

“It's a much easier number to remember (NHS 111), even if you are in a rush and you don't have time to look for the number in your diary. Even my 85 year old Mum can call 111”

(Newham Resident)

**Patient and Public Engagement Report:
Understanding the community's experience of
NHS 111 Integrated Urgent Care in Newham**

November 2016

Introduction

Newham CCG's patient and public engagement strategy for the procurement of the NHS 111 Integrated Urgent Care service consisted of four elements:

1. **Recruitment of four patient representatives** to a patient reference group to provide patient and public representation and input into the procurement process.
2. **Community engagement** targeting over 75s, under 1s, the general public (including those currently using the out of hours service).
3. **NHS 111 IUC online survey.**
4. **Collation of community intelligence** – feedback from Newham CCG's key transformation programmes as well as Healthwatch Newham data.

This report captures feedback given by our community across the above platforms 2, 3 and 4. The feedback will be used to shape the new NHS 111 service model and commissioners will be expected to share impact/outcomes with the community at the end of the procurement.

Key achievements from the engagement activities include:

- The two week online survey **generated 108 responses**
- Community **outreach in 12 community sites** including libraries, children's centres, community events/meetings - **engaging 244 people including Carers and Deaf patients**
- Sent notice about the procurement to **over 600 community groups**

The Newham context

Newham's population is diverse - over 140 languages are spoken. We have one of the youngest populations in the country, 41% of our population are aged 20-39 and we also have the highest birth rate in the country with approximately 7,000 births per year. To ensure participation in this context, community engagement drives the CGG's engagement approach – see engagement tracker below:

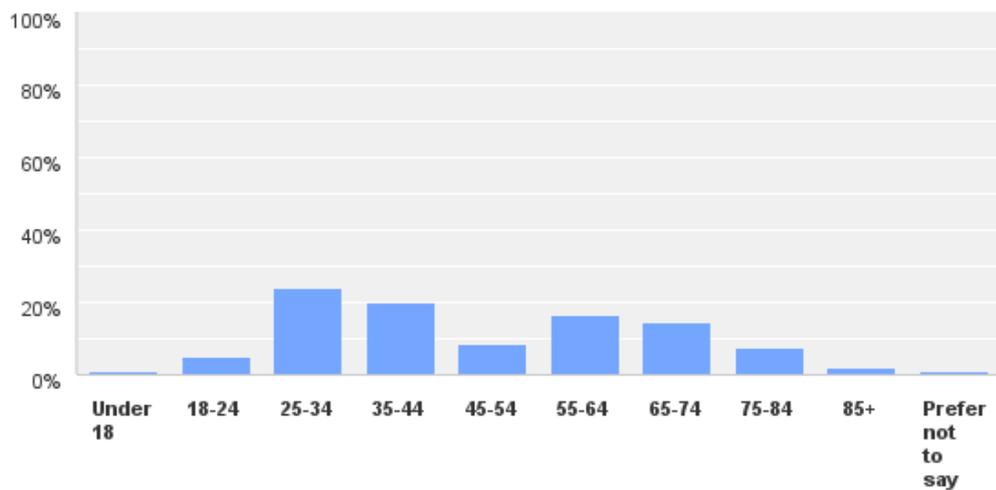
Community Group	Activity	Key themes
Older People's Reference Group	Discussion	<i>Attendees said that 111 would be good if you want advice, and would be better than turning up A&E. One member said they would prefer to ring the emergency number provided by their GP so that they know they will speak to someone local who can visit in person if necessary</i>
East Ham Community Neighbourhood: Coffee Morning 50s	Drop-in	<i>General consensus was that it was a good idea, to have one universal number, but it needs improving for patients not to go to A&E</i>
Newham Deaf Forum - primary care event	Discussion	<i>Feedback generally about overall challenges accessing NHS services in primary care resulting in A&E admissions</i>
Manor Park Community Neighbourhood: Older People's Day	Survey Drop-in	<i>Majority not heard of or used 111. Generally feel a good idea as long as it's a good service, agree that early exit for the named groups should be prioritised</i>
Plaistow Children Centre: Health Clinic	Survey Drop-in	<i>Quite a few people had heard of 111, mixed response with some having a very good experience while others said they wouldn't use it again</i>
Older People's Reference Group: AGM	Stall & Survey	<i>Majority not heard of or used 111 - mixed feedback from the few who had. General feeling is that 111 is a good idea, as long as quality of advice/support is good</i>
Older People's Day	Stall/Survey	<i>Majority not heard of or used 111. Generally feel a good idea as long as it's a good service</i>
Manor Park Community Neighbourhood: drop-in	Survey Drop-in	<i>Quite a few people had heard of 111 – perceived as a good back-up when they can't get through to the GP</i>
Newham Carers Network	Discussion	<i>More needs to be done to promote 111 among Carers</i>
St Stephen's Children Centre: Health Clinic	Survey Drop-in	<i>Generally agreed that 111 is useful and that under 1s should be prioritised</i>
St Stephen's Children Centre: Baby Play	Discussion	<i>Generally negative experience of 111. Patient experience of primary care tended to be quite poor for some which could impact use of 111</i>
Manor Park Community Children's Centre: P&T	Survey & Drop-in	<i>Generally those who had used 111 had a positive experience</i>
St Mark's Deaf Club	Discussion	<i>Very good offer – when you go to A&E it takes time for them to get interpreter but with 111 you could get BSL and access to advice straightaway.</i>

