

INFORMATION
ANALYSIS
DIRECTORATE



Urgent & Emergency Care Waiting Time Statistics for Northern Ireland (January – March 2023)

Published 27 April 2023 (delayed from 20 April 2023)



Department of
Health

An Roinn Sláinte

Mánnystrie O Poustie

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Northern Ireland
Statistics and Research Agency
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um Staitisticí agus Taighde

Reader Information

Purpose: This statistical release presents information on the time spent in emergency departments (ED) in Northern Ireland. It reports on the performance against the DoH Ministerial target, including additional information on a number of clinical quality indicators set by the Department of Health (DoH).

Guidance: It is recommended that readers refer to the '**Emergency Care Waiting Time Statistics - Additional Guidance**' booklet, which details technical guidance, definitions and background information on the data used, including the security and confidentiality processes¹. This booklet is updated for each release and can be found at the following link:

[Emergency Care Waiting Times - Additional Guidance](#)

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Statistical Quality: Information detailed in this release has been provided by HSC Trusts and was validated by Hospital Information Branch (HIB) prior to release. Information on: attendances at urgent care services (PhoneFirst / Urgent Care Centres), time to triage, and time of day for attendances, GP referrals, emergency admissions, left before treatment complete, triage level, time to start of treatment, time to admission or discharge are **not** National Statistics, but have been included to provide users with a comprehensive view of emergency care activity and time spent in ED. Further information on data included in this release is available at the link below:

[Emergency Care Waiting Times - Additional Guidance](#)

Target Audience: DoH, Chief Executives of HSC Board and Trusts in Northern Ireland, Health Care Professionals, Academics, HSC Stakeholders, Media & General Public.

Further Copies: statistics@health-ni.gov.uk

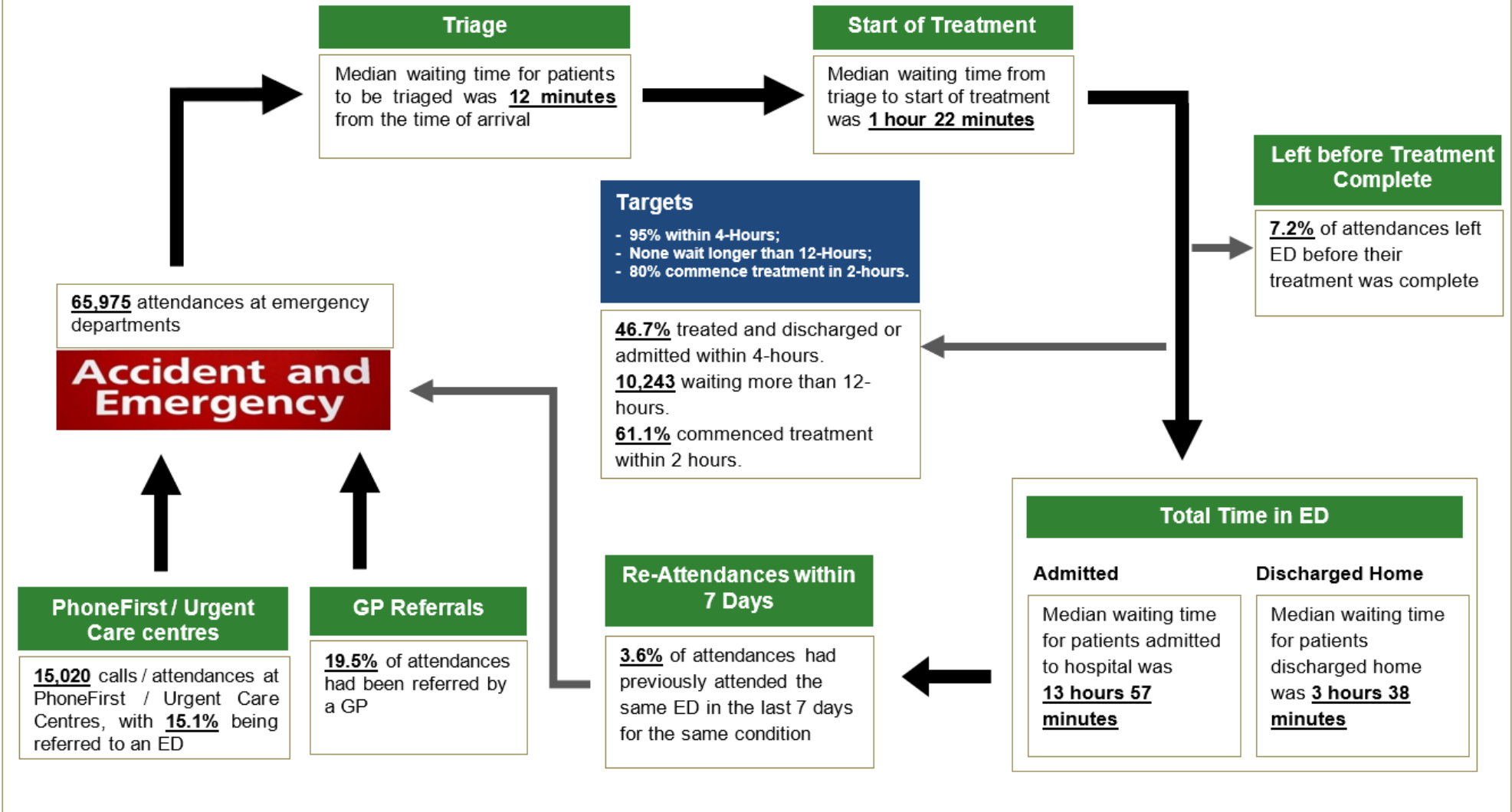
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¹ Information on Security and Confidentiality Processes is detailed in the Technical Notes on page 3.

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SUMMARY OF KEY FACTS (March 2023)



New Unscheduled Care Services

Prior to the COVID-19 pandemic, urgent and emergency care services in Northern Ireland were under increased pressure with more patients spending longer periods of time in overcrowded emergency departments (EDs). The impact of the COVID-19 pandemic, and the need to focus on disease prevention and social distancing, increased the need to ensure that we do not allow EDs to reach these levels of overcrowding in the future. To help take this work forward, the Department of Health (DoH) established the 'No More Silos' action plan, which sought to improve urgent and emergency care services and build on the improved co-ordination between primary and secondary care, leading to universal patient triage, virtual consultation, and new clinical pathways. It is also important to note that urgent and emergency care services in Northern Ireland perform critical roles in responding to patient need:

Urgent Care: An illness or injury that requires urgent attention but is not a life-threatening situation. Urgent care in Northern Ireland includes: General Practice during weekdays; GP Out of Hours (GP OOH) Services at night and weekends; pharmacies; minor injury units; an urgent treatment centre; Emergency Departments (EDs); and, the Northern Ireland Ambulance Service (NIAS).

Emergency Care: Life threatening illnesses or accidents which require immediate intensive treatment. Emergency Care is currently provided in hospitals with Type 1 and Type 2 Emergency Departments and by NIAS.

As part of the 'No More Silos' action plan, two new urgent care services: (i) PhoneFirst and (ii) Urgent Care Centres, were introduced in late 2020, which aimed to assess patients' needs before arrival at an ED, and ensure they receive the right care, at the right time, and in the right place, outside ED if appropriate. This section will report the number of patients contacting / attending these urgent care services, who may otherwise have attended an ED.

PhoneFirst: PhoneFirst is a telephone triage service for patients considering travelling to an ED, to access alternative assessments, advice, and information and receive appropriate care promptly.

Urgent Care Centre: Urgent Care Centres assess / treat patients who present with illnesses / injuries that require urgent attention but are not life threatening. Patients are given an urgent care appointment / referral to the appropriate service, with patients requiring immediate medical attention being sent to an ED.

PhoneFirst / Urgent Care Centres

Table 1: PhoneFirst Calls, Urgent Care Centre Attendance and Referral to EDs ²

The number of calls received by PhoneFirst service, attendances at Urgent Care Centres and patients referred to ED from PhoneFirst / Urgent Care Centres during January, February and March 2023.

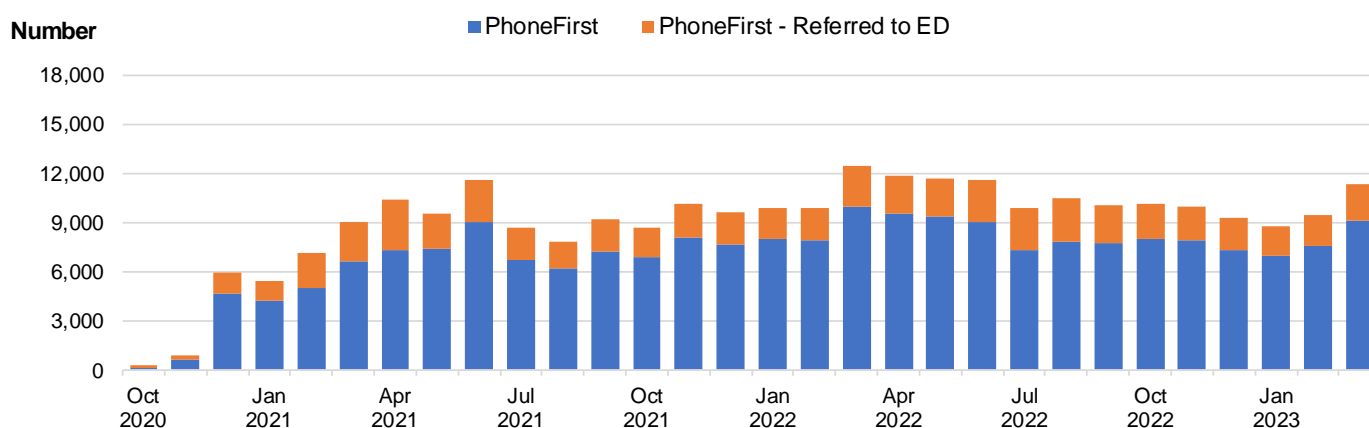
| Activity | Jan 2023 | Feb 2023 | Mar 2023 |
|----------------------------------|---------------|---------------|---------------|
| PhoneFirst | 8,730 | 9,469 | 11,345 |
| Urgent Care Centre | 3,190 | 2,939 | 3,675 |
| Total Calls / Attendances | 11,920 | 12,408 | 15,020 |
| Number Referred to ED | 1,792 | 1,966 | 2,266 |
| <i>% Referred to ED</i> | <i>15.0%</i> | <i>15.8%</i> | <i>15.1%</i> |

Source: Health and Social Care Trusts

- In March 2023, 15,020 calls / attendances were received by PhoneFirst and Urgent Care Centre services, from patients who may previously have attended an ED. A total of 2,266 (15.1%) resulted in an attendance at an ED, whilst 12,754 patients did not go on to attend an ED ³ (Table 1 & 11A).

Figure 1: PhoneFirst Calls and Referrals to Emergency Departments

The number of calls received by PhoneFirst service and number of patients referred to an ED from PhoneFirst in each month from October 2020 to March 2023.



Source: Health and Social Care Trusts

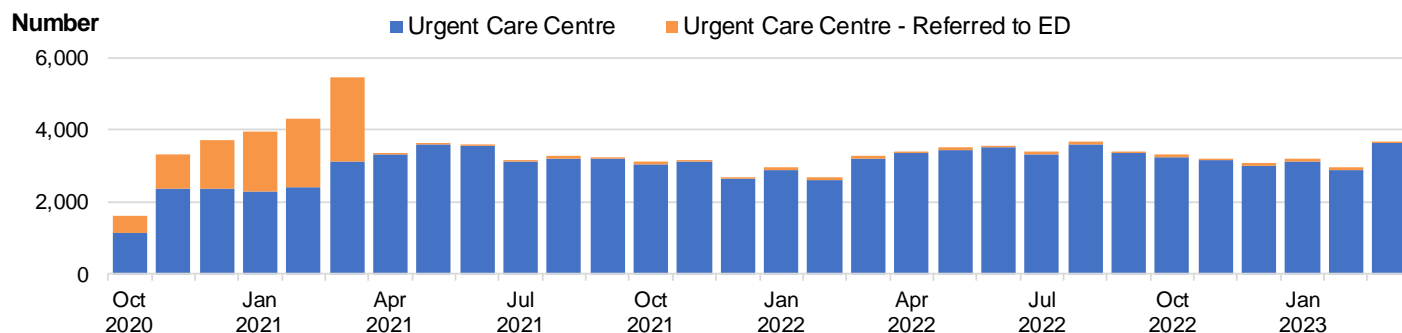
The highest number of PhoneFirst calls were received in March 2022 (12,416), with the highest number of referrals to ED from PhoneFirst in April 2021 (3,087) (Figure 1, Table 1 & 11A).

² Data on PhoneFirst Calls, Urgent Care Centre Attendances and subsequent referrals to ED are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity. Data is sourced from the HSC Trusts.

³ Note that these patients may have been managed by an alternative pathway, and may have eventually resulted in an attendance at an ED at a later date.

Figure 2: Urgent Care Centre Attendances and Referrals to Emergency Departments

The number of attendances at Urgent Care Centres and the number of patients referred to an ED from Urgent Care Centres in each month from October 2020 to March 2023.



Source: Health and Social Care Trusts

- The highest number of attendances at Urgent Care Centres was in March 2021 (5,441), with the highest number of referrals to ED from Urgent Care Centres also in March 2021 (2,333) (Figure 2, Table 1 & 11A).

Attendances

How Many Attend Urgent & Emergency Care Services?

