

## **IUC ADC July 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.
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 receive remote clinical intervention	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 validate.  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)

All providers submitted except for RCD- Harrogate & District – July 23 GP OOH data (due to a system change halfway through the month of June) and YO5222-i-HEART Barnsley.

Data item	Description	Comments	
B01	Number of calls answered within 60 seconds	Figures exclude calls that were handled externally - 10% of total demand was	
B02	Number of calls abandoned	outsourced for w/c 10 <sup>th</sup> July, with 5% outsourced in each remaining week.	
B06	Total time to call answer	- outsourced for w/c 10" July, with 5% outsourced in each remaining week.	
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	Disparity with provisional data is due to an error with the weekly submissions	
DOT	Advisor	Monthly figures are correct.	
E14	Number of callers recommended repeat	Excludes number of cases requesting a repeat script which was then issued by	
L 14	prescription medication	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 this 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. 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, TAS), HRCG Care Group (West Lancs OOH) and NWAS. GMPUCA TAS is a new provider this month and covers

Trafford Assessment Service co-located in the UCC.

Data item	Description	Comments
B02	Number of calls abandoned	Average time to answer and the abandoned rate was the
B06	Total time to call answer	highest during the junior doctors' strikes between 13th-18th.
C01	Number of calls where person triaged	NWAS only = 121,231 for this item.

D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because different providers submit monthly and weekly returns.
D02 to D09	Calls assessed by staff type	Not all CAS/OOH providers can accurately split out 'Calls assessed by a clinician or Clinical Advisor ' into the sublines.
D24, D25	Time to clinical assessment for callers requiring assessment within a timeframe over 20 minutes	Data not available to calculate the average and 95th percentile for these from provider submissions.
E01 to E30	Calls with Clinical Input, IUC Recommendations (Dispositions) and Validation of Dispositions	Figures exclude data from some service providers.
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, G11, G13 and G14	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.

## Midlands region

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

Data item	Description	Comments
G11	SDEC service bookings	No activity.
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	These are usually zero or very low.
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# 111AK7 Leicestershire and Rutland (DHU) Lead data supplier: DHU HealthCare CIC (DHU)

Data item	Description	Comments	
D14	Callers who needed to speak to a clinician or Clinical Advisor within 20 minutes	Affected by a higher than forecasted	
	(immediately), who were warm transferred or received a call back within 20 minutes	volume for clinical staff.	
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.	
H20	NHS 111 Online contacts where person was offered and accepted a call back and	Those are usually zero or very low	
Π20	needed to speak to a clinician or Clinical Advisor within 20 minutes	These are usually zero or very low.	

#### 111AK6 Lincolnshire

Lead data supplier: DHU HealthCare CIC (DHU)

Data item	Description	Comments
D01	Calls assessed by a clinician or Clinical Advisor	Demand was higher than forecasted on different days/time periods, which impacted on overall performance.
E17	Callers recommended self-care at the end of clinical input	Impacted by clinical staffing and higher than forecast call volumes.
E27	Calls initially given an ETC disposition that receive remote clinical intervention	DHU do not provide an ED validation services for Lincs and do not have access to this data.
E28	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	Calls where the caller was booked into an IUC Treatment Centre	Cases are sent to GP OOH services that are out of area and 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 convice	
G16 to G19	Community pharmacy service	Not applicable to service.	
	NHS 111 Online contacts where person was offered and accepted		
H19, H20	a call back and needed to speak to a clinician or Clinical Advisor	These are 0.	
	within a specified timeframe		

111AC6 Northamptonshire
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. 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	Performance impacted by volume of calls received which was higher than forecasted volumes.

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		
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	Particularly low performance on some days pulls down the monthly average.	
E27	Calls initially given an ETC disposition that receive remote clinical intervention	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 services are	
E29	Calls initially given an ETC disposition that are given a lower acuity than an ambulance or ETC disposition after receiving remote clinical intervention	handled externally and we don't have access to data.	
E30	Total wait time to ETC remote clinical intervention (seconds)		
G05	Calls where the caller was booked into an IUC Treatment Centre	The low value is because cases are sent to GP OOH services that are out of area for which no bookings were made.	
G10, G11	SDEC service bookings	Not yet used within service.	
G12, G13	Calls received by dental services	Null return as not yet able to collate this	
G16 to G19	Community pharmacy service	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,	
H18	NHS 111 Online contacts initially given an ETC disposition that receive remote clinical intervention	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	These are usually zero or very low.	

