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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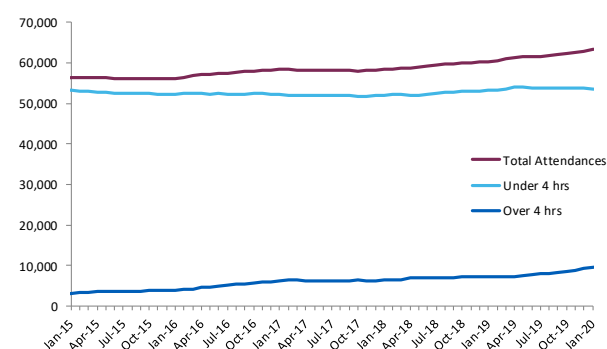

Urgent and Emergency Care

Access

Accident and Emergency

- There were 2.11m attendances in January 2020, 0.1% more than in January 2019 (-1.3% and 2.3% for Type 1 and Type 3 respectively). Attendances in the last 12 months were 4.3% higher than the preceding 12 month period (4.2% and 4.8% for Type 1 and Type 3 respectively).

- There were 559,058 emergency admissions in January 2020, 0.9% fewer than in January 2019. Admissions in the last 12 months period were up 3.4% 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 3.8% December 2019 YTD growth in emergency admissions. This is composed of 7.4% 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 1.56m – 81.7% of the total. This is a 3.0% decrease on the equivalent figure for January 2019 (1.60m seen within 4 hours). Of these 836,418 were type 1 attendances, a decrease of 7.2% from January 2019 and 676,872 type 3 attendances, an increase of 2.2% from January 2019. These are adjusted for CRS field testing sites which haven't submitted breach data.

- There were 100,578 patients waiting more than 4 hours from decision to admit to admission (20.4% higher than January 2019. Of these, 2,846 patients waited more than 12 hours (353.9% higher than in January 2019). This is the highest level of four-hour and over twelve hours delays from decision to admit to admission the collection began.

NHS 111

- There were 1.5m calls offered in England in January 2020. This was an average of 48.5 thousand calls per day. There were 17.6m calls in the 12 months to January 2020, 4.7% higher than in the previous 12 months.

- Of calls offered to NHS 111 in January 2020, the proportion abandoned after waiting longer than 30 seconds was 3.2% compared with 3.5% in January 2019. Of calls answered by NHS 111 in January 2020, 85.2% were answered within 60 seconds, compared with 80.7% in January 2019.

- Of calls triaged, the proportion that received any form of clinical input was 52.5% in January 2020, compared with 53.6% in January 2019.

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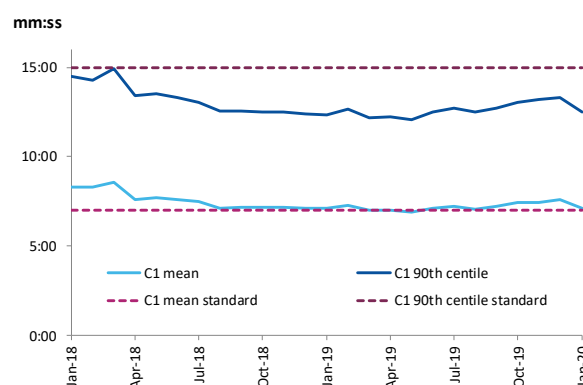
Ambulances

- There were 750,238 incidents in England in January 2020 (24,201 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 8 seconds for Category 1 and 21 minutes 5 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 September 2019, the proportion discharged alive from hospital was 10.3%.
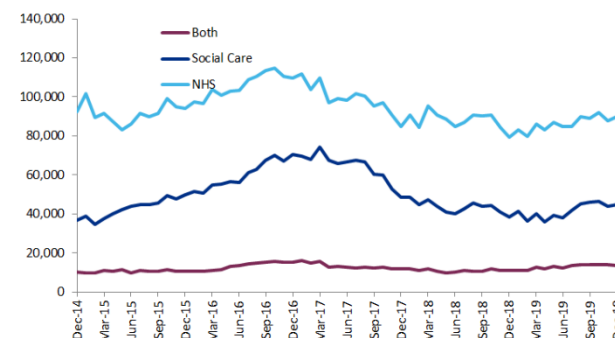
C1 response times (mean and 90th centile)

mm:ss

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

Quality

Delayed Transfers of Care (DTOC)

- There were 148,101 delayed days in December 2019, compared with 128,799 in December 2018. This is an increase of 15.0%.

