

Age @ LTHT - Patients

Accident & Emergency Breaches 2015

Attendances		Breaches	
Under 16	17.6%	5.3%	Under 16
16 - 17	2.2%	1.1%	16 - 17
18 - 24	14.7%	7.7%	18 - 24
25 - 34	15.7%	9.1%	25 - 34
35 - 44	11.2%	9.0%	35 - 44
45 - 54	10.6%	10.0%	45 - 54
55 - 64	7.6%	10.0%	55 - 64
65 - 74	7.0%	13.7%	65 - 74
75 - 84	7.8%	18.9%	75 - 84
85+	5.6%	15.3%	85+

Outpatients Do Not Attend (DNA) 2015

Did Not Attend

14.2%	Under 16
2.1%	16 - 17
10.8%	18 - 24
17.7%	25 - 34
14.3%	35 - 44
13.6%	45 - 54
9.9%	55 - 64
7.4%	65 - 74
6.7%	75 - 84
3.3%	85+

Referrals to Treatment (RTT) Breaches 2015

Attendances		Breaches	
Under 16	11.4%	19.6%	Under 16
16 - 17	1.1%	1.5%	16 - 17
18 - 24	4.8%	5.3%	18 - 24
25 - 34	8.7%	10.8%	25 - 34
35 - 44	9.7%	11.4%	35 - 44
45 - 54	13.9%	14.8%	45 - 54
55 - 64	15.3%	13.4%	55 - 64
65 - 74	17.3%	12.4%	65 - 74
75 - 84	13.8%	8.7%	75 - 84
85+	3.9%	2.0%	85+

Readmission

13.2%	Under 16
0.8%	16 - 17
3.6%	18 - 24
6.4%	25 - 34
6.9%	35 - 44
10.4%	45 - 54
12.8%	55 - 64
16.6%	65 - 74
17.7%	75 - 84
11.5%	85+

Readmissions 2015

Leeds Local Authority District Population:

Under 16 - 18.3%, 16-17 - 2.3%, 18-24 - 31.1%, 25-44 - 28.7%, 45-64 - 23.0%, 65-74 - 7.5%, 75-84 - 5.1%, 85+ - 1.0%. (Source: 2011 Census)

Key Findings

- The younger the individual the more likely an appointment is not attended and they are not treated within an 18 week period from the point of referral. In addition, younger individuals are less likely to provide information when asked whether or not they would recommend the service to a family member or friend.
- The older the patient the more likely they are to be readmitted as an inpatient and the more likely they are not to be treated within 4 hours within Accident and Emergency.

Key Actions

- Continue to take steps to ensure the overall patient experience and rate of outpatient do not attends, referral to treatment breaches and accident and emergency breaches do not show difference according to age by 2020 by providing targeted, bespoke data and support to CSUs in identifying specific, relevant actions as necessary in 2016.
- Continue to put steps in place to ensure ready access to hospital services and information from the first point of contact for patients and carers by implementing the NHS Accessible Information Standard in 2016.