



EQUALITY & DIVERSITY PATIENT ANALYSIS

January 2017

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1. Introduction

The Walton Centre NHS Foundation Trust, originally formed in 1992, and attained Foundation Trust status on 1st August 2009. The Trust is unique to the NHS, as it is the only specialist Neurosciences Trust in the UK.

Based in Liverpool, our catchment population is about 3.5 million and is drawn from Merseyside, Cheshire, Lancashire, Greater Manchester, the Isle of Man and North Wales. In addition, due to an international reputation in some areas of expertise, referrals are received from other geographical areas of the UK. Service delivery is achieved via a 'hub and spoke' system and we have partnerships with 13 NHS trusts across the area we serve.

This satellite model of care for neurology means that many patients are able to access outpatient consultations and many tests closer to home, and takes specialist services as close to patients as possible, with neurosurgery, highly specialised assessments and in-patient care being undertaken at The Walton Centre.

The range of conditions provided by the Trust include the neurosurgical management of trauma – both head and spinal injuries; tumours of the central nervous system both cranial and spinal; neurovascular diseases; epilepsy (including a full surgical program); movement disorders including the provision of a deep brain stimulation service; neurosurgical management of pain with a particular focus on trigeminal neuralgia; provision of neuro-modulation services; multiple sclerosis; motor neurone disease; chronic neuropathic pain; a comprehensive spinal neurosurgical service; treatment of spasticity; facial pain; headache; migraine; and we also offer a neuro-rehabilitation program.

The provision of these services benefits from the close multidisciplinary environment generated by the specialist nature of the Trust and is a key advantage afforded by the Trust's unique specialisation in neurosciences.

Our vision is to provide our patients with excellent neurosurgery, neurology, pain and spinal services, built on research and education and delivered with care, dignity and compassion in line with the Walton Way.

Our mission is to provide a high quality of treatment, care and patient experience in the most appropriate place for the needs of our patients.

2. Local Community Demographics

Comparison of the Trust's treated population with that of the local community of Liverpool is difficult as the Trust is not coterminous with its patient catchment area.

For the purposes of this report, local demographic estimates in 2011 (Office for National Statistics (ONS, 2011)) for Merseyside, Cheshire, Lancashire, Greater Manchester and North Wales have been used for to give an estimate of the Trust's footprint catchment area. (See appendix 2 for local area demographics data).

The data that has been gained from the 2011 census shows that the catchment area has 49.1% male and 50.9% female population. The ethnicity of the catchment areas shows 87.2% of people describe themselves as White British, 2.6% as Asian/Asian British Pakistani, 2.2% as White other and 1.5% as Asian/Asian British Indian.

The data identifies 66.6% of people describe themselves as Christian, 5.0% Muslim, 20.5% have no religion and 6.3% did not state their religion. From the results it also appeared that 20.4% of people identified themselves having a disability that limited their day to day activities.

The catchment communities served by the Trust are diverse in their make-up, but are similar in that they are generally less healthy when compared with the rest of the population of England, with a higher proportion of people who have a long term illness. Many areas suffer high levels of deprivation. Where there are high rates of unemployment and deprivation, there tends to be poorer health and a greater demand for health and social care services.

Rates of obesity, smoking, cancer and heart disease related to poor general health and poor nutrition are significantly higher than the national average, whilst life expectancy at birth in some areas is one of the lowest in England. Common themes of ill health and death include circulatory diseases such as coronary heart disease and stroke, diabetes, cancer, and respiratory diseases such as pneumonia, asthma, bronchitis and emphysema.

The Trust is not directly responsible for the actual referrals to the services offered and, as such, the populations seen may differ from the overall catchment population. It is, however, valuable to analyse the population seen at the Trust and to monitor how this changes over time. Comparison against the local population may also be useful in suggesting areas for joint work with commissioner organisations over access to services and other related issues.

3. Patient Data Collection

The patient demographics collected routinely by the Trust on its Patient Administration System (PAS) include age (date of birth), sex, marital status, ethnicity and religion. The Trust does not routinely collect sexual orientation, disability status, pregnancy and maternity history (other than in relation to current maternity episodes) or gender reassignment.

The Trust is working to develop mechanisms to collect data on age, ethnicity, sex, religion, sexual orientation, disability (by impairment) and first language of patients accessing services and will this report data when implemented. The quality of the data collected is variable. Age and sex are collected accurately for most patients but ethnicity and religion rely on patient's responses and appropriate information requests.

Some of the data items such as disability are collected for individual patients but only as an alert on the Trust system, rather than formally structured data, so that appropriate arrangements can be made for the patient around facilities and transport. The data is therefore not representative and cannot be usefully analysed.

In terms of data quality, the accurate recording of ethnicity is an organisational target and the Trust put actions in place to try and improve this data collection, it is disappointing that the results achieved this year do not reflect this. A full review will be undertaken to identify gaps in the process and resolve any issues. It has been identified that the introduction of a new electronic check in service has the option to agree demographics already collated, but not to collate, so this will be reviewed.

Work will be undertaken over the next 12 months to focus on and improve the data collated from outpatient referrals and attendances, although the Trust is actively working to improve disclosure of equality monitoring of all patients accessing services.

4. Patient Data

The report provides an overview of the Trust's progress against key areas of patient equality:

- Access to services
- Patient support
- Patient experiences

It highlights key statistical indicators on patient equality. References in this report to tables can be found in Appendix 1. This information will be used to determine if any practices or procedures unfairly discriminate against patients based upon their protected characteristics.

In particular;

- To investigate disproportionate disparities for patients based upon the protected characteristics collated; these are ethnicity, age, gender, religion and belief.
- To systematically review services, procedures and practices using Equality Impact Assessments. This will identify any negative impacts for patients based upon their protected characteristics.
- To raise awareness of diversity and equality principles amongst patients and identify and support their rights.

4.1 Access to Services

4.1.1 Inpatient/Daycase Activity

Reviewing the data available for inpatients attending the Walton Centre in 2015, it would appear that female patients have remained a similar level and are higher at 60.3% and compares to a level of 57.7% in 2014. This compares to the catchment area percentage of 50.9%. The increase in female activity has been a trend over the last 4 years.

93.4% of inpatients were described as White British, compared with 87.2% from the catchment area, this is a decrease of 0.7% since 2014, and identifies a sustained decrease. The other

groups prominent in the catchment area were not identified in significant numbers, with the not identified/not recorded decreasing by 0.2% identifying data capture of religion increasing.

The 2016 data reveals the Trust saw less patients in the 18 to 24 age range than in 2015, a further reduction from 2014, this correlates with reduction in non-elective activity. A reduction in the 74+ age group seen in 2015 has not continued with an increase of 0.6% in 2016. It would appear this then is not a trend but natural fluctuations in disease and referrals.

Religious observance data capture in 2016 identifies 7.0% religion unknown compared to 9.4% in 2015, this compares to 6.9% in the catchment census data. The data not recorded however has increased from 14.6% in 2015 to 20.5% in 2016. This is significant increase in data not being captured in relation to religious belief.

18.1% of inpatients suggest they had no religion preference compared to the catchment area of 20.5%, this remains consistent since 2014. Christianity made up 52.9% of the patients, a decrease since 2015, with Islam remaining constant at 0.4%, this is reflective of the ethnicity we have identified in the catchment area.

