

The Royal College of
Emergency Medicine



RCEM Winter Flow Project

2015/16 - Final Report

Introduction

The Royal College of Emergency Medicine was approached by a number of Trusts/Boards following the winter of 2014-15. Each highlighted that the greatest challenge to the 4 hour standard had been issues of bed availability exacerbated by increased delays in transfers of care. These delays in provision of community and social care rose significantly over the winter months.

The College also felt that regular comment regarding 'A&E' performance failed to take account of this issue, focusing instead on attendances and admissions.

Monitor recently described the 4 hour standard as a 'useful measure of whole system performance' and the College agrees. The metric is dependent upon demand, capacity and flow.

To better monitor and report on system wide pressures the College invited all Trusts/Boards in the UK to contribute to our Winter Flow Project.

Each participating Trust/Board has submitted weekly data on attendances, four hour standard performance, delayed transfers of care and cancelled elective operations. These data together better reflect pressures, constraints and consequences for system performance.

The data are aggregated to ensure the focus of consideration is the wider health care system rather than the performance of individual Trusts/Boards.

50 Trusts submitted this data on a weekly basis from early October until the end of March.

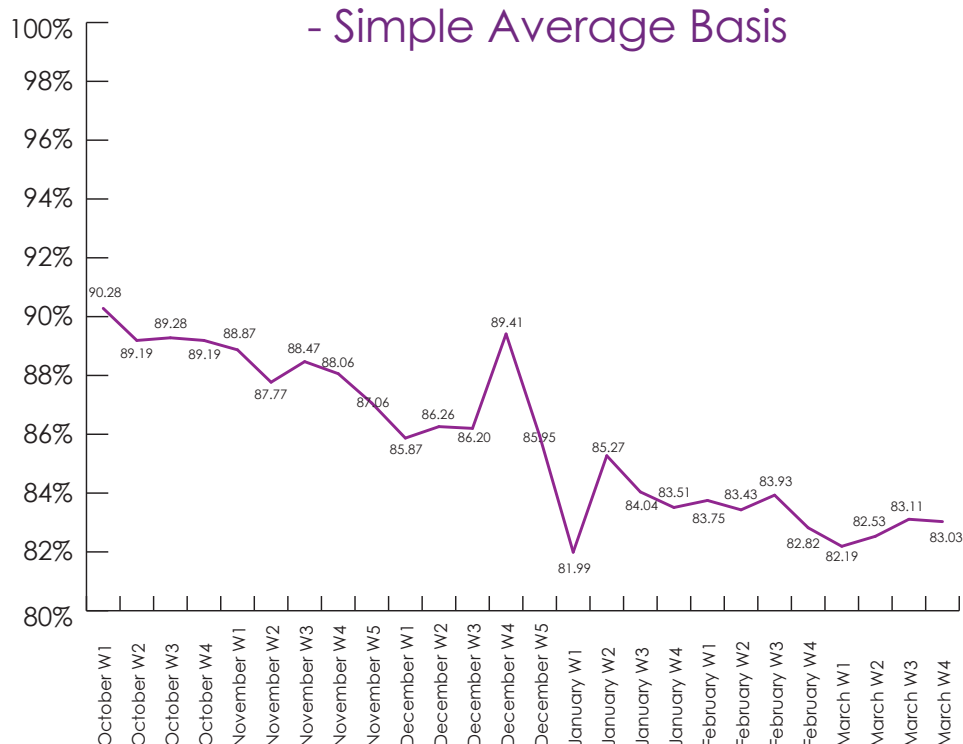
The College is grateful to the participants who represent Trusts/Boards of all sizes and geographical locations.

Unlike NHS England datasets there is no suggestion that our project represents a complete dataset.

Our data includes all four countries of the UK although the majority of participating sites lie within England.

This report is a summary of the data and our findings.