NHS 111 IUC online survey response

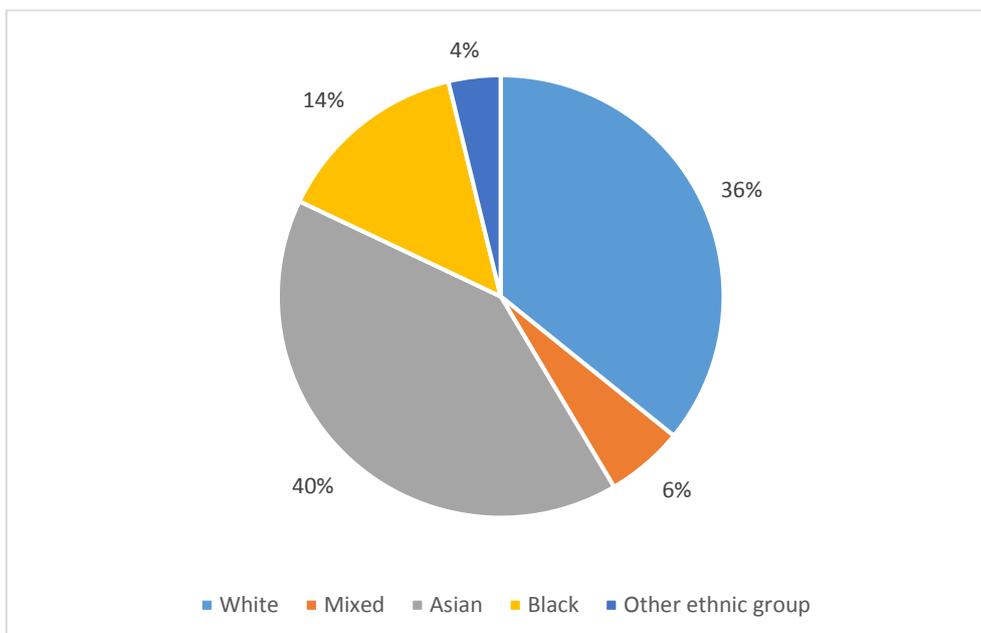
Who responded to our call?

Over a two week period 108 people responded to the CCG's call to complete the online survey, the majority of respondents told us that they had not used 111 (63.8%) and 36.2% said they had.

Most of the people who took part in the survey were female at 67% and 30.1% were male. There was also representation from all age groups with the majority aged 25-34 and 35-44 with high response rates also from people aged 55-64 and 65-74, as illustrated below:



As reflected of the borough's population, there was a strong response from BME communities. For a more detailed breakdown of ethnicities see appendix one.



We also received responses from disabled people across the following disability groups below. Of the 79 people who answered this question we know that most had a physical or mobility impairment:

Disability Group	Response per cent
Physical impairment	15.2%
Mobility impairment	10.1%
Hearing impairment	8.9%
Mental illness	8.9%
A health condition e.g. HIV, multiple sclerosis or cancer	6.3%
Visual impairment	5.1%
Learning difficulties	5.1%
Deaf BSL user	0.0%
Blind	1.3%

While the survey generated no responses from the Deaf community, the CCG conducted additional community outreach to capture this community's feedback, see page 12.

