

# **National Ambulance Handover Delays – FINAL**


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Data period to end February 2023

**Date of Report: March 22<sup>nd</sup>, 2023**

# 2. Summary and Contents


**Overview:** Hospital handovers, although still at levels far higher than those seen two-years previously, decreased for the second month in February 2023. The month saw several rounds of industrial action, which will have influenced some of the measures reported here. This month we focus on two more hospitals where handover delays of one-hour or longer are consistently lower than the national average.

Page 3 and 4.  
Effective Interventions: West Middlesex University Hospital (Chelsea & Westminster) and Homerton University Hospital 


- The hospitals covered here have seen longer handovers remain significantly below the national average for the past two years.
- These case studies highlight a range of the effective interventions in place at each hospital that help sustain lower levels of longer handovers.

Page 5.  
Average Handover Times and Delays as a Proportion of All Handovers 

- The mean handover time in February 2023 was slightly under half-an-hour. This was slower than February 2021 by 11-minutes, but is two-minutes faster than the same time last year.
- The proportion of handovers taking one-hour or longer was ten-percent in February, a slight decrease from 11% in 2022, but up from two-percent in February 2021.

Pages 6 to 10.  
Handover Volume and Hours Lost 

- Monthly volume of handovers delays fell for the second consecutive month. Delays of one-hour or longer were at their lowest since mid-2021, although at 30k, this is three-times higher than February 2019.
- The very longest delays dropped to their lowest volume in a year: delays of ten-or-more hours fell to 183 in total – a tenth of the volume seen just two months previously.

Page 11.  
Impact on Patients and Crew 

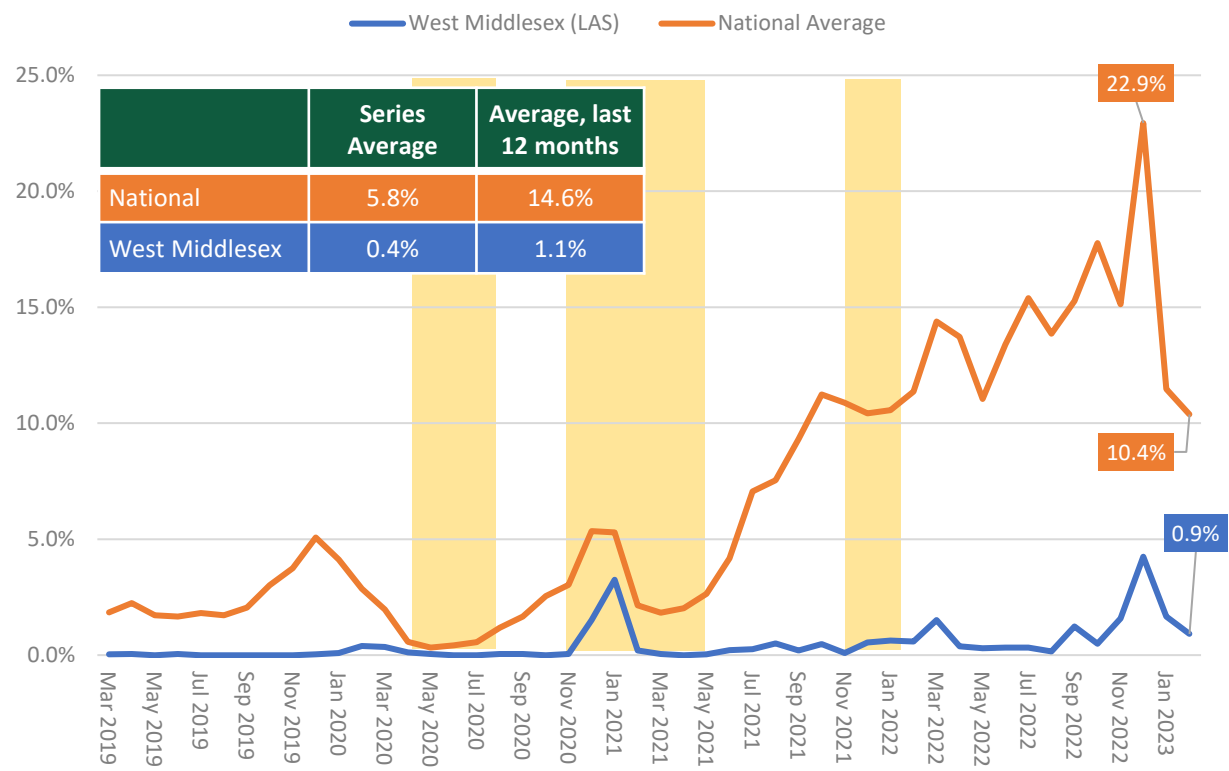
- Despite improvements, many patients continue to risk potential harm as a result of handover delays: around 26k patients experienced potential harm as a result of long handover delays in February 2023.
- The sector lost the equivalent of 77k ambulance job cycles due to handover delays: this equates to 14% of potential ambulance capacity across the month – compared with six percent at the start of 2020.

### 3. Effective Interventions: West Middlesex University Hospital (Chelsea & Westminster)

The proportion of handovers exceeding 60 minutes has increased steadily since May 2021, and towards the end of 2022 accounted for more than a fifth of handovers. Over the same time, West Middlesex Hospitals has not seen its share of >60-minute handovers exceed five-percent, with its average for the most recent 12-months less than a tenth of the national figure.

#### 60-min handovers as percentage of all handovers

West Middlesex (LAS): % Handovers >60 Minutes



Yellow areas denote COVID waves in the UK: source ONS.

#### An overview of West Middlesex’s current interventions

- **Senior Leadership.** The Clinical Director is highly visible, and works weekly shifts in the Acute Medical Unit (AMU). Entire corporate teams are highly visible and Executive presence at 4/day bed meetings with handovers being the 1<sup>st</sup> area for discussion.
- **Nurse experience and leadership.** Many staff have been in post for a long time so there is a large historical knowledge as well as credibility. Patient centric focus with strong values around getting patient to right place first time.
- **Site hub function.** Co-located Urgent Treatment Centre (UTC). This is seen as a strong help to flow, with ambulances having access to the UTC. There is also a robust electronic site model with heavy reliance on data to predict demand and facilitate flow.
- **Community Collaboration.** There is a borough wide six-phase action plan to link all partners (social care and council and health) to deliver on six interventions as a collaborative. Part of this initiative is a strong aim to improve community personal plans and keep patients at home.
- **Empowerment, Trust and Communication.** Staff describe being given permission and are empowered to lead on improvement ideas. Clinicians’ views are trusted, and so referrals are accepted rather than debated. Whatsapp is used to communicate operational concerns as well as clinical issues.

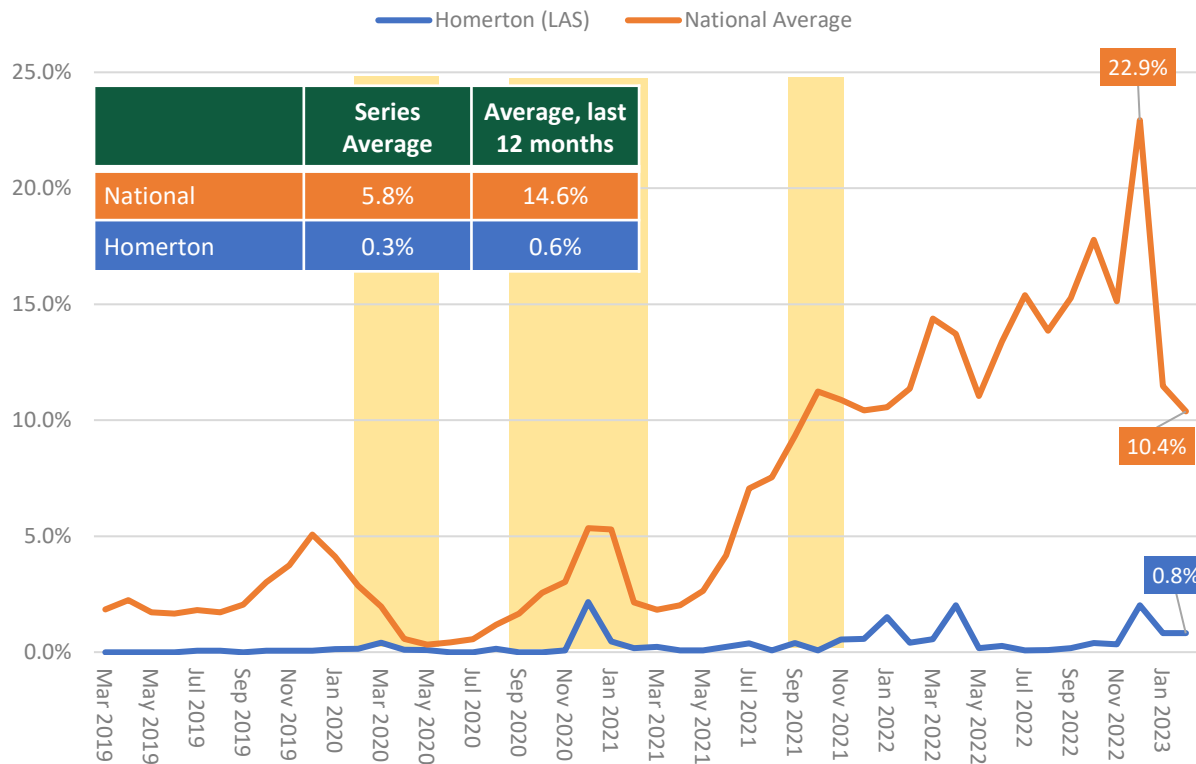


## 4. Effective Interventions: Homerton University Hospital

The proportion of handovers exceeding 60 minutes has increased steadily since May 2021, and towards the end of 2022 accounted for more than a fifth of handovers. Homerton's share of these handovers has only exceeded one-percent four times since April 2018, and for the last 12-months has a series average of less than one-percent, compared with the national average of nearly 15-percent.

