

## IUC ADC June 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.

### BRISDOC

Comments for 111A15 Bristol, North Somerset & South Gloucestershire  
CAS data for DoS selections, telephony and appointments are not available.

Data item	Description	Comments
B01 to B11	Call handling	CAS data not included as unavailable.
B01	Calls answered within 60 seconds	Multiple factors impacted on call-handling performance this month: <ul style="list-style-type: none"> <li>- Consistently high demand, with Covid rates remaining high, and overall a lot of pressure on the service</li> <li>- Workforce challenges with retention becoming more challenging</li> <li>- SVCC in South East having an impact on the PPG Network as a whole.</li> </ul>
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	Data currently unavailable.
D11	Calls with clinician or Clinical Advisor input into the assessment but where the clinician hasn't spoken to the caller	

E14	Callers recommended repeat prescription medication	CAS data not included.
E19 to E30	Validation of Dispositions	PPG as NHS111 provider run bespoke processes for ED and 999 validations data, which typically result in higher validation rates than can be captured via ADC.
E27	Number of calls initially given an ETC disposition that are validated	PPG operate a bespoke system for validations that we currently cannot capture via the ADC process. This is a result of the System CAS using the DoS profile to manage calls with ED dispositions. Cases that are validated no longer go to the 111 CA queue but are picked up via DoS so that they are available to the System CAS.
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 G14	Caller given an appointment	Figures exclude CAS activity as they are 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. This will occasionally be zero.
G07	Number of calls where the caller was booked into a UTC	DoS profile for UTC in BNSSG results in increased UTC selections, but not bookings.
G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	Direct bookings to ED 1&2 are disabled. Values seen are for UTCs and out-of-region ED services only. Bookings made by CAS are not available to our data capturing process.
G10, G11	DoS selections – SDEC service	SDEC is not being used at all within the contract area.
G16 to G19	Community pharmacy service	Figures exclude CAS activity as they are unavailable.
H01 to H09	NHS 111 Online contacts	CAS data not included as not available.

## DEVON DOCS

Comments for 111A16 Devon

Data Items	Description	Comments
F02	Directory of Services: no service available other than ED (ED catch-all)	Data unavailable.
F03	Calls where the caller is allocated the first service offered by DoS	
G10, G11	SDEC service bookings	We currently do not have or book into a SDEC service.

Comments for 111AH8 Somerset

Data Items	Description	Comments
F02	Directory of Services: no service available other than ED (ED catch-all)	Data unavailable.
G10, G11	SDEC service bookings	We currently do not have or book into a SDEC service.

## DHU

Comments for 111AJ8 Derbyshire (DHU)

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service	Not applicable to service.
B01	Calls answered within 60 seconds	Figures reflect dip in call performance 5th-20th June when health advisor staffing was lower than was needed to meet high call demand.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional data due to weekly submissions missing some end of week activity where the clinical touchpoint does not occur until Monday morning.
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	Not applicable to service.
G04	DoS selections - IUC Treatment Centre	Some activity for G04 is due to case contracts with an unknown location that are assigned a DHU-held contract based on these populations split proportionally (mostly GP OOH services).
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 111AK7 Leicestershire and Rutland (DHU)

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Null – not applicable to our service.
B01	Number of calls answered within 60 seconds	Figures reflect dip in call performance 5th-20th June when health advisor staffing was lower than was needed to meet high call demand.
B02	Number of calls abandoned	
B06	Total time to call answer	

B07	95th centile call answer time	
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional data due to weekly submissions missing some end of week activity where the clinical touchpoint does not occur until 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.
D23	Callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20 minutes, who were warm transferred or received a call back within the specified timeframe	Figures reflect clinical staffing pressures.
G11	SDEC service bookings	None recorded this month.
G12, G13	Dental services bookings	Null not – these are applicable to our service.
G16 to G19	Community pharmacy service referrals	

Comments for 111AK6 Lincolnshire

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Null – not applicable to our service.
B01	Calls answered within 60 seconds	Figures reflect dip in call performance 5th-20th June when health advisor staffing was lower than was needed to meet high call demand.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
D01	Calls assessed by a clinician or Clinical Advisor	Figures no longer include Lincs CAS data as we do not have access to these data. Performance impacted by provision of health advisor staffing in the latter half of the month.
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.
D14, D23	Callers who needed to speak to a clinician or Clinical Advisor and were warm transferred or received a call back within specified timeframe	Performance affected by clinical staffing.
E01 to E18	Number of dispositions	Figures are under-reported this month as we no longer have access to Lincs CAS data.