Experience of using 111

Of the 105 people who answered whether or not they had used 111 36.2% said they had. Most people told us that they had a good experience, but some people told us it also needs improving:

What was good about the service	What needs improving
<i>"My daughter cut finger and the bleeding wouldn't stop. Called 111, they said the Doctor will call soon. The Dr called back asked me questions and gave advice."</i>	<i>"Just felt like a signposting service as I was advised to ring an ambulance."</i>
<i>"Used 111 twice and I think it's an excellent service. I was pregnant, the adviser had to call an ambulance for me and she stayed on the phone with me until the ambulance arrived. It was really reassuring."</i>	<i>"My ears started bleeding and I called 111. I wasn't panicking at first but when 111 said I should go to hospital straight away I was panicking. I got a friend to take me. There was a Dr on reception and said I didn't need to worry, it was urgent my not life threatening. It wasn't necessary to go straight away."</i>
<i>"Quite good, the lady was quite helpful. I phoned about my son. The response was very quick. They check all the local hospital walk-ins and informed the hospital we were coming so we were seen quickly."</i>	<i>"I felt there were too many questions. In the end I just hung up and went to A&E. It was 12am, my husband was not at home. I have two children so I didn't want to go to A&E but I had no choice in the end."</i>
<i>"It was supportive and informative. It prevented anxiety. I thought this number was discontinued."</i>	<i>"Hard."</i>
<i>"I was advised quickly to what I needed to do for my child. Operator was friendly and asked all relevant questions."</i>	<i>"Not good, they booked an appointment for me at my GP practice but I had to wait a long time."</i>
<i>"Used 111 when my child was a baby. Good at the time as I wasn't able to get appointments with my GP; another option to get a second opinion. Though sometimes there was a bit of variation in the advice I got."</i>	<i>"Negative experience."</i>
<i>"Overall pleasant experience. Person on the other phone was very helpful and calm, and advised me well."</i>	<i>"Stressful. Too many questions at a moment of panic and uncertainty. There is no sense of urgency to the caller who is clearly under distress."</i>
<i>"I called for advice and they gave me options to talk to the GP. It was useful."</i>	<i>"Called back quickly although we felt the screening operator asked a lot of irrelevant question."</i>
<i>"It was good - used it two or three times. Once the GP was closed, my daughter had a high temperature. They set up a call with my GP who called back in an hour."</i>	<i>"Used 111 on a number of occasions, long wait for a call back from the doctor. I would prefer to speak to a medical professional straightaway. It can be frustrating if you have a child under one. Once when I called up I spoke to the adviser I gave them all the information they needed then I had to repeat the whole story again when I spoke to the health care professional afterwards."</i>
<i>"Called out of hours during bank holiday, had a toothache and they arranged an appointment at the dentist for me on the same day."</i>	
<i>"Quick response, after explaining symptoms an ambulance was sent very quickly, excellent help at hospital. Quickly sent for tests too."</i>	
<i>"It was useful to obtain guidelines on what to do next when the GP was closed and how important it is to get clinical advice without going to hospital."</i>	
<i>"Operator was helpful and asked about symptoms and advised the right treatment."</i>	
<i>"Positive experience with a return phone call received within</i>	

