

INFORMATION
ANALYSIS
DIRECTORATE



Urgent & Emergency Care Waiting Time Statistics for Northern Ireland (April – June 2023)

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An Roinn Sláinte

Mánnystrie O Poustie

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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

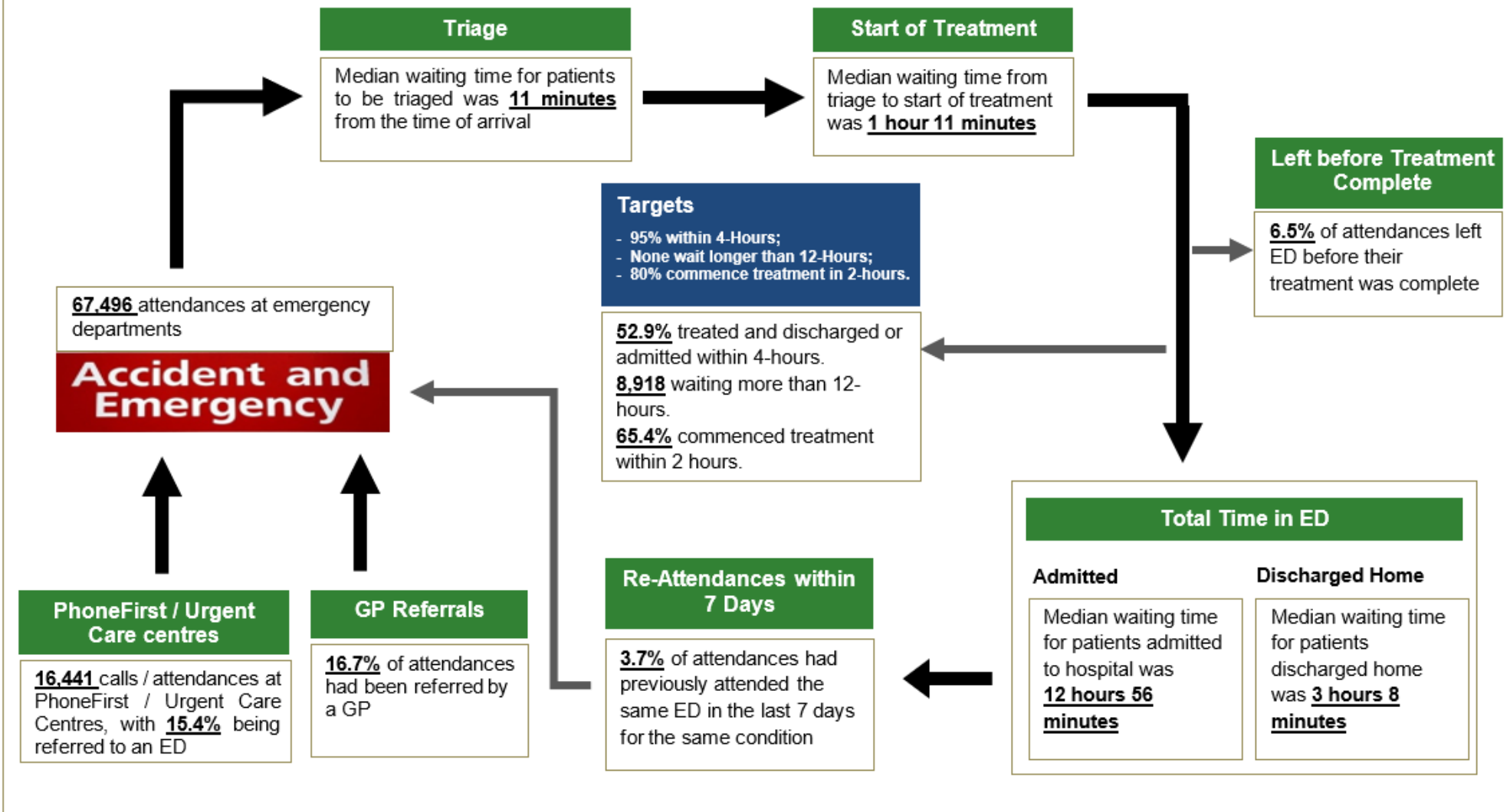
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¹ Information on Security and Confidentiality Processes is detailed in the Technical Notes on page 3.

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SUMMARY OF KEY FACTS (June 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 April, May and June 2023.

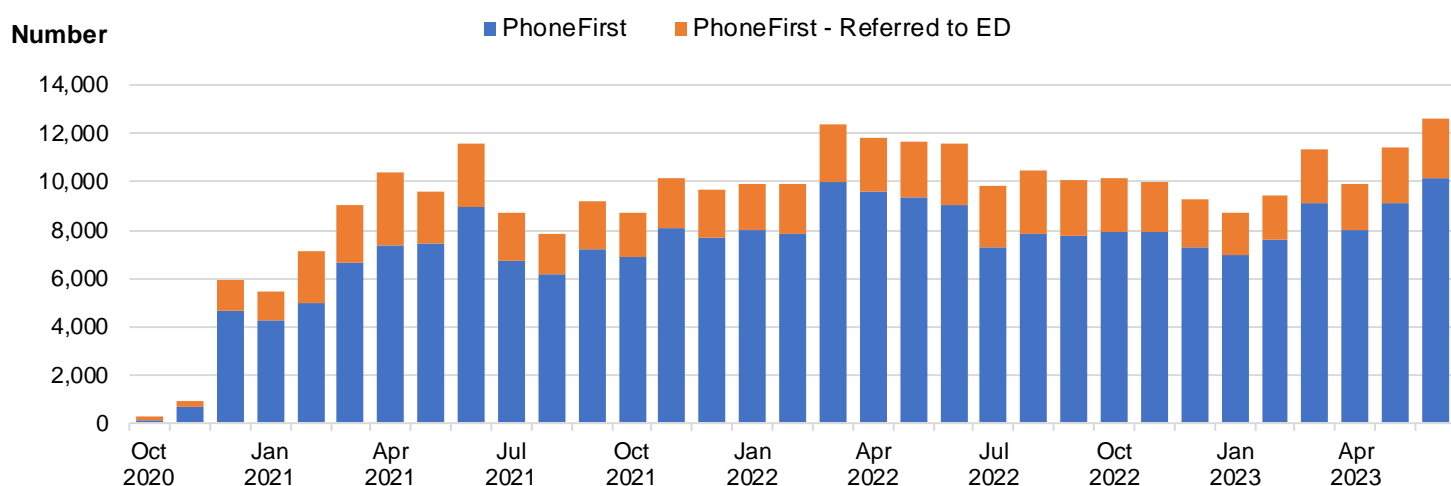
Activity	Apr 2023	May 2023	Jun 2023
PhoneFirst	9,916	11,407	12,587
Urgent Care Centre	3,064	3,646	3,854
Total Calls / Attendances	12,980	15,053	16,441
Number Referred to ED	1,992	2,385	2,529
% Referred to ED	15.3%	15.8%	15.4%

Source: Health and Social Care Trusts

- In June 2023, 16,441 calls / attendances were received by PhoneFirst and Urgent Care Centre services, from patients who may previously have attended an ED. A total of 2,529 (15.4%) resulted in an attendance at an ED, whilst 13,912 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 June 2023.



Source: Health and Social Care Trusts

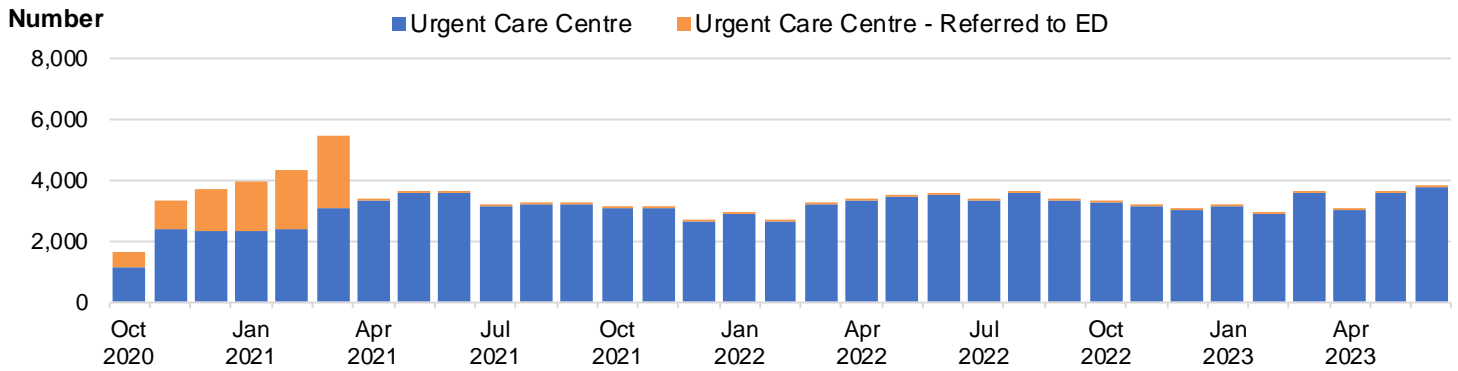
² Data on PhoneFirst Calls, Urgent Care Centre Attendances and subsequent referrals to ED are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity. Data is sourced from the HSC Trusts.

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.

The highest number of PhoneFirst calls were received in June 2023 (12,587), with the highest number of referrals to ED from PhoneFirst in April 2021 (3,087) (Figure 1, Table 1 & 11A).

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 June 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 June 2023, compared with the same month last year.

