NHS performance statistics

This monthly release aims to provide users with an overview of NHS performance statistics in key areas. Official statistics are designed to give informative and impartial information about the performance of the NHS.

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Key statistics

Accident and Emergency
- In the last 12 months there has been a 0.5% growth in the number of people attending A&E and a 2.9% growth in the number of people admitted to hospital as an emergency. There were over 23.6m attendances to A&E in the last twelve months and 5.9m emergency admissions to hospital.
- In December 2017, 85.1% of patients were seen within 4 hours compared with 86.2% in December 2016.

Ambulances
- The number of telephone calls answered on 999 emergency lines in England in December 2017 was 714,300, or 23,000 per day.
- The mean average response time during December 2017 for Category C1 was 8 minutes and 52 seconds.

Delayed Transfers of care
- In November 2017 patients spent a total of 155,100 extra days in hospital beds waiting to be discharged, compared to 193,200 in November 2016.
- This equates to an average of 5,169 beds occupied each day in November 2017 by a patient subject to a delayed transfer of care, compared to 6,440 in November 2016.

Referral to treatment
- Almost 16 million patients started treatment in the last 12 months. This represents a 4.5% increase on the previous year.
- At the end of November 2017, there were 3.7m people on the waiting list for treatment. The

waiting list has increased by 4.2% when compared to a year earlier. At the end of November 2017, of those waiting, 89.5% had been waiting for 18 weeks or less, a fall from 90.5% in November 2016.

NHS Continuing Healthcare and NHS-funded Nursing Care
- The total number of Decision Support Tools (DSTs) completed for the Standard NHS CHC assessment route was 15,889 in Q2 2017/18. Of these, 3,765 (24%) were completed in an acute hospital setting.
- Of the 18,497 Standard NHS CHC referrals completed in Q2 2017/18, 10,779 (58%) were completed within 28 days.

Cancer waiting times
- There has been a 4.6% increase in the number of patients seen following an urgent GP referral in the last 12 months compared to the preceding 12 months. As well as a 3.2% increase in those starting first definitive treatment for a new primary cancer and a 4.3% increase in those receiving a first treatment for cancer following an urgent referral for cancer.
- In November 2017, 95.1% of people were seen by a specialist within two weeks of an urgent GP referral for suspected cancer, 97.6% started a first definitive treatment for a new primary cancer and 82.5% of people received a first definitive treatment for cancer following an urgent GP referral for suspected cancer within 62 days.

Early intervention in Psychosis
- There were over 1,380 patients waiting to start treatment at the end of November 2017. In November 2017 72.3% of patients experiencing First Episode Psychosis (FEP) started treatment within two weeks of referral.

Improving Access to Psychological Therapies
- 51.1% of patients referred to IAPT services recovered in September 2017, against a target of 50.0%. The proportion recovering increased by 1.5 percentage points between the complete years of 2014-15 and 2015-16.
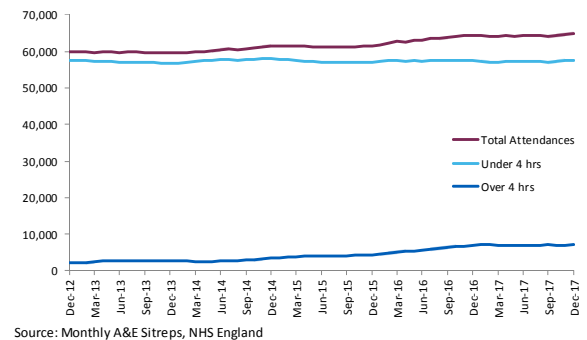
Urgent and emergency care

Access

Accident and Emergency

- There were 2.016m attendances in December 2017, 3.7% more than in December 2016. Attendances in the last 12 months were 0.5% higher than the preceding 12 month period.

- The number of attendances admitted, transferred or discharged within 4 hours was 1.715m (85.1% of the total). This is a 2.4% increase on the equivalent figure for December 2016 (1.676m seen within 4 hours).

- The number of patients seen in over 4 hours was 300,914 compared to 268,818 in December 2016, an increase of 11.9%.

No of attendances per day - 12 month rolling average

Source: Monthly A&E Sitreps, NHS England

- There were 520,000 emergency admissions in December 2017, 4.5% more than in December 2016. Admissions in the last 12 months period were up 2.9% on the preceding 12 month period.

