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 3.7% growth in the number of people attending A&E and a 5.4% growth in the number of people admitted to hospital as an emergency. There were 24.3m attendances to A&E in the last twelve months and 6.2m emergency admissions to hospital.
- In September 2018, 88.9% of patients were seen within 4 hours. This is compared with 89.7% in September 2017.

Ambulances
- There were 661,350 incidents in England in September 2018, 22,045 per day, that either received a face-to-face response from an ambulance service or were resolved on the telephone.
- The mean average response time during September 2018 for Category C1 was 7 minutes and 20 seconds.

Delayed Transfers of Care
- In August 2018 patients spent a total of 145,600 extra days in hospital beds waiting to be discharged, compared to 180,300 in August 2017.
- This equates to an average of 4,697 beds occupied each day in August 2018 by a patient subject to a delayed transfer of care, compared to 5,816 in August 2017.

Referral to Treatment
- Almost 16 million patients started treatment in the last 12 months. This represents a 0.9% increase on the previous year.
- At the end of August 2018, there were 4.2m people on the waiting list for treatment. The waiting list increased by 6.8% when compared to a year earlier. At the end of August 2018, of those waiting, 87.2% had been waiting for 18 weeks or less, a fall from 89.4% in August 2017.

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 16,209 in Q1 2018/19. Of these, 1,881 (12%) were completed in an acute hospital setting.
- Of the 19,739 Standard NHS CHC referrals completed in Q1 2018/19, 13,270 (67%) were completed within 28 calendar days.

Cancer Waiting Times
- There has been a 7.2% 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 3.4% increase in those starting first definitive treatment for a new primary cancer and a 5.5% increase in those receiving a first treatment for cancer following an urgent referral for cancer.
- In August 2018, 91.7% of people were seen by a specialist within two weeks of an urgent GP referral for suspected cancer, 97.0% started a first definitive treatment for a new primary cancer and 79.4% 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 1,043 patients waiting to start treatment at the end of August 2018.
- In August 2018, 74.4% of patients experiencing First Episode Psychosis (FEP) started treatment within two weeks of referral.

Improving Access to Psychological Therapies
- 51.6% of patients referred to IAPT services recovered in July 2018, 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.
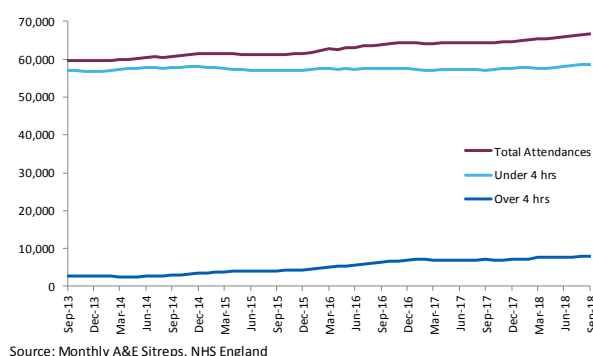
Urgent and Emergency Care

Access

Accident and Emergency

- There were 2.0m attendances in September 2018, 4.1% more than in September 2017. Attendances in the last 12 months were 3.7% higher than the preceding 12 month period.

- The number of attendances admitted, transferred or discharged within 4 hours was 1.78m - 88.9% of the total. This is a 3.3% increase on the equivalent figure for September 2017 (1.73m seen within 4 hours).

- The number of patients seen in over 4 hours was 221,778 compared to 199,027 in September 2017, an increase of 11.4%.

No of attendances per day - 12 month rolling average

Source: Monthly A&E Sitreps, NHS England

- There were 510,642 emergency admissions in September 2018, 4.9% more than in September 2017. Admissions in the last 12 months period were up 5.4% on the preceding 12 month period.