See Appendix 1: Inpatient/Daycase Activity 2016

4.1.2 Inpatient/Daycase Waiting Times

The data relating to waiting times does not appear to show any major variances and potential discrimination comparing percentages with the inpatient demographics identified above. The sex of patients, ethnic group, age and religion do not appear to have any impact on the length of wait, and as numbers of patients in groups with higher waits are low, this is difficult to assess.

It can be seen across the data sets that the average weeks wait has decreased significantly since 2015, and it does not appear this has occurred disproportionately in any characteristic. Further analysis will be made when the next year's data set is available.

See Appendix 1: Inpatient/Daycase Waiting Times 2016

4.1.3 Inpatient/Daycase patients DNA's (DNA – Did Not Attend for admission)

The numbers of DNA's experienced by the Trust in 2016 has decreased significantly from 319 to 166.

The figures in this year's data set continues to support 2015 data and identifies that female patients (65.7%) are more likely to DNA than male patients, and increase of 11.2%. The level of female nonattendance is not representative of the catchment area population with females making up 50.9% of the population or of inpatient females who make up 60.3% of inpatients.

In both 2013 and 2014 data sets identified patients aged 25 to 39 years old were more likely to DNA. In 2015 this moved to patients in the 40 to 49 years old age group, and continues in

2016, with 56.7% of DNA's being in this age group. It should be noted however, the numbers of DNA's however is low, so statistically more detailed analysis is difficult.

See Appendix 1: Inpatient/Daycase (TCI) DNAs 2016

4.1.4 Outpatients Attendances

The outpatient data indicates the split of male and female accessing outpatient's remains similar to 2015; although the female attendance rate is lower than female inpatient activity rate.

New attendances of White British patients dropped from 69.3% to 63.0% in 2015, and only see a slight increase of 63.6% in 2016, although there has been an increase in data not recorded of 1.2%.

Follow up patients were identified as 80% White British compared to 82.0% in 2015. This rate is lower than the catchment population estimates of 87.2%.

The low attendance data for religious belief once again highlights the issues around data collection at outpatients for new attendances, with 59.2% of patients not having a religious preference recorded.

It is difficult to reflect on any trends with the amount of data not recorded. The Trust will work to increase the data collection in outpatients and try to identify trends in the next year's analysis.

See Appendix 1: Outpatient Attendances 2016

4.1.5 Outpatient Waiting Times

Outpatient waiting times have increased across the Trust in 2016.

The waiting time in weeks for sex is very similar and would indicate no bias, the number of females waiting for an appointment reflects more females being seen at the centre.

The Trust is unable to reflect on any other groups as there is once again a large amount of data not recorded. The Trust will work to increase the data collection in outpatients and try to identify trends in the next year's analysis.

See Appendix 1: Outpatients Waiting Times 2016

4.1.6 Outpatients DNA's

The data identifies no significant changes in DNA's by sex.

The age profile suggests a increase in DNA's for new patients 25-39. All other groups remain fairly static.

The Trust is unable to reflect on any other protected characteristics, as there is over 60% data not recorded in some of these data sets. The Trust will work to increase the data collection in outpatients and try to identify trends in the next year's analysis.

See Appendix 1: Outpatient DNA's 2016

4.1.7 Mortality

The data relating to mortality by equality characteristic has been given as a summary total, rather than by speciality, as the numbers are small and specific patients would be able to be identified.

The breakdown of mortality by the protected characteristics is difficult to compare as most of the hospital mortality occurs with non-elective admissions and often patient demographics are difficult to obtain during these circumstances.

See Appendix 1: Mortality rates (In Hospital) 2016

4.2 Patient Support

4.2.1 Interpreting

Effective communication is the key to building any human relationship, whether in a social or professional context. One of the main aims of the Trust is to increase access to its services and to promote social inclusion, and changing the way interpreting services are used can improve patient care.

The Trust has adequate language support mechanisms for patients, and where appropriate, their guardians and carers, who do not speak sufficient English to effectively communicate.

The Trust uses an interpretation and translation service to ensure that people whose first language is not English and those with sensory difficulties have access to support to enable them to make informed choices about their healthcare. The provision of these services is supported by Beacon Language Service, Language Line and Action on Hearing Loss.

4.3 Equality Analysis

The Trust continues to recognise the role it plays in ensuring that health inequalities are identified and eliminated and equity and fairness are core qualities and values to be embedded within the organisation. Equality impact assessments (EIA) are the key to achieving this aim.

Due to the introduction of the Equality Act in 2010, and the publication of the Public Sector General and Specific duties in 2011, the Trust's equality impact assessment process has undergone a thorough review. This was necessary in order that the documentation and guidance, as well as impact assessment training and reporting mechanisms, reflected the changes to equality legislation.

The main features of the legal requirements are:

- To collect information relating to the effect that policies and practices may or have had on employees, service users and others from the protected characteristics (groups).
- To provide evidence of the analysis that has been undertaken to establish whether policies or practices will, or have, furthered the three equality aims of the general duty.
- To detail the information used in the analysis
- To detail the engagement undertaken with people who have an interest in the equality duty and who use the hospital services

To comply with requirements of the Equality Act, the Trust must consider the 9 protected characteristics protected by the Act when undertaking equality impact assessments.

The protected characteristics are: age, disability, gender reassignment, race (ethnicity), religion and belief, marriage and civil partnerships, pregnancy and maternity, sex (gender) and sexual orientation.

Human rights remain the highest priority and must be considered alongside the other protected characteristics throughout all business planning, development and implementation.

4.4 Patient Satisfaction

4.4.1 Surveys

The NHS is encouraging people to exercise more choice over the health services they use, and to be more involved in the design and delivery of health services. Undertaking local surveys to assess patient experience allows the Trust to understand what matters to patients and to respond to this in new ways, making sure that every contact with a patient counts towards delivering the highest-quality services.

The aim in collecting and using patient feedback is to:

- understand current problems in care delivery, and design quality improvement initiatives to address them;
- monitor the impact of quality improvement initiatives;
- allow benchmarking of services and the organisation against others;
- help improve communication between patients and staff;
- inform planning and service improvement, helping patients shape the services that they use.

4.4.2 Local Patient Surveys

The Trust local survey is undertaken using electronic handheld devices. The device is designed to be accessed by the patient alone, but the patient is also supported by volunteers from the Trust. Volunteers are used to ensure that demands are not placed on staff and to maintain

impartiality. Volunteers are also able to support any patient who have difficulties or need access to interpretation.

The Friends and Family Test has also been implemented and further embedded in the Trust, with all patients leaving the Trust being asked whether they would recommend the Trust to friends and family if they needed similar care and treatment. Feedback has been extremely positive, and the recent roll-out to capture the feedback of outpatient and daycase patients has been a success.

The Trust reviewed the local patient survey at the end of 2015 and started collecting demographics of the patients undertaking its surveys, with regards to age, gender and ethnicity to enable comparison in experiences over these protected characteristics.

The results for 2016 are below:

Gender	Percentage %
Female	51.9%
Male	48.1%
Total	100.0%

Age	Percentage %
18 - 24	11.1%
25 - 34	25.9%
35 - 44	11.1%
45 - 54	22.2%
55 - 64	18.5%
65 and Over	11.1%
Total	100.0%

Ethnicity	Percentage %
White British	96.3%
White Other	3.7%
Total	100.0%

4.4.3 National Inpatient Survey

A national survey is undertaken across all acute NHS Trusts in the country to identify patients' experiences and perceptions of care. These results are then analysed and compared to allow individual Trusts to benchmark themselves against others and identify areas for improvement.

