

Supplementary ECDS Analysis Technical Specification

Version 3.4, November 2025



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1. Department Type Grouping

1.1 Definition

Some metrics may only be shown for Type 1 and 2 department types, others are shown with a Type 1 and 2 department and All Types breakdown.

Type 1/2

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.

OR

Type 2 A&E department = A consultant led single service or Emergency Department (e.g. ophthalmology, dental) with designated accommodation for the reception of patients.

All Types

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.

OR

Type 2 A&E department = A consultant led single service or Emergency Department (e.g. ophthalmology, dental) with designated accommodation for the reception of patients.

OR

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

OR

Non-UTC Type 3 or 4 facilities that continue to operate as MIUs, UCC, WICs because of ongoing service reconfiguration and/or being given a time limited exemption should continue to report as Type 3 facilities until planned changes are implemented.

2. A&E Attendances

2.1 Definition

A count of the number of unplanned attendances at an emergency care department.

Attendances should be counted against the date of departure from the emergency care department.

Where a patient is streamed between departments on the same site, only the attendance at the final department should be counted. The arrival date and time should be carried over from the first record to any subsequent records.

2.1.1 Numerator

Sum of unplanned attendances that left an emergency care department in each month.

2.1.2 Inclusions & Exclusions

Non-A&E Departments

UEC Activity Type excludes:

- NULL or invalid UEC Activity Type
- 05 – Same Day Emergency Care Attendance
- 06 – UEC Extended Care Episode
- 07 – Hot Clinic Attendance

Patient dead on arrival

Discharge status excludes:

- 63238001 – Dead on arrival at hospital
- Or

Attendance Category excludes:

- X – Not applicable, patient dead on arrival

Patient was a planned follow up

Attendance Category excludes:

- 4 – Planned follow-up attendance within 7 days of 1st attendance at same department

3. Admitted Attendances

3.1 Definition

A count of unplanned attendances that have a disposal of admitted.

This is defined using Emergency Care Discharge Destination and consists of the following codes:

- 306706006 – Discharge to ward
- 1066361000000104 – ED discharge to high dependency unit
- 1066371000000106 – ED discharge to coronary care unit
- 1066381000000108 - ED discharge to special care baby unit
- 1066391000000105 – ED discharge to intensive care unit
- 1066401000000108 – ED discharge to neonatal intensive care unit
- 1874161000000104 – ED discharge to operating theatre

3.1.1 Numerator

Sum of unplanned attendances at an emergency care department with an admitted or transferred discharge destination code in each month.

3.1.2 Inclusions & Exclusions

Non-A&E Departments

[UEC Activity Type](#) excludes:

- NULL or invalid UEC Activity Type
- 05 – Same Day Emergency Care Attendance
- 06 – UEC Extended Care Episode
- 07 – Hot Clinic Attendance

Patient dead on arrival

[Discharge status](#) excludes:

- 63238001 – Dead on arrival at hospital
- Or

[Attendance Category](#) excludes:

- X – Not applicable, patient dead on arrival

Patient was a planned follow up

[Attendance Category](#) excludes:

- 4 – Planned follow-up attendance within 7 days of 1st attendance at same department

Patient was discharged or unknown disposal

[Discharge Destination](#) excludes:

- NULL or invalid discharge destination code
- 306689006 - Discharge to home
- 306691003 - Discharge to residential home

306694006 - Discharge to nursing home
306705005 - Discharge to police custody
50861005 - Patient discharge, to legal custody
305398007 - Admission to the mortuary
1066331000000109 – ED discharge to ED short stay ward
1066341000000100 – ED discharge to ambulatory emergency care service
19712007 – Patient transfer to another health care facility
183919006 – Urgent admission to hospice

4. Proportion of attendances with a total time in department of over 12 hours from arrival (Type 1 or 2 Only)

4.1 Definition

The proportion of attendances that spent more than 12 hours in an emergency care department from arrival to departure (admission, transfer or discharge).

Arrival time is the point that the patient is registered on the ED system and should be as close to the point of the patient crossing the threshold of the ED as possible.

