

# 'Phone First'

## Service User and Carer Engagement Event

12 November 2020

### Outcome Report



## Background

### Overview of “Phone First” Service

Prior to Covid-19, there was clear evidence that our urgent and emergency care services were under increasing pressure. With the impact of the COVID pandemic and the focus on infection prevention and social distancing it is even more important that vulnerable patients who need emergency treatment aren’t asked to wait in crowded waiting.

‘Phone First’ is a new telephone number for patients who are unwell and planning to travel to an Emergency Department (ED) with an injury or illness which requires urgent treatment but is not immediately life threatening. The first place to start is Causeway Hospital ED. Other hospitals will follow in a phased way, including Antrim Hospital, and others across Northern Ireland. People with life threatening conditions will continue to ring an ambulance on 999 or make their own way to ED.

### Engagement event

An engagement event took place, using ZOOM technology, on 12 November 2020 with over 30 service users, carers and representative groups.

The session involved a presentation of information about the “Phone First” service being piloted at the Causeway Hospital Emergency Department. There was then an opportunity for participants to ask the Panel questions and provide suggestions. Further comments and feedback was gathered through a feedback survey via Citizen’s Space.

The key discussion points, questions, comments and feedback from this session are outlined in this report.

### Acknowledgement

We would like to extend our sincere appreciation to everyone who participated in the engagement event. Your valuable contributions, questions and insights will help to inform communications and planning for the ‘Phone First’ service.

## Questions and Answers

### Questions from Service Users and Carers

#### **How do you plan to make this service more attractive or beneficial to users?**

The introduction of this service will benefit everyone by

- Reducing the time people have to wait in ED
- Providing people a time to attend ED, enabling them to people wait safely at home
- Reducing the number of people waiting in ED at any one time
- Getting people the right advice quickly
- Directed people to the most appropriate service
- Getting people seen reasonably quickly when they arrive at ED

#### **What will happen to patients with a mental health condition who use ED when they are in crisis?**

Emergency Departments will continue to be available however a bright, loud and crowded ED is not the best place for patients with a mental health condition who are in crisis. Using the “Phone First” service will allow patients to get the right services straight away. This is not just for emergency care but for all parts of the system to help people to get to the right services without having to go to ED.

## Questions and Answers

### Questions from Service Users And Carers

#### **Will there be public information for patients and carers about “Phone First” and is in an accessible format?**

We have developed posters and leaflets to publicise the service and these will be shared widely. Leaflets are available in the main minority languages spoken in the area.

When patients contact the ‘Phone First’ number a telephone interpreting service is available for those whose first language is not English. A text relay number is available for people who are deaf or alternatively remote interpreting can be accessed by downloading the ‘Interpreter Now’ app from the App Store.

Northern HSC Trust welcomed ideas from participants on the accessibility of the leaflet and telephone line.

#### **Will those who have been assessed by phone first get priority access over somebody who has just turned up at ED?**

Every patient in ED will be assessed and services will be allocated based on clinical need. Emergencies come first and we have to have some way of triaging the work. Some patients may be able to wait at home safely until they are able to be seen at ED.

#### **Will a person who is told to wait and come to ED at a certain time not feel dismissed by this?**

When someone calls the number they will speak to a nurse or a trained paramedic. Hopefully people will not feel dismissed, rather they will be given a timescale when they can be seen at ED in a safe and timely manner. The Trust is using the “Phone First” service to ensure safe access for patients. This will hopefully avoid long waiting times and overcrowding and lack of social distancing.

## Questions and Answers

### Questions from Service Users And Carers

**Where will patients redirected from the Emergency Department be sent to, and will there be capacity in those services to see these patients?**

The Northern Trust “Phone First” Project Team is working in partnership with 12 GP Practices in the area to ensure the development of Care Pathways for patients to access appropriate services including:

- Same Day Surgery
- Medical Unit
- Frail Elderly
- Foetal Assessment
- Gynae
- Paediatrics
- Cardiology
- Ambulatory Care

“Phone First” is only one element of a larger project “No More Silos” (NMO). This first stage of NMS has focused on hospital settings, the next stage will focus on making the connections to services in Primary Care, General Practice and to Community Services.

