

INFORMATION
ANALYSIS
DIRECTORATE



Emergency Care Waiting Time Statistics for Northern Ireland (October – December 2016)



Department of
Health

An Roinn Sláinte

Mánnystrie O Poustie

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Reader Information

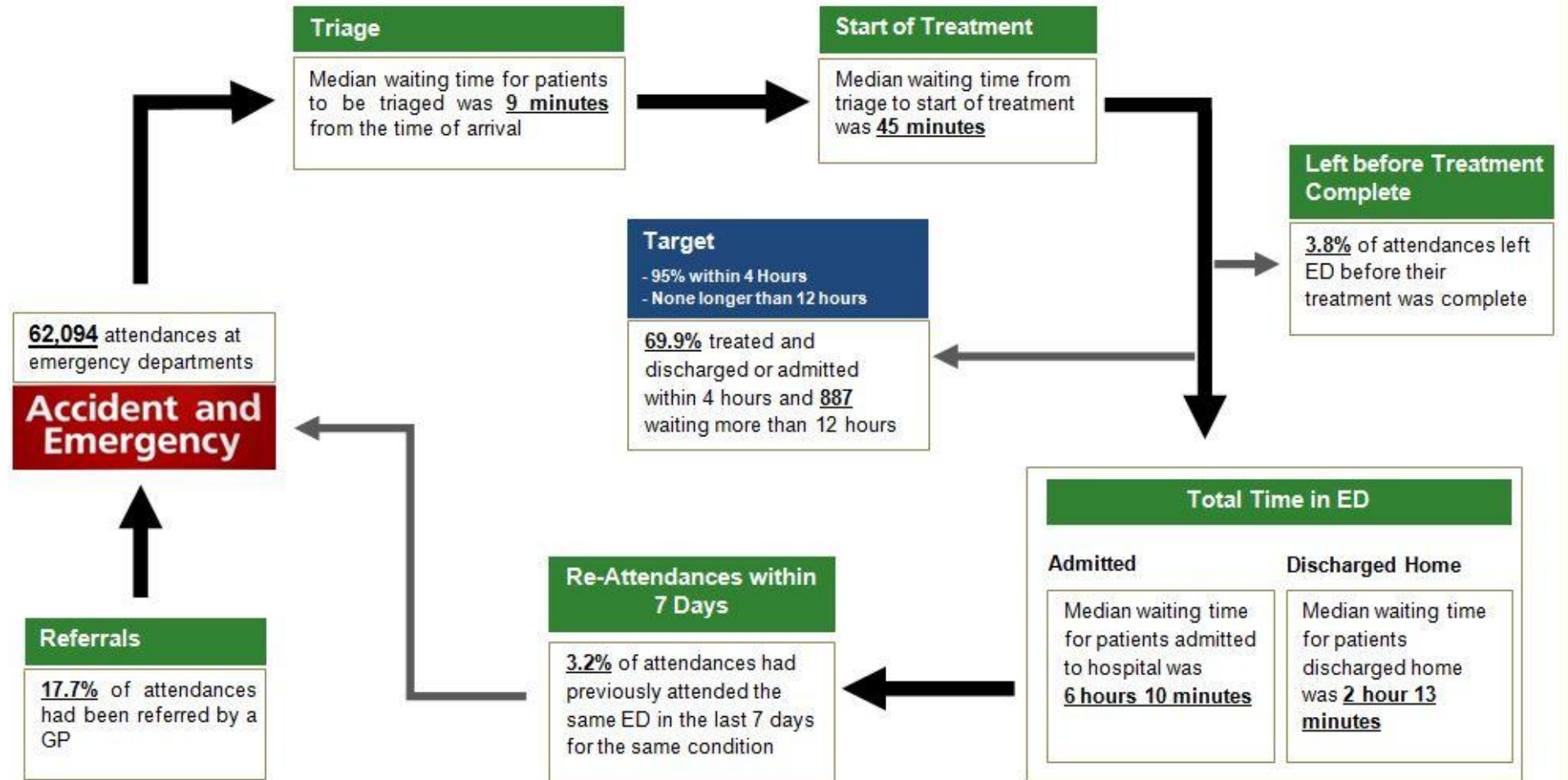
- Purpose:** This statistical release presents information on the time spent waiting in emergency care departments (ED), for both new and unplanned review attendances in Northern Ireland. It reports on the performance of ED's against the DoH Ministerial target, including additional information on the 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 technical guidance and definitions, as well as background information and is updated quarterly. This booklet can be found at the following link:
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- 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.
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SUMMARY OF KEY FACTS (December 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 December 2016, compared with the same month last year ^{1, 2}.

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

Attendances	December 2015	December 2016	Difference	
New	55,003	57,985	2,982	5.4%
Unplanned Review	2,552	2,808	256	10.0%
Total Attendances ^{3, 4}	58,734	62,094	3,360	5.7%
Emergency Admissions	12,088	12,410	322	2.7%

Source: Regional Data Warehouse

- Total attendances at ED's increased by 5.7% (3,360) when compared with December 2015, from 58,734 to 62,094 in December 2016 (Table 1, Table 8A).
- The number of new attendances increased by 5.4% (2,982) when compared with December 2015, from 55,003 to 57,985 in December 2016 (Table 1, Table 8A)
- Between December 2015 and December 2016, unplanned review attendances increased by 10.0% (256) (Table 1, Table 8A).
- Emergency admissions to hospital increased by 2.7% (322) between December 2015 (12,088) and December 2016 (12,410) (Table 1).

¹ Information for October, November and December 2016 is detailed in Appendix 5, Table 8A.

² 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.

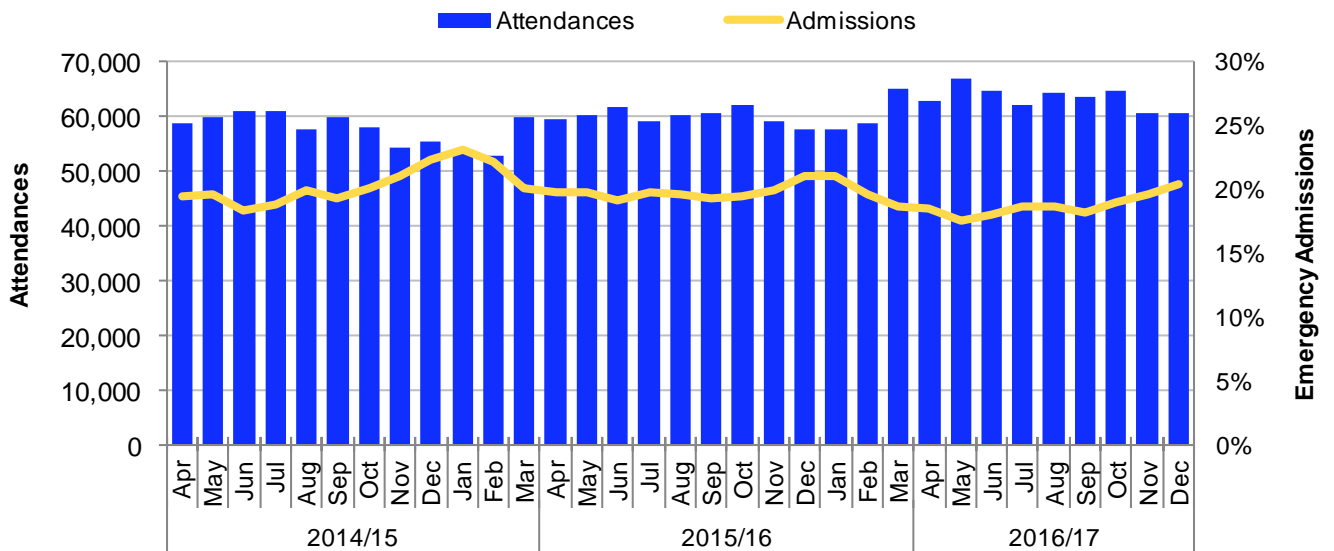
³ The RVH (ENT) service is no longer recorded in the waiting times information as it is an appointment based service. All information from April 2015 has been updated to reflect this change.

⁴ 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.

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 admissions⁵ to hospital each month, from April 2014.

Figure 1: Attendances at Emergency Care Departments and Emergency Admissions to Hospital (April 2014 – December 2016)⁶



- 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 in December and January and declined sharply in February and March to normal levels thereafter (Figure 1).

⁵ 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.

⁶ 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 December 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 ^{7, 8, 9}.

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

Department	New Attendances		Unplanned Review Attendances		Total Attendances	
	Dec-15	Dec-16	Dec-15	Dec-16	Dec-15	Dec-16
Mater	3,425	3,671	102	130	3,527	3,801
Royal Victoria	7,028	7,357	233	194	7,261	7,551
RBHSC	2,894	3,002	269	333	3,163	3,335
Antrim Area	6,037	6,416	298	346	6,335	6,762
Causeway	3,212	3,198	225	259	3,437	3,457
Ulster	7,046	7,572	167	168	7,213	7,740
Craigavon Area	6,345	6,578	358	405	6,703	6,983
Daisy Hill	3,787	4,325	187	240	3,974	4,565
Altnagelvin Area	4,788	4,716	250	246	5,038	4,962
South West Acute	2,510	2,688	160	121	2,670	2,809
Type 1	47,072	49,523	2,249	2,442	49,321	51,965
Type 2	3,104	3,343	105	146	4,388	4,790
Type 3	4,827	5,119	198	220	5,025	5,339
Northern Ireland ^{10,11}	55,003	57,985	2,552	2,808	58,734	62,094

Source: Regional Data Warehouse

- Total attendances increased at all ED Types between December 2015 and December 2016 (Table 2, Table 8A).
- The Ulster (7,740) and the Royal Victoria (7,551) were the busiest ED's during December 2016 (Table 2, Table 8A).
- Daisy Hill (591) and the Ulster (527) reported the highest increase in the number of attendances in December 2016, compared with December 2015 (Table 2, Table 8A).

⁷ Information for October, November and December 2016 is detailed in Appendix 5, Table 8A.

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

⁹ Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on the patient's date of departure, rather than date of arrival.

