# NHS 24 BOARD MEETING

# 10 DECEMBER 2020 ITEM 8.2 FOR ASSURANCE

# **SERVICE QUALITY REPORT**

Executive Sponsor:	Interim Director of Service Development
Lead Officer/Author:	Performance Team
Action Required	The report is presented to the Board to give assurance on the quality and performance of services provided for period ended 31 October 2020.
	The Board are also asked to note the update on page 2, following discussion at Planning & Performance Committee on 24 November 2020.
Key Points	<ul> <li>A "Performance at a glance" scorecard is provided as a summary overview against the performance framework key set of indicators, with each indicator reported as Red, Amber, Green status.</li> <li>Care Delivered at First Point of Contact. In October 91.7% of patients were triaged at first contact, the highest ever percentage recorded for this measure.</li> <li>All measures relating to access for Unscheduled Care are Red – Service Level, Average Time to Answer and Abandonment after threshold</li> <li>Performance for clinical KPIs are Green.</li> <li>Breathing Space access is Red, however improved by 7.5 percentage points on previous month.</li> </ul>
Financial Implications	All financial and workforce implications arising from current and projected performance levels are reflected in the routine functional reports.
Timing	This is a monthly report covering October 2020.
Contribution to NHS 24 strategy	Key performance measures are developed to support delivery of NHS 24 strategy and the AOP key performance indicators. Effective monitoring of performance ensures robust governance and decision-making in line with corporate objectives.
Contribution to the 2020	Effective performance across NHS 24 supports
Vision and National	delivery across the wider health and social care
Health and Social Care	system.
Delivery Plan (Dec 2016) Equality and Diversity	All equality and diversity issues arising from
Equality and Diversity	maintaining and continuously improving performance management are integrated with service planning.

Performance at a Glance – October 2020 and Year to Date (YTD): key targets:

Measure	Key Performance Indicator - Target		RAG Thresholds*	Oct-20	Oct-19	YTD Cumulative Performance (Apr'20 - Oct'20)
111 Service						
Patient experience - satisfaction, helpfulness, usefulness	90% of service users surveyed record overall satisfaction with the service	90%	Amber 80-90% Red <80%	100.0%	92.2%	92.8%
Level of complaints (could be applied to all services)	90% of complaints are responded to within 20 working days	90%	Amber 80-90% Red <80%	100.0%	100.0%	100.0%
Care delivered at first point of contact	75% of calls will result in direct access to the service at first point of contact	75%	Amber 65-75% Red <65%	91.7%	73.1%	88.0%
Access Service Level (threshold appropriate)	The proposal is to deliver 50% of calls answered within 30 seconds	50%	Amber 45-50% Red <45%	38.7%	44.1%	45.4%
Average Time to Answer (threshold appropriate to service)	Target is to answer calls within an average of 1 minute 30 seconds	1m 30s	Amber 1m30-2 m Red > 2 min	9m 23s	2m 55s	7m 34s
Calls abandoned after threshold (threshold appropriate to service)	Expressed as percentage of calls abandoned after threshold. Maintain the current measure of <5% after 30 seconds for the '111' service.	5%	Amber 5-8% Red >8%	13.0%	8.4%	11.0%
Queued Calls - P1 calls responded to within 60 minutes	98% of P1 calls responded to in 60 minutes	98%	Amber 95-98% Red <95%	98.8%	98.8%	99.8%
Queued Calls - P2 calls responded to within 120 minutes	90% of P2 calls responded to in 120 minutes	90%	Amber 85-90% Red <85%	100.0%	99.7%	99.9%
Queued Calls - P3 calls responded to within 180 minutes	80% of P3 calls responded to in 180 minutes	80%	Amber 75-80% Red <75%	86.9%	91.1%	91.9%
Workforce						
Staff attendance rates	Achieve and maintain an average attendance rate of 96%	96%	Amber 90-95% Red < 90%	93.2%	90.8%	93.4%
Digital/Public Health						
Provision of self-care advice	Provide at least 30% of patients with self care advice	30%	25% [] 30%	30.2%	31.0%	31.6%
Mental Health Services						
Breathing Space	80% of Breathing Space Calls to be answered in 30 seconds	80%	Amber 70-80% Red <70%	47.4%	62.9%	44.2%
Mental Health Hub Volume	Volume of Mental Health Hub Calls Answered	N/A		8,060	2,015	39,928

<sup>\*</sup>Calculation of RAG thresholds: Green rating is where performance has reached specified target. Each target has an individual Red/Amber threshold, dependent on volume of activity in each indicator.

