

INFORMATION  
ANALYSIS  
DIRECTORATE



# Emergency Care Waiting Time Statistics for Northern Ireland (July - September 2019)



# Reader Information

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- Purpose:** This statistical release presents information on the time waited in emergency care departments (ED) in Northern Ireland. It reports on the performance against the DoH Ministerial target, including additional information on a number of clinical quality indicators set by the Department of Health (DoH).
- Guidance:** It is recommended that readers refer to the '**Emergency Care Waiting Time Statistics - Additional Guidance**' booklet, which details technical guidance, definitions and background information on the data used, including the security and confidentiality processes<sup>1</sup>. This booklet is updated for each release and can be found at the following link:  
<https://www.health-ni.gov.uk/sites/default/files/publications/health/hs-niwt-ecwt-guidance.pdf>
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Email: [sarah.brown@health-ni.gov.uk](mailto:sarah.brown@health-ni.gov.uk)
- Statistical Quality:** Information detailed in this release has been provided by HSC Trusts and was validated by Hospital Information Branch (HIB) prior to release. Information on: time to triage, age and time of day for attendances, GP referrals, emergency admissions, left before treatment complete, triage level, time to start of treatment, time waited for patients admitted and not admitted are **not** National Statistics, but have been included to provide users with a comprehensive view of emergency care activity and waits. Further information on data included in this release is available at the link below:  
<https://www.health-ni.gov.uk/sites/default/files/publications/health/hs-niwt-ecwt-guidance.pdf>
- Target Audience:** DoH, Chief Executives of HSC Board and Trusts in Northern Ireland, Health Care Professionals, Academics, HSC Stakeholders, Media & General Public.
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<sup>1</sup> Information on Security and Confidentiality Processes is detailed in the Technical Notes on page 3.

# Technical Notes

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## Data Collection

Information presented in this brief is based on a monthly patient-level download from the Regional Data Warehouse on the 8<sup>th</sup> of each month for all EDs. Data providers are supplied with technical guidance documents outlining the methodologies used in the collection, reporting, and validation of the information collected in this publication. These documents are available at the link below:

<https://www.health-ni.gov.uk/publications/emergency-care-activity-returns-and-guidance>

Currently there are two patient-level administrative systems used by HSC Trusts in Northern Ireland to record emergency care information;

- (i) The electronic Emergency Medicine System (e-EMS); and,
- (ii) SYMPHONY.

## A National Statistics Publication

National Statistics status means that official statistics meet the highest standards of trustworthiness, quality and public value.

All official statistics should comply with all aspects of the Code of Practice for Statistics. They are awarded National Statistics status following an assessment by the Authority's regulatory arm. The Authority considers whether the statistics meet the highest standards of Code compliance, including the value they add to public decisions and debate.

These statistics last underwent a full assessment against the Code of Practice in 2011:

[https://www.statisticsauthority.gov.uk/wp-content/uploads/2015/12/images-letterofconfirmationasnationalstatisticsassessmentreport15\\_tcm97-42663.pdf](https://www.statisticsauthority.gov.uk/wp-content/uploads/2015/12/images-letterofconfirmationasnationalstatisticsassessmentreport15_tcm97-42663.pdf)

Designation was awarded in March 2013: [https://www.statisticsauthority.gov.uk/wp-content/uploads/2015/12/images-assessmentreport153statisticsonhospitalwaitingtimesinnorthernirelan\\_tcm97-41176.pdf](https://www.statisticsauthority.gov.uk/wp-content/uploads/2015/12/images-assessmentreport153statisticsonhospitalwaitingtimesinnorthernirelan_tcm97-41176.pdf)

Since the assessment, we have continued to comply with the Code of Practice for Statistics. A list of those who received 24-hour pre-release access to this publication is available online with the current quarterly publication found here:

<https://www.health-ni.gov.uk/articles/emergency-care-waiting-times>

## **Waiting Time Information elsewhere in the United Kingdom (UK)**

When comparing emergency care statistics it is important to know the type of department. Emergency care information sometimes refers only to Type 1 departments, and is not comparable with data which refers to all EDs. Two key differences are as follows: (i) waiting times at Type 1 EDs are higher than at other ED Types; (ii) fewer patients are admitted to hospital from Type 2 or 3 EDs.

There are also a number of key differences in how emergency care waiting times are reported in each UK Jurisdiction, and we would ask readers to be cautious when making comparisons across the UK. In particular, readers should avoid making comparisons between Northern Ireland and England on the 12 hour measurement, as these are not equivalent measures. Additional information on comparing emergency care waiting times information for Northern Ireland and England is detailed on pages 10 – 12 of the ‘Additional Guidance’ document at the link below:

<https://www.health-ni.gov.uk/sites/default/files/publications/health/hs-niwts-ecwt-guidance.pdf>

DoH statisticians have also liaised with colleagues in England, Scotland and Wales to clarify differences between the emergency care waiting times reported for each administration and have produced a guidance document to provide readers with a clear understanding of these differences (link below).

<https://gss.civilservice.gov.uk/wp-content/uploads/2017/01/UK-Comparative-Waiting-Times-AE-final.xlsx>

## **Contextual Information**

Readers should be aware that contextual information about Northern Ireland and the health services provided is available to reference 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:

<https://www.health-ni.gov.uk/publications/contextual-information-using-hospital-statistics>

## **Security & Confidentiality Processes**

Information on (i) the security and (ii) the confidentiality processes used to produce these and all statistics produced by the DoH, are detailed on our website at the links below:

Official Statistics & User Engagement:

<https://www.health-ni.gov.uk/topics/doh-statistics-and-research/official-statistics-and-user-engagement>

Statistical Charter:

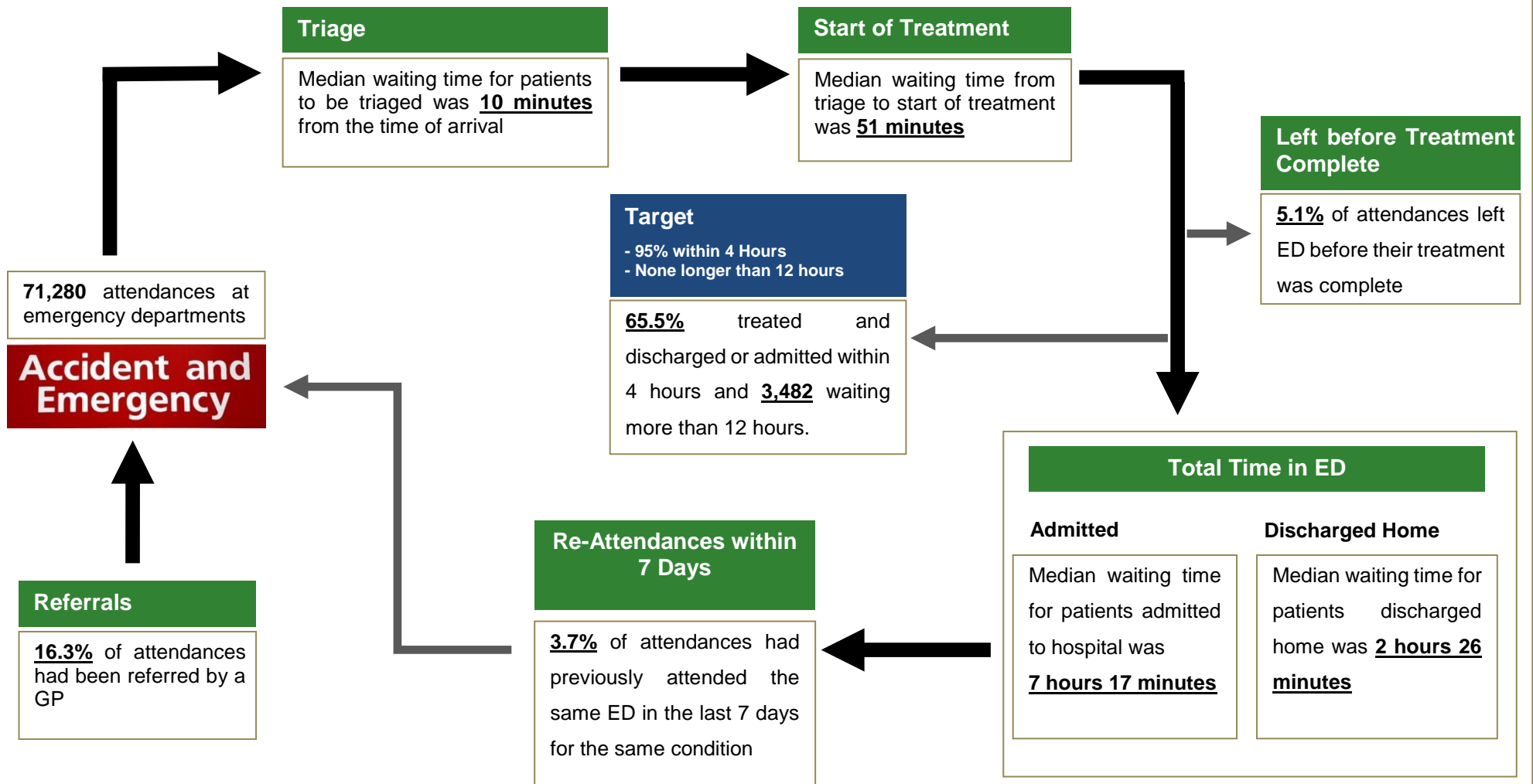
<https://www.health-ni.gov.uk/publications/doh-statistics-charter>

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# SUMMARY OF KEY FACTS (September 2019)



# Emergency Care Attendances: Who, Where, When, Why?

## *How Many Attend EDs?*

Table 1 presents information on the number of new and unplanned review attendances at emergency care departments (ED) and the number of emergency admissions to hospital in Northern Ireland during September 2019, compared with the same month last year.<sup>2, 3, 4</sup>

Information for the last three months (July, August and September) is detailed in Table 10 A on page 31.

**Table 1: Attendances at Emergency Care Departments and Emergency Admissions to Hospital (September 2018 - September 2019)**

Attendances	September 2018	September 2019	Difference	
New	62,812	67,269	4,457	7.1%
Unplanned Review	3,429	4,011	582	17.0%
<b>Total Attendances</b>	<b>66,241</b>	<b>71,280</b>	<b>5,039</b>	<b>7.6%</b>
Emergency Admissions	11,960	12,480	520	4.3%

Source: Regional Data Warehouse, Business Services Organisation

- Total attendances at EDs increased by 7.6% (5,039) when compared with September 2018, from 66,241 to 71,280 in September 2019 (Table 1, Table 10A).
- Between September 2018 and September 2019, unplanned review attendances increased by 17.0% (582) and new attendances increased by 7.1% (4,457) (Table 1, Table 10A).
- There were 214,685 attendances at EDs during the quarter ending 30<sup>th</sup> September 2019, 4.6% (9,443) more than during the same quarter in 2018 (205,242).
- The number of emergency admissions to hospital from EDs increased by 4.3% (520) between September 2018 (11,960) and September 2019 (12,480) (Table 1).

<sup>2</sup> Information for September 2018 and July, August and September 2019 is detailed in Appendix 4, Table 10A.

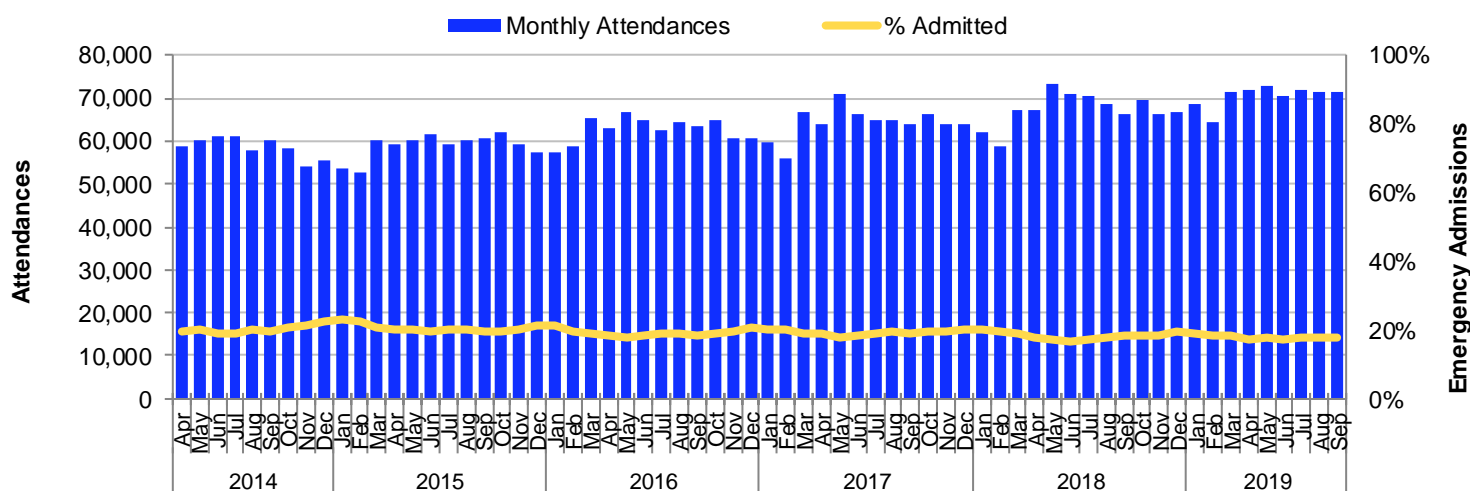
<sup>3</sup> Data on emergency admissions are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits. This is sourced from the ED Administrative Systems and will therefore differ slightly from the information included in the Hospital Statistics: Inpatients and Day Case Statistics which are sourced from the Hospital Inpatient System.

