

## IUC ADC August 2023 - comments from lead data suppliers

Data for the IUC ADC are provided by lead data providers for each integrated urgent care service in England. It is the responsibility of commissioners of an IUC service to identify lead data providers and ensure that data are supplied each month. While lead data suppliers are responsible for collating and coordinating information for IUC ADC, they are not necessarily contracted to deliver all NHS 111 and out of hours services in the contract area. Integrated Urgent Care is provided by a variety of organisations, including ambulance services, private companies, not for profit organisations and NHS Trusts.

The quality of data is therefore dependent upon all parts of the IUC service providing data to the relevant lead data supplier. Where figures reflect activity by more than one IUC service provider, there may be wide variation in the underlying performance of individual parts of the service.

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

### North East and Yorkshire region

#### 111AA1 North East

Lead data supplier: North East Ambulance Service NHS Foundation Trust (NEAS)

Figures exclude outcome/call performance for sub-contracted providers (GatDoc, VoCare & Elm) and initial telephony/triage data for DCAS in Cumbria.

Data item	Description	Comments
A07	Calls which originated from an external NHS 111 provider	We are unable to separately identify calls that are transferred from another 111 provider in SystmOne.
B01	Number of calls answered within 60 seconds	From August 16 <sup>th</sup> NEAS received additional support from Vocare, 10% of 111 calls were routed to Vocare which reduced overall demand enabling performance to improve.
B02	Number of calls abandoned	
B06	Total time to call answer	
B09	Total time of abandoned calls	We do not have the system capability to extract this information.



D01 to D09	Calls assessed by a clinician or Clinical Advisor	Items are under-reported at system level with clinical assessment not captured for primary care, OOH or UTCs. While the clinical count [D01] includes clinical contacts from system providers who have been sub-contracted either by NEAS or commissioners, due to some of the clinical contacts being performed outside of NEAS we do not have access to the specific role of the clinician who performed the contact. Therefore [D01] includes these instances but the sum of the fields [D02]-[D09] will not equal this total.
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 was switched off for roughly 9 hours in June due to pressure on the CAS.
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)

August submission includes the following GPOOH providers: L8O7C (8GY92) -LCD, NNF - City Healthcare Partnership CIC, Y01173-Sheffield GP Collaborative, RCD – Harrogate & District, Y05222 i-Heart Barnsley, NL3-CARE PLUS, RFR - Rotherham NHSFT, NXL01 – FCMS, RJL-Northern Lincolnshire and Goole NHS Foundation Trust, NNJ-DHU Bassetlaw OOH & NLO – Vocare.

Data item	Description	Comments
A01	Number of calls received	Disparity with provisional figures due to an issue with the weekly telephony data which was occasionally duplicating calls from the previous day. This issue has now been fixed so the monthly data is correct.
A03	Number of answered calls	
B01	Number of calls answered within 60 seconds	B01: Disparity with provisional figures (B01) due to an issue with the weekly telephony data which was occasionally duplicating calls from the previous day. This issue has now been fixed so the monthly data is correct.

B02	Number of calls abandoned	Due to an increase in dental staffing levels, LCD Dental saw an increase in calls answered in 60 seconds (B01), and a decrease in total time to call answer (B06) and number of calls abandoned (B02). B06: Disparity with provisional figures is due to a discrepancy in the weekly submitted data - 15 <sup>th</sup> August should have been 674,434 and 17 <sup>th</sup> August should have been 211,255.
B06	Total time to call answer	Between 5% and 10% of calls were outsourced to an independent provider in July and August and those calls never featured in our own data. The performance improvement from this has meant lower abandonment rates and call answer/wait times.
C01	Number of calls where person triaged	C01 does not equal the sum of items C02, C03, C04, C05 & C06 due to staff changes during the month which aren't always updated on the system in time.
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures due to an issue with the weekly telephony data which was occasionally duplicating calls from the previous day. This issue has now been fixed so the monthly data is correct.
D23	Callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20 minutes, who were warm transferred or received a call back within the specified timeframe	Low KPI 5b outcomes due to reporting still being developed at YAS.
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. Unfortunately we don't get that level of detail on what was offered by DoS – just what the final selection was.
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. This month, data submitted by BARDOC (Bolton, Bury, HMR), Blackburn with Darwen, East Cheshire, East Lancashire, FCMS (Fylde Coast, Morecambe Bay, West Lancs), GMPUCA (CAS, OOH, TAS), HRCG Care Group (West Lancs OOH), Central Cheshire and NWAS.

