

INFORMATION  
ANALYSIS  
DIRECTORATE



# Emergency Care Waiting Time Statistics (April – June 2014)



Department of  
**Health, Social Services  
and Public Safety**

[www.dhsspsni.gov.uk](http://www.dhsspsni.gov.uk)

## Reader Information

Purpose	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.
Authors	Paul Stevenson, Kieran Taggart, Amanda Lennon.
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Issued by	Hospital Information Branch Information & Analysis Directorate Department of Health, Social Services & Public Safety Stormont Estate Belfast, BT4 3SQ
Statistician	Paul Stevenson (028) 90 522504
Email	<a href="mailto:paul.stevenson@dhsspsni.gov.uk">paul.stevenson@dhsspsni.gov.uk</a>
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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## Key Points

### Latest Position (June 2014):

- During June 2014, 75.1% of patients attending Type 1 emergency care departments were either treated and discharged home, or admitted within 4 hours, compared with 87.4% attending Type 2 departments and 99.9% attending Type 3 departments (Table 2).
- In June 2014, 294 (0.5%) out of a total 62,193 attendances at emergency care departments in Northern Ireland waited longer than 12 hours to be either treated and discharged home, or admitted (Table 2).

### Position during last 3 months (April - June 2014):

Between April and June 2014:

- The percentage of patients attending Type 1 emergency care departments that were either treated and discharged home or admitted within 4 hours increased, from 72.6% to 75.1% (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 slightly, from 87.2% to 87.4% (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 (53), from 241 to 294. In particular, performance declined notably at the Royal Victoria Hospital, from 67 to 190 during this period (Table 2 & Table 3).

### Position compared to same month last year (June 2013 – June 2014):

Between June 2013 and June 2014:

- In Type 1 emergency care departments, the percentage of patients treated and discharged home or admitted within 4 hours decreased by 2.7 percentage points, from 77.8% to 75.1% (Figure 4, Table 4).
- In Type 2 emergency care departments, the percentage of patients treated and discharged home or admitted within 4 hours decreased by 3.2 percentage points, from 90.6% to 87.4% (Figure 7, Table 6).
- In Type 3 emergency care departments, the percentage of patients treated and discharged home or admitted within 4 hours remained at 100.0% (Table 8).
- The number of patients that waited longer than 12 hours to be either treated and discharged home, or admitted, increased (50, 20.5%) from 244 to 294, with performance declining markedly at the Royal Victoria Hospital, from 1 to 190 (Table 9).

## 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 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/hospital-stats.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats.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 April, May and June 2014.

### 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.

Data providers are supplied with technical guidance documents outlining the methodologies that should be used in the collection, reporting and validation of each of these data returns. These documents can be accessed at the following link:

[http://www.dhsspsni.gov.uk/index/stats\\_research/hospital-stats/hib\\_guidance\\_manuals.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats/hib_guidance_manuals.htm)

It should be noted that since 1<sup>st</sup> July 2011, Hospital Information Branch has been downloading patient level data on emergency care waiting times from the Regional Data Warehouse on the 8<sup>th</sup> 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 8<sup>th</sup> 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

All information presented in this bulletin has been provided by HSC Trusts and Hospital Information Branch staff, and has been validated and quality assured by Hospital Information Branch (HIB) prior to release.

For each information collection, HSC Trusts are given a set period of time to submit the information. Following submission, HIB perform a series of validation checks to verify that information downloaded / submitted is consistent both within and across returns.

At the end of the financial year HIB carry out a more detailed series of validations to verify that the information is consistent. Trend analyses are used to monitor annual variations and emerging trends. 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/hospital-stats/emergency\\_care-3/emergency-care-stats.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats/emergency_care-3/emergency-care-stats.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.

Further information on the uses of the data contained in this publication is detailed in Appendix 3.

## A National Statistics Publication

The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics.

Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and readily accessible;
- are produced according to sound methods; and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed.

Further information on the Code of Practice for National Statistics is available at:

<http://www.statisticsauthority.gov.uk/assessment/code-of-practice/>.

A list of those who received 24-hour pre-release access to this publication is available at:

[http://www.dhsspsni.gov.uk/index/stats\\_research/hospital-stats/emergency\\_care-3/emergency\\_care-monthly\\_waiting\\_times.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats/emergency_care-3/emergency_care-monthly_waiting_times.htm)

## 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 be measured in a comparable manner to those in Northern Ireland due to different counting rules. Details of the emergency care waiting times published elsewhere in the UK can be found as detailed below.

### England

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

### Scotland

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

### Wales

<http://www.infoandstats.wales.nhs.uk/page.cfm?orgid=869&pid=62956>

## Contextual Information

Readers should be aware that contextual information about Northern Ireland and the health services provided is available to read while using statistics from this publication.

This includes information on the current and future population, structures within the Health and Social Care system, the vision for the future health services as well as targets and indicators. This information is available at the following link:

[http://www.dhsspsni.gov.uk/index/stats\\_research/hospital-stats/contextual\\_information\\_hospital\\_statistics.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats/contextual_information_hospital_statistics.htm)

## Contact Information

As we want to engage with users of our statistics, we invite you to feedback your comments on this publication to:

**Paul Stevenson**

**Email:** [Paul.Stevenson@dhsspsni.gov.uk](mailto:Paul.Stevenson@dhsspsni.gov.uk)

**Tel:** (028) 90 522504

## 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 2014/15:

**‘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 2014)**

Target Component		Target Achieved?		
		Apr 2014	May 2014	Jun 2014
Type 1	95% attendances within 4 hours	No	No	No
	No attendance longer than 12 hours	No	No	No
Type 2	95% attendances within 4 hours	No	No	No
	No attendance longer than 12 hours	No	No	Yes
Type 3	95% attendances within 4 hours	Yes	Yes	Yes
	No attendance longer than 12 hours	Yes	Yes	Yes

The Ministerial target for emergency care waiting times has **not been achieved** during any of the last 3 months (April - June 2014) as one or more components of the target were not met.

However, it should be noted that the 4 hour and 12 hour component **was achieved** at all Type 3 emergency care departments in each month since April 2014.

**Table 2: Performance against each Component of the Ministerial Target for Emergency Care Waiting Times (April - June 2014)**

Emergency Care Department Type <sup>1</sup>	Percentage Waiting 4 Hours and Under			Number Waiting Over 12 Hours			Total Attendances (New and Unplanned Review)		
	Apr 2014	May 2014	Jun 2014	Apr 2014	May 2014	Jun 2014	Apr 2014	May 2014	Jun 2014
Type 1	72.6%	73.1%	75.1%	240	203	294	49,499	50,673	50,599
Type 2	87.2%	87.5%	87.4%	1	1	0	3,400	3,403	3,418
Type 3	100.0%	100.0%	99.9%	0	0	0	7,243	7,296	8,176
<b>All Departments</b>	<b>76.7%</b>	<b>77.1%</b>	<b>79.0%</b>	<b>241</b>	<b>204</b>	<b>294</b>	<b>60,142</b>	<b>61,372</b>	<b>62,193</b>

### Latest position (June 2014)

During June 2014, 75.1% of attendances at Type 1 emergency care departments were treated and discharged, or admitted within 4 hours of their arrival, compared with 87.4% at Type 2 departments, and 99.9% at Type 3 departments (Figure 1, Table 2).

In June 2014, 294 (0.5%) out of a total 62,193 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, Table 2).

There were a total of 62,193 attendances at emergency care departments in Northern Ireland during June 2014, of which, 50,599 (81.4%) attended Type 1 emergency care departments, 3,418 (5.5%) attended Type 2 departments and 8,176 (13.1%) attended Type 3 departments (Table 2).

### Position during last three months (April - June 2014)

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 increased by 2.5 percentage points, from 72.6% in April 2014 to 75.1% in June 2014 (Figure 1, Table 2).

Since April 2014, the percentage of attendances at Type 2 emergency care departments treated and discharged, or admitted within 4 hours of their arrival increased slightly by 0.2 percentage points, from 87.2% to 87.4% in June 2014 (Figure 1, Table 2).

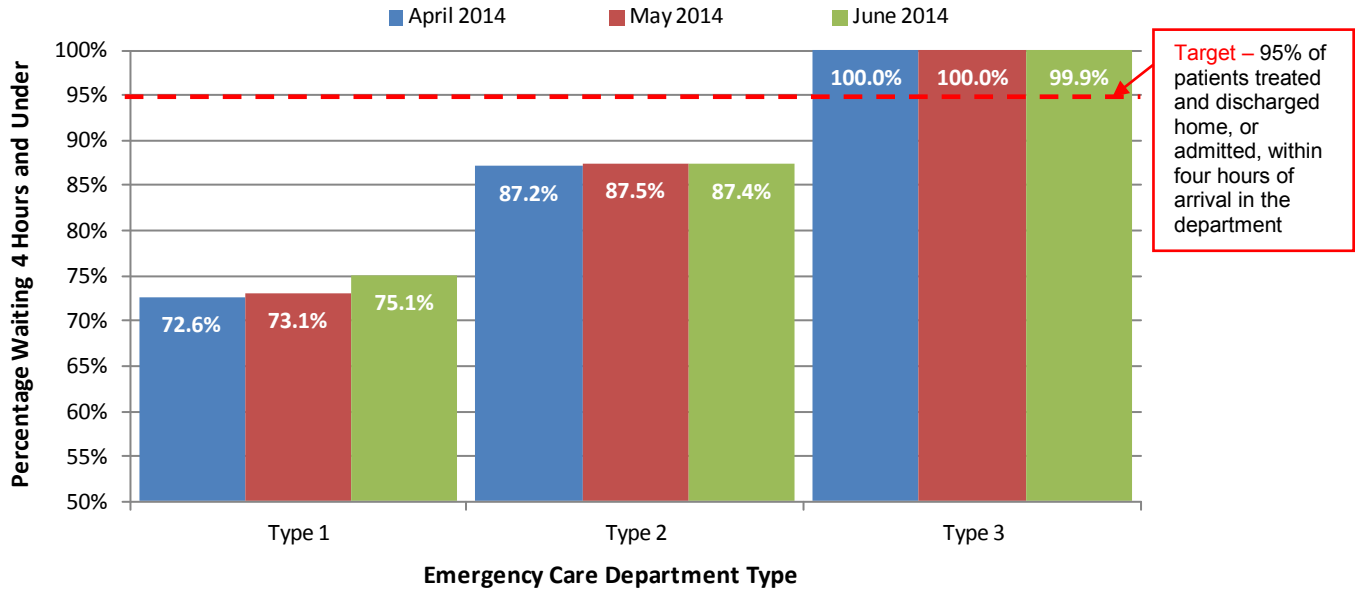
Between April and June 2014, the percentage of attendances at Type 3 emergency care departments that were treated and discharged or admitted within 4 hours of their arrival remained at 100.0% (Figure 1, Table 2).

Between April and June 2014, monthly attendances at all emergency care departments increased by 2,051 (3.4%), from 60,142 to 62,193 (Table 2).

<sup>1</sup> See Appendix 2, Note 9 for list of Department Types & Notes 10, 11 & 19 for reclassifications.

