

## NHS England Board meeting

**Paper Title:** Operational performance update

**Agenda item:** 4.1 (Public session)

**Report by:** David Sloman, Chief Operating Officer  
Steve Russell, Chief Delivery Officer  
Julian Kelly, Chief Financial Officer

**Paper type:** For discussion

---

### Organisation Objective:

NHS Mandate from Government	<input checked="" type="checkbox"/>	Statutory item	<input type="checkbox"/>
NHS LTP	<input checked="" type="checkbox"/>	Governance	<input type="checkbox"/>
NHS People Plan	<input type="checkbox"/>		

---

### Summary:

This paper provides a summary of operational performance based on published data and work to restore services. This summary includes newly released data up to 11 May 2023, in comparison to the Annex.

---

### Action required:

Board members are asked to note the content of this report.

---

### Executive summary

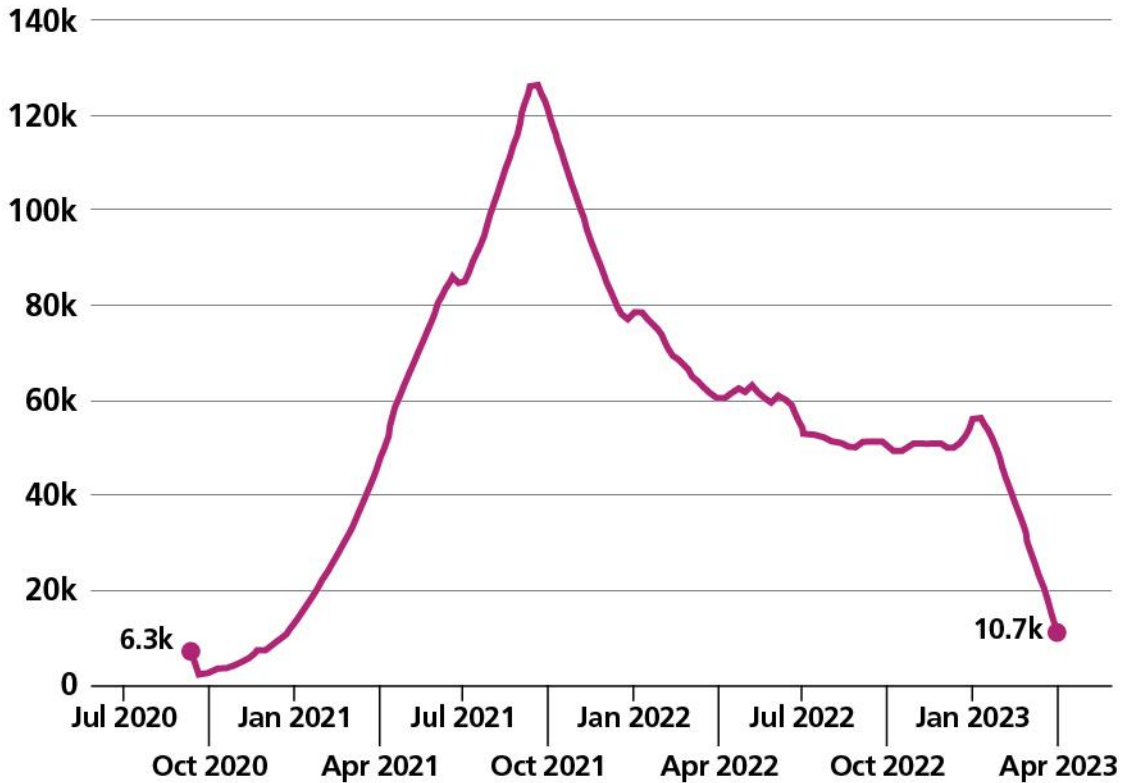
1. There have been significant pressures on the NHS in recent months with high demand on urgent care including a protracted series of industrial action. Since industrial action started in December 2022, nearly 500,000 hospital appointments and procedures have been postponed and over 195,000 appointments were affected during just the four days of junior doctor strike action in April.
2. The most recent data shows that despite record winter pressures NHS staff made great progress in reducing the number of people waiting for care - the most recent published data shows a reduced median waiting time as well as a reduction in 104+, 78+ and 52+ week waiters. The NHS has made significant progress on 78 week waits where the number of people waiting is down by 90% from its peak.
3. The second COVID-19 wave of 2023 peaked on 20 March with 8,631 beds occupied, but inpatient numbers have since dropped below 4,500 .
4. Occupancy in acute beds remains high with patient flow through hospitals remaining a key challenge due to patients who are medically fit not being discharged. Discharge challenges are predominantly linked to capacity challenges outside of acute care, and the NHS is working with partners across local systems, including social care, to support people to leave hospital once they no longer need to be there.

5. The NHS has continued to make progress on better support outside hospital. Urgent Community Response helps avoid hospital admissions by providing urgent care to people in their homes. ICBs now have full coverage (at a minimum of 8am to 8pm) for 2-hour urgent care response, 7-days-a-week. The latest data shows that nationally 81% of patients were seen within the 2-hour standard, with every region exceeding or meeting the 70% target in Planning Guidance.
6. For the first time since the start of the pandemic, the cancer backlog fell year on year with those waiting two months or more down from 21,823 at the end of the last financial year to 19,248 at the end of this March. This is down almost 15,000 from a peak of 34,000 in September 2022. The NHS continues to see high demand for cancer services with 229,721 people getting checked for cancer in just one month and over 25,000 people starting treatment (25,718).
7. For diagnostics, we have seen focused work aimed at increasing community access and overall activity levels. Community Diagnostic Centres have steadily increased their capacity and activity in the last 18 months. The overall number of key diagnostic tests delivered in March 2023 was a record breaking 2.3 million (2,302,400). This is an increase of 223,100 than in March 2022. However, the 6-weeks wait standard, and the total waiting list, continue to be challenged due to high numbers of referrals, and an increase in the number of tests required to support emergency care.
8. The Urgent and Emergency Mental Health pathway continues to be under significant pressure, including high rates of bed occupancy. There has been an increase in inappropriate out-of-area placement days. Workforce remains the biggest challenge with continuous work undertaken to share good practice across systems and better support the workforce.
9. Good progress continues to be made in activity levels in general practice. In March 2023, 31.6 million GP appointments took place, of which 4,000 were COVID-19 vaccinations, and 43% of these appointments were held on the same day they were booked. There were 36,428 FTE doctors working in general practice in March 2023, 5.5% more above the March 2019 baseline. Retention of the qualified GP workforce, particularly GP partners, remains a priority to achieve further expansion.

