



**Healthy London
Partnership**

Responding to urgent needs at home

- 111 *Line and AHP/Paramedic collaboration

Eileen Sutton

Head of Urgent and Emergency Care Programme (111 and Integrated Urgent Care), Healthy London Partnership

Supported by and delivering for:



Public Health
England



SUPPORTED BY
MAYOR OF LONDON

London's NHS organisations include all of London's CCGs, NHS England and Health Education England

Introduction

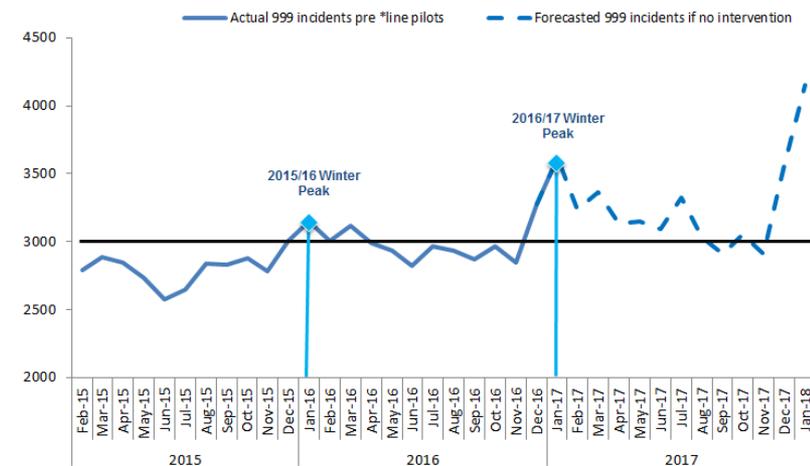
1. Case for change
2. The solution
3. Pilots [23 Jan – 29 Aug 17]
4. Business as Usual
5. Video conferencing | PELC 111 GPOOH NEL
6. Winter Campaign 2017-18
7. *6 in action: Influenza outbreak
8. *5 Line
9. Next steps

111 *Line – Case for Change

- Past winters data from London Ambulance Service (LAS) showed a significant number of care homes across London STP/ U&EC Networks frequently calling 999.
- Care home staff reported difficulties in speaking to resident's GP so called 999 instead.
- From **2015 to 2016**, the number of 999 calls received from care homes **increased 6.5%**.
- At the peak, **3,273** care home incidents were attended to by 999 in December 2016.

- Conveyance from care homes to London EDs was consistently high at 87%.
- Projected 999 attendance at care home incidents would increase if there is no intervention.
- The peak time of day for care homes to request an ambulance is predominantly Monday – Friday afternoons.

999 Incidents at Care Homes



- Patients tended to arrive at ED in the late afternoon/early evening and therefore more likely to be admitted.
- A clinical review of paramedic's 'at-scene' documentation demonstrated that an urgent GP response may have been more clinically appropriate for a significant proportion of these 999 calls.

111 *Line – The solution

- Three * lines are available through the NHS 111 system using the NHS 111 cloud based Patient Relationship Manager (PRM)
- Designed to enable particular callers to use their telephone key pad to connect quickly with a GP in the NHS 111 contact centre.
 - *5 is for LAS crews attending incidents at patient's homes or care homes.
 - *6 is for care home staff who require urgent clinical advice and support.
 - *7 is for Rapid Response nurse teams and domiciliary care workers.
- *Line calls are routed to a NHS 111 service adviser who takes the patient details and transfers the call to a GP 24/7 - if the GP is already on a call there is a guaranteed call back within 20 minutes

111 *Line – Pilot Phase [23 Jan – 29 Aug 17]

- In response to these challenges, London obtained agreement across all 111 providers to rapidly mobilise pilots which aimed to:
 - ✓ deliver improved patient outcomes;
 - ✓ support care home staff with appropriate clinical response;
 - ✓ reduce pressures on the wider U&EC system through rapid access to a GP consultation.
- Pilots of new telephony routing [Dial 111 press *5, *6 or *7] went live 23 Jan 17.

What did we do?

Urgent GP support for ambulance crews this winter from NHS111

Healthy London Partnership 



Can't get the patient's GP on the phone?



