

NHS ENGLAND – Board Paper

Title:

NHS performance and progress on the implementation of 'Next Steps on the NHS Five Year Forward View'

Lead Director:

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Purpose of Paper:

To provide the Board with a summary of NHS performance and give assurance on the actions being taken by NHS England and partners to recover, sustain or improve standards.

To provide the Board with an update on implementation of the key commitments included in 'Next Steps on the NHS Five Year Forward View'.

The Board is invited to:

Note the contents of this report and receive assurance on NHS England's actions to support NHS performance and progress with the implementation of 'Next Steps'.

NHS performance and implementation of 'Next Steps'

Introduction

1. 'Next Steps on the NHS Five Year Forward View' published in March 2017, is NHS England's business plan for 2017/18 and 2018/19. It sets out a range of specific commitments for improving the NHS over the next two years.
2. This paper focuses on the progress we are making in addressing the following priorities identified in 'Next Steps':
 - Urgent and emergency care
 - Primary care
 - Cancer
 - Mental health
 - Integrating care locally
 - Information and technology
3. Current NHS performance is incorporated in this report. In addition, we publish comprehensive statistics regarding NHS performance on our website: <https://www.england.nhs.uk/statistics/statistical-work-areas/combined-performance-summary/>

Urgent and emergency care

4. The Urgent and Emergency Care (UEC) programme brings together all of the ongoing UEC work across the organisations and wider system into a coherent strategy to drive UEC transformation and A&E performance improvement. We are delivering transformation at all points of the pathway for UEC, to ensure that it is clear where patients can access services that best meet their urgent care needs.
5. The NHS continues to see and treat, admit, transfer or discharge more than 9 out of 10 patients (90.1%) who attend A&E within four hours, up from 89.1% at the same time last year and 85% in March 2017 when 'Next Steps' was published. There was a growth of 0.9% in attendances to type 1 A&E departments from the same month last year, with improved recording of attendances to other urgent care settings resulting in an overall growth of 3.3%. The service continues to cope well with performance remaining stable.
6. The following sections set out more information about progress against the elements of UEC transformation as set out in Next Steps:
 - In September 2017, 122 trusts with a type 1 A&E department **had front-door clinical streaming services in place**, with the majority of remaining trusts still being on track to have a service in place by the end of 2017.
 - 'Next Steps' set out an expectation that NHS and social care will collectively free up **2,000 - 3,000 beds**, which will be delivered equally by the NHS and social care. Since February 2017, we have therefore been tracking the number of beds freed up as a result of **delayed transfers of care (DTC)** reductions. From February to September 2017, there have been 1,035 beds freed up by reducing DTCs, and DTC delayed days are at their lowest since April 2016. Of these 1,035 beds freed up, 534 have been delivered by

the NHS, social care have delivered 383 and the remaining have been jointly delivered.

- We remain on track to deliver our ambition of 24 hour **'Core 24' mental health liaison teams** to 50% of acute hospitals by 2021. To date, £30m transformation funding has been awarded to 74 hospital sites from 2017-2019. This will cover almost half of all hospitals by 2019.
- More people are calling **NHS 111** for advice and treatment on their urgent care needs. October 2017 saw an increase of 0.7% in calls against the same period of the previous year, with an average of 40,000 calls per day up from 38,900 in September 2017. The proportion of calls receiving clinical input has increased in a tenth month in a row to 37.1% in October 2017 against a target of 30%.
- The **Ambulance Response Programme (ARP)** continues to be implemented with a new set of operating standards. Following the announcement of ARP, six trusts are operational with a further four trusts going live by the end of the year. We are also implementing 'see and treat' services with paramedics, and in September 2017, 570,827 emergency calls received a face-to-face response from the ambulance service.
- 104 **Urgent Treatment Centres (UTCs)** will be designated according to the revised standards in time for the Christmas period. A core component of the revised standards is the ability to book directly into these services from the wider urgent and emergency care network, including NHS 111.