## Elective Recovery

10. The NHS has made significant progress in reducing the number of people waiting the longest for care against the backdrop of significant winter pressure on urgent and emergency services, increased flu and covid levels impacting staffing and bed occupancy as well as the most disruptive industrial action in NHS history with nearly 500,000 hospital appointments postponed since the start of December.
11. As at the end of March 2023, the overall wait list was 7.3 million. Of those, 10,737 were waiting more than 78 weeks (18 months) – a 90% reduction since the peak of 124,911 in September 2021. 49% NHS providers had no patients waiting over 78 weeks apart from those who have chosen to wait longer or who need complex surgery. Of the remaining people waiting more than 18 months, 41% were clinically complex cases or patients who had chosen to wait longer for treatment.

## 78 Week Waits

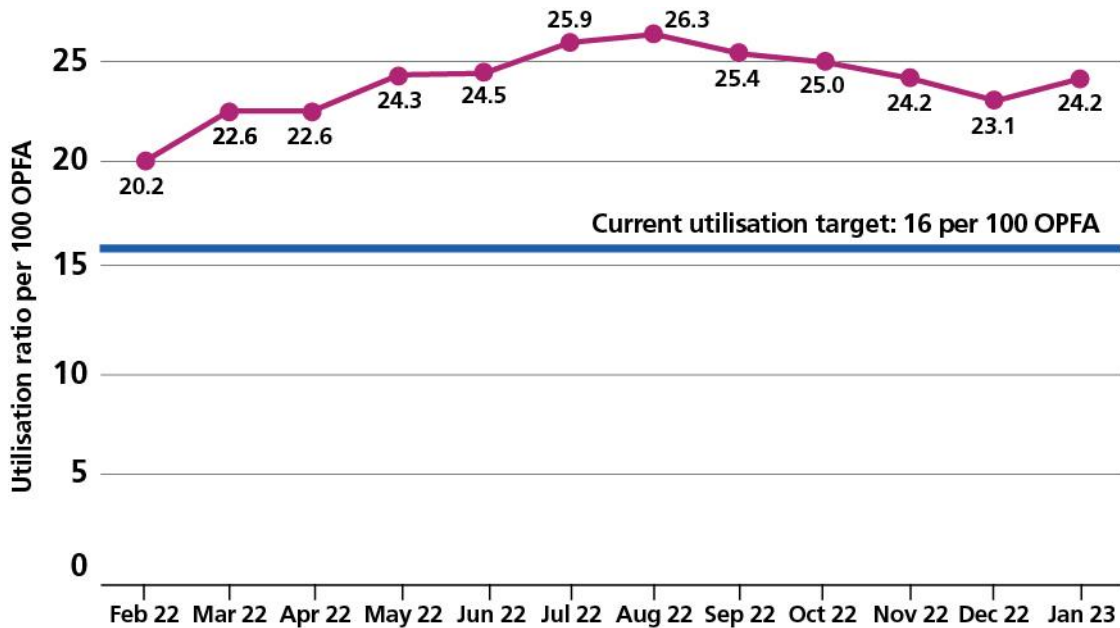


12. The average waiting time for elective treatment is now 14 weeks, down from a peak of 19.6 weeks in July 2020.

13. Four in five people who are waiting for treatment do not require an admission to hospital. Instead, they require either a diagnostic test or outpatient care. The NHS is working to reduce the time people wait for an outpatient appointment by transforming the model of care and making greater use of technology.

14. For example, more patient treatment is being completed in primary care with the support of specialist advice from clinicians. The NHS completes over 100m outpatient appointments every year, around 65m of which are follow ups.

### Utilisation rates for types of specialist advice



15. Patients are being given more control to book their own follow-up care as and when they need it. Around one million outpatient attendances have been moved or discharged to a patient initiated follow up pathway - providing patients with more choice on when they access care. There is also a renewed focus on reducing reliance on low value follow up appointments where it is appropriate and safe to do so, freeing up time and capacity to ensure patients receive the care they need, when they need it.

### Urgent and emergency care

16. The Delivery plan for recovering urgent and emergency care (UEC) services sets out two clear ambitions for improving emergency waiting times.

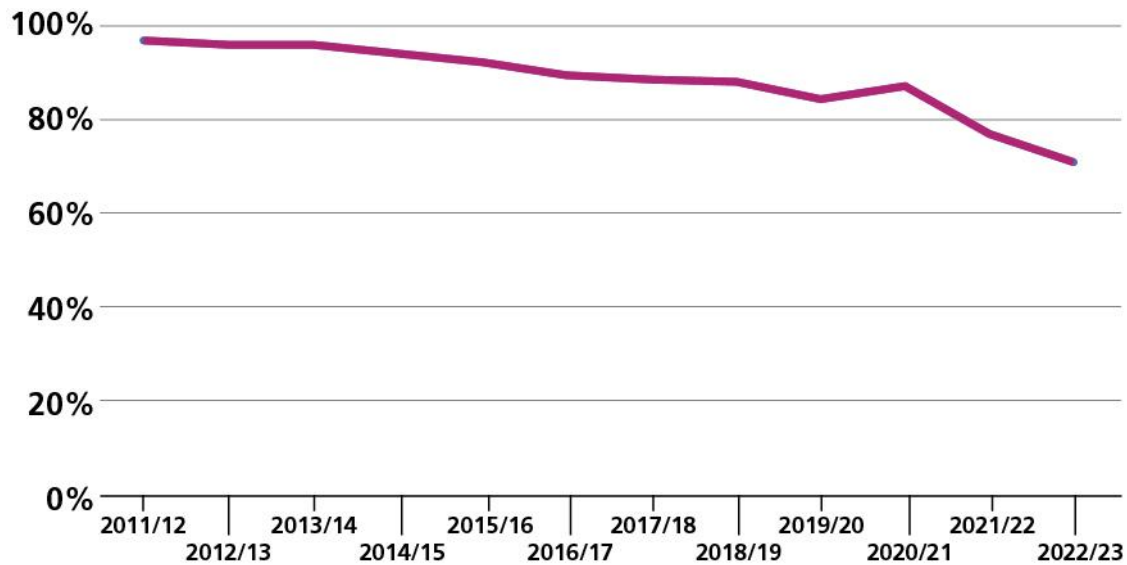
17. The first target is to admit, transfer or discharge 76% of patients in emergency departments within four hours of arrival by March 2024.

