A&E Attendances and Emergency Admissions
November 2024 Statistical Commentary

Main findings

All growth rates are adjusted for calendar days. When comparing a month to the previous year, a daily average is used. Due to the Covid-19 response, caution should be exercised in drawing comparisons with data from previous years.

From June 2023, 4 hour performance data from the 14 Clinical Review of Standard (CRS) field testing trusts have been reintroduced. Care should be taken when comparing performance during the field-testing period (May 2019 – June 2023). For further information on the impact of reintroducing the field-testing trust please see the note here: https://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/

Attendances

- The total number of attendances in November 2024 was 2,311,229. This is an increase of 6.6% when compared with November 2023.
- Attendances at Type 1 A&E departments were 3.0% higher when compared with November 2023.
- Attendances at Type 3 departments were 13.1% higher when compared with November 2023.
- Type 1 growth over the last 3 months, compared to the same period last year, is 1.8% and type 3 growth on the same basis is 10.0%.
- Growth over the last 12 months, compared to the preceding 12 months, for Type 1 is 3.7% and for Type 3 is 9.1% - adjusted for the leap year.

Booked Appointments

- This month there were 80,149 A&E attendances that had been booked. This is a decrease of 11.6% when compared with November 2023.

Emergency Admissions

- There were 552,845 emergency admissions in the month. This is an increase of 1.5% when compared with November 2023.
- Emergency admission growth over the last 3 months, compared to the same period last year, is 2.4% and over the last 12 months, compared to the preceding 12 months, is 5.0% - adjusted for the leap year.
- Emergency admissions via Type 1 A&E departments is 2.9% higher than November 2023.
- Type 1 growth over the last 3 months, compared to the same period last year, is 3.0% and over the last 12 months compared to the preceding 12 months, is 5.9% - adjusted for the leap year.

- Secondary User Service (SUS+) based analysis estimates a 5.7% October 2024 year to date (YTD) growth in emergency admissions. This is composed of 8.9% growth for those with zero length of stay (LoS) and 3.7% growth with a LoS of one or more days.

- SUS+ based analysis estimates a 5.4% October 2024 YTD growth for non-elective admissions. This is composed of 8.7% growth for those with zero LoS and 3.5% with a LoS of one or more days. 37.8% of non-elective admissions had a length of stay of zero days in October 2024 YTD. A full provider breakdown is available on the NHS England statistics website here: https://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/ae-attendances-and-emergency-admissions-2023-24/.

- 28.6% of patients who attended a Type 1 major A&E department required admission to hospital, which compares to 28.6% for November 2023.

Performance

These figures now contain all CRS field testing trusts data in the number of attendances admitted, transferred or discharged within and over 4 hours as the trial has now been surpassed in our comparisons below.

- The number of attendances admitted, transferred or discharged within 4 hours was 1,667,290 this is an increase of 10.2% on November 2023.

- Of these, 813,728 were Type 1 attendances, an increase of 6.0% on November 2023, and 808,315 were Type 3 attendances, an increase of 14.6% on November 2023.

- 72.1% of patients were admitted, transferred or discharged within 4 hours in all A&E Departments in November 2024 compared to 73.0% in October 2024 and 69.8% in November 2023.

- 57.0% of patients were admitted, transferred or discharged within 4 hours in Type 1 A&E departments compared with 58.1% in October 2024, and 55.4% in November 2023.

- 96.7% of patients were admitted, transferred or discharged within 4 hours in Type 3 A&E departments, compared with 97.2% in October 2024 and 95.4% in November 2023.

- There were 140,782 over 4 hour delays from decision to admit to admission this month. The daily average in November 2023 was 4,864 while in November 2024 this has decreased to 4,693, a 3.5% decrease.

- Of these, 45,791 were delayed over 12 hours (from decision to admit to admission). This equates to 1,526 decision to admit delays over 12 hours per day, an increase of 7.7% (110 patients daily) from November 2023.

- 0 out of 122 reporting trusts with Type 1 departments achieved the 95% standard on all types during the month. With additional local activity (mapped attendances) taken into account, no further trusts achieved the standard.

Data Notes

Full tables and an England level time series are available on the NHS England statistics website here:
http://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/

Missing data for November 2024

The following organisations did not submit A&E data for November 2024:

- Beckenham Beacon UCC (AD913)
- Wirral University Teaching Hospital NHS Foundation Trust (RBL) submitted a partial submission due to IT issues

Background

A&E waiting times form part of the NHS Constitution, which contains a list of expected rights and pledges for patients that NHS England take into account when assessing organisational delivery. The operational standard for A&E waiting times is that 95% of patients should be admitted, transferred or discharged within 4 hours of their arrival at an A&E department.

A fuller analysis of the A&E data is available in the form of an annual report which was published in conjunction with former NHS Digital in September or October each year. This report draws on A&E data from both the Monthly A&E Attendances and Emergency Admissions Sitrep published by NHS England and the Hospital Episode Statistics dataset published by former NHS digital. The Hospital Episode Statistics dataset is based on patient level data and so can be broken down in numerous ways that the Monthly Sitreps data cannot. This includes breakdowns of attendances and admissions by age and by diagnosis. The report for 2023-24 can be found here:

Hospital Accident & Emergency Activity, 2023-24 - NHS Digital

Methodology

NHS England compiles A&E attendances and emergency admissions data through a central return that is split into two parts:

- A&E Attendances: This collects the number of A&E attendances, patients spending greater than 4 hours in A&E from arrival to discharge, transfer or admission and the number of patients delayed more than 4 hours from decision to admit to admission.
- Emergency Admissions: This collects the total number of emergency admissions via A&E as well as other emergency admissions (i.e. Not via A&E).

The above data items are split by the following categories of A&E department:

- Type 1 A&E department = Increasingly referred to as an Emergency Department. A consultant led 24-hour service with full resuscitation facilities and designated accommodation for the reception of accident and emergency patients.
- Type 2 A&E department = A consultant led single specialty accident and emergency service or Emergency Department (e.g. ophthalmology, dental) with designated accommodation for the reception of patients.

- Type 3 A&E department. These are now Urgent Treatment Centres (UTCs). These are GP-led, open at least 12 hours a day, every day, offer appointments that can be booked through 111 or through a GP referral, and are equipped to diagnose and deal with many of the most common ailments people attend A&E for.

NHS Trusts, NHS Foundation Trusts, Social Enterprises and GP Practices which average more than 200 attendances or admit 40 emergency patients in a month submit data to NHS England via The Strategic Data Collection Service (SDCS).

SDCS is a secure data collection system used by health and social care organisations to submit data. The collection is opened on the first working day of the following month, and closed at the end of the second day. These submissions are quality checked by NHS England against previous submissions by the provider, and followed up should they be considered outside of their normal variation. Resubmissions or explanations are requested from providers prior to collating the publication files.

Note that the activity growth rates used in this document have been adjusted to take into account the extra day due to the leap years.

System (Formally Sustainability and Transformation Plan) Areas

From April 2017, the data is also presented aggregated to a System (formerly Sustainability and Transformation Plan (STP)) area basis, to better reflect A&E performance in each local area. This has been done by allocating data for each provider to one of the 42 Integrate Care Boards (ICBs) on a geographical one to one basis.

Acute Footprint Mapping

From November 2017, the data is also presented with type 3 activity mapped to partner acute trusts to reflect the performance of that trust footprint as a whole. Type 3 activity is assigned to the closest type 1 provider(s).

Data availability

A&E attendances and emergency admissions data are published to a pre-announced timetable, usually every second Thursday of the month. The data is published on the NHS England website here:
http://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/

Data comparability

Data has been published monthly since June 2015. Before this, data was published weekly from November 2010 to June 2015. Prior to November 2010, data was briefly collected monthly between August 2010 and October 2010 and was collected quarterly from 2003/04 until September 2011.

In order to provide meaningful comparisons of recent monthly data to previous years, we have created an estimated monthly time series from the official weekly data. Monthly figures prior to June 2015 should be regarded as estimates. This monthly time series forms the basis of the analysis and is also published on our web page.
Revised guidance for the A&E attendances and emergency admissions collection applied from December 2015 data onwards. The definition for delays for emergency admissions via A&E from decision to admit to admission was amended to include patients who are

transferred to another provider (disposal code 7). This was to ensure that such patients are counted in the number of patients spending more than 4 or more than 12 hours from decision to admit to admission. This change did not affect the measures of A&E attendances, the numbers waiting four hours from arrival to discharge, transfer or admission, and total emergency admissions which still focus purely on attendances at the same healthcare provider (disposal code 1).

The data can also be compared to A&E data for Wales collected by the Welsh Government, data for Scotland collected from Information Services Division (ISD) Scotland and data for Northern Ireland collected from the Department of Health, Social Services and Public Safety. A description of the technical differences between data from the four administrations can be found here: https://gss.civilservice.gov.uk/health-waiting-time-statistics/

The Welsh Government publishes monthly data on A&E attendances and performance against the 4-hour standard. Data can be found here: https://statswales.wales.gov.uk/Catalogue/Health-and-Social-Care/NHS-Hospital-Waiting-Times/Accident-and-Emergency

ISD Scotland now publishes a weekly update on A&E attendances and performance against the 4-hour standard. This can be found here: http://www.isdscotland.org/Health-Topics/Emergency-Care/Publications/index.asp?ID=1251

The Department of Health, Social Services and Public Safety publishes quarterly data on A&E attendances and performance against the 4-hour standard. Data can be found here: http://www.dhsspsni.gov.uk/index/statistics/hospital/waitingtimes-emergency.htm

The UK Comparative waiting times group has published a summary of the differences in methodologies between the 4 countries: https://gss.civilservice.gov.uk/health-waiting-time-statistics/

12 Hour Waits in ED

There are currently two 12hr A&E waiting metrics reported, one covering the time from arrival to departure (whether that be admission, transfer or discharge) and one covering the period from a decision to admit (DTA) being made and the patient leaving the department for an admission. In most cases there will be more 12hr waits from arrival than 12hr waits from DTA as the later only covers part of the patient's time in department whereas the former covers the whole wait.

Only the decision to admit metric (sometime also known as a 'trolley wait') metric is covered by this publication, as it is part of the NHS constitution.

The 12 hour from arrival waiting times are now published monthly alongside this publication, which can be found for each month, as well as the timeseries, in the same place as this publication; and as part of the joint NHS England and NHS Digital Annual A&E Report

Hospital Accident & Emergency Activity, 2023-24 - NHS Digital

Glossary

4-Hour Standard
The national standard whereby 95% of all patients are admitted, transferred or discharged within 4 hours of arrival.

A&E Attendance
The presence of a patient in an A&E service seeking medical attention.

A&E Type
Collectively the term All Types includes the following department types:
Type 1) Major A&E Departments
Type 2) Single Specialty A&E service (e.g. ophthalmology, dental)
Type 3) Other type of A&E such as Minor Injury Units and Walk-in Centres

Emergency admission
Admission to a hospital bed as an emergency. These can be split into admissions via an A&E department or from other sources (e.g. direct from a GP).

Provider
An organisation that provides NHS treatment or care, for example, an NHS acute trust, mental health trust, community provider, or an independent sector organisation.

Type 1 A&E
A large hospital department which provides a consultant-led, 24 hour service with full resuscitation facilities and designated accommodation for the reception of emergency patients.

Waiting Time
The time of arrival until the time of admission, transfer or discharge.

Delay to admission
The time a patient waited for an admission and is measured from decision to admit to admission (also known as a 'trolley wait').

Feedback Welcomed

We welcome feedback on the content and presentation of the A&E and emergency admissions statistics within this statistical report and those published on the NHS England website. If anyone has any comments on this, or any other issues regarding A&E data and statistics, then please email england.nhsdata@nhs.net

Additional Information

Full details of A&E and emergency admissions data for individual organisations are available at:
http://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/

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