Table 2: Attendances at Urgent & Emergency Care

The number attending urgent and emergency care services (i) calls to PhoneFirst / attendances at Urgent Care Centres, and (ii) attendances at EDs in March 2023, compared with the same month last year.

| Measure | March 2022 | March 2023 | Change (number) | Change (%) |
|---|---------------|---------------|-----------------|--------------|
| 1. PhoneFirst / Urgent Care Centre (Referred to an ED) | 2,474 | 2,266 | -208 | -8.4% |
| 2. PhoneFirst / Urgent Care Centre (NOT Referred to an ED) | 13,216 | 12,754 | -462 | -3.5% |
| 3. Total PhoneFirst / Urgent Care Centre Measure 1 + Measure 2 | 15,690 | 15,020 | -670 | -4.3% |
| 4. New ED Attendances | 59,769 | 62,463 | 2,694 | 4.5% |
| 5. Unplanned Review Attendances | 3,370 | 3,512 | 142 | 4.2% |
| 6. Attendances at EDs Measure 4 + Measure 5 | 63,139 | 65,975 | 2,836 | 4.5% |
| 7. Attendances at EDs / PhoneFirst / Urgent Care Measure 2 + Measure 4 + Measure 5 | 76,355 | 78,729 | 2,374 | 3.1% |
| 8. Number of ED Attendances Admitted to Hospital | 11,332 | 12,039 | 707 | 6.2% |
| 9. % ED Attendances Admitted to Hospital Measure 8 / Measure 6 | 17.9% | 18.2% | | -0.3% |

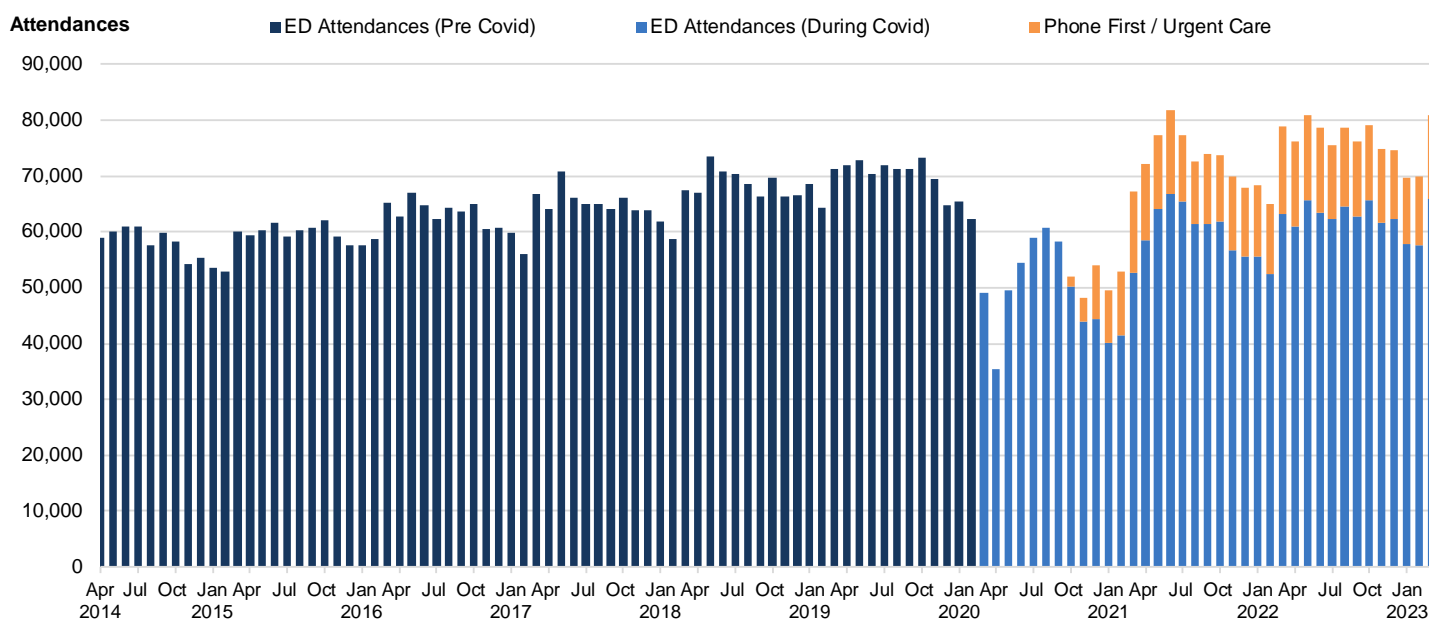
Source: Regional Data Warehouse / Health and Social Care Trusts

- During March 2023, 78,729 patients attended urgent and emergency care services, of which 65,975 attended an ED, and 12,754 attended PhoneFirst / Urgent Care Centre services (Table 2, 11A & 11B).
- The number of patients attending urgent and emergency care services increased by 2,374 (3.1%) in March 2023 when compared with March 2022. All of these additional attendances / calls at urgent and emergency care services (2,374), related to ED attendances (Table 2, 11A & 11B).
- During the quarter ending March 2023, 214,656 patients attended urgent and emergency care services, 4.3% (8,902) more than the same quarter in 2022 (205,754). Of which, 181,332 (84.5%) attended an ED and 33,324 (15.5%) attended PhoneFirst / Urgent Care Centres (Table 2, 11A & 11B).

Emergency Care Attendances Since April 2014

Figure 3: Urgent and Emergency Care Attendances

The number attending urgent and emergency care services include (i) attendances at EDs, and (ii) calls to PhoneFirst / attendances at Urgent Care Centre's each month, from April 2014 to March 2023⁴.



Source: Regional Data Warehouse

- Between April 2014 and March 2023, the highest number of patients attending urgent and emergency care was in June 2021 (81,889), with 66,734 (81.5%) attending an ED and 15,155 (18.5%) attending PhoneFirst / Urgent Care Centre's (Table 2, Table 11A).
- The number of patients attending urgent care services (PhoneFirst / Urgent Care Centre) in January, February and March 2023 when compared with the same month of the previous year are detailed in Table 2 and Table 11A, with figures for emergency care during each of the last three months detailed on page 11.
 - During January 2023, there were 11,920 PhoneFirst calls / Urgent Care Centre attendances, 7.2% (925) less than January 2022 (12,845); and,
 - During February 2023, there were 12,408 PhoneFirst calls / Urgent Care Centre attendances, 1.2% (149) less than February 2022 (12,557); and,
 - During March 2023, there were 15,020 PhoneFirst calls / Urgent Care Centre attendances, 4.3% (670) less than March 2022 (15,690).

⁴ PhoneFirst and Urgent Care Centre services introduced in October 2020, prior to this date patients attended emergency care only.

Are More Patients Being Admitted To Hospital following an ED Attendance?

This section refers to attendances at EDs, where the patient physically attended an ED and does not include urgent care activity (PhoneFirst / Urgent Care Centre) where the patient did not attend an ED.

Table 3: Attendances at an ED and Emergency Admissions to Hospital

The number attending an emergency department and the number of emergency admissions to hospital⁵ from an ED during March 2023, compared with the same month last year.

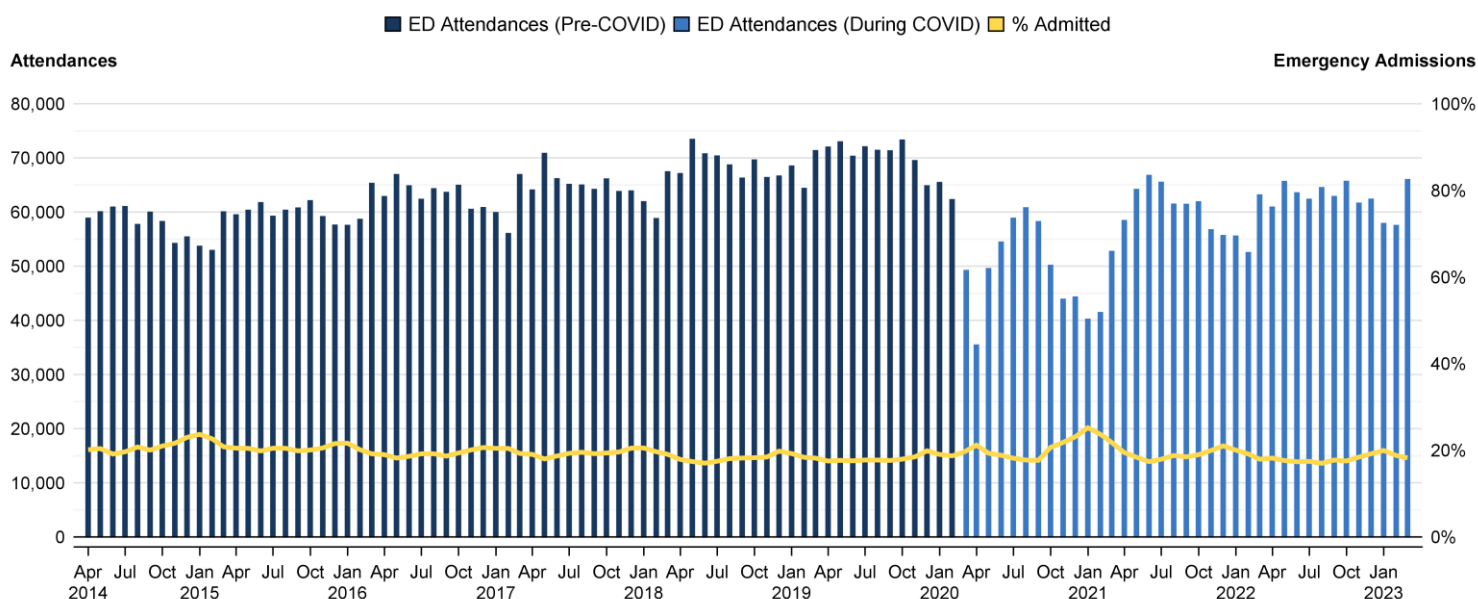
| Measure | March 2022 | March 2023 | Change (Number) | Change (%) |
|--|---------------|---------------|-----------------|-------------|
| 1. Attendances at EDs | 63,139 | 65,975 | 2,836 | 4.5% |
| 2. Admissions to Hospital from ED | 11,332 | 12,039 | 707 | 6.2% |
| 3. % Admissions to Hospital from ED <i>Measure 2 / Measure 1</i> | 17.9% | 18.2% | - | - |

Source: Regional Data Warehouse

- The number of emergency admissions to hospital from an ED increased by 6.2% (707) between March 2022 (11,332) and March 2023 (12,039) (Table 2 & 11B).

Figure 4: Attendances at Emergency Departments and Emergency Admissions to Hospital

The number of emergency care attendances and emergency admissions to hospital each month, from April 2014 to March 2023.



Source: Regional Data Warehouse

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 time spent in ED.

- During each of the last eight years, the percentage of ED attendances admitted to hospital was generally highest in December and January and lowest during May and June (Figure 4). It should be noted that the number of attendances was impacted by the COVID-19 pandemic, particularly during 2020. The full impact of this is still being assessed.
- ED Attendances during January, February and March 2023 increased when compared with the same month of the previous year (Figure 4, Table 11B).
 - During January 2023, there were 57,862 attendances at EDs, 4.2% (2,325) more than January 2022 (55,537);
 - During February 2023, there were 57,495 attendances at EDs, 9.5% (5,006) more than February 2022 (52,489); and,
 - During March 2023, there were 65,975 attendances at EDs, 4.5% (2,836) more than March 2022 (63,139).

Emergency Care Activity

Which ED Did People Attend?

Table 4: Attendances at EDs

The number of new, unplanned review and total attendances at each Type 1 ED and ED Type during March 2023 and the same month last year.

| Department | New | | Unplanned Review | | Total | |
|-------------------------|---------------|---------------|------------------|--------------|---------------|---------------|
| | Mar 2022 | Mar 2023 | Mar 2022 | Mar 2023 | Mar 2022 | Mar 2023 |
| Mater | 2,598 | 3,383 | 67 | 92 | 2,665 | 3,475 |
| Royal Victoria | 6,942 | 6,995 | 130 | 173 | 7,072 | 7,168 |
| RBHSC | 3,799 | 3,855 | 341 | 366 | 4,140 | 4,221 |
| Antrim Area | 7,549 | 8,211 | 332 | 398 | 7,881 | 8,609 |
| Causeway | 3,657 | 3,756 | 299 | 328 | 3,956 | 4,084 |
| Ulster | 8,535 | 9,082 | 364 | 444 | 8,899 | 9,526 |
| Craigavon Area | 6,377 | 6,521 | 445 | 575 | 6,822 | 7,096 |
| Daisy Hill | 4,487 | 4,481 | 222 | 177 | 4,709 | 4,658 |
| Altnagelvin Area | 5,351 | 5,417 | 445 | 319 | 5,796 | 5,736 |
| South West Acute | 2,918 | 3,097 | 281 | 295 | 3,199 | 3,392 |
| Type 1 | 52,213 | 54,798 | 2,926 | 3,167 | 55,139 | 57,965 |
| Type 2 | 2,615 | 2,677 | 274 | 161 | 2,889 | 2,838 |
| Type 3 | 4,941 | 4,988 | 170 | 184 | 5,111 | 5,172 |
| Northern Ireland | 59,769 | 62,463 | 3,370 | 3,512 | 63,139 | 65,975 |

Source: Regional Data Warehouse

- Between March 2022 and March 2023, attendances at Type 1 and Type 3 EDs increased, whilst attendances at Type 2 EDs decreased (Table 4, Table 11B).
- The Ulster (9,526) was the busiest ED during both March 2022 and March 2023 (Table 4, Table 11B).
- Eight of the ten Type 1 EDs reported an increase in attendances during March 2023 when compared with March 2022, with the largest increase in attendances reported at the Mater (810, 30.4%) (Table 4, Table 11B).

What Triage Level Do Patients Present With?

Upon arrival at ED, a health-care professional will assign patients one of the following five levels on the Manchester Triage Scale (MTS), which act as a guide for the time to start of treatment.^{6 7}

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

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

Table 5: Breakdown of Attendances by Triage Group

The percentage of patients assigned a Manchester Triage Score at each Type 1 ED and ED Type during March 2023 and the same month last year^{7,8}.

| Department | Level 1 / 2 | | Level 3 | | Level 4 / 5 | |
|-------------------------|--------------|--------------|--------------|--------------|--------------|--------------|
| | Mar 2022 | Mar 2023 | Mar 2022 | Mar 2023 | Mar 2022 | Mar 2023 |
| Mater | 22.2% | 19.6% | 45.5% | 49.6% | 32.3% | 30.8% |
| Royal Victoria | 28.5% | 29.9% | 50.6% | 50.3% | 20.9% | 19.8% |
| RBHSC | 14.6% | 19.2% | 25.4% | 30.1% | 60.0% | 50.7% |
| Antrim Area | 17.8% | 19.8% | 54.2% | 55.9% | 28.0% | 24.3% |
| Causeway | 20.4% | 22.2% | 55.3% | 50.7% | 24.3% | 27.1% |
| Ulster | 26.7% | 26.5% | 41.8% | 42.5% | 31.5% | 31.0% |
| Craigavon Area | 34.8% | 35.4% | 38.2% | 39.8% | 27.0% | 24.8% |
| Daisy Hill | 28.9% | 35.1% | 43.0% | 42.9% | 28.0% | 22.0% |
| Altnagelvin Area | 31.3% | 36.6% | 35.4% | 37.4% | 33.4% | 26.0% |
| South West Acute | 17.4% | 19.8% | 44.4% | 46.2% | 38.2% | 34.0% |
| Type 1 | 25.5% | 27.3% | 43.4% | 44.7% | 31.2% | 28.1% |
| Type 2 | 4.0% | 4.7% | 22.8% | 20.6% | 73.2% | 74.8% |
| Type 3 | 0.5% | 0.2% | 2.4% | 2.0% | 97.1% | 97.8% |
| Northern Ireland | 22.5% | 24.3% | 39.3% | 40.5% | 38.2% | 35.2% |

Source: Regional Data Warehouse

- Almost three quarters (71.9%) of attendances at Type 1 departments in March 2023 were triaged as level 1 / 2 or 3, compared with 68.8% in March 2022 (Table 5, Table 11L).
- Almost a quarter (24.3%) of patients were triaged as level 1 / 2 in March 2023, less than in January (25.5%) and February 2023 (24.5%), but more than March 2022 (22.5%) (Table 11L).
- During March 2023, over a third (36.6%) of patients attending Altnagelvin Area were triaged at level 1 / 2, compared with 19.2% of those attending RBHSC (Table 5, Table 11L).

