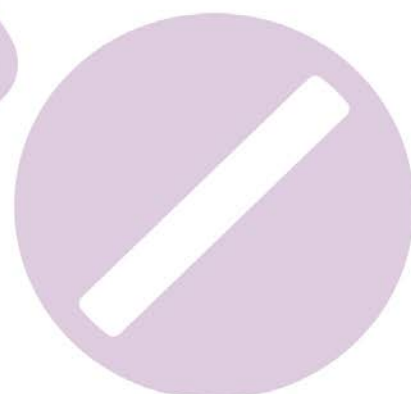
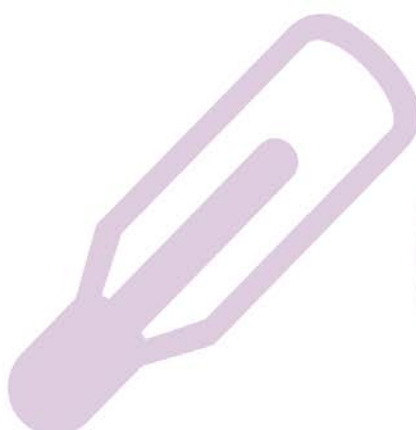


RCEM Winter Flow Project

Analysis of the data so far: 15th December 2017



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 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 third year. As was the case in previous years, each participating Trust/Board has submitted weekly data on attendances, four-hour standard performance, delayed transfers of care and cancelled elective operations. This data together better reflects pressures, constraints and consequences for system performance. However, in an effort to reflect on-going difficulties in recruiting sufficient numbers of permanent staff, the project this year has also asked participating providers how many locum and agency staff are working in their Emergency Departments.

The data is aggregated to ensure the focus of consideration is the wider health care system rather than the performance of individual Trusts/Boards. Over 50 Trusts/Boards have submitted this data on a weekly basis since the beginning of October.

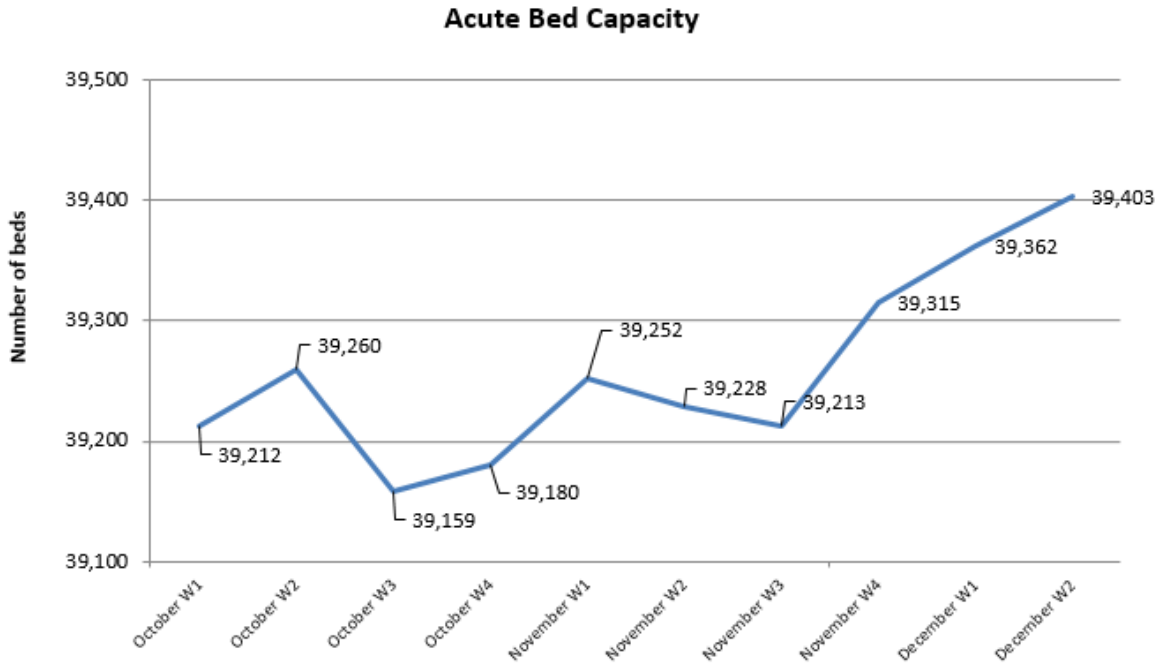
Published on a Friday of the week following data collection, the summary data provide a current overview of 'winter pressures'. The College is grateful to the participants who represent Trusts/Boards of all sizes and geographical locations.

