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NHS 24 BOARD	19 AUGUST 2021				
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CORRORATE	FOR ASSURANCE				
	PERFORMANCE REPORT – JULY 2021				
Executive Sponsor:	Director of Strategy, Planning and Performance				
Lead Officer/Author:	Senior Performance Analyst / Performance Team				
Action Required	This paper is presented to the Board to provide				
	assurance on the quality and performance of services				
Kara Dalata	provided for period ended 31 July 2021.				
Key Points	The new proposed Performance Framework, which better reflects our key performance metrics across our suite of services has recently had sign off from Health & Social Care board within Scottish Government. The final sign off from Cabinet Secretary is expected in the coming weeks. It is intended that the new framework will be reported against in the next reporting period.				
	The key points in relation to July 2021 performance:				
	Call demand for July was the second highest on record, with only March 2020 (peak pandemic) being higher				
	COVID activity remained high in July with records for COVID calls remaining 18% over 2021 average in July				
	 Right Care Right Place media campaign continued through July, with TV adverts being aired from week commencing 12th July 				
	 Digital COVID content remained high in July, by increasing 27% on June to reach 1.6 million unique page views 				
Financial Implications	All financial and workforce implications arising from				
	current and projected performance levels are				
	reflected in the routine functional reports.				
Timing	This is a monthly report covering July 2021.				
Contribution to NHS 24	Key performance measures are developed to support				
strategy	delivery of NHS 24 strategy and the Scottish				
	Government key performance indicators. Effective				
	monitoring of performance ensures robust governance and decision-making in line with				
	corporate objectives.				
Contribution to the 2020	Effective performance across NHS 24 supports				
Vision and National	delivery across the wider health and social care				
Health and Social Care	system.				
Delivery Plan (Dec 2016)	7,5.5				
Equality and Diversity	All equality and diversity issues arising from				
, ,	maintaining and continuously improving performance				
	management are integrated with service planning.				
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Board Corporate Performance Report

Performance relating to July 2021 (including PIP performance)

Connecting – Caring - Collaborating

1. Summary of July 2021 performance

Key Points



- Call demand of **180,263** which was 7% higher than previous month and the highest in 2021.
- Continuing pressure across the system has resulted in reduced access performance. Please note that although all access targets were missed in July, performance has been improving week on week throughout the month and has continued into early August (please refer to slide 19 PIP performance)
- COVID demand remained high in July (reflecting sustained increase in positive case count) 21,476 patients selected COVID option, which is 18% higher than 2021 monthly average. COVID flagged records accounted for 19% of overall records.
- The RUC Right Care Right Place media campaign kicked off in late June, with radio adverts being aired on week commencing 22nd June, and TV adverts commencing on 12th July. **29% of patients selected A&E IVR option**, which is close to current 2021 average (28%)
- It is worth noting that A&E outcome % split has dropped for the 3rd consecutive month to **7.8**%, which is the **lowest level since January 2021**. Flow Navigation Centre pathway has maintained its recent levels at 9.7%

Commentary from Director of Service Delivery

The last few weeks has clearly illustrated the unpredictive nature of the COVID activity with high levels at the start of July and then a steady decrease in activity towards the end of the month. We are currently recruiting additional temporary Call operators in preparation for an anticipated surge when schools go back and as we head towards the Autumn and Winter period.

Although there hasn't been a huge increase in A&E calls following the advertising campaigns, there has been a strong focus on the A&E activity with calls going directly to staff in Lumina. This has allowed the clinical supervisors under guidance from Ron Cook, Associate Medical Director, to focus on the clinical profile of calls and come up with a more appropriate outcome for patients and partner Health Boards. We have seen an increase in referrals to the Flow Navigation Centres with consequently fewer direct referrals. This approach will continue in Lumina throughout August.

The high levels of demand have coincided with continuing challenges around availability of staff. In addition to the normal high levels of seasonal annual leave, the high volume of COVID related absence (staff isolating) has added to operational pressures, particularly at peak weekend periods. The COVID absence reduced during the first few days of August which contributed to a much improved access performance at the start of the month.