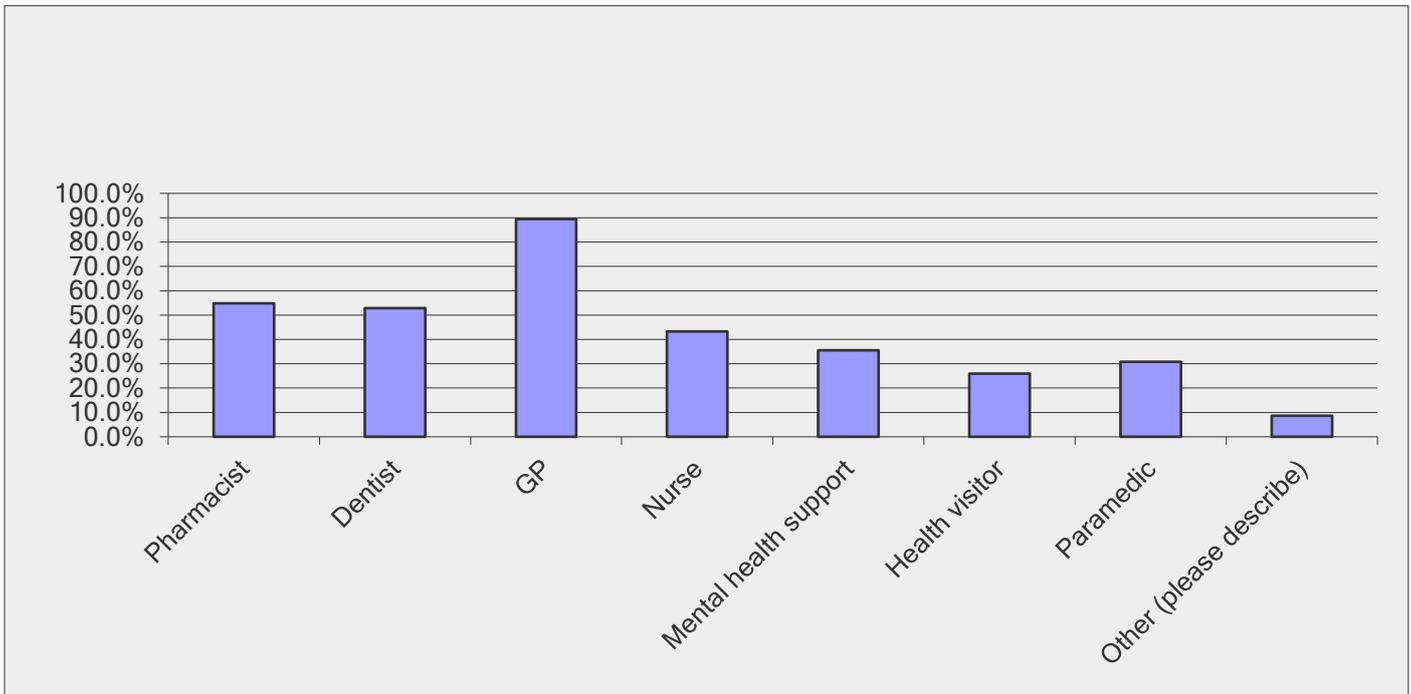
<i>the hour. My query dealt with quickly & thoroughly."</i>	
<i>"Really useful. I've used it 3 or 4 times. Very prompt and gave good advice. They got me an ambulance when I needed one. I thought 111 was just out of hours - in hours my GP doesn't like it."</i>	
<i>"Phoned NHS 111 as was experiencing chest pains. They asked about my symptoms and booked me an appointment at Whipps Cross A&E within the hour."</i>	
<i>"I think it's a good service, the response was quick. I felt that the operator understood my needs. I got a call back from the Dr quickly, the operator had already explained my needs to the Dr I got help straightaway."</i>	
<i>"I'm deaf. I told them that I had difficulty understanding what they were saying and they were really patient with me."</i>	
<i>"Calling 111 saved my baby's life. The Dr had sent us home from the urgent care centre telling us it was not urgent. I didn't know that, if your baby has been crying for over an hour it is serious. Called 111 and they told me to go straight to A&E."</i>	

We also asked people if they were able to get the right help or advice they needed if they had used 111 and 78.8% said yes while 21.2% said no. Those that said no were concerned about the quality of advice given by 111 call handlers and the long waiting time for referrals:

- *"There was no advice given. I explained the situation and they said to call an ambulance."*
- *"Didn't get right help or advice. Had massive toothache, an ulcer. Started feeling very ill. I was told to just take ibuprofen. Got appointment in five days. In the end I went to emergency and they said that was a good thing to do because it was infected and they gave me antibiotics. Expect it's a bit hit and miss."*
- *"Didn't know what they were doing. Hopeless. Untrained."*
- *"I was referred to A&E. I thought it would be a fast service because they would be pre-notified I was coming but it was a long wait in A&E."*
- *"The advice I got was not consistent - depended on who I spoke to."*
- *"9/10 times they just say go to A&E - did I really need to go?"*
- *"I was told to take a paracetamol even though I was in a lot of pain - I had kidney stones. Went to A&E in the end."*
- *I wasn't local at the time. I was desperate to get advice for a urinary tract infection. I was in great pain. I was told to go to the GP the next day. Not very happy about it. I went to a walk in centre instead."*

Redesigning NHS 111

We asked people to tell us which services or professionals would they like to be able to get advice from if they called NHS 111. Out of the seven options we gave, we asked people to choose their top four preferences only. Of the 105 people who responded, GPs, pharmacists and dentists are at the top of most people's list.



Who do patients want to speak to? Almost 105 people told us GPs are at top of their list.