<sup>4</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

## Are More Patients Being Admitted To Hospital?

Figure 1 presents information on the number of new and unplanned review attendances at EDs and emergency admissions<sup>5</sup> to hospital each month, from April 2014.<sup>6</sup>

**Figure 1: Attendances at Emergency Care Departments and Emergency Admissions to Hospital (April 2014 – September 2019)**



- During each of the last five years, the percentage of ED attendances admitted to hospital was generally highest in December and January and lowest during May (Figure 1).
- The percentage of ED attendances admitted to hospital increase between November and January each year, then decline sharply from February each year (Figure 1).
- Attendances during each of the last three months have increased when compared with the same month of the previous year:
  - During July 2019, there were 72,027 attendances at EDs, 2.5% (1,697) more than July 2018 (70,330);
  - During August 2019, there were 71,378 attendances at EDs, 3.7% (2,707) more than August 2018 (68,671); and,
  - During September 2019, there were 71,280 attendances at EDs, 7.1% (5,039) more than September 2018 (66,241).

<sup>5</sup> Data on emergency admissions are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>6</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.



## Which ED Did People Attend?

Table 2 details a summary of the number of new and unplanned review attendances at each Type 1 ED during September 2019 and the same month last year. It also details the total number of attendances at Type 2 and 3 EDs during this period <sup>7,8</sup>.

**Table 2: Attendances at Emergency Care Departments (September 2018 - September 2019)**

Department	New Attendances		Unplanned Review Attendances		Total Attendances	
	Sep 2018	Sep 2019	Sep 2018	Sep 2019	Sep 2018	Sep 2019
Mater	4,000	4,198	166	136	4,166	4,334
Royal Victoria	7,756	8,130	263	338	8,019	8,468
RBHSC	2,768	3,141	208	252	2,976	3,393
Antrim Area	6,762	7,364	412	396	7,174	7,760
Causeway	3,504	3,939	290	318	3,794	4,257
Ulster	7,703	8,022	201	248	7,904	8,270
Craigavon Area	6,457	6,556	360	551	6,817	7,107
Daisy Hill	4,158	4,502	349	342	4,507	4,844
Altnagelvin Area	5,397	5,507	320	433	5,717	5,940
South West Acute	2,871	2,888	223	293	3,094	3,181
<b>Type 1</b>	<b>51,376</b>	<b>54,247</b>	<b>2,792</b>	<b>3,307</b>	<b>54,168</b>	<b>57,554</b>
<b>Type 2</b>	<b>4,939</b>	<b>5,619</b>	<b>237</b>	<b>240</b>	<b>5,176</b>	<b>5,859</b>
<b>Type 3</b>	<b>6,497</b>	<b>7,403</b>	<b>400</b>	<b>464</b>	<b>6,897</b>	<b>7,867</b>
<b>Northern Ireland</b>	<b>62,812</b>	<b>67,269</b>	<b>3,429</b>	<b>4,011</b>	<b>66,241</b>	<b>71,280</b>

Source: Regional Data Warehouse, Business Services Organisation

- Between September 2018 and September 2019, total attendances increased at Type 1, Type 2 and Type 3 departments (Table 2, Table 10A).
- The Royal Victoria (8,468) and Ulster (8,270) were the busiest EDs during September 2019 (Table 2, Table 10A).
- Of the ten Type 1 EDs, Antrim Area (586, 8.2%) and Causeway (463, 12.2%) reported the largest increases in attendances during September 2019 compared with September 2018 (Table 2, Table 10A).

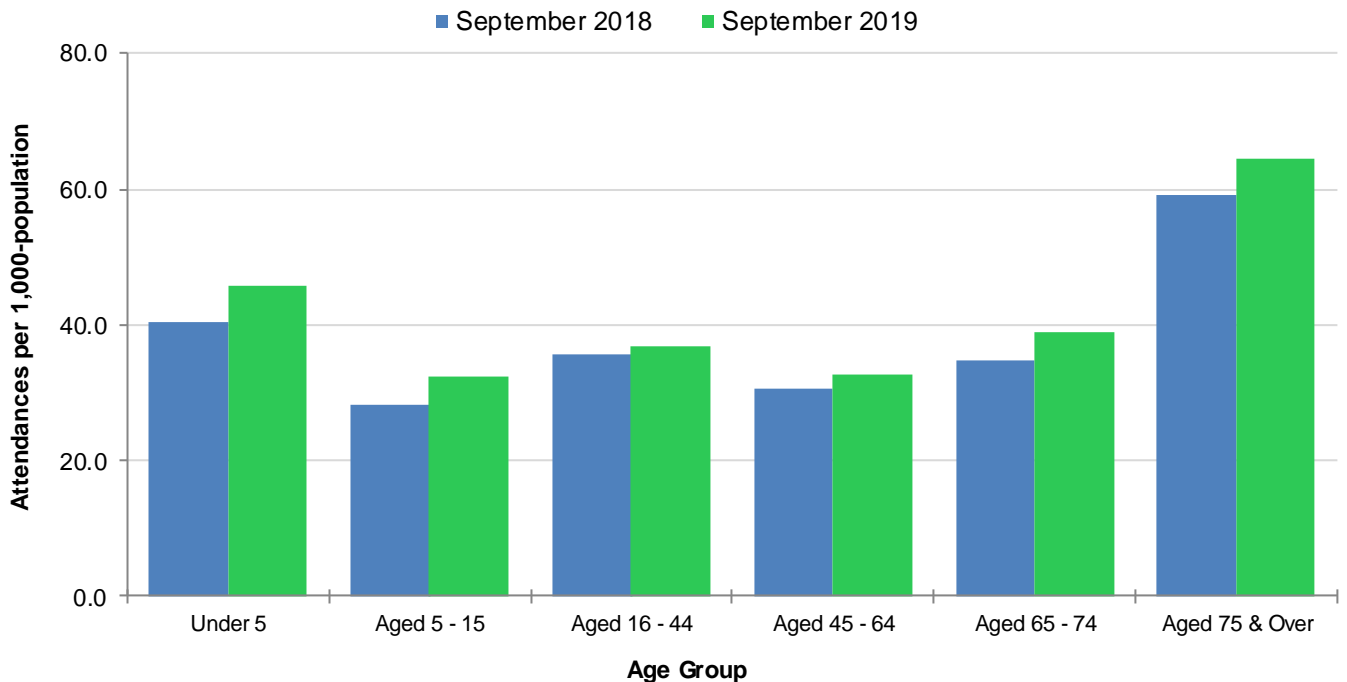
<sup>7</sup> Information for September 2018 and July, August and September 2019 is detailed in Appendix 4, Table 10A.

<sup>8</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

## Who Attends ED?

Figure 2 presents information on the number of attendances at EDs per 1,000-population, broken down by the age group of those attending<sup>9, 10, 11</sup>.

**Figure 2: Attendances at Emergency Care Departments per 1,000-population, by Age Group (September 2018 - September 2019)**<sup>12, 13</sup>



- During both September 2018 and September 2019, the highest number of attendances per 1,000-population was recorded for those Aged 75 & Over (59.1 and 64.4 respectively) (Figure 2, Table 10H).
- A high number of attendances per 1,000-population aged Under 5 was also recorded in both September 2018 and September 2019 (40.3 and 45.7 respectively) (Figure 2, Table 10H).
- The rate of attendances per 1,000-population increased for all age groups between September 2018 and September 2019. (Figure 2, Table 10H).
- The lowest number of attendances per 1,000-population was recorded in the Aged 5 - 15 age group during September 2019 (32.3) (Figure 2, Table 10H).

<sup>9</sup> Information for September 2018 and July, August and September 2019 is detailed in Appendix 4, Table 10H.

<sup>10</sup> Data on the age of those attending ED are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>11</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

<sup>12</sup> Excludes cases where the DOB could not be determined.

<sup>13</sup> Based on the NISRA 2018 mid-year population estimate which was published on 26<sup>th</sup> June 2019.

## What Triage Level Do Patients Present With?

The level which patients arriving at the ED were designated following triage by a health care professional is presented below. The five levels on the Manchester Triage Scale (MTS) below, act as a guide for the time within which a patient's treatment should commence.<sup>14, 15</sup>

Triage Level	Colour	MTS Priority	Waiting Time
Level 1	Red	Immediate	0 Minutes
Level 2	Orange	Very Urgent	10 Minutes
Level 3	Yellow	Urgent	60 Minutes
Level 4	Green	Standard	120 Minutes
Level 5	Blue	Non-Urgent	240 Minutes

In this report it is assumed that patients attending EDs triaged as Level 1 / 2 or 3 are in most urgent need of treatment, and those assessed as Level 4 / 5 are in less need of urgent treatment.

**Table 3: Percentage Triaged in each Triage Group (September 2018 - September 2019)<sup>16</sup>**

Department	Level 1 / 2		Level 3		Level 4 / 5	
	Sep 2018	Sep 2019	Sep 2018	Sep 2019	Sep 2018	Sep 2019
Mater	13.7%	14.7%	42.6%	46.2%	43.7%	39.1%
Royal Victoria	17.8%	19.2%	47.4%	47.5%	34.7%	33.3%
RBHSC	12.8%	13.3%	22.7%	22.7%	64.5%	64.0%
Antrim Area	18.9%	18.1%	50.4%	55.2%	30.7%	26.7%
Causeway	14.6%	17.9%	57.6%	49.9%	27.8%	32.3%
Ulster	19.5%	21.7%	49.0%	42.1%	31.5%	36.2%
Craigavon Area	29.3%	31.4%	48.6%	45.1%	22.1%	23.5%
Daisy Hill	33.0%	28.6%	50.5%	49.1%	16.5%	22.3%
Altnagelvin Area	30.3%	33.6%	31.0%	30.4%	38.7%	35.9%
South West Acute	17.1%	17.0%	50.1%	45.7%	32.8%	37.3%
<b>Type 1</b>	<b>21.5%</b>	<b>22.4%</b>	<b>45.7%</b>	<b>44.1%</b>	<b>32.8%</b>	<b>33.5%</b>
<b>Type 2</b>	<b>6.7%</b>	<b>7.3%</b>	<b>29.7%</b>	<b>27.8%</b>	<b>63.6%</b>	<b>64.9%</b>
<b>Type 3</b>	<b>0.3%</b>	<b>0.5%</b>	<b>5.5%</b>	<b>3.0%</b>	<b>94.2%</b>	<b>96.5%</b>
<b>Northern Ireland</b>	<b>18.0%</b>	<b>18.8%</b>	<b>40.1%</b>	<b>38.4%</b>	<b>41.8%</b>	<b>42.7%</b>

Source: Regional Data Warehouse, Business Services Organisation

- Almost two thirds (66.5%) of attendances at Type 1 departments in September 2019 were triaged as level 1 / 2 or 3, 0.7 percentage points less than September 2018 (67.2%) (Table 3, Table 10L).
- Almost a fifth (18.8%) of patients were triaged at level 1 / 2 in September 2019, higher than July 2019 (17.6%) and August 2019 (17.9%) (Table 3, Table 10L).
- During September 2019, almost one third (33.6%) of patients attending Altnagelvin Area were triaged at level 1 / 2, compared with 13.3% of those attending the RBHSC (Table 3, Table 10L).

<sup>14</sup> Data are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

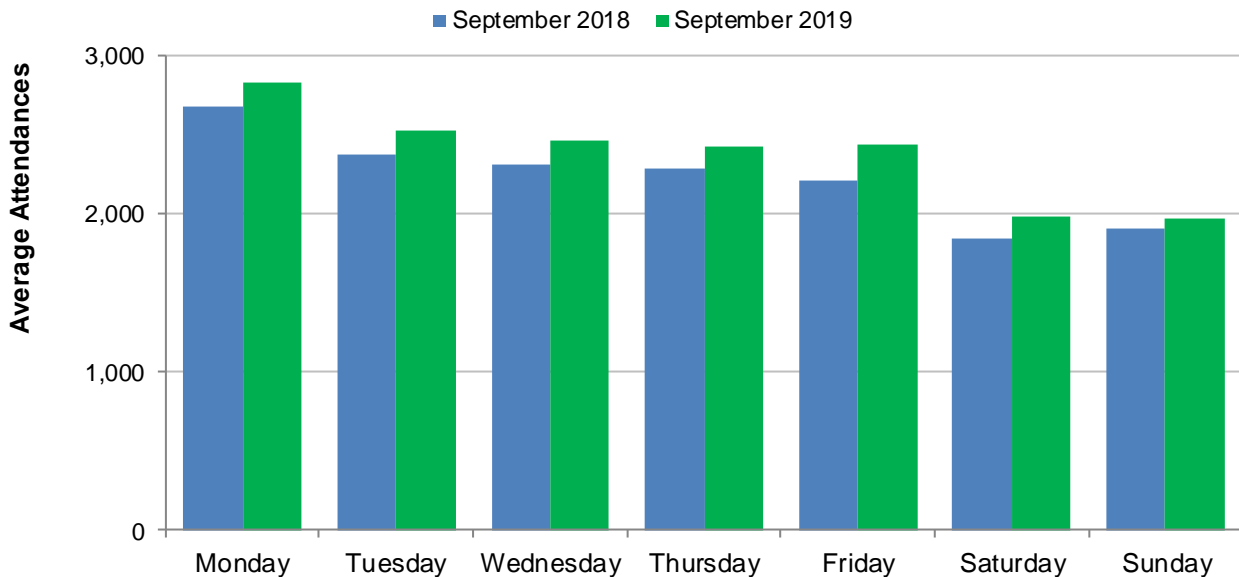
<sup>15</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

<sup>16</sup> Information for September 2018 and July, August and September 2019 is detailed in Appendix 4: Table 10L.

## When Do People Attend EDs?

Figure 3 presents information on the average number of new and unplanned review attendances at EDs by day of the week during September 2018, compared with September 2019.<sup>17, 18, 19</sup>

**Figure 3: Average Number of Attendances at Emergency Care Departments by Day of Week (September 2018 - September 2019)**



- Overall, Monday was the busiest day at EDs during both September 2018 and September 2019, with over 2,800 daily attendances on average each Monday during September 2019 (Figure 3, Table 10I).
- The largest increase in average daily attendances between September 2018 and September 2019 (228) was on a Friday (2,213 and 2,441 respectively) (Figure 3, Table 10I).
- The lowest average number of daily attendances was on a Saturday during September 2018 (1,848) and on a Sunday during September 2019 (1,971) (Figure 3, Table 10I).