Measure	June 2022	June 2023	Change (number)	Change (%)
1. PhoneFirst / Urgent Care Centre (Referred to an ED)	2,637	2,529	-108	-4.1%
2. PhoneFirst / Urgent Care Centre (NOT Referred to an ED)	12,506	13,912	1,406	11.2%
3. Total PhoneFirst / Urgent Care Centre Measure 1 + Measure 2	15,143	16,441	1,298	8.6%
4. New ED Attendances	60,112	63,749	3,637	6.1%
5. Unplanned Review Attendances	3,416	3,747	331	9.7%
6. Attendances at EDs Measure 4 + Measure 5	63,528	67,496	3,968	6.2%
7. Attendances at EDs / PhoneFirst / Urgent Care Measure 2 + Measure 4 + Measure 5	76,034	81,408	5,374	7.1%
8. Number of ED Attendances Admitted to Hospital	11,024	11,538	514	4.7%
9. % ED Attendances Admitted to Hospital Measure 8 / Measure 6	17.4%	17.1%		0.3%

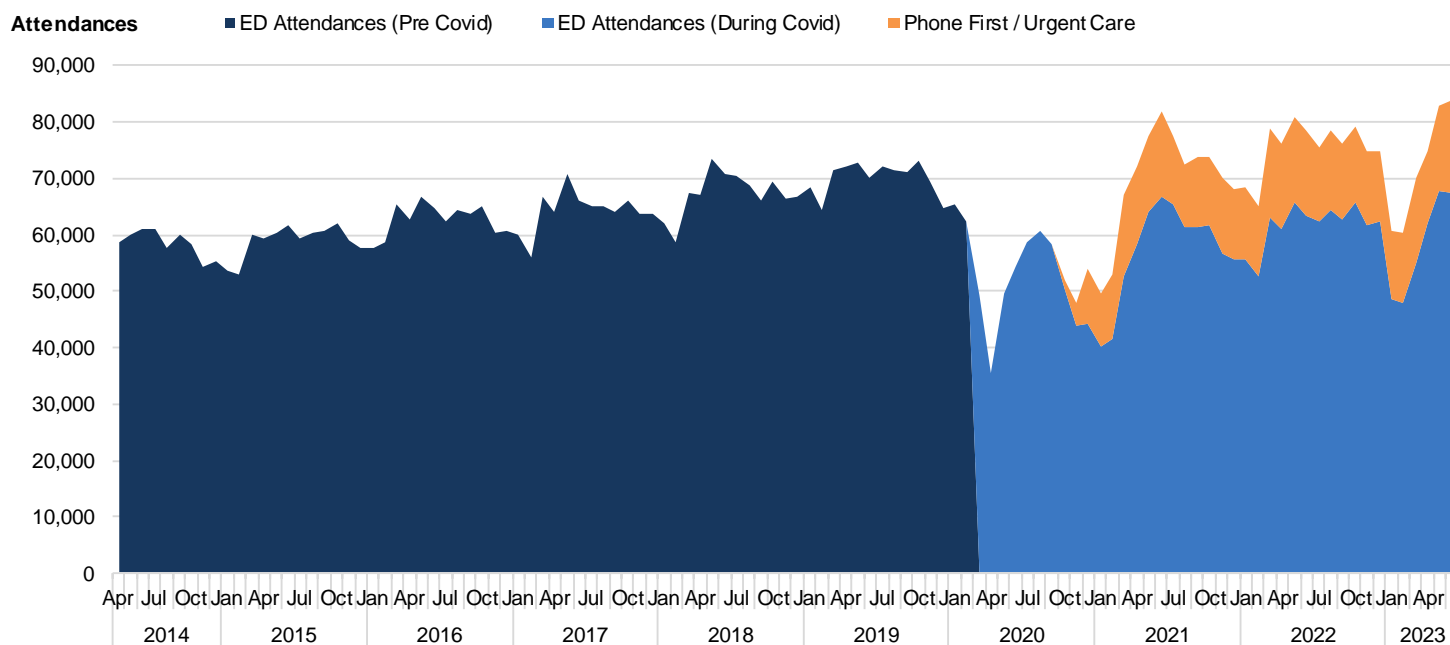
Source: Regional Data Warehouse / Health and Social Care Trusts

- During June 2023, 81,408 patients attended urgent and emergency care services, of which 67,496 attended an ED, and 13,912 attended PhoneFirst / Urgent Care Centre services (Table 2, 11A & 11B).
- The number of patients attending urgent and emergency care services increased by 5,374 (7.1%) in June 2023 when compared with June 2022. Of these additional attendances / calls at urgent and emergency care services (5,374), 73.8% (3,968) related to ED attendances (Table 2, 11A & 11B).
- During the quarter ending June 2023, 234,745 patients attended urgent and emergency care services, 2.8% (6,481) more than the same quarter in 2022 (228,264). Of which, 197,177 (84.0%) attended an ED and 37,568 (16.0%) 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 Centres each month, from April 2014 to June 2023⁴.



Source: Regional Data Warehouse

- Between April 2014 and June 2023, the highest number of patients attending urgent and emergency care was in June 2023 (83,937), with 67,496 (80.4%) attending an ED and 16,441 (19.6%) attending PhoneFirst / Urgent Care Centres (Table 2, Table 11A).
- The number of patients attending urgent care services (PhoneFirst / Urgent Care Centre) in April, May and June 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 April 2023, there were 12,980 PhoneFirst calls / Urgent Care Centre attendances, 14.7% (2,240) less than April 2022 (15,220); and,
 - During May 2023, there were 15,053 PhoneFirst calls / Urgent Care Centre attendances, 0.8% (118) less than May 2022 (15,171); and,
 - During June 2023, there were 16,441 PhoneFirst calls / Urgent Care Centre attendances, 8.6% (1,298) more than June 2022 (15,143).

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 June 2023, compared with the same month last year.

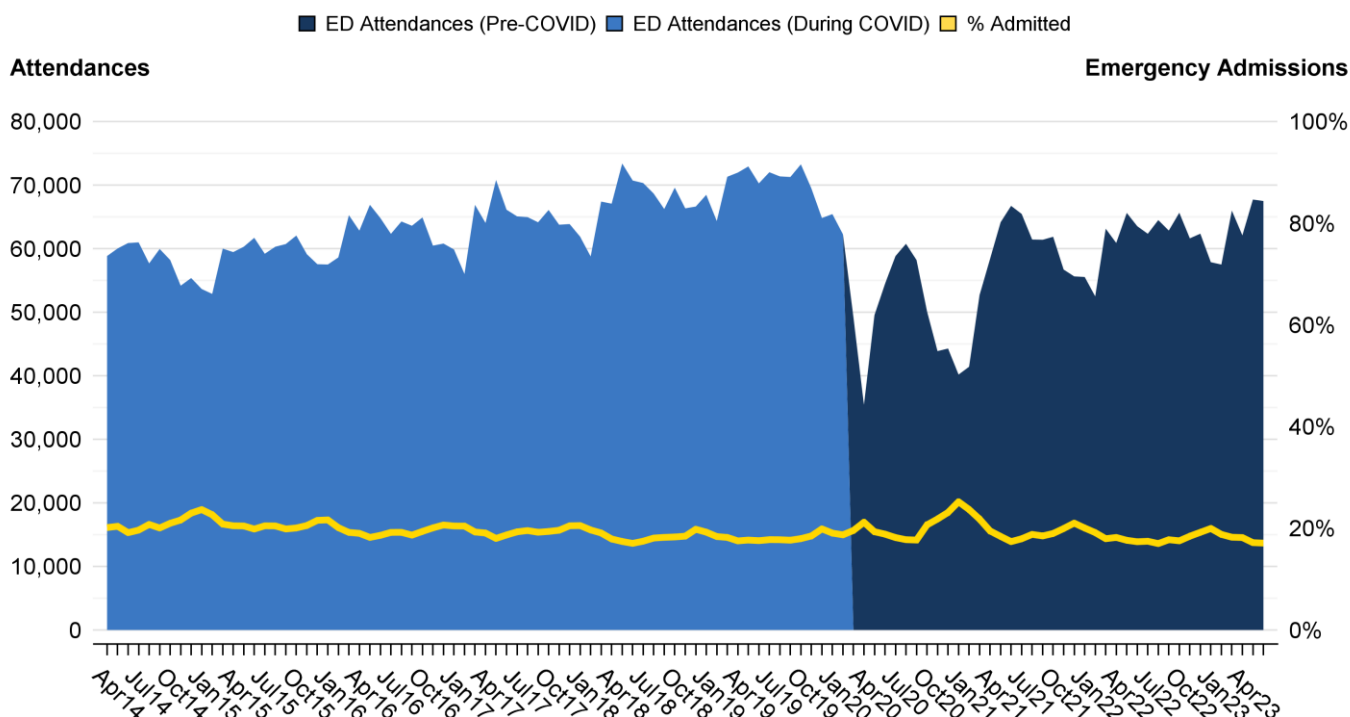
Measure	June 2022	June 2023	Change (Number)	Change (%)
1. Attendances at EDs	63,528	67,496	3,968	6.2%
2. Admissions to Hospital from ED	11,024	11,538	514	4.7%
3. % Admissions to Hospital from ED <i>Measure 2 / Measure 1</i>	17.4%	17.1%	-	-

Source: Regional Data Warehouse

- The number of emergency admissions to hospital from an ED increased by 4.7% (514) between June 2022 (11,024) and June 2023 (11,538) (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 June 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 nine 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 April, May and June 2023 increased when compared with the same month of the previous year (Figure 4, Table 11B).
 - During April 2023, there were 61,961 attendances at EDs, 1.8% (1,069) more than April 2022 (60,892);
 - During May 2023, there were 67,720 attendances at EDs, 3.2% (2,099) more than May 2022 (65,621); and,
 - During June 2023, there were 67,496 attendances at EDs, 6.2% (3,968) more than June 2022 (63,528).

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 June 2023 and the same month last year.

Department	New		Unplanned Review		Total	
	Jun 2022	Jun 2023	Jun 2022	Jun 2023	Jun 2022	Jun 2023
Mater	2,919	3,542	68	113	2,987	3,655
Royal Victoria	6,834	8,247	200	179	7,034	8,426
RBHSC	3,885	3,553	332	314	4,217	3,867
Antrim Area	7,324	8,122	391	507	7,715	8,629
Causeway	3,819	3,987	216	341	4,035	4,328
Ulster	8,476	9,100	326	415	8,802	9,515
Craigavon Area	6,468	6,433	536	591	7,004	7,024
Daisy Hill	4,538	4,365	219	200	4,757	4,565
Altnagelvin Area	5,404	5,300	411	358	5,815	5,658
South West Acute	2,962	3,123	343	334	3,305	3,457
Type 1	52,629	55,772	3,042	3,352	55,671	59,124
Type 2	2,595	2,535	217	137	2,812	2,672
Type 3	4,888	5,442	157	258	5,045	5,700
Northern Ireland	60,112	63,749	3,416	3,747	63,528	67,496

Source: Regional Data Warehouse

- Between June 2022 and June 2023, attendances at Type 1 and Type 3 EDs increased, whilst attendances at Type 2 EDs decreased (Table 4, Table 11B).
- The Ulster was the busiest ED during both June 2022 (8,802) and June 2023 (9,515) (Table 4, Table 11B).
- Seven of the ten Type 1 EDs reported an increase in attendances during June 2023 when compared with June 2022, with the largest increase in attendances reported at the Royal Victoria (1,392, 19.8%) (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 June 2023 and the same month last year^{7,8}.

Department	Level 1 / 2		Level 3		Level 4 / 5	
	Jun 2022	Jun 2023	Jun 2022	Jun 2023	Jun 2022	Jun 2023
Mater	21.3%	19.2%	45.8%	47.7%	32.9%	33.1%
Royal Victoria	28.0%	27.2%	48.5%	46.7%	23.5%	26.1%
RBHSC	15.3%	15.2%	26.2%	26.5%	58.5%	58.4%
Antrim Area	16.8%	19.2%	53.6%	55.0%	29.6%	25.8%
Causeway	20.2%	19.1%	57.0%	49.1%	22.8%	31.8%
Ulster	25.2%	24.5%	41.5%	39.0%	33.3%	36.4%
Craigavon Area	32.2%	32.7%	38.2%	36.6%	29.6%	30.7%
Daisy Hill	29.4%	31.5%	44.7%	44.3%	25.9%	24.1%
Altnagelvin Area	33.8%	32.3%	35.5%	35.7%	30.7%	32.0%
South West Acute	18.6%	16.6%	44.2%	41.3%	37.2%	42.0%
Type 1	25.1%	24.8%	43.3%	42.5%	31.7%	32.7%
Type 2	5.0%	4.8%	21.7%	20.5%	73.3%	74.6%
Type 3	0.6%	0.5%	1.9%	1.7%	97.5%	97.8%
Northern Ireland	22.3%	22.1%	39.2%	38.3%	38.5%	39.6%

Source: Regional Data Warehouse

- Over two thirds (67.3%) of attendances at Type 1 departments in June 2023 were triaged as level 1 / 2 or 3, compared with 68.3% in June 2022 (Table 5, Table 11L).
- More than a fifth (22.1%) of patients were triaged as level 1 / 2 in June 2023, less than in April (24.0%) and May 2023 (23.2%), and less than in June 2022 (22.3%) (Table 11L).
- During June 2023, almost a third (32.7%) of patients attending Craigavon Area were triaged at level 1 / 2, compared with 15.2% of those attending RBHSC (Table 5, Table 11L).