18. The second is to improve ambulance response times for category 2 incidents to an average of 30 minutes over 2023/24, with further improvement in 2024/25.

19. Focusing on these ambitions will help patients get the care they need more quickly, providing a solid foundation for recovery and improvement across UEC services. New approaches to step-down care will also be implemented so, for example, people who need physiotherapy can access care as they are being discharged from hospital before they need to be assessed by their local authority for long-term care needs.

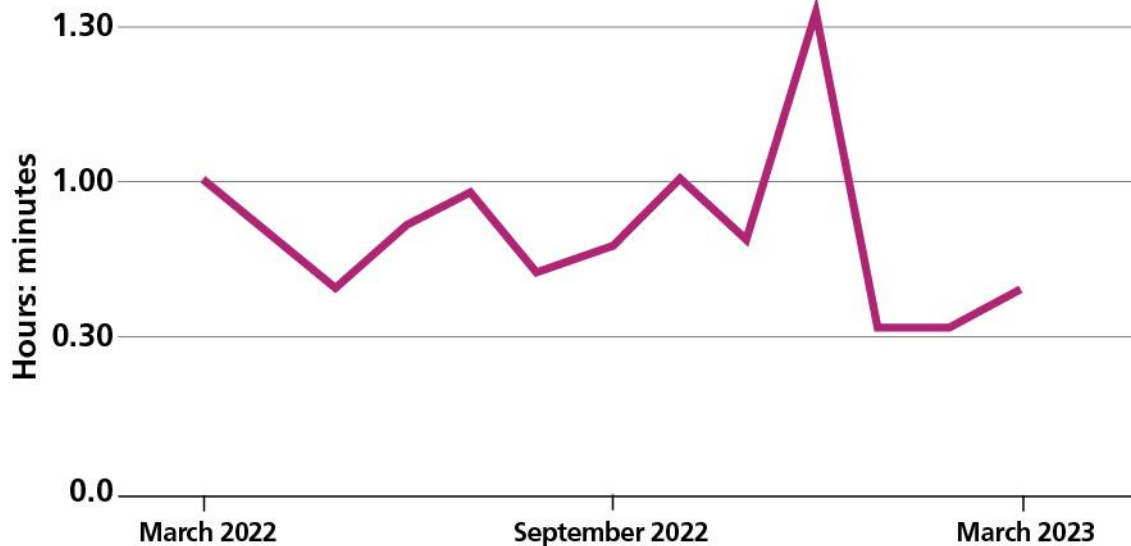
20. In April 2023, there were 2 million A&E attendances across England – an average of 68,000 per day. 74.6% of these patients were admitted, transferred or discharged from A&E within four hours. This compares to 71.5% in March 2023 and 72.2% in April 2022.

### Percentage of patients seen within four hours in A&E departments



21. In April 2023, the average ambulance response time for a category 2 call was 28 minutes and 35 seconds, This compares to 39 minutes and 33 seconds in March 2023 and is the first time since May 2021 that ambulance response times have been below an average of 30 minutes. This improvement comes as 707,499 calls to 999 were answered during the month.

### Category 2 ambulance response times



22. Making progress on these ambitions in the first month of the new financial year is testament to the hard work and dedication of NHS staff. While it is expected that performance against these metrics will fluctuate in response to seasonal pressures and COVID-19, it is worth noting these improvements have happened during a disruptive month of industrial action and following the busiest winter on record for A&E staff.

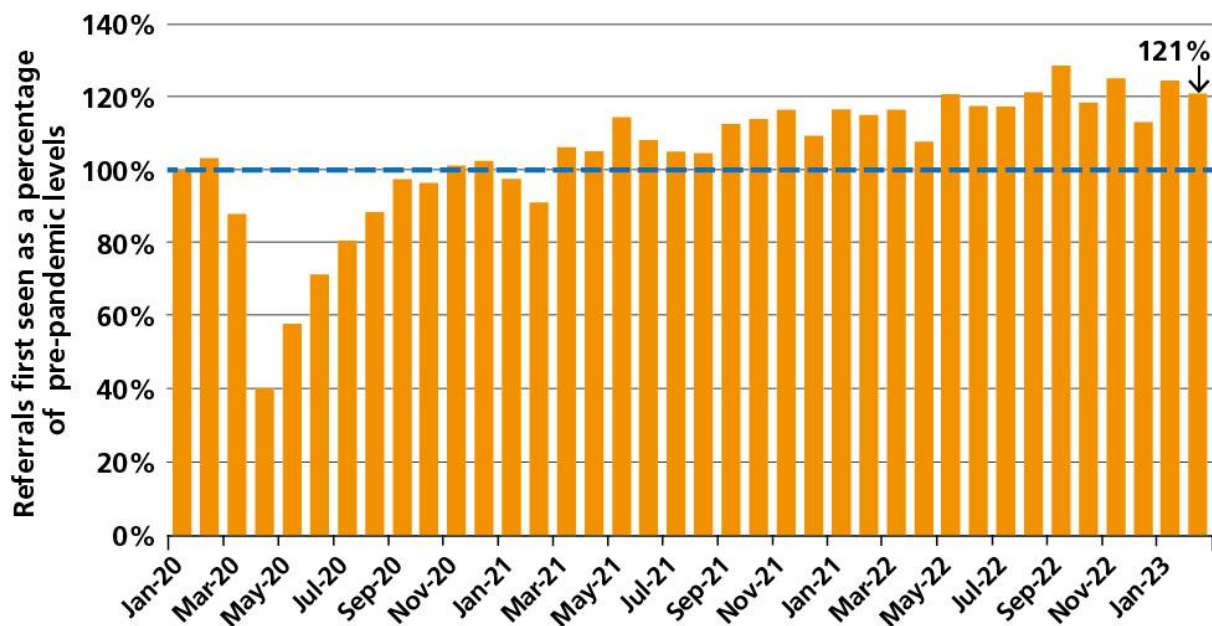
23. Finally, the recovery plan commits to publishing more data on time spent in A&E to support better patient outcomes. Provisional data, published for the first-time

last month, shows 102,000 (8.2%) people spent 12 hours from arrival in A&E in April 2023. This compares to 147,000 (10.8%) in March 2023.

