

IUC ADC January 2022 - comments from lead data suppliers

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 suppliers 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 suppliers' comments where they have been provided about the quality of data returns, reasons for changes since previous months and reasons for differences to provisional data items published last month.

ARDEN GEM

Comments for 111AJ5 Lincolnshire

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional data is because monthly figures include all calls within the contracted area, plus a proportion of the calls we handled that were Out of Area. The weekly figures exclude Out of Area calls and calls where the patient was not registered at a Lincolnshire CCG GP Practice. In addition, there will be differences in numbers of triaged calls (C01) between monthly and weekly figures due to cases open before midnight on Sunday evening where the triaged element of the call took place after the weekly data capture on the Monday morning.
B06	Total time to call answer	
C01	Number of calls where person triaged	
E01 to E18	Number of dispositions	Clinicians at CAS are able to assign multiple dispositions to a caller. Due to TPP issues we are unable to see which was the primary disposition, so figures relate to the first disposition in the list. This will not always be the primary disposition which may skew the results.
E14	Callers recommended repeat prescription medication	Only the first outcome listed in the case is used to ascertain the disposition, so it is likely that this item is under-reported.

G01	Calls where caller given an appointment	Supplied figure includes GP Extended Access, Home Visiting and IUC.
G10, G11	DoS selections – SDEC service	CAS colleagues do have the ability to book patients into SDEC, but these numbers are usually zero or very low.
G15	Repeat prescription medication issued	Number of repeat prescription issued exceeds number of repeat prescription dispositions (E15) because a) we're only using the first outcome listed in the case to ascertain the disposition so will be missing some numbers from E14 and b) we cannot distinguish between repeat prescription and regular prescription issues.

BRISDOC

Comments for 111A15 Bristol, North Somerset & South Gloucestershire

CAS data for DoS selections, telephony and appointments are not available.

Data item	Description	Comments
A01	Number of calls received	Although demand in the first week of January was high, overall demand was lower than last month.
B01 - B11	Call handling	CAS data not included as unavailable.
C01	Number of calls where person triaged	HCP and 'out of area' calls are not included in C01, but are included in Section E.
D11	Calls with clinician or Clinical Advisor input into the assessment but where the clinician hasn't spoken to the caller	Data currently unavailable.
E14	Callers recommended repeat prescription medication	CAS data not included.
E19-E30	Validation of Dispositions	The NHS111 provider (PPG) run bespoke processes for ED and 999 validations data, which typically result in higher validation rates than are captured in the ADC.
F02	Directory of Services: no service available other than ED (ED catch-all)	Zero cases - ED catch-all only triggers in exceptional circumstances
G01 to G19	Caller given an appointment	CAS data not included as it's unavailable.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	Very few bookings for IUC treatment centres are made directly from 111 (i.e. not CAS); the vast majority of bookings are via CAS, which are not captured.
G07	Number of calls where the caller was booked into a UTC	Bristol, North Somerset & South Gloucestershire has a new process, with a new DoS profile for UTC and an increase in remote assessments. This results in more UTC type selections and fewer bookings.

G09	Number of calls where caller given a booked time slot with an ED	Direct bookings to ED 1&2 are disabled. Values seen are for UTCs and out-of-region ED services only.
G10 & G11	DoS selections – SDEC service	SDEC is not being used at all within the contract area.
H01 to H09	NHS 111 Online contacts	CAS data not included as not available.

DEVON DOCS

Comments for 111A16 Devon

Data Items	Description	Comments
A01	Number of calls received	From January, we have updated the methodology to count on IVR activity abandoned before the call reaches a queue. October to December data are currently incomparable but will be resubmitted using the newly revised methodology in the next revisions window.
B07	95th centile call answer time	B07 has been revised and we will resubmit this activity when we are able to do so.
C01	Number of calls where person triaged	January's data uses the newly revised methodology so figures with previous months are currently incomparable until we can resubmit Oct to December data.
D01	Calls assessed by a clinician or Clinical Advisor	
G10, G11	SDEC service bookings	We currently do not have or book into a SDEC service.

Comments for 111AH8 Somerset

Data Items	Description	Comments
A01	Number of calls received	From January, we have updated the methodology to count on IVR activity abandoned before the call reaches a queue.
C01	Number of calls where person triaged	Disparity with provisional figures is because the monthly submission was produced using the revised methodology.
D01	Calls assessed by a clinician or Clinical Advisor	
G10, G11	SDEC service bookings	We currently do not have or book into a SDEC service.

DHU

Comments for 111AC7 Milton Keynes

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures is due to a small number of cases missing from the weekly figures due to a mismatch in the timings of some of our processes. The full amount of cases was correctly reported in the monthly figures. The drop in demand in January relative to the previous month is due to the particularly high case volumes in December, including the expected increase in calls at the Bank Holidays, coupled with an increase in the health advisor staffing numbers.
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Not applicable to service.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is due to a small number of cases missing from the weekly figures due to a mismatch in the timings of some of our processes. The full amount of cases was correctly reported in the monthly figures. Disparity with provisional figures is also due to the timing of weekly uploads. Some calls that come in at the weekend may have clinical activity that takes place on the Monday after. This will not be captured within weekly uploads as reporting data refresh will not have yet accounted for the Monday's data at the time of the weekly upload.
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	Not applicable to service.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	The CCG have not commissioned services that fit within the criteria specified in the ADC. The services that made up the greatest proportion of this metric are no longer of the type that counts towards this metric, thus the figures have dropped to near zero across the last several months.
G10, G11	SDEC bookings	Not yet used within service.
G12, G13	Dental service bookings	Not applicable to service.
G16 to G19	Community pharmacy service referrals	
G21	Patients receiving a face to face consultation in their home residence within the timeframe agreed	External provider unable to capture data.
G23	Face to face consultation in an IUC Treatment Centre	This metric is missing data from an external provider.