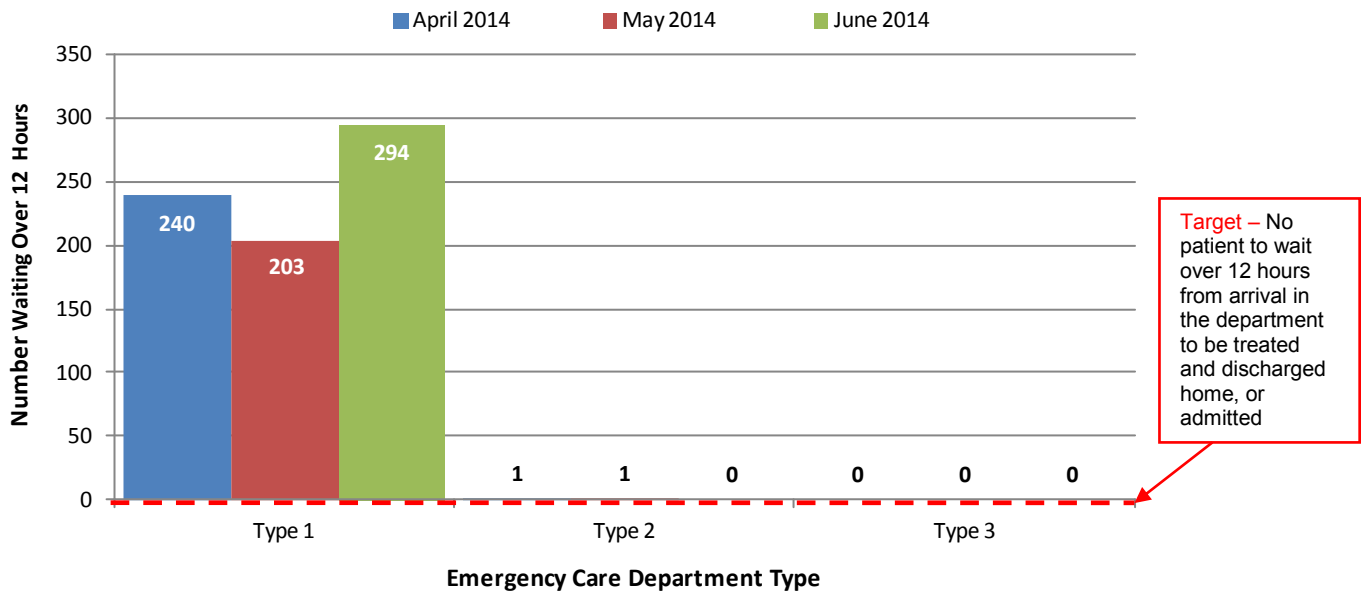


**Figure 1: Percentage of Patients Waiting 4 Hours and Under in Emergency Care, by Department Type (April - June 2014)**



Since April 2014, the number of patients waiting longer than 12 hours to be either treated and discharged home, or admitted increased (53) from 241 to 294 in June 2014, with all but one of these patients attending a Type 1 department (Figure 2, Table 2).

**Figure 2: Number of Patients Waiting Over 12 Hours in Emergency Care, by Department Type (April - June 2014)**



## 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 (April - June 2014)**

Type 1 Emergency Care Departments	Percentage Waiting 4 Hours and Under			Number Waiting Over 12 Hours			Total Attendances (New and Unplanned Review)		
	Apr 2014	May 2014	Jun 2014	Apr 2014	May 2014	Jun 2014	Apr 2014	May 2014	Jun 2014
Altnagelvin Area	72.9%	69.8%	81.7%	0	0	0	4,628	4,771	4,691
South West Acute	89.7%	89.7%	91.5%	0	0	0	2,649	2,663	2,586
Antrim Area	60.6%	59.6%	65.7%	122	118	63	6,454	6,625	6,543
Causeway	78.9%	76.5%	78.5%	0	0	0	3,695	3,850	3,667
Craigavon Area	70.0%	76.7%	72.6%	0	0	1	6,554	6,503	6,666
Daisy Hill	75.1%	86.4%	83.1%	1	0	0	3,907	3,840	3,971
Royal Victoria	68.6%	65.1%	63.7%	67	75	190	8,015	8,464	8,428
Mater	70.8%	74.6%	78.0%	11	9	34	3,664	3,784	3,931
RBHSC	87.4%	86.7%	88.5%	1	0	0	2,919	2,966	2,952
Ulster	74.1%	72.4%	76.0%	38	1	6	7,014	7,207	7,164
<b>Total</b>	<b>72.6%</b>	<b>73.1%</b>	<b>75.1%</b>	<b>240</b>	<b>203</b>	<b>294</b>	<b>49,499</b>	<b>50,673</b>	<b>50,599</b>

### Latest position (June 2014)

In June 2014, no Type 1 emergency care department achieved the 4 hour component of the Ministerial target, whilst Altnagelvin Area, South West Acute, Causeway, Daisy Hill and RBHSC achieved the 12 hour component of the target (Table 3).

During June 2014, performance against the 4 hour component of the Ministerial target for emergency care waiting times in Type 1 departments ranged from 63.7% in the Royal Victoria to 91.5% in South West Acute (Figure 3, Table 3).

In June 2014, almost two thirds (64.6%, 190) of patients waiting longer than 12 hours had attended the Royal Victoria emergency care department (Table 3).

There were 50,599 attendances at Type 1 emergency care departments during June 2014, ranging from 8,428 in the Royal Victoria to 2,586 in South West Acute (Table 3).

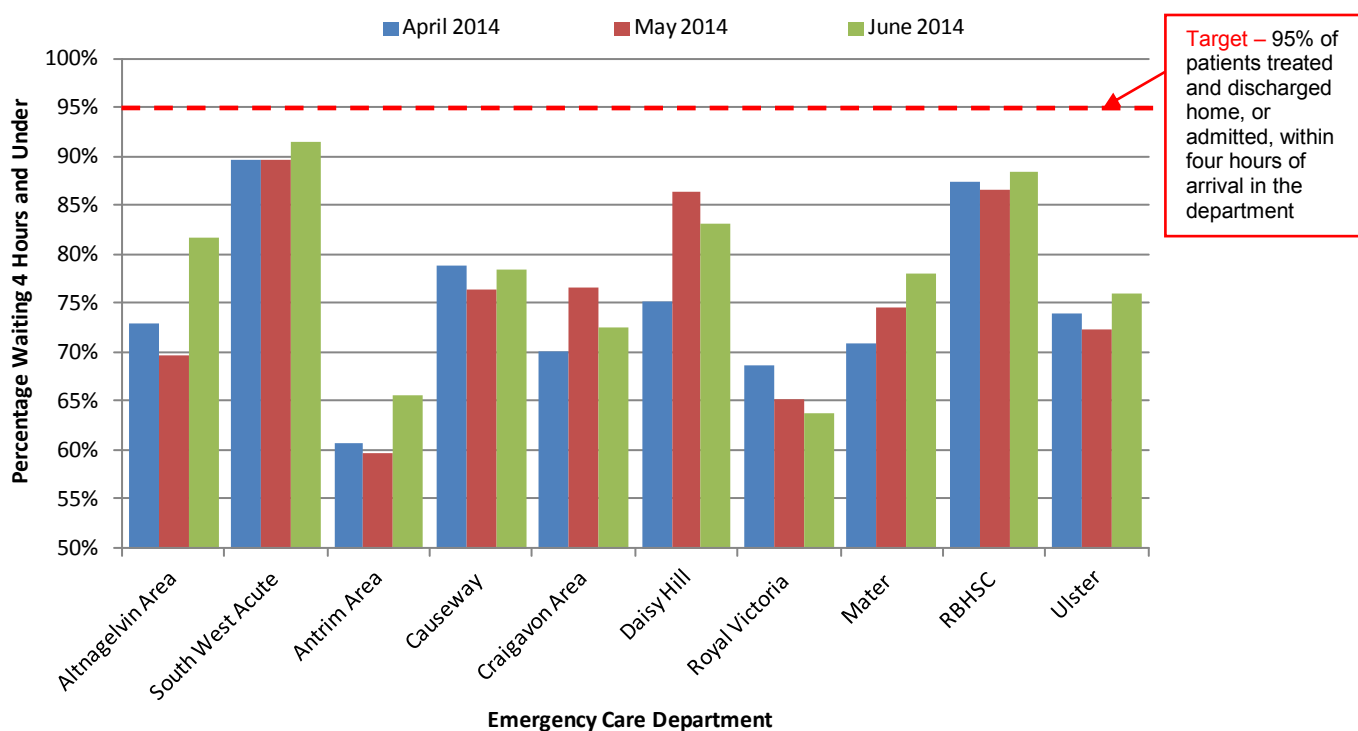
### Position during last three months (April – June 2014)

Over the last 3 months, performance against the 4 hour component of the target improved in all Type 1 emergency care departments, with exception of the Royal Victoria and Causeway emergency care departments. The largest increase in performance against the 4 hour component was reported by Altnagelvin Area (72.9% in April 2014 to 81.7% in June 2014), whilst the Royal Victoria reported the largest decrease in performance (68.6% in April 2014 to 63.7% in June 2014) (Figure 3, Table 3).

During this period, performance against the 12 hour component improved or remained similar in all Type 1 departments, with the exception of the Royal Victoria which declined from 67 in April 2014 to 190 in June 2014) (Table 3).

During the last 3 months, attendances increased in all Type 1 emergency care departments, with exception of Causeway and South West Acute emergency care departments. The largest increase in monthly attendances was reported by the Royal Victoria emergency care department (8,015 in April 2014 to 8,428 in June 2014) (Table 3).

**Figure 3: Performance against the 4 Hour Ministerial Target for Emergency Care Waiting Times at Type 1 Emergency Care Departments (April - June 2014)**



**Table 4: Performance against the Ministerial Target for Emergency Care Waiting Times at Type 1 Emergency Care Departments (April 2013 - June 2014)<sup>2</sup>**

Month	Percentage Waiting 4 Hours and Under	Number Waiting Over 12 Hours	Total Attendances (New and Unplanned Review)
April 2013	67.2%	936	48,099
May 2013	76.4%	265	48,229
June 2013	77.8%	234	46,891
July 2013	76.1%	190	50,217
August 2013	76.0%	141	48,284
September 2013	76.4%	72	46,769
October 2013	77.5%	76	47,876
November 2013	76.8%	69	44,912
December 2013	72.5%	163	45,842
January 2014	71.8%	156	46,356
February 2014	70.9%	267	43,142
March 2014	70.5%	408	50,022
April 2014	72.6%	240	49,499
May 2014	73.1%	203	50,673
June 2014	75.1%	294	50,599

**Position during last fifteen months (April 2013 – June 2014)**

When compared with the same month last year, performance against the 4 hour component of the target for Type 1 emergency care departments had declined by 2.7 percentage points, from 77.8% in June 2013 to 75.1% in June 2014 (Figures 4, Table 4).

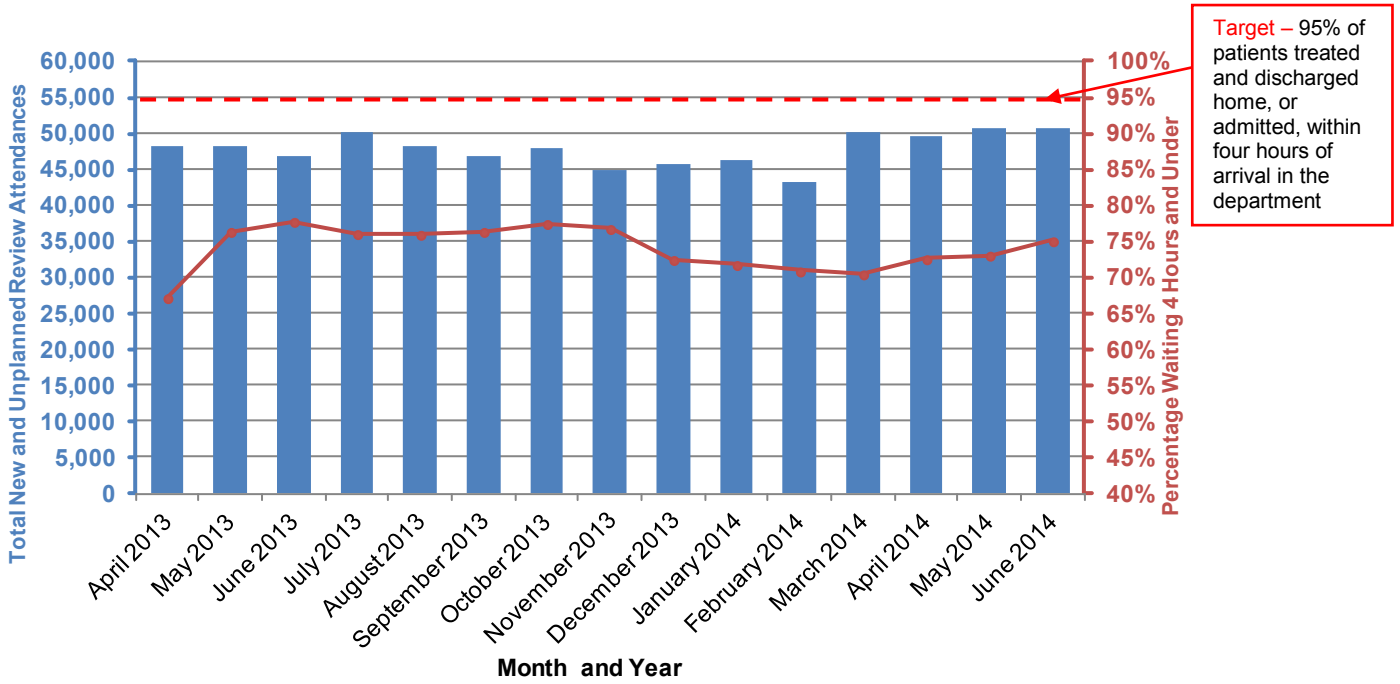
Between June 2013 and June 2014, attendances at Type 1 emergency care departments increased by 3,708 (7.9%), from 46,891 to 50,599 (Figures 4, Table 4).

