

NHS Performance Statistics

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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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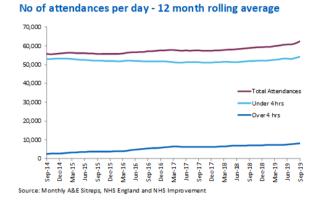


Urgent and Emergency Care

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Accident and Emergency

- There were 2.14m attendances in September 2019, 6.9% more than in September 2018 (5.8% and 9.2% for Type 1 and Type 3 respectively). Attendances in the last 12 months were 4.1% higher than the preceding 12 month period (3.9% and 4.7% for Type 1 and Type 3 respectively).
- There were 529,903 emergency admissions in September 2019, 3.8% more than in September 2018. Admissions in the last 12 months period were up 4.9% on the preceding 12 month period.



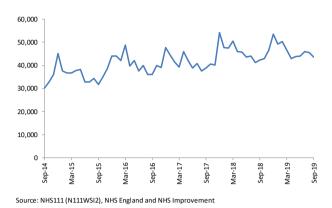
- SUS+ based analysis estimates a 3.7% August 2019 YTD growth in emergency admissions.
 This is composed of 7.3% growth for those with zero length of stay (LoS) and 1.9% growth with a LoS of 1 or more days.
- The number of attendances admitted, transferred or discharged within 4 hours was 1.65m 85.4% of the total. This is a 2.6% increase on the equivalent figure for September 2018 (1.61m seen within 4 hours). Of these 915,480 were type 1 attendances, a decrease of 1.9% from September 2018 and 694,214 type 3 attendances, an increase of 9.3% from September 2018. These are adjusted for CRS field testing sites which haven't submitted breach data.
- The number of patients seen in over 4 hours was 282,211 compared with 197,598 in September 2018, an increase of 42.8%. This is adjusted for CRS field testing sites which haven't submitted breach data.
- There were 64,921 patients waiting more than 4 hours from decision to admit to admission (45.6% higher than September 2018). Of these, 455 patients waited more than 12 hours (195.5% higher than in September 2018).



NHS 111

- Data for North East Ambulance Service were unavailable for April and May 2019, and incomplete for June to September 2019. Yorkshire Ambulance Service also provided incomplete data for July to September 2019. This affects rates that use these items as the denominator at a contract area, regional, and national level.
- There were 1.3m calls offered in England in September 2019. This was an average of 43.7 thousand calls per day. There were 17.0m calls in the 12 months to September 2019, 2.6% more than in the previous 12 months.

Calls offered per day to NHS 111, England

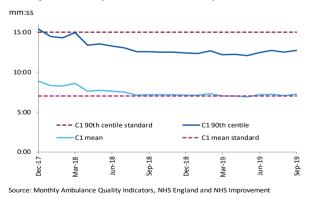


- Of calls offered to NHS 111 in September 2019, the proportion abandoned after waiting longer than 30 seconds was 3.5%, compared with 3.0% in September 2018. Of calls answered by NHS 111 in September 2019, 82.2% were answered within 60 seconds, compared with 85.1% in September 2018.
- Of calls triaged, the proportion that received any form of clinical input was 54.5% in September 2019, compared with 52.8% in September 2018.
- Experimental Statistics providing a detailed breakdown of Integrated Urgent Care (IUC) service demand, performance and activity were published for the first time in June (April 2019 data). The latest information (August 2019 data) is available here.

Ambulances

- There were 699,039 incidents in England in September 2019 (23,301 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 2019 were 7 minutes 15 seconds for Category C1 and 22 minutes 22 seconds for Category C2. The C1 average just missed the standard of 7 minutes, but the C2 average was more than 4 minutes over the standard of 18 minutes.

C1 response times (mean and 90th centile)



For cardiac arrest patients who had resuscitation commenced or continued by an Ambulance Service, in England, in May 2019, the proportion discharged alive from hospital was 10.2%.



Delayed Transfers of Care (DTOC)

- There were 148,872 delayed days in August 2019, compared with 146,866 in August 2018. This is an increase of 1.4%.
- These days equate to a daily average of 4,802 beds occupied by DTOC patients in August 2019 and 4,738 in August 2018.
- The proportion of delays attributable to NHS in August 2019 was 60.4% (down from 61.7% in August 2018). The remaining delays were attributed as follows: 30.3% Social Care (down from 31.0% in August 2018) and 9.3% Both (up from 7.3% in August 2018).

Number delayed transfers of care bed days



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

• The main reason for delays in August 2019 was "Patients Awaiting Care Package in Own Home", which accounted for 32,173 delayed days (21.6% of all delays). 48.1% of delays for this reason are attributable to Social Care, 32.4% to NHS and 19.5% to both.



