

SCOTTISH PARLIAMENT HEALTH & SPORTS COMMITTEE

NHS 24 WRITTEN SUBMISSION

1. INTRODUCTION AND SUMMARY

In response to the Coronavirus (COVID-19) pandemic and as part of national efforts working alongside Scottish Government and partners, NHS 24 reconfigured services to assess the needs of people with suspected coronavirus. This included access 24/7 through 111 to the national COVID-19 pathway, establishing a special information helpline for non-symptomatic advice and access to testing, extending its mental health services, as well as making effective use of digital technologies to deliver our services to best effect. NHS 24 has played a key role in protecting the critical care capacity required for those most acutely affected by COVID-19 and offered a range of services, support and trusted information to the public throughout.

The biggest transformation has been our role as the single national access through 111 24/7 for COVID-19 related care both in and out of hours. This national pathway was developed with colleagues across the system, led by primary care, with a consistent set of agreed outcomes and referral into local Board hubs for virtual consultation and, where required, face to face assessment within a network of community assessments centres across Scotland.

This has been delivered 24/7 alongside NHS 24's 111 Out of Hours (OOH) services to stream people to 1 of 4 nationally agreed endpoints; self-care; 1 or 4 hour telephone consultation (at local Board Hub); and 999 ambulance. Critical to the effective delivery of this pathway 24/7, was increased capacity in NHS 24, notably during the in hours period, and the support of NHS Boards and colleagues across the system to deliver this at pace to respond to the rapid acceleration in COVID-19 cases.

In addition, the accelerated enhancement of NHS 24 digital services including the heavily promoted use of NHS inform for all public and professional facing content related to COVID-19 enabled empowerment of citizens for self-supported care and signposting to relevant services. NHS 24 has worked closely with Public Health Scotland throughout to ensure the consistency of information and advice available. The launch of a dedicated national helpline managed by NHS 24 in January has also been a key feature. Through this and NHS inform, NHS 24 has delivered a national, trusted source of help and advice for the public.

NHS 24 has embraced a number of other innovative approaches to leverage our existing NHS inform health and care platform as a means to integrate and embed digital as a key first point of access to its services. NHS 24 delivered on behalf of Scottish Government, the NHS 24 COVID-19 app, which also utilises our existing national Self Help Guide asset. Other developments included the NHS inform chat bot which allows users to navigate easily our content, getting them to the right information at the right time.

As part of a collaboration with Scottish Government and the BMA, NHS 24 had the opportunity to accelerate the GP Web Services programme to increase the availability of GP Practice websites to enable their local populations to access local information and advice through NHS inform and associated assets, including our Self Help Guide featuring a new COVID-19 symptom management resource. This has enabled participating GP Practices to consider the role of digital in effectively managing their local response to the pandemic, and equally enabling considering the role of the Digital Practice in the new normal.

NHS 24 has ensured it continued to provide staff with a safe working environment throughout, complying with the requirements for 2m physical distancing. This has been

challenging for NHS 24 accommodating a reduced estate capacity whilst simultaneously significantly expanding its services and staffing. NHS 24 has been supported by Scottish Government to expand its estate as a result.

The table below provides a high level summary of COVID-19 related activity, by service. Further data on activity is included throughout the remainder of the report.

Service	Since COVID-19 (3 Feb 2020 – 6 Sept 2020)
111 (including Scottish Emergency Dental Services)	1,028,542
Mental Health Hub	32,309
Breathing Space	51,507
Scottish Emergency Dental Services	51,803
0800 Non clinical COVID-19 helpline	168,161
NHS inform views	36.2 million
NHS inform – COVID-19 page views	9.1 million
NHS inform – COVID-19 Self Help Guide accessed	901,124
COVID-19 chatbot sessions	Between 600-1000 per day
NHS COVID-19 app	Over 120,000 downloads

2. HOW OUR SERVICES HAVE RESPONDED TO COVID-19

NHS 24 has played a key role in the response to the COVID-19 pandemic. In the initial stages of the outbreak NHS 24 worked alongside primary care services in assessing patients and to stream them to territorial board patient facing services, community pharmacies, SAS, and self-care, as appropriate.

COVID-19 has caused a significant change in the profile of our activity away from predominantly Out of Hours, requiring real agility in our response to this. Before COVID-19, typically NHS 24 handled 25,000-28,000 calls per week (not including Public Holidays), with 91% of that activity occurring in the Out of Hours (OOH) and principally at the weekend. In the two weeks preceding lockdown and the launch of the national COVID-19 pathway on 23rd March, 111 calls averaged 60,000 each week. Similarly, calls to NHS inform rose from an average of 2,800 calls per week before COVID-19 to approximately 4,500 during the peak of the pandemic.

In response to COVID-19, NHS 24 has utilised its national telephony and digital capability to **support a national 24/7 COVID-19 pathway**, provided through a 24/7 111 service that focuses on COVID patients only in the in hours period and supported by a **non-clinical special 0800 helpline** and the use of digital assets including **NHS inform**.

Further information is provided over the next few pages on each of these services.