Patients were eligible for the survey if they were aged 16 years or older and had at least one overnight stay in the Trust. The sample size required for the Care Quality Commission (CQC) for this Trust was 1250 patients (who were inpatients between June and August 2015, with the survey being sent to them in October 2015) of these 1250 patients there were 643 responses. This is a 53% return rate; which is significantly higher than the 47% national average.

The demographic of patients answering the survey this year is identified below:

Gender	Percentage (%)
Male	47
Female	53

Age	Percentage (%)
Aged 35 and younger	10
Aged 36-50	21
Aged 51-65	35
Aged 66 and older	34

Ethnicity	Percentage (%)
White	96
Mixed	1
Asian or Asian British	0
Black or Black British	0
Chinese or other ethnic group	0
Not known	2

Religion	Percentage (%)
No religion	15
Buddhist	0
Christian	81
Hindu	0
Jewish	0
Muslim	0
Sikh	0
Other religion	1
Prefer not to say	1

Sexual Orientation	Percentage (%)
Heterosexual/straight	96
Gay/lesbian	1
Bisexual	0
Other	0
Prefer not to say	2

The results of the national survey demographics by protected characteristics when examined show no significant differences that would require any further actions than are already in place to address issues identified.

See Appendix 1: National Inpatient Survey 2015

4.4.4 Patient Feedback

Compliment, comments and complaints are encouraged with easy links to the NHS Choices website on the Internet pages. A process is in place to respond and to monitor responses.

The Trust reports and publishes outcomes via Trust Board papers on the Internet, Local Healthwatch meet with the Trust to give feedback and be updated about Trust developments.

Patients are also encouraged to give feedback during events and activities such as listening week and the completion of the Friends and Family Test.

4.4.5 Complaints

The Trust is required to ask questions to monitor and evaluate the services we provide. Equality legislation places greater emphasis on the collection of this information.

The complaints department is aware of the diverse population served by the Trust and is currently collecting data on the number of complaints received from the various 'protected groups' and identify how patients access the service and whether any improvements to the way in which information is distributed to the population served needs be made.

Complaints leaflets explaining the NHS complaints procedure are available in wards and outpatient clinics, information can also be accessed via the Trust website and the public can obtain information by telephoning the Patient Experience Department.

Complaints Breakdown January – December 2016

		Quarter 4 Jan – Mar 2016	Quarter 1 April-June 2016	Quarter 2 Jul-Sept 2016	Quarter 3 Oct – Dec 2016
Age	16 - 17	0	1	1	1
	18-25	1	1	1	2
	26-55	25	23	23	29
	56-64	6	5	5	3
	65-74	2	6	6	7
	75+	1	2	2	0
Sex	Male	22	21	21	20
	Female	13	16	17	22
Ethnic group	White British	30	35	38	40
	White Irish	0	0	0	0
	Indian - Asian	0	0	0	0
	Black/Caribbean	0	0	0	0
	Chinese	0	0	0	0
	Not stated	5	2	0	2
	Other ethnic	0	0	0	0

A Listening Line has also been launched across the wards. The dedicated line is for patients who want to raise any issues that have not been resolved by the ward staff. The Listening Line is supported by a Matron during the day and the unit bleep holder out of hours. Any call received is logged and responded to within an hour.

4.5 Engagement

Updates and engagement with local community groups are on-going. Examples of some of this engagement are identified below:

4.5.1 Listening Week

The Trust is committed to listening to feedback from patients and the public and to support this has developed a programme of 'Listening Weeks'.

Staff across the Trust utilise the week to capture patient and carer feedback, by speaking to individuals, undertaking surveys and having a presence across wards and department to offering people opportunities to access advice and support.

4.5.2 Walton Open Days

The Trust holds open days throughout the year offering patients a chance to chat with staff and find out more about what goes on in our specialist neurosciences trust. There are displays and demonstrations; activities for children and entertainment for all the family.

There is also an opportunity to enjoy taster sessions in our therapies department and talks were given to students about the full range of careers in the NHS.

Information stands are also made available throughout the year in the main foyer to provide information to patients and staff, promoting subjects such as infection control and dignity.

4.5.3 Quality Accounts

The Quality Account is produced yearly to inform on quality initiatives undertaken and to set objectives for the coming year. The account has evolved by the Trust actively engaging with stakeholders and then using the external feedback and opinion combined with internal thoughts and vision.

Meetings have been conducted between the Deputy Director of Nursing and Healthwatch representatives in year, to ensure there are open lines of communication between parties. The Trust actively engaged with governors through a forward planning event on all aspects of quality including choice of indicators for 2016/17.

4.5.4 Annual Public Meeting

The Annual Public Meeting provides an opportunity for the public to meet with the board members. The Trust produces and signs off the annual accounts and provides the public with information on progress against the objectives set for the year. There is also an opportunity for the public to ask questions at the end of the meeting.

This year the Trust held a market place event, showcasing the work of the Walton Centre. Stands were available to provide information and give advice, including one explaining the developments in technology the Trust is utilising and one offering a mini Health MOT.

4.5.5 Fundraising

The Trust fundraising team has been working with local community groups to raise the profile of the Trust and link with members of the local community who want to support the centre.

The Trust arranged a visually impaired cricket match which took place in August 2016, with the Trust playing against The Cheshire Cobras, a visually impaired team. To even things out, all Walton players were given a pair of glasses, each conveying a different visual impairment.

The game was fiercely fought, but the Walton Centre team came out victorious. There is a winner's cup, now held at WCFT, which will be presented at future annual events.

4.5.6 Equality Delivery System 2

The Trust takes part in the national NHS system for measuring and monitoring equality for patients and staff.

During the process to review and update the existing assessments and objectives developed, a consultation was undertaken with stakeholders and service users. The themes identified have been picked up in Trust action plan. The feedback shows that although we have made progress there remains more work to do.

The Trust Equality objectives are:

Objective 1

- Improve data collection and equality profiles recorded for both inpatients and outpatients
- Develop patient systems to enable the accurate recording of data
- Review appropriate patient forms to ensure this information is captured
- Ensure staff understand how to record monitoring data and the importance of completing this
- Establish the Trust's patient demographics to enable meaningful analysis

Objective 2

- Improve data collection and equality profiles for all staff members
- Carry out complete ESR data cleanse for all staff members following the transfer from Capita
- Ensure new staff are fully trained on how to record monitoring data and the importance of completing this

Objective 3

- Ensure all staff members are paid equally for equal work
- Carry out equal pay audits to analyse staff pay by the protected characteristics
- Review the process for SVL completion and audit this for consistency
- Review the process for job matching/evaluation to ensure fair and consistent

Objective 4

- Continue to use Equality Impact Assessments to monitor policies and procedures and introduce this for all service developments and organisational change episodes
- Review Equality Impact Assessment documentation
- Ensure all staff involved in service or organisational redesign are trained in carrying out Equality Impact Assessments

Objective 5

- Increase involvement with the local community and in local support groups for both patients and staff
- Identify and attend local community groups within each Healthwatch area
- Identify and attend other local support groups to reach each of the protected characteristics
- Continue to be a part of local staff support groups and explore the option of further groups e.g. disability

4.5.7 Navajo Award

The Trust has been successful in achieving the Navajo Merseyside & Cheshire LGBT Charter Mark, which is an equality mark sponsored by In-Trust Merseyside & Sefton Embrace and supported by the LGBTI Community networks across Merseyside.

