

IUC ADC November 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 SystemOne.
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.
H01 to H22	NHS 111 Online contacts where person was offered and accepted a call back and needed to speak to a clinician or Clinical Advisor within a specified timeframe	Unable to provide figures from subcontractor this month so these items will remain empty

111A17 Yorkshire and Humber (NECS)

Lead data supplier: NHS North Of England Commissioning Support Unit (NECS)

This month's submission includes data from the following CAS providers: 8GY92 (L807C) -LCD, NNF - City Healthcare Partnership CIC, Y01173-Sheffield GP Collaborative, RCD- Harrogate & District, i-Heart, NL3-CARE PLUS, RFR - Rotherham NHSFT, NXL01 – FCMS, RJL- Northern Lincolnshire and Goole NHS Foundation Trust, NNJ-DHU Bassetlaw OOH & NLO - Vocare.

Data item	Description	Comments
B02	Number of calls abandoned	Improved performance is a result of lower overall demand, increased workforce following recruitment, and fewer abstractions for training and sickness.
B06	Total time to call answer	

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. 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 is because the weekly returns included a few days with incomplete data.
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).
E17	Number of callers recommended self-care at the end of clinical input	111 Dental do not complete E17.
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; NWS 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 NWS data only in April 2021 to MLCSU submitting data covering all service providers. This month's 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 NWS.

Data item	Description	Comments
C01	Number of calls where person triaged	Number of calls where person triaged is provided by NWS only
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	Total number of dispositions (E01) includes figures provided by NWS (119,257) and some CAS providers (6,075) which may include double counting. Not all CAS providers have provided data.
E19, E20	Number of calls initially given a category 3 or 4 ambulance disposition	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)	Only two providers regularly submit data for E25, one of these was blank this month.
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 and Central Cheshire) have supplied numbers in G03, G05, G07, G09, G11, G13 and G14, these have been added in to G01 (which previously reported only 111 activity (NWS = 16,154, CAS =4,747)) - Central Cheshire 678, GMPUCA (CAS) 3,469 and GMPUCA (TAS) 600. All other CAS providers leave these fields empty.
G08	DoS selections – Type 1 or 2 ED	G08 is only completed by NWS (111).

G09	Number of calls where caller given a booked time slot with a Type 1 or 2 ED	Only NWS (3,556) and GMPUA (1,671) provide data for G09. Similarly for G10 and G11.
G10	DoS selections – SDEC service	
G11	Calls where the caller was booked into an SDEC service	
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
A03	Number of answered calls	Improvements in performance this month are a result of staff availability exceeding the expected call volumes. Staff training has given advisors the skills to deal with calls more quickly than before.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time (seconds)	Current telephony system doesn't allow accurate recording of this metric so a proxy is provided instead.
B08	99th centile call answer time (seconds)	
C01	Number of calls where person triaged	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.
D01	Calls assessed by a clinician or Clinical Advisor	
D20, D21, D24, D25	Average and 95 th centile times to clinical assessment	These data items were over-reported in previous months due to an issue in the calculation which meant the monthly average was multiplied by the number of days in the month.
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.
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111AK7 Leicestershire and Rutland (DHU)

Lead data supplier: DHU HealthCare CIC (DHU)

Data item	Description	Comments
A03	Number of answered calls	Improvements in performance this month are a result of staff availability exceeding the expected call volumes. Staff training has given advisors the skills to deal with calls more quickly than before.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time (seconds)	Current telephony system doesn't allow accurate recording of this metric so a proxy is provided instead.
B08	99th centile call answer time (seconds)	
C01	Number of calls where person triaged	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.
D01	Calls assessed by a clinician or Clinical Advisor	
D20, D21, D24, D25	Average and 95 th centile times to clinical assessment	These data items were over-reported in previous months due to an issue in the calculation which meant the monthly average was multiplied by the number of days in the month.
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)

DHU does not run the CAS for Lincolnshire so there may be incomplete coverage for the following data items: A05, B11, C02-C06, D02-D09, D13-D14, D20-D25, E04-E18, E27-E31, G20-23, H01-H22.

Data item	Description	Comments
A03	Number of answered calls	Improvements in performance this month are a result of staff availability exceeding the expected call volumes. Staff training has given advisors the skills to deal with calls more quickly than before.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time (seconds)	
B08	99th centile call answer time (seconds)	
D01	Calls assessed by a clinician or Clinical Advisor	Demand was higher than forecasted on different days/time periods, which impacted on overall performance.
D20, D21, D24, D25	Average and 95 th centile times to clinical assessment	These data items were over-reported in previous months due to an issue in the calculation which meant the monthly average was multiplied by the number of days in the month.
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 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
B01	Calls answered within 60 seconds	Improvements in performance this month are a result of staff availability exceeding the expected call volumes. Staff training has given advisors the skills to deal with calls more quickly than before.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time (seconds)	
B08	99th centile call answer time (seconds)	
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.
D20, D21, D24, D25	Average and 95 th centile times to clinical assessment	These data items were over-reported in previous months due to an issue in the calculation which meant the monthly average was multiplied by the number of days in the month.
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)

DHU does not run the CAS for Nottinghamshire so there may be incomplete coverage for the following data items: A05, B11, C02-C06, D02-D09, D13-D14, D20-D25, E02-E18, E27-E31, G20-23, H01-H22.

