

**NHS 24
20 JUNE 2024
BOARD MEETING
ITEM NO 11.1
FOR ASSURANCE**

CORPORATE PERFORMANCE REPORT – MAY 2024

- Executive Sponsor:** Steph Phillips, Director Transformation, Strategy, Planning & Performance
- Lead Officer/Author:** Paul McLaughlin, Head of Corporate Performance
- Action Required:** This paper is presented to the NHS 24 Board to provide assurance on the quality and performance of services provided for period ended 31 May 2024 and to set the context for more detailed discussion on current performance.

Key Points for NHS 24 Board to consider

The key points in relation to May 2024 performance:

- Overall demand was 143,327, which included 14,815 virtual queue requests. Overall demand 6% down on May 2023, and 5% up on previous month.
- Challenges remained with meeting access targets, Patient Journey Time, Median and 90th Percentile time all increasing from previous month.
- Call Taker average handle time (AHT) remains around 30 minute mark. A large proportion of talk time for call takers is waiting for Clinical Supervision. Clinical Advice Line is being expanded into midweek to help reduce overall waits for clinical advice.
- Breathing Space experienced its highest ever call volume at 15,000 calls and highest ever webchat volume answered at 706.
- There was a 31% drop in traffic to NHS inform to 4.7 million page views. Geo fencing was in place across entire month, with only UK and India IP addresses able to access website.

Governance process

This paper was presented to the NHS 24 Board on 20 June 2024.

Strategic alignment and link to overarching NHS Scotland priorities and strategies

Effective performance across NHS 24 supports delivery across the wider health and social care system.

Strategic alignment and link to Corporate Delivery Plan activity

Corporate Deliverable 2: continuous improvement of core service performance in line with NHS 24's Key Performance Framework, and delivery of programmes to support the wider health and care system and delivery of Right Care, Right Place.

Key Risks

Resourcing Capacity Limitations and management of staff absence in respect to call demand are considerations for this paper that are on risk register.

Financial Implications

All financial and workforce implications arising from current and projected performance levels are reflected in the routine functional reports.

Equality and Diversity

All equality and diversity issues arising from maintaining and continuously improving performance management are integrated with service planning.

1. RECOMMENDATION

- 1.1 The NHS 24 Board is asked to note quality and performance, specifically measures set out in Performance Framework for period ending 31 May 2024.

2. TIMING

- 2.1 Corporate Performance report is presented to the NHS 24 Board on 20 June 2024.

3. BACKGROUND

- 3.1 Demand on 111 service in May was 143,327, which was within forecast range. Weekly call volumes varied across month, due to largely due to May bank holidays at beginning and end of month which resulted in busy Mondays. Virtual Queue (VQ) requests made up 10% of overall demand, at 14,815 requests. VQ is available on two IVR options, Unwell and A&E, which are both activated after waits reach 20 minute mark.
- 3.2 When reviewing volume by pathway and queue, overall volumes are down on May 2023 by 6% which equates to 9,178 calls. Whilst most queues and pathways dropped year on year some increased volumes include Dental 73% up (3,113 calls), Flu up 24% (11,596 calls) and calls from Police Scotland to Mental Health Hub up 130% (425 calls). All other main queues and pathways dropped year on year, including A&E down 10% to 37,199 and Unwell (including VQ) down 8% to 67,522.
- 3.3 Time to access 111 service continues to be challenging, and in May all of the key performance measures increased month on month. Median time to answer (mid point of call answering times) was 16 minutes 8 seconds (up from 12:12) and patient journey increased by over 2 minutes to 42 minutes 45 seconds.
- 3.4 A key component to reducing time to access service is by reducing Call Taker AHT, which is currently in and around 30 minute mark week on week. A large proportion of call taker talk time is comprised of waiting for Clinical

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Resource, in May this ranged between 13 and 16 minutes weekly. One of the key components is improving Clinical Resource attendance, however there are a number of other initiatives which are developing as part of Service Transformation. Advise and Refer talk time was 10 minutes 40 seconds in May and the keywords which qualify for A&R have now increased to 12 (Knee recently added). The Clinical Advice Line is also starting to be used midweek; this line is used for calls/queries that can be answered by Senior Nurses with a talk time of less than 2 minutes, which allows for Clinical Supervisors to focus on helping with the more complex calls. Pilots of the advice line have proved to be successful during Public Holidays and weekends.

- 3.5 Overall attendance in May improved slightly to 92.1% - there was however some high absence in key frontline skillsets, Clinical Supervision absence increased to 19.2% (up 1 percentage point). Improvements were seen in other key frontline skillsets Nurse Practitioner (drop 2.3 percentage points) to 10.3% and Dental Nurse Advisor also improved by 5.9 percentage points to 8.1%.
- 3.6 NHS inform page views experienced a further 31% drop month on month to 4.7 million page views, the lowest total since December 2020. Geo fencing was in place across the full month, limiting access to UK and India IP addresses only. This was put in place due to bot attacks on website. India was also selected as developers are based there and require access.

4. ENGAGEMENT

- 4.1 Collaboration across a number of teams and directorates is required to complete report.

5. FINANCIAL IMPLICATIONS

- 5.1 All financial and workforce implications arising from current and projected performance levels are reflected in the routine functional reports.

6. MEASURABLE BENEFITS

- 6.1 This is routine reporting to the NHS 24 Board to provide assurance.

7. NEXT STEPS

- 7.1 This is routine reporting to the NHS 24 Board to provide assurance.



