Introduction to the NHS 111 Service

Introduction

NHS 111 aims to make it easier for people to access healthcare services when they need medical help fast, but it’s not a life-threatening situation. In future if people need to contact the NHS for urgent care there will only be three numbers: 999 for life-threatening emergencies; their GP practice; and 111.

Background

NHS 111 is an important component of the move to develop an integrated 24/7 urgent care service as set out in \textit{The Coalition: our programme for government} and the White Paper \textit{Equity and excellence: Liberating the NHS}.

NHS 111 was first launched in 2010 in four areas: County Durham and Darlington, Nottingham City, Lincolnshire and Luton. In 2011 the service was launched in three new areas, on the Isle of Wight and in parts of Derbyshire and Lancashire. In 2012 the service launched in Derby City and the London boroughs of Croydon, Hillingdon, Hammersmith & Fulham, Kensington & Chelsea, and Westminster. Currently around 16% of the population in England are able to access NHS 111.

All Strategic Health Authorities working with Clinical Commissioning Groups have developed detailed plans to implement NHS 111 and the service will be available nationally by October 2013.

How the NHS 111 service works

Calls to the NHS 111 service from landlines and mobile phones are free and the service is available 24 hours a day, 365 days a year to respond to people’s healthcare needs, when:

- they need medical help fast, but it’s not a 999 emergency
- they don’t know who to call for medical help or don’t have a GP to call
- they think they need to go to A&E or another NHS urgent care service
- they require health information or reassurance about what to do next

Calls to NHS 111 are handled by a team of highly trained call advisers, supported by experienced clinicians. Using an appropriate clinical assessment system, questions are asked to assess callers’ needs and determine the most appropriate course of action without the need for re-triage.

This includes ambulance dispatch, referral to a service within the NHS, referral to an alternative service, and advice, reassurance and information, including for self care.
Service specification for NHS 111

The NHS 111 service operates to the following core principles:

• Completion of a clinical assessment on the first call without the need for a call back
• Ability to refer callers to other providers without the caller being re-triaged
• Ability to transfer clinical assessment data to other providers and book appointments where appropriate
• Ability to dispatch an ambulance as quickly as if the caller had dialled 999

These are the fundamental requirements that underpin the NHS 111 service.

In addition to the national specification, in London ‘Coordinate my Care’ (CmC) is being rolled out in conjunction with the NHS 111 service. CmC is a clinical service underpinned by an electronic solution which allows the sharing of patient advanced care plans across acute and community teams and improves patient and carer access to the right palliative care services at the right time.

Benefits

The introduction of the NHS 111 service is expected to benefit the public and the NHS by:

• Improving the public’s access to urgent healthcare
  The NHS 111 service will direct people to the local service best able to meet their needs, taking into account their location, the time of their call and the capacity of services. It will also help to reduce the number of 999 calls for non-emergency issues, the number of unnecessary ambulance journeys, avoidable A&E attendances and unscheduled admissions to hospital via A&E.

• Helping people use the right service first time including self care
  The NHS 111 service provides a clinical assessment at the first point of contact and will direct people to the correct service. People calling about medical issues or with long term conditions that can be effectively treated through self care will be given the advice and help they need.

• Providing commissioners with management information regarding the usage of services
  The NHS 111 service will gather comprehensive information on people’s needs and the services available. It will also identify which services are currently over or underutilised, or where service gaps exist. This will help clinical commissioners avoid unnecessary duplication of services and identify where small service changes could deliver improved access and the overall efficiency of the NHS.
1. Key Information – Wandsworth

1.1 What are the key dates for NHS 111 in Wandsworth?

<table>
<thead>
<tr>
<th>Date Range</th>
<th>Key Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>30th-31st Oct</td>
<td>DH End to End Testing</td>
</tr>
<tr>
<td>6th Nov</td>
<td>Soft launch via GP Out of Hours messaging</td>
</tr>
<tr>
<td>Year End</td>
<td>Public launch</td>
</tr>
<tr>
<td>Early Dec</td>
<td>NHS 111 materials delivered to all GP surgeries, pharmacies, dentists, opticians, libraries, community centres, care homes, hospitals and health centres, etc.</td>
</tr>
<tr>
<td>7th – 25th Jan</td>
<td>Public Engagement and Publicity Campaign – ads in local press, leaflet door-drop to all households, ads on Life Channel, etc</td>
</tr>
</tbody>
</table>

