

**NHS 24  
BOARD MEETING  
30 OCTOBER 2025  
ITEM 10.1  
FOR ASSURANCE**

**CORPORATE PERFORMANCE REPORT**

**Executive Sponsor:**

Steph Phillips, Director of Transformation, Strategy, Planning & Performance

**Lead Officer/Author:**

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**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 30 September and to set the context for more detailed discussion on current performance.

**Key Points for the NHS 24 Board to consider:**

Key points in relation to September performance:

- Overall, 111 volume 137,193 – 114,823 inbound calls, 15,809 Virtual Queue demand, a notable drop due to SAP telephony error relating to virtual queue. There was a further 6,561 calls from Phase 1 in new system. Overall, 6% up on last year and 2% down on previous month.
- Volume on A&E pathway maintained its high level and accounted for 33% of overall 111 volume.
- Phase 1 of Digital Transformation maintained very positive access figures. All key metrics comfortably would make performance targets. Average time to answer 4 minutes and just 2.4% calls abandoned after threshold (target 5 minutes). 79% calls answered within threshold (target 50%).
- Secondary care outcomes in 111 maintains its highest ever levels. 33% records in 111 require either A&E, 999 or Flow Navigation Centre outcome. 999 increased for sixth consecutive month to 9.1%.

**Governance process:**

This paper is presented to NHS 24 Board on 30 October 2025 and covers the period to end September 2025.

**Strategic alignment and link to overarching NHS Scotland priorities and strategies:**

Corporate Performance paper aligns with Key Performance Framework measures which were agreed alongside Scottish Government sponsors. 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

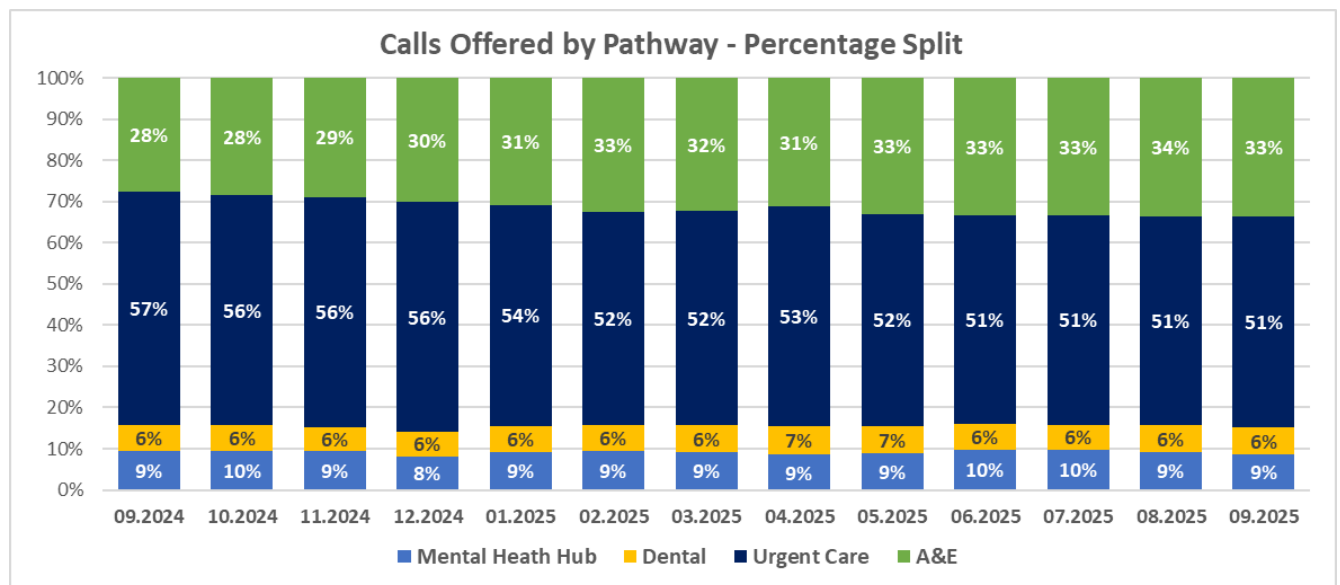
- 1.1 The NHS 24 Board is asked to note quality and performance, specifically measures set out in Performance Framework for period ending 30 September.

## 2. TIMING

- 2.1 Corporate Performance report is presented to NHS 24 Board on 30 October 2025 and covers period to end September.

## 3. BACKGROUND

- 3.1 Demand on 111 service in September was 137,193 which was 6% up on September 2024 (129,023). Virtual Queue demand dropped to just 12% of overall demand, the lowest since August 2024. This was due to a bug in SAP Sinch which meant virtual queue was not offered to patients between 12 – 19 September.
- 3.2 Volume on A&E pathway is from patients who feel they need to attend an A&E department or Minor Injuries Unit. Percentage of patients on A&E pathway remained high at 33%. In total 45,957 patients selected A&E, which was 29% higher than in September 2024. Patients who select the pathway have a higher tendency to receive a secondary care outcome, and this has been reflected in Secondary care outcomes.

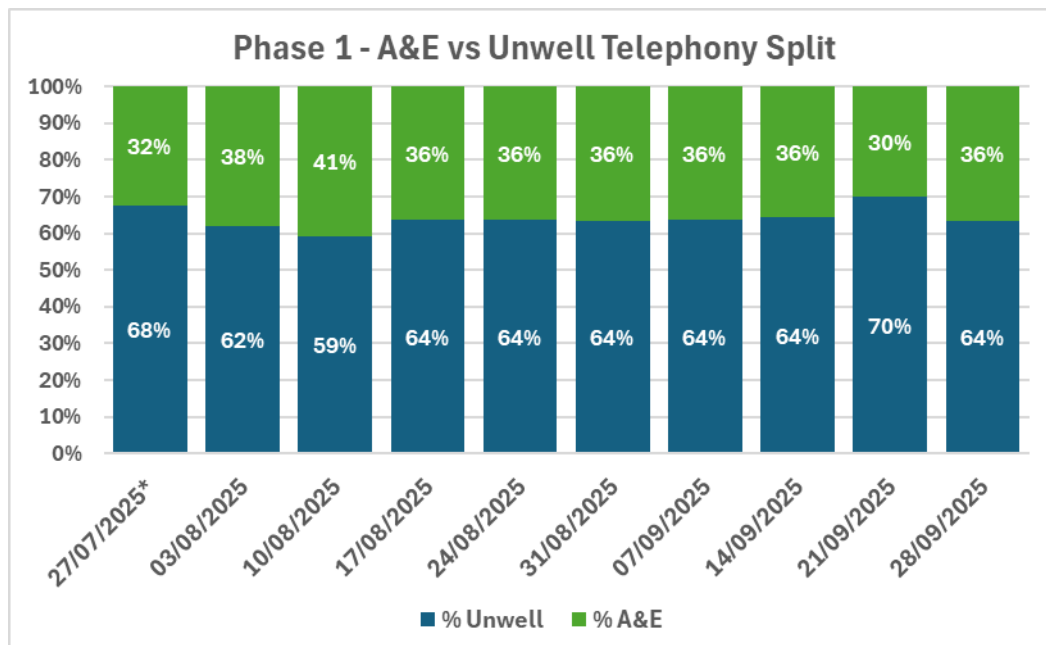


- 3.3 Secondary care outcomes consist of A&E, 999 and Flow Navigation Centre outcomes, and in September they maintained the higher rate of 33%. Flow Navigation (12%) dropped slightly, A&E (11%) maintained its highest ever percentage and 999 increased for sixth consecutive month to 9%.
- 3.4 Phase 1 in Ayrshire and Arran maintained good access figures with all measures comfortably meeting targets. Overall, 93% calls were answered with just 2.4% abandoning after threshold (target 5%) and 79% calls answered within 5 minutes (target 50%). Whilst median time to answer cannot currently be calculated, with an average time to answer of 4 minutes, median target of 5 minutes would also have been met.

