

System Transformation Programme

Engagement Fact Pack: Peterborough & Borderline

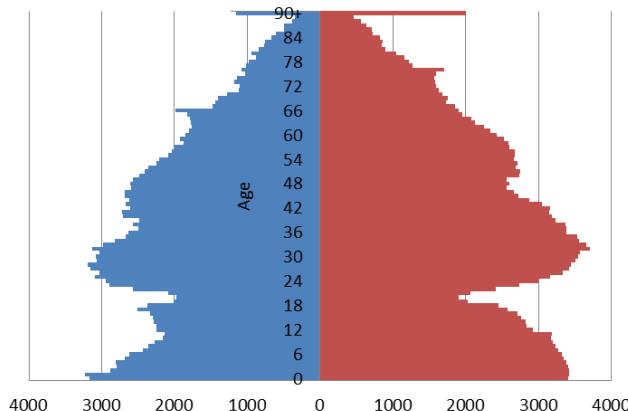
September 2015



This pack contains data published for different geographical areas. The closest match to the area served by the Peterborough and Borderline Local Commissioning Groups has been used throughout. Depending on the data source, this may be the locality, the local authority of Peterborough or the CCG catchment area.

Population

Peterborough Population Pyramid - 2013 to 2023



- The total resident population of Peterborough was 189,300 in 2013 and is forecast to rise by 19% to 2023, reaching a total of 224,800.
- The population aged 65 and over is forecast to rise by 28% by 2023. The number of people aged 90 or over will almost double in this time.
- The number of children and young people aged 18 and under is forecast to rise by 23% to 2023.

Source: Cambridgeshire County Council Research Group 2013-based population forecasts

Primary Care

Local context

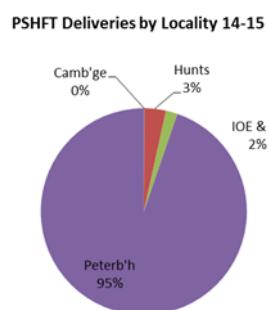
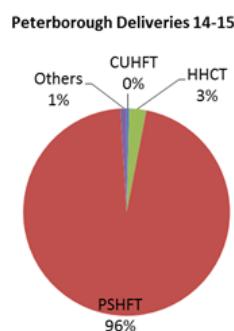
- There are 29 GP practices Peterborough and Borderline Local Commissioning Groups, which make up the locality. Together these serve a registered population of 257,000. List sizes vary from 2,000 to 25,800, with an average list size of 8,900 compared to a CCG average of 8,700.
- If practice populations increase in line with expected population growth, average list size will rise to 10,600 in 2023 (an increase of 19%).

National GP pressures (source: Nuffield Trust Election Briefing 2015 - <http://www.nuffieldtrust.org.uk/blog/facts-figures-and-views-health-and-social-care-resource-reporters-2015-general-election>)

- 90% of NHS contacts take place in primary care (HSCIC survey 2012/13)
- Spending on core GP services fell by over 2% in real terms during the 2010-2015 parliament
- The number of people saying they had failed to get an appointment rose from 9% to 11% from 2011/12 to 2013/14
- Consultations at GP surgeries rose by 11% from 2010 to 2014, though most of the increase was in nurse consultations and consultations with 'others' (e.g. pharmacists) (based on a sample of 337 practices)
- Nationally, FTE GP numbers rose by 4.8% from 2010 to 2014, compared to 7% in hospital doctors
- 12% of GPs now work part-time; more than 10% of slots for new GP trainees in practices were left empty in 2014.

Births and deliveries

- There were 3,200 births to women living in Peterborough in 2013. This is forecast to rise to 3,440 in 2023.
- 96% of women registered with Peterborough and Borderline locality GPs deliver at PSHFT. Very small proportions deliver at HHCT and other Trusts.
- Of CCG births at PSHFT, almost all were from Peterborough and Borderline locality. 62% of deliveries at the Trust were 'normal', 12% were assisted and 27% were caesarean sections.

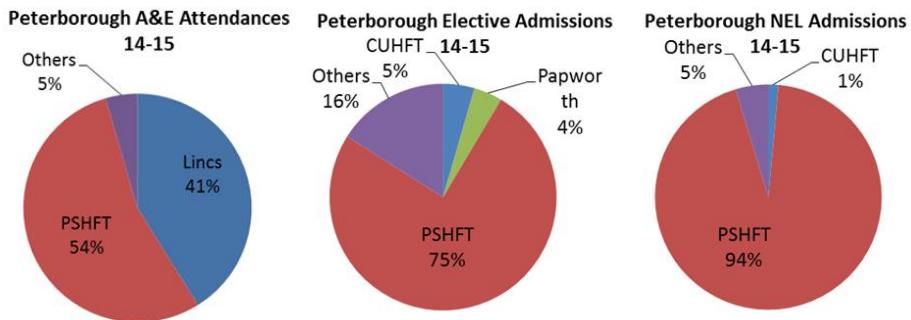


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Secondary care use by people registered with Peterborough & Borderline GP practices

Attendance patterns

- 95% of people registered with locality GPs who access emergency care do so in Peterborough, either at the minor injuries unit run by Lincolnshire Community Services or at PSHFT.
- For elective inpatient care 75% of admissions are at PSHFT. For non-elective care 94% of admissions are at PSHFT.



Current and projected secondary care activity

	A&E attendances	Outpatients	Elective Admissions	Non-elective Admissions	Procedures
2013/14	57,774	307,347	28,558	22,982	33,757
2018/19	68,484	361,750	34,094	27,542	40,501
% change	18.5%	17.7%	19.4%	19.8%	20.0%

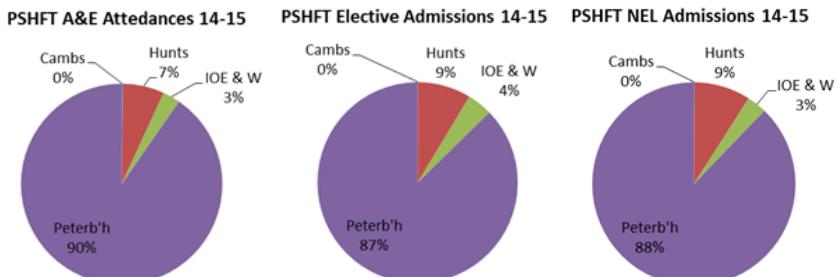
Demand for secondary care across the local population is projected to rise by around 20% over the next five years. This takes into account the effect of population change and rising obesity. Types of activity with an older population profile show the greatest increase.

Secondary care activity at Peterborough & Stamford Hospital (PSHFT)

- The most recent monthly monitoring report (June 2015) recorded 7,036 attendances, which was below the England average of 8,923.
- Each year the Trust sees in the region of 93,000 attendances (including minor injuries unit) compared to 105,000 at CUHFT and 43,000 at HHCT.

Patient composition

- 90% of the A&E attendances at the Trust are from people registered with Peterborough and Borderline GPs. The proportions for elective and non-elective inpatient admissions are similar, with 9% of admissions from the Huntingdonshire locality.



Current and projected CCG secondary care activity at PSHFT

	A&E attendances	Outpatients	Elective admissions	Non-elective Admissions	Procedures
2013/14	60,435	299,621	25,737	23,902	30,955
2018/19	71,711	352,269	30,755	28,745	37,253
% change	18.7%	17.6%	19.5%	20.3%	20.3%

Activity at PSHFT is projected to rise by 18% (outpatients) to 20% (NE admissions and procedures) over the next five years. This takes into account the effect of population change and rising obesity. Types of activity with an older population show the greatest increase.

Data source: 13/14 data taken from SUS; projections are from the System Transformation Programme's Acute Activity Model and include the impact of planned population growth, ageing and rising obesity.

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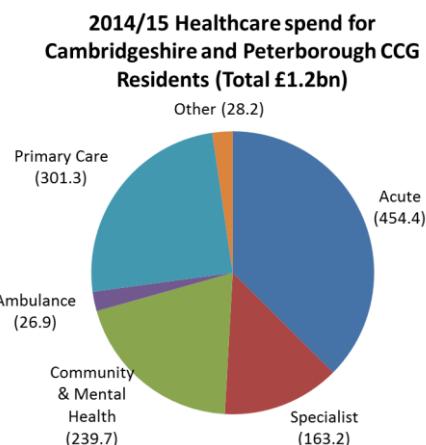
Local Trust Performance in 2014-15 (see glossary on final page for abbreviations)

Organisation	A&E 4hr waits	Referral to Treatment			Elective cancelled operations treated within 28 days	General & Acute Bed Occupancy	Non Elective Average Length of Stay (days)
		Admitted Pathways	Non-admitted pathways	Incomplete pathways			
Target	95.0%	90.0%	95.0%	92.0%	n/a	n/a	n/a
CUHFT	83.9%	86.3%	95.1%	91.5%	88.6%	92.8%	4.6
HHC	92.7%	94.7%	99.2%	96.6%	95.9%	86.3%	5.0
PSHFT	85.6%	89.6%	96.0%	96.6%	88.8%	93.2%	4.7
East Anglia Area Team	92.0%	88.2%	96.1%	93.9%	87.4%	n/a	n/a
National	93.6%	87.6%	95.3%	93.1%	93.7%	89.0%	n/a

	4-hour waits	<ul style="list-style-type: none"> 86% of A&E attendances at PSHFT in 2014/15 were seen within 4 hours. This was below the national target of 95%, the national average of 93.6%, and the East Anglia Area Team average of 92%.
	Referral to treatment	<ul style="list-style-type: none"> PSHFT performed close to the national target on both admitted and non-admitted pathways and was well above target for incomplete pathways.
	Cancelled operations	<ul style="list-style-type: none"> 89% of cancelled elective operations at PSHFT were subsequently treated within 28 days. There is no national target for this but the Trust performed above the regional but below the national average.
	Bed occupancy	<ul style="list-style-type: none"> PSHFT ran at an average bed occupancy rate of 93%, compared to a national average of 89%. They had the highest bed occupancy of any Trust in the patch.
	Av. length of stay	<ul style="list-style-type: none"> Average length of stay for non-elective admissions at PSHFT was 4.7 days, which was comparable to the figure at CUHFT and a little shorter than the figure at HHC.

Local NHS finances

- Total healthcare spend on Cambridgeshire and Peterborough patients was £1.2 billion in 2014/15. Of this, around a half was spent on acute and specialist care and a quarter on primary care (including prescribing).
- If we do not change our health system substantially then we face a deficit of at least £250 million by 2018/19. This will make it harder to deliver good quality care. At the moment our hospitals have significant deficits.
- This deficit figure assumes good performance against local improvement plans.



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Health determinants and health outcomes Peterborough & Borderline residents

Unless otherwise stated, these are from the Public Health England Health Profiles: <http://fingertips.phe.org.uk/profile/health-profiles>

	Life expectancy	<ul style="list-style-type: none"> In Peterborough, life expectancy at birth is 78.1 for men and 82.6 for women. This is significantly lower than the national average. Within Peterborough, there is a gap in male life expectancy of over 9 years between those living in the most and least deprived areas. 															
	Potential years of life lost	<ul style="list-style-type: none"> In 2014, 1,700 potential years of life were lost across the CCG's catchment area from causes amenable to healthcare (PYLL) per 100,000 population. Cambridgeshire is among the 20% best performing local authorities on this measure, while Peterborough is among the worst performing 20%. Source: Public Health Information Team, Cambridgeshire County Council 															
	Emergency admissions	<table border="1"> <thead> <tr> <th>CCG PERFORMANCE QUINTILE</th> <th>Cambs</th> <th>P'borough</th> </tr> </thead> <tbody> <tr> <td>Unplanned admission for chronic ambulatory care conditions</td> <td>2nd best</td> <td>2nd worst</td> </tr> <tr> <td>Unplanned admissions for epilepsy, asthma, diabetes in under 19s</td> <td>2nd best</td> <td>Worst</td> </tr> <tr> <td>Emergency admissions for conditions not normally requiring admission</td> <td>2nd best</td> <td>Middle</td> </tr> <tr> <td>Emergency admissions for children with URTI</td> <td>2nd best</td> <td>Middle</td> </tr> </tbody> </table>	CCG PERFORMANCE QUINTILE	Cambs	P'borough	Unplanned admission for chronic ambulatory care conditions	2 nd best	2 nd worst	Unplanned admissions for epilepsy, asthma, diabetes in under 19s	2 nd best	Worst	Emergency admissions for conditions not normally requiring admission	2 nd best	Middle	Emergency admissions for children with URTI	2 nd best	Middle
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		<p>Source: http://ccgtools.england.nhs.uk/loa/flash/atlas.html</p>															
	Disease and poor health	<ul style="list-style-type: none"> Rates of hospital stays for alcohol related harm and self-harm are significantly higher than the national average and the prevalence of opiate and/or crack use is also high. The incidence of tuberculosis is significantly higher than the national average at 56.7 per 100,000 compared to 30.4 per 100,000. Emergency admissions for hip fracture in over 65 year olds are significantly higher than nationally. The death rate from cardiovascular disease in people aged under 75 is significantly higher than nationally. The comparable figure for cancer deaths is similar to the national average. 															
	Wider determinants	<ul style="list-style-type: none"> At 7.6%, long-term unemployment is above the national average of 7.1%. GCSE results are below average. Parts of the local authority are among the most deprived 20% of areas of the country. 															
	Lifestyles	<ul style="list-style-type: none"> Smoking prevalence is 21% in Peterborough, which is significantly above the regional and national averages of 17.5% and 18.4%. Local rates of obesity are lower than average in Year 6 children (aged 10-11) but rise to national levels in adults. 55% of adults in Peterborough are physically active, which is similar to the national average of 57%. 															
	Dementia	<ul style="list-style-type: none"> Prevalence estimates suggest there are around 1,950 Peterborough residents with dementia. This is forecast to rise by 33% to 2,590 in 2023. Source: MRC CFAS Prevalence estimates applied to local population 															
	Diabetes	<ul style="list-style-type: none"> There are 9,270 people with diabetes in Peterborough. (Source: QOF 2013/14) Across the CCG's catchment area, just 56% of people with diabetes have good blood glucose control. The CCG is among the worst performing nationally on this measure and performs similarly poorly on measures of diabetic complications. 															
	Mental health	<ul style="list-style-type: none"> Mental health represents 23% of the national burden of disease but just 13% of NHS spend. Source: www.gov.uk/government/uploads/system/uploads/attachment_data/file/213761/dh_124058.pdf Over 44,000 adults registered with the CCG's GPs had depression in 2013/14. (Source: QOF) 															

Abbreviations:

CCS: Cambridgeshire Community Services; CUHFT: Cambridge University Hospitals NHS Foundation Trust; HHCT: Hinchingbrooke Health Care NHS Trust; PSHFT: Peterborough & Stamford NHS Foundation Trust; CCG: Clinical Commissioning Group (in this case Cambridgeshire & Peterborough CCG); QEHLK: Queen Elizabeth Hospital King's Lynn NHS Foundation Trust