- Publication of weekly winter data commenced on 7 December, further details can be found at www.england.nhs.uk/statistics/statistical-work-areas/winter-daily-sitreps.

NHS 111

- There were 1.68m calls in England in December 2017, 13.5% more than in December 2016. This is the largest number of calls offered in a month since data was first collected in August 2010. There were 15.3m calls in the last 12 months, 1.9% more than the previous 12 months.

- Of calls offered to NHS 111 in December 2017, the proportion abandoned after waiting longer than 30 seconds was 7.2%, higher than in December 2016 (3.8%). Of calls answered by NHS 111 in December 2017, 72.7% were answered within 60 seconds, lower than in December 2016 (86.0%).

- Of calls answered, 39.4% were transferred to or answered by a clinician in December 2017. This is the highest proportion since this data was first collected in November 2016.
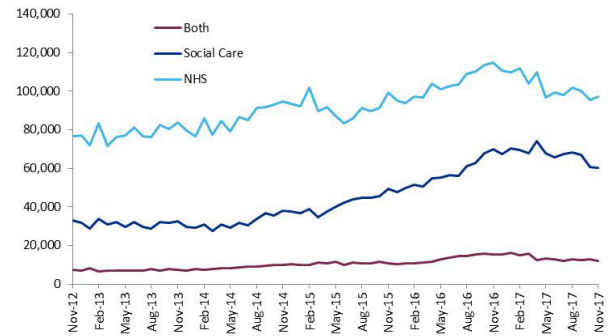
Ambulances

- For December 2017, South East Coast (SECAmb) and South Western (SWAS) Ambulance Services joined eight other Services in reporting consistently against the new Categories C1 to C4, which are described at www.england.nhs.uk/urgent-emergency-care/arp. Only the Isle of Wight still used and reported the old Red 1 and Red 2 categories, so all December 2017 Ambulance data below are for England excluding the Isle of Wight. Comparisons between November and December 2017 data only include data for the eight Ambulance Services that reported consistently in November.

- There were 747,400 incidents in England in December 2017, 24,100 per day, that either received a face-to-face response from an ambulance service or were resolved on the telephone. For the eight Services reporting consistently, December had 6.3% more incidents per day than November.

- The mean average response times in December 2017 were 8:52 for Category C1 and 29:41 for Category C2. For the eight Services reporting consistently, these times were 8:44 and 29:48 respectively, and were 10.8% and 31.7% respectively slower than in November 2017.

- For cardiac arrest patients who had resuscitation commenced or continued by an Ambulance Service in England in August 2017, the percentage discharged alive from hospital was 10.0%. This was not significantly different from the proportions in August 2016 (9.5%) or July 2017 (10.0%).

Quality

Delayed Transfers of Care

- There were 155,059 delayed days in November 2017, compared to 193,206 in November 2016. This is a decrease of 19.7%.

- These days equate to a daily average of 5,169 beds occupied by DTOC patients in November 2017 and 6,440 in November 2016. November 2017 has the lowest number of DTOC beds since January 2016, when the figure was 5,144.

- The proportion of delays attributable to NHS in November 2017 was 58.3%, up from 57.2% in November 2016. The remaining delays were attributed as follows: 34.0% Social Care (down from 34.8% in November 2016) and 7.6% Both (down from 8.0% in November 2016).
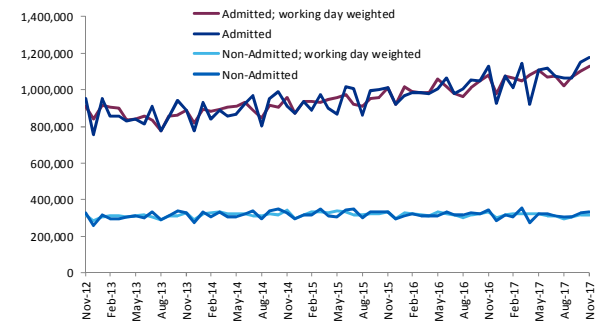
Access

Referral to treatment (RTT)

- 1.4m patients started consultant-led treatment in November 2017. There were 16.0m completed RTT pathways in the 12 months to November 2017. This is 677,000 more than the preceding 12 month period, an increase of 4.5% having taken account of working days and of trusts not submitting data.

