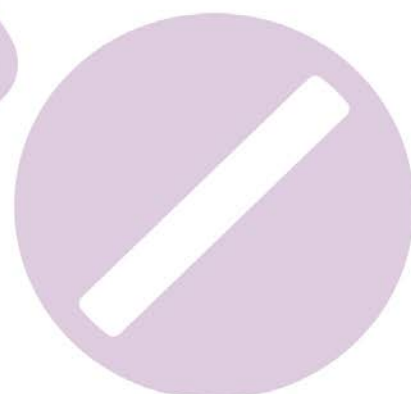
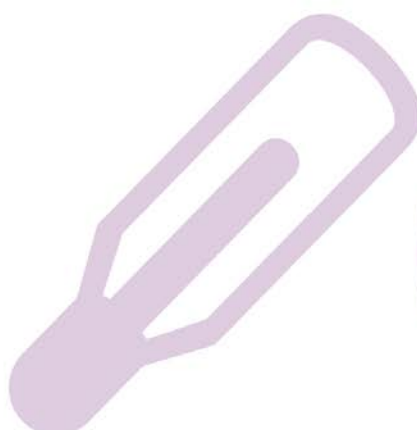


# RCEM Winter Flow Project

Analysis of the data so far: 06 March 2020



## Introduction

In 2015, we launched the 'Winter Flow Project' in an effort to highlight the difficulties facing an NHS struggling with unprecedented financial difficulties and insufficient resources.

The project looked at patient flow within Emergency Departments over the winter. It was a great success because of the generosity of its contributors, with over 50 NHS Trusts and Health Boards from across the UK submitting data over a six-month period. These data helped to provide a better understanding of system pressures and four-hour standard performance.

The findings enabled RCEM to broaden the debate around emergency medicine beyond the usual narrow focus on the four-hour standard and meant that providers, commissioners, the national press and governments in each of the four nations of the UK were better informed about the challenges faced by staff working on the NHS frontline.

The project has proven invaluable and is now in its fifth year. In our view, the project has also been instrumental in making the case for additional resources for the health sector; which is now reflected in the new settlement for the NHS which was announced as part of the NHS Long Term Plan

As part of this year's project, where possible, each participating Trust/Board has submitted a number of data points on a weekly basis. These include four-hour standard performance, the number of acute beds in service, the number of patients staying more than 12 hours in an Emergency Department from arrival to departure, the number of patients subject to delayed transfers of care and the number of patient attendances in their department(s).

As has been the case in previous years the data is aggregated to ensure the focus of consideration is the wider health care system rather than the performance of individual Trusts/Boards. More than 50 sites have submitted this data on a weekly basis since the beginning of October.

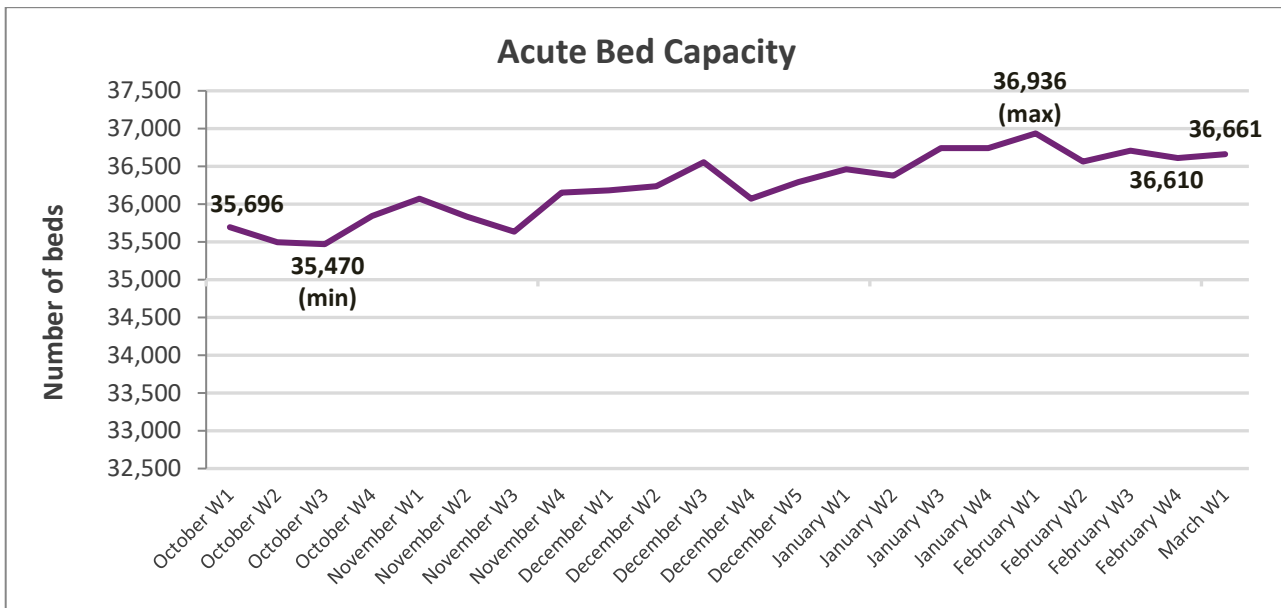
Published on a Friday of the week following data collection, the summary data provide a current overview of 'winter pressures'. The College is grateful to the participants who represent Trusts/Boards of all sizes and geographical locations.