- There were 44,312 patients waiting more than 4 hours from decision to admit to admission (5.1% higher than September 2017). Of these, 153 patients waited more than 12 hours (98.7% higher than in September 2017).
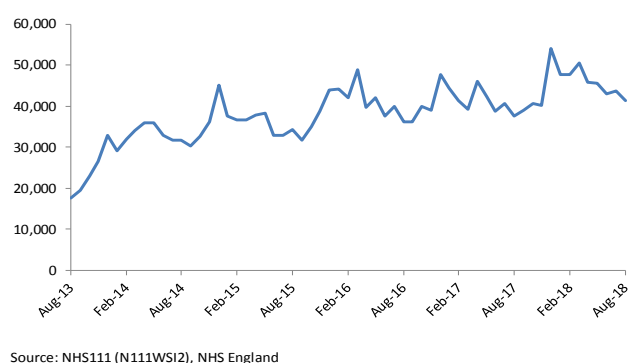
NHS 111

- There were 1.3m calls offered in England in September 2018, an increase of 9.1% on September 2017. There were 16.5m calls in the year ending September 2018, 9.4% more than in the previous 12 months.

- Of calls offered to NHS 111 in September 2018, the proportion abandoned after waiting longer than 30 seconds was 2.9%, up from 2.0% in September 2017. Of calls answered by NHS 111 in September 2018, 85.0% were answered within 60 seconds, compared with 88.4% in September 2017.

- Of calls triaged, the proportion that received any form of clinical input was 53.1% in September 2018. In September 2017 the proportion was 42.3%.
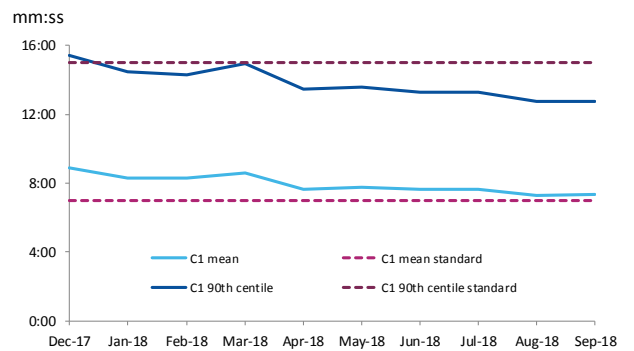
Calls offered per day to NHS 111, England

Source: NHS111 (N111WSI2), NHS England

Ambulances

- There were 661,350 incidents in England in September 2018, 22,045 per day, that either received a face-to-face response from an ambulance service or were resolved on the telephone.

- The mean average response times across England in September 2018 were 7 minutes 20 seconds for Category C1, and 21 minutes 41 seconds for Category C2. The C1 average was 1% more than in August 2018 and the C2 average was 5% more than in August 2018.

- For cardiac arrest patients who had resuscitation commenced or continued by an Ambulance Service in England in May 2018, the proportion discharged alive from hospital was 10%, the same as in April 2018.
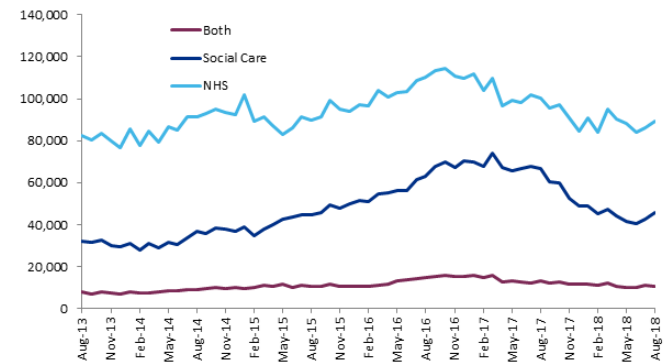
C1 response times (mean and 90th centile), England

Source: Monthly Ambulance System Indicators (AmbSYS), NHS England

Quality

Delayed Transfers of Care

- There were 145,617 delayed days in August 2018, compared to 180,285 in August 2017. This is a decrease of 19.2%.

- These days equate to a daily average of 4,697 beds occupied by DTOC patients in August 2018 and 5,816 in August 2017.