NHS 24 Board Meeting

Corporate Performance Report

May 2024

May Headlines



Overall demand to 111 – 143,327 (including 14,815 Virtual Queue requests). Volume 6% lower than May'23 and 5% up on previous month.

Time to access 111 service increased in May, median time to answer increased to 16:08 and 90th percentile went up to 59:21.

Call Taker AHT remained around 30 minute mark, with average waits for clinical supervision ranging from 13 to 16 minutes on average per week in May.

Breathing Space experienced its highest ever call volume at 15,000 calls and highest ever webchat volume answered at 706.

NHS inform traffic page views decreased by 31% to 4.7 million geo-fencing was on full month meaning only UK and India IP addresses could access website.

Performance Framework

1. Patient Experience	Target	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
1.1 Patients % positive experience using 111 service	90%	N/A	N/A	92%	92%	89%	87%	86%
1.2 Complaints: % stage 2 answered within 20 days	100%	100%	40%	100%	100%	100%	50%*	N/A**
1.3 Triaged at First Contact	95%	96%	94%	94.9%	95%	94.5%	94.8%	95%
1.4 Patient Journey Time	30 mins	0:32:31	0:42:32	0:41:24	0:40:30	0:46:44	0:40:20	0:42:45
2. Whole System Impact	Target	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
2.1 Primary care: % of outcomes	c45-65%	53%	58%	56%	55%	57%	54%	54%
2.2 Secondary care: % of outcomes	<30%	27%	22%	25%	26%	24%	26%	27%
2.3 Self-care / no partner action: % outcomes	>20%	20%	20%	19%	20%	19%	20%	19%
3. Access	Target	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
3.1 Median time to answer	5 mins	0:05:32	0:14:40	0:12:26	0:14:04	0:20:11	0:12:12	0:16:08
3.2 90 th percentile time to answer	30 mins	0:29:06	0:58:19	0:55:10	0:50:24	1:08:17	0:48:16	0:59:21
3.3 Caller Discontinued	5%	0.2%	0.5%	0.5%	0.4%	0.7%	0.3%	0.5%
4. Digital	Target	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
4.1 NHS inform Website	N/A	10,354,941	7,715,500	9,185,508	8,224,104	8,503,194	6,784,601	4,663,241
4.2 Webchat (4 services)	N/A	1,236	1,247	1,444	1,463	1,322	1,374	1,536
4.3 NHS 24 App (Self Help Guide selection)	N/A	5,256	7,003	5,889	5,357	5,923	5,550	5,856
5. Staff Experience	Target	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24
5.1 Staff attendance	96%	92%	90%	91%	92%	91%	92%	92%
5.2 Engagement index	75	74	74	74	74	74	74	74

* Revised figure from 0%

** No Stage 2 complaints were received

Patient Experience Measures



1.1 Patient experience: % positive experience of using 111 service

Ongoing measure which gauges satisfaction from users of 111 service. 4 pathways (based on outcome) now receive links to surveys via text soon after triage. Patients have opportunity to fill out Webropol survey.

1.2 Complaints: % stage 2 answered within 20 days

Proactive management of complaints monitored, all other relevant patient feedback including compliments and stage 1 complaints reviewed.

1.3 Triaged at First Contact

Reflects stated preference of callers and key system partners with calls being triaged on initial inbound calls. Results in no further delays through NHS 24 or repetition of questions to patient.

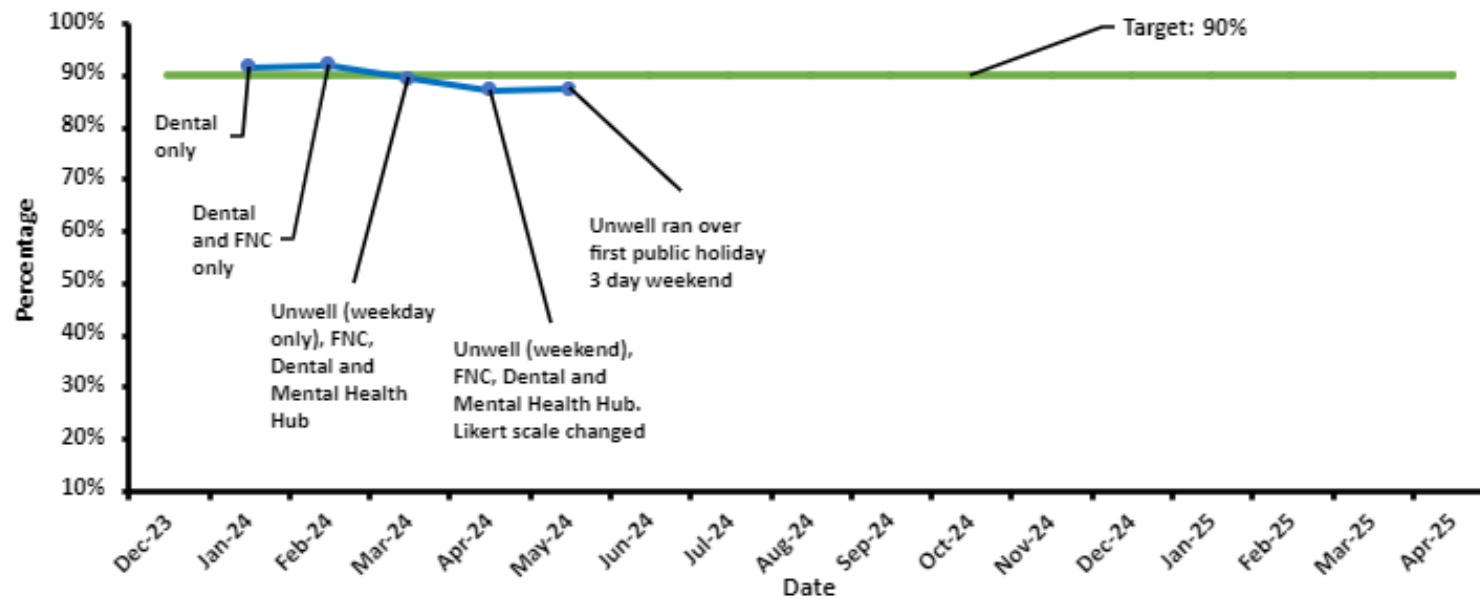
1.4 Patient journey time

Provides full journey time, from selection at Interactive Voice Response to when triage of call has ended. Both answering time and triage time monitored in this measure.

