

Health Visiting Service Best Practice Guidance for Management of No Access Visits, Was Not Brought and Families who Decline the Health Visiting Service Procedure

Procedure Number: 793		Supersedes:	N/A	CI	assification	Clinical	
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Brief Summary of Document:	This guidance aims to ensure that children have every opportunity to meet all their health and developmental needs. It is the role of the Health Visitor to follow up those children whose health and development may be compromised because of their failure to attend all aspects of the Healthy Child Wales Programme (Welsh Government, 2016).
Scope	This Guidance applies to all Health Visitors and skill mix teams in Wales. This guidance will assist the Health Visiting Service in meeting the following Health and Care Standards (Welsh Government, 2015): Standard 1: Staying Healthy Standard 2: Safe Care Standard 3: Effective Care Standard 5: Timely Care Standard 6: Individual Care

To be read in	Health Visiting Procedure for the Administration and Improvement of
conjunction	Immunisation Uptake for children under 5 years.
with:	All Wales Safeguarding Children Policy

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289 - HDdUHB Record Keeping Policy for Nurses and Midwives
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Owning	Health Visiting Team Leaders
committee/group	Chair Lesley Hill, Senior Nurse/Quality Assurance Manager

	Reviews and updates			
Version no:	Summary of Amendments:	Date Approved:		
1	New Procedure	18/10/2018		

Glossary of terms

Term	Definition

Keywords	Health Visiting / Was not brought / Failure to attend
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1 Aim of procedure

This guidance aims to ensure that children have every opportunity to meet all their health and developmental needs.

2. Objectives

It is the role of the Health Visitor to follow up those children whose health and development may be compromised because of their failure to attend all aspects of the Healthy Child Wales Programme (Welsh Government, 2016).

3. Scope

This Guidance applies to all Health Visitors and skill mix teams in Wales. This guidance will assist the Health Visiting Service in meeting the following Health and Care Standards (Welsh Government, 2015):

Standard 1: Staying Healthy Standard 2: Safe Care Standard 3: Effective Care Standard 5: Timely Care Standard 6: Individual Care

4. Procedure steps

All Wales Health Visiting Service Best Practice Guidance for Management of No Access Visits, Was Not Brought and Families who Decline the Health Visiting Service adopted for Hywel Dda University Health Board (HDdUHB) and embedded.

5. References

Please see references as per All Wales Guidance.

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All Wales Health Visiting Service Best Practice Guidance for Management of No Access Visits, Was Not Brought and Families who Decline the Health Visiting Service.

N.B. Staff should be discouraged from printing this document. This is to avoid the risk of out of date printed versions of the document. The Intranet should be referred to for the current version of the document.

Document Author: Quality Assurance Group

Approved by: Welsh Heads of Health Visiting and School Nursing

Approval date: 13th July 2018

Review date: July 2020

Version: 4

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1. Guidance for the Management of No Access Visits, Was Not Brought and Families who Decline the Health Visiting Service.

Guidance Statement

This right to good health care should be balanced with the wishes and feelings of children, young people, parents or carers and their right to take up surveillance and immunisation programmes offered. The significance of missed appointments has been highlighted by Woodman et al. (2011) who analysed serious case reviews in England between 2005 – 2007. This analysis identified that many of the children were in contact with multiple services and most of the children had contact with a Health Visitor. However, missed routine appointments with universal health services were a common feature. Health Visitors should be mindful that failing to attend for health appointments could be seen as failing to address the health needs of a child.

As health professionals provide a universal and specialist health service for children and their families, they have a duty to safeguard and promote the welfare of children and young people (Social Services & Well Being Act (2014). The outlined guidance provides a framework to assess and identify any concerns, which may feature when health professionals cannot gain access to the child/children.

2. Aim

2.1 This guidance aims to ensure that children have every opportunity to meet all their health and developmental needs. It is the role of the Health Visitor to follow up those children whose health and development may be compromised because of their failure to attend all aspects of the Healthy Child Wales Programme (Welsh Government, 2016).

3. Scope

- 3.1 This Guidance applies to all Health Visitors and skill mix teams in Wales.
- 3.2 This guidance will assist the Health Visiting Service in meeting the following Health and Care Standards (Welsh Government, 2015):

Standard 1: Staying Healthy

Standard 2: Safe Care Standard 3: Effective Care Standard 5: Timely Care Standard 6: Individual Care

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4. Definition of No Access and Was Not Brought

- 4.1 No access is no reply or access to the home following a planned appointment where no prior notification has been received from the parent or carer to cancel the appointment.
- 4.2 Was not brought is when the parent or carer has not brought the child for a scheduled appointment and no explanation has been given.

