

NHS Performance Statistics

Published: 11th April 2019

Geography: England

Official 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.

Contents

Urgent and emergency care – Accident and Emergency, NHS 111, Ambulances, Delayed Transfers of Care

Planned care – Referral to Treatment, Diagnostics, Mixed Sex Accommodation, NHS Continuing Healthcare and NHS-funded Nursing Care, Patient Reported Outcome Measures

Cancer – Cancer Waiting Times, Cancer Registrations, Cancer Emergency Presentations, Cancer Survival Estimates

Mental Health – Early Intervention in Psychosis, Out of Area Placements, Children and Young People with an Eating Disorder, Contacts and Referrals, Improving Access to Psychological Therapies, Physical Health Checks for people with Severe Mental Illness.

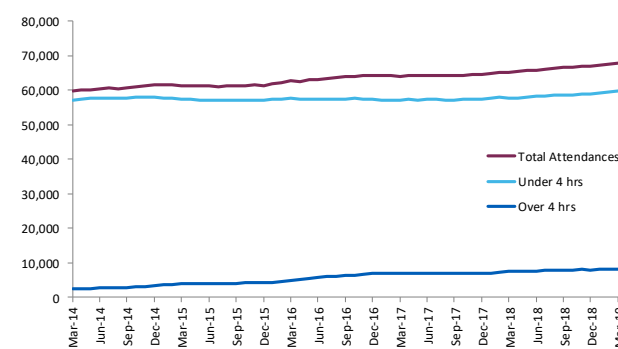
Urgent and Emergency Care

Access

Accident and Emergency

- There were 2.17m attendances in March 2019, 5.7% more than in March 2018 (5.5% and 5.8% for Type 1 and Type 3 respectively). Attendances in the last 12 months were 4.1% higher than the preceding 12 month period (2.0% and 8.7% for Type 1 and Type 3 respectively).
- There were 555,465 emergency admissions in March 2019, 5.6% more than in March 2018. Admissions in the last 12 months period were up 5.9% on the preceding 12 month period. SUS+ based analysis estimates a 5.7% February 2018 YTD growth in emergency admissions. This is composed of 11.9% growth for those with zero length of stay (LoS) and 2.8% growth with a LoS of 1 or more days.

No of attendances per day - 12 month rolling average



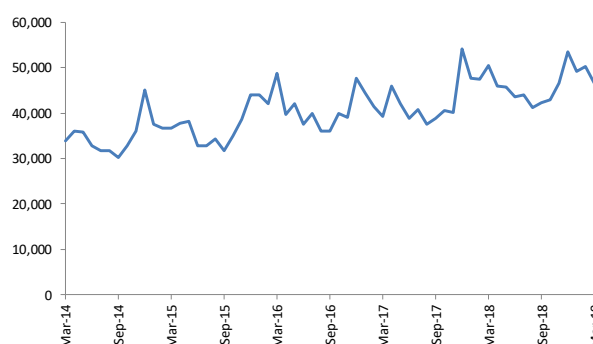
Source: Monthly A&E Sitreps, NHS England and NHS Improvement

- The number of attendances admitted, transferred or discharged within 4 hours was 1.88m – 86.6% of the total. This is an 8.2% increase on the equivalent figure for March 2018 (1.73m seen within 4 hours). Of these 1.09m were type 1 attendances, an increase of 9.8% from March 2018 and 736,170 type 3 attendances, an increase of 5.8% from March 2018.
- The number of patients seen in over 4 hours was 290,364 compared to 308,424 in March 2018, a decrease of 7.9%.
- There were 59,508 patients waiting more than 4 hours from decision to admit to admission (21.9% lower than March 2018). Of these, 329 patients waited more than 12 hours (61.4% lower than in March 2018).

