IUC ADC April 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 providing data to the relevant lead data supplier. Where figures reflect activity by more than one IUC service provider, there may be wide variation in the underlying performance of individual parts of the service.

This document sets out comments for each contract area, as provided by lead data suppliers, about the quality of data returns, reasons for changes since previous months and reasons for differences to provisional data items published last month.

North East and Yorkshire region

111AA1 North East
Lead data supplier: North East Ambulance Service NHS Foundation Trust (NEAS)
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
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	Number of calls answered within 60 seconds	With an increase in WTE in April, call answer times improved despite an increase in average daily demand with two bank holidays,
B06	Total time to call answer	
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.
D01	Calls assessed by a clinician or Clinical Advisor	Increase mainly due to increases in dental cases, which were up by over 50% in April, with spikes in activity over the bank holiday period. Also, we are starting to see more C3/C4 cases being re-validated as we reduce the utilisation of Hear & Advise across our service, with 500 additional cases being validated by a clinician.
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. Escalation, local commissioning agreement & CAS ED bookings reduces the volume our clinicians can revalidate.
G11	Bookings into an SDEC service	Currently not utilised – no bookings 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.

111AI7 Yorkshire and Humber (NECS)
Lead data supplier: NHS North Of England Commissioning Support Unit (NECS)
Data for GP OOH providers includes: 8GY92 - LCD, NNF - City Healthcare Partnership CIC, Y01173 - Sheffield GP Collaborative, RCD - Harrogate & District - i-Heart, NL3 - CARE PLUS, RFR - Rotherham NHSFT, NXL01 – FCMS, RJL - Northern Lincolnshire and Goole NHS Foundation Trust, NNJ - DHU Bassetlaw OOH, and NLO – Vocare.

Data item	Description	Comments
A01	Number of calls received	Performance affected by a large spike in incoming calls over the Easter weekend.
B01	Number of calls answered within 60 seconds	
B02-B04	Calls abandoned	
B06	Total time to call answer (seconds)	

B11	Total call back waiting time (seconds)	
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	Performance affected by a large spike in incoming calls over the Easter weekend. Disparity with provisional data is possibly due an error in one of the weekly submissions. The monthly figure is correct.
E14	Number of callers recommended repeat prescription medication	Includes number of cases requesting a repeat script which was then issued by LCD ADC GPOOH (which are excluded in E14).
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.
H19 to H22	NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor within a specified timeframe	We are currently unable to get the data field needed to report on the new H19-H22 data items.

North West region

111AJ3 North West including Blackpool
Lead data supplier: Midlands and Lancashire Commissioning Support Unit (Blackpool) (ML CSU)
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 submitted by BARDOC (Bolton, Bury, HMR), Blackburn with Darwen, Central Cheshire, East Cheshire, East Lancashire , FCMS (Fylde Coast, Morecambe Bay, West Lancs), GMPUCA (CAS, OOH), HRCG Care Group (West Lancs OOH) and NWAS. Even when CAS providers supply some figures, not all data items can be reported at the granularity required.

Data item	Description	Comments
A03	Number of answered calls	During April we implemented a couple of developments/changes that seem to have had a positive impact on performance/service delivery:
B02	Number of calls abandoned	1. **National support**. Since early April we have taken up the offer from NHSE to deliver 5% of our calls to Vocare to support performance. This has given approximately an additional x30 WTE per week.
B06, B07	Time to call answer	2. **Visual IVR**. In April we launched our visual IVR onto our local IVR. Visual IVR gives callers wating to be answered in the Northwest the option to have a link sent to their mobile device so that they can complete all the demographics whilst waiting to be answered. Although this is still in its first few weeks the early signs are encouraging and the data shows that from the start of call to start of triage is approximately 60 seconds shorter for the patients who have completed the demographics whilst on hold.
C01	Number of calls where person triaged	
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.
D14	Number of callers who needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately)	Specifically for one provider: includes calls received on screen as 'emergency' before triage.
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.
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.