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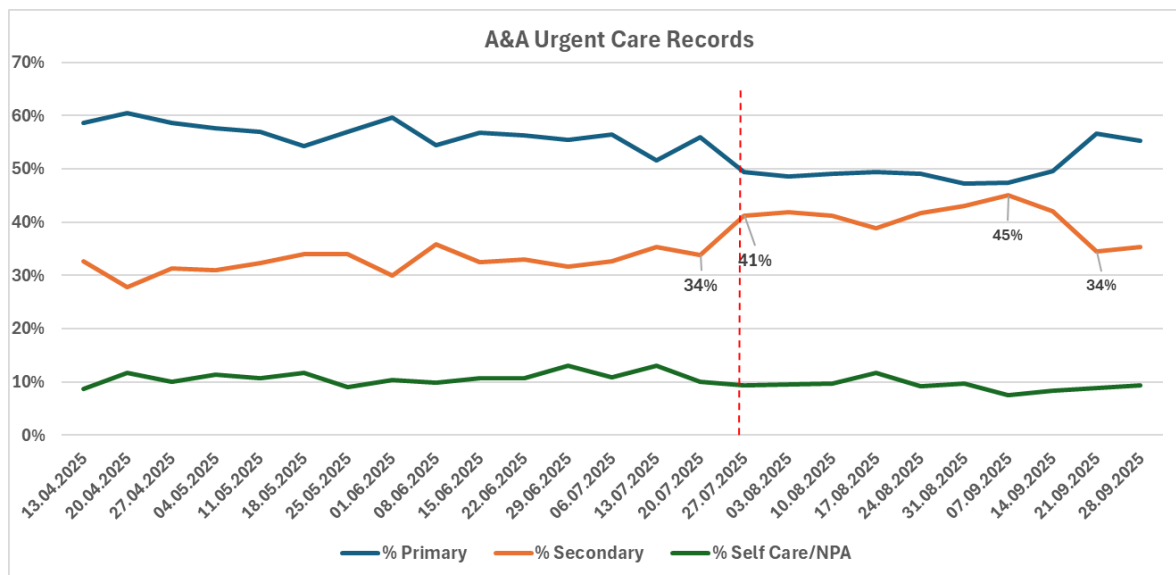
Measure	SAP BAU (93% of Population*)	A&A Pilot Phase 1	Overall National
Calls Offered	130,632	6,561	137,193
Calls Answered	107,919	6,120	114,039
Calls Abandoned	21,164	360	21,524
Calls Answered Within 5 Mins	40,205	4,843	45,048
% Answered Within 5 Mins	35.0%	79.1%	37.2%
Calls Abandoned After 5 Mins	10,610	148	10,758
% Abandoned After 5 Mins	9.2%	2.4%	8.9%
Average Time To Answer	00:14:08	00:04:01	00:13:35
Maximum Time To Answer	08:03:40	01:14:23	08:03:40
Average Handle Time	00:24:49	00:23:55	00:24:46

- 3.5 Ayrshire & Arran Phase 1 Go Live had 65% (4,281) of patients select Unwell pathway, while 35% (2,280) patients opted for Accident & Emergency. Patients from A&A who require Mental Health or Dental services are still triaged and recorded on existing SAP system. There was a change of the recent 64/36 split on week ending 21 September, this was attributed to a Public Holiday on Friday 19 September for A&A.



Due to Dental and Mental Health still being managed in BAU for A&A there was an expectation that a different outcome profile would be seen. An immediate 7 percentage point increase in Secondary care outcomes was seen on first week of go-live and Secondary care has remained above 40% until week ending 21 September when there was an 8 percentage point drop to 34% secondary care. This was maintained following week and further investigation is being undertaken to understand this drop. One notable change was an increase in A&A outcomes from legacy system given the increased number of mental health and dental calls as a result of the September public holiday and roll back to SAP the final weekend of September.

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- 3.6 Staff attendance dropped in September to its lowest level since January 2025. In response a focused taskforce has been established with a detailed action plan jointly agreed and in progress; positively there was a slight reduction in clinical supervisor absence, however, this was offset by a comparable uplift in call handler absence.
- 3.7 After a number of months of reduced traffic to NHS inform, there was a positive uplift in September to 2.1 million page views, an increase of 20% on the previous month reflecting ongoing work within the digital team.

## 4. ENGAGEMENT

- 4.1 Collaboration across 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 NHS 24 Board to ensure awareness.

## 7. NEXT STEPS

- 7.1 This is routine reporting to NHS 24 Board to ensure awareness.



**NHS 24 Board**

**Corporate Performance Report**

**September 2025**



# September Headlines

Phase 1 of Digital Transformation went live on the 22<sup>nd</sup> of July for Ayrshire & Arran patients who called 111 service on either unwell or A&E pathways. Please note that due to delays in Data Warehouse project some KPIs (1.3, 1.4 and all access measures) within performance framework don't contain A&A data from new system.



Phase 1 volume in September - 6,561. 79% of calls were answered within threshold, with an average time to answer of 4 minutes. 2.4% calls abandoned after threshold.

Average Handle Time for Phase 1 is 23 minutes 55 seconds, which is nearly a minute lower than BAU system for equivalent time period (24:49)

Secondary Care BAU outcomes, 33%, remains at its highest ever level. Driven by a percentage increase in 999 outcomes in September.

Total volume for 111 across both systems, 137,193, which is 6% up from September 2024, but 2% down on previous month.

# Performance Framework

1. Patient Experience	Target	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25
1.1 Patients % positive experience using 111 service	90%	85%	87%	87%	88%	89%	84%	88%	91%	86%	88%	88%	90%	88%
1.2 Complaints: % stage 2 answered within 20 days	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
1.3 Triage at First Contact*	95%	94.6%	95.2%	95.3%	94.6%	94.8%	94.9%	95.0%	94.8%	94.8%	94.9%	95.3%	94.6%	94.2%
1.4 Patient Journey Time*	30 mins	0:41:30	0:43:42	0:43:48	0:54:52	0:42:27	0:41:59	0:41:07	0:39:02	0:35:59	0:35:39	0:33:47	0:33:38	0:35:22
2. Whole System Impact	Target	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25
2.1 Primary care: % of outcomes	c45-65%	51%	51%	52%	55%	53%	51%	52%	51%	49%	48%	49%	47%	48%
2.2 Secondary care: % of outcomes	<30%	30%	30%	29%	27%	28%	30%	30%	29%	31%	32%	32%	33%	33%
2.3 Self-care / no partner action: % outcomes	>20%	19%	19%	19%	18%	19%	19%	19%	20%	20%	20%	20%	20%	19%
3. Access	Target	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25
3.1 Median time to answer*	5 mins	0:12:26	0:16:36	0:18:03	0:35:01	0:12:29	0:13:55	0:14:16	0:08:24	0:09:51	0:06:34	0:07:38	0:09:13	0:09:56
3.2 90 <sup>th</sup> percentile time to answer*	30 mins	0:43:06	0:49:50	0:52:26	1:31:47	0:51:39	0:46:22	0:50:56	0:48:29	0:38:14	0:36:24	0:37:49	0:34:07	0:33:36
3.3 Caller Discontinued*	5%	0.3%	0.4%	0.5%	1.1%	0.4%	0.4%	0.4%	0.3%	0.3%	0.2%	0.3%	0.2%	0.3%
4. Digital	Target	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25
4.1 NHS inform Website	N/A	7,866,153	8,577,286	7,023,359	6,446,246	6,692,171	5,729,510	5,696,752	4,542,185	3,268,031	1,765,997	1,713,222	1,760,364	2,105,040
4.2 Webchat (4 services)	N/A	1,529	1,730	1,496	1,282	1,533	1,249	1,170	1,132	1,258	1,191	1,340	1,311	1,223
4.3 NHS 24 App (Self Help Guide selection)	N/A	5,393	7,394	5,900	6,978	6,948	6,053	6,291	6,146	6,312	6,426	5,947	5,978	6,050
5. Staff Experience	Target	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25
5.1 Staff attendance	96%	91%	91%	91%	88%	89%	91%	91%	92%	92%	92%	92%	91%	91%
5.2 Engagement index	77	77	77	77	77	77	77	77	77	77	79	79	79	79
* Excludes Phase 1 A&A data														



