

INFORMATION  
ANALYSIS  
DIRECTORATE



# Emergency Care Waiting Time Statistics for Northern Ireland (July – September 2016)



Department of  
**Health**

An Roinn Sláinte

Mánnystrie O Poustie

[www.health-ni.gov.uk](http://www.health-ni.gov.uk)

# Reader Information

---

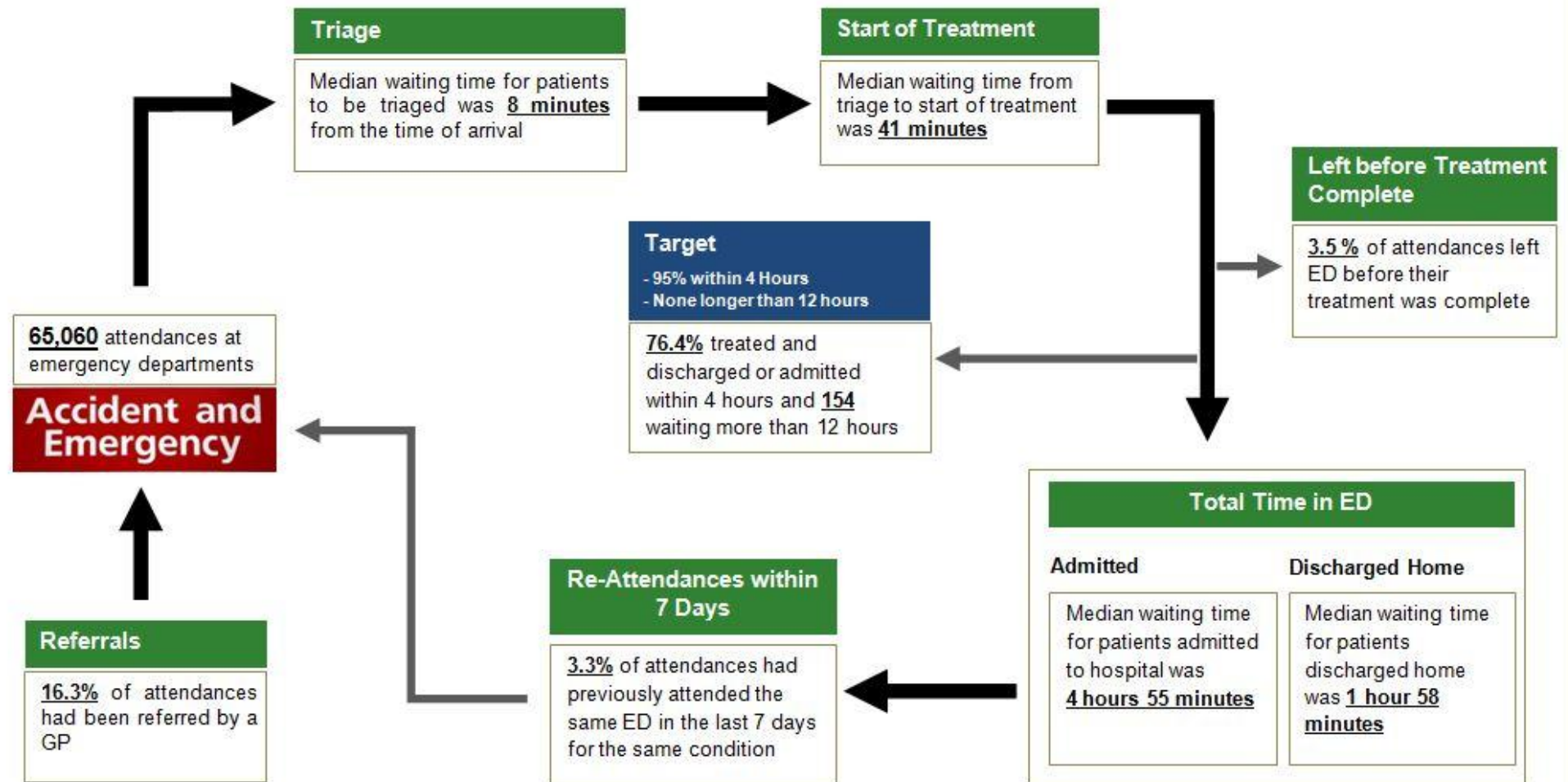
- Purpose:** This statistical release presents information on the time spent waiting in emergency care departments (ED), for both new and unplanned review attendances in Northern Ireland. It reports on the performance of ED's against the DoH Ministerial target, including additional information on the clinical quality indicators set by the DoH.
- Guidance:** It is recommended that readers also refer to the '*Emergency Care Waiting Time Statistics - Additional Guidance*' booklet which details the technical guidance, definitions, as well as background information and comparability of the information detailed in this statistical release. This booklet can be found at the link below:
- Website:** <https://www.health-ni.gov.uk/articles/emergency-care-waiting-times>
- Authors:** Paul Stevenson and Kieran Taggart
- Publication Date:** 27<sup>th</sup> October 2016
- Reporting Period:** 1<sup>st</sup> July 2016 – 30<sup>th</sup> September 2016
- Issued by:** Hospital Information Branch  
Information & Analysis Directorate  
Department of Health  
Stormont Estate, Belfast, BT4 3SQ
- Contact Information:** We invite you to feedback your comments on this publication to:  
  
Paul Stevenson  
Email: [paul.stevenson@health-ni.gov.uk](mailto:paul.stevenson@health-ni.gov.uk)
- Statistical Quality:** Information detailed in this release has been provided by HSC Trusts and has been validated by Hospital Information Branch (HIB) prior to release. Information detailed on: time to triage, age and time of day for attendances, GP referrals, emergency admissions, left before treatment complete, time to triage, time to start of treatment, time for patients admitted and not admitted are not National Statistics. These have been published to provide users with a comprehensive view of emergency care activity and waits.
- Target Audience:** DoH, Chief Executives of HSC Board and Trusts in Northern Ireland, Health Care Professionals, Academics, Health & Social Care Stakeholders, Media and General Public.
- Further Copies:** [statistics@health-ni.gov.uk](mailto:statistics@health-ni.gov.uk)
- Price:** Free
- Copyright:** This publication is Crown copyright and may be reproduced free of charge in any format or medium. Any material used must be acknowledged, and the title of the publication specified.

# Contents

---

<b>Summary of Key Facts</b>	<b>4</b>
<b>Emergency Care Attendances: Who, Where, When, Why?</b>	<b>5</b>
How many attend emergency care departments?	5
Are more patients admitted to hospital?	6
Which emergency care department did people attend?	7
Who attends emergency care departments?	8
When do people attend emergency care departments?	9
How many attendances were referred by a GP?	11
How many patients leave before their treatment is complete?	12
How many patients re-attend emergency care departments within a week?	13
<b>How Long Do Patients Spend in Emergency Departments?</b>	<b>14</b>
How are emergency care departments performing?	15
How many attendances at emergency care departments waited over 4 hours?	17
How long did patients wait to be triaged?	18
How long did patients wait for the start of their treatment?	19
What is the waiting time for treatment to start at Type 1 departments?	20
Do patients admitted spend longer in departments than those discharged home?	21
How long did patients admitted to hospital spend in an emergency care department?	22
How long did patients discharged home spend in an emergency care department?	23
<b>Appendices</b>	
Appendix 1: About Hospital Information Branch (HIB)	24
Appendix 2: Emergency Care Departments, Opening Hours & National Statistics	25
Appendix 3: General Guidance on using the Data	28
Appendix 4: Additional Tables	29
Appendix 5: Further Information	37

## SUMMARY OF KEY FACTS (September 2016)



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

## *How Many Attend Emergency Care Departments?*

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 2016, compared with the same month last year <sup>1, 2</sup>.

**Table 1: Attendances at Emergency Care Departments and Emergency Admissions to Hospital (September 2015 and September 2016)**

Attendances	September 2015	September 2016	Difference	
New	57,763	60,479	2,716	4.7%
Unplanned Review	2,972	3,163	191	6.4%
<b>Total Attendances <sup>3, 4</sup></b>	<b>61,976</b>	<b>65,060</b>	<b>3,084</b>	<b>5.0%</b>
Emergency Admissions <sup>5</sup>	11,611	11,424	-187	-1.6%

Source: Regional Data Warehouse

- Total attendances at ED's increased by 5.0% (3,084) when compared with September 2015, from 61,976 to 65,060 in September 2016 (Table 1, Table 8A).
- The number of new attendances increased by 4.7% (2,716) when compared with September 2015, from 57,763 to 60,479 in September 2016 (Table 1, Table 8A)
- Between September 2015 and September 2016, unplanned review attendances increased by 6.4% (191) (Table 1, Table 8A).
- Emergency admissions to hospital decreased by 1.6% (187) between September 2015 (11,611) and September 2016 (11,424) (Table 1).

<sup>1</sup> Information for July, August and September 2016 is detailed in Appendix 5, Table 8A.

<sup>2</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>3</sup> The RVH (ENT) service is no longer recorded in the waiting times information as it is an appointment led service. All information from April 2015 has been updated to reflect this change.

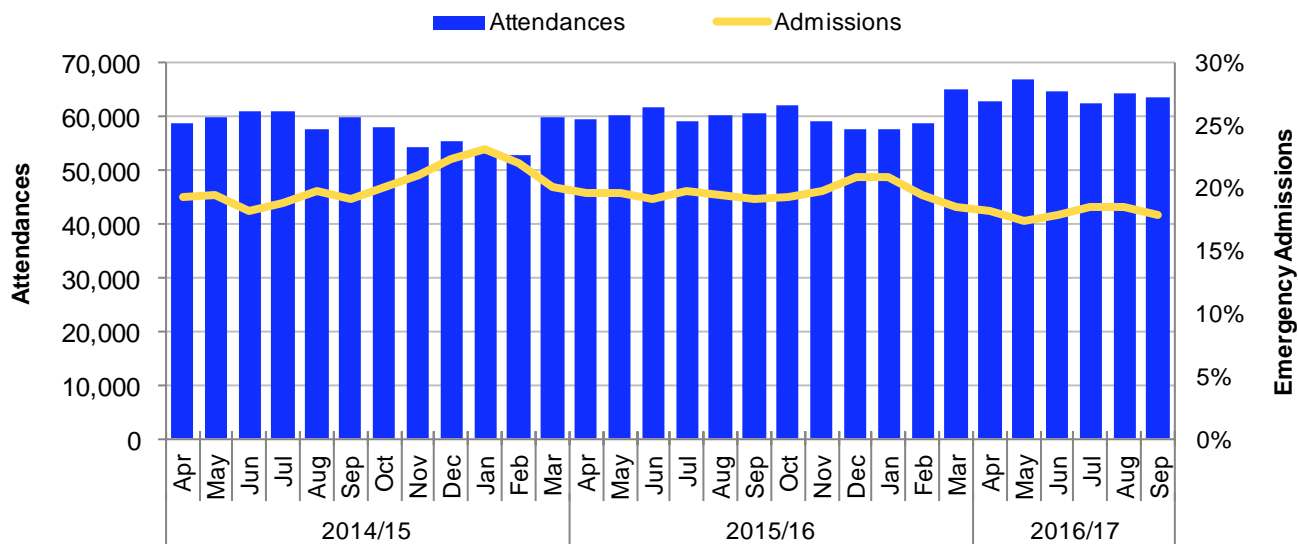
<sup>4</sup> New and unplanned reviews will not sum to the total attendances in Table 1, as the total attendance figure includes attendances at the RVH (RAES), and it is not currently possible to collect detailed information for the RVH (RAES) services.

<sup>5</sup> Emergency Admissions (admissions via ED) information 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.