NHS 111

- There were 1.4m calls offered in England in March 2019, a decrease of 7.5% on March 2018. There were 16.8m calls in the 12 months to March 2019, 5.1% more than in the previous 12 months.
- Of calls offered to NHS 111 in March 2019, the proportion abandoned after waiting longer than 30 seconds was 2.4%, down from 7.2% in March 2018. Of calls answered by NHS 111 in March 2019, 85.0% were answered within 60 seconds, compared with 70.0% in March 2018.
- Of calls triaged, the proportion that received any form of clinical input was 53.7% in March 2019, compared with 48.8% in March 2018.

Calls offered per day to NHS 111, England

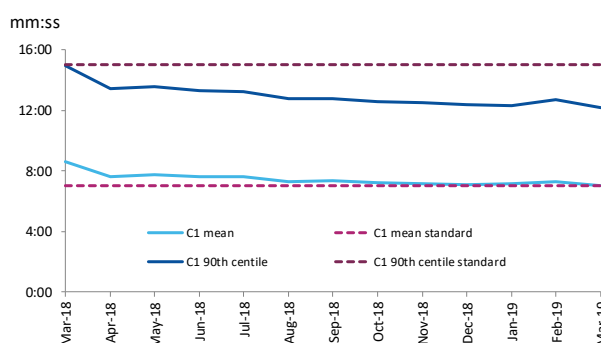


Source: NHS111 (N111WSI2), NHS England and NHS Improvement

Ambulances

- There were 725,906 incidents in England in March 2019 (23,416 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 March 2019 were 7 minutes 0 seconds for Category C1 and 21 minutes 15 seconds for Category C2. The C1 average met the standard of 7 minutes for the first time. The C2 average failed to meet its standard of 18 minutes.
- For cardiac arrest patients who had resuscitation commenced or continued by an Ambulance Service, in England, in November 2018, the proportion discharged alive from hospital was 9.2%.

C1 response times (mean and 90th centile)



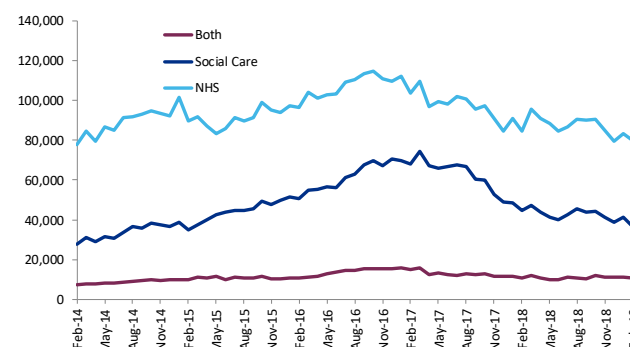
Source: Monthly Ambulance System Indicators (AmbSYS), NHS England and NHS Improvement

Quality

Delayed Transfers of Care

- There were 127,281 delayed days in February 2019, compared to 140,364 in February 2018. This is a decrease of 9.3%.
- These days equate to a daily average of 4,546 beds occupied by DTOC patients in February 2019 and 5,013 in February 2018.
- The proportion of delays attributable to NHS in February 2019 was 62.6% (up from 60.2% in February 2018). The remaining delays were attributed as follows: 28.7% Social Care (down from 32.0% in February 2018) and 8.6% both (up from 7.8% in February 2018).
- The main reason for delays in February 2019 was "Patients Awaiting Care Package in Own Home", which accounted for 25,398 delayed days (20.0% of all delays). 47.4% of delays for this reason are attributable to Social Care, 33.2% to NHS and 19.5% to both.

Number delayed transfers of care bed days



Source: Monthly Delayed Transfers of Care, NHS England and NHS Improvement

Planned Care

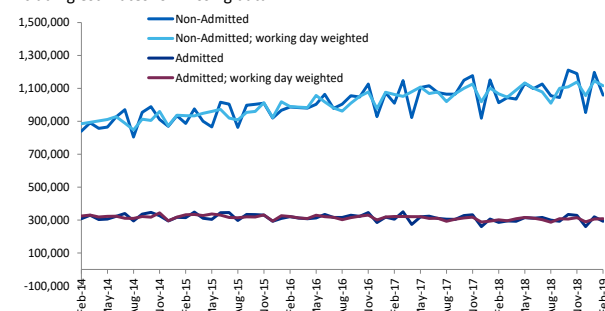
Access

Referral to Treatment (RTT)

