



## NHS England and NHS Improvement Board meetings held in common

**Paper Title:** Operational performance report

**Agenda item:** 2

**Report by:** Amanda Pritchard, Chief Operating Officer

**Paper type:** For discussion

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### **Summary/recommendation:**

This paper provides a summary of the already published data covering the period to October 2019.

It has previously been published.

The Boards in common are asked to **NOTE** the content of this report.

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### **Urgent and Emergency Care**

1. 4-hour A&E performance for October 2019 was 83.6% and continues to be very pressurised. Comparing October 2019 to October 2018 shows a growth of 4.4% in total A&E attendances and 3.1% in total emergency admissions. Looking at 2019 year-to-date, the NHS has looked after over 212,000 more people within 4 hours compared to the same period last year.
2. Patients are now accessing a wider range of services. There are now 125 UTCs designated including Greater Manchester. Of these, 102 are able to accept directly booked appointments from Integrated Urgent Care services (NHS 111 controlled centres). A further 50 are planned to designate by the end of December 2019. Bookable appointments are not included in the 4-hour standard.
3. Non-elective admissions year-to-date (April – September 2019) for patients with a zero-day length of stay grew by 7.4% compared to the same period last year, while those with a length of stay of one day or more grew by only 1.5%. This reflects the continued drive to increase same day emergency care (SDEC) provision, helping to reduce unnecessary hospital admissions and occupied bed days.
4. The overall aim is to embed SDEC and Acute Frailty services in every acute hospital with a Type 1 A&E Department, increasing the proportion of acute admissions discharged on the day of attendance from a fifth to a third. Nationally 90% of providers are on track to have SDEC available for at least 12 hours a day, 7 days a week by the end of 2019, up from 75% in March 2019.

**NHS England and NHS Improvement**



72% of hospitals are on track to deliver expansion of same-day acute frailty services at least 70 hours a week by the end of 2019, up from 56% in March.

5. A higher number of flu vaccinations have been administered than at this same point last year.
6. 796,646 emergency (999) calls were answered in October 2019, which is an increase of over 67,000 calls compared to October 2018. In the year-to-date (April – October 2019) there were over 228,000 more calls answered than for the same period last year.
7. In October 2019, the NHS offered 1.4 million 111 calls, and in the year-to-date (April – October 2019) there were over 230,000 more calls than the same period last year. Clinical advice was provided in 53.7% of triaged calls (1.1m) in October 2019 up from 52.1% in October 2018.
8. Leadership mobilisation and cultural changes, at both a local and system level, are vital in helping to deliver this ambition. In support of this, a triumvirate leadership programme has been developed in conjunction with ACT and ECIST, which invites senior leadership from each acute Trust (Chief Operating Officer, Medical Director and Nursing/Allied Health Professional lead), to come together to discuss and encourage collaboration, to help push forward the reducing length of stay agenda within their Trust. These programmes will run across two days and are due to take place across three locations in England during December 2019.
9. Despite an increase in the number of incidents (5 million for the financial year to October 2019 compared to 4.8 million incidents in the same period in 2018), we have seen improved performance delivery in the ambulance sector in category C1, with mean response times and 90<sup>th</sup> percentile times lower than in the same period in 2018. In addition, category C4 response times are shorter than in the same months of 2018, and all trusts bar the Isle of Wight continue to regularly achieve the 90th centile standard for Category 1 response times. National performance against the Category 1 mean was 7 minutes and 25 seconds in October 2019.

### **Referral to Treatment**

10. Performance against the Referral to Treatment (RTT) waiting time standard saw 84.8% of patients waiting less than 18 weeks in September 2019. The total waiting list (excluding non-reporting organisations) increased by 9,000 from August 2019, to 4.4 million in September 2019. In the financial year-to-date to September 2019, there were just under 4.39 million total elective admissions, 111,433 or 2.6% more than in the previous year.
11. The NHS is treating more patients than ever before with a total of 16.4m patients having started elective treatment in 2018/19. This represents a 4.5% increase on the previous year, with 14.3m patients treated within the 18-week RTT national standard, surpassing the previous record (allowing for inclusion of estimated data for non-reporting trusts).