## Are More Patients being Admitted to Hospital?

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

**Figure 1: Attendances at Emergency Care Departments and Emergency Admissions to Hospital (April 2014 – September 2016)<sup>7</sup>**



- The percentage of ED attendances admitted to hospital was highest during December and January and lowest during the summer months during each year (Figure 1).
- During both 2014/15 and 2015/16, the percentage of ED attendances admitted to hospital increased each month from September to January and declined sharply in February and March to normal levels thereafter (Figure 1).

<sup>6</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>7</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these waiting time statistics.

## Which Emergency Departments Did People Attend?

Table 2 details a summary of the number of new and unplanned review attendances at each Type 1 ED during September 2016 and the same month last year. It also details the total number of attendances at Type 2 and 3 ED's during this period <sup>8, 9, 10</sup>.

**Table 2: Attendances at Emergency Care Departments (September 2015 and September 2016)**

Department	New Attendances		Unplanned Review Attendances		Total Attendances	
	Sep-15	Sep-16	Sep-15	Sep-16	Sep-15	Sep-16
Mater	4,023	3,889	124	134	4,147	4,023
Royal Victoria	7,260	7,667	267	266	7,527	7,933
RBHSC	2,839	2,973	209	192	3,048	3,165
Antrim Area	6,175	6,604	405	386	6,580	6,990
Causeway	3,300	3,359	261	248	3,561	3,607
Ulster	7,316	7,597	217	220	7,533	7,817
Craigavon Area	6,327	6,536	389	438	6,716	6,974
Daisy Hill	3,766	4,018	278	287	4,044	4,305
Altnagelvin Area	4,692	4,964	273	308	4,965	5,272
South West Acute	2,328	2,535	151	135	2,479	2,670
<b>Type 1</b>	<b>48,026</b>	<b>50,142</b>	<b>2,574</b>	<b>2,614</b>	<b>50,600</b>	<b>52,756</b>
<b>Type 2</b>	<b>3,429</b>	<b>3,797</b>	<b>155</b>	<b>156</b>	<b>4,825</b>	<b>5,371</b>
<b>Type 3</b>	<b>6,308</b>	<b>6,540</b>	<b>243</b>	<b>393</b>	<b>6,551</b>	<b>6,933</b>
<b>Northern Ireland <sup>11,12</sup></b>	<b>57,763</b>	<b>60,479</b>	<b>2,972</b>	<b>3,163</b>	<b>61,976</b>	<b>65,060</b>

Source: Regional Data Warehouse

- Total attendances increased at all ED Types between September 2015 and September 2016 (Table 2, Table 8A).
- The Royal Victoria (7,933) and the Ulster (7,817) were the busiest ED's during September 2016 (Table 2, Table 8A).
- Antrim Area (410) and the Royal Victoria (406) reported the highest increase in the number of attendances in September 2016, compared with September 2015 (Table 2, Table 8A).

<sup>8</sup> Information for July, August and September 2016 is detailed in Appendix 5, Table 8A.

<sup>9</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these waiting time statistics.

<sup>10</sup> Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on date of departure.

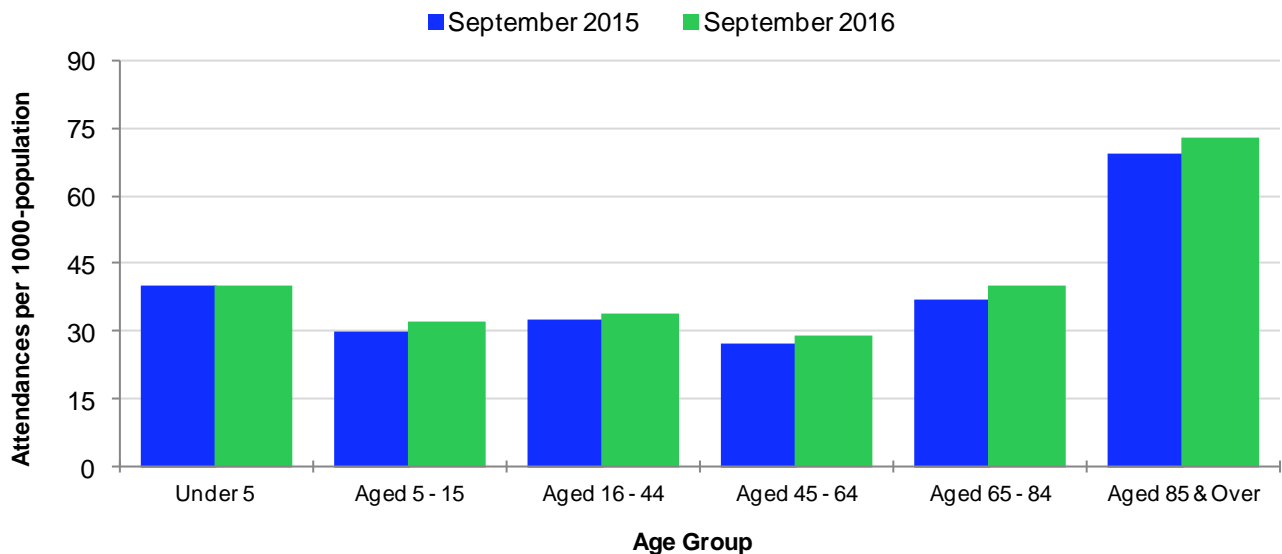
<sup>11</sup> New and unplanned reviews will not sum to the total attendances in Table 2, as the total attendance figure includes attendances at the RVH (RAES), and it is not currently possible to collect detailed information for the RVH (RAES) services.

<sup>12</sup> The RVH (ENT) service is no longer recorded in the waiting times information as it is an appointment led service. All information from April 2016 has been updated to reflect this change.

## Who Attends Emergency Departments?

Figure 2 presents information on the number of attendances at ED's per 1000-population, broken down by the age group of those attending<sup>13, 14</sup>.

**Figure 2: Attendances at Emergency Care Departments per 1,000-population, by Age Group (September 2015 and September 2016)<sup>15, 16</sup>**



- During both September 2015 and September 2016, the highest number of attendances per 1000-population was recorded for those aged 85 & over (69 and 73 respectively) (Figure 2, Table 8H).
- The rate of attendances per 1,000-population was higher or remained similar, for all age groups between September 2015 and September 2016 (Figure 2, Table 8H).
- A high number of attendances per 1000-population aged under 5 was also recorded in both September 2015 and September 2016 (40 and 40 respectively) (Figure 2, Table 8H).
- The lowest number of attendances per 1000-population was recorded in the 45 – 64 age group during September 2015 and September 2016 (27 and 29 respectively) (Figure 2, Table 8H).

<sup>13</sup> Information for July, August and September 2016 is detailed in Appendix 5, Table 8H.

<sup>14</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>15</sup> Excludes cases where the DOB could not be determined.

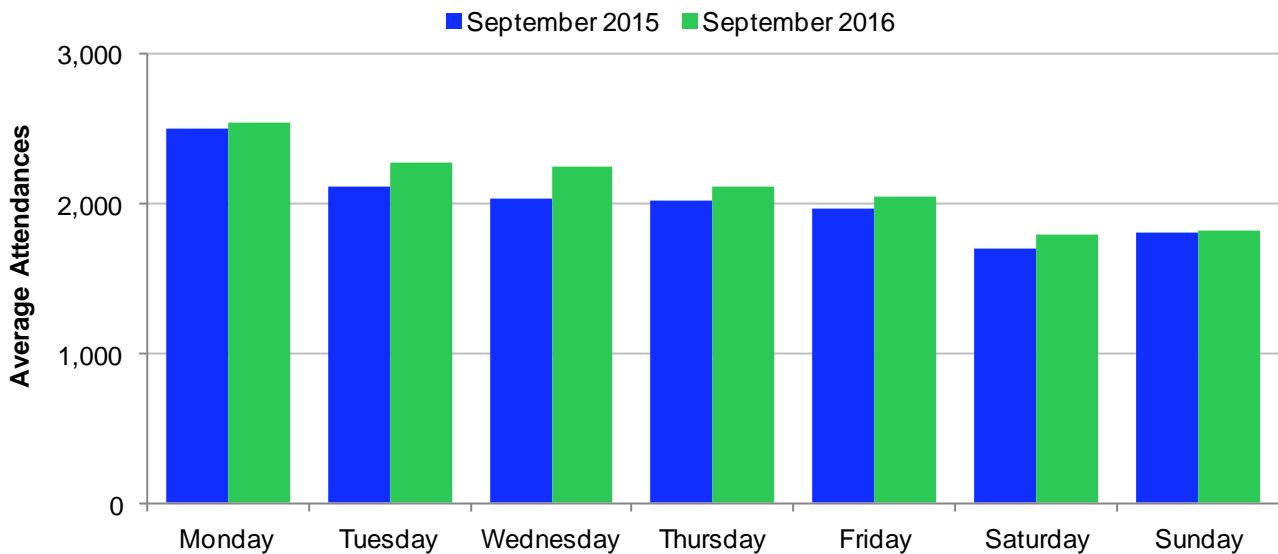
<sup>16</sup> Based on the NISRA 2015 mid-year population estimate which was published on 31<sup>st</sup> August 2016.



## When Do People Attend Emergency Care Departments?

Figure 3 presents information on the average number of new and unplanned review attendances at ED's by day of the week during September 2016, compared with September 2015<sup>17,18</sup>.

**Figure 3: Average Number of Attendances at Emergency Care Departments by Day of Week (September 2015 and September 2016)**



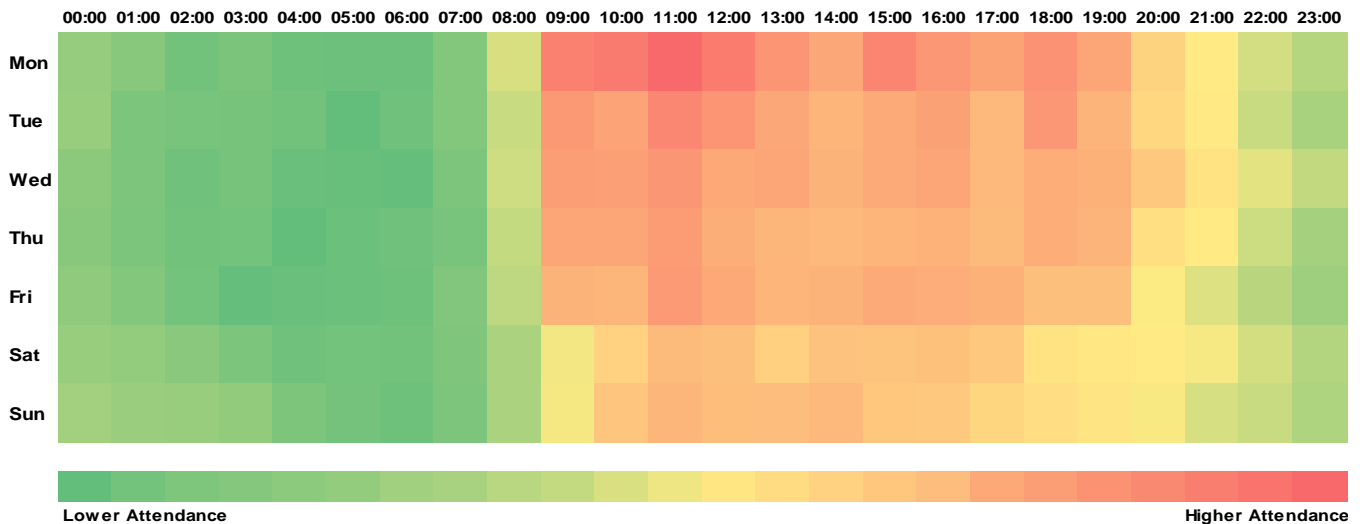
- The average number of attendances at ED's increased on each weekday in September 2016, compared with September 2015 (Figure 3, Table 8I).
- Overall, Monday was the busiest day at ED's during both September 2015 and September 2016, with on average over 2,500 daily attendances each month (Figure 3, Table 8I).
- The largest increase in average daily attendances was on a Wednesday between September 2015 and September 2016 (2,032 and 2,255 respectively) (Figure 3, Table 8I).
- The lowest average numbers of daily attendances were on a Saturday and Sunday in both months (Figure 3, Table 8I).

