



Protecting and improving the nation's health

Where do East Midlands' Children and Young People get admitted and for what?

Paediatric Inpatients and Health Care Provider Destination in The East Midlands: 2011 to 2014

Report by the Knowledge and Intelligence Service, East Midlands in partnership with East Midlands Women and Children's Network

Date of report: 30th Nov 2015

Status of report: Draft pending Gateway approval, amendments may be required

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I. Report Purpose

This report was commissioned by East Midlands Clinical Networks and Clinical Senate (Children's Clinical Reference Group) in order to answer:-

- Where do our children and young people (CYP) currently attend for an admission?
- What is the reason for attendance?
- Are the East Midlands admitting units serving the child and young person population needs, if not why?

II. Audience

This report is intended for the Children's Clinical Reference Group.

III. Scope / Methodology

Data for this report is derived from the Hospital Episode Statistics in-patient database, using an SQL query (see appendix for full SQL query). The data contains details of all paediatric (children and young people under 19 years) inpatient admissions in the East Midlands region (EM) and also details of paediatric patients from the EM seen at health care providers not in the EM (but within England) for April 2011 to March 2014. This data was them further interrogated using excel, to provide counts and percentages of individuals and in some cases number of attendances for specific queries, in order to answer the "purpose" questions listed above.

IV. Dissemination / Knowledge transfer

- Draft findings for the Maternity & Children's Network, East Midlands 9th
 September 2015
- Initial findings and draft report presented Children's Clinical Reference Group
 7th October 2015
- Final draft report 30th November 2015 for distribution to the East Midlands Clinical Networks and Clinical Senate (Children's Clinical Reference Group)

Executive summary

Headline statement: Within the East Midlands, children and young people (CYP) principally attend healthcare providers (HCP) that are geographically close to them for both elective and emergency reasons. Within the boundaries of the East Midlands Region (EM) there are 9 admitting HCP, however, close to but outside of the boundary of the region, there are a further 26 admitting HCP. Some of these are more easily accessible, for some individuals, due to road and transport links, than those situated within the EM.

There were **178,609** individual EM CYP listed on the HES inpatient database 2011/12 to 2013/14. Of these individuals;

- 83% (147,708) only attended HCP that were located within the EM (Group 1)
- 14% (24,943) only attended HCP located in other regions (Group 2)
- 3% (5,958) attended both EM and non-EM HCP (Group 4)

In Group 2 (those going out of region), >80% were seen at HCP close to the EM borders. Of the <20% of CYP attending HCP further away, over 8% were for emergency attendances.

In addition to the above there were **7,316** CYP, who attended EM HCP who were either not EM resident (Group 3, **n=7002**) or had either unknown residential addresses or multiple addresses across geographical regions (Group 5, n=**314** CYP)

Respiratory is the largest primary diagnosis (15.7%) when all CYP (regardless of admission type, group) is reviewed, with external cause injury (accidents etc.) the next largest percentage (12.9%). For electives only patients ENT or dental are the most common diagnosis codes listed code whereas, infections or respiratory infections dominate the top five for emergency only patients.

For CYP who are only seen by Non-EM HCP (group 2) the largest primary diagnosis group for elective only patients is dental (29%) with congenital malformation being the second highest (15.7%). The largest number of emergency only patients (22.8%) were for the diagnostic code for accidents (external cause injury)

¹ Geographically located HCP; Bassetlaw Hospital is counted, for the purposes of this report, as being geographically located within the EM however the Foundation Trust that runs the hospital has it's HQ based in Yorkshire & Humberside Region and therefore in general Bassetlaw Hospital is usually counted as not being in the EM region.

Executive Clinical Conclusions

This data has provided us with up to date information regarding our CYP patient population and where and why they access services.

- 1. When needing inpatient care the vast majority of EM CYP receive inpatient care in a HCP close to home within EM. This is for secondary and specialist care.
- 2. Where CYP receive care outside the EM for specialist problems the majority are referred from an EM unit this is most likely where an EM specialist is seeking additional expertise on an individual basis due to exceptionality.
- 3. This dataset shows that for paediatric cardiac attendances only 13% (122 / 536) of CYP, over a 3-year period, received care outside EM comparing to 16% of children with other congenital malformations. From this, we can conclude that the vast majority of CYP with specialist problems from a congenital cause including cardiac are able to find the expert care within EM.
- 4. There are some specialist needs that are commissioned on a supra regional basis e.g. craniofacial unit at Birmingham Children's Hospital therefore for a small number of CYP we would expect their care to be outside EM and indeed that seems to be reflected in this dataset.

Further study and recommendations

- 1. When reviewing the urgent care pathway for EM CYP all relevant units need to be engaged including border units
- 2. Why are so many EM CYP visiting dental units outside of EM this may be an area warranting further investigation

Dr Jane Williams, Clinical Director, Maternity and Children's Clinical Network, East Midlands Clinical Networks and Clinical Senate

1. Background, geography & demographics

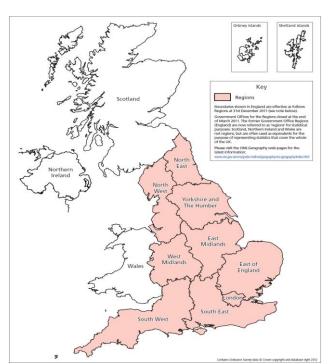
Clinical Context: In the recent national report "Facing the Future Together 2015"¹, The Royal College Of Paediatrics and Child health aimed to ensure there is always high quality diagnosis and care in the unscheduled pathway and to reduce unnecessary attendances at the emergency department and admissions to hospital by providing care closer to home.

There are three overarching principles and eleven standards:

- Standards one to six These focus on supporting primary care to safely care for the child or young person in the community, preventing unnecessary attendance at an emergency department or unnecessary admission to hospital.
- Standards five to eight Of course it will be necessary for some children and young people to be cared for in hospital, and these standards focus on reducing the length of stay and enabling these children and young people to go home again as safely and as quickly as possible.
- Standards nine to eleven These look more widely at connecting the whole system, streamlining the patient journey and improving the patient experience.