Patient Experience - % positive

- Patient experience data has now been standardized across all reporting in organisation.
- Mental Health, Dental, Flow Navigation Centre and Unwell patients who call via mobile receive a text message soon after triage.
- 13,655 survey links sent in May – 3,007 respondents (22% response rate)
- **86%** patients noted a positive experience.

Figure 1. Line graph showing KPI - 1.1 Patients % positive experience using 111 service



Complaints / Patient Feedback

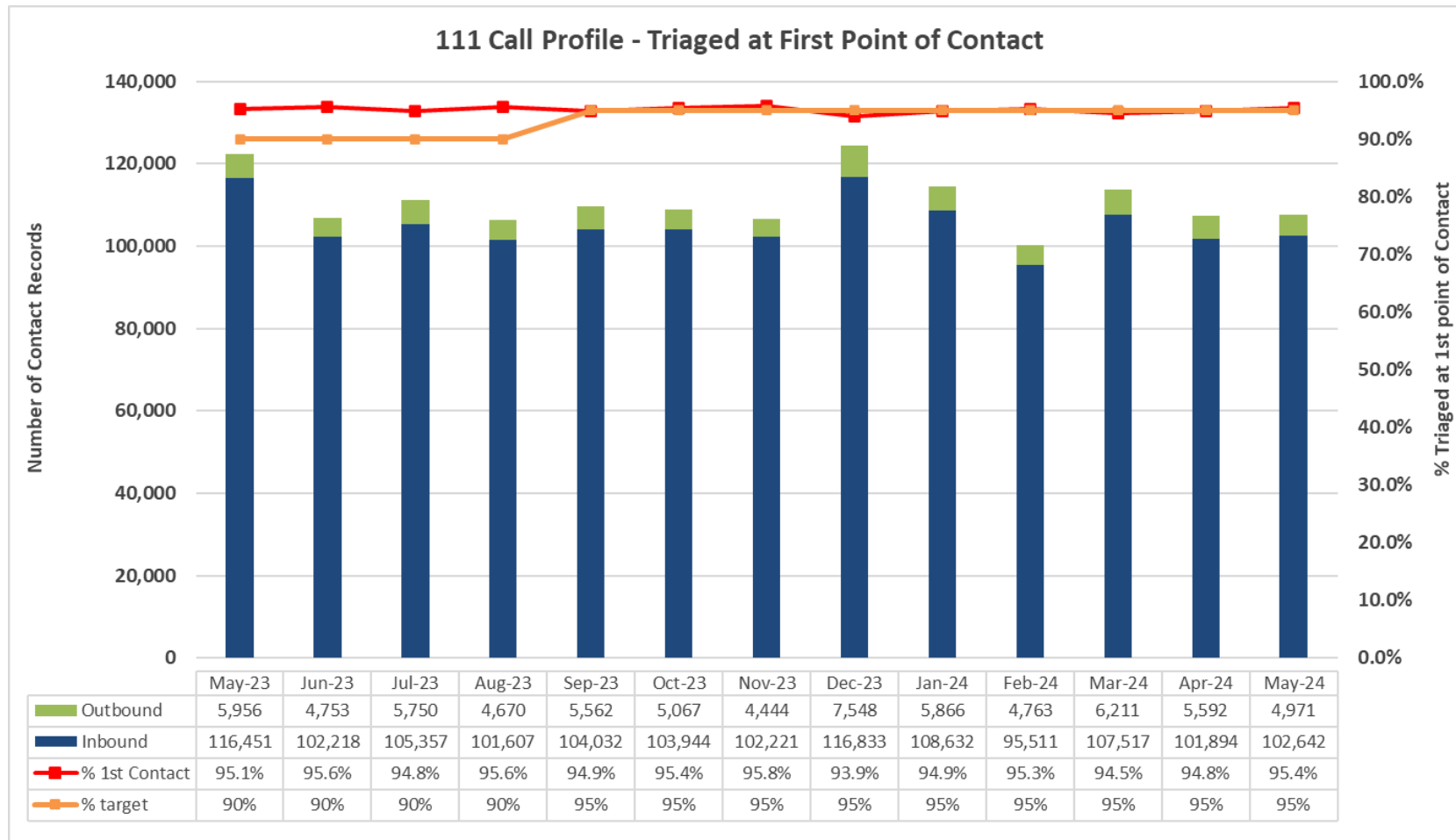
In total there were **141** items of patient feedback:

- Complaints responded to % on framework is reported one month in lieu, due to response target time of 20 working days. There were 0 stage 2 complaints in April.
- Please also note revised figure of 50% in April, there was an error due to newly implemented system.
- In total there were **34** complaints which represents 0.02% of total demand.

