

INFORMATION
ANALYSIS
DIRECTORATE



Emergency Care Waiting Time Statistics for Northern Ireland

(April - June 2021)



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An Roinn Sláinte

Máinnystrie O Poustie

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NISRA

Northern Ireland
Statistics and Research Agency
Gníomhaireacht Thuaisceart Éireann
um Staitistice agus Taighde

Reader Information

- 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 processes¹. 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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- 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.
- Further Copies:** statistics@health-ni.gov.uk
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¹ Information on Security and Confidentiality Processes is detailed in the Technical Notes on page 3.

Technical Notes

Data Collection

Information presented in this brief is based on a monthly patient-level download from the Regional Data Warehouse on the 8th 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

Designation was awarded in March 2013: 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>

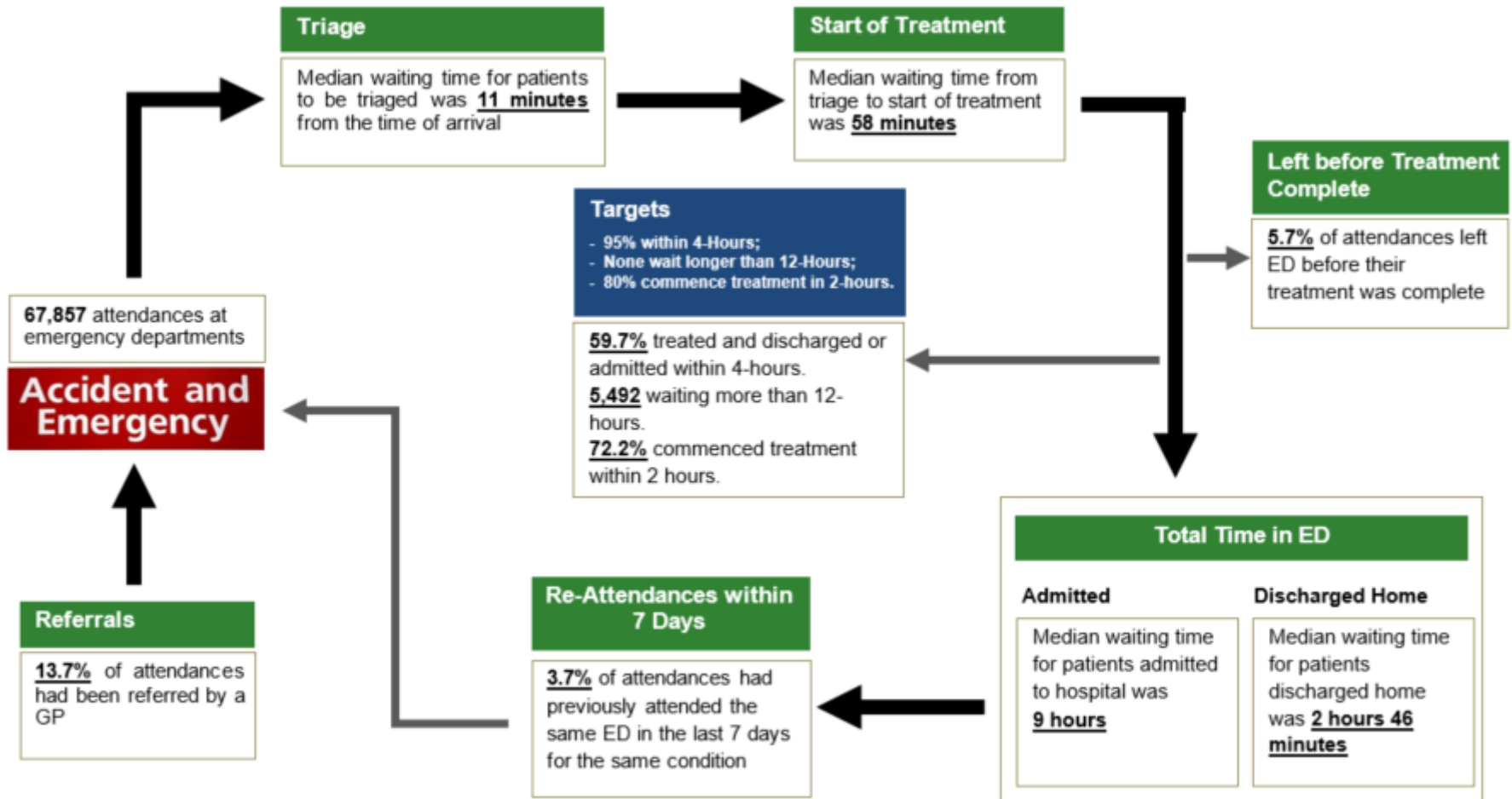
Statistical Charter:

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

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SUMMARY OF KEY FACTS (JUNE 2021)



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 June 2021, compared with the same month last year.^{2, 3, 4, 5, 6}

Information for the last three months (April, May and June 2021) is detailed in Table 10A on page 30.

Table 1: Attendances at Emergency Care Departments and Emergency Admissions to Hospital (June 2020 - June 2021)

Attendances	June 2020	June 2021	Difference	
New	51,205	64,038	12,833	25.1%
Unplanned Review	3,236	3,819	583	18.0%
Total Attendances	54,441	67,857	13,416	24.6%
Emergency Admissions	10,261	11,606	1,345	13.1%

Source: Regional Data Warehouse, Business Services Organisation

- Total attendances at EDs increased by 24.6% (13,416) when compared with June 2020, from 54,441 to 67,857 in June 2021 (Table 1, Table 10A).
- Between June 2020 and June 2021, unplanned review attendances increased by 18.0% (583) and new attendances increased by 25.1% (12,833) (Table 1, Table 10A).
- There were 192,296 attendances at EDs during the quarter ending 31st June 2021, 37.9% (52,880) more than during the same quarter in 2020 (139,416).
- The number of emergency admissions to hospital from EDs increased by 13.1% (1,345) between June 2020 (10,261) and June 2021 (11,606) (Table 1).

² Information for June 2020 and April, May and June 2021 is detailed in Appendix 4, Table 10A.

³ 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.

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

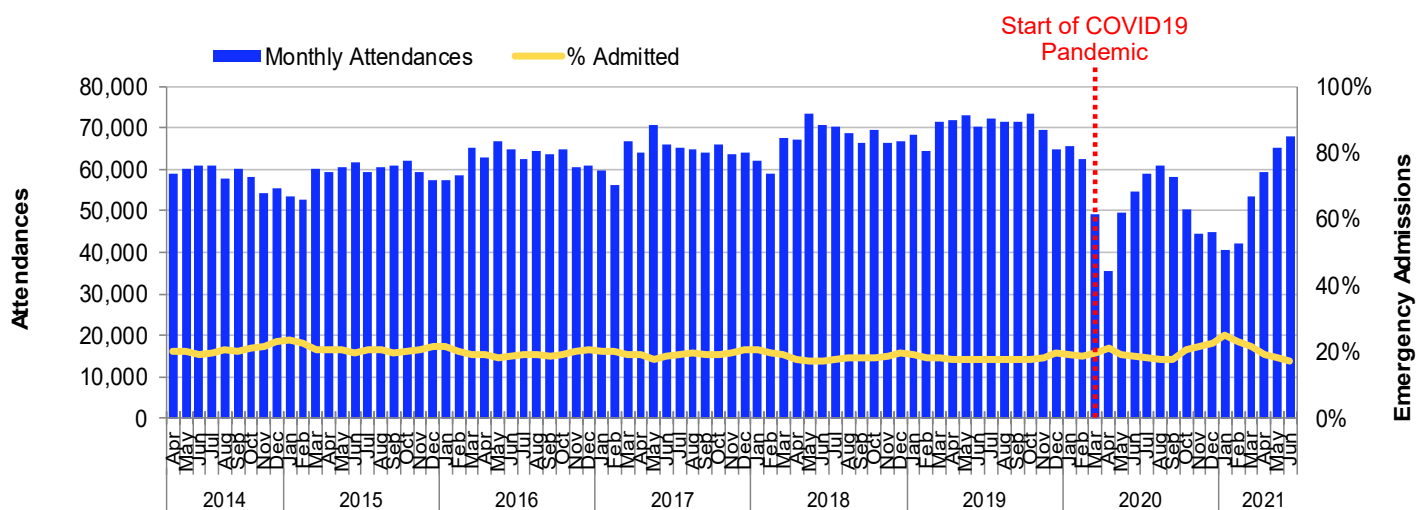
⁵ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

⁶ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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 ⁷ to hospital each month, from April 2014. ^{8, 9, 10}

Figure 1: Attendances at Emergency Care Departments and Emergency Admissions to Hospital (April 2014 – June 2021)



- During each of the last seven 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 generally increases between November and January each year, then declines sharply from February each year (Figure 1).
- Attendances during April, May and June 2021 increased when compared with the same month of the previous year. Readers should note that attendance numbers have been impacted by the COVID-19 pandemic and the full impact of this is still being assessed.
 - During April 2021, there were 59,292 attendances at EDs, 67.3% (23,857) more than April 2020 (35,435);
 - During May 2021, there were 65,147 attendances at EDs, 31.5% (15,607) more than May 2020 (49,540); and,
 - During June 2021, there were 67,857 attendances at EDs, 24.6% (13,416) more than June 2020 (54,441).

⁷ 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.

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

⁹ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

¹⁰ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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 June 2021 and the same month last year. It also details the total number of attendances at Type 2 and 3 EDs during this period ^{11, 12, 13, 14, 15}

Table 2: Attendances at Emergency Care Departments (June 2020 – June 2021)

Department	New Attendances		Unplanned Review Attendances		Total Attendances	
	Jun 2020	Jun 2021	Jun 2020	Jun 2021	Jun 2020	Jun 2021
Mater	684	2,366	4	60	688	2,426
Royal Victoria	8,496	6,874	436	64	8,932	6,938
RBHSC	2,170	3,780	161	349	2,331	4,129
Antrim Area	6,716	7,863	383	481	7,099	8,344
Causeway	3,213	4,081	251	120	3,464	4,201
Ulster	7,655	9,324	237	477	7,892	9,801
Craigavon Area	8,148	6,789	683	566	8,831	7,355
Daisy Hill	0	4,612	0	393	0	5,005
Altnagelvin Area	5,047	5,607	409	482	5,456	6,089
South West Acute	2,534	3,242	285	353	2,819	3,595
Type 1	44,663	54,538	2,849	3,345	47,512	57,883
Type 2	2,216	4,004	110	275	2,326	4,279
Type 3	4,326	5,496	277	199	4,603	5,695
Northern Ireland	51,205	64,038	3,236	3,819	54,441	67,857

Source: Regional Data Warehouse, Business Services Organisation

- Between June 2020 and June 2021, total attendances increased at Type 1, Type 2 and Type 3 departments (Table 2, Table 10A).
- The Ulster (9,801) was the busiest ED during June 2021 (Table 2, Table 10A).
- Eight of the ten Type 1 EDs reported an increase in attendances during June 2021, compared with June 2020 (Table 2, Table 10A).

¹¹ Information for June 2020 and April, May and June 2021 is detailed in Appendix 4, Table 10A.

