



STOCKPORT  
METROPOLITAN BOROUGH COUNCIL



healthwatch  
Stockport



NHS  
Stockport  
Clinical Commissioning Group

# Stockport JSNA

joint strategic needs assessment

## 2015 JSNA

Health and Care Service Use

April 2016

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# Service Use Summary



**The aim of this briefing is to set out the major trends in the use of health and care services over the past few years.**

Overall the trends set out in this briefing show that a large volume of health and care activity takes place in Stockport each year across a range of settings, the majority of this care is for older people.

Volumes of service use are increasing, but this increase is not driven solely by the changing demographics.

Stockport benchmarks as a higher use authority nationally on a range of measures.

## **Note on data quality**









Data sources are variable and caution should be taken with interpretation, as activity measures vary across sectors. For example, in primary and community care activity is measured mainly by appointments, in acute settings activity is measured through admissions or bed days and social care activity is measured using clients or care packages. This can make it challenging to compare levels.

Data sources also vary in their quality and completeness.

# Service Use Summary



The table below summarises the following analysis and shows that across the health and care economy there is a large amount of activity and that this activity is rising.

	Volume	Trend	Key issue
Inpatient admissions	97,000	 36% in 10 years	<ul style="list-style-type: none"> <li>• Rates rising, especially for older people</li> <li>• Significant inequalities profile</li> <li>• Delayed transfers of care rising</li> </ul>
<i>Inpatients - emergency</i>	<i>39,700</i>	 47% in 10 years	<ul style="list-style-type: none"> <li>• <i>Benchmark as high levels compared to national average and peers</i></li> </ul>
<i>Inpatients - Planned</i>	<i>46,300</i>	 25% in 10 years	<ul style="list-style-type: none"> <li>• <i>Only 60% of activity at main provider,</i></li> </ul>
A & E Attendances	94,000	 13% in 7 years	<ul style="list-style-type: none"> <li>• Rise in demand</li> <li>• High levels of admission as result at Stockport FT</li> </ul>
Outpatients appointments attended	483,600	 11% in 3 years	<ul style="list-style-type: none"> <li>• Rising demand</li> <li>• Benchmark high on follow up ratio</li> </ul>
Community contacts	543,000	 District Nursing 13% in 2 years	<ul style="list-style-type: none"> <li>• Rising activity for district nursing, linked to ageing</li> <li>• Demand will rise further with care planned outside of hospital in Stockport Together.</li> </ul>
Mental health care – people in contact with services	11,000	 Non inpatient 39% in 6 years	<ul style="list-style-type: none"> <li>• Physical health needs of people on psychiatric wards, especially facilities for physical activity</li> </ul>
Adult Social Care	8,455		<ul style="list-style-type: none"> <li>• Fall in levels of provision 2007-2011, now stable</li> <li>• Rise in dementia client group</li> </ul>
Primary Care – contacts in practice	700,000+	?	<ul style="list-style-type: none"> <li>• Prescribing volumes rising</li> <li>• Dental access better than average</li> </ul>

# Inpatient Admissions



## Background

- Inpatient admissions are some of the highest cost and most invasive health care interventions, often disempowering for the patient. A key policy drive is to minimise these episodes and shift towards care in a community setting where possible.
- Analysis of admissions can give indications of the patterns of illness and disease and demonstrates the use of health services.
- Admission type allows us to discriminate between planned care (where a patient is referred through health care pathways and which are likely to be the most appropriate) and emergency admissions (which are more likely to result from lack of early presentation and diagnosis – although of course many can result from accidents or unforeseeable health care needs).

## Analysis

There are around 97,000 inpatient admissions made by Stockport residents each year.

Admission Type	14/15 admissions for Stockport residents	
	Number	Proportion
All Planned Admissions	46,326	47.5%
All Emergency Admissions	39,721	40.7%
All Other Admissions (births, transfers etc.)	11,506	11.8%
<b>TOTAL</b>	<b>97,553</b>	

Around 70% of these admissions are at Stockport NHS Foundation Trust, although this varies by admission type and area of Stockport

2014/15 Admissions by Provider	All Admissions	All Planned Admissions	All Emergency Admissions	All Other Admissions (births, transfers etc.)
Stockport NHS Foundation Trust	<b>68.6%</b>	58.1%	78.6%	76.7%
University Hospital of South Manchester NHS Foundation Trust	<b>12.6%</b>	14.7%	10.8%	10.5%
Central Manchester University Hospitals NHS Foundation Trust	<b>9.1%</b>	12.6%	4.4%	11.1%
Salford Royal NHS Foundation Trust	<b>2.4%</b>	3.9%	1.2%	0.1%
The Christie NHS Foundation Trust	<b>2.2%</b>	3.5%	1.2%	0.1%
BMI Healthcare	<b>1.6%</b>	3.4%		
Pennine Care NHS Foundation Trust	<b>0.7%</b>	0.0%	1.6%	0.1%
East Cheshire NHS Trust	<b>0.6%</b>	1.0%	0.3%	0.3%
All other trusts (England) <500 admissions each	<b>2.2%</b>	2.7%	1.9%	1.2%

Only 20-30% of all admissions from Heald Green and Gately are at Stockport NHS Foundation Trust, the majority of patients in these areas attend University Hospital of South Manchester NHS Foundation Trust

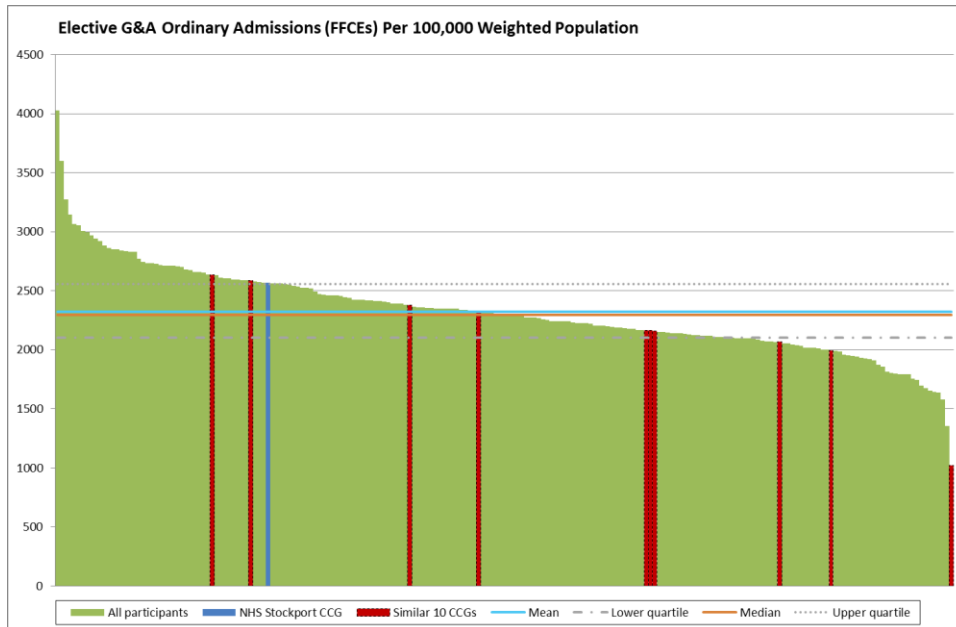
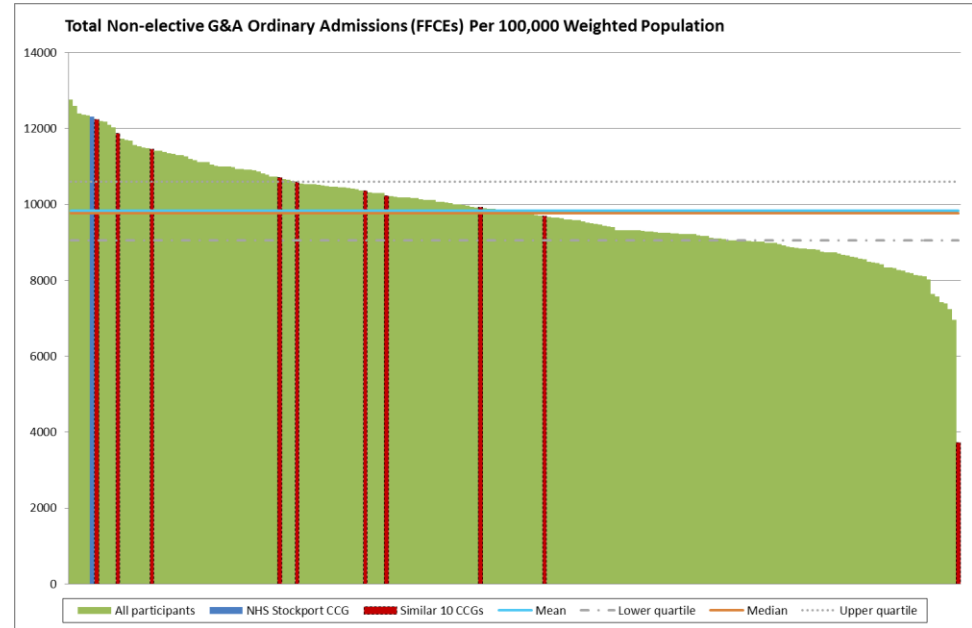
# Inpatient Admissions - Benchmarking



For non elective directly standardised admission rates **Stockport CCG benchmarks as one of the highest CCGs nationally**, with rates in excess of the national average and all peers.

## Non elective admissions benchmarking

- Stockport 12,314 per 100,000
- Peer average 9,921 per 100,000
- National average 9,827 per 100,000



For elective directly standardised admission rates Stockport CCG benchmarks as just above the upper quartile.

## Elective admissions benchmarking

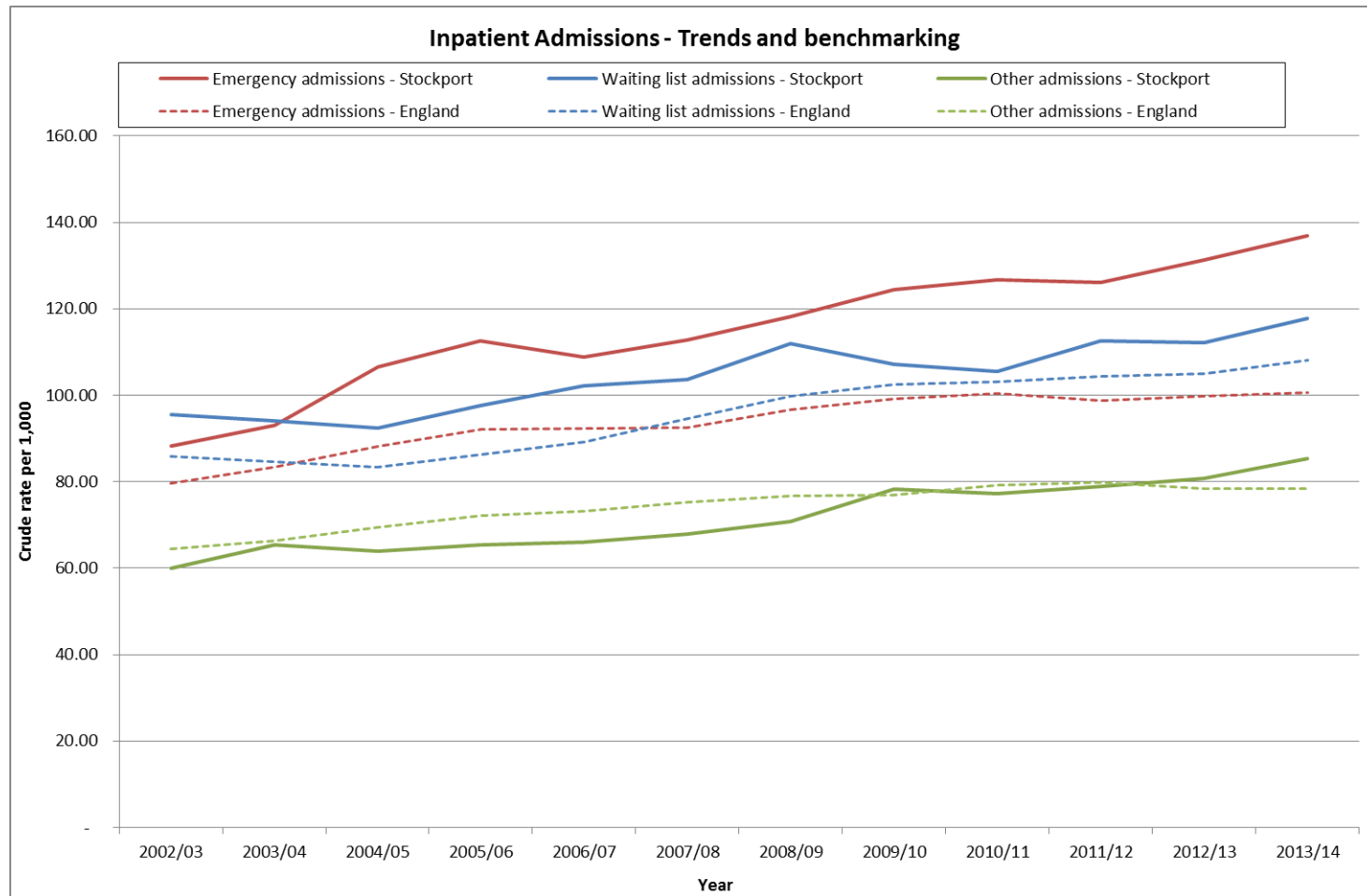
- Stockport 2,568 per 100,000
- Peer average 2,094 per 100,000
- National average 2,322 per 100,000

# Inpatient Admissions – trends over time (registered based)



Trends over time show an **increase in all types of admission**, but particularly rapid for emergency admissions.

