IUC ADC January 2023 - 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 111AI5 Bristol, North Somerset & South Gloucestershire

Data item	Description	Comments
A01	Number of calls received	Concern over Strep A dropped away swiftly after 2nd Jan resulting in a fall in demand compared to December.
A03	Number of answered calls	Disparity with provisional figures is due to recurring issues in the weekly PPG data feeds for January which resulted in no 111 telephony data for 27th-29th, no 111 data for 13th and no 111 case data for 7th & 8th.
B01 to B11	Call handling	CAS data not included as unavailable. Disparity with provisional figures is due to recurring issues in the weekly PPG data feeds for January which resulted in no 111 telephony data for 27th-29th, no 111 data for 13th and no 111 case data for 7th & 8th.
C01	Number of calls where person triaged	Disparity with provisional figures is due to recurring issues in the weekly PPG data feeds for January which resulted in no 111 telephony data for 27th-29th, no 111 data for 13th and no 111 case data for 7th & 8th.
D01	Calls assessed by a clinician or Clinical Advisor	

Data Items	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-E30	Number of calls initially given a category 3 or 4 ambulance disposition & Number of calls initially given an ETC disposition	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; for January, KPI 7 is 84.7%; KPI 8 is 84.6%
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 (ie 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 111AH8 Somerset

Data Items	Description	Comments
A01	Number of calls received	PPG's performance improved this month as call volumes returned to plan levels following the seasonal uplift and effect of Strep A last month.
A03	Number of answered calls	
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06, B07	Time to call answer	

Data item	Description	Comments
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.
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
A01	Number of calls received	Disparity with provisional figures is due to missed daily manual loads of the weekly data, which had been resolved by the time we had submitted the monthly file.
A04	Calls transferred from the 999 Ambulance Service	Not applicable to service.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures can be explained by the timing of the weekly load. If a case that has yet to be closed as of Sunday 23:59:59 and has subsequent clinical input on the Monday, then this will not be captured within the IUC ADC weekly submission values. The clinical input aspect will not have been loaded into our database at the start of the week. However, this would be captured in the monthly submission when data is reloaded.
C01	Number of calls where person triaged	The reason C01 is exceeding the sum of A03+A04+A07 is due to user mis-categorisation of case contract at contract selection within the case logging system, leading to larger triaged figures than calls answered.
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	Not applicable to service.
G11	SDEC service bookings	No activity.
G12, G13	Calls received by dental services	Not applicable to service.
G16 to G19	Community pharmacy service	

Comments for 111AK7 Leicestershire and Rutland (DHU)

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures is due to missed daily manual loads of the weekly data, which had been resolved by the time we had submitted the monthly file.
A03	Number of answered calls	

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service	Null - not applicable to our service.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures can be explained by the timing of the weekly load. If a case that has yet to be closed as of Sunday 23:59:59 and has subsequent clinical input on the Monday, then this will not be captured within the IUC ADC weekly submission values. The clinical input aspect will not have been loaded into our database at the start of the week. However, this would be captured in the monthly submission when data is reloaded.
D12	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	Calls received by dental services	Null - not applicable to our service.
G16 to G19	Community pharmacy service	

Comments for 111AK6 Lincolnshire

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures is due to missed daily manual loads of the weekly data, which had been resolved by the time we had submitted the monthly file.
A04	Calls transferred from the 999 Ambulance Service	Null - not applicable to our service.
D01	Calls assessed by a clinician or Clinical Advisor	Performance impacted by staffing during the winter period. Disparity with provisional figures can be explained by the timing of the weekly load. If a case that has yet to be closed as of Sunday 23:59:59 and has subsequent clinical input on the Monday, then this will not be captured within the IUC ADC weekly submission values. The clinical input aspect will not have been loaded into our database at the start of the week. However, this would be captured in the monthly submission when data is reloaded.
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	Null – not applicable to our service.
D23	Number of callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20	Performance impacted by staffing during the winter period.

