

Data Quality - IUCADC November 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. Where figures reflect activity by more than one IUC service provider, there may be wide variation in the underlying performance of individual parts of the service.

This document sets out lead data providers' comments about the quality of data supplied, including reasons for changes since last month.

General Comments

- The CAS and IUC unit at **Dorset HealthCare** switched over to a new system (SystemOne) on 14 October. This month's return has been produced by joining data from different systems which has led to some data quality issues. Current aim is to be in a position to return a full set of data from a single IT system by mid-January.
- **Vocare** are experiencing issues with a new reporting package in the Adastra Clinical Patient Management System. This month they were able to provide telephony data only. Impacts data for the following contract areas: **Staffordshire, South West London, Cornwall, and BaNES, Wiltshire & Swindon.**
- Dx code mapping guidance was revised this month which may affect data items 20-21, 45-56, 58-69, 71-82 and 96.
- From November 2019, as NUMSAS was decommissioned and CPCS established, lead data providers were advised to map urgent medication referrals via CPCS to the NUMSAS data item 119 "Number of calls where a referral to NUMSAS was made for prescription medication". This definition will be changed in the next version of the ADC.
- The IUC ADC specification was amended in July to clarify that calls should only be counted once in data items 44 to 95 and be attributed to the staff type that handled the final disposition within the service. **SECamb** have highlighted some continuing double-counting while systems are aligned to this revised guidance.

KPI	Lead Data Provider	Comment
1	LAS	Calls abandoned doubled in North East London due service issues on a number of days.
2	LAS	Calls answered in 60 seconds dropped by 20% in North East London due to service issues on a number of days.
3	Dorset HealthCare	No data from SWAST.
	LCW	Issues with Adastra system reports mean there is a mismatch between cases which require call back and the cases being marked as being called back within 10 mins. Zeros have been submitted this month with a hope to resubmit in a future revision window
4	Dorset HealthCare	No data from SWAST.
	IoW	We do not have an actual IUC Treatment Centre - I am waiting for confirmation of what local services should be included in our IUC TC totals (e.g. GP OOH) as per the 'DoS Service Type Mapping' document.
5	Dorset HealthCare	Can't report due to SWAST data quality issue.
	IoW	Isle of Wight has now gone live with their UTC service.
	LAS	A contributory factor to the reduction in appointments booked for UTCs in South East London was that Bexley UTC appointments were unavailable on the DoS. This has now been addressed and should improve next month.
7	Dorset HealthCare	Can't report due to SWAST data quality issue.
8	Dorset HealthCare	No data from SWAST.
9	Dorset HealthCare	No data from SWAST.
10	Dorset HealthCare	No data from SWAST.
	IoW	Now includes all DoS referrals to DoS services with Pharm+: in the service name.
	NWAS	Numerator includes calls ending in dx80, 85, 86 and 87 which were NUMSAS.
	SCAS	Increase is due to a massive uptake in CPCS & Pharm+ Services
11	Dorset HealthCare	No data from SWAST.

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

12	LCW	Denominator - Number of calls where person triaged is affected by issues in Adastra reporting system: <input type="checkbox"/> unable to account for points a) and d) for NHS England's definition of triaged, therefore it is assumed that this criteria is met. <input type="checkbox"/> If a case goes through Pathways Module Zero or the Critical Questions in Odyssey then a call is counted as Life Threatening conditions are addressed during the call, therefore meeting the criteria for definition point b) <input type="checkbox"/> For non-pathways triages we regard the outcome as a disposition, however, this cannot be directly mapped to the dispositions-based data items due to the level of customisation, and dynamic configuration. Due to this we are able to capture that the consultation has been performed but we currently have to map those consultations to the other category.
13	Dorset HealthCare	SWAST report doesn't pick up necessary data.
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Comments about quality of other data items

Data Item	Lead Data Provider	Comment
4 to 8	SCAS	Pro-rata Calls answered by Calls Triaged by Skillset.
6	Dorset HealthCare	Data not submitted due to quality issues.
7 to 8	NWAS	No other staff type answers front end calls.
9	NWAS	We do not receive ambulance calls.
10	NWAS	IUC CAS only.
11	NWAS	We do not count unscheduled IUC attendances.
	SCAS	We don't have any of these.
14 to 16	NECS	LCD Dental do not have the ability to breakdown calls Q014-Q016.
	SECamb	Unable to produce and provide abandoned calls subsets for items Q015 and Q016.