Neighbouring Areas’ Key Dates

Lambeth go live: February 2013
Merton go live: December 2012

1.2 Who are the NHS 111 Wandsworth key contacts?

- Andy McMylor: Head, CCG Development & Delivery and Chair, NHS111 Project Board, andrew.mcmylor@wpct.nhs.uk
- Dr Simon Mills: NHS111 Clinical Lead, simon.mills@wpct.nhs.uk
- Jatinder Bhuhi: Commissioning Redesign Manger, jatinder.bhuhi@wpct.nhs.uk
- Richard Penney: Interim NHS111 Project Manager, richard.penney@wpct.nhs.uk
- Peter Barnard: Interim Out of Hours Project Manager, peter.barnard@wpct.nhs.uk

Please see point 9 below for more information on the NHS 111 service in Wandsworth.

2. Background

2.1 Why is the NHS introducing the NHS 111 service?

The new NHS 111 service is being introduced as part of the wider revisions to the urgent care service to make it easier for the public to access the right services. The public has told us that there are times when they are unsure what to do or where to go for help, particularly when people have unexpected or urgent healthcare needs. This might be because the need arises when their GP practice is closed or because they are away from home.

NHS 111 can also help to take the pressure off the 999 emergency service and local A&E departments, which many people turn to if they don’t know where else to go for the urgent help they need.

2.2 When will NHS 111 role out nationally?

The coalition Government is committed to the national roll-out of the NHS 111 service as part of delivering an integrated 24/7 urgent care service that will enable the public to access the right service, first time. Following the announcement to extend the national roll-out deadline by up to 6 months, the NHS 111 service will be operating across England by October 2013.
2.3 Is 111 the number for all NHS healthcare services?
111 is not intended to be the only number for access to NHS healthcare services. The NHS 111 service is for when people need help fast, but it is not a life-threatening 999 emergency. For less urgent health care needs, people should still contact their GP or local pharmacist in the usual way.

Once the new service is rolled out nationally, there will be just three numbers for people to use when they need to contact the NHS for urgent care; 999 for life-threatening emergencies; their GP practice; and 111.

If a health professional provides a specific telephone number to call when someone is concerned about their health condition, people should also continue to use these numbers.

2.4 What is urgent care?
Urgent care is defined by the patient’s perception of urgency - If a patient thinks their health care need is urgent then it is urgent and they should call NHS 111.

2.5 Is the introduction of the NHS 111 service just a cost cutting exercise?
No, it is about giving patients a better service. We are introducing the NHS 111 service to improve the public's access to urgent healthcare services. However, we expect that the implementation of the NHS 111 service will also drive improvements in the way that urgent health care services are delivered and help to make them more effective and efficient.

2.6 Will social services be included?
During the roll out phase the NHS 111 service will primarily be for access to urgent healthcare, but callers with social care needs will be signposted to the right services to meet their needs. In time the scope of the service will grow and could become the single telephone access point for all urgent healthcare and social care services.

3. Operational

3.1 Who will answer NHS 111 calls?
Calls to NHS 111 are answered by fully trained NHS 111 health advisors, supported by experienced clinical advisors, who are either nurses or paramedics. They use a clinical assessment system to assess callers’ needs safely and effectively and direct them to the right NHS service.

3.2 Calls to the NHS 111 service are answered by non-clinicians, is it safe?
Just like 999 operators, NHS 111 health advisors are fully trained. They use a clinical assessment system which enables them to assess callers’ needs safely and effectively and direct them to the right NHS service. All advice provided is supported by experienced clinical advisors.

Using the clinical assessment system means a smaller proportion of calls need to be referred to a clinical advisor. This means that NHS 111 clinical advisors can focus on cases where their clinical skills are most needed rather than dealing with calls that don't need their expertise. However, should a patient be assessed as needing to speak to a clinical advisor, they will be put straight through to a clinical advisor.
3.3 How will NHS 111 health advisors’ performance be monitored?
The NHS 111 service uses a comprehensive programme of monitoring which ensures:

- Detailed and comprehensive training and sign off to confirm complete competence before 111 advisors are able to take calls;
- Clinical supervision on all shifts to provide support and identify issues immediately; and
- Active audit of a percentage of calls taken by each 111 advisor every month.