Dr Jane Williams, Clinical Director, Maternity and Children's Clinical Network, East Midlands Clinical Networks and Clinical Senate

East Midlands Region geography: The EM has borders with five other regions, Yorkshire and The Humber, the North West, the West Midlands, the South East and East of England and by the North Sea coastline to the east.



- In area, it is **15,600** square km making it the fourth largest English region, smaller than the South West, East of England and the South East.
- The region covers 12% of the total area of England and 6% of the UK. It contains five counties, Derbyshire, Leicestershire, Lincolnshire, Northamptonshire and Nottinghamshire, and four unitary authorities, Derby, Leicester, Rutland and Nottingham.
- There are **36** districts contained within the counties in the region².

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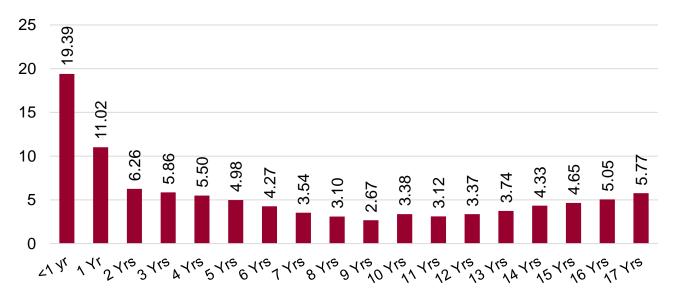
Demographics: East Midlands region population and dataset age profile

There were just over **4.5** million residents in the East Midlands, representing 8 per cent of the population of England and Wales. Of this, just over 1 million **(23.5%)** are classed as Paediatric (aged under 19yrs)³

Table 1: Population ONS mid-year estimates 2012						
East Midlands 0-19yrs age	No. & % of 0-19yrs	popn by area				
England	12,833,200	23.80%				
East Midlands	1,082,600	23.50%				
EM Unitary Authorities and Count	ies					
Derby Unitary Authority	64,600	25.70%				
Derbys County Council	172,600	22.20%				
Leicester Unitary Authority	90,200	27.00%				
Leics County Council	153,300	23.20%				
Lincs County Council	157,900	21.80%				
Northants County Council	175,500	24.80%				
Nottm Unitary Authority	78,700	25.30%				
Notts County Council	181,000	22.70%				
Rutland Unitary Authority	8,800	23.30%				

Age profile: As the data set covers a **3-year** period, the age profile is by the earliest age the CYP appears in the dataset. Nearly **50%** of the CYP in the dataset are aged under 5 yrs.

Chart 1:% of CYP by earliest age in dataset



% of CYP by earliest age

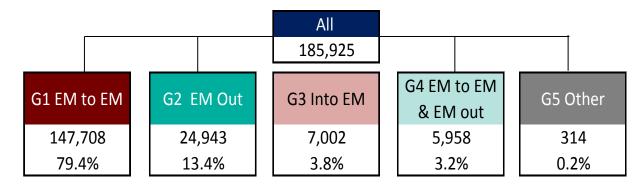
Table 2: Number and % of CYP by earliest age in dataset						
Earliest Age	No. of CYP	Percentage				
<1	36,047	19.39				
1 Yr	20,487	11.02				
2 Yrs	11,634	6.26				
3 Yrs	10,897	5.86				
4 Yrs	10,223	5.50				
5 Yrs	9,259	4.98				
6 Yrs	7,940	4.27				
7 Yrs	6,584	3.54				
8 Yrs	5,762	3.10				
9 Yrs	4,964	2.67				
10 Yrs	6,283	3.38				
11 Yrs	5,800	3.12				
12 Yrs	6,265	3.37				
13 Yrs	6,944	3.74				
14 Yrs	8,053	4.33				
15 Yrs	8,636	4.65				
16 Yrs	9,391	5.05				
17 Yrs	10,732	5.77				

2. Overview by groups

For 2011/12 to 2013/14 there were **185,925** individual CYP recorded on the Inpatient Hospital Episode Statistics (HES) database that were either living in the East Midlands region (EM) **or** seen by a HCP situated within the EM. This includes all admissions types.

- The largest group (G1) are CYP who are EM residents and attend HCP located within the EM 79.4% (147,708)
- The next largest group (G2) are EM CYP attending only non- EM HCP 13.4%
 (24,943)
- Group 3 are CYP attending HCP in the EM who do not have EM residential addresses 3.8% (7,002)
- Group 4 are EM CYP who are seen by both EM HCP as well as non-EM HCP
 3.2% (5,958)
- Group 5, 314 (0.2%) are CYP that have more than 1 residential regional code assigned to them over the 3 year period indicating a permanent residential move or fluctuating residential arrangements for the CYP in question or their residential code was listed as "unknown" / "no fixed abode" on HES

Chart 2: Groups - No. of individual CYP per group & percentage of total



Total number of CYP in dataset that are EM residents 178,609 (96%) of the full data set

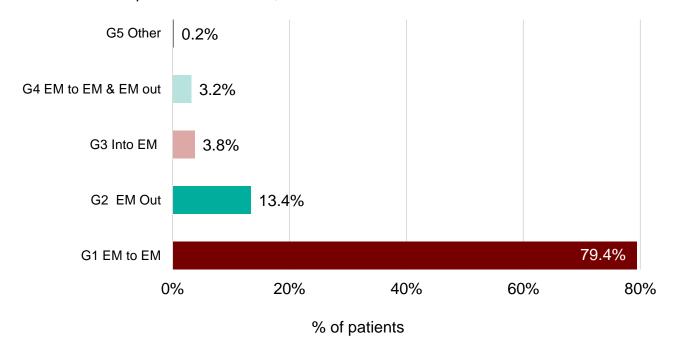
The number of EM CYP within this data set is

Table 3 East Midlands Residents only						
Group	Number	% of EM patients by group				
G1 EM CYP to EM HCP	147,708	82.7				
G2 EM CYP to non-EM HCP	24,943	14.0				
G4 EM CYP to EM & non-EM HCP	5,958	3.3				
Total EM	178,609	100%				

As seen above, the largest group of CYP stays within the EM but a sizeable proportion (13.4% of full dataset, 14% of EM CYP) attend HCP in other regions.

