE Lincolnshire

## **APPENDIX A**

### **Missed Appointment Letter to Patient**

Dear Patient

#### **Re: Non-Attendance of Appointments Made at Your Practice**

According to our records, you have booked and then did not attend two or more appointments at this practice over the last six months. These appointments may have been made with doctors, nurses or healthcare assistants with no prior notification of non-attendance provided.

We understand that on occasions there may be genuine reasons why you are unable to attend an appointment. If you feel this letter has been sent to you in error or you feel there were reasonable grounds for not attending please let us know.

Wasted appointments may mean another patient who wants to see their GP or nurse is unable to due to limited availability. We respectfully request that if something arises meaning you may miss or be late for an appointment in the future, you kindly let us know at least an hour in advance. Your appointment can then be given to someone else and a new one can be offered to you if needed.

As a practice we have approximately 240 missed appointments per month and are trying to deal with non-attendance and lateness proactively so that our services are not strained. Our procedure is to contact patients by telephone following their non-attendance and on the third occasion write to request that no further appointments are missed. Further non-attendance will result in action where you will be invited to attend the practice for a meeting to discuss this further. It is vital to reach a satisfactory conclusion at this stage prior to the involvement of NHS England leading to removal from the Castlegate and Derwent patient list.

If you have any queries regarding this matter please do not hesitate to contact the surgery.

Thank you for your co-operation

Yours sincerely

For Castlegate and Derwent Surgery