

IUC ADC June 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.
B02	Number of calls abandoned	Performance helped by reduced call demand and slight reduction in EOC
B06	Total time to call answer	sickness and turnover.
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.
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. CAS ED validation profile switched off for roughly 9 hours in June due to pressure on the CAS at certain times.
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, NL3 - CARE PLUS, RFR - Rotherham NHSFT, RJL - Northern Lincolnshire and Goole NHS Foundation Trust, NNJ - DHU Bassetlaw OOH, and NLO – Vocare. Provider submitted but with missing data: NXL01 – FCMS. No submission from RCD - Harrogate & District - i-Heart.

Data item	Description	Comments
A01	Number of calls received	Although overall demand in June was in line with forecast, the two middle weeks of the month saw much higher demand (+7.8% calls received vs. baseline during w/c 12 th June, and +17.8% calls received vs. baseline during w/c 19 th June). This was probably due to unusually high temperatures during those weeks.

A03	Number of answered calls	Performance during spikes in demand accounted for the highest abandonment rates (peaking at 24.1%) and a general drop in call answer performance (%
B01	Number of calls answered within 60 seconds	answered in 60, avg. speed to answer etc. were all worst during this time).
C01	Number of calls where person triaged	These stats all improved again the following week when temperatures were more in line with expected seasonal norms.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional data is due to an error with the weekly submissions Monthly figures are correct.
E14	Number of callers recommended repeat prescription medication	Excludes number of cases requesting a repeat script which was then issued by LCD ADC GPOOH (which are included in G15).
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.
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 H22 data item.

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.

Data item	Description	Comments
A03	Number of answered calls	
B01	Calls answered within 60 seconds	Performance impacted by staggered implementation of new
B02	Number of calls abandoned	rota patterns for all frontline staff throughout June. There
B06, B07	Time to call answer	were also some small fluctuations in sickness/absence.
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	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	Includes some double counting of calls triaged by NWAS and passed to CAS providers.
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.
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	Figures exclude data from some service providers.

Ī		NHS 111 Online contacts where person was offered and	
	H20	accepted a call back and needed to speak to a clinician or	NWAS has returned a 0 return and no other provider has
	1120	Clinical Advisor within 20 minutes (immediately), who	entered anything in this field.
		received a call back within 20 minutes	

Midlands region

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

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. 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. However, this would be captured in the monthly submission when data is reloaded.	
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	
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. However, this would be captured in the monthly submission when data is reloaded.	
G11	SDEC service bookings	None recorded this month.	
G12, G13	Calls received by dental services	Null not applicable to our convice	
G16 to G19	Community pharmacy service	Null - not applicable to our service.	
	NHS 111 Online contacts where		
H20	person was offered and accepted	These are 0.	
	a call back and needed to speak		

to a clinician or Clinical Advisor	
within 20 minutes	

111AK6 Lincolnshire

Lead data supplier: DHU HealthCare CIC (DHU)

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. 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. However, this would be captured in the monthly submission when data is reloaded. Demand was higher than forecasted on different days/time periods, which impacted on overall performance.
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.
E28	Number of calls initially given an ETC disposition that are given an ambulance setting disposition after receiving remote clinical intervention	
E29	Number of calls initially given an ETC disposition that are given a lower acuity than an ambulance or ETC disposition after receiving remote clinical intervention	Consistently blank as the service is provided externally and we don't have access to data.
E30	Total wait time to ETC remote clinical intervention (seconds)	
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, H20	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 NorthamptonshireLead data supplier: DHU HealthCare CIC (DHU)

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. However, this would be captured in the monthly submission when data is reloaded.
G11	SDEC service bookings	CAS colleagues are unable to book patients into SDEC.
G12, G13	Calls received by dental services	Not applicable to convice
G16 to G19	Community pharmacy service	Not applicable to service.
H20	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 0.

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

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. 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. However, this would be captured in the monthly submission when data is reloaded.

		Decrease in performance is due to the volume of calls received which was higher than forecasted volumes.
E27	Calls initially given an ETC disposition that are validated	DHU do not provide an ED validation service for Nottinghamshire, this is provided by NEMS.
E28	Calls initially given an ETC disposition that are given an ambulance setting disposition after receiving remote clinical intervention	These are consistently blank as we don't provide that
E29	Calls initially given an ETC disposition that are given a lower acuity than an ambulance or ETC disposition after receiving remote clinical intervention	service. Services are handled externally and we don't have access to data.
E30	Total wait time to ETC remote clinical intervention (seconds)	
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 collete this information
G16 to G19	Community pharmacy service	Null return as not yet able to collate this information.
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	These are consistently blank as we don't provide that service. Services are handled externally and we don't
H18	NNHS 111 Online contacts initially given an ETC disposition that receive remote clinical intervention	have access to data.

