

EMERGENCY CARE WAITING TIME STATISTICS (July - September 2011)

This statistical release presents information on the time spent waiting in emergency care departments in Northern Ireland for both new and unplanned review attendances. It reports on the performance of Hospitals against the DHSSPS Ministerial target for emergency care departments in Northern Ireland.

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July - September 2011

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Emergency Care Waiting Time Statistics in Northern Ireland

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Background

The Ministerial target¹ for Northern Ireland for 2011/12 requires that:

'95% of patients attending Types 1, 2 or 3 A&E departments are either treated and discharged home, or admitted, within four hours of their arrival in the department, and; no patient attending any A&E department should wait longer than 12 hours either to be treated and discharged home, or admitted.'

Key Points

Latest Position (September 2011):

- During September 2011, 77.3% of patients attending Type 1 emergency care departments were either treated and discharged home, or admitted within 4 hours, compared with 94.2% attending Type 2 departments and 100.0% attending Type 3 departments (Table 2).
- In September 2011, 538 (0.9%) out of a total 57,340 attendances at emergency care departments in Northern Ireland waited longer than 12 hours to be either treated and discharged home, or admitted (Table 9).

Position during last 3 months (July - September 2011)

Between July and September 2011:

- The percentage of patients attending Type 1 emergency care departments that were either treated and discharged home or admitted within 4 hours decreased, from 80.5% to 77.3% (Figure 1, Table 2).
- In Type 2 emergency care departments, the percentage of patients attending that were either treated and discharged home or admitted within 4 hours increased, from 90.5% to 94.2% (Figure 1, Table 2).
- The percentage of patients attending Type 3 emergency care departments that were either treated and discharged home or admitted within 4 hours remained at 100.0% (Figure 1, Table 2).
- The number of patients that waited longer than 12 hours to be either treated and discharged home, or admitted increased by 56.4% (194), from 344 to 538 (Figure 11, Table 9).

¹ See Appendix 2, Note 17.

Reader Information

Purpose	Monitor and report HSC Trust and Hospital performance against Ministerial target for waiting times at emergency care departments in Northern Ireland.
Authors	Caolan Laverty, Kieran Taggart, Laura Smyth.
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Reporting Period	1 st July 2011 – 30 th September 2011.
Statistical Quality	Information detailed in this release has been provided by HSC Trusts and has been validated by Hospital Information Branch (HIB) prior to release.
Target audience	DHSSPS, Chief Executives of HSC Board and Trusts in Northern Ireland, health care professionals, academics, Health & Social Care stakeholders, media and general public.
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Hospital Information Branch (HIB)

Hospital Information Branch is responsible for the collection, quality assurance, analysis and publication of timely and accurate information derived from a wide range of statistical information returns supplied by the Health & Social Care (HSC) Trusts and the HSC Board. Statistical information is collected routinely from a variety of electronic patient level administrative system and pre-defined EXCEL survey return templates.

The Head of the Branch is the Principal Statistician, Mrs. Laura Smyth. The Branch aims to present information in a meaningful way and provide advice on its uses to customers in the HSC Committee, Professional Advisory Groups, policy branches within the DHSSPS, other Health organisations, academia, private sector organisations, charity/voluntary organisations as well as the general public. The statistical information collected is used to contribute to major exercises such as reporting on the performance of the HSC system, other comparative performance exercises, target setting and monitoring, development of service frameworks as well as policy formulation and evaluation. In addition, the information is used in response to a significantly high volume of Parliamentary / Assembly questions and ad-hoc queries each year.

Information is disseminated through a number of key statistical publications, including: Inpatient Activity, Outpatient Activity, Emergency Care, Mental Health & Learning Disability and Waiting Time Statistics (Inpatient, Outpatient, Diagnostics and Cancer). A detailed list of these publications is available from:

Website: http://www.dhsspsni.gov.uk/index/stats_research/stats-activity_stats-2.htm

Technical Notes

This statistical release is part of a quarterly series presenting information on the length of time patients spent waiting to be treated at emergency care departments within Northern Ireland hospitals. It reports on Hospital performance for the months of July, August and September 2011.

Data Collection

Information presented in this brief is collected monthly using the Emergency Care information return (EC1). The EC1 return records all new and unplanned review attendances at emergency care departments across Northern Ireland. The EC1 information return was set up as an interim measure to monitor waiting times at emergency care departments until such time as a functional patient level dataset becomes available.

It should be noted that since 1st July 2011, Hospital Information Branch has been downloading patient level data on emergency care waiting times from the Regional Data Warehouse on the 8th of each month, for those emergency care departments using the Northern Ireland Regional Accident & Emergency System (NIRAES). Information from emergency care departments, using other administrative systems to record emergency care waiting times, continues to be sourced from the aggregate EC1 return. HSC Trusts have been instructed to generate this information on the 8th of each month.

Rounding

Percentages have been rounded to one decimal place and as a consequence some percentages may not sum to 100.

Data Quality

The data featured in this brief has been provided by HSC Trust and Hospital information staff and has been validated by Hospital Information Branch (HIB) prior to release.

At the end of each month, HIB perform a series of validation checks to verify that information downloaded / submitted is consistent both within and across HSC Trusts / Hospitals. Trend analysis is used to monitor monthly variations.

At the end of the financial year, HIB carry out a more detailed series of validations to verify that information is consistent both within and across returns.

Queries arising from validation checks are presented to HSC Trusts for clarification and if required returns may be amended and/or re-submitted. Once complete, all figures are sent to HSC Trusts for final sign-off.

Validated information on emergency care waiting time (EC1) statistics is published within the annual 'Northern Ireland Hospital Statistics: Emergency Care' publication. This is available to view or download from:

http://www.dhsspsni.gov.uk/index/stats_research/statistics-activity-stats-2/emergency-care-3/hospital-statistics-3-emergency-care-annual.htm

Main Uses of Data

The main uses of these data are to monitor waiting times at emergency care departments, to help assess Trust performance, for corporate monitoring, to inform and monitor related policy, and to respond to parliamentary / assembly questions and ad-hoc queries from the public.

Waiting Time Information Elsewhere in the United Kingdom

While it is our intention to direct users to waiting time information elsewhere in the UK, users should be aware that emergency care waiting times in other administrations may not always measure in a comparable manner to those in Northern Ireland. Details of the emergency care waiting times published elsewhere in the UK can be found as detailed below.

England

http://www.dh.gov.uk/en/Publicationsandstatistics/Statistics/Performanceandstatistics/AccidentandEmergency/DH_079085

Scotland

<http://www.isdscotland.org/isd/4024.html>

Wales

<http://data.gov.uk/dataset/time-spent-in-nhs-accident-and-emergency-departments>

Overall Performance against Ministerial Target

To improve access to emergency care departments and standardise performance across Northern Ireland, the below Ministerial target has been agreed for 2011/12:

‘95% of patients attending Types 1, 2 or 3 A&E departments are either treated and discharged home, or admitted, within four hours of their arrival in the department, and; no patient attending any A&E department should wait longer than 12 hours either to be treated and discharged home, or admitted.’

Table 1: Performance against each Component of the Ministerial Target for Emergency Care Waiting Times (April - June 2011)

Target Component	Target Achieved?		
	Jul 2011	Aug 2011	Sept 2011
Type 1 - 95% attendances within 4 hours	No	No	No
Type 2 - 95% attendances within 4 hours	No	No	No
Type 3 - 95% attendances within 4 hours	Yes	Yes	Yes
No attendance longer than 12 hours	No	No	No

The Ministerial target for emergency care waiting times **has not been achieved** during any of the last 3 months (July - September 2011) as there was a failure to meet one or more components of the target. However, the component for 95% of patients attending Type 3 emergency care departments **has been achieved** in each month.

Table 2: Performance against each Component of the Ministerial Target for Emergency Care Waiting Times (July - September 2011)

Emergency Care Department Type ²	Percentage Waiting 4 Hours and Under			Number Waiting Over 12 Hours			Total Attendances (New and Unplanned Review)		
	Jul 2011	Aug 2011	Sep 2011	Jul 2011	Aug 2011	Sep 2011	Jul 2011	Aug 2011	Sep 2011
Type 1	80.5%	79.2%	77.3%	342	447	538	47,746	48,096	46,931
Type 2	90.5%	91.9%	94.2%	2	14	0	4,356	3,828	3,748
Type 3	100.0%	100.0%	100.0%	0	0	0	6,602	6,998	6,661
All Departments	83.5%	82.5%	81.1%	344	461	538	58,704	58,922	57,340

Latest position (September 2011)

During September 2011, 77.3% of attendances in Type 1 emergency care departments were treated and discharged, or admitted within 4 hours of their arrival, compared with 94.2% in Type 2 departments, and 100.0% in Type 3 departments (Figure 1, Table 2).

