

NHS 111 call handling in children and young people

Aim: Evaluating the impact of clinical advisors handling NHS 111 calls in children and young people

Background

Previously, our Urgent and Emergency Care theme showed that large numbers of patients using the NHS 111 service went on to attend the emergency department within 48 hours, despite recommendations to self-care or use community services. In South Yorkshire, it was also identified that fewer NHS 111 calls about children and young people resulted in recommendation of self-care at home compared with the national average. As a result, South Yorkshire Integrated Care System piloted a new NHS 111 response for children and young people, where a proportion of calls were assessed by the paediatric clinical advisory service.

Outline of our project

We used a linked database of healthcare records for children and young people under the age of 16, containing data on all NHS 111 calls and any subsequent emergency department attendance and/or hospital admission in Yorkshire and Humber. Analysis of this data compared paediatric clinical advisors and non-clinical call handlers for a) advice during the 111 call and b) any subsequent use of hospital services.



Our findings

Our research found that for those who spoke to a paediatric clinical advisor:

- they were **around 10 times more likely to receive a recommendation to self-care**
- they were **less likely to attend ED** in the 48 hours after an NHS 111 call if recommended not to do so
- they were **more likely to need a hospital admission if recommended to go to hospital**

This work provisionally suggests that:

- **patients are more likely to comply with a clinical advisors advice not to attend the ED**
- **clinical advisors are more willing to advise that a patient self-care and better at accurately identifying more serious cases**

This evidence is being used by the South Yorkshire ICS to support further roll out of the Clinical Advisory Service.

