Information Services Division
Quality of A&E Statistics

Situation
In November 2017, concerns were raised over the accuracy of recording of A&E discharge times in St John’s Hospital, in NHS Lothian. This would affect NHS Lothian’s performance against the 4 hour emergency care standard.

Background
NHS Lothian carried out an internal investigation and concluded that in hospitals across NHS Lothian, staff had been following locally produced Standard Operating Procedures (SOP) on how to record patients who breach the 4 hour emergency care standard. This SOP did not comply with national guidance.

A&E discharge times at hospitals in NHS Lothian were not accurately recorded up to November 2017 and to address this NHS Lothian implemented a revised standard operating procedure at the end of that month. NHS Lothian have also identified a small number of data quality concerns in records submitted since that point but these are low in number and do not materially affect the published statistics.

Scottish Government commissioned the Academy of Medical Royal Colleges, to carry out an independent review to ascertain the causes for the data issues in Lothian.

ISD Actions
ISD has completed, and are continuing to undertake a number of actions to assure the quality of recording across the rest of Scotland. This includes:

1. Contributing to the independent review for example, by providing data analyses and guidance on national recording. Once the full findings are available a more informed judgement on the quality of NHS Lothian’s data since December 2017 will be known. In the meantime, ISD continues to engage with teams in NHS Lothian to ensure the data which are submitted on A&E waiting times are of the highest quality (pending the outcomes of the review).
2. ISD has carried out a series of data quality assurance checks with all other NHS Boards and is not aware of any other hospital where there has been mis-recording of A&E discharge times. Each Board was also asked if they had any concerns about their data and recording practices. The outcome of these discussions has not raised concerns for ISD about the quality of data recorded.
3. Examined additional analyses that could be carried out to quality assure the data submitted by NHS Boards. For example ISD will now include distribution of time spent in A&E departments across Scotland as part of the management information provided.
4. ISD has annual meetings with each NHS Board where we discuss issues with A&E data quality. ISD has included as an agenda item ‘questions or concerns over the interpretation of the national guidance’. ISD also has regular dialogue with Boards.
5. ISD has recently been in touch with NHS Boards to ask if they have local SOPs, why they have them and whether the National Guidance is straightforward to understand and apply. The responses from Boards indicate that they are confident that their practice complies with the National Guidance.
Conclusion
Other than the issues as listed above with NHS Lothian, ISD does not have concerns about the quality of the published A&E statistics. ISD concludes that the statistics remain fit for purpose and will continue to present the figures which include Scotland totals and Scotland (excluding Lothian) totals.

The impact of NHS Lothian on Scotland’s compliance with the four hour emergency care standard is small. Although NHS Lothian sees around 17% of Scotland’s total A&E attendances, the percentage of NHS Lothian A&E attendances which were compliant with the 4 hour emergency care standard was close to the average for the rest of Scotland. Between April 2011 and November 2017, the monthly difference between Scotland and the Scotland (excluding Lothian) percentage compliance with the 4 hour emergency care standard was between 0% and 1%.

NHS Lothian has carried out analyses which show that up to November 2017 amendments to their discharge times raised compliance with the 4 hour emergency care standard by between 5.5 and 7.4 percentage points. Some of these amendments would have been in line with national recording guidance.

A decrease of 7 percentage points in NHS Lothian’s compliance would have the effect of lowering NHS Scotland compliance by around 1 percentage point.

In December 2017, NHS Lothian’s reported compliance with the 4 hour emergency care standard was 13 percentage points lower than in November 2017. This is a greater than the potential fall caused by amendments to discharge times so there would have been other factors at play. In the same period, the compliance in NHS Scotland (excluding NHS Lothian) fell by 7 percentage points, coinciding with a particularly bad winter period of cold and icy weather and high levels of respiratory illness. Hence the reduction in compliance in NHS Lothian in December 2017 was caused by a number of factors including changes in recording practice and the same overall reduction experienced across NHS Scotland caused by winter pressures.