In addition, daily and weekly data identifies individual performance in key areas and allows immediate support to ensure all advisors provide a very high level of service at all times.

3.4 Will the NHS 111 service book appointments with GPs?
The NHS 111 service is required to have the ability to book appointments for patients where appropriate. If a caller is assessed as needing to be seen by an out of hours GP the NHS 111 health advisor will, where possible, be able to book them an appointment. If a caller requires in-hours GP services they will be advised to contact their GP directly, and if their GP is unavailable within the suggested timeframe, they should call NHS 111 again to find an alternative service to meet their needs.

3.5 What will happen if 111 wants us to see a patient urgently and we do not have any appointment slots left?
The robust assessment that takes place within NHS 111 means that patients identified as needing to see a GP urgently should be assessed further by their own practice within the timescale advised by the NHS 111 service.

3.6 How will practices receive patient specific reports if they use the 111 service?
When one of your patients uses the NHS 111 service you will receive a report within 30 min. This could either be electronically or via a safe haven fax depending on your practice’s preferences.

3.7 What clinical assessment system are the NHS 111 live areas using?
All the existing NHS 111 live areas are using the NHS Pathways clinical assessment system. This is an NHS owned system that has been developed by a team of NHS doctors, nurses and IT specialists to provide a safe, consistent clinical assessment of a caller’s symptoms and to identify the service that is best able to meet their needs. The system has been designed to assess calls about any symptom – from life threatening to very minor – and has been extensively tested, piloted and academically reviewed to confirm its effectiveness.

3.8 Will people be diagnosed over the phone?
No, the NHS 111 health advisors will assess the caller’s symptoms using a clinical assessment system to determine the possible seriousness of their condition, and identify what service they need, and how quickly they need it (e.g. ambulance, A&E, urgent GP, or a range of other services).

3.9 Where are we with the Directory of Services (DoS)?
All GP practices in Wandsworth should have received a form to sign confirming information about their opening times and services, etc. If this information changes in the future, practices need to contact the Primary Care contracting team to update the DoS.
3.10 What type of services will be on the DoS?
Initially the DoS will contain details of GP practices, dentists, pharmacists, opticians and urgent care networks i.e. Emergency Departments, Urgent Care Centres, Minor Injuries Units and Walk-In Centres. The local Out of Hours GP Services will also be included, as well as a range of other community and direct access services such as Community Nursing, Sexual Health and Maternity Units.

3.11 What do I do if I receive information about a patient that is not registered with my practice?
Please advise the NHS 111 (Harmoni) admin team as soon as you can. We can then ensure that the information is sent out to the correct practice.

3.12 Does Harmoni NHS 111 have a direct line/contact for administrative enquiries?
If you have any questions about the Wandsworth NHS 111 service or you want to speak to a member of the Harmoni admin team, please call 020 3402 1112. The number is operational Monday to Friday during normal business hours (09:00-17:00). A member of the team will aim to respond to your enquiry within 24 hours.

3.13 What happens if a business’s telephone system does not recognise 111?
If 111 is called via a business’s electronic telephone system that does not recognise the number, please advise the department/person responsible for telephony in the organisation to ensure that the system is configured to dial 111.

3.14 Is the service available to people with a hearing impairment or communication difficulties?
People with communication difficulties or impaired hearing are able use the NHS 111 service via a textphone by calling 18001 111.

Calls are connected to the TextDirect system and the textphone will display messages to tell the user what is happening. A Typetalk Relay Assistant will automatically join the call and they will speak the users typed conversation to the NHS 111 health advisor and will type back the advisor’s conversation, so that this can be read this on the caller’s textphone display (or computer).

3.15 Is the service accessible to non-English Speakers?
The NHS 111 service uses a translation service so that it is accessible to people that do not speak English. Callers that do not speak English should state the name of the language they want to conduct the conversation in and the interpreting service will be utilised.

Leaflets explaining how the NHS 111 service works are available in a number of different languages via www.nhs.uk/111.