- The proportion of delays attributable to NHS in August 2018 was 61.3% (up from 55.7% in August 2017). The remaining delays were attributed as follows: 31.3% Social Care (down from 37.1% in August 2017) and 7.4% both (up from 7.2% in August 2017).

Number delayed transfers of care bed days

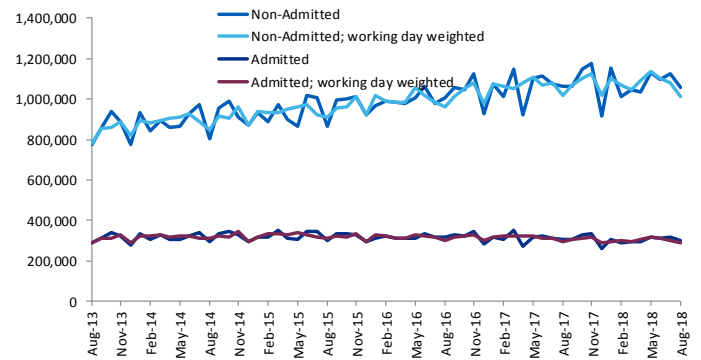Source: Monthly Delayed Transfers of Care, NHS England

Planned Care

Access

Referral to Treatment (RTT)

- 1.3m patients started consultant-led treatment in August 2018. There were 15.9m completed RTT pathways in the 12 months to August 2018. The number of completed RTT pathways in the 12 months to August 2018 increased by 0.9%, having taken account of trusts not submitting data.

- Of patients on the waiting list at the end of August 2018, 87.2% had been waiting less than 18 weeks, thus not meeting the 92% standard. This compares to 89.4% at the end of August 2017.

- The number of RTT patients waiting to start treatment at the end of August 2018 was 4.2 million. Taking account of trusts not submitting data, the waiting list increased by 6.8% over August 2017.

- The number of patients on the waiting list who were waiting under 18 weeks increased between August 2017 and August 2018 from 3.5m to 3.6m, and the number of patients waiting over 18 weeks rose from 412,000 to 530,000. This comparison will be affected by differences in the trusts not submitting data in each period.

- 3,407 patients were waiting more than 52 weeks. This compares to 1,734 in August 2017, and 350 patients five years ago (August 2013). This comparison will be affected by differences in the trusts not submitting information in each period.
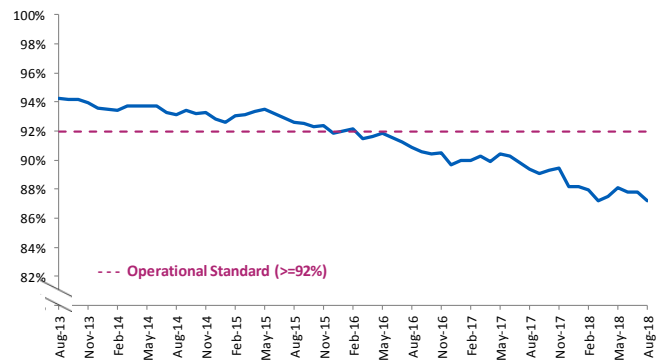
Diagnostic Tests

- 1.9m diagnostic tests were undertaken in August 2018, an increase of 3.3% on the previous year.

- The number of tests conducted over the last twelve months is up 2.9% on the preceding twelve month period.

- 3.1% of the patients waiting for one of the 15 key diagnostic tests at the end of August 2018 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

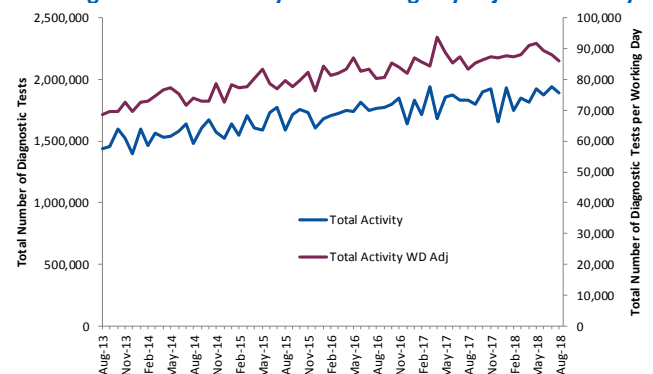Published figures, no adjustments for missing data

