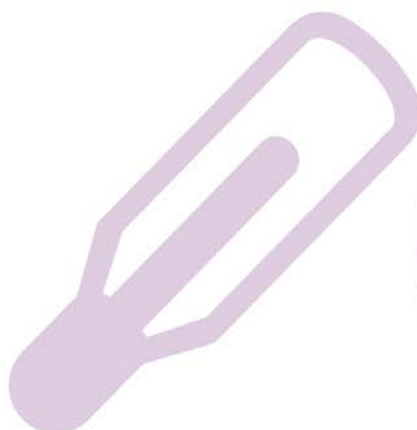


RCEM Winter Flow Project

Analysis of the data so far: 15th March 2019



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 four countries 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 fourth year. In our view, the project has also been instrumental in making the case for additional resources for the health sector; which is now reflected in the new settlement for the NHS which has recently been announced by the Government.

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. In an effort to reflect on-going staff shortages, we have also asked participating providers to tell us how many locum and agency staff are working in their Emergency Departments. This staffing measure is now in its second year. These data points 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. Over 50 Trusts/Boards have submitted these data on a weekly basis since the beginning of October.

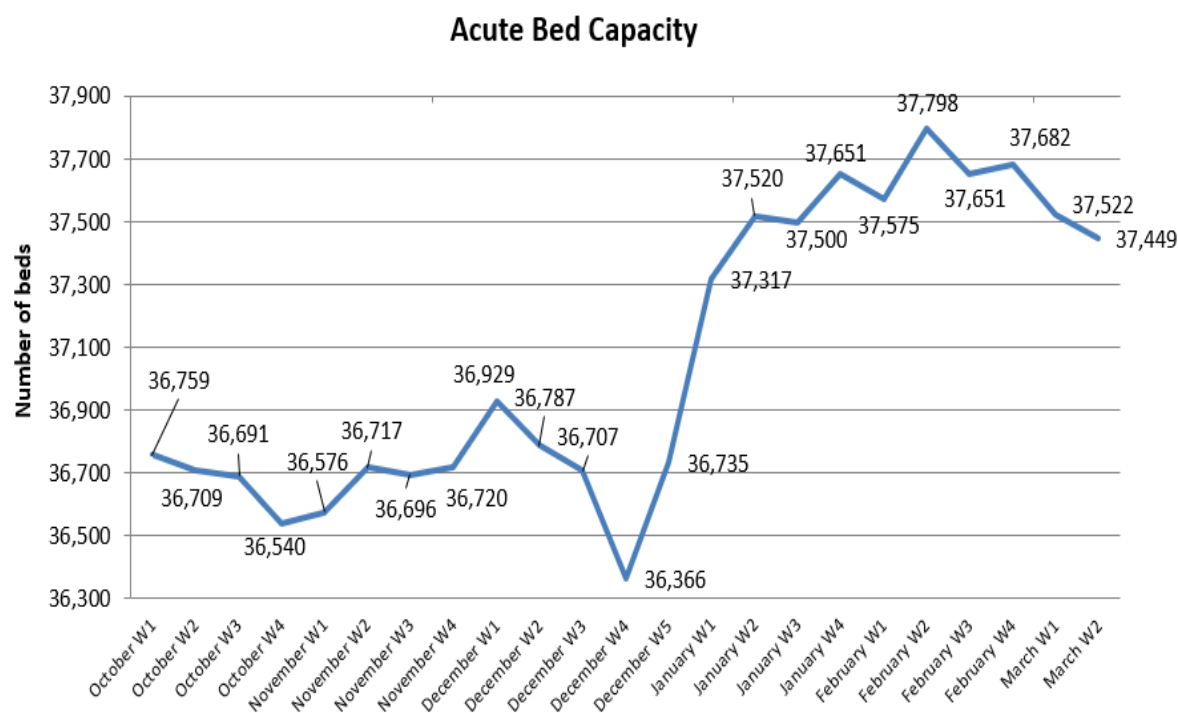
Published on a Friday of the week following data collection, the summary data provide a current overview of 'winter pressures'. The College is grateful to the participants who represent Trusts/Boards of all sizes and geographical locations.