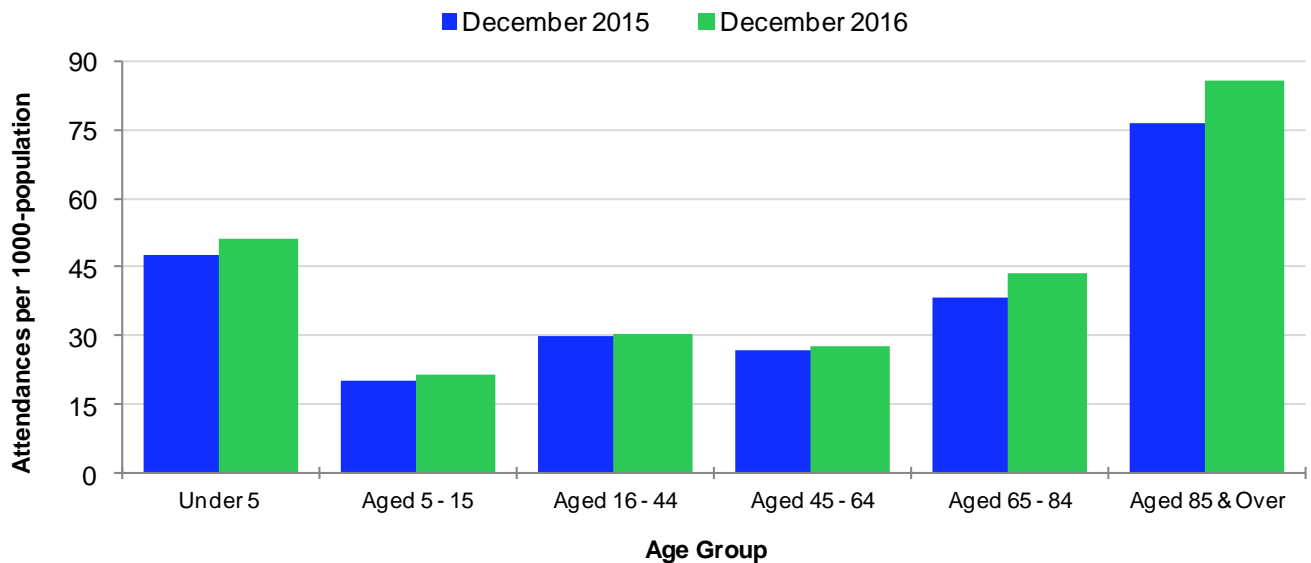
¹⁰ New and unplanned reviews will not sum to the total attendances in Table 2, as the total attendance figure will include attendances at the RVH (RAES), and it is not currently possible to collect detailed information for the RVH (RAES) services.

¹¹ The RVH (ENT) service is no longer recorded in the waiting times information as it is an appointment based 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 ^{12, 13}.

Figure 2: Attendances at Emergency Care Departments per 1,000-population, by Age Group (December 2015 and December 2016) ^{14, 15}



- During both December 2015 and December 2016, the highest number of attendances per 1000-population was recorded for those aged 85 & over (76 and 86 respectively) (Figure 2, Table 8H).
- The rate of attendances per 1,000-population increased, for all age groups between December 2015 and December 2016 (Figure 2, Table 8H).
- A high number of attendances per 1000-population aged under 5 was also recorded in both December 2015 and December 2016 (48 and 51 respectively) (Figure 2, Table 8H).
- The lowest number of attendances per 1000-population was recorded in the 5 – 15 age group during December 2015 and December 2016 (20 and 22 respectively) (Figure 2, Table 8H).

¹² Information for October, November and December 2016 is detailed in Appendix 5, Table 8H.

¹³ 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.

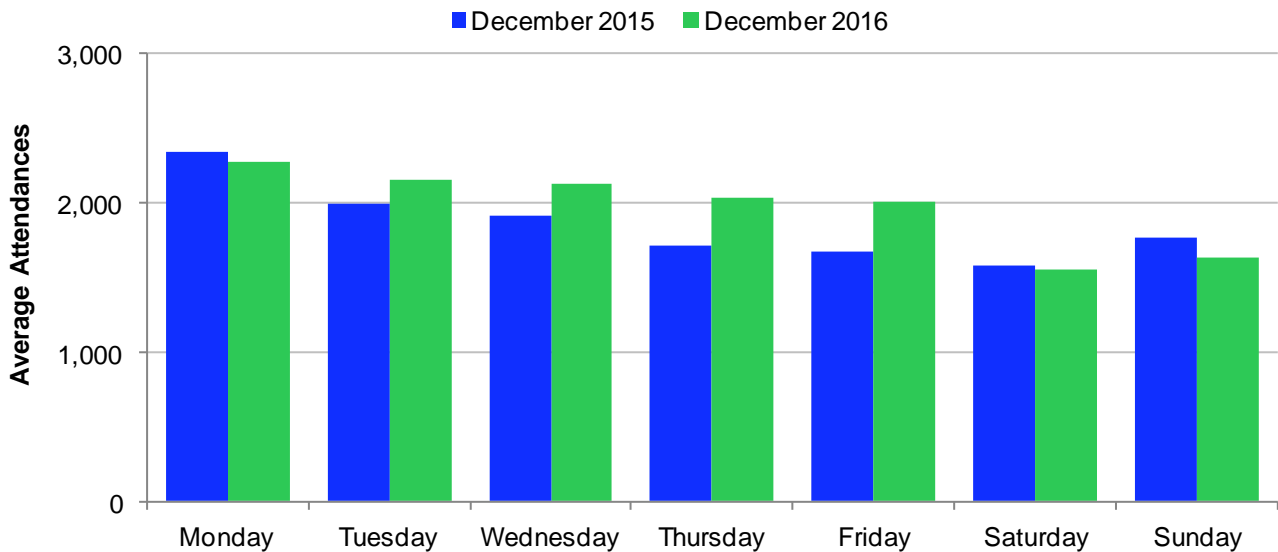
¹⁴ Excludes cases where the DOB could not be determined.

¹⁵ Based on the NISRA 2015 mid-year population estimate which was published on 31st 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 December 2016, compared with December 2015^{16,17}.

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



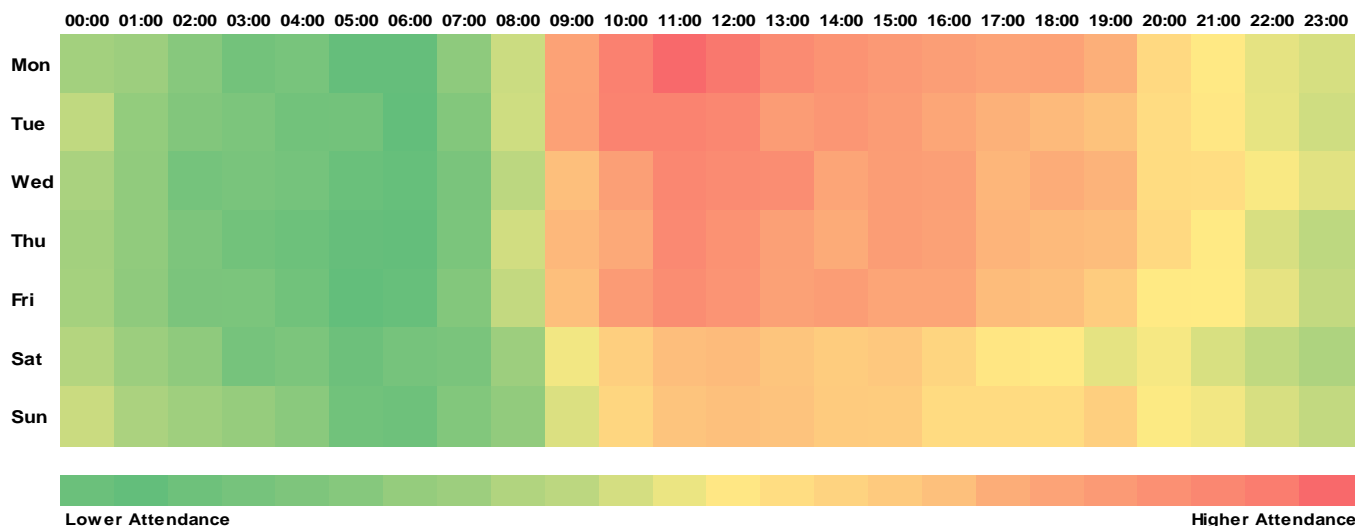
- The average number of attendances at ED's increased on Tuesday, Wednesday, Thursday and Friday in December 2016, compared with December 2015 (Figure 3, Table 8I).
- Overall, Monday was the busiest day at ED's during both December 2015 and December 2016, with over 2,300 daily attendances on average each Monday (Figure 3, Table 8I).
- The largest increase in average daily attendances between December 2015 and December 2016 (340) was on a Friday (1,669 and 2,009 respectively) (Figure 3, Table 8I).
- The lowest average number of daily attendances was on a Saturday in both months (Figure 3, Table 8I).

¹⁶ Information for October, November and December 2016 is detailed in Appendix 5, Table 8I.