2.1 Summary of Key SG Performance Measures



Measure	Key Performance Indicator - Target	Target	RAG Thresholds	Jul-21	Jul-20	Jun-21
111 Service						
Patient experience - satisfaction, helpfulness, usefulness	90% of service users surveyed record overall satisfaction with the service	90%	Amber 80-90% Red <80%	87.5%	92.7%	0 returns
Level of complaints (could be applied to all services)	90% of complaints are responded to within 20 working days	90%	Amber 80-90% Red <80%	100.0%	100.0%	100.0%
Care delivered at first point of contact	75% of calls will result in direct access to the service at first point of contact	75%	Amber 65-75% Red <65%	95.3%	89.1%	94.9%
Calls abandoned after 30 seconds	Expressed as percentage of calls abandoned after threshold. Maintain the current measure of <5% after 30 seconds for 111 service.	5%	Amber 5-8% Red >8%	25.7%	8.0%	22.8%
Access Service Level within 30 seconds	Target to deliver 50% of calls answered within 30 seconds for 111 service	50%	Amber 45-50% Red <45%		49.3%	14.9%
Average Time to Answer	Target to answer 111 calls within an average of 3 minutes		Amber 2m 30s - 3m Red > 3 min	20m 39s	5m 4s	17m 23s
Median Time to Answer (Time at 50% of calls have been answered)	New measure			18m 33s	12s	13m 52s
Queued Calls - P1 calls responded to within 60 minutes	98% of P1 calls responded to in 60 minutes	98%	Amber 95-98% Red <95%	100.0%	100.0%	100.0%
Queued Calls - P2 calls responded to within 120 minutes	90% of P2 calls responded to in 120 minutes		Amber 85-90% Red <85%	100.0%	100.0%	100.0%
Queued Calls - P3 calls responded to within 180 minutes	80% of P3 calls responded to in 180 minutes		Amber 75-80% Red <75%	99.7%	94.2%	100.0%
Workforce						
Staff attendance rates	Achieve and maintain an average attendance rate of 96%		Amber 90-96% Red < 90%	91.8%	92.9%	91.6%
Digital/Public Health						
Provision of self-care advice	Provide at least 30% of patients with self care advice		25% [] 30%	26.3%	30.9%	26.4%
Mental Health Services						
Breathing Space	80% of Breathing Space Calls to be answered in 30 seconds	80%	Amber 70-80% Red <70%	40.3%	39.5%	43.0%

2.2 Quarterly Summary of Key SG Performance Measures



Measure	Key Performance Indicator - Target		RAG Thresholds	Q1 2021/22	Q1 2020/21	Q4 2020/21
111 Service						
Patient experience - satisfaction, helpfulness, usefulness	90% of service users surveyed record overall satisfaction with the service	90%	Amber 80-90% Red <80%	0 returns	93.6%	90.9%
Level of complaints (could be applied to all services)	90% of complaints are responded to within 20 working days	90%	Amber 80-90% Red <80%	100.0%	100.0%	100.0%
Care delivered at first point of contact	75% of calls will result in direct access to the service at first point of contact	75%	Amber 65-75% Red <65%	94.0%	84.5%	95.5%
Calls abandoned after 30 seconds	Expressed as percentage of calls abandoned after threshold. Maintain the current measure of <5% after 30 seconds for 111 service.	5%	Amber 5-8% Red >8%	17.7%	8.7%	19.0%
Access Service Level within 30 seconds	Target to deliver 50% of calls answered within 30 seconds for 111 service	50%	Amber 45-50% Red <45%	22.8%	52.3%	27.7%
Average Time to Answer	Target to answer 111 calls within an average of 3 minutes	3m	Amber 2m 30s - 3m Red > 3 min	12m 58s		15m 23s
Median Time to Answer (Time at 50% of calls have been answered)	New measure			9m 14s	9s	7m 24s
Queued Calls - P1 calls responded to within 60 minutes	98% of P1 calls responded to in 60 minutes	98%	Amber 95-98% Red <95%	100.0%	99.8%	100.0%
Queued Calls - P2 calls responded to within 120 minutes	90% of P2 calls responded to in 120 minutes		Amber 85-90% Red <85%	100.0%	99.9%	100.0%
Queued Calls - P3 calls responded to within 180 minutes	80% of P3 calls responded to in 180 minutes		Amber 75-80% Red <75%	99.0%	93.1%	98.7%
Workforce						
Staff attendance rates	Achieve and maintain an average attendance rate of 96%	96%	Amber 90-96% Red < 90%	91.8%	93.9%	92.3%
Digital/Public Health						
Provision of self-care advice	Provide at least 30% of patients with self care advice		25% [] 30%	26.8%	32.0%	27.4%
Mental Health Services						
Breathing Space	80% of Breathing Space Calls to be answered in 30 seconds	80%	Amber 70-80% Red <70%	47.1%	47.5%	49.4%