### NHS 24 GREEN

## **Continuous Improvement of the Service Quality Report**

The Service Quality report has evolved constantly over the years to its current format with a mix of dashboard, graphs, infographics and text.

It was agreed at our Ministerial Mid-Year Review meeting in November 2019 that our current set of performance indicators do not always meaningfully measure either the effectiveness or appropriateness of the NHS 24 response or indeed the experience of those who interact with our service. Nor do they offer any insight into how effectively NHS 24 supports whole system integration and patient pathways. Further discussions were planned in early 2020 to discuss a more appropriate set of indicators, however, this was paused due to COVID-19 and is now proposed to take place early in 2021.

The targets within our Performance Framework have remained relatively consistent over the past ten or so years. The COVID-19 pandemic and Redesign of Urgent Care have significantly changed the way NHS 24 111 service operates. In addition, new pathways have been implemented, including digital, to manage COVID-19 demand, to scale up the Mental Health Hub to 24/7 operation and to manage the new national urgent care pathway. As our Change Portfolio is being delivered, other services have grown. Review of the Performance Framework with our Sponsor Team has also been identified as a key objective for EMT by the end of March 2021.

In addition, as part of a national focus on active governance, we are reflecting how we best present our data to Committees and the Board, to enable Board members to effectively scrutinise our performance.

Following discussion by EMT on 18 November and Planning & Performance Committee on 24 November 2020, we are proposing to make a number of interim changes to enhance the current report. These will be further considered by EMT in December. It is also proposed to discuss clinical changes in more detail with the Clinical Governance Committee.

If approved, the interim changes will then be incorporated from January 2021.

For clarity, we will continue to produce the overall Performance Dashboard, as set out in the Performance at a Glance section above. We are however suggesting that there would be value in looking at the detailed narrative provided in the report to determine if it is still of value for reporting purposes, to EMT, Committees and the Board.

# 1. 111 Service Performance - Patient Pathway Performance

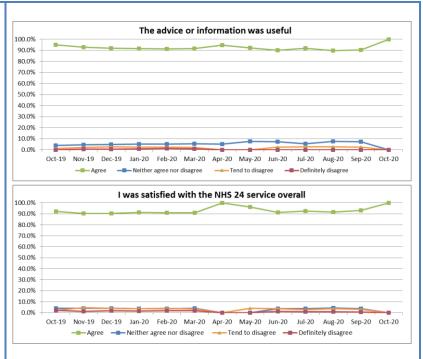
## 1.1 Patient Experience

Key to determining effectiveness is understanding how callers assess their own experience of contacting the 111 service. In line with NHS Healthcare Improvement Scotland's Person Centred Care Programme and as part of the activities of the NHS 24 Patient Experience framework, we carry out a weekly patient experience survey.

Patients and callers to the NHS 24 service are asked to participate on an entirely voluntary and anonymous basis.

The current reporting period is from Oct'20— March'20. In September 100% of patients confirmed the advice or information provided was useful, and 100% reported that they were satisfied with the service overall.

Please note that as this is a new reporting period there were just 10 responses which is a 2% response rate.



## 1.2 Complaints

## Performance target: 90% of complaints responded to within 20 working days

Number of Stage 2 complaints received in October	2
% responded to within 20 working days	100%

## **Quarterly Performance**

The complaints procedure sets out nine Key Performance Indicators (KPI), and these are monitored and reviewed by the Clinical Governance Committee, on a quarterly basis. A summary of the key indicators, relating to Q2 2020/21, is set out below:

### **Total Number of Complaints received in Q2**

Call demand for Q2	d for Q2 Complaint Type		% of complaints vs. call demand
404,895	Stage 1	72	0.017%
404,095	Stage 2	4	0.0009%

**Complaints Upheld, Part Upheld, Not Upheld -** 36% of Stage 1 complaints were upheld, with 25% of Stage 2 complaints upheld.