Comments for 111AC6 Northamptonshire

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures is due to a small number of cases missing from the weekly figures due to a mismatch in the timings of some of our processes. The full amount of cases was correctly reported in the monthly figures. The drop in demand in January relative to the previous month is due to the particularly high case volumes in December, including the expected increase in calls at the Bank Holidays, coupled with an increase in the health advisor staffing numbers.
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Not applicable to service.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is due to a small number of cases missing from the weekly figures due to a mismatch in the timings of some of our processes. The full amount of cases was correctly reported in the monthly figures. Disparity with provisional figures is also due to the timing of weekly uploads. Some calls that come in at the weekend may have clinical activity that takes place on the Monday after. This will not be captured within weekly uploads as reporting data refresh will not have yet accounted for the Monday's data at the time of the weekly upload.
D12	Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	Not applicable to service.
G10, G11	SDEC bookings	Not yet used within service.
G12, G13	Dental service bookings	Not applicable to service.
G16 to G19	Community pharmacy service referrals	

DORSET HC

Comments for 111A14 Dorset

Data item	Description	Comments
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A04	Calls transferred from the 999 Ambulance Service into NHS 111	No data available. Unable to identify individuals calls from 999 service.
C02	Calls where person triaged by a Service Advisor	These items are zero and do not apply to our service at this time.
D04	Calls assessed by a mental health nurse	
D07	Calls assessed by a dental nurse	
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	
G10, G11	Calls where the caller was booked into an SDEC service	Discussions to finalise and agree the SDEC referral process with the acute hospitals in Dorset are continuing.
G12, G13	Received by dental services not using DoS	These items are zero and do not apply to our service at this time.
G15	Number of calls where repeat prescription medication was issued within your service	These are confirmed as true zeroes
G19	Referral to a community pharmacy service was made for minor illness	
H04	NHS 111 Online contacts that resulted in patient being booked into a GP Practice or GP access hub	
H11, H12	NHS Online contacts with SDEC appointment	
H17, H18	NHS 111 Online contacts initially given an ED disposition	

HUC

Comments for 111AC5 Cambridgeshire & Peterborough

Data item	Description	Comments
A01	Number of received calls	Call volumes fell in January 2022 but are still higher than January 2020 so have not fallen back to pre-COVID levels. Performance has also been helped by staff recruitment.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
E17	Callers recommended self-care at the end of clinical input	Figures reflect what clinicians' select on the various clinical systems. Often, they can select more than one outcome as they are working outside of Pathways and we report

		the highest acuity. We are actively examining what clinicians select, but they tend to use outcomes as worsening advice, so self-care tends to be the bottom of the list. We are looking at Dx108 usage, as we feel that this Dx Code is being used in some instances as a self-care outcome, because it is no further action.
G09	Number of calls where caller given a booked time slot with an ED	Numbers are heavily reliant on external factors such as booking slot availability from EDs. We also have a further complication in that we use SystemOne for Out of Hours and this system has no access to the DoS and EDDI bookings.
G11	SDEC service bookings	Continues to be work in progress.

Comments for 111AB2 Hertfordshire

Data item	Description	Comments
A03	Number of answered calls	Performance affected by high levels of staff sickness. Improvement in call handling time is due to increasing experience of newer members of staff who are now able to deal with calls more quickly and answer more calls per hour.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
C01	Number of calls where person triaged	
G10, G11	SDEC service bookings	Continues to be work in progress.

Comments for 111AG7 Luton & Bedfordshire

Data item	Description	Comments
A03	Number of answered calls	Improvement in performance this month is due to a reduced call volume and increasing experience of newer members of staff who are now able to deal with calls more quickly and answer more calls per hour.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
G11	SDEC service bookings	No patients were referred to an SDEC. Functionality isn't yet available for SDEC appointments to be booked by 111.

Comments for 111A13 West Essex

Data item	Description	Comments
A03	Number of answered calls	The improvement in performance since last month can be attributed to fall in call volume and better call handling time due to the increasing experience of newer members of staff who are now able to deal with calls more quickly and answer more calls per hour.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
C01	Number of calls where person triaged	
D01	Calls assessed by a clinician or Clinical Advisor	
G10, G11	SDEC service bookings	Continues to be work in progress.

IC24

Comments for 111AH4 Mid & South Essex

Any disparity with provisional (weekly) figures may be due to a change in call status following validations in CLEO/S1 systems that are only picked up monthly. Figures exclude calls received from external provider into CAS via ITK/DoS but not on a telephony line.

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service into NHS 111	These items are currently not available, due development or not applicable.
A05	External clinician calls to Clinical Assessment Service (CAS)	
B01	Calls answered within 60 seconds	The improvement in performance since last month is due to a decrease in demand and an increase in staffing levels since December when high volumes of staff were isolating.
B06	Total time to call answer	
B07, B08	Call answer centiles	Due to the way that our calls are currently aggregated, centile figures may be inaccurate. We have not yet been able to provide a more granular measurement for centile call time.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is due to ongoing issues with running our system to capture weekly data for Mid and South Essex.
D11	Number of calls with clinician or Clinical Advisor input into the assessment but where the clinician hasn't spoken to the caller	These items are currently not available, due development or not applicable.

