

## Data Quality - IUCADC June 2019

# IUC ADC data for June 2019 were revised on 13 December 2019 in line with NHS England Analytical Service team's <u>revisions policy</u>. Some comments in this document will no longer be relevant where they refer to figures that have changed since first publication in August 2019.

Data for the IUC ADC are provided by lead data providers for each integrated urgent care service in England. It is the responsibility of commissioners of an IUC service to identify lead data providers and ensure that data are supplied each month. While lead data providers are responsible for collating and coordinating information for IUC ADC, they are not necessarily contracted to deliver all NHS 111 and out of hours services in the contract area. Integrated Urgent Care is provided by a variety of organisations, including ambulance services, private companies, not for profit organisations and NHS Trusts.

The quality of data is therefore dependent upon all parts of the IUC service supplying data to the relevant lead data provider. This document sets out lead data providers' comments about the quality of data supplied.

#### **General Comments**

- The development of a new ADC reporting package in the Adastra Clinical Patient Management System may have resulted in some issues with this month's returns. This means that data from the following Lead Providers may be subject to revision in future months: IoW, SCAS, LCW, Vocare, LAS, BrisDoc, DHU. Comments about specific data items affected by this change are listed below where provided.
- Care UK: In West Midlands, the full face to face element of the IUC service is not provided, they do not use elements such as accepting calls from Ambulance Service and are unable to map Service Advisor activity to all disposition types. A full IUC Service is not yet in place in Outer NW London, Hillingdon and Gloucestershire. NE Essex & Suffolk and Surrey Heartlands do not use elements such as accepting calls from Ambulance Service, are unable to map Service Advisor activity to all disposition types and are still working on the face to face element of the IUC service.
- **Dorset HealthCare**: Transitioning to new IT system during April to June all figures should be treated with caution during this time.
- **NEAS**: Reporting has been disrupted following the implementation of a new integrated CAD system, resulting in incomplete data, mainly affecting clinician interactions.

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## Comments about quality of data used in KPIs

KPI	Lead Data Provider	Comment
1	YAS	Decrease since last month is due to incorrect abandonment figures in May which will be corrected in the revisions window.
3	HUC	Now includes CAS GP call backs which appear to be dragging the performance downward.
	IoW	Denominator includes all offered call backs (including for Dx46 82,96) by (111) Clinical Advisors - plus DoS referrals to PHL, DAS and Pharmacist (CAS Clinicians services) - as all of these will receive a call from a Clinician.
	LAS	The service runs a minimum target of 15 mins so we expect the number of call backs in 10 mins to be low considering the target is for a 15 min call back as per both contracts.
4	Care UK	An issue was identified with data submitted for Surrey Heartlands in previous months which will be revised in due course.
	IoW	Awaiting IUC service development by commissioners and for local services to be categorised correctly in DoS service types. Reporting to extract 'booked appointments' is still to be developed (currently not high priority as 'UTC' not locally set up yet).
	SECAmb	Reporting capability still being developed.
5	IoW	Awaiting IUC service development by commissioners and for local services to be categorised correctly in DoS service types. Any figures reported will be for mainland UTC - we are NOT able to 'book appointments' into mainland services. Reporting to extract 'booked appointments' is still to be developed (currently not high priority as 'UTC' not locally set up yet).
6	BRISDOC	Operational pressures due to resourcing issues means fewer category 3 or 4 ambulance dispositions have been revalidated.
	NWAS	We have no way of checking if an ambulance has been re-valuated once it has been passed to the 9's. We do not revalidate ambulances.
7	Dorset HealthCare	Nothing provided for ADC 100 due to a data quality issue in new IT system.
	NWAS	Information not collected on ED revalidation.
10	Care UK	No prescription medication is recorded as being issued in Hillingdon or Gloucester.
	loW	Now including all DoS referrals to Dos service type 'Pharmacist Urgent Prescription' - so that we pick up referrals to NUMSAS/PURM services locally and in other regions.
12	IoW	Numerator includes the time period from 'call connect' to the time 'final disposition reached' within the 111 environment only. Unable to extend this to include the times of the assessment outcomes with our local or remote IUC CAS services at this time. Denominator appears to show that we are triaging more calls than we are taking due to problems with calling 111 through the 'Starline' process from Hand portable radios when being used as phones.
13	Dorset Healthcare	No data provided for ADC 128, 129, 138 & 139 as data split between two IT systems; new IT system will enable recording of all four items from Q2.