Data item	Description	Comments
B02	Number of calls abandoned	Sickness & absence did reduce through August which naturally had a positive impact on overall performance. We did also see some days where demand fell below forecast.
B06	Total time to call answer	For the Bank holiday week, we also reduced our annual leave allocation to maximise our staffing position.
C01	Number of calls where person triaged	NWAS only = 115,771 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 NWS and passed to CAS providers.
E19, E20	Calls initially given a category 3 or 4 ambulance disposition that receive remote clinical intervention	NWS 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	Where CAS/OOH providers (GMPUCA) have supplied numbers in these items, these have been added in to G01 (which previously reported only 111 activity (NWS = 16,105, CAS = 2,837)).
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 service.
G16 to G19	Community pharmacy 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.

### 111AK7 Leicestershire and Rutland (DHU)

Lead data supplier: DHU HealthCare CIC (DHU)

Data item	Description	Comments
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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	Affected by a higher than forecasted volume for clinical staff.
G11	SDEC service bookings	None recorded this month.
G12, G13	Calls received by dental services	Null - not applicable to our service.
G16 to G19	Community pharmacy service	
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.

### 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.
D23	Number of callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20 minutes, who were warm transferred or received a call back within the specified timeframe	Performance impacted by staffing.
E17	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	Consistently blank as the service is provided externally and we don't have access to data.
E29	Calls initially given an ETC disposition that are given a lower acuity than an ambulance or ETC disposition after receiving remote clinical intervention	
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 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 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 service.
G16 to G19	Community pharmacy service	

### 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	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	

E29	Calls initially given an ETC disposition that are given a lower acuity than an ambulance or ETC disposition after receiving remote clinical intervention	These are consistently blank as services are 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.
G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	Busy period at ED this month meant less capacity.
G10, G11	SDEC service bookings	Not yet used within service.
G12, G13	Calls received by dental services	Null return as not yet able to collate this information.
G16 to G19	Community pharmacy service	
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 have access to data.
H18	NHS 111 Online contacts initially given an ETC disposition that receive remote clinical intervention	
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
B01	Number of calls answered within 60 seconds	Performance impacted by operational challenges linked to resourcing.
B02	Number of calls abandoned	
B06	Total time to call answer	
B10, B11	Calls passed to a clinician or Clinical Advisor for a call back	We have observed a significant change in some of our IUC ADC metrics relating to callbacks. Following investigation, we understand this has been caused by a configuration change implemented around 7th August following a clinical safety notice issued by our system



D01-D25	Calls with Clinical Input	supplier. Whilst the configuration change mitigated the clinical safety notice, it also had an unforeseen adverse impact on our reporting suite. We have since engaged our system supplier and a resolution is being actively tested. The resolution will not be able to correct historic case data so we will not be able to make amendments to submitted data. This has affected IUC ADC weekly submissions and the monthly IUC ADC for August and September.
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 an option	Service is provided externally and we don't have access to data.

H15-H18	NHS 111 Online contacts that resulted in patient requiring a face-to-face consultation	
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.

### East of England region

#### 111AC5 Cambridgeshire & Peterborough

Lead data supplier: HUC

Data item	Description	Comments
C01	Number of calls where person triaged	Any disparity with provisional data is a result of reconciliations after month end.
D01	Calls assessed by a clinician or Clinical Advisor	
G10, G11	SDEC service bookings	SDEC referrals are very low.

#### 111AB2 Hertfordshire

Lead data supplier: HUC

Data item	Description	Comments
C01	Number of calls where person triaged	Disparity with provisional figures is due to end of month reconciliations and the monthly figures stand correct.
D01	Calls assessed by a clinician or Clinical Advisor	
G10, G11	SDEC service bookings	Continues to be work in progress.