Feedback Type	May 2024 Activity Received
Stage 2 Complaints	1
Stage 1 Complaints	33
Stage 1 to Stage 2 Complaints	0
Shared Complaints	2
Comments	30
Enquiries	3
Compliments	38
Non NHS 24 Issue	34
Total	141

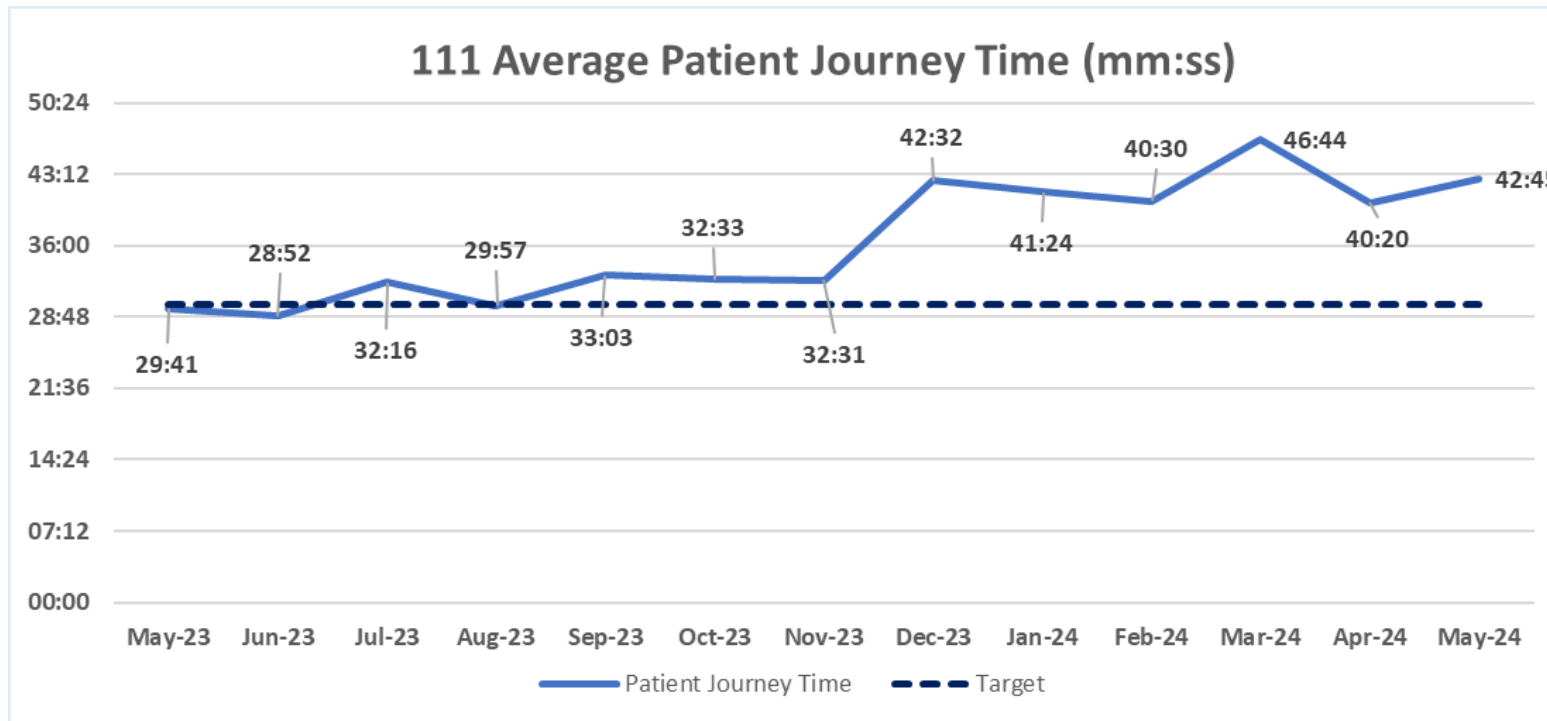
Triaged at First Contact

- Measurement monitors the transition to an inbound model
- Scottish Emergency Dental Service continues to make outbound calls – and is the main driver of outbound calls – small proportion of Pharmacy calls also managed outbound.
- Triaged at first contact – **95.4%**



Patient Journey Time

- Patient Journey is time between when patient select desired Interactive Voice Response (IVR) route (Urgent Care, Dental, Mental Health) to when the final endpoint is entered on to the contact record.
- Average journey was **42 minutes 45 seconds**, a 2:25 increase on April.
- The increase this month was driven by longer waits to access service, median time to answer increased by almost 4 minutes month on month.



Whole System Impact



2.1 Primary Care Outcomes

Shows impact of NHS 24 triage on wider system. To include out of hours referrals and advice to contact own GP in hours

