APPENDIX xx

IMPLEMENTATION PROCEDURE FOR PATIENTS WHO CANCEL OR DO NOT ATTEND
IMPLEMENTATION GUIDANCE FOR THE MANAGEMENT OF PATIENTS WHO DNA/CNA FOR OUTPATIENT AND PRE-OPERATIVE ASSESSMENT APPOINTMENTS

GENERAL STATEMENT

All Trusts within Northern Ireland experience high rates of patients who do not attend or cancel (DNA/CNA) outpatient and pre-operative assessment appointments. In order to manage the demand and reduce waiting times it is important that patients who DNA/CNA their appointments are managed in a robust and fair way.

All Trusts must maximise their clinic capacity in an effort to improve access to outpatient services.

This guidance is developed to ensure that a consistent approach is used by Trusts across Northern Ireland. Trusts must ensure that comprehensive documentation and staff training programmes are in place in support of local implementation of this guidance.

The implementation procedure has been developed in support of the Integrated Elective Access Protocol.

DEFINITIONS

DNA – A DNA is defined as a patient who is offered a reasonable date for an outpatient appointment and fails to turn up on the day without giving any notice.

CNA – A CNA is defined as a patient who contacts the hospital in advance of their appointment to say they are unable to attend. (Please refer to appendix 4, implementation procedure on Reasonableness, Integrated Elective Access Policy).
PRINCIPLES

There are a number of guiding principles in the management of the patients who DNA/CNA appointments.

These are detailed in Section 3, paragraph 3.8 of the Integrated Elective Access Protocol.

PROCESS FOR MANAGING PATIENTS WHO DNA APPOINTMENTS

If a patient DNAs their first outpatient appointment, the following process must be implemented.

- Where a patient has had an opportunity to agree the date and time of their appointment, they will not normally be offered a second appointment. These patients will be referred back to the care of their referring clinician.

- Under exceptional circumstances a clinician may decide that a patient should be offered a second appointment. The second appointment must be partially booked.

In a transition period where fixed appointments are still being issued, patients should have 2 opportunities to attend.

Where patients are removed from the waiting list following a DNA, a letter will be sent to the patient and the General Practitioner explaining that the patient has been removed from the outpatient waiting list.

If a patient cancels their outpatient appointment the following process must be implemented:
• The patient will be given a second opportunity to book an appointment, which should be within 6 weeks of the original appointment date.

• If a second appointment is cancelled, the patient will not normally be offered a third opportunity and will be referred back to their referring clinician.

• Following discharge patients will be added to the waiting list at the written request of the referring GP and within a four week period from date of discharge. Patients should be added to the waiting list at the date the written request is received.

All patient outcomes must be recorded on PAS at the end of the outpatient clinic.

The patient should be removed from the waiting list if appropriate and the reason for removal recorded on PAS.

An audit of DNA/CNAs should be carried out on a regular basis.

**CHILDREN AND VULNERABLE ADULTS**

An operational process should be developed by Trust to ensure that children and vulnerable adults who DNA or CNA their outpatient appointment are followed up by the most appropriate healthcare professional and a clear link to the referring clinician established.

**RESPONSIBILITIES**

Patients, parents, guardians and carers all have a responsibility to attend for outpatient appointments or give a reasonable period of notice if they cannot attend.
All Trust employees are responsible for co-operating with the development and implementation of this guidance as part of their normal duties and responsibilities. They are responsible for ensuring that they maintain up to date awareness of corporate/local policies.