Data item	Description	Comments
E19, E20	Number of calls initially given a category 3 or 4 ambulance disposition that receive remote clinical intervention	NWAS complete E19 and CAS complete E20 but we are still not receiving submissions from all providers.
E25	Total wait time to category 3 or 4 ambulance validation (seconds)	CAS providers are unable to provide data for E25.
E27	Calls initially given an ETC disposition that receive remote clinical intervention	Known issues with the data.
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.
G03, G05, G07, G09	IUC Service Integration	Figures exclude data from some service providers.
G10, G11	SDEC Service	Only NWAS report G10, ALL providers are asked to complete G11 (where relevant). Specifically for one provider: 38 callers booked into Rapid Response, DNs, ACU. SACU.
G14	Calls where caller given any other appointment	Figures exclude data from some service providers.
H01, H02, H04, H13 to H18	NHS 111 Online Contacts	
H20	Number of NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who received a call back within 20 minutes	NWAS has returned a 0 return and no other provider has entered anything in this field.

Midlands region

111AJ8 Derbyshire (DHU)
Lead data supplier: DHU HealthCare CIC (DHU)

Data item	Description	Comments
A01	Calls received	Figure this month inadvertently includes some Short Abandon calls and will be corrected when the future revisions window opens.

Data item	Description	Comments
		Disparity with provisional figures can be explained by the timing of the weekly load. For A01, disparities can appear if daily data loads are missed.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures can be explained by the timing of the weekly load. For D01, 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.
E26, E27	Calls initially given an ETC disposition that receive remote clinical intervention	The low KPI outcome is due to a data quality issue which will be resolved with the resubmission at a later date.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	The low KPI outcome is because cases are sent to GP OOH services that are out of area for which no bookings were made.
G11	SDEC service bookings	No activity.
G12, G13	Calls received by dental services	Not applicable to service.
G16 to G19	Community pharmacy service	

111AK7 Leicestershire and Rutland (DHU)
Lead data supplier: DHU HealthCare CIC (DHU)

Data item	Description	Comments
A01	Calls received	Figure this month inadvertently includes some Short Abandon calls and will be corrected when the future revisions window opens. Disparity with provisional figures can be explained by the timing of the weekly load. For A01, disparities can appear if daily data loads are missed.
A03	Number of answered calls	Disparity with provisional figures can be explained by the timing of the weekly load.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
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	

111AK6 Lincolnshire
Lead data supplier: DHU HealthCare CIC (DHU)

Data item	Description	Comments
A01	Calls received	Figure this month inadvertently includes some Short Abandon calls and will be corrected when the future revisions window opens. Disparity with provisional figures can be explained by the timing of the weekly load. For A01, disparities can appear if daily data loads are missed.
A03	Number of answered calls	Disparity with provisional figures can be explained by the timing of the weekly load.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
D01	Calls assessed by a clinician or Clinical Advisor	Despite the demand decreasing, the demand was still higher than forecasted on different days/time periods, which impacted on overall performance.
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.
E17	Number of callers recommended self-care at the end of clinical input	There were instances where the clinical staff were understaffed and volumes increased to levels higher than forecasted.
E27	Calls initially given an ETC disposition that are validated	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	
H19 to H22	NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor within a specified timeframe	These are 0.

111AC6 Northamptonshire
Lead data supplier: DHU HealthCare CIC (DHU)

Data item	Description	Comments
A01	Calls received	Figure this month inadvertently includes some Short Abandon calls and will be corrected when the future revisions window opens. Disparity with provisional figures can be explained by the timing of the weekly load. For A01, disparities can appear if daily data loads are missed.
B01	Calls answered within 60 seconds	Disparity with provisional figures can be explained by the timing of the weekly load.
B02	Number of calls abandoned	
B06	Total time to call answer	
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.
D14	Callers who needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who were warm transferred or received a call back within 20 minutes	Particularly low performance on some days pulls down the monthly average.
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	
E26, E27	Calls initially given an ETC disposition that receive remote clinical intervention	The low KPI outcome is due to a data quality issue which will be resolved with the resubmission at a later date.
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	
H20	Number of NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical	This is 0.

