



A&E Attendances and Emergency Admissions

A&E Attendances and Emergency Admissions

September 2015 Monthly Report

Version number: 1

First published: 12 November 2015

Prepared by: Analytical Service (National)

Contents

Contents.....	3
1 Background.....	4
2 Key Findings	5
3 A&E attendances	6
4 Emergency admissions	8
5 Performance	10
6 Annex.....	12
6.1 Methodology.....	12
6.2 Glossary.....	13
6.3 Feedback Welcomed	14
6.4 Additional Information	14

1 Background

The results of a recent review by Sir Bruce Keogh^{1, 2} concluded that current arrangements for reporting performance are uncoordinated. Reporting is at different frequencies (weekly, monthly and quarterly) and on different days of the week. This makes it difficult for people to have one transparent, coherent picture of performance at any one time. We are therefore standardising reporting arrangements so that performance statistics for A&E, Referral to Treatment (RTT), cancer, diagnostics, ambulances, NHS 111 and delayed transfers of care (DTC) are all collected monthly and published on one day each month.

This third monthly A&E report presents a summary of English A&E attendances & emergency admissions statistics for September 2015 as well as an analysis of national trends.

Data on A&E attendances and emergency admissions have been published weekly since 2010. In order to provide meaningful comparisons to previous years, we have created an estimated monthly time series from the weekly data. This time series forms the basis of the analysis, and is also published on our web page.

A&E waiting times form part of the NHS Constitution, which contains a list of expected rights and pledges for patients that NHS England take into account when assessing organisational delivery. The operational standard for A&E waiting times is that 95% of patients should be admitted, transferred or discharged within 4 hours of their arrival at an A&E department.

Full tables for September 2015 and an England level time series can be found on the NHS England statistics website at the link below.

<http://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/>

1. <http://www.england.nhs.uk/wp-content/uploads/2015/06/letter-waiting-time-standards-sbk.pdf>
2. <http://www.england.nhs.uk/wp-content/uploads/2015/06/letter-ccgs-ss.pdf>