# 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

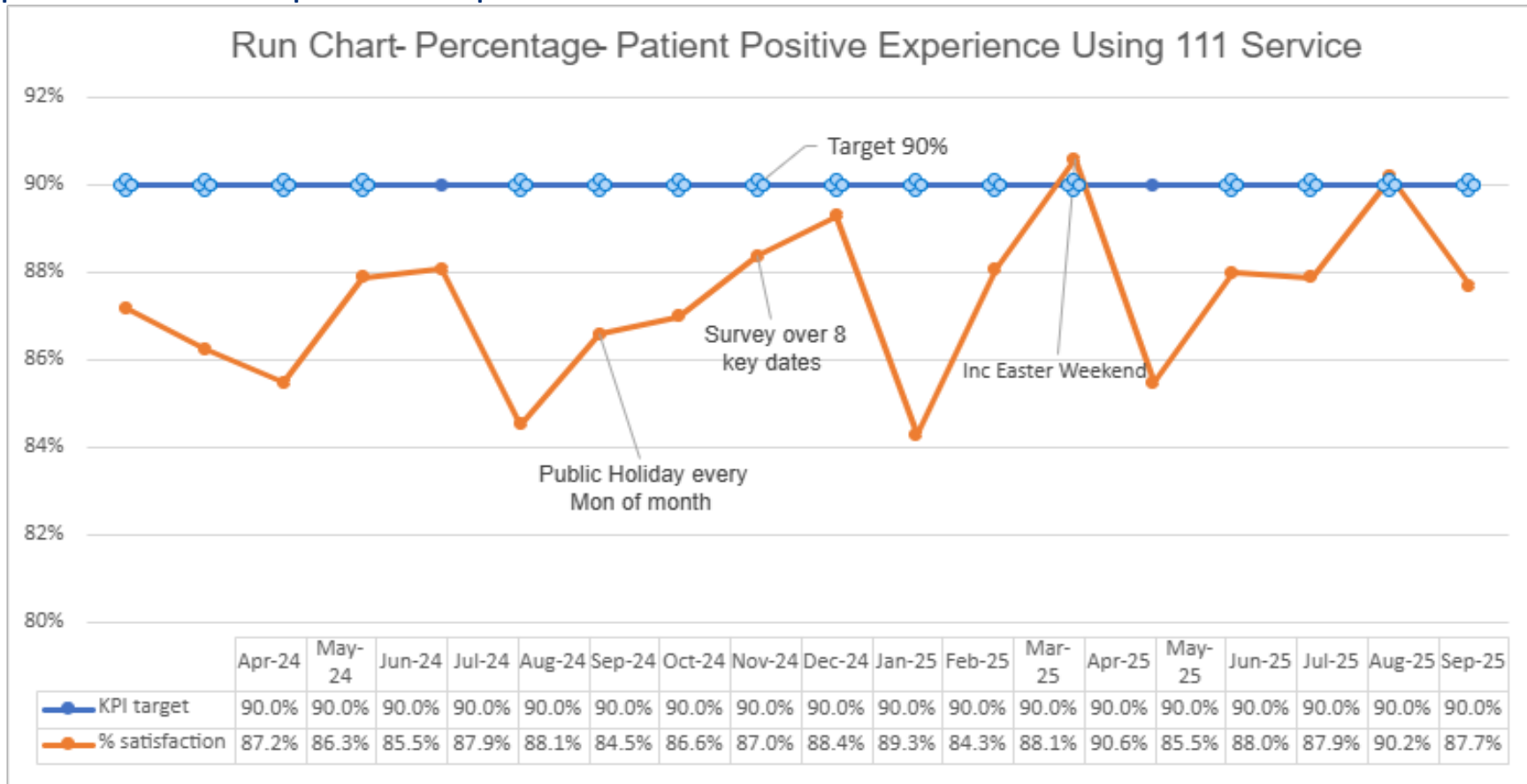
Reflects stated preference of callers and key system partners with calls being triaged on initial inbound calls. Results in no further delays through NHS 24 or repetition of questions to patient.

## 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 standardised 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.
- 19,950 survey links sent – 2,421 respondents (12% response rate).
- **88%** of patients noted a positive experience.