| | Advisor within 20 minutes (immediately), who received a call back within 20 minutes | |

111AL1 Nottinghamshire
Lead data supplier: DHU HealthCare CIC (DHU)

Data item	Description	Comments
A01	Calls received	Figure this month inadvertently includes some Short Abandon calls and will be corrected when the future revisions window opens. Disparity with provisional figures can be explained by the timing of the weekly load. For A01, disparities can appear if daily data loads are missed.
D01	Calls assessed by a clinician or Clinical Advisor	Decrease in performance is due to the volume of calls received which was higher than forecasted volumes.
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.
G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	It's likely that the month on month drop is a result of a busy period at ED which meant less capacity.
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	
H20	Number of NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who received a call back within 20 minutes	This is a true zero.

111AF4 Staffordshire
Lead data supplier: Vocare
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. 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.

1111AL4 West Midlands ICB (DHU)
Lead data supplier: NHS Black Country and West Birmingham CCG (West Birmingham CCG)

Data item	Description	Comments
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.
D14	Callers who needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who were warm transferred or received a call back within 20 minutes	Particularly low performance on some days pulls down the monthly average.
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	
E27	Number of calls initially given an ETC disposition that are validated	We believe this will be blank as we don't provide an ED validation service for WM, and we don't have agreements with external providers to receive this data.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	The low KPI outcome is because cases are sent to GP OOH services that are out of area for which no bookings were made.
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.

Data item	Description	Comments
H20	Number of NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who received a call back within 20 minutes	This item is expected to be low due to the nature of it, and looking at the different contracts we submit for.

East of England region

111AC5 Cambridgeshire & Peterborough
Lead data supplier: HUC

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures is because of reconciliations and corrections carried out to the databases. Occasionally we have late a running report, which may affect the figures submitted before the Monday deadline.
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	
D01	Calls assessed by a clinician or Clinical Advisor	
G10, G11	SDEC service bookings	Continues to be work in progress.

111AB2 Hertfordshire
Lead data supplier: HUC

Data item	Description	Comments
A01	Number of calls received	Improvements in performance this month mainly due to changes in staffing models so that staff are in place during peak times. Disparity with provisional figures due to reconciliations and corrections carried out after the weekly figures have been submitted.
A03	Number of answered calls	
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
G10, G11	SDEC service bookings	Continues to be work in progress.

111AG7 Luton & Bedfordshire
Lead data supplier: HUC

Data item	Description	Comments
A01	Number of calls received	Improvements in performance this month mainly due to changes in staffing models so that staff are in place during peak times.
A03	Number of answered calls	
B01	Number of calls answered within 60 seconds	Disparity with provisional figures is because of reconciliations and corrections carried out to the databases. Occasionally we have late a running report, which may affect the figures submitted before the Monday deadline.
B02	Number of calls abandoned	
B06	Total time to call answer	
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.

111AH4 Mid & South Essex
Lead data supplier: Integrated Care 24 Ltd (IC24)

Data item	Description	Comments
A05	External clinician calls to Clinical Assessment Service (CAS)	This item currently not available, due development or not applicable.
B01	Number of calls answered within 60 seconds	Performance affected by the decrease in demand and a reduction in hours lost to staff sickness. Call time metrics all affected by peak demand during the weekends (the average demand during weekends is more than double the average demand during weekdays).
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.
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.

Data item	Description	Comments
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. 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	
H19 to H22	NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor within specified timeframe	These are nulls instead of 0. We are currently not able to monitor whether a call back has been offered via an online assessment.

111AC7 Milton Keynes
Lead data supplier: DHU HealthCare CIC (DHU)

Data item	Description	Comments
A01	Number of calls received	Figure this month inadvertently includes some Short Abandon calls and will be corrected when the future revisions window opens. Disparity with provisional figures can be explained by the timing of the weekly load. For A01, disparities can appear if daily data loads are missed.
B02	Number of calls abandoned	Disparity with provisional figures can be explained by the timing of the weekly load.
B06	Total time to call answer	
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 Service	The low value is caused by cases that are sent to GP OOH services that out of area.

