

IUC ADC February 2021 - provider comments

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, where they have been supplied, about the quality of data returns, reasons for changes since last month and reasons for differences to similar data items in the NHS 111 Minimum Data Set (MDS).

IUC ADC data for August 2019 to May 2020 inclusive were revised on 14 January 2021. Some comments in the Data Quality Statements for those months may no longer be relevant where they refer to figures that have since been revised.

BRISDOC

Comments for 111A15 Bristol, North Somerset & South Gloucestershire:

Data item	Description	Comments
Q013	Number of calls abandoned	Overall call volume was down this month, resulting in a return to higher call answering performance compared to January.
Q017	Total time to call answer	

DEVON DOCS

Comments for 111A16 Devon:

Data item	Description	Comments
Q013	Number of calls abandoned	Decrease since last month was due to only 28 days of activity for February and there being five weekends in January. During January there was also an exceptionally high volume of Covid related absence, mainly in the Exeter Contact Centre.
Q017	Total time to call answer	Linked to the above.

Comments for 111AH8 Somerset:

Data item	Description	Comments
Q013	Number of calls abandoned	This decrease was due to only 28 days of activity for February and there being five weekends in January. Additionally, more staff resources were available.
Q017	Total time to call answer	Linked to the above.

DHU

The ADC submission made by DHU only contains data from DHU111 and the other urgent care arms of DHU Health Care. At present this excludes data from other CAS providers such as the LCHS CAS (in Lincolnshire) and the NEMS CAS (in Nottinghamshire).

Comments for 111AA5 Derbyshire:

Data item	Description	Comments
Q046 + Q059 + Q072	Number of callers recommended to attend an ED	Difference in equivalent data item in the 111 MDS appears to be due to a difference in Dx code mapping for some activity. Notably, this relates to DxCode Dx322 - Speak to a Clinician from our service immediately - Ref used Emergency Treatment Centre Disposition. This DxCode is an interim code which has for the MDS been historically mapped to Attend Another Service. However, this is mapped to ED for the ADC. Additionally, where referrals are to Derby CAS or UTCs with a Dx02/Dx03 code, they are mapped to Attend ED in the ADC but in the MDS are mapped to either Attend Primary Care or Attend Another Service.
Part of KPI 4: Q112/Q111	Appointments with an IUC Treatment Centre / DoS selections IUC Treatment Centre	Continuing decrease in number of DoS selections to IUC Treatment Centres resulting in decrease in volume of booked appointments.
KPI 12: Q023/Q024	Time to telephone assessment outcome / Calls where person triaged	The increase in time to reach a telephone assessment outcome may be linked to the provision of support to two contracts that commenced mid-January. here were also days in the latter half of February where the number of calls offered was higher than expected.

Comments for 111AC8 Leicestershire & Rutland:

Data item	Description	Comments
Q046 + Q059 + Q072	Number of callers recommended to attend an ED	Difference in equivalent data item in the 111 MDS appears to be due to a difference in Dx code mapping for some activity. Notably, this relates to DxCode Dx322 - Speak to a Clinician from our service immediately - Refused Emergency Treatment Centre Disposition. This DxCode is an interim code which has for the MDS been historically mapped to Attend Another Service. However, this is mapped to ED for the ADC. Additionally, where referrals are to LLR CAS or UTCs with a Dx02/Dx03 code, they are mapped to Attend ED in the ADC but in the MDS are mapped to either Attend Primary Care or Attend Another Service.
KPI 12: Q023/Q024	Time to telephone assessment outcome / Calls where person triaged	The increase in time to reach a telephone assessment outcome may be linked to the provision of support to two contracts that commenced mid-January. here were also days in the latter half of February where the number of calls offered was higher than expected.

Comments for 111AA2 Lincolnshire:

Data item	Description	Comments
Q046 + Q059 + Q072	Number of callers recommended to attend an ED	Difference in equivalent data item in the 111 MDS appears to be due to a difference in Dx code mapping for some activity. Notably, this relates to DxCode Dx322 - Speak to a Clinician from our service immediately - Refused Emergency Treatment Centre Disposition. This DxCode is an interim code which has for the MDS been historically mapped to Attend Another Service. However, this is mapped to ED for the ADC. Additionally, where referrals are to Lincs CAS or UTCs with a Dx02/Dx03 code, they are mapped to Attend ED in the ADC but in the MDS are mapped to either Attend Primary Care or Attend Another Service.