E27	Calls initially given an ETC disposition that are validated	Figures are under-reported. DHU do not provide an ED validation services for Lincs and do not have access to this data.
G01	Calls where caller given an appointment	Supplied figure includes GP Extended Access, Home Visiting and IUC.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	Low outcome due to small numbers being booked in. Any bookings made by Lincolnshire CAS will also be excluded.
G11	DoS selections – SDEC service	CAS colleagues are unable to book patients into SDEC.
G12, G13	Dental service bookings	Not applicable to service.
G16 to G19	Community pharmacy service referrals	
G20, G21	Number of patients requiring a face to face consultation in their home residence	Figures are under-reported. DHU do not provide a home visiting service for Lincs and do not have access to this data.
G22, G23	Number of patients receiving a face to face consultation in an IUC Treatment Centre within the timeframe agreed	Figures are under-reported. Few patients from Lincs will have a f2f consult in IUC TC amongst DHU-led services. We do not have access to external data for IUC TC f2f consults in Lincs.

#### Comments for 111AC7 Milton Keynes

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Not applicable to service.
B01	Calls answered within 60 seconds	Figures reflect dip in call performance 5th-20th June when health advisor staffing was lower than was needed to meet high call demand.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional data due to weekly submissions missing some end of week activity where the clinical touchpoint does not occur until Monday morning.
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	Not applicable to service.
D23	Callers who needed to speak to a clinician or Clinical Advisor and were warm	Performance affected by clinical staffing.

	transferred or received a call back within specified timeframe	
E27	Number of calls initially given an ETC disposition that are validated	Figures are under-reported as they do not include dispositions sent to an external provider for validation.
G04, G05	IUC Treatment Centre DoS selections / bookings	G04 mostly includes DoS selections for GP OOH services, including case contracts with an unknown location that are assigned a DHU-held contract based on the populations split proportionally. These result in very few bookings.
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.
G22, G23	Patients requiring / receiving a face to face consultation in an IUC Treatment Centre within the timeframe agreed	Majority of IUC treatment centre face to face data received externally. This data does not contain timeframe activity.

Comments for 111AC6 Northamptonshire

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Not applicable to service.
B01	Calls answered within 60 seconds	Figures reflect dip in call performance 5th-20th June when health advisor staffing was lower than was needed to meet high call demand.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional data due to weekly submissions missing some end of week activity where the clinical touchpoint does not occur until Monday morning.
D12	Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	Not applicable to service.
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
A04	Calls transferred from the 999 Ambulance Service into NHS 111	No data available. Unable to identify individuals calls from 999 service.
B01	Number of calls answered within 60 seconds	Change in call handling performance since last month is most likely due to bank holidays and recent Covid cases spike. Although there were similar call volumes, call distribution patterns through the month were different. We also continue to face absences due to Covid-19.
B02	Number of calls abandoned	
B07	Total time to call answer	
C02	Calls where person triaged by a Service Advisor	This item is zero and does not apply to our service at this time.
D01	Calls assessed by a clinician or Clinical Advisor	D01 does not equal the sum of its parts (D02, D03, D04, D05, D06, D07, D08 & D09) due to data issues with staff roles which Dorset HC are working to resolve.  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	
D14	Callers who needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who were warm transferred or received a call back within 20 minutes	
G01	Number of calls where caller given an appointment	G01 does not equal the result of G03, G05, G07, G09, G11, G13, G14 due to data issues with staff roles which Dorset HC are working to resolve.
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.
H11, H12	NHS 111 Online contacts with SDEC appointment	These are confirmed as true zeroes
H18	NHS 111 Online contacts initially given an ED disposition	

## HUC

### Comments for 111AC5 Cambridgeshire & Peterborough

Data item	Description	Comments
A01	Number of calls received	All HUC contracts saw a rise in call volumes in June. There was a spike in calls for the C&P IUC contract around the 11 <sup>th</sup> to 13 <sup>th</sup> June.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures was caused by a weekly report failing to run on 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 a Type 1 or 2 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.
G10, G11	SDEC service bookings	Continues to be work in progress.

### Comments for 111AB2 Hertfordshire

Data item	Description	Comments
B01	Calls answered within 60 seconds	Performance affected by an increased number of calls, the bank holiday and an increase in Covid calls.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional data is because errors in weekly reporting have been fixed in monthly figures.
G10, G11	SDEC service bookings	Continues to be work in progress.