## Cancer

24. For the first time since the start of the pandemic the cancer backlog fell year on year with those waiting two months or more down from 21,823 at the end of the last financial year to 19,248 at the end of this March. This is down almost 15,000 from a peak of 34,000 in September 2022.

25. Demand for cancer services continued at record levels in March with the number of urgent suspected cancer referrals at 121% of pre-pandemic levels.

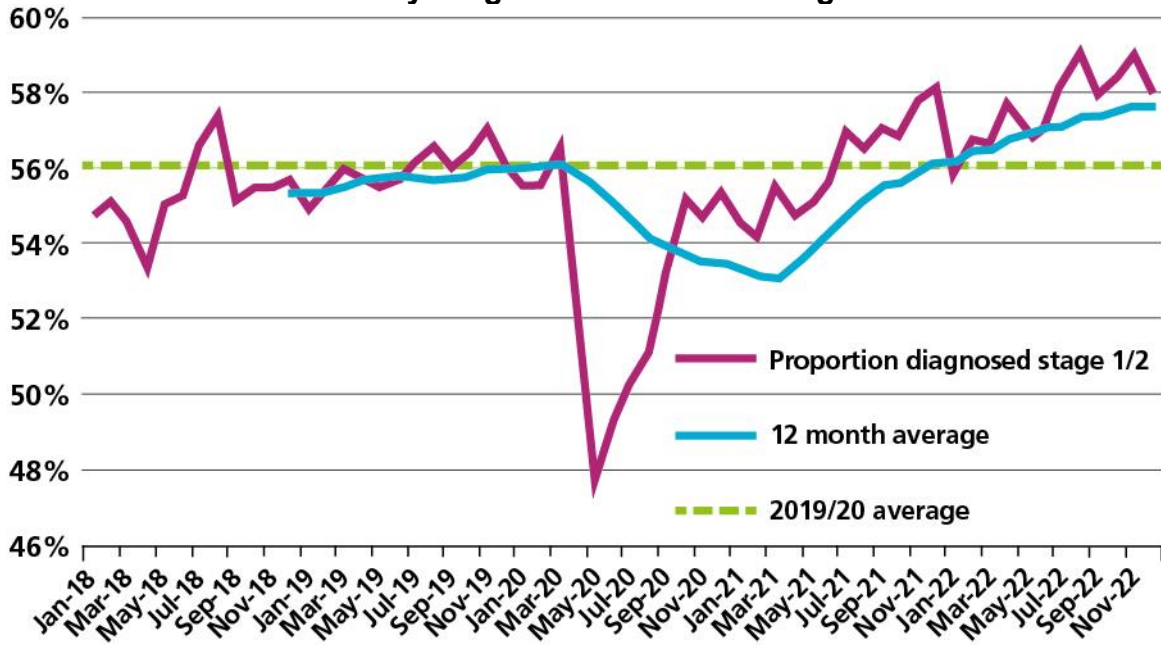


26. Over 328,000 people received treatment for cancer over the last year between April 2022 and March 2023 – the highest year on record, and up by more than 14,500 on the same period pre-pandemic (April 2018 to March 2019).

27. GPs have been referring people for urgent cancer checks in record numbers since March 2021. Since then, NHS staff have treated over 677,000 people for cancer. The increase in referrals has contributed to the NHS diagnosing more cancer at an early stage than ever before.

28. Early diagnosis rates have risen for the first time in a decade. Survival is also at an all-time high. In 2023, the Annals of Oncology published findings showing that cancer deaths are around 10% lower in the UK compared to just five years ago.

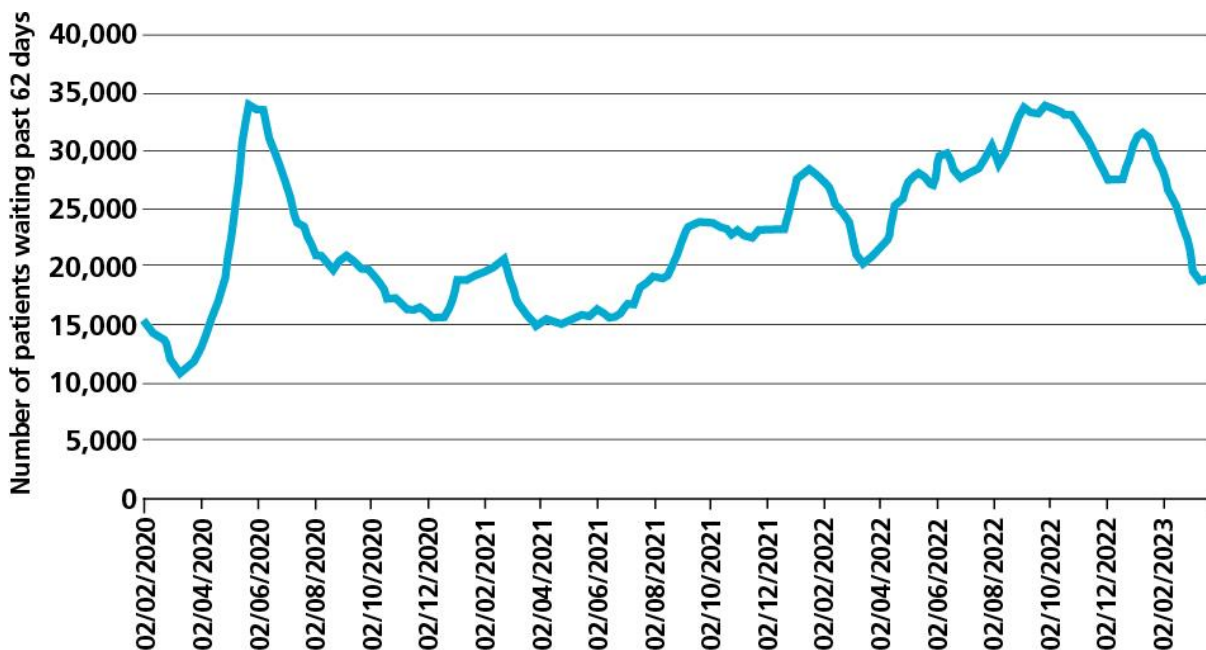
**Cancer Early Diagnosis rate across England**