During the last 15 months, performance against the 4 hour component of the target for Type 1 emergency care departments was lowest in April 2013 (67.2%) and highest in June 2013 (77.8%) (Figure 4, Table 4).

Between April 2013 and June 2014, monthly attendances at Type 1 emergency care departments were lowest in February 2014 (43,142) and highest in May 2014 (50,673). It should be noted that the number of new and unplanned attendances recorded in May 2014 (50,673) was the highest number of monthly attendances at Type 1 emergency care departments since the establishment of this information collection in April 2008 (Figure 4, Table 4).

<sup>2</sup> See Appendix 2, Note 20 for information on amendments to historical figures.

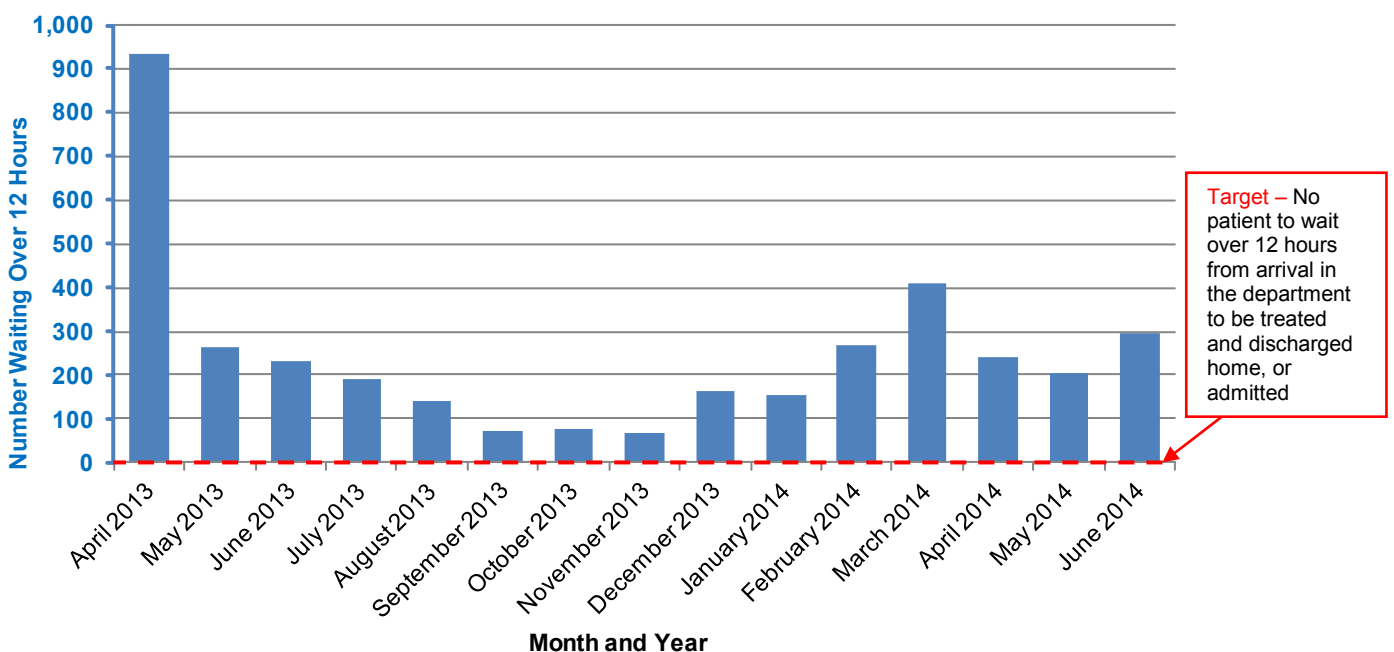
**Figure 4: Performance against the 4 Hour Ministerial Target for Emergency Care Waiting Times at Type 1 Emergency Care Departments (April 2013 – June 2014)**



When compared with the same month last year, performance against the 12 hour component at Type 1 emergency care departments declined (60), from 234 in June 2013 to 294 in June 2014 (Figure 5, Table 4).

Between April 2013 and November 2013, the number of patients waiting over 12 hours at emergency care decreased markedly from 936 to 69. However since November 2013, the number waiting longer than 12 hours has increased to 294 in June 2014 (Figure 5, Table 4).

**Figure 5: Performance against the 12 Hour Ministerial Target for Emergency Care Waiting Times at Type 1 Emergency Care Departments (April 2013 – June 2014)**



## 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 (April - June 2014)**

Type 2 Emergency Care Departments <sup>3</sup>	Percentage Waiting 4 Hours and Under			No. Waiting Over 12 Hours			Total Attendances (New and Unplanned Review)		
	Apr 2014	May 2014	Jun 2014	Apr 2014	May 2014	Jun 2014	Apr 2014	May 2014	Jun 2014
Lagan Valley	83.2%	84.8%	84.8%	1	0	0	1,863	1,872	1,911
Downe	92.0%	90.7%	90.6%	0	1	0	1,537	1,531	1,507
<b>Total</b>	<b>87.2%</b>	<b>87.5%</b>	<b>87.4%</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>3,400</b>	<b>3,403</b>	<b>3,418</b>

### Latest position (June 2014)

During June 2014, performance against the 4 hour component of the Ministerial target for emergency care waiting times in Type 2 departments was not achieved in Lagan Valley (84.8%) or Downe (90.6%) (Figure 6, Table 5).

In June 2014, no patients attending Type 2 emergency care departments waited longer than 12 hours (Table 5).

There were 3,418 attendances at Type 2 emergency care departments in June 2014 (1,911 in Lagan Valley and 1,507 in Downe) (Table 5).

### Position during last three months (April – June 2014)

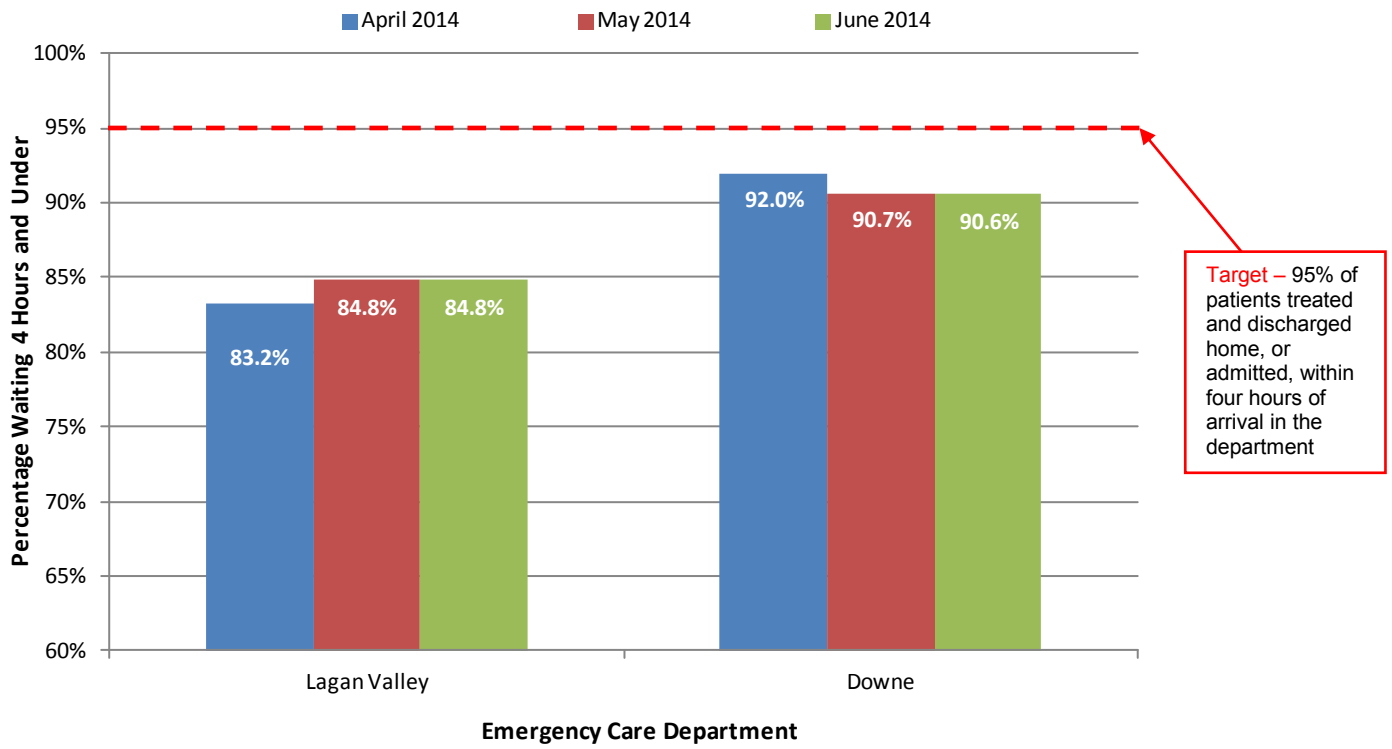
During the last 3 months, performance against the 4 hour component of the target increased by 1.6 percentage points in Lagan Valley, from 83.2% in April 2014 to 84.8% in June 2014, whilst performance in Downe decreased by 1.4 percentage points, from 92.0% in April 2014 to 90.6% in June 2014 (Figure 6, Table 5).

Since April 2014, the 12 hour component of the target was achieved or almost achieved at the Downe and Lagan Valley emergency care departments (Table 5).

Between April and June 2014, a similar number of attendances were recorded at Type 2 emergency care departments (Figure 7, Table 5).

<sup>3</sup> See Appendix 2, Note 19 for reclassification at weekends.

**Figure 6: Performance against the 4 Hour Ministerial Target for Emergency Care Waiting Times at Type 2 Emergency Care Departments (April - June 2014)**



**Table 6: Performance against the 4 Hour Ministerial Target for Emergency Care Waiting Times at Type 2 Emergency Care Departments (April 2013 – June 2014)<sup>4</sup>**

Month	Percentage Waiting 4 Hours and Under	Number Waiting Over 12 Hours	Total Attendances (New and Unplanned Review)
April 2013	82.6%	62	4,178
May 2013	87.0%	29	4,271
June 2013	90.6%	10	4,002
July 2013	91.5%	1	4,322
August 2013	87.1%	9	4,357
September 2013	90.7%	4	4,220
October 2013	88.2%	1	4,233
November 2013	86.4%	13	3,833
December 2013	87.3%	2	3,633
January 2014	86.2%	0	2,979
February 2014	86.3%	1	2,769
March 2014	87.0%	0	3,239
April 2014	87.2%	1	3,400
May 2014	87.5%	1	3,403
June 2014	87.4%	0	3,418

#### Position during last fifteen months (April 2013 – June 2014)

When compared with the same month last year, performance against the 4 hour component of the target for Type 2 emergency care departments declined by 3.2 percentage points, from 90.6% in June 2013 to 87.4% in June 2014 (Figure 7, Table 6).

Between June 2013 and June 2014, attendances at Type 2 emergency care departments decreased by 584 (14.6%) from 4,002 to 3,418 (Figure 7, Table 6).