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	
H19, H20	Number of NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor within specified timeframe	These are 0.

111AG8 Norfolk including Great Yarmouth and Waveney
Lead data supplier: Integrated Care 24 Ltd (IC24)

Data item	Description	Comments
A01	Number of calls received	Demand increased quite significantly across April over a very short period, with nearly 8,000 calls made to the 111 service over 4 days across the bank holiday weekend.
A05	External clinician calls to Clinical Assessment Service (CAS)	This item currently not available, due development or not applicable.
B01	Number of calls answered within 60 seconds	High demand over the bank holiday weekend affect volume of calls answered within 60s, with average of 35% over the Bank Holiday and 43% excluding Bank Holiday. On days with consistently high abandonment rate (over 25% of calls abandoned) more than 1,000 calls were received.
B02	Number of calls abandoned	
B07, B08	Call answer centiles	Due to the way that our calls are currently aggregated, centile figures may be inaccurate.
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.
D22, D23	Callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20 minutes	Low volume of calls trigger D22. Whether or not D23 is achieved is related to the volume of calls sitting on the queue at any time.
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.
G07	Number of calls where the caller was booked into a UTC	These are nulls instead of 0, we are currently not able to monitor whether a call back has been offered via an online assessment.

Data item	Description	Comments
G11, G10	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.
G12, G13	Calls received by dental services not using DoS	These items are currently not available, due development or not applicable.
H17, H18	NHS 111 Online contacts initially given an ETC disposition	
H19 to H22	NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor	These are nulls instead of 0, we are currently not able to monitor whether a call back has been offered via an online assessment.

111AH7 North East Essex & Suffolk
Lead data supplier: Practise Plus Group (PPG)

Data item	Description	Comments
B01	Number of calls answered within 60 seconds	Ongoing work to improve efficiency in call handling times saw a positive improvement again this month.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures due to cases that had been sent for validation not included in weekly data. This was amended in time for the monthly submission.
E17	Number of callers recommended self-care at the end of clinical input	With consistent failed access to primary care during in hours, the acuity of our clinical queue remains high. This ultimately impacts the appropriateness of self-care recommendations.
E27	Calls initially given an ETC disposition that are validated	Now validated through ED DOS validation.
G05	Calls where the caller was booked into an IUC Treatment Centre	Still limited opportunities as triaging for COVID symptoms rather than direct booking.
G10, G11	SDEC selections	The SDEC care service isn't currently active.

111AI3 West Essex
Lead data supplier: HUC

Data item	Description	Comments
A01	Number of calls received	

A03	Number of answered calls	Improvements in performance this month mainly due to changes in staffing models so that staff are in place during peak times.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	Disparity with provisional figures due to reconciliations and corrections carried out after the weekly figures have been submitted.
C01	Number of calls where person triaged	
D01	Calls assessed by a clinician or Clinical Advisor	
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.

London region

11AD5 North Central London
Lead data supplier: London Central and West Unscheduled Care Collaborative (LCW)
The IUC ADC Reporting Suite in Adastra has not been updated to match the 2023/24 IUC ADC specification, therefore some data items are based on 2021/22 definitions.

Data item	Description	Comments
A01	Number of calls received	National resilience in place on 20/02/2023. 15% was being diverted away, but this percentage was occasionally higher due to capacity being utilised at national resilience. SVCC continued to be switched off in April.
A02	Calls routed through IVR	We do not use any IVRs.
A07	Calls which originated from an external NHS 111 provider	Not provided in the current suite of reports we run from Adastra. We have estimated this figure.
C01	Number of calls where person triaged	Figure is higher compared to number of call answered - this could be due to estimating A07.
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.