Average time to respond to complaints in working days

Stage 1	3
Stage 2	12

Complaints closed in full within the timescales

Complaint Type	Number received	Closed within timescale	%
Stage 1 Complaint	72	61	85%
Stage 2 Complaint	4	4	100%

Learning from Complaints - 48 items of individual learning were identified in Q2 2020/21.

**Complaint Process Experience -** The Patient Experience team continues to seek feedback from complainants on their experience of how their complaint was managed. Of 35 forms issued, a total of 13 forms have been returned for Q2 (37%) with an overall satisfaction rate of 85%.

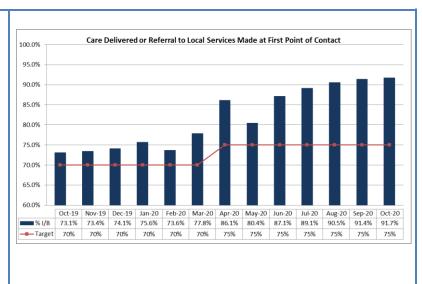
### 1.3 Care Delivered at First Point of Contact

The majority of 111 calls are managed on an inbound basis. An inbound call is where the patient is triaged, and where appropriate care is delivered, or an appropriate referral to local health care services is made, at the first point of contact with our service.

This pathway delivers a more positive patient experience and in September 91.7% (90,856 records) were delivered in this way.

Through the implementation of the Shift Review, Better Working, Better Care and COVID-19 Model we are continuing to consistently deliver against the 75% target, and 91.7% achieved is the highest ever percentage for this measure.

Performance improved by 0.3 percentage points on previous month and as a result patients requiring a call back are noticeably down. Overall there was an 82% drop in call back requests when compared to October 2019, falling from 24,624 to 4,381.



### 2. Call demand and access

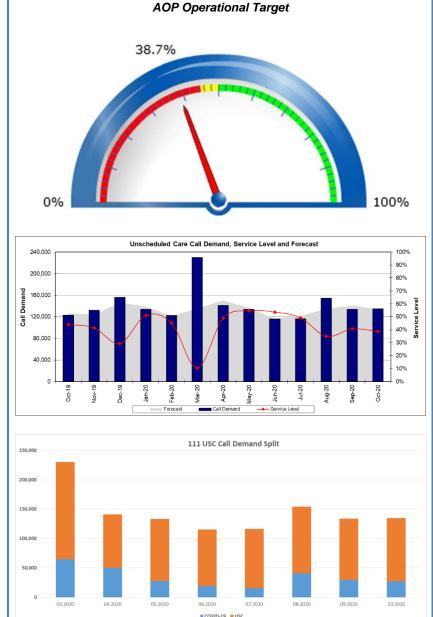
### 2.1 Service access within 30 seconds

Call demand in October for 111 service was 134,887 which was a 5.4% decrease on October 2019 and down 2.0% on previous month.

With the working agreement of the Scottish Government the KPI target for Service Level has been changed to 50%.

In October access level performance was below the revised target at 38.7%. There continues to be a clear difference between weekday access which meets target (51%) and weekend access which does not (24.7%). Demand across weekdays is 53% of overall demand.

It is important to note that performance against clinical KPIs continues to consistently exceed target throughout the month.



The COVID-19 pathway went live on 23 March. Demand for the COVID-19 line through 111 in October was 27,148, which represented 25% of overall demand for 111. The % split dropped for the second month in a row and is now at the lowest level since August. Since March,

Section 5 provides further information on COVID-19 performance.

## 2.2 Average Time to Answer Calls

Where demand is within forecast and staffing levels are sufficient to manage the call arrival pattern, calls are answered within 30 seconds. NHS 24 monitors the service level at varying thresholds, 30, 60 and 90 seconds. Performance in October was:

evel at 30secs	Service Level at 60secs	Service Level at 90secs
8.7%	41.0%	42.6%

The average time to answer calls in October was 9 minutes 23 seconds, which is a 1 minute 6 second increase on the previous month.