- These days equate to a daily average of 4,777 beds occupied by DTOC patients in December 2019 and 4,155 in December 2018.

- The proportion of delays attributable to NHS in December 2019 was 60.6% (down from 61.5% in December 2018). The remaining delays were attributed as follows: 30.3% Social Care (up from 29.9% in December 2018) and 9.1% Both (up from 8.6% in December 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 December 2019 was "Patients Awaiting Care Package in Own Home", which accounted for 31,393 delayed days (21.2% of all delays). 46.9% of delays for this reason are attributable to Social Care, 30.8% to NHS and 22.3% to Both.
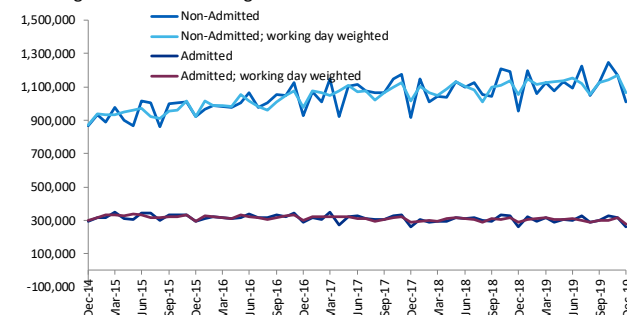
Planned Care

Access

Referral to Treatment (RTT)

- 1.2m patients started consultant-led treatment in December 2019. There were 16.6m completed RTT pathways in the 12 months to December 2019. Having taken account of trusts not submitting data, the total number of completed RTT pathways in the 12 months to December 2019 is estimated at 17.1m, an increase of 2.7% over the previous year.

- Of patients on the waiting list at the end of December 2019, 83.7% had been waiting less than 18 weeks, thus not meeting the 92% standard. This compares to 86.6% at the end of December 2018.

- The number of RTT patients waiting to start treatment at the end of December 2019 was 4.4 million. Taking account of trusts not submitting data, the total waiting list at the end of December is estimated at 4.6 million, an increase of 6.6% over the equivalent figure for December 2018.

- The number of patients on the waiting list who were waiting under 18 weeks increased between December 2018 and December 2019 from 3.6m to 3.7m, and the number of patients waiting over 18 weeks rose from 556,000 to 722,000. This comparison will be affected by differences in the trusts not submitting data in each period.

- 1,467 patients were waiting more than 52 weeks. This compares to 2,237 in December 2018, and 399 patients five years ago (December 2014). This comparison will be affected by differences in the trusts not submitting information in each period.

Diagnostic Tests

- Over 1.8 million diagnostic tests were undertaken in December 2019, an increase of 4.6% on the previous year (-0.6% when adjusted for working days)

- The number of tests conducted over the last twelve months has increased by 4.4% on the preceding 12-month period.

- 4.2% of the patients waiting for one of the 15 key diagnostic tests at the end of December 2019 had been waiting six weeks or longer from referral, compared with the operational standard of less than 1%.

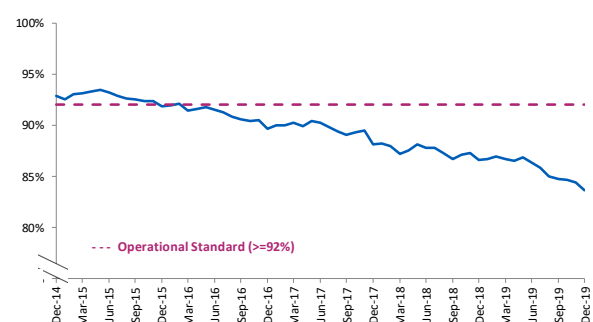**Number of patients starting RTT treatment**

