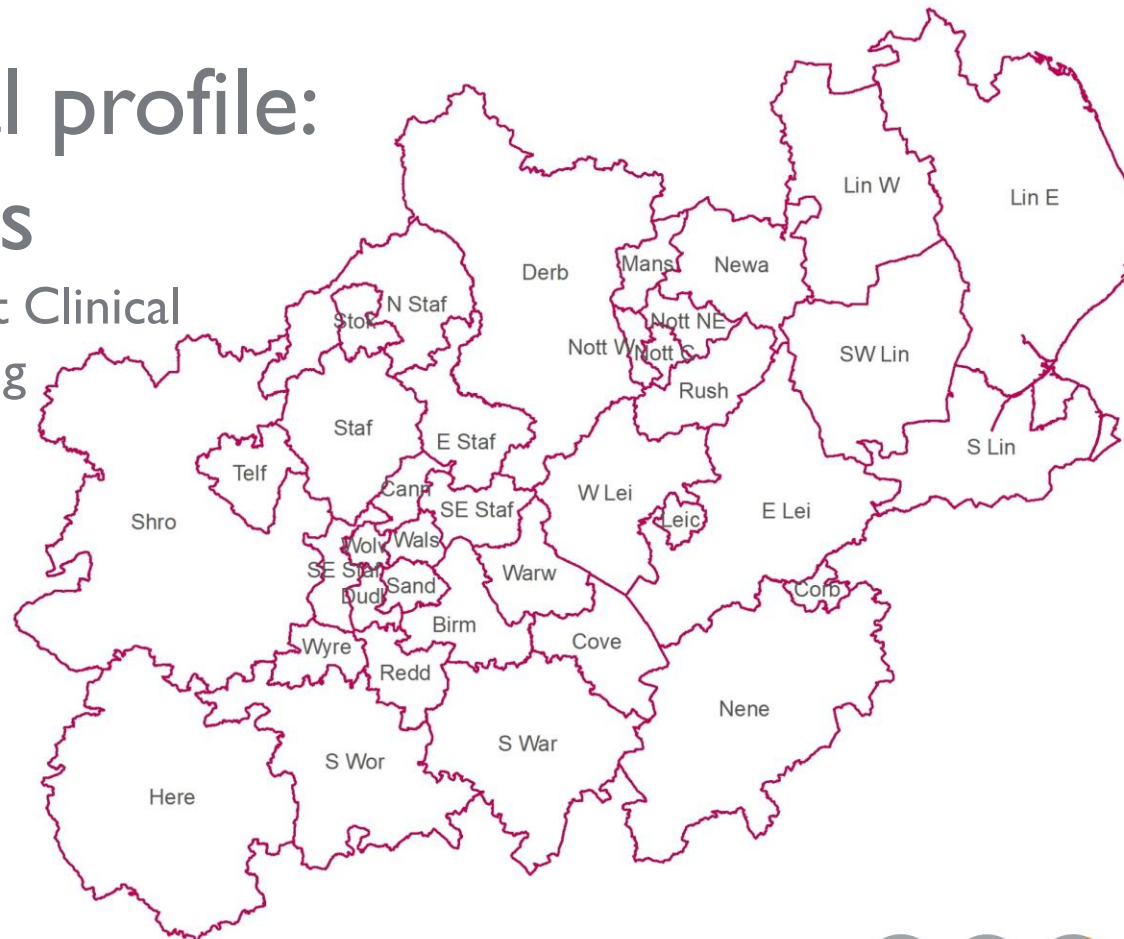


Regional profile: Midlands

Data shown at Clinical
Commissioning
Group level



The maps in this report include data that can help us to understand the quality of care, access to that care, and the effectiveness of local care systems.

These profiles are being published to encourage improvement by supporting local areas to explore some of the themes in State of Care. On their own, the maps do not imply a judgement about how well areas perform. It's important to look at a wider range of indicators and information held locally.

Each map shows a different metric displayed from highest to lowest, greatest to smallest.

Details of the methodology can be found at the back of this document, alongside the exact figures and brief definitions. For some metrics the data ranges are smaller than others so although Clinical Commissioning Groups (CCGs) have been banded into quintiles, the difference between the 'best' and 'worst' performers may be quite small. Metrics have been banded on a regional basis, so the bands for one region will not directly equate to the bands in another region.

Relevant findings from State of Care 2018/19 can be found in bubbles like this one.

The date ranges of data used in this profile may differ from the main report.



Index of Multiple Deprivation 2019

Ratings scores for:

- Adult social care
- GPs
- NHS acute hospitals
- NHS mental health services

Ratings change for:

- Adult social care
- GPs

Percentage change in:

- Nursing home services
- Residential home services
- Nursing home bed numbers
- Residential home bed numbers
- Community social care services

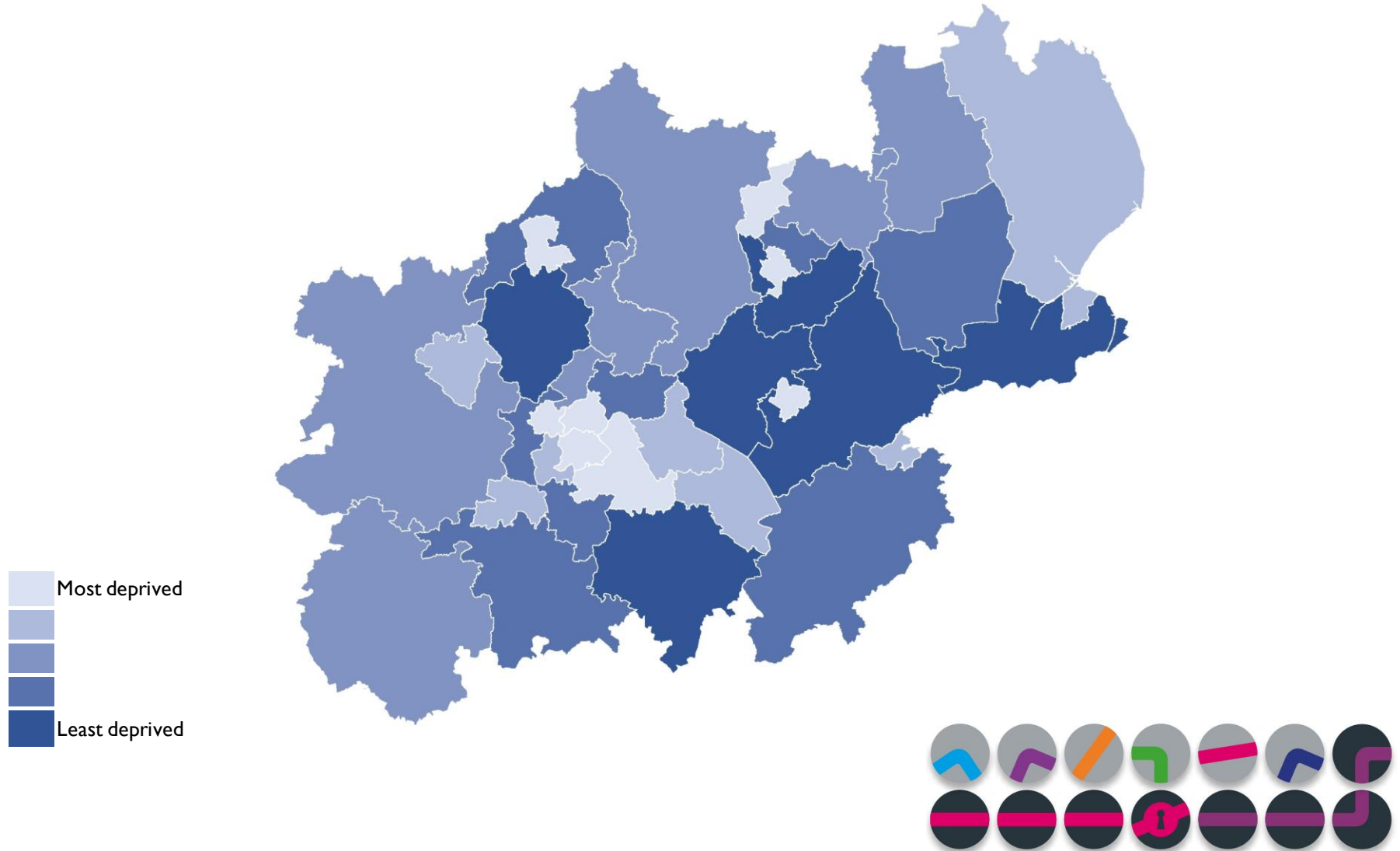
- GP practices per 100,000 people
- Dental practices per 100,000 people
- Location of NHS acute hospitals
- Location of NHS mental and community health trusts and services

Rate of A&E attendances per 100,000 people
Rate of emergency readmissions within 30 days of discharge from hospital
Median time (in weeks) for referral to treatment incomplete pathways

Technical appendix:
List of constituent CCGs
Definition of the metrics
Ranges per region

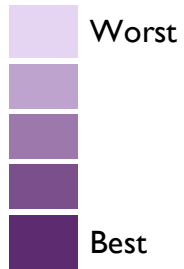
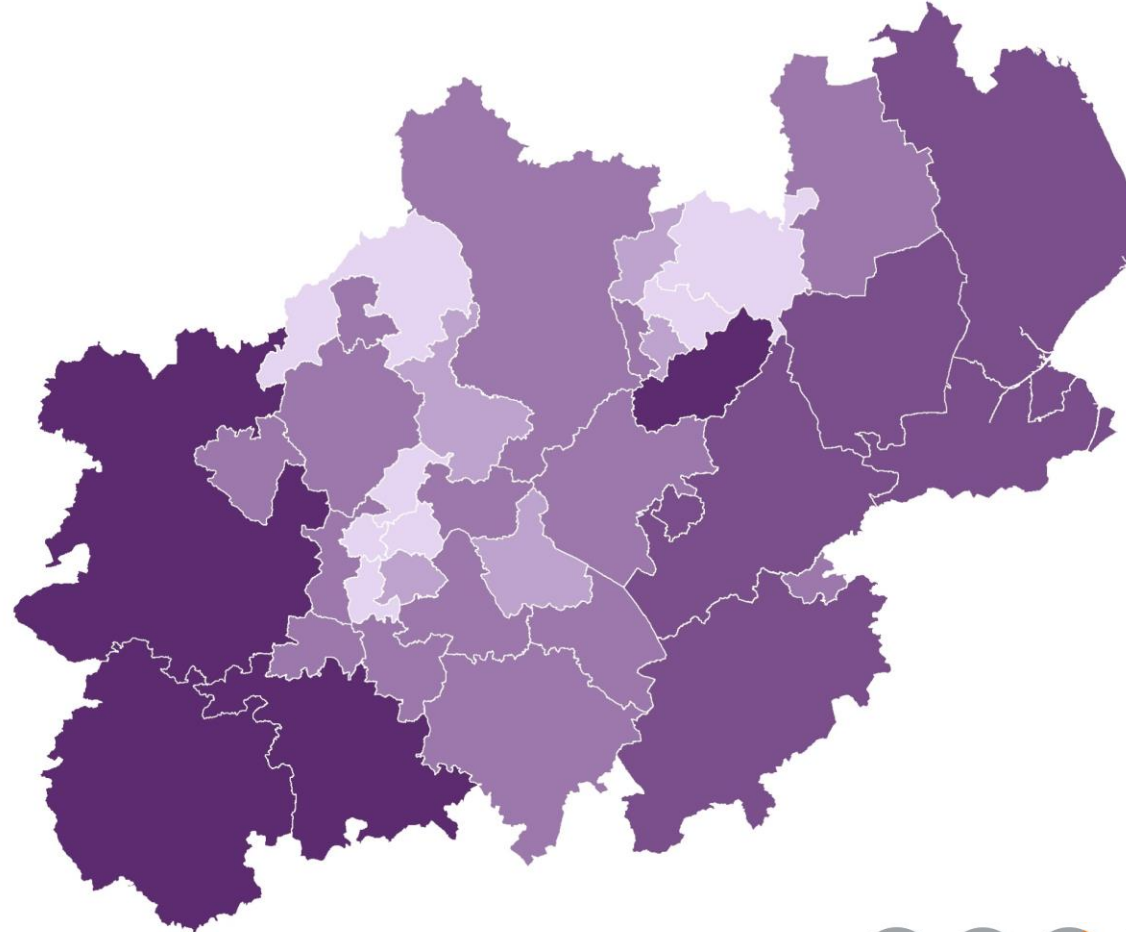


