IUC ADC October 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
A01	Number of calls received	Despite demand increasing, there was a slight improvement in performance due to the continued 5% support from Vocare as well as increased capacity to handle calls. 999 demand also remained static and performance maintained, which enables dual trained health advisors to be resourced across both 111 and 999.
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.
G05	Number of calls where the caller was booked into an IUC Treatment Service	Due to remapping of one team type, some services are having issues which prevent bookings.
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)

October's submission are as follows: 8GY92 (L8O7C) – LCD, NNF - City Healthcare Partnership CIC, Y01173-Sheffield GP Collaborative, RCD – Harrogate & District FT, YO5222-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
B02	Number of calls abandoned	Performance affected by staff capacity due to attrition and large numbers of new staff.
B06	Total time to call answer	
C01	Number of calls where person triaged	Disparity with provisional figures due to YAS missing weekly data for the week ending 15/10/23. NECS have identified an error in their system causing C01 to be greater than the sum of items C02 to C06 inclusive. They are working to resolve this.

C02	Number of calls where person triaged by a Service Advisor	We are reducing the use of SA's, in part due to the national resilience offer provided by IC24 which streams away some of the calls that SA's would previously have answered (e.g. repeat prescriptions).
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures due to YAS missing weekly data for the week ending 15/10/23.
D23	Callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20 minutes, who were warm transferred or received a call back within the specified timeframe	Reporting still being developed 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.
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.
H20, H22	NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor within a specified timeframe	We are currently unable to get the data field needed to report on these data items.

North West region

111AJ3 North West including Blackpool

Lead data supplier: Midlands and Lancashire Commissioning Support Unit (Blackpool) (ML CSU)

The North West does not have a single integrated contract covering both NHS111 and CAS; NWAS is the NHS 111 provider but its CAS role is limited to validation work undertaken within the 999 service. CAS provision is by a range of providers (predominantly OOH providers) who

either initially provided CAS or through being specifically commissioned by CCGs to provide CAS either as a standalone contract or as part of a wider UEC/urgent primary care contract. Given the complex picture of providers in the North West, there is an iterative transition from the submission of NWAS data only in April 2021 to MLCSU submitting data covering all service providers. This month, data submitted by BARDOC (Bolton, Bury, HMR), Blackburn with Darwen, Central Cheshire, East Cheshire, East Lancashire, FCMS (Fylde Coast, Morecambe Bay, West Lancs), GMPUCA (CAS, OOH, TAS), HRCG Care Group (West Lancs OOH) and NWAS.

Data item	Description	Comments
B02	Number of calls abandoned	Improvements in performance since last month can be attributed to increase in Vocare support to 10% through October, improved rates of staff sickness and additional Service Advisors from end September.
B06	Total time to call answer	
C01	Number of calls where person triaged	NWAS only = 123,996 for this item.
D02 to D09	Calls assessed by staff type	The majority of submitting CAS providers are unable to split out D01 into the clinician type - therefore these have been recorded under D09 to balance back.
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. (NWAS only = 123,996) E01 Total dispositions is 129,882 and is provided by NWAS (123,996) and some CAS providers (5,886).
E19, E20	Number of calls initially given a category 3 or 4 ambulance disposition	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, E26	Number of calls initially given an ETC disposition	Known issues with the data
G01 to 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 (NWAS = 16,154, CAS =4,205)). Not all CAS providers are submitting.
G08	DoS selections – Type 1 or 2 ED	G08 is only completed by NWAS (111)

G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	Only NWAS (3,596) and GMPUA (1,440) have provided data.
G10	DoS selections – SDEC service	G08 is only completed by NWAS (111)
G11	Number of calls where the caller was booked into an SDEC service	Only NWAS and GMPUA have provided data.
G14	Calls where caller given any other appointment	Figures exclude data from some service providers.
H01, H02, H04, H13 to H18	NHS 111 Online Contacts	

Midlands region

111AJ8 Derbyshire (DHU)

Lead data supplier: DHU HealthCare CIC (DHU)

Data item	Description	Comments
B01	Number of calls answered within 60 seconds	Telephony performance impacted by increase in demand and reduced actual staffing. Month on month differences in performance metrics are related to issues of volumes vs forecast and staffing.
B02	Number of calls abandoned	
B06	Total time to call answer	
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures can be explained by the timing of the weekly load. If a case that has yet to be closed as of Sunday 23:59:59 and has subsequent clinical input on the Monday, then this will not be captured within the IUC ADC weekly submission values. However, this would be captured in the monthly submission when data is reloaded.
G11	SDEC service bookings	No activity.
G12, G13	Calls received by dental services	Not applicable to service.
G16 to G19	Community pharmacy service	
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

A03	Number of answered calls	Telephony performance impacted by increase in demand and reduced actual staffing.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
D01	Calls assessed by a clinician or Clinical Advisor	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	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
B01	Number of calls answered within 60 seconds	Telephony performance impacted by increase in demand and reduced actual staffing.
B02	Number of calls abandoned	
B06	Total time to call answer	
D01	Calls assessed by a clinician or Clinical Advisor	
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 to E30	ETC dispositions that receive remote clinical intervention	DHU do not provide an ED validation services for Lincs and do not have access to this data.

