

NHS pressures

Monday 9th January 2023

Key points

- NHS Confederation members – leaders working across the whole NHS system – tell us this is the worst winter they can remember.
- Some members tell us they are working with below minimum staffing levels on their wards because services are so overwhelmed.
- Whilst pressure on emergency departments and ambulance services is the most visible, it's a wider issue of reduced flow across the system and primary, community and mental health care are also facing unprecedented pressures.
- It looks likely that the next three months in the NHS will be defined by critical incidents being declared and the system creaking under the pressure it faces.
- NHS leaders are doing everything they can to work innovatively to expand capacity and provide the best possible care, but this is crisis management.
- Government must do everything within its power to prevent the NHS entering the next winter in the same fragile state – in the short-term it must meaningfully negotiate with health unions on pay and in the medium to longer term, it must invest in the workforce plan it promised the NHS in the Autumn Statement.
- Whilst the Adult Social Care Discharge Fund money was welcome, members tell us it came too late and they needed it up to six months in advance in order to make best use of it ahead of winter. Some providers have this vital money but others are still waiting.
- In the same vein, today's announcement is welcome but the government is playing catch up.

Data

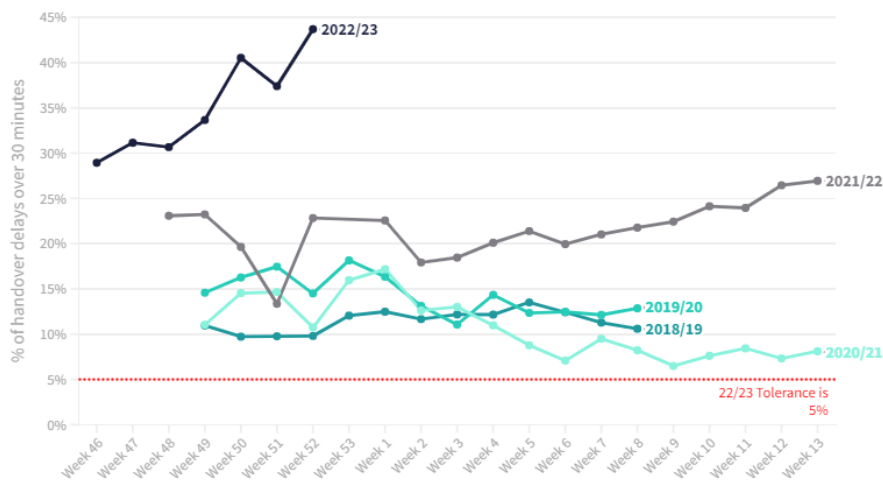
The latest data from the week 26th December 2022 - 1st January 2023 shows us:

- **Flu** - 5,105 patients were in general and acute flu beds and 336 were in critical flu beds – a 47 per cent increase on the previous week. Just 39 beds in total were occupied by flu patients in the same week last year.
- **COVID-19** – one in twenty people in the community in England had Covid in the week leading up to the 28th December. The number of Covid patients in hospital in England has risen by 1,200 this week compared to the previous one (now nearly 9,500 patients across England are in hospital with Covid.)
- **Bed occupancy** - was 93 per cent with 12,809 beds occupied by patients who were medically fit to be discharged. This is much higher than the same week last year (9,858) but fewer patients than we had seen in previous weeks.

- **Long stays** – the number of patients staying in hospital over 7 weeks was the highest of the winter so far (49,215), with 28,270 over 14 days and 18,307 over 21 days (this was higher than the previous week at 18,144, but it has been over 19,000). Last year in the same week there were fewer long stay patients of all durations of stay. (7 days+ was 40,795).
- **Ambulance handovers and delays** – 7,836 hours were lost to handover delays on an average day, or nearly 55,000 in a week. That's an increase in delays on the previous week and the worst of the winter. 43 per cent of ambulances had a delay of over half an hour.

For week commencing 26 December, 43.7% of ambulances were delayed by half an hour or more

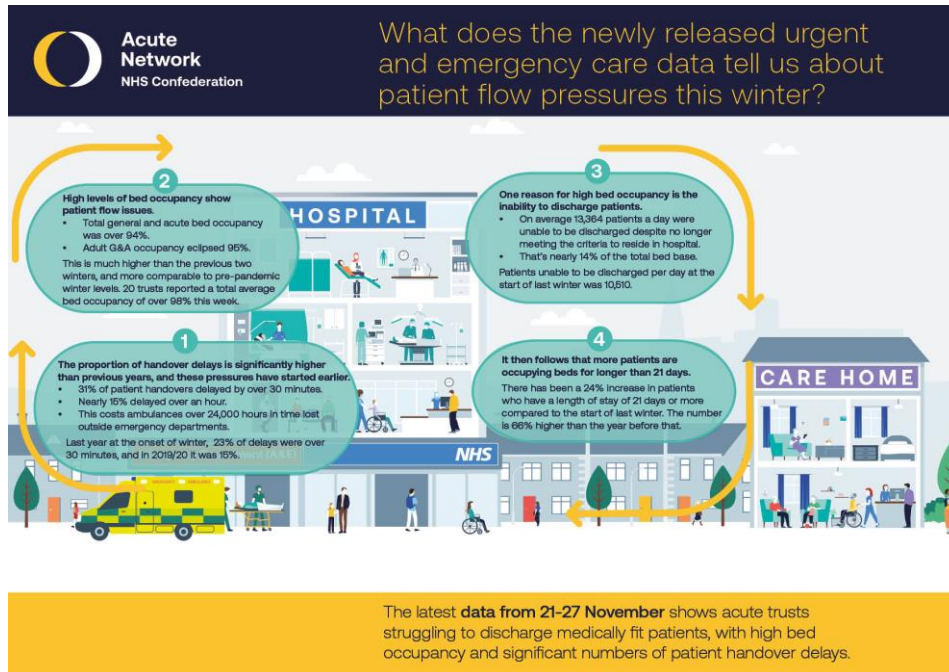
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Source: NHS England | Urgent and Emergency Care Daily Situation Reports
Week 46 of 2022 is 14-20 November. The x-axis has been set as the week of the year for each year to allow comparison.

