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PLEASE NOTE A REVISION TO ANNEX 1 - DEVELOPMENTAL KPI 5a/b/c

To:

• All NHS 111/IUC commissioners and providers

Dear Colleagues,

Integrated urgent care key performance indicators 2021

The collection was assured by the Data Co-ordination Board in March (ref DCB3031 Amd 6/2021) and the documentation is now available on the <u>NHS England and NHS</u> <u>Improvement website</u>.

The key performance indicators (KPIs) have been designed to measure the performance of the whole of the integrated urgent care (IUC) system. 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 were developed in collaboration with commissioners and providers and were due to go live April 2020, however, the pandemic meant this was put on hold. Further development has since been made to both the KPIs and aggregate data collection (ADC) to take into account service changes during 2020 as well as clarify some of the definitional elements of data items.

Changes to data collections will take place as follows:

- The weekly 111 Minimum Data Set (111 MDS) and the weekly 111 First SitRep collections will be collected via the Strategic Data Collection Service (SCDS) for the last time on Tuesday 6 April in respect of activity relating to week ending Sunday 4 April.
- The collection of 95th/99th centile call answering time data, which is included in weekly performance reporting, will also cease from week commencing 5 April 2021.
- The new weekly IUC Aggregate Data Collection (IUC ADC) will be collected via SDCS for the first time on Monday 12 April in respect of activity relating to the two weeks ending Sunday 4 April 2021 and Sunday 11 April. Thereafter it will be collected on a weekly basis.
- The monthly ADC will be collected using the revised specification for the first time in relation to April 2021 data (collected in May 2021).
- The monthly ADC will be used to monitor performance against the revised IUC KPIs from 1 April 2021.
- Aggregated weekly ADC data will be published as monthly provisional statistics on the NHS England and NHS Improvement¹ website in the month after the end of the reporting period (eg April data published in May); monthly ADC data, including KPI monitoring and data quality commentary, will be published on the same web page as Official Statistics the following month (eg April data published in June).
- Prior to the introduction of the KPIs it is essential that commissioners ensure arrangements are in place for the collection and provision of data covering the end to end IUC service for each contract area. This requirement in 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.

These KPIs are the national standards by which IUC service should be measured; as such the KPIs should be referenced in provider contracts, although commissioners should only hold providers to account for their achievement where they are directly responsible for the whole of that end-to-end service. For some KPIs standards have

¹ <u>https://www.england.nhs.uk/statistics/statistical-work-areas/nhs-111-minimum-data-set/</u>

been set at a level which reflects the future development of service areas, other KPIs are simply a continuation of current targets.

Commissioners should not penalise a provider by applying financial penalties for non-achievement where a standard is developmental or aspirational. Details of which KPIs fall into these categories can be found in Annex 1. For KPI 6 (clinical self-care) no financial penalties should ever be applied.

The IUC Team will closely monitor the data quality of ADC submissions as well as the achievement of KPI standards.

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.

We will continue dialogue with commissioners and providers to understand if any future KPI changes are required.

Yours sincerely,

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Iain Pickles Director of Urgent and Emergency Care Transformation Operations and Information Directorate

NHS England and NHS Improvement

Annex 1: 2021 IUC KPI thresholds (revised)

	KPI Title	Standard	RAG Thresholds			Status
			Red	Amber	Green	
1	Proportion of calls abandoned	≤ 3%	x > 5	3 < x <= 5	x ≤ 3	Established
2	Average speed to answer calls	≤ 20 seconds	x > 30	20 < x <= 30	x ≤ 20	Developmental
3	95th centile call answer time	≤ 120 seconds	x > 180	120 < x <= 180	x ≤ 120	Developmental
4	Proportion of calls assessed by a clinician or Clinical Advisor	≥ 50%	x < 45	45 <= x < 50	x ≥ 50	Established
5a	Proportion of call backs by a clinician in agreed timeframe - 20 mins	≥ 90%	x < 80	80 <= x < 90	x ≥ 90	Developmental
5b	Proportion of call backs by a clinician in agreed timeframe - 20 mins to 1hr	≥ 90%	x < 80	80 <= x < 90	x ≥ 90	Developmental
5c	Proportion of call backs by a clinician in agreed timeframe - over 1hr	≥ 90%	x < 80	80 <= x < 90	x ≥ 90	Developmental
6	Proportion of callers recommended self-care at the end of clinical input	≥ 15%	x < 10	10 <= x < 15	x ≥ 15	Developmental
7	Proportion of calls initially given a category 3 or 4 ambulance disposition that are validated within 30 minutes	≥ 50%	x < 45	45 <= x < 50	x ≥ 50	Established
8	Proportion of calls initially given an ED disposition that are validated	≥ 50%	x < 45	45 <= x < 50	x ≥ 50	Established
9	Directory of Services: no service available other than ED (ED catch-all)	≤ 0.5%	x >2	0.5 < x <=2	x ≤ 0.5	Established
10	Proportion of callers allocated the first service offered by Directory of Services	≥ 75%	x < 70	70 <= x < 75	x ≥ 75	Aspirational
11	Proportion of calls where the caller was booked into a GP practice or GP access hub	≥ 75%	x < 70	70 <= x < 75	x ≥ 75	Developmental
12	Proportion of calls where the caller was booked into an IUC Treatment Centre or home residence	≥ 70%	x < 65	65 <= x < 70	x ≥ 70	Established
13	Proportion of calls where the caller was booked into a UTC	≥ 70%	x < 65	65 <= x < 70	x ≥ 70	Established
14	Proportion of calls where caller given a booked time slot with an Emergency Department	≥ 75%	x < 70	70 <= x < 75	x ≥ 75	Aspirational
15	Proportion of calls where the caller was booked into a Same Day Emergency Care (SDEC) service	N/A	N/A	N/A	N/A	Developmental
16	Proportion of patients receiving a face-to-face consultation in an IUC Treatment Centre within the specified timeframe	≥ 95%	x < 90	90 <= x < 99	x ≥ 95	Developmental
17	Proportion of patients receiving a face-to-face consultation within their home residence within the specified timeframe	≥ 95%	x < 90	90 <= x < 99	x ≥ 95	Developmental

Status Key: Established – Unchanged KPIs and those where attainment to standards are expected from the first month of publication. Developmental – New data items/KPIs which will take some time to bed in and understand the current attainment of standards. Standards will be reviewed throughout 2021/22. Aspirational – Where we expect attainment to be by March 2022 as underpinning services are under development.