4 Hour Standard Performance - Simple Average Basis



The trend shows a steady decline in Four Hour Standard performance over the course of the study punctuated by a spike either side of Christmas. There has been no expected recovery in the second half of the period.

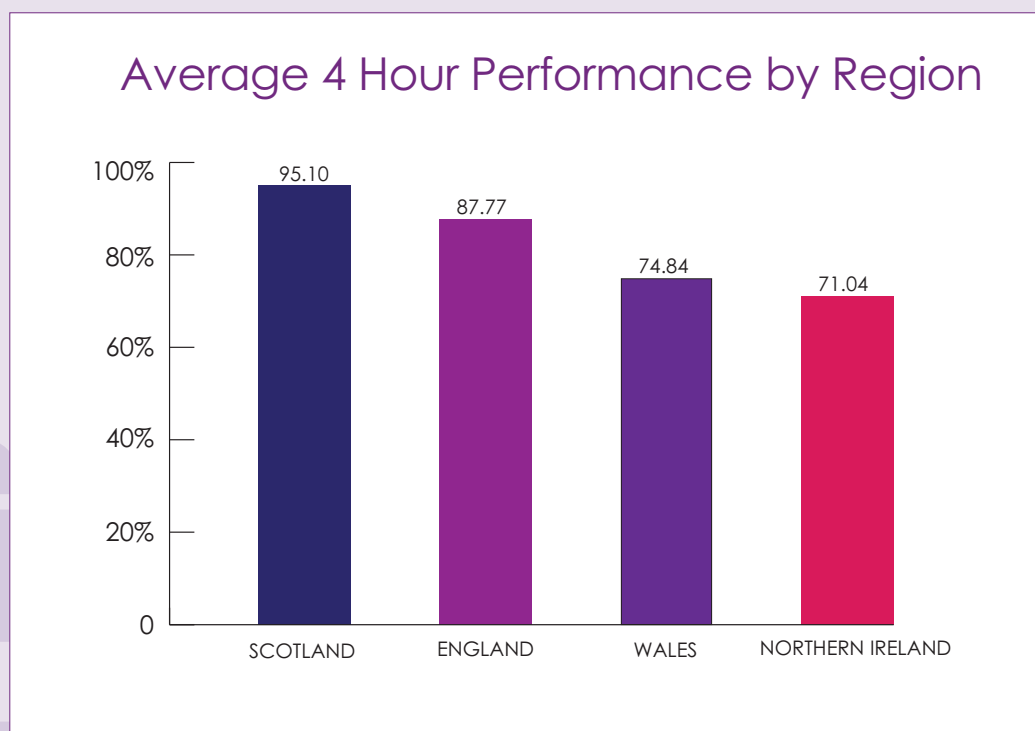
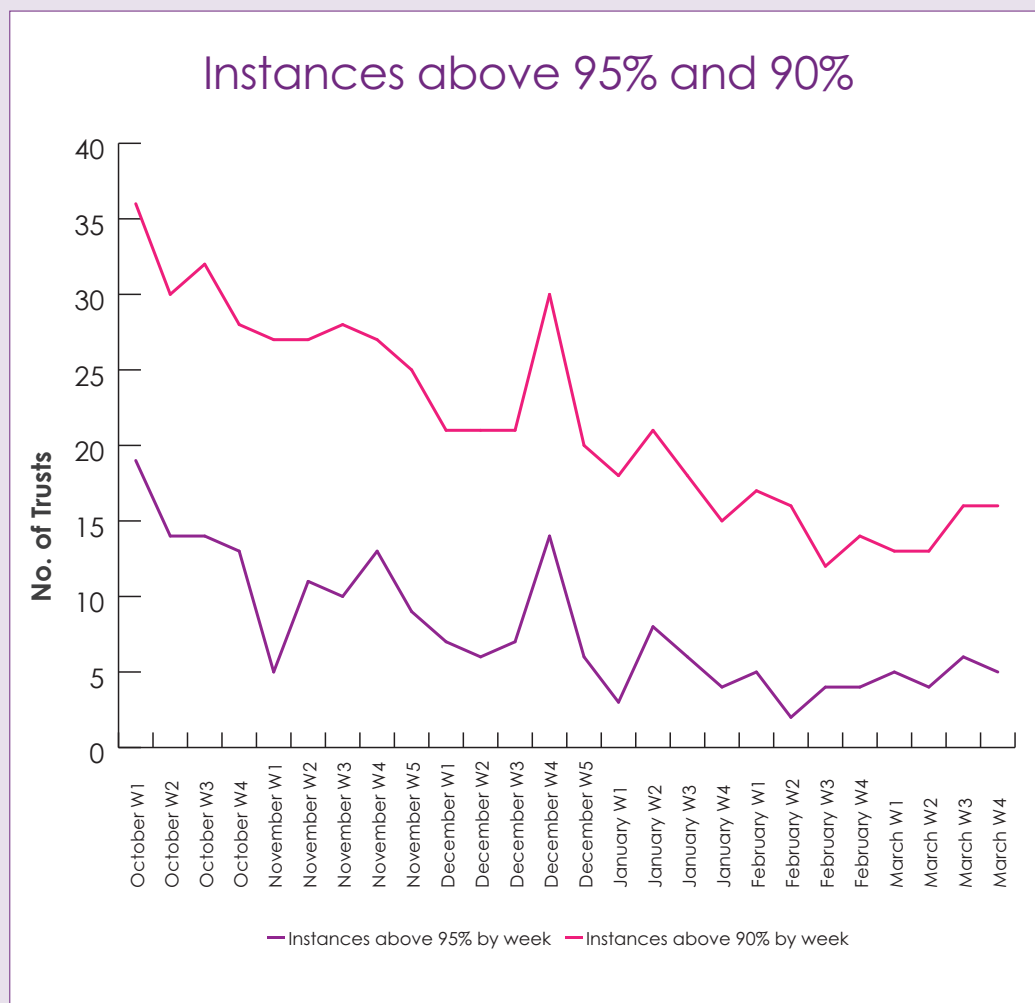
Each week we have reported performance across the 50 contributing sites. Average performance was 85.83%, the range however was 56.67% to 99.47%.