People also told us, we should also consider including the following services or professionals:

- **Diabetic advisor**
- **Specialist services/ consultant**
- **Psychotherapists**
- **Homeopathic advice**
- **Midwife**
- **Advocacy**
- **Physician Associate support**
- **People with long-term conditions**

We also wanted to understand how patients would like to be helped when they called 111. The majority told us they would like advice from a health professional while at home:

1)	Advice from a health professional on how to look after yourself at home	70.9%
2)	Book you an appointment with your own GP	61.2%
3)	Book you an appointment with another local service e.g. an urgent care centre	61.2%
4)	Provide advice on what healthcare services are available near to you	53.4%
5)	Provide advice on medication from a pharmacist	42.7%
6)	Order an urgent repeat prescription	37.9%

What matters to people: getting advice from a health professional at home, booking appointments

111: all urgent healthcare advice, including GP out of hours?

We also asked people if having one phone number to call for all urgent healthcare advice or support, including GP out of hours services would be useful. Of the 104 responses 89.4% said yes and 10.6% no. Overwhelmingly people told us, they want 111 to be “easy”.

<i>“No chance of getting the wrong one or being bounced around.”</i>
<i>“Easy to remember number even when you are panicking.”</i>
<i>“I haven't really used GP out of hours. 111 would be an easier number to remember. You just need to know if you need to go to A&E.”</i>
<i>“I would call 111 first if needed help out of hours depending on severity. If just a slight fever I would go to pharmacist. If it seems serious or unusual would call 111. I think this idea is perfect. They can book you into GP. I can't remember the Out of Hours number”</i>
<i>“Like the link to GP out of hours service. GP out of hours is a mystery to most people - not advertised.”</i>
<i>“Easy to remember, accessible out of hours.”</i>
<i>“Yes as it will stop people rushing to hospital A&E but also heard lots of negative stories of 111 in media.”</i>
<i>“Useful. Would take pressure away from hospitals and GP receptionists.”</i>
<i>“Think it's good. When living alone it can be very stressful at night.”</i>
<i>“Because it is easy for people to remember having too many can confuse people.”</i>
<i>“Calling111 is much more convenient.”</i>
<i>“Memorable number. Need a filtering system though to make sure the caller is talking to the right team e.g. mental health etc. rather than having to speak to different call handler.”</i>
<i>“Free number and easy to access as it's so easy to remember.”</i>
<i>“It would be easy to remember this number but it would mean ensuring that there were more than adequate staff to deal with all the calls and adequate and appropriate staff.”</i>
<i>“Easy number to remember, don't have to run around in the middle of the night looking for another number.”</i>
<i>“Out of hours surgery are important for patients with childcare needs. One number and being able to speak to a trained adviser who can access your patient record would be useful.”</i>
<i>“Because 111 offers a service that this is open 24 hours a day. You can access it whenever you get ill so this is beneficial for patients. You don't have to wait in 5 or 6 hours in A&E if you don't have to.”</i>
<i>“Everything is in one place and on one phone number - no need to look up numbers for different services.”</i>
<i>“Easy to remember. If you change GPs it will stay the same.”</i>
<i>“Less stressful, more accessible for vulnerable patients and patients who don't speak fluent English.”</i>
<i>“The service sounds like it could make things easier for me, rather than go to A&E or the GP, I can just call up.”</i>
<i>“At the moment it is confusing knowing who to call & GP reception usually do not know.”</i>
<i>“You would get a response sooner and it would also be useful to have more options in terms of what to do.”</i>
<i>“You would get a faster response. Out of hours services has limitations, you can't be referred to other services.”</i>

However, some people were also slightly cautious about using 111:

- *“Has this not been tried before with NHS Direct...and failed? The 111 service has already had difficulties. Not sure the trust is there to use it as a viable resource?”*
- *“Answering loads of question can be off putting and sometimes, face to face contact is important.”*
- *“The call centre should be adequately manned and have the training and expertise to filter the call appropriately, and not waste our call time, as phone calls are expensive.”*
- *“The line may be overwhelmed, the risk of waiting too long time before speaking with somebody.”*
- *“If there isn't a live chat option it is entirely useless to people like myself who can't use the phone for disability related reasons.”*
- *“Because of the complex nature and wide range of likely calls, together with the human interactions, I am doubtful that a single phone number would work. Managers seem not to understand that the ceiling is not technological...it is human.”*

Prioritising under 1s and people aged over 75

We asked if parents or carers of ill children aged under one, people aged over 75 or those with an existing care plan should be streamed directly to a health professional through NHS 111. Of the 100 responses 96% said yes and only 4% said no.

