Management of Women who do not attend for scheduled antenatal appointments guideline

The guidance uses the term "Woman" (Pronouns she or her) to describe individuals whose sex assigned at birth was female, whether they identify as female, male or non-binary. It is important to acknowledge it is not only people who identify as women for whom it is necessary to access women's health and reproductive services. Therefore, this should include people who do not identify themselves as women but who are pregnant or have recently given birth. Obstetric and midwifery services and delivery of care must therefore be appropriate, inclusive and sensitive to the needs of those individuals whose gender identity does not align with the sex that they were assigned at birth.

Guideline information

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Summary of document:
To assist clinical decision making for all health care professionals working within the maternity services regarding women that default Antenatal clinic appointments

Scope:
All pregnant women who do not attend for scheduled antenatal clinic appointments; clinicians involved in delivering antenatal care.

To be read in conjunction with:
https://www.nice.org.uk/guidance/cg62/evidence
Monitoring vulnerable people who were not brought or did not attend appointments and no access visits procedure 887

Patient information:
Include links to Patient Information Library

Owning group:
Obstetric guideline and Audit Group
01/09/2023

Executive Director job title:
Obstetric Guideline group

Reviews and updates:
1.0 – New Guideline
2.0 – Updated
3.0 – Updated
4.0 – Reviewed and Updated

Keywords
Non-attendance, Antenatal Care, Appointment

Glossary of terms

Term	Definition
ANC	*Antenatal clinic*
CLC	*Consultant-led care*
MLC	*Midwifery-led care*
MLU	*Midwifery-led unit*
SFH	*Symphysis Fundal height*
WPAS	*Welsh PAS*

Key points:
To assist clinical decision making for all health care professionals working within the maternity services regarding women that default Antenatal clinic appointments.

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Scope
Pregnant women that do not attend for scheduled Antenatal Clinic appointments.

Aim
The aim of this document is to:
- To assist clinical decision making for all Health care Professionals working within the maternity services regarding women who do not attend for scheduled Antenatal clinic appointments.

Objectives
The aim of this document will be achieved by the following objectives:
- This guideline should assist clinical decision making for all health Care professionals working within the maternity services regarding women who do not attend for scheduled Antenatal clinic appointments.

Introduction
- The MBRACE report (2014), identified that women that book late or who were poor attendees at antenatal clinic were at a higher risk of maternal and foetal complications.
- Maternity services must be women centred and take into account social, emotional, and physical factors that may affect their ability to access maternity care. If the reason why a woman has not attended an appointment is ascertained through sensitive enquiry, then alternate arrangements may be made to suit the circumstances of the individuals

Recommended Frequency of Routine Antenatal Care Appointments
NICE Clinical Guideline Antenatal Care - Routine Care for Healthy Pregnant Women recommends the following:
- **Booking Visit:** Should be undertaken by the end of the 10th week of pregnancy.
- **Early pregnancy scan:** 11+2 – 14+1 weeks gestation (screening tests)
- **16 Weeks gestation:** Antenatal Check
- Foetal Ultrasound Anomaly Scan: 18 – 20 weeks gestation
- **Primigravida - Frequency of Visits:** 25, 28, 31,34,36,38 and 40 weeks gestation (41 for post term dates)
- **Multiparous – Frequency of Visits**: 25, 28,34,36,38 (41 weeks gestation - for post due date pregnancy).
- Appointments should also be in line with current Health Board guidelines and Perinatal Institute recommendations advising 2-3 weekly measurement of SFH measurements.

Consideration for women not brought as a consequence of being a vulnerable adult or dependant on others to attend appointments
Refer to point 4.4 and appendix 3 in 887 - Monitoring Vulnerable People who were not Brought or did not Attend Appointments and no Access Visits (opens in new tab)

Women who do not attend Scheduled Hospital Antenatal Clinical Appointments
1st time non attendance

- If a woman fails to attend an appointment in pregnancy, confirmation of an ongoing pregnancy is confirmed by checking WPAS.
- On every missed appointment please record on WPAS follow point 5 on Policy 887
- If the pregnancy is ongoing, the woman must be contacted by phone, another appointment arranged and appointment letter posted. This contact must be recorded in the Antenatal Notes Section on the woman's WPAS record.

