



**Integrated  
Care System**  
Shropshire, Telford and Wrekin



**Shropshire, Telford  
and Wrekin**

# **Shropshire, Telford and Wrekin (STW) End of Year 2024/25 Summary Analysis of Health Inequalities Improvement**

## **NHS Shropshire, Telford & Wrekin Business Intelligence and Analytics**

**June 2025**

# Summary

The following slides provide a summary overview of the latest [NHS England Statement of Information](#) metric data, focusing on the latest figures for Shropshire, Telford & Wrekin, benchmarked against the England national average and where possible, a comparison at Place (Shropshire and Telford & Wrekin individually).

The data utilised for this review is based on national data sources aligned to the statement metrics, however, it is noted that the available data is commonly older and does not contain the granularity required.

As part of the national program of work, access and use of alternative data sources applying the national criteria are being developed. This approach is likely to provide more up to date data sources to support local trend improvement, and the granularity needed to provide a view of inequalities.

Where possible we have included references to local data sources to provide improved insights and show variance by demographic (age, ethnicity and deprivation quintile).

Shropshire, Telford & Wrekin continue to work collaboratively with National, Regional and Commissioning Support Unit (CSU) Health Inequalities and Analytical Teams to develop our local understanding of health inequalities and local Population Health Management Dashboard.



# Data statement

During implementation of a new electronic patient record (EPR) in 24/25, the lead provider of acute hospital services experienced an issue with the trust's data warehouse. As a result data from May 2024 has been unavailable and submitted data contained a number of data quality issues. While some of the data has been made available at local and national levels, data quality concerns persist and may not be fully rectified until after the publication of this statement. Any metrics effected by this issue with be marked by;

(\*DQ)



# NHS England Statement of Information

## Health Inequities Metrics

Domain	Indicator
Cancer	Percentage of cancers diagnosed at stage 1 and 2, case mix adjusted for cancer site, age at diagnosis, sex
Cardiovascular disease	Stroke rate of non-elective admissions) per 100,000 age-sex standardised)
	Myocardial infraction - rate of non-elective admissions (per 1000,000 age-sex standardised)
	Percentage of patients aged 18 and over, with GP recorded hypertension, in whom the last blood pressure reading (measured in the preceding 12 months) is below the age-appropriate treatment threshold.
	Percentage of patients aged 18 and over with no GP recorded CVD a GP recorded QRISK score of 20% or more, on lipid lowering therapy
	Percentage of patients aged 18 and over with GP recovered atrial fibrillation and a record of a CHA2DS2-VASc score of 2 or more, who are currently treated with anticoagulation drug therapy
Diabetes	Variation between % of people with Type 1 and Type 2 diabetes receiving all 8 care processes
	Variation between % of referrals from the most deprived quintile and % of Type 2 diabetes population from the most deprived quintile.
Elective recovery	Size and shape of waiting list; for those waiting longer than 18 weeks
	Size and shape of waiting list; for those waiting longer than 52 weeks
	Size and shape of waiting list; for those waiting longer than 65 weeks
	Age standardised activity rates with 95% confidence intervals for elective and emergency admissions and outpatient, virtual outpatient and emergency attendances
	Elective activity vs pre-pandemic levels for under 18s and over 18s
Learning disability and autistic people	Learning disability annual health checks
	Adult mental health inpatient rates for people with a learning disability and autistic people
Mental health	Overall number of severe mental illness (SMI) physical health checks
	Rates of total mental health act detentions
	Rates of restrictive interventions
	NHS Talking Therapies (formerly IAPT) recovery
	Childrens and young people's mental health access
Oral health	Tooth extractions due to decay for children admitted as inpatients to hospital, aged 10 years and under (number of admissions not number of teeth extracted)
Respiratory	Uptake of COVID and flu by socio-demographic group
Urgent and emergency care	Emergency admissions for under 18s
Smoking Cessation	Proportion of adult acute inpatient settings offering smoking cessation services
	Proportion of maternity inpatient settings offering smoking cessation services

# Additional Local Metrics or Analysis

Domain	Indicator
Cancer	Staging data for stage 1 and 2 <b>by deprivation and ethnicity</b>
Cardiovascular disease	Percentage of patients aged 18 and over, with GP recorded hypertension, in whom the last blood pressure reading (measured in the preceding 12 months) is below the age-appropriate treatment threshold <b>by age, ethnicity and deprivation</b>
	Percentage of patients aged 18 and over with no GP recorded CVD a GP recorded QRISK score of 20% or more, on lipid lowering therapy <b>by age, ethnicity and deprivation</b>
Smoking	Smoking prevalence in adults (age 18+)
	Smoking Attributable Hospital Admissions (2019/20)
	% of hospital births where Smoking is reported at time of delivery
Elective Recovery	Waiting list profiles for 52 week waits by <b>age, ethnicity and deprivation</b>



# Key Headlines

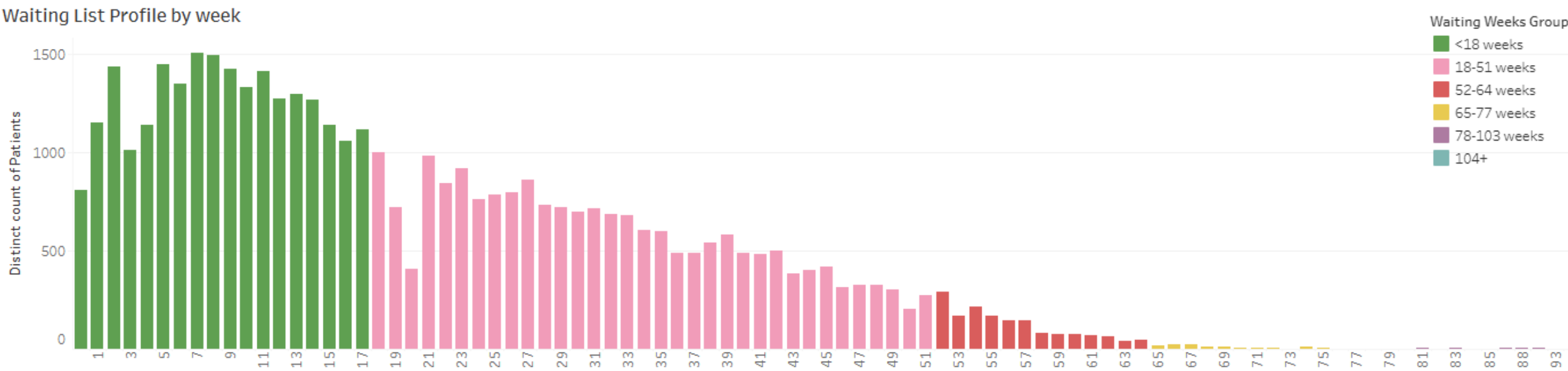
- Both the ICB and the Telford and Wrekin authority have statistically higher stroke and heart attack admission ratios than the England average.
- The ICB is below target for all three CVDPREVENT metrics, however do report improvement.
- Persons with Type 2/other diabetes are more likely to have received all 8 care processes than those with Type 1.
- Adult elective activity and day case attendances for persons aged under 18 have yet to **exceed** their pre-pandemic levels.
- The ICB did not achieve “eliminating” waits of 65 weeks or more, however significant reduction in long waits is reported.
- The ICB is performing **at** the national average for learning disability health checks for persons aged 14-17 and 18+.
- The ICB has a higher adult mental health inpatient admission rate than the national average.
- The ICB is performing below the national average for delivering “all 6” physical health checks to persons with severe mental illness (SMI).
- The Telford and Wrekin authority has a higher preterm births (under 37 weeks) rate than the England average.
- Both local authorities have a higher rate of admissions for tooth extractions in children aged 10 or under, than the England average.
- COVID and Influenza uptake rates are lowest among the most deprived neighbourhoods of the ICB and persons from non-white ethnicity found to have lower uptake levels than the white ethnic population.



# Size and Shape of Waiting Lists

It was a national target to have “*eliminated*” all waits longer than 65 weeks by March 2024.

Whilst substantial progress has been made to reduce waiting list sizes, the latest available data (as of 30<sup>th</sup> April 2025) indicates that this goal continues to be unmet with several patients waiting beyond 78 weeks.



[Data Source: National Waiting List Dashboard accessed via the Midlands and Lancashire Commissioning Support UNIT \(CSU\) Aristotle platform.](#)

# Waiting List Profiling – Patients Waiting Over 52 Weeks

On further review and analysis of waiting list data, there are clear trends showing that people waiting 52 weeks or more on a waiting list are more likely to be aged 40 – 49, from a lower IMD decile (and therefore an area of higher deprivation) or from a black, mixed or Asian ethnic background.

We have continued to see this trend in inequality for people living in the lower IMD decile and people from minoritised ethnic backgrounds, suggesting that more must be done to understand reasons for this trend and identify appropriate action to support reductions in waits for these population groups.

Index of Multiple Deprivation Decile				Ethnicity					Age Band (please click in the charts to filter)				
	Count of Patients	% of Total	% 52 weeks and over		Count of Patients	% of Total	% 52 weeks and over	% 78 weeks and over		Count of Patients	% of Total	% 52 weeks and over	% 78 weeks and over
Null	16,084	18.8%	8.3%	Asian or Asian British	1,035	1.21%	4.7%	0.0%	Null	15,326	17.9%		
1 - Most deprived	4,426	5.2%	3.4%	Black or Black British	421	0.49%	5.3%	0.3%	0-17	4,675	5.5%	3.0%	0.0%
2	4,345	5.1%	3.4%	Mixed	691	0.81%	5.0%	0.0%	18-29	4,335	5.1%	4.0%	0.0%
3	4,359	5.1%	3.6%	Not known	12,449	14.54%	2.8%	0.0%	30-39	6,356	7.4%	4.1%	0.0%
4	10,736	12.5%	4.0%	Not stated	12,161	14.21%	2.9%	0.0%	40-49	7,651	8.9%	4.5%	0.0%
5	9,545	11.2%	4.2%	Other ethnic groups	322	0.38%	3.9%	0.0%	50-59	11,576	13.5%	3.6%	0.0%
6	9,286	10.8%	3.8%	White	58,513	68.36%	4.2%	0.0%	60-69	13,897	16.2%	4.2%	0.0%
7	9,521	11.1%	4.1%						70-79	13,235	15.5%	4.1%	0.1%
8	7,394	8.6%	3.8%						80+	8,541	10.0%	3.1%	0.0%
9	5,418	6.3%	3.5%										
10 - Least deprived	4,478	5.2%	3.9%										

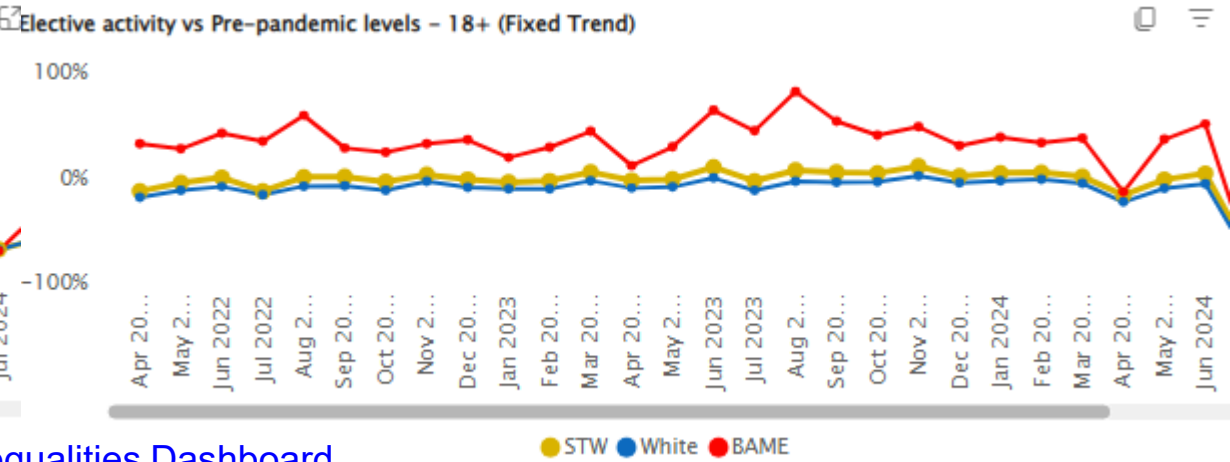
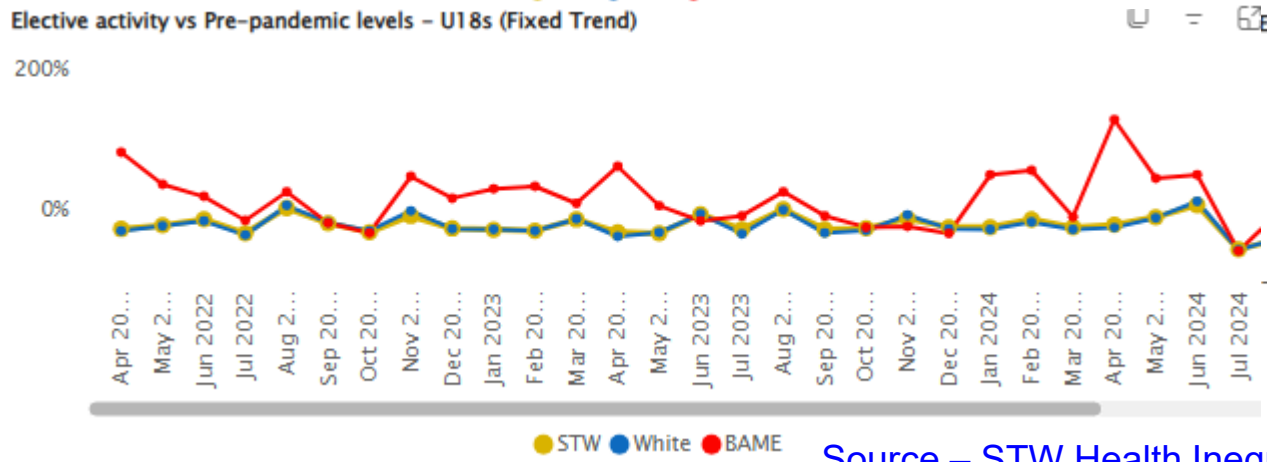
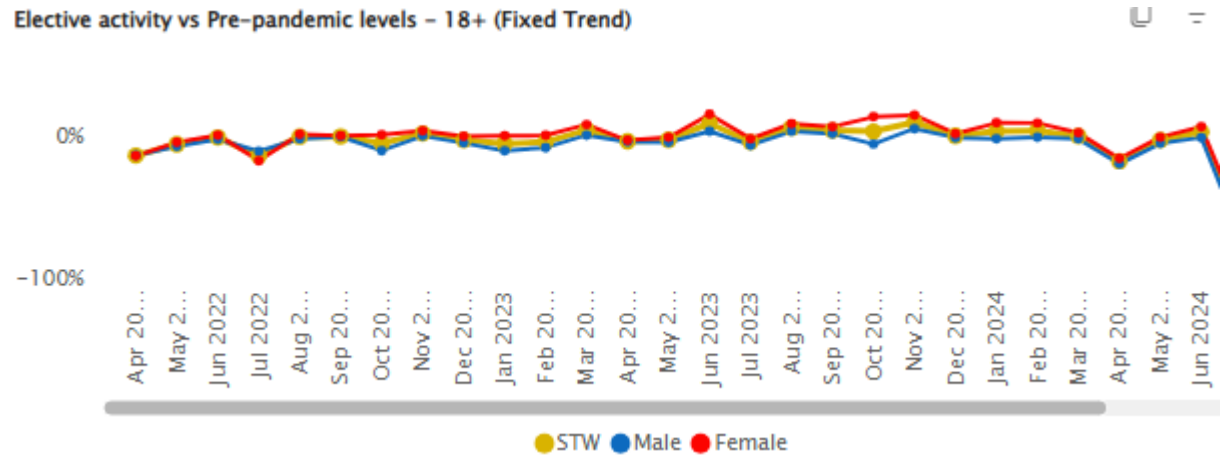
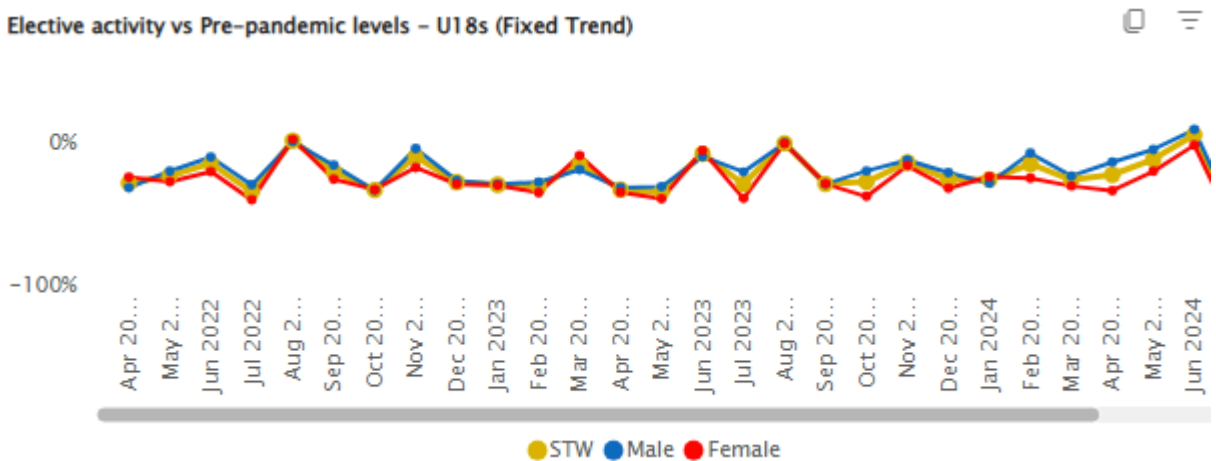