Data item	Description	Comments
	minutes, who were warm transferred or received a call back within the specified timeframe	
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.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	The low value is because cases are sent to GP OOH services that are out of area for which no bookings were made.
G11	SDEC service bookings	CAS colleagues are unable to book patients into SDEC.
G12, G13	Calls received by dental services	Not applicable to service.
G16 to G19	Community pharmacy service	

Comments for 111AC7 Milton Keynes

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures is due to missed daily manual loads of the weekly data, which had been resolved by the time we had submitted the monthly file.
A04	Calls transferred from the 999 Ambulance Service	Not applicable to service.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures can be explained by the timing of the weekly load. If a case that has yet to be closed as of Sunday 23:59:59 and has subsequent clinical input on the Monday, then this will not be captured within the IUC ADC weekly submission values. The clinical input aspect will not have been loaded into our database at the start of the week. However, this would be captured in the monthly submission when data is reloaded.
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	Not applicable to service.
E27	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.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	The low value is because cases are sent to GP OOH services that are out of area for which no bookings were made.
G11	SDEC service bookings	Not yet used within service.
G12, G13	Calls received by dental services	Not applicable to service.
G16 to G19	Community pharmacy service	

Data item	Description	Comments
G20, G21	Number of patients requiring a face to face consultation in their home residence	This figure is always very low.
G23	Patients receiving a face to face consultation in an IUC Treatment Centre within the timeframe agreed	Low value is because we receive external data that doesn't include whether the face-to-face was within the timeframe.

Comments for 111AC6 Northamptonshire

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures is due to missed daily manual loads of the weekly data, which had been resolved by the time we had submitted the monthly file.
A04	Calls transferred from the 999 Ambulance Service	Not applicable to service.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures can be explained by the timing of the weekly load. If a case that has yet to be closed as of Sunday 23:59:59 and has subsequent clinical input on the Monday, then this will not be captured within the IUC ADC weekly submission values. The clinical input aspect will not have been loaded into our database at the start of the week. However, this would be captured in the monthly submission when data is reloaded.
D12	NLP calls that resulted in the caller speaking to a clinician or Clinical Advisor	Null – not applicable to our service.
G11	SDEC service bookings	CAS colleagues are unable to book patients into SDEC.
G12, G13	Calls received by dental services	Not applicable to service.
G16 to G19	Community pharmacy service	

Comments for 111AL1 Nottinghamshire

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures is due to missed daily manual loads of the weekly data, which had been resolved by the time we had submitted the monthly file.
A04	Calls transferred from the 999 Ambulance Service	Null return as not yet able to collate this information.

Data item	Description	Comments
D01	Calls assessed by a clinician or Clinical Advisor	Performance impacted by staffing during the winter period. Disparity with provisional figures can be explained by the timing of the weekly load. If a case that has yet to be closed as of Sunday 23:59:59 and has subsequent clinical input on the Monday, then this will not be captured within the IUC ADC weekly submission values. The clinical input aspect will not have been loaded into our database at the start of the week. However, this would be captured in the monthly submission when data is reloaded.
D12	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	Performance impacted by staffing during the winter period.
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	The low value is because cases are sent to GP OOH services that are out of area for which no bookings were made.
G10, G11	SDEC service bookings	Not yet used within service
G12, G13	Calls received by dental services	Null return as not yet able to collate this information.
G16 to G19	Community pharmacy service	

DORSET HC

Comments for 111AI4 Dorset

Data item	Description	Comments
A03	Number of answered calls	The demand from Strep A reduced from the second week in January which has led to a vast improvement in our performance this month. We supported SWASFT with validating non 111 ambulance cases on the day of strikes in the first week of January.
A04	Calls transferred from the 999 Ambulance Service	No data available. Unable to identify individuals calls from 999 service.

B01	Calls answered within 60 seconds	The demand from Strep A reduced from the second week in January which has led to a vast improvement in our performance this month.	
B02	Number of calls abandoned		
B06, B07	Time to call answer	We supported SWASFT with validating non 111 ambulance cases on the day of strikes in the first week of January.	
C01	Number of calls where person triaged		
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	Despite a large decrease in calls in January, there was continued high usage of 111 Online.	
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		
E17	Number of callers recommended self-care at the end of clinical input	Decrease in levels of self-care over the last couple of months are due to a higher proportion of children presenting with respiratory issues and needing to be seen in person.	
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.	
H01	NHS 111 Online contacts where person was offered and accepted a call back by a clinician or Clinical Advisor	Still an elevated use of 111 online into January despite the large general drop off in demand since December.	
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	There was a notable drop off in calls from 13th January, following high demand driven by Strep A and COVID/flu symptoms.
A03	Number of answered calls	The drop in demand resulted in a significant improvement in performance this month.
B02	Number of calls abandoned	

Data item	Description	Comments
C01	Number of calls where person triaged	Disparity with provisional figures is a result of changes to SQL code and the re-running of reports at the end of the month.
D01	Calls assessed by a clinician or Clinical Advisor	Performance helped by the fall in demand of 111 Online cases this month. Disparity with provisional figures is a result of changes to SQL code and the re-running of reports at the end of the month.
E21	Calls initially given a category 3 or 4 ambulance disposition that are validated within 30 minutes	In the first part of the month, call volumes and inbound cases from other parties were still very high.
E27	Number of calls initially given an ETC disposition that are validated	
G10, G11	SDEC service bookings	Continues to be work in progress.