Only 10% of sites achieved an average of the 95% standard over the six months.

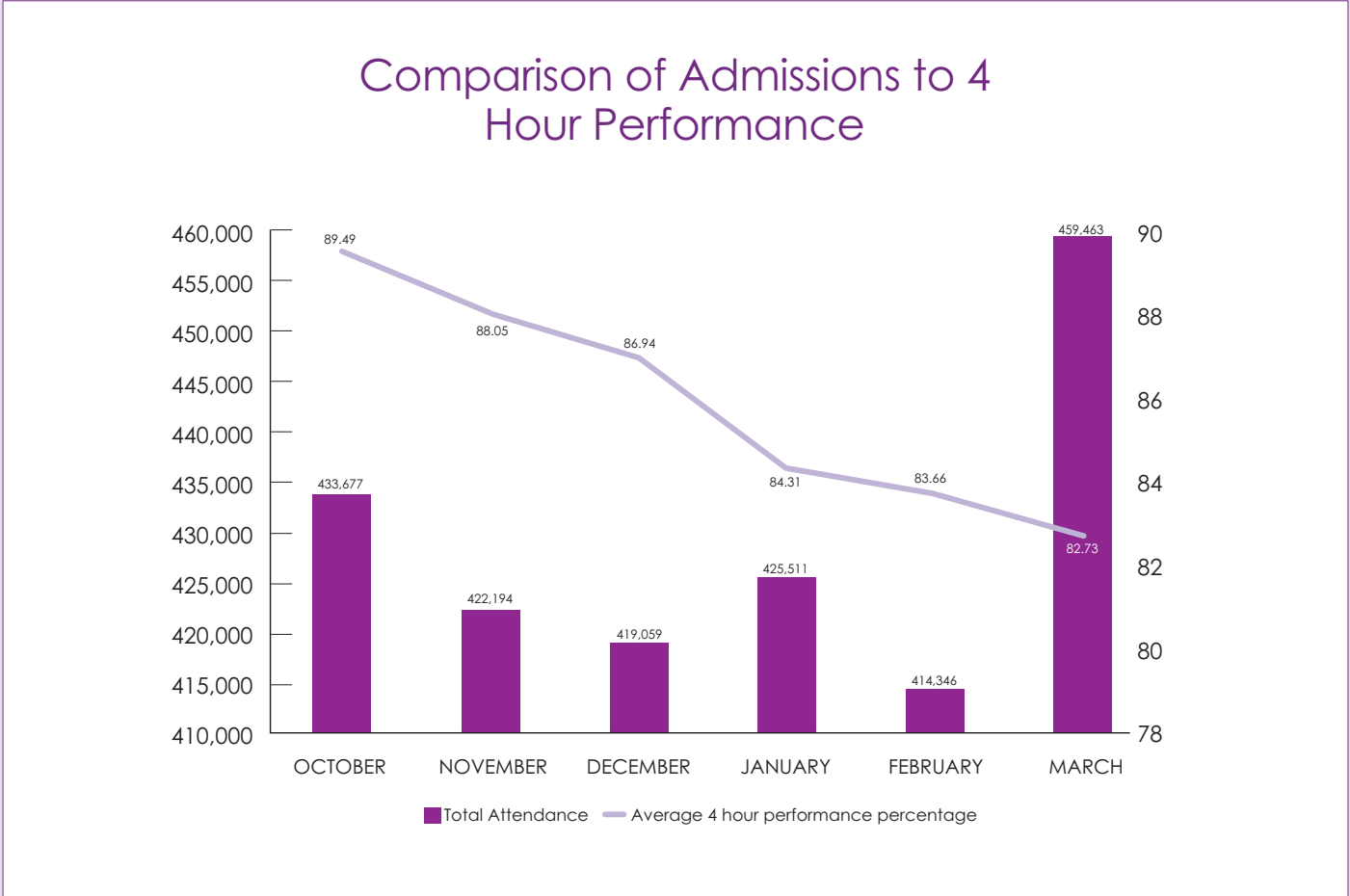
This chart illustrates the number of sites achieving over 90% and 95% 4 hour performance.

It shows that only a minority of Trusts achieved 95% and only half achieved a performance of 90% against the 4 hour target.

A comparison of three month average performance in England, Wales, Scotland and Northern Ireland is shown to the right.



When comparing the 4 hour performance to the monthly NHS published admissions data the following is observed:

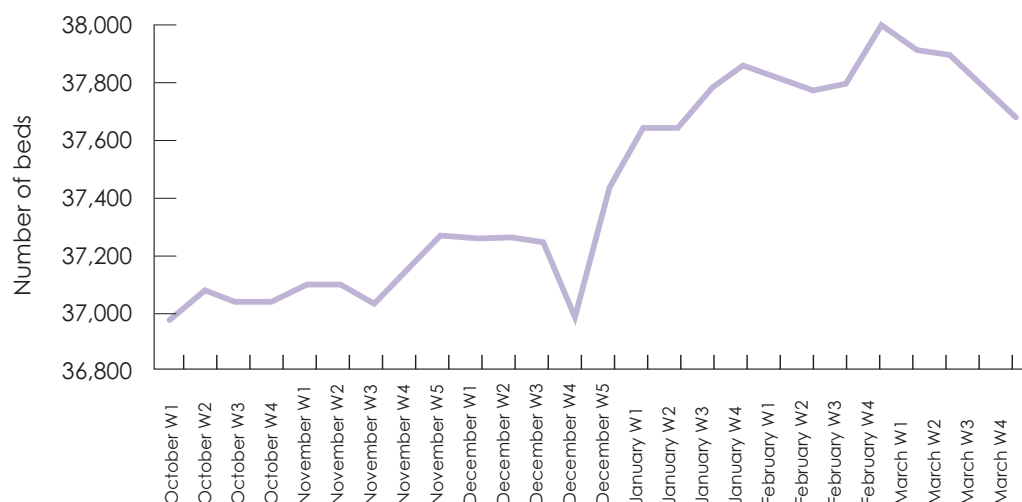


There is no clear correlation between admissions and 4 hour performance. However, there were clearly an exceptional number of admissions in March.



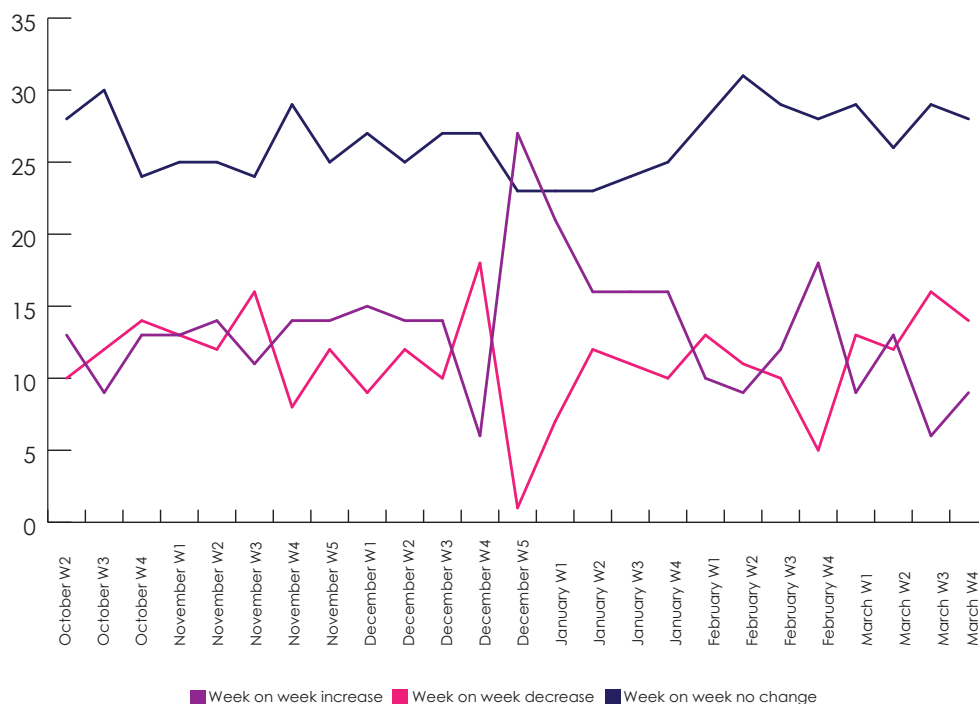
Acute Bed Stock

Acute Bed Capacity



The Trusts/Boards contributing to the project vary in size from 138 beds to 1,955 acute beds. The number of available beds varied each week as some sites reported increases and decreases in acute bed capacity.