# Complaints / Patient Feedback

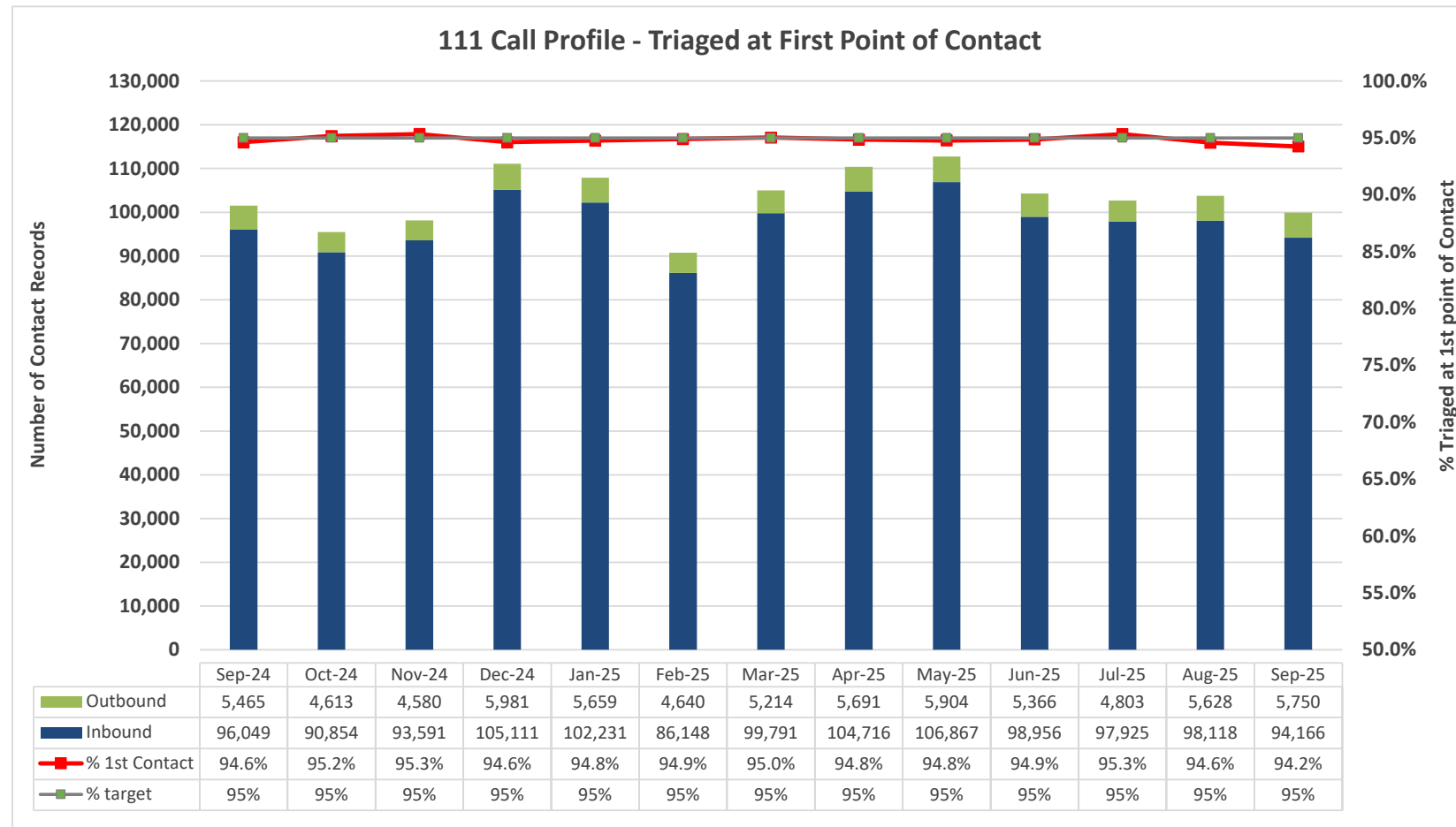
In total there were **95** items of patient feedback:

- Complaints responded to % on framework is reported one month in lieu, due to response target time of 20 working days. There were **4** stage 2 complaints, all four were closed on time.
- In total there were **23** complaints received which represents 0.02% of total demand.

Feedback Type	September 2025 Activity Received
Stage 2 Complaints	7
Stage 1 Complaints	16
Stage 1 to Stage 2 Complaints	0
Shared Complaints	4
Comments	13
Enquiries	0
Compliments	32
Non NHS 24 Issue	24
Total	95

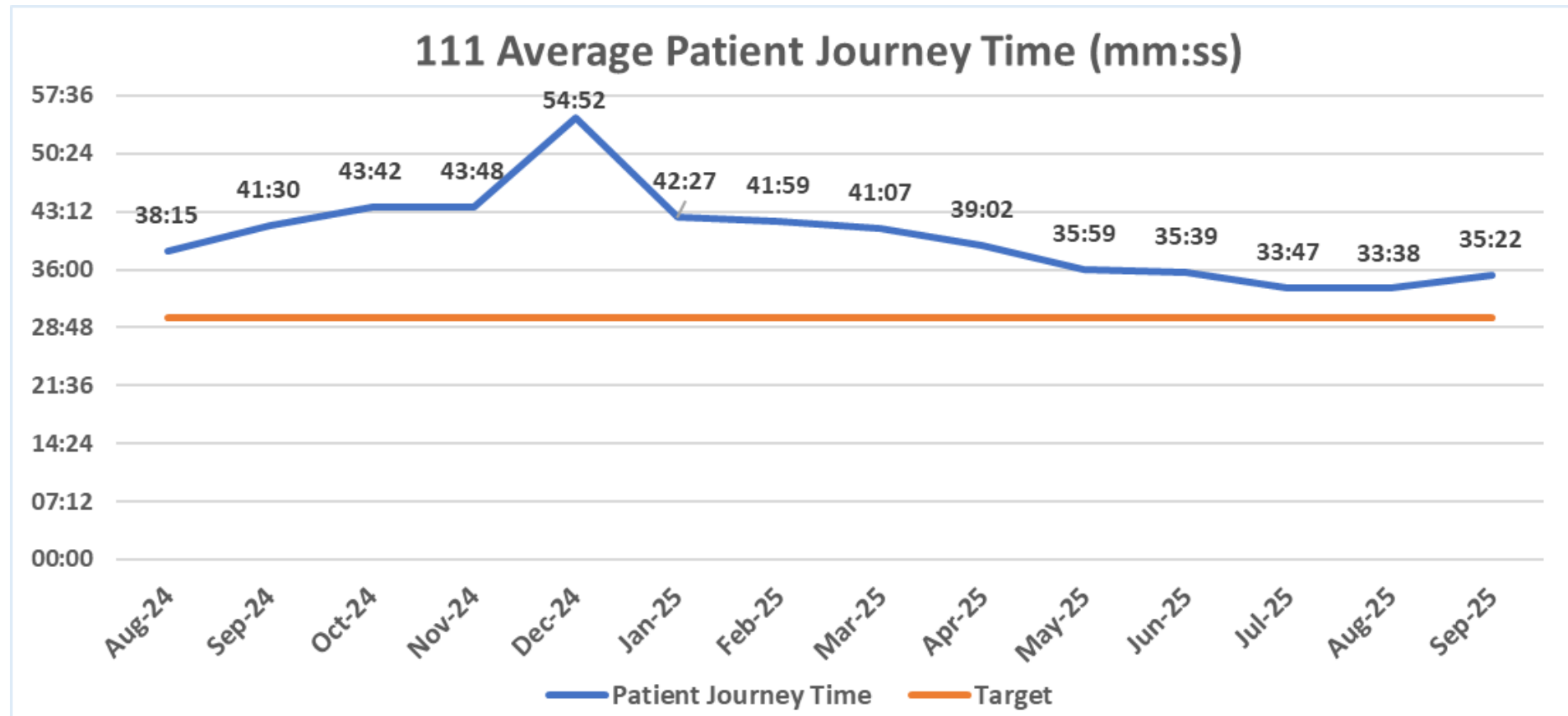
# Triaged at First Contact

- Measurement monitors the percentage of calls which are triaged from initial inbound contact.
- Scottish Emergency Dental Service continues to make outbound calls – and is the main driver of outbound calls – small proportion of Pharmacy calls also managed via outbound.
- Triaged at first contact – **94.2%** (*please note figure does not include Phase 1 data*).