5. Professional Responsibility

- 5.1 The Health Visitor will use their assessment and knowledge of the family to determine the action(s) to be taken following two consecutive non-attendances/no access. The Health Visitor's documentation must clearly reflect the decisions made following their assessment.
- 5.2 The follow up of missed appointments can be delegated to others (delegatee) but remains the responsibility of the Health Visitor who should ensure that the delegatee is fully aware of the expectations of their role in this matter. The act of delegation must be in accordance with the All Wales Guideline for Delegation (NLIAH 2010).
- 5.3 If the Health Visitor has any concerns regarding missed appointments, they should consider discussing their concerns with their Specialist Nurse for Safeguarding Children or Line Manager.

6. Failure to attend appointments generated by the Child Health System for immunisations

- 6.1 On receipt of notification indicating two missed appointments, the Health Visitor must:
 - Check that the child's details are correct, i.e. name, address, with GP records as the child may have moved.
 - An attempt should be made to contact the family to discuss the reason for nonattendance. Document in the Child and Family Record any action taken around the missed appointments i.e. home visits or reappointments. Provide parents with the World Health Organisation "Risks and Responsibilities" information leaflet (Appendix 1)
 - Document in the chronology section of the Child and Family Record (refer to the 'Standard for the use of Chronologies' in the All Wales Health Visiting Record Keeping Guidance (2017).

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- Return the missed appointment notification form to the Child Health Department within 14 days (Child Health Immunisation Process Standards (CHIPS) 2014) with instructions to reappoint/do not reappoint.
- For hard to reach families, domiciliary immunisations should be considered by the immunisation provider (See Public Health Wales guidance for Domiciliary Immunisation, 2016).
- If after giving the parents the World Health Organisation "Risks and Responsibilities" information leaflet (Appendix 1) and following discussion, they make it clear that they do not wish their child to receive the immunisations at this time, this must be documented in the Child and Family Record including the Chronology. The Child Health Department and Family GP must be informed.
- Parents that chose not to vaccinate their child should complete the 'Declining immunisation' form (appendix 3) benefits of immunisations and risks of non-immunising discussed and provided with the World Health Organisation Parent information leaflet 'Understanding the risks and Responsibilities' provided (appendix 5) The benefits of immunisations should be discussed at all future contacts.
- If scheduled immunisations are still not completed following above actions and
 where there are no concerns for the safety and welfare of the child, the Health
 Visitor should send the parent and carer a letter (Appendix 2) detailing that no
 further immunisation appointments will be offered. The letter will give parents
 the option of them accessing the service in the future if they wish to do so.

7. Children who are Not Brought / No Access home visits

- 7.1 Following two missed scheduled appointment, the Health Visitor must:
 - Check with the GP practice to ensure that the child's details are correct, i.e. name, date of birth and address as the child may have moved.
 - Document in the chronology section of the Child and Family Record.
 - Make contact with the family to discuss the reason for non-attendance. Record in the Child and Family Record any action taken around the missed appointment i.e. home visits or reappointments.
 - Following two missed appointments the family should receive a letter from the Health Visitor (Appendix 3) detailing the importance of the appointment.
 - If no response is received from the letter, the Health Visitor will continue to appoint for future scheduled contact.

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8. Vulnerable Children

- 8.1 In the case of children on the Child Protection Register, subject to Child in Need of Care and Support or considered vulnerable, a more robust approach must be adopted in situations where families fail to attend appointments, he Health Visitor is unable to gain access or the family decline the Health Visiting Service. The Health Visitor will liaise with all relevant professionals/agencies and document in the Child and Family Record.
- 8.2 The Health Visitor will continue to try to access the family and will liaise with members of the multi-agency team until contact with the family is re-established.

9. Families who Decline the Health Visiting Service

- 9.1 The Health Visitor or Line Manager will contact the family to discuss which aspects, if any, of the HCWP programme they wish to receive. This will be confirmed in writing (Appendix 4 may be adapted).
- 9.2 Where parents have indicated that they do not wish to receive the Health Visiting service and where there are no concerns for the safety, health or wellbeing of the child, the family should receive a letter from the Health Visitor (Appendix 4) detailing that no further contact will take place, leaving open the option for them to access the service in the future. Child Health Department to be informed that no further developmental appointments should be generated.
- 9.3 Where there are concerns for the child's safety, health or wellbeing, then the Specialist Nurse for Safeguarding Children should be contacted and an action plan agreed, implemented and documented in the Child and Family Records. *In line with All Wales Safeguarding Children Policy*.