29. The NHS is working hard to keep up with this increase in demand. It has been accelerating the installation of new diagnostic capacity, much of it in Community Diagnostic Centres.

30. The backlog has already reduced by almost 15,000 people, from a peak of 34,000 and NHS staff remain focused on ensuring that people who have been waiting longest or who need care most urgently are seen first.

**Trend in patients waiting more than 62 days**



## ANNEX

The following sections are based on data reported as of end of April 2023.

### Diagnostics

1. 2.06 million of the 15 key diagnostic tests were performed in February 2023, over 10% more than in February 2022, with the percentage of patients waiting for less than six weeks for a diagnostic improving from 69.2% in January to 74.9% in February.
2. Focus on Diagnostics (FoD) month ended on 31 March with every ICS delivering a range of initiatives targeting their greatest waiting list challenges. Over 20 national and regional events were held, supported by a wealth of material on the FoD Futures site which contained 57 good practice case studies. The June 2023 release of official Diagnostics statistics (for April 2023) will allow us to gauge the impact of the initiative and support systems across the rest of the year.
3. As of the week ending 2 April, CDCs have delivered 3.67m tests since their launch in July 2021.

### Primary care

4. As of 1 April 2023, the commissioning functions of primary pharmacy, optometry, and dentistry (POD) services has been delegated to all 42 ICBs and the transfer of staff to support this is in progress. The NHS Confederation has published a [report](#) summarising lessons learned from nine 'early adopter' ICBs, and a toolkit setting out guidance on commissioning of delegated services is being produced with ICB input, which will act as an ongoing resource to support ICBs in the effective commissioning of POD services.
5. The number of appointments taking place in General Practice continues to increase. In the 12 months, up to and including March 2023, 347.4 million appointments were carried out, including 10.5 million COVID-19 vaccinations. This is 13.0% higher than the number of appointments carried out in the 12 months to March 2019.
6. Workforce data shows that as of 31 March 2023 there were 36,428 FTE doctors working in general practice in England. This is an increase of 5.5% compared to 31 March 2019, reflecting the continued increase in GP training places. However, the number of fully qualified GPs has reduced by 4.1% over the same period.
7. As reported to the March 2023 Board, strong progress is being made towards meeting the target of 26,000 additional direct patient care staff (patient facing staff who are not GPs or nurses) by March 2024, with over 25,000 additional FTE staff in place at the end of December 2022.
8. In March 2023, 101% of contracted dental activity was delivered across England. Over half (54%) of all contracts are now achieving 100% or more of their monthly contracted activity.



## Communities & Personalisation

9. Community Health Services maintain full coverage of 2-hour Urgent Care Response 8am-8pm, 7-days-a-week at a minimum, across all 42 ICBs. In line with national guidance, systems continue to work towards providing a standard Urgent Community Referral offer that covers all agreed nine clinical conditions. The national expectation is for at least 70% of patients to be seen within 2 hours of referral to UCR, by the end of December 2022. This was exceeded early - the latest data (Jan 23) shows that nationally 81% of patients were seen within the 2-hour standard.
10. In 2023/24, there is continued focus on the growth of virtual ward services, effectively increasing the NHS's capacity to deliver urgent and emergency care, ensuring that services are enabled by technology, utilising remote monitoring and point of care testing to deliver high quality acute level care at home. All ICSs continue to deliver against trajectories agreed with the national programme towards an ambition of 40-50 Virtual Ward beds per 100,000 population, contributing to a reduction in system pressures.
11. There was an increase in capacity nationally over the last reporting period to 8,241 Virtual Ward beds, with 96 new virtual wards mobilised in 2023 so far. Local implementation is translating into increased capacity and improved data quality is being reflected in more robust sitrep submissions.
12. The personalised care programme continues to deliver on the NHSE medium-term priority to strengthen the hands the people we serve. Against an LTP commitment of 900,000 people being referred to a social prescribing service, there are currently 2,784 social prescribing link workers employed by a PCN/GP practice and since April 2019, they have seen over 1.75m patients. Currently 83% of PCNs have access to a social prescribing link worker, which means more patients than ever now have access to this service. We are also on track to meet the LTP commitment of 200,000 people having received a personal health budget by 23/34, which includes some one-off personal health budgets that facilitate hospital discharge. Overall, 6.2 million individuals have now benefitted from a personalised care intervention.
13. Acute Respiratory Infection (ARI) Hubs have also continued to grow with 351 hub sites being reported as already set up or planned. So far, there have been over 200,000 appointments completed. Updated data on ARI hubs and BP @home is due in May 2023.

## Mental Health

14. The NHS Long Term Plan (LTP) set out a number of commitments to narrow the significant treatment gap between the estimated population need and those accessing services. The NHS continues to improve and transform mental health services at pace in the context of large waiting lists and an increasing demand for mental health services. Although a number of mental health LTP commitments continue to be met, several key areas remain extremely pressured. High impact actions are being taken nationally and locally to address areas facing challenge.