Based on the free text responses, the majority of people believe that both groups should be prioritised. Parents with young children in Newham overwhelmingly want children aged under 1 to be supported better in the new service, as the feedback below demonstrates:

<ul style="list-style-type: none">• <i>“These categories require specialist advice and are the category of patient that delay is stressful to relatives and could be fatal.”</i>
<ul style="list-style-type: none">• <i>“Especially for first time parents - they'll be unsure in lots of situations that are not necessarily emergencies e.g. baby not going to the toilet for a week. As a parent you feel GP is not there for you. If you really have health care problems you want to be given advice straightaway and calm you down. Also for vulnerable old people.”</i>
<ul style="list-style-type: none">• <i>“Children aren't able to express themselves as much as adults and they have a weaker immune system so they need more support.”</i>
<ul style="list-style-type: none">• <i>“Because children and older people have more needs.”</i>
<ul style="list-style-type: none">• <i>“These groups have specific requirements which should be able to address more quickly through this process.”</i>
<ul style="list-style-type: none">• <i>“These vulnerable people could be put off by the series of questions a trained advisor might need to ask so as to decide how to proceed.”</i>
<ul style="list-style-type: none">• <i>“That age group - under 1s - have lots of minor issues. It would be easier to speak to someone over the phone instead of taking them out somewhere.”</i>
<ul style="list-style-type: none">• <i>“Yes - time saving, get advice quickly without waiting.”</i>
<ul style="list-style-type: none">• <i>“Children under 1 are vulnerable and fragile. Sometimes, parents also need reassurance rather than medical advice - you panic as a parent.”</i>
<ul style="list-style-type: none">• <i>“Prioritising these groups means you don't have to waste time answering too many questions. Why can't the advisor access our medical records through our NHS number that would make it even easier?”</i>
<ul style="list-style-type: none">• <i>“If you need advice you shouldn't have to answer so many questions you are nervous and need right advice quickly, so it's good to prioritise under 1s.”</i>
<ul style="list-style-type: none">• <i>“They are vulnerable people and they deserve and need urgent care, so should be attended to first.”</i>
<ul style="list-style-type: none">• <i>“Because need help immediately.”</i>
<ul style="list-style-type: none">• <i>“As it would mean saving more lives quicker”</i>
<ul style="list-style-type: none">• <i>“As they are typically more vulnerable this would make sense and also help reassure their carers' that they are being taken care of.”</i>
<ul style="list-style-type: none">• <i>“This should be extended to all carers of a person with a disability or ill health”</i>
<ul style="list-style-type: none">• <i>“Under 1s are so young they are more vulnerable. Children can't express themselves as well as adults, they have a weaker immune system .”</i>
<ul style="list-style-type: none">• <i>“Absolutely! These are people with chronic conditions already with an existing care plan. They tend to have all sorts of complications and these complications could trigger other problems. They really don't need to be put through further stress and panic. They need to be able to be put in direct contact with a professional, experienced health professional. It could be a matter of life or death.”</i>
<ul style="list-style-type: none">• <i>“If my child is not well I would want to speak to someone quickly for help.”</i>
<ul style="list-style-type: none">• <i>“Because I will get advice quicker and won't have to wait in a queue.”</i>
<ul style="list-style-type: none">• <i>“You will probably get more calls from first time parents as they will have more questions.”</i>
<ul style="list-style-type: none">• <i>“Because when a child is sick you need advice straightaway, can't always go to the hospital. It's important if you are a new parent so you don't panic.”</i>
<ul style="list-style-type: none">• <i>“It is more convenient and more efficient. Yes it would be useful for parents and family.”</i>

