

Integrated Urgent Care, England Aggregate Data Collection, March 2022

This publication provides a summary of Integrated Urgent Care Services in England during March 2022. The Integrated Urgent Care Aggregate Data Collection (IUC ADC) covers the whole of integrated urgent care services and is used to report the IUC Key Performance Indicators (KPIs)¹. Underlying data and further details about the IUC ADC are [here](#).

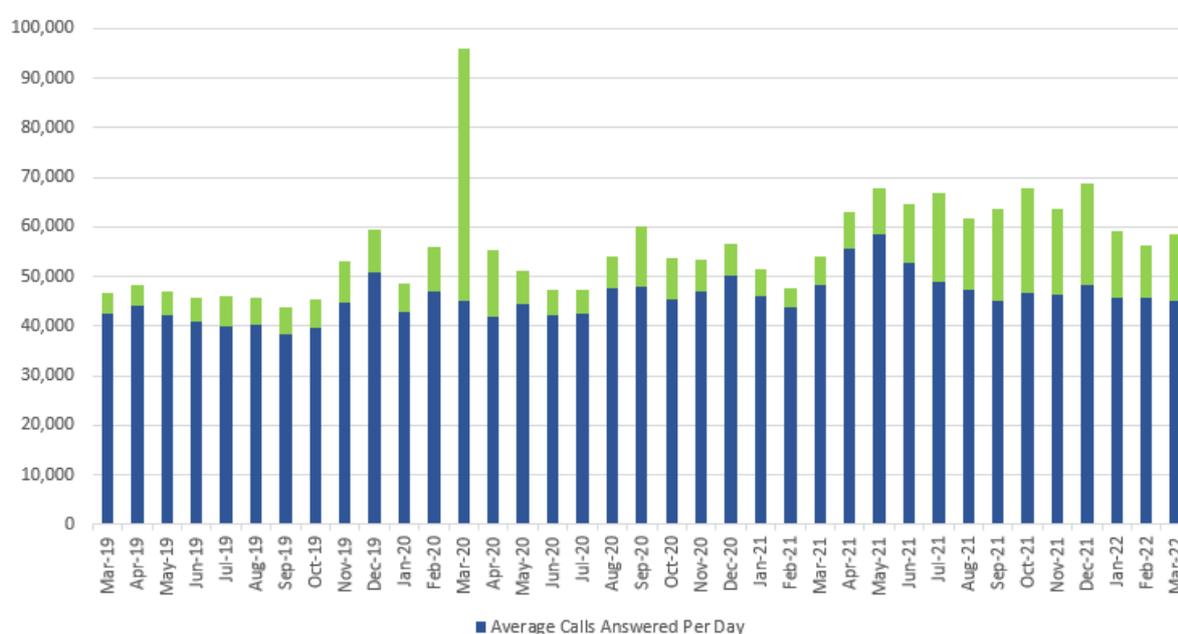
Figures replace those in the provisional March IUC ADC published last month.

Key Facts^{2,3}

In March 2022 in England:

- 1,818,579 calls were received by NHS 111, an average of 58.7 thousand per day. This is an increase of 2.4 thousand calls per day compared to the previous month, which was 56.2 thousand calls per day. In March 2021 the figure was 54.2 thousand per day.
- 16.8% of calls were abandoned after call steering IVR; this includes 15.0% abandoned after waiting more than 30 seconds. In February 2022, 12.3% of calls were abandoned after call steering IVR; this includes 10.7% abandoned after waiting more than 30 seconds.
- The average time to call answer was 396 seconds and 44.5% of calls were answered within 60 seconds. This compares with 267 seconds and 54.1% of calls in February 2022. In March 2021 calls answered within 60 seconds was 78.2%.
- Callers spoke to a clinician or clinical advisor in 51.5% of triaged calls. This is an increase of 0.1 percentage points from 51.4% the previous month. In March 2021 the figure was 52.1%.
- 11.2% of triaged calls were referred to the Ambulance service, which was a decrease from 11.4% in February 2022. In March 2021, 12.1% of triaged calls were referred to the Ambulance service.
- 12.3% of triaged calls were recommended to attend an Emergency Department, which was no change from 12.3% in February 2022. In March 2021 the figure was 11.3%.
- 22.3% of callers were recommended self-care after being assessed by a clinician or clinical advisor. In February 2022, 25.2% of callers were recommended self-care after being assessed by a clinician or clinical advisor.

Figure 1: Average Number of Calls Received Per Day: England, 2019 - 2022



IUC ADC Revisions

Revisions to IUCADC official statistics for the months April 2021 to September 2021 inclusive are published alongside the March 2022 data this month.

At the national level the revisions affected the whole period, and each data item has had at least one change.

Revisions will be published periodically (usually every six months) in line with NHS England Analytical Service team's [revisions policy](#).

Scope

The IUC ADC monitors the effectiveness of integrated urgent care services⁴ commissioned by the NHS in England through the NHS 111 single entry point. IUC is the provision of a functionally integrated 24/7 urgent care access, clinical advice and treatment service (incorporating NHS 111, Clinical Assessment Services and out of hours services). IUC is provided by a variety of organisations, including ambulance services, private companies, not for profit organisations and NHS Trusts. The IUC ADC covers end to end IUC services, excluding NHS 111 Online contacts, unless otherwise stated.

Data Quality

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 IUC services to identify lead data suppliers and ensure that data are provided each month. While lead data suppliers are responsible for collating and coordinating information for the IUC ADC, they are not necessarily contracted to deliver all NHS 111 and out of hours services in the contract area. The quality of data in this report is therefore dependent upon all parts of the IUC service providing data to the relevant lead data supplier. 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.

Details of comments received from lead data suppliers about specific aspects of data quality can be found [here](#). This include details about missing or incomplete data; we recommend that this information is considered when interpreting figures.

Contacts

For press enquiries, please contact the NHS England press office on 0113 825 0958 or nhsengland.media@nhs.net.

Other enquiries about the published statistics should be referred to
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Footnotes

¹ From April 2021, the IUC ADC has been revised and replaces the NHS 111 Minimum Data Set (111 MDS) as the primary source of statistics about NHS 111 and integrated urgent care services. Although there is some overlap with previous collections, care should be taken when comparing with data collected before April 2021 due to definitional differences.

² When comparing with previous months' figures, please be aware that call volumes will be affected by the number of days in the month, the number of public holidays and the number of weekend days.

³The number of calls received may not reflect total demand for NHS 111 services at a given time. This is because calls received are affected by the national busy message which is routinely turned on during periods of high caller demand (and was almost permanently turned on since June 2021). The busy message causes around 10% of callers to hang up before their call is delivered to a provider. These calls are not included as calls received in the IUC ADC.

An additional service was introduced from 15 February to end March 2022 to alleviate pressure on NHS 111 services. Patients needing repeat prescriptions were transferred to the Repeat Prescription Service after calling NHS 111. These calls are not included in the IUC ADC.

⁴ Integrated Urgent Care Services are described in detail in the [IUC service specification](#).