D12	Number of Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	
D19	Calls assessed by a clinician or Clinical Advisor which originated from an external NHS 111 provider	
G10	SDEC service bookings	The booking system is not utilised as often as DoS option is being presented. There is ongoing discussion around hydrating the SG/SD codes to present more often at clinical CAS endpoints via PaCCs to enable the clinicians to select the EDDI DAB slots.
G12	Calls received by dental services not using DoS	These items are currently not available, due development or not applicable.
G13	Number of calls received by dental services not using DoS that resulted in a booked appointment	
H17	Number of NHS 111 Online contacts initially given an ED disposition which the patient has agreed to clinical contact and provided the necessary information for a callback	
H18	Number of NHS 111 Online contacts initially given an ED disposition that are validated	

Comments for 111AG8 Norfolk including Great Yarmouth and Waveney
 Figures exclude calls received from external provider into CAS via ITK/DoS but not on a telephony line.

Data item	Description	Comments
A01	Number of calls received	The fall in demand is likely to reflect Doctors' surgeries reopening after Christmas and seeing their own patients instead of contacting 111 and OOH for their primary care.
A04	Calls transferred from the 999 Ambulance Service into NHS 111	These items are currently not available, due development or not applicable.
A05	External clinician calls to Clinical Assessment Service (CAS)	
B01	Calls answered within 60 seconds	The drop in demand has had a positive influence on the ability to answer calls, as has our recruitment and retention drive. Higher levels of staffing mean there is better response to incoming calls in a shorter time period. Many staff were isolating in December and returned to work in January
B02	Number of calls abandoned	
B06	Total time to call answer	

B07, B08	Call answer centiles	Due to the way that our calls are currently aggregated, centile figures may be inaccurate.
D11	Number of calls with clinician or Clinical Advisor input into the assessment but where the clinician hasn't spoken to the caller	These items are currently not available, due development or not applicable.
D12	Number of Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	
D19	Calls assessed by a clinician or Clinical Advisor which originated from an external NHS 111 provider	
G10, G11	SDEC service bookings	SDEC is not used on the DoS much; SDEC booking done by phone not booking system. Numbers will remain low until SDEC services pick up and are profiled on the DoS. There is ongoing discussion around hydrating the SG/SD codes to present more often at clinical CAS endpoints via PaCCs to enable the clinicians to select the EDDI DAB slots which will improve our reporting on this metric.
G12	Number of calls received by dental services not using DoS	These items are currently not available, due development or not applicable.
G13	Number of calls received by dental services not using DoS that resulted in a booked appointment	
H17	Number of NHS 111 Online contacts initially given an ED disposition which the patient has agreed to clinical contact and provided the necessary information for a callback	
H18	Number of NHS 111 Online contacts initially given an ED disposition that are validated	

IOW

Comments for 111AA6 Isle of Wight

Outcomes of calls forwarded to remote Clinical Assessment Services (DAS, PHL and MHA) are currently not included in the ADC submission.

Data item	Description	Comments
B01	Number of answered calls	Disparity with provisional data is due to incorrectly reporting 1 (instead of 260) for 8 January in the weekly submission.
B02	Number of calls answered within 60 seconds	

B06	Number of calls abandoned	Performance impacted by drop in demand, recruitment of call handlers and low levels of sickness over the month.
B07	Total time to call answer	
E17	Callers recommended self-care at the end of clinical input	Calls forwarded to our remote Clinical Assessment Services (CAS) not included.
E26, E27	Calls initially given an ED disposition that are validated	We are only validating a small number of SG / SD's as our UTC is profiled to take a vast proportion (approx. 60%) of ED dispositions, therefore negating the need for a '111 First (or 'ED') 'validation'. If we were to record only the calls that 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.
F02	Directory of Services: no service available other than ED (ED catch-all)	DoS is set up so that very few situations arise where the only service available is 'ED Catch all'.
G05	Calls where the caller was booked into an IUC Treatment Centre	At this time our 111 service is not able to book directly into our own IUC or any other IUC services elsewhere, although in some months one or two bookings may come through.
G10, G11	SDEC service bookings	IOW now have an SDEC service and are currently working on referral and booking pathways.
G20 to G23	Face to face consultations	This section of reporting is still being developed.

LAS

Comments for 111AH5 North East London

Data item	Description	Comments
B01	Calls answered within 60 seconds	Performance improved in the month of January due to a reduced demand for the service compared to previous months.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded.

Comments for 111AJ1 North West London

Data item	Description	Comments
B01	Number of calls answered within 60 seconds	With reduced demand the service was able to achieve a better performance compared to previous months.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded.

Comments for 111AD7 South East London

Data item	Description	Comments
B01	Calls answered within 60 seconds	Demand for the service dropped significantly in January reducing pressure and resulting in improved performance.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
C01	Number of calls where person triaged	C01 remains higher than A03 due to cases slipping off in error on the Adastra system. In January, SEL reported an increase in the number of triaged figures due to telephony failures for 3 days. This meant over 4,500 calls were diverted to North East London's front end but triaged using South East London's ADASTRA.
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded.