# 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 time rose for the first time in nine months to **35 minutes 22 seconds**, an increase of 1 minute 44 seconds and the highest time in 3 months. ***Please note this figure does not include Phase 1 calls.***



# 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

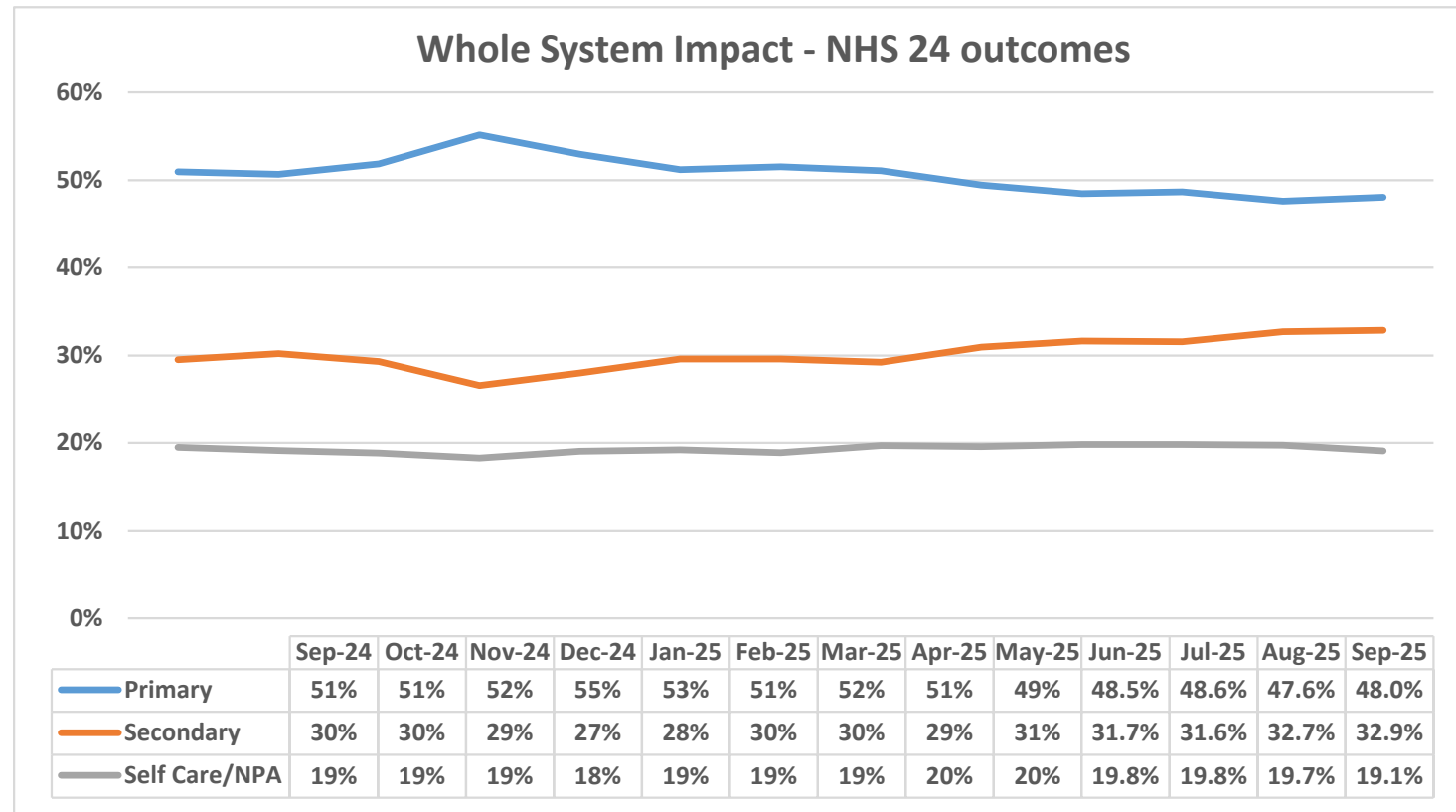
Secondary care outcomes include referrals to Accident & Emergency, 999 and Flow Navigation Centres.

## 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.

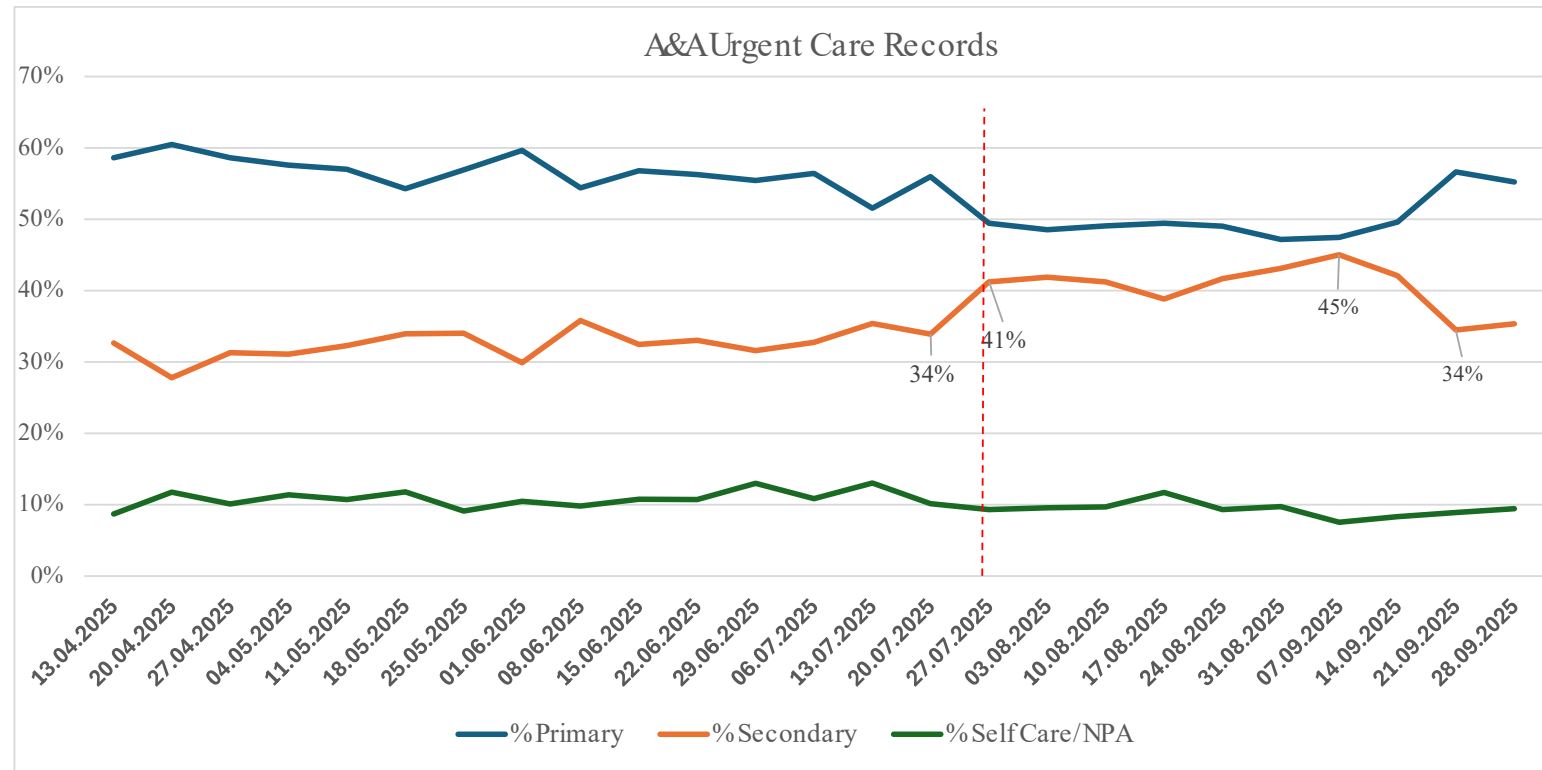


# Whole System Impact



- **Primary Care – 48%**, the most commonly used endpoint Urgent Care Centre (OOH GP) increased for the first time in six months, up 0.9 pts to 28.3%.
- **Secondary Care – 33%**, 999 rose by 0.3 pts to a 10 month high of 9.1%. FNC (12.5%) and A&E (11.4%) both remains consistent compared to previous month.
- **Self Care/NPA – 19%** - Self Care (10.6%) and Dental (5.8%) show small decreases but remain consistent throughout 2025.