Data Source: National Waiting List Dashboard accessed via the Midlands and Lancashire Commissioning Support UNIT (CSU) Aristotle platform.



# Elective Activity – Return to Pre-pandemic Levels (\*DQ)

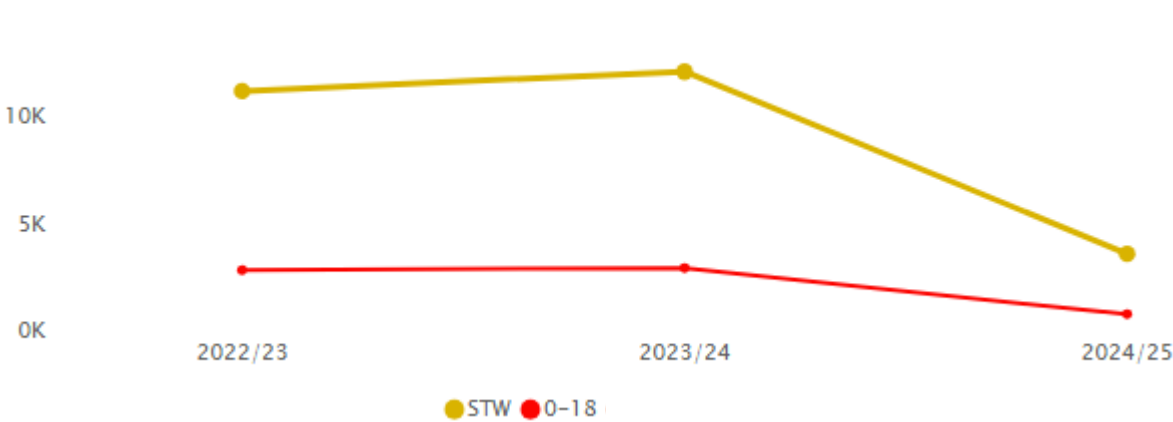
The below charts show that adult (18+) elective activity and aged under-18 elective activity are now broadly in line with their pre-pandemic levels. Due to issues with STW’s main acute provider’s data warehouse this information is unavailable beyond June 2024. The charts below show activity levels as a % of pre-covid activity.



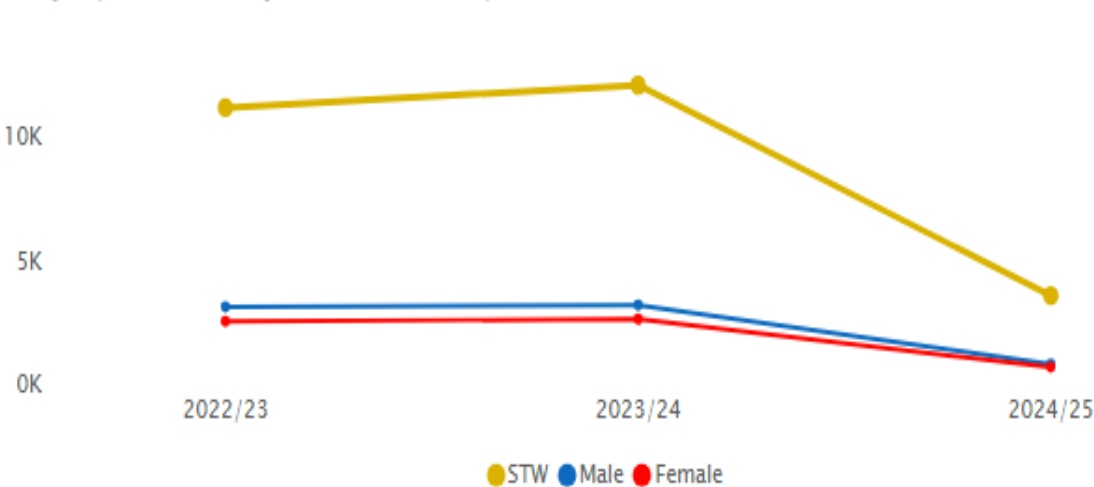
# Emergency admissions for Under 18s (\*DQ)

An analysis of local, system-level data for the period (2024/25) has found higher admissions rates in males (compared to females) and persons living in the most deprived areas (compared to persons living in the least deprived areas). The rate of admission has fallen compared to previous years.

Emergency Admissions – Age Standardised Activity (Fixed Trend)



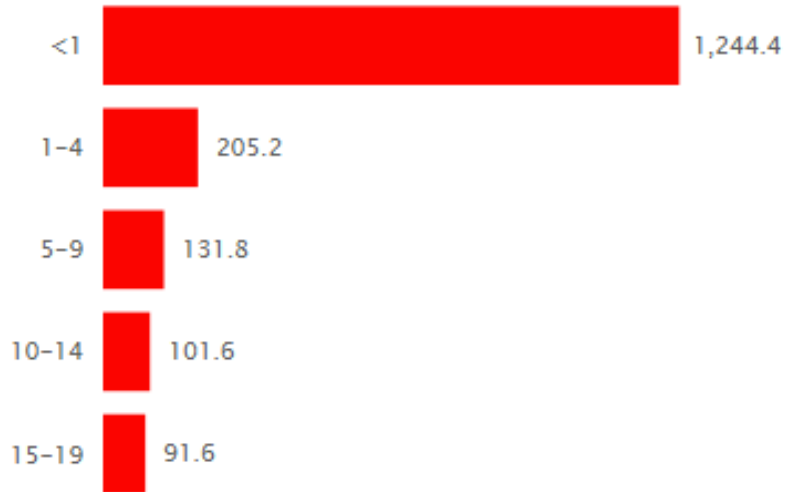
Emergency Admissions – Age Standardised Activity (Fixed Trend)



Emergency Admissions – Age



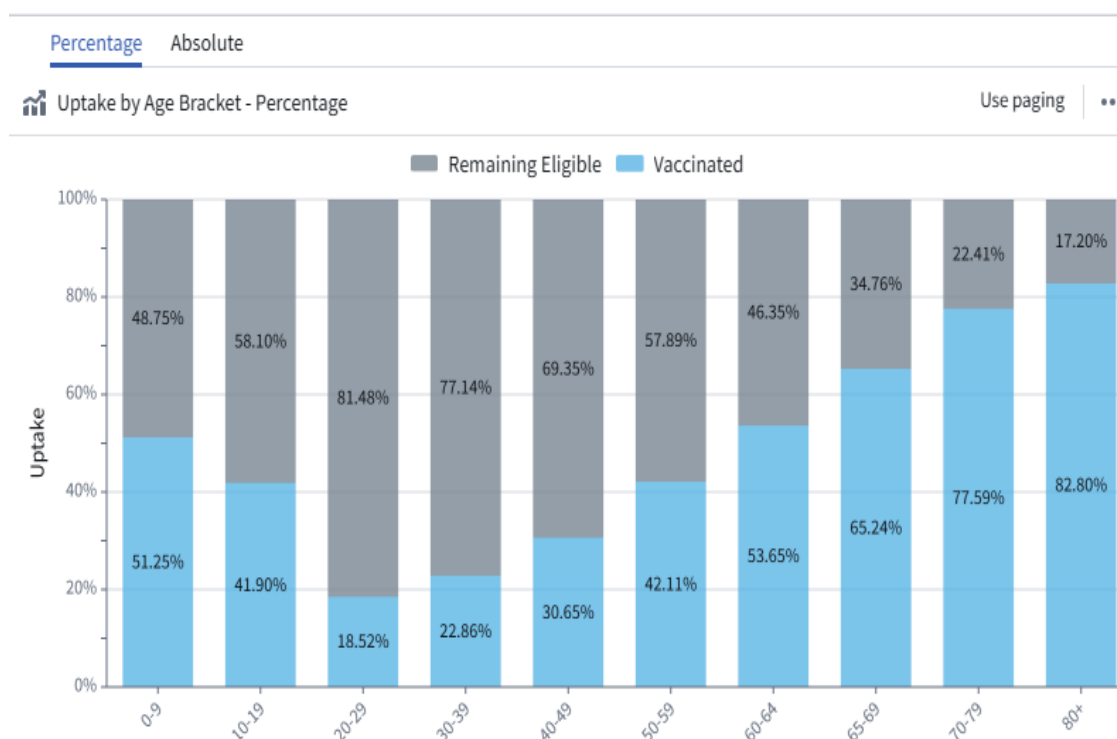
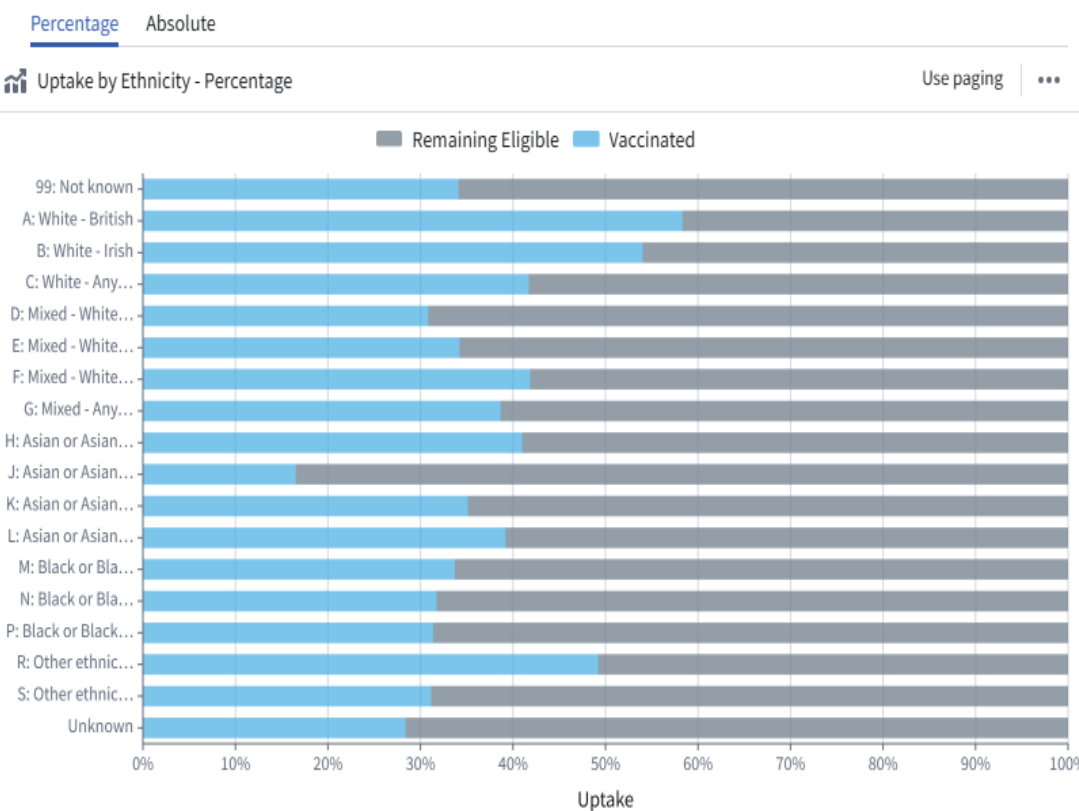
Emergency Admissions – Age Standardised Activity (Date Selection)



[Source – STW Health Inequalities Dashboard](#)