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

The data have already been of immense value to the College and allow 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

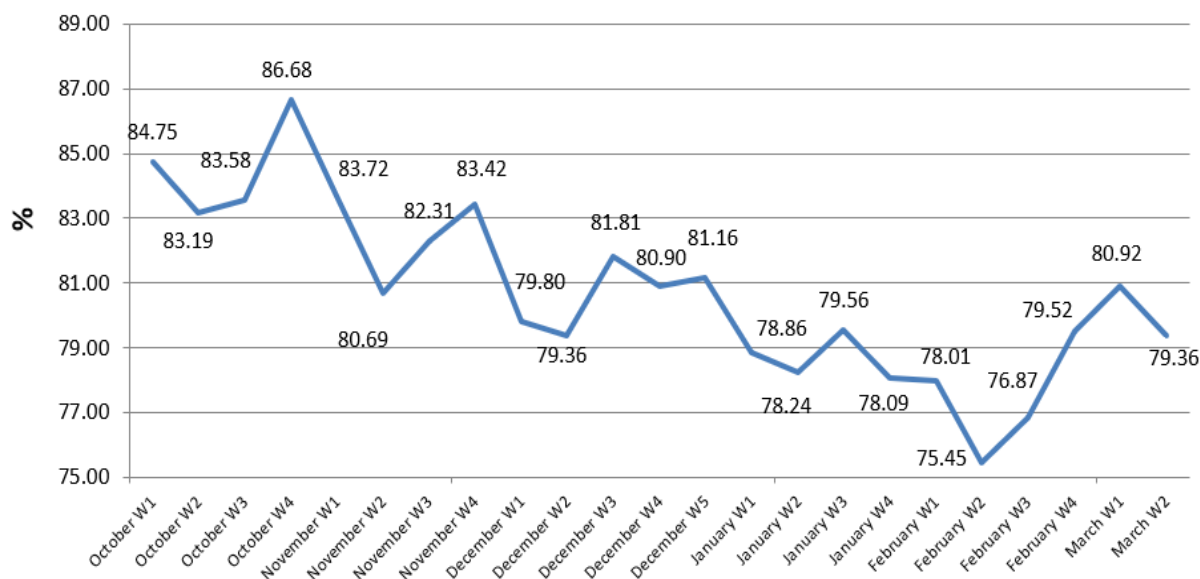
In the second week of March, the number of beds within the project group decreased to 37,449 – down from 37,522 the previous week. In total, there has been a 4.5% increase in the aggregate bed stock from the project starting point.

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	3	17	16	11	7

Graph of four-hour performance by week since October

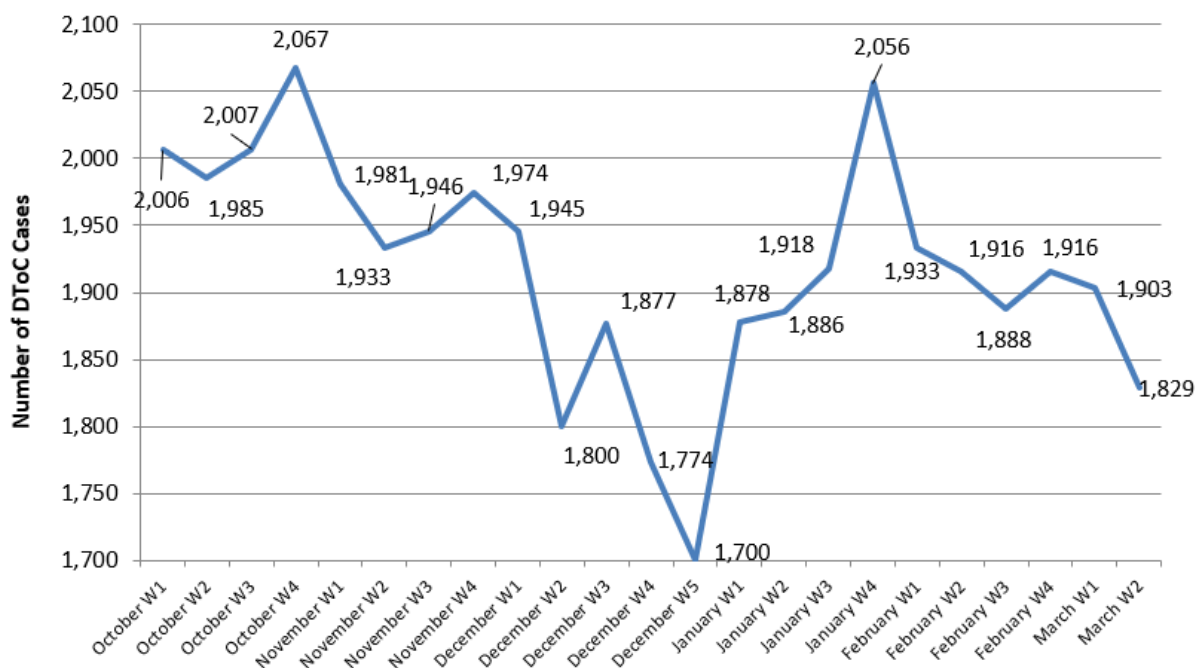
4 Hour Standard Performance - Simple Average Basis



In the second week of March, four-hour standard performance stood at 79.36% - down from 80.92% the previous week. The underlying picture shows 28 increases and 25 decreases across the project group.