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

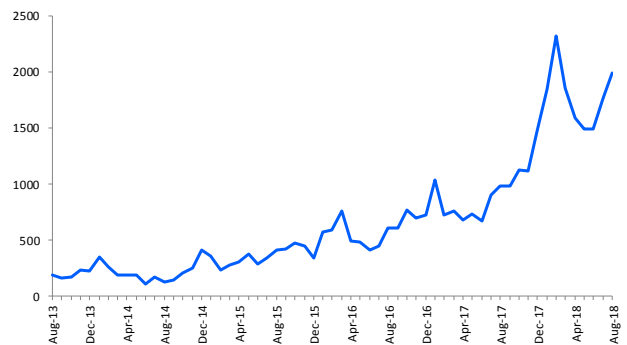**Total diagnostic test activity and working day adjusted activity**

Source: Monthly Diagnostic Waiting Times & Activity, NHS England

Quality

Mixed Sex Accommodation

- In August 2018, providers of NHS-funded healthcare reported 1,986 breaches of MSA guidance in relation to NHS patients in sleeping accommodation. This compares to 1,765 in July 2018 and 191 in August 2013.

- Of the 148 acute trusts that submitted data for August 2018, 101 (68.2%) reported zero sleeping breaches.

- The MSA breach rate in August 2018 was 1.2 per 1,000 FCEs. This compares to 1.1 in July 2018 and 0.1 in August 2013.

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 16,209 in Q1 2018/19. Of these, 1,881 (12%) were completed in an acute hospital setting

- Of the 19,739 Standard NHS CHC referrals completed in Q1 2018/19, 13,270 (67%) were completed within 28 calendar days.

- The number of incomplete referrals exceeding 28 calendar days was 4,910 as at the last day of Q1 2018/19. Of these: 790 exceeded by up to 2 weeks; 510 exceeded by more than 2 weeks and up to 4 weeks; 1,012 exceeded by more than 4 weeks and up to 12 weeks; 893 exceeded by more than 12 weeks and up to 26 weeks; 1,705 exceeded by more than 26 weeks.

- The total number of people eligible for NHS CHC was 55,688 as at the last day of Q1 2018/19. Of these, 36,813 were eligible via the Standard NHS CHC assessment route and 18,875 were eligible via the Fast Track assessment route.

- The Fast Track referral conversion rate was 96% in Q1 2018/19.

- The Standard NHS CHC assessment conversion rate was 27% in Q1 2018/19.

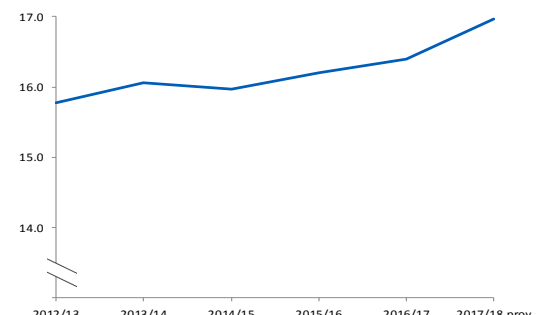- The total number of people eligible for NHS-funded Nursing Care was 76,762 as at the last day of Q1 2018/19.

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.

