

**PE1285/L**

**Health and Social Care Integration Directorate**

Primary Care Division

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Anne Peat  
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Your ref: PE1285  
8 December 2011

Dear Anne

Thank you for your letter of 16 November 2011, enclosing some specific questions on an ongoing petition (PE1285) about the costs of calling NHS 24 from a mobile phone. You sought a reply by 22 December 2011.

The Committee posed the question:

- ***Please advise how the NHS 24 call-back facility is publicised. Does the Scottish Government think that the availability of this service is widely known? The Scottish Government is requested to investigate the feasibility of call-back following receipt of a text.***

As the Committee will appreciate, these are largely operational matters for NHS 24. Within its Board and clinical governance structures, NHS 24 must ensure it delivers safe and effective services that meet the ambitions in the Healthcare Quality Strategy for NHSScotland. As such, we have liaised with NHS 24 to inform this reply.

In terms of process, the first action that staff take on answering a call to NHS 24 is to record the details of the caller's name and contact number. All patients are asked if their telephone accepts incoming calls and are advised that, if they are cut off during the call, NHS 24 will attempt to contact them back immediately. If a caller indicates that the credit on their mobile phone is running out, NHS 24 will offer to call the patient back on the number provided. The ability to do this is primarily to ensure patient safety on a case by case basis, as such it is not publicised as a generalised service. The Scottish Government is assured that the process provides the safeguards necessary to allow calls to be managed safely and effectively.

Once the initial assessment has been completed, the caller may be immediately transferred to the Scottish Ambulance Service, advised to go to their local A&E department, or transferred to a health professional for further assessment. It is important to note that all life

threatening and serious and urgent calls are dealt with immediately by NHS 24 on an inbound basis. At times, and if the initial assessment confirms it is appropriate to do so, some patients will be advised that they will be called back within a 1, 2 or 3 hour timeframe, depending on which is clinically appropriate for their condition.

NHS 24 (including NHS inform) is committed to developing access to its range of services, for example by text, e-mail, social networking and web chat, in order to widen the ways in which members of the public can contact many of the services provided. In taking forward these developments, the most important aspect will be ensuring patient safety is maintained.

NHS 24 are in the process of developing a web-chat option which they hope to have in place next year. While this is initially to provide improved access to the deaf and hearing impaired community, NHS 24 will be investigating the feasibility of utilising this option for general access to the unscheduled care service. In relation to text messaging, NHS 24 will be looking at this option, but these considerations are likely to be progressed in the longer term.

The Committee also posed a second question:

- ***The Committee requests that the Scottish Government provides an update on how it intends to proceed once the University of Sheffield's evaluation of the use of the new 3-digit non-emergency number in the pilot areas in England is available.***

In discussion between yourself and Julie McIlroy in my Division, I understand that the timescale sought for this update was longer term. I can confirm that detailed work is ongoing to inform a decision by the Scottish Government next year. As previously conveyed, we will be very happy to keep the Committee updated in relation to Scottish Government considerations on adopting the 111 number.

I hope this is helpful, please get in touch if you require further information at this stage.

Yours sincerely

**FRANK STRANG**

Deputy Director for Primary Care