12. The NHS remains committed to eradicating the number of patients waiting 52 or more weeks. There has been a reduction of 63% in the number of patients waiting 52 weeks or more for treatment, from a peak last year in June 2018 (3,517), to the published September 2019 position of 1,305.
13. In line with the commitments in the *NHS Long Term Plan* (LTP), we are making progress to drive the re-design of outpatient care through a combination of: delivering services outside hospital settings, increasing use of telephone or video consultation to cut down on patient travel, and removing appointments of limited clinical value. All systems have now developed plans to deliver these LTP commitments.
14. In parallel to the formal set-up of a major programme to deliver this, practical change and improvement work is taking place in 2019/20 and we are already working with over 40 trusts across the country to drive the uptake of video consultation capabilities.
15. The elective care transformation programme continues. Capacity alerts, which aim to spread demand so that patients are seen and treated quickly, have been rolled out to 22 sites with a further 64 under review. First Contact Practitioner Services, which support patients with Musculoskeletal (MSK) conditions to be seen directly by a physiotherapist in primary care (without the need to see a GP or an onward referral for a hospital outpatient appointment) are being rolled out and is currently expected to achieve an 18% coverage across the country by March 2020, against a 15% ambition.
16. A national specification for Advice and Guidance services is being developed for publication in Q3 2019/20. This will enable GPs to access specialist advice in primary care without the need for a referral to hospital.
17. The NHS Long Term Plan affirmed and extended the NHS commitment to patient choice. Progress is now being made to ensure patients are given the additional option of an alternative provider at 26 weeks.

## **Cancer**

18. The Targeted Lung Health Checks (TLHC) programme launched in April 2019, setting up 10 projects across the country for those people most at risk of lung cancer. The TLHC programme will increase the number of lung cancers being diagnosed at an early stage, when curative treatment is available.
19. Cancer Alliance delivery plans to implement the Rapid Diagnostic Centre (RDC) service specification were agreed in October 2019. During 2019/20, each Cancer Alliance will set up at least one RDC for patients with serious non-specific symptoms which could indicate cancer – a new referral pathway - as well as applying the RDC principles to a locally-challenged two-week-wait or 62-day pathway. Nine RDCs are already operating across England.
20. New guidelines have been issued that consider the use of surveillance colonoscopies and bowel imaging in people who have had either bowel polyps or a bowel cancer removed. This approach has the potential to reduce demand

in endoscopy capacity in the symptomatic service by up to 75%. Cancer Alliances are working with trusts to drive implementation of the guidance by the end of 2019/20, with full implementation for all patients phased in across the year.

21. Access to personalised care interventions which support better patient outcomes and use of clinical capacity is increasing across the country. As at September 2019, holistic needs assessments were available in 92% of trusts for breast cancer and colorectal cancer and 87% of trusts for prostate cancer. Personalised care planning was available in 92% of trusts for breast cancer, and in 85% of trusts for colorectal and prostate cancers.
22. Cancer patient experience remains at a record high and respondents to the 2018 National Cancer Patient Experience Survey (CPES) reported an overall experience satisfaction level of 8.8 out of 10. The latest results, published in September 2019, show that the NHS is continuing to deliver high quality care in times of rising demand. For example, 91.4% of respondents reported having access to a Clinical Nurse Specialist. Trusts and Cancer Alliances are using CPES results to drive local service improvement, with work now underway to develop a CPES for Children and Young People.
23. Record-breaking levels of urgent cancer referrals and cancer treatments continue. Referrals are up in the 12 months to September 2019, by 12.2% compared to the same period a year ago, equivalent to 253,450 more people. Two-week wait performance increased by 0.7% from August 2019 to 90.1%.
24. On the 62-day cancer pathway, 162,106 patients received treatment in the 12 months to September 2019, 5,652 (3.6%) more than the previous year. 62-day performance in September 2019 was 76.9%.