3.16 If the NHS 111 service is locally commissioned, won’t there be variations in the quality of services as is the case with out-of-hours services?
We have worked with the NHS to agree the NHS 111 National Service Specification that applies to the NHS 111 service across all areas. This ensures that the public experience the same high quality of service, wherever they are.
4. NHS 111 Online

4.1 Will the NHS 111 service be available on-line?
The NHS 111 service will be available on-line, and we are committed to launching an NHS 111 on-line service alongside the telephone service. The NHS 111 on-line service will be delivered through the new single portal for health and care that will replace the current NHS Choices service when that contract expires.

4.2 When will the NHS 111 online service be available?
We are committed to launching an NHS 111 on-line service alongside the telephone service. A pilot service is currently under way which will inform future development of the on-line service.

4.3 Will the NHS 111 service be available via a smart phone app?
Mobile apps and internet have seen a huge growth recently, and we know there will be demand for access through mobile channels. Our intention is to ensure that NHS 111 services are available through a mobile app.

5. 999

5.1 Will NHS 111 deal with emergency calls?
The public should continue to call 999 for life threatening emergencies that require an immediate response. However, if a call to NHS 111 is assessed as being a medical emergency, the service will dispatch an ambulance directly, and provide first aid advice to the caller until the paramedics arrive, without the need to transfer the call, or for the caller to repeat information.

5.2 What happens if a caller does not know whether it’s an emergency?
If someone calls NHS 111, and the clinical assessment identifies that they are facing a life threatening emergency, the NHS 111 service will dispatch an ambulance directly. The NHS 111 health advisor will provide first aid advice to the caller until the paramedics arrive, without the need for transferring the call, or for the caller to repeat information. It does not matter if patients are unsure of whether something is urgent or an emergency; the NHS 111 service will direct them to the right service, first time, even if the right service is an ambulance response.

5.3 How many calls to 999 are currently made for non-emergencies?
We know that more than 25% of calls made to 999 are Category C calls that are “neither serious nor immediately life threatening”. The NHS 111 service provides an alternative for these callers and will help to ensure that ambulance resources are directed to those who have a medical emergency and require an immediate response.

6. Training

6.1 What training will NHS 111 health advisors be given?
All Harmoni NHS 111 health advisors using the NHS Pathways clinical assessment system to answer calls undertake a 60 hour training programme which includes a pre-course learning pack which provides an introduction to the system and key areas of anatomy, physiology and medical terminology, classroom tuition, written and practical assessments which must achieve a pass mark of 70%.
Additionally, all health advisors receive a minimum of four weeks of supervised use on the live system followed by another assessment. This includes a clinical audit of calls taken and direct feedback to the individual.

This is in addition to any training provided by the organisation on use of telephony, call control and local processes and procedures for call referral under different circumstances, such as child protection, vulnerable adult, frequent caller or patient with special notes.

6.2 Are the NHS 111 health advisors clinically trained?
All NHS 111 health advisors have received extensive training on the clinical assessment system that the current NHS 111 live areas are using to assess callers' symptoms and identify the right service to meet their needs. Part of this training involves specific education around anatomy, physiology and clinical features of injury and illness to enable them to provide a high quality assessment of symptoms. Every shift includes experienced clinical advisors to provide clinical support in the event of any difficulty. In addition, some calls will be passed to a doctor or other clinician to deal with complex issues or where the assessment concludes that the patient needs clinical guidance on managing their symptoms at home.

7. Service Impact

7.1 What impact is the introduction of the NHS 111 service having on other NHS services?
It is too early to gain a full understanding or draw conclusions as to the impact that the NHS 111 service is having on other NHS services within the live areas. We know that it takes time, when a new service is introduced, for it to ‘bed in’ and perform at its most effective.

The independent evaluation by the University of Sheffield of the original four pilot areas and the data collected from all live areas for the monthly minimum dataset indicates that there isn’t an increase in demand on the urgent care service. We are publishing all the independent evaluation reports from the University of Sheffield and the monthly minimum dataset reports (which includes management data on service operation and system impact) from each of the live areas.

7.2 Will the NHS 111 service refer more callers to face to face urgent care services and less to self-care when it replaces NHS Direct’s 0845 service and Out of Hours services’ call handling?
Enabling people to resolve health issues themselves by providing self-care advice is an important part of the NHS 111 service. Speculative data has been used to argue that when NHS 111 replaces NHS Direct’s 0845 service and existing out of hours telephone services it will direct more patients to face-to-face urgent care services and support fewer patients to self-care.