For patients discharged, the time of departure is defined as when the patient's clinical episode is finished, unless they are waiting for hospital arranged transport or social care / social service support. In these cases, the time of departure is the time the patient leaves the department. Patients awaiting family or private transport who wish to make their own arrangements should be considered discharged once the clinical episode is complete whether or not they have actually left the department.

For patients transferred, it is the time that the patient leaves the department to continue their care at another NHS organisation or other public/private sector agency.

For patients with a discharge destination group of admitted or other, it is the time when the patient leaves the department and ceases to be under the care of the ED consultant / senior clinician leading the department. For example, the patient may go to:

- An operating theatre
- A bed in a ward
- A diagnostic test or treatment directly en-route to a bed in a ward or operating theatre
- A Same Day Emergency Care (SDEC) unit or similar short stay admission unit

4.1.1 Numerator

Sum of unplanned attendances where the patient waited more than 720 minutes from arrival in the department to departure from the emergency care department in each month.

4.1.2 Denominator

Sum of unplanned attendances that left an emergency care department in each month.

4.1.3 Inclusions & Exclusions

Non-Type 1/2 A&E Departments

[UEC Activity Type](#) excludes:

NULL or invalid UEC Activity Type

03 – UTCs

04 – Other A&E Department Type

05 – Same Day Emergency Care Attendance

06 – UEC Extended Care Episode

07 – Hot Clinic Attendance

Patient dead on arrival

[Discharge status](#) excludes:

63238001 – Dead on arrival at hospital

Or

[Attendance Category](#) excludes:

X – Not applicable, patient dead on arrival

Patient was a planned follow up

[Attendance Category](#) excludes:

4 – Planned follow-up attendance within 7 days of 1st attendance at same department

Records with negative or missing departure date/time stamps

Emergency Care Departure Date excludes:

NULL

<0

Or

Emergency Care Departure Time excludes:

NULL

<0

5. Proportion of attendances with a total time in department of over 12 hours from arrival (All Types)

5.1 Definition

The proportion of attendances that spent more than 12 hours in an emergency care department from arrival to departure (admission, transfer or discharge).

Arrival time is the point that the patient is registered on the ED system and should be as close to the point of the patient crossing the threshold of the ED as possible.

For patients discharged, the time of departure is defined as when the patient's clinical episode is finished, unless they are waiting for hospital arranged transport or social care / social service support. In these cases, the time of departure is the time the patient leaves the department. Patients awaiting family or private transport who wish to make their own arrangements should be considered discharged once the clinical episode is complete whether or not they have actually left the department.

For patients transferred, it is the time that the patient leaves the department to continue their care at another NHS organisation or other public/private sector agency.

For patients with a discharge destination group of admitted or other, it is the time when the patient leaves the department and ceases to be under the care of the ED consultant / senior clinician leading the department. For example, the patient may go to:

- An operating theatre
- A bed in a ward
- A diagnostic test or treatment directly en-route to a bed in a ward or operating theatre
- A Same Day Emergency Care (SDEC) unit or similar short stay admission unit

5.1.1 Numerator

Sum of unplanned attendances where the patient waited more than 720 minutes from arrival in the department to departure from the emergency care department in each month.

5.1.2 Denominator

Sum of unplanned attendances that left an emergency care department in each month.

5.1.3 Inclusions & Exclusions

Non-A&E Departments

UEC Activity Type excludes:

NULL or invalid UEC Activity Type

05 – Same Day Emergency Care Attendance

06 – UEC Extended Care Episode

07 – Hot Clinic Attendance

Patient dead on arrival

Discharge status excludes:

63238001 – Dead on arrival at hospital

Or

Attendance Category excludes:

X – Not applicable, patient dead on arrival

Patient was a planned follow up

Attendance Category excludes:

4 – Planned follow-up attendance within 7 days of 1st attendance at same department

Records with negative or missing departure date/time stamps

Emergency Care Departure Date excludes:

NULL

<0

Or

Emergency Care Departure Time excludes:

NULL

<0

6. Proportion of attendances admitted, transferred or discharged within 4 hours of arrival, split by discharge destination grouping

6.1 Definition

The proportion of attendances that spent less than 4 four hours in an emergency care department from arrival to departure (admission, transfer or discharge).