<sup>17</sup> Information for July, August and September 2016 is detailed in Appendix 5, Table 8I.

<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.

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 2016<sup>19</sup>. 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.

**Figure 4: Heat Map of Emergency Care Attendances by Day and Time (September 2016)**



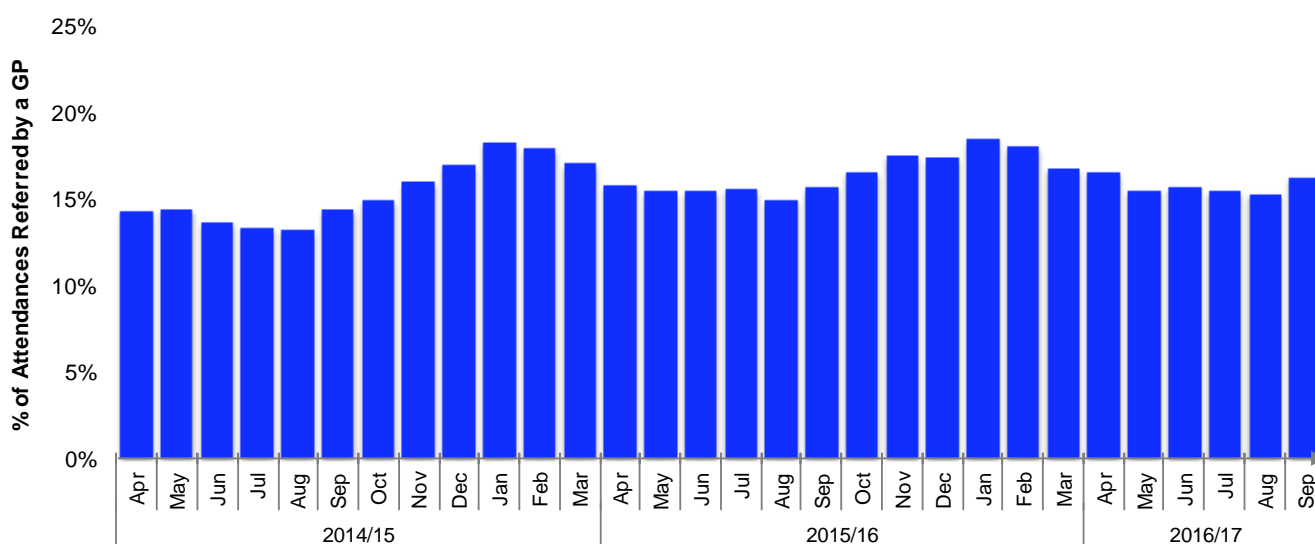
- Monday was the busiest day of the week during September 2016, with the highest number of attendances arriving between 11:00am and 12:59pm (Figure 4).
- Saturday was the least busy day during September 2016, with the highest number of attendances arriving between 11:00am and 11:59am (Figure 4).
- Overall, the busiest hour of the day during September 2016 was between 11:00am and 11:59pm, whilst the least busiest hour was 5:00am to 5:59am (Figure 4).

<sup>19</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.

## How Many Attendances Were Referred by a GP?

Figure 5 presents information on the percentage of GP referrals against attendances at emergency care departments, from April 2014<sup>20</sup>, <sup>21</sup>.

**Figure 5: Number of Attendances at Emergency Care Departments Referred by a GP (April 2014 – September 2016)**



- Almost one in six (16.3%) attendances at ED's in September 2016 had been referred by a GP, higher than September 2015 (15.6%) (Figure 5, Table 8C).
- Type 1 ED's reported the highest percentage of attendances referred by a GP (18.2%) during September 2016, 0.5 percentage points higher than September 2015 (17.7%) (Figure 5, Table 8C).
- Almost one quarter (22.9%) of attendances at Craigavon Area had been referred by a GP during September 2016, compared with 10.2% of attendances in Daisy Hill (Figure 5, Table 8C).
- The percentage of attendances referred by a GP is usually highest between December and March, and lowest between June and August (Figure 5, Table 8C).

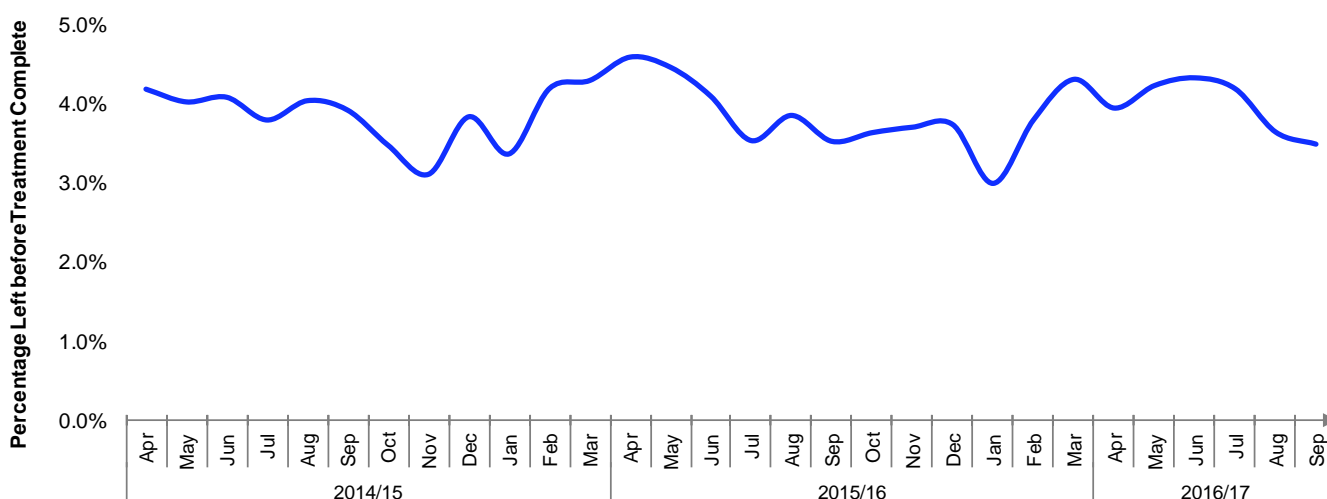
<sup>20</sup> Information for July, August and September 2016 is detailed in Appendix 5, Table 8C.

<sup>21</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.

## 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>22, 23</sup>.

**Figure 6: Percentage of Attendances Leaving the Emergency Care Department before their Treatment was Complete (April 2014 – September 2016)**



- During September 2016, 3.5% of all ED attendances left before their treatment was complete, similar to the proportion in September 2015 (3.5%) (Figure 5, Table 8C).
- Type 1 (4.1%) ED's reported the highest percentage of patients leaving before their treatment was complete in September 2016, with 1.3% reported for Type 2 ED's and 0.4% for Type 3 ED's (Figure 5, Table 8C).
- The Mater (8.4%) reported the highest percentage of attendances leaving an ED before their treatment was complete during September 2016, 1.6 percentage points higher than September 2015 (6.8%) (Figure 5, Table 8C).
- During the last 12 months, the percentage of attendances leaving ED before their treatment was complete was highest in March 2016 (4.3%) and June 2016 (4.3%) (Figure 5, Table 8C).

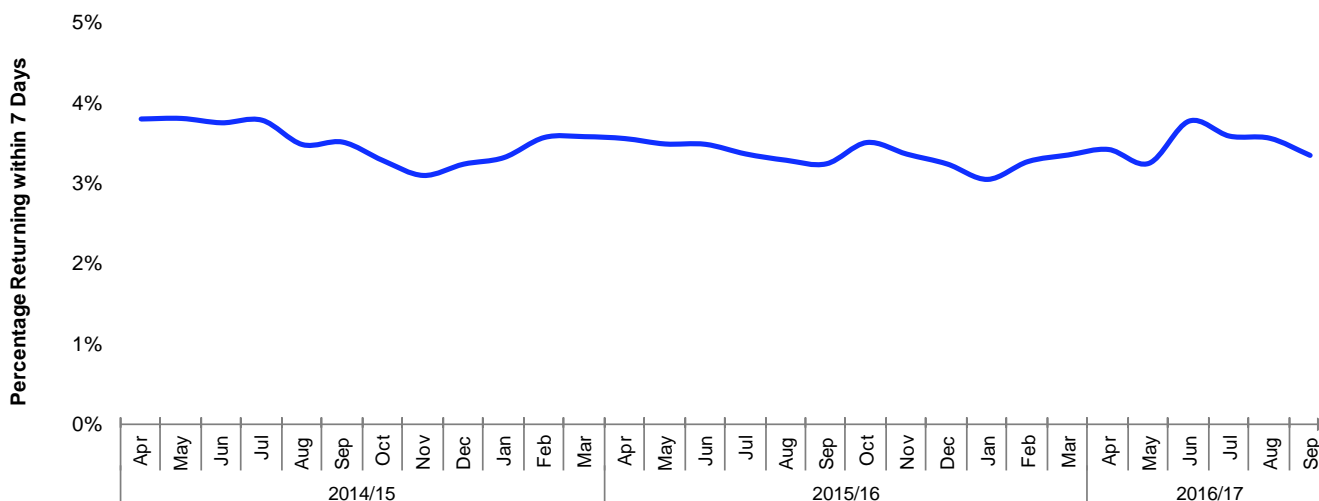
<sup>22</sup> Information for July, August and September 2016 is detailed in Appendix 5, Table 8C.

<sup>23</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.

## How Many Patients Re-attend ED's within a Week?

Figure 7 presents information on the percentage of unplanned review attendances at ED's within 7 days of their original attendance for the same condition, from April 2014<sup>24, 25</sup>.

**Figure 7: Percentage of Re-attendances at Emergency Care Departments within 7 Days (April 2014 – September 2016)**



- Almost 3.3% of attendances during September 2016 had previously attended the same ED within 7 days of their original attendance for the same condition, similar to September 2015 (3.2%) (Figure 6, Table 8C).
- Daisy Hill (5.2%) reported the highest percentage of unplanned review attendances within 7 days of the original attendance during September 2016 (Figure 6, Table 8C).
- The percentage of unplanned review attendances at ED's within 7 days of the original attendance has changed slightly from April 2014, fluctuating between 3.0% and 4.0% of the total number of ED attendances (Figure 6, Table 8C).

<sup>24</sup> Information for July, August and September 2016 is detailed in Appendix 5, Table 8C.

<sup>25</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.

# How Long Do Patients Spend in ED?

---

This section describes the various data available to measure the length of time patients spend in ED's 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 patients triage by a medical professional for all attendances.*

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

*The time take to start a patients 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.*

## *Emergency Care Waiting Times Target*

The current Ministerial targets on emergency care waiting times in Northern Ireland for 2016/17 state that:

*'From April 2016, 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 2017, at least 80% of patients to have commenced treatment, following triage, within 2 hours.'*

## How are ED's Performing?

Table 3 details the performance against the four and twelve hour components of the emergency care waiting times target in Northern Ireland. The time reported refers to the time from arrival to discharge or admission to hospital <sup>26</sup>.