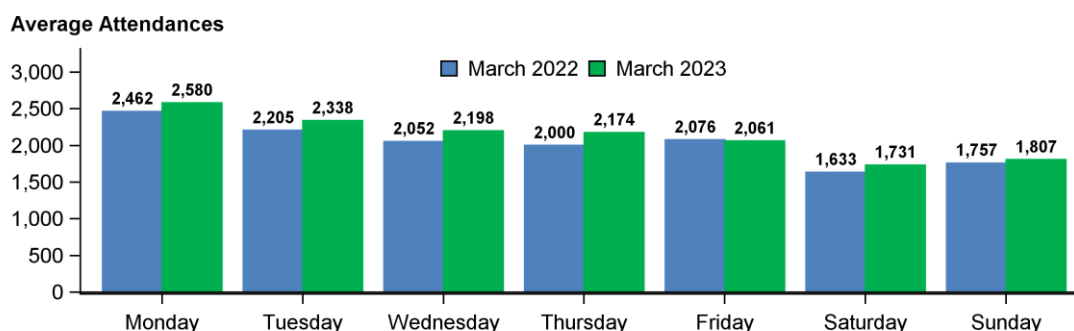
⁶ Data are not National Statistics, but are published to provide users with a comprehensive view of ED activity and time spent in ED.

⁷ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

When Do People Attend EDs?

Figure 5: Average Number of Attendances at EDs by day of the Week

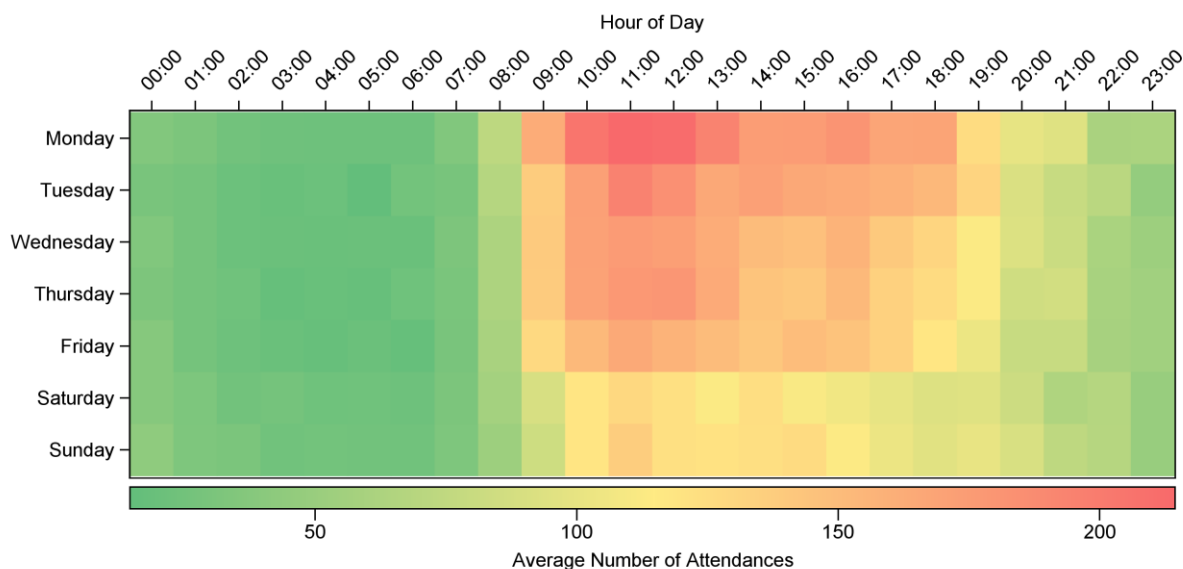
The average number of new and unplanned review attendances at EDs by day of the week during March 2023, compared with the same month last year⁸.



Source: Regional Data Warehouse

Figure 6: Number of Attendances by Day of Week and Time of Day

The average number of new and unplanned review attendances during each day of the week and hour of the day in March 2023.



Source: Regional Data Warehouse

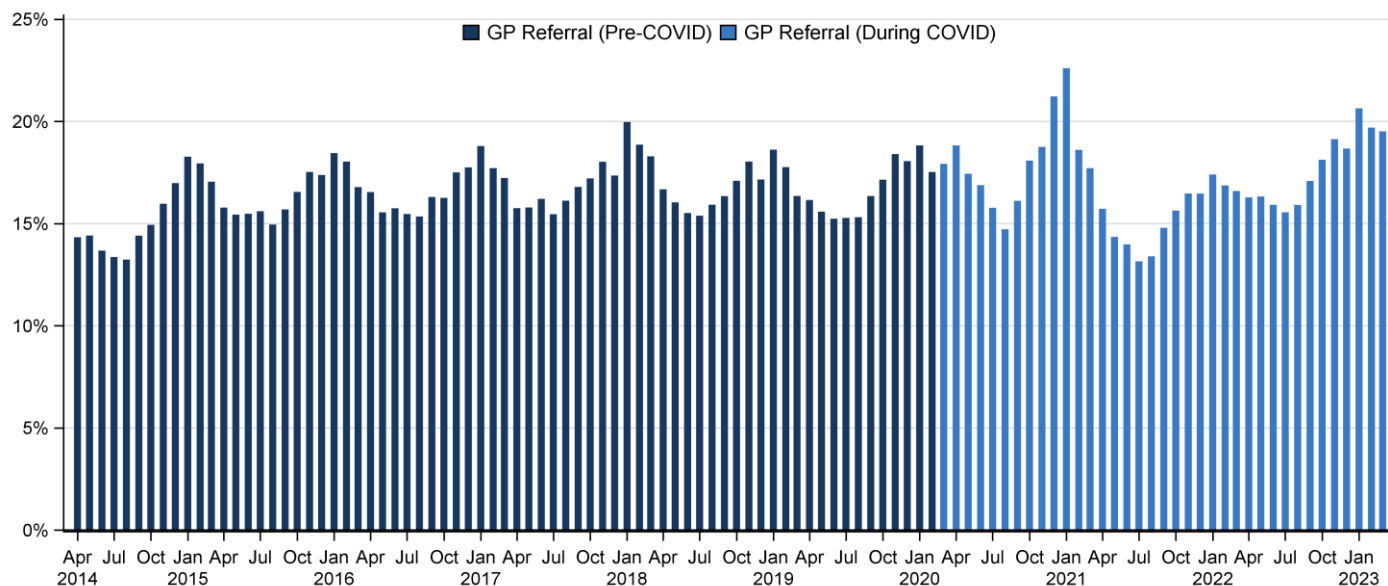
- Monday was the busiest day at EDs during both March 2022 and March 2023, with the highest number of attendances arriving between 11:00 and 11:59 (Figure 5 & 6, Table 11I).
- Saturday was the least busy day during March 2023 (1,731) and March 2022 (1,633), with the highest number of attendances arriving between 11:00 and 11:59 in March 2023 (Figure 5 & 6, Table 11I).
- Overall, the busiest hour of the day during March 2023 was between 11:00 and 11:59, whilst the least busy hour was 05:00 to 05:59 (Figure 6).

⁸ 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 time spent in ED.

How Many Attendances Were Referred by a GP?

Figure 7: Percentage of attendances at EDs referred by a GP

The percentage of attendances at EDs that had been referred by a GP, from April 2014⁹.



Source: Regional Data Warehouse

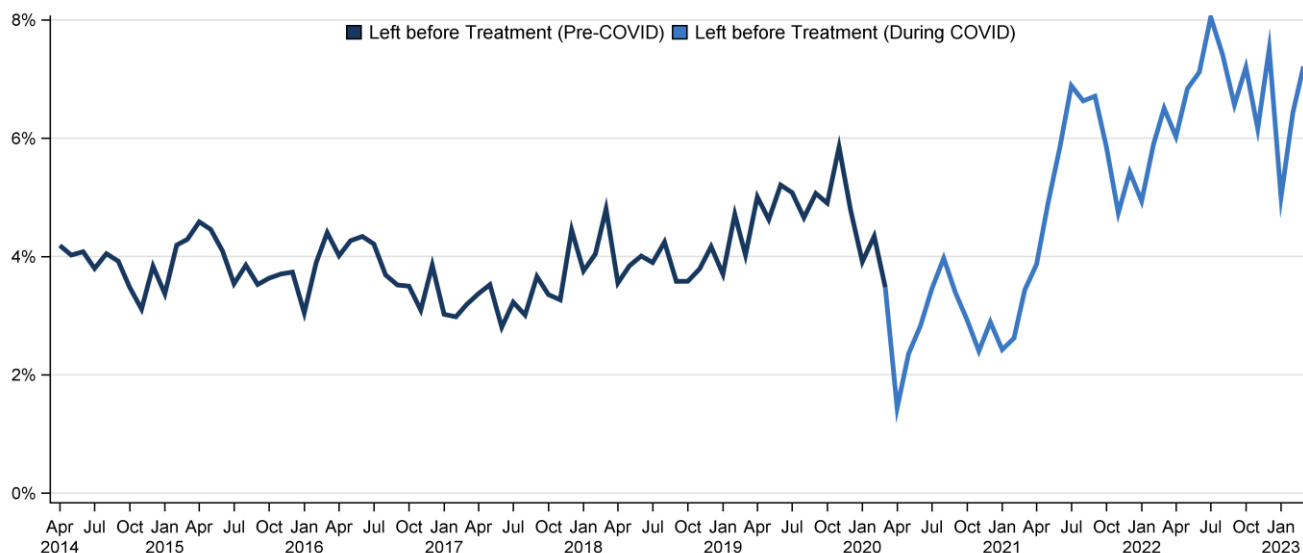
- In March 2023, almost one fifth (19.5%, 12,853) attendances at EDs had been referred by a GP, compared with 16.6% (10,430) in March 2022 (Figure 7, Table 11D(i) & (ii)).
- Almost a third (31.8%, 2,736) of attendances at Antrim Area had been referred by a GP during March 2023, compared with 10.2% (354) of attendances at the Mater (Tables 11D(i) & 11D (ii)).

⁹ 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 time spent in ED.

Do Patients Leave ED Before Their Treatment is Complete?

Figure 8: Percentage of attendances leaving EDs before their treatment was complete

The percentage of attendances which left an ED before their treatment was complete, from April 2014.¹⁰



Source: Regional Data Warehouse

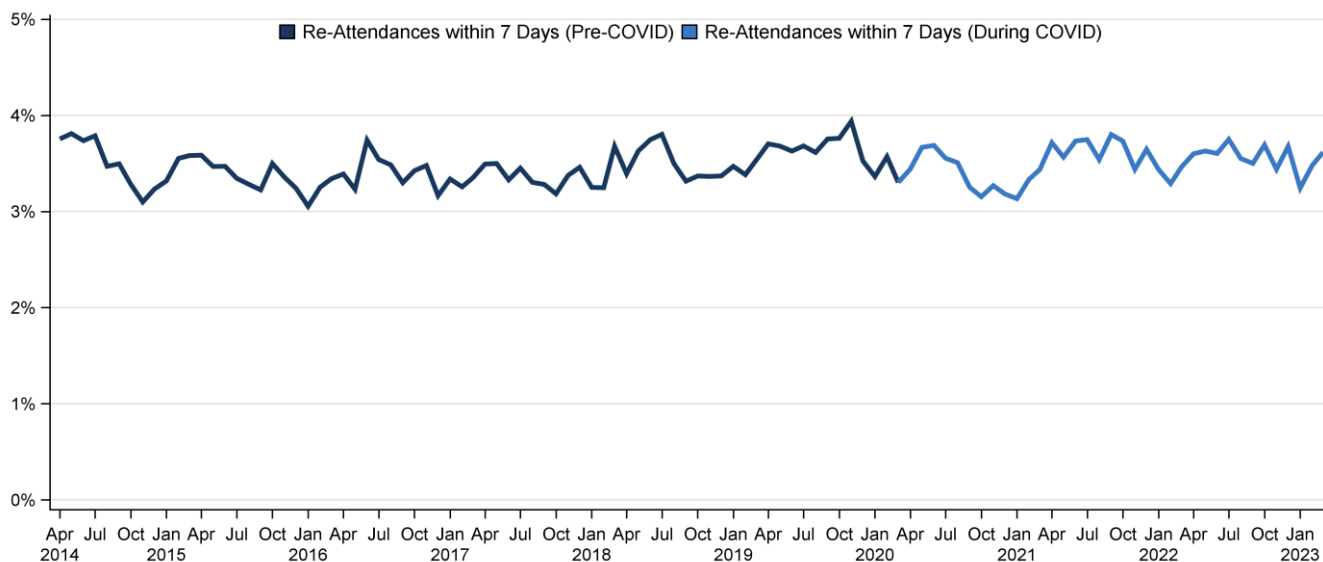
- During March 2023, 7.2% (4,760) of all ED attendances left before their treatment was complete, compared with 6.5% (4,108) in March 2022 (Figure 8, Table 11D(i-ii)).
- The Royal Victoria (12.7%, 909) reported the highest percentage leaving ED before treatment was complete during March 2023, compared with 11.0% (776) in March 2022 (Tables 11D(i-ii)).

¹⁰ 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 time spent in ED.

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

Figure 9: Percentage of unplanned review attendances at EDs within 7 days of the original attendance

The percentage of unplanned review attendances at EDs within 7 days of their original attendance for the same condition, from April 2014¹¹.



Source: Regional Data Warehouse

- During March 2023, 3.6% (2,386) of attendances had attended the same ED within 7 days of their original attendance, compared to 3.5% (2,181) in March 2022 (Tables 11D(i) & 11D(ii)).
- South West Acute (6.7%, 227) reported the highest percentage of unplanned review attendances within 7 days of the original attendance during March 2023 (Tables 11D(i) & 11D(ii)).

¹¹ 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 time spent in EDs.

How Long Do Patients Spend in ED?

Emergency Care Waiting Times Targets

The current DOH targets¹² on emergency care waiting times in Northern Ireland for 2022/23 state that:

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

'By March 2023, at least 80% of patients to have commenced treatment, following triage, within 2 hours.'

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

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

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

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

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

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

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

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

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

Two aspects of the time spent in ED are reported, including (i) the 95th percentile, which is the time below which 95% of patients were triaged/treated/admitted/discharged each month, and (ii) the median, which is the time below which 50% of patients were triaged/treated/admitted/discharged.

¹² Further breakdown of EDs can be found in Appendix 4: Table 11C & Table 11J.

How are EDs Performing?

