Clinical Standard Operating Procedure (SOP)

THE MANAGENENT OF PATIENTS WHO ' DID NOT ATTEND' (DNA) APPOINTMENTS RELATING TO ABORTION CARE

SETTING	Pregnancy Advisory Service (PAS, Unity Sexual Health), St Michaels and Southmead Hospitals
FOR STAFF	All clinical and admin staff working within the abortion service
PATIENTS	All women and children who have appointments with PAS, St Michaels and Southmead Hospitals

Standard Operating Procedure

Generally, patients who DNA a UHBW outpatient appointment are not followed up and are referred back to their GP. This approach is not realistic within the abortion service as there are legal limits on how late treatment can be offered and there are often vulnerabilities to be considered.

The main concerns within PAS are the extent to which women and children should be followed up when they DNA an assessment or procedure appointment. This guideline also addresses women and children who are late for appointments.

This guideline should be used by all staff working in the abortion service which includes staff at St Michaels and Southmead Hospitals.

Women aged 18 and over

- **DNA pre-abortion assessment either face-to-face or telephone**

Women will not be contacted unless there are concerns for the woman's welfare noted on either Medway/Millcare or the Clinical Record Sheet (CRS) received from the Central Booking Line (CBL). These concerns include mental health issues, domestic abuse, sexual assault, learning difficulties or any other vulnerability. If concerns are identified, discuss with the lead nurse or doctor to establish the most appropriate way to contact the patient. This may include contacting the safeguarding team / GP.

If no concerns are noted the CRS should be put in the notes cupboard with the clinic list where it will be kept for 1 month.

- **DNA appointment for abortion procedure (medical or surgical)**

Women who DNA an appointment for either a medical or surgical procedure should not be routinely contacted by PAS or ward staff.
If booked for a day case procedure, ward staff should always inform PAS immediately on [redacted] so they can follow this up.

PAS staff will check the notes and document the patient DNA. If safeguarding issues are identified they will make a plan involving Unity Safeguarding Team or UHB Safeguarding Team as appropriate.

- **DNA appointment for 2nd part of medical abortion**

Women who DNA the 2nd part of the abortion procedure either in hospital or at home should be contacted.

If ward staff are unable to contact the woman they should advise PAS of this as soon as possible, if this is a weekend or out of hours a message should be left on the PAS answer phone (see above).

PAS staff will try and contact the patient to explore the reasons for not attending or declining the 2nd part of the procedure. If unable to contact the patient, PAS staff will inform their GP by letter so they can follow this up and update the patient record accordingly. Discuss with safeguarding if they have not consented to contact with their GP.

If the women has changed her mind and now wants to continue with the pregnancy, PAS staff should contact the GP for referral to fetal medicine.

- **DNA post-abortion ultrasound scan**

Women are not scanned routinely following a medical abortion. They are only scanned if following assessment, there is uncertainty about whether the abortion is complete.

All women who fail to attend a post-abortion scan should be contacted by PAS staff. If they are unable to make contact, their GP should be contacted explaining the situation in case the patient presents with complications.

- **DNA post-abortion contraception appointment (PAS only)**

PAS staff should attempt to contact the patient and either rebook the appointment or direct to the GP. If vulnerabilities are noted and/or the patient has had a previous abortion the GP should be written to and advised of this.

- **Women who are late for their appointment**

PAS staff will always see women who are late for their appointment for the remaining time allocated to them i.e. if they have an hour appointment and arrive 20 minutes late they can still be seen for the remaining 40 minutes of their appointment. Every effort will be made to finish the consultation; if this cannot be done the woman will be brought back for a second appointment.

If a woman arrives after her allocated time slot she will be advised to rebook her appointment either through the booking line or through PAS.

If a patient has known vulnerabilities and finds it difficult to get to an appointment this will be taken into account where possible.