#### 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
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	Our data team made some changes to improve accuracy of those metrics this month
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	Performance affected by volume of calls received which was higher than forecasted volumes.
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	Calls initially given an ETC disposition that receive remote clinical intervention	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	
010-019	an option	Service is provided externally and we don't have access to data.
H15-H18	NHS 111 Online contacts that resulted in patient	Service is provided externally and we don't have access to data.
піз-піо	requiring a face-to-face consultation	
	NHS 111 Online contacts where person was	
H20	offered and accepted a call back and needed to	We expect figures for this item to be low in view of the different contracts we
	speak to a clinician or Clinical Advisor within 20	submit for.
	minutes (immediately), who received a call back	Submit for.
	within 20 minutes	

# East of England region 111AC5 Cambridgeshire & Peterborough Lead data supplier: HUC

Data item	Description	Comments
C01	Number of calls where person triaged	Disparity with provisional data is because of a refresh of the figures,
D01	Calls assessed by a clinician or Clinical Advisor	following changes to the SQL Code.
G10, G11	SDEC service bookings	SDEC referrals are very low.

#### 111AB2 Hertfordshire

Lead data supplier: HUC

Data item	Description	Comments
B01	Calls answered within 60 seconds	Performance impacted by improvements in getting staffing at the right place
B02	Number of calls abandoned	at times of the day when call volumes are higher, and a gradual drop in call
B06	Calls abandoned after 60 seconds	volume since April 2023.
C01	Number of calls where person triaged	Disparity with provisional data is due to end of month reconciliations.
D01	Calls assessed by a clinician or Clinical Advisor	Dispanty with provisional data 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	
B01	Number of calls answered within 60 seconds	Performance impacted by lower call volumes combined with refinements to our	
B02	Number of calls abandoned	staffing model.	
B06	Total time to call answer	- staining model.	
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 a reduction
B02	Number of calls abandoned	in staff sickness.
B06	Total time to call answer	in stan sionicos.
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	

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 receive remote clinical intervention	
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	
G05	Number of calls where the caller was booked into	The low value is caused by cases that are sent to GP OOH services that	
G05	an IUC Treatment Service	out of area.	
G11	SDEC service bookings	Not yet used within service.	
G12, G13	Calls received by dental services	Not applicable to convice	
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	Improved performance despite increased demand correlated to lowest staff absences since recording in
B02	Number of calls abandoned	2020 and many new starters became fully operational in July. There were days of 100% answered rate in July
B06	Total time to call answer	which improved overall performance in relation to typical weekend demand.

B07, B08	Call answer centiles	Due to the way that our calle are currently aggregated contile	
D21	95th centile time to clinical assessment for callers requiring	Due to the way that our calls are currently aggregated, centile figures may be inaccurate.	
DZI	assessment within 20 minutes (immediately)		
	Callers who needed to speak to a clinician or Clinical Advisor		
D23	within a timeframe over 20 minutes, who were warm	Performance related to the volume of calls sitting on the	
D23	transferred or received a call back within the specified	queue at any time.	
	timeframe		
		SDEC is not used on the DoS much; SDEC booking is done	
G10, G11	SDEC service bookings	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	
H17, H18	NHS 111 Online contacts initially given an ETC disposition	not applicable.	
1117,1110		1.	
	NHS 111 Online contacts where person was offered and	These are nulls instead of 0, we are currently not able to	
H19 to H22	accepted a call back and needed to speak to a clinician or	monitor whether a call back has been offered via an online	
	Clinical Advisor	assessment.	

#### 111AH7 North East Essex & Suffolk

Lead data supplier: Practise 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.
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 Treatment Centre	Still limited opportunities as triaging for COVID symptoms rather than 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
B01	Number of calls answered within 60 seconds	The fall in call volumes month on month enabled us to meet demand more
B02	Number of calls abandoned	adequately, as did refining our delivery model to take advantage of the
B06	Total time to call answer	changes.
C01	Number of calls where person triaged	Disparity with provisional data due to end of month reconciliations.
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

missing, estimated or based on 2021/22 definitions.

Data item	Description	Comments	
A01	Number of calls received	National resilience was in place with 15% of calls diverted away (percentage was occasionally higher). SVCC continued to be switched off in July.	
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	Derformance impacted by upplanned sigly and aboutfull in	
B02	Number of calls abandoned	<ul> <li>Performance impacted by unplanned sickness and shortfall in recruitment to meet required FTE for Health Advisors.</li> </ul>	
B06	Total time to call answer	Tecruiment to meet required FTE for Fleath 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 receive remote clinical intervention 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.
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 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
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded usually or if there are it is usually very small numbers of cases.
G18	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
D14	Number of callers who needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who were warm transferred or received a call back within 20 minutes	The CAS KPI 5a for July 2023 was at 48%, but the Clinical Advisors brings the total performance down.
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded usually or if there are it is usually very small numbers of cases.
H20, H21, 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
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded usually or if there are it is usually very small numbers of cases.