Unlike NHS England datasets, there is no suggestion that our project represents a complete or permanent scrutiny of the healthcare system. Our data include all four countries of the UK though the majority of participating sites lie within England. It is just a sample of Trusts/Boards, albeit a large and representative one.

The data have already been of immense value to the College and allow informed comment and analysis rather than speculation.

The weekly data and trend data are presented in the following tables.

## Graph of acute beds in service



## Active Bed Management

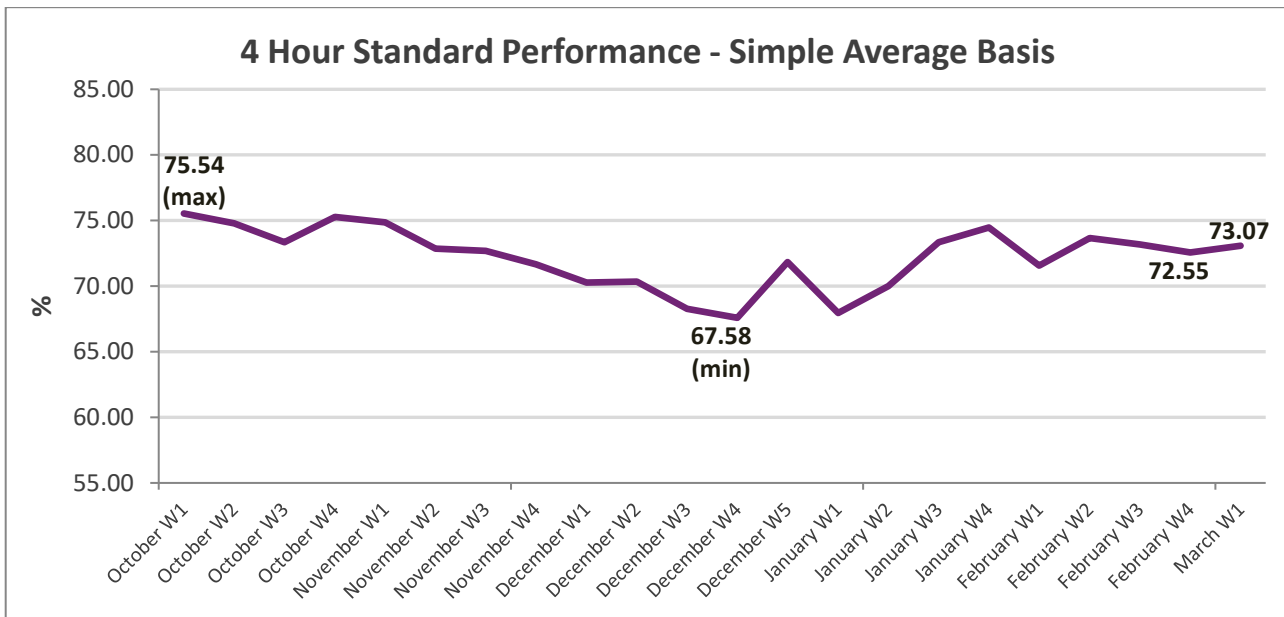
In the first week of March, the number of beds within the project group increased to 36,661 – up from 36,610 the previous week. This is a 0.14% increase from the previous week. In total, there has been a 3.36% increase in the aggregate bed stock<sup>1</sup> from the project starting point.

