

RCEM Explains:



Progress against NHS Recovery Plan

September 2023

The winter of 2022/23 posed significant challenges for the NHS, prompting the Department for Health and NHS England to publish two 'plans' to recover emergency care services. This briefing has been prepared to help policymakers review progress made in recovering emergency care services ahead of the upcoming winter months.

Policy context

Winter 2022/23 was described as "the most testing time in NHS history". Stroke and heart attack patients struggled to access lifesaving emergency services and every single ambulance trust declared a critical incident. In response to this, the Department for Health and Social Care and NHS England published the Delivery Plan for the Recovery of Urgent and Emergency Care (UEC) Services in January 2023. This comprehensive two-year plan is designed to recover emergency care services from the pressures of a demanding winter season and the disruption caused by the pandemic. In July 2023, NHS England released a winter plan for the upcoming winter, aiming to pre-emptively tackle potential challenges and mitigate the impact of another demanding winter season.

It is noteworthy that while NHS England consistently publishes a winter plan each year, the approach is often devoid of a comprehensive review or evaluation. This briefing seeks to address this gap by providing a focused examination of progress made so far in recovering emergency care services and identifying areas of improvement. Tracking progress against the goals set out in both plans is a useful way of guiding where and how resource and attention should be deployed.

More clinicians for NHS 111 online and urgent call service

The Delivery Plan aimed to launch a new targeted campaign to encourage retired clinicians, and those nearing retirement, to work in NHS 111. With improved clinical assessment of calls, this should ensure faster access to the appropriate form of care and avoid preventable ED attendances. The latest data show that the percentage of answered calls to 111 that were assessed by a Clinician or Clinical Advisor has fallen from 43.6% in January 2023 to 39% in June 2023.

Improve ambulance response times for Category 2 incidents to 30 minutes on average over 2023/24

A key priority outlined in the plan was to improve ambulance response times by increasing ambulance

capacity. Over 800 new ambulances are expected to be made available in 2023/24, with the aim for the majority to be operating by this winter. Operational planning guidance for 2023/24, reduced the target for ambulance response times for Category 2 calls to 30 minutes. Category 2 incidents concern potentially serious conditions that may require rapid assessment, urgent on-scene intervention and/or urgent transport.

Analysis shows that the average ambulance response time for Category 2 incidents in **August 2023** was 31:30, an **increase** from April 2023. It is worth noting that April 2023 was the first time the response time had fallen below 30 minutes since May 2021, with a recorded time of 28:35. However, this is still a considerable improvement compared to **July 2022**, when the response time was 58:53. We welcome this improvement and hope to see a continue a positive trend towards a reduction in the average response time for Category 2 calls.

5,000 new beds as part of the permanent bed base for next winter

£1 billion was announced to fund additional capacity, including 5,000 new beds as part of the permanent bed base for next winter. There is some haziness about the baseline number that this was based on. NHS England counts the additional beds from April 2022 as the start date, which means the number of beds had increased by 640. However, if we examine the number of beds

General & Acute Beds Available Since April 2022



Source: NHS England

that have opened since this ambition was announced in January, the number of general and acute beds available at Type 1 acute trusts has fallen by 2,781 beds (-2.8%) between January and August 2023. In fact, the number of available beds has decreased each month since January 2023.

Improve four-hour standard to 76% of patients being admitted transferred or discharged within four hours by March 2024.

The four-hour standard in the NHS constitution stated that 95% of patients should be seen within four hours. In December 2022, the UK Government announced a target of 76% of patients should be admitted, transferred, or discharged from an ED within four hours in England by March 2024.

Setting the aspiration so low has created perverse incentives, in that most effort is directed to the people who are discharged from the ED, while the admitted patients continue to endure long stays. The greatest harms from long stays are on those who are admitted.

The data shows that the percentage of patients that are meeting the four-hour standard is currently not meeting the 76% target, in August the figure for this measure was 73% across all EDs, and **59.1% for Type 1**. This is an improvement in performance against the temporary target compared to previous months however, it should be celebrated with caution.

Four hour target in England: Aggregate v Type 1



NHS Trust level four-hour performance is calculated using weighted averages across all types of ED provision. The graph above reveals the limits to examining NHS Trust level performance for England. There is a growing disparity between Trust-level and Type 1 performance. The NHS Trust level scores conceal the decline in Type 1 performance, the gap between these figures has increased overtime. In 2022, there was, on average, a 14.1 percentage point difference between Type 1 performance and NHS Trust level performance. National figures also mask huge variation across different NHS Trusts. Providing more

granular data can help policymakers and clinicians identify areas where improvements are needed and take action to address them, ultimately leading to better health outcomes for patients.

Speed up discharge of patients

The Delivery Plan outlined the importance of making sure patients are not in hospital for longer than necessary. We know that long stays in hospital are not good for patients and can lead to poorer health outcomes.

The data reveals a significant decrease in the average daily number of patients remaining in the hospital who no longer met the criteria to reside from January to August. In January 2023, the number stood at 13,959, while in August, it decreased to 11,877 patients per day. We are pleased by this improvement and anticipate a continued positive trend as we progress into the winter months.

Recommendations:

[RCEM's #ResuscitateEmergencyCare Campaign](#) calls for long term plans to build additional capacity within the health and social care system. Ahead of the winter months, the following recommendations will help to ease pressures experienced by the NHS.

1. Commission an independent evaluation of Urgent and Emergency Care winter and recovery plans.
2. Encourage take up of flu vaccination across all professions working in the NHS, including support staff.
3. Rapidly expand Same Day Emergency Care provision so it is available 12 hours a day, seven days a week with the same access to diagnostic services as EDs.
4. Ensure that hospitals never exceed 85% occupancy by opening additional staffed beds, so hospitals have the space and resources available to care for every patient.
5. Performance manage hospitals based on the proportion of patients waiting 12 hours or more from their time of arrival, alongside the four hour target.
6. Publish hospital-level performance figures to enable transparency and improve performance of hospital.