#### 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.
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.

#### **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 Excludes calls taken by National Resilience (Vocare). Number of calls received A01 External clinician calls to Clinical Assessment A05 Blank as uncertainty whether there is a direct line in this way. Service (CAS) B07, B08 95<sup>th</sup>/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 Total time of abandoned calls (seconds) B09 applying a % based on numbers 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 C01 Number of calls where person triaged two contracts so cannot be used. Calls where person triaged by any other Clinician Zero. No known "Other" clinicians operate. C05 Figures exclude calls booked as GP OOH which are handled as external D01 Calls assessed by a clinician or Clinical Advisor appointments rather than CAS case transfers.

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	
G12	Number of calls received by dental services not using DoS	These items are considerably lower than in previous months as a move was made on the 21st to shift most of the booking done by dental to be	
G13	Number of calls received by dental services not using DoS that resulted in a booked appointment	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 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.

Data item	Description	Comments
A01	Number of calls received	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.
A03	Number of answered calls	Improvements in performance due to being fully staffed in relation to call handling with better levels of sickness than previously seen. We have also embedded
A07	95th centile call answer time (weekly minimum)	Senior Health Advisors whose aim is to streamline call handling time by providing advice and support to Health Advisors.
C01	Number of calls where person triaged	The number of 'triages' exceed the number of 'answered' calls (A03+A07) primarily because we are not able to automatically include 'calls from 999' (which was previously reported as A04).
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 receive remote clinical intervention	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.
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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.	The increase in call volume compared to last is due to significant use of National Contingency during a service outage in early June.
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 receive remote clinical intervention 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)	
E26	Number of calls initially given an ETC disposition	CAS response was challenged due to increase in clinical volume, and re-assignment of CAS activity to ambulance validation.
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.
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 <sup>th</sup> /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.

F01 to F03	Directory of Services	We do not have data for these items as we have not yet had our SSRS feedback up and running after the Adastra outage from which these were sourced.
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.
G11	Number of calls where the caller was booked into an SDEC service	No DoS booked appointments listed for SDEC in timeframe
G12	Number of calls received by dental services not using DoS	These items are reporting considerably lower than in previous months as a move was made on the 21st to shift most of the booking done by
G13	Number of calls received by dental services not using DoS that resulted in a booked appointment	dental to be done via the DOS. As such volumes have dropped by very nearly a third on last month.
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	
H13 to 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 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.
B06	Total time to call answer	Disparity with provisional data is because until 9 <sup>th</sup> July the weekly data erroneously included "answer time" for 'abandoned calls' (ie. time to

		abandon) due to our new partner providing call data in a slightly different	
		format to our previous partner. The monthly value for this metric is correct.	
F02	Directory of Services: no service available other	Since Jan 2022, BSW IUC have not been processing the CatchAll DoS item	
F02	than ED (ED catch-all)	for reporting purposes.	
G08	DoS selections – Type 1 or 2 ED	Our IUC provision is not currently using SDEC – there is work ongoing	
G09	Number of calls where caller given a booked	operationally to identify/incorporate SDEC.	
009	time slot with a Type 1 or 2 ED	operationally to identify/fricorporate 3DEC.	
G11	Calls where the caller was booked into an SDEC	BSW IUC do not yet book appointments into the SDEC service.	
011	service	BOW TOO do not yet book appointments into the SDLO service.	
H01-H22	NHS Online	Our partner PPG are currently not supporting digital/online sourced contacts.	