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19	SCAS	Figures are based on definitions used previously in IUC MDS and made up of Calls Referred to Clinicians & Speak/Contact Primary care.
24	IoW	Includes all relevant 111 calls but not all telephone calls come in via 111 designated lines. We therefore appear to be triaging more calls than we are taking. There are problems with calling 111 through the 'Starline' process from Hand portable radios when being used as phones.
29	NWAS	No other distinguishable staff type.
30	NWAS	Data supplied in accordance with definition 5.22 Calls to a Clinician in NHS 111 MDS.
31 to 33	NWAS	Staff types not available at NWAS111.
31 to 38	NECS	LCD Dental do not have the ability to breakdown calls Q031-Q038.
32	SCAS	Null.
34	NWAS	Includes estimates for clinical contacts relating to external clinicians/referrals. Estimation - 22558 known NWAS CA, 38557 unknown.
35	NWAS	Paramedic Staff type not distinguishable.
35 to 36	SCAS	Null.
36	NWAS	Staff type not available at NWAS111.
37	NWAS	Pharmacist Staff type not distinguishable.
38	NWAS	MTS clinician at NWAS.
42	NWAS	Service not offered - Clinical advice is only given by a clinician.
43	Dorset HealthCare	Data not submitted due to quality issues.
44	BRISDOC	We are aware that due to the definition updates there is double counting for items 44, 57 and 70. These currently include those that are sent to the CAS that are also counted in item 83. Therefore, items 44, 57 and 70 are higher as they include those whose final dispositions were by non-pathways clinicians. We will be implementing changes going forward to remove those that are being double counted and will be updating previous submissions when there is an opportunity to.
44 to 69	SECAmb	These data items include some interim dispositions by SAs and HAs (ie double-counting) where items 70-82 (Clinical Advisor) represent the final disposition even though some of these cases will also have been counted within SA and HA.
45 to 48	NWAS	SA's cannot offer these dispositions.
52	NWAS	SA's unable to recommend pharmacist through triage.
55	NWAS	SA's unable to recommend self-care through Triage.
57	BRISDOC	We are aware that due to the definition updates there is double counting for items 44, 57 and 70. These currently include those that are sent to the CAS that are also counted in item 83. Therefore, items 44, 57 and 70 are higher as they include those whose final dispositions were by non-pathways clinicians. We will be

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		implementing changes going forward to remove those that are being double counted and will be updating previous submissions when there is an opportunity to.
	Dorset HealthCare	Data not submitted due to quality issues.
58	IoW	Now includes the new Ambulance Dx codes Dx013 Dx014 Dx016 Dx0162 Dx017 Dx018. Note: we are having an issue with the use of Dx336 (Paramedic requesting call back from Healthcare Professional within 30mins) where cases are ending on this 'mid' code but are sent outside of the 111 service.
61	Dorset HealthCare	Data not submitted due to quality issues.
62	IoW	Use of the new v19 Dx code mapping document has meant that some cases have moved from E62 to E68 (self-care) - as expected.
63	Dorset HealthCare	Data not submitted due to quality issues.
66 to 69	Dorset HealthCare	Data not submitted due to quality issues.
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71	IoW	Now includes the new Ambulance Dx codes Dx013 Dx014 Dx016 Dx0162 Dx017 Dx018. Note: we are having an issue with the use of Dx336 (Paramedic requesting call back from Healthcare Professional within 30mins) where cases are ending on this 'mid' code but are sent outside of the 111 service.
75	IoW	Use of the new v19 Dx code mapping document has meant that some cases have moved from E75 to E81 (self care) - as expected.
81	IoW	Use of the new v19 Dx code mapping document has meant that some cases have moved from E75 to E81 (self care) - as expected.
87	NECS	LCD GPOOH: taken as all PCC and HV cases, rest are all cases closed over the phone after clinical triage.
97-98	NWAS	No feedback given on ambulance revalidation, information not collected.
98	NECS	Time is not captured by YAS or LCD.
100 to 101	NWAS	Information not collected.
101	NECS	Time is not captured by YAS or LCD.
105	NWAS	Not recorded.
106	NWAS	5067 Directly booked by NWAS 111, 15364 are estimated based on measure as agreed with Blackpool Commissioners. For example, the

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		total referrals to provider, multiplied by estimated percentage, equals the approximate referrals to a face to face appointment.
109	NWAS	All GP OOH included, bookable and non-bookable excluding NUMSAS due to the new direct booking estimation.
110	NWAS	4140 GP Extended Directly booked by NWAS 111, 15364 based on measure as agreed with Blackpool Commissioners. For example, the total referrals to provider, multiplied by estimated percentage, equals the approximate referrals to a face to face appointment.
111	NWAS	IUC, MIU & WIC Service Type.
113	NWAS	UTC & UCC Service Type.
115	NWAS	Information not fed-back or collected. Work in Progress.
117	NWAS	Total prescription medication, calls ending in dx80, 85, 86 and 87.
118	NWAS	Calls ending in dx80, 85, 86 and 87 which are not NUMSAS (NUMSAS no longer in use).
	SCAS	NULL. Cannot get this data yet. Work needs to happen with the CAS.
119	NWAS	
120 to 140	NWAS	Information not fed-back or collected. Work in Progress.
	IoW	Ongoing development.
	SCAS	NULL. Cannot get this data yet. Work needs to happen with the CAS.

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