

# **National Ambulance Handover Delays – Final**

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Data period to end May 2023

**Date of Report: June 29<sup>th</sup>, 2023**

# 2. Summary and Contents



**Overview:** May 2023 saw an increase in the number of hour-plus handover delays, and although volumes were lower than in May 2022, the 33-thousand hours lost greatly exceeded the seven-thousand lost in May 2021. There continues to be evidence of short-term improvement with time lost to longer delays considerably lower than the record levels seen in December 2022: however, in May 2023 the annualized volume of lost hours was ten-times greater than in 2021.

Pages 3  
Effective Interventions: The John Radcliffe Hospital

- This month’s case study focuses on the John Radcliffe Hospital in Oxfordshire. As the proportion of handover delays exceeding 60-minutes has increased across England in recent years, peaking at 23-percent in December 2022, this hospital has never exceeded five-percent. This summary looks at some of the factors in place that have helped John Radcliffe keep longer delays to a minimum.

Page 4.  
Average Handover Times and Delays as a Proportion of All Handovers

- May 2023 continued the trend seen in recent months with a faster mean-handover time than the same month last year, but still several minutes slower than in May 2021.
- Handovers of one-hour or longer accounted for eight-percent of the total in May 2023. This compares with 11-percent in 2022, but three-percent in May 2021.

Pages 5 to 12.  
Handover Volume and Hours Lost

- Patient handovers exceeding an hour have dropped considerably since the record levels seen in December 2022, but in May 2023 remained high with 28-thousand such delays accounting for 33-thousand hours lost.
- Hours lost to these delays were over four-times greater than in May 2021, and the annualised volume was over ten-times greater that two years ago.

Page 13.  
Impact on Patients and Crew

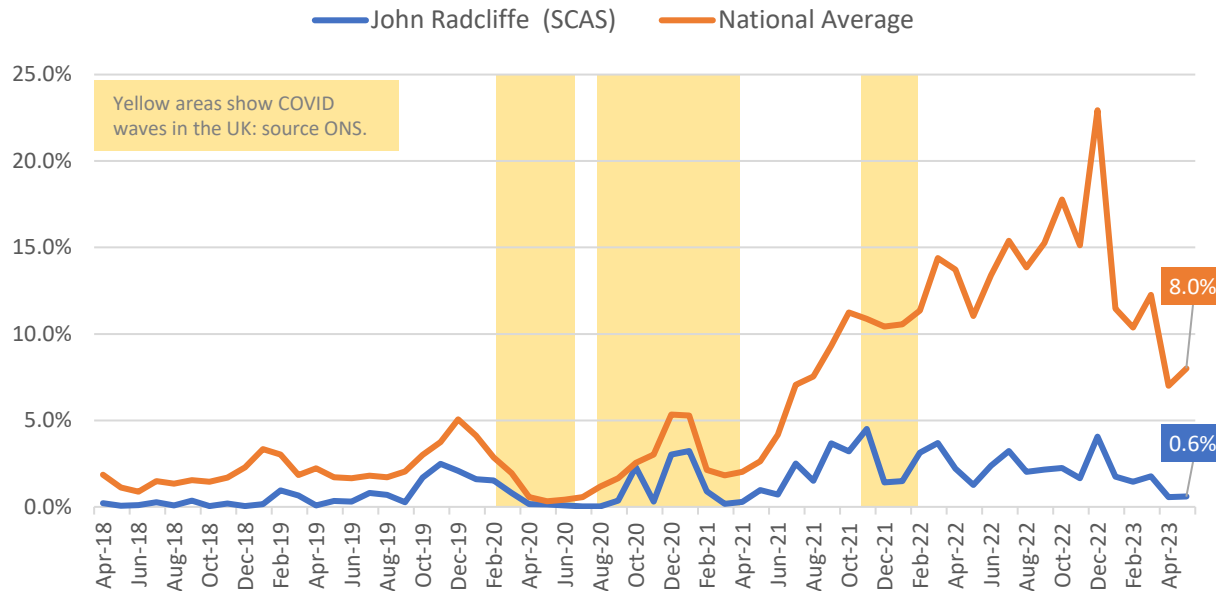
- Tens of thousands of patients continue to risk of potential harm as a result of longer handovers, while essential ambulance resources are lost due to those delays.
- Around twenty-thousand patients experienced potential harm as a result of longer delays this month, while an estimated 73-thousand ambulance job cycles were lost.

### 3. John Radcliffe Hospital (SCAS Region)

The average daily volume of handovers at the John Radcliffe Hospital exceeds the national average by some margin. Despite this, the hospital's proportion of handover delays of 60-minutes or longer has remained under five-percent since April 2018, while the national average has peaked at over 20-percent.

#### Hour-plus handovers as percentage of all handovers

John Radcliffe: % of Handovers over 60 Minutes



#### About John Radcliffe Hospital and its current interventions

**Context.** The hospital averages around 100 ambulance handovers each day. This compares with a national average of under 50 handovers per-hospital per-day (sources: John Radcliffe Hospital and NAIG data);

**Alternatives to Emergency Department (ED).** High proportions of ambulance arrivals are taken straight to the relevant specialty. These include a Same Day Emergency Care (SDEC) Unit and direct-to-ward access for appropriate tertiary arrivals. "Call before convey" directs patients to the medical admission unit based on clinical review. As a result, the proportion of emergency admissions via ED is 53% (vs.74% for England overall);

**ED Operational Process.** This sees ambulance patients offloaded with rapid assessment in dedicated areas. Two ambulance handover nurses facilitate this process, and assessment is nurse led (at band 5 and 6 level), with health care assistant and consultant input. Five bays are available for handover patients deemed not fit-to-sit, with a seated area serviced by four additional assessment cubicles for those patients able to sit;

**Bed capacity.** Since the pandemic the site has grown its general and acute capacity, and nursing staff levels;

**SURGE process.** High variance in daily attendance volumes can see capacity quickly reached within ED. At this point the Hospital Ambulance Liaison Officer works closely with the ED team. Tests can be conducted outside assessment areas to ensure clinical decisions are made safely, but without delay, and patients discharged if appropriate - sometimes before full handover has occurred;

**Culture.** The operational culture and use of surge process has been key to successfully reducing handover delays. The most important element of this is the refusal to normalise delays and ambulances queuing. Regular operational meetings which link the whole Trust has made this a culture of improvement and safety first.

#### Summary of Data

Percent of handovers <60 mins (average for series)

Hospital = 1.3%

National = 5.9%

Percent of handovers <60 mins (av. last 12 months)

Hospital = 2.0%

National = 13.6%

#### About John Radcliffe Hospital

One of four hospitals within the Oxford University Hospital NHS Foundation Trust. It has a large, Type 1 ED which is a Major Trauma Centre as well as a tertiary referral unit covering various specialities. It is served by a single ambulance provider with a small proportion of private providers sub-contracted from South Central; The site has around 350 attendances each day of which 30% attend by ambulance. This is high compared with other local hospitals, which average between 14% and 28% ambulance attendances.



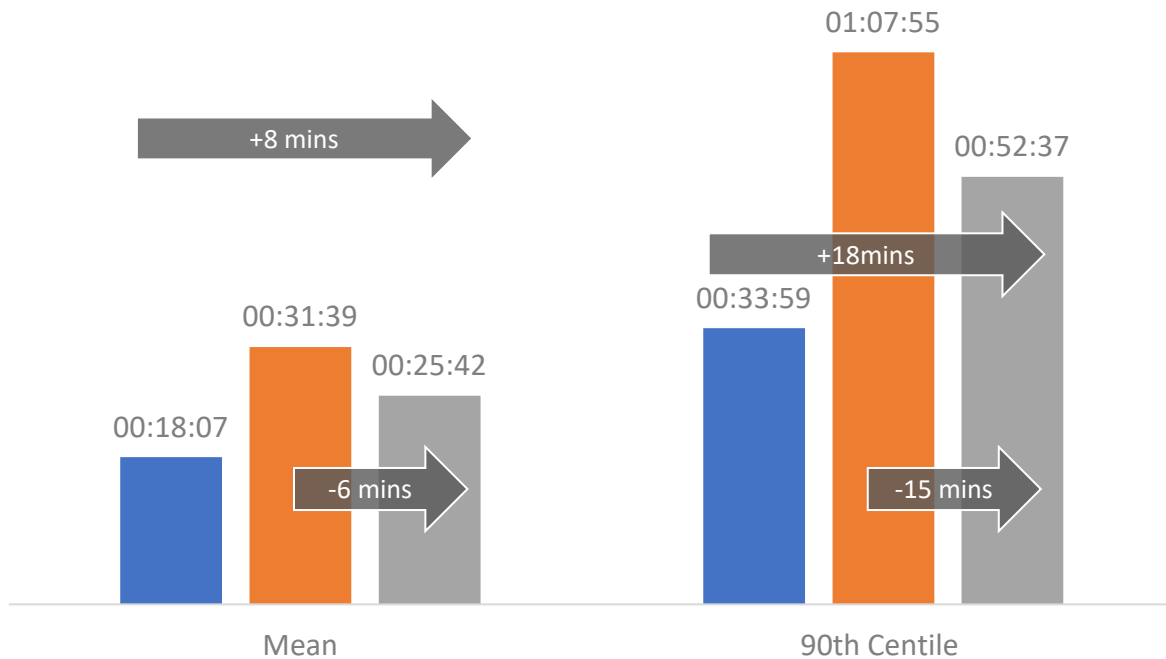
# 4. Average Handover Times and Delays as Proportion of All Handovers (source, NAIG)

At nearly 26-minutes, the mean handover time in May 2023 was around six minutes faster than May 2022, but eight-minutes slower than May 2021. Similarly, at eight-percent, the proportion of handovers exceeding one-hour is less than last year, but some way above the equivalent 2021 figure.