15. The 75% standard for referral to treatment within 6 weeks for NHS Talking Therapies continues to be met in all regions, as does the 95% standard for referral to treatment within 18 weeks. 715,869 children and young people accessed NHS-funded mental health support in the 12-months to January 2023, and the Mental Health Support Teams programme continues to focus on increasing coverage, having achieved the LTP commitment a year in advance. Inappropriate out-of-area placement bed days in Q3 2022/23 were at 56,305, a decrease of almost 4,000 since the previous quarter. There are currently 8 gambling clinics in operation and NHS England is on track to achieve the ambition to open 15 clinics by the end of March 2024. Further detail about the new clinics will be provided to future Board meetings.
16. Reducing inequalities remains a priority and delivery of physical health checks for people with Severe Mental Illness will support tackling health inequalities and premature mortality. In the 12 months to end of Q3 2022/23, the NHS provided a physical health check to around 256,000 people with Severe Mental Illness. This represents over three-quarters of the LTP rolling target for Q3 2022/23, and is the highest performance recorded against the SMI standard.
17. The UEC Adult Mental Health pathway remains under significant pressure, experiencing exceptionally high bed occupancy at 95.7% as of 25 April 2023. Length of stay has continued to rise to an average of 45 days nationally as of February 2023, due to high acuity and delayed discharges. To address this, a number of initiatives have been put in place to reduce delayed discharges and long lengths of stay in acute mental health inpatient settings.
18. Over the rolling 12-month period from February 2022 – January 2023, 715,869 Children and Young People (CYP) (0-17s) accessed mental health support. While this is currently behind trajectory, it is expected that performance against the national access ambition will be recovered by the end of the period covered by the Long Term Plan. As of Q3 2022/23, 77.5% of CYP started urgent treatment for eating disorders within one week, and 80.7% started routine treatment within four weeks. Whilst this is a slight improvement in performance compared to previous quarters, performance in both areas remains behind the national target of 95%.
19. In Q3 2022/23, Talking Therapies services delivered access for 297,857 people (67% of the target). January 2023 data shows that the Talking Therapies recovery rate was 49.7%, which is a small increase from December 2022 (48.9%) but below the 50% recovery rate target. To address access challenges, there will be a national awareness campaign in 2023/24 to promote the rebrand of Talking Therapies services. In addition, NHS England will work to expand and strengthen the workforce through clearer entry routes, development opportunities and expanding the use of permanent contracts for trainees.
20. The latest national data shows that 51,060 women accessed specialist community Perinatal Mental Health (PMH) services and Maternal Mental Health Services (MMHS) in the 12 months to end of January 2023. Although access is increasing, performance remains over a year behind trajectory. Actions in place to address this include ensuring robust 2023/24 operational plans are in place to enable systems to get back on plan, sharing best practice from high-performing

systems, and improving links across maternity, primary care and other adult mental health services.

21. Workforce remains the biggest risk to service delivery, expansion, and transformation across mental health services. The NHS Long Term Workforce Plan will provide a general overview of what will be done to support recruitment and retention across the NHS, including the mental health workforce, and this will form the basis of regular NHS planning.
22. Significant progress has been made to improve data for mental health services, such as increasing the total number of providers submitting data and the number of data points collected, while at the same time reducing data collection burden on the system and facilitating reporting across LTP commitments. In addition to increasing access to services, the new Quality Transformation Programme aims to drive forward improvements in quality and safety in mental health services; this includes supporting cultural change, strengthening oversight, and streamlining support available to providers where quality concerns are evident.

### Learning Disabilities and Autism

23. Since the start of the programme in 2015, nearly 10,000 people have been discharged from an inpatient setting. From April 2022 to March 2023, 1,188 adults have been discharged, a 6% improvement in numbers of discharges compared to the previous twelve months. Of the adults discharged between April 2022 and March 2023, 36% had a length of stay of over 1 year. At the end of March 2023, the number of people in a mental health inpatient setting was 2,065: 1,845 adults and 220 under 18s; a 29% decrease from the March 2015 figure of 2,905.
24. New guidance has been published on dynamic support registers (DSRs) and Care (Education) and Treatment Reviews (C(E)TRs). The purpose of this guidance is to support partners in local areas to identify and take action if people with learning disabilities and/or autism are at risk of admission to a mental health inpatient setting.
25. Since the launch of the Keyworkers Programme, the number of young people supported by key working services to remain or return to their community has reached 2,690. The Autism in Schools project has been rolled out nationally to over 318 schools helping them to support autistic young people through creating inclusive positive environments and supporting them to build positive relationships with families.
26. Between April 2022 and February 2023, 68% of people had received an Annual Health Check, an improvement of 13% on the equivalent period in the previous year, with performance on course to achieve the 75% LTP target by March 2023. Although the GP Learning Disability Register (GPLDR) levels fluctuate, the number of people increased by over 11,500 in February 2023 compared to February 2022.
27. As of April 2023, GPs are required to record the ethnicity of people within the GPLDR; this is a very significant step forward to support the increased health needs and reduce the early mortality of people with a learning disability from an

ethnic minority. Evidence from the 2021 LeDeR (a service improvement programme for people with a learning disability and autistic people) annual report reiterates that people from an ethnic minority with a learning disability die at a considerably younger age compared to those who were white. In March 2023, the LeDeR programme had a 96% completion rate for initial reviews and 22% for focused reviews.

28. Work continues to improve support and care for autistic people, with a codesigned and produced suite of training and educational offers for all NHS staff, including foundation and enhanced specialist training for psychiatrists. In April 2023 we published a new autism assessment framework to support ICBs, providers and clinicians to deliver improved outcomes in all-age autism diagnostic pathways. The framework includes best practice guidance on how to improve the quality of autism assessment by using existing resources as effectively as possible and making improvements across the entire assessment pathway. In December 2022 there were 140,033 patients with a currently open referral for suspected autism, a 31% increase since January 2022, of which 121,321 patients had a referral that had been open for at least 13 weeks.