Planned Care

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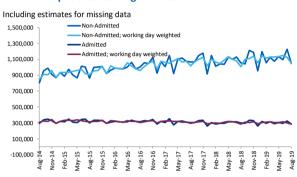
Referral to Treatment (RTT)

- 1.3m patients started consultant-led treatment in August 2019. There were 16.5m completed RTT pathways in the 12 months to August 2019. The number of completed RTT pathways in the 12 months to August 2019 increased by 2.8%, having taken account of trusts not submitting data.
- Of patients on the waiting list at the end of August 2019, 85.0% had been waiting less than 18 weeks, thus not meeting the 92% standard. This compares to 87.3% at the end of August 2018.
- The number of RTT patients waiting to start treatment at the end of August 2019 was 4.4 million. Taking account of trusts not submitting data, the waiting list increased by 4.8% over August 2018.
- The number of patients on the waiting list who were waiting under 18 weeks increased between August 2018 and August 2019 from 3.6m to 3.7m, and the number of patients waiting over 18 weeks rose from 530,000 to 662,000. This comparison will be affected by differences in the trusts not submitting data in each period.
- 1,233 patients were waiting more than 52 weeks.
 This compares to 3,405 in August 2018, and 490 patients five years ago (August 2014). This comparison will be affected by differences in the trusts not submitting information in each period.

Diagnostic Tests

- Over 1.9 million diagnostic tests were undertaken in August 2019, an increase of 0.7% on the previous year (5.5% adjusted for working days).
- The number of tests conducted over the last twelve months has increased by 4.5% on the preceding 12 month period (4.9% when adjusted for working days).
- 4.3% of the patients waiting for one of the 15 key diagnostic tests at the end of August 2019 had been waiting six weeks or longer from referral, compared with the operational standard of less than 1%.

Number of patients starting RTT treatment



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

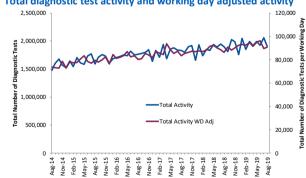
% incomplete pathways within 18 wks





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

Total diagnostic test activity and working day adjusted activity

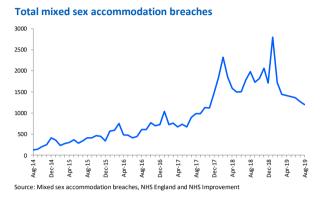


Source: Monthly Diagnostic Waiting Times & Activity, NHS England and NHS Improvement



Mixed Sex Accommodation (MSA)

- In August 2019, providers of NHS-funded healthcare reported 1,199 breaches of MSA guidance in relation to NHS patients in sleeping accommodation. This compares to 1,274 in July 2019 and 122 in August 2014.
- Of the 146 acute trusts that submitted data for August 2019, 96 (65.8%) reported zero sleeping breaches.
- The MSA breach rate in August 2019 was 0.7 per 1,000 finished consultant episodes. This compares to 0.7 in July 2019 and 0.1 in August 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.

NHS Continuing Healthcare (CHC) and NHS-funded Nursing Care

- The total number of Decision Support Tools (DSTs) completed for the Standard NHS CHC assessment route was 14,889 in Q1 2019-20. Of these, 974 (7%) were completed in an acute hospital setting (unchanged from 7% in Q4 2018-19)
- Of the 18,402 Standard NHS CHC referrals completed in Q1 2019-20, 13,957 (76%) were completed within 28 calendar days (up from 70% in Q4 2018-19)
- The number of incomplete referrals exceeding 28 calendar days was 2,169 as at the last day
 of Q1 2019-20. Of these: 625 exceeded by up to 2 weeks; 347 exceeded by more than 2
 weeks and up to 4 weeks; 563 exceeded by more than 4 weeks and up to 12 weeks; 306
 exceeded by more than 12 weeks and up to 26 weeks; 328 exceeded by more than 26 weeks
- The total number of people eligible for NHS CHC was 55,872 as at the last day of Q1 2019-20 (down from 56,036 in Q4 2018-19). Of these, 36,266 were eligible via the Standard NHS CHC assessment route and 19,606 were eligible via the Fast Track assessment route
- The Fast Track referral conversion rate was 96% in Q1 2019-20 (unchanged from 96% in Q4 2018-19)
- The Standard NHS CHC assessment conversion rate was 24% in Q1 2019-20 (unchanged from 24% in Q4 2018-19)
- The total number of people eligible for NHS-funded Nursing Care was 79,326 as at the last day of Q1 2019-20 (up from 78,589 in Q4 2018-19)



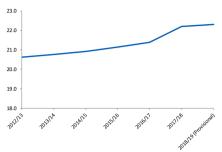
Patient Reported Outcome Measures (PROMs)

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 postoperative 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 now available following its publication in February 2019. Data for 2018/19 is provisional, due to post-operative questionnaires being sent out 6 months after the hip replacement procedure. The above chart contains all data returned to NHS Digital up to June 2019.