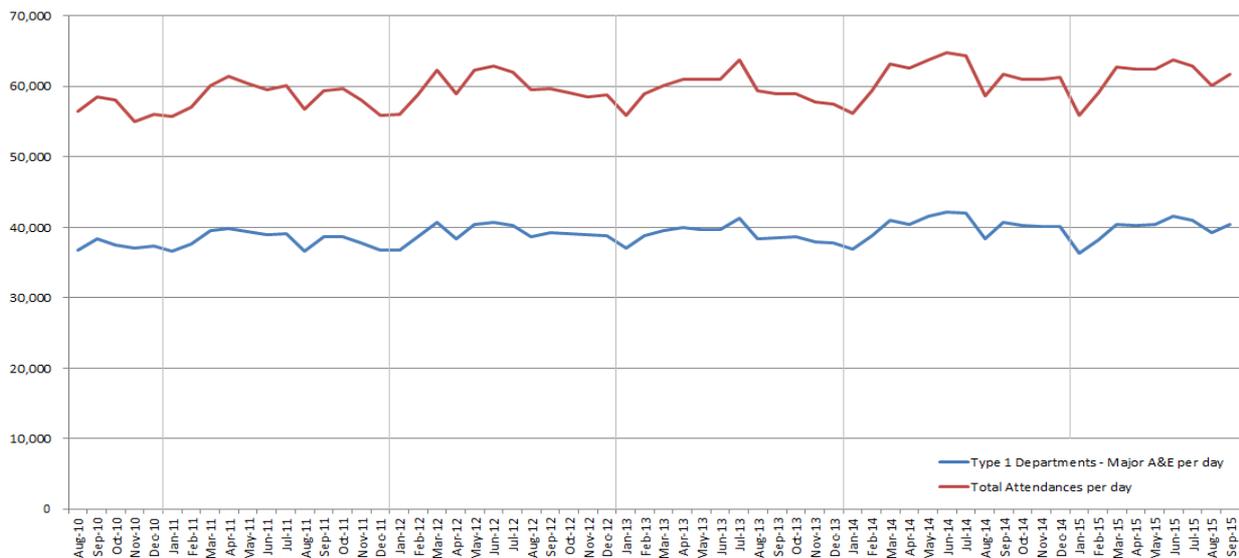
2 Key Findings

- The total number of attendances in September 2015 was 1,850,000, a decrease of 0.2% on the same month last year. Of these, attendances at type 1 A&E departments were 0.7% lower
- There were 459,000 emergency admissions in the month, 2.8% higher than the same month last year. Emergency admissions via type 1 A&E departments increased by 1.9 % over the same period
- 27.2% of patients that attended a major A&E department required admission to hospital, which compares to 26.5% for the same month last year
- 93.4% of patients were seen within 4 hours in all A&E departments this month, lower than 94.6% for the same month last year
- 90.1% of patients were seen within 4 hours in type 1 A&E departments, compared to 92.0% for the same month last year
- There were 25,400 four-hour delays from decision to admit to admission this month, which compares to 19,600 in the same month last year
- Of these, 25 were delayed over twelve hours, compared to 28 in the same month last year
- 46 out of 138 reporting trusts with type 1 departments achieved the 95% standard on all types during the month
- Sheffield Teaching Hospitals NHS Foundation Trust did not submit data this month due to IT difficulties

3 A&E attendances