Benchmarking shows that crude rates of admission in Stockport for emergency admissions have risen more rapidly than the national average, for other types of admission the rate of increase has been similar to the national trend



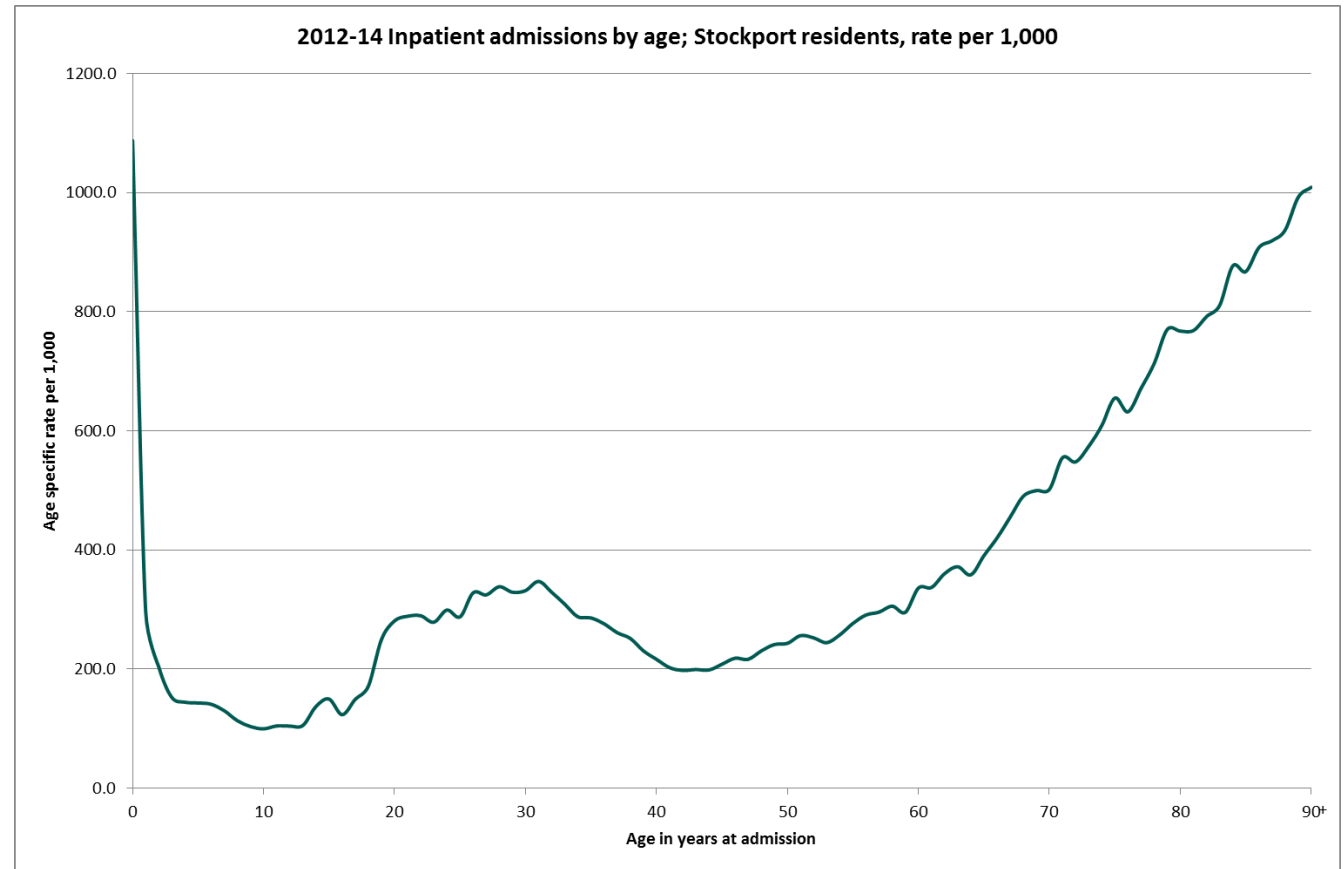
## Inpatient Admissions – age trends (resident base)



Trends by age show rates are lowest for those ages 1–18 years and highest for those aged 0 (at birth) and rise rapidly from ages 65+.

Admissions relating to maternities lead to an increase in rates for women between the ages of 18-44.

At younger and older ages men have higher levels of admissions than females.



Benchmarking shows that rates of admission in Stockport are higher than the national average for all ages, but **especially in for those aged 15-44 years**.

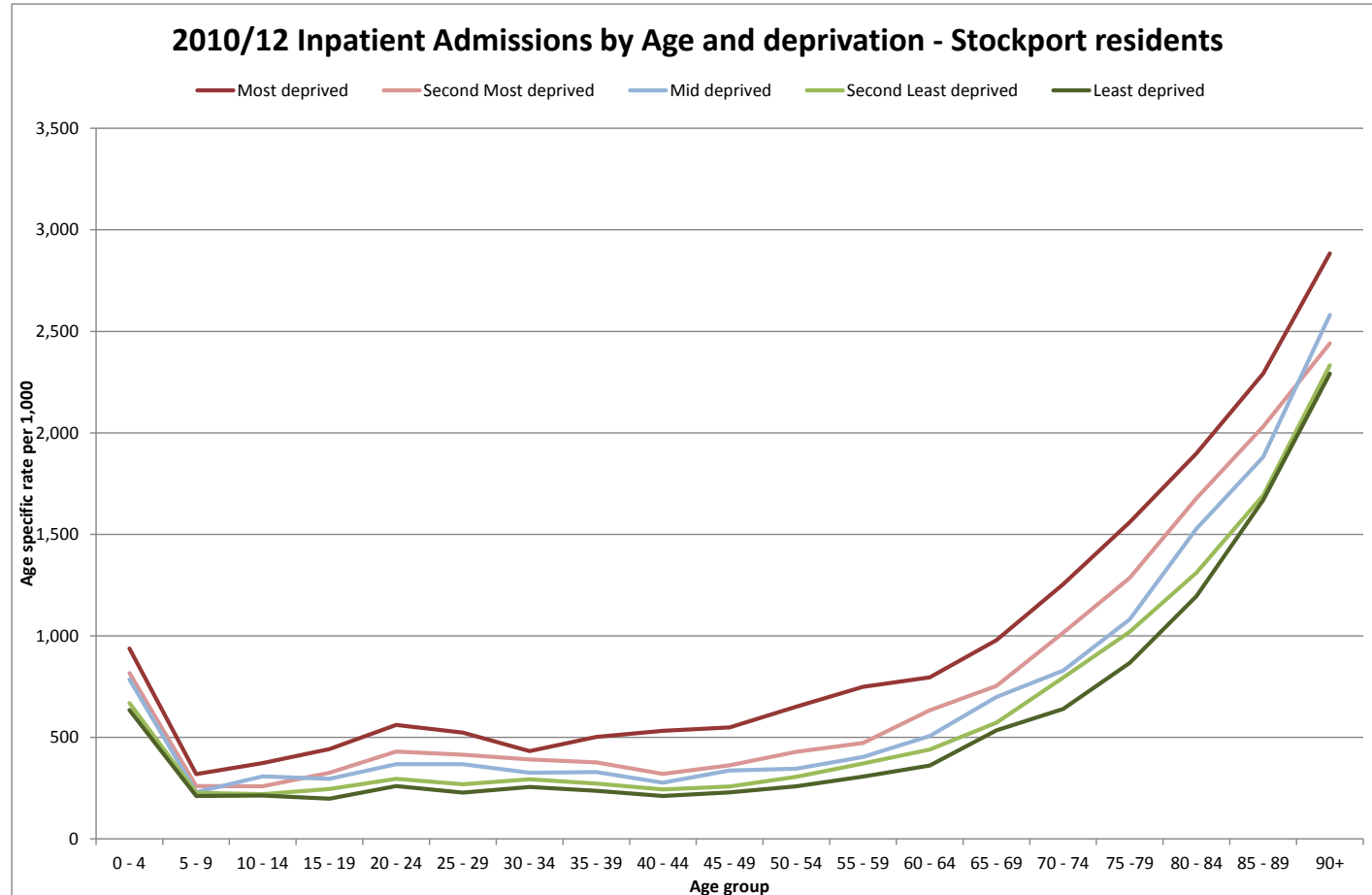
Rates of admission for older ages have only exceeded national averages recently, until 2010 rates for those aged 60-74 and 75+ were well below the national average.

# Inpatient Admissions – deprivation (resident base)

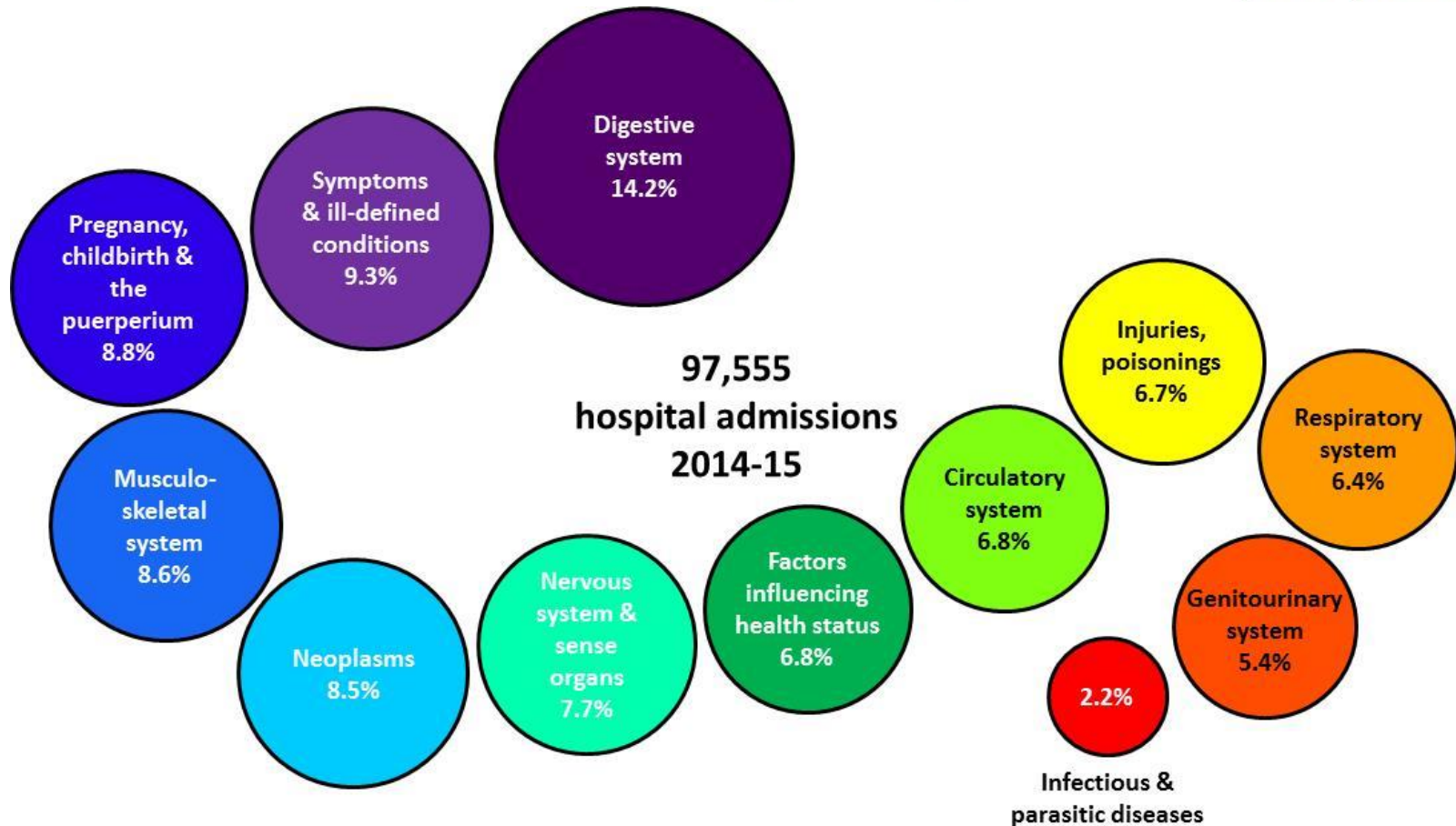


Trends by deprivation show that **rates of admission are higher in the most deprived areas at all ages**, and there is a clear gradient between each quintile.

However due to the uneven population share between these groups, from age 60+ there are higher numbers of admissions in the least deprived areas – so that services will see more older people from areas of affluence.



