

# Labour demands urgent investigation into A&E winter data

**Jonathan Ashworth MP, Labour's Shadow Health Secretary, has today written to Jeremy Hunt to call for an "urgent investigation" into claims A&E performance figures have been inconsistently recorded this winter.**

He has also raised concerns with the secretive manner in which changes to recording practice have been conducted, calling the lack of transparency "completely unacceptable".

The letter from Labour's Shadow Health Secretary calls on the Government to:

- Clarify if the NHS will now review and republish data from October, the month from which winter pressures intensified across the health service.
- Ensure Trusts understand how they should be recording their data to ensure they are all reporting the same activity on the same basis.
- Update Members as to whether this year's winter crisis, as a result of these changes made to recording practice, is actually significantly worse than currently understood.
- Undertake an urgent investigation, reporting to Parliament, to clarify the full picture of what has gone on behind the scenes between Trusts, NHS England and NHS Improvement concerning the publication of A&E data this winter.

**Jonathan Ashworth MP, Labour's Shadow Health Secretary, said:**

"It is appalling to imagine that this year's unprecedented winter crisis, which has seen vulnerable patients stuck for hours on end in the back of ambulances or on trolleys in hospital corridors, could be even worse than currently feared.

"Jeremy Hunt must launch an urgent investigation to clarify what has gone on behind the scenes between Trusts, NHS England and NHS Improvement concerning the publication of A&E data this winter."

- The full text of Jonathan Ashworth's letter to Jeremy Hunt:

Dear Jeremy,

I am writing to ask for an urgent update concerning the BBC's investigation into the recording of A&E performance figures.

As you know, the official target requires 95% of patients to be treated, assessed or discharged within four hours. However, the NHS has consistently failed to meet this target since July 2015 and it seems exceedingly unlikely that Trusts will all meet the 95% target by March 2018.

Indeed, the latest data from December 2017 demonstrated that just 85.1% of patients were being seen within four hours. This is significantly worse than

the 94.8% level achieved in December 2010.

However, analysis of performance figures for December 2017 by the BBC suggests the picture may in fact be even worse than first thought. This is because of secretive changes to the recording of A&E data, which appear to inflate the performance of NHS Trusts this winter.

Emails sent by NHS Improvement, seen by the BBC, from October last year, note Trusts had marginally failed to make the required progress towards meeting the 95% target by March 2018 and that therefore:

If “there is an urgent activity undertaken by a walk-in centre or urgent treatment centre or other provider within your local delivery board that currently is not reporting activity- we can work with you to apportion the activity to the main provider.”

As you know, a hospital trust’s performance figures include the main accident and emergency department (known as Type 1) and minor injuries or care centres (known as Type 3). The latter tend to see and treat patients a lot more quickly than those needing emergency care.

This, and another email sent later in October by NHS Improvement, was likely viewed by Trusts as a request to add in data from walk-in centres not run by them and not on hospital grounds.

However, this is in direct conflict with clear guidance issued in November 2015 by NHS England, which says walk-in centre data can be included only if the trust has clinical responsibility for the service or if it is co-located on the trust’s grounds.

We therefore share the UK Statistics Authority’s concern that these changes could have left people reaching “misleading conclusions”, because the implication is that including these centres would help improve overall performance.

Indeed, the Royal College of Emergency Medicine has confirmed that these changes do tend to pull up the overall performance of a Trust. It is thought some trusts have seen their four-hour performance improve by nearly 5%.

As a result, the data produced by NHS England for affected trusts is no longer directly comparable from October 2017 onwards with the corresponding months of preceding years.

This is profoundly concerning, because a nationally recognised and followed benchmark is critical in ensuring the accurate collation of winter pressures data.

Will you therefore urgently clarify if the NHS will now review and republish data from October, the month from which winter pressures intensified across the health service? And will you ensure Trusts understand how they should be recording their data to ensure they are all reporting the same activity on the same basis?

It is appalling to imagine that this year's unprecedented winter crisis, which has been characterised by vulnerable patients stuck for hours on end in the back of ambulances or on trolleys in hospital corridors, could be even worse than currently feared.

Will you therefore also update Members as to whether this year's winter crisis, as a result of these changes made to recording practice, is actually significantly worse than currently understood?

Finally, these changes made to recording practice have been conducted secretly and with a total lack of transparency, which is completely unacceptable. Will you therefore conduct an urgent investigation, to report to the House, to clarify the full picture of what has gone on behind the scenes between Trusts, NHS England and NHS Improvement concerning the publication of A&E data this winter?

On 8th February, NHS England will publish Combined Performance data for January 2018. This matter is therefore of the utmost urgency.

Yours sincerely,

Jonathan Ashworth MP  
Shadow Secretary of State for Health