¹² Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹³ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

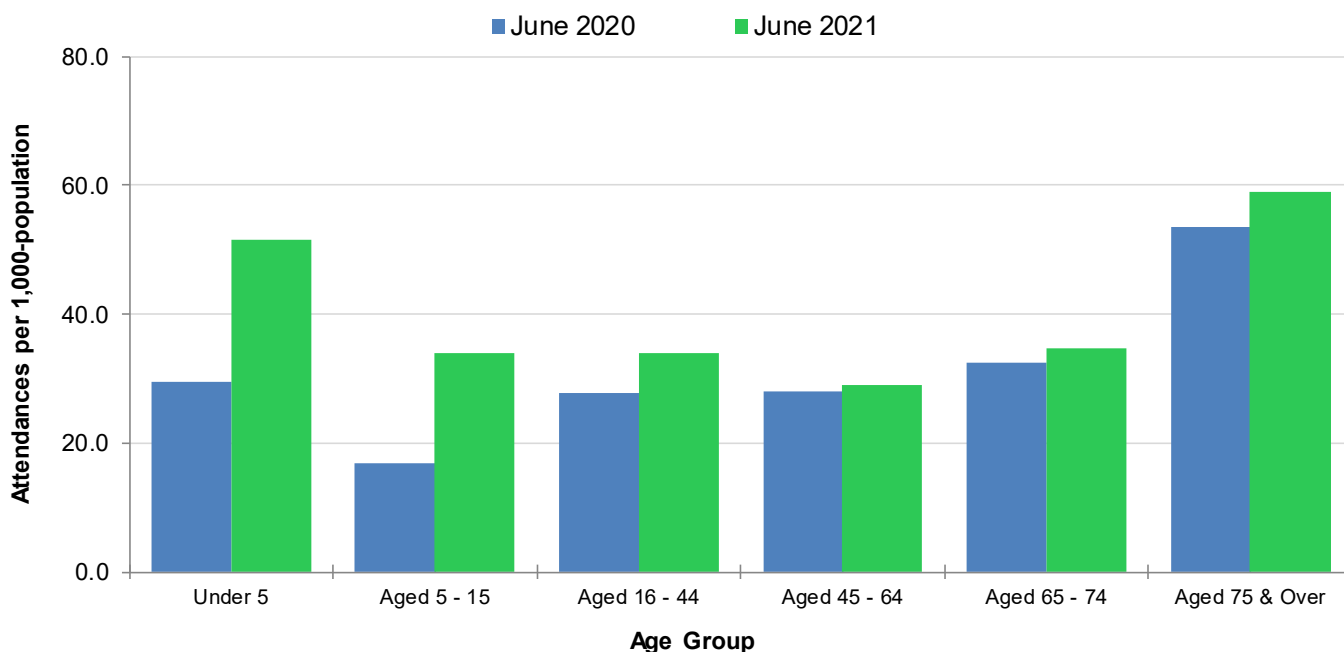
¹⁴ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

¹⁵ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Who Attends EDs?

Figure 2 presents information on the number of attendances at EDs per 1,000-population, broken down by the age group of those attending^{16, 17, 18, 19, 20}

Figure 2: Attendances at Emergency Care Departments per 1,000-population, by Age Group (June 2020 – June 2021)^{21, 22}



- During both June 2020 and June 2021, the highest number of attendances per 1,000-population was recorded for those Aged 75 & Over (53.6 and 59.1 respectively) (Figure 2, Table 10H).
- The lowest number of attendances per 1,000-population was recorded in the Aged 45 - 64 age group during June 2021 (29.1) (Figure 2, Table 10H).
- The rate of attendances per 1,000-population increased for all age groups between June 2020 and June 2021. (Figure 2, Table 10H).

¹⁶ Information for June 2020 and April, May and June 2021 is detailed in Appendix 4, Table 10H.

¹⁷ 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.

¹⁸ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹⁹ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

²⁰ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

²¹ Excludes cases where the DOB could not be determined.

²² Based on the NISRA 2020 mid-year population estimate which was published on 25th June 2021.

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.^{23, 24}

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 (June 2020 - June 2021)^{25, 26, 27,28}

Department	Level 1 / 2		Level 3		Level 4 / 5	
	Jun 2020	Jun 2021	Jun 2020	Jun 2021	Jun 2020	Jun 2021
Mater	31.2%	22.7%	46.1%	45.9%	22.6%	31.4%
Royal Victoria	16.2%	26.1%	46.6%	53.4%	37.2%	20.5%
RBHSC	8.7%	11.2%	20.6%	20.9%	70.7%	67.9%
Antrim Area	18.1%	18.1%	51.4%	49.7%	30.5%	32.2%
Causeway	17.2%	17.7%	48.8%	53.5%	34.0%	28.8%
Ulster	22.0%	22.4%	43.8%	42.8%	34.2%	34.8%
Craigavon Area	28.3%	28.5%	39.9%	40.0%	31.7%	31.5%
Daisy Hill	0.0%	25.7%	0.0%	42.6%	0.0%	31.8%
Altnagelvin Area	31.5%	32.1%	33.9%	32.0%	34.6%	35.8%
South West Acute	14.8%	14.7%	41.9%	40.7%	43.3%	44.5%
Type 1	21.4%	22.9%	42.5%	42.5%	36.1%	34.7%
Type 2	7.6%	4.1%	26.0%	22.0%	66.4%	73.9%
Type 3	0.2%	0.4%	2.7%	2.4%	97.0%	97.2%
Northern Ireland	19.0%	19.9%	38.4%	38.0%	42.6%	42.2%

Source: Regional Data Warehouse, Business Services Organisation

- Almost six in ten (57.8%) attendances at Type 1 departments in June 2021 were triaged as level 1 / 2 or 3, compared with 57.4% in June 2020 (Table 3, Table 10L).
- Almost a fifth (19.9%) of patients were triaged at level 1 / 2 in June 2021, less than April 2021 (20.6%) and May 2021 (21.0%) (Table 3, Table 10L).
- During June 2021, almost a third of patients attending Altnagelvin Area (32.1%) were triaged at level 1 / 2, compared with 11.2% of those attending the RBHSC (Table 3, Table 10L).

²³ Data are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and waits.

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

²⁵ Information for June 2020 and April, May and June 2021 is detailed in Appendix 4: Table 10L.

²⁶ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

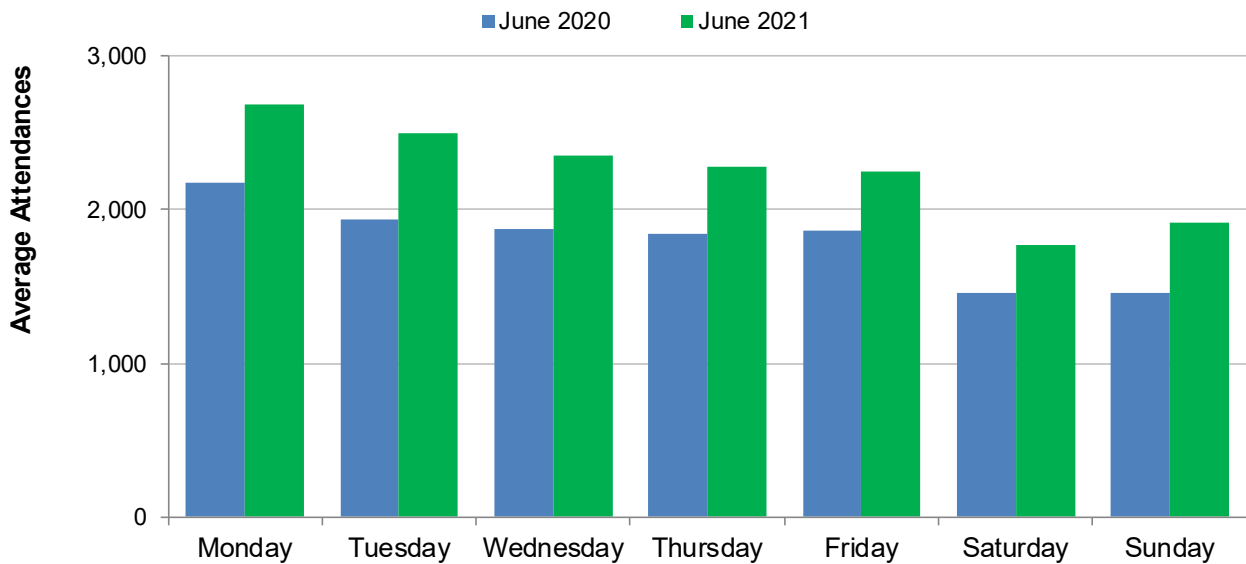
²⁷ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

²⁸ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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 June 2021, compared with June 2020.^{29, 30, 31, 32}

Figure 3: Average Number of Attendances at Emergency Care Departments by Day of Week (June 2020 - June 2021)³³



- Overall, Monday was the busiest day at EDs during both June 2020 and June 2021, with over 2,600 daily attendances on average each Monday during June 2021 (Figure 3, Table 10I).
- The largest increase in average daily attendances between June 2020 and June 2021 (558) was on a Tuesday (1,934 and 2,493 respectively) (Figure 3, Table 10I).
- The lowest average number of daily attendances was on a Saturday during June 2021 (1,455) and June 2020 (1,771) (Figure 3, Table 10I).

²⁹ Information for June 2020 and April, May and June 2021 is detailed in Appendix 4, Table 10I.

³⁰ 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.

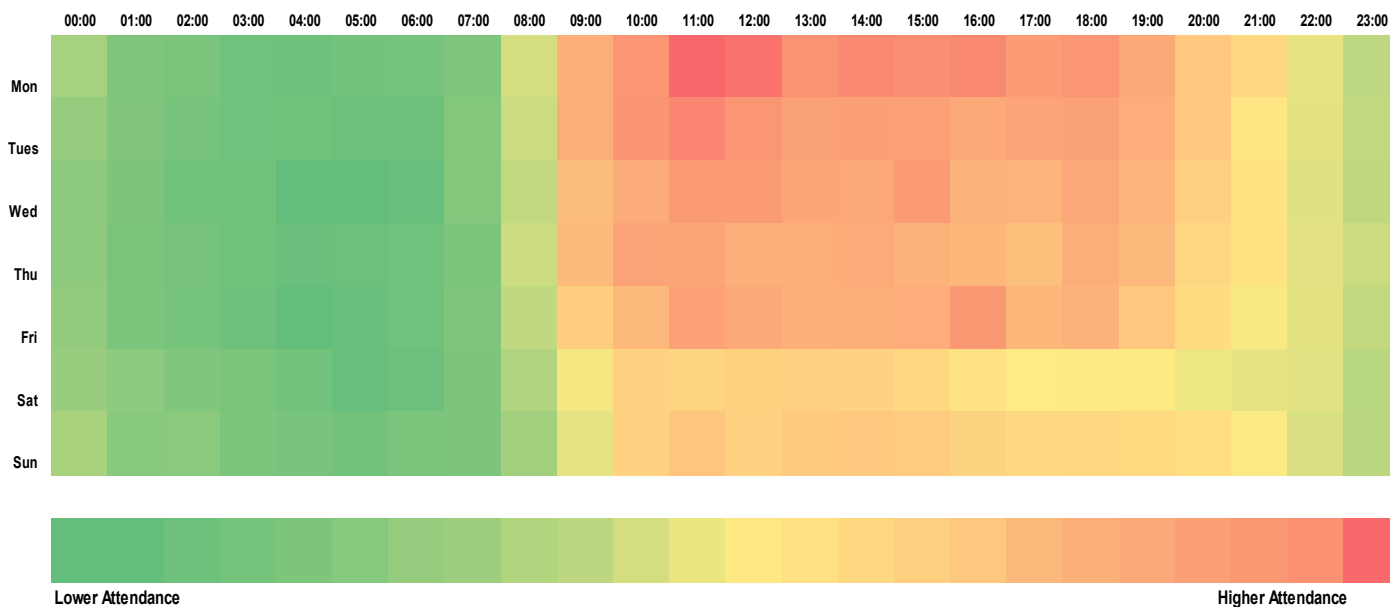
³¹ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

³² Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

³³ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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 June 2021. 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.^{34, 35, 36}

Figure 4: Heat Map of Emergency Care Attendances by Day and Time (June 2021)³⁷



- Monday was the busiest day of the week during June 2021, with the highest number of attendances arriving between 11:00am and 11:59am (Figure 4).
- Saturday was the least busy day during June 2021, with the highest number of attendances arriving between 13:00pm and 13:59pm (Figure 4).
- Overall, the busiest hour of the day during June 2021 was between 11:00am and 11:59am, whilst the least busy hour was 5:00am to 5:59am (Figure 4).