In September 2011, 538 (0.9%) out of a total 57,340 attendances at emergency care departments in Northern Ireland waited longer than 12 hours to be either treated and discharged home, or admitted, all of which, had attended a Type 1 emergency care department (Figure 2, Tables 2 and 9).

There were a total of 57,340 attendances at emergency care departments in Northern Ireland during September 2011, of which, 46,931 (81.9%) attended Type 1 emergency care departments, 3,748 (6.5%) attended Type 2 departments and 6,661 (11.6%) attended Type 3 departments (Table 2).

Position during last three months (July - September 2011)

Over the last 3 months, the percentage of attendances at Type 1 departments that were treated and discharged, or admitted within 4 hours of their arrival decreased by 3.2 percentage points, from 80.5% in July 2011 to 77.3% in September 2011 (Figure 1, Table 2).

Since July 2011, the percentage of attendances at Type 2 emergency care departments treated and discharged, or admitted within 4 hours of their arrival increased by 3.7 percentage points, from 90.5% to 94.2% in September 2011 (Figure 1, Table 2).

Between July and September 2011, the percentage of attendances at Type 3 emergency care departments that were treated and discharged or admitted within 4 hours of their arrival remained at 100.0% (Figure 1, Table 2).

Since July 2011, the number of patients waiting longer than 12 hours to be either treated and discharged home, or admitted increased by 56.4% (194), from 344 to 538 in September 2011 (Figure 2, Table 2).

² See Appendix 2, Note 9 for list of Department Types & Notes 10 & 13 for reclassifications.

Over the last 3 months, the number of patients waiting longer than 12 hours increased markedly in Type 1 departments (342 in July 2011 to 538 in September 2011) and decreased in Type 2 departments (2 in July 2011 to 0 in September 2011), whilst the number waiting longer than 12 hours in Type 3 departments remained at zero (0) (Figure 2, Table 2).

Since July 2011, the number of attendances at emergency care decreased by 2.3% (1,364), from 58,704 to 57,340 in September 2011 (Table 2).

Figure 1: Percentage of Patients Waiting 4 Hours and Under in Emergency Care, by Department Type (July - September 2011)

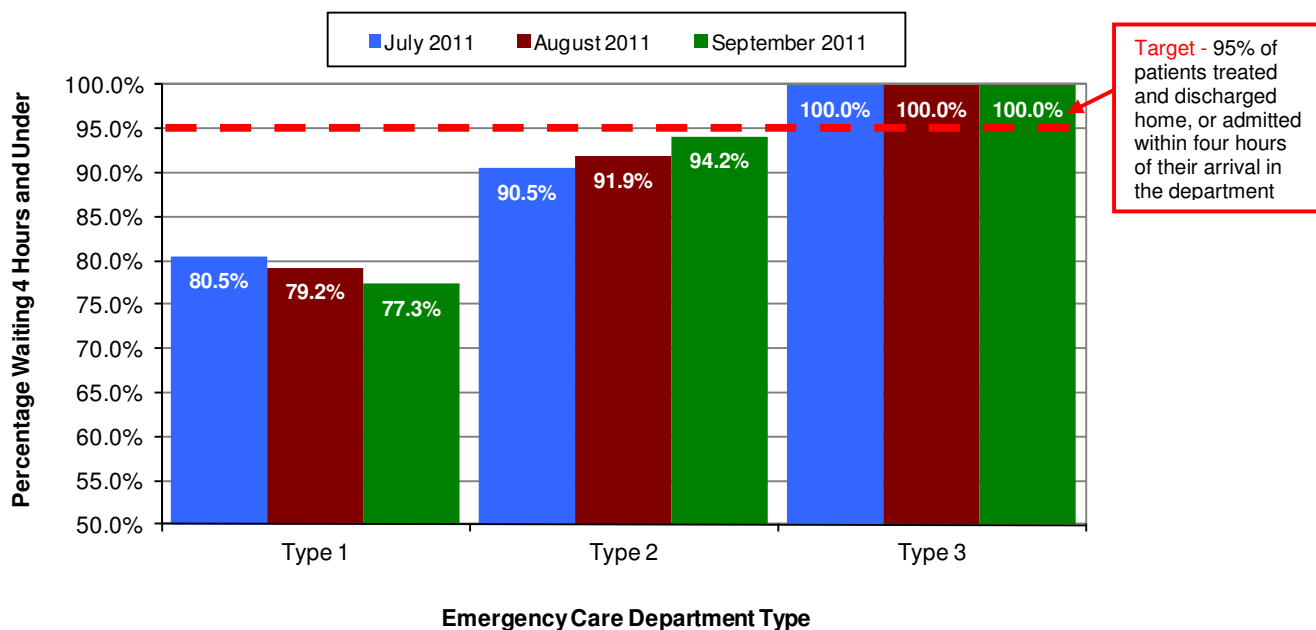
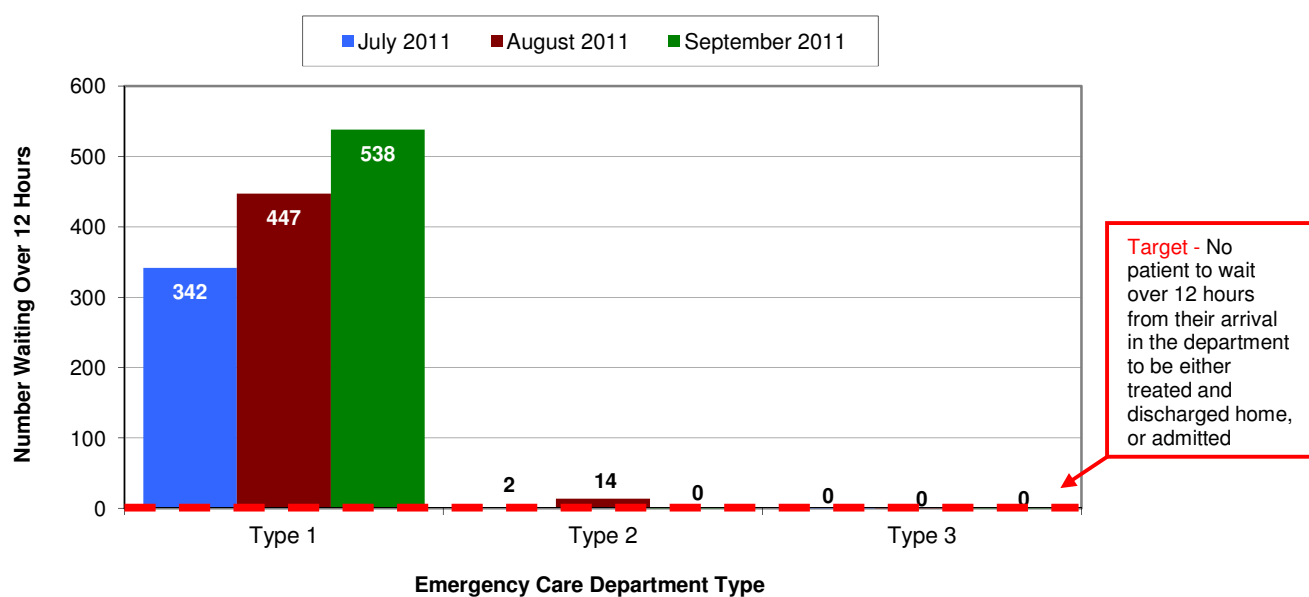


Figure 2: Number of Patients Waiting Over 12 Hours in Emergency Care, by Department Type (July - September 2011)



Performance at Type 1 Emergency Care Departments

Table 3: Performance against the Ministerial Target for Emergency Care Waiting Times at Type 1 Emergency Care Departments (July - September 2011)

Type 1 Emergency Care Department	Percentage Waiting 4 hours and under			Number Waiting Over 12 hours			Total Attendances (New and Unplanned Review)		
	Jul 2011	Aug 2011	Sep 2011	Jul 2011	Aug 2011	Sep 2011	Jul 2011	Aug 2011	Sep 2011
Altnagelvin	74.1%	72.5%	74.2%	1	2	0	4,633	4,530	4,158
Erne	97.3%	95.9%	95.2%	0	0	0	2,479	2,465	2,105
Antrim Area	71.9%	73.5%	72.7%	94	108	97	6,063	6,059	5,972
Causeway	80.9%	79.7%	78.7%	46	39	83	4,045	3,984	3,426
Craigavon Area	79.2%	74.6%	74.5%	0	0	0	5,812	5,939	5,841
Daisyhill	94.2%	94.4%	97.6%	0	0	0	3,395	3,433	2,993
Belfast City	82.2%	82.8%	79.7%	1	1	27	3,484	3,487	3,381
Royal Victoria	78.8%	75.9%	72.7%	25	26	95	5,921	6,289	6,448
Mater	80.5%	83.6%	66.5%	15	7	43	3,381	3,363	3,592
RBHSC	92.9%	89.7%	88.9%	0	0	0	2,212	2,291	2,535
Ulster	77.1%	74.0%	75.1%	160	264	193	6,321	6,256	6,480
Total	80.5%	79.2%	77.3%	342	447	538	47,746	48,096	46,931

Latest position (September 2011)

In September 2011, performance against both the 4 hour and 12 hour components of the Ministerial target was achieved by Erne and Daisyhill emergency care departments (Table 3).