Table 6: Performance against Emergency Care Waiting Times Targets

The performance against the 4 and 12 hour components of the emergency care waiting times targets for the last three months compared with March 2022.

| % Within 4 Hours | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Diff (Mar 2022 - Mar 2023) | |
|------------------------|---------------|---------------|---------------|---------------|----------------------------|--------------|
| | | | | | No. | % |
| Type 1 | 45.9% | 44.8% | 43.0% | 40.5% | - | -5.4% |
| Type 2 | 80.4% | 76.1% | 77.2% | 78.4% | - | -2.0% |
| Type 3 | 99.3% | 99.7% | 99.4% | 99.2% | - | -0.1% |
| All Departments | 51.8% | 50.4% | 48.9% | 46.7% | - | -5.1% |
| Over 12 Hours | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Diff (Mar 2022 - Mar 2023) | |
| | | | | | No. | % |
| Type 1 | 8,190 | 9,168 | 8,601 | 10,241 | 2,051 | - |
| Type 2 | 4 | 0 | 0 | 2 | -2 | - |
| Type 3 | 1 | 0 | 0 | 0 | -1 | - |
| All Departments | 8,195 | 9,168 | 8,601 | 10,243 | 2,048 | - |
| ED Attendances | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Diff (Mar 2022 - Mar 2023) | |
| | | | | | No. | % |
| Type 1 | 55,139 | 50,757 | 50,510 | 57,965 | 2,826 | 5.1% |
| Type 2 | 2,889 | 2,661 | 2,574 | 2,838 | -51 | -1.8% |
| Type 3 | 5,111 | 4,444 | 4,411 | 5,172 | 61 | 1.2% |
| All Departments | 63,139 | 57,862 | 57,495 | 65,975 | 2,836 | 4.5% |

Source: Regional Data Warehouse

- Less than half (46.7%) of attendances in March 2023 were discharged or admitted within 4 hours, compared with 51.8% in March 2022 (Table 11C & 11J).
- Over two fifths (40.5%) of attendances at Type 1 EDs in March 2023 spent less than 4 hours in ED, compared with 78.4% at Type 2 EDs and 99.2% at Type 3 EDs (Table 6, Table 11C & 11J).
- Between March 2022 and March 2023, the number spending over 12 hours in ED increased from 8,195 to 10,243, accounting for 15.5% of all attendances in March 2023 (Table 6, Table 11C & 11J).
- During this period, EDs experienced a 4.5% increase in attendances (63,139 to 65,975), whilst 4 hour performance decreased from 51.8% to 46.7% (Table 6, Table 11C & 11J).
- During the quarter ending 31 March 2023, almost half (48.6%) of patients spent less than 4 hours at an ED, compared with 51.6% during the same quarter in 2022 (Table 11C & 11J).
- During the latest quarter, the percentage of patients spending less than 4 hours in ED was highest in January 2023 (50.4%) and lowest in March 2023 (46.7%), whilst the number spending over 12 hours in an ED was highest in March 2023 (10,243) and lowest in February 2023 (8,601) (Table 6, Table 11C & 11J).

Table 7: Performance against the 4 and 12 Hour Emergency Care Waiting Times Targets

The performance for both the four and twelve hour components of the emergency care waiting times target at each Type 1 ED in March 2023 compared with the same month last year. Information has also been included on the overall performance at Type 2 and 3 EDs during this period¹³.

| Department | 4 Hour Performance | | 12 Hour Performance | | Total Attendances | |
|-------------------------|--------------------|--------------|---------------------|---------------|-------------------|---------------|
| | Mar 2022 | Mar 2023 | Mar 2022 | Mar 2023 | Mar 2022 | Mar 2023 |
| Mater | 47.8% | 49.9% | 288 | 381 | 2,665 | 3,475 |
| Royal Victoria | 26.8% | 24.5% | 1,797 | 2,118 | 7,072 | 7,168 |
| RBHSC | 64.6% | 51.0% | 7 | 62 | 4,140 | 4,221 |
| Antrim Area | 47.2% | 39.2% | 998 | 1,581 | 7,881 | 8,609 |
| Causeway | 53.7% | 52.6% | 421 | 502 | 3,956 | 4,084 |
| Ulster | 48.2% | 43.4% | 1,502 | 1,510 | 8,899 | 9,526 |
| Craigavon Area | 43.2% | 35.7% | 1,387 | 1,804 | 6,822 | 7,096 |
| Daisy Hill | 54.4% | 48.8% | 450 | 660 | 4,709 | 4,658 |
| Altnagelvin Area | 40.4% | 30.8% | 961 | 1,169 | 5,796 | 5,736 |
| South West Acute | 47.0% | 47.3% | 379 | 454 | 3,199 | 3,392 |
| Type 1 | 45.9% | 40.5% | 8,190 | 10,241 | 55,139 | 57,965 |
| Type 2 | 80.4% | 78.4% | 4 | 2 | 2,889 | 2,838 |
| Type 3 | 99.3% | 99.2% | 1 | 0 | 5,111 | 5,172 |
| Northern Ireland | 51.8% | 46.7% | 8,195 | 10,243 | 63,139 | 65,975 |

Source: Regional Data Warehouse

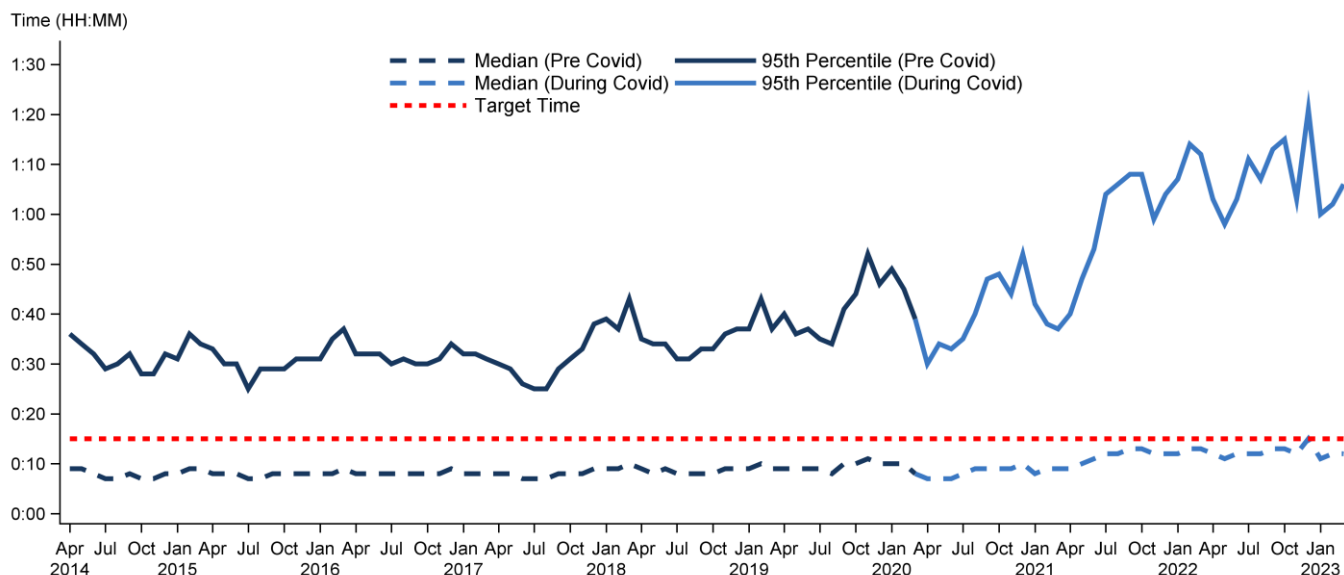
- During March 2023, Causeway (52.6%) reported the highest performance of the four hour target at any Type 1 ED, whilst the Royal Victoria (24.5%) reported the lowest (Table 7, Table 11C).
- No Type 1 ED achieved the 12-hour target during March 2023 (Table 7, Table 11C).
- The Royal Victoria (2,118) reported the highest number of patients spending over 12 hours at an ED during March 2023 (Table 7, Table 11C).
- Between March 2022 and March 2023, performance against the 12 hour target declined at all of the ten Type 1 EDs (Table 7, Table 11C).

¹³ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

Time Spent in Emergency Department from Arrival to Triage

Figure 10: Time from Arrival to Triage

The length of time patients spent in ED from the time of their arrival to their triage by a medical practitioner, which includes a brief history, pain assessment and early warning scores, for all patients between April 2014 and March 2023¹⁴.



Source: Regional Data Warehouse

- During March 2023, the median time spent in ED from arrival to triage was 12 minutes, 1 minute less than in March 2022 (13 minutes) (Figure 10, Table 11E).
- 95 percent of patients were triaged within 1 hour 6 minutes of their arrival at an ED in March 2023, 6 minutes less than March 2022 (1 hour 12 minutes) (Figure 10, Table 11E).
- Almost three fifths (58.4%) of attendances were triaged within 15 minutes of their arrival at an ED during March 2023, compared with 55.2% in March 2022.
- During the quarter ending 31 March 2023, the median time from arrival to triage was longest during February and March 2023 (12 minutes) and shortest in January 2023 (11 minutes), whilst the time taken to triage 95 percent of patients was longest in March 2023 (1 hour 6 minutes) and shortest in January 2023 (1 hour) (Figure 10, Table 11E).

¹⁴ Data on time to triage are not National Statistics, and are included to provide users with a comprehensive view of ED activity and time spent in ED.

Table 8: Performance against the Target to Commence Treating Patients within 2 Hours of them being Triage

The percentage of patients commencing treatment, following triage, within 2 hours at Type 1 EDs in January to March 2023, compared with March last year. Information has also been included on the overall performance at Type 2 and 3 EDs during this period.

| Department | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
|-------------------------|--------------|--------------|--------------|--------------|
| Mater | 62.4% | 71.6% | 69.2% | 63.3% |
| Royal Victoria | 48.5% | 48.0% | 47.4% | 43.0% |
| RBHSC | 63.3% | 72.1% | 56.4% | 53.2% |
| Antrim Area | 53.4% | 58.5% | 50.9% | 39.4% |
| Causeway | 59.3% | 66.1% | 76.7% | 64.7% |
| Ulster | 69.3% | 75.6% | 71.0% | 67.6% |
| Craigavon Area | 60.0% | 56.6% | 47.4% | 51.6% |
| Daisy Hill | 69.1% | 77.8% | 72.3% | 68.9% |
| Altnagelvin Area | 61.3% | 65.2% | 55.6% | 48.3% |
| South West Acute | 68.5% | 83.0% | 77.7% | 75.3% |
| Type 1 | 61.3% | 66.2% | 60.7% | 56.3% |
| Type 2 | 97.2% | 95.6% | 96.2% | 97.9% |
| Type 3 | 98.1% | 99.5% | 99.2% | 98.1% |
| Northern Ireland | 65.6% | 69.7% | 65.0% | 61.1% |

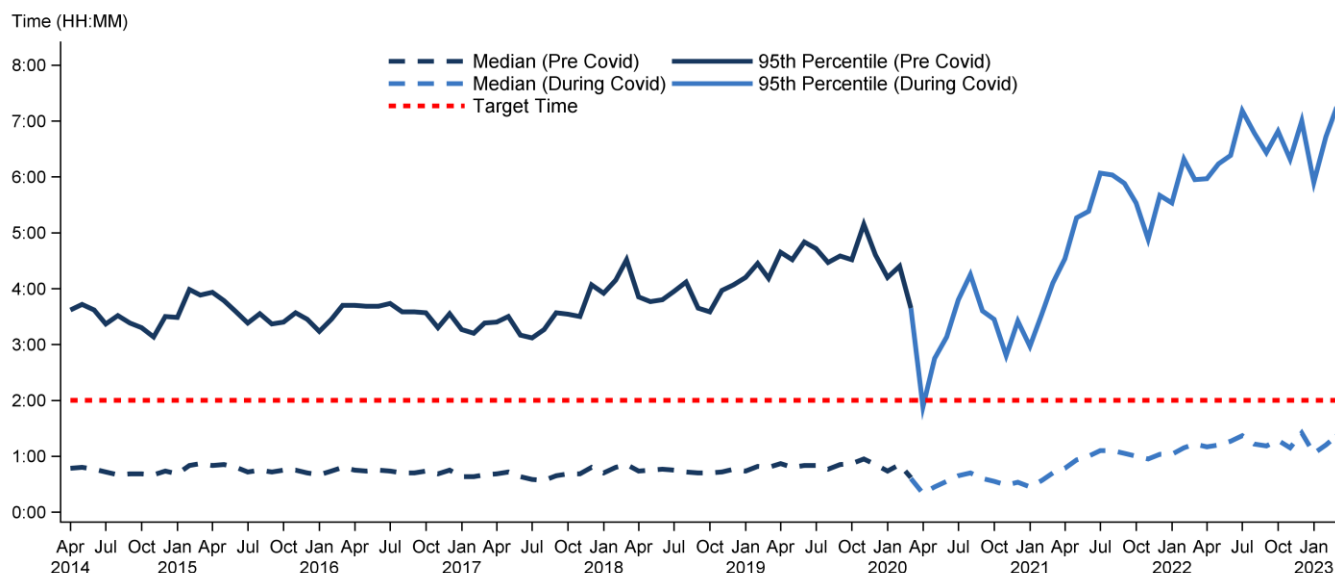
Source: Regional Data Warehouse

- Over three fifths (61.1%) of patients attending EDs in March 2023 commenced their treatment within 2 hours of being triaged, compared with 65.6% in March 2022 (Table 8, Table 11K).
- During March 2023, almost three fifths (56.3%) of patients commenced their treatment within 2 hours of being triaged at Type 1 EDs, compared with 97.9% at Type 2 EDs and 98.1% at Type 3 EDs (Table 8, Table 11K).
- No Type 1 EDs achieved the 80% target in March 2023 (Table 8, Table 11K).
- During March 2023, South West Acute (75.3%) reported the highest percentage commencing treatment within 2 hours, whilst Antrim Area (39.4%) reported the lowest (Table 8, Table 11K).
- Between January and March 2023, the highest percentage of patients commencing treatment within 2 hours was in January (69.7%) whilst the lowest was in March (61.1%), (Table 8, Table 11K).

Time from Triage to Start of Treatment

Figure 11: Time from Triage to Start of Treatment from April 2014

Time spent in ED from triage to start of treatment by a medical practitioner from April 2014 to date. The start of treatment refers to the beginning of a definitive treatment by a decision-making clinician¹⁵.



Source: Regional Data Warehouse

- The median time from triage to start of treatment in March 2023 was 1 hour 22 minutes, 9 minutes more than March 2022 (1 hour 13 minutes) (Figure 11, Table 11F).
- During March 2023, 95 percent of patients commenced treatment within 7 hours 15 minutes of being triaged, 1 hour 18 minutes more than March 2022 (5 hours 57 minutes) (Figure 11, Table 11F).
- During the last 3 months, the median time to start of treatment was longest in March 2023 (1 hour 22 minutes) and shortest in January 2023 (1 hour 3 minutes), whilst the time within which 95 percent of patients started treatment was longest in March 2023 (7 hours 15 minutes) and shortest in January 2023 (5 hours 54 minutes) (Table 11F).

¹⁵ Data on start of treatment are not National Statistics, and are included to provide users with a comprehensive view of ED activity and time spent in ED.