# Inpatient Admissions – diagnosis



Analysis of the primary diagnosis of admissions show that the most common causes of admission relate to the digestive system, particularly diseases of the oesophagus, intestines and gallbladder.

30% of admissions for symptoms and signs are also related to the digestive system, with a further 30% relating to circulatory disease.

Pregnancy, musculoskeletal and neoplasms all cause more than 8,000 admissions a year. Factors influencing health status include the live births of babies and admissions for tests.

# Emergency Department Attendances (A&E)

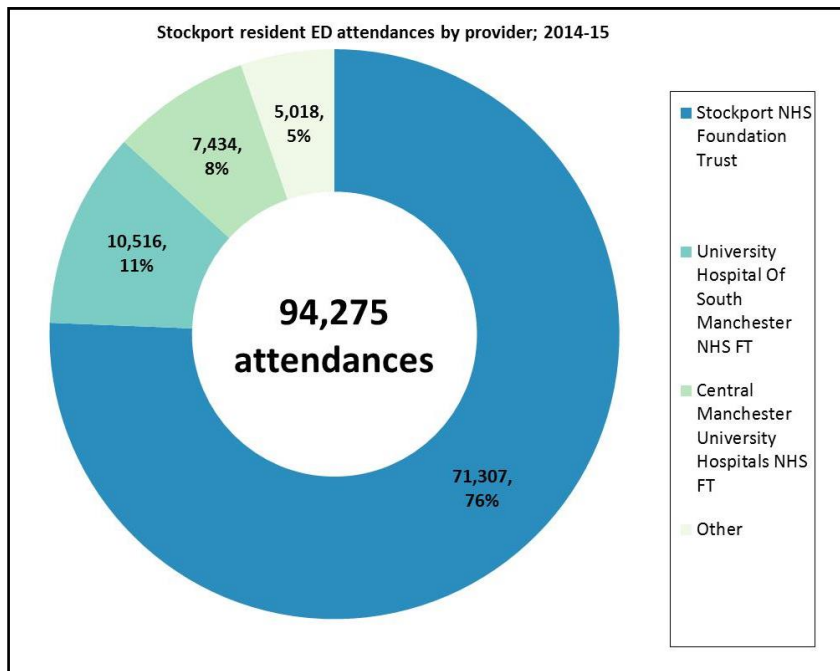


## Background

- A&E attendances give evidence about the acute demands for health care.
- Analysis of attendance can give indications of the patterns of illness and of injuries and also demonstrates the use of the health service.

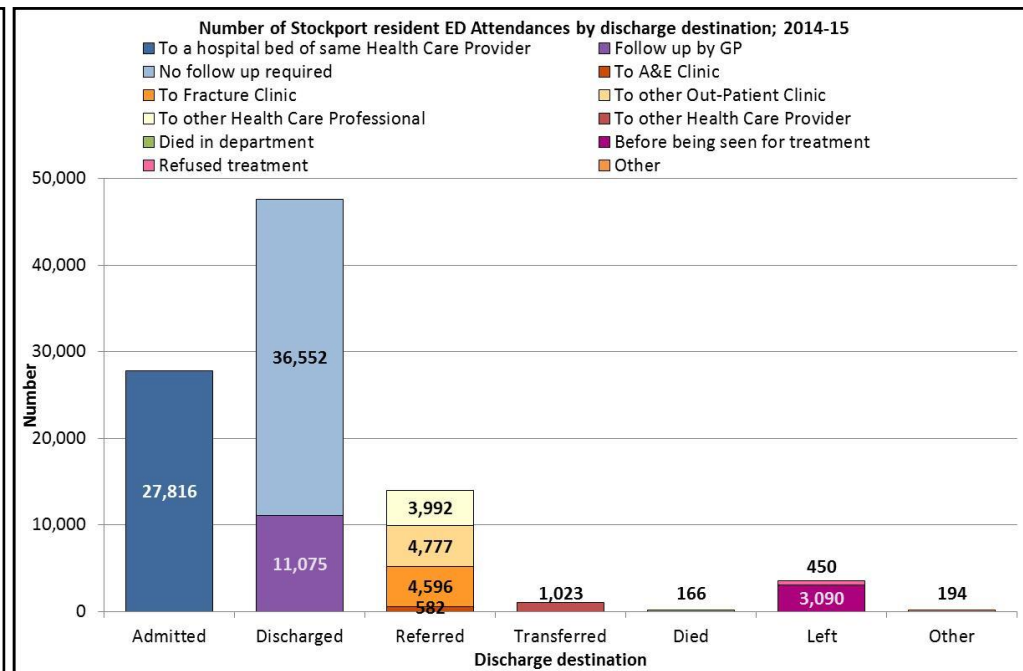
## Summary

There are around 94,000 ED Attendances made by Stockport residents each year.



75% of these attendances are made at Stockport NHS FT, with a further 11% at South Manchester and 8% at Central Manchester.

Like admissions, the pattern of A&E of use varies across the borough so that in Heald Green and Gately fewer than 10% of attendances are at Stockport, and 75% are at South Manchester.

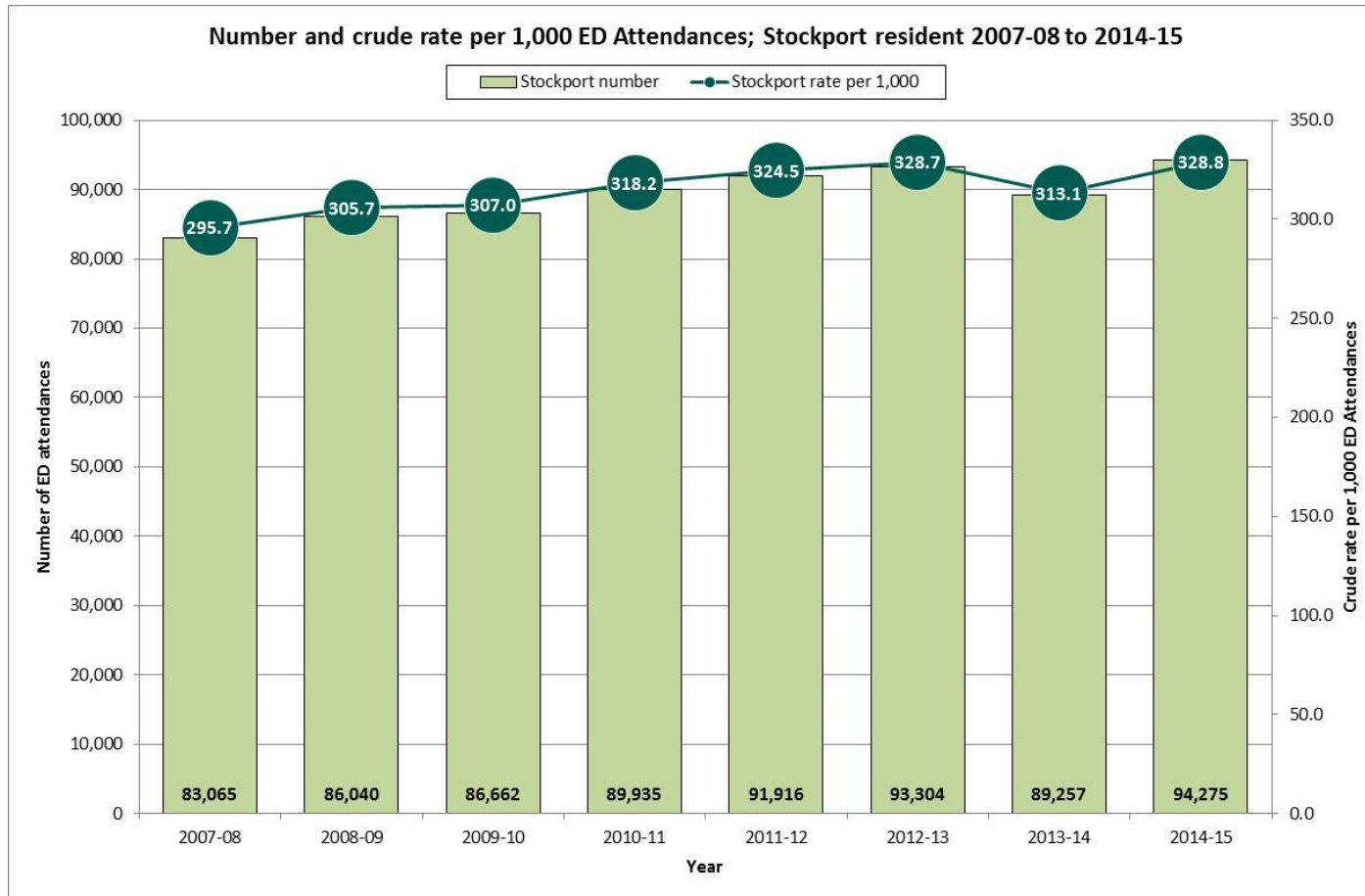


50% of these attendances result in a discharge either with no follow up (39%) or with a follow up in primary care (12%).

**30% result in admissions to hospital as an inpatient** and 15% with a discharge with a follow up appointment in acute care (e.g. outpatients).

4% of attendances result in patients leaving before treatment.

# Emergency Department Attendances (A&E) – trends over time



Rates of ED attendance have been increasing steadily over the last decade, with an increase every year apart from 2013/14.

Benchmarking data for activity volumes over time are not readily available so direct comparisons to other areas are not possible on this measure – however national trends have also been for an increase in demand.

# Emergency Department Attendances (A&E) – trends by age

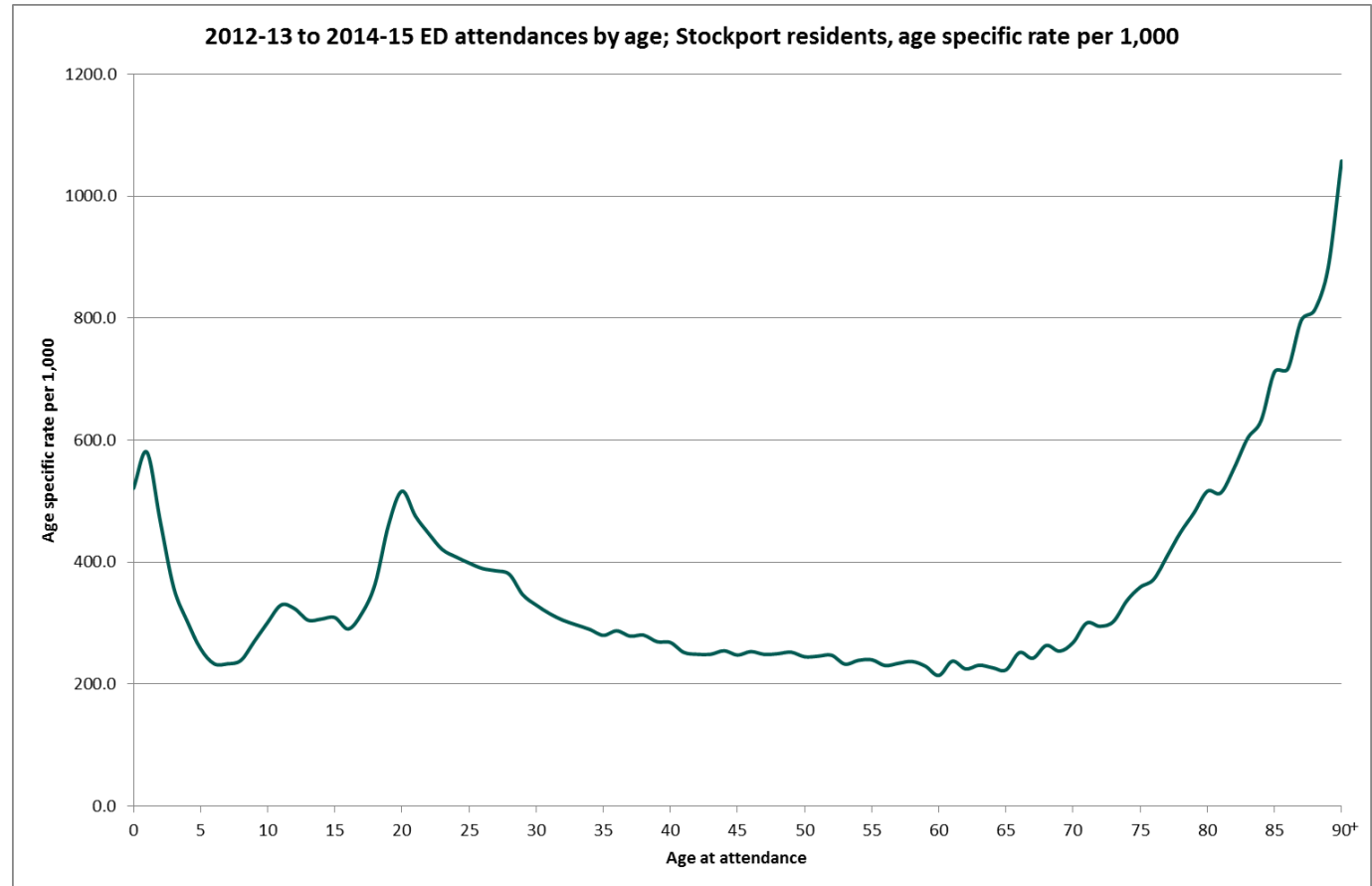


Rates of ED attendance peak at ages:

- 0 - 1years
- 18 - 29 years
- and from ages 65 onwards they rise steadily

**Rates of ED attendance are far higher than rates of inpatient admissions up to the age of 65, from this point on they converge**

Trends of ED attendance by deprivation show a similar pattern as admissions with rates far higher in the most deprived areas at all ages.