³⁴ 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.

³⁵ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

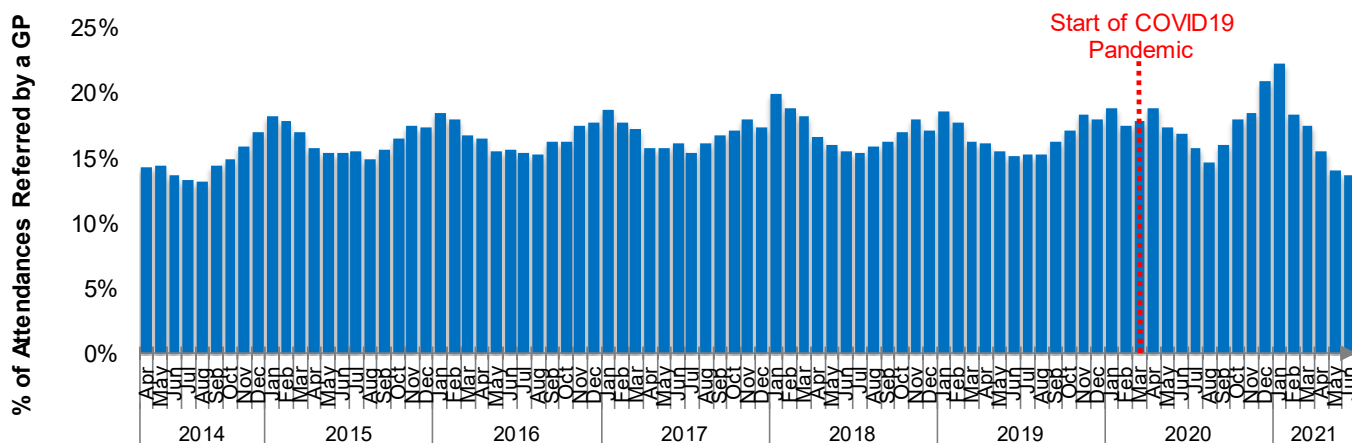
³⁶ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

³⁷ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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.^{38, 39, 40, 41}

Figure 5: Percentage of Attendances at Emergency Care Departments Referred by a GP (April 2014 – June 2021)⁴²



- In June 2021, almost a sixth (13.7%) of attendances at EDs had been referred by a GP, compared with 16.8% in June 2020 (Figure 5, Table 10C).
- Type 1 EDs reported the highest percentage of attendances referred by a GP (15.4%) during June 2021, compared with 18.7% in June 2020 (Table 10C).
- Over a quarter (26.4%) of attendances at Craigavon Area had been referred by a GP during June 2021, compared 3.5% of attendances in RBHSC (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).

³⁸ Information for June 2020 and April, May and June 2021 is detailed in Appendix 4, Table 10C.

³⁹ 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.

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

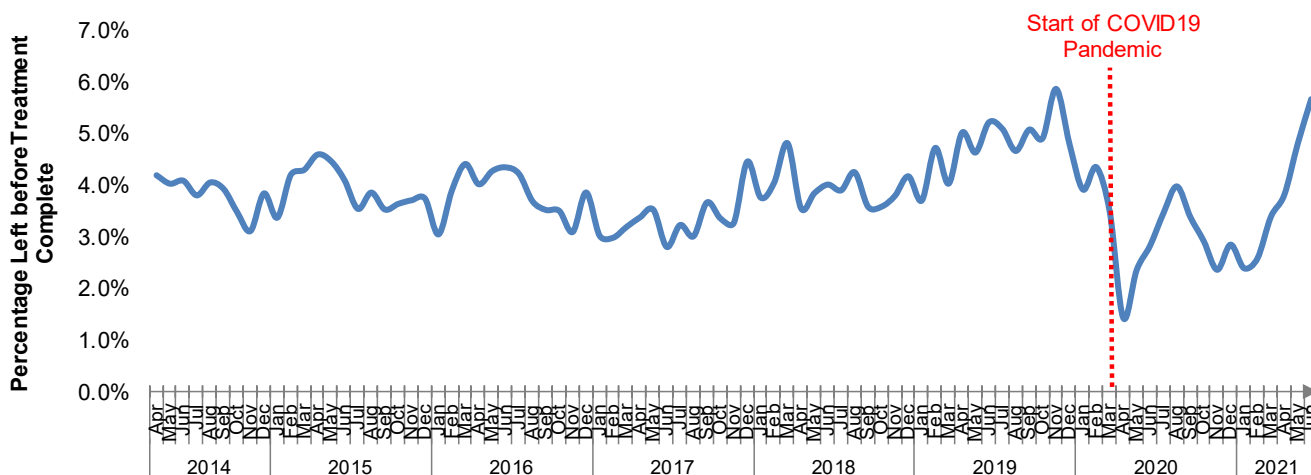
⁴¹ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

⁴² Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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. ^{43, 44, 45, 46}

Figure 6: Percentage of Attendances Leaving the Emergency Care Department before their Treatment was Complete (April 2014 – June 2021)⁴⁷



- During June 2021, 5.7% of all ED attendances left before their treatment was complete, compared with 2.8% in June 2020 (Figure 6, Table 10C).
- Type 1 EDs reported the highest percentage (6.5%) of patients leaving before their treatment was complete in June 2021, with 1.1% reported for Type 2 EDs and 0.8% for Type 3 EDs (Table 10C).
- The Royal Victoria (11.0%) reported the highest percentage of attendances leaving an ED before their treatment was complete during June 2021, compared with 6.6% in June 2020 (Table 10C).
- During the last 12 months, the percentage of attendances leaving ED before their treatment was complete was highest in June 2020 (5.7%) (Figure 6, Table 10C).

⁴³ Information for June 2020 and April, May and June 2021 is detailed in Appendix 4, Table 10C.

⁴⁴ 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.

⁴⁵ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

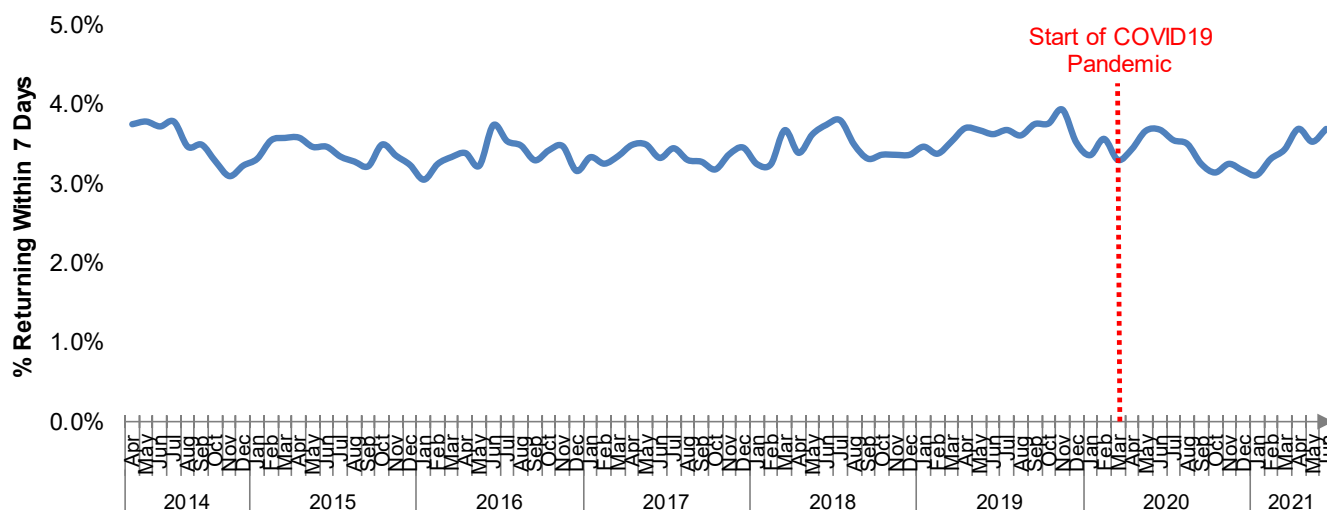
⁴⁶ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

⁴⁷ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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. ^{48, 49, 50, 51}

Figure 7: Percentage of Re-attendances at Emergency Care Departments within 7 Days (April 2014 – June 2021) ⁵²



- 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 3.1% and 3.9% of the total number of ED attendances (Figure 7).
- During June 2021, 3.7% of attendances had attended the same ED within 7 days of their original attendance, similar to 3.7% in June 2020 (Figure 7, Table 10C).
- The South West Acute (7.8%) reported the highest percentage of unplanned review attendances within 7 days of the original attendance during June 2021 (Table 10C).

⁴⁸ Information for June 2020 and April, May and June 2021 is detailed in Appendix 4, Table 10C.

⁴⁹ 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.

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

⁵¹ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

⁵² Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

How Long Do Patients Spend in ED?

Emergency Care Waiting Times Targets

The current DOH targets⁵³ on emergency care waiting times in Northern Ireland for 2021/22 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 2022, 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.