LCW

Comments for 11AD5 North Central London

Data item	Description	Comments
A02	Calls routed through IVR	This is blank as the definition has been reviewed. We will resubmit once the telephony system allows us to report on this.
B01	Calls answered within 60 seconds	Improvements in performance are due to overall drop in demand in calls in January compared to December and increases in staffing.
B02	Number of calls abandoned	

B06	Total time to call answer	
B07	95th centile call answer time`	
B10	Number of calls passed to a clinician or Clinical Advisor for a call back	Figure provided is under-reported. This is a result of changes to the Adatastra reporting suite to avoid double-counting of cases passed within same service provider but has resulted in issues with identifying call-backs and outcomes.
B11	Call back waiting time	Figure provided is missing waiting times of some call backs (see comment above). In addition, some call-back times are being reported too high in the Adatastra system if a case is modified or has multiple call-backs.
C01	Calls where person triaged	Figure is higher compared to number of calls answered due to the figure being the total of C02-C06.
C02	Number of calls where person triaged by a Service Advisor	This has increased this month due to implementation of Pathways Lite for Service Advisors.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because the weekly report selects cases based on their entry data up to 23:59 on the Sunday. If their consultation is done after midnight on the following Monday, the system does not recognise the consultation.
D04	Calls assessed by a mental health nurse	None working in the service.
D07	Calls assessed by a dental nurse	
D12	NLP calls that resulted in a caller speaking to a clinician or Clinical Advisor	Not applicable for our service.
D13 to D18	Callers offered a call back	Mapping tables used to create these figures being investigated with Advanced.
E05	Callers recommended to attend Same Day Emergency Care (SDEC)	Figures are low due to restrictive criteria for referral into the service.
E28-E31	ED dispositions that are validated	There are issues with these figures probably because ED validation is done via the DoS and not interim Dx codes.
F03	Calls where caller is allocated the first service offered by DoS	This value is lower than expected. DoS is being opened for warm transfers and call-backs and all services rejected. May need to redefine reporting to exclude where all services are rejected and other pathway followed.
G11	Number of calls where the caller was booked into an SDEC service	Figures are low due to restrictive criteria for referral into the service.

G12, G13	Calls received by dental services	N/A as we are not a Dental service.
H11, H12	NHS 111 Online contacts that resulted in patient being given an appointment with an SDEC	The eligibility criteria for SDEC referrals is very specific and the referral types via online would not normally meet these criteria so we would not expect many or even any referrals to SDEC from this case load.
H18	NHS 111 Online contacts initially given an ED disposition that are validated	This data item is lower than expected due to a case type mapping issue. Will be raised with Advanced to rectify.

MEDVIVO

Comments for 111AJ2 BaNES, Swindon & Wiltshire

Data item	Description	Comments
A01	Number of calls received	Activity decreased for a two-week period after the New Year weekend, before starting to increase during the second half of the month.
B01	Number of calls answered within 60 seconds	Improvement in performance since last month is due to a drop in demand combined with a reduction in staff absence levels.
B02	Number of calls abandoned	
B06	Total time to call answer	
C01	Number of calls where person triaged	Disparity with provisional figures is due to a small number of records which were not passed on to us until after the weekly data had been submitted.
D01	Calls assessed by a clinician or Clinical Advisor	
E05	Callers recommended to attend SDEC	The BSW IUC doesn't typically yet use SDEC.
F02	DoS: no service available other than ED (ED catch-all)	Zero return this month.
G09	Calls where caller given a booked time slot with an ED	ED's in the BSW area do not currently have the functionality to directly book an appointment.
G10, G11	SDEC service bookings	The BSW IUC doesn't typically yet use SDEC.
G16	Number of calls where community pharmacy was an option on DoS for prescription medication	Due to an error, G16 and G18 are missing all values this month.
G18	Number of calls where a community pharmacy service was an option on DoS for minor illness	
G21	Patients receiving a face to face consultation in their home residence within the timeframe agreed	Since November 2021, we have been underreporting home visits which are carried out in a way which no longer generates a consultation record and are working on a fix.

ML CSU (North West including Blackpool)

Comments for 111AJ3 North West including Blackpool

The North West does not have a single integrated contract covering both NHS111 and CAS; NWAS is the NHS 111 provider but its CAS role is limited to validation work undertaken within the 999 service. CAS provision is by a range of providers (predominantly OOH providers) who either initially provided CAS or through being specifically commissioned by CCGs to provide CAS either as a standalone contract or as part of a wider UEC/urgent primary care contract. Given the complex picture of providers in the North West, there is an iterative transition from the submission of NWAS data only in April 2021 to MLCSU submitting data covering all service providers. Before April 2021, NWAS submitted proxy data for the clinical contact measure to demonstrate the clinical contact from other providers; this use of a proxy measure has now stopped and will be replaced by real data from those other providers as they start to submit data. This month, data have been submitted for Blackburn with Darwen, Central Cheshire ICP, East Cheshire, East Lancashire and NWAS only. Not all providers have been able to provide answers for all rows relevant to their service so calculations involving averages etc may be incorrect/skewed.

Data item	Description	Comments
D01 to D09	Calls assessed by a clinician or Clinical Advisor	We are unable to split between clinician types, so all calls assessed by a clinician are shown in D09. D02-D09 exceeds D01 as 505 patients who were given another triage by a GP following the routine triage by a nurse have been double-counted.
D01 to E30	Calls with Clinical Input, IUC Recommendations (Dispositions) and Validation of Dispositions	Figures exclude data from some service providers.
E01	Total number of dispositions	Exceeds number of calls where person triaged (C01) due to double-counting numbers reported by NWAS and the other providers.
E26	Calls initially given an ED disposition	NWAS are reporting this as 0.
G01	Number of calls where caller given an appointment	Exceeds sum of parts (G03, G05, G07, G09, G11, G13, G14) due to double counting numbers reported by NWAS and the other providers.
G03, G05, G07, G09, G11, G14, G20, G21, G22, G23, H01, H02, H04, H13 to H18	IUC Service Integration and NHS 111 Online Contacts	Figures exclude data from some service providers.