¹⁷ 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 December 2016 ¹⁸. 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 (December 2016)



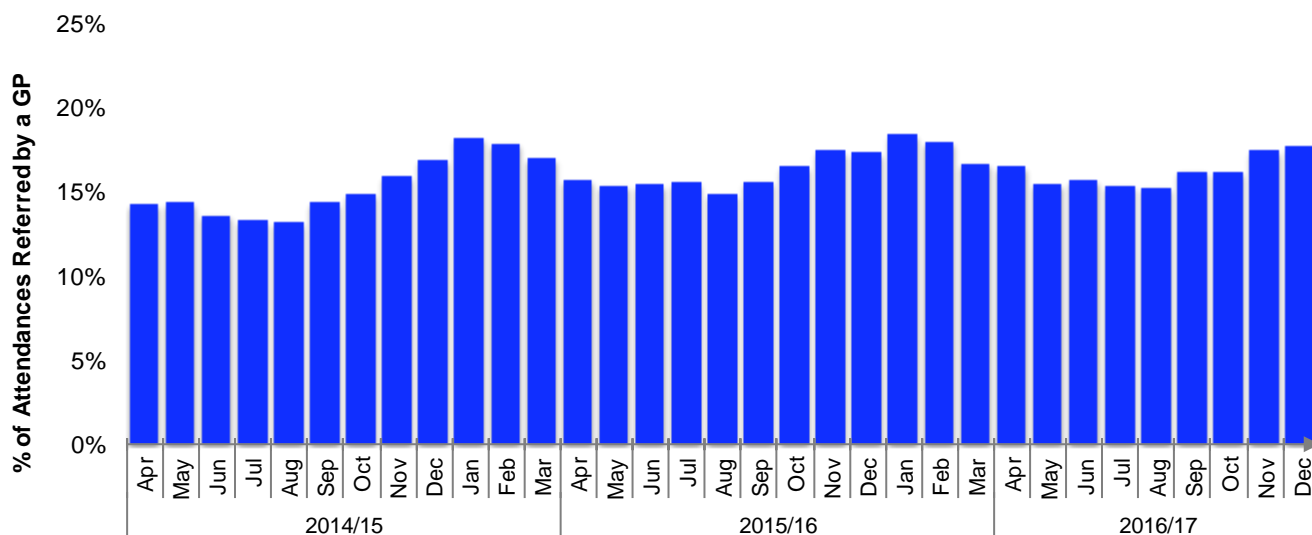
- Monday was the busiest day of the week during December 2016, with the highest number of attendances arriving between 11:00am and 11:59am (Figure 4).
- Saturday was the least busy day during December 2016, with the highest number of attendances arriving between 12:00pm and 12:59pm (Figure 4).
- Overall, the busiest hour of the day during December 2016 was between 11:00am and 11:59am, whilst the least busiest hour was 6:00am to 6:59am (Figure 4).

¹⁸ 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^{19, 20}.

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



- Over one in six (17.7%) attendances at ED's in December 2016 had been referred by a GP, slightly higher than December 2015 (17.3%) (Figure 5, Table 8C).
- Type 1 ED's reported the highest percentage of attendances referred by a GP (19.6%) during December 2016, 0.4 percentage points higher than December 2015 (19.2%) (Figure 5, Table 8C).
- Almost one quarter (24.4%) of attendances at the Ulster had been referred by a GP during December 2016, compared with 13.2% of attendances in Daisy Hill (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).

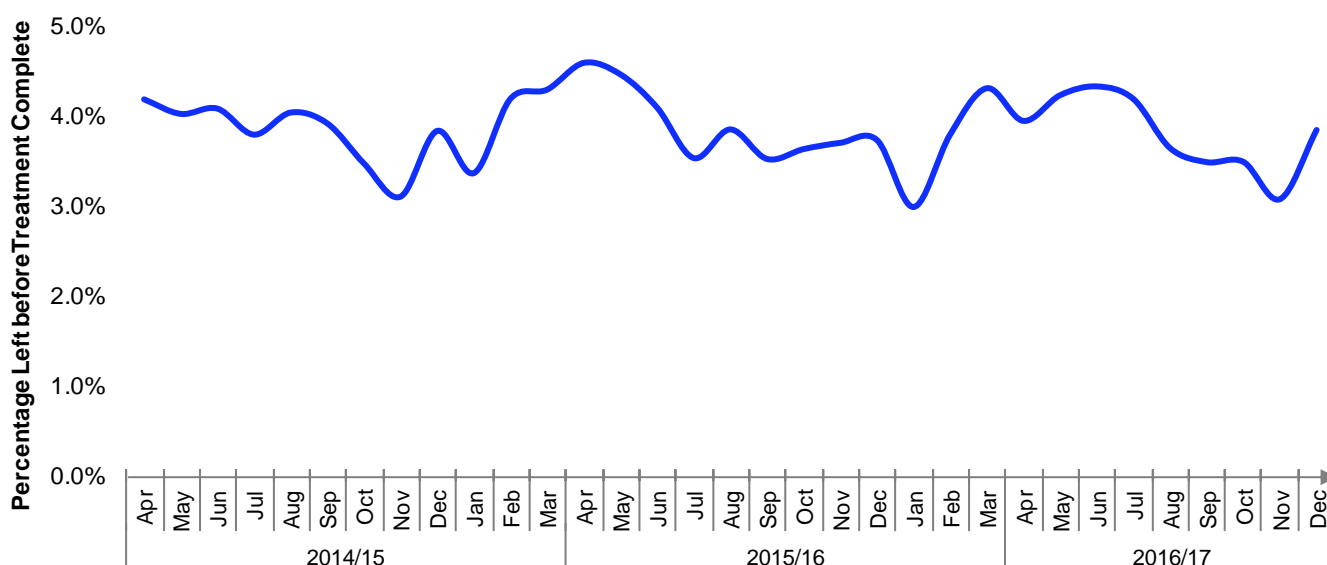
¹⁹ Information for October, November and December 2016 is detailed in Appendix 5, Table 8C.

²⁰ 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^{21, 22}.

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



- During December 2016, 3.8% of all ED attendances left before their treatment was complete, similar to the proportion in December 2015 (3.7%) (Figure 5, Table 8C).
- Type 1 (4.3%) ED's reported the highest percentage of patients leaving before their treatment was complete in December 2016, with 1.8% reported for Type 2 ED's and 0.2% for Type 3 ED's (Figure 5, Table 8C).
- The Mater (6.6%) reported the highest percentage of attendances leaving an ED before their treatment was complete during December 2016, 1.8 percentage points higher than December 2015 (4.8%) (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).

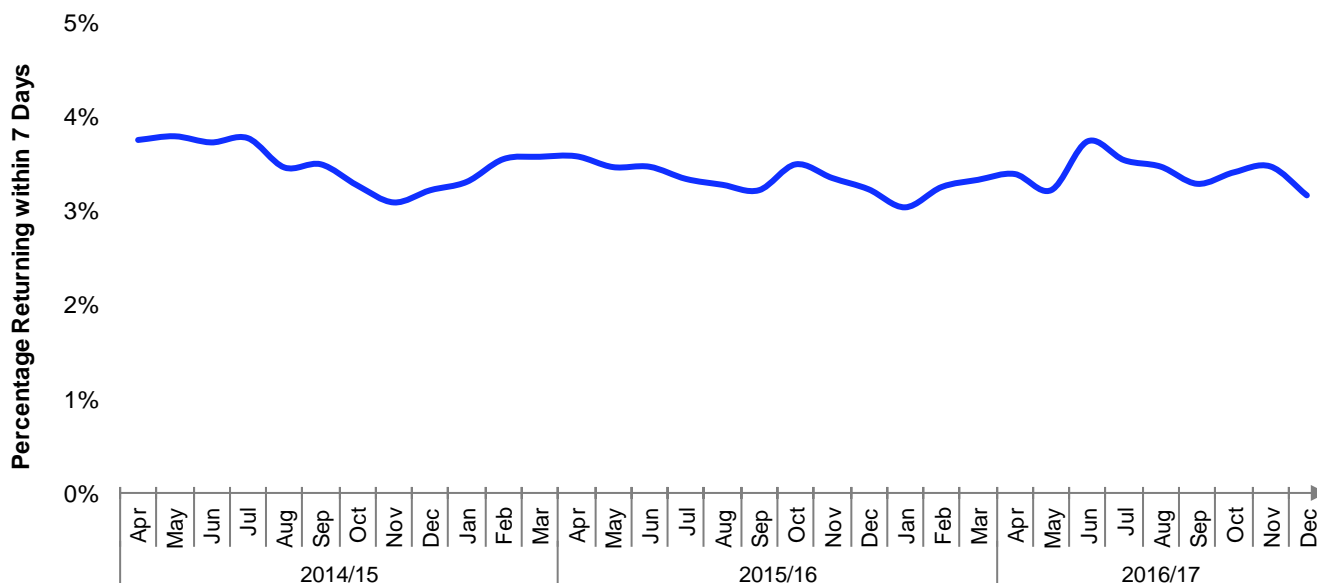
²¹ Information for October, November and December 2016 is detailed in Appendix 5, Table 8C.

²² 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^{23, 24}.

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



- The percentage of unplanned review attendances at ED's within 7 days of the original attendance for the same condition has changed slightly from April 2014, fluctuating between 3.0% and 4.0% of the total number of ED attendances (Figure 6).
- Almost 3.2% of attendances during December 2016 had previously attended the same ED within 7 days of their original attendance, similar to December 2015 (3.2%) (Figure 6, Table 8C).
- The RBHSC (6.4%) reported the highest percentage of unplanned review attendances within 7 days of the original attendance during December 2016 (Figure 6, Table 8C).

²³ Information for October, November and December 2016 is detailed in Appendix 5, Table 8C.

²⁴ 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 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.

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 ²⁵.

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

Percentage within 4 Hours	December 2015	December 2016	Difference	
			No.	% pt
Type 1	70.8%	65.4%	-	5.4%
Type 2	92.8%	84.6%	-	8.2%
Type 3	100.0%	99.9%	-	-0.1%
All Departments	75.0%	69.9%	-	5.1%
Number Over 12 Hours	December 2015	December 2016	Difference	
			No.	%
Type 1	281	856	575	-
Type 2	13	31	18	-
Type 3	0	0	0	-
All Departments	294	887	593	-
New and Unplanned Review Attendances	December 2015	December 2016	Difference	
			No.	%
Type 1	49,321	51,965	2,644	5.4%
Type 2	4,388	4,790	402	9.2%
Type 3	5,025	5,339	314	6.2%
All Departments	58,734	62,094	3,360	5.7%

Source: Regional Data Warehouse

- In December 2016, 69.9% of ED attendances were treated and discharged, or admitted within 4 hours of their arrival, 5.1 percentage points less than December 2015 (75.0%) (Table 3, Table 8B & Table 8J).
- During December 2016, almost two thirds (65.4%) of attendances at Type 1 ED's were treated and discharged, or admitted within 4 hours of their arrival, compared with 84.6% at Type 2 ED's and 99.9% at Type 3 ED's (Table 3, Table 8B & Table 8J).
- Between December 2015 and December 2016, the number of attendances waiting longer than 12 hours trebled, from 294 to 887, accounting for 1.4% of all attendances in December 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 a 5.7% increase in the number of attendances during this time (58,734 in December 2015 to 62,094 in December 2016) (Table 3, Table 8B & Table 8J).