Comments for 111AL3 Cornwall (HUC)

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

Comments for 111AB2 Hertfordshire

Data item	Description	Comments
A01	Number of calls received	Improvements in performance since last month largely a result of lowering call volumes due to a drop in Covid and Strep A calls. Disparity with provisional data is due to end of month reconciliations; monthly figures are correct.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06, B07	Time to call answer	
C01	Number of calls where person triaged	
D01	Calls assessed by a clinician or Clinical Advisor	
G10, G11	SDEC service bookings	Continues to be work in progress.

Comments for 111AG7 Luton & Bedfordshire

Data item	Description	Comments
G10, G11	SDEC service bookings	Occasionally patients are referred to an SDEC but numbers will be small. Functionality isn't yet available for SDEC appointments to be booked.
G20, G21	SDEC service bookings	Home visit case reporting remains affected by the Adastra outage.

Comments for 111AI3 West Essex

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional data is due to end of month reconciliations; monthly figures are correct.
A03	Number of answered calls	
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06, B07	Time to call answer	
C01	Number of calls where person triaged	
G10, G11	SDEC service bookings	Occasionally patients are referred to an SDEC but numbers will be small. Functionality isn't yet available for SDEC appointments to be booked.
G20, G21	SDEC service bookings	There were still issues with home visit reporting in January due to clinicians not having access to Adastra.

IC24

Comments for 111AH4 Mid & South Essex

Data item	Description	Comments
A03	Number of answered calls	Improvements in performance since last month due to decreased demand, additional hours worked by 111 call handlers and a fall in staff sickness levels.
A04	Calls transferred from the 999 Ambulance Service into NHS 111	These items are currently not available, due development or not applicable.
A05	External clinician calls to Clinical Assessment Service (CAS)	

B01	Calls answered within 60 seconds	Improvements in performance since last month due to decreased demand, additional hours worked by 111 call handlers and a fall in staff sickness levels.
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.
E21	Number of calls initially given a category 3 or 4 ambulance disposition that are validated within 30 minutes	Performance affected by clinical capacity following a change in the 111 clinician process.
G03	Number of calls where the caller was booked into a GP Practice or GP access hub	Although this has stabilised over recent months there are not enough bookable appointments across GP and GP hub for patients with the relevant disposition code.
G10, 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	

Data item	Description	Comments
G23	Number of patients receiving a face to face consultation in an IUC Treatment Centre within the timeframe agreed	Affected by staffing and rota fill.

Comments for 111AG8 Norfolk including Great Yarmouth and Waveney

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service into NHS 111	These items are currently not available, due development or not applicable.
A05	External clinician calls to Clinical Assessment Service (CAS)	
B01	Number of calls answered within 60 seconds	Improved performance this month due to a fall in demand and extra hours worked by 111 Call Handlers.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07, B08	Call answer centiles	Due to the way that our calls are currently aggregated, centile figures may be inaccurate.
D11	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	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	High proportion of breaches occur on Sundays during the month – working with the Ops team to ensure more shifts provided to accommodate the demand. The extra staffing on Sundays is still in place to improve this metric.
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	
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 call back	These items are currently not available, due development or not applicable.
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. The huge drop in demand in January in comparison to December is due to the reduction in calls from patients with concerns about 'Strep A' symptoms and a reduction in demand following strike actions.
A03	Number of answered calls	Performance impacted by a reduction in demand and improvements in call handler staffing.
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	Performance impacted by a reduction in demand and improvements in call handler staffing.
B02	Number of calls abandoned	
B06, B07	Time to call answer	
C01	Number of calls where person triaged	C01 exceeds the sum of A03+A04+A07 due to Adastra freezing periodically causing cases to be locked and resulting in a small number of cases being double counted. Also, some paramedics have been calling through on the wrong line so not counting in the

Data item	Description	Comments
		correct (telephony) figures, i.e. the calls from external clinicians are not coming through the correct 111 lines - but are still being added as a 111 case entry.
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. This data includes a small number of '111 Online' cases which cannot be excluded within the portal or automatically from the downloaded dataset.
G01 to G10	Callers given appointments and booking types	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.
G16-G19	Prescription & pharmacy services	Following the Adastra outage in August, IOW are now using DoS service data downloaded from the 'Pathways Intelligent Data Tool' to calculate G16, G17, G18 and G19 (independently of SSRS). These case lists do unfortunately include '111 Online cases' (which should not be included in these particular metrics). It's not possible to identify and remove them from G17 and G19 but it's thought the variance will be minimal.
G20 to G23	Face to face consultations	This section of reporting is still being developed.