	loW	Unable to report - Awaiting IUC service development by commissioners and for services to be categorised correctly in DoS service types.
	LAS	1 hour requirement not in the SE London contract.
	NWAS	Unable to provide data. We do not receive any feedback once the patient has been referred on.
14	loW	Unable to report - Awaiting IUC service development by commissioners and for services to be categorised correctly in DoS service types.
	LAS	1 hour requirement not in the SE London contract.
	NWAS	Unable to provide data. We do not receive any feedback once the patient has been referred on.
15	IoW	Denominator appears to show that we are triaging more calls than we are taking due to problems with calling 111 through the 'Starline' process from Hand portable radios when being used as phones.

## Comments about quality of other data items

Data Item	Lead Data Provider	Comment
2	LAS	SE London has no Access yet to IVR data.
4	LAS	SE London data should be available next month following the
		implementation of new telephone service.
7 to 8	NWAS	No other staff type answers front end calls.
9	LAS	Not applicable in SE London.
	NWAS	We do not receive ambulance calls.
11	NWAS	We do not count unscheduled IUC attendances.
	SCAS	We don't have any of these.
22	IoW	We are currently using the cohort as per item 19 for reporting this metric in the spirit of IUC reporting. This includes cases where a warm transfer is NOT 'required' - Dx46, Dx82 and Dx96 - and a less urgent call back is required. The inclusion of call backs for these Dx codes skews the figures compared to 111 MDS metrics. We cannot include 'remote CAS' clinician call backs at this time, as this data is not currently available to us. We are also having some issues extracting the clock stop time status ( <i>when the clinician first attempts calling back</i> ). Until we have resolved this we are using the triage start time for the 111 clinician ('pathways clinical advisor start time').
25	LAS	the IUC CAS services to obtain ' <i>when the clinician first attempts</i> <i>calling back</i> ' time status for our remote CAS services is ongoing. SE London data should be available next month following the
-		implementation of new telephone service.
29	NWAS	No other distinguishable staff type.
31 to 33	NWAS	Staff types not available at NWAS111.
32	SCAS	Null.
32 to 35	loW	No data as these clinician types are not part of our CAS.
35	NWAS	Paramedic Staff type not distinguishable.
36	NWAS	Staff type not available at NWAS111.
	SCAS	Null.
37	NWAS	Pharmacist Staff type not distinguishable.
	SCAS	Null.
39	IoW	Only includes calls transferred to 111 Clinical Advisors as they are currently the only clinicians that handle a live/warm transfer.
42	LAS	Unable to extract data for SE London and NE London.
	NWAS	Service not offered - Clinical advice is only given by a clinician.
44 to 56	loW	Nil return as no 'service advisor' staff type employed in IOW IUC CAS.
45 to 48	NWAS	SA's cannot offer these dispositions.
51 to 52	NWAS	SA's unable to recommend these services through triage.
56	NWAS	SA's unable to recommend other services through triage.
83 to 95	loW	The service trialled a new CAS service 'GP in the HUB' for one day in June - there were 24 calls handled. The outcomes are not currently

Source: Integrated Urgent Care Aggregate Data Collection (IUC ADC), NHS England

		logged in a way that reporting could categorise appropriately for IUC reporting so they have not been included.
97	NWAS	Information not collected.
100	NWAS	Information not collected.
105	NWAS	Not recorded.
108	IoW	No direct booking into in hours GP services yet.
	LAS	This service not active yet in NE London.
115	NWAS	Information not fedback or collected from UTC.
120 to	IoW	Unable to report - Awaiting IUC service development by
140		commissioners and for services to be categorised correctly in DoS
		service types.
	NWAS	Information not fedback or collected.
	SCAS	NULL. Cannot get this data yet. Work needs to happen with our CAS.