During September 2011, performance against the 4 hour component of the Ministerial target for emergency care waiting times in Type 1 departments ranged from 66.5% in the Mater to 97.6% in Daisyhill (Figure 3, Table 3).

Performance against the 12 hour component of the Ministerial target for Type 1 departments ranged from 0 in Altnagelvin, Erne, Craigavon Area, Daisyhill and the RBHSC to 193 in the Ulster during September 2011 (Table 3).

There were a total of 46,931 attendances at Type 1 emergency care departments during September 2011, ranging from 2,105 in Erne to 6,480 in the Ulster (Table 3).

Position during last three months (July - September 2011)

Over the last 3 months, performance against the 4 hour component of the target declined in 8 of the 11 Type 1 emergency care departments. The highest percentage decrease in performance against the 4 hour component was reported by the Mater (80.5% in July 2011 to 66.5% in September 2011) (Figure 3, Table 3).

During this period, performance against the 12 hour component declined in 6 of the 11 Type 1 departments, whilst performance either remained the same or improved for all other Type 1 departments (Table 3).

Since July 2011, performance against the 12 hour component of the target declined markedly in the Royal Victoria (25 in July 2011 to 95 in September 2011), Causeway (46 in July 2011 to 83 in September 2011), Ulster (160 in July 2011 to 193 in September 2011), the Mater (15 in July 2011 to 43 in September 2011), and Belfast City (1 in July 2011 to 27 in September 2011) (Table 3).

During the last 3 months, the number of attendances decreased in 6 of the 11 Type 1 emergency care departments, with highest decrease being reported by Causeway, from 4,045 in July 2011 to 3,426 in September 2011. During this period, the number of monthly attendances at the Royal Victoria emergency care unit increased by 527 (8.9%), from 5,921 during July 2011 to 6,448 during September 2011 (Figure 4, Table 3).

Figure 3: Performance against the 4 Hour Ministerial Target for Emergency Care Waiting Times at Type 1 Emergency Care Departments (July - September 2011)

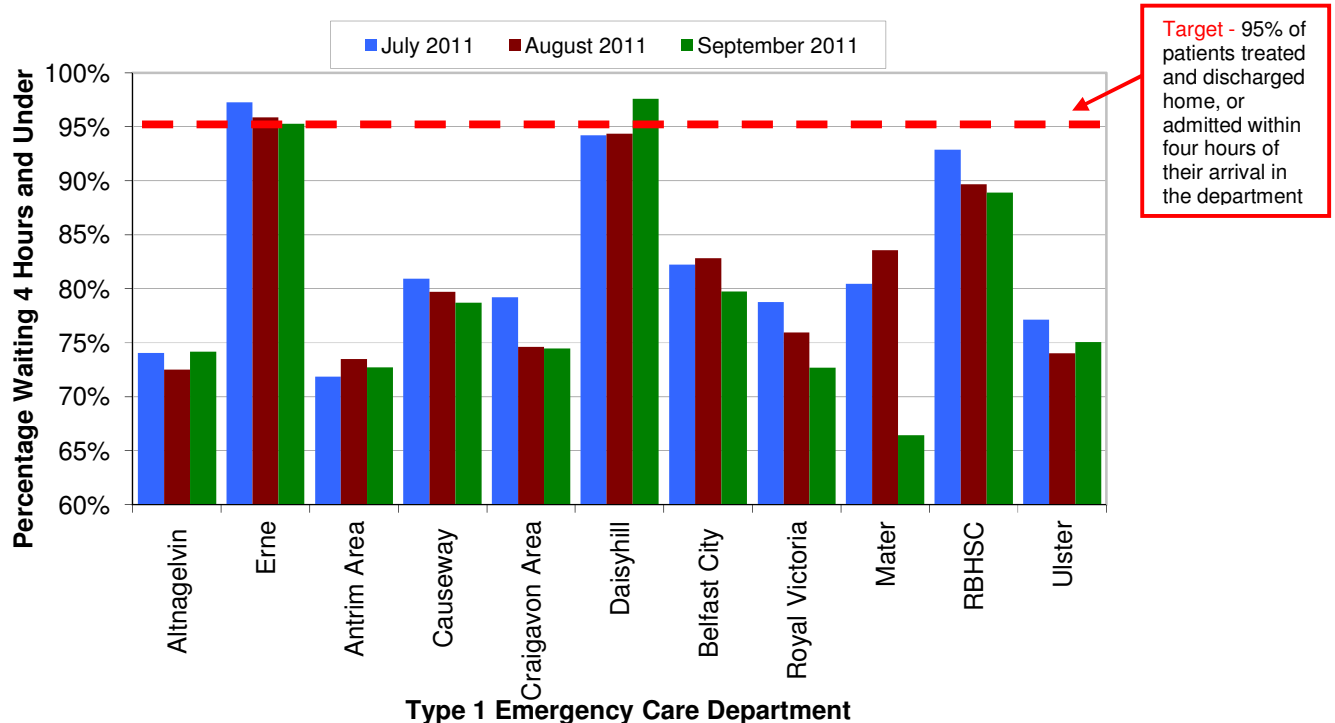


Table 4: Performance against the Ministerial Target for Emergency Care Waiting Times at Type 1 Emergency Care Departments (July 2010 - September 2011)³

Month	Percentage Waiting 4 hours and Under	Number Waiting Over 12 hours	Total Attendances (New and Unplanned Review)
July 2010	83.5%	114	47,519
August 2010	81.7%	147	48,785
September 2010	80.0%	289	46,955
October 2010	79.3%	376	47,392
November 2010	79.3%	722	44,052
December 2010	74.5%	664	45,471
January 2011	74.1%	1,181	46,550
February 2011	73.2%	1,196	43,551
March 2011	79.3%	773	49,447
April 2011	80.7%	563	50,239
May 2011	79.2%	885	49,778
June 2011	79.3%	917	48,482
July 2011	80.5%	342	47,746
August 2011	79.2%	447	48,096
September 2011	77.3%	538	46,931

Position during last fifteen months (July 2010 - September 2011)

Over the last 15 months, performance against the 4 hour component of the target for Type 1 emergency care departments ranged from 73.2% in February 2011 to 83.5% in July 2010 (Figure 4, Table 4).

Since July 2010, performance against the 12 hour component in Type 1 departments varied markedly from 114 in July 2010 to 1,196 in February 2011 (Figure 5, Table 4).

Between July 2010 and September 2011, monthly attendances at Type 1 emergency care departments were lowest in February 2011 (43,551). However, despite this, February 2011 reported the lowest percentage of patients waiting 4 hours and under (73.2%) and the highest number of patients waiting over 12 hours (1,196) in Type 1 emergency care departments (Figures 4 and 5, Table 4).

³ See Appendix 2, Note 11 for information on amendments to historical figures.

Figure 4: Performance against the 4 Hour Ministerial Target for Emergency Care Waiting Times at Type 1 Emergency Care Departments (July 2010 - September 2011)