LAS
Comments for 111AH5 North East London

Data item	Description	Comments
A01	Number of calls received	Performance improved markedly in January compared with
B01	Number of calls answered within 60 seconds	December following the spike in calls caused by anxiety over StrepA.

Data item	Description	Comments
B02	Number of calls abandoned	Disparity with provisional figures is due to a technical issue on the 4th of January which meant DHU were unable to supply telephony data by the weekly return deadline.
B06, B07	Time to call answer	
C01	Number of calls where person triaged	
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded.
G13	Calls received by dental services not using DoS that resulted in a booked appointment	This is appointment data from SMILE.

Comments for 111AJ1 North West London

Data item	Description	Comments
A01	Number of calls received	Performance improved markedly in January compared with December following the spike in calls caused by anxiety over StrepA.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	Disparity with provisional figures is due to a technical issue on the 13th of January which meant PPG were unable to supply telephony data by the weekly return deadline.
B06, B07	Time to call answer	
C01	Number of calls where person triaged	Disparity with provisional figures is due to a technical issue on the 7th and 8th of January which meant PPG were unable to supply CAS data by the weekly return deadline.
D01	Calls assessed by a clinician or Clinical Advisor	
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded usually.
G20, G21	Number of patients receiving a face to face consultation in their home residence within the timeframe agreed	LCW unable to provide this figure.
G22, G23	Number of patients receiving a face to face consultation in an IUC Treatment Centre within the timeframe agreed	Not applicable to the service.

Comments for 111AD7 South East London

Data item	Description	Comments
A01	Number of calls received	Performance improved markedly in January compared with December following the spike in calls caused by anxiety over StrepA.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	

B06, B07	Time to call answer	Disparity with provisional figures is due to a technical issue on the 4th of January which meant DHU were unable to supply telephony data by the weekly return deadline.
C01	Number of calls where person triaged	
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded.
G13	Number of calls received by dental services not using DoS that resulted in a booked appointment	This is appointment data from SMILE.

LCW

Comments for 11AD5 North Central London

The IUC ADC Reporting Suite in Adastra has not been updated to match the 2022/23 IUC ADC specification, therefore some data items are based on 2021/22 definitions.

Data item	Description	Comments
A01	Number of calls received	SVCC continued to be switched off in January. For the period of the 9th of January – 22nd January there was an unusual period of lower activity, averaging 19% under forecast on a daily basis. This could be due to public's response to strike action.
A02	Calls routed through IVR	We are not using any IVRs.
A07	Calls which originated from an external NHS 111 provider	Not available in the current suite of reports we run from Adastra. Figure estimated as 2,604.
B01	Number of calls answered within 60 seconds	Disparity with provisional figures due to a manual input error made in the submission for week ending 08.01.23. The monthly figure is correct.
C01	Number of calls where person triaged	The logic for C01 has not been updated to meet the updated definitions and therefore is lower than E01.
D04	Calls assessed by a mental health nurse	Not applicable.
D07	Calls assessed by a dental nurse	
D10	Number of calls assessed by a clinician or Clinical Advisor that were warm transferred	Figure is lower than expected.
D12	Natural Language Processing (NLP) calls that resulted in the caller speaking to a clinician or Clinical Advisor	Not applicable for our service.
D20 to D26	Clinical assessment	Not available in the current suite of reports we run from Adastra.

Data item	Description	Comments
E05	Number of callers recommended to attend Same Day Emergency Care (SDEC)	Figures are low due to restrictive criteria for referral into the service.
E20 to E25	Calls initially given a category 3 or 4 ambulance disposition	Items missing aggregated data due to loss of data feed.
E21	Number of calls initially given a category 3 or 4 ambulance disposition that are validated within 30 minutes	All London region ambulance validation is carried out by LAS. We are trying to re-establish the data feed to submit the complete data set.
E27 to E31	Calls initially given an ETC disposition	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.
G11	Calls where the caller was booked into an SDEC service	Figures are low due to restrictive criteria for referral into the service. G11 is blank because there are no booked appointments available for those services via the DoS.
G12 to G13	Calls received by dental services not using DoS	N/A as we are not a dental service.
G18-G19	Number of calls where a community pharmacy service was an option on DoS for minor illness	Missing data.
H11 to H12	NHS 111 Online contacts that resulted in DoS selections for SDEC	SDEC services in the area do not offer appointments via the DoS.
H16	Number of NHS 111 Online contacts that resulted in patient requiring a face to face consultation within their home residence, who received a face to face consultation in their home residence within the timeframe agreed	H15-H16 have been investigated and the ADC Suite is reporting the outcome after a call back which is not what these data items are collating. This will need to be reported to Advanced to rectify. Also, H13-H14 are in further investigation as they show the same issue as H15-H16.
H17 to H18	NHS 111 Online contacts initially given an ETC disposition	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
A01	Number of calls received	Improvements in performance this month reflect the drop in activity following
A03	Number of answered calls	the unprecedented high activity seen in December due to the STREP A virus,