3 Person Centred

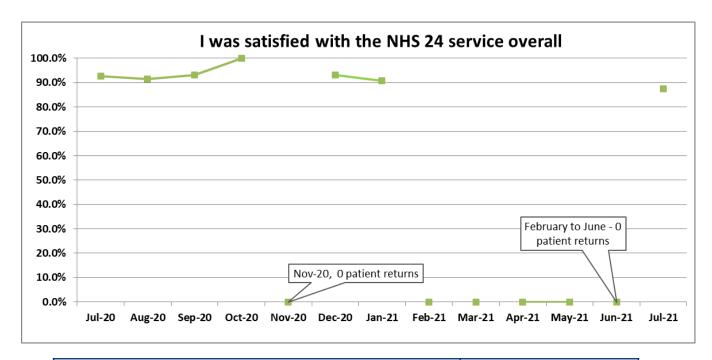


3.1 Patient Feedback (111 only)

- There were 24 patient survey returns in July 2021
- 87.5% of patients agreed that they were satisfied with the service overall.

3.2 Complaints

- 42 "Stage 1" and 1 "Stage 2" complaints
- The main themes of complaint were:
 - Inappropriate outcome/advice
 - Interpersonal skills
 - Access



Number o	1		
% responded to within 20 working days			100%
Call demand for June	Complaint Type	Number	% of complaints vs. call demand
169,108	Stage 2	1	0.001%

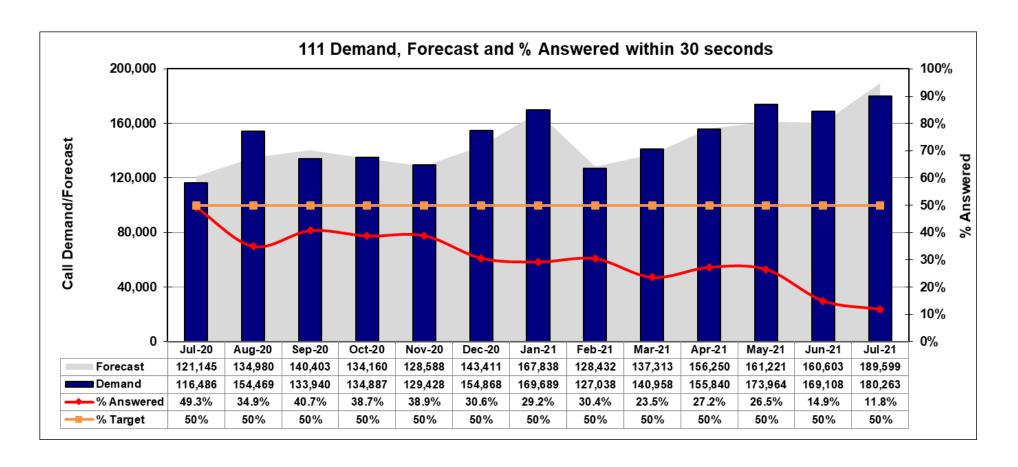
^{*} Due to 20 working day response time target, complaints are reported one month behind

4.1 Call Demand, Forecast and % Answered within 30 seconds



Summary

- Call Demand 180,263 which was 5.2% under forecast (189,599) and 2nd busiest month on record.
- 74.3% of demand was answered, with remaining 25.7% of calls abandoning after 30 second threshold.
- Calls answered within 30 seconds threshold was 11.8%