PROMs Knee Replacement Procedures, Average Health Gain

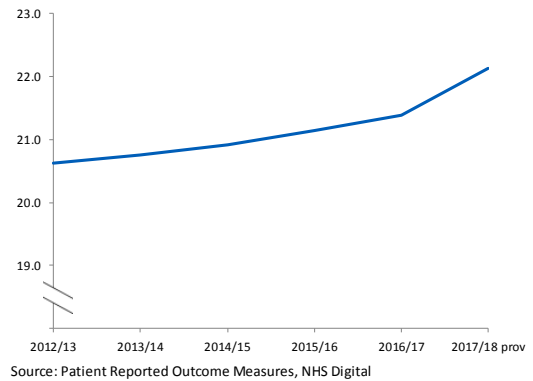Oxford Knee Score, 2012/13 to 2017/18 (provisional data)

Source: Patient Reported Outcome Measures, NHS Digital

- 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.

- Finalised data for 2016/17 is now available following its publication in August 2018. Data for 2017/18 provided is provisional, this is due to post-operative questionnaires being sent out 6 months after the replacement procedure with a finalised report due to be published in 2019. Charts shown here contain all data returned to NHS Digital up to June 2018.

PROMs Hip Replacement Procedures, Average Health Gain

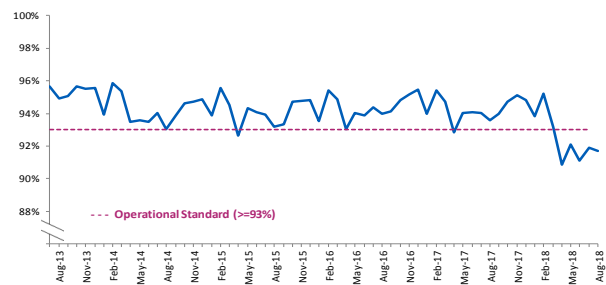Oxford Hip Score, 2012/13 to 2017/18 (provisional data)

Source: Patient Reported Outcome Measures, NHS Digital

Cancer

Access

Cancer Waiting Times

- Two week wait: 189,055 people were seen following an urgent referral for suspected cancer in August 2018. There were 2,041,616 people seen in the 12 months to August 2018, an increase of 7.2% (136,875 more patients) on the previous 12 months period.
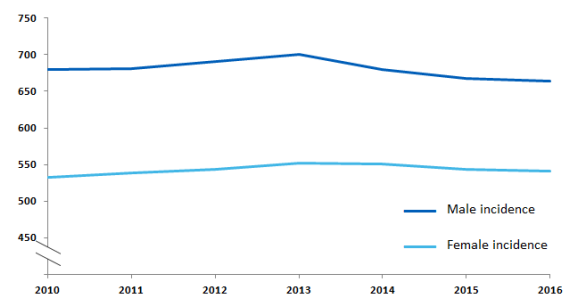
- 91.7% of people in August 2018 were seen by a specialist within two weeks of an urgent GP referral for suspected cancer. The operational standard specifies that 93% of patients should be seen within this time.

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

Source: Monthly Cancer Waiting Times, NHS England

- 31 day wait: 26,397 patients started a first definitive treatment for a new primary cancer in August 2018. There were 297,347 patients who received first treatments in the 12 months to August 2018, an increase of 3.4% or 9,731 additional patients, on the previous 12 month period.

- 97.0% of patients in August 2018 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: 14,115 patients received a first treatment for cancer following an urgent GP referral in August 2018. There were 154,125 patients who received first treatments for cancer following an urgent GP referral in the 12 months to August 2018, an increase of 5.5% or 8,030 additional patients, on the previous 12 month period.

- 79.4% of patients received a first definitive treatment for cancer following an urgent GP referral for suspected cancer within 62 days in August 2018, this equates to 11,202 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 2016, there were 303,100 cancers registered (excluding non-melanoma skin cancers) – equivalent to 828 new cases being diagnoses each day. This has increased from 275,800 cancers registered in 2010.
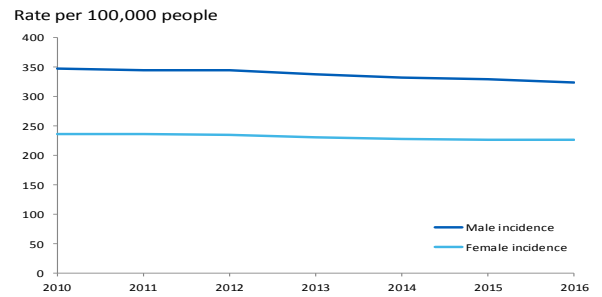
Directly age-standardised rates per 100,000 people of newly diagnosed cases of cancer: England, 2010 to 2016

Source: Office for National Statistics

- Breast (15.2%), prostate (13.4%), lung (12.7%) and colorectal (11.5%) cancers continue to account for over half (52.7%) of the 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 541.1 per 100,000 females) but have fallen for males (from 680.3 to 663.4 per 100,000 males).

