

IUC ADC August 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.

Performance and data quality were greatly affected this month by a cyber-attack on Thursday 4th August which caused a major outage on the Adastra system used by many IUC service providers. This had a widespread impact on the IUC service with many providers relying on paper record-keeping from that date onwards. This resulted in missing or under-reported data (mainly items C01 onwards) from the following suppliers: BRISDOC, Devon Docs, DHU, HUC, LAS, LCW, Medvivo, ML CSU, NECS and SCAS. Care should be taken when interpreting their figures.

BRISDOC

Comments for 111A15 Bristol, North Somerset & South Gloucestershire

At time of submission, no CAS data were available for 4 - 24 August inclusive due to Adastra system outage.

Data item	Description	Comments
D11	Calls with clinician or Clinical Advisor input into the assessment but where the clinician hasn't spoken to the caller	Data currently unavailable.



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.
G20 to G23	Patients receiving a face to face consultation in an IUC Treatment Centre	Data not available for August.
H01 to H09	NHS 111 Online contacts	CAS data not included as not available.

DEVON DOCS

Comments for 111AI6 Devon

From 20th July to 30th September, a proportion of the Devon Health and Care system's calls are directed to Vocare via a specific "Devon Vocare" line. These calls, and any subsequent activity relating to them, are not captured in the IUC ADC. In August, figures are under-reported by 12,737 calls.

Data Items	Description	Comments
A03	Number of answered calls	Operational and demand changes, along with staffing challenges continue to persist and affect performance.

B01	Number of calls answered within 60 seconds	Disparity between weekly and monthly B01 is due to availability of data from provider partners at the time of submission to NHSE.
B02	Number of calls abandoned	Operational and demand changes, along with staffing challenges continue to persist and affect performance.
B07	95th centile call answer time	
C01	Number of calls where person triaged	Metrics have been affected by the national AdastrA outages.
D01	Calls assessed by a clinician or Clinical Advisor	Operational and demand changes, along with staffing challenges continue to persist and affect performance.
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	
G01	IUC recommendations and callers given appointment	G01 does not aggregate to the sum of G03, G05, G07, G09, G11, G13 and G14 because the 2022/23 ADC specification changes to those items have not yet been implemented.
G03	Number of calls where the caller was booked into a GP Practice or GP access hub	Figures affected by the national AdastrA outage.
G10, G11	SDEC service bookings	We currently do not have or book into a SDEC service.

Comments for 111AH8 Somerset

Data Items	Description	Comments
B01	Number of calls answered within 60 seconds	Operational and demand changes, along with staffing challenges continue to persist and affect performance.
B07	95th centile call answer time	
G01	IUC recommendations and callers given appointment	G01 does not aggregate to the sum of G03, G05, G07, G09, G11, G13 and G14 because the 2022/23 ADC specification changes to those items have not yet been implemented.
G03	Number of calls where the caller was booked into a GP Practice or GP access hub	Figures affected by the national AdastrA outage.
G07	Calls where the caller was booked into a UTC	
G10, G11	SDEC service bookings	We currently do not have or book into a SDEC service.

DHU

Comments for 111AJ8 Derbyshire (DHU)

For the six DHU contract areas, data are only available from Adastral for the 1st-3rd August until the cyber-attack on the morning of the 4th. Data from sources other than Adastral are included where available but any major month-on-month changes in figures are likely to be because the bulk of DHU's monthly data is usually sourced from the Adastral system.

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service	Not applicable to service.
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	Not applicable to service.
G04, G05	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)

For the six DHU contract areas, data are only available from Adastral for the 1st-3rd August until the cyber-attack on the morning of the 4th. Data from sources other than Adastral are included where available but any major month-on-month changes in figures are likely to be because the bulk of DHU's monthly data is usually sourced from the Adastral system.

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Null – not applicable to our service.
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 not – these are applicable to our service.
G16 to G19	Community pharmacy service referrals	
G20	Number of patients requiring a face to face consultation in their home residence	Drop in figures this month is due to the Adastral issues.