⁵³ 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.^{54, 55}

Table 4: Performance against Emergency Care Waiting Times Target (June 2020 - June 2021)⁵⁶

% Within 4 Hours	Jun 2020	Apr 2021	May 2021	Jun 2021	Diff (Jun 2020 - Jun 2021)	
					No.	%
Type 1	65.5%	56.7%	53.8%	53.9%	-	-11.6%
Type 2	83.4%	86.3%	87.0%	85.7%	-	2.3%
Type 3	99.7%	99.9%	99.6%	98.9%	-	-0.7%
Total	69.1%	61.7%	59.3%	59.7%	-	-9.4%
Over 12 Hours	Jun 2020	Apr 2021	May 2021	Jun 2021	Diff (Jun 2020 - Jun 2021)	
					No.	%
Type 1	1,839	3,815	4,914	5,488	3,649	-
Type 2	1	.	1	4	3	-
Type 3	.	.	.	.	.	-
Total	1,840	3,815	4,915	5,492	3,652	-
New & Unplanned Review Attendances	Jun 2020	Apr 2021	May 2021	Jun 2021	Diff (Jun 2020 - Jun 2021)	
					No.	%
Type 1	47,512	51,272	56,218	57,883	10,371	21.8%
Type 2	2,326	3,636	3,937	4,279	1,953	84.0%
Type 3	4,603	4,384	4,992	5,695	1,092	23.7%
Total	54,441	59,292	65,147	67,857	13,416	24.6%

Source: Regional Data Warehouse, Business Services Organisation

- Almost six in ten (59.7%) attendances in June 2021 were discharged or admitted within 4 hours, compared with 69.1% in June 2020 (Table 10B & 10J).
- Over half (53.9%) of attendances at Type 1 EDs in June 2021 waited less than 4 hours, compared with 85.7% at Type 2 EDs and 98.9% at Type 3 EDs (Table 4, Table 10B & 10J).
- Between June 2020 and June 2021, the number waiting over 12 hours increased from 1,840 to 5,492, accounting for 8.1% of all attendances in June 2021 (Table 4, Table 10B & 10J).
- During this period, EDs experienced a 24.6% increase in attendances (54,441 to 67,857), and 4 hour performance decreased from 69.1% to 59.7% (Table 4, Table 10B & 10J).
- During the quarter ending 31st June 2021, over six in ten (60.2%) patients waited less than 4 hours at an ED, compared with 71.1% during the same quarter in 2020.
- Between April 2021 and June 2021, the percentage waiting less than 4 hours was highest in April 2021 (61.7%) and lowest in May 2021 (59.3%), whilst the number waiting over 12 hours was highest in June 2021 (5,492) and lowest in April 2021 (3,815) (Table 4, Table 10B).

⁵⁴ 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>

⁵⁵ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

⁵⁶ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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 June 2021 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.^{57, 58, 59}

Table 5: Performance against the 4 and 12 Hour Components of the Emergency Care Waiting Times Target at Type 1 EDs (June 2020 - June 2021)^{60, 61}

Department	4 Hour Performance		12 Hour Performance		Total Attendances	
	Jun 2020	Jun 2021	Jun 2020	Jun 2021	Jun 2020	Jun 2021
Mater	68.2%	57.2%	3	199	688	2,426
Royal Victoria	52.4%	30.7%	112	1,134	8,932	6,938
RBHSC	91.6%	77.6%	-	-	2,331	4,129
Antrim Area	72.1%	60.8%	231	671	7,099	8,344
Causeway	77.8%	64.8%	103	280	3,464	4,201
Ulster	66.4%	57.9%	449	1,166	7,892	9,801
Craigavon Area	65.0%	43.0%	551	942	8,831	7,355
Daisy Hill	-	61.7%	-	233	-	5,005
Altnagelvin Area	56.9%	42.7%	339	618	5,456	6,089
South West Acute	68.6%	60.0%	51	245	2,819	3,595
Type 1	65.5%	53.9%	1,839	5,488	47,512	57,883
Type 2	83.4%	85.7%	1	4	2,326	4,279
Type 3	99.7%	98.9%	-	-	4,603	5,695
Northern Ireland	69.1%	59.7%	1,840	5,492	54,441	67,857

Source: Regional Data Warehouse, Business Services Organisation

- During June 2021, the RBHSC (77.6%) reported the highest performance of the four hour target at any Type 1 ED, whilst the Royal Victoria (30.7%) reported the lowest (Table 5, Table 10B).
- RBHSC was the only Type 1 ED to achieve the 12-hour target during June 2021 (Table 5, Table 10B).
- The Ulster (1,166) reported the highest number of patients waiting over 12 hours during June 2021 (Table 5, Table 10B).
- Between June 2020 and June 2021, performance against the 12 hour target declined at nine of the ten Type 1 EDs, whilst the RBHSC achieved the target in both months (Table 5, Table 10B).

⁵⁷ Information for June 2020 and April, May and June 2021 is detailed in Appendix 4: Table 10B & Table 10J.

⁵⁸ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

⁵⁹ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

⁶⁰ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

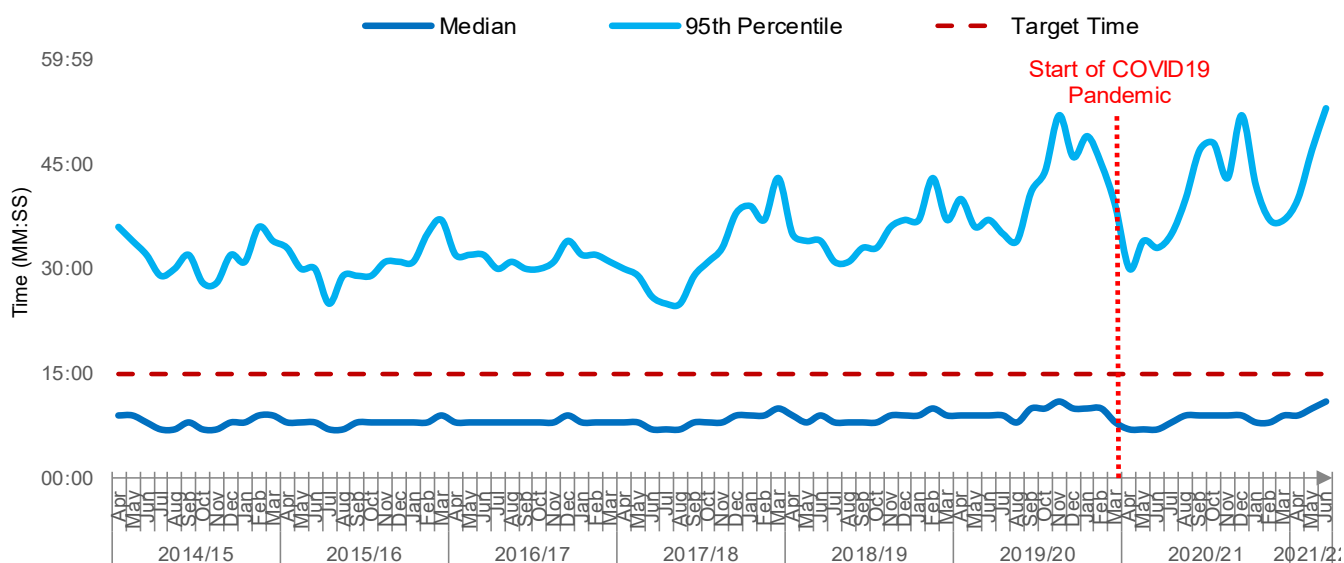
⁶¹ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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.^{62, 63}

Two aspects of the time waited are reported, including (i) the 95th 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 - June 2021)^{64, 65, 66}



- During June 2021, the median waiting time from arrival to triage was 11 minutes, 4 minutes more than June 2020 (7 minutes)(Figure 9, Table 10D).
- 95 percent of patients were triaged within 53 minutes of their arrival at an ED in June 2021, 20 minutes more than the time taken in June 2020 (33 minutes) (Figure 9, Table 10D).
- Almost three quarters (64.8%) of attendances were triaged within 15 minutes of their arrival at an ED during June 2021, compared with 78.5% in June 2020.
- During each of the last 3 months, the median time waited to triage was longest in June (11 minutes), and shortest in April (9 minutes), whilst the time taken to triage 95 percent of patients was also longest during June (53 minutes) and shortest in April (40 minutes) (Table 10D).

⁶² Data on time to triage are not National Statistics, and are included to provide users with a comprehensive view of ED activity and waits.

⁶³ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

⁶⁴ Additional information on time to triage is detailed in Appendix 4: Table 10D.

⁶⁵ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

⁶⁶ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Table 6 presents information on the percentage of patients commencing treatment, following triage, within 2 hours at Type 1 EDs in June 2021, 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.^{67 68}

Table 6: Performance against the Target to Commence Treating Patients within 2 Hours of them being Triaged (June 2020 - June 2021)^{69, 70, 71}

Department	Jun 2020	Apr 2021	May 2021	Jun 2021
Mater	99.8%	90.2%	80.6%	82.7%
Royal Victoria	70.7%	62.8%	57.9%	55.3%
RBHSC	99.5%	90.0%	91.1%	77.1%
Antrim Area	83.3%	74.0%	68.5%	70.9%
Causeway	97.4%	86.7%	79.6%	79.6%
Ulster	90.5%	86.0%	84.0%	78.8%
Craigavon Area	87.2%	57.0%	50.7%	50.6%
Daisy Hill	0.0%	80.1%	72.0%	76.2%
Altnagelvin Area	77.6%	63.2%	53.5%	51.8%
South West Acute	90.3%	90.6%	76.8%	79.5%
Type 1	84.9%	75.3%	69.8%	68.4%
Type 2	98.2%	95.8%	96.6%	94.4%
Type 3	99.4%	99.9%	98.4%	96.9%
Northern Ireland	86.6%	78.1%	73.3%	72.2%

Source: Regional Data Warehouse, Business Services Organisation

- Almost three quarters (72.2%) of patients attending EDs in June 2021 commenced their treatment within 2 hours of being triaged, compared with 86.6% in June 2020 (Table 6, Table 10K).
- During June 2021, almost seven in ten (68.4%) patients commenced their treatment within 2 hours of being triaged at Type 1 EDs, compared with 94.4% at Type 2 EDs and 96.9% at Type 3 EDs (Table 6, Table 10K).
- The Mater (82.7%) was the only Type 1 EDs to achieve the 80% target in June 2021 (Table 6, Table 10K).
- During June 2021, the Mater (82.7%) reported the highest percentage commencing treatment within 2 hours, whilst Craigavon Area (50.6%) reported the lowest (Table 6, Table 10K).
- Between April and June 2020, the highest percentage of patients commencing treatment within 2 hours was in April 2021 (78.1%) whilst the lowest was in June 2021 (72.2%), (Table 6)..

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

⁶⁸ Additional information on the percentage of patients commencing treatment within 2 hours of triage is detailed in Appendix 4: Table 10K.

