

16 December 2010

Gateway Reference: 15310

*Quarry House
Quarry Hill
Leeds
LS2 7UE*

Dear Colleague,

EXPANDING THE NHS 111 SERVICE

Following the publication of the White Paper *'Equity and excellence: Liberating the NHS'* I am writing to SHAs to invite new expressions of interest in piloting NHS 111 as a single point of access for integrated urgent care services.

The NHS 111 service will make it easier for the public to access urgent healthcare and drive improvements in the way the NHS delivers that care. The easy to remember, free to call 111 number will assess callers during their first contact and direct them to the right place, first time.

NHS 111 is already live and being piloted in four areas - County Durham and Darlington, Nottingham City, Lincolnshire and Luton – using both the Ambulance Service and NHS Direct to handle 111 calls and refer callers to other service providers where necessary.

The four pilots have been developed according to a specification designed by the NHS for the NHS 111 service and are being independently evaluated by Sheffield University over the course of a year of live operation. The final evaluation findings will be available in Spring 2012.

Identifying additional pilots

In response to growing interest within the NHS, the Secretary of State has asked that we rapidly expand the number and range of pilots, and that entry to the programme be as permissive as possible. The minimum requirements for a pilot will be:

- Ability to dispatch an ambulance without delay;
- Completion of a clinical assessment on the first call without the need for a call back;
- Ability to refer calls to other providers without the caller being re-triaged; and
- Ability to transfer clinical assessment data to other providers and book appointments where appropriate.

In addition to these establishment criteria, each pilot will need to provide:

- assurance on the clinical safety and governance of individual models;
- assurance on information requirements including data protection, data sharing and interoperability with other services; and
- basic performance, cost, outcomes, process and experience data.

So long as these criteria can be met, each pilot will be free to decide which operating model, clinical content, and software they use to deliver 111.

We also want to allow new sites to join the programme as and when they are ready, rather than going in waves. This flexible approach should ensure steady growth leading up to universal coverage by April 2013 and allow some new schemes to join the programme with immediate effect.

The DH will of course provide ongoing support and advice to new pilots to both help establish and then run their programmes.

Next steps

I would be grateful if you could work with local pathfinder consortia, PCTs, Ambulance Trusts and other stakeholders to identify new pilot sites that could launch during 2011/12. At this stage, the only information we need will be;

- The area to be covered by the pilot (name, population size etc);
- An estimated launch date;
- Which partner organisations are involved (e.g. Ambulance Trust, PCT, OOH provider, NHSD, GP consortia, new entrant);
- Whether the model is already operating as a Single Point of Access;
- If known, which operating system and Clinical Content is used (e.g. Pathways, CAS); and
- A contact name (and details) for a lead official in the pilot site.

I would be grateful if you could provide this information by Friday 28th January 2011. Please note there will be no limit on the numbers of new pilots emerging in each SHA, if they are ready to go we should encourage them to do so.

Following these initial expressions of interest, the department will host a one-day introductory event in February, where applicants will be able to learn more about the programme, establishment criteria and timetabling.

All returns should be sent to Dave Howarth (david.howarth@dh.gsi.gov.uk) by 28th January 2011. In the mean time if you would like further information or wish to discuss please do not hesitate to contact either myself or Dave.

Yours sincerely

Miles Ayling