**Table 3: Performance against Emergency Care Waiting Times Target (September 2015 & 2016)**

Percentage within 4 Hours	September 2015	September 2016	Difference	
			No.	% pt
Type 1	73.9%	71.6%	-	-2.3%
Type 2	91.9%	93.4%	-	1.5%
Type 3	99.9%	100.0%	-	0.1%
<b>All Departments</b>	<b>78.1%</b>	<b>76.4%</b>	<b>-</b>	<b>-1.7%</b>

Number Over 12 Hours	September 2015	September 2016	Difference	
			No.	%
Type 1	64	152	88	-
Type 2	0	2	2	-
Type 3	0	0	0	-
<b>All Departments</b>	<b>64</b>	<b>154</b>	<b>90</b>	<b>-</b>

New and Unplanned Review Attendances	September 2015	September 2016	Difference	
			No.	%
Type 1	50,600	52,756	2,156	4.3%
Type 2	4,825	5,371	546	11.3%
Type 3	6,551	6,933	382	5.8%
<b>All Departments</b>	<b>61,976</b>	<b>65,060</b>	<b>3,084</b>	<b>5.0%</b>

Source: Regional Data Warehouse

- In September 2016, 76.4% of ED attendances were treated and discharged, or admitted within 4 hours of their arrival, less than September 2015 (78.1%) (Table 3, Table 8B & Table 8J).
- During September 2016, over two thirds (71.6%) of attendances at Type 1 ED's were treated and discharged, or admitted within 4 hours of their arrival, compared with 93.4% at Type 2 ED's and 100.0% at Type 3 ED's (Table 3, Table 8B & Table 8J).
- Between September 2015 and September 2016, the number of attendances waiting longer than 12 hours, more than doubled from 64 to 154, accounting for 0.2% of all attendances in September 2016 (Table 3, Table 8B & Table 8J).
- Whilst performance against both the 4 and 12 hour targets declined over the last year, ED's experienced an 5.0% increase in the number of attendances during this time (61,976 in September 2015 to 65,060 in September 2016) (Table 3, Table 8B & Table 8J).

<sup>26</sup> Further breakdown of ED's can be found in Appendix 5: Table 8B & Table 8J.

Table 4 details the performance against both the four and twelve hour components of the emergency care waiting times target at each Type 1 ED in September 2016 compared with the same month last year. Information has also been included on the overall performance at Type 2 and 3 ED's during this period.

**Table 4: Performance against Emergency Care Waiting Times Target at Type 1 ED's (September 2015 and September 2016)** <sup>27, 28, 29</sup>

Department	4-Hour Performance		12-Hour Performance		Total Attendances	
	Sept-15	Sept-16	Sept-15	Sept-16	Sept-15	Sept-16
Mater	75.3%	70.4%	10	27	4,147	4,023
Royal Victoria	68.6%	69.3%	6	51	7,527	7,933
RBHSC	90.1%	87.5%	0	0	3,048	3,165
Antrim Area	64.8%	66.0%	1	40	6,580	6,990
Causeway	71.0%	62.8%	0	6	3,561	3,607
Ulster	74.1%	74.5%	28	22	7,533	7,817
Craigavon Area	72.5%	67.6%	0	0	6,716	6,974
Daisy Hill	86.4%	79.8%	0	0	4,044	4,305
Altnagelvin Area	71.0%	70.8%	18	6	4,965	5,272
South West Acute	85.4%	77.6%	1	0	2,479	2,670
<b>Type 1</b>	<b>73.9%</b>	<b>71.6%</b>	<b>64</b>	<b>152</b>	<b>50,600</b>	<b>52,756</b>
<b>Type 2</b>	<b>91.9%</b>	<b>93.4%</b>	<b>0</b>	<b>2</b>	<b>4,825</b>	<b>5,371</b>
<b>Type 3</b>	<b>99.9%</b>	<b>100.0%</b>	<b>0</b>	<b>0</b>	<b>6,551</b>	<b>6,933</b>
<b>Northern Ireland</b>	<b>78.1%</b>	<b>76.4%</b>	<b>64</b>	<b>154</b>	<b>61,976</b>	<b>65,060</b>

Source: Regional Data Warehouse

- During September 2016, RBHSC (87.5%) reported the highest performance of Type 1 ED's against the 4 hour target, whilst Causeway (62.8%) reported the lowest performance (Table 4, Table 8B).
- Four Type 1 ED's (RBHSC, Craigavon Area, Daisy Hill and South West Acute) achieved the 12-hour component of the target during September 2016 (Table 4, Table 8B).
- Altnagelvin Area reported the largest improvement in 12-hour performance (12), from 18 in September 2015 to 6 in September 2016 (Table 4, Table 8B).
- Between September 2015 and September 2016, performance against the 12 hour target declined notably at the Royal Victoria (6 to 51) (Table 4, Table 8B).

<sup>27</sup> Information for July, August and September 2016 is detailed in Appendix 5: Table 8B & Table 8I.

<sup>28</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these waiting time statistics.

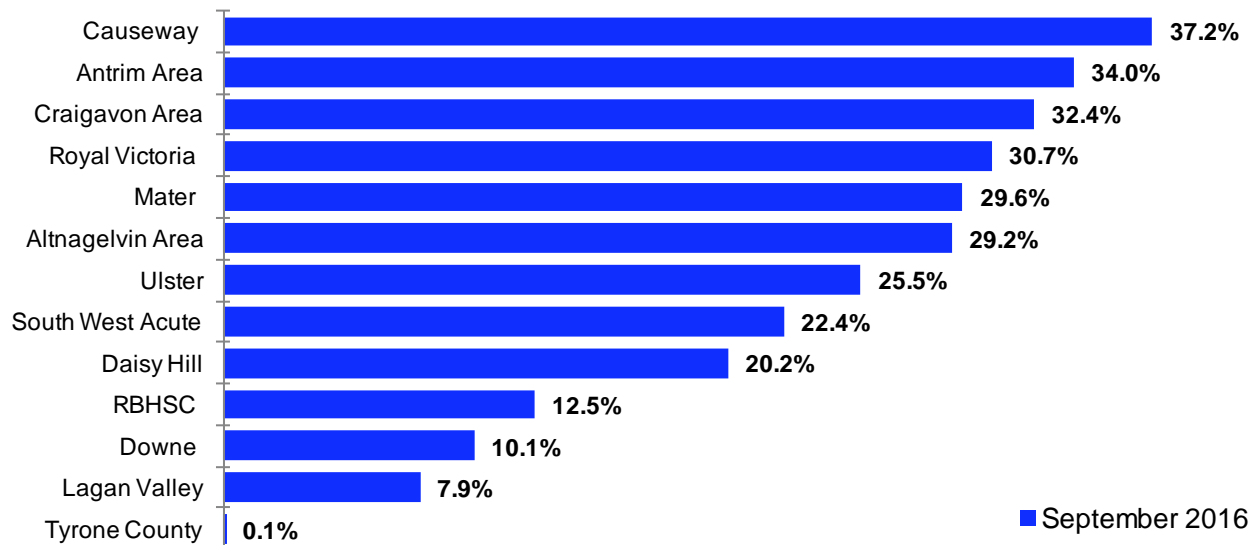
<sup>29</sup> Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on date of departure.



## How Many ED Attendances Waited Over 4 Hours?

Figure 8 presents information on the percentage of attendances at ED's which waited longer than 4 hours in ED to be treated and discharged, or admitted to hospital <sup>30</sup>.

**Figure 8: Percentage of Attendances Waiting Longer than Four Hours in Emergency Care Departments (September 2016)**



- Almost two fifths of attendances at Causeway (37.2%) waited longer than 4 hours to be treated and discharged, or admitted to hospital during September 2016 (Figure 8, Table 8J).

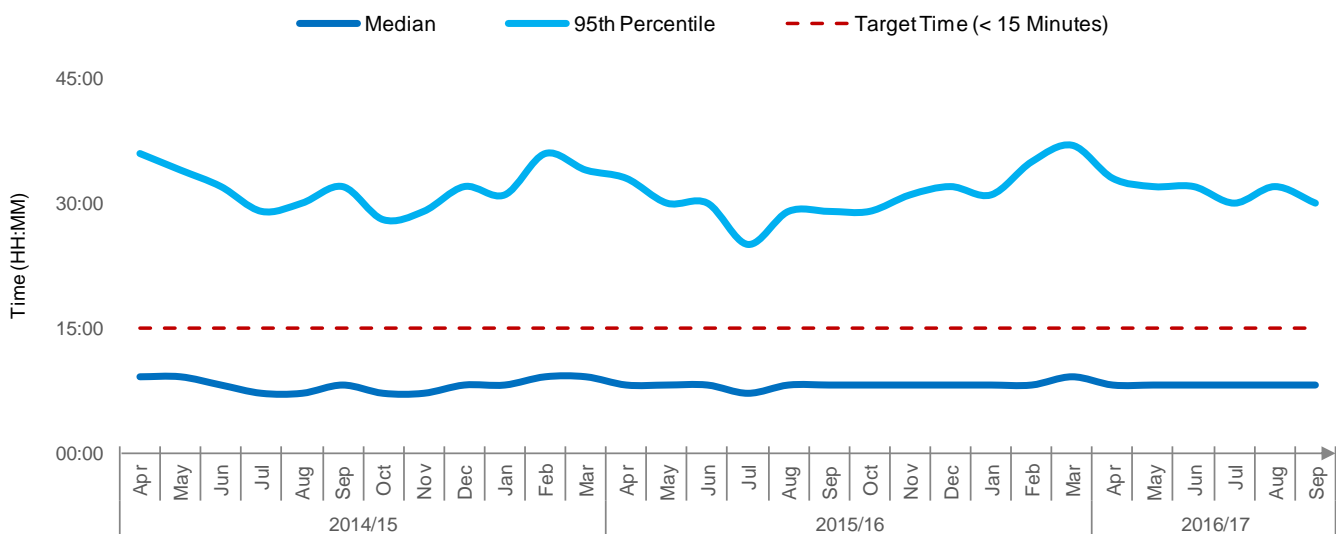
<sup>30</sup> Information for July, August and September 2016 is detailed in Appendix 5: Table 8J.

## How Long Did Patients Wait to be Triage?

Figure 9 details the length of time patients wait from the time of their arrival at an ED to their triage (initial assessment) by a medical practitioner, which includes a brief history, pain and early warning scores, for all patients <sup>31</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 2016)** <sup>32</sup>



- During September 2016, the median waiting time from arrival to triage was 8 minutes, similar to time taken in September 2015 (8 minutes) (Figure 9, Table 8D).
- 95 per cent of patients were triaged within 30 minutes of their arrival at an ED in September 2016, slightly longer than September 2015 (29 minutes). The slight increase in the time taken to triage 95 per cent of patients may in part be due to the 5.0% increase in the number of patients attending ED's during this period (Figure 9, Table 8D).
- Almost four fifths (78.9%) of attendances were triaged within 15 minutes of their arrival at an ED during September 2016, slightly less than September 2015 (79.8%).

<sup>31</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.

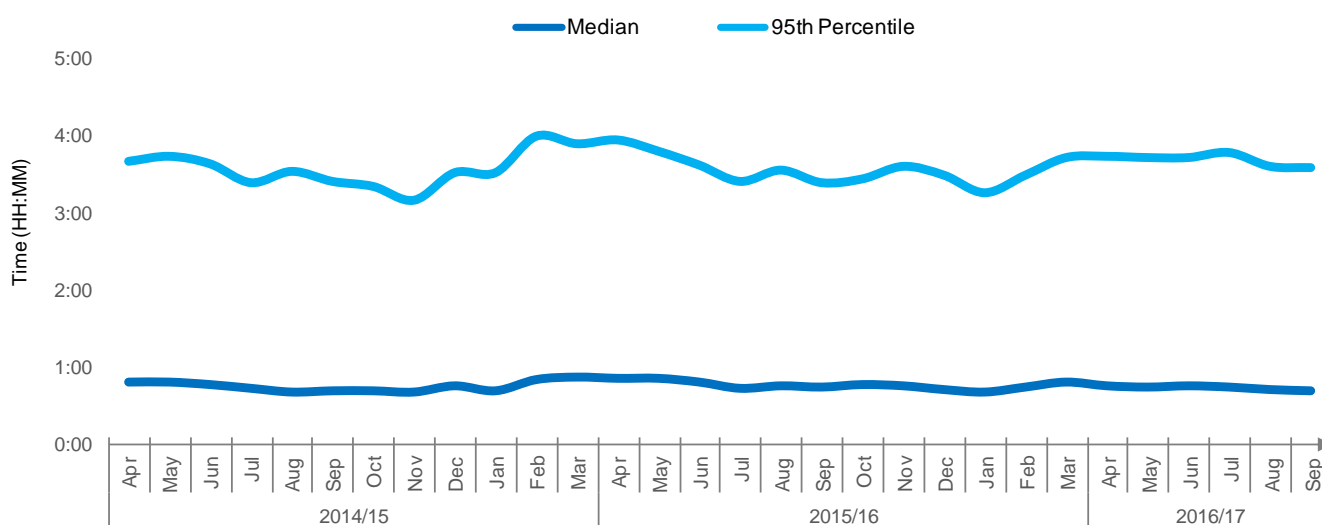
<sup>32</sup> Additional information on time to triage is detailed in Appendix 5: Table 8D.