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
A01	Number of calls received	Front and parformance impacted by staff absonce and an increased number of
A03	Number of answered calls	Front-end performance impacted by staff absence and an increased number of
B01	Calls answered within 60 seconds	new starters who require additional support from more experienced staff.

B02	Number of calls abandoned	
B06, B07	Time to call answer	
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
B02	Number of calls abandoned	Disparity with provisional figures can be explained by the timing of the
B06	Total time to call answer	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
D01	Calls assessed by a clinician or Clinical Advisor	within the IUC ADC weekly submission values. 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. There is a large variance, for example, KPI 5a is around 46% on some days in the month and others are almost as low as 10%.
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	Particularly low performance on some days pulls down the monthly average. There is a large variance, for example, KPI 5b is around 35% on some days in the month and others are almost as low as 6%.
E27-E30	Number of calls initially given an ETC disposition that are validated	DHU don't provide an ED validation service for West Midlands and 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	Low volumes are due to 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.
G16-G19	Calls where a community pharmacy service was an option	Service is provided externally and we don't have access to data.
H16-H17	NHS 111 Online contacts that resulted in patient requiring a face to face consultation	Service is provided externally and we don't have access to data.

H20	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	We expect figures for this item to be low in view of the different contracts we submit for.
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East of England region 111AC5 Cambridgeshire & Peterborough Lead data supplier: HUC

Data item	Description	Comments
A01	Number of calls received	
A03	Number of answered calls	Diapority with provinional data is because of a refresh of the figures
B01	Number of calls answered within 60 seconds	Disparity with provisional data is because of a refresh of the figures, following changes to the SQL Code.
B02	Number of calls abandoned	Tollowing changes to the SQL Code.
B06	Number of calls abandoned	
G10, G11	SDEC service bookings	SDEC referrals are very low.

111AB2 Hertfordshire

Lead data supplier: HUC

Data item	Description	Comments
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is due to end of month reconciliations.
G10, G11	SDEC service bookings	Continues to be work in progress.

111AG7 Luton & Bedfordshire

Lead data supplier: HUC

	Data item	Description	Comments
ŀ	B02	Number of calls abandoned	Disparity with provisional figures is due to an error which meant calls were
	202	Trainibor of ballo abarraorioa	miscounted in the weekly submission. This error also affected figures for May.

D01	Calls assessed by a clinician or Clinical	Disparity with provisional figures is due to revalidation of the weekend data
	Advisor	after the Monday weekly submission.
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	Improved performance due to decrease in demand and increase in
B02	Number of calls abandoned	staff hours compared to last month.
B06	Total time to call answer	stan hours compared to last month.
B07, B08	Call answer centiles	Due to the way that our calls are currently aggregated, centile
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	figures may be inaccurate. We have not yet been able to provide a more granular measurement for centile call time.
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	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	Those items are currently not available, due development or not
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	These items are currently not available, due development or not applicable.

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
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. However, this would be captured in the monthly submission when data is reloaded.
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	Not applicable to service.

111AG8 Norfolk including Great Yarmouth and Waveney 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	
B02	Number of calls abandoned	Improved performance due to decrease in demand and increase in staffing compared to last month.
B06	Total time to call answer	stanting compared to last month.
B07, B08	Call answer centiles	Due to the way that our calls are currently aggregated, centile figures
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	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. If we can book by the DoS we make an appointment and if there is not a booking facility available then we pass the patient information to UTC to allow them to follow their own processes.
G10, 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.
G12, G13	Calls received by dental services not using DoS	These items are currently not available, due development or not
H17, H18	NHS 111 Online contacts initially given an ETC disposition	applicable.
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
B02	Number of calls abandoned	Reductions in Average Handling Time due to a significant focus to
B06	Total time to call answer	release staff capacity helped us reduce abandonment rates this month.
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.
G03	Number of calls where the caller was booked into a GP Practice or GP access hub	Low numbers due to the lack of availability of appointments.

G05	Calls where the caller was booked into an IUC	Still limited opportunities as triaging for COVID symptoms rather than
G05	Treatment Centre	direct booking. No direct booking appointments available
G10, G11	SDEC selections	The SDEC care service isn't currently active.