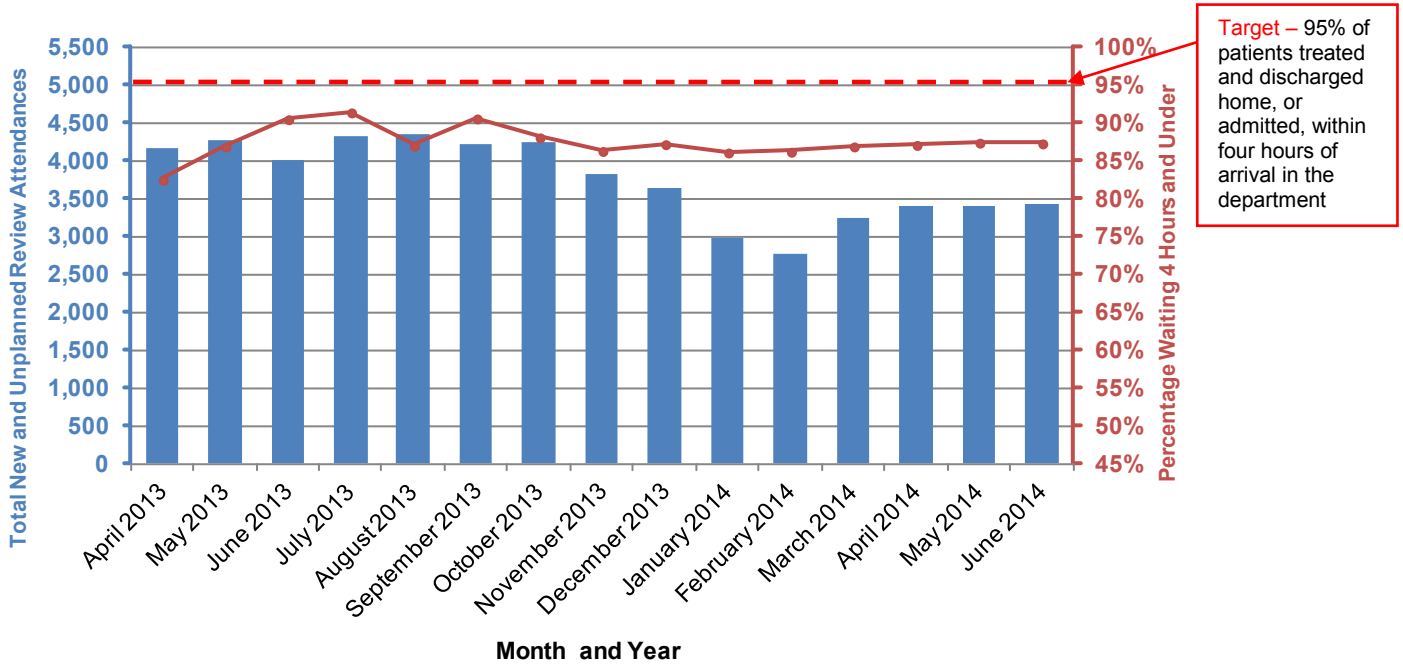
During the last 15 months, performance against the 4 hour component of the target for Type 2 emergency care departments was lowest in April 2013 (82.6%) and highest in July 2013 (91.5%) (Figure 7, Table 6).

Since April 2013, monthly attendances at Type 2 departments ranged from 2,769 in February 2014 to 4,357 in August 2013 (Figures 7, Table 6).

<sup>4</sup> See Appendix 2, Note 20 for information on amendments to historical figures.



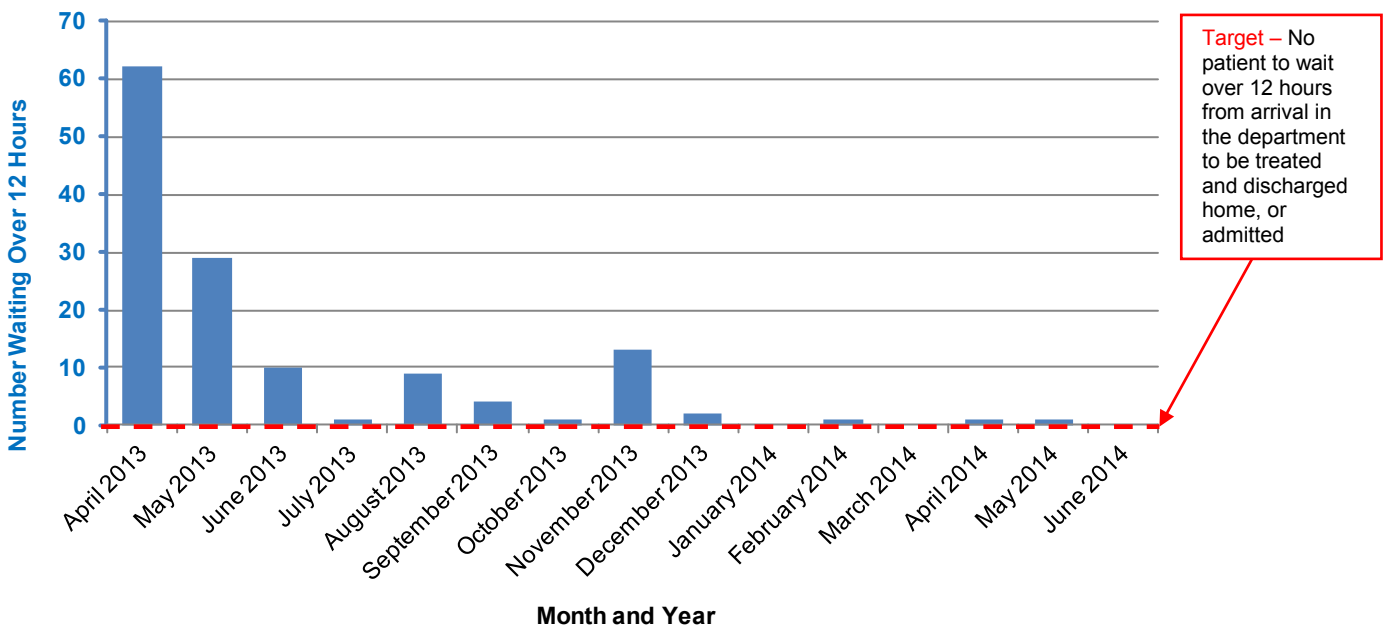
**Figure 7: Performance against the 4 Hour Ministerial Target for Emergency Care Waiting Times at Type 2 Emergency Care Departments (April 2013 – June 2014)**



When compared with the same month last year, performance against the 12 hour component at Type 2 emergency care departments improved, from 10 in June 2013 to zero (0) in June 2014 (Figure 8, Table 6).

During the last 15 months, performance against the 12 hour component in Type 2 departments ranged from 62 in April 2013, to zero (0) in January 2014, March 2014 and June 2014. (Figure 8, Table 6).

**Figure 8: Performance against the 12 Hour Ministerial Target for Emergency Care Waiting Times at Type 2 Emergency Care Departments (April 2013 - June 2014)**



## 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 (April – June 2014)**

Type 3 Emergency Care Departments	Percentage Waiting 4 Hours and Under			Number Waiting Over 12 Hours			Total Attendances (New and Unplanned Review)		
	Apr 2014	May 2014	Jun 2014	Apr 2014	May 2014	Jun 2014	Apr 2014	May 2014	Jun 2014
Whiteabbey	100.0%	100.0%	99.7%	0	0	0	772	771	972
Mid Ulster	100.0%	100.0%	100.0%	0	0	0	711	764	843
Tyrone County	100.0%	99.9%	99.9%	0	0	0	1,404	1,459	1,534
South Tyrone	100.0%	99.9%	100.0%	0	0	0	2,000	1,945	2,251
Armagh	100.0%	100.0%	100.0%	0	0	0	660	634	652
Ards	100.0%	100.0%	100.0%	0	0	0	845	850	966
Bangor	100.0%	100.0%	99.9%	0	0	0	851	873	958
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>99.9%</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>7,243</b>	<b>7,296</b>	<b>8,176</b>

### Latest position (June 2014)

During June 2014, performance against both the 4 hour and 12 hour components of the Ministerial target was achieved by all Type 3 departments (Table 7).

There were a total of 8,176 attendances at Type 3 emergency care departments in June 2014, ranging from 652 in Armagh Community to 2,251 in South Tyrone (Table 7).

### Position during last three months (April – June 2014)

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

Between April and June 2014, attendances at Type 3 emergency care departments increased by 933 (12.9%), from 7,243 to 8,176 (Table 7).

**Table 8: Performance against the Ministerial Target for Emergency Care Waiting Times at Type 3 Emergency Care Departments (April 2013 - June 2014)<sup>5</sup>**

Month	Percentage Waiting 4 Hours and Under	Number Waiting Over 12 Hours	Total Attendances (New and Unplanned Review)
April 2013	100.0%	0	6,979
May 2013	99.9%	0	7,447
June 2013	100.0%	0	7,420
July 2013	99.9%	0	7,854
August 2013	100.0%	0	7,214
September 2013	100.0%	0	7,129
October 2013	100.0%	0	7,187
November 2013	100.0%	0	6,294
December 2013	100.0%	0	5,582
January 2014	100.0%	0	5,967
February 2014	100.0%	0	5,800
March 2014	100.0%	0	7,070
April 2014	100.0%	0	7,243
May 2014	100.0%	0	7,296
June 2014	99.9%	0	8,176

#### Position during last fifteen months (April 2013 – June 2014)

When compared with the same month last year, performance against the 4 hour and 12 hour component of the target for Type 3 emergency care departments remained at 100.0% and zero (0) respectively (Figure 9, Table 8).

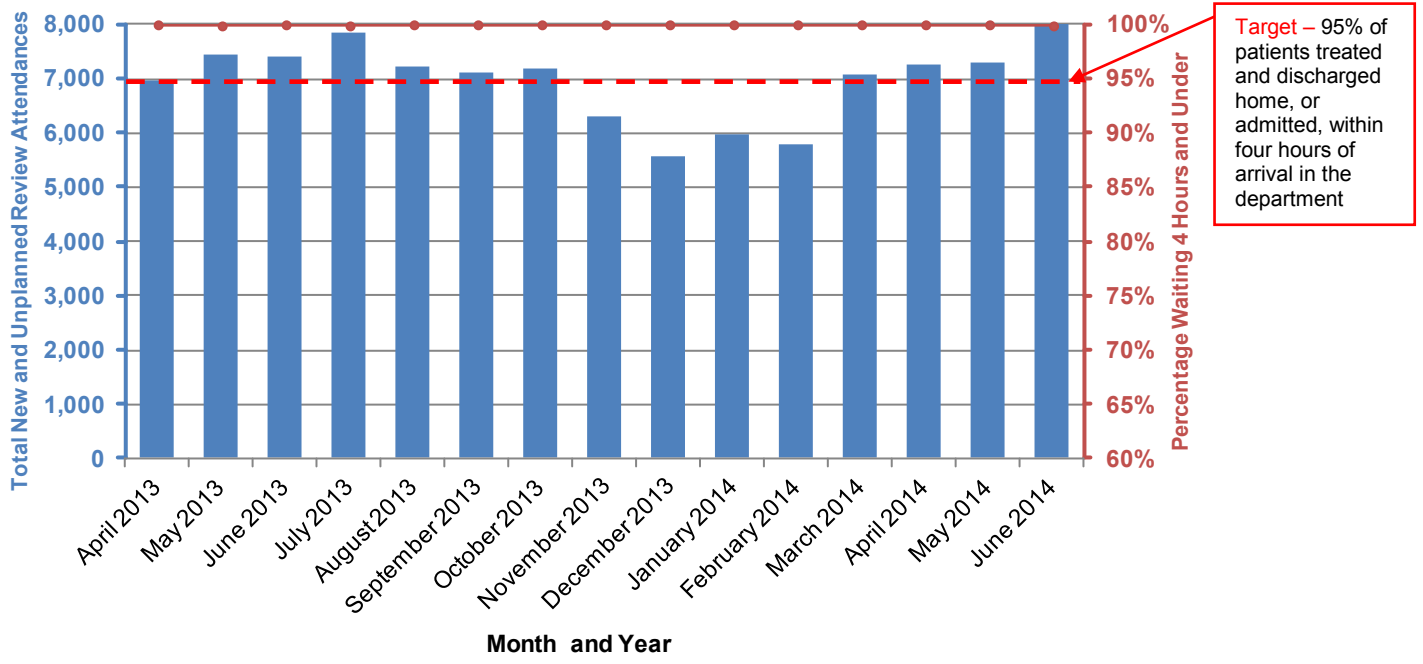
Between June 2013 and June 2014, attendances at Type 3 emergency care departments increased by 756 (10.2%) from 7,420 to 8,176 (Figure 9, Table 8).