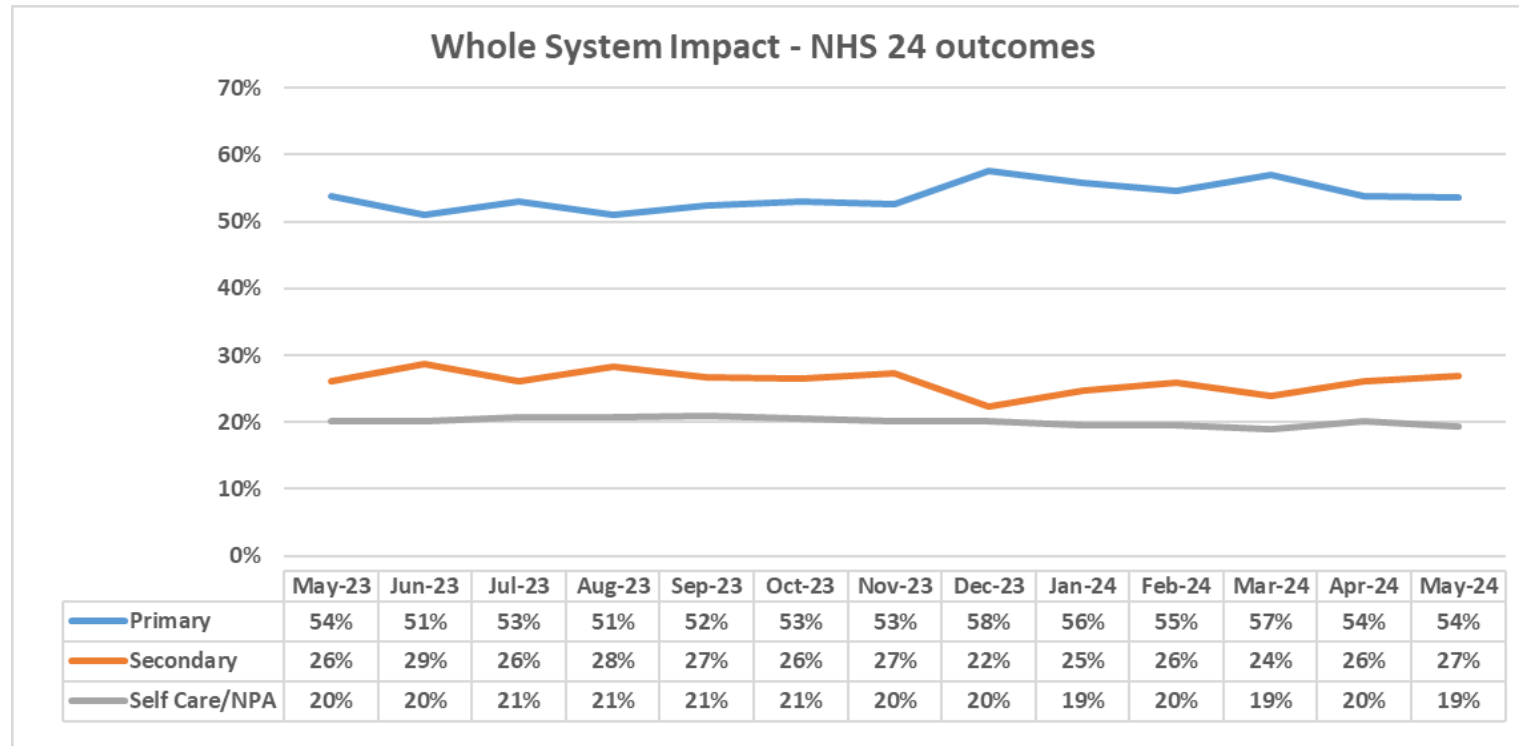
2.2 Secondary Care Outcomes

Secondary care outcomes include referrals to Accident & Emergency, 999 and Flow Navigation Centres.

2.3 Self Care – No Partner Action

This grouping includes all self care advice, as well as referrals to other services including Pharmacy, Midwife, Police and Optician.

Whole System Impact



- **Primary Care – 54%**, in line with 12 month average, May contained two Public Holidays which results in longer OOH provision, in particular Urgent Care Centre appointments increase due to GP surgery closures.
- **Secondary Care – 27%** - slight increase in secondary care, at 28,771 outcomes this is the highest volume since November 2023. Increase originated from increased FNC usage, with 11% overall outcome split, the highest in 9 months.
- **Self Care/NPA – 19%** - 1 percentage point reduction on 12 month average. Self Care endpoint (11%) continues to be 3rd most used endpoint across suite.

Telephony Access



3.1 Median Time to Answer

Measure which tracks mid point in answering time of calls to 111 (target 5 minutes)

3.2 90th Percentile Time to Answer

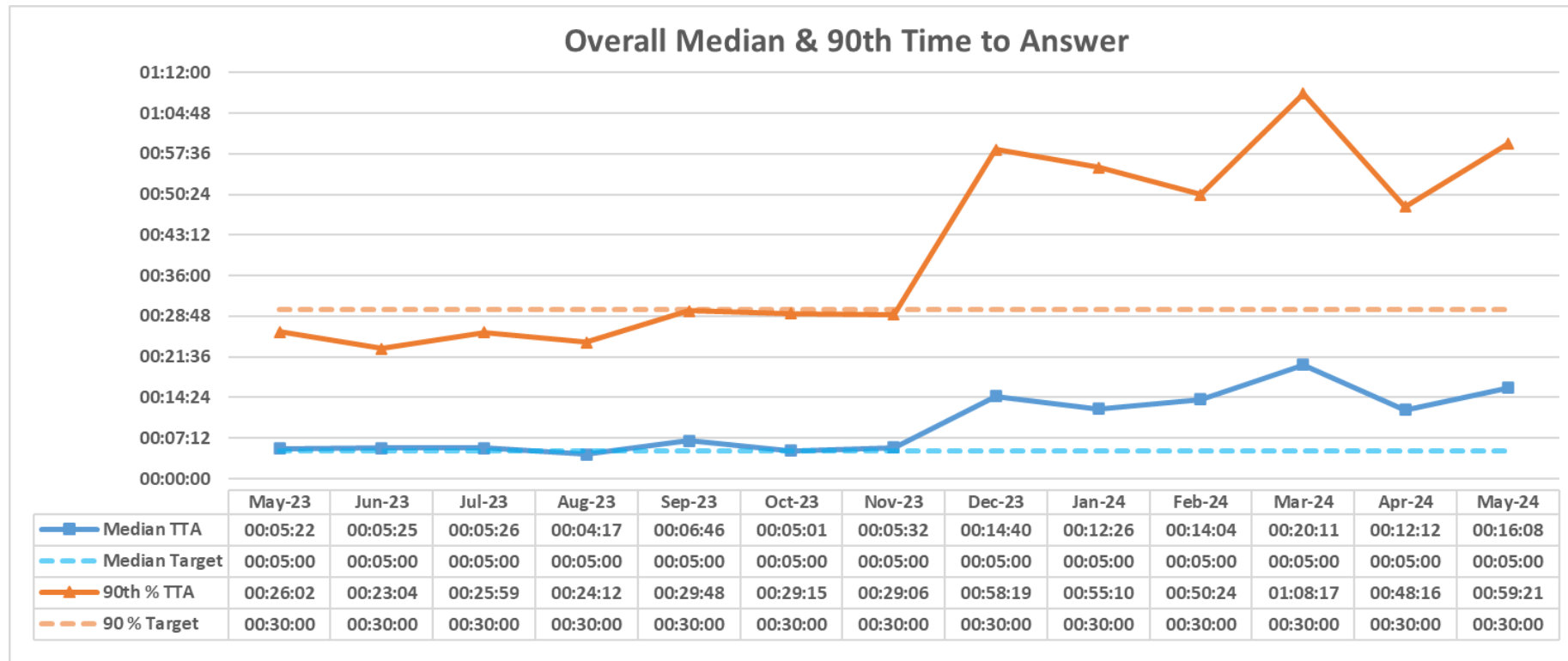
Measure tracks the longer wait times. 90th percentile provides the time where 90% of patients have been answered within (target 30 minutes)