Index of multiple deprivation 2019

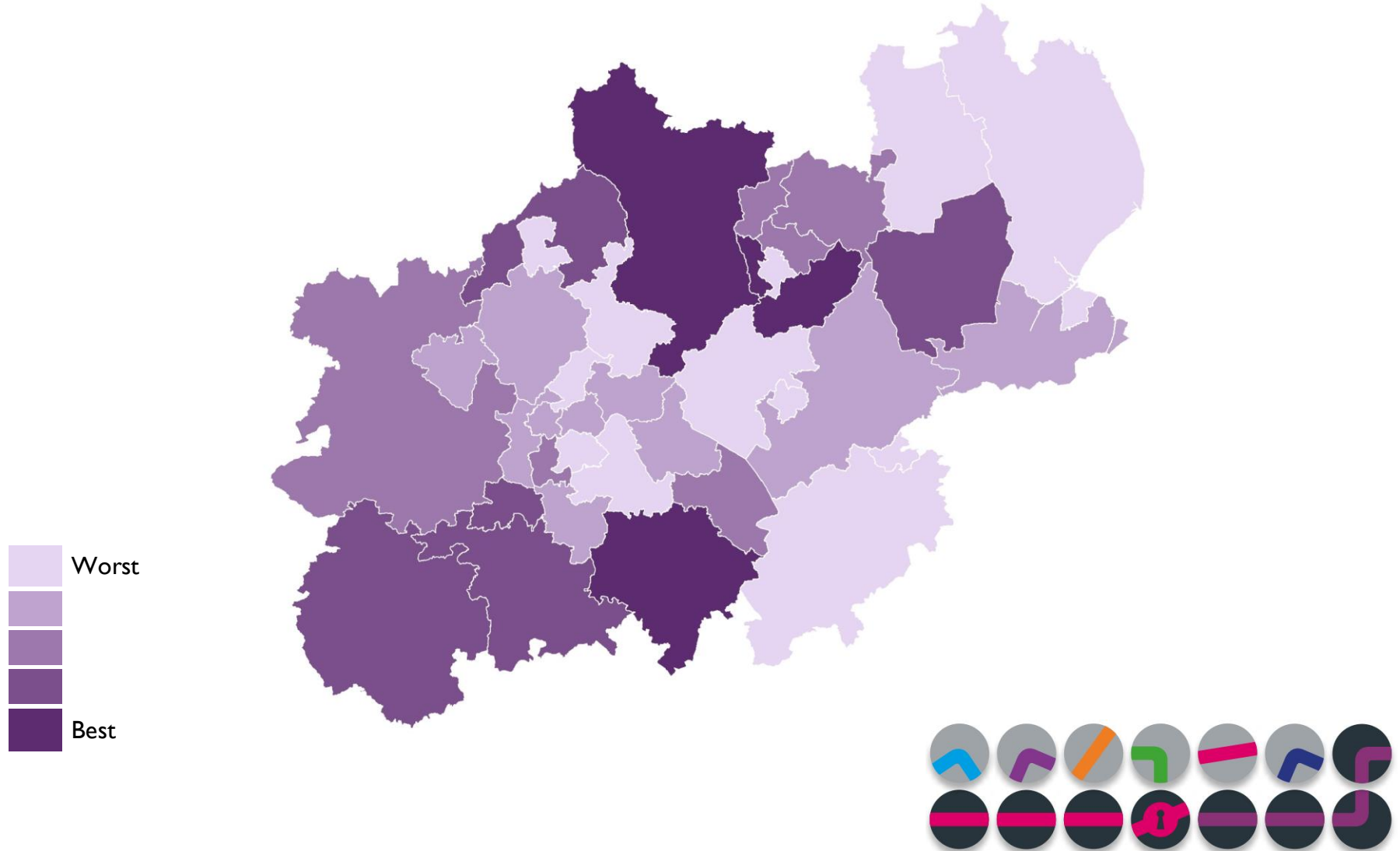


Ratings score: Adult social care

State of Care 2018/19
Four out of five adult social care services are rated as good across England, which is very similar to 2018.



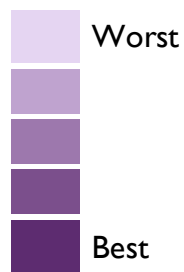
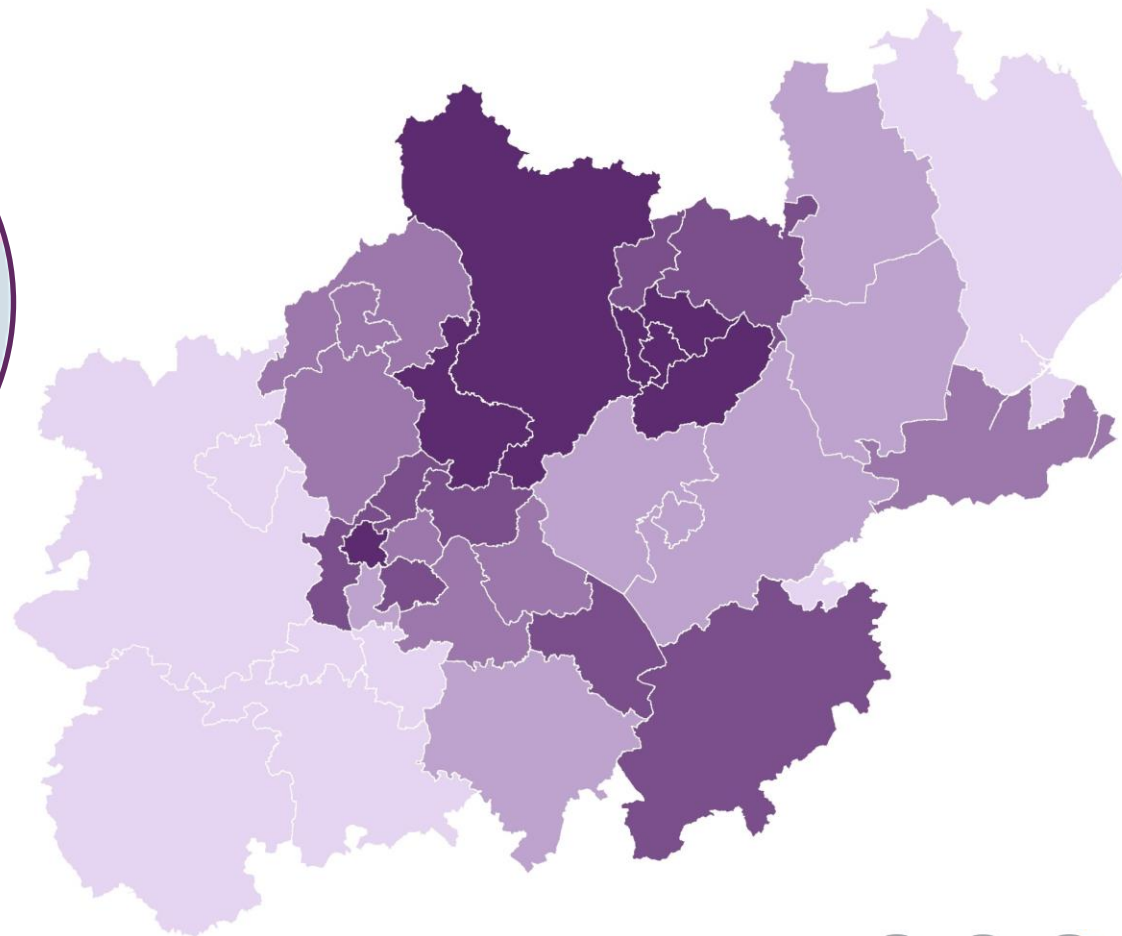
Ratings score: GPs



Ratings score: NHS acute hospitals

State of Care 2018/19

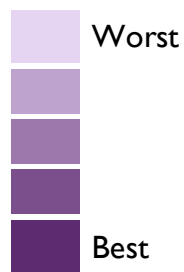
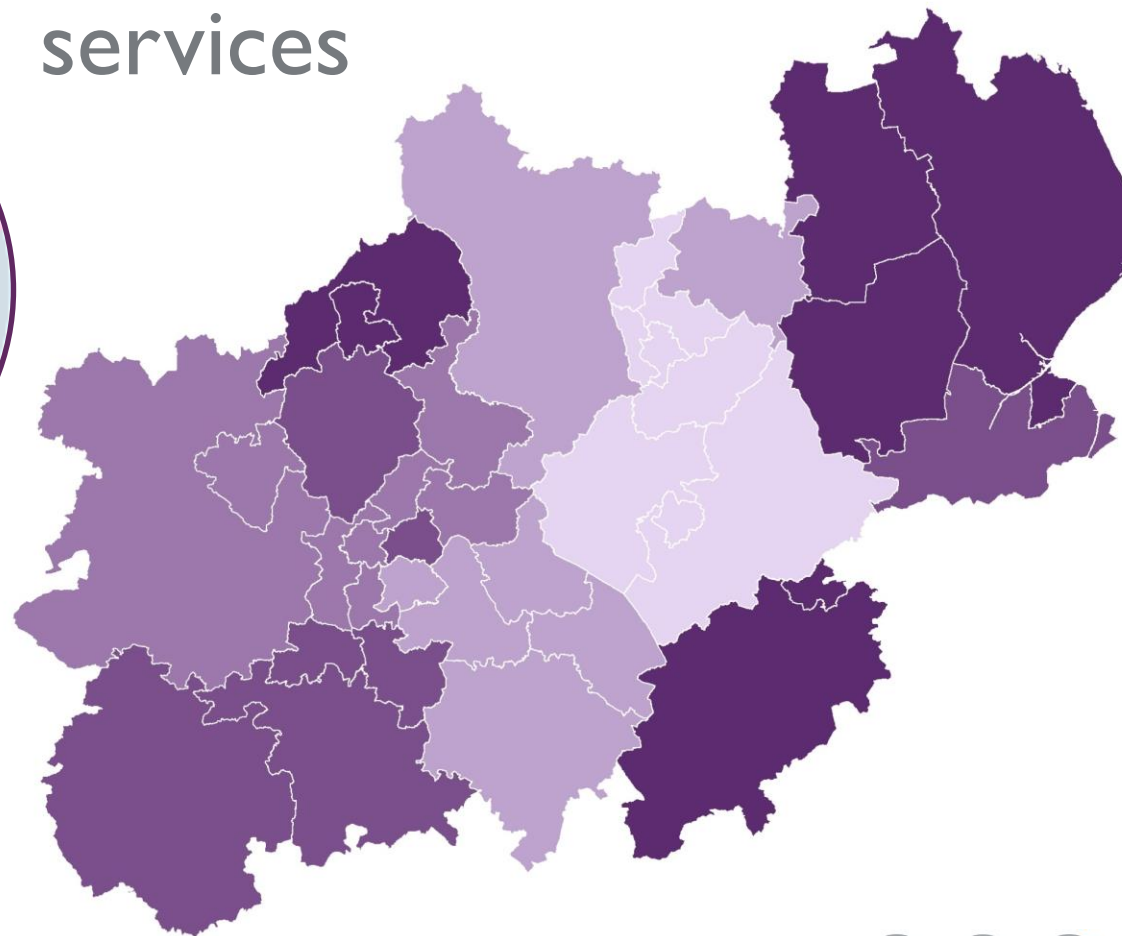
The majority of NHS hospitals across England have continued to provide good care during 2018/19, with 65% and 7% of core services rated as good and outstanding respectively.