- Of patients on the waiting list at the end of November 2017, 89.5% had been waiting less than 18 weeks, thus not meeting the 92% standard. This compares to 90.5% at the end of November 2016.

- The number of RTT patients waiting to start treatment at the end of November 2017 was 3.7 million, an increase of 4.2% over November 2016 (taking account of trusts not submitting information).

- The number of patients on the waiting list who were waiting under 18 weeks fell between November 2016 and November 2017 from 3.37m to 3.33m, and the number of patients waiting over 18 weeks rose from 354,000 to 392,000. This comparison will be affected by differences in the trusts not submitting information in each period.

- Of those, 1,452 patients were waiting more than 52 weeks. This compares to 1,234 in November 2016, and 1,147 patients five years ago (November 2012). This comparison will be affected by differences in the trusts not submitting information in each period.

Diagnostic tests

- 1.9m diagnostic tests were undertaken in November 2017, an increase of 4.9% on the previous year (adjusted for working days).

- The number of tests conducted over the last twelve months is up 4.9% (adjusted for working days) on the preceding twelve month period.

- 1.7% of the patients waiting for one of the 15 key diagnostic tests at the end of November 2017 had been waiting six weeks or longer from referral, compared to the 1% operational standard.
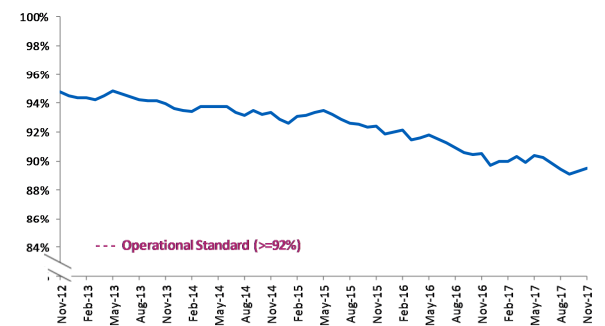
Number of patients starting RTT treatment

Including estimates for missing data

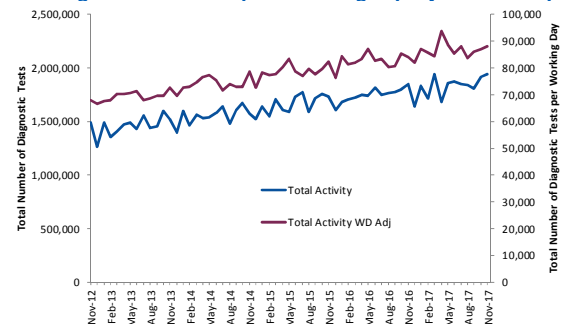Source: Consultant-led Referral to Treatment Waiting Times, NHS England

% incomplete pathways within 18 wks

Published figures, no adjustments for missing data

Source: Consultant-led Referral to Treatment Waiting Times, NHS England

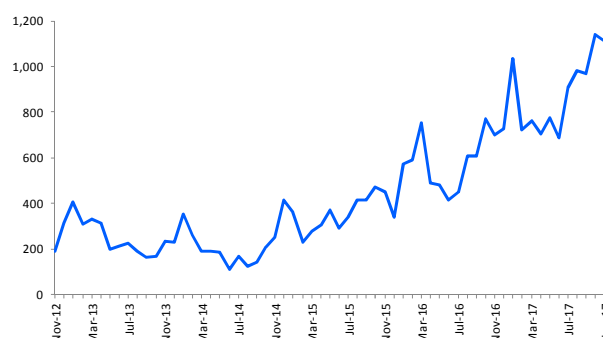**Total diagnostic test activity and working day adjusted activity**

Quality

Mixed Sex Accommodation

Statistics in this section are already in the public domain and are routinely published by NHS England.

- In November 2017, providers of NHS-funded healthcare reported 1,108 breaches of MSA guidance in relation to NHS patients in sleeping accommodation. This compares to 1,140 in October 2017 and 189 in November 2012.

- Of the 150 acute trusts that submitted data for November 2017, 103 (68.7%) reported zero sleeping breaches.

- The MSA breach rate in November 2017 was 0.7 per 1,000 FCEs, 0.7 in October 2017 and 0.1 in November 2012.