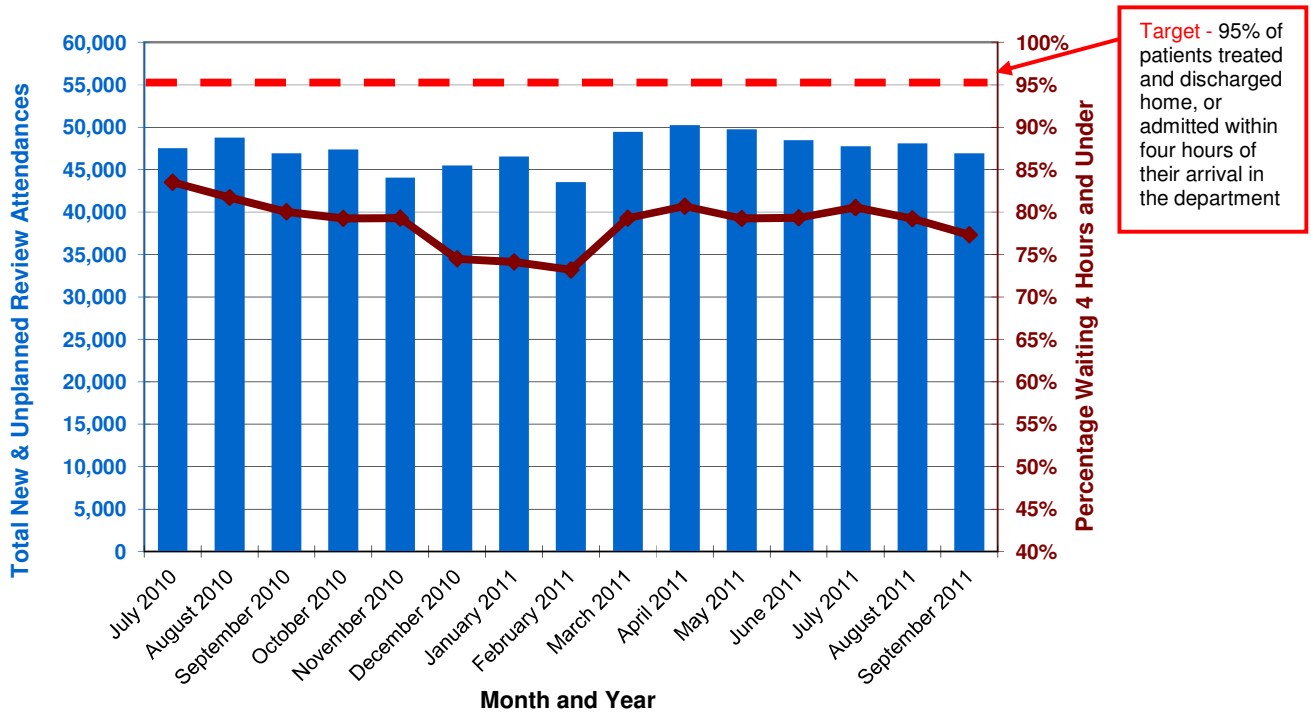
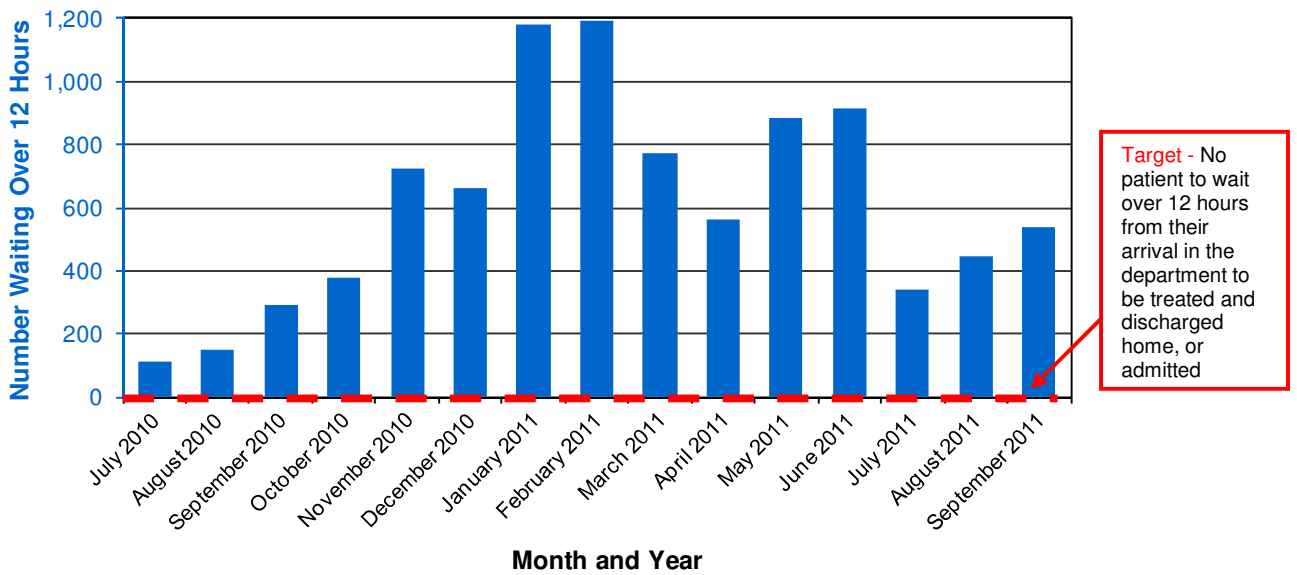


Figure 5: Performance against the 12 Hour Ministerial Target for Emergency Care Waiting Times at Type 1 Emergency Care Departments (July 2010 - September 2011)



Performance at Type 2 Emergency Care Departments

Table 5: Performance against the Ministerial Target for Emergency Care Waiting Times at Type 2 Emergency Care Departments (July - September 2011)

Type 2 Emergency Care Department	Percentage Waiting 4 hours and under			No. Waiting Over 12 hours			Total Attendances (New and Unplanned Review)		
	Jul 2011	Aug 2011	Sep 2011	Jul 2011	Aug 2011	Sep 2011	Jul 2011	Aug 2011	Sep 2011
Lagan Valley ⁴	92.1%	95.5%	94.6%	1	2	0	2,616	1,998	2,066
Downe ⁴	88.1%	87.9%	93.6%	1	12	0	1,740	1,830	1,682
Total	90.5%	91.9%	94.2%	2	14	0	4,356	3,828	3,748

Latest position (September 2011)

During September 2011, performance against the 4 hour component of the Ministerial target for emergency care waiting times in Type 2 departments was 94.6% in Lagan Valley and 93.6% in Downe (Figure 6, Table 5).

In September 2011, no patients attending Type 2 emergency care departments waited longer than 12 hours (Table 5).

There were a total of 3,748 attendances at Type 2 emergency care departments in September 2011 (1,682 in Downe and 2,066 in Lagan Valley) (Table 5).

Position during last three months (July - September 2011)

During the last 3 months, performance against the 4 hour component of the target increased by 5.5 percentage points in Downe from 88.1% in July 2011 to 93.6% in September 2011, whilst performance in the Lagan Valley emergency care department increased from 92.1% to 94.6% in September 2011 (Figure 6, Table 5).

Since July 2011, performance against the 12 hour component of the target improved in both the Lagan Valley (from 1 to 0 in September 2011) and Downe (from 1 to 0 in September 2011) (Table 5).

Attendances at Type 2 emergency care departments decreased each month since July 2011, from 4,356 to 3,748 in September 2011; although, this may have been due to the closure of the Lagan Valley emergency care department between 8pm and 9am each day since 1st August 2011 (Figure 7, Table 5)⁴.

⁴ Note the provision of emergency care services at both the Downe and Lagan Valley hospitals has changed during the last 6 months. See Appendix 2, Notes 14 & 15 for information on recent changes to opening hours.

Figure 6: Performance against the 4 Hour Ministerial Target for Emergency Care Waiting Times at Type 2 Emergency Care Departments (July - September 2011)

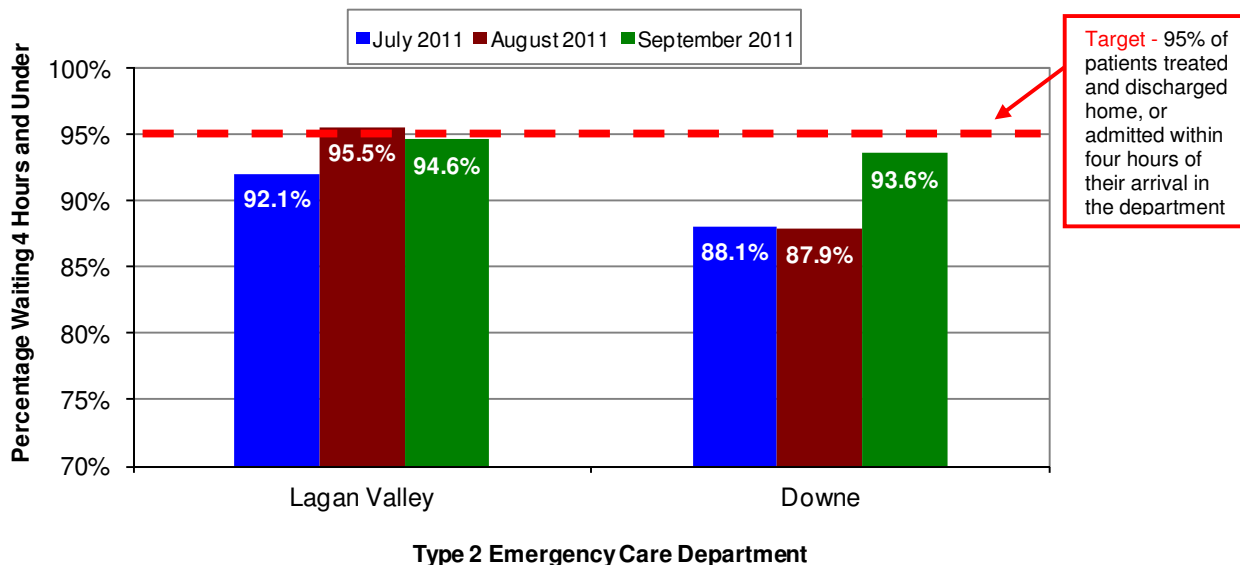


Table 6: Performance against the Ministerial Target for Emergency Care Waiting Times at Type 2 Emergency Care Departments (July 2010 - September 2011)⁵