Comments for 111AK6 Lincolnshire

For the six DHU contract areas, data are only available from Adastra for the 1st-3rd August until the cyber-attack on the morning of the 4th. Data from sources other than Adastra are included where available but any major month-on-month changes in figures are likely to be because the bulk of DHU's monthly data is usually sourced from the Adastra system.

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Null – not applicable to our service.
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.
E17	Number of callers recommended self-care at the end of clinical input	Low outcome this month is correct and is a result of the Adastra issue.
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.
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Comments for 111AC7 Milton Keynes

For the six DHU contract areas, data are only available from Adastral for the 1st-3rd August until the cyber-attack on the morning of the 4th. Data from sources other than Adastral are included where available but any major month-on-month changes in figures are likely to be because the bulk of DHU's monthly data is usually sourced from the Adastral system.

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Not applicable to service.
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 transferred or received a call back within specified timeframe	Performance affected by clinical staffing.
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

For the six DHU contract areas, data are only available from Aداstra for the 1st-3rd August until the cyber-attack on the morning of the 4th. Data from sources other than Aداstra are included where available but any major month-on-month changes in figures are likely to be because the bulk of DHU's monthly data is usually sourced from the Aداstra system.

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Not applicable to service.
D12	Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	Not applicable to service.
E17	Callers recommended self-care at the end of clinical input	Drop in figures this month is due to the Aداstra issues.
G11	SDEC bookings	Not yet used within service.
G12, G13	Dental service bookings	Not applicable to service.
G16 to G19	Community pharmacy service referrals	

Comments for 111AL1 Nottinghamshire

For the six DHU contract areas, data are only available from Aداstra for the 1st-3rd August until the cyber-attack on the morning of the 4th. Data from sources other than Aداstra are included where available but any major month-on-month changes in figures are likely to be because the bulk of DHU's monthly data is usually sourced from the Aداstra system.

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service into NHS 111	Null return as not yet able to collate this information.
D01	Calls assessed by a clinician or Clinical Advisor	Low outcome this month is correct and is a result of the Aداstra issue.
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.
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	Low outcome this month reflects clinical staffing pressures.
E17	Number of callers recommended self-care at the end of clinical input	Low outcome this month is correct and is a result of the Aداstra issue.
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	Null return as not yet able to collate this information.
G16 to G19	Referrals to community pharmacy services	

DORSET HC

Comments for 111AI4 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.
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.
D04	Calls assessed by a mental health nurse	These items are zero and do not apply to our service at this time.
D07	Calls assessed by a dental nurse	
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	
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	
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HUC

Comments for 111AC5 Cambridgeshire & Peterborough

The national AdastrA outage dominated all HUC contracts in August 2022. Call handling staff and clinicians were forced to work on paper and third-party systems which are not setup to provide an automated feed for the ADC. Data items which were affected by the national AdastrA outage for most of August 2022 have been reported as 0.

Data item	Description	Comments
A03	Number of answered calls	Telephony performance in August was adversely affected by the AdastrA outage, with greatly increased call handling times and delays in answering calls because the manual process took far longer than working in AdastrA normally would.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
C01 to H18	Call Triage Calls with Clinical Input IUC Recommendations (Dispositions) Validation of Dispositions Directory of Services IUC Service Integration NHS 111 Online Contacts	The lack of AdastrA usage means that we have no meaningful data from 4 th August for NHS 111 Triage, CAS, or Out of Hours. Available data are either distorted or missing.

Comments for 111AB2 Hertfordshire

The national AdastrA outage dominated all HUC contracts in August 2022. Call handling staff and clinicians were forced to work on paper and third-party systems which are not setup to provide an automated feed for the ADC. Data items which were affected by the national AdastrA outage for most of August 2022 have been reported as 0.

Data item	Description	Comments
A03	Number of answered calls	Telephony performance in August was adversely affected by the AdastrA outage, with greatly increased call handling times and delays in answering calls because the manual process took far longer than working in AdastrA normally would.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	

C01 to H18	Call Triage Calls with Clinical Input IUC Recommendations (Dispositions) Validation of Dispositions Directory of Services IUC Service Integration NHS 111 Online Contacts	The lack of AdastrA usage means that we have no meaningful data from 4 th August for NHS 111 Triage, CAS, or Out of Hours. Available data are either distorted or missing.
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Comments for 111AG7 Luton & Bedfordshire

The national AdastrA outage dominated all HUC contracts in August 2022. Call handling staff and clinicians were forced to work on paper and third-party systems which are not setup to provide an automated feed for the ADC. Data items which were affected by the national AdastrA outage for most of August 2022 have been reported as 0.