• <i>“It would make access quicker for the most vulnerable.”</i>
• <i>“Advice from a health professional is often needed at the time in such cases. Such age groups often require urgent care and treatment.”</i>
• <i>“Elderly people are more vulnerable and need more assistance.”</i>
• <i>“Access is an integral part of health and extremely important that one has access at the point of need. This would reduce stress and anxiety”</i>
• <i>“It’s often difficult to make an urgent appoint with a doctor, it would be useful to have a telephone conversation and an on-going referral if required.”</i>
• <i>“When people call, especially parents, they are really worried. You feel that the person on the other end don't care, that they are just reading something. They need to have a personal touch. Sometimes when you're worried that's all you need.”</i>
• <i>“Their care is usually more urgent, or more distressing to deal with.”</i>
• <i>“Because an unexpected circumstance can happen that needs a quick management while reaching the usual health care provider may not always be easy.”</i>
• <i>“I think it's a good idea that you can get 24 hours support, it's reassuring to know this help is there any time if my child needs it.”</i>
• <i>“To give professional advice, it's reassuring to speak to a professional rather than a call handler.”</i>
• <i>“These are vulnerable members of the community, who can become ill very quickly. There should be no delay in advising them or their Carers.”</i>
• <i>“It provides reassurance in what can be a stressful situation”</i>
• <i>“I am aged 76, I prefer to get help quickly from NHS 111.”</i>
• <i>“It's often very difficult to secure an appointment with a health professional, and often not needed. Young children, the elderly and those with existing medical conditions are most at risk and should receive support (even if just advice) as a priority.”</i>
• <i>“If you had one number to call you wouldn't have to wait in a queue which would be helpful for parents especially in an emergency.”</i>
• <i>“Very good idea - more vulnerable groups.”</i>
• <i>With kids, ideally move it up to 2 yrs. 75 is a bit high. There is a risk of CVD in 50s and 60s. Would be better to put to the district health service.”</i>

In addition, people also told us that it’s important for both groups to get clinical advice via the new service:

- *“I have not personally used 111, but have heard second hand from people who have found it confusing or a disappointment. The level of medical expertise has been questioned. There may be a need for better promotion of the service (I feel it has not really got across even now), but above all triage as a discipline clearly has demands that require their own specialist expertise. Until this has been achieved to the point that the general public has confidence in it, parents/carers in a state of anxiety will wish to be streamed through to a health professional as simply and quickly as possible.”*
- *“If a baby is ill a parent needs someone to see the child and act quickly. Over the phone help is not enough. A baby's health could deteriorate quickly and the child needs to be seen for an assessment. This could be useful for those over 75 if they have an existing care plan.”*
- *“No good speaking to non-medical person.”*

Early exit for other groups?

We asked if there are any other groups who might need to be streamed directly to a clinician. Of the 78 responses we received, the key themes include:

- Those with complex health problems - identified by healthcare professionals and those having palliative care.
- 0-25 children and young adults with disabilities (SEND).
- Under 5s, children with medical conditions.
- Long term illnesses. More vulnerable to other infections. Especially people undergoing chemotherapy.
- Pregnant women and postnatal aftercare for women.
- People with mental illness and people who are known to have problems with substance abuse.
- Children with EHC plan, people with complex health needs.
- People with other conditions who are not in the age range.
- People over 65, diabetes and people with high blood pressure. Disabled people and their Carers.
- People with chronic medical conditions that worsen and become critical 'out of hours'.
- Early stage Dementia.
- Homeless people and refugees.

People also told us **we need to promote 111 in more creative and engaging ways**, some of the ideas to improve promotion of 111 include:

Leaflets in community centres and children's centres.
Send letter to people in the three groups to be streamed.
Extensive communications - messages in local newspapers, a simple video shared via social media.
Leaflet through the door, particularly to people who live in sheltered accommodation.
It's down to the GP - they should be the main communications place.
Family and friends - word of mouth.
Social media, community, churches, mosques and temples.
Leaflets in schools magazines and small ads in school leaflets.
Perhaps have an automated message that is very quick in explaining what 111 is before being put through to 999 or out-of-hours GP.
Education. People need to be educated about this service. As an ESOL Lecturer many of my students are unaware of this service. This group of people are vulnerable many of whom have children. Often they are unable to help themselves because of their language barrier and that gets worse when they are unable to help their children.
Better publicity, better trained call handlers.
To use PPGS and local patient groups, with third sector support groups to go to libraries and local events to publicise this, sometimes the public will listen more and believe it from non NHS Staff.
Offer an accessible alternative i.e. live chat (and Skype for BSL users) as legally required under the Equality Act 2010 so that all of us who can't use the phone can still access it.
Hold an event and explain why they should call NHS 111.
Witty, moving, and punchy marketing - nationally, it's not a local issue. Use social media. Keep institutional house-style NHS promotion to a cool, informative minimum (not that current publicity has been bad, but it's crippling institutional in appearance - probably issues of budgets - try art colleges, performers, comedians, get them to volunteer promotion that goes out of the institution to engage). You're basically in competition with 999. Help us take responsibility by stimulating our enthusiasm for the service, help us feel good about not clogging up the 999 lines.
Educate and train local people to use the service
Talks at Children's Centres (their websites too).

