

## North East Quality Observatory Service

# **Back Pain Report**

## **Coastal West Sussex**

June 2016



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# BetterKnowledgeBetterCareBetterOutcomes

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## **NEQOS Back Pain Report**

This back pain report contains health intelligence produced by NEQOS to support the implementation of the national pathfinder project to provide better pathways of care for people with low back and radicular pain. The NHS England Pathfinder Projects were established to address high value care pathways which cross commissioning and health care boundaries. Many conditions require a pathway of care which moves from the general practitioner through primary care and community services and into secondary care and sometimes specialised services. Difficulties in commissioning across boundaries, however, can cause artificial interruptions in what should be a seamless care pathway. The Pathfinder Projects are designed for all Stakeholders to work collaboratively to examine in depth these health care interfaces and to develop commissioning structures to commission care across the whole pathway. The Trauma Programme of Care Board selected low back pain and radicular pain as the Pathfinder Project as this is a high value care pathway in view of the very large number of patients involved.

The future of the pathway is that it is designed to be run in primary care (general practice and community physiotherapy) and referral into secondary specialist care is only at the end of the pathway. Key to the success of the pathway are the Triage and Treat practitioners; the highly trained practitioners, either extended scope physiotherapists or nurse specialists who essentially run the pathway and have access to bookable slots for the core therapies, nerve root blocks, spinal surgical clinic appointments or pain clinic appointments. This reduces very significantly the delays in the previous system and also reduces the "pinball" management that is a feature of so many health care systems. Quality care is less expensive by reducing ineffective or repetitive treatment and by reducing conversion into chronic disability

In this profile, the current utilisation of secondary care services for back and radicular pain are shown by CCG and providers, including both NHS Trusts and Independent Sector providers to demonstrate variation in activity regionally and across England. This report is based on the population of patients under the care of CCGs in the Surrey & Sussex Region and provides important information about patient flows from these CCGs across all providers within this region.

Information on hospital admissions is presented by admission method (elective vs. emergency) and type of procedure (surgery, injections, pain management etc.) undertaken. The aim of this report is to assist both clinicians and commissioners in comparing treatment activity rates between regional providers and against national data to reduce variation and develop evidence based care pathways to improve patient outcomes.

Ongoing monitoring of this secondary care activity will evidence where changes implemented through the national pathfinder project for acute low back and radicular pain to provide timely access to evidence based treatments can improve the quality of patient care, provide community based alternatives to secondary care admissions for back pain and reduce secondary care expenditure.

It is important to note that this report is based on the cohort of patients with back and/or radicular pain but does not include patients who have back pain due to specific diagnosis such as cancer, infection, spinal trauma, inflammatory arthritis, cauda equine syndrome as these patients have very different treatment pathways of care.

## Acknowledgements

This work has been funded through the Getting It Right First Time (GIRFT) project that is part of the Department of Health funded Clinically-Led Quality and Efficiency Programme.

Acknowledgements to the Health & Social Care Information Centre (HSCIC) as the source of data used in this report and to Professor Greenough and Mr Ashley Cole for their expert clinical guidance and advice.

## Introduction and background

Low back pain is extremely common and is the largest single cause of loss of disability adjusted life years, and the largest single cause of years lived with disability in England (Global Burden of Disease, 2013). In terms of disability adjusted life years lost per 100,000, low back pain is responsible for 2,313. By contrast the remainder of musculo-skeletal complaints counts for 911, depression 704 and diabetes 337. It should be borne in mind that this is principally occurring in people of working age, or with families. UK specific data shows that LBP was top cause of years lived with disability in both 1990 and 2010 – with a 12% increase over this time. Back pain accounts for 11% of the entire disability burden from all diseases in the UK; furthermore the burden is increasing both absolutely (3.7% increase) and proportionally (7% to 8.5%).

NEQOS have produced CCG and hospital Trust level activity profiles to understand the current position in terms of secondary care activity for back and radicular pain and have worked with a range of key stakeholders from both provider and commissioner organisations to develop the profiles to ensure that the indicators shown are appropriate and relevant to the project. This information needs to be viewed in conjunction with data soon to become available from Arthritis Research UK about the prevalence of back pain and associated risk factors and where possible with locally available data from general practice, including prescribing rates, and onward referrals from primary care (e.g. physiotherapy and radiology).

## Technical specification

Following a data discovery exercise supported by Professor Charles Greenough (National Clinical Director for Spinal Disorders, South Tees NHS Foundation Trust), definitions for low back and radicular pain were developed based on a combination of diagnosis codes (ICD-10) and relevant secondary care procedures were identified using OPCS 4.7 codes. These codes have been supported by Mr Ashley Cole, Chair of Specialised Spinal Surgery Clinical Reference Group (Consultant Orthopaedic Surgeon, Northern General Hospital and Sheffield Children's Hospital).

## Data definitions

Data Source: Hospital Episode Statistics (Health & Social Care Information Centre via HDIS). Please note that 2014/15 data is currently classed as provisional.

CCG populations: Health & Social Care Information Centre (Ages 15 & over as at April 2015) (Data was provided in 5 year ages bands, therefore we were unable to use exact figures for Ages 16 & over)

A summary of the data definitions used is shown below:

Time period: April 2011 - March 2015 Primary diagnosis = back pain (specific ICD10 codes) Limited to episode 1 Age 16 years and over Private patients are included unless specified Admission costs are based on the national tariff Directly Age & Sex Standardised Rates use the European Standard Populations

The NHS Trusts included for the Surrey & Sussex Region are:

- St George's University Hospitals NHS Foundation Trust
- Epsom & St Helier University Hospitals NHS Trust
- Ashford & St Peter's Hospitals NHS Foundation Trust
- Frimley Health NHS Foundation Trust
- Royal Surrey County Hospital NHS Foundation Trust
- Surrey & Sussex Healthcare NHS Trust
- Western Sussex Hospitals NHS Foundation Trust
- Brighton & Sussex University Hospitals NHS Trust
- East Sussex Healthcare NHS Trust

The Independent Sector Providers included for the Surrey & Sussex Region are:

- Ashtead Hospital
- The Horder Centre St Johns Road
- BMI Goring Hall Hospital

## **Clinical Commissioning Group (CCG) activity summary**

Total

1. Hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015), summary a. Hospital admissions at national level, indicating back pain type and admission method

England	Back	Radicular	Total	% Back	% Radicular
Elective	134,448	102,808	237,256	56.7%	43.3%
Emergency	39,331	14,309	53,640	73.3%	26.7%
Other	771	951	1,722	44.8%	55.2%
	474 550	110.000	202 640	E0 70/	40.20
Total	174,550	118,068	292,618	59.7%	40.3%
	174,550	118,068	292,618	59.7%	40.3%
Surrey & Sussex CCGs	Back	Radicular	Total	59.7% % Back	40.39 % Radicular
Surrey &					
Surrey & Sussex CCGs	Back	Radicular	Total	% Back	% Radicular

6.409

## b. Hospital admissions at CCG level, indicating proportion of admissions for back pain

9.797

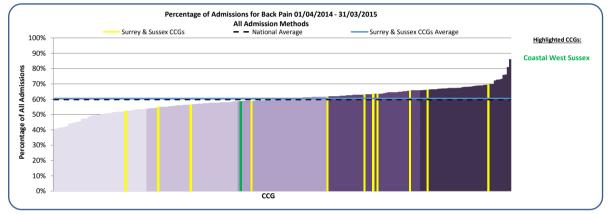
Table indicates the proportion of admissions for back pain only (and not radicular pain)

Eastbourne, Hailsham & Seaford	52.2%	Brighton & Hove	63.2%
Surrey Downs	54.9%	Guildford & Waverley	63.5%
Horsham & Mid Sussex	56.6%	High Weald Lewes Havens	63.5%
Coastal West Sussex	58.8%	North West Surrey	65.6%
Hastings & Rother	58.9%	East Surrey	66.1%
Surrey Heath	61.8%	Crawley	69.9%
Surrey & Sussex CCGs	60.5%	England	59.8%

16.206

60.5%

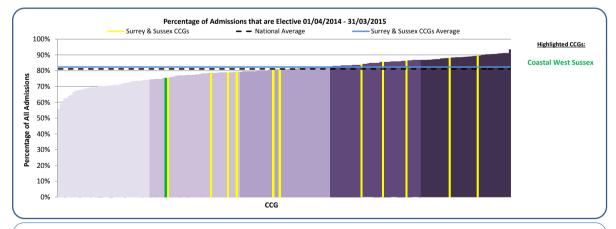
39.5%



c. Hospital admissions at CCG level, by admission method

Table indicates the proportion of admissions for back and radicular pain that is recorded as elective

Surrey & Sussex CCGs	82.4%	England	81.1%
Crawley	80.5%	Surrey Downs	89.6%
East Surrey	79.2%	High Weald Lewes Havens	88.1%
Brighton & Hove	79.0%	Surrey Heath	86.3%
Horsham & Mid Sussex	78.6%	North West Surrey	85.4%
Hastings & Rother	75.8%	Eastbourne, Hailsham & Seaford	84.2%
Coastal West Sussex	75.4%	Guildford & Waverley	80.8%



#### What is the data telling us?

In the 2014/15 financial year period there were almost 300,000 admissions for back and radicular pain in England, with 16,2063 (5.5%) of these for patients registered within the Surrey & Sussex CCGs.

At a national level the proportional split for hospital admissions is 60% for back pain and 40% for radicular pain, and at CCG level in Surrey & Sussex CCGs the proportion of admissions for back pain ranges from 52% to 70%.

Nationally, approximately 81% of back and radicular pain admissions are elective, with Surrey & Sussex having a slightly higher proportion (82.4%). At a CCG level in this region, the proportion of elective admissions for these populations ranges from 75% in Coastal West Sussex to 90% in Surrey Downs.

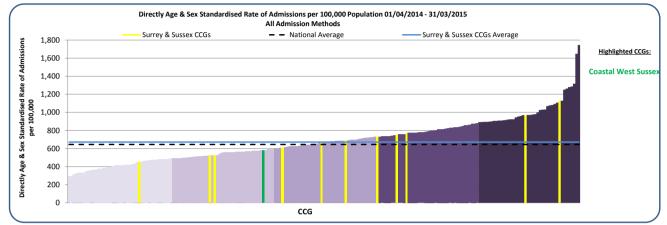
## **Clinical Commissioning Group (CCG) activity**

## 2. Hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015)

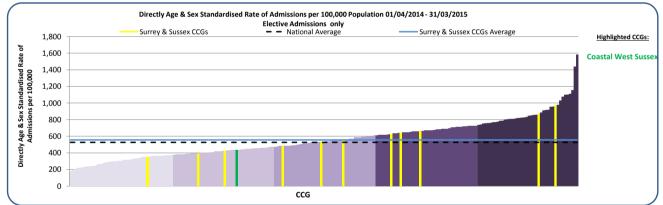
a. Hospital admissions for back	pain by CCG (all admission methods),	, Directly Age & Sex Standardised Admissi	on rate per 100,000 population
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CCG name	All	Elective	Emergency	CCG name	All	Elective	Emergency
Surrey Heath	1127.3	973.0	154.4	Crawley	662.9	536.4	122.4
Surrey Downs	970.6	872.6	96.0	East Surrey	610.4	483.9	124.5
North West Surrey	771.6	663.5	102.4	Coastal West Sussex	579.9	437.6	140.4
Eastbourne, Hailsham & Seaford	749.4	630.1	116.5	Brighton & Hove	526.7	423.9	101.8
High Weald Lewes Havens	733.1	643.1	84.3	Hastings & Rother	524.0	397.3	125.5
Guildford & Waverley	688.5	560.0	123.0	Horsham & Mid Sussex	450.4	355.4	93.5
Surrey & Sussex CCGs	670.8	555.2	113.0	England	645.6	526.5	115.4

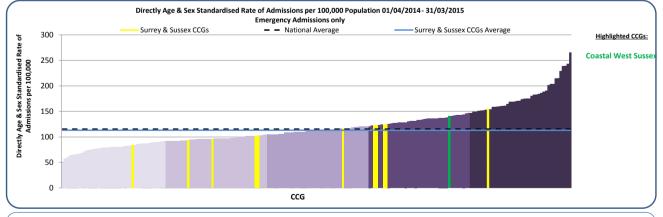
#### b. Hospital admissions for back and radicular pain (all admission methods), Directly Age & Sex Standardised Admission rate per 100,000 population



c. Elective hospital admissions for back and radicular pain, Directly Age & Sex Standardised Admission rate per 100,000 population



d. Emergency hospital admissions for back and radicular pain, Directly Age & Sex Standardised Admission rate per 100,000 population



#### What is the data telling us?

There is wide variation in elective admission rates across the CCGs within Surrey and Sussex with over a 2.7-fold difference between the regional lowest (Horsham and Mid Sussex CCG) and the highest CCG for the region (Surrey Heath CCG), which is in the highest quintile nationally. Similarly, for emergency admissions there is wide variation across the CCGs in the region, with High Weald Lewes Havens CCG in the lowest quintile to Surrey

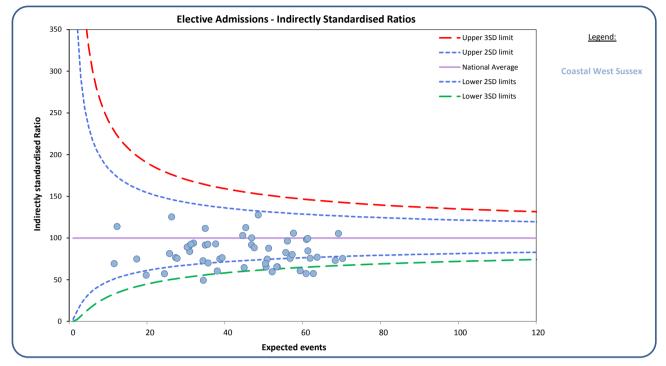
Heath CCG in the highest quintile nationally.

## Clinical Commissioning Group (CCG) activity - GP practice level

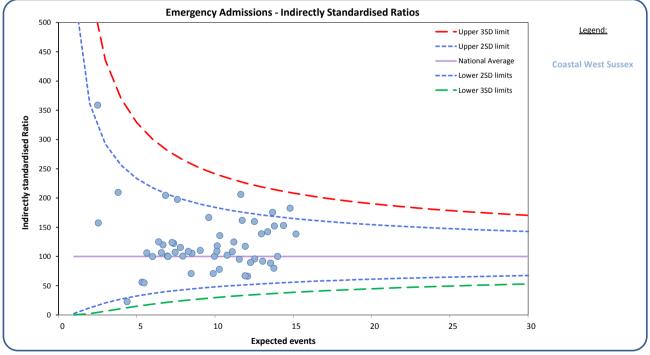
3. Hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015)

Each symbol represents one GP practice

a. Hospital admissions for back pain (Elective admissions), Indirectly Standardised Ratio Coastal West Sussex



b. Hospital admissions for back pain (Emergency admissions), Indirectly Standardised Ratio



#### What is the data telling us?

The admission rates for elective and emergency admissions for each GP practice within the CCG are expressed as Indirectly Standardised Ratios with 100 representing the national average. This adjustment has been made due to small numbers and in order that comparisons can be made between practices.

The upper and lower confidence limits on the funnel charts above are based on national data. Each circle represents the constituent GP Practices for the selected CCG(s). All GP practices within the funnel have admission rates that are not significantly different that the national rates with those above the upper blue funnel having significantly higher rates than the national average.

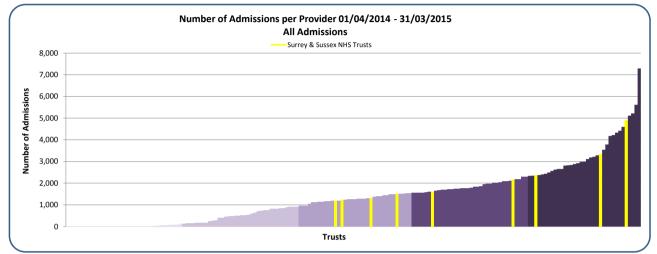
# 4. Indirectly Standardised Ratios for Elective & Emergency Admissions for Back & Radicular Pain, by GP Practice *Coastal West Sussex*

Indirectly Standardised Ratios that are coloured Red are higher than 3 standard deviations from the mean. Those coloured Yellow are between 2 and 3 higher standard deviations from the mean.

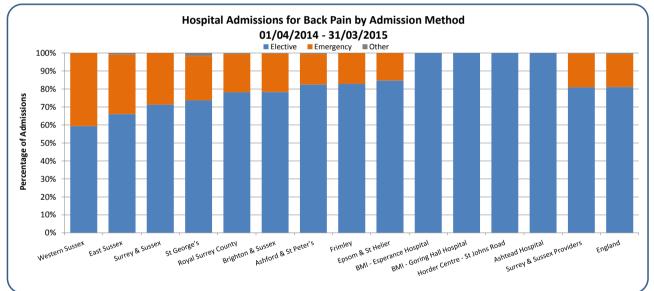
	tions from the mean.				Elective			Emergency	
Practice Code	Practice Name	CCG	Population 15+	Observed	Expected	Ratio	Observed	Expected	Ratio
H82002	Church View Surgery	09G	6,032	28	30.91	90.60	7	6.96	100.57
H82006	The Petworth Surgery	09G	5,198	26	30.98	83.93	8	6.67	119.85
H82007	Westcourt Medical Centre	09G	10,205	52	61.36	84.74	19	13.36	142.18
H82009	St.Lawrence Surgery	09G	11,387	60	60.98	98.39	12	13.55	88.56
H82011	Strand Medical Group	09G	11,596	61	61.30	99.52	21	13.79	152.27
H82013	Langley House Surgery	09G	9,947	54	56.07	96.30	12	12.54	95.70
H82014	Coppice Surgery	09G	8,074	62	48.59	127.59	8	10.28	77.83
H82015	Phoenix Medical Group	09G	5,450	25	34.39	72.69	15	7.60	197.45
H82016	Bersted Green Surgery	09G	10,482	45	51.27	87.77	19	11.74	161.78
H82020	Bognor Medical Centre	09G	7,819	29	38.71	74.91	10	9.06	110.33
H82021	Arundel Surgery	09G	5,566	17	34.48	49.30	7	7.00	99.97
H82022	Steyning Health Centre	09G	10,008	61	57.66	105.80	8	12.09	66.19
H82023	Adur Medical Group	09G	6,297	25	35.70	70.03	8	7.95	100.69
H82024	Seal Medical Group	09G	4,955	27	30.32	89.06	8	6.40	124.97
H82029	The Manor Practice	09G	8,418	46	44.58	103.18	7	9.89	70.75
H82030	Pulborough Medical Group	09G	11,255	50	68.36	73.14	14	14.00	100.02
H82031	Loxwood Surgery	09G	4,588	21	27.38	76.69	<6	5.34	56.19
H82032	Riverbank Medical Centre	09G	10,354	35	60.87	57.50	12	13.04	91.99
H82034	Lime Tree Surgery	09G	11,606	73	69.20	105.49	22	14.38	153.03
H82037	Selsey Medical Practice	09G	5,692	39	34.99	111.46	9	7.36	122.22
H82038	Flansham Park Health Centre	09G	10,753	49	63.71	76.91	24	13.69	175.35
H82039	Park Surgery	09G	6,339	32	34.96	91.53	8	7.45	107.36
H82041	Victoria Road Surgery	09G	10,196	38	50.90	74.66	24	11.65	206.07
H82042	Cathedral Medical Group	09G	10,856	46	55.66	82.64	20	12.52	159.71
H82043	Grove House Surgery	09G	10,562	53	70.26	75.43	27	14.80	182.49
H82045	Worthing Medical Group	09G	12,593	36	62.75	57.37	21	15.18	138.37
H82046	Broadwater Medical Centre	09G	9,885	33	50.60	65.22	14	11.21	124.85
H82048	Avisford Medical Group	09G	8,877	35	53.49	65.44	12	11.11	108.03
H82049	Parklands Surgery	09G	8,489	51	45.37	112.41	12	10.14	118.33
H82051	Lavant Road Surgery	09G	10,520	31	52.16	59.44	14	11.93	117.35
H82055	Billingshurst Surgery	09G	10,383	43	56.79	75.72	8	11.93	67.08
H82058	Maywood Health Care Centre	09G	11,028	46	57.29	80.29	18	12.96	138.84
H82059	Willow Green Surgery	09G	7,710	43	46.87	91.75	14	10.31	135.82
H82060	Henfield Medical Centre	09G	8,165	42	47.57	88.28	10	9.97	100.29
H82061	Selden Medical Centre	09G	7,340	23	38.06	60.44	9	8.53	105.50
H82065	Ball Tree Surgery	09G	7,096	30	39.29	76.35	9	8.29	108.55
H82066	Fitzalan Medical Group	09G	11,751	47	61.91	75.92	11	13.77	79.90
H82067	Tangmere Medical Centre	09G	3,530	13	17.36	74.87	8	3.82	209.57
H82069	Arun Medical Group	09G	5,902	30	31.98	93.81	9	7.26	123.93
H82070	Glebe Surgery	09G	9,708	36	59.38	60.63	11	12.28	89.60
H82076	Cornerways Surgery	09G	3,269	11	19.80	55.54	<6	4.39	22.78
H82077	The Croft Surgery	09G	9,153	35	50.46	69.36	11	10.78	102.06
H82078	Southbourne Surgery	09G	7,843	29	44.96	64.50	16	9.60	166.63
H82083	Northbourne Medical Centre	09G	8,779	47	46.91	100.19	11	10.13	108.62
H82086	Highdown Surgery	09G	2,050	14	12.29	113.91	<6	2.54	157.24
H82087	Barn Surgery	09G	3,699	33	26.32	125.37	6	5.65	106.26
H82091	New Pond Row Surgery	09G	6,220	33	35.65	92.57	9	7.80	115.43
H82094	Kingfisher Family Practice	09G	4,771	21	27.75	75.68	6	6.01	99.82
H82095	Witterings Medical Centre	09G	8,618	35	53.38	65.57	11	11.55	95.22
H82096	The Orchard Surgery	09G	5,804	29	31.33	92.57	14	6.85	204.46
H82099	West Meads Surgery	09G	6,488	35	37.65	92.97	6	8.48	70.76
H82101	Heene Road Surgery	09G	4,858	21	25.82	81.34	7	6.57	106.52
H82641	The Lawns Surgery	09G	1,793	8	11.55	69.25	9	2.51	358.75
H82643	The Mayflower Surgery	09G	4,768	14	24.50	57.15	<6	5.47	54.85

5. Hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015) a. Number of hospital admissions for back pain (all admission methods, NHS Trusts only)





b. Number of admissions per hospital Trust, by admission method (Surrey & Sussex Providers only)



#### What is the data telling us?

The total number of admissions for back pain, rather than a rate, is presented due to the absence of a relevant denominator at hospital Trust level. Activity for the 9 NHS Trusts used by the Surrey & Sussex CCGs is highly variable with 3 Trust in the highest quintile when comparing all NHS Trusts nationally.

The proportion of hospital activity for back pain which is classed as elective care for the Surrey & Sussex is similar to the England proportion. However at NHS Trust level the proportion varies between 59% at Western Sussex Trust to 85% at Epsom & St Helier Trust. All NHS activity at the Independent Sector Providers is classed as elective.

5. Hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015) c. Elective admissions for back and radicular pain, by treatment specialty (Surrey & Sussex Providers only)

	Pain						
	Management &	Trauma &	Spinal Surgery	Interventional			
Provider Name	Anaesthetics	Orthopaedics	Service	Radiology	Neurosurgery	<b>Other Functions</b>	Total
St George's	789	108	-	-	603	94	1,594
Epsom & St Helier	1,944	881	-	<6	-	8	2,833
Ashford & St Peter's	1,156	161	-	-	-	7	1,324
Frimley	2,325	1,716	-	-	-	20	4,061
Royal Surrey County	595	417	-	-	-	9	1,021
Surrey & Sussex	695	173	-	-	-	<6	868
Western Sussex	556	8	-	<6	-	329	893
Brighton & Sussex	957	646	-	9	199	33	1,844
East Sussex	30	742	-	<6	-	12	784
Ashtead Hospital	177	25	829	-	-	-	1,031
Horder Centre - St Johns Road	252	680	-	-	-	104	1,036
BMI - Goring Hall Hospital	343	216	-	-	-	-	559
BMI - Esperance Hospital	-	661	-	-	-	-	661
Total	9,819	6,434	829	9	802	616	18,509

d. Elective admissions for injections for back and radicular pair	n, by injection type and treatment specialty (national data)
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Treatment Function Title	Other Back Pain Injection	Epidural (not specified)	Epidural Lumbar	Epidural Sacral	Injection Facet Joint	Spinal Nerve Root Injection	Total
Pain Management & Anaesthetics	11,485	1,572	19,926	12,780	46,506	12,482	104,751
Trauma & Orthopaedics	1,286	175	4,190	15,658	10,080	11,518	42,907
Spinal Surgery Service	200	60	590	1,430	2,338	3,571	8,189
Neurosurgery	191	123	1,074	600	1,270	1,303	4,561
Interventional Radiology	14	1	18	3	656	2,961	3,653
Rheumatology	38	12	138	2,428	390	32	3,038
Other Treatment Functions	24	10	81	278	223	591	1,207
Total	13,238	1,953	26,017	33,177	61,463	32,458	168,306

#### What is the data telling us?

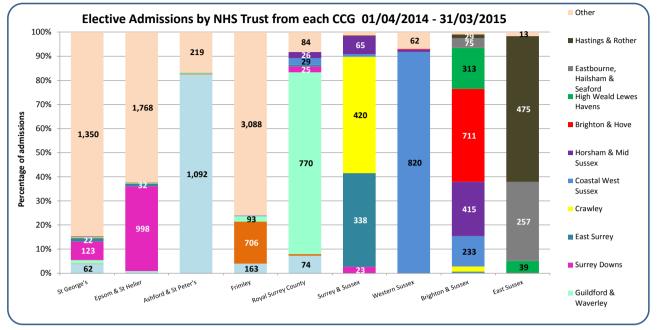
For elective activity the treatment specialty code indicated within the hospital data varies by hospital trust. Overall the most common specialties are Trauma and Orthopaedics and Pain Management/Anaesthetics, however for St George's Trust there is also a high volume of activity recorded within Neurosurgery.

The second table shows the different types of injections being undertaken within each of the treatment function codes and demonstrates that nationally over 62% (104,751) of injections take place within Pain Management/Anaesthetics and 25% of injections are undertaken within Trauma and Orthopaedics.

The most common injection type is facet joint injections, which mainly take place within Pain Management/Anaesthetics treatment function, but are also being used in Trauma and Orthopaedics, Spinal Surgery Service and Neurosurgery.

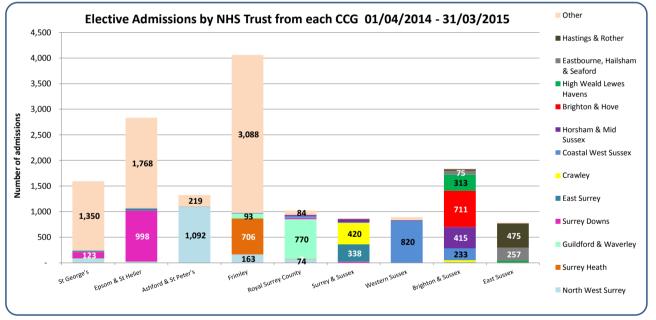
## Hospital Trust activity from CCGs

6. Patient flows from CCG to Hospital Trust for back and radicular pain in people aged 16 years and over (April 2014 - March 2015)



a. Hospital elective admissions by CCG population (percentage of activity)

b. Hospital elective admissions by CCG population (actual activity)



#### What is the data telling us?

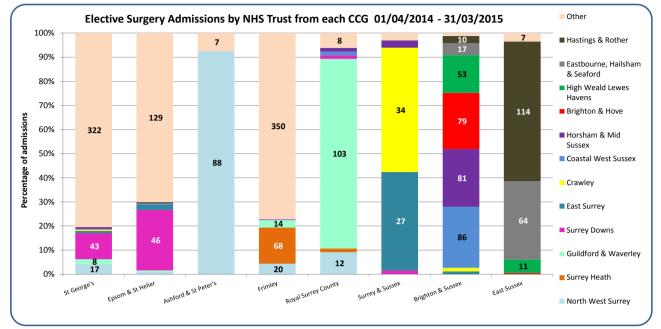
There is variation between hospital trusts in terms of the number of patients from each of the CCGs that are admitted for back and radicular pain.

The two highest volume NHS Trusts used by the Surrey & Sussex CCGs are Frimley and Epsom & St Helier who also admit patients from several different CCGs outside of this region. St George's Trust is located outside of the Surrey & Sussex CCGs boundary so the majority of their activity comes from CCGs outside of this region.

The data is shown in two ways, indicating both the proportion and number of admissions relating to each CCG.

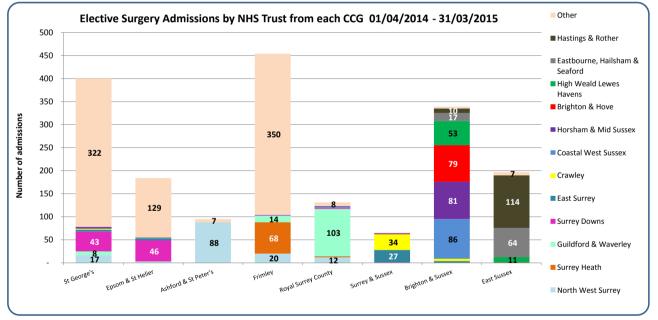
## Hospital Trust activity from CCGs

6. Patient flows from CCG to Hospital Trust for back and radicular pain in people aged 16 years and over (April 2014 - March 2015)



c. Hospital elective admissions for surgery by CCG population (percentage of activity)

d. Hospital elective admissions for surgery by CCG population (actual activity)



#### What is the data telling us?

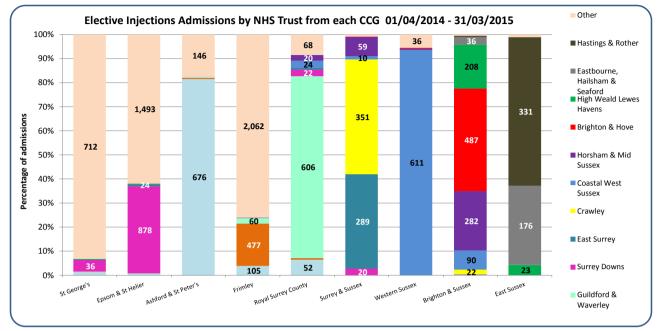
There is variation between hospital trusts in terms of the number of patients from each of the CCGs that are admitted for spinal surgery back and radicular pain.

The two highest volume NHS Trusts used by the Surrey & Sussex CCGs are Frimley and St George's who also admit patients from several different CCGs outside of this region. St George's Trust is located outside of the Surrey & Sussex CCGs boundary so the majority of their activity comes from CCGs outside of this region. Brighton Trust admits the highest volume of spinal surgery patients from the Surrey & Sussex CCGs.

The data is shown in two ways, indicating both the proportion and number of admissions relating to each CCG.

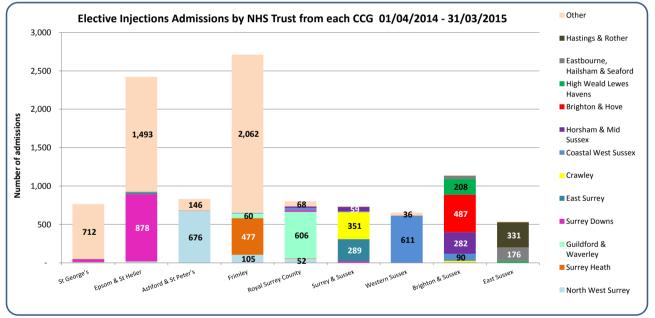
## Hospital Trust activity from CCGs

6. Patient flows from CCG to Hospital Trust for back and radicular pain in people aged 16 years and over (April 2014 - March 2015)



e. Hospital elective admissions for injections by CCG population (percentage of activity)

f. Hospital elective admissions for injections by CCG population (actual activity)



#### What is the data telling us?

There is variation between hospital trusts in terms of the number of patients from each of the CCGs that are admitted for injections for back and radicular pain.

The two highest volume NHS Trusts used by the Surrey & Sussex CCGs are Frimley and Epsom & St Helier who also admit patients from several different CCGs outside of this region. St George's Trust is located outside of the Surrey & Sussex CCGs boundary so the majority of their activity comes from CCGs outside of this region.

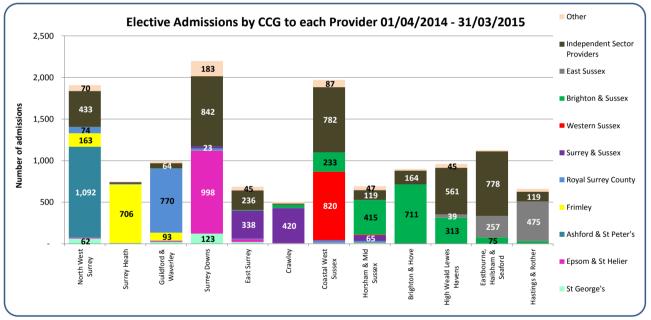
The data is shown in two ways, indicating both the proportion and number of admissions relating to each CCG.

## **CCG activity to Hospital Trust**

Other Elective Admissions by CCG to each Provider 01/04/2014 - 31/03/2015 100% Independent Sector 20 15 87 35 45 47 183 64 Providers 90% 39 164 119 433 East Sussex 119 80% 236 782 847 Brighton & Sussex 74 70% of admissions 561 163 778 60% Western Sussex 770 23 50% 233 706 415 Surrey & Sussex 420 Percentage 40% 711 39 338 1,092 Royal Surrey County 30% 998 820 20% Frimley 257 313 10 10% 65 93 Ashford & St Peter's 32 26 123 62 22 0% High Weald Lewes Havens Hastings & Rother Eastbourne, Hailsham & Seaford Vorth West Guildford & Waverley East Surrey Crawley Coastal West Horsham & Mid **Brighton & Hove** Surrey Heath Surrey Downs Surrey Epsom & St Helier Sussex Sussex St George's

7. Patient flows to Hospital Trusts from CCGs for back pain in people aged 16 years and over (April 2014 - March 2015) a. Hospital elective admissions by CCG population (percentage of activity)

b. Hospital elective admissions from each CCG (actual activity)



#### What is the data telling us?

There is variation between CCGs in terms of the number of hospital trusts to which their patients are admitted.

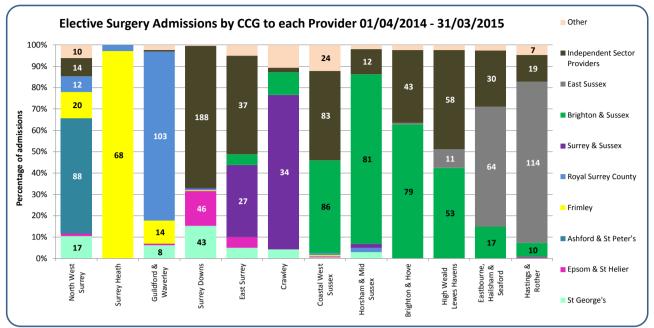
Activity is highest for Surrey Downs CCGs and patients from this CCGs were admitted to at least NHS Trusts and frequently to Independent Sector Providers (842 admissions).

High Weald Lewes Haven and Eastbourne, Hailsham & Seaford CCGs are the highest users of Independent Sector activity in the Surrey & Sussex CCGs.

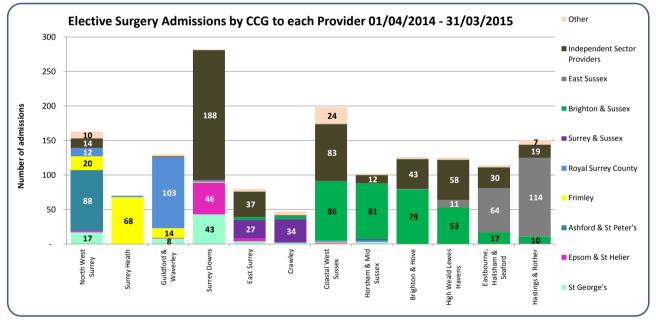
The data is shown in two ways, indicating both the proportion and amount of activity relating to each hospital trust.

## **CCG activity to Hospital Trust**

7. Patient flows to Hospital Trusts from CCGs for back pain in people aged 16 years and over (April 2014 - March 2015) c. Hospital elective admissions for surgery by CCG population (percentage of activity)



d. Hospital elective admissions for surgery from each CCG (actual activity)



## What is the data telling us?

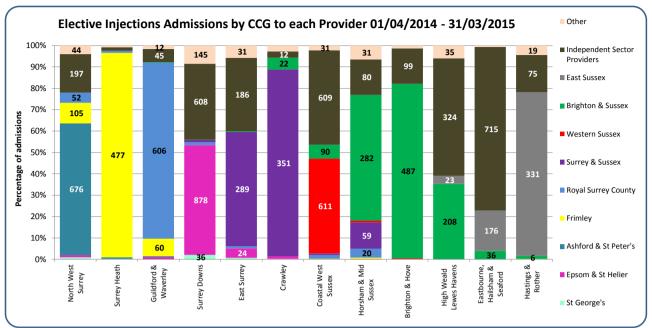
There is variation between CCGs in terms of the number of hospital trusts to which their patients are admitted for spinal surgery.

Activity is highest for Surrey Downs CCG where patients were admitted to at least five NHS Trusts but more notably had the highest user of Independent Sector Providers (188 admissions).

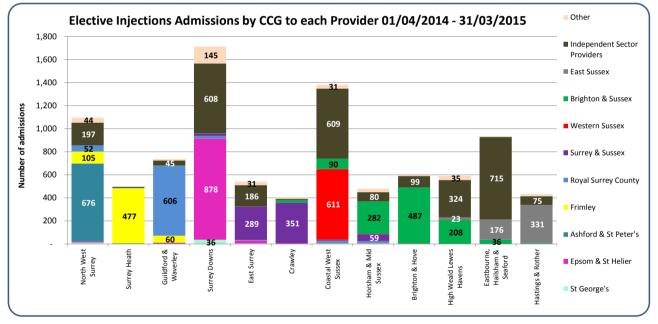
The data is shown in two ways, indicating both the proportion and amount of activity relating to each hospital trust.

## **CCG activity to Hospital Trust**

7. Patient flows to Hospital Trusts from CCGs for back pain in people aged 16 years and over (April 2014 - March 2015) e. Hospital elective admissions for injections by CCG population (percentage of activity)



f. Hospital elective admissions for injections from each CCG (actual activity)



#### What is the data telling us?

There is variation between CCGs in terms of the number of hospital trusts to which their patients are admitted for injections.

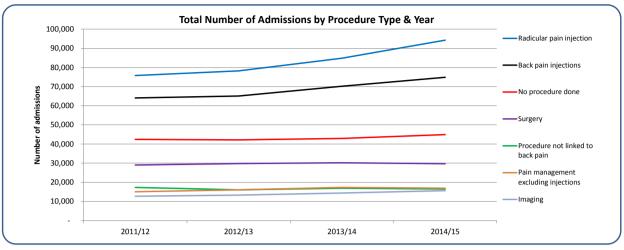
Activity is highest for Surrey Downs CCGs and patients from this CCGs were admitted to at least three NHS Trusts and frequently to Independent Sector Providers (608 admissions).

High Weald Lewes Haven and Eastbourne, Hailsham & Seaford CCGs are the highest users of Independent Sector activity in the Surrey & Sussex CCGs.

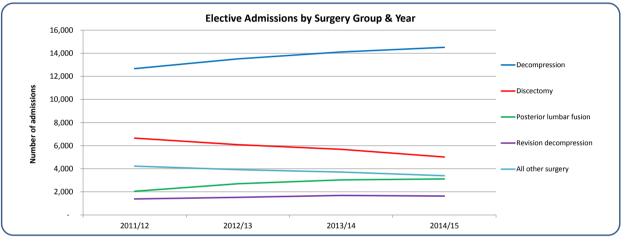
The data is shown in two ways, indicating both the proportion and amount of activity relating to each hospital trust.

## Hospital Trust activity (national level)

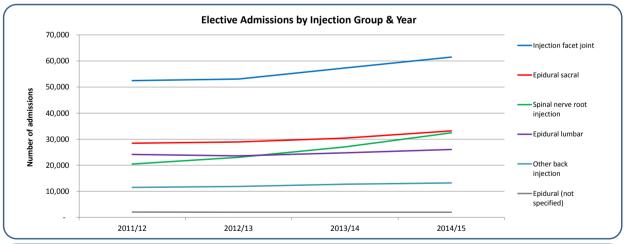
8. Hospital admissions for low back and radicular pain in people aged 16 years and over (1st April 2011 - 31st March 2015) a. Hospital admissions by procedure type over time (all admission types)



b. Elective hospital admissions by surgery procedure type over time



c. Hospital admissions by injection procedure type over time



#### What is the data telling us?

These charts show national trends in the types of procedures undertaken during elective admissions including a group where no procedure was undertaken during their admission. There is also a category listed as 'procedure not linked to back pain' which reports admission activity where there is a primary diagnosis of back pain but with a procedure not linked to back pain.

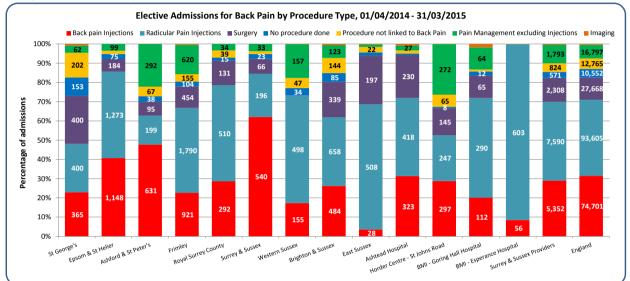
The main procedure type relating to elective admissions are for back and radicular pain injections which has increased from a combined total of just under 140,000 to 170,000 episodes over the four year period. This is in stark contrast to number of admissions related to surgery which has remained relatively constant at 30,000 admissions per year. The proportion of admissions with no procedure reported has remained at approximately 15-16% of all activity.

The charts in sections b and c show the elective admissions over time specifically for different groups of surgery procedures and injections.

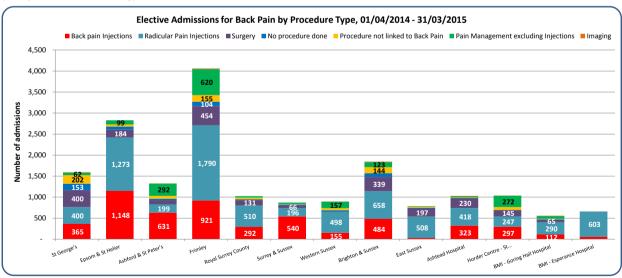
9. Elective hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015) a. Elective hospital admissions by procedure type (national level including all providers)

Procedure type	Back	Radicular	Total	%
Radicular Pain Injections	40,034	53,571	93,605	39.5%
Back Pain Injections	62,317	12,384	74,701	31.5%
Surgery	3,925	23,743	27,668	11.7%
Pain Management excluding Injections	13,150	3,647	16,797	7.19
Procedure not linked to Back Pain	8,197	4,568	12,765	5.4%
No procedure done	6,060	4,492	10,552	4.4%
Imaging	712	373	1,085	0.5%
Other Non-Surgical	53	30	83	0.0%
Total	134,448	102,808	237,256	100%

b. Number of elective admissions per hospital Trust, by procedure type (percentage of activity) (Surrey & Sussex Providers only)



c. Number of elective admissions per hospital Trust, by procedure type (actual activity) (Surrey & Sussex Providers only)



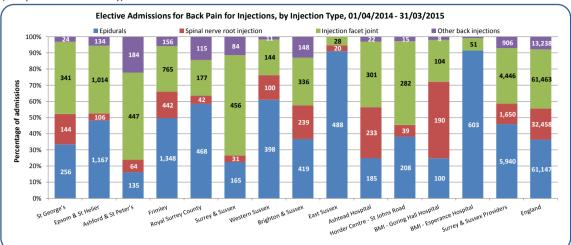
#### What is the data telling us?

The table shows the number of procedures done in the latest 12 month period, by procedure type, with injections being the most common elective procedure. Nationally only 4.4% of elective admissions have no procedure recorded indicating that there are relatively few elective admissions where no procedure is undertaken (compared to 15-16% of all admission types - see previous sheet).

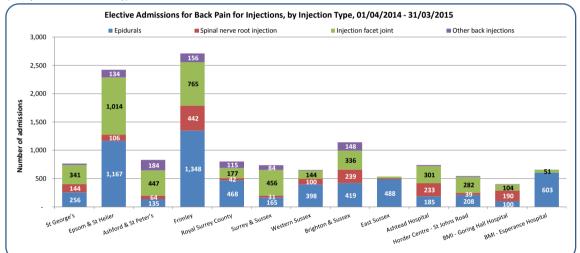
Four of the NHS Trusts used by the Surrey & Sussex CCGs have a higher proportion of elective activity for injections than the England rate (approx. 70%) and it is possible that the variation may be even greater due to differences in the point of delivery of care across hospital Trusts (for example it is possible that activity may also take place as outpatient procedures).

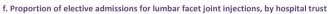
The data is shown in two ways, indicating both the proportion and amount of activity relating to each procedure.

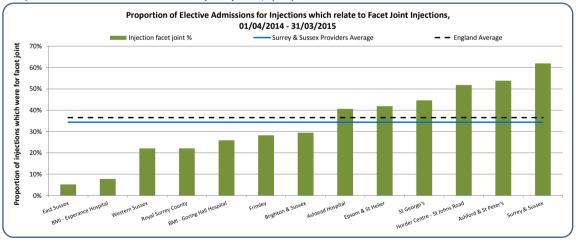
9. Elective hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015) d. Number of elective admissions for injections per hospital Trust, by injection type (percentage of activity) (Surrey & Sussex Providers only)



e. Number of elective admissions for injections per hospital Trust, by injection type (actual activity) (Surrey & Sussex Providers only)







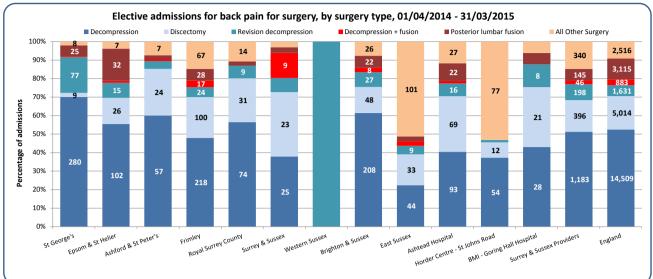
#### What is the data telling us?

Epidurals are those most frequently done within the providers for the Surrey & Sussex CCGs, constituting over 46% of injection activity which is notably higher than the England proportion (36%). These providers overall do lower proportion of lumbar facet joint and spinal nerve root injections.

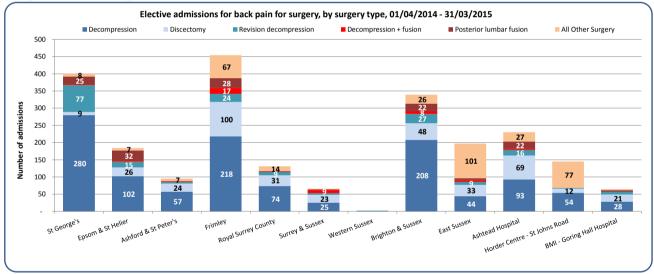
The data is shown in two ways, indicating both the proportion of overall activity and number of episodes for each Provider.

The proportion of facet joint injections done at NHS Trust level ranges from 5% (East Sussex) to 62% (Surrey & Sussex) compared to the England figure of 37%.

9. Elective hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015) g. Number of elective admissions for surgery per hospital Trust, by surgery type (percentage of activity) (Surrey & Sussex Providers only)



h. Number of elective admissions for surgery per hospital Trust, by surgery type (actual activity) (Surrey & Sussex Providers only)



#### What is the data telling us?

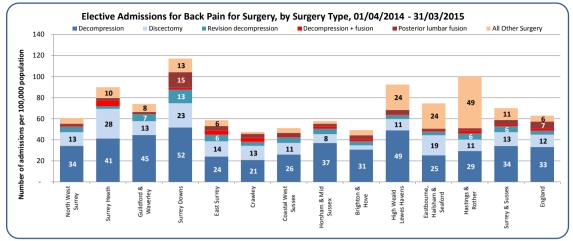
The charts above show the range in activity relating specifically to elective admissions for surgery, by type of surgery, for the providers used by the Surrey & Sussex CCGs.

These providers overall do a higher proportion of revision decompressions and other surgery compared to the England profile. There are variations at Trust level between the three high volume centres with higher proportion of fusions at Frimley and Brighton & Sussex compared to St George's.

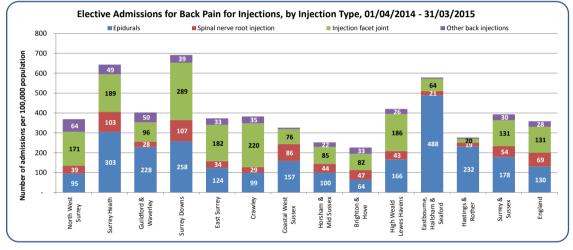
The data is shown in two ways, indicating both the proportion and amount of activity relating to each surgery type.

#### CCG activity by back pain procedure group

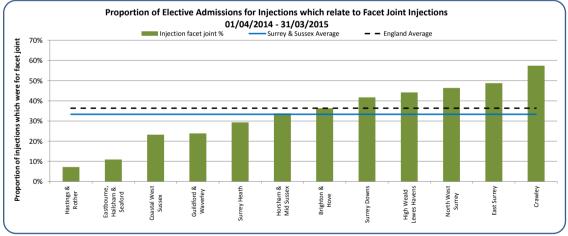
10. Elective hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015) a. Number of elective admissions for surgery per CCG, by surgery type (Surrey & Sussex only)



b. Number of elective admissions for injections per CCG, by injection type (Surrey & Sussex only)







#### What is the data telling us?

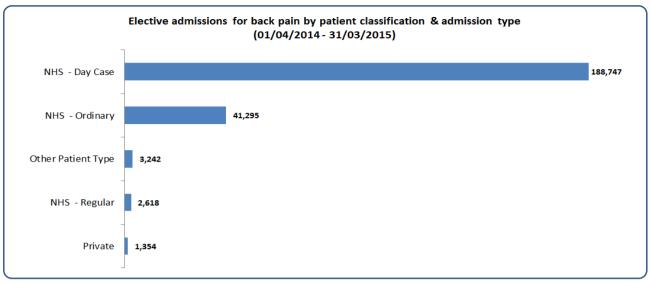
Chart 9a shows the range in the activity rate relating specifically to elective admissions for surgery, by type of surgery, for the Surrey & Sussex CCGs, with chart 9b showing the same for injections.

Overall, this region has slightly higher rates per 100,000 for surgery but there is variation between the CCGs with Surrey Downs having higher rates of surgery (particularly fusions) compared to the other CCGs, regional and national rates.

This region also has slightly higher rates per 100,000 for injections but there is variation between the CCGs with Surrey Downs having higher rates of injections compared to the other CCGs in the region and is almost twice the national rate.

The proportion of facet joint injections done at CCG level ranges from 7% (Hastings & Rother) to 57% (Crawley) compared to the England figure of 37%.

**11.** Hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015) a. Elective admissions for back pain by patient classification and type, all providers

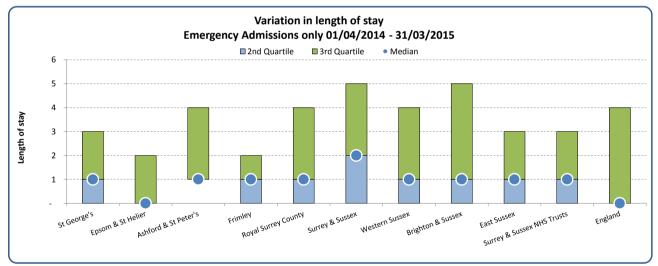


Other Patient Types are Amenity patients and Category II patients, and where the Administrative Category is unknown.

b. Elective admissions for back pain, average length of stay by provider

67% of elective admissions for back pain are day cases, therefore the range in length of stay has not been calculated.

c. Emergency admissions for back pain, average length of stay by provider (Surrey & Sussex Trusts only)



## What is the data telling us?

Over 98% of elective admissions for back pain in the current data extraction relate to NHS patients, with just over 0.5% relating to private patients.

The boxplot indicates the variation in length of stay for emergency admissions to the NHS Trusts used by the Surrey & Sussex CCGs and shows that there all Trusts, except Epsom & St Helier have a median length of stay of 1 or 2 days, compared to the England average of zero days.

## **Hospital Trust Activity Total Costs**

12. Total costs to the commissioner for hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015)

a. Total Costs by Admission Method Type (Surrey & Sussex FTs only)

Provider Name	Ele	ective	Eme	ergency	Other	Other		tal
Frimley	£	4,847,361	£	967,824	£	28,612	£	5,843,797
St George's	£	3,997,639	£	907,983	£	209,217	£	5,114,840
Brighton & Sussex	£	3,100,558	£	878,145	£	29,604	£	4,008,307
Epsom & St Helier	£	2,968,010	£	538,108	£	5,232	£	3,511,351
Ashford & St Peter's	£	1,218,598	£	366,205	£	29,743	£	1,614,545
East Sussex	£	1,134,917	£	445,598	£	6,327	£	1,586,843
Royal Surrey County	£	1,187,963	£	384,005	£	14,714	£	1,586,682
Surrey & Sussex	£	876,632	£	496,740	£	6,962	£	1,380,335
Western Sussex	£	601,865	£	743,334	£	1,170	£	1,346,369
Total	£	19,933,544	£	5,727,943	£	331,580	£	25,993,067

#### b. Total Costs by Procedure Type (Surrey & Sussex FTs only)

													Pain	1				
									Procedure not				Management					
			Rad	icular pain	Back	pain	Nop	procedure	link	ed to back			excl	uding	Other Non-			
Provider Name	Sur	gery	Inje	ctions	Injec	tions	don	e	pair	า	Ima	ging	Inje	ctions	Surgica	al	Tot	al
Frimley	£	2,154,365	£	1,342,999	£	594,304	£	512,988	£	369,788	£	334,263	£	535,089	£	-	£	5,843,797
St George's	£	2,637,507	£	288,419	£	248,471	£	308,687	£	1,433,911	£	161,341	£	36,503	£	-	£	5,114,840
Brighton & Sussex	£	2,026,781	£	460,045	£	283,132	£	255,304	£	619,640	£	292,773	£	70,633	£	-	£	4,008,307
Epsom & St Helier	£	1,055,038	£	998,417	£	777,736	£	425,165	£	106,133	£	80,653	£	59,417	£	8,792	£	3,511,351
Ashford & St Peter's	£	409,593	£	144,971	£	457,073	£	212,528	£	101,087	£	119,565	£	168,909	£	818	£	1,614,545
East Sussex	£	723,399	£	351,405	£	18,811	£	270,419	£	108,247	£	101,148	£	7,895	£	5,518	£	1,586,843
Royal Surrey County	£	614,646	£	378,350	£	189,224	£	152,079	£	94,940	£	135,650	£	21,794	£	-	£	1,586,682
Surrey & Sussex	£	324,632	£	146,940	£	358,975	£	285,992	£	96,098	£	148,988	£	18,711	£	-	£	1,380,335
Western Sussex	£	13,934	£	332,673	£	97,915	£	537,304	£	156,335	£	124,142	£	84,064	£	-	£	1,346,369
Total	£	9,959,895	£	4,444,218	£	3,025,642	£	2,960,466	£	3,086,179	£	1,498,522	£	1,003,016	£	15,128	£	25,993,067

#### What is the data telling us?

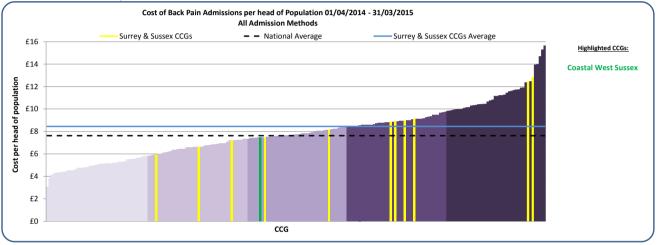
Across all NHS Trusts used by the Surrey & Sussex CCGs in 2014/15 the total cost to commissioners for back and radicular pain admissions was approximately £26 million, with 77% of the costs attributed to elective activity. Note that these costs are by provider Trust and will include activity for CCGs outside of this region. The surgery procedures group accounts for almost 38% of the total cost of all procedures, and the cost of injections is an additional 29% of the total.

## **CCG Activity Total Costs**

13. Hospital admissions Total Cost for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015) a. All Admission Methods - Table

	All Adn			Imissions		Elective Admissions			Emergency Admissions				
													Registered
	Cos	t per head			Cos	st per head			Со	st per head			Population
Responsible CCG Name	of I	Population	Tot	al Cost	of I	Population	Tot	tal Cost	of	Population	Tot	al Cost	(Ages 15+)
Brighton & Hove	£	5.94	£	1,569,967	£	4.63	£	1,222,823	£	1.29	£	341,290	264,248
Horsham & Mid Sussex	£	6.62	£	1,268,679	£	4.82	£	924,441	£	1.76	£	336,559	191,685
Crawley	£	7.20	£	756,955	£	5.34	£	560,989	£	1.51	£	158,234	105,092
Coastal West Sussex	£	7.45	£	3,163,307	£	5.41	£	2,299,328	£	1.99	£	846,013	424,725
East Surrey	£	7.48	£	1,086,588	£	5.88	£	853,167	£	1.51	£	219,157	145,212
Hastings & Rother	£	8.12	£	1,272,558	£	6.27	£	982,900	£	1.78	£	278,382	156,698
High Weald Lewes Havens	£	8.82	£	1,240,504	£	7.62	£	1,071,516	£	1.15	£	161,768	140,568
North West Surrey	£	8.87	£	2,634,864	£	6.97	£	2,069,851	£	1.63	£	482,597	296,910
Guildford & Waverley	£	8.96	£	1,648,054	£	6.97	£	1,280,800	£	1.74	£	320,533	183,858
Eastbourne, Hailsham & Seaford	£	9.09	£	1,474,779	£	7.40	£	1,199,611	£	1.67	£	270,943	162,178
Surrey Heath	£	12.41	£	966,402	£	10.51	£	818,246	£	1.90	£	148,156	77,853
Surrey Downs	£	12.80	£	3,168,815	£	11.49	£	2,846,185	£	1.23	£	305,441	247,617
Surrey & Sussex Total	£	8.45	£	20,251,470	£	6.73	£	16,129,857	£	1.61	£	3,869,071	2,396,644

#### b. All Admission Methods - Quintile Chart



#### c. Elective Admissions only, by Procedure Type

													Pair					
									Proce	edure not			Mar	agement				
			Radi	cular pain	Back	pain	No pro	ocedure	linke	d to back			excl	uding	Other	Non-	1	otal Cost
Responsible CCG Name	Sur	gery	Injec	tions	Injed	tions	done		pain		Imag	ing	Inje	ctions	Surgio	al		
Surrey Downs	£	1,424,509	£	635,507	£	545,924	£	1,106	£	185,742	£	7,114	£	46,283	£	-	£	2,846,185
Coastal West Sussex	£	983,737	£	643,759	£	218,859	£	2,055	£	309,873	£	12,192	£	128,854	£	-	£	2,299,328
North West Surrey	£	739,346	£	283,968	£	501,691	£	22,210	£	266,053	£	8,830	£	246,934	£	818	£	2,069,851
Guildford & Waverley	£	598,296	£	337,884	£	176,575	£	19,167	£	112,679	£	813	£	35,385	£	-	£	1,280,800
Brighton & Hove	£	655,945	£	192,345	£	184,647	£	3,588	£	121,312	£	2,315	£	62,671	£	-	£	1,222,823
Eastbourne, Hailsham & Seaford	£	441,369	£	556,567	£	66,891	£	-	£	111,468	£	1,825	£	21,493	£	-	£	1,199,611
High Weald Lewes Havens	£	496,075	£	197,089	£	176,008	£	4,703	£	93,778	£	1,693	£	102,170	£	-	£	1,071,516
Hastings & Rother	£	583,035	£	268,345	£	20,569	£	1,619	£	83,927	£	1,595	£	18,292	£	5,518	£	982,900
Horsham & Mid Sussex	£	499,311	£	194,053	£	126,255	£	1,537	£	51,890	£	3,409	£	47,985	£	-	£	924,441
East Surrey	£	401,277	£	159,709	£	200,294	£	794	£	76,141	£	1,325	£	12,229	£	1,398	£	853,167
Surrey Heath	£	310,900	£	234,196	£	117,822	£	7,804	£	58,782	£	1,627	£	87,116	£	-	£	818,246
Crawley	£	252,794	£	96,610	£	176,149	£	1,528	£	14,587	£	3,824	£	15,497	£	-	£	560,989

#### What is the data telling us?

There is wide variation across the CCGs in Surrey and Sussex in cost per head of population for admissions related to back and radicular pain.

Surrey Downs CCG and Surrey Health CCGs have the highest spends per head of population regionally (£12.80 and £12.41 respectively) driven mainly by high costs for elective admissions. Brighton and Hove CCG has the lowest costs per head for both emergency and elective admissions (£5.94) in the region, which is also well below the national average.

The final table shows the total spend for elective admissions for each CCG for 2014/15 (based on national tariff) and includes a breakdown of this spend by procedure type. Surgery generally accounts for the majority of spend, but there are several CCGs where more is spent on admissions for injections compared to what is spent on surgery. Most notably, this occurs in Surrey Heath CCG which we have noted to also have very high costs per head of population.

## 14. Back & Radicular Pain Admissions Breakdown for the Surrey & Sussex Region

Highlighted Provider Data is included in this report (Blue=NHS Trust & Green=Independent Sector Provider)

Code	Provider Name		ve Admissio Injections	other	Emergency Admissions	Other Admission Types	Total
ХН	BRIGHTON AND SUSSEX UNIVERSITY HOSPITALS NHS TRUST	335	1,136	356	491	7	2,3
YR	WESTERN SUSSEX HOSPITALS NHS FOUNDATION TRUST	<6	617	213	596	<6	1,4
К	ASHFORD AND ST PETER'S HOSPITALS NHS FOUNDATION TRUST	88	684	333	232	7	1,3
R	EPSOM AND ST HELIER UNIVERSITY HOSPITALS NHS TRUST	55	928	84	162	-	1,2
2	ROYAL SURREY COUNTY HOSPITAL NHS FOUNDATION TRUST	123	734	80	245	6	1,:
2	SURREY AND SUSSEX HEALTHCARE NHS TRUST	64 190	730 530	65 52	323 384	<6 10	1, 1,
- J	EAST SUSSEX HEALTHCARE NHS TRUST FRIMLEY HEALTH NHS FOUNDATION TRUST	190	649	220	584 150	<6	1, 1,
C01	ASHTEAD HOSPITAL	219	682	55	-	-	1,
M01	THE HORDER CENTRE - ST JOHNS ROAD	92	364	232	-	-	
413	BMI - THE ESPERANCE HOSPITAL	-	659	<6	-	-	
417	BMI - GORING HALL HOSPITAL	65	400	90	-	-	
7	ST GEORGE'S UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	78	53	113	66	18	
212	NUFFIELD HEALTH, CHICHESTER HOSPITAL	9	213	13	-	-	
431	BMI - THE RUNNYMEDE HOSPITAL	-	30	195	-	-	
F241	NUFFIELD HEALTH, WOKING HOSPITAL	14	153	26	-	-	
X	KINGSTON HOSPITAL NHS FOUNDATION TRUST	-	115	21	25	-	
364 /C11	SPIRE MONTEFIORE HOSPITAL NORTH DOWNS HOSPITAL	48 6	96 120	14 <6	-	-	
1	GUY'S AND ST THOMAS' NHS FOUNDATION TRUST	12	63	<0 44	- <6	-	
N	ROYAL NATIONAL ORTHOPAEDIC HOSPITAL NHS TRUST	8	50	21	<6	-	
VF	MAIDSTONE AND TUNBRIDGE WELLS NHS TRUST	<6	33	<6	28	-	
7455	BMI MOUNT ALVERNIA HOSPITAL	-	49	8	-	-	
RV	UNIVERSITY COLLEGE LONDON HOSPITALS NHS FOUNDATION TRUST	6	27	21	<6	<6	
/601	PAIN MANAGEMENT SOLUTIONS - OAKS PARK PCC	-	42	10	-	-	
Г309	SPIRE SUSSEX HOSPITAL	13	26	-	-	-	
л Л	IMPERIAL COLLEGE HEALTHCARE NHS TRUST	7	15	6	8	-	
HM C	UNIVERSITY HOSPITAL SOUTHAMPTON NHS FOUNDATION TRUST	6	<6	12	9	<6	
16 T239	CROYDON HEALTH SERVICES NHS TRUST	<6	19	<6 12	10	-	
1239 T308	NUFFIELD HEALTH, TUNBRIDGE WELLS HOSPITAL SPIRE GATWICK PARK HOSPITAL		19 29	- 12	-	-	
1000 10	PORTSMOUTH HOSPITALS NHS TRUST	- 8	29 10	- 6	- <6	-	
Z	KING'S COLLEGE HOSPITAL NHS FOUNDATION TRUST	8	10	<6	<0 <6	- <6	
T218	NUFFIELD HEALTH, HAYWARDS HEATH HOSPITAL	11	13	<6	-	-	
345	SPIRE CLARE PARK HOSPITAL	-	11	13	-	-	
DA01	VIRGIN CARE SERVICES LTD (BROOK GREEN)	-	-	10	<6	<6	
WF01	BENENDEN HOSPITAL	<6	15	<6	-	-	
QΜ	CHELSEA AND WESTMINSTER HOSPITAL NHS FOUNDATION TRUST	-	<6	<6	<6	-	
4S	THE HILLINGDON HOSPITALS NHS FOUNDATION TRUST	-	6	<6	<6	-	
Г304	SPIRE SOUTHAMPTON HOSPITAL	-	8	<6	-	-	
T428	BMI - THE PRINCESS MARGARET HOSPITAL	-	8	<6	-	-	
T436	BMI - SHIRLEY OAKS HOSPITAL	<6	<6	<6	-	-	
1H XQ	BARTS HEALTH NHS TRUST BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	-	<6 <6	<6 <6	<6 <6	-	
лц T422	BOCKINGHAVISHIKE HEALTHCAKE IND TROST BMI - THE LONDON INDEPENDENT HOSPITAL	- <6	<6	<0	<0	-	
TH	OXFORD UNIVERSITY HOSPITALS NHS TRUST	<6	-	<6	<6	-	
T418	BMI - THE HAMPSHIRE CLINIC	-	<6	<6	-	-	
VV	EAST KENT HOSPITALS UNIVERSITY NHS FOUNDATION TRUST	-	<6	-	<6	-	
WG	WEST HERTFORDSHIRE HOSPITALS NHS TRUST	<6	<6	<6	<6	-	
DJ01	FORUM HOUSE				<6	<6	
D1	ROYAL UNITED HOSPITALS BATH NHS FOUNDATION TRUST	<6	-	<6	<6	-	
12	LEWISHAM AND GREENWICH NHS TRUST	-	<6	<6	<6	-	
KE	THE WHITTINGTON HOSPITAL NHS TRUST	-	<6	-	<6	-	
T411	BMI - THE CLEMENTINE CHURCHILL HOSPITAL	<6	<6	-	-	-	
1G 1V	TORBAY AND SOUTHERN DEVON HEALTH AND CARE NHS TRUST				-	<6	
1K BA	LONDON NORTH WEST HEALTHCARE NHS TRUST TAUNTON AND SOMERSET NHS FOUNDATION TRUST	- <6	<6	-	<6 <6	-	
SA EF	ROYAL CORNWALL HOSPITALS NHS FOUNDATION TROST	<0	-	-	<ь <6	-	
<b< td=""><td>UNIVERSITY HOSPITALS COVENTRY AND WARWICKSHIRE NHS TRUST</td><td>&lt;6</td><td>-</td><td>-</td><td>&lt;0 &lt;6</td><td>-</td><td></td></b<>	UNIVERSITY HOSPITALS COVENTRY AND WARWICKSHIRE NHS TRUST	<6	-	-	<0 <6	-	
M2	UNIVERSITY HOSPITAL OF SOUTH MANCHESTER NHS FOUNDATION TRUST				<6	-	
N7	DARTFORD AND GRAVESHAM NHS TRUST	-	<6	-	-	-	
Pγ	THE ROYAL MARSDEN NHS FOUNDATION TRUST	-	-	<6	-	-	
QW	THE PRINCESS ALEXANDRA HOSPITAL NHS TRUST	-	-	<6	<6	-	
5	THE ROYAL ORTHOPAEDIC HOSPITAL NHS FOUNDATION TRUST	-	<6	<6	-	-	
/C09	NEW HALL HOSPITAL	<6	<6	-	-	-	
LF	ISLE OF WIGHT NHS TRUST	1	-		<6	-	
AL ND	ROYAL FREE LONDON NHS FOUNDATION TRUST	-	<6	-		-	
BD BT	DORSET COUNTY HOSPITAL NHS FOUNDATION TRUST MID CHESHIRE HOSPITALS NHS FOUNDATION TRUST	1			<6 <6	-	
51 C9	LUTON AND DUNSTABLE UNIVERSITY HOSPITAL NHS FOUNDATION TRUST	1			<ь <6	-	
.9 CD	HARROGATE AND DISTRICT NHS FOUNDATION TRUST	1			<0 <6	-	
08	MILTON KEYNES HOSPITAL NHS FOUNDATION TRUST	1			<6	-	
DZ	THE ROYAL BOURNEMOUTH AND CHRISTCHURCH HOSPITALS NHS FOUNDATION TRUST				<6	-	
бT	CAMBRIDGE UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	-	<6	-	-	-	
W	ROYAL BERKSHIRE NHS FOUNDATION TRUST				<6	-	
E	UNIVERSITY HOSPITALS OF NORTH MIDLANDS NHS TRUST	1			<6	-	
(9	PLYMOUTH HOSPITALS NHS TRUST	1			<6	-	
Q	WYE VALLEY NHS TRUST	1			<6	-	
N5	HAMPSHIRE HOSPITALS NHS FOUNDATION TRUST	1			<6	-	
QX	HOMERTON UNIVERSITY HOSPITAL NHS FOUNDATION TRUST	1	_		<6	-	
Έ γ	GLOUCESTERSHIRE HOSPITALS NHS FOUNDATION TRUST	-	<6	-	-	-	
rx /J	UNIVERSITY HOSPITALS OF MORECAMBE BAY NHS FOUNDATION TRUST	-6			<6	-	
VJ W3	NORTH BRISTOL NHS TRUST CENTRAL MANCHESTER UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	<6	-	-	- <6	-	
W3 W6	PENNINE ACUTE HOSPITALS NHS TRUST	1			<ь <6	-	
NJ	STOCKPORT NHS FOUNDATION TRUST	1			<0 <6	-	
	NOTTINGHAM UNIVERSITY HOSPITALS NHS TRUST	1			<6	-	
1							

## 14. Back & Radicular Pain Admissions Breakdown for the Surrey & Sussex Region

Highlighted Provider Data is included in this report (Blue=NHS Trust & Green=Independent Sector Provider)

(							
		Ele	ctive Admissio	ns	Emergency	Other Admission	
Code	Provider Name	Surgery	Injections	Other	Admissions	Types	Total
NT344	SPIRE DUNEDIN HOSPITAL	<6	-	-	-	-	<6
NT405	BMI - BISHOPS WOOD	-	<6	-	-	-	<6
NT437	BMI - THE SLOANE HOSPITAL	-	<6	-	-	-	<6
NVM02	EPSOM DAY SURGERY LIMITED	-	-	<6	-	-	<6
NYW01	ASPEN - HOLLY HOUSE HOSPITAL	-	<6	-	-	-	<6
NYW02	ASPEN - PARKSIDE HOSPITAL	-	<6	-	-	-	<6
Total		1,590	9,396	2,361	2,794	65	16,206

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Approved by Project Director	Helen Ridley
Peer Reviewed by (if appropriate)	
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0.2	Draft V2	15/03/2016	Amendments & Final QA	Adam Fearing, Kayoung Goffe					
0.3	Draft V3	15/04/2016	Further minor amendments	Adam Fearing, Kayoung Goffe					
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0.6	Draft V6	30/06/2016	Narrative & formatting	Liz Lingard					

CONFIDENTIALITY CHECKLIST – FOR	COMPLETION PRIOR TO ANY DRAFTS SENT TO CLIENTS
Does the report include any small numbers?	Yes
If yes, can we produce a meaningful suppressed version?	Yes, the small numbers in this report have been suppressed. Observed events less than 6 have been replaced by "<6". Rates where the numerator or denominator are less than 6 have been shown, although to calculate that small number would not be possible from the data shown here.
If not, the Epidemiologist AND Director must justify why not here, highlight, and agree the need for an NDA	
Have Lightfoot/HSCIC approved use of NDA in order to disclose small numbers?	
Has the recipient of the report signed the NDA?	