Data item	Description	Comments
A03	Number of answered calls	Telephony performance in August was adversely affected by the AdastrA outage, with greatly increased call handling times and delays in answering calls because the manual process took far longer than working in AdastrA normally would.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
C01 to H18	Call Triage Calls with Clinical Input IUC Recommendations (Dispositions) Validation of Dispositions Directory of Services IUC Service Integration NHS 111 Online Contacts	The lack of AdastrA usage means that we have no meaningful data from 4 th August for NHS 111 Triage, CAS, or Out of Hours. Available data are either distorted or missing.

Comments for 111AI3 West Essex

The national AdastrA outage dominated all HUC contracts in August 2022. Call handling staff and clinicians were forced to work on paper and third-party systems which are not setup to provide an automated feed for the ADC. Data items which were affected by the national AdastrA outage for most of August 2022 have been reported as 0.

Data item	Description	Comments
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A03	Number of answered calls	Telephony performance in August was adversely affected by the Adastra outage, with greatly increased call handling times and delays in answering calls because the manual process took far longer than working in Adastra normally would.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
C01 to H18	Call Triage Calls with Clinical Input IUC Recommendations (Dispositions) Validation of Dispositions Directory of Services IUC Service Integration NHS 111 Online Contacts	The lack of Adastra usage means that we have no meaningful data from 4 th August for NHS 111 Triage, CAS, or Out of Hours. Available data are either distorted or missing.

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
A03	Number of answered calls	The 21% reduction in calls received compared to July had a substantial effect on service delivery this month, as did improvements in rota fill and covering gaps where usually high levels of demand.
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	The 21% reduction in calls received compared to July had a substantial effect on service delivery this month, as did improvements in rota fill and covering gaps where usually high levels of demand.
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. 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.
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	Ongoing problems with providing appointments.
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, G13	Calls received by dental services not using DoS	These items are currently not available, due development or not applicable.
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
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)	

B02	Number of calls abandoned	The 14% reduction in calls received compared to July had a substantial effect on service delivery this month, as did improvements in rota fill and covering gaps where usually high levels of demand.
B06	Total time to call answer	
B07, B08	Call answer centiles	
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.
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.
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	SDEC is not used on the DoS much; SDEC booking is 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, G13	Number of calls received by dental services not using DoS	These items are currently not available, due development or not applicable.
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
A01	Number of calls received	Includes around 20-30 calls a month which are received/answered from other NHS 111 providers.
A03	Number of answered calls	Staffing remains an issue and recruitment remains high on the agenda - but the significant changes to call handling performance have been a result of the Adastra failure compounding the situation. Contingency call/triage recording methods are not as efficient and the extra time taken to process calls means there is reduced availability to answer the new calls coming in.
A07	Calls which originated from an external NHS 111 provider	A07 is excluded from our submission as this total (around 20-30 calls a month) is already included in A01.
B01	Calls answered within 60 seconds	Staffing remains an issue and recruitment remains high on the agenda - but the significant changes to call handling performance have been a result of the Adastra failure compounding the situation. Contingency call/triage recording methods are not as efficient and the extra time taken to process calls means there is reduced availability to answer the new calls coming in. Disparity with provisional data for C01 & D01 is because we were unable to report weekly figures during the Adastra outage. We had no access to Adastra or Adastra's reporting software from 4 th to 26 th August.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time	
C01	Calls where person triaged	
D01	Calls assessed by a clinician or Clinical Advisor	
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.
F01 to F03	Directory of Services	Figures provided have been extracted from the Pathways Intelligent Data Toolkit this month as SSRS reporting is not available following the Adastra outage.
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.
G15-G19	Prescription & pharmacy services	SSRS reporting is not available following the Adastra outage during August. Therefore, these metrics may be incorrect.
G20 to G23	Face to face consultations	This section of reporting is still being developed.
H01 to H18	NHS 111 Online	SSRS reporting is not available following the Adastra outage during August. Therefore, no reporting figures are available for H01 to H18.