Don't wait, call 111 immediately



Follow the instructions below to quickly access a GP



Get the right advice and take action straight away!

Dial 111. Press 9 to continue. An automated message may ask you to confirm your location. When you hear the message "This call is recorded for quality purposes", press * wait for the beep, then press 5. You will be connected to a Call Handler at the local NHS 111 service who will transfer you to a GP or arrange for a 20 minute GP call back. To feedback on this service contact england.nhs111submissions@nhs.net.

Urgent GP support for care homes this winter from NHS111

Healthy London Partnership 



Can't get the resident's GP on the phone?



Don't wait, call 111 immediately



Follow the instructions below to quickly access a GP



Get the advice you need to care for your resident locally, and avoid unnecessary ambulance calls

Dial 111. Press 9 to continue. An automated message may ask you to confirm your location. When you hear the message "This call is recorded for quality purposes", press * wait for the beep, then press 6. You will be connected to a Call Handler at the local NHS 111 service who will transfer you to a GP or arrange for a 20 minute GP call back. To feedback on this service contact england.nhs111submissions@nhs.net.

111 *Line – Pilots - Evaluation

What impact has it had?

17,624
* calls

23rd Jan – 29th August
(25% from LAS Crews / 74% from Care Homes)

6.5%
monthly decrease

of care home calling 999 pre *line introduction (prev. was 7% increase year on year)

LAS Crew Feedback after using the *5 service:

88%

said the GP was helpful

Additional

10,950

green ambulance overrides occurred in 2017 compared to 2016 Jan 23rd – Aug 13th

61% calls closed

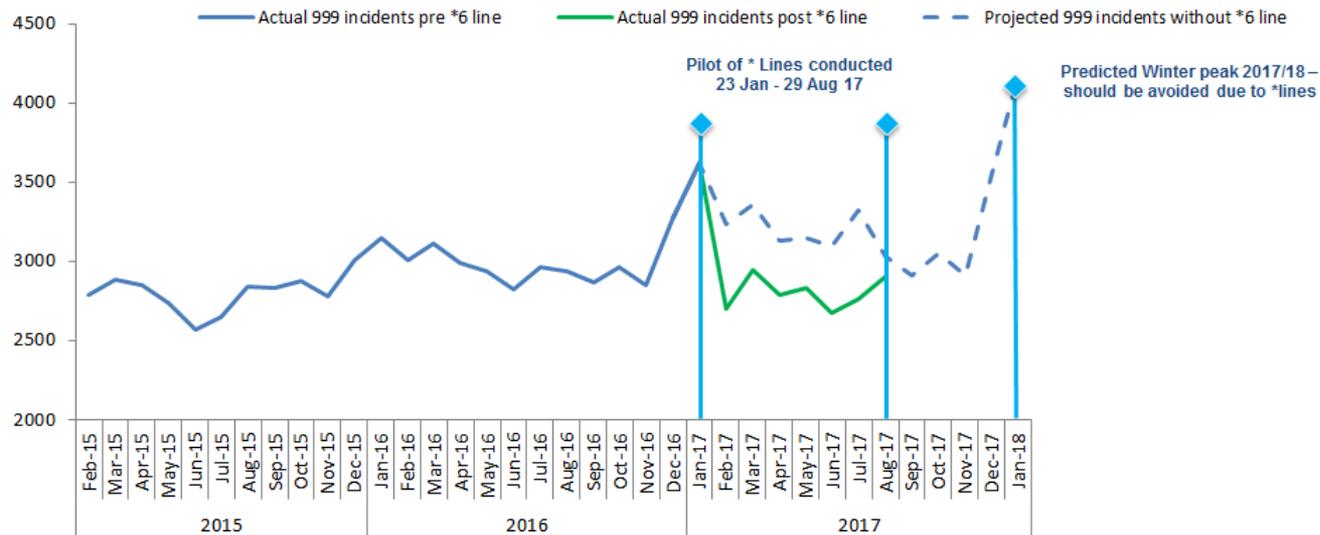
across London by GP in the Hub for * line callers following clinical input vs. overall 111 service has an average closure rate of 14.3%