- **Discharge** - almost 13,000 (12,809) beds a day taken up every day by patients who were medically fit to be discharged - up almost a third on last year (9,858).
- **Staff absences** - figures show that in the last week of 2022, there were 66,517 total staff absences, in which 7,204 of those were COVID-19 related absences. Comparing to the final week of 2021 where there were a total of 115,891 total absences, almost 100% more than this year's figure. Of those, 35,596 of absences were due to COVID-19 related sickness – this is 5 times greater than this year's COVID-19 related absences. Whilst less COVID-19-related absences is a good thing, members tell us increasing numbers of staff are absent with stress, burnout and work-related illness.

This data highlights that whilst pressure is most visible in emergency departments and ambulance waits, there is a broader issue of flow, or lack thereof, as the below infographic shows (using data from late November).



On the ground

In addition to the data, below are some reflections from our members in different parts of the country about what they and their teams are experiencing:

- Members report ambulance handovers taking up to 18 hours with examples shared of up to 40 ambulances parked outside some acute providers during this period.
- One member told us that in a local emergency department built for 50 people they had 180 patients, staffed with 8 rather than the prescribed minimum of 12.
- A number of members have told us they needed the Adult Social Care Discharge Fund up to six months in advance to make best use of it – not in December and January as the government have administered it this year.
- Members of our primary care, community care and mental health networks tell us they are deeply concerned that the focus on acute settings is leading them to be further overlooked, when they themselves are facing unprecedented levels of demand versus their capacity.
- Members of our mental health network are also concerned that the messaging to patients around coming to A&E only with life-threatening issues give examples only of physical health problems like breathing difficulties. They are concerned this will lead less people who are in a mental health crisis to seek help.

Calls to government

- Start planning now for next winter so the NHS is not in this position again – including allocating funding to aid with discharge from hospital 4 – 6 months in advance.
- Meaningfully negotiate with health unions on the matter of pay to ensure we don't drift into a winter where the NHS faces indefinite industrial action.
- Tackle the longer-term issues facing the health service that left it in a fragile position before the winter – the number of vacancies in health and social care and issues with retention, invest in NHS capital which has been underfunded for over a decade and address the lack of capacity in social care. Key to this is investing in the workforce plan that was promised in the Autumn Statement.

Suggested interventions

- The NHS Confederation has warned that we risk drifting into a winter situation where the NHS faces indefinite industrial action unless the government gets round the table with health unions and meaningfully negotiates on pay. Will Secretary of State commit today to doing so?
- The NHS Confederation has said health leaders needed the money from the Adult Social Care Discharge Fund up to six months in advance to make best use of it. Will he ensure such funding is allocated in good time next year, to make the most of taxpayer money?
- The NHS Confederation has said we face up to three months of these kinds of pressures in the NHS because the NHS has been left in such a fragile state. Will the Secretary of State commit here today that he will start planning for next winter now so we don't end up in this situation again next year?
- The NHS Confederation has said that whilst health services are facing unprecedented levels of patient need, this is exacerbating longer-term structural issues like workforce and lack of capital investment. Does Secretary of State agree and will he work to tackle these issues to bolster our National Health Service?
- The NHS Confederation responded to the Prime Minister's new year speech last week to say NHS staff would question whether the government have truly understood the sheer scale of demand versus the capacity of the health service to deliver against it. Can the Secretary of State reassure NHS staff today?

*If you would like to discuss the issues raised in this briefing, or would like any alternative interventions, please don't hesitate to be in touch via **Caitlin Plunkett-Reilly, External Affairs Manager (Public Affairs)** at caitlin.plunkett-reilly@nhsconfed.org.*

About the NHS Confederation

The NHS Confederation is the membership organisation that brings together, supports and speaks for the whole healthcare system in England, Wales and Northern Ireland. The members we represent employ 1.5 million staff, care for more than 1 million patients a day and control £150 billion of public expenditure. We promote collaboration and partnership working as the key to improving population health, delivering high-quality care and reducing health inequalities.