Primary care

7. The Primary Care Programme is supporting the delivery of the General Practice Forward View by increasing investment in primary care services, developing an increased and expanded workforce and supporting the improvement of access, services and premises.
 - In 2017/18 we continue **to increase investment in GP services**, a further step towards our overall ambition that by 2020/21 funding will rise by 14% in real terms to £2.4 billion. Latest figures published show that in 2016/17, total GP investment was £81m above the funding profile set out in the General Practice Forward View, a 3.2% real terms increase on the previous year. This is the fourth real terms annual increase in a row. Investment in general practice is up 13.9% since the creation of NHS England in 2013/14.
 - As at 30 September 2017 **extended access** contracts are currently delivering seven day extended access to 47% of the registered population across England. By December 2017, we anticipate that this will have risen to 52% of the population will be able to access evening and weekend general practice services and by March 2018, nearly 60% of the population will be benefiting from extended access. This is ahead of our commitment to ensure 50% coverage by March 2018. We are also on track to meet the commitment to provide extended access to 100% of the population by March 2019.
 - Following the announcement in August 2017 of the expansion of **international recruitment** to boost GP numbers, work is progressing on implementing the international doctors' recruitment framework. The North of England and South Central & West CSUs have been appointed to support the international recruitment expansion programme. Bids for inclusion in the internal recruitment framework of suppliers have been evaluated, with contracts due to be issued by the end of November.

Cancer

8. In September 2017, 94% of patients with a suspected cancer were seen by a specialist within two weeks of an urgent GP referral, against a standard of 92%, with 5.3% more patients being seen in the 12 months to September 2017 than in the previous 12 months. In addition, there has been a 4.4% increase in patients receiving a first treatment for cancer following an urgent referral.
9. We continue to focus specifically on recovery of the **cancer 62 day** from referral to treatment standard. September 2017 performance was 82% against a standard of 85%. Over £16m has now been invested through the regional teams to drive recovery of the standard. Since April, activity has increased as a result of this renewed focus. However, backlog clearances to date have not been sufficient for recovery of the standard to be achieved. Therefore, in addition to the regional action being taken to drive delivery of recovery plans and reduce backlogs, we will be investing specifically to improve the lung and prostate pathways, which account for a high proportion of breaches, in the most challenged systems. In addition to improvements in performance against the target, the number of patients waiting over 62 days for their treatment has fallen by 2,287 since May 2017, a reduction of almost 25%.
10. In October 2016, NHS England announced a £130 million investment in **modernising radiotherapy** over two years to fight cancer and cure more patients, and in early 2017, the first 23 hospitals received new or upgraded equipment. In Next Steps, we committed to rolling out a further 50 new radiotherapy machines in at least 34 hospitals over the 18 months to October 2018. So far in 2017/18, we have allocated funding for 23 replacement machines in 20 Trusts.
11. Transformation funding for improving **early diagnosis** has been agreed and implementation commenced for over half of the Cancer Alliances and vanguard partnerships. In addition, half of the Cancer Alliance and vanguard partnerships have had funding confirmed to support the roll out of **personalised follow up** after cancer treatment, which will result in patients receiving the type of follow-up care that is most suited to their needs.
12. 'Next Steps' commits to the introduction of 10 new **multidisciplinary rapid diagnostic and assessment centres** across England by March 2018. Through the Accelerate, Coordinate, Evaluate (ACE) Wave 2 programme (a partnership between NHS England, Cancer Research UK and Macmillan Cancer Support), nine centres have been set up and have begun to take patients with complex symptoms through to diagnosis.
13. Work is ongoing to agree the introductory sensitivity level for the new test (FIT) which will be rolled out in the **bowel cancer screening** programme, including carrying out an impact assessment. Pilots suggest that the new test will increase participation, particularly in communities that have not responded previously, suggesting it will contribute to the reduction of inequalities in screening and cancer mortality outcomes.
14. Progress continues to be made on supporting faster diagnoses of cancer for patients. The new system to implement the **28 day Faster Diagnosis Standard** will

go live from April 2018, ahead of full monitoring against the new standard from April 2020.