Feedback from community outreach

St Mark's Deaf Club

There were approximately 44 people in the room. 16 put their hands up in response to the question: would you find a service like this useful? Two people said they had heard of 111. One person had used it. He used it to get dental advice, and used the webcam service. He found the webcam worked smoothly and he got the help he needed. He didn't know that 111 existed until he did the research, but it worked really well.

General

- Very good offer – when you go to A&E it takes time for them to get interpreter but with 111 you could get BSL and access to advice straight away.
- Need to advertise this service to Deaf people - there is nowhere on the NHS website to say this is there. Need to clearly explain what 111 is, how it is different to 999, and how we can use it using a simple visual explanation which links to the website.
- It would be useful if there were simple bullets on the website on when to call 111 or 999.

Accessing via Webcam

- There are regional variations in BSL; if the interpreter is from a different region they may use slightly different signs. The man who had used 111 said he didn't find this an issue, just had to take the time to clarify. However, another participant said they were worried about communication breakdown.
- Would prefer BSL interpreter to be available 24 hours as this is the best, but understand that this is difficult and expensive to put in place. Sign language being available 8 to 12 is fantastic.
- Navigating website needs to be simple with as few clicks as possible. If you bring up website this should bring up interpreter. Should include a BSL video explaining how to link up.

Accessing via Text Phone / Type Talk

- Text messaging/Text Type – English is a second language for many Deaf people so this could cause additional worry and stress and miscommunication.

Additional comments

- If 111 webcam doesn't work because of weak signal or other reasons what should we do? How would we complain?
- Is text type available 24 hours?
- Can you access the NHS 111 text service through the NCT lite app? (Next Generation Text)

Older People's Reference Group

- Would prefer to ring the emergency number provided by their GP, so that they know they will speak to someone local who can visit in person if necessary. Attendees were asked if the 111 service was designed so that, if you were put through to a GP, it would still be your local doctor, would that make a difference. Attendees note that the issue would be how long it took between dialing 111 and getting to speak to a GP.
- Attendees asked if you would speak to your own GP or to any GP.
- Attendees had heard negative feedback of 111 through the media e.g. people trying for a long time to get through, people receiving the wrong diagnosis, perception that it is a waste of time.
- In response to the proposal to fast track people over the age of 75 the group raised the issue that people can be under the age of 75 and still have multiple or complex health needs. They noted that over the age of 75 some people are lucky, but some have issues that are not diagnosed. They thought that fast tracking should be for all over-75 as that is the age where things go wrong and it can happen even to healthy over 75s. (e.g. falls)
- Attendees said that 111 would be good if you want advice, and would be better than turning up A&E.

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- Will patients be able to speak to a clinical adviser as some patients might underestimate the seriousness of their condition?
- The call should be seamless, we don't want to repeat questions between the operator and the clinical adviser/HCP – avoid 'different call handler'.
- Are they trained advisers? We need assurance that they have the right level of clinical knowledge.
- Is NHS 111 a substitute for GPs?
- Ensure your message is clear regarding SPA – as patients may get confused between calling 111 and the SPA for community health services. We need a clear pathway.

Key recommendations

- 1) **To raise awareness of 111 in Newham the NHS should deliver a local communications campaign underpinned by strong community engagement to ensure the message reaches all sections of our community.**
- 2) **Parents of children under 1 and older people were all generally in agreement that both groups should be prioritised.**
- 3) **Majority of respondents agreed that calling 111 would be a lot easier than calling the out of hours number.**
- 4) **This engagement exercise demonstrated a strong interest in 111 but residents want assurance that the right advice will be given and that 111 should be seamless and easy.**

Appendix 1: breakdown by ethnicity

White	Response Count
British	29
Irish	1
Polish	1
Lithuanian	1
Romanian	2
Other Eastern European or other white background (please specify)	4

Mixed	Response Count
White and Black Caribbean	1
White and Black African	1
White and Asian	2
Any other mixed background (specify)	2

Asian	Response Count
British	11
Indian	11
Pakistani	6
Bangladeshi	11
Sri Lankan Tamil	2
Any other Asian background (specify)	1

Black	Response Count
British	2
African	2
Caribbean	6
Nigerian	4
Somali	1
Ghanaian	0
Any other Black background (specify)	0

Chinese	Response Count
British	0
Chinese	1
Other (please specify)	1