

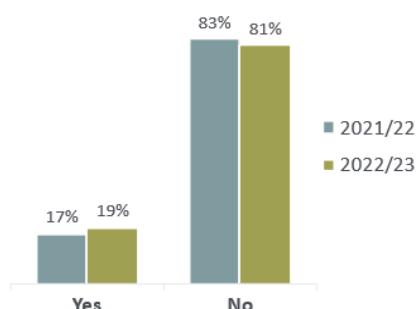
**Q1:** based on responses to third party surveys commissioned by NHS 24, what percentage of those patients abandoning a call to NHS 24 say this was because they had received the information they needed, what percentage went on to contact their GP and what percentage planned to call back at a later time. The Committee would be grateful for a comprehensive breakdown of reasons given by patients responding to these surveys for abandoning a call to NHS 24.

Over the last 3 years, NHS 24 has conducted evaluation of patient expectations and experience of using the 111 service and the impact of seasonal campaigns through winter in offering patients access to online information, advice and support and helping to navigate to the right care. Specific questions have been included to better understand the impact of proactive messaging for caller and the actions they take when they discontinue the call. It is also important to note that abandoned calls do not equate to unanswered calls as we do receive multiple calls in any day from the same callers, all of which may be answered or the majority of which may be answered. Additionally, as can be seen from the data below, there are a range of positive outcomes where callers are able to access the support and care they need. We do not record the reason for discontinuing the call.

The proportion of people who said they had ended a call is consistent with last year. Where this was the case only three in ten called back.



**Called NHS 24 and hung up/ended call before speaking with a call handler**



**What did next 2023**  
(those who had hung up/ended calls only)



Q8. Have you ever called NHS 24 on 111 and hung up/ended the call before speaking with a Call Handler?  
Q8b. What did you do next?

Base (all) 2023: 1029, 2022: 1,000  
All who hung up/ended the call 2023: 203, 2022: 168

Trend data on action taken after ending a call is shown below.



	(Jan 2023)	(Feb 2022)	(April 2021)
Called NHS 24 and hung up/ended call before speaking with a call handler	19%	17%	13%
Base size (total sample)	1,029	1,000	1,074
Tried to call 111 again later	30%	35%	32%
Called the GP practice again when reopened	25%	29%	35%
Self-care (including visited a pharmacy)	24%	21%	23%
Visited A&E	21%	29%	26%
Visited the self-help guides on NHS Inform	19%	15%	19%
Called 999	9%	11%	13%
Did nothing	10%	8%	7%
Base size (those who had ended a call)	203	168	133

**Q2:** Further to a presentation given by Dr Donald Macintyre at the NHS Scotland Conference in Glasgow yesterday, 19 June, the Committee would also be interested to receive further information regarding the uptake and effectiveness of new mental health pathways recently launched by NHS 24.

## NHS 24 Mental Wellbeing Signposting Tool

### Background

People with lived experience of mental health problems often report that finding the right support and accessing it is challenging. Recurring themes include finding trusted sources, lack of knowledge about service structures, and practical barriers such as restricted opening hours, travel time and long waiting lists. At the same time, the gap between need and the support available continues to widen.

In 2020 NHS Scotland procured national unlimited licences for a range of evidence-based and clinically governed digital mental health tools from [Silvercloud](#) which are offered to health and care staff through the national wellbeing platform, and to patients by individual health boards. So far uptake is variable and depends largely on local factors.

Careful national digital marketing combined with immediate access to evidence-based digital tools has the potential to be a highly cost-effective method of widening access and bridging the treatment gap. To explore this possibility, in early 2021 NHS 24 designed a digital mental wellbeing test of change combining social media marketing and a new [signposting tool embedded in NHSinform](#).

An iterative agile methodology was employed including user research and testing. The project is governed by the mental health programme board. The signposting tool uses two simple multiple-choice questions to assess suitability and guide users to tools for:

- Building resilience
- Better sleep
- Coping with stress
- Coping with Covid
- Coping with anger (NHS Scotland tool)



### Assessment

Initial data analytics from July 2021 demonstrated a higher-than-expected proportion of users reaching the wellbeing tool were choosing the 'I'm not coping' option and therefore needed more support than could be offered by a digital tool. User testing and a review of the marketing strategy indicated several areas for improvement and a second iteration of the campaign and signposting tool were implemented in September 2021, leading to a reduction in the number of users who chose the "I'm not coping option".

During the 2 month-long periods of active marketing (total cost £6000), traffic through the tool increased by ~500%. The most successful Facebook ad "struggling with sleep" had a low cost-per-click of £0.06 (average is £1.80) and generated a good click through rate (CTR) of 2% (average is 0.89%).

As of 1<sup>st</sup> November 2022, 26 334 people used the signposting tool and ~80% were offered an evidence-based support. NHS 24 user satisfaction was 85% "agree" or "strongly agree".



Geographical distribution of users was more closely aligned to population need for patients accessing the tools through NHS 24. This indicates that developing national digital mental health pathways has the potential to **reduce health inequalities**.

With the support of Scottish Government, NHS 24 collaborated with Bighealth to integrate Sleepio and Daylight into the signposting tool and these pathways went live in May 2023. Further digital marketing is being planned.

### Summary

The NHS 24 mental wellbeing signposting tool, when combined with digital marketing, is a highly cost-effective way of improving access to evidence-based digital mental health support. It represents a form of early intervention which has the potential to prevent deterioration and reduce health care use.

**Q3:** Detailed information about handling of calls to NHS 24 from children and young people – that is, what proportion of these calls are referred to Childline or to other sources of support outwith NHS 24.

It is important to note that it is generally a call by an adult on behalf of a child and direct contact from children remains the exception. In 2022/23, the 111 service received 291,921 calls (21% of total) for patients under 16 of which 1,380 related to the mental health hub. NHS 24 does have clear consent guidelines in place for staff for both children under 16 but also in the case of vulnerable adults.

Total child welfare referrals for 2022/23 was 4,991 and total child protection referrals was 521. These are sent to partner agencies and therefore either require a further risk assessment/support or have reached child protection requirement. NHS 24 does not refer into Childline via the 111 service, however, where relevant, patients can be signposted to Childline through NHSinform in relation to specific mental health and wellbeing, and healthy living advice and information.

Additionally, the national urgent care pathway for those self-presenting to A&E is accessed through NHS 24 111 service. For adults this can result in a referral into local flow navigation centres (FNCs) with a further clinical consultation within 4 hours. For children under 13, this timescale is 2 hours. This pathway has been effective in reducing attendance at A&E across Scotland and particularly beneficial for children where the opportunity for scheduled attendance following senior clinical consultation remotely and direct referral to minor injuries units exists.