

OUTCOME of Welsh Information Standards Board (WISB) Appraisal

TITLE OF ANALYSIS METHOD:	% of patients spending less than 4 hours in A&E from admission to transfer or discharge
REF. NO.	IGRN 2008 / 022
SPONSOR OF STANDARD:	Kevin Flynn, Director of Delivery and Deputy Chief Executive of NHS Wales, Department of Health & Social Services, Welsh Government
APPROVAL HISTORY:	n/a
DATE CONSIDERED BY WISB:	15 th August 2013
WISB COMMENTS:	
<ol style="list-style-type: none"> 1. Members observed that there was existing confusion across Health Boards in whether over 3:59 or 4 hours was the breach. This submission made it clear that over 3:59 was a breach. 2. Mention was made that Emergency Medicine colleagues were expecting 'their' departments to be renamed Emergency Departments rather than A&E. Currently there was a mix of department titles across Welsh Health Boards. 3. Members felt that some of the history around development of this indicator was confusing. However they expected that to be addressed when there was a published central collection of Analysis Methodologies whose format enabled changes over time to be shown. There was also a suggestion that specification of the '13 / 14' analysis should be in a separate section from any history included. 4. Members queried what was meant at the top of page 4 by "consequently the following two situations are no longer counted as a breach of the 4 hour target where (punctually) deemed clinically appropriate". The AM sub-group Chair took this as an action to correct. 5. Members confirmed it was highly likely that the clinical interpretation of treatment end date / time varied between institutions and clinicians. Although they felt further standardisation was not possible it should be appreciated that this would introduce a source of variation. 6. Although outside the scope of WISB's AM review, Members queried whether the Business Requirement of better managing the care of patients in Emergency Departments might be better served by separating attendances into 'majors' and 'minors' with different targets and separately monitoring each stream. This could provide better insight into patient flows through these departments. 	
ACTION(S) TO BE TAKEN BY SUBMITTER AND/OR SPONSOR:	
<ol style="list-style-type: none"> 1. Correct error outlined in 4. above prior to any incorporation in a published Analysis Methodology. 	
WISB APPRAISAL ASSESSMENT:	Accredited
WISB APPRAISAL ASSESSMENT KEY:	<ol style="list-style-type: none"> 1. Accredited: This Analysis Method has been appraised by WISB and is felt to be fit for purpose in

	<p>that it:</p> <ul style="list-style-type: none"> - meets the business requirement - has clarity of scope - is reproducible by local organisations where appropriate <p>2. Refinement Required: WISB suggests that modifications are made to the Analysis Method as outlined in the appraisal Outcome.</p>
STATUS OF DATA STANDARDS ASSURANCE:	Not WISB Reviewed
STATUS OF DATA STANDARDS ASSURANCE KEY:	<p>1. WISB Reviewed: the data used in this Analysis Method has been through the Information Standards Assurance Process</p> <p>2. Not WISB Reviewed: some or all of the data used in this Analysis Method has not been through the Information Standards Assurance Process. This may include data flows which predate the establishment of WISB.</p>