## Diabetes

29. Diabetes care processes used as a proxy measure for LTP commitment that more people with diabetes will meet their treatment targets showed that comparing data from 2022/23 quarter 3 (January to December 2022) to the same period of 2021/22, the proportion of people with diabetes receiving all 8 care processes (HbA1c, cholesterol, blood pressure, serum creatine, urine ACR, smoking, BMI, foot check) increased from 25.5% to 31.1% (Type 1) and 38.5% to 46.2% (Type 2/other).
30. Individuals from the most deprived quintile were less likely to receive the 8 care processes; a percentage difference of -19.1% and -11.7% for Type 1 diabetes and Type 2/other diabetes, respectively.
31. Over 1.2 million referrals have been made into the NHS Diabetes Prevention Programme to date. A recent independent evaluation looking at programme completers found that they reduce their risk of developing type-2 diabetes by 37%, and the programme in general resulted in a 7% reduction in population-level incidence in areas where the programme was delivered between 2016 - 2018. When looking at those referred to the programme, the latest independent research published in February 2023 demonstrated a 20% reduction in Type 2 diabetes incidence compared to those not referred.
32. The NHS Type 2 Diabetes Path to Remission Programme is currently available in 50% of the country (21 ICSs). To date over 8,500 referrals have been made. Early data indicates participants each lose 7.2kg (over one stone) on average after one month, and 13.4kg (over two stone) after three months. This is in line with the outcomes seen in the trials where participants were able to improve their diabetes control, reduce diabetes-related medication and, in around 50% of cases put their type 2 diabetes into remission.

## Screening and Immunisations

33. All NHS screening programmes have removed backlogs caused by the pandemic, except breast screening for which the backlog has almost been removed. Funding has been provided to increase the number of advanced breast screening practitioners being trained.
34. The NHS bowel cancer screening programme continues to exceed the 65% uptake target with extension to 58-year-olds having commenced from April 2022 in addition to the completed extension to 56-year-olds that was rolled out in 2021/22. A marketing campaign to promote the return of bowel screening stool samples was run in February and March.
35. The NHS diabetic eye screening programme reported full recovery from the disruption caused by the pandemic in September 2022 and Abdominal Aortic Aneurysm screening programmes reported full recovery in December 2022.
36. The three NHS antenatal and three NHS new-born screening programmes continue to achieve continuous coverage levels close to 100%.
37. The NHS is working to increase uptake across all vaccination programmes with a specific focus on MMR and school-aged immunisations catch up.
38. The Sickle Cell and Thalassaemia programme is participating in a national initiative to improve lifetime care for people suffering from sickle cell and thalassaemia disease.
39. The use of a new vaccine and an increase in eligible cohorts for the Shingles Immunisation Programme is well underway to be delivered from September 2023.
40. A change in HPV schedule for adolescent boys and girls primarily administered in schools is also underway to be delivered from September 2023 which will mean that eligible adolescents will only require one dose of the vaccine to be fully protected.
41. NHS London are offering Polio vaccinations to those children who missed the opportunity to be vaccinated previously in response to the detection of levels of polio in the sewage system in the city.
42. Changes to the targeted neonatal BCG vaccination programme following the introduction of a new neonatal screening programme (SCID) are being monitored closely in order to improve uptake amongst at risk babies.

## COVID-19 Vaccinations

43. The spring COVID booster campaign commenced on the 3rd April in care homes, and 17th April for other cohorts. By the 25th April, we had vaccinated over 1 million people, and half of all eligible care home residents.
44. As a programme we are using an ever-evolving range of targeted initiatives at a national and regional level to encourage uptake, for example revisiting early

engagement and dialogues with communities through faith, clinical and community leaders. As well as maximising uptake in those groups who are most at risk, our operational focus continues to be on maintaining equitable access to booking slots in NBS for all eligible cohorts.

## Long COVID-19

45. As of 5 March 2023, the [Office of National Statistics estimates](#) 1.9 million people in the UK (2.9% of the population) experienced self-reported long COVID. 1.3 million (69%) had long COVID symptoms at least one year previously and 762,000 (41%) at least two years previously. 381,000 (20%) reported that their ability to undertake their day-to-day activities had been "limited a lot".
46. Prevalence was greatest in people aged 35 to 69 years, females, and people living in more deprived areas. The list of organisations providing post COVID services has been updated as of 1st April 2023, showing over 100 service providers for adult services and 13 specialist paediatric hubs.
47. In total, since the data was first published in July 2021 a total of 103,613 referrals have been made and 91,918 accepted (88.7% acceptance rate). 82,186 patients have received an initial specialist assessment and an additional 239,511 follow up appointments have taken place.
48. The latest post COVID activity data was published on 12 April for the period 13 February – 12 March 2023. 3,280 referrals were made, and of those 2,957 were accepted as clinically appropriate for assessment (90%). A total of 2,587 initial specialist assessments were completed during the period and an additional 13,621 follow up appointments were carried out.
49. Post COVID service referrals figures remain stable at an average of 3,000 referrals each month. Of those who had an initial specialist assessment during the period and declared information 83% were of white ethnicity, 65% female and 35% male, and 84% were aged between under 64.

## Cardiovascular Disease (CVD)

50. Thrombectomy activity has increased from 1.5% in April 2019 to 3.1% in January 2023. Identifying patients to benefit from this life-changing treatment requires access to immediate brain scans and the National Optimal Stroke Imaging Pathway (NOSIP) incorporates the use of Artificial Intelligence (AI) to support rapid decision making – 85% of England's stroke units now have access to AI (up from 5% in 2019). Thrombolysis rates reached 11.9% in January 2023, the highest since the beginning of the pandemic. Nine Integrated Stroke Delivery Networks have introduced video-triage technology which facilitates paramedic-to-stroke specialist communication, improving access to emergency interventions and reducing hospital admissions.
51. The national CVDPREVENT audit offers a data and improvement tool which enables GPs and healthcare professionals to understand unwarranted variation in management of CVD risk factors and identify potential improvement opportunities. As of December 2022, 62.7% of hypertension patients aged 18 and over, had their blood pressure managed in accordance with NICE guidance. Over

100,000 more patients are having their blood pressure managed to target compared to September 2022, but there remain over 2.8m patients with uncontrolled blood pressure.

52. Survival at 30 days following an out-of-hospital cardiac arrest for Utstein patients (an internationally recognised patient subgroup, where timely and effective emergency care can particularly improve survival) has been increasing since December 2021 from 20.1% to 25.1% in November 2022. NHS England have partnered with St John Ambulance to increase training for CPR and defibrillator use, targeting areas with high levels of inequalities.
53. National trends for over-prescribing of reliever inhalers (short-acting beta agonist) remain fairly static; however, all regions are below the lower threshold for performance and three regions are almost at the upper threshold.

