



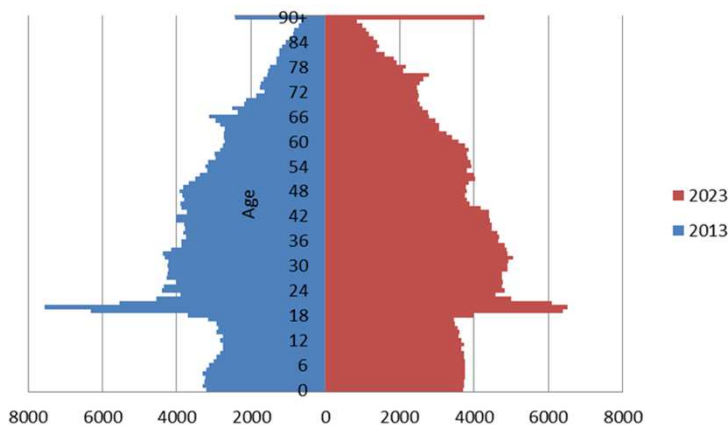
# System Transformation Programme Engagement Fact Pack: Cambridge System

September 2015

*This pack contains data published for different geographical areas. The closest match to the area served by the CATCH and Cam Health Local Commissioning Groups has been used throughout. Depending on the data source, this may be the locality, the local authorities of Cambridge City and South Cambridgeshire, the county of Cambridgeshire or the CCG catchment area.*

## Population

Cambridge Population Pyramid - 2013 to 2023



- The total resident population of Cambridge City and South Cambridgeshire was 278,200 in 2013 and is forecast to rise by 17% to 2023, reaching a total of 326,700.
- The population aged 65 and over is forecast to rise by 30% by 2023. The number of people aged 90 or over will rise by three quarters in this time.
- The number of children and young people aged 18 and under is forecast to rise by 21% to 2023.

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

## Primary Care

### Local context

- There are 37 GP practices in CATCH and Cam Health Local Commissioning Groups, which make up the Cambridge System locality. Together these serve a registered population of 323,000. List sizes vary from 2,700 to 18,000, with an average list size of 8,700 (the same as the CCG average).
- If practice populations increase in line with expected population growth, average list size will rise to 10,200 in 2023 (an increase of 17%).

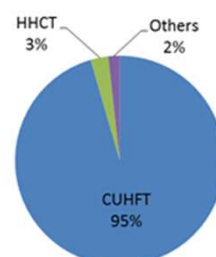
**National GP pressures** (source: Nuffield Trust Election Briefing 2015 - <http://www.nuffieldtrust.org.uk/blog/facts-figures-and-views-health-and-social-care-resource-reporters-2015-general-election>)

- 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.

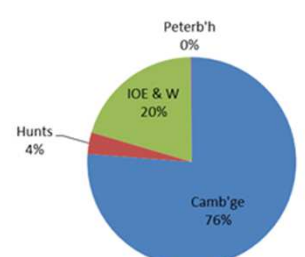
## Births and deliveries

- There were 3,200 births to women living in Cambridge City and South Cambs in 2013. This is forecast to rise to 3,700 in 2023.
- 95% of women registered with Cambridge System GPs deliver at CUHFT. Very small proportions deliver at HHCT and other Trusts.
- Of CCG births at CUHFT, three quarters were from the locality. 61% of deliveries at the Trust were 'normal', 13% were assisted and 26% were caesarean sections.

Cambridge Deliveries 14-15



CUHFT Deliveries by Locality 14-15



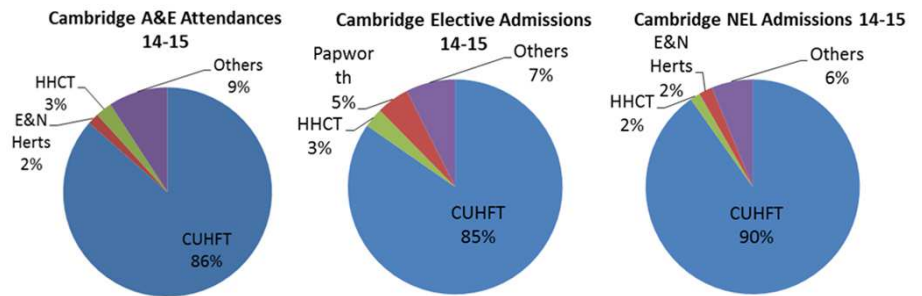
Cambridgeshire and Peterborough Health System Transformation Programme Team  
Working across the system, for the system

# Engagement Fact Pack: Cambridge System

## Secondary care use by patients registered with Cambridge System GP practices

### Attendance patterns

- 86% of people registered with locality GPs who attend A&E do so at CUHFT. 3% attend HHCT.
- For elective inpatient care 85% of admissions are at CUHFT, with 3% at HHCT and 5% at Papworth. For non-elective care 90% of admissions are at CUHFT.



### Current and projected secondary care activity

	A&E attendances	Outpatients	Elective Admissions	Non-elective Admissions	Procedures
2013/14	66,434	297,885	35,244	22,126	54,068
2018/19	79,527	356,499	42,400	27,337	66,238
% change	19.7%	19.7%	20.3%	23.6%	22.5%

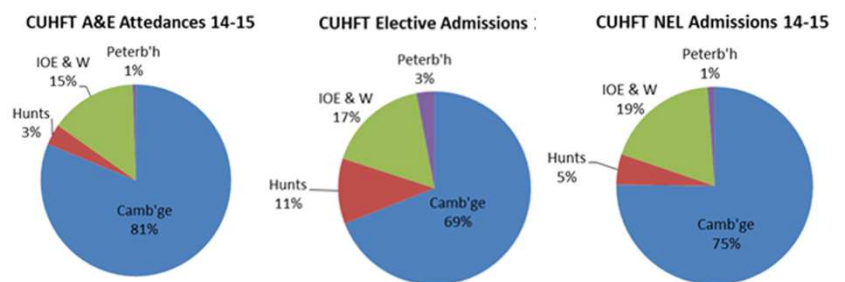
Demand for secondary care across the local population is projected to rise by around 20% over the next five years (24% for non-elective admissions). This takes into account the effect of population change and rising obesity. Types of activity with an older population profile show the greatest increase.

## CCG secondary care activity at Cambridge University Hospitals Foundation Trust (CUHFT)

- The most recent monthly monitoring report (June 2015) recorded 9,126 attendances, just a little higher than the England average of 8,923.
- In 2014-15 the Trust saw around 105,500 A&E attendances compared to 93,000 at PSHFT (including minor injuries unit) and 43,000 at HHCT. The Trust is designated as the major trauma centre for the East of England and is also a hyper-acute stroke centre. Ambulance protocols divert patients requiring this level of care to CUHFT from the surrounding area.

### Patient composition

- 81% of the CCG's A&E attendances at the Trust were from people registered with CATCH and Cam Health GPs. The proportion for elective admissions was 69% and the proportion for non-elective admissions was 75%. The largest flow from elsewhere in the CCG was from the Isle of Ely and Wisbech locality.



### Current and projected CCG secondary care activity at CUHFT

	A&E attendances	Outpatients	Elective admissions	Non-elective Admissions	Procedures
2013/14	74,995	394,001	47,288	27,500	84,823
2018/19	89,731	469,045	56,441	33,908	104,331
% change	19.6%	19.0%	19.4%	23.3%	23.0%

Activity at CUHFT 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 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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## Engagement Fact Pack: Cambridge System

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

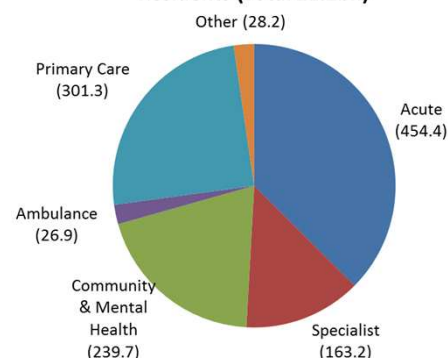
Organisation	A&E 4hr waits	Referral to Treatment			Elective cancelled operations treated within 28 days	General & Acute Bed Occupancy	Non Elective Average Length of Stay (days)
		Admitted Pathways	Non-admitted pathways	Incomplete pathways			
Target	95.0%	90.0%	95.0%	92.0%	n/a	n/a	n/a
CUHFT	83.9%	86.3%	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"> <li>84% of A&amp;E attendances at CUHFT in 2014/15 were seen within 4 hours. This was below the national target of 95%, the national average of 93.6%, the East Anglia Area Team average of 92%, and was the lowest of the Trusts in the patch.</li> </ul>
	Referral to treatment	<ul style="list-style-type: none"> <li>CUHFT performed below the national target and national and local comparators on admitted pathways. Performance on non-admitted pathways was close to the target but below the other Trusts in the patch.</li> </ul>
	Cancelled operations	<ul style="list-style-type: none"> <li>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.</li> </ul>
	Bed occupancy	<ul style="list-style-type: none"> <li>In 2014/15 CUHFT ran at an average bed occupancy rate of 93%, compared to a national average of 89%.</li> </ul>
	Av. length of stay	<ul style="list-style-type: none"> <li>Average length of stay for non-elective admissions at CUHFT was 4.6 days, which was the lowest of the Trusts in the patch.</li> </ul>

### 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.


2014/15 Healthcare spend for Cambridgeshire and Peterborough CCG Residents (Total £1.2bn)




# Engagement Fact Pack: Cambridge System


## Health determinants and health outcomes Cambridge System residents

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


-  Life expectancy
- In Cambridge City, life expectancy at birth is 80 for men and 84.4 for women. In South Cambridgeshire, life expectancy is 83 for men and 89 for women. These figures are all above the national averages of 74.4 for men and 83.1 for women.
  - Within Cambridge, there is a life expectancy gap of around 8 years between those living in the most and least deprived areas.


-  Potential years of life lost
- 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


CCG PERFORMANCE QUINTILE		Cambs	P'borough
 Emergency admissions	Unplanned admission for chronic ambulatory care conditions	2 <sup>nd</sup> best	2 <sup>nd</sup> worst
	Unplanned admissions for epilepsy, asthma, diabetes in under 19s	2 <sup>nd</sup> best	Worst
	Emergency admissions for conditions not normally requiring admission	2 <sup>nd</sup> best	Middle
	Emergency admissions for children with URTI	2 <sup>nd</sup> best	Middle


Source: <http://ccgtools.england.nhs.uk/loa/flash/atlas.html>


-  Disease and poor health
- In Cambridge City, health is generally better than average. Emergency admission rates for hip fracture in people aged over 65 are significantly higher than nationally, as are rates of hospital stays for alcohol-related harm and self-harm.
  - In South Cambridgeshire, health is generally better than average. The rate of malignant melanoma in people under 75 is significantly higher than nationally, as are hospital stays for self-harm. The rate of people reported killed or seriously injured on South Cambs' roads is 52.5 per 100,000, which is significantly higher than the national figure of 39.7.

-  Wider determinants
- At 2.5% in Cambridge City and 1.5% in South Cambs, long-term unemployment is well below the regional and national averages of 5% and 7.1%.
  - GCSE results in both local authorities are significantly above the England average. Against this affluent picture, small areas of the City are among the most deprived in England and around 5,000 children across the locality live in poverty.

-  Lifestyles
- Smoking prevalence is 9.5% in Cambridge City and 11.4% in South Cambs, which is significantly below the regional and national averages of 17.5% and 18.4%.
  - Local rates of obesity are significantly below the national average in both Year 6 children (aged 10-11) and adults. 67% of adults in Cambridge City and 62% in South Cambridgeshire are physically active, which is well above the national average of 57%.

-  Dementia
- Prevalence estimates suggest there are around 3,260 Cambridge System residents with dementia. This is forecast to rise by 23% to 4,010 in 2023.
  - Source: MRC CFAS Prevalence estimates applied to local population

-  Diabetes
- There are 9,400 people with diabetes in Cambridge City & South Cambs (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
- 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](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213761/dh_124058.pdf)
  - Over 44,000 adults registered with CCG GPs had depression in 2013/14. (Source: QOF)

### Abbreviations:

CCS: Cambridgeshire Community Services; CUHFT: Cambridge University Hospitals NHS Foundation Trust; HHCT: Hinchingsbrooke Health Care NHS Trust; PSHFT: Peterborough & Stamford NHS Foundation Trust; CCG: Clinical Commissioning Group (in this case Cambridgeshire & Peterborough CCG).



# System Transformation Programme

## Engagement Fact Pack: Huntingdonshire locality

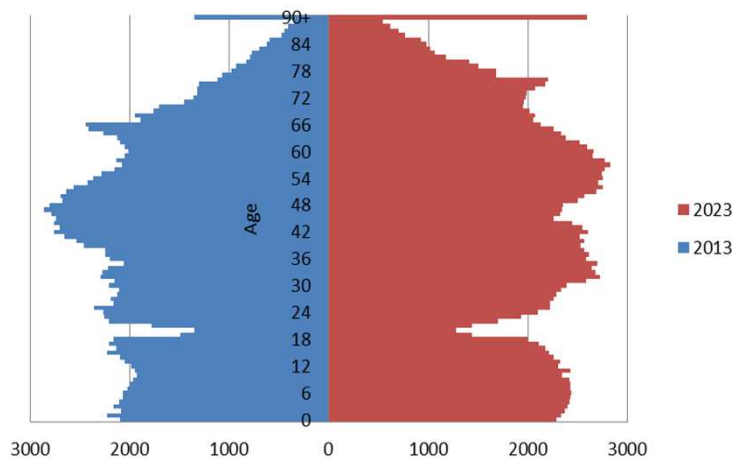
September 2015



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

### Population

Huntingdonshire Population Pyramid - 2013 to 2023



- The total resident population of Huntingdonshire was 175,700 in 2013 and is forecast to rise by 12% to 2023, reaching a total of 196,900.
- The population aged 65 and over is forecast to rise by 37% 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 11% to 2023.

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

### Primary Care

#### Local context

- There are 26 GP practices across Hunts Care Partners and Hunts Health Local Commissioning Groups, which make up the locality. Together these serve a registered population of 194,000. List sizes vary from 2,200 to 14,100, with an average list size of 7,500 compared to a CCG average of 8,700.
- If practice populations increase in line with expected population growth, average list size will rise to 8,400 in 2023 (an increase of 12%).

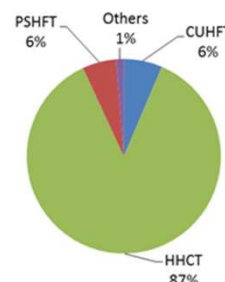
**National GP pressures** (source: Nuffield Trust Election Briefing 2015 - <http://www.nuffieldtrust.org.uk/blog/facts-figures-and-views-health-and-social-care-resource-reporters-2015-general-election>)

- 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.

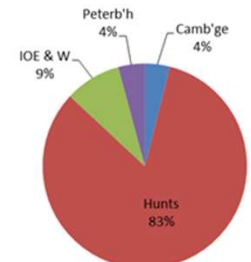
### Births and deliveries

- There were 2,050 births to women living in Huntingdonshire in 2013. This is forecast to rise to 2,250 in 2023.
- 87% of women registered with Hunts locality GPs deliver at Hinchbrook.
- Of CCG births at HHCT, the majority (83%) were from the Hunts locality. 62% of deliveries at the Trust were 'normal', 15% were assisted and 24% were caesarean sections.

Hunts Deliveries 14-15



HHCT Deliveries by Locality 14-15



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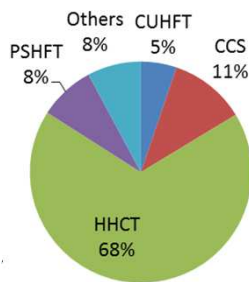
# Engagement Fact Pack: Huntingdonshire locality

## Secondary care use by people registered with Huntingdonshire locality GP practices

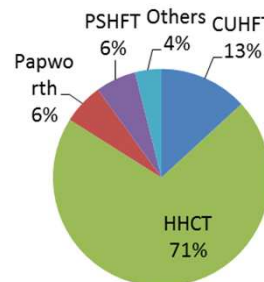
### Attendance patterns

- 68% of people registered with Hunts GPs who access A&E do so at Hinchingsbrooke Hospital.
- For elective inpatient care this proportion is 71% and for non-elective it is 58%.

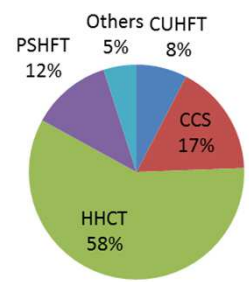
A&E Attendances 14-15



Elective Admissions 14-15



NEL Admissions 14-15



### Current and projected secondary care activity

	A&E attendances	Outpatients	Elective Admissions	Non-elective Admissions	Procedures
2013/14	40,353	223,194	30,371	17,615	43,482
2018/19	47,011	263,635	36,484	21,325	53,227
% change	16.5%	18.1%	20.1%	21.1%	22.4%

Demand for secondary care across the local population is projected to rise by 6% (A&E) to 11% (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 profile show the greatest increase.

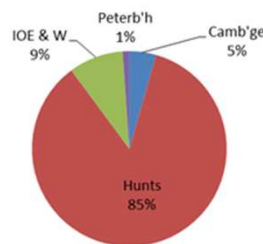
## CCG secondary care activity at Hinchingsbrooke Healthcare Trust (HHCT)

- HHCT A&E is one of the smallest in the country. The most recent monthly monitoring report (June 2015) recorded 3,826 attendances, the fourth lowest of the 140 Type 1 A&Es in England. The England average is 8,923.
- Each year the Trust sees in the region of 43,000 attendances compared to 93,000 at PSHFT (including minor injuries unit) and 105,000 at CUHFT. Ambulance protocols convey patients needing care for hyper acute stroke, primary angioplasty and poly trauma directly to PSHFT or CUHFT. Patients accessing HHCT via ambulance therefore have predominantly medical elderly conditions.

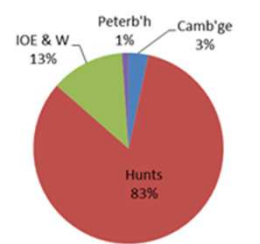
### Patient composition

- 85% of the CCG's A&E attendances at the Trust are from people registered with Hunts locality GPs. The proportions for elective and non-elective inpatient admissions are similar.

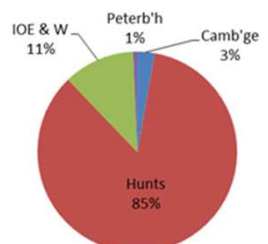
HHCT A&E Attendances 14-15



HHCT Elective Admissions 14-15



HHCT NEL Admissions 14-15



### Current and projected CCG secondary care activity at HHCT

	A&E attendances	Outpatients	Elective admissions	Non-elective Admissions	Procedures
2013/14	36,239	141,215	22,585	10,796	25,227
2018/19	42,096	168,311	27,392	13,755	30,688
% change	16.2%	19.2%	21.3%	27.4%	21.6%

Activity at HHCT is projected to rise by 6% (A&E) to 14% (NE admissions) 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.



## Engagement Fact Pack: Huntingdonshire locality

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
<b>HHC</b>	<b>92.7%</b>	<b>94.7%</b>	<b>99.2%</b>	<b>96.6%</b>	<b>95.9%</b>	<b>86.3%</b>	<b>5.0</b>
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

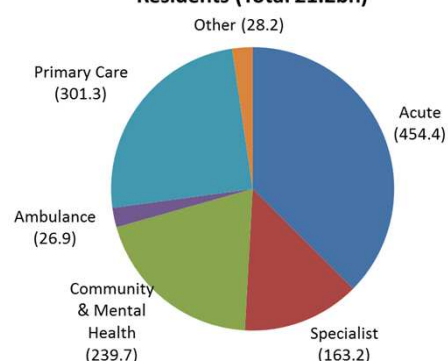
  

	4-hour waits	<ul style="list-style-type: none"> <li>92.7% of A&amp;E attendances at HHCT in 2014/15 were seen within 4 hours. This was below the national target of 95% and the national average of 93.6% but above the East Anglia Area Team average.</li> </ul>
	Referral to treatment	<ul style="list-style-type: none"> <li>HHCT performed above the national target, national average and regional average on all pathways.</li> </ul>
	Cancelled operations	<ul style="list-style-type: none"> <li>96% of cancelled elective operations at HHCT were subsequently treated within 28 days. There is no national target for this but the Trust performed above the regional and national average.</li> </ul>
	Bed occupancy	<ul style="list-style-type: none"> <li>HHCT ran at an average bed occupancy rate of 86%, compared to a national average of 89%. They had the lowest bed occupancy of any Trust in the patch.</li> </ul>
	Av. length of stay	<ul style="list-style-type: none"> <li>Average length of stay for non-elective admissions at HHCT was 5 days, which was a little longer than the average of 4.6 and 4.7 and CUHFT and PSHFT respectively.</li> </ul>

### 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.


2014/15 Healthcare spend for Cambridgeshire and Peterborough CCG Residents (Total £1.2bn)




# Engagement Fact Pack: Huntingdonshire locality

## Health determinants and health outcomes for Huntingdonshire residents


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

 **Life expectancy**


- Life expectancy at birth is 81.0 for Huntingdonshire men and 84.3 for women. This is significantly higher than the national averages of 79.4 and 83.1 and higher than the East of England average.

 **Potential years of life lost**


- 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

		CCG PERFORMANCE QUINTILE	Cambs	P'borough
	<b>Emergency admissions</b>	Unplanned admission for chronic ambulatory care conditions	2 <sup>nd</sup> best	2 <sup>nd</sup> worst
		Unplanned admissions for epilepsy, asthma, diabetes in under 19s	2 <sup>nd</sup> best	Worst
		Emergency admissions for conditions not normally requiring admission	2 <sup>nd</sup> best	Middle
		Emergency admissions for children with URTI	2 <sup>nd</sup> best	Middle


Source: <http://ccgtools.england.nhs.uk/loa/flash/atlas.html>

 **Disease and poor health**


- The health of people in Huntingdonshire is generally better than the England average.
- The rate of people reported killed or seriously injured on Huntingdonshire's roads is 48.1 per 100,000, which is significantly higher than the national figure of 39.7.

 **Wider determinants**


- Overall, levels of deprivation in Huntingdonshire are very low. At 2.1%, long-term unemployment is well below the regional and national averages of 5% and 7.1%.
- Against this affluent picture, GCSE results are below average, and there are small areas of relatively concentrated deprivation.

 **Lifestyles**


- Smoking prevalence is 11.6%, which is significantly lower than the regional and national averages of 17.5% and 18.4%.
- The prevalence of obesity in Year 6 children (age 10-11) is significantly lower than national and regional averages.
- Adult obesity is higher than average at 26% compared to 23% nationally.
- 63% of adults are physically active, which is higher than nationally (57%).

 **Dementia**

- Prevalence estimates suggest there are around 2,050 Huntingdonshire residents with dementia. This is forecast to rise by 56% to 3,200 in 2023.
- Source: MRC CFAS Prevalence estimates applied to local population

 **Diabetes**

- There are 8,400 people with diabetes in Huntingdonshire. (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**

- 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](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213761/dh_124058.pdf)
- Over 44,000 adults registered with Cambridgeshire & Peterborough 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)



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# System Transformation Programme

## Engagement Fact Pack: Isle of Ely and Wisbech

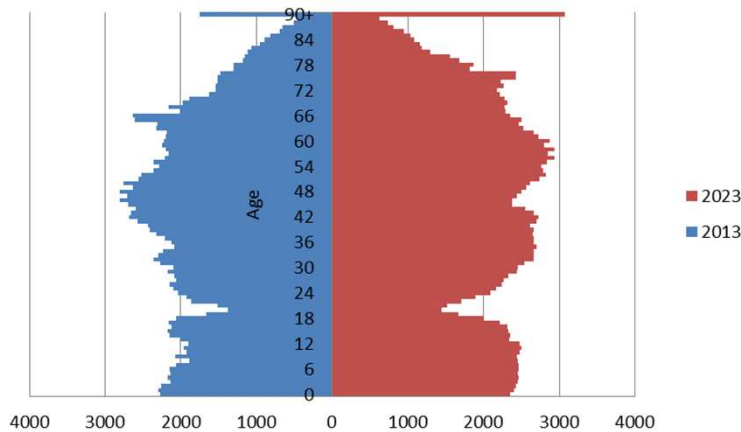
September 2015



This pack contains data published for different geographical areas. The closest match to the area served by the Isle of Ely and Wisbech Local Commissioning Groups has been used throughout. Depending on the data source, this may be the locality, the local authorities of East Cambridgeshire and Fenland, the county of Cambridgeshire or the CCG catchment area.

### Population

IoE & Wisbech Population Pyramid - 2013 to 2023



- The total resident population of East Cambridgeshire and Fenland was 181,100 in 2013 and is forecast to rise by 14% to 2023, reaching a total of 206,800.
- 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 14% to 2023.

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

### Primary Care

#### Local context

- There are 14 GP practices Isle of Ely and Wisbech Local Commissioning Groups, which make up the locality. Together these serve a registered population of 145,000. List sizes vary from 2,100 to 20,200, with an average list size of 10,400 compared to a CCG average of 8,700.
- If practice populations increase in line with expected population growth, average list size will rise to 11,900 in 2023 (an increase of 14%).

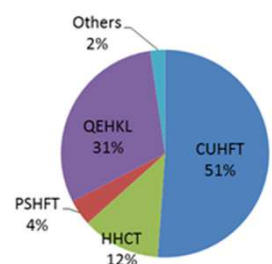
**National GP pressures** (source: Nuffield Trust Election Briefing 2015 - <http://www.nuffieldtrust.org.uk/blog/facts-figures-and-views-health-and-social-care-resource-reporters-2015-general-election>)

- 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 2,260 births to women living in East Cambridgeshire and Fenland in 2013. This is forecast to rise to 2,330 in 2023.
- 51% of women registered with Isle of Ely and Wisbech locality GPs deliver at CUHFT and 31% deliver at QEH in King's Lynn.

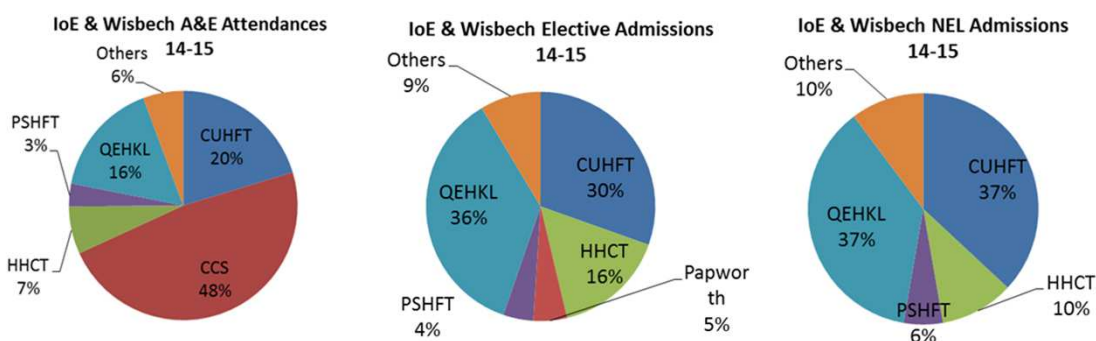
IoE & Wisbech Deliveries 14-15



Cambridgeshire and Peterborough Health System Transformation Programme Team  
Working across the system, for the system

## Engagement Fact Pack: Isle of Ely & Wisbech

### Secondary care use by people registered with Isle of Ely & Wisbech GP practices



#### Attendance patterns

- Nearly half of people registered with Isle of Ely and Wisbech GPs who accessed emergency care in 2014-15 did so at minor injuries units provided by Cambridgeshire Community Services. These units were located in Peterborough, North Cambs hospital in Wisbech and the Princess of Wales hospital in Ely (note that commissioning arrangements have changed for 2015/16). Other significant attendance locations were CUHFT and QEHL, both of which provide full ('Type 1') A&E facilities.
- For elective inpatient care, 36% of people registered with Isle of Ely and Wisbech GPs attended QEHL in King's Lynn and 30% attended CUHFT in Cambridge.
- For non-elective inpatient care, both QEHL and CUHFT took over a third of admissions, with lower proportions of admissions at HHCT and PSHFT.

#### Current and projected secondary care activity

	A&E attendances	Outpatients	Elective Admissions	Non-elective Admissions	Procedures
2013/14	25,021	157,574	21,857	12,719	31,325
2018/19	29,483	184,533	25,896	15,351	38,050
% change	17.8%	17.1%	18.5%	20.7%	21.5%

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.

#### CCG secondary care activity from a Trust perspective

- At CUHFT, 15% of A&E attendances from the CCG's registered population were from Isle of Ely and Wisbech locality. In terms of elective admissions, the proportion is 17% and for non-elective admissions it is 19%.
- At HHCT, 9% of A&E attendances from the CCG's registered population were from Isle of Ely and Wisbech locality. In terms of elective admissions, the proportion is 13% and for non-elective admissions it is 11%.
- At PSHFT, 3% of A&E attendances from the CCG's registered population were from Isle of Ely and Wisbech locality. In terms of elective admissions, the proportion is 4% and for non-elective admissions it is 3%.
- Activity at Trusts in the patch is projected to rise by around 20%, with the greatest rises in types of activity with an older population. This projection takes into account the effect of population change and rising obesity.

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.








Cambridgeshire and Peterborough Health System Transformation Programme Team  
Working across the system, for the system

## Engagement Fact Pack: Isle of Ely & Wisbech

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

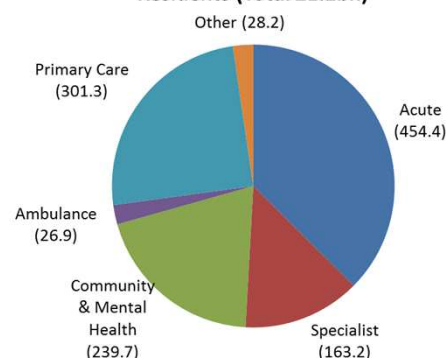
Organisation	A&E 4hr waits	Referral to Treatment			Elective cancelled operations treated within 28 days	General & Acute Bed Occupancy	Non Elective Average Length of Stay (days)
		Admitted Pathways	Non-admitted pathways	Incomplete pathways			
Target	95.0%	90.0%	95.0%	92.0%	n/a	n/a	n/a
CUHFT	83.9%	86.3%	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
QEHL	90.7%	88.1%	97.0%	94.8%	76.0%	88.3%	4.0
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"> <li>90.7% of A&amp;E attendances at QEHL in 2014/15 were seen within 4 hours, compared to 83.9% at CUHFT. Both were below the national target of 95% and the national average of 93.6%.</li> </ul>
	Referral to treatment	<ul style="list-style-type: none"> <li>Both CUHFT and QEHL were below target on admitted pathways but similar to or above target on non-admitted and incomplete pathways.</li> </ul>
	Cancelled operations	<ul style="list-style-type: none"> <li>76% of cancelled elective operations at QEHL were subsequently treated within 28 days, compared to 88.6% at CUHFT. There is no national target for this but both Trusts performed below the national average.</li> </ul>
	Bed occupancy	<ul style="list-style-type: none"> <li>QEHL ran at an average bed occupancy rate of 88%, compared to 93% at CUHFT. The national average was 89%. QEHL had lower bed occupancy than the other local Trusts.</li> </ul>
	Av. length of stay	<ul style="list-style-type: none"> <li>Average length of stay for CCG non-elective admissions at QEHL was 4 days, which was shorter than the figure of 4.6 at CUHFT.</li> </ul>

### 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.










2014/15 Healthcare spend for Cambridgeshire and Peterborough CCG Residents (Total £1.2bn)



# Engagement Fact Pack: Isle of Ely & Wisbech

## Health determinants and health outcomes for Isle of Ely and Wisbech 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"> <li>In East Cambridgeshire, life expectancy at birth is 81.8 for men and 85.6 for women. This is significantly higher than the national average. In Fenland, life expectancy is 79.5 for men and 82.8 for women, which is not significantly different to the national average.</li> <li>Within Fenland, there is a gap in male life expectancy of nearly 5 years between those living in the most and least deprived areas.</li> </ul>															
	Potential years of life lost	<ul style="list-style-type: none"> <li>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%.</li> <li>Source: Public Health Information Team, Cambridgeshire County Council</li> </ul>															
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	Disease and poor health	<ul style="list-style-type: none"> <li>Overall, taking account of population age structure, death rates from common causes are lower than nationally in East Cambs and not significantly different to nationally in Fenland</li> <li>The rate of people reported killed or seriously injured on our roads is 67.8 per 100,000 in East Cambs and 45.8 per 100,000 in Fenland, both of which are significantly higher than the national figure of 39.7.</li> </ul>															
	Wider determinants	<ul style="list-style-type: none"> <li>At 2.4% in East Cambs and 4.3% in Fenland, long-term unemployment is below the regional and national averages of 5% and 7.1%.</li> <li>GCSE results in both local authorities are below average. Parts of the locality, particularly to the north, are among the most deprived 20% of areas of the country.</li> </ul>															
	Lifestyles	<ul style="list-style-type: none"> <li>Smoking prevalence is 18% in East Cambs and 22% in Fenland, which is not significantly different to the regional and national averages of 17.5% and 18.4%.</li> <li>Local rates of obesity are not significantly different to nationally in both Year 6 children (aged 10-11) and as adults.</li> <li>58% of adults in East Cambs are physically active, which is similar to the national average. In Fenland this is just 51%, which is significantly lower than nationally (57%).</li> </ul>															
	Dementia	<ul style="list-style-type: none"> <li>Prevalence estimates suggest there are around 2,670 East Cambridgeshire and Fenland residents with dementia. This is forecast to rise by 20% to 3,210 in 2023.</li> <li>Source: MRC CFAS Prevalence estimates applied to local population</li> </ul>															
	Diabetes	<ul style="list-style-type: none"> <li>There are 11,100 people with diabetes in East Cambs &amp; Fenland. (Source: QOF 2013/14)</li> <li>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.</li> </ul>															
	Mental health	<ul style="list-style-type: none"> <li>Mental health represents 23% of the national burden of disease but just 13% of NHS spend. Source: <a href="http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213761/dh_124058.pdf">www.gov.uk/government/uploads/system/uploads/attachment_data/file/213761/dh_124058.pdf</a></li> <li>Over 44,000 adults registered with CCG GPs had depression in 2013/14. (Source: QOF)</li> </ul>															

### Abbreviations:

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



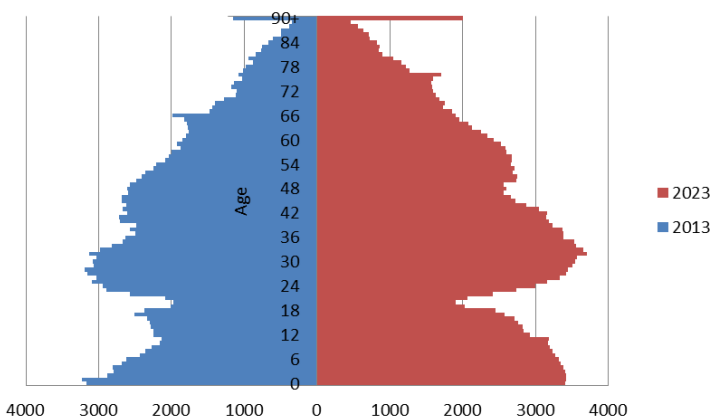


September 2015

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%).

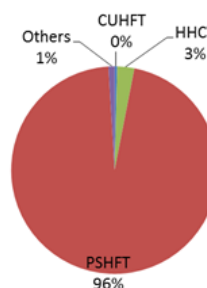
**National GP pressures** (source: Nuffield Trust Election Briefing 2015 - <http://www.nuffieldtrust.org.uk/blog/facts-figures-and-views-health-and-social-care-resource-reporters-2015-general-election>)

- 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.

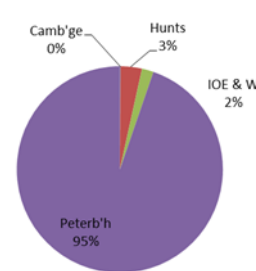
### Births and deliveries

- 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.

Peterborough Deliveries 14-15



PSHFT Deliveries by Locality 14-15

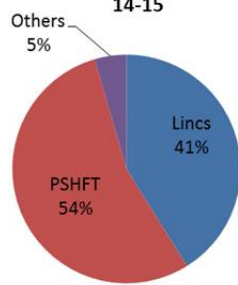


## Secondary care use by people registered with Peterborough & Borderline GP practices

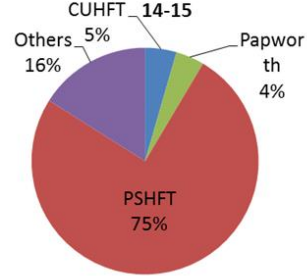
### Attendance patterns

- 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.

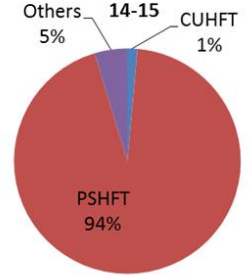
Peterborough A&E Attendances 14-15



Peterborough Elective Admissions 14-15



Peterborough NEL Admissions 14-15



### 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.

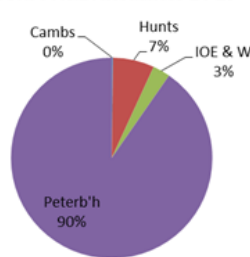
### Secondary care activity at Peterborough & Stamford Hospital (PSHFT)

- 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.

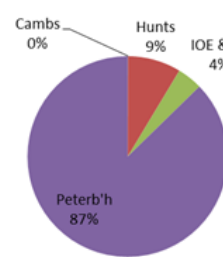
### Patient composition

- 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.

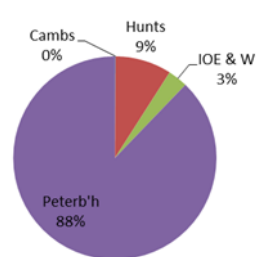
PSHFT A&E Attendances 14-15



PSHFT Elective Admissions 14-15



PSHFT NEL Admissions 14-15



### 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.



## 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
<b>PSHFT</b>	<b>85.6%</b>	<b>89.6%</b>	<b>96.0%</b>	<b>96.6%</b>	<b>88.8%</b>	<b>93.2%</b>	<b>4.7</b>
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

- 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

- PSHFT performed close to the national target on both admitted and non-admitted pathways and was well above target for incomplete pathways.



### Cancelled operations

- 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

- 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.



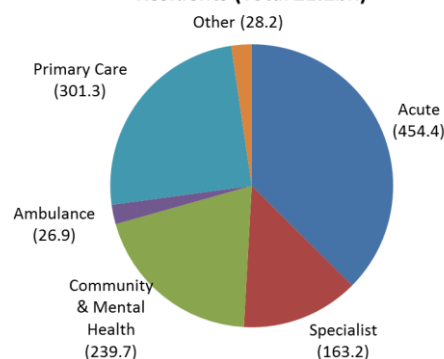
### Av. length of stay

- 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 HHCT.

## 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.

2014/15 Healthcare spend for Cambridgeshire and Peterborough CCG Residents (Total £1.2bn)



## 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"> <li>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.</li> </ul>															
	Potential years of life lost	<ul style="list-style-type: none"> <li>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%.</li> <li>Source: Public Health Information Team, Cambridgeshire County Council</li> </ul>															
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Emergency admissions for conditions not normally requiring admission	2 <sup>nd</sup> best	Middle															
Emergency admissions for children with URTI	2 <sup>nd</sup> best	Middle															
	Disease and poor health	<ul style="list-style-type: none"> <li>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.</li> <li>The incidence of tuberculosis is significantly higher than the national average at 56.7 per 100,000 compared to 30.4 per 100,000.</li> <li>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.</li> </ul>															
	Wider determinants	<ul style="list-style-type: none"> <li>At 7.6%, long-term unemployment is above the national average of 7.1%.</li> <li>GCSE results are below average. Parts of the local authority are among the most deprived 20% of areas of the country.</li> </ul>															
	Lifestyles	<ul style="list-style-type: none"> <li>Smoking prevalence is 21% in Peterborough, which is significantly above the regional and national averages of 17.5% and 18.4%.</li> <li>Local rates of obesity are lower than average in Year 6 children (aged 10-11) but rise to national levels in adults.</li> <li>55% of adults in Peterborough are physically active, which is similar to the national average of 57%.</li> </ul>															
	Dementia	<ul style="list-style-type: none"> <li>Prevalence estimates suggest there are around 1,950 Peterborough residents with dementia. This is forecast to rise by 33% to 2,590 in 2023.</li> <li>Source: MRC CFAS Prevalence estimates applied to local population</li> </ul>															
	Diabetes	<ul style="list-style-type: none"> <li>There are 9,270 people with diabetes in Peterborough. (Source: QOF 2013/14)</li> <li>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.</li> </ul>															
	Mental health	<ul style="list-style-type: none"> <li>Mental health represents 23% of the national burden of disease but just 13% of NHS spend. Source: <a href="http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213761/dh_124058.pdf">www.gov.uk/government/uploads/system/uploads/attachment_data/file/213761/dh_124058.pdf</a></li> <li>Over 44,000 adults registered with the CCG's GPs had depression in 2013/14. (Source: QOF)</li> </ul>															

**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); QEHL: Queen Elizabeth Hospital King's Lynn NHS Foundation Trust