Time from Triage to Start of Treatment at Type 1 EDs

Table 9: Time from Triage to Start of Treatment

The median and 95th percentile of the length of time spent in ED from triage to start of treatment at Type 1 EDs and department type during March 2023, compared with the same month last year¹⁶.

| Department | Median (HH:MM) | | 95th Percentile (HH:MM) | |
|-------------------------|----------------|-------------|-------------------------|-------------|
| | March 2022 | March 2023 | March 2022 | March 2023 |
| Mater | 1:20 | 1:23 | 5:55 | 5:46 |
| Royal Victoria | 2:06 | 2:29 | 8:44 | 10:58 |
| RBHSC | 1:30 | 1:50 | 4:10 | 5:44 |
| Antrim Area | 1:51 | 2:35 | 5:43 | 8:44 |
| Causeway | 1:32 | 1:21 | 5:50 | 5:04 |
| Ulster | 1:09 | 1:11 | 5:42 | 5:39 |
| Craigavon Area | 1:30 | 1:51 | 7:57 | 11:49 |
| Daisy Hill | 1:08 | 1:08 | 5:35 | 5:30 |
| Altnagelvin Area | 1:29 | 2:04 | 5:18 | 6:42 |
| South West Acute | 1:09 | 0:50 | 5:11 | 4:12 |
| Type 1 | 1:27 | 1:39 | 6:14 | 7:37 |
| Type 2 | 0:24 | 0:27 | 1:36 | 1:37 |
| Type 3 | 0:06 | 0:05 | 1:13 | 1:17 |
| Northern Ireland | 1:13 | 1:22 | 5:57 | 7:15 |

Source: Regional Data Warehouse

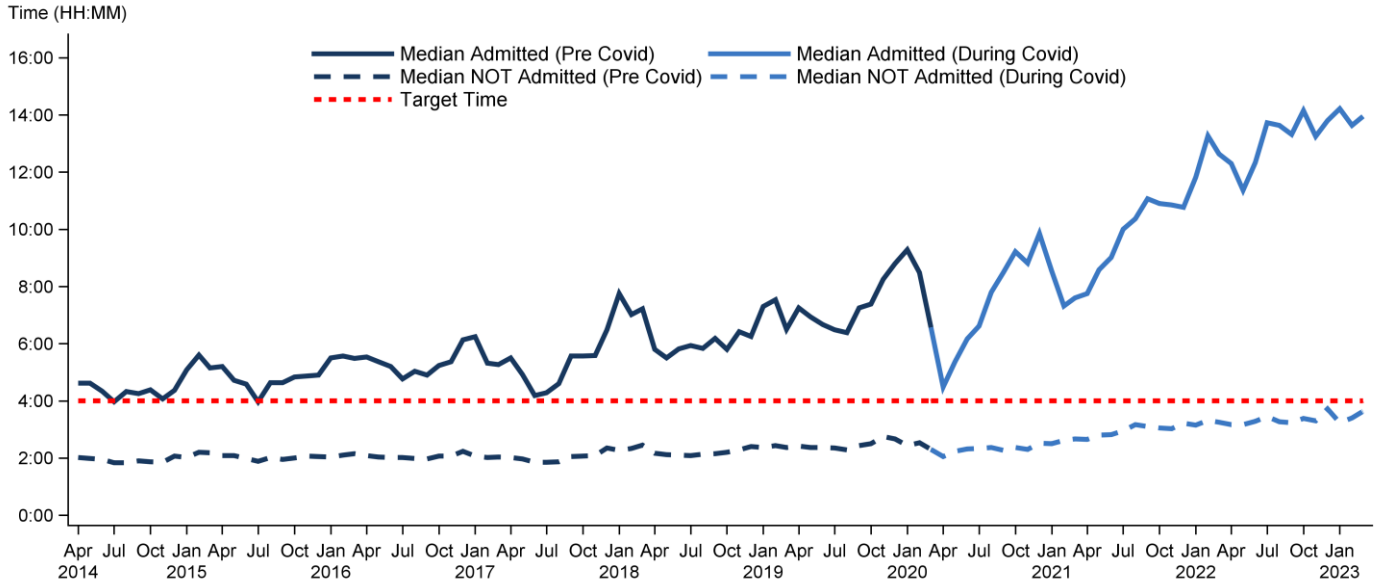
- The median time spent at Type 1 EDs from triage to start of treatment by a medical professional was 1 hour 39 minutes in March 2023, 12 minutes more than March 2022 (1 hour 27 minutes) (Table 9, Table 11F).
- Antrim Area (2 hour 35 minutes) reported the longest median time spent in ED from triage to start of treatment during March 2023, whilst South West Acute (50 minutes) reported the shortest median time (Table 9, Table 11F).
- Craigavon Area reported the longest time spent in ED between triage and start of treatment, with 95 percent of attendances commencing treatment within 11 hours 49 minutes of being triaged; 3 hour 52 minutes more than March 2022 (7 hours 57 minutes) (Table 9, Table 11F).
- South West Acute reported the shortest time to start of treatment during March 2023, with 95 percent of attendances commencing treatment within 4 hours 12 minutes of being triaged, 59 minutes less than the time taken in March 2022 (5 hour 11 minutes) (Table 9, Table 11F).

¹⁶ 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 time spent in ED.

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

Figure 12: Median Time Spent in an ED for those (i) Admitted to Hospital and (ii) Discharged Home¹⁷

The median time spent in ED for those admitted and discharged from April 2014 to date.



Source: Regional Data Warehouse

- During March 2023, the median time patients admitted to hospital spent in ED was 13 hours 57 minutes, over three times longer than the median time for patients discharged home (3 hours 38 minutes) (Figure 12, Table 11G & 11H).
- During the quarter ending 31 March 2023, the median time patients admitted spent in ED was longest in January 2023 (14 hours 13 minutes) and shortest in February 2023 (13 hours 38 minutes) (Table 11G).
- During this period, the median time spent by patients discharged home was longest in March 2023 (3 hours 38 minutes) and shortest in January 2023 (3 hours 14 minutes) (Table 11H).

¹⁷ Data are not National Statistics, and are included to provide users with a comprehensive view of ED activity and time spent in ED.

How Long did Patients Admitted to Hospital/Discharged Home Spend in ED?

Table 10: Time Spent in ED for those Admitted to Hospital/Discharged Home¹⁸

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 and those discharged home, in March 2022 and March 2023.

| Department | Admitted | | | | Discharged | | | |
|-------------------------|----------------|--------------|-------------------------|--------------|----------------|-------------|-------------------------|--------------|
| | Median (HH:MM) | | 95th Percentile (HH:MM) | | Median (HH:MM) | | 95th Percentile (HH:MM) | |
| | Mar 2022 | Mar 2023 | Mar 2022 | Mar 2023 | Mar 2022 | Mar 2023 | Mar 2022 | Mar 2023 |
| Mater | 10:36 | 11:37 | 43:31 | 37:32 | 3:32 | 3:31 | 10:18 | 10:20 |
| Royal Victoria | 14:08 | 13:54 | 44:33 | 49:25 | 5:52 | 6:29 | 21:25 | 24:01 |
| RBHSC | 5:14 | 5:54 | 9:34 | 15:10 | 3:10 | 3:47 | 6:48 | 8:23 |
| Antrim Area | 9:57 | 13:23 | 58:20 | 62:23 | 3:43 | 4:25 | 12:25 | 18:18 |
| Causeway | 11:13 | 10:42 | 41:56 | 48:04 | 3:07 | 3:24 | 9:56 | 11:32 |
| Ulster | 15:37 | 14:33 | 38:42 | 46:15 | 3:17 | 3:41 | 9:56 | 10:01 |
| Craigavon Area | 16:44 | 19:13 | 49:01 | 59:54 | 3:41 | 4:35 | 13:09 | 16:14 |
| Daisy Hill | 11:55 | 18:20 | 39:45 | 46:29 | 3:11 | 3:26 | 9:18 | 10:30 |
| Altnagelvin Area | 20:56 | 18:51 | 41:37 | 49:25 | 4:12 | 5:03 | 12:50 | 19:15 |
| South West Acute | 8:51 | 10:28 | 37:57 | 40:56 | 3:48 | 3:49 | 14:22 | 14:14 |
| Type 1 | 12:55 | 14:16 | 43:56 | 49:51 | 3:42 | 4:09 | 12:18 | 15:08 |
| Type 2 | 5:34 | 5:47 | 10:02 | 9:38 | 1:56 | 2:00 | 5:32 | 5:48 |
| Type 3 | 3:09 | 1:44 | 3:23 | 8:13 | 0:42 | 0:38 | 2:12 | 2:16 |
| Northern Ireland | 12:38 | 13:57 | 43:44 | 49:42 | 3:15 | 3:38 | 11:22 | 14:01 |

Source: Regional Data Warehouse

- The median time patients who were admitted to hospital spent in a Type 1 ED was 14 hours 16 minutes in March 2023, 1 hour 21 minutes more than the same month last year (12 hours 55 minutes) (Table 10, Table 11G).
- The median time patients discharged home (not admitted) spent in a Type 1 ED was 4 hours 9 minutes in March 2023, 27 minutes more than the time taken during the same month last year (3 hours 42 minutes) (Table 10, Table 11H).
- 95 percent of patients were admitted to hospital within 49 hours 51 minutes at Type 1 EDs in March 2023, 5 hours 55 minutes more than in March 2022 (43 hours 56 minutes) (Table 10, Table 11G).
- In March 2023, 95 percent of attendances at Type 1 EDs were discharged home within 15 hours 8 minutes of their arrival, 2 hours 50 minutes more than the time taken in March 2022 (12 hours 18 minutes) (Table 10, Table 11H).

¹⁸ Readers should note that Type 3 data on time spent in EDs for patients admitted is provided by Omagh only. No other Type 3 ED produces these statistics.

Technical Notes

Data Collection

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

[Emergency Care Activity Returns and Guidance](#)

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

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

A National Statistics Publication

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

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

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

[Letter of Confirmation as National Statistics](#)

Designation was awarded in March 2013: [Assessment Report](#)

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

[Emergency Care Waiting Times Pre-release List](#)

Waiting Time Information elsewhere in the United Kingdom (UK)

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

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

[Emergency Care Waiting Times - Additional Guidance](#)

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

[UK Comparative Waiting Times for Emergency Departments \(Excel 24KB\)](#)

Contextual Information

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

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

[Contextual Information for Using Hospital Statistics](#)

Security & Confidentiality Processes

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

[Official Statistics & User Engagement](#)

[DoH Statistics Charter](#)

Appendix 1: Hospital Information Branch (HIB)

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

The Head of Branch is Principal Statistician, Ms. Siobhán Morgan. The Branch aims to present information in a meaningful way and provide advice on its use to customers in the HSC Committee, Professional Advisory Groups, policy branches within the DoH, other Health organisations, academia, private sector organisations, charity/voluntary organisations as well as the general public. The statistical information collected is used to contribute to major exercises such as reporting on the performance of the HSC system, other comparative performance exercises, target setting and monitoring, development of service frameworks as well as policy formulation and evaluation. In addition, the information is used in response to a significantly high volume of Parliamentary / Assembly questions and ad-hoc queries each year.

Information is disseminated through a number of key statistical publications, including: Inpatient Activity, Outpatient Activity, Emergency Care, Mental Health & Learning Disability and Waiting Time Statistics (Inpatient, Outpatient, Diagnostics, Cancer and Emergency Care).

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

Website: [DoH Statistics and Research](#)

Appendix 2: Emergency departments and Opening Hours

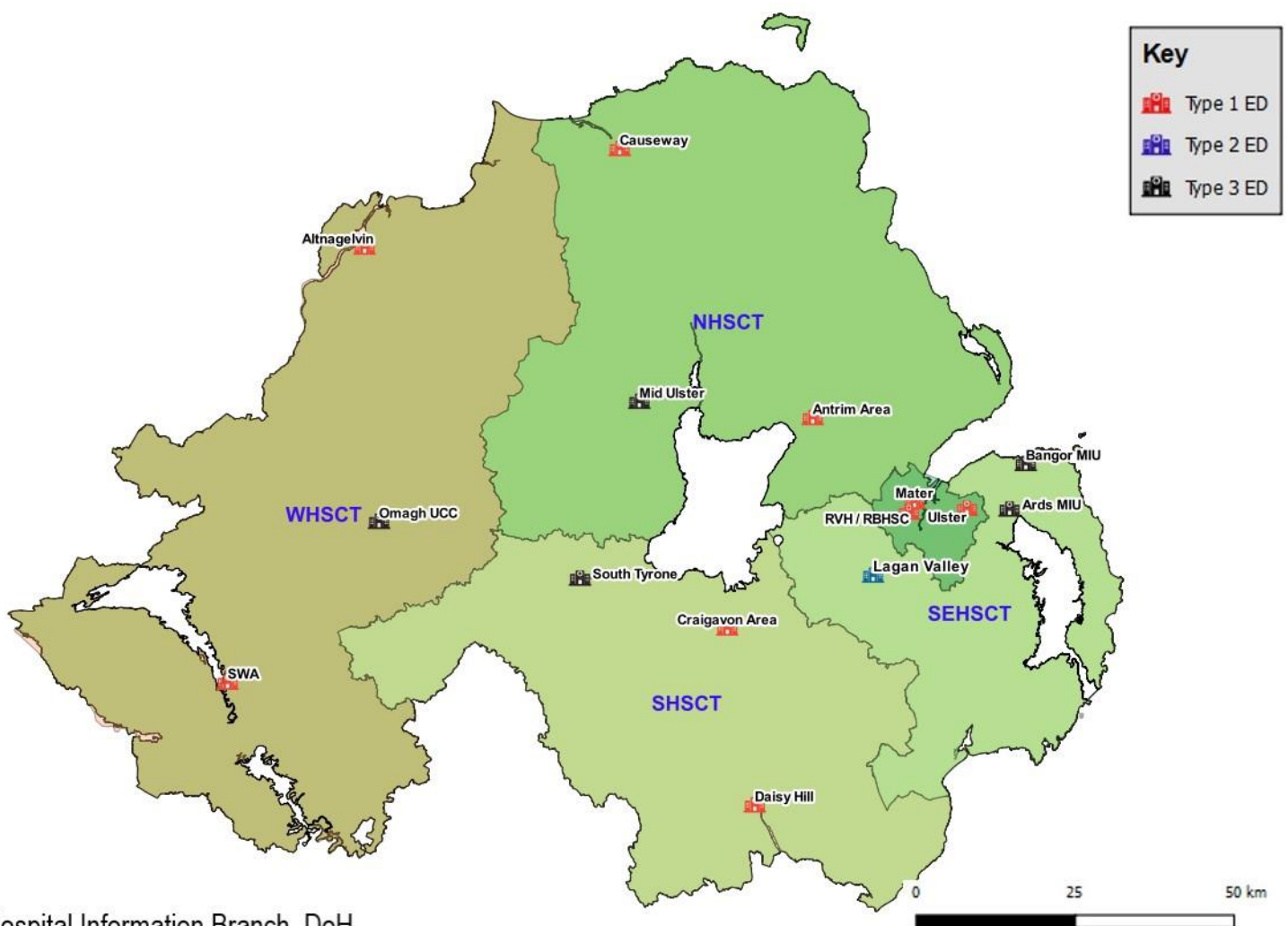
There are three separate categories of emergency care facility included in this publication:

Type 1 departments are defined as those with a consultant-led service with designated accommodation for the reception of emergency care patients, providing both emergency medicine and emergency surgical services on a round the clock basis.

Type 2 departments are consultant-led service with designated accommodation for the reception of emergency care patients, but which does not provide both emergency medicine and emergency surgical services and/or has time-limited opening hours.

Type 3 departments are minor injury units (MIU) with designated accommodation for the reception of patients with a minor injury and/or illness. It may be doctor or nurse-led. A defining characteristic of this service is that it treats at least minor injuries and/or illnesses and can be routinely accessed without appointment.