#### 111AG7 Luton & Bedfordshire

Lead data supplier: HUC

Data item	Description	Comments
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	

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.
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#### 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.
B07, B08	Call answer centiles	Due to the way that our calls are currently aggregated, centile figures may be inaccurate. We have not yet been able to provide a more granular measurement for centile call time.
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	
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	Since the call volumes are usually low, this measure will sometimes fluctuate significantly month on month.
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.
G06, G07	Number of calls where the caller was booked into a UTC	When UTC was not chosen, 25% went to own GP, 14% went to ED, 16% went to IUC treatment centre.
G10, G11	SDEC service bookings	The booking system is not utilised as often as DoS option is being presented. There is ongoing discussion around hydrating the SG/SD codes to present more often at clinical CAS endpoints via PaCCs to enable the clinicians to select the EDDI DAB slots.
G12, G13	Calls received by dental services not using DoS	These items are currently not available, due development or not applicable.
H17	NHS 111 Online contacts initially given an ETC disposition which the patient has agreed to clinical contact and provided the necessary information for a callback	

H18	NHS 111 Online contacts initially given an ETC disposition that 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
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.
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	

### 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.
B02	Number of calls abandoned	The recruitment drive for virtual call handlers to answer 111 calls has resulted in significant improvements with higher volume of staff.
B07, B08	Call answer centiles	Due to the way that our calls are currently aggregated, centile figures may be inaccurate.
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	
D23	Callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20 minutes, who were	Performance related to the volume of calls sitting on the queue at any time. Demand increased 100%.

	warm transferred or received a call back within the specified timeframe	
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 applicable.
H17, H18	NHS 111 Online contacts initially given an ETC disposition	
H19 to H22	NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor	These are nulls instead of 0, we are currently not able to monitor whether a call back has been offered via an online assessment.

### 111AH7 North East Essex & Suffolk

Lead data supplier: Practise Plus Group (PPG)

Data item	Description	Comments
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
C01	Number of calls where person triaged	The difference in monthly and weekly figure is due to end of month reconciliations and the monthly figures stand correct.
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.
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## 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
A03	Number of answered calls	Performance this month affected by changes in our telephony system going live requiring staff training and configuration issues. Unplanned sickness in Health Advisor staff, and continuing shortfall in recruitment to meet required FTE for Health Advisors also affected performance.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
A07	Calls which originated from an external NHS 111 provider	Disparity with provisional figures due to a manual input error in one of the weekly submissions during the change of our telephony system. The monthly figures are correct.
C01	Number of calls where person triaged	Not provided in the current suite of reports we run from AdastrA. We have estimated this figure.
D04	Calls assessed by a mental health nurse	The logic for C01 has not been updated to meet the updated definitions and therefore is lower than E01.
D07	Calls assessed by a dental nurse	
D10	Number of calls assessed by a clinician or Clinical Advisor that were warm transferred	Not applicable.
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	Figure is lower than expected.
D20 to D25	Clinical assessment	There is a known issue with this data item.
E05	Number of callers recommended to attend Same Day Emergency Care (SDEC)	Not available in the current suite of reports we run from AdastrA.
		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
A01	Number of calls received	Disparity with provisional figures is due to the late arrival of telephony data from 3 <sup>rd</sup> parties that missed the deadline for the ADC weekly submission.
A03	Number of answered calls	
B02	Number of calls abandoned	
B06	Total time to call answer	
D01	Calls assessed by a clinician or Clinical Advisor	
G11	Calls where the caller was booked into an SDEC service	No bookable appointments recorded usually 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
A03	Number of answered calls	This year the drop in activity between July to August was lower than in previous years which had an impact on performance. Along with higher annual leave, an increase in sickness absence, and a poor uptake of overtime, performance was impacted by having higher cohort of new team members in training.
B02	Number of calls abandoned	



B07, B08	95th & 99th centile call answer time (seconds)	Telephony centile figures exclude LAS data as line data is not available.
C01	Number of calls where person triaged	Disparity with provisional figures is because LAS Adastra data are missing from weekly submissions.
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.