PROMs Hip Replacement Procedures, Average Health Gain

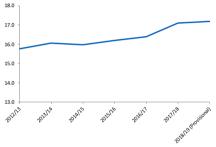
Oxford Hip Score, 2012/13 to 2018/19 (Provisional)



Source: Patient Reported Outcome Measures, NHS Digita

PROMs Knee Replacement Procedures, Average Health Gain

Oxford Knee Score, 2012/13 to 2018/19 (Provisional)



Source: Patient Reported Outcome Measures, NHS Digita



Cancer

Access

Cancer Waiting Times

- Two week wait: 199.048 people were seen following an urgent referral for suspected cancer in August 2019. There were 2,318,008 people seen in the 12 months to August 2019, an increase of 12.7% or 261,925 more patients (13.2% when adjusted for working days) on the previous 12 months period.
- 89.4% of people in August 2019 were seen by a specialist within two weeks of an urgent GP referral for suspected cancer. This compares to 91.7% at the end of August 2018. The operational standard

98% 96% 94% 92%

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

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specifies that 93% of patients should be seen within this time.

31 day wait: 25,138 patients started a first definitive treatment for a new primary cancer in August 2019. There were 307,980 patients who received first treatments in the 12 months to August 2019, an increase of 2.3% or 6,816 additional patients (2.7% when adjusted for working days), on the previous 12 month period.

88%

- 96.1% of patients in August 2019 received a first definitive treatment for a new primary cancer. This compares to 97.0% at the end of August 2018. The operational standard specifies that 96% of patients should be treated within this time.
- 62 day wait: 13,371 patients received a first treatment for cancer following an urgent GP referral in August 2019. There were 161,697 patients who received first treatments for cancer following an urgent GP referral in the 12 months to August 2019, an increase of 4.0% or 6,205 additional patients (4.4% when adjusted for working days), on the previous 12 month period.
- 78.5% of patients received a first definitive treatment for cancer following an urgent GP referral for suspected cancer within 62 days in August 2019, this equates to 10,498 patients being treated within the standard. This compares to 79.2% at the end of August 2018. The operational standard specifies that 85% of patients should be treated within this time.
- There are 252 working days from September 2018 to August 2019, and 253 working days on the previous 12 month period from September 2017 to August 2018.

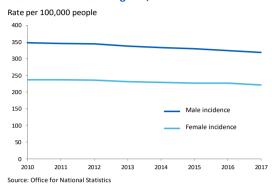


Cancer Registration Statistics

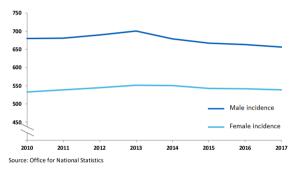
Statistics in this section are already in the public domain and are routinely published by Public Health England.

- 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 2017, there were 305,700 cancers registered (excluding nonmelanoma skin cancers) – equivalent to 837 new cases being diagnoses each day. This has increased from 275,800 cancers registered in 2010.
- Breast (15.1%), prostate (13.5%), lung (12.7%) and colorectal (11.4%) cancers continue to account for over half (52.7%) of the cancer registrations in England for all ages combined.
- Over the last decade, the age-standardised cancer incidence rate for females has increased from 531.6 per 100,000 in 2008 to 538.0 in 2017. In contrast, for males, cancer incidence has decreased from 678.6 per 100,000 in 2008 to 655.7 in 2017.
- For males, despite an increase in the number of deaths, the age-standardised mortality rate from cancer has decreased from 323.7 per 100,000 in 2016 to 318.9 in 2017. Similarly, for females, the rate of deaths from cancer has decreased from 226.6 per 100,000 to 221.2 between 2016 and 2017.

Directly age-standardised rates per 100,000 people of deaths from cancer: England, 2010 to 2017



Directly age-standardised rates per 100,000 people of newly diagnosed cases of cancer: England, 2010 to 2017



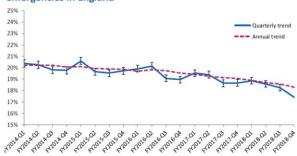
* NOTE: The age-standardised rates are expressed per 100,000 population and are standardised to the European standard population 2013 (ESP 2013).