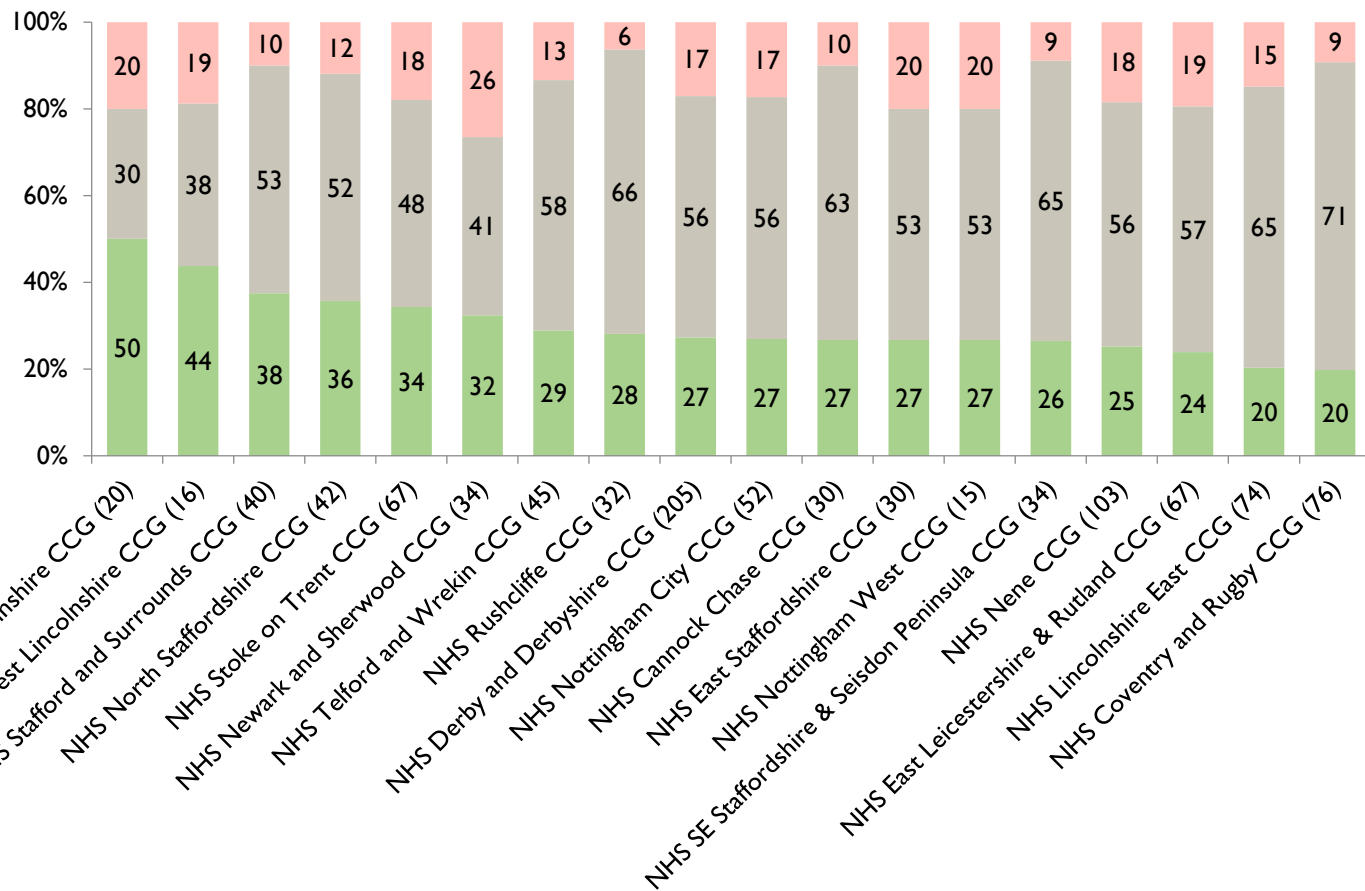
Ratings score: NHS mental health services

State of Care 2018/19

We continue to have concerns about the safety of services, with more than a third of NHS and independent services rated as requires improvement and inadequate for the key question 'are services safe?'



Ratings change: Adult social care (1 of 2)

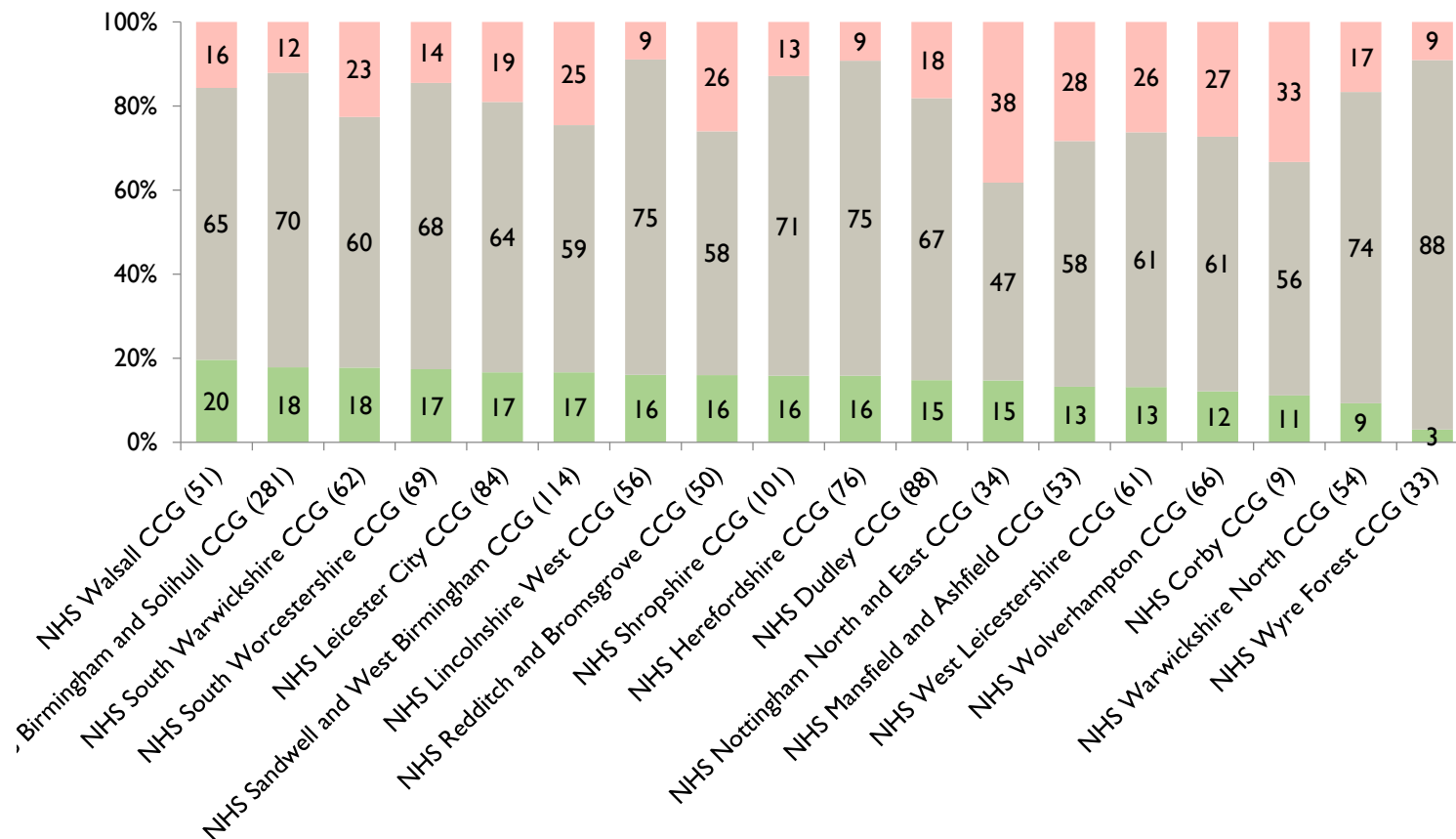


State of Care 2018/19
 The percentage of adult social care services rated good or outstanding has improved in every region since last year.

■ Improved ■ No change ■ Deteriorated



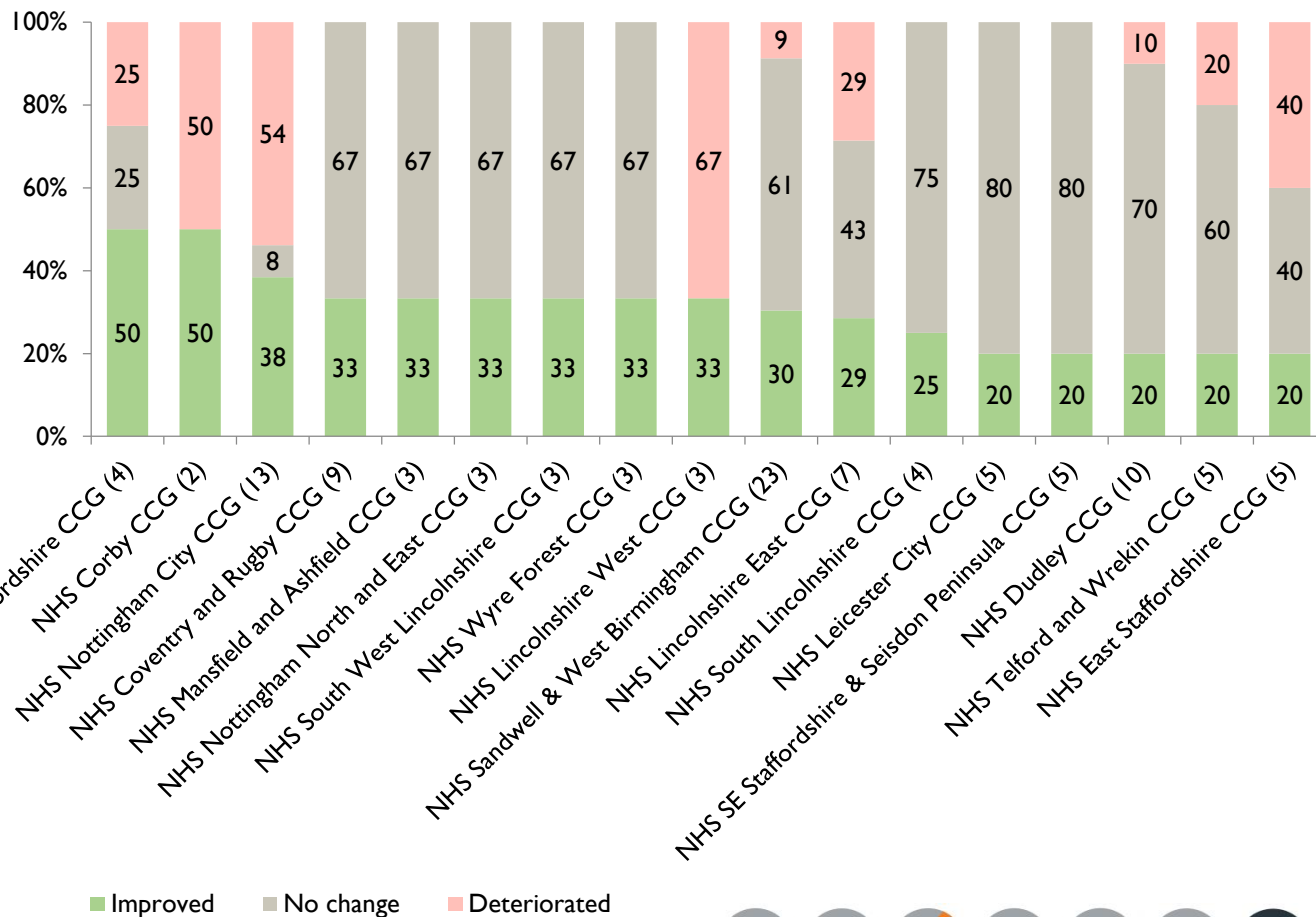
Ratings change: Adult social care (2 of 2)