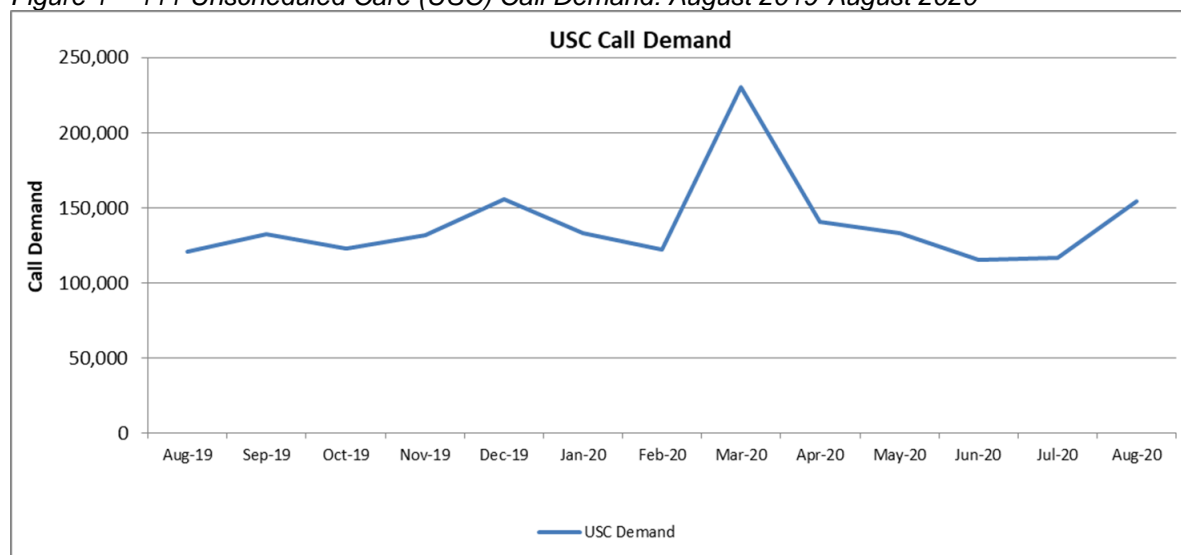
111 SERVICE

NHS 24 is delivering a single access through 111 to the public 24/7. People who call 111 and select COVID-19 option are assessed initially by an NHS 24 Call Taker (CT) using the COVID-19 Assessment Tool (AT), with clinical supervision being provided at various stages where required/appropriate. Access through 111 allows a single clinical pathway for triage to be introduced alongside suitable clinical content with four possible endpoints: Speak to Dr 1 hour; Speak to Dr 4 hours; 999; Self Care.

Figure 1 below sets out demand for the 111 service from August 2019 through to August 2020.

For the period from 3 February - 6 September 2020, we have responded to 1,028,542 calls to 111.

Figure 1 – 111 Unscheduled Care (USC) Call Demand: August 2019-August 2020



The rapid implementation of the Community COVID-19 Pathway service has demonstrated the ability to safely and effectively provide COVID-19 advice and care to patients in the community via primary care telephone triage, with the ability to schedule same day face to face assessments where required. The numbers of patients requiring secondary care assessment has been extremely low with excellent pathways in place from primary to secondary care. This model has required initial telephone triage by non-clinical NHS 24 call handlers, with secondary clinical telephone triage largely provided by a range of clinicians within local Boards.

- To date, there have been **around 170,000 contacts** with 111 service since the COVID pathway began (23 March)
- **A quarter of these** were referred effectively to self-care from NHS24, while around **two-thirds** were referred to a COVID hub for telephone advice.
- **78%** of consultations undertaken at COVID hubs and assessment centres (up to 2 September) were telephone advice consultations, while **20%** of consultations included a face-to-face assessment.

The table below provides a summary of outcomes for COVID-19 calls to 6 September 2020:

COVID-19 Endpoints	23-03 to 06-09 COVID Records	% Split
999	9,590	6%
Dr to Phone 1Hr	40,152	24%
Dr to Phone 4Hrs	70,109	42%
Self-Care	42,506	25%
Other	3,843	2%
Total	166,200	100%

SUMMARY OF CHANGES DURING COVID-19:

- A new national pathway for symptomatic COVID-19 with NHS 24 111 service as the single access to that 24/7. This included adding a COVID-19 flag to records to enable accurate data collection.
- This pathway was developed on a whole system basis, led by primary care, offering national consistency of access, triage and referral outcomes into local Boards 24/7.
- To ensure the most vulnerable were getting the right decision about the 'best next step' in their patient journey, we engaged with clinicians and wider system experts, as well as care sector leaders.
- An additional 160 call handling staff joined NHS 24 specifically to deliver the national COVID-19 pathway through 111. NHS 24 also redirected staff from other services to meet this critical need. A number of clinicians joined NHS 24 from other Boards, including dentists, pharmacists, nurses and GPs; this included staff who responded to the call to recently retired professionals.
- Between 25/3/2020 and 07/09/2020, 164,144 patients were referred to COVID-19 Hubs by NHS 24. Approximately, 80% of these calls referred to the COVID-19 Hubs were closed at that point with remote consultation by a local senior clinical decision maker.
- We continue joint working with territorial Boards to optimise the Community Assessment Hubs to provide improved community pathways, as we move into the winter period.
- We collaborated with Public Health Scotland colleagues to refine our data intelligence to best demonstrate our contribution and activity across the whole system.

