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4th August 2022

Email:

Dear,

I am writing in response to your enquiry under the Freedom of Information Act 2000 (FOIA) reference FOI 220703.

You requested the following information, please also see our response below:

2. How and who is funding the 111 service? (CCG, Local Trust, DOH Directly)

The service is funded by the regional Clinical Commissioning Groups (CCG) through an NHS Standard Contract. The CCGs ceased to exist at the end of June and we are now funded via Integrated Care Boards (ICBs), which in turn is funded by NHS E. ICBs are responsible for remunerating services that have been commissioned and serving the population/region that they are responsible for. Kent, Medway and Sussex 111 are funded by NHS Sussex ICB and NHS Kent & Medway ICB, with NHS Kent and Medway ICB as the lead commissioning ICB.

3. Which part of the service is contracted out? Who run what?

SECamb sub-contract part of the service provision to Integrated Care 24 (IC24). IC24 are sub-contracted to provide 20% of front-end call handling capacity and supply of 24/7 GP oversight and ANPs to the Clinical Assessment Service (CAS).

4. How are IC24 connected? Is this a contract?

Yes, it is a contract

How is communications between 111 and these urgent treatment centres and out of hours GPS and local GPS completed?

IC24 are connected under the terms of the sub-contract. Communications between 111 and downstream providers are agreed and ongoing with SECamb and commissioners.

5. Who has overall responsibilities/safe guarding of each service?

The ICBs and NHS England have statutory responsibilities for ensuring safe systems of care that safeguard children and adults at risk of abuse and neglect. Throughout all practice the principles of the Duty of Candour and the Duty to Protect will apply. ICBs are responsible for ensuring that all commissioned health services effectively discharge their contribution to safeguarding promoting the welfare of children and protecting adults at risk across health providers. Central to this responsibility is ensuring that commissioning arrangements clearly specify safeguarding expectations and responsibilities in contracts. Monitoring will also be supported by and linked to the outcome of CQC safeguarding inspections.

However, as specified in “NHS England and NHS Improvement’s Safeguarding Children, Young People and Adults at Risk in the NHS: Safeguarding Accountability and Assurance Framework” in “3.1 Safeguarding – the context”: “Safeguarding is firmly embedded within the core duties of all organisations across the health system. However, there is a distinction between providers’ responsibilities to provide safe and high-quality care, and commissioners’ responsibilities to assure themselves of the safety and effectiveness of the services they have commissioned. The context of safeguarding continues to change in line with societal risks both locally and nationally, large scale inquiries and legislative reforms. Fundamentally, it remains the responsibility of every NHS-funded organisation, and each individual healthcare professional working in the NHS, to ensure that the principles and duties of safeguarding children and adults are holistically, consistently and conscientiously applied; the well-being of those children and adults is at the heart of what we do.

I hope you find this information of some assistance.

If for any reason you are dissatisfied with our response, kindly in the first instance contact Caroline Smart, Head of Information Governance via the following email address:

FOI@secamb.nhs.uk

Yours sincerely

**Freedom of Information Coordinator
South East Coast Ambulance Service NHS Foundation Trust**