ML CSU (Leicestershire & Rutland)

Comments for 111AJ6 Leicestershire and Rutland (Mid Lincs)

Data item	Description	Comments
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A01	Number of calls received	Disparity with provisional data is because monthly figures include all calls within the contracted area, plus a proportion of the calls we handled that were Out of Area. The weekly figures exclude Out of Area calls and calls where the patient was not registered at a Leicestershire CCG GP Practice.
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Null – not applicable to our service.
B01	Calls answered within 60 seconds	Improvements on performance since last month are a result of a fall in demand and higher staffing numbers.
B02	Number of calls abandoned	Disparity with provisional data is because monthly figures include all calls within the contracted area, plus a proportion of the calls we handled that were Out of Area. The weekly figures exclude Out of Area calls and calls where the patient was not registered at a Leicestershire CCG GP Practice.
B06	Total time to call answer	Disparity with provisional data is because monthly figures include all calls within the contracted area, plus a proportion of the calls we handled that were Out of Area. The weekly figures exclude Out of Area calls and calls where the patient was not registered at a Leicestershire CCG GP Practice.
C01	Number of calls where person triaged	Disparity with provisional data is because monthly figures include all calls within the contracted area, plus a proportion of the calls we handled that were Out of Area. The weekly figures exclude Out of Area calls and calls where the patient was not registered at a Leicestershire CCG GP Practice. In addition, there will be differences in numbers of triaged calls (C01) between monthly and weekly figures due to cases open before midnight on Sunday evening where the triaged element of the call took place after the weekly data capture on the Monday morning.
D12	Number of Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	Null – not applicable to our service.
G10, G11	SDEC service bookings	None recorded this month.
G12, G13	Dental services bookings	Null – these are not applicable to our service.
G16 to G19	Community pharmacy service referrals	

NEAS

Comments for 111AA1 North East

Figures exclude outcome/ call performance for sub-contracted providers (GatDoc, VoCare & Elm) and initial telephony/triage data for DCAS in Cumbria.

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service	We operate a combined system of both 111 and 999; calls will not be transferred from 999 into 111.
A06	Unscheduled IUC Attendances	This information is outside of our service.
B01	Calls answered within 60 seconds	Improvements in performance compared to last month are due to a reduction in demand across both 111 & 999 and reduction in HA sickness rates.
B02	Number of calls abandoned	
B03 to B05	Calls abandoned in specified timeframe	We are unable to provide these measures from our systems.
B09	Total time of abandoned calls	We do not have the system capability to extract this information.
C01	Number of calls where person triaged	The number of triaged calls (C01) exceeds the number of answered calls (A03) because the two systems we use are separate entities (telephony "Avaya" and CAD). A case can be entered into the CAD system (detailing a triaged case) without having a directly associated call within our telephony system. An example of this would be when a case is passed into our CAS "SystemOne" (either triaged initially by an alternative provider or 111 online) and the patient requires a booking. The case would be created in CAD as unable to book an appointment from SystemOne but would not have an answered call associated to it on Avaya. Currently there isn't any way to differentiate calls entered on CAD which didn't originate on the Avaya system.
D02 to D09	Calls assessed by a clinician or Clinical Advisor	Items are under reported at system level with clinical assessment not captured for primary care, OOH or UTCs. While the clinical count [D01] includes clinical contacts from system providers who have been sub-contracted either by NEAS or commissioners, due to some of the clinical contacts being performed outside of NEAS we do not have access to the specific role of the clinician who performed the contact. Therefore [D01] includes these instances but the sum of the fields [D02]-[D09] will not equal this total. Since 20 th December, Vocare has been picking up some "speak to activity" from 111 online, creating some additional capacity for our in-house clinicians.
D11	Calls with clinician or clinical advisor input into the assessment but where the clinician has not spoken to the caller	We do not presently have the system capability to extract instances where this has occurred.

D12	Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	We do not have the system capability to determine these instances.
D13 to D18	Call backs by a clinician	Under reported at system level as call back reporting does not include performance from external providers.
D19	Calls assessed by a clinician or Clinical Advisor which originated from an external NHS 111 provider	Due to system limitations we cannot determine this information.
E21	Calls initially given a category 3 or 4 ambulance disposition that are validated within 30 minutes	Performance impacted by clinical pressures. Escalation plans continued to be implemented during activity surges.
E26	Calls given an ED disposition	NHS 111 Online cases booked in CAD are included in this figure as we are currently unable to separate them. These cases do not receive a re-validation (E27) as they are passed by clinician for a booking.
E27	Calls given an ED disposition that are validated	As per local commissioning policy, not all cases are passed for a revalidation and it is switched off during periods to support clinical call backs. The local agreement to aid clinical effectiveness remains in place with our commissioners, which reduces the opportunity to revalidate the total denominator of ED cases.
F03	Callers allocated first service on DoS	Measure currently includes both Health Advisors and Clinical Advisors, with clinician rates for the first service selected offered by the DoS significantly lower than health advisors as they will use their own clinical expertise for service selection.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	Calls passed via ITK to service for a call back aren't currently counted as a booking as no booking time recorded. An increase in this measure is expected following some external providers starting to offer F2F appointments again.
G10, G11	Bookings into an SDEC service	Currently not utilised – no bookings or selections recorded.
G12, G13	Bookings into dental services not using DoS	We do not have the system capability to provide this information.
G22, G23	Face to face consultations in an IUC Treatment Centre	Not reported - this information is outside of our service.
H01 to H18	NHS 111 online contacts	Due to system limitations we cannot determine this information.