## Feedback from Service User Event

“This seems to be one example of an initiative that will hopefully make a real difference”

“This is a great initiative”

“Should hopefully give people more choice as to whether A & E is the best place to go”

“Rather than go to A&E Community Nursing Teams could provide a service to vulnerable people with existing health care issues in their own home, even if this means waiting until the next morning”

“It should mean that those who need to be seen would get seen more quickly”

“It was a very interesting meeting yesterday and I think the phone first is going to be a very exciting and useful tool in keeping the numbers down in the A&E departments”

## Questions and Answers

### Questions received after the event

**Have you considered the rural and hard to reach areas where vulnerable patients who live on their own, already put off phoning for emergency assistance as they ‘don't want to burden the service’?**

This is an issue we would very much appreciate community help with. We have tried to explain in our messaging and local media that it is so important for anyone not feeling well to please come forward and get access to the health services. It is no burden to the service, it is what they are there for and are so committed to doing. We want to work with those who live in rural areas and with representative groups and individuals to make sure people feel comfortable using Phone First and have planned some further targeted engagement with key groups. If you would like to be involved contact details can be found at the end of this Report.

**Will there be community liaison teams within GPs and other primary care facilities promoting this initiative”?**

There will be leaflets and posters in GP Practices, Community Pharmacies and other locations that people are likely to use and hopefully see the information. We will also give out leaflets with the telephone number on it to people who come to our hospitals. We will use social media, local newspapers and the radio. Hopefully we can spread the word locally and are very keen to have community support with this.

**Can the promotion of health literacy /education and training be introduced in this initiative?**

Ensuring individuals and communities can access and understand information about services to help make decisions about their health is critical. The Trust and General Practice working together with local communities is committed to improving people’s health literacy so they can self-manage their health whenever possible. This new telephone number 0300 1231123 operates 24 hours a day 7 days a week and if anyone is thinking about going to the Emergency Department because they are confused as to what other service they possibly could access, they can ring this number and be guided. This isn’t enough of course. We need to work in partnership with local communities to see what actions we can take together to help people understand and access services.

## Questions and Answers

### Questions received after the event

#### **Have you considered people on ASD spectrum who find it problematic to use the phone?**

Emergency Departments will continue to be available however we are aware that a bright, loud and crowded ED is not the best place for people on the ASD spectrum. We will work with representative individuals and groups to consider how this service can be made accessible for people with ASD.

#### **Will an online chat option be part of the variety of contact options?**

Video call and zoom are not currently being considered for this initial new service.

#### **Could pictures/photos be sent to be viewed by ED of wounds/deep cuts for example, before the patient travels 20/30 miles to be seen?**

We know some GPs and hospital services now use photos to help decide on diagnosis and treatment plans. This new ‘Phone First’ service is more about guiding the person to the best service that can assess their particular needs, and it may be that the service ‘Phone First’ guides the person to would ask for a picture. We don’t think at this point that ‘Phone First’ service will be asking patients to send on pictures but we can consider this as the service develops.

#### **The success of this initiative will depend upon getting public support and compliance which will be heavily dependent upon building public awareness. What has been done before the launch of this service to inform the public?**

The roll-out to Causeway reflected the fact that it is a pilot and a ‘softly, softly’ approach was adopted. The communication strategy for Causeway included a launch via a Ministerial news release, the use of local broadcast and print media, social media, internet and poster information provided to Trust waiting areas, Primary Care including local GP surgeries, community pharmacists, dentists and opticians. Information leaflets were also provided for distribution through the ED at Causeway Hospital.



## Next Steps | Our plan

We will ensure that the feedback you have provided is shared with the Phone First project team in addition to the following steps:

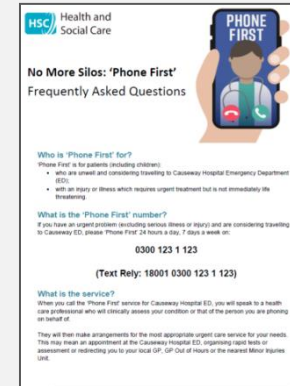
We have uploaded an FAQ (frequently asked questions) document on the Northern Trust website. This will be kept up to date and use the questions you raised and feedback received to inform the implementation of this project.

We will share the presentation slides and this report with everyone who attended the event

We will reach out to those individuals who have told us they would like to continue to be involved in this project. We appreciate the offer and welcome the support.

We will keep you informed of any updates on the Phone First service, including any engagement events arranged for the next phases of the project.

## Additional information



[Click here to view the Frequently Asked Questions for Phone First](#)

### Presentation Slides

If you would like a copy of the presentation slides from the service user engagement event please [click here](#) to request.



Finally, if you would like to be involved further in the Trust and hear more about involvement opportunities around Phone First then contact [Lynda.elliott@northerntrust.hscni.net](mailto:Lynda.elliott@northerntrust.hscni.net) to join our Involvement Network.