What this has failed to consider is that NHS 111 is very different to these existing services – for example NHS 111 is marketed as the number to call “when you need medical help fast but it’s not a 999 emergency”, whereas NHS Direct’s 0845 service is promoted as being “for advice and reassurance.”
This means that the acuity of health conditions of many people calling 111 is likely to be greater than those calling 0845 or out of hours telephone services. Whereas the data analysis, that has been used to suggest that NHS 111 supports less people to self-care, assumes that the types of calls that these very different services receive are all the same and hence the current disposition rate for NHS 111 calls will apply equally to the total number of calls the other services currently receive.

Also the definitions of self-care used by organisations differ, which make it very difficult to compare self-care referral rates between the different services.

8. Outcomes

8.1 How will the performance of the service be measured?

- The NHS 111 call handling standards are based on “National Quality Requirements in the delivery of Out-of-Hours Services” and may be updated as those standards are revised
- 96% of calls answered within 30 seconds for full compliance
- Engaged and abandoned calls: No more than 0.1% of calls engaged; and no more than 5% calls abandoned
- Expectation: 80% of calls dealt with by the Health Advisor
- Monthly Continuous Quality Improvement audits completed for all staff with a minimum of five calls per month
- Health Advisors using NHS Pathways have to complete a minimum of 200 calls per month to keep up their competencies on the system

8.2 What are the benefits of the NHS 111 service to patients and the healthcare economy?

The introduction of the new NHS 111 service is expected to provide key benefits to the public and the NHS, by:

**Improving the public’s access to urgent healthcare services:**
- Providing a simple, free to call, easy to remember three-digit number, that is available 24 hours a day, 365 days a year
- Directing people to the service that is best able to meet their needs, taking into account their location, the time of day of their call and the capacity of local services

**Increasing the efficiency of the NHS:**
- Providing consistent clinical assessment that ensures people access the right service, first time
- Directing people to the service that is best able to meet their needs
- Rationalisation of call handling

**Increasing public satisfaction and confidence in the NHS:**
- Improving the public’s access to urgent healthcare services
- Providing an entry point to the NHS that is focused on peoples’ needs
- Enabling people to access the right service, first time
- Increasing efficiency of the NHS by directing people to the service that is best able to meet their needs
Enabling the commissioning of more effective and productive healthcare services that are tuned to meet people’s needs:

- Identifying the services, which are currently over or under used
- Providing information on people’s needs and the services they are directed to
- Increasing understanding of the shape of demand for each service

Increasing the efficiency of the 999 emergency ambulance service:

- Reducing the number of non-emergency calls received by 999
- Reducing the number of avoidable ambulance journeys

9. Local Matters – Wandsworth

9.1 Do I need to change my practice answer phone?
To coincide with the soft launch, you are required to change your practice’s out of hours telephone message. The suggested wording for this message is later on in this document.

9.2 What will happen to out of hours lunchtime cover?
If you wish to have Harmoni provide for half day or lunchtime cover (in hours deputising) or message handling please contact Harmoni on 020 3402 1300 to discuss this directly.

9.3 Will NHS 111 replace our existing Out of Hours telephone number for Harmoni?
Yes it will. Calls to the Out of Hours number will be automatically diverted to the new NHS 111 number, but information about the number will not be promoted to the wider public until the full public launch. This soft launch period is important as it allows call volumes to build up gradually, providing an opportunity for local processes to be embedded before the service is launched to the public.

9.4 What local public communications are you planning?
There is a NHS 111 communications and engagement project team that meets regularly to discuss communication and engagement for the NHS 111 service. Both before and after the launch of the service, there will be press releases submitted to the local papers. Once the service is live, the public will be invited to a launch event, to find out more information and ask any questions they may have. Posters and leaflets will be distributed to all GP Practices, Hospitals, Pharmacists, Opticians and Dentists as well as other local community services such as libraries or community centres, etc. Advertisements will be taken out in local publications and screen ads will be added to Life Channel in those practices that have it.

9.5 What will be available to give to patients and the general public for information?
We are currently printing a number of patient leaflets, posters and information cards. These will be issued to all practices and other clinical services, as well as all main community venues around the time of the public launch. If you would like to request more at a later stage you can do so via NHS South West London. The marketing materials will follow the national Department of Health templates. Once all areas have gone live around the country, the Department of Health will run a national public health awareness campaign around NHS 111.