LAS

Comments for 111AH5 North East London

Data submitted include accurate figures for front-end calls (telephony). However, Pathways, triage and CAS data was affected by the ADASTRA outage and figures submitted include only a fraction of activity.

Data item	Description	Comments
A03	Number of answered calls	Although front end calls were not directly affected by the Adastra outage, the paper-based switch affected call answering times and time each agent spent on a call. Disparity with provisional data is because the manual process employed after the Adastra outage meant that weekly data could not be fully restored before weekly submissions. Monthly data was updated after a full reconciliation was done.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06, B07	Call answer time	
C01	Number of calls where person triaged	
D01	Calls assessed by a clinician or Clinical Advisor	
G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded.
G21	Number of patients receiving a face to face consultation in their home residence within the timeframe agreed	Data incomplete due to the ADASTRA outage. Not all appointments available.

Comments for 111AJ1 North West London

Data submitted include accurate figures for front-end calls (telephony). However, Pathways, triage and CAS data was affected by the ADASTRA outage and figures submitted include only a fraction of activity.

Data item	Description	Comments
A03	Number of answered calls	Although front end calls were not directly affected by the Adastra outage, the paper-based switch affected call answering times and time each agent spent on a call. Disparity with provisional data is because the manual process employed after the Adastra outage meant that weekly data could not be fully restored before weekly submissions. Monthly data was updated after a full reconciliation was done.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B10	Calls passed to a clinician or Clinical Advisor for a call back	Under-reported - missing data from the CAS due to Adastra outage at LCW.
B11	Total call back waiting time (seconds)	
C01	Number of calls where person triaged	Disparity with provisional data is because the manual process employed after the Adastra outage meant that weekly data could not be fully restored before weekly submissions. Monthly data was updated after a full reconciliation was done.
D01	Calls assessed by a clinician or Clinical Advisor	
D13, D14	Callers who needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately)	Under-reported - missing data from the CAS due to Adastra outage at LCW.
D20 to D26	Clinical assessment for callers requiring assessment	
G05	Number of calls where the caller was booked into an IUC Treatment Centre	Due to ADASTRA outage, appointment slots not available as LAS was the first site to go live after the outage.
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded usually.

Comments for 111AD7 South East London

Data submitted include accurate figures for front-end calls (telephony). However, Pathways, triage and CAS data was affected by the ADASTRA outage and figures submitted include only a fraction of activity.

Data item	Description	Comments
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A03	Number of answered calls	Although front end calls were not directly affected by the Adastra outage, the paper-based switch affected call answering times and time each agent spent on a call. Disparity with provisional data is because the manual process employed after the Adastra outage meant that weekly data could not be fully restored before weekly submissions. Monthly data was updated after a full reconciliation was done.
B01	Number of calls answered within 60 seconds	
B06	Total time to call answer	
C01	Number of calls where person triaged	
D01	Calls assessed by a clinician or Clinical Advisor	
E21	Calls initially given a category 3 or 4 ambulance disposition that are validated within 30 minutes	Numbers affected by the ADASTRA Outage.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded.
G21	Patients receiving a face to face consultation in their home residence within the timeframe agreed	Numbers affected by the ADASTRA Outage. No additional commentary. This is linked to the ADASTRA Outage.
G23	Patients receiving a face to face consultation in an IUC Treatment Centre within the timeframe agreed	

LCW

Comments for 11AD5 North Central London

Only able to provide telephony numbers for August because of issues caused by the major outage of the Adastra system due to a cyber-attack on Thursday 4th August. No data available relating to data items A04–A07 and B10 onwards.

Data item	Description	Comments
A01	Number of calls received	SVCC continued to be utilised throughout August. Activity is down against forecast and on previous months. Initial investigations indicate 20% 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 targets not met due to unplanned sickness in Health Advisor Staff and continuing shortfall in recruitment to meet required FTE for Health Advisors.
B01	Number of calls answered within 60 seconds	

B06	Total time to call answer	Telephony performance also affected due to SVCC routing, which resulted in larger queues when all London providers were experiencing high call volumes and therefore extended wait times for patients. Call lengths and response times also increased due to working under contingency procedures.
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MEDVIVO

Comments for 111AJ2 BaNES, Swindon & Wiltshire

Since the national Adastral outage at the beginning of August no operational data has been made available from Advanced/Adastral. We have only been able to submit telephony performance data – no clinical/operational information has been available.