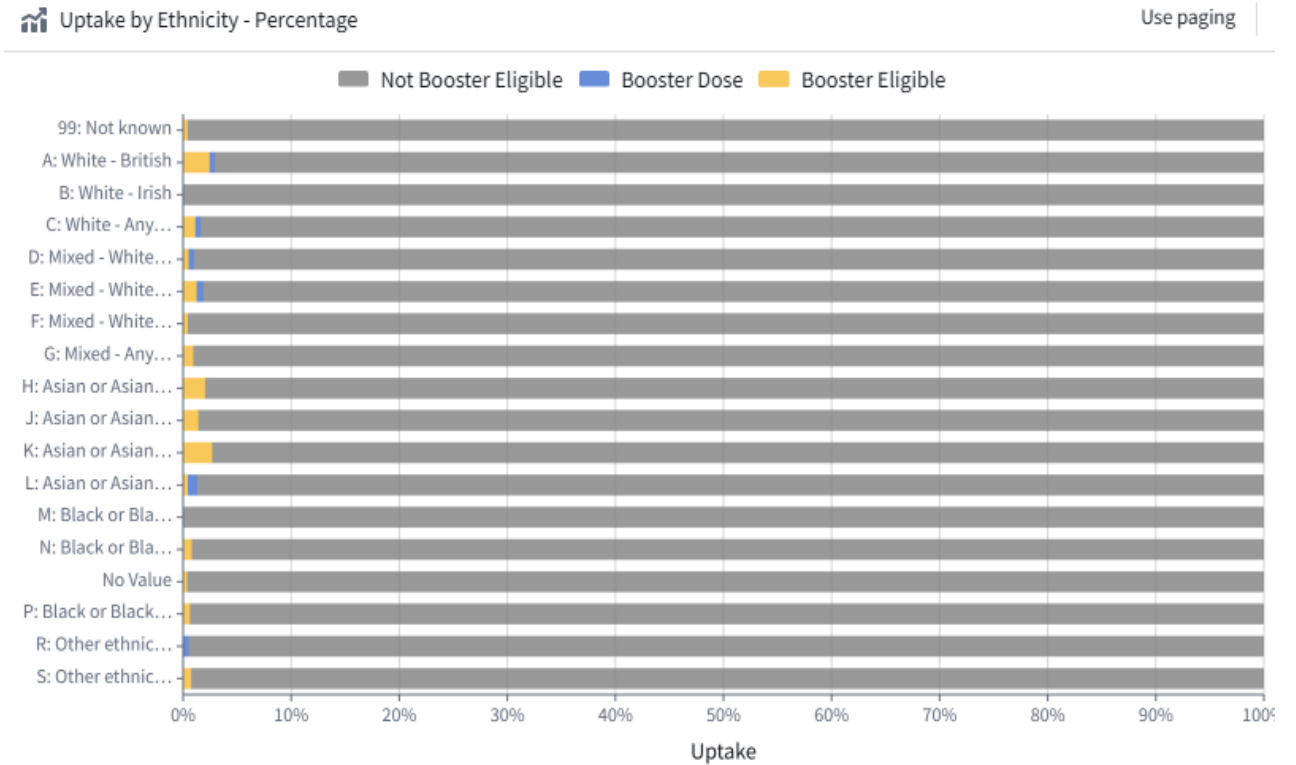
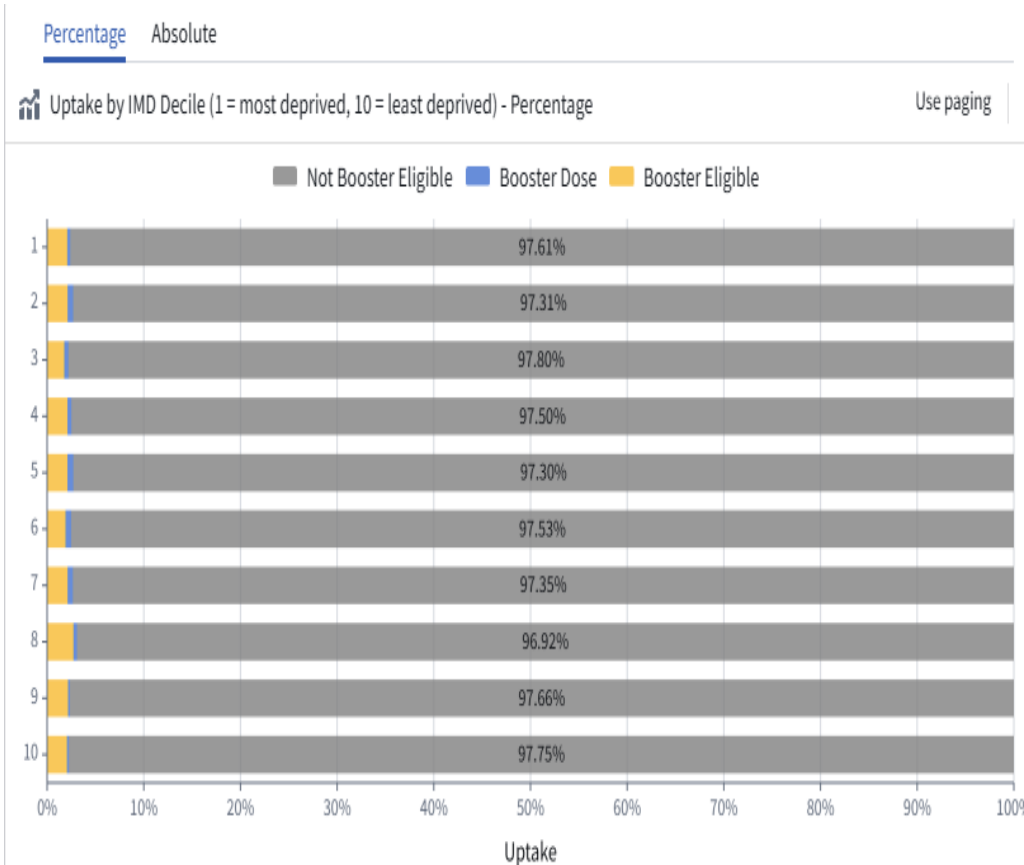
# Uptake of Influenza (Flu) Vaccination by Socio-demographic Group

Persons with a white ethnicity have a much higher uptake rate at 57% than minority ethnic groups. Analysis by age –group corresponds with the vaccination programme targeting persons with certain long-term conditions, pregnant women, young children and older adults.



# Uptake of COVID Vaccination by Socio-demographic Group

When broken down by socio-demographic characteristic uptake is not found to be lowest among the most deprived neighbourhoods (quintile 1) and that persons with a white ethnicity have a much higher uptake rate than minority ethnic groups.



# Overall number of Severe Mental Illness (SMI) Physical Health Checks

60% of people with a Severe Mental Illness (SMI) had received all 6 of their annual physical health checks.

Whilst this achieves national targets, it remains lower than national average and is a decrease on last year's figures by 7% (67% as at March 2024).

BMI – 87% down to 75%

Alcohol use 86% down to 72%

Blood glucose 85% down to 69%

BP recorded 88% down to 80%

Smoking status 88% down to 77%

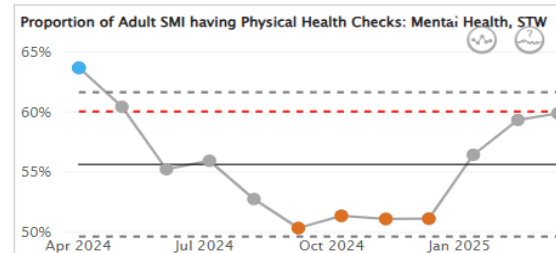
Blood lipids 77% down to 74%.

## STW MH and LDA Performance SPC Chart Compare Metrics

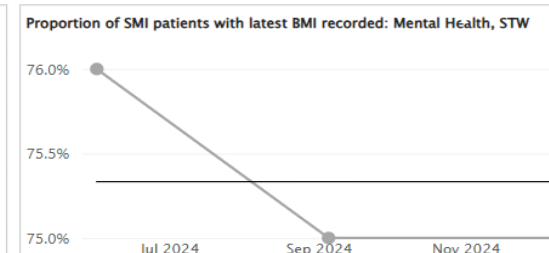
[Home](#)

Refreshed: 01 May 2025

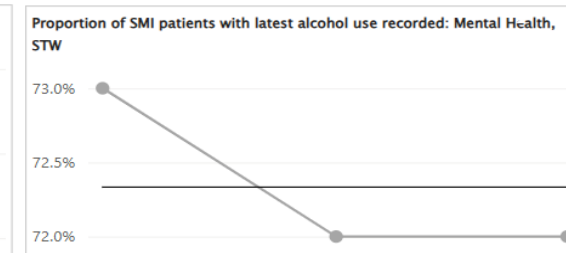
Latest Data: March 2025

Shropshire, Telford  
and Wrekin[What is an SPC Chart?](#)[Icon Descriptions](#)[Reset Filters](#)

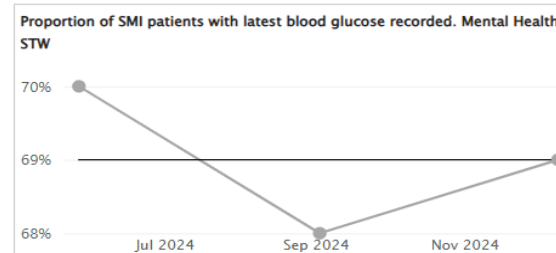
Metric Name	Metric Type
Proportion of Adult SMI having Physical Health ...	STW



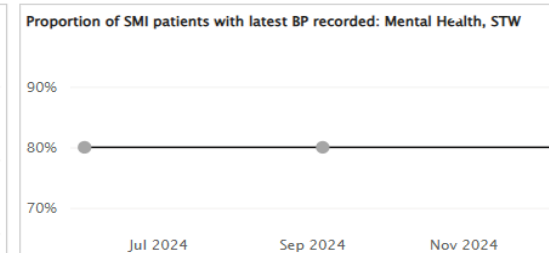
Metric Name	Metric Type
Proportion of SMI patients with latest BMI reco...	STW



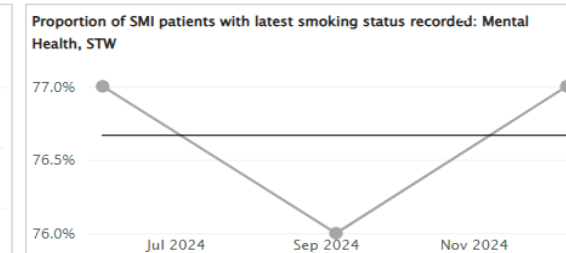
Metric Name	Metric Type
Proportion of SMI patients with latest alcohol u...	STW



Metric Name	Metric Type
Proportion of SMI patients with latest blood gl...	STW



Metric Name	Metric Type
Proportion of SMI patients with latest BP recor...	STW



Metric Name	Metric Type
Proportion of SMI patients with latest smoking...	STW

Source – STW LDA and MH Dashboard

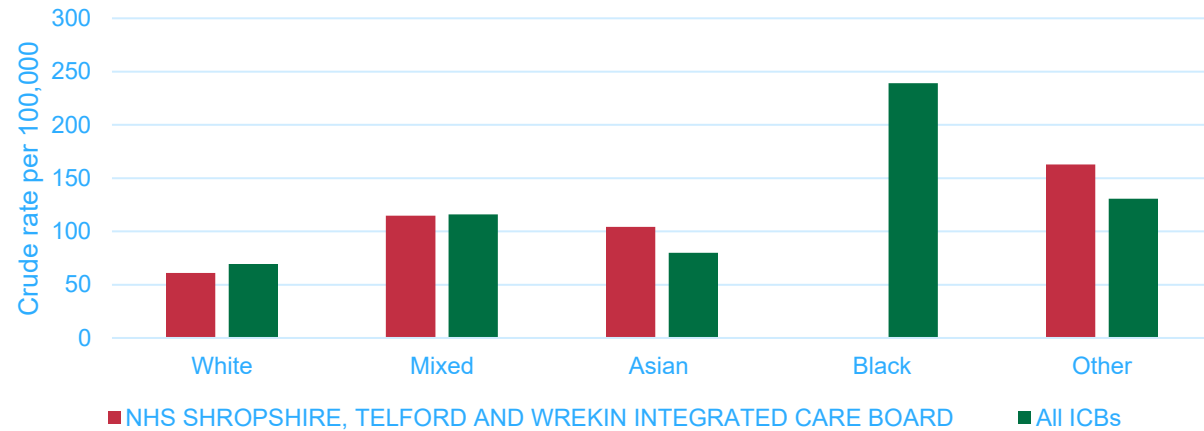


# Rates of Total Mental Health Act Detentions

Social-demographic analysis indicates that the highest rates of detention occur in persons with 'other' ethnicity have a higher detention rate than those from an Asian, Black or White ethnicity. It should be noted that data was unavailable from national source for detention rates of persons with Black ethnicity within STW ICB

There is a clear, continued correlation between people living in the most deprived areas and higher rates (per 1,000 population) of Mental Health Act detentions.