Total mixed sex accommodation breaches

Source: Mixed sex accommodation breaches, NHS England
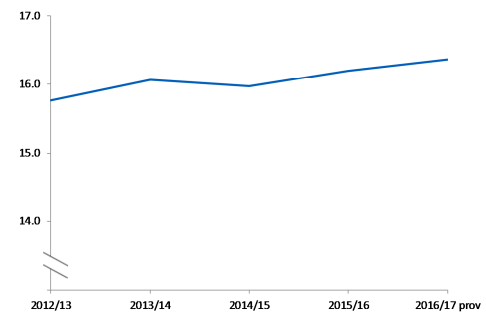
NHS Continuing Healthcare and NHS-funded nursing Care

- The total number of Decision Support Tools (DSTs) completed for the Standard NHS CHC assessment route was 15,889 in Q2 2017/18. Of these, 3,765 (24%) were completed in an acute hospital setting.

- Of the 18,497 Standard NHS CHC referrals completed in Q2 2017/18, 10,779 (58%) were completed within 28 days.

- The number of incomplete referrals exceeding 28 days was 7,576 as at the last day of Q2 2017/18. Of these: 1,145 exceeded by up to 2 weeks; 928 exceeded by more than 2 weeks and up to 4 weeks; 2,177 exceeded by more than 4 weeks and up to 12 weeks; 1,611 exceeded by more than 12 weeks and up to 26 weeks; 1,715 exceeded by more than 26 weeks.

- The total number of people eligible for NHS CHC was 57,153 as at the last day of Q2 2017/18. Of these, 39,906 were eligible via the Standard NHS CHC assessment route and 17,247 were eligible via the Fast Track assessment route.

- The Fast Track referral conversion rate was 96% in Q2 2017/18.

- The Standard NHS CHC assessment conversion rate was 28% in Q2 2017/18.

- The total number of people eligible for NHS-funded Nursing Care was 80,256 as at the last day of Q2 2017/18.

Patient Reported Outcome Measures (PROMs)

Statistics in this section are already in the public domain and are routinely published by NHS Digital.
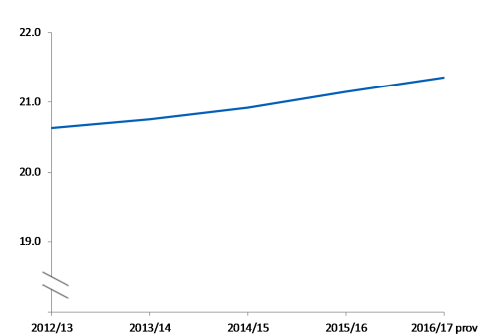
- PROMs assess the quality of care delivered to NHS patients for hip and knee replacements by using short, self- completed questionnaires before and after a procedure. Health gain on Oxford Hip and Knee Scores is measured from 0 (worst) to 48 (best), and is calculated by using the difference in scores from the pre- and post-operative questionnaires.

- The average health gain reported for hip and knee replacements has increased very slightly year on year over time, but the proportion of patients reporting improvement has largely remained unchanged.

- Participation in PROMs for hip and knee procedures has increased since PROMs was launched.

- Data for 2016/17 is provisional, with data added cumulatively until a final publication, due August 2018. This is due to post-operative questionnaires being sent out 6 months after the replacement procedure. Charts shown here contain all data returned to NHS Digital up to September 2017.

PROMs Knee Replacement Procedures, Average Health Gain, Oxford Knee Score

Source: Patient Reported Outcome Measures, NHS Digital

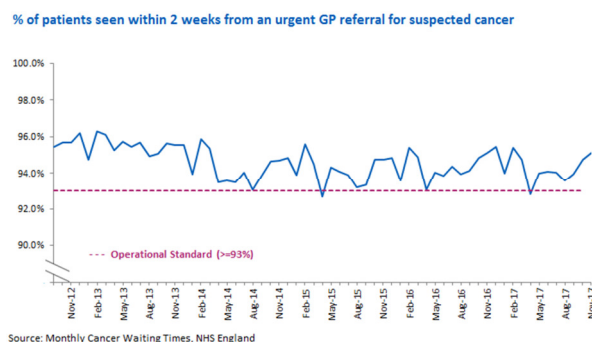**PROMs Hip Replacement Procedures, Average Health Gain, Oxford Hip Score**

Source: Patient Reported Outcome Measures, NHS Digital

Cancer

Access

Cancer waiting times

- Two week wait: 169,297 people were seen following an urgent referral for suspected cancer in November 2017. There were 1,913,531 people seen in the 12 months to November 2017, an increase of 4.6% (83,472 more patients) on the previous 12 month period.