3.3 Caller Discontinued

Measures % of callers within a calendar day who call 2 or more times and do not have any call answered within that time period having waited longer than 5minutes.

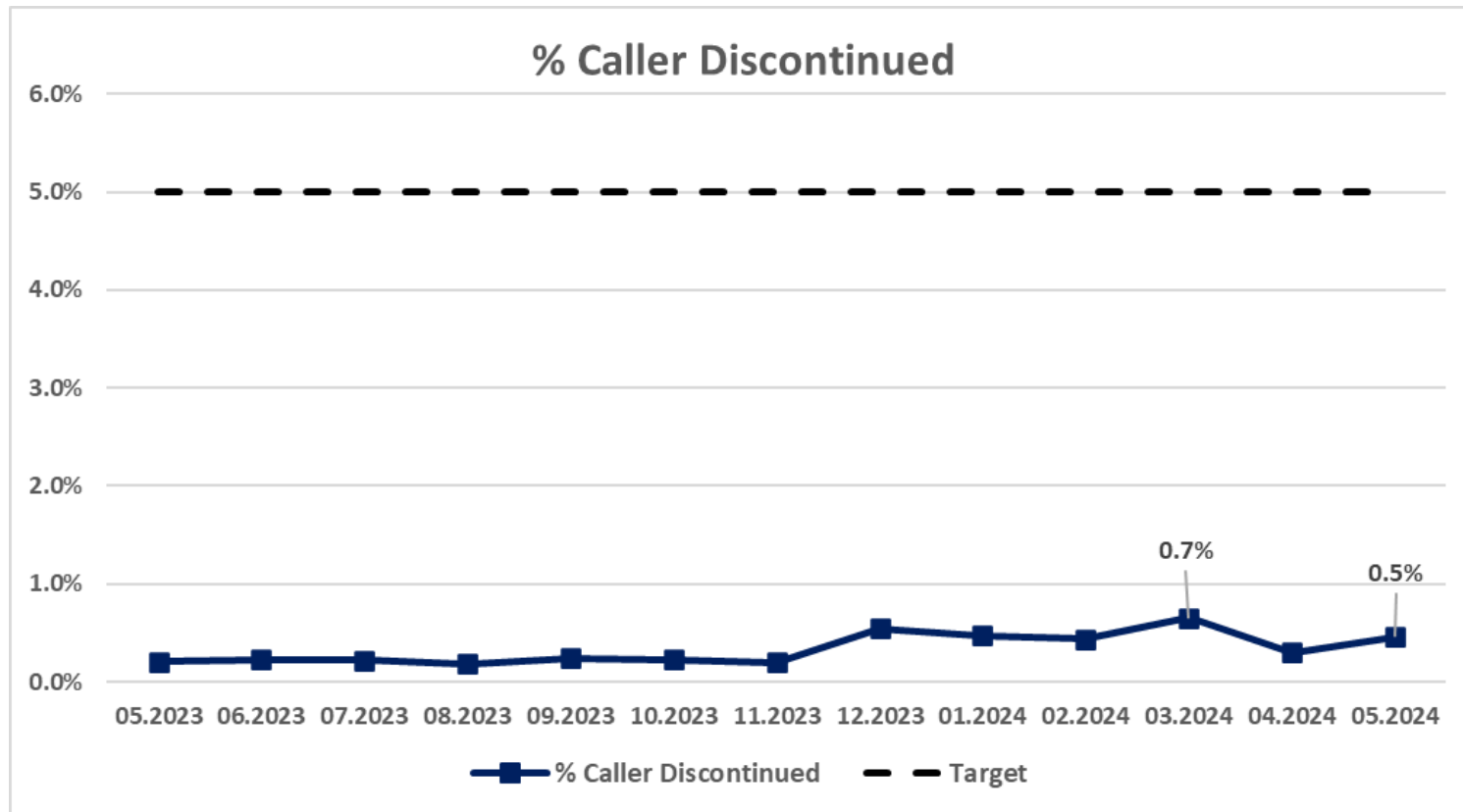
Median & 90th Percentile

- Time to answer measures include patients who select virtual ringback option.
- Median Time to Answer - **16 minutes 8 seconds**, 3:56 increase on previous month.
- 90th Percentile Time to Answer missed target at **59 minutes 21 seconds**, over 10 minute increase on previous month.