²⁵ 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 December 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 the 4 and 12 Hour Components of the Emergency Care Waiting Times Target at Type 1 ED's (December 2015 and December 2016)^{26, 27, 28}

Department	4-Hour Performance		12-Hour Performance		Total Attendances	
	Dec-15	Dec-16	Dec-15	Dec-16	Dec-15	Dec-16
Mater	81.9%	68.7%	3	80	3,527	3,801
Royal Victoria	63.3%	65.0%	15	79	7,261	7,551
RBHSC	83.0%	79.2%	0	0	3,163	3,335
Antrim Area	63.3%	63.3%	82	271	6,335	6,762
Causeway	62.5%	61.4%	7	4	3,437	3,457
Ulster	71.0%	66.3%	162	177	7,213	7,740
Craigavon Area	69.2%	63.6%	2	123	6,703	6,983
Daisy Hill	85.7%	66.1%	0	20	3,974	4,565
Altnagelvin Area	72.2%	60.3%	4	80	5,038	4,962
South West Acute	70.3%	66.3%	6	22	2,670	2,809
Type 1	70.8%	65.4%	281	856	49,321	51,965
Type 2	92.8%	84.6%	13	31	4,388	4,790
Type 3	100.0%	99.9%	0	0	5,025	5,339
Northern Ireland	75.0%	69.9%	294	887	58,734	62,094

Source: Regional Data Warehouse

- During December 2016, RBHSC (79.2%) reported the highest performance of Type 1 ED's against the 4 hour target, whilst Altnagelvin Area (60.3%) reported the lowest performance (Table 4, Table 8B).
- One Type 1 ED (RBHSC) achieved the 12-hour component of the target during December 2016 (Table 4, Table 8B).
- Causeway reported the only improvement in 12-hour performance (3), from 7 in December 2015 to 4 in December 2016 (Table 4, Table 8B).
- Between December 2015 and December 2016, performance against the 12 hour target declined notably at Antrim Area (82 to 271) (Table 4, Table 8B).

²⁶ Information for October, November and December 2016 is detailed in Appendix 5: Table 8B & Table 8I.

²⁷ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these waiting time statistics.

²⁸ Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on the patients date of departure, rather than date of arrival.

Table 5 presents information on the percentage of patients commencing treatment, following triage, within 2 hours at Type 1 ED's in December 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 5: Performance against the Target to Commence Treating Patients within 2 Hours of them being Triageged (December 2015 and December 2016) ²⁹

Department	% Commencing Treatment within 2 Hours of Triage	
	Dec-15	Dec-16
Mater	87.9%	81.9%
Royal Victoria	76.2%	76.0%
RBHSC	82.6%	79.9%
Antrim Area	65.6%	76.2%
Causeway	75.8%	80.8%
Ulster	84.6%	78.0%
Craigavon Area	72.1%	72.2%
Daisy Hill	89.3%	76.2%
Altnagelvin Area	87.5%	76.3%
South West Acute	80.9%	88.8%
Type 1	79.5%	77.6%
Type 2	96.2%	91.7%
Type 3	99.8%	99.7%
Northern Ireland	82.4%	80.5%

Source: Regional Data Warehouse

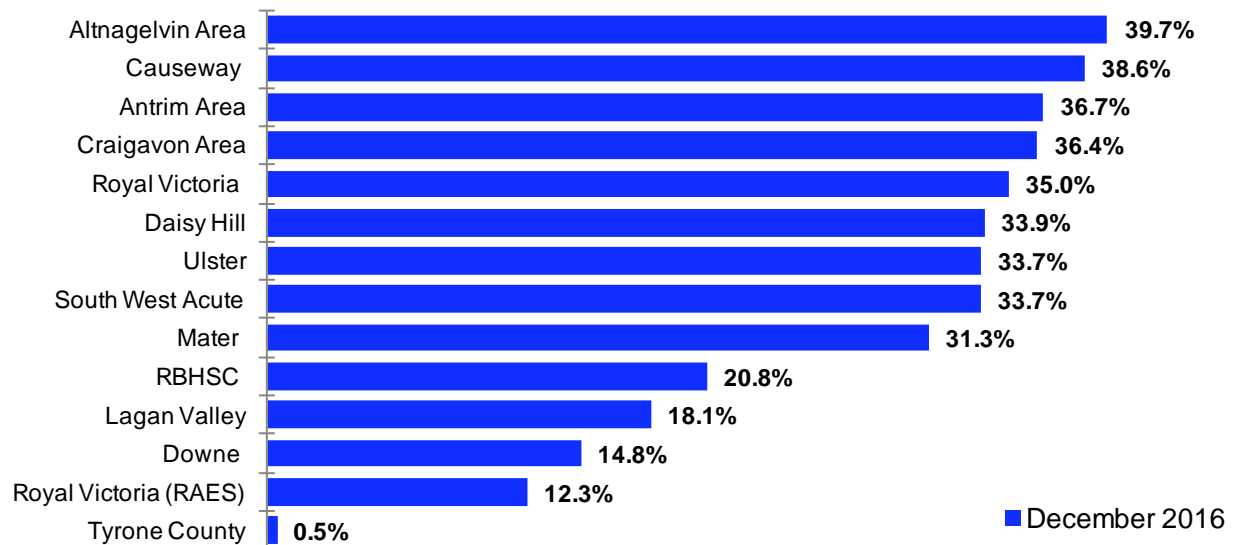
- Over four in five (80.5%) patients attending ED's commenced their treatment within 2 hours of being triaged, 1.9 percentage points less than December 2015 (82.4%) (Table 5, Table 8K).
- Three Type 1 ED's (Mater, Causeway and South West Acute) commenced treating 80.0% or more of patients, within 2 hours of being triaged during December 2016 (Table 5, Table 8K).
- During December 2016, South West Acute (88.8%) reported the highest percentage of patients commencing treatment within 2 hours of being triaged, whilst Craigavon Area (72.2%) reported the lowest percentage (Table 5, Table 8K).

²⁹ Information for October, November and December 2016 is detailed in Appendix 5: Table 8K.

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 ³⁰.

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



- Almost two fifths of attendances at Altnagelvin Area (39.7%) waited longer than 4 hours to be treated and discharged, or admitted to hospital during December 2016 (Figure 8, Table 8J).

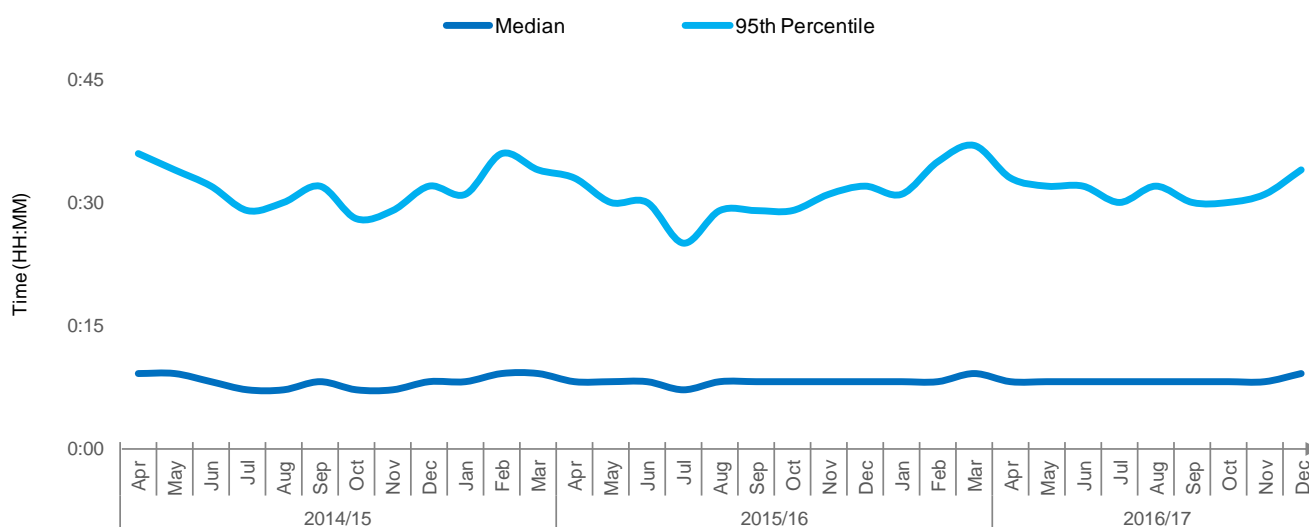
³⁰ Information for October, November and December 2016 is detailed in Appendix 5: Table 8J.

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 ³¹.

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 - December 2016) ³²



- During December 2016, the median waiting time from arrival to triage was 9 minutes, similar to the time taken in December 2015 (8 minutes) (Figure 9, Table 8D).
- 95 per cent of patients were triaged within 34 minutes of their arrival at an ED in December 2016, 2 minutes longer than December 2015 (32 minutes). The slight increase in the time taken to triage 95 per cent of patients may in part be due to the 5.7% increase in the number of patients attending ED's during this period (Figure 9, Table 8D).
- Over three quarters (75.6%) of attendances were triaged within 15 minutes of their arrival at an ED during December 2016, 2.9 percentage points less than December 2015 (78.5%).

³¹ 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.