⁶⁹ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

⁷⁰ Readers should note the reduction in attendances at EDs from March 2020, at the start of the COVID19 pandemic

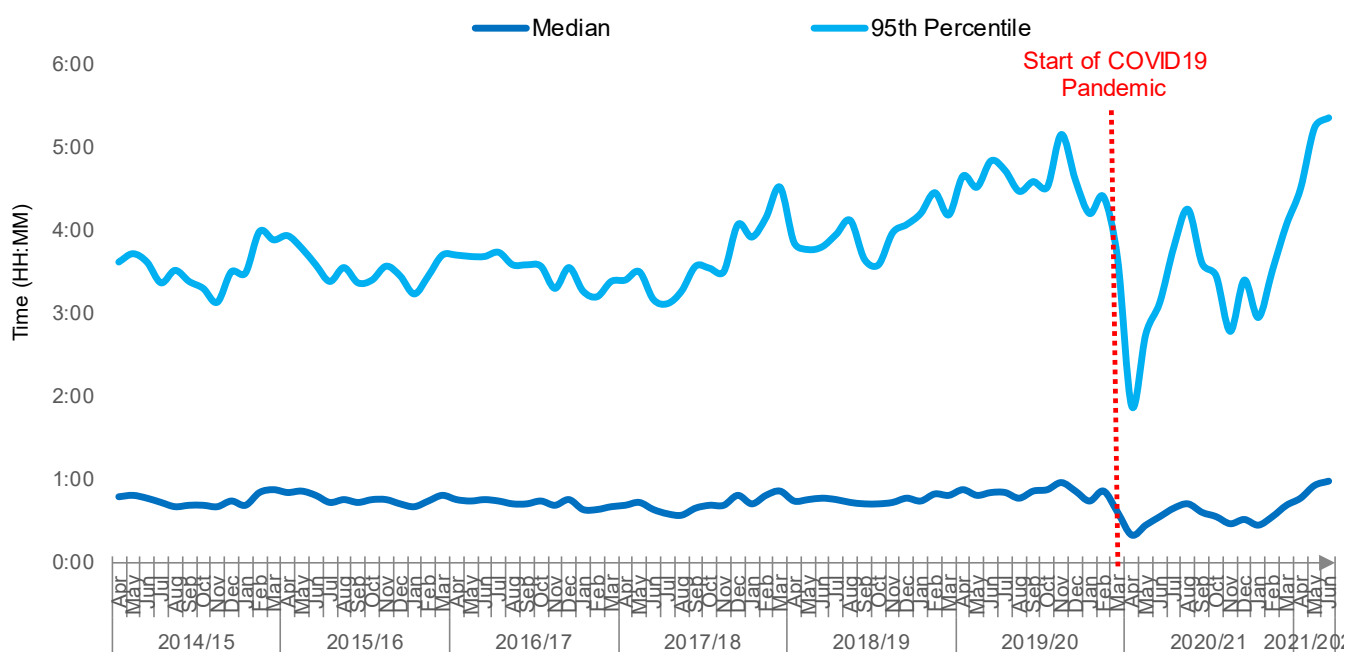
⁷¹ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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.^{72, 73}

Two aspects of the time waited are reported, including (i) the 95th 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 – June 2021)^{74, 75, 76}



- The median waiting time from triage to start of treatment in June 2021 was 58 minutes, 25 minutes more than the time taken in June 2020 (33 minutes) (Figure 10, Table 10E).
- During June 2021, 95 percent of patients commenced treatment within 5 hours 21 minutes of being triaged, 2 hours 13 minutes more than June 2020 (3 hours 8 minutes) (Figure 10, Table 10E).
- Across each of the last 3 months, the median waiting time to start of treatment was longest in June 2021 (58 minutes) and shortest in April 2021 (46 minutes), whilst the time within which 95 percent of patients started treatment was also longest in June 2021 (5 hours 21 minutes) and shortest in April 2021 (4 hours 30 minutes) (Table 10D).

⁷² Data on start of treatment are not National Statistics, and are included to provide users with a comprehensive view of ED activity and waits.

⁷³ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

⁷⁴ Additional information on time to triage is detailed in Appendix 4: Table 10E.

⁷⁵ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

⁷⁶ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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

Table 7 details the median and 95th percentile of the length of time waited from triage to the start of treatment at Type 1 EDs during June 2021, compared with June 2020. ^{77, 78}

Table 7: Time from Triage to Start of Treatment (June 2020 and June 2021) ^{79, 80, 81, 82}

Department	Median		95th Percentile	
	June 2020	June 2021	June 2020	June 2021
Mater	0:08	0:36	0:44	3:11
Royal Victoria	1:06	1:39	4:55	7:45
RBHSC	0:18	1:07	1:05	3:15
Antrim Area	0:52	1:11	3:01	5:05
Causeway	0:17	0:51	1:35	3:39
Ulster	0:35	0:49	2:26	4:07
Craigavon Area	0:41	1:57	2:54	7:57
Daisy Hill	0:00	1:01	0:00	4:59
Altnagelvin Area	0:51	1:54	3:45	5:57
South West Acute	0:23	0:40	2:50	4:11
Type 1	0:39	1:09	3:16	5:39
Type 2	0:18	0:29	1:25	2:04
Type 3	0:04	0:06	0:33	1:26
Northern Ireland	0:33	0:58	3:08	5:21

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 9 minutes in June 2021, 30 minutes more than June 2020 (39 minutes) (Table 7, Table 10E).
- Craigavon Area (1 hour 57 minutes) reported the longest median waiting time from triage to start of treatment during June 2021, whilst the Mater (36 minutes) reported the shortest median waiting time (Table 7, Table 10E).
- Craigavon Area reported the longest waiting time between triage and start of treatment, with 95 percent of attendances commencing treatment within 7 hours 57 minutes of being triaged; 5 hours 3 minutes more than the time taken in June 2020 (2 hours 54 minutes) (Table 7, Table 10E).
- The Mater reported the shortest time to start of treatment during June 2021, with 95 percent of attendances commencing treatment within 3 hours 11 minutes of being triaged, 2 hours 27 minutes more than the time taken in June 2020 (44 minutes) (Table 7, Table 10E).

⁷⁷ 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.

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

⁷⁹ Information for June 2020 and April, May and June 2021 is detailed in Appendix 4, Table 10E.

⁸⁰ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

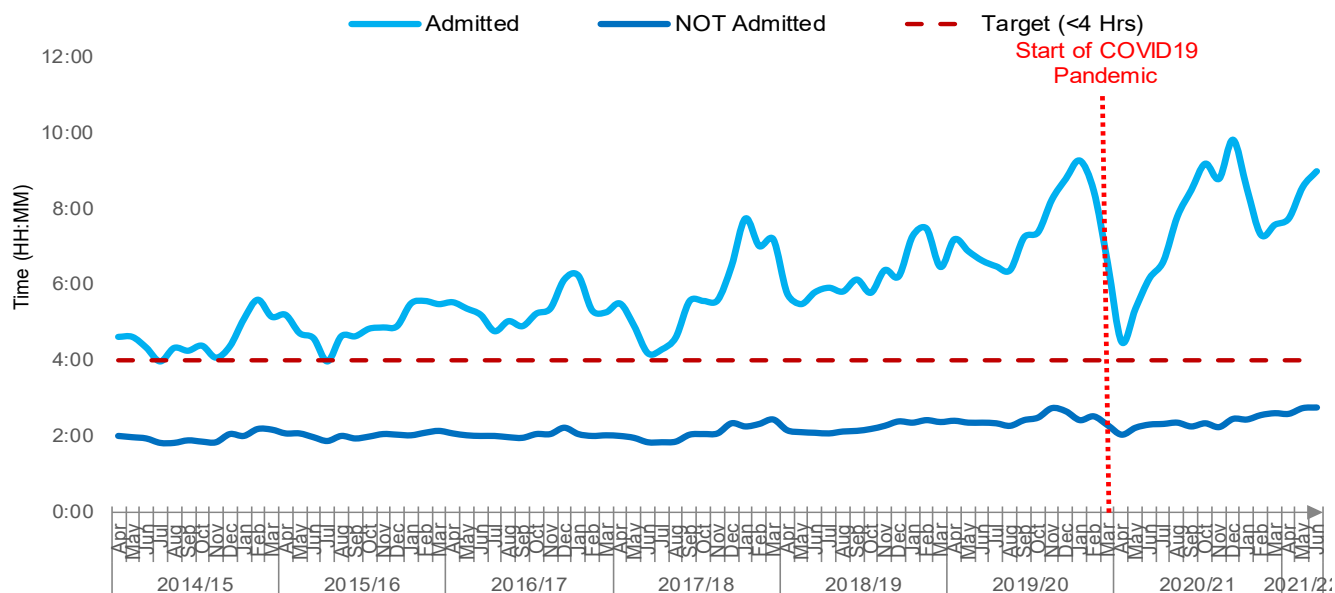
⁸¹ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

⁸² Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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.^{83, 84, 85}

Figure 11: Median Time Spent in an Emergency Care Department for those (i) Admitted to Hospital and (ii) Discharged Home (April 2014 to June 2021)^{86, 87}



- During June 2021, the median time patients admitted to hospital spent in ED was 9 hours, compared to 2 hours 46 minutes for those discharged home (Figure 11, Table 10F & 10G).
- During June 2021, 95 percent of attendances were admitted to hospital within 27 hours 46 minutes of their arrival, almost three times longer than the time waited by 95 percent of those discharged home (9 hours 7 minutes) (Table 8 & 9).
- During the last 3 months, the median time patients admitted spent in ED was longest in June 2021 (9 hours) and shortest in April 2021 (7 hours 45 minutes) (Table 10F).
- During this period, the median time waited by patients discharged home was longest in June 2021 (2 hours 46 minutes) and shortest in April 2021 (2 hours 36 minutes) (Table 10G).
- During this period, the longest time waited by up to 95 percent of patients admitted was in June 2021 (27 hours 46 minutes) and shortest in April 2021 (24 hours 5 minutes) (Table 10F).
- During this period, the longest time waited by up to 95 percent of patients discharged home was in May 2021 (9 hours 11 minutes) and shortest in April 2021 (8 hours 20 minutes) (Table 10G).

⁸³ Data are not National Statistics, and are included to provide users with a comprehensive view of ED activity and waits.

⁸⁴ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

⁸⁵ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

⁸⁶ Further breakdown of EDs can be found in Appendix 4, Table 10F and 10G.

⁸⁷ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

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

Table 8 details the median and 95th percentile length of time spent in an ED from arrival to leaving the ED for those who **were admitted** to hospital.⁸⁸

Table 8: Total Time Spent in an Emergency Care Department for those Admitted to Hospital (June 2020 - June 2021)^{89, 90, 91, 92, 93}

Department	Median		95th Percentile	
	June 2020	June 2021	June 2020	June 2021
Mater	3:22	8:26	7:57	23:26
Royal Victoria	6:00	10:13	11:35	25:50
RBHSC	2:53	4:34	6:08	8:17
Antrim Area	5:03	7:24	17:45	32:44
Causeway	5:28	7:55	18:30	25:53
Ulster	7:20	11:56	21:14	30:09
Craigavon Area	8:36	10:36	25:29	28:46
Daisy Hill	0:00	7:32	0:00	26:20
Altnagelvin Area	8:11	10:58	23:59	26:47
South West Acute	5:23	7:11	11:57	25:09
Type 1	6:13	9:09	20:49	27:50
Type 2	4:23	5:02	8:37	9:25
Type 3	2:13	2:56	3:59	7:32
Northern Ireland	6:10	9:00	20:42	27:46

Source: Regional Data Warehouse, Business Services Organisation

- The median time patients who were admitted to hospital spent in a Type 1 ED was 9 hours 9 minutes in June 2021, 2 hours 56 minutes more than the same month last year (6 hours 13 minutes) (Table 8, Table 10F).
- During June 2020, the Ulster reported the longest median waiting time from arrival to admission (11 hours 56 minutes), whilst the RBHSC reported the shortest time (4 hours 34 minutes) (Table 8, Table 10F).
- 95 percent of patients were admitted to hospital within 27 hours 50 minutes at Type 1 EDs in June 2021, 7 hours 1 minute more than in June 2020 (20 hours 49 minutes) (Table 8, Table 10F).
- Between June 2020 and June 2021, the Mater reported the largest increase (from 7 hours 57 minutes to 23 hours 26 minutes) in the time taken for up to 95% of patients to be admitted to hospital (Table 8, Table 10F).