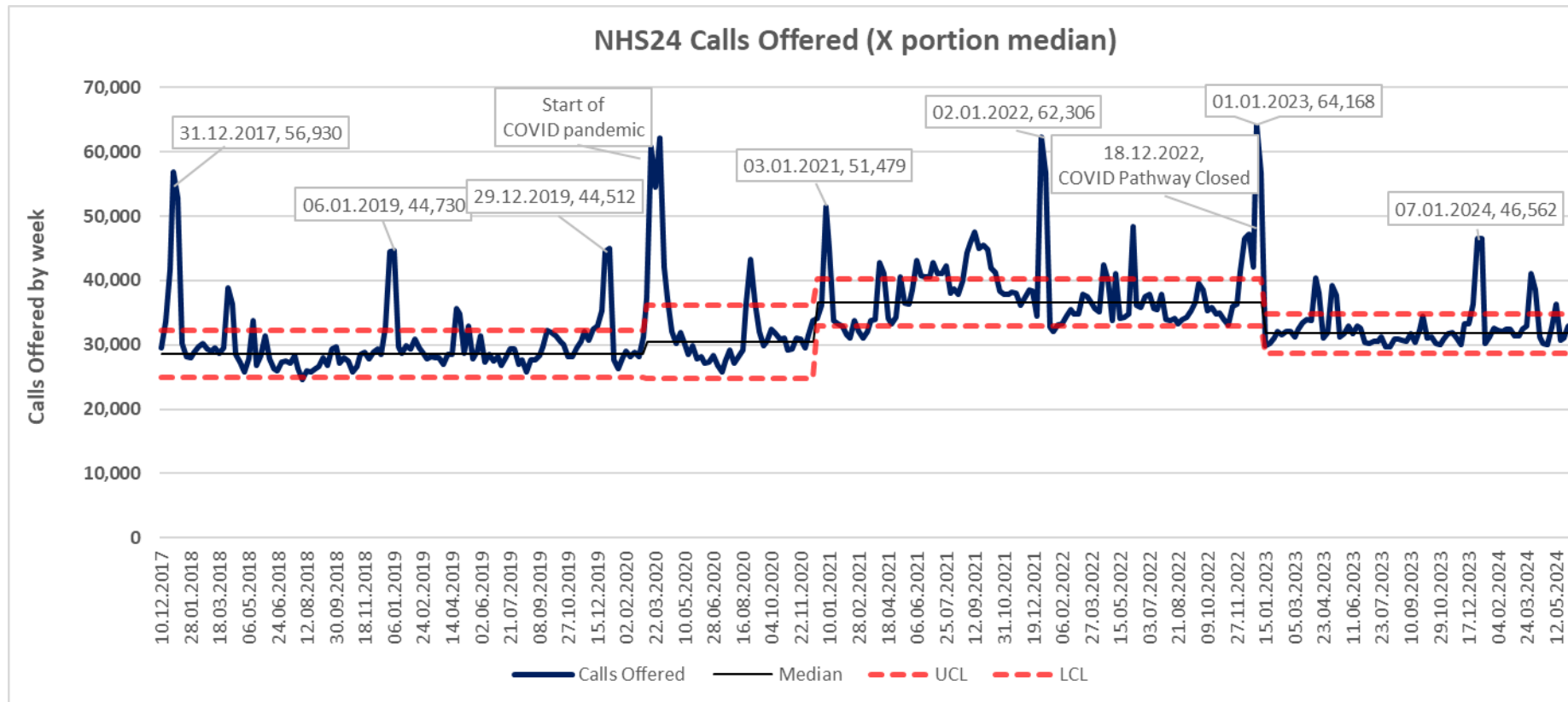
Caller Discontinued

- Caller Discontinued is a patient (based on phone number) who has abandoned after 5 minutes twice or more in one calendar day, whilst having no call answered.
- A noted portion of abandoned calls will originate from patients who have had at least one call answered that day.
- Measure consistently within target – **0.5%**
- Equates to 498 patients who made two attempts to contact service with no answer.



Inbound Call Volumes – Control Chart

- Control Chart data is provided for context on access measures – volumes above weekly median often result in longer times to access service.
- Current median is 31,774 calls offered per week.
- First and last week containing Public Holidays were 16% and 4% above median. Two middle weeks of month were slightly below median (2% and 4%)



Digital Access



NHS inform – 4.7 million page views – 31% down on previous month.

- Reasons for drop in traffic**
- Geo-fencing has remained in place across entire month. Only UK and India have access to NHS inform.
 - India is where developers are based, so they require access to site.

