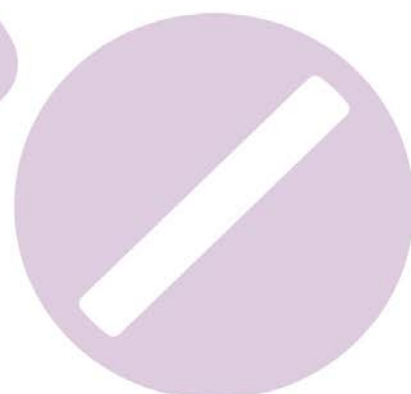
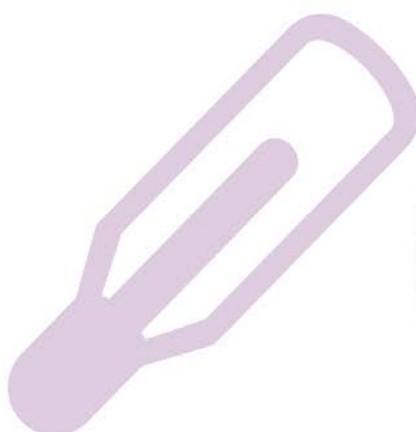


# RCEM Winter Flow Project

Analysis of the data so far: 14<sup>th</sup> December



## 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 nations 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.

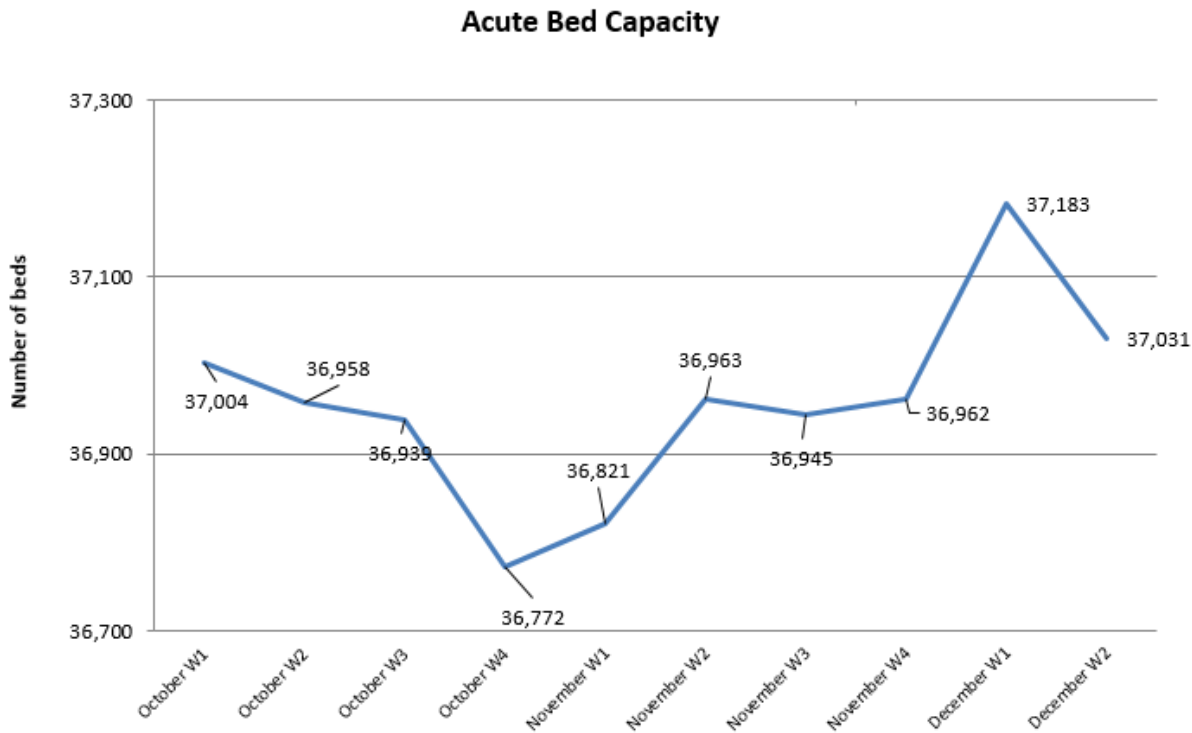
Published on a Friday of the week following data collection, the summary data provide a current overview of 'winter pressures'. The College is grateful to the participants who represent Trusts/Boards of all sizes and geographical locations.

