

## Sandwell and West Birmingham Clinical Commissioning Group

Our Ref: Your Ref: SM/RE/hkl/361/

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## **BY EMAIL**

Dear Jane,

Thank you for your very useful survey and feedback on the NHS 111 service in Worcestershire. The timescales of the survey were unfortunately before the national 111 campaign and our local campaign to raise awareness of 111 and the Ask NHS app, so some of your feedback will have been superseded by these two campaigns, which will hopefully mean that awareness has further been raised. In addition to the very useful feedback from Healthwatch in Worcestershire, we are in the process of reviewing the outcomes from the Ask NHS app's first year and also from the NHS 111 campaign and will use this to inform our future promotional campaigns.

Based on feedback from another Healthwatch last week, we have also circulated our existing communications materials to all Healthwatches across the West Midlands and will continue to do so as we move forward as we very much appreciate the signposting role of Healthwatch.

## Recommendations

 Consider how to raise awareness of NHS 111 service and the range of services it provides. In particular booking of Out of Hours GP appointments and home visits.

Although there has been promotion of NHS 111 both as part of a national campaign in early 2018 and a more local campaign in relation to 111 and the Ask NHS app at the end of 2017, the aim has been to raise awareness of the service rather than to give detail. As a follow on to this campaign, we will now consider a more in depth campaign identifying the different services available to patients through NHS 111.



• Consider the promotion of NHS 111 and the range of services it provides using leaflets and posters in community and health settings across Worcestershire and using social media.

Materials including posters were circulated to NHS trusts, GP surgeries, dental services, mental health services and walk-in centres as part of the national 111 campaign in early 2018. As part of our local campaign across the West Midlands, banner stands and posters were also distributed to all ED departments and walk-in centres. Posters and graphics for TV screens were also made available to all partner CCGs, including in Worcestershire, with the aim of them being distributed to GP practices. More recently, a web banner has been distributed to all CCGs, STPs and acute trusts with the request to use this on their websites. We have also circulated some content for use in newsletters and on websites in relation to the Ask NHS app. This month, the web banner and poster were circulated to all Healthwatches in the West Midlands. Social media graphics and content have also been produced and these will be distributed to communications colleagues in CCGs and acute trusts shortly

 Consider how to raise awareness of NHS 111 and the range of services it provides to older people.

Please see the answer to the above question. Printed materials have been distributed to various locations and we will consider producing more materials, with more detail, to be distributed through local CCGs and acute trusts.

• Consider carrying out and publishing an in depth review of waiting times, examining the causes of the long waits and reviewing what actions could be taken to mitigate these waits.

Care UK has agreed an action plan with commissioners to increase staffing and tackle periods of demand where the wait time to connect to the service is extended. They have also reviewed the voice message and options that are heard when the call is initially connected to provide an easier to understand menu. They have made great strides in reducing the length of time to answer the calls and since the introduction of the recovery plan the average time to answer is 33 seconds. During the last two weeks this has improved even further with the average wait time reducing to just over 15 seconds. This important metric is reported on and discussed with commissioners alongside other elements during a daily performance call to ensure the recovery plan is on track.

• Consider carrying out a review of questions asked by NHS 111 staff, looking at the number of questions, range of questions and whether there is scope to reduce duplication.

The questions asked by Health Advisors are nationally set and form part of the NHS pathways decision support tool, which is a licensed product used by all 111 services nationally. Feedback and reviews are constantly given to the pathways authors and there are twice yearly updates to the question set. It is important that these questions are designed in such a way that they are safe for patients when used, as they are in 111, by non-medical staff. All staff using the system have to complete a rigorous training programme and have to pass exams in order to use it. There is a national review of pathways being undertaken currently and alternative decision support tools are being evaluated with the intention to pilot them at various sites towards the end of this year.



 Consider promotion of NHS 111 via social media and posters and leaflets in schools and colleges.

We will work with our local CCG partners and acute trusts to distribute information to schools and colleges in their local areas.

 Consider how to identify if someone has a learning disability or long term health condition to ensure they are given the appropriate advice and support

As part of the improvement and development of integrated urgent care (IUC), work is under way to enable the sharing of detailed patient records based on information held by the patient's own GP. This will include long term condition care plans as well as information on medication, allergies and disabilities. It will also include any palliative care or end of life plans that are in place. Alongside this, work is also taking place with mental health trusts to allow access for specialist nurses working in the IUC's Clinical Assessment Service to a patient's mental health records.

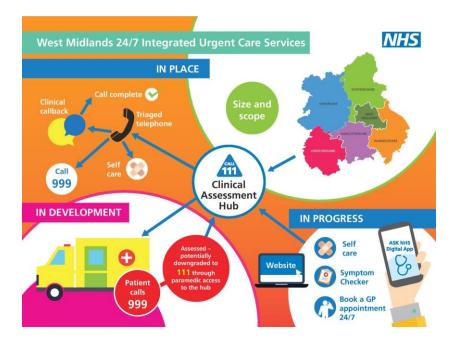
Consider reviewing questions to ensure they are easy for everyone to understand

111 currently is tied to the NHS pathways system which is used nationally. Full training of Health Advisors alongside supporting information embedded within the question set should be used when the patient is not clear on the meaning of the question. Senior clinicians are always available for advice and guidance if required. Questions are continually under review and feedback is welcomed.

Consider how to raise awareness of NHS 111, the range of services provided and when to
use it to people with a learning disability, including distribution of Easy Read leaflets and
information.

We will work with our CCG partners to circulate information and engage with people with a learning disability on a local level.

We have already made use of infographics to describe how the 111 service works – please see below and this has been circulated to CCG comms colleagues for use on their websites etc. We will continue to use this format for communications with the public and patients wherever possible.





Current arrangements for patient participation and engagement for NHS 111.

Our local CCG and acute trust partners already have excellent contacts with their local communities and therefore it makes sense for us to tap into these contacts to circulate information and engage with specific groups on a local level. We would also like to work with Healthwatches across the West Midlands to communicate and engage with patient groups wherever this is possible.

Where there is a need for a specific group to be involved in a specific project, we will consider setting up a group for this purpose. At the moment, we are working with a group of mental health service users at a national level on a mental health triage project for NHS 111. We are always mindful that virtual groups may well be a better option for public and patient involvement when we are working across a wide geographical area and are keen to ensure that membership of any such groups is representative.

We also have patient representatives who are involved in various pieces of work and who are invited to attend different meetings, particularly ensuring that we communicate with patients in Plain English and that the Patient Voice is heard in all our work.

This feedback has been reviewed and agreed by the Worcestershire CCGs.

Yours sincerely,



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