### Children and Young People (CYP)

54. The Children and Young People's (CYP) Transformation Programme has exceeded its Long Term Plan (LTP) commitment to treat 1,000 children a year for severe complications related to their obesity by the end of 2022/23. Some 1,417 patients began treatment during 2022/23, with a further 141 patients having already started treatment prior to the formal launch of Child Excess Weight clinics in April 2022. Work will continue in 2023/24 to further expand the clinics.
55. There is continued progress against LTP commitments for CYP particularly regarding patients who suffer with asthma, epilepsy, and diabetes. Expected impacts include reductions in attendances via Emergency Departments, non-elective admissions, and outpatient attendances. The CYP transformation programme will continue to develop new ways of working for integrated care to improve outcomes for patients.
56. Work continues to implement the recommendations set out in the national urgent and emergency care recovery plan including:
- The expansion of the paediatric NHS111 clinical assessment service to onboard an additional cohort of paediatric clinicians, including Advanced Clinical Practitioners, to expand its skill-mix and capacity.
  - The national roll-out of the inpatient paediatric early warning score (PEWS) chart to start from June 2023. Plans are in place to publish the PEWS digital specification in Beta form to allow providers opportunity to engage with the IT requirements.
  - Working with partners to develop national guidance to support implementation of paediatric Virtual Wards.
57. A CYP Elective Recovery toolkit has been developed to share positive practice and set out minimum expectations to accelerate the pace of CYP recovery. Planning is underway for a national elective recovery campaign focused on children and young people, to commence in May 2023.

## Maternity

58. The overarching aim of the Maternity and Neonatal Programme continues to be to provide safer, more personalised, and equitable care for women and their babies. This includes the National Maternity Safety Ambition to halve the rates of stillbirth, neonatal deaths, maternal deaths, and serious brain injuries from a 2010 baseline by 2025, with a 20% reduction by 2020. Reductions in both the stillbirth and neonatal mortality rates surpassed the ambition for 2020, falling by 25% and 36% respectively. The latest update to a proxy stillbirth rate metric based on Secondary Uses Service data, suggests a fall in the rate to 3.8 per 1000 births in the 12 months to January 2023, the same as the 2020 level.
59. In March 2023 the ONS published 2021 Child and Infant Mortality Statistics, which showed neonatal mortality rate increased from 7.6% to 7.7% in 2021. This increase may be linked to the increase in preterm birth rates leading to neonatal deaths from immaturity related conditions. Neonatal mortality relating to congenital anomalies contributed to 43% of neonatal deaths at 24 weeks gestation or over and Neonatal mortality as a result of term hypoxic brain injury reduced. Direct or indirect impacts of the COVID-19 pandemic are considered to have slowed progress in meeting the overall ambition, specifically in relation to how care delivery needed to adapt to pandemic challenges, choices in how care was accessed and ongoing workforce constraints.
60. We remain off track of the trajectory to meet the 2025 national ambition of reducing pre-term births to 6%. The latest data from the Maternity Services Dataset, suggests a further increase in the rate in 2022 to 7.8%. Contributory factors include care delivery and resuscitation practices along with ethnicity and deprivation. The pre-term birth rate for babies from the most deprived decile was 9.1% in 2022 compared to 6.6% for babies from the least deprived decile. Babies from the most deprived decile were at 1.4 times higher risk of pre term birth than those from the least deprived decile in 2022, a small reduction from 1.5 in 2021. The pre term birth rate for Black and Asian babies was 8.3% in 2022 compared to 7.6% for White babies.
61. Recently published maternity mortality data shows that there was a statistically non-significant rise in the UK maternal death rate between 2018-20 and 2019-21, from 10.9 to 11.56 per 100,000 maternities. When deaths due to Covid-19 are excluded, a statistically non-significant decrease occurred, from 10.47 to 9.97 per 100,000 maternities. Excluding deaths due to COVID-19, the rate fell by 6.3% since 2009-11, missing the interim national ambition of a 20% reduction.
62. The 3-year Delivery Plan for Maternity and Neonatal Services was published on 30 March 2023. The plan brings together the vision from Better Births and the NHS Long Term plan, alongside actions from the independent reports into maternity and neonatal services from Dr Bill Kirkup and Donna Ockenden to help providers, ICBs, and regional teams to identify and plan their priorities for improvement over the next three years. The plan also sets out the actions that the national maternity and neonatal programme will undertake over this timescale in order to support the work of local and regional colleagues.



## Genomics

63. The NHS continues to provide the NHS Genomics Medicine Service through:
- a consolidated laboratory network made up of seven NHS Genomic Laboratory Hubs (GLHs) delivering cutting edge testing outlined in a single mandated National Genomic Test Directory;
  - seven NHS GMS Alliances working together to support clinical leadership and embedding of genomic medicine in end-to-end pathways; and
  - clinical genomic services that diagnose and manage complex rare and inherited disease.
64. In March we have continued to see an increase in access to genomic services. In line with the NHS LTP, there has been a growth in the number of patients accessing the whole genome sequencing service, in addition to the rapid whole genome sequencing service launched in October 2022 for acutely unwell babies and children. There has also been an increase in the number of extensive genomic tests offered to patients diagnosed with cancers.
65. The National Genomic Test Directory was updated in April 2023, this update included new clinical indications for inherited prostate cancer, non-invasive prenatal diagnosis for monogenic diabetes and paediatric pseudo-obstruction syndrome, in line with the latest scientific evidence.

## Recovery Support Programme

66. Recovery Support Programme (RSP) provides national mandated intensive support to trusts and ICBs in NHS Oversight Framework segment 4 and have complex, deep-seated concerns around leadership, governance, finance, patient safety, quality, or performance. Since the last update in March 2023, there have been no new entries or exits from the RSP. The programme has 18 trusts (7 legacy special measures) and 4 ICBs.
67. 24 RSP Review Meetings with National Executives in attendance, have been held between March 2021 and April 2023 to stress test the trusts improvement plans, progress against their exit criteria, acknowledge improvements made following exit and where there has been national or regional concern about lack of progress. There are a further four meetings planned for the remainder of Q1 23/24.