Comments for 111AG7 Luton & Bedfordshire

Data item	Description	Comments
B01	Calls answered within 60 seconds	Call performance figures reflect an increase in the level of calls received throughout June compared to previous months which stretched the available resources, particularly on weekends where there were challenges with shift fill.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional data is due to delays with weekend reports resulting in incomplete weekly figures.
E21	Number of calls initially given a category 3 or 4 ambulance disposition that are validated within 30 minutes	Performance affected by challenges with shift fill within CAS services over June.
G10, G11	SDEC service bookings	Occasionally patients are referred to an SDEC but numbers will be small, although functionality isn't yet available for SDEC appointments to be booked by 111.

Comments for 111AI3 West Essex

Data item	Description	Comments
B01	Number of calls answered within 60 seconds	Call performance was reduced over the weekends due to high call volumes and sickness. Disparity with provisional B01 & D01 figures is due to end of month reconciliations.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
D01	Calls assessed by a clinician or Clinical Advisor	Performance affected by challenges with shift fill within CAS services since June.
E21	Calls initially given a category 3 or 4 ambulance disposition that are validated within 30 minutes	
G10, G11	SDEC service bookings	Continues to be work in progress.

**IC24**

Comments for 111AH4 Mid & South Essex

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	Bank holidays and COVID infections increased the call volume this month. In addition, the estimated wait time function may have led to patients calling back at a less busy time for the service, increasing the overall volume of calls received.
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	Number of calls answered within 60 seconds	Disparity with provisional figures due to weekly data being submitting before the System One run had completed.
B02	Number of calls abandoned	40% of calls abandoned happened within 30 seconds, probably as a result of the estimated wait time function.
B06	Total time to call answer	Average wait times were higher on the bank holidays (2 <sup>nd</sup> and 3 <sup>rd</sup> of June) than any other day, which pushed up the monthly average.
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.
D11	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	Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	Due to the way that our calls are currently aggregated, centile figures may be inaccurate.
D23	Callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20 minutes, who were warm transferred or received a call back within the specified timeframe	Unable to provide this figure this month.
E17	Number of callers recommended self-care at the end of clinical input	It is likely that we are under-reporting self-care advice when clinicians have advised home management in the consult notes but have not correctly changed the call to a self-care disposition.

G01	Number of calls where caller given an appointment	Although a greater number of patients required an appointment this month than in May, fewer appointments were given due to difficulties with staffing.
G03	Number of calls where the caller was booked into a GP Practice or GP access hub	There are not enough bookable appointments across GP and GP hub for patients with the relevant disposition code.
G11	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	Calls received by dental services not using DoS that resulted in a booked appointment	
H17	NHS 111 Online contacts initially given an ETC disposition which the patient has agreed to clinical contact and provided the necessary information for a callback	
H18	NHS 111 Online contacts initially given an ETC 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	Increase since last month driven primarily by the bank holiday – more calls were received on 2 <sup>nd</sup> and 3 <sup>rd</sup> June than any other day of the month.
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	Number of calls answered within 60 seconds	Disparity with provisional data is related to difficulties with warehouse loads during the month. This was rectified for the monthly submission.

		Increased call volumes and high intensity periods have resulted in an increase in call waits this month.
B02	Number of calls abandoned	39% of the calls abandoned are happening within the first 30s of the call – up from 28% in May.
B06	Total time to call answer	Increased call volumes and high intensity periods have resulted in an increase in call waits this month.
B07, B08	Call answer centiles	Due to the way that our calls are currently aggregated, centile figures may be inaccurate.
D11	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	Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	Due to the way that our calls are currently aggregated, centile figures may be inaccurate.
D23	Callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20 minutes, who were warm transferred or received a call back within the specified timeframe	Performance affected by rota fill for clinicians in June
E17	Number of callers recommended self-care at the end of clinical input	It is likely that we are under-reporting self-care advice when clinicians have advised home management in the consult notes but have not correctly changed the call to a self-care disposition.
G01	Number of calls where caller given an appointment	Although a greater number of patients required an appointment this month than in May, fewer appointments were given due to difficulties with staffing.
G03	Number of calls where the caller was booked into a GP Practice or GP access hub	There are not enough bookable appointments across GP and GP hub for patients with the relevant disposition code.
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 reporting.
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 ETC 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 ETC 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
A07	Calls which originated from an external NHS 111 provider	A07 is excluded from our submission as this total is already included in A01
B01	Calls answered within 60 seconds	Call-handling performance affected by demand and staff vacancies/training.
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	Calls forwarded to our remote Clinical Assessment Services (CAS) not included.
E26, E27	Calls initially given an ETC 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.
F03	Calls where the caller is allocated the first service type offered by DoS	As Adastra's SSRS reporting software has not been updated to reflect changes in the IUC ADC specification for 2022/23, F03 is under-reported as it only includes calls where