Detentions under the Mental Health Act 1983, by Integrated Care Board (ICB) area by ethnicity, 2023-24



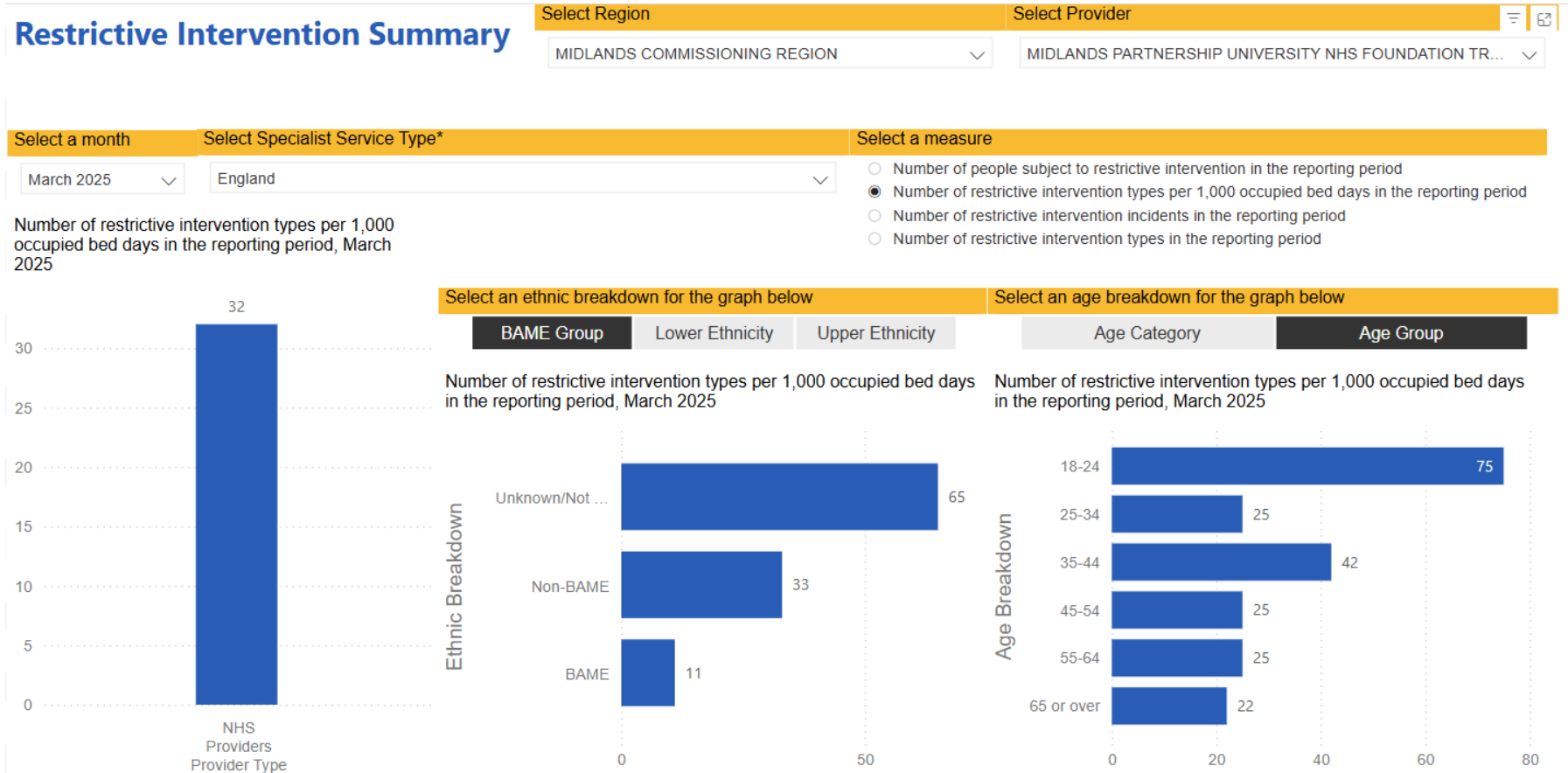
Detentions under the Mental Health Act 1983, by Integrated Care Board (ICB) area by deprivation decile, 2023-24



# Number of Restrictive Intervention Types per 1,000 Occupied Bed Days

As at March 2025, data shows that Shropshire, Telford and Wrekin ICB had a crude rate of 32 per 1,000 population restrictive intervention bed day.

This is an increase from the previous year which was 29 per 1,000 population.



[Please refer to the 'Notes and Caveats' tab for information relating to the charts and figures.](#)

Unknown/Not Stated Ethnic category include data where the ethnicity has been recorded as either 'Not Stated' or 'Not Known' by the provider. 'Unknown' is where the ethnicity is missing or the recorded ethnicity is invalid.

When 'England' is selected on any filter with no other selections, the figures shown will be for all Regions, all Provider and all Specialist Service Types.

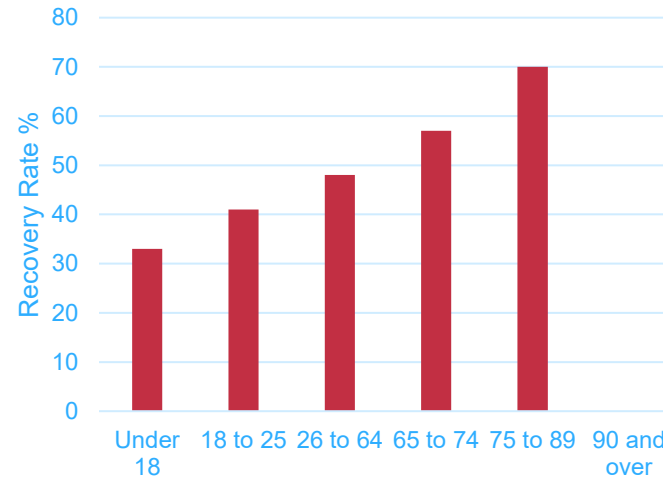
\*From April 2022 data, for cases that do not have an associated MHS502WardStay data submitted will be presented as "No associated Ward Stay" and those where "SpecialisedMHSserviceCode" data item is not recorded in MHS502WardStay table are presented as "Non-Specialised Service" in the Specialised Service Type filter.



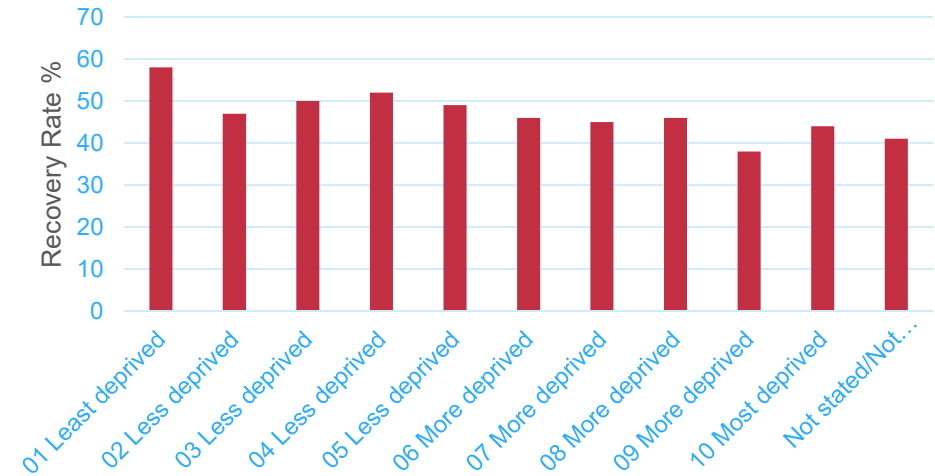
# NHS Talking Therapies (formerly IAPT) Recovery

NHS Talking Therapies was developed to improve and increase access to evidence-based, psychological therapies for depression and anxiety disorders within the NHS.

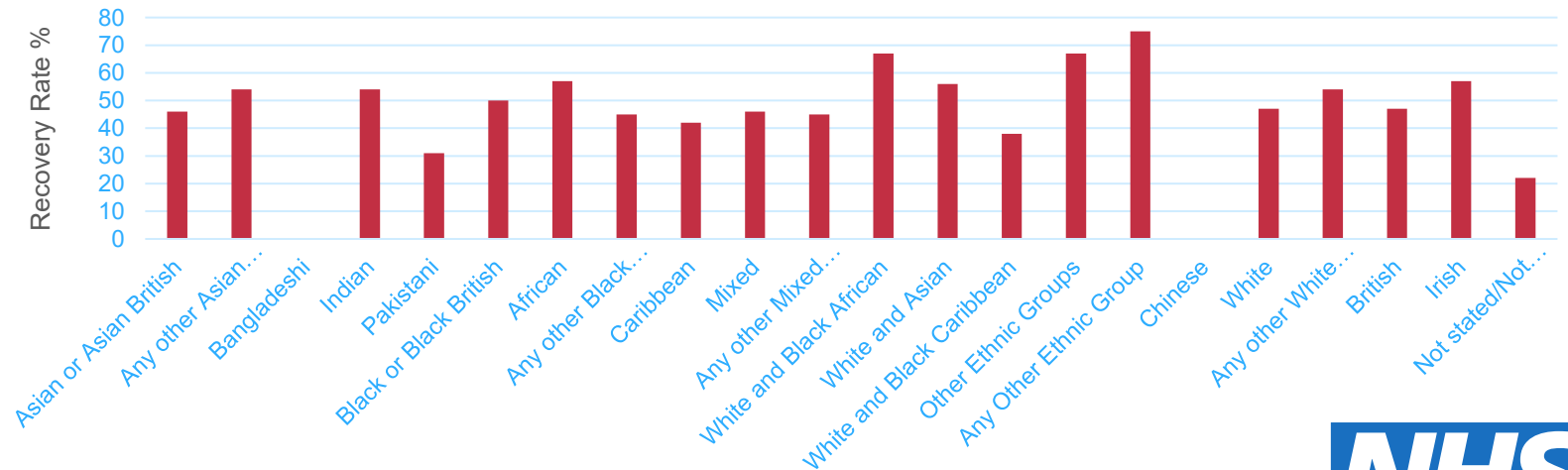
## Age Group



## Indices of Deprivation Decile



## Ethnic Group



# Childrens and Young People's Access to Mental Health Services

The latest nationally available data for access to Children and Young People's Mental Health Services is for 2023/24. This data shows a trend of increasing access year on year. This is a positive improvement in general access to mental health services for children and young people.

Data is not currently available by deprivation or ethnicity and therefore no assessment on inequality in access between children and young people from deprived or minority ethnic backgrounds can be made.



[Source : NHS England : Mental Health Bulletin, 2023/24 Annual Report](#)

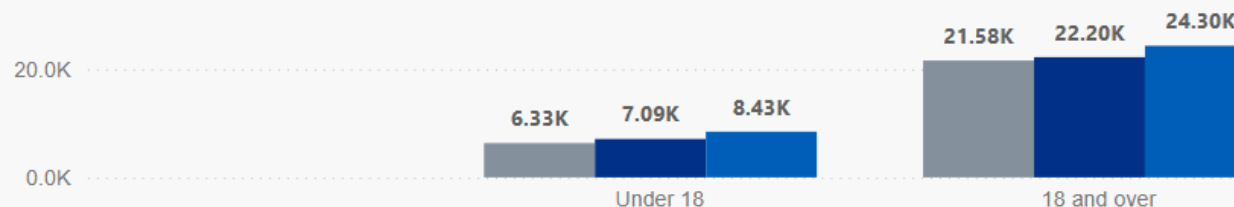
Metric

1a Number of people in contact with NHS funded secondary mental health, learning disabilities and autism services

This chapter covers people who have been in contact with NHS funded secondary mental health, learning disabilities and autism services within the year. To be in contact with services, a person must have had a referral that was open at any point in the year, they do not necessarily have to have had a contact as part of their treatment. This data is also split by the number of people admitted and not admitted to hospital

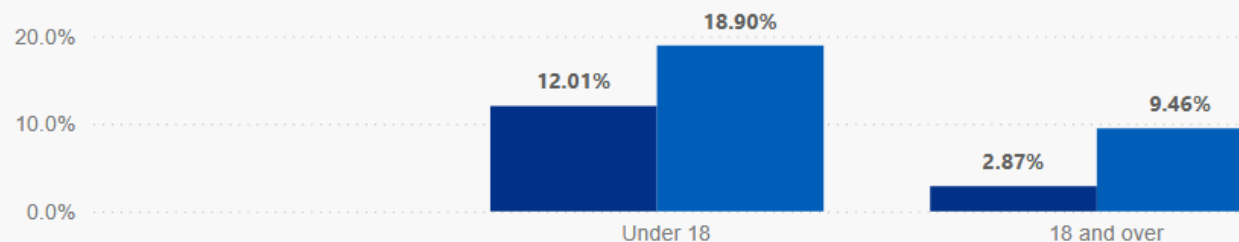
## Counts by Year and Age Group (Higher Level) for NHS SHROPSHIRE, TELFORD AND WREKIN INTEGRATED CARE BOARD

REPORTYEAR ● 2021-22 ● 2022-23 ● 2023-24



## Rates of Change by Year and Age Group (Higher Level) for NHS SHROPSHIRE, TELFORD AND WREKIN INTEGRATED CARE BOARD

REPORTYEAR ● 2022-23 ● 2023-24



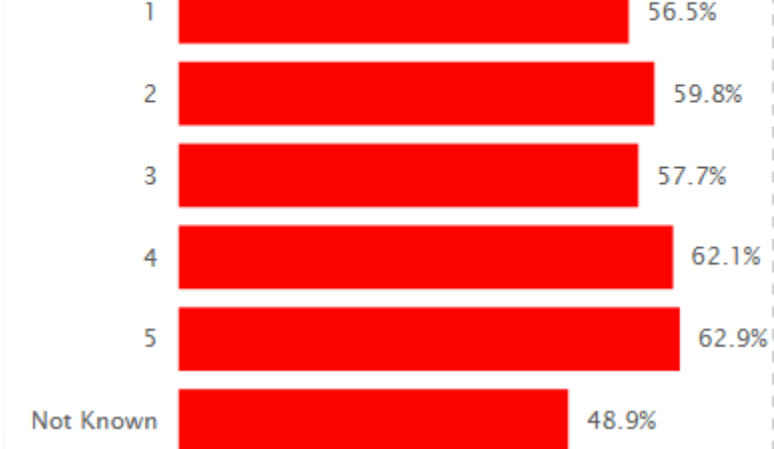
# Percentage of cancers diagnosed at state 1 and 2 (case-mix adjusted) (\*DQ)

Please note these data are unvalidated therefore no conclusions can be reached.

