Back Pain Report

Enfield

June 2016

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 North East London 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

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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 North East London Region are:

- Royal National Orthopaedic Hospital NHS Trust
- North Middlesex University Hospital NHS Trust
- The Whittington Hospital NHS Trust
- Royal Free London NHS Foundation Trust
- University College London Hospitals NHS Foundation Trust
- Homerton University Hospital NHS Foundation Trust
- Barts Health NHS Trust
- Barking, Havering & Redbridge University Hospitals NHS Trust

The Independent Sector Providers included for the North East London Region are:

- BMI - The Kings Oak
- Hospital Spire Roding Hospital
- BMI - The London Independent Hospital

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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

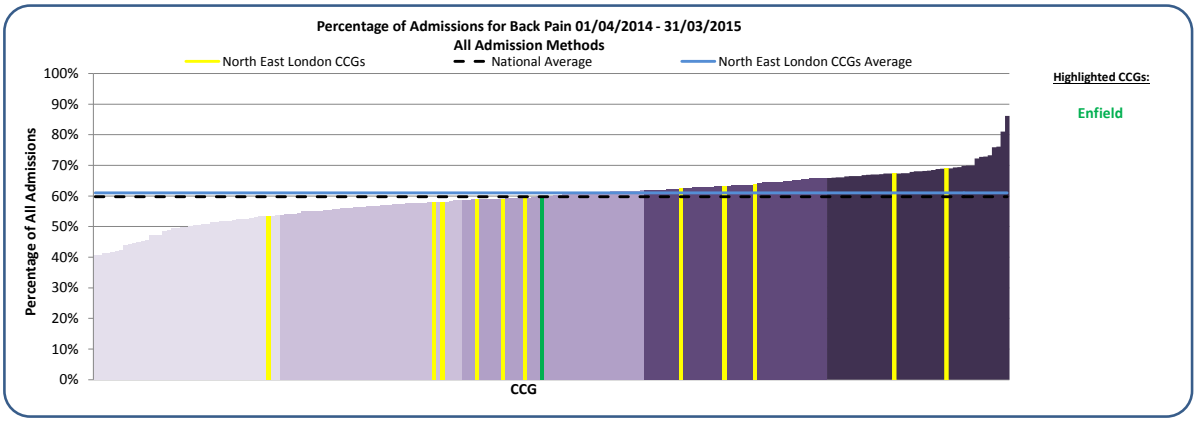
England	Back	Radicular	Total	% Back	% Radicular
Elective	134,448	102,808	**237,256**	56.7%	43.3%
Emergency	39,331	14,309	**53,640**	73.3%	26.7%
Other	771	951	**1,722**	44.8%	55.2%
Total	**174,550**	**118,068**	**292,618**	**59.7%**	**40.3%**

North East London CCGs	Back	Radicular	Total	% Back	% Radicular
Elective	7,517	5,255	**12,772**	58.9%	41.1%
Emergency	1,980	799	**2,779**	71.2%	28.8%
Other	17	30	**47**	36.2%	63.8%
Total	**9,514**	**6,084**	**15,598**	**61.0%**	**39.0%**

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)

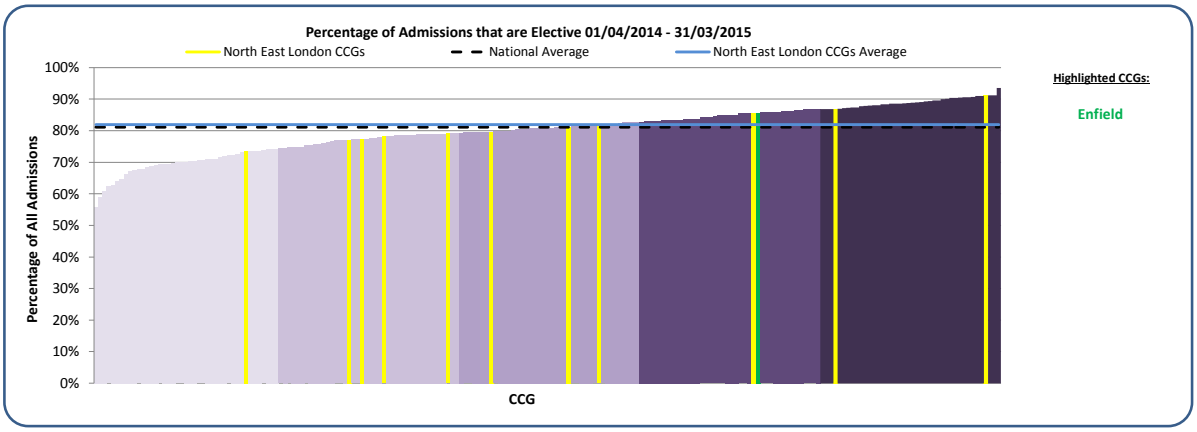
Haringey	53.5%	Enfield	60.0%
Waltham Forest	57.9%	Havering	62.6%
Redbridge	58.0%	Barking & Dagenham	63.3%
Barnet	58.9%	Tower Hamlets	64.0%
Islington	59.1%	City & Hackney	67.4%
Camden	59.4%	Newham	69.0%
North East London CCGs	**61.0%**	**England**	**59.8%**



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

City & Hackney	73.4%	Tower Hamlets	81.3%
Newham	77.1%	Barnet	82.0%
Waltham Forest	77.3%	Redbridge	85.6%
Camden	78.1%	Enfield	85.6%
Islington	79.2%	Barking & Dagenham	86.9%
Haringey	79.7%	Havering	91.2%
North East London CCGs	**81.9%**	**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 15,598 (5.3%) of these for patients registered within the North East London 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 North east London the proportion of admissions for back pain ranges from 53% to 69%.

Nationally, approximately 81% of back and radicular pain admissions are elective, and the North East London CCGs have a slightly higher proportion (82%). At a CCG level in North East London, the proportion of elective admissions for these populations ranges from 73% in City & Hackney to 91% in Havering.

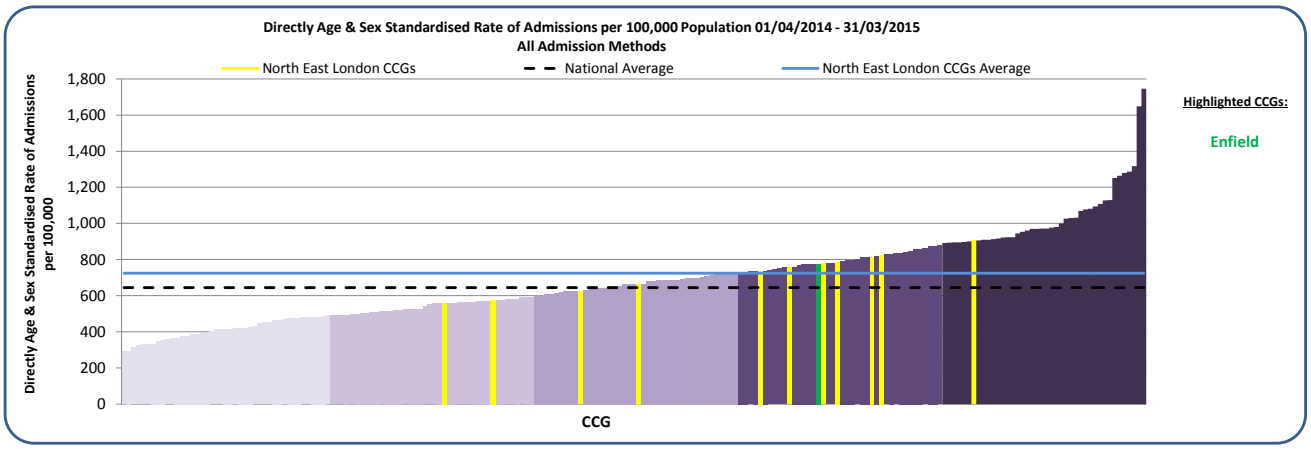
Clinical Commissioning Group (CCG) activity

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

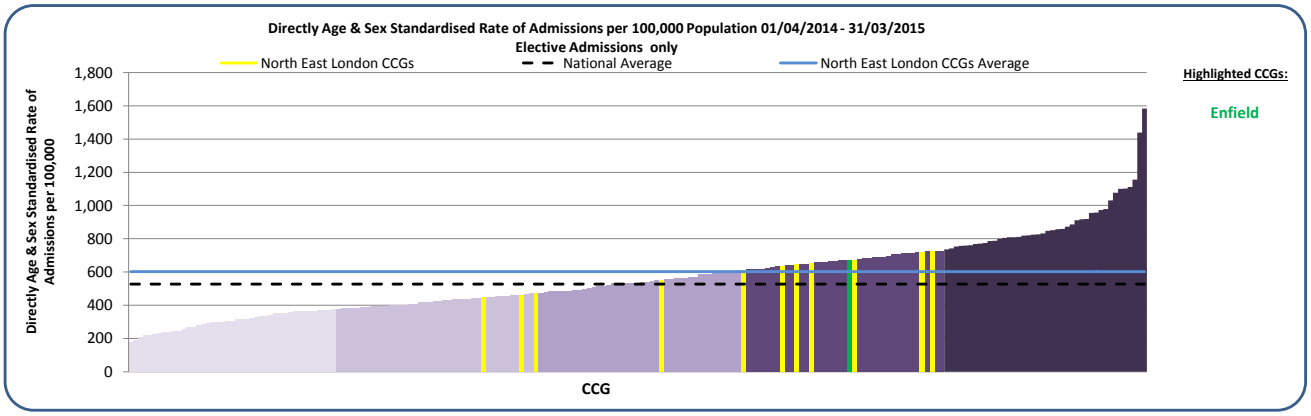
a. Hospital admissions for back pain by CCG (all admission methods), Directly Age & Sex Standardised Admission rate per 100,000 population

CCG name	All	Elective	Emergency	CCG name	All	Elective	Emergency
Islington	905.3	720.4	180.6	Redbridge	757.0	655.6	99.7
Barking & Dagenham	825.0	722.7	101.4	Havering	736.6	672.8	63.3
Waltham Forest	815.9	637.7	174.2	Barnet	664.0	552.7	108.9
Newham	785.7	612.1	170.8	City & Hackney	625.1	473.9	149.7
Tower Hamlets	778.0	645.7	127.5	Haringey	574.9	461.7	112.9
Enfield	777.6	669.5	105.0	Camden	560.1	446.2	111.0
North East London CCGs	724.9	601.9	120.8	England	645.6	526.5	115.4

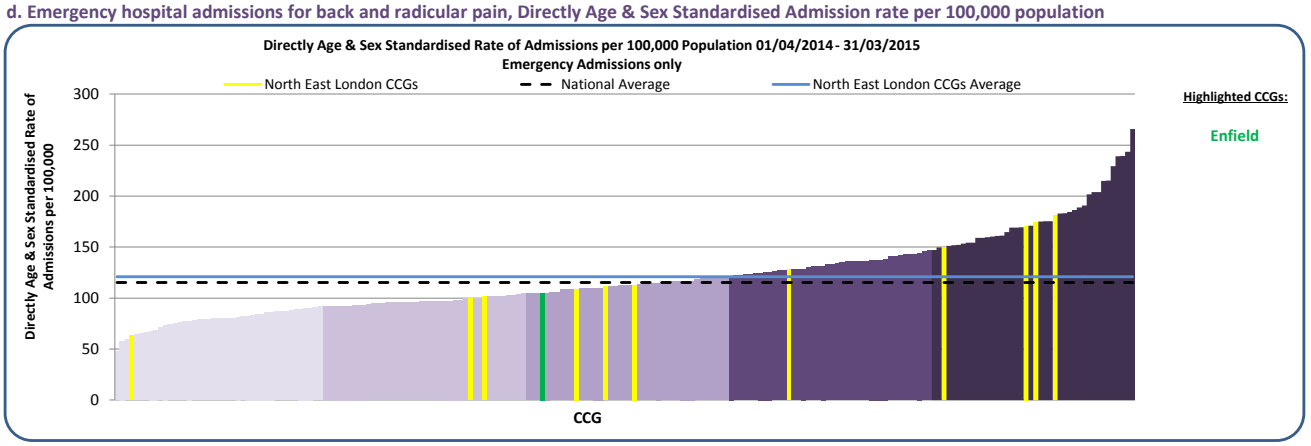
b. Hospital admissions for back and radicular pain (all admission methods), Directly Age & Sex Standardised Admission rate per 100,000 population



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 variation in elective admission rates across the CCGs within North East London between the regional lowest (Camden CCG) and the highest CCG for the region (Barking & Dagenham CCG).

For emergency admissions there is much wider variation across the CCGs in the region, ranging from the regional lowest (Havering CCG) to the highest in the region (Islington CCG).

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

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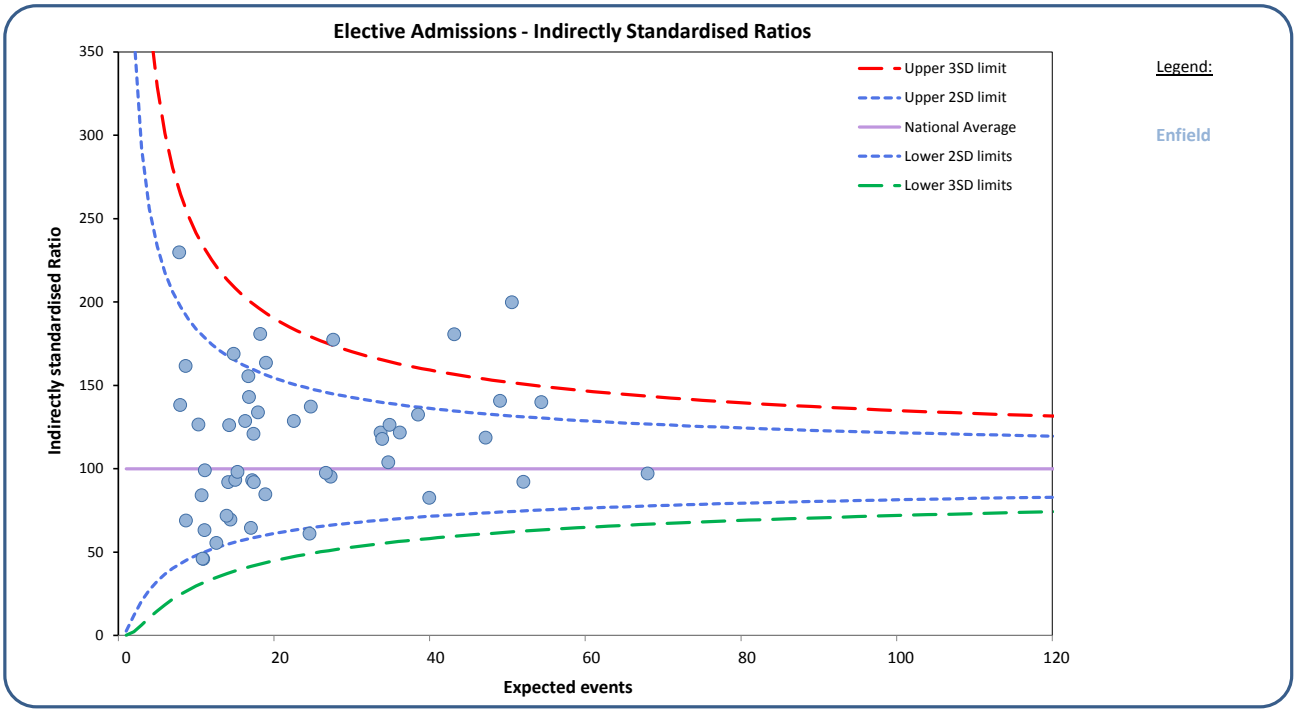
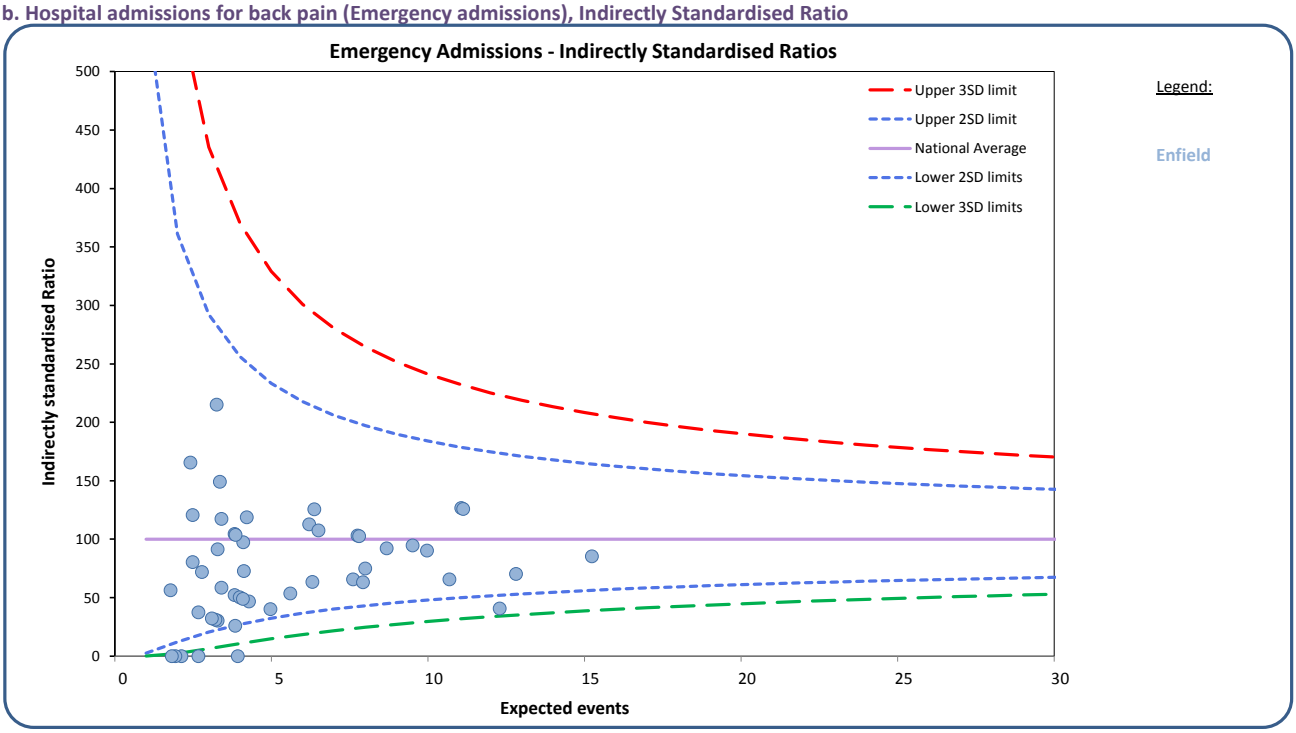


b. Hospital admissions for back pain (Emergency admissions), Indirectly Standardised Ratio



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

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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.

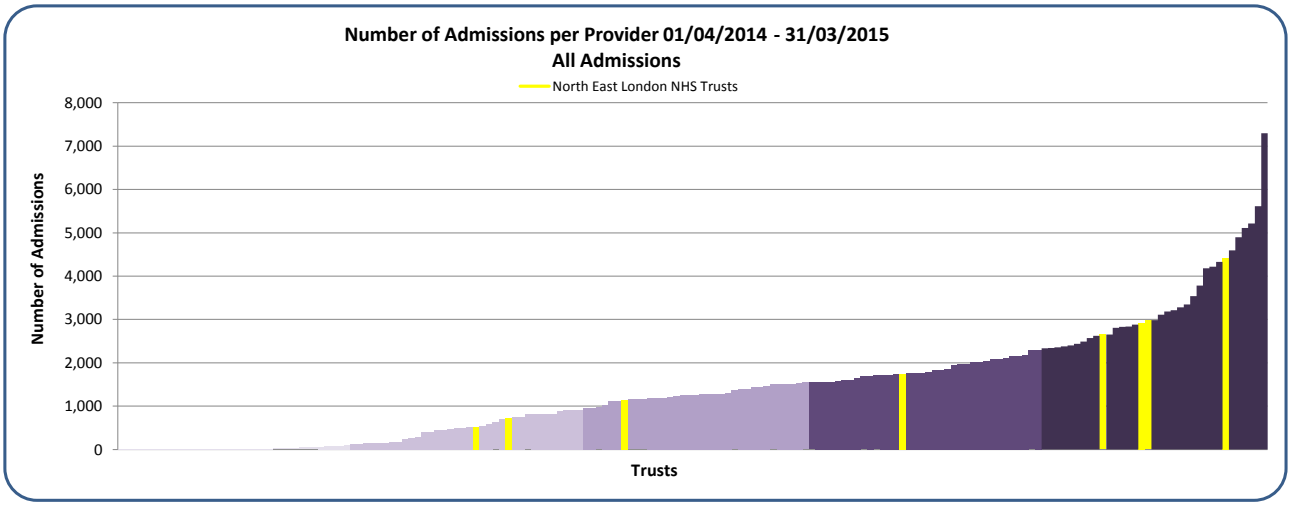
				Elective			Emergency		
Practice Code	Practice Name	CCG	Population 15+	Observed	Expected	Ratio	Observed	Expected	Ratio
F85002	Forest Rd Group Practice	07X	9,279	33	39.94	82.62	9	9.51	94.61
F85003	Riley House Surgery	07X	7,363	41	33.69	121.72	8	7.76	103.13
F85004	Eagle House Surgery	07X	10,615	69	49.04	140.69	14	11.06	126.55
F85010	Keats Surgery	07X	3,645	24	17.93	133.87		3.93	
F85011	Bowes Medical Centre	07X	2,324	13	10.28	126.42	<6	2.49	80.31
F85015	Dover House Surgery	07X	3,662	11	17.03	64.59	<6	3.82	104.60
F85016	Cockfosters Medical Ctre	07X	5,213	26	27.29	95.27	7	6.21	112.78
F85020	The Woodberry Practice	07X	6,920	44	34.83	126.32	<6	7.61	65.74
F85023	The Ordnance Unity Centre For Health	07X	3,221	13	14.14	91.94	<6	3.29	30.42
F85024	Dean House Surgery	07X	1,700	11	7.95	138.30	<6	1.78	56.27
F85025	White Lodge Medical Practice	07X	9,362	56	47.17	118.71	7	10.69	65.50
F85027	Carlton House Surgery	07X	9,845	101	50.55	199.82	14	11.13	125.77
F85029	Abernethy House Surgery	07X	10,435	76	54.33	139.89	<6	12.30	40.66
F85032	Southgate	07X	6,879	40	33.91	117.94	8	7.80	102.54
F85033	Winchmore Hill Practice	07X	13,243	66	68.00	97.06	13	15.24	85.29
F85035	Highlands Practice	07X	7,363	51	38.51	132.44	8	8.68	92.11
F85036	Willow House Surgery	07X	2,911	10	14.40	69.43	<6	3.28	91.45
F85039	Rainbow Practice	07X	3,104	10	13.91	71.88	<6	3.22	31.10
F85043	Boundary Court Surgery	07X	2,415	<6	10.91	45.85	<6	2.49	120.54
F85044	The Bounces Road Surgery	07X	3,697	26	16.73	155.41	<6	3.82	52.33
F85048	Moorfield Road Health Ctr	07X	3,206	25	14.80	168.87	<6	3.35	149.12
F85053	Park Lodge Medical Centre	07X	7,277	44	36.16	121.69	6	8.00	75.01
F85055	Connaught Surgery	07X	3,762	16	18.88	84.75	<6	4.11	97.44
F85058	Nightingale House Surgery	07X	4,768	29	22.56	128.57	<6	4.97	40.27
F85072	Grovelands Medical Centre	07X	7,321	36	34.68	103.79	<6	7.93	63.05
F85076	Freezywater Primary Care Centre	07X	9,711	78	43.17	180.69	9	9.97	90.30
F85625	Bincote Surgery	07X	4,994	34	24.75	137.36	<6	5.61	53.48
F85634	East Enfield Practice	07X	2,301	14	8.66	161.73		2.13	
F85642	The North London Health Centre	07X	5,909	26	26.66	97.51	<6	6.31	63.41
F85650	Morecambe Surgery	07X	3,629	16	17.20	93.04	<6	3.84	26.02
F85652	Southbury Surgery	07X	3,606	24	16.78	143.07	<6	3.86	103.70
F85654	Brick Lane Surgery	07X	3,119	18	14.26	126.20	7	3.26	215.05
F85656	Bush Hill Park Med Centre	07X	1,780	6	8.70	68.94		1.94	
F85663	Latymer Road Surgery	07X	4,003	31	18.96	163.50	<6	4.21	118.73
F85666	Dr Me Silver's Practice	07X	3,271	14	15.02	93.23	<6	3.41	58.65
F85676	Boundary House Surgery	07X	3,874	16	17.40	91.93	<6	3.98	50.19
F85678	Town Surgery	07X	2,649	11	11.11	99.00	<6	2.67	37.48
F85681	Green Street Surgery	07X	1,739	18	7.83	229.76		1.83	
F85682	Chalfont Road Surgery	07X	3,615	15	15.29	98.07	<6	3.41	117.36
F85684	Curzon Avenue Surgery	07X	4,438	33	18.24	180.92	<6	4.29	46.66
F85686	Trinity Avenue Surgery	07X	2,196	7	11.08	63.16	<6	2.42	165.58
F85687	Oakwood Medical Centre	07X	5,950	49	27.63	177.34	7	6.50	107.65
F85700	Arnos Grove Medical Centr	07X	2,711	<6	10.85	46.09	<6	2.78	71.93
F85701	Gillan House Surgery	07X	6,020	15	24.59	61.01	8	6.38	125.45
F85703	Lincoln Road Med Practice	07X	4,258	21	16.32	128.68	<6	4.09	48.87
F85707	Enfield Island Surgery	07X	2,855	9	10.69	84.15		2.67	
Y00057	Angel Surgery	07X	3,255	7	12.61	55.50	<6	3.10	32.29
Y00612	Green Cedars Medical Centre	07X	4,350	21	17.35	121.01	<6	4.12	72.85
Y03402	Evergreen Primary Care Centre	07X	13,187	48	52.05	92.22	9	12.81	70.24

Hospital Trust activity

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

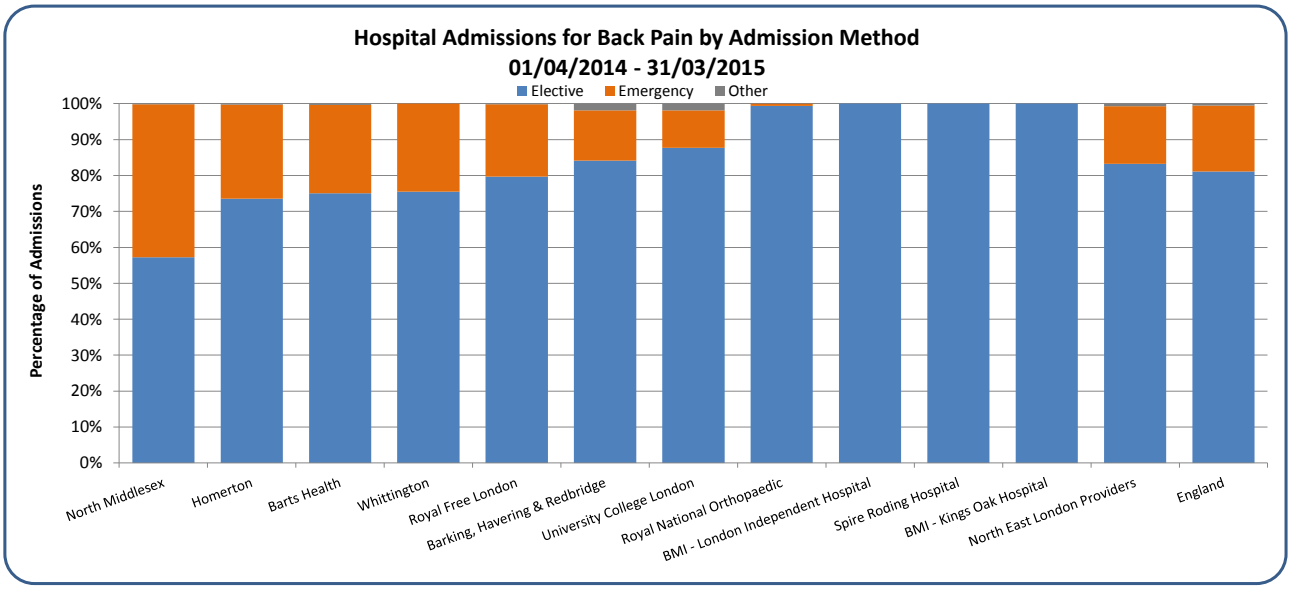
a. Number of hospital admissions for back pain (all admission methods, NHS Trusts only)

Barts Health	4,421	Royal National Orthopaedic	1,739
Royal Free London	2,981	Whittington	1,144
University College London	2,922	Homerton	718
Barking, Havering & Redbridge	2,652	North Middlesex	517
North East London NHS Trusts	17,094	England	251,444



b. Number of admissions per hospital Trust, by admission method

(North East London 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. Four of the eight NHS Trusts are in the highest quintile nationally with Barts Health Trust having the highest activity in this region.

The proportion of hospital activity for back pain which is classed as elective care for North East London is slightly higher than the England proportion. However at NHS Trust level the proportion varies between 57% at North Middlesex Trust to 99% at Royal National Orthopaedic Trust. All NHS activity at the Independent Sector Providers is classed as elective.

Hospital Trust activity

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
(North East London Providers only)

Provider Name	Pain Management & Anaesthetics	Trauma & Orthopaedics	Spinal Surgery Service	Interventional Radiology	Neurosurgery	Other Functions	Total
Royal National Orthopaedic	604	24	1,037	-	-	63	**1,728**
North Middlesex	247	<6	-	-	-	44	**291**
Whittington	370	488	-	-	-	6	**864**
Royal Free London	1,196	1,002	-	-	-	176	**2,374**
University College London	828	<6	-	787	891	55	**2,561**
Homerton	521	-	-	-	-	7	**528**
Barts Health	1,742	1,289	-	8	258	21	**3,318**
Barking, Havering & Redbridge	1,967	<6	-	-	246	16	**2,229**
BMI - Kings Oak Hospital	464	95	-	-	-	<6	**559**
Spire Roding Hospital	415	65	-	-	175	-	**655**
BMI - London Independent Hospital	157	335	-	-	297	<6	**789**
Total	**8,511**	**3,298**	**1,037**	**795**	**1,867**	**388**	**15,896**

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 Royal National Orthopaedic Trust the highest volume of activity is recorded within Spinal Surgery Service. University College London Trust has the highest activity for Neurosurgery with very few admissions to Trauma & Orthopaedics.

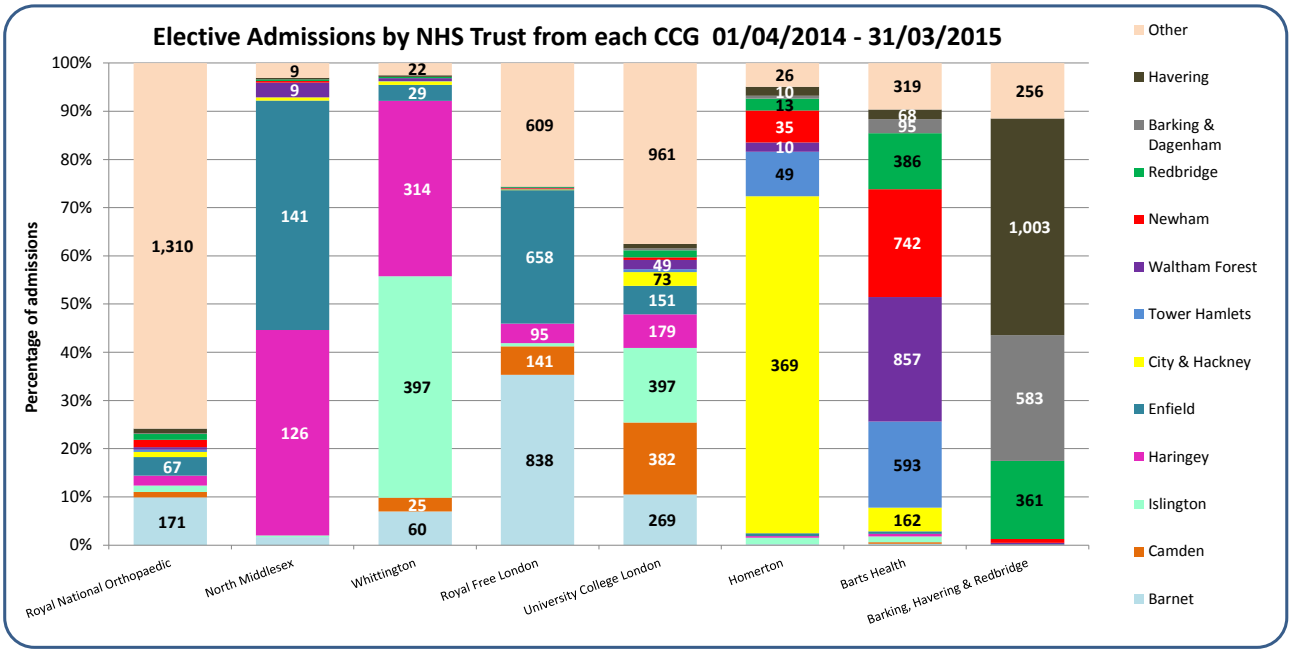
The second table shows the different types of injections being undertaken within each of the treatment function codes and demonstrates that nationally over 62% (104,751) of injections take place within Pain Management/Anaesthetics and 25% of injections are undertaken within Trauma and Orthopaedics.

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.

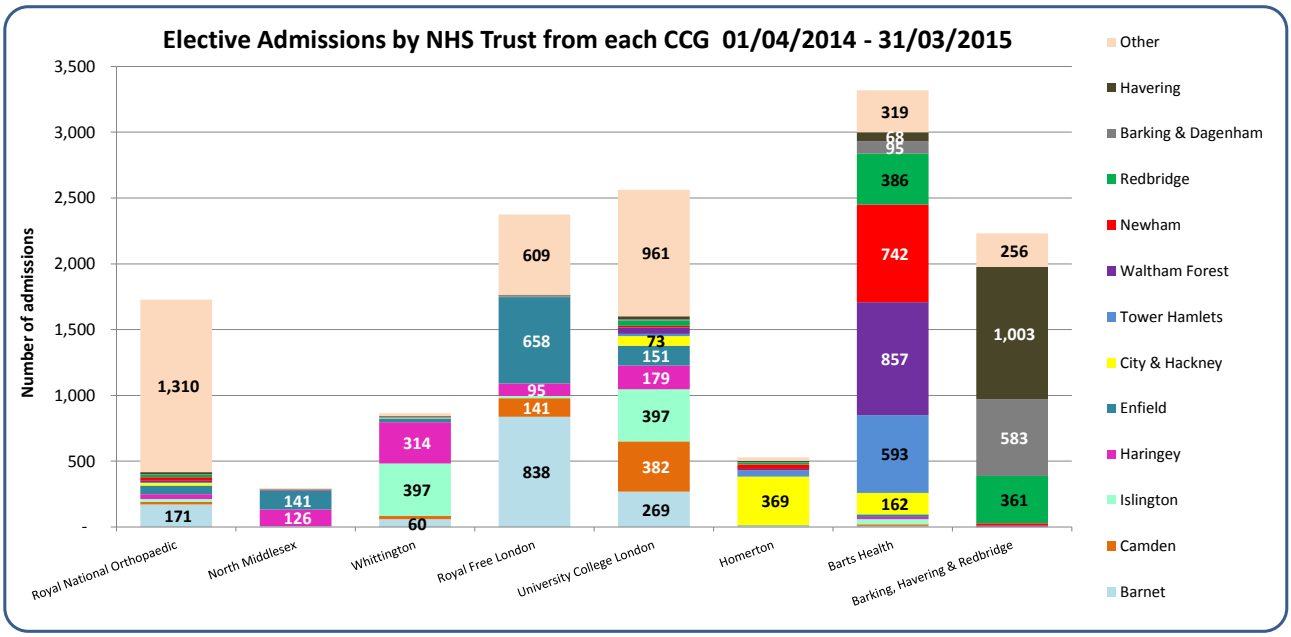
Hospital Trust activity from CCGs

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.

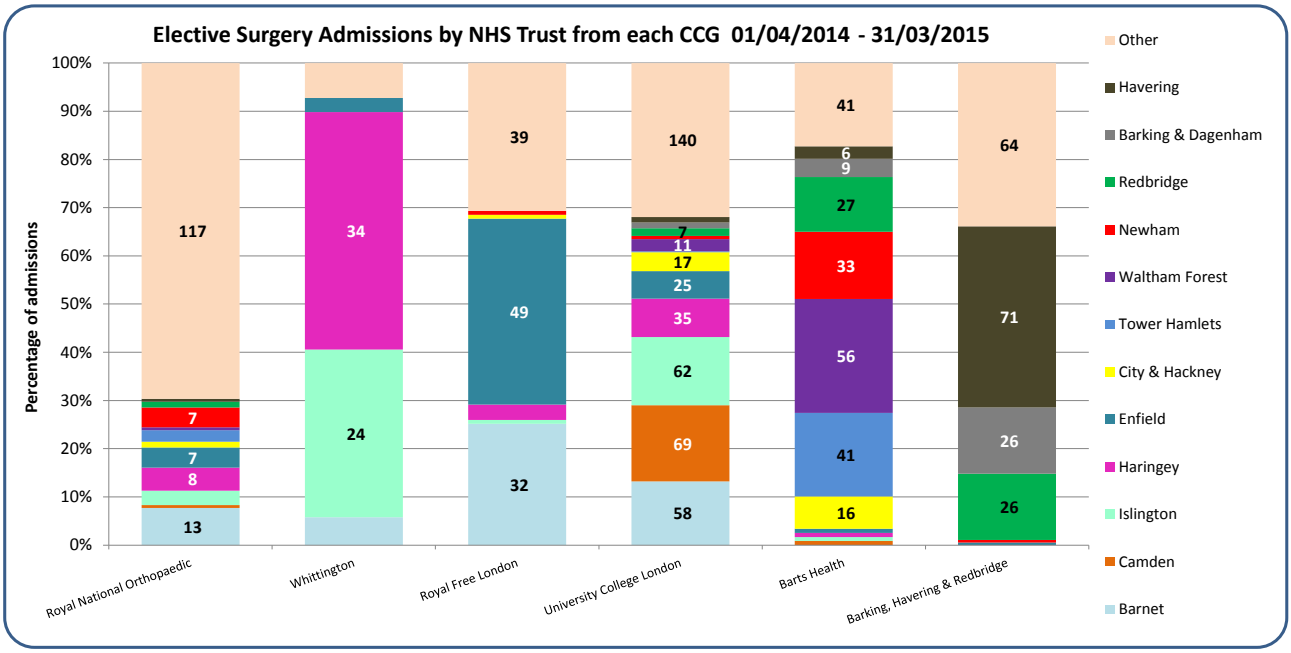
Most providers admits patients from several different CCGs across the region compared to the Homerton Trust which predominantly admit patients from City & Hackney CCG where it is located. Royal National Orthopaedic Trust is located just outside of the North East London region and therefore the majority of their patients are admitted 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.

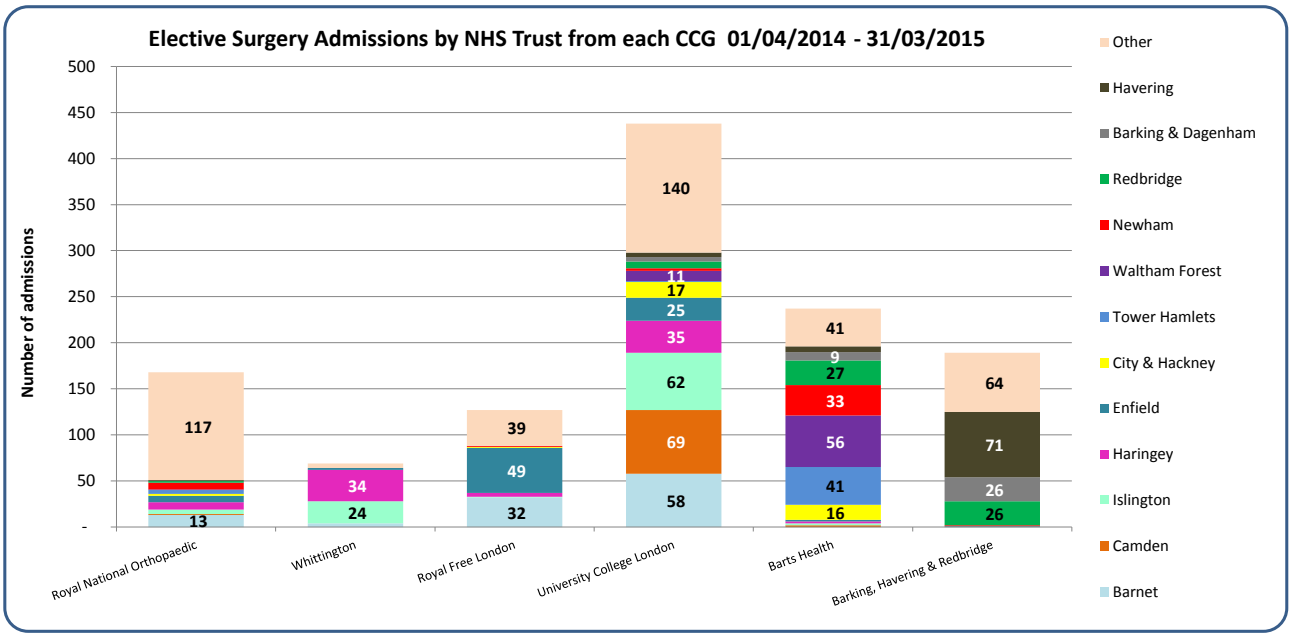
Hospital Trust activity from CCGs

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 for back and radicular pain.

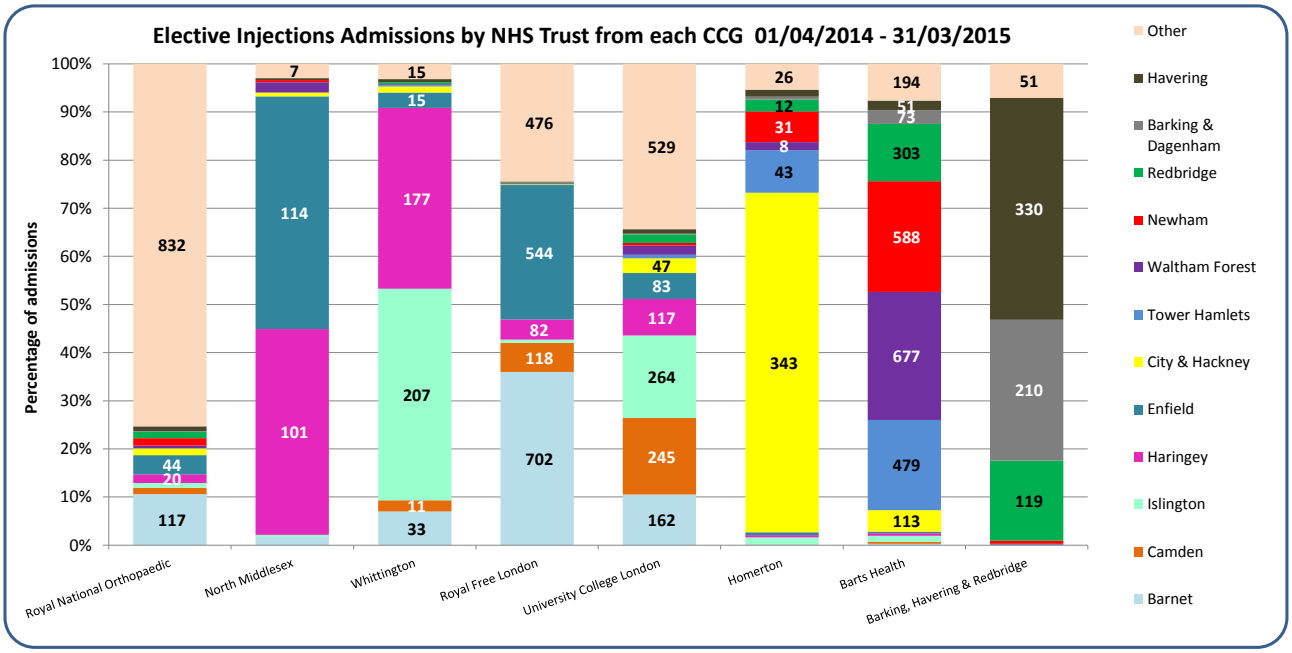
Most providers admits patients from several different CCGs across the region as well as from CCGs outside of the North East London region compared to the Whittington Trust which predominantly admit patients from Islington and Haringey CCGs. University College London has the highest number of admissions. Royal National Orthopaedic Trust is located just outside of the North East London region and therefore the majority of their patients are admitted 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.

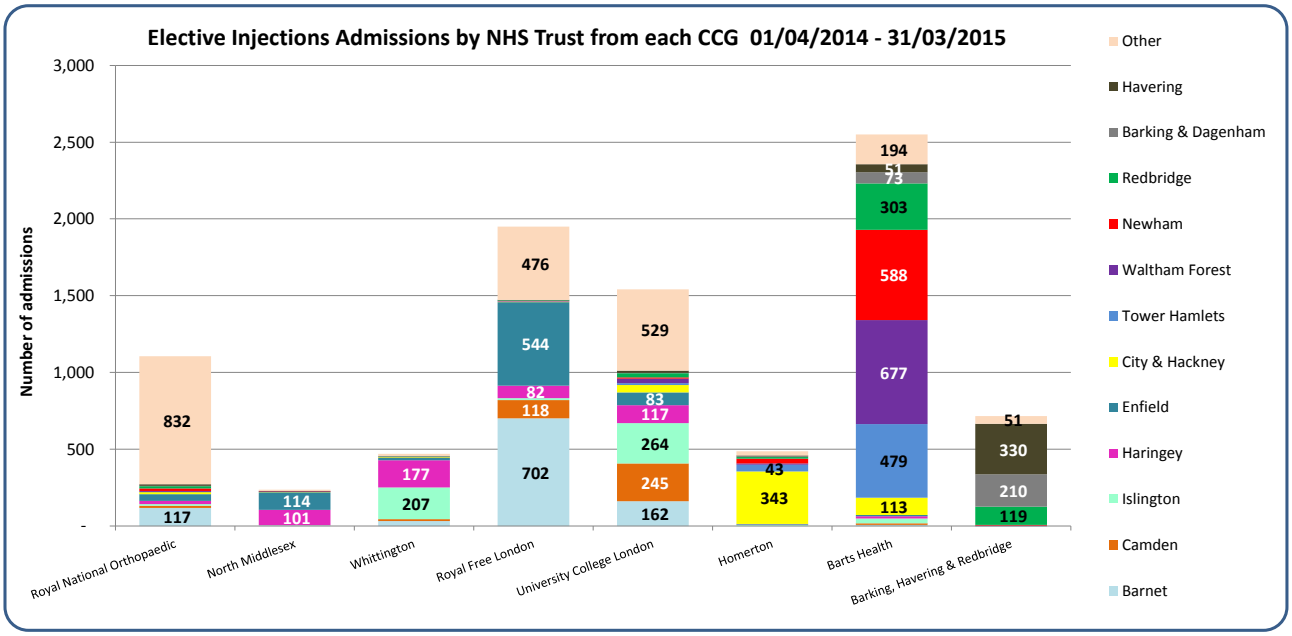
Hospital Trust activity from CCGs

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

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.

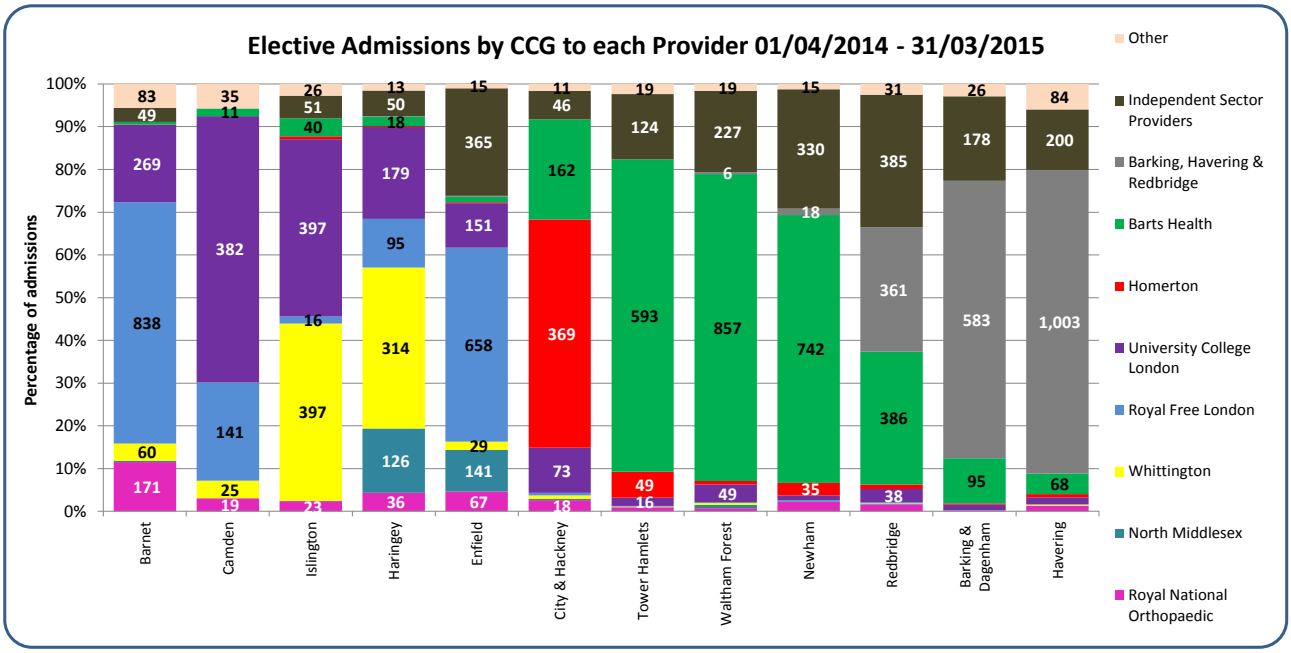
Most providers admit patients from several different CCGs across the region compared to the Homerton Trust which predominantly admit patients from City & Hackney CCG where it is located. Barts Health has the highest number of admissions for injections in the region. Royal National Orthopaedic Trust is located just outside of the North East London region and therefore the majority of their patients are admitted 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.

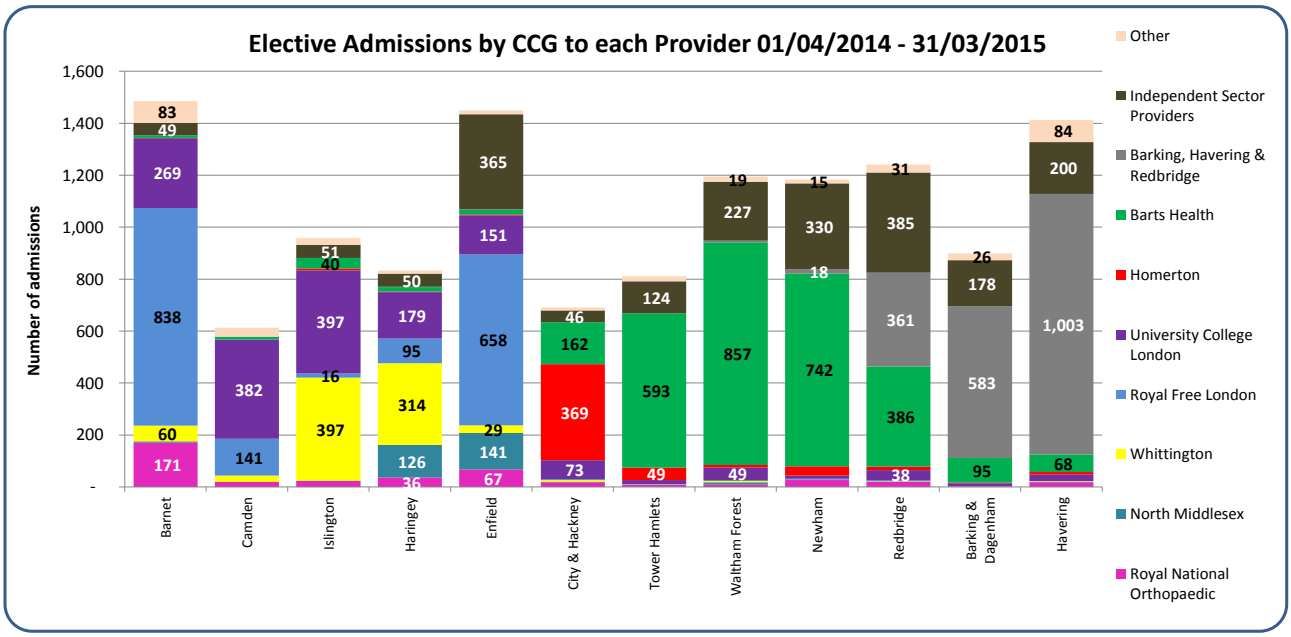
CCG activity to Hospital Trust

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 Barnet, Enfield and Havering CCGs. Patients from these CCGs were admitted to at least three NHS Trusts and also used Independent Sector Providers (particularly Enfield).

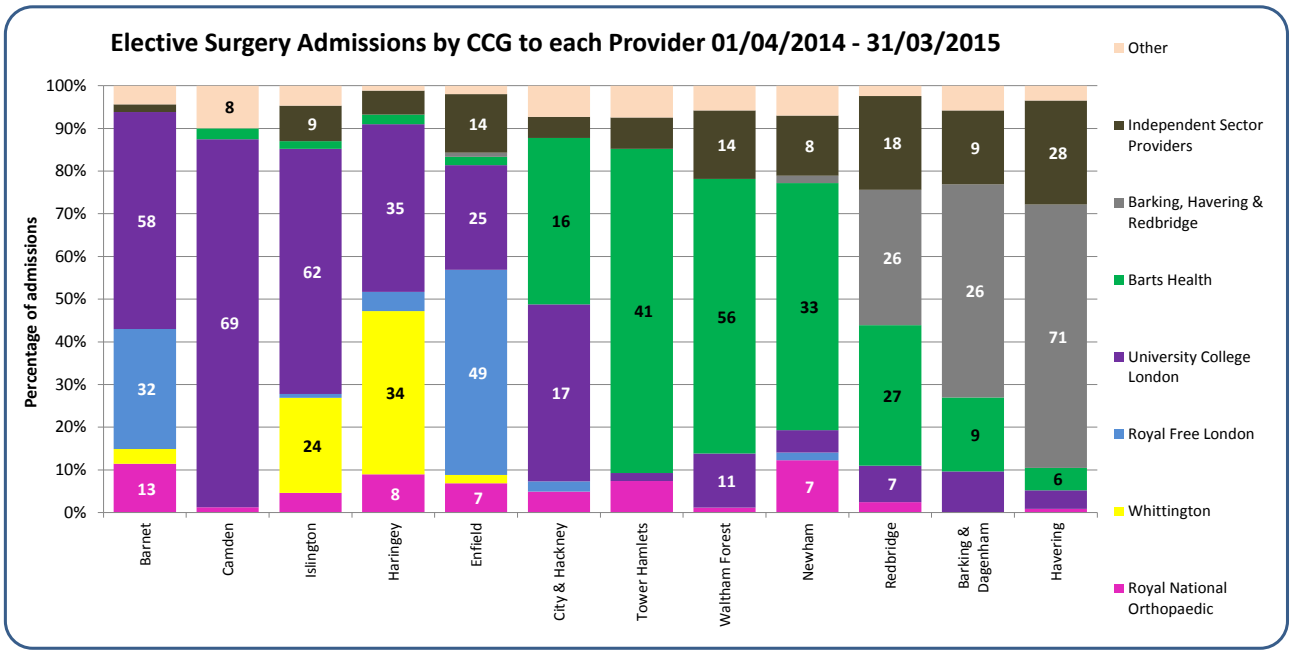
Redbridge and Newham CCGs had the highest proportion of admissions to Independent Sector Providers in North East London.

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

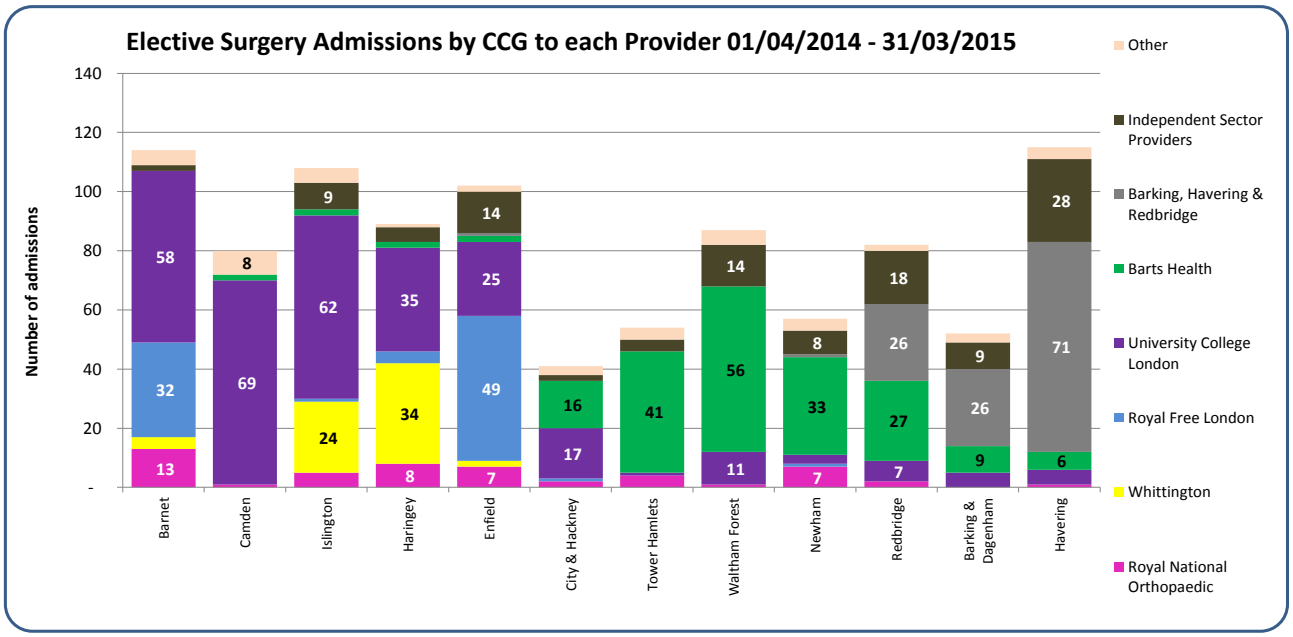
CCG activity to Hospital Trust

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 Barnet, Enfield and Havering CCGs. Patients from these CCGs were admitted to at least three NHS Trusts and also used Independent Sector Providers.

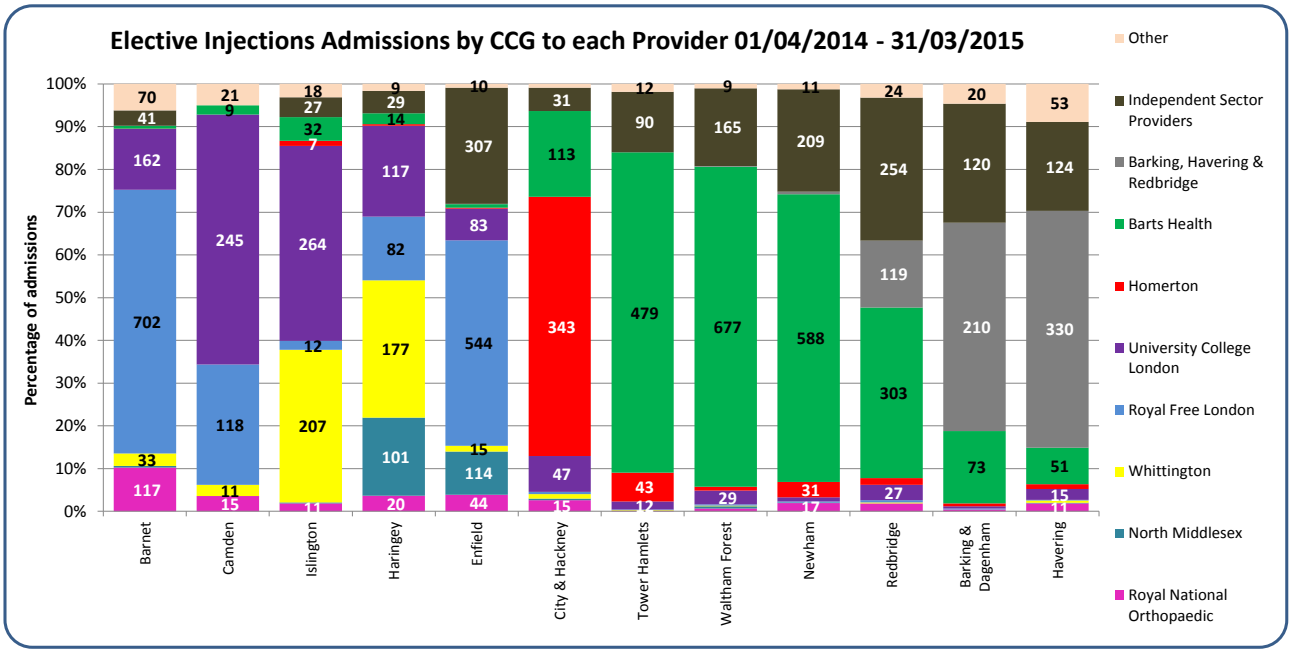
Redbridge and Havering CCGs had the highest proportion of admissions to Independent Sector Providers in North East London.

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

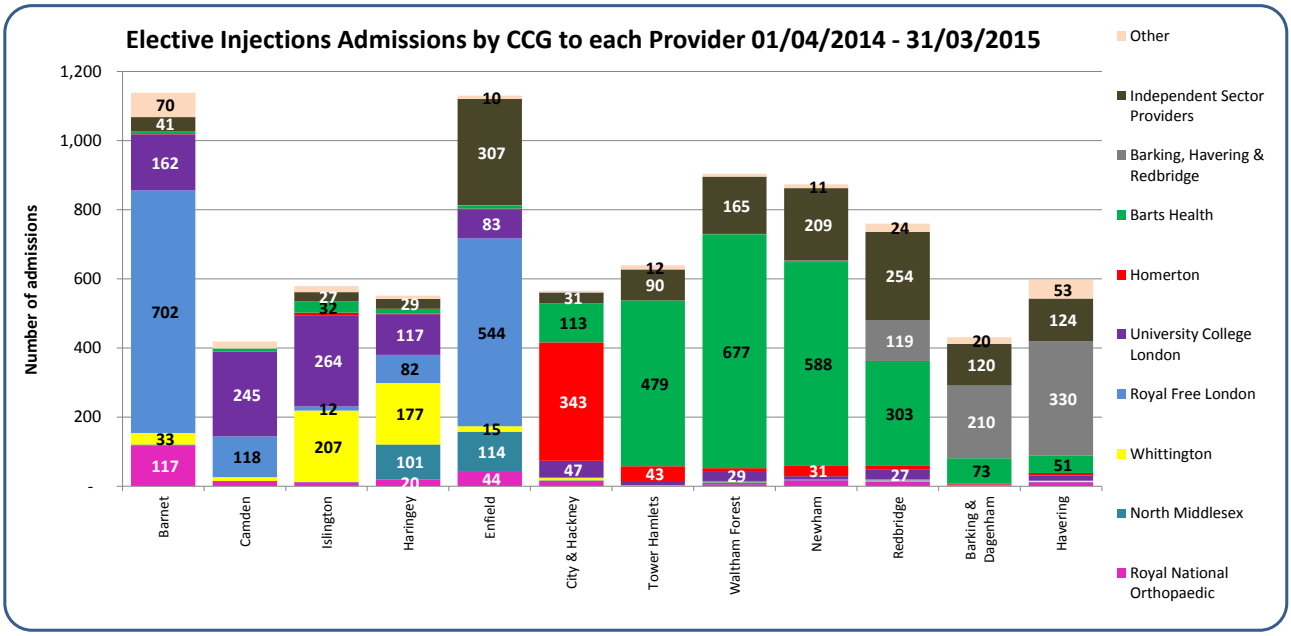
CCG activity to Hospital Trust

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 Barnet and Enfield CCGs. Patients from these CCGs were admitted to at least four NHS Trusts and also used Independent Sector Providers (particularly Enfield).

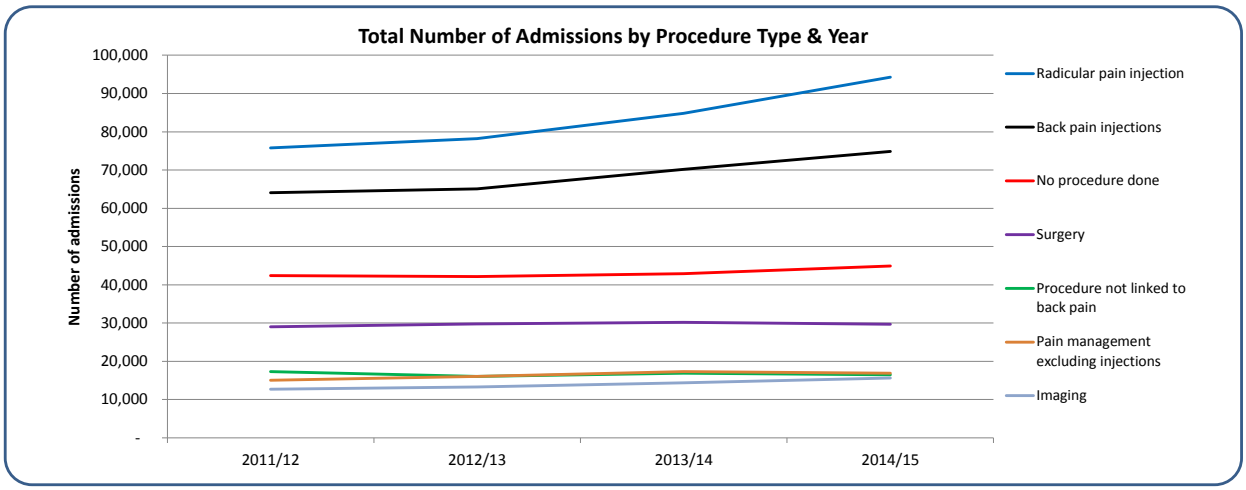
Redbridge CCG had the highest proportion of admissions to Independent Sector Providers in North East London region.

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

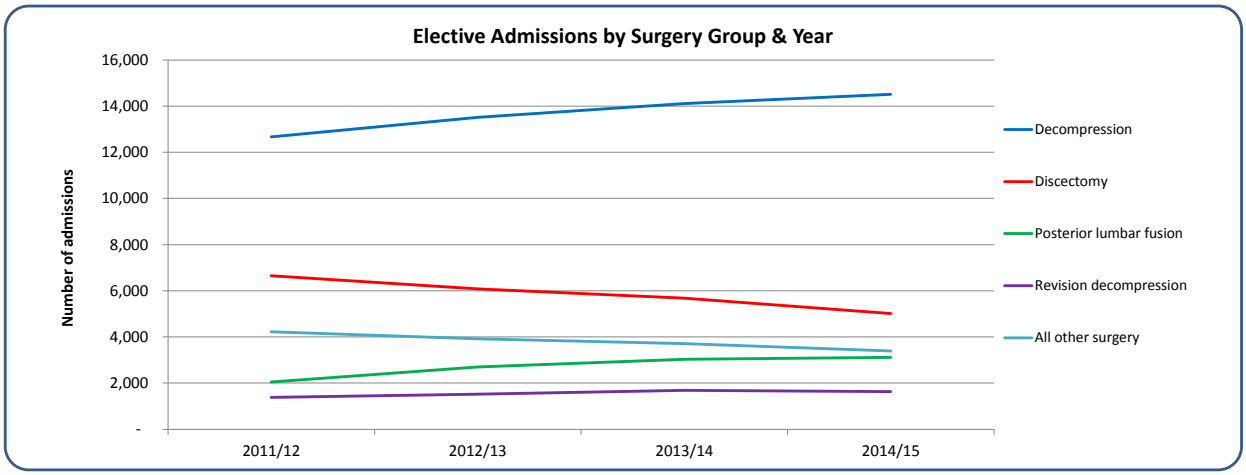
Hospital Trust activity (national level)

8. Hospital admissions for low back and radicular pain in people aged 16 years and over (1st April 2011 - 31st March 2015)

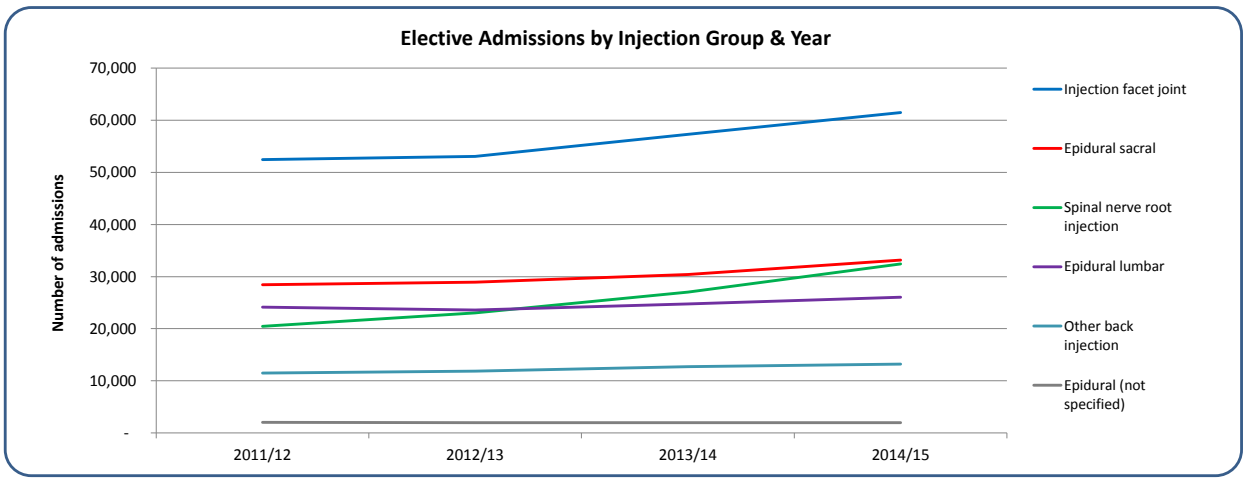
a. Hospital admissions by procedure type over time (all admission types)



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.

Hospital Trust activity

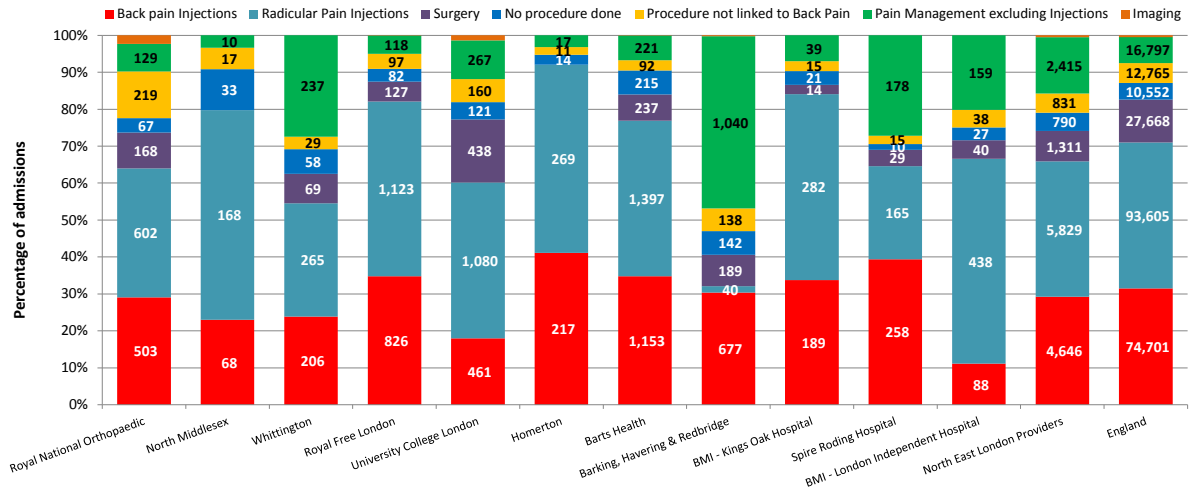
9. Elective hospital admissions for low back and radicular pain in people aged 16 years and over (April 2014 - March 2015)

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**	**7.1%**
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%**

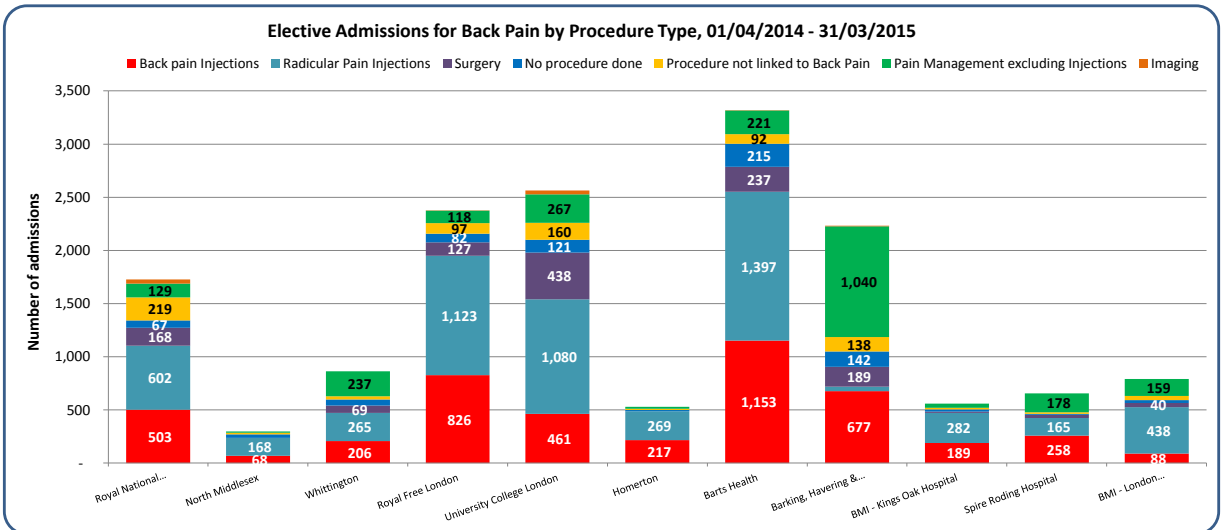
b. Number of elective admissions per hospital Trust, by procedure type (percentage of activity)

(North East London Providers only)



c. Number of elective admissions per hospital Trust, by procedure type (actual activity)

(North East London 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. Barking, Havering & Redbridge Trust also have a notably high proportion (47%) of admissions for pain management procedures other than injections.

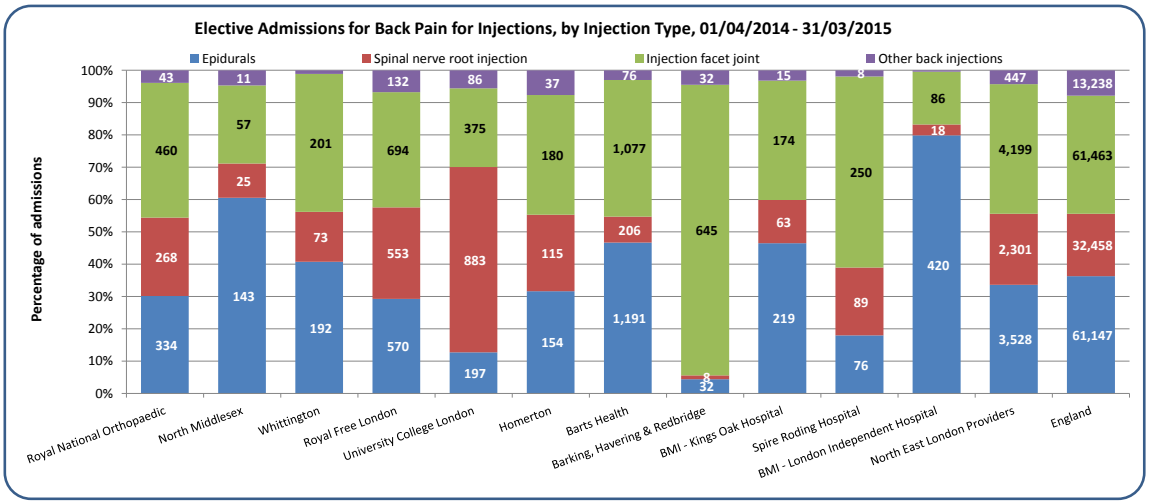
Four of the North East London NHS Trusts have a higher proportion of elective activity for injections than the England rate (approx. 70%) and it is possible that the variation may be even greater due to differences in the point of delivery of care across hospital Trusts (for example it is possible that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

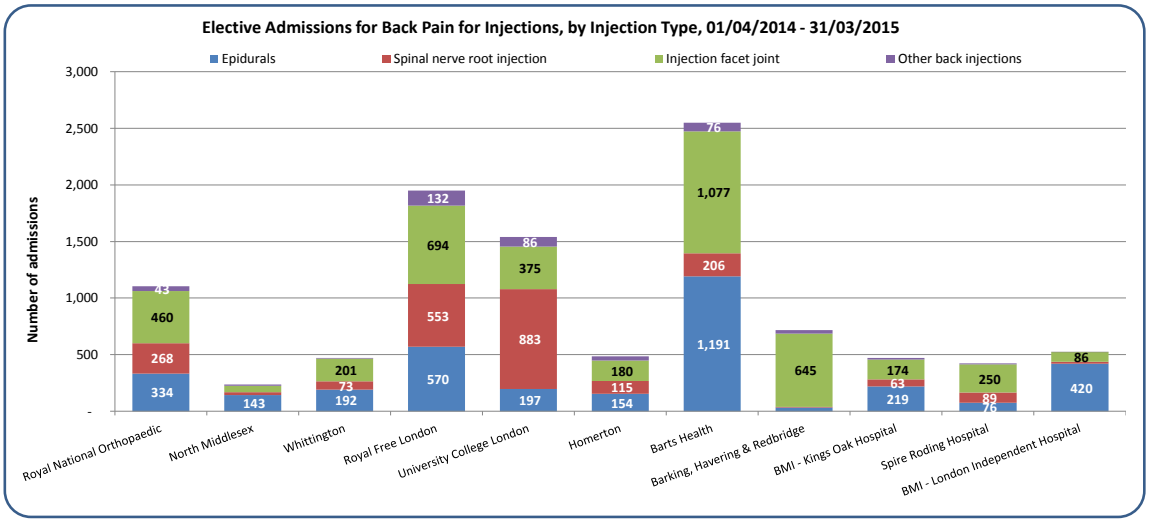
Hospital Trust activity

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

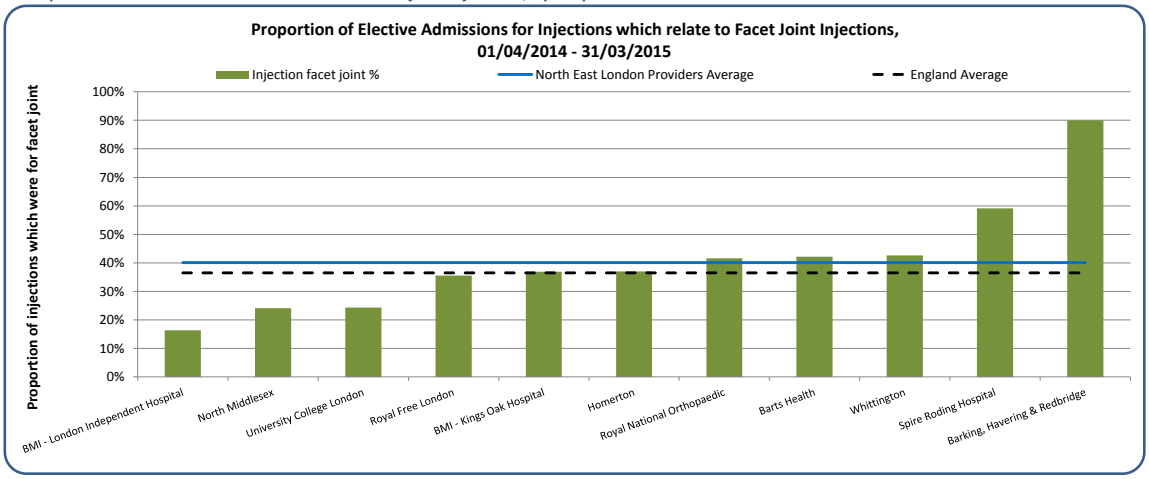
d. Number of elective admissions for injections per hospital Trust, by injection type (percentage of activity)
(North East London Providers only)



e. Number of elective admissions for injections per hospital Trust, by injection type (actual activity)
(North East London Providers only)



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



What is the data telling us?

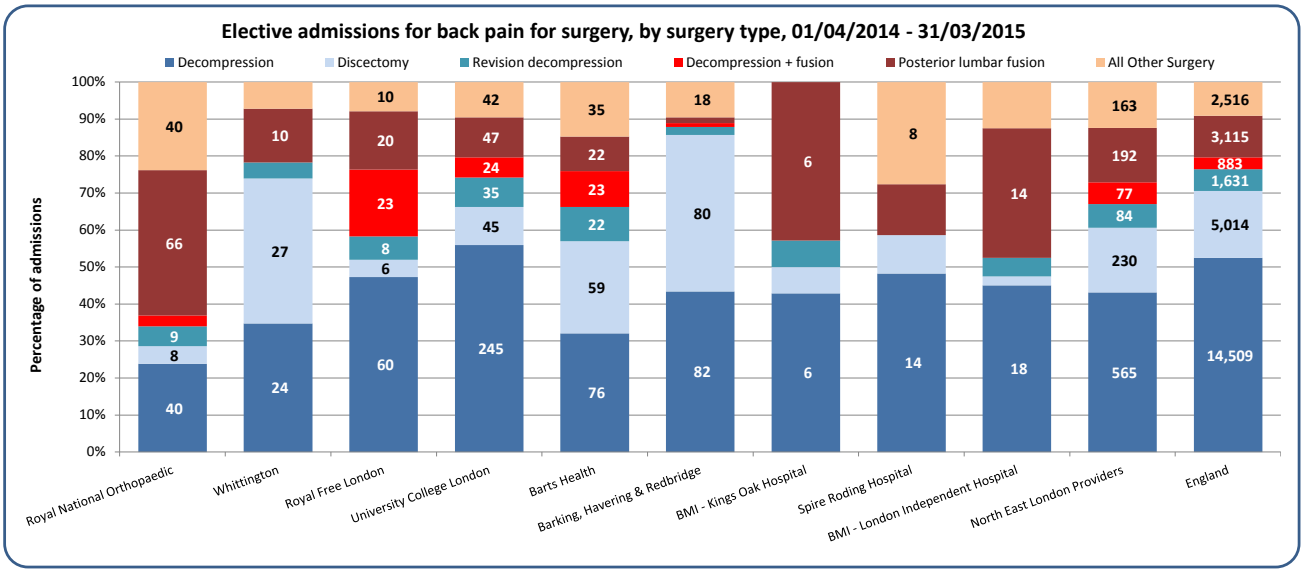
Facet joint injections are those most frequently done within North East London, constituting over 40% of injection activity which is higher than the England proportion (37%). North East London providers overall also do higher rates of spinal nerve root injections (22%) compared to the England proportion (19%). The data is shown in two ways, indicating both the proportion of overall activity and number of episodes for each provider.

Barts Health Trust does a markedly higher number of injections (mostly facet joint injections and epidurals) compared to all of the other providers. The proportion of facet joint injections done at NHS Trust level ranges from 24% (North Middlesex Trust) to 90% (Barking, Havering & Redbridge) compared to the England figure of 37%.

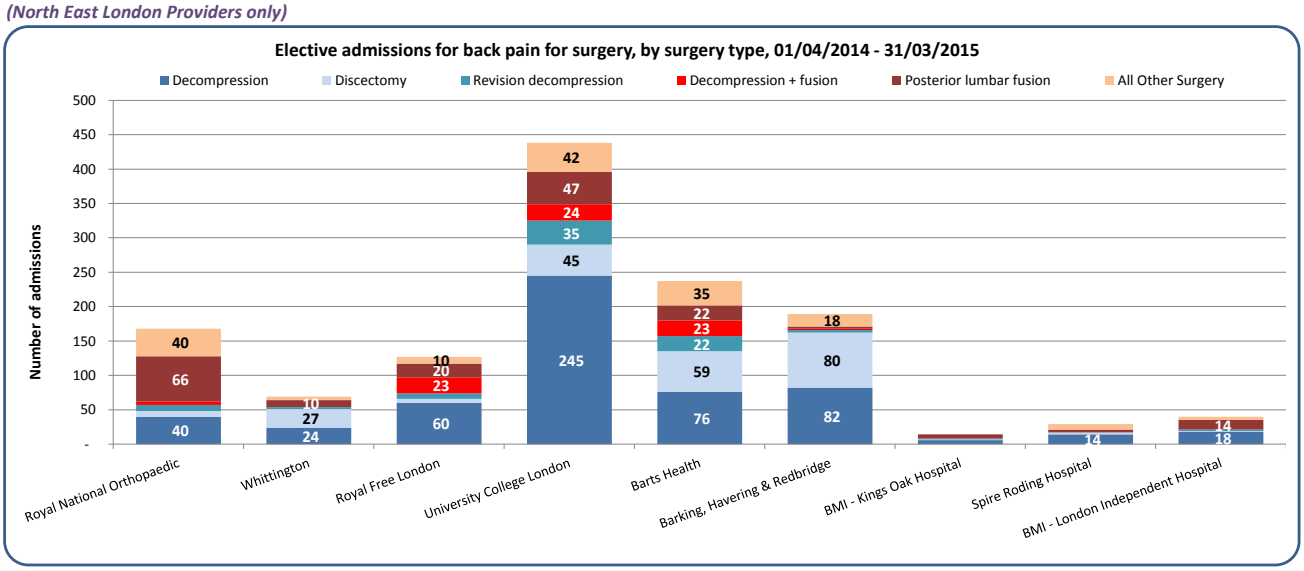
Hospital Trust activity

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)
(North East London Providers only)



h. Number of elective admissions for surgery per hospital Trust, by surgery type (actual activity)
(North East London Providers only)



What is the data telling us?

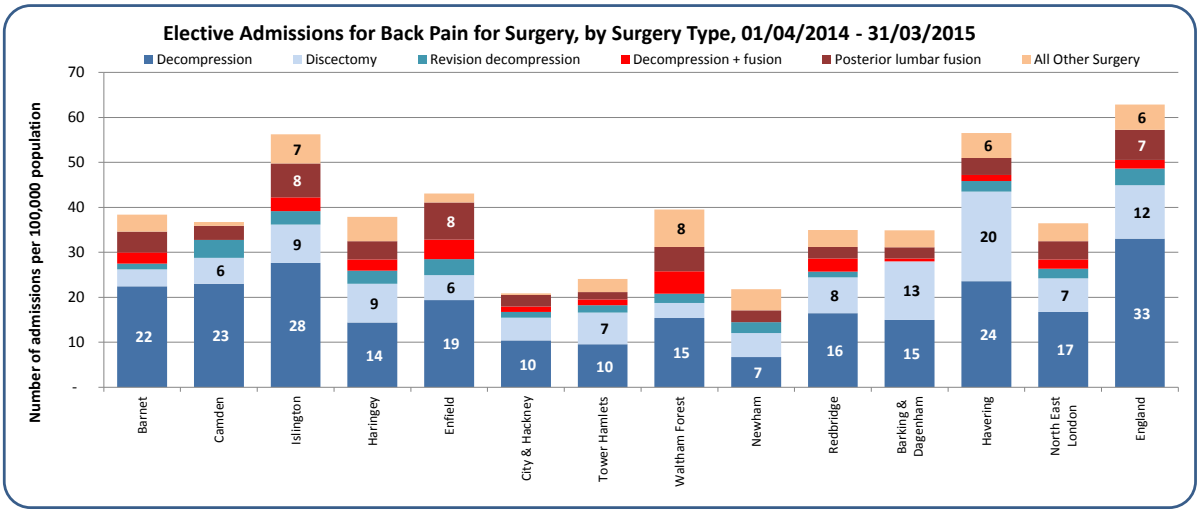
The charts above show the range in activity relating specifically to elective admissions for surgery, by type of surgery, for the North East London Providers. These providers overall do a lower proportion of decompressions and higher proportion of fusions compared to the England profile. There are variations at Trust with the highest proportion of fusions at Royal National Orthopaedic Hospital compared to Barking, Havering & Redbridge Trust were few fusions are undertaken and almost equal numbers of discectomies and decompressions are done.

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

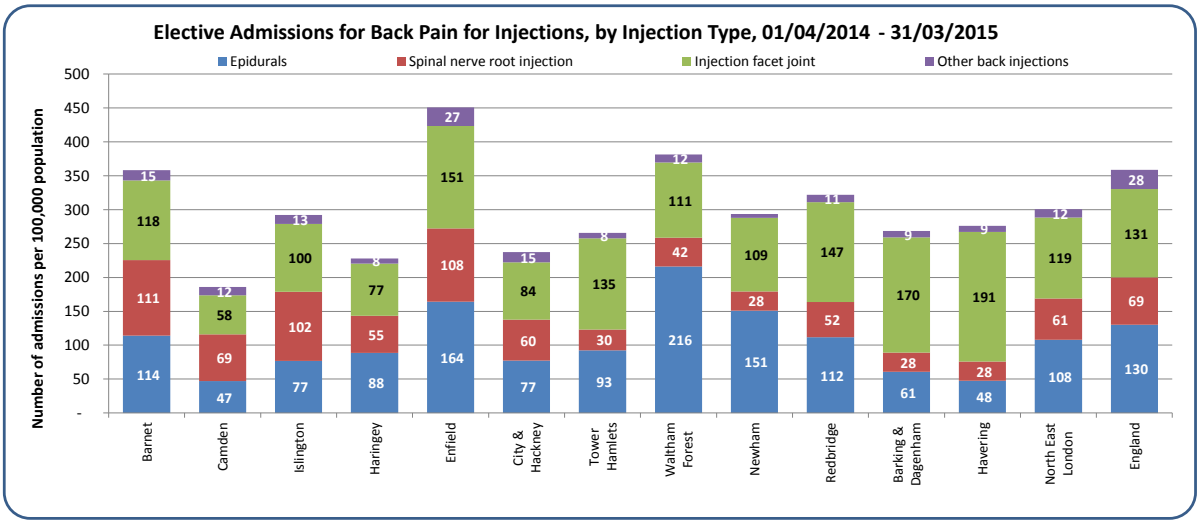
CCG activity by back pain procedure group

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

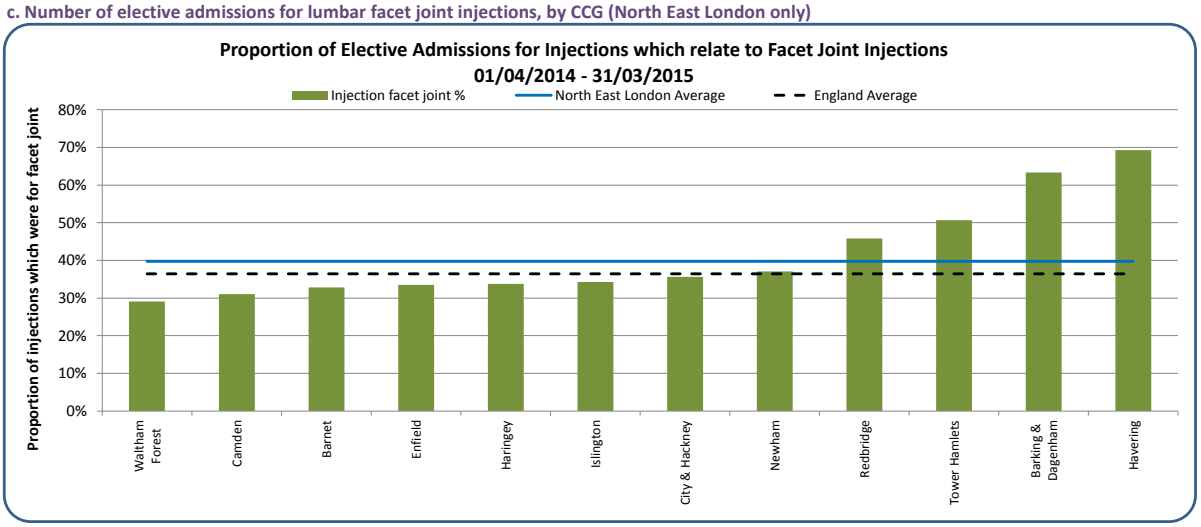
a. Number of elective admissions for surgery per CCG, by surgery type (North East London only)



b. Number of elective admissions for injections per CCG, by injection type (North East London only)



c. Number of elective admissions for lumbar facet joint injections, by CCG (North East London 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 South of West Midland CCGs, with chart 9b showing the same for injections.

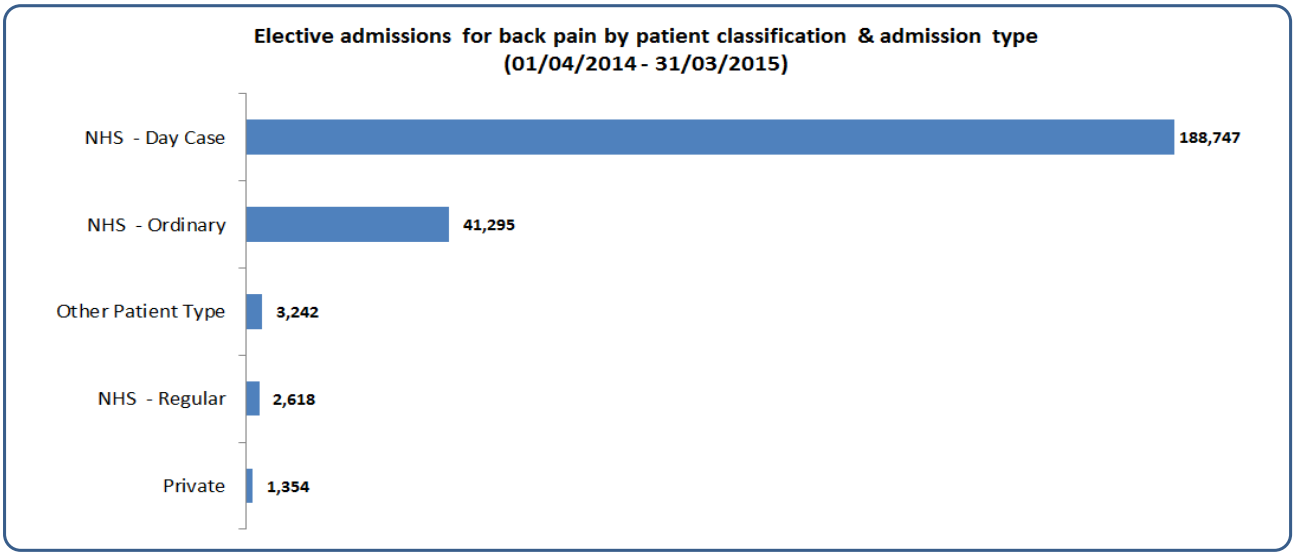
Overall North East London CCGs have lower rates per 100,000 of both spinal surgery and injections compare to the England rates. Islington and Havering CCGs have the highest rates of surgery and Enfield CCG has the highest rates of injections.

The proportion of facet joint injections done at CCG level ranges from 29% (Waltham Forest) to 69% (Havering) compared to the England figure of 37%.

Hospital Trust activity

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

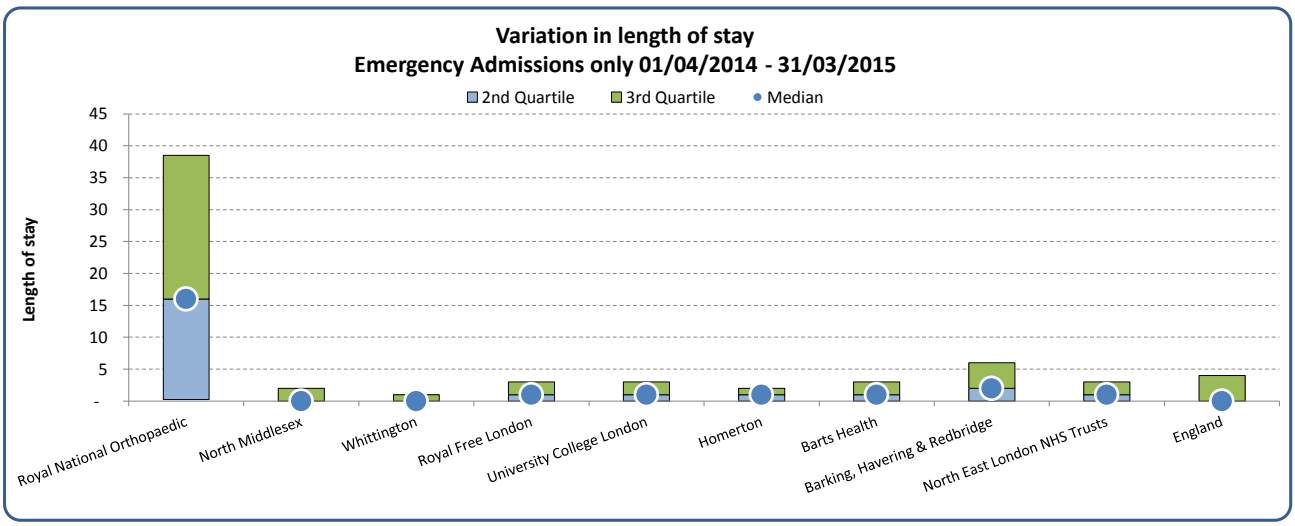


Other Patient Types are Amenity patients and Category II patients, and where the Administrative Category is unknown.

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
(North East London 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 North East London Trusts and shows that the Royal National Orthopaedic Trusts has a significantly higher median length of stay (16 days), compared to the other North East London Trusts and 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 (North East London FTs only)

Provider Name	Elective	Emergency	Other	Total
Barts Health	£ 3,963,687	£ 1,392,167	£ 67,321	**£ 5,423,176**
University College London	£ 3,635,863	£ 344,613	£ 223,569	**£ 4,204,046**
Royal National Orthopaedic	£ 3,766,055	£ 59,977	£ -	**£ 3,826,032**
Barking, Havering & Redbridge	£ 2,313,775	£ 614,920	£ 153,931	**£ 3,082,626**
Royal Free London	£ 2,021,281	£ 763,347	£ 15,272	**£ 2,799,899**
Whittington	£ 860,494	£ 272,791	£ -	**£ 1,133,284**
Homerton	£ 371,318	£ 194,186	£ 2,608	**£ 568,112**
North Middlesex	£ 207,464	£ 268,241	£ 2,796	**£ 478,501**
Total	**£ 17,139,936**	**£ 3,910,241**	**£ 465,497**	**£ 21,515,675**

b. Total Costs by Procedure Type (North East London FTs only)

Provider Name	Surgery	Radicular pain Injections	Back pain Injections	No procedure done	Procedure not linked to back pain	Imaging	Pain Management excluding Injections	Other Non-Surgical	Total
Barts Health	£ 1,620,193	£ 1,136,519	£ 855,912	£ 687,773	£ 420,737	£ 379,851	£ 322,190	£ -	**£ 5,423,176**
University College London	£ 1,931,273	£ 827,455	£ 322,327	£ 151,486	£ 533,246	£ 221,754	£ 216,504	£ -	**£ 4,204,046**
Royal National Orthopaedic	£ 1,387,032	£ 467,106	£ 350,889	£ 7,943	£ 1,473,977	£ 38,358	£ 96,872	£ 3,855	**£ 3,826,032**
Barking, Havering & Redbridge	£ 1,036,938	£ 35,086	£ 470,209	£ 276,539	£ 432,458	£ 218,990	£ 612,406	£ -	**£ 3,082,626**
Royal Free London	£ 668,955	£ 757,761	£ 489,819	£ 346,433	£ 234,198	£ 225,858	£ 76,874	£ -	**£ 2,799,899**
Whittington	£ 406,969	£ 206,659	£ 145,503	£ 145,739	£ 74,946	£ 90,301	£ 63,167	£ -	**£ 1,133,284**
Homerton	£ -	£ 197,138	£ 136,921	£ 159,327	£ 15,738	£ 46,612	£ 12,376	£ -	**£ 568,112**
North Middlesex	£ -	£ 133,496	£ 54,901	£ 199,766	£ 34,446	£ 49,878	£ 6,013	£ -	**£ 478,501**
Total	**£ 7,051,361**	**£ 3,761,220**	**£ 2,826,482**	**£ 1,975,005**	**£ 3,219,746**	**£ 1,271,603**	**£ 1,406,402**	**£ 3,855**	**£ 21,515,675**

What is the data telling us?

Across all North East London Trusts in 2014/15 the total cost to commissioners for back and radicular pain admissions was approximately £21.5 million, with 80% of the costs attributed to elective activity. Note that these costs are by provider Trust and will include activity for CCGs outside of the North East London region.

The surgery procedures group accounts for almost 33% of the total cost of all procedures, and the cost of injections is an additional 31% of the total.

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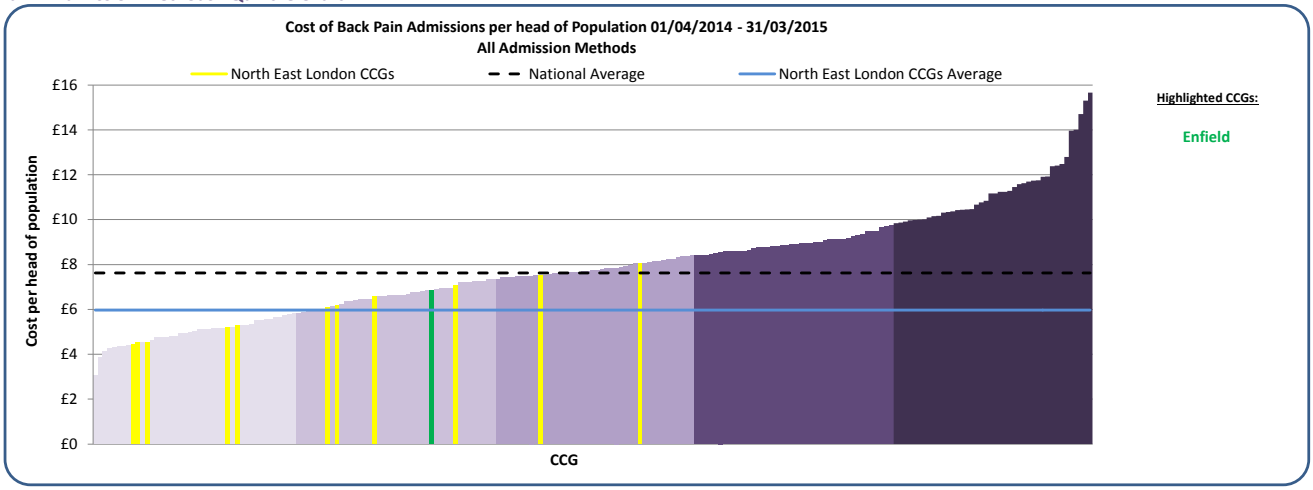
CCG Activity Total Costs

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		
Responsible CCG Name	Cost per head of Population	Total Cost	Cost per head of Population	Total Cost	Cost per head of Population	Total Cost	Registered Population (Ages 15+)
Camden	£ 4.43	£ 1,000,030	£ 3.55	£ 801,924	£ 0.75	£ 168,160	225,709
City & Hackney	£ 4.52	£ 1,080,982	£ 3.24	£ 773,781	£ 1.27	£ 303,101	239,119
Tower Hamlets	£ 4.54	£ 1,092,822	£ 3.42	£ 823,660	£ 1.00	£ 241,036	240,771
Haringey	£ 5.17	£ 1,256,601	£ 4.23	£ 1,027,479	£ 0.94	£ 227,558	243,013
Newham	£ 5.27	£ 1,570,207	£ 3.95	£ 1,174,487	£ 1.28	£ 379,775	297,705
Barnet	£ 6.11	£ 1,958,000	£ 4.85	£ 1,554,138	£ 1.18	£ 378,551	320,406
Redbridge	£ 6.18	£ 1,466,738	£ 5.15	£ 1,222,173	£ 1.01	£ 239,478	237,291
Barking & Dagenham	£ 6.57	£ 1,054,909	£ 5.22	£ 838,258	£ 1.34	£ 215,217	160,625
Enfield	£ 6.86	£ 1,735,768	£ 5.51	£ 1,392,979	£ 1.28	£ 322,838	252,952
Islington	£ 7.05	£ 1,402,635	£ 5.51	£ 1,095,599	£ 1.45	£ 289,554	199,012
Waltham Forest	£ 7.53	£ 1,810,669	£ 5.72	£ 1,375,821	£ 1.71	£ 411,795	240,417
Havering	£ 8.05	£ 1,738,953	£ 6.94	£ 1,497,929	£ 1.11	£ 239,571	215,915
North East London Total	**£ 5.98**	**£ 17,168,315**	**£ 4.73**	**£ 13,578,230**	**£ 1.19**	**£ 3,416,633**	**2,872,935**

b. All Admission Methods - Quintile Chart



c. Elective Admissions only, by Procedure Type

Responsible CCG Name	Surgery	Radicular pain Injections	Back pain Injections	No procedure done	Procedure not linked to back pain	Imaging	Pain Management excluding Injections	Other Non-Surgical	Total Cost
Barnet	£ 563,107	£ 487,845	£ 267,061	£ 7,672	£ 153,725	£ 5,884	£ 68,845	£ -	**£ 1,554,138**
Havering	£ 557,754	£ 115,270	£ 300,373	£ 4,408	£ 156,762	£ 1,777	£ 361,584	£ -	**£ 1,497,929**
Enfield	£ 496,657	£ 446,178	£ 278,801	£ 10,826	£ 100,928	£ 4,972	£ 54,617	£ -	**£ 1,392,979**
Waltham Forest	£ 539,635	£ 478,127	£ 204,858	£ 12,774	£ 54,200	£ -	£ 86,228	£ -	**£ 1,375,821**
Redbridge	£ 422,991	£ 281,909	£ 263,394	£ 2,292	£ 71,564	£ 1,030	£ 178,100	£ 893	**£ 1,222,173**
Newham	£ 316,392	£ 402,456	£ 231,491	£ 1,426	£ 112,458	£ 1,760	£ 108,503	£ -	**£ 1,174,487**
Islington	£ 493,772	£ 269,912	£ 151,135	£ 6,278	£ 90,555	£ 4,539	£ 79,407	£ -	**£ 1,095,599**
Haringey	£ 412,648	£ 260,166	£ 137,361	£ 9,417	£ 159,238	£ -	£ 48,649	£ -	**£ 1,027,479**
Barking & Dagenham	£ 272,167	£ 101,071	£ 194,576	£ 1,975	£ 56,376	£ 1,210	£ 210,883	£ -	**£ 838,258**
Tower Hamlets	£ 275,199	£ 215,577	£ 242,480	£ 3,309	£ 44,100	£ -	£ 42,995	£ -	**£ 823,660**
Camden	£ 371,858	£ 199,987	£ 110,025	£ 13,232	£ 66,068	£ 5,735	£ 35,020	£ -	**£ 801,924**
City & Hackney	£ 250,596	£ 237,217	£ 158,191	£ 17,487	£ 64,387	£ 3,672	£ 42,232	£ -	**£ 773,781**

What is the data telling us?

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

Havering CCG has the highest spend per head of population regionally (£8.05) driven mainly by high costs for elective admissions. Camden CCG has the lowest costs per head for both emergency and elective admissions (£4.43) in the region as well as being the lowest quintile nationally.

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 for several CCGs in North East London more is spent on admissions for injections compared to what is spent on surgery. Additionally, in Havering CCG and Barking and Dagenham CCG there is a high spend for pain management admissions which were not for injections.

14. Back & Radicular Pain Admissions Breakdown for the North East London Region

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

		Elective Admissions			Emergency	Other Admission	
Code	**Provider Name**	Surgery	Injections	Other	**Admissions**	**Types**	**Total**
R1H	BARTS HEALTH NHS TRUST	196	2,356	447	979	16	**3,994**
RF4	BARKING, HAVERING AND REDBRIDGE UNIVERSITY HOSPITALS NHS TRUST	125	666	1,184	332	<6	**2,310**
RAL	ROYAL FREE LONDON NHS FOUNDATION TRUST	88	1,473	204	448	<6	**2,217**
RRV	UNIVERSITY COLLEGE LONDON HOSPITALS NHS FOUNDATION TRUST	298	1,012	292	223	20	**1,845**
RKE	THE WHITTINGTON HOSPITAL NHS TRUST	64	456	322	267	-	**1,109**
RQX	HOMERTON UNIVERSITY HOSPITAL NHS FOUNDATION TRUST	-	460	42	185	<6	**689**
NT422	BMI - THE LONDON INDEPENDENT HOSPITAL	32	404	193	-	-	**629**
NT314	SPIRE RODING HOSPITAL	25	405	197	-	-	**627**
RAP	NORTH MIDDLESEX UNIVERSITY HOSPITAL NHS TRUST	-	229	58	205	<6	**493**
RAN	ROYAL NATIONAL ORTHOPAEDIC HOSPITAL NHS TRUST	51	273	94	<6	-	**420**
NT421	BMI - THE KINGS OAK HOSPITAL	9	317	44	-	-	**370**
NYW01	ASPEN - HOLLY HOUSE HOSPITAL	10	189	28	-	-	**227**
RJ1	GUY'S AND ST THOMAS' NHS FOUNDATION TRUST	7	81	19	18	-	**125**
RYJ	IMPERIAL COLLEGE HEALTHCARE NHS TRUST	18	54	7	17	-	**96**
NYW03	ASPEN - HIGHGATE HOSPITAL	7	41	22	-	-	**70**
RDD	BASILDON AND THURROCK UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	<6	32	13	<6	-	**52**
RQM	CHELSEA AND WESTMINSTER HOSPITAL NHS FOUNDATION TRUST	-	28	7	6	-	**41**
RQW	THE PRINCESS ALEXANDRA HOSPITAL NHS TRUST	<6	16	<6	10	-	**31**
NT416	BMI - HENDON HOSPITAL	<6	21	7	-	-	**29**
RQ8	MID ESSEX HOSPITAL SERVICES NHS TRUST	-	12	6	<6	-	**22**
RJZ	KING'S COLLEGE HOSPITAL NHS FOUNDATION TRUST	<6	<6	<6	8	-	**18**
R1K	LONDON NORTH WEST HEALTHCARE NHS TRUST	-	<6	-	14	-	**15**
RWG	WEST HERTFORDSHIRE HOSPITALS NHS TRUST	-	12	<6	<6	-	**14**
RJ2	LEWISHAM AND GREENWICH NHS TRUST	-	6	-	7	-	**13**
NT204	NUFFIELD HEALTH, BRENTWOOD HOSPITAL	11	-	<6	-	-	**13**
RJ7	ST GEORGE'S UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	7	-	-	<6	-	**11**
NT451	BMI THE CAVELL HOSPITAL	<6	<6	<6	-	-	**9**
RN7	DARTFORD AND GRAVESHAM NHS TRUST	-	<6	-	<6	-	**7**
NVC18	SPRINGFIELD HOSPITAL	6	<6	-	-	-	**7**
RAJ	SOUTHEND UNIVERSITY HOSPITAL NHS FOUNDATION TRUST	-	-	<6	<6	-	**6**
NT406	BMI - THE BLACKHEATH HOSPITAL	<6	<6	-	-	-	**6**
NT411	BMI - THE CLEMENTINE CHURCHILL HOSPITAL	<6	<6	<6	-	-	**6**
RVR	EPSOM AND ST HELIER UNIVERSITY HOSPITALS NHS TRUST	-	<6	<6	<6	-	**<6**
RAS	THE HILLINGDON HOSPITALS NHS FOUNDATION TRUST	-	<6	<6	<6	-	**<6**
RWH	EAST AND NORTH HERTFORDSHIRE NHS TRUST	-	<6	-	-	-	**<6**
RPA	MEDWAY NHS FOUNDATION TRUST	-	<6	<6	<6	-	**<6**
RVV	EAST KENT HOSPITALS UNIVERSITY NHS FOUNDATION TRUST	<6	-	-	<6	-	**<6**
NT315	SPIRE BUSHEY HOSPITAL	-	<6	-	-	-	**<6**
RDE	COLCHESTER HOSPITAL UNIVERSITY NHS FOUNDATION TRUST				<6	-	**<6**
RH8	ROYAL DEVON AND EXETER NHS FOUNDATION TRUST				<6	-	**<6**
RJ6	CROYDON HEALTH SERVICES NHS TRUST				<6	-	**<6**
RRP	BARNET, ENFIELD AND HARINGEY MENTAL HEALTH NHS TRUST				<6	-	**<6**
RTK	ASHFORD AND ST PETER'S HOSPITALS NHS FOUNDATION TRUST	-	<6	<6	-	-	**<6**
RTP	SURREY AND SUSSEX HEALTHCARE NHS TRUST				<6	-	**<6**
RTR	SOUTH TEES HOSPITALS NHS FOUNDATION TRUST	-	-	<6	-	-	**<6**
RVJ	NORTH BRISTOL NHS TRUST	<6	-	-	<6	-	**<6**
RWD	UNITED LINCOLNSHIRE HOSPITALS NHS TRUST				<6	-	**<6**
RXQ	BUCKINGHAMSHIRE HEALTHCARE NHS TRUST	-	<6	-	<6	-	**<6**
NT209	NUFFIELD HEALTH, CAMBRIDGE HOSPITAL	<6	-	-	-	-	**<6**
NVC01	ASHTEAD HOSPITAL	<6	<6	-	-	-	**<6**
NWF01	BENENDEN HOSPITAL	-	<6	-	-	-	**<6**
RA7	UNIVERSITY HOSPITALS BRISTOL NHS FOUNDATION TRUST				<6	-	**<6**
RAX	KINGSTON HOSPITAL NHS FOUNDATION TRUST	-	<6	-	-	-	**<6**
RDZ	THE ROYAL BOURNEMOUTH AND CHRISTCHURCH HOSPITALS NHS FOUNDATION TRUST				<6	-	**<6**
REM	AINTREE UNIVERSITY HOSPITAL NHS FOUNDATION TRUST				<6	-	**<6**
RGQ	IPSWICH HOSPITAL NHS TRUST				<6	-	**<6**
RGR	WEST SUFFOLK NHS FOUNDATION TRUST				<6	-	**<6**
RGT	CAMBRIDGE UNIVERSITY HOSPITALS NHS FOUNDATION TRUST	-	<6	-	-	-	**<6**
RJL	NORTHERN LINCOLNSHIRE AND GOOLE NHS FOUNDATION TRUST				<6	-	**<6**
RKB	UNIVERSITY HOSPITALS COVENTRY AND WARWICKSHIRE NHS TRUST	<6	-	-	-	-	**<6**
RL1	THE ROBERT JONES AND AGNES HUNT ORTHOPAEDIC HOSPITAL NHS FOUNDATION TRUST	<6	-	-	-	-	**<6**
RM3	SALFORD ROYAL NHS FOUNDATION TRUST				<6	-	**<6**
RP5	DONCASTER AND BASSETLAW HOSPITALS NHS FOUNDATION TRUST				<6	-	**<6**
RQ6	ROYAL LIVERPOOL AND BROADGREEN UNIVERSITY HOSPITALS NHS TRUST				<6	-	**<6**
RR8	LEEDS TEACHING HOSPITALS NHS TRUST	-	-	<6	-	-	**<6**
RV3	CENTRAL AND NORTH WEST LONDON NHS FOUNDATION TRUST				<6	-	**<6**
RW6	PENNINE ACUTE HOSPITALS NHS TRUST				<6	-	**<6**
RWF	MAIDSTONE AND TUNBRIDGE WELLS NHS TRUST				<6	-	**<6**
RWJ	STOCKPORT NHS FOUNDATION TRUST	<6	-	-	-	-	**<6**
RX1	NOTTINGHAM UNIVERSITY HOSPITALS NHS TRUST				-	<6	**<6**
RXC	EAST SUSSEX HEALTHCARE NHS TRUST	-	<6	-	-	-	**<6**
RXH	BRIGHTON AND SUSSEX UNIVERSITY HOSPITALS NHS TRUST				<6	-	**<6**
RXK	SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST				<6	-	**<6**
RXL	BLACKPOOL TEACHING HOSPITALS NHS FOUNDATION TRUST				<6	-	**<6**
RXN	LANCASHIRE TEACHING HOSPITALS NHS FOUNDATION TRUST	-	<6	-	-	-	**<6**
RXP	COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST				<6	-	**<6**
NLL01	PENINSULA COMMUNITY HEALTH C.I.C				<6	-	**<6**
NT405	BMI - BISHOPS WOOD	-	<6	-	-	-	**<6**
NT437	BMI - THE SLOANE HOSPITAL	-	<6	-	-	-	**<6**
NVC09	NEW HALL HOSPITAL	-	<6	-	-	-	**<6**
Total		**981**	**8,584**	**3,207**	**2,779**	**47**	**15,598**

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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?	
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