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

The data has already been of immense value to the College and allows 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

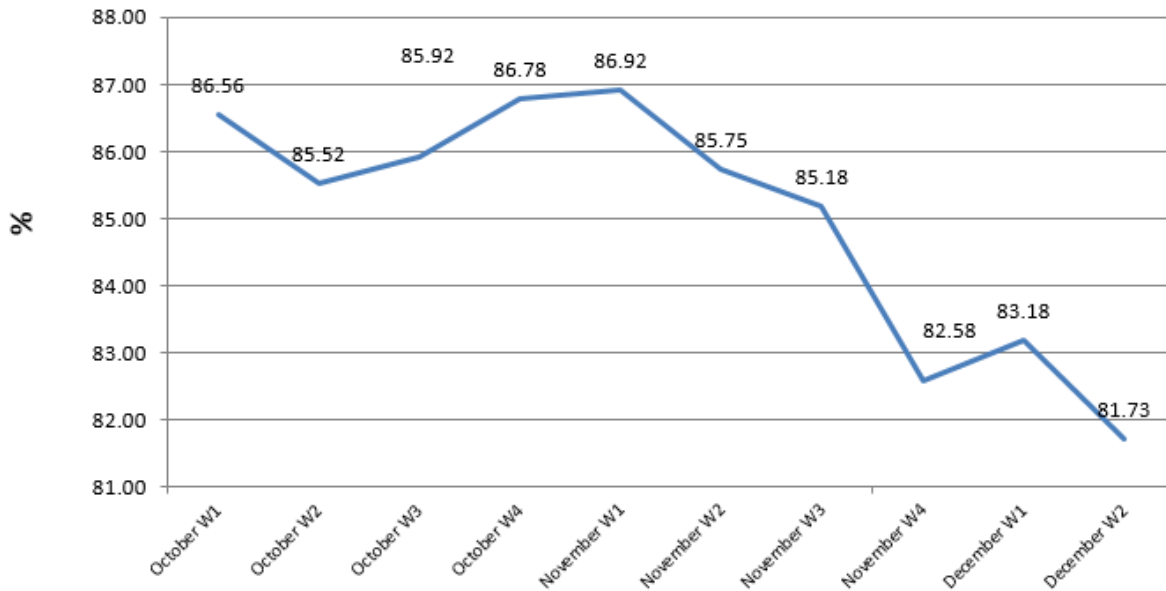
In the second week of December the number of beds within the project group increased to 39,403 up from 39,362 the previous week. In total, there has been a 1.9% increase in the aggregate bed stock from the project starting point.

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	11	26	15	3	1

Graph of four hour performance by week since October

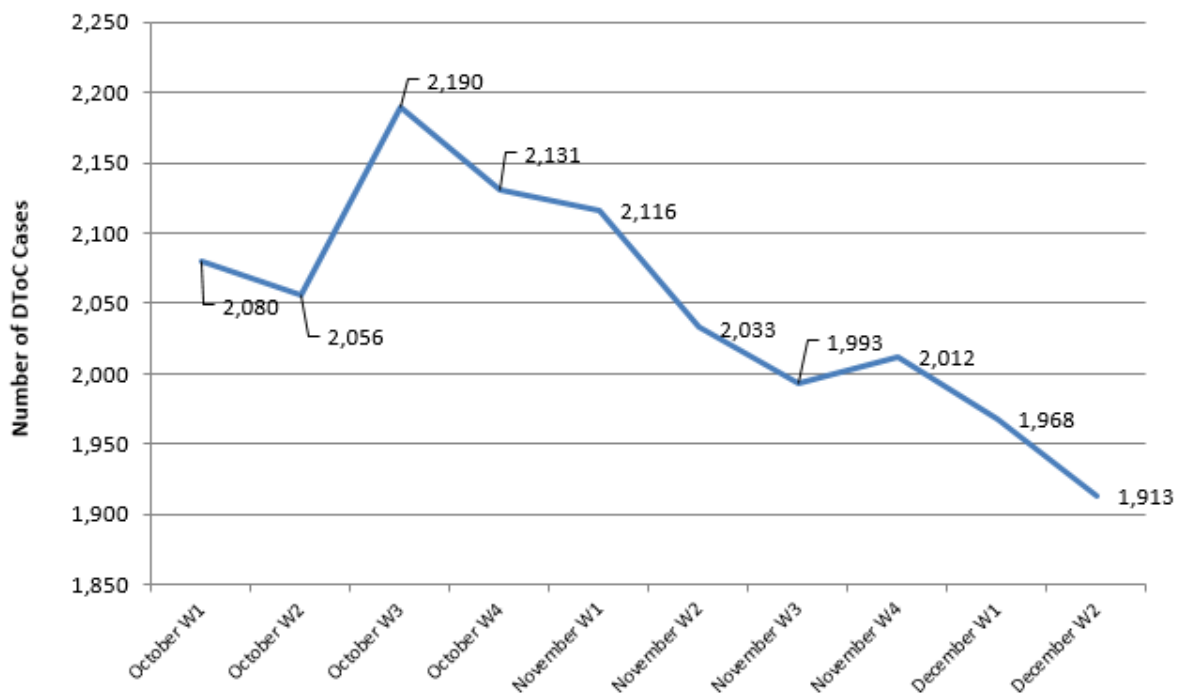
4 Hour Standard Performance - Simple Average Basis