Improved No change Deteriorated



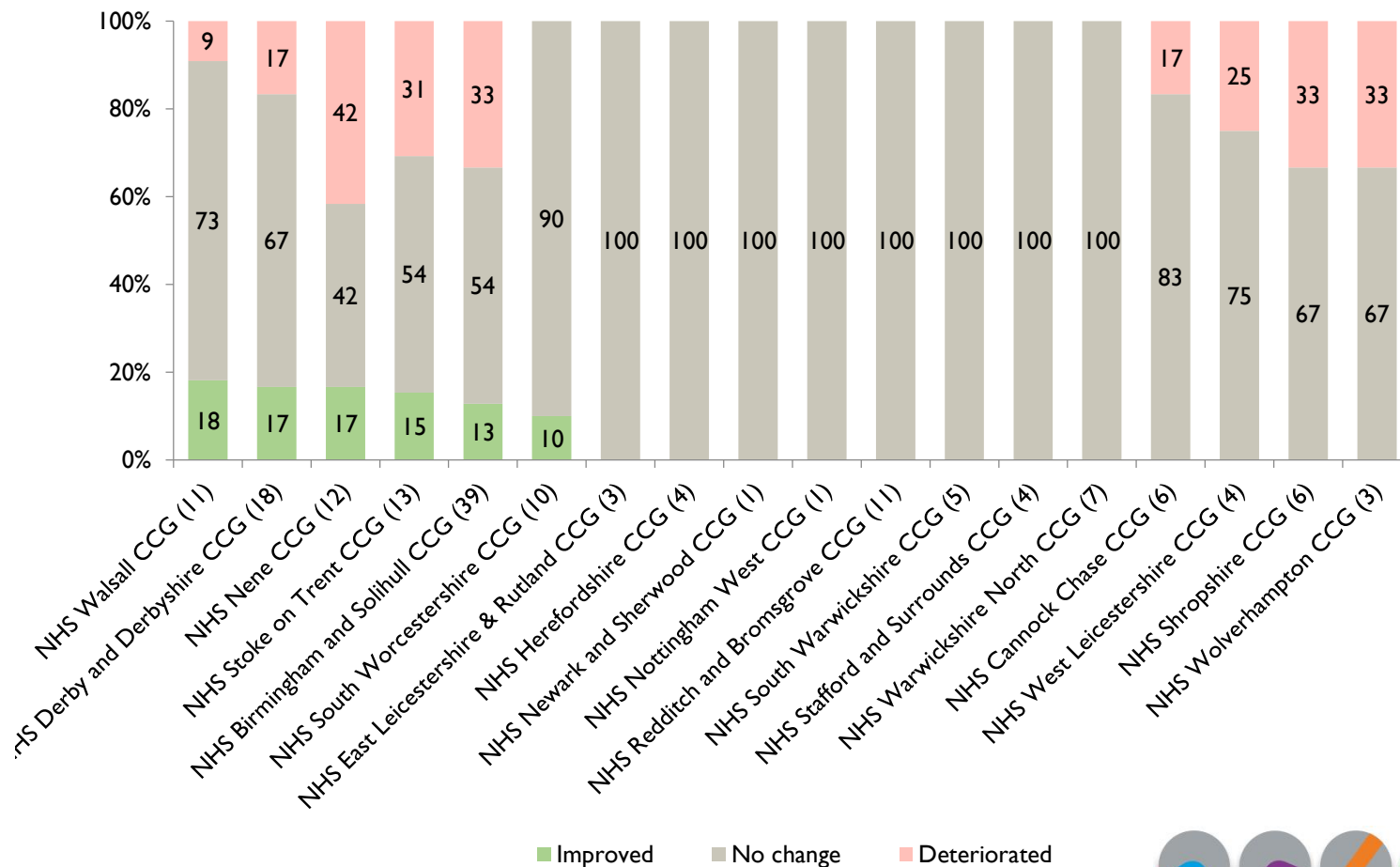
Ratings change: GPs (1 of 2)



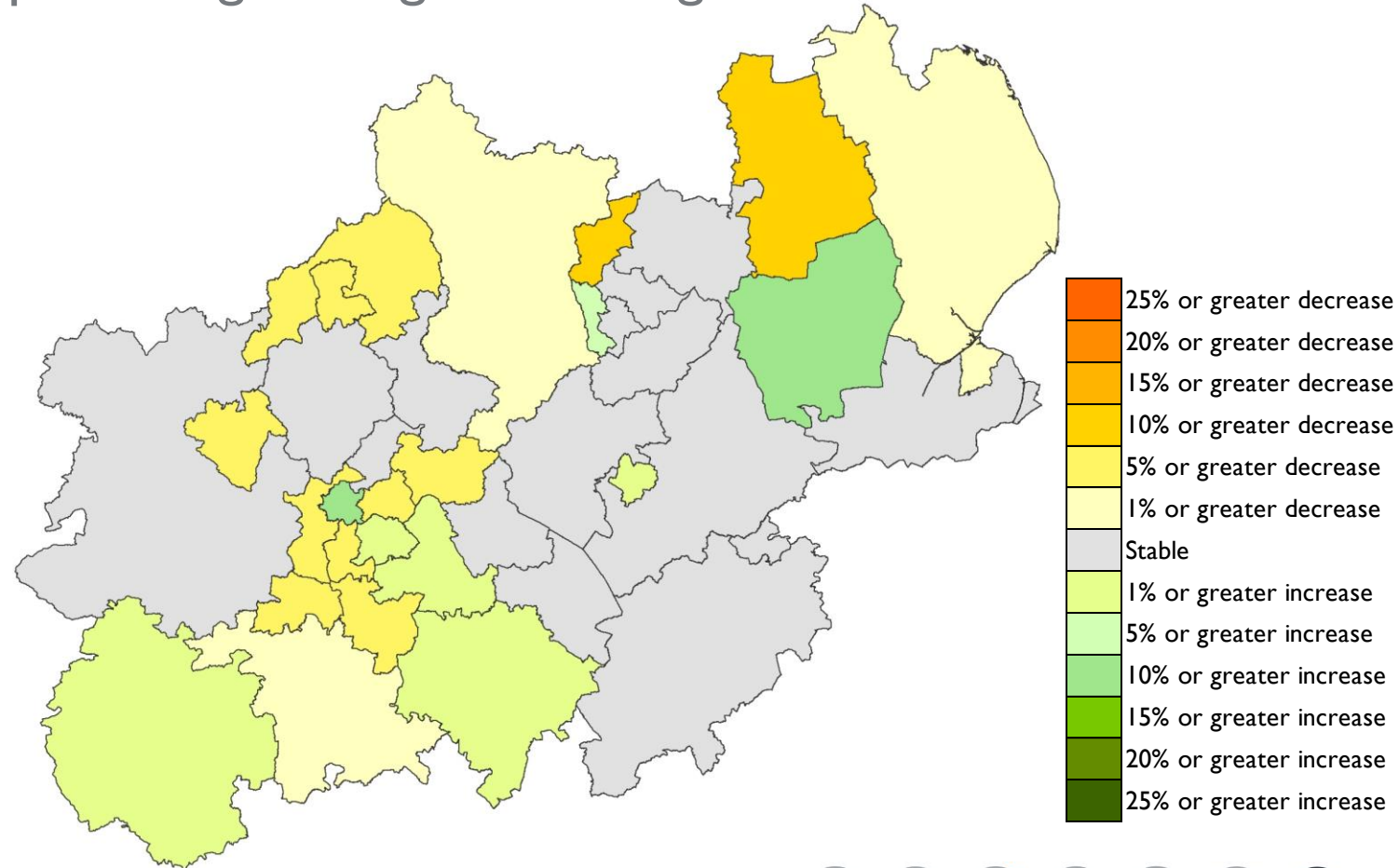
State of Care 2018/19
 National re-inspections show that some GP practices are moving down as well as up in ratings and there are signs that improvement has become harder to achieve and to sustain.



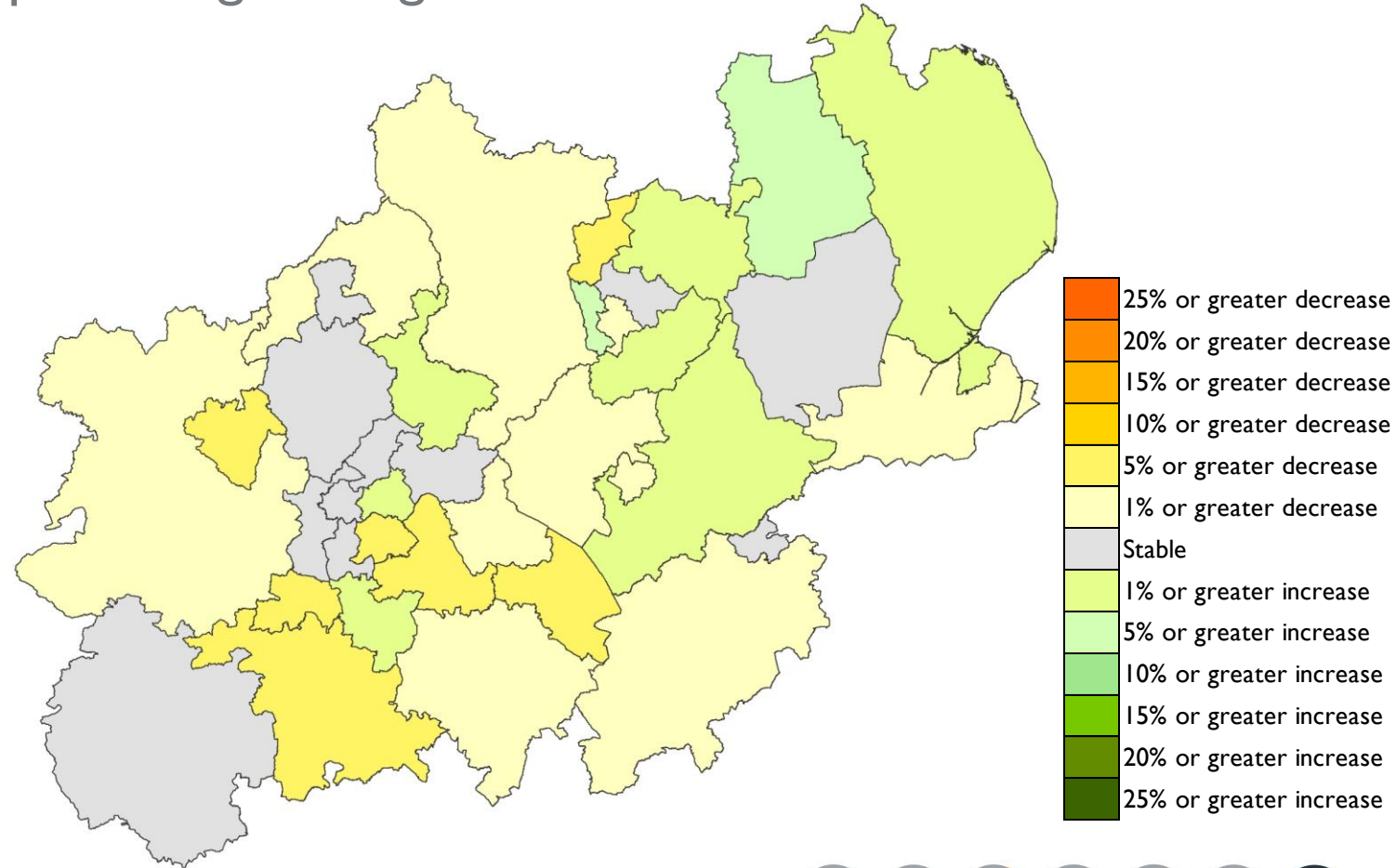
Ratings change: GPs (2 of 2)