Including estimates for missing data

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

% incomplete pathways within 18 wks

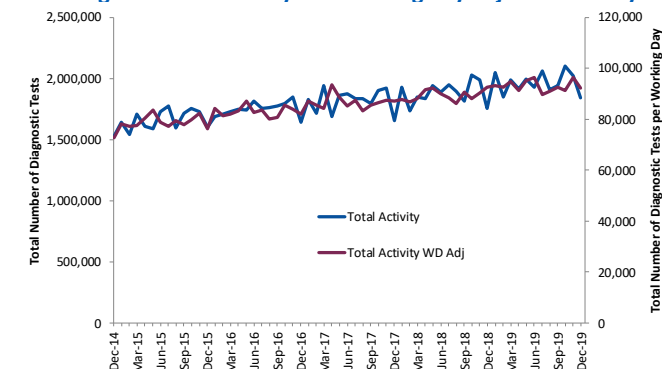Published figures, no adjustments for missing data

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

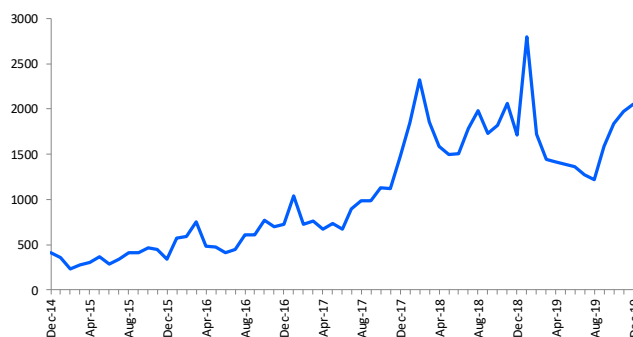**Total diagnostic test activity and working day adjusted activity**

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

Quality

Mixed Sex Accommodation (MSA)

- In December 2019, providers of NHS-funded healthcare reported 2,054 breaches of MSA guidance in relation to NHS patients in sleeping accommodation. This compares to 1,968 in November 2019 and 414 in December 2014.

- Of the 143 acute trusts that submitted data for October 2019, 90 (62.9%) reported zero sleeping breaches.

- The MSA breach rate in December 2019 was 1.2 per 1,000 finished consultant episodes. This compares to 1.1 in November 2019 and 0.3 in December 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 14,008 in Q3 2019/20. Of these, 724 (5%) were completed in an acute hospital setting (down from 6% in Q2 2019/20).

- Of the 18,427 Standard NHS CHC referrals completed in Q3 2019/20, 14,523 (79%) were completed within 28 calendar days (unchanged from 79% in Q2 2019/20).

- The number of incomplete Standard NHS CHC referrals exceeding 28 calendar days was 1,854 as at the last day of Q3 2019/20. Of these: 526 exceeded by up to 2 weeks; 310 exceeded by more than 2 weeks and up to 4 weeks; 544 exceeded by more than 4 weeks and up to 12 weeks; 216 exceeded by more than 12 weeks and up to 26 weeks; 258 exceeded by more than 26 weeks.

- The total number of people eligible for NHS CHC was 55,156 as at the last day of Q3 2019/20 (down from 57,016 in Q2 2019/20). Of these, 36,603 were eligible via the Standard NHS CHC assessment route and 18,553 were eligible via the Fast Track assessment route.

- The Fast Track referral conversion rate was 94% in Q3 2019/20 (down from 95% in Q2 2019/20).

- The Standard NHS CHC assessment conversion rate was 24% in Q3 2019/20 (unchanged from 24% in Q2 2019/20).

- The total number of people eligible for NHS-funded Nursing Care was 79,951 as at the last day of Q3 2019/20 (down from 80,769 in Q2 2019/20).
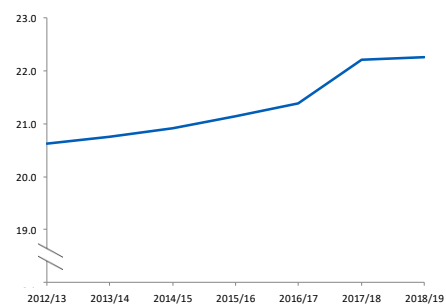
Patient Reported Outcome Measures (PROMs)

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.

- 2018/19 data is finalised in February 2020, due to post-operative questionnaires being sent out 6 months after the procedure took place. The above charts contain all data returned to NHS Digital up to December 2019.