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	
H17, H18	Number of NHS 111 Online contacts initially given an ETC disposition	We are unable to submit data for these items as we do not manage the relevant services and do not currently have access to an external data flow.
H19, 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 within a specified timeframe	These are usually zero or very low.

111AC6 Northamptonshire

Lead data supplier: DHU HealthCare CIC (DHU)

Data item	Description	Comments
A03	Number of answered calls	Telephony performance impacted by increase in demand and reduced actual staffing. Month on month differences in performance metrics are related to issues of volumes vs forecast and staffing.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
C01	Number of calls where person triaged	
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	
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 20 minutes	These are usually zero or very low.

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

Data item	Description	Comments
A03	Number of answered calls	Telephony performance impacted by increase in demand and reduced actual staffing.
B01	Number of calls answered within 60 seconds	
D01	Calls assessed by a clinician or Clinical Advisor	
B02	Number of calls abandoned	
B06	Total time to call answer	
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures can be explained by the timing of the weekly load. If a case that has yet to be closed as of Sunday 23:59:59 and has subsequent clinical input on the Monday, then this will not be captured within the IUC ADC weekly submission values. However, this would be captured in the monthly submission when data is reloaded. Performance impacted by volume of calls received which was higher than forecasted volumes.
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 to E30	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 and we do not have access to data..
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 do not provide that service. Services are handled externally and we do not have access to data.

H18	NHS 111 Online contacts initially given an ETC disposition that receive remote clinical intervention	
H19, 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 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
E30	Total wait time to ETC remote clinical intervention (seconds)	October's value for this item was nearly three-times its usual level due to staffing challenges and the ICB assertion that validations were extended when the system was under such immense pressure.
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
B01	Number of calls answered within 60 seconds	Telephony performance impacted by increase in demand and reduced actual staffing. Month on month differences in performance metrics are related to issues of volumes vs forecast and staffing.
D01	Calls assessed by a clinician or Clinical Advisor	Performance affected by volume of calls received which was higher than forecasted volumes.
D23	Callers who needed to speak to a clinician or Clinical Advisor within a timeframe over 20 minutes, who were	Particularly low performance on some days pulls down the monthly average. There is a large variance, for example, KPI 5b is around

	warm transferred or received a call back within the specified timeframe	35% on some days in the month and others are almost as low as 6%.
E27 to E30	Calls initially given an ETC disposition that receive remote clinical intervention	DHU do not provide an ED validation service for West Midlands and do not 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 to G19	Calls where a community pharmacy service was an option	Service is provided externally and we do not have access to data.
H15 to 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
A01	Number of calls received	Following the switch to a regional IVR at the end of September, this contract saw an increase in calls in October which equated to about four extra days of calls in the month.
A03	Number of answered calls	
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	A glitch in the IVR hand over procedure led to calls counting against HUC that were abandoned at the regional level and that we could not attempt to answer. The procedure put in place to mitigate this resulted in abandoned calls for HUC dropping during the month on a daily basis.
G10, G11	SDEC service bookings	SDEC referrals are very low.

111AB2 Hertfordshire
Lead data supplier: HUC

Data item	Description	Comments
A01	Number of calls received	Telephony performance affected by the increase in call volume. The introduction of regional IVR in the later part of September also led to an increase in the calls offered to call centre, some of which previously would have gone to third party or hung up. Disparity with provisional data due to the end of month reconciliations.
A03	Number of answered calls	
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
G10, G11	SDEC service bookings	Continues to be work in progress.

111AG7 Luton & Bedfordshire
Lead data supplier: HUC

Data item	Description	Comments
G10, G11	SDEC service bookings	Occasionally patients are referred to an SDEC but numbers will be small. Functionality is not 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.
B02	Number of calls abandoned	Disparity with provisional data is due to the monthly mop up file capturing slightly higher figures.
B06	Total time to call answer	
B07, B08	Call answer centiles	Due to the way that our calls are currently aggregated, centile figures may be inaccurate.