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

Figure 10 shows information on the length of time patients wait 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>33</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 patient's commenced treatment.

**Figure 10: Time from Triage to Start of Treatment (April 2014 – September 2016) <sup>34</sup>**



- The median waiting time from triage to start of treatment in September 2016 was 41 minutes, an improvement on the time taken in September 2015 (44 minutes) (Figure 10, Table 8E).
- During September 2016, 95 per cent of patients commenced their treatment within 3 hours 35 minutes of being triaged in an ED, 12 minutes longer than the time taken in September 2015 (3 hours 23 minutes) (Figure 10, Table 8E).
- Over four in five (82.2%) patients attending ED's commenced their treatment within 2 hours of being triaged, similar to September 2015 (82.1%).

<sup>33</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>34</sup> Additional information on time to triage is detailed in Appendix 5: Table 8E.

## What is the Waiting Time for Treatment to Start at Type 1 ED's?

Table 5 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 ED's during September 2016 compared with September 2015<sup>35, 36</sup>.

**Table 5: Time from Triage to Start of Treatment (September 2015 and September 2016)<sup>37</sup>**

Department	Median		95 <sup>th</sup> Percentile	
	Sept-15	Sept-16	Sept-15	Sept-16
Mater	0:51	0:53	3:54	4:30
Royal Victoria	0:51	0:47	3:50	3:27
RBHSC	0:41	0:45	2:39	2:42
Antrim Area	1:11	1:27	4:40	5:02
Causeway	0:31	0:55	3:44	4:23
Ulster	0:54	0:46	2:56	3:16
Craigavon Area	1:14	1:10	3:38	4:04
Daisy Hill	0:55	0:55	2:51	2:53
Altnagelvin Area	0:41	0:41	2:39	2:58
South West Acute	0:33	0:22	2:53	2:12
<b>Type 1</b>	<b>0:52</b>	<b>0:52</b>	<b>3:35</b>	<b>3:49</b>
<b>Type 2</b>	<b>0:45</b>	<b>0:30</b>	<b>2:50</b>	<b>1:54</b>
<b>Type 3</b>	<b>0:05</b>	<b>0:07</b>	<b>0:44</b>	<b>0:46</b>
<b>Northern Ireland</b>	<b>0:44</b>	<b>0:41</b>	<b>3:23</b>	<b>3:35</b>

Source: Regional Data Warehouse

- The median time waited from triage to the start of treatment by a medical professional was 52 minutes at Type 1 ED's during September 2016, similar to September 2015 (52 minutes) (Table 5, Table 8E).
- Antrim Area reported the longest median waiting time (1 hour 27 Minutes) from triage to start of treatment during September 2016, whilst South West Acute (22 minutes) reported the shortest median waiting time (Table 5, Table 8E).
- Antrim Area also reported the longest waiting time between triage and start of treatment, with 95 per cent of attendances commencing treatment within 5 hours and 2 minutes of being triaged, 22 minutes longer than in September 2015 (4 hours 40 minutes) (Table 5, Table 8E).
- South West Acute reported the shortest time to start of treatment during September 2016, with 95 per cent of attendances commencing treatment within 2 hours 12 minutes of being triaged, 41 minutes less than in September 2015 (2 hours 53 minutes) (Table 5, Table 8E).

<sup>35</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.

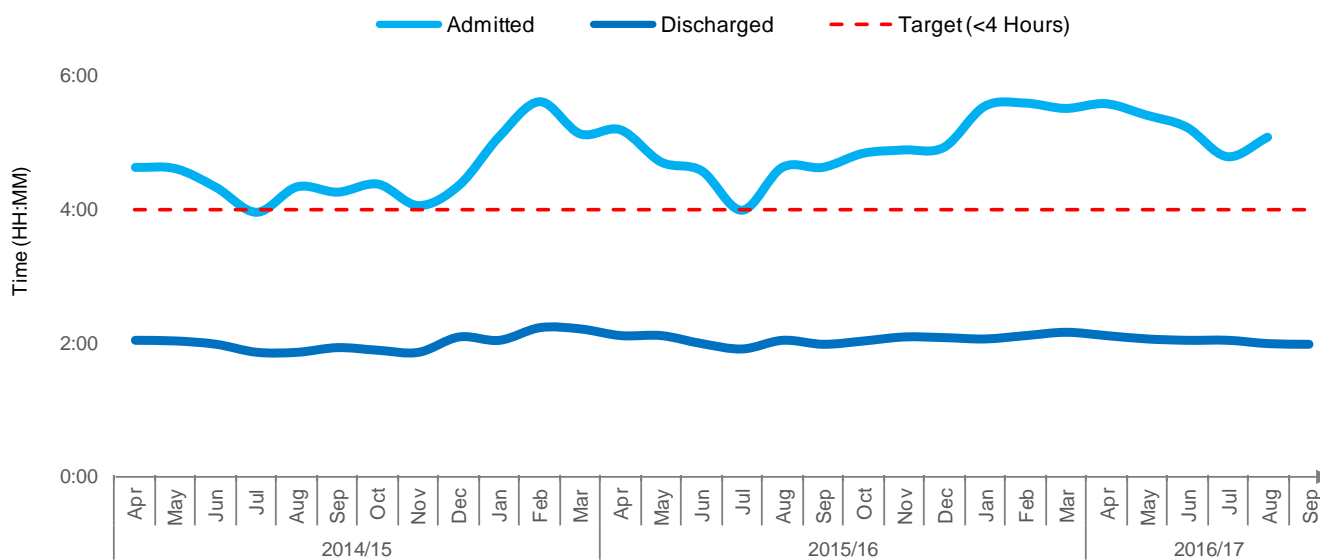
<sup>36</sup> Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on date of departure.

<sup>37</sup> Information for July, August and September 2016 is detailed in Appendix 5, Table 8E.

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

Information detailed in Tables 6 and 7 indicates that patients admitted to hospital generally spend a longer period of time in an ED than those discharged home.

**Figure 11: Median Time Spent in an Emergency Care Department for those (i) Admitted to Hospital and (ii) Discharged Home (April 2014 and September 2016)<sup>38</sup>**



- During September 2016, the median time spent in an ED for patients admitted to hospital was 4 hours 55 minutes, compared with 1 hour 58 minutes for those discharged home (Table 6 and Figure 11)<sup>39</sup>.
- Analysis of the 95<sup>th</sup> percentiles for the length of time spent in an ED for those admitted and discharged home indicates that in September 2016, 95 per cent of patients admitted to hospital spent almost twice as long in an ED (10 hour 48 minutes) than those discharged home (5 hours 49 minutes) (Table 7 and Figure 11).

<sup>38</sup> Further breakdown of ED's can be found in Appendix 5, Table 8E.

<sup>39</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.

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

Table 6 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.

**Table 6: Total Time Spent in an Emergency Care Department for those Admitted to Hospital (September 2015 and September 2016)** <sup>40, 41</sup>

Department	Median		95 <sup>th</sup> Percentile	
	Sept-15	Sept-16	Sept-15	Sept-16
Mater	4:04	4:52	10:27	11:13
Royal Victoria	5:06	6:04	10:18	11:31
RBHSC	3:20	3:28	6:37	7:09
Antrim Area	5:16	5:19	10:43	11:07
Causeway	5:21	6:01	10:25	11:13
Ulster	5:00	4:21	10:49	9:33
Craigavon Area	4:33	5:03	10:13	10:19
Daisy Hill	3:25	4:43	6:52	11:28
Altnagelvin Area	5:58	5:51	10:55	11:24
South West Acute	3:31	3:57	6:34	7:34
<b>Type 1</b>	<b>4:40</b>	<b>4:58</b>	<b>10:19</b>	<b>10:52</b>
<b>Type 2</b>	<b>3:52</b>	<b>3:40</b>	<b>7:25</b>	<b>7:27</b>
<b>Type 3</b>	<b>0:10</b>	<b>0:12</b>	<b>0:34</b>	<b>1:00</b>
<b>Northern Ireland</b>	<b>4:37</b>	<b>4:55</b>	<b>10:16</b>	<b>10:48</b>

Source: Regional Data Warehouse

- The median time spent in a Type 1 ED for patients admitted to hospital was 4 hours 58 minutes in September 2016, 18 minutes more than the same month last year (4 hours 40 minutes) (Table 6, Figure 11 and Table 8F).
- The Royal Victoria reported the longest median time spent in an ED (6 hours 4 minutes) from arrival to admission to hospital, whilst RBHSC reported the shortest median time of 3 hours 28 minutes (Table 6, Figure 11 and Table 8F)
- 95 per cent of patients were admitted to hospital within 10 hours 52 minutes of arrival at all Type 1 ED's during September 2016 (Table 6, Figure 11 and Table 8F).
- The Royal Victoria reported that 95 per cent of attendances were admitted to hospital within 11 hours and 31 minutes of their arrival during September 2016, 1 hour and 13 minutes longer than September 2015 (Table 6, Figure 11 and Table 8F).

<sup>40</sup> Information for July, August and September 2016 is detailed in Appendix 5, Table 8F.

<sup>41</sup> Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on date of departure.

## How Long Did Patients Discharged Home Spend in ED's?

Table 7 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**.

**Table 7: Total Time Spent in Emergency Care Departments for those Discharged Home (September 2015 and September 2016)** <sup>42, 43</sup>

Department	Median		95 <sup>th</sup> Percentile	
	Sept-15	Sept-16	Sept-15	Sept-16
Mater	2:27	2:33	5:57	6:21
Royal Victoria	2:40	2:28	6:22	6:25
RBHSC	1:55	2:01	4:31	4:43
Antrim Area	2:43	2:33	7:13	6:54
Causeway	1:58	2:37	6:07	7:30
Ulster	2:03	2:10	5:13	5:42
Craigavon Area	2:31	2:40	5:43	6:03
Daisy Hill	1:57	2:04	4:46	5:07
Altnagelvin Area	2:16	2:19	5:24	5:37
South West Acute	2:07	2:10	5:07	5:19
Type 1	<b>2:19</b>	<b>2:22</b>	<b>5:52</b>	<b>6:07</b>
Type 2	<b>1:54</b>	<b>1:33</b>	<b>4:31</b>	<b>4:24</b>
Type 3	<b>0:31</b>	<b>0:34</b>	<b>1:28</b>	<b>1:30</b>
<b>Northern Ireland</b>	<b>1:58</b>	<b>1:58</b>	<b>5:34</b>	<b>5:49</b>

Source: Regional Data Warehouse

- The median time spent in a Type 1 ED by patients who were discharged home (not admitted) was 2 hours 22 minutes in September 2016, slightly more than the time spent in an ED during the same month last year (2 hour 19 minutes) (Table 7, Figure 9 and Table 8G).
- In September 2016, 95 per cent of attendances were discharged home within 6 hours 7 minutes of their arrival at the Type 1 ED, 15 minutes longer than the time spent in an ED in September 2015 (5 hours 52 minutes) (Table 7, Figure 9 and Table 8G).