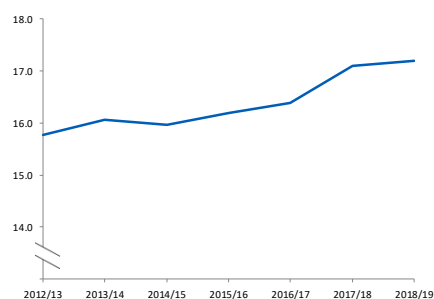**PROMs Hip Replacement Procedures, Average Health Gain**

Oxford Hip Score, 2012/13 to 2018/19

Source: Patient Reported Outcome Measures, NHS Digital

PROMs Knee Replacement Procedures, Average Health Gain

Oxford Knee Score, 2012/13 to 2018/19
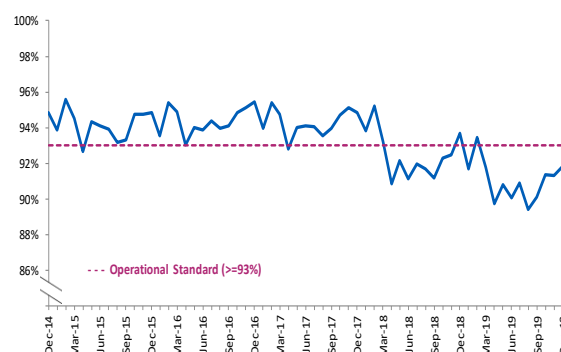

Source: Patient Reported Outcome Measures, NHS Digital

Access

Cancer Waiting Times

- Two week wait: 187,789 people were seen following an urgent referral for suspected cancer in December 2019. There were 2,379,069 people seen in the 12 months to December 2019, an increase of 9.6% or 207,422 more patients on the previous 12 months period.
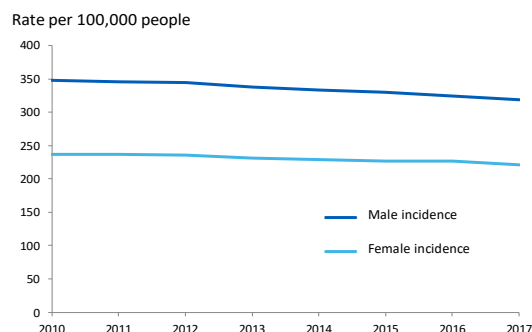
- 91.8% of people in December 2019 were seen by a specialist within two weeks of an urgent GP referral for suspected cancer. This compares to 93.7% at the end of December 2018. The operational standard specifies that 93% of patients should be seen within this time.

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

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

- 31 day wait: 24,321 patients started a first definitive treatment for a new primary cancer in December 2019. There were 310,310 patients who received first treatments in the 12 months to December 2019, an increase of 0.7% or 2,203 additional patients, on the previous 12 month period.

- 95.97% of patients in December 2019 received a first definitive treatment for a new primary cancer. This compares to 97.1% at the end of December 2018. The operational standard specifies that 96% of patients should be treated within this time.

- 62 day wait: 12,865 patients received a first treatment for cancer following an urgent GP referral in December 2019. There were 163,614 patients who received first treatments for cancer following an urgent GP referral in the 12 months to December 2019, an increase of 2.1% or 3,330 additional patients, on the previous 12 month period.

- 78.0% of patients received a first definitive treatment for cancer following an urgent GP referral for suspected cancer within 62 days in December 2019, this equates to 10,034 patients being treated within the standard. This compares to 81.0% at the end of December 2018. The operational standard specifies that 85% of patients should be treated within this time.

- There are 253 working days from January 2019 to December 2019, and 253 working days on the previous 12-month period from January 2018 to December 2018, therefore no 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.
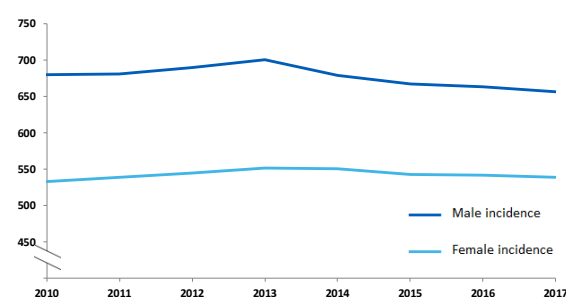
- Generally, cancer registrations have increased following advances in medicine which have resulted in an ageing population and improved detection of cancers. Advances in medicine and early detection of cancers have reduced the number of people dying from the disease.