### 60-min handovers as percentage of all handovers

Homerton (LAS): % Handovers >60 Minutes



Yellow areas denote COVID waves in the UK: source ONS.

### An overview of Homerton's current interventions

- Integration.** There is a strong Integrated Care System (ICS) and London Ambulance Service (LAS) partnering in monitoring and growing alternatives to hospital pathways and activity along those pathways with a strong focus on hospital avoidance. LAS have low conveyance-rate linking with multiple alternative pathways and community services, rather than conveying to Emergency Departments (ED).
- Leadership.** There is clear clinician and nursing team leadership, coupled with longevity of service. Nursing in ED is particularly empowered with heavy competency and development performed on senior staff to enable trusted assessor decisions. This frees up medical staff and encourages nurses to guard flow and use of resources. There is a strong team ethos which helps ensure queues and crowding does not occur.
- Flexibility.** There is a zero tolerance to corridor care or boarding, mitigated through collaboration between department practitioners and clinicians early in the day. An escalation area is used and is prioritised to flex down once used so that Trust always has a flexible cohorting / bedding area.
- Flow.** There has been a whole-hospital approach to flow-management. This has been achieved through buy-in from all clinical and supporting teams, working with local stakeholders to support effective discharge and delivering continuous improvement programmes including ED, ward teams, and service configuration.



# 5. Average Handover Times and Delays as Proportion of All Handovers (source, NAIG)



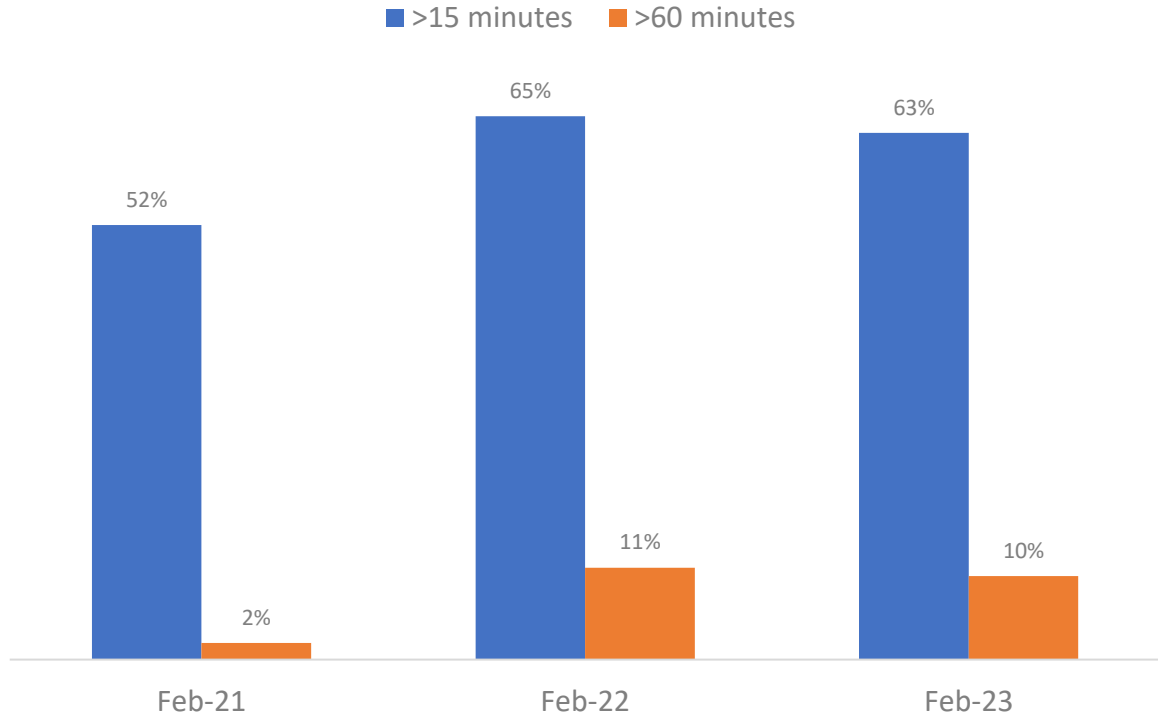
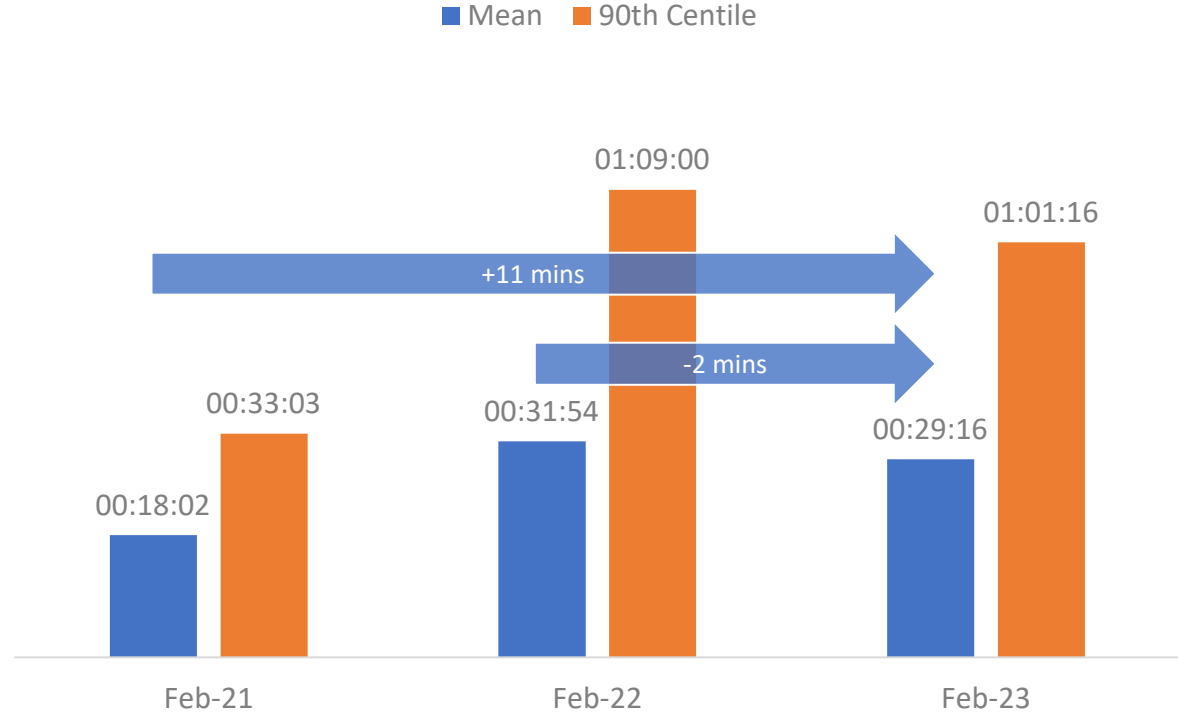
The average/mean handover time in February 2023 was 11 minutes slower than in February 2021, but when compared to the same month last year it is relatively steady (and in fact two-minutes faster). A similar pattern can be seen with the percentage of handovers exceeding 15-minutes and 60-minutes: a notable increase compared with 2021, but a few percentage points lower than the levels seen last year.

## 1. Mean and 90th Centile Handover Times

## 2. Handover Delays as a Percentage of All Handovers

Mean and 90th Centile Handover Time (hh:mm:ss)