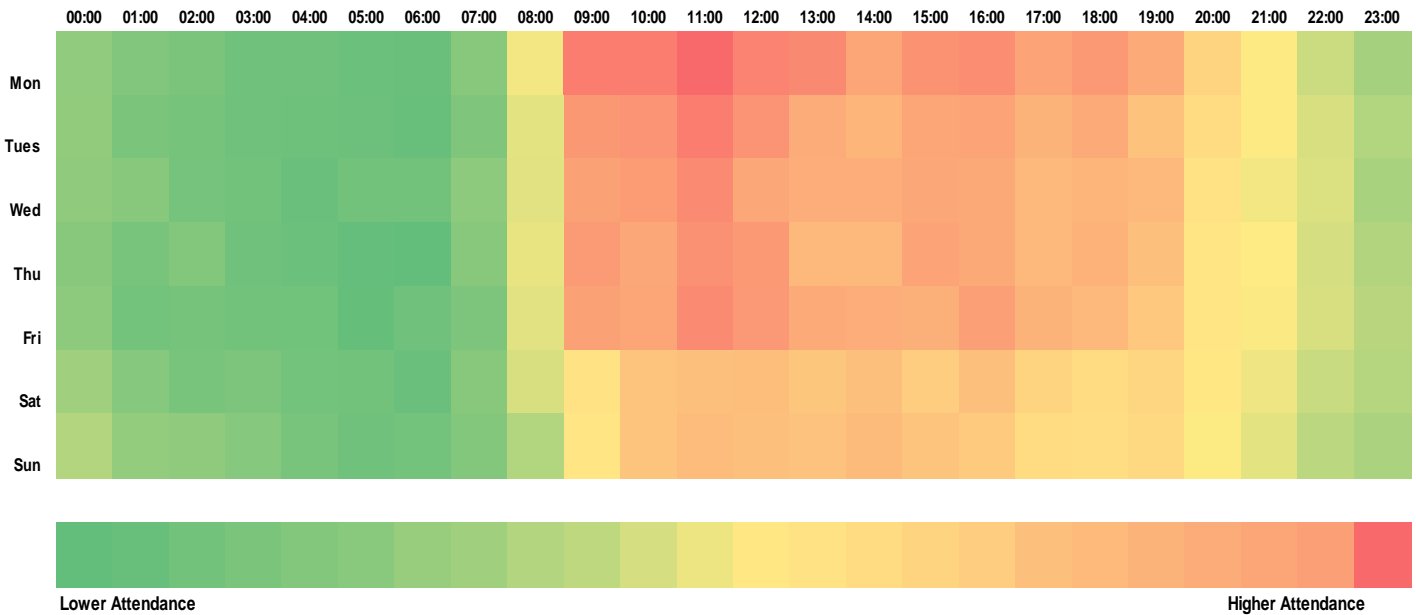
<sup>17</sup> Information for September 2018 and July, August and September 2019 is detailed in Appendix 4, Table 10I.

<sup>18</sup> Data on when patients attend ED are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>19</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

Figure 4 presents information on the number of new and unplanned review attendances during each day of the week and hour of the day in September 2019. The time shown refers to the hour of arrival, for example, 12:00 are those patients who arrived between 12:00pm (noon) and 12:59pm.<sup>20, 21</sup>

**Figure 4: Heat Map of Emergency Care Attendances by Day and Time (September 2019)**



- Monday was the busiest day of the week during September 2019, with the highest number of attendances arriving between 11:00am and 11:59am (Figure 4).
- Sunday was the least busy day during September 2019, with the highest number of attendances arriving between 11:00am and 11:59am (Figure 4).
- Overall, the busiest hour of the day during September 2019 was between 11:00am and 11:59am, whilst the least busy hour was 6:00am to 6:59am (Figure 4).

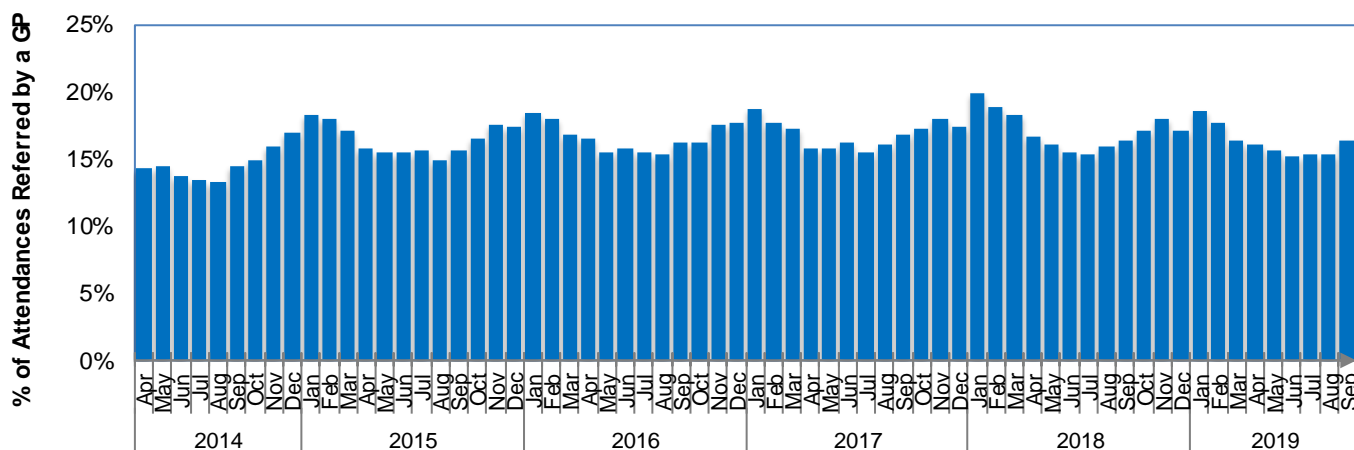
<sup>20</sup> Data on when patients attend ED are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>21</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

## How Many Attendances Were Referred by a GP?

Figure 5 presents information on the percentage of attendances at EDs that had been referred by a GP, from April 2014.<sup>22, 23, 24</sup>

**Figure 5: Percentage of Attendances at Emergency Care Departments Referred by a GP (April 2014 – September 2019)**



- In September 2019, almost one in six (16.3%) attendances at EDs had been referred by a GP, similar to September 2018 (16.3%) (Figure 5, Table 10C).
- Type 1 EDs reported the highest percentage of attendances referred by a GP (18.8%) during September 2019, 0.4 percentage points more than September 2018 (18.4%) (Table 10C).
- Almost a quarter of attendances at Antrim Area (24.1%) had been referred by a GP during September 2019, compared with 12.4% of attendances in Altnagelvin Area (Table 10C).
- The percentage of attendances referred by a GP is generally highest during January each year, and lowest during July and August (Figure 5).

<sup>22</sup> Information for September 2018 and July, August and September 2019 is detailed in Appendix 4, Table 10C.

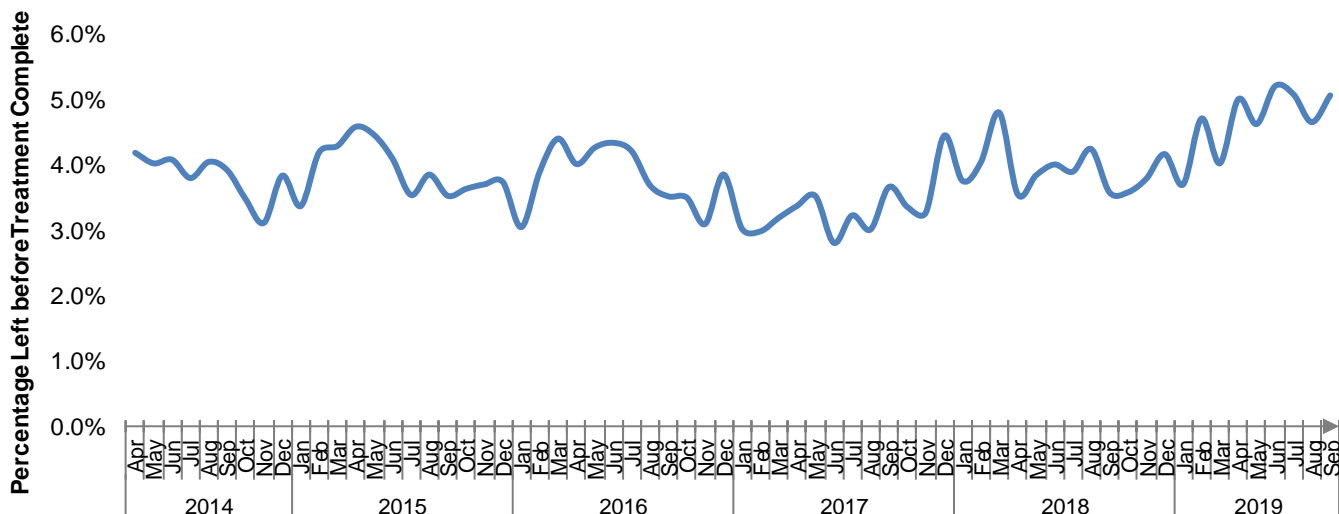
<sup>23</sup> Data on referrals to ED by GP's are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>24</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

## Do Patients Leave ED Before Their Treatment is Complete?

Figure 6 presents information on the proportion of attendances which left an ED before their treatment was complete, from April 2014.<sup>25, 26, 27</sup>

**Figure 6: Percentage of Attendances Leaving the Emergency Care Department before their Treatment was Complete (April 2014 – September 2019)**



- During September 2019, 5.1% of all ED attendances left before their treatment was complete, 1.5 percentage points more than September 2018 (3.6%) (Figure 6, Table 10C).
- Type 1 EDs reported the highest percentage (5.9%) of patients leaving before their treatment was complete in September 2019, with 2.3% reported for Type 2 EDs and 0.9% for Type 3 EDs (Table 10C).
- The Mater (11.9%) reported the highest percentage of attendances leaving an ED before their treatment was complete during September 2019, 2.9 percentage points higher than September 2018 (9.0%) (Table 10C).
- During the last 12 months, the percentage of attendances leaving ED before their treatment was complete was highest in June 2019 (5.2%) (Figure 6).

<sup>25</sup> Information for September 2018 and July, August and September 2019 is detailed in Appendix 4, Table 10C.

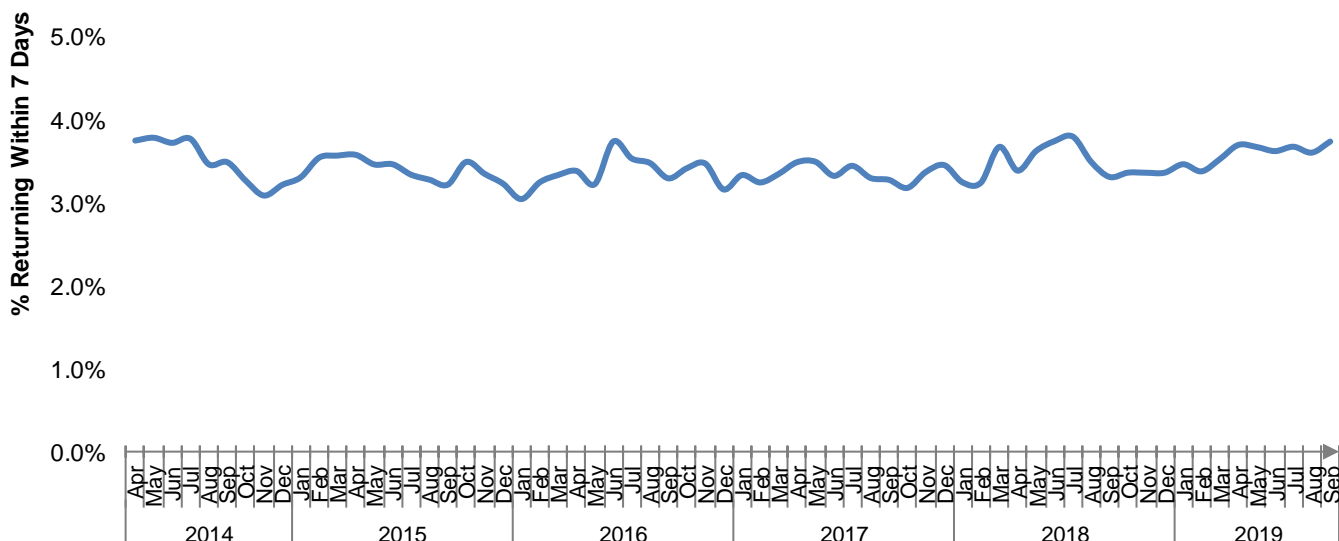
<sup>26</sup> Data on those leaving ED before their treatment was complete are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>27</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

## How Many Patients Re-attend the Same ED within a Week?

Figure 7 presents information on the percentage of unplanned review attendances at EDs within 7 days of their original attendance for the same condition, from April 2014.<sup>28, 29, 30</sup>

**Figure 7: Percentage of Re-attendances at Emergency Care Departments within 7 Days (April 2014 – September 2019)**



- The percentage of unplanned review attendances at EDs within 7 days of the original attendance for the same condition has changed slightly from April 2014, fluctuating between 3.0% and 3.8% of the total number of ED attendances (Figure 7).
- During September 2019, 3.7% of attendances had attended the same ED within 7 days of their original attendance, 0.4 percentage points less than September 2018 (3.3%) (Figure 7, Table 10C).
- South West Acute (6.8%) reported the highest percentage of unplanned review attendances within 7 days of the original attendance during September 2019 (Table 10C).

<sup>28</sup> Information for September 2018 and July, August and September 2019 is detailed in Appendix 4, Table 10C.

<sup>29</sup> Data on re-attendances within 7 days are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>30</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.



