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As the stress on NHS A&E departments worsens, Mansfield Advisors' **Dr Melissa Chiu, Kam Dhmi and Dr Victor Chua** look at what opportunities there are to guide patients to the most appropriate urgent care setting.

Waiting for Godot

Waiting times at NHS A&E departments are long, and getting longer still. This is for complex reasons, including changes in society's expectations for prompt treatment, and the increased difficulty of seeing a GP. We have analysed waiting times in three A&E departments in London to understand when patients arrive, and when the waiting time is shortest.

Method

We obtained information regarding A&E departments under the Freedom of Information Act from three trusts in North and East London. The hospitals range from 360 to 939 beds. The information included the number of people attending each A&E department and their average waiting time for every hour of each day during the period from September 2015 to August 2016.

We calculated the average number of attendees and average waiting times for each hour of each day of the week, averaged over this year-long period. Bank holidays were analysed separately from other days of the week as staffing

arrangements and reasons for attending an emergency department are different on a bank holiday compared to an average weekday. A&E waiting times were defined as the total amount of time spent in the department, from registration to completion, which is usually discharge or admission to hospital.

Results

From our analysis, we found that the lowest number of attendees to A&E occurred in the early hours of the morning, from 4am-5am in the two East London trusts and around 6am in the North London trust. During these hours, the number of people attending their Emergency Department ranged from two to six patients, depending on the day of the week and trust. The peak in the number of attendances to the A&E departments of these three trusts all occurred between 10am-12pm, with Monday having the busiest peak out of the whole week. The number of patients attending each A&E within these hours range from 16 to 31 per hour, again depending on the day of the week and the trust.

Figure One shows the pattern in the Homerton Hospital, London.

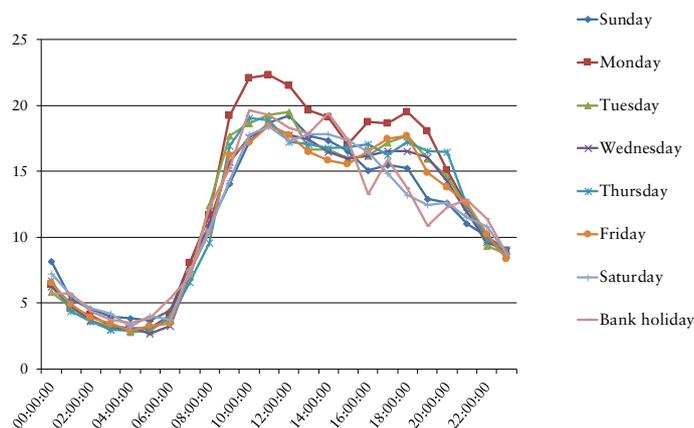
We found that in general, the shortest waiting times occur for patients arriving at 8am-9am for all three trusts, when they may have to wait on average 134 to 193 minutes. This corresponds with the trough in the number of attendees several hours earlier at 4am-6am and the boost in staffing levels when ED doctors arrive to start their day shift at 8am, meaning there are fewer patients in the department and more doctors, leading to a quicker waiting time. The hour of arrival with the longest waiting time is around midnight for all three trusts. Patients arriving during this period may have to wait on average between 169 to 339 minutes, again depending on the day of the week and the trust.

The corresponding wait times for the other two trusts in our study also follow a similar pattern, with troughs in waiting times in the morning and peaks at or just after midnight. The Department of Health sets a maximum time of 240 minutes (four hours) and hospitals need to demonstrate that 95% of patients meet this target.

To quantify variability in waiting times, we have calculated the standard deviation of the waiting times per hour on Wednesdays for one of our trusts and have plotted this in Figure Three. The standard deviations of this trust are particularly large in the evenings and in the middle of the night, i.e. when waiting times are long. The largest standard deviation at this trust occurs at 1am, with a standard deviation of 144 minutes. This pattern and range of standard deviations is representative of one of the other trusts in this study.

This historical data has been useful in providing a general sense of peak A&E waiting times in three trusts in London and what time of day might provide the shortest waiting time for patients who can

FIGURE ONE HOMERTON HOSPITAL, ATTENDANCE BY HOUR OF THE DAY



SOURCE MANSFIELD

choose when to attend A&E. However, because of the variability over the year and between trusts as discussed above, it would be helpful for patients and clinicians alike to have a live feed of A&E waiting times of different trusts in London.

Patients may be able to choose more accurately which A&E department to attend depending on their location, services provided, time of day and the current waiting time in different trusts. From a clinician's perspective, this may help to ease off some of the pressures on the busiest trusts and spread the distribution of A&E attendances more evenly across London.

Discussion

In a critical or life-threatening emergency, it is of course best for patients to attend an NHS A&E which are fully equipped to manage genuine emergencies.

However, there is a substantial proportion of patients that attend NHS Emergency Departments with minor ailments or injuries, who end up being seen in the Urgent Care Centre or by a GP working in the Department. Hence, there is an opportunity for private providers in London to capture those patients who are willing to pay a small fee and do not wish to endure the long waits in the NHS.

There are a number of private hospitals and clinics that provide a GP service, such as the Highgate Private Hospital, The London Clinic and the Bupa Cromwell Hospital, just to name a few. There are other private walk-in clinics that provide more specialist services, such as sexual health, travel health, occupational health and blood tests, as well as standard GP services. The Princess Grace Hospital near Baker Street also offers a private Urgent Care Centre, as does Casualty First at the Hospital of St John and St Elizabeth in St John's Wood.

Many patients attending A&E may realise their condition is not life-threatening but for them it is important to see a doctor on the same day. If these other options were better publicised, patients who can afford to pay might end up attending these private clinics or Urgent Care Centres, which in turn would ease some of the pressure off NHS Emergency Departments, allowing them to deal with genuine emergencies more efficiently.

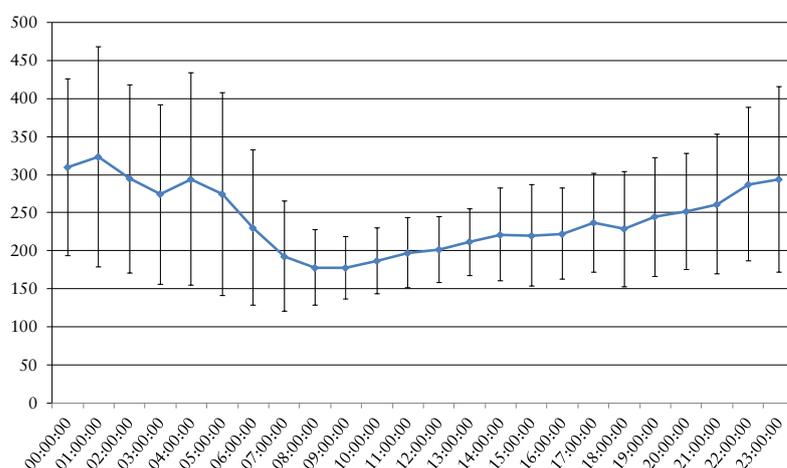


FIGURE TWO HOMERTON HOSPITAL, TIME FROM PRESENTATION TO DISCHARGE OR ADMISSION



SOURCE MANSFIELD

FIGURE THREE BARKING HOSPITAL, WEDNESDAY WAIT TIMES WITH STANDARD DEVIATION



SOURCE MANSFIELD