

Emergency Department (ED) Clinical Quality Indicators

Lists

Overview

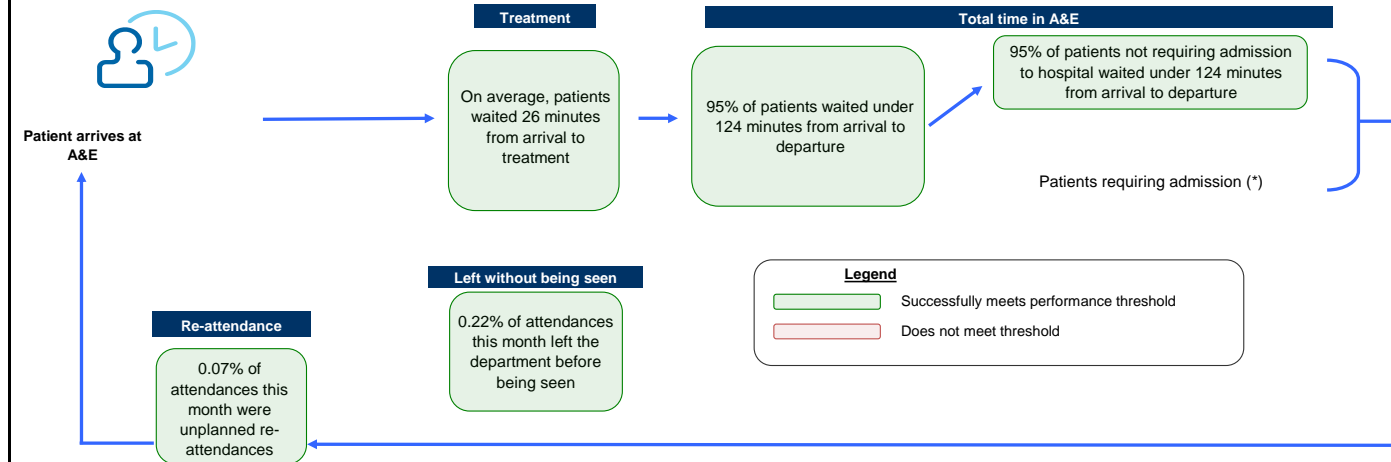
This dashboard presents a comprehensive and balanced view of the care delivered by our Emergency Department, and reflects the experience and safety of our patients and the effectiveness of the care they receive. These indicators will support patient expectations of high quality Emergency Department services and allow our department to demonstrate our ambition to deliver consistently excellent services which are continuously improving.

General Information

Selby MIU	- ED site name and organization code
Type 3 (Other types of A&E, including minor-injury units and Walk-in Centres)	- ED site type
hdf.information.requests@nhs.net	- Contact details for further information
24/02/2022	- The date the report has been published
01/01/2021-31/01/2022	- The time period the data in the dashboard relate to

Type 1 (Major)
 Type 2 (Specialist)
 Type 3 (Other types of A&E, including minor-injury units and Walk-in Centres)

Summary of performance - January 2022



Overview

4 out of 4 key indicators that apply to Minor Injury Units (MIUs) have been achieved this month at **Selby MIU**. We have used the standard publication template issued by the Department of Health to publish this data. However we would welcome any comments or suggestions on how we can make this information more useful and relevant to patients and the public. Please email us at: information.requests@hdf.nhs.uk.

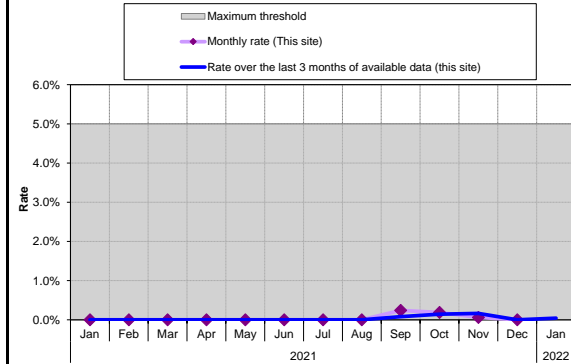
Note - performance on the "time to initial assessment" indicator is not shown as this indicator only applies to ambulance arrivals and very few patients (less than one a month) arrive by ambulance at Selby MIU. The average "time to initial assessment" for ambulance arrivals in 2011/12 to date was 5 minutes.

* - Very few patients are admitted directly from Selby MIU (less than 1 a month) and so data for these patients is not shown separately. However these patients are included in the overall figures for the "total time in A&E" indicator.

Emergency Department (ED) Clinical Quality Indicators

Unplanned re-attendance

Unplanned re-attendance rate



Description of data

This indicator looks at the proportion of patients who have an unplanned re-attendance at ED within 7 days of the original attendance.

This month, our re-attendance rate was 0.07%.

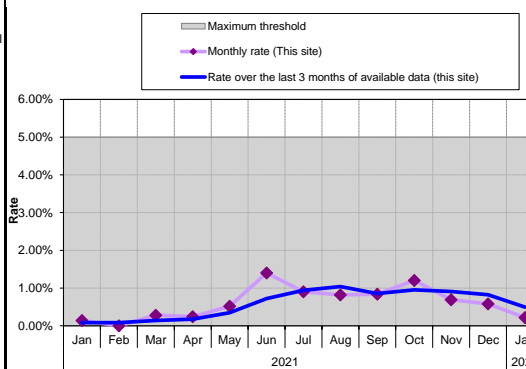
Narrative

Following a significant improvement in data quality, we are confident that recent months' data is an accurate reflection of our performance. The unit continues to perform well below the 5% threshold.