# How Long Do Patients Spend in ED?

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## *Emergency Care Waiting Times Targets*

The current DOH targets<sup>31</sup> on emergency care waiting times in Northern Ireland for 2019/20 state that:

*'95% of patients attending any Type 1, 2 or 3 emergency care department are either treated and discharged home, or admitted, within four hours of their arrival in the department; and no patient attending any emergency care department should wait longer than twelve hours.'*

*'By March 2020, at least 80% of patients to have commenced treatment, following triage, within 2 hours.'*

This section describes the various data available to measure the length of time patients spend in EDs in Northern Ireland. It outlines these different measures and how they relate to each other. The different measures of the time spent in an ED include:

- **The Four and Twelve Hour Waiting Times Target;**

*The most familiar mechanisms for monitoring ED performance are the 'four and twelve hour' measures, which report the percentage of patients treated and discharged or admitted from ED within 4 hours of their arrival and the number treated and discharged or admitted from ED within 12 hours of arrival.*

- **Time to Triage (Initial Assessment / Triage);**

*This refers to the time from arrival at ED to the start of a patient's triage by a medical professional for all attendances.*

- **Time to Start of Treatment; and,**

*The time taken to start a patient's treatment refers to the time from when a patient has been triaged until the start of their definitive treatment by a decision-making clinician.*

- **Total Time spent in ED for both Admitted and Non-Admitted Patients.**

*Similar to the four and twelve hour measurements, this information refers to the total length of time a patient spends in an ED from arrival to discharge or admission to hospital. However it presents the information separately for those discharged home and those admitted to hospital.*

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<sup>31</sup> Further breakdown of EDs can be found in Appendix 4: Table 10B & Table 10J.

## How are EDs Performing?

Table 4 details performance against the 4 and 12 hour components of the emergency care waiting times target in Northern Ireland. Waiting time is from arrival to discharge or admission to hospital.<sup>32</sup>

**Table 4: Performance against Emergency Care Waiting Times Target (September 2018 - September 2019)**

% Within 4 Hours	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Diff (Mar 2018 - Mar 2019)	
					No.	% pt
Type 1	66.0%	61.6%	61.7%	59.6%	-	-6.4%
Type 2	85.9%	79.7%	83.0%	78.7%	-	-7.2%
Type 3	99.9%	99.6%	99.5%	99.4%	-	-0.5%
<b>Total</b>	<b>71.1%</b>	<b>67.4%</b>	<b>67.8%</b>	<b>65.5%</b>	<b>-</b>	<b>-5.6%</b>
Over 12 Hours	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Diff (Mar 2018 - Mar 2019)	
					No.	%
Type 1	1,711	2,555	2,238	3,465	1,754	-
Type 2	3	7	12	17	14	-
Type 3	.	.	.	.	.	-
<b>Total</b>	<b>1,714</b>	<b>2,562</b>	<b>2,250</b>	<b>3,482</b>	<b>1,768</b>	<b>-</b>
New & Unplanned Review Attendances	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Diff (Mar 2018 - Mar 2019)	
					No.	%
Type 1	54,168	57,896	57,420	57,554	3,386	6.3%
Type 2	5,176	6,060	5,840	5,859	683	13.2%
Type 3	6,897	8,071	8,118	7,867	970	14.1%
<b>Total</b>	<b>66,241</b>	<b>72,027</b>	<b>71,378</b>	<b>71,280</b>	<b>5,039</b>	<b>7.6%</b>

Source: Regional Data Warehouse, Business Services Organisation

- Almost two thirds (65.5%) of attendances in September 2019 were discharged or admitted within 4 hours, 5.6 percentage points less than September 2018 (71.1%) (Table 10B & 10J).
- Almost six in ten (59.6%) attendances at Type 1 EDs in September 2019 waited less than 4 hours, compared with 78.7% at Type 2 EDs and 99.4% at Type 3 EDs (Table 4, Table 10B & Table 10J).
- Between September 2018 and September 2019, the number waiting over 12 hours increased from 1,714 to 3,482, accounting for 4.9% of attendances in September 2019 (Table 4, Table 10B & 10J).
- During this period, EDs experienced a 7.6% increase in attendances (66,241 to 71,280), whilst 4 hour performance decreased by 5.6 percentage points (Table 4, Table 10B & Table 10J).
- During the quarter ending 30<sup>th</sup> September 2019, two thirds (66.9%) of patients attending EDs waited less than 4 hours, 4.4 percentage points less than the same quarter in 2018 (71.3%).
- Between July 2019 and September 2019, the percentage waiting less than 4 hours was highest in August 2019 (67.8%) and lowest in September 2019 (65.5%), whilst the number waiting over 12 hours was highest in September 2019 (3,482) and lowest in August 2019 (2,250) (Table 4).

<sup>32</sup> Information on the comparability of this information with other UK jurisdictions is detailed on pages 6 – 8 of the additional guidance document found at the following link: <https://www.health-ni.gov.uk/sites/default/files/publications/health/hs-ni-wts-ecwt-guidance.pdf>

Table 5 details the performance for both the four and twelve hour components of the emergency care waiting times target at each Type 1 ED in September 2019 compared with the same month last year. Information has also been included on the overall performance at Type 2 and 3 EDs during this period.<sup>33, 34</sup>

**Table 5: Performance against the 4 and 12 Hour Components of the Emergency Care Waiting Times Target at Type 1 EDs (September 2018 - September 2019)**

Department	4 Hour Performance		12 Hour Performance		Total Attendances	
	Sep 2018	Sep 2019	Sep 2018	Sep 2019	Sep 2018	Sep 2019
Mater	70.4%	57.7%	58	183	4,166	4,334
Royal Victoria	60.3%	48.5%	202	485	8,019	8,468
RBHSC	84.4%	83.0%	-	-	2,976	3,393
Antrim Area	64.5%	64.5%	410	348	7,174	7,760
Causeway	67.3%	70.4%	152	151	3,794	4,257
Ulster	64.3%	59.8%	394	757	7,904	8,270
Craigavon Area	57.4%	49.2%	243	769	6,817	7,107
Daisy Hill	69.5%	66.0%	67	227	4,507	4,844
Altnagelvin Area	73.4%	53.9%	77	458	5,717	5,940
South West Acute	63.8%	63.7%	108	87	3,094	3,181
<b>Type 1</b>	<b>66.0%</b>	<b>59.6%</b>	<b>1,711</b>	<b>3,465</b>	<b>54,168</b>	<b>57,554</b>
<b>Type 2</b>	<b>85.9%</b>	<b>78.7%</b>	<b>3</b>	<b>17</b>	<b>5,176</b>	<b>5,859</b>
<b>Type 3</b>	<b>99.9%</b>	<b>99.4%</b>	<b>-</b>	<b>-</b>	<b>6,897</b>	<b>7,867</b>
<b>Northern Ireland</b>	<b>71.1%</b>	<b>65.5%</b>	<b>1,714</b>	<b>3,482</b>	<b>66,241</b>	<b>71,280</b>

Source: Regional Data Warehouse, Business Services Organisation

- During September 2019, the RBHSC (83.0%) reported the highest performance of any Type 1 ED against the 4 hour target, whilst the Royal Victoria (48.5%) reported the lowest (Table 5, Table 10B).
- The RBHSC was the only Type 1 ED to achieve the 12-hour target during September 2019 (Table 5, Table 10B).
- Craigavon Area (769) and the Ulster (757) reported the highest numbers of patients waiting over 12 hours during September 2019 (Table 5, Table 10B).
- Between September 2018 and September 2019, performance against the 12 hour target declined at all Type 1 EDs with the exception of the RBHSC, Antrim Area, South West Acute and Causeway (Table 5, Table 10B),.

<sup>33</sup> Information for September 2018 and July, August and September 2019 is detailed in Appendix 4: Table 10B & Table 10I.

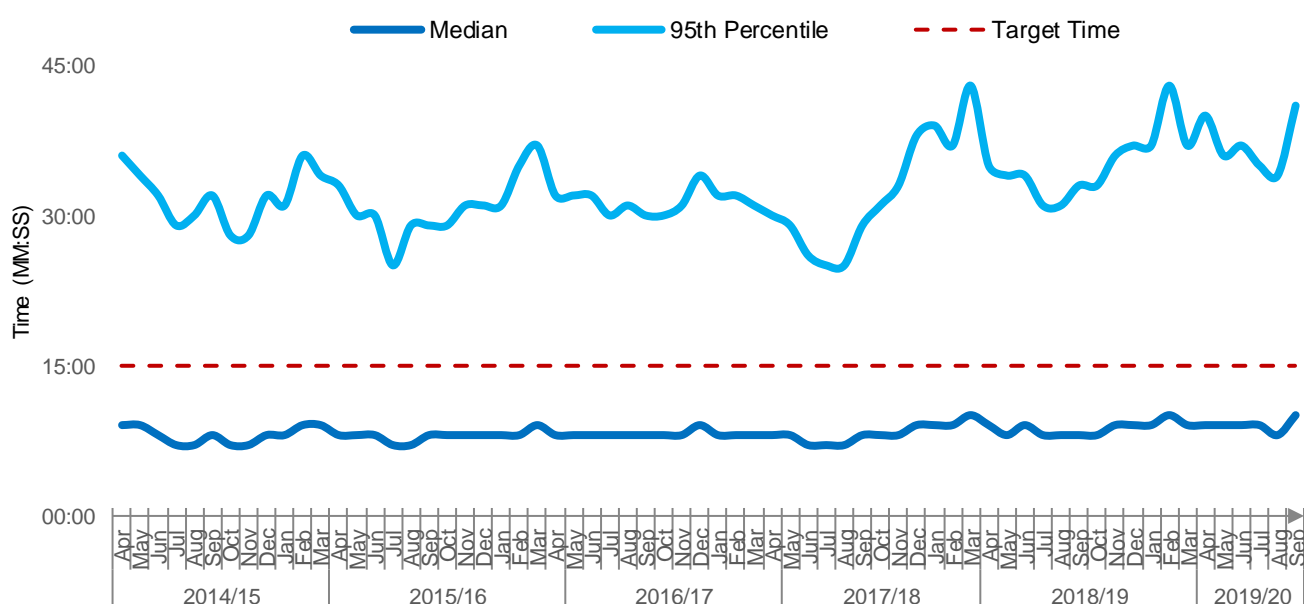
<sup>34</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

## How Long Did Patients Wait to be Triage?

Figure 9 details the length of time patients waited from the time of their arrival at an ED to their triage (initial assessment) by a medical practitioner, which includes a brief history, pain assessment and early warning scores, for all patients.<sup>35, 36</sup>

Two aspects of the time waited are reported, including (i) the 95<sup>th</sup> percentile which is the time below which 95% of patients were triaged each month, and (ii) the median waiting time, which is the time below which 50% of patients were triaged.

**Figure 9: Time from Arrival to Triage (April 2014 - September 2019)<sup>37</sup>**



- During September 2019, the median waiting time from arrival to triage was 10 minutes, 2 minutes more than the time taken in September 2018 (8 minutes) (Figure 9, Table 10D).
- 95 per cent of patients were triaged within 41 minutes of their arrival at an ED in September 2019, 8 minutes more than the time taken in September 2018 (33 minutes) (Figure 9, Table 10D).
- Almost seven in ten (69.5%) attendances were triaged within 15 minutes of their arrival at an ED during September 2019, 6.6 percentage points less than September 2018 (76.1%).
- During each of the last 3 months, the median waiting time from arrival to triage was longest in September 2019 (10 minutes) and shortest in August 2019 (8 minutes), and the time taken to triage 95 percent of patients was also longest during September 2019 (41 minutes) and shortest in August 2019 (34 minutes) (Table 10D).

<sup>35</sup> Data on time to triage are not National Statistics, and are included to provide users with a comprehensive view of ED activity and waits.

<sup>36</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

<sup>37</sup> Additional information on time to triage is detailed in Appendix 4: Table 10D.

Table 6 presents information on the percentage of patients commencing treatment, following triage, within 2 hours at Type 1 EDs in September 2019, compared with the same month last year. Information has also been included on the overall performance at Type 2 and 3 EDs during this period.<sup>38</sup>

**Table 6: Performance against the Target to Commence Treating Patients within 2 Hours of them being Triaged (September 2018 - September 2019)**

Department	Sep 2018	Jul 2019	Aug 2019	Sep 2019
Mater	72.2%	73.5%	69.8%	64.7%
Royal Victoria	70.0%	62.3%	63.7%	59.9%
RBHSC	89.5%	93.2%	93.7%	87.7%
Antrim Area	70.2%	64.4%	62.9%	69.4%
Causeway	85.4%	91.4%	83.6%	88.5%
Ulster	84.3%	77.0%	81.0%	81.4%
Craigavon Area	63.5%	57.4%	62.0%	56.4%
Daisy Hill	78.4%	69.3%	75.9%	70.0%
Altnagelvin Area	91.5%	73.2%	68.8%	65.8%
South West Acute	86.0%	84.5%	86.6%	80.1%
<b>Type 1</b>	<b>77.8%</b>	<b>72.0%</b>	<b>72.7%</b>	<b>71.0%</b>
<b>Type 2</b>	<b>96.9%</b>	<b>91.4%</b>	<b>93.9%</b>	<b>89.5%</b>
<b>Type 3</b>	<b>99.9%</b>	<b>98.8%</b>	<b>98.3%</b>	<b>98.7%</b>
<b>Northern Ireland</b>	<b>81.5%</b>	<b>76.7%</b>	<b>77.4%</b>	<b>75.7%</b>

Source: Regional Data Warehouse, Business Services Organisation

- Over three quarters (75.7%) of patients attending EDs commenced their treatment within 2 hours of being triaged, 5.8 percentage points lower than September 2018 (81.5%) (Table 6, Table 10K).
- During September 2019, over seven in ten (71.0%) patients commenced their treatment within 2 hours of being triaged at Type 1 EDs, compared with 89.5% at Type 2 EDs and 98.7% at Type 3 EDs (Table 6, Table 10K).
- Four Type 1 EDs (Causeway, RBHSC, the Ulster, and South West Acute) achieved the 80% target in September 2019 (Table 6, Table 10K).
- During September 2019, Causeway (88.5%) reported the highest percentage commencing treatment within 2 hours, whilst Craigavon Area (56.4%) reported the lowest (Table 6, Table 10K).
- Between July and September 2019, the highest percentage of patients commencing treatment within 2 hours was in August 2019 (77.4%) whilst the lowest was in September 2019 (75.7%), (Table 4).