NECS

Comments for 111AJ7 Derbyshire (NECS)

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional data is because monthly figures include all calls within the contracted area, plus a proportion of the calls that were Out of Area. Weekly figures exclude Out of Area calls and any calls where the patient was not registered at a Derbyshire CCG GP Practice.
A04	Calls transferred from the 999 Ambulance Service	Not applicable to service.
B01	Number of calls answered within 60 seconds	Improvement in performance since last month is due to fall in demand and higher staffing numbers.
B02	Number of calls abandoned	
B06	Total time to call answer	
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	Not applicable to service.
G11	SDEC service bookings	No Activity.
G12, G13	Calls received by dental services	Not applicable to service.
G16 to G19	Community pharmacy service	

Comments for 111AI7 Yorkshire and Humber (NECS)

Data for GP OOH providers includes: 8GY92-LCD, 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 & Goole NHS Foundation Trust and NNJ-DHU Bassetlaw OOH.

Data item	Description	Comments
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because weekly submissions reflect YAS activity only and monthly data includes activity from providers across the system.
D16	Callers offered a call back within a timeframe over 20 minutes and up to 1 hour inclusive, who received a call back within 1 hour	A lot of the demand relates to HCP call backs which are dealt with using a different process rather than via a standard call-back procedure. These calls are captured in D15 but not D16.
E01 to E18	Total number of dispositions	Total dispositions (E01) is likely to be lower than its constituent breakdown as not all of the dispositions have been fully mapped. If a case is referred out to YAS for clinical assessment it is closed with Dx32 or a Dx400s code, with the final outcome of pass to YAS. When it comes back from YAS it comes back looking just like any other new ITK

		transfer, with a new Adastra case number, and nothing to link it back to the previous record. For these cases, the ADC return is based on the final outcome, not the Dx code.
E14, G15	Number of callers recommended repeat prescription medication	Figures unavailable for LCD ADC GPOOH. LCD do not recommend repeat prescriptions, although they get some cases from YAS which are captured in G15 when issued by LCD.
E27 to E29	Number of calls initially given an ED disposition that are validated	E27-E29 is zero for the LCD provider.
G01 to G14	Number of calls where caller given an appointment	G01 contains bookings across the system, comprising bookings by YAS as well as bookings made by other OOH providers (based on assumptions made about how many cases these providers go on to book). The disparity with provisional figures is because weekly submissions only reflect YAS activity and monthly data includes bookings from providers across the system. This difference is large as we refer a lot of cases to OOH providers but don't actually book many patients in, so from a YAS perspective the number of bookings is low whereas the monthly system-wide data has a lot more bookings in.
G07	Callers booked into a UTC	Some gaps in data coverage due to UTCs still being onboarded at this particular time.
G11	SDEC selections	These figures will remain at low levels until the next Pathways update when some more options to refer to SDEC are made available.
G15	Repeat prescription medication issued	Includes number of cases requesting a repeat script which was then issued by LCD ADC GPOOH (which are not included in E14).
G16	Number of calls where a community pharmacy service was an option on DoS for prescription medication/minor illness	YAS cannot currently provide G16 due to data on DoS options available for each call not being available through Adastra.
H01, H02	NHS 111 Online Contacts resulting in a clinical call back	LCD ADC GPOOH receive a small number of cases from YAS each month which began as 111 Online. H02 reflects what happens to these cases which come through the contact centre as requiring a call back, but we do not follow NHS Pathways to determine which should receive clinical triage, be seen F2F etc. Therefore, data for H01 is not available.
H13-H16	NHS 111 Online Contacts	LCD receive a small number of cases from YAS each month which began as 111 Online. We have completed H14 and H16 to reflect what happens to these cases which come through the contact centre as requiring a call back but we do not follow NHS Pathways to determine which should receive clinical triage, be seen F2F etc. Therefore, data for H13 and H15 is not available.

NOTTS CCG

Comments for 111AJ4 Nottinghamshire

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional data is because monthly figures include all calls within the contracted area, plus a proportion of the calls that were Out of Area. Weekly figures exclude Out of Area calls and any calls where the patient was not registered at a Nottinghamshire CCG GP Practice.
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Null return as not yet able to collate this information.
B01	Number of calls answered within 60 seconds	Improvement in performance since last month is due to fall in demand and higher staffing numbers.
B02	Number of calls abandoned	
B06	Total time to call answer	
C01	Number of calls where person triaged	Disparity with provisional data is because monthly figures include all calls within the contracted area, plus a proportion of the calls that were Out of Area. Weekly figures exclude Out of Area calls and any calls where the patient was not registered at a Nottinghamshire CCG GP Practice. In addition, there will be differences in numbers of triaged calls (C01) between monthly and weekly figures due to cases open before midnight on Sunday evening where the triaged element of the call took place after the weekly data capture on the Monday morning.
D01	Calls assessed by a clinician or Clinical Advisor	Figures only include cases sent to 111 Clinical Advisors for assessment. No data are available on cases sent to NEMS CAS for clinical assessment.
D12	Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	Null return as not yet able to collate this information.
E27	Number of calls initially given an ED disposition that are validated	DHU do not provide an ED validation service for Nottinghamshire, this is provided by NEMS.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	DHU do not have NEMS CAS data so cannot identify the final outcome of these cases once received by CAS.