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 though 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

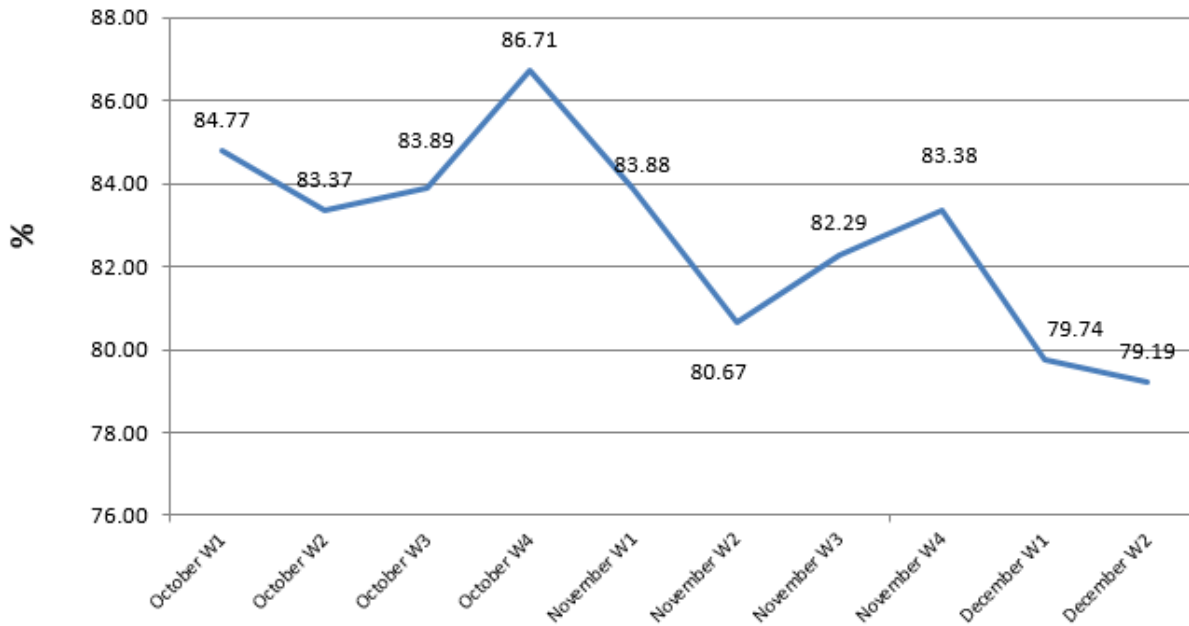
In the second week of December, the number of beds within the project group decreased to 37,031 – down from 37,183 the previous week. In total, there has been a 1.5% increase in the aggregate bed stock from the project starting point.