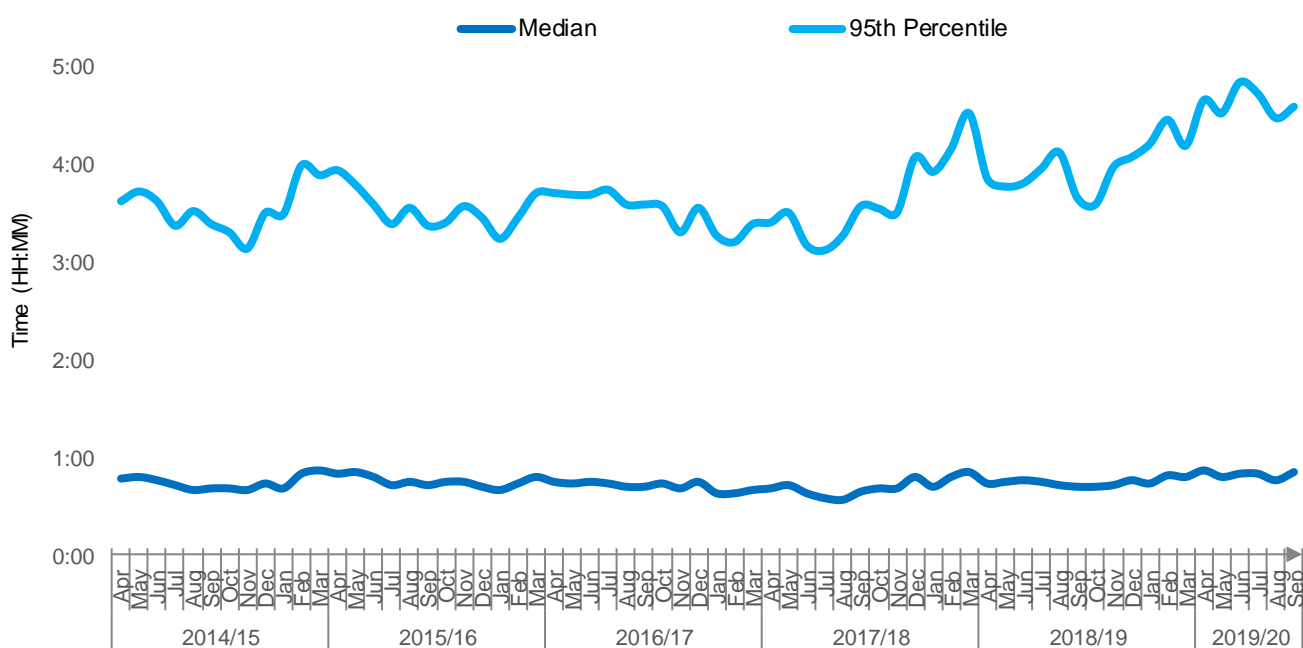
<sup>38</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

## How Long Did Patients Wait for Their Treatment to Start?

Figure 10 shows information on the length of time patients waited for their treatment to start following triage (initial assessment) by a medical practitioner. The start of treatment refers to the beginning of a definitive treatment by a decision-making clinician.<sup>39, 40</sup>

Two aspects of the time waited are reported, including (i) the 95<sup>th</sup> percentile which is the time below which 95% of patients commenced treatment each month, and (ii) the median waiting time, which is the time below which 50% of patients commenced treatment.

**Figure 10: Time from Triage to Start of Treatment (April 2014 – September 2019)**<sup>41, 42</sup>



- The median waiting time from triage to start of treatment in September 2019 was 51 minutes, 9 minutes more than the time taken in September 2018 (42 minutes) (Figure 10, Table 10E).
- During September 2019, 95 percent of patients commenced treatment within 4 hours 35 minutes of being triaged, 56 minutes more than September 2018 (3 hours 39 minutes) (Figure 10, Table 10E).
- During each of the last 3 months, the median waiting time to start of treatment was longest in September 2019 (51 minutes) and shortest in August 2019 (46 minutes), whilst the time taken to start treatment for 95 percent of patients was longest during July 2019 (4 hours 43 minutes) and shortest in August 2019 (4 hours 28 minutes) (Table 10D).

<sup>39</sup> Data on start of treatment are not National Statistics, and are included to provide users with a comprehensive view of ED activity and waits.

<sup>40</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

<sup>41</sup> Additional information on time to triage is detailed in Appendix 4: Table 10E.

<sup>42</sup> Information on start of treatment for Type 3 EDs does not include data for Omagh UCC after 6<sup>th</sup> September 2018.

## What is the Waiting Time for Treatment to Start at Type 1 EDs?

Table 7 details the median and 95<sup>th</sup> percentile of the length of time waited from triage to the start of treatment at Type 1 EDs during September 2019 compared with September 2018. <sup>43, 44</sup>

**Table 7: Time from Triage to Start of Treatment (September 2018 and September 2019)** <sup>45, 46</sup>

Department	Median		95th Percentile	
	September 2018	September 2019	September 2018	September 2019
Mater	1:00	1:14	4:07	5:32
Royal Victoria	1:00	1:20	4:09	6:46
RBHSC	0:42	0:44	2:30	2:48
Antrim Area	1:11	1:18	4:33	4:29
Causeway	0:45	0:42	3:18	2:38
Ulster	0:47	0:48	3:14	3:41
Craigavon Area	1:27	1:42	5:13	6:04
Daisy Hill	1:01	1:07	3:39	4:12
Altnagelvin Area	0:31	1:19	2:25	4:40
South West Acute	0:41	0:43	3:05	3:48
<b>Type 1</b>	<b>0:53</b>	<b>1:05</b>	<b>3:54</b>	<b>4:55</b>
<b>Type 2</b>	<b>0:25</b>	<b>0:38</b>	<b>1:44</b>	<b>2:38</b>
<b>Type 3</b>	<b>0:05</b>	<b>0:06</b>	<b>0:40</b>	<b>1:00</b>
<b>Northern Ireland</b>	<b>0:42</b>	<b>0:51</b>	<b>3:39</b>	<b>4:35</b>

Source: Regional Data Warehouse, Business Services Organisation

- The median time waited at Type 1 EDs from triage to start of treatment by a medical professional was 1 hour 5 minutes in September 2019, 12 minutes more than September 2018 (53 minutes) (Table 7, Table 10E).
- Craigavon Area (1 hour 42 minutes) reported the longest median waiting time from triage to start of treatment during September 2019, whilst Causeway (42 minutes) reported the shortest median waiting time (Table 7, Table 10E).
- The Royal Victoria reported the longest waiting time between triage and start of treatment, with 95 percent of attendances commencing treatment within 6 hours 46 minutes of being triaged; 2 hours 37 minutes more than the time taken in September 2018 (4 hours 9 minutes) (Table 7, Table 10E).
- Causeway reported the shortest time to start of treatment during September 2019, with 95 per cent of attendances commencing treatment within 2 hours 38 minutes of being triaged, 40 minutes less than the time taken in September 2018 (3 hours 18 minutes) (Table 7, Table 10E).

<sup>43</sup> Data on time to start of treatment are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>44</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

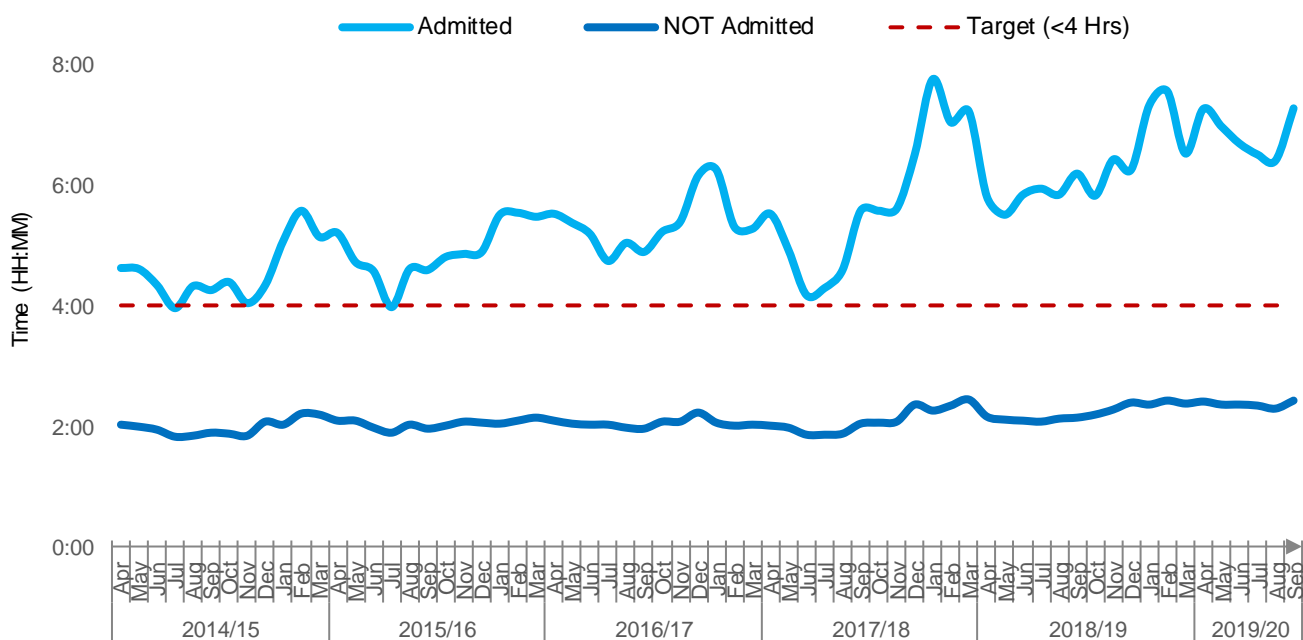
<sup>45</sup> Information for September 2018 and July, August and September 2019 is detailed in Appendix 4, Table 10E.

<sup>46</sup> Information on start of treatment for Type 3 EDs does not include data for Omagh UCC after 6<sup>th</sup> September 2018.

## Do Patients Admitted Spend Longer in ED than Those Discharged Home?

Information detailed in Tables 8 and 9 indicates that patients admitted to hospital generally spend a longer period of time in an ED than those discharged home.<sup>47, 48</sup>

**Figure 11: Median Time Spent in an Emergency Care Department for those (i) Admitted to Hospital and (ii) Discharged Home (April 2014 to September 2019)<sup>49</sup>.**



- During September 2019, the median time patients admitted to hospital spent in ED was 7 hours 17 minutes, compared to 2 hours 26 minutes for those discharged home (Figure 11, Table 10F & 10G).
- During September 2019, 95 per cent of patients admitted to hospital waited up to 23 hours 9 minutes in ED, over three times longer than the time waited by 95 per cent of those discharged home (7 hours 29 minutes) (Table 8 & 9).
- During the last 3 months, the median time patients admitted spent in ED was longest in September 2019 (7 hours 17 minutes) and shortest in August 2019 (6 hours 25 minutes) (Table 10F).
- During this period, the median time waited by patients discharged home was longest in September 2019 (2 hours 26 minutes) and shortest in August 2019 (2 hours 18 minutes) (Table 10G).
- During this period, the longest time waited by 95 percent of patients admitted was in September 2019 (23 hours 9 minutes) and shortest in August 2019 (19 hours 45 minutes) (Table 10F).
- During this period, the longest time waited by 95 percent of patients discharged home was in July 2019 (7 hours 30 minutes) and shortest in August 2019 (7 hours 19 minutes) (Table 10G).

<sup>47</sup> Data are not National Statistics, and are included to provide users with a comprehensive view of ED activity and waits.

<sup>48</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

<sup>49</sup> Further breakdown of EDs can be found in Appendix 4, Table 10F and 10G.



## How Long did Patients Admitted to Hospital Spend in an ED?

Table 8 details the median and 95<sup>th</sup> percentile length of time spent in an ED from arrival to leaving the ED for those who **were admitted** to hospital.<sup>50</sup>

**Table 8: Total Time Spent in an Emergency Care Department for those Admitted to Hospital (September 2018 - September 2019)**<sup>51, 52</sup>

Department	Median		95th Percentile	
	September 2018	September 2019	September 2018	September 2019
Mater	5:16	7:01	14:29	20:26
Royal Victoria	6:55	8:19	14:07	18:14
RBHSC	3:39	3:45	7:00	7:40
Antrim Area	6:36	6:13	22:19	20:52
Causeway	6:55	7:03	20:48	19:38
Ulster	6:32	8:20	19:10	26:12
Craigavon Area	6:45	9:33	18:34	26:28
Daisy Hill	5:47	7:44	14:34	22:40
Altnagelvin Area	6:06	8:40	12:22	24:00
South West Acute	6:03	5:01	16:06	15:41
<b>Type 1</b>	<b>6:19</b>	<b>7:25</b>	<b>17:46</b>	<b>23:16</b>
<b>Type 2</b>	<b>3:56</b>	<b>4:44</b>	<b>8:14</b>	<b>10:01</b>
<b>Type 3</b>	<b>2:11</b>	<b>3:20</b>	<b>4:02</b>	<b>5:37</b>
<b>Northern Ireland</b>	<b>6:12</b>	<b>7:17</b>	<b>17:32</b>	<b>23:09</b>

Source: Regional Data Warehouse, Business Services Organisation

- The median time patients who were admitted to hospital spent in a Type 1 ED was 7 hours 25 minutes in September 2019, 1 hour 6 minutes longer than the same month last year (6 hours 19 minutes) (Table 8, Table 10F).
- During September 2019 Craigavon Area reported the longest median waiting times from arrival to admission (9 hours 33 minutes), whilst the RBHSC reported the shortest time (3 hours 45 minutes) (Table 8).
- 95 per cent of patients were admitted to hospital within 23 hours 16 minutes at Type 1 EDs in September 2019, 5 hours 30 minutes longer than the time taken in September 2018 (17 hours 46 minutes) (Table 8).
- Between September 2018 and September 2019, Altnagelvin reported the largest increase (from 12 hours 22 minutes to 24 hours) in the time taken for 95% of patients to be admitted to hospital (Table 8, Table 10F).

<sup>50</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

<sup>51</sup> Information for September 2018 and July, August and September 2019 is detailed in Appendix 4, Table 10F.