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	Clinical advisors prioritise calls which they felt are most urgent on the queue.
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	D21 is always going to be less than D20 due to the way our centiles are aggregated.
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.
G07	Number of calls where the caller was booked into a UTC	The call volumes for these two metrics are usually low, which results in large fluctuations for the KPI.
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, 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 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
A03	Number of answered calls	
B01	Number of calls answered within 60 seconds	

B02	Number of calls abandoned	Telephony performance impacted by increase in demand and reduced actual staffing. Month on month differences in performance metrics are related to issues of volumes vs forecast and staffing.
B06	Total time to call answer	
C01	Number of calls where person triaged	
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.
E27	Number of calls initially given an ETC disposition that receive remote clinical intervention	DHU operates a partial ED Validation Service in Milton Keynes, with no access to the remaining data.
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	Telephony performance exacerbated by staff sickness rates.
B06	Total time to call answer	
B07, B08	Call answer centiles	Due to the way that our calls are currently aggregated, centile figures may be inaccurate.
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	D21 is always going to be less than D20 due to the way our centiles are aggregated.
E17	Number of callers recommended self-care at the end of clinical input	This metric is dependent on patient behaviour and clinical decisions.

G07	Number of calls where the caller was booked into a UTC	These are nulls instead of 0, we are currently not able to monitor whether a call back has been offered via an online assessment. If we can book by the DoS we make an appointment and if there is not a booking facility available then we pass the patient information to UTC to allow them to follow their own processes.
G10, G11	SDEC service bookings	SDEC is not used on the DoS much; SDEC booking is done by phone not booking system. Numbers will remain low until SDEC services pick up and are profiled on the DoS.
G12, G13	Calls received by dental services not using DoS	These items are currently not available, due development or not 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	Limited opportunity due to lack of local provision.
G01, G06, G07	Number of calls where the caller was booked into a UTC	Cases with appointments booked into ‘Urgent Treatment Centre (UTC) Co-Located with ED’ (Service Type ID is 150) not included in G06 but included in G01.
G10, G11	SDEC selections	The SDEC care service is not currently active.

111AI3 West Essex
Lead data supplier: HUC

Data item	Description	Comments
B02	Number of calls abandoned	Telephony performance affected by the increase in call volume. The introduction of regional IVR in the later part of September also led to an increase in the calls offered to call centre, some of which previously would have gone to third party or hung up. Disparity with provisional data due to the end of month reconciliations.
B06	Total time to call answer	
G10, G11	SDEC service bookings	Occasionally patients are referred to an SDEC but numbers will be small. Functionality is not 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. SVCC continued to be switched off in October.

Data item	Description	Comments
A01	Number of calls received	National contingency level % reduction from 38% to 30%. Disparity with provisional figures due to a couple of days missed in failed weekly submission; monthly figures are correct.
A02	Calls routed through IVR	Null as we are not using any IVRs.
A03	Number of answered calls	Disparity with provisional figures due to a couple of days missed in failed weekly submission; monthly figures are correct.
A07	Calls which originated from an external NHS 111 provider	Not provided in the current suite of reports we run from Adastra. We have estimated this figure.
B01	Number of calls answered within 60 seconds	Performance affected by unplanned sickness and continuing shortfall in recruitment of Health Advisors. Disparity with provisional figures due to a couple of days missed in failed weekly submission; monthly figures are correct.
B02	Number of calls abandoned	
B06	Total time to call answer	
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. Disparity with provisional figures due to a couple of days missed in failed weekly submission; monthly figures are correct.

D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures due to a couple of days missed in failed weekly submission; monthly figures are correct.
D04	Calls assessed by a mental health nurse	Not applicable.
D07	Calls assessed by a dental nurse	
D10	Number of calls assessed by a clinician or Clinical Advisor that were warm transferred	Figure is lower than expected.
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, 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, H12	NHS 111 Online contacts that resulted in DoS selections for SDEC	SDEC services in area have varied referral methods some offer booked appointments; others require a telephone clinician to clinician booking. These are not considered to have booked appointments on the system.
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, 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
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	We use a local quality metric of 1 hour for cat 3 and 4 validation, including Dx333 Speak to a Clinician from our service immediately - Ambulance Validation.
H20	Number of NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who received a call back within 20 minutes	Most months this item will either be zero or very low.
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.