2nd time non attendance

- If a woman does not attend the hospital antenatal clinic on two consecutive occasions, she must be contacted by phone and a further appointment arranged with appointment letter posted.
- In addition, the community midwife must be contacted and a note made in the Antenatal Notes Section on the woman's WPAS record.
- The community midwife will then try to make contact with the woman and establish the reason for non-attendance.
- If contact is made, the reason for non-attendance will be documented by the community midwife in the All Wales Hand Held notes and in the Antenatal Notes Section on WPAS.
- Any discussion regarding additional or alternative arrangements made for effective provision of antenatal care should also be documented in the All Wales Hand Held Notes. The results of the contact will be communicated to the hospital antenatal clinic.

3rd time non-attendance

- If a woman does not attend the hospital antenatal clinic for a third time, attempts should be made by the antenatal clinic midwife to contact the woman via telephone.
- If successful, the contact must be recorded in the Antenatal Notes Section on the woman's WPAS record together with an outline of the discussion. If unsuccessful, a record of all attempts to contact the woman should be recorded on WPAS.
- This information should be shared with both the woman's named consultant and community midwife and GP. This will provide an opportunity to discuss and identify an action plan for provision of continued care to the woman.
- In addition, a letter must be sent from the Band 7 Antenatal Clinic Manager clearly outlining the importance/value of antenatal care. The Antenatal Notes Section on the woman's WPAS record should be updated to confirm this letter has been sent.
- It is important that communication between health professionals and other agencies involved in the provision of antenatal care will be maintained throughout.

Women who do not Attend Scheduled Community Antenatal Appointments

1st time non attendance

- If a woman does not attend an appointment in pregnancy, confirmation of an ongoing pregnancy must be confirmed by checking WPAS.
- If the pregnancy is ongoing, the woman should be contacted by the community midwife, explanation regarding the importance of antenatal care given, and another appointment arranged. This contact must be recorded in the Antenatal Notes Section on the woman's WPAS record.

2nd time non attendance

- Community midwife to visit at home on the same or next day.

- Carry out antenatal assessment at the woman's home with consent, and if no safety concerns regarding midwife to visit.
- Make a clinic appointment that is convenient for the woman and explain the importance of attending.
- If a hospital appointment is required, discuss importance of consultant led care and make an appointment with antenatal clinic.
- If a woman declines consultant led care / persistently does not attend community appointments the midwife should liaise with the GP, Health Visitor, Band 7 Antenatal Clinic Manager and Operational Lead Midwife for Community/ MLU. Place an alert on WPAS electronic record.
- Consideration of child protection enquiry through social services/ safeguarding is recommended.

Record Keeping

- All documentation and risk assessments to be recorded in the All Wales Maternity Handheld Record
- All non-attendance to be recorded on Welsh PAS

Communication

- All pregnant women should be informed of the rationale and benefits of attending scheduled antenatal clinic appointments.
- Women should be given the opportunity to discuss this information.
- Maternal wishes and concerns should be discussed and documented.

Monitoring

- Monitoring will be undertaken on an individual basis by ANC Managers, the Operational Lead Midwife for Community and the Operational Lead Midwife for Bronglais General Hospital.

Auditable Standards

- Recording of non-attendance at scheduled antenatal appointments documented in the All Wales Maternity Handheld Record and recorded on Welsh PAS.

References

https://www.nice.org.uk/guidance/cg62/evidence

Appendix 1 – Letter template

Dear……

It has been noted that you have missed the following antenatal appointments;

Date…….. time…….. location……

Date…….. time…….. location……

Date…….. time…….. location……

Attending your antenatal appointments is extremely beneficial for the wellbeing of both you and your baby, as we know that women who repeatedly miss appointments are more likely to experience complications during pregnancy, both for mum and baby.