## **Actions to improve performance**

Staffing levels between 111 Unscheduled Care and 111 COVID-19 pathways are continuously rebalanced to respond to their respective demand. Staff have been recruited for the 111 Mental Health Hub which has increased its opening hours to 24 hours a day from mid-July.

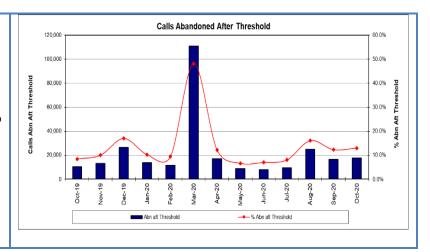
### 2.3 Levels of Calls Abandoned

The percentage of calls abandoned after threshold decreased from 12.3% in September to 13.0% in October, underperforming the 5% target.

There is a direct correlation between the performance of the access level target and the level of calls abandoned.

## Actions to improve performance

Additional staff have been recruited to open the Mental Health Hub 24 hours a day from mid-July.



### 2.4 111 Outbound Call-back Performance

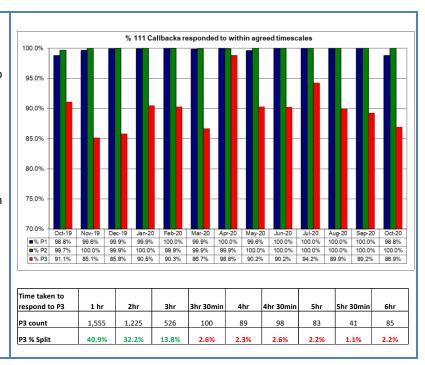
Outbound calls occur where the calls cannot be triaged as they arrive due to a combination of the call volumes at the time and the level of staffing available to respond to them. In these cases, calls will be placed in clinical queues with an assessment of their level of clinical need being either P1, P2 or P3. The clinical queue is monitored for safety by senior clinicians.

98.8% of P1 calls were responded to within 60 minutes against a target of 98%.

100.0% of P2 calls were responded to within 120 minutes against a target of 90%.

86.9% of P3 calls were responded to within 180 minutes against a target of 80%

In total 4,381 patients were triaged using the call back process, of which 3,881 (88.6%) were called back within their allocated timescale. It should be noted that the number of patients that required a clinical call back has fallen to its lowest ever level.



#### 2.5 Self Care

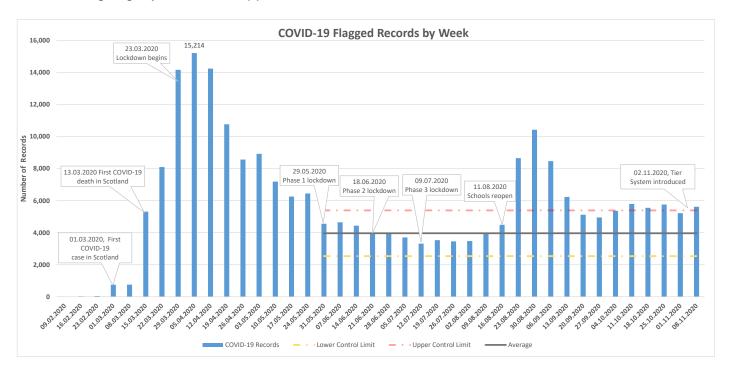
NHS 24 closely monitor all endpoints resulting in triaged calls and Self-Care is a key AOP target. Self-Care covers a wide range of endpoints, which not only includes Self-Care, but actions which do not involve partner action i.e. Contact Optician/Midwife/Police/Dentist.

Self-care is above the 30% target for September (30.2%), this is 0.9 percentage points lower than October 2019 and 0.8 percentage points down on previous month.

# 3. COVID-19 Pandemic Update

NHS 24 in partnership with partner boards created a new COVID-19 pathway where patients would initially be triaged by NHS 24 and then passed on to newly set up COVID-19 hubs within the Health Boards.

The graph below provides the weekly COVID-19 records created, with data call outs which point to significant events potentially linked to a change in numbers. After a peak in August when schools reopened demand has become more stable and throughout October demand was tracking slightly above the upper control limit.