10. Implementation and Monitoring

Health Visiting staff will be made aware that this guideline will be available electronically on individual Health Board's Intranet Site.

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11. References

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Woodman, J; Brandon, M; Belderson, P; Sidebotham, P. and Giilbert, R. (2011). Healthcare use by children fatally or seriously harmed by child maltreatment: analysis of a national case series 2005 – 2007. <u>Archives of Disease in Childhood</u>, Vol. 96, pp. 270 – 275.

World Health Organisation (2007) The Right to Health http://www.who.int/mediacentre/factsheets/fs323 en.pdf

World Health Organisation *If you choose not to vaccinate your child, understand the risks and responsibilities*

http://www.euro.who.int/__data/assets/pdf_file/0004/160753/lf-you-choose_EN_WHO_WEB.pdf?ua=1

Public Health Wales Immunisation Domiciliary Guidelines

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Appendix 1

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If you choose not to vaccinate your child, understand the risks and responsibilities

If you choose to delay some vaccines or refuse some vaccines entirely, there can be risks.

Please follow these steps to protect your child, your family, and others.

With the decision to delay or refuse vaccines, you are taking on an important responsibility that could put your child's health and even life into risk

Any time that your child is ill and you:

- make an emergency call;
- ride in an ambulance:
- visit a hospital emergency room; or
- visit your child's doctor or any clinic

you must tell the medical staff that your child has not received all the vaccines recommended for his or her age. Keep a vaccination record easily accessible so that you can report exactly which vaccines your child has received, even when you are under stress.



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Telling healthcare professionals your child's vaccination status is essential for two reasons

- When your child is being evaluated, the doctor will need to consider the possibility that your child has a vaccine-preventable disease, such as measles, mumps, pertussis or diptheria. These diseases still occur, and the doctor will need to consider that your child may have one.
- If your child has a vaccine-preventable disease, the healthcare workers who help your child can take precautions, such as isolating your child, so that the disease does not spread to others.

Some people are at higher risk of infection

One group at high risk for contracting disease is infants who are too young to be vaccinated. For example, the measles vaccine is not usually recommended for babies younger than 9-12 months. Very young babies who get measles are likely to be seriously ill, often requiring hospitalization.

Other people at high risk of contracting disease are those with weaker immune systems, due to other existing diseases or medications they are taking (such as some people with cancer, autoimmune diseases or transplant recipients).

1



Information for parents



Before an outbreak of a vaccinepreventable disease occurs in your community

- Ensure that your child is adequately immunized for his or her age according to the routine immunization schedule.
- Talk to your child's doctor or nurse to be sure your child's medical and immunization records are up to date regarding vaccination status. Ask for a copy of the updated record.
- Keep your child's school, childcare facility and other caregivers updated on your child's vaccination status.
- Be aware that unimmunized children can catch diseases from people who don't have any symptoms. You cannot tell who is contagious.

Communities depend on high immunization coverage to keep vaccine-preventable diseases from spreading. The more parents who choose not to vaccinate their children, the greater the risk of spreading diseases

You put not only your child but also your community at risk when you decide not to vaccinate.

When there is vaccine-preventable disease in your community

- It may not be too late to get protection by getting vaccinated. Ask your child's doctor.
- If there are cases (or, in some circumstances, a single case) of a vaccine-preventable disease in your community, you may be asked to take your child out of school, childcare or organized activities (for example, playgroups or sports).
- Your school, childcare facility or other institution will tell you when it is safe for an unvaccinated child to return. Be prepared to keep your child home for several days or up to several weeks.
- Learn about the disease and how it is spread. It may not be possible to avoid exposure.
- Each disease is different, and the time between when your child might have been exposed to a disease and when he or she may get sick will vary. Talk with your child's doctor to get their guidelines for determining when your child is no longer at risk of coming down with the disease.



BE WARE

- Any vaccine-preventable disease can appear at any time in the European Region because all of these diseases still circulate either here or elsewhere in the world.
- Sometimes vaccine-preventable diseases cause clusters of cases and outbreaks, i.e. an increased number of cases in a given time and area.
- For some diseases, one case is enough to cause concern in a community. An example is measles, which is one of the most contagious diseases known. This disease spreads quickly among people who are not immune.
- In most cases, there is no way to know beforehand how severe diseases will be in your child.