2% of cases

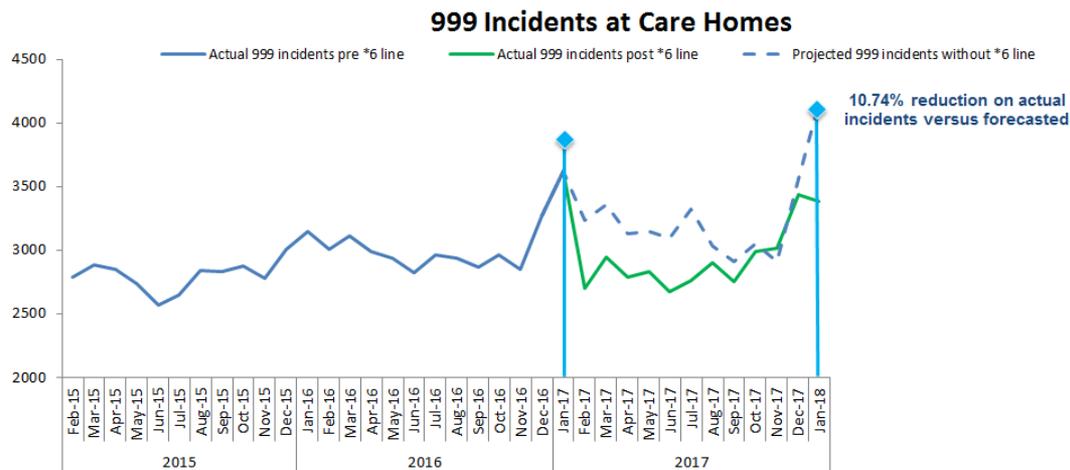
were identified as attending ED after GP input compared with overall NEL 111 service of 13% identified as attending ED (NELCSU data linkage evaluation)

999 Incidents at Care Homes



111 *Line – Business as Usual ongoing impact

- Service continuing to operate as Business as Usual post pilot.
- From 23 Jan 17 to Jan 18, London 111 has received 35,519 calls on the *lines
- 23,932 [67%] were calls to *6 care home line.
- Since the *6 line was introduced, actual 999 incidents at Care Homes have decreased by an average **10.74%** against the projected number of 999 incidents without a *Line.
- This equals a **reduction of 3,777 forecasted ambulances** attending care homes.
- This also equals a **reduction of 3,286 forecasted conveyances** of elderly, frail, care home residents to Emergency Departments.



111 *Line – Business as Usual – Staff Evaluation

- An independent evaluation commissioned to explore staff experiences noted the *lines as a positive expansion to the NHS service:

Independent Evaluation Feedback

Picker were commissioned to undertake qualitative research exploring staff experiences of using and delivering new programmes in NHS 111. They were viewed as a positive expansion to the NHS 111 service. **24** interviewed:

Care Home
Staff

NHS
Supervisors

GPs

Paramedics

“I think it’s a really good to start making improvements within NHS 111 and I hope we’re able to continue with it and expand on it.”

“it’s certainly helped us sort of not convey people to urgent care centres or hospitals”



111 *Line – Video Conferencing | PELC 111

- PELC 111 GPOOH NEL installed video conferencing links to give carers and care home nurses rapid access to a GP assessment without the need to move the patient or for a care home visit by.
- The system has been used and the GP was able to **accurately assess the significant points without the need to visit the patient**, thus ensuring:
 - ✓ Minimal disruption to the patient and reduced time to treatment for the patient,
 - ✓ Productive use of GP time – with no visit being required further GP time was available for responses to other patients,
 - ✓ Cost savings - an average saving of **£120 per hour** for each home visit.
- The patients were observed on the video link and live consultations took place. Patients' details were confirmed, consent obtained and the care home nurse acted as a chaperone.