Data item	Description	Comments
A03	Number of answered calls	111 performance was impacted by the Adastral outage as DHU were working off pen and paper and were in full contingency.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06, B07	Call answer time	
C01	Calls where person triaged	Provisional data includes valid daily values compiled prior to Adastral becoming unavailable. Due to the Adastral outage, we have made a NIL return on the monthly submission rather than submit partial figures which would have been misleading.
D01	Calls assessed by a clinician or Clinical Advisor	

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 this month for NWAS, FCMS (Fylde Coast) and FCMS (Morecambe Bay).

Data item	Description	Comments
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because different providers submit monthly and weekly returns.
D25	95th centile time to clinical assessment for callers requiring assessment within a timeframe over 20 minutes	The 95th centile is the summation of the individual returns from NWAS/CAS/OH providers so is not accurate.

E01 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 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.
G03, G05, G07, G09	IUC Service Integration	Figures exclude data from some service providers.
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.
G20 to G23	Number of patients receiving a face to face consultation within the timeframe agreed	The numbers reported are the summation of the individual <u>limited</u> number of OOH returns currently received.
H01, H02, H04, H13 to H18	NHS 111 Online Contacts	Figures exclude data from some service providers.
H15, H16	Number of NHS 111 Online contacts that resulted in patient requiring a face to face consultation within their home residence	FCMS unable to complete H15 and H16 from Adastral due to continuing issues from cyber-attack.

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 SystemOne.
B01	Calls answered within 60 seconds	

B02	Number of calls abandoned	Call performance continues to improve as a result of the continued recruitment, with August having the highest volume of productive HA hours for both last and current fiscal year. No significant implications of the Adastra outage, other than increasing average handle time for a very limited number of OOA calls.
B06	Total time to call answer	
B07	95th centile call answer time	
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 SystemOne, 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 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.
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.
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 provided for B10, B11 and sections C to H only includes data for the 1st and 2nd of August due to the Adastra outage.

Data for GP OOH providers includes the following, although some figures are under-reported because of the Adastra outage:

8GY92-LCD, NNF - City Healthcare Partnership CIC, i-Heart - Y05222, NL3-CARE PLUS, RFR - Rotherham NHSFT, NXL01 – FCMS, NL0 – Vocare, and RJL-Northern Lincolnshire and Goole NHS Foundation Trust.

Due to the ongoing issue with Adastra, no data supplied by: Y01173-Sheffield GP Collaborative, RCD-Harrogate & District, and NNJ-DHU Bassetlaw OOH.

Data item	Description	Comments
A01	Number of calls received	Decrease in demand may have been impacted by an IVR message through the Adastra outage saying we were experiencing technical difficulties.

A07	Calls which originated from an external NHS 111 provider	Data is not currently available from YAS but is provided by several GPOOH providers.
B07	95th centile call answer time (seconds)	LCD Dental cannot provide item B07 - therefore this is 111 data only.
C01 to C06	Number of calls where person triaged	C01 does not equal the sum of C02 to C06 as staff changes during the month mean it is not always possible to identify on the system which staff type triaged a call.
D01	Calls assessed by a clinician or Clinical Advisor	The difference between the weekly and monthly figures is due to the fact that our weekly submissions are only done on a YAS basis as agreed with NHS England, rather than the monthly data which includes bookings from providers across the system. This difference is particularly large purely because of the way the system works, in that 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.
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.

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	We do not validate any ED dispositions.
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. Also, caused by missing data due to the Adastra outage.
G10, 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 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.