- 1.3m patients started consultant-led treatment in February 2019. There were 16.3m completed RTT pathways in the 12 months to February 2019. The number of completed RTT pathways in the 12 months to February 2019 increased by 1.2%, having taken account of trusts not submitting data.
- Of patients on the waiting list at the end of February 2019, 87.0% had been waiting less than 18 weeks, thus not meeting the 92% standard. This compares to 87.9% at the end of February 2018.
- The number of RTT patients waiting to start treatment at the end of February 2019 was 4.1 million. Taking account of trusts not submitting data, the waiting list increased by 7.3% over February 2018.
- The number of patients on the waiting list who were waiting under 18 weeks increased between February 2018 and February 2019 from 3.3m to 3.6m, and the number of patients waiting over 18 weeks rose from 454,000 to 540,000. This comparison will be affected by differences in the trusts not submitting data in each period.
- 1,963 patients were waiting more than 52 weeks. This compares to 2,236 in February 2018, and 539 patients five years ago (February 2014). This comparison will be affected by differences in the trusts not submitting information in each period.

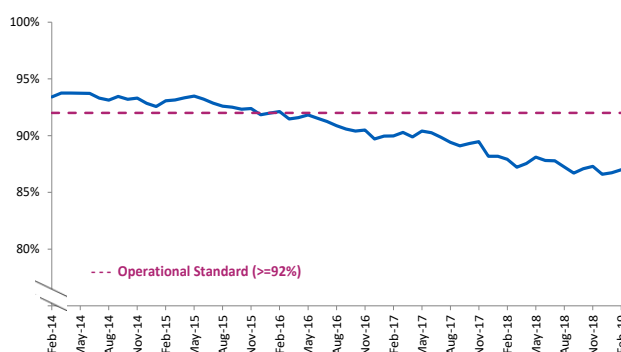
Number of patients starting RTT treatment

Including estimates for missing data



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

Published figures, no adjustments for missing data

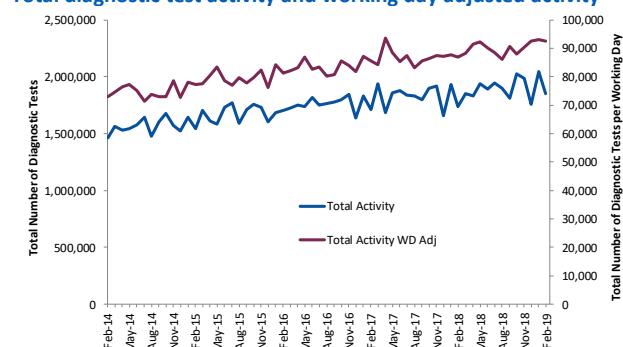


Source: Consultant-led Referral to Treatment Waiting Times, NHS England and NHS Improvement

Diagnostic Tests

- Over 1.8m diagnostic tests were undertaken in February 2019, an increase of 6.4% on the previous year.
- The number of tests conducted over the last twelve months has increased by 4.0% on the preceding twelve-month period.
- 2.3% of the patients waiting for one of the 15 key diagnostic tests at the end of February 2019 had been waiting six weeks or longer from referral, compared to the operational standard of less than 1%.

Total diagnostic test activity and working day adjusted activity



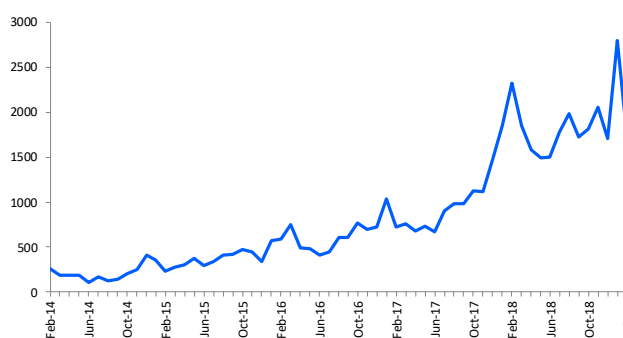
Source: Monthly Diagnostic Waiting Times & Activity, NHS England and NHS Improvement