Handover Delays as % of All Handovers

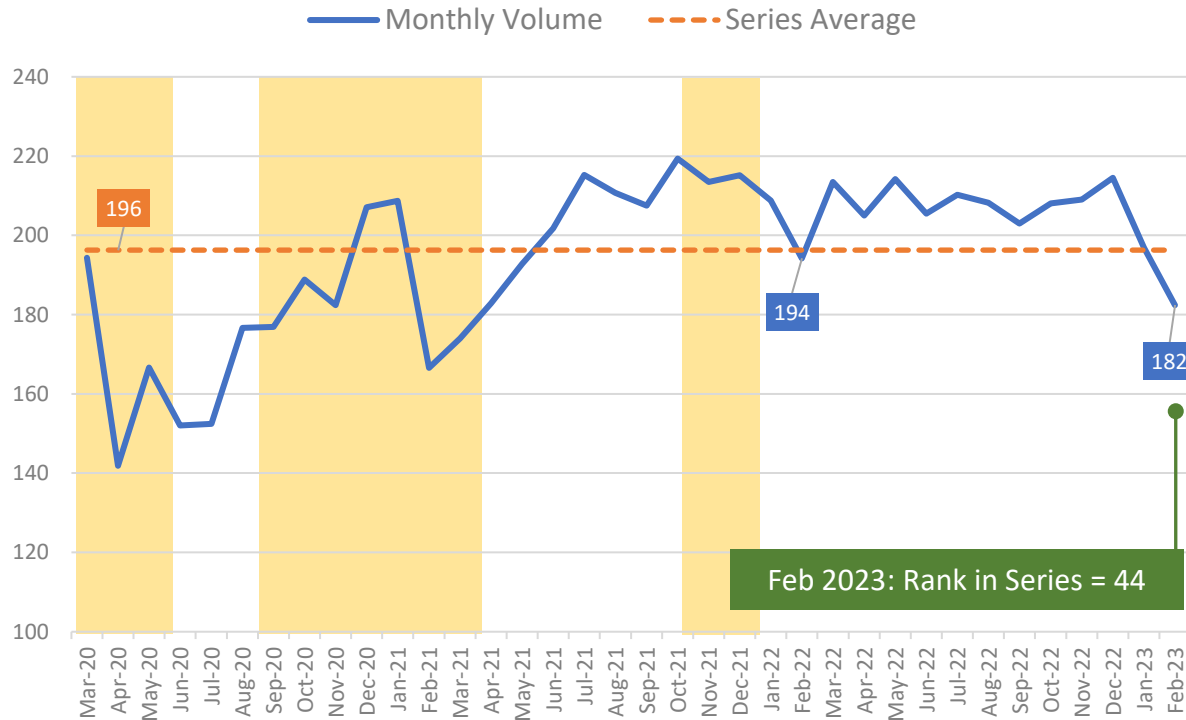


# 6. Patient Handover Delays over 15 Minutes (source, NAIG)

The volume of patient handover delays exceeding 15-minutes dropped for the second month in February, with 15k fewer delays taking the total volume to 182k. This is the lowest seen since March 2021. The average-daily volume increased (see slide 35) as it has for the past two years. Hours lost to handover delays also dropped to 96k, the lowest since August 2021.

## 1. Delays over 15 Minutes

Volume of Handovers Over 15 Minutes ('000, source NAIG)

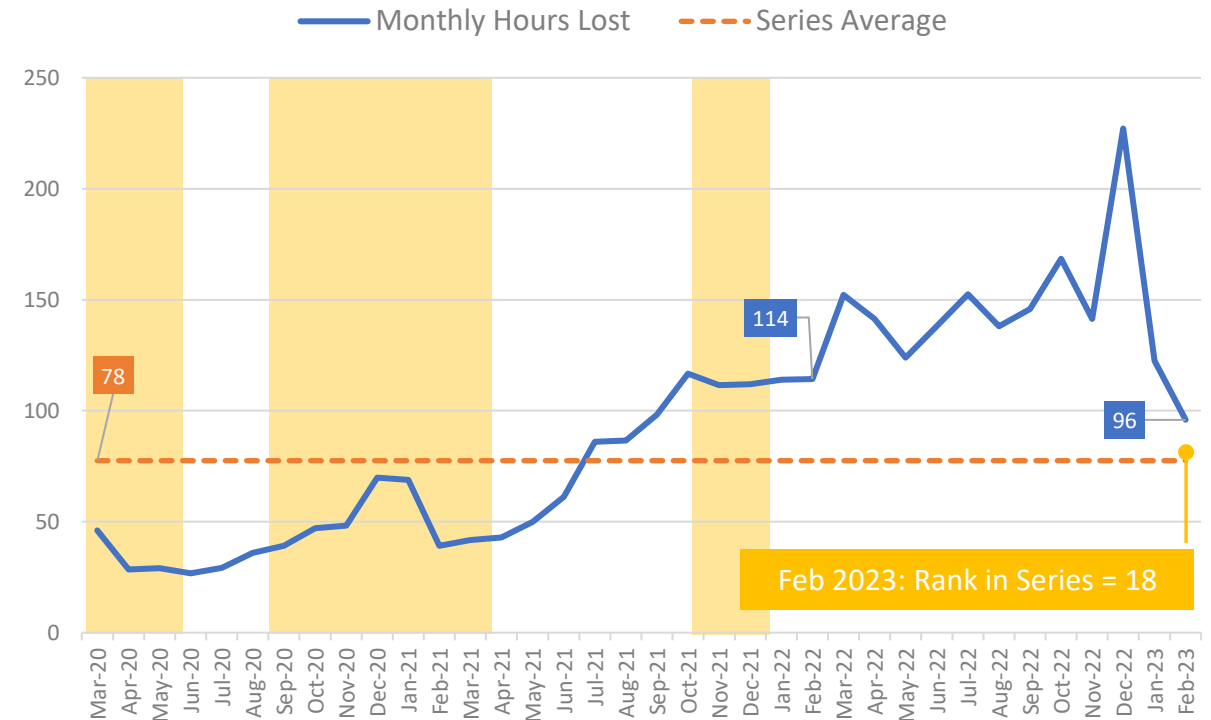


Yellow areas show COVID waves in the UK: source ONS.

← -6% (or -12k) difference, Feb '22 to Feb '23 →

## 2. Hours lost for Handovers Over 15 Minutes

Hours Lost: Handovers over 15 Minutes ('000, source NAIG)



Feb 2023: Rank in Series = 18

← -16% (or -18k) difference, Feb '22 to Feb '23 →

Note: Days on which Industrial Action takes place see a drop in handover delays.

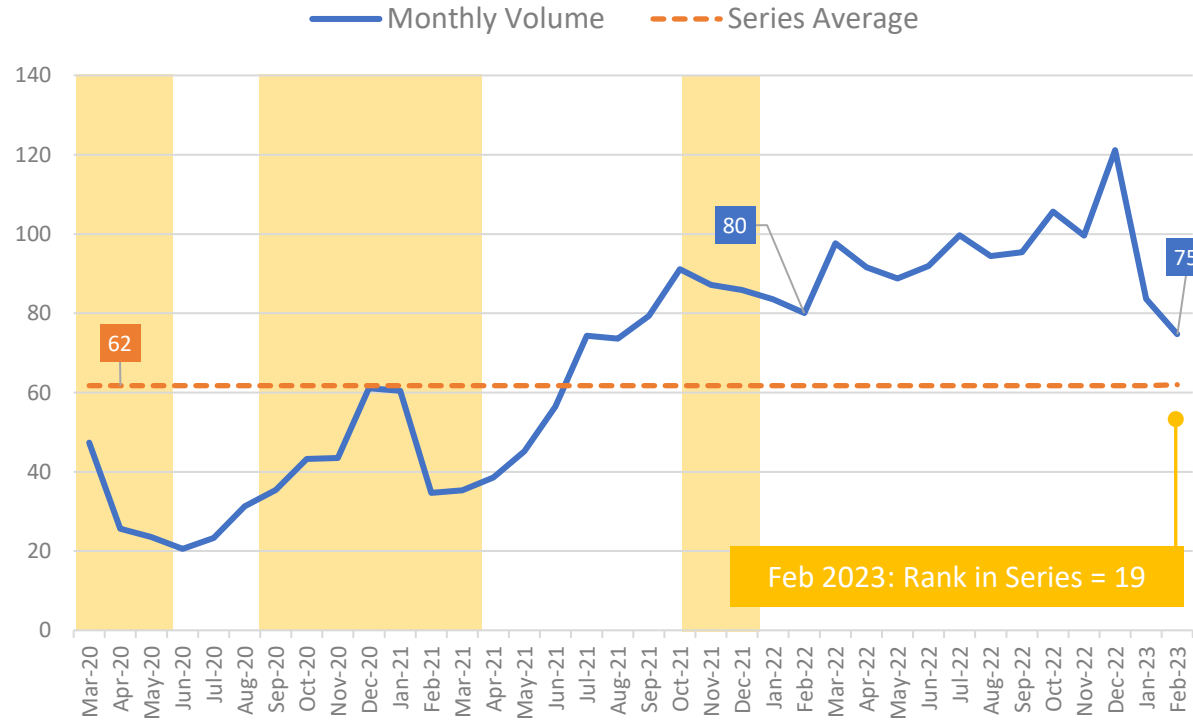


# 7. Patient Handover Delays over 30 Minutes (source, NAIG)

Delays of 30 minutes or more dropped to 75k in February 2023 – 5k lower than the same month last year (but 40k higher than February 2021). Hours lost also dropped, with 64k lost across the month.