The leaflets are available in many different languages as well as an easy read version – these are all available online at www.nhs.uk/111.
9.6 Can we publicise NHS 111 on our own website or waiting room TVs?
If you currently have the Life Channel TV system in your practice we will be including an advert which will be booked directly with Life Channel. If you have a different system please feel free to include the message below should you wish to. If you would like to update your practice website with information on NHS 111 please use the following message:

When our GP practice is closed, patients should call the NHS 111 service by dialling 111. All calls are free from landlines and mobile phones.

What is the NHS 111 service?
- A simple, free to call, easy to remember three digit number that is available 24 hours a day, 365 days a year.
- The NHS 111 service directs patients to the service that is best able to meet their needs taking into account their location, the time of day of their call, and the capacity of local services.

When should I use the NHS 111 Service?
- When it's not a life threatening situation, and therefore is less urgent than a 999 call.
- When visiting your own GP isn't an option, for instance when the GP Practice is shut or you are away from home.
- When you feel you cannot wait or are simply unsure of which service you require.
- When you require reassurance about what to do next.
9.7 Will we have to change our Out of Hours answer phone message?

Yes, when NHS 111 is launched in a new area, it is important that our out of hours messages on GP surgery answer machines are updated to direct callers to the NHS 111 service as this helps to quickly establish the new service.

There are two options for GP surgeries to implement:

1. Voice message without a redirect of the call to NHS 111
2. Voice message with a redirect of the call to NHS 111

Here are two suggested scripts for your answerphone message depending on whether your telephone system can or cannot automatically redirect the call:

- **Message without redirect (callers hang up and redial)**

  “The surgery is now closed. The opening hours are X:XX to X:XX Monday to Friday.

  If you have an urgent medical problem which cannot wait until the surgery re-opens please hang up and dial 1-1-1, I repeat, if you have an urgent medical problem which cannot wait until the surgery re-opens please hang up and dial 1-1-1 to access the out of hours service. NHS 111 is free to call from both landlines and mobiles.

  If, for any reason, you are unable to access NHS 111 by dialling 1-1-1, instead please call 0203 402 1125. Calls to this number are charged at your network’s standard rates”.

- **Message with redirect (callers automatically redirected to 111)**

  “The surgery is now closed. The opening hours are X:XX to X:XX Monday to Friday.

  If you have an urgent medical problem which cannot wait until the surgery re-opens, please hang up and dial 1-1-1. NHS 111 is free to call from both landlines and mobiles.

  Or alternatively please wait and your call will be automatically re-directed to the NHS 111 service. This call will continue to be charged at your network’s standard rates. However if you hang up and call 1-1-1 your call will be free.

  If, for any reason, you are unable to access NHS 111 by dialling 1-1-1, instead please call 0203 402 1125. Calls to this number are charged at your network’s standard rates”.

  *Please wait and your call will now be re-directed to the NHS 111 service."

**All Messages - Important Additional Points to Note:**

- Practices should take out any reference to NHS Direct on their messages.

- If practices use GP deputising services, including Harmoni, during in hours periods you will need to consider an alternative message that enables patients to reach your chosen deputising service when you are closed as 111 is not a GP message handling service.

- If current answer phone message includes additional details unrelated to Out of Hours care, please insert the suggested message where you deem most appropriate.
• If you have patients that belong to your practice but live out of the Wandsworth area, we suggest that you notify them of these changes by letter. They will not be able to call 111 directly until their area goes live BUT they can use the alternative number – 0203 402 1125. It is important to note that once the service is live nationally this will no longer be an issue.

9.8 How does the Single Point of Contact for Community Services link in to NHS 111 in Wandsworth?
Work is continuing with Harmoni to finalise the new Single Point of Contact (SPoC). This service will enable you to contact a range of community services, including to make referrals, via the web or directly through a support desk. Until this service is live, the current message taking arrangements will continue.

9.9 Is the Co-Ordinate my Care Register available in Wandsworth?
The Co-Ordinate my Care (CmC) Register for patients with end of life/palliative care needs will go live in Wandsworth in November alongside 111. This is a London-wide initiative that will also be rolled out across other areas of London over the coming months. Everyone who has been trained to use CmC in Wandsworth will receive a separate communication to advise them when it is ‘live’ and ready to take Wandsworth patients.

