

## **North East Quality Observatory Service**

# **Back Pain Report**

## **East Surrey**



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 ${\bf Better} Knowledge {\bf Better} Care {\bf Better} Outcomes$ 

#### **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

- 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

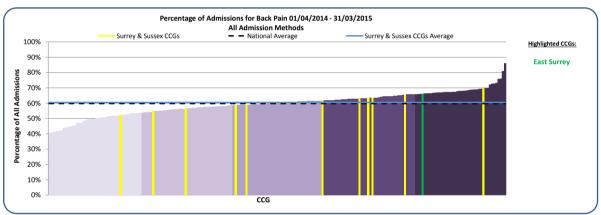
England	Back	Radicular	Total	% Back	% Radicular
Elective	134,448	102,808	237,256	56.7%	43.3%
Emergency	39,331	14,309	53,640	73.3%	26.7%
Other	771	951	1,722	44.8%	55.2%
Total	174,550	118,068	292,618	59.7%	40.3%

Surrey &					
Sussex CCGs	Back	Radicular	Total	% Back	% Radicular
Elective	7,641	5,706	13,347	57.2%	42.8%
Emergency	2,136	658	2,794	76.4%	23.6%
Other	20	45	65	30.8%	69.2%
Total	9,797	6,409	16,206	60.5%	39.5%

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

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

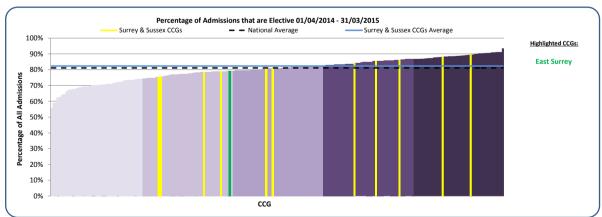
Eastbourne, Hailsham & Seaford	52.2%	Brighton & Hove	63.2%
Surrey Downs	54.9%	Guildford & Waverley	63.5%
Horsham & Mid Sussex	56.6%	High Weald Lewes Havens	63.5%
Coastal West Sussex	58.8%	North West Surrey	65.6%
Hastings & Rother	58.9%	East Surrey	66.1%
Surrey Heath	61.8%	Crawley	69.9%
Surrey & Sussex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



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

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



## 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%.

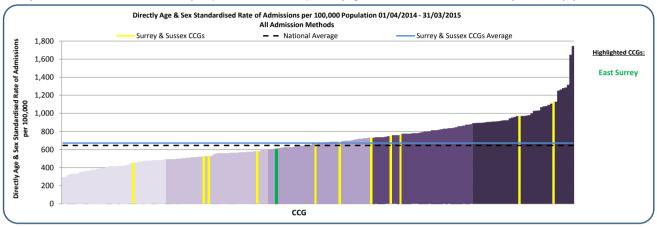
Nationally, approximately 81% of back and radicular pain admissions are elective, with Surrey & Sussex having a slightly higher proportion (82.4%). At a CCG level in this region, the proportion of elective admissions for these populations ranges from 75% in Coastal West Sussex to 90% in Surrey Downs.

#### Clinical Commissioning Group (CCG) activity

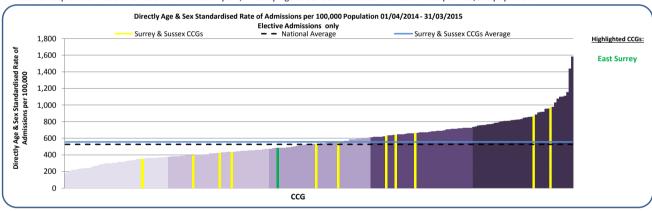
- 2. Hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 March 2015)
- a. Hospital admissions for back pain by CCG (all admission methods), Directly Age & Sex Standardised Admission rate per 100,000 population

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

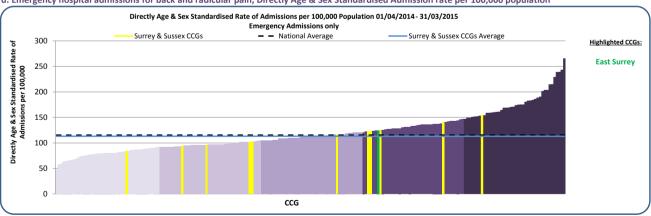
b. Hospital admissions for back and radicular pain (all admission methods), Directly Age & Sex Standardised Admission rate per 100,000 population



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



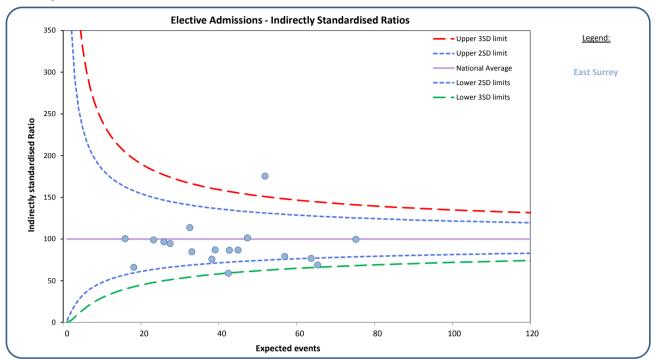
## What is the data telling us?

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.

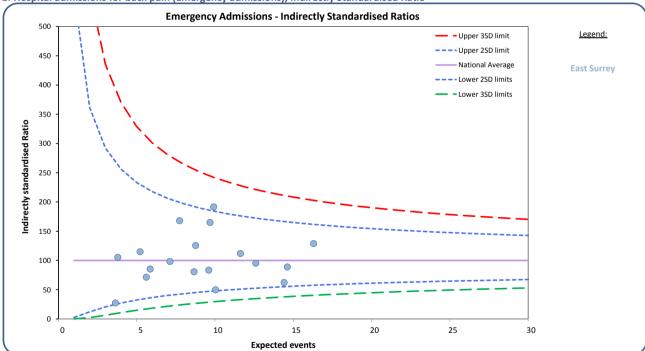
Similarly, for emergency admissions there is wide variation across the CCGs in the region, with High Weald Lewes Havens CCG in the lowest quintile to Surrey Heath CCG in the highest quintile nationally.

## 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 East Surrey







## 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.

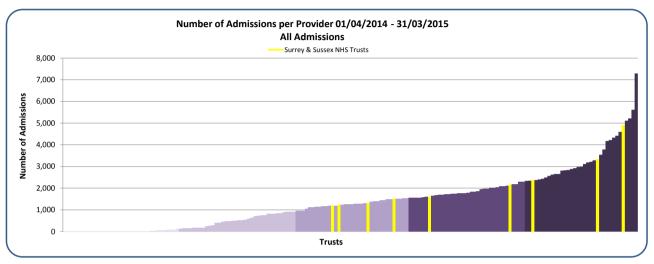
# 4. Indirectly Standardised Ratios for Elective & Emergency Admissions for Back & Radicular Pain, by GP Practice East Surrey

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.

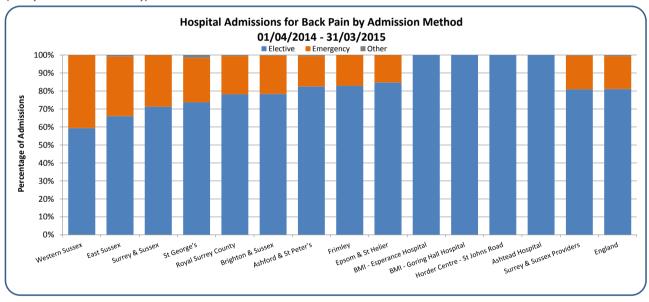
					Elective			Emergency	
<b>Practice Code</b>	Practice Name	ccg	Population 15+	Observed	Expected	Ratio	Observed	Expected	Ratio
H81005	Pond Tail Surgery	09L	5,978	28	33.10	84.59	7	7.13	98.17
H81023	Lingfield Surgery	09L	8,716	48	47.37	101.33	<6	10.04	49.80
H81030	Greystone House Surgery	09L	10,501	91	51.86	175.46	13	11.63	111.79
H81037	Birchwood Medical Practice	09L	12,711	45	65.37	68.84	13	14.62	88.90
H81045	Caterham Valley Med.Pract	09L	7,558	34	39.06	87.04	11	8.76	125.53
H81046	Wayside Medical Practice	09L	3,305	12	18.16	66.10	<6	3.80	105.29
H81048	Holmhurst Medical Centre	09L	7,358	37	32.54	113.71	13	7.74	168.01
H81055	Hawthorns Surgery	09L	7,158	29	38.24	75.84	7	8.67	80.76
H81056	Oxted Health Centre	09L	13,754	75	75.20	99.73	21	16.30	128.83
H81058	Woodlands Road Medical Centre	09L	9,044	25	42.46	58.88	8	9.60	83.31
H81060	Townhill Medical Practice	09L	11,066	45	56.93	79.04	12	12.61	95.18
H81083	Moat House Surgery	09L	8,676	37	42.69	86.67	16	9.69	165.14
H81089	Wall House	09L	12,362	49	63.74	76.88	9	14.42	62.42
H81101	Whyteleafe Surgery	09L	4,825	23	23.27	98.86	6	5.22	114.95
H81116	Elizabeth House Medical Practice	09L	4,660	25	25.87	96.62	<6	5.61	71.27
H81119	Warlingham Green Med Prac	09L	8,849	39	44.95	86.77	19	9.92	191.52
H81638	Smallfield Surgery	09L	5,237	26	27.50	94.53	<6	5.86	85.38
H81667	South Park Surgery	09L	3,454	16	15.94	100.39	<6	3.64	27.44

- 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)

Frimley	4,899	Western Sussex	1,507
Epsom & St Helier	3,345	Royal Surrey County	1,307
Brighton & Sussex	2,355	Surrey & Sussex	1,221
St George's	2,164	East Sussex	1,188
Ashford & St Peter's	1,604		
Surrey & Sussex NHS Trusts	19,590	England	251,444



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	Other Functions	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 pain, by injection type and treatment specialty (national data)

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.

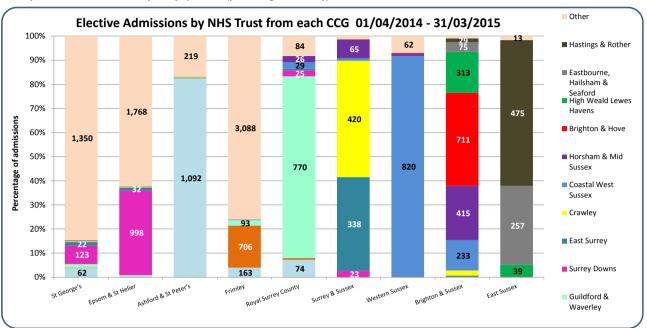
The second table shows the different types of injections being undertaken within each of the treatment function codes and demonstrates that nationally over 62% (104,751) of injections take place within Pain Management/Anaesthetics and 25% of injections are undertaken within Trauma and Orthopaedics.

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.

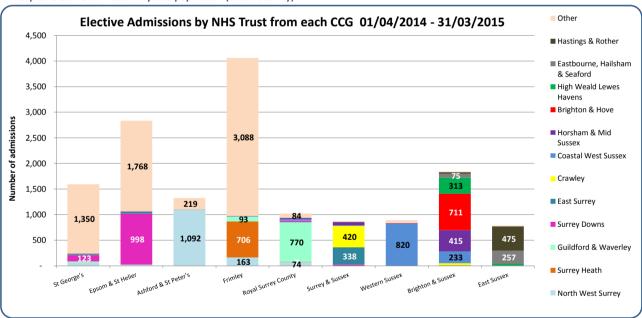
#### **Hospital Trust activity from CCGs**

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.

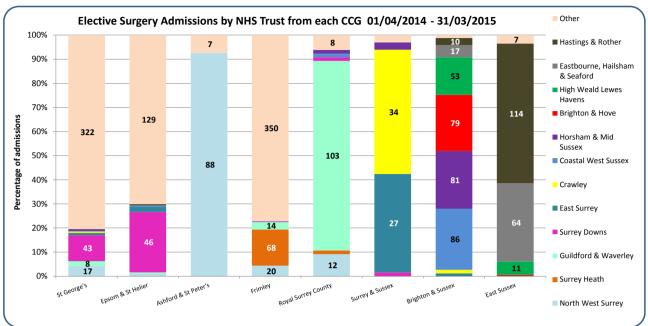
The two highest volume NHS Trusts used by the Surrey & Sussex CCGs are Frimley and Epsom & St Helier who also admit patients from several different CCGs outside of this region. St George's Trust is located outside of the Surrey & Sussex CCGs boundary so the majority of their activity comes from CCGs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

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

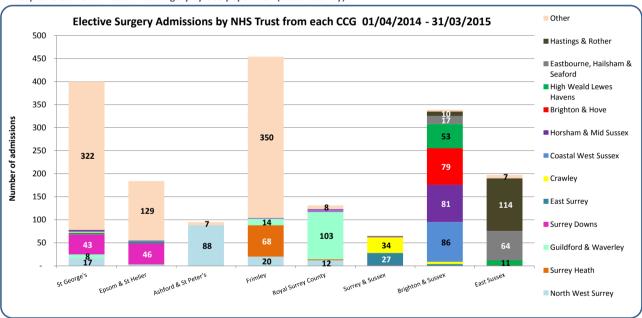
#### **Hospital Trust activity from CCGs**

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.

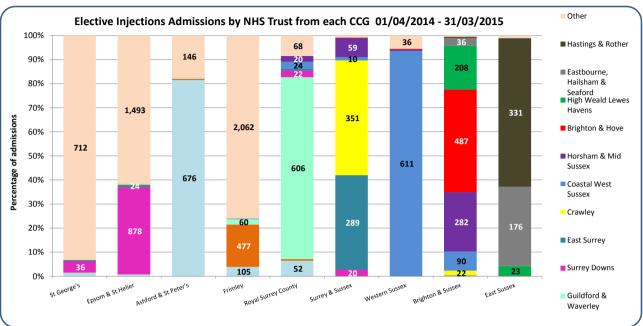
The two highest volume NHS Trusts used by the Surrey & Sussex CCGs are Frimley and St George's who also admit patients from several different CCGs outside of this region. St George's Trust is located outside of the Surrey & Sussex CCGs boundary so the majority of their activity comes from CCGs outside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

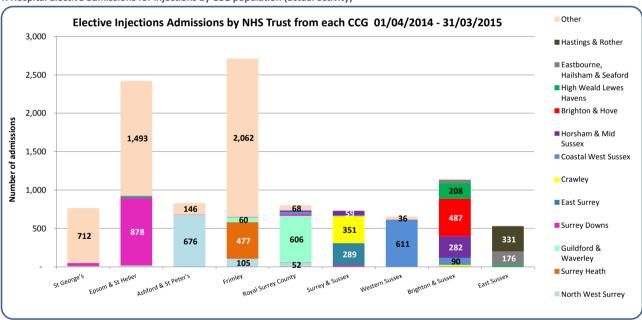
### **Hospital Trust activity from CCGs**

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?

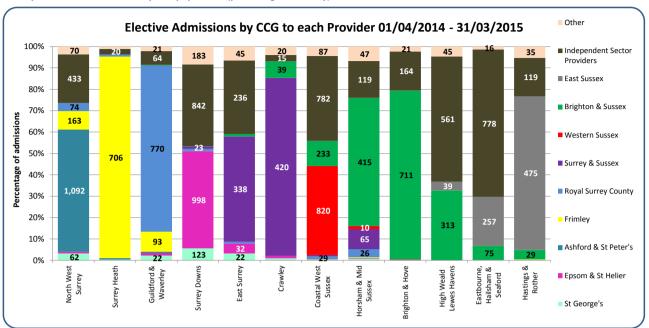
There is variation between hospital trusts in terms of the number of patients from each of the CCGs that are admitted for injections for back and radicular pain.

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.

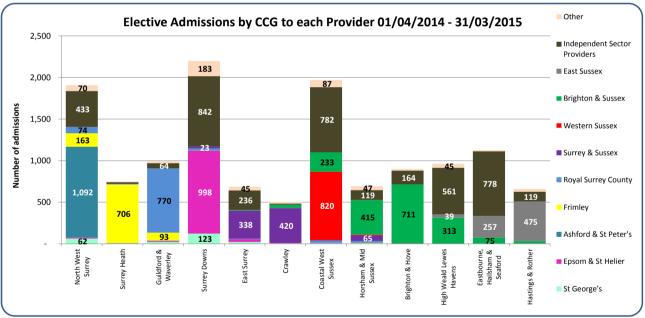
The data is shown in two ways, indicating both the proportion and number of admissions relating to each CCG.

## **CCG** activity to Hospital Trust

- 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.

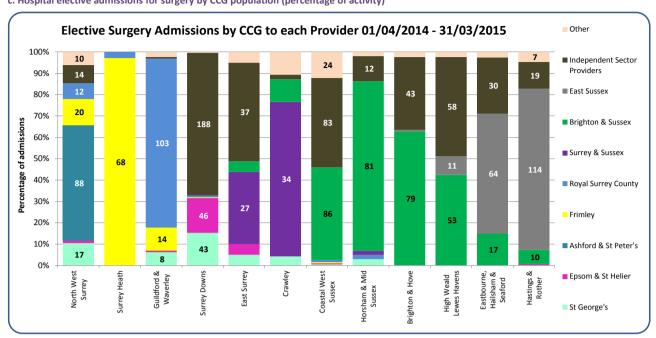
Activity is highest for Surrey Downs CCGs and patients from this CCGs were admitted to at least NHS Trusts and frequently to Independent Sector Providers (842 admissions).

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

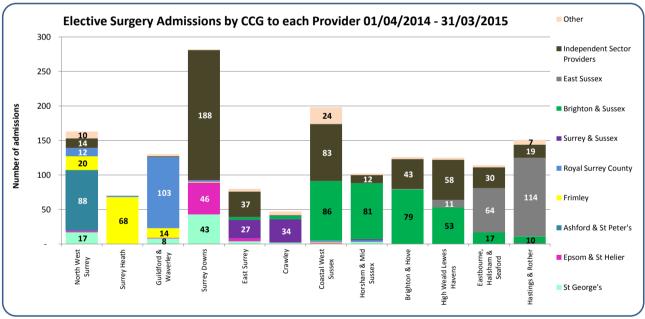
The data is shown in two ways, indicating both the proportion and amount of activity relating to each hospital trust.

## **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?

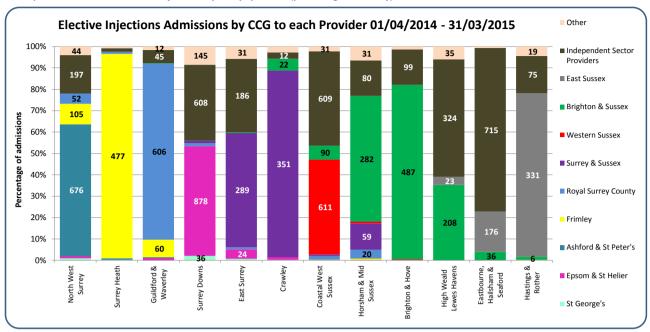
There is variation between CCGs in terms of the number of hospital trusts to which their patients are admitted for spinal surgery.

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).

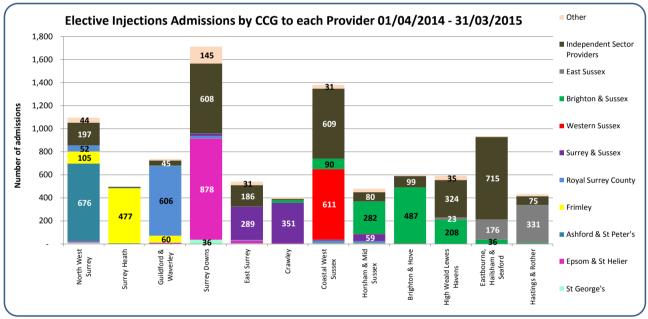
The data is shown in two ways, indicating both the proportion and amount of activity relating to each hospital trust.

### **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.

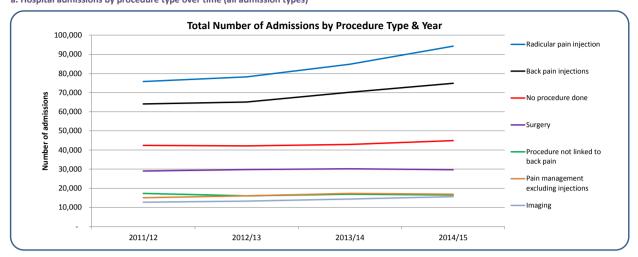
Activity is highest for Surrey Downs CCGs and patients from this CCGs were admitted to at least three NHS Trusts and frequently to Independent Sector Providers (608 admissions).

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

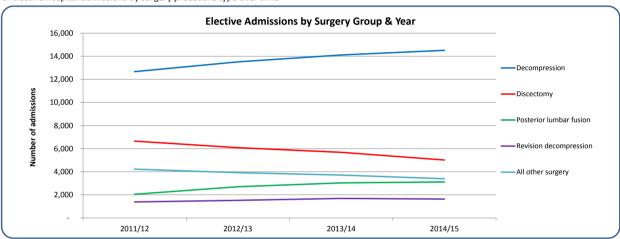
The data is shown in two ways, indicating both the proportion and amount of activity relating to each hospital trust.

#### Hospital Trust activity (national level)

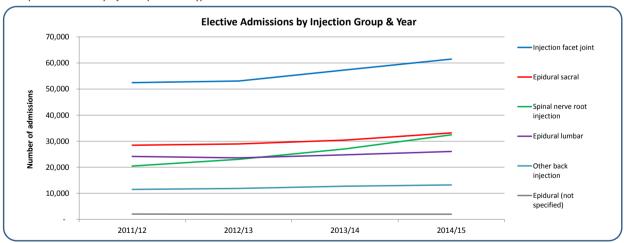
8. Hospital admissions for low back and radicular pain in people aged 16 years and over (1st April 2011 - 31st March 2015) a. Hospital admissions by procedure type over time (all admission types)



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.

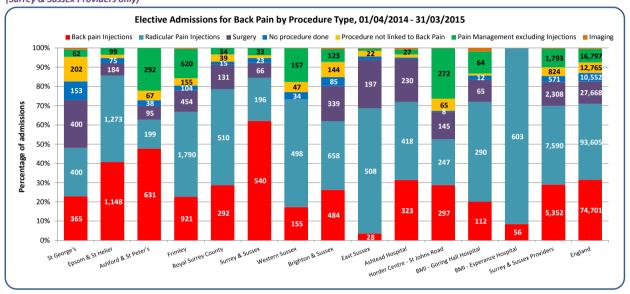
The charts in sections b and c show the elective admissions over time specifically for different groups of surgery procedures and injections.

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

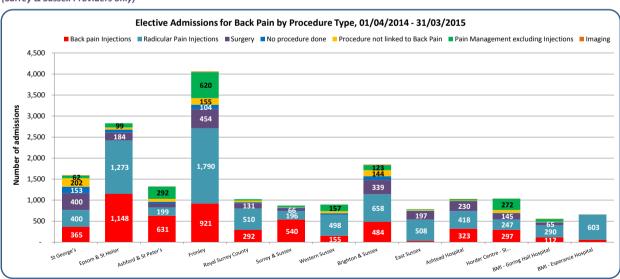
a. Elective hospital admissions by procedure type (national level including all providers)

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	11.79
Pain Management excluding Injections	13,150	3,647	16,797	7.19
Procedure not linked to Back Pain	8,197	4,568	12,765	5.49
No procedure done	6,060	4,492	10,552	4.49
Imaging	712	373	1,085	0.59
Other Non-Surgical	53	30	83	0.09
Total	134,448	102,808	237,256	1009

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)



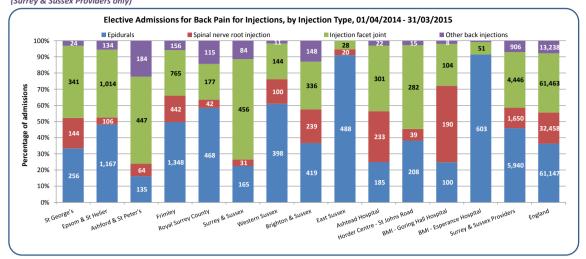
## What is the data telling us?

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).

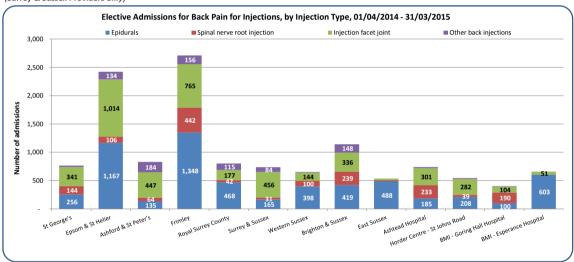
Four of the NHS Trusts used by the Surrey & Sussex CCGs have a higher proportion of elective activity for injections than the England rate (approx. 70%) and it is possible that the variation may be even greater due to differences in the point of delivery of care across hospital Trusts (for example it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

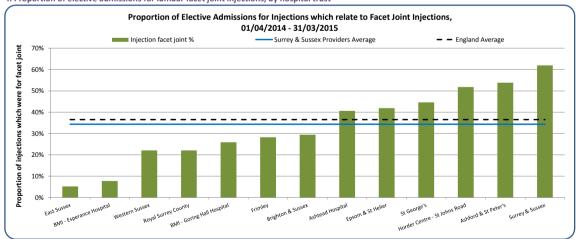
9. Elective hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015) d. Number of elective admissions for injections per hospital Trust, by injection type (percentage of activity) (Surrey & Sussex Providers only)



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



f. Proportion of elective admissions for lumbar facet joint injections, by hospital trust



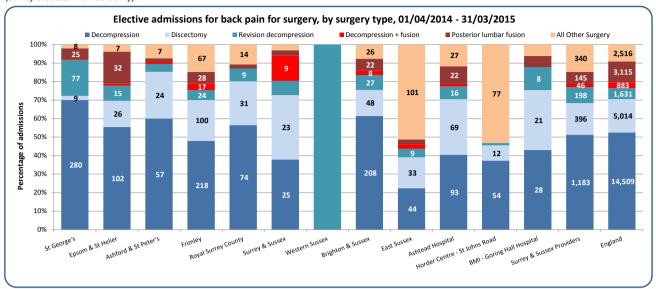
#### What is the data telling us?

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.

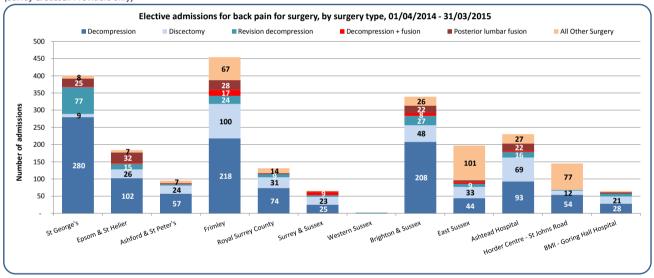
The data is shown in two ways, indicating both the proportion of overall activity and number of episodes for each Provider.

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?

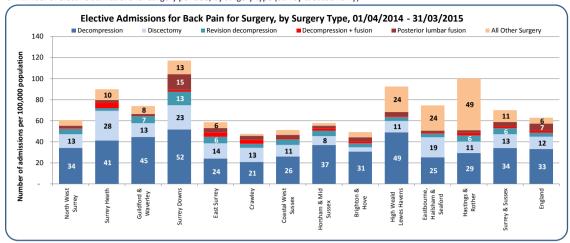
The charts above show the range in activity relating specifically to elective admissions for surgery, by type of surgery, for the providers used by the Surrey & Sussex CCGs.

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.

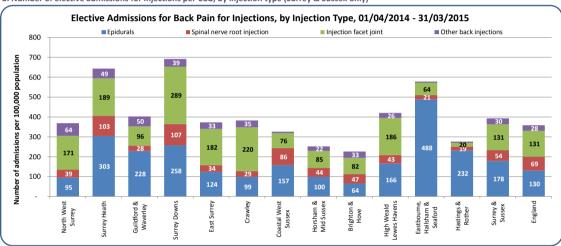
The data is shown in two ways, indicating both the proportion and amount of activity relating to each surgery type.

#### CCG activity by back pain procedure group

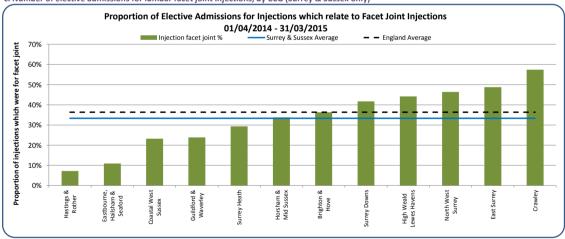
10. Elective hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015) a. Number of elective admissions for surgery per CCG, by surgery type (Surrey & Sussex only)



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



c. Number of elective admissions for lumbar facet joint injections, by CCG (Surrey & Sussex only)



#### What is the data telling us?

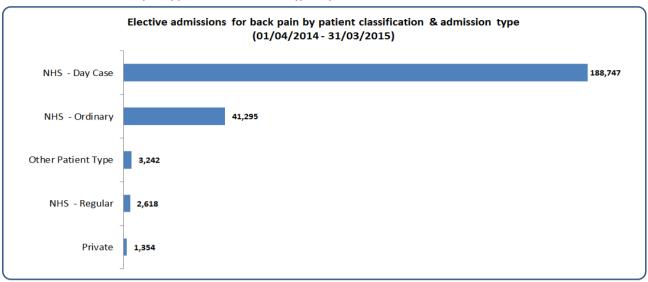
Chart 9a shows the range in the activity rate relating specifically to elective admissions for surgery, by type of surgery, for the Surrey & Sussex CCGs, with chart 9b showing the same for injections.

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

- 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

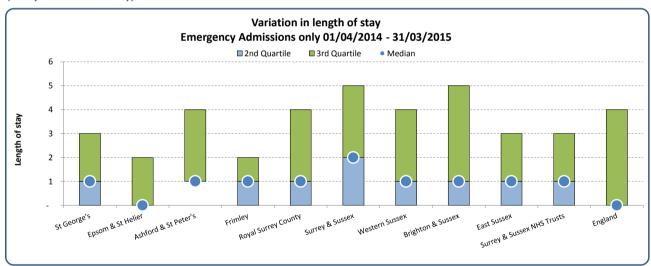


Other Patient Types are Amenity patients and Category II patients, and where the Administrative Category is unknown.

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	ctive	Eme	ergency	Other		Tot	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)

													Pair	1			T	
									Pro	Procedure not			Management					
			Rad	icular pain	Bac	k pain	No procedure lin		linked to back				excluding		Other Non-			
Provider Name	Surg	gery	Inje	ctions	Inje	Injections d		done pain I		Ima	ging	Inje	ctions	Surgical		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.

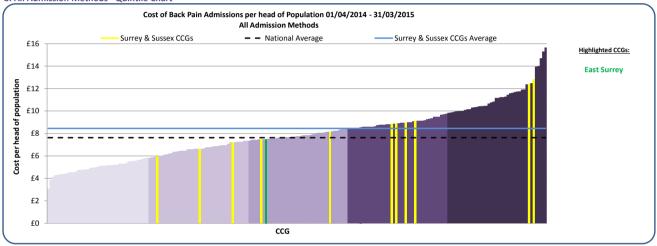
The surgery procedures group accounts for almost 38% of the total cost of all procedures, and the cost of injections is an additional 29% of the total.

## **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 Admissions				Elective Admissions			Emergency Admissions				
													Registered
	Cos	t per head			Cos	st per head			Со	st per head			Population
Responsible CCG Name	of P	opulation	To	tal Cost	of F	Population	Tot	tal Cost	of	Population	Tota	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

													Pain					
									Proc	edure not			Man	agement			١.	
			Radi	cular pain	Back	pain	No pro	cedure	linke	d to back			excl	uding	Other I	Non-		otal Cost
Responsible CCG Name	Surg	gery	Injec	tions	Injec	tions	done		pain		Imagi	ing	Inje	ctions	Surgica	ı		
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.

(Blue=NHS Trust & Green=Independent Sector Provider)

(Blue=N	HS Trust & Green=Independent Sector Provider)	Flor	ctive Admissio	ne	Emergency	Other Admission	
Code	Provider Name	Surgery	Injections	Other	Admissions	Types	Total
RXH	BRIGHTON AND SUSSEX UNIVERSITY HOSPITALS NHS TRUST	335	1,136	356	491	7	2,325
RYR RTK	WESTERN SUSSEX HOSPITALS NHS FOUNDATION TRUST	<6 88	617 684	213 333	596	<6 7	1,429
RVR	ASHFORD AND ST PETER'S HOSPITALS NHS FOUNDATION TRUST EPSOM AND ST HELIER UNIVERSITY HOSPITALS NHS TRUST	55	928	84	232 162	_ ′	1,344 1,229
RA2	ROYAL SURREY COUNTY HOSPITAL NHS FOUNDATION TRUST	123	734	80	245	6	1,188
RTP	SURREY AND SUSSEX HEALTHCARE NHS TRUST	64	730	65	323	<6	1,184
RXC RDU	EAST SUSSEX HEALTHCARE NHS TRUST FRIMLEY HEALTH NHS FOUNDATION TRUST	190 104	530 649	52 220	384 150	10 <6	1,166 1,124
NVC01	ASHTEAD HOSPITAL	219	682	55	-	-	956
	THE HORDER CENTRE - ST JOHNS ROAD	92	364	232	-	-	688
NT413	BMI - THE ESPERANCE HOSPITAL	-	659	<6	-	-	661
NT417 RJ7	BMI - GORING HALL HOSPITAL	65 78	400 53	90 113	-	- 10	555 328
NT212	ST GEORGE'S UNIVERSITY HOSPITALS NHS FOUNDATION TRUST NUFFIELD HEALTH, CHICHESTER HOSPITAL	9	213	113	- 66	18	235
NT431	BMI - THE RUNNYMEDE HOSPITAL	-	30	195	-	-	225
NT241	NUFFIELD HEALTH, WOKING HOSPITAL	14	153	26	-	-	193
RAX NT364	KINGSTON HOSPITAL NHS FOUNDATION TRUST	- 40	115	21	25	-	161
NVC11	SPIRE MONTEFIORE HOSPITAL NORTH DOWNS HOSPITAL	48	96 120	14 <6	-	-	158 127
RJ1	GUY'S AND ST THOMAS' NHS FOUNDATION TRUST	12	63	44	<6	-	124
RAN	ROYAL NATIONAL ORTHOPAEDIC HOSPITAL NHS TRUST	8	50	21	<6	-	80
RWF	MAIDSTONE AND TUNBRIDGE WELLS NHS TRUST	<6	33	<6	28	-	64
NT455 RRV	BMI MOUNT ALVERNIA HOSPITAL UNIVERSITY COLLEGE LONDON HOSPITALS NHS FOUNDATION TRUST	- 6	49 27	8 21	- <6	- <6	57 56
NY601	PAIN MANAGEMENT SOLUTIONS - OAKS PARK PCC	-	42	10	-	-	52
NT309	SPIRE SUSSEX HOSPITAL	13	26	- 1	-	-	39
RYJ	IMPERIAL COLLEGE HEALTHCARE NHS TRUST	7	15	6	8	-	36
RHM	UNIVERSITY HOSPITAL SOUTHAMPTON NHS FOUNDATION TRUST	6	<6 10	12	9	<6	34
RJ6 NT239	CROYDON HEALTH SERVICES NHS TRUST NUFFIELD HEALTH, TUNBRIDGE WELLS HOSPITAL	<6 -	19 19	<6 12	10	_	31 31
NT308	SPIRE GATWICK PARK HOSPITAL	-	29	-	-	-	29
RHU	PORTSMOUTH HOSPITALS NHS TRUST	8	10	6	<6	-	28
RJZ	KING'S COLLEGE HOSPITAL NHS FOUNDATION TRUST	8	10	<6	<6	<6	26
NT218 NT345	NUFFIELD HEALTH, HAYWARDS HEATH HOSPITAL	11	13 11	<6 13	-	-	25 24
NDA01	SPIRE CLARE PARK HOSPITAL VIRGIN CARE SERVICES LTD (BROOK GREEN)		-	10	- <6	- <6	24 17
	BENENDEN HOSPITAL	<6	15	<6	-	-	17
RQM	CHELSEA AND WESTMINSTER HOSPITAL NHS FOUNDATION TRUST	-	<6	<6	<6	-	13
RAS	THE HILLINGDON HOSPITALS NHS FOUNDATION TRUST	-	6	<6	<6	-	11
NT304 NT428	SPIRE SOUTHAMPTON HOSPITAL BMI - THE PRINCESS MARGARET HOSPITAL		8 8	<6 <6	-	-	9
NT436	BMI - SHIRLEY OAKS HOSPITAL	<6	<6	<6	-	-	9
R1H	BARTS HEALTH NHS TRUST	-	<6	<6	<6	-	8
RXQ	BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	-	<6	<6	<6	-	7
NT422 RTH	BMI - THE LONDON INDEPENDENT HOSPITAL	<6 <6	<6	-	-	-	7
NT418	OXFORD UNIVERSITY HOSPITALS NHS TRUST BMI - THE HAMPSHIRE CLINIC	-	- <6	<6 <6	<6	-	6 6
RVV	EAST KENT HOSPITALS UNIVERSITY NHS FOUNDATION TRUST	-	<6	-	<6	-	<6
RWG	WEST HERTFORDSHIRE HOSPITALS NHS TRUST	<6	<6	<6	<6	-	<6
NDJ01	FORUM HOUSE				<6	<6	<6
RD1 RJ2	ROYAL UNITED HOSPITALS BATH NHS FOUNDATION TRUST LEWISHAM AND GREENWICH NHS TRUST	<6	- <6	<6 <6	<6 <6	-	<6 <6
RKE	THE WHITTINGTON HOSPITAL NHS TRUST		<6	-	<6	_	<6
NT411	BMI - THE CLEMENTINE CHURCHILL HOSPITAL	<6	<6	-	-	-	<6
R1G	TORBAY AND SOUTHERN DEVON HEALTH AND CARE NHS TRUST				-	<6	<6
R1K RBA	LONDON NORTH WEST HEALTHCARE NHS TRUST TAUNTON AND SOMERSET NHS FOUNDATION TRUST	- <6	<6	-	<6 <6	-	<6 <6
REF	ROYAL CORNWALL HOSPITALS NHS TRUST	<b>\</b> 0			<6	-	<6
RKB	UNIVERSITY HOSPITALS COVENTRY AND WARWICKSHIRE NHS TRUST	<6	-	-	<6	-	<6
RM2	UNIVERSITY HOSPITAL OF SOUTH MANCHESTER NHS FOUNDATION TRUST				<6	-	<6
RN7	DARTFORD AND GRAVESHAM NHS TRUST	-	<6	-	-	-	<6
RPY RQW	THE ROYAL MARSDEN NHS FOUNDATION TRUST THE PRINCESS ALEXANDRA HOSPITAL NHS TRUST		-	<6 <6	- <6	-	<6 <6
RRJ	THE ROYAL ORTHOPAEDIC HOSPITAL NHS FOUNDATION TRUST	-	<6	<6	-	-	<6
NVC09	NEW HALL HOSPITAL	<6	<6	-	-	-	<6
R1F	ISLE OF WIGHT NHS TRUST				<6	-	<6
RAL RBD	ROYAL FREE LONDON NHS FOUNDATION TRUST  DORSET COUNTY HOSPITAL NHS FOUNDATION TRUST	-	<6	-	- <6	-	<6 <6
RBT	MID CHESHIRE HOSPITALS NHS FOUNDATION TRUST				<6	_	<6
RC9	LUTON AND DUNSTABLE UNIVERSITY HOSPITAL NHS FOUNDATION TRUST				<6	-	<6
RCD	HARROGATE AND DISTRICT NHS FOUNDATION TRUST				<6	-	<6
RD8 RDZ	MILTON KEYNES HOSPITAL NHS FOUNDATION TRUST				<6	-	<6 <6
RGT	THE ROYAL BOURNEMOUTH AND CHRISTCHURCH HOSPITALS NHS FOUNDATION TRUST CAMBRIDGE UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	_	<6	_	<6 -	-	<6
RHW	ROYAL BERKSHIRE NHS FOUNDATION TRUST		· <del>-</del>		<6	-	<6
RJE	UNIVERSITY HOSPITALS OF NORTH MIDLANDS NHS TRUST				<6	-	<6
RK9	PLYMOUTH HOSPITALS NHS TRUST				<6	-	<6
RLQ RN5	WYE VALLEY NHS TRUST HAMPSHIRE HOSPITALS NHS FOUNDATION TRUST				<6 <6		<6 <6
RQX	HOMERTON UNIVERSITY HOSPITAL NHS FOUNDATION TRUST				<6	-	<6
RTE	GLOUCESTERSHIRE HOSPITALS NHS FOUNDATION TRUST	-	<6	-	-	-	<6
RTX	UNIVERSITY HOSPITALS OF MORECAMBE BAY NHS FOUNDATION TRUST				<6	-	<6
RVJ RW3	NORTH BRISTOL NHS TRUST CENTRAL MANCHESTER LINIVERSITY HOSPITALS NHS EQUINDATION TRUST	<6	-	-	-	-	<6 <6
11/1/12	CENTRAL MANCHESTER UNIVERSITY HOSPITALS NHS FOUNDATION TRUST				<6 <6	-	<6 <6
RW6	PENNINE ACUTE HUSPITALS NHS TRUST						
	PENNINE ACUTE HOSPITALS NHS TRUST STOCKPORT NHS FOUNDATION TRUST				<6	-	<6
RW6						-	<6 <6 <6

## 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 Admissi	ons	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

	DOCUMENT GOVERNANCE					
Document name	Back Pain Report					
ocument type Final						
Version	0.6					
Date	30/06/2016					
<b>Document Classification</b>	Confidential					
Prepared on behalf of	GIRFT					
Created by	Adam Fearing, Andrea Brown & Liz Lingard					
Approved by Epidemiologist	Liz Lingard					
Approved by Project Director	Helen Ridley					
Peer Reviewed by (if appropriate)						
Originating organisation	NEQOS					
Website of originating organisation	www.neqos.nhs.uk -					
	Please contact the NEQOS advisory service through this web link for further					
	information or to enquire about NEQOS undertaking similar work.					
Contact email address	neqos@nhs.net_					
Public file location	N/A					
Internal file location	G:\Project Management\Project Mgt 15-16\Back Pain					

	VERSION CONTROL						
Version	Document Type	Date	Amendments	Ву			
0.1	First Draft	10/03/2016		Adam Fearing, Liz Lingard			
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			
0.4	Draft V4	03/05/2016	Further minor amendments	Adam Fearing			
0.5	Draft V5	11/05/2016	Further minor amendments	Adam Fearing			
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?	