

IC24's NHS 111 and GP Out of Hours service in Central and West Norfolk

Suggested approach by Maureen Orr, Democratic Support and Scrutiny Team Manager

A report from IC24 and Norwich CCG on progress with the NHS 111 and GP Out of Hours service in central and west Norfolk.

1. Background

- 1.1 Members were informed about the re-procurement of NHS 111 and the GP Out of Hours (OOH) service in central and west Norfolk plus Wisbech in the April 2015 edition of NHOSC Briefing. The contract was let by Norwich Clinical Commissioning Group (CCG) on behalf of four CCGs (Norwich, North Norfolk, South Norfolk and West Norfolk) and was won by IC24, which took over from the previous provider, the East of England Ambulance Service NHS Trust, on 1 September 2015.
- 1.2 IC24 also provides NHS 111 and GP OOH services in Great Yarmouth and Waveney (GY&W) under a contract let by Great Yarmouth and Waveney CCG. IC24 started to provide the GY&W GP OOH service in September 2011, and the GY&W NHS 111 service in June 2012.
- 1.3 On 14 April 2016 IC24 and Norwich CCG reported to NHOSC about the progress of the service following concerns raised during an unannounced CCG visit in November 2015. The report and minutes of the meeting can be found on the County Council website:-

<http://norfolkcc.cmis.uk.com/norfolkcc/Meetings/tabid/70/ctl/ViewMeetingPublic/mid/397/Meeting/514/Committee/22/Default.aspx>
- 1.4 On 10 May 2016, at the invitation of the Chief Executive of IC24, four members of NHOSC visited the NHS 111 care co-ordination centre at Reed House, Broadland Business Park, Norwich and saw the service in action. Notes of that visit were circulated to Members in the NHOSC Briefing, 21 July 2016.
- 1.5 The Care Quality Commission inspected the service in March 2016 and its report was published on 15 July 2016. The CQC told IC24 that it 'must'
 - Ensure all out-of-hours staff who triage patients have been adequately trained to make clinical decisions by telephone and have been assessed as competent to do so. In addition, protocols and guidelines

must be implemented to guide staff to make safe and appropriate decisions with regard to how people's needs are assessed and dealt with.

- Prioritise ongoing work to investigate and tackle the causes of delays relating to patient care.
- Ensure medicines held at primary care centres are within the manufacturers' recommended expiry dates and make sure there is an effective process for managing this.
- Put systems in place to ensure that staff files and recruitment procedures are effectively recorded.
- Undertake Disclosure and Barring Service checks for all staff in a timely and orderly manner.
- Ensure sufficient and appropriately trained staff are present at all primary care centres and that contingency arrangements for staff to follow are agreed for when gaps in GP cover arise.

The CQC also advised IC24 that it 'should' make the following improvements:-

- Learning relating to incidents should be shared with all relevant staff to encourage a culture of on-going improvement.
- Staff should always use the correct prescription pads when prescribing medicines.
- The provider should ensure all staff receive timely mandatory training and are supported in undertaking this.
- The provider should take action to ensure all staff are aware of who the safeguarding leads are within the service.
- All controlled drugs should be ordered from a wholesaler using the correct form, in line with Regulation 14 of the Misuse of Drugs Regulations 2001.
- Ensure a robust process is in place for monitoring clinical equipment, to make sure that it is fit for purpose.

The full report is available on the CQC website
<http://www.cqc.org.uk/location/1-2192943954#accordion-1>

2. Purpose of today's meeting

2.1 On 14 April 2016 NHOSC agreed to invite representatives from IC24 and Norwich CCG to return in a year's time to update the committee on the progress of the service. IC24 has been asked to provide the following information for today's meeting:-

- performance of the service in the past year in relation to its performance indicators
- the staffing situation (i.e. current number of vacancies for each type of staff in both the NHS 111 and GP OOH services)
- information on the volume of work compared to the commissioned capacity

- progress against the remedial actions plans set by NHS England and any remedial actions that were set by the CCGs.
- information on whistle-blowing in the service (i.e. have there been any instances since April 2016?)

IC24's report is attached at Appendix A (*to follow*) and representatives from IC24 and Norwich CCG will attend to answer Members' questions.

3. Suggested approach

3.1 After the representatives from IC24 presented their report Members may wish to discuss the following issues with them and the representatives from the CCG:-

- Has IC24 completed the improvement actions required by NHS England, the CCG and the CQC?
- In April 2016 it was IC24's intention that more call handling would be transferred from Ipswich to Norwich, meaning the more staff with local knowledge of Norfolk would be dealing with local calls. Has this happened?
- In April 2016 member of the Committee described a case where a west Norfolk patient with a Peterborough postcode who lived near the Queen Elizabeth Hospital was advised by IC24 to travel to Peterborough or Norwich (based on Care Co-ordination Centres making use of pre-set postcodes). IC24 was aware of the case and were investigating the cross-border issues that it raised. Has there been progress in this respect?
- The issue of rising indemnity costs for GPs undertaking out of hours work has been raised nationally as one of the factors that discourages GPs from working in the out of hours services. IC24 previously advised that it had trialled a range of initiatives to reduce the impact of indemnity costs on GPs elsewhere in the country and was considering introducing some of these initiatives in Norfolk. Has there been any progress in this respect?



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