# Phase 1 Whole System Impact



- Phase 1 remains consistent with A&A data and Unwell/A&E pathways available only.
  - September saw a notable reduction in Secondary Care outcomes, There was an 11 percentage point decrease from w/e 7<sup>th</sup> September to w/e 21<sup>st</sup> September.
  - Call Type Urgent Care excludes Mental Health and Dental in BAU, therefore a like for like comparison can be made with Phase 1 records in September.:
    - BAU Secondary Care – 36%
    - A&A Secondary Care – 39%\*
- \*Note small number of A&A records exist in SAP

# 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 90<sup>th</sup> Percentile Time to Answer**

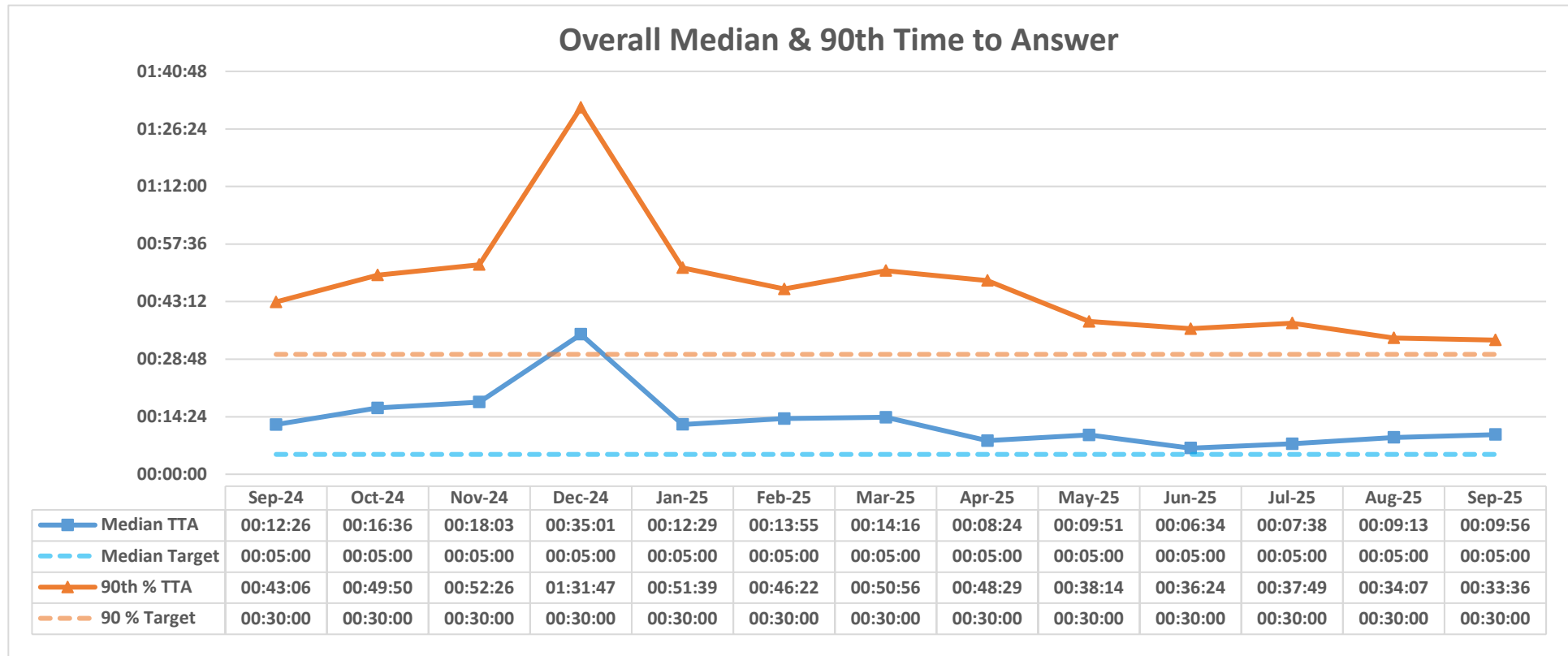
Measure tracks the longer wait times. 90<sup>th</sup> percentile provides the time where 90% of patients have been answered within (target 30 minutes)