111AI3 West Essex

Lead data supplier: HUC

Data item	Description	Comments
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures due to end of month reconciliations.
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

missing, estimated or based on 2021/22 definitions.

Data item	Description	Comments
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.
B01	Number of calls answered within 60 seconds	Performance impacted by upplanned sickness and shortfall in
B02	Number of calls abandoned	Performance impacted by unplanned sickness and shortfall in recruitment to meet required FTE for Health Advisors.
B06	Total time to call answer	recruitment to meet required FTE for Health Advisors.
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	Not applicable.
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 D25	Clinical assessment	Not available in the current suite of reports we run from Adastra.
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.
G15	Number of calls where repeat prescription medication was issued within your service	Local policy is to refer these to community pharmacies to deal with the request. We do not issue the repeat prescriptions.
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	The figure is 0 or low due to the type of referrals from 111 Online which do not result in face-to-face home consultations.
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.

H19 to H22	NHS 111 Online contacts offered and accepted call backs	Data items are blank. ADC reporting suite in Adastra not updated
H 19 10 HZZ		to match the most recent ADC specification.

111AH5 North East London

Lead data supplier: London Ambulance Service NHS Trust (LAS)

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	Call backs are based on priorities, whereas ADC reporting is based on Dx codes which 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	Calls received by dental services not using DoS that resulted in a booked appointment	No Smile data was received from HLP, so submitted value is zero.
G18	Number of calls where a community pharmacy service was an option on DoS for minor illness	This now includes rejections.

111AJ1 North West London

Lead data supplier: London Ambulance Service NHS Trust (LAS)

Data item	Description	Comments
C01	Number of calls where person triaged	Some clinical activity on the NWL contract occurs in the ECAS (CHUB). We have made some improvements to reporting CHUB activity for NWL this month.
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	Call backs are based on priorities, whereas ADC reporting is based on Dx codes which are not aligned to priorities set up in the CAS. Note that data for May will be amended in the next revisions window so that it is based on the OLC date (Online Clinician Date). This means that May's calculated KPI5a will change to 22.7%.
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded usually.
G13	Calls received by dental services not using DoS that resulted in a booked appointment	No Smile data was received from HLP, so submitted value is zero.

G18	Number of calls where a community pharmacy service was an option on DoS for minor illness	This now includes rejections.
H20, H22	NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor, who received a call back within the specified timeframe	These are true zeroes for this month.

111AD7 South East London

Lead data supplier: London Ambulance Service NHS Trust (LAS)

Data item	Description	Comments
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	Call backs are based on priorities, whereas ADC reporting is based on Dx codes which 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	No Smile data was received from HLP, so submitted value is zero.
G18	Number of calls where a community pharmacy service was an option on DoS for minor illness	This now includes rejections.

111AK9 South West London

Lead data supplier: Practice Plus Group (PPG)

Data item	Description	Comments
B07, B08	95th & 99th centile call answer time (seconds)	Telephony centile figures exclude LAS data as line data is not available.
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.
G13	Number of calls received by dental services not using DoS that resulted in a booked appointment	No Smile data was received from HLP, so submitted value is zero.

G18	Number of calls where a community pharmacy service was an option on DoS for minor illness	This now includes rejections.
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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
A01	Number of calls received	Excludes calls taken by National Resilience (Vocare).
A05	External clinician calls to Clinical Assessment Service (CAS)	Blank as uncertainty whether there is a direct line in this way.
B07, B08	95 th /99th centile call answer time (seconds)	Telephony data are not provided at a transactional level so we are
B09	Total time of abandoned calls (seconds)	unable to split telephony figures by contract area. Figures are calculated by applying a % based on numbers triaged.
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.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because the additional work done to include dental calls cannot be completed for the weekly submission.
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	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 the SSRS feed reinstated after the Adastra outage.

G02 to G09	Callers booked into a service following a DoS selection	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
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 the SSRS feed reinstated after the Adastra outage.
G20, G23	Number of patients requiring a face to face consultation in their home residence	
H13-H16	Number of NHS 111 Online contacts that resulted in patient requiring a face to face consultation in an IUC Treatment Centre	SCAS does not hold this data – as we have experienced problems gathering data from Providers.
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.