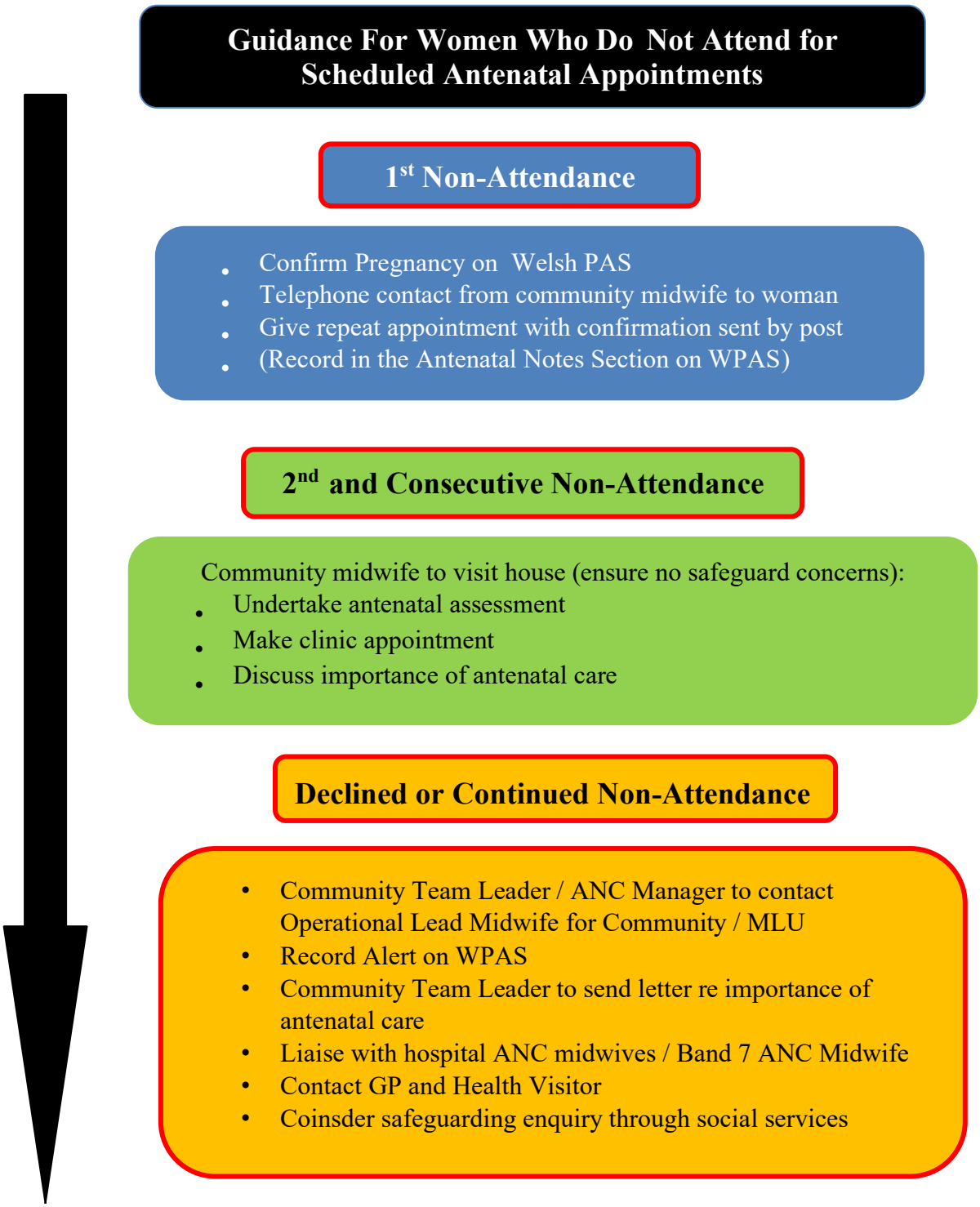
Another antenatal appointment has been made for you as follows;

Date…….. time…….. location……

Please could you get in touch with your community midwife if you will not be able to attend this appointment, or if you are experiencing any difficulties in attending for your antenatal care.

Many Thanks

……

Team leader for …….. community midwifery team

Appendix 2 – Guidance for women who do not attend for scheduled antenatal appointments