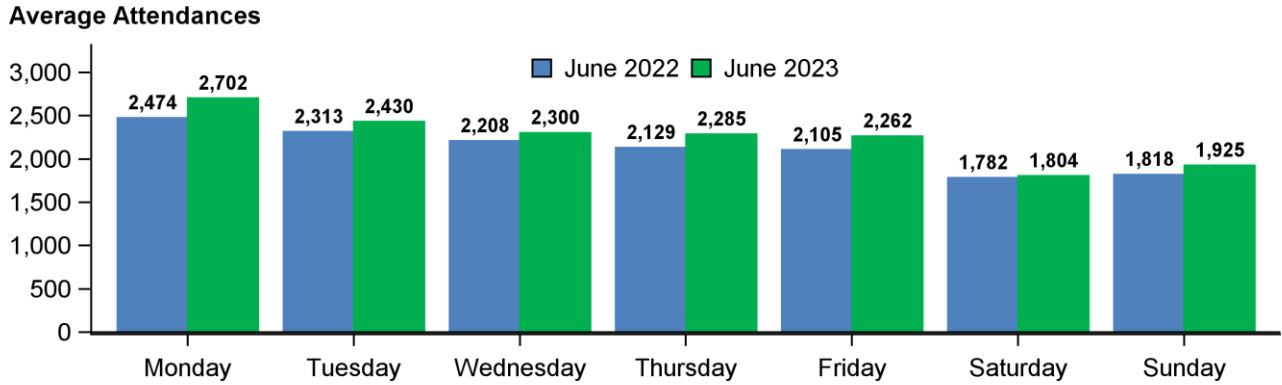
⁶ Data are not National Statistics, but are published to provide users with a comprehensive view of ED activity and time spent in ED.

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

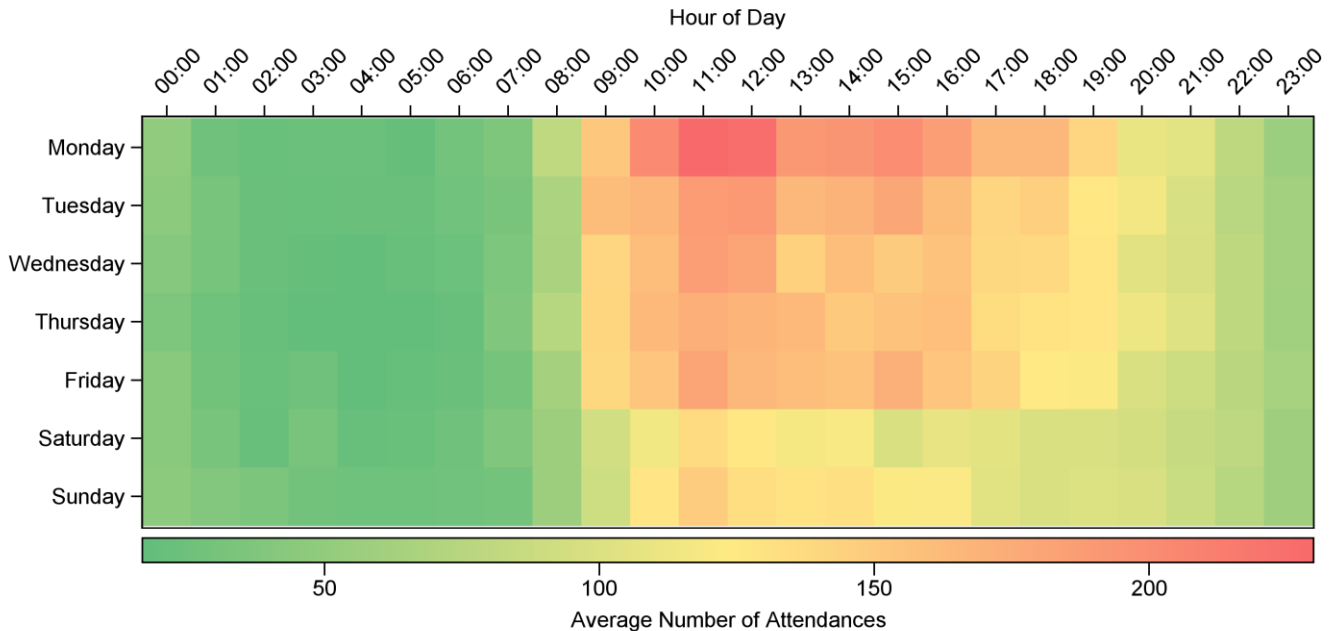
The average number of new and unplanned review attendances at EDs by day of the week during June 2023, compared with the same month last year⁸.



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 June 2023.



Source: Regional Data Warehouse

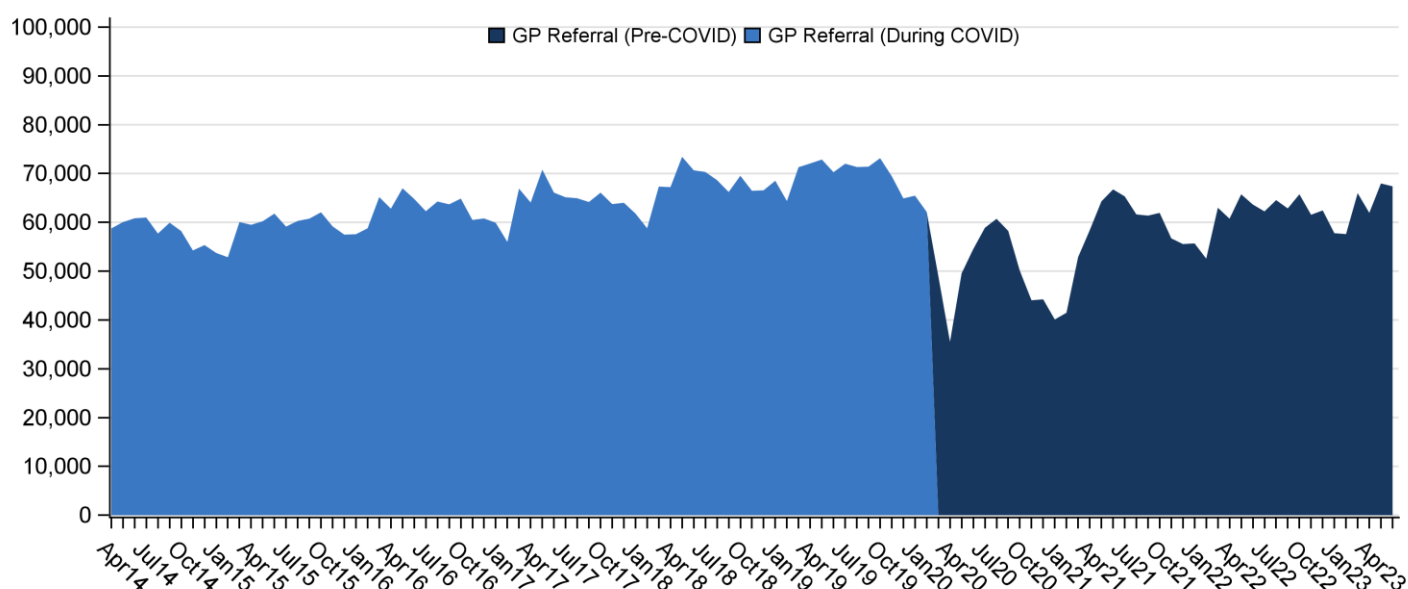
⁸ Data on when patients attend ED are not National Statistics, but have been published to provide users with a comprehensive view of emergency care activity and time spent in ED.

- Monday was the busiest day at EDs during both June 2022 and June 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 June 2023 (1,804) and June 2022 (1,782), with the highest number of attendances arriving between 11:00 and 11:59 in June 2023 (Figure 5 & 6, Table 11I).
- Overall, the busiest hour of the day during June 2023 was between 11:00 and 11:59, whilst the least busy hour was 04:00 to 04:59 (Figure 6).

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

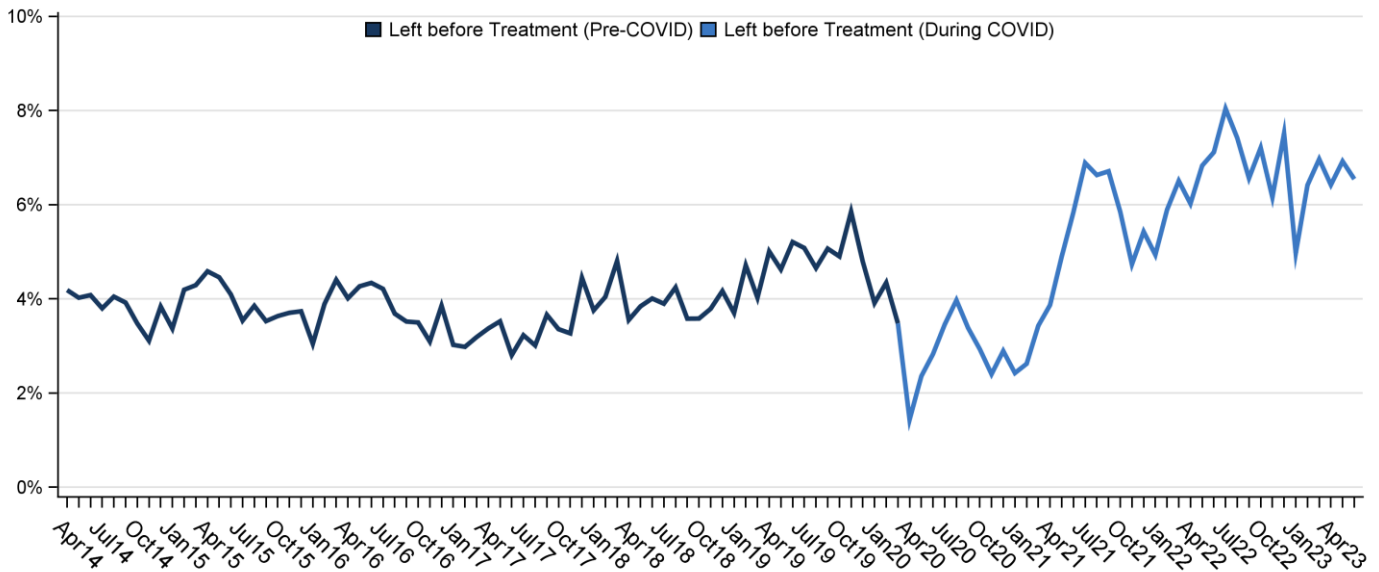
- In June 2023, over a sixth (16.7%, 11,226) of attendances at EDs had been referred by a GP, compared with 15.9% (10,108) in June 2022 (Figure 7, Table 11D(i) & (ii)).
- Over a quarter (27.5%, 2,362) of attendances at Antrim Area had been referred by a GP during June 2023, compared with 8.1% (297) of 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