- 3.1. The total number of attendances in September 2015 was 1,850,000, which is 0.2% lower than 1,853,000 in the same month last year. Of these, attendances at type 1 A&E departments decreased by 0.7% from 1,223,000 to 1,213,000.
- 3.2. Looking at the pattern over slightly longer time periods, attendances in the last 3 months showed no change (to 1 decimal place) when compared to the same 3 months last year, but activity in the last 12 months increased by 0.8%.
- 3.3. Chart 1 shows the volume of attendances per day in each month to remove fluctuations caused by the length of each month. This shows that attendances are typically higher in the summer months, particularly between May and July, and are lowest in winter, notably in January. Attendances peaked in July 2014, and as noted above, attendances this summer are down on those levels.

Chart 1: Total A&E attendances and Type 1 attendances per day (estimated from weekly and monthly data)

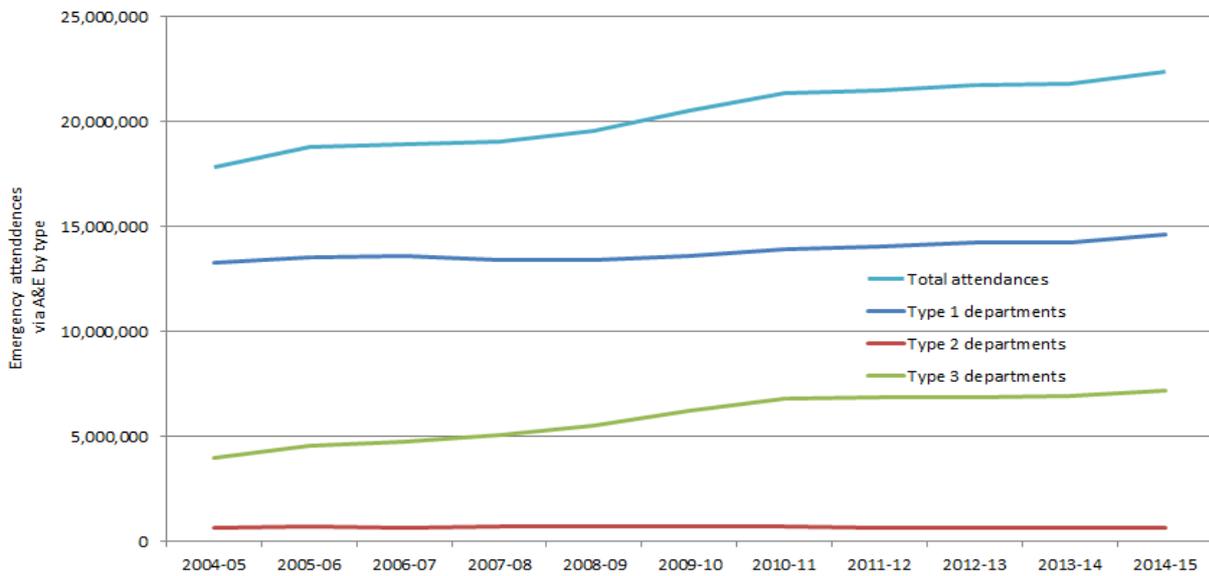


- 3.4 A longer term trend using historical quarterly data shows that total annual attendances have increased by around 4.5 million (25%) between 2004/05 and 2014/15 (Table 1 and Chart 2). Type 1 attendances have increased by around 1.3 million (10%) over the same period.