Case Details	Outcome	Benefit	
<p>Case 1 84 year old female Diarrhoea & Vomiting</p>	<ul style="list-style-type: none"> • The patient was tolerating fluids and passing urine regularly. • She did not complain of any dizziness on standing or any abdominal pain. • She was alert and orientated. • Vital signs were done and were within normal limits. 	<ul style="list-style-type: none"> • GP observed the colour of the urine sample over the video link. • Dioralyte and buscopan was issued over the phone. 	<ul style="list-style-type: none"> • Home visit / ambulance dispatch avoided. • Routinely if the patient was vomiting then LAS would have been called to convey the patient to A&E due to risk of dehydration.
<p>Case 2 82 year old female Inflamed Rash</p>	<ul style="list-style-type: none"> • Cavilon (cream for use on intact or irritated skin) had not helped. • The vital signs were within normal limits • Patient had no recorded fever • She did not complain of any disorientation or confusion 	<ul style="list-style-type: none"> • Rash was observed on the video link –was moderately inflamed but no active bleeding observed. • The nurses were reassured • Timodine was prescribed. 	<ul style="list-style-type: none"> • Home visit / ambulance dispatch avoided. • Nurses were advised to monitor for a fever or worsening of the skin • GP follow up in 1-2 days advised.

111 *Line – Winter Campaign 2017/18

- To help ease predicted winter pressures, the NHS 111 *line campaign was re-launched to raise awareness in care homes and LAS crew and increase activity.
- Letters / posters sent to remind care homes of the service circulated to all care homes, CCGs and STPs in London and to CQC regional managers
- From a request by ED consultants attending a UEC Clinical Leadership Group meeting, a letter about the *Line service was added to the ED discharge process.
- LAS Crew attending 999 incidents in Care Homes requested a form of communication that could be quickly given to Care Home managers as a reminder of the NHS 111 *6 (fast access to a GP) line.
- Initially 500 cards were printed and issued to front line LAS crews – we ran out in two weeks.



Dear Care Home Manager,

We are contacting you to raise awareness of the NHS 111 *6 service, which is available to help Care Homes to better access the support of the local system as required.

When dealing with an urgent situation, the NHS 111 *6 service will provide you with **fast access to a GP 24/7**, who can give you the advice and medical input you need to care for your resident, instead of having to transfer them to an Emergency Department. There has been a recent admittance to ED from your Home, and we believe that in this case the patient could have stayed in the Home and received medical input from a GP instead.

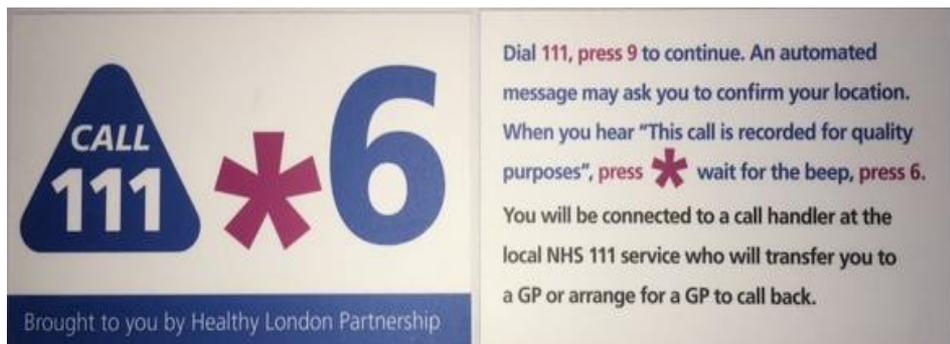
Supporting your residents to stay in their home is a key priority for us, and we want referrals to Emergency Departments to only be used for emergency situations. As you know, an elderly person who spends 10 days in a hospital bed will lose 10% of muscle mass. The NHS, Social Care and Care Homes strongly believe that "the best bed is your own bed", so we want to keep the elderly in their Care Home wherever it is safe to do so.

We ask that you make use of the NHS 111 *6 service for future urgent situations, and have included posters with this letter which we ask you to put by your telephones and nursing stations to help remind staff of the service.

If there are any reasons that you cannot obtain the services you need to avoid sending residents to hospital through the *6 line, then please do let us know so we can rectify this.