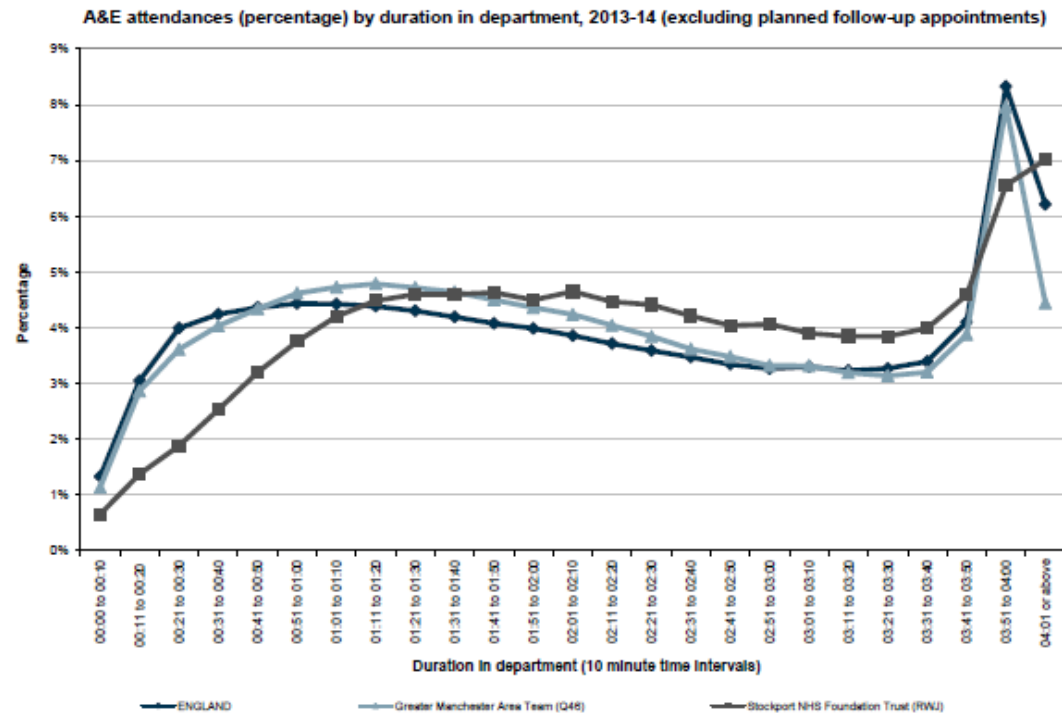


# Emergency Department Attendances (A&E) – other trends



Comparison of trends between Stockport NHS Foundation Trust and other ED departments shows that

- Locally a far **higher proportion of attendances result in admission than is average – 30% compared to 21% nationally.**
- The length of time people spend in ED in Stockport is on average longer than both England and Greater Manchester – fewer people are seen and discharged within an hour and more stay within the department for 4 hours or more.



2013/14 ED Attendances by method of discharge	England	Greater Manchester	Stockport NHS Foundation Trust
Admitted	21.2%	20.9%	30.0%
Discharged – GP follow up	19.7%	17.0%	11.7%
Discharged – no follow up	38.2%	42.3%	39.8%
Referred	12.5%	12.8%	13.9%
Other	8.4%	7.0%	4.6%

# Outpatient Services

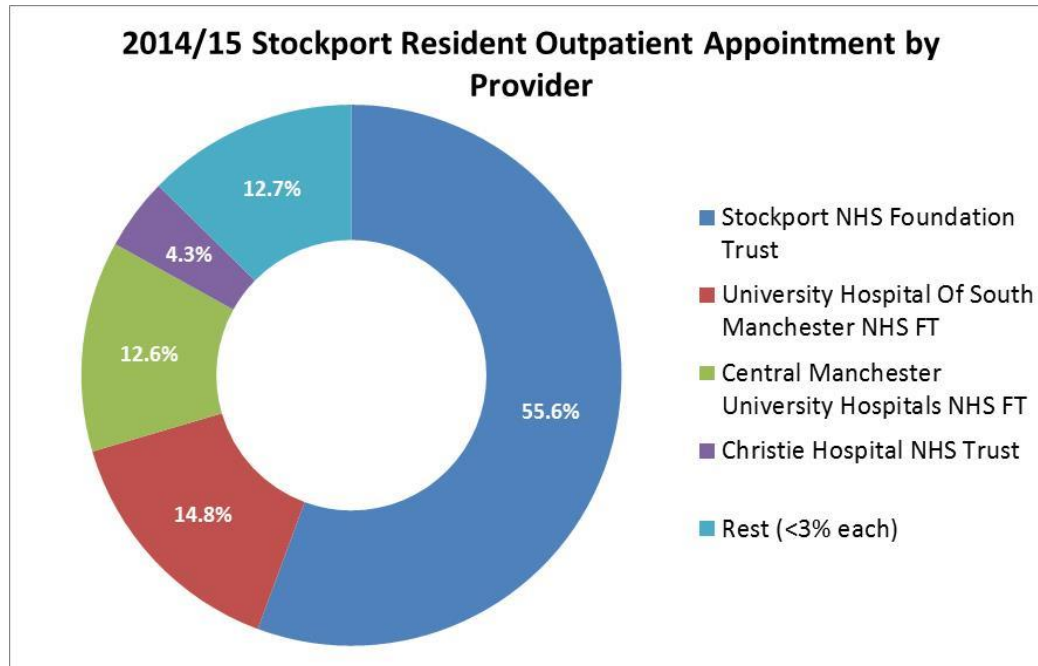


## Background

- Outpatient attendances give evidence about the non-emergency demands for acute health care.
- Analysis of attendance can give indications of the patterns of illness and of injuries and also demonstrates the use of the health service.

## Summary

There are around 547,800 outpatient appointments made by Stockport residents each year of which around 483,600 are attended.



56% of these appointments are made at Stockport NHS FT, with a further 15% at South Manchester, 13% at Central Manchester and 4% at Christie. 12% of appointments are made at a range of other trusts, but with no trust having a more than 3% of the total.

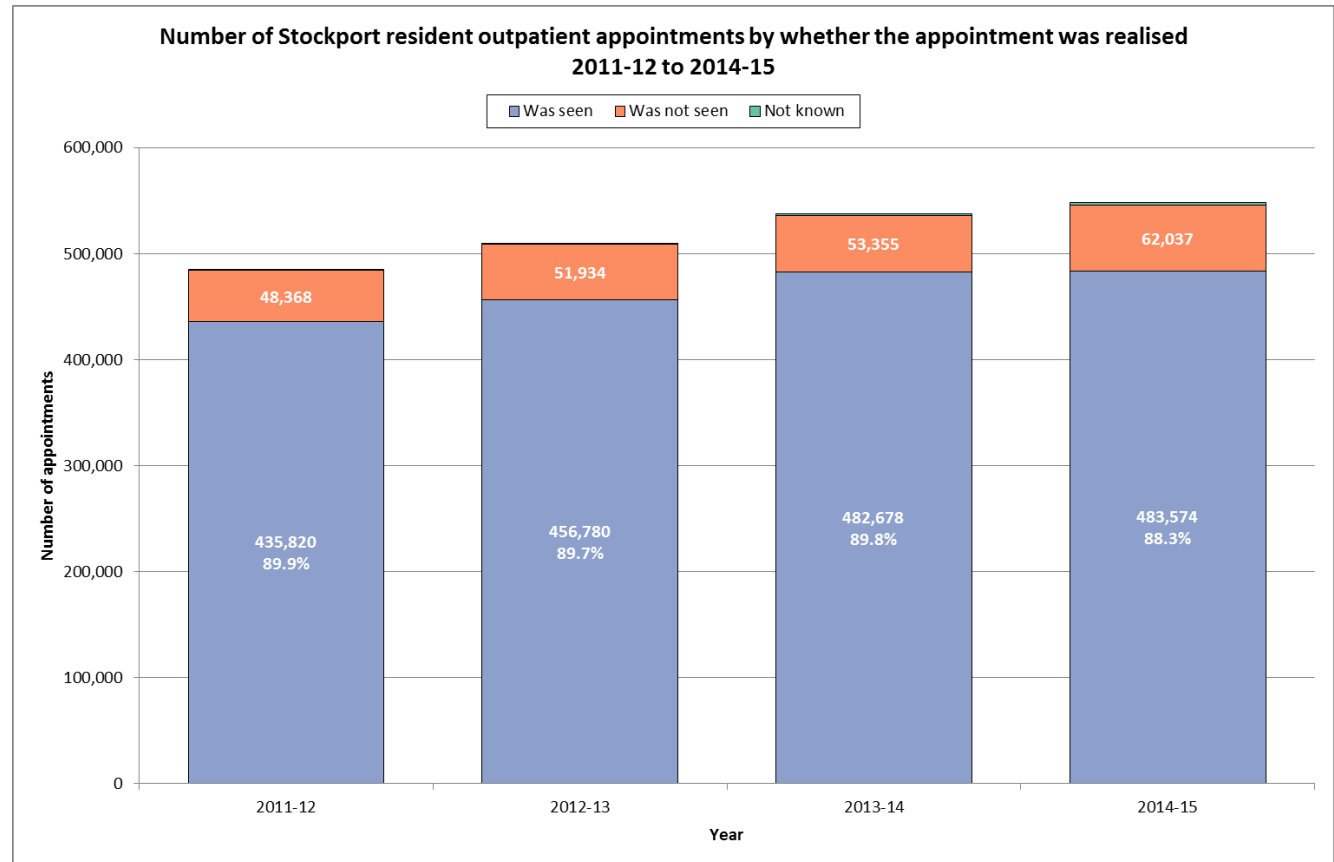
Like admissions and A&E attendances, the pattern of outpatient service use varies across the borough so that in Heald Green and Gately fewer than 15% of appointments are at Stockport, and 55% are at South Manchester.

# Outpatient Services - trends over time



Trends for outpatient services are only available for the last four years, but show a steady increase.

Benchmarking data for activity volumes are not readily available so direct comparisons to other areas are not possible on this measure – however national trends have also been for an increase in demand.

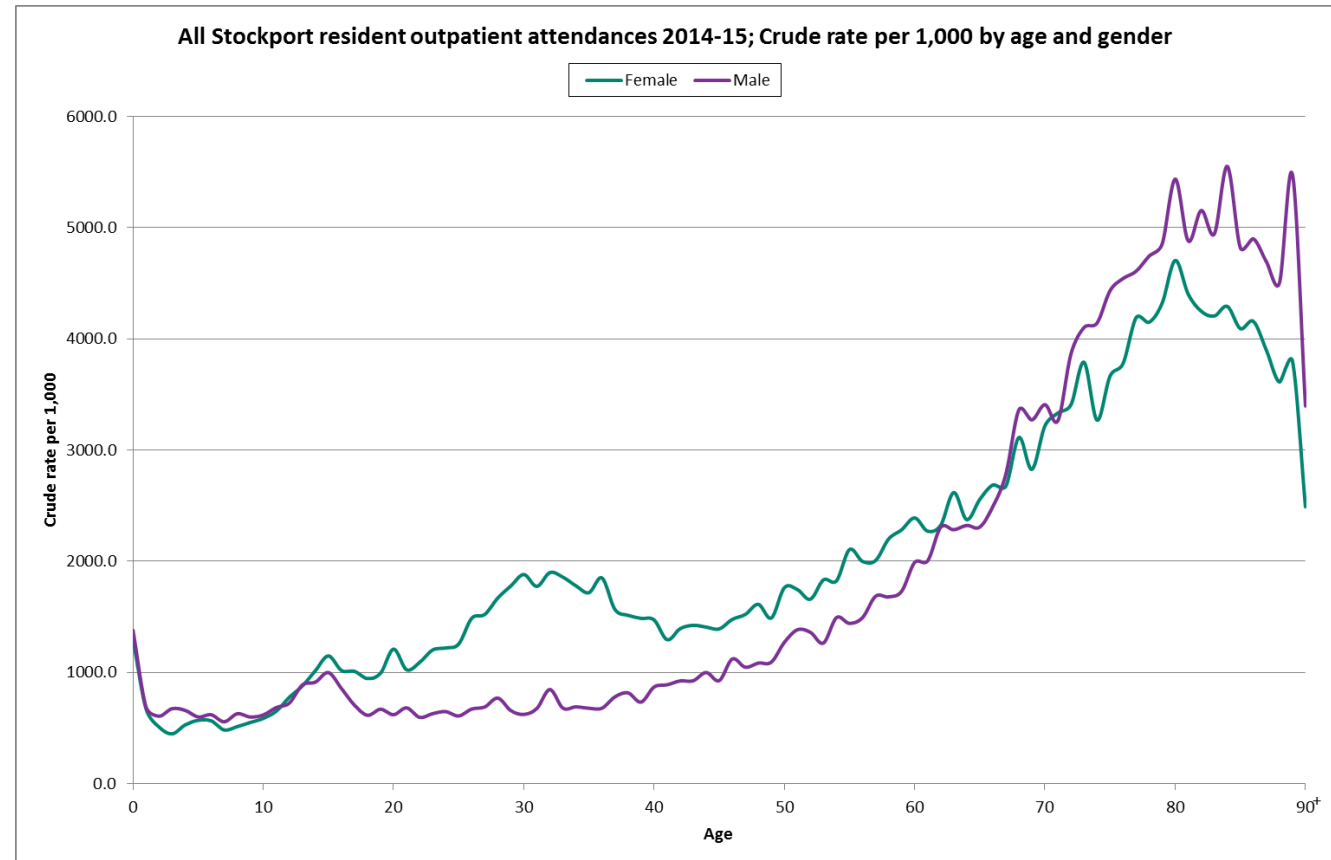


# Outpatient Services – age and gender



Trends show that as for admissions and A&E attendances outpatient attendance rates increase with age so that on average **people in their 80s have more than 4 attendances each year.**

Gender trends show that from the late teens to age 70 females have higher rates of attendances than males, and which point the trend switches. The largest gender gap is between the ages of 25 to 40 and again are likely to be related to pregnancy or gynaecological causes.