<sup>42</sup> Information for July, August and September 2016 is detailed in Appendix 5, Table 8G.

<sup>43</sup> Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on date of departure.

# Appendices

---

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

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

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/dhssps-statistics-and-research>



## Appendix 2: Types of Emergency Care Department in Northern Ireland

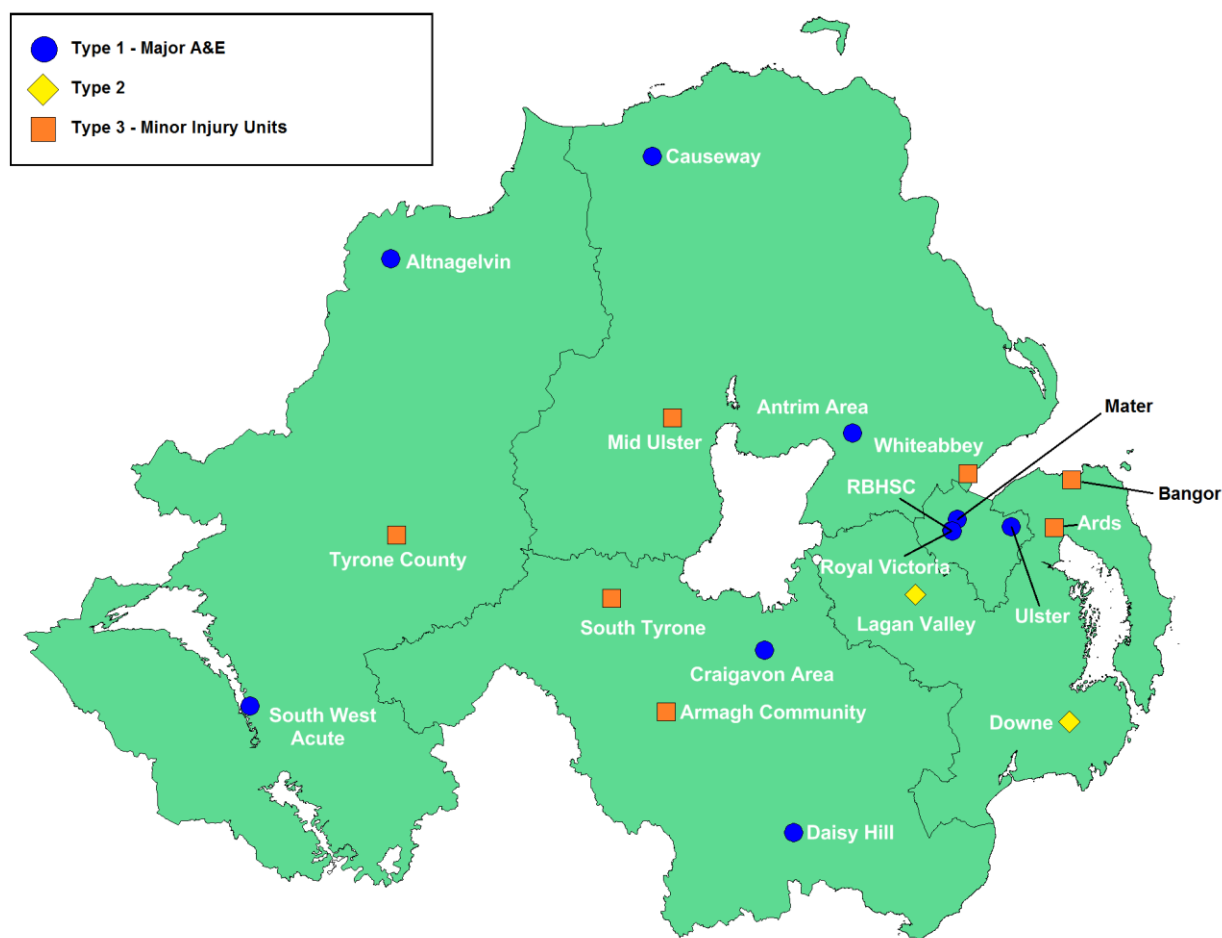
There are three separate categories of emergency care facility included in this publication:

**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 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.

**Figure 12: Locations of Emergency Care Department in Northern Ireland**



## Current Categorisation of Emergency Care Departments <sup>44</sup>

HSC Trust	Type 1 (24-hour assess)	Type 2 (Limited opening hours)	Type 3 (Limited opening hours)
<b>Belfast</b>	Belfast City (Closed)		
	Mater	RVH (RAES) <sup>45</sup> (9-5pm Mon-Fri) (8.30-1pm Sat)	
	Royal Victoria		
	RBHSC		
<b>Northern</b>	Antrim Area		Whiteabbey <sup>46</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>47</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>48</sup> (Closed)
<b>Western</b>	Altnagelvin Area		Tyrone County (24-hour)
	South West Acute		

<sup>44</sup> Opening Hours are as of October 2016.

<sup>45</sup> RVH (RAES) refers to the Regional Acute Eye Services at the Royal Victoria Hospital.

<sup>46</sup> Temporarily closed on 1<sup>st</sup> December 2014.

<sup>47</sup> Currently operates as a Type 3 on Saturday and Sunday, between 9am and 5pm.

<sup>48</sup> Temporarily closed on 17<sup>th</sup> November 2014.

## *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 Official 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.

It is the DoH responsibility to maintain compliance with the standards expected of National Statistics. If we become concerned about whether these statistics are still meeting the appropriate standards, we will discuss any concerns with the Authority promptly. National Statistics status can be removed at any point when the highest standards are not maintained, and reinstated when standards are restored.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed. Further information on the Code of Practice for National Statistics is available at: <http://www.statisticsauthority.gov.uk/assessment/code-of-practice/>.

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

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

## 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.

### Description of Data

Data on the number of new and unplanned review attendances at ED's in Northern Ireland by the length of time waited. New and unplanned review attendances at ED's are used to describe unplanned activity at ED's, 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 ED's – this is the number of new and unplanned review attendances at ED's 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 ED's 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 8A: New & Unplanned Review Attendances at Emergency Care Departments** <sup>49, 50</sup>

Department	New Attendances				Unplanned Review Attendances				Total Attendances			
	Sep-15	Jul-16	Aug-16	Sep-16	Sep-15	Jul-16	Aug-16	Sep-16	Sep-15	Jul-16	Aug-16	Sep-16
Mater	4,023	3,992	4,043	3,889	124	156	102	134	4,147	4,148	4,145	4,023
Royal Victoria	7,260	7,537	7,678	7,667	267	291	248	266	7,527	7,828	7,926	7,933
RBHSC	2,839	2,476	2,530	2,973	209	215	212	192	3,048	2,691	2,742	3,165
Antrim Area	6,175	6,390	6,440	6,604	405	332	393	386	6,580	6,722	6,833	6,990
Causeway	3,300	3,698	3,640	3,359	261	363	339	248	3,561	4,061	3,979	3,607
Ulster	7,316	7,522	7,796	7,597	217	225	220	220	7,533	7,747	8,016	7,817
Craigavon Area	6,327	6,173	6,518	6,536	389	422	451	438	6,716	6,595	6,969	6,974
Daisy Hill	3,766	4,068	4,286	4,018	278	384	349	287	4,044	4,452	4,635	4,305
Altnagelvin Area	4,692	5,184	5,032	4,964	273	289	319	308	4,965	5,473	5,351	5,272
South West Acute	2,328	2,744	2,766	2,535	151	200	200	135	2,479	2,944	2,966	2,670
<b>Type 1</b>	<b>48,026</b>	<b>49,784</b>	<b>50,729</b>	<b>50,142</b>	<b>2,574</b>	<b>2,877</b>	<b>2,833</b>	<b>2,614</b>	<b>50,600</b>	<b>52,661</b>	<b>53,562</b>	<b>52,756</b>
Downe	1,556	1,634	1,749	1,736	80	78	69	84	1,636	1,712	1,818	1,820
Lagan Valley	1,873	1,746	1,881	2,061	75	95	72	72	1,948	1,841	1,953	2,133
RVH (RAES) <sup>51</sup>	-	-	-	-	-	-	-	-	1,241	1,294	1,475	1,418
<b>Type 2</b>	<b>3,429</b>	<b>3,380</b>	<b>3,630</b>	<b>3,797</b>	<b>155</b>	<b>173</b>	<b>141</b>	<b>156</b>	<b>4,825</b>	<b>4,847</b>	<b>5,246</b>	<b>5,371</b>
Mid Ulster	848	697	813	796	44	46	32	33	892	743	845	829
Ards	911	850	1,022	1,025	35	34	50	61	946	884	1,072	1,086
Bangor	780	647	885	847	37	34	39	43	817	681	924	890
South Tyrone	2,367	2,275	2,481	2,467	74	100	154	208	2,441	2,375	2,635	2,675
Tyrone County	1,402	1,429	1,467	1,405	53	39	53	48	1,455	1,468	1,520	1,453
<b>Type 3</b>	<b>6,308</b>	<b>5,898</b>	<b>6,668</b>	<b>6,540</b>	<b>243</b>	<b>253</b>	<b>328</b>	<b>393</b>	<b>6,551</b>	<b>6,151</b>	<b>6,996</b>	<b>6,933</b>
<b>Northern Ireland</b>	<b>57,763</b>	<b>59,062</b>	<b>61,027</b>	<b>60,479</b>	<b>2,972</b>	<b>3,303</b>	<b>3,302</b>	<b>3,163</b>	<b>61,976</b>	<b>63,659</b>	<b>65,804</b>	<b>65,060</b>

<sup>49</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these waiting time statistics.

<sup>50</sup> Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on date of departure.

<sup>51</sup> To aid comparison with previous months, where possible, RVH (ENT) attendances have been removed from months prior to April 2016.

**Table 8B: Performance against Emergency Care Waiting Times Target**<sup>52,53</sup>

Department	4-Hour Performance				12-Hour Performance				Total Attendances			
	Sep-15	Jul-16	Aug-16	Sep-16	Sep-15	Jul-16	Aug-16	Sep-16	Sep-15	Jul-16	Aug-16	Sep-16
Mater	75.3%	73.1%	76.7%	70.4%	10	9	10	27	4,147	4,148	4,145	4,023
Royal Victoria	68.6%	68.1%	69.5%	69.3%	6	4	18	51	7,527	7,828	7,926	7,933
RBHSC	90.1%	89.2%	93.7%	87.5%	0	0	0	0	3,048	2,691	2,742	3,165
Antrim Area	64.8%	61.4%	66.4%	66.0%	1	175	22	40	6,580	6,722	6,833	6,990
Causeway	71.0%	56.9%	55.7%	62.8%	0	9	2	6	3,561	4,061	3,979	3,607
Ulster	74.1%	74.3%	71.3%	74.5%	28	68	79	22	7,533	7,747	8,016	7,817
Craigavon Area	72.5%	75.2%	70.3%	67.6%	0	3	0	0	6,716	6,595	6,969	6,974
Daisy Hill	86.4%	78.1%	80.9%	79.8%	0	0	0	0	4,044	4,452	4,635	4,305
Altnagelvin Area	71.0%	74.1%	69.2%	70.8%	18	1	8	6	4,965	5,473	5,351	5,272
South West Acute	85.4%	81.1%	71.8%	77.6%	1	1	8	0	2,479	2,944	2,966	2,670
<b>Type 1</b>	<b>73.9%</b>	<b>71.8%</b>	<b>71.3%</b>	<b>71.6%</b>	<b>64</b>	<b>270</b>	<b>147</b>	<b>152</b>	<b>50,600</b>	<b>52,661</b>	<b>53,562</b>	<b>52,756</b>
Downe	93.6%	89.9%	90.4%	89.9%	0	18	3	2	1,636	1,712	1,818	1,820
Lagan Valley	85.4%	87.7%	87.1%	92.1%	0	0	1	0	1,948	1,841	1,953	2,133
RVH (RAES) <sup>54</sup>	100.0%	100.0%	100.0%	100.0%	0	0	0	0	1,241	1,294	1,475	1,418
<b>Type 2</b>	<b>91.9%</b>	<b>91.7%</b>	<b>91.9%</b>	<b>93.4%</b>	<b>0</b>	<b>18</b>	<b>4</b>	<b>2</b>	<b>4,825</b>	<b>4,847</b>	<b>5,246</b>	<b>5,371</b>
Mid Ulster	100.0%	100.0%	100.0%	100.0%	0	0	0	0	892	743	845	829
Ards	100.0%	100.0%	100.0%	100.0%	0	0	0	0	946	884	1,072	1,086
Bangor	100.0%	100.0%	100.0%	100.0%	0	0	0	0	817	681	924	890
South Tyrone	100.0%	100.0%	100.0%	100.0%	0	0	0	0	2,441	2,375	2,635	2,675
Tyrone County	99.8%	99.7%	99.9%	99.9%	0	0	0	0	1,455	1,468	1,520	1,453
<b>Type 3</b>	<b>99.9%</b>	<b>99.9%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>6,551</b>	<b>6,151</b>	<b>6,996</b>	<b>6,933</b>
<b>Northern Ireland</b>	<b>78.1%</b>	<b>76.1%</b>	<b>76.0%</b>	<b>76.4%</b>	<b>64</b>	<b>288</b>	<b>151</b>	<b>154</b>	<b>61,976</b>	<b>63,659</b>	<b>65,804</b>	<b>65,060</b>

<sup>52</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these waiting time statistics.