		the caller was allocated the first service offered by DoS (in line with the IUC ADC specification for 2021/22).
G01 to G10	Callers given appointments and booking types	Disparity with provisional data due to refinement of our monthly calculations to comply with the new specification definitions. At this time, we do not book appointments into several services. For example, almost 2/3 of our ETC dispositions are referred to services other than ETC (UTC / IUC etc) where we do not currently book appointments. In addition, high volumes of out of area calls reduces the opportunity to book appointments.
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.
H03 to H12	NHS 111 Online	As Adastra's SSRS reporting software has not been updated to reflect changes in the IUC ADC specification for 2022/23, NHS 111 Online contacts these data items are reported using the definitions in the IUC ADC specification for 2021/22).

## LAS

Comments for 111AH5 North East London

Data item	Description	Comments
B01	Number of calls answered within 60 seconds	Call handling performance was affected by available resources struggling to cope with demand above forecast.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is a result of data reconciliation at the end of the month.
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
A04	Calls transferred from the 999 Ambulance Service into NHS 111	A04 may be under-reported, although these calls are included in C01 where they are triaged.
C01	Number of calls where person triaged	
D20 to D25	Clinical assessment for callers requiring assessment	There are gaps in the figures submitted for D20 to D25 as we received some un-validated CAS data from LCW.
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded usually.

Comments for 111AD7 South East London

Data item	Description	Comments
A03	Number of answered calls	Call handling performance was affected by available resources struggling to cope with demand.
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	
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional data is because we have updated numbers missing from our resilience partners during weekly submission windows.
G23	Number of patients receiving a face to face consultation in an IUC Treatment Centre within the timeframe agreed	Figures are missing some face to face consultations. Referrals are being made for which appointments are not recording on the ADASTRA system.

**LCW**

Comments for 111AD5 North Central London

Data item	Description	Comments
A01	Number of calls received	The Single Virtual Contact Centre (SVCC) for London continued to be utilised throughout June. Activity was down against forecast and on previous months. Initial investigations indicate 28% of NCL activity was routed to other providers.

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.
A03	Number of answered calls	Performance affected by unplanned sickness and Health Advisor staff vacancies.
A07	Calls which originated from an external NHS 111 provider	Figure estimated as not provided in the current suite of reports we run from Adastra.
B01	Calls answered within 60 seconds	Performance affected by unplanned sickness and Health Advisor staff vacancies. Telephony performance was also affected by SVCC routing, which resulted in larger queues when all London providers were experiencing high call volumes and therefore extended wait times for patients.
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 Adastra 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 Adastra system if a case is modified or has multiple call-backs.
C01	Number of calls where person triaged	This is under-reported in Adastra where some cases are not marked as being triaged even though they have had a triaged and have a disposition recorded.
D04	Calls assessed by a mental health nurse	None working in the service.
D07	Calls assessed by a dental nurse	
D10	Number of calls assessed by a clinician or Clinical Advisor that were warm transferred	This figure is from the Adastra report and is lower than expected.
D12	NLP calls that resulted in a caller speaking to a clinician or Clinical Advisor	Not applicable for our service.
D13, D14	Callers who needed to speak to a clinician or Clinical Advisor and were warm transferred or received a call back within 20 minutes	Mapping tables used to create these figures being investigated with Advanced.
D20 to D26	Clinical assessment	Figures not provided in the current suite of reports we run from Adastra.
E05	Callers recommended to attend Same Day Emergency Care (SDEC)	Figures are low due to restrictive criteria for referral into the service.
E20-E25	Calls initially given a category 3 or 4 ambulance disposition that are validated	Affected by the new process to transfer all ambulance validations to LAS, which started mid-April. The case transfer is done via ITK. The data has been



		aggregated with LAS and performance is now reflective of all cases being validated by both services.
E27-E31	ETC validated	The validation figures are lower than actual due to the cases being transferred via the DoS for validation, using final Dx codes and not the interim validation codes for ED validations.
F01	Calls where the Directory of Services is opened	F01 includes calls received for triaged from LAS (A04) and other external 111 providers (A07).
F03	Calls where caller is allocated the first service type 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, G10	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.
G19	Calls where a referral to a community pharmacy service was made for minor illness	Data missing from reports in Adastra.
H11, H12	NHS 111 Online contacts that resulted in patient being given an appointment with an SDEC	SDEC services in the area, do not offer appointments via the DoS.
H17, H18	NHS 111 Online contacts initially given an ETC disposition that are validated	This data item is lower than expected due to a case type mapping issue.