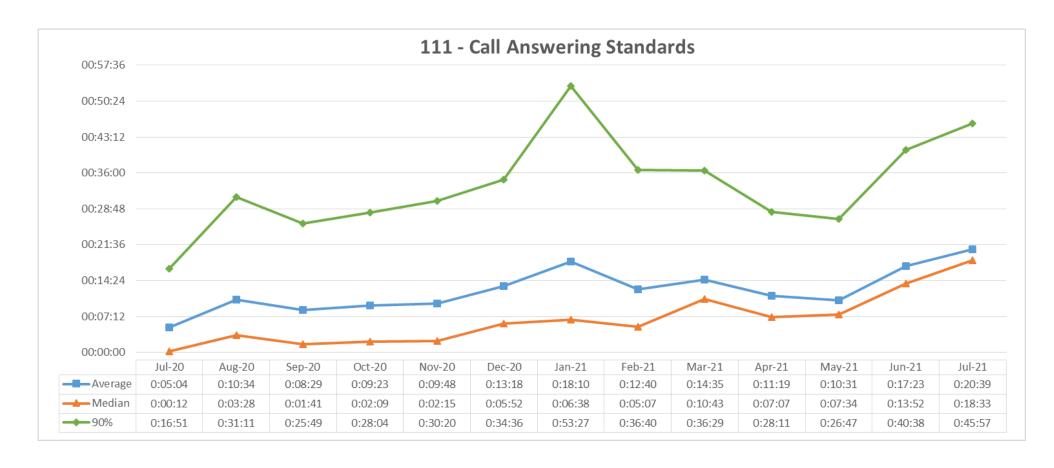


4.2 Call Answering standards



Summary

- Average time to answer: 20 minutes 39 seconds
- Median time to answer: half of all patients waited 18 minutes 33 seconds or less to be answered (a total of 67,00 patient calls)
- 90th Percentile time to answer 45 minutes 57 seconds, this meant 10% of patient calls (13,400), waited at least 45:57 for their call to be answered.

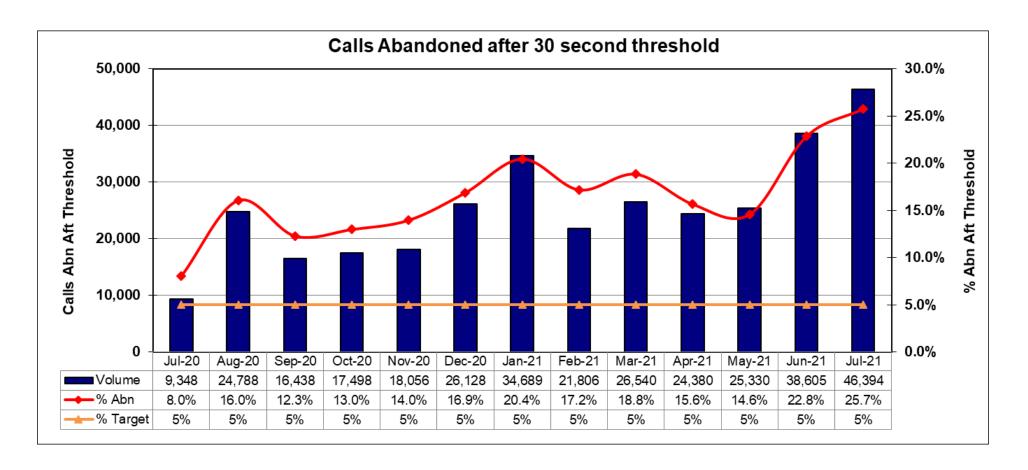


4.3 Calls Abandoned After 30 second threshold



Summary

- Calls abandoned after threshold in July was 25.7%
- Average time to abandon was 11 minutes 59 seconds, which is 1 minutes 12 seconds higher than previous month
- Maximum time to abandon was 1 hour 23 minutes



5. OTHER NHS 24 MANAGED SERVICES



5.1 Breathing Space

Breathing Space is a confidential, phone service for anyone in Scotland over the age of 16 experiencing low mood, depression or anxiety. Breathing Space is funded by the Scottish Government's Mental Health Unit and is one of the SG target measures.