D14	Callers who needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who were warm transferred or received a call back within 20 minutes	There is a known issue with this data item.
D20 to D26	Clinical assessment	Not available in the current suite of reports we run from Adastra.
E01	Total number of dispositions	The logic for C01 has not been updated to meet the updated definitions and therefore is lower than E01.
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	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.
G10, 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.
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. This has been raised with Advanced to get rectified.
H19 to H22	NHS 111 Online contacts offered and accepted call backs in need of speaking to a clinician or clinical advisor	Data items are blank. ADC reporting suite in Adastra not updated to match the most recent ADC specification.

111AH5 North East London
Lead data supplier: London Ambulance Service NHS Trust (LAS)

Data item	Description	Comments
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because the monthly data has been adjusted to exclude 'non direct clinical input'.
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	Callbacks are based on priorities, whereas ADC reporting is based on Dx codes. These Dx codes are not aligned to priorities set up in the CAS.
G13	Calls received by dental services not using DoS that resulted in a booked appointment	This is appointment data from SMILE.

111AJ1 North West London
Lead data supplier: London Ambulance Service NHS Trust (LAS)

Data item	Description	Comments
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because the monthly data has been adjusted to exclude 'non direct clinical input'.
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	Callbacks are based on priorities, whereas ADC reporting is based on Dx codes. These Dx codes are not aligned to priorities set up in the CAS.
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded usually.

111AD7 South East London
Lead data supplier: London Ambulance Service NHS Trust (LAS)

Data item	Description	Comments
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because the monthly data has been adjusted to exclude 'non direct clinical input'.
D14, D23	Number of callers who needed to speak to a clinician or Clinical Advisor, who were warm transferred or received a call back within the specified timeframe	Callbacks are based on priorities, whereas ADC reporting is based on Dx codes. These Dx codes are not aligned to priorities set up in the CAS.
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded usually.

G13	Number of calls received by dental services not using DoS that resulted in a booked appointment	This is appointment data from SMILE.

111AK9 South West London
Lead data supplier: Practice Plus Group (PPG)

Data item	Description	Comments
A01	Number of calls received	Overall performance improved in April as we continued to reduce the vacancy gap through various initiatives. We have also further reduced the length of time in which calls are handled, which is creating more availability.
A03	Number of answered calls	
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	Disparity with provisional figures due to some erroneous duplicate counting in weekly data on 01/04/2023 and 02/04/23.
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	Overall performance improved in April as we continued to reduce the vacancy gap through various initiatives.
D01	Calls assessed by a clinician or Clinical Advisor	
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	We have discovered a glitch in PaCCS reporting over the last 2 months which has now been fixed, may be one of the reasons for data change, it is being checked internally.
E20	Number of calls initially given a category 3 or 4 ambulance disposition that receive remote clinical intervention	Figures are missing 999 validations done by LAS; numbers show the few that were picked up by Practice Plus Group.
F02	Directory of Services: no service available other than ED (ED catch-all)	This is usually very low or zero.

South East region

111AH9 Hampshire & Surrey Heath
Lead data supplier: South Central Ambulance Service NHS Foundation Trust (SCAS)
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
A03	Number of answered calls	Improvement since last month is almost entirely down to increased availability of call handlers.
A05	External clinician calls to Clinical Assessment Service (CAS)	Blank as uncertainty whether there is a direct line in this way.
B01	Calls answered within 60 seconds	Improvement since last month is almost entirely down to increased availability of call handlers.
B02	Number of calls abandoned	
B06	Total time to call answer	
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	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.
C05	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.
D14	Callers who needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who were warm transferred or received a call back within 20 minutes	Figures impacted by the change in given callback time up to an hour suggested for Cat 3 & 4, as calls are being picked up further down the queue rather than < 30 minutes which would previously have been the case.
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.