Why is this new?

Standardisation of this pathway was delivered by a) streamlining NHS 24 clinical triage pathway to reach a more bespoke set of triage endpoints and b) optimising this triage by placing a new layer of senior local clinical decision makers, in the Covid hubs, as the next step in the patient journey.

With this new layer of additional clinical skills, local knowledge and access to local services, the systemic response was able to safely and effectively endpoint more episodes of care through remote consulting (not re-triage) without recourse to a face to face appointment. This was further enabled locally by enhanced use of digital technology.

In addition, NHS 24 are now sharing near real-time data to the integrated data hub established for COVID-19. This information could be valuable for alerting future outbreaks and identifying emerging trends which could be an early warning sign for other part of the health and care system.

STAKEHOLDER FEEDBACK (SECONDED STAFF)

Seconded GP

“This unexpected and unplanned return to working life has been stimulating and more enjoyable than I thought it would be! The clinical and non-clinical staff have been very impressive in their different roles, great to work with and all have been very helpful and supportive.”

Seconded GP

“I have been extremely impressed by the high standards provided by NHS 24. My NHS 24 nursing colleagues provided a truly excellent standard of service and have been extremely patient and welcoming. Throughout the organisation working relationships and the working atmosphere are of the highest standard.

Seconded Pharmacist

“I just wanted to say thank you for the opportunity to work at NHS 24. It was an area entirely outwith my comfort zone but it has been immensely useful learning and I want to say a huge thanks to the team at NHS24 – they are an absolute credit to the NHS and an absolutely fantastic MDT to work with. What could have been an extremely challenging redeployment was made much better by the support from staff and I’ve learned so much from them.

We have also received very public feedback (through social media and directly from Health Boards) from health professionals on how valuable and responsive NHS 24 was.

111 DENTAL SERVICE PROVISION

The Scottish Emergency Dental Service (SEDS) delivers a national model of dental telephone triage, fully integrated into NHS 24 and accessed through 111.

Pre COVID-19, the service received approximately 6,000 calls per month. NHS 24 Dental Nurses refer patients into emergency, urgent or routine pathways of care. If action was required, the Dental Booking Hub team could organise face to face treatment in the patient's own local Health Board OOH dental clinic.

On 23 March 2020 routine, primary care dentistry in Scotland stopped, with dentists restricted with to providing advice, analgesia and antimicrobials. Patients could be referred to specialised urgent dental care centres if necessary, but treatment options were very limited.

The COVID-19 outbreak has had a significant impact on dental services in the community requiring dental practices to close. With patients unable to access usual dental care, the out of hours Scottish Emergency Dental Service (SEDS) experienced an increase in call volume, peaking w/c 11 May when calls were up by 70% on the corresponding week in 2019. The total call demand to 6 September 2020 is 51,803. Calls received by the service were also perceived to be more complex in nature as patients who would ordinarily have received a

dental intervention were experiencing recurrence of dental problems which had not responded to the initial approach of advice, analgesics and antibiotics (AAA).

In response to the increased demands on SEDS, a decision was taken to supplement the usual dental call handlers by bringing in GDPs. These dentists were redeployed from temporarily closed dental practices on a voluntary basis at no cost to NHS 24. An initial cohort of five GDPs were trained, and in the early stages one dentist was available each day. Over time the number of GDPs expanded to eighteen. By June shift patterns had settled with two dentists covering evenings from Monday to Thursday, three on a Friday evening and twelve staggered through the day on Saturdays and Sundays. The initial remit of the GDPs was to a) provide an endpoint for patients triaged by dental nurses as requiring emergency care who would normally be directed to attend their nearest hospital Emergency Department or out of hours dental clinic, and b) take calls from the Dental Clinical Support Line.

As their NHS 24 role developed they were able to provide a more in depth clinical assessment and provide advice to patients over the phone, reducing the number of patients requiring referral to clinical dental services. . Where patients were assessed as being in need of medication, a prescription could be issued by the GDP on site via remote prescribing, avoiding the need for the additional step of referring on to a patient's usual dentist or an Urgent Dental Care Centre. For the five week period between 16 May to 21 June, dentists referred 521 patients to pharmacists with a prescription, Dentists were also able to help streamline pathways for patients requiring emergency dental care for the most serious problems, including severe infections.

GDPs made a substantial contribution to the Scottish Dental Emergency Service within NHS 24. In addition to supporting the dental team during a time of increased demand on the service, the addition of dentists to the team enabled processes to be introduced which improved the patient journey.

The Chief Dental Officer has acknowledged the contribution this service has made throughout the crisis point for dentistry when all dental practices closed at first. This model will continue to be developed throughout the remainder of this year and evaluated as a potential longer-term shift in the service.