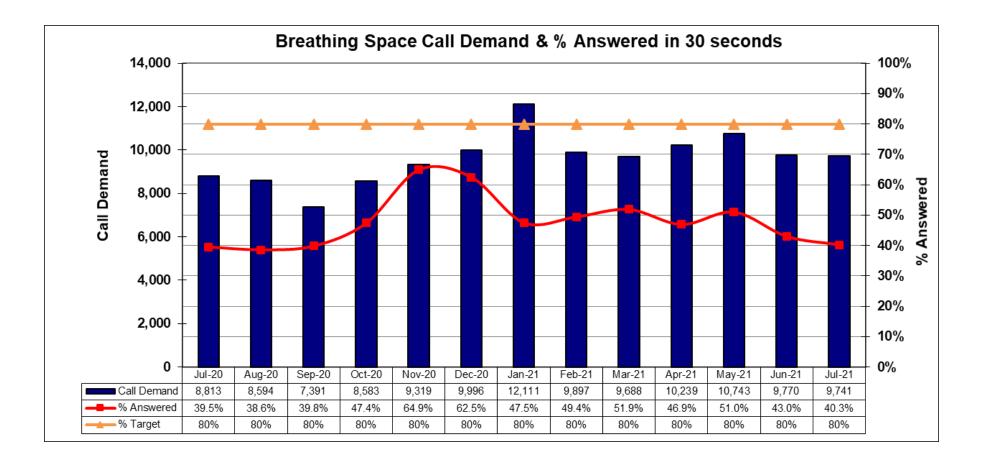
5.2/5.3 Other Services Call Demand and Access

Care Information Scotland (CIS)	Phone and webchat service providing information about care services for people living in Scotland
Quit Your Way Scotland (QYWS)	Phone and webchat advice and support service for anyone trying to stop smoking in Scotland
Cancer Treatment Helpline (CTH)	Triage assessment to patients who are receiving or have received specific cancer treatment when they feel unwell, ensuring that they access the most appropriate, effective and timely care if their condition is deteriorating
Living Life	Free phone service offering therapy for anyone in Scotland over 16 years of age with low mood, mild to moderate depression or anxiety
Musculoskeletal (MSK)	Phone service for people experiencing symptoms of MSK disorders - such as back pain or sports injuries. This service has been paused as part of COVID-19 response.
NHS inform	The NHS inform helpline for general health information is temporarily suspended as our teams are supporting the management of the COVID-19 helpline

5.1 Breathing Space



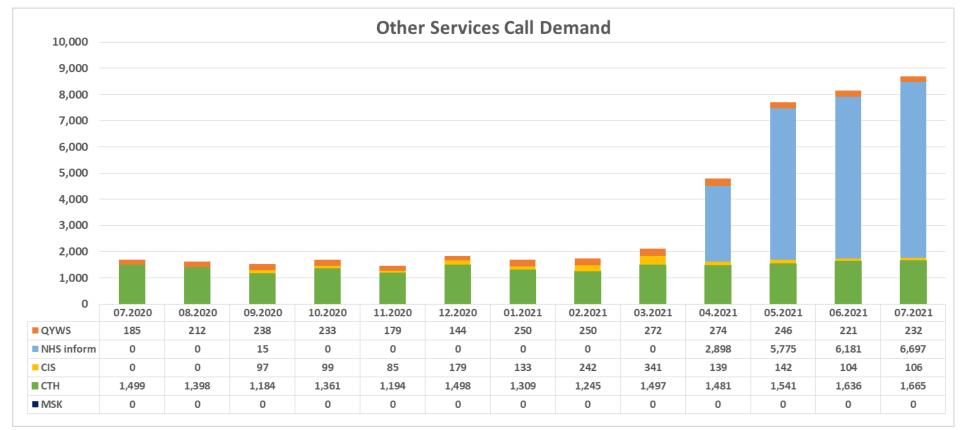
- Demand 9,741 was at the same level as June
- 40.3% of calls were answered within 30 seconds and average time to answer for calls was 2 minutes 4 seconds
- 6,919 calls were answered by BS advisors, meaning 71% of overall demand from patients was answered



5.2 Other NHS 24 Managed Services – Call Demand



- **Care Information Scotland (CIS)** Service paused between 26th February to 1st September. Demand at similar levels to June
- Quit Your Way Scotland (QYWS) Paused between 26th February to 3rd May due to COVID-19 pandemic. Consistent call volume in 2021
- Cancer Treatment Helpline (CTH) Highest demand for service since March'20. CTH calls answered by 111 Call Takers
- Musculoskeletal (MSK) Services paused on 23rd March due to COVID-19 pandemic and has yet to resume
- NHS inform Managed by Ascensos, 6,697 calls were received, an 8% increase on previous month



6.1 Digital Activity



As part of newly proposed performance framework there are a number of new Digital measures which have been proposed:

- NHS inform core service (excluding COVID-19 activity) This measure relates to unique page views on core NHS inform website (excluding COVID-19 related activity).
- NHS inform COVID-19 content unique page views related to COVID-19 content on NHS inform website
- NHS inform COVID-19 vaccinations microsite unique page views related to COVID-19 vaccinations microsite on NHS inform website.
- Scotland's Service Directory (SSD) Scotland's Service Directory (SSD) sits on NHS inform and provides details of all NHS health services across Scotland, including; Accident & Emergency (A&E), Minor Injury Units (MIUs), Pharmacies etc.