0.07%	Rate this month
Worse	Compared to last month
	Data quality

Left without being seen

Left without being seen rate



Description of data

This indicator looks at the proportion of patients who left ED without being seen (LWBS) by a clinical decision-maker.

This month, our LWBS rate was 0.22% .

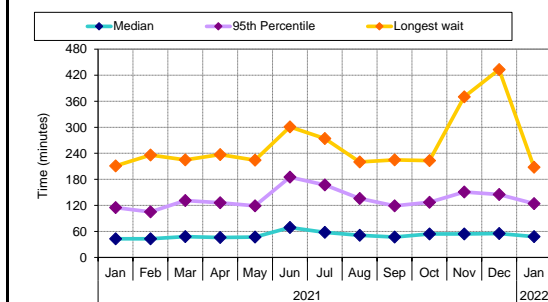
Narrative

The number of patients who left without being seen remains consistently low and well below the maximum threshold.

0.22%	Rate this month
Improvement	Compared to last month
	Data quality

Total time in the ED department (non-admitted patients)

Site-level performance



Description of data

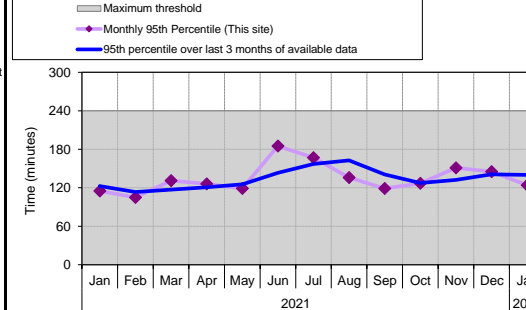
The 95 percentile for January was 124 minutes (2 hours 4 minutes) or less in ED.

The median time wait was 48 minutes (0 hours 48 minutes) and the single longest wait was 208 minutes (3 hours 28 minutes).

Narrative - This indicator measures the time from when the patient arrives at Selby MIU to the time when the patient is seen by a decision making clinician to diagnose the problem and arrange or start treatment as necessary. This indicator specifically measures waiting times for patients that will not be admitted to the hospital.

Our performance remains below the maximum threshold.

Site performance against national benchmarks and performance thresholds



Description of data

Waiting times in A&E for patients that aren't admitted have been consistently low. Figures still remain below the 4 hour target maximum threshold set by national NHS standards.

124	95th percentile this month
Improvement	Compared to last month
	Data quality

Emergency Department (ED) Clinical Quality Indicators

Service experience

What have we done to understand and assess the experience of our patients?

To continue to improve patient experience, the MIU team continue to review the complaints and comments received from patients on a weekly basis.
Selby MIU now use a patient themed feedback tree to encourage patients/carers including children to give complaints or compliments and this is shared with the quality review.

What has been done to improve services in light of these results?

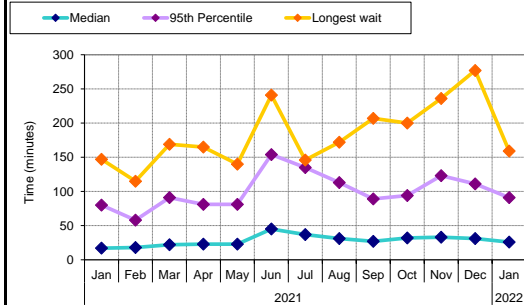
We have compiled a patient information leaflet about the department and the services available from the centre. This is readily available to all patients and includes patient experience team details. The staff have also increased signage to include waiting time information.

What were results of these assessments?

Has this resulted in improved patient experience?

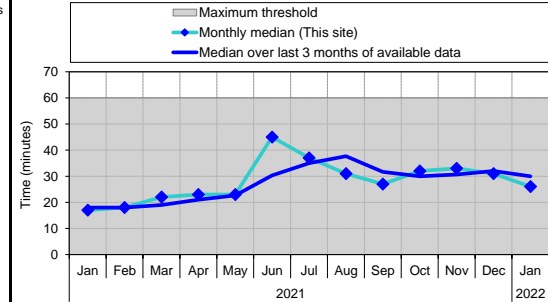
Time to Treatment in ED

Site-level performance



Description of data
The median(average) for January was 26 minutes
95% of patients visiting the Selby's Minor Incident Unit were seen within 91 minutes (1 hours 31 minutes)
The longest wait was 159 minutes (2 hours 39 minutes).

Site performance against national benchmarks and performance thresholds



Description of data
The median(average) time to treatment in January was 26 minutes meaning that we continue to remain within the threshold of 60 minutes

Narrative - This indicator measures the time from when the patient arrives at Selby MIU to the time when the patient is seen by a decision making clinician to diagnose the problem and arrange or start treatment as necessary.

Our performance remains below the maximum threshold.

26	Median this month
Improvement	Compared to last month
	Data quality