



Briefing Paper for the Nottinghamshire Scrutiny Committee

The objective of this paper is to respond to The Chairman and Committee for the Nottingham Health Scrutiny Committee's request for DHU NHS 111 services to provide a briefing around a series of performance area.

The Chairman and Committee wished to explore the Service's performance against more general performance indicators, the relevant themes for the DHU111 service are: -

- *mean call response times against targets*
- *abandonment rates*
- *service capacity (staffing and experience/skill sets)*
- *geographic variations in performance (how Nottinghamshire does in comparison with other counties/areas)*
- *Impact of winter pressures on the service etc.*

Background Information

DHU 111 are at the heart of national NHS 111 services responding to over 2.5 million calls a year from centres in Derby, Chesterfield, Leicester and Oldbury. DHU111 is the nation's largest NHS111 service provider. Besides the Midlands, we have also been supporting London Ambulance Service with their 111 calls since 2021.

Mean Call response times and abandonment figures

Our teams consistently achieve a high percentage of the service level agreement of answering a call to the service within 60 seconds.

The following table highlights Nottinghamshire's position in comparison to other regions in terms of NHS111 performance, currently 5th highest in the country.

The table highlights that nationally, DHU were the second best performing NHS111 service provider in the country (2nd only to Dorset who take a very small number of calls as compared to DHU). For Nottinghamshire, the average speed to answer a call was just 30 seconds compared to the national average of 126 seconds with some 111 service providers taking just shy of 5 minutes to answer a call.

The table also shows the abandonment figures for Nottinghamshire of 2.5%. National figures are at 7.2% with many providers having rates of more than 13%.

NHS 111 Provider Performance Comparison - November 2023

Area	Provider	Calls Offered	Calls in 60 secs %	ASA (secs)	Abdn %	Rank
Dorset	DHC	27,477	92.6%	16	1.6%	1
West Midlands	DHU	138,972	87.0%	25	2.5%	2
Lincolnshire	DHU	19,486	86.0%	29	3.0%	3
Northamptonshire	DHU	21,808	85.7%	29	2.5%	4
Nottinghamshire	DHU	31,262	85.4%	30	2.7%	5
Derbyshire	DHU	38,396	85.2%	30	2.8%	6
Leicestershire and Rutland	DHU	34,728	84.9%	30	2.5%	7
Milton Keynes	DHU	7,770	84.3%	31	2.8%	8
Norfolk	IC24	28,026	81.8%	62	3.4%	9
Mid and South Essex	IC24	35,371	81.5%	64	3.3%	10
Service Advisor Modules	IC24	53,031	79.1%	58	2.6%	11
South East London	LAS/DHU/HUC	49,694	77.3%	49	5.8%	12
Isle of Wight	IoW	7,138	77.3%	68	12.4%	13
North East London	LAS/DHU/HUC	65,552	77.3%	50	5.3%	14
North West London	LAS/PPG/LCW	51,164	73.1%	74	5.3%	15
National Resilience	Vocare	73,072	70.5%	70	7.2%	16
Hampshire and Surrey Heath	SCAS	59,852	70.3%	89	4.2%	17
North Central London	LAS/LCW	26,211	69.5%	151	9.9%	18
Staffordshire	Vocare	32,553	69.5%	73	6.3%	19
North East	NEAS	87,153	68.5%	95	7.5%	20
Thames Valley	SCAS	69,316	68.1%	98	4.4%	21
Yorkshire and Humber	YAS	157,616	66.7%	216	10.7%	22
South West London	PPG/LAS	37,092	63.5%	194	4.4%	23
BaNES, Swindon & Wiltshire	PPG	31,802	62.9%	157	9.5%	24
Cornwall	HUC	18,429	62.9%	144	11.8%	25
Somerset	HUC	18,774	62.8%	154	10.7%	26
Gloucestershire	PPG	16,608	60.4%	190	6.9%	27
Devon	PPG	26,116	58.2%	196	6.6%	28
Bristol, North Somerset & South Gloucestershire	PPG	29,413	57.4%	131	11.9%	29
Surrey Heartlands	PPG	25,197	56.4%	199	6.1%	30
North East Essex & Suffolk	PPG	28,319	55.8%	209	6.7%	31
Hertfordshire	HUC	37,481	51.8%	189	13.1%	32
Cambridgeshire and Peterborough	HUC	33,107	50.9%	193	14.0%	33
Luton and Bedfordshire	HUC	26,572	50.2%	195	13.4%	34
North West	NWAS	182,174	49.9%	278	9.5%	35
West Essex	HUC	9,368	49.6%	197	13.3%	36
Kent, Medway & Sussex	SECAmb	91,493	41.4%	288	14.2%	37
England	National	1,727,593	68.9%	126	7.2%	

Service Capacity (Staffing and Skill mix set):-

To support the delivery of the service across such a large geographical area DHU111 employs Service Advisors & Health Advisors (both are non-clinical) and Clinicians (Dental Nurses, Mental Health Nurses, Pharmacists and Paramedics with urgent and emergency care experience).

The Clinical Teams are further supported by specialist roles such as Triage Practitioners with expertise in remote Clinical Triage, Clinical Practitioners, and Advanced Clinical Practitioners.

All our Clinical Pathways and processes are overseen by our Clinical Director (Dr Tarun Sharma).

In addition to the above, we also have a Training team, Continuous Quality Improvement Team, Workforce Management and Human Resources & Recruitment Team.

The breakdown of our staffing numbers is as below:-

Role Type	111 EM	111 WM	Grand Total	% of Total
Clinical	247	192	439	25.60%
Non-Clinical	680	545	1225	71.27%
SMT	9	2	11	0.63%
Support	32	11	43	2.50%
Grand Total	968	750	1718	
% Split	56%	44%		

Winter pressures

Planning for the forecasted increase in demand on the service began at the end of summer 2023, with a targeted campaign of recruitment and a structured programme of training for Health Advisors and Clinicians to ensure that our staffing levels could meet the demand winter invariably presents us with. The Workforce Management Teams work to forecast the expected calls and activity and aim to schedule adequate workforce to meet this demand. We work collaboratively with emergency and IUC partners across all our regions to support and aid mutual efficiencies where this will enhance the patient journey.

Other measures we have in place to ensure that we have a strong workforce in place when we need it the most is to ensure that we have a plethora of health and well-being activities to support staff during the winter, including an array of activities within the workplace during the festive season. We calculate Annual Leave entitlement fairly across the year so that staff are rested well and also have opportunities to spend time with their families at important times.

So far this winter we have been able to meet the demands on the service with meticulous planning, factoring in our inevitable sickness increase over the winter period. Over the recent bank holiday period (Christmas and New Year) we were able, on key dates, to meet the Service Level Agreement of calls answered within 60 seconds 99% of the time.

Overall, between 19th December and 1st January, the national average was around 66.5% Service Level while DHU provided an 85% Service Level.

Key dates:

Date	Calls Offered	SL%	Abdn %	ASA (secs)	National SL%
25 th December	9521	97.3%	0.4%	7	85.3%
26 th December	15427	99.8%	0.2%	3	69.7%
1 st January	14368	99.2%	0.4%	4	72.4%

We have an overall Care Quality Commission (CQC) rating of 'OUTSTANDING' (having been the first in the country to be awarded this rating), reporting that '*staff treated people with compassion, kindness, dignity and respect*'. In August 2021, after a data examination, the CQC determined that an inspection or rating review was not required at this stage.

We are proud to support Integrated Urgent Care Service across the Midlands and pride ourselves on having the knowledge and understanding of our local regions that enable

effective collaboration, always with the patient and their care journey at the heart of what we do.