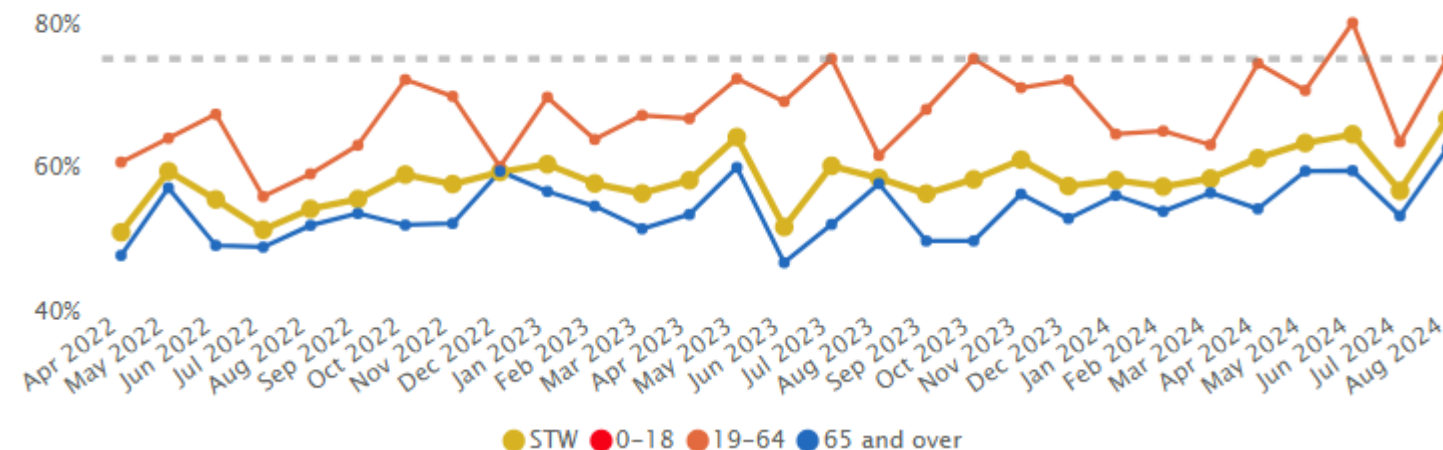
% Cancers Diagnosed Stage 1 and 2 \*\*Experimental Dataset\*\* (Date Selection)



% Cancers Diagnosed Stage 1 and 2 \*\*Experimental Dataset\*\* (Date Selection)



% Cancers Diagnosed Stage 1 and 2 \*\*Experimental Dataset\*\* (Fixed Trend)

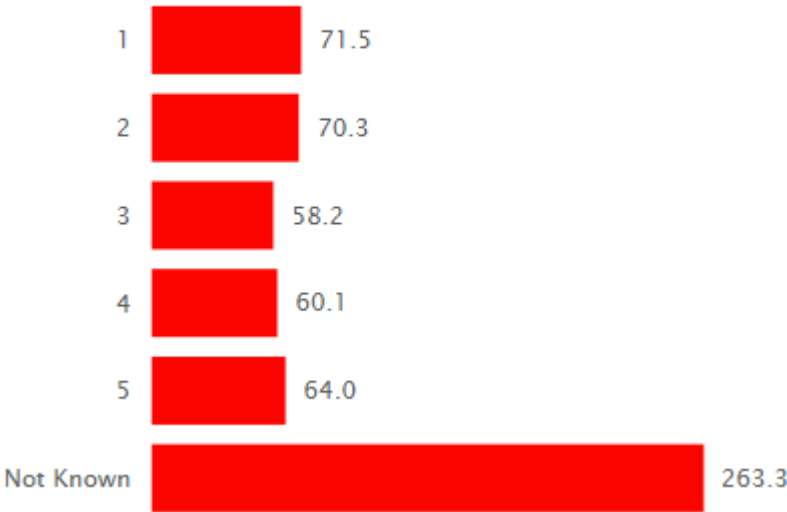


Source – STW Health Inequalities Dashboard

# Non-elective Admissions Rate for Stroke (\*DQ)

Local analysis found that over the past 3 years, the trend in admission rates for stroke has fallen. Non-white, over 65's and most deprived persons experience the highest rates of admissions

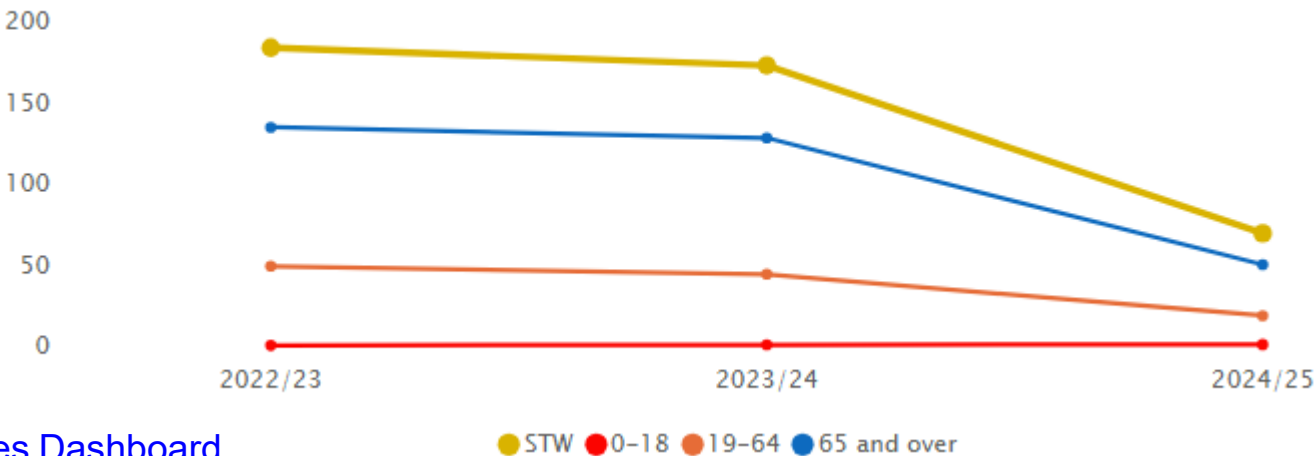
Emergency hospital admissions – Stroke (Feb 2025)



Emergency hospital admissions – Stroke (Feb 2025)



Emergency hospital admissions – Stroke (Fixed Trend)

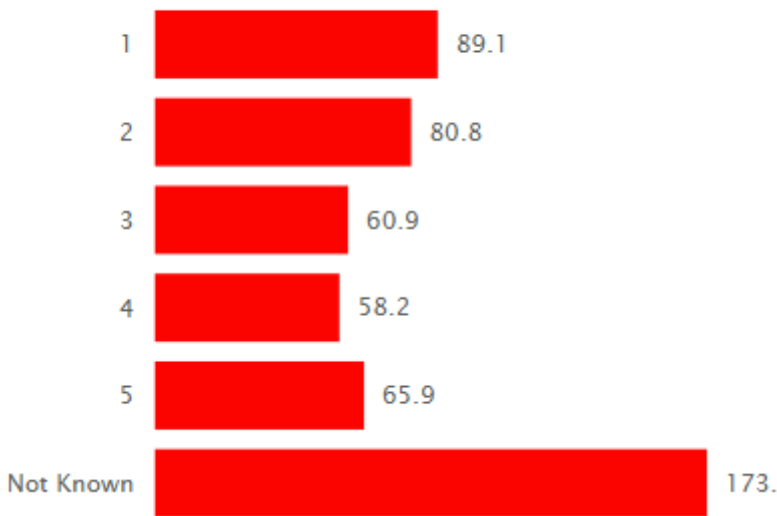


Source – STW Health Inequalities Dashboard

# Non-elective Admissions Ratio for Myocardial Infarction (\*DQ)

Local analysis found that over the past 3 years, the trend in admission rates for MI has fallen. White, over 65's and most deprived persons experience the highest rates of admissions.

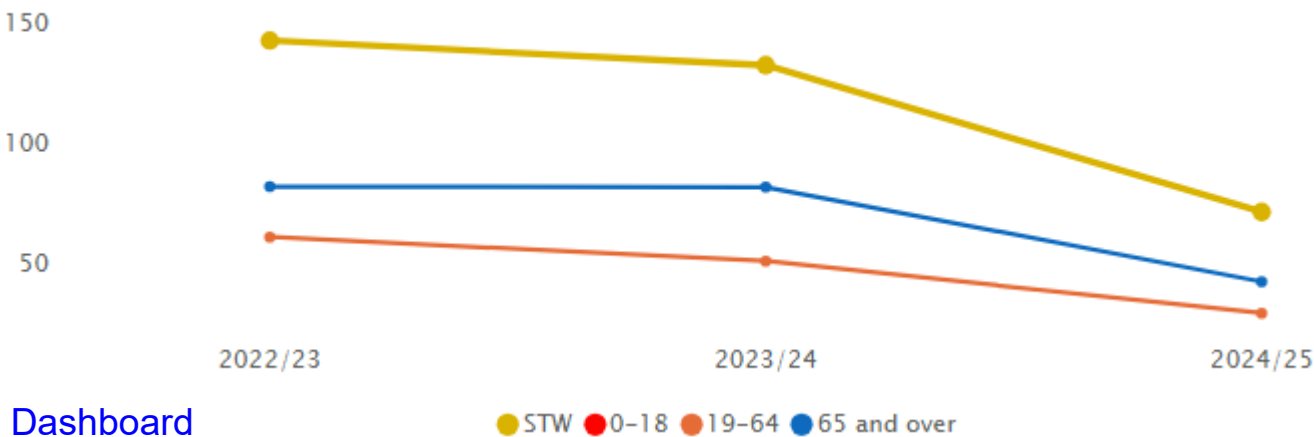
Emergency hospital admissions – Myocardial Infarction (Feb 2025)



Emergency hospital admissions – Myocardial Infarction (Feb 2025)



Emergency hospital admissions – Myocardial Infarction (Fixed Trend)



Source – STW Health Inequalities Dashboard

# Optimal Treatment of Hypertension (CVDPREVENT CVDP007HYP)



As at December 2024 62% of people in Shropshire, Telford & Wrekin aged 18+ appropriately treated for their high blood pressure. **This is below national average (67%), 1% less than the December 2023 and continues to be below national target of 80%** but in line with recovery trends following huge declines in treatment during the Covid-19 Pandemic.

Social demographic analysis shows lower proportions of treatment for people from socio-economically deprived areas, black and mixed ethnic backgrounds and younger people.

**Dec 23 – IMQ1 60.27% vs 64.96% IMQ55 = 4.69% GAP**

**Dec 24 – IMQ 1 – 58.58% vs 63.16% IMQ5 = 4.58 GAP**

**Dec 23 – Black 47.54 vs 64.08 White – 16.54 GAP**

**Dec 24 – Black 44.57 vs 62.71 White = 18.14 GAP**

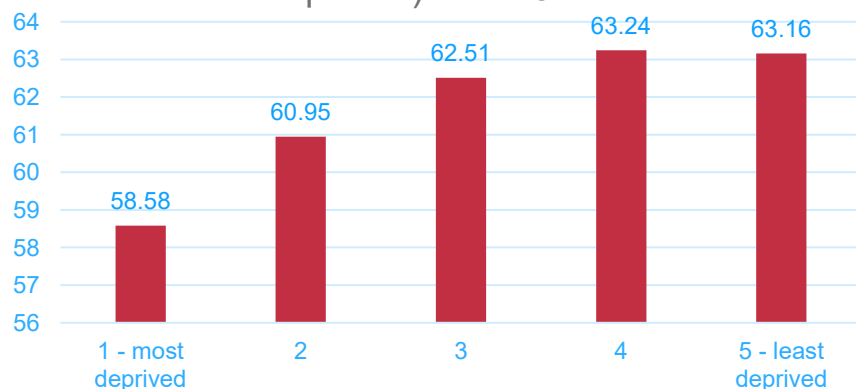
**People with LD and SMI who also have a diagnosis of Hypertensions are managed proactively, seeing higher rates of appropriate treatment compared to the general population. This is due to health checks.**

## All Persons Time Series: England vs NHS Shropshire, Telford and Wrekin Integrated Care Board

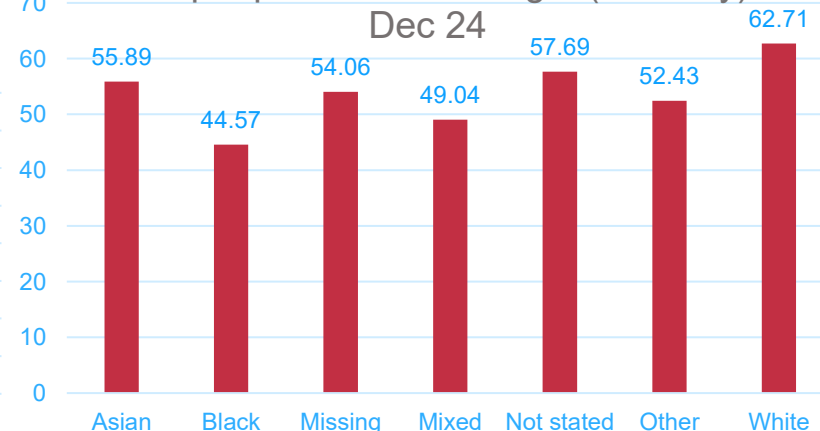
Percentage of patients aged 18 and over, with GP recorded hypertension, in whom the last blood pressure reading (measured in the preceding 12 months) is below the age-appropriate treatment threshold



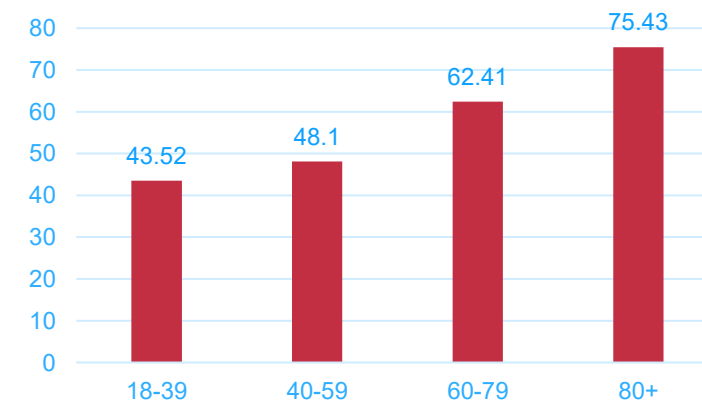
% of people treated to target (deprivation quintile) Dec 2024



% of people treated to target (ethnicity)



% of people treated to target (age) Dec 24



Data Source: <https://www.cvdprevent.nhs.uk/> (December 24 release)

# Cholesterol and Lipid Management (CVDPREVENT CVDP003CHOL)

The latest data shows that **61% of people aged 18+, with no recorded CVD and a QRISK score of 20% or more, were on lipid lowering therapy.**