KPI 12: Q023/Q024	Time to telephone assessment outcome / Calls where person triaged	The increase in time to reach a telephone assessment outcome may be linked to the provision of support to two contracts that commenced mid-January. here were also days in the latter half of February where the number of calls offered was higher than expected.
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Comments for 111AC7 Milton Keynes:

Data item	Description	Comments
Q046 + Q059 + Q072	Number of callers recommended to attend an ED	Difference in equivalent data item in the 111 MDS appears to be due to a difference in Dx code mapping for some activity. Notably, this relates to DxCode Dx322 - Speak to a Clinician from our service immediately - Refused Emergency Treatment Centre Disposition. This DxCode is an interim code which has for the MDS been historically mapped to Attend Another Service. However, this is mapped to ED for the ADC. Additionally, where referrals are to MK CAS with a Dx02/Dx03 code, they are mapped to Attend ED in the ADC but in the MDS are mapped to either Attend Primary Care or Attend Another Service.
Part of KPI 4: Q112/Q111	Appointments with an IUC Treatment Centre / DoS selections IUC Treatment Centre	Figures are skewed by activity on Saturday 13 th February, when 17 cases that had a DoS for IUC were not booked to IUC. If this day was excluded, then the IUC Treatment Centre booking figure would be over 51% for the month.
KPI 7: Q100/Q099	Calls given an ED disposition that are revalidated / calls given an ED disposition	Work is being undertaken to include MK ED validations within the IUC ADC submissions in preparation for the update to the ADC in April 2021.

Comments for 111AC6 Northamptonshire:

Data item	Description	Comments
Q046 + Q059 + Q072	Number of callers recommended to attend an ED	Difference in equivalent data item in the 111 MDS appears to be due to a difference in Dx code mapping for some activity. Notably, this relates to DxCode Dx322 - Speak to a Clinician from our service immediately - Refused Emergency Treatment Centre Disposition. This DxCode is an interim code which has for the MDS been historically mapped to Attend Another Service. However, this is mapped to ED for the ADC. Additionally, where referrals are to Northants CAS or UTCs with a Dx02/Dx03 code, they are mapped to Attend ED in the ADC but in the MDS are mapped to either Attend Primary Care or Attend Another Service.
KPI 12: Q023/Q024	Time to telephone assessment outcome / Calls where person triaged	The increase in time to reach a telephone assessment outcome may be linked to the provision of support to two contracts that commenced mid-January. here were also days in the latter half of February where the number of calls offered was higher than expected.

Comments for 111AA4 Nottinghamshire:

Data item	Description	Comments
Q046 + Q059 + Q072	Number of callers recommended to attend an ED	Difference in equivalent data item in the 111 MDS appears to be due to a difference in Dx code mapping for some activity. Notably, this relates to DxCode Dx322 - Speak to a Clinician from our service immediately - Refused Emergency Treatment Centre Disposition. This DxCode is an interim code which has for the MDS been historically mapped to Attend Another Service. However, this is mapped to ED for the ADC. Additionally, where referrals are to Notts CAS or UTCs with a Dx02/Dx03 code, they are mapped to Attend ED in the ADC but in the MDS are mapped to either Attend Primary Care or Attend Another Service.

KPI 12: Q023/Q024	Time to telephone assessment outcome / Calls where person triaged	The increase in time to reach a telephone assessment outcome may be linked to the provision of support to two contracts that commenced mid-January. here were also days in the latter half of February where the number of calls offered was higher than expected.
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DORSET HC

No comments received for 111A14 Dorset.

HUC

Comments for 111AC5 Cambridgeshire & Peterborough:

Staffing was better in February than January because the service was less impacted by Covid within HUC call centres. There was far less need for cross site working for resilience this month compared to January 2021. Decrease in call volumes since last month has also helped to improve performance.

Comments for 111AB2 Hertfordshire:

We saw an improvement in staffing levels in February compared to January due to a Covid outbreak impacting January.

Comments for 111AG7 Luton & Bedfordshire:

The increased performance on call answering stats and abandonment rates are due to recovery following a COVID outbreak in our call centres that affected January performance.

Comments for 111A13 West Essex:

We saw an improvement in staffing levels in February compared to January due to a Covid outbreak impacting January.

IC24

Comments for 111AH4 Mid & South Essex:

Data item	Description	Comments
Q013	Number of calls abandoned	During Feb, whilst Covid absence was a lot lower, workforce continued to be impacted by Covid.
Q017	Total time to call answer	
Part of KPI 4: Q112/Q111	Appointments with a IUC Treatment Centre or home residence / DoS selections IUC Treatment Centre	Work on DoS audit data resulted in a big decrease after the implementation of "select" first DoS functionality was put in place. Figures for earlier months will be updated in the next ADC revisions window. Currently, we cannot direct book into our own OOH's services, only In-Hours.
KPI 5: Q114/Q113	Number of calls where caller given an appointment with a UTC / DoS selections UTC	This should include bookings direct into DoS Service Types: 'Urgent Treatment Centre (UTC)', 'Emergency National Response' and 'Urgent Care'. There are 3 UTC's that we could book into but they don't fall in to our STP and one of them doesn't accept direct bookings. From a commissioning perspective the UTC numbers will always be very low for mid and south Essex as we do not have any UTC's in our area. Small numbers recorded refer to out of area/boundary patients.