Quality

Mixed Sex Accommodation

- In February 2019, providers of NHS-funded healthcare reported 1,722 breaches of MSA guidance in relation to NHS patients in sleeping accommodation. This compares to 2,793 in January 2019 and 260 in February 2014.
- Note January 2019 includes 1,123 breaches reported by Sandwell and West Birmingham Hospitals NHS Trust. Previously the Trust has incorrectly reported data to the national collection. The Trust has now rectified this following advice from NHS England and NHS Improvement that national policy and guidance should be followed.
- Of the 147 acute trusts that submitted data for February 2019, 91 (61.9%) reported zero sleeping breaches.
- The MSA breach rate in February 2019 was 1.1 per 1,000 finished consultant episodes. This compares to 1.6 in January 2019 and 0.2 in February 2014.

Total mixed sex accommodation breaches



Source: Mixed sex accommodation breaches, NHS England and NHS Improvement

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 15,208 in Q3 2018-19. Of these, 1,403 (9%) were completed in an acute hospital setting (down from 12% in Q2 2018-19).
- Of the 18,934 Standard NHS CHC referrals completed in Q3 2018-19, 13,319 (70%) were completed within 28 calendar days (down from 71% in Q2 2018-19).
- The number of incomplete referrals exceeding 28 calendar days was 3,553 as at the last day of Q3 2018-19. Of these: 773 exceeded by up to 2 weeks; 396 exceeded by more than 2 weeks and up to 4 weeks; 789 exceeded by more than 4 weeks and up to 12 weeks; 605 exceeded by more than 12 weeks and up to 26 weeks; 990 exceeded by more than 26 weeks.
- The total number of people eligible for NHS CHC was 54,754 as at the last day of Q3 2018-19 (down from 55,904 in Q2 2018-19). Of these, 36,603 were eligible via the Standard NHS CHC assessment route and 18,151 were eligible via the Fast Track assessment route.
- The Fast Track referral conversion rate was 96% in Q3 2018-19 (unchanged from 96% in Q2 2018-19).

- The Standard NHS CHC assessment conversion rate was 24% in Q3 2018-19 (down from 25% in Q2 2018-19).
- The total number of people eligible for NHS-funded Nursing Care was 77,741 as at the last day of Q3 2018-19 (up from 77,411 in Q2 2018-19).

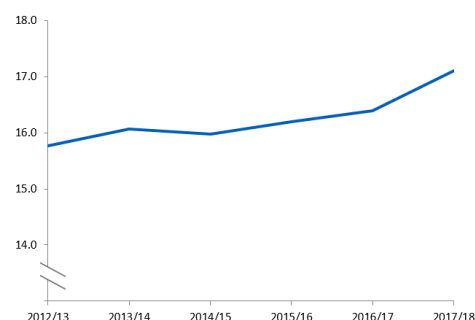
Patient Reported Outcome Measures (PROMs)

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.
- 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 2017/18 is available in February 2019 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 December 2018.