Month	Percentage Waiting 4 hours and Under	Number Waiting Over 12 hours	Total Attendances (New and Unplanned Review)
July 2010	93.7%	12	4,663
August 2010	94.2%	0	4,853
September 2010	90.7%	31	4,507
October 2010	90.6%	8	4,569
November 2010	90.1%	52	4,283
December 2010	86.5%	38	4,022
January 2011	84.6%	55	4,342
February 2011	78.9%	142	3,950
March 2011	84.5%	77	4,785
April 2011	91.0%	14	4,814
May 2011	87.2%	36	4,694
June 2011	89.5%	53	4,465
July 2011	90.5%	2	4,356
August 2011	91.9%	14	3,828
September 2011	94.2%	0	3,748

⁵ Note the provision of emergency care services at both the Downe and Lagan Valley hospitals have changed during the last 6 months. See Appendix 2, Notes 14 & 15 for information on recent changes to opening hours.

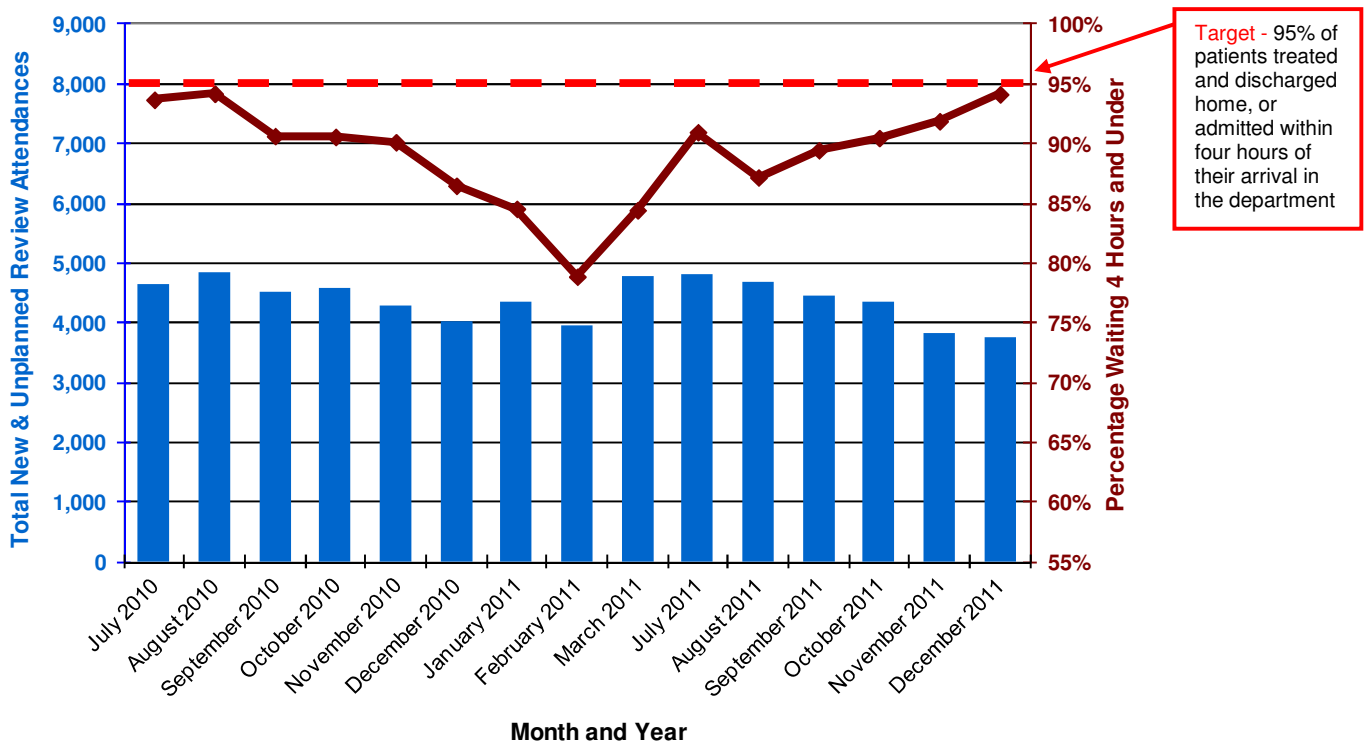
Position during last fifteen months (July 2010 - September 2011)

Over the last 15 months, performance against the 4 hour component of the target for Type 2 emergency care departments ranged from 78.9% in February 2011 to 94.2% in both August 2010 and September 2011 (Figure 7, Table 6).

During this period, performance against the 12 hour component in Type 2 departments varied markedly from 0 in both August 2010 and September 2011 to 142 in February 2011 (Figure 8, Table 6).

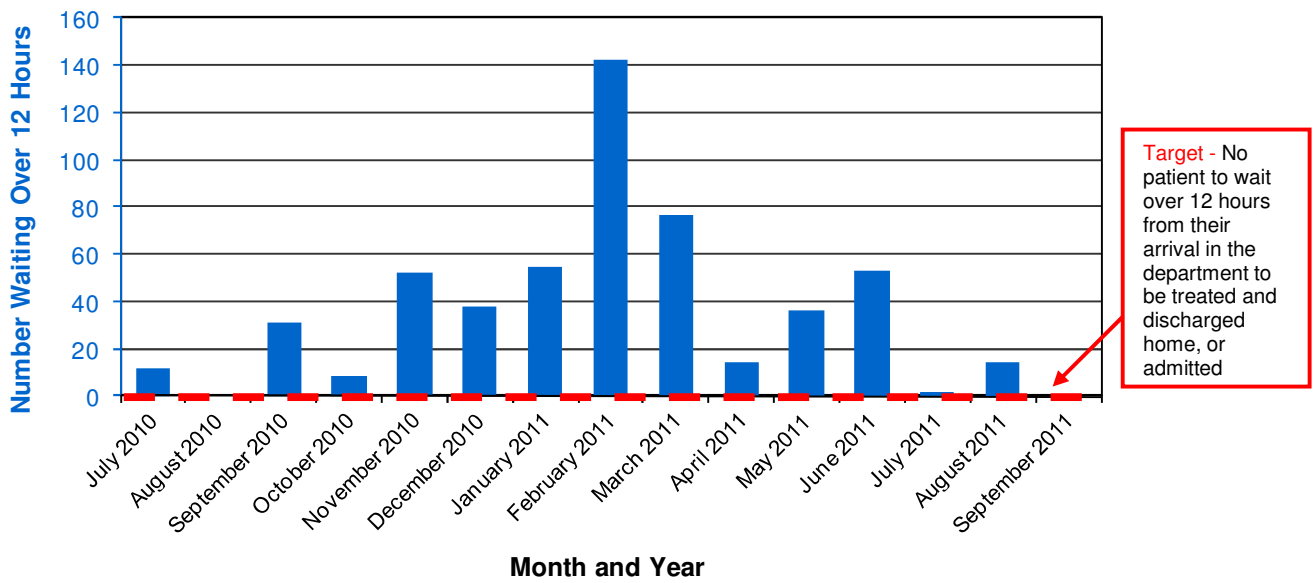
Since July 2010, monthly attendances at Type 2 departments ranged from 3,748 in September 2011 to 4,853 in August 2010; although, this is most likely due to the reduction in opening hours at both the Downe and Lagan Valley emergency care departments in April 2011 and August 2011 respectively⁶ (Figures 7 and 8, Table 6).

Figure 7: Performance against the 4 Hour Ministerial Target for Emergency Care Waiting Times at Type 2 Emergency Care Departments (July 2010 - September 2011)



⁶ See Appendix 2, Notes 14 & 15.

