A three-digit number for non-emergency healthcare services

The British Dental Association (BDA) is the professional association and trade union for dentists practising in the UK. Our 23,000 dentist and dental student members are engaged in all aspects of dentistry including general practice, salaried services, the armed forces, hospitals, academia and research.

The majority of our members work within the NHS. The BDA has a patient-focused vision for dental healthcare in England and believes that available NHS services should be easily accessible to all patients.

The BDA believes that the proposed non-emergency health care service represents a justified use of a three-digit number

The BDA welcomes this consultation and supports the introduction of a three-digit non-emergency number for accessing healthcare services.

The use of the ‘999’ emergency number has rapidly increased, especially for non-emergency issues. This wastes valuable time and resources. That the public is often confused about where to go to for help on health issues and feels that if they cannot get the attention needed, their first response is to dial the 999 number for further assistance.

This highlights the perception problem between the patient and the NHS. Too often, patients are unaware of how to contact the NHS and the most appropriate service for their needs. Research shows that the number of dental patients looking for treatment in A&E departments has increased dramatically due to many patients not knowing where they should go for treatment. Most patients are unaware of the out-of-hours service provided by their Primary Care Trust and many are not aware of its role, so they do not understand that it
is the place to obtain information about accessing NHS dentistry. A new non-emergency phone number would help patients obtain the right information and avoid the need to resort to the A&E department for non-emergency care.

Many Primary Care Trusts have changed their names, using a standard model: ‘NHS (followed by the location)’ following the recommendations of the Darzi Next Stage Review. The intention was to raise the profile of the PCT within the local area in order to make the population more aware of how services in their area were made available. Whilst the BDA agrees that it is important for the PCT to have a profile amongst the population, it does not believe that a well-advertised PCT is a substitute for ensuring that patients are easily able to access healthcare services in their area. Understanding the structure of the local healthcare system should not be a prerequisite to accessing treatment and it would disadvantage lower socio-economic groups who tend to have fewer social and material resources. A well-publicised three-digit telephone number would be a step in the right direction.

We believe that all information about accessing services should be available via the new three-digit service and that the PCT should not remain as ‘another option’. This should reduce the burden of enquiries for PCTs.

The existing NHS Direct telephone service must ensure that operators and the website make the correct dental information available, in order to prevent confusion about what non-emergency dental services are available within working hours. Outside working hours, a new three-digit number should make information on emergency treatment quickly and easily available. It is anticipated that this would reduce stress on the 999 call infrastructure.

In general, if the three-digit number is introduced, it would be seen as a comfort for the public and enable them to feel that their opinions are important and considered. It would also increase their awareness of the kind of services the NHS offers.

**111 is the best choice for the proposed service**

The BDA believes that 111 is the best choice of digits for the proposed service and will be easily remembered.
**Tariff options and advertising**

The BDA believes that the appropriate tariff option for a three-digit number is Option 1. This would mean that the call would not be charged to the caller and so would remove any barriers to accessing the service that might be faced by lower socio-economic groups. Should a charged number be introduced, the outcome may ultimately be counterproductive; rather than dialling the 111 non-emergency number, patients may continue to dial the free 999 emergency number.

The BDA believes that there needs to be clear communication between the NHS and the public about the availability of NHS services. Whilst a new three-digit number has the potential to achieve this, it needs to be effectively communicated to the public. The differences between this service and the NHS Direct service also need to be carefully and clearly communicated.

**Conclusion**

The BDA welcomes the consultation on a three-digit number for non-emergency NHS services and sees the potential of such a service to improve the understanding of the public about which NHS services are available and how to access them. Such a service needs to be carefully communicated and widely advertised, in order to raise awareness.