In the second week of December four-hour standard performance stood at 81.73%, down from 82.55% the previous week. The underlying picture shows 16 increases and 39 decreases across the project group.

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

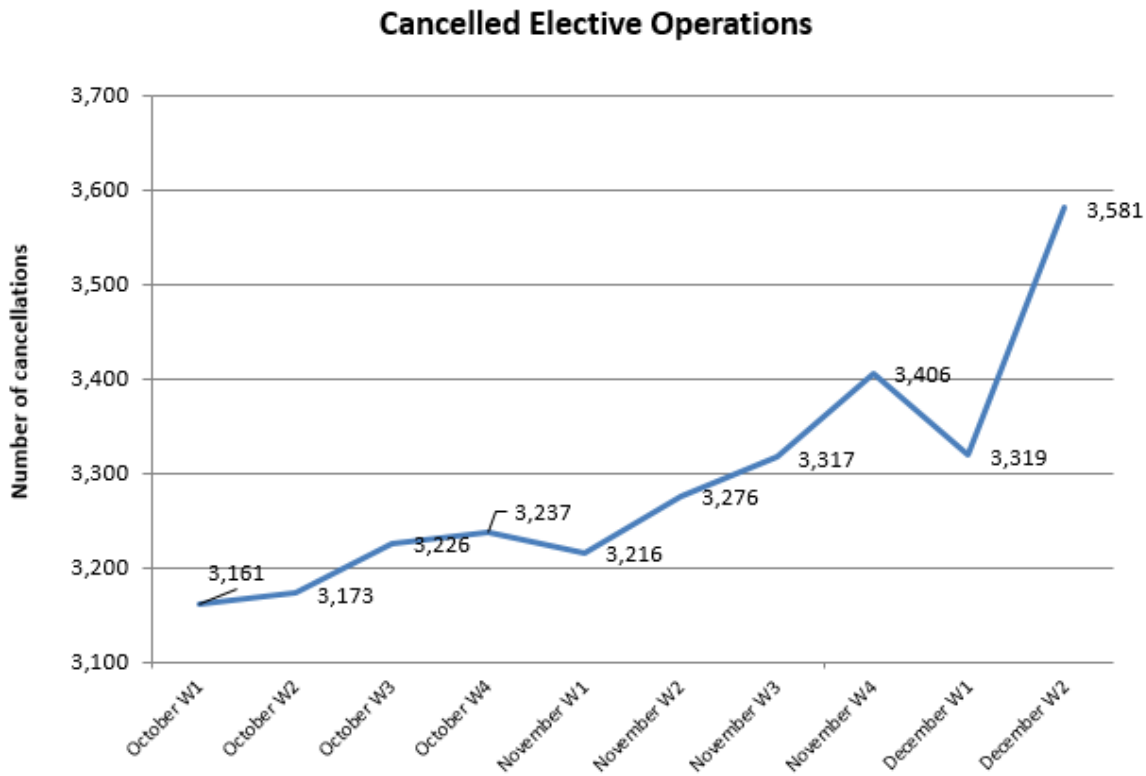
Delayed Transfer of Care Cases



The number of patients subject to DTOC has fallen further in the second week of December.