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	11	30	8	5	0

## Graph of four-hour performance by week since October

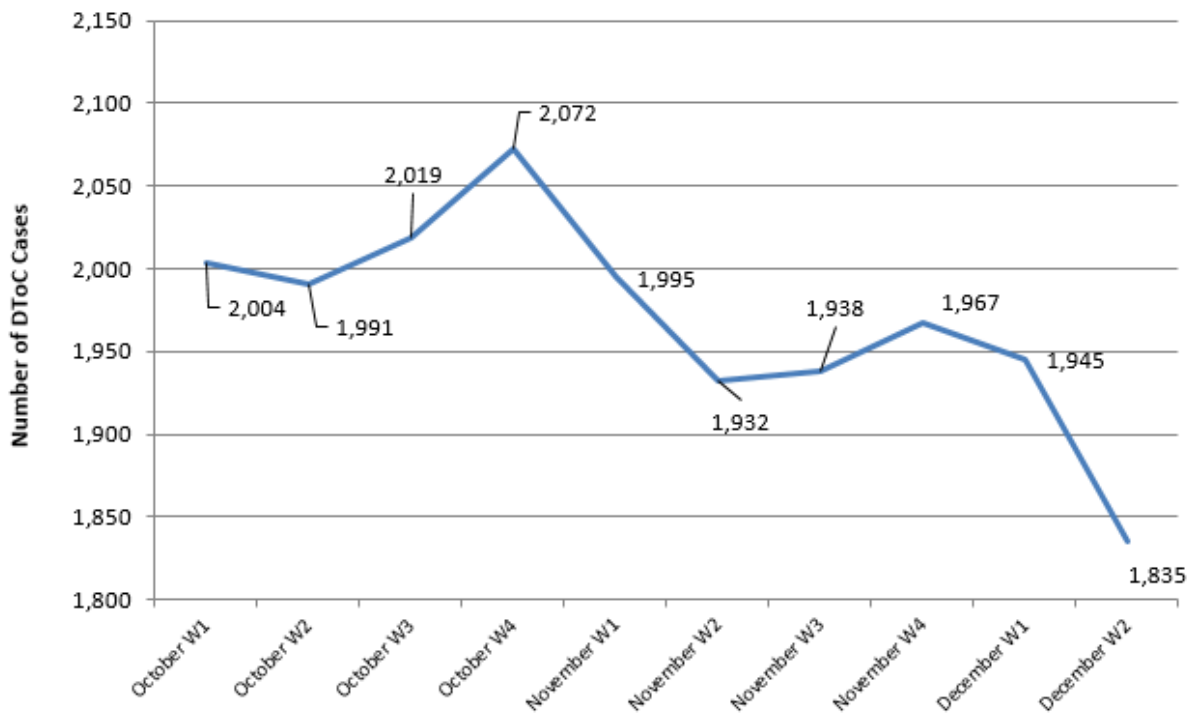
### 4 Hour Standard Performance - Simple Average Basis



In the second week of December, four-hour standard performance stood at 79.19% - down from 79.94% the previous week. The underlying picture shows 22 increases and 31 decreases across the project group.