Access to care: percentage change in nursing home services

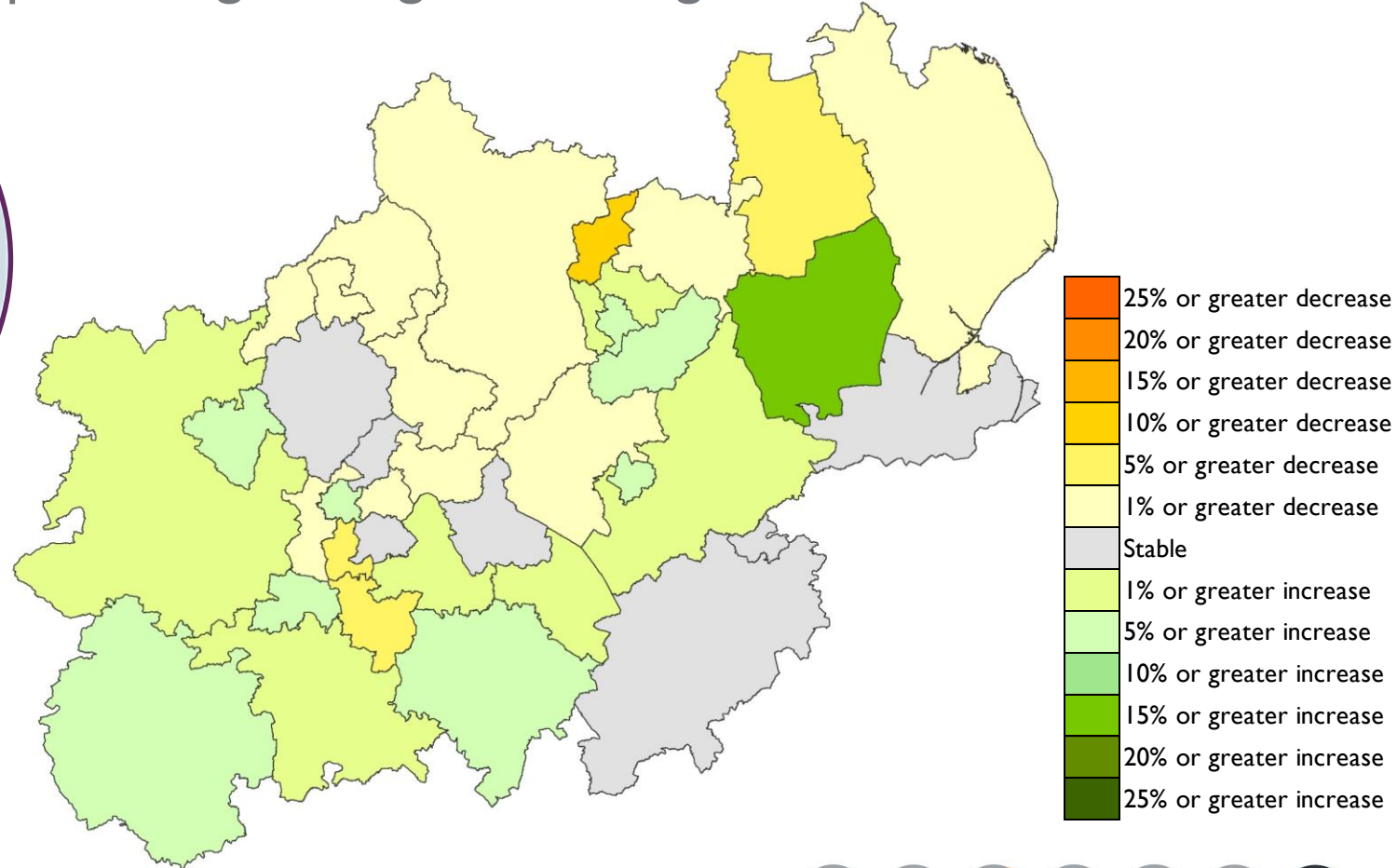


Access to care: percentage change in residential home services

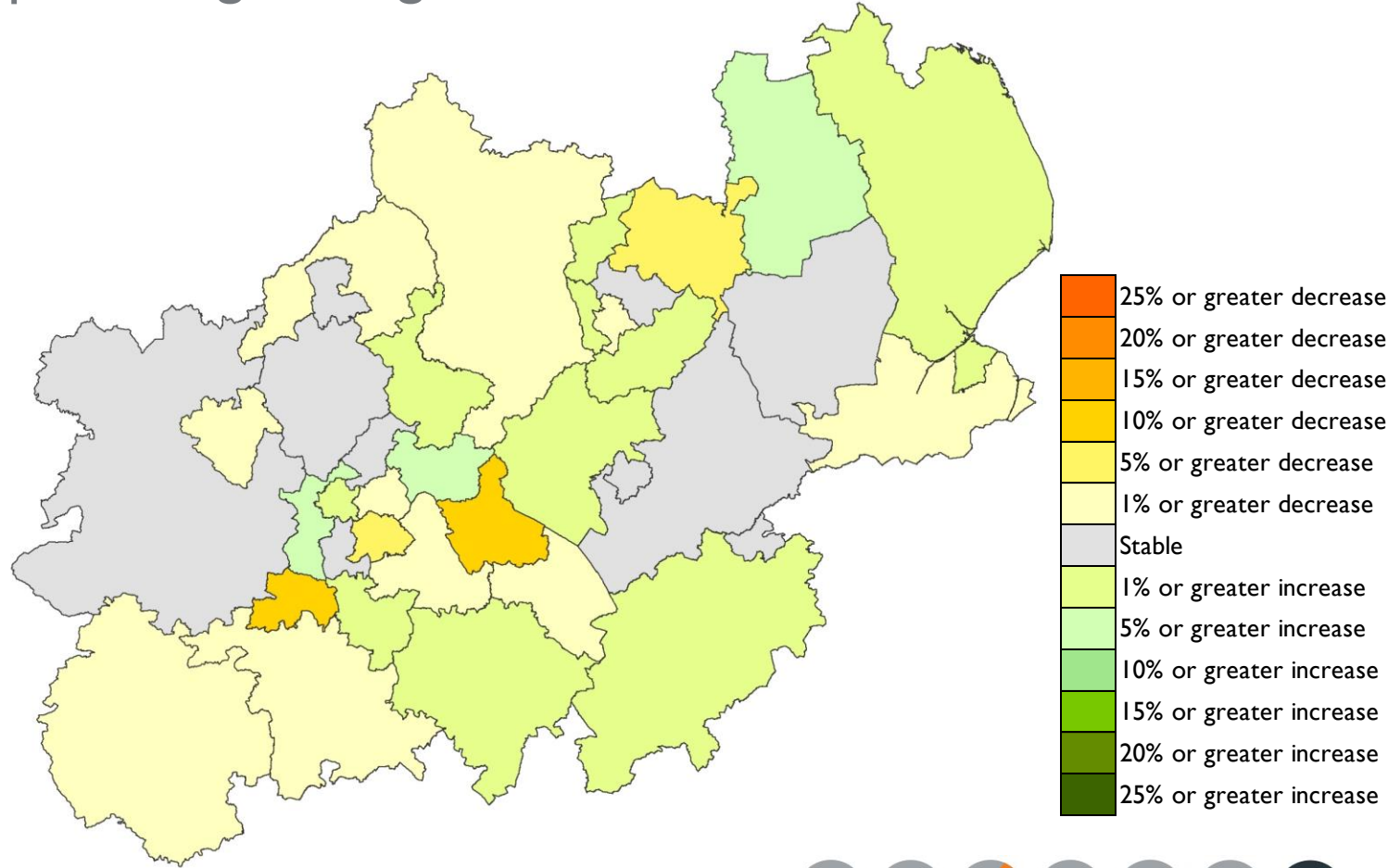


Access to care: percentage change in nursing home beds

State of Care 2018/19
The number of residential and nursing home beds has steadily fallen in all regions over the last five years.



Access to care: percentage change in residential home beds

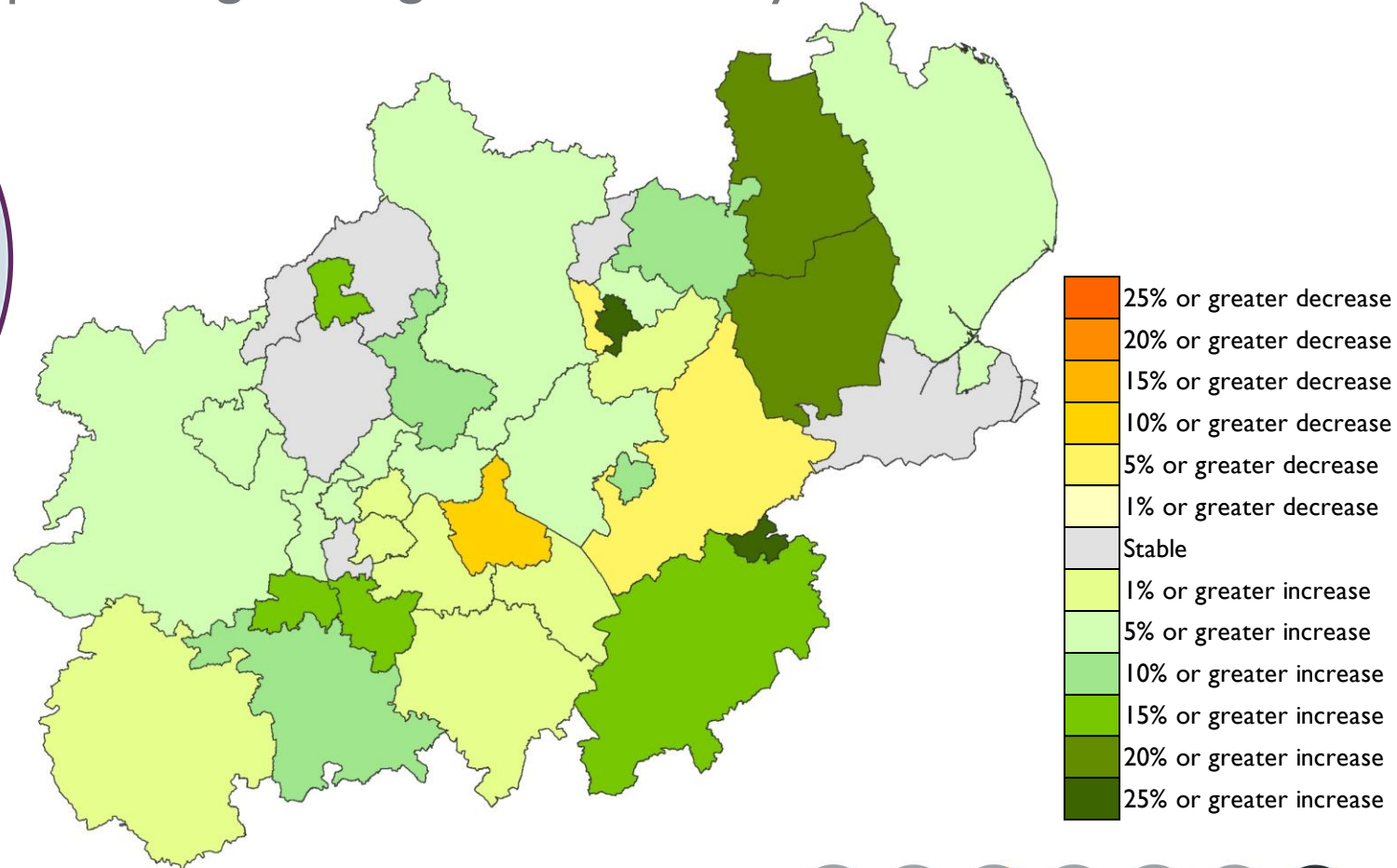


Access to care:

percentage change in community social care services

State of Care 2018/19

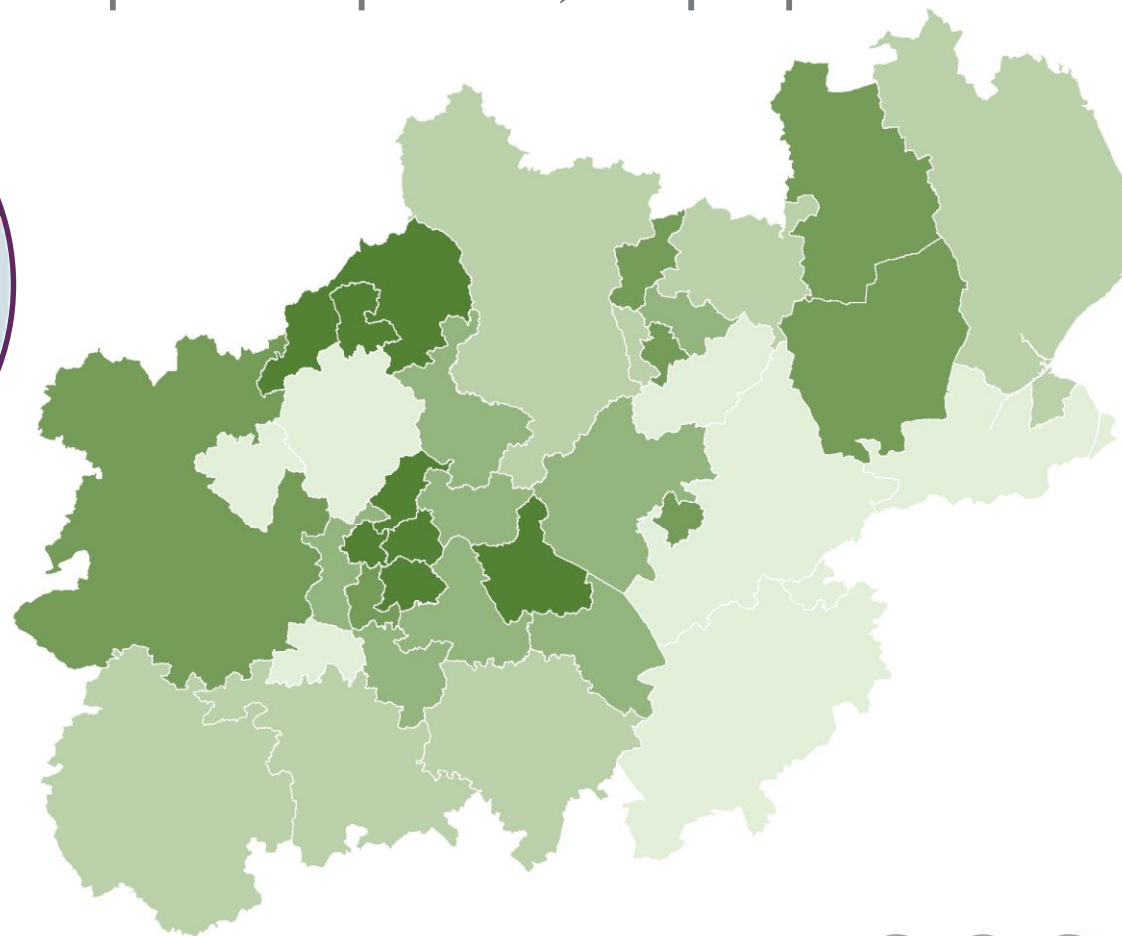
As the amount of care home provision has reduced across the country, the number of domiciliary care agencies has continued to increase – by 23% in the last five years.



Access to care: GP practices per 100,000 people

State of Care 2018/19

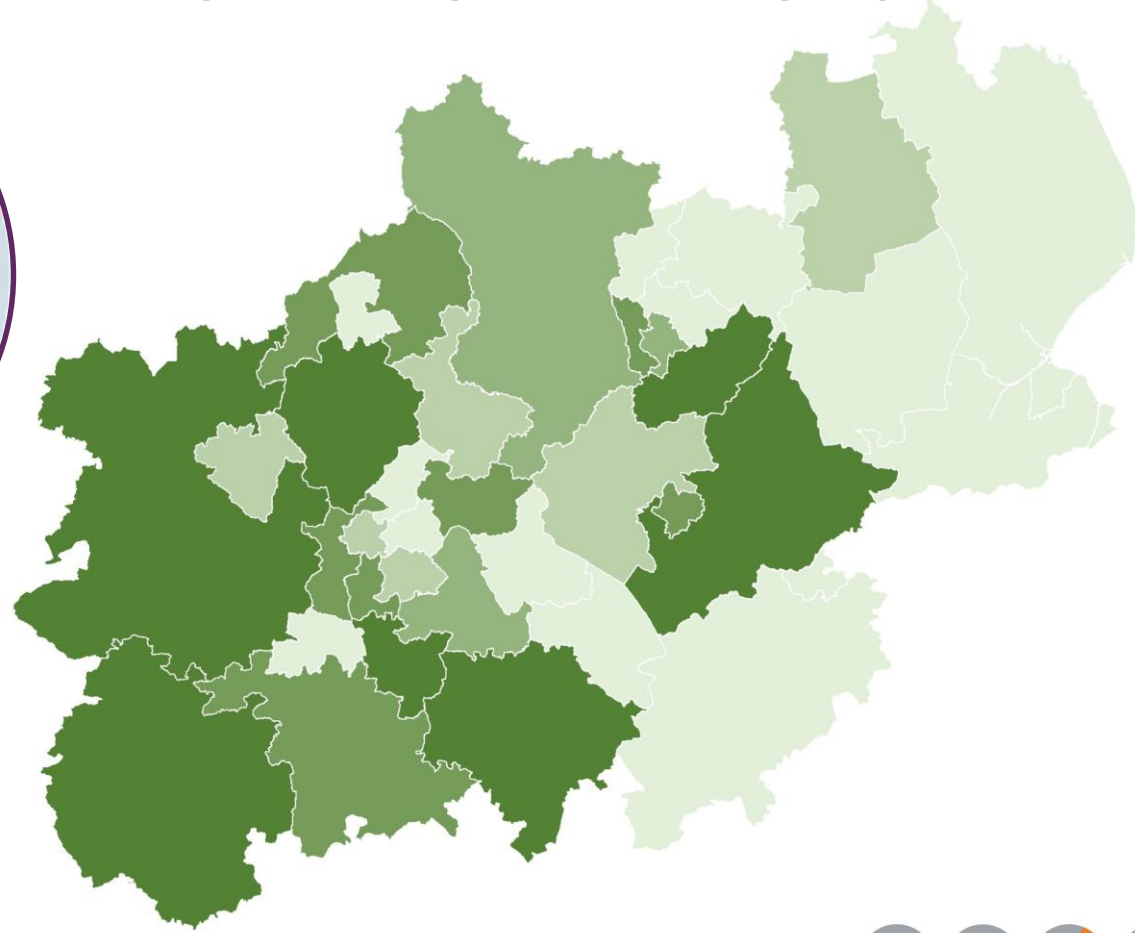
There is also a very wide range in the number of GP appointments for every 1,000 people of all ages on GP lists per month across CCG areas: in May 2019, there was an average of 424 appointments nationally, with the lowest of 241 and the highest of 613.



Access to care:

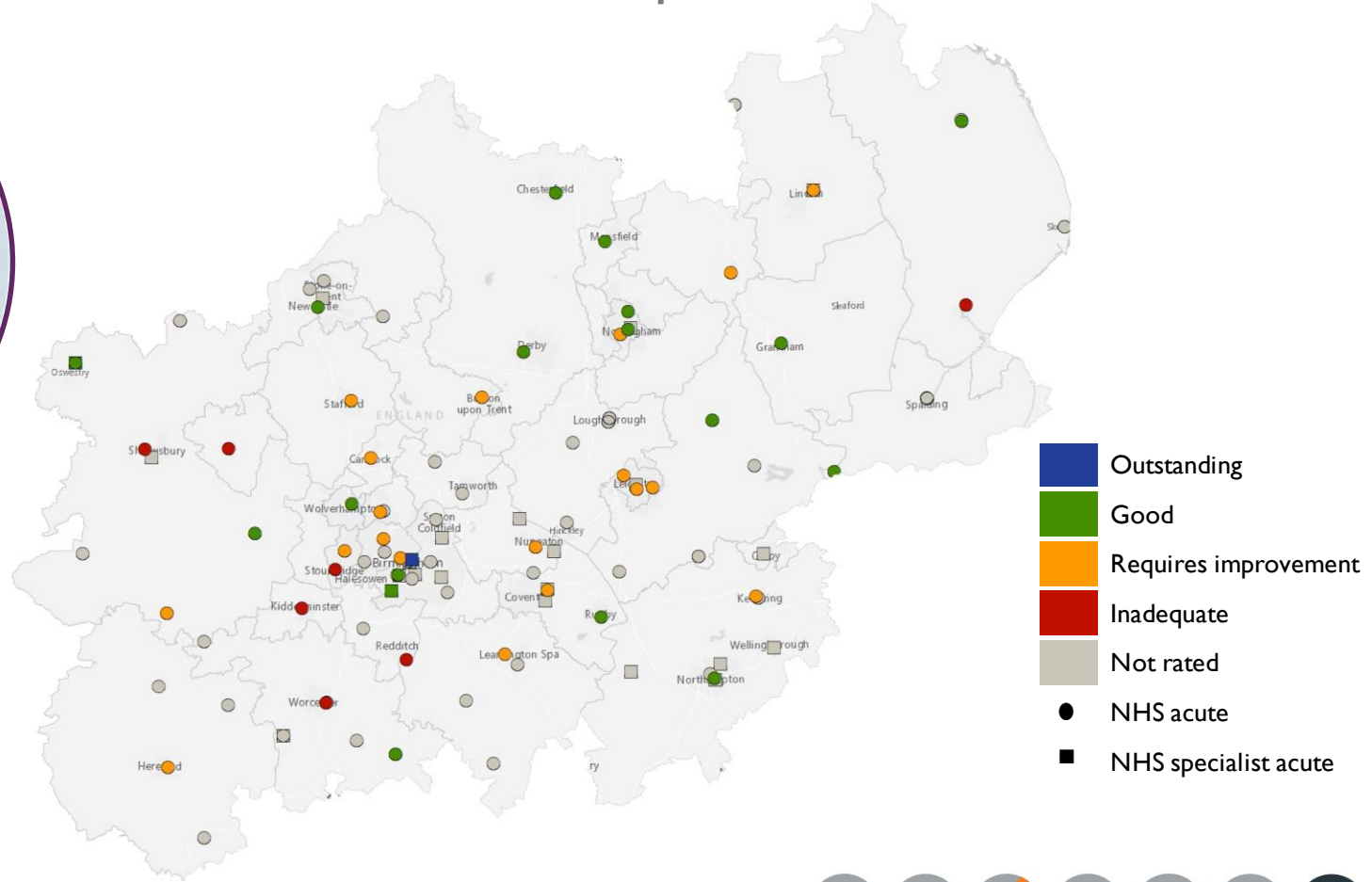
Dental practices per 100,000 people

State of Care 2018/19
22 million adults (50.2% of the population) saw an NHS dentist in the 24 months to 30 June 2019, which was approximately 100,000 fewer than in the 24 months to 30 June 2018.



Access to care: location of NHS acute hospitals

State of Care 2018/19
 Access to the right care at the right time is one of the biggest challenges facing health and social care services, and particularly those seeking treatment in NHS acute hospitals.



Unrated NHS acute hospitals tend to be smaller sites offering fewer services and often operate as a satellite to a larger location, with the same management oversight. Acute NHS sites will also be unrated where trusts have been reconfigured and hospitals now come under a new trust that is yet to be rated.