- Between 2010 and 2016, mortality rates, due to cancer, for both males and females fell from 348.1 to 323.7 per 100,000 males and from 236.7 to 226.7 per 100,000 females.

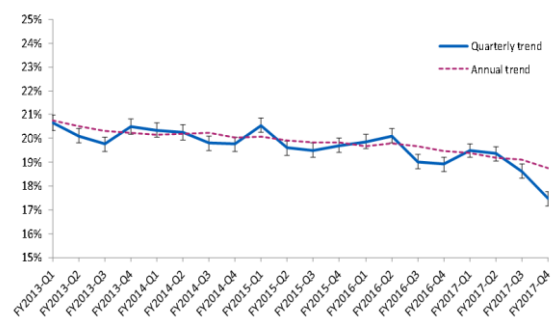**Directly age-standardised rates per 100,000 people of deaths from cancer: England, 2010 to 2016**

Rate per 100,000 people

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

Cancer Emergency Presentations

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

- Between January to March 2018, of 64,283 cancer patients first presenting at hospital in England, 11,231 (17.5%) 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 20.2% in April 2013 to March 2014 to 18.8% in April 2017 to March 2018

- At CCG level, there was an approximate fourfold variation in the proportion of cancer patients who first presented as an emergency in the most recent quarter (January to March 2018); across the 195 CCGs the proportion varied from 9.4% to 40.5%

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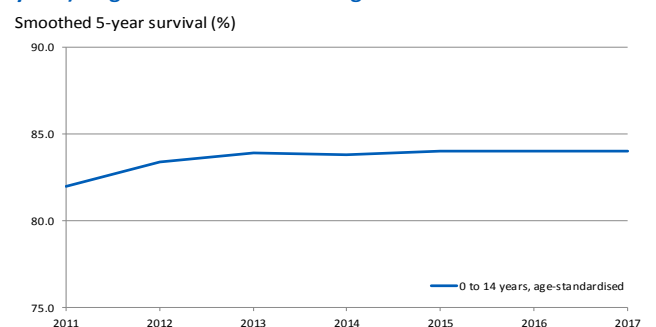

Quality

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

Smoothed trends in 5-year survival (%) for children (aged 0 to 14 years) diagnosed with cancer in England between 2011 and 2017

Smoothed 5-year survival (%)

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

comparable to the general population of the same age who have not been diagnosed with cancer.

- For all childhood cancers (diagnosed in England 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 81.7% for those diagnosed in 2011 to 84.0% predicted for those children diagnosed in 2017. Since there is a small difference between 5-year and 10-year survival estimates, children who survive for five years often live at least a further five years after diagnosis.
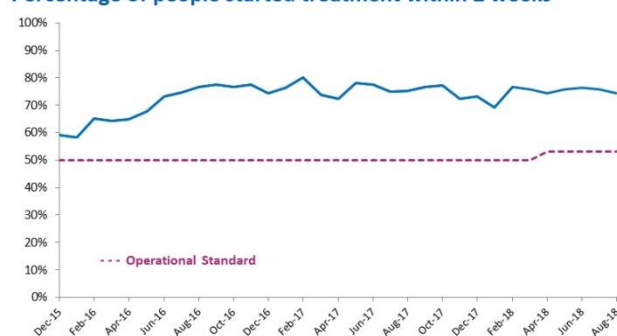
Mental Health

Access

Early Intervention in Psychosis

- The number of patients waiting to start treatment (incomplete pathways) was 1,043 at the end of August 2018. Of these 584 were waiting for more than two weeks.