The extent to which the participating Trusts/Boards are adjusting their bed stock to meet demand is shown in the table below.

	No flexing	0 – 5%	5 – 10%	10 – 15%	15 – 20%
Number of sites	7	15	16	8	5

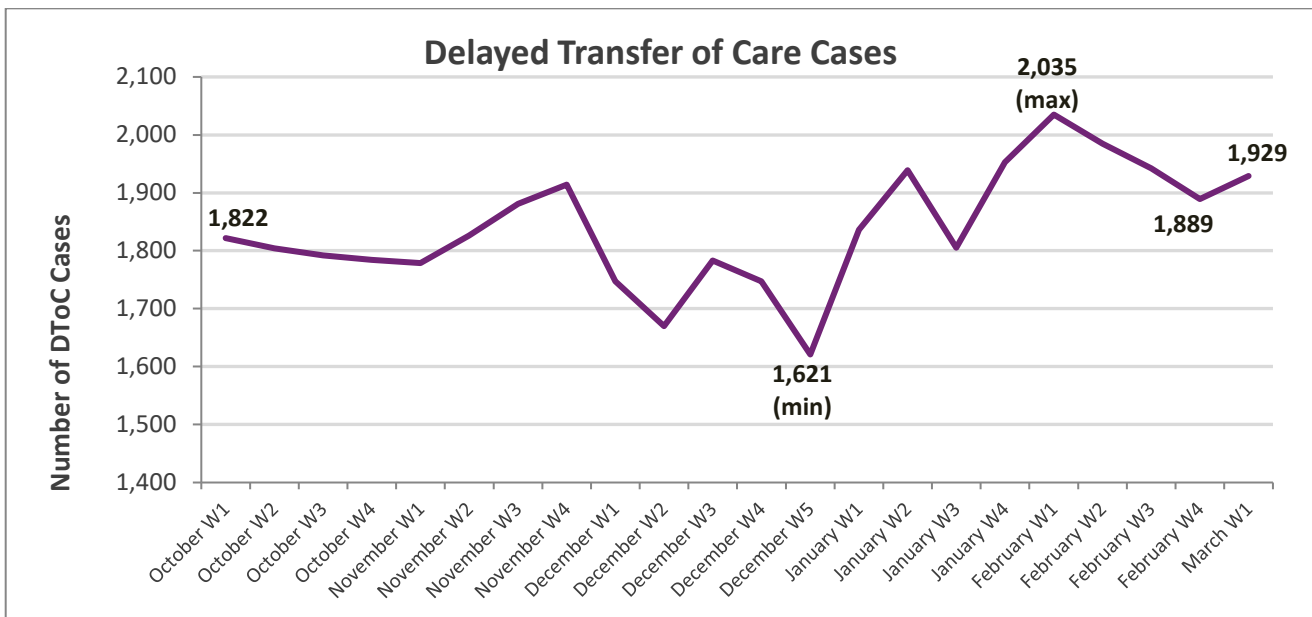
<sup>1</sup> This is measuring from week one to the maximum recorded bed stock for the project to date.