## 1. Delays over 30 Minutes

Volume of Handovers Over 30 Minutes ('000, source NAIG)

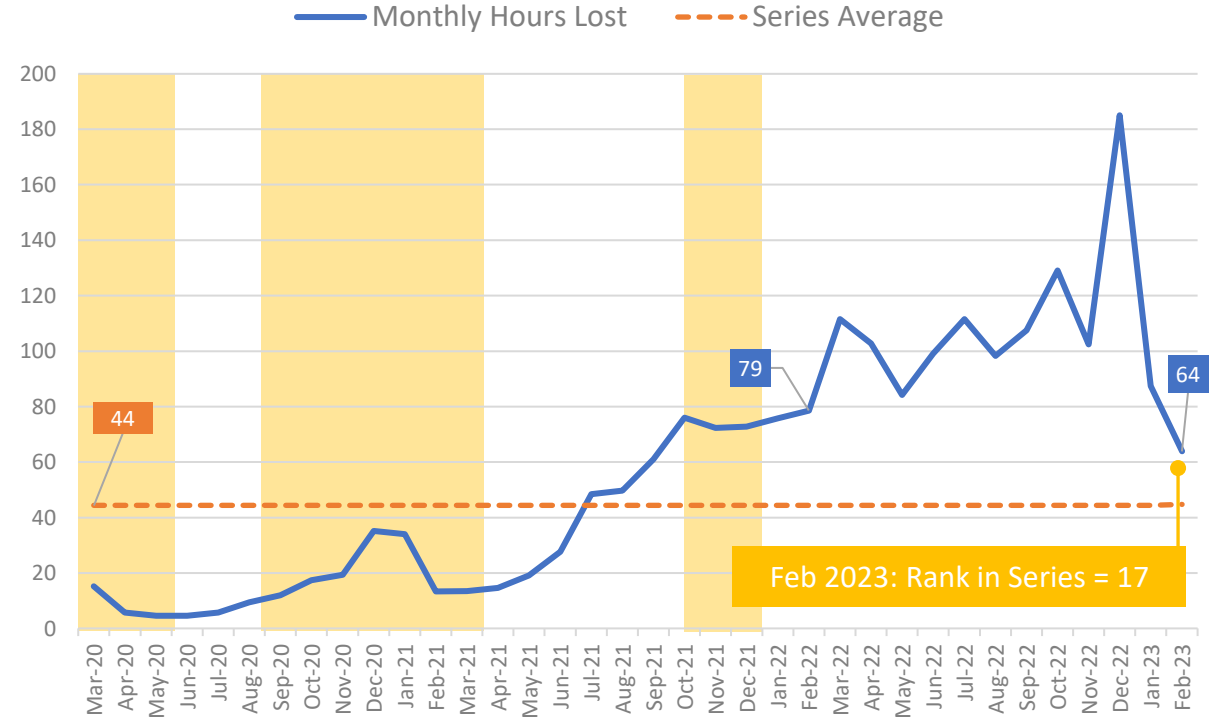


Yellow areas show COVID waves in the UK: source ONS.

← -7% (or -5k) →  
difference, Feb '22 to Feb '23

## 2. Hours lost for Handovers Over 30 Minutes

Hours Lost: Handovers over 30 Minutes ('000, source NAIG)



Feb 2023: Rank in Series = 17

← -19% (or -15k) →  
difference, Feb '22 to Feb '23

Note: Days on which Industrial Action takes place see a drop in handover delays.

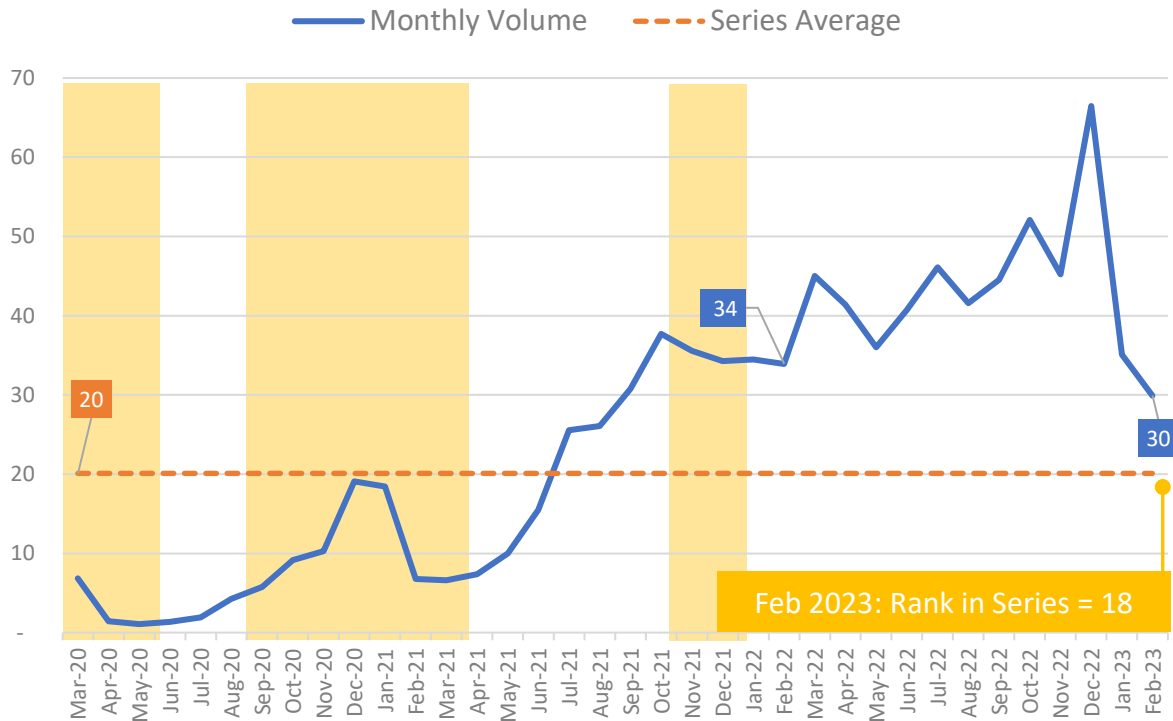


# 8. Patient Handover Delays over 60 Minutes (source, NAIG)

Delays of one-hour or longer dropped for the second consecutive month to reach their lowest since August 2021, while hours lost were at the lowest since September 2021. Both measures remain above their respective series average.

## 1. Delays over 60 Minutes

Volume of Handovers Over 60 Minutes ('000, source NAIG)

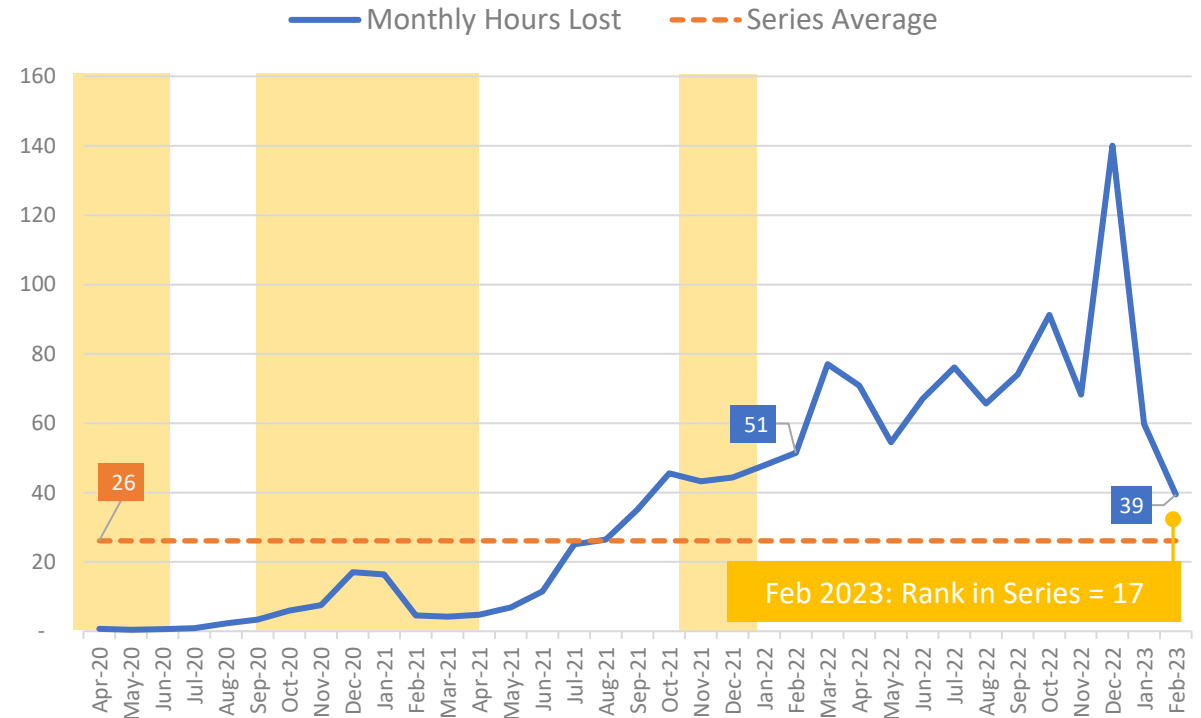


Yellow areas show COVID waves in the UK: source ONS.

**-12% (or -4k)**  
difference, Feb '22 to Feb '23

## 2. Hours lost for Handovers Over 60 Minutes

Hours Lost: Handovers over 60 Minutes ('000, source NAIG)



**-23% (or -12k)**  
difference, Feb '22 to Feb '23

Note: Days on which Industrial Action takes place see a drop in handover delays.





