

Cyfarwyddwr Cyffredinol Iechyd a Gwasanaethau Cymdeithasol/  
Prif Weithredwr GIG Cymru  
Grŵp Iechyd a Gwasanaethau Cymdeithasol

Director General Health and Social Services/  
NHS Wales Chief Executive  
Health and Social Services Group



Llywodraeth Cymru  
Welsh Government

Nick Ramsay MS  
Chair of the Public Accounts Committee  
Cardiff Bay  
CF99 1NA

Our Ref: AG/RP

12 February 2021

Dear Mr Ramsay

**Update on progress against recommendations made in Public Accounts Committee and Wales Audit Office reports on Out of Hours Services**

Thank you for your letter of 29 September, noting our response, of 28 August, updating the Committee on progress in delivering the recommendations of its July 2020 Report into Out of Hours Services. You requested a further update by 12 February 2021 on progress made against these recommendations. Previously you have also asked us to provide you with an update on the Audit Wales (WAO at that time) recommendations made in their Out of Hours report published in July 2018. Please accept my apologies for the delay in providing you with this update.

In August 2020 we noted that a great deal of progress has been made against the recommendations of both reports and we provided a comprehensive update document, unfortunately given the need to support the Covid-19 response we have been unable to refresh the update to reflect more recent progress and the changing context. However I have provided a general update on progress and a reflection on the changing context as part of this letter.

You should also be aware that Officials have had discussions with Audit Wales relating to the progress highlighted in the update and the process for agreeing that recommendations have been delivered. Unfortunately these discussions have been interrupted by the pandemic.

The broader context and landscape relating to urgent primary care has changed significantly over the last 12 months. As you will be aware Covid-19 has had a profound impact on the NHS. In terms of OoHs/111: demand has fluctuated as patient behaviours change; there have often been more clinicians available to the Out of Hours and 111 service; 111 has become a more recognisable brand as a result of its use during the pandemic being available across Wales for Covid-19 related calls; and the full service is now available in 5 of the 7 health boards (Cwm Taf Morgannwg successfully launched the 111 service in October 2020).

Covid-19 has also seen a much greater emphasis on care closer to home both by the NHS and patients. Emergency Departments (EDs) are no longer seen as the easiest, or best, point of access for the public with urgent care needs. In this context, over the pandemic period the CAV 24/7 contact first model has been introduced in Cardiff, with a similar model now operating in Anuerin Bevan and implementations planned in other health boards over the next few months. In these models, patients are asked to phone first before attending ED. They receive an initial triage from a call handler and if required will then be passed onto a clinician who will undertake a further triage. Following this the clinician will then make a decision on the best point of care for the patient, often this is back to primary or community care services, but if this is ED then the patients are booked in at a time of less demand.

At the same time and partly to support the phone/contact first approach, Urgent Primary Care Centre pathfinders are now operating in 5 health boards, these seek to provide a 'setting' where patients with an urgent primary care need can be seen by Primary Care clinicians in a timely manner both in and out of hours.

The implementation of the NHS 111 Website including the on-line symptom checker has had a significant impact with the site having over 1.6m hits in March 2020 alone. At the same time a range of other digital services for clinicians and the public has made a significant difference and increased NHS resilience throughout the COVID period. We continue to review how the service can support wider urgent care whilst we also implement the new 111 IT system, SALUS. Despite delays caused by Covid-19 I anticipate this being in place in Quarter 3 next year.

These developments are examining different approaches and testing various models the aim is to produce a consistent, integrated and accessible framework for 24/7 urgent primary care. 111 will be the point of access for this integrated model.

In summary, the COVID-19 pandemic of 2020 has had a profound effect upon the delivery of NHS services and the behaviour of the general public in the way they choose to access healthcare. We have seen rapid developments in operational delivery within the NHS in order to ensure patients who are COVID positive receive the treatment they need and at the same time protect those who are most at risk. This provides a blueprint for the future, the 'lockdowns' aimed at controlling the spread of COVID-19 saw a sharp reduction in attendance at Emergency Departments (EDs), and a large increase in the amount of calls to the NHS 111 service and use of the COVID-19 online symptom checker. 111 services continue to operate above pre-COVID levels, while attendances at ED returned to a more 'usual' level between wave one and two, they have again reduced compared to the pre-COVID situation.

In light of the changes described above, the 111 Programme Team and Urgent Primary Care group within the Primary Care Strategic Programme are working closely together to review the future strategy and implementation over the next few years. This is aimed at

providing a consistent 24/7 urgent primary care offering rather than one that is defined by the time of the day, or day of the week.

I hope you find this update helpful.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Andrew Goodall', written in a cursive style.

**Dr Andrew Goodall**  
Director General/ Chief Executive NHS Wales