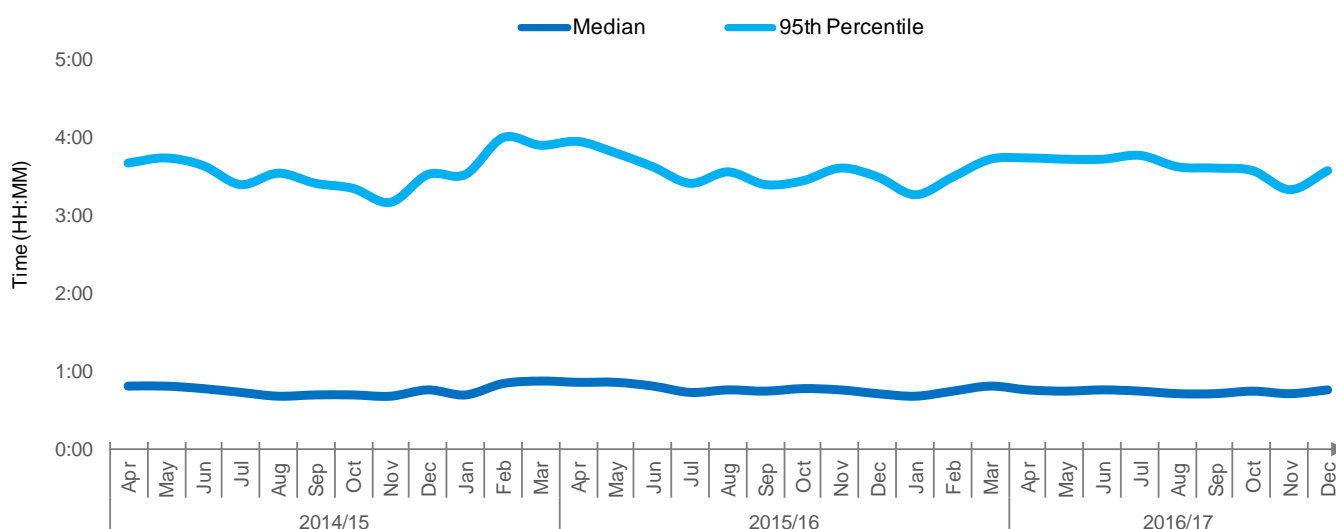
³² Additional information on time to triage is detailed in Appendix 5: Table 8D.

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 ³³.

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 patient's commenced treatment.

Figure 10: Time from Triage to Start of Treatment (April 2014 – December 2016) ³⁴



- The median waiting time from triage to start of treatment in December 2016 was 45 minutes, 3 minutes longer than the time taken in December 2015 (42 minutes) (Figure 10, Table 8E).
- During December 2016, 95 per cent of patients commenced their treatment within 3 hours 34 minutes of being triaged in an ED, 5 minutes longer than the time taken in December 2015 (3 hours 29 minutes) (Figure 10, Table 8E).

³³ 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.

³⁴ 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 6 details the median and 95th percentile of the length of time waited from triage to the start of treatment at Type 1 ED's during December 2016 compared with December 2015 ^{35, 36}.

Table 6: Time from Triage to Start of Treatment (December 2015 and December 2016) ³⁷

Department	Median		95 th Percentile	
	Dec-15	Dec-16	Dec-15	Dec-16
Mater	0:34	0:47	3:09	3:58
Royal Victoria	0:51	0:50	4:30	3:40
RBHSC	0:54	0:53	3:07	3:24
Antrim Area	1:16	0:59	4:57	4:19
Causeway	0:53	0:43	4:00	3:57
Ulster	0:47	0:52	2:58	3:30
Craigavon Area	1:11	1:08	3:34	3:52
Daisy Hill	0:42	1:07	2:31	3:44
Altnagelvin Area	0:41	0:57	2:41	3:43
South West Acute	0:45	0:22	3:38	3:28
Type 1	0:51	0:53	3:40	3:45
Type 2	0:27	0:33	1:48	2:27
Type 3	0:03	0:05	0:37	0:40
Northern Ireland	0:42	0:45	3:29	3:34

Source: Regional Data Warehouse

- The median time waited from triage to the start of treatment by a medical professional was 53 minutes at Type 1 ED's during December 2016, 2 minutes longer than December 2015 (51 minutes) (Table 6, Table 8E).
- Craigavon Area reported the longest median waiting time (1 hour 8 Minutes) from triage to start of treatment during December 2016, whilst South West Acute (22 minutes) reported the shortest median waiting time (Table 6, Table 8E).
- Antrim Area reported the longest waiting time between triage and start of treatment, with 95 per cent of attendances commencing treatment within 4 hours 19 minutes of being triaged, though this was 38 minutes less than December 2015 (4 hours 57 minutes) (Table 6, Table 8E).
- The RBHSC reported the shortest time to start of treatment during December 2016, with 95 per cent of attendances commencing treatment within 3 hours 24 minutes of being triaged, 17 minutes longer than December 2015 (3 hours 7 minutes) (Table 6, Table 8E).

³⁵ 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.

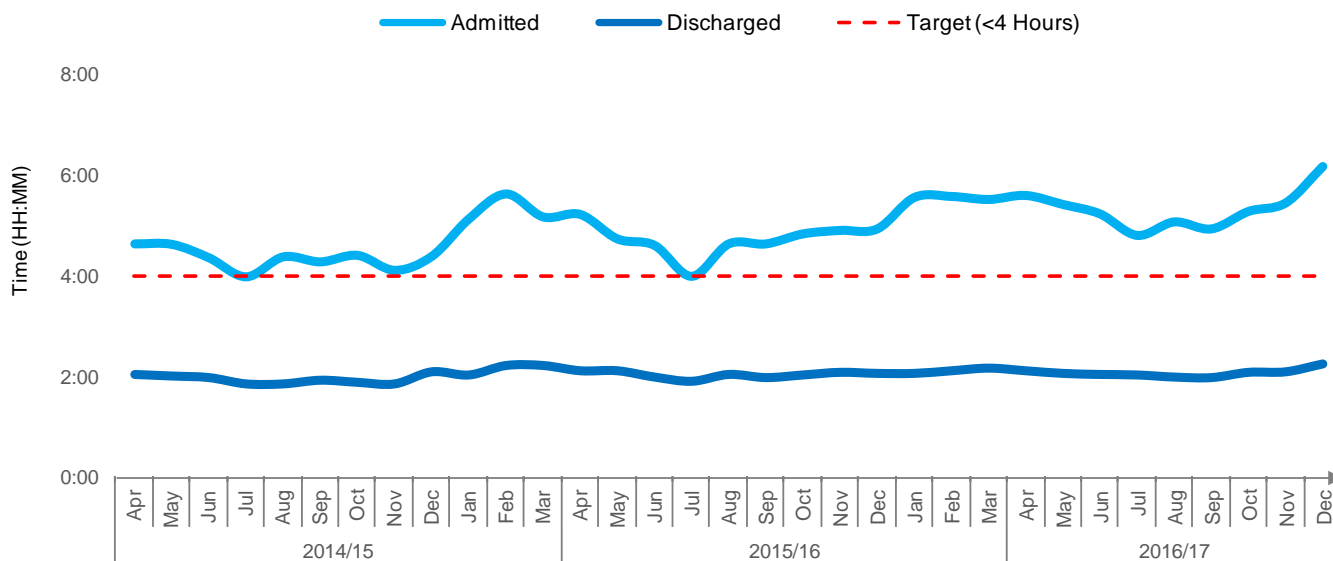
³⁶ Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on the patient's date of departure, rather than date of arrival.

³⁷ Information for October, November and December 2016 is detailed in Appendix 5, Table 8E.

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

Information detailed in Tables 7 and 8 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 December 2016) ^{38, 39}



- During December 2016, the median time spent in an ED for patients admitted to hospital was 6 hours 10 minutes, compared with 2 hour 13 minutes for those discharged home. It should be noted that during December 2016, both the median time spent in an ED for patients admitted to hospital (6 hours 10 minutes) and the median time spent for those discharged home (2 hours 13 minutes), was the highest recorded time since the establishment of this information collection in April 2013 (Figure 11).
- Analysis of the 95th percentiles for the length of time spent in an ED for those admitted and discharged home indicates that in December 2016, 95 per cent of patients admitted to hospital spent over twice as long in an ED (13 hour 54 minutes) than those discharged home (6 hours 18 minutes) (Table 7 & 8).

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

³⁹ 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 7 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.

Table 7: Total Time Spent in an Emergency Care Department for those Admitted to Hospital (December 2015 and December 2016) ^{40, 41}

Department	Median		95 th Percentile	
	Dec-15	Dec-16	Dec-15	Dec-16
Mater	3:48	5:51	9:40	15:04
Royal Victoria	5:37	6:24	11:21	11:57
RBHSC	3:28	3:31	7:25	7:37
Antrim Area	5:51	7:25	11:55	19:54
Causeway	6:52	7:10	11:39	11:37
Ulster	5:16	5:40	16:31	15:54
Craigavon Area	4:46	6:45	10:27	14:20
Daisy Hill	3:28	6:15	7:46	11:55
Altnagelvin Area	5:33	7:19	10:40	12:15
South West Acute	4:31	4:54	9:12	11:13
Type 1	4:58	6:16	11:19	13:55
Type 2	3:51	4:42	8:44	14:37
Type 3	0:10	0:15	0:19	1:10
Northern Ireland	4:55	6:10	11:16	13:54

Source: Regional Data Warehouse

- The median time spent in a Type 1 ED for patients admitted to hospital was 6 hours 16 minutes in December 2016, 1 hour 18 minutes more than the same month last year (4 hours 58 minutes) (Table 7, Table 8F).
- Antrim Area reported the longest median time spent in an ED (7 hours 25 minutes) from arrival to admission to hospital, whilst RBHSC (3 hours 31 minutes) reported the shortest median time (Table 7, Table 8F).
- 95 per cent of patients were admitted to hospital within 13 hours 55 minutes of arrival at all Type 1 ED's during December 2016, 2 hours 36 minutes longer than December 2015 (11 hours 19 minutes) (Table 7, Table 8F).
- Antrim Area reported that 95 per cent of attendances were admitted to hospital within 19 hours 54 minutes of their arrival during December 2016, 7 hours 59 minutes longer than December 2015 (11 hours 55 minutes) (Table 7, Table 8F).

⁴⁰ Information for October, November and December 2016 is detailed in Appendix 5, Table 8F.

⁴¹ Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on the patient's date of departure, rather than date of arrival.

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

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 discharged home**.

