



Department
of Health &
Social Care

Performance of the health service in England: Secretary of State for Health and Social Care annual report 2022 to 2023

Presented to Parliament pursuant to section 247D(3) of the National Health Service Act 2006.

Foreword

The NHS has faced enormous challenges in recent years, but there is no escaping the fact that the system has underperformed and now finds itself in a state of crisis. After more than a decade of mismanagement, short-termism and underinvestment, the NHS is broken.

This is underlined by the poor performance of the health service in 2022 to 2023. Targets were missed across the board and outputs did not reach pre-pandemic levels, let alone the levels required to begin recovery after years of decline.

[NHS England's priorities and operational planning guidance for 2022 to 2023](#) set out an elective activity target of 104% of pre-pandemic value-weighted elective activity nationally. This target was comprehensively missed. Even in March 2023, activity levels were only 96.8% of pre-pandemic levels. Year on year, the elective waiting list increased by almost a million to a then-record total of 7.33 million.

December 2022 was the worst month on record for ambulance response times - staggeringly, average waits for conditions like heart attacks and strokes were more than an hour and a half. This compares with the safe standard of 18 minutes.

Accident and emergency (A&E) waiting times deteriorated significantly in 2022 to 2023, with just 70.7% of patients being admitted, transferred or discharged within 4 hours. This is compared with 76.7% the year before and a target of 95%.

Patients' satisfaction with their GPs also fell in 2022, with the proportion of people rating their overall experience of their GP practice as good down more than 10% on 2021. The former Health Secretary promised in September 2022 that anyone who needed an appointment would get one at a GP practice within 2 weeks but, in March 2023 alone, there were still more than 1.3 million people waiting more than a month to see a GP.

The pattern is clear. Big promises went unfulfilled and ambitious targets were not met. Standards fell even as pandemic pressures were easing. Intransigence from ministers meant that hundreds of thousands of operations were cancelled due to industrial action. The NHS faced its worst winter crisis on record and nurses were forced out on strike for the first time in the history of the health service.

The new government has already begun the difficult work of renewal. The [Autumn Budget 2024](#) delivered significant investment to the NHS, but we are clear that investment must be linked to reform and every penny invested must provide value for money.

We need to take a whole-system approach to health and social care, which is why, alongside our 10 Year Health Plan for change and modernisation of the NHS, we will deliver a long-term plan for reform of adult social care.

Building an NHS for the future requires 3 big shifts – from:

- analogue to digital
- hospital to community
- sickness to prevention

We clearly have a long road ahead. But while the NHS is broken, it's not beaten. We will turn the NHS around, so it is there for us when we need it, once again.

Introduction

The Secretary of State is required by [section 247D of the National Health Service Act 2006](#) (the 2006 act) to publish an annual report (laid before Parliament pursuant to section 247D(3)) on the performance of the health service in England. The report must include an assessment of the effectiveness of the discharge of the duties under sections 1A and 1C of the 2006 act.

As required under section 247D(2), this report includes an assessment of how effectively the Secretary of State has discharged their duties under the following sections of the 2006 act:

- 1A (duty as to improvement in quality of services)
- 1C (duty as to reducing health inequalities)

It is supplementary to the [Department of Health and Social Care \(DHSC\) annual report and accounts 2022 to 2023](#), which was published in January 2024.

The Secretary of State is under a duty in section 1A of the 2006 act to exercise their functions with a view to securing continuous improvement in the quality of services provided to individuals for or in connection with the matters listed at:

- 1A(1)(a) (the prevention, diagnosis or treatment of illness)
- 1A(1)(b) (the protection or improvement of public health)

In discharging this duty, the Secretary of State must, in particular:

- act with a view to securing continuous improvement in the outcomes that are achieved from the provision of the services
- have regard to quality standards prepared by the National Institute for Health and Care Excellence (NICE) as set out in [section 234 of the Health and Social Care Act 2012](#)
- regard, under section 1C of the 2006 act, to the need to reduce inequalities between the people of England with respect to the benefits they can obtain from the health service

A large part of this information was already included in the performance report of the DHSC annual report and accounts 2022 to 2023. However, a few specific portions were not addressed and could not be included due to the delayed publication of the following data:

- the [NHS Outcomes Framework Indicators, April 2024 release](#) was published on 25 April 2024
- the [Measures from the Adult Social Care Outcomes Framework, England, 2022 to 2023](#) were published on 7 December 2023
- the [Public Health Outcomes Framework: May 2024 data update](#) was published on 8 May 2024

These outstanding portions are addressed below.