Table 1: Total A&E attendances and type 1 attendances by year

Year	Type 1 Departments -		Annual increase in total attendances
	Major A&E	Total attendances	
2004-05	13,265,820	17,837,180	-
2005-06	13,553,686	18,759,164	5.2%
2006-07	13,602,589	18,922,275	0.9%
2007-08	13,395,275	19,076,831	0.8%
2008-09	13,426,136	19,588,344	2.7%
2009-10	13,618,300	20,511,908	4.7%
2010-11	13,931,715	21,380,985	4.2%
2011-12	14,013,922	21,481,402	0.5%
2012-13	14,252,068	21,738,637	1.2%
2013-14	14,213,148	21,778,657	0.2%
2014-15	14,584,832	22,363,638	2.7%

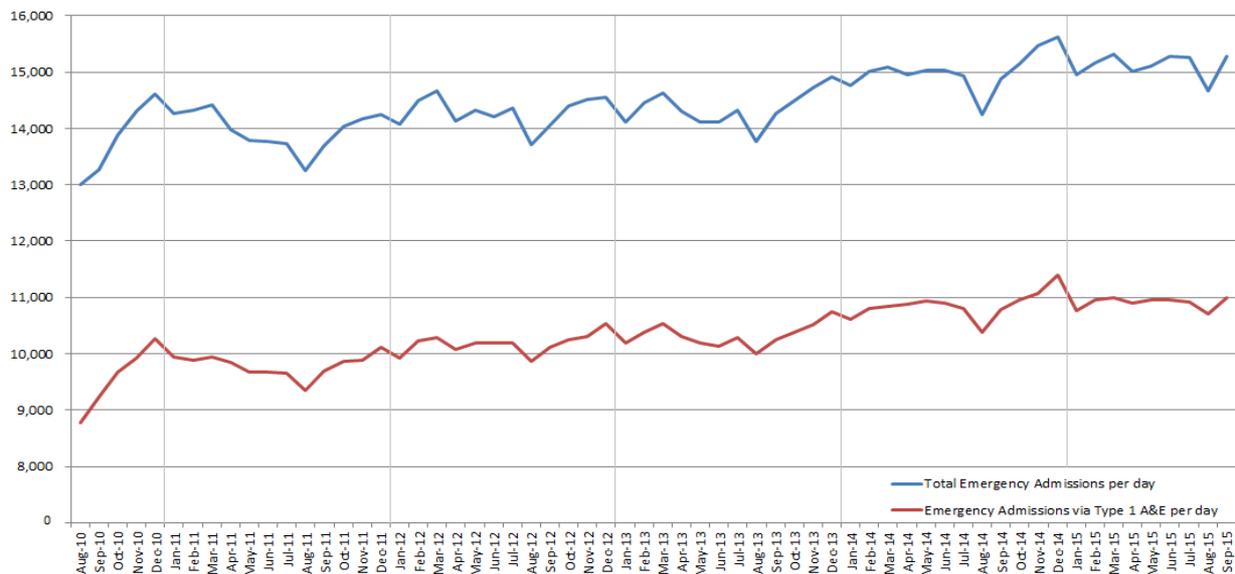
Chart 2: Total A&E attendances by year



4 Emergency admissions

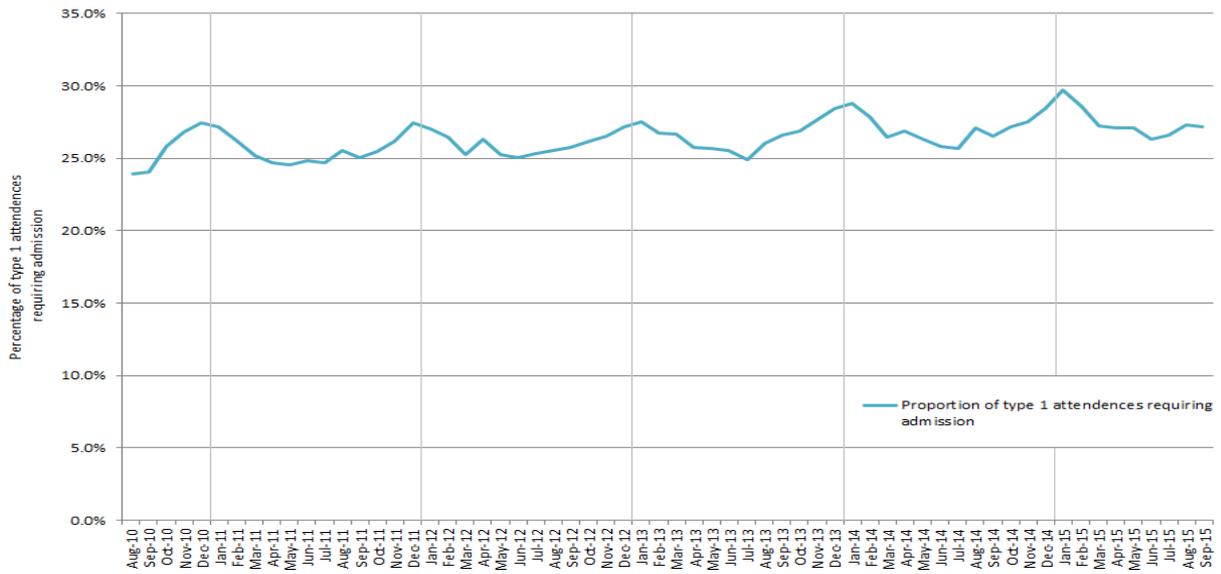
- 4.1. There were 459,000 emergency admissions in the month, which is 2.8% higher than 446,000 in the same month last year. Emergency admissions via type 1 A&E departments increased by 1.9% compared to the same month last year.
- 4.2. Looking at the pattern over slightly longer time periods, emergency admissions in the last 3 months rose by 2.6% over the same 3 months last year and by 2.4% over the last 12 months.
- 4.3. Chart 3 shows the volume of emergency admissions per day in each month to remove fluctuations caused by the length of each month. As opposed to A&E attendances, which show peaks in the summer months, emergency admissions peak in winter, with December 2014 a particular high point.

Chart 3: Number of emergency admissions via A&E per day (estimated from weekly and monthly data)



- 4.4. The proportion of type 1 attendances requiring admission gives an indication of the clinical complexity of patients attending A&E and shows a seasonal pattern with a higher proportion observed in winter months, especially January. In September 2015, 27.2% of type 1 attendances required admission compared to 26.5% in September 2014 (chart 4). The peak in this measure over the last five years was in January 2015 at 29.7%.