Measure	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21
NHS inform - core service (excl COVID)	4,618,962	5,667,729	5,274,913	6,223,344	5,430,288	7,074,842	7,156,853	6,736,138
% change on previous month	5.4%	22.7%	-6.9%	18.0%	-12.7%	30.3%	1.2%	-5.9%
COVID Content (as per C19 Dashboard)	1,206,333	2,279,382	734,010	620,896	629,842	791,322	1,292,426	1,640,457
% change on previous month	22.3%	89.0%	-67.8%	-15.4%	1.4%	25.6%	63.3%	26.9%
NHS inform – COVID-19 vaccinations microsite	51,358	225,562	1,347,195	2,817,105	1,914,527	3,921,781	3,776,732	3,105,197
% change on previous month	180.2%	339.2%	497.3%	109.1%	-32.0%	104.8%	-3.7%	-17.8%
Scotland Service Directory	111,676	137,973	125,808	156,835	148,589	167,255	160,138	154,144
% change on previous month	-8.3%	23.5%	-8.8%	24.7%	-5.3%	12.6%	-4.3%	-3.7%

7. WORKFORCE



7.1 Workforce: Attendance Rates



Attendance Rates

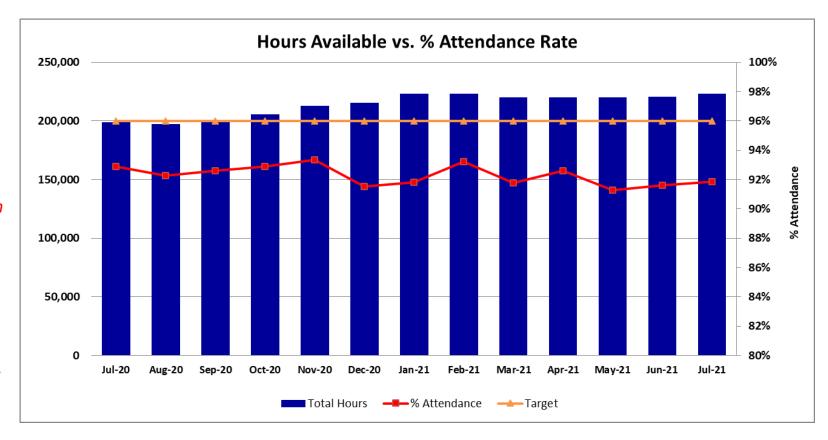
One of the key Scottish Government measures relates to workforce. A low attendance in the organisation will impact the organisations ability to deliver services to patients. The attendance rate excludes COVID related absence.

Summary

- Attendance in July was 91.8% resulting in target missed by 4.2 percentage points
- Attendance rate was 1.1 percentage points lower than July 2020.
- Overall NHS 24 total Coronavirus absence figure for July equates to 4.2% which means the combined NHS 24 sickness and coronavirus absence percentage equates to 87.6% attendance.

Commentary from Director of Workforce

The Attendance Management Improvement Plan and Health and Wellbeing Action Plan continues to be progressed. As part of the plans the ER Team work with the Wellbeing Team Managers on a weekly basis to support them and there is also now a focus on the use of wellbeing information to support staff stay at work and return to work. Information dashboards are now available to these managers which are an improved reporting tool. Covid absence also continues to be managed.



8. Productivity Improvement Programme (PIP)



The EMT established the Productivity Improvement Programme (PIP) Board chaired by the CEO
The **scope** of this Productivity Improvement Programme consists of a number of immediate, short and medium term work packages and brings together existing projects and programmes including the *Service Optimisation*Programme, the Attendance Management Programme and a number of ICT optimisation projects within the Connect Programme.