## MEDVIVO

Comments for 111AJ2 BaNES, Swindon & Wiltshire

Data item	Description	Comments
B02	Number of calls abandoned	Bank holidays and Covid absence caused staffing levels to decrease resulting in more challenging performance in June.
B06	Total time to call answer	
B07	95th centile call answer time	
D01	Calls assessed by a clinician or Clinical Advisor	The disparity with provisional figures relates to the point in time when the weekly reporting is processed – the weekly report is due on Monday morning – at the time it is processed/produced there are still live Sat/Sun cases which have yet to be resolved (ie. not all cases, at that point in time, will be resolved/closed) – when the monthly report is run all

		cases will have been resolved and some which had previously been reported weekly will have an 'updated' D01 value that does not match that which was previously reported.
F02	DoS: no service available other than ED (ED catch-all)	Zero return this month.
G10, G11	SDEC service bookings	The BSW IUC doesn't typically yet use SDEC.
G20	Number of patients requiring a face to face consultation in their home residence	We are currently aware of a change in operational handling of Home Visits which may be having an impact on reporting (Home Visit validations have been introduced which may be erroneously being reported as Home Visits).

### 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. Data submitted for NWAS, Bardoc (HMR/Bolton/Bury), East Cheshire, FCMS (Fylde Coast), Blackburn with Darwen and East Lancashire. Likely to be double counting of some data items due to double triage by CAS provider(s) and NWAS reporting for the whole of the NW area. 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
B07	95th centile call answer time (seconds)	The 95th centiles are simply the summation of the individual returns and not recalculated from the individual returns.
D01 to D09	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because different providers submit monthly and weekly returns. Both weekly and monthly figures exclude data from some service providers. In addition, FCMS (Fylde Coast) has revisited the definitions and subsequently made some changes to their report.
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	The 95th centiles are simply the summation of the individual returns and not recalculated from the individual returns.
D25	95th centile time to clinical assessment for callers requiring assessment within a timeframe over 20 minutes	

E01 to E30	Calls with Clinical Input, IUC Recommendations (Dispositions) and Validation of Dispositions	Figures exclude data from some service providers. Less than 50% of the CAS/OOH are currently being reported.
E01	Total number of dispositions	Exceeds number of calls where person triaged (C01) due to double-counting calls reported by NWAS and the other providers. C01 = NWAS only. E01 = NWAS plus CAS providers.
E25	Total wait time to category 3 or 4 ambulance validation (seconds)	CAS providers are unable to provide the data for E25.
G01	Calls where caller given an appointment	Exceeded by 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	IUC Service Integration	Figures exclude data from some service providers. Less than 50% of the CAS/OOH are currently being reported.
G10, G11	SDEC service	G10 includes NWAS only; G11 includes NWAS and CAS providers.
G14	Calls where caller given any other appointment	Figures exclude data from some service providers. Less than 50% of the CAS/OOH are currently being reported.
G21, G20	Number of patients receiving a face to face consultation in their home residence within the timeframe agreed	Only a <u>small</u> proportion of the OOH providers are being reported at the moment (numerator G21 & G23 – OOH only against the denominator G20 & G22 – reported by NWAS & OOH).
G22, G23	Number of patients receiving a face to face consultation in an IUC Treatment Centre within the timeframe agreed	
H01, H02, H04, H13 to H18	NHS 111 Online Contacts	Figures exclude data from some service providers. Less than 50% of the CAS/OOH are currently being reported.

## 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.

A07	Calls which originated from an external NHS 111 provider	We are unable to separately identify calls that are transferred from another 111 provider in SystmOne.
B09	Total time of abandoned calls	We do not have the system capability to extract this information.
C01	Number of calls where person triaged	We are unable to identify the origin of the call when it's passed into SystmOne, therefore figures incorrectly include some cases originating from NHS 111 Online & some cases passed electronically from another 111 provider. Currently there is no way to differentiate these from a legitimate triaged calls.
D01	Calls assessed by a clinician or Clinical Advisor	Locally agreed processes reduce the pool of cases which require clinical interaction. Both E21 & E27 reduce the volume of calls requiring clinical input.
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.
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	
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.
D26	Number of calls assessed by a clinician or Clinical Advisor by video consultation	We cannot currently provide 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 ETC 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 ETC 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 type 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.
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 separately identify this information. Contacts generated from NHS 111 Online activity are included in the corresponding data items in sections D and G.