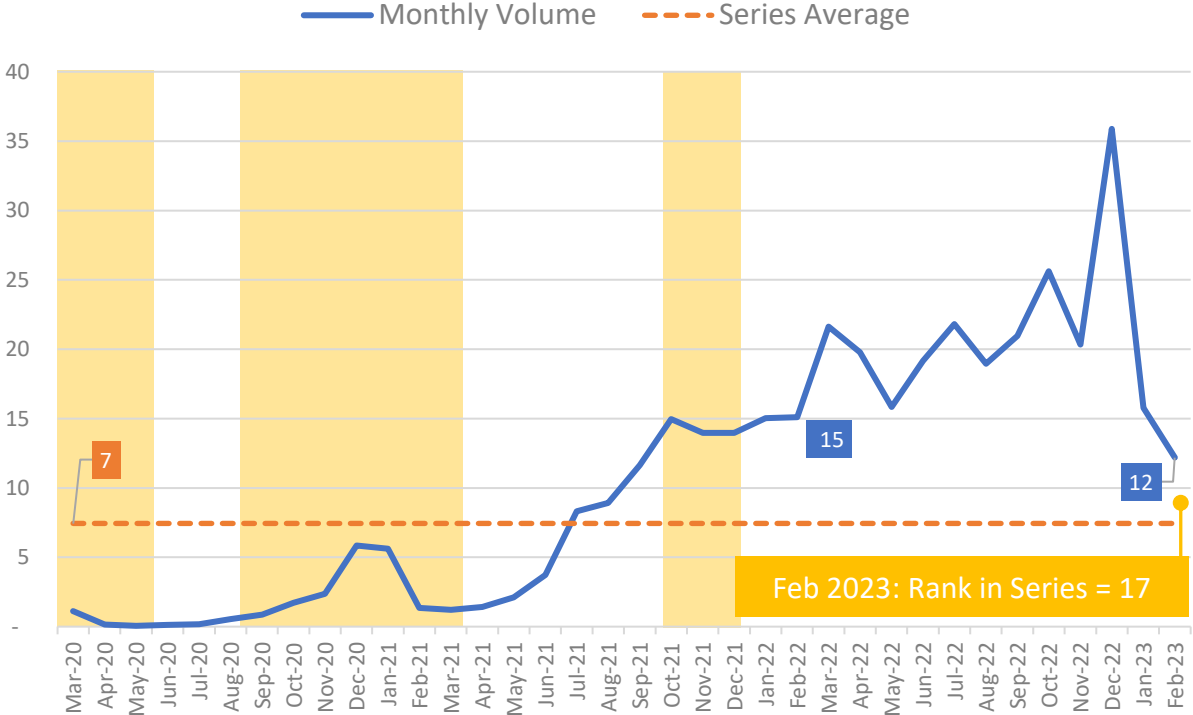
# 9. Patient Handover Delays over 120 Minutes (source, NAIG)



Delays of two-or-more hours followed the pattern seen above, dropping to their lowest volume since the middle of 2021.

## 1. Delays over 120 Minutes

Volume of Handovers Over 120 Minutes ('000, source NAIG)

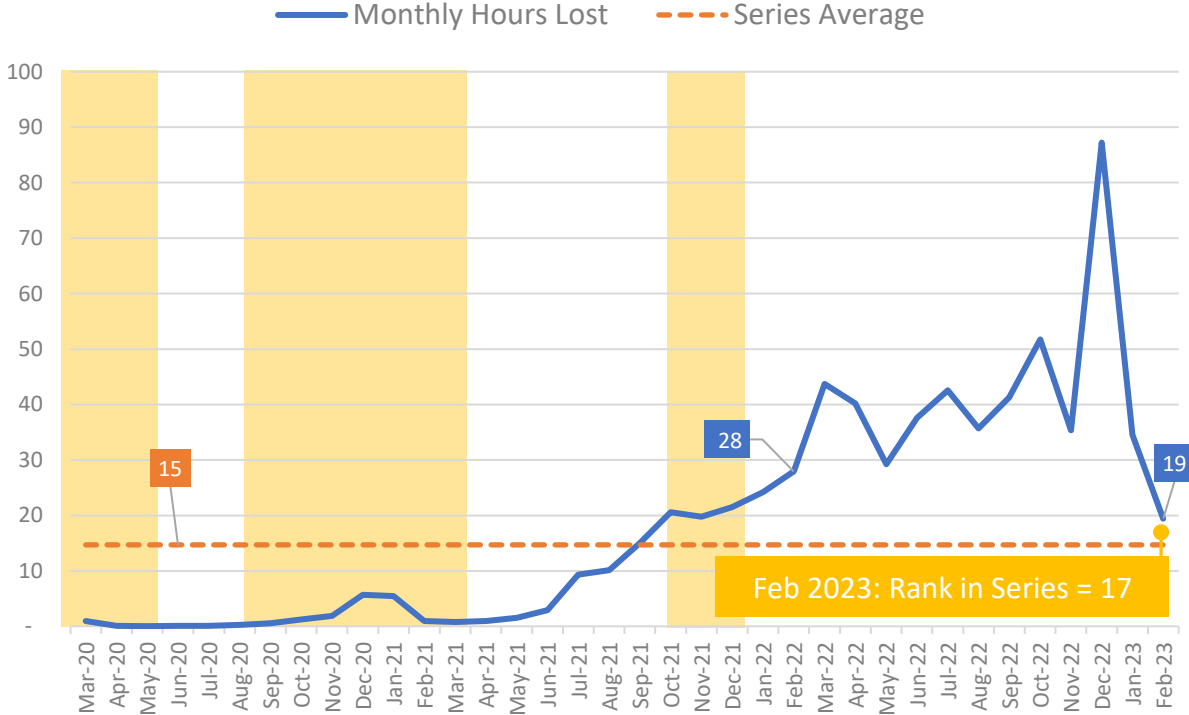


Yellow areas show COVID waves in the UK: source ONS.

← -19% (or -3k) difference, Feb '22 to Feb '23 →

## 2. Hours lost for Handovers Over 120 Minutes

Hours Lost: Handovers over 120 Minutes ('000, source NAIG)



← -30% (or -9k) difference, Feb '22 to Feb '23 →

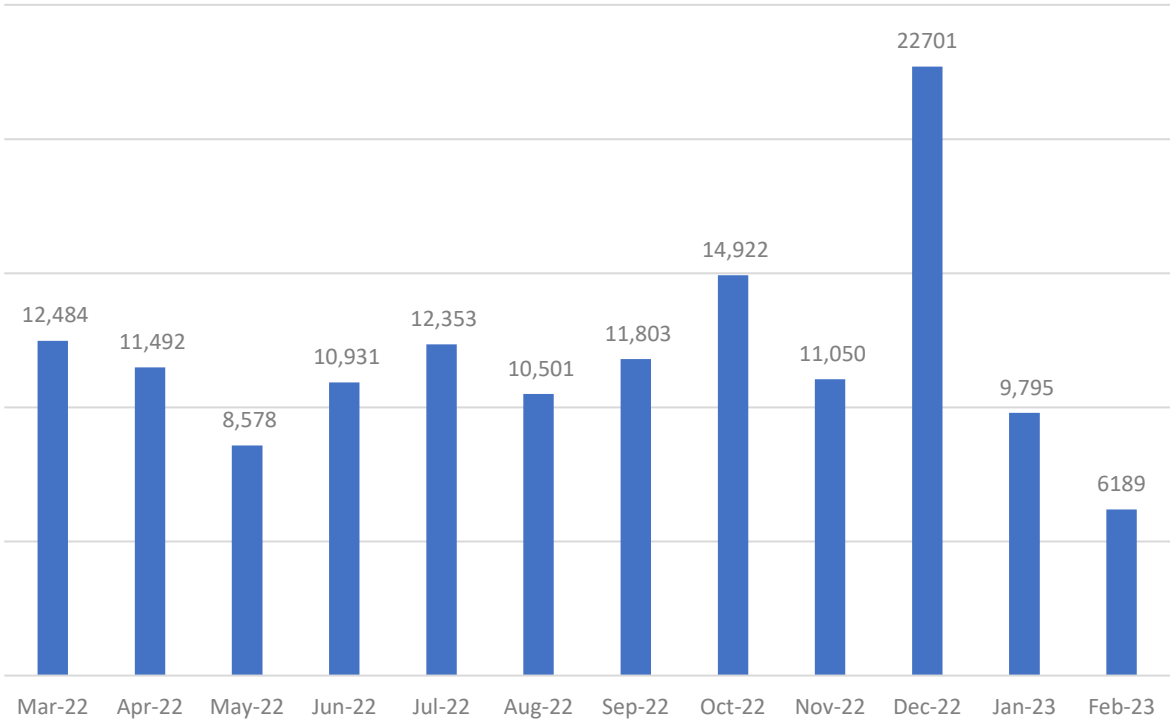
# 10. Patient Handovers Longer than Three Hours (source, NAIG)



In February, the very longest delays were at their lowest volume in 12-months. Delays of three-or-more hours fell to just over 6k across the month, while those of ten-or-more hours fell to 183 – a tenth of the volume seen just two months previously.