## **Primary Care and System Transformation**

### **Primary Care Networks Establishment**

25. In the *NHS Long Term Plan* (LTP) Primary Care Networks (PCNs) were identified as an essential building block of every Integrated Care System (ICS). More than 99% of general practices have come together to form more than 1,200 PCNs nationwide. This has been supported by a comprehensive programme of national and regional engagement with local healthcare systems.
26. Following PCN establishment and the launch of the PCN Development Guidance and Prospectus in August 2019, regional colleagues are working with local systems to understand how PCNs are progressing and how ongoing development can best be supported. Planning is also underway to start to consider the needs of PCNs in 2020/21 and therefore what support maybe required in year two of the programme.

### **Integrating Care Locally**

27. NHS England and NHS Improvement continue to support systems to meet the

LTP ambition that ICSs will cover the whole of England by 2021. The System Diagnostic is a self-assessment against the attributes described in the ICS Maturity Matrix. To date 85% of systems have submitted self-assessments and by the end of December, we expect all STPs to have completed the diagnostic (five ICSs will remain outstanding). At this point all systems will have a good understanding of their trajectory to becoming an ICS.

28. NHS England and NHS Improvement have intensified and broadened their support to all local systems taking part in wave one of the 2019/20 ICS Accelerator Programme, aimed to support systems to boost their readiness towards becoming an ICS. Delivery for the programme commenced in September and some regional teams have begun nominating systems for subsequent cohorts.
29. NHS England, NHS Improvement and Public Health England are supporting 12 systems as part of a development programme for population health management. By the end of 2019/20 16 systems will have been supported to start to develop and embed population health management infrastructure and capability and make tangible changes to the care provided to local people.
30. To support the development of system leadership, NHS England and NHS Improvement have supported 3,000 people to go through place-based system leadership programmes. A series of national and regional events have been held for system leaders to share practice and co-produce policy, and a new national multi-disciplinary system leaders programme and online platform have been launched.

### **National Review on Improving Access to General Practice Services**

31. The National Access Review was established in July 2019 with its core objective to improve patient access both in hours and at evenings and weekend and to reduce unwarranted variation in experience.
32. The latest quarterly statistics published by NHS Digital indicate that at 30 June 2019 there were 34,114 doctors working in general practice in England. This represents an overall increase of 264 over the past year.
33. Other general practice roles continue to increase, with 96,680 wider workforce (non-GP) staff working in general practice. This represents an increase of 1,781 (1.9%) since June 2018. There has been overall growth of 7,487 (8.4%) since September 2015. Following this same baseline, figures for both Clinical Pharmacists and Physician Associates working in general practice have shown a continual growth each quarter.

### **Mental Health**

34. The *NHS Long Term Plan* (LTP) highlighted Mental Health as a priority, making at least an extra £2.3bn a year real terms available by 2023/24 to continue our commitment to increasing the share of NHS spending that goes on mental health services. The Mental Health Implementation Plan 2019/20 – 2023/24 has been published to provide systems with a clear direction on how LTP commitments will be realised.