CHANGE DURING COVID:

- With general dental practices in the community closed, General Dental Practitioners (GDP) were brought in to work frontline in SEDS and remote prescribing was enabled for GDPs
- Increased level of senior dental nurse cover at the weekends on all shifts
- Changes made to existing dental patient pathways
- Enabled dental calls to be transferred directly to Dental Nurses when 111 access is challenging
- Enabled Dental Team Manager access to transaction history for return callers regarding Booking Hub appointment details
- Wider range of dental staff were able to make changes to the dental calendars
- Social media used to help manage patient expectation if extended delays to call back

STAKEHOLDER FEEDBACK

Out of hours dental treatment via patient opinion

Last weekend, I had excruciating toothache so I contacted 111 for advice. The call handler was very thorough and transferred me to a dental nurse. She did an assessment, gave me self-care advice and advised that I'd be contacted by a dentist the following day. The dentist contacted me, prescribed antibiotics and forwarded the prescription to my local pharmacy. This treatment worked well for a few days but unfortunately, the pain came back the following weekend. Yesterday, I contacted 111 again for advice. The call handler was very kind and again, very thorough. I was triaged by a dental nurse and an appointment was arranged for a telephone consultation with another dentist. The dentist decided I should have a physical examination and arranged an appointment at my local out of hours dentist within the hour.

The service I received from every single member of the NHS team was exceptional. Even on weekends and bank holidays, during a global pandemic, our NHS workers continue to provide essential services with the utmost professionalism, efficiency and kindness. I have nothing but respect and gratitude for the treatment I received and the incredible work carried out by our NHS workers every day. Thank you to each and every one of you.

Seconded staff

Feedback from dentists working with SEDS was very positive, which included their training experience as well as the working environment in the SEDS team.

NHS 24 MENTAL HEALTH SERVICES

Mental Health Hub

People with a mental health problem are three times more likely than the general population to attend the Emergency Department. From an NHS 24 perspective, prior to the Mental Health Hub implementation 65% of all mental health related calls resulted in a primary care OOH consultation.

The NHS 24 Mental Health Redesign programme has seen a growing suite of Mental Health services to improve the flow and user experience, specifically in relation to our Mental Health 'hub'. NHS 24 established a mental health hub, accessed through 111, in March 2019 available 6pm-2am Thurs-Sun.

The effects of COVID-19 in terms of mental health are recognised and early on, NHS 24 was supported by Scottish Government to expand its mental health hub to be available 24/7, which it has been since mid-July. NHS 24 has seen an increase in activity during the COVID-19 pandemic with a range of mental health presentations. With the Mental Health Hub implementation, 60% of calls taken by Mental Health Hub resulting in no partner action. Since expanding 24/7, the mental health hub has received approximately 2,000 calls per week demonstrating a clear need for this service.

On 14th April 2020, the First Minister announced the expansion and development of the Distress Brief Intervention (DBI) programme into a nationwide response for people presenting in distress. As part of that national roll out, the Mental Health hub at NHS 24 became a level 1 responder working with third sector partners to increase access to DBI across Scotland. The DBI programme provides a rapid response to people who present in

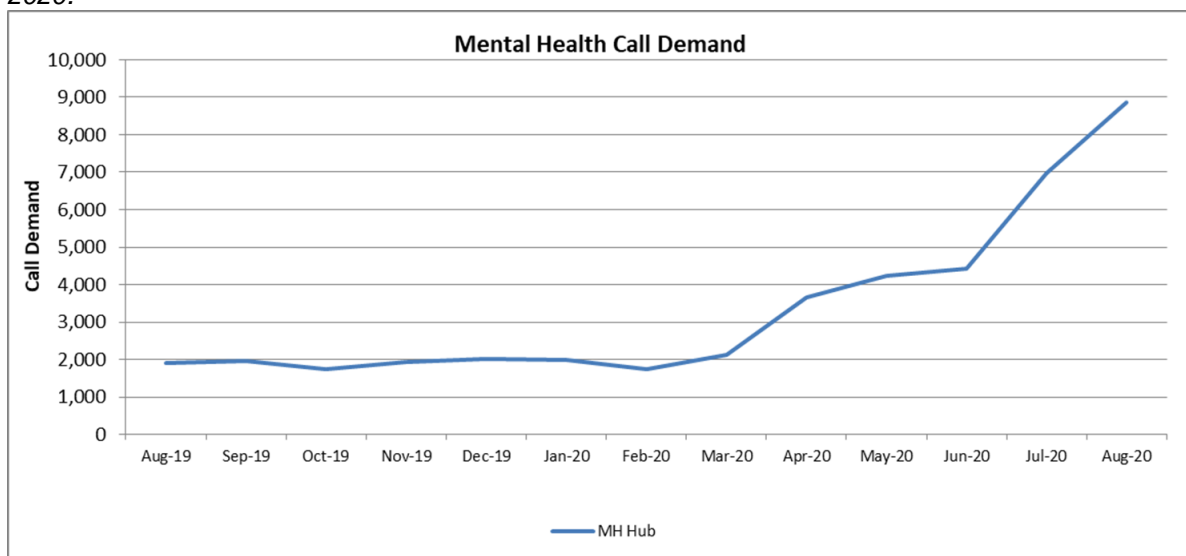
distress to emergency services but who do not need an emergency response. Front-line services such as police, ambulance, primary care, accident and emergency departments and NHS 24, who are trained in DBI, can now help ease the person’s distress and if appropriate refer them to trained third sector provider agencies who will be in contact within 24 hours and offer support over a two-week period to help manage immediate and future distress.