<sup>52</sup> Readers should note that Type 3 data on time spent in EDs for patients admitted is provided by Omagh only. No other Type 3 ED produces these statistics.

## How Long Did Patients Discharged Home Spend in an ED?

Table 9 details the median and 95<sup>th</sup> percentile length of time spent in an ED from arrival to leaving the ED for those who **were discharged home**.<sup>53</sup>

**Table 9: Total Time Spent in Emergency Care Departments for those Discharged Home (September 2018 - September 2019)**<sup>54</sup>,

Department	Median		95th Percentile	
	September 2018	September 2019	September 2018	September 2019
Mater	2:32	3:08	6:41	8:26
Royal Victoria	3:04	3:29	7:48	9:54
RBHSC	2:03	2:11	5:04	5:10
Antrim Area	2:37	2:40	6:58	6:52
Causeway	2:27	2:24	7:45	6:47
Ulster	2:28	2:41	6:25	7:06
Craigavon Area	3:00	3:24	7:19	8:41
Daisy Hill	2:23	2:35	6:22	6:25
Altnagelvin Area	2:19	3:28	5:33	8:02
South West Acute	2:47	2:50	7:03	7:25
<b>Type 1</b>	<b>2:35</b>	<b>2:54</b>	<b>6:50</b>	<b>8:00</b>
<b>Type 2</b>	<b>1:39</b>	<b>2:07</b>	<b>5:10</b>	<b>6:01</b>
<b>Type 3</b>	<b>0:33</b>	<b>0:37</b>	<b>1:37</b>	<b>1:57</b>
<b>Northern Ireland</b>	<b>2:09</b>	<b>2:26</b>	<b>6:26</b>	<b>7:29</b>

Source: Regional Data Warehouse, Business Services Organisation

- The median time patients who were discharged home (not admitted) spent in a Type 1 ED was 2 hours 54 minutes in September 2019, 19 minutes longer than the time taken during the same month last year (2 hour 35 minutes) (Table 9, Table 10G).
- In September 2019, 95 per cent of attendances at Type 1 EDs were discharged home within 8 hours of their arrival, 1 hour 10 minutes longer than the time taken in September 2018 (6 hours 50 minutes) (Table 9, Table 10G).

<sup>53</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

<sup>54</sup> Information for September 2018 and July, August and September 2019 is detailed in Appendix 4, Table 10G.

# Appendices

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## *Appendix 1: About Hospital Information Branch (HIB)*

Hospital Information Branch within Information Analysis Directorate (IAD) 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 systems and pre-defined EXCEL survey return templates.



The Head of Branch is Principal Statistician, Ms. Siobhán Morgan. The Branch aims to present information in a meaningful way and provide advice on its use to customers in the HSC Committee, Professional Advisory Groups, policy branches within the DoH, 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, Cancer and Emergency Care).

A detailed list of these publications is available to view or download at the following link:

**Website:** <https://www.health-ni.gov.uk/topics/doh-statistics-and-research>

## Appendix 2: Emergency Care Departments and Opening Hours

There are three separate categories of emergency care facility included in this publication:

**Type 1** departments are defined as those with 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** departments are 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** departments are minor injury units (MIU) 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.

### Emergency Care Departments in Northern Ireland



## Current Categorisation of Emergency Care Departments <sup>55</sup>

HSC Trust	Type 1 (24-hour assess)	Type 2 (Limited opening hours)	Type 3 (Minor Injuries Unit, MIU)
<b>Belfast</b>	Belfast City (Closed)		
	Mater	RVH (Eye Casualty) <sup>56</sup> (9-5pm Mon-Fri) (8.30-1pm Sat)	
	Royal Victoria		
	Royal Belfast Hospital for Sick Children (RBHSC)		
<b>Northern</b>	Antrim Area		Whiteabbey <sup>57</sup> (Closed)
	Causeway		Mid Ulster (9-5pm Mon-Fri)
<b>South Eastern</b>	Ulster	Lagan Valley (8-8pm Mon-Fri)	Ards MIU (9-5pm Mon-Fri)
		Downe <sup>58</sup> (8-8pm Mon-Fri) (9-5pm (MIU only) Sat-Sun)	Bangor MIU (9-5pm Mon-Fri)
<b>Southern</b>	Craigavon Area		South Tyrone (9-9pm Mon-Fri) (10-6pm Sat-Sun)
	Daisy Hill		Armagh Community <sup>59</sup> (Closed)
<b>Western</b>	Altnagelvin Area		Tyrone County (Closed)
	South West Acute		Omagh <sup>60</sup> (24-hour)

<sup>55</sup> Opening Hours are as of June 2017.

<sup>56</sup> RVH (RAES) refers to the Regional Acute Eye Services at the Royal Victoria Hospital.

<sup>57</sup> Temporarily closed on 1<sup>st</sup> December 2014.

<sup>58</sup> Currently operates as a Type 3 on Saturday and Sunday, between 9am and 5pm.

<sup>59</sup> Temporarily closed on 17<sup>th</sup> November 2014.

<sup>60</sup> Tyrone County closed on 20<sup>th</sup> June 2017 and all emergency services were transferred to the new Omagh Hospital and Primary Care Complex on that date.

## Appendix 3: General Guidance on using the Data

### Guidance on using the Data

The data contained in this publication details a monthly analysis of emergency care waiting times in Northern Ireland. It is recommended that readers refer to the '*Emergency Care Waiting Time Statistics - Additional Guidance*' booklet, which details technical guidance, definitions and background information on the data used, including the security and confidentiality processes. This booklet is updated for each release and can be found at the following link:

<https://www.health-ni.gov.uk/sites/default/files/publications/health/hs-niwts-ecwt-guidance.pdf>

### Description of Data

Data on the number of new and unplanned review attendances at EDs in Northern Ireland by the length of time waited. New and unplanned review attendances at EDs are used to describe unplanned activity at EDs, 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 and refers to the time waited from arriving at the ED until the time the patient is treated and discharged, or admitted to hospital.

- Number of new and unplanned review attendances at EDs – this is the number of new and unplanned review attendances at EDs during each calendar month. **It does not include planned review attendances.**
- The length of time patients wait refers to the time between entering the ED and being logged in at reception, until leaving the ED (treated and discharged, or admitted to hospital). 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 ED.
- 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 allow users to compare similar types of EDs in Northern Ireland, i.e. Type 1, 2 or 3 departments.
- Users should take into consideration, changes in the provision of emergency care services at specific sites in Northern Ireland when making comparisons with previous months. Such changes in the provision of services can be found in the document '*Emergency Care Waiting Time Statistics - Additional Guidance*' document at the following link:

**Website:** <https://www.health-ni.gov.uk/articles/emergency-care-waiting-times>

## Appendix 4: Additional Tables

**Table 10A: New & Unplanned Review Attendances at Emergency Care Departments <sup>61</sup>**

Department	New Attendances				Unplanned Reviews				Total Attendances			
	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep-18	Jul-19	Aug-19	Sep-19	Sep-18	Jul-19	Aug-19	Sep-19
Mater	4,000	4,240	4,263	4,198	166	160	168	136	4,166	4,400	4,431	4,334
Royal Victoria	7,756	7,983	8,018	8,130	263	372	293	338	8,019	8,355	8,311	8,468
RBHSC	2,768	2,781	2,633	3,141	208	209	186	252	2,976	2,990	2,819	3,393
Antrim Area	6,762	7,235	7,097	7,364	412	411	460	396	7,174	7,646	7,557	7,760
Causeway	3,504	4,204	4,304	3,939	290	280	338	318	3,794	4,484	4,642	4,257
Ulster	7,703	7,975	8,158	8,022	201	251	219	248	7,904	8,226	8,377	8,270
Craigavon Area	6,457	6,556	6,567	6,556	360	577	594	551	6,817	7,133	7,161	7,107
Daisy Hill	4,158	4,587	4,402	4,502	349	341	282	342	4,507	4,928	4,684	4,844
Altnagelvin Area	5,397	5,953	5,670	5,507	320	402	415	433	5,717	6,355	6,085	5,940
South West Acute	2,871	3,107	3,070	2,888	223	272	283	293	3,094	3,379	3,353	3,181
<b>Type 1</b>	<b>51,376</b>	<b>54,621</b>	<b>54,182</b>	<b>54,247</b>	<b>2,792</b>	<b>3,275</b>	<b>3,238</b>	<b>3,307</b>	<b>54,168</b>	<b>57,896</b>	<b>57,420</b>	<b>57,554</b>
Eye Casualty	1,254	1,378	1,368	1,400	86	47	36	48	1,340	1,425	1,404	1,448
Downe	1,781	2,130	2,027	1,953	83	115	112	97	1,864	2,245	2,139	2,050
Lagan Valley	1,904	2,311	2,206	2,266	68	79	91	95	1,972	2,390	2,297	2,361
<b>Type 2</b>	<b>4,939</b>	<b>5,819</b>	<b>5,601</b>	<b>5,619</b>	<b>237</b>	<b>241</b>	<b>239</b>	<b>240</b>	<b>5,176</b>	<b>6,060</b>	<b>5,840</b>	<b>5,859</b>
Mid Ulster	856	1,005	957	1,000	27	40	28	38	883	1,045	985	1,038
Ards	979	1,144	1,087	1,082	54	51	46	55	1,033	1,195	1,133	1,137
Bangor	824	917	966	973	42	43	55	52	866	960	1,021	1,025
South Tyrone	2,584	2,950	3,086	2,907	166	139	172	174	2,750	3,089	3,258	3,081
Omagh	1,254	1,598	1,556	1,441	111	184	165	145	1,365	1,782	1,721	1,586
<b>Type 3</b>	<b>6,497</b>	<b>7,614</b>	<b>7,652</b>	<b>7,403</b>	<b>400</b>	<b>457</b>	<b>466</b>	<b>464</b>	<b>6,897</b>	<b>8,071</b>	<b>8,118</b>	<b>7,867</b>
<b>Northern Ireland</b>	<b>62,812</b>	<b>68,054</b>	<b>67,435</b>	<b>67,269</b>	<b>3,429</b>	<b>3,973</b>	<b>3,943</b>	<b>4,011</b>	<b>66,241</b>	<b>72,027</b>	<b>71,378</b>	<b>71,280</b>

<sup>61</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

**Table 10B: Performance against Emergency Care Waiting Times Target<sup>62, 63</sup>**

Department	4 - Hour Performance				12 - Hour Performance				Total Attendances			
	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep 2018	Jul 2019	Aug 2019	Sep 2019
Mater	70.4%	68.3%	63.1%	57.7%	58	51	80	183	4,166	4,400	4,431	4,334
Royal Victoria	60.3%	49.8%	49.3%	48.5%	202	343	254	485	8,019	8,355	8,311	8,468
RBHSC	84.4%	88.7%	88.3%	83.0%	.	.	.	.	2,976	2,990	2,819	3,393
Antrim Area	64.5%	61.8%	62.5%	64.5%	410	274	236	348	7,174	7,646	7,557	7,760
Causeway	67.3%	71.5%	72.8%	70.4%	152	182	37	151	3,794	4,484	4,642	4,257
Ulster	64.3%	56.8%	61.5%	59.8%	394	694	560	757	7,904	8,226	8,377	8,270
Craigavon Area	57.4%	50.1%	52.0%	49.2%	243	493	526	769	6,817	7,133	7,161	7,107
Daisy Hill	69.5%	69.0%	70.5%	66.0%	67	191	142	227	4,507	4,928	4,684	4,844
Altnagelvin Area	73.4%	63.7%	56.5%	53.9%	77	140	274	458	5,717	6,355	6,085	5,940
South West Acute	63.8%	65.5%	69.7%	63.7%	108	187	129	87	3,094	3,379	3,353	3,181
<b>Type 1</b>	<b>66.0%</b>	<b>61.6%</b>	<b>61.7%</b>	<b>59.6%</b>	<b>1,711</b>	<b>2,555</b>	<b>2,238</b>	<b>3,465</b>	<b>54,168</b>	<b>57,896</b>	<b>57,420</b>	<b>57,554</b>
Eye Casualty	84.0%	73.3%	77.1%	71.2%	.	.	.	.	1,340	1,425	1,404	1,448
Downe	92.4%	89.0%	88.9%	87.8%	2	3	11	13	1,864	2,245	2,139	2,050
Lagan Valley	81.1%	74.8%	81.1%	75.3%	1	4	1	4	1,972	2,390	2,297	2,361
<b>Type 2</b>	<b>85.9%</b>	<b>79.7%</b>	<b>83.0%</b>	<b>78.7%</b>	<b>3</b>	<b>7</b>	<b>12</b>	<b>17</b>	<b>5,176</b>	<b>6,060</b>	<b>5,840</b>	<b>5,859</b>
Mid Ulster	100.0%	100.0%	100.0%	100.0%	.	.	.	.	883	1,045	985	1,038
Ards	100.0%	100.0%	99.9%	100.0%	.	.	.	.	1,033	1,195	1,133	1,137
Bangor	100.0%	99.9%	100.0%	100.0%	.	.	.	.	866	960	1,021	1,025
South Tyrone	100.0%	100.0%	100.0%	100.0%	.	.	.	.	2,750	3,089	3,258	3,081
Omagh	99.4%	98.3%	97.9%	97.0%	.	.	.	.	1,365	1,782	1,721	1,586
<b>Type 3</b>	<b>99.9%</b>	<b>99.6%</b>	<b>99.5%</b>	<b>99.4%</b>	<b>.</b>	<b>.</b>	<b>.</b>	<b>.</b>	<b>6,897</b>	<b>8,071</b>	<b>8,118</b>	<b>7,867</b>
<b>Northern Ireland</b>	<b>71.1%</b>	<b>67.4%</b>	<b>67.8%</b>	<b>65.5%</b>	<b>1,714</b>	<b>2,562</b>	<b>2,250</b>	<b>3,482</b>	<b>66,241</b>	<b>72,027</b>	<b>71,378</b>	<b>71,280</b>

<sup>62</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

<sup>63</sup> Information on the comparability of this information with other UK jurisdictions is detailed on pages 6 – 8 of the additional guidance document found at the following link: <https://www.health-ni.gov.uk/sites/default/files/publications/health/hs-niwts-ecwt-guidance.pdf>