<sup>53</sup> Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on date of departure.

<sup>54</sup> To aid comparison with previous months, where possible, RVH (ENT) attendances have been removed from months prior to April 2016.

**Table 8C: Percentage of Attendances (i) Referred by a GP; (ii) Re-attended with 7 Days; and (iii) Who Left before Treatment was Complete <sup>55</sup>**

Department	GP Referrals				Left before Treatment Complete				Unplanned Re-attendance with 7 Days			
	Sep-15	Jul-16	Aug-16	Sep-16	Sep-15	Jul-16	Aug-16	Sep-16	Sep-15	Jul-16	Aug-16	Sep-16
Mater	11.8%	13.2%	13.7%	14.4%	6.8%	7.5%	6.0%	8.4%	2.0%	2.7%	1.7%	2.5%
Royal Victoria	17.5%	19.1%	19.2%	19.4%	6.0%	5.7%	4.1%	4.5%	2.3%	2.4%	2.1%	2.1%
RBHSC	14.8%	12.9%	11.9%	14.9%	3.5%	3.3%	1.6%	2.8%	4.5%	5.7%	4.9%	4.2%
Antrim Area	19.3%	18.8%	19.0%	19.4%	2.9%	3.3%	2.9%	3.5%	4.1%	3.1%	3.9%	3.8%
Causeway	19.1%	19.4%	18.3%	19.4%	3.3%	12.1%	10.4%	5.4%	5.2%	6.7%	6.6%	5.0%
Ulster	22.2%	20.5%	21.6%	22.0%	2.3%	3.1%	3.1%	2.7%	2.0%	2.1%	2.1%	2.0%
Craigavon Area	22.9%	21.2%	21.2%	22.9%	3.6%	2.6%	3.0%	3.8%	3.6%	4.0%	4.1%	3.9%
Daisy Hill	12.7%	11.1%	9.5%	10.2%	2.9%	4.0%	3.6%	3.5%	4.8%	5.5%	5.5%	5.2%
Altnagelvin Area	13.4%	11.3%	12.0%	14.0%	4.8%	5.5%	5.5%	4.6%	3.6%	4.1%	4.3%	4.3%
South West Acute	14.2%	15.7%	15.5%	17.9%	3.5%	2.5%	3.6%	1.8%	5.5%	6.2%	6.4%	4.6%
<b>Type 1</b>	<b>17.7%</b>	<b>17.1%</b>	<b>17.2%</b>	<b>18.2%</b>	<b>4.0%</b>	<b>4.8%</b>	<b>4.2%</b>	<b>4.1%</b>	<b>3.5%</b>	<b>3.8%</b>	<b>3.8%</b>	<b>3.5%</b>
Downe	14.4%	16.0%	15.6%	18.9%	1.7%	1.6%	1.4%	1.4%	2.8%	2.7%	2.0%	2.3%
Lagan Valley	13.1%	15.1%	14.4%	14.4%	3.7%	2.1%	1.4%	1.2%	2.1%	2.7%	2.4%	2.0%
RVH (RAES) <sup>56</sup>	-	-	-	-	-	-	-	-	-	-	-	-
<b>Type 2</b>	<b>13.7%</b>	<b>15.5%</b>	<b>15.0%</b>	<b>16.5%</b>	<b>2.8%</b>	<b>1.9%</b>	<b>1.4%</b>	<b>1.3%</b>	<b>2.4%</b>	<b>2.7%</b>	<b>2.2%</b>	<b>2.2%</b>
Mid Ulster	1.7%	2.8%	2.6%	3.0%	0.0%	0.0%	0.1%	0.0%	2.0%	2.8%	1.4%	1.6%
Ards	1.4%	0.8%	0.7%	1.1%	0.5%	0.1%	0.2%	0.3%	1.9%	1.7%	1.7%	2.8%
Bangor	0.9%	0.6%	0.4%	0.3%	1.0%	0.3%	0.4%	0.8%	2.3%	3.1%	2.4%	2.5%
South Tyrone	0.6%	0.5%	0.6%	0.8%	0.4%	0.1%	0.3%	0.2%	1.6%	2.2%	3.2%	3.7%
Tyrone County	1.2%	1.2%	1.8%	1.0%	0.9%	0.6%	0.7%	0.6%	2.7%	1.5%	2.8%	1.9%
<b>Type 3</b>	<b>1.0%</b>	<b>1.0%</b>	<b>1.1%</b>	<b>1.1%</b>	<b>0.5%</b>	<b>0.2%</b>	<b>0.4%</b>	<b>0.4%</b>	<b>2.1%</b>	<b>2.1%</b>	<b>2.6%</b>	<b>2.8%</b>
<b>Northern Ireland</b>	<b>15.6%</b>	<b>15.4%</b>	<b>15.3%</b>	<b>16.3%</b>	<b>3.5%</b>	<b>4.2%</b>	<b>3.6%</b>	<b>3.5%</b>	<b>3.2%</b>	<b>3.6%</b>	<b>3.6%</b>	<b>3.3%</b>

<sup>55</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>56</sup> To aid comparison with previous months, where possible, RVH (ENT) attendances have been removed from months prior to April 2016.

**Table 8D: Waiting Time from Arrival to Triage (Assessment)<sup>57</sup>**

Department	Median				95 <sup>th</sup> Percentile			
	Sep-15	Jul-16	Aug-16	Sep-16	Sep-15	Jul-16	Aug-16	Sep-16
Mater	0:09	0:08	0:08	0:09	0:26	0:24	0:21	0:24
Royal Victoria	0:11	0:09	0:09	0:10	0:38	0:30	0:28	0:33
RBHSC	0:10	0:08	0:07	0:09	0:45	0:36	0:27	0:39
Antrim Area	0:08	0:07	0:07	0:07	0:22	0:22	0:21	0:22
Causeway	0:09	0:12	0:13	0:12	0:26	0:35	0:45	0:34
Ulster	0:08	0:08	0:08	0:09	0:24	0:24	0:28	0:27
Craigavon Area	0:08	0:07	0:08	0:07	0:28	0:24	0:26	0:24
Daisy Hill	0:07	0:05	0:06	0:06	0:21	0:17	0:17	0:16
Altnagelvin Area	0:12	0:13	0:15	0:14	0:32	0:43	0:48	0:38
South West Acute	0:11	0:14	0:15	0:13	0:42	0:57	1:00	0:57
<b>Type 1</b>	<b>0:09</b>	<b>0:09</b>	<b>0:09</b>	<b>0:09</b>	<b>0:31</b>	<b>0:31</b>	<b>0:34</b>	<b>0:32</b>
Downe	0:06	0:06	0:05	0:06	0:22	0:23	0:22	0:22
Lagan Valley	0:07	0:08	0:08	0:07	0:19	0:23	0:20	0:20
RVH (RAES) <sup>58</sup>	-	-	-	-	-	-	-	-
<b>Type 2</b>	<b>0:07</b>	<b>0:07</b>	<b>0:07</b>	<b>0:07</b>	<b>0:20</b>	<b>0:23</b>	<b>0:20</b>	<b>0:21</b>
Mid Ulster	0:02	0:02	0:03	0:02	0:08	0:08	0:09	0:07
Ards	0:03	0:03	0:03	0:03	0:16	0:11	0:17	0:13
Bangor	0:04	0:03	0:04	0:04	0:16	0:15	0:22	0:16
South Tyrone	0:01	0:01	0:02	0:02	0:08	0:08	0:13	0:13
Tyrone County	0:00	0:00	0:00	0:00	0:25	0:10	0:15	0:15
<b>Type 3</b>	<b>0:01</b>	<b>0:01</b>	<b>0:02</b>	<b>0:02</b>	<b>0:13</b>	<b>0:10</b>	<b>0:15</b>	<b>0:13</b>
<b>Northern Ireland</b>	<b>0:08</b>	<b>0:08</b>	<b>0:08</b>	<b>0:08</b>	<b>0:29</b>	<b>0:30</b>	<b>0:32</b>	<b>0:30</b>

<sup>57</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>58</sup> To aid comparison with previous months, where possible, RVH (ENT) attendances have been removed from months prior to April 2016.



**Table 8E: Waiting Time from Triage (Assessment) to Start of Treatment** <sup>59</sup>

Department	Median				95 <sup>th</sup> Percentile			
	Sep-15	Jul-16	Aug-16	Sep-16	Sep-15	Jul-16	Aug-16	Sep-16
Mater	0:51	0:51	0:50	0:53	3:54	4:20	3:32	4:30
Royal Victoria	0:51	0:48	0:47	0:47	3:50	4:08	3:32	3:27
RBHSC	0:41	0:42	0:31	0:45	2:39	2:35	2:08	2:42
Antrim Area	1:11	1:30	1:23	1:27	4:40	5:05	5:06	5:02
Causeway	0:31	1:31	1:28	0:55	3:44	6:41	5:37	4:23
Ulster	0:54	0:51	0:42	0:46	2:56	3:21	3:24	3:16
Craigavon Area	1:14	1:05	1:09	1:10	3:38	3:27	3:44	4:04
Daisy Hill	0:55	0:59	0:55	0:55	2:51	3:25	3:07	2:53
Altnagelvin Area	0:41	0:47	0:44	0:41	2:39	2:47	3:17	2:58
South West Acute	0:33	0:22	0:30	0:22	2:53	2:13	2:54	2:12
<b>Type 1</b>	<b>0:52</b>	<b>0:55</b>	<b>0:52</b>	<b>0:52</b>	<b>3:35</b>	<b>4:00</b>	<b>3:50</b>	<b>3:49</b>
Downe	0:32	0:30	0:26	0:32	2:01	2:26	2:12	2:04
Lagan Valley	1:02	0:32	0:27	0:28	3:03	2:13	2:11	1:48
RVH (RAES) <sup>60</sup>	-	-	-	-	-	-	-	-
<b>Type 2</b>	<b>0:45</b>	<b>0:31</b>	<b>0:27</b>	<b>0:30</b>	<b>2:50</b>	<b>2:16</b>	<b>2:11</b>	<b>1:54</b>
Mid Ulster	0:02	0:06	0:05	0:05	0:30	0:29	0:32	0:47
Ards	0:09	0:05	0:08	0:08	0:39	0:26	0:41	0:37
Bangor	0:04	0:02	0:03	0:03	0:32	0:26	0:28	0:25
South Tyrone	0:01	0:01	0:03	0:08	0:31	0:22	0:34	0:39
Tyrone County	0:10	0:10	0:11	0:10	1:15	1:05	1:12	1:10
<b>Type 3</b>	<b>0:05</b>	<b>0:03</b>	<b>0:05</b>	<b>0:07</b>	<b>0:44</b>	<b>0:39</b>	<b>0:45</b>	<b>0:46</b>
<b>Northern Ireland</b>	<b>0:44</b>	<b>0:44</b>	<b>0:42</b>	<b>0:41</b>	<b>3:23</b>	<b>3:47</b>	<b>3:36</b>	<b>3:35</b>

<sup>59</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>60</sup> To aid comparison with previous months, where possible, RVH (ENT) attendances have been removed from months prior to April 2016.