A CmC record can be set up and/or updated by a range of healthcare professionals within the EoLC system, ensuring that information about patients should be available on CmC at short notice and kept up to date as the clinical situation changes. Most GP practices in Wandsworth have already received training in how to use the Register and the information governance/log-in arrangements are currently being finalised across all Wandsworth users. Other users, such as the CNS team at Trinity Hospice, the community nursing teams and the St George’s Palliative Care team have also been trained to fully use the Register. LAS and the OOH GPs will initially have read-only access.

You will be receiving separate support documentation around using CmC from the CmC team but set out below is a reminder of the benefits of the CmC Register:

• Early identification of patients who may die within the next 12 months will provide an essential first step to providing 24 hour care within an integrated EoLC system.
• Awareness of special patient status (ie that they have a CmC record) within the wider Healthcare System is an essential part of providing good community palliative and end of life care. It is important that all organisations involved in providing care to people at home have access to accurate information about that person, their needs and wishes, and carers’ needs or concerns – which CmC will provide.
• All patients on CmC will be given priority when they or a carer phones NHS 111 or the OOH medical services for advice. Their notes will be flagged so their call will be fast tracked to a clinician, without triage, and as a result their management and care from the most appropriate source will be arranged as soon as possible.
• Sharing key information about a patient’s own wishes, clinical condition, medications, recent treatment and carers and contacts is crucial to successful management in the community and achieving satisfactory outcomes for patients, families and carers.
• CmC will hold information about the patient’s medical condition and also about any Advance Care Plans they may have put in place. This includes Preferred Place of Care and Preferred Place of Death, and also if a decision has been made about the patient’s resuscitation status. These are two crucial pieces of information for Harmoni doctors and LAS when called to a home for urgent care.
• The Register should include patients with Long Term Conditions as well as malignant disease.
• Entering the patient on the CmC Register (with their consent) enables other Healthcare Professionals including OOH doctors, London Ambulance, Community and Night Nursing services and Specialist Palliative Care services (Hospice and acute sector) to view the up to date patient record, and to use this to guide clinical decision making 24/7 in the patient’s best interests. GP core hours cover about 1/3 of the week which leaves 2/3 to be covered by the OOH GP service.
• Information about a patient on the CmC Register also provides a process for review of the patient at GSF MDT meetings.
• We anticipate that prompt attention to the patient’s symptoms or carer’s needs will help to address each patient’s preferences and reduce unnecessary hospital transfers and unwanted hospital deaths.

Until this service is live, the current message taking arrangements for community services remain unchanged.

9.10 How will calls be routed through the 111 Long Message system?
The London Long Message system will only apply when it is not clear where in London a call is coming from. This will mainly apply to calls from:

• the 3 mobile network, or
• non-111 live areas, or
• from 0207, 0208, 0203 etc where the number has not been tagged to the local 111 provider.

Please see the attached routing diagram for more information.

9.11 How can we, as clinical providers, leave feedback on the NHS 111 service?
We value feedback from our stakeholders and have developed a health professional’s feedback form.

We would like to encourage you to complete this form if you have any feedback for us whether it is positive or negative. Your practice will be issued with electronic and paper copies of these forms.

Please note that this form is purely to help us improve our service and therefore if you have a specific patient issue please consider if it is more appropriate to use your Complaints/ Incidents process.

Once we have received feedback from our patients and stakeholders we log all comments and address any concerns or suggestions for improvement. We then make an action plan to improve the service if this is required.
Sample feedback form

9.12 How will patients be able to leave feedback about their experiences with NHS 111?
In the Wandsworth NHS 111 service, Harmoni (our providers) will be conducting a weekly patient survey which is mailed out to 1% of patient contacts. For NHS 111 services, Harmoni have received a response rate of over 15% to the surveys sent out, with 90% of respondents saying they were happy with the service.

In addition, the NHS 111 service in Wandsworth will shortly be linking to the Patient Opinion web site. Patient Opinion is an independent website where the public can publish their experiences of local health services. The website allows health service staff to interact with these patients to help improve care. Patient Opinion is a not-for-profit social enterprise. For more information go to: www.patientopinion.org.uk.