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

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	We use a local quality metric of 1 hour for cat 3 and 4 validation, including Dx333 Speak to a Clinician from our service immediately - Ambulance Validation.
E19	Calls initially given a category 3 or 4 ambulance disposition	Figures this month are based on improved logic and may previously have been under-reported.
E20	Number of calls initially given a category 3 or 4 ambulance disposition that receive remote clinical intervention	
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
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	We use a local quality metric of 1 hour for cat 3 and 4 validation, including Dx333 Speak to a Clinician from our service immediately - Ambulance Validation.
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
B01	Number of calls answered within 60 seconds	Improvement in telephony performance due to a focus on reducing handling times. Changes in the IVR message now give wait time to callers thus helping in reducing our abandoned calls.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07, B08	95th & 99th centile call answer time (seconds)	Telephony centile figures exclude LAS data as line data is not available.
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	We use a local quality metric of 1 hour for cat 3 and 4 validation, including Dx333 Speak to a Clinician from our service immediately - Ambulance Validation.
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.

G01, G06, G07	Number of calls where the caller was booked into a UTC	Cases with appointments booked into 'Urgent Treatment Centre (UTC) Co-Located with ED' (Service Type ID is 150) not included in G06 but included in G01.
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
A05	External clinician calls to Clinical Assessment Service (CAS)	Blank as uncertainty whether there is a direct line in this way.
A07	Calls which originated from an external NHS 111 provider	Both the two SCAS areas cover both areas so we have to do an even split for other orgs as they are technically out of area and we operate a virtual call centre so there is no way to split it, other than 50/50.
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.
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 to H16	NHS 111 Online contacts that resulted in patient requiring a face to face consultation in an IUC Treatment Centre	
H19 to H22	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. 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	Number of calls answered within 60 seconds	Telephony performance affected by staff sickness.
B02	Number of calls abandoned	
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) in A01 due to co-location of 111/999 services.

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 and very few IUC services elsewhere. All reported bookings 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 for telephony referrals not yet embedded.
G20 to G23	Face to face consultations	This section of reporting is still being developed.
H19 to H22	NHS 111 Online contacts	SSRS reporting not updated to include these new metrics at this time.

111AI9 Kent, Medway & Sussex

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

Data item	Description	Comments
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	Not yet able to report these metrics.
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 resource is balanced, when possible, to provide appropriate response to high-acuity cases, in addition to effective 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.
G01, G06, G07	Number of calls where the caller was booked into a UTC	Cases with appointments booked into 'Urgent Treatment Centre (UTC) Co-Located with ED' (Service Type ID is 150) not included in G06 but included in G01.
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 is not 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.
A07	Calls which originated from an external NHS 111 provider	Both the two SCAS areas cover both areas so we have to do an even split for other orgs as they are technically out of area and we operate a virtual call centre so there is no way to split it, other than 50/50.
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.
D03	Calls assessed by an advanced nurse practitioner	Do not operate this staff type any more.
D14	Number of callers who needed to speak to a clinician or Clinical Advisor within 20 minutes (immediately), who were warm transferred or received a call back within 20 minutes	Figures impacted by the change in given callback time up to an hour suggested for Cat 3 & 4, as calls are being picked up further down the queue rather than < 30 minutes which would previously have been the case.
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	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, G13	Number of calls received by dental services not using DoS that resulted in a booked appointment	Most of the booking done by dental is now done via the DOS.
G14	Number of calls where caller given any other appointment	Disparity with provisional figures is due to not being able to manually update weekly DOS figures with up to date service types – this is only feasible monthly.
G15 to G19	Community pharmacy service	We do not have data for these items as we have not yet had our SSRS feed reinstated after the Adastra outage.
G20, G23	Number of patients requiring a face to face consultation in their home residence	SCAS does not hold this data – as we have experienced problems gathering data from Providers.
H13 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
A01	Number of calls received	Disparity with provisional data is because the weekly submission for week ending 15th Oct was missed. Improved performance in call handling by our 111 partner is due to additional staffing.
A03	Number of answered calls	
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.
B01	Number of calls answered within 60 seconds	Disparity with provisional data is because the weekly submission for week ending 15th Oct was missed. Improved performance in call handling by our 111 partner is due to additional staffing.
B02	Number of calls abandoned	
B06	Total time to call answer	
C01	Number of calls where person triaged	

D01	Calls assessed by a clinician or Clinical Advisor	
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, G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	We have low ED bookings due to restrictions on ED booking in BSW. Only one of our EDs has the function enabled (SFT). Great Western Hospitals NHS Foundation Trust (GWH) makes UTC bookings using EDDI, Royal United Hospitals NHS Foundation Trust (RUH) does not have any bookings enabled for UTC or ED.
G11	Calls where the caller was booked into an SDEC service	BSW IUC do not yet book appointments into the SDEC service.
H01 to H22	NHS Online	Our partner PPG are not currently supporting digital/online sourced contacts.