PROMs Knee Replacement Procedures, Average Health Gain

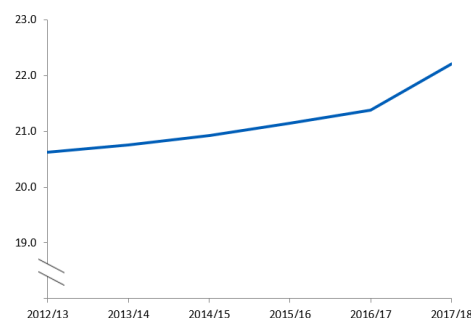
Oxford Knee Score, 2012/13 to 2017/18



Source: Patient Reported Outcome Measures, NHS Digital

PROMs Hip Replacement Procedures, Average Health Gain

Oxford Hip Score, 2012/13 to 2017/18



Source: Patient Reported Outcome Measures, NHS Digital

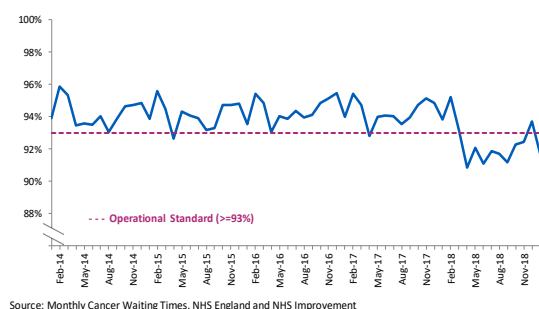
Cancer

Access

Cancer Waiting Times

- Two week wait: 179,523 people were seen following an urgent referral for suspected cancer in February 2019. There were 2,220,427 people seen in the 12 months to February 2019, an increase of 14.9% (287,726 more patients) on the previous 12 months period.

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



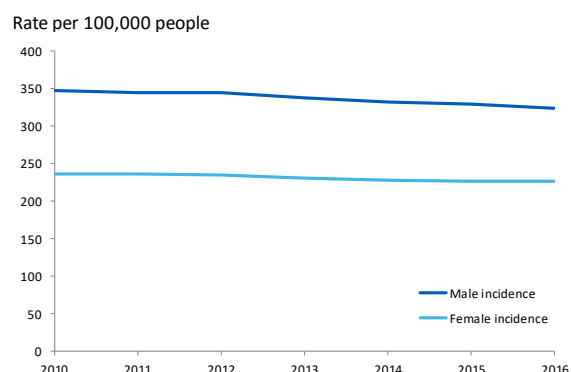
- 93.4% of people in February 2019 were seen by a specialist within two weeks of an urgent GP referral for suspected cancer. The operational standard specifies that 93% of patients should be seen within this time.
- 31 day wait: 23,329 patients started a first definitive treatment for a new primary cancer in February 2019. There were 309,729 patients who received first treatments in the 12 months to February 2019, an increase of 6.6% or 19,129 additional patients, on the previous 12 month period.
- 96.7% of patients in February 2019 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: 12,236 patients received a first treatment for cancer following an urgent GP referral in February 2019. There were 162,173 patients who received first treatments for cancer following an urgent GP referral in the 12 months to February 2019, an increase of 9.8% or 14,412 additional patients, on the previous 12 month period.
- 76.1% of patients received a first definitive treatment for cancer following an urgent GP referral for suspected cancer within 62 days in February 2019, this equates to 9,317 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.

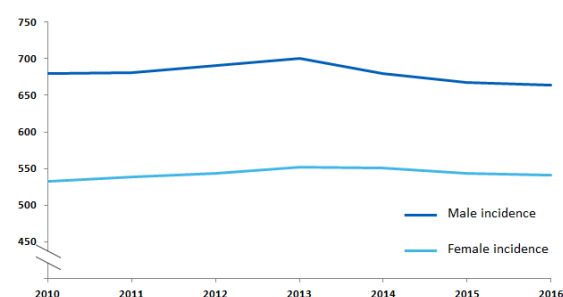
- Generally, cancer registrations have increased following advances in medicine which have resulted in an ageing population and improved detection of cancers. Advances in medicine and early detection of cancers have reduced the number of people dying from the disease.
- The number of new diagnosed cases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



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

Directly age-standardised rates per 100,000 people of newly diagnosed cases of cancer: England, 2010 to 2016



Source: Office for National Statistics

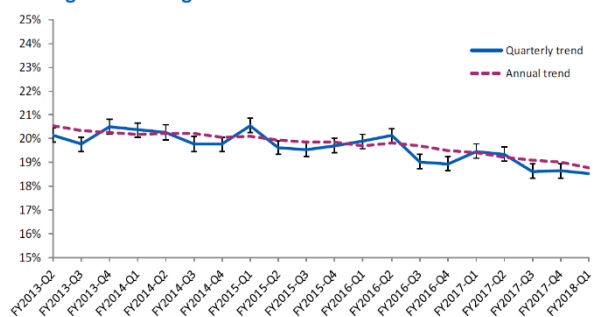
* NOTE: The age-standardised rates are expressed per 100,000 population and are standardised to the European standard population 2013 (ESP 2013).