- 74.4% of patients started treatment within two weeks in August 2018. The waiting time standard of 53% was therefore met. This compares to 75.9% the previous month and 75.3% in August 2017.

- 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 July 2018 and reports that there were 730 Out of Area Placements (OAPs) active, of which 700 were Inappropriate.

- These figures only contain OAPs that started on or after 17 October 2016 (the date this OAPs collection launched). The impact of this start date on the report should be considered minimal.

- This month, 54 organisations have participated in this collection out of 57 organisations in scope. This means that 95 per cent of organisations have participated.

Children and Young People with an Eating Disorder

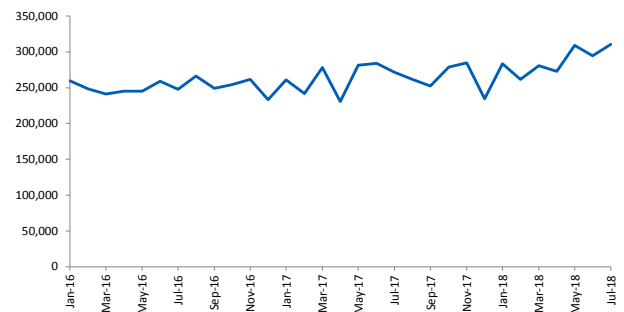*These statistics are published quarterly by NHS England.*

- 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.

- 74.7% of patients started urgent treatment within one week in Q1 2018-19. This compares to 78.9% in Q4 2017-18 and 73.3% in Q1 2017-18.

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 July 2018 was 310,250. This is an increase of 13.3% (36,453) compared to the average number of new referrals per month between July 2017 and June 2018.

- 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

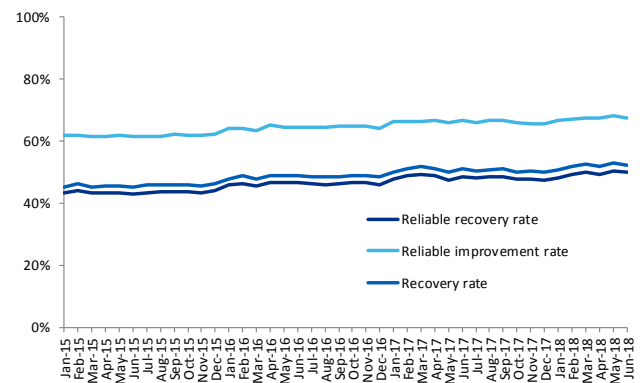Source: Mental Health Services Data Set (MHSDS), NHS Digital

- The number of people in contact with NHS funded secondary mental health, learning disabilities and autism services on 31st July 2018 was 1,282,810. This is an increase of 45,984 compared to the average number of people in contact at the end of each month between July 2017 and June 2018.

Quality

Improving Access to Psychological Therapies (IAPT)

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

- 51.6% of referrals recovered in July 2018, compared to 49.3% in 2016-17 and 46.3% in 2015-16. 67.0% of referrals reliably improved in July 2018, compared to 65.1% in 2016-17 and 62.2% in 2015-16. 49.2% of referrals reliably recovered in July 2018, compared to 47.0% in 2016-17 and 44.0% in 2015-16.

- There were 1,385,664 new referrals to IAPT services in 2016-17; 1% less than in 2015-16. 965,379 referrals entered treatment in 2016-17; 1%, or 11,857 referrals, more than in 2015-16.

- 567,106 referrals finished a course of IAPT treatment in 2016-17; 6%, or 29,975 referrals more than in 2015-16.

Outcomes in Psychological Therapies (IAPT)

Source: Improving Access to Psychological Therapies dataset, NHS Digital

- 87.5% waited less than 6 weeks in 2016-17 and 98.2% waited less than 18 weeks in 2016-17.