It is a signifier of good practice, commitment and knowledge of the specific needs, issues and barriers facing lesbian, gay, bisexual, and transgender (LGBT) people in Merseyside. Navajo looks at employment practices and also how services are inclusive for LGBTI people.

The application processes assessed us on the following 5 key areas:

- Practices and Policies
- Training
- Staff Recruitment and Engagement
- Monitoring
- Service Users & LGBT Engagement

4.6 Developments to address concerns of service users

4.6.1 Transgender Equality Training

Following requests from staff and the extremely positive feedback an initial session, the Trust has committed to the provision of regular Transgender Equality Training for Staff. The course is an opportunity for discussion and looks at:

- Images, stereotypes and myths (including language and terminology)
- Barriers Transgender people face
- Equalities legislation and what it means practically
- Prejudice
- Medical transition and social transition
- Best practice guidance

This training, alongside the regular Equality and Diversity training enables Trust staff to give the best care to all patients, in an informed and supportive way.

4.6.2 Unconscious Bias Training

The Trust has been running training course on unconscious bias. The course explains what unconscious bias is, raises awareness of subconscious preconceptions, looking at how this affects our decisions and actions, and the adverse impact unconscious bias can have, both on individuals and organisations.

The session has been particularly beneficial for staff members who play a role in recruitment and selection processes, however all staff members were encouraged to attend, to reduce the impact perceptions and staffs behaviours can have on patients care

4.6.3 The Brain Charity

The Trust is working in partnership with the Brian Charity, a specialist neurological charity, to provide advice and support to patients and carers in the centre.

A dedicated booth has been situated in the main hospital entrance to accommodate volunteers to be on hand and easily identifiable and the Trust has supported the identification and provision of link workers, from the charity, to work across the wards and departments.

4.6.4 Learning Disability Support

The Trust continues to work in collaboration with primary care facilitators in learning disability. The facilitators are part of the Trust steering group and meet on a quarterly basis throughout the year.

The steering group discuss issues and plan how improvements to the patients experience can be achieved for patients coming into our care who have learning disabilities. We are able to share developments and practices across primary and acute care organisations in order to standardise best practice and achieve the best outcomes for patients.

4.6.5 Patient Access

One of the Trust work streams in the last few years has been to improve patient access to patient areas. The programme was instigated following feedback from patients, and we have utilised current patients who volunteer to review the Trust.

A patient with a physical disability, but independently mobile and a wheelchair user undertook a 'road test' of the patient access areas in the Sid Watkins building, to ensure that all patient areas within the clinical setting were fit for purpose. Changes have been made as a result of the programme, and it is acknowledged that patient co-operation and feedback was vital for completion of this work.

Appendix 1

Data provided by the Corporate Information Department:

- Inpatient/Daycase Activity 2016
- Inpatient/Daycase Waiting Times 2016
- Inpatient/Daycase (TCI) DNA's 2016
- Outpatient Attendances 2016
- Outpatient Waiting Times 2016
- Outpatient DNA's 2016
- Mortality Rates (In Hospital) 201

Data unable to be provided by the Corporate Information Department: numbers were too low and would make the data patient identifiable:

- Disease Activity
- Cause of Death
- Cancer 62 day wait

Data gathered by the Equality Team:

- Walton Catchment Area (North West and North Wales) demographic data summary

Data gathered by the Patient Experience Team:

- Complaints data summary

Care Quality Commission (2013). National Inpatient Survey Results (2015).
Available at: http://www.nhssurveys.org/Filestore/documents/IP15_RET.pdf

Inpatient / Daycase Spells
January 2016 - December 2016

Gender	Daycase		Elective		Non Elective		Total	
	Total	%	Total	%	Total	%	Total	%
Female	8542	64.6%	1760	51.5%	942	47.0%	11244	60.3%
Male	4683	35.4%	1660	48.5%	1061	53.0%	7404	39.7%
Total	13,225		3,420		2,003		18648	

Band	Daycase		Elective		Non Elective		Total	
	Total	%	Total	%	Total	%	Total	%
Under 18	22	0.2%	7	0.2%	15	0.7%	44	0.2%
18 to 24	599	4.5%	109	3.2%	88	4.4%	796	4.3%
25 to 39	2540	19.2%	521	15.2%	360	18.0%	3421	18.3%
40 to 49	3341	25.3%	671	19.6%	361	18.0%	4373	23.5%
50 to 64	4454	33.7%	1152	33.7%	578	28.9%	6184	33.2%
65 to 74	1574	11.9%	645	18.9%	348	17.4%	2567	13.8%
74+	695	5.3%	315	9.2%	253	12.6%	1263	6.8%
Total	13,225		3,420		2,003		18648	

Ethnicity	Daycase		Elective		Non Elective		Total	
	Total	%	Total	%	Total	%	Total	%
WHITE - BRITISH	12,674	95.8%	3,023	88.4%	1,713	85.5%	17,410	93.4%
NOT STATED	101	0.8%	214	6.3%	183	9.1%	498	2.7%
Not recorded	44	0.3%	88	2.6%	36	1.8%	168	0.9%
WHITE - ANY OTHER BACKGROUND	116	0.9%	26	0.8%	21	1.0%	163	0.9%
OTHER - ANY OTHER	78	0.6%	18	0.5%	14	0.7%	110	0.6%
BLACK - ANY OTHER BACKGROUND	30	0.2%	6	0.2%	7	0.3%	43	0.2%
MIXED - ANY OTHER	18	0.1%	3	0.1%	4	0.2%	25	0.1%
ASIAN - ANY OTHER BACKGROUND	22	0.2%	3	0.1%	2	0.1%	27	0.1%
WHITE - IRISH	53	0.4%	19	11.0%	11	0.5%	83	0.4%
ASIAN - INDIAN	21	0.2%	1	0.0%	0	0.0%	22	0.1%
ASIAN - PAKISTANI	25	0.2%	3	0.1%	2	0.1%	30	0.2%
MIXED - WHITE AND ASIAN	0	0.0%	3	0.1%	1	0.0%	4	0.0%
MIXED - WHITE/BLACK CARIBBEAN	16	0.1%	3	0.1%	0	0.0%	19	0.1%
BLACK - CARIBBEAN	14	0.1%	2	0.1%	2	0.1%	18	0.1%
BLACK - AFRICAN	3	0.0%	3	0.1%	2	0.1%	8	0.0%
OTHER - CHINESE	2	0.0%	3	0.1%	3	0.1%	8	0.0%
MIXED - WHITE/BLACK AFRICAN	7	0.1%	1	0.0%	2	0.1%	10	0.1%
ASIAN - BANGLADESHI	1	0.0%	1	0.0%	0	0.0%	2	0.0%
Total	13,225		3,420		2,003		18648	