Objectives, Targets and Baselines were set including

8.1 PIP measure – Absence

Objective was to create a working environment that supports attendance

8.2 PIP - Performance Summary

A number of objectives are tracked with the aim of ensuring:

- services are available to all that need them
- our core systems are optimised to support service access
- We will deliver a safe, effective service that is trusted and appreciated by the public

8.1 PIP measure— Absence

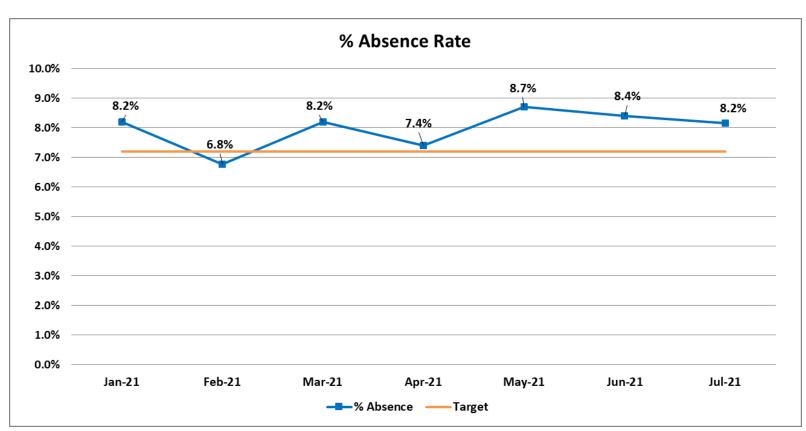


Summary

 The PIP target is currently 7.2%, which differs from the agreed Sponsor Framework target (4%) - this target was set with the aim of making a 1% reduction from the baseline attendance rate (January 2021 figure)

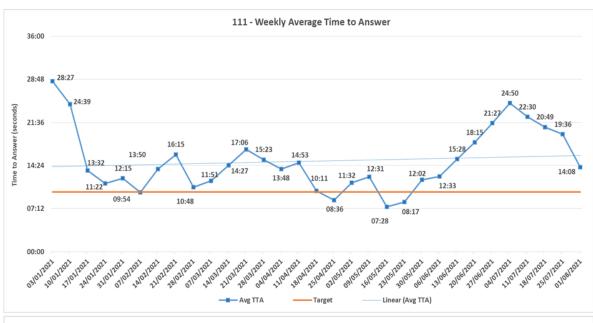
Commentary from Director of Workforce

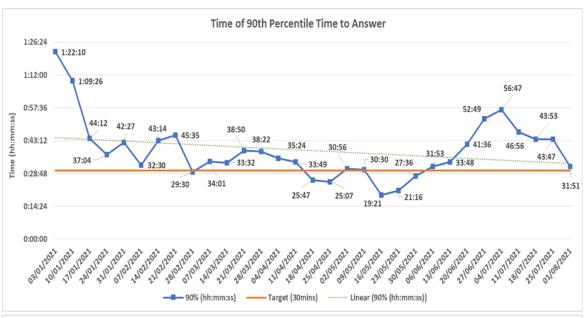
We did not achieve the June target. The trend has been downwards since May 2021 and with the relevant plans now progressing more fully and with the Wellbeing Team Managers in place we are hopeful to be able to achieve the September target. These figures are used as part of the communication with staff to give them information about our absence rates. Also as part of this communication we advise staff of the impact of this on hours lost to the service.

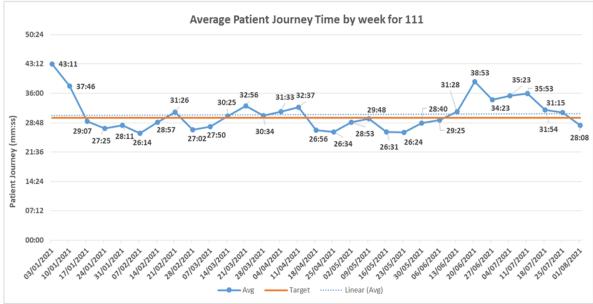


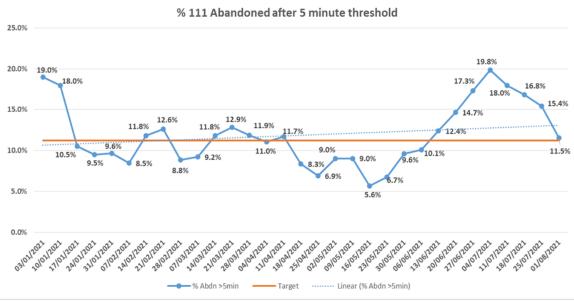
8.2 PIP – Performance Summary













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