- 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

Rate per 100,000 people

Source: Office for National Statistics

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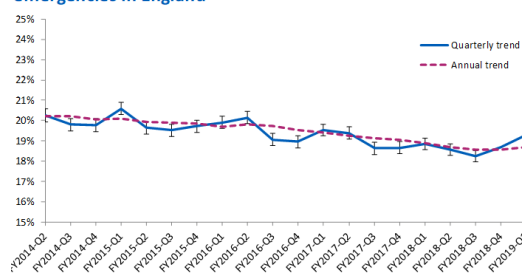

Source: Office for National Statistics

* 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 April to June 2019, of 69,887 cancer patients first presenting at hospital in England, 13,480 (19.3%) 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 July to June 2014/2015 to 18.7% in July to June 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 (April to June 2019); across the 191 CCGs the proportion varied from 13.2% to 27.1%.

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

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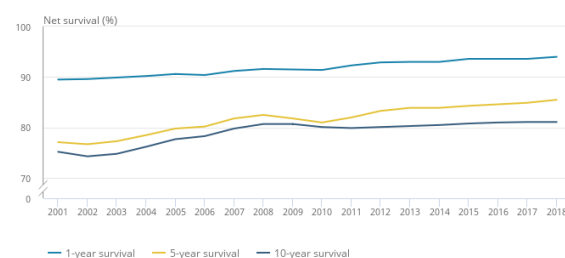
Quality

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

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 November 2019 and reports that there were 660 Out of Area Placements (OAPs) active, of which 635 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

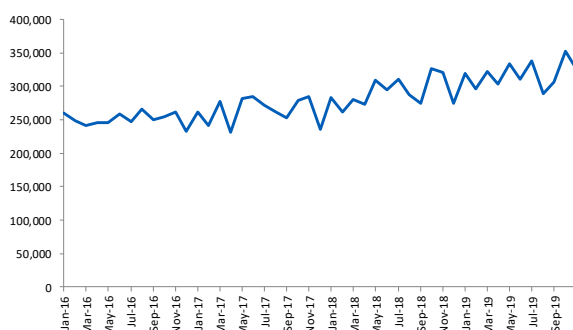*These statistics are published quarterly by NHS England.*

- 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.

- 73.5% of patients started urgent treatment within one week in Q3 2019-20. This compares to 75.1% in Q2 2019-20 and 80.7% in Q3 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 November 2019 was 326,614. This is an increase of 4.1% (12,896) compared to the average number of new referrals per month between November 2018 and October 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.

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 30th November 2019 was 1,378,553. This is an increase of 26,375 compared to the average number of people in contact at the end of each month between November 2018 and October 2019.
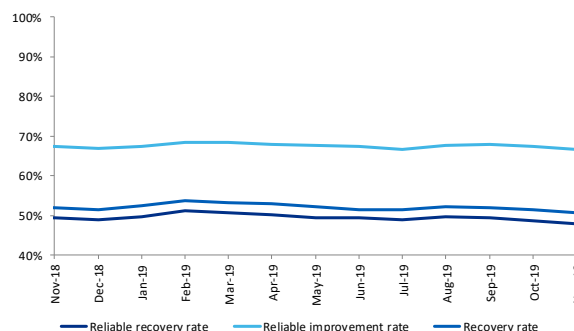
Quality

Improving Access to Psychological Therapies (IAPT)

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

- 50.6% of referrals recovered in November 2019, compared to 52.1% in 2018-19, 50.8% in 2017-18, 49.3% in 2016-17 and 46.3% in 2015-16.

- 66.6% of referrals reliably improved in November 2019, compared to 67.4% in 2018-19, 66.4% in 2017-18, 65.1% in 2016-17 and 62.2% in 2015-16.

- 47.9% of referrals reliably recovered in November 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 February 2020 show the number of people on the SMI register who receive health checks in the 12 months to the end of December 2019.

- This is the fifth publication of this data; the data has been supplied by all CCGs for the first time, covering 95.8% of the estimated GP SMI population.

- 32.3% of people on GP SMI registers received the complete list of physical health checks in the 12 months to the end of 2019/20 Q3.

- The percentage of patients accessing health checks has risen slightly compared with 2019/20 Q2 (30.0%). This will, in part, be due to developing processes to collect this data and caution should be used when interpreting this information.