Religion	Daycase		Elective		Non Elective		Total	
	Total	%	Total	%	Total	%	Total	%
Church of England	3,634	27.5%	880	25.7%	490	24.5%	5004	26.8%
Roman Catholic	3,017	22.8%	493	14.4%	315	15.7%	3825	20.5%
No Religious Preference	2,622	19.8%	531	15.5%	213	10.6%	3366	18.1%
Not Recorded	2,646	20.0%	811	23.7%	366	18.3%	3823	20.5%
Unknown	355	2.7%	466	13.6%	478	23.9%	1299	7.0%
Christian	306	2.3%	84	2.5%	43	2.1%	433	2.3%
Methodist	140	1.1%	39	1.1%	19	0.9%	198	1.1%
Orthor Christian	178	1.3%	33	1.0%	10	0.5%	221	1.2%
Muslim	56	0.4%	7	0.2%	7	0.3%	70	0.4%
Atheist	56	0.4%	17	0.5%	23	1.1%	96	0.5%
Church of Wales	28	0.2%	17	0.5%	15	0.7%	60	0.3%
Jehovah's Witness	10	0.1%	8	0.2%	2	0.1%	20	0.1%
Jewish	29	0.2%	3	0.1%	1	0.0%	33	0.2%
Church of Scotland	27	0.2%	5	0.1%	1	0.0%	33	0.2%
Anglican	28	0.2%	5	0.1%	2	0.1%	35	0.2%
Baptist	26	0.2%	8	0.2%	6	0.3%	40	0.2%
Hindu	28	0.2%	0	0.0%	2	0.1%	30	0.2%
Buddhist	9	0.1%	4	0.1%	3	0.1%	16	0.1%
Mormon	8	0.1%	1	0.0%	0	0.0%	9	0.0%
Other Non Christian	6	0.0%	3	0.1%	1	0.0%	10	0.1%
Presbyterian	0	0.0%	0	0.0%	4	0.2%	4	0.0%
Spiritualist	3	0.0%	0	0.0%	0	0.0%	3	0.0%
Congregational	4	0.0%	1	0.0%	0	0.0%	5	0.0%
Seikh	6	0.0%	0	0.0%	0	0.0%	6	0.0%
Greek Orthodox	1	0.0%	3	0.1%	0	0.0%	4	0.0%
Salvation Army	2	0.0%	0	0.0%	0	0.0%	2	0.0%
Quaker	0	0.0%	0	0.0%	2	0.1%	2	0.0%
Patient Refuse to Give	0	0.0%	1	0.0%	0	0.0%	1	0.0%
Total	13,225		3,420		2,003		18648	

Inpatient/Daycase (TCI) DNAs											
January 2016 - December 2016											
By Gender						By Age					
Gender	Total	%				Band	Total	%			
Female	109	65.7%				Under 18	0	0.00%			
Male	57	34.3%				18 to 24	1	0.60%			
Total	166					25 to 39	16	9.64%			
						40 to 49	94	56.63%			
						50 to 64	45	27.11%			
						65 to 74	3	1.81%			
						74+	7	4.22%			
						Total	166				
By Ethnic Group						By Religion					
Ethnicity	Total	%				Religion	Total	%			
WHITE - BRITISH	132	79.5%				Not Recorded	45	27.1%			
Not Recorded	24	14.5%				NO RELIGIOUS PREFERENCE	37	22.3%			
NOT STATED	6	3.6%				ROMAN CATHOLIC	32	19.3%			
BLACK/BLACK BRITISH - ANY OTHER BACKGROUND	1	0.6%				CHURCH OF ENGLAND	32	19.3%			
WHITE - ANY OTHER BACKGROUND	1	0.6%				UNKNOWN	8	4.8%			
ASIAN/ASIAN BRITISH - ANY OTHER BACKGROUND	1	0.6%				Christian	6	3.6%			
BLACK/BLACK BRITISH - AFRICAN	1	0.6%				ATHEIST	2	1.2%			
Total	166					OTHER NON CHRISTIAN	1	0.6%			
						MUSLIM	1	0.6%			
						MORMON	1	0.6%			
						OTHER CHRISTIAN	1	0.6%			
						Total	166				

**Inpatient/Daycase Waiting Times (Patients waiting for elective admission)
as at 3rd January 2017**

By Gender

Gender	Number Waiting		Avg Weeks
	Total	%	Wait
Female	601	56.2%	7.0
Male	469	43.8%	7.3
Total	1,070		

By Age

Band	Number Waiting		Avg Weeks
	Total	%	Wait
Under 18	4	0.37%	6.8
18 to 24	36	3.37%	6.0
25 to 39	164	15.36%	7.3
40 to 49	209	19.57%	7.1
50 to 64	381	35.67%	7.0
65 to 74	188	17.60%	7.5
74+	86	8.05%	7.1
Total	1,068		

By Ethnic Group

Ethnicity	Number Waiting		Avg Weeks
	Total	%	Wait
WHITE - BRITISH	827	77.4%	7.2
Not stated	180	16.9%	6.9
NOT STATED	24	2.2%	6.0
WHITE - ANY OTHER BACKGROUND	12	1.1%	6.4
WHITE - IRISH	5	0.5%	8.8
ASIAN/ASIAN BRITISH - INDIAN	4	0.4%	9.4
OTHER - ANY OTHER	3	0.3%	8.0
BLACK/BLACK BRITISH - ANY OTHER BACKGROUND	2	0.2%	0.8
OTHER - CHINESE	2	0.2%	13.1
MIXED - WHITE/BLACK CARIBBEAN	2	0.2%	5.9
ASIAN/ASIAN BRITISH - ANY OTHER BACKGROUND	2	0.2%	5.7
BLACK/BLACK BRITISH - AFRICAN	2	0.2%	5.7
MIXED - WHITE AND ASIAN	1	0.1%	3.3
MIXED - WHITE/BLACK AFRICAN	1	0.1%	2
ASIAN/ASIAN BRITISH - BANGLADESHI	1	0.1%	2
Total	1068		

By Religion

Religion	Number Waiting		Avg Weeks
	Total	%	Wait
Not Recorded	356	33.3%	7.3
CHURCH OF ENGLAND	252	23.6%	7.4
ROMAN CATHOLIC	169	15.8%	6.7
NO RELIGIOUS PREFERENCE	158	14.8%	6.5
UNKNOWN	48	4.5%	7.8
Christian	25	2.3%	5.3
METHODIST	17	1.6%	8.8
OTHER CHRISTIAN	8	0.7%	2.3
ATHEIST	8	0.7%	13.0
MUSLIM	6	0.6%	4.4
JEWISH	4	0.4%	8.5
CHURCH OF WALES	3	0.3%	10.3
BAPTIST	2	0.2%	3.5
BUDDHIST	2	0.2%	11.6
CHURCH OF SCOTLAND	2	0.2%	8.0
MORMON	2	0.2%	20.5
GREEK ORTHODOX	1	0.1%	8.1
ANGLICAN	1	0.1%	8
SPIRITUALIST	1	0.1%	13
OTHER NON CHRISTIAN	1	0.1%	2
QUAKER	1	0.1%	2
HINDU	1	0.1%	2
Total	1068		

**Outpatient Attendances
January 2016 - December 2016**

By Gender

Gender	New		Follow Up	
	Total	%	Total	%
Female	22430	58.0%	42309	56.9%
Male	16217	42.0%	32042	43.1%
Total	38,647		74,351	