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

Data item	Description	Comments
A01	Number of calls received	Demand rose by 8% with 823 NHS111 calls per weekday and 1,169 NHS111 calls per weekend.
B01 to B11	Call handling	CAS data not included as unavailable.
F02	Directory of Services: no service available other than ED (ED catch-all)	Zero cases - ED catch-all triggers only 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	The majority of 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.
G10, G11	DoS selections – SDEC service	SDEC dispositions and services are not currently in use.
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
B01	Number of calls answered within 60 seconds	Telephony performance affected by staffing challenges due to higher than expected attrition rates.
B02	Number of calls abandoned	
B06	Total time to call answer	
G07	Number of calls where the caller was booked into 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
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.
G01	Number of calls where the caller was booked into a UTC	Cases with appointments booked into 'Urgent Treatment Centre (UTC) Co-Located with ED' (Service Type ID is 150) not included in G06 but is included in G01.
G05	Number of calls where the caller was booked into an IUC Treatment Centre	111 direct booking pilots began in September and have been expanded in October.
G06, G07	Number of calls where the caller was booked into a UTC	Cases with appointments booked into 'Urgent Treatment Centre (UTC) Co-Located with ED' (Service Type ID is 150) not included in G06 but included in G01. Operational activity is occasionally zero or very low each month.
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
B06	Total time to call answer	The increase in total time to call answer was due to new Health Advisers (HAs) slowing down the time taken to answer as more experienced HAs give side by side support. We would expect to see an improvement once the cohort are more embedded into their role.
C02	Calls where person triaged by a Service Advisor	These items are zero and do not apply to our service.
D04	Calls assessed by a mental health nurse	
D07	Calls assessed by a dental nurse	
G10, G11	Calls where the caller was booked into an SDEC service	These items are usually either very small or zero each month.
G12, G13	Received by dental services not using DoS	These items are zero and do not apply to our service.
H12	NHS 111 Online contacts with SDEC appointment	This is confirmed as a true zero.

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

Data item	Description	Comments
A03	Number of answered calls	Improved performance throughout October is a result of multiple projects to improve service delivery over the last few months.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
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.
G01	Number of calls where the caller was booked into a UTC	Cases with appointments booked into 'Urgent Treatment Centre (UTC) Co-Located with ED' (Service Type ID is 150) not included in G06 but included in G01.
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.
G06, G07	Number of calls where the caller was booked into a UTC	Cases with appointments booked into 'Urgent Treatment Centre (UTC) Co-Located with ED' (Service Type ID is 150) not included in G06 but included in G01.

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 October there were no slots available for 111 to book directly into in 75% of total appropriate cases. Of the slots made available to 111 (90 slots), 7.7% (7 slots) of those slots were not booked by our staff, meaning 92.3% of the slots available to us were utilised and booked.
G11, G10	SDEC selections	The SDEC care service is not currently active.

111AL5 Somerset (HUC)
Lead data supplier: HUC

Data Items	Description	Comments
A01	Number of calls received	Challenges with staff scheduling and recruitment continued to affect Somerset's performance.
A03, B01	Number of answered calls	
B02	Number of calls abandoned	
B06	Total time to call answer	
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
D01 to D25	Calls with Clinical Input	The national resilience service supports multiple other providers, this was a challenged month due to operational pressures hence the drop in KPI attainment for this period.
E17	Number of callers recommended self-care at the end of 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
A01	Number of calls received	Demand for the NSA service is in line with organisational projections for the new service, meaning there is good capacity for dedicated NSA agents to respond well to demand. The line is switched on where there is adequate Call Handlers to cope with demand. Repeat Prescription lines stay on between 0800 and 0000 – Switch off requires Exec approval. Dental is additional and managed live. Operational between 0800 and 2200 but can be turned off if volume cannot be supported safely. This means volume and performance can vary based on the number of scheduled Service Advisors and demand into the service.
A03	Number of answered calls	
A05	External clinician calls to Clinical Assessment Service (CAS)	This item currently not available, due development or not applicable.
B02	Number of calls abandoned	Disparity with provisional figures due to the monthly warehouse run which acts as a mop up for any exceptions or changes to the data.
B06	Total time to call answer	
B07, B08	95th & 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 to E25	Calls initially given a category 3 or 4 ambulance disposition	Null as these are not achievable NSA outcomes.
E26 to 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 to G14	Dental service	
G20 to G23	Patients requiring a face to face consultation	
H01 to 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.