Data item	Description	Comments
B01	Number of calls answered within 60 seconds	Improvements in performance this month are a result of staff availability exceeding the expected call volumes. Staff training has given advisors the skills to deal with calls more quickly than before.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time (seconds)	
B08	99th centile call answer time (seconds)	

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.
D20, D21	Average and 95 th centile times to clinical assessment for callers requiring assessment within 20 minutes (immediately)	These data items were over-reported in previous months due to an issue in the calculation which meant the monthly average was multiplied by the number of days in the month.
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.
D24, D25	Average and 95 th centile times to clinical assessment for callers requiring assessment within a timeframe over 20 minutes	These data items were over-reported in previous months due to an issue in the calculation which meant the monthly average was multiplied by the number of days in the month.
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.
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111AF4 Staffordshire

Lead data supplier: Vocare

Extended access bookings are not recorded in the data for all areas in Staffordshire due to manual work arounds. The CCG are leading on programme of works to move access of these services to DOS/ITK.

Data item	Description	Comments
G06, G07	DoS selections for UTC DoS selections for UTC	Staffordshire ICS still does not have any UTCs operationalised. Any low numbers that appear in submissions may be due to patients on the service's border.
G10, G11	SDEC referrals and bookings	No cases arose to report.

111AL4 West Midlands ICB (DHU)

Lead data supplier: NHS Black Country and West Birmingham CCG (West Birmingham CCG)

DHU does not run the CAS for West Midlands so there may be incomplete coverage for the following data items: A05, B11, C02-C06, D02-D09, D13-D14, D20-D25, E02-E18, E27-E31, G20-23, H01-H22.

Data item	Description	Comments
B01	Number of calls answered within 60 seconds	Improvements in performance this month are a result of staff availability exceeding the expected call volumes. Staff training has given advisors the skills to deal with calls more quickly than before.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time (seconds)	
B08	99th centile call answer time (seconds)	
D01	Calls assessed by a clinician or Clinical Advisor	Performance affected by volume of calls received.
D20, D21	Average and 95 th centile times to clinical assessment for callers requiring assessment within 20 minutes (immediately)	These data items were over-reported in previous months due to an issue in the calculation which meant the monthly average was multiplied by the number of days in the month.

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.
D24, D25	Average and 95 th centile times to clinical assessment for callers requiring assessment within a timeframe over 20 minutes	These data items were over-reported in previous months due to an issue in the calculation which meant the monthly average was multiplied by the number of days in the month.
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	Rise in call volumes appears to be linked to seasonal illness like colds and flu, as well as some cases of COVID.
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	November saw a significant increase in calls offered and a particular increase at peak times which has led to greater numbers of calls queueing, leading to longer wait times and higher abandonment rates. There was a particular increase in callers with respiratory symptoms.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
G10, G11	SDEC service bookings	Continues to be work in progress.

111AG7 Luton & Bedfordshire

Lead data supplier: HUC

Data item	Description	Comments
A01	Number of calls received	The increased calls offered to centre impacted answering times, with a significant increase during the hours of 8am to 10am. This led to a greater number of queueing calls, higher times to answer and abandonment rates. An uptick in callers with respiratory symptoms may have driven some of the increase in calls.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
G10, G11	SDEC service bookings	Occasionally patients are referred to an SDEC but numbers will be small. Functionality 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.
B07, B08	Call answer centiles	Due to the way that our calls are currently aggregated, centile figures may be inaccurate.
C01	Number of calls where person triaged	An increase in staff hours was one of the main factors to improved performance this month despite the increase in demand.
D01	Calls assessed by a clinician or Clinical Advisor	

D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	D21 is lower than D20 due to the way we aggregate centiles.
E17	Number of callers recommended self-care at the end of clinical input	It is likely that we are under-reporting self-care advice when clinicians have advised home management in the consult notes but have not correctly changed the call to a self-care disposition.
G03	Number of calls where the caller was booked into a GP Practice or GP access hub	Although this has stabilised over recent months, there are not enough bookable appointments across GP and GP hub for patients with the relevant disposition code.
G10, G11	SDEC service bookings	The booking system is not utilised as often as DoS option is being presented. There is ongoing discussion around hydrating the SG/SD codes to present more often at clinical CAS endpoints via PaCCs to enable the clinicians to select the EDDI DAB slots.
G12, G13	Calls received by dental services not using DoS	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)

DHU does not run the CAS for Milton Keynes so there may be incomplete coverage for the following data items: E27-E31, G21, G23, H13-H18.