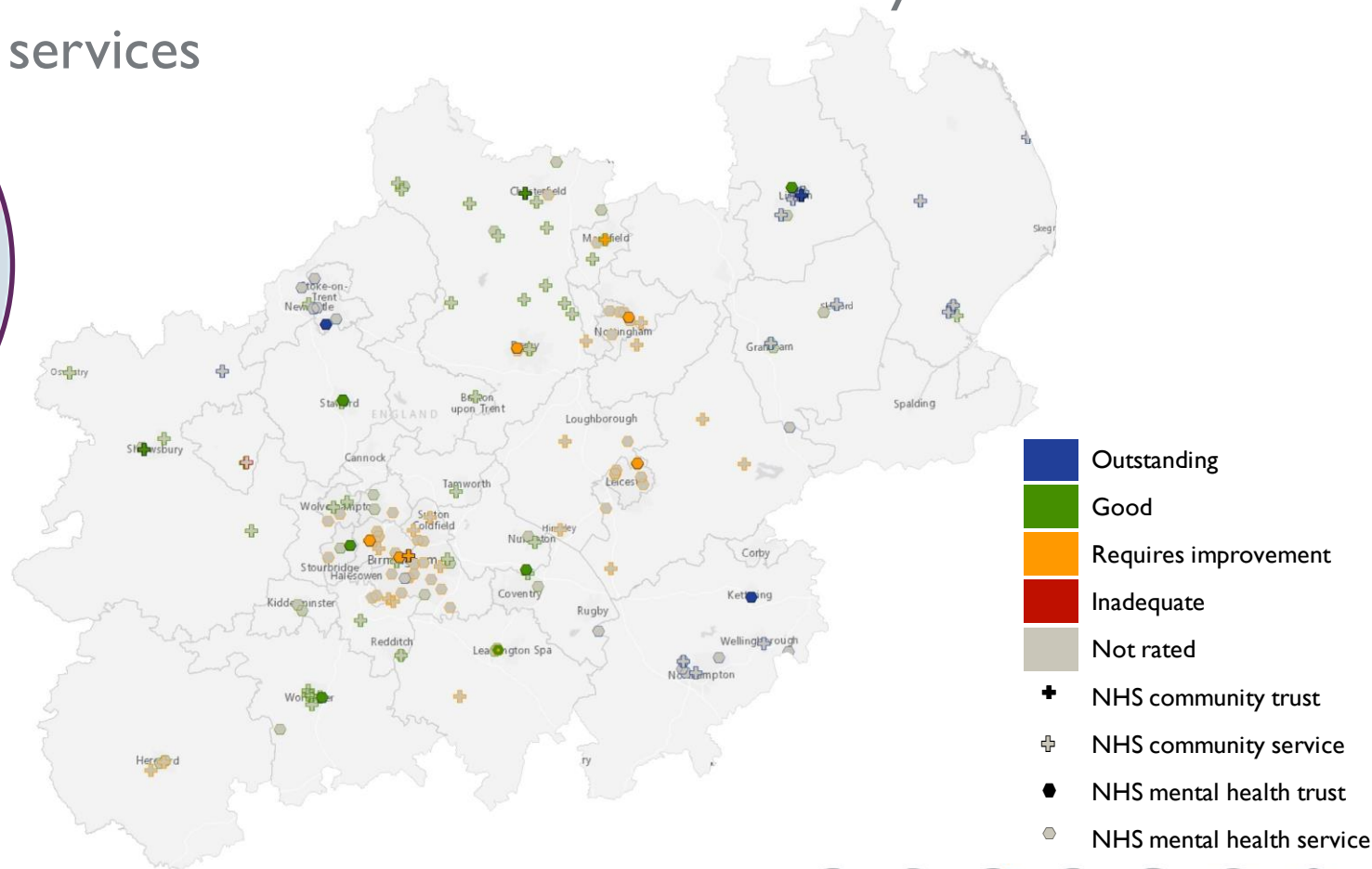
Source: CQC HSCA register September 2019



Access to care:

location of NHS mental & community health trusts and services

State of Care 2018/19
 Nationally we are concerned about a number of 'pinch points' in the mental health care system: the availability of community services for people with autism and/or a learning disability, people not getting access to the community or inpatient care they need at the time they need it, and difficulties accessing community CAMHS.



We do not inspect and rate NHS mental health and community health services at a location level. Instead they are given a trust wide rating for a core service to cover all locations, except in occasional circumstances where a site is managed by an acute trust.

Source: CQC HSCA register September 2019

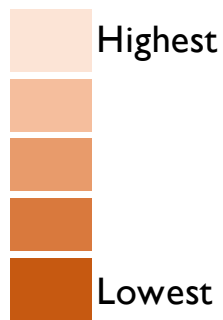
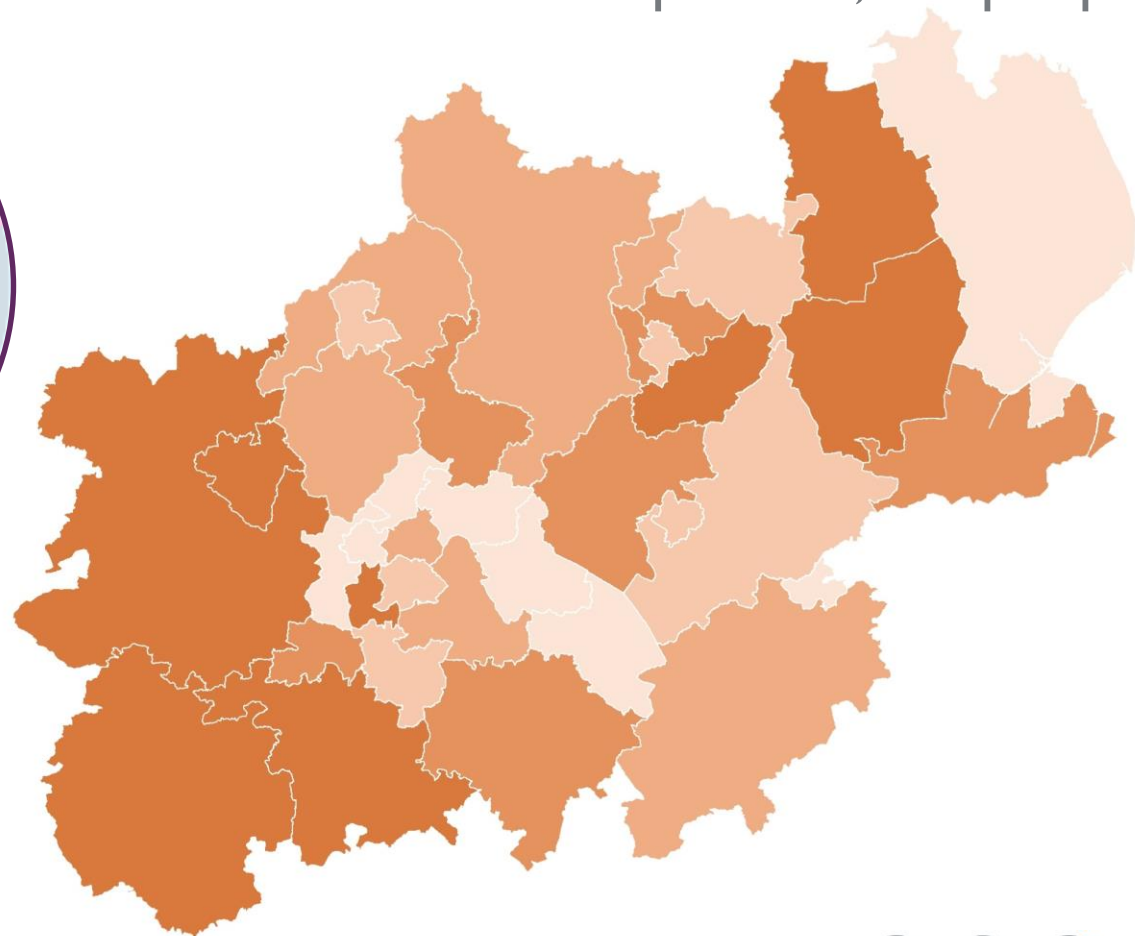


Systems:

rate of A&E attendances per 100,000 people

State of Care 2018/19

Last year we noted the relentless year-on-year rise in attendances at emergency departments and acute hospital admissions. This trend has continued over the last year, with urgent and emergency services bearing the brunt of this demand and struggling to provide high-quality care.

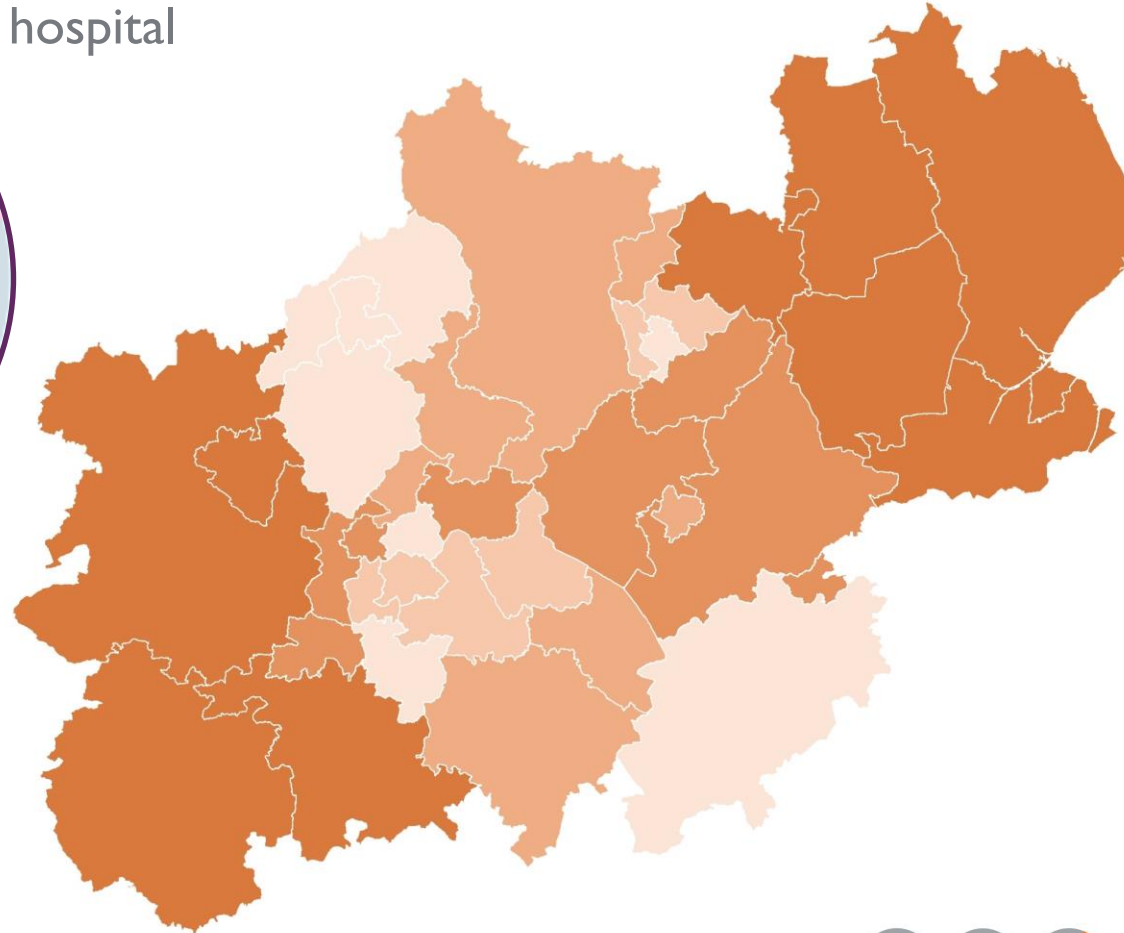


Systems:

rate of emergency readmissions within 30 days of discharge from hospital

State of Care 2018/19

We have heard from a range of sources that people with multiple complex issues can experience more challenges, including when they move between services, such as being discharged from hospital.