Figure 8: Performance against the 12 Hour Ministerial Target for Emergency Care Waiting Times at Type 1 Emergency Care Departments (July 2010 - September 2011)



Performance at Type 3 Emergency Care Departments

Table 7: Performance against the Ministerial Target for Emergency Care Waiting Times at Type 3 Emergency Care Departments (July 2010 - September 2011)

Type 3 Emergency Care Department	Percentage Waiting 4 hours and under			Number Waiting Over 12 hours			Total Attendances (New and Unplanned Review)		
	Jul 2011	Aug 2011	Sep 2011	Jul 2011	Aug 2011	Sep 2011	Jul 2011	Aug 2011	Sep 2011
Whiteabbey	100.0%	100.0%	100.0%	0	0	0	685	727	766
Mid Ulster	100.0%	100.0%	100.0%	0	0	0	486	556	558
Tyrone County	99.9%	100.0%	100.0%	0	0	0	1,380	1,316	1,221
South Tyrone	100.0%	100.0%	100.0%	0	0	0	1,628	1,689	1,559
Armagh/Mullinure	100.0%	100.0%	100.0%	0	0	0	655	698	669
Ards	100.0%	100.0%	100.0%	0	0	0	754	920	821
Bangor	100.0%	100.0%	100.0%	0	0	0	1,014	1,092	1,067
Total	100.0%	100.0%	100.0%	0	0	0	6,602	6,998	6,661

Latest position (September 2011)

During September 2011, the 4 hour component of the Ministerial target for emergency care waiting times was achieved in all Type 3 departments, with 100.0% of patients either treated and discharged home, or admitted within 4 hours (Table 7).

Performance against the 12 hour component of the Ministerial target was achieved by all Type 3 departments in September 2011 (Table 7).

There were a total of 6,661 attendances at Type 3 emergency care departments in September 2011, ranging from 558 in Mid Ulster to 1,559 in the South Tyrone (Table 7).

Position during last three months (July - September 2011)

During each of the last 3 months, performance against both the 4 hour and 12 hour components of the Ministerial target was achieved by all Type 3 departments (Table 7).

Since July 2011, attendances at Type 3 emergency care departments increased by 0.9% (59), from 6,602 to 6,661 in September 2011; although, since August 2011 the number of attendances decreased by 4.8% (337) from 6,998 to 6,661 in September 2011 (Figure 9, Table 7).

Table 8: Performance against the Ministerial Target for Emergency Care Waiting Times at Type 3 Emergency Care Departments (July 2010 - September 2011)⁷

Month	Percentage Waiting 4 hours and Under	Number Waiting Over 12 hours	Total Attendances (New and Unplanned Review)
July 2010	99.9%	0	6,176
August 2010	100.0%	0	6,641
September 2010	100.0%	0	6,635
October 2010	100.0%	0	6,039
November 2010	100.0%	0	5,638
December 2010	100.0%	0	5,111
January 2011	100.0%	0	5,584
February 2011	100.0%	0	5,420
March 2011	100.0%	0	6,896
April 2011	100.0%	0	6,831
May 2011	100.0%	0	6,872
June 2011	99.9%	0	7,092
July 2011	100.0%	0	6,602
August 2011	100.0%	0	6,998
September 2011	100.0%	0	6,661

Position during last fifteen months (July 2010 - September 2011)

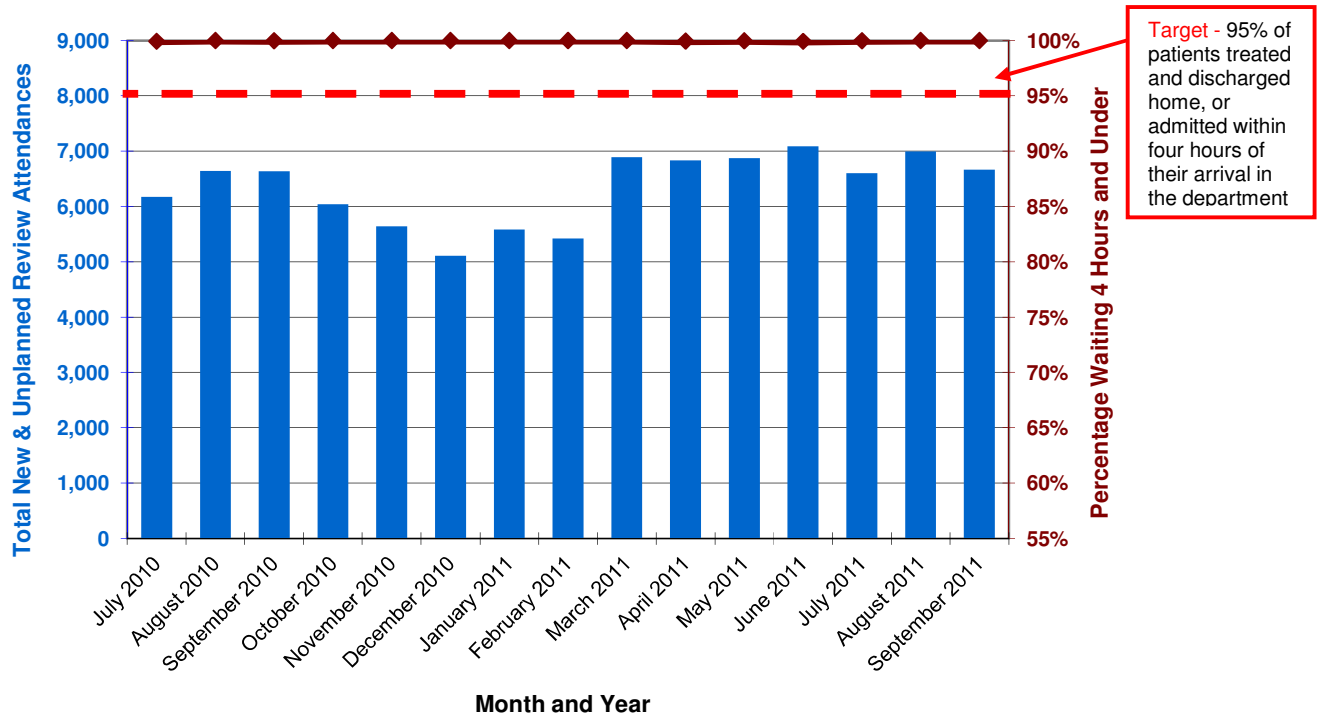
Over the last 15 months, performance against the 4 hour component of the target for Type 3 emergency care departments remained similar at 100.0% (Figure 9, Table 8).

During this period, no patient waited longer than 12 hours to be either treated and discharged home, or admitted in Type 3 departments (Table 8).

Since July 2010, monthly attendances at Type 3 emergency care departments was lowest in December 2010 (5,111) and highest in June 2011 (7,092) (Figure 9, Table 8).

⁷ See Appendix 2, Note 11 for information on amendments to historical figures.

Figure 9: Performance against the 4 Hour Ministerial Target for Emergency Care Waiting Times at Type 3 Emergency Care Departments (July 2010 - September 2011)



Performance at All Emergency Care Departments

Table 9: Performance against the Ministerial Target for Emergency Care Waiting Times at all Emergency Care Departments (July 2010 - September 2011)⁸

Month	Percentage Waiting 4 hours and Under	Number Waiting Over 12 hours	Total Attendances (New and Unplanned Review)
July 2010	86.1%	126	58,358
August 2010	84.7%	147	60,279
September 2010	83.1%	320	58,097
October 2010	82.3%	384	58,000
November 2010	82.3%	774	53,973
December 2010	77.8%	702	54,604
January 2011	77.5%	1,236	56,476
February 2011	76.4%	1,338	52,921
March 2011	82.0%	850	61,128
April 2011	83.6%	577	61,884
May 2011	82.2%	921	61,344
June 2011	82.5%	970	60,039
July 2011	83.5%	344	58,704
August 2011	82.5%	461	58,922
September 2011	81.1%	538	57,340

Latest position (September 2011)

During September 2011, there were a total of 57,340 attendances at emergency care departments in Northern Ireland, 81.1% of which were treated and discharged or admitted within 4 hours of their arrival, whilst 538 (0.9%) had waited longer than 12 hours (Figures 10 and 11, Table 9).

Position during last three months (July - September 2011)

During the last 3 months, the percentage of patients treated and discharged or admitted within 4 hours of their arrival decreased by 2.4 percentage points, from 83.5% in July 2011 to 81.1% in September 2011.

During this time, the number of patients waiting longer than 12 hours increased by 56.4% (194), from 344 in July 2011 to 538 in September 2011 (Figures 10 and 11, Table 9).

Since July 2011, the number of attendances at emergency care departments decreased by 3.9% (1,364), from 58,704 to 57,340 in September 2011 (Figure 10, Table 9).

⁸ See Appendix 2, Note 11 for information on amendments to historical figures.

Position during last fifteen months (July 2010 - September 2011)

Between July 2010 and September 2011, the percentage of patients treated and discharged or admitted within 4 hours of their arrival at emergency care ranged from 76.4% in February 2011 to 86.1% in July 2010. However, since February 2011, the percentage of patients treated and discharged, or admitted within 4 hours increased by over four percentage points, from 76.4% to 81.1% in September 2011 (Figure 10, Table 9).

Since July 2010, the number of patients waiting over 12 hours at emergency care increased markedly from 126 to 538 in September 2011 (Figure 11, Table 9).

Attendances at emergency care departments decreased by 1.7% (1,018) between July 2010 (58,358) and September 2011 (57,340) (Figure 10, Table 9).