Table 4 Full dataset Individual's region to HCP region	No.	%
G1. EM to EM	147,708	79.4%
G2. EM to other region	24,943	13.4%
G3. Other region to EM	7,002	3.8%
G4. EM to EM and Other region	5,958	3.2%
G5. >1 address, or address unknown or "no fixed abode"	314	0.2%
Total	185,925	100.0

Chart 3: CYP in-patient destinations, East Midlands 2011/12 - 2013/14



3. Findings: Admissions by group & admission type

- Admission type A: Elective admissions only during the timeframe (57,370, 30.9%)
- Admission type B: Emergency admissions only (103,526, 55.7%)
- Admission type C: CYP who have a mix of elective and emergency admissions during the timeframe (16,649, 9%)
- Admission type D: have either "other types of admissions" maternity admissions or a mix of elective, emergency, other and maternity (8,380, 4.5%)

Please note that the dataset **does** include admission methods 31 and 32, maternity admissions associated with under 18yrs CYP with ante and postnatal complications.

Table 5 Admission by group and type No.						
All dataset	Elective admissions (ELA) only	Α	57,370	30.9		
All ualasel	Emergency Admissions (EMA) only	В	103,526	55.7		
185,925	Elective and Emergency Admissions only	С	16,649	9.0		
100,920	Mix of ELA, EMA, Other and Maternity	D	8,380	4.5		
G1 EM to EM	Elective admissions (ELA) only	Α	45,372	30.7		
GT EIVI 10 EIVI	Emergency Admissions (EMA) only	В	85,400	57.8		
147,708	Elective and Emergency Admissions only	С	11,789	8.0		
79.4%	Mix of ELA, EMA, Other and Maternity	D	5,147	3.5		
G2 EM Out	Elective admissions (ELA) only	Α	8,613	34.5		
GZ EWI OUL	Emergency Admissions (EMA) only	В	13,511	54.2		
24,943	Elective and Emergency Admissions only		1,801	7.2		
13.4%	Mix of ELA, EMA, Other and Maternity	D	1,018	4.1		
G3 Into EM	Elective admissions (ELA) only	Α	2,765	39.5		
G3 IIIIU EIVI	Emergency Admissions (EMA) only	В	3,288	47.0		
7,002	Elective and Emergency Admissions only	С	208	3.0		
3.8%	Mix of ELA, EMA, Other and Maternity	D	741	10.6		
G4 EM to EM	Elective admissions (ELA) only	Α	593	10.0		
& EM out	Emergency Admissions (EMA) only	В	1,214	20.4		
5,958	Elective and Emergency Admissions only	С	2,755	46.2		
3.2%	Mix of ELA, EMA, Other and Maternity		1,396	23.4		
CE Othor	Elective admissions (ELA) only	Α	27	8.6		
G5 Other	Emergency Admissions (EMA) only	В	113	36.0		
314	Elective and Emergency Admissions only	С	96	30.6		
0.2%	Mix of ELA, EMA, Other and Maternity	D	78	24.8		

Chart 4: Comparison of individual admission patterns by groups



- ■a. Elective admissions only (ELA)
- ■c. Combination of EL & EM admissions

- ■b. Emergency admissions only (EMA)
- d. Combination of EL, EM, Other or Maternity

4: Findings: by residential address

Some CYP in the EM (G1, 2 & 4) have multiple LA area addresses during the timeframe under review. To ensure that the possible reason for choice of HCP was not linked to the changing address the patients who only have one LA area code have been selected. These revised groups in addition to G3 (into EM) means the dataset is now 184,004 (or 99% of the original dataset)

Table 6 No. of EM region addresses	G1. EM to EM	G2. EM out	G3. Into EM	G4. EM to EM & Out	Total	Included
1 EM address	146,465	24,875		5,662	177,002	95.2
2 EM addresses	1,204	67		288	1,559	
3 EM addresses	36	1		7	44	
4 EM addresses	3				3	
5 EM addresses				1	1	
Non- EM address			7,002		7,002	3.8
Grand Total	147,708	24,943		5,958	185,925	99.0
%	79.4	13.4		3.2	100.0	

Excluded from dataset analysis 1% of CYP

G5 n=314 and G1, 2 & 4 with multiple EM LA area addresses n=1607

Table 7: G1, 2 & 4 with single EM address, by the county in which LA area address falls and G3	No. of patients	%
Derby	9,907	5.4
Derbyshire	30,338	16.5
Leicester	11,281	6.1
Leicestershire	18,729	10.2
Lincolnshire	30,029	16.3
Northamptonshire	34,414	18.7
Nottingham	11,385	6.2
Nottinghamshire	29,837	16.2
Rutland	1,082	0.6
G3 Into EM	7,002	4.0
Total	184,004	100.0

The chart and accompanying table on the next two pages show the proportion of CYP by LA residential areas that are in G1 and G2. The map following the chart and table details EM CYP and the proportion of CYP per LA area in G2 (going out of EM). It highlights that six LA areas that have the highest proportion of CYP in G2; these areas are High Peak, Rutland, Southern Derbyshire, South Kesteven, South Northamptonshire and South Holland and are all on the boundary of the region.

Chart 5: The Proportion of G1 (n=146,465) & G2 (n=24,875) patients with single LA addresses by LA area ,seen by HCP within the EM (Red) and outside the EM (green)