Emergency Departments in Northern Ireland



Hospital Information Branch, DoH

Current Categorisation of Emergency departments ¹⁹

| HSC Trust | Type 1 (24-hour assess) | Type 2 (Limited opening hours) | Type 3 (Minor Injuries Unit, MIU) |
|---------------|--|--|--|
| Belfast | Belfast City (Closed) | | |
| | Mater | RVH (Eye Casualty) ²⁰ | |
| | Royal Victoria | | |
| | Royal Belfast Hospital for Sick Children (RBHSC) | | |
| Northern | Antrim Area | | Whiteabbey ²¹ (Closed) |
| | Causeway | | Mid Ulster |
| South Eastern | Ulster | Lagan Valley | Ards MIU |
| | | Downe ²² (Currently operating as an Urgent Care Centre) | Bangor MIU ²³ (Closed) |
| Southern | Craigavon Area | | South Tyrone |
| | Daisy Hill ²⁴ | | Armagh Community ²⁵ (Closed) |
| | | | Craigavon Respiratory ED (Covid-19) ²⁶ (Closed) |
| | | | Craigavon Paediatric ED ²⁷ (Closed) |
| Western | Altnagelvin Area | | Tyrone County (Closed) |
| | South West Acute | | Omagh ²⁸ |

¹⁹ Opening Hours are as of June 2017.

²⁰ RVH (RAES) refers to the Regional Acute Eye Services at the Royal Victoria Hospital.

²¹ Temporarily closed on 1st December 2014.

²² Temporarily closed 30th March 2020, reopened as a MIU 10th August 2020, reopened as an Urgent Care Centre 19th October 2020.

²³ Temporarily closed 12th March 2020.

²⁴ Temporarily closed between 28th March 2020 and 19th October 2020.

²⁵ Temporarily closed on 17th November 2014.

²⁶ Temporarily opened on 29th March 2020 and closed on 19th October 2020.

²⁷ Temporarily opened on 31st March 2020 and closed on 12th June 2020.

²⁸ Tyrone County closed on 20th June 2017 and all emergency services were transferred to the new Omagh Hospital and Primary Care Complex on that date.

Appendix 3: General Guidance on using the Data

Guidance on using the Data

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

[Emergency Care Waiting Times - Additional Guidance](#)

Description of Data

Data on the number of new and unplanned review attendances at EDs in Northern Ireland by the length of time spent in ED. New and unplanned review attendances at EDs are used to describe unplanned activity at EDs, with new attendances referring to the first attendance and unplanned reviews referring to any subsequent unplanned attendances for the same complaint.

Information on the length of time spent in ED is collected and refers to the time spent in ED from arriving at the ED until the time the patient is treated and discharged, or admitted to hospital.

- Number of new and unplanned review attendances at EDs – this is the number of new and unplanned review attendances at EDs during each calendar month. **It does not include planned review attendances.**
- The length of time patients spend in ED 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 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 spent in ED, when compared with equivalent data for previous months, allow users to gauge the demand for emergency care services.
- Emergency care waiting times by type of department is presented to allow users to compare similar types of EDs in Northern Ireland, i.e. Type 1, 2 or 3 departments.
- Users should take into consideration, changes in the provision of emergency care services at specific sites in Northern Ireland when making comparisons with previous months. Such changes in the provision of services can be found in the document '*Emergency Care Waiting Time Statistics - Additional Guidance*' document at the following link:

Website: [Emergency Care Waiting Time Statistics - Additional Guidance](#)

Appendix 4: Additional Tables

Table 11A: PhoneFirst Calls, Urgent Care Centre Attendances and Referrals to Emergency Departments²⁹

| HSC Trust | PhoneFirst | | | | Urgent Care Centre | | | | Total Attendances | | | | Referral to ED | | | |
|-------------------------|---------------|--------------|--------------|---------------|--------------------|--------------|--------------|--------------|-------------------|---------------|---------------|---------------|----------------|--------------|--------------|--------------|
| | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
| Belfast | - | - | - | - | 1,923 | 1,777 | 1,579 | 1,989 | 1,923 | 1,777 | 1,579 | 1,989 | - | - | - | - |
| Northern | 3,291 | 1,281 | 1,239 | 1,585 | - | - | - | - | 3,291 | 1,281 | 1,239 | 1,585 | 215 | 289 | 243 | 339 |
| South Eastern | 2,882 | 3,036 | 2,898 | 3,376 | 1,207 | 1,167 | 1,116 | 1,277 | 4,089 | 4,203 | 4,014 | 4,653 | 337 | 335 | 336 | 379 |
| Southern | 5,372 | 3,743 | 4,715 | 5,696 | 144 | 246 | 244 | 409 | 5,516 | 3,989 | 4,959 | 6,105 | 1,377 | 858 | 1,053 | 1,170 |
| Western | 871 | 670 | 617 | 688 | - | - | - | - | 871 | 670 | 617 | 688 | 507 | 254 | 334 | 378 |
| Northern Ireland | 12,416 | 8,730 | 9,469 | 11,345 | 3,274 | 3,190 | 2,939 | 3,675 | 15,690 | 11,920 | 12,408 | 15,020 | 2,221 | 1,736 | 1,966 | 2,266 |

²⁹ Data on PhoneFirst calls and Urgent Care Centre attendances are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity.
Emergency Care Waiting Time Statistics: January - March 2023

Table 11B: New & Unplanned Review Attendances at Emergency Departments³⁰

| Department | New Attendances | | | | Unplanned Reviews | | | | Total Attendances | | | |
|-------------------------|-----------------|---------------|---------------|---------------|-------------------|--------------|--------------|--------------|-------------------|---------------|---------------|---------------|
| | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
| Mater | 2,598 | 3,087 | 3,005 | 3,383 | 67 | 63 | 53 | 92 | 2,665 | 3,150 | 3,058 | 3,475 |
| Royal Victoria | 6,942 | 6,301 | 6,381 | 6,995 | 130 | 136 | 120 | 173 | 7,072 | 6,437 | 6,501 | 7,168 |
| RBHSC | 3,799 | 3,477 | 3,299 | 3,855 | 341 | 344 | 280 | 366 | 4,140 | 3,821 | 3,579 | 4,221 |
| Antrim Area | 7,549 | 7,081 | 7,131 | 8,211 | 332 | 334 | 340 | 398 | 7,881 | 7,415 | 7,471 | 8,609 |
| Causeway | 3,657 | 3,168 | 3,217 | 3,756 | 299 | 278 | 269 | 328 | 3,956 | 3,446 | 3,486 | 4,084 |
| Ulster | 8,535 | 7,764 | 7,758 | 9,082 | 364 | 293 | 311 | 444 | 8,899 | 8,057 | 8,069 | 9,526 |
| Craigavon Area | 6,377 | 5,900 | 5,862 | 6,521 | 445 | 470 | 557 | 575 | 6,822 | 6,370 | 6,419 | 7,096 |
| Daisy Hill | 4,487 | 4,140 | 3,974 | 4,481 | 222 | 158 | 165 | 177 | 4,709 | 4,298 | 4,139 | 4,658 |
| Altnagelvin Area | 5,351 | 4,628 | 4,590 | 5,417 | 445 | 274 | 298 | 319 | 5,796 | 4,902 | 4,888 | 5,736 |
| South West Acute | 2,918 | 2,618 | 2,670 | 3,097 | 281 | 243 | 230 | 295 | 3,199 | 2,861 | 2,900 | 3,392 |
| Type 1 | 52,213 | 48,164 | 47,887 | 54,798 | 2,926 | 2,593 | 2,623 | 3,167 | 55,139 | 50,757 | 50,510 | 57,965 |
| Eye Casualty | 639 | 543 | 536 | 586 | 219 | 139 | 135 | 76 | 858 | 682 | 671 | 662 |
| Lagan Valley | 1,976 | 1,907 | 1,814 | 2,091 | 55 | 72 | 89 | 85 | 2,031 | 1,979 | 1,903 | 2,176 |
| Type 2 | 2,615 | 2,450 | 2,350 | 2,677 | 274 | 211 | 224 | 161 | 2,889 | 2,661 | 2,574 | 2,838 |
| Mid Ulster | 555 | 530 | 541 | 608 | 16 | 9 | 14 | 16 | 571 | 539 | 555 | 624 |
| Ards | 964 | 953 | 877 | 1,051 | 8 | 3 | 0 | 1 | 972 | 956 | 877 | 1,052 |
| Bangor | - | - | - | - | - | - | - | - | - | - | - | - |
| South Tyrone | 1,963 | 1,501 | 1,495 | 1,755 | 14 | 16 | 14 | 18 | 1,977 | 1,517 | 1,509 | 1,773 |
| Omagh | 1,459 | 1,311 | 1,369 | 1,574 | 132 | 121 | 101 | 149 | 1,591 | 1,432 | 1,470 | 1,723 |
| Type 3 | 4,941 | 4,295 | 4,282 | 4,988 | 170 | 149 | 129 | 184 | 5,111 | 4,444 | 4,411 | 5,172 |
| Northern Ireland | 59,769 | 54,909 | 54,519 | 62,463 | 3,370 | 2,953 | 2,976 | 3,512 | 63,139 | 57,862 | 57,495 | 65,975 |

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

Table 11C: Performance against Emergency Care Waiting Times Target^{31 32}

| Department | 4 - Hour Performance | | | | 12 - Hour Performance | | | | Total Attendances | | | |
|-------------------------|----------------------|--------------|--------------|--------------|-----------------------|--------------|--------------|---------------|-------------------|---------------|---------------|---------------|
| | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
| Mater | 47.8% | 55.1% | 55.7% | 49.9% | 288 | 389 | 260 | 381 | 2,665 | 3,150 | 3,058 | 3,475 |
| Royal Victoria | 26.8% | 27.9% | 29.4% | 24.5% | 1,797 | 1,883 | 1,655 | 2,118 | 7,072 | 6,437 | 6,501 | 7,168 |
| RBHSC | 64.6% | 64.9% | 55.8% | 51.0% | 7 | 22 | 42 | 62 | 4,140 | 3,821 | 3,579 | 4,221 |
| Antrim Area | 47.2% | 46.0% | 42.7% | 39.2% | 998 | 1,207 | 1,223 | 1,581 | 7,881 | 7,415 | 7,471 | 8,609 |
| Causeway | 53.7% | 52.1% | 57.9% | 52.6% | 421 | 601 | 397 | 502 | 3,956 | 3,446 | 3,486 | 4,084 |
| Ulster | 48.2% | 45.0% | 43.9% | 43.4% | 1,502 | 1,406 | 1,436 | 1,510 | 8,899 | 8,057 | 8,069 | 9,526 |
| Craigavon Area | 43.2% | 37.8% | 33.1% | 35.7% | 1,387 | 1,525 | 1,654 | 1,804 | 6,822 | 6,370 | 6,419 | 7,096 |
| Daisy Hill | 54.4% | 54.1% | 53.0% | 48.8% | 450 | 528 | 479 | 660 | 4,709 | 4,298 | 4,139 | 4,658 |
| Altnagelvin Area | 40.4% | 35.5% | 33.1% | 30.8% | 961 | 1,120 | 1,025 | 1,169 | 5,796 | 4,902 | 4,888 | 5,736 |
| South West Acute | 47.0% | 49.0% | 49.7% | 47.3% | 379 | 487 | 430 | 454 | 3,199 | 2,861 | 2,900 | 3,392 |
| Type 1 | 45.9% | 44.8% | 43.0% | 40.5% | 8,190 | 9,168 | 8,601 | 10,241 | 55,139 | 50,757 | 50,510 | 57,965 |
| Eye Casualty | 87.8% | 75.2% | 79.6% | 75.7% | 0 | 0 | 0 | 0 | 858 | 682 | 671 | 662 |
| Lagan Valley | 77.3% | 76.4% | 76.4% | 79.2% | 4 | 0 | 0 | 2 | 2,031 | 1,979 | 1,903 | 2,176 |
| Type 2 | 80.4% | 76.1% | 77.2% | 78.4% | 4 | 0 | 0 | 2 | 2,889 | 2,661 | 2,574 | 2,838 |
| Mid Ulster | 100.0% | 99.8% | 100.0% | 100.0% | 0 | 0 | 0 | 0 | 571 | 539 | 555 | 624 |
| Ards | 100.0% | 99.9% | 100.0% | 100.0% | 0 | 0 | 0 | 0 | 972 | 956 | 877 | 1,052 |
| Bangor | - | - | - | - | - | - | - | - | - | - | - | - |
| South Tyrone | 99.9% | 100.0% | 100.0% | 100.0% | 0 | 0 | 0 | 0 | 1,977 | 1,517 | 1,509 | 1,773 |
| Omagh | 97.9% | 99.2% | 98.2% | 97.6% | 1 | 0 | 0 | 0 | 1,591 | 1,432 | 1,470 | 1,723 |
| Type 3 | 99.3% | 99.7% | 99.4% | 99.2% | 1 | 0 | 0 | 0 | 5,111 | 4,444 | 4,411 | 5,172 |
| Northern Ireland | 51.8% | 50.4% | 48.9% | 46.7% | 8,195 | 9,168 | 8,601 | 10,243 | 63,139 | 57,862 | 57,495 | 65,975 |

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

³² Information on comparability with other UK jurisdictions is detailed on pages 6 – 8 of the additional guidance document found at the following link: [Emergency Care Waiting Times - Additional Guidance](#)

Table 11D(i): Percentage of Attendances (i) Referred by a GP; (ii) Who Left before Treatment was Complete; and (iii) Re-attended within 7 Days^{33 34}

| Department | GP - Referrals | | | | Left Before Treatment | | | | Unplanned Reviews Within 7 Days | | | |
|-------------------------|----------------|--------------|--------------|--------------|-----------------------|-------------|-------------|-------------|---------------------------------|-------------|-------------|-------------|
| | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
| Mater | 10.7% | 11.3% | 8.3% | 10.2% | 8.4% | 5.9% | 7.8% | 8.1% | 1.8% | 1.6% | 1.1% | 1.9% |
| Royal Victoria | 17.1% | 20.5% | 17.3% | 17.3% | 11.0% | 8.2% | 10.7% | 12.7% | 1.1% | 1.4% | 1.2% | 1.5% |
| RBHSC | 9.3% | 15.6% | 16.0% | 14.1% | 7.4% | 4.7% | 7.7% | 9.0% | 5.9% | 6.0% | 5.5% | 5.9% |
| Antrim Area | 19.0% | 34.5% | 32.2% | 31.8% | 4.8% | 4.1% | 5.6% | 7.0% | 2.6% | 2.8% | 3.2% | 2.9% |
| Causeway | 18.8% | 25.5% | 21.7% | 22.1% | 8.0% | 5.0% | 3.4% | 5.9% | 5.1% | 4.7% | 4.6% | 4.9% |
| Ulster | 23.0% | 22.5% | 24.2% | 22.9% | 5.6% | 4.2% | 5.0% | 5.3% | 2.9% | 2.5% | 2.7% | 3.1% |
| Craigavon Area | 24.1% | 28.5% | 27.6% | 26.5% | 7.8% | 8.0% | 11.6% | 11.8% | 4.3% | 4.7% | 5.8% | 5.5% |
| Daisy Hill | 21.1% | 24.6% | 23.0% | 24.6% | 7.7% | 6.3% | 7.4% | 7.2% | 3.7% | 2.9% | 3.3% | 3.3% |
| Altnagelvin Area | 11.0% | 13.7% | 13.9% | 14.9% | 7.1% | 5.5% | 6.6% | 8.5% | 5.6% | 4.0% | 5.2% | 4.9% |
| South West Acute | 24.0% | 22.8% | 21.8% | 22.6% | 7.3% | 3.5% | 4.6% | 4.4% | 6.8% | 6.6% | 6.4% | 6.7% |
| Type 1 | 18.5% | 23.1% | 22.0% | 21.8% | 7.3% | 5.6% | 7.2% | 8.1% | 3.7% | 3.4% | 3.7% | 3.8% |
| Eye Casualty | 5.2% | 3.3% | 5.2% | 3.7% | 0.2% | 0.3% | 0.4% | 0.9% | 0.3% | 0.1% | 0.3% | 0.7% |
| Lagan Valley | 7.6% | 6.4% | 5.9% | 5.1% | 1.5% | 1.1% | 1.2% | 0.7% | 1.5% | 1.6% | 1.9% | 1.9% |
| Type 2 | 6.9% | 5.6% | 5.7% | 4.8% | 1.1% | 0.9% | 1.0% | 0.8% | 1.2% | 1.2% | 1.5% | 1.6% |
| Mid Ulster | 0.9% | 0.6% | 0.7% | 0.8% | 0.0% | 0.4% | 0.2% | 0.3% | 1.4% | 0.9% | 1.4% | 0.8% |
| Ards | 0.3% | 0.2% | 0.0% | 0.2% | 0.1% | 0.1% | 0.0% | 0.3% | 0.2% | 0.3% | 0.0% | 0.0% |
| Bangor | - | - | - | - | - | - | - | - | - | - | - | - |
| South Tyrone | 0.0% | 0.0% | 0.0% | 0.0% | 0.2% | 0.0% | 0.1% | 0.1% | 0.7% | 0.6% | 0.5% | 0.5% |
| Omagh | 2.1% | 3.1% | 2.7% | 2.7% | 1.9% | 0.9% | 1.2% | 0.9% | 5.3% | 5.6% | 4.4% | 6.2% |
| Type 3 | 0.8% | 1.1% | 1.0% | 1.0% | 0.7% | 0.4% | 0.4% | 0.4% | 2.1% | 2.2% | 1.8% | 2.3% |
| Northern Ireland | 16.6% | 20.6% | 19.7% | 19.5% | 6.5% | 5.0% | 6.4% | 7.2% | 3.5% | 3.2% | 3.5% | 3.6% |

³³ Data on GP referrals to ED, Left before treatment complete and unplanned re-attendances are not National Statistics, but help provide users with a comprehensive view of emergency care.

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

Table 11D(ii): Number of Attendances (i) Referred by a GP; (ii) Who Left before Treatment was Complete; and (iii) Re-attended within 7 Days^{35 36}

| Department | GP - Referrals | | | | Left Before Treatment | | | | Unplanned Reviews Within 7 Days | | | |
|-------------------------|----------------|---------------|---------------|---------------|-----------------------|--------------|--------------|--------------|---------------------------------|--------------|--------------|--------------|
| | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
| Mater | 285 | 354 | 254 | 354 | 224 | 185 | 238 | 282 | 47 | 49 | 35 | 66 |
| Royal Victoria | 1,205 | 1,315 | 1,129 | 1,239 | 776 | 525 | 696 | 909 | 78 | 87 | 81 | 106 |
| RBHSC | 383 | 593 | 576 | 593 | 308 | 181 | 277 | 378 | 245 | 228 | 196 | 247 |
| Antrim Area | 1,495 | 2,551 | 2,417 | 2,736 | 378 | 306 | 417 | 599 | 205 | 205 | 238 | 250 |
| Causeway | 744 | 877 | 756 | 907 | 316 | 173 | 119 | 240 | 202 | 162 | 160 | 200 |
| Ulster | 2,049 | 1,807 | 1,962 | 2,183 | 498 | 336 | 401 | 501 | 254 | 202 | 222 | 296 |
| Craigavon Area | 1,630 | 1,827 | 1,770 | 1,884 | 531 | 512 | 742 | 834 | 291 | 304 | 371 | 391 |
| Daisy Hill | 989 | 1,058 | 953 | 1,144 | 362 | 269 | 306 | 335 | 174 | 123 | 137 | 152 |
| Altnagelvin Area | 642 | 670 | 682 | 857 | 414 | 270 | 325 | 489 | 327 | 196 | 257 | 284 |
| South West Acute | 766 | 654 | 632 | 766 | 235 | 99 | 133 | 150 | 216 | 188 | 187 | 227 |
| Type 1 | 10,188 | 11,706 | 11,131 | 12,663 | 4,042 | 2,856 | 3,654 | 4,717 | 2,039 | 1,744 | 1,884 | 2,219 |
| Eye Casualty | 45 | 23 | 35 | 25 | 2 | 2 | 3 | 6 | 3 | 1 | 2 | 5 |
| Lagan Valley | 155 | 126 | 113 | 111 | 30 | 21 | 23 | 16 | 31 | 32 | 37 | 42 |
| Type 2 | 200 | 149 | 148 | 136 | 32 | 23 | 26 | 22 | 34 | 33 | 39 | 47 |
| Mid Ulster | 5 | 3 | 4 | 5 | 0 | 2 | 1 | 2 | 8 | 5 | 8 | 5 |
| Ards | 3 | 2 | 0 | 2 | 1 | 1 | 0 | 3 | 2 | 3 | 0 | 0 |
| Bangor | - | - | - | - | - | - | - | - | - | - | - | - |
| South Tyrone | 0 | 0 | 0 | 0 | 3 | 0 | 1 | 1 | 13 | 9 | 8 | 9 |
| Omagh | 34 | 45 | 40 | 47 | 30 | 13 | 17 | 15 | 85 | 80 | 65 | 106 |
| Type 3 | 42 | 50 | 44 | 54 | 34 | 16 | 19 | 21 | 108 | 97 | 81 | 120 |
| Northern Ireland | 10,430 | 11,905 | 11,323 | 12,853 | 4,108 | 2,895 | 3,699 | 4,760 | 2,181 | 1,874 | 2,004 | 2,386 |

³⁵ Data on GP referrals to ED, Left before treatment complete and unplanned re-attendances are not National Statistics, but help provide users with a comprehensive view of emergency care.

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

Table 11E: Time from Arrival to Triage (Assessment)^{37 38}

| Department | Median (HH:MM) | | | | 95th Percentile (HH:MM) | | | |
|-------------------------|----------------|-------------|-------------|-------------|-------------------------|-------------|-------------|-------------|
| | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
| Mater | 0:12 | 0:12 | 0:13 | 0:13 | 0:51 | 0:48 | 0:43 | 0:49 |
| Royal Victoria | 0:22 | 0:12 | 0:14 | 0:14 | 1:33 | 1:02 | 1:13 | 1:11 |
| RBHSC | 0:12 | 0:11 | 0:12 | 0:16 | 0:56 | 0:47 | 0:56 | 1:03 |
| Antrim Area | 0:15 | 0:10 | 0:10 | 0:11 | 0:41 | 0:32 | 0:32 | 0:32 |
| Causeway | 0:16 | 0:13 | 0:12 | 0:12 | 0:48 | 0:45 | 0:46 | 0:44 |
| Ulster | 0:15 | 0:16 | 0:17 | 0:19 | 1:23 | 1:37 | 1:40 | 1:34 |
| Craigavon Area | 0:17 | 0:12 | 0:14 | 0:14 | 2:27 | 1:39 | 1:48 | 1:55 |
| Daisy Hill | 0:10 | 0:07 | 0:08 | 0:08 | 0:40 | 0:33 | 0:33 | 0:38 |
| Altnagelvin Area | 0:18 | 0:19 | 0:22 | 0:20 | 1:09 | 1:18 | 1:20 | 1:21 |
| South West Acute | 0:19 | 0:14 | 0:15 | 0:17 | 1:10 | 1:01 | 0:59 | 0:57 |
| Type 1 | 0:15 | 0:12 | 0:13 | 0:14 | 1:17 | 1:03 | 1:06 | 1:09 |
| Eye Casualty | 0:11 | 0:09 | 0:11 | 0:12 | 0:47 | 0:51 | 0:46 | 0:55 |
| Lagan Valley | 0:05 | 0:06 | 0:06 | 0:05 | 0:16 | 0:18 | 0:16 | 0:15 |
| Type 2 | 0:06 | 0:06 | 0:07 | 0:06 | 0:33 | 0:28 | 0:30 | 0:30 |
| Mid Ulster | 0:07 | 0:06 | 0:05 | 0:08 | 0:44 | 0:26 | 0:33 | 0:45 |
| Ards | 0:02 | 0:02 | 0:02 | 0:02 | 0:11 | 0:12 | 0:11 | 0:10 |
| Bangor | - | - | - | - | - | - | - | - |
| South Tyrone | 0:01 | 0:01 | 0:01 | 0:01 | 0:09 | 0:07 | 0:05 | 0:07 |
| Omagh | 0:09 | 0:07 | 0:07 | 0:07 | 0:40 | 0:28 | 0:34 | 0:24 |
| Type 3 | 0:03 | 0:03 | 0:02 | 0:02 | 0:25 | 0:19 | 0:22 | 0:19 |
| Northern Ireland | 0:13 | 0:11 | 0:12 | 0:12 | 1:12 | 1:00 | 1:02 | 1:06 |

³⁷ 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 time spent in ED.

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

Table 11F: Time from Triage (Assessment) to Start of Treatment^{39 40}

| Department | Median (HH:MM) | | | | 95th Percentile (HH:MM) | | | |
|-------------------------|----------------|-------------|-------------|-------------|-------------------------|-------------|-------------|-------------|
| | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
| Mater | 1:20 | 0:57 | 0:56 | 1:23 | 5:55 | 5:02 | 5:12 | 5:46 |
| Royal Victoria | 2:06 | 2:07 | 2:09 | 2:29 | 8:44 | 8:45 | 9:40 | 10:58 |
| RBHSC | 1:30 | 1:07 | 1:42 | 1:50 | 4:10 | 4:27 | 4:50 | 5:44 |
| Antrim Area | 1:51 | 1:37 | 1:57 | 2:35 | 5:43 | 6:13 | 7:24 | 8:44 |
| Causeway | 1:32 | 1:19 | 1:00 | 1:21 | 5:50 | 4:42 | 3:59 | 5:04 |
| Ulster | 1:09 | 0:55 | 1:06 | 1:11 | 5:42 | 4:39 | 5:05 | 5:39 |
| Craigavon Area | 1:30 | 1:34 | 2:12 | 1:51 | 7:57 | 10:05 | 11:35 | 11:49 |
| Daisy Hill | 1:08 | 0:54 | 1:00 | 1:08 | 5:35 | 4:32 | 5:33 | 5:30 |
| Altnagelvin Area | 1:29 | 1:21 | 1:42 | 2:04 | 5:18 | 5:18 | 6:17 | 6:42 |
| South West Acute | 1:09 | 0:40 | 0:43 | 0:50 | 5:11 | 3:24 | 4:27 | 4:12 |
| Type 1 | 1:27 | 1:14 | 1:26 | 1:39 | 6:14 | 6:10 | 7:04 | 7:37 |
| Lagan Valley | 0:24 | 0:29 | 0:29 | 0:27 | 1:36 | 1:56 | 1:48 | 1:37 |
| Type 2 | 0:24 | 0:29 | 0:29 | 0:27 | 1:36 | 1:56 | 1:48 | 1:37 |
| Mid Ulster | 0:02 | 0:01 | 0:03 | 0:04 | 0:24 | 0:32 | 0:33 | 0:56 |
| Ards | 0:08 | 0:05 | 0:07 | 0:06 | 0:33 | 0:27 | 0:27 | 0:24 |
| Bangor | - | - | - | - | - | - | - | - |
| South Tyrone | 0:02 | 0:01 | 0:00 | 0:00 | 0:27 | 0:15 | 0:12 | 0:14 |
| Omagh | 0:17 | 0:11 | 0:14 | 0:18 | 2:09 | 1:14 | 1:33 | 2:01 |
| Type 3 | 0:06 | 0:04 | 0:05 | 0:05 | 1:13 | 0:46 | 0:59 | 1:17 |
| Northern Ireland | 1:13 | 1:03 | 1:12 | 1:22 | 5:57 | 5:54 | 6:43 | 7:15 |

³⁹ 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 time spent in ED.

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

Table 11G: Time Spent in an Emergency department by those Admitted to Hospital^{41 42 43}

| Department | Median (HH:MM) | | | | 95th Percentile (HH:MM) | | | |
|-------------------------|----------------|--------------|--------------|--------------|-------------------------|--------------|--------------|--------------|
| | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
| Mater | 10:36 | 12:45 | 9:21 | 11:37 | 43:31 | 51:34 | 28:11 | 37:32 |
| Royal Victoria | 14:08 | 15:40 | 13:22 | 13:54 | 44:33 | 69:31 | 43:36 | 49:25 |
| RBHSC | 5:14 | 5:08 | 5:50 | 5:54 | 9:34 | 9:42 | 12:23 | 15:10 |
| Antrim Area | 9:57 | 10:41 | 11:51 | 13:23 | 58:20 | 59:05 | 56:38 | 62:23 |
| Causeway | 11:13 | 17:11 | 11:17 | 10:42 | 41:56 | 74:21 | 48:27 | 48:04 |
| Ulster | 15:37 | 13:55 | 15:01 | 14:33 | 38:42 | 50:33 | 45:07 | 46:15 |
| Craigavon Area | 16:44 | 18:08 | 20:49 | 19:13 | 49:01 | 64:34 | 65:28 | 59:54 |
| Daisy Hill | 11:55 | 15:56 | 16:23 | 18:20 | 39:45 | 47:20 | 38:41 | 46:29 |
| Altnagelvin Area | 20:56 | 22:53 | 22:19 | 18:51 | 41:37 | 55:02 | 52:07 | 49:25 |
| South West Acute | 8:51 | 19:58 | 16:08 | 10:28 | 37:57 | 56:18 | 49:53 | 40:56 |
| Type 1 | 12:55 | 14:33 | 13:56 | 14:16 | 43:56 | 56:21 | 49:43 | 49:51 |
| Eye Casualty | 2:57 | 2:15 | 2:50 | 2:55 | 6:46 | 6:44 | 9:09 | 3:23 |
| Lagan Valley | 5:35 | 5:34 | 5:10 | 5:52 | 10:02 | 9:16 | 9:09 | 9:38 |
| Type 2 | 5:34 | 5:27 | 5:05 | 5:47 | 10:02 | 9:14 | 9:09 | 9:38 |
| Mid Ulster | - | - | - | - | - | - | - | - |
| Ards | - | - | - | - | - | - | - | - |
| Bangor | - | - | - | - | - | - | - | - |
| South Tyrone | - | - | - | - | - | - | - | - |
| Omagh | 3:09 | 1:08 | 2:41 | 3:58 | 3:23 | 3:43 | 3:23 | 8:13 |
| Type 3 | 3:09 | 1:08 | 2:41 | 3:58 | 3:23 | 3:43 | 3:23 | 8:13 |
| Northern Ireland | 12:38 | 14:13 | 13:38 | 13:57 | 43:44 | 56:15 | 49:28 | 49:42 |

⁴¹ 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 time spent in ED.

⁴² Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

⁴³ Readers should note that Type 3 data on time spent in EDs for patients admitted is provided by Omagh only. No other Type 3 ED produces these statistics.

Table 11H: Time Spent in an Emergency department by those Discharged Home^{44 45}

| Department | Median (HH:MM) | | | | 95th Percentile (HH:MM) | | | |
|-------------------------|----------------|-------------|-------------|-------------|-------------------------|--------------|--------------|--------------|
| | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
| Mater | 3:32 | 2:52 | 2:56 | 3:31 | 10:18 | 10:45 | 9:50 | 10:20 |
| Royal Victoria | 5:52 | 5:47 | 5:47 | 6:29 | 21:25 | 28:30 | 21:38 | 24:01 |
| RBHSC | 3:10 | 2:58 | 3:30 | 3:47 | 6:48 | 7:15 | 7:36 | 8:23 |
| Antrim Area | 3:43 | 3:44 | 3:59 | 4:25 | 12:25 | 19:04 | 17:16 | 18:18 |
| Causeway | 3:07 | 3:18 | 2:58 | 3:24 | 9:56 | 12:46 | 9:01 | 11:32 |
| Ulster | 3:17 | 3:24 | 3:35 | 3:41 | 9:56 | 9:48 | 10:10 | 10:01 |
| Craigavon Area | 3:41 | 4:05 | 4:50 | 4:35 | 13:09 | 14:59 | 16:15 | 16:14 |
| Daisy Hill | 3:11 | 3:05 | 3:13 | 3:26 | 9:18 | 8:54 | 9:38 | 10:30 |
| Altnagelvin Area | 4:12 | 4:31 | 4:50 | 5:03 | 12:50 | 18:44 | 18:24 | 19:15 |
| South West Acute | 3:48 | 3:41 | 3:38 | 3:49 | 14:22 | 17:15 | 15:32 | 14:14 |
| Type 1 | 3:42 | 3:41 | 3:53 | 4:09 | 12:18 | 15:00 | 14:11 | 15:08 |
| Eye Casualty | 2:11 | 2:45 | 2:31 | 2:48 | 5:11 | 6:21 | 5:51 | 6:09 |
| Lagan Valley | 1:42 | 1:53 | 1:51 | 1:44 | 5:36 | 5:53 | 5:56 | 5:45 |
| Type 2 | 1:56 | 2:07 | 2:04 | 2:00 | 5:32 | 6:00 | 5:55 | 5:48 |
| Mid Ulster | 0:37 | 0:41 | 0:34 | 0:35 | 1:49 | 2:09 | 1:59 | 1:50 |
| Ards | 0:47 | 0:43 | 0:42 | 0:40 | 1:29 | 1:19 | 1:18 | 1:21 |
| Bangor | - | - | - | - | - | - | - | - |
| South Tyrone | 0:33 | 0:28 | 0:29 | 0:30 | 1:25 | 1:04 | 1:10 | 1:12 |
| Omagh | 1:00 | 0:51 | 0:58 | 0:59 | 3:09 | 2:39 | 2:47 | 3:18 |
| Type 3 | 0:42 | 0:37 | 0:39 | 0:38 | 2:12 | 2:01 | 2:05 | 2:16 |
| Northern Ireland | 3:15 | 3:14 | 3:24 | 3:38 | 11:22 | 13:25 | 13:00 | 14:01 |

⁴⁴ 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 time spent in ED.

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

Table 11: Average Number of Attendances by Day of Week⁴⁶

| Day of Week | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
|-------------|----------|----------|----------|----------|
| Monday | 2,461.8 | 2,185.8 | 2,467.8 | 2,579.8 |
| Tuesday | 2,205.2 | 2,002.6 | 2,216.5 | 2,337.8 |
| Wednesday | 2,051.6 | 1,873.5 | 2,123.0 | 2,197.8 |
| Thursday | 2,000.0 | 1,867.5 | 2,086.3 | 2,173.8 |
| Friday | 2,075.8 | 1,915.3 | 2,093.3 | 2,060.8 |
| Saturday | 1,632.5 | 1,532.5 | 1,673.8 | 1,731.3 |
| Sunday | 1,757.3 | 1,616.0 | 1,736.8 | 1,806.8 |

⁴⁶ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

Table 11J: Attendances at Emergency departments, by Time Spent in ED from Arrival to Discharge ⁴⁷

| Department | Under 4 Hours | | | | Between 4 and 12 Hours | | | | Over 12 Hours | | | |
|-------------------------|---------------|---------------|---------------|---------------|------------------------|---------------|---------------|---------------|---------------|--------------|--------------|---------------|
| | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
| Mater | 1,273 | 1,737 | 1,702 | 1,734 | 1,104 | 1,024 | 1,096 | 1,360 | 288 | 389 | 260 | 381 |
| Royal Victoria | 1,896 | 1,795 | 1,913 | 1,757 | 3,379 | 2,759 | 2,933 | 3,293 | 1,797 | 1,883 | 1,655 | 2,118 |
| RBHSC | 2,675 | 2,481 | 1,997 | 2,152 | 1,458 | 1,318 | 1,540 | 2,007 | 7 | 22 | 42 | 62 |
| Antrim Area | 3,718 | 3,414 | 3,190 | 3,376 | 3,165 | 2,794 | 3,058 | 3,652 | 998 | 1,207 | 1,223 | 1,581 |
| Causeway | 2,126 | 1,795 | 2,017 | 2,150 | 1,409 | 1,050 | 1,072 | 1,432 | 421 | 601 | 397 | 502 |
| Ulster | 4,288 | 3,623 | 3,540 | 4,134 | 3,109 | 3,028 | 3,093 | 3,882 | 1,502 | 1,406 | 1,436 | 1,510 |
| Craigavon Area | 2,949 | 2,410 | 2,127 | 2,533 | 2,486 | 2,435 | 2,638 | 2,759 | 1,387 | 1,525 | 1,654 | 1,804 |
| Daisy Hill | 2,560 | 2,327 | 2,195 | 2,272 | 1,699 | 1,443 | 1,465 | 1,726 | 450 | 528 | 479 | 660 |
| Altnagelvin Area | 2,344 | 1,742 | 1,617 | 1,768 | 2,491 | 2,040 | 2,246 | 2,799 | 961 | 1,120 | 1,025 | 1,169 |
| South West Acute | 1,504 | 1,401 | 1,440 | 1,604 | 1,316 | 973 | 1,030 | 1,334 | 379 | 487 | 430 | 454 |
| Type 1 | 25,333 | 22,725 | 21,738 | 23,480 | 21,616 | 18,864 | 20,171 | 24,244 | 8,190 | 9,168 | 8,601 | 10,241 |
| Eye Casualty | 753 | 513 | 534 | 501 | 105 | 169 | 137 | 161 | 0 | 0 | 0 | 0 |
| Lagan Valley | 1,570 | 1,511 | 1,454 | 1,723 | 457 | 468 | 449 | 451 | 4 | 0 | 0 | 2 |
| Type 2 | 2,323 | 2,024 | 1,988 | 2,224 | 562 | 637 | 586 | 612 | 4 | 0 | 0 | 2 |
| Mid Ulster | 571 | 538 | 555 | 624 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 |
| Ards | 972 | 955 | 877 | 1,052 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 |
| Bangor | - | - | - | - | - | - | - | - | - | - | - | - |
| South Tyrone | 1,976 | 1,517 | 1,509 | 1,773 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Omagh | 1,558 | 1,420 | 1,444 | 1,681 | 32 | 12 | 26 | 42 | 1 | 0 | 0 | 0 |
| Type 3 | 5,077 | 4,430 | 4,385 | 5,130 | 33 | 14 | 26 | 42 | 1 | 0 | 0 | 0 |
| Northern Ireland | 32,733 | 29,179 | 28,111 | 30,834 | 22,211 | 19,515 | 20,783 | 24,898 | 8,195 | 9,168 | 8,601 | 10,243 |

⁴⁷ Readers should note that those on an ambulatory care pathway delivered outside the ED are not included in these statistics.

Table 11K: Number and Percentage of Patients Commencing Treatment within 2 Hours of being Triage^{48 49}

| Department | % Commencing Treatment, Following Triage, Within 2 Hours | | | | Number Commencing Treatment, Following Triage, Within 2 Hours | | | |
|-------------------------|--|--------------|--------------|--------------|---|---------------|---------------|---------------|
| | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
| Mater | 62.4% | 71.6% | 69.2% | 63.3% | 1,168 | 1,572 | 1,468 | 1,617 |
| Royal Victoria | 48.5% | 48.0% | 47.4% | 43.0% | 2,578 | 2,309 | 2,179 | 2,221 |
| RBHSC | 63.3% | 72.1% | 56.4% | 53.2% | 2,312 | 2,514 | 1,764 | 1,941 |
| Antrim Area | 53.4% | 58.5% | 50.9% | 39.4% | 3,228 | 3,537 | 2,960 | 2,567 |
| Causeway | 59.3% | 66.1% | 76.7% | 64.7% | 1,846 | 1,894 | 2,180 | 2,208 |
| Ulster | 69.3% | 75.6% | 71.0% | 67.6% | 5,795 | 5,804 | 5,432 | 6,086 |
| Craigavon Area | 60.0% | 56.6% | 47.4% | 51.6% | 3,661 | 3,264 | 2,689 | 3,205 |
| Daisy Hill | 69.1% | 77.8% | 72.3% | 68.9% | 2,999 | 3,124 | 2,745 | 2,943 |
| Altnagelvin Area | 61.3% | 65.2% | 55.6% | 48.3% | 3,159 | 2,879 | 2,418 | 2,445 |
| South West Acute | 68.5% | 83.0% | 77.7% | 75.3% | 1,851 | 2,053 | 1,965 | 2,233 |
| Type 1 | 61.3% | 66.2% | 60.7% | 56.3% | 28,597 | 28,950 | 25,800 | 27,466 |
| Lagan Valley | 97.2% | 95.6% | 96.2% | 97.9% | 1,935 | 1,839 | 1,787 | 2,080 |
| Type 2 | 97.2% | 95.6% | 96.2% | 97.9% | 1,935 | 1,839 | 1,787 | 2,080 |
| Mid Ulster | 100.0% | 100.0% | 100.0% | 100.0% | 55 | 80 | 74 | 74 |
| Ards | 100.0% | 99.9% | 100.0% | 100.0% | 946 | 916 | 841 | 1,004 |
| Bangor | - | - | - | - | - | - | - | - |
| South Tyrone | 100.0% | 100.0% | 100.0% | 100.0% | 1,823 | 1,302 | 1,358 | 1,595 |
| Omagh | 94.2% | 98.6% | 97.8% | 94.9% | 1,305 | 1,242 | 1,270 | 1,508 |
| Type 3 | 98.1% | 99.5% | 99.2% | 98.1% | 4,129 | 3,540 | 3,543 | 4,181 |
| Northern Ireland | 65.6% | 69.7% | 65.0% | 61.1% | 34,661 | 34,329 | 31,130 | 33,727 |

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

⁴⁹ Information on time to treatment is not recorded at Eye Casualty.

Table 11L: Percentage Triageed in each Triage Group^{50 51}

| Department | Triage Level (1/2) | | | | Triage Level (3) | | | | Triage Level (4/5) | | | |
|-------------------------|--------------------|--------------|--------------|--------------|------------------|--------------|--------------|--------------|--------------------|--------------|--------------|--------------|
| | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 | Mar 2022 | Jan 2023 | Feb 2023 | Mar 2023 |
| Mater | 22.2% | 20.7% | 18.2% | 19.6% | 45.5% | 46.9% | 48.3% | 49.6% | 32.3% | 32.4% | 33.5% | 30.8% |
| Royal Victoria | 28.5% | 31.4% | 30.1% | 29.9% | 50.6% | 50.6% | 48.8% | 50.3% | 20.9% | 17.9% | 21.1% | 19.8% |
| RBHSC | 14.6% | 21.2% | 18.6% | 19.2% | 25.4% | 29.0% | 29.7% | 30.1% | 60.0% | 49.8% | 51.7% | 50.7% |
| Antrim Area | 17.8% | 19.0% | 18.9% | 19.8% | 54.2% | 54.6% | 57.6% | 55.9% | 28.0% | 26.4% | 23.5% | 24.3% |
| Causeway | 20.4% | 22.0% | 21.7% | 22.2% | 55.3% | 56.2% | 52.3% | 50.7% | 24.3% | 21.8% | 25.9% | 27.1% |
| Ulster | 26.7% | 27.9% | 28.3% | 26.5% | 41.8% | 42.2% | 42.8% | 42.5% | 31.5% | 30.0% | 28.9% | 31.0% |
| Craigavon Area | 34.8% | 36.8% | 37.1% | 35.4% | 38.2% | 40.1% | 38.7% | 39.8% | 27.0% | 23.1% | 24.2% | 24.8% |
| Daisy Hill | 28.9% | 36.1% | 33.7% | 35.1% | 43.0% | 42.8% | 44.2% | 42.9% | 28.0% | 21.1% | 22.1% | 22.0% |
| Altnagelvin Area | 31.3% | 41.3% | 36.9% | 36.6% | 35.4% | 34.5% | 35.5% | 37.4% | 33.4% | 24.2% | 27.5% | 26.0% |
| South West Acute | 17.4% | 18.6% | 19.5% | 19.8% | 44.4% | 49.1% | 47.0% | 46.2% | 38.2% | 32.3% | 33.4% | 34.0% |
| Type 1 | 25.5% | 28.5% | 27.5% | 27.3% | 43.4% | 44.5% | 44.6% | 44.7% | 31.2% | 27.0% | 27.9% | 28.1% |
| Eye Casualty | 2.1% | 2.5% | 3.3% | 1.8% | 17.2% | 17.9% | 23.7% | 23.0% | 80.7% | 79.6% | 73.1% | 75.3% |
| Lagan Valley | 4.8% | 6.2% | 5.3% | 5.6% | 25.1% | 27.1% | 23.5% | 19.8% | 70.1% | 66.7% | 71.3% | 74.6% |
| Type 2 | 4.0% | 5.3% | 4.7% | 4.7% | 22.8% | 24.7% | 23.5% | 20.6% | 73.2% | 70.0% | 71.7% | 74.8% |
| Mid Ulster | 1.7% | 0.8% | 0.8% | 1.7% | 26.3% | 23.1% | 13.1% | 21.7% | 72.0% | 76.0% | 86.1% | 76.5% |
| Ards | 0.0% | 0.0% | 0.0% | 0.1% | 0.1% | 0.0% | 0.0% | 0.2% | 99.9% | 100.0% | 100.0% | 99.7% |
| Bangor | - | - | - | - | - | - | - | - | - | - | - | - |
| South Tyrone | 0.4% | 0.4% | 0.4% | 0.2% | 1.8% | 1.3% | 0.9% | 0.6% | 97.8% | 98.3% | 98.7% | 99.2% |
| Omagh | 1.0% | 1.4% | 1.3% | 0.2% | 2.7% | 3.8% | 4.8% | 3.2% | 96.3% | 94.8% | 93.9% | 96.6% |
| Type 3 | 0.5% | 0.7% | 0.6% | 0.2% | 2.4% | 2.5% | 2.5% | 2.0% | 97.1% | 96.8% | 96.9% | 97.8% |
| Northern Ireland | 22.5% | 25.5% | 24.5% | 24.3% | 39.3% | 40.5% | 40.6% | 40.5% | 38.2% | 34.0% | 34.8% | 35.2% |

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

⁵¹ Data on the triage level of those attending ED are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and time spent in ED.

Appendix 5: Further Information

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

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

☎ Tel: 028 90 522504

✉ Email: Statistics@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:

[DoH Statistics and Research](#)