DBI enables NHS 24 Mental Health Hub staff to provide an additional referral pathway - to persons in distress that do not require a clinical response - with the confidence that they will be helped quickly and appropriately. This enables more people across Scotland to benefit from the connected person-centred, compassionate support DBI has created. Third sector colleagues are crucial partners in this work. . Since this was launched in May, the hub has made 634 DBI referrals and the commitment to this as a national programme has been extended to 2024.

Figure 2 below sets out demand for the Mental Health Hub August 2019 through to August 2020.

For the period from 3 February - 6 September 2020, we have received 32,309 calls to the Mental Health hub.

Fig 2 Mental Health Hub call demand: August 2019 – August 2020:



NHS 24 has also played a role in supporting colleagues across the health and social care system. In addition to the support available in local Boards, NHS 24 now provides a national confidential wellbeing line for health and social care staff. This is managed by staff within the mental health hub and linked into local Board psychological services.

SUMMARY CHANGES DURING COVID:

- Increased number of MH staff to maintain optimum patient access to MH Hub with care being provided by a Psychological Wellbeing Practitioner at first contact.
- Recruitment to the MH Hub was accelerated to eventually provide 24/7 cover during the COVID-19 outbreak, alongside introduction of the Distress Brief Intervention (DBI).

- Introduced a specific wellbeing helpline for Health and Social care staff
- Introduced option for Police Scotland to redirect callers for more appropriate MH care to the Hub

Breathing Space Webchat

Breathing Space web chat was implemented as a test of change in 2019 to offer those people contacting the service an alternative access channel. It proved to be an effective alternative to telephone-based access for a cohort of service users, demonstrating unmet need and therefore it was agreed in 2019 the pilot should be expanded for a year.

At the beginning of the COVID-19 outbreak, Breathing Space experienced an increase in calls with an expectation that this would continue to rise as the impacts of COVID 19 were felt across the community. As part of an increase in NHS 24's mental health provision it was agreed that Breathing Space should expand staff resource numbers to cope with the higher demand expected across both channels. It is expected that the service will be at the required staff capacity by August 2020, and the initial evaluation of Webchat has been positive.

SUMMARY CHANGES DURING COVID:

- Additional staff recruited to Breathing Space service to provide additional resource to meet call/chat demand from the public

COVID-19 NON CLINICAL HELPLINE

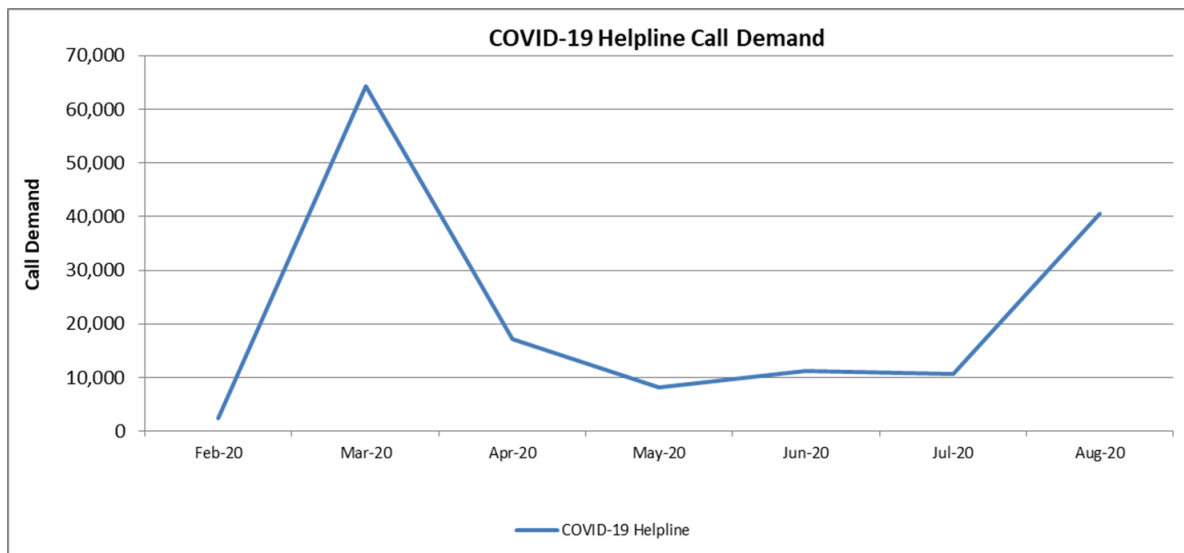
As part of the initial response to COVID-19, NHS 24 established a National non-clinical Coronavirus Helpline. The further reconfiguration of services to free up NHS 24 infrastructure, resource and expertise necessitated the outsourcing of the Helpline to a third party provider. They were able to meet our requirements of a locally provided solution within the timescales required that would allow the collaborative working and on-site supervision needed for governance purposes.

