



Essential facts regarding A&E Services

This factsheet is intended to provide all interested and concerned parties with a summary of the key data that should inform any responsible debate concerning Emergency Departments (EDs).

Patients

1. There were **15,379,166** attendances at Type 1 Emergency Departments in 2017-18.ⁱ
2. The UK has the 5th lowest A&E attendance rate of 11 comparable nations.ⁱⁱ
3. In Quarter 1 of 2010-11 Four-Hour Standard performance at Type 1 Emergency Departments was **97.7%**, in Quarter 4 of 2017-18 it was **76.8%**.ⁱⁱⁱ
4. From Quarter 1 2010-11 to Quarter 4 2017-18 the number of people waiting more than four hours from decision to admit to admission has increased by 211,367 (**1468%**).^{iv}
5. From Quarter 1 2011-12 to Quarter 4 2017-18 the number of people waiting more than twelve hours from decision to admit to admission has increased by 2248 (**11,831%**).^v
6. In 2010-11 patients 65 years and over made up 19.2% of attendances (3,022,671). In 2016-17 they made up **20.8%** (4,287,391).^{vi}
7. Across the UK **15%** of patients could be seen in a non-hospital setting.^{vii}

Departments

8. A Type 1 Emergency Department is defined as 'a consultant led 24-hour service with full resuscitation facilities and designated accommodation for the reception of accident and emergency patients'.^{viii}
9. There are **137** NHS Trusts in England providing Type 1 Emergency Department services in England.^{ix}
10. Annual attendances per Provider range from around **44,626** (Dorset County) to **332,418** (Barts Health).^x
11. In total there were **183** Type 1 Emergency Departments in England in 2018.^{xi}
12. In 2017-18 there were 1,447,451 more attendances than in 2010-11 – equivalent to the annual workload of **14 large Emergency Departments**.^{xii}
13. In 2017-18 there were 922,514 more admissions via Type 1 Emergency Departments than in 2010-11. This is a **26.51% increase**.^{xiii}
14. In 2017-18 there was one consultant for every **8693** Type 1 attendances.^{xiv} If we achieve the staffing levels set out in [RCEM Vision 2020](#) it will be one consultant for every 3,874 Type 1 attendances.

Staff

15. In February 2018 there were **1,769** Emergency Medicine (EM) consultants working in the NHS in England.^{xv}
16. While the consultant work force has grown in recent years this has not kept pace with demand. **26%** of advertised consultant posts remain unfilled.^{xvi}
17. The Emergency Medicine specialty has the highest vacancy rate across the NHS at 15.6%.^{xvii}
18. Since 2015 at least **112** EM consultants and **171** trainees have left the UK to work overseas.^{xviii}
19. Whilst EM training posts have a 100% fill rate, attrition rates among EM trainees is high relative to other medical specialties because of the intensity of work in Emergency Departments.^{xix}

Beds and Flow

20. Exit block occurs when patients cannot be moved in a timely manner to a ward because of a lack of available beds. Exit block causes harm to patients and avoidable mortality.
21. In Quarter 4 2017-18 there were 14,223 fewer overnight beds in the NHS in England than there were in Quarter 1 of 2010-11. This represents a **9.85% in the decline** in the bed base of the English NHS.^{xx}
22. In Quarter 1 2010 bed occupancy was 84.8%, in Quarter 4 2017-18 bed occupancy was **90.0%**.^{xxi}
23. There is a clear link between four-hour standard performance and bed occupancy rates. The last quarter in which acute bed occupancy stood at 85% was also the last quarter in which four-hour standard performance reached 95% at Type 1 Emergency Departments.^{xxii}
24. Delayed Transfers of Care (DTOC) are a serious problem and a cause of Exit Block.
25. In Quarter 3 2010-11 DTOC accounted for **3.07%** of bed occupancy. In Quarter 4 2017-18 the same figure was **4.23%**.^{xxiii}
26. The biggest single cause of DTOC is patients awaiting a care package in their own home.^{xxiv}

Finance

27. The total recorded cost of delivering ED services in England in 2016-17 was **£3 billion**.^{xxv}
28. According to NHS Reference Costs the average cost of an ED attendance in 2016-17 was £148.^{xxvi}
29. NHS Trusts are paid for the services of Emergency Departments through something called the National Tariff system.^{xxvii} Historically, national tariff payments have not reflected the full costs of treatment in Emergency Departments.^{xxviii}
30. Because tariff payments have not kept pace with inflation and because of what is known as the 'Tariff Efficiency Factor' the gap between the actual cost of treatment and what Trusts are paid to deliver it has grown.^{xxix}
31. In 2016-17 the NHS in England spent £2.94 billion on locum and agency staff **16%** of which (**£470 million**) was spent in Emergency Medicine.^{xxx}

References

- i [NHS England Quarterly Time Series 2004 Onwards](#)
- ii The Commonwealth Fund [In New Survey of 11 Countries, U.S. Adults Still Struggle with Access to and Affordability of Health Care November 2016](#). This follows on from a 2013 Commonwealth Fund survey [which showed similar results](#).
- iii [NHS England Quarterly Time Series 2004 Onwards](#)
- iv [NHS England Quarterly Time Series 2004 Onwards](#)
- v [NHS England Quarterly Time Series 2004 Onwards](#)
- vi [Hospital Accident and Emergency Activity, 2016-17](#)
- vii [RCEM Time to Act](#)
- viii [NHS Data Dictionary](#)
- ix [NHS England Sitrep Data 2017-18](#)
- x [A&E Attendances and Emergency Admissions 2017-18](#)
- xi RCEM Audit Records
- xii [NHS England Quarterly Time Series 2004 Onwards](#)
- xiii [NHS England Quarterly Time Series 2004 Onwards](#)
- xiv [NHS England Quarterly time series 2004 onwards with Annual March 2018](#) & [NHS Workforce Statistics: Doctors by Grade and Specialty](#)
- xv [NHS Workforce Statistics: Doctors by Grade and Specialty](#)
- xvi [Health Education: Facing the Facts Shaping the Future](#) & RCEM AAC 2017 collated figures
- xvii [Health Education: Facing the Facts Shaping the Future](#)
- xviii RCEM Membership database February 2018
- xix [HEE NHS England NHS Improvement RCEM: Securing the future workforce for emergency departments in England](#)
- xx [NHS England: Bed Availability and Occupancy Data - Overnight](#)
- xxi [NHS England: Bed Availability and Occupancy Data - Overnight](#)
- xxii Second Quarter 2012-13 [NHS England: Bed Availability and Occupancy Data - Overnight](#)
- xxiii [NHS England: Bed Availability and Occupancy Data - Overnight](#) & [NHS England: Delayed Transfers of Care Time Series](#)
- xxiv [NHS England: Delayed Transfers of Care Time Series](#)
- xxv [Reference costs 2016/17: highlights, analysis and introduction to the data](#)
- xxvi [Reference costs 2016/17: highlights, analysis and introduction to the data](#)
- xxvii [NHS Improvement: Proposed National Tariff Prices](#)
- xxviii [RCEM: STEP Campaign](#)
- xxix [NHS Improvement: Economic Assumptions 2016-17 to 2020-21](#) & [Nuffield Trust: The bottom line: Understanding the NHS deficit and why it won't go away](#)
- xxx Liason Review of NHS agency staff spending 2016/17