**Table 10C: Percentage of Attendances (i) Referred by a GP; (ii) Who Left before Treatment was Complete; and (iii) Re-attended within 7 Days<sup>64, 65</sup>**

Department	GP Referrals				Left Before Treatment				Unplanned reviews Within 7 Days			
	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep 2018	Jul 2019	Aug 2019	Sep 2019
Mater	12.7%	12.2%	11.7%	12.9%	9.0%	10.1%	9.4%	11.9%	2.7%	2.6%	2.8%	2.4%
Royal Victoria	18.4%	19.3%	19.1%	19.6%	5.8%	10.1%	8.8%	9.4%	2.1%	3.1%	2.4%	2.7%
RBHSC	12.3%	10.0%	11.3%	13.2%	1.6%	1.4%	1.5%	2.5%	5.1%	4.9%	4.3%	5.3%
Antrim Area	23.4%	22.7%	23.0%	24.1%	3.0%	4.0%	3.4%	2.8%	3.1%	3.4%	3.5%	2.9%
Causeway	21.4%	18.0%	18.8%	21.3%	3.7%	3.1%	3.7%	3.6%	4.8%	4.4%	4.8%	4.7%
Ulster	21.9%	22.4%	21.5%	23.0%	2.4%	4.3%	3.5%	3.1%	1.7%	2.1%	1.9%	2.1%
Craigavon Area	22.6%	19.9%	20.2%	20.7%	5.4%	7.2%	6.9%	6.5%	3.8%	4.7%	5.3%	4.8%
Daisy Hill	13.5%	12.0%	11.5%	13.3%	3.6%	5.6%	4.3%	5.5%	5.7%	5.4%	4.8%	5.3%
Altnagelvin Area	12.2%	9.4%	9.6%	12.4%	3.4%	6.1%	7.4%	8.3%	4.1%	4.8%	5.0%	5.5%
South West Acute	17.9%	19.2%	18.0%	19.0%	3.8%	4.6%	3.4%	5.2%	4.9%	6.3%	5.8%	6.8%
<b>Type 1</b>	<b>18.4%</b>	<b>17.4%</b>	<b>17.4%</b>	<b>18.8%</b>	<b>4.2%</b>	<b>6.0%</b>	<b>5.5%</b>	<b>5.9%</b>	<b>3.5%</b>	<b>3.9%</b>	<b>3.8%</b>	<b>3.9%</b>
Eye Casualty	13.5%	12.4%	13.7%	10.4%	1.2%	3.1%	1.4%	1.2%	1.8%	1.1%	0.9%	1.6%
Downe	13.8%	14.1%	17.0%	15.3%	0.7%	0.9%	1.1%	1.4%	2.3%	3.1%	2.8%	2.6%
Lagan Valley	15.5%	13.4%	12.3%	12.4%	2.0%	3.0%	2.0%	3.7%	2.0%	2.0%	2.1%	2.5%
<b>Type 2</b>	<b>14.4%</b>	<b>13.4%</b>	<b>14.4%</b>	<b>12.9%</b>	<b>1.3%</b>	<b>2.2%</b>	<b>1.5%</b>	<b>2.3%</b>	<b>2.0%</b>	<b>2.2%</b>	<b>2.1%</b>	<b>2.3%</b>
Mid Ulster	1.4%	1.2%	0.3%	0.5%	0.0%	0.2%	0.0%	0.2%	1.8%	1.2%	1.3%	1.8%
Ards	0.8%	0.8%	0.7%	0.5%	0.7%	0.9%	0.5%	0.6%	2.3%	2.0%	2.1%	2.1%
Bangor	0.5%	0.9%	0.8%	0.5%	0.5%	1.9%	1.9%	1.3%	2.7%	1.9%	2.7%	3.0%
South Tyrone	0.8%	0.8%	0.5%	0.6%	0.1%	0.2%	0.2%	0.3%	3.1%	2.5%	2.8%	3.2%
Omagh	1.4%	1.0%	1.3%	1.9%	0.7%	2.0%	2.3%	2.5%	5.1%	7.1%	6.0%	6.0%
<b>Type 3</b>	<b>1.0%</b>	<b>0.9%</b>	<b>0.7%</b>	<b>0.8%</b>	<b>0.3%</b>	<b>0.9%</b>	<b>0.9%</b>	<b>0.9%</b>	<b>3.1%</b>	<b>3.2%</b>	<b>3.2%</b>	<b>3.4%</b>
<b>Northern Ireland</b>	<b>16.3%</b>	<b>15.2%</b>	<b>15.3%</b>	<b>16.3%</b>	<b>3.6%</b>	<b>5.1%</b>	<b>4.7%</b>	<b>5.1%</b>	<b>3.3%</b>	<b>3.7%</b>	<b>3.6%</b>	<b>3.7%</b>

<sup>64</sup> Data on referrals to ED by GP's, Left before treatment complete and unplanned re-attendances are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>65</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

**Table 10D: Waiting Time from Arrival to Triage (Assessment)<sup>66, 67</sup>**

Department	Median				95 <sup>th</sup> Percentile			
	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep 2018	Jul 2019	Aug 2019	Sep 2019
Mater	0:09	0:09	0:09	0:11	0:29	0:28	0:29	0:39
Royal Victoria	0:12	0:11	0:11	0:15	0:47	0:42	0:43	0:56
RBHSC	0:09	0:07	0:07	0:09	0:33	0:31	0:27	0:42
Antrim Area	0:09	0:10	0:10	0:10	0:26	0:28	0:26	0:29
Causeway	0:10	0:10	0:10	0:11	0:32	0:30	0:30	0:32
Ulster	0:10	0:11	0:09	0:11	0:26	0:30	0:30	0:33
Craigavon Area	0:09	0:10	0:11	0:12	0:36	0:44	0:45	0:54
Daisy Hill	0:05	0:05	0:04	0:05	0:15	0:15	0:13	0:15
Altnagelvin Area	0:10	0:11	0:11	0:14	0:30	0:38	0:38	0:48
South West Acute	0:11	0:10	0:09	0:11	0:43	0:43	0:30	0:41
<b>Type 1</b>	<b>0:09</b>	<b>0:10</b>	<b>0:09</b>	<b>0:11</b>	<b>0:33</b>	<b>0:35</b>	<b>0:34</b>	<b>0:42</b>
Eye Casualty	0:16	0:23	0:22	0:19	1:12	1:32	1:25	1:08
Downe	0:05	0:07	0:06	0:06	0:18	0:24	0:26	0:23
Lagan Valley	0:07	0:08	0:07	0:08	0:23	0:27	0:21	0:23
<b>Type 2</b>	<b>0:07</b>	<b>0:09</b>	<b>0:08</b>	<b>0:08</b>	<b>0:38</b>	<b>0:53</b>	<b>0:52</b>	<b>0:44</b>
Mid Ulster	0:02	0:02	0:02	0:03	0:08	0:10	0:07	0:08
Ards	0:03	0:03	0:03	0:03	0:15	0:13	0:17	0:17
Bangor	0:04	0:06	0:05	0:05	0:22	0:23	0:27	0:23
South Tyrone	0:01	0:01	0:01	0:02	0:09	0:08	0:09	0:13
Omagh	0:09	0:10	0:08	0:09	0:36	0:44	0:39	0:42
<b>Type 3</b>	<b>0:03</b>	<b>0:03</b>	<b>0:03</b>	<b>0:03</b>	<b>0:22</b>	<b>0:24</b>	<b>0:22</b>	<b>0:22</b>
<b>Northern Ireland</b>	<b>0:08</b>	<b>0:09</b>	<b>0:08</b>	<b>0:10</b>	<b>0:33</b>	<b>0:35</b>	<b>0:34</b>	<b>0:41</b>

<sup>66</sup> Data on time to triage are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>67</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

**Table 10E: Waiting Time from Triage (Assessment) to Start of Treatment** <sup>68, 69, 70</sup>

Department	Median				95 <sup>th</sup> Percentile			
	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep 2018	Jul 2019	Aug 2019	Sep 2019
Mater	1:00	0:56	1:01	1:14	4:07	5:27	5:51	5:32
Royal Victoria	1:00	1:21	1:07	1:20	4:09	7:16	6:35	6:46
RBHSC	0:42	0:30	0:28	0:44	2:30	2:12	2:10	2:48
Antrim Area	1:11	1:22	1:26	1:18	4:33	5:13	5:04	4:29
Causeway	0:45	0:31	0:45	0:42	3:18	2:28	3:02	2:38
Ulster	0:47	1:00	0:46	0:48	3:14	4:39	3:45	3:41
Craigavon Area	1:27	1:39	1:30	1:42	5:13	7:00	5:45	6:04
Daisy Hill	1:01	1:15	1:00	1:07	3:39	4:04	3:41	4:12
Altnagelvin Area	0:31	1:07	1:11	1:19	2:25	4:01	4:54	4:40
South West Acute	0:41	0:28	0:30	0:43	3:05	3:30	3:08	3:48
<b>Type 1</b>	<b>0:53</b>	<b>1:03</b>	<b>0:59</b>	<b>1:05</b>	<b>3:54</b>	<b>5:09</b>	<b>4:50</b>	<b>4:55</b>
Downe	0:23	0:31	0:30	0:31	1:33	1:48	1:49	2:09
Lagan Valley	0:27	0:48	0:36	0:46	1:55	2:42	2:20	2:52
<b>Type 2</b>	<b>0:25</b>	<b>0:38</b>	<b>0:33</b>	<b>0:38</b>	<b>1:44</b>	<b>2:24</b>	<b>2:07</b>	<b>2:38</b>
Mid Ulster	0:04	0:04	0:04	0:04	0:20	0:43	0:43	0:23
Ards	0:09	0:13	0:11	0:12	0:41	1:05	0:49	1:11
Bangor	0:05	0:08	0:10	0:07	0:37	0:53	0:59	0:50
South Tyrone	0:02	0:03	0:04	0:03	0:26	0:29	0:33	0:31
Omagh	0:10	0:16	0:15	0:16	1:06	2:03	2:29	2:30
<b>Type 3</b>	<b>0:05</b>	<b>0:07</b>	<b>0:06</b>	<b>0:06</b>	<b>0:40</b>	<b>1:09</b>	<b>1:04</b>	<b>1:00</b>
<b>Northern Ireland</b>	<b>0:42</b>	<b>0:50</b>	<b>0:46</b>	<b>0:51</b>	<b>3:39</b>	<b>4:43</b>	<b>4:28</b>	<b>4:35</b>

<sup>68</sup> Data on time to start of treatment are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>69</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

<sup>70</sup> Due to a change in how information is recorded at Omagh UCC, data on the start of treatment is not available after 6<sup>th</sup> September 2018.

**Table 10F: Time Spent in an Emergency Care Department by those Admitted to Hospital <sup>71, 72,</sup>**

Department	Median				95 <sup>th</sup> Percentile			
	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep 2018	Jul 2019	Aug 2019	Sep 2019
Mater	5:16	5:13	5:54	7:01	14:29	11:58	13:04	20:26
Royal Victoria	6:55	7:11	7:09	8:19	14:07	15:39	14:09	18:14
RBHSC	3:39	3:23	3:20	3:45	7:00	6:51	6:38	7:40
Antrim Area	6:36	5:56	5:39	6:13	22:19	16:41	17:07	20:52
Causeway	6:55	6:57	5:45	7:03	20:48	20:47	11:19	19:38
Ulster	6:32	8:03	7:15	8:20	19:10	23:16	22:24	26:12
Craigavon Area	6:45	7:28	7:54	9:33	18:34	21:31	22:57	26:28
Daisy Hill	5:47	6:33	6:04	7:44	14:34	22:06	19:52	22:40
Altnagelvin Area	6:06	6:27	7:31	8:40	12:22	14:20	19:44	24:00
South West Acute	6:03	5:49	5:08	5:01	16:06	22:04	19:20	15:41
<b>Type 1</b>	<b>6:19</b>	<b>6:38</b>	<b>6:32</b>	<b>7:25</b>	<b>17:46</b>	<b>20:08</b>	<b>19:52</b>	<b>23:16</b>
Eye Casualty	2:37	2:40	2:54	2:49	5:45	7:41	6:34	7:41
Downe	3:00	3:35	3:39	3:49	7:11	7:50	16:25	18:16
Lagan Valley	4:39	5:14	4:52	5:20	8:40	9:06	8:05	9:55
<b>Type 2</b>	<b>3:56</b>	<b>4:34</b>	<b>4:19</b>	<b>4:44</b>	<b>8:14</b>	<b>8:39</b>	<b>8:46</b>	<b>10:01</b>
Mid Ulster	.	.	.	.	.	.	.	.
Ards	.	.	.	.	.	.	.	.
Bangor	.	.	.	.	.	.	.	.
South Tyrone	.	.	.	.	.	.	.	.
Omagh	2:11	1:04	2:14	3:20	4:02	3:01	3:59	5:37
<b>Type 3</b>	<b>2:11</b>	<b>1:04</b>	<b>2:14</b>	<b>3:20</b>	<b>4:02</b>	<b>3:01</b>	<b>3:59</b>	<b>5:37</b>
<b>Northern Ireland</b>	<b>6:12</b>	<b>6:31</b>	<b>6:25</b>	<b>7:17</b>	<b>17:32</b>	<b>19:56</b>	<b>19:45</b>	<b>23:09</b>

<sup>71</sup> Data on time spent in ED for those admitted and those discharged home are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>72</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