111Al5 Bristol, North Somerset & South Gloucestershire
Lead data supplier: BRISDOC Healthcare Services Ltd (BRISDOC)

Data item	Description	Comments
A01	Number of calls received	Overall demand fell in July with an average of 685 NHS111 calls per weekday (an 11% decrease) and 997 NHS111 calls per weekend/bh (a 15% decrease).
B01 to B11	Call handling	CAS data not included as unavailable.
E19-E30	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); most bookings are via CAS, which are not captured. This will occasionally be zero. Home and treatment centre visits and within timeframe were on target at 97% and 99 within target respectively.
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. ED remote assessments were on target at 83%, with 999 at 78%.
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
A03	Number of answered calls	Although overall call volumes are lower than the same period in 2022, calls relating to dental Symptom Groups have been increasing for several months (Dec-Mar average 289; Apr-Aug average 443).
B01	Calls answered within 60 seconds	Improvements in performance can largely be attributed to staffing across all contracts as
B02	Number of calls abandoned	July's worked call handler hours was 10% greater than June's.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is because cases that started before midnight Sunday aren't given clinical input until the early hours of Monday so aren't included in the weekly upload.
G07	Number of calls where the caller	Since HUC took over 111 in November, there hasn't been a single appointment made within
307	was booked into a UTC	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	There were 10 separate periods of national contingency in July, totalling 30.24 hours, a slight increase compared to June. The general theme for activations during the month related to a broad mixture of provider technical & clinical safety issues, including some pre-planned activations.

E17	Callers recommended self-care at the end of clinical	Performance affected by acuity of patients within clinical queue higher
	input	than expected and lack of access to primary care.
G05	Number of calls where the caller was booked into an	PPG are not booking PPC or home visiting appointments directly from
Gus	IUC Treatment Centre	111.
G07	Calls where the caller was booked into a UTC	Only 4 slots were made available and not booked in July. 136
Gui	Calls where the caller was booked into a OTC	appointments unavailable.
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	Description	Comments
C02	Calls where person triaged by a Service Advisor	This item is zero and does not apply to our service.
D01	Calls assessed by a clinician or Clinical Advisor	Any disparity with provisional data is because D01 is often estimated in the weekly figures due to delays in data loading from a data provider.
D04	Calls assessed by a mental health nurse	Those items are zero and do not apply to our convice
D07	Calls assessed by a dental nurse	These items are zero and do not apply to our service.
G05	Number of calls where the caller was booked into an IUC Treatment Service	Figures are under-reported as we have identified through testing that cases being booked into the Clinical Assessment Service are not currently being counted in G05.
G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	ADC reporting has been updated this month to correctly record PACCS cases.
G10, G11	Calls where the caller was booked into an SDEC service	No cases recorded in July.
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

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, resulting in lower self-care dispositions.
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 July there were no slots available for 111 to book directly into in 83% of total appropriate cases. Of the slots made available to 111 (66 slots), only 7.57% (5 slots) of those slots were not booked by our staff, meaning 92.42% 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
A01	Number of calls received	Increase this month is probably due to the start of the tourist season, more outdoor activities, etc.
D01		Disparity with provisional figures is 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	Continuing trend of low appointments booked vs DoS UTC referrals for this region.
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	

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
B06, B07	Time to call answer	members.

## 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
A01	Number of calls received	
A03	Number of answered calls	As NCA is becoming fully apprecianal with increased staffing and mare national
B01	Number of calls answered within 60 seconds	As NSA is becoming fully operational with increased staffing and more periods where the service is 'switched on' to receive calls, demand continues to increase.
B02	Number of calls abandoned	The service is not utilised unless there are enough staff present to deal with predicted volumes of calls, so NSA is able to respond appropriately to the level of
B06	Total time to call answer	demand by making multiple agents switch to being NSA ready. This allows higher
C01	Number of calls where person triaged	volumes of calls to be taken while not affecting performance overall.
D01	Calls assessed by a clinician or Clinical Advisor	volumes of calls to be taken while not affecting performance overall.
A05	External clinician calls to Clinical Assessment Service (CAS)	This item currently not available, due development or not applicable.
B07, B08	95 <sup>th</sup> & 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.

E26-E31	Calls initially given an ETC disposition	
G05	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	
G20-G23	consultation	
H01-H16	NHS 111 Online	
G03	Calls where the caller was booked into a	Figures are dependent on the number of appointments we have available when the
<u> </u>	GP Practice or GP access hub	caller has reached this point – DAB appointments are always given when available.
G07	Number of calls where the caller was	Nature of NSA service is to deal with lower acuity symptoms or problems, like
G07	booked into a UTC	needing repeat prescription, so we would expect fewer calls to attend UTC.
	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
G09		is limiting the volume of calls to a clinician for ED validation as is designed for
		primarily accommodating repeat prescription requests.
	NHS 111 Online contacts where person	
H19 to H22	was offered and accepted a call back	These are nulls instead of 0, we are currently not able to monitor whether a call
	and needed to speak to a clinician or	back has been offered via an online assessment.
	Clinical Advisor within specified	Sacrifica Scott energy via an enimo accoment.
	timeframe	