Assessment for section 1A

NHS outcomes

The [NHS Outcomes Framework \(NHS OF\)](#) is a set of indicators developed by DHSC to monitor the health outcomes of adults and children in England. The framework provides an overview of how the NHS is performing.

Changes to the NHS OF were proposed as part of a wide-ranging [consultation on statistical outputs](#) that ran from December 2023 to March 2024. The results of the NHS OF Indicators consultation are still to be considered. This publication updates 5 of the NHS OF indicators that we anticipate will continue in future, subject to appropriate consideration of the consultation responses in due course.

Further updates on NHS outcomes can be found under 'Priority Outcome 2' (page 21) in the DHSC annual report and accounts 2022 to 2023 (linked in 'Introduction' above and published on 25 January 2024).

Quality, patient safety and investigations

The [NHS Patient Safety Strategy](#) was launched by NHS England in 2019.

In 2022 to 2023, NHS England launched a series of programmes and areas of work in order to achieve the strategy's aims, including:

- the [Patient safety incident response framework \(PSIRF\)](#)
- a programme to implement the new [Learn from patient safety events \(LFPSE\) service](#)
- continued uptake of the [NHS Patient Safety Syllabus](#)
- implementation of the [Framework for involving patients in patient safety](#)

At the end of 2022 to 2023, the [Healthcare Safety Investigation Branch \(HSIB, now known as the Health Services Safety Investigations Body\) published 16 investigation reports, 4 interim publications and one annual review](#). HSIB made a total of 36 national safety recommendations across its 16 published investigation reports.

Adult Social Care Outcomes Framework (ASCOF)

The Measures from the Adult Social Care Outcomes Framework, England, 2022 to 2023 (linked in 'Introduction' above) were published on 7 December 2023. The ASCOF measures how well care and support services help people achieve the outcomes that matter most to them.

The published report summarises the main findings for each measure in the ASCOF in 2022 to 2023, across a basket of metrics that measure how services contributed to delivering benefits to people in receipt of care and support, such as improved:

- quality of life
- independence
- empowerment

Data is published at local authority, regional and national level for each outcome

Further updates on social care outcomes can be found under 'Priority Outcome 5' of the performance report (page 76) in the DHSC annual report and accounts 2022 to 2023 (linked in 'Introduction' above).

NICE

[NICE quality standards](#) set out priority areas for quality improvement in health, public health and social care. Each standard includes a set of statements to help drive and measure quality improvements within a particular area of health or care.

Between 1 April 2022 and 31 March 2023, [NICE fully updated 9 quality standards](#), including standards on:

- type 1 and type 2 diabetes in adults
- acute kidney injury
- urinary tract infection in adults
- postnatal care

NICE also aligned 34 quality standards with updated guidance.

Overall assessment (section 1A)

The Secretary of State's assessment is that limited progress was made against the duty under section 1A of the 2006 act to secure continuous improvement in the quality of services provided to individuals - in particular, securing continuous improvement in the outcomes achieved.

Pressures were seen across the system for 2022 to 2023, including resourcing and the continued recovery from COVID-19.

Assessment for section 1C

An update on public health and health disparities can be found:

- under 'Priority Outcome 4' of the performance report (page 59) in the DHSC annual report and accounts 2022 to 2023 (linked in 'Introduction' above)
- in the Public Health Outcomes Framework: May 2024 data update (also linked in 'Introduction' above)

Overall assessment (section 1C)

The Secretary of State's assessment of how well the health inequalities duty has been fulfilled in 2022 to 2023 is that there was minimal progress. More can and must be done in the years to come.