Comments for 111AG8 Norfolk including Great Yarmouth and Waveney:

Data item	Description	Comments
Q013	Number of calls abandoned	Decrease this month is due to lower call demand.
Q017	Total time to call answer	

Part of KPI 4: Q112/Q111	Appointments with an IUC Treatment Centre / DoS selections IUC Treatment Centre	Update in UTC and DoS Types and this is only looking at bookable and not including the non-bookable. Some cases have a disposition mapped to non-bookable but it does have an appointment facility on the DoS. We have added in some additional work around IUC bookings/Home Residence, so this has improved slightly.
Q114/Q113	Appointments with a UTC / DoS selections UTC	Norfolk doesn't have a UTC, hence low numbers. Small numbers recorded refer to out of area/boundary patients.

IOW

Comments for 111AA6 Isle of Wight:

Data item	Description	Comments
Q017	Total time to call answer	Improvement this month is due to increased staffing since January.
Part of KPI 4: Q112/Q111	Appointments with a IUC Treatment Centre or home residence / DoS selections IUC Treatment Centre	This will increase slightly when more appointments are available after some system configuration takes place in April so the UTC / GPOOH which share our Adastra Platform can identify the booked cases easier.
Q108/Q107	Appointments with an in-hours GP practice / DoS selections in-hours GP practice	Increase since last month is due to having at least a week of Contingency in January due to operational issues. This resulted in close to 1,000 calls being answered by other providers and meant we did not have full control of booking into GP surgeries during that time.
KPI 7: Q100/Q099	Calls given an ED disposition that are revalidated / calls given an ED disposition	We are only validating a small number of SG / SD's as the UTC is profiled to take a vast proportion of ED dispositions, therefore negating the need for a '111 First validation'. If we submitted the calls that only applied if they would have been referred to an ED we would be reporting a far higher performance figure

		but this metric includes all dispositions regardless of if the call is referred to a more appropriate service before ED.
KPI 9: (Q081+Q094) / (Q027+Q028)	Calls recommended self-care by clinician / calls triaged by a clinician	Outcomes of calls forwarded to our remote Clinical Assessment Services (CAS) - PHL and DAS - are currently not collected - so any 'self-care' outcomes by these clinicians are still not included at this time.

LAS

Comments for 111AH5 North East London:

Data item	Description	Comments
Q013	Number of calls abandoned	This has improved this month due to increased staffing, extended support from DHU and slightly reduced demand compared to January.
Q017	Total time to call answer	
Q024	Number of calls where person triaged	All calls are accounted for but data shows that there are a few cases triaged by DHU that were not reported.

Comments for 111AJ1 North West London:

Data item	Description	Comments
Q013	Number of calls abandoned	This has improved this month due to increased staffing, extended support from DHU and slightly reduced demand compared to January.
Q017	Total time to call answer	

Q024	Number of calls where person triaged	All calls are accounted for but data shows that there are a few cases triaged by DHU that was not reported.
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Comments for 111AD7 South East London:

Data item	Description	Comments
Q013	Number of calls abandoned	This has improved this month due to increased staffing, extended support from DHU and slightly reduced demand compared to January.
Q017	Total time to call answer	
Q024	Number of calls where person triaged	All calls are accounted for but data shows that there are a few cases triaged by DHU that was not reported.

LCW

No comments received for 11AD5 North Central London

NEAS

No comments received for 111AA1 North East.

NECS/YAS/LCD

Comments for 111AD9 Yorkshire & Humber (YAS/LCD/LCD POOH/LCD Dental):

Data item	Description	Comments
Q001	Number of calls received	This month's figures include a higher proportion of dental calls.

KPI 9: (Q081+Q094) / (Q027+Q028)	Calls recommended self-care by clinician / calls triaged by a clinician	LCD Dental figure is very low which may reflect the types of problems that they are dealing with.
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Q098, Q101 Time is not captured by YAS or LCD

LCD GPOOH

Q87 taken as all PCC and HV cases, rest are all cases closed over the phone after clinical triage.

Currently PCC appointment slots are being also used for triage therefore many appointments are being completed but not as F2F . Due to case closure options it isn't possible to fully track just those which were booked for PCC so all have been included in Item 136 - 140.

LCD Dental

Q13 - LCD Dental do not have the ability to breakdown calls Q014-Q016

Q17 - We did have more calls during the peak of Covid as dentists were generally seeing fewer patients than normal and call volumes have decreased since patients have been able to see their own dentists more easily. We do have varied staffing levels which can contribute to the call answer times too. Also the call volumes naturally fluctuate particularly over the summer so this variance month on month is to be expected.