We are continuing this additional resource to provide operational resilience in the event of further waves and also as we support Scottish Government's Test and Protect Strategy and the increase in demand through this additional service.

Figure 3 below sets out demand for the Non-clinical COVID-19 Helpline service from its establishment in February 2020 through to August 2020.

For the period from 3 February - 6 September 2020, the helpline has received 168,161 calls.

Fig 3 Non-clinical COVID-19 Helpline call demand



In addition, through NHS inform and 111, NHS 24 are now a key entry point for access to COVID-19 testing. In relation to testing, through to 8 September 2020, 53,035 requests have come through the 0800 helpline and 306,335 completed the testing page on our Self Help Guide.

NHS 24 digital services – NHS inform

NHS 24 has played a key role across the system and specifically in the growth of the provision of digital services to NHS 24 and the wider system.

Our NHS inform health and care platform has provided significant access to quality assured content for a public and professional audience. The development of our national digital assets has contributed to the way in which people are used to accessing services and as a result has seen a shift in people accessing NHS inform as the digital ‘front door’ to our services. It has played a key role in enabling self-care through our dedicated resources on our Self Help Guide and the NHS 24 COVID-19 App.

During COVID-19, we increased provision of interactive and up to date online information across our digital platforms and signposting to practical resources e.g. access to a fitness to work certificate. Digital access was supplemented by the implementation of a non-clinical helpline providing the same information, thus ensuring inclusion and consideration of the risk of digital exclusion. This was supported by a highly effective public communications campaign, run by NHS 24 on behalf of Scottish Government.

Our digital assets have been a key source of trusted information by the public with over 10.1 million views on the COVID-19 page and has proven to be agile in its response to an evolving situation. Our Self Help Guides were developed in collaboration with our colleagues in Public Health Scotland, with ongoing collaboration with them to ensure our content was evidenced base and accessible.

ACCELERATING AND EMBEDDING DIGITAL DEVELOPMENTS

We accelerated a number of existing digital developments, as well as facilitated innovation and growth of our digital contribution, to support our response to COVID-19. This includes development of apps, supporting primary care digital services, and other digital solutions which have been accelerated as part of our response to COVID-19.

NHS 24 also recognise the opportunity to reframe NHS 24 services at the heart of digital access to our health and care system for information, advice, signposting and triage to the 'right care at the right time'. We will also look to contribute to the upcoming refresh of the Digital Health and Care Strategy.

This section summarises the key digital developments to support our response to COVID-19.

Digital development	Change during COVID-19
<p><u>Automated text messages for COVID calls to 111 service</u></p> <p>Automated SMS messaging has been used within the 111 service for callers who were awaiting a call back where they receive a message to confirm their call had been registered and awaiting a call back. SMS was also used across other parts of NHS 24 services and internally to support staff.</p> <p>This function was subsequently developed to include a link to the testing article when the Test & Protect service launched. This function enabled users to navigate their way to the appropriate route for testing for them. Further work that has been done on this functionality enables more control from NHS 24 perspective on changing or adding new messages, plus different data fields within the record can be used to trigger specific SMS messages e.g. keywords, health board area etc.</p>	<ul style="list-style-type: none"> • Automatically send SMS message (with link to self-care information) to any caller into the 111 service from a mobile phone whose record was tagged as being COVID related • Ensure sufficient volume of SMS messages available as there would be a significant increase to the volume of messages being sent each day • Automatically send SMS message (with link to testing article on NHS inform) to any caller into the 111 service from a mobile phone whose record was tagged as being COVID related <p>Going forward, it is our intention to use this approach to support localised outbreaks or other public health messaging in the future. The follow up of specific call types into 111 with self-care or additional information must be a future development.</p>
<p><u>Proactive outbound text messaging linking to online COVID Hub</u></p> <p>Prior to the COVID-19 outbreak, NHS 24 had the technical ability to send outbound text messages to the public via our PageOne SMS solution. This was existing technology used within centres to contact Staff, but also as part of the Quit Your Way Scotland service to provide information to users wanting to stop</p>	<ul style="list-style-type: none"> • Proactive outbound SMS messaging approach used to contact 650k users of the 111 service about the COVID Hub on NHS inform <p>Going forward, it is our intention to use this approach to support for other public health messaging, and to target relevant communications to a specific location/post-code area as directed by</p>