Number of sites flexing bed capacity by week



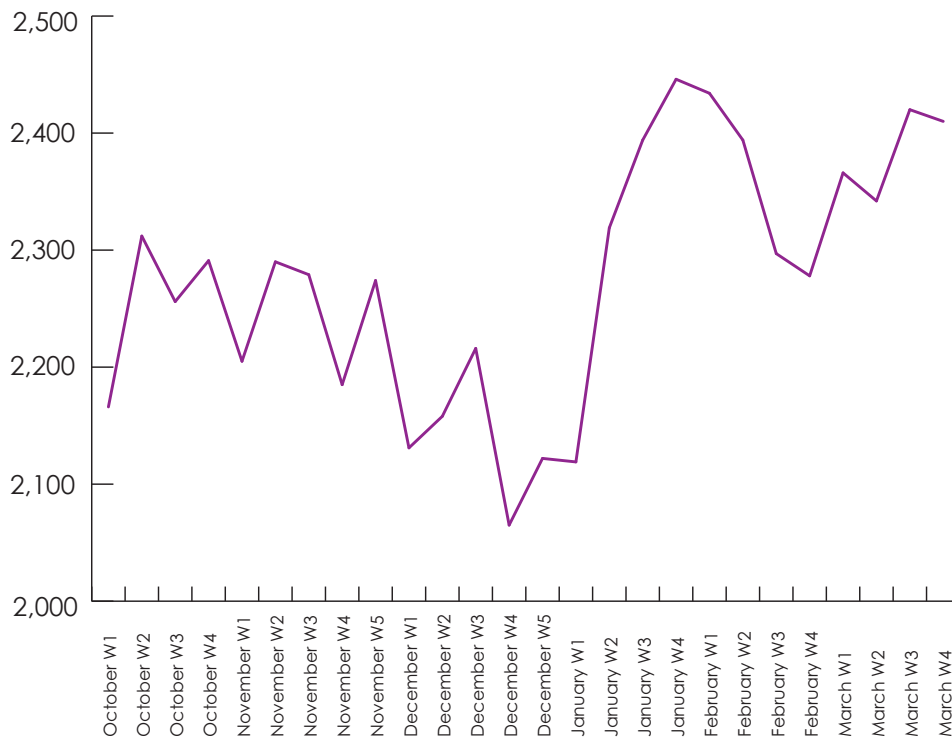
No clear trend of acute bed capacity can be discerned save in week 13 where 18 sites reduced capacity over the Christmas holiday and then 27 sites added capacity the following week.

Over the course of the project the data shows a 1.9% increase in the overall number of acute beds in service.

Delayed Transfers of Care (DTOC)

The proportion of acute beds occupied by DTOC patients averaged 6.1% over the project.

Delayed Transfer Of Care Instances



Delays in 2016 have not recovered to the level experienced prior to Christmas. This suggests that changes to social care have had an ongoing impact on bed availability.



Elective Operations Cancelled

Elective Operations Cancelled



38,776 elective operations were cancelled over the 26 week period. This represents an average of 29 operations per site per week. The highest recorded weekly number at one site was 228.



Further Comment

The leading indicators of performance, as detailed in this report, have shown a decline over the winter period. The expected recovery in the New Year did not materialise. This decline in performance has taken place despite cancelling an increasing number of elective operations and a significant increase in acute bed capacity equivalent to 2% of the entire acute bed stock. These pressures are compounded by the current staffing shortages reported by many trusts and boards.

Performance is currently 12% below the standard expected – in effect the number of patients whose stay in the ED exceeds four hours is 240% greater than it should be.

The CQC have recently identified a number of trusts deemed to be providing inadequate care in their A&E departments. It is unfortunate indeed that no reference is made to the resources available to these A&E departments within CQC reports. By way of equity NHS Benchmarking data highlights huge disparities in the number of doctors, nurses and even trolley spaces available per thousand patient attendances.

Many commentators and Monitor / NHS Improvement have described A&E performance as 'the canary in the mine'. In the 19th century miners would take a canary into the mine as a way of indicating the presence of dangerous gasses that would otherwise put the miner's lives at risk. Instead of blaming the canary when it showed signs of illness the mine owner would tackle the cause of the problem and act to improve the environment.

The College has stated many times that we need to rebuild A&E as a sustainable, safe and effective service. The STEP campaign focusses on staff recruitment and retention, fair tariffs for hospitals delivering acute care, fair contracts for staff, the eradication of exit block and the provision of co-located urgent but non emergency services.

For further information please visit rcem.ac.uk