**Table 10G: Time Spent in an Emergency Care Department by those Discharged Home** <sup>73, 74,</sup>

Department	Median				95 <sup>th</sup> Percentile			
	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep 2018	Jul 2019	Aug 2019	Sep 2019
Mater	2:32	2:31	2:51	3:08	6:41	7:27	8:27	8:26
Royal Victoria	3:04	3:31	3:30	3:29	7:48	9:45	9:31	9:54
RBHSC	2:03	1:45	1:44	2:11	5:04	4:32	4:29	5:10
Antrim Area	2:37	2:45	2:46	2:40	6:58	7:36	7:29	6:52
Causeway	2:27	2:15	2:19	2:24	7:45	7:01	6:24	6:47
Ulster	2:28	2:50	2:37	2:41	6:25	7:49	7:02	7:06
Craigavon Area	3:00	3:21	3:13	3:24	7:19	9:03	8:17	8:41
Daisy Hill	2:23	2:40	2:28	2:35	6:22	6:08	6:13	6:25
Altnagelvin Area	2:19	2:55	3:14	3:28	5:33	6:31	8:07	8:02
South West Acute	2:47	2:41	2:32	2:50	7:03	8:07	6:23	7:25
<b>Type 1</b>	<b>2:35</b>	<b>2:47</b>	<b>2:46</b>	<b>2:54</b>	<b>6:50</b>	<b>8:01</b>	<b>7:50</b>	<b>8:00</b>
Eye Casualty	2:12	2:43	2:35	2:45	5:31	6:45	5:47	6:31
Downe	1:09	1:33	1:31	1:30	4:30	4:52	4:51	5:25
Lagan Valley	1:50	2:20	2:03	2:22	5:18	6:02	5:31	5:59
<b>Type 2</b>	<b>1:39</b>	<b>2:04</b>	<b>1:58</b>	<b>2:07</b>	<b>5:10</b>	<b>5:58</b>	<b>5:28</b>	<b>6:01</b>
Mid Ulster	0:32	0:33	0:32	0:33	1:19	1:42	1:39	1:28
Ards	0:41	0:51	0:45	0:47	1:35	2:00	1:49	1:56
Bangor	0:39	0:42	0:43	0:42	1:29	1:38	1:53	1:43
South Tyrone	0:26	0:28	0:27	0:30	1:04	1:10	1:11	1:14
Omagh	0:47	0:57	0:54	0:57	2:17	3:08	3:19	3:21
<b>Type 3</b>	<b>0:33</b>	<b>0:37</b>	<b>0:35</b>	<b>0:37</b>	<b>1:37</b>	<b>2:05</b>	<b>2:01</b>	<b>1:57</b>
<b>Northern Ireland</b>	<b>2:09</b>	<b>2:21</b>	<b>2:18</b>	<b>2:26</b>	<b>6:26</b>	<b>7:30</b>	<b>7:19</b>	<b>7:29</b>

<sup>73</sup> Data on time spent in ED for those admitted and those discharged home are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>74</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

**Table 10H: Attendances at Emergency Care Departments per 1000-Population by Age Group <sup>75, 76</sup>**

Age Group	Sep 2018	Jul 2019	Aug 2019	Sep 2019
Under 5	40.3	42.2	40.1	45.7
Aged 5 - 15	28.3	27.2	25.4	32.3
Aged 16 - 44	35.5	38.4	39.0	36.9
Aged 45 - 64	30.6	34.0	34.6	32.6
Aged 65 - 74	34.8	40.3	39.5	38.8
Aged 75 & Over	59.1	68.5	65.0	64.4
<b>Northern Ireland</b>	<b>35.2</b>	<b>38.3</b>	<b>37.9</b>	<b>37.9</b>

**Table 10I: Average Number of Attendances by Day of Week**

Day of Week	Sep 2018	Jul 2019	Aug 2019	Sep 2019
Monday	2,684.0	2,775.0	2,742.5	2,836.0
Tuesday	2,371.5	2,472.6	2,522.5	2,530.8
Wednesday	2,305.5	2,375.0	2,344.8	2,462.8
Thursday	2,287.8	2,354.3	2,342.2	2,422.3
Friday	2,212.8	2,259.8	2,373.4	2,440.5
Saturday	1,848.4	1,936.3	1,874.4	1,987.3
Sunday	1,907.4	1,927.0	1,989.0	1,970.8

<sup>75</sup> Data on age and when patients attend ED are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

<sup>76</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

**Table 10J: Attendances at Emergency Care Departments, by Time Waited from Arrival to Discharge<sup>77</sup>**

Department	Under 4 Hours				Between 4 and 12 Hours				Over 12 Hours			
	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep 2018	Jul 2019	Aug 2019	Sep 2019
Mater	2,934	3,003	2,794	2,501	1,174	1,346	1,557	1,650	58	51	80	183
Royal Victoria	4,839	4,163	4,097	4,105	2,978	3,849	3,960	3,878	202	343	254	485
RBHSC	2,511	2,653	2,489	2,815	465	337	330	578	.	.	.	.
Antrim Area	4,630	4,727	4,724	5,002	2,134	2,645	2,597	2,410	410	274	236	348
Causeway	2,552	3,205	3,381	2,995	1,090	1,097	1,224	1,111	152	182	37	151
Ulster	5,082	4,671	5,156	4,946	2,428	2,861	2,661	2,567	394	694	560	757
Craigavon Area	3,910	3,573	3,727	3,494	2,664	3,067	2,908	2,844	243	493	526	769
Daisy Hill	3,133	3,398	3,303	3,196	1,307	1,339	1,239	1,421	67	191	142	227
Altnagelvin Area	4,199	4,048	3,440	3,203	1,441	2,167	2,371	2,279	77	140	274	458
South West Acute	1,975	2,214	2,337	2,027	1,011	978	887	1,067	108	187	129	87
<b>Type 1</b>	<b>35,765</b>	<b>35,655</b>	<b>35,448</b>	<b>34,284</b>	<b>16,692</b>	<b>19,686</b>	<b>19,734</b>	<b>19,805</b>	<b>1,711</b>	<b>2,555</b>	<b>2,238</b>	<b>3,465</b>
Eye Casualty	1,126	1,045	1,082	1,031	214	380	322	417	.	.	.	.
Downe	1,722	1,999	1,902	1,800	140	243	226	237	2	3	11	13
Lagan Valley	1,599	1,787	1,863	1,779	372	599	433	578	1	4	1	4
<b>Type 2</b>	<b>4,447</b>	<b>4,831</b>	<b>4,847</b>	<b>4,610</b>	<b>726</b>	<b>1,222</b>	<b>981</b>	<b>1,232</b>	<b>3</b>	<b>7</b>	<b>12</b>	<b>17</b>
Mid Ulster	883	1,045	985	1,038	.	.	.	.	.	.	.	.
Ards	1,033	1,195	1,132	1,137	.	.	1	.	.	.	.	.
Bangor	866	959	1,021	1,025	.	1	.	.	.	.	.	.
South Tyrone	2,750	3,088	3,258	3,080	.	1	.	1	.	.	.	.
Omagh	1,357	1,752	1,684	1,539	8	30	37	47	.	.	.	.
<b>Type 3</b>	<b>6,889</b>	<b>8,039</b>	<b>8,080</b>	<b>7,819</b>	<b>8</b>	<b>32</b>	<b>38</b>	<b>48</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Northern Ireland</b>	<b>47,101</b>	<b>48,525</b>	<b>48,375</b>	<b>46,713</b>	<b>17,426</b>	<b>20,940</b>	<b>20,753</b>	<b>21,085</b>	<b>1,714</b>	<b>2,562</b>	<b>2,250</b>	<b>3,482</b>

<sup>77</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

**Table 10K: Percentage of Patients Commencing Treatment, Following Triage, within 2 Hours <sup>78</sup>**

Department	% Commenced Treatment, Following Triage, within 2 Hours			
	Sep 2018	Jul 2019	Aug 2019	Sep 2019
Mater	72.2%	73.5%	69.8%	64.7%
Royal Victoria	70.0%	62.3%	63.7%	59.9%
RBHSC	89.5%	93.2%	93.7%	87.7%
Antrim Area	70.2%	64.4%	62.9%	69.4%
Causeway	85.4%	91.4%	83.6%	88.5%
Ulster	84.3%	77.0%	81.0%	81.4%
Craigavon Area	63.5%	57.4%	62.0%	56.4%
Daisy Hill	78.4%	69.3%	75.9%	70.0%
Altnagelvin Area	91.5%	73.2%	68.8%	65.8%
South West Acute	86.0%	84.5%	86.6%	80.1%
<b>Type 1</b>	<b>77.8%</b>	<b>72.0%</b>	<b>72.7%</b>	<b>71.0%</b>
Downe	98.2%	96.3%	96.5%	93.7%
Lagan Valley	95.7%	87.0%	91.5%	86.0%
<b>Type 2</b>	<b>96.9%</b>	<b>91.4%</b>	<b>93.9%</b>	<b>89.5%</b>
Mid Ulster	100.0%	100.0%	99.4%	100.0%
Ards	100.0%	100.0%	100.0%	99.7%
Bangor	100.0%	100.0%	99.9%	100.0%
South Tyrone	100.0%	100.0%	100.0%	100.0%
Omagh	99.7%	94.4%	92.2%	93.4%
<b>Type 3</b>	<b>99.9%</b>	<b>98.8%</b>	<b>98.3%</b>	<b>98.7%</b>
<b>Northern Ireland</b>	<b>81.5%</b>	<b>76.7%</b>	<b>77.4%</b>	<b>75.7%</b>

<sup>78</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.



**Table 10L: Percentage Triage'd in each Triage Group**<sup>79, 80,</sup>

Department	Triage'd Level (1/2)				Triage'd Level (3)				Triage'd Level (4/5)			
	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep 2018	Jul 2019	Aug 2019	Sep 2019	Sep 2018	Jul 2019	Aug 2019	Sep 2019
Mater	13.7%	15.8%	15.0%	14.7%	42.6%	41.8%	43.2%	46.2%	43.7%	42.3%	41.8%	39.1%
Royal Victoria	17.8%	17.4%	18.0%	19.2%	47.4%	45.0%	46.0%	47.5%	34.7%	37.6%	36.0%	33.3%
RBHSC	12.8%	8.2%	9.8%	13.3%	22.7%	22.2%	20.6%	22.7%	64.5%	69.6%	69.6%	64.0%
Antrim Area	18.9%	18.7%	19.9%	18.1%	50.4%	50.7%	52.2%	55.2%	30.7%	30.5%	28.0%	26.7%
Causeway	14.6%	16.8%	16.1%	17.9%	57.6%	51.0%	53.5%	49.9%	27.8%	32.2%	30.4%	32.3%
Ulster	19.5%	21.2%	20.4%	21.7%	49.0%	41.1%	42.3%	42.1%	31.5%	37.6%	37.3%	36.2%
Craigavon Area	29.3%	28.9%	29.9%	31.4%	48.6%	47.0%	45.8%	45.1%	22.1%	24.1%	24.2%	23.5%
Daisy Hill	33.0%	31.1%	29.9%	28.6%	50.5%	46.9%	45.2%	49.1%	16.5%	21.9%	24.9%	22.3%
Altnagelvin Area	30.3%	28.1%	30.8%	33.6%	31.0%	29.8%	29.3%	30.4%	38.7%	42.1%	39.9%	35.9%
South West Acute	17.1%	14.6%	15.2%	17.0%	50.1%	44.3%	43.7%	45.7%	32.8%	41.2%	41.2%	37.3%
<b>Type 1</b>	<b>21.5%</b>	<b>21.2%</b>	<b>21.5%</b>	<b>22.4%</b>	<b>45.7%</b>	<b>42.7%</b>	<b>43.1%</b>	<b>44.1%</b>	<b>32.8%</b>	<b>36.1%</b>	<b>35.3%</b>	<b>33.5%</b>
Eye Casualty	1.9%	2.3%	2.1%	2.1%	4.1%	5.8%	4.9%	8.4%	94.0%	91.9%	93.0%	89.5%
Downe	7.7%	9.4%	8.3%	7.9%	34.3%	26.2%	26.6%	28.7%	58.0%	64.4%	65.2%	63.4%
Lagan Valley	9.0%	8.6%	8.5%	10.0%	42.9%	41.8%	40.6%	39.0%	48.0%	49.6%	50.9%	51.0%
<b>Type 2</b>	<b>6.7%</b>	<b>7.4%</b>	<b>6.9%</b>	<b>7.3%</b>	<b>29.7%</b>	<b>27.6%</b>	<b>26.9%</b>	<b>27.8%</b>	<b>63.6%</b>	<b>65.0%</b>	<b>66.3%</b>	<b>64.9%</b>
Mid Ulster	0.2%	0.3%	0.2%	0.3%	3.5%	2.6%	2.5%	2.1%	96.3%	97.1%	97.3%	97.6%
Ards	0.3%	0.1%	-	0.4%	0.5%	0.8%	0.9%	0.6%	99.2%	99.1%	99.1%	99.0%
Bangor	0.3%	0.3%	0.1%	0.1%	0.7%	0.8%	0.2%	0.9%	99.0%	98.8%	99.7%	99.0%
South Tyrone	0.1%	0.6%	0.6%	0.5%	5.0%	3.1%	2.9%	4.5%	94.9%	96.3%	96.5%	95.1%
Omagh	0.7%	0.5%	1.2%	1.5%	15.0%	13.4%	12.9%	4.8%	84.3%	86.2%	86.0%	93.7%
<b>Type 3</b>	<b>0.3%</b>	<b>0.4%</b>	<b>0.5%</b>	<b>0.5%</b>	<b>5.5%</b>	<b>4.7%</b>	<b>4.3%</b>	<b>3.0%</b>	<b>94.2%</b>	<b>94.9%</b>	<b>95.2%</b>	<b>96.5%</b>
<b>Northern Ireland</b>	<b>18.0%</b>	<b>17.6%</b>	<b>17.9%</b>	<b>18.8%</b>	<b>40.1%</b>	<b>37.0%</b>	<b>37.3%</b>	<b>38.4%</b>	<b>41.8%</b>	<b>45.4%</b>	<b>44.9%</b>	<b>42.7%</b>

<sup>79</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

<sup>80</sup> Data on the triage level of those attending ED are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits

## Appendix 5: Further Information

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

**Sarah Brown**

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Information & Analysis Directorate  
Department of Health  
Stormont Estate  
Belfast, BT4 3SQ

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**This Statistical bulletin and others published by Information and Analysis Directorate (IAD) are available to view or download from the DoH Internet site at:**

Internet address: <https://www.health-ni.gov.uk/topics/doh-statistics-and-research>