



1. What is it?

Parents and those with parental responsibility are responsible for ensuring a child is brought to all health appointments. Adults with care and support needs or who are 'at risk' may rely on others to facilitate their attendance at appointments. In most cases, when a child or adult at risk has cancelled or **failed to attend** an appointment, it is the parent/carer that has failed to bring them and for this reason the term "Was Not Brought" should be used.

Safeguarding: 7 Minute Briefing

Was Not Brought (WNB)

November 2021



2. Adolescents

It is recognised that in adolescence or adulthood, the person may choose not to attend. In this case consideration should be given to whether the person is putting themselves at risk of significant harm by failing to attend.

Consider the child's ability to decide (based on their level of maturity, knowledge and understanding regarding the implications of their decision); and of the adult's capacity to make that decision.

7. Useful Information

RCGP Guidance RCGP
Guidance types of abuse
and indicators

Short Video (child focused)
Rethinking 'Did Not Attend' Bing video

Good Practice Guidance on Safeguarding Documentation for S1 & EMIS for Primary Care Staff (Key section in the guidance on WNB)

01 02 03 06 05 04

5. Key messages

Remember disengagement is a key risk factor for people and may be an indicator of a crisis or that something more serious is happening.

Retain professional curiosity and consider the reason for the failed appointment.

Consideration should also be given to the reason why parents/carers may disengage with services as this will inform the course of action to take e.g., distrust or fear of health professionals.

Cancellation or failure to bring a child or adult at risk to key appointments may be an indicator of neglect, which is a form of abuse. Frequent failure to attend appointments is often seen in safeguarding reviews.

3. Accessibility

Practitioners should ensure appointments are accessible to individuals/families. That the timing of appointments/home visits and the location of services, optimise the opportunities for people to take into consideration knowledge of their history. Services should ensure that there is provision for a person to access support/care without a carer in attendance if they wish to do this.

6. Safeguarding

It is important to make the distinction between Did Not Attend (DNA) and Was Not Brought (WNB). If you have noted frequent WNB and have made attempts to make appointments more accessible, then please speak to your Practice Safeguarding Lead. A safeguarding referral maybe required.

Discuss at the practice meeting with the MDT in relation to any concerns around WNB.

4. What should you do?

If within a reasonable timescale. rearrange the appointment, perhaps in an alternative setting if possible. 'Was not brought' can relate to the parents/carer's behaviour, for example: mental health issue, substance misuse or domestic violence. Look at the impact of the failed appointment on the health and well-being of the child/adult at risk and the parents/carer's ability to provide adequate care for them. Record any discussions with the individual and/or family/carers, other professionals, the actions, and outcomes relating to the concerns. **Ensure safeguarding** documentation is completed as advised in the guidance.