Since April 2013, no patient waited longer than 12 hours to be either treated and discharged home, or admitted in Type 3 departments in any month (Table 8).

Since April 2013, monthly attendances at Type 3 emergency care departments were lowest in December 2013 (5,582) and highest in June 2014 (8,176). It should be noted that the number of new and unplanned attendances recorded in June 2014 (8,176) was the highest number of monthly attendances at Type 3 emergency care departments since the establishment of this information collection in April 2008 (Figure 9, Table 8).

<sup>5</sup> See Appendix 2, Note 20 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 (April 2013 - June 2014)**



## Performance at All Emergency Care Departments

**Table 9: Performance against the Ministerial Target for Emergency Care Waiting Times at all Emergency Care Departments (April 2013 - June 2014)<sup>6</sup>**

Month	Percentage Waiting 4 Hours and Under	Number Waiting Over 12 Hours	Total Attendances (New and Unplanned Review)
April 2013	72.1%	998	59,256
May 2013	80.1%	294	59,947
June 2013	81.5%	244	58,313
July 2013	80.1%	191	62,393
August 2013	79.7%	150	59,855
September 2013	80.3%	76	58,118
October 2013	81.0%	77	59,296
November 2013	80.1%	82	55,039
December 2013	76.3%	165	55,057
January 2014	75.6%	156	55,302
February 2014	75.0%	268	51,711
March 2014	74.8%	408	60,331
April 2014	76.7%	241	60,142
May 2014	77.1%	204	61,372
June 2014	79.0%	294	62,193

### Latest position (June 2014)

During June 2014, there were a total of 62,193 attendances at emergency care departments in Northern Ireland, 79.0% of which were treated and discharged or admitted within 4 hours of their arrival, whilst 294 (0.5%) waited longer than 12 hours (Figures 10 and 11, Table 9).

### Position during last three months (April – June 2014)

During the last 3 months, the percentage of patients treated and discharged or admitted within 4 hours of their arrival increased by 2.3 percentage points, from 76.7% in April 2014 to 79.0% in June 2014 (Figure 10, Table 9).

During this time, the number of patients waiting longer than 12 hours increased (53), from 241 in April 2014 to 294 in June 2014 (Figure 11, Table 9).

Between April and June 2014, attendances at emergency care departments increased by 2,051 (3.4%), from 60,142 to 62,193 (Figure 10, Table 9).

<sup>6</sup> See Appendix 2, Note 20 for information on amendments to historical figures.

**Position during last fifteen months (April 2013 – June 2014)**

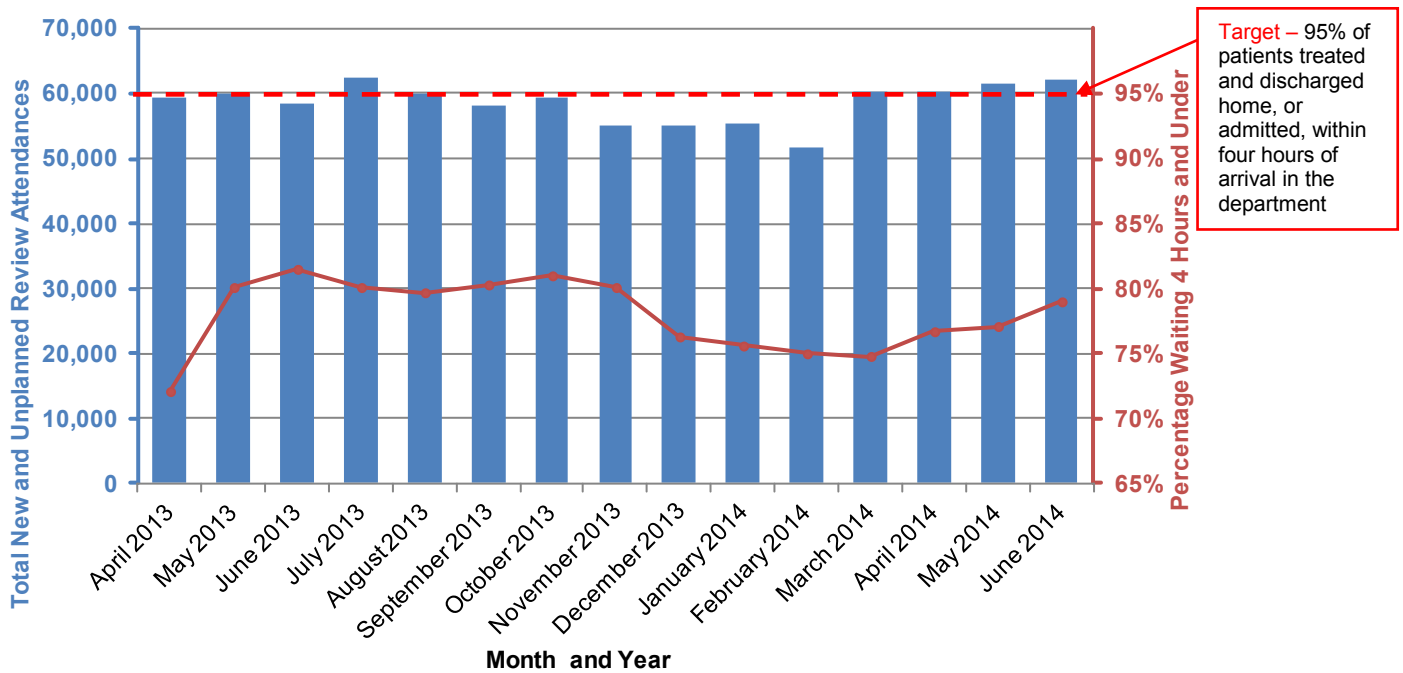
When compared with the same month last year, performance against the 4 hour component of the target decreased by 2.5 percentage points, from 81.5% in June 2013 to 79.0% in June 2014 (Figure 10, Table 9).

Between June 2013 and June 2014, attendances at emergency care departments increased by 3,880 (6.7%) from 58,313 to 62,193 (Figure 10, Table 9).

Since April 2013, the percentage of patients treated and discharged or admitted within 4 hours of their arrival at emergency care was lowest in April 2013 (72.1%) and highest in June 2013 (81.5%) (Figure 10, Table 9).

Between April 2013 and June 2014, the highest number of attendances at emergency care departments was reported during July 2013 (62,394) whilst the lowest number of attendances was reported during February 2014 (51,711) (Figure 10, Table 9).

**Figure 10: Percentage of Patients Waiting 4 Hours or Less at all Emergency Care Departments (April 2013 – June 2014)**

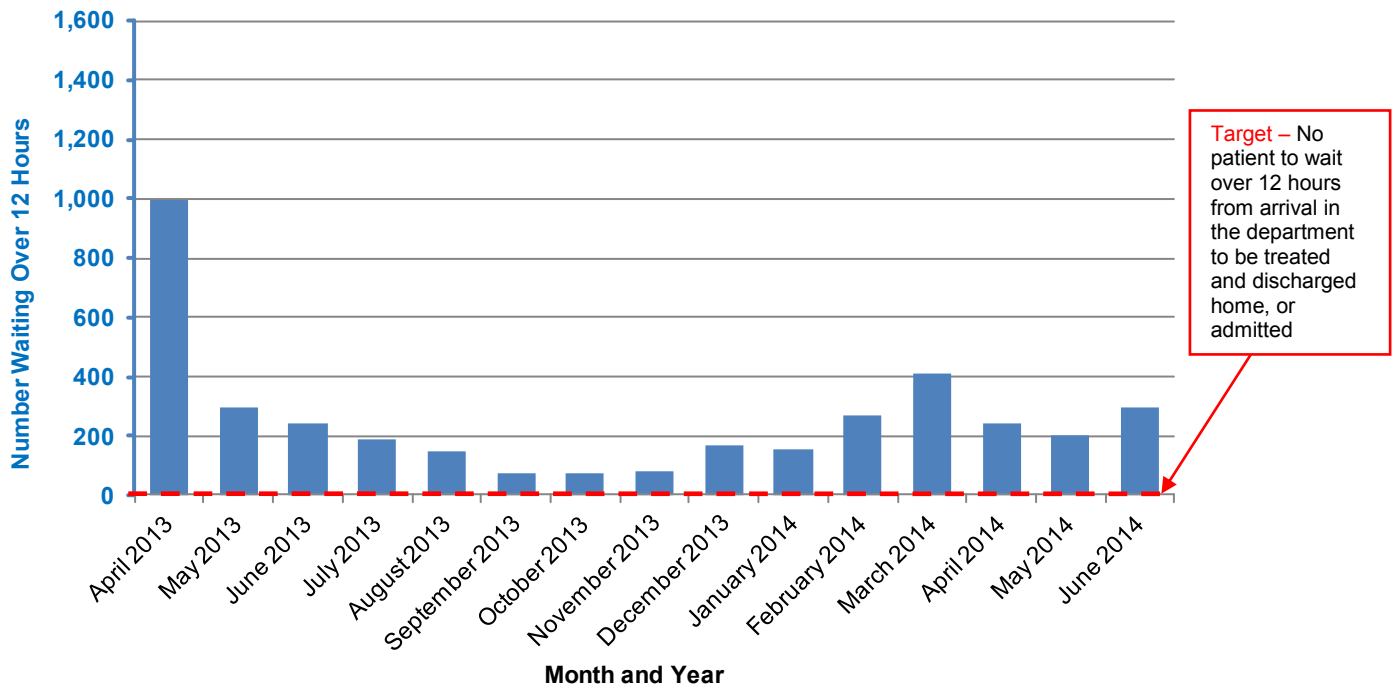


When compared with the same month last year, performance against the 12 hour component declined (50), from 244 in June 2013 to 294 in June 2014 (Figure 11, Table 9).

The highest number of patients waiting over 12 hours at emergency care was reported during April 2013 (998), whilst the lowest number was reported in September 2013 (76) and October 2013 (77).

Between April 2013 and September 2013, the number of patients waiting over 12 hours at emergency care decreased markedly from 998 to 76, but has subsequently increased to 294 in June 2014 (Figure 11, Table 9).