## Graph of four-hour performance by week since October



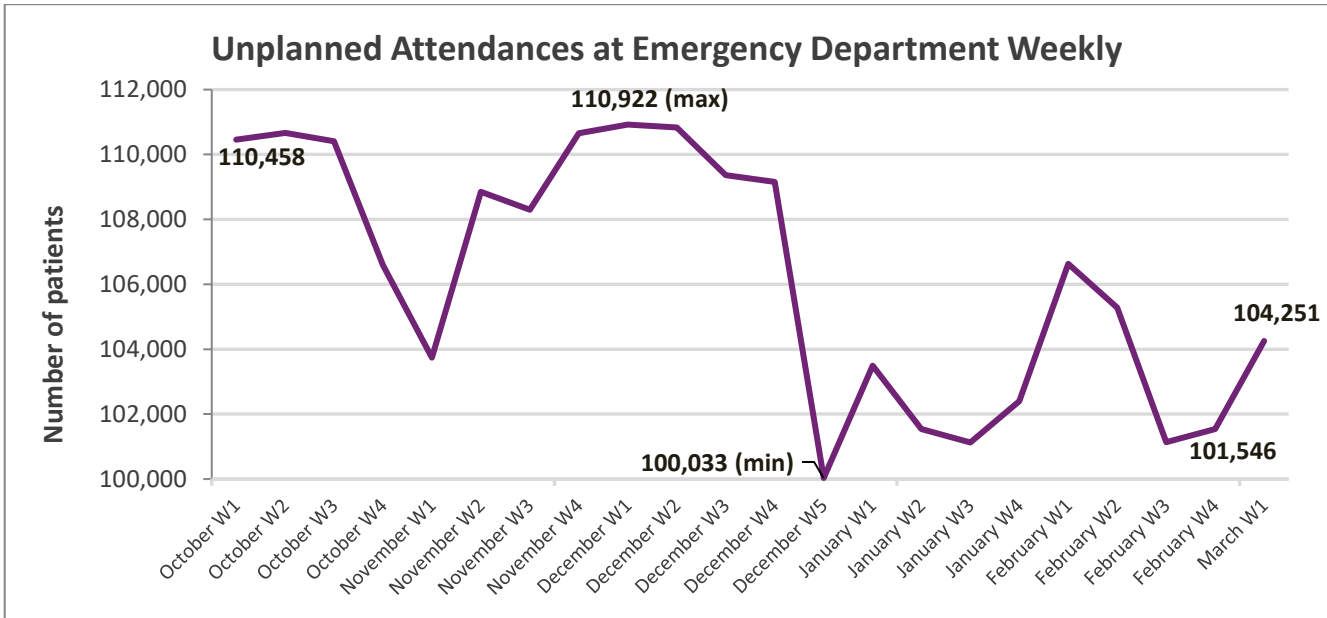
In the first week of March, four-hour standard performance stood at 73.07% - up from 72.55% the previous week. The underlying picture shows 22 increases and 22 decreases across the project group.