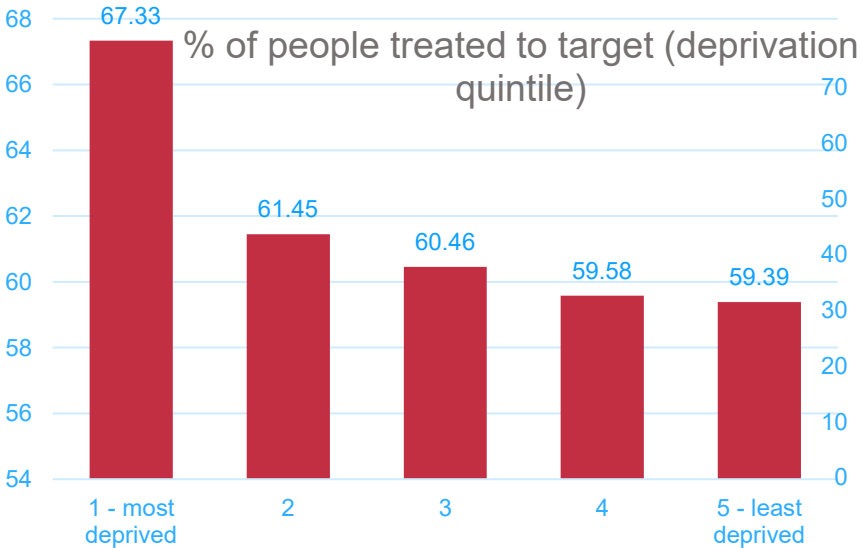
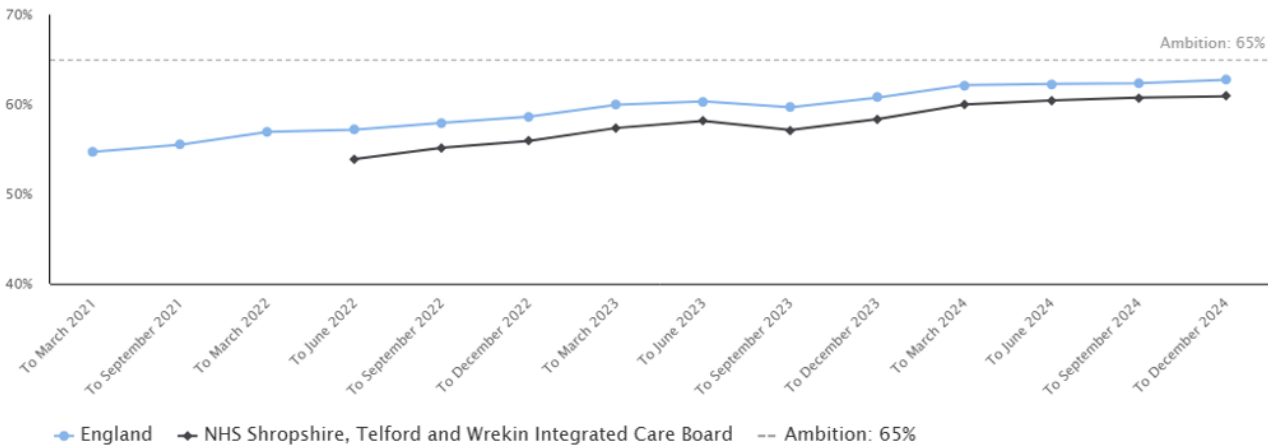
This is below the England average (63%) and just short of the national target of 65%. However, we can see that figures have been improving throughout the year in line with national trends.

Analysis found that the STW was meeting the 65% target for persons from the most deprived deprivation quintile (67%) and for persons aged 40-59 (68%). We can also see

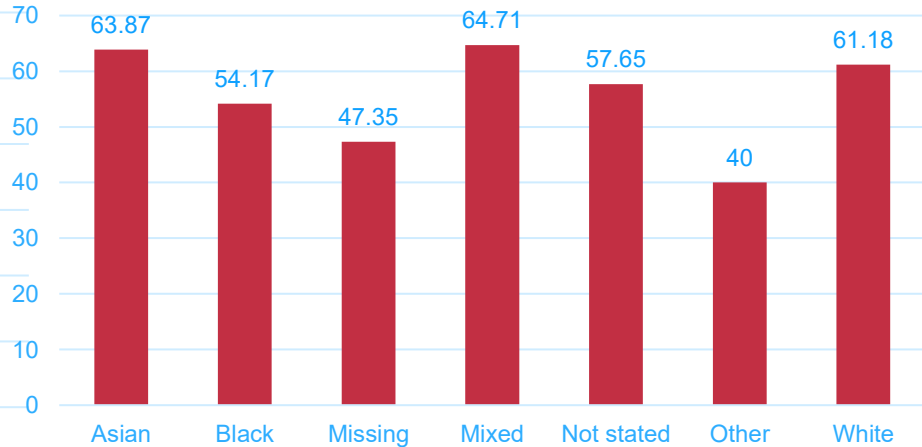
All Persons Time Series: England vs NHS Shropshire, Telford and Wrekin Integrated Care Board



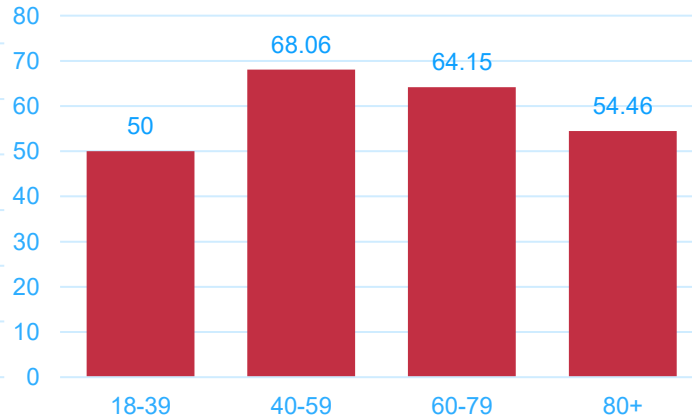
CVDP003CHOL: Percentage of patients aged 18 and over with no GP recorded CVD a GP recorded QRISK score of 20% or more, on lipid lowering therapy



% of people treated to target (ethnicity)



% of people treated to target (age)



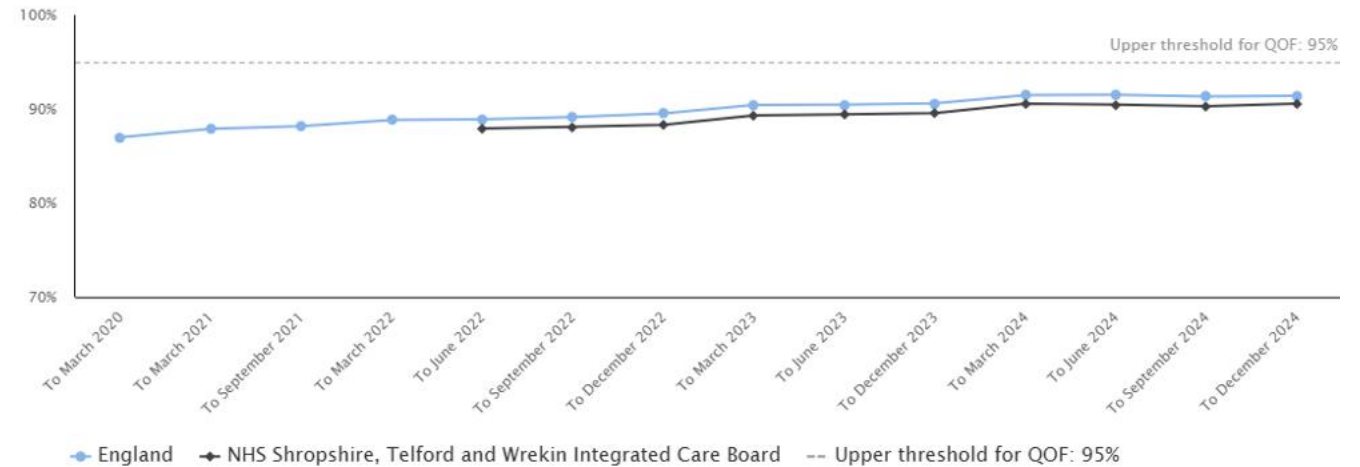
# Atrial Fibrillation (CVDPREVENT CVDP002AF)

The latest data (December 2024) shows that **91% of persons aged 18+, with GP recorded AF and a record of CHA2DS2-VASc score of 2 or more, are currently being treated with anticoagulation drug therapy. This is a marginal improvement from the previous year (89.5%).**

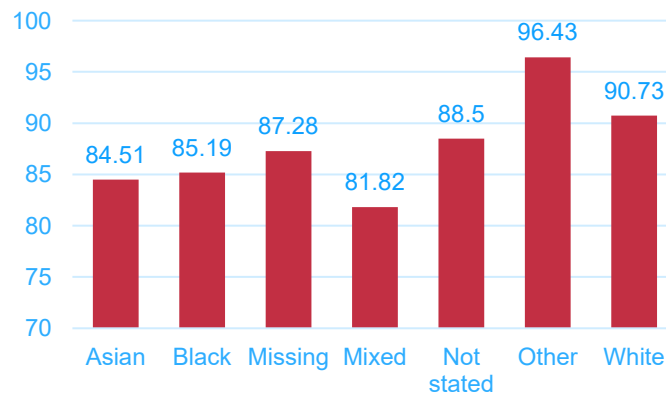
**Dec 23 – White 90% vs Black 81% Mixed 79% Other 81%**  
**Dec 24 – White 90% vs Black 85% Mixed 82% Other 96%**  
**(above target)**

This does continue to be below the England average of 91.4% and the national target of 95%. However, trend analysis does show that the ICB is heading towards this target and has broadly been following the national trend in improvement.

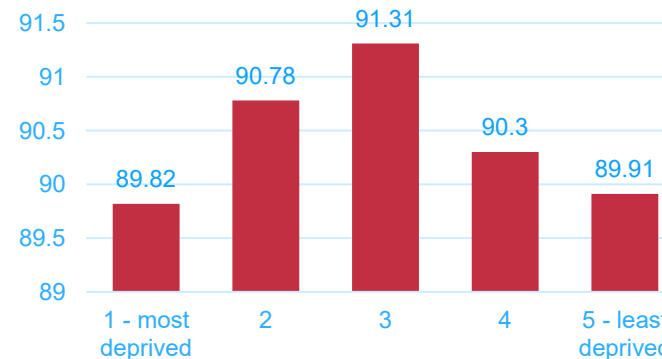
CVDP002AF Percentage of patients aged 18 and over with GP recorded atrial fibrillation and a record of a CHA2DS2-VASc score of 2 or more, who are currently treated with anticoagulation drug therapy



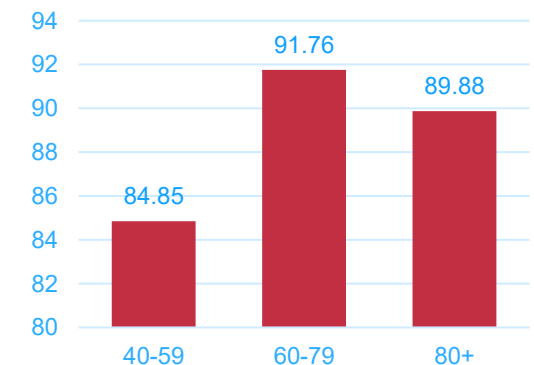
% of people treated to target  
(ethnicity)



% of people treated to target  
(deprivation quintile)



% of people treated to target  
(age)



Data Source: <https://www.cvdprevent.nhs.uk/> (December 24 release)

# Variation between % of people with Type 1 and Type 2 diabetes receiving all 8 care processes

National guidance asks systems to ensure that they increase the proportion of those with Type 2 diabetes receiving recommended NICE care processes.

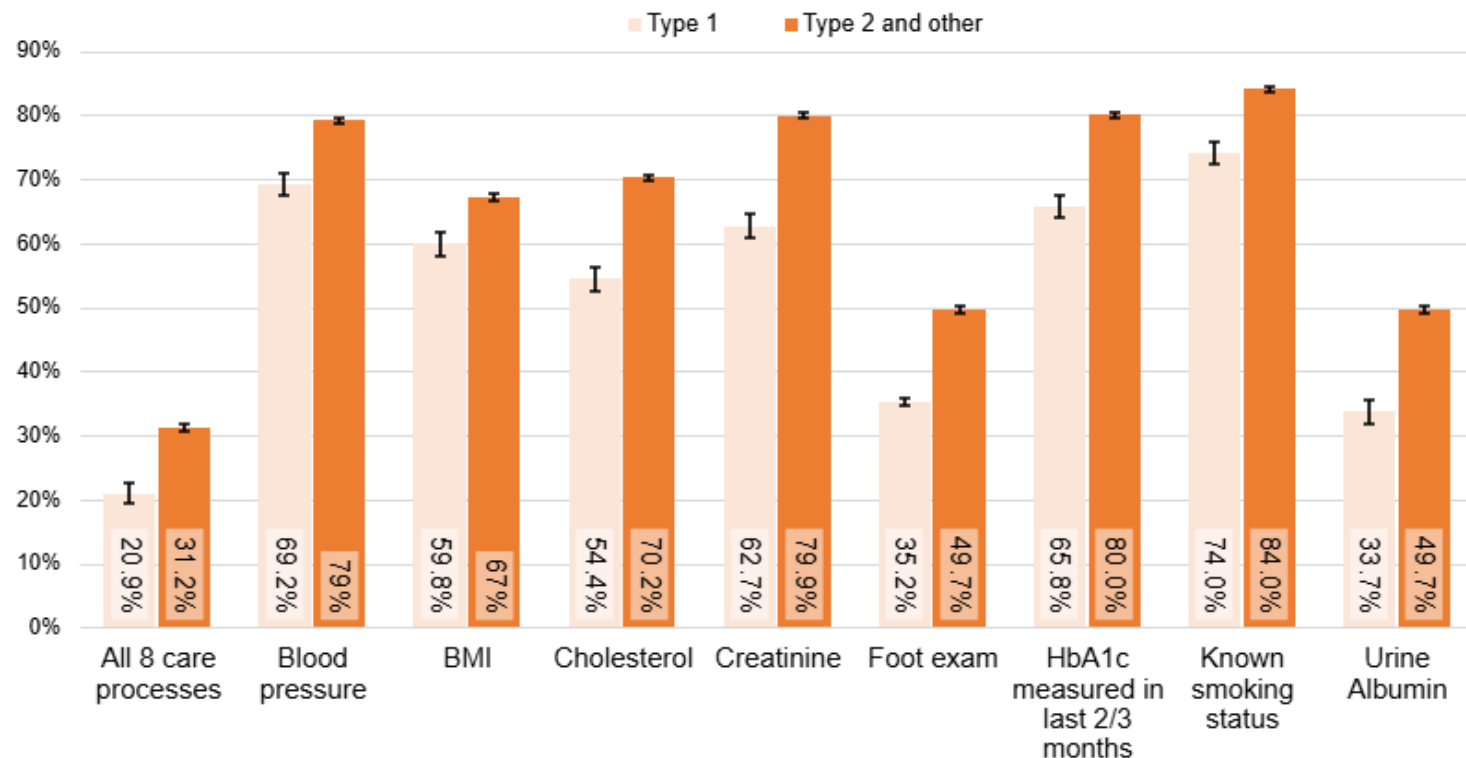
Compared to the previous 12 months, the percentage of people with type 2 diabetes receiving all 8 care processes has decreased by 5% (from 37% in December 2023 to 31% in December 2024).