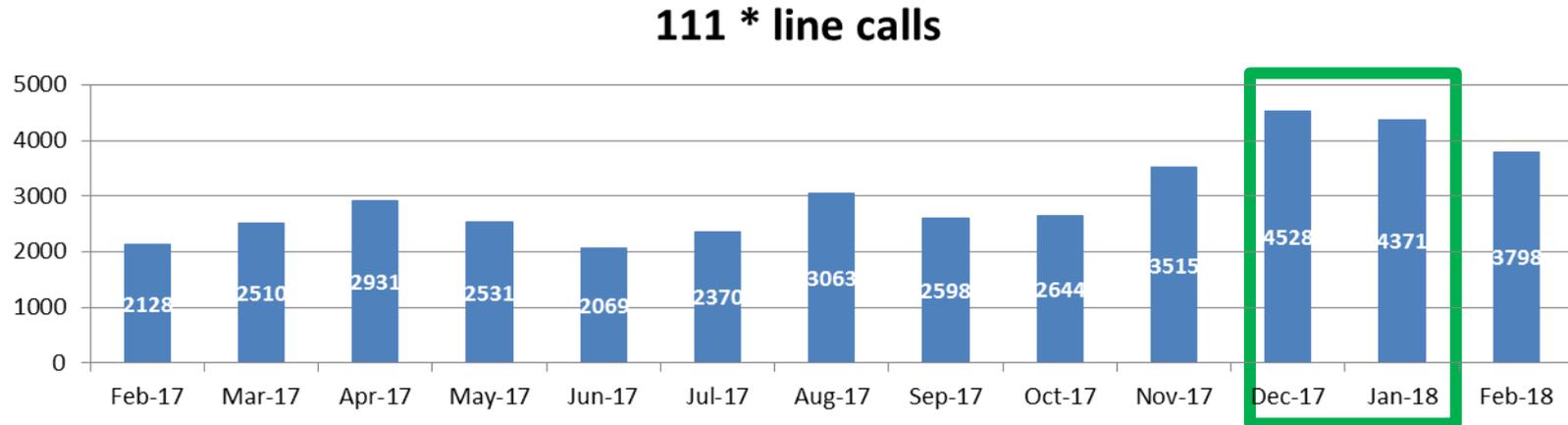
We thank you in advance for your help with this initiative, and would welcome any feedback or suggestions to improve the NHS 111 *6 service.

ED and *6 Letter
included as an appendix
to the presentation



111 *Line – Winter Campaign 2017/18

- We saw an increase in 111 call frequency, and therefore *line calls, across London over winter 2017-18.



- Also as part of the winter campaign for Care Homes, we sent out information about vaccinating staff and residents, agreeing for the first time free flu vaccinations for flu care home staff including cleaning and catering staff. Information included how to manage flu outbreaks in a care home.
- Care Homes were advised to contact 111 *6 if they had a flu outbreak amongst residents.

111 *Line – *6 in action: Influenza outbreak

- Winter campaign preparation and procedures was called into action on Saturday 6th January 17.
- Care Home in Camden, North Central London contacted Health Protection Team [HPT], who declared a **local contained outbreak** at 17:00 on the Saturday.



- HPT engaged with Imms01 On Call to commission the assessment and the prescribing of treatment for 60 residents.



- Imms01 On Call contacted the 111 Provider via *6 to commissioned a GP to attend to undertake assessments.