**Table 8F: Time Spent in an Emergency Care Department by those Admitted to Hospital <sup>61</sup>**

Department	Median (Admitted)				95 <sup>th</sup> Percentile (Admitted)			
	Sep-15	Jul-16	Aug-16	Sep-16	Sep-15	Jul-16	Aug-16	Sep-16
Mater	4:04	4:24	4:13	4:52	10:27	10:15	10:45	11:13
Royal Victoria	5:06	5:06	5:43	6:04	10:18	9:31	11:01	11:31
RBHSC	3:20	3:00	2:55	3:28	6:37	6:19	5:40	7:09
Antrim Area	5:16	7:13	5:25	5:19	10:43	17:45	10:52	11:07
Causeway	5:21	6:13	6:49	6:01	10:25	11:27	11:31	11:13
Ulster	5:00	4:25	5:01	4:21	10:49	10:46	11:34	9:33
Craigavon Area	4:33	4:24	4:40	5:03	10:13	9:49	10:19	10:19
Daisy Hill	3:25	4:43	4:34	4:43	6:52	10:31	10:04	11:28
Altnagelvin Area	5:58	5:18	5:58	5:51	10:55	9:55	11:01	11:24
South West Acute	3:31	3:51	4:46	3:57	6:34	7:42	10:30	7:34
<b>Type 1</b>	<b>4:40</b>	<b>4:48</b>	<b>5:06</b>	<b>4:58</b>	<b>10:19</b>	<b>11:07</b>	<b>10:55</b>	<b>10:52</b>
Downe	3:36	4:09	4:15	3:49	6:30	22:00	8:48	8:45
Lagan Valley	3:58	4:00	4:01	3:34	7:40	8:01	8:04	6:07
RVH (RAES) <sup>62</sup>	-	-	-	-	-	-	-	-
<b>Type 2</b>	<b>3:52</b>	<b>4:01</b>	<b>4:07</b>	<b>3:40</b>	<b>7:25</b>	<b>11:21</b>	<b>8:10</b>	<b>7:27</b>
Mid Ulster	-	-	-	-	-	-	-	-
Ards	-	-	-	-	-	-	-	-
Bangor	-	-	-	-	-	-	-	-
South Tyrone	-	-	-	-	-	-	-	-
Tyrone County	0:10	0:16	0:13	0:12	0:34	0:49	0:55	1:00
<b>Type 3</b>	<b>0:10</b>	<b>0:16</b>	<b>0:13</b>	<b>0:12</b>	<b>0:34</b>	<b>0:49</b>	<b>0:55</b>	<b>1:00</b>
<b>Northern Ireland</b>	<b>4:37</b>	<b>4:46</b>	<b>5:04</b>	<b>4:55</b>	<b>10:16</b>	<b>11:07</b>	<b>10:54</b>	<b>10:48</b>

<sup>61</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>62</sup> To aid comparison with previous months, where possible, RVH (ENT) attendances have been removed from months prior to April 2016.

**Table 8G: Time Spent in an Emergency Care Department by those Discharged Home** <sup>63</sup>

Department	Median (Non-Admitted)				95 <sup>th</sup> Percentile (Non-Admitted)			
	Sep-15	Jul-16	Aug-16	Sep-16	Sep-15	Jul-16	Aug-16	Sep-16
Mater	2:27	2:28	2:21	2:33	5:57	6:06	5:45	6:21
Royal Victoria	2:40	2:34	2:28	2:28	6:22	6:39	6:31	6:25
RBHSC	1:55	1:58	1:42	2:01	4:31	4:36	3:57	4:43
Antrim Area	2:43	2:40	2:40	2:33	7:13	7:24	7:04	6:54
Causeway	1:58	3:04	3:13	2:37	6:07	8:28	8:16	7:30
Ulster	2:03	2:13	2:06	2:10	5:13	5:36	5:52	5:42
Craigavon Area	2:31	2:21	2:32	2:40	5:43	5:28	5:52	6:03
Daisy Hill	1:57	2:07	2:01	2:04	4:46	5:25	5:00	5:07
Altnagelvin Area	2:16	2:17	2:21	2:19	5:24	5:10	5:54	5:37
South West Acute	2:07	2:13	2:25	2:10	5:07	5:10	5:43	5:19
<b>Type 1</b>	<b>2:19</b>	<b>2:22</b>	<b>2:22</b>	<b>2:22</b>	<b>5:52</b>	<b>6:13</b>	<b>6:15</b>	<b>6:07</b>
Downe	1:25	1:16	1:14	1:28	3:52	4:31	4:37	4:37
Lagan Valley	2:19	1:50	1:48	1:36	5:01	4:48	4:49	4:10
RVH (RAES) <sup>64</sup>	-	-	-	-	-	-	-	-
<b>Type 2</b>	<b>1:54</b>	<b>1:34</b>	<b>1:31</b>	<b>1:33</b>	<b>4:31</b>	<b>4:40</b>	<b>4:45</b>	<b>4:24</b>
Mid Ulster	0:28	0:34	0:34	0:34	1:09	1:13	1:19	1:34
Ards	0:39	0:31	0:37	0:39	1:31	1:16	1:28	1:25
Bangor	0:31	0:28	0:31	0:31	1:13	1:07	1:21	1:19
South Tyrone	0:28	0:31	0:31	0:34	1:10	1:15	1:13	1:19
Tyrone County	0:40	0:34	0:40	0:40	2:00	1:48	1:49	1:49
<b>Type 3</b>	<b>0:31</b>	<b>0:31</b>	<b>0:34</b>	<b>0:34</b>	<b>1:28</b>	<b>1:22</b>	<b>1:28</b>	<b>1:30</b>
<b>Northern Ireland</b>	<b>1:58</b>	<b>2:01</b>	<b>1:58</b>	<b>1:58</b>	<b>5:34</b>	<b>5:57</b>	<b>5:57</b>	<b>5:49</b>

<sup>63</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>64</sup> To aid comparison with previous months, where possible, RVH (ENT) attendances have been removed from months prior to April 2016.

**Table 8H: Attendances at Emergency Care Departments  
per 1000-Population by Age Group<sup>65, 66</sup>**

Age Group	Sep-15	Jul-16	Aug-16	Sep-16
Under 5	40	39	38	40
Aged 5 - 15	30	24	25	32
Aged 16 - 44	33	34	36	34
Aged 45 - 64	27	30	30	29
Aged 65 - 84	37	43	43	40
Aged 85 & Over	69	74	77	73
<b>Northern Ireland</b>	<b>33</b>	<b>34</b>	<b>35</b>	<b>34</b>

**Table 8I: Average Number of Attendances by Day of Week<sup>67</sup>**

Age Group	Sep-15	Jul-16	Aug-16	Sep-16
Monday	2,508	1,944	3,052	2,544
Tuesday	2,110	1,602	2,710	2,280
Wednesday	2,032	1,602	2,536	2,255
Thursday	2,016	2,094	2,068	2,118
Friday	1,970	2,179	1,691	2,055
Saturday	1,703	2,620	1,390	1,789
Sunday	1,810	2,115	1,494	1,827

<sup>65</sup> Excludes RVH (ENT & RAES) attendances.

<sup>66</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>67</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.

**Table 8J: Attendances at Emergency Care Departments, by Time Waited from Arrival to Discharge**<sup>68, 69</sup>

Department	Under 4 Hours				Between 4 and 12 Hours				Over 12 Hours			
	Sep-15	Jul-16	Aug-16	Sep-16	Sep-15	Jul-16	Aug-16	Sep-16	Sep-15	Jul-16	Aug-16	Sep-16
Mater	3,123	3,031	3,179	2,832	1,014	1,108	956	1,164	10	9	10	27
Royal Victoria	5,165	5,328	5,511	5,494	2,356	2,496	2,397	2,388	6	4	18	51
RBHSC	2,747	2,400	2,570	2,770	301	291	172	395	0	0	0	0
Antrim Area	4,263	4,128	4,537	4,611	2,316	2,419	2,274	2,339	1	175	22	40
Causeway	2,527	2,309	2,217	2,266	1,034	1,743	1,760	1,335	0	9	2	6
Ulster	5,579	5,754	5,715	5,822	1,926	1,925	2,222	1,973	28	68	79	22
Craigavon Area	4,869	4,962	4,900	4,711	1,847	1,630	2,069	2,263	0	3	0	0
Daisy Hill	3,492	3,475	3,748	3,435	552	977	887	870	0	0	0	0
Altnagelvin Area	3,525	4,057	3,704	3,735	1,422	1,415	1,639	1,531	18	1	8	6
South West Acute	2,117	2,389	2,129	2,071	361	554	829	599	1	1	8	0
<b>Type 1</b>	<b>37,407</b>	<b>37,833</b>	<b>38,210</b>	<b>37,747</b>	<b>13,129</b>	<b>14,558</b>	<b>15,205</b>	<b>14,857</b>	<b>64</b>	<b>270</b>	<b>147</b>	<b>152</b>
Downe	1,531	1,539	1,644	1,637	105	155	171	181	0	18	3	2
Lagan Valley	1,663	1,614	1,701	1,964	285	227	251	169	0	0	1	0
RVH (RAES) <sup>70</sup>	1,241	1,294	1,475	1,418	0	0	0	0	0	0	0	0
<b>Type 2</b>	<b>4,435</b>	<b>4,447</b>	<b>4,820</b>	<b>5,019</b>	<b>390</b>	<b>382</b>	<b>422</b>	<b>350</b>	<b>0</b>	<b>18</b>	<b>4</b>	<b>2</b>
Mid Ulster	892	743	845	829	0	0	0	0	0	0	0	0
Ards	946	884	1,072	1,086	0	0	0	0	0	0	0	0
Bangor	817	681	924	890	0	0	0	0	0	0	0	0
South Tyrone	2,440	2,375	2,635	2,675	1	0	0	0	0	0	0	0
Tyrone County	1,452	1,464	1,519	1,451	3	4	1	2	0	0	0	0
<b>Type 3</b>	<b>6,547</b>	<b>6,147</b>	<b>6,995</b>	<b>6,931</b>	<b>4</b>	<b>4</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Northern Ireland</b>	<b>48,389</b>	<b>48,427</b>	<b>50,025</b>	<b>49,697</b>	<b>13,523</b>	<b>14,944</b>	<b>15,628</b>	<b>15,209</b>	<b>64</b>	<b>288</b>	<b>151</b>	<b>154</b>

<sup>68</sup> Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these waiting time statistics.

<sup>69</sup> Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on date of departure.

<sup>70</sup> To aid comparison with previous months, where possible, RVH (ENT) attendances have been removed from months prior to April 2016.

## Appendix 5: Further Information

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

**Mr. Paul Stevenson**

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

☎ Tel: 028 905 22504

✉ Email: [Paul.Stevenson@health-ni.gov.uk](mailto:Paul.Stevenson@health-ni.gov.uk)

**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/dhssps-statistics-and-research>