By Ethnic Group

Ethnicity	New		Follow Up	
	Total	%	Total	%
WHITE - BRITISH	24566	63.6%	60088	80.8%
Not recorded	12490	32.3%	11158	15.0%
NOT STATED	569	1.5%	1328	1.8%
WHITE - ANY OTHER BACKGROUND	313	0.8%	493	0.7%
OTHER - ANY OTHER	143	0.4%	261	0.4%
WHITE - IRISH	137	0.4%	202	0.3%
ASIAN - INDIAN	66	0.2%	125	0.2%
MIXED - ANY OTHER	48	0.1%	101	0.1%
BLACK - AFRICAN	52	0.1%	76	0.1%
ASIAN - ANY OTHER BACKGROUND	40	0.1%	75	0.1%
OTHER - CHINESE	27	0.1%	75	0.1%
MIXED - WHITE AND ASIAN	41	0.1%	72	0.1%
MIXED - WHITE/BLACK CARIBBEAN	41	0.1%	70	0.1%
ASIAN - PAKISTANI	21	0.1%	64	0.1%
BLACK - CARIBBEAN	31	0.1%	61	0.1%
MIXED - WHITE/BLACK AFRICAN	35	0.1%	49	0.1%
BLACK - ANY OTHER BACKGROUND	13	0.0%	37	0.0%
ASIAN - BANGLADESHI	14	0.0%	16	0.0%
Total	38,647		74,351	

By Age

Band	New		Follow Up	
	Total	%	Total	%
Under 18	547	1.42%	409	0.55%
18 to 24	2110	5.46%	3589	4.83%
25 to 39	7233	18.72%	13078	17.59%
40 to 49	6979	18.06%	13696	18.42%
50 to 64	11585	29.98%	23246	31.27%
65 to 74	5956	15.41%	12494	16.80%
74+	4237	10.96%	7839	10.54%
Total	38,647		74,351	

By Religion

Religion	New		Follow Up	
	Total	%	Total	%
Not recorded	21471	55.6%	21048	28.3%
CHURCH OF ENGLAND	6257	16.2%	20223	27.2%
ROMAN CATHOLIC	4225	10.9%	13112	17.6%
NO RELIGIOUS PREFERENCE	3517	9.1%	10726	14.4%
UNKNOWN	1400	3.6%	4450	6.0%
CHRISTIAN	603	1.6%	1108	1.5%
OTHER CHRISTIAN	210	0.5%	869	1.2%
METHODIST	271	0.7%	858	1.2%
CHURCH OF WALES	65	0.2%	298	0.4%
MUSLIM	103	0.3%	310	0.4%
ATHEIST	113	0.3%	268	0.4%
JEHOVAH'S WITNESS	85	0.2%	173	0.2%
BAPTIST	49	0.1%	168	0.2%
ANGLICAN	44	0.1%	117	0.2%
JEWISH	36	0.1%	100	0.1%
CHURCH OF SCOTLAND	29	0.1%	92	0.1%
HINDU	30	0.1%	47	0.1%
BUDDHIST	32	0.1%	63	0.1%
OTHER NON CHRISTIAN	30	0.1%	57	0.1%
PRESBYTERIAN	13	0.0%	58	0.1%
CONGREGATIONAL	2	0.0%	37	0.0%
GREEK ORTHODOX	16	0.0%	43	0.1%
MORMON	11	0.0%	31	0.0%
SPIRITUALIST	11	0.0%	20	0.0%
SEIKH	7	0.0%	28	0.0%
SALVATION ARMY	7	0.0%	19	0.0%
QUAKER	6	0.0%	14	0.0%
PATIENT REFUSED TO GIVE INFO	2	0.0%	7	0.0%
WESLEYAN	1	0.0%	4	0.0%
WHITE WITCHCRAFT	1	0.0%	2	0.0%
RASTAFARIAN	0	0.0%	1	0.0%
Total	38,647		74,351	

**Outpatient Waiting Times (Patients waiting for 1st Outpatient Appointment)
as at 3rd January 2017**

By Gender

Gender	Number Waiting		Avg Weeks
	Total	%	Wait
Female	4,385	59.5%	7.1
Male	2,980	40.5%	6.9
Total	7,365		

By Age

Band	Number Waiting		Avg Weeks
	Total	%	Wait
Under 18	75	1.02%	7.6
18 to 24	344	4.67%	7.0
25 to 39	1,503	20.41%	7.0
40 to 49	1,367	18.56%	6.9
50 to 64	2,253	30.59%	7.0
65 to 74	1,072	14.56%	7.4
74+	751	10.20%	6.7
Total	7,365		

By Ethnic Group

Ethnicity	Number Waiting		Avg Weeks
	Total	%	Wait
Not recorded	3,627	49.2%	7.0
WHITE - BRITISH	3,533	48.0%	7.0
NOT STATED	75	1.0%	6.2
WHITE - ANY OTHER BACKGROUND	41	0.6%	7.9
WHITE - IRISH	20	0.3%	5.7
OTHER - ANY OTHER	20	0.3%	6.1
BLACK/BLACK BRITISH - AFRICAN	8	0.1%	6.8
ASIAN/ASIAN BRITISH - INDIAN	6	0.1%	7.9
MIXED - ANY OTHER	5	0.1%	6.6
ASIAN/ASIAN BRITISH - PAKISTANI	5	0.1%	9.7
MIXED - WHITE/BLACK AFRICAN	4	0.1%	5.6
MIXED - WHITE AND ASIAN	4	0.1%	10.1
MIXED - WHITE/BLACK CARIBBEAN	4	0.1%	5.2
ASIAN/ASIAN BRITISH - ANY OTHER BACKGROUND	3	0.0%	5.0
OTHER - CHINESE	3	0.0%	8.0
BLACK/BLACK BRITISH - ANY OTHER BACKGROUND	3	0.0%	8.4
ASIAN/ASIAN BRITISH - BANGLADESHI	2	0.0%	8
BLACK/BLACK BRITISH - CARIBBEAN	2	0.0%	6
Total	7,365		

By Religion

Religion	Number Waiting		Avg Weeks
	Total	%	Wait
Not Recorded	4,883	66.3%	7.1
CHURCH OF ENGLAND	922	12.5%	6.7
ROMAN CATHOLIC	604	8.2%	6.6
NO RELIGIOUS PREFERENCE	501	6.8%	7.0
UNKNOWN	204	2.8%	7.2
Christian	63	0.9%	8.4
METHODIST	55	0.7%	7.7
OTHER CHRISTIAN	40	0.5%	7.4
MUSLIM	24	0.3%	8.5
CHURCH OF WALES	12	0.2%	13.3
ATHEIST	10	0.1%	8.4
BAPTIST	8	0.1%	9.3
BUDDHIST	7	0.1%	9.1
JEWISH	6	0.1%	3.2
JEHOVAH'S WITNESS	6	0.1%	6.2
OTHER NON CHRISTIAN	5	0.1%	4.8
CHURCH OF SCOTLAND	3	0.0%	8.0
ANGLICAN	3	0.0%	5.5
SPIRITUALIST	3	0.0%	3.3
PRESBYTERIAN	3	0.0%	4.7
SALVATION ARMY	1	0.0%	5.4
HINDU	1	0.0%	4.9
QUAKER	1	0.0%	21.9
Total	7,365		

Outpatient DNAs
January 2016 - December 2016

By Gender				
Gender	New		Follow Up	
	Total	%	Total	%
Female	1928	54.1%	3663	54.8%
Male	1635	45.9%	3025	45.2%
Total	3,563		6,688	

By Age				
Band	New		Follow Up	
	Total	%	Total	%
Under 18	57	1.60%	37	0.55%
18 to 24	312	8.76%	524	7.83%
25 to 39	1082	30.37%	1701	25.43%
40 to 49	708	19.87%	1419	21.22%
50 to 64	854	23.97%	1832	27.39%
65 to 74	270	7.58%	658	9.84%
74+	280	7.86%	517	7.73%
Total	3,563		6,688	