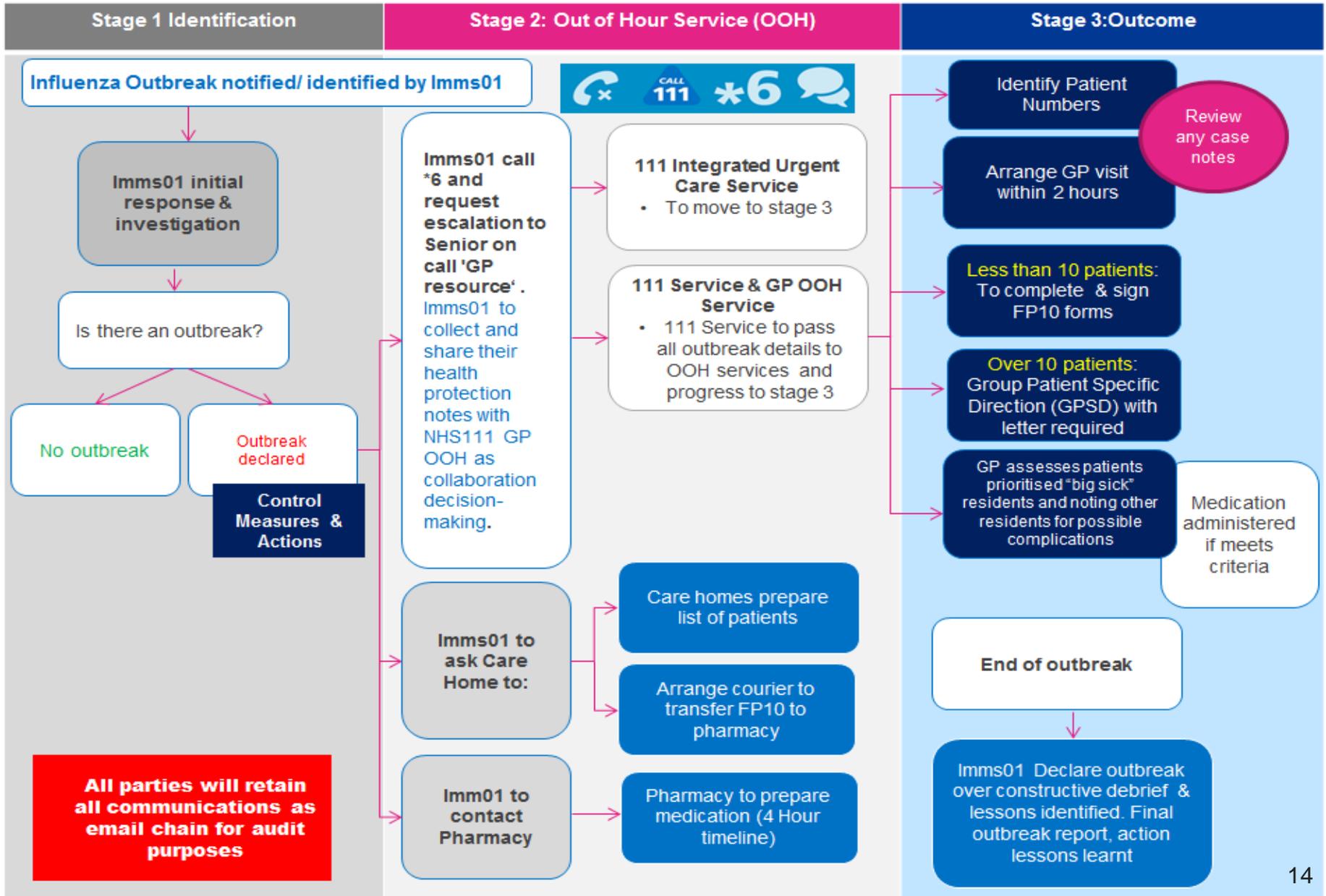
- The NHS111/ IUC GP was deployed, visited the Care Home, undertook assessments of 60 patients of which 4 had influenza and drafted FP10 Tami Flu prescriptions for dispensing within 2 hours



111 *Line – Response to Influenza Outbreak

- A review of the Influenza Outbreak events identified the lessons to be learnt from this event and previous influenza outbreaks.
- A Rapid Process Improvement workshop was held on 2 February 2018 to:
 - Agree a consistent approach for London utilising *6 to support influenza outbreaks in Care Homes.
 - Agree clear guidelines for roles and responsibilities
 - Agree a Standard Operating Procedure for London's out of hours response
- Now robust procedures in place designed to:
 - Minimise the spread and potential health impacts of a future influenza outbreak.
 - Reduce 999 incidents and hospital admissions for care home residents.
 - Ensure essential and critical services are maintained and expanded whilst protecting patients and staff against adverse effects.

111 *Line – Influenza SOP



111 *Line – *5 Line

- This service was available for LAS crews attending incidents at patient's homes or care homes by calling 111 and press *5 following feedback from LAS crews that they frequently experienced delays in speaking to the patients GP when called to a 999 incident in the patient's home.

Urgent GP support for ambulance crews this winter from NHS111

Healthy London Partnership **NHS**



Can't get the patient's GP on the phone?

