

**NHS 111/IUC Commissioners
and Providers**

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Dear colleague

Integrated Urgent Care Key Performance Indicators 2019

We wrote to you in October to ask you to review the new IUC Aggregate Data Collection (ADC) document which will support the collection of data for the new IUC KPIs to be introduced in April 2019. We are seeking approval for the collection of the data items for the ADC and are working with providers to finalise definitions for them.

The KPIs have been designed to measure the performance of providers across the whole of integrated urgent care. Although some KPIs will be attributable to a single organisation, many will be achieved by more than one organisation working together. The KPIs should be considered as a set reflecting the different aspects of the service, no single indicator has predominance over another.

The IUC KPIs have been developed over many months and during that time we have listened to comments from commissioners and providers to ensure they are clearly understood.

The new data collection will take place in the following order;

- January 2019: start collecting the ADC via the Strategic Data Collection Service (SCDS)
- Following start of new data collection, we will discontinue the existing IUC MDS collection, so providers will only ever be submitting data for one monthly collection
- Once the new data collection is established, we will discontinue the existing weekly 111 MDS and introduce a new weekly collection, which will be a subset of the items in the new IUC ADC.
- The new collection will be used to monitor performance against the new KPIs from 1st April 2019.
- Prior to the introduction of the KPIs it is essential that commissioners ensure that the collection of data for the existing MDS collections (NHS 111 and IUC) and the future ADC are in place across all IUC providers. This was previously outlined in the IUC Service Specification (2017). If any commissioner cannot

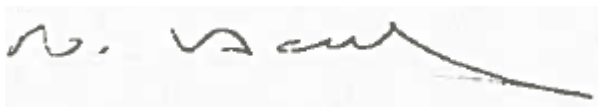
meet this commitment they should contact the central IUC team at the above email address without delay.

Following their introduction, we intend to closely monitor KPI achievement to ensure that service standards are maintained but also to understand if the target levels are appropriate. For some KPIs target levels have been set at a level which reflects the future development of service areas, other KPIs are simply a continuation of current targets.

Commissioners and providers need to be jointly responsible for KPI achievement, it is the performance of the whole urgent and emergency system which we seek to maintain and improve for the benefit of patients.

These KPIs are the national standards by which IUC should be measured, as such the KPIs should be referenced in provider contracts and commissioners should hold providers to account for their achievement. Commissioners should not penalise a provider for non-achievement where a target is developmental, in particular KPI 8 will not be achievable using the current NHS Pathways CDSS. Other targets will need to be monitored to establish whether they have been set at the correct level, therefore commissioners should take this into account and not apply financial penalties to a target which has been newly established i.e. KPIs 3 to 11. With the exception of KPI 8, commissioners ensure all targets are met. We will continue dialogue with commissioners and providers to understand if any future KPI changes are required.

Yours sincerely

A handwritten signature in black ink, appearing to read 'N. Hall', with a long horizontal stroke extending to the right.

Nick Hall

Head of Integrated Urgent Care Delivery
Operations & Information Directorate