Learn more by asking your health care provider for the sheet titled "Vaccine-preventable diseases: signs, symptoms & complications"

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If you know your child is exposed to a vaccine-preventable disease for which he or she has not been vaccinated

- Learn the early signs and symptoms of the disease.
- Seek immediate medical help if your child or any family members develop early signs or symptoms of the disease.



IMPORTANT:

Notify your doctor, local medical facility, ambulance or emergency room personnel that your child has not been fully vaccinated before medical staff have contact with your child or your family members. They need to know that your child may have a vaccine-preventable disease so that they can treat your child correctly as quickly as possible. Medical staff also can take simple precautions to prevent diseases from spreading to others if they know ahead of time that their patient may have a contagious disease.

- Follow recommendations to isolate your child from others, including family members, and especially infants and people with weakened immune systems.
- Be aware that for some vaccine-preventable diseases, there are medicines to treat infected people and medicines to keep people they come in contact with from getting the disease.
- Ask your healthcare provider about other ways to protect your family members and anyone else who may come into contact with your child.
- Your family may be contacted by the state or local health department that tracks infectious disease outbreaks in the community.

If you travel with your child

- Review the WHO travellers' information website (www.who.int/topics/travel) before travelling to learn about possible disease risks and vaccines that will protect your family. Diseases that vaccines prevent remain common throughout the world.
- If you are aware that you or your child have a vaccine-preventable disease, do not spread disease to others. Do not travel in such condition, as you or other family members could still be infectious. If an unimmunized person develops a vaccine-preventable disease while travelling, to prevent transmission to others, he or she should not travel by a plane, train or bus until a doctor determines the person is no longer contagious. In certain instances, public health authorities may prevent you from travelling, due to the risk of disease spreading.

Check your own status

· Make sure to check your own immunization status, as you are putting your child at risk of disease when you are not fully vaccinated.

For more information on vaccines, visitwww.euro.who.int/vaccine/resourcecentre

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Appendix 2



Date:
Dear Parent/Guardian
It appears that your childhas not received the following immunisations:
No further appointments will be sent for these immunisations. However, if you wish your child to receive another appointment, please contact the Health Visitor on the number below.
Please find enclosed a leaflet with further information.
Yours sincerely
Health Visitor
Telephone:
Enc. cc GP

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Dyddiad:
Annwyl Riant/Warcheidwad
Ymddengys nad yw eich plentynh wedi cael yr imiwneiddiadau canlynol:
Ni fydd apwyntiadau pellach yn cael eu hanfon ar gyfer yr imiwneiddiadau hyn. Fodd bynnag, os ydych yn dymuno apwyntiad arall ar gyfer eich plentyn, cysylltwch â'r Ymwelydd lechyd ar y rhif isod.
Ceir taflen yn amgaeëdig sy'n cynnwys gwybodaeth bellach.
Yn gywir
Ymwelydd Iechyd
Rhif ffôn:
Amg. cc Meddyg Teulu

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Appendix 3



Date:
Dear
Your child has been offered three appointments for their but unfortunately you were not available.
The purpose of this appointment is not only to assess your child's health, growth and development but to give you an opportunity to discuss any issues regarding your family's general health and wellbeing.
No further appointments will be sent for this review. However, if you wish your child to receive another appointment, please contact the Health Visitor on the number below.
Yours sincerely
Health Visitor

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Dyddiad:
Annwyl
Mae eich plentyn wedi cael cynnig tri apwyntiad a gyfer ond yn anffodus nid oeddech ar gael.
Diben yr apwyntiad hwn, yn ogystal ag asesu iechyd, twf a datblygiad eich plentyn, yw i ro cyfle i chi drafod unrhyw faterion mewn perthynas ag iechyd a llesiant cyffredinol eich teulu.
Ni fydd apwyntiadau pellach yn cael eu hanfon ar gyfer yr adolygiad hwn. Fodd bynnag, os ydych yn dymuno apwyntiad arall ar gyfer eich plentyn, cysylltwch â'r Ymwelydd lechyd a y rhif isod.
Yn gywir
Ymwelydd Iechyd

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Appendix 4



Date:			
Dear Parent / Carer,			
Following our conversation on access the Health Visiting Service at this time	you advised me that you do not wish to e.		
You have informed me that you will access your GP for any health needs your child and family may have.			
If you decide you would like to access the Health Visiting Service in the future, please do not hesitate to contact the Health Visiting Service or your GP.			
Yours sincerely			
Health Visitor			