Cancer Emergency Presentations

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

- Between January and March 2019, of 67,020 cancer patients first presenting at hospital in England, 11,666 (17.4%) 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 20.1% in April to March 2014/2015 to 18.3% in April to March 2018/2019
- 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 (January to March 2019); across the 191 CCGs the proportion varied from 10.3% to 30.6%

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



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



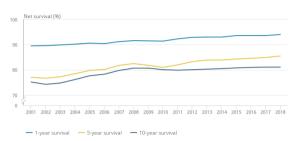
Cancer Survival Estimates

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

- Melanoma of the skin had the highest net survival for 1-year in both men (97.5%) and women (98.7%) and for 5-year in women (93.4%) for diagnoses between 2013 and 2017, which is the same as previously for diagnoses between 2012 and 2016. For men, the highest 5-year survival is in testicular cancer (95.3%).
- Pancreatic cancer had the lowest net survival for 1-year in men (24.8%) and women (26.2%), and for 5-year in both men (6.5%) and women (8.1%). This is a similar pattern to last year's publication.
- For 24 cancer sites we provide survival by stage estimates, there is now stage data for 85.3% of National Statistics diagnoses between 2013 to 2017; this means that we can now offer a further 35 survival by stage estimates than when we produced this publication for 2012 to 2016.
 - Source: National Cancer Registration and Analysis Service within Public Health England; Office for

Childhood cancer survival has continued to improve for 1-, 5- and 10-years, with the 5-year survival seeing the greatest improvement over time; an increase of 8.4 percentage points, from 77.1% in 2001 to 85.5% predicted for children diagnosed in 2018.





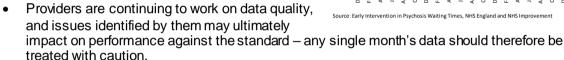


Mental Health

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Early Intervention in Psychosis

- The number of patients waiting to start treatment (incomplete pathways) was 1,047 at the end of August 2019. Of these 566 were waiting for more than two weeks.
- 78.8% of patients started treatment within two weeks in August 2019. The waiting time standard of 56% was therefore met. This compares to 77.4% the previous month and 74.4% in August 2018.





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 2019 and reports that there
 were 780 Out of Area Placements (OAPs) active, of which 745 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, 55 organisations have participated in this collection out of 57 organisations in scope. This means that 96 per cent of organisations have participated.

Children and Young People with an Eating Disorder

These statistics are published quarterly by NHS England.

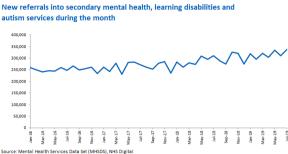
- By 2020, 95% of children and young people referred for assessment or treatment for an eating disorder should receive treatment within one week if the case is urgent, and four weeks if the case is routine.
- 77.7% of patients started urgent treatment within one week in Q1 2019-20. This compares to 80.6% in Q4 2018-19 and 74.7% in Q1 2018-19.



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 July 2019 was 338,333. This is an increase of 10.4% (31,954) compared to the average number of new referrals per month between July 2018 and June 2019.
- 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 July 2019 was 1,389,109. This is an increase of 65,229 compared to the average number of people in contact at the end of each month between July 2018 and June 2019.





Improving Access to Psychological Therapies (IAPT)

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

- 51.4% of referrals recovered in July 2019, compared to 52.1% in 2018-19, 50.8% in 2017-18, 49.3% in 2016-17 and 46.3% in 2015-16.
- 66.7% of referrals reliably improved in July 2019, compared to 67.4% in 2018-19, 66.4% in 2017-18, 65.1% in 2016-17 and 62.2% in 2015-16.
- 48.8% of referrals reliably recovered in July 2019, compared to 49.5% in 2018-19, 48.3% in 2017-18, 47.0% in 2016-17 and 44.0% in 2015-16.
- There were 1,603,643 new referrals to IAPT services in 2018-19; 11.4% or 163,686 more than in 2017-18;
 15,7% or 217,070 more than in 2016, 17 and 14,6% or 15,7% o
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- 15.7% or 217,979 more than in 2016-17 and 14.6% or 204,555 more than in 2015-16.
- 1,092,296 referrals entered treatment in 2018-19; 8.3% or 83,261 more than 2017-18; 13.1% or 126,917 referrals more than 2016-17 and 14.6% or 138,774 referrals more than in 2015-16.
- 582,556 referrals finished a course of IAPT treatment in 2018-19; 5.0% or 27,847 more than in 2017-18; 2.7% or 15,450 referrals more than in 2016-17 and 8.5% or 45,425 referrals more than in 2015-16.
- 89.4% waited less than 6 weeks in 2018-19 and 99.0% waited less than 18 weeks.

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

These statistics are published quarterly by NHS England.

- At least 60% of people on GP severe mental illness registers should receive a comprehensive physical health check at least once a year. The data published in August 2019 show the number of people on the SMI register who receive health checks in the 12 months to the end of June 2019.
- This is the third publication of this data; the data are incomplete 178 of 191 CCGs supplied data which met quality assurance standards, representing approximately 93.5% of the GP registered SMI population.
- 29.5% of people on GP SMI registers received the complete list of physical health checks in the 12 months to the end of 2019/20 Q1.
- Despite the scope of the data collection widening to include health checks delivered in any setting (previously limited to primary care), the percentage of patients accessing health checks is stable compared with 2018/19 Q4. This will, in part, be due to developing processes to collect this data and caution should be used when interpreting this information.