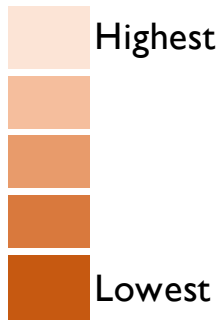
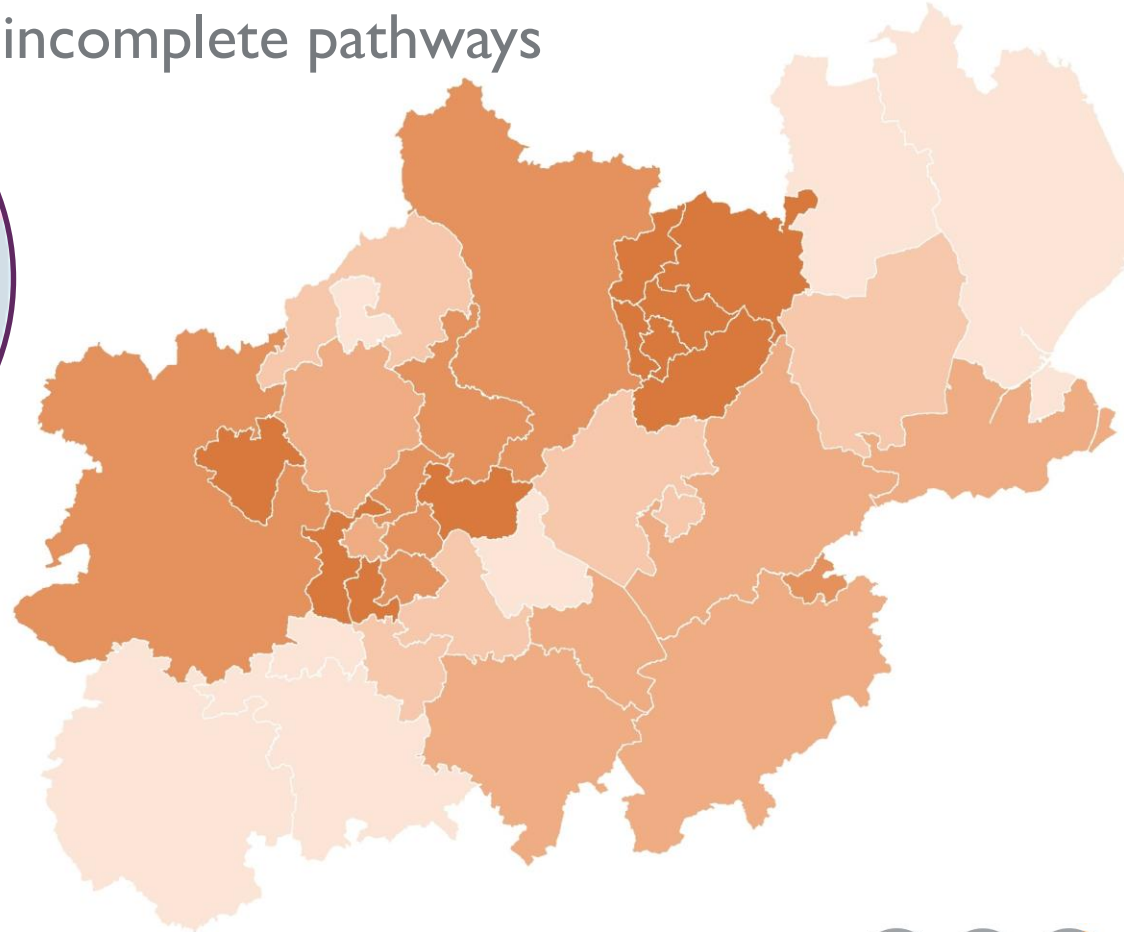


Systems:

median time (in weeks) for referral to treatment (RTT)
incomplete pathways

State of Care 2018/19

Over the last year we have seen an increase in referral to treatment times (RTT), with 4.4 million people at the end of June 2019 waiting to start treatment. This is an increase of 40% since June 2014.



CCGs in this region

NHS Birmingham and Solihull CCG
NHS Cannock Chase CCG
NHS Corby CCG
NHS Coventry and Rugby CCG
NHS Derby and Derbyshire CCG
NHS Dudley CCG
NHS East Leicestershire and Rutland CCG
NHS East Staffordshire CCG
NHS Herefordshire CCG
NHS Leicester City CCG
NHS Lincolnshire East CCG
NHS Lincolnshire West CCG
NHS Mansfield and Ashfield CCG
NHS Nene CCG
NHS Newark and Sherwood CCG
NHS North Staffordshire CCG
NHS Nottingham City CCG
NHS Nottingham North and East CCG

NHS Nottingham West CCG
NHS Redditch and Bromsgrove CCG
NHS Rushcliffe CCG
NHS Sandwell and West Birmingham CCG
NHS Shropshire CCG
NHS South East Staffordshire and Seisdon Peninsula CCG
NHS South Lincolnshire CCG
NHS South Warwickshire CCG
NHS South West Lincolnshire CCG
NHS South Worcestershire CCG
NHS Stafford and Surrounds CCG
NHS Stoke on Trent CCG
NHS Telford and Wrekin CCG
NHS Walsall CCG
NHS Warwickshire North CCG
NHS West Leicestershire CCG
NHS Wolverhampton CCG
NHS Wyre Forest CCG



1. Index of multiple deprivation 2019

The rankings of deprivation for each CCG provided in the official statistics linked below have been divided into quintiles ranging from the highest (least deprived) to lowest (most deprived) within the region itself.

<https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019>

2. Ratings score

Ratings scores are a representation of the aggregated ratings in a CCG.

Each key question (including key questions for core services for hospitals) is given a score as follows; outstanding = 3, good = 2, requires improvement = 1 and inadequate = 0. The overall score is then divided by the total available score for the area. The higher the score the better the ratings picture.

The hospitals metric uses patient datasets to weight the numerator for acute and mental health services to reflect where residents from that CCG are visiting to receive their actual care. For example if trust X provided 80% of attendances for a single CCG, 80% of this CCGs' score would be comprised of the ratings from trust X.

For ASC and GPs the numerator is solely formed by using the key question ratings for those locations situated in a CCG, i.e. each GP or ASC location receives a score for each key question. For the hospital sector each core service receives a score for each key question. Ratings data is from 9 September 2019.

3. Ratings change

The charts show ratings change within each CCG for ASC and GP services. The stacked bars show the percentage of locations that have improved, the percentage where there has been no change and the percentage that have deteriorated.

Areas with the greatest percentage of improved locations are shown on the left of the charts. It should be noted that the number of locations re-inspected in each area varies widely and in some cases there have been a low number of locations re-inspected; these are included in brackets on the charts to provide additional context. We have only included locations that have had a re-inspection in the twelve month period from 1 September 2018 to 31 August 2019. There are a small number of CCGs with no locations that were re-inspected during that time period; these have not been included in the charts.



4. Access to care: percentage change in services and beds

Data from the Health and Social Care Act register was cut on 3 April 2018 and again on 5 August 2019. The change between CCG totals of registered services and beds was calculated and divided by the earliest total. The converted percentage change was then banded into ranges within the region.

5. GP practices per 100,000 people

Using data from NHS England, the total number of GP patients registered in each CCG was divided by 100,000. The sum of registered GP practices in the CCG was then divided by the first figure. Quintiles were calculated to show the highest and lowest rates within the region. This data is a snapshot as at 30 June 2019.

<https://digital.nhs.uk/data-and-information/publications/statistical/general-and-personal-medical-services/final-30-june-2019>

6. Dental practices per 100,000 people

The ONS 2018 mid-year CCG population estimate was divided by 100,000. The sum of registered dental practices in the CCG taken from the CQC health and social care act (HSCA) register was then divided by the first figure. Quintiles were calculated to show the highest and lowest rates within the region. HSCA register data is from 9 September 2019.

7. Locations of trusts and hospitals

Address data from CQC registered NHS acute and mental health services were plotted on the maps. We rate mental health services at trust level and give acute hospitals a rating of their own – along with an overall one for the trust. This is shown by the symbols on the map. HSCA register data is from 9 September 2019.



8. Rate of A&E attendances per 100,000 people

The ONS 2018 mid-year CCG population estimate was divided by 100,000. The total number of A&E attendances for all people living in each CCG between April 2018 – March 2019 was then divided by the first figure. Quintiles were calculated to show the highest and lowest rates within the region.

9. Rate of emergency readmissions within 30 days of discharge from hospital

The total number of readmissions for adults (aged 18+) between April 2018 and March 2019 was divided by the total number of discharges for adults for the same time period. Quintiles were calculated to show the highest and lowest rates within the region. This data does not include readmissions or discharges for cancer or obstetrics patients.

10. Median time (in weeks) for referral to treatment (RTT) incomplete pathways

The average (median) waiting time (in weeks) for patients who were waiting to start treatment at the end of June 2019 has been banded in to quintiles for each region.

<https://www.england.nhs.uk/statistics/statistical-work-areas/rtt-waiting-times/rtt-data-2019-20/>

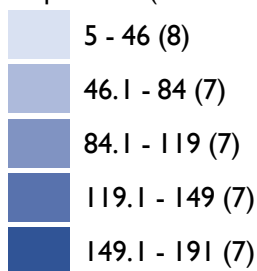


Technical Appendix

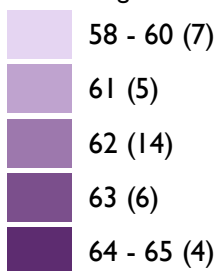
How we made these maps

Metrics for each of the CCGs in the region were ranked from highest to lowest and assigned to quintiles. A quintile represents 20% or one fifth of the region's data. For ratings scores, because of the smaller overall data range, we have made some adjustments to the quintiles, to better show the variation within regions. You can see the ranges and numbers of CCGs within each quintile below.

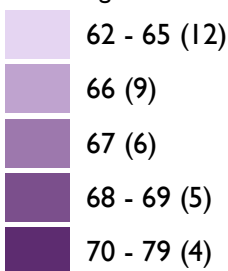
Deprivation (IMD CCG Rank)



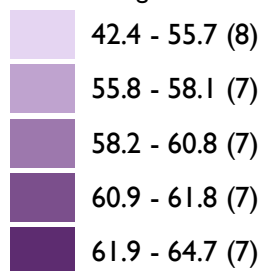
ASC ratings score



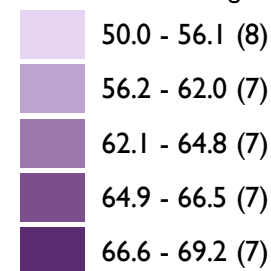
GP ratings score



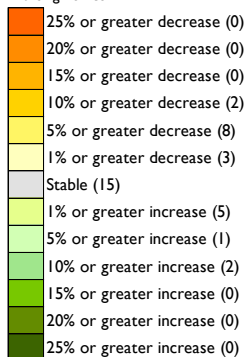
Acute ratings score



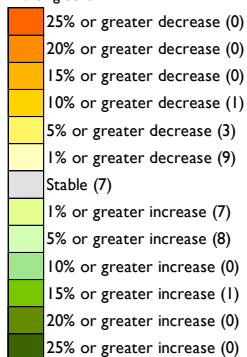
Mental health ratings score



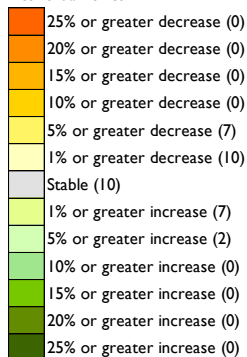
Nursing homes



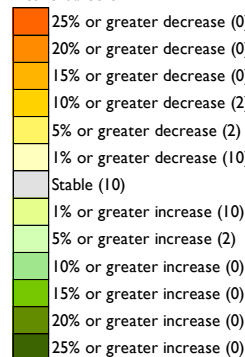
Nursing beds



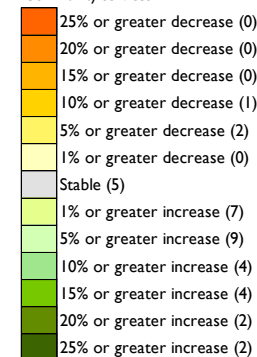
Residential homes



Residential beds

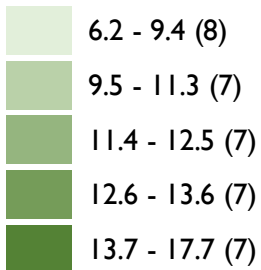


Community services

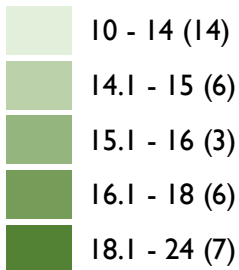


Technical Appendix

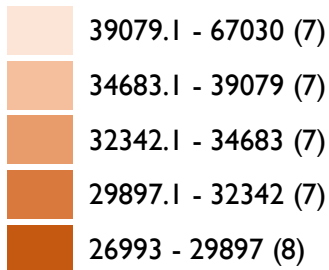
GP practices per 100k people



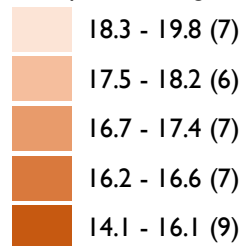
Dental practices per 100k people



A&E attendances per 100k



Rate of emergency readmissions within 30 days of discharge



Median time (in weeks) for referral to treatment (RTT) incomplete pathways