## **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 5 minutes.

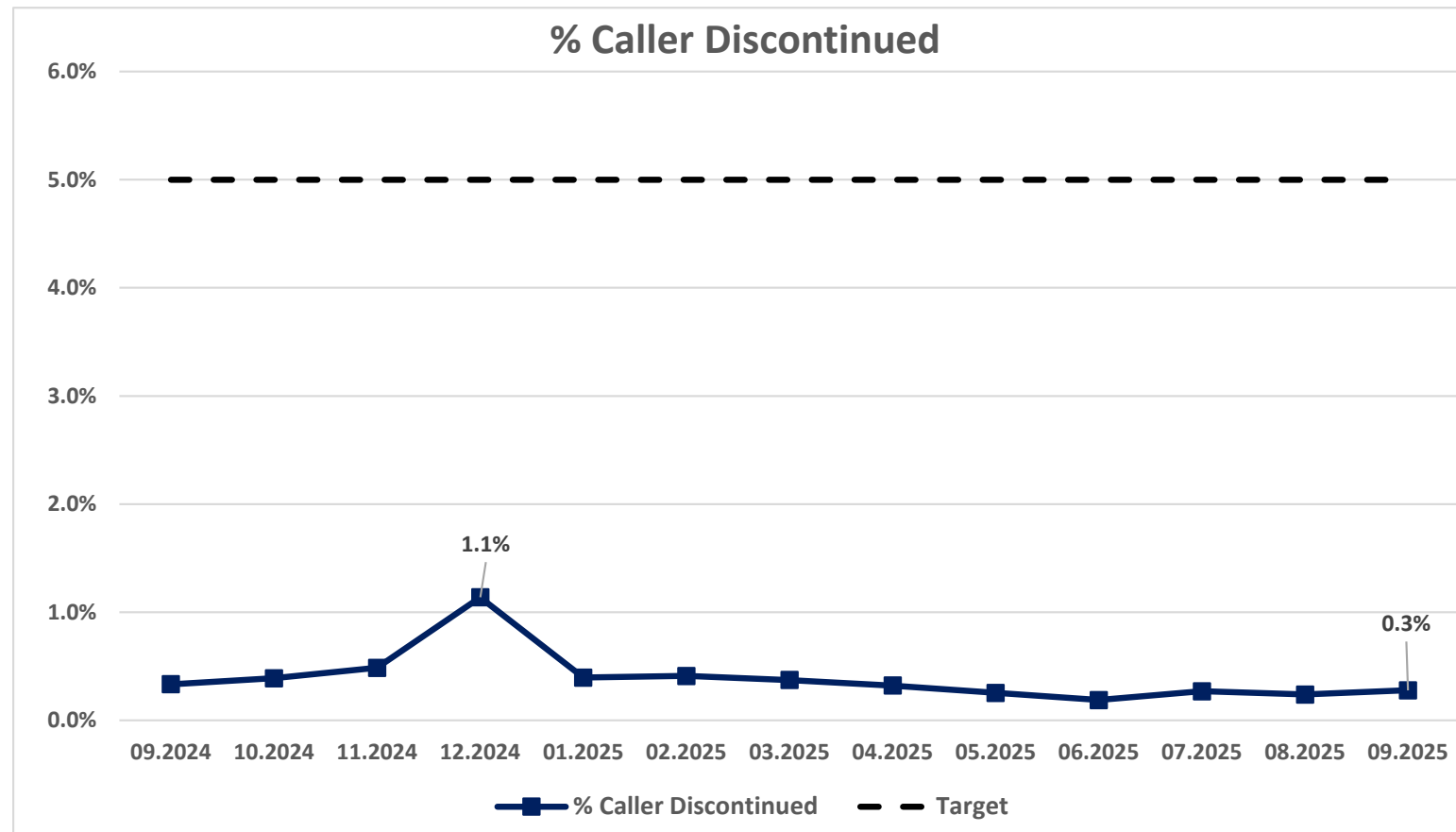
# Median & 90<sup>th</sup> Percentile

- Time to answer measures include patients who select virtual queue option. *Figures below do not include Phase 1 calls.*
- Median Time to Answer – increased by 43 seconds to **9 minutes 56 seconds**, however this is 2 minutes 30 seconds lower than September 2024.
- 90<sup>th</sup> Percentile Time to Answer missed target at **33 minutes 36 seconds**, is a 31 seconds improvement on last month and 9 minutes 30 seconds lower than last year.



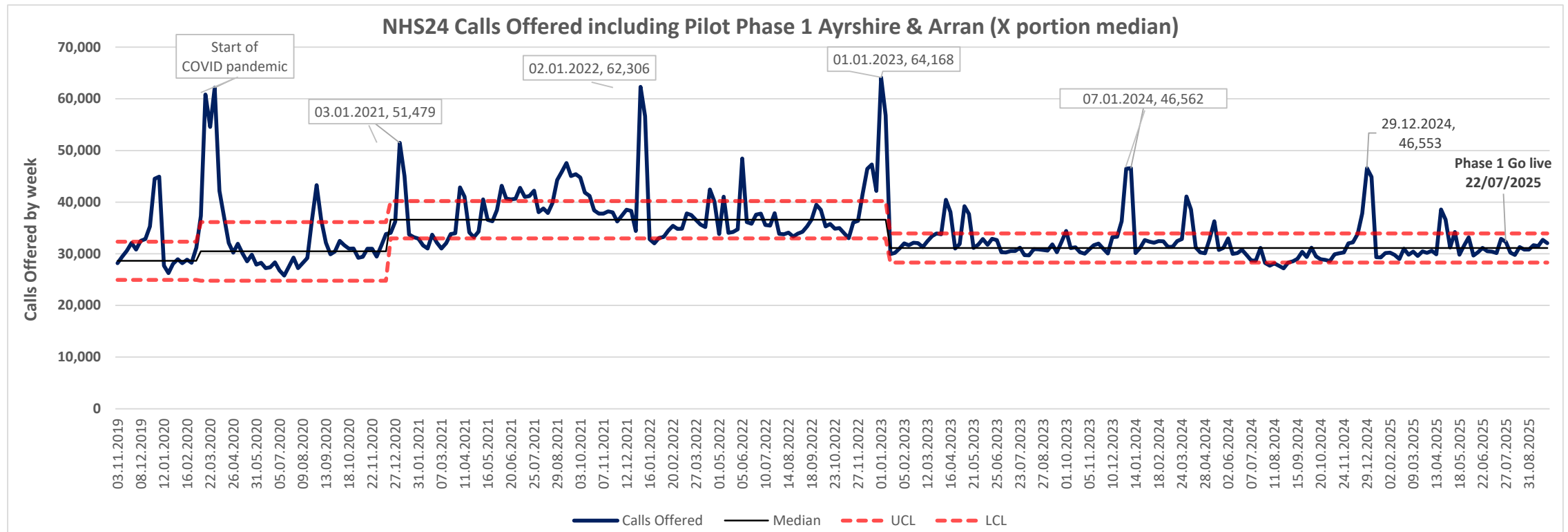
# Caller Discontinued

- 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.
- Measure consistently within target – **0.3%** (*figure does not include Phase 1 calls*).
- Equates to **264** patients who made at least two attempts to contact service with no answer.



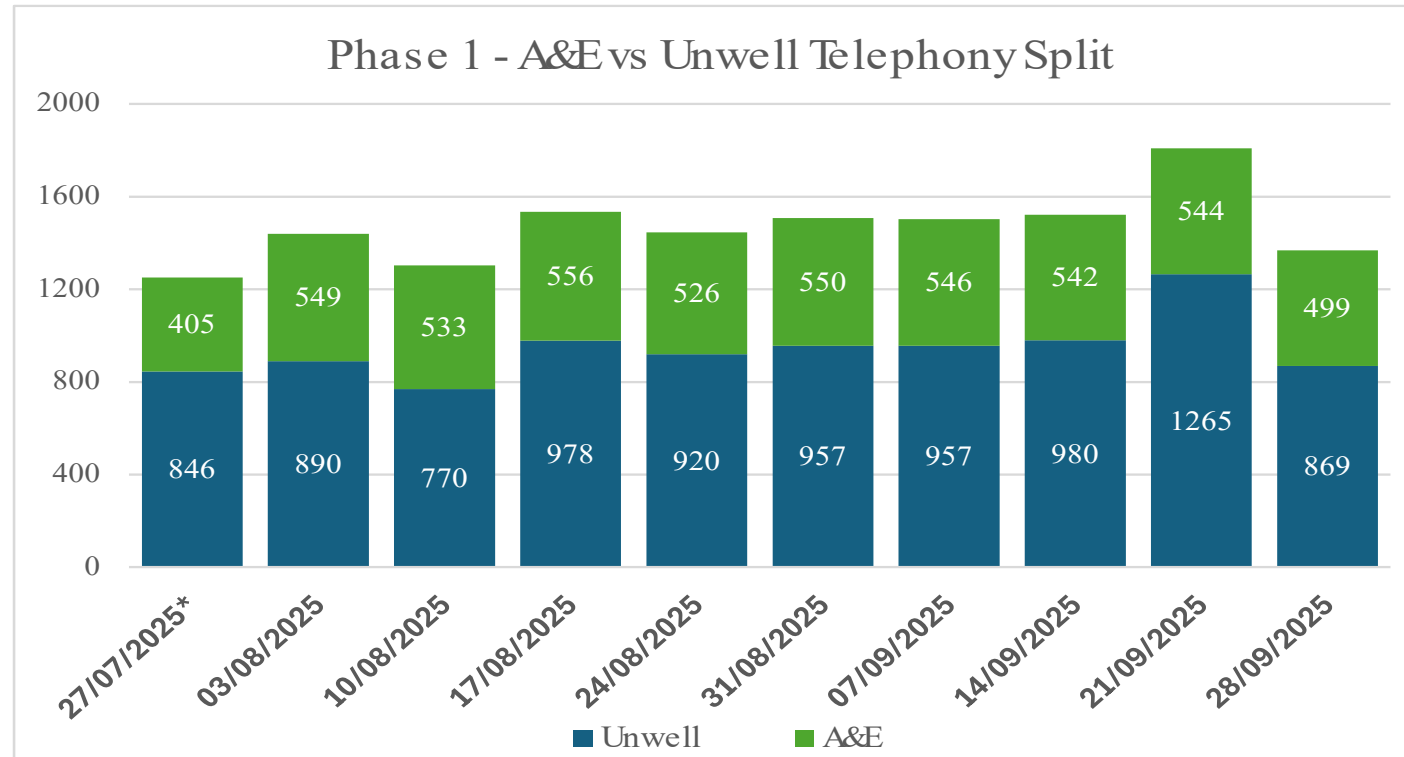
# Inbound Call Volumes – Control Chart

- 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 31,109 calls offered per week, September average was 3% higher at 31,968.
- All four weeks in September were above median, with week ending 21<sup>st</sup> at 32,697, 6% over.