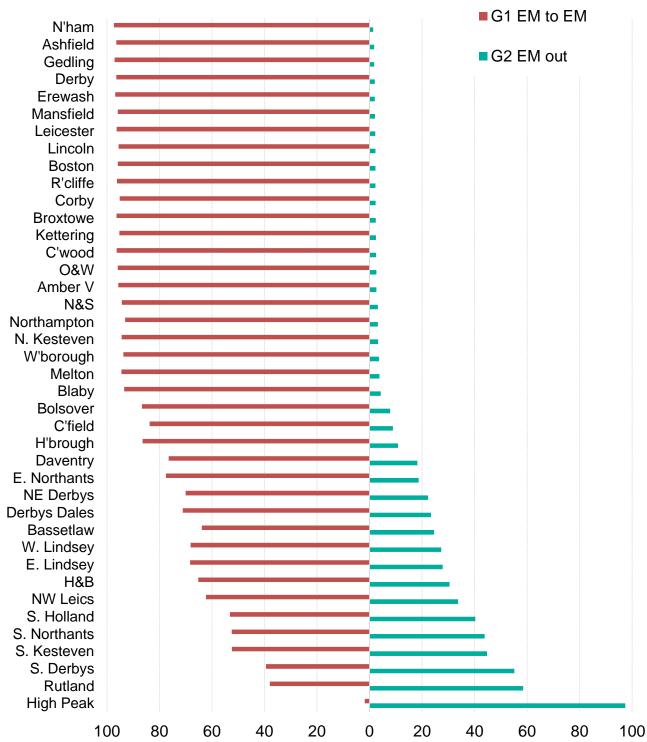
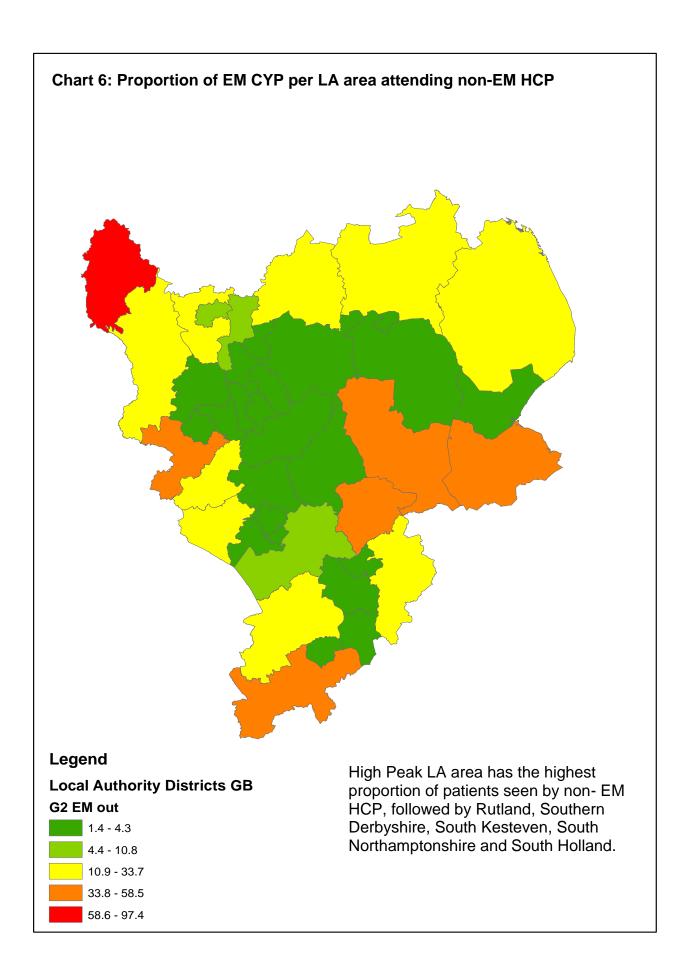


Table 8:	No.	No.	No. G4	Total	G1 %	G2%	G4 %
EM Resident's LA area	G1 EM	G2 EM	EM/EM				
(single address)	to EM	out	& EM out				
High Peak	75	4012	34	4121	1.82	97.36	0.83
Rutland	411	633	38	1082	37.99	58.50	3.51
S.Derbys.	1,629	2278	223	4130	39.44	55.16	5.40
S. Kesteven	3,129	2669	169	5967	52.44	44.73	2.83
S. Northants	1,934	1614	137	3685	52.48	43.80	3.72
S. Holland	2,003	1517	248	3768	53.16	40.26	6.58
N.W. Leics	1,978	1070	127	3175	62.30	33.70	4.00
Hinckley & Bosworth	1,956	913	130	2999	65.22	30.44	4.33
East Lindsey	3,447	1403	194	5044	68.34	27.82	3.85
West Lindsey	2,334	936	156	3426	68.13	27.32	4.55
Bassetlaw	3782	1454	682	5918	63.91	24.57	11.52
Derbyshire Dales	1632	537	125	2294	71.14	23.41	5.45
N.E. Derbys	2867	912	315	4094	70.03	22.28	7.69
E. Northants	3028	731	146	3905	77.54	18.72	3.74
Daventry	2386	568	164	3118	76.52	18.22	5.26
Harborough	2187	274	70	2531	86.41	10.83	2.77
Chesterfield	4090	435	357	4882	83.78	8.91	7.31
Bolsover	3051	277	192	3520	86.68	7.87	5.45
Blaby	2505	114	61	2680	93.47	4.25	2.28
Melton	1336	53	25	1414	94.48	3.75	1.77
Wellingborough	3476	133	100	3709	93.72	3.59	2.70
North Kesteven	4228	147	102	4477	94.44	3.28	2.28
Northampton	11030	378	442	11850	93.08	3.19	3.73
Newark & Sherwood	4312	145	113	4570	94.35	3.17	2.47
Amber Valley	3673	101	65	3839	95.68	2.63	1.69
Oadby and Wigston	1507	41	24	1572	95.87	2.61	1.53
Charnwood	4196	108	54	4358	96.28	2.48	1.24
Kettering	4507	114	109	4730	95.29	2.41	2.30
Broxtowe	3006	74	39	3119	96.38	2.37	1.25
Corby	3251	78	88	3417	95.14	2.28	2.58
Rushcliffe	2927	69	47	3043	96.19	2.27	1.54
Boston	3136	73	61	3270	95.90	2.23	1.87
Lincoln	3897	91	89	4077	95.58	2.23	2.18
Leicester	10863	244	174	11281	96.29	2.16	1.54
Mansfield	4545	99	96	4740	95.89	2.09	2.03
Erewash	3350	70	38	3458	96.88	2.02	1.10
Derby	9555	200	152	9907	96.45	2.02	1.53
Gedling	3313	61	39	3413	97.07	1.79	1.14
Ashfield	4853	89	92	5034	96.40	1.77	1.83
Nottingham	11080	160	145	11385	97.32	1.41	1.27
Grand Total	146,465	24,875	5,662	177,002	82.75	14.05	3.20



5: Findings: G1: HCP attended by CYP by county of LA residence

Within Group 1: EM to EM over **99% (153,827)** were seen at nine main hospitals. The remaining smaller number of patients (<0%) were seen at other HCP in the EM (20 in total).