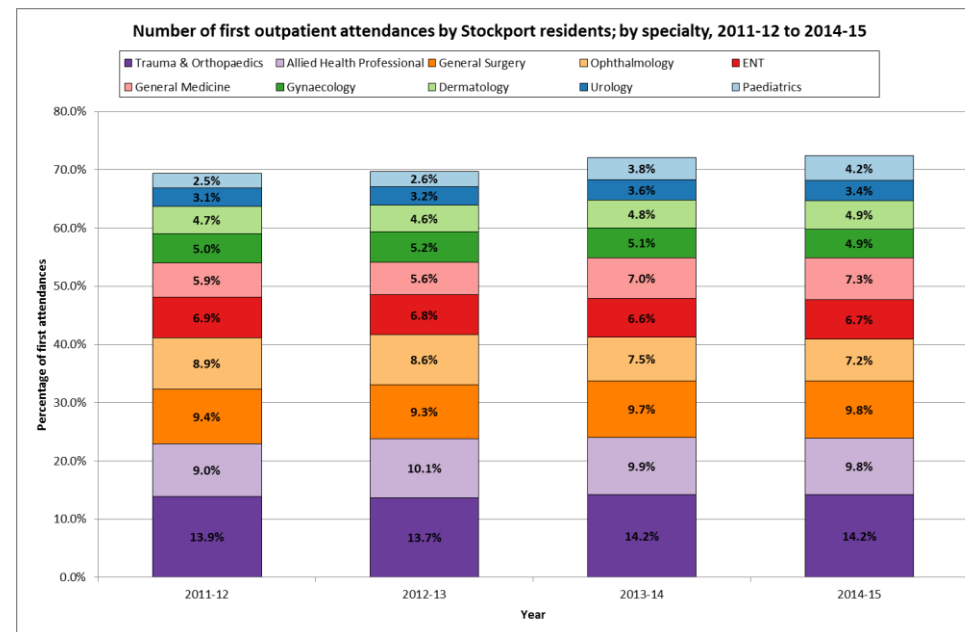
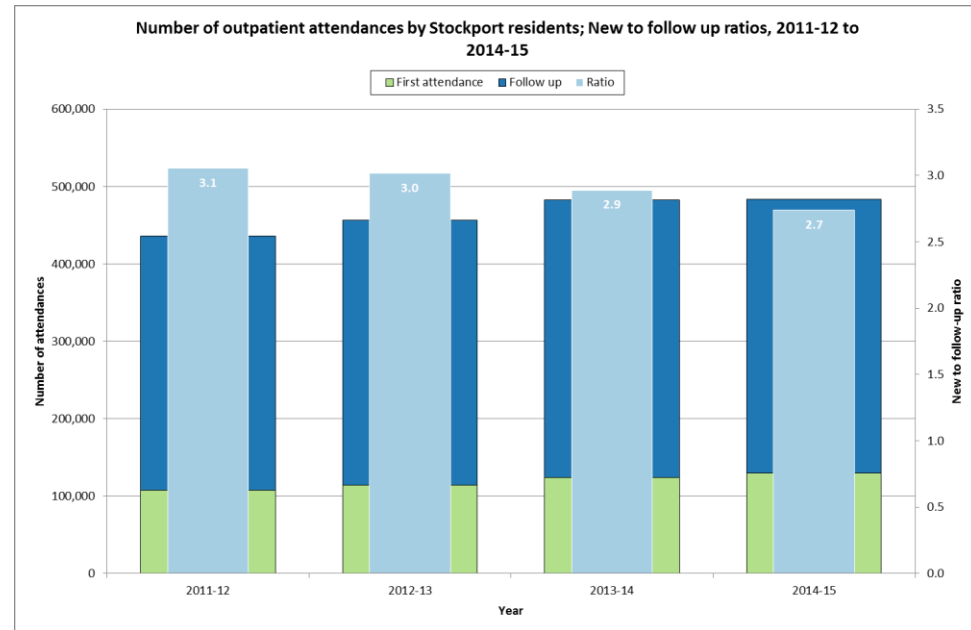
# Outpatient Services – follow up and diagnosis

For those outpatient appointments which were attended the trends shows that for **every first attendance there are on average a further 3 follow up attendance in Stockport**. This ratio has been gradually declining over time, but is still a significant pressure in the system.

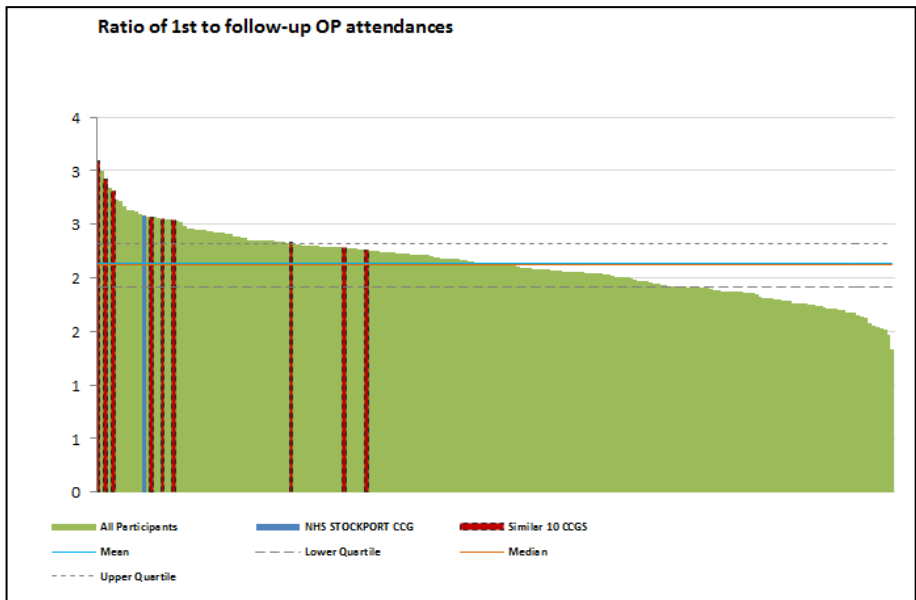
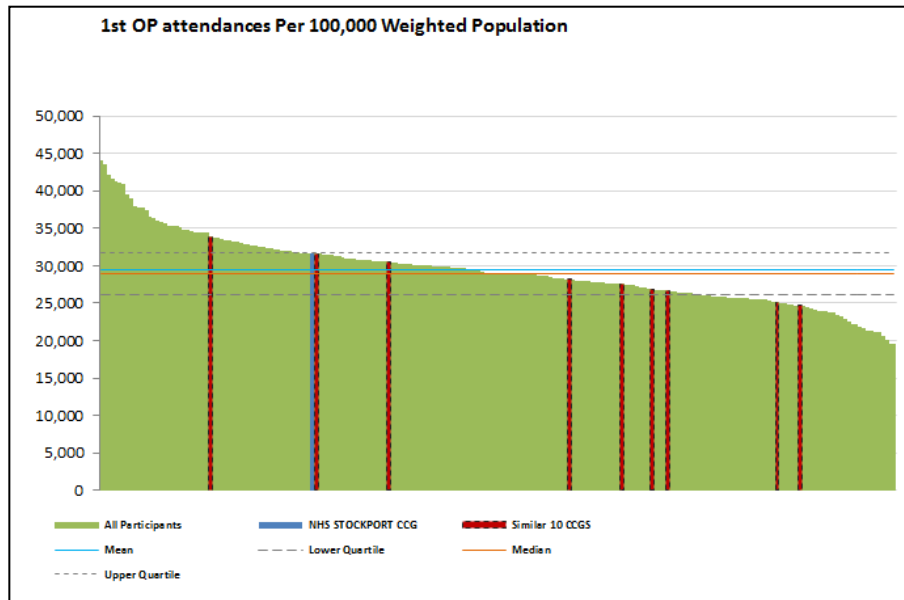
Analysis of the speciality of the first appointments attended shows that:

- 14% of attendances are due to trauma & orthopaedics
- 10% for
  - allied health professionals
  - general surgery
- 7% for
  - Ophthalmology
  - ENT
  - General medicine

Further information on the reasons for attendance are not available from this source.



# Outpatient Services - benchmarking



Stockport CCG value **31,618**  
 Similar CCGs mean **28,341**  
 National mean **29,400**

Stockport CCG value **3**  
 Similar CCGs mean **3**  
 National mean **2**

Benchmarking analysis shows that Stockport has high rates of first outpatient appointments, ranking within the top quartile and has **especially high rates of 1<sup>st</sup> to follow up outpatient ratios** – ranking amongst the highest nationally on this indicator. Analysis undertaken by NHS England suggest that there is a scope for at least £2million savings if the follow up ratio in Stockport was the same as the 25<sup>th</sup> percentile nationally – although as we have seen rates are now falling.

## Background

- Services provided in the community need to be effective and efficient and are a vital part of healthcare in the NHS. Recently the way that community services are provided has undergone change due to the Transforming Communities initiative.
- The challenge is to commission services with a clear strategy with quality improvement and the reduction of inequalities at its core.
- Importantly local knowledge and information are needed so that the provision of these services is the most appropriate to meet local needs.
- Throughout the stages of life the demand for different services varies.
- The population characteristics of different areas will impact on the need for services.
- The data presented here is from the local community services system Lorenzo and shows the total number of contacts for the service.
- There are a wide range of community health services provided in Stockport and data is shown for the services with the highest counts of contacts with the service.

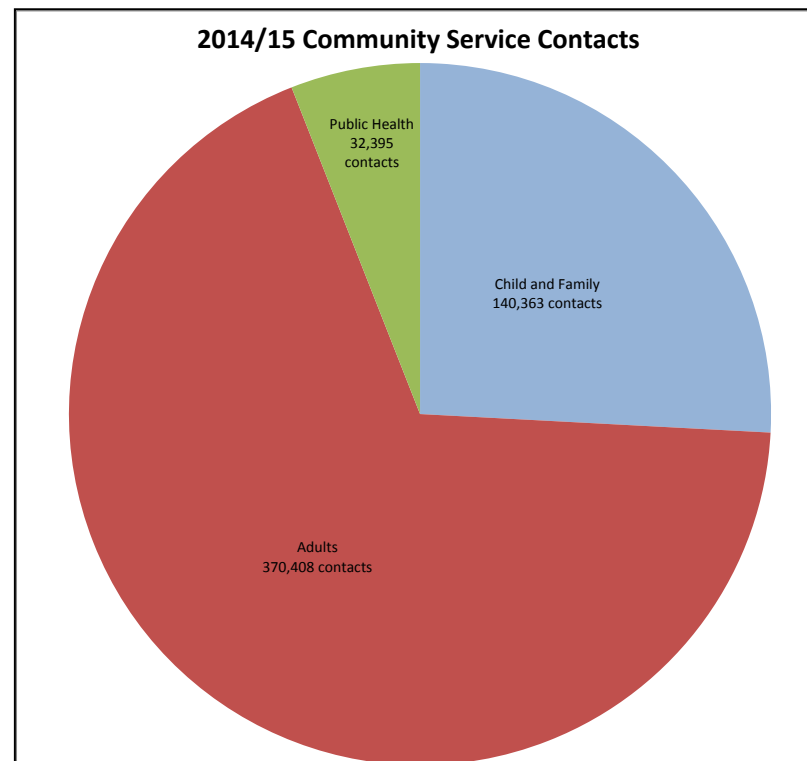
## Summary

There are approximately 543,000 contacts for community services provided by Stockport NHS FT to Stockport patients each year, with a caseload of around 65,000 patients.

The majority of contacts are in adults services, accounting for more than 65%, around a quarter of contacts are for children's and family services, with the remainder for preventative public health services for adults.

It should be noted that some of the children's services also include public health and preventative elements.

Comparison data for other areas is not available so it is not possible to assess the relative performance of the Stockport system.