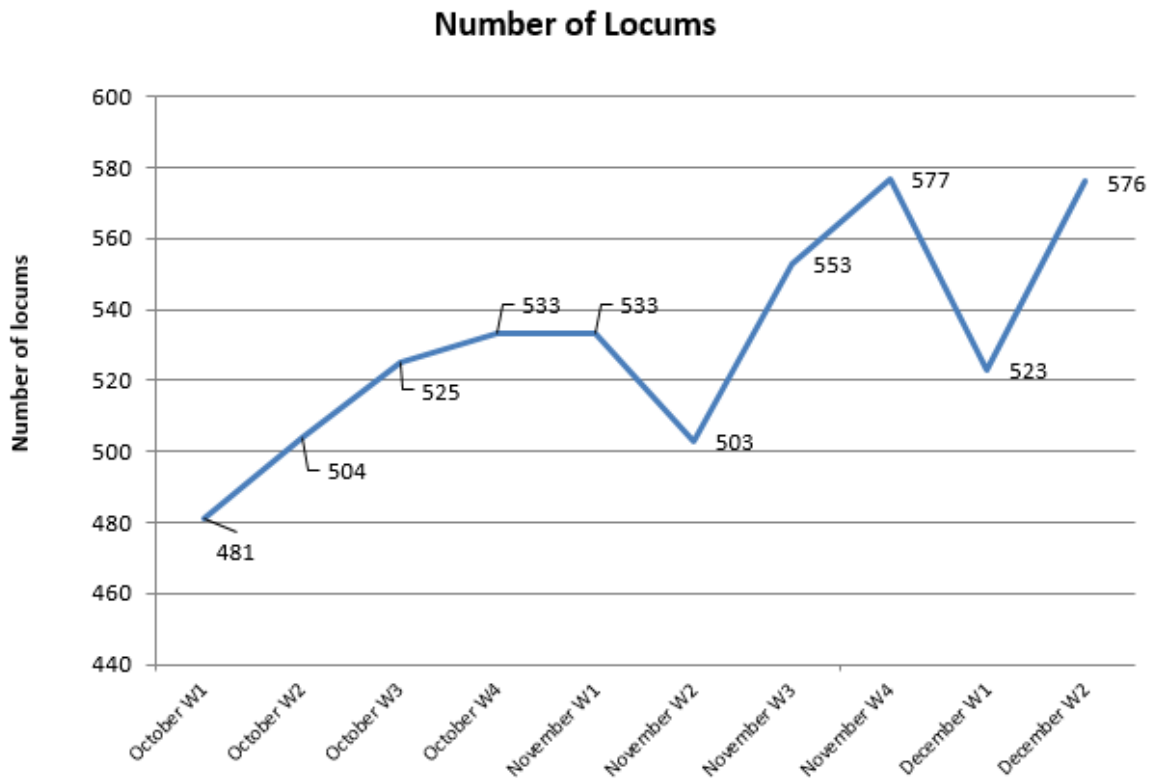
There were 1,913 recorded instances of delayed transfers down from 1,968 the previous week. This translates to 4.9% of acute bed stock, down from 5.0%. The range across all contributors for this week is a minimum 0.00% - maximum 14.3%

Graph of cancelled elective operations since October



A total of 3,581 elective operations were cancelled this week up from 3,319 the previous week. A total of 32,912 elective operations have been cancelled over the project to date. This represents an overall average of 61 cancelled operations per site per week over the project so far.

Graph of number of locum and agency staff since October



In the second week of December the number of locum and agency doctors and nurses employed within Emergency Departments within the Winter Flow Project group stood at 576 up from 523 the previous week.

Overall

The Winter Flow data published this week shows that after a welcome improvement in the previous week (83.18%) four-hour standard performance has continued its expected seasonal decline and now stands at 81.73%. While, we are still far short of standards set out in the NHS Constitution,¹ it is a credit to the hardworking staff in providers across the UK that despite this, performance remains 3.35 percentage points higher than was the case in the same week last year (78.38%).

Moreover, as the numbers of patients subject to Delayed Transfers of Care continues to improve, it is clear that to some extent, providers' intensive efforts to manage their bed stock to maintain patient flow are paying off. However, it is also clear from our acute bed data, just how difficult their task has become.

Over the last four weeks – despite the pressures associated with the colder winter weather – this year's Winter Flow contributors have added no more than 190 acute beds to their commissioned bed stock; an increase of less than 0.5%. This is the week that NHS England recorded acute bed occupancy at 93.8%.² In this context it is hardly surprising that the

¹ [NHS Constitution](#)

² [Winter Daily SitRep 2017-18 Data](#)

number of cancelled elective operations has increased sharply³ as providers face unpalatable decisions in order to maintain four-hour performance.

The Royal College of Emergency Medicine has argued consistently, and for an extended period, that providers must have the flexibility to plan and respond to 'demand faced, rather than the demand that is hoped-for.'⁴ As long as a lack of resources mean this is not possible, achieving the four-hour standard or even maintaining four-hour standard performance will remain a difficult task for those working on the front line.

³ 3,581 up from 3,319 the previous week.

⁴ NHS England [Transforming urgent and emergency care services in England](#)
Published 15 December 2017