- 95.1% of people in November 2017 were seen by a specialist within two weeks of an urgent GP referral for suspected cancer. The operational standard specifies that 93% of patients should be seen within this time.

% of patients seen within 2 weeks from an urgent GP referral for suspected cancer

Operational Standard (>=93%)

Source: Monthly Cancer Waiting Times, NHS England

- 31 day wait: 26,129 patients started a first definitive treatment for a new primary cancer in November 2017. There were 289,671 patients who received first treatments in the 12 months to November 2017, an increase of 3.2%, or 9,062 additional patients, on the previous 12 month period.

- 97.6% of patients in November 2017 received a first definitive treatment for a new primary cancer. The operational standard specifies that 96% of patients should be treated within this time.

- 62 day wait: 13,300 patients received a first treatment for cancer following an urgent GP referral in November 2017. There were 147,123 patients who received first treatments for cancer following an urgent GP referral in the 12 months to November 2017, an increase of 4.3%, or 6,015 additional patients, on the previous 12 month period.

- 82.5% of patients received a first definitive treatment for cancer following an urgent GP referral for suspected cancer within 62 days in November 2017, this equates to 10,970 patients being treated within the standard. The operational standard specifies that 85% of patients should be treated within this time.
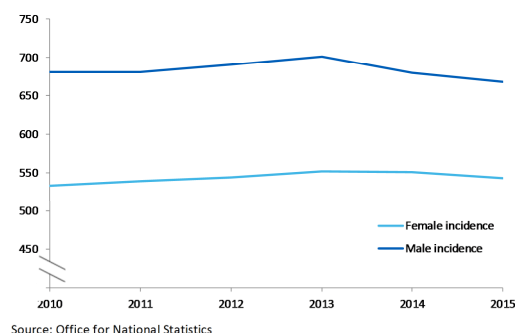
Cancer registrations

Statistics in this section are already in the public domain and are routinely published by the Office for National Statistics.

- Generally, cancer registrations have increased following advances in medicine which have resulted in an ageing population and improved detection of cancers. Advances in medicine and early detection of cancers have reduced the number of people dying from the disease.

- The number of new diagnosed cases of cancer in England continues to rise and in 2015 there were 299,900 cancers registered – equivalent to 822 per day. This has increased from 275,800 cancers registered
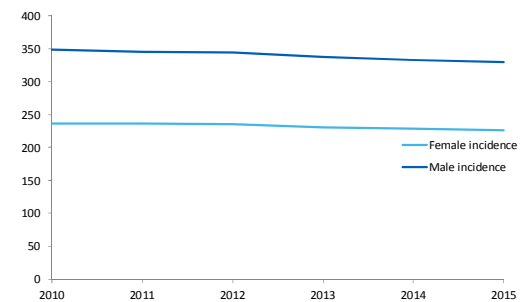
- Breast (15.4%), prostate (13.4%), lung (12.5%) and

Directly age-standardised rates per 100,000 people of newly diagnosed cases of cancer: England, 2010 to 2015

Female incidence
Male incidence

Source: Office for National Statistics

colorectal (11.6%) cancer continue to account for over half (53%) of the malignant cancer registrations in England for all ages combined.

- Since 2010, the age-standardised rates* of cancer registrations per 100,000 people have increased in females (from 532.8 to 542.8 per 100,000 females) but have fallen for males (from 680.3 to 667.4 per 100,000 males).

- Between 2010 and 2015, mortality rates, due to cancer, for both males and females fell - from 348.1 to 329.5 per 100,000 males and from 236.7 to 226.6 per 100,000 females.

Directly age-standardised rates per 100,000 people of deaths from cancer: England, 2010 to 2015
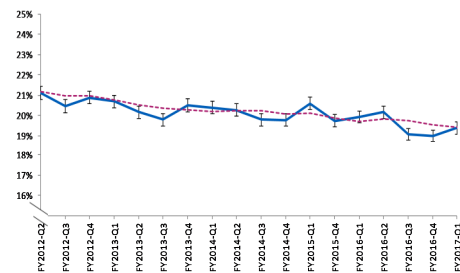

Source: Office for National Statistics

* The age-standardised rates are expressed per 100,000 population and are standardised to the European standard population 2013 (ESP 2013).