Cancer Emergency Presentations

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

- Between April to June 2018, of 68,907 cancer patients first presenting at hospital in England, 12,811 (18.6%) 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 July 2013 to June 2014 to 18.8% in July 2017 to June 2018.
- At CCG level, there was a large variation in the proportion of cancer patients who first presented as an emergency in the most recent quarter (April to June 2018); across the 195 CCGs the proportion varied from 2.2% to 31.9%.

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



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

- For the first time we have been able to produce robust 1-year and 5-year net cancer survival estimates by stage at diagnosis based on five years' worth of cancer diagnoses (2012 to 2016), making them comparable with the adult cancer survival estimates.

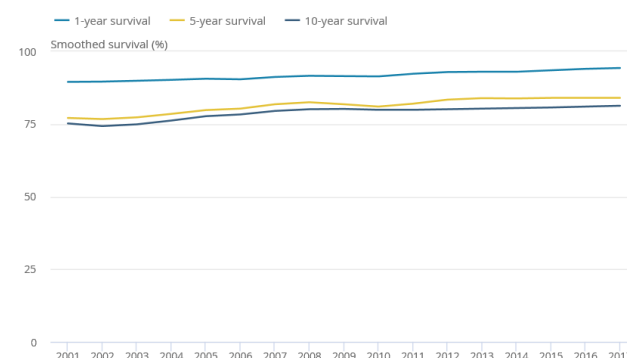
- Adults diagnosed at stage 1 with either melanoma of the skin, prostate or breast (women only) cancer have the same chance of surviving 1-year after diagnosis as an individual in the general population.

- Melanoma of the skin had the highest net-survival estimate for 1-year survival in both men (97.4%) and women (98.6%) and for 5-year survival in both men (89.2%) and women (93.9%).

- Pancreatic cancer had the lowest net-survival estimate for 1-year survival in men (23.7%) and women (25.3%) and for 5-year survival in both men (6.4%) and women (7.5%).

- Predicted 10-year survival was also highest for melanoma of the skin for both men and women at 85.0% and 90.9% respectively, and lowest for lung cancer for both men and women at 7.0% and 10.6% respectively.

Figure 1: Smoothed trends in 1-year, 5-year and 10-year age-standardised survival (%) for children (aged 0 to 14 years) diagnosed with cancer in England between 2001 and 2017

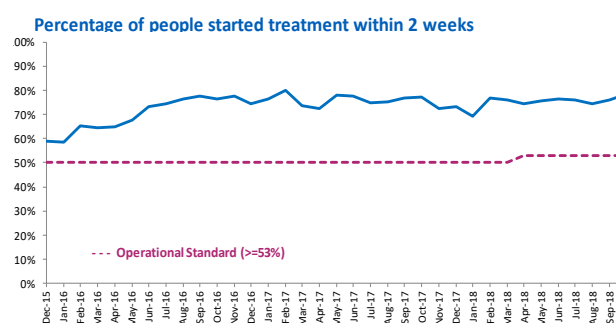


Mental Health

Access

Early Intervention in Psychosis

- The number of patients waiting to start treatment (incomplete pathways) was 1,121 at the end of February 2019. Of these 546 were waiting for more than two weeks.
- 74.5% of patients started treatment within two weeks in February 2019. The waiting time standard of 53% was therefore met. This compares to 75.2% the previous month and 76.7% in February 2018.
- 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.



Source: Early Intervention in Psychosis Waiting Times, NHS England and NHS Improvement

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 January 2019 and reports that there were 675 Out of Area Placements (OAPs) active, of which 645 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, 52 organisations have participated in this collection out of 57 organisations in scope. This means that 91 per cent of organisations have participated.

Children and Young People with an Eating Disorder

These statistics are published quarterly by NHS England.