Data item	Description	Comments
		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	These items are reporting considerably lower than they had in previous months as a move was made on the 21st to shift most of the booking done by dental to be done via the DOS. As such, volumes have dropped by very nearly a third on last month, and next month we are expecting they would drop to be very low as almost all work will then go through with DOS data.
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	
H19-H22	Number of NHS 111 Online contacts where person was offered and accepted a call back	

111AA6 Isle of Wight
Lead data supplier: Isle of Wight NHS Trust
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	Calls from other 111 providers are now separated out from A01 and counted in A07. IOW are not able to include 'calls transferred from the 999 Ambulance Service into NHS 111' in A01. IOW 111 and 999 call answering services are co located and served by the

		same call handlers/clinicians - so calls are not physically received and answered for reporting as per the spec.
A03	Number of answered calls	The island is now fully staffed in relation to Health Advisors which has led to improvements in performance.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
C01	Number of calls where person triaged	C01 exceeds the sum of A03+A07 due to some paramedics calling through on the wrong line so not counting in the correct (telephony) figures - but are still being added as a 111 case entry.
D01	Calls assessed by a clinician or Clinical Advisor	Clinical capacity impacted by sickness, maternity and vacancies within a small team.
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	SSRS reporting is still not suitable re the new IUCADC spec. We are continuing to use data from the Pathways Intelligent Data Toolkit and are now able to exclude any '111 Online' cases, from F01 to F03
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 many other All bookings reported are for IUC TC's on the mainland.
G07	Number of calls where the caller was booked into a UTC	IOW111 does not book directly into IOW UTC. For April, of the 29 booked appointments, 26 originated from the local GP ED Validation service process (part of CAS). The other three were bookings into UTC services on the mainland. Therefore, G07 is majorly influenced by the IOW GP validation service. The drop in the number of

Data item	Description	Comments
		'validations' over the last few months appears to be related to the volume of calls answered. The conversion to UTC bookings has dropped too – the service is not aware of any apparent reason for this.
G10, G11	SDEC service bookings	SDEC opened in January for telephony referrals and we only have a draft SOP so still not embedded. It was a PACCs clinician only Dx code when it was first introduced and we rarely have a SP on the desk.
G16-G19	Prescription & pharmacy services	IOW are now using DoS service data downloaded from the 'Pathways Intelligent Data Tool' to calculate G16, G17, G18 and G19 (independently of SSRS). We are now able to exclude '111 Online cases' by cross reference to our IUC ADC case lists.
G20 to G23	Face to face consultations	This section of reporting is still being developed.
H18-H22	Number of NHS 111 Online contacts where person was offered and accepted a call back	SSRS Reporting not updated for H01 to H22 - not able to report new metrics H19 to H22 at this time.

111AI9 Kent, Medway & Sussex
Lead data supplier: South East Coast Ambulance Service NHS Foundation Trust (SECAmb)

Data item	Description	Comments
B01	Number of calls answered within 60 seconds	Gradual improvement in staffing and forecasting, especially for the Easter weekend.
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	
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.

Data item	Description	Comments
G11	SDEC referrals and bookings	Commissioners 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.
H19, H20, H21, H22	NHS 111 Online contacts	These are NULL. As per previous months, SECAmb does not have granularity of Online activity.

111AI2 Surrey Heartlands
Lead data supplier: Practice Plus Group (PPG)

Data item	Description	Comments
B01	Number of calls answered within 60 seconds	Improvements in some of the key metrics this month follows a period of intense focus particularly on AHT, which is starting to bear out in the figures.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures due to cases that had been sent for validation not included in weekly data. This was amended in time for the monthly submission.
E17	Number of callers recommended self-care at the end of clinical input	With consistent failed access to primary care during in hours, the acuity of our clinical queue remains high. This ultimately impacts the appropriateness of self-care recommendations.
E27	Calls initially given an ETC disposition that are validated	Now validated through ED DOS validation.
G05	Number of calls where the caller was booked into an IUC Treatment Service	Lack of opportunities to direct book into these services in this area.
G10, G11	SDEC selections	The SDEC care service isn't currently active.

111AG9 Thames Valley
Lead data supplier: South Central Ambulance Service NHS Foundation Trust (SCAS)
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
B01	Calls answered within 60 seconds	Improvement since last month is almost entirely down to increased availability of call handlers.
B02	Number of calls abandoned	
B06	Total time to call answer	
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	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.
C05	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.
D14	Callers who needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who were warm transferred or received a call back within 20 minutes	Figures impacted by the change in given callback time up to an hour suggested for Cat 3 & 4, as calls are being picked up further down the queue rather than < 30 minutes which would previously have been the case.
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.