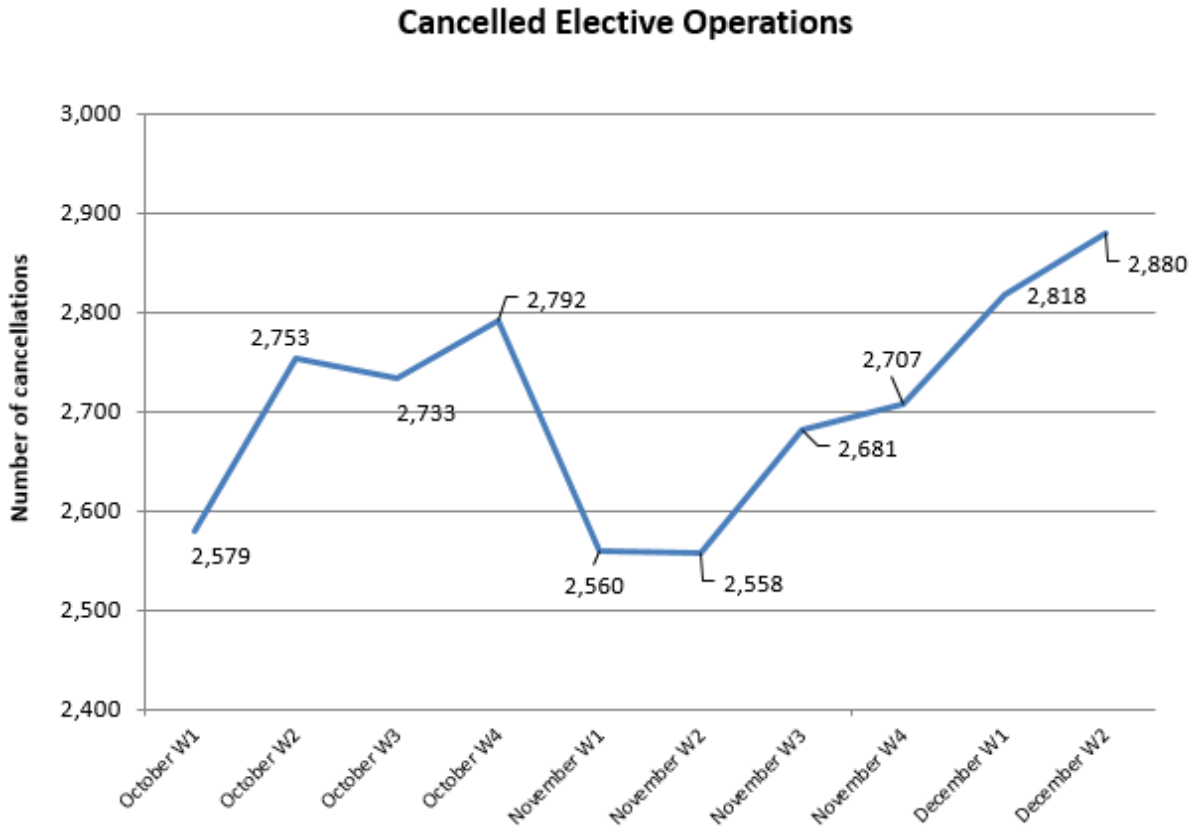
## Graph of Delayed Transfers of Care (DTOCs) by week since October

### Delayed Transfer of Care Cases



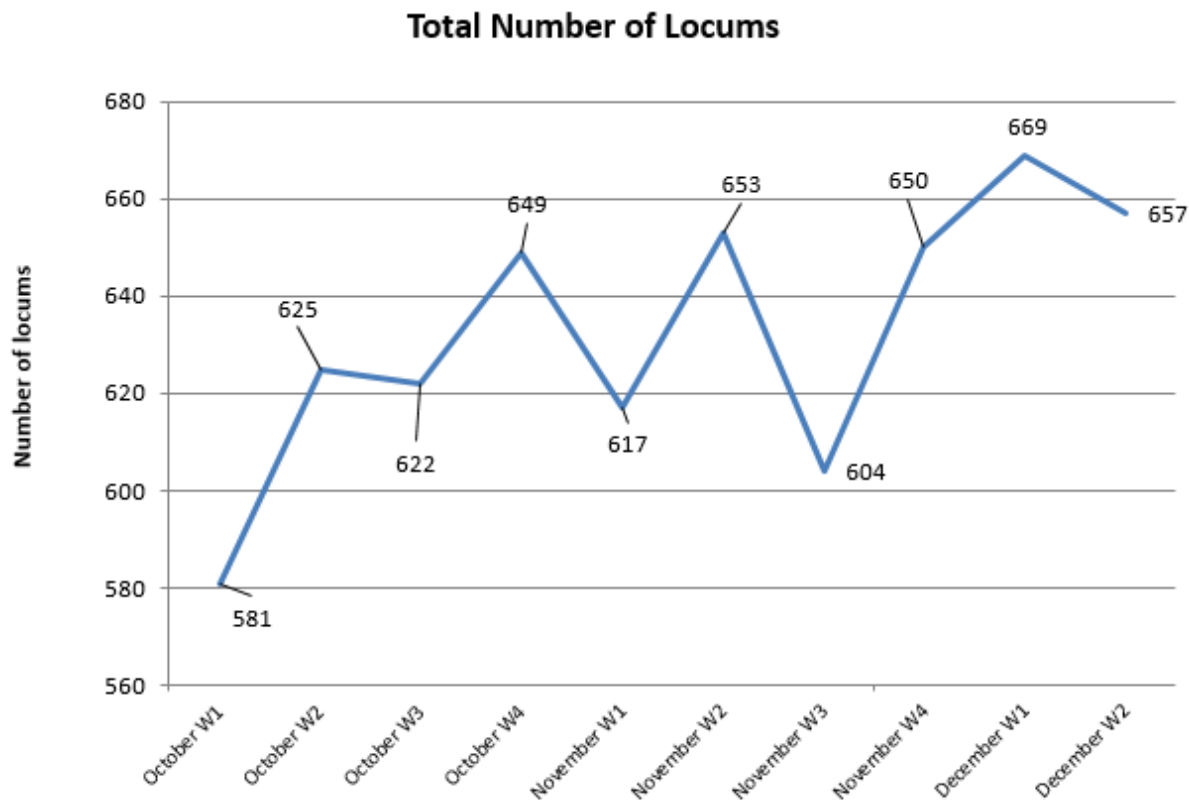
The number of patients subject to DTOC in the second week of December was 1,835 - down from 1,945 the previous week. This translates to 4.96% of acute bed stock - down from 5.23% the previous week. The range across all contributors for this week is a minimum 0.00% to a maximum 26.7%.