NHS Black Country and West Birmingham CCG

Comments for 1111AK5 West Midlands

Data item	Description	Comments
A03	Number of answered calls	Call answering performance in August was impacted by increased levels of sickness and isolation due to Covid.
B02	Number of calls abandoned	

B06, B07	Call answer time	
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.
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	Performance affected by staffing sickness/isolation for Covid as well as the high and increasing number of Ambulance validations. Ambulance validations have a local validation target of 30 minutes.
E21	Number of calls initially given a category 3 or 4 ambulance disposition that are validated within 30 minutes	Although ambulance validation numbers are increasing, we validate a high volume of calls with a senior clinical review to enable better outcomes. This means clinical supervisors review every case as they present in the queue to flag any potential risks.
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.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	Appointment utilisation is impacted upon by the availability of appointments within the triage disposition timeframe. Often, available appointments are after the window for attendance.
G07	Number of calls where the caller was booked into a UTC	Reduce bookings this month are related to the Adastra system issues which meant not all services were available for bookings.
G11	Callers booked into an SDEC service	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.
G20 to G23	Face to face consultations	Data not available currently.
H13 to H16	NHS 111 Online contacts	

PRACTICE PLUS GROUP (PPG)

Comments for 111AH2 Gloucestershire

Data item	Description	Comments
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.
G01	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.
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.
G09	Calls where caller given a booked time slot with an ED	Patients are booked time slots into ED if appointment slots are made available to book.
G11, G10	SDEC selections	The SDEC care service isn't currently active.

Comments for 111AH7 North East Essex & Suffolk

Data item	Description	Comments
A03	Number of answered calls	There was an indirect impact on performance from the Advanced Adastra outage. Whilst Practice Plus Group was one of the three NHS 111 providers who host their own Adastra system, and were able to continue to operate electronically, we were challenged by the volume and complexity of manually referring patients for onward care. Despite the difficult operating environment, average speed to answer showed improvement again in August.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
G01	Calls where caller given an appointment	
G03	Calls where the caller was booked into a GP Practice or GP access hub	
G05	Calls where the caller was booked into an IUC Treatment Centre	Reduction due to Advanced outage
G07	Calls where the caller was booked into a UTC	Minimal opportunities to do this in SNEE (just one UTC) and reduction due to Advanced outage
G10, G11	SDEC selections	The SDEC care service isn't currently active.

Comments for 111AK9 South West London

SWL figures exclude LAS case data since the time of the Advanced Adastra outage.

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional data is due to a delay receiving some the LAS figures for the monthly submission, resulting in 8,202 received calls missing from August figures.
A03	Number of answered calls	
B01	Number of calls answered within 60 seconds	
C01	Number of calls where person triaged	
B07, B08	95th & 99 th centile call answer time (seconds)	SWL Telephony centile figures exclude LAS data as line data is not available.
E27	Number of calls initially given an ETC disposition that are validated	The figure reported is incorrect; actual ED Validation figures we run an ED DoS validation shows proportion of calls initially given an ED that are validated at 90% in August. 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.
G01	Number of calls where caller given an appointment	In respect of this item not summing to its constituent parts (G03, G05, G07, G10, G12, G13, G14): this was affected by the Adastra outage where systems such as GP Connect were down from 04 August 2022.
G20 to G23	Patients requiring a face to face consultation	These are missing due to reporting issues.

Comments for 111AI2 Surrey Heartlands

Data item	Description	Comments
A03	Number of answered calls	There was an indirect impact on performance from the Advanced Adastra outage. Whilst Practice Plus Group was one of the three NHS 111 providers who host their own Adastra system, and were able to continue to operate electronically, we were challenged by the volume and complexity of manually referring patients for onward care. Despite the difficult operating environment, average speed to answer showed improvement again in August.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
G01	Calls where caller given an appointment	Reduction due to Advanced outage
G03	Number of calls where the caller was booked into a GP Practice or GP access hub	Reduction due to Advanced outage.

G05	Number of calls where the caller was booked into an IUC Treatment Centre	Minimal opportunities to do this in SH and reduction due to Advanced outage
G10, G11	SDEC selections	The SDEC care service isn't currently active.

SCAS

Comments for 111AH9 Hampshire & Surrey Heath

We are unable to provide any non-telephony metrics this month as we are without a data feed from Adastra.