Between July 2010 and September 2011, the lowest number of attendances at emergency care departments was reported during February 2011 (52,291). However, despite reporting the lowest number of attendances February 2011 reported the lowest percentage of patients waiting 4 hours and under (76.4%) and the highest number of patients waiting over 12 hours (1,338) (Figures 10 & 11, Table 9).

Figure 10: Performance against the 4 Hour Ministerial Target for Emergency Care Waiting Times at all Emergency Care Departments (July 2010 - September 2011)

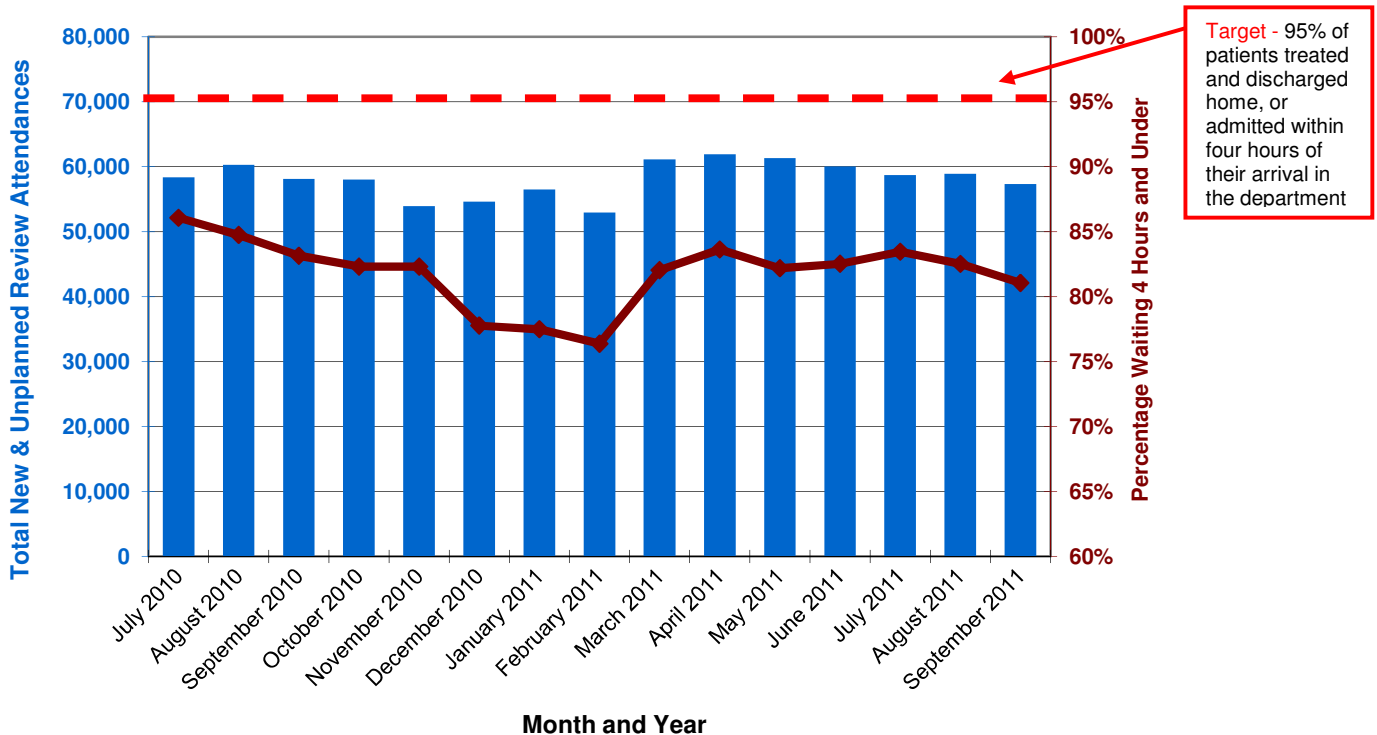
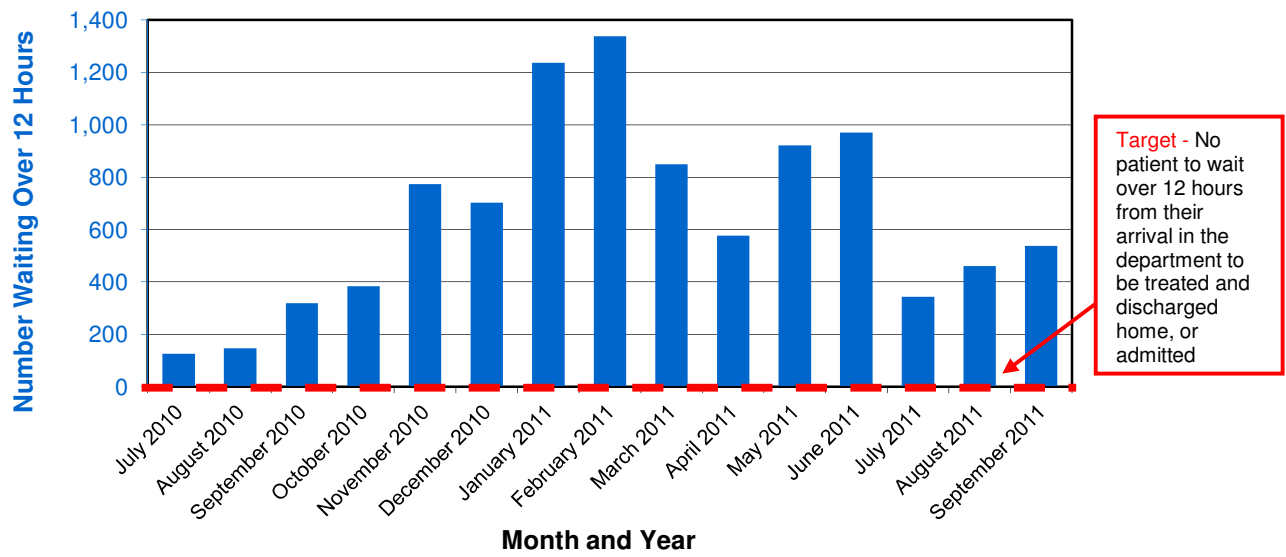


Figure 11: Performance against the 12 Hour Ministerial Target for Emergency Care Waiting Times at all Emergency Care Departments (July 2010 - September 2011)



Appendices

Appendix 1: Additional Tables

Table 1A: Percentage of Patients Waiting 4 Hours and Under, by Emergency Care Department (July - September 2011)

Emergency Care Department ⁹	Percentage of Patients Waiting 4 hours and Under		
	July 2011	August 2011	September 2011
Belfast City (Type 1)	82.2%	82.8%	79.7%
Mater (Type 1)	80.5%	83.6%	66.5%
Royal Victoria (Type 1)	78.8%	75.9%	72.7%
RBHSC (Type 1)	92.9%	89.7%	88.9%
Belfast HSC Trust			
Antrim Area (Type 1)	71.9%	73.5%	72.7%
Whiteabbey (Type 3)	100.0%	100.0%	100.0%
Mid Ulster (Type 3)	100.0%	100.0%	100.0%
Causeway (Type 1)	80.9%	79.7%	78.7%
Northern HSC Trust			
Ulster (Type 1)	77.1%	74.0%	75.1%
Ards (Type 3)	100.0%	100.0%	100.0%
Bangor (Type 3)	100.0%	100.0%	100.0%
Lagan Valley (Type 2)	92.1%	95.5%	94.6%
Downe (Type 2)	88.1%	87.9%	93.6%
South Eastern HSC Trust			
Craigavon Area (Type 1)	79.2%	74.6%	74.5%
Daisyhill (Type 1)	94.2%	94.4%	97.6%
South Tyrone (Type 3)	100.0%	100.0%	100.0%
Armagh/Mullinure (Type 3)	100.0%	100.0%	100.0%
Southern HSC Trust			
Altnagelvin (Type 1)	74.1%	72.5%	74.2%
Erne (Type 1)	97.3%	95.9%	95.2%
Tyrone County (Type 3)	99.9%	100.0%	100.0%
Western HSC Trust			

⁹ Emergency Care Department Type is indicated within the brackets following each emergency care department name. Note that this is based on the current classification of the department (See Appendix 2, Notes 10 and 13 for reclassifications).