The latest nationally published figures (Quarter 3 2024/25) show that Type 1 patients, are less likely to have received all at 8 processes and that a smaller proportion of Type 1 patients have received each of the individual care processes compared to Type2/other patients.

Compared to England the ICB has recorded a significantly smaller proportion of both Type 1 (20.9%) and Type 2/other (31.2%) patients receiving all 8 care processes compared to the England averages (27.3%, 41.9%).

Further analysis showed that the ICB is below the England average for all but two measures – Type 1 Blood pressure monitoring and Type 1 Serum Creatinine recording

The 8 Care processes split by diabetes type, NDA 2024/25 (April to December 2024)

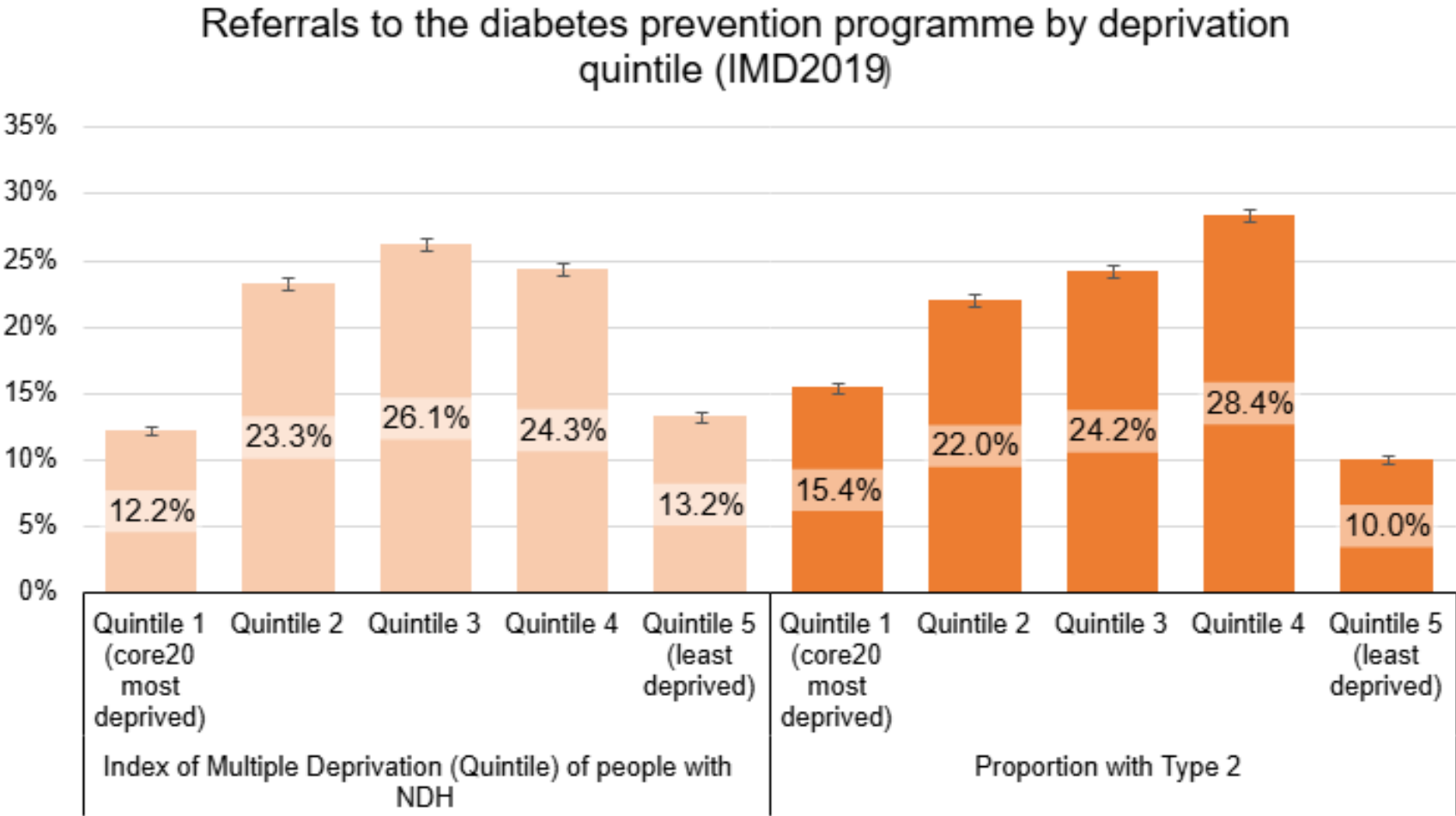


Data Source: [National Diabetes Audit Dashboard](#)

# Variation between the Proportion of the STW Population with Type 2 Diabetes and the % of Referrals to the National Diabetes Prevention Programme, by Deprivation Quintile

The latest nationally published figures (December 2024) show that 12.2% of diabetes prevention programme patients came from the most deprived quintile.

This is statistically lower than the proportion of persons with Type 2 diabetes, who come from the most deprived quintile (15.4%).



Data Source: [National Diabetes Prevention Dashboard](#)



# Smoking Prevalence and Proportion of Adult Acute Inpatient and Maternity Settings offering Tobacco Dependency Services

## Tobacco Dependence Services Dashboard

Health Inequalities



Suppression Applied

Aggregation Source

Commissioner

Provider

Service Setting

All other services

Maternity services

Activity Type

Acute Inpatient

Level

ICB

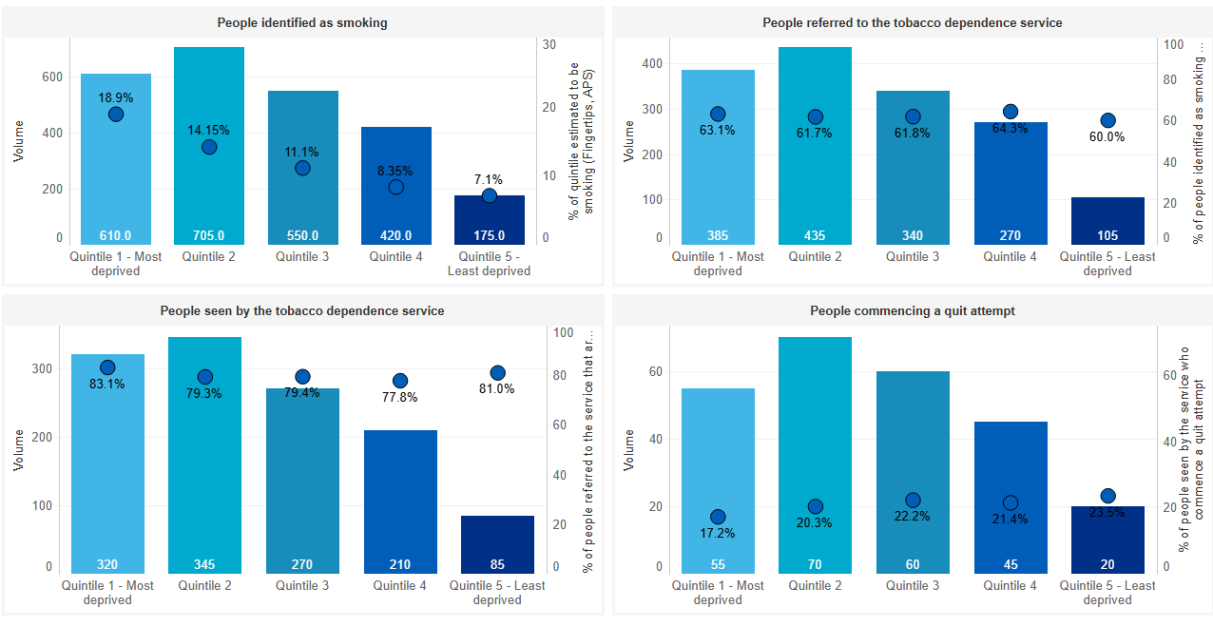
Organisation

NHS SHROPSHIRE, TELFORD AND WRE...

Data points displayed as 12 month rolling total from 2024-02-01 to 2025-01-31, based on Activity Date

\* data on this tab is suppressed at a different granularity, to allow for the intersection between two groups. Because of this total figures may differ from other tabs.

### Overview (Deprivation)



## Tobacco Dependence Services Dashboard

Key Indicators



Suppression Applied

Aggregation Source

Commissioner

Provider

Service Setting

All other services

Maternity services

Activity Type

Acute Inpatient

Level

Provider

Region Name

Midlands

ICB Name

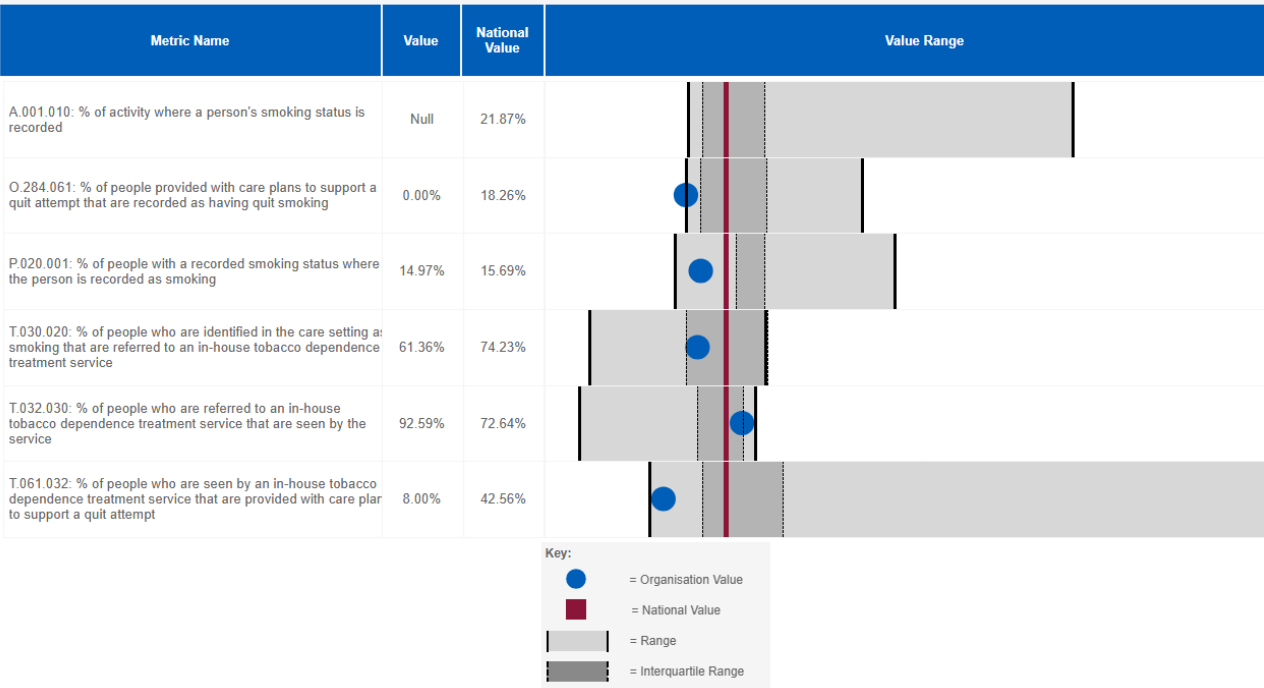
NHS SHROPSHIRE, T...

Org Name

THE SHREWSBURY A...

Activity Month(s)

January 2025



Shropshire, Telford & Wrekin has established Tobacco Dependency Teams within Shrewsbury Telford Hospital NHS Trust (SaTH) Acute Inpatient, Maternity Services and Midlands Partnership Foundation University Trust (MPUFT) Mental Health Inpatient services.

It is estimated that **12.5% of the Shropshire, Telford & Wrekin population (age 18+) are smokers (APS 2023), a higher rate than the national average of 11.6%.** Trendline analysis indicates that the ICB has seen little movement in its estimated smoking prevalence, which was recorded as 12.6% in 2020, 13.4% in 2021 and 12.4% in 2022. **At a Local Authority level, smoking prevalence in Shropshire appears to have increased slightly since 2022 (10 – 11.4%), whereas prevalence in Telford & Wrekin has reduced (16.7 – 14.5%).**



Data Sources: [NHS England Tobacco Dependency Dashboard](#) and [APS Fingertips](#)

# Smoking at Time of Delivery (SATOD) (\*DQ)

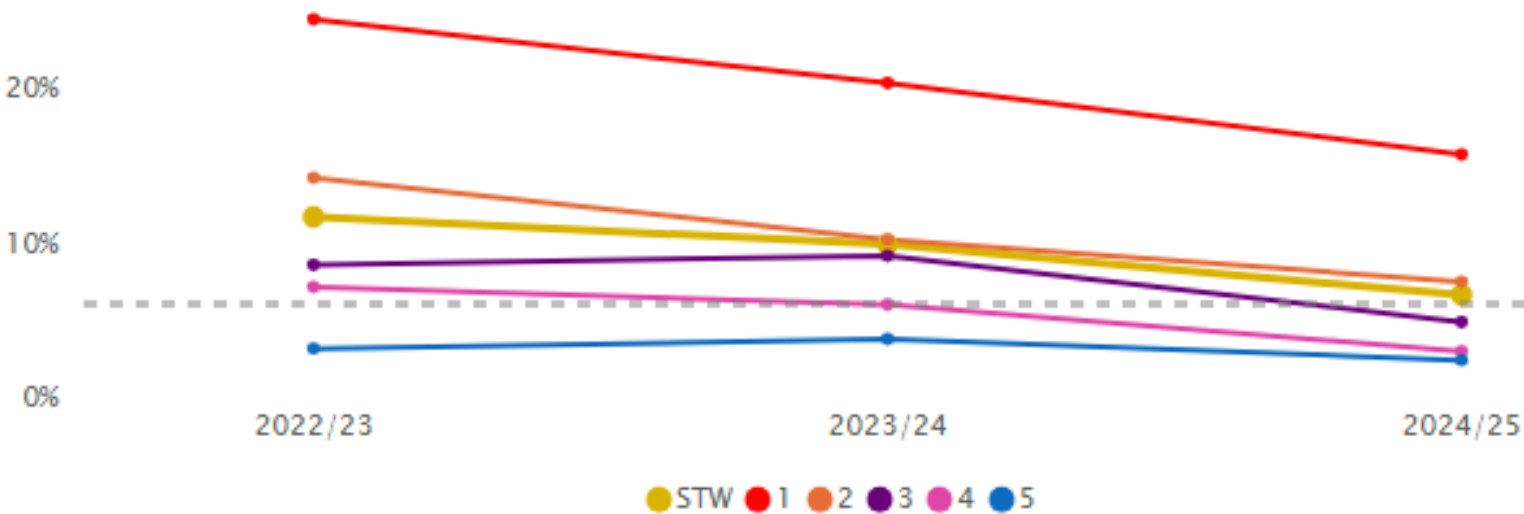
The following data shows the percentage of hospital births where the patient has been recorded as an active smoker at the time of delivery for 24/25.