		Very small numbers of booking provided by DHU 111 would be for urgent care centres.
G09	Number of calls where caller given a booked time slot with an ED	The majority of Nottinghamshire 111 ED recommendations are referred to King's Mill or QMC ED, although no bookings made. However, these cases might be sent to NEMS for ED validation assessment prior to a booking being made.
G10, G11	SDEC selections	Not yet used within service
G12, G13	Bookings with dental services not using DoS	Null return as not yet able to collate this information.
G16 to G19	Referrals to community pharmacy services	

PRACTICE PLUS GROUP (PPG)

Comments for 111AH2 Gloucestershire

Data item	Description	Comments
B01	Number of calls answered within 60 seconds	Performance improved since last month due to demand dropping and reduced staff absence from mid-January onwards following a spike in Covid absence.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
E17	Number of callers recommended self-care at the end of clinical input	Cases resulting in "speak to a CA" have sextupled since 2019. This could be as a result of patients being unable to be seen by home GP's etc. Due to this the acuity held within our clinical queues is now much higher than it has ever been whereby self-care is not appropriate.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	111 cannot book into home residencies as we do not generate a home visit Dx code. These cases will be passed through to the out of hours for a call back therefore we are unable to reach >95%. During January, only 4 slots were made available to us to book into MIU's.
G09	Number of calls where caller given a booked time slot with an ED	Patients are booked into ED if appointment slots are made available. During December there were no slots available for 111 to book directly into in 76% of cases. Of the slots made available to 111, only 1% were not booked by our staff.
G11, G10	SDEC selections	The SDEC care service isn't currently active.

Comments for 111AH7 North East Essex & Suffolk

Data item	Description	Comments
G10, G11	SDEC selections	The SDEC care service isn't currently active.

Comments for 111AI2 Surrey Heartlands

Data item	Description	Comments
G10, G11	SDEC selections	The SDEC care service isn't currently active.

SCAS

Comments for 111AH9 Hampshire & Surrey Heath

Data item	Description	Comments
A02	Calls routed through IVR	No IVR at call start when passed to service. 0 is correct.
A05	External clinician calls to Clinical Assessment Service (CAS)	Unable to provide this figure.
A06	Unscheduled IUC attendances	SCAS does not hold this data as we have experienced problems gathering data from providers.
B07, B08	Call answer / abandonment time	We do not have data for these items as our telephony system does not record specific call answer data but records the times as in buckets of 2 seconds / 10 seconds / 60 seconds dependent on how long the CA time is - as such we cannot accurately provide for these.
C01	Number of calls where person triaged	Disparity with provisional figures is due to monthly figures including calls transferred from the 999 service (A04).
C05	Calls where person triaged by any other clinician	No known "other" clinicians operate – 0 is correct
C06	Calls where person triaged by another staff type	Contains cases where staff role was unable to be found in system as well as calls originating from 999.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because only monthly figures include clinical input into calls transferred from the 999 service (A04) and because

		monthly data includes a manual adjustment to account for some 111 calls listing as external when transferred (mostly to Mental Health and Dental teams) creating a new call with no triage listing for clinical involvement. Further work is being done to review whether some activity captured in C04 is being under-reported in D01.
D03	Calls assessed by an advanced nurse practitioner	Do not operate this staff type – 0 is correct
D11	Calls with clinician or Clinical Advisor input into the assessment but where the clinician hasn't spoken to the caller	Unable to provide this item.
D12	Number of Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	Do not operate Natural Language Processing (NLP) – 0 is correct
F01 to F03	Directory of Service	Unable to provide these figures.
G02 to G11	DoS Selections	This month's figures include DoS selections made by external providers which we have calculated by combining DOS Service Types and Appointments from External records.
G03	Calls where the caller was booked into a GP Practice or GP access hub	Within the service, only our clinicians are able to book appointments with GP services.
G05	Calls where the caller was booked into an IUC Treatment Centre	There was a large amount of DoS selections for IUC Treatment Centre, but a relatively small number actually booked. Hampshire has very few booking opportunities as CAS services can't physically make bookings.
G11	SDEC bookings	Cannot currently book into SDEC and no DOS Selections listed – 0 is correct
G16 to G19	Community Pharmacy Services	Unable to provide these figures.
G20 to G23	Face to face consultations in an IUC	SCAS does not hold this data – we have experienced problems gathering data from Providers.
H13 to H16	Treatment Centre or home residence	

Comments for 111AG9 Thames Valley

Data item	Description	Comments
A02	Calls routed through IVR	No IVR at call start when passed to service. 0 is correct.

A05	External clinician calls to Clinical Assessment Service (CAS)	Unable to provide this figure.
A06	Unscheduled IUC attendances	SCAS does not hold this data as we have experienced problems gathering data from Providers. 0 is correct.
B07, B08	Call answer / abandonment time	We do not have data for these items as our telephony system does not record specific call answer data but records the times as in buckets of 2 seconds / 10 seconds / 60 seconds dependent on how long the CA time is - as such we cannot accurately provide for these.
C05	Number of calls where person triaged by any other Clinician	No known "Other" clinicians operate – 0 is correct
C06	Calls where person triaged by staff type not within the other 4 categories	Contains cases where staff role was unable to be found in system as well as calls originating from 999.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because only monthly figures include clinical input into calls transferred from the 999 service (A04) and because monthly data includes a manual adjustment to account for some 111 calls listing as external when transferred (mostly to Mental Health and Dental teams) creating a new call with no triage listing for clinical involvement.
D03	Calls assessed by an advanced nurse practitioner	Do not operate this staff type anymore – 0 is correct
D11	Calls with clinician or Clinical Advisor input into the assessment but where the clinician hasn't spoken to the caller	Unable to provide this item.
D12	Number of Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	Do not operate Natural Language Processing (NLP) – 0 is correct
F01 to F03	Directory of Service	Unable to provide these figures.
G02 to G11	DoS Selections	This month's figures include DoS selections made by external providers, calculated by combining DOS Service Types and Appointments from External records.
G11	SDEC bookings	Cannot currently book into SDEC and no DOS Selections listed – 0 is correct
G16 to G19	Community Pharmacy Services	Unable to provide these figures.
G20 to G23		