Cancer Emergency Presentations

Statistics in this section are already in the public domain and are routinely published by Public Health England.

- Between April and June 2017, of 65,888 cancer patients first presenting at hospital in England, 12,769 (19.4%) presented as an emergency.

- In England, the annual average proportion of cancer patients who first presented as an emergency has gradually fallen over the last five years reported, from 20.8% in July 2012 to June 2013 to 19.4% in July 2016 to June 2017.

Trend in the proportion of first hospital admissions that are emergencies in England

Source: National Cancer Registration and Analysis Service, Public Health England

- At CCG level, there was an approximate threefold variation in the proportion of cancer patients who first presented as an emergency in the most recent quarter (April to June 2017); across the 209 CCGs the proportion varied from 13.3% to 30.4%.
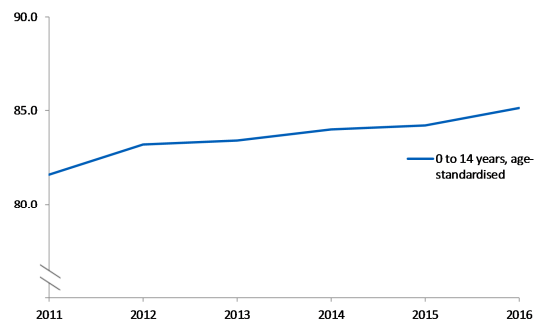
Quality

Cancer Survival Estimates

Statistics in this section are already in the public domain and are routinely published by the Office for National Statistics.

- Adults diagnosed with late cancer (stage 4) in 2015, which had already spread to other parts of the body, have lower 1-year survival compared with those diagnosed in the earliest stage (stage 1), with the lowest survival in lung cancer in men (17.1%) and women (21.6%).

- Conversely, adults diagnosed with melanoma of the skin, prostate and breast cancer (women only) in the earliest stage now have 1-year survival that is comparable to the general population of the same age who have not been diagnosed with cancer.

Smoothed trends in 5-year survival (%) for children (aged 0 to 14 years) diagnosed with cancer in England between 2011 and 2016

Source: NCRAS within Public Health England and Office for National Statistics

- For all childhood cancers (diagnosed in England from 1990 onwards and followed up to the end of the most recently completed calendar year) combined, the

general trend of increasing 5-year survival has continued. For children (0 to 14 years), 5-year survival has increased from 81.6% for those diagnosed in 2011 to 85.1% predicted for those children diagnosed in 2016. A similar increasing trend has been observed for 10-year survival.
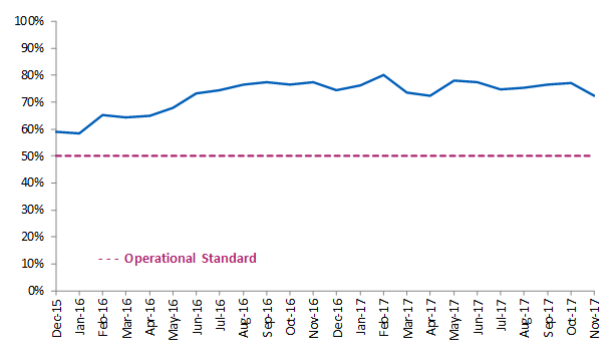
Mental health

Access

Early Intervention in Psychosis

- The number of patients waiting to start treatment (incomplete pathways) was 1,389 at the end of November 2017. Of these 753 were waiting for more than two weeks.

- 72.3% of patients started treatment within two weeks in November 2017. The waiting time standard of 50% was therefore met. This compares to 77.3% the previous month and 77.6% in November 2016.

- Providers are continuing to work on data quality, and issues identified by them may ultimately impact on performance against the standard – any single month's data should therefore be treated with caution.

Percentage of people started treatment within 2 weeks

- - - Operational Standard

Source: Early Intervention in Psychosis Waiting Times, NHS England

Out of Area Placements

These statistics are already in the public domain and are routinely published by NHS Digital.

- The Government set a national ambition to eliminate inappropriate Out of Area Placements (OAPs) in mental health services for adults in acute inpatient care by 2020-21. Inappropriate OAPs are where patients are sent out of area because no bed is available for them locally which can delay their recovery.