Mental health

15. Since introduction of the first access **standards for mental health**, we are on track for delivery in 2020/21.
16. All STPs are planning to achieve the 2017/18 trajectory for commitment to see 70,000 more **children and young people** (CYP) by 2020/21. There are now 70 CYP **Eating Disorder** teams in operation. The proportion of CYP accessing treatment within four weeks (for routine cases) rose to 82.4%, an improvement on the previous quarter.
17. 76.7% of people started treatment for **early intervention in psychosis** within 2 weeks in September 2017, above the national standard of 50% and an increase on the July position.
18. All **IAPT recovery** and access standards were exceeded during the last reporting period. The **rolling quarterly access rate** of 3.75% was met in July 2017 at 4.19%, working towards achievement of the cumulative 16.8% annual access rate by Q4 2017/18. The **50% recovery target** was met for the first time in March 2017 and has been maintained through to July 2017 with a rate of 50.4%. 88.8% of people **had their first treatment within six weeks of referral** (target of 75%) and 99% of people **received treatment within 18 weeks** (95%).
19. A key challenge of the IAPT programme is supporting the development of **IAPT** support for people with **Long Term Conditions (IAPT – LTC)**. The IAPT programme has worked closely with all early implementers sites (22 in Wave 1 and 15 in Wave 2) and Health Education England (HEE) to ensure that as many training places as possible are delivered in 2017/18. The IAPT programme has also engaged with non-implementers sites to promote IAPT - LTC across the country.
20. The Adult Mental Health Programme and Regional teams are agreeing trajectories with STPs for the elimination of adult non-specialist **out of area placements** (OAPs) for mental health services. Finalised OAPs plans will be incorporated in STP plans for 2018/19 to track a 33% reduction each year from April 2018. Additional New Care Models sites have gone live from 1 October, with a specific focus on reducing the number of out of area placements. These sites cover five child and adolescent mental health services, two adult secure services and one eating disorder service.
21. Contracts were awarded to preferred providers for the development of four new **mental health mother and baby units** expected to open in 2018: Kent and Medway NHS & Social Care Partnership Trust, Devon NHS Partnership Trust, Lancashire Care NHS Foundation Trust and Norfolk & Suffolk NHS Foundation Trust. We are on track to deliver funding for the establishment and enhancement of **community perinatal health teams** by the end of 2017/18 which will support women to receive specialist perinatal care.

Integrating care locally

22. Memorandums of understanding (MOUs) have now been signed with seven Accountable Care Systems (ACSs). These systems will work in shadow form to jointly plan for and deliver services across their populations for the remainder of 2017/18. It is anticipated that these systems will be formerly designated at full ACSs from April 2018. Another system (Dorset) is expected to sign an MOU during November.
23. All ACSs are liaising with NHS England to confirm that appropriate governance is in place to enable the release of their delegated transformation funding. This will support these systems to jointly provide optimal delivery of services across their populations.

Information and technology

24. The programmes set out above are underpinned by a comprehensive information and technology plan, centred on supporting people to manage their own health, digitising our hospitals and supporting the delivery of NHS priorities.
 - For the first time, an '**Apps Library**' for the NHS has been launched in beta form. There are currently 43 NHS assessed apps available for download, which can be used by patients to support management of their health and wellbeing. A further 30 apps are currently being considered for inclusion.
 - Work continues to develop www.nhs.uk as the first point of contact for patients requiring information and advice about their health needs and available services. A significant number of people now use this site, with 44 million visits from 26 million visitors every month.
 - Our aim is to provide a consistent **online digital** experience for patients and the public. We are building a digital service, built on the NHS.uk platform, called **NHS Online**.
 - More than 12m people are already signed up, and more than 1m people use this service to **view their health records** each month.
 - **Free WiFi** services have been rolled out to over 1,500 general practices, enabling over 10m patients to get online whilst accessing their GP surgery. Plans are in place and on track to roll this out to the rest of the GP estate over the next few months. In addition, 16 secondary care providers are rolling out free WiFi under the programme.
 - We have also committed to testing an **online** version of the **NHS 111** service, enabling patients to self-triage and connect effectively into the wider urgent and emergency care system as required. Since March 2017, several different technologies have been piloted by over 25,000 patients in London, Leeds, Suffolk and the West Midlands. We are now phasing the roll out of this service across the country so that all patients are able to access these online tools by December 2018.
 - We are committed to enhancing the digital capability of providers in the NHS so that they are amongst the best users of digital technology worldwide. To date, we have approved 16 acute providers as **Global Digital Exemplars (GDEs)**. 16 further "fast follower" acute hospital and the first 7 mental health GDEs have been identified and are in the process of agreeing their MOUs before funding is released.

Recommendation

25. The Board is asked to note the contents of this report.