The weekday/weekend split below provides an overview in to what percentage of 111 records are for COVID-19 patients. At the peak of the pandemic (week ending 29 March) 56% of records were COVID-19 flagged records. At its lowest level 15% records were COVID-19 flagged (week ending 26 July) and throughout October COVID-19 records ranged between 25-26%.

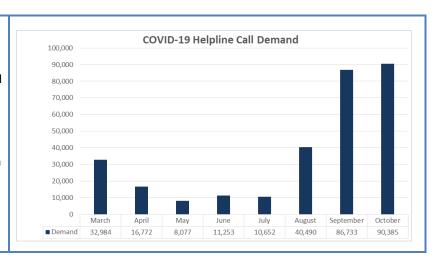
	Weekday Split			Weekend Split						
				COVID-19	111 %				COVID-19	111 %
Week Ending	COVID-19	111	Total	% Split	Split	COVID-19	111	Total	% Split	Split
04/10/2020	3,520	9,148	12,668	28%	72%	1,846	9,494	11,340	16%	84%
11/10/2020	4,005	8,249	12,254	33%	67%	1,789	9,156	10,945	16%	84%
18/10/2020	3,741	7,737	11,478	33%	67%	1,815	9,045	10,860	17%	83%
25/10/2020	3,920	7,730	11,650	34%	66%	1,842	8,773	10,615	17%	83%
01/11/2020	3,546	7,359	10,905	33%	67%	1,675	8,862	10,537	16%	84%
08/11/2020	3,723	7,345	11,068	34%	66%	1,895	8,641	10,536	18%	82%

# 4. NHS inform (including Special Helplines)

NHS inform was suspended as part of the NHS 24 COVID-19 response and replaced by the Coronavirus Special Helpline. This Helpline was outsourced to a third party provider who started taking the calls from the 22 March. The NHS inform staff were redeployed to the COVID-19 Model.

In addition to the calls received to the 111 service, NHS 24 also operates a helpline relating to Coronavirus, demand for this line was 90,385 calls in September This is the highest month for the helpline and is up 4% on September.

The helpline volume is still largely driven by Flu Vaccination queue. 55% of calls were to Flu Helpline, 23% required Test Booking Assistance and the remainder of calls (22%) were for General Enquiries.



### 4. Mental Health Services

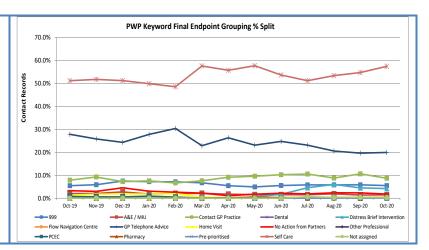
### 4.1 Mental Health Hub

The Mental Health Hub service delivers more effective support to people contacting the service where mental health is a factor. The Mental Health Hub is accessed via 111, where these calls are referred to Psychological Wellbeing Practitioners (PWP) who are supported by Mental Health clinicians seven days a week. The service has been operational since 15 March 2019. On 31 March the service moved from Thursday – Sunday nights to 7 nights a week and the hub became a 24 hour service on 16 July.

In October demand was 9,385 an increase (4.2%) on September making it the busiest ever month for the Hub. The service became a 24 hour service from 16<sup>th</sup> July onwards.

Please note there have been a new set of endpoint groupings that have been introduced. Self-Care is the highest % grouping with 57% followed by GP Telephone Advice at 20%.

Demand for the Health and Social Care helpline was 93 calls in October.



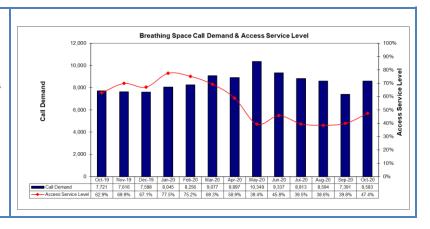
The Mental Health Hub is one element of NHS 24's redesign of its mental health service offering and a key component of the Mental Health strategic programme in place.

The wider programme includes 111, Breathing Space, Living Life, and online and digital resources such as CBT and NHS inform. The programme also includes development of an enhanced pathway for people in mental health distress with Police Scotland and the Scottish Ambulance Service, which will be routed directly to the Mental Health Hub. In addition, as part of the 2020 Spending Review and the finalisation of the 2020/21 AOP, we have received additional funding to enable us to further expand this important new service.