# Phase 1 Call Volumes (inc Virtual Queue)



\*go-live - Tuesday 22<sup>nd</sup> July

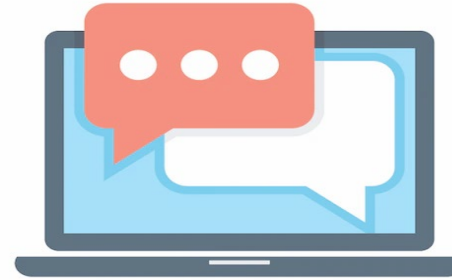
- Volumes by pathway cannot be split by Health Board in current system, therefore comparisons of previous A&E/Unwell volumes in A&A is not possible.
- Weekly volume in September ranging from 1,368 (w/e 28<sup>th</sup>) to 1,809 (w/e 21<sup>st</sup>)
- Week ending 21<sup>st</sup> September A&A had a Public Holiday which accounts for higher volume.
- % pathway split has remained consistent for last 3 weeks 66% Unwell to 34% A&E.
- Virtual Queue demand accounts for 6% of overall volume – due to low wait times to access service on new system.

# Digital Access



NHS inform – 2.11 million page views – 20% increase on previous month.

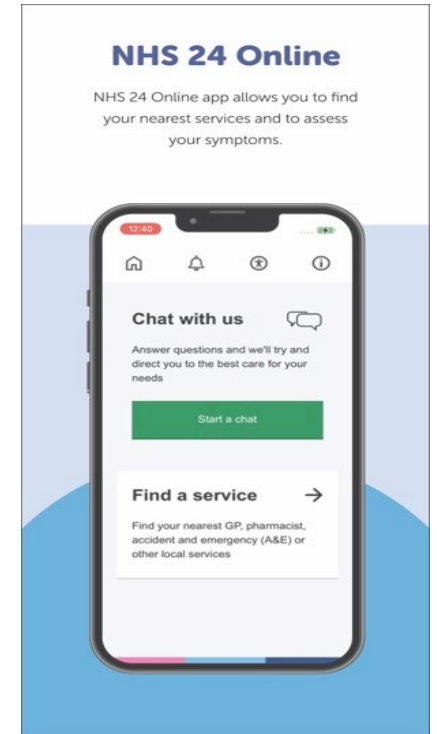
A cookie control issue has now resulted in users being able to reject tracking cookies. This was to ensure compliance with ICO but has resulted in a notable decline in activity on websites in addition to impact of AI snippets within search engines.



WEB CHAT

- 1,223 webchats answered
- NHS inform (594)
  - Breathing Space (565)
  - Quit Your Way Scotland (43)
  - Care Info Scotland (21)

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



NHS 24 app – 6,050 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%.

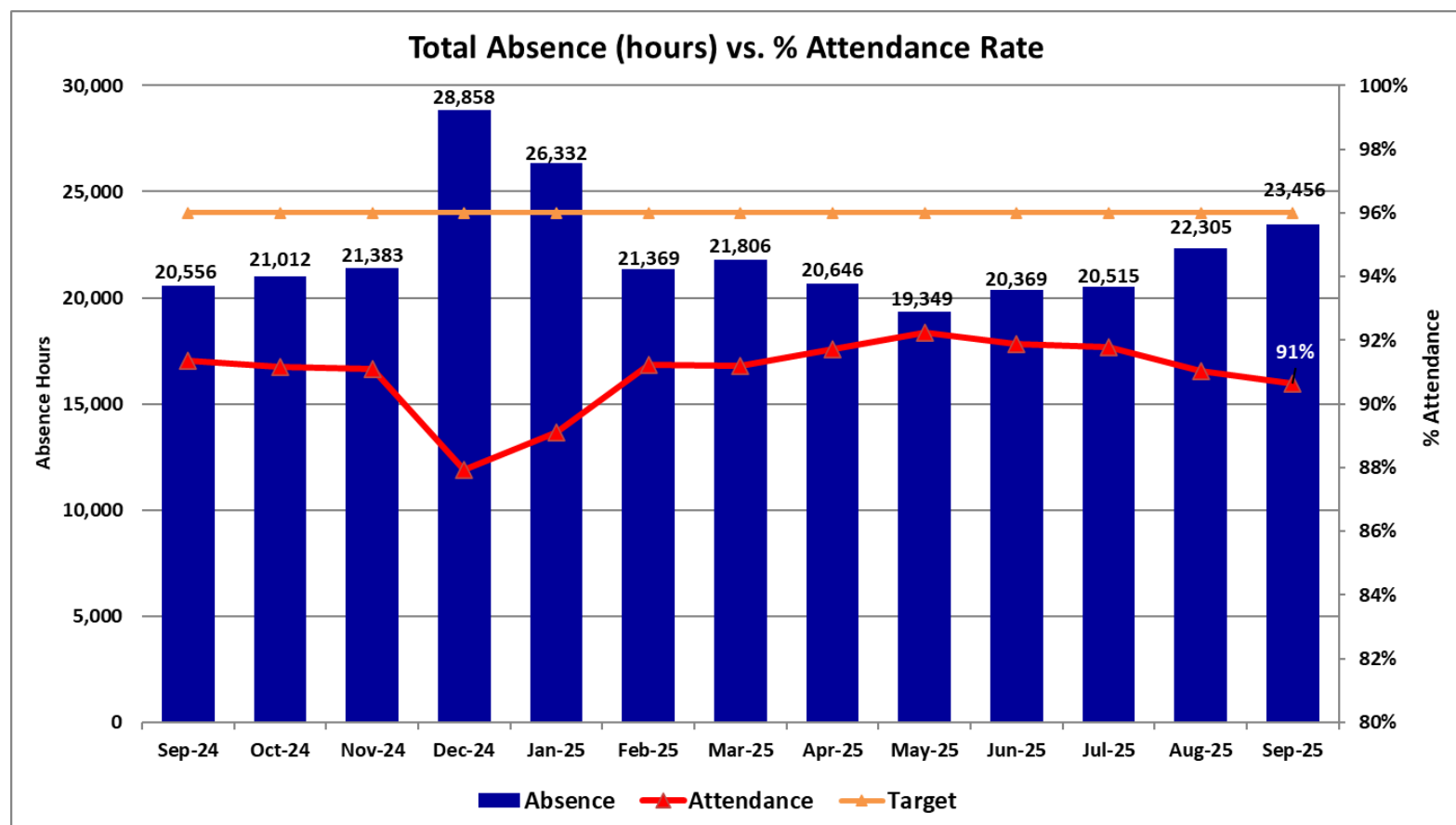
## 5.2 Engagement Index

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.

i-matter for 2025/26 – 79 – an improvement on previous years score (77)

## Summary

- Attendance shows a slight decrease at **91%** against a 96% target, lowest percentage achieved since January (89%)
- Total absence hours in September was **23,456**, the highest number of hours since January 2025.
- Majority of skillsets experienced month on month increases, however Clinical Supervisor % saw a small decrease to 14.0%. Call Handler increased to 12.1%, up 1.4 pts,.





**The care behind  
your care.**