### Graph of cancelled elective operations since October



A total of 2,880 elective operations were recorded as cancelled this week - up from 2,818 the previous week. A total of 27,061 elective operations have been cancelled over the project to date. This represents an overall average of 51 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 December, the number of locum and agency doctors and nurses employed within Emergency Departments within the Winter Flow Project group stood at 657 down from 669 the previous week.

## Overall

The Winter Flow data published this week is a mixed picture. The four-hour standard performance data published this week paints a bleak picture that tells of large numbers of patients stranded on trollies and physicians forced to practice what is euphemistically referred to as corridor medicine. At 79.19%, performance this week is 0.55 percentage points lower than was the case in the previous week and 5.58 percentage points than was the case in the first week of October.

In October this year the Royal College of Emergency published [Improving Safety in the Emergency Department this Winter](#). This described actions that NHS boards should consider and levels of risk to patients. If four-hour standard performance dips below 85% the Emergency Department is in the Red Zone; '[at] the highest level of risk for patient and staff harm.' On this basis conditions across large portions of the NHS are now firmly in the Red Zone and the Government should regard this as a wakeup call.

Action must be taken to maintain patient safety and patient flow. This is why bed occupancy rates of 85% are necessary<sup>1</sup> and current occupancy rates of 94.2% are unacceptable.<sup>2</sup> When the Daily Mail can report only yesterday that one in 10 hospitals last

<sup>1</sup> BMJ [Dynamics of bed use in accommodating emergency admissions](#)

<sup>2</sup> [Winter Daily SitRep 2018-19 Data](#)

week had at least one night without any free beds<sup>3</sup> you can appreciate that Providers are simply not been given the tools to do the job.

Nonetheless, the data published this week shows that Providers are using every lever at their disposal to maintain performance. This week we recorded 2,880 elective cancellations across the Winter Flow group. This represents a 12.5% increase since the first week of November. It is also worth saying that even this may be an underestimate because several of our Providers have recently had reporting difficulties.

It is also fair to record that there has been a significant improvement in the number of patients subject to Delayed Transfers of Care. At 4.96% of bed stock this is 0.27 percentage points lower than was the case the previous week and the number of cases recorded has fallen by 8.43% since the beginning of October.

While this is welcome news, both for Providers and for the patients who might otherwise have been unable to go home, as this week's performance figures show, even this will have little or no impact if the bed base the hospital has to work with is inadequate.

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<sup>3</sup> [Daily Mail: NHS crisis is ALREADY worse than last year](#)  
Published 14 December 2018