<p>smoking.</p> <p>As part of NHS 24's initial response to COVID, there was guidance provided by the ICO and CLO to confirm that proactive outbound SMS messaging could be used to contact users of a service about impacts of COVID. Mobile numbers of callers to the 111 service for the last 2 years were used to send out a blanket text message, labelled as NHS 24, to let them know about the COVID Hub that has been created on NHS inform for the latest COVID information. This resulted in around 650k mobile numbers being messaged.</p>	<p>Public Health Scotland.</p>
<p><u>Online COVID Hub on NHS inform</u></p> <p>NHS inform as a product has been available for 10 years and has gone through a number of iterations over that time in response to user need and service demand. At the beginning of the COVID-19 outbreak, there was no information on COVID-19 (Coronavirus) on the site. As the outbreak developed, there was more need for information as cases began to be noted in the UK. Information focussed specifically on the guidance for Scotland, which came from Public Health Scotland (previously Health Protection Scotland) and Scottish Government.</p> <p>Although there has not been a full evaluation, findings related to public use of the online COVID Hub were gathered using HotJar (gathers online feedback from users, and shows a heatmap of how people are viewing the content). The online content was able to help manage some of the increase in demand from the public during COVID-19.</p>	<ul style="list-style-type: none"> • New governance processes developed and introduced around lines of communication and clinical review/approval/sign-off process • On-call arrangements put in place for the digital team to enable real time change to content and guidance • Digital team moved to homeworking to protect the team from COVID and provide contingency in case of illness • Created a content hub within NHS inform, which enabled a single URL to be used on Scottish Government communications and created more awareness of NHS inform as a source of quality assured information • Partnerships were developed with NHS GG&C and NHS Lothian to support language translation and fortnightly updates to content as key messages changed • Online dashboards were created to report on daily traffic trends with specific dashboards for the SHGs including endpoint splits to monitor performance <p>Going forward, it is our intention that the changes that were made should help inform our future approach to providing information to help manage public demand for information.</p>

<p><u>Online GP.scot websites</u></p> <p>Prior to COVID-19, the GP.scot project (to develop a consistent database for every GP practice in Scotland) was on track to launch the first cohort of 30 live web sites for the end of March 2020.</p> <p>In response to COVID-19, additional functionality was developed and is now available for any practice who uses the GP.scot website. GP practices were able to start using the GP.scot website from the first week in April, and as of end of August 62 practices had the GP.scot website live.</p> <p>GP.scot websites have increased access for over 120k patients who did not have digital access to their GP practice before this or the ability for some of those practices to enable use of video consultation for some people.</p> <p>Overall, the GP.scot websites have increased digital access for patients, increased potential for practices to utilise digital resources to support their demand management, support patients to self-care, and increase consistency of health information offered to the Scottish public through the use of NHS inform content across the GP.scot sites.</p>	<ul style="list-style-type: none"> • Add an alert bar to each GP.scot website to direct users to the NHS inform COVID Hub content and include the helpline 0800 number • Add video consulting functionality within the base site for the GP.scot websites.
<p><u>Chatbot for COVID-19</u></p> <p>This is a new piece of functionality made available for COVID. This tool was offered by Amido for free to the NHS in Scotland to support the COVID-19 response up to the end of July 2020. The chat bot is designed to be able to answer questions automatically for users on a defined topic, in this instance COVID-19. There is a knowledge base from where the answers come from, this is designed and managed by the Digital Team. This enables users to ask questions 24/7 and the content is aligned with the NHS inform COVID content. The bot was offered to us by a set of organisations, linked through Cap Gemini. This was offered for free up to the end of July to support the NHS COVID response. In addition, as part of the response when no answer could be given a standard response was developed which included a link through to live web chat (available 8am – 10pm) so that the enquiry may be managed. There was also additional information added at the initial start of the interaction, to remind users to</p>	<ul style="list-style-type: none"> • COVID-19 chatbot was introduced into the NHS 24 digital response to COVID-19 • Digital Content Team worked on the bot to provide daily analysis of the questions that have been asked, and constantly review and improve the responses given <p>Going forward, it is our intention that the learning/experience during the COVID-19 outbreak is used to develop the chatbot solution further with relevant partners to meet the increasing information needs of the public.</p>

<p>keep questions short (as long questions cannot be understood well by the bot) and not to disclose personal information within the question. There is significant reporting of data through bot, along with numbers of sessions and questions asked, there are the questions themselves to analyse, tracking which questions couldn't be provided with an answer and the confidence score of those that can be answered i.e. how confident are we the answer responds sufficiently to the question. These are all automatically captured and presented through Power BI reports on a daily basis.</p> <p>Currently the bot is managing around 40k enquiries per month. The bot is providing a response to 95% of enquiries either through a direct answer, or a handover to web chat. Through this route the bot is generating around 60% of the traffic managed by the Ascensos web chat team. It's difficult to evidence the impact of the bot not being there, other than the fact the received enquiries (40k per month) would be received somewhere else, potentially through the Helpline or 111, or public users would not find an answer to their question at all.</p>	
<p><u>NHS 24 COVID-19 App</u></p> <p>Prior to the COVID-19 outbreak, NHS 24 only had one app, which was specifically for the MSK service. As part of the NHS COVID response, xDesign and Scottish Government approached NHS 24 with the offer of a 'free' app to support the COVID-19 response. It was agreed that NHS 24 would work with xDesign to develop the app to support access to the COVID-19 information on NHS inform. Additionally, content was added to the NHS inform and NHS 24.scot websites promoting the app, along with some digital marketing to push the app out to users via Facebook and Twitter. App structure was developed by xDesign and working with our digital supplier we enabled the NHS inform and SHG API (for COVID-19 SHG and Testing Guide only) to be made available via the app. The content of the app is the content from NHS inform, so there was no additional governance required on the content, just governance of the API to ensure it was pulling through all the required information.</p> <p>Where content directed users off to another website or another part of NHS inform, the decision was made to take the user to the</p>	<ul style="list-style-type: none"> • New COVID-19 App was developed • Needed to develop the API to support video content and Self Help Guide <p>Going forward, we will look to build on the App's ability to increase access to COVID-19 information for users, offering a strong platform to build on more transactional elements of our services. Further use of the notifications process will be explored to engage more users.</p>