Children under the age of 18

(Young People under the age of 18 are referred to as children as per UHBW Policy)

If PAS Outreach Nurses are on duty they will follow up any DNA Under 18 patients as per below. In their absence this should be followed up by the PAS Nursing Team and Outreach Nurses informed.

- . **DNA Pre-abortion assessment**

Children will be contacted and another appointment will be offered in PAS or they will be referred to the Community Midwifery service if they wish to continue with the pregnancy. If they were referred by another service feedback will be given (with permission if possible).

If staff are unable to make contact by phone or text after multiple attempts (at least 3), their GP should be informed and the child advised of this by text. This is to try to avoid a concealed pregnancy.

If safeguarding concerns are noted on the referral form from another service, Medway/Millcare or the CRS from the CBL, this should be discussed with the PAS Consultant and the Unity / Trust Safeguarding Team and a referral to Children's Social Care via the Trust intranet site or a previously allocated social worker should be considered. The child should be informed of this by phone or text if possible.

- **DNA Appointment for Abortion procedure (medical or surgical)**

Children who DNA an appointment for either a medical or surgical abortion procedure will always be contacted. If PAS are unable to contact the child directly the supporting adult should be contacted.

Ward staff, Marie Stopes International (MSI) and British Pregnancy Advisory Service (BPAS) should inform PAS immediately if a child DNA an appointment for an abortion.

Another appointment should be arranged if appropriate informing the child and the supporting adult.

If they have changed their mind and do not want to proceed with an abortion, a referral should be made to the Community Midwifery service to try and avoid a concealed pregnancy.

If contact cannot be made, the GP should be informed of this. The child and the supporting adult will also be informed by text message if possible.

If safeguarding concerns are noted on PAS documentation, this should be discussed with the PAS Consultant and the Unity / Trust Safeguarding Team and a referral to Children's Social Care via the trust intranet site or a previously allocated social worker should be considered. The child should be informed of this by phone or text if possible.

- **DNA appointment for 2nd part of medical abortion**

Children who DNA the 2nd part of the abortion procedure either in hospital or at home should be contacted. Their supporting adult should also be contacted.

If ward staff are unable to make contact they should advise PAS as soon as possible, if this is a weekend or out of hours a message should be left on the PAS answer phone (0117 3426824). PAS staff should inform Outreach Nurses as soon as possible.

- **DNA post-abortion ultrasound scan**

Children are not scanned routinely following a medical abortion. They are only scanned if following assessment, there is uncertainty about whether the abortion is complete.

All children who fail to attend a post-abortion scan should be contacted by PAS staff or the outreach nurses. If staff are unable to make contact by phone or text after multiple attempts (at least 3) with the child or supporting adult or they continue to DNA appointments, a letter should

be written to their GP. This ensures the GP is aware of this should they present with complications.

- **DNA post-abortion contraception appointment**

The outreach nurses will make every attempt to make contact and rearrange the appointment.

- **Children under the age of 18 who are late for their appointments in PAS**

PAS staff will always see young people who are late for their appointment for the remaining time allocated to them i.e. if they have an hour appointment and arrive 20 minutes late they can still be seen for the remaining 40 minutes of their appointment. Every effort will be made to finish the consultation; if this cannot be done they will be brought back for a second appointment.
If they arrive after the allocated time slot they will be advised and assisted to rebook the appointment either through the booking line or through PAS.

If they have known vulnerabilities and find it difficult to get to an appointment this will be taken into account where possible.

REFERENCES	
RELATED DOCUMENTS AND PAGES	Did Not Attend (DNA) for children and Young People Policy(May2018) [redacted] Local Access Policy UHB(July 2016) [redacted]
AUTHORISING BODY	Unity Guidelines Group Peer reviewed by Gynaecology Working Party
SAFETY	None identified
QUERIES AND CONTACT	PAS consultants [redacted], [redacted], lead nurse [redacted] [redacted] or outreach nurse's [redacted] [redacted] [redacted]

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