Data item	Description	Comments
A03	Number of answered calls	Improvements in performance this month are a result of staff availability exceeding the expected call volumes. Staff training has given advisors the skills to deal with calls more quickly than before.
B01	Number of calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
B07	95th centile call answer time (seconds)	Current telephony system doesn't allow accurate recording of this metric so a proxy is provided instead.
B08	99th centile call answer time (seconds)	
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.
D20, D21, D24, D25	Average and 95 th centile times to clinical assessment	These data items were over-reported in previous months due to an issue in the calculation which meant the monthly average was multiplied by the number of days in the month.
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	Disparity with provisional data is due to an issue in the weekly submission relating to Sunday 5/11/23.
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 lower than D20 due to the way we aggregate centiles.
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	Usually a value of zero or very small numbers each month.

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
B01	Calls answered within 60 seconds	Performance impacted by change in IVR messaging at regional level: IVRs have been shortened and now give updated expected waiting times to all callers. In addition, staffing levels were increased ahead of expected winter pressures.
B02	Number of calls abandoned	
B06	Total time to call answer	
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	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, 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 G07 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
A01	Number of calls received	Rise in call volumes appears to be linked to seasonal illness like colds, flu and possibly COVID.

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.
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London region

111AD5 North Central London

Lead data supplier: London Central and West Unscheduled Care Collaborative (LCW)

Contract changes for NCL from November 2023 has resulted in combined ADC data across two providers using our own SQL procedures.

While reports continue to be validated, previous issues with the Adastra SSRS reporting are now resolved.

SVCC continued to be switched off in November.

Data item	Description	Comments
A01	Number of calls received	National contingency level % reduction from 38% to 30%. Disparity with provisional data is because the monthly figures include the full IUC data and the weekly submission was missed for W/E 05.11.2023.
A02	Calls routed through IVR	Null as we are not using any IVRs.
B01	Number of calls answered within 60 seconds	Performance affected by increased demand and higher absence levels. Disparity with provisional data is because the monthly figures include the full IUC data and the weekly submission was missed for W/E 05.11.2023.
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	These items' totals are not summing correctly to their constituent parts due to some variance in reporting as a result of combined data originating from LCW and LAS following contractual changes.
B09	Total time of abandoned calls (seconds)	
C01	Number of calls where person triaged	
D01	Calls assessed by a clinician or Clinical Advisor	Not applicable.
D04	Calls assessed by a mental health nurse	
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.
E01	Total number of dispositions	Total not summing correctly to its constituent parts due to some variance in reporting as a result of combined data originating from LCW and LAS following contractual changes.

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	Number of calls initially given a category 3 or 4 ambulance disposition that receive remote clinical intervention	Total not summing correctly to its constituent parts due to some variance in reporting as a result of combined data originating from LCW and LAS following contractual changes.
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.
G01	Number of calls where caller given an appointment	Total not summing correctly to its constituent parts due to some variance in reporting as a result of combined data originating from LCW and LAS following contractual changes.
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.

111AH5 North East London

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

Data item	Description	Comments
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B06	Total time to call answer	The uplift in demand in November was due to seasonal pressures.
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.
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.

111AJ1 North West London

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

Data item	Description	Comments
B02	Number of calls abandoned	The uplift in demand in November was due to seasonal pressures. Disparity with provisional data is because we changed how we calculate abandoned calls part way through the month of November.
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.
G05, G04	Calls where the caller was booked into an IUC Treatment Centre	There are appointment bookings in to IUC treatment centres but there are no appointment bookings into home residence (home visit).
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	Recent improvements in performance are a result of a focus on reducing handling times with an improved demographics process, as well as ongoing work on feeding back to ICBs/DoS where manual referrals are required on the DoS, and improvements in CA rota hours. Our IVR message now gives wait time to callers thus helping to reduce abandoned calls.
B02	Number of calls abandoned	
B06	Total time to call answer	
B07, B08	95th & 99 th 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 between weekly and monthly numbers are due to LAS data excluded from centile metrics as aggregated data is received by PPG.
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, 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 G07 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.
B02	Number of calls abandoned	Performance, in spite of demand change, was balanced by an increase in volumes of call handler logged in time from 13/11/23 to the end of the month.
B06	Total time to call answer	
B07, B08	95 th /99 th 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	The disparity between weekly and monthly values is down to extra steps around bringing in the dental data which we can't do for the weekly, leading to the difference between weekly and monthly submissions.
D13, 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	Step change in November is because figures include dispositions added to the Dx code mapping file since October 2022 (ie Dx 3316 to Dx 3320).
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 Adastral 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	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 Adastral 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
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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.
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.
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.