By Ethnic Group				
Ethnicity	New		Follow Up	
	Total	%	Total	%
WHITE - BRITISH	1580	44.3%	5030	75.2%
Not recorded	1852	52.0%	1313	19.6%
NOT STATED	58	1.6%	148	2.2%
WHITE - ANY OTHER BACKGROUND	18	0.5%	42	0.6%
OTHER - ANY OTHER	13	0.4%	47	0.7%
WHITE - IRISH	6	0.2%	17	0.3%
ASIAN - INDIAN	3	0.1%	16	0.2%
MIXED - ANY OTHER	6	0.2%	13	0.2%
ASIAN - ANY OTHER BACKGROUND	5	0.1%	7	0.1%
BLACK - AFRICAN	6	0.2%	13	0.2%
MIXED - WHITE/BLACK AFRICAN	3	0.1%	8	0.1%
BLACK - ANY OTHER BACKGROUND	2	0.1%	5	0.1%
MIXED - WHITE/BLACK CARIBBEAN	4	0.1%	4	0.1%
ASIAN - PAKISTANI	4	0.1%	9	0.1%
MIXED - WHITE AND ASIAN	1	0.0%	5	0.1%
OTHER - CHINESE	1	0.0%	3	0.0%
BLACK - CARIBBEAN	0	0.0%	6	0.1%
ASIAN - BANGLADESHI	1	0.0%	2	0.0%
Total	3,563		6,688	

By Religion				
Religion	New		Follow Up	
	Total	%	Total	%
Not recorded	2450	68.8%	2178	32.6%
CHURCH OF ENGLAND	343	9.6%	1493	22.3%
ROMAN CATHOLIC	325	9.1%	1219	18.2%
NO RELIGIOUS PREFERENCE	276	7.7%	1070	16.0%
UNKNOWN	102	2.9%	399	6.0%
OTHER CHRISTIAN	12	0.3%	73	1.1%
CHRISTIAN	7	0.2%	73	1.1%
METHODIST	5	0.1%	42	0.6%
MUSLIM	19	0.5%	31	0.5%
ATHEIST	4	0.1%	28	0.4%
JEHOVAH'S WITNESS	1	0.0%	13	0.2%
CHURCH OF WALES	1	0.0%	6	0.1%
BAPTIST	1	0.0%	10	0.1%
JEWISH	1	0.0%	9	0.1%
ANGLICAN	4	0.1%	7	0.1%
CHURCH OF SCOTLAND	2	0.1%	3	0.0%
HINDU	1	0.0%	6	0.1%
BUDDHIST	3	0.1%	6	0.1%
MORMON	1	0.0%	6	0.1%
OTHER NON CHRISTIAN	0	0.0%	5	0.1%
PRESBYTERIAN	1	0.0%	0	0.0%
SEIKH	1	0.0%	3	0.0%
SPIRITUALIST	1	0.0%	3	0.0%
CONGREGATIONAL	0	0.0%	0	0.0%
GREEK ORTHODOX	1	0.0%	4	0.1%
SALVATION ARMY	1	0.0%	0	0.0%
PATIENT REFUSED TO GIVE INFO	0	0.0%	1	0.0%
WHITE WITCHCRAFT	0	0.0%	0	0.0%
Total	3,563		6,688	

Mortality Rates (In Hospital)
January 2016 - December 2016

By Gender

Gender	Elective		Non Elective	
	Number	Rate	Number	Rate
Female	6	0.3%	34	3.6%
Male	6	0.4%	44	4.1%

By Age

Band	Elective		Non Elective	
	Number	Rate	Number	Rate
Under 18	0	0.0%	1	6.7%
18 to 24	0	0.0%	2	2.3%
25 to 39	2	0.4%	6	1.7%
40 to 49	2	0.3%	11	3.0%
50 to 64	1	0.1%	27	4.7%
65 to 74	6	0.9%	16	4.6%
74+	1	0.3%	15	5.9%

By Ethnic Group

Ethnicity	Elective		Non Elective	
	Number	Rate	Number	Rate
WHITE - BRITISH	11	0.4%	75	4.4%
NOT STATED	0		2	1.1%
WHITE - ANY OTHER BACKGROUND	0		1	4.8%
BLACK - ANY OTHER BACKGROUND	0		1	14.3%
ASIAN - ANY OTHER BACKGROUND	0		0	0.0%
Not Recorded	0		0	0.0%

By Religion

Religion	Elective		Non Elective	
	Number	Rate	Number	Rate
Unknown	1	0.2%	27	5.6%
Church of England	1	0.1%	25	5.1%
Not Recorded	0	0.0%	8	2.2%
Roman Catholic	4	0.8%	8	2.5%
No Religious Preference	3	0.6%	7	3.3%
Christian	2	2.4%	2	4.7%
Church of Wales	1	5.9%	1	6.7%
Other Christian	0	0.0%	1	10.0%

2011 Census: Ethnic group, North West England and North Wales

	All categories: Ethnic group	White: English/Welsh/Scottish/Northern	White: Irish	White: Gypsy or Irish Traveller	White: Other White	Mixed/multiple ethnic group: White and Black Caribbean	Mixed/multiple ethnic group: White and Black African	Mixed/multiple ethnic group: White and Asian	Mixed/multiple ethnic group: Other Mixed	Indian	Asian/Asian British: Pakistani	Asian/Asian British: Bangladeshi	Asian/Asian British: Chinese	Asian/Asian British: Other Asian	Black/African/Caribbean/Black British:	Other Black	Black/African/Caribbean/Black British:	Arab	Other ethnic group: Any other ethnic group	Other ethnic group: Any other ethnic group
Blackburn with Darwen UA	147,489	98,144	794	161	2,910	315	162	989	357	19,791	17,801	1,525	721	1,656	614	202	117	585	645	645
Blackpool UA	142,065	133,042	1,029	237	3,031	690	264	448	351	627	223	231	514	687	183	111	52	170	175	175
Cheshire East UA	370,127	346,264	2,241	313	9,122	1,341	461	1,293	778	2,147	856	504	1,125	1,428	664	511	227	338	514	514
Cheshire West and Chester UA	329,608	312,013	2,337	213	6,462	889	411	1,059	691	1,242	336	576	935	1,008	586	196	126	199	329	329
Halton UA	125,746	121,210	654	41	1,136	465	253	330	308	282	44	60	308	249	95	134	31	54	92	92
Warrington UA	202,228	187,968	1,357	66	4,601	654	357	663	470	1,803	1,179	152	849	928	389	214	91	237	250	250
Greater Manchester (Met County)	2,682,528	2,141,687	34,499	1,523	70,414	23,131	9,997	15,657	11,925	53,461	130,012	34,186	26,079	28,435	44,691	17,767	11,639	15,026	12,399	12,399
Lancashire	1,171,339	1,050,340	7,125	821	22,401	4,573	1,279	4,571	2,301	19,212	36,103	5,811	4,811	5,117	1,891	1,789	418	1,387	1,389	1,389
Merseyside (Met County)	1,381,189	1,268,277	13,342	457	23,227	6,395	4,894	4,638	5,027	7,896	2,566	2,366	11,554	6,023	9,792	2,066	2,694	6,379	3,596	3,596
Isle of Anglesey	69,751	67,349	476	65	630	180	41	180	79	135	33	53	153	117	50	25	6	134	45	45
Gwynedd	121,874	115,072	570	153	1,778	287	126	332	219	461	220	176	905	408	195	70	24	700	178	178
Conwy	115,228	109,911	840	65	1,733	294	124	275	201	317	101	134	376	324	114	54	31	200	134	134
Denbighshire	93,734	89,581	533	34	1,106	251	80	269	151	240	157	111	346	576	104	35	22	39	99	99
Flintshire	152,506	146,185	693	95	3,188	267	121	258	205	296	87	223	323	272	88	42	12	50	101	101
Wrexham	134,844	125,477	492	104	4,574	264	180	326	240	857	181	206	426	651	526	57	42	96	145	145
Number	7,240,256	6,312,520	66,982	4,348	156,313	39,996	18,750	31,288	23,303	108,767	189,899	46,314	49,425	47,879	59,982	23,273	15,532	25,594	20,091	20,091
Percentage		87.2%	0.9%	0.1%	2.2%	0.6%	0.3%	0.4%	0.3%	1.5%	2.6%	0.6%	0.7%	0.7%	0.8%	0.3%	0.2%	0.4%	0.3%	0.3%

