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Covid-19: NHS 111 failed to assess some vulnerable patients during early stages of pandemic

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The national health telephone helpline NHS 111 did not always clinically assess vulnerable patients who contacted it during the early stages of the covid-19 pandemic, according to a report from a health safety watchdog.

Several concerns about the risk to patients who needed help during the pandemic were highlighted in a report¹ from the Healthcare Safety Investigation Branch published on 29 September.

The branch, which independently investigates patient safety concerns in NHS funded care across England, found several failures when it carried out an investigation into NHS 111's response to callers with covid-19 related symptoms during the early months of the pandemic (March to June 2020).

It found that half of all calls to NHS 111 in one particular month were not answered at all and some patients with underlying conditions, such as diabetes, did not receive a clinical assessment. Many covid-19 related calls were wrongly put through to NHS 111 rather than the covid-19 response service (CRS) that was established as a telephone triage service to which NHS 111 could transfer queries about the disease, the investigation found. It also revealed that the CRS system's algorithm did not allow for a patient's comorbidities to be assessed and that audio recordings were not always being made of calls to the response service, as they should have been.

Two focus groups held by the branch with families who wanted to share their experiences of calling NHS 111 for covid-19 related symptoms identified problems accessing the service and with the advice provided which contributed to delays in treatments and, in some cases, death.

The investigation detailed four patient stories. In all four of these cases, the patients had contacted NHS 111 and been advised to stay at home and self-care. Few received any face-to-face medical care, and all of them died within weeks of first contacting NHS 111.

Authors of the new report said that strong national messaging advising people with suspected covid-19 to stay at home "may have impacted on patients' willingness to seek medical advice from elsewhere, even if their condition deteriorated."

Amber Sargent, national investigator at the branch, said, "We recognise that the events in this report were from the earliest months of the pandemic and that systems had to be put in place at incredibly short notice.

"However, while we know there has been much learning and improvement since March 2020, the stories the families told us during the investigation were incredibly moving and emphasised the importance of future planning."

A spokesperson for NHS England said, "NHS 111 played a vital role in managing the response to the pandemic and despite unprecedented demand, answering over two million calls in March 2020 alone, both 111 and the CRS referred more than half a million patients for further clinical assessments—including in face-to-face settings.

"Call handlers followed guidance set out by Public Health England which was regularly updated as the understanding of covid-19 improved, and the NHS has captured learning throughout the past two years to contribute to the response to any future pandemics."

¹ Healthcare Safety Investigation Branch. NHS 111's response to callers with covid-19-related symptoms during the pandemic. 29 September 2022. www.hsi.org.uk/investigations-and-reports/response-of-nhs-111-to-the-covid-19-pandemic.