

Monthly performance statistics, July and August 2017

NHS England published the following performance statistics at 9.30am on Thursday 14 September 2017.

August 2017 data:

- the NHS 111 service;
- A&E attendances and emergency admissions.

July 2017 data:

- ambulance quality indicators;
- 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).

April-June 2017 data:

- NHS Continuing Healthcare and NHS-funded Nursing Care.

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 3.3%, A&E attendances up 0.9%, emergency admissions up 2.4%, diagnostic tests up 4.6%, consultant-led treatment up 5.0%, and calls offered to NHS 111 up 2.7%.

In the case of urgent and emergency care, the NHS constitution standards were not met for Category A ambulance responses (where applicable) in July 2017, or for A&E waiting times in August 2017.

In the case of elective care in July 2017, the standards were met for seven of the eight cancer standards, but not for diagnostic tests, or referral to consultant-led treatment within 18 weeks.

Urgent and Emergency Care

NHS 111

- There were 1,165,310 calls offered to the NHS 111 service in August 2017 (an average of 37.6 thousand per day).
- For the year ending August 2017, there were 15.0 million calls offered. Per day, this was 41.1 thousand, a 2.7% increase on the previous twelve months.

- The proportion abandoned after waiting longer than 30 seconds was 1.2% in August 2017, the lowest proportion since October 2014.
- 92.7% of calls were answered within 60 seconds in August 2017, the highest proportion within the last 12 months.
- Of calls answered, the proportion that received any form of clinical input¹ was 36.4% in August 2017, the ninth month in a row that it has increased on the previous month.
- Of calls answered, 22.9% were transferred to or answered by a clinical advisor using NHS Pathways, the same as both June and July 2017.
- Of calls answered, 13% were offered a call back, and of call backs, 46% were within 10 minutes.
- Of calls triaged, 13% had ambulances dispatched, 9% were recommended to A&E, 59% were recommended to primary care, 5% were recommended to another service and 14% were not recommended to attend any other service.

A&E attendances

- There were 1,924,103 attendances at A&E in August 2017, 0.5% fewer than in August 2016. Attendances over the latest twelve months are higher than levels in the preceding twelve month period (an increase of 0.9%).
- 90.3% of patients were admitted, transferred or discharged from A&E in August 2017 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 486,669 emergency admissions in August 2017, 3.4% more than in August 2016. Emergency admissions over the last twelve months are up 2.4% on the preceding twelve month period.

Ambulance response times

In England, by June 2016, three of the eleven Ambulance Services, covering 30% of the population, had switched from the Red 1 and Red 2 classification. On 19 July 2017, East Midlands Ambulance Service became the fourth to switch, and has supplied no data beyond 18 July 2017.

For calls categorised using the Red 1 and Red 2 classification in July 2017:

¹ This data item is an experimental statistic and may change markedly as providers develop their calculation methods.

- 67.9% of Red 1 calls had an emergency response within 8 minutes. The standard of 75% was last met in May 2015.
- 60.5% of Red 2 calls had an emergency response within 8 minutes. The standard of 75% was last met in January 2014.
- 89.7% of Category A calls had an ambulance response within 19 minutes. The standard of 95% was also last met in May 2015.

The last full year of data showed 6,953,497 incidents or 19.1 thousand per day receiving a face-to-face response in the year ending July 2017. A comparison of the year ending July 2017 with the previous year, excluding relevant months for trusts with incomplete data, shows that per day, such incidents increased 3.3%.

Elective Care

Diagnostic tests

- A total of 1,848,216 diagnostic tests were undertaken in July 2017, an increase of 0.4% from July 2016 (adjusted for working days). The number of tests conducted over the last 12 months is up 4.6% (adjusted for working days) on the preceding 12 month period.
- 1.8% 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

- 1,331,968 patients started consultant-led treatment in July 2017. The figure for the latest twelve months is up 5.0% on the preceding twelve month period (including estimates for trusts not submitting information and taking account of working days).
- 89.9% of patients on the waiting list at the end of July 2017 had been waiting less than 18 weeks, thus not meeting the 92% standard.
- 1,630 patients were waiting more than 52 weeks at the end of July 2017.

Cancer services

- Seven of the eight cancer standards were met.
- The 85% standard for 62 day cancer waiting times was not met, with 81.4% of patients beginning a first definitive treatment within 62 days from an urgent GP referral for suspected cancer.

Delayed transfers of care

- There were 181,692 delayed days in July 2017, compared to 184,578 in July 2016.

- This equates to a daily average of 5,861 DTOC beds in July 2017, compared to 5,954 in July 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.
- 74.9% of patients started treatment within two weeks in July 2017 (824 out of 1,100 patients started treatment within two weeks)
- The number of patients waiting to start treatment (incomplete pathways) was 1,186 at the end of July 2017. Of these 642 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 months' 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.

NHS Continuing Healthcare and NHS-funded Nursing Care

- The total number of Decision Support Tools completed for the Standard NHS CHC assessment route was 15,005 in Q1 2017/18. Of these, 4,000 (27%) were completed in an acute hospital setting
- Of the 18,453 Standard NHS CHC referrals completed in Q1 2017/18, 10,595 (57%) were completed within 28 Days
- The number of incomplete referrals exceeding 28 days was 9,547 as at the last day of Q1 2017/18. Of these: 1,262 exceeded by up to 2 weeks; 970 exceeded by more than 2 weeks and up to 4 weeks; 2,254 exceeded by more than 4 weeks and up to 12 weeks; 1,790 exceeded by more than 12 weeks and up to 26 weeks; 3,271 exceeded by more than 26 weeks
- The total number of people eligible for NHS CHC was 57,165 as at the last day of Q1 2017/18. Of these, 40,015 were eligible via the Standard NHS CHC assessment route and 17,150 were eligible via the Fast Track assessment route
- The Fast Track referral conversion rate was 95% in Q1 2017/18
- The Standard NHS CHC assessment conversion rate was 31% in Q1 2017/18
- The total number of people eligible for NHS-funded Nursing Care was 79,378 as at the last day of Q1 2017/18.

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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