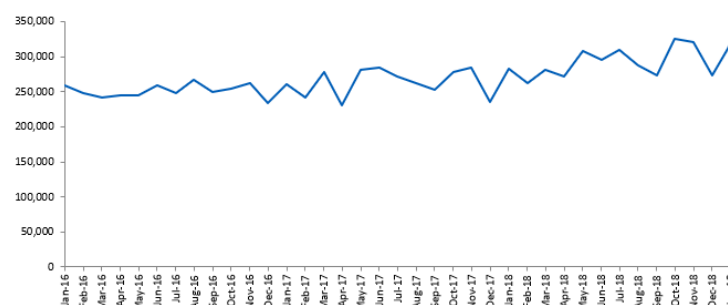
- By 2020, 95% of children and young people referred for assessment or treatment for an eating disorder should receive treatment within one week if the case is urgent, and four weeks if the case is routine.
- 80.7% of patients started urgent treatment within one week in Q3 2018-19. This compares to 81.3% in Q2 2018-19 and 76.9% in Q3 2017-18.

Mental Health Services – Contacts and Referrals

These statistics 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 January 2019 was 319,191. This is an increase of 9.6% (27,987) compared to the average number of new referrals per month between January 2018 and December 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.
- The number of people in contact with NHS funded secondary mental health, learning disabilities and autism services on 31st January 2019 was 1,331,375. This is an increase of 56,259 compared to the average number of people in contact at the end of each month between January 2018 and December 2018.

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



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

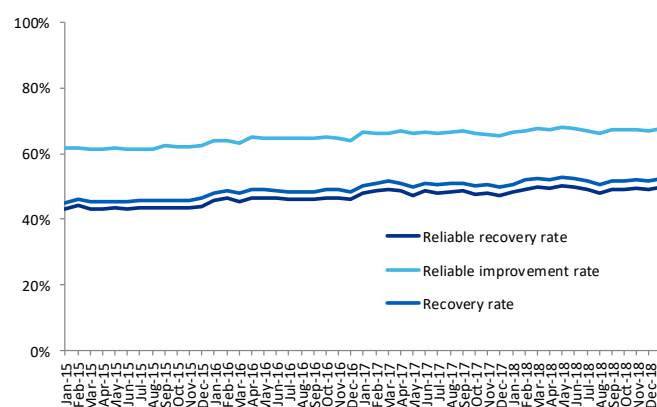
Quality

Improving Access to Psychological Therapies (IAPT)

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

- 52.3% of referrals recovered in January 2019, compared to 50.8% in 2017-18 and 49.3% in 2016-17. 67.5% of referrals reliably improved in January 2019, compared to 66.4% in 2017-18 and 65.1% in 2016-17. 49.7% of referrals reliably recovered in January 2019, compared to 48.3% in 2017-18 and 47.0% in 2016-17.
- There were 1,439,957 new referrals to IAPT services in 2017-18; 3.9% more than in 2016-17. 1,009,035 referrals entered treatment in 2017-18; 4.5%, or 43,656 referrals more than 2016-17.
- 554,709 referrals finished a course of IAPT treatment in 2017-18; 2.2% or 12,397 referrals less than in 2016-17.
- In 2017-18, 89.1% waited less than 6 weeks and 98.8% waited less than 18 weeks.

Outcomes in Psychological Therapies (IAPT)



Source: Improving Access to Psychological Therapies dataset, NHS Digital

Physical Health Checks for People with Severe Mental Illness (SMI)

These statistics are published quarterly by NHS England.

- By the end of 2018/19 at least 50% of people on GP severe mental illness registers should receive a comprehensive physical health check in the primary care setting. The data published in February 2019 show the number of people on the SMI register who receive health checks in the 12 months to the end of December 2018, i.e. the 12-month period includes three months in 2017/18, and nine months in 2018/19.
- This is the first publication of this data; the data are incomplete - 184 of 195 CCGs supplied data which met quality assurance standards, representing approximately 87.3% of the GP registered SMI population.
- 24.1% of people on GP SMI registers received the complete list of physical health checks in the 12 months to the end of 2018/19 Q3.