2011 Census: Age group, North West England and North Wales

	All Age Ranges	Age 16 to 17	Age 18 to 24	Age 25 to 29	Age 30 to 44	Age 45 to 59	Age 60 to 64	Age 65 to 74	Age 74+
Blackburn with Darwen UA		4,278	13,369	10,951	30,862	26,717	7,884	10,356	8,705
Blackpool UA		3,487	12,030	8,580	26,854	29,094	9,415	14,353	12,886
Cheshire East UA		9,249	27,013	19,020	72,047	79,230	26,443	37,951	33,421
Cheshire West and Chester UA		7,904	27,807	18,796	64,058	69,122	22,686	32,782	28,318
Halton UA		3,339	11,154	8,141	25,004	26,192	8,508	10,370	8,111
Warrington UA		5,259	16,745	12,503	42,327	41,988	12,441	18,198	14,016
Greater Manchester (Met County)		67,601	278,658	200,933	560,081	500,860	150,623	211,280	178,469
Lancashire		29,186	111,946	68,819	221,875	235,357	78,580	113,367	97,826
Merseyside (Met County)		34,812	145,281	92,550	260,119	280,184	85,042	123,675	114,182
Isle of Anglesey		1,680	5,261	3,603	12,050	14,189	5,461	8,574	7,072
Gwynedd		2,784	13,939	6,472	20,714	23,341	8,533	13,130	12,010
Conwy		2,849	8,188	5,404	19,079	23,576	8,844	13,966	14,196
Denbighshire		2,543	7,482	4,525	16,269	19,113	7,159	10,585	9,105
Flintshire		4,073	12,469	8,547	29,576	31,332	11,029	15,299	11,537
Wrexham		3,219	11,627	8,825	26,996	26,650	8,858	12,516	10,335
Total	5,915,462	182,263	702,969	477,669	1,427,911	1,426,945	451,506	646,402	560,189
Percentage		3.1%	11.9%	8.1%	24.1%	24.1%	7.6%	10.9%	9.5%

2011 Census: Sex group, North West England and North Wales

	All categories	Males	Females
Blackburn with Darwen UA	147,489	73,547	73,942
Blackpool UA	142,065	69,775	72,290
Cheshire East UA	370,127	181,409	188,718
Cheshire West and Chester UA	329,608	160,586	169,022
Halton UA	125,746	61,368	64,378
Warrington UA	202,228	100,300	101,928
Greater Manchester (Met County)	2,682,528	1,325,455	1,357,073
Lancashire	1,171,339	575,146	596,193
Merseyside (Met County)	1,381,189	671,034	710,155
Isle of Anglesey	69,751	34,274	35,477
Gwynedd	121,874	59,906	61,968
Conwy	115,228	55,749	59,479
Denbighshire	93,734	45,987	47,747
Flintshire	152,506	75,247	77,259
Wrexham	134,844	67,052	67,792
Total	7,240,256	3,556,835	3,683,421
Percentage		49.1%	50.9%

2011 Census: Disability group, North West England and North Wales

	All categories:	Day-to-day activities limited ¹ a lot	Day-to-day activities limited ¹ a little	Long-term health problem or disability	Day-to-day activities not limited
Blackburn with Darwen UA	147,489	15,563	14,278	29,841	117,648
Blackpool UA	142,065	19,247	17,084	36,331	105,734
Cheshire East UA	370,127	29,206	35,625	64,831	305,296
Cheshire West and Chester UA	329,608	29,098	31,897	60,995	268,613
Halton UA	125,746	14,556	12,309	26,865	98,881
Warrington UA	202,228	16,940	18,057	34,997	167,231
Greater Manchester (Met County)	2,682,528	263,539	257,775	521,314	2,161,214
Lancashire	1,171,339	115,343	119,669	235,012	936,327
Merseyside (Met County)	1,381,189	172,030	142,868	314,898	1,066,291
Isle of Anglesey	69,751	7,970	8,142	16,112	53,639
Gwynedd	121,874	11,824	13,184	25,008	96,866
Conwy	115,228	13,896	14,019	27,915	87,313
Denbighshire	93,734	11,350	10,645	21,995	71,739
Flintshire	152,506	14,474	15,189	29,663	122,843
Wrexham	134,844	14,139	13,766	27,905	106,939
Total	7,240,256	749,175	724,507	1,473,682	5,766,574
Percentage		10.3%	10.0%	20.4%	79.6%

2011 Census: Religious group, North West England and North Wales

	All categories: Religion	Christian	Buddhist	Hindu	Jewish	Muslim	Sikh	Other religion	No religion	Religion not stated
Blackburn with Darwen UA	147,489	77,599	306	574	54	39,817	161	295	20,374	8,309
Blackpool UA	142,065	95,426	450	337	252	1,061	61	571	34,815	9,092
Cheshire East UA	370,127	254,940	882	1,328	581	2,438	279	1,065	83,973	24,641
Cheshire West and Chester UA	329,608	231,126	776	653	250	1,686	195	854	72,649	21,419
Halton UA	125,746	94,314	216	194	44	267	55	303	23,543	6,810
Warrington UA	202,228	144,405	457	1,118	147	2,097	361	513	41,293	11,837
Greater Manchester (Met County)	2,682,528	1,657,594	9,555	23,478	25,013	232,787	5,322	7,429	557,129	164,221
Lancashire	1,171,339	805,510	2,792	5,632	859	55,722	1,404	3,682	224,446	71,292
Merseyside (Met County)	1,381,189	1,022,711	3,908	4,386	3,014	19,247	955	3,090	238,198	85,680
Isle of Anglesey	69,751	45,400	165	45	40	250	43	257	17,797	5,754
Gwynedd	121,874	72,503	426	238	55	1,378	39	637	36,163	10,435
Conwy	115,228	74,506	347	206	62	583	17	478	30,017	9,012
Denbighshire	93,734	60,129	266	167	32	469	8	345	25,132	7,186
Flintshire	152,506	101,298	344	158	70	482	29	362	38,726	11,037
Wrexham	134,844	85,576	351	504	58	860	87	310	36,927	10,171
Total	7,240,256	4,823,037	21,241	39,018	30,531	359,144	9,016	20,191	1,481,182	456,896
Percentage		66.6%	0.3%	0.5%	0.4%	5.0%	0.1%	0.3%	20.5%	6.3%