Chart 4: Percentage of type 1 attendances that required admission by month



5 Performance

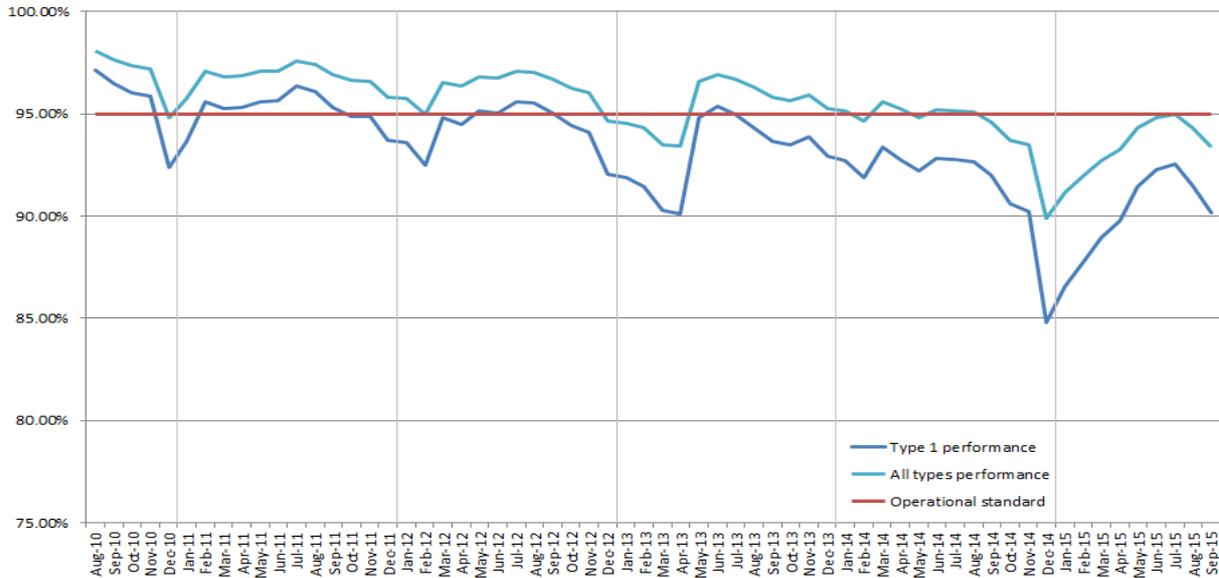
- 5.1. The operational standard for A&E waiting times is that 95% of patients should be admitted, transferred or discharged within 4 hours of their arrival at an A&E department.
- 5.2. 93.4% of patients were seen within 4 hours in all A&E departments this month, lower than 94.6% for the same month last year.
- 5.3. 90.1% of patients were seen within 4 hours in type 1 A&E departments, compared to 92.0% for the same month last year.
- 5.4. 46 out of 138 reporting trusts with type 1 departments achieved the standard on all types for the month.
- 5.5. At organisation level, when looking at the 138 trusts that have a type 1 department, there is significant variation with performance ranging from 77.3% to 98.8% on all types of A&E (Table 2).

**Table 2: Proportion of patients spending 4 hours or less in A&E
Highest and lowest performing trusts that have a type 1 department**

Trust Name	Type 1 performance	All types performance
THE DUDLEY GROUP NHS FOUNDATION TRUST	98.1%	98.8%
GEORGE ELIOT HOSPITAL NHS TRUST	98.7%	98.7%
LUTON AND DUNSTABLE UNIVERSITY HOSPITAL NHS FOUNDATION TRUST	97.6%	98.3%
SHEFFIELD CHILDREN'S NHS FOUNDATION TRUST	98.1%	98.1%
BURTON HOSPITALS NHS FOUNDATION TRUST	96.3%	98.0%
COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST	95.1%	97.8%
NORTHUMBRIA HEALTHCARE NHS FOUNDATION TRUST	97.2%	97.5%
SOUTH TEES HOSPITALS NHS FOUNDATION TRUST	95.9%	97.3%
EAST CHESHIRE NHS TRUST	96.8%	97.2%
SURREY AND SUSSEX HEALTHCARE NHS TRUST	97.1%	97.1%
PENNINE ACUTE HOSPITALS NHS TRUST	83.3%	85.9%
EAST AND NORTH HERTFORDSHIRE NHS TRUST	79.2%	85.9%
ROYAL CORNWALL HOSPITALS NHS TRUST	81.2%	85.5%
ROYAL UNITED HOSPITALS BATH NHS FOUNDATION TRUST	83.1%	85.5%
BRIGHTON AND SUSSEX UNIVERSITY HOSPITALS NHS TRUST	83.6%	85.1%
PORTSMOUTH HOSPITALS NHS TRUST	79.4%	83.9%
THE PRINCESS ALEXANDRA HOSPITAL NHS TRUST	83.1%	83.5%
PLYMOUTH HOSPITALS NHS TRUST	82.5%	82.5%
HULL AND EAST YORKSHIRE HOSPITALS NHS TRUST	79.9%	82.1%
COLCHESTER HOSPITAL UNIVERSITY NHS FOUNDATION TRUST	77.3%	77.3%