Over **90%** of attenders at each of the main hospitals reside in the county that the hospital is geographically located within apart from NUH and SFH. These hospitals are to the western boundary of the county and therefore are nearer to Derbyshire for some residents and have 12% of patients from Derbyshire LA areas

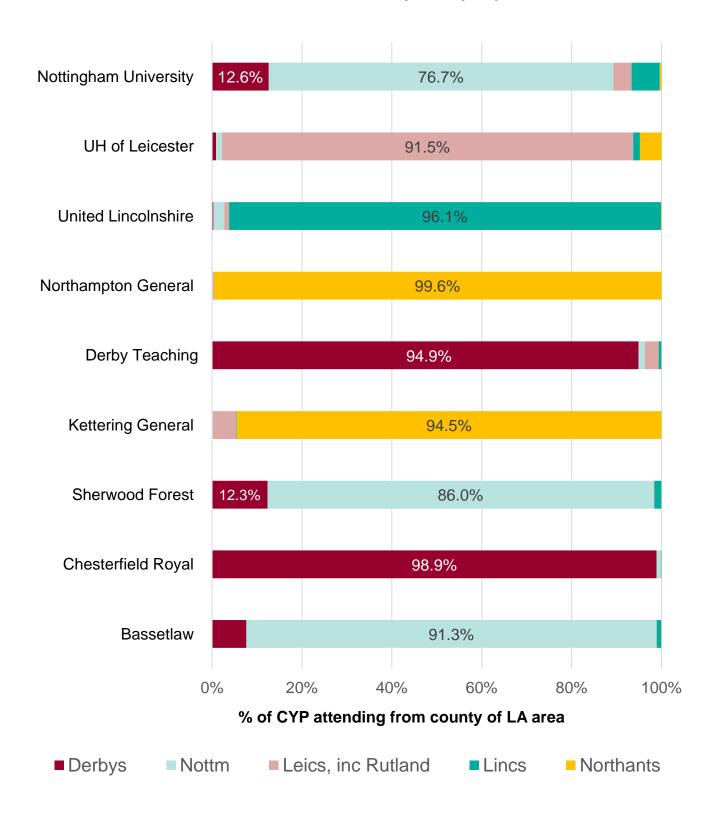
Table 9: HCP / County of residential address*	Derbyshire	Nottinghamshire	Leicestershire, ink Rutland	Lincolnshire	Northamptonshire	Total	%
Bassetlaw Hospital (BH)	387	4,635	4	50	3	5,079	3.3
Chesterfield Royal (CRH)	9,628	89	5	8	3	9,733	6.3
Sherwood Forest (SFH)	1,522	10,636	18	192	4	12,372	8.0
Kettering General KGH)	6	17	703	21	12,876	13,623	8.8
Derby Teaching (DTH)	15,472	229	503	98	5	16,307	10.5
Northampton Gen.(NGH)	4	8	44	6	16,303	16,365	10.5
United Lincs (ULH)	61	552	244	21,871	25	22,753	14.7
University Hospital of Leicester (UHL)	230	352	24,601	406	1285	26,874	17.3
Nottingham University (NUH)	3,867	23,578	1,228	1,934	114	30,721	19.8
Other HCP in EM (n=20*)	171	625	248	136	134	1,314	0.8
Total	31,348	40,721	27,598	24,722	30,752	155,141	100.0

^{*}patients with single addresses only- excluded those patients with multiple EM addresses

^{*}The 20 other locations are: Ash Green Centre, BMI Lincoln Hospital, BMI Park Hospital, Buxton hospital, Circle NHS treatment centre, Clay Cross Hospital, Derbyshire Mental health services, George Hine House, Grantham hospital, Hinckley and District Hospital, Ilkeston Hospital, Johnson Hospital, Lincolnshire Partnership NHS foundation Trust, Loughborough Hospital, Louth Community Hospital, Melton War Memorial Hospital, Northamptonshire Mental health NHS foundation Trust, Nations Health Care Nottingham, Nottinghamshire Healthcare

NHS Mental health Trust, Nuffield Health Leicester. Numbers attending each service suppressed to avoid disclosure.

Chart 7: G1 EM to EM % of CYP admittied to HCP by county of patient

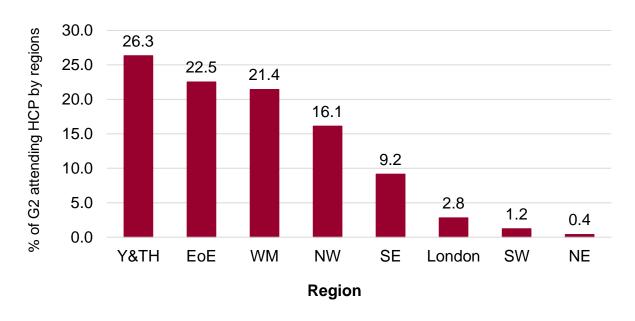


6. Findings: Group 2: Out of EM

CYP in group 2 mainly **(>95%)** attend HCP in the five regions that border the EM. Within those 5 regions the largest percentage of patients **(>80%** in each group) attend HCP that are located close to or within easy reach of the EM border.

Table 10	No. of individuals	% of
Region	(all admission types)	G2
Y&TH (border with EM)	6,641	26.3
EoE (border with EM)	5,683	22.5
WM (border with EM)	5,407	21.4
NW (border with EM)	4,065	16.1
SE (border with EM)	2,309	9.2
London	709	2.8
SW	314	1.2
NE	100	0.4
Total attendances	25,228	100.0
No. of individuals	24,943	

Chart 8 % of G2 attending HCP in other regions



Group 2, by Attendances, HCP close to the EM border and admission type

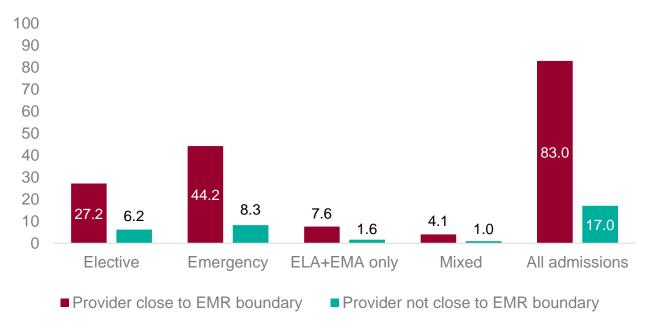
When group 2 is reviewed by HCP close to the EM border and those not close to the border 83% (21,878 of 26,371 attendances) are to HCP that are close to the EM border.

Table 11	24,943	Individuals
G2: Out of EM	26,371	Attendances

G2 Number / attendances	Electives only	Emergency Only	ELA+EMA only	Mixed	All admission
Close to EM boundary	7,163	11,651	1,995	1,069	21,878
Not close to EM boundary	1,637	2,177	425	254	4,493
Total	8,800	13,828	2,420	1,323	26,371

G2 % of all G2 attendances	Elective	Emergency	ELA+EMA only	Mixed	All admissions
HCP close to EM boundary	27.2	44.2	7.6	4.1	83.0
HCP not close to EM boundary	6.2	8.3	1.6	1.0	17.0
Total	33.4	52.4	9.2	5.0	100.0

Chart 9: G2: % of EM (attendances) at non-EM located HCP



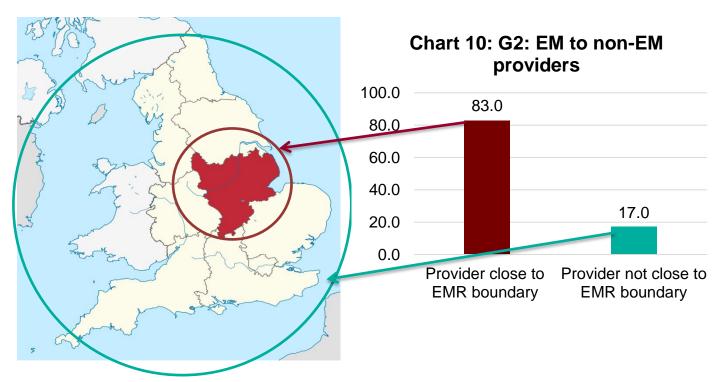
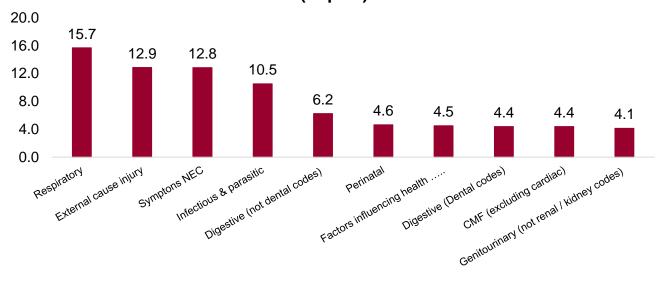


Table 12: Non-EM HCP close to the EM boundary (n=26)
Peterborough And Stamford Hospitals NHSFT
Sheffield Children's Hospital
Northern Lincolnshire And Goole NHSFT
Stockport NHSFT
Tameside Hospital NHSFT
University Hospitals Coventry And Warwickshire NHS Trust
Doncaster Royal Infirmary
Birmingham Children's Hospital NHSFT
The Queen Elizabeth Hospital King's Lynn NHSFT
Central Manchester University Hospitals NHSFT
Macclesfield District General Hospital
George Eliot Hospital NHS Trust
Sheffield Teaching Hospitals NHSFT
Milton Keynes Hospital NHSFT
Addenbrooke's Hospital
University Hospital Of South Manchester NHSFT
Rotherham District General Hospital
The Rotherham NHSFT
Pennine Acute Hospitals NHS Trust
Good Hope Hospital
Montagu Hospital
Barnsley District General Hospital
Coventry And Warwickshire Partnership NHS Trust
Birmingham Community Healthcare NHS Trust
Manchester Surgical Centre
Sandwell General Hospital

7. Findings: Inpatient admission, by admission type and diagnosis code

Chart 11: All CYP / all attendances (top 10) ICD codes



Respiratory is the largest primary diagnosis (15.7%) when all CYP (regardless of admission type, group) is reviewed, with external cause injury (accidents etc) the next largest percentage (12.9%).

By main admission type: The top 5 ICD 10 codes for each admission type show that ENT or dental are the most common code for electives only patients whereas, infections or respiratory infections dominate the top 5 for emergency only patients.

Table 13: Top 5 ICD Primary Diagnosis for Elective only patients	No.	% of all Electives
Nonsuppurative otitis media	4,273	7.4
Dental caries	3,857	6.7
Acute tonsillitis	2,998	5.2
Chronic diseases of tonsils and adenoids	2,414	4.2
Embedded and impacted teeth	1,979	3.4
Grand Total	57,370	

Table 14: Top 5 ICD Primary Diagnosis for Emergency only patients	No.	% of all emergencies
Viral infection of unspecified site	12,256	11.8
Acute upper respiratory infections of multiple & unspecified sites	5,995	5.8
Acute bronchiolitis	5,505	5.3
Abdominal and pelvic pain	5,346	5.2
Viral and other specified intestinal infections	5,163	5.0
Grand Total	103,526	

8. Findings: Group 2 (out of EM) diagnostic code by chapter headings

For those CYP who are only seen by non-EM HCP the top ten ICD diagnostic codes differs, as would be expected, between the two main groups of electives and emergency admissions.

Table 15: Electives only admissions (top 10)	No. of attendances by	% of all G2
ICD chapter heading	individuals	electives
Digestive – dental codes only	1,519	29.0
Congenital malformations*	1,351	15.7
Ear & mastoid	820	13.6
Musculoskeletal	689	5.6
Genitourinary	613	4.3
Factors influencing health	575	3.6
Digestive other –excluding dental codes	554	3.3
Respiratory	538	3.2
Symptoms NEC	462	2.7
External cause injury	420	2.5

^{*}Congenital malformations contains n=1266 attendances for other forms of congenital malformations and n=85 attendances for cardiac congenital malformations.

Table 16: Emergency	No. of attendances by	% of all G2 emergencies	
ICD chapter heading	individuals		
External cause injury	2,988	22.8	
Infectious & parasitic	2,512	12.5	
Symptoms NEC	2,382	8.8	
Respiratory	2,323	3.8	
Digestive	911	3.0	
Perinatal	828	2.1	
Respiratory / Bronchitis	658	1.7	
Genitourinary	511	1.4	
Respiratory / Asthma	348	1.1	
Skin	339	1.1	

For the two largest proportion of electives admission the dental patients predominately attend hospitals near to the EM while for congenital malformations, a larger proportion (nearly 40%) attend hospitals further away.

Table 17: Electives only admissions (top 10) ICD chapter heading	No. of individuals	% to non-EM HCP close to EM boundary	% to non- EM HCP not close to EM boundary
Digestive/ Dental	1,519	95.8%	4.2%
Congenital malformations	1,342	61.8%	38.2%

For Emergency admissions, the two largest chapter headings have 80% or more of the attendances by EM CYP to hospital close to the EM boundary.

Table 18: Emergency only admissions (top 10) ICD chapter heading	No. of individuals	% to non-EM HCP close to EM boundary	% to non- EM HCP not close to EM boundary
External cause injury*	2,988	80%	20%
Infectious & parasitic*	2,512	86%	14%

9. Findings: Which Hospitals?

Table 19: Electives / Dental G2 HCP close to EM	No. of attendances	%
Sheffield Children's Hospital	445	29.0
Peterborough And Stamford NHSFT	234	15.3
Sheffield Teaching Hospitals NHSFT	208	13.6
Stockport NHSFT	86	5.6
Northern Lincolnshire And Goole NHSFT	66	4.3
Rotherham District General Hospital	55	3.6
Macclesfield District General Hospital	50	3.3
Doncaster Royal Infirmary	49	3.2
Central Manchester University Hospitals NHSFT	41	2.7
Tameside Hospital NHSFT	39	2.5
Milton Keynes Hospital NHSFT	35	2.3
The Rotherham NHSFT	24	1.6
George Eliot Hospital NHS Trust	21	1.4
Queen Elizabeth Hospital King's Lynn NHSFT	18	1.2
University Hospitals Coventry & Warwickshire	17	1.1
Montagu Hospital	16	1.0
Non-EM HCP close to EM boundary N=9	37	2.4

Table 20: Electives / Dental G2 HCP not close to EM	No. of attendances by individuals	%
Oxford University Hospitals NHS Trust	28	1.8
South Warwickshire NHSFT	7	0.5
Addenbrooke's Hospital	6	0.4
Other Non-EM HCP not near EM boundaries (n=25)	52*	3.4

(Numbers combined when count is less than 5)

Other non-EM HCP (numbers attending suppressed for disclosure purposes) Guy's And St Thomas' NHSFT, Great Ormond Street Hospital for Children NHS Hull And East Yorkshire Hospitals NHS Trust, Barts Health NHS Trust Kings College Hospital, Norfolk And Norwich University Hospitals NHSFT, UCH Macmillan Cancer Centre, Chelsea And Westminster Hospital NHS Foundation, New University College Hospital, The Eastman Dental Hospital, Barking, Havering & Redbridge, University Hospitals NHSFT, Barnet And Chase Farm Hospitals NHS Trust, Barnsley District General Hospital, Basingstoke And North Hampshire NHSFT, Bolton NHS Foundation Trust, Buckinghamshire Healthcare NHS Trust, Dorset County Hospital, Great Western Hospitals NHSFT, Kings College Dental Hospital, Leeds Teaching Hospitals NHS Trust, North West London Hospitals NHS Trust, Royal Devon And Exeter NHSFT, South Devon Health Care NHSFT, The Newcastle Upon Tyne Hospitals NHSFT, West Middlesex University Hospital NHS Trust

For comparison with G2 dental codes, there were over 7,000 attendances to EM HCP by EM residents for dental codes.

Table 21:	No. of attendances	%
Group 1 EM to EM Electives Dental codes		
Kettering General Hospital NHSFT	1,426	20.0
Northampton General Hospital NHS Trust	1,411	19.8
University Hospitals Of Leicester NHS Trust	857	12.0
Derby Teaching Hospitals NHSFT	812	11.4
Bassetlaw Hospital	760	10.7
Lincoln County Hospital	510	7.2
Nottingham University Hospitals NHS Trust	480	6.8
Chesterfield Royal Hospital	248	3.5
Sherwood Forest Hospitals NHSFT	232	3.3
Pilgrim Hospital	164	2.3
Grantham Hospital	101	1.4
Circle-Nottingham NHS Treatment Centre	56	0.8
Nottingham NHS Treatment Centre (Nations)	37	0.5
Grand Total	7,101	

Table 22:	No. of	
G2 Emergencies / External cause injuries HCP	attendances	%
close to EM	by individuals	
Peterborough & Stamford Hospitals NHSFT	482	15.9
Queen's Hospital, Burton Upon Trent	400	13.2
University Hospitals Coventry & Warwickshire	250	8.2
Northern Lincolnshire And Goole NHSFT	217	7.1
Stockport NHSFT	161	5.3
Sheffield Children's Hospital	139	4.6
Tameside Hospital NHSFT	136	4.5
George Eliot Hospital NHS Trust	129	4.2
Central Manchester University Hospitals NHSFT	103	3.4
Macclesfield District General Hospital	81	2.7
Queen Elizabeth Hospital King's Lynn NHSFT	73	2.4
Birmingham Children's Hospital	60	2.0
Milton Keynes Hospital NHSFT	51	1.7
Doncaster Royal Infirmary	46	1.5
University Hospital Of South Manchester NHSFT	18	0.6
Sheffield Teaching Hospitals NHSFT	17	0.6
The Rotherham NHSFT	17	0.6
Bedford Hospital NHS Trust	10	0.3
Royal Stoke University Hospital	10	0.3
Non-EM HCP closes to EM boundary n=7	31	1.0

