NHS 111 Report: Haringey Health Scrutiny Committee

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1. Introduction

The NHS 111 service for Haringey has been operational since February 2013. The provider that is commissioned for this area is London Central & West Unscheduled Care Collaborative (LCW). Calls made to NHS 111 could however be received by any 111 provider in England.

This report has been assembled by the Directory of Services (DoS) Lead and the Clinical Lead on behalf of the commissioners in relation to the 111 service that delivers care to the area of Haringey. This 111 service is part of the overall service within the North Central London area (Barnet, Enfield, Haringey, Camden and Islington). Unless otherwise stated the information presented here relates to the North Central London service as a whole and not specifically in relation to the Haringey borough boundary. Also the clinical, patient and activity data that is presented here relates to only to one NHS 111 provider (LCW) and does not relate to calls that have been answered by other 111 providers. At present, it is understood that approximately 20% of all 111 calls within the system are received by 111 providers other than the local provider; however neither the Commissioning Support Unit nor Haringey CCG receive any data relating to these other providers; and therefore this information is not reported here. GPs should still however receive a 111 notification relating to their individual patients irrespective of where in England the 111 call received.

This report only indicates how many patients were advised to attend a particular service; it <u>does not</u> present any analysis or findings in relation to patients that may actually have attended a particular service as a result of calling NHS 111.

2. Quality and Safety

The quality and safety of the local provider is monitored through the Clinical Quality Review Group that is chaired by the Senior Responsible Officer for the NHS 111 service within North Central London with support from the North and East London Commissioning Support Unit. The clinical lead on behalf of the commissioners, conducts regular governance reviews and site visits with the local 111 provider, undertakes call audits and examines each complaint, incidents, compliment, healthcare professional feedback and any other patient feedback.

The complaints are not currently segmented by individual CCG or borough, however for the locally commissioned service there have been 5 complaints, 26 compliments and 1 serious incident between 21 February 2013 and 30 September 2013. At the present time, the commissioners are not currently aware of any quality or safety concerns in relation to the local provider, LCW.

The provider continuously carries out patient experience survey which is reported on a quarterly basis. The learning gathered through this process has been reviewed with commissioners and implemented into the service and shared nationally where appropriate. The service provider is compliant with their statutory duties in relation to safeguarding, information governance and CQC registration.

3. Activity and Performance

This table provides an overview of the current performance of the local provider. This demonstrates that the provider has good overall performance, within the expected range of performance for a London based 111 service.

In September 2013, the local service referred 11.7% to an ambulance, this is comparable to other 111 sites within London and therefore within the normal range expected of 111; the referrals to Emergency Department were 8.6% of all calls, which is also similar to other 111 providers. It must be noted that performance relates to all calls taken by LCW for the North Central London 111 pilot service including those calls for patients that are outside of North Central London.

Since the launch of the service in February 2013 performance has continued to improve each month. The abandoned call rate is now only 0.7%. Callers that need to speak to a clinician are 'warm transferred', the warm transfer rate has continued to improve each month.

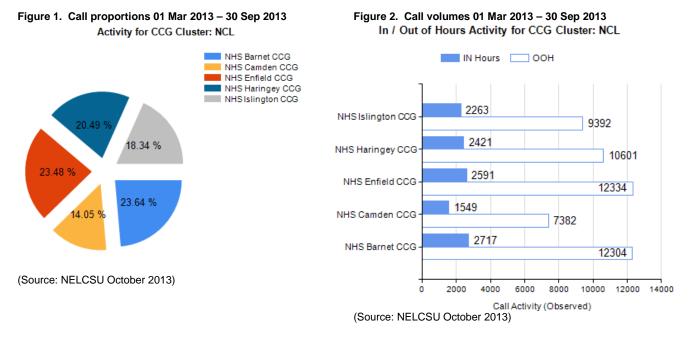
Quality and Performance Indicators		Qtr 1			Qtr 2		
		May-13	Jun-13	Jul-13	Aug-13	Sep-13	
Engaged calls	0%	0%	0%	0%	0%	0%	
Abandoned calls	5%	1.9%	2.1%	1.7%	0.9%	0.7%	
Answer Time (% Calls answered within 30 seconds)	100%	100%	100%	100%	100%	100%	
Call waiting time (% Calls answered within 60 seconds)	79%	91%	92%	93%	95.8%	97%	
Life threatening referrals (% referred within 3 min where ambulance required)	100%	100%	100%	100%	100%	100%	
Meeting individuals needs (% provided with interpretation service within 15mins)	100%	100%	100%	100%	100%	100%	
Safeguarding (% frontline staff and advisors trained in safeguarding)	100%	100%	100%	100%	100%	100%	
Triage rate (% calls answered that then require 111 triage)*	111%	109%	108%	105%	105%	94%	
Transfer to 999 (% of answered calls transferred to 999)	10%	10%	10%	3.7%	11%	11.7%	
Attend Accident & Emergency Dept (% advised to attend Emergency Dept)	8%	8%	8%	8.9%	8.3%	8.6%	
Referred to Primary Care and other dispositions (% referred)	65%	66%	68%	62%	66.3%	64.9%	
Warm Transfers (% transferred to NHS 111 Clinician where required)	33%	43%	46%	40%	54.7%	62.8%	
Warm Transfer waiting time (Maximum time in seconds)	98	66	49	150	97	96	
Time taken for call back (% called back <10 minutes)	54%	59%	64%	57%	63%	68%	
Notifications (Information to patient 's own GP by 8am the next working day)	90%	98%	99%	100%	100%	100%	
Patient Education (% of frequent users highlighted to their registered GP)	100%	100%	100%	100%	100%	100%	
(Source: NELCSU October 2013)	-		•	-	•		