**Table 1B: Number of Patients Waiting Over 12 Hours, by Emergency Care Department
(July - September 2011)**

Emergency Care Department	Number of Patients Waiting Over 12 Hours		
	July 2011	August 2011	September 2011
Belfast City (Type 1)	1	1	27
Mater (Type 1)	15	7	43
Royal Victoria (Type 1)	25	26	95
RBHSC (Type 1)	0	0	0
Belfast HSC Trust			
Antrim Area (Type 1)	94	108	97
Whiteabbey (Type 3)	0	0	0
Mid Ulster (Type 3)	0	0	0
Causeway (Type 1)	46	39	83
Northern HSC Trust			
Ulster (Type 1)	160	264	193
Ards (Type 3)	0	0	0
Bangor (Type 3)	0	0	0
Lagan Valley (Type 2)	1	2	0
Downe (Type 2)	1	12	0
South Eastern HSC Trust			
Craigavon Area (Type 1)	0	0	0
Daisyhill (Type 1)	0	0	0
South Tyrone (Type 3)	0	0	0
Armagh/Mullinure (Type 3)	0	0	0
Southern HSC Trust			
Altnagelvin (Type 1)	1	2	0
Erne (Type 1)	0	0	0
Tyrone County (Type 3)	0	0	0
Western HSC Trust			

Table 1C: Total New and Unplanned Review Emergency Care Attendances, by Emergency Care Department (July - September 2011)

Emergency Care Department	Total Attendances (New and Unplanned Review)		
	July 2011	August 2011	September 2011
Belfast City (Type 1)	3,484	3,487	3,381
Mater (Type 1)	3,381	3,363	3,592
Royal Victoria (Type 1)	5,921	6,289	6,448
RBHSC (Type 1)	2,212	2,291	2,535
Belfast HSC Trust			
Antrim Area (Type 1)	6,063	6,059	5,972
Whiteabbey (Type 3)	685	727	766
Mid Ulster (Type 3)	486	556	558
Causeway (Type 1)	4,045	3,984	3,426
Northern HSC Trust			
Ulster (Type 1)	6,321	6,256	6,480
Ards (Type 3)	754	920	821
Bangor (Type 3)	1,014	1,092	1,067
Lagan Valley (Type 2)	2,616	1,998	2,066
Downe (Type 2)	1,740	1,830	1,682
South Eastern HSC Trust			
Craigavon Area (Type 1)	5,812	5,939	5,841
Daisyhill (Type 1)	3,395	3,433	2,993
South Tyrone (Type 3)	1,628	1,689	1,559
Armagh/Mullinure (Type 3)	655	698	669
Southern HSC Trust			
Altnagelvin (Type 1)	4,633	4,530	4,158
Erne (Type 1)	2,479	2,465	2,105
Tyrone County (Type 3)	1,380	1,316	1,221
Western HSC Trust			

Appendix 2: Definitions & Background Notes

1. Information on waiting times at emergency care departments in Northern Ireland is collected monthly using the Emergency Care information return (EC1). The EC1 return records all new and unplanned review attendances in each emergency care department in Northern Ireland.
2. The EC1 information return was set up as an interim measure to monitor waiting times at emergency care departments until such time as a functional patient level dataset becomes available.
3. The EC1 information return was introduced in April 2007 to measure a new Priorities for Action (Ministerial) target, stating that: *'From April 2007, no patient should wait longer than 12 hours in A&E and, by March 2008, 95% of patients who attend A&E should be either treated and discharged home, or admitted within four hours of their arrival in the department'*.

The current Ministerial target on emergency care waiting times for 2011/12 states that *'95% of patients attending Types 1, 2 or 3 A&E departments are either treated and discharged home, or admitted, within four hours of their arrival in the department, and; no patient attending any A&E department should wait longer than 12 hours either to be treated and discharged home, or admitted.'*

4. The information contained in this publication is not currently governed by National Statistics.
5. The figures detailed in this statistical release represent the total time spent in an emergency care department from arrival until admission, transfer or discharge. All 'New Attendances' and all 'Unplanned Re-Attendances' at emergency care departments with a departure time, per calendar month are included. They do not include planned review attendances.
6. Time is measured from when a patient arrives at the emergency care department (time of arrival is recorded at registration or triage whichever is earlier (clock starts)) until the patient departs from the emergency care department (time of departure is defined as when the patient's clinical care episode is completed within the emergency care department (clock stops)).
7. The figures in this release relate to all patients, including paediatric patients.

8. In accordance with the Review of Public Administration, with effect from the 1st April 2007, five new integrated Health and Social Care Trusts (Belfast, Northern, South Eastern, Southern and Western) replaced the previous eighteen provider Trusts in Northern Ireland. Where appropriate figures have been presented based on the new Trust Areas.
9. There are three separate categories of emergency care facility included in this publication:

Type 1 Emergency Care Department - A consultant-led service with designated accommodation for the reception of emergency care patients, providing both emergency medicine and emergency surgical services on a round the clock basis.

Type 2 Emergency Care Department - A consultant-led service with designated accommodation for the reception of emergency care patients, but which does not provide both emergency medicine and emergency surgical services and/or has time-limited opening hours.

Type 3 Emergency Care Department - A minor injury unit with designated accommodation for the reception of patients with a minor injury and/or illness. It may be doctor or nurse-led. A defining characteristic of this service is that it treats at least minor injuries and/or illnesses and can be routinely accessed without appointment.

Categorisation of Emergency Care Departments

HSC Trust	Emergency Care Department		
	Type 1	Type 2	Type 3
Belfast	Belfast City		
	Mater		
	Royal Victoria		
	RBHSC		
Northern	Antrim Area		Whiteabbey ¹⁰
	Causeway		Mid Ulster ¹¹
South Eastern	Ulster	Lagan Valley ¹⁰	Ards
		Downe ¹¹	Bangor
Southern	Craigavon Area		South Tyrone
	Daisyhill		Armagh/Mullinure
Western	Altnagelvin		Tyrone County ¹¹
	Erne		

¹⁰ See Notes 10 and 13 for reclassifications

¹¹ See Notes 14 & 15 for changes to operating hours

10. From 2nd March 2009, Tyrone County emergency care department was reconfigured from a consultant-led treatment service (Type 2 - emergency care department) to a minor injury unit with designated accommodation for the reception of patients with minor injuries and/or illnesses (Type 3 - emergency care department). This should be taken into consideration when drawing historic comparisons between Type 2 and Type 3 emergency care departments.
11. Some historical figures may have been updated to reflect returns re-submitted by HSC Trusts as part of end of year validations.
12. Figures included within this document are accurate as at 25th September 2011, any changes to these figures will be reflected in subsequent issues of this publication.
13. From 24th May 2010, Mid-Ulster and Whiteabbey emergency care departments were reconfigured from consultant-led treatment services (Type 2 - emergency care departments) to minor injury units with designated accommodation for the reception of patients with minor injuries and/or illnesses (Type 3 - emergency care departments). On this basis, figures presented in this bulletin for Type 2 emergency care departments are inclusive of all Type 2 emergency care departments and all activity within Mid-Ulster and Whiteabbey emergency care departments between 1st May and 23rd May 2010. Similarly, figures presented for Type 3 emergency care departments are inclusive of all Type 3 emergency care departments and all activity within Mid-Ulster and Whiteabbey emergency care departments between May 24th and May 31st 2010. This should be taken into consideration when drawing historic comparisons between Type 2 and Type 3 emergency care departments.
14. On 4th April 2011, the South Eastern HSC Trust introduced new arrangements for the provision of emergency care services at the Downe Hospital resulting in the reduction of consultant-led emergency care services, from a 24 hours based service to 8am to 10pm daily, with services provided from 10pm to 8am by an enhanced GP Out of Hours (GPOOH) service. The GPOOH's provides the urgent care response supported by an appropriate handover period and the appropriate services within the hospital. After 10pm all 999 ambulances go directly to the Ulster or nearest appropriate emergency care department.

15. On 1st August 2011, the South Eastern HSC Trust introduced new temporary arrangements for the provision of emergency care services at the Lagan Valley hospital resulting in the closure of the emergency care department from 8pm to 9am daily. This is a temporary change due to a shortage of medical staff but the change is expected to be in place for a number of months.
16. Since the introduction of the emergency care waiting time statistics series in April 2008 information on waiting times at emergency care departments in Northern Ireland has been published on a monthly basis. From 1st April 2011 information on emergency care waiting times is published on a quarterly basis. It should be noted that the new quarterly publication includes similar details to the previous monthly publication, including an analysis of each month within the quarter.
17. The Ministerial target, for emergency care waiting times, as detailed in the schedule which is an addendum to the requirement set out in the body of the Department of Health, Social Services and Public Safety Commissioning Plan direction itself states *“that from April 2011, 95% of patients attending any Types 1, 2 or 3 A&E departments are either treated and discharged home, or admitted within four hours of their arrival in the department”, and “no patient attending and A&E department should wait longer than 12 hours either to be treated and discharged home, or admitted”*.

Appendix 3: Additional Information

Further information on Emergency Care Waiting Time Statistics, is available from:

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This Statistical bulletin and others published by Hospital Information Branch are available to download from the DHSSPS Internet site at:

Internet address: http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats.htm