Arrival time is the point that the patient is registered on the ED system and should be as close to the point of the patient crossing the threshold of the ED as possible.

For patients discharged, the time of departure is defined as when the patient's clinical episode is finished, unless they are waiting for hospital arranged transport or social care / social service support. In these cases, the time of departure is the time the patient leaves the department. Patients awaiting family or private transport who wish to make their own arrangements should be considered discharged once the clinical episode is complete whether or not they have actually left the department.

For patients transferred, it is the time that the patient leaves the department to continue their care at another NHS organisation or other public/private sector agency.

For patients with a discharge destination group of admitted or other, it is the time when the patient leaves the department and ceases to be under the care of the ED consultant / senior clinician leading the department. For example, the patient may go to:

- An operating theatre
- A bed in a ward
- A diagnostic test or treatment directly en-route to a bed in a ward or operating theatre
- A Same Day Emergency Care (SDEC) unit or similar short stay admission unit

6.1.1 Numerator

Sum of unplanned attendances where the patient waited less than 240 minutes from arrival in the department to departure from the emergency care department in each month.

6.1.2 Denominator

Sum of unplanned attendances that left an emergency care department in each month.

6.1.3 Inclusions & Exclusions

Non-Type 1/2 A&E Departments

[UEC Activity Type](#) excludes:

NULL or invalid UEC Activity Type

03 – UTCs

04 – Other A&E Department Type

05 – Same Day Emergency Care Attendance

06 – UEC Extended Care Episode

07 – Hot Clinic Attendance

Patient dead on arrival

[Discharge status](#) excludes:

63238001 – Dead on arrival at hospital

Or

[Attendance Category](#) excludes:

X – Not applicable, patient dead on arrival

Patient was a planned follow up

[Attendance Category](#) excludes:

4 – Planned follow-up attendance within 7 days of 1st attendance at same department

Records with negative or missing departure date/time stamps

[Emergency Care Departure Date](#) excludes:

NULL

<0

Or

[Emergency Care Departure Time](#) excludes:

NULL

<0

Activity is grouped by the following discharge destination categories:

Group	Code	Description
Admitted	306706006	Discharge to ward
	1066361000000104	Discharge to high dependency unit
	1066371000000106	Discharge to coronary care unit
	1066381000000108	Discharge to special care baby unit
	1066391000000105	Discharge to intensive care unit
	1066401000000108	Discharge to neonatal intensive care unit
	1874161000000104	Discharge to operating theatre
Non-Admitted	306689006	Discharge to home
	306691003	Discharge to residential home
	306694006	Discharge to nursing home
	306705005	Discharge to police custody
	50861005	Patient discharge, to legal custody
Other	305398007	Admission to the mortuary
	1066331000000109	Discharge to ED short stay ward
	1066341000000100	Discharge to ambulatory emergency care service
	1066351000000102	Discharge to hospital at home service
	19712007	Patient transfer to another health care facility
	183919006	Urgent admission to hospice

7. Number and proportion of mental health related ED attendances admitted, transferred or discharged over 24 hours from arrival as a proportion of all ED attendances

7.1 Definition

The number of mental health related ED attendances that spent more than 24 hours in an emergency care department from arrival to departure (admission, transfer or discharge), shown as a proportion of total ED attendances.

Arrival time is the point that the patient is registered on the ED system and should be as close to the point of the patient crossing the threshold of the ED as possible.

For patients discharged, the time of departure is defined as when the patient's clinical episode is finished, unless they are waiting for hospital arranged transport or social care / social service support. In these cases, the time of departure is the time the patient leaves the department. Patients awaiting family or private transport who wish to make their own

arrangements should be considered discharged once the clinical episode is complete whether or not they have actually left the department.

For patients transferred, it is the time that the patient leaves the department to continue their care at another NHS organisation or other public/private sector agency.