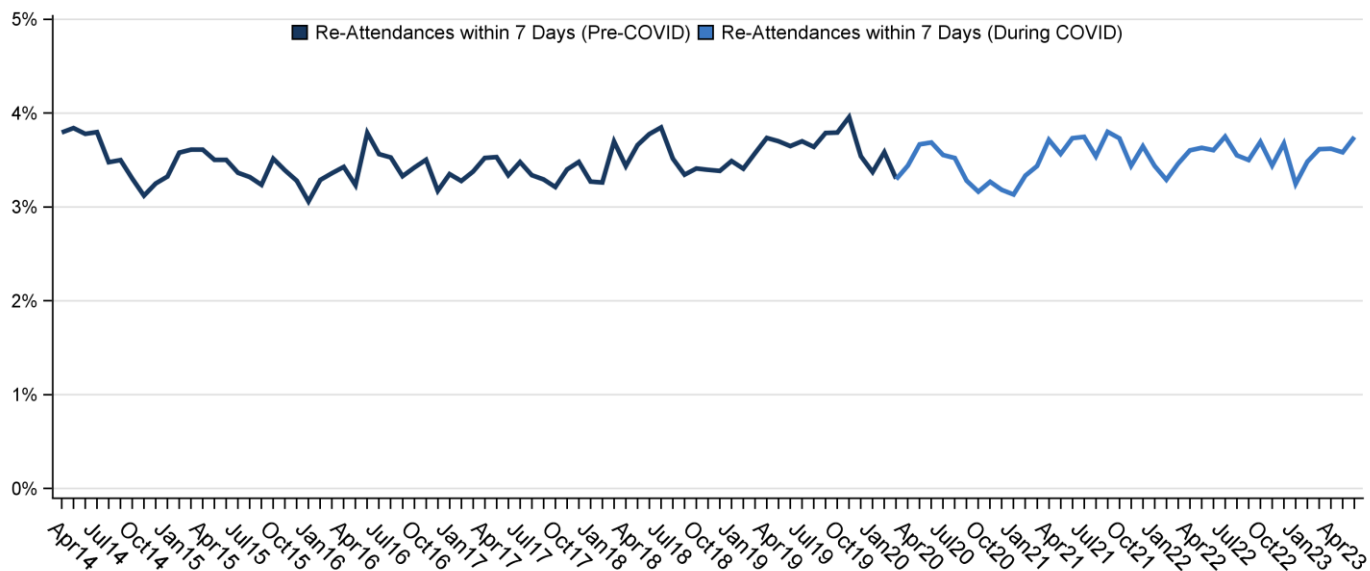
- During June 2023, 6.5% (4,417) of all ED attendances left before their treatment was complete, compared with 7.1% (4,520) in June 2022 (Figure 8, Table 11D(i-ii)).
- Craigavon Area (10.9%, 763) reported the highest percentage leaving ED before treatment was complete during June 2023, compared with 10.2% (711) in June 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 June 2023, 3.7% (2,524) of attendances had attended the same ED within 7 days of their original attendance, compared to 3.6% (2,295) in June 2022 (Figure 9, Tables 11D(i) & 11D(ii)).
- South West Acute (7.3%, 250) reported the highest percentage of unplanned review attendances within 7 days of the original attendance during June 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 2023/24 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 2024, 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 June 2022.

% Within 4 Hours	Jun 2022	Apr 2023	May 2023	Jun 2023	Diff (Jun 2022 - Jun 2023)	
					No.	%
Type 1	45.7%	43.4%	44.4%	47.2%	-	1.5%
Type 2	80.2%	74.2%	79.2%	82.8%	-	2.7%
Type 3	99.4%	98.7%	97.0%	98.2%	-	-1.2%
All Departments	51.5%	49.1%	50.3%	52.9%	-	1.4%
Over 12 Hours	Jun 2022	Apr 2023	May 2023	Jun 2023	Diff (Jun 2022 - Jun 2023)	
					No.	%
Type 1	8,191	9,092	9,199	8,918	727	-
Type 2	2	1	1	0	-2	-
Type 3	0	0	0	0	0	-
All Departments	8,193	9,093	9,200	8,918	725	-
ED Attendances	Jun 2022	Apr 2023	May 2023	Jun 2023	Diff (Jun 2022 - Jun 2023)	
					No.	%
Type 1	55,671	54,509	59,298	59,124	3,453	6.2%
Type 2	2,812	2,443	2,719	2,672	-140	-5.0%
Type 3	5,045	5,009	5,703	5,700	655	13.0%
All Departments	63,528	61,961	67,720	67,496	3,968	6.2%

Source: Regional Data Warehouse

- More than half (52.9%) of attendances in June 2023 were discharged or admitted within 4 hours, compared with 51.5% in June 2022 (Table 11C & 11J).
- Almost half (47.2%) of attendances at Type 1 EDs in June 2023 spent less than 4 hours in ED, compared with 82.8% at Type 2 EDs and 98.2% at Type 3 EDs (Table 6, Table 11C & 11J).
- Between June 2022 and June 2023, the number spending over 12 hours in ED increased from 8,193 to 8,918, accounting for 13.2% of all attendances in June 2023 (Table 6, Table 11C & 11J).
- During this period, EDs experienced a 6.2% increase in attendances (63,528 to 67,496), whilst 4 hour performance increased from 51.5% to 52.9% (Table 6, Table 11C & 11J).
- During the quarter ending 30 June 2023, more than half (50.8%) of patients spent less than 4 hours at an ED, compared with 52.2% 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 June 2023 (52.9%) and lowest in April 2023 (49.1%), whilst the number spending over 12 hours in an ED was highest in May 2023 (9,200) and lowest in June 2023 (8,918) (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 June 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	
	Jun 2022	Jun 2023	Jun 2022	Jun 2023	Jun 2022	Jun 2023
Mater	45.9%	50.8%	386	337	2,987	3,655
Royal Victoria	26.3%	35.4%	1,766	2,033	7,034	8,426
RBHSC	63.5%	72.0%	20	11	4,217	3,867
Antrim Area	46.1%	48.9%	1,053	1,230	7,715	8,629
Causeway	55.2%	54.5%	458	431	4,035	4,328
Ulster	46.8%	45.3%	1,515	1,488	8,802	9,515
Craigavon Area	42.6%	39.1%	1,325	1,761	7,004	7,024
Daisy Hill	58.8%	56.9%	281	315	4,757	4,565
Altnagelvin Area	33.3%	36.3%	1,049	965	5,815	5,658
South West Acute	58.0%	57.6%	338	347	3,305	3,457
Type 1	45.7%	47.2%	8,191	8,918	55,671	59,124
Type 2	80.2%	82.8%	2	0	2,812	2,672
Type 3	99.4%	98.2%	0	0	5,045	5,700
Northern Ireland	51.5%	52.9%	8,193	8,918	63,528	67,496

Source: Regional Data Warehouse

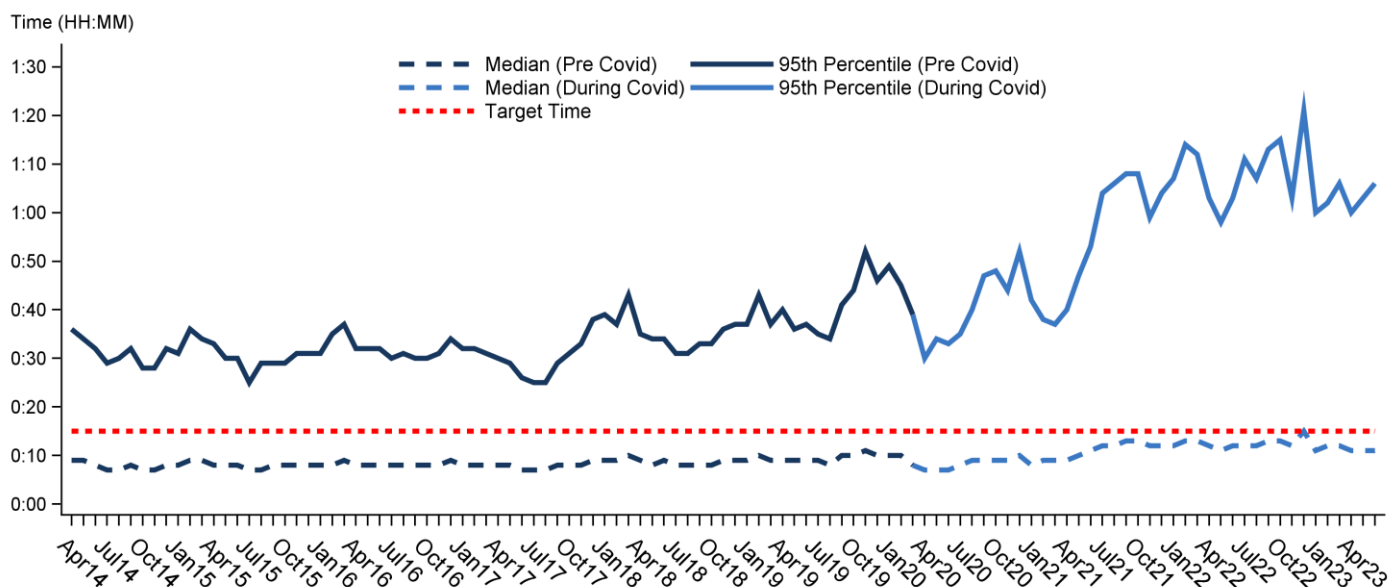
- During June 2023, RBHSC (72.0%) reported the highest performance of the four hour target at any Type 1 ED, whilst the Royal Victoria (35.4%) reported the lowest (Table 7, Table 11C).
- No Type 1 ED achieved the 12-hour target during June 2023 (Table 7, Table 11C).
- The Royal Victoria (2,033) reported the highest number of patients spending over 12 hours at an ED during June 2023 (Table 7, Table 11C).
- Between June 2022 and June 2023, performance against the 12 hour target declined at five 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 June 2023¹⁴.



Source: Regional Data Warehouse

- During June 2023, the median time spent in ED from arrival to triage was 11 minutes, 1 minute less than in June 2022 (12 minutes) (Figure 10, Table 11E).
- 95 percent of patients were triaged within 1 hour 6 minutes of their arrival at an ED in June 2023, 3 minutes more than June 2022 (1 hour 3 minutes) (Figure 10, Table 11E).
- Over three fifths (60.5%) of attendances were triaged within 15 minutes of their arrival at an ED during June 2023, compared with 59.8% in June 2022 (Table 11E).
- During the quarter ending 30 June 2023, the median time from arrival to triage was the same during April, May and June 2023 (11 minutes), whilst the time taken to triage 95 percent of patients was longest in June 2023 (1 hour 6 minutes) and shortest in April 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 April to June 2023, compared with June last year. Information has also been included on the overall performance at Type 2 and 3 EDs during this period.

Department	Jun 2022	Apr 2023	May 2023	Jun 2023
Mater	56.2%	63.0%	62.3%	64.1%
Royal Victoria	49.5%	44.8%	44.8%	48.2%
RBHSC	62.8%	71.1%	72.9%	75.1%
Antrim Area	47.8%	42.6%	43.7%	53.2%
Causeway	63.9%	61.0%	63.8%	61.6%
Ulster	67.0%	65.1%	66.6%	63.8%
Craigavon Area	53.0%	56.5%	53.3%	55.9%
Daisy Hill	73.9%	73.9%	74.5%	77.3%
Altnagelvin Area	45.8%	48.0%	44.4%	50.2%
South West Acute	84.5%	77.0%	77.3%	80.9%
Type 1	59.2%	58.7%	58.7%	61.1%
Type 2	95.9%	96.5%	97.3%	98.7%
Type 3	99.1%	96.5%	94.4%	95.8%
Northern Ireland	63.7%	63.0%	63.2%	65.4%

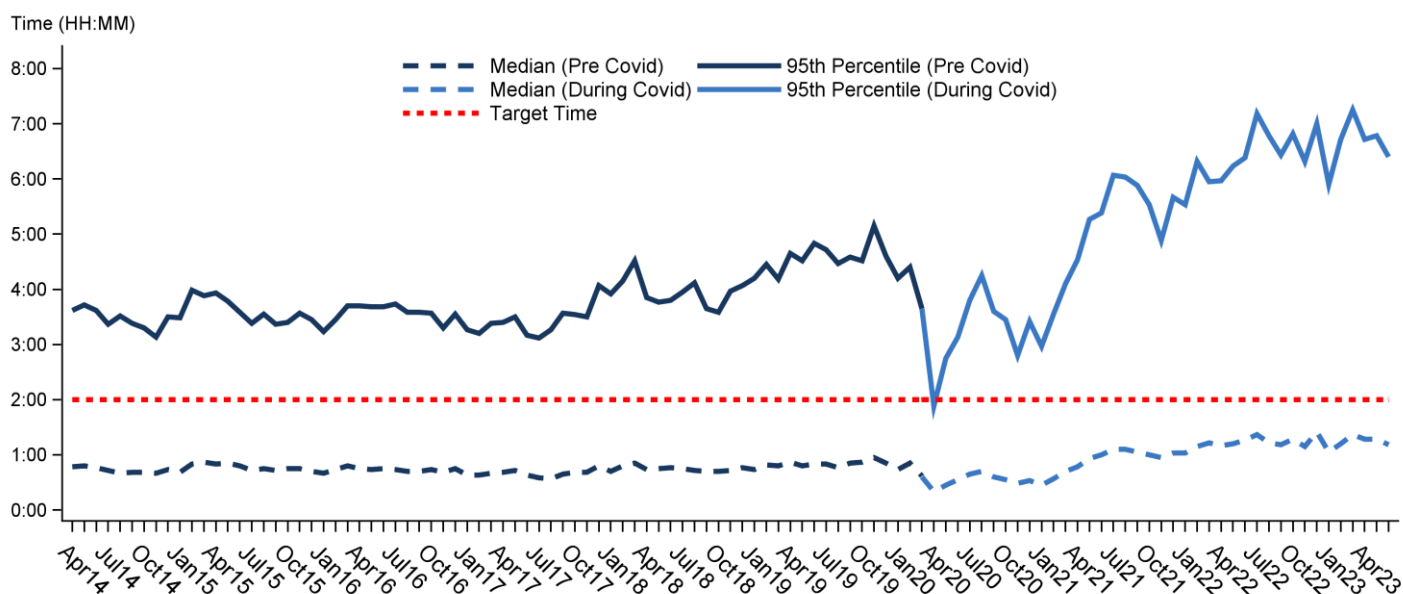
Source: Regional Data Warehouse

- Over two thirds (65.4%) of patients attending EDs in June 2023 commenced their treatment within 2 hours of being triaged, compared with 63.7% in June 2022 (Table 8, Table 11K).
- During June 2023, over three fifths (61.1%) of patients commenced their treatment within 2 hours of being triaged at Type 1 EDs, compared with 98.7% at Type 2 EDs and 95.8% at Type 3 EDs (Table 8, Table 11K).
- Only one Type 1 ED achieved the 80% target in June 2023 (Table 8, Table 11K).
- During June 2023, South West Acute (80.9%) reported the highest percentage commencing treatment within 2 hours, whilst the Royal Victoria (48.2%) reported the lowest (Table 8, Table 11K).
- Between April and June 2023, the highest percentage of patients commencing treatment within 2 hours was in June (65.4%) whilst the lowest was in April (63.0%), (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 June 2023 was 1 hour 11 minutes, 5 minutes less than June 2022 (1 hour 16 minutes) (Figure 11, Table 11F).
- During June 2023, 95 percent of patients commenced treatment within 6 hours 24 minutes of being triaged, 1 minute more than June 2022 (6 hours 23 minutes) (Figure 11, Table 11F).
- During the last 3 months, the median time to start of treatment was longest in April and May 2023 (1 hour 17 minutes) and shortest in June 2023 (1 hour 11 minutes), whilst the time within which 95 percent of patients started treatment was longest in May 2023 (6 hours 47 minutes) and shortest in June 2023 (6 hours 24 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 June 2023, compared with the same month last year¹⁶.

Department	Median (HH:MM)		95th Percentile (HH:MM)	
	June 2022	June 2023	June 2022	June 2023
Mater	1:42	1:17	6:24	5:55
Royal Victoria	2:03	2:06	8:46	10:08
RBHSC	1:34	1:03	4:22	3:47
Antrim Area	2:07	1:52	7:35	6:41
Causeway	1:29	1:30	4:24	4:37
Ulster	1:09	1:18	6:05	5:39
Craigavon Area	1:47	1:34	9:32	10:59
Daisy Hill	1:02	0:54	4:27	4:41
Altnagelvin Area	2:12	1:59	6:11	6:21
South West Acute	0:36	0:45	3:33	3:42
Type 1	1:31	1:26	6:41	6:46
Type 2	0:24	0:28	1:47	1:26
Type 3	0:04	0:05	0:50	1:37
Northern Ireland	1:16	1:11	6:23	6:24

Source: Regional Data Warehouse

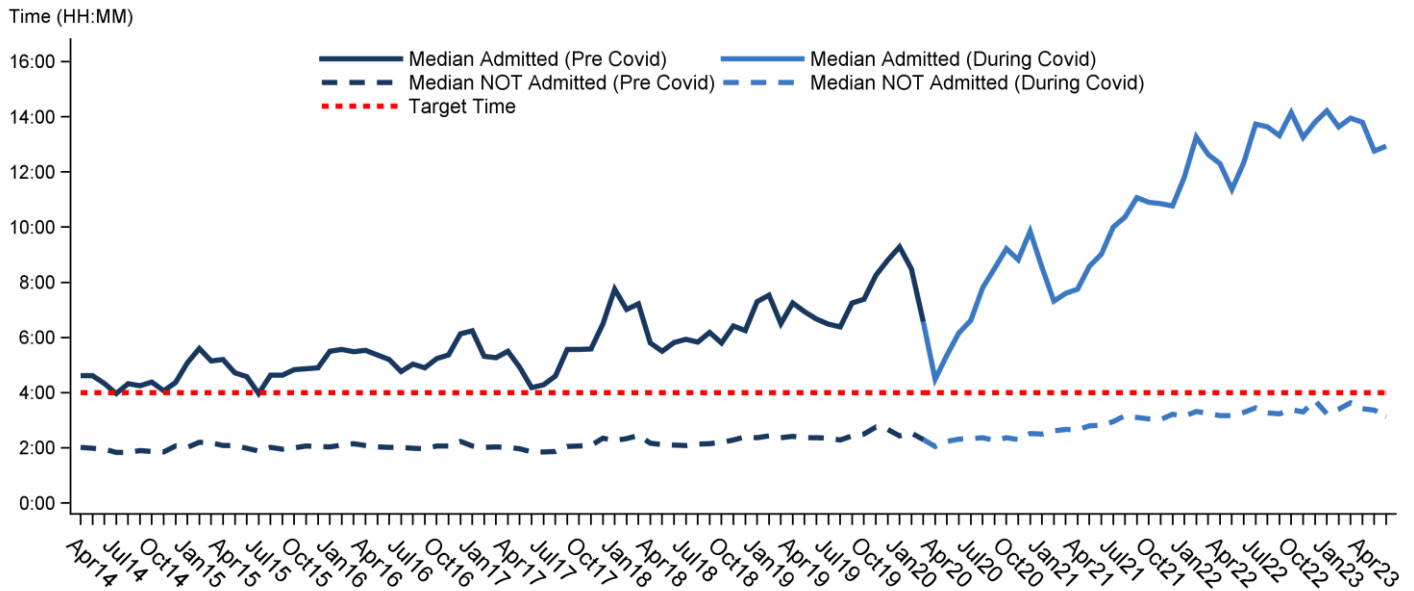
- The median time spent at Type 1 EDs from triage to start of treatment by a medical professional was 1 hour 26 minutes in June 2023, 5 minutes less than June 2022 (1 hour 31 minutes) (Table 9, Table 11F).
- The Royal Victoria (2 hour 6 minutes) reported the longest median time spent in ED from triage to start of treatment during June 2023, whilst South West Acute (45 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 10 hours 59 minutes of being triaged; 1 hour 27 minutes more than June 2022 (9 hours 32 minutes) (Table 9, Table 11F).
- South West Acute reported the shortest time to start of treatment during June 2023, with 95 percent of attendances commencing treatment within 3 hours 42 minutes of being triaged, 9 minutes more than the time taken in June 2022 (3 hour 33 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 June 2023, the median time patients admitted to hospital spent in ED was 12 hours 56 minutes, over four times longer than the median time for patients discharged home (3 hours 8 minutes) (Figure 12, Table 11G & 11H).
- During the quarter ending 30 June 2023, the median time patients admitted spent in ED was longest in April 2023 (13 hours 45 minutes) and shortest in May 2023 (12 hours 45 minutes) (Table 11G).
- During this period, the median time spent by patients discharged home was longest in April 2023 (3 hours 25 minutes) and shortest in June 2023 (3 hours 8 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 June 2022 and June 2023.

Department	Admitted				Discharged			
	Median (HH:MM)		95th Percentile (HH:MM)		Median (HH:MM)		95th Percentile (HH:MM)	
	Jun 2022	Jun 2023	Jun 2022	Jun 2023	Jun 2022	Jun 2023	Jun 2022	Jun 2023
Mater	11:36	10:56	37:15	29:06	3:37	3:20	11:50	10:02
Royal Victoria	14:39	13:34	40:39	42:49	5:50	4:49	20:55	18:46
RBHSC	5:02	4:35	9:50	9:14	3:06	2:41	7:01	6:22
Antrim Area	9:36	11:24	53:53	48:33	3:50	3:34	15:05	14:23
Causeway	12:10	10:15	43:35	45:35	3:17	3:20	9:35	9:40
Ulster	17:31	16:29	42:13	49:56	3:25	3:37	10:12	10:19
Craigavon Area	14:27	20:22	39:48	51:59	3:51	4:09	13:35	15:04
Daisy Hill	8:46	9:51	26:22	29:26	2:54	2:55	8:48	8:53
Altnagelvin Area	19:52	17:17	44:49	53:00	4:47	4:36	15:05	14:34
South West Acute	8:28	9:06	36:34	31:08	3:05	3:13	10:34	10:31
Type 1	12:35	13:11	42:02	47:48	3:45	3:37	12:48	13:06
Type 2	5:22	4:56	9:53	8:26	1:50	1:55	5:36	5:29
Type 3	2:39	2:39	6:18	3:48	0:36	0:38	1:52	2:42
Northern Ireland	12:20	12:56	41:55	47:39	3:17	3:08	11:52	12:07

Source: Regional Data Warehouse

- The median time patients who were admitted to hospital spent in a Type 1 ED was 13 hours 11 minutes in June 2023, 36 minutes more than the same month last year (12 hours 35 minutes) (Table 10, Table 11G).
- The median time patients discharged home (not admitted) spent in a Type 1 ED was 3 hours 37 minutes in June 2023, 8 minutes less than the time taken during the same month last year (3 hours 45 minutes) (Table 10, Table 11H).
- 95 percent of patients were admitted to hospital within 47 hours 48 minutes at Type 1 EDs in June 2023, 5 hours 46 minutes more than in June 2022 (42 hours 2 minutes) (Table 10, Table 11G).
- In June 2023, 95 percent of attendances at Type 1 EDs were discharged home within 13 hours 6 minutes of their arrival, 18 minutes more than the time taken in June 2022 (12 hours 48 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

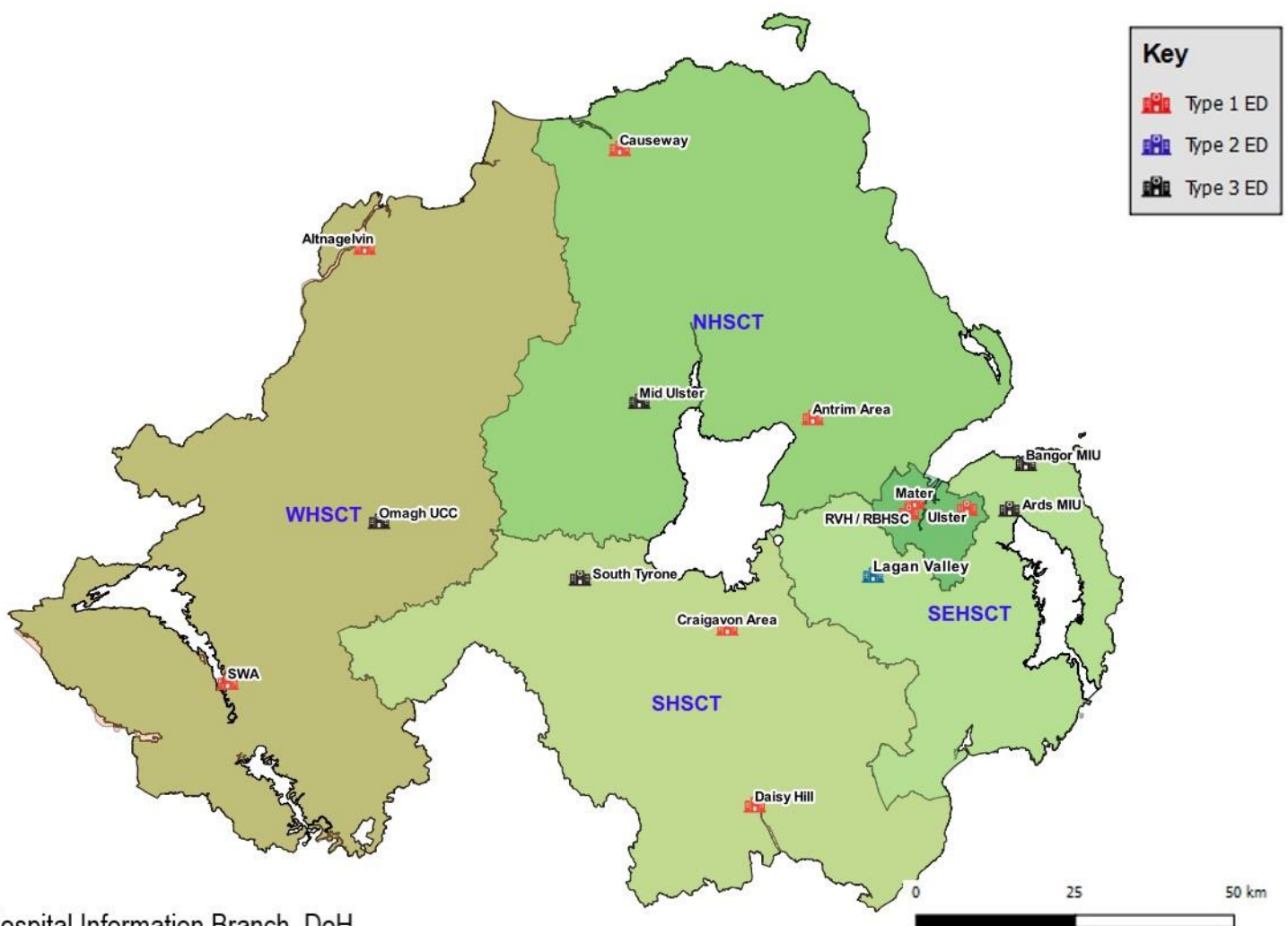
There are three separate categories of emergency care facility included in this publication:

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			
	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023
Belfast	-	-	-	-	2,077	1,457	1,686	1,838	2,077	1,457	1,686	1,838	-	-	-	-
Northern	3,101	1,333	1,822	2,006	-	-	-	-	3,101	1,333	1,822	2,006	428	222	312	319
South Eastern	2,807	3,125	3,270	3,398	1,282	1,307	1,536	1,569	4,089	4,432	4,806	4,967	411	423	441	432
Southern	4,710	4,807	5,617	6,540	198	300	424	447	4,908	5,107	6,041	6,987	1,381	1,026	1,241	1,438
Western	968	651	698	643	-	-	-	-	968	651	698	643	498	339	391	340
Northern Ireland	11,586	9,916	11,407	12,587	3,557	3,064	3,646	3,854	15,143	12,980	15,053	16,441	2,290	2,010	2,385	2,529

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: April - June 2023

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

Department	New Attendances				Unplanned Reviews				Total Attendances			
	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023
Mater	2,919	3,278	3,565	3,542	68	66	119	113	2,987	3,344	3,684	3,655
Royal Victoria	6,834	6,608	7,216	8,247	200	151	166	179	7,034	6,759	7,382	8,426
RBHSC	3,885	3,333	3,837	3,553	332	301	328	314	4,217	3,634	4,165	3,867
Antrim Area	7,324	7,679	8,351	8,122	391	452	418	507	7,715	8,131	8,769	8,629
Causeway	3,819	3,726	4,177	3,987	216	304	416	341	4,035	4,030	4,593	4,328
Ulster	8,476	8,442	8,879	9,100	326	386	388	415	8,802	8,828	9,267	9,515
Craigavon Area	6,468	6,165	6,630	6,433	536	520	559	591	7,004	6,685	7,189	7,024
Daisy Hill	4,538	4,314	4,748	4,365	219	171	210	200	4,757	4,485	4,958	4,565
Altnagelvin Area	5,404	5,123	5,561	5,300	411	298	352	358	5,815	5,421	5,913	5,658
South West Acute	2,962	2,922	3,103	3,123	343	270	275	334	3,305	3,192	3,378	3,457
Type 1	52,629	51,590	56,067	55,772	3,042	2,919	3,231	3,352	55,671	54,509	59,298	59,124
Eye Casualty	614	508	479	428	166	49	44	46	780	557	523	474
Lagan Valley	1,981	1,819	2,121	2,107	51	67	75	91	2,032	1,886	2,196	2,198
Type 2	2,595	2,327	2,600	2,535	217	116	119	137	2,812	2,443	2,719	2,672
Mid Ulster	568	560	599	630	14	15	11	11	582	575	610	641
Ards	960	879	1,023	965	0	11	30	41	960	890	1,053	1,006
Bangor	-	-	-	-	-	-	-	-	-	-	-	-
South Tyrone	1,818	1,794	2,057	1,992	26	19	12	16	1,844	1,813	2,069	2,008
Omagh	1,542	1,538	1,778	1,855	117	193	193	190	1,659	1,731	1,971	2,045
Type 3	4,888	4,771	5,457	5,442	157	238	246	258	5,045	5,009	5,703	5,700
Northern Ireland	60,112	58,688	64,124	63,749	3,416	3,273	3,596	3,747	63,528	61,961	67,720	67,496

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			
	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023
Mater	45.9%	48.7%	50.2%	50.8%	386	412	375	337	2,987	3,344	3,684	3,655
Royal Victoria	26.3%	28.0%	27.1%	35.4%	1,766	1,834	1,992	2,033	7,034	6,759	7,382	8,426
RBHSC	63.5%	63.8%	65.0%	72.0%	20	35	27	11	4,217	3,634	4,165	3,867
Antrim Area	46.1%	42.8%	43.4%	48.9%	1,053	1,381	1,416	1,230	7,715	8,131	8,769	8,629
Causeway	55.2%	53.1%	55.7%	54.5%	458	491	439	431	4,035	4,030	4,593	4,328
Ulster	46.8%	44.3%	45.1%	45.3%	1,515	1,486	1,532	1,488	8,802	8,828	9,267	9,515
Craigavon Area	42.6%	40.1%	39.4%	39.1%	1,325	1,368	1,388	1,761	7,004	6,685	7,189	7,024
Daisy Hill	58.8%	52.8%	58.4%	56.9%	281	531	398	315	4,757	4,485	4,958	4,565
Altnagelvin Area	33.3%	30.2%	29.6%	36.3%	1,049	1,137	1,158	965	5,815	5,421	5,913	5,658
South West Acute	58.0%	50.5%	52.2%	57.6%	338	417	474	347	3,305	3,192	3,378	3,457
Type 1	45.7%	43.4%	44.4%	47.2%	8,191	9,092	9,199	8,918	55,671	54,509	59,298	59,124
Eye Casualty	84.1%	76.5%	75.5%	81.6%	0	0	0	0	780	557	523	474
Lagan Valley	78.6%	73.5%	80.1%	83.1%	2	1	1	0	2,032	1,886	2,196	2,198
Type 2	80.2%	74.2%	79.2%	82.8%	2	1	1	0	2,812	2,443	2,719	2,672
Mid Ulster	100.0%	100.0%	100.0%	100.0%	0	0	0	0	582	575	610	641
Ards	100.0%	100.0%	100.0%	99.9%	0	0	0	0	960	890	1,053	1,006
Bangor	-	-	-	-	-	-	-	-	-	-	-	-
South Tyrone	100.0%	99.9%	100.0%	100.0%	0	0	0	0	1,844	1,813	2,069	2,008
Omagh	98.3%	96.3%	91.4%	95.2%	0	0	0	0	1,659	1,731	1,971	2,045
Type 3	99.4%	98.7%	97.0%	98.2%	0	0	0	0	5,045	5,009	5,703	5,700
Northern Ireland	51.5%	49.1%	50.3%	52.9%	8,193	9,093	9,200	8,918	63,528	61,961	67,720	67,496

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			
	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023
Mater	7.4%	8.6%	10.5%	8.1%	9.4%	9.1%	10.7%	9.3%	1.5%	1.5%	2.0%	2.1%
Royal Victoria	14.3%	14.4%	15.5%	14.3%	12.0%	10.4%	10.8%	10.5%	2.0%	1.3%	1.5%	1.4%
RBHSC	9.1%	12.7%	11.7%	12.9%	9.8%	5.3%	6.0%	4.3%	5.9%	5.2%	5.8%	5.5%
Antrim Area	27.8%	29.9%	30.0%	27.5%	6.3%	6.4%	7.0%	5.0%	3.3%	3.6%	3.3%	3.8%
Causeway	19.6%	20.5%	19.2%	17.9%	6.0%	5.8%	6.0%	5.6%	3.3%	4.8%	5.8%	4.8%
Ulster	19.8%	19.7%	19.7%	20.9%	6.2%	4.8%	5.6%	6.3%	2.6%	2.9%	2.6%	2.8%
Craigavon Area	20.5%	22.1%	22.5%	23.9%	10.2%	9.0%	9.5%	10.9%	5.5%	5.2%	5.0%	5.7%
Daisy Hill	17.3%	20.4%	19.1%	17.9%	6.3%	6.3%	5.8%	5.9%	3.5%	3.1%	3.3%	3.5%
Altnagelvin Area	9.7%	13.5%	13.9%	13.9%	9.4%	9.6%	10.8%	9.0%	5.6%	5.0%	5.2%	5.8%
South West Acute	22.1%	18.2%	16.8%	19.0%	3.3%	4.3%	4.1%	3.4%	7.6%	7.0%	5.9%	7.3%
Type 1	17.7%	19.1%	19.1%	18.7%	8.0%	7.2%	7.7%	7.3%	3.9%	3.8%	3.8%	4.0%
Eye Casualty	4.2%	2.9%	3.4%	4.6%	0.1%	0.0%	0.4%	0.4%	0.3%	0.3%	0.0%	0.0%
Lagan Valley	7.4%	4.7%	4.3%	4.8%	1.2%	1.4%	1.1%	1.0%	1.1%	1.3%	1.1%	1.8%
Type 2	6.5%	4.3%	4.1%	4.8%	0.9%	1.1%	1.0%	0.9%	0.9%	1.1%	0.9%	1.5%
Mid Ulster	0.7%	0.2%	0.2%	0.9%	0.5%	0.0%	0.0%	0.0%	1.0%	1.6%	0.7%	1.2%
Ards	0.8%	0.1%	0.2%	0.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.6%	0.6%	1.0%
Bangor	-	-	-	-	-	-	-	-	-	-	-	-
South Tyrone	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.6%	0.6%	0.4%	0.5%
Omagh	2.7%	1.7%	2.1%	2.4%	0.7%	1.6%	3.7%	2.7%	4.4%	5.8%	6.1%	5.6%
Type 3	1.2%	0.6%	0.8%	1.0%	0.3%	0.5%	1.3%	1.0%	1.8%	2.5%	2.5%	2.5%
Northern Ireland	15.9%	17.0%	16.9%	16.7%	7.1%	6.4%	6.9%	6.5%	3.6%	3.6%	3.6%	3.7%

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			
	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023
Mater	221	287	387	297	281	305	396	339	44	50	73	77
Royal Victoria	1,009	978	1,155	1,196	845	702	795	884	140	91	115	115
RBHSC	386	463	487	498	413	193	249	168	251	189	242	213
Antrim Area	2,147	2,436	2,637	2,362	485	520	612	434	258	293	294	323
Causeway	794	825	881	777	242	233	277	242	134	194	267	207
Ulster	1,750	1,731	1,840	1,969	547	428	518	603	228	256	245	265
Craigavon Area	1,438	1,461	1,631	1,679	711	601	682	763	383	347	362	403
Daisy Hill	823	910	949	818	301	284	286	271	167	137	163	162
Altnagelvin Area	565	737	821	787	547	522	637	511	325	271	309	326
South West Acute	733	578	569	654	109	138	137	119	250	223	201	250
Type 1	9,866	10,406	11,357	11,037	4,481	3,926	4,589	4,334	2,180	2,051	2,271	2,341
Eye Casualty	33	17	19	24	1	0	2	2	2	2	0	0
Lagan Valley	150	89	95	106	24	26	24	23	23	24	24	40
Type 2	183	106	114	130	25	26	26	25	25	26	24	40
Mid Ulster	4	1	1	6	3	0	0	0	6	9	4	8
Ards	8	1	2	4	0	0	0	0	0	5	6	10
Bangor	-	-	-	-	-	-	-	-	-	-	-	-
South Tyrone	2	0	0	0	0	0	1	2	11	11	9	10
Omagh	45	30	42	49	11	27	72	56	73	101	121	115
Type 3	59	32	45	59	14	27	73	58	90	126	140	143
Northern Ireland	10,108	10,544	11,516	11,226	4,520	3,979	4,688	4,417	2,295	2,203	2,435	2,524

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)			
	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023
Mater	0:15	0:13	0:13	0:14	1:02	0:48	0:48	0:53
Royal Victoria	0:17	0:13	0:17	0:17	1:27	1:03	1:13	1:21
RBHSC	0:12	0:10	0:13	0:10	0:47	0:48	1:03	0:41
Antrim Area	0:14	0:09	0:09	0:09	0:39	0:28	0:28	0:28
Causeway	0:15	0:11	0:12	0:10	0:47	0:39	0:37	0:33
Ulster	0:14	0:16	0:17	0:21	1:48	2:11	1:45	2:06
Craigavon Area	0:11	0:13	0:12	0:14	1:35	1:30	1:20	1:32
Daisy Hill	0:08	0:08	0:07	0:07	0:28	0:33	0:29	0:29
Altnagelvin Area	0:19	0:20	0:20	0:18	1:09	1:20	1:27	1:17
South West Acute	0:13	0:13	0:13	0:12	0:58	0:51	0:55	0:46
Type 1	0:13	0:12	0:13	0:13	1:07	1:04	1:06	1:10
Eye Casualty	0:12	0:15	0:16	0:09	0:52	0:52	1:06	0:52
Lagan Valley	0:05	0:06	0:05	0:05	0:16	0:18	0:17	0:16
Type 2	0:06	0:07	0:06	0:06	0:34	0:32	0:32	0:25
Mid Ulster	0:08	0:03	0:06	0:05	0:45	0:11	0:18	0:23
Ards	0:02	0:02	0:02	0:02	0:13	0:10	0:11	0:10
Bangor	-	-	-	-	-	-	-	-
South Tyrone	0:01	0:01	0:01	0:01	0:06	0:06	0:08	0:08
Omagh	0:07	0:08	0:08	0:09	0:31	0:37	0:39	0:36
Type 3	0:02	0:02	0:03	0:03	0:21	0:25	0:25	0:26
Northern Ireland	0:12	0:11	0:11	0:11	1:03	1:00	1:03	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)			
	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023
Mater	1:42	1:25	1:21	1:17	6:24	6:20	6:05	5:55
Royal Victoria	2:03	2:18	2:21	2:06	8:46	9:42	10:16	10:08
RBHSC	1:34	1:08	1:08	1:03	4:22	4:32	4:09	3:47
Antrim Area	2:07	2:22	2:18	1:52	7:35	8:08	8:25	6:41
Causeway	1:29	1:31	1:27	1:30	4:24	5:02	5:02	4:37
Ulster	1:09	1:11	1:12	1:18	6:05	5:53	5:40	5:39
Craigavon Area	1:47	1:36	1:46	1:34	9:32	10:24	9:31	10:59
Daisy Hill	1:02	0:58	0:58	0:54	4:27	5:03	4:32	4:41
Altnagelvin Area	2:12	2:07	2:18	1:59	6:11	7:08	7:30	6:21
South West Acute	0:36	0:50	0:45	0:45	3:33	4:08	3:44	3:42
Type 1	1:31	1:32	1:33	1:26	6:41	7:01	7:07	6:46
Lagan Valley	0:24	0:33	0:32	0:28	1:47	1:49	1:45	1:26
Type 2	0:24	0:33	0:32	0:28	1:47	1:49	1:45	1:26
Mid Ulster	0:01	0:04	0:01	0:01	0:35	0:35	0:11	0:12
Ards	0:05	0:06	0:06	0:06	0:23	0:25	0:23	0:24
Bangor	-	-	-	-	-	-	-	-
South Tyrone	0:01	0:00	0:01	0:01	0:16	0:14	0:16	0:15
Omagh	0:12	0:22	0:20	0:16	1:23	2:42	3:48	2:53
Type 3	0:04	0:05	0:05	0:05	0:50	1:43	2:07	1:37
Northern Ireland	1:16	1:17	1:17	1:11	6:23	6:42	6:47	6:24

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)			
	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023
Mater	11:36	13:45	11:01	10:56	37:15	50:11	33:14	29:06
Royal Victoria	14:39	15:38	14:44	13:34	40:39	64:09	55:38	42:49
RBHSC	5:02	4:52	5:21	4:35	9:50	10:27	9:49	9:14
Antrim Area	9:36	12:42	12:15	11:24	53:53	49:28	49:04	48:33
Causeway	12:10	13:42	10:00	10:15	43:35	57:28	47:41	45:35
Ulster	17:31	16:24	16:18	16:29	42:13	51:30	47:22	49:56
Craigavon Area	14:27	14:30	14:14	20:22	39:48	50:55	44:38	51:59
Daisy Hill	8:46	15:09	11:59	9:51	26:22	40:54	35:43	29:26
Altnagelvin Area	19:52	17:59	17:54	17:17	44:49	47:28	52:56	53:00
South West Acute	8:28	11:17	12:12	9:06	36:34	41:57	44:27	31:08
Type 1	12:35	14:05	13:00	13:11	42:02	50:59	47:34	47:48
Eye Casualty	2:47	5:41	3:46	3:02	4:44	6:01	5:05	5:25
Lagan Valley	5:38	5:29	5:10	4:59	9:57	9:07	9:30	8:31
Type 2	5:22	5:29	5:08	4:56	9:53	9:07	9:30	8:26
Mid Ulster	-	-	-	-	-	-	-	-
Ards	-	-	-	-	-	-	-	-
Bangor	-	-	-	-	-	-	-	-
South Tyrone	-	-	-	-	-	-	-	-
Omagh	2:39	1:45	2:45	2:39	6:18	3:54	6:08	3:48
Type 3	2:39	1:45	2:45	2:39	6:18	3:54	6:08	3:48
Northern Ireland	12:20	13:45	12:46	12:56	41:55	50:52	47:26	47:39

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)			
	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023
Mater	3:37	3:33	3:26	3:20	11:50	10:43	10:24	10:02
Royal Victoria	5:50	5:45	6:01	4:49	20:55	24:41	23:37	18:46
RBHSC	3:06	3:03	2:59	2:41	7:01	7:02	6:53	6:22
Antrim Area	3:50	3:58	3:59	3:34	15:05	14:58	14:43	14:23
Causeway	3:17	3:25	3:16	3:20	9:35	10:44	9:46	9:40
Ulster	3:25	3:35	3:33	3:37	10:12	10:12	10:10	10:19
Craigavon Area	3:51	4:00	4:07	4:09	13:35	14:19	14:02	15:04
Daisy Hill	2:54	3:10	2:56	2:55	8:48	9:58	8:36	8:53
Altnagelvin Area	4:47	5:06	5:09	4:36	15:05	17:13	16:14	14:34
South West Acute	3:05	3:34	3:32	3:13	10:34	12:57	14:26	10:31
Type 1	3:45	3:53	3:51	3:37	12:48	13:48	13:32	13:06
Eye Casualty	2:19	2:36	2:39	2:31	5:22	5:50	6:27	6:24
Lagan Valley	1:36	2:04	1:49	1:48	5:42	6:18	5:30	5:19
Type 2	1:50	2:14	1:59	1:55	5:36	6:13	5:39	5:29
Mid Ulster	0:36	0:37	0:35	0:35	2:07	1:59	1:38	1:38
Ards	0:40	0:40	0:43	0:41	1:18	1:16	1:18	1:17
Bangor	-	-	-	-	-	-	-	-
South Tyrone	0:30	0:29	0:31	0:29	1:09	1:06	1:12	1:05
Omagh	0:47	1:07	1:08	0:58	2:38	3:37	4:40	3:59
Type 3	0:36	0:38	0:40	0:38	1:52	2:39	3:09	2:42
Northern Ireland	3:17	3:25	3:22	3:08	11:52	12:50	12:36	12:07

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	Jun 2022	Apr 2023	May 2023	Jun 2023
Monday	2,473.8	2,407.0	2,323.4	2,701.5
Tuesday	2,313.3	2,262.3	2,492.6	2,430.0
Wednesday	2,208.0	2,176.8	2,334.6	2,300.0
Thursday	2,129.4	2,168.5	2,256.0	2,285.2
Friday	2,104.5	2,114.3	2,191.8	2,262.0
Saturday	1,781.8	1,709.6	1,759.8	1,804.0
Sunday	1,818.0	1,774.8	1,845.8	1,925.0

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			
	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023
Mater	1,370	1,628	1,851	1,855	1,231	1,304	1,458	1,463	386	412	375	337
Royal Victoria	1,849	1,894	2,003	2,987	3,419	3,031	3,387	3,406	1,766	1,834	1,992	2,033
RBHSC	2,676	2,318	2,706	2,785	1,521	1,281	1,432	1,071	20	35	27	11
Antrim Area	3,553	3,481	3,804	4,219	3,109	3,269	3,549	3,180	1,053	1,381	1,416	1,230
Causeway	2,229	2,141	2,559	2,358	1,348	1,398	1,595	1,539	458	491	439	431
Ulster	4,117	3,910	4,184	4,309	3,170	3,432	3,551	3,718	1,515	1,486	1,532	1,488
Craigavon Area	2,987	2,681	2,831	2,743	2,692	2,636	2,970	2,520	1,325	1,368	1,388	1,761
Daisy Hill	2,799	2,366	2,894	2,596	1,677	1,588	1,666	1,654	281	531	398	315
Altnagelvin Area	1,938	1,635	1,750	2,052	2,828	2,649	3,005	2,641	1,049	1,137	1,158	965
South West Acute	1,917	1,613	1,763	1,990	1,050	1,162	1,141	1,120	338	417	474	347
Type 1	25,435	23,667	26,345	27,894	22,045	21,750	23,754	22,312	8,191	9,092	9,199	8,918
Eye Casualty	656	426	395	387	124	131	128	87	0	0	0	0
Lagan Valley	1,598	1,387	1,758	1,826	432	498	437	372	2	1	1	0
Type 2	2,254	1,813	2,153	2,213	556	629	565	459	2	1	1	0
Mid Ulster	582	575	610	641	0	0	0	0	0	0	0	0
Ards	960	890	1,053	1,005	0	0	0	1	0	0	0	0
Bangor	-	-	-	-	-	-	-	-	-	-	-	-
South Tyrone	1,844	1,812	2,069	2,008	0	1	0	0	0	0	0	0
Omagh	1,631	1,667	1,801	1,946	28	64	170	99	0	0	0	0
Type 3	5,017	4,944	5,533	5,600	28	65	170	100	0	0	0	0
Northern Ireland	32,706	30,424	34,031	35,707	22,629	22,444	24,489	22,871	8,193	9,093	9,200	8,918

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 within 2 Hours of Triage				Number Commencing Treatment within 2 Hours of Triage			
	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023
Mater	56.2%	63.0%	62.3%	64.1%	1,154	1,531	1,640	1,645
Royal Victoria	49.5%	44.8%	44.8%	48.2%	2,557	2,079	2,257	2,765
RBHSC	62.8%	71.1%	72.9%	75.1%	2,244	2,314	2,759	2,660
Antrim Area	47.8%	42.6%	43.7%	53.2%	2,796	2,657	2,908	3,574
Causeway	63.9%	61.0%	63.8%	61.6%	2,104	1,985	2,346	2,172
Ulster	67.0%	65.1%	66.6%	63.8%	5,524	5,441	5,821	5,662
Craigavon Area	53.0%	56.5%	53.3%	55.9%	3,282	3,389	3,385	3,290
Daisy Hill	73.9%	73.9%	74.5%	77.3%	3,259	3,083	3,435	3,312
Altnagelvin Area	45.8%	48.0%	44.4%	50.2%	2,327	2,267	2,256	2,476
South West Acute	84.5%	77.0%	77.3%	80.9%	2,382	2,147	2,289	2,477
Type 1	59.2%	58.7%	58.7%	61.1%	27,629	26,893	29,096	30,033
Lagan Valley	95.9%	96.5%	97.3%	98.7%	1,910	1,760	2,064	2,100
Type 2	95.9%	96.5%	97.3%	98.7%	1,910	1,760	2,064	2,100
Mid Ulster	100.0%	100.0%	100.0%	100.0%	52	56	38	28
Ards	100.0%	100.0%	100.0%	100.0%	938	846	1,012	947
Bangor	-	-	-	-	-	-	-	-
South Tyrone	100.0%	100.0%	100.0%	99.9%	1,690	1,642	1,921	1,857
Omagh	97.6%	90.7%	84.8%	89.3%	1,474	1,420	1,453	1,597
Type 3	99.1%	96.5%	94.4%	95.8%	4,154	3,964	4,424	4,429
Northern Ireland	63.7%	63.0%	63.2%	65.4%	33,693	32,617	35,584	36,562

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)			
	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023	Jun 2022	Apr 2023	May 2023	Jun 2023
Mater	21.3%	19.5%	19.4%	19.2%	45.8%	51.8%	46.9%	47.7%	32.9%	28.7%	33.7%	33.1%
Royal Victoria	28.0%	30.1%	30.3%	27.2%	48.5%	50.0%	51.0%	46.7%	23.5%	19.8%	18.7%	26.1%
RBHSC	15.3%	18.1%	18.8%	15.2%	26.2%	29.1%	27.5%	26.5%	58.5%	52.7%	53.7%	58.4%
Antrim Area	16.8%	18.6%	18.9%	19.2%	53.6%	56.5%	53.3%	55.0%	29.6%	24.9%	27.7%	25.8%
Causeway	20.2%	21.8%	19.3%	19.1%	57.0%	51.1%	48.1%	49.1%	22.8%	27.2%	32.6%	31.8%
Ulster	25.2%	26.6%	25.3%	24.5%	41.5%	40.5%	41.7%	39.0%	33.3%	32.9%	33.0%	36.4%
Craigavon Area	32.2%	36.0%	34.5%	32.7%	38.2%	38.3%	36.3%	36.6%	29.6%	25.7%	29.2%	30.7%
Daisy Hill	29.4%	32.9%	31.0%	31.5%	44.7%	45.0%	44.7%	44.3%	25.9%	22.1%	24.3%	24.1%
Altnagelvin Area	33.8%	36.1%	33.8%	32.3%	35.5%	36.9%	36.1%	35.7%	30.7%	27.0%	30.1%	32.0%
South West Acute	18.6%	19.1%	20.4%	16.6%	44.2%	43.7%	42.5%	41.3%	37.2%	37.2%	37.1%	42.0%
Type 1	25.1%	26.9%	26.1%	24.8%	43.3%	44.4%	43.2%	42.5%	31.7%	28.7%	30.7%	32.7%
Eye Casualty	2.2%	1.4%	2.3%	3.1%	18.1%	10.6%	19.2%	21.4%	79.7%	88.0%	78.5%	75.5%
Lagan Valley	6.1%	5.9%	5.3%	5.2%	23.1%	20.7%	19.0%	20.3%	70.8%	73.3%	75.7%	74.4%
Type 2	5.0%	4.8%	4.7%	4.8%	21.7%	18.3%	19.1%	20.5%	73.3%	76.9%	76.2%	74.6%
Mid Ulster	4.1%	1.7%	0.0%	3.6%	24.0%	13.3%	16.9%	21.4%	71.9%	85.0%	83.1%	75.0%
Ards	0.0%	0.0%	0.0%	0.0%	0.2%	0.1%	0.1%	0.5%	99.8%	99.9%	99.9%	99.5%
Bangor	-	-	-	-	-	-	-	-	-	-	-	-
South Tyrone	0.2%	0.4%	0.5%	0.2%	1.0%	1.8%	0.8%	0.7%	98.8%	97.7%	98.7%	99.0%
Omagh	1.2%	0.9%	1.2%	1.0%	2.1%	3.6%	3.9%	2.6%	96.6%	95.5%	95.0%	96.4%
Type 3	0.6%	0.5%	0.6%	0.5%	1.9%	2.3%	2.0%	1.7%	97.5%	97.1%	97.3%	97.8%
Northern Ireland	22.3%	24.0%	23.2%	22.1%	39.2%	40.1%	38.9%	38.3%	38.5%	35.9%	37.9%	39.6%

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:

Rebecca Rollins

Hospital Information Branch
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](#)