Table 8: Total Time Spent in Emergency Care Departments for those Discharged Home (December 2015 and December 2016) ^{42, 43}

Department	Median		95 th Percentile	
	Dec-15	Dec-16	Dec-15	Dec-16
Mater	2:07	2:37	4:58	6:33
Royal Victoria	2:48	2:37	7:25	6:45
RBHSC	2:13	2:21	5:16	5:25
Antrim Area	2:36	2:31	7:16	7:10
Causeway	2:31	2:30	6:40	7:40
Ulster	2:09	2:30	5:33	5:58
Craigavon Area	2:39	2:37	6:07	6:22
Daisy Hill	1:49	2:40	4:34	6:16
Altnagelvin Area	2:16	2:43	5:28	6:49
South West Acute	2:25	2:28	6:27	6:51
Type 1	2:22	2:34	6:15	6:33
Type 2	1:34	1:43	4:33	5:19
Type 3	0:30	0:30	1:25	1:21
Northern Ireland	2:03	2:13	5:58	6:18

Source: Regional Data Warehouse

- The median time spent in a Type 1 ED by patients who were discharged home (not admitted) was 2 hours 34 minutes in December 2016, 12 minutes longer than the time spent in an ED during the same month last year (2 hour 22 minutes) (Table 8, Table 8G).
- In December 2016, 95 per cent of attendances were discharged home within 6 hours 33 minutes of their arrival at a Type 1 ED, 18 minutes longer than the time spent in an ED in December 2015 (6 hours 15 minutes) (Table 8, Table 8G).

⁴² Information for October, November and December 2016 is detailed in Appendix 5, Table 8G.

⁴³ Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on the patient's date of departure, rather than date of arrival.

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

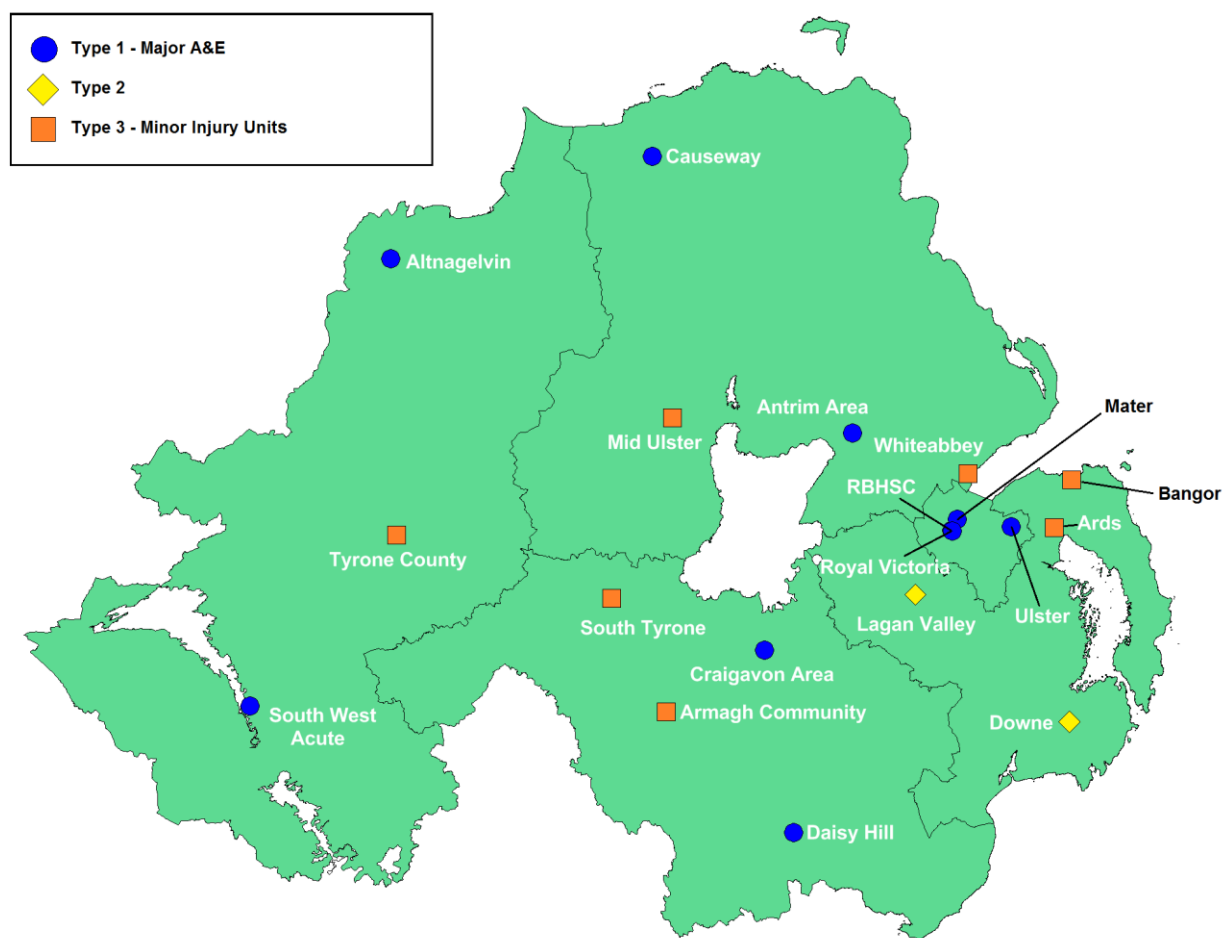
There are three separate categories of emergency care facility included in this publication:

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 ⁴⁴

HSC Trust	Type 1 (24-hour assess)	Type 2 (Limited opening hours)	Type 3 (Limited opening hours)
Belfast	Belfast City (Closed)		
	Mater	RVH (RAES) ⁴⁵ (9-5pm Mon-Fri) (8.30-1pm Sat)	
	Royal Victoria		
	Royal Belfast Hospital for Sick Children (RBHSC)		
Northern	Antrim Area		Whiteabbey ⁴⁶ (Closed)
	Causeway		Mid Ulster (9-5pm Mon-Fri)
South Eastern	Ulster	Lagan Valley (8-8pm Mon-Fri)	Ards MIU (9-5pm Mon-Fri)
		Downe ⁴⁷ (8-8pm Mon-Fri) (9-5pm (MIU only) Sat-Sun)	Bangor MIU (9-5pm Mon-Fri)
Southern	Craigavon Area		South Tyrone (9-9pm Mon-Fri) (10-6pm Sat-Sun)
	Daisy Hill		Armagh Community ⁴⁸ (Closed)
Western	Altnagelvin Area		Tyrone County (24-hour)
	South West Acute		

⁴⁴ Opening Hours are as of January 2016.

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

⁴⁶ Temporarily closed on 1st December 2014.

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

⁴⁸ Temporarily closed on 17th 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^{49, 50}

Department	New Attendances				Unplanned Review Attendances				Total Attendances			
	Dec-15	Oct-16	Nov-16	Dec-16	Dec-15	Oct-16	Nov-16	Dec-16	Dec-15	Oct-16	Nov-16	Dec-16
Mater	3,425	3,826	3,595	3,671	102	118	131	130	3,527	3,944	3,726	3,801
Royal Victoria	7,028	8,025	7,301	7,357	233	254	223	194	7,261	8,279	7,524	7,551
RBHSC	2,894	3,244	3,237	3,002	269	299	324	333	3,163	3,543	3,561	3,335
Antrim Area	6,037	6,780	6,311	6,416	298	329	299	346	6,335	7,109	6,610	6,762
Causeway	3,212	3,359	3,116	3,198	225	245	248	259	3,437	3,604	3,364	3,457
Ulster	7,046	7,826	7,347	7,572	167	216	205	168	7,213	8,042	7,552	7,740
Craigavon Area	6,345	6,808	6,381	6,578	358	480	474	405	6,703	7,288	6,855	6,983
Daisy Hill	3,787	4,323	3,997	4,325	187	333	241	240	3,974	4,656	4,238	4,565
Altnagelvin Area	4,788	5,041	4,647	4,716	250	324	262	246	5,038	5,365	4,909	4,962
South West Acute	2,510	2,696	2,613	2,688	160	135	124	121	2,670	2,831	2,737	2,809
Type 1	47,072	51,928	48,545	49,523	2,249	2,733	2,531	2,442	49,321	54,661	51,076	51,965
Downe	1,427	1,575	1,613	1,554	42	84	69	77	1,469	1,659	1,682	1,631
Lagan Valley	1,677	1,953	1,871	1,789	63	75	72	69	1,740	2,028	1,943	1,858
RVH (RAES) ⁵¹	-	-	-	-	-	-	-	-	1,179	1,407	1,368	1,301
Type 2	3,104	3,528	3,484	3,343	105	159	141	146	4,388	5,094	4,993	4,790
Mid Ulster	583	777	706	577	35	25	18	19	618	802	724	596
Ards	749	911	831	781	37	46	37	44	786	957	868	825
Bangor	600	860	758	606	25	46	47	35	625	906	805	641
South Tyrone	1,696	2,293	1,986	1,998	73	211	164	88	1,769	2,504	2,150	2,086
Tyrone County	1,199	1,346	1,187	1,157	28	40	33	34	1,227	1,386	1,220	1,191
Type 3	4,827	6,187	5,468	5,119	198	368	299	220	5,025	6,555	5,767	5,339
Northern Ireland	55,003	61,643	57,497	57,985	2,552	3,260	2,971	2,808	58,734	66,310	61,836	62,094

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

⁵⁰ Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on the patients date of departure, rather than date of arrival.