## 1. Mean and 90<sup>th</sup> Centile Handover Times

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

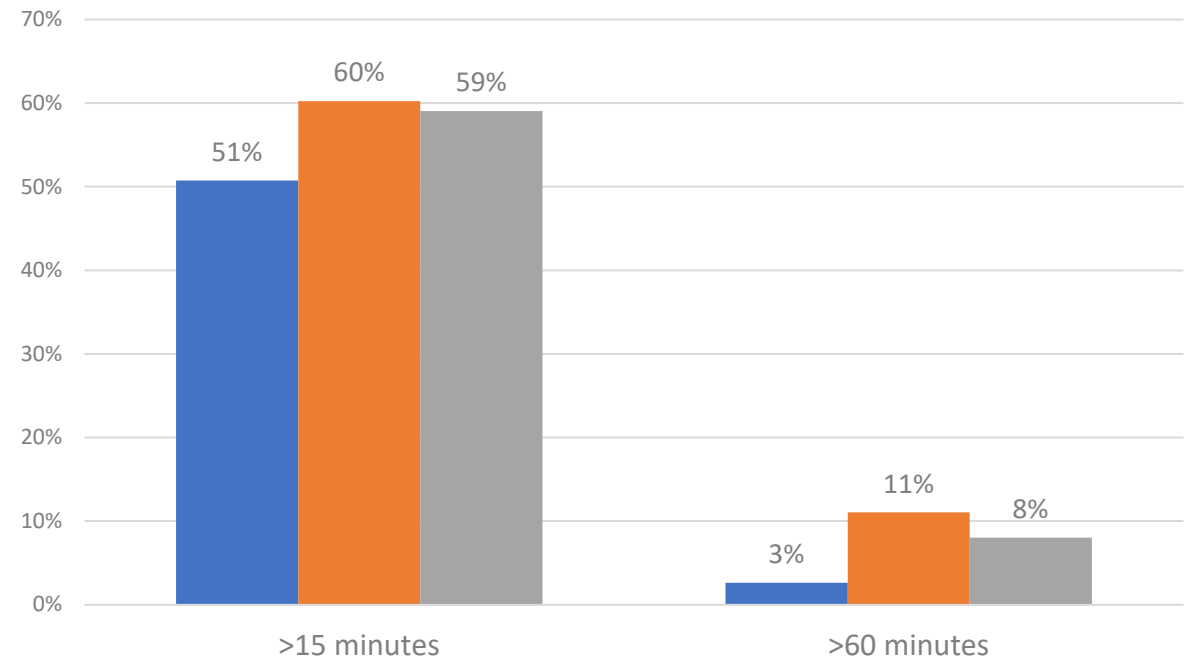
■ May-21 ■ May-22 ■ May-23



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

Handover Delays as % of All Handovers

■ May-21 ■ May-22 ■ May-23

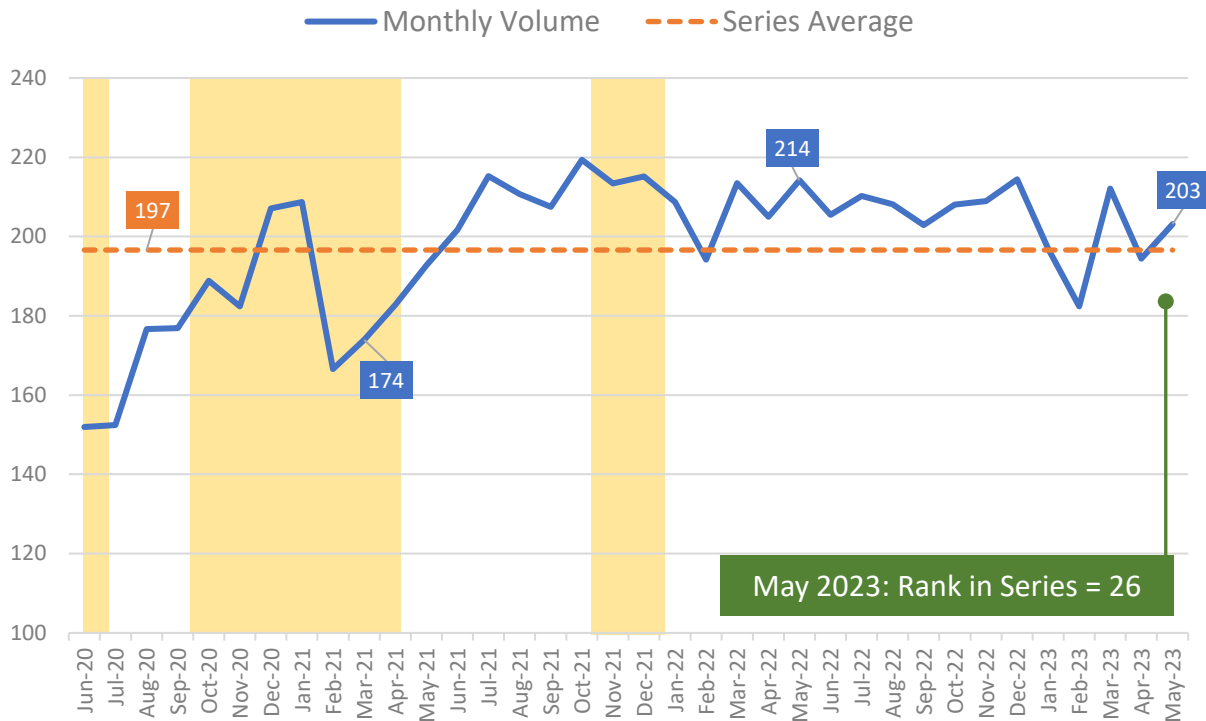


# 5. Patient Handover Delays over 15 Minutes (source, NAIG)

There was an uplift in handover delays in May 2023, and the subsequent hours lost. While the trend for the number of handovers exceeding 15-minutes is relatively flat, hours-lost show are nearly twice those seen in May 2021 - and the annualised data show two years of strong, consecutive growth (see next page).

## 1. Delays over 15 Minutes

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

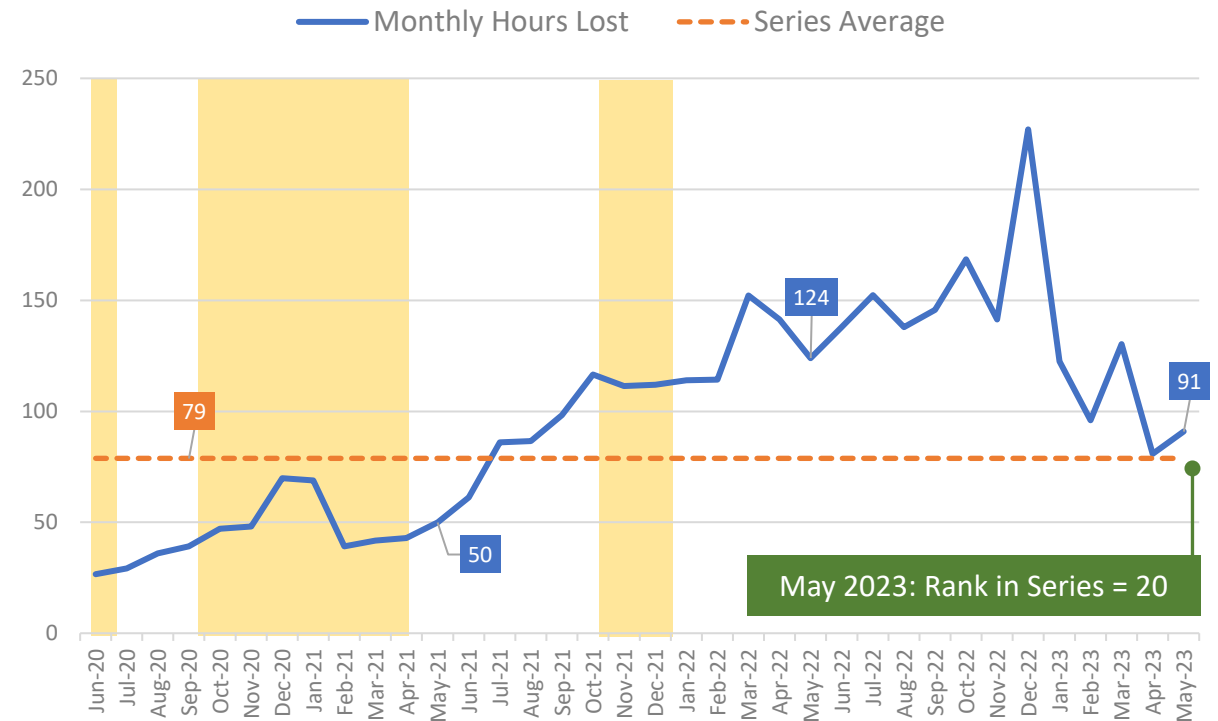


Yellow areas show COVID waves in the UK: source ONS.

← -5% (or -11k) →  
difference, May '22 to May '23

## 2. Hours lost for Handovers Over 15 Minutes

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

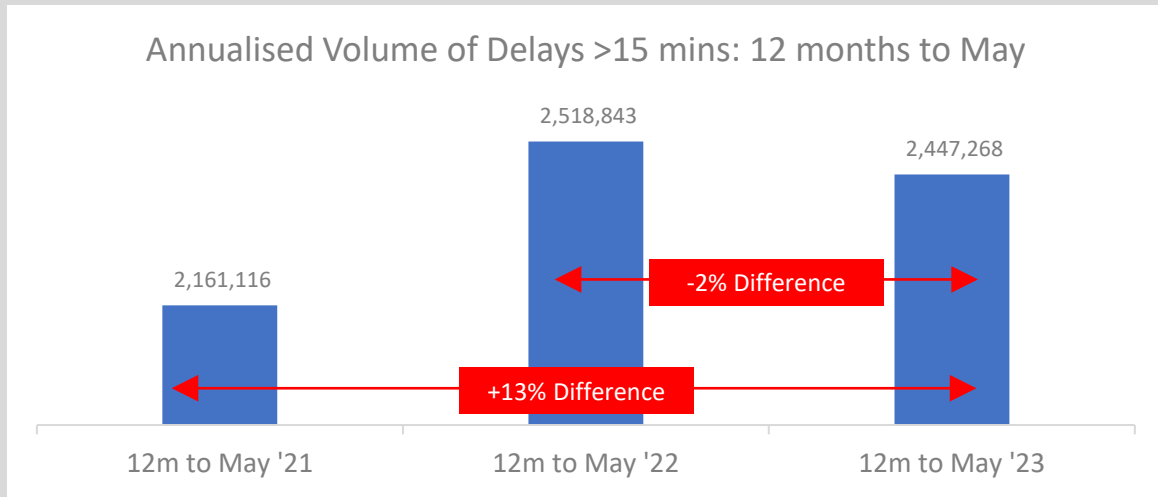
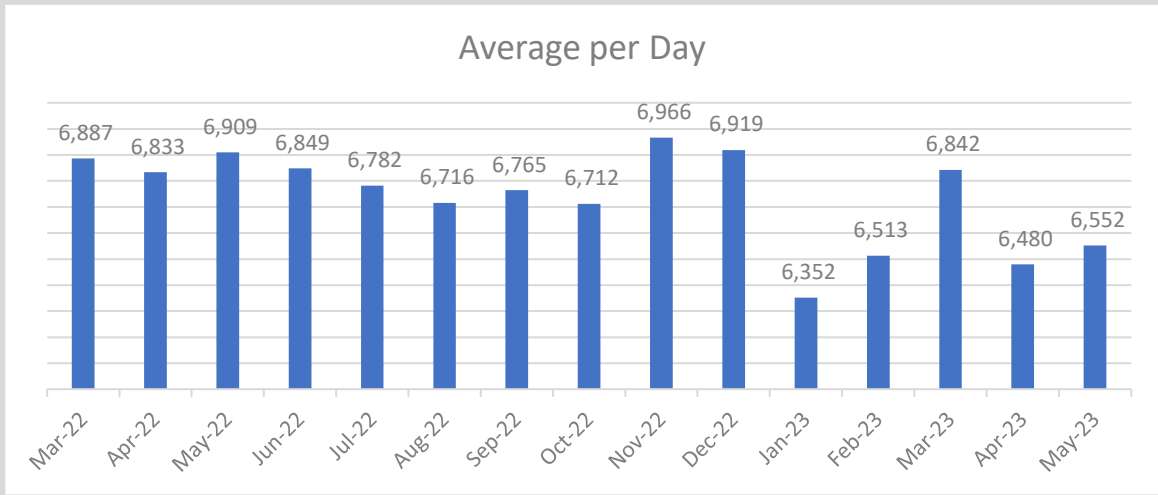


← -27% (or -33k) →  
difference, May '22 to May '23

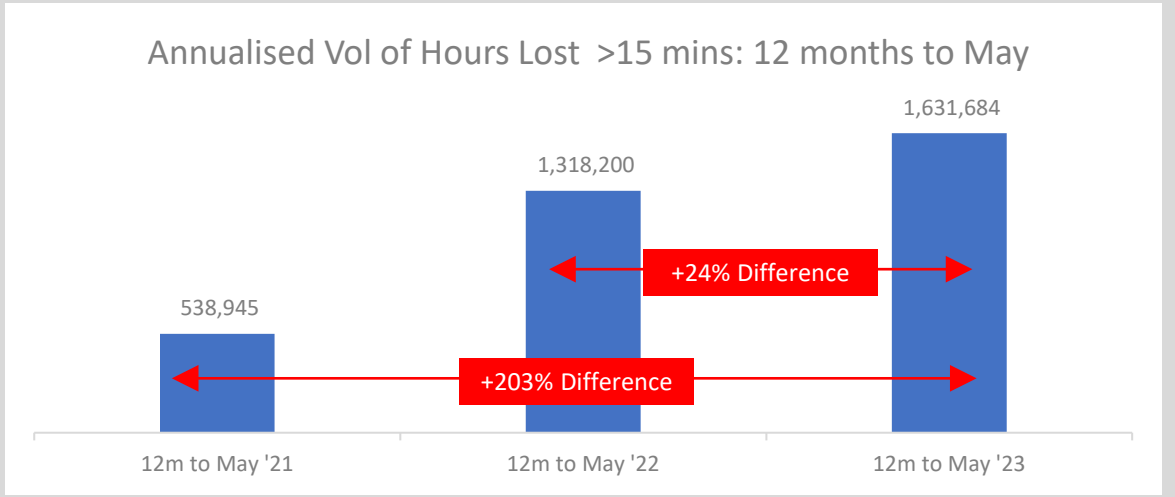
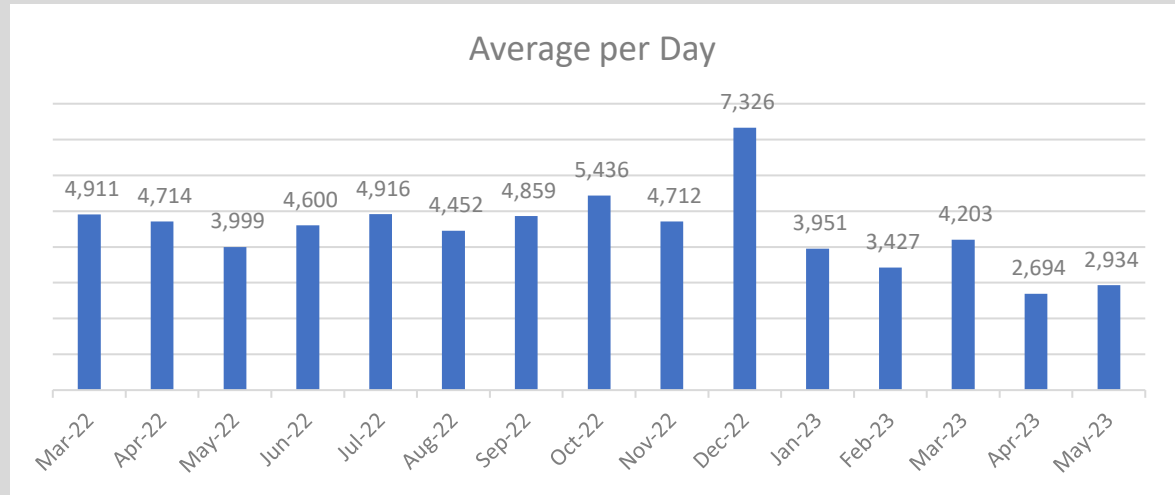


# 6. Average Daily and Annualised Data for >15 minute delays (source, NAIG)

## 1. Volume of Handover Delays over 15 minutes



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

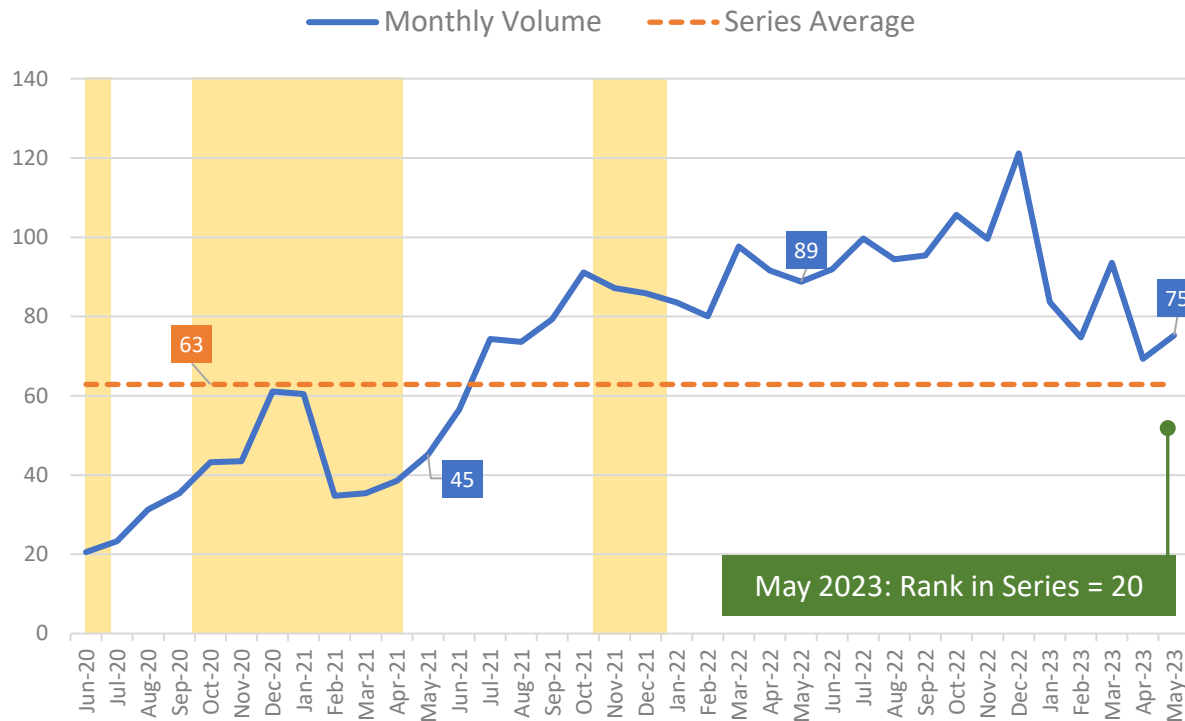


# 7. Patient Handover Delays over 30 Minutes (source, NAIG)

Handover delays of 30 minutes or more, and the associated hours lost, increased in May 2023 – and, although below the levels seen in May 2022, remain well above those recorded in May 2021.

## 1. Delays over 30 Minutes

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

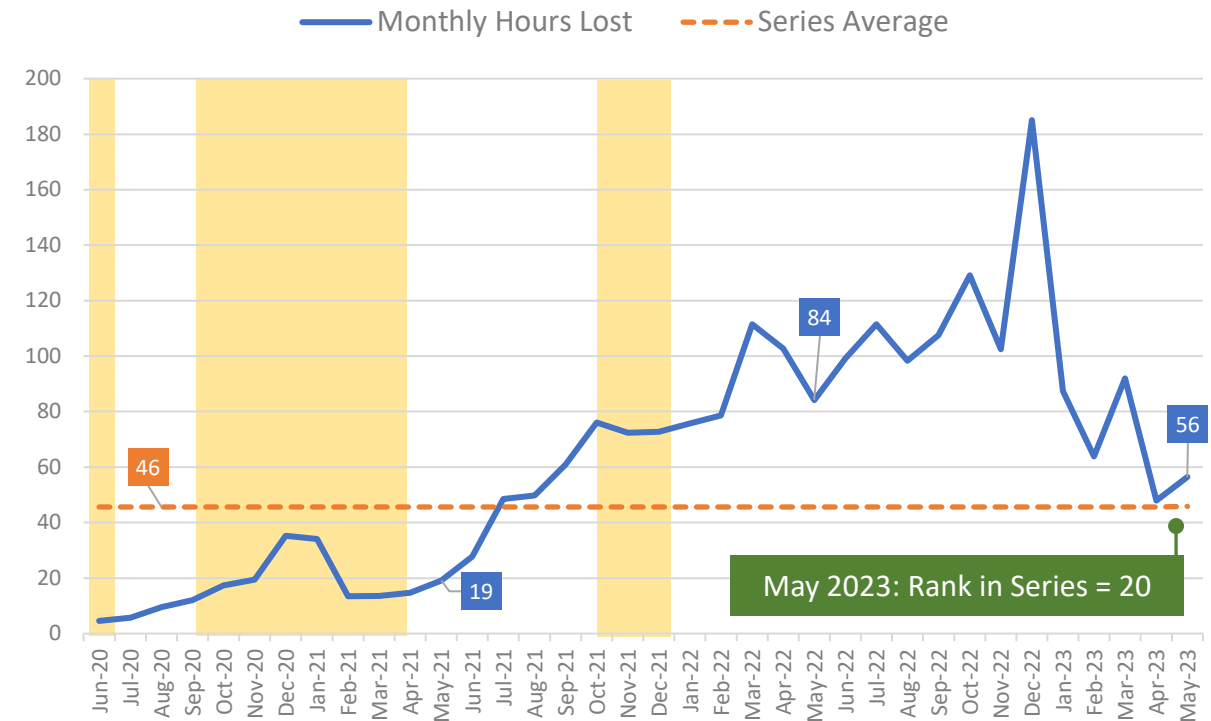


Yellow areas show COVID waves in the UK: source ONS.

← -15% (or -14k) →  
difference, May '22 to May '23

## 2. Hours lost for Handovers Over 30 Minutes

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



← -33% (or -28k) →  
difference, May '22 to May '23

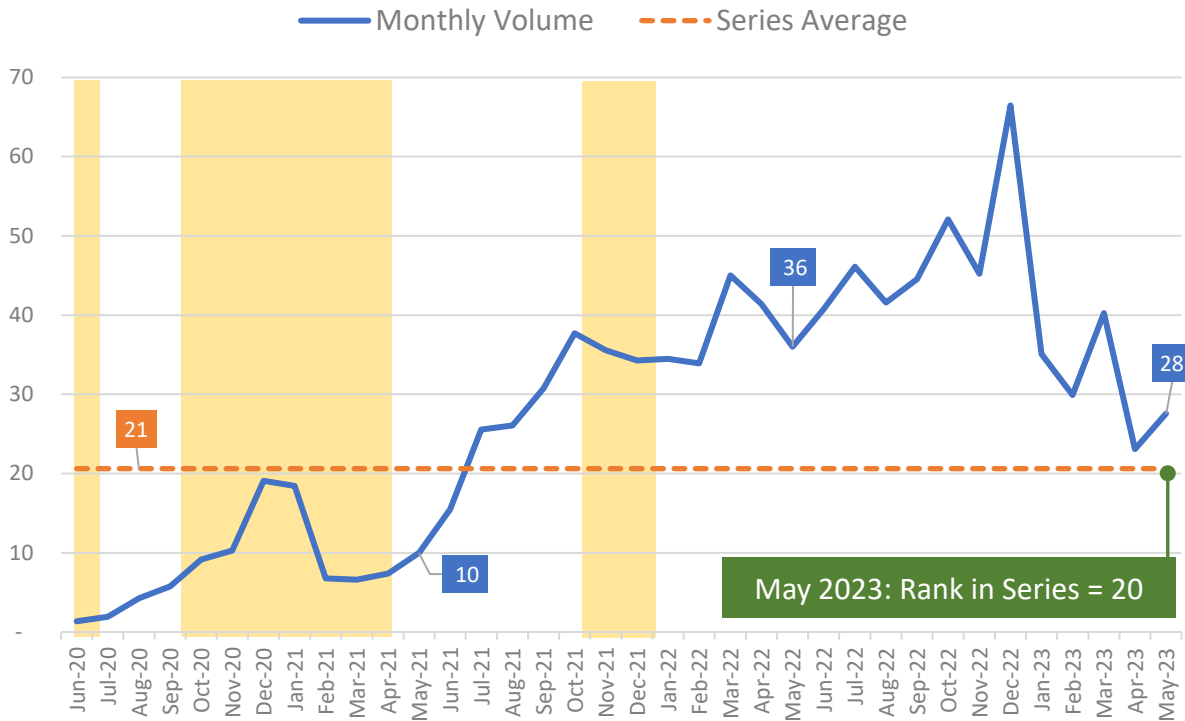


# 8. Patient Handover Delays over 60 Minutes (source, NAIG)

Patient handovers of one-hour or longer have dropped considerably since the record levels seen in December 2022, but in May 2023 remain high. Hours lost to these delays are over four-times greater than in May 2021, and the annualised volume is over ten-times greater (see next page).

## 1. Delays over 60 Minutes

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

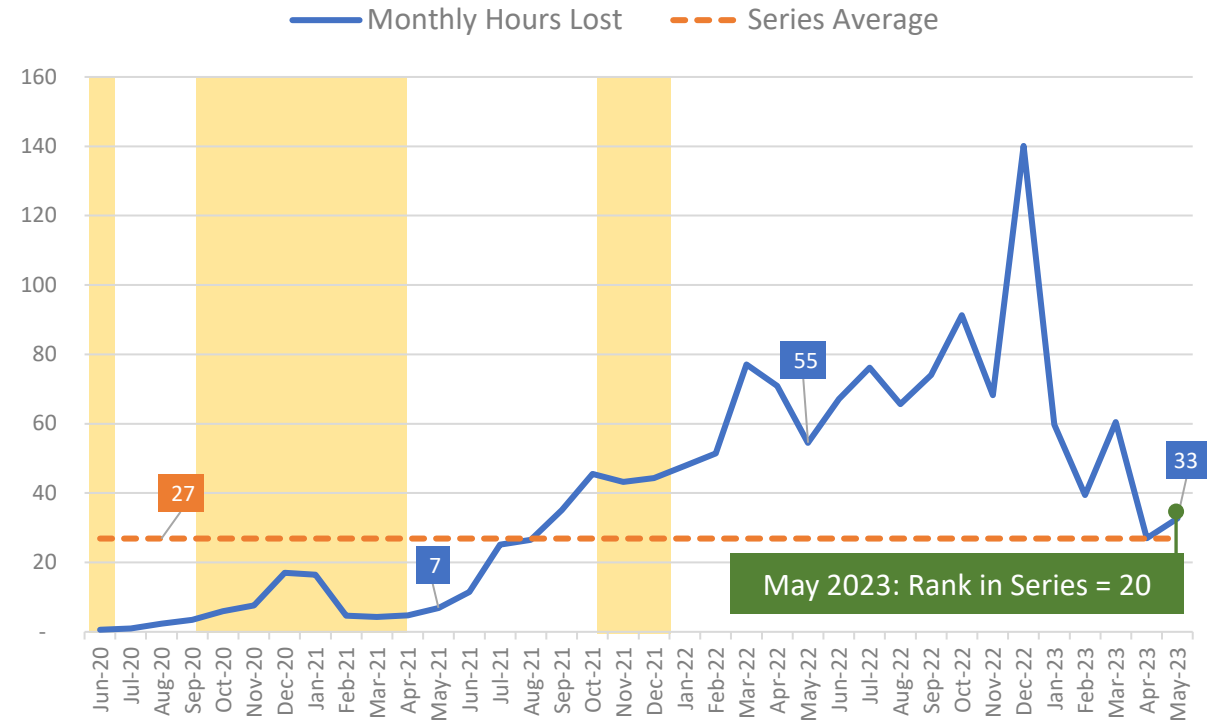


Yellow areas show COVID waves in the UK: source ONS.

← -23% (or -8k) →  
difference, May '22 to May '23

## 2. Hours lost for Handovers Over 60 Minutes

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



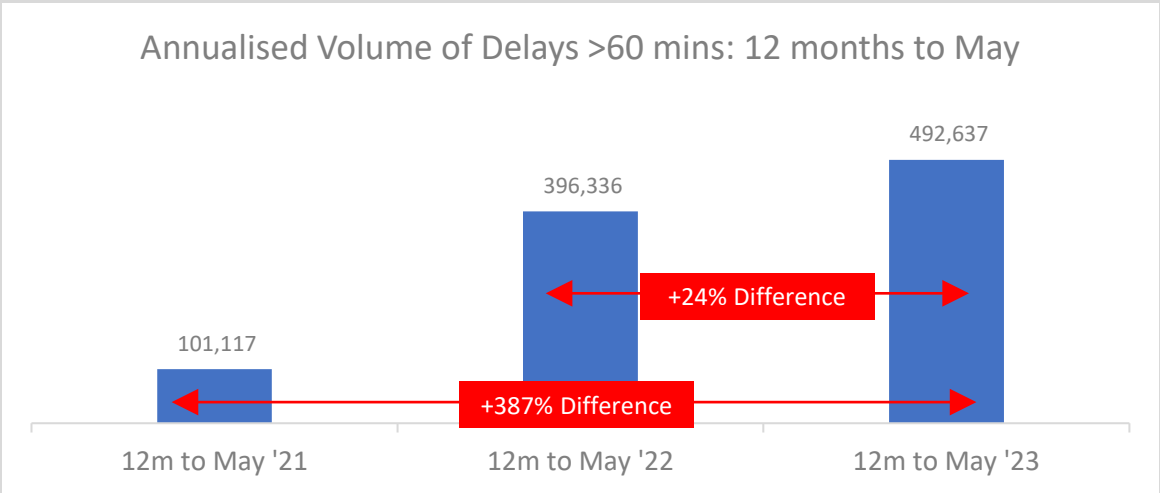
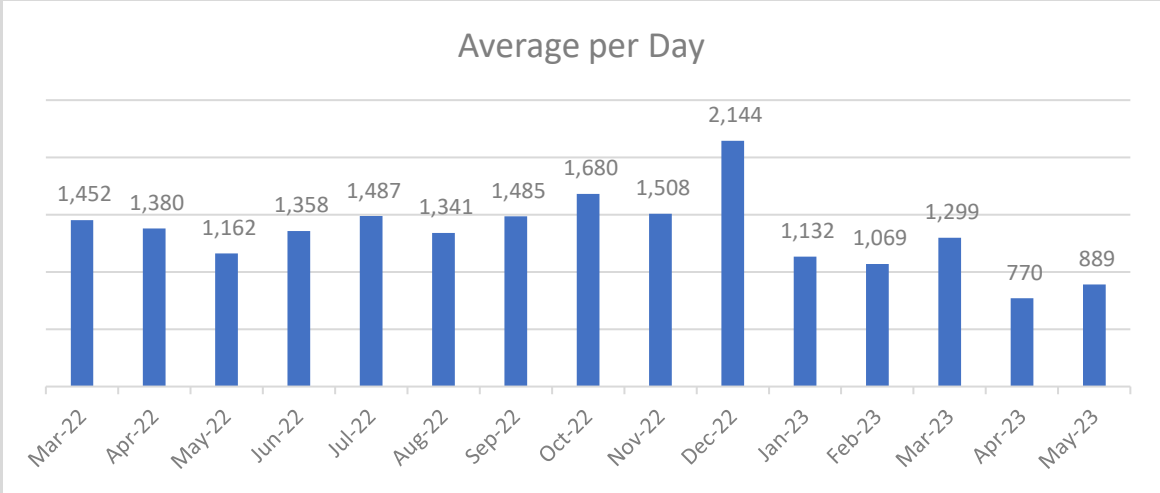
← -40% (or -22k) →  
difference, May '22 to May '23



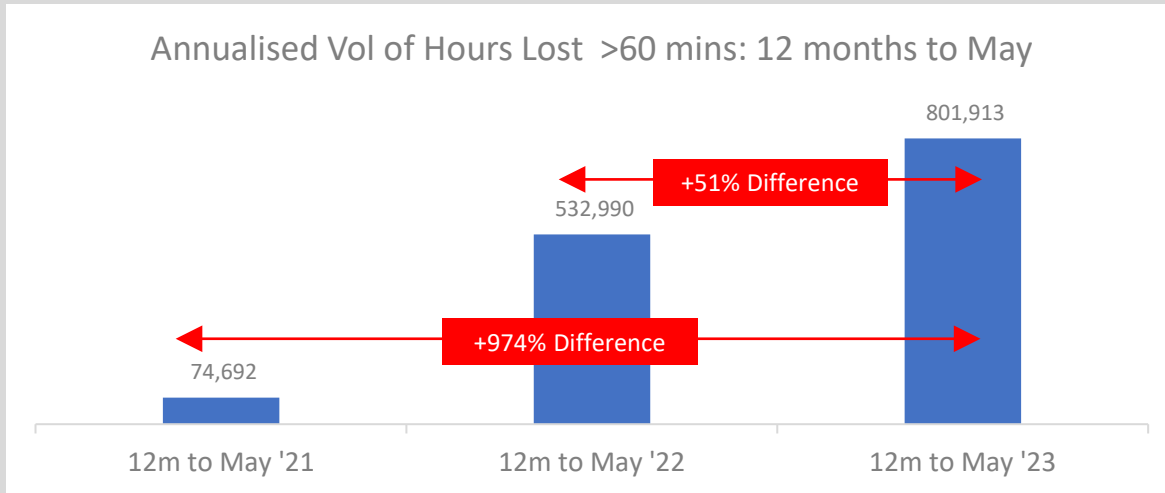
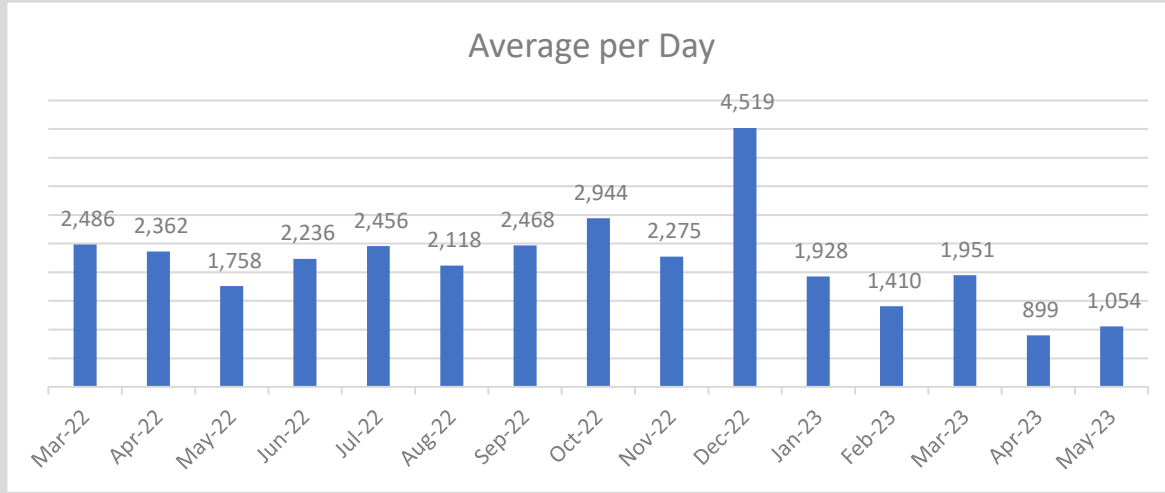


# 9. Average Daily and Annualised Data for >60 minute delays (source, NAIG)

## 1. Volume of Handover Delays over 60 minutes



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

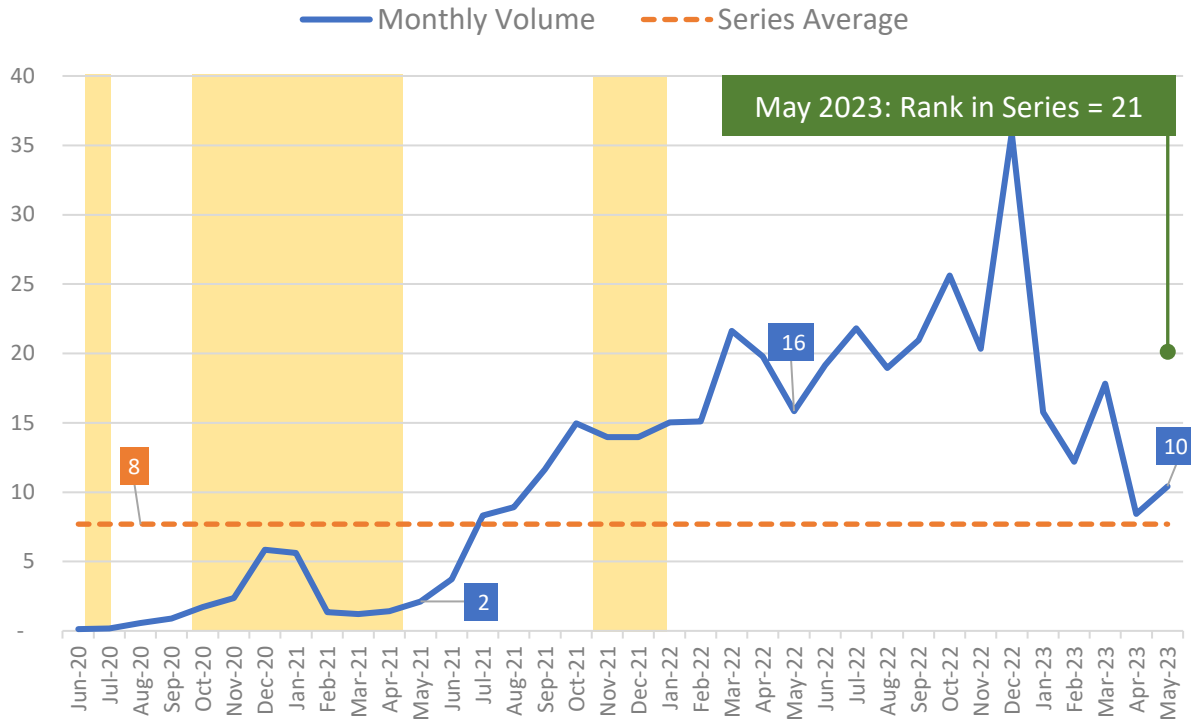


# 10. Patient Handover Delays over 120 Minutes (source, NAIG)

Delays of two-or-more hours followed the trend above: an unsteady improvement since December 2022, but with levels still well above those seen two years previously.

## 1. Delays over 120 Minutes

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

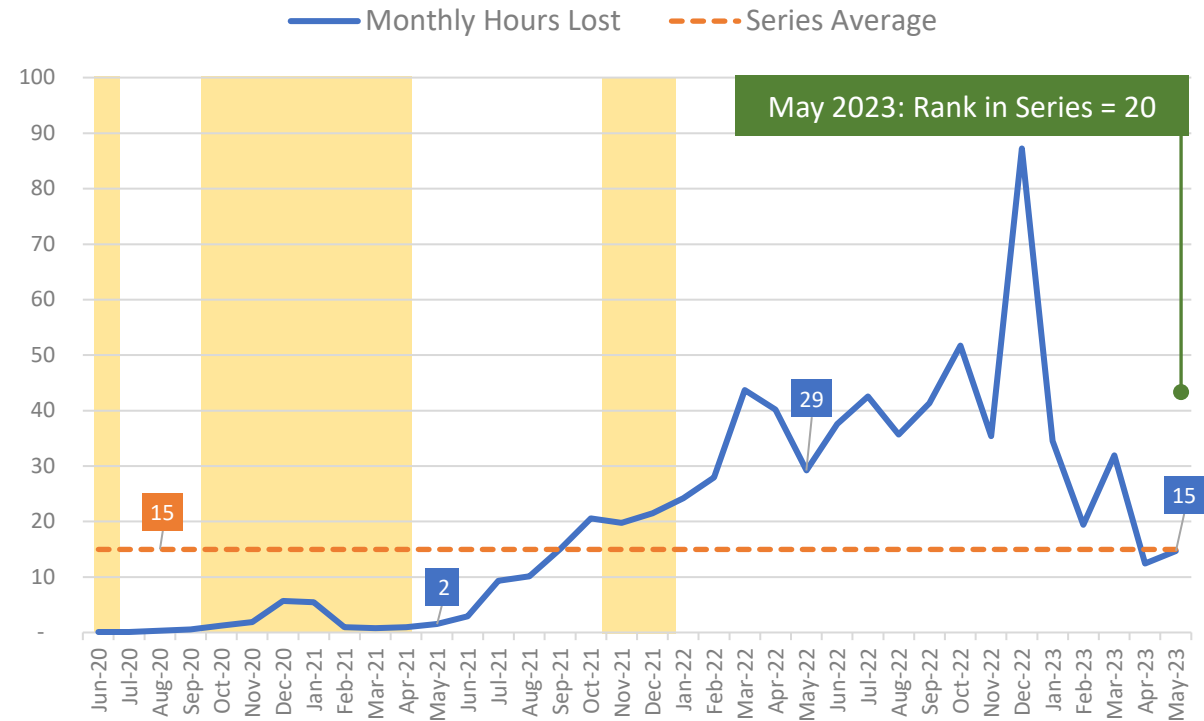


Yellow areas show COVID waves in the UK: source ONS.

← -34% (or -6k) →  
difference, May '22 to May '23

## 2. Hours lost for Handovers Over 120 Minutes

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

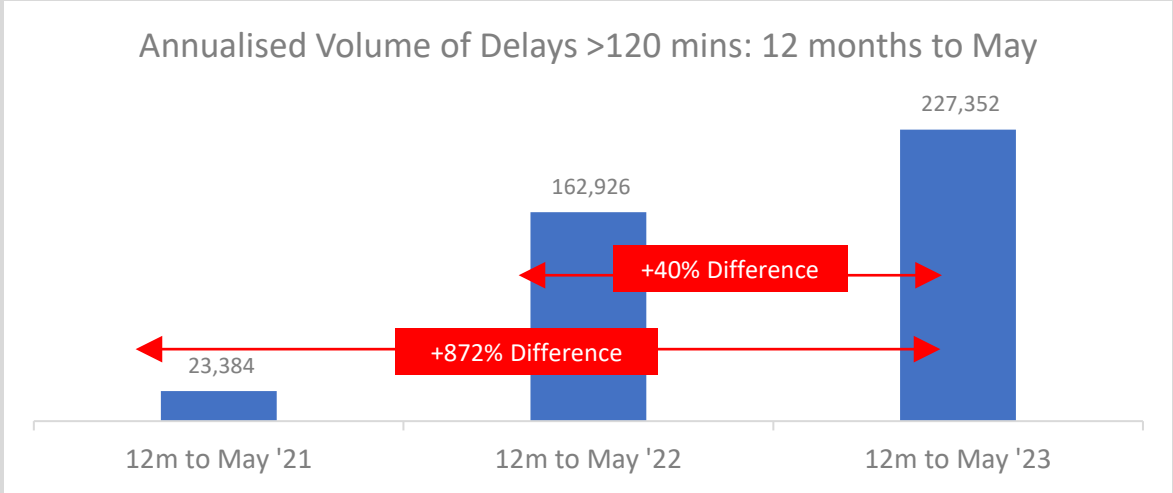
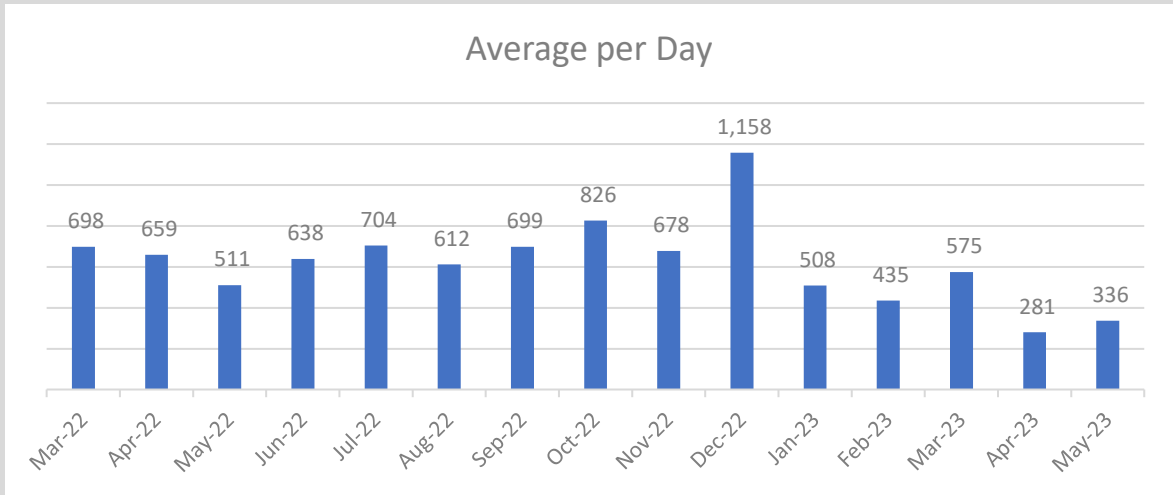


← -50% (or -14k) →  
difference, May '22 to May '23

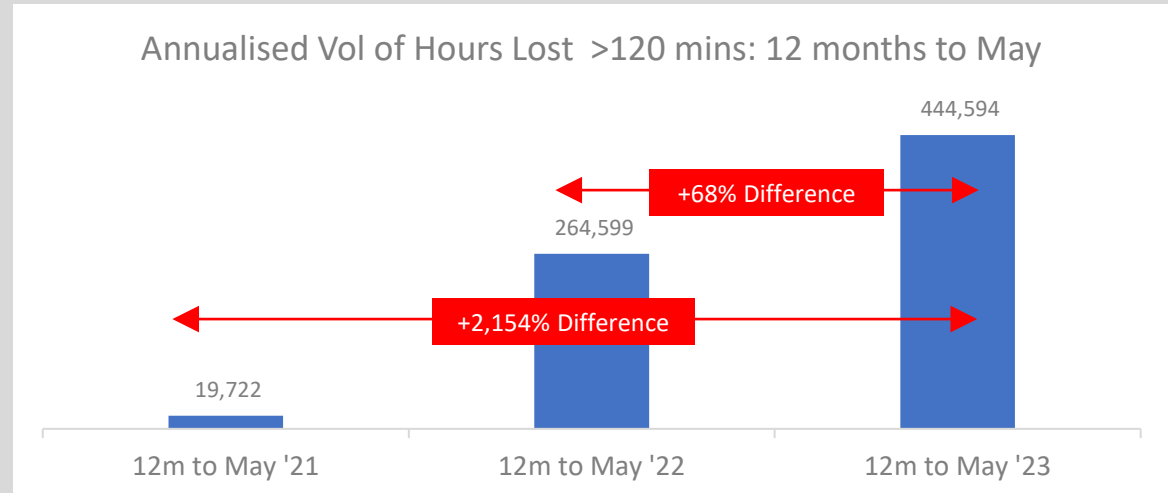
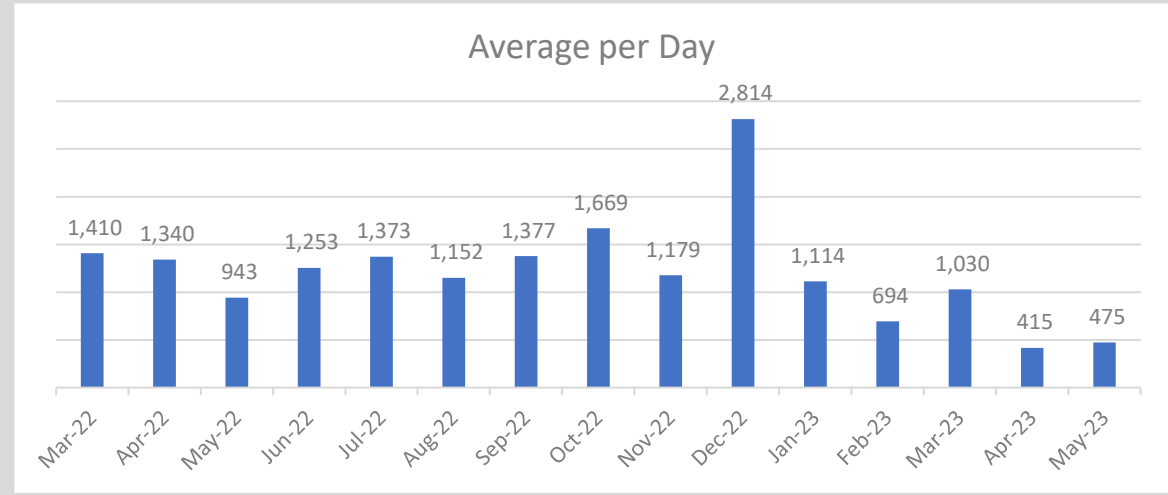


# 11. Average Daily and Annualised Data for >120 minute delays (source, NAIG)

## 1. Volume of Handover Delays over 120 minutes



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



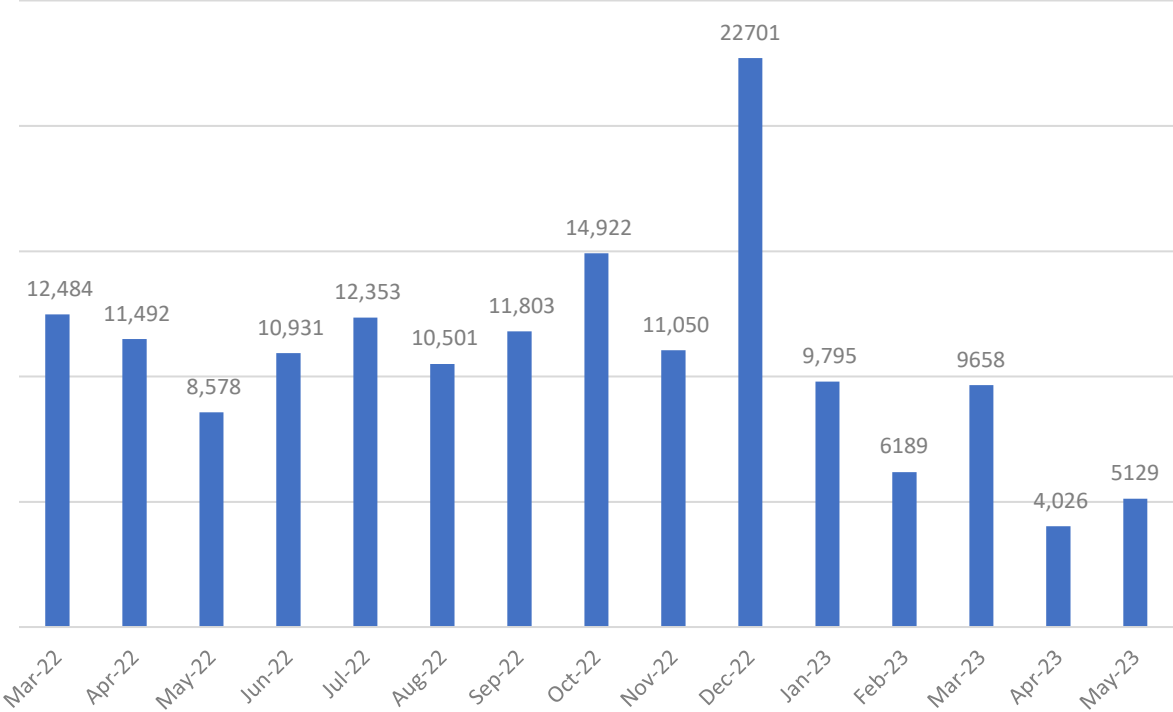
# 12. Patient Handovers Longer than Three Hours (source, NAIG)



While patient handovers exceeding three hours increased in May, those of ten-or-more hours dropped for the second consecutive month to reach the lowest numbers seen since tracking began.

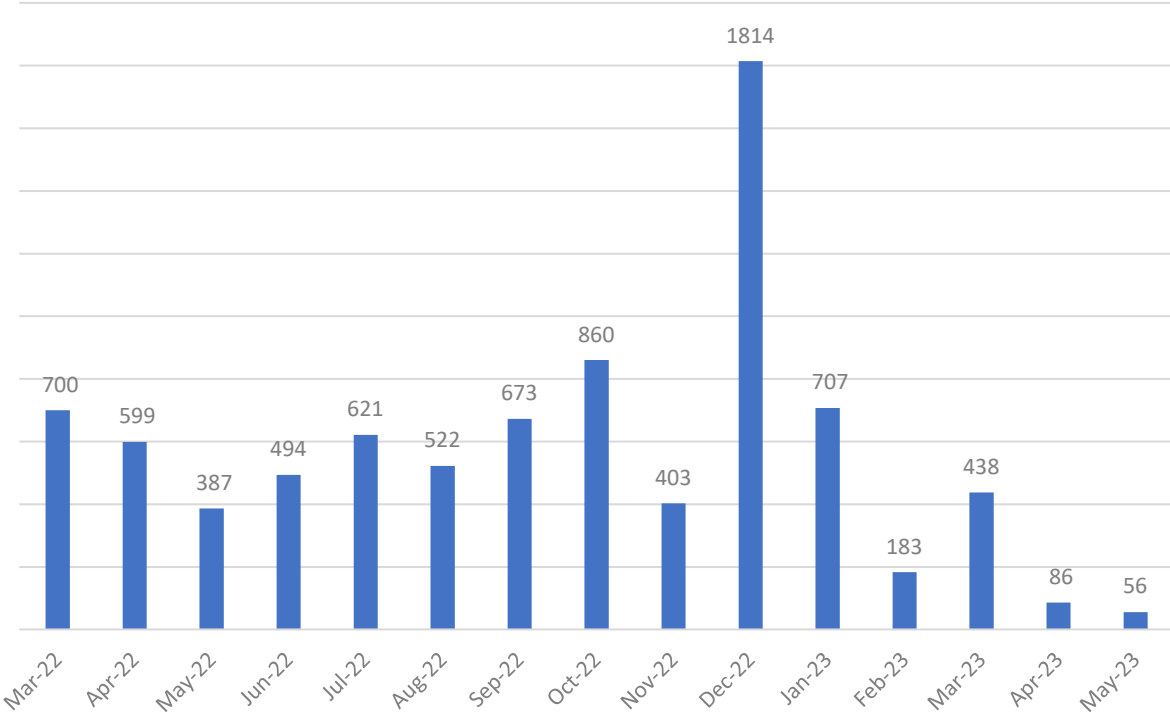
## 1. Longer Handover Delays: All Over Three Hours

Volume of Handovers over Three Hours



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

Volume of Handovers over Ten Hours



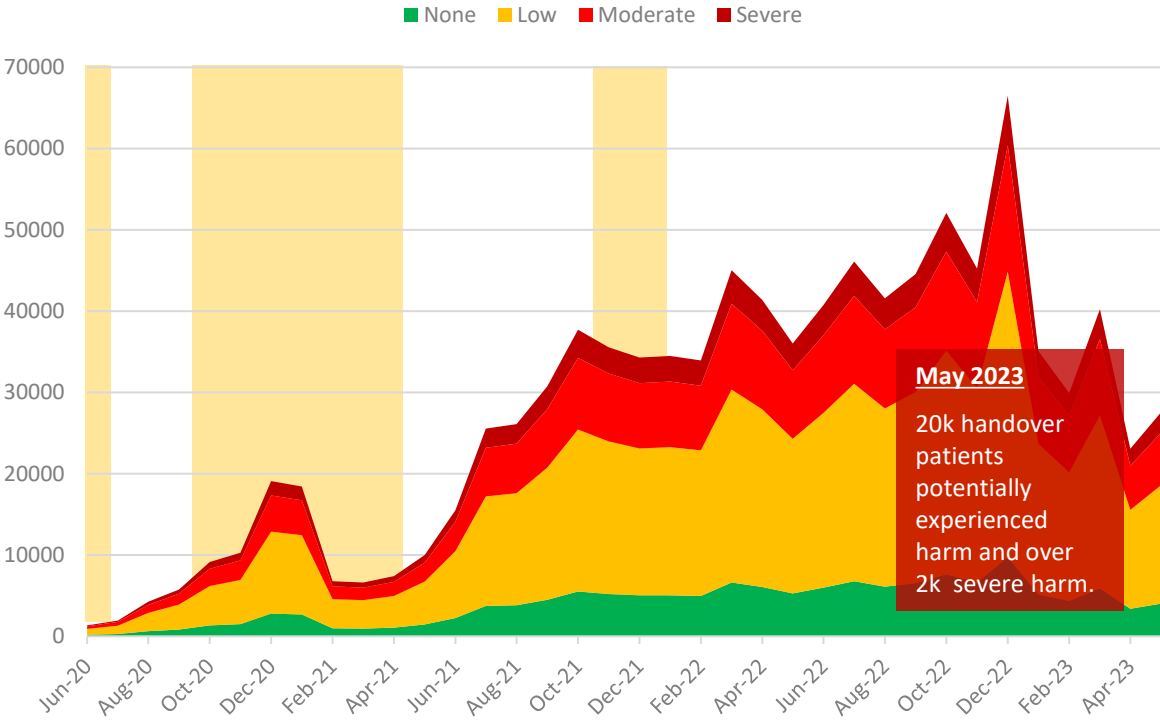
# 13. Impact on Patients and Crew (source, NAIG, [AQI Data](#) and [AACE](#))



Around 20k patients experienced potential harm as a result of long handover delays in May 2023, with over two-thousand of these experiencing severe harm\*. Looking at the total hours lost to handover delays in May, the sector lost the equivalent of 73k job cycles. Using Face-to-Face incident volumes from May's AQI data, this equates to 12% of potential ambulance capacity across the month – compared with three-percent in May 2020.

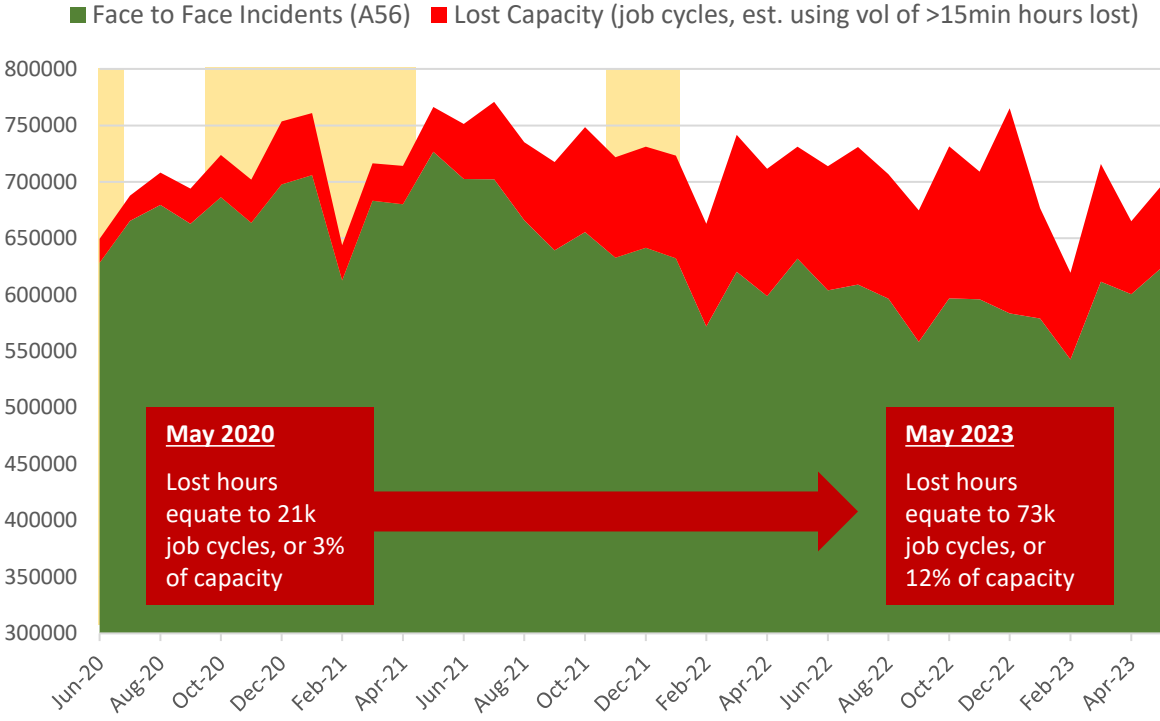
## 1. Estimated number of patients experiencing potential harm

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



## 2. Estimated impact of lost hours on capacity

Lost Hours and Impact on Capacity



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

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

