

Monthly performance statistics, December 2016

Performance statistics for December 2016 were released at 9.30am on Thursday 9 February 2017 covering the following:

- the NHS 111 service;
- ambulance quality indicators;
- A&E attendances and emergency admissions;
- waiting times for diagnostic tests, referral to treatment for consultant-led elective care, cancer services;
- delayed transfers of care; and
- Early Intervention in Psychosis (EIP).

This document provides an overview of those results. More detail can be found within each individual release.

The long-term trend is one of greater volumes of both urgent and emergency care and elective activity, with ambulance calls receiving a face-to-face response up 7.6%, A&E attendances up 5.0%, emergency admissions up 3.6%, diagnostic tests up 5.0% and consultant-led treatment up 4.5%.

In the case of urgent and emergency care in December 2016, the NHS constitution standards were not met for Category A ambulance responses (where applicable) or for A&E waiting times.

In the case of elective care, the standards were met for seven of the eight cancer standards, but not for referral to consultant-led treatment within 18 weeks, diagnostic tests, or 62-day wait from urgent GP referral to treatment for cancer.

Urgent and Emergency Care

NHS 111

- In December 2016, there were 1,476,826 calls offered to the NHS 111 service in England, 8% more than December 2015 (1,362,161).
- The proportion abandoned after waiting longer than 30 seconds was 3.8%, less than in December 2015 (4.4%).
- Of calls answered by NHS 111, 86.0% were answered within 60 seconds, similar to 86.1% reported in December 2015.
- Of calls answered, 21.9% were transferred to a clinical advisor, similar to 22.2% (revised from 21.6%) in November 2016.
- Of calls answered, 13% were offered a call back.
- Of call backs offered, 38% were within 10 minutes, similar to November 2016 (39%, revised from 38%).

- Of calls triaged, 13% had ambulances dispatched, 8% were recommended to A&E, 61% were recommended to primary care, 4% were recommended to another service and 14% were not recommended to attend any other service.

Ambulance response times

In England, since June 2016, only eight of the eleven Ambulance Services, covering 70% of the population, still use the Red 1 and Red 2 classification. In those eight Trusts in December 2016:

- 66.4% of Red 1 calls had an emergency response within 8 minutes. The standard of 75% was last met in May 2015.
- 58.8% of Red 2 calls had an emergency response within 8 minutes. The standard of 75% was last met in January 2014.
- 87.7% of Category A calls had an ambulance response within 19 minutes. The standard of 95% was also last met in May 2015.

A&E attendances

- There were 1,943,580 attendances at A&E in December 2016, 4.1% more than in December 2015. Attendances over the latest twelve months are higher than levels in the preceding twelve month period (an increase of 5.0%).
- 86.2% of patients were admitted, transferred or discharged from A&E within four hours of arrival, below the 95% standard.
- The standard of 95% of patients spending 4 hours or less in A&E was last achieved in July 2015

Emergency admissions

- There were 497,915 emergency admissions in December 2016, 2.1% more than in December 2015. Emergency admissions over the last twelve months are up 3.6% on the preceding twelve month period.

Elective Care

Diagnostic tests

- A total of 1,639,337 diagnostic tests were undertaken in December 2016, an increase of 7.4% from December 2015 (adjusted for working days). The number of tests conducted over the last twelve months is up 5.0% (adjusted for working days) on the preceding twelve month period.
- 1.7% of the patients waiting at the end of the month had been waiting six weeks or longer from referral for one of the 15 key diagnostic tests, higher than the standard of 1%. The 1% operational standard was last met in November 2013.

Referral to treatment for consultant-led elective care

- 1,173,505 patients started consultant-led treatment in December 2016. The figure for the latest twelve months is up 4.5% on the preceding twelve month period (including estimates for trusts not submitting information and taking account of working days).
- 89.7% of patients on the waiting list at the end of December 2016 had been waiting less than 18 weeks, thus not meeting the 92% standard.
- 1,228 patients were waiting more than 52 weeks at the end of December 2016.

Cancer services

- Seven of the eight cancer standards were met.
- The 85% standard for 62 day cancer waiting times was not met, with 83.0% of patients beginning a first definitive treatment within 62 days from an urgent GP referral for suspected cancer.

Delayed transfers of care

- There were 195,286 delayed days in December 2016, compared to 154,008 in December 2015.
- There were 6,191 patients delayed at midnight on the last Thursday of December 2016.

Mental Health

- The EIP access and waiting time standard requires that, from 1 April 2016, more than 50% of people experiencing First Episode Psychosis (FEP) are treated with a NICE-recommended package of care within two weeks of referral. The data summarised here relates to the waiting time element of the standard.
- 74.4% of patients started treatment within two weeks in December 2016 (816 out of 1,097 patients started treatment within two weeks)
- The number of patients waiting to start treatment (incomplete pathways) was 1,083 at the end of December 2016. Of these 693 were waiting for more than two weeks.
- Providers are continuing to work on data quality, and issues identified by them may ultimately impact on performance against the standard – single month's data should therefore be treated with caution.
- This collection of data via Unify2 is an interim measure and is intended to continue until data collected by NHS Digital via the Mental Health Services Dataset is considered to be robust.

Further information

More detail can be found within each individual release, available at:
www.england.nhs.uk/statistics/statistical-work-areas.

We welcome feedback on the content of this summary. If you have any comments or further information about the published statistics, please contact us at:

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