Data for GP OOH providers includes

8GY92-LCD

NNJ-DHU on behalf of Bassetlaw GPOOH (Y00814),

NNF - City Healthcare Partnership CIC

Y01173-Sheffield GP Collaborative,

RCD-Harrogate & District,

NL3-CARE PLUS,

YO5222-i-HEART Barnsley

RFR - Rotherham NHSFT

NXL01 - FCMS

NL0 - Vocare

RJL-Northern Lincolnshire and Goole NHS Foundation Trust

NWAS

No comments received for North West including Blackpool.

PRACTICE PLUS GROUP (PPG)

Comments for 111A12 Surrey Heartland.

Data item	Description	Comments
Q013	Number of calls abandoned	Call handling resource increased following returns from COVID absence that helped reduce abandonment rates and increased the speeds to answer.
Q017	Total time to call answer	As above.
Q108/Q107	Appointments with an in-hours GP practice / DoS selections in-hours GP practice	Where Care/GP Connect is used, there have been data quality and capture issues identified such that this metric should now appropriately reflect a higher number of appointments being booked moving forward. Data capture has been appropriately remedied.

SCAS

Comments for 111AH9 Hampshire & Surrey Heath:

Data item	Description	Comments
Q012	Number of calls answered within 60 seconds	Improvement this month is partly because January had 5 weekends and a B/H. In addition, there were high sickness rates for call handlers during January with much better resources in February.
Q013	Number of calls abandoned	
Q017	Total time to call answer	

Q024	Number of calls where person triaged	Note that equivalent figures in 111 MDS don't include Out of Area calls.
KPI 6: Q097/Q096	Calls given an ambulance disposition that are revalidated / calls given an ambulance disposition	Figures are being reviewed as they look wrong.
KPI 7: Q100/Q099	Calls given an ED disposition that are revalidated / calls given an ED disposition	
KPI 12: Q023/Q024	Time to telephone assessment outcome / Calls where person triaged	Figures incorrectly include one job which wasn't processed in Adastra with an end date of September 2021.

Comments for 111AG9 Thames Valley:

Data item	Description	Comments
Q012	Number of calls answered within 60 seconds	Improvement this month is partly because January had 5 weekends and a B/H. In addition, there were high sickness rates for call handlers during January with much better resources in February.
Q013	Number of calls abandoned	
Q017	Total time to call answer	
Q024	Number of calls where person triaged	Note that equivalent figures in 111 MDS don't include Out of Area calls.
KPI 6: Q097/Q096	Calls given an ambulance disposition that are revalidated / calls given an ambulance disposition	Figures are being reviewed as they look wrong.

KPI 7: Q100/Q099	Calls given an ED disposition that are revalidated / calls given an ED disposition	
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SECAmb

Comments for 111AI9 Kent, Medway & Sussex:

Data item	Description	Comments
Q012	Number of calls answered within 60 seconds	Significant recovery in staffing and call answering capacity, after COVID-related abstraction in January.
Q013	Number of calls abandoned	
Q017	Total time to call answer	
Part of KPI 4: Q112/Q111	Appointments with an IUC Treatment Centre / DoS selections IUC Treatment Centre	Bookings to IUC Treatment Centres increased due to re-configuration of some DoS profiles and the increased the amount of available slots.

VOCARE

Vocare were again only able to provide telephony data this month. Impacts data for the following contract areas: 111AF4 Staffordshire, 111AG5 South West London, 111AF1 Cornwall, 111AH1 BaNES and Wiltshire & Swindon.

The following response covers all areas.

Data item	Description	Comments
Q017	Total time to call answer	Following a Covid outbreak in our contact centre we had higher than expected episodes of national contingency in February resulting in a reduction in the number of calls answered but an increase in calls answered within 60s.

WMAS

Comments for 1111A18 West Midlands:

Data item	Description	Comments
Q013	Number of calls abandoned	Fewer calls received this month allowed staff to better meet the demand and therefore both call answer times saw an improvement as did the number of calls abandoned. Staffing levels increased after the high abstractions from Covid in December/January.
Q017	Total time to call answer	
Part of KPI 4: Q112/Q111	Appointments with an IUC Treatment Centre / DoS selections IUC Treatment Centre	TC Appointment availability varies across the regions, with some department offering only 2 per day. Appointments with OOH providers is also greatly reduced due to C19 restrictions; currently only booking with one provider.
KPI 5: Q114/Q113	Appointments with a UTC / DoS selections UTC	Appointment utilisation is impacted upon by the availability of appointments within the triage disposition timeframe. Often, available appointments are after the window for attendance.