# NHS Community Services - Stockport NHSFT



Theme	Service	2012/13 Contacts	2013/14 Contacts	2014/15 Contacts
Child and Family	Health Visiting	80,225	75,459	72,418
Child and Family	School Nursing	44,754	17,393	28,275
Child and Family	Child Speech and Language Therapy	15,808	17,453	26,853
Child and Family	Children's Physiotherapy	5,867	5,771	5,898
Child and Family	Child Occupational Therapy	5,149	5,170	5,057
Child and Family	Other services	3,875	3,909	1,862
Adults	District Nursing	215,894	226,327	245,618
Adults	Podiatry	53,446	49,840	47,860
Adults	Primary Care Physiotherapy	19,880	19,530	20,747
Adults	Community Rehabilitation	8,268	8,693	8,855
Adults	COPD Nursing	4,708	4,631	6,928
Adults	Orthopaedic Assessment Service - Tier 2	5,213	6,026	6,264
Adults	Diabetes	3,318	3,646	6,201
Adults	Tissue Viability Nursing	7,256	5,684	5,952
Adults	Specialist Palliative Care	4,870	5,431	5,903
Adults	Other services	18,123	14,360	16,080
Public Health	Community Development Service	15,695	12,618	10,101
Public Health	Contraception & Sexual Health	14,966	11,916	9,571
Public Health	Healthy Stockport (Life Style Services)	6,719	5,350	7,235
Public Health	Other services	4,616	5,284	5,488

This table shows the trends in volumes of contacts over the last three years

**District nursing is the largest service, followed by health visiting, podiatry and school nursing.**

Trends show a general increase in activity, although there are some variations by service, most likely due to coding changes or changes in practice.

# Mental Health Services

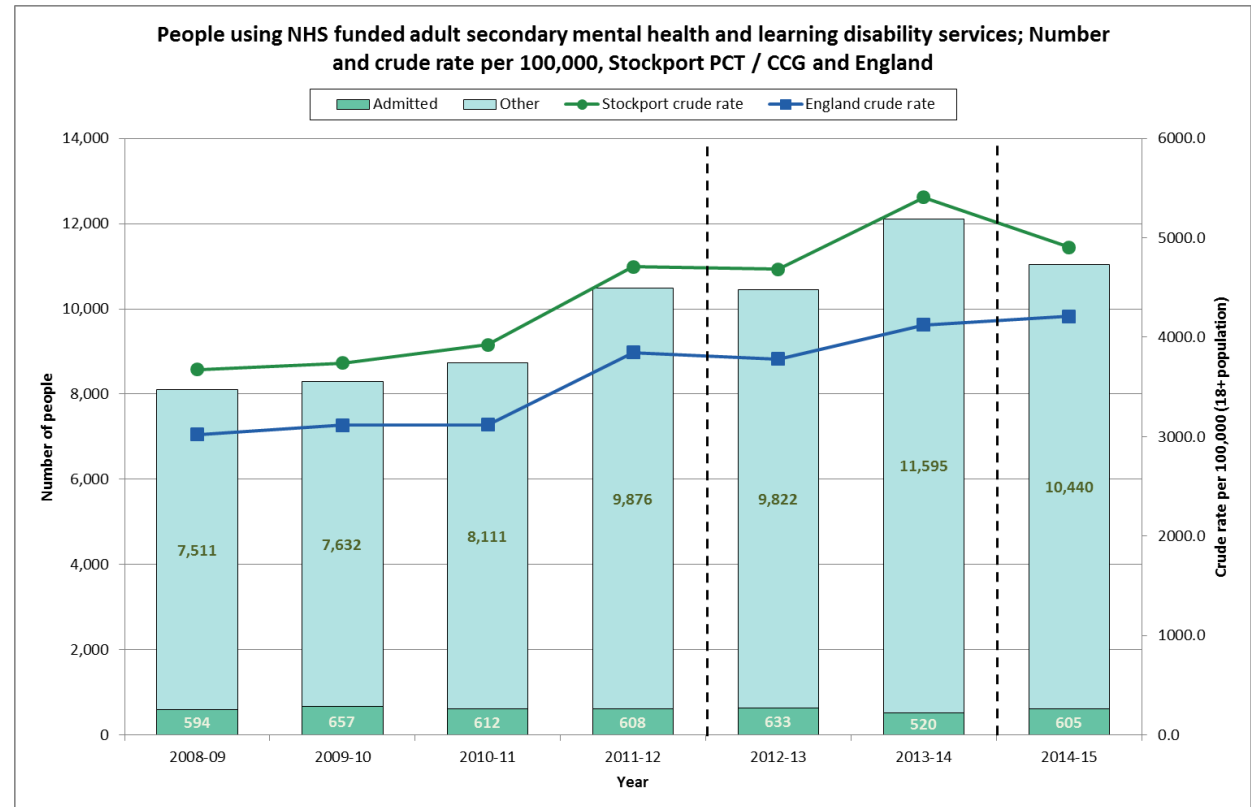
## Background

- Mental health services are provided in both acute and community settings.
- Inpatient admissions, ED attendances and Outpatient appointments are included in the previous analysis, however community mental health services – provided by Pennine Care, are not.
- The analysis below is based on patients who attended the entire range of NHS Mental Health and Learning Disability services, out side of primary care.

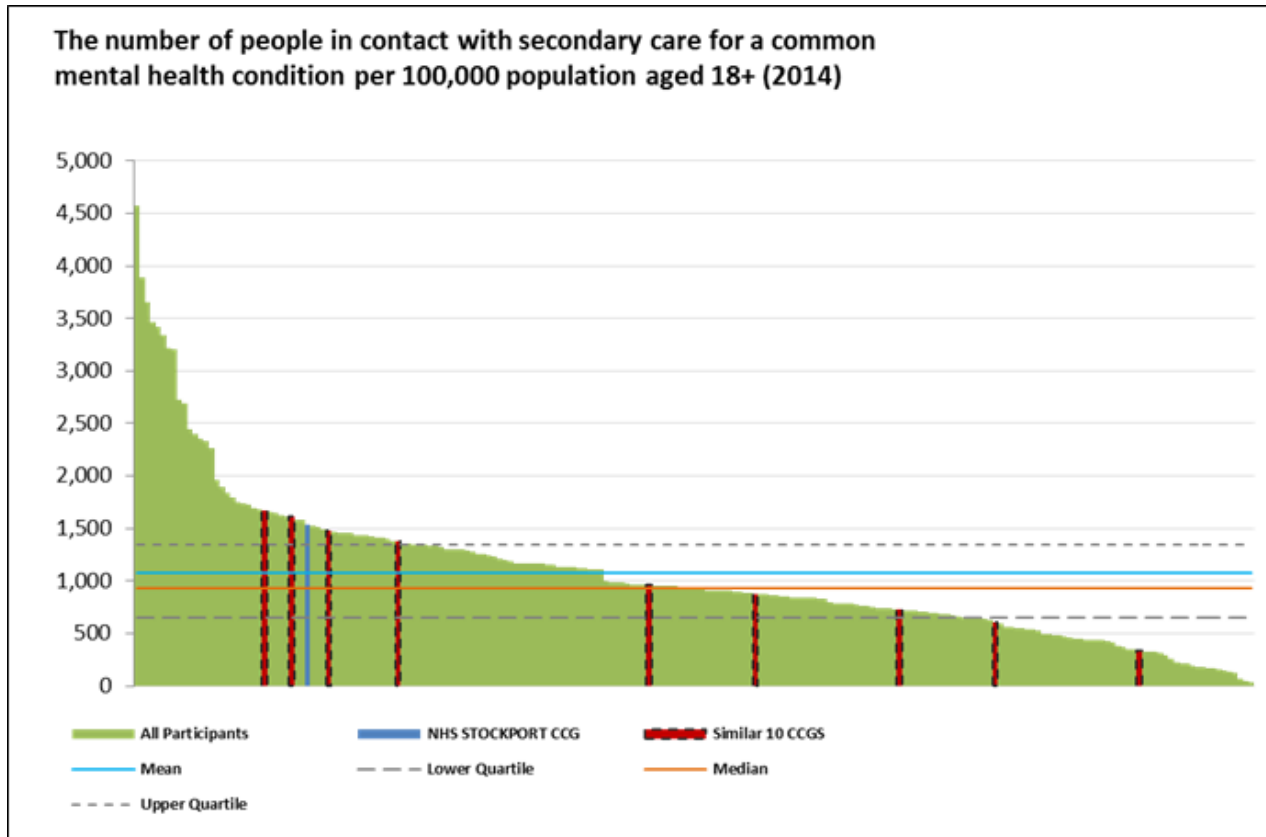
## Summary

In total, in 2014-15 there are 600 people who were admitted and 10,400 people who received outpatient or community services for mental health services.

Trends are general increasing, however there have been changes to data collections (indicated by the dashed vertical lines) which may have impacted data.



## Mental Health Services - benchmarking



Stockport CCG value	<b>1,534</b>
Similar CCGs mean	<b>1,073</b>
National mean	<b>1,073</b>

Benchmarking analysis shows that Stockport has higher rates than average of people in touch with secondary care for common mental health conditions. Evidence from more in depth profiles also shows that bed day rates for mental health and A&E attendances for psychiatric problems are also higher than average locally.

# Adult Social Care Services



## Background

- Adult Social Care Services provide vital personal and practical support to help people live their lives.
- It supports vulnerable people to maintain their independence, dignity and control.
- Clients include younger adults with disabilities and older people who need care and support, plus their carers
- Unlike NHS services people need to meet certain criteria before receiving care

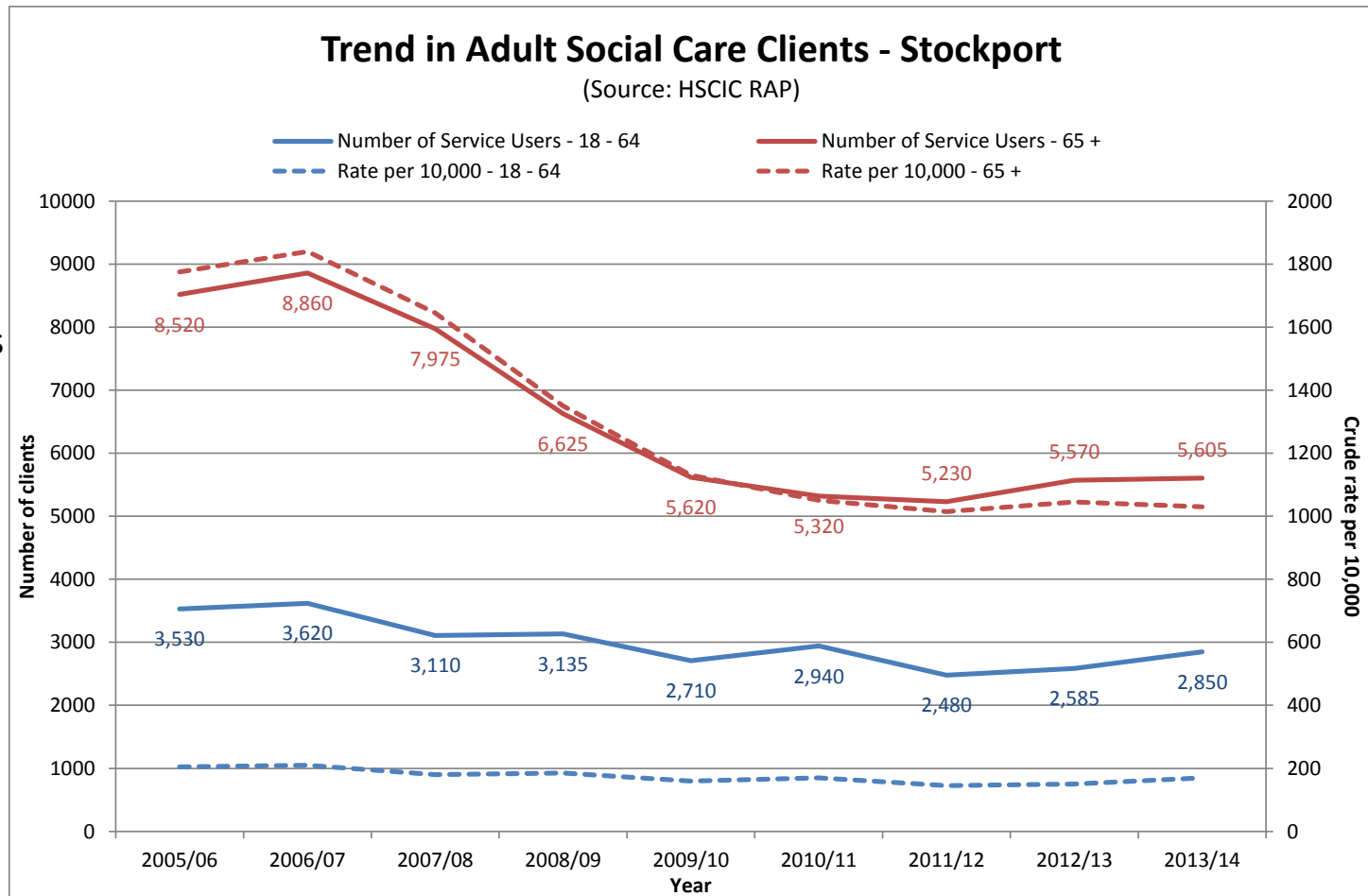
## Summary

- In 2013/14 there were 8,455 service users of Stockport Adult Social Care:
  - 2,850 aged 18-64 (1.7% of the total population)
  - 5,603 aged 65+ (10.3% of the total population)
- Of these service users
  - 6,980 used community based services (83%)
  - 1,050 were receiving residential care (12%)
  - 425 were receiving nursing care (5%)
  - 6,200 received self directed support and / or direct payments
- 855 carers received services, and a further 1,420 were provided with information.
  - 555 of these people cared for those aged 18-64 (24%)
  - 1,720 of these people cared for those aged 65+ (76%)
- 9,970 contacts for new clients were made:
  - 39% from NHS secondary care
  - 25% from NHS primary or community care
  - 14% from family, friends and neighbours
  - 7% were self referrals
  - 16% from other sources

## Adult Social Care Services – trend over time

Trends over time shows that the **number and rates of adult social care clients have fallen** from the high in 2006/07 to a low in 2011/12 – some of this due to data quality improvements, but this also reflects **changes in provision as a new service model was introduced**.