Data item	Description	Comments
		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.
G12, G13	Number of calls received by dental services not using DoS	These items are reporting considerably lower than they had in previous months as a move was made on the 21st to shift most of the booking done by dental to be done via the DOS. As such, volumes have dropped by very nearly a third on last month, and next month we are expecting they would drop to be very low as almost all work will then go through with DOS data.
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	
H19-H22	Number of NHS 111 Online contacts where person was offered and accepted a call back	

South West region
111AJ2 BaNES, Swindon & Wiltshire / 111AL6 BaNES, Swindon & Wiltshire (Medvivo-PPG)

Lead data supplier: Medvivo group (Medvivo)

Medvivo (BSW) transitioned 111 call handler (from DHU to PPG) on 25/04/2023. We are aware that we may not have all reporting fully accurate for this first monthly submission as we have changed 3rd party supplier, configured our own new Adastra instance and had to make amendments for the revised NHSE ADC specification.

Data item	Description	Comments
D02-D09	Calls being assessed by a clinician or clinical advisor	There are known issues with data provided by PPG in relation to these data items.

Data item	Description	Comments
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	Calls where the caller was booked into an SDEC service	BSW IUC do not yet book appointments into the SDEC service.
H01-H22	NHS Online	Our partner PPG are currently not supporting digital/online sourced contacts.

111AI5 Bristol, North Somerset & South Gloucestershire
Lead data supplier: BRISDOC Healthcare Services Ltd (BRISDOC)

Data item	Description	Comments
A01	Number of calls received	Figures exclude calls queued to advisor that do not trigger IVR. From around 24 April, telephony data required an update to cater for contractual changes at PPG. Updated data:
B02	Number of calls abandoned	A01 Number of calls received 30,415 B02 Number of calls abandoned 2,150
B01 to B11	Call handling	CAS data not included as unavailable.
B02	Number of calls abandoned	Currently includes calls not queued to skillset as this is not available in 111 data (will be revised in future).
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.
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. |

111AL3 Cornwall (HUC)
Lead data supplier: HUC

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

111AL2 Devon (PPG)
Lead data supplier: Practice Plus Group (PPG)

Vocare data omitted from centile and average metrics as data is received by PPG in aggregated format.

Data item	Description	Comments
B01	Calls answered within 60 seconds	Improvements in performance in April due to: - Improvements in team efficiency and weekend workforce planning - Growth in Health Advisor and Clinical Advisor capacity - Projects to reduce AHT and increase performance by utilisation of advice lines
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional data is because cases that had been sent for validation weren't included in the weekly figures. This was amended in time for the monthly submission.
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 and 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.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	For the three IUC Treatment Centres in Devon for April: 161 unavailable appointments, 3 not booked, and 0 booked.
G07	Number of calls where the caller was booked into a UTC	Incorrect unique descriptor has meant that reporting is incorrect (services not mapping correctly).

G11	Number of calls where the caller was booked into an SDEC service	This SDEC service is not currently running in Devon.

111AI4 Dorset
Lead data supplier: Dorset Health Care (DHC)

Data item	Description	Comments
B06	Total time to call answer	Total time to call answer in March and the first two days of April was based on estimates.
C02	Calls where person triaged by a Service Advisor	These items are zero and do not apply to our service at this time.
D04	Calls assessed by a mental health nurse	
D07	Calls assessed by a dental nurse	
G10, G11	Calls where the caller was booked into an SDEC service	The SDEC referral process with the acute hospitals in Dorset has been agreed to go live in May.
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

111AH2 Gloucestershire
Lead data supplier: Practise Plus Group (PPG)