B01	Number of calls answered within 60 seconds	Christmas/winter pressures and other factors such as industrial action for nurses and paramedics. Primary care capacity was also less of an issue resulting in fewer calls needing to be passed to out of hours.
B02	Number of calls abandoned	
B06, B07	Time to call answer	
C01	Number of calls where person triaged	
D01	Calls assessed by a clinician or Clinical Advisor	As well as the decrease in 111 activity, January was the first full month that the CAS was closed in hours, following the change made on 23/12/22.
F02	Directory of Services: no service available other than ED (ED catch-all)	Since Jan 2022, BSW IUC have not been processing the CatchAll DoS item for reporting purposes.
G11	Number of calls where the caller was booked into an SDEC service	BSW IUC do not yet book appointments into the SDEC service.

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. This month, data includes submissions from NWAS and 7 of the 14 CAS/OOH service providers. Even when CAS providers supply some figures, not all data items can be reported at the granularity required.

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.
D02 to D09	Calls assessed by staff type	Not all CAS/OOH providers can accurately split out 'Calls assessed by a clinician or Clinical Advisor ' into the sublines.
D24, D25	Time to clinical assessment for callers requiring assessment within a timeframe over 20 minutes	Data not available to calculate the average and 95th percentile for these from provider submissions.
E01 to E30	Calls with Clinical Input, IUC Recommendations (Dispositions) and Validation of Dispositions	Figures exclude data from some service providers.

Data item	Description	Comments
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 data for E25.
G01	Number of calls where caller given an appointment	Numbers do not match the sum of parts due to G01 only being collected for 111 service (NWAS) and the others being collected from 111 and CAS services.
G10, G11	SDEC Service	Only NWAS report G10, ALL providers are asked to complete G11 (where relevant).
G03, G05, G07, G09	IUC Service Integration	Figures exclude data from some service providers.
G14	Calls where caller given any other appointment	
H01, H02, H04, H13 to H18	NHS 111 Online Contacts	

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.
B01	Calls answered within 60 seconds	Performance significantly improved compared to previous month as pressure on services subsided. Industrial action took place on 2 days (11th and 23rd January), with a small number of HA participating.
B02	Number of calls abandoned	
B06, B07	Time to call answer	Demand on 999 was also down by around 40% which created additional capacity on 111, in addition to HA recruitment and improvements in absence levels.

B09	Total time of abandoned calls	We do not have the system capability to extract this information.
D01 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	
D26	Number of calls assessed by a clinician or Clinical Advisor by video consultation	We cannot currently provide this information.
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 part of Clinical Safety Plan, the ETC DoS profile is suspended during periods of surge.
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.

NECS
Comments for 111AI7 Yorkshire and Humber (NECS)
Data for GP OOH providers includes: 8GY92-LCD, NNF - City Healthcare Partnership CIC, Y01173-Sheffield GP Collaborative, RCD-Harrogate & District, i-Heart - Y05222, NL3-CARE PLUS, NXL01 – FCMS, RJL - Northern Lincolnshire and Goole NHS Foundation Trust, and NNJ-DHU Bassetlaw OOH. No data were submitted for RFR - Rotherham NHSFT.

Data item	Description	Comments
C01	Number of calls where person triaged	C01 does not equal the sum of items C02, C03, C04, C05 & C06 due to staff changes during the month which aren't always updated on the system in time.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is due to an error in the monthly scripts. The weekly figures are correct.
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.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	Figures provided reflect a problem with the booking system. Volumes recommended to attend an IUC treatment centre are similar to figures to pre Adastra outage but due to the issues with direct booking this figure has dropped considerably.
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.

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.

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	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.
G11, G10	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 items 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 111AL2 Devon (PPG)
Vocare data omitted from centile and average metrics as data is received by PPG in aggregated format.