- The latest data published relates to the position at the end of October 2017 and reports that there were 740 Out of Area Placements (OAPs) active, of which 710 were Inappropriate. These numbers have been rounded to the nearest 5.

- These figures for OAPs should be interpreted with caution, as with all of the previous reports in this series. These figures only contain OAPs that started on or after 17 October 2016 (the date this OAPs collection launched). It is estimated that due to this starting point, this report includes around 95 per cent of all OAPs active during the collection period (if all providers in scope had submitted data).

- This month, 47 organisations have participated in this collection out of 56 organisations in scope. This means that 84 per cent of organisations have participated.

Children and Young People with an Eating Disorder

These statistics are already in the public domain and are routinely published by NHS England.
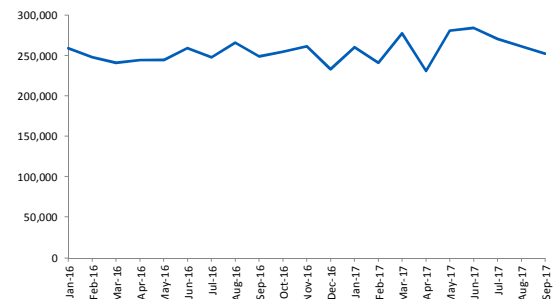
- By 2020, 95% of children and young people referred for assessment or treatment for an eating disorder should receive treatment within one week if the case is urgent, and four weeks if the case is routine.

- 71.0% of patients started urgent treatment within one week in Q2 2017-18. This compares to 73.3% in Q1 2017-18 and 58.0% in Q2 2016/17.

Mental Health Services – contacts and referrals

Statistics in this section are already in the public domain and are routinely published by NHS Digital.

- The number of new referrals into NHS funded secondary mental health, learning disabilities and autism services during September 2017 was 252,129. This is a decrease of 2.7% (6,919) compared to the average number of new referrals per month between September 2016 and August 2017.

- In January 2016 the scope of statistics for secondary mental health, learning disabilities and autism services was expanded to include services for children and young people. Due to this comparable figures are not available prior to this date.

New referrals into secondary mental health, learning disabilities and autism services during the month

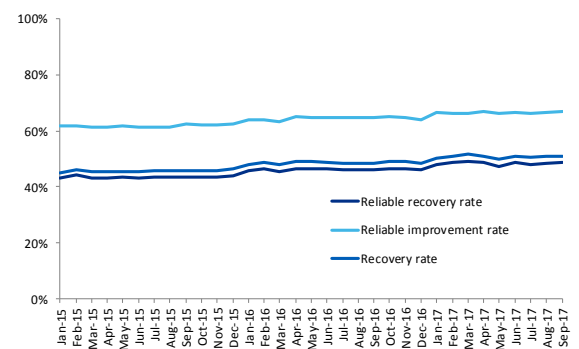Source: Mental Health Services Data Set (MHSDS), NHS Digital

- The number of people in contact with NHS funded secondary mental health, learning disabilities and autism services on 30 September 2017 was 1,214,870. This is a decrease of 0.2% (2,045) compared to the average number of people in contact at the end of each month between September 2016 and August 2017.

Quality

Improving Access to Psychological Therapies (IAPT)

These statistics are already in the public domain and are routinely published by NHS Digital.

- 51.1% of referrals recovered in September 2017, compared to 46.3% in 2015-16, and 44.8% in 2014-15. 66.8% of referrals reliably improved in September 2017, compared to 62.2% in 2015-16, and 60.8% in 2014-15. 48.6% of referrals reliably recovered in September 2017, compared to 44.0% in 2015-16 and 42.8% in 2014-15.

- There were 1,399,088 new referrals to IAPT services in 2015-16; 10% more than in 2014-15. 953,522 referrals entered treatment in 2015-16; 17%, or 137,857 referrals, more than in 2014-15.

- 537,131 referrals finished a course of IAPT treatment in 2015-16; 15% or 68,250 referrals more than in 2014-15.

Outcomes in Psychological Therapies (IAPT)

Source: Improving Access to Psychological Therapies dataset, NHS Digital

- 82.1% waited less than 6 weeks in 2015-16 and 96.3% waited less than 18 weeks in 2015-16.