Please note that due to a combination of poor ethnicity reporting and small figures, there are data quality concerns when comparing Smoking at Time of Delivery by ethnicity.

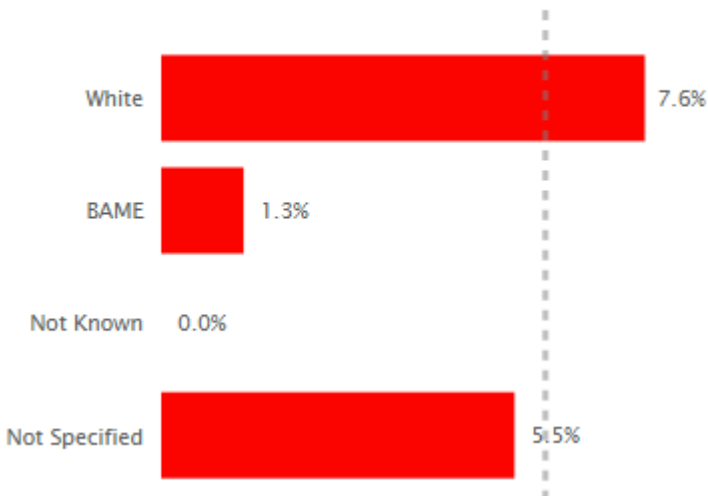
Data shows that a much higher proportion of patients recorded as active smokers at the time of delivery are living in our most socio-economically deprived areas (15.7% compared to more affluent areas at 2.4%).

It is positive to see a reduction in Smoking at the Time of Delivery across all IMD Quintiles, but this rate is decreased at a much slower rate in a most deprived areas.

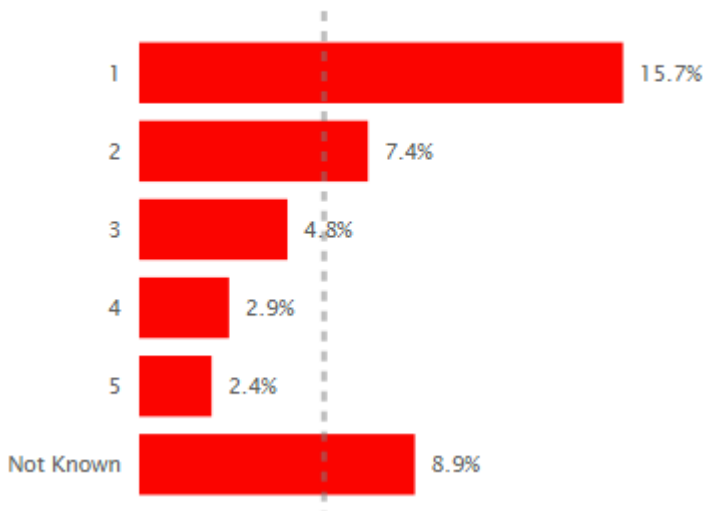
% of smoking at time of delivery (SATOD) (Fixed Trend)



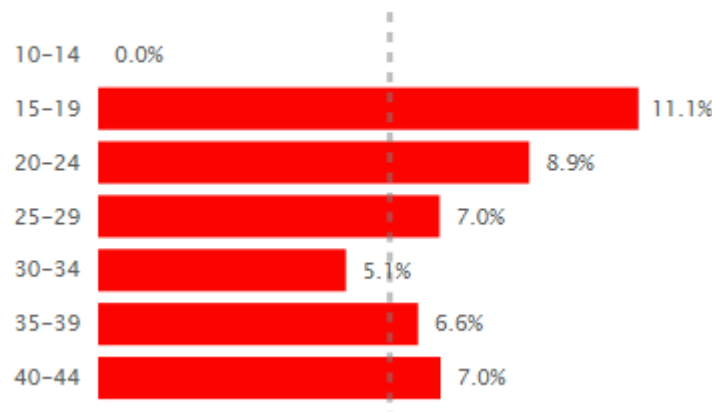
% of smoking at time of delivery (SATOD) (Date Selection)



% of smoking at time of delivery (SATOD) (Date Selection)



% of smoking at time of delivery (SATOD) (Date Selection)

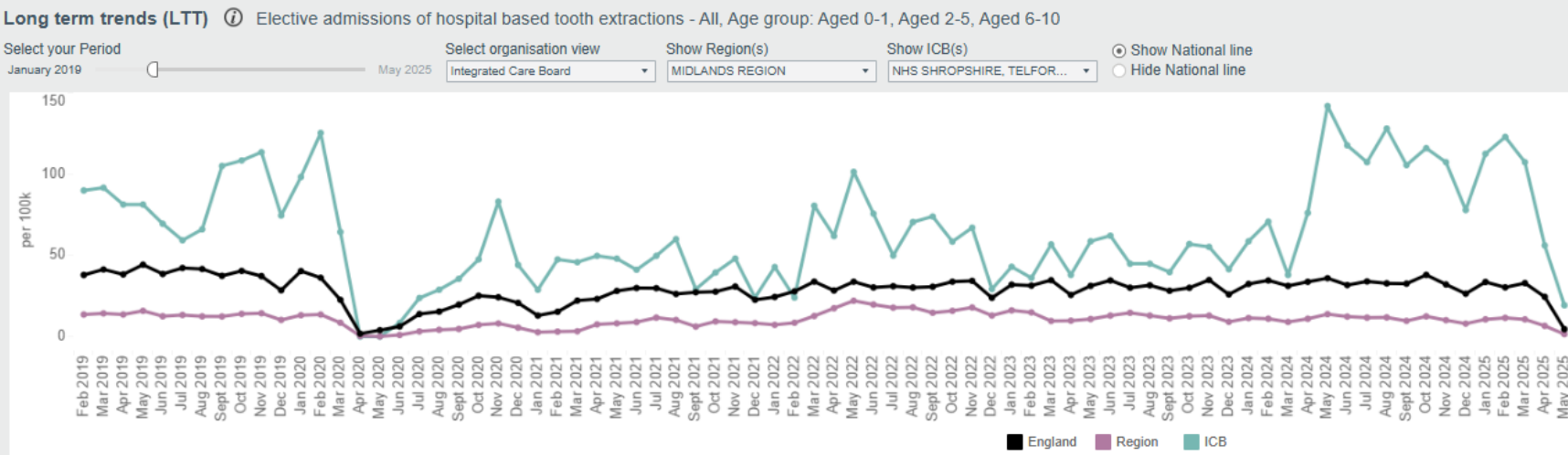


# Tooth Extractions due to Decay for Children Admitted as Inpatients to Hospital, Aged 10 Years and Under (number of admissions not number of teeth extracted)

The latest data (2024/25) indicates that **STW** has statistically higher admission rates than the England average.

Trend analysis indicates that both districts have an extraction admission rate that is frequently statistically above the national average.

There is also a skew in rates towards Quintile 1 of deprivation (most)



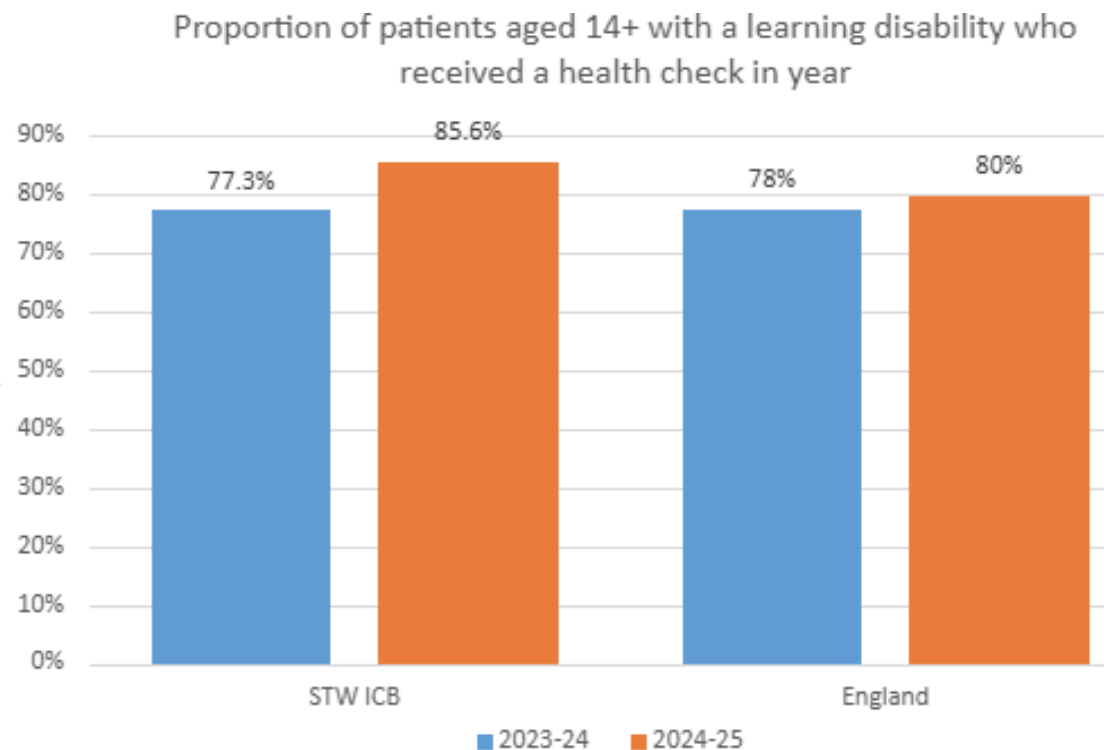
Episodes of hospital based tooth extractions - All  
NHS SHROPSHIRE, TELFORD AND WREKIN INTEGRATED CARE BOARD: 1,321.2 per 100k (FY 2024/25)  
Age group: Aged 0-1, Aged 2-5, Aged 6-10, Broad ethnic group: All, IMD quintile: All



# Learning Disability Annual Health Checks

At the end of March 2025, 85.6% had been achieved for Learning Disability Annual Health Checks (LDAHCs) undertaken for those on Learning Disability registers aged 14 or over.

This is an 7.6% increase on the previous year (77.3% in March 2024) and exceeds the national target of 75%.



[Data source : NHS England : \[MI\] Learning Disabilities Health Check Scheme \(March 2025\)](#)



# Adult Mental Health Inpatient Rates for People with a Learning Disability and Autism

NHS England's 'building the right support' guidance published in 2015 **aims to reduce the number of people with a learning disability and or Autism in a mental health inpatient setting** and to develop community alternatives to inpatient care in line with the National Service Model. [Find out more here.](#)

The latest adult mental health inpatient figures, show that, the **ICB currently has a higher rate per million than the England average (44 V 40)**, having spent last 6 months reporting a higher rate to England.



**Table 5.2: Adult inpatient rate by Integrated Care Boards**  
England, November 2024 to April 2025

The figures for the historical months in this table show the most recent data cut (calculated using all submissions as at the end of April 2025)

Organisation <sup>1,2</sup>	Month												Numbers / rates <sup>3</sup>
	November 2024		December 2024		January 2025		February 2025		March 2025		April 2025		
	Adult inpatients	Rate per Million <sup>3</sup>	Adult inpatients	Rate per Million <sup>3</sup>	Adult inpatients	Rate per Million <sup>3</sup>	Adult inpatients	Rate per Million <sup>3</sup>	Adult inpatients	Rate per Million <sup>3</sup>	Adult inpatients	Rate per Million <sup>3</sup>	
All inpatients (at month end)	1,955	44	1,925	43	1,935	44	1,915	43	1,840	41	1,785	40	
QOC NHS SHROPSHIRE, TELFORD AND WREKIN	20	54	20	54	20	49	20	44	20	49	20	44	

Please take account of the information on the notes and definitions tab when interpreting this table.

**Notes:**

- 1 This table represents the current organisational structure, and any old organisation codes have been mapped to current ones.
  - 2 Based on originating ICB. Where the originating ICB is not present or not valid, the submitting ICB is used as the originator. If the submitting organisation is a commissioning hub or provider collaborative then these instances only included in the total.
  - 3 Adult inpatient rates for all months have been calculated based on ONS mid-year population estimates for 2017, as per the March 2015 baseline calculation.
- Population data for Integrated Care Systems has been derived based on CCG figures, with old CCGs that have been affected by mergers since 2017 converted to current CCG codes.

Source: Assuring Transformation Collection, NHS England

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**When compared to the previous year, rates have reduced (52 per million in NHS STW recorded in March 2024).**

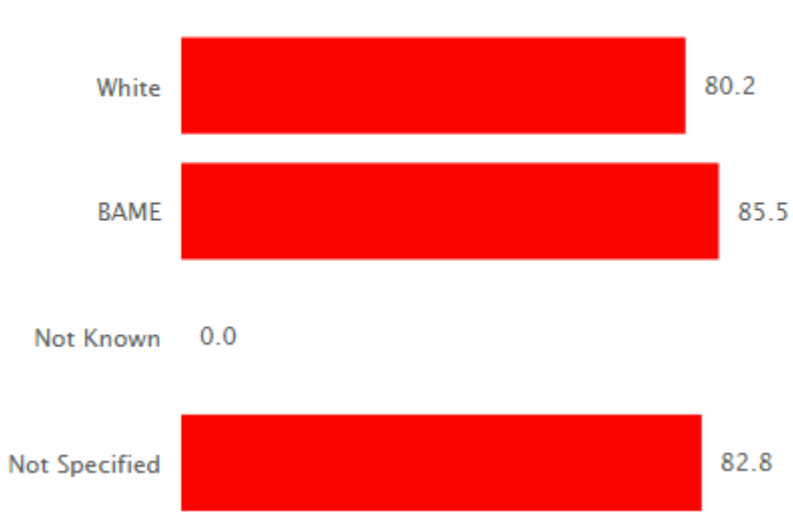
[Data Source: Learning Disability Services Statistics](#)



# Preterm Births under 37 Weeks 03/24 – 04/25 (\*DQ)

Whilst Shropshire consistently reports a premature birth rate that is statistically below the England average, Telford and Wrekin is often found to be reporting a rate statistically in line with the national.

Preterm births under 37 weeks (Date Selection)



Preterm births under 37 weeks (Date Selection)