## NECS

Comments for 111A17 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
A07	Calls which originated from an external NHS 111 provider	Data is not currently available from YAS but is provided by several GPOOH providers.
B01	Calls answered within 60 seconds	These performance figures have declined in June when compared to May due to increased demand pressures and reduced staff capacity.
B02	Number of calls abandoned	
B06	Total time to call answer	

B07	95th centile call answer time	
B07	95th centile call answer time (seconds)	LCD Dental cannot provide item B07 - therefore this is 111 data only.
C01	Calls where person triaged	Disparity with provisional data is because weekly submissions include YAS activity only.
D01	Calls assessed by a clinician or Clinical Advisor	
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.
D23	Callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20 minutes, who were warm transferred or received a call back within the specified timeframe	Reporting still being developed to ensure figures are correct.
D26	Calls assessed by a clinician or Clinical Advisor by video consultation	Not currently recorded separately to other data. YAS is looking into how to obtain this information.
E01 to E18	Total number of dispositions	Total dispositions (E01) is 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	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.
E17	Callers recommended self-care at the end of clinical input	We are not receiving a figure for E17 from the dental provider which is lowering the figure.
E24	Number of calls initially given a category 3 or 4 ambulance disposition that are given a non-ambulance setting disposition after validation	YAS follow a slightly different process when it comes to C3/4 validations. In YAS we complete some calls earlier on in the process that require an ambulance or can attend the Emergency Department without needing to speak to a clinician. This means that YAS downgrade less calls via the national model of a clinician call back as the majority of these downgrades are picked up earlier on in the process.

E27 to E29	Calls initially given an ETC disposition that are validated	ED validations are turned off when demand pressure is high.
G01 to G14	Number of calls where caller given an appointment	G01 contains bookings across the system, comprising bookings by YAS as well as estimated bookings made by other OOH providers (based on assumptions made about how many cases these providers go on to book). Disparity with provisional data is because weekly submissions include YAS activity only; monthly data includes bookings from providers across the system. The difference is large because YAS refer a lot of cases to OOH providers and don't book in many patients.
G11	SDEC selections	These figures will remain at low levels or zero 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, G18	Calls where a community pharmacy service was an option on DoS for repeat prescription medication / minor illness	YAS cannot currently provide these items due to data on DoS options available for each call not being available through Aadastra.
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 to 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.

## NHS Black Country and West Birmingham CCG

Comments for 1111AK5 West Midlands

Data item	Description	Comments
A06	Unscheduled IUC attendances	Data items not applicable at this time.
D10	Calls assessed by a clinician or Clinical Advisor that were warm transferred	WMAS is not currently doing warm transfers
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	Data item not applicable at this time.
E27	Number of calls initially given an ETC disposition that are validated	At times of high demand for our clinicians, ED validation is sometimes not available.
G01	Calls where callers given an appointment	We can only book appointments into two out of our six OoHs providers.
G04, G05	IUC Treatment Centre selections/bookings	Appointment utilisation is impacted upon by the availability of appointments within the triage disposition timeframe. Often, available appointments are after the window for attendance.
G06, G07	UTC selections/bookings	None of our UTCs in BSOL have booking available - we electronically refer into the UTCs and they call patients back and book them in.
G11	SDEC	We rarely have SDEC cases and, if so, the numbers tend to be very small.
G12, G13	Calls received by Dental services	Data item not applicable at this time.
G15	Calls where repeat prescription medication was issued within your service	This item is currently missing. The 4 cases that were included this month were incomplete and should not have been part of the submission.
G20 to G23	Face to face consultations	Data not available currently.
H13 to H16	NHS 111 Online contacts	

## NOTTS CCG

Comments for 111AJ4 Nottinghamshire

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures is because NEMS CAS data are not currently being linked into weekly figures.
A03	Number of answered calls	
B02	Number of calls abandoned	



A04	Calls transferred from the 999 Ambulance Service into NHS 111	Null return as not yet able to collate this information.
B01	Calls answered within 60 seconds	Figures reflect dip in call performance 5th-20th June when health advisor staffing was lower than was needed to meet high call demand.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
C01	Number of calls where person triaged	Figures only include cases sent to 111 Clinical Advisors for assessment. No data are available on cases sent to NEMS CAS for clinical assessment.
D01	Calls assessed by a clinician or Clinical Advisor	
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 ETC 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 a Type 1 or 2 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.
G10, G11	SDEC selections	Not yet used within service
G12, G13	Bookings with dental services not using DoS	
G16 to G19	Referrals to community pharmacy services	
		Null return as not yet able to collate this information.