Table 23: G2 Emergencies / External cause injuries HCP not close to EM	No. of attendances by individuals	%
Oxford University Hospitals NGS Trust	181	6.0
Hull And East Yorkshire Hospitals NHS Trust	38	1.3
Addenbrooke's Hospital	23	0.8
Royal Cornwall Hospitals NHS Trust	22	0.7
Norfolk And Norwich University Hospitals NHSFT	16	0.5
Buckinghamshire Healthcare NHS Trust	14	0.5
York Teaching Hospital NHSFT	12	0.4
Non-EM HCP not close to EM boundary (n=100)	301	9.9

10. Congenital abnormalities

Table 24: Diagnostic code Congenital abnormalities				
Group	Congenital malformations (Other)	Congenital Malformations (Heart)	Individuals	%
1.EM to EM	6,929	536	7,379	65.2
2. EM out	1,692	122	1,801	15.9
3. Into EM	848	88	932	8.2
4. EM to EM & Out	1025	191	1,166	10.3
5. Mixed GOR	41	6	45	0.4
Total	10,535	943	11,323	100

Congenital malformations form a very small sub-set of the entire dataset (11,323, 6% of 185, 925 CYP). 65.2% stay within the EM for treatment and 15.9% attend non-EM HCP.

Primarily CYP who have a diagnosis of congenital malformation, including cardiac congenital malformation, who attend non-EM HCP tend to live in the LA areas located on the border of the region and therefore may find it more convenient to attend a non-EM HCP (detailed breakdown surpressed due to disclosure control).

Chart 12: Percentage of Congenital malformation primary diagnosis by group

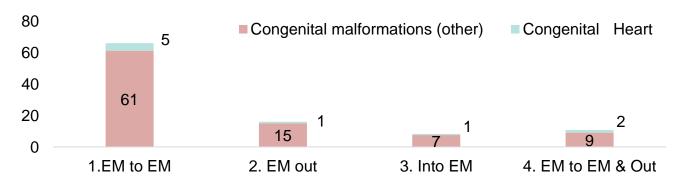


Table 25: All congenital malformation primary diagnosis in G2	Individuals	%
Not close to EM boundary	552	30.2%
Yes close to EM boundary	1,274	69.8%
Attendances (1,801 individuals)	1826	100%

References and Abbreviations

- Facing the Future Together 2015; Standards for Acute General Paediatric Services" report http://www.rcpch.ac.uk/facingthefuture
- 2. Portrait of the East Midlands Jen Beaumont, Office for National Statistics 2009
- 3. ONS: Live births, Office for National Statistics (ONS); population estimates 2012, ONS mid-year estimates; population projections via CHIMAT Child Health Profiles 2015

Abbreviation	ons
BH	Bassetlaw Hospital
CRH	Chesterfield Royal
CYP	Children and young people
DTH	Derby Teaching
ELA	Elective Admission
EM	East Midlands Region
EMA	Emergency Admission
HES	Hospital Episode Statistics
KGH	Kettering General Hospital
HCP	Healthcare providers
LA	Local Authority
NHSFT	National Health Service Foundation Trust
NGH	Northampton General Hospital
NUH	Nottingham University Hospital
ONS	Office of National Statistics
PHE	Public Health England
SFH	Sherwood Forest Hospitals
ULH	United Lincolnshire Hospitals
UHL	University Hospital of Leicester

Appendix

Data set: Data extracted from Hospital Episode Statistics (HES) inpatient data file.

The data set includes

All < 18 yrs (paediatrics) inpatient admissions in 2011/12, 2012/13 and 2013/14 for

Group 1. CYP living in the East Midlands Region (EM) attending HCP located within the EM [EM to EM]

Group 2. CYP living in the EM who attend HCP located outside the EM [Out of EM]

Group 3. CYP living in other regions attending HCP located within the EM [Into EM]

Group 4. CYP living in the EM who attend HCP located within the EM and HCP outside of the EM [EM to EM and Out of EM]

Group 5. CYP who have > 1 regional residential addresses during timeframe or who have "no fixed abode" or whose residential address on HES is listed as "unknown" [Mixed]

The data set **excludes** admission methods

82: Hospital birth: The birth of a baby in this HCP

83: Birth other: Baby born outside the HCP except when born at home as intended

Please note that the dataset does include admission methods 31 and 32, maternity admissions associated with under 18yrs paediatric patients experience antenatal and postnatal complications with their pregnancy

SQL query used to extract data from HES PROC SQL; CREATE TABLE WORK.QUERY FOR HES APC AS SELECT t1.FYEAR, t1.PSEUDO HESID, t1.PROCODE5, t1.CCG RESIDENCE, t1.RESLADST, t1.RESGOR, t1.ADMIMETH, t1.DIAG_4_CONCAT, t1.OPERTN_4_CONCAT, t1.SUSHRG, t1.STARTAGE_CALC, (SUM(t1.FAE)) FORMAT=11. AS SUM_of_FAE FROM (SELECT * FROM HDIS9000.HES_APC_1112 t1 UNION ALL SELECT * FROM HDIS9000.HES APC 1213 t1 UNION ALL SELECT * FROM HDIS9000.HES APC 1314 t1) t1 WHERE (t1.RESGOR = 'E')OR t1.PROCODE3 in ('RFS','RTG','RY8','RXM','RNQ','RT5','RY5','RP7','RNS','RP1','RX1','RHA','RK5','RWD','RWE') OR t1.PROCODE5 in ('NTP13','NT427','NT441','NT450','NVC27','NV313','NTA04','NVC40','NT213','NT226','NT322','NVC23')) AND t1.STARTAGE_CALC <= 18 AND t1.ADMIMETH not in ('82','83') GROUP BY t1.FYEAR, t1.PSEUDO HESID, t1.PROCODE5, t1.CCG RESIDENCE, t1.RESLADST, t1.RESGOR, t1.ADMIMETH, t1.DIAG_4_CONCAT, t1.OPERTN_4_CONCAT, t1.SUSHRG, t1.STARTAGE_CALC; QUIT:

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