Don't wait, call 111 immediately

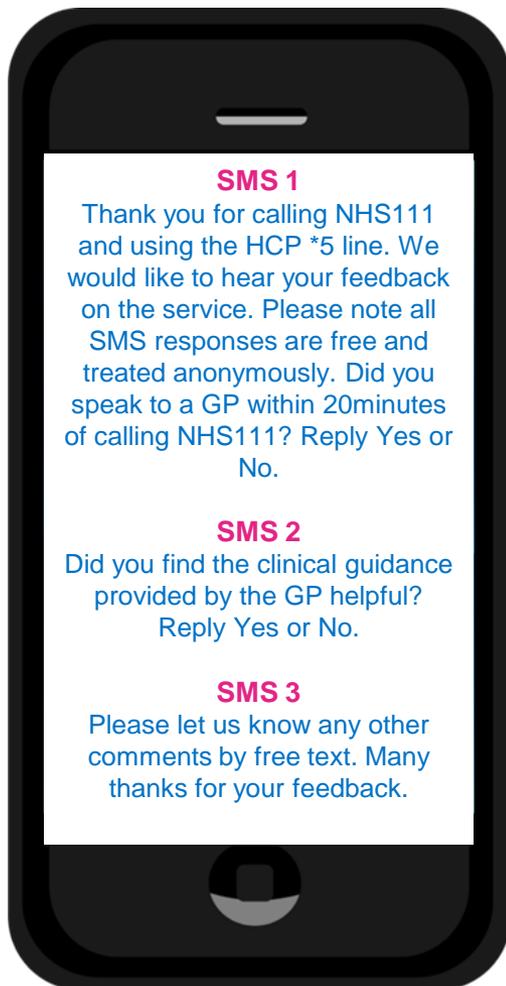
Follow the instructions below to quickly access a GP

Get the right advice and take action straight away!

Dial 111. Press 9 to continue. An automated message may ask you to confirm your location.
When you hear the message "This call is recorded for quality purposes", press * wait for the beep, then press 5.
You will be connected to a Call Handler at the local NHS 111 service who will transfer you to a GP or arrange for a 20 minute GP call back. To feedback on this service contact england.nhs111submissions@nhs.net.

111 *Line – *5 Line – LAS feedback

- Feedback from LAS 999 crews who had used the *5 line was sourced via a text “*speed back*” mechanism. Three automated texts are sent to crew members within one hour after their call to the line.



User Feedback – LAS Crews

Anonymous feedback received via text from LAS Crews is recorded on the 111 PRM dashboard and some recent examples are below:

79% thought *5 was an alternative to conveyance	43% would have made an ED referral without *5	88% found the GP helpful
--	--	---------------------------------

“It was a prompt service and it was effective. Thank you.”

“Easy to use, quick return call, convenient for patient, saved unnecessary trip to A&E. Thank you.”

“Great GP and friendly professional call handler”

111 *Line – Next steps

- On-going education and engagement with Care Homes about the service and its benefits.
- Investigating low usage in Community Services.
- Reviewing a request to expand service to include norovirus outbreaks in care homes.
- Met Police have requested possible use of *7 for street triage – mental health crisis.
- Potential to provide *line to domiciliary social care services.

111 *6 Line – Appendix – ED Letter



NHS England (London Region)
Skipton House
80 London Road
London
SE1 6LH
Tel: 01138070497

Dear Care Home Manager,

We are contacting you to raise awareness of the **NHS 111 *6** service, which is available to help Care Homes to better access the support of the local system as required.

When dealing with an urgent situation, the **NHS 111 *6** service will provide you with **fast access to a GP 24/7**, who can give you the advice and medical input you need to care for your resident, instead of having to transfer them to an Emergency Department. There has been a recent admittance to ED from your Home, and we believe that in this case the patient could have stayed in the Home and received medical input from a GP instead.

Supporting your residents to stay in their home is a key priority for us, and we want referrals to Emergency Departments to only be used for emergency situations. As you know, an elderly person who spends 10 days in a hospital bed will lose 10% of muscle mass. The NHS, Social Care and Care Homes strongly believe that “the best bed is your own bed”, so we want to keep the elderly in their Care Home wherever it is safe to do so.

We ask that you make use of the **NHS 111 *6** service for future urgent situations, and have included posters with this letter which we ask you to put by your telephones and nursing stations to help remind staff of the service.

If there are any reasons that you cannot obtain the services you need to avoid sending residents to hospital through the *6 line, then please do let us know so we can rectify this.

We thank you in advance for your help with this initiative, and would welcome any feedback or suggestions to improve the **NHS 111 *6** service.