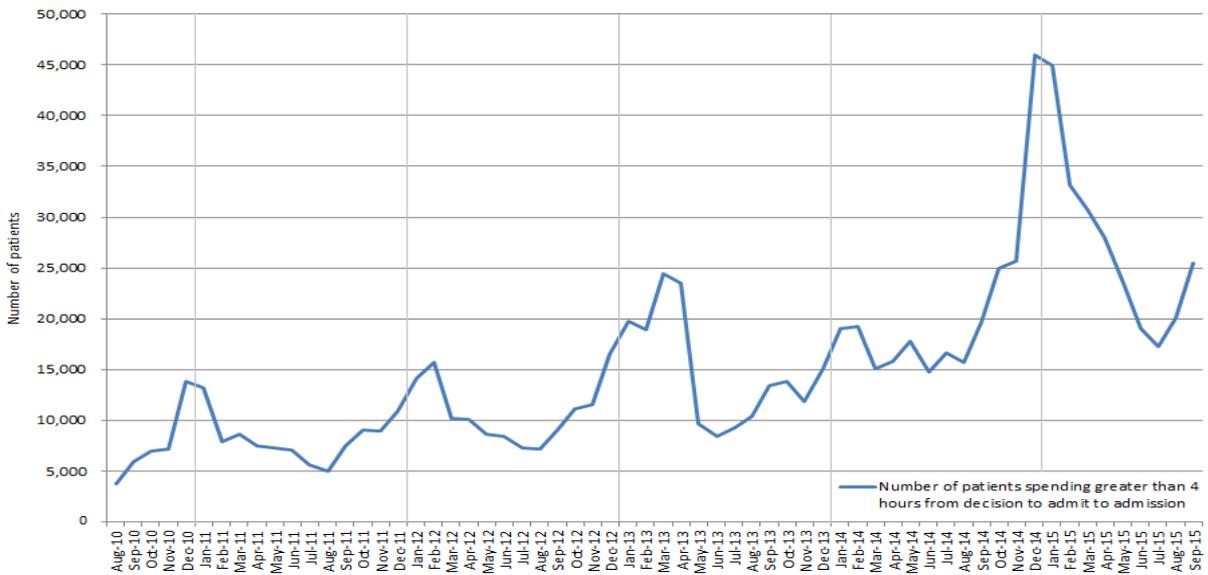
- 5.6. Performance against the standard over the past five years is shown in Chart 5. It is clear from this that performance shows a seasonal pattern with lower percentages seen during winter months, followed by a recovery during spring and summer.

Chart 5: Proportion of patients spending 4 hours or less in A&E Type 1 and all types by month



- 5.7. In September 2015, there were 25,400 patients who were delayed more than four hours from decision to admit to admission, which is 29.7% higher than 19,600 for the same month last year.
- 5.8. Chart 6 shows the trend in four hour delays for admission since 2010. The measure is particularly seasonal with much higher figures in the winter months, especially in the most recent winter, which coincided with a fall in performance on the four hour total time standard.

Chart 6: Total number of A&E 4-hour waits for admission by month



- 5.9. In the current month there were a total of 25 patients spending more than twelve hours from decision to admit to admission, compared to 28 in September 2014.

6 Annex

6.1 Methodology

6.1.1. NHS England compiles A&E attendances and emergency admissions data through a central return that is split into two parts:

- A&E Attendances: This collects the number of A&E attendances, patients spending greater than 4 hours in A&E from arrival to discharge, transfer or admission and the number of patients delayed more than 4 hours from decision to admit to admission.
- Emergency Admissions: This collects the total number of emergency admissions via A&E as well as other emergency admissions (i.e. not via A&E).

6.1.2. The above data items are split by the following categories of A&E department:

- Type 1 Department (Major A&E Department) - A consultant led 24 hour service with full resuscitation facilities and designated accommodation for the reception of accident and emergency patients.
- Type 2 Department – A consultant led single specialty A&E service (e.g. ophthalmology, dental) with designated accommodation for the reception of emergency patients.
- Type 3 Department - Other type of A&E/Minor Injury Units (MIUs)/Walk-in Centres (WiCs), primarily designed for the receiving of emergency patients. A type 3 department may be doctor led or nurse led. It may be co-located with a major A&E or sited in the community. A defining characteristic of a service qualifying as a type 3 department is that it treats at least minor injuries and illnesses (sprains for example) and can be routinely accessed without appointment.