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

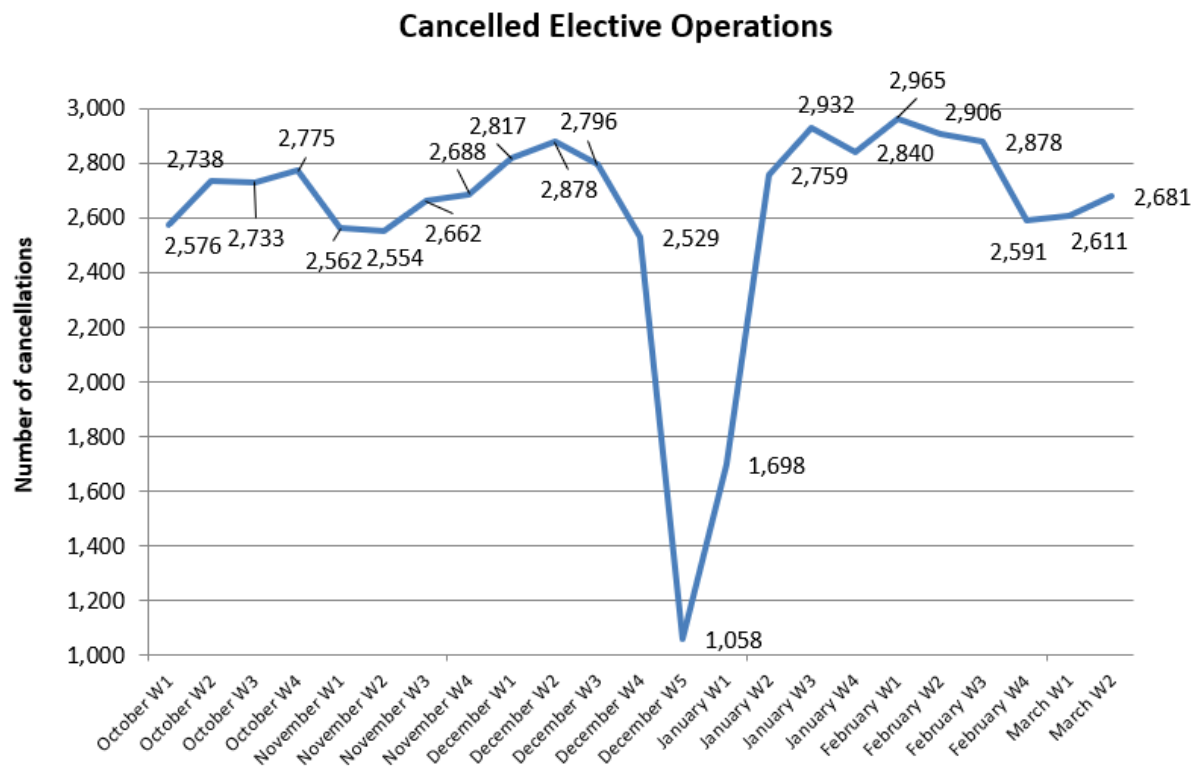
Delayed Transfer of Care Cases



The number of patients subject to DTOC in the second week of March was 1,829 – down from 1,903 the previous week. This translates to 4.88% of acute bed stock - down from 5.07%