**Figure 11: Performance against the 12 Hour Ministerial Target for Emergency Care Waiting Times at all Emergency Care Departments (April 2013 – June 2014)**



## Position since April 2008<sup>7</sup>

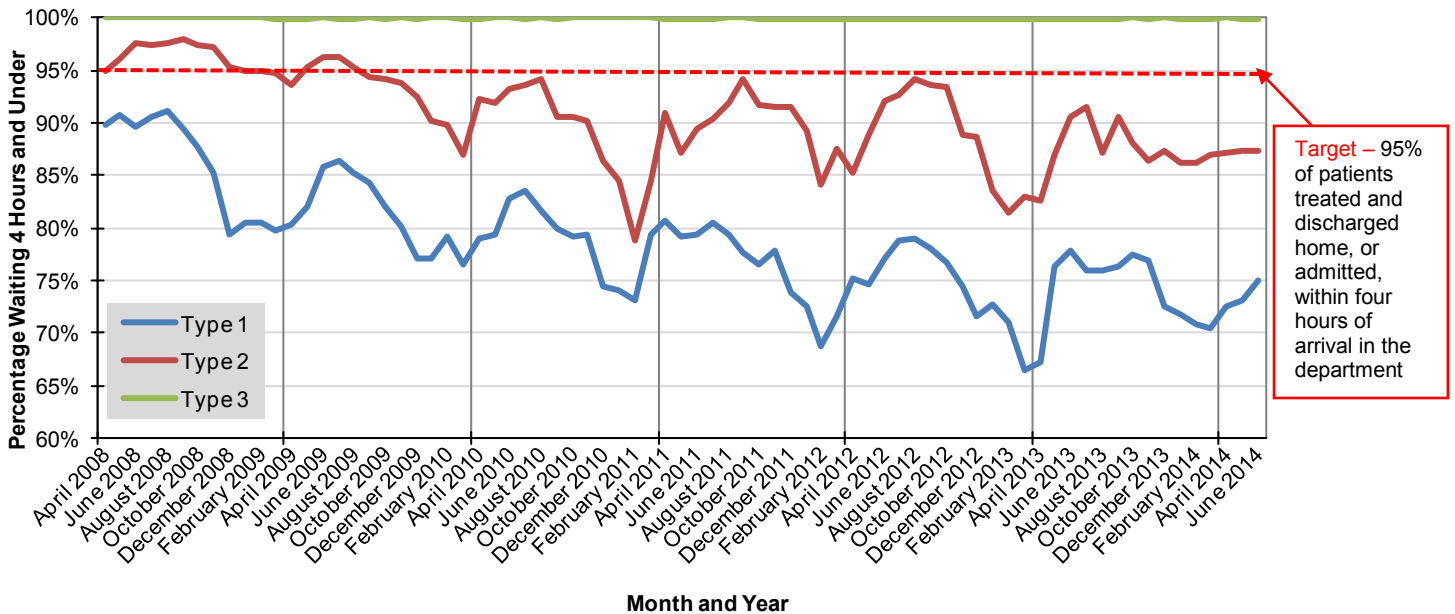
### Four Hour Performance

Between April 2008 and June 2014, the percentage of patients treated and discharged or admitted within 4 hours of their arrival at Type 1 emergency care departments was lowest in March 2013 (66.5%) and highest in August 2008 (91.1%) (Figure 12).

Since April 2008, the percentage of patients treated and discharged or admitted within 4 hours of their arrival at Type 2 emergency care departments was lowest in February 2011 (78.9%) and highest in September 2008 (98.1%) (Figure 12).

During this time, the percentage of patients treated and discharged or admitted within 4 hours of their arrival at Type 3 emergency care departments remained similar, ranging from 99.8% to 100.0% (Figure 12).

**Figure 12: Performance against the 4 Hour Ministerial Target for Emergency Care Waiting Times, by Emergency Care Department Type (April 2008 – June 2014)**



<sup>7</sup> See Appendix 1, Tables 1D – 1G



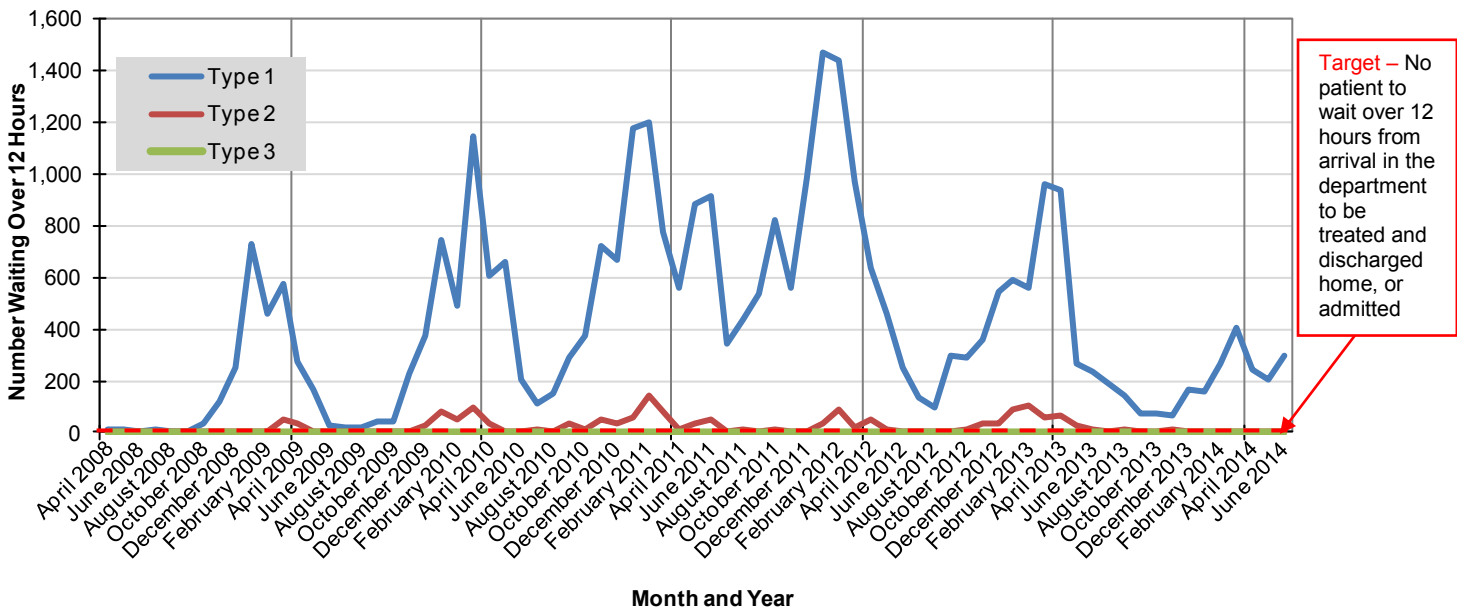
## Twelve Hour Performance

Between April 2008 and June 2014, the number of patients waiting over 12 hours at Type 1 emergency care departments ranged from 1 in September 2008 to 1,468 in January 2012 (Figure 13).

During this time, the 12 hour component of the target was achieved by Type 2 emergency care departments in each month between June 2008 and November 2008, as well as in August 2009, August 2010, September 2011, September 2012, January 2014, March 2014 and June 2014. The highest number of patients waiting over 12 hours was reported in February 2011 (142) (Figure 13).

Since April 2008, the 12 hour component of the target was achieved by Type 3 emergency care departments in every month (Figure 13).

**Figure 13: Performance against the 12 Hour Ministerial Target for Emergency Care Waiting Times, by Emergency Care Department Type (April 2008 – June 2014)**



Target – No patient to wait over 12 hours from arrival in the department to be treated and discharged home, or admitted

## Attendances<sup>8</sup>

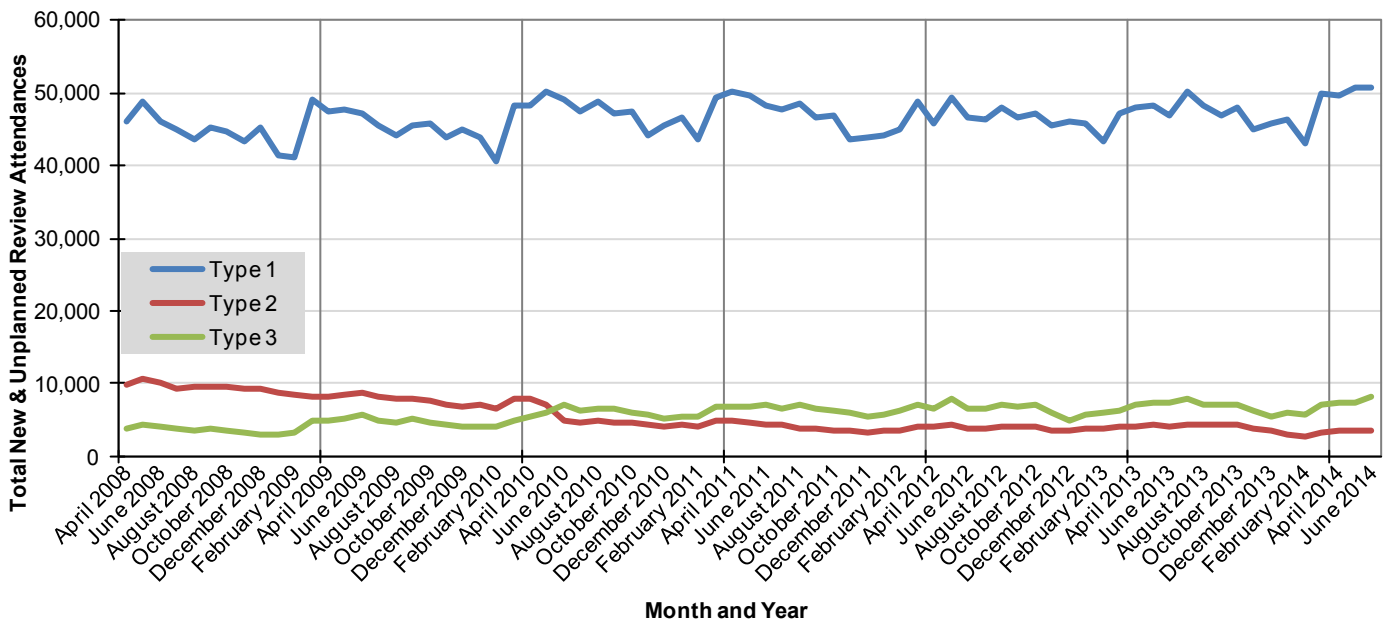
When analysing attendances by emergency care department type over time, it is important to note that a number of departments have been reclassified, closed, or changed opening hours. Refer to Appendix 2, notes 9 to 19, for further information.

Between April 2008 and June 2014, the highest number of attendances at Type 1 emergency care departments was reported during May 2014 (50,673) whilst the lowest number of attendances was reported during February 2010 (40,590) (Figure 14).

During this time, the highest number of attendances at Type 2 emergency care departments was reported during May 2008 (10,718) whilst the lowest number of attendances was reported during February 2014 (2,769) (Figure 14).

Since April 2008, the highest number of attendances at Type 3 emergency care departments was reported during June 2014 (8,176) whilst the lowest number of attendances was reported during December 2008 (2,862) (Figure 14).

**Figure 14: Total New & Unplanned Review Attendances, by Emergency Care Department Type (April 2008 – June 2014)**



<sup>8</sup> See Appendix 2, Note 9 for list of Department Types & Notes 10, 11 & 19 for reclassifications.

## Appendices

### Appendix 1: Additional Tables

**Table 1A: Percentage of Patients Waiting 4 Hours and Under, by Emergency Care Department (April – June 2014)**

Emergency Care Department <sup>9</sup>	Percentage of Patients Waiting 4 Hours and Under		
	Apr 2014	May 2014	Jun 2014
Mater (Type 1)	70.8%	74.6%	78.0%
Royal Victoria (Type 1)	68.6%	65.1%	63.7%
RBHSC (Type 1)	87.4%	86.7%	88.5%
Antrim Area (Type 1)	60.6%	59.6%	65.7%
Whiteabbey (Type 3)	100.0%	100.0%	99.7%
Mid Ulster (Type 3)	100.0%	100.0%	100.0%
Causeway (Type 1)	78.9%	76.5%	78.5%
Ulster (Type 1)	74.1%	72.4%	76.0%
Ards (Type 3)	100.0%	100.0%	100.0%
Bangor (Type 3)	100.0%	100.0%	99.9%
Lagan Valley (Type 2)	83.2%	84.8%	84.8%
Downe (Type 2)	92.0%	90.7%	90.6%
Craigavon Area (Type 1)	70.0%	76.7%	72.6%
Daisy Hill (Type 1)	75.1%	86.4%	83.1%
South Tyrone (Type 3)	100.0%	99.9%	100.0%
Armagh (Type 3)	100.0%	100.0%	100.0%
Altnagelvin Area (Type 1)	72.9%	69.8%	81.7%
South West Acute (Type 1)	89.7%	89.7%	91.5%
Tyrone County (Type 3)	100.0%	99.9%	99.9%
All Type 1	72.6%	73.1%	75.1%
All Type 2	87.2%	87.5%	87.4%
All Type 3	100.0%	100.0%	99.9%
<b>Northern Ireland</b>	<b>76.7%</b>	<b>77.1%</b>	<b>79.0%</b>

<sup>9</sup> 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, 11 and 19 for reclassifications).

