

Two thirds of trusts in England fail to meet new accident and emergency target

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Nearly 70% of trusts in England failed to meet the government's new target on assessing patients in accident and emergency (A&E) departments, show figures published on 26 August.

Of 178 trusts, 125 missed the target of assessing at least 95% of people within 15 minutes of their arrival at A&E, including emergency attendances at minor injuries units and walk-in centres. Nearly half of all trusts failed to assess patients within one hour.

The new data also show that an average of 7.5% of patients return to A&E departments within one week of being seen previously. The Department of Health suggests that only around 5% of visits to A&E should be "reattendances."

There was considerable variation in the rate of reattendance. For example, 13.3% of patients attending A&E at Gloucestershire Primary Care Trust returned within seven days of a previous attendance, whereas only 2.7% of patients seen at Basingstoke & North Hampshire NHS Foundation Trust returned within a week.

Just over 3% of people attending A&E departments left before being seen for treatment. Overall, 95% of patients leave A&E within 4 hours 18 minutes of arrival.

This is the first publication of data on the A&E clinical quality indicators drawn from provisional hospital episode statistics. They come from just under 1.4 million detailed records of attendances at A&E departments and clinics at NHS trusts in England in April 2011.

Earlier this month government figures showed that the number of people waiting more than four hours in A&E has almost doubled, despite a drop in attendances. From April to June 2011

some 165 300 people waited longer than four hours in A&E and minor injury units, almost twice the number waiting for this time in the same period in 2010.

The health secretary, Andrew Lansley, said, "We know the time that people wait in A&E is important to patients, which is why it remains at the core of our new measures of A&E performance.

"But, waiting is not the only thing that matters to patients, which is why it should not be the only thing that matters to the NHS. We should be measuring the whole quality of care patients receive at A&E . . . Patients should be able to expect a 24/7 accessible and safe emergency care service which is integrated across the NHS. I expect all trusts to use this information in a positive way and improve services for patients."

Anna Dixon, head of policy at the health policy think tank the King's Fund, warned of "overinterpreting the data and the levels of variation and performance," because the data are still new.

She also questioned whether this new set of measurements would improve the quality of care.

She said, "It remains unclear what incentives there are for NHS organisations to maintain good levels of access . . . It is unclear whether transparency alone will be enough to maintain quality in meeting access targets."

Provisional Accident & Emergency Quality Indicators for England: Experimental Statistics by Provider for April 2011 is at <http://bit.ly/mZRmtA>.

Cite this as: *BMJ* 2011;343:d5554

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