D	ata item	Description	Comments
	A01	Number of calls received	This month, 111 activity was diverted on Tuesday, Wednesday, and Thursday nights from 23:00 to 07:30 due to issues with recruitment of clinicians. 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 ADC specification.
	D01	Calls assessed by a clinician or Clinical Advisor	Clinical capacity continues to be 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 ETC dispositions, therefore negating the need for a '111 First (or 'ETC') 'validation'. If we were to record only the calls that would have been referred to an ETC, 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 ETC.
G01 to G10	Callers given appointments and booking types	Currently, 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	Our 111 service is currently unable to book directly into our own IUC or any other IUC services elsewhere. All bookings reported are for IUC TC's elsewhere.
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.
G20 to G23	Face to face consultations	This section of reporting is still being developed.
H01-H22	NHS 111 Online contacts	SSRS reporting not updated for H01 to H22 - not able to report new metrics H19 to H22 at this time.

111Al9 Kent, Medway & Sussex
Lead data supplier: South East Coast Ambulance Service NHS Foundation Trust (SECAmb)

Data item	Description	Comments
A01	Number of calls received.	Reported volume is reduced by approx. 13,000 answered by other providers via national contingency due to a service outage 7 to 9 June, supported via the National Resilience service.
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	Metrics currently in development as agreed with local
D24, D25	Time to clinical assessment for callers requiring assessment within a timeframe over 20 minutes	commissioners.

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	Matrice currently upovoilable
E25	Total wait time to category 3 or 4 ambulance validation	Metrics currently unavailable.
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	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. SECAmb does not have granularity of Online activity.

111AI2 Surrey Heartlands

Lead data supplier: Practice Plus Group (PPG)

Data item	Description	Comments
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. Direct booking not available in these Services
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
A01	Number of calls received	Excludes calls taken by National Resilience (Vocare).
A05	External clinician calls to Clinical Assessment Service (CAS)	Blank as uncertainty whether there is a direct line in this way.
B07, B08	95 th /99th centile call answer time (seconds)	Telephony data are not provided at a transactional level so we are
B09	Total time of abandoned calls (seconds)	unable to split telephony figures by contract area. Figures are calculated by applying a % based on numbers triaged.
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.
D01	Calls assessed by a clinician or Clinical Advisor	Figures exclude calls booked as GP OOH which are handled as external appointments rather than CAS case transfers.
D03	Calls assessed by an advanced nurse practitioner	Do not operate this staff type any more.
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	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.
E03	Number of callers recommended to attend an ETC	Submitted figure includes some double counting – should be 6,698.
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, G14	Callers booked into a service following a DoS selection	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 to H16	Number of NHS 111 Online contacts that resulted in patient requiring a face to face consultation in an IUC Treatment Centre
H19 to H22	Number of NHS 111 Online contacts where person was offered and accepted a call back

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

Lead data supplier: Medvivo group (Medvivo)

Data item	Description	Comments
A07	Calls which originated from an external NHS 111 provider	Our 111 partner (PPG) have advised they do not externally receive cases directly into the 111 service.
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.
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.
G03	Number of calls where the caller was booked into a GP Practice or GP access hub	Zero returns made in May for these data items were erroneous – at the time we made this first full-month return with data from our
G07	Number of calls where the caller was booked into a UTC	new partner it was unclear to us how bookings were flagged in the
G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	data we received – this has since been understood and resolved within the June data.
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
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 added in future).
E19-E30	Number of calls initially given a category 3 or 4 ambulance disposition & Number of calls initially given an ETC	PPG as NHS111 provider run bespoke processes for ED and 999 validations data, which typically result in higher validation rates
L 19-L30	disposition	than can be captured via ADC.
F02	Directory of Services: no service available other than ED	Zero cases - ED catch-all only triggers in exceptional
1 02	(ED catch-all)	circumstances
G01 to G14	Caller given an appointment	Figures exclude CAS activity as they are unavailable.
22-	Number of calls where the caller was booked into an IUC	Very few bookings for IUC treatment centres are made directly
G05	Treatment Centre	from 111 (ie not CAS); most 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.
	Number of calls where caller given a booked time slot with	Direct bookings to ED 1&2 are disabled. Values seen are for
G09		UTCs and out-of-region ED services only. Bookings made by
	a Type 1 or 2 ED	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
A01	Number of calls received	Disparity with provisional data is because Kernow has a separate telephony system, from which data must be extracted and uploaded manually each day. Kernow's weekend figures are not always processed by the time the ADC weekly figures are produced.
A03	Number of answered calls	Overall, June weekdays were nearly 5% better performing than May
B01	Number of calls answered within 60 seconds	weekdays. Weekday 9am abandonment rate also decreased significantly, from
B02	Number of calls abandoned	21% in May to just 8% in June.