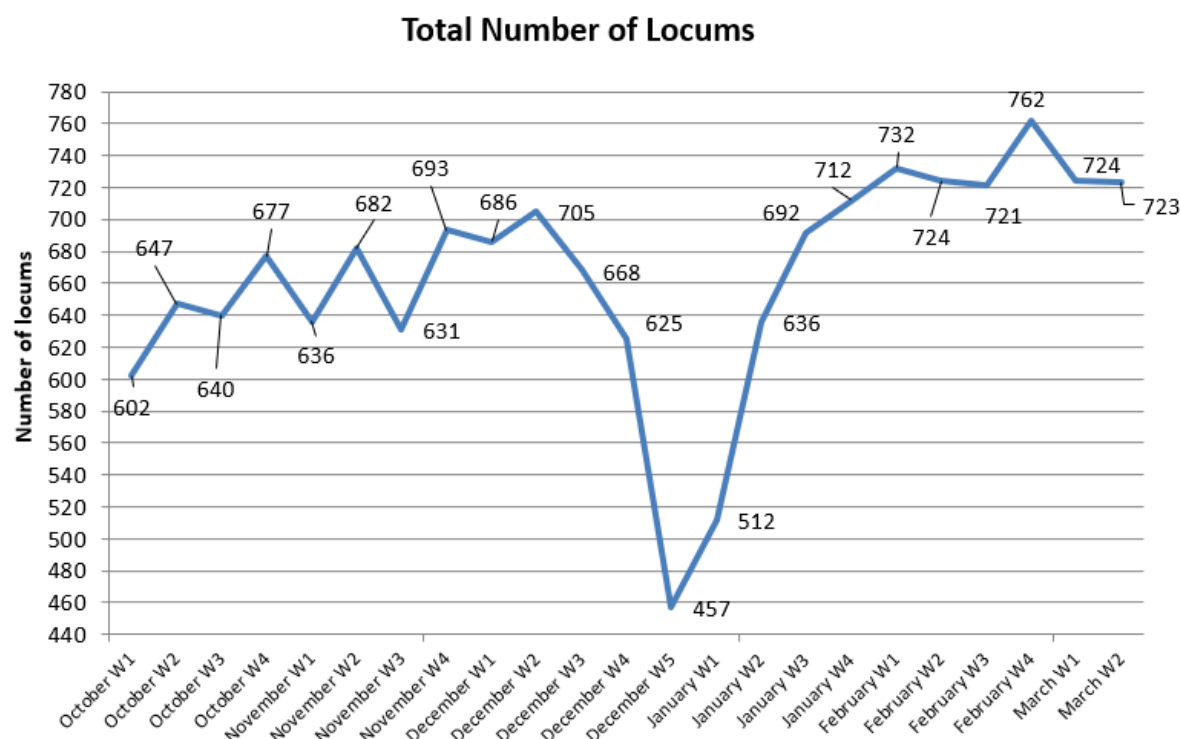
the previous week. The range across all contributors for this week is a minimum 0.00% to a maximum 20.2%.

Graph of cancelled elective operations since October



A total of 2,681 elective operations were recorded as cancelled this week – up from 2,611 the previous week. A total of 60,227 elective operations have been cancelled over the project to date. This represents an overall average of 49 cancelled operations per site per week over the project as a whole.

Graph of number of locum and agency staff since October



In the second week of March, the number of locum and agency doctors and nurses employed within Emergency Departments within the Winter Flow Project group stood at 723 almost unchanged from 724 the previous week.

Overall

The Winter Flow data reported this week shows that much of the improvement in Four-Hour Standard performance in recent weeks appears to have come to a halt. At 79.36%, performance is 1.56 percentage points lower than was the case the previous week. Performance is 2.83 percentage points lower than was the case at the same point in 2015-16 (82.19%), 4.95 percentage points lower than was the case at the same point in 2016-17 (84.31%) but a notable 4.39 percentage points higher than was the case at the same point in 2017-18 (74.97%).

Although when compared to last year this performance may seem like welcome news, this cannot disguise the fact that profound problems remain. We are 15 percentage points shy of compliance with the Four-Hour Standard and well below the 85% threshold we have previously highlighted as when Emergency Departments enter the 'red zone' '[at] the highest level of risk for patient and staff harm.'¹

This comes despite some otherwise positive news from other aspects of our reporting. At 1,829 the number of patients subject to Delayed Transfers of Care is at its lowest point since the last week of December (1,700) and has fallen by 227 patients from its recent highpoint of 2,056 recorded in the fourth week of January.

¹ [Improving Safety in the Emergency Department this Winter](#)

Unfortunately, as we also pointed out in our interim report for the Winter Flow Project this year,² helpful though this is, these gains in delayed transfers have been all but wiped out by a reduction in the bed base over the same period. Since the fourth week of January the number of available beds across project contributors has fallen by 202 while the number of DTOC patients has fallen by 227.

In this situation gains in terms of bed occupancy are negligible and patient waiting on corridors and the poor Four-Hour Standard performance we have seen can be expected. This then places the onus on Emergency Departments to keep their patients safe by enhancing their staffing levels. With a total of 723 locum and agency staff we can see that Departments are continuing to strive to put their patients first at considerable cost. The number of such staff employed within the project group on that basis is 18.91% higher than was the case at the same point last year (608).

² [Winter Flow Interim Report - October 2018 to December 2018](#)
Published 15 March 2019