

An edited version of this article has been published as: Jones R (2014) Deaths and admissions in Northern Ireland in 2012. *British Journal of Healthcare Management* 20(11): 543. Please use this to cite.

Deaths and medical admissions rise in 2012 in Northern Ireland

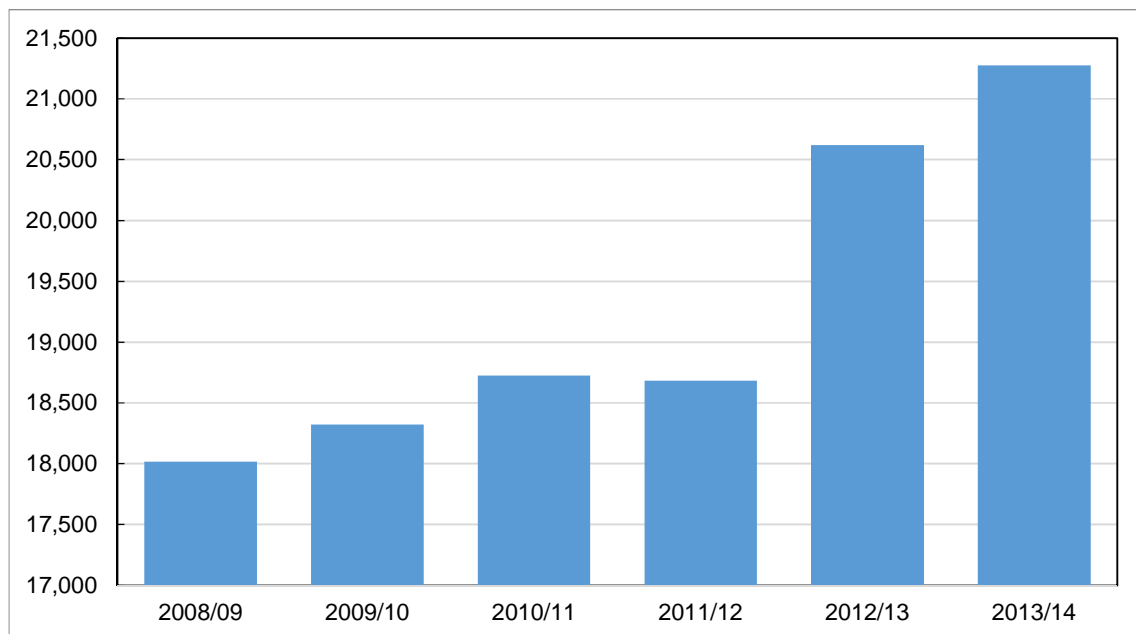
Dr Rodney P Jones (ACMA, CGMA)
Healthcare Analysis & Forecasting
hcaf_rod@yahoo.co.uk

Further articles in this series can be found at www.hcaf.biz
The published version of this article is available at www.bjhcm.co.uk or via Athens

Over the past six years BJHCM has been instrumental in publishing an extended series of articles highlighting a recurring series of infectious-like events which lead to increased deaths and medical admissions. Each outbreak appears to add £6 billion of costs into the NHS in England. This month's *Money Matters* article investigates the potential contribution of these infectious events into the long-term rise in the ratio of hospital admissions per death in England.

A paper published in 2010 (Jones 2010) detailed the effect of the 2002 and 2007 outbreaks upon medical admissions in Northern Ireland. The 2012 outbreak appears to have led to over 45,000 deaths in England and Wales (Jones 2015).

Figure 1: Medical admissions in Belfast



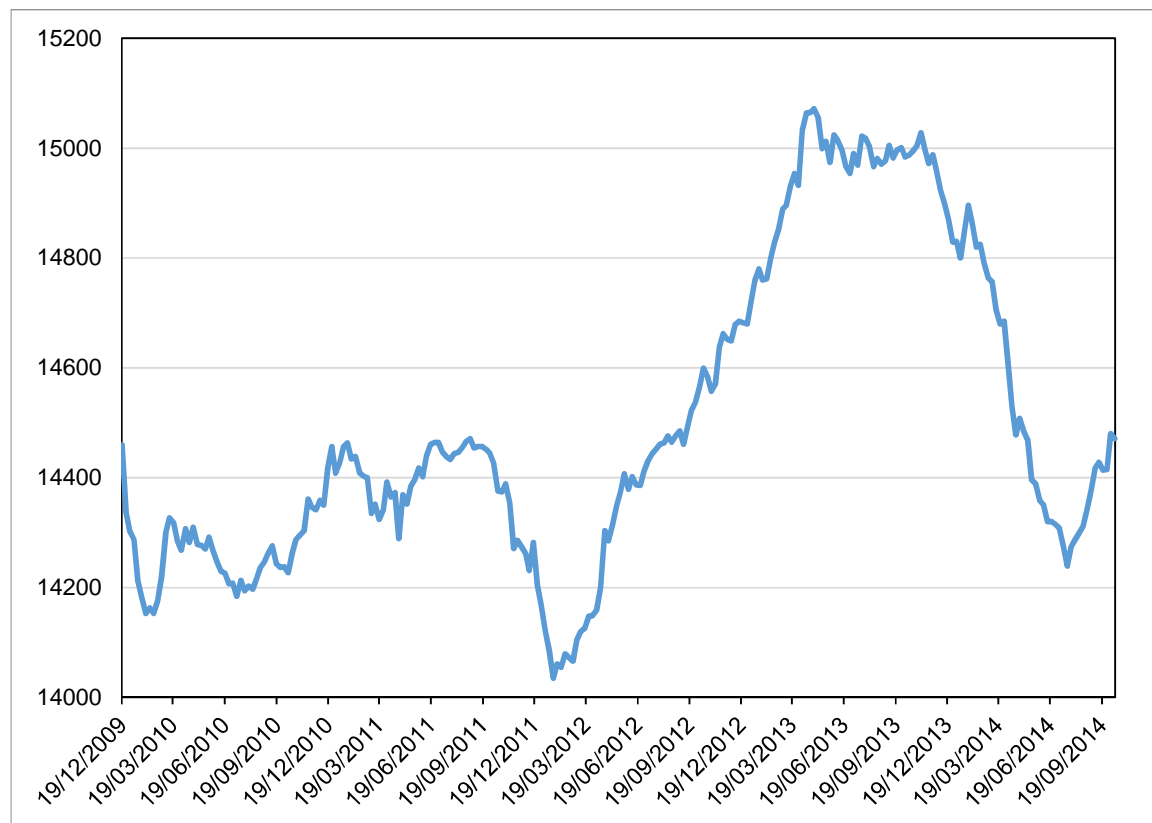
Data kindly provided by Hospital Information Branch, DHSSPSNI.

An edited version of this article has been published as: Jones R (2014) Deaths and admissions in Northern Ireland in 2012. *British Journal of Healthcare Management* 20(11): 543. Please use this to cite.

A genuine infectious event will not exempt Northern Ireland and hence Figure 1 shows the trend in medical group admissions in Belfast between 2008/09 and 2013/14. The effect of the 2012 outbreak is clearly seen by a 2,000 (11%) step-like increase in admissions of which roughly half are same day stay.

Figure 2 shows the trend in deaths across Northern Ireland over the same period and uses a running 52 week sum of deaths to discern the key time points.

Figure 2: Running 52 week total deaths in Northern Ireland



Data is from <http://www.nisra.gov.uk/demography/default.asp10.htm>

For an unknown reason the outbreak is always preceded by a dip in both admissions and deaths as is seen in both Fig. 1 and 2. In a running 52 week chart a step-like increase in deaths commences at the foot of a ramp up, hence, the outbreak commences somewhere around the end of April 2012. Deaths increase from somewhere around 14,400 to 15,000 per annum (+4.2%). The table top in Fig. 2 implies that deaths remain high until the beginning of week commencing 23/11/2013 and then revert back to a level close to that seen before the outbreak. Hence deaths and admissions in 2014/15 should revert back to more 'normal' levels, except that there is usually a residual effect against admissions.

An edited version of this article has been published as: Jones R (2014) Deaths and admissions in Northern Ireland in 2012. *British Journal of Healthcare Management* 20(11): 543. Please use this to cite.

As I have said, all of this is well documented in terms of the effect against occupied beds, costs, financial risk and implications to the HRG tariff. Which leads to the obvious question: why no official recognition to the fact that a huge infectious event keeps re-occurring? Could the recent article by David Oliver (Oliver 2014) regarding the perverse conflict between “policy based evidence” as opposed to evidence based policy, have any bearing on the answer to this question?

References

Jones R (2010) The case for recurring outbreaks of a new type of infectious disease across all parts of the United Kingdom. *Medical Hypotheses* 75: 452-457.

Jones R (2015) A previously uncharacterized infectious-like event leading to spatial spread of deaths across England and Wales: Characteristics of the most recent event and a time series for past events. *British Journal of Medicine and Medical Research* 5(11): 1361-1380.

Oliver D (2014). Preventing hospital admission: we need evidence based policy rather than “policy based evidence”. *BMJ* 349: g5538. <http://dx.doi.org/10.1136/bmj.g5538>

Footnote

Due to the limitation of space the published version of this article in BJHCM did not have Figure 1, which is included here to show the effect on both admissions and deaths.

See <http://www.hcaf.biz/emergencyadmissions.html> for the list of references alluded to in the article