Emergency Care Data Set (ECDS) Data February 2025 and March 2025 (Provisional) Statistical Commentary

Background

The UEC Recovery Plan (https://www.england.nhs.uk/publication/delivery-plan-for-recovering-urgent-and-emergency-care-services/) commits to publication of 12 hours in an Emergency Department (ED) from arrival data on a regular basis from June 2023. This was revised in June 2024 in the UEC Recovery Plan Year 2 (https://www.england.nhs.uk/publication/delivery-plan-for-recovering-urgency-care-services/) commits to publication of 12 hours in an Emergency Department (ED) from arrival data on a regular basis from June 2023. This was revised in June 2024 in the UEC Recovery Plan Year 2 (https://www.england.nhs.uk/publication/delivery-plan-for-recovering-urgency-care-services/) commits to publication of 12 hours in an Emergency Department (ED) from arrival data on a regular basis from June 2023. This was revised in June 2024 in the UEC Recovery Plan Year 2 (<a href="https://www.england.nhs.uk/publication/delivery-plan-for-recovery-plan-for-recovery-plan-for-plan-for-publication/delivery-plan-for-recovery-plan-

This data is sourced from the Emergency Care Dataset (ECDS) and are separate from the data published as part of the Monthly A&E Attendances and Emergency Admissions Official Statistics.

ECDS is a patient-level dataset and contains a high level of patient information, including clinical condition and patient demographics, enabling us to understand capacity and demand and improve patient care.

This publication contains ECDS data including 12 hours from arrival at A&E as official statistics in development for Type 1 & 2 trusts and Urgent Treatment Centre (UTC) providers alongside the current published statistics.

Two months of data are present here: finalised February 2025 and provisional March 2025. The provisional data should be treated as an indicative position and will be superseded by a final version next month.

Main findings

Attendances

Type 1 & 2

- In February 2025 the total number of attendances at type 1 & 2 emergency departments was 1,301,799.
- In March 2025 the total number of attendances at type 1 & 2 emergency departments was 1,411,709.

UTCs

- In February 2025 the total number of attendances at UTCs was 440,447.
- In March 2025 the total number of attendances at UTCs was 450,110.

Emergency Admissions

Type 1 & 2

- There were 321,016 attendances at type 1 & 2 emergency departments resulting in an admission in February 2025.
- There were 325,664 attendances at type 1 & 2 emergency departments resulting in an admission in March 2025.

UTCs

- There were 15,809 attendances at UTCs resulting in an admission in February 2025.
- There were 17,569 attendances at UTCs resulting in an admission in March 2025.

Twelve Hour Delays

- Of all the total attendances in February 2025, 145,009 spent more than 12 hours from arrival at A&E (11.3%).
- Of all the total attendances in March 2025, 137,070 spent more than 12 hours from arrival at A&E (9.7%).

Patient Characteristics (March 2025)

Age

Type 1 & 2

- 25% of type 1 & 2 attendances were for patients aged 65 years or older, with 11% of attendances being for patients 80 years or older. Children under five years old made up 10% of type 1 & 2 attendances, and ages 5 to 14 years also 10%.
- 44% of type 1 & 2 attendances resulting in an admission were for patients aged 65 years or older, with 22% being for patients 80 years or older.
- Type 1 & 2 attendances resulting in an admission for all other age groups was 66% with the lowest percentage being for those aged 5 to 14 years old (4%).

UTCs

- 14% of UTC attendances were for patients aged 65 years or older, with 4% of attendances being for patients 80 years or older. Children under five years old made up 10% of UTC attendances, and ages 5 to 14 years 14%.
- 22% of UTC attendances resulting in an admission were for patients aged 65 years or older, 8% for patients 80 years or older.
- 49% of UTC attendances resulting in an admission were for patients aged between 25 and 64.
- 0 to 14 year olds accounted for 19% of the total number of attendances that resulted in an admission from UTCs.

Gender

Type 1 & 2

• 51% of type 1 & 2 attendances and 52% of type 1 & 2 attendances resulting in an admission were female.

UTCs

 52% of UTC attendances and 53% of UTC attendances resulting in an admission were female.

Ethnicity

Type 1 & 2

• 69% of type 1 & 2 attendances and 75% of type 1 & 2 attendances resulting in an admission were from any white background.

UTCs

 57% of UTC attendances and 68% of UTC attendances resulting in an admission were from any white background.

Chief Complaint

Type 1 & 2

- The highest proportion of type 1 & 2 attendances was for trauma / musculoskeletal (24%), but this group only made up 12% of the type 1 & 2 attendances resulting in an admission.
- The most common reason for type 1 & 2 attendances resulting in an admission was gastrointestinal (16%) followed by circulation / chest (14%) and airway/breathing (14%).

UTCs

- The highest proportion of UTC attendances was for trauma / musculoskeletal (35%), and this group made up 24% of UTC attendances resulting in admission.
- The most common reason for UTC attendances resulting in an admission was Trauma / musculoskeletal (24%), followed by Gastrointestinal (17%) and Circulation / chest (10%).

Frailty

Type 1 & 2

- 67.5% of type 1 & 2 attendances for patients aged 65 and over had no clinical frailty score recorded in the Emergency Care Data Set (ECDS).
- 8.6% of type 1 & 2 attendances for patients aged 65 and over had a clinical frailty score of managing well. This was the highest proportion behind no clinical frailty score.

UTCs

- 90.3% of UTC attendances for patients aged 65 and over had no clinical frailty score recorded in the Emergency Care Data Set (ECDS).
- 3.6% of UTC for patients aged 65 and over had a clinical frailty score of managing well. This was the highest proportion behind no clinical frailty score.

Missing data

The following organisations did not meet the data quality thresholds for inclusion in the data for February 2025:

Ashford and St Peter's Hospitals NHS Foundation Trust (UTC)

Assura Vertis Urgent Care Centres (Birmingham) (UTC)

Blackpool Urgent Care Centre (UTC)

Bracknell Urgent Care Centre WIC (UTC)

County Durham and Darlington NHS Foundation Trust (UTC)

Croydon Health Services NHS Trust (UTC)

Derby Urgent Treatment Centre (UTC)

Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust (UTC)

East Lancashire Hospitals NHS Trust (UTC)

Gloucestershire Health and Care NHS Foundation Trust (UTC)

Grantham Urgent Treatment Centre (UTC)

Isle of Wight NHS Trust (UTC)

Leeds Teaching Hospitals NHS Trust (UTC)

Liverpool University Hospitals NHS Foundation Trust (UTC)

Lir Ea - The Merlyn Vaz Health & Social Care Centre (UTC)

London North West University Healthcare NHS Trust (UTC)

Loughborough Urgent Care Centre (UTC)

Luton Urgent Treatment Centre (UTC)

Malton Urgent Treatment Centre (UTC)

Mersey Care NHS Foundation Trust (UTC)

Milton Keynes Urgent Care Centre (UTC)

Oadby & Wigston Urgent Care Centre (UTC)

Queen Elizabeth Hospital Urgent Care Centre (UTC)

Royal United Hospitals Bath NHS Foundation Trust (UTC)

Sandwell and West Birmingham Hospitals NHS Trust (UTC)

Scarborough Urgent Care Centre (UTC)

Slough Urgent Care Centre (UTC)

South Bristol Urgent Treatment Centre (UTC)

St George's Centre (UTC)

St Mary's Urgent Care Centre @ St Mary's Hospital (UTC)

The Princess Alexandra Hospital NHS Trust (UTC)

The Shrewsbury and Telford Hospital NHS Trust (Type 1 & 2 & UTC)

University College London Hospitals NHS Foundation Trust (UTC)

University Hospitals Dorset NHS Foundation Trust (UTC)

Whitstable Medical Practice (UTC)

Wirral University Teaching Hospital NHS Foundation Trust (UTC)

York Hospital Urgent Care Centre (UTC)

The following organisations did not meet the data quality thresholds for inclusion in the data for March 2025 (Provisional).

Ashford and St Peter's Hospitals NHS Foundation Trust (UTC)

Bedfordshire Hospitals NHS Foundation Trust (UTC)

Blackpool Urgent Care Centre (UTC)

Bridgewater Community Healthcare NHS Foundation Trust (UTC)

County Durham and Darlington NHS Foundation Trust (UTC)

Croydon Health Services NHS Trust (UTC)

Derby Urgent Treatment Centre (UTC)

Derbyshire Community Health Services NHS Foundation Trust (UTC)

Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust (UTC)

Dorset Healthcare University NHS Foundation Trust (UTC)

East Lancashire Hospitals NHS Trust (UTC)

Erith And District Hospital Ucc (Hurley Group) (UTC)

Frimley Health NHS Foundation Trust (Type 1 & 2)

Gloucestershire Health and Care NHS Foundation Trust (UTC)

Grantham Urgent Treatment Centre (UTC)

Guy's and St Thomas' NHS Foundation Trust (Type 1 & 2)

Humber Teaching NHS Foundation Trust (UTC)

Isle of Wight NHS Trust (UTC)

Leeds Teaching Hospitals NHS Trust (UTC)

Liverpool University Hospitals NHS Foundation Trust (UTC)

Liverpool Women's NHS Foundation Trust (Type 1 & 2)

LIr Ea - The Merlyn Vaz Health & Social Care Centre (UTC)

London North West University Healthcare NHS Trust (UTC)

Loughborough Urgent Care Centre (UTC)

Luton Urgent Treatment Centre (UTC)

Malton Urgent Treatment Centre (UTC)

Mersey and West Lancashire Teaching Hospitals NHS Trust (UTC)

Mersey Care NHS Foundation Trust (UTC)

Milton Keynes Urgent Care Centre (UTC)

Northern Care Alliance NHS Foundation Trust (UTC)

Oadby & Wigston Urgent Care Centre (UTC)

Queen Elizabeth Hospital Urgent Care Centre (UTC)

Royal United Hospitals Bath NHS Foundation Trust (UTC)

Sandwell and West Birmingham Hospitals NHS Trust (Type 1 &2, UTC)

Scarborough Urgent Care Centre (UTC)

Slough Urgent Care Centre (UTC)

South Bristol Urgent Treatment Centre (UTC)

Southport and Ormskirk Hospital NHS Trust (UTC)

St George's Centre (UTC)

St Mary's Urgent Care Centre @ St Mary's Hospital (UTC)

Stockport NHS Foundation Trust (Type 1& 2)

Sussex Community NHS Foundation Trust (UTC)

The Newcastle Upon Tyne Hospitals NHS Foundation Trust (UTC)

The Princess Alexandra Hospital NHS Trust (UTC)

The Shrewsbury and Telford Hospital NHS Trust (Type 1 & 2, UTC)

University College London Hospitals NHS Foundation Trust (UTC)

University Hospitals Dorset NHS Foundation Trust (UTC)

Whitstable Medical Practice (UTC)

Wirral University Teaching Hospital NHS Foundation Trust (UTC)

York and Scarborough Teaching Hospitals NHS Foundation Trust (UTC)

York Hospital Urgent Care Centre (UTC)

For further details on data quality and completeness please refer to the supporting Excel file(s).

Methodology

Record-level data is submitted to the Emergency Care Dataset (ECDS) via the SUS+ service. This data is then aggregated by NHS England to produce these data. Data is extracted approximately 5 to 6 weeks post month-end for finalised data and approximately 5 to 10 days post month-end for provisional data.

Data is presented at site-level, which is aggregated to ICB-level using Organisation Data Service (ODS) mapping of site to ICB.

For the full methodology of this publication please see the ECDS technical definitions document (http://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/).

Data availability

These 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 revisions

These data are published as provisional statistics. A final version will be published at year-end (date tbc).

Data comparability

These data can be compared to the Monthly A&E Attendances and Emergency Admissions data published by NHS England

(http://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/). A summary of the comparability between these sources is available here: (http://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/)

These data can also be compared to A&E data for Wales collected by the Welsh Government, data for Scotland collected by the Information Services Division (ISD) Scotland, and data for Northern Ireland collected by 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 12-hour from arrival performance. Data can be found here:

https://statswales.gov.wales/Catalogue/Health-and-Social-Care/NHS-Hospital-Waiting-Times/emergency-department

ISD Scotland publishes weekly data on A&E attendances and 12-hour from arrival performance. Data 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 12-hour from arrival performance. Data can be found here: http://www.dhsspsni.gov.uk/index/statistics/hospital/waitingtimes-emergency.htm

12-hour from arrival performance data were published as part of a joint NHS England and NHS Digital Annual A&E Report (https://digital.nhs.uk/data-and-information/publications/statistical/hospital-accident--emergency-activity/2021-22).

Glossary

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 (also referred to as Emergency Departments (EDs))

Type 2) Single Specialty A&E services (e.g. ophthalmology, dental)

Type 3) Other types of A&E such as Urgent Treatment Centres (UTCs), Urgent Care Centres (UCCs), Minor Injury Units (MIUs) and Walk-in Centres (WICs)

Emergency admission via A&E (also referred to as an Admitted A&E Attendance) Admission to a hospital bed as an emergency via an A&E Department.

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 major A&E or emergency 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.

Feedback welcomed

We welcome feedback on the content and presentation of the data within this 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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