For patients with a discharge destination group of admitted or other, it is the time when the patient leaves the department and ceases to be under the care of the ED consultant / senior clinician leading the department. For example, the patient may go to:

- An operating theatre
- A bed in a ward
- A diagnostic test or treatment directly en-route to a bed in a ward or operating theatre
- A Same Day Emergency Care (SDEC) unit or similar short stay admission unit

A mental health related attendance is any attendance that meets the following criteria defined in the Inclusions & Exclusions section below

7.1.1 Numerator

Sum of unplanned mental health related ED attendances where the patient waited more than 1440 minutes from arrival in the department to departure from the emergency care department in each month.

7.1.2 Denominator

Sum of unplanned ED attendances in the emergency care department in each month.

7.1.3 Inclusions & Exclusions

Non-Type 1/2 A&E Departments

UEC Activity Type excludes:

NULL or invalid UEC Activity Type

03 – UTCs

04 – Other A&E Department Type

05 – Same Day Emergency Care Attendance

06 – UEC Extended Care Episode

07 – Hot Clinic Attendance

Patient dead on arrival

Discharge status excludes:

63238001 – Dead on arrival at hospital

Or

Attendance Category excludes:

X – Not applicable, patient dead on arrival

Patient was a planned follow up

Attendance Category excludes:

4 – Planned follow-up attendance within 7 days of 1st attendance at same department

Records with negative or missing departure date/time stamps

Emergency Care Departure Date excludes:

NULL

<0

Or

Emergency Care Departure Time excludes:

NULL

<0

Mental health related attendances (numerator only)

Emergency Care Chief Complaint includes:

248062006 – self harm

272022009 – depressive feelings

366979004 – depressed mood (new term)

6471006 – feeling suicidal

48694002 – feeling anxious

248020004 – behaviour: unusual

7011001 – hallucinations

2073000 – delusions

OR

Emergency Care Injury Intent includes:

276853009 – Self-inflicted injury

OR

Diagnosis SNOMED CT includes:

52448006 – dementia

2776000 – delirium

33449004 – personality disorder

72366004 – eating disorder
191736004 – obsessive compulsive disorder
371631005 – panic disorder
197480006 – anxiety disorder
35489007 – depressive disorder
13746004 – bipolar affective disorder
58214004 – schizophrenia
69322001 – psychotic disorder
44376007 – dissociative disorder
397923000 – somatisation disorder
30077003 – somatoform pain disorder
17226007 – adjustment disorder
50705009 – factitious disorder
225624000 – panic attack

8. Proportion of paediatrics attendances admitted, transferred or discharged within 4 hours of arrival

8.1 Definition

The proportion of paediatric attendances that spent less than 4 four hours in an emergency care department from arrival to departure (admission, transfer or discharge).

Arrival time is the point that the patient is registered on the ED system and should be as close to the point of the patient crossing the threshold of the ED as possible.

For patients discharged, the time of departure is defined as when the patient's clinical episode is finished, unless they are waiting for hospital arranged transport or social care / social service support. In these cases, the time of departure is the time the patient leaves the department. Patients awaiting family or private transport who wish to make their own arrangements should be considered discharged once the clinical episode is complete whether or not they have actually left the department.

For patients transferred, it is the time that the patient leaves the department to continue their care at another NHS organisation or other public/private sector agency.

For patients with a discharge destination group of admitted or other, it is the time when the patient leaves the department and ceases to be under the care of the ED consultant / senior clinician leading the department. For example, the patient may go to:

- An operating theatre
- A bed in a ward
- A diagnostic test or treatment directly en-route to a bed in a ward or operating theatre
- A Same Day Emergency Care (SDEC) unit or similar short stay admission unit

Metric is presented split by department type (Type 1/2, Type 3 & All Types).

8.1.1 Numerator

Sum of unplanned paediatric attendances where the patient waited less than 240 minutes from arrival in the department to departure from the emergency care department in each month.

8.1.2 Denominator

Sum of unplanned paediatric attendances that left an emergency care department in each month.