Data item	Description	Comments
A01	Number of calls received	The peak of calls offered relating to Group A Streptococcus infections in December did not occur again in January after the schools reopened as had been anticipated. Volumes of calls relating to winter symptoms also saw a reduction in January and was on a par with those in November and 2.5 times that of August.
B01	Calls answered within 60 seconds	Call lengths saw an improvement with week on week reductions following the implementation of a focussed work stream to improve efficiency.
B06, B07	Time to call answer	

Data item	Description	Comments
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	All cases that enter our clinical queue are risk assessed by a clinician within 10 minutes & upgraded to a higher priority if required. Safety calls are also made whilst waiting for clinical call backs to check for any worsening or change of symptoms in our patients.
E17	Callers recommended self-care at the end of clinical input	Performance affected by acuity of patients within clinical queue higher than expected and lack of access to primary care.
E27	Number of calls initially given an ETC disposition that are validated	ED DoS validation is live. 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 January is 82.6%.
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, UTC, MIS & PC) of the slots made available to 111 to book. Only 61 slots were not booked (1%), 1,318 were not available (37%), and 2,223 were booked (62%).
G05	Number of calls where the caller was booked into an IUC Treatment Centre	Looking at the three IUC Treatment Centres in Devon, only three slots were made available for 111 to book into in January and none of them were utilised (one in Plymouth and two at Newton Abbot).
G07	Number of calls where the caller was booked into a UTC	We are currently reviewing what services are listed under a UTC UID. Currently all Devon services are profiled under a IUC TC or Urgent Care resulting in the calculate submissions being low.
G11	Number of calls where the caller was booked into an SDEC service	This SDEC service is not running currently in Devon.

Comments for 111AH2 Gloucestershire

Data item	Description	Comments
A01	Number of calls received	Performance improved this month as a result of internal work stream projects and because the peak of calls offered relating to Group A Streptococcus infections in December did not occur again in January after the schools reopened as had been anticipated.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06 to B07	Time to call answer	

E17	Number of callers recommended self-care at the end of clinical input	Failed access to primary care means that the acuity of patients sitting in our clinical queue is much greater and therefore self-care is not appropriate.
E27	Number of calls initially given an ETC disposition that are validated	Since February 2022, 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 January is 80.6%.
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. Looking at total slot utilisation (ED, MIIU, GHAC & PC) of the slots made available to 111 to book (939), only 23 slots were not booked throughout January meaning 97.6% of the slots available to us were utilised and booked. In 45% of total cases there were no appointments available for 111 to book into.
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. In January there were only 11 slots made available to 111 staff to book into MIIU's or Gloucester Access Centre and 5 of those were booked. In 88% of total appropriate cases, there were no appointments available for 111 to book into.
G09	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 January there were no slots available for 111 to book directly into in 71% of total appropriate cases. Of the slots made available to 111 (115 slots), only 7.8% (9 slots) of those slots were not booked by our staff. Meaning 92.2% 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
A01	Number of calls received	The peak of calls offered relating to Group A Streptococcus infections in December did not occur again in January after the schools reopened as had been anticipated. Volumes of calls relating to winter symptoms also saw a reduction in January and was on a par with those in November and 2.5 times that of August.

E27	Calls initially given an ETC disposition that are validated	Now validated through ED DOS validation.
G01	Calls where caller given an appointment	Still limited opportunities as triaging for COVID symptoms rather than direct booking.
G05	Calls where the caller was booked into an IUC Treatment Centre	
G07	Calls where the caller was booked into a UTC	Minimal opportunities to do this (just one UTC).
G10, G11	SDEC selections	The SDEC care service isn't currently active.

Comments for 111AK9 South West London

Data item	Description	Comments
A01	Number of calls received	LAS recommenced sending SWL Adastra data from 16th January. Disparity with provisional data is because we only became aware the data feed had recommenced on 24th January so wasn't included in the weekly submission for w/e 22/01. All the LAS SWL January data has been included in the monthly submission.
B01	Number of calls answered within 60 seconds	January saw high sickness absence among the HA/CA cohort which had an adverse effect on service delivery. Whilst service demand saw a decrease, Ambulance service strikes meant that added pressure was put upon the IUC system in terms of acuity into the clinical queues. As a result, front end resource was utilised to patient safety calls, ensuring queues remained safe.
B02	Number of calls abandoned	
B06	Total time to call answer	Work continues on improving our actual handling times with new work streams being implemented to improve handling efficiency.
B07, B08	95th & 99th centile call answer time (seconds)	SWL Telephony centile figures exclude LAS data as line data is not available.
C01	Number of calls where person triaged	LAS recommenced sending SWL Adastra data from 16th January. Disparity with provisional data is because we only became aware the data feed had recommenced on 24th January so wasn't included in the weekly submission for w/e 22/01. All the LAS SWL January data has been included in the monthly submission.
D01	Calls assessed by a clinician or Clinical Advisor	January saw high sickness absence among the HA/CA cohort which had an adverse effect on service delivery. Whilst service demand saw a decrease, Ambulance service strikes meant that added pressure was put upon the IUC system in terms of acuity into the clinical queues. As a result, front end resource was utilised to patient safety calls, ensuring queues remained safe.