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I o the	Parent/Guardian of:		
Name:	DOB		
Addres	s:		
children	REFUSAL OF CONSENT FOR IMMUNISATION alth Visitor/Doctor/Nurse has explained to me that immunisation is the safest way to profin against infectious diseases and advised about the health benefits and risks of the against infections. I have also received written information pertaining to the vaccines listed be		
	Diphtheria, Tetanus, Haemophilus Influenza B (HIB) Pertussis (whooping cough), Poliomyelitis, Hepatitis B		
2.	Measles Mumps and Rubella (MMR)		
3.	Bacillus Calmette-Guerin (BCG)		
4.	Pneumococcal Conjugate (PCV) under 2 years of age		
5.	Pneumococcal Polysaccharide (PPV) over 2 years of age		
6.	Influenza (flu vaccine)		
7.	Hepatitis B		
8.	Haemophilus (HIB)/Meningitis C		
9.	Rotavirus		
	Meningitis B e indicate by ticking the above list which vaccines have NO consent).		
I have been given the World Health Organisation leaflet 'If you choose not to vaccinate your child, understand the risks and responsibilities'. I recognise and accept that by not having my child immunised, my child is exposed to greater risk of contracting infectious disease(s) and may suffer complications.			
	stand that I may change my mind in the future and should contact my doctor or health v my child can then receive the relevant vaccination.	isitor	
Child H	of that a copy of this form will be kept in my child's record, and shared with your GP and lealth Department. No further appointments will be sent for immunisations unless a per rental responsibility reverses the decision and requests vaccination.		
Signed	: Relationship:		
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Print Name:		Da	ate:
Countersigned: Profession:			
,	050	CYMRU NHS WALES	Bwrdd Iechyd Prifysgol Hywel Dda University Health Board
Rhiant/Gwarcheidwad	l:		
Enw:		Dyddiad g	geni

GWRTHOD CYDSYNIO I IMIWNEIDDIO

Cyfeiriad:Meddyg Teulu

Mae fy Ymwelydd Iechyd/Meddyg/Nyrs wedi egluro i mi mai imiwneiddio yw'r ffordd fwyaf diogel i ddiogelu plentyn yn erbyn clefydau heintus, ac wedi fy nghynghori ynghylch y buddion iechyd a'r risgiau yn dilyn y brechlynnau. Rwyf hefyd wedi cael gwybodaeth ysgrifenedig sy'n ymwneud â'r brechlynnau a restrir isod:

1. Difftheria, Tetanws, Haemoffilws Influenza B (HIB) Pertussis (y pas), Poliomyelitis, Hepatitis B	
Y frech goch, Clwy'r pennau a Rwbela (MMR)	
3. Bacillus Calmette-Guerin (BCG)	
Pneumococcal Conjugate (PCV) o dan ddwy oed	
Pneumococcal Polysaccharide (PPV) dros ddwy oed	
6. Influenza (brechlyn y ffliw)	
7. Hepatitis B	
8. Haemophilus (HIB) / Llid yr ymennydd C	
9. Rotafeirws	
10. Llid yr ymennydd B	
10. Liid yr ymeiniydd b	

(Nodwch, trwy dicio'r rhestr uchod, lle NAD OES cydsynio i frechlyn).

Rwyf wedi cael taflen Sefydliad Iechyd Y Byd 'If you choose not to vaccinate your child, understand the risks and responsibilities'. Rwy'n cydnabod ac yn derbyn, trwy beidio ag imiwneiddio fy mhlentyn, bod fy mhlentyn yn agored i risg fwy o ddal clefyd(au) heintus ac y gallai ddioddef cymhlethdodau.

Deallaf y gallwn newid fy meddwl yn y dyfodol, ac y dylwn gysylltu â'm meddyg neu ymwelydd iechyd fel y gall fy mhlentyn gael y brechiad perthnasol.

Rwyf yn derbyn y cedwir copi o'r ffurflen hon yng nghofnod fy mhlentyn, i'w rhannu gyda'ch Meddyg Teulu a'r Adran Iechyd Plant. Ni fydd apwyntiadau pellach yn cael eu hanfon ar gyfer

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imiwneiddiadau oni bai bod unigolyn â gwneud cais am frechiad.	chyfrifoldeb rhiant yn gwrthdroi'r penderfyniad ac yn
Llofnod:	.Perthynas:
Enw mewn print:	.Date:
Cydlofnod:	.Proffesiwn: