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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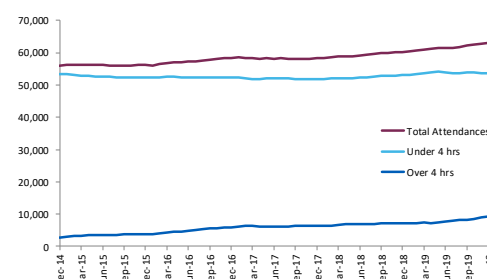
Urgent and Emergency Care

Access

Accident and Emergency

- There were 2.18m attendances in December 2019, 6.5% more than in December 2018 (5.1% and 9.5% for Type 1 and Type 3 respectively). Attendances in the last 12 months were 4.8% higher than the preceding 12 month period (4.9% and 5.0% for Type 1 and Type 3 respectively).

- There were 560,801 emergency admissions in December 2019, 2.9% more than in December 2018. Admissions in the last 12 months period were up 4.2% on the preceding 12 month period.

No of attendances per day - 12 month rolling average

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

- SUS+ based analysis estimates a 3.7% November 2019 YTD growth in emergency admissions. This is composed of 7.5% growth for those with zero length of stay (LoS) and 1.7% growth with a LoS of 1 or more days.

- The number of attendances admitted, transferred or discharged within 4 hours was 1.57m – 79.8% of the total. This is a 1.7% decrease on the equivalent figure for December 2018 (1.60m seen within 4 hours). Of these 834,423 were type 1 attendances, a decrease of 8.9% from December 2018 and 694,621 type 3 attendances, an increase of 8.3% from December 2018. These are adjusted for CRS field testing sites which haven't submitted breach data.

- There were 98,452 patients waiting more than 4 hours from decision to admit to admission (64.6% higher than December 2018). Of these, 2,347 patients waited more than 12 hours (726.4% higher than in December 2018).

NHS 111

- There were 1.8m calls offered in England in December 2019. This was an average of 59.5 thousand calls per day. There were 17.7m calls in the 12 months to December 2019, 5.2% higher than in the previous 12 months.

- Of calls offered to NHS 111 in December 2019, the proportion abandoned after waiting longer than 30 seconds was 6.0% compared with 3.5% in December 2018. Of calls answered by NHS 111 in December 2019, 75.7% were answered within 60 seconds, compared with 82.0% in December 2018.

- Of calls triaged, the proportion that received any form of clinical input was 50.6% in December 2019, compared with 54.1% in December 2018.

Calls offered per day to NHS 111, England
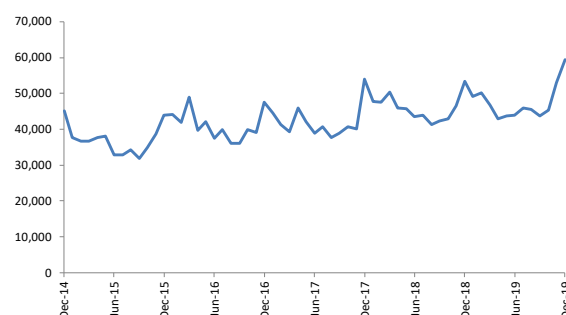
Source: NHS111 (N111WSI2), NHS England and NHS Improvement

- 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 (November 2019 data) is now available on the NHS England and NHS Improvement website.
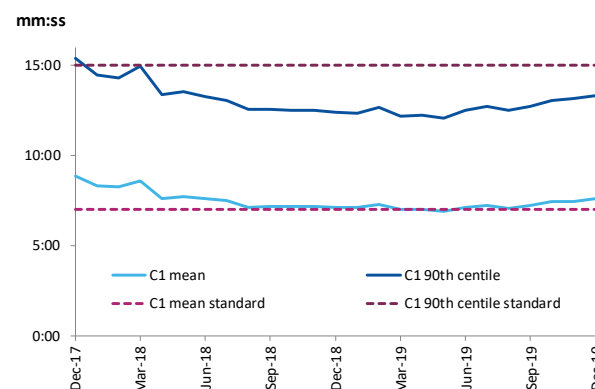
Ambulances

- There were 790,294 incidents in England in December 2019 (25,493 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 December 2019 were 7 minutes 35 seconds for Category 1 and 28 minutes 8 seconds for Category 2. Both of these England averages missed their respective standards of 7 and 18 minutes.

- For cardiac arrest patients who had resuscitation commenced or continued by an Ambulance Service, in England, in August 2019, the proportion discharged alive from hospital was 9.5%.
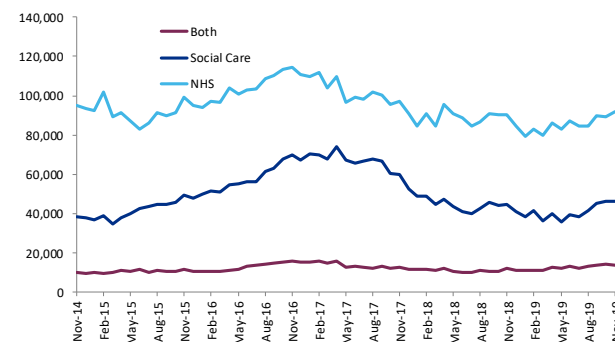
C1 response times (mean and 90th centile)

mm:ss

Source: Monthly Ambulance Quality Indicators, NHS England and NHS Improvement

Quality

Delayed Transfers of Care (DTOC)

- There were 145,876 delayed days in November 2019, compared with 136,183 in November 2018. This is an increase of 7.1%.

- These days equate to a daily average of 4,863 beds occupied by DTOC patients in November 2019 and 4,539 in November 2018.

- The proportion of delays attributable to NHS in November 2019 was 60.2% (down from 62.0% in November 2018). The remaining delays were attributed as follows: 30.1% Social Care (up from 30.0% in November 2018) and 9.7% Both (up from 8.0% in November 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 November 2019 was "Patients Awaiting Care Package in Own Home", which accounted for 30,375 delayed days (20.8% of all delays). 45.7% of delays for this reason are attributable to Social Care, 32.1% to NHS and 22.2% to Both.

Access

Referral to Treatment (RTT)

- 1.4m patients started consultant-led treatment in November 2019. There were 16.6m completed RTT pathways in the 12 months to November 2019. Having taken account of trusts not submitting data, the total number of completed RTT pathways in the 12 months to November 2019 is estimated at 17.1m, an increase of 2.9% over the previous year.

- Of patients on the waiting list at the end of November 2019, 84.4% had been waiting less than 18 weeks, thus not meeting the 92% standard. This compares to 87.3% at the end of November 2018.

- The number of RTT patients waiting to start treatment at the end of November 2019 was 4.4 million. Taking account of trusts not submitting data, the total waiting list at the end of November is estimated at 4.6 million, an increase of 6.0% over the equivalent figure for November 2018.

- The number of patients on the waiting list who were waiting under 18 weeks increased between November 2018 and November 2019 from 3.6m to 3.7m, and the number of patients waiting over 18 weeks rose from 528,000 to 690,000. This comparison will be affected by differences in the trusts not submitting data in each period.

- 1,398 patients were waiting more than 52 weeks. This compares to 2,431 in November 2018, and 362 patients five years ago (November 2014). This comparison will be affected by differences in the trusts not submitting information in each period.
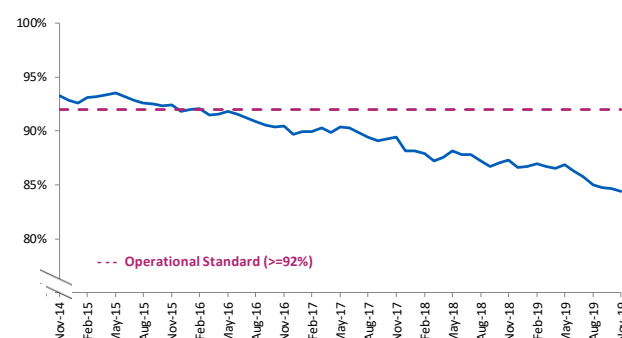
Number of patients starting RTT treatment

Including estimates for missing data
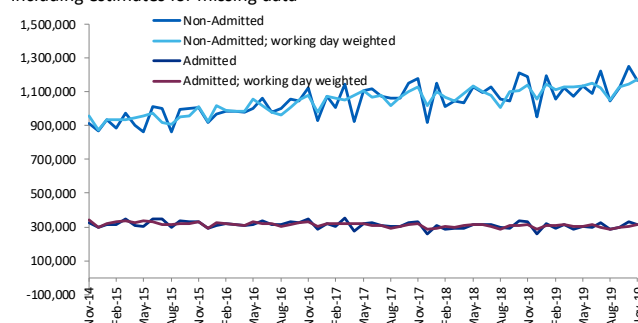
Source: Consultant-led Referral to Treatment Waiting Times, NHS England and NHS Improvement

% incomplete pathways within 18 wks

Published figures, no adjustments for missing data

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

Diagnostic Tests

- Over 2.0 million diagnostic tests were undertaken in November 2019, an increase of 1.6% on the previous year (6.4% when 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).

- 2.9% of the patients waiting for one of the 15 key diagnostic tests at the end of November 2019 had been waiting six weeks or longer from referral, compared with the operational standard of less than 1%.

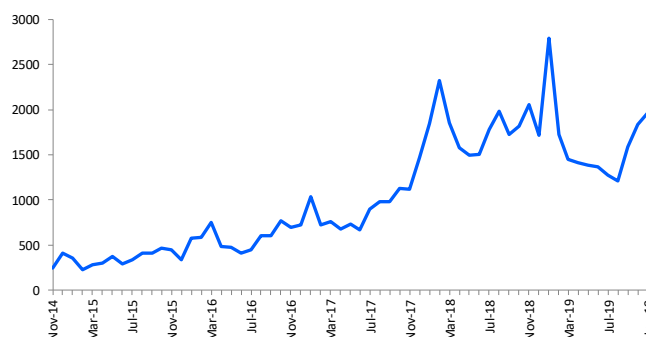**Total diagnostic test activity and working day adjusted activity**
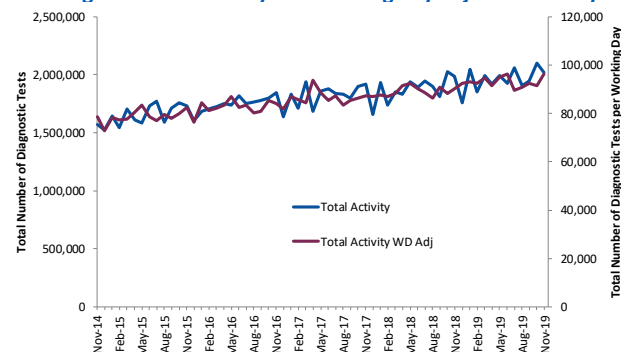
Source: Monthly Diagnostic Waiting Times & Activity, NHS England and NHS Improvement

Quality

Mixed Sex Accommodation (MSA)

- In November 2019, providers of NHS-funded healthcare reported 1,968 breaches of MSA guidance in relation to NHS patients in sleeping accommodation. This compares to 1,840 in October 2019 and 250 in November 2014.

- Of the 144 acute trusts that submitted data for October 2019, 87 (60.4%) reported zero sleeping breaches.

- The MSA breach rate in November 2019 was 1.1 per 1,000 finished consultant episodes. This compares to 1.0 in October 2019 and 0.2 in November 2014.

Total mixed sex accommodation breaches

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

- 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

These statistics are published quarterly by NHS England.

- The total number of Decision Support Tools (DSTs) completed for the Standard NHS CHC assessment route was 14,655 in Q2 2019/20. Of these, 910 (6%) were completed in an acute hospital setting (down from 7% in Q1 2019/20).

- Of the 18,366 Standard NHS CHC referrals completed in Q2 2019/20, 14,570 (79%) were completed within 28 calendar days (up from 76% in Q1 2019/20).

- The number of incomplete Standard NHS CHC referrals exceeding 28 calendar days was 1,601 as at the last day of Q2 2019/20. Of these: 397 exceeded by up to 2 weeks; 277 exceeded by more than 2 weeks and up to 4 weeks; 478 exceeded by more than 4 weeks and up to 12 weeks; 212 exceeded by more than 12 weeks and up to 26 weeks; 237 exceeded by more than 26 weeks.

- The total number of people eligible for NHS CHC was 57,016 as at the last day of Q2 2019/20 (up from 55,872 in Q1 2019/20). Of these, 36,624 were eligible via the Standard NHS CHC assessment route and 20,392 were eligible via the Fast Track assessment route.

- The Fast Track referral conversion rate was 95% in Q2 2019/20 (down from 96% in Q1 2019/20).

- The Standard NHS CHC assessment conversion rate was 24% in Q2 2019/20 (unchanged from 24% in Q1 2019/20).

- The total number of people eligible for NHS-funded Nursing Care was 80,769 as at the last day of Q2 2019/20 (up from 79,326 in Q1 2019/20).
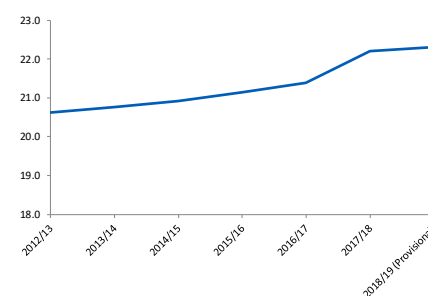
Patient Reported Outcome Measures (PROMs)

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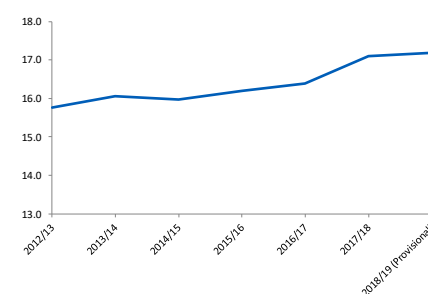
Oxford Hip Score, 2012/13 to 2018/19 (Provisional)

Source: Patient Reported Outcome Measures, NHS Digital

PROMs Knee Replacement Procedures, Average Health Gain

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

Source: Patient Reported Outcome Measures, NHS Digital

Cancer

Access

Cancer Waiting Times

- Two week wait: 201,395 people were seen following an urgent referral for suspected cancer in November 2019. There were 2,363,147 people seen in the 12 months to November 2019, an increase of 10.2% or 217,948 more patients (10.6% when adjusted for working days) on the previous 12 months period.

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

Source: Monthly Cancer Waiting Times, NHS England and NHS Improvement

- 91.3% of people in November 2019 were seen by a specialist within two weeks of an urgent GP referral for suspected cancer. This compares to 92.5% at the end of November 2018. The operational standard specifies that 93% of patients should be seen within this time.

- 31 day wait: 25,551 patients started a first definitive treatment for a new primary cancer in November 2019. There were 309,711 patients who received first treatments in the 12 months to November 2019, an increase of 1.0% or 2,950 additional patients (1.4% when adjusted for working days), on the previous 12 month period.

- 95.9% of patients in November 2019 received a first definitive treatment for a new primary cancer. This compares to 96.6% at the end of November 2018. The operational standard specifies that 96% of patients should be treated within this time.

- 62 day wait: 13,432 patients received a first treatment for cancer following an urgent GP referral in November 2019. There were 163,170 patients who received first treatments for cancer following an urgent GP referral in the 12 months to November 2019, an increase of 2.5% or 4,043 additional patients (2.9% when adjusted for working days), on the previous 12 month period.

- 77.4% of patients received a first definitive treatment for cancer following an urgent GP referral for suspected cancer within 62 days in November 2019, this equates to 10,392 patients being treated within the standard. This compares to 79.4% at the end of November 2018. The operational standard specifies that 85% of patients should be treated within this time.

- There are 252 working days from December 2018 to November 2019, and 253 working days on the previous 12-month period from December 2017 to November 2018, therefore working day adjustment is needed for 12 month comparisons.
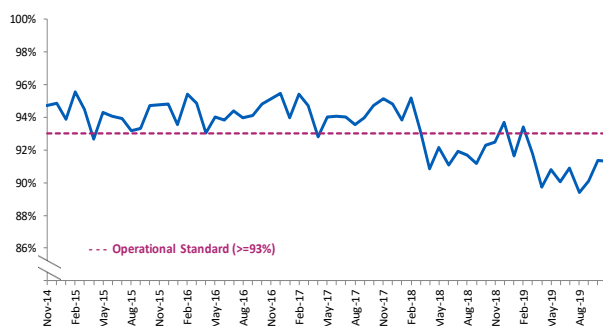
Cancer Registration Statistics

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 non-melanoma 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
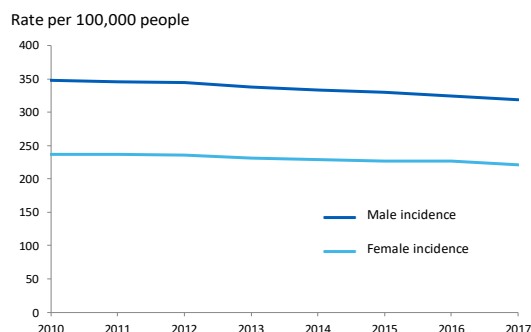
Source: Office for National Statistics

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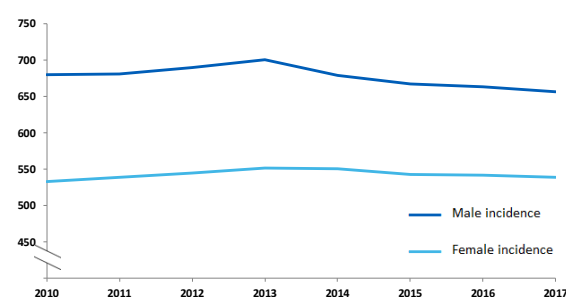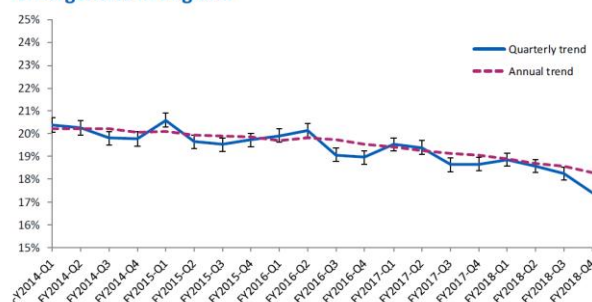

Source: Office for National Statistics

* 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 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

Quality

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 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.

- 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.

Figure 4: Smoothed trends in 1-, 5- and 10-year age-standardised survival (%) for children (aged 0 to 14 years) diagnosed with cancer in England between 2001 and 2018

Net survival (%)

— 1-year survival — 5-year survival — 10-year survival
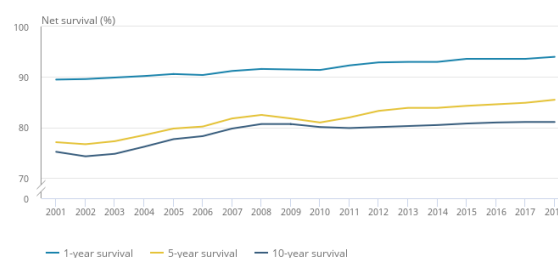
Source: National Cancer Registration and Analysis Service within Public Health England; Office for National Statistics

Mental Health

Access

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 2019 and reports that there were 720 Out of Area Placements (OAPs) active, of which 675 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, 53 organisations have participated in this collection out of 57 organisations in scope. This means that 93 per cent of organisations have participated.

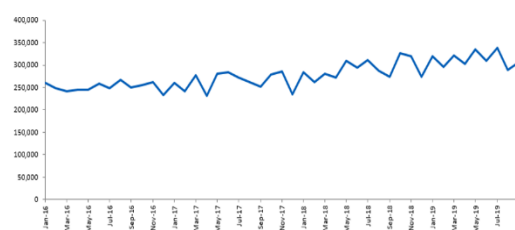## Children and Young People with an Eating Disorder

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.

- 75.1% of patients started urgent treatment within one week in Q2 2019-20. This compares to 77.7% in Q1 2019-20 and 81.3% in Q2 2018-19.

Mental Health Services – Contacts and Referrals

These statistics are restricted until 9.30am on 9th January 2019 and are published by NHS Digital.

- The number of new referrals into NHS funded secondary mental health, learning disabilities and autism services during October 2019 was 352,995. This is an increase of 13.3% (41,506) compared to the average number of new referrals per month between October 2018 and September 2019.

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

- 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 October 2019 was 1,368,380. This is an increase of 21,758 compared to the average number of people in contact at the end of each month between October 2018 and September 2019.
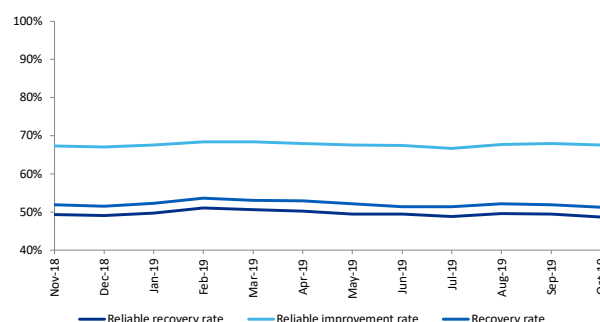
Quality

Improving Access to Psychological Therapies (IAPT)

These statistics are restricted until 9.30 on 09 January 2020 and are published by NHS Digital.

- 51.3% of referrals recovered in October 2019, compared to 52.1% in 2018-19, 50.8% in 2017-18, 49.3% in 2016-17 and 46.3% in 2015-16.

- 67.5% of referrals reliably improved in October 2019, compared to 67.4% in 2018-19, 66.4% in 2017-18, 65.1% in 2016-17 and 62.2% in 2015-16.

- 48.7% of referrals reliably recovered in October 2019, compared to 49.5% in 2018-19, 48.3% in 2017-18, 47.0% in 2016-17 and 44.0% in 2015-16.

Outcomes in Psychological Therapies (IAPT)

Source: Improving Access to Psychological Therapies dataset, NHS Digital

- 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 217,979 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 November 2019 show the number of people on the SMI register who receive health checks in the 12 months to the end of September 2019.

- This is the fourth publication of this data; the data are developing in terms of completeness and accuracy – 190 of 191 CCGs supplied data which met quality assurance standards, representing approximately 95.2% of the GP registered SMI population.

- 30.0% of people on GP SMI registers received the complete list of physical health checks in the 12 months to the end of 2019/20 Q2.

- The percentage of patients accessing health checks is stable compared with 2019/20 Q1. This will, in part, be due to developing processes to collect this data and caution should be used when interpreting this information.