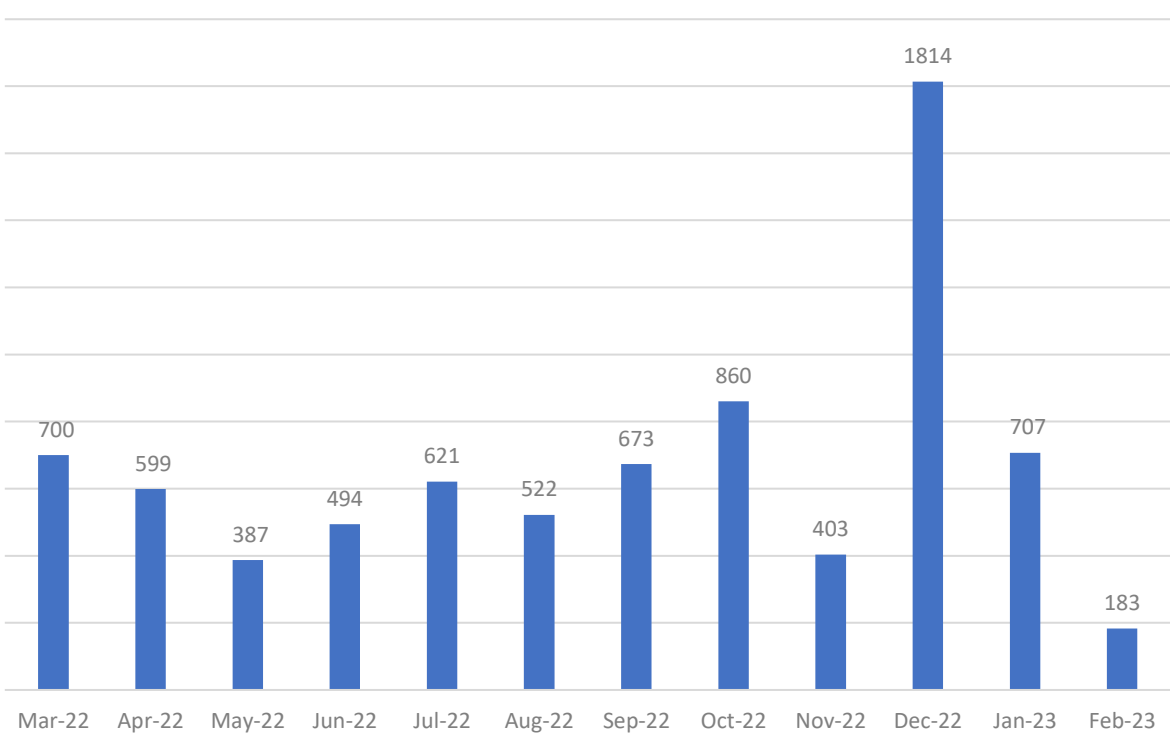
## 1. Longer Handover Delays: All Over Three Hours

Volume of Handovers over Three Hours



## 2. Longer Handover Delays: All Over Ten Hours

Volume of Handovers over Ten Hours

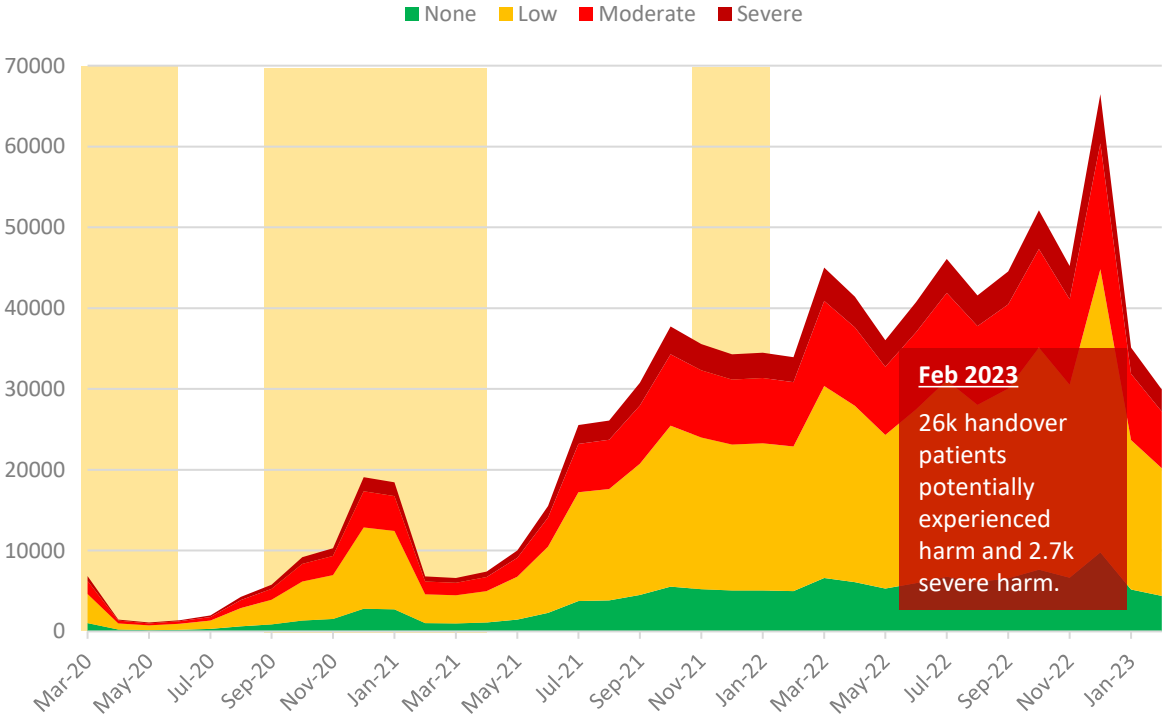


# 11. Impact on Patients and Crew (source, NAIG, [AQI Data](#) and [AACE](#))

Around 26k patients experienced potential harm as a result of long handover delays in February 2023, with just under three-thousand of these experiencing severe harm\*. Looking at the total hours lost to handover delays in February, the sector lost the equivalent of 77k job cycles. Using Face-to-Face incident volumes from February’s AQI data, this equates to 14% of potential ambulance capacity across the month – compared with six percent at the start of 2020.

## 1. Estimated number of patients experiencing potential harm

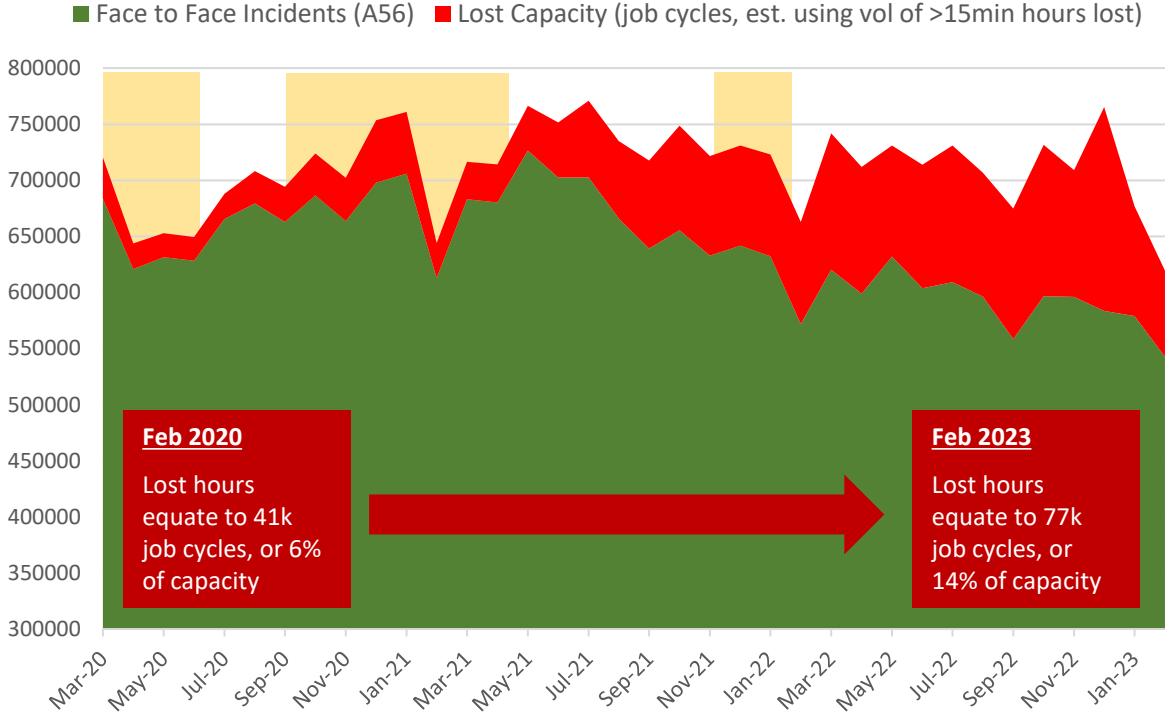
Vol of >60 min handovers by estimated harm (NAIG & AACE)