**Table 1B: Number of Patients Waiting Over 12 Hours, by Emergency Care Department (April – June 2014)**

Emergency Care Department	Number of Patients Waiting Over 12 Hours		
	Apr 2014	May 2014	Jun 2014
Mater (Type 1)	11	9	34
Royal Victoria (Type 1)	67	75	190
RBHSC (Type 1)	1	0	0
<b>Belfast HSC Trust</b>	<b>79</b>	<b>84</b>	<b>224</b>
Antrim Area (Type 1)	122	118	63
Whiteabbey (Type 3)	0	0	0
Mid Ulster (Type 3)	0	0	0
Causeway (Type 1)	0	0	0
<b>Northern HSC Trust</b>	<b>122</b>	<b>118</b>	<b>63</b>
Ulster (Type 1)	38	1	6
Ards (Type 3)	0	0	0
Bangor (Type 3)	0	0	0
Lagan Valley (Type 2)	1	0	0
Downe (Type 2)	0	1	0
<b>South Eastern HSC Trust</b>	<b>39</b>	<b>2</b>	<b>6</b>
Craigavon Area (Type 1)	0	0	1
Daisy Hill (Type 1)	1	0	0
South Tyrone (Type 3)	0	0	0
Armagh (Type 3)	0	0	0
<b>Southern HSC Trust</b>	<b>1</b>	<b>0</b>	<b>1</b>
Altnagelvin Area (Type 1)	0	0	0
South West Acute (Type 1)	0	0	0
Tyrone County (Type 3)	0	0	0
<b>Western HSC Trust</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Northern Ireland</b>	<b>241</b>	<b>204</b>	<b>294</b>

**Table 1C: Total New and Unplanned Review Emergency Care Attendances, by Emergency Care Department (April – June 2014)**

Emergency Care Department	Total Attendances (New and Unplanned Review)		
	Apr 2014	May 2014	Jun 2014
Mater (Type 1)	3,664	3,784	3,931
Royal Victoria (Type 1)	8,015	8,464	8,428
RBHSC (Type 1)	2,919	2,966	2,952
<b>Belfast HSC Trust</b>	<b>14,598</b>	<b>15,214</b>	<b>15,311</b>
Antrim Area (Type 1)	6,454	6,625	6,543
Whiteabbey (Type 3)	772	771	972
Mid Ulster (Type 3)	711	764	843
Causeway (Type 1)	3,695	3,850	3,667
<b>Northern HSC Trust</b>	<b>11,632</b>	<b>12,010</b>	<b>12,025</b>
Ulster (Type 1)	7,014	7,207	7,164
Ards (Type 3)	845	850	966
Bangor (Type 3)	851	873	958
Lagan Valley (Type 2)	1,863	1,872	1,911
Downe (Type 2)	1,537	1,531	1,507
<b>South Eastern HSC Trust</b>	<b>12,110</b>	<b>12,333</b>	<b>12,506</b>
Craigavon Area (Type 1)	6,554	6,503	6,666
Daisy Hill (Type 1)	3,907	3,840	3,971
South Tyrone (Type 3)	2,000	1,945	2,251
Armagh (Type 3)	660	634	652
<b>Southern HSC Trust</b>	<b>13,121</b>	<b>12,922</b>	<b>13,540</b>
Altnagelvin Area (Type 1)	4,628	4,771	4,691
South West Acute (Type 1)	2,649	2,663	2,586
Tyrone County (Type 3)	1,404	1,459	1,534
<b>Western HSC Trust</b>	<b>8,681</b>	<b>8,893</b>	<b>8,811</b>
<b>Northern Ireland</b>	<b>60,142</b>	<b>61,372</b>	<b>62,193</b>

**Table 1D: Performance against the Ministerial Target for Emergency Care Waiting Times at Type 1 Emergency Care Departments (April 2008 – June 2014)**

Month	Percentage Waiting 4 Hours and Under	Number Waiting Over 12 Hours	Total Attendances (New and Unplanned Review)
April 2008	89.9%	14	46,017
May 2008	90.7%	8	48,716
June 2008	89.6%	4	46,118
July 2008	90.6%	8	44,900
August 2008	91.1%	3	43,566
September 2008	89.5%	1	45,239
October 2008	87.8%	38	44,728
November 2008	85.2%	122	43,454
December 2008	79.3%	250	45,206
January 2009	80.4%	728	41,488
February 2009	80.6%	456	41,254
March 2009	79.7%	573	49,047
April 2009	80.3%	277	47,404
May 2009	82.0%	164	47,620
June 2009	85.9%	30	47,076
July 2009	86.3%	22	45,485
August 2009	85.3%	20	44,138
September 2009	84.4%	45	45,542
October 2009	82.1%	41	45,862
November 2009	80.2%	229	43,949
December 2009	77.2%	375	45,013
January 2010	77.1%	746	43,975
February 2010	79.1%	486	40,590
March 2010	76.6%	1,146	48,199
April 2010	79.0%	602	48,250
May 2010	79.4%	657	50,317
June 2010	82.8%	205	49,130
July 2010	83.5%	112	47,519
August 2010	81.7%	147	48,785
September 2010	80.0%	289	47,084
October 2010	79.3%	377	47,392
November 2010	79.3%	722	44,053
December 2010	74.5%	664	45,471
January 2011	74.1%	1,180	46,549
February 2011	73.2%	1,196	43,551
March 2011	79.3%	772	49,446
April 2011	80.7%	563	50,259
May 2011	79.2%	883	49,701
June 2011	79.3%	917	48,370
July 2011	80.6%	344	47,713
August 2011	79.4%	439	48,456
September 2011	77.7%	539	46,650
October 2011	76.6%	822	46,976
November 2011	78.0%	559	43,530
December 2011	73.8%	987	43,938
January 2012	72.5%	1,468	44,228
February 2012	68.7%	1,441	44,838
March 2012	71.6%	969	48,750

Month	Percentage Waiting 4 Hours and Under	Number Waiting Over 12 Hours	Total Attendances (New and Unplanned Review)
April 2012	75.2%	633	45,848
May 2012	74.7%	456	49,422
June 2012	77.1%	253	46,617
July 2012	78.8%	131	46,345
August 2012	79.0%	96	48,013
September 2012	78.0%	294	46,649
October 2012	76.8%	291	47,042
November 2012	74.5%	362	45,585
December 2012	71.7%	541	45,998
January 2013	72.7%	587	45,851
February 2013	71.0%	556	43,418
March 2013	66.5%	961	47,291
April 2013	67.2%	936	48,099
May 2013	76.4%	265	48,229
June 2013	77.8%	234	46,891
July 2013	76.1%	190	50,217
August 2013	76.0%	141	48,284
September 2013	76.4%	72	46,769
October 2013	77.5%	76	47,876
November 2013	76.8%	69	44,912
December 2013	72.5%	163	45,842
January 2014	71.8%	156	46,356
February 2014	70.9%	267	43,142
March 2014	70.5%	408	50,022
April 2014	72.6%	240	49,499
May 2014	73.1%	203	50,673
June 2014	75.1%	294	50,599

**Table 1E: Performance against the Ministerial Target for Emergency Care Waiting Times at Type 2 Emergency Care Departments (April 2008 – June 2014)**

Month	Percentage Waiting 4 Hours and Under	Number Waiting Over 12 Hours	Total Attendances (New and Unplanned Review)
April 2008	95.0%	7	9,811
May 2008	96.1%	4	10,718
June 2008	97.7%	0	10,010
July 2008	97.4%	0	9,223
August 2008	97.6%	0	9,601
September 2008	98.1%	0	9,500
October 2008	97.5%	0	9,559
November 2008	97.2%	0	9,181
December 2008	95.4%	3	9,344
January 2009	94.9%	6	8,810
February 2009	95.0%	5	8,509
March 2009	94.7%	50	8,320
April 2009	93.6%	32	8,085
May 2009	95.3%	5	8,357
June 2009	96.3%	1	8,630
July 2009	96.2%	1	8,101
August 2009	95.3%	0	7,855
September 2009	94.4%	3	7,827
October 2009	94.2%	5	7,667
November 2009	93.8%	7	7,090
December 2009	92.5%	24	6,862
January 2010	90.2%	77	6,975
February 2010	89.8%	52	6,475
March 2010	86.9%	93	7,859
April 2010	92.4%	33	7,843
May 2010	91.9%	4	7,161
June 2010	93.2%	4	4,862
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
October 2011	91.8%	11	3,639
November 2011	91.6%	5	3,405
December 2011	91.5%	6	3,317
January 2012	89.3%	34	3,591
February 2012	84.2%	87	3,610
March 2012	87.5%	18	4,100



Month	Percentage Waiting 4 Hours and Under	Number Waiting Over 12 Hours	Total Attendances (New and Unplanned Review)
April 2012	85.3%	48	3,982
May 2012	89.0%	13	4,269
June 2012	92.1%	2	3,940
July 2012	92.7%	5	3,810
August 2012	94.3%	1	4,075
September 2012	93.6%	0	4,120
October 2012	93.4%	8	4,064
November 2012	88.9%	35	3,581
December 2012	88.7%	38	3,665
January 2013	83.5%	91	3,833
February 2013	81.4%	102	3,703
March 2013	82.9%	56	3,952
April 2013	82.6%	62	4,178
May 2013	87.0%	29	4,271
June 2013	90.6%	10	4,002
July 2013	91.5%	1	4,322
August 2013	87.1%	9	4,357
September 2013	90.7%	4	4,220
October 2013	88.2%	1	4,233
November 2013	86.4%	13	3,833
December 2013	87.3%	2	3,633
January 2014	86.2%	0	2,979
February 2014	86.3%	1	2,769
March 2014	87.0%	0	3,239
April 2014	87.2%	1	3,400
May 2014	87.5%	1	3,403
June 2014	87.4%	0	3,418

**Table 1F: Performance against the Ministerial Target for Emergency Care Waiting Times at Type 3 Emergency Care Departments (April 2008 – June 2014)**

<b>Month</b>	<b>Percentage Waiting 4 Hours and Under</b>	<b>Number Waiting Over 12 Hours</b>	<b>Total Attendances (New and Unplanned Review)</b>
April 2008	100.0%	0	3,897
May 2008	100.0%	0	4,286
June 2008	100.0%	0	4,011
July 2008	100.0%	0	3,675
August 2008	100.0%	0	3,566
September 2008	100.0%	0	3,797
October 2008	100.0%	0	3,619
November 2008	100.0%	0	3,343
December 2008	100.0%	0	2,862
January 2009	100.0%	0	3,015
February 2009	100.0%	0	3,126
March 2009	99.9%	0	4,975
April 2009	100.0%	0	4,870
May 2009	99.8%	0	5,095
June 2009	100.0%	0	5,644
July 2009	99.9%	0	4,919
August 2009	100.0%	0	4,711
September 2009	100.0%	0	5,045
October 2009	100.0%	0	4,653
November 2009	100.0%	0	4,253
December 2009	99.9%	0	4,007
January 2010	100.0%	0	4,081
February 2010	100.0%	0	4,067
March 2010	100.0%	0	4,980
April 2010	99.9%	0	5,378
May 2010	100.0%	0	6,000
June 2010	100.0%	0	6,965
July 2010	99.9%	0	6,185
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	5,639
December 2010	100.0%	0	5,112
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	6,834
May 2011	100.0%	0	6,870
June 2011	99.9%	0	7,092
July 2011	100.0%	0	6,600
August 2011	100.0%	0	6,994
September 2011	100.0%	0	6,658
October 2011	100.0%	0	6,347
November 2011	100.0%	0	5,978
December 2011	100.0%	0	5,397
January 2012	100.0%	0	5,831
February 2012	100.0%	0	6,145
March 2012	100.0%	0	7,119