Table 1. NHS 111 Contractor Performance 2013/14

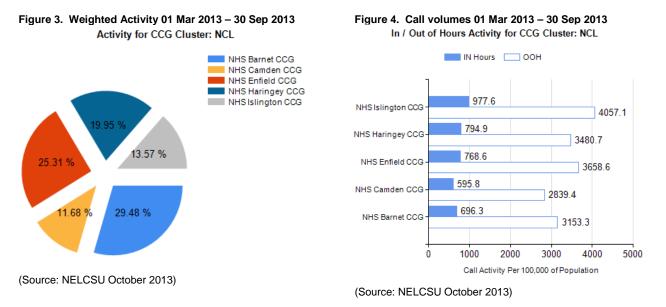
*This can be above 100% as some triaged calls can be received via other 111 services

4. Service utilisation by borough

For calls received by LCW for the NCL 111 service, Haringey activity account for 20% of the NCL activity, which equates to 10,601 calls during the out of hours period and 2,421 calls during the in-hours period for the 6 month period that has been examined here.

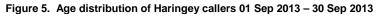


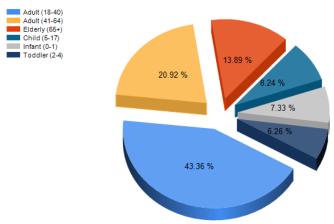
When analysed by calls per 100,000 of population, this represents a moderate proportion of total activity at 20%. However, as the Commissioning Support Unit does not receive information on calls received by other 111 providers, this comparison must be interpreted with caution.



5. Caller age distribution

The caller profile for Haringey indicates that the callers between the age of 18 and 40 most used the service during September 2013.

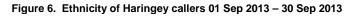


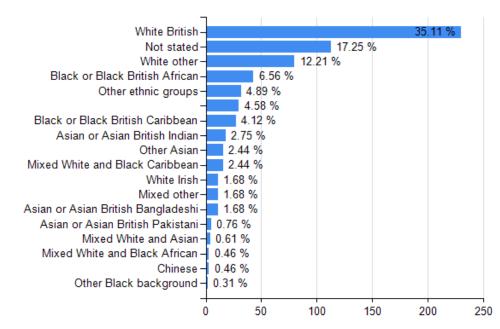


(Source: NELCSU October 2013)

6. Caller ethnicity

The caller ethnicity profile for Haringey callers to this service is not dissimilar to the ethnicity profile by sub group for Haringey that was identified in the 2011 Census. However, the caller data here relates only to the month of September 2013 alone and in order to make a more meaningful comparison a longer time horizon of 111 data would need to be used.





(Source: NELCSU October 2013)

7. Call outcome: Symptom Group

The top 10 reasons for calling 111 by symptom group are indicated below. The two most common reasons for calling within Haringey were predetermined management plan (7%) and dentistry (7%).