Since 2011/12 rates and numbers have begun to increase reflecting increased need in the population – this is despite changes in finances.

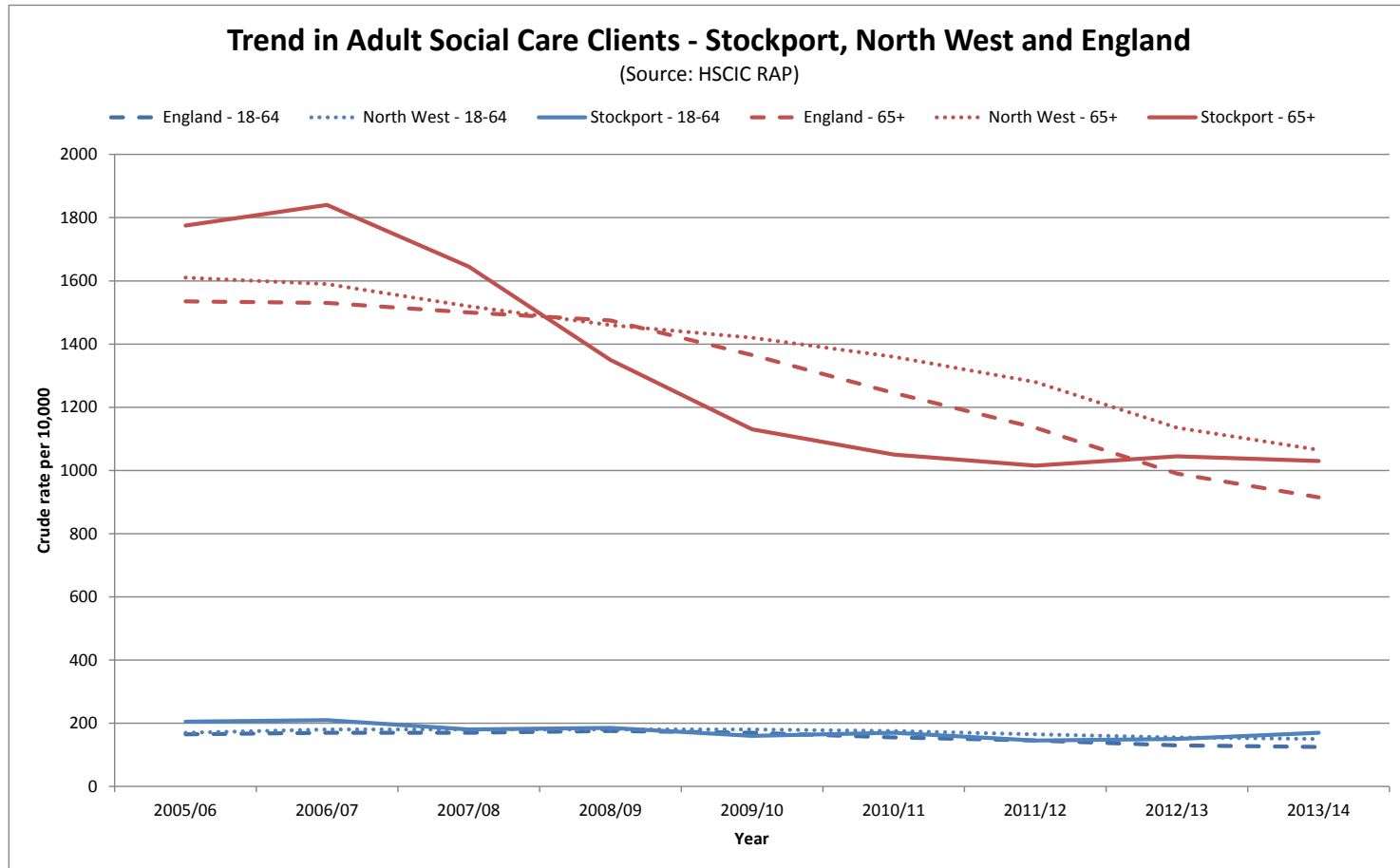


The fall in client numbers has been largest both volume and proportionally for older adults.

## Adult Social Care Services – benchmarking trend over time

Trends over time show rates also fell nationally and regionally and, unlike Stockport, are still falling. The rapid reduction in Stockport is likely down to changes in service models that were introduced, which have since stabilised.

**Stockport currently has rates of adult social care clients that are higher than the national average, but more similar than they have been historically.**



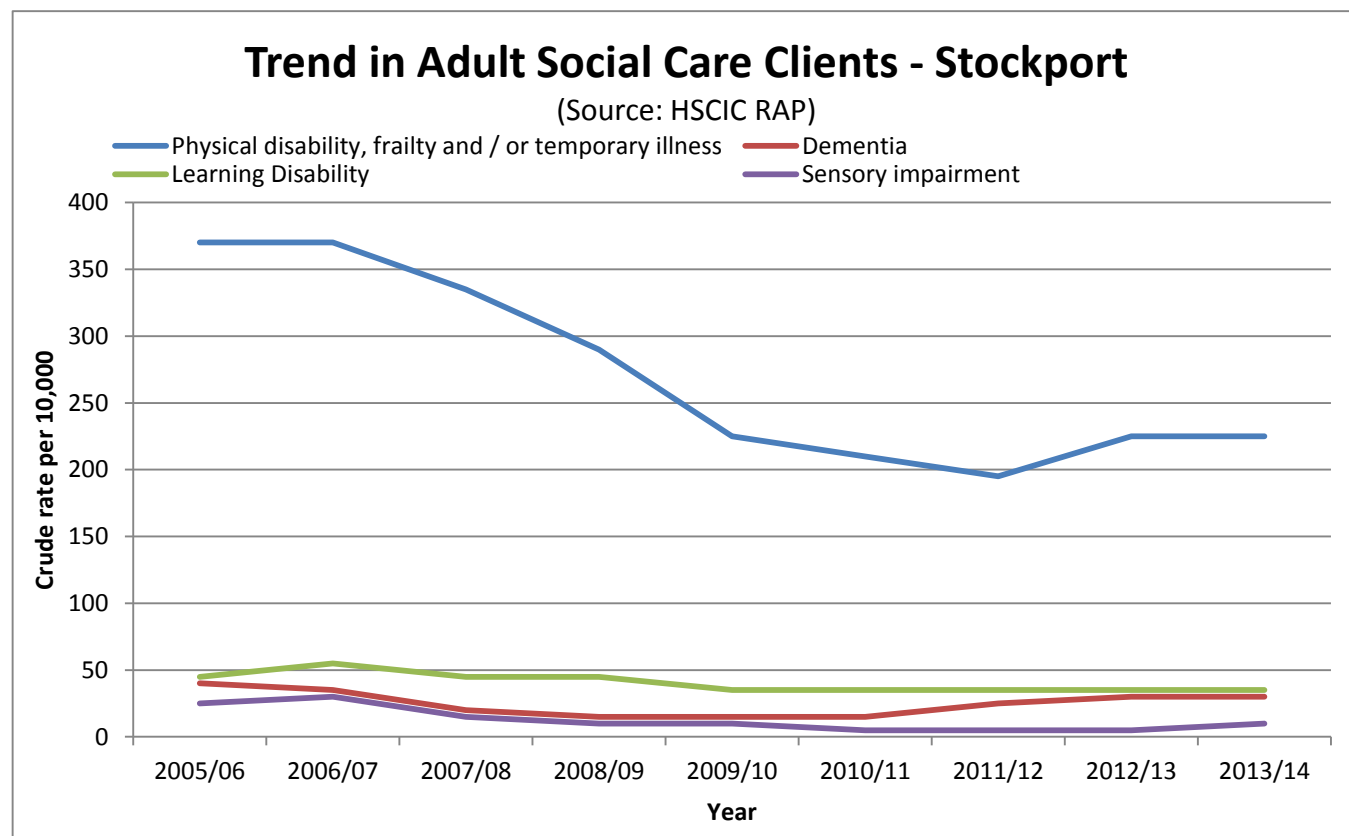
## Adult Social Care Services – trend over time



The client need profile has also changed over the last decade with a **rise in the rates and numbers of clients with needs relating to dementia.**

The biggest single need category is still physical disability or frailty.

Client need profile 13/14	Number of Clients	Proportion
Physical disability, frailty and / or temporary illness	5,015	59.3%
Learning Disability	820	9.7%
Dementia	710	8.4%
Sensory impairment	175	2.1%
Other / unknown	1,735	20.5%



# Primary Care Services



## Background

- Primary care services are provided in local communities and are often the first place of contact for health care
- There are currently 47 GP Practices based in Stockport, with some residents (<4%) also using practices in other areas (see JSNA Health Service Locations for more information)
- There are currently 69 pharmacies, 48 dental practices and 38 opticians in the area (see JSNA Health Service Locations for more information)

## Summary

Data for GP practice activity is not routinely available so analysis of long term trends is not possible, however a snapshot of activity in Stockport in 2014/15 has been collected as part of the Stockport Together baseline.

It showed there are:

- 349,499 GP appointments
- 138,728 Nurse appointment
- 114,672 Health Care Assistant appointments
  
- 92,122 out-of-hours GP contacts
- 50,592 out-of-hours nurse contacts

Data for dental activity suggest that as of 31<sup>st</sup> March 2015

- 74.4% of children aged 0-17 in Stockport have been seen by an NHS dentist in the last 24 months
- 62.7% of adults aged 18+ in Stockport have been seen by an NHS dentist in the last 24 months

National rates are 69.4% and 55.8% respectively

## Primary Care Services - prescribing

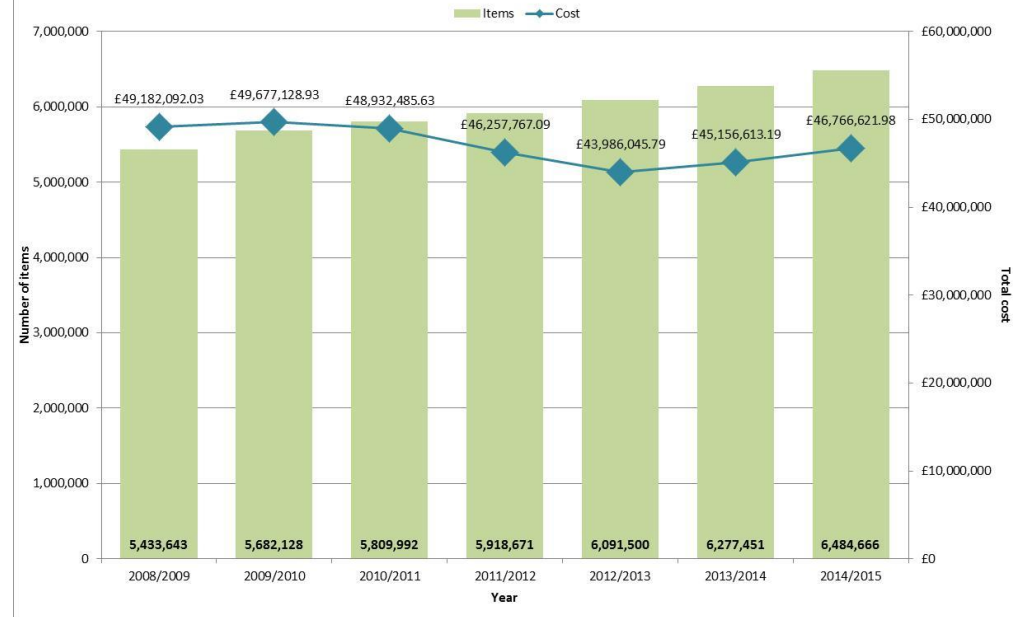
Trends for prescribing show that whilst the total cost of prescribing in Stockport has been relatively stable, the volume of items has risen steadily – this is due to the average costs of drugs reducing.

Benchmarking data from 2014/15 shows that the volume of prescribing in Stockport is higher than the national average, but is within the quartile ranges.