111A19 Kent, Medway & Sussex

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

Data item	Description	Comments
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional figures is a result of some late-closed clinical cases not being counted on daily values.
D21	95th centile time to clinical assessment for callers requiring assessment within 20 minutes (immediately)	Not yet able to report these metrics.
D25	95th centile 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	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.

111A12 Surrey Heartlands

Lead data supplier: Practice Plus Group (PPG)

Data item	Description	Comments
B01	Calls answered within 60 seconds	

B02	Number of calls abandoned	Performance impacted by change in IVR messaging at regional level: IVRs have been shortened and now give updated expected waiting times to all callers. In addition, staffing levels were increased ahead of expected winter pressures.
B06	Total time to call answer	
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	Number of calls where caller given an appointment	Cases with appointments booked into 'Urgent Treatment Centre (UTC) Co-Located with ED' (Service Type ID is 150) not included in G07 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.
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 G07 but included in G01.
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	95 th /99 th centile call answer time (seconds)	

B09	Total time of abandoned calls (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.
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.
D13, 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	Step change in November is because figures include dispositions added to the Dx code mapping file since October 2022 (ie Dx 3316 to Dx 3320).
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	
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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.
B01	Number of calls answered within 60 seconds	The call answering improvements align with our call-answering partner increasing their call handling staff assigned to the service.
B02	Number of calls abandoned	On advice from our 111 partner, the logic used to calculate this data item was changed part-way through November to correctly include only calls 'abandoned following queued to skill set'. Besides resulting in changes to the abandonment rate, the timing of the change meant there is disparity with provisional data.
B06	Total time to call answer	The call answering improvements align with our call-answering partner increasing their call handling staff assigned to the service.
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.
G10, 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
B01 to B11	Call handling	CAS data not included as unavailable.

B02	Number of calls abandoned	A change in PPG's process resulted in artificially inflated abandon rates in the October ADC and provisional weekly submissions from mid-October to end November. This has now been rectified.
B06	Total time to call answer	Increase in average speed to answer is due to longer call answering times at the weekend.
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	Performance impacted by staffing challenges.
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
A01	Number of calls received	Improvements to performance are due to: <ul style="list-style-type: none"> - Interactive Voice Response (IVR) changes fully implemented which better reflect wait times - Changes in the way a call is opened and progressed - Patient safety texts, replacing calls for some specific case groups, to improve the number of HA hours on the phones.
B02	Number of calls abandoned	
B06	Total time to call answer	
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, 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 G07 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.

111A14 Dorset

Lead data supplier: Dorset Health Care (DHC)

Data item	Description	Comments
B01	Calls answered within 60 seconds	The increase in performance is due to recruitment and reduced attrition.
B06	Total time to call answer	
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	
D01	Calls assessed by a clinician or Clinical Advisor	Disparity with provisional data is because the weekly figures are often estimated due the lack of data available when submissions are due.
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.
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111AH2 Gloucestershire

Lead data supplier: Practise Plus Group (PPG)

Data item	Description	Comments
A03	Number of answered calls	Performance impacted by change in IVR messaging at regional level: IVRs have been shortened and now give updated expected waiting times to all callers. In addition, staffing levels were increased ahead of expected winter pressures.
B01	Calls answered within 60 seconds	
B02	Number of calls abandoned	
B06	Total time to call answer	
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 given an appointment	Cases with appointments booked into 'Urgent Treatment Centre (UTC) Co-Located with ED' (Service Type ID is 150) not included in G07 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.
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 G07 but included in G01.
G09	Calls where caller given a booked time slot with an ED	Patients are booked time slots into ED if appointment slots are made available to book. During November there were no slots available for 111 to book directly into in 80% of total appropriate cases. Of the slots made available to 111 (79 slots), 3.8% (3 slots) of those slots were not booked by our staff, meaning 96.2% 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
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A01	Number of calls received	Disparity with provisional data due to some errors in the collation of the weekly numbers.
B02	Number of calls abandoned	The service has been very challenged in this reporting period, largely due to front-end staffing numbers.
B06	Total time to call answer	
C01	Number of calls where person triaged	Disparity with provisional data due to some errors in the collation of the weekly numbers.
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

No comments received this month.

111SA1 Service Advisor Modules (IC24)

Lead data supplier: Integrated Care 24 Ltd (IC24)

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

Data item	Description	Comments
A05	External clinician calls to Clinical Assessment Service (CAS)	This item currently not available, due development or not applicable.
B07, B08	95 th & 99 th 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	95 th 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.
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	It is very rare that NSA calls will be passed to SDEC – the service primarily deals with much lower acuity calls.
G12 to G14	Dental service	Null as these are not achievable NSA outcomes.
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.