D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is due to the time lag in weekly data relating to dispositions that are reached on a Sunday before midnight where the call back is after midnight, i.e. on a different day.
G07	Number of calls where the caller was booked into a UTC	Since HUC took over 111 in November, there hasn't been a single appointment made within Cornwall at a UTC. All cases captured in G07 are from out of area.
G10, G11	SDEC referrals and bookings	Since January 2023, SDEC has only ever appeared on the DoS a handful of times per day.

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
A01	Number of calls received	
A03	Number of answered calls	
B01	Number of calls answered within 60 seconds	Davan is still receiving national resiliance and IC24 support from
B02	Number of calls abandoned	Devon is still receiving national resilience and IC24 support from Vocare. This will mean that all data submitted is PPG only and will
B06	Total time to call answer	
B07	95th centile call answer time not show full contract performance.	
C01	Number of calls where person triaged	
D01	Calls assessed by a clinician or Clinical Advisor	
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	PPG are not booking PPC or home visiting appointments directly from 111.
G07	Calls where the caller was booked into a UTC	No slots available, 15 unavailable to book in June.
G11	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

C02	Calls where person triaged by a Service Advisor	
D04	Calls assessed by a mental health nurse	These items are zero and do not apply to our service.
D07	Calls assessed by a dental nurse	
G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	Please note that direct booking into ED during the month of June was reduced due to the booking ledgers being taken down due to an upgrade of the firewall at Dorset County Hospital. In addition to this, there are around 40-50 that may be in the incorrect category in C due to implementing PACCS. We are currently rewriting the reporting for this and are on track to correctly submit next month.
G12, G13	Received by dental services not using DoS	These items are zero and do not apply to our service.
H12	NHS 111 Online contacts with SDEC appointment	This is confirmed as a true zero.

111AH2 Gloucestershire

Lead data supplier: Practise Plus Group (PPG)

Data item	Description	Comments
A01	Number of calls received	Call volume expected to decrease throughout June due to May having multiple bank holidays. However, although volume decreased, calls offered were 43% above the contractual baseline.
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 OOHs 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 June there were no slots available for 111 to book directly into in 81% of total appropriate cases. Of the slots made available to 111 (71 slots), only 5.63% (4 slots) of those slots were not booked by our staff, meaning 94.36% of the slots available to us were utilised and booked.

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	G11, G10	SDEC selections	The SDEC care service isn't currently	y active.

111AL5 Somerset (HUC) Lead data supplier: HUC

Data Items	Description	Comments
A01	Number of calls received	June showed surprisingly lower call volumes than previous months (even given the
A03	Number of answered calls	lack of bank holidays and June being a shorter month), and this had a knock-on effect
B02	Number of calls abandoned	on the total number of answered calls, the number abandoned, and the time taken to
B06	Total time to call answer	answer. However, staff absence continues to put pressure on the service.
C01	Number of calls where person triaged	Diaparity with provinional figures due to methodology for recording calls and triagge
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures due to methodology for recording calls and triages on a weekly basis, which is corrected when we aggregate over the month.
G07	Calls where the caller was booked into a UTC	Increase this month is probably due to the start of the tourist season, more outdoor activities, etc.
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

Data item	Description	Comments
A03	Number of answered calls	Front and performance impacted by staff absonce and an increased number
B01	Number of calls answered within 60 seconds	Front-end performance impacted by staff absence and an increased number
B02	Number of calls abandoned	of new starters who require additional support from more experienced staff members. This has reduced our capacity at points.
B06, B07	Time to call answer	members. This has reduced our capacity at points.

111SA1 Service Advisor Modules (IC24) Lead data supplier: Integrated Care 24 Ltd (IC24)

As service is becoming more operational, it is 'switched on' for greater periods leading to increased demand. As this service is heavily geared towards supporting patients with repeat prescription requests, many data items are not relevant.

Data item	Description	Comments
A05	External clinician calls to Clinical Assessment Service (CAS)	This item currently not available, due development or not applicable.
B07, B08	95 th & 99th centile call answer time	Due to cisco aggregated percentiles, we cannot give an exact figure on this.
D01	Calls assessed by a clinician or Clinical Advisor	Nature of NSA service is to deal with lower acuity symptoms or problems, like needing repeat prescription, so we would expect lower clinical intervention.
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	Figure 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.
E27-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	
G12-G14	Dental 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	Figures are dependent 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	These are nulls instead of 0, we are currently not able to monitor whether a call back has been offered via an online assessment.

to speak to a clinician or Clinical Advisor	
within specified timeframe	