### PRACTICE PLUS GROUP (PPG)

Comments for 111AH2 Gloucestershire

Data item	Description	Comments
B01	Calls answered within 60 seconds	Call performance affected by an extensive increase in volume throughout June in comparison to May, in addition to the 4-day Jubilee bank holiday and rota fill impacted by a new Covid absence spike and annual leave.

B02	Number of calls abandoned	
B06	Total time to call answer	
E17	Callers recommended self-care at the end of clinical input	An additional cohort of Clinical Advisors were trained and went live with PACCS in April which helped improve self-care results despite.
E27	Number of calls initially given an ETC disposition that are validated	ED DoS validation became fully live in February 2022. This means that a number of ED cases are validated at the DoS stage and referred to another appropriate service such as an MIU and not to an ED. These cases are not included in E27. When we incorporate ED DoS validated cases, our ED validation rate (E27/E26) for the month of June is actually 70.4% rather than 16.7%.
G01	Number of calls where caller given an appointment	We can only give patients an appointment or booked timeslot with any service if they are made available to us. Looking at total slot utilisation (both ED & PC) of the slots made available to 111 to book, only 20 slots (2%) were not booked throughout June.
G05	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. During June there were only 3 slots made available to 111 staff to actually book into MIU's and 1 of those was booked.
G09	Number of calls where caller given a booked time slot with an ED	As with previous months, patients are booked time slots into ED if appointment slots are made available to book. During June there were no slots available for 111 to book directly into in 74% of total cases. Of the slots made available to 111 (88 slots), only 2% (6 slots) of those slots were not booked by our staff. Meaning 94% of the slots available to us were utilised and booked.
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 111AK9 South West London

PPG assumed responsibility of South West London from June 2022. Unfortunately, no data were received from LAS for June 14<sup>th</sup>–16<sup>th</sup> and data up to and including the 13<sup>th</sup> June isn't usable at this time.

Comments for 111A12 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
A01	Number of calls received	Includes calls from the following IVR lines: 111 HA IVR HCP, 111 HA IVR Prescription, 111 SU IVR HCP, 111 SU IVR Prescription. Calls received increased significantly over the Jubilee bank holiday weekend and contributed 19.5% of total calls offered for the month, despite the Jubilee Bank Holiday only accounting for 13.3% days of the month. The average demand per day across the bank holiday weekend increased by 57.2%. On Thursday 2nd and Friday 3rd June, the average demand per day doubled in comparison to the average Thursday and Friday demand for the month: <ul style="list-style-type: none"> <li>• Thursday &amp; Friday average calls offered = 4121 calls</li> <li>• Thursday 2<sup>nd</sup> and Friday 3<sup>rd</sup> average calls offered = 8259 calls (+100.4%)</li> </ul>
A02	Calls routed through IVR	No IVR at call start when passed to service. 0 is correct.
A03	Number of answered calls	Disparity with provisional figures is because monthly data includes calls from the following IVR lines: 111 HA IVR HCP, 111 HA IVR Prescription, 111 SU IVR HCP, 111 SU IVR Prescription.
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.
A07	Calls which originated from an external NHS 111 provider	As we cover two contract areas and cannot geographically apportion the calls to either, the total number of calls originating from an external provider has been split across the two areas.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	

B06	Total time to call answer	Call handling performance was affected by the increase in demand and a decline in logged-in hours since May 2022. As well as at the bank holiday weekend, performance notably declined on Saturday 25 <sup>th</sup> June. These shifts are service wide as SCAS operate a virtual call centre.
B07	95th centile call answer time	
C01	Number of calls where person triaged	Disparity with provisional figures is because only monthly figures include clinical input into calls transferred from the 999 service (A04) due to time it would take to run this data.
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	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
D26	Calls assessed by a clinician or Clinical Advisor by video consultation	Currently working on a solution for this
G02 to G11	DoS Selections	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.