## 4.2 Breathing Space

The Breathing Space service level for October was 47.4% of calls answered in 30 seconds, against a target of 80%, which was a 7.5 percentage point increase on previous month and the highest access since April 2020.

Breathing Space has been significantly impacted by the challenges of COVID-19 and call volumes have unsurprisingly increased from the commencement of lockdown and have continued to be higher than average. Once again the last 6 months have recorded a high number of calls to the service with a call demand of 53,667 calls. Almost all of the new recruits (n.18) have joined the service and most have now completed their induction. Next month will witness the impact of this additional staffing resource. A small number of staff were off sick in October due to Covid related reasons.



### 4.3 Living Life

The Living Life service offers support to people in Scotland through guided self-help and cognitive behavioural therapy. The service is self-referral based, however the majority of calls originate from a GP recommendation. From there all referrals go through a screening process to remove any patients where their condition is not supported. The remaining patients go for Initial Assessment, and if they are accepted at that stage go on to treatment. Due to the ongoing pandemic Mental Health services are in high demand, however many who call the service are not appropriate for this particular service. Work is underway to address this problem and with the aim to deliver a better patient journey.

The Living Life service managed had a demand of 606 for patients self-referring for CBT, which is a 7% decrease on previous month, and 62% higher than October 2019.

# 5. Musculoskeletal (MSK) Service

The MSK service has been suspended as part of the NHS 24 response to the COVID-19 Pandemic, with staff playing a critical role in the 111 service to support our response to COVID-19. Recent evaluation and engagement with local partners has identified a number of opportunities for our MSK service to further support work in territorial Boards. We will continue to review this, whilst balancing the need for associated staff to continue to support our response to COVID-19.

## 6. Digital and Social Media

NHS 24 manages a suite of websites, from the NHS 24 corporate site, through to a range of service specific sites such as NHS inform, Breathing Space and Care Information Scotland.

## 8.1 Website activity

There were approximately 7.2m hits to the NHS 24 websites in September, with NHS inform accounting for 6.7m sessions.

A recent survey from HotJar highlighted that over 50% of traffic was from users in Scotland (from over 10k responses)

Most popular pages on NHS inform in October continue to be COVID-19 and Flu related, with top most viewed pages being Access to Testing followed by Flu Vaccination.



### 8.2 Web chat

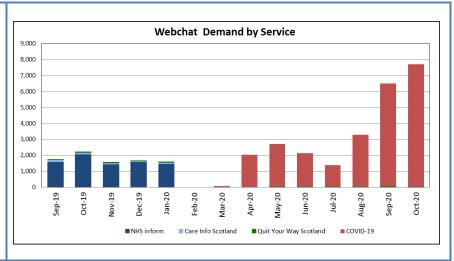
This channel is an alternative to the telephone to access services. The chart below indicates web chat activity by service, with the majority of contacts coming through the NHS inform service. There is some anecdotal evidence of channel shift from telephone to web chat, through a reduction in telephone contacts to the NHS inform service, at the same time an increase in volume to the web chat channel. This is particularly noticeable on Saturdays and Sundays.

Webchat was suspended in February as part of the NHS 24 COVID-19 response. On the 31 March a new COVID-19 Webchat channel opened. In October the channel received a record 7,646 chats, which was a 19% increase on September. NHS inform is the only service which continues to be suspended after Care Information Scotland began taking webchats in September.

Please note that, in response to COVID-19, all NHS Inform, CIS and QYWS Webchat services were suspended on 1 February, however now only NHS inform is not currently operational.

The COVID-19 Webchat service opened on the 31 March.