⁵¹ 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^{52, 53}

Department	4-Hour Performance				12-Hour Performance				Total Attendances			
	Dec-15	Oct-16	Nov-16	Dec-16	Dec-15	Oct-16	Nov-16	Dec-16	Dec-15	Oct-16	Nov-16	Dec-16
Mater	81.9%	72.3%	76.5%	68.7%	3	27	29	80	3,527	3,944	3,726	3,801
Royal Victoria	63.3%	66.7%	67.9%	65.0%	15	68	81	79	7,261	8,279	7,524	7,551
RBHSC	83.0%	84.3%	83.8%	79.2%	0	0	0	0	3,163	3,543	3,561	3,335
Antrim Area	63.3%	63.6%	63.5%	63.3%	82	118	163	271	6,335	7,109	6,610	6,762
Causeway	62.5%	68.2%	66.5%	61.4%	7	0	0	4	3,437	3,604	3,364	3,457
Ulster	71.0%	73.4%	72.0%	66.3%	162	44	114	177	7,213	8,042	7,552	7,740
Craigavon Area	69.2%	65.3%	64.1%	63.6%	2	13	12	123	6,703	7,288	6,855	6,983
Daisy Hill	85.7%	74.7%	72.7%	66.1%	0	0	6	20	3,974	4,656	4,238	4,565
Altnagelvin Area	72.2%	65.9%	67.7%	60.3%	4	21	11	80	5,038	5,365	4,909	4,962
South West Acute	70.3%	73.0%	71.1%	66.3%	6	9	25	22	2,670	2,831	2,737	2,809
Type 1	70.8%	69.7%	69.6%	65.4%	281	300	441	856	49,321	54,661	51,076	51,965
Downe	90.7%	90.7%	88.6%	85.2%	13	8	19	31	1,469	1,659	1,682	1,631
Lagan Valley	89.6%	88.8%	88.9%	81.9%	0	0	0	0	1,740	2,028	1,943	1,858
RVH (RAES) ⁵⁴	100.0%	90.3%	88.2%	87.7%	0	0	0	0	1,179	1,407	1,368	1,301
Type 2	92.8%	89.8%	88.6%	84.6%	13	8	19	31	4,388	5,094	4,993	4,790
Mid Ulster	100.0%	100.0%	99.6%	100.0%	0	0	0	0	618	802	724	596
Ards	100.0%	100.0%	100.0%	100.0%	0	0	0	0	786	957	868	825
Bangor	100.0%	100.0%	100.0%	100.0%	0	0	0	0	625	906	805	641
South Tyrone	100.0%	100.0%	100.0%	100.0%	0	0	0	0	1,769	2,504	2,150	2,086
Tyrone County	100.0%	99.8%	99.8%	99.5%	0	0	0	0	1,227	1,386	1,220	1,191
Type 3	100.0%	100.0%	99.9%	99.9%	0	0	0	0	5,025	6,555	5,767	5,339
Northern Ireland	75.0%	74.2%	74.0%	69.9%	294	308	460	887	58,734	66,310	61,836	62,094

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

⁵³ Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on the patients date of departure, rather than date of arrival.

⁵⁴ 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 ⁵⁵

Department	GP Referrals				Left before Treatment Complete				Unplanned Re-attendance with 7 Days			
	Dec-15	Oct-16	Nov-16	Dec-16	Dec-15	Oct-16	Nov-16	Dec-16	Dec-15	Oct-16	Nov-16	Dec-16
Mater	13.6%	14.4%	14.8%	14.9%	4.8%	7.2%	5.4%	6.6%	1.9%	2.1%	2.2%	2.4%
Royal Victoria	18.7%	19.0%	18.3%	18.1%	6.0%	4.5%	2.9%	4.3%	2.2%	2.0%	2.0%	1.6%
RBHSC	17.8%	17.0%	19.4%	17.8%	5.8%	4.6%	5.8%	5.8%	6.3%	5.8%	6.8%	6.4%
Antrim Area	20.4%	19.3%	22.2%	23.5%	2.7%	2.6%	2.4%	2.0%	3.0%	3.0%	2.9%	3.3%
Causeway	20.9%	19.4%	20.5%	22.1%	5.6%	3.8%	4.7%	4.8%	5.5%	4.8%	5.7%	5.3%
Ulster	24.6%	22.8%	24.5%	24.4%	2.6%	2.7%	2.6%	3.5%	1.8%	1.9%	2.1%	1.5%
Craigavon Area	22.9%	22.0%	22.6%	21.8%	4.1%	3.6%	3.4%	3.6%	4.0%	4.2%	4.6%	3.8%
Daisy Hill	16.2%	11.6%	13.8%	13.2%	2.6%	4.7%	3.8%	5.5%	3.8%	5.4%	4.5%	4.5%
Altnagelvin Area	12.6%	12.5%	13.1%	14.4%	4.4%	5.5%	4.4%	6.3%	3.8%	4.3%	4.2%	3.8%
South West Acute	17.2%	17.7%	20.0%	19.9%	5.1%	2.3%	2.2%	3.7%	5.7%	4.7%	4.2%	4.2%
Type 1	19.2%	18.2%	19.5%	19.6%	4.2%	4.0%	3.5%	4.3%	3.4%	3.5%	3.6%	3.3%
Downe	13.6%	14.5%	17.0%	16.8%	0.7%	0.9%	1.0%	1.7%	1.8%	3.6%	2.6%	2.9%
Lagan Valley	14.9%	12.7%	13.5%	14.9%	1.6%	1.8%	1.5%	2.0%	2.2%	2.2%	2.3%	1.8%
RVH (RAES) ⁵⁶	-	-	-	-	-	-	-	-	-	-	-	-
Type 2	14.3%	13.5%	15.2%	15.8%	1.2%	1.4%	1.3%	1.8%	2.0%	2.8%	2.5%	2.3%
Mid Ulster	3.7%	2.4%	2.9%	2.9%	0.0%	0.1%	0.0%	0.0%	2.8%	1.5%	0.8%	1.2%
Ards	0.5%	0.9%	0.5%	0.5%	0.0%	0.2%	0.0%	0.1%	2.7%	2.8%	2.0%	2.9%
Bangor	0.2%	0.2%	0.2%	0.9%	0.2%	0.6%	0.2%	0.0%	1.8%	2.9%	3.6%	3.4%
South Tyrone	1.3%	0.8%	0.5%	0.7%	0.5%	0.1%	0.1%	0.1%	1.9%	4.2%	4.2%	2.3%
Tyrone County	1.1%	1.0%	0.6%	0.6%	1.0%	0.6%	0.5%	0.8%	1.3%	1.8%	1.9%	1.7%
Type 3	1.3%	1.0%	0.8%	0.9%	0.4%	0.3%	0.2%	0.2%	2.0%	3.0%	2.9%	2.2%
Northern Ireland	17.3%	16.2%	17.5%	17.7%	3.7%	3.5%	3.1%	3.8%	3.2%	3.4%	3.5%	3.2%

⁵⁵ Data on referrals to ED by GPs, 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.

⁵⁶ 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)⁵⁷

Department	Median				95 th Percentile			
	Dec-15	Oct-16	Nov-16	Dec-16	Dec-15	Oct-16	Nov-16	Dec-16
Mater	0:06	0:09	0:09	0:09	0:22	0:24	0:26	0:28
Royal Victoria	0:09	0:10	0:09	0:08	0:31	0:33	0:30	0:28
RBHSC	0:11	0:12	0:12	0:12	0:51	0:46	0:45	0:45
Antrim Area	0:07	0:07	0:08	0:09	0:21	0:22	0:23	0:31
Causeway	0:12	0:10	0:10	0:11	0:40	0:29	0:29	0:29
Ulster	0:08	0:08	0:08	0:10	0:25	0:24	0:25	0:28
Craigavon Area	0:09	0:08	0:09	0:09	0:34	0:27	0:31	0:36
Daisy Hill	0:06	0:06	0:06	0:06	0:17	0:19	0:20	0:20
Altnagelvin Area	0:12	0:13	0:13	0:15	0:35	0:39	0:39	0:45
South West Acute	0:14	0:13	0:14	0:16	1:00	0:56	1:00	1:08
Type 1	0:09	0:09	0:09	0:10	0:33	0:32	0:32	0:36
Downe	0:06	0:06	0:07	0:08	0:20	0:21	0:25	0:30
Lagan Valley	0:08	0:08	0:08	0:09	0:20	0:21	0:22	0:25
RVH (RAES) ⁵⁸	-	-	-	-	-	-	-	-
Type 2	0:07	0:07	0:08	0:09	0:20	0:21	0:23	0:27
Mid Ulster	0:01	0:02	0:02	0:02	0:07	0:07	0:09	0:08
Ards	0:03	0:03	0:02	0:02	0:14	0:13	0:14	0:13
Bangor	0:03	0:04	0:03	0:02	0:15	0:18	0:13	0:13
South Tyrone	0:01	0:01	0:01	0:01	0:08	0:09	0:10	0:10
Tyrone County	0:00	0:00	0:00	0:00	0:25	0:01	0:01	0:01
Type 3	0:01	0:01	0:01	0:01	0:13	0:11	0:10	0:10
Northern Ireland	0:08	0:08	0:08	0:09	0:32	0:30	0:31	0:34

⁵⁷ 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.

⁵⁸ 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 ⁵⁹

Department	Median				95 th Percentile			
	Dec-15	Oct-16	Nov-16	Dec-16	Dec-15	Oct-16	Nov-16	Dec-16
Mater	0:34	0:55	0:38	0:47	3:09	3:51	3:24	3:58
Royal Victoria	0:51	0:54	0:46	0:50	4:30	3:39	2:59	3:40
RBHSC	0:54	0:53	1:01	0:53	3:07	3:13	3:10	3:24
Antrim Area	1:16	1:20	1:18	0:59	4:57	4:46	4:17	4:19
Causeway	0:53	0:41	0:36	0:43	4:00	3:51	3:36	3:57
Ulster	0:47	0:44	0:42	0:52	2:58	3:06	3:12	3:30
Craigavon Area	1:11	1:12	1:15	1:08	3:34	4:03	4:06	3:52
Daisy Hill	0:42	1:03	1:01	1:07	2:31	3:36	3:22	3:44
Altnagelvin Area	0:41	0:52	0:45	0:57	2:41	3:32	3:07	3:43
South West Acute	0:45	0:25	0:19	0:22	3:38	2:39	2:15	3:28
Type 1	0:51	0:54	0:50	0:53	3:40	3:45	3:30	3:45
Downe	0:29	0:25	0:31	0:30	2:04	1:51	2:02	2:30
Lagan Valley	0:26	0:34	0:36	0:35	1:39	2:21	2:11	2:24
RVH (RAES) ⁶⁰	-	-	-	-	-	-	-	-
Type 2	0:27	0:30	0:33	0:33	1:48	2:09	2:05	2:27
Mid Ulster	0:02	0:04	0:04	0:04	0:18	0:33	0:33	0:18
Ards	0:06	0:04	0:04	0:04	0:32	0:24	0:23	0:32
Bangor	0:02	0:03	0:03	0:02	0:24	0:26	0:30	0:25
South Tyrone	0:01	0:06	0:04	0:04	0:22	0:31	0:31	0:28
Tyrone County	0:10	0:10	0:10	0:10	1:10	1:10	1:05	1:09
Type 3	0:03	0:06	0:05	0:05	0:37	0:40	0:40	0:40
Northern Ireland	0:42	0:44	0:42	0:45	3:29	3:34	3:19	3:34

⁵⁹ 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.