\*Estimates based on clinical review of patients waiting >60 minutes in 2021

## 2. Estimated impact of lost hours on capacity

Lost Hours and Impact on Capacity

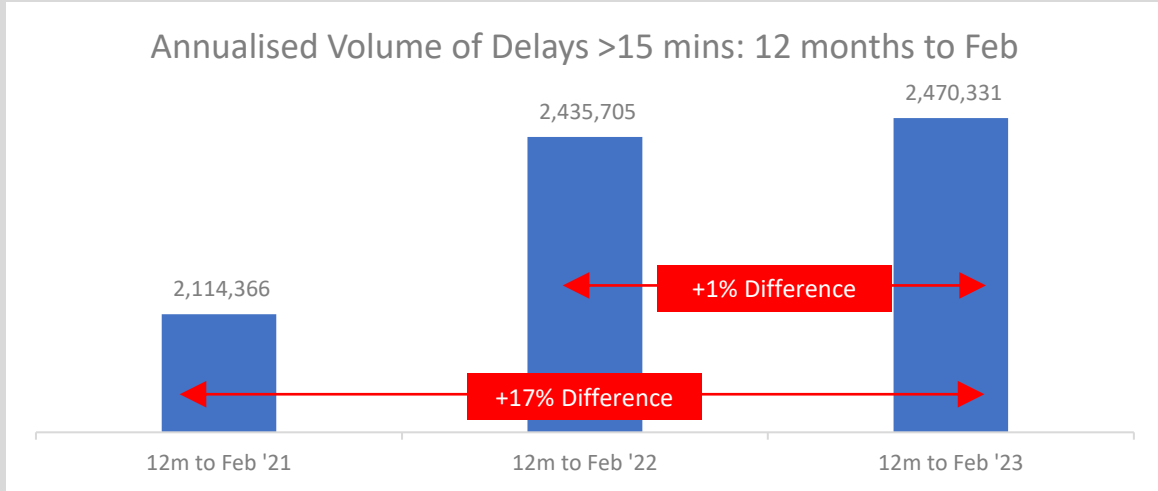
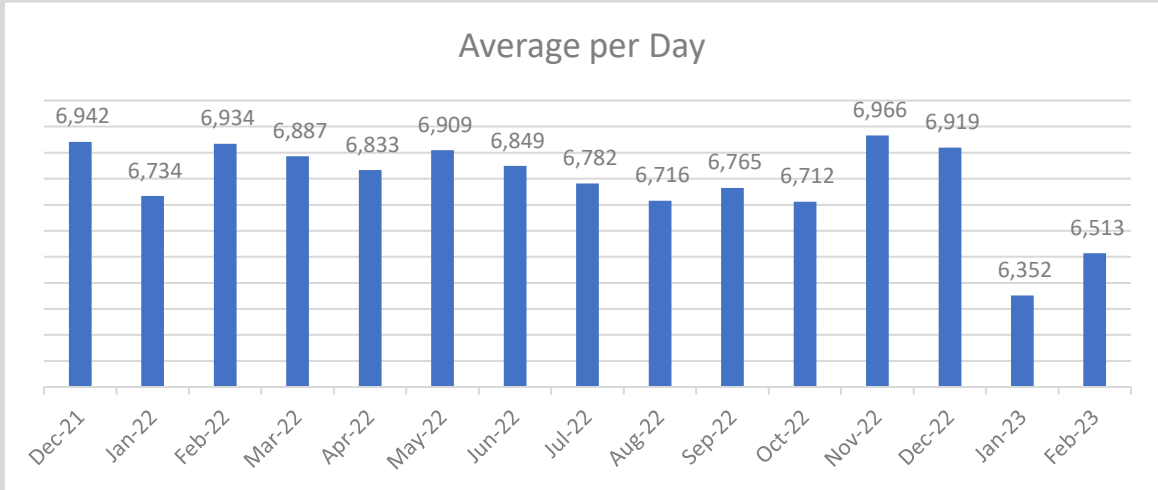


Yellow areas denote COVID waves in the UK: source ONS.

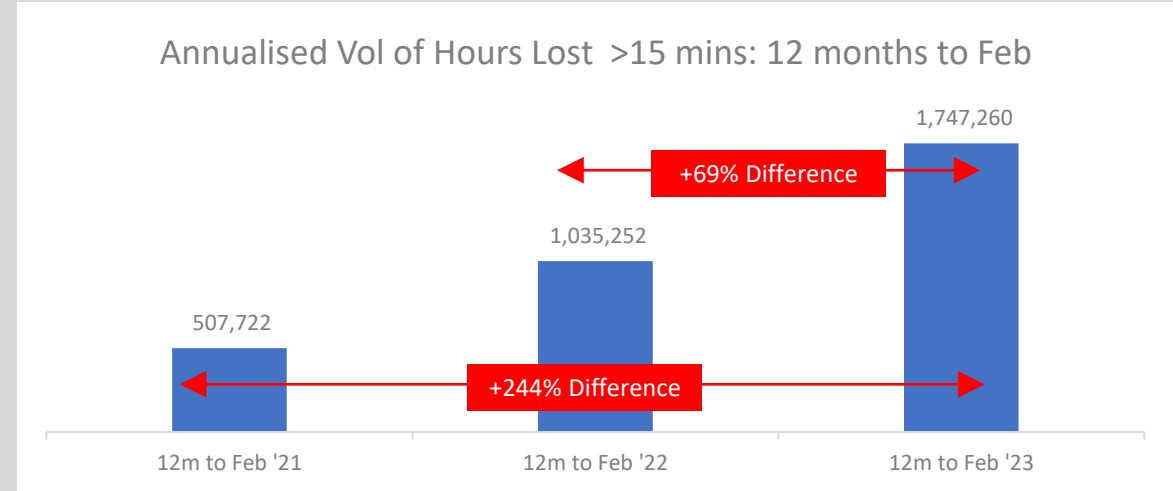
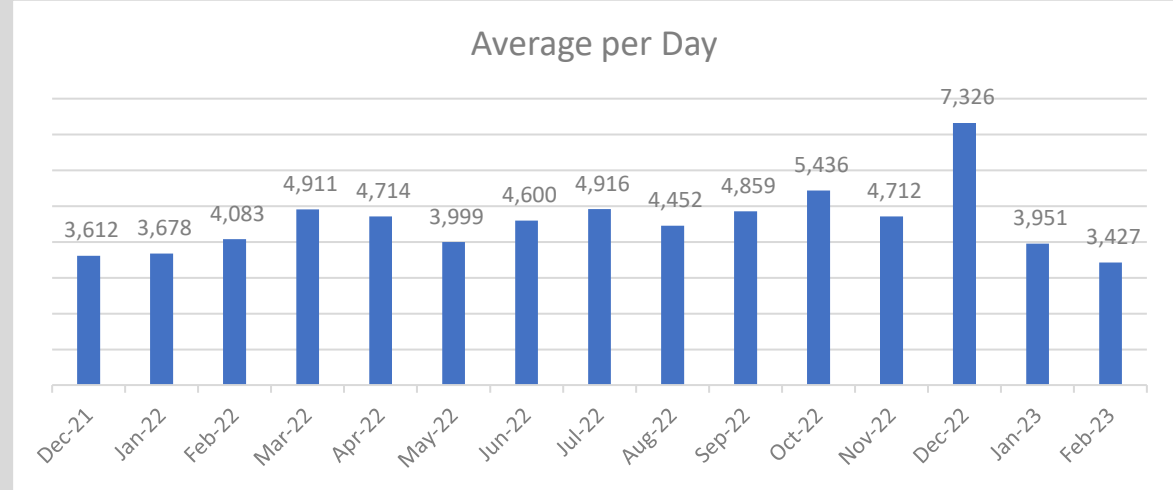
# 12. Appendix (i): Average Daily and Annualised Data for >15 minute delays (source, NAIG)



## 1. Volume of Handover Delays over 15 minutes



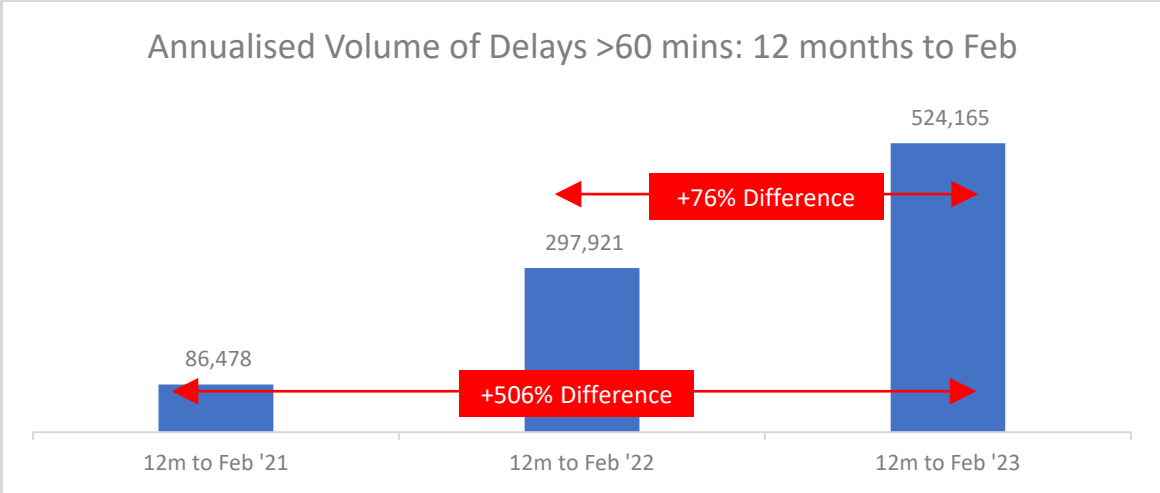
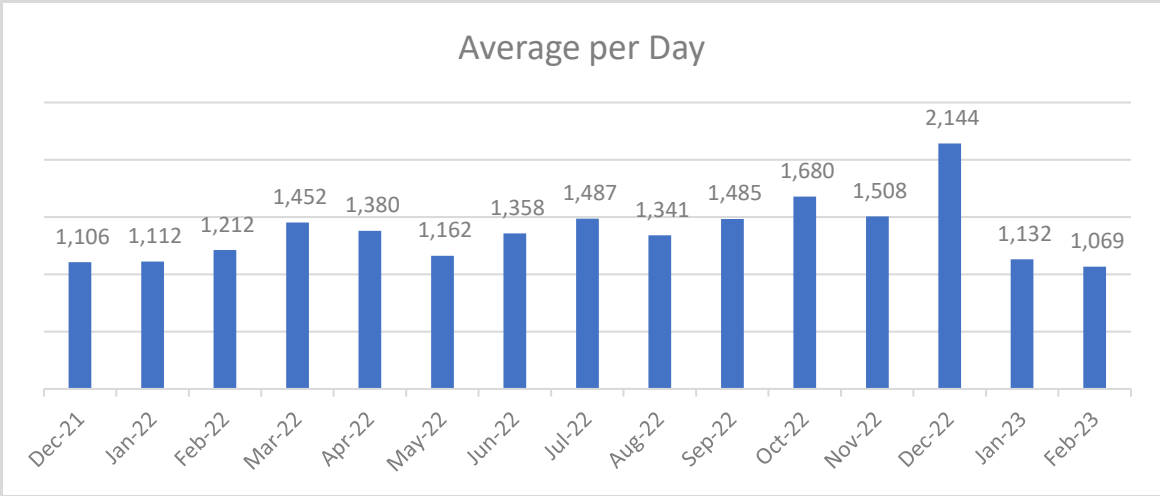
## 2. Hours Lost for Handover Delays over 15 minutes



