



# The Royal College of Emergency Medicine

**PRESS RELEASE – 22 February 2021**

## **Emergency Departments face continued pressures as 12 hr delays hit 50,000 in RCEM Winter Flow Project**

**Latest data** from the Royal College of Emergency Medicine's [Winter Flow Project](#) shows that in the second week of February 2,359 patients stayed in Emergency Departments for longer than 12 hours across 32 Trusts and Boards in the UK. This represents 4.30% of all attendances.

The report shows that there were 54,836 attendances (down from 55,466 the previous week), average Four-Hour Standard Performance was 74.73% (up from 73.48% the previous week) and the number of 12-hour waits was 2,359 (down from 2,583 the previous week).

**Dr Adrian Boyle, Vice President of the Royal College of Emergency Medicine, said:**

“Generally speaking, it would appear that the Emergency Departments are pulling clear from the struggles of December and January. The effect of the national lockdown has reduced pressures on Emergency Departments, but we have learnt from last autumn that easing of lockdowns and restarting necessary, important elective care is associated with dangerous crowding in emergency departments. Careful management of the next stage of the pandemic is absolutely vital to ensure that the health service is not once again forced to endure the kind of pressures it saw over the last three months.

“While the broad trends are a cause for cautious optimism, last week the Winter Flow Project achieved the unwelcome milestone of 50,000 12-hour waits at its contributing EDs. In difficult circumstances, and with NHS resourcing and staffing already stretched even before the advent of Covid, it was inevitable that patients would endure long stays in Emergency Departments. However, as the College has long maintained, it needn't be. With good patient flow, properly configured departments, sufficient numbers of beds and appropriate numbers of staff, protracted waits in EDs could be all but eliminated.

“Therefore, we urge caution around restarting services. We remain concerned about nosocomial infection, so we must have a clear approach to returning in-hospital services back to normal safely – we cannot put those whose treatment has been delayed at further risk in hospital.

“Most importantly the Government is eager to re-organise the NHS as detailed in the white paper, but with reorganisation there must be an action plan for expanding the workforce and bed capacity – without which the pressures on the system, the physical and mental strain on existing staff and the unsafe long stays in ambulances and departments will continue in perpetuity.”

**-ENDS-**

## Notes to Editor

The Winter Flow Project runs from October 2020 to March 2021. Anonymised data from 35 sites across the UK, representing roughly a quarter of the current bed base, will be published on a weekly basis.

In addition to four-hour performance – a metric the College believes is an invaluable system indicator, but not the whole story - the project collects a wider range of data to explore the other factors that affect Emergency Departments and patient 'flow'.

In addition to type one four-hour performance figures, Trusts are asked to submit on a weekly basis data on:

- the number of acute beds in service
- the number of cancelled elective operations
- the number of patients in their trust who no longer medically need to be in hospital
- the number of unplanned attendances at EDs
- the number of patients spending more than 12 hours in an Emergency Department from arrival to departure

The full 2019/20 report and data, along with weekly reports for 2020/2021, is published at [rcem.ac.uk/winterflow](http://rcem.ac.uk/winterflow)

## Contact

For further information, or to speak with a spokesperson for The Royal College of Emergency Medicine (between 9am and 5pm), please contact either:

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## About RCEM

The Royal College of Emergency Medicine is the single authoritative body for Emergency Medicine in the UK. Emergency Medicine is the medical specialty which provides doctors and consultants to A&E departments in the NHS in the UK and other healthcare systems across the world.

The Royal College works to ensure high quality care by setting and monitoring standards of care, and providing expert guidance and advice on policy to relevant bodies on matters relating to Emergency Medicine.

The Royal College has over 10,000 fellows and members, who are doctors and consultants in emergency departments working in the health services in England, Wales, Scotland and Northern Ireland, Republic of Ireland and across the world.