Data item	Description	Comments
A01	Number of calls received	As expected, April's call volume was much higher than March because of the four-day Easter weekend. However, Gloucestershire's volume was 41% above the contract baseline and we answered 107% of contracted volume. 2,840 more calls were answered over a weekend in April than in March.
A03	Number of answered calls	The increase in demand was partly due to a 76.6% increase (an additional 294 calls) for repeat prescriptions throughout April compared to March.
B01	Calls answered within 60 seconds	Disparity with provisional figures relates to the reintroduction of HUC calls for Gloucestershire and the commencement of them for BNSSG. Although the HUC line for Gloucestershire only needed to be reopened, the BNSSG line was a new set up which introduced reporting issues. During the time that we were working with the telephony team to rectify the problems there was a weekly submission which contained incorrect telephony

Data Items	Description	Comments
		data for Gloucestershire. The issue with the telephony lines was resolved and the data corrected in time for the monthly submission.
B02	Number of calls abandoned	Abandoned calls saw a significant increase at weekends. The number of weekday abandoned calls was 3.1% (-729 calls) lower than in March; weekend abandoned calls were 4.1% (+1,590 calls) higher.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is due to cases that had been sent for validation not being included in this metric at the time of the weekly submission. This was amended for the monthly submission so all cases assessed by a clinician including validation are included in the monthly count.
E17	Callers recommended self-care at the end of clinical input	With consistent failed access to primary care during in hours, the acuity of our clinical queue remains high.
G05	Calls where the caller was booked into an IUC Treatment Centre	During the Covid pandemic the appointment function for bookable appointments into IUC Treatment Centres (PPG OOH's for Gloucester) was switched off to aid and reduce face to face contact. Since then, all contact cases are sent via ITK for telephone triage in the first instance & OOH's will then book into bases as necessary. In a handful of cases, other area TC's still profile on the DoS with bookable functions.
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 April there were no slots available for 111 to book directly into in 85% of total appropriate cases. Of the slots made available to 111 (52 slots), only 3.84% (2 slots) of those slots were not booked by our staff, meaning 96.16% of the slots available to us were utilised and booked.
G11, G10	SDEC selections	The SDEC care service isn't currently active.

111AL5 Somerset (HUC)
Lead data supplier: HUC

Data Items	Description	Comments
F02	Directory of Services: no service available other than ED (ED catch-all)	There is almost always at least *something* on the DOS that can be selected by the call handler – a service other than ED or transfer to a service clinician.
G10, G11	SDEC service bookings	We currently do not have or book into a SDEC service.

111 National Support

111NR1 National Resilience
Lead data supplier: Vocare
No comments received

111SA1 Service Advisor Modules (IC24)
Lead data supplier: Integrated Care 24 Ltd (IC24)
As this service is heavily geared towards supporting patients with repeat prescription requests, many data items are not relevant to NSA.

Data item	Description	Comments
B07 & B07	95th & 99th centile call answer time	Due to cisco aggregated percentiles, we cannot give an exact figure on this.
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	Might be inaccurate due to the way the calls are aggregated.
E17	Number of callers recommended self-care at the end of clinical input	A very high proportion of NSA calls are about repeat prescriptions; a lower percentage of calls then move on for a symptomatic assessment but still require clinical input from a GP.
E19-E25	Calls initially given a category 3 or 4 ambulance disposition	Null as these are not achievable NSA outcomes.
E26-E31	Calls initially given an ETC disposition	
G05	Number of calls where the caller was booked into an IUC Treatment Centre	
G10, G11	SDEC service	
G20-G23	Patients requiring a face to face consultation	
H01-H16	NHS 111 Online	
G03	Number of calls where the caller was booked into a GP Practice or GP access hub	Based on the number of appointments we have available when the caller has reached this point – DAB appointments are always given when available.
G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	Patients can only be booked in with a timeslot to ED if speaking to a clinician. NSA is limiting the volume of calls to a clinician for ED validation as is designed for primarily accommodating repeat prescription requests.

| H19 to H22 | NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor within specified timeframe | These are nulls instead of 0, we are currently not able to monitor whether a call back has been offered via an online assessment. |