E17	Number of callers recommended self-care at the end of clinical input	Increase in self care recommendations at end of clinical input since last month correlated to decrease of Strep A Cases which required more face to face referrals.
E21	Number of calls initially given a category 3 or 4 ambulance disposition that are validated within 30 minutes	Figures are missing 999 validations done by LAS; numbers show the few that were picked up by Practice Plus Group.
E27	Number of calls initially given an ETC disposition that are validated	We run an ED DoS validation which shows proportion of calls initially given an ED that are validated at 85.7% December. 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.
F02	Directory of Services: no service available other than ED (ED catch-all)	This is usually very low or zero.

Comments for 111AI2 Surrey Heartlands

Data item	Description	Comments
A01	Number of calls received	The peak of calls offered relating to Group A Streptococcus infections in December did not occur again in January after the schools reopened as had been anticipated. Volumes of calls relating to winter symptoms also saw a reduction in January and was on a par with those in November and 2.5 times that of August.
E27	Calls initially given an ETC disposition that are validated	Now validated through ED DOS validation.
G10, G11	SDEC selections	The SDEC care service isn't currently active.

SCAS

Comments for 111AH9 Hampshire & Surrey Heath

Fields listed as zero are legitimate zeros, such as those reported for SDEC and ITK, which we do not operate. Fields left blank fall into one of three categories: a) we have been unable to provide the data due to technical limitations, mostly around telephony; b) metrics which we need more time to investigate, including community pharmacy / prescription booking and DOS options (not DoS selected); c) we have unfortunately been unable to clarify with a number of external IUC providers what metrics they would report against based on their services and been unable to finalise setup of our SFTP site to allow those who have completed the process to submit data to us.

Data item	Description	Comments
A02	Calls routed through IVR	Zero due to no IVR at call start when passed to service
A05	External clinician calls to Clinical Assessment Service (CAS)	Blank as uncertainty whether there is a direct line in this way.
A06	Unscheduled IUC attendances	SCAS does not hold this data – we have experienced problems gathering data from providers.
B07, B08	95th/99th centile call answer time (seconds)	Telephony data are not provided at a transactional level so we are unable to split telephony figures by contract area. Figures are calculated by applying a % based on numbers triaged.
B09	Total time of abandoned calls (seconds)	
C01	Number of calls where person triaged	Disparity with provisional figures is because triage data were only included in weekly figures from w/c 9th. The breakdown of triage data across the two SCAS contracts has been calculated based on GP practice, but some CCGs are split across the two contracts so cannot be used. A number of hours in January are underreported or missing entirely, with some at 0 or single figures for the number of triages. With these being specific timescales and part hours, we cannot apply an uplift and would advise that we do not yet have 100% confidence in the data.
C05	Number of calls where person triaged by any other Clinician	Zero. No known "Other" clinicians operate.
C06	Calls where person triaged by another staff type not within the other 4 categories	Contains cases where staff role was unable to be found in system.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because the monthly calculation includes a manual workaround to count calls passed via the DoS. We do not have time to add this data into the weekly ADC submission.
D03	Calls assessed by an advanced nurse practitioner	Do not operate this staff type any more.
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)

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	Increase in demand caused significant moves away from call backs in 20 minutes due to the change in patient type and acuity.
F01 to F03	Directory of Services	We do not have data for these items as we have not yet had our SSRS feed reinstated after the Adastra outage.
G02 to G09	Callers booked into a service following a DoS selection	Figures this month have been refined to include details combining DoS service types and appointments from external records. Disparity with provisional figures is due to not being able to manually update weekly DoS figures with up to date service types – this is only feasible monthly.
G11	Number of calls where the caller was booked into an SDEC service	No DoS booked appointments listed for SDEC in timeframe
G12, G13	Number of calls received by dental services not using DoS	Figures are considerably lower than in previous months as most of the booking done by dental was moved to be done via the DoS from 21st January.
G14	Number of calls where caller given any other appointment	Disparity with provisional figures is due to not being able to manually update weekly DOS figures with up to date service types – this is only feasible monthly.
G15 to G19	Community pharmacy service	We do not have data for these items as we have not yet had our SSRS feed reinstated after the Adastra outage.
G20, G23	Number of patients requiring a face to face consultation in their home residence	SCAS does not hold this data – as we have experienced problems gathering data from Providers.
H13, H16	Number of NHS 111 Online contacts that resulted in patient requiring a face to face consultation in an IUC Treatment Centre	