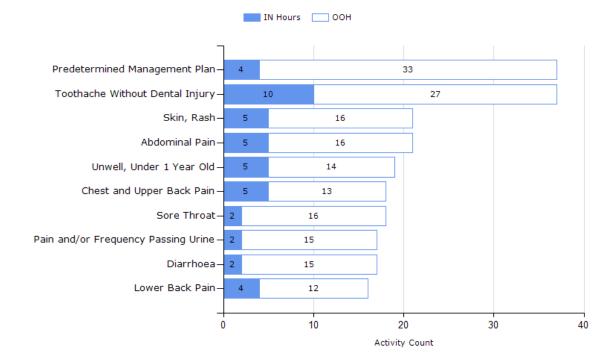
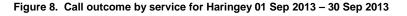


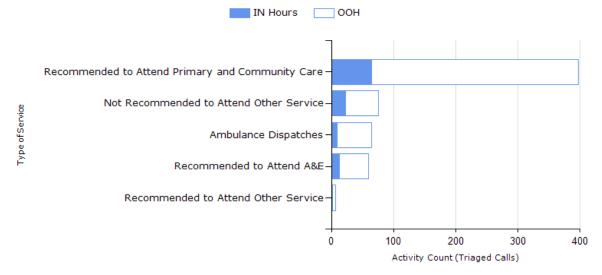
Figure 7. Call outcome by symptom group for Haringey (Top 10) 01 Sep 2013 - 30 Sep 2013

(Source: NELCSU October 2013)

8. Call outcome: Service Type

The call outcome by service for Haringey callers indicates that the main outcome is a primary or community care related service. This means that for most callers they are advised to attend a service that provides a primary care or community care function. However, this does not demonstrate where the patient actually presented and whether or not the service they attended actually handled the patient in this way.





(Source: NELCSU October 2013)

Table 2. Call outcome by service for Haringey 01 Sep 2013 – 30 Sep 2013

Type of Service	In Hours	In Hours (%) of Total	Out of Hours	Out of Hours (%) of Total	Total Activity
Ambulance Dispatches	9	8.3%	55	11.2%	64
Not Recommended to Attend Other Service	22	20.2%	53	10.8%	75
Recommended to Attend A&E	13	11.9%	46	9.3%	59
Recommended to Attend Other Service	1	0.9%	5	1.0%	6
Recommended to Attend Primary and Community Care	64	58.7%	333	67.7%	397
Total	109	18.1%	492	81.9%	601
(Source: NELCSU October 2013)	1				

9. Service Referrals

For those calls analysed, the service to which the majority of cases were referred was Barndoc Healthcare Ltd. In total Barndoc Healthcare received 62% of all referrals (both in-hours and out-of-hours) from LCW 111 in relation to Haringey callers during the month of September 2013. Local emergency departments each received a relatively small proportion of referrals from LCW 111 during the same period (Table 3).

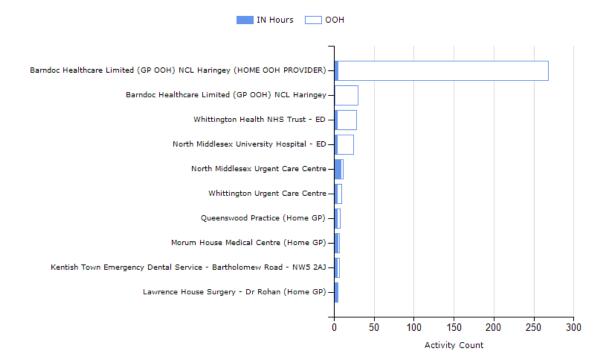


Figure 8. Service referrals for Haringey callers (Top 10) 01 Sep 2013 - 30 Sep 2013

(Source: NELCSU October 2013)

Table 3. Service referrals for Haringey Callers (Top 10) 01 Sep 2013 – 30 Sep 2013

Service Name	In Hours	In Hours (%) of Total	Out of Hours	Out of Hours (%) of Total	Total Activity
Barndoc Healthcare Limited - GP OOH	5	6.1%	263	63.8%	268
Barndoc Healthcare Limited - GP OOH	1	1.2%	29	7.0%	30
Whittington Health NHS Trust – ED	4	4.9%	24	5.8%	28
North Middlesex University Hospital - ED	4	4.9%	20	4.9%	24
North Middlesex Urgent Care Centre	8	9.8%	3	0.7%	11
Whittington Urgent Care Centre	4	4.9%	5	1.2%	9
Queenswood Practice (Home GP)	4	4.9%	3	0.7%	7
Kentish Town Emergency Dental Service	4	4.9%	2	0.5%	6
Morum House Medical Centre	5	6.1%	1	0.2%	6
Lawrence House Surgery - Dr Rohan	5	6.1%	0	0.0%	5
Barndoc Healthcare Limited - GP OOH	0	0.0%	4	1.0%	4

(Source: NELCSU October 2013)

For further information please contact: **NHS Haringey CCG**