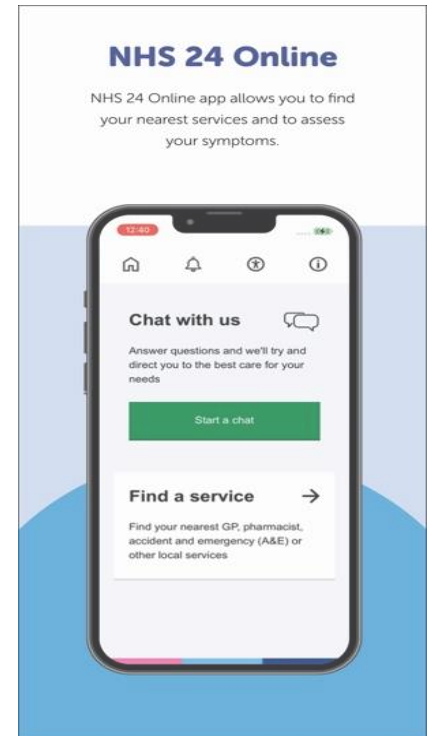


WEB CHAT



- 1,536 webchats answered
- NHS inform (759)
 - Breathing Space (706)
 - Quit Your Way Scotland (53)
 - Care Info Scotland (18)

Note: new Webchat system does not capture any attempts to webchat when no advisor available



NHS 24 app – 5,856 Self Help Guide Selections.

Staff Experience



5.1 Staff Attendance

Identifies and monitors overall staff attendance – this is an NHS wide target which is set nationally for all Health Boards at 96%.

5.2 Engagement Index

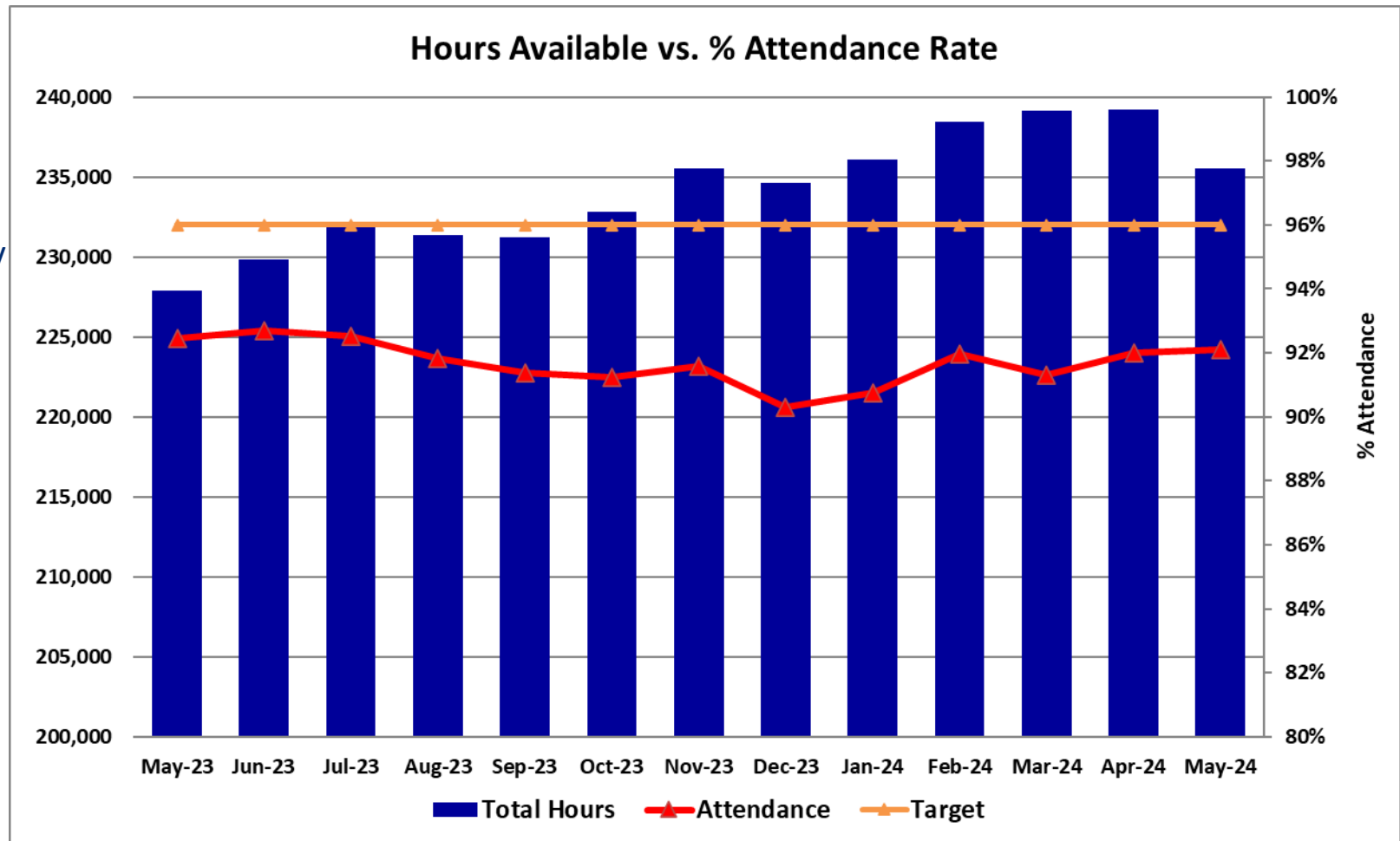
iMatter is a key initiative at NHS 24. It is a tool designed to gather valuable insights into the staff experience and staff are encouraged to participate in an annual questionnaire, consisting of 29 questions. This allows organisation to understand staff in order improve experience at work for all.

Engagement score is the % of staff who participate in survey. This has remained high overall for 2023/24 at 74.

Workforce Attendance

Summary

- Attendance was **92.1%** against a 96% target and was 0.1 percentage points up on previous month.
- Total absence hours in May was 18,613 hours, the lowest overall total since July 2023.
- Key skillsets used for Clinical Supervision remains high – Clinical Supervisor (19.2%) up 1 percentage point on previous month. Nurse practitioner improved by 2.3% to 10.3%.



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**The care behind
your care.**