

**LEICESTERSHIRE, LEICESTER AND RUTLAND HEALTH
OVERVIEW AND SCRUTINY COMMITTEE – 23 SEPTEMBER 2020**

NHS111 First

REPORT OF LEICESTER, LEICESTERSHIRE AND RUTLAND NHS

Introduction

1. During the peak months of the coronavirus pandemic the number of people attending the Emergency Department at Leicester Royal Infirmary reduced significantly although more recently the number of people attending has begun to rise. At the same time, due to social distancing and infection prevention and control precautions, the capacity including physical space has significantly reduced.
2. The challenge of increased attendances combined with the reduction in available space means that the NHS system has to respond by reducing the number of patients using Emergency Departments (ED). This will be achieved by guiding the public to make the right healthcare choices to ensure their safety and the safety of others, as well as making sure they get the right treatment in the most appropriate place.
3. NHS111 First will:
 - Make it easier and safer for patients to get the right advice or treatment when they urgently need it; and
 - Increasingly, use booked timeslots/appointments for a service that is right for them.

NHS111 First in LLR

4. NHS 111 First refers to the development of the current NHS 111 service to offer patients and the public a different approach to the accessing healthcare. As a programme it means:
 - NHS 111 or your GP practice are the primary places to go when experiencing a health issue that is urgent but not immediately life threatening;
 - A move away from going to a physical location as the first choice to access healthcare (but not removing, when it is the most appropriate place to go);

- Embracing virtual assessment and the technology which supports it;
- Preventing nosocomial (hospital acquired) infection by ensuring patients do not need to congregate together in Emergency Department waiting rooms;
- Ensuring patients get a clear direction of what they need to do and where they need to go in order to resolve their issue; and
- Protecting those most at risk (e.g. shielded patients) by giving them an enhanced service.

5. Key features of the model are:

- **Establishing NHS 111 to ED referral processes and booked appointments** to ensure EDs can plan ahead in the day to day running of their services and, potentially, smooth their intra-day attendance profile through the booking of patients referred by NHS 111 services;
- **Establishing NHS 111 to Ambulatory Care Emergency Services referral processes and booked appointments** to ensure that patients presenting as an emergency can be diagnosed and treated on the same day with ongoing clinical support and supervision as required, without having to wait in ED first;
- **Enhancing clinical triage through 111 and increasing alternative services suitable for direct booking via NHS 111 Services** such as (list not exhaustive):
 - Other secondary care specialties
 - Mental Health Services
 - Respiratory Services

6. Communications to the public will play a significant role in the successful implementation of NHS111 First. Through our communications we will:

- Explain the developments and new arrangements to support NHS 111;
- Raise awareness and promote NHS 111 as the first point of contact for Urgent care needs;
- Promote the benefits of calling NHS 111 first: helping people get the right treatment at the right place; and

- Engage with patients to understand their experiences of the new system: use these insights to influence development of the model and how we communicate about the service to achieve long-term behaviour change of those who visit Emergency Departments for minor illnesses.
7. NHS 111 First is an important evolution of the current model of 111 and the principle of expanding clinical assessment to ensure people access the right service, first time. We will begin to launch some of the changes to 111 in LLR from the 28th September, and develop the 111 First model in a phased way over the coming months. The presentation to the Leicestershire, Leicester and Rutland Health Overview and Scrutiny Committee on 23 September 2020 will summarise some of these key changes.

Appendix

Powerpoint slides to be shown on 23 September 2020.

Officer to contact

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