G04	DoS selections – IUC Treatment Centre	We have corrected an issue this month that meant Urgent Care referrals were not previously being included in G04, even though the appointments were being included in G05.
G11	SDEC bookings	Cannot currently book into SDEC and no DOS Selections listed – 0 is correct
G14	Calls where caller given any other appointment	Due to systems issues, figures are provided in line with G03 / G05 / G07 / G09 / G11 and no longer reference section E.
G15	Calls where repeat prescription medication was issued within your service	Unable to provide this figure.
G20 to G23	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.
H13 to H16	NHS 111 Online contacts resulting in face to face consultations in an IUC Treatment Centre or home residence	

#### Comments for 111AG9 Thames Valley

Data item	Description	Comments
A01	Number of calls received	<p>Disparity with provisional data is because monthly figures includes calls from the following IVR lines: 111 HA IVR HCP, 111 HA IVR Prescription, 111 SU IVR HCP, 111 SU IVR Prescription.</p> <p>Calls offered increased significantly over the Jubilee bank holiday weekend and contributed 19.5% of total calls offered for the month – please note, the Jubilee Bank Holiday only accounts for 13.3% days of the month. The average demand per day across the bank holiday weekend increased by 57.2%. On Thursday 2nd and Friday 3rd June, the average demand per day doubled in comparison to the average Thursday and Friday demand for the month:</p> <ul style="list-style-type: none"> <li>Thursday &amp; Friday average calls offered = 4121 calls</li> </ul> <p>Thursday 2<sup>nd</sup> and Friday 3<sup>rd</sup> average calls offered = 8259 calls (+100.4%)</p>
A02	Calls routed through IVR	No IVR at call start when passed to service. 0 is correct.
A03	Number of answered calls	Disparity with provisional data is because monthly figures includes calls from the following IVR lines: 111 HA IVR HCP, 111 HA IVR Prescription, 111 SU IVR HCP, 111 SU IVR Prescription.

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.
A07	Calls which originated from an external NHS 111 provider	As we cover two contract areas and cannot geographically apportion the calls to either, the total number of calls originating from an external provider has been split across the two areas.
B01	Calls answered within 60 seconds	Call handling performance was affected by the increase in demand and a decline in logged-in hours since May 2022. As well as at the bank holiday weekend, performance notably declined on Saturday 25 <sup>th</sup> June.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
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. 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 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
D14	Number of callers who needed to speak to a clinician or Clinical Advisor within 20	Thames Valley has comparably less CAS provision than Hampshire Surrey Heath.

	minutes (immediately), who were warm transferred or received a call back within 20 minutes	
D26	Number of calls assessed by a clinician or Clinical Advisor by video consultation	Currently working on a solution for this
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.
G04	DoS selections – IUC Treatment Centre	We have identified that in previous months Urgent Care referrals were not being included in G04, although the appointments were being included in G05.
G14	Number of calls where caller given any other appointment	Due to systems issues, figures are provided in line with G03 / G05 / G07 / G09 / G11 and no longer reference section E.
G15	Number of calls where repeat prescription medication was issued within your service	Unable to provide this figure.
G20 to G23	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.
H03 to H12	NHS 111 Online contacts	This month's figures are in line with the revised ADC specification for 2022/23. The removal of the section E component from H03 to H12 was not made in the final values for April & May.
H13 to H16	NHS 111 Online contacts resulting in 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.

### SECAmb

Comments for 111A19 Kent, Medway & Sussex

Data item	Description	Comments
D14	Number of callers who needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who were warm transferred or received a call back within 20 minutes	The service continues to focus on improved clinical prioritisation.

D23	Number of callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20 minutes, who were warm transferred or received a call back within the specified timeframe	
D20	Average time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	New metrics effective from April 2022; currently in development as agreed with local commissioners.
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	
D24	Average time to clinical assessment for callers requiring assessment within a timeframe over 20 minutes	
D25	95th centile time to clinical assessment for callers requiring assessment within a timeframe over 20 minutes	
D26	Calls assessed by a clinician or Clinical Advisor by video consultation	
E21	Calls initially given a category 3 or 4 ambulance disposition that are validated within 30 minutes	Metrics currently unavailable.
E22	Calls initially given a category 3 or 4 ambulance disposition that are validated in over 30 and less than 60 minutes	
E25	Total wait time to category 3 or 4 ambulance validation	
E30	Total wait time to ETC validation (seconds)	
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

<b>Data item</b>	<b>Description</b>	<b>Comments</b>
G05	Number of calls where the caller was booked into an IUC Treatment Centre	There are restricted opportunities for direct booking post COVID.
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.

<b>Data item</b>	<b>Description</b>	<b>Comments</b>
G10, G11	SDEC referrals and bookings	No cases arose to report.