<b>Month</b>	<b>Percentage Waiting 4 Hours and Under</b>	<b>Number Waiting Over 12 Hours</b>	<b>Total Attendances (New and Unplanned Review)</b>
April 2012	100.0%	0	6,509
May 2012	99.9%	0	7,804
June 2012	99.9%	0	6,662
July 2012	100.0%	0	6,668
August 2012	100.0%	0	7,196
September 2012	99.9%	0	6,724
October 2012	99.9%	0	7,002
November 2012	99.9%	0	6,045
December 2012	100.0%	0	4,943
January 2013	100.0%	0	5,629
February 2013	100.0%	0	5,894
March 2013	100.0%	0	6,266
April 2013	100.0%	0	6,979
May 2013	99.9%	0	7,447
June 2013	100.0%	0	7,420
July 2013	99.9%	0	7,854
August 2013	100.0%	0	7,214
September 2013	100.0%	0	7,129
October 2013	100.0%	0	7,187
November 2013	100.0%	0	6,294
December 2013	100.0%	0	5,582
January 2014	100.0%	0	5,967
February 2014	100.0%	0	5,800
March 2014	100.0%	0	7,070
April 2014	100.0%	0	7,243
May 2014	100.0%	0	7,296
June 2014	99.9%	0	8,176

**Table 1G: Performance against the Ministerial Target for Emergency Care Waiting Times at All Emergency Care Departments (April 2008 – June 2014)**

<b>Month</b>	<b>Percentage Waiting 4 Hours and Under</b>	<b>Number Waiting Over 12 Hours</b>	<b>Total Attendances (New and Unplanned Review)</b>
April 2008	91.4%	21	59,725
May 2008	92.2%	12	63,720
June 2008	91.6%	4	60,139
July 2008	92.3%	8	57,798
August 2008	92.7%	3	56,733
September 2008	91.6%	1	58,536
October 2008	90.1%	38	57,906
November 2008	88.1%	122	55,978
December 2008	83.0%	253	57,412
January 2009	83.9%	734	53,313
February 2009	84.1%	461	52,889
March 2009	83.3%	623	62,342
April 2009	83.7%	309	60,359
May 2009	85.3%	169	61,072
June 2009	88.6%	31	61,350
July 2009	88.8%	23	58,505
August 2009	87.9%	20	56,704
September 2009	87.1%	48	58,414
October 2009	85.1%	46	58,182
November 2009	83.5%	236	55,292
December 2009	80.7%	399	55,882
January 2010	80.4%	823	55,031
February 2010	82.1%	538	51,132
March 2010	79.8%	1,239	61,038
April 2010	82.5%	635	61,471
May 2010	82.8%	661	63,478
June 2010	85.6%	209	60,957
July 2010	86.1%	124	58,367
August 2010	84.7%	147	60,279
September 2010	83.1%	320	58,226
October 2010	82.3%	385	58,000
November 2010	82.3%	774	53,975
December 2010	77.8%	702	54,605
January 2011	77.5%	1,235	56,475
February 2011	76.4%	1,338	52,921
March 2011	82.0%	849	61,127
April 2011	83.6%	577	61,907
May 2011	82.2%	919	61,265
June 2011	82.5%	970	59,927
July 2011	83.5%	346	58,669
August 2011	82.7%	453	59,278
September 2011	81.3%	539	57,056
October 2011	80.1%	833	56,962
November 2011	81.3%	564	52,913
December 2011	77.6%	993	52,652
January 2012	76.6%	1,502	53,650
February 2012	73.2%	1,528	54,593
March 2012	76.0%	987	59,969

Month	Percentage Waiting 4 Hours and Under	Number Waiting Over 12 Hours	Total Attendances (New and Unplanned Review)
April 2012	78.8%	681	56,339
May 2012	78.9%	469	61,495
June 2012	80.8%	255	57,219
July 2012	82.2%	136	56,823
August 2012	82.6%	97	59,284
September 2012	81.7%	294	57,493
October 2012	80.7%	299	58,108
November 2012	78.2%	397	55,211
December 2012	75.4%	579	54,606
January 2013	76.3%	678	55,313
February 2013	74.9%	658	53,015
March 2013	71.3%	1,017	57,509
April 2013	72.1%	998	59,256
May 2013	80.1%	294	59,947
June 2013	81.5%	244	58,313
July 2013	80.1%	191	62,393
August 2013	79.7%	150	59,855
September 2013	80.3%	76	58,118
October 2013	81.0%	77	59,296
November 2013	80.1%	82	55,039
December 2013	76.3%	165	55,057
January 2014	75.6%	156	55,302
February 2014	75.0%	268	51,711
March 2014	74.8%	408	60,331
April 2014	76.7%	241	60,142
May 2014	77.1%	204	61,372
June 2014	79.0%	294	62,193

## 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 and 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.
2. From the 1<sup>st</sup> July 2011, Hospital Information Branch (HIB) has been downloading patient level data on emergency care waiting times from the Regional Data Warehouse on the 8<sup>th</sup> 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 8<sup>th</sup> of each month.
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 2014/15 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. On 6<sup>th</sup> March 2013 the UK Statistics Authority confirmed the designation of the Emergency Care Waiting Time Statistics. The letter of confirmation can be viewed at:  
[http://www.dhsspsni.gov.uk/index/stats\\_research/hospital-stats/statistics-research-hib-national-stats.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats/statistics-research-hib-national-stats.htm)
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 review 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	Mater		
	Royal Victoria		
	RBHSC		
Northern	Antrim Area		Whiteabbey <sup>11</sup>
	Causeway		Mid Ulster <sup>10</sup>
South Eastern	Ulster	Lagan Valley <sup>11</sup>	Ards
		Downe <sup>11</sup>	Bangor <sup>12</sup>
Southern	Craigavon Area		South Tyrone
	Daisy Hill		Armagh Community <sup>12</sup>
Western	Altnagelvin Area		Tyrone County <sup>11</sup>
	South West Acute <sup>13</sup>		

10. On 2<sup>nd</sup> 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.

<sup>10</sup> See Notes 10, 11 and 19 for reclassifications.

<sup>11</sup> See Notes 12, 13, 17, 18 and 19 for changes to operating hours.

<sup>12</sup> See Note 16 for information.

<sup>13</sup> See Note 15 for information.

11. On 24<sup>th</sup> 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 1<sup>st</sup> May and 23<sup>rd</sup> 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 24<sup>th</sup> and May 31<sup>st</sup> 2010. This should be taken into consideration when drawing historic comparisons between Type 2 and Type 3 emergency care departments.
12. On 4<sup>th</sup> 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 - 10pm daily, with services provided from 10pm - 8am by an enhanced GP Out of Hours (GP OOH) service. The GP OOH'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.
13. On 1<sup>st</sup> 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.
14. On 1<sup>st</sup> November 2011, the Belfast HSC Trust closed the emergency care department at the Belfast City hospital. This is a temporary change due to a shortage of senior staff but the change is expected to be in place for the foreseeable future.
15. On 21<sup>st</sup> June 2012, the Western HSC Trust closed the Erne hospital with services (including emergency care) immediately transferred to the new South West Acute Hospital in Enniskillen.
16. On 3<sup>rd</sup> September 2012, the Southern HSC Trust closed the Minor Injuries Unit at the Mullinure hospital, with opening hours at the Armagh Community hospital Minor Injuries Unit temporarily extended to 7pm until the end of March 2013. Previously Armagh and Mullinure provided a joint 24-hour emergency care service with Armagh emergency care department operating Monday to Friday 9am - 5pm, and Mullinure emergency care department operating from 5pm - 9am on weekdays, and 24-hour on Saturday, Sunday and Bank Holidays.



17. On 16<sup>th</sup> February 2013, the South Eastern HSC Trust introduced new arrangements for the provision of emergency care services at Bangor Minor Injuries Unit resulting in re-opening at weekends (9am to 5pm on Saturdays and Sundays), 10 months after they were closed due to staff shortages.
18. On 4<sup>th</sup> January 2014, the South Eastern HSC Trust introduced new arrangements for the provision of emergency care services at the Downe and Lagan Valley Hospitals resulting in the reduction of consultant-led emergency care services, from a daily service, operating from 8am - 10pm and 8am - 8pm respectively, to both hospitals operating a weekday service from 8am - 8pm and closing at weekends, with the enhanced GP Out of Hours (GP OOH) service running as normal.
19. On 1<sup>st</sup> March 2014, the South Eastern HSC Trust introduced new arrangements for the temporary provision of emergency care services at Downe Hospital resulting in it re-opening as a minor injuries unit at weekends (9am to 5pm on Saturdays and Sundays), two months after the removal of weekend services due to staff shortages.
20. Some historical figures may have been updated to reflect returns re-submitted by HSC Trusts as part of end of year validations.
21. Figures included within this document are accurate as at 14<sup>th</sup> July 2014, any changes to these figures will be reflected in subsequent issues of this publication.
22. Since the introduction of the emergency care waiting time statistics series in July 2008 information on waiting times at emergency care departments in Northern Ireland has been published on a monthly basis. From 1<sup>st</sup> 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.
23. 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 2014, 95% of patients attending any Type 1, 2 or 3 emergency care department are either treated and discharged home, or admitted within 4 hours of their arrival in the department”, and “no patient attending any emergency care department should wait longer than 12 hours”.*

## Appendix 3: Data in the publication

### General guidance on using the data

The data contained in this publication detail a monthly analysis of emergency care waiting times in Northern Ireland. While seasonal impact should be minimal, it is advisable that users refer to the trend analysis provided which presents information for the previous 15 months.

### Number of New and Unplanned Review Attendances at Emergency Care Departments by Length of Time Waited

#### Description of data

Data on the number of new and unplanned review attendances at emergency care departments in Northern Ireland by the length of time waited. New and unplanned review attendances at emergency care departments are used to describe unplanned activity at emergency care departments, with new attendances referring to the first attendance and unplanned reviews referring to any subsequent unplanned attendances for the same complaint. Information on the length of time waited is collected according to pre-specified time bands, and refers to the time waited from entering the emergency care department until the time the patient is treated and discharged or admitted to hospital (leaves emergency care department).

#### Data Provider

Data on emergency care waiting times is sourced from:

- (i) The Northern Ireland Accident & Emergency Administrative System (NIRAES) via a facility known as the Regional Data Warehouse and,
- (ii) Directly from HSC Trusts using the aggregate EC1 information return for the remaining emergency care departments which use the SYMPHONY/Independent administrative systems.

It should be noted that Hospital Information Branch (HIB) intend to source patient level data from the SYMPHONY/Independent administrative systems once it has been added to the HSC Data Warehouse facility and has been fully tested.

#### Data Quality Assessment

Data is solely derived from administrative systems (NIRAES/SYMPHONY/Independent); although, it should be noted that for NIRAES sites we access this information directly from the Data Warehouse, whilst sites using SYMPHONY complete the EC1 template on our behalf.

For those sites completing the EC1 information return, in-depth guidance has been provided for the recording, collection and submission of data. In addition, across all data regardless of source, variance checks are employed as an integral part of the production process with large discrepancies between the current quarter and both the previous quarter, and the corresponding quarter in the previous year, being queried with the data provider.

## Guidance on using data

- Number of new and unplanned review attendances at emergency care departments – this is the number of new and unplanned review attendances at emergency care departments during each calendar month. It does not include planned review attendances.
- Lengths of time patients wait refers to the time between entering the emergency care department and being logged in at reception until leaving the emergency care department (treated and discharged or admitted to hospital). Explanatory note six (Appendix 1) outlines in more detail how these waiting times are measured. It should also be noted that the length of time waiting for patients who **are to be** admitted to hospital continues until they have left the emergency care department.
- An assessment of both the number of new and unplanned review attendances and the length of time patients have waited, when compared with equivalent data for previous months, allow users to gauge the demand for emergency care services.
- Emergency care waiting times by type of department is presented to all users to compare similar types of emergency care departments in Northern Ireland, i.e. Type 1, 2 or 3 departments. Explanatory note nine (Appendix 1) outlines in more detail the three separate categories of emergency care departments.
- Users should also take into consideration, recent changes in the provision of emergency care services at specific sites in Northern Ireland, when making comparisons with previous months. Such changes in provision of services are footnoted in the body of the bulletin as appropriate.

## Appendix 4: Additional Information

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

**Mr. Paul Stevenson**

Hospital Information Branch

Information & Analysis

Directorate

Department of Health, Social Services & Public Safety

Stormont Estate

Belfast, BT4 3SQ

☎ Tel: 028 905 22504

☎ Fax: 028 905 23288

✉ Email: [Paul.Stevenson@dhsspsni.gov.uk](mailto:Paul.Stevenson@dhsspsni.gov.uk)

**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](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats.htm)