Population Health & Healthcare Surveillance
Healthcare Utilisation

March 2019 Update

Summary Dashboard

	Indicator	Time Period	North East Value	North East Rank	National Average	Direction of Travel
Healthcare Utilisation	55. Percentage of the Population aged 85 & over	2017	**2.4%**		2.4%	
	56. Unplanned hospital admission rates for chronic ambulatory care sensitive conditions (ACSC) (per 100,000)					
	All Ages	Dec 2017 - Nov 2018	**972**		702	
	65-79 years	Dec 2017 - Nov 2018	**2330**		1738	
	80+ years	Dec 2017 - Nov 2018	**4575**		3888	
	57. Unplanned hospital admission rates for acute ACSC (per 100,000)					
	All Ages	Dec 2017 - Nov 2018	**1797**		1326	
	65-79 years	Dec 2017 - Nov 2018	**2696**		2064	
	80+ years	Dec 2017 - Nov 2018	**8091**		6454	
	58. A&E attendance rates (per 1,000)					
	All Ages	Dec 2017 - Nov 2018	**413**		340	
	59. Outpatient attendances: Review to New ratio					
	All Ages	Dec 2017 - Nov 2018	**2.7**		2.1	
	65-79 years	Dec 2017 - Nov 2018	**3.1**		2.5	
	80+ years	Dec 2017 - Nov 2018	**3.1**		2.6	
	60. Age specific first outpatient attendance referral rates (per 1,000)					
	All Ages	Dec 2017 - Nov 2018	**217**		226	
	65-79 years	Dec 2017 - Nov 2018	**401**		443	
	80+ years	Dec 2017 - Nov 2018	**488**		527	
	61. Unplanned admissions: average length of stay (chronic ACSC)					
	All Ages	Dec 2017 - Nov 2018	**4.8**		4.9	
	65-79 years	Dec 2017 - Nov 2018	**5.2**		5.6	
	80+ years	Dec 2017 - Nov 2018	**7.4**		7.2	
	62. Unplanned admissions: average length of stay (acute ACSC)					
	All Ages	Dec 2017 - Nov 2018	**4.5**		4.3	
	65-79 years	Dec 2017 - Nov 2018	**6.1**		6.1	
	80+ years	Dec 2017 - Nov 2018	**9.3**		8.6	

Compared with England Significantly Higher   Similar   Significantly Lower

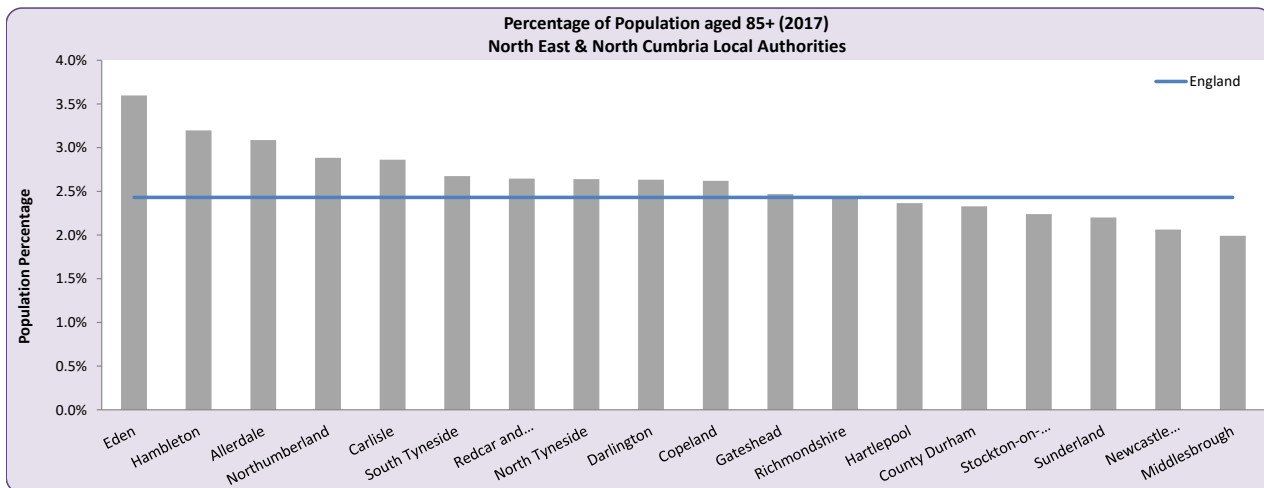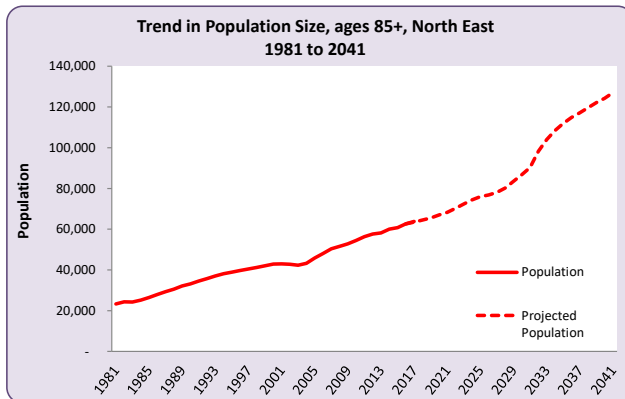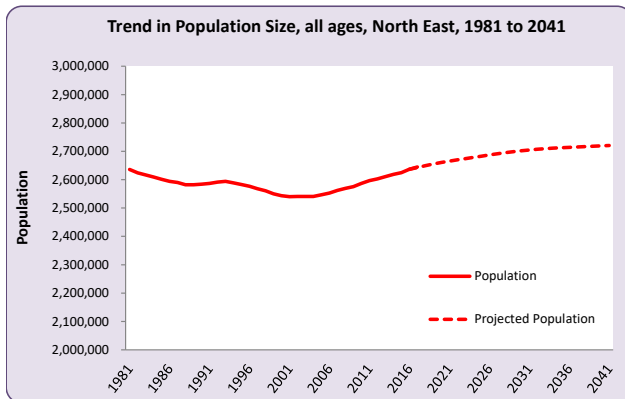*North East Rank amongst the 9 Regions*   1 - Highest   9 - Lowest

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What do the detailed pages show?

The following pages contain further information for each indicator, including the latest data and trend data over time comparing the region to England. The latest information is also presented at CCG level for the North East and North Cumbria. A narrative section explains the key findings from the data and also includes data sources and definitions.

55. Percentage of the Population aged 85 & over (2017)

South West	South East	East	West Midlands	East Midlands	North East	Yorkshire and The Humber	North West	London		England
3.07%	2.75%	2.72%	2.44%	2.43%	2.41%	2.34%	2.33%	1.63%		2.43%

Trend in Population Size, all ages, North East, 1981 to 2041

Trend in Population Size, ages 85+, North East 1981 to 2041

Percentage of Population aged 85+ (2017)
North East & North Cumbria Local Authorities

Healthcare Utilisation

Data source: NOMIS - ONS Crown Copyright Reserved [from Nomis on 18 March 2019].
https://www.nomisweb.co.uk/query/construct/components/date.asp?menuopt=13&subcomp=

Definitions / Notes

One of the biggest challenges facing health and social care services is demographic change. The size of the population aged 85 years and over is an important determinant of demand for health and social care as older people have the highest usage.[46]

What is the data telling us?

In 2017, 2.4% of the population of the North East was aged 85 years or older, the same proportion as in England as a whole. However, there is wide variation within the region with some districts having a considerably higher proportion of their residents in this age group.

Between 1981 and 2005 the total population of the North East fell by almost 3.5%, but since then it is estimated to have increased by 3.8% and in 2017 there were almost 100,000 more people living in the region than in 2005.

In contract, the population aged 85 years and older almost doubled between 1981 and 2005, from just over 23,000 to almost 46,000. Between 2005 and 2017 the numbers in this age group increased by almost 40%, and are projected to increase substantially in the future, particularly when 'baby boomers' born after World War 2 move into it. Between 2017 and 2027 a 23% increase is forecast but between 2027 and 2037 the number aged 85 years and above is expected to increase by 50%. In 2017 it was estimated that there were 63,800 people in the region aged 85 or older. By 2037 it is expected that this number will be approximately 117,000.

46. NHS Digital (2016) Hospital Admitted Patient Care Activity, 2015-16
https://webarchive.nationalarchives.gov.uk/20180328130140/http://digital.nhs.uk/catalogue/PUB22378

Compared with England — ■ Significantly Higher — ■ Similar — ■ Significantly Lower

56. Rates of unplanned hospital admissions for chronic ambulatory care sensitive conditions (ACSC) (Dec 2017 - Nov 2018)
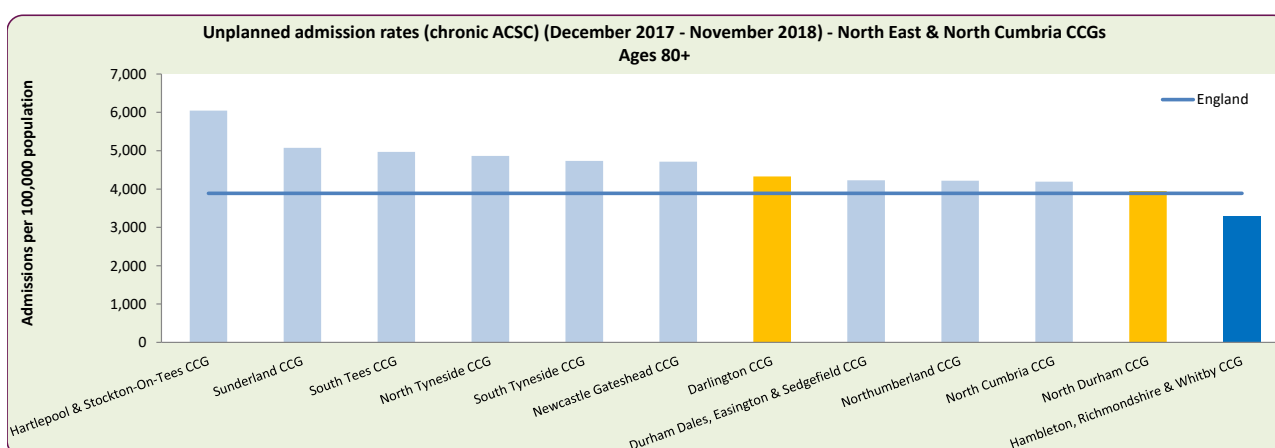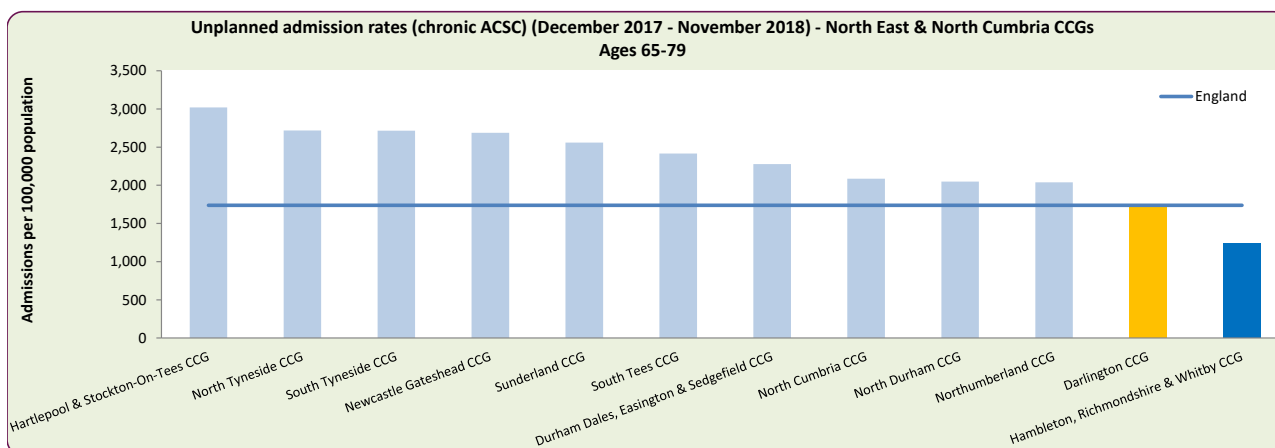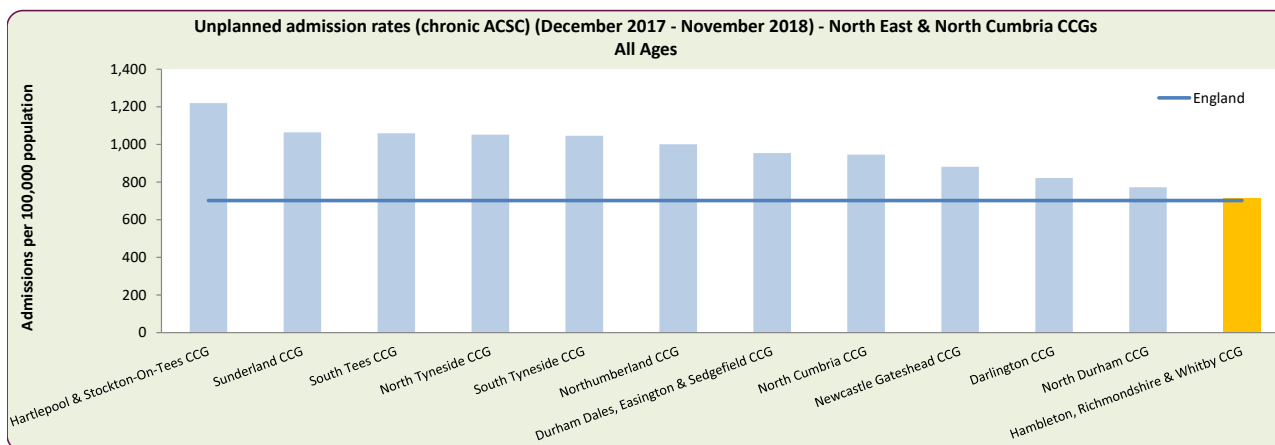
Admission rates for unplanned hospitalisation for chronic ambulatory care sensitive conditions (rate per 100,000).
All ages, 65-79 years, 80+ years.

All Ages		65-79 years		80+ years	
North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England
972	702	2330	1738	4575	3888

Unplanned admission rates (chronic ACSC) (December 2017 - November 2018) - North East & North Cumbria CCGs
All Ages

Unplanned admission rates (chronic ACSC) (December 2017 - November 2018) - North East & North Cumbria CCGs
Ages 65-79

Unplanned admission rates (chronic ACSC) (December 2017 - November 2018) - North East & North Cumbria CCGs
Ages 80+

Healthcare Utilisation

Definitions / Notes & **What is the data telling us?** See the following page

56. Unplanned hospital admission rates for chronic ambulatory care sensitive conditions (ACSC) (Dec 2017 - Nov 2018)

Admission rates for unplanned hospitalisation for chronic ambulatory care sensitive conditions. (Rate per 100,000).
All ages, 65-79 years, 80+ years.

All Ages		65-79 years		80+ years	
North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England
972	702	2330	1738	4575	3888

Data source: Hospital Episode Statistics, Copyright © 2019, re-used with the permission of NHS Digital. All rights reserved.

Definitions / Notes
2018/19 HES data is provisional.

What is the data telling us?
Ambulatory care sensitive conditions (ACSCs) are conditions where effective community care and case management can help prevent the need for hospital admission. Even if the ACSC episode itself is managed well, an emergency admission for an ACSC is often a sign of the poor overall quality of primary and community care.[47]

Chronic ACSCs relate to long term conditions for which effective care can prevent flare-ups or exacerbations that require hospital admission.

The conditions included in the chronic ACSC category are:
- Asthma
- Congestive heart failure
- Diabetes complications
- Chronic obstructive pulmonary disease (COPD)
- Angina
- Iron deficiency anaemia
- Hypertension
- Nutritional deficiencies

These graphs reflect the pressures on urgent care in this region and emphasise the significantly higher rates of unplanned admissions for chronic ACSC problems in comparison to the national average rate. Between December 2017 and November 2018, regardless of age, the regional rate was 38% higher than the national rate (i.e. 972 per 100,000 compared with a national rate of 702 per 100,000). For the 65-79 year age group, the regional rate was 34% higher than the national rate (2330 per 100,000 versus 1738 per 100,000). The difference for the "frail elderly" related age band, over eighty years old, was 18% (4575 per 100,000 versus 3888 per 100,000).

The high rates of unplanned admissions are evident in most CCG populations in this region with notable exceptions in Hambleton, Richmondshire and Whitby CCG. Darlington CCG and North Durham CCG also have rates that are similar to the England average, at least in the older age groups. Hartlepool and Stockton-on-Tees CCG population experiences the highest rates of unplanned admissions in the region, regardless of age.
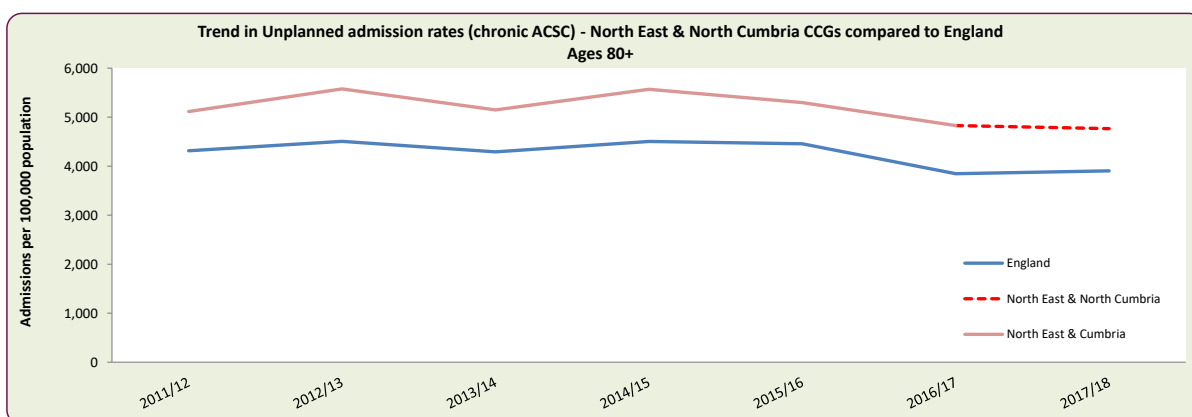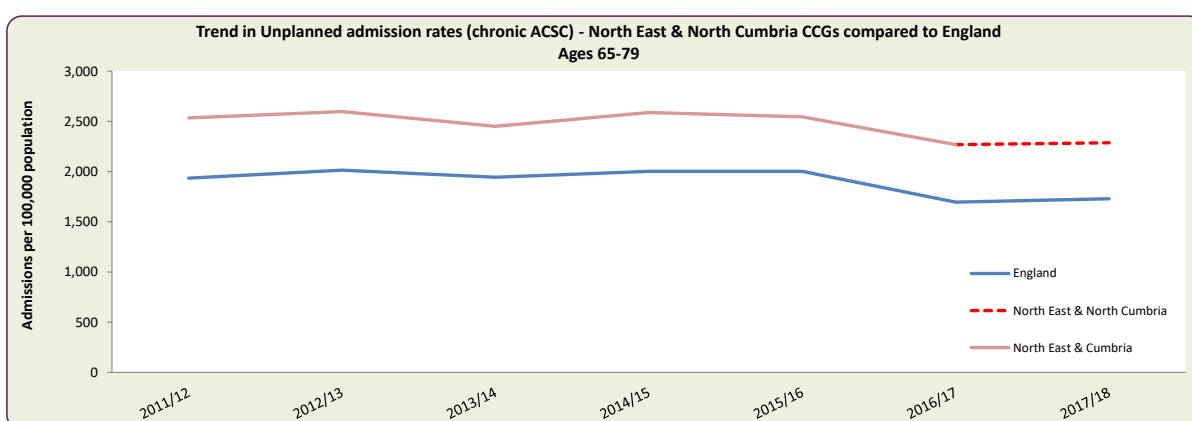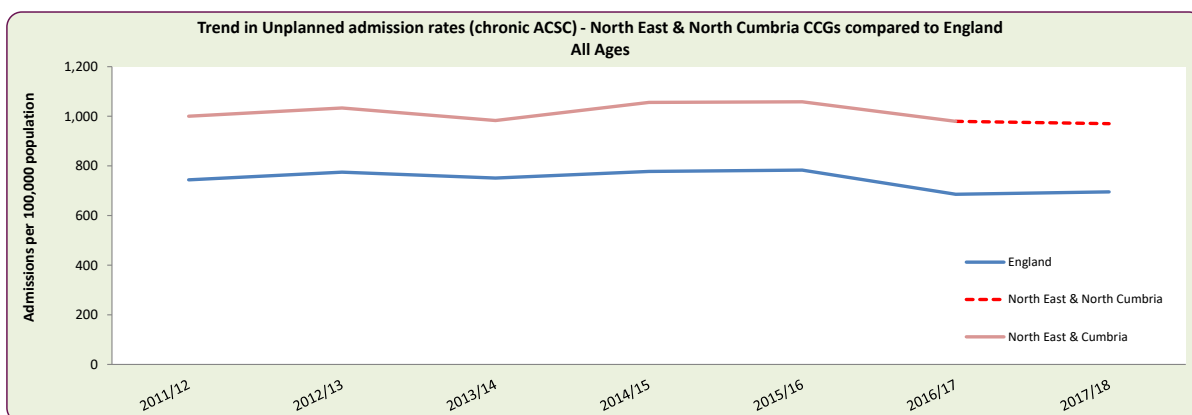
47. NHS England. Emergency admissions from Ambulatory Care Sensitive Conditions. March 2014.

Healthcare Utilisation

56. Trend in Unplanned hospital admission rates for chronic ambulatory care sensitive conditions

Admission rates for unplanned hospitalisation for chronic ambulatory care sensitive conditions (Rate per 100,000). All ages, 65-79 years, 80+ years.

All Ages		65-79 years		80+ years	
North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England
972	702	2330	1738	4575	3888

Trend in Unplanned admission rates (chronic ACSC) - North East & North Cumbria CCGs compared to England
All Ages

Trend in Unplanned admission rates (chronic ACSC) - North East & North Cumbria CCGs compared to England
Ages 65-79

Trend in Unplanned admission rates (chronic ACSC) - North East & North Cumbria CCGs compared to England
Ages 80+

Healthcare Utilisation

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Definitions / Notes
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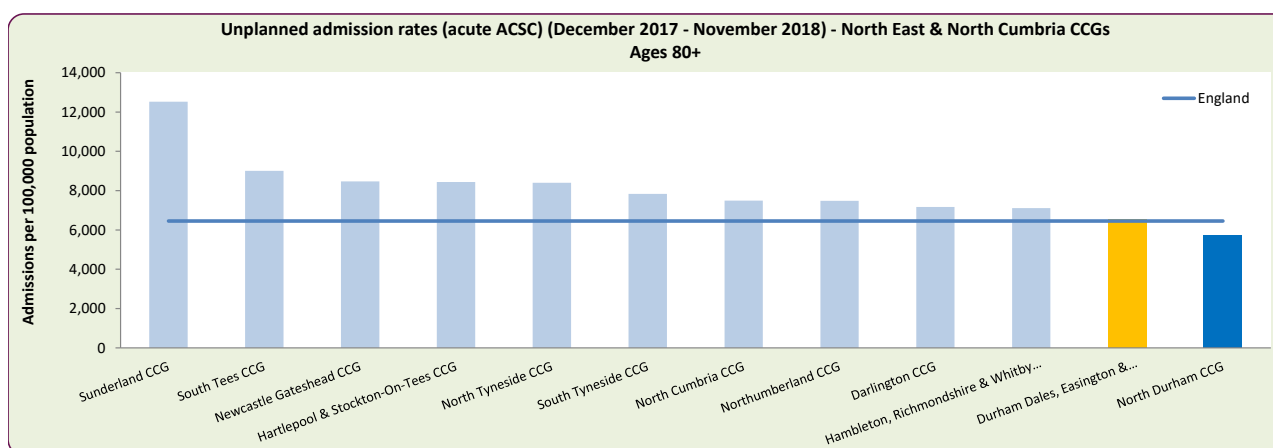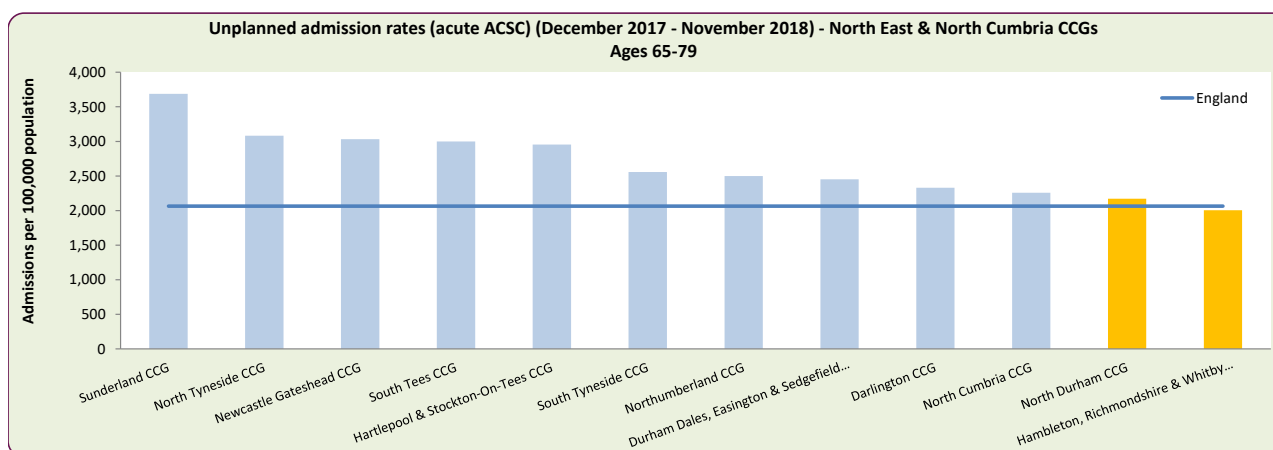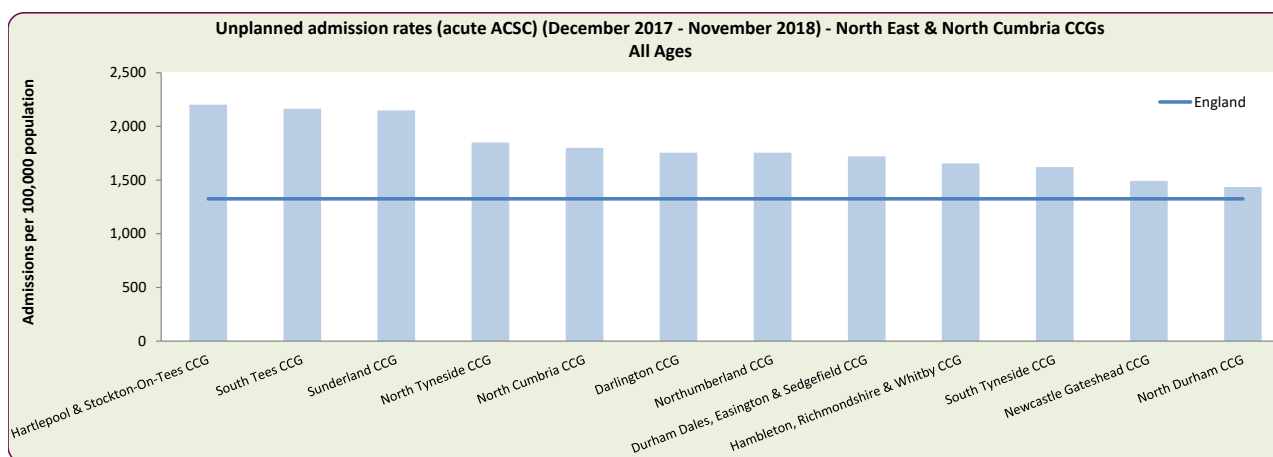**What is the data telling us?**
The unplanned hospital admission rates for chronic ambulatory care sensitive conditions for the North East and Cumbria / North Cumbria are consistently higher than the England rate and roughly follow the same trend over time.

57. Unplanned hospital admission rates for acute ACSC (Dec 2017 - Nov 2018)

Rates of Emergency admissions for acute conditions that should not usually require hospital admission (Rate per 100,000).
All ages, 65-79 years, 80+ years.

All Ages		65-79 years		80+ years	
North East & North Cumbria CCGs	England	**North East & North Cumbria CCGs**	England	**North East & North Cumbria CCGs**	England
1797	1326	2696	2064	8091	6454

Unplanned admission rates (acute ACSC) (December 2017 - November 2018) - North East & North Cumbria CCGs
All Ages

Unplanned admission rates (acute ACSC) (December 2017 - November 2018) - North East & North Cumbria CCGs
Ages 65-79

Unplanned admission rates (acute ACSC) (December 2017 - November 2018) - North East & North Cumbria CCGs
Ages 80+

Definitions / Notes & **What is the data telling us?** See the following page

Healthcare Utilisation

57. Unplanned hospital admission rates for acute ACSC (Dec 2017 - Nov 2018)

Admission rates for Emergency admissions for acute conditions that should not usually require hospital admission (Rate per 100,000).
All ages, 65-79 years, 80+ years.

All Ages		65-79 years		80+ years	
North East & North Cumbria CCGs	**England**	**North East & North Cumbria CCGs**	**England**	**North East & North Cumbria CCGs**	**England**
1797	1326	2696	2064	8091	6454

Data source: Hospital Episode Statistics, Copyright © 2019, re-used with the permission of NHS Digital. All rights reserved.

Definitions / Notes
2018/19 HES data is provisional.

What is the data telling us?
Ambulatory care sensitive conditions (ACSCs) are conditions where effective community care and case management can help prevent the need for hospital admission. Even if the ACSC episode itself is managed well, an emergency admission for an ACSC is often a sign of the poor overall quality of primary and community care.[48]

Acute ACSCs relate to problems for which early intervention can prevent more serious progression to a problem that requires hospital admission.

The conditions included in the acute ACSC category are:
- Dehydration and gastroenteritis
- Pyelonephritis
- Perforated/bleeding ulcer
- Cellulitis
- Pelvic inflammatory disease
- Ear, nose and throat infections
- Dental conditions
- Convulsions and epilepsy
- Gangrene

These graphs reflect the pressures on urgent care in this region. On average, the region experiences significantly higher rates of unplanned admissions for acute ACSC problems than the rest of the country.

Between December 2017 and November 2018, regardless of age, the regional rate (1797 per 100,000) was 36% higher than the national rate (1326 per 100,000).

For the 65-79 year age group, the regional rate (2696 per 100,000) was 31% higher than the national rate (2064 per 100,000). For the "frail elderly" related age band, (over eighty years) the regional rate was 25% higher than the England average (i.e. 8091 per 100,000 versus 6454 per 100,000).
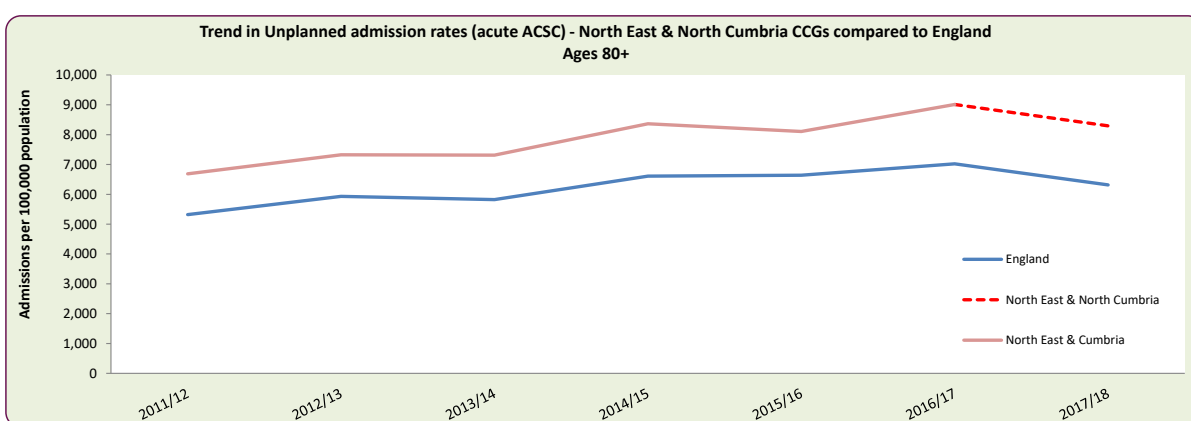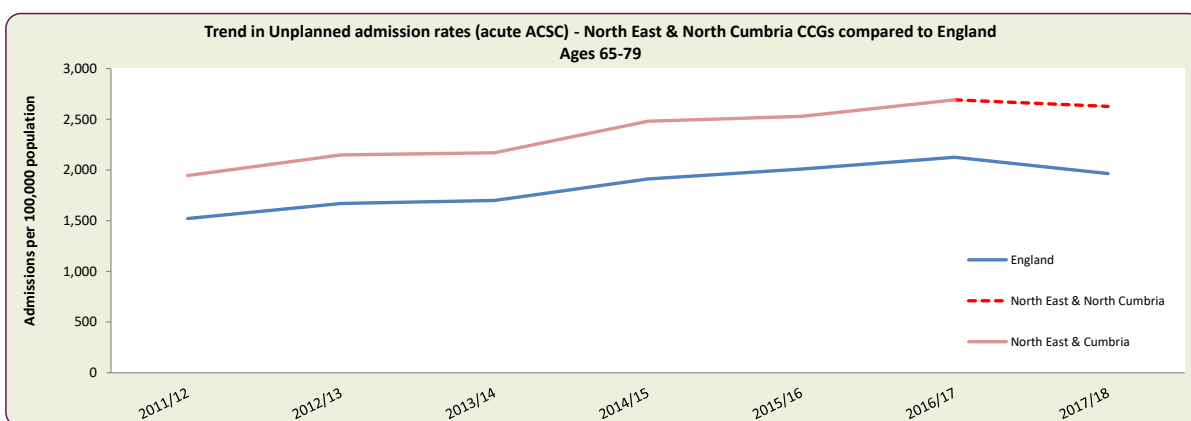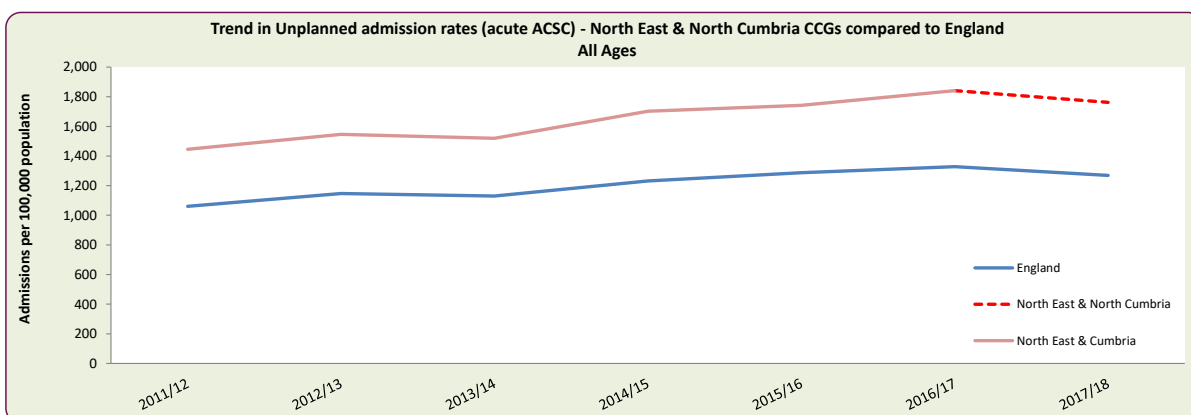
The high rates of unplanned admissions are evident in most CCG populations in this region. There are some interesting differences between the CCG age specific rates. For example, the Sunderland CCG population experiences high rates of unplanned admissions, particularly in the 80+ age group.

48. NHS England. Emergency admissions from Ambulatory Care Sensitive Conditions. March 2014.

Healthcare Utilisation

57. Trend in Unplanned hospital admission rates for acute ACSC

Admission rates for Emergency admissions for acute conditions that should not usually require hospital admission. (Rate per 100,000).
All ages, 65-79 years, 80+ years.

All Ages		65-79 years		80+ years	
North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England
1797	1326	2696	2064	8091	6454

Trend in Unplanned admission rates (acute ACSC) - North East & North Cumbria CCGs compared to England
All Ages

Trend in Unplanned admission rates (acute ACSC) - North East & North Cumbria CCGs compared to England
Ages 65-79

Trend in Unplanned admission rates (acute ACSC) - North East & North Cumbria CCGs compared to England
Ages 80+

Healthcare Utilisation

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Definitions / Notes
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What is the data telling us?
The unplanned hospital admission rates for acute ACSC for the region are consistently higher than the England rate although in 2017/18 the rate has dropped, particularly in the 80+ age group.

58. A&E Attendance Rates (Dec 2017 - Nov 2018)

Number of A&E Attendances per 1,000 population. Includes attendances at Type 1 or Type 3 A&E departments - see note below.
All ages.

All Ages	
North East & North Cumbria CCGs	**England**
413	**340**
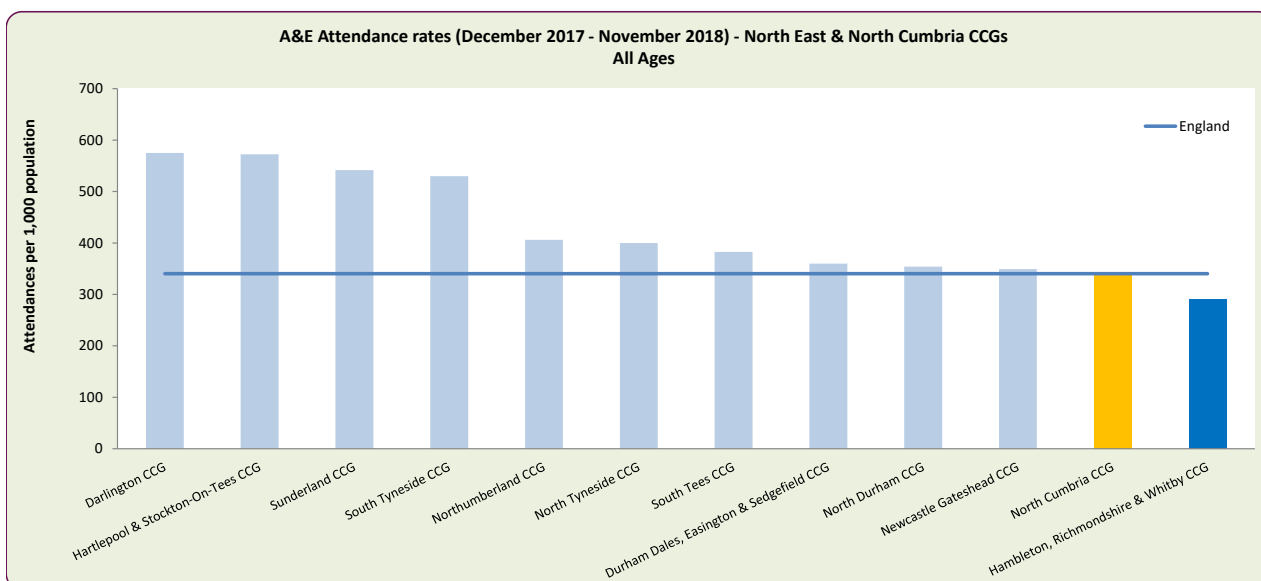
A&E Attendance rates (December 2017 - November 2018) - North East & North Cumbria CCGs All Ages

Data source: Hospital Episode Statistics, Copyright © 2019, re-used with the permission of NHS Digital. All rights reserved.

Definitions / Notes
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This indicator reports on the number of A&E Attendances per 1,000 population. Attendances at type 01 and type 03 A&E Departments are included.
Type 01: Emergency departments with a consultant led 24 hour service with full resuscitation facilities and designated accommodation for the reception of A&E patients.
Type 03: Other type of A&E/minor injury departments for the reception of A&E patients where the department may be doctor-led or nurse-led and treats at least minor injuries and illnesses.

Attendances at NHS walk-in centres and single speciality (e.g. ophthalmology) emergency departments are excluded from the above analysis.

What is the data telling us?
These data focus on A&E attendance rates for all ages only. In previous versions of this document we reported on rates for broad age groups. However, data quality problems with the HES data for the latest time period prevent such analysis for this report.

Regional pressures on A&E departments are evident, with regional attendance rates of 413 per 1000, 21% higher than the national average rate of 340 per 1000. However, this picture differs across CCG populations with significantly lower attendance rates in Hambleton, Richmondshire & Whitby CCG contrasting with significantly higher attendance rates in a number of CCGs, notably Darlington CCG, Hartlepool & Stockton on Tees CCG, Sunderland CCG and South Tyneside CCG.

Healthcare Utilisation

58. Trend in A&E Attendance Rates

Number of A&E Attendances per 1,000 population. Includes only attendances at Type 1 or Type 3 A&E departments - see note below.
All ages & 0-4 years.

All Ages	
North East & North Cumbria CCGs	England
413	340
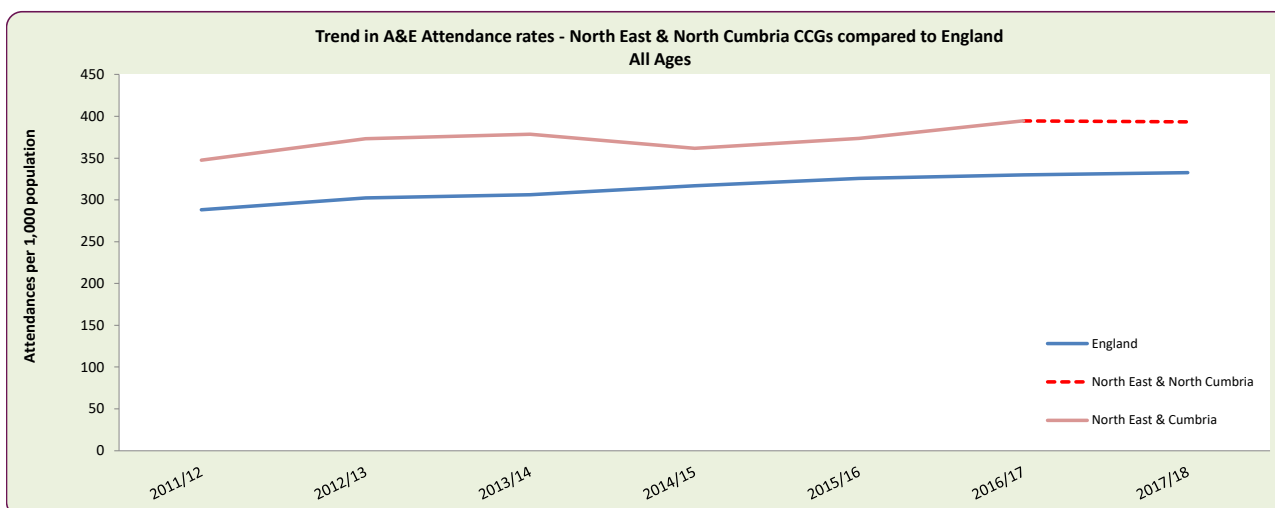
Trend in A&E Attendance rates - North East & North Cumbria CCGs compared to England
All Ages

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This indicator reports on the number of A&E Attendances per 1,000 population. Attendances at type 01 and type 03 A&E Departments are included.
Type 01: Emergency departments with a consultant led 24 hour service with full resuscitation facilities and designated accommodation for the reception of A&E patients.
Type 03: Other type of A&E/minor injury departments for the reception of A&E patients where the department may be doctor-led or nurse-led and treats at least minor injuries and illnesses.

Attendances at NHS walk-in centres and single speciality (e.g. ophthalmology) emergency departments are excluded from the above analysis.
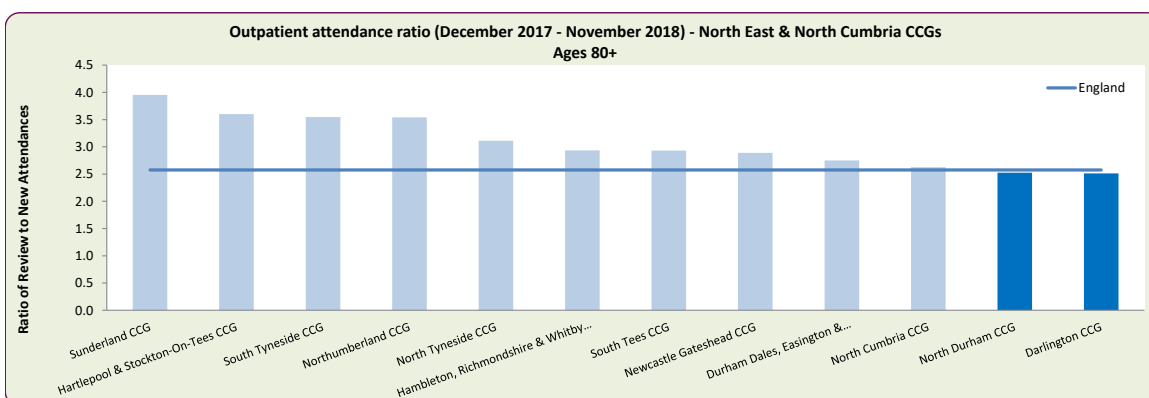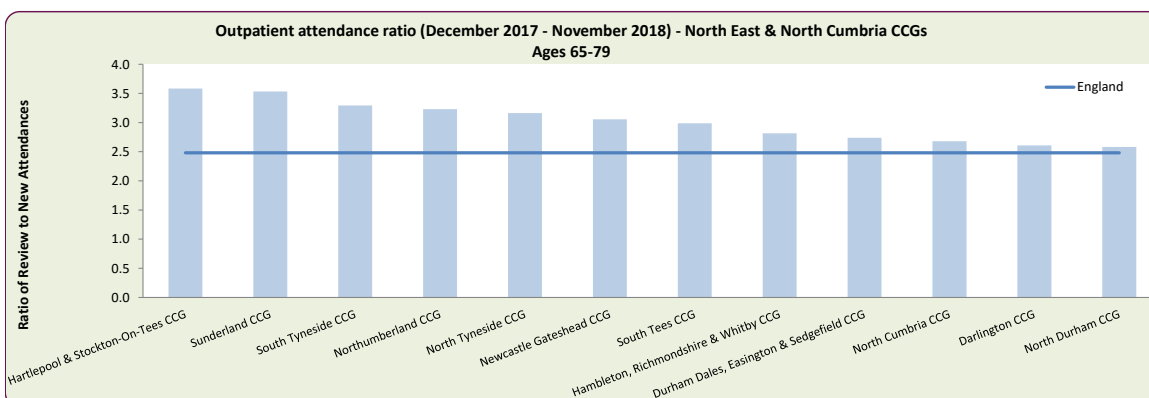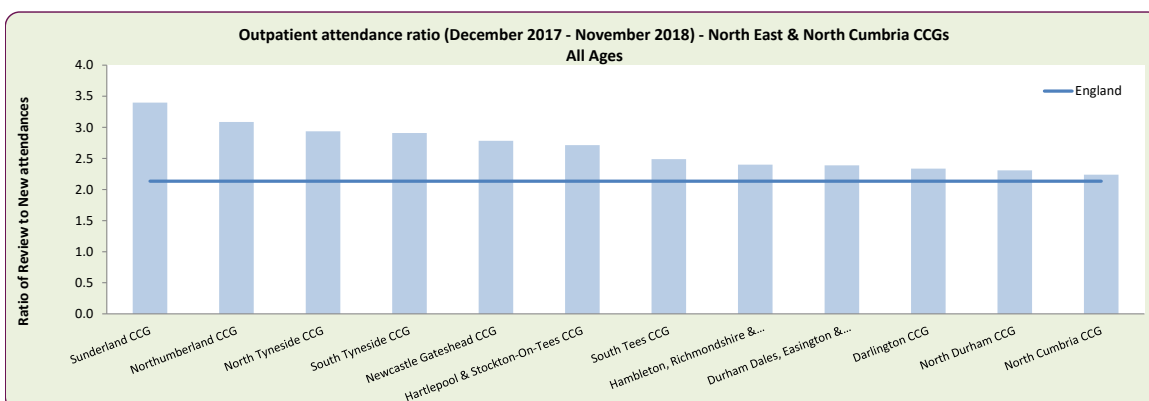
What is the data telling us?
The national rate for A&E attendances is very slowly increasing over time. A similar trend has been evident in the region, although with slightly more fluctuation. In the most recent time period, the NENC rate appears to have plateaued.

Healthcare Utilisation

59. Outpatient attendance ratio (Dec 2017 - Nov 2018)

Number of review outpatient attendances per first attendance.
All ages, 65-79 years, 80+ years.

All Ages		65-79 years		80+ years	
North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England
2.75	2.13	3.06	2.48	3.14	2.58

Outpatient attendance ratio (December 2017 - November 2018) - North East & North Cumbria CCGs — All Ages

Outpatient attendance ratio (December 2017 - November 2018) - North East & North Cumbria CCGs — Ages 65-79

Outpatient attendance ratio (December 2017 - November 2018) - North East & North Cumbria CCGs — Ages 80+

Healthcare Utilisation

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Definitions / Notes

2018/19 HES data is provisional.

What is the data telling us?

These data indicate the extent to which patients are followed up in secondary care clinics following the first outpatient attendance. Whilst, the ideal ratio cannot be defined, multiple review appointments may offer opportunities to reduce costs. This ratio is a close reflection of Trust managed activity.

These data indicate that, during the period between December 2017 and November 2018, patients in the AHSN NENC region are significantly more likely to have repeated follow-up appointments than, on average, patients in the rest of England. This pattern is the same for the age range 65-79 years and 80+ years.
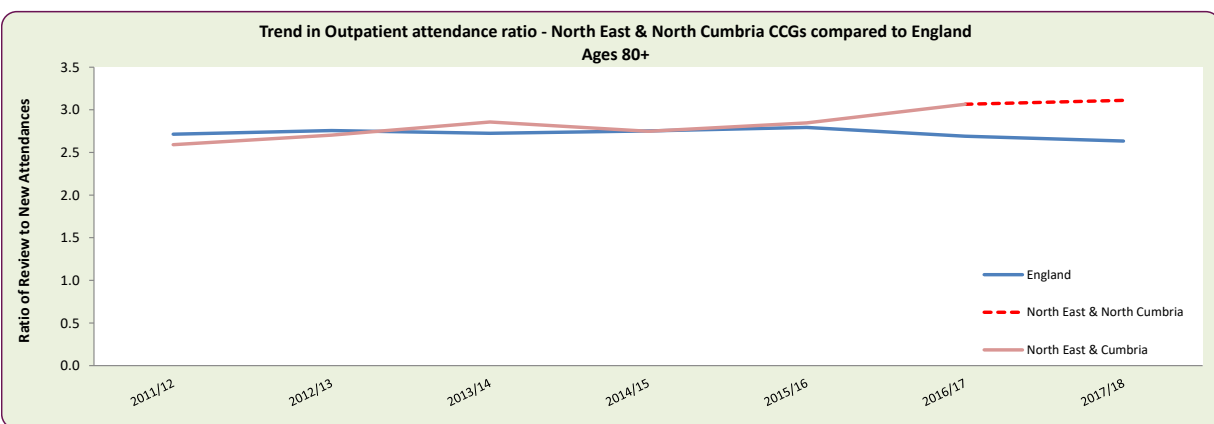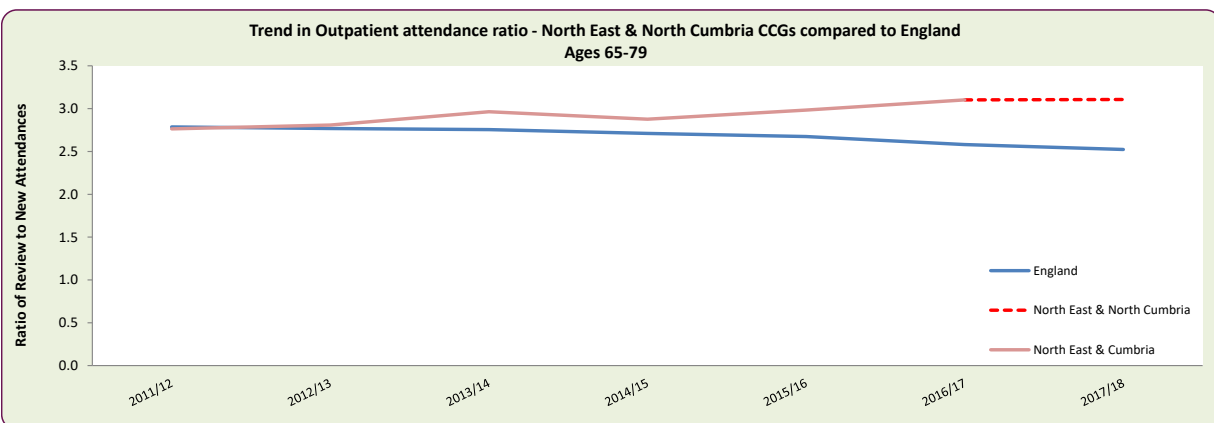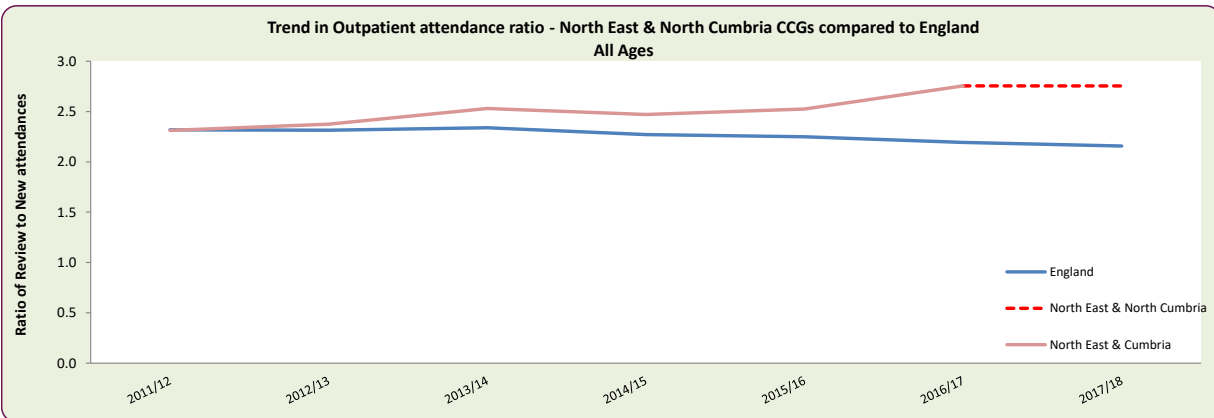
Intra–regional variation is evident and ranges from values significantly below the national average for ratios concerning the North Durham CCG and the Darlington CCG population aged 80+, to values significantly above the national average for ratios concerning patients aged 65+ served by several CCGs, notably Sunderland CCG and Hartlepool and Stockton on Tees CCG.

59. Trend in Outpatient attendance ratio

Number of review outpatient attendances per first attendance.
All ages, 65-79 years, 80+ years.

	All Ages		65-79 years		80+ years	
	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England
	2.75	2.13	3.06	2.48	3.14	2.58

Trend in Outpatient attendance ratio - North East & North Cumbria CCGs compared to England
All Ages

Trend in Outpatient attendance ratio - North East & North Cumbria CCGs compared to England
Ages 65-79

Trend in Outpatient attendance ratio - North East & North Cumbria CCGs compared to England
Ages 80+

Healthcare Utilisation

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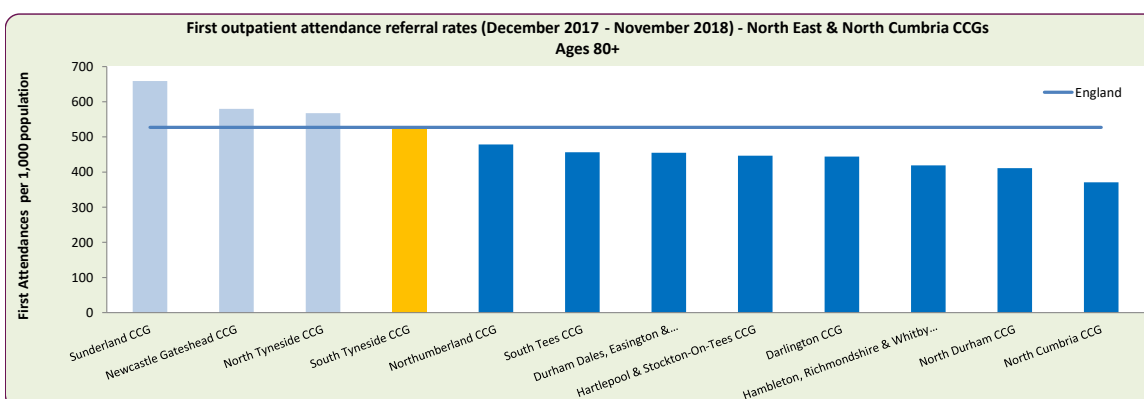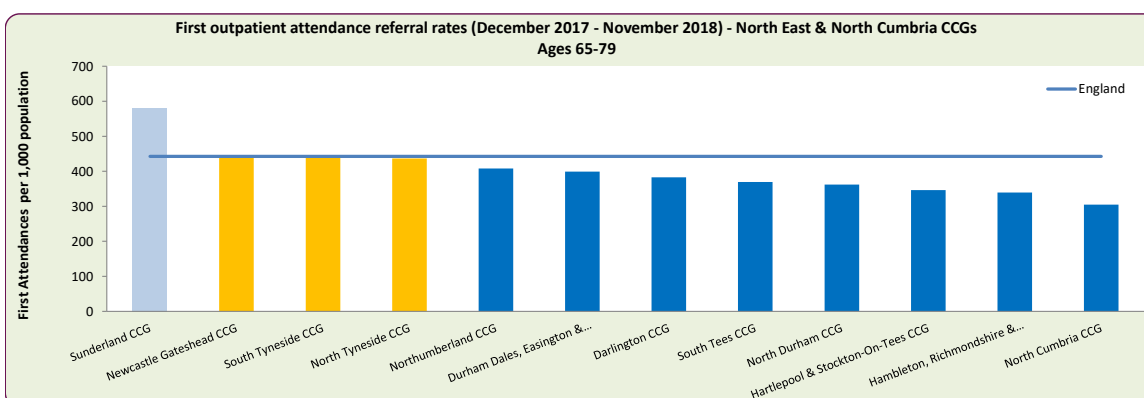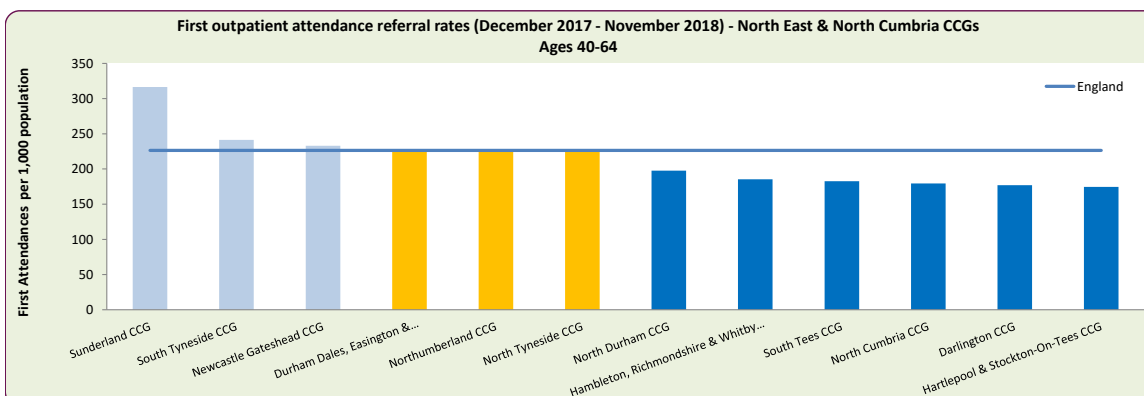
What is the data telling us?

While the outpatient attendance ratio for England has been fairly static or falling over time, the ratio in the AHSN NENC region is increasing, so the gap between the AHSN NENC region and England is widening.

60. Age specific first outpatient attendance referral rates (Dec 2017 - Nov 2018)

Number of first attendances referred by GP per 1,000 population.

40-64 years, 65-79 years, 80+ years.

40-64 years		65-79 years		80+ years	
North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England
217	226	401	443	488	527

First outpatient attendance referral rates (December 2017 - November 2018) - North East & North Cumbria CCGs
Ages 40-64

First outpatient attendance referral rates (December 2017 - November 2018) - North East & North Cumbria CCGs
Ages 65-79

First outpatient attendance referral rates (December 2017 - November 2018) - North East & North Cumbria CCGs
Ages 80+

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Definitions / Notes

2018/19 HES data is provisional.

What is the data telling us?

This indicator measures the probability of patients being referred to specialist clinics. The ideal rate cannot be defined but unusually low rates might reflect unmet need whereas unusually high rates might reflect inappropriate use of scarce resources. This rate is a reflection of GP managed activity.

These data indicate that, during the period between December 2017 and November 2018, patients in the AHSN NENC region were significantly less likely to be referred to outpatient clinics than, on average, patients in the rest of England. This pattern is the same for those aged 40-64 years, 65 -79 years and those aged 80+ years.

Age specific comparisons indicate that increasing age is associated with a greater probability of referral, which is consistent with age related morbidity rates.
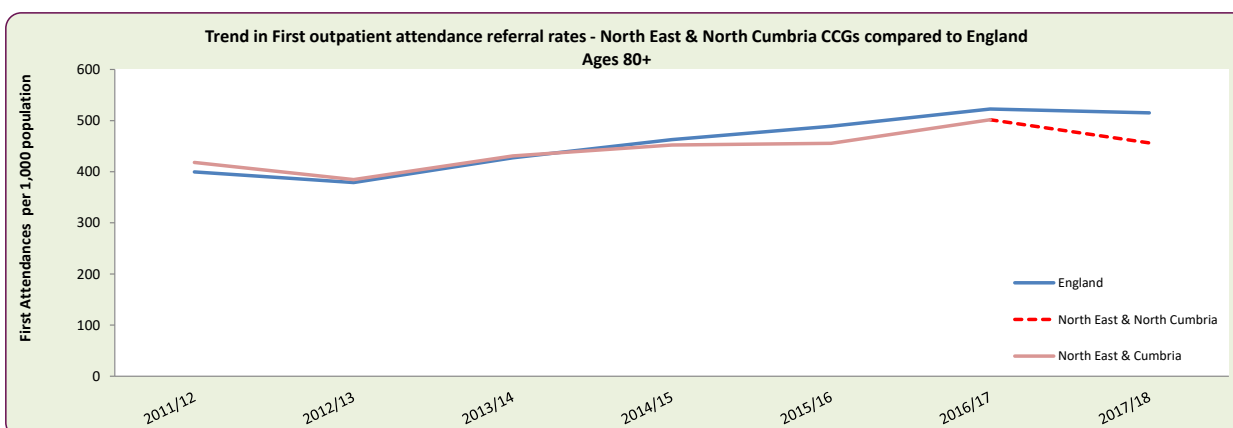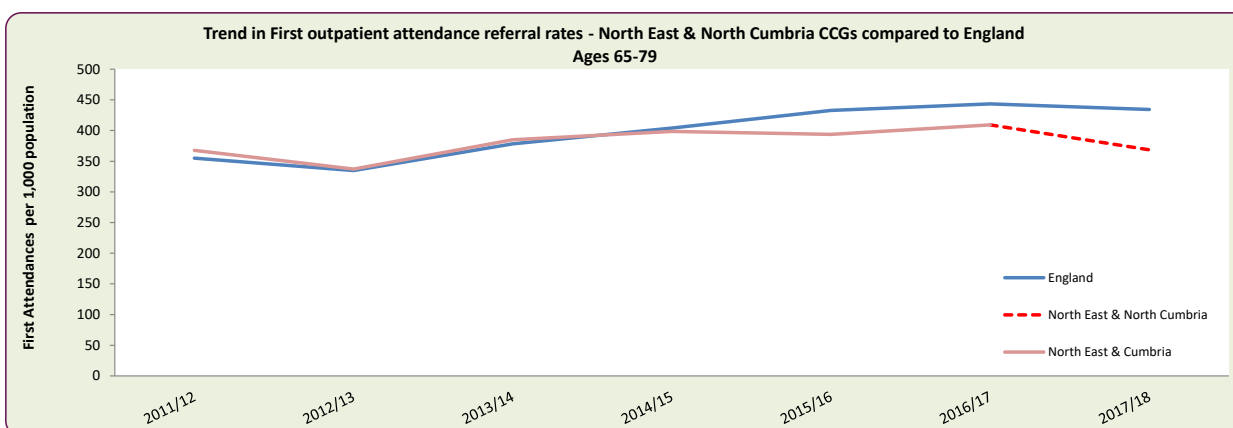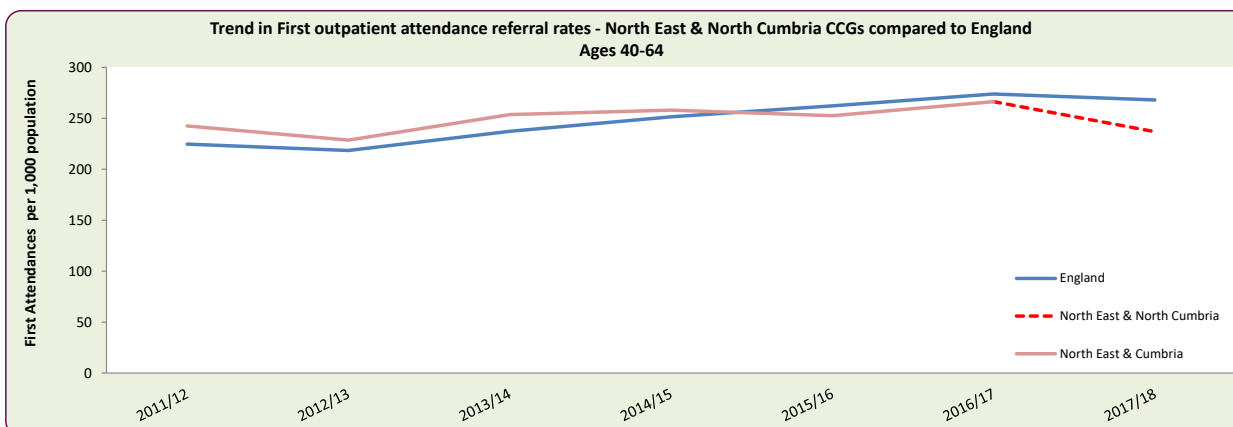
Intra–regional variation is evident with rates generally higher in the north of the region compared with those in the south and North Cumbria.

Healthcare Utilisation

60. Trend in age specific first outpatient attendance referral rates

Number of first attendances referred by GP per 1,000 population.
40-64 years, 65-79 years, 80+ years.

40-64 years		65-79 years		80+ years	
North East & North Cumbria CCGs	England	*North East & North Cumbria CCGs*	England	*North East & North Cumbria CCGs*	England
217	226	401	443	488	527

Trend in First outpatient attendance referral rates - North East & North Cumbria CCGs compared to England
Ages 40-64

Trend in First outpatient attendance referral rates - North East & North Cumbria CCGs compared to England
Ages 65-79

Trend in First outpatient attendance referral rates - North East & North Cumbria CCGs compared to England
Ages 80+

Healthcare Utilisation

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Definitions / Notes

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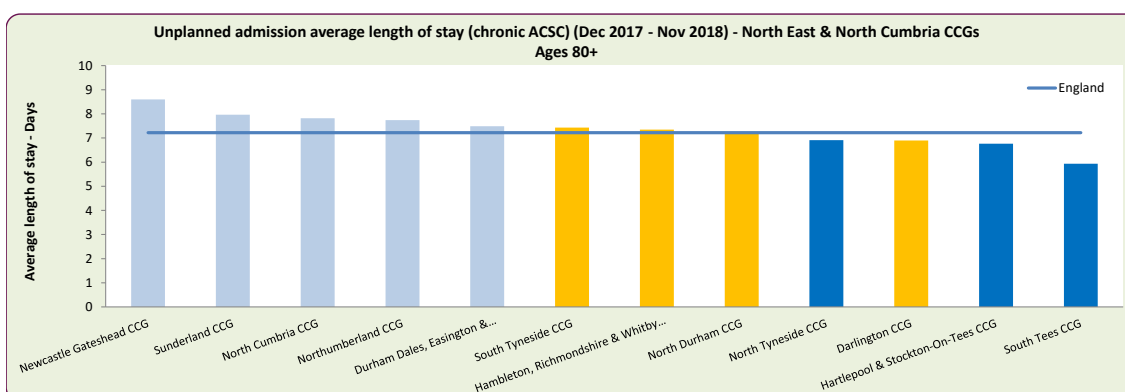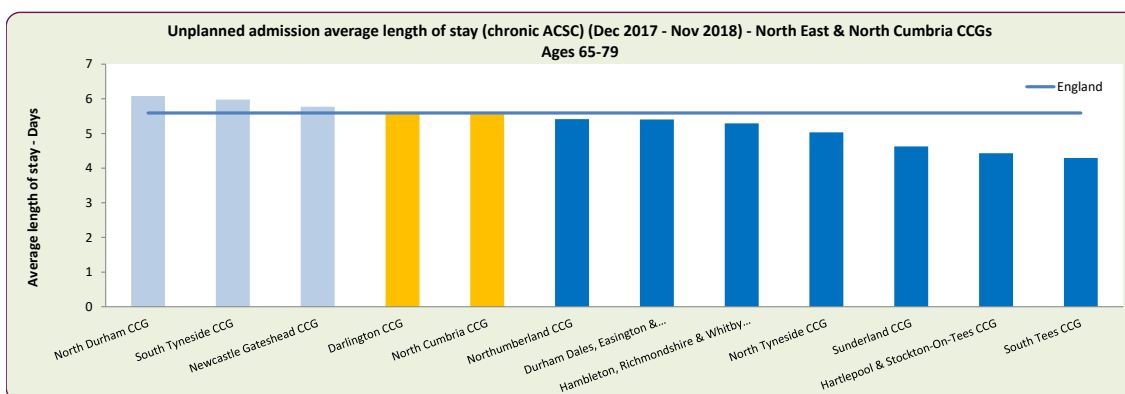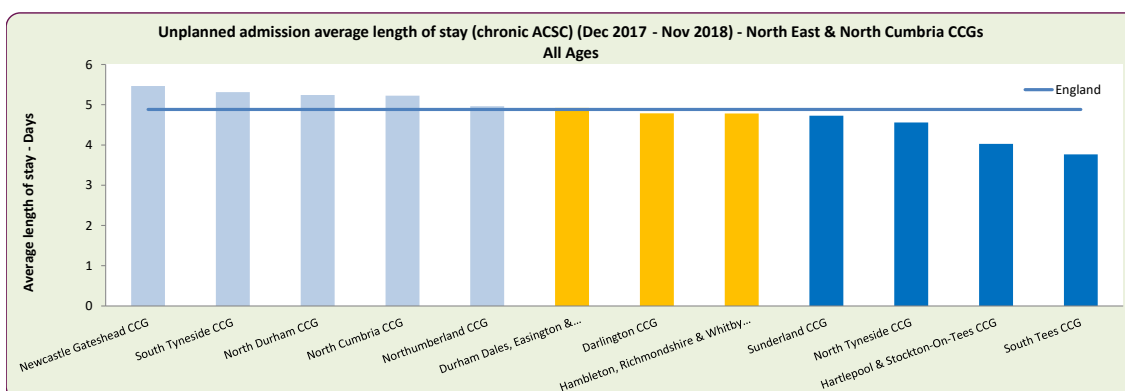
What is the data telling us?

After several years in which there was an upward trend, both regionally and nationally, in outpatient attendance referral rates, the data for the most recent time period shows a fall in the rate, although the drop has been more pronounced in the AHSN NENC region. The pattern is similar across the three age ranges.

Compared with England ■ Significantly Higher ■ Similar ■ Significantly Lower

61. Unplanned admission average length of stay (chronic ACSC) (Dec 2017 - Nov 2018)
Average length of stay for admissions for unplanned hospitalisation for chronic ambulatory care sensitive conditions.
All ages, 65-79 years, 80+ years.

All Ages		65-79 years		80+ years	
North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England
4.8	4.9	5.2	5.6	7.4	7.2

Unplanned admission average length of stay (chronic ACSC) (Dec 2017 - Nov 2018) - North East & North Cumbria CCGs
All Ages

Unplanned admission average length of stay (chronic ACSC) (Dec 2017 - Nov 2018) - North East & North Cumbria CCGs
Ages 65-79

Unplanned admission average length of stay (chronic ACSC) (Dec 2017 - Nov 2018) - North East & North Cumbria CCGs
Ages 80+

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Definitions / Notes
2018/19 HES data is provisional.

What is the data telling us?
There is no gold standard length of hospital stay. It is determined by clinical and social need, discharge arrangements and available community support. Unusually long lengths of stay place patients at greater risk of health care related complications such as infections and may indicate cost saving opportunities. Unusually short lengths of stay may be associated with higher rates of readmission. These data concern unplanned admissions for patients suffering chronic ACSCs (as previously defined in this report).

These data indicate that during the period between December 2017 and November 2018, patients aged under 80 years, from the AHSN NENC region, who were admitted to hospital as emergencies with chronic ACSCs, had shorter lengths of stay than their counterparts nationally. Length of hospital stay, unsurprisingly, increased with age, and amongst those 80 years and above, the average length of stay in the region was above the national average.
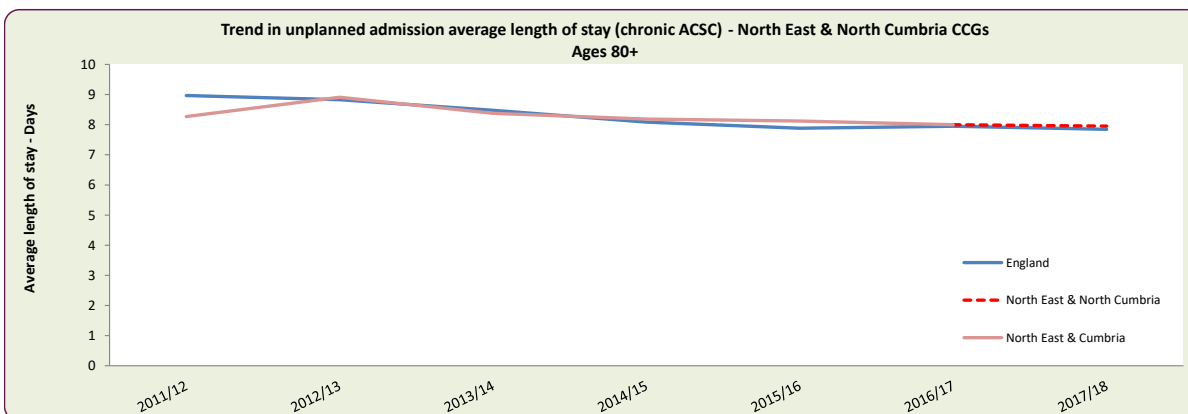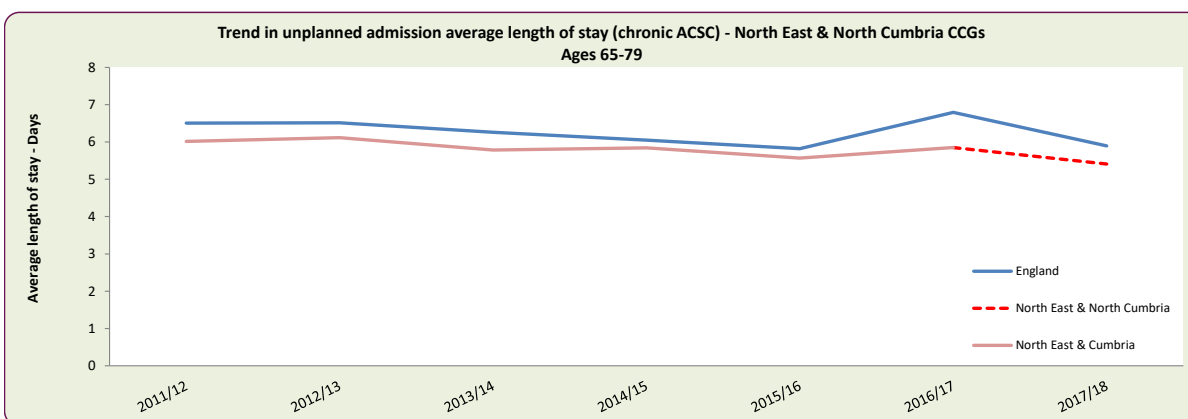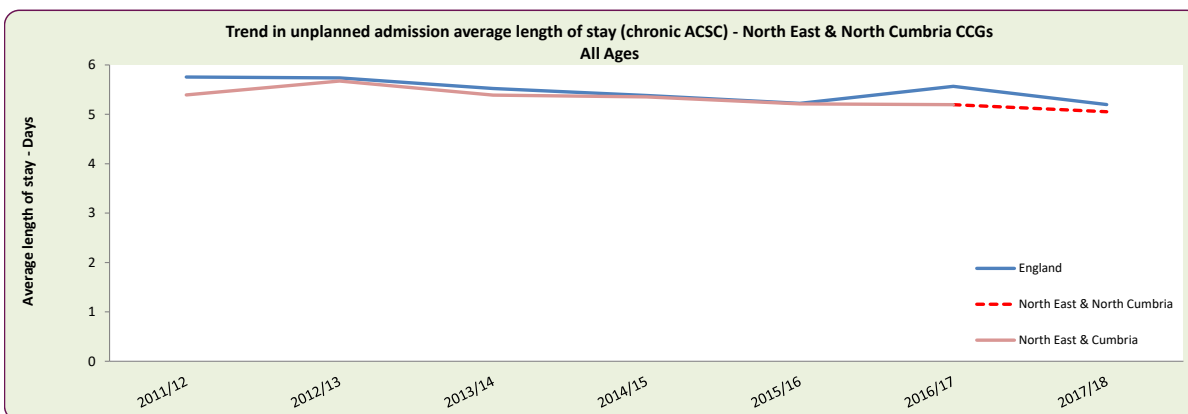
The same data indicate variation between CCG populations in the region, some with significantly longer, and some with significantly shorter, lengths of stay.

61. Trend in unplanned admission average length of stay (chronic ACSC)

Average length of stay for admissions for unplanned hospitalisation for chronic ambulatory care sensitive conditions.
All ages, 65-79 years, 80+ years.

All Ages		65-79 years		80+ years	
North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England
4.8	4.9	5.2	5.6	7.4	7.2

Trend in unplanned admission average length of stay (chronic ACSC) - North East & North Cumbria CCGs
All Ages

Trend in unplanned admission average length of stay (chronic ACSC) - North East & North Cumbria CCGs
Ages 65-79

Trend in unplanned admission average length of stay (chronic ACSC) - North East & North Cumbria CCGs
Ages 80+

Healthcare Utilisation

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What is the data telling us?
The unplanned admission average length of stay rate for those aged 80+ years closely follows the national trend. For the All Ages and those aged 65-79 years, rates diverged in 2016/17 when the England rate increased, but in 2017/18 appear to be converging again.
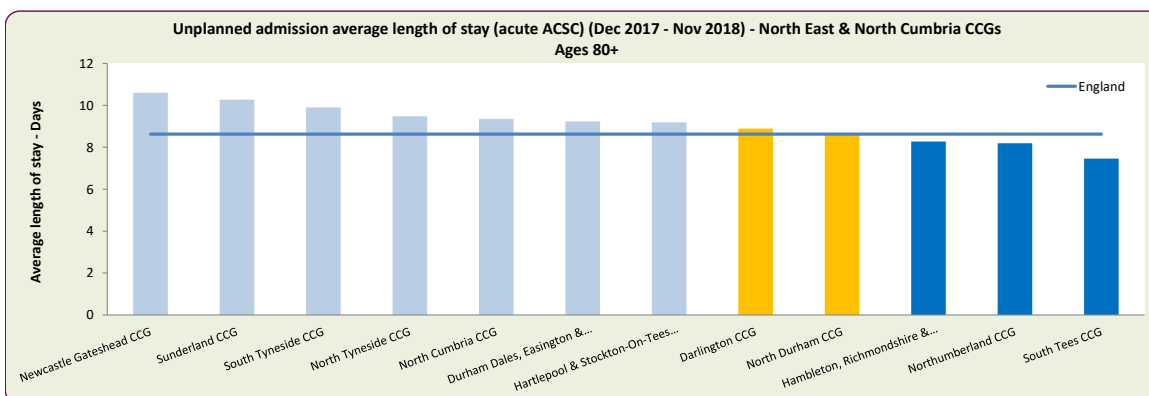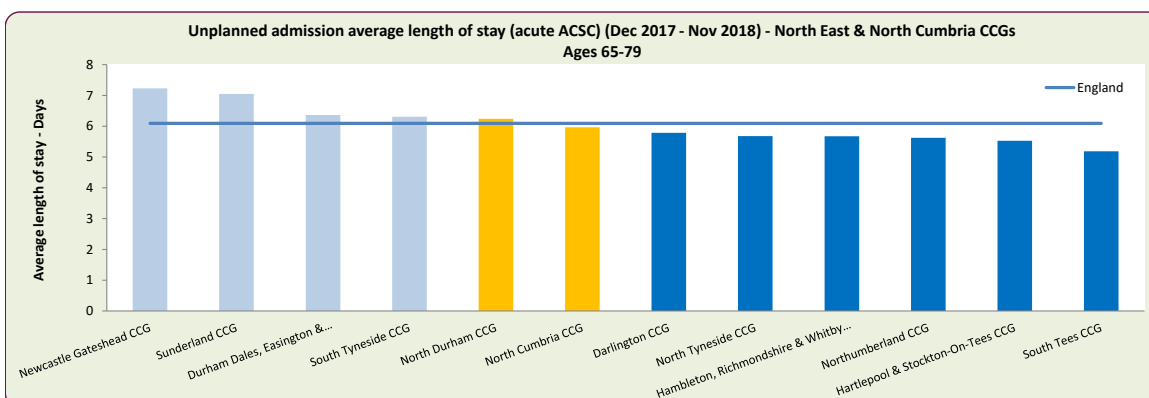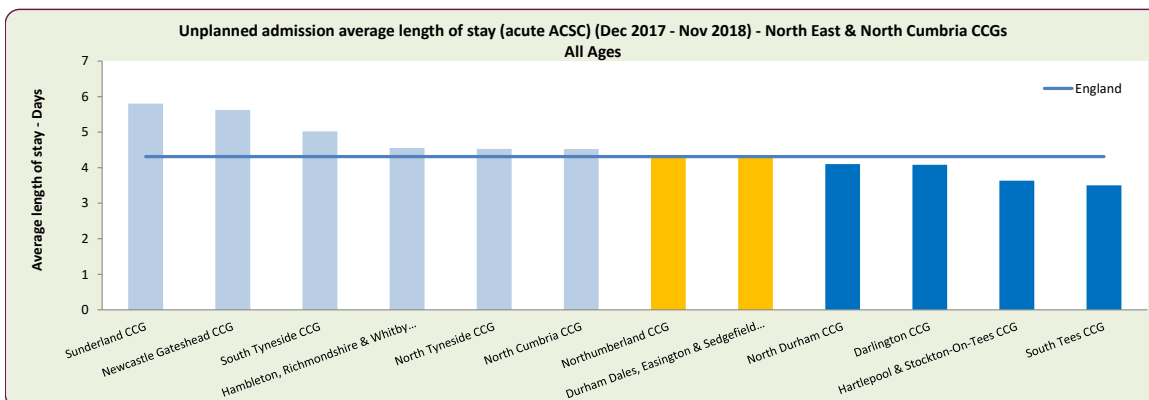
62. Unplanned admission average length of stay (acute ACSC) (Dec 2017 - Nov 2018)

Average length of stay for emergency admissions for acute conditions that should not usually require hospital admission. All ages, 65-79 years, 80+ years.

	All Ages		65-79 years		80+ years	
	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England
	4.54	4.31	6.14	6.09	9.26	8.63

Unplanned admission average length of stay (acute ACSC) (Dec 2017 - Nov 2018) - North East & North Cumbria CCGs — All Ages

Unplanned admission average length of stay (acute ACSC) (Dec 2017 - Nov 2018) - North East & North Cumbria CCGs — Ages 65-79

Unplanned admission average length of stay (acute ACSC) (Dec 2017 - Nov 2018) - North East & North Cumbria CCGs — Ages 80+

Healthcare Utilisation

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Definitions / Notes

2018/19 HES data is provisional.

What is the data telling us?

There is no gold standard length of hospital stay. It is determined by clinical and social need, discharge arrangements and available community support. Unusually long lengths of stay place patients at greater risk of health care related complications such as infections and may indicate cost saving opportunities. However, unusually short lengths of stay may be associated with higher rates of readmission. These data concern unplanned admissions for patients suffering acute ACSCs (as previously defined in this report).

These data indicate that during the period between December 2017 and November 2018, patients from the AHSN NENC region who were admitted to hospital as emergencies with acute ACSCs, had longer lengths of stay than their counterparts nationally. This pattern was consistent regardless of age band. Length of hospital stay, unsurprisingly, increased with age.
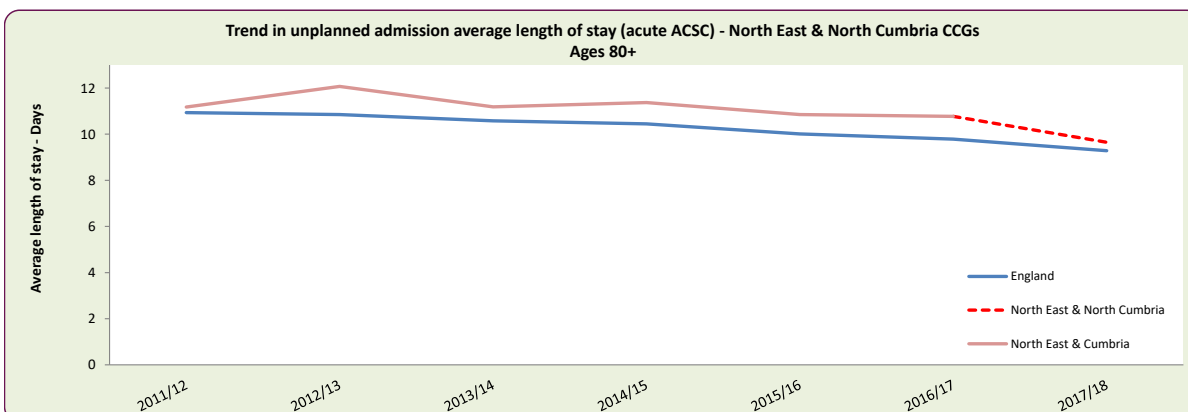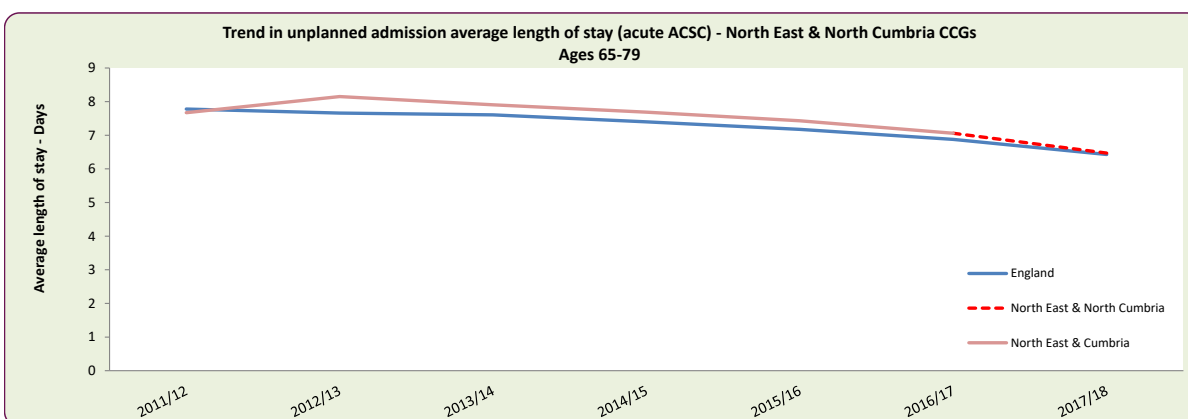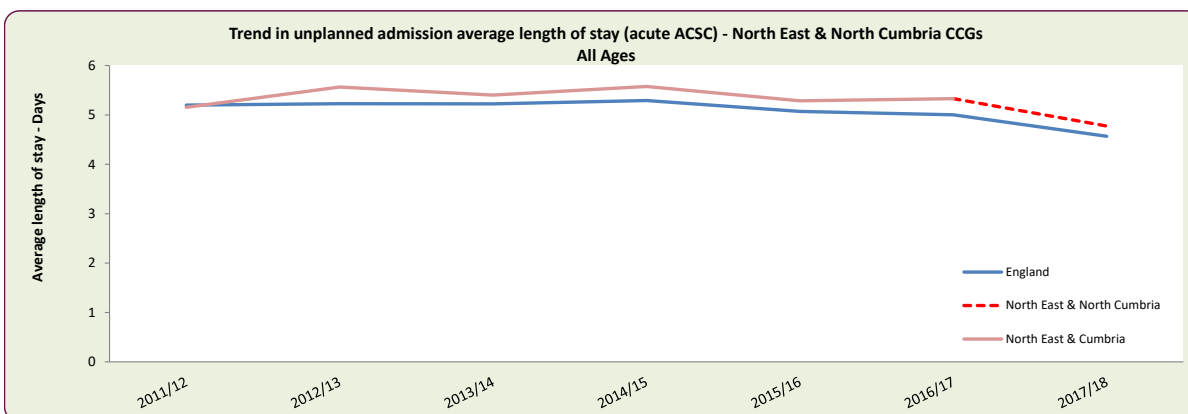
The same data indicate variation between CCG populations in the region, some with significantly longer, and some with significantly shorter, lengths of stay. The length of stay varies according to age band and geography.

62. Trend in unplanned admission average length of stay (acute ACSC)

Average length of stay for emergency admissions for acute conditions that should not usually require hospital admission.
All ages, 65-79 years, 80+ years.

All Ages		65-79 years		80+ years	
North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England	North East & North Cumbria CCGs	England
4.54	4.31	6.14	6.09	9.26	8.63

Trend in unplanned admission average length of stay (acute ACSC) - North East & North Cumbria CCGs
All Ages

Trend in unplanned admission average length of stay (acute ACSC) - North East & North Cumbria CCGs
Ages 65-79

Trend in unplanned admission average length of stay (acute ACSC) - North East & North Cumbria CCGs
Ages 80+

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What is the data telling us?
The unplanned admission average length of stay is reducing over time, both regionally and nationally. Between 2016/17 and 2017/18 the average length of stay in the NENC area reduced more than the national average length of stay, so the gap between the region and England has reduced.

Healthcare Utilisation