⁸⁸ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

⁸⁹ Information for June 2020 and April, May and June 2021 is detailed in Appendix 4, Table 10F.

⁹⁰ 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.

⁹¹ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

⁹² Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

⁹³ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

How Long Did Patients Discharged Home Spend in an ED?

Table 9 details the median and 95th percentile length of time spent in an ED from arrival to leaving the ED for those who **were discharged home**.^{94, 95}

Table 9: Total Time Spent in Emergency Care Departments for those Discharged Home (June 2020 - June 2021)^{96, 97, 98}

Department	Median		95th Percentile	
	June 2020	June 2021	June 2020	June 2021
Mater	2:23	2:31	7:38	8:10
Royal Victoria	3:25	5:09	8:12	14:25
RBHSC	1:26	2:36	4:10	5:34
Antrim Area	2:19	2:49	5:47	8:04
Causeway	1:59	2:35	5:36	7:39
Ulster	2:28	2:52	6:17	7:53
Craigavon Area	2:47	3:55	7:41	11:57
Daisy Hill	0:00	2:45	0:00	8:09
Altnagelvin Area	3:18	4:03	7:02	9:44
South West Acute	2:16	2:57	6:26	8:41
Type 1	2:37	3:12	7:02	9:45
Type 2	1:44	1:44	5:23	5:02
Type 3	0:31	0:43	1:34	2:38
Northern Ireland	2:19	2:46	6:46	9:07

Source: Regional Data Warehouse, Business Services Organisation

- The median time patients discharged home (not admitted) spent in a Type 1 ED was 3 hours 12 minutes in June 2021, 35 minutes more than the time taken during the same month last year (2 hour 37 minutes) (Table 9, Table 10G).
- In June 2021, 95 percent of attendances at Type 1 EDs were discharged home within 9 hours 45 minutes of their arrival, 2 hours 43 minutes more than the time taken in June 2020 (7 hours 2 minutes) (Table 9, Table 10G).

⁹⁴ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

⁹⁵ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

⁹⁶ Information for June 2020 and April, May and June 2021 is detailed in Appendix 4, Table 10G.

⁹⁷ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

⁹⁸ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

Appendix 1: 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 ⁹⁹

HSC Trust	Type 1 (24-hour assess)	Type 2 (Limited opening hours)	Type 3 (Minor Injuries Unit, MIU)
Belfast	Belfast City (Closed)		
	Mater	RVH (Eye Casualty) ¹⁰⁰ (9-5pm Mon-Fri) (8.30-1pm Sat)	
	Royal Victoria		
	Royal Belfast Hospital for Sick Children (RBHSC)		
Northern	Antrim Area		Whiteabbey ¹⁰¹ (Closed)
	Causeway		Mid Ulster (9-5pm Mon-Fri)
South Eastern	Ulster	Lagan Valley (8-8pm Mon-Fri)	Ards MIU (9-5pm Mon-Fri)
		Downe ¹⁰²	Bangor MIU ¹⁰³ (Closed)
Southern	Craigavon Area		South Tyrone (9-9pm Mon-Fri) (10-6pm Sat-Sun)
	Daisy Hill ¹⁰⁴		Armagh Community ¹⁰⁵ (Closed)
			Craigavon Respiratory ED (Covid-19) ¹⁰⁶
			Craigavon Paediatric ED ¹⁰⁷
Western	Altnagelvin Area		Tyrone County (Closed)
	South West Acute		Omagh ¹⁰⁸ (24-hour)

⁹⁹ Opening Hours are as of June 2017.

¹⁰⁰ RVH (RAES) refers to the Regional Acute Eye Services at the Royal Victoria Hospital.

¹⁰¹ Temporarily closed on 1st December 2014.

¹⁰² Temporarily closed 30th March 2020, reopened as a MIU 10th August 2020, reopened as an Urgent Care Centre 19th October 2020.

¹⁰³ Temporarily closed 12th March 2020.

¹⁰⁴ Temporarily closed between 28th March 2020 and 19th October 2020.

¹⁰⁵ Temporarily closed on 17th November 2014.

¹⁰⁶ Temporarily opened on 29th March 2020 and closed on 19th October 2020.

¹⁰⁷ Temporarily opened on 31st March 2020 and closed on 12th June 2020.

¹⁰⁸ Tyrone County closed on 20th 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^{109, 110, 111, 112, 113}

Department	New Attendances				Unplanned Reviews				Total Attendances			
	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021
Mater	684	1,547	1,966	2,366	4	33	50	60	688	1,580	2,016	2,426
Royal Victoria	8,496	6,460	7,105	6,874	436	94	87	64	8,932	6,554	7,192	6,938
RBHSC	2,170	2,992	3,319	3,780	161	262	283	349	2,331	3,254	3,602	4,129
Antrim Area	6,716	7,134	7,603	7,863	383	420	447	481	7,099	7,554	8,050	8,344
Causeway	3,213	3,370	4,003	4,081	251	142	154	120	3,464	3,512	4,157	4,201
Ulster	7,655	8,458	9,168	9,324	237	371	414	477	7,892	8,829	9,582	9,801
Craigavon Area	8,148	6,120	6,557	6,789	683	537	559	566	8,831	6,657	7,116	7,355
Daisy Hill	-	4,209	4,631	4,612	-	371	356	393	-	4,580	4,987	5,005
Altnagelvin Area	5,047	5,154	5,424	5,607	409	473	466	482	5,456	5,627	5,890	6,089
South West Acute	2,534	2,842	3,275	3,242	285	283	351	353	2,819	3,125	3,626	3,595
Type 1	44,663	48,286	53,051	54,538	2,849	2,986	3,167	3,345	47,512	51,272	56,218	57,883
Eye Casualty	563	621	686	676	40	73	78	132	603	694	764	808
Downe	0	833	961	1,070	0	45	39	46	0	878	1,000	1,116
Lagan Valley	1,653	1,971	2,083	2,258	70	93	90	97	1,723	2,064	2,173	2,355
Type 2	2,216	3,425	3,730	4,004	110	211	207	275	2,326	3,636	3,937	4,279
Mid Ulster	697	453	489	622	31	8	14	16	728	461	503	638
Ards	768	729	755	939	29	11	5	2	797	740	760	941
Bangor	-	-	-	-	-	-	-	-	-	-	-	-
South Tyrone	1,963	1,970	2,362	2,436	87	62	70	44	2,050	2,032	2,432	2,480
Omagh	898	1,051	1,191	1,499	130	100	106	137	1,028	1,151	1,297	1,636
Type 3	4,326	4,203	4,797	5,496	277	181	195	199	4,603	4,384	4,992	5,695
Northern Ireland	51,205	55,914	61,578	64,038	3,236	3,378	3,569	3,819	54,441	59,292	65,147	67,857

¹⁰⁹ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹¹⁰ CAH Paediatric ED C-19 and CAH Respiratory ED C-19 were opened in March 2020 in response to Covid-19 pandemic.

¹¹¹ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

¹¹² Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

¹¹³ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Table 10B: Performance against Emergency Care Waiting Times Target^{114, 115, 116, 117, 118}

Department	4 - Hour Performance				12 - Hour Performance				Total Attendances			
	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021
Mater	68.2%	56.4%	54.5%	57.2%	3	55	170	199	688	1,580	2,016	2,426
Royal Victoria	52.4%	33.0%	33.5%	30.7%	112	822	948	1,134	8,932	6,554	7,192	6,938
RBHSC	91.6%	85.2%	86.4%	77.6%	0	0	0	0	2,331	3,254	3,602	4,129
Antrim Area	72.1%	62.9%	58.4%	60.8%	231	563	735	671	7,099	7,554	8,050	8,344
Causeway	77.8%	67.5%	65.6%	64.8%	103	138	259	280	3,464	3,512	4,157	4,201
Ulster	66.4%	60.8%	60.2%	57.9%	449	730	1,020	1,166	7,892	8,829	9,582	9,801
Craigavon Area	65.0%	46.0%	41.9%	43.0%	551	612	819	942	8,831	6,657	7,116	7,355
Daisy Hill	-	64.9%	59.2%	61.7%	-	180	214	233	-	4,580	4,987	5,005
Altnagelvin Area	56.9%	47.5%	42.1%	42.7%	339	551	543	618	5,456	5,627	5,890	6,089
South West Acute	68.6%	66.3%	56.0%	60.0%	51	164	206	245	2,819	3,125	3,626	3,595
Type 1	65.5%	56.7%	53.8%	53.9%	1,839	3,815	4,914	5,488	47,512	51,272	56,218	57,883
Eye Casualty	89.1%	89.8%	86.3%	85.8%	0	0	0	0	603	694	764	808
Downe	-	98.6%	99.6%	99.5%	0	0	0	0	-	878	1,000	1,116
Lagan Valley	81.4%	79.8%	81.5%	79.1%	1	0	1	4	1,723	2,064	2,173	2,355
Type 2	83.4%	86.3%	87.0%	85.7%	1	0	1	4	2,326	3,636	3,937	4,279
Mid Ulster	100.0%	100.0%	100.0%	99.8%	0	0	0	0	728	461	503	638
Ards	100.0%	100.0%	100.0%	99.9%	0	0	0	0	797	740	760	941
Bangor	-	-	-	-	-	-	-	-	-	-	-	-
South Tyrone	100.0%	100.0%	100.0%	100.0%	0	0	0	0	2,050	2,032	2,432	2,480
Omagh	98.5%	99.5%	98.4%	96.5%	0	0	0	0	1,028	1,151	1,297	1,636
Type 3	99.7%	99.9%	99.6%	98.9%	0	0	0	0	4,603	4,384	4,992	5,695
Northern Ireland	69.1%	61.7%	59.3%	59.7%	1,840	3,815	4,915	5,492	54,441	59,292	65,147	67,857

¹¹⁴ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹¹⁵ 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>

¹¹⁶ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

¹¹⁷ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

¹¹⁸ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Table 10C: Percentage of Attendances (i) Referred by a GP; (ii) Who Left before Treatment was Complete; and (iii) Re-attended within 7 Days ^{119, 120, 121, 122, 123}