⁶⁰ 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 ⁶¹

Department	Median (Admitted)				95 th Percentile (Admitted)			
	Dec-15	Oct-16	Nov-16	Dec-16	Dec-15	Oct-16	Nov-16	Dec-16
Mater	3:48	4:46	4:37	5:51	9:40	11:22	11:36	15:04
Royal Victoria	5:37	6:27	7:01	6:24	11:21	11:46	11:57	11:57
RBHSC	3:28	3:31	3:34	3:31	7:25	7:31	7:25	7:37
Antrim Area	5:51	6:30	6:30	7:25	11:55	13:52	17:13	19:54
Causeway	6:52	5:42	5:38	7:10	11:39	10:55	10:45	11:37
Ulster	5:16	4:40	4:55	5:40	16:31	10:19	12:37	15:54
Craigavon Area	4:46	5:25	5:51	6:45	10:27	11:25	11:40	14:20
Daisy Hill	3:28	4:49	4:52	6:15	7:46	9:54	10:51	11:55
Altnagelvin Area	5:33	6:06	6:00	7:19	10:40	11:27	11:28	12:15
South West Acute	4:31	4:19	4:31	4:54	9:12	9:46	10:49	11:13
Type 1	4:58	5:21	5:31	6:16	11:19	11:25	11:43	13:55
Downe	3:54	4:01	4:25	4:46	21:48	8:01	19:50	21:39
Lagan Valley	3:46	3:57	3:52	4:39	7:40	7:03	7:19	8:57
RVH (RAES) ⁶²	-	-	-	-	-	-	-	-
Type 2	3:51	3:58	3:58	4:42	8:44	7:13	9:06	14:37
Mid Ulster	-	-	-	-	-	-	-	-
Ards	-	-	-	-	-	-	-	-
Bangor	-	-	-	-	-	-	-	-
South Tyrone	-	-	-	-	-	-	-	-
Tyrone County	0:10	0:10	0:10	0:15	0:19	1:30	0:19	1:10
Type 3	0:10	0:10	0:10	0:15	0:19	1:30	0:19	1:10
Northern Ireland	4:55	5:16	5:27	6:10	11:16	11:25	11:43	13:54

⁶¹ 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.

⁶² 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 Home⁶³

Department	Median (Non-admitted)				95 th Percentile (Non-admitted)			
	Dec-15	Oct-16	Nov-16	Dec-16	Dec-15	Oct-16	Nov-16	Dec-16
Mater	2:07	2:36	2:13	2:37	4:58	5:55	5:46	6:33
Royal Victoria	2:48	2:36	2:30	2:37	7:25	6:31	6:34	6:45
RBHSC	2:13	2:07	2:19	2:21	5:16	5:10	5:10	5:25
Antrim Area	2:36	2:34	2:37	2:31	7:16	7:03	6:58	7:10
Causeway	2:31	2:13	2:18	2:30	6:40	6:49	6:46	7:40
Ulster	2:09	2:12	2:15	2:30	5:33	5:27	5:42	5:58
Craigavon Area	2:39	2:43	2:46	2:37	6:07	6:07	6:15	6:22
Daisy Hill	1:49	2:19	2:22	2:40	4:34	5:40	5:37	6:16
Altnagelvin Area	2:16	2:33	2:25	2:43	5:28	6:12	5:45	6:49
South West Acute	2:25	2:19	2:12	2:28	6:27	6:06	6:04	6:51
Type 1	2:22	2:27	2:25	2:34	6:15	6:10	6:07	6:33
Downe	1:21	1:13	1:27	1:30	4:28	4:25	4:34	5:18
Lagan Valley	1:45	1:46	1:46	1:55	4:37	4:31	4:40	5:24
RVH (RAES) ⁶⁴	-	-	-	-	-	-	-	-
Type 2	1:34	1:33	1:37	1:43	4:33	4:30	4:37	5:19
Mid Ulster	0:25	0:31	0:34	0:31	0:55	1:18	1:28	1:13
Ards	0:34	0:33	0:31	0:34	1:22	1:13	1:13	1:19
Bangor	0:30	0:31	0:31	0:28	1:09	1:16	1:19	1:16
South Tyrone	0:25	0:28	0:27	0:27	1:10	1:09	1:07	1:04
Tyrone County	0:37	0:37	0:34	0:34	2:04	2:00	1:49	1:48
Type 3	0:30	0:31	0:31	0:30	1:25	1:22	1:22	1:21
Northern Ireland	2:03	2:04	2:04	2:13	5:58	5:52	5:51	6:18

⁶³ 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.

⁶⁴ 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^{65, 66}**

Age Group	Dec-15	Oct-16	Nov-16	Dec-16
Under 5	48	47	52	51
Aged 5 - 15	20	31	26	22
Aged 16 - 44	30	34	31	31
Aged 45 - 64	27	29	27	28
Aged 65 - 84	39	41	39	44
Aged 85 & Over	76	78	78	86
Northern Ireland	31	35	33	33

Table 8I: Average Number of Attendances by Day of Week⁶⁷

Day of Week	Dec-15	Oct-16	Nov-16	Dec-16
Monday	2,341	3,072	2,030	2,271
Tuesday	1,995	1,766	2,659	2,160
Wednesday	1,915	1,766	2,504	2,127
Thursday	1,709	2,190	2,019	2,037
Friday	1,669	2,120	1,963	2,009
Saturday	1,583	2,154	1,341	1,553
Sunday	1,772	2,187	1,408	1,641

⁶⁵ Excludes RVH (ENT) attendances.

⁶⁶ 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.

⁶⁷ 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^{68, 69}

Department	Under 4 Hours				Between 4 and 12 Hours				Over 12 Hours			
	Dec-15	Oct-16	Nov-16	Dec-16	Dec-15	Oct-16	Nov-16	Dec-16	Dec-15	Oct-16	Nov-16	Dec-16
Mater	2,887	2,850	2,851	2,613	637	1,067	846	1,108	3	27	29	80
Royal Victoria	4,593	5,518	5,106	4,905	2,653	2,693	2,337	2,567	15	68	81	79
RBHSC	2,624	2,986	2,984	2,642	539	557	577	693	0	0	0	0
Antrim Area	4,012	4,522	4,199	4,281	2,241	2,469	2,248	2,210	82	118	163	271
Causeway	2,147	2,457	2,238	2,122	1,283	1,147	1,126	1,331	7	0	0	4
Ulster	5,123	5,904	5,441	5,129	1,928	2,094	1,997	2,434	162	44	114	177
Craigavon Area	4,638	4,761	4,394	4,441	2,063	2,514	2,449	2,419	2	13	12	123
Daisy Hill	3,405	3,480	3,081	3,018	569	1,176	1,151	1,527	0	0	6	20
Altnagelvin Area	3,635	3,533	3,323	2,991	1,399	1,811	1,575	1,891	4	21	11	80
South West Acute	1,878	2,067	1,945	1,862	786	755	767	925	6	9	25	22
Type 1	34,942	38,078	35,562	34,004	14,098	16,283	15,073	17,105	281	300	441	856
Downe	1,332	1,505	1,490	1,389	124	146	173	211	13	8	19	31
Lagan Valley	1,559	1,801	1,728	1,521	181	227	215	337	0	0	0	0
RVH (RAES) ⁷⁰	1,179	1,270	1,206	1,141	0	137	162	160	0	0	0	0
Type 2	4,070	4,576	4,424	4,051	305	510	550	708	13	8	19	31
Mid Ulster	618	802	721	596	0	0	3	0	0	0	0	0
Ards	786	957	868	825	0	0	0	0	0	0	0	0
Bangor	625	906	805	641	0	0	0	0	0	0	0	0
South Tyrone	1,769	2,504	2,150	2,086	0	0	0	0	0	0	0	0
Tyrone County	1,227	1,383	1,218	1,185	0	3	2	6	0	0	0	0
Type 3	5,025	6,552	5,762	5,333	0	3	5	6	0	0	0	0
Northern Ireland	44,037	49,206	45,748	43,388	14,403	16,796	15,628	17,819	294	308	460	887

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

⁶⁹ Information for the Western HSC Trust may differ slightly from that published before April 2016, as this information is now based on the patients date of departure, rather than date of arrival.

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

Table 8K: Percentage of Patients Commencing Treatment, Following Triage, within 2 Hours

Department	% Commencing Treatment, Following Triage, within 2 Hours			
	Dec-15	Oct-16	Nov-16	Dec-16
Mater	87.9%	75.5%	84.9%	81.9%
Royal Victoria	76.2%	75.8%	83.6%	76.0%
RBHSC	82.6%	83.5%	78.9%	79.9%
Antrim Area	65.6%	66.4%	69.1%	76.2%
Causeway	75.8%	83.1%	84.1%	80.8%
Ulster	84.6%	84.8%	83.7%	78.0%
Craigavon Area	72.1%	68.5%	69.4%	72.2%
Daisy Hill	89.3%	77.6%	78.7%	76.2%
Altnagelvin Area	87.5%	78.3%	84.1%	76.3%
South West Acute	80.9%	90.9%	93.9%	88.8%
Type 1	79.5%	77.5%	79.9%	77.6%
Downe	94.7%	96.2%	94.8%	91.0%
Lagan Valley	97.3%	91.6%	93.7%	92.2%
RVH (RAES)	-	-	-	-
Type 2	96.2%	93.6%	94.2%	91.7%
Mid Ulster	100.0%	100.0%	100.0%	100.0%
Ards	100.0%	100.0%	100.0%	100.0%
Bangor	100.0%	100.0%	99.9%	100.0%
South Tyrone	100.0%	100.0%	100.0%	99.9%
Tyrone County	99.2%	98.7%	99.5%	98.8%
Type 3	99.8%	99.7%	99.9%	99.7%
Northern Ireland	82.4%	80.8%	82.8%	80.5%

Appendix 5: Further Information

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

Mr. Paul Stevenson

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Information & Analysis Directorate

Department of Health

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Belfast, BT4 3SQ

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