H13 to H16	Face to face consultations in an IUC Treatment Centre or home residence	SCAS does not hold this data – we have experienced problems gathering data from Providers.
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SECAMB

Comments for 111AI9 Kent, Medway & Sussex

Data item	Description	Comments
D14	Number of callers offered a call back within 20 minutes (immediately), who received a call back within 20 minutes	The % rate and volume of cases requiring Direct Clinical Contact has been on the increase in recent months, above expected activity levels; any improvement in clinical prioritisation is occurring in the context of high activity. The service reported a significant improvement in clinical response rates in January, this is a tangible result of continued focus on clinical prioritisation but is still partially dependent on activity levels.
D18	Callers offered a call back within a timeframe over 1 hour, who received a call back within the specified timeframe	
F02	Directory of Services: no service available other than ED (ED catch-all)	Unable to identify this value in the Cleric platform.
G10, G11	SDEC referrals and bookings	CCGs are currently working on optimising the DoS profiling and eligibility of SDEC services but for now these data items are unavailable.
G20, G21, G22, G23	Face to face consultations	Agreed with our Lead Commissioner that these are out of scope, as not relevant to our operating model.

VOCARE

Comments for 111AF1 Cornwall

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures is due to a problem with weekly data for w/e 6 th Feb.
A03	Number of answered calls	
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
C01	Number of calls where person triaged	Figure exceeds answered calls (A03) because of taking the star line calls of the Vocare/Totally telephone platform due to the local impact of not being able to route through to our CAS and experiencing unacceptable delays routing into Vocare.

		Disparity with provisional figures is due to a problem with weekly data for w/e 6 th Feb.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is due to a problem with weekly data for w/e 6 th Feb.
F02	Directory of Services: no service available other than ED (ED catch-all)	No service available in January.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	
G06, G07	DoS selections for UTC	These services aren't available/commissioned in Cornwall.
G10, G11	SDEC referrals and bookings	No cases arose to report.

Comments for 111AF4 Staffordshire

Extended access bookings are not recorded in the data for all areas in Staffordshire due to manual work arounds. The CCG are leading on programme of works to move access of these services to DOS/ITK.

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures is due to a problem with weekly data for w/e 6 th Feb.
A03	Number of answered calls	
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
C01	Number of calls where person triaged	
D01	Calls assessed by a clinician or Clinical Advisor	
G06, G07	UTC Bookings	Staffordshire does not have any operational UTCs, the small numbers seen each month are often boarder/contingency calls assessed and booked into other UTCs.
G10, G11	SDEC referrals and bookings	No cases arose to report.
G22, G23	Patients receiving a face to face consultation in an IUC Treatment Centre within the timeframe agreed	Service continues to implement a number of measures under SIP to improve performance in F2F services.

Comments for 111AG5 South West London

Since 7 September 2021, a proportion of South West London services has been delivered by LAS: figures are under-reported as they only reflect services provided by Vocare. LAS activity equates to around 20% of contracted calls, excluding any contingency calls that may be routed to LAS. A complete dataset for SWL will not be available until June 2022 when new contractual arrangements should be in place.

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures is due to a problem with weekly data for w/e 6 th Feb.
A03	Number of answered calls	
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
C01	Number of calls where person triaged	
D01	Calls assessed by a clinician or Clinical Advisor	
G06	DoS selections – UTC	No service available in January.
G07	Number of calls where the caller was booked into a UTC	
G10, G11	SDEC referrals and bookings	No cases arose to report.

WMAS

Comments for 1111A18 West Midlands

Data item	Description	Comments
A03	Number of answered calls	Improvement in call answer performance since last month is due to fewer calls received combined with recruitment of additional call takers trained over recent months.
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Data items not applicable at this time.
A06	Unscheduled IUC attendances	
C01	Number of calls where person triaged	C01 exceeds A03 where a call involves more than one patient to be triaged – either family members or even care home residents. This appears to have been more of an issue due to potential Covid patients.

D01	Calls assessed by a clinician or Clinical Advisor	Drop off in this item since we moved to Cleric (November data being the first full month of Cleric data). We have identified scenarios where the clinician data is not captured in a way we can currently report on and are looking into how this can be resolved in future.
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	Data item not applicable at this time.
D14	Number of callers offered a call back, who received a call back within the required timeframe	Call backs have taken longer because additional call takers have been able to triage more calls but there has not been the same proportionate increase in numbers of clinical staff.
D19	Calls assessed by a clinician or Clinical Advisor which originated from an external NHS 111 provider	Data not available currently.
E21	Calls initially given a category 3 or 4 ambulance disposition that are validated within 30 minutes	Validations are taking longer because additional call takers have been able to triage more calls but there has not been the same proportionate increase in numbers of clinical staff.
E27	Number of calls initially given an ED disposition that are validated	
G04, G05	IUC Treatment Centre selections	Appointment utilisation is impacted upon by the availability of appointments within the triage disposition timeframe. Often, available appointments are after the window for attendance.
G12, G13	Calls received by Dental services	Data item not applicable at this time.
G16 to G19	Community Pharmacy Service	Data not available currently.
G20 to G23	Face to face consultations	
H13 to H18	NHS 111 Online contacts	