

**FREEDOM OF INFORMATION  
DISCLOSURE LOG – Quarter 4 2009/2010**

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01/10

**Biologics (Psoriasis / Crohn's Disease / Ulcerative Colitis)**

In your Trust;

1. In the 12 months ending August 2009, how many patients with **Psoriasis** have been treated with Biologics?

Total Patients

Please split by Biologic;

- . Adalimumab
- . Entanercept
- . Infliximab
- . Ustekinumab
- . Others

Of these patients, how many were started on a Biologic for the 1<sup>st</sup> time? – [include those patients who may have changed to another biologic]

2. In the 12 months ending August 2009, how many patients with **Crohn's disease** have been treated with Biologics?

Total Patients

Please split by Biologic;

- . Adalimumab
- . Infliximab
- . Others

Of these patients, how many were started on a Biologic for the 1<sup>st</sup> time? – [include those patients who may have changed to another biologic]

3. In the 12 months ending August 2009, how many patients with **Ulcerative Colitis** have been treated with Biologics?

Total Patients

Please split by Biologic;

- . Infliximab
- . Others

Of these patients, how many were started on a Biologic for the 1<sup>st</sup> time? – [include those patients who may have changed to another biologic]

We have estimated that it will cost more than the 'appropriate limit' to consider part of your request (i.e. split of patients on Biologics by individual diagnosis and the number of patients started on Biologics for the first time) as this will require manually reviewing all relevant medical records to ascertain diagnosis. We have, however, enclosed information answering part of your query. Please find below the 'raw data' of the number of patients who have been prescribed Biologics by a Dermatology or Gastroenterology consultant at the Trust:

**Usage of biologicals - Dermatology**  
**01/09/2008 to 31/08/2009**

Adalimumab	4
Entanercept	13

Drug Description
ETANERCEPT 50mg PRE-FILLED SYRINGE (4)
INFLIXIMAB 100mg INFUSION
INFLIXIMAB 100mg INFUSION
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN
ETANERCEPT 25mg PRE-FILLED SYRINGE
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN
ETANERCEPT 50mg PRE-FILLED SYRINGE (4)