8.1.3 Inclusions & Exclusions

Non-A&E Departments

[UEC Activity Type](#) excludes:

NULL or invalid UEC Activity Type

05 – Same Day Emergency Care Attendance

06 – UEC Extended Care Episode

07 – Hot Clinic Attendance

Patient dead on arrival

[Discharge status](#) excludes:

63238001 – Dead on arrival at hospital

Or

[Attendance Category](#) excludes:

X – Not applicable, patient dead on arrival

Patient was a planned follow up

[Attendance Category](#) excludes:

4 – Planned follow-up attendance within 7 days of 1st attendance at same department

Records with negative or missing departure date/time stamps

[Emergency Care Departure Date](#) excludes:

NULL

<0

Or

[Emergency Care Departure Time](#) excludes:

NULL

<0

Attendances for patients under 16 years old:

[Age at CDS Activity Date](#) excludes:

>=16

9. Patient Characteristics

9.1 Age

Attendances and Admitted Attendances are broken down by Age using [Age at CDS Activity Date](#) and split into the following year age bands:

0-4 years

5-14 years

15-24years

25-44 years

45-64 years

65-79 years

80+ years

Any records without an age record are grouped as NULL/Unknown.

9.2 Gender

Attendances and Admitted Attendances are broken down by Gender using [Person Stated Gender Code](#) and grouped as follows:

1 – Male

2 – Female

9 – Indeterminate

Any records without a gender recorded are grouped as NULL/Unknown.

9.3 Ethnic Group

Attendances and Admitted Attendances are broken down by Ethnic Group using Ethnic Category and grouped as follows:

A, B or C – Any White Background
D, E, F or G – Any Mixed Background
H, J, K, L – Any Asian Background
M, N, P – Any Black Background
R or S – Any Other Ethnic Group
Z – Not Stated

Any records without Ethnic Category report are grouped as NULL/Unknown

9.4 Chief Complaint Group

Attendances and Admitted Attendances are broken down by Chief Complaint Group using [Emergency Care Chief Complaint](#) and grouped as per the groupings in the [ECDS Technical Output Specification](#). The Chief Complaint Groups are:

Airway / breathing
Circulation / chest
Environmental
Eye
Gastrointestinal
General / minor / admin
Genitourinary
Head and neck
Neurological
ObGyn
Psychosocial / Behaviour change
Skin
Trauma / musculoskeletal

Any records without a Chief Complaint Recorded as grouped by NULL/Unknown.

9.5 Initial Clinical Frailty Score

Attendances and Admitted Attendances are broken down by the initial recorded Clinical Frailty Score for patients aged 65+ using either Clinical [Coded Finding](#) or Clinical Scored Assessment and grouped as per the groupings in the [ECDS Technical Output Specification](#).

A patient may have multiple findings or assessments during a single ED Spell, we take the first recorded as based on the Timestamp submitted.

The Clinical Frailty Scores are:

Very Fit
Well
Managing Well
Vulnerable
Mildly Frail
Moderately Frail
Severely Frail
Very Severely Frail
Terminally Ill

Any records with an invalid Clinical Frailty Score or without a Clinical Frailty Score as grouped by NULL/Unknown.

10. Data Coverage Requirement

10.1 Current data completeness & quality requirements

As of October 2025, the only requirement for inclusion in the publication is that the site has at least 100 unplanned attendances reported each month.

10.2 Historic data completeness & quality requirements

Prior to October 2025 the following criteria were applied:

Attendances

- Data submitted for every day in the month

Admitted Attendances

- Data submitted for every day in the month
- At least 90% of records have a valid discharge destination code
- More than one discharge destination code is used throughout the month

12hr Performance

- Data submitted for every day in the month
- At least 90% of records have a valid departure date/time

Age

- Data submitted for every day in the month

Gender

- Data submitted for every day in the month

Ethnic Group

- Data submitted for every day in the month
- At least 90% of records have a valid ethnic group code

Chief Complaint

- Data submitted for every day in the month
- At least 90% of records have a valid chief complaint code
- More than one chief complaint code is used throughout the month