Department	GP Referrals				Left Before Treatment				Unplanned reviews Within 7 Days			
	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021
Mater	16.5%	5.2%	7.8%	5.6%	2.5%	3.7%	4.0%	3.9%	0.4%	1.4%	1.6%	1.7%
Royal Victoria	20.2%	15.4%	11.4%	9.4%	6.6%	9.5%	9.1%	11.0%	3.4%	0.9%	0.7%	0.5%
RBHSC	2.1%	3.6%	3.7%	3.5%	0.5%	2.4%	1.9%	5.9%	4.3%	5.3%	4.8%	6.0%
Antrim Area	23.0%	15.9%	13.0%	13.8%	1.4%	2.6%	3.6%	3.5%	3.2%	3.3%	3.3%	3.4%
Causeway	23.0%	14.5%	13.5%	11.7%	1.7%	3.0%	4.1%	4.6%	4.3%	2.4%	2.4%	2.0%
Ulster	23.9%	23.2%	21.8%	20.9%	1.6%	2.3%	2.9%	3.8%	1.8%	2.6%	3.0%	3.2%
Craigavon Area	16.2%	27.0%	25.6%	26.4%	2.6%	6.2%	8.7%	10.4%	4.8%	5.5%	5.2%	5.1%
Daisy Hill	-	16.1%	17.3%	18.7%	-	2.9%	5.3%	6.3%	-	6.0%	4.3%	5.5%
Altnagelvin Area	10.6%	10.5%	9.6%	10.1%	5.4%	5.2%	6.4%	8.0%	5.5%	6.0%	5.8%	6.3%
South West Acute	21.2%	24.4%	21.7%	22.9%	2.4%	3.6%	6.6%	6.0%	6.4%	6.8%	7.5%	7.8%
Type 1	18.7%	17.3%	15.7%	15.4%	3.2%	4.3%	5.4%	6.5%	3.8%	3.9%	3.7%	4.0%
Eye Casualty	4.6%	2.7%	3.5%	4.2%	0.0%	0.6%	0.4%	0.2%	0.8%	0.3%	0.8%	0.4%
Downe	-	1.9%	1.9%	1.6%	0.0%	0.0%	0.1%	0.2%	-	2.8%	1.7%	2.0%
Lagan Valley	11.7%	12.3%	12.8%	10.7%	1.8%	1.3%	2.3%	1.7%	2.0%	2.0%	2.4%	1.9%
Type 2	9.9%	7.9%	8.3%	7.1%	1.3%	0.9%	1.4%	1.1%	1.7%	1.9%	1.9%	1.6%
Mid Ulster	0.7%	0.7%	0.6%	0.8%	0.0%	0.2%	0.6%	0.5%	2.6%	1.1%	1.2%	1.3%
Ards	0.6%	0.4%	0.4%	0.9%	0.0%	0.1%	0.1%	0.0%	1.5%	0.4%	0.3%	-
Bangor	-	-	-	-	-	-	-	-	-	-	-	-
South Tyrone	0.1%	-	0.0%	-	0.1%	0.0%	0.2%	0.2%	2.3%	1.9%	2.0%	1.1%
Omagh	3.8%	2.9%	2.5%	4.8%	0.8%	0.3%	1.6%	2.5%	6.7%	5.4%	4.9%	5.2%
Type 3	1.1%	0.9%	0.8%	1.6%	0.2%	0.1%	0.6%	0.8%	3.2%	2.5%	2.4%	2.1%
Northern Ireland	16.8%	15.5%	14.1%	13.7%	2.8%	3.8%	4.8%	5.7%	3.7%	3.7%	3.5%	3.7%

¹¹⁹ 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.

¹²⁰ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹²¹ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

¹²² Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

¹²³ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Table 10D: Waiting Time from Arrival to Triage (Assessment)^{124, 125, 126, 127, 128}

Department	Median				95 th Percentile			
	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021
Mater	0:05	0:08	0:10	0:11	0:29	0:34	0:38	0:45
Royal Victoria	0:12	0:12	0:13	0:13	0:53	0:55	1:04	1:07
RBHSC	0:08	0:07	0:08	0:11	0:20	0:26	0:30	0:45
Antrim Area	0:08	0:11	0:12	0:11	0:24	0:29	0:36	0:32
Causeway	0:09	0:09	0:10	0:14	0:25	0:30	0:35	0:48
Ulster	0:07	0:10	0:10	0:11	0:24	0:32	0:37	0:51
Craigavon Area	0:04	0:10	0:13	0:14	0:20	1:03	1:30	1:54
Daisy Hill	-	0:07	0:08	0:10	-	0:24	0:28	0:37
Altnagelvin Area	0:13	0:13	0:13	0:14	0:49	0:47	0:47	0:49
South West Acute	0:09	0:13	0:15	0:12	0:32	0:49	0:54	0:52
Type 1	0:08	0:10	0:11	0:12	0:35	0:42	0:49	0:57
Eye Casualty	0:10	0:09	0:12	0:11	0:40	0:38	0:51	0:40
Downe	-	0:03	0:02	0:02	-	0:11	0:09	0:11
Lagan Valley	0:06	0:06	0:06	0:06	0:19	0:16	0:16	0:18
Type 2	0:07	0:05	0:05	0:05	0:28	0:20	0:26	0:25
Mid Ulster	0:03	0:09	0:12	0:11	0:14	0:40	1:04	1:02
Ards	0:02	0:02	0:02	0:02	0:09	0:10	0:13	0:13
Bangor	-				-			
South Tyrone	0:01	0:01	0:01	0:01	0:07	0:06	0:06	0:09
Omagh	0:04	0:05	0:06	0:09	0:27	0:27	0:27	0:40
Type 3	0:02	0:02	0:02	0:03	0:14	0:17	0:17	0:24
Northern Ireland	0:07	0:09	0:10	0:11	0:33	0:40	0:47	0:53

¹²⁴ 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.

¹²⁵ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹²⁶ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

¹²⁷ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

¹²⁸ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Table 10E: Waiting Time from Triage (Assessment) to Start of Treatment^{129, 130, 131, 132, 133}

Department	Median				95 th Percentile			
	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021
Mater	0:08	0:27	0:36	0:36	0:44	2:48	3:57	3:11
Royal Victoria	1:06	1:11	1:27	1:39	4:55	7:31	7:13	7:45
RBHSC	0:18	0:43	0:46	1:07	1:05	2:29	2:19	3:15
Antrim Area	0:52	1:02	1:13	1:11	3:01	4:27	5:16	5:05
Causeway	0:17	0:42	0:55	0:51	1:35	2:53	3:25	3:39
Ulster	0:35	0:36	0:41	0:49	2:26	3:08	3:22	4:07
Craigavon Area	0:41	1:40	1:58	1:57	2:54	6:35	8:10	7:57
Daisy Hill	-	0:52	1:06	1:01	-	3:46	5:07	4:59
Altnagelvin Area	0:51	1:23	1:48	1:54	3:45	4:41	5:22	5:57
South West Acute	0:23	0:23	0:51	0:40	2:50	2:57	4:50	4:11
Type 1	0:39	0:54	1:05	1:09	3:16	4:45	5:29	5:39
Downe	-	0:10	0:09	0:12	-	0:42	0:36	0:43
Lagan Valley	0:18	0:31	0:36	0:44	1:25	2:05	1:59	2:17
Type 2	0:18	0:23	0:24	0:29	1:25	1:52	1:48	2:04
Mid Ulster	0:06	0:03	0:00	0:01	0:23	0:45	0:16	0:18
Ards	0:04	0:07	0:09	0:11	0:23	0:33	0:42	0:39
Bangor	-			-	-			-
South Tyrone	0:02	0:01	0:00	0:01	0:16	0:22	0:15	0:25
Omagh	0:09	0:12	0:14	0:23	1:15	1:18	2:03	2:36
Type 3	0:04	0:04	0:03	0:06	0:33	0:50	0:53	1:26
Northern Ireland	0:33	0:46	0:55	0:58	3:08	4:30	5:14	5:21

¹²⁹ 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.

¹³⁰ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹³¹ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

¹³² Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

¹³³ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Table 10F: Time Spent in an Emergency Care Department by those Admitted to Hospital^{134, 135, 136, 137, 138}

Department	Median				95 th Percentile			
	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021
Mater	3:22	6:17	8:23	8:26	7:57	13:55	22:51	23:26
Royal Victoria	6:00	8:53	9:03	10:13	11:35	21:30	24:27	25:50
RBHSC	2:53	4:00	3:55	4:34	6:08	7:41	7:16	8:17
Antrim Area	5:03	7:07	8:04	7:24	17:45	27:29	29:14	32:44
Causeway	5:28	6:41	7:42	7:55	18:30	18:58	25:38	25:53
Ulster	7:20	8:36	10:08	11:56	21:14	23:56	26:20	30:09
Craigavon Area	8:36	9:01	9:37	10:36	25:29	26:11	25:41	28:46
Daisy Hill	-	6:45	7:36	7:32	-	22:38	21:04	26:20
Altnagelvin Area	8:11	10:21	10:11	10:58	23:59	27:10	27:29	26:47
South West Acute	5:23	5:58	7:45	7:11	11:57	23:04	22:39	25:09
Type 1	6:13	7:50	8:41	9:09	20:49	24:12	25:40	27:50
Eye Casualty	2:01	1:57	3:37	2:30	6:19	3:56	5:46	8:15
Downe	-	2:13	1:29	2:16	-	6:08	2:21	7:09
Lagan Valley	4:28	4:26	4:52	5:23	8:37	8:06	9:25	9:29
Type 2	4:23	4:19	4:45	5:02	8:37	7:58	9:20	9:25
Mid Ulster	.	.	.	.	.	.	.	.
Ards	.	.	.	.	.	.	.	.
Bangor	-	-	-	-	-	-	-	-
South Tyrone	.	.	.	.	.	.	.	.
Omagh	2:13	2:20	2:37	2:56	3:59	6:12	4:23	7:32
Type 3	2:13	2:20	2:37	2:56	3:59	6:12	4:23	7:32
Northern Ireland	6:10	7:45	8:35	9:00	20:42	24:05	25:38	27:46

¹³⁴ 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.

¹³⁵ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹³⁶ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

¹³⁷ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

¹³⁸ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Table 10G: Time Spent in an Emergency Care Department by those Discharged Home^{139, 140, 141, 142, 143}

Department	Median				95 th Percentile			
	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021
Mater	2:23	2:46	2:42	2:31	7:38	8:11	8:29	8:10
Royal Victoria	3:25	4:48	4:48	5:09	8:12	12:16	12:28	14:25
RBHSC	1:26	2:05	2:02	2:36	4:10	4:49	4:51	5:34
Antrim Area	2:19	2:40	2:53	2:49	5:47	8:09	9:21	8:04
Causeway	1:59	2:33	2:39	2:35	5:36	6:56	7:11	7:39
Ulster	2:28	2:40	2:43	2:52	6:17	6:56	7:44	7:53
Craigavon Area	2:47	3:39	3:57	3:55	7:41	9:59	11:49	11:57
Daisy Hill	-	2:29	2:49	2:45	-	7:03	8:07	8:09
Altnagelvin Area	3:18	3:46	4:06	4:03	7:02	8:58	9:38	9:44
South West Acute	2:16	2:40	3:11	2:57	6:26	8:10	8:41	8:41
Type 1	2:37	3:00	3:10	3:12	7:02	8:52	9:43	9:45
Eye Casualty	1:59	2:05	2:15	2:17	4:31	4:56	5:14	5:12
Downe	-	0:50	0:46	0:50	-	2:36	2:02	2:22
Lagan Valley	1:36	1:52	2:04	2:09	5:35	5:32	5:24	5:33
Type 2	1:44	1:36	1:39	1:44	5:23	5:11	4:58	5:02
Mid Ulster	0:46	0:50	0:55	0:52	1:58	2:13	2:18	2:17
Ards	0:38	0:46	0:47	0:50	1:20	1:29	1:33	1:35
Bangor	-	-	-	-	-	-	-	-
South Tyrone	0:22	0:24	0:24	0:30	0:54	1:04	1:04	1:20
Omagh	0:42	0:52	0:53	1:11	2:26	2:17	2:53	3:43
Type 3	0:31	0:36	0:34	0:43	1:34	1:46	1:55	2:38
Northern Ireland	2:19	2:36	2:45	2:46	6:46	8:20	9:11	9:07

¹³⁹ 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.