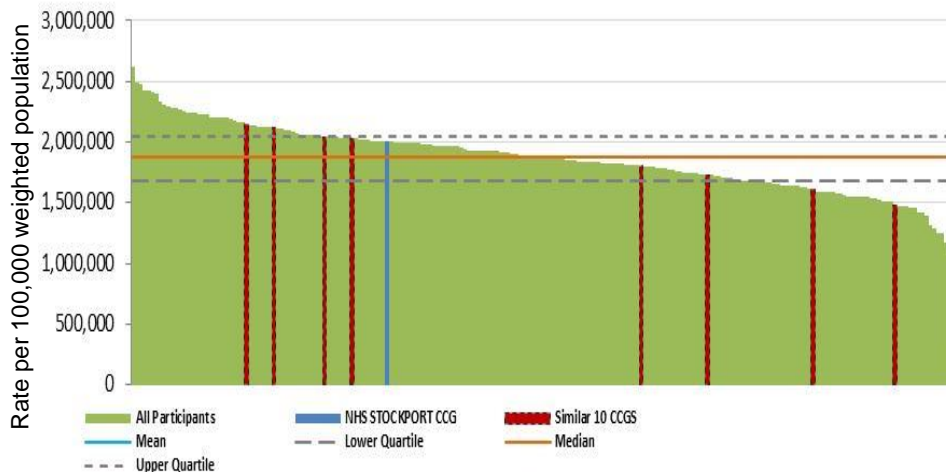
Over 20% of all prescribing is for the central nervous system, including medications for pain relief, depression, epilepsy and mental health disorders.

Prescribing for the endocrine system (diabetes), respiratory (asthma and COPD) and cardiovascular are the next most common, each at 13%.

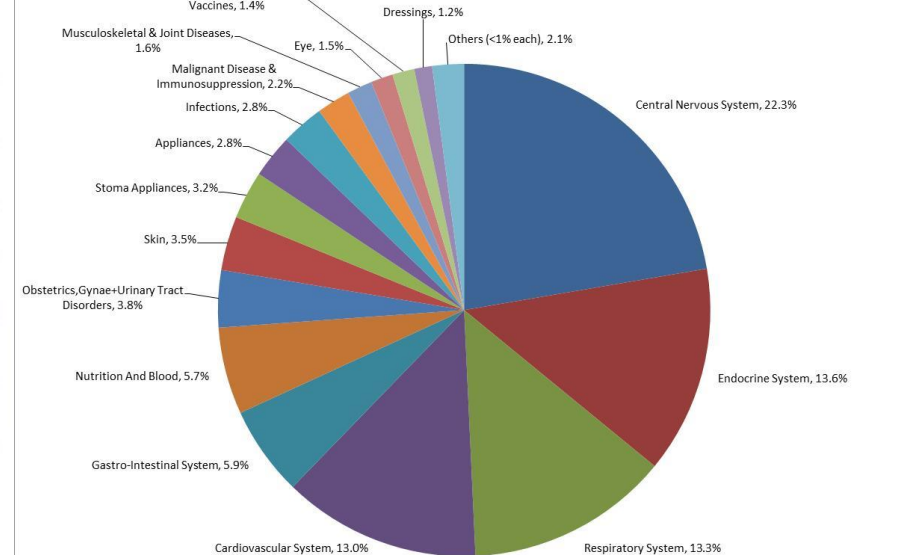
Trends in Prescribing - Stockport CCG



2014/15 Total prescribing items per 100,000 weighted population benchmarking



2014/15 Prescribing by Chapter

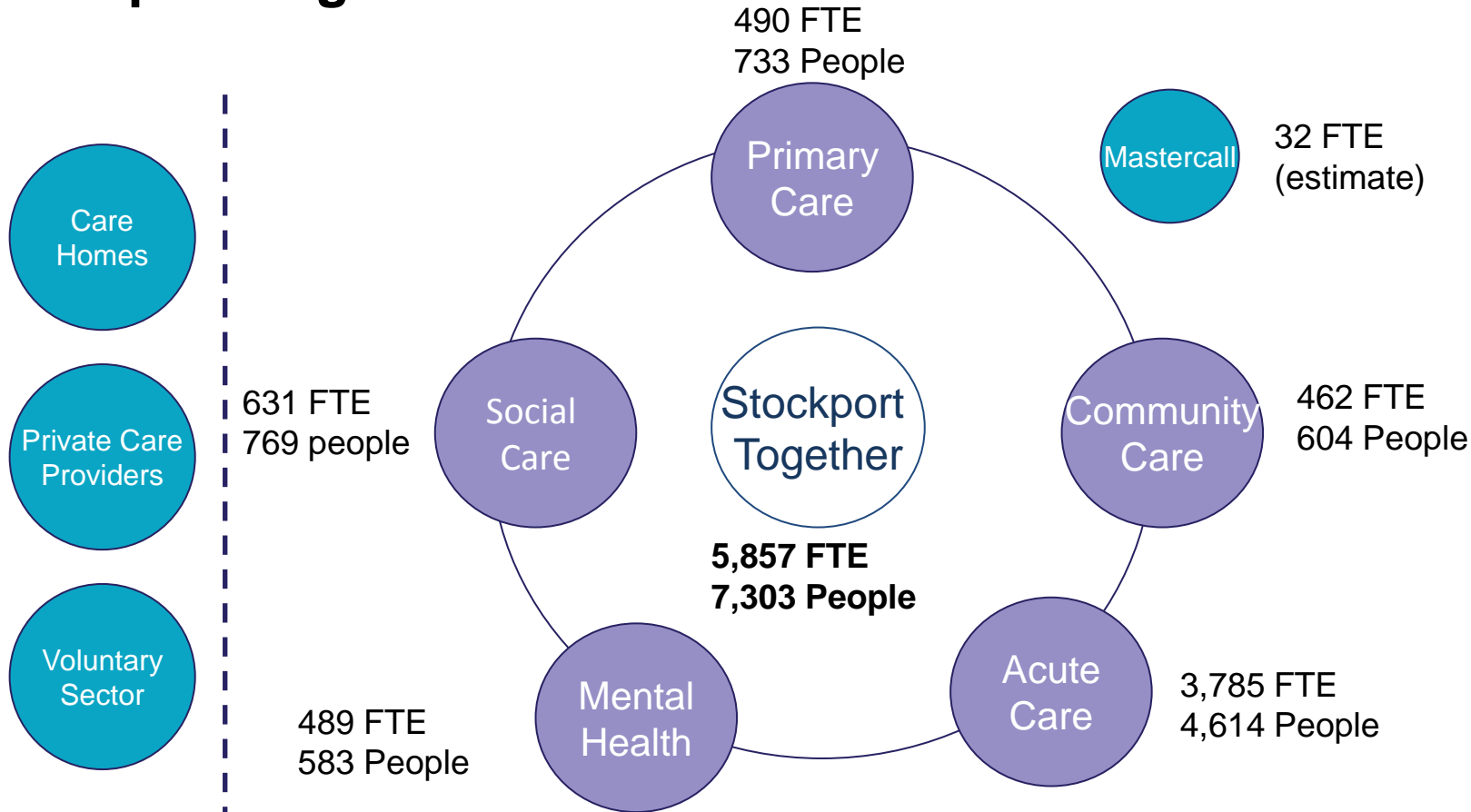


## Overall opportunities for efficiency gains (Stockport Together Priority Areas)

Indicator	Latest Value	Financial Opportunity	Volume Opportunity	Rank	Category
<b>Outpatient Appointments</b>	<b>8,629.70</b> (outpatient appointments per 100,000 population)	£2.1M	13,265	129	Clinical
<b>Emergency Admissions</b>	<b>555.18</b> (Emergency admissions per 100,000 population)	£2.0M	1,061	150	Clinical
<b>Managing Surgical Thresholds</b>	<b>62.81</b> (Operations per 100,000 population)	£218,456	99	34	Clinical

National benchmarking analysis suggests that there is significant scope for savings in both outpatients and emergency admissions, there is less scope for planned admissions – this is based on modelling the trends in Stockport against the 25<sup>th</sup> percentile performance. A JSNA analysis of the Right Care products will be undertaken in the summer of 2016 to further investigate these opportunities.

# Stockport Together Combined Workforce



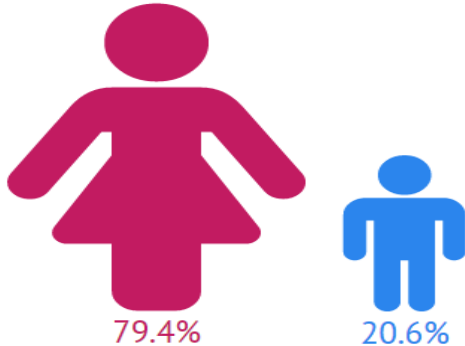
The vast majority of Health and Social Care staff in Stockport are employed by the Stockport NHS Foundation Trust (72.5%), of which almost 65% work in the hospital (acute care).

Social Care is the next biggest element of the workforce – although this figure does not include staff in private companies delivering social care.

Primary Care, Mental Health and Community services each constitute around 8% of the workforce – which explains the reactive system and need to change to enable a sustainable, preventative approach.

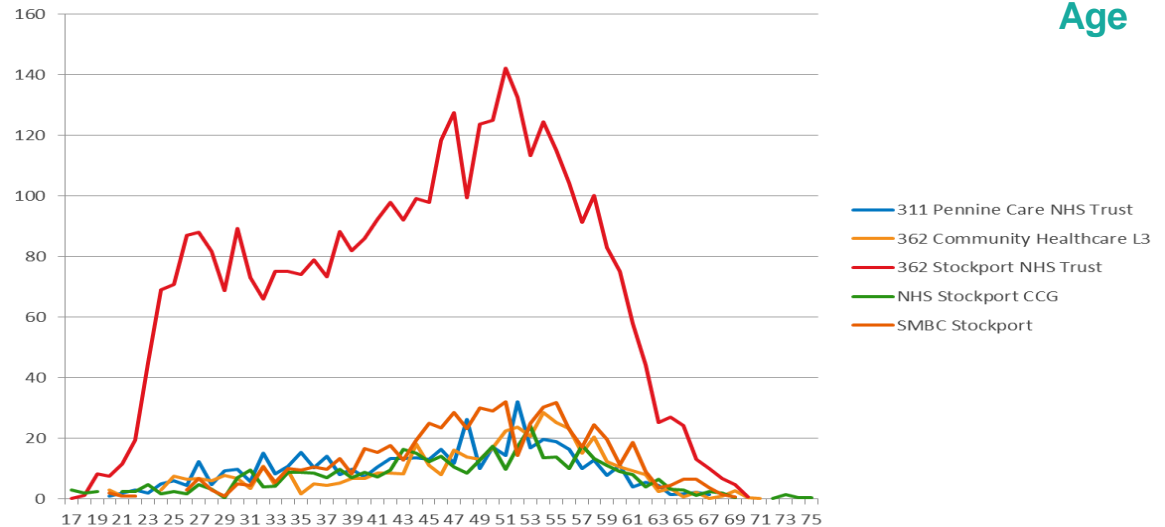
# Workforce Characteristics

## Gender



## Part-Time Status by gender

## Age



The vast majority of Health and Social Care staff in Stockport are female, and the average age of staff is in the 50s.

Primary Care has particularly high levels of part-time working, a major factor in the choice to move into this field, making the push for 7 day working in primary care particularly challenging.

Community services have the least male employees at (just 9%). The gender balance is most even in social care, but even here men make up just a quarter of the workforce.

Social care has the oldest age profile of all sectors, the youngest being in hospital services.

# Workforce by Sector Overview

	Primary Care	Community	Acute Care	Mental Health	Social Care
Organisations	47 x GP Practices	Stockport NHS FT	Stockport NHS FT	Pennine Care FT	Stockport MBC
No. employees	733	604	4,614	583	769
FTE	490	462	3,785	489	631
Part-time staff	62.75%	42.05%	49.57%	43.05%	35.37%
Salary Costs	Not known	£1.2m	£109m	£14m	£5.5m
Average age	47	48	45	46	49
Gender	84 % female - 16 % male	91 % female 9 % male	78.05 % female 21.95 % male	79.85 % female 20.15 % male	74.35% female 25.65% male
Roles	52% Administration 29% GPs 11% Nurses 8% Direct Patient Care practitioners	28% clerical workers 17.28% community nurses 14.83% community practitioners 9.58% HCAs 4.37% assistant practitioners 4.36% podiatrists 4.26% managers 2.7% physios 2.12% OTs	32.21% nursing 20.39% admin /clerical 20.03% clinical 7.66% medical / dental 7.52% estates 6.16% AHPs 3.41% prof scientific 2.1% healthcare scientists 0.53% students	33.67% nursing 27.44% clinical 14.68% admin / clerical 12.33% prof scientific 5.34% AHPs 4.51% medical / dental 1.28% healthcare scientists 0.75% estates	48.1% support workers 19.95% social workers 17.19% management 8.29% administration 3.76% customer support 1.22% estates 1.05% OTs 0.23% nurses 0.21% dietician

The large number of organisations in Primary Care (47 GP Practices) means it has the highest percentage of staff in administrative and back-office functions.