Quit Your Way Scotland and Care Information Scotland contribute a low volume overall (42 from 7,688 overall)



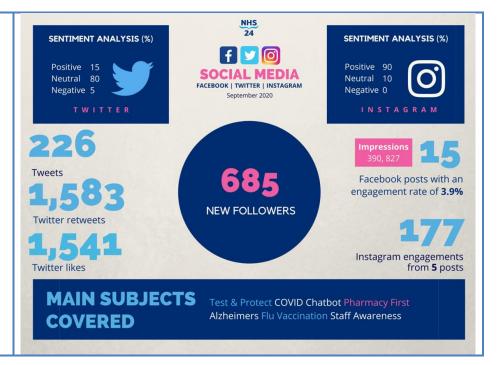
## 8.3 Social Media Activity

Our social media channels are used for promoting NHS 24 service updates, new developments and for engaging with the public and professional audiences using multi-media and digital content. In order to make the Social Media stats more meaningful two new measures have been used in the report: Facebook impressions and Engagement rate.

Please note Social Media stats are for the month of September.

A bulk of our social media content in September was to support test and protect and the flu vaccination. We now have a total following of 73,841 people across all platforms.

Instagram continues to be the biggest gainer at an increase of 2.5%. There was no paid media during this time.



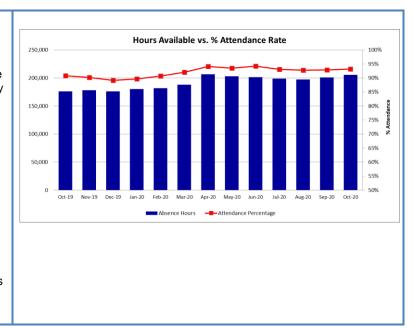
## 7. Workforce

### 7.1 Attendance

Monthly attendance increased by 0.3 percentage points from the previous month to 93.2%. The Attendance Management Steering Group are progressing the improvement plan. An update on this work is contained within the Change Portfolio Update paper. Existing

The attendance management steering group are currently progressing the attendance management improvement plan. The main focus at this time is the training for managers on the new policy and at this time 140 (49%) managers have now completed either the eLearning module or attended an online session.

A further 24 (8%) managers (who haven't completed the eLearning) are booked on to a future web session. User Research work is planned during October which will engage with staff about their experience of Attendance Management. This information will be used to improve how NHS 24 manages attendance going forward.



### **Actions to improve performance**

The decision to fully implement the new supervision model, team working and shift review need to be balanced with our overall performance delivery commitment, however, NHS 24 remains fully committed to implementation of these changes. They will deliver significant benefits to patients, partners and staff by streamlining the 111 journey, optimising our clinical resource and delivering improved performance and experience in line with caller's expectations of the 111 service.

In addition to the work progressing under the direction of the Attendance Management Steering Group, we are also undertaken a summary analysis of our comparative position in relation to other Boards to understand the wider context of our challenge.

# 8. Information Technology

## 8.1 Applications, Network and Infrastructure Management

During October there were three Major Incidents, all of which were outwith NHS 24's control.

INC000038179481 – P1 – SWAN VPN Outage Logged: 10/10/2020 11:34 A planned but unadvertised SWAN outage impacted VPN, in turn impacting Real-Time Display monitoring by SDA home-workers. Service restored at 12:00 once SWAN Outage complete.

INC000038181917 - P1 - CDT Voice Quality Logged: 14/10/2020 15:02 Difficulty hearing patients/callers impacting on patient safety. Affecting all of Cardonald and some Clydebank users. Issue selfresolved, however BT N3 confirmed that a contingency system (BFD) was 'flapping' and caused some voice degradation. Service restored at 15:01, around the time NHS 24 ticket was initially raised. Staff logged back in by 16:09 once thorough investigations complete.

INC000038181365 - P1 -Outlook Issues for VPN Users Logged 14/10/2020 09:08 NHS 24 Home workers experiencing repeated username / password prompts when using Outlook. Also affecting some other applications, including Sharepoint. This was confirmed as being related to a firewall upgrade that had taken place that morning. Firewall issues were rectified which resolved the Outlook issues. Service restored from 10:00 by rebooting laptop devices. Ticket closed 13:52.

Applications and Infrastructure were 100% available.

Availability	Aug-20	Sep-20	Oct-20
Inbound/outbound telephony	100%	100%	100%
Voice recording solution	100%	100%	100%
Technical solution supporting Patient Contact Management	100%	100%	100%
Technical solution supporting KMS	100%	100%	100%