35. Delivery of the Mental Health programme continues to progress. As reported in the September operational performance report, all 195 CCGs in England have reported to have met the Mental Health Investment Standard in 2018/19.
36. The 2018/19 access rate for Improving Access to Psychological Therapy (IAPT) was achieved using the annualised quarter 4 methodology. Work is ongoing to ensure sufficient workforce expansion to meet the 25% access rate by 2020/21. The 50% recovery rate has continuously been exceeded, reaching 52.2% in August 2019. 87.3% of people entered treatment having waited less than six weeks (against a standard of 75%) and 98.8% of people entered treatment having waited less than 18 weeks (against a standard of 95%) in the same month. The national team have strengthened the IAPT Long Term Condition 2019/20 support offer. The aim is to replicate best practice models and ensure consistency across all regions.
37. Every STP in England has an operational community perinatal mental health service. An additional 13,000 women were seen in 2018/19, exceeding the annual target of 9,000 additional women.
38. NHS Digital has published a bespoke data collection for access to children and young people's mental health services. The collection demonstrated that 377,866 children and young people accessed mental health services in 2018/19. NHS England and NHS Improvement analysis indicates that an access rate of 36.1% was achieved in 2018/19, meaning NHS services exceeded the required trajectory of 32%.
39. Data for the first quarter of 2019/20 shows the proportion of children and young people accessing treatment for eating disorders within four weeks for routine cases was 86%. The proportion of children and young people accessing treatment within one week for urgent cases was 75.1%. The programme is on track to achieve 95% for both routine and urgent cases by 2020/21.
40. The national standard for 56% of people to start treatment for Early Intervention in Psychosis (EIP) within two weeks was exceeded in September 2019, with performance of 79.1%. Ongoing improvement work is underway to enhance patients' access to the full range of NICE recommended treatment and support once they have been allocated a care coordinator within an EIP team.
41. The Community Mental Health Framework for Adults and Older Adults was published in September 2019 to outline how the vision for a new place-based community mental health model can be realised, and how community services should modernise to shift to whole-person, whole-population health approaches.
42. At the end of September 2019, the diagnosis rate for dementia, which is calculated for people aged 65 and over, was 68.8%, exceeding the ambition that at least two-thirds (66.7%) of people living with dementia receive a formal diagnosis. The standard has been consistently achieved since July 2016.

## **Learning Disability and/or Autism**

### **Number of people in an inpatient setting**

43. The number of people in an inpatient setting has reduced by 22% from 2,890 in March 2015 to 2,250 in September 2019. While this reduction represents unprecedented progress, further effort is required to deliver the commitment set out in the *NHS Long Term Plan* to reduce inpatient usage to 30 adult inpatients per million population and 12-15 inpatients aged under 18 per million population by March 2024.
44. For 2019/20, the commitment is to reach the targeted levels set out in the *NHS Operational Planning and Contracting Guidance*; namely 37 inpatients per million adults and no increase in rates for children and young people. Over £20m is being invested to support delivery of these inpatient reduction commitments, which will help local areas to improve the capacity and skills of community services.

### **Care (Education) Treatment Reviews (C(E)TR)**

45. The number of C(E)TRs undertaken continues to grow year on year. The proportion of inpatients recorded as never having had a C(E)TR fell to 6% in September 2019. A programme of independent reviews of people in inpatient settings who are in long-term segregation or prolonged seclusion will commence in November 2019.

### **Learning from Deaths Review (LeDeR)**

46. There were 2,986 LeDeR notifications made between October 2018 and October 2019. Some £2.4m has been allocated to support CCGs to increase capacity and capability to complete LeDeR reviews and implement subsequent learning.

### **Quality improvements**

47. A quality taskforce has been established to focus on CAHMs Tier 4 inpatient care for children and young people. The key role of the Taskforce, overseen by the Children's Commissioner for England, will be to deliver improvements in care over the next 18 months.
48. NHS England and NHS Improvement will be issuing guidance in December 2019 to support the quality of visits undertaken by commissioners to people in out of area inpatient settings.
49. Work has been taking place with Health Education England to develop an autism training programme for providers of inpatient care for children and young people. Delivery of this training will commence in Q4 2019/20.

### **Learning Disability Improvement Standard**

50. To date, 95% of trusts have registered for the NHS learning disability improvement standards annual survey. The survey gathers information from providers on their compliance with standards and the views of staff, people who use NHS services

and their families or carers. Data collection will continue until February 2020, after which time benchmarking reports will be compiled.