## 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	95th/99th centile call answer time (seconds)	Telephony data are not provided at a transactional level so we are unable to split telephony figures by contract area. Figures are calculated by applying a % based on numbers triaged.
B09	Total time of abandoned calls (seconds)	
C01	Number of calls where person triaged	The breakdown of triage data across the two SCAS contracts has been calculated based on GP practice, but some CCGs are split across the two contracts so cannot be used.
C05	Calls where person triaged by any other Clinician	Zero. No known "Other" clinicians operate.

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.
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	SCAS does not hold this data as we have experienced problems gathering data from providers.
H13-H16	Number of NHS 111 Online contacts that resulted in patient requiring a face to face consultation in an IUC Treatment Centre	
H19-H22	Number of NHS 111 Online contacts where person was offered and accepted a call back	

### 111AA6 Isle of Wight

Lead data supplier: Isle of Wight NHS Trust

Outcomes of calls forwarded to remote Clinical Assessment Services (DAS, PHL and MHA) are currently not included in the ADC submission.

Data item	Description	Comments
A01	Number of calls received	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.
B01	Calls answered within 60 seconds	Performance impacted by challenges relating to staff sickness in IOW AS call handlers on some days.
B02	Number of calls abandoned	
B06	Total time to call answer	
C01	Number of calls where person triaged	The number of 'trriages' 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) in A01 due to co-location of 111/999 services. IOW do not make a physical call from one service to the other due to integration of 111/999 services. Therefore, it is not possible to capture these calls in the automated telephony reporting.
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.
G07	Number of calls where the caller was booked into a UTC	IOW 111 call handlers/CSD's cannot book directly into the local UTC. Any 'direct' bookings via the DoS, will be for other UTCs that can accommodate direct booking. The performance here is heavily influenced by the appointments booked indirectly by GPs through the 'remote clinical intervention' process.

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.
H19-H22	NHS 111 Online contacts	SSRS reporting not updated to include these new metrics at this time.

### 111A19 Kent, Medway & Sussex

Lead data supplier: South East Coast Ambulance Service NHS Foundation Trust (SECAMB)

Data item	Description	Comments
B01	Number of calls answered within 60 seconds	Reduction in call answering performance due to tenure of staff, i.e. cohorts of new Health Advisors with longer Average Handling Time and increased mentoring needs.
B02	Number of calls abandoned	
B06	Total time to call answer	
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	Metrics currently in development as agreed with local commissioners.
D24, D25	Time to clinical assessment for callers requiring assessment within a timeframe over 20 minutes	
E17	Number of callers recommended self-care at the end of clinical input	Self-care outcomes after clinical output are driven predominantly by Pathways.
E21, E22	Calls initially given a category 3 or 4 ambulance disposition that 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.
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### 111A12 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> /99 <sup>th</sup> centile call answer time (seconds)	Telephony data are not provided at a transactional level so we are unable to split telephony figures by contract area. Figures are calculated by applying a % based on numbers triaged.
B09	Total time of abandoned calls (seconds)	
C01	Number of calls where person triaged	The breakdown of triage data across the two SCAS contracts has been calculated based on GP practice, but some CCGs are split across the two contracts so cannot be used.

C05	Calls where person triaged by any other Clinician	Zero. No known "Other" clinicians operate.
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
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.
B02	Number of calls abandoned	The fall in incoming call volumes may have been a significant factor in the abandonment/answer time performance improvements.
B06	Total time to call answer	

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.
G08	DoS selections – Type 1 or 2 ED	Our IUC provision is not currently using SDEC – there is work ongoing operationally to identify/incorporate SDEC.
G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	
G11	Calls where the caller was booked into an SDEC service	BSW IUC do not yet book appointments into the SDEC service. The single case recorded in August may relate to an OOA SDEC
H01-H22	NHS Online	Our partner PPG are currently not supporting digital/online sourced contacts.