¹⁴⁰ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹⁴¹ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

¹⁴² Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

¹⁴³ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Table 10H: Attendances at Emergency Care Departments per 1000-Population by Age Group^{144, 145, 146, 147, 148, 149}

Age Group	Jun 2020	Apr 2021	May 2021	Jun 2021
Under 5	29.6	37.7	41.8	51.6
Aged 5 - 15	16.8	27.7	31.3	34.1
Aged 16 - 44	27.7	28.7	32.4	33.9
Aged 45 - 64	27.9	27.9	29.3	29.1
Aged 65 - 74	32.5	32.1	34.8	34.7
Aged 75 & Over	53.6	55.1	59.7	59.1
Northern Ireland	28.7	31.3	34.4	35.8

Table 10I: Average Number of Attendances by Day of Week^{148, 149}

Day of Week	Jun 2020	Apr 2021	May 2021	Jun 2021
Monday	2,179.6	2,232.0	2,388.2	2,686.0
Tuesday	1,934.2	2,101.3	2,310.8	2,492.6
Wednesday	1,872.8	2,113.3	2,212.0	2,353.8
Thursday	1,846.5	2,053.4	2,209.3	2,283.0
Friday	1,862.0	2,049.6	2,181.0	2,250.3
Saturday	1,455.3	1,599.0	1,692.0	1,771.3
Sunday	1,456.0	1,644.5	1,846.6	1,918.8

¹⁴⁴ Based on the NISRA 2019 mid-year population estimate which was published on 6th May 2020.

¹⁴⁵ 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.

¹⁴⁶ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹⁴⁷ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

¹⁴⁸ Due to the COVID-19 pandemic, readers should note that the reduction in attendances at EDs during March 2020.

¹⁴⁹ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Table 10J: Attendances at Emergency Care Departments, by Time Waited from Arrival to Discharge^{150, 151, 152, 153}

Department	Under 4 Hours				Between 4 and 12 Hours				Over 12 Hours			
	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021
Mater	469	891	1,098	1,387	216	634	748	840	3	55	170	199
Royal Victoria	4,676	2,164	2,412	2,129	4,144	3,568	3,832	3,675	112	822	948	1,134
RBHSC	2,135	2,773	3,111	3,203	196	481	491	926	.	.	.	.
Antrim Area	5,115	4,755	4,705	5,075	1,753	2,236	2,610	2,598	231	563	735	671
Causeway	2,695	2,370	2,725	2,724	666	1,004	1,173	1,197	103	138	259	280
Ulster	5,239	5,365	5,772	5,674	2,204	2,734	2,790	2,961	449	730	1,020	1,166
Craigavon Area	5,743	3,059	2,984	3,166	2,537	2,986	3,313	3,247	551	612	819	942
Daisy Hill	-	2,972	2,951	3,087	-	1,428	1,822	1,685	-	180	214	233
Altnagelvin Area	3,102	2,671	2,479	2,598	2,015	2,405	2,868	2,873	339	551	543	618
South West Acute	1,933	2,073	2,029	2,157	835	888	1,391	1,193	51	164	206	245
Type 1	31,107	29,093	30,266	31,200	14,566	18,364	21,038	21,195	1,839	3,815	4,914	5,488
Eye Casualty	537	623	659	693	66	71	105	115	.	.	.	.
Downe	.	866	996	1,110	.	12	4	6	.	.	.	.
Lagan Valley	1,402	1,648	1,771	1,862	320	416	401	489	1	.	1	4
Type 2	1,939	3,137	3,426	3,665	386	499	510	610	1	.	1	4
Mid Ulster	728	461	503	637	.	.	.	1	.	.	.	.
Ards	797	740	760	940	.	.	.	1	.	.	.	.
Bangor	-	-	-	-	-	-	-	-	-	-	-	-
South Tyrone	2,050	2,032	2,432	2,479	.	.	.	1	.	.	.	.
Omagh	1,013	1,145	1,276	1,578	15	6	21	58	.	.	.	.
Type 3	4,588	4,378	4,971	5,634	15	6	21	61	.	.	.	.
Northern Ireland	37,634	36,608	38,663	40,499	14,967	18,869	21,569	21,866	1,840	3,815	4,915	5,492

¹⁵⁰ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹⁵¹ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

¹⁵² Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

¹⁵³ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Table 10K: Percentage of Patients Commencing Treatment, Following Triage, within 2 Hours^{154, 155, 156, 157, 158}

Department	% Commenced Treatment, Following Triage, within 2 Hours			
	Jun 2020	Apr 2021	May 2021	Jun 2021
Mater	99.8%	90.2%	80.6%	82.7%
Royal Victoria	70.7%	62.8%	57.9%	55.3%
RBHSC	99.5%	90.0%	91.1%	77.1%
Antrim Area	83.3%	74.0%	68.5%	70.9%
Causeway	97.4%	86.7%	79.6%	79.6%
Ulster	90.5%	86.0%	84.0%	78.8%
Craigavon Area	87.2%	57.0%	50.7%	50.6%
Daisy Hill	-	80.1%	72.0%	76.2%
Altnagelvin Area	77.6%	63.2%	53.5%	51.8%
South West Acute	90.3%	90.6%	76.8%	79.5%
Type 1	84.9%	75.3%	69.8%	68.4%
Downe	-	99.9%	100.0%	99.9%
Lagan Valley	98.2%	94.0%	95.1%	91.9%
Type 2	98.2%	95.8%	96.6%	94.4%
Mid Ulster	100.0%	100.0%	100.0%	100.0%
Ards	100.0%	100.0%	100.0%	100.0%
Bangor	-	-	-	-
South Tyrone	100.0%	100.0%	100.0%	100.0%
Omagh	97.0%	99.5%	94.7%	90.6%
Type 3	99.4%	99.9%	98.4%	96.9%
Northern Ireland	86.6%	78.1%	73.3%	72.2%

¹⁵⁴ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹⁵⁵ Information on time to treatment is not recorded at Eye Casualty.

¹⁵⁶ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

¹⁵⁷ Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

¹⁵⁸ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Table 10L: Percentage Triage'd in each Triage Group^{159, 160, 161, 162, 163}

Department	Triage'd Level (1/2)				Triage'd Level (3)				Triage'd Level (4/5)			
	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021	Jun 2020	Apr 2021	May 2021	Jun 2021
Mater	31.2%	25.6%	24.5%	22.7%	46.1%	48.4%	47.6%	45.9%	22.6%	26.0%	27.9%	31.4%
Royal Victoria	16.2%	26.6%	25.7%	26.1%	46.6%	54.1%	55.6%	53.4%	37.2%	19.3%	18.7%	20.5%
RBHSC	8.7%	10.0%	10.2%	11.2%	20.6%	18.3%	19.9%	20.9%	70.7%	71.7%	69.9%	67.9%
Antrim Area	18.1%	17.5%	17.9%	18.1%	51.4%	50.9%	51.4%	49.7%	30.5%	31.6%	30.8%	32.2%
Causeway	17.2%	16.2%	17.3%	17.7%	48.8%	54.8%	54.7%	53.5%	34.0%	29.0%	28.0%	28.8%
Ulster	22.0%	22.8%	23.7%	22.4%	43.8%	44.2%	44.3%	42.8%	34.2%	32.9%	31.9%	34.8%
Craigavon Area	28.3%	30.3%	31.1%	28.5%	39.9%	42.2%	41.0%	40.0%	31.7%	27.5%	27.9%	31.5%
Daisy Hill	-	26.8%	28.1%	25.7%	-	40.8%	40.9%	42.6%	-	32.4%	31.0%	31.8%
Altnagelvin Area	31.5%	31.8%	32.2%	32.1%	33.9%	32.9%	32.1%	32.0%	34.6%	35.3%	35.7%	35.8%
South West Acute	14.8%	14.8%	17.1%	14.7%	41.9%	42.7%	42.3%	40.7%	43.3%	42.5%	40.6%	44.5%
Type 1	21.4%	23.4%	23.8%	22.9%	42.5%	43.5%	43.7%	42.5%	36.1%	33.1%	32.5%	34.7%
Eye Casualty	3.0%	1.0%	2.0%	1.6%	16.3%	14.6%	20.2%	20.9%	80.8%	84.4%	77.9%	77.5%
Downe	-	1.0%	0.6%	0.8%	-	8.1%	9.6%	10.2%	-	90.8%	89.8%	89.0%
Lagan Valley	9.2%	7.1%	8.6%	6.5%	29.4%	31.3%	28.4%	28.0%	61.4%	61.5%	62.9%	65.5%
Type 2	7.6%	4.5%	5.3%	4.1%	26.0%	22.5%	22.1%	22.0%	66.4%	73.0%	72.6%	73.9%
Mid Ulster	0.1%	-	2.0%	-	2.9%	41.9%	28.6%	26.6%	97.0%	58.1%	69.4%	73.4%
Ards	-	0.1%	0.3%	0.3%	0.4%	0.4%	0.1%	0.5%	99.6%	99.5%	99.6%	99.1%
Bangor	-	-	-	-	-	-	-	-	-	-	-	-
South Tyrone	0.2%	0.3%	0.2%	0.4%	4.1%	1.7%	2.1%	1.9%	95.7%	97.9%	97.7%	97.7%
Omagh	0.5%	0.8%	0.8%	0.5%	1.6%	1.6%	2.9%	2.4%	98.0%	97.5%	96.3%	97.1%
Type 3	0.2%	0.4%	0.4%	0.4%	2.7%	1.9%	2.6%	2.4%	97.0%	97.7%	97.0%	97.2%
Northern Ireland	19.0%	20.6%	21.0%	19.9%	38.4%	39.3%	39.3%	38.0%	42.6%	40.1%	39.7%	42.2%

¹⁵⁹ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

¹⁶⁰ 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

¹⁶¹ Readers should note that Craigavon ED includes figures for Craigavon Respiratory (Covid-19) ED (29th March 2020 - 19th October 2020), Craigavon Paediatric ED (31st March 2020 - 12th June 2020) and Craigavon Minor Injuries Unit (2nd - 14th December 2020)

¹⁶² Readers should note the reduction in attendances at EDs as a result of the COVID19 pandemic from the start of 2020.

¹⁶³ Readers should note the temporary closure of Bangor, Downe and Daisy Hill EDs in March 2020, see Appendix 2 for details.

Appendix 5: Further Information

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

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