Data item	Description	Comments
A02	Calls routed through IVR	No IVR at call start when passed to service. 0 is correct.
A03	Number of answered calls	Adastra was unavailable for 19 out of 31 days in the of month. Compared to July, telephony performance was better at the start of the month and comparable during the period after the Adastra outage. Performance was heavily affected between the 4th and 21st whilst Adastra was down, with calls taking longer to process which impacted all aspects due to lengthened queuing.
A05	External clinician calls to Clinical Assessment Service (CAS)	Unable to provide this figure.
A06	Unscheduled IUC attendances	This month's figures included data from 4 out of 5 of our external providers for the first time. Data from Gosport MIU are still missing.
A07	Calls which originated from an external NHS 111 provider	This item is generated from our Adastra feed, which we don't have at this time.
B01	Number of calls answered within 60 seconds	Adastra was unavailable for 19 out of 31 days in the of month. Compared to July, telephony performance was better at the start of the month and comparable during the period after the Adastra outage. Performance was heavily affected between the 4th and 21st whilst Adastra was down, with calls taking longer to process which impacted all aspects due to lengthened queuing.
B02	Number of calls abandoned	
B06	Total time to call answer	

Comments for 111AG9 Thames Valley

We are unable to provide any non-telephony metrics this month as we are without a data feed from Adastra.

Data item	Description	Comments
A02	Calls routed through IVR	No IVR at call start when passed to service. 0 is correct.
A03	Number of answered calls	Adastra was unavailable for 19 out of 31 days in the of month. Compared to July, telephony performance was better at the start of the month and comparable during the period after the Adastra outage. Performance was heavily affected between the 4th and 21st whilst Adastra was down, with calls taking longer to process which impacted all aspects due to lengthened queuing.
A05	External clinician calls to Clinical Assessment Service (CAS)	Unable to provide this figure.
A06	Unscheduled IUC attendances	This month's figures included data from 2 out of 3 of our external providers for the first time. Data from Berkshire Health Foundation Trust are still missing.
A07	Calls which originated from an external NHS 111 provider	This item is generated from our Adastra feed, which we don't have at this time.
B01	Number of calls answered within 60 seconds	Adastra was unavailable for 19 out of 31 days in the of month. Compared to July, telephony performance was better at the start of the month and comparable during the period after the Adastra outage. Performance was heavily affected between the 4th and 21st whilst Adastra was down, with calls taking longer to process which impacted all aspects due to lengthened queuing.
B02	Number of calls abandoned	
B06	Total time to call answer	

SECAmb

Comments for 111AI9 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 which is driving an improvement in response time for higher acuity cases.
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	New metric effective from April 2022; currently in development as agreed with local commissioners.

D22, D23	Callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20 minutes	Values for D22 & D23 were incorrect in SECamb's July ADC data submission. Figures were based incorrectly on a narrower definition of Dx codes. These are now revised for August.
D24, D25	Time to clinical assessment for callers requiring assessment within a timeframe over 20 minutes	New metric effective from April 2022; currently in development as agreed with local commissioners.
D26	Calls assessed by a clinician or Clinical Advisor by video consultation	New metric out of scope for our operating model.
E17	Number of callers recommended self-care at the end of clinical input	Although there was a fall in self-care after clinical output compared to last month, the overall self-care outcomes (including HA) were broadly unchanged and are driven significantly by Pathways outcomes.
E21, E22	Calls initially given a category 3 or 4 ambulance disposition that are validated within a specified timeframe	Metrics currently unavailable.
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.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	Numbers significantly reduced this month due loss of interoperability with an out of hours Primary Care provider affected by the Adastra outage.
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
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	

B06, B07	Call answer time	We were impacted by the Adastra outage in August which impacted on average handle time due to complexities in being able to onward refer. This then has a knock-on impact on the call answering/abandonment.
G03	Number of calls where the caller was booked into a GP Practice or GP access hub	The drop in compliance will be linked to inability to transfer cases electronically during the Advanced outage.
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.

Data item	Description	Comments
G06, G07	DoS selections for UTC DoS selections for UTC	Staffordshire ICS still does not have any UTCs operationalised and they are not expected to be for at least the next 12-18 months. Any low numbers that appear in submissions may be due to patients on the service's border.
G10, G11	SDEC referrals and bookings	No cases arose to report.