### 111A15 Bristol, North Somerset & South Gloucestershire

Lead data supplier: BRISDOC Healthcare Services Ltd (BRISDOC)

Data item	Description	Comments
A01	Number of calls received	Fall in demand in August was most notable at weekends, with 673 NHS111 calls per weekday (2% decrease) and 953 NHS111 calls per weekend/bh (4.5% decrease). Disparity with provisional data is because the weekly submission for w/e 20-Aug was missed.
A03	Number of answered calls	Disparity with provisional data is because the weekly submission for w/e 20-Aug was missed.
B01 to B11	Call handling	CAS data not included as unavailable. Disparity with provisional data is because the weekly submission for w/e 20-Aug was missed.
C01	Number of calls where person triaged	Disparity with provisional data is because the weekly submission for w/e 20-Aug was missed.
D01	Calls assessed by a clinician or Clinical Advisor	
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.

G07	Number of calls where the caller was booked into a UTC	DoS profile for UTC in BNSSG results in increased UTC selections, but not bookings.
G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	Direct bookings to ED 1&2 are disabled. Values seen are for UTCs and out-of-region ED services only. Bookings made by CAS are not available to our data capturing process.
G10, G11	DoS selections – SDEC service	SDEC is not being used at all within the contract area.
G16 to G19	Community pharmacy service	Figures exclude CAS activity as they are unavailable.
H01 to H09	NHS 111 Online contacts	

### 111AL3 Cornwall (HUC)

Lead data supplier: HUC

Data item	Description	Comments
A01	Number of calls received	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.
B02	Number of calls abandoned	
C01	Calls where person triaged	
D01	Calls assessed by a clinician or Clinical Advisor	
B02	Number of calls abandoned	Service was extremely challenged by staffing pressures in the month of August, just as local demand due to the holiday season peaked, leading to a decline in performance despite the reduction in calls received.
B06	Total time to call answer	
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
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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.
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
B02	Number of calls abandoned	Disparity with provisional figures due to using estimated figures for some weekly submission.
B06	Total time to call answer	
C02	Calls where person triaged by a Service Advisor	This item is zero and does not apply to our service.
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	
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. We are working on a rewrite of the ADCs which this is a part of.
G11	Calls where the caller was booked into an SDEC service	No cases recorded in August.
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 August there were no slots available for 111 to book directly into in 85% of total appropriate cases. Of the slots made available to 111 (48 slots), 12.5% (6 slots) of those slots were not booked by our staff, meaning 87.5% 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
B01	Number of calls answered within 60 seconds	Service was extremely challenged by staffing pressures in the month of August, just as local demand due to the holiday season peaked, leading to the decline in performance despite the reduction in calls received.
C01	Calls where person triaged	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.
D01	Calls assessed by a clinician or Clinical Advisor	
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
A01	Number of calls received	Performance impacted by operational challenges linked to increased demand and resourcing.

A03	Number of answered calls	
B02	Number of calls abandoned	
B06, B07	Time to call answer	
B10, B11	Calls passed to a clinician or Clinical Advisor for a call back	We have observed a significant change in some of our IUC ADC metrics relating to callbacks. Following investigation, we understand this has been caused by a configuration change implemented around 7th August following a clinical safety notice issued by our system supplier. Whilst the configuration change mitigated the clinical safety notice, it also had an unforeseen adverse impact on our reporting suite. We have since engaged our system supplier and a resolution is being actively tested. The resolution will not be able to correct historic case data so we will not be able to make amendments to submitted data. This has affected IUC ADC weekly submissions and the monthly IUC ADC for August and September.
D01-D25	Calls with Clinical Input	

### 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 <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.
E27-E31	Calls initially given an ETC disposition	

G03	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.
G05	Calls where the caller was booked into an IUC Treatment Centre	Null as these are not achievable NSA outcomes.
G07	Number of calls where the caller was booked into a UTC	Nature of NSA service is to deal with lower acuity symptoms or problems, like needing repeat prescription, so we would expect fewer calls to attend UTC.
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.
G10, G11	SDEC service	Null as these are not achievable NSA outcomes.
G12-G14	Dental service	
G20-G23	Patients requiring a face to face consultation	
H01-H16	NHS 111 Online	
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.