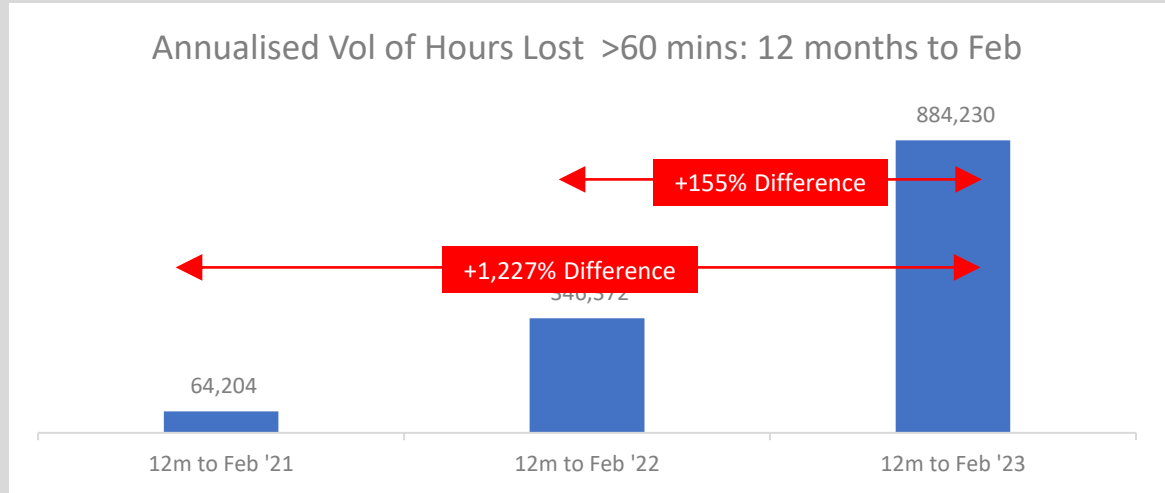
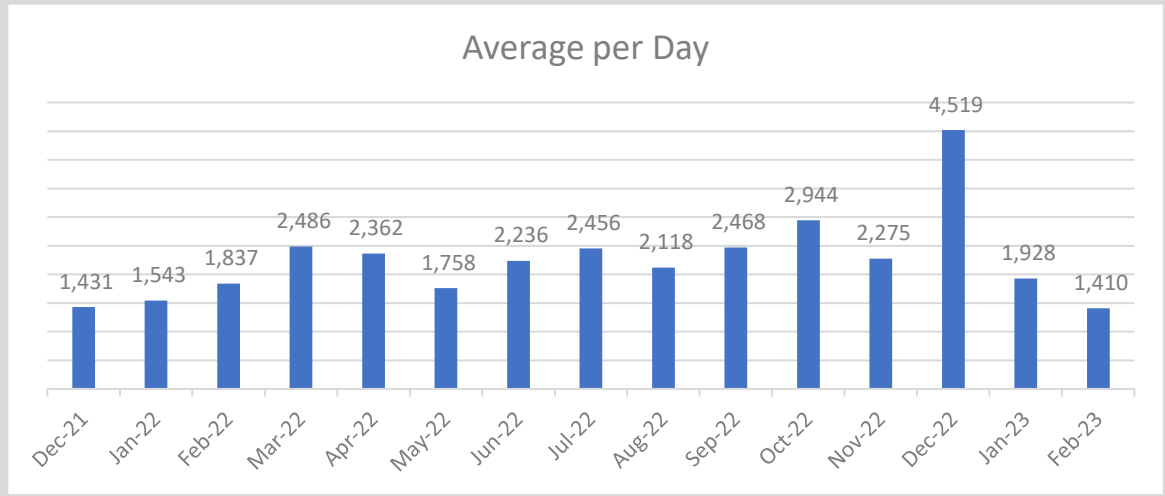
# 13. Appendix (ii): Average Daily and Annualised Data for >60 minute delays (source, NAIG)



## 1. Volume of Handover Delays over 60 minutes



## 2. Hours Lost for Handover Delays over 60 minutes



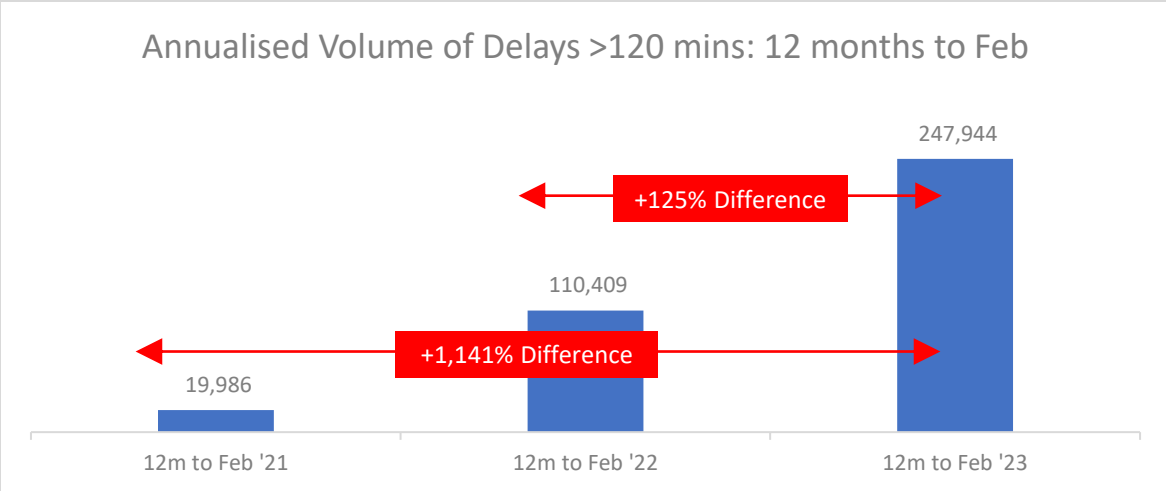
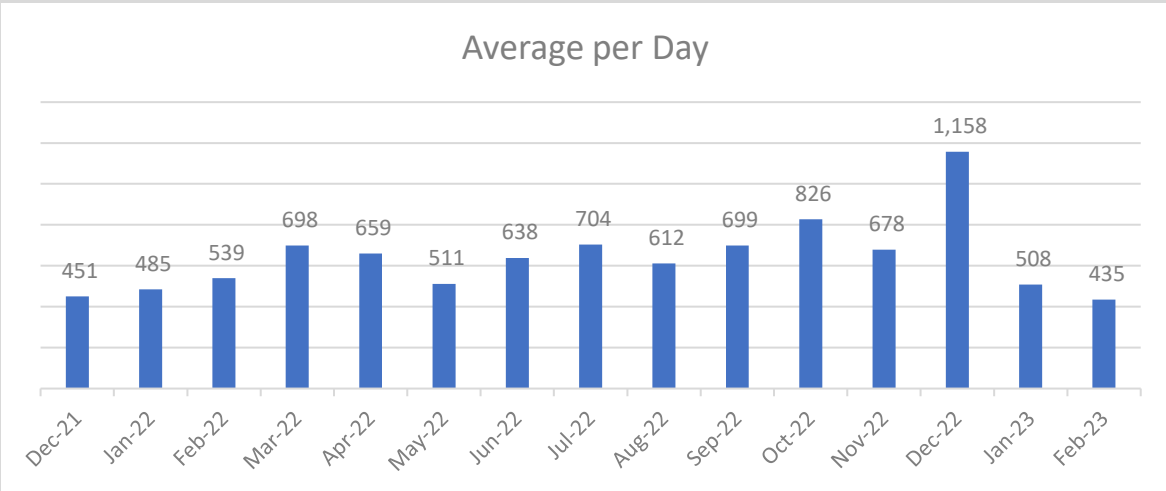
Note: Days on which Industrial Action takes place see a drop in handover delays.



# 14. Appendix (iii): Average Daily and Annualised Data for >120 minute delays (source, NAIG)



## 1. Volume of Handover Delays over 120 minutes



## 2. Hours Lost for Handover Delays over 120 minutes