Comments for 111AG9 Thames Valley
Fields listed as zero are legitimate zeros, such as those reported for SDEC and ITK, which we do not operate. Fields left blank fall into one of three categories: a) we have been unable to provide the data due to technical limitations, mostly around telephony; b) metrics which we need more time to investigate, including community pharmacy / prescription booking and DOS options (not DoS selected); c) we have unfortunately been unable to clarify with a number of external IUC providers what metrics they would report against based on their services and been unable to finalise setup of our SFTP site to allow those who have completed the process to submit data to us.

Data item	Description	Comments
A02	Calls routed through IVR	Zero due to no IVR at call start when passed to service
A05	External clinician calls to Clinical Assessment Service (CAS)	Blank as uncertainty whether there is a direct line in this way.
A06	Unscheduled IUC attendances	SCAS does not hold this data – we have experienced problems gathering data from providers.
B07, B08	95th/99th centile call answer time (seconds)	Telephony data are not provided at a transactional level so we are unable to split telephony figures by contract area. Figures are calculated by applying a % based on numbers triaged.
B09	Total time of abandoned calls (seconds)	
C01	Number of calls where person triaged	Disparity with provisional figures is because triage data were only included in weekly figures from w/c 9th. The breakdown of triage data across the two SCAS contracts has been calculated based on GP practice, but some CCGs are split across the two contracts so cannot be used. A number of hours in January are underreported or missing entirely, with some at 0 or single figures for the number of triages. With these being specific timescales and part hours, we cannot apply an uplift and would advise that we do not yet have 100% confidence in the data.
C05	Number of calls where person triaged by any other Clinician	Zero. No known "Other" clinicians operate.
C06	Calls where person triaged by another staff type not within the other 4 categories	Contains cases where staff role was unable to be found in system.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because the monthly calculation includes a manual workaround to count calls passed via the DoS. We do not have time to add this data into the weekly ADC submission.
D03	Calls assessed by an advanced nurse practitioner	Do not operate this staff type any more.
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)

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	Increase in demand caused significant moves away from call backs in 20 minutes due to the change in patient type and acuity.
F01 to F03	Directory of Services	We do not have data for these items as we have not yet had our SSRS feed reinstated after the Adastra outage.
G02 to G09	Callers booked into a service following a DoS selection	Figures this month have been refined to include details combining DoS service types and appointments from external records. Disparity with provisional figures is due to not being able to manually update weekly DoS figures with up to date service types – this is only feasible monthly.
G11	Number of calls where the caller was booked into an SDEC service	No DoS booked appointments listed for SDEC in timeframe
G12, G13	Number of calls received by dental services not using DoS	Figures are considerably lower than in previous months as most of the booking done by dental was moved to be done via the DoS from 21st January.
G14	Number of calls where caller given any other appointment	Disparity with provisional figures is due to not being able to manually update weekly DOS figures with up to date service types – this is only feasible monthly.
G15 to G19	Community pharmacy service	We do not have data for these items as we have not yet had our SSRS feed reinstated after the Adastra outage.
G20, G23	Number of patients requiring a face to face consultation in their home residence	SCAS does not hold this data – as we have experienced problems gathering data from Providers.
H13, H16	Number of NHS 111 Online contacts that resulted in patient requiring a face to face consultation in an IUC Treatment Centre	

SECAmb
Comments for 111AI9 Kent, Medway & Sussex

Data item	Description	Comments
A04	Calls transferred from the 999 Ambulance Service into NHS 111	SECAmb does not transfer low-acuity 999 calls across to 111. Figures for previous months incorrectly included calls handled by dual trained agents.

D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	Metrics currently in development as agreed with local commissioners.
D24, D25	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	Metric out of scope for our operating model.
E17	Number of callers recommended self-care at the end of clinical input	Self-care outcomes after clinical output are driven predominantly by Pathways.
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	DoS: no service available other than ED (ED catch-all)	Unable to identify this value in the Cleric platform.
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 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
B01	Number of calls answered within 60 seconds	Performance in January was affected by a number of factors, including: • Call volumes gradually returned to the seasonal norm as media interest in Strep A declined • Flu and Covid cases decreased from mid-January • The NHSE dispensation to validate 999/ED in a 2 hour time frame after Staffordshire declared a critical incident prior to Christmas was lifted on 16th January.
B02	Number of calls abandoned	

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.