<p>inform website and focus the API pull within the app on COVID-19. Download data is available from the developer platform. Data on usage is available via that platform at an app level, however detailed user behaviour has not yet been captured due to some issues with Google analytics tagging, but will be available at some point. This is being worked on, but will only show data going forward from that point, not retrospective. The App has enabled more accessible i.e. in your pocket, access to the COVID-19 content. Notifications has generated interaction with the app after the notification is sent, users check for the changes made. Also when significant announcements are made by Scottish or UK Government as part of the COVID-19 response, this generates activity. Provides a stable platform for further development of the app to support the broader channel access to any/all NHS 24 services.</p>	
<p><u>Translated information</u></p> <p>Pre COVID-19, NHS inform had very limited translated information in other languages available. An exception to this was British Sign Language (BSL) content. At the start of the COVID-19 outbreak there was a need for public health information to be made available in different languages and in different formats. This was to ensure that people in Scotland had the right information at the right time. It was intended to protect them, their friends and families, their communities, and ultimately the wider community at large.</p> <p>Representation was made to the Scottish Government as COVID-19 information published on NHS inform was initially only available in English. This meant that British Sign Language (BSL) users and people whose preferred language was not English would be unable to access the latest information and guidance from Scottish Government and Health Protection Scotland. With the majority of our translated information being produced in PDF format, we have been advised that the majority of people accessing the NHS inform website use smartphones or tablets, and a PDF is not always easy for them to access on these devices. We have received requests to translate the information in to additional languages (Farsi and Bengali are the latest that have become available) but we have had requests for other languages. It is not sustainable to continue to</p>	<ul style="list-style-type: none"> • Translators from NHS GG&C and NHS Lothian were brought in to help translate the COVID-19 public health information into languages other than English • NHS inform expanded the level of translated material available on NHS inform • Worked with the community to create a glossary of terms to be used for translation, taking account of local dialect and nuances in language. <p>Going forward, it is our intention to further expand translated and accessible content on NHS inform, and further explore how best to engage with the community to secure their input into our translational work.</p>

deliver the translation work for COVID-19 and beyond without any additional funding in the longer term. While NHS GG&C and NHS Lothian have been happy to support NHS 24 in this, they will soon require their translators to go back to providing their business as usual face to face interpretation service for patients accessing health services.

In one instance, we have worked with a community to add an extra layer to the translation process. Normally, two layered (translation carried out and then cross checked for accuracy), we have worked with the community to create a glossary of terms to be used, taking account of local dialect and nuances in language. We see this as a positive step and this is an approach that we would wish to expand.

COVID-19 RELATED EXPENDITURE

NHS 24, like the rest of NHS Scotland, has had to react to an unprecedented situation during the COVID-19 pandemic.

Decisions and consequent expenditure had to be taken to ensure services were provided to help combat the outbreak of COVID-19 in Scotland. Most of this expenditure was outwith the normal budget that NHS 24 was expected to work within. Internal procedures were implemented to ensure appropriate governance was achieved in every decision.

Scottish Government delegated a certain level of financial responsibility in making financial decisions in relation to COVID-19, with a view to retrospectively funding COVID-19 expenditure. All NHS Boards in Scotland are required to submit a monthly finance plan of COVID-19 related expenditure to date and a forecast for the rest of financial year 2020/21.

To the end of July 2020 (last reporting period), NHS 24 has incurred £3.1m and is expected to incur a total of £10.1m for financial year 2020/21. NHS 24 are anticipating this expenditure will be funded by Scottish Government. Forecast COVID-19 related expenditure across Scotland however remains above the funding Scottish Government anticipate to receive and therefore there is a chance that NHS 24 will not receive the total funding required to cover all the Covid-19 related expenditure incurred. Work is continuing with SG colleagues and internally within NHS 24 to minimise this risk and identify potential mitigating options.

The breakdown of COVID-19 expenditure is as follows:

Staff Category	YTD Costs (£)	Forecast Costs (£)
Call Operators	1,326,385	3,565,776
Clinical Supervisors	681,364	1,602,277
Dental Support	-	209,870
Others	107,952	135,334
Total Staffing	2,115,701	5,513,257
Non Staff Category		
Coronavirus Helpline	719,996	1,750,884
Increased 111 Volumes	65,012	631,012
Other IT Costs	93,477	707,103
Estates Costs	85,023	1,518,021
Other Costs	80,007	80,007
Total Non Staff Costs	1,043,515	4,687,027
TOTAL COVID-19 COSTS	3,159,216	10,200,284
Funding Secured	13,339	13,339
Forecast Savings	-	83,032
TOTAL FUNDING REQUIRED	3,145,877	10,103,913