## Graph of Delayed Transfers of Care (DTOCs) by week since October



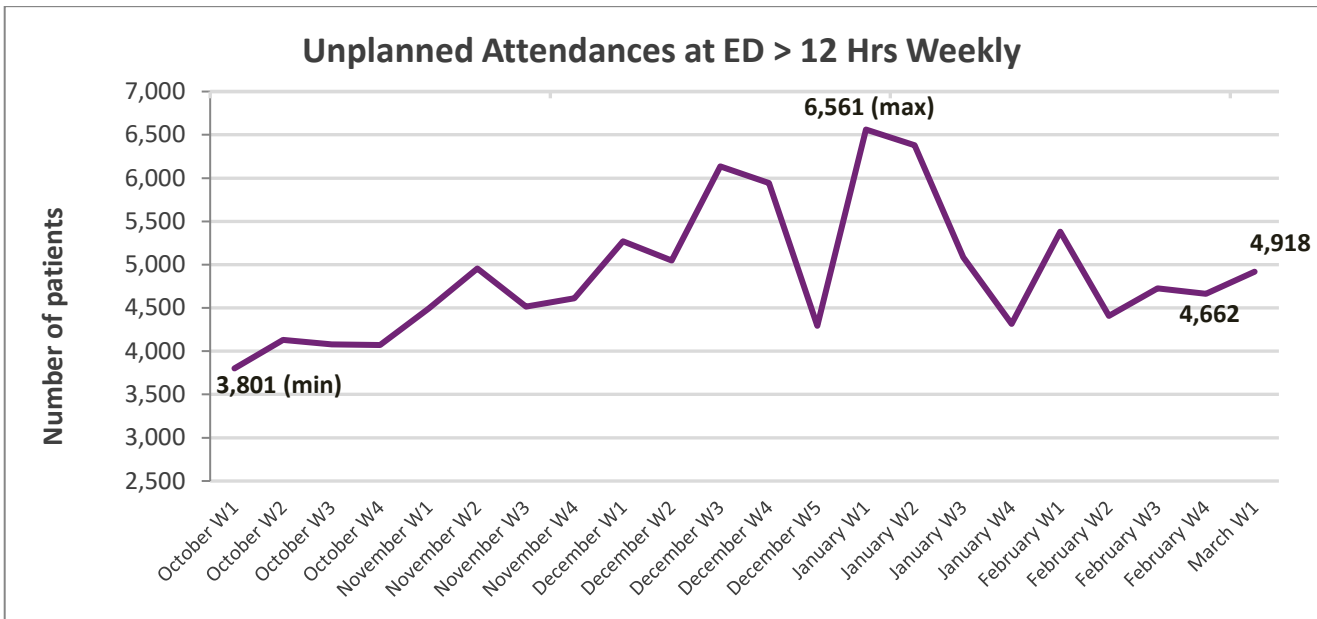
The number of patients subject to DTOC In the first week of March was 1,929 - up from 1,889 the previous week. This translates to 5.26% of acute bed stock - up from 5.16% the previous week. The range across Winter Flow contributors this week was between 0.8% and 18.4%.

## Graph of attendances since October



A total of 104,251 attendances were recorded within the Winter Flow group this week – up from 101,546 the previous week. This is an increase of 2,705 patients or 2.66%. At site level there were 36 recorded increases and 11 decreases from the previous week.

### Graph of the number patients spending more than 12 hours in an Emergency Department from arrival to departure since October



In the first week of March, the number of patients staying more than 12 hours from arrival to departure in Emergency Departments within the Winter Flow group stood at 4,918, up from 4,662 the previous week. This was an increase of 5.49% from the previous week and translates to 4.72% of attendances recorded within the Winter Flow group in the same period. The Winter Flow Project has recorded 107,774 patients staying over 12 hours from arrival to departure in Emergency Departments since the first week of October.

## Overall

March started much as February ended in this year's Winter Flow project, with no significant movement across most metrics.

Attendances went up by 2.66%, the largest jump since the start of February. At the same time, performance against the four-hour standard improved by just over half a percentage point (0.52).

Delayed Transfers of Care cases remain high, as do 12-hour waits (both saw modest increases), but both are broadly stable, fluctuating within quite small ranges for the last three or four weeks.

Similarly, the bed stock hasn't changed by more than half a percent for three weeks (increasing by 0.1% last week), indicating that trusts are either content with the number of available beds at present, or are limited in their ability to open more. Given that the number of available beds currently sits about 275 below the peak recorded earlier this winter (or 0.7%), it's probably a combination of the two.

Across the whole English NHS this winter, bed availability and occupancy both peaked in the second week of January.<sup>2</sup> Trusts across England had 98,418 beds available, and 93,977 occupied (for an occupancy figure of 95.1%). In the Winter Flow project, the peak arrived a few weeks later in the first week of February (when trusts opened 36,936 beds).

COVID-19 is likely to bring further operational pressures on departments that are already under significant stress – if (or more likely, when) trusts do experience a significant rise in demand over the coming months as a consequence of COVID-19, then surge capacity may well be required. Additional beds will almost certainly be needed as a matter of urgency, and the Government must provide the requisite funding to ensure they are available.

**Please note:** due to the spread of COVID-19, the trusts submitting data to the Winter Flow project are liable to come under increasing pressure in the coming weeks, and so data submitted to the College is likely to be delayed or otherwise affected by the related rise in demand. Consequently, while we will continue to update the graphs and figures, we will not be commenting on them for the remainder of the project.

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<sup>2</sup> NHS England Winter Situational Report  
Published 06 March 2020