6.1.3. NHS Trusts, NHS Foundation Trusts, Social Enterprises and GP Practices submit data to NHS England via Unify2. Unify2 is NHS England's standard online tool for the collection and sharing of NHS performance data. Once data is submitted and signed-off, NHS England performs central validation checks to ensure good data quality.

Data availability

6.1.4. A&E attendances and emergency admissions data are published to a pre-announced timetable, usually every second Thursday of the month. The data is published on the NHS England website here:

<http://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/>

Data revisions

6.1.5. Revisions to published figures are released on a six monthly basis and in accordance with the NHS England Analytical Services (National) team's revision policy. The revisions policy can be found here:

<http://www.england.nhs.uk/statistics/code-compliance/#Unifypolicy>

6.1.6. The most recent set of revisions were published at the same time as this report. The A&E attendances and emergency admissions data contained in this report may be subject to further revision.

Data comparability

- 6.1.7. Weekly data has been published since November 2010. Prior to November 2010, data was briefly collected monthly between August 2010 and October 2010 and was collected quarterly from 2003/04 until September 2011.
- 6.1.8. The data can also be compared to A&E data for Wales collected by the Welsh Government, data for Scotland collected from Information Services Division (ISD) Scotland and data for Northern Ireland collected from the Department of Health, Social Services and Public Safety.
- 6.1.9. The Welsh Government publishes monthly data on A&E attendances and performance against the 4-hour standard. Data can be found here:
<https://statswales.wales.gov.uk/Catalogue/Health-and-Social-Care/NHS-Hospital-Waiting-Times/Accident-and-Emergency>
- 6.1.10. ISD Scotland now publishes a weekly update on A&E attendances and performance against the 4-hour standard. This can be found here:
<http://www.isdscotland.org/Health-Topics/Emergency-Care/Publications/index.asp?ID=1251>
- 6.1.11. The Department of Health, Social Services and Public Safety publishes quarterly data on A&E attendances and performance against the 4-hour standard. Data can be found here:
<http://www.dhsspsni.gov.uk/index/statistics/hospital/waitingtimes-emergency.htm>

6.2 Glossary

4-Hour Standard

The national standard whereby 95% of all patients are admitted, transferred or discharged within 4 hours of arrival.

A&E Attendance

The presence of a patient in an A&E service seeking medical attention.

A&E Type

Collectively the term All Types includes the following department types:

Type 1) Major A&E Departments

Type 2) Single Specialty A&E service (e.g. ophthalmology, dental)

Type 3) Other type of A&E such as Minor Injury Units and Walk-in Centres

Emergency admission

Admission to a hospital bed as an emergency. These can be split into admissions via an A&E department or from other sources (eg direct from a GP).

Provider

An organisation that provides NHS treatment or care, for example, an NHS acute trust, mental health trust, community provider, or an independent sector organisation.

Type 1 A&E

A large hospital department which provides a consultant-led, 24 hour service with full resuscitation facilities and designated accommodation for the reception of emergency patients.

Waiting Time

The time of arrival until the time of admission, transfer or discharge.

Delay to admission

The time a patient waited for an admission and is measured from decision to admit to admission (also known as a 'trolley wait').

6.3 Feedback Welcomed

We welcome feedback on the content and presentation of the A&E and emergency admissions statistics within this quarterly statistical report and those published on the NHS England website. If anyone has any comments on this, or any other issues regarding A&E data and statistics, then please email Unify2@dh.gsi.gov.uk

6.4 Additional Information

Full details of A&E and emergency admissions data for individual organisations are available at:

<http://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/>

For press enquiries please contact the NHS England media team on 0113 825 0958 or 0113 825 0959.

Email enquiries should be directed to: nhsengland.media@nhs.net

The Government Statistical Service (GSS) statistician with overall responsibility for the data in this report is:

Chris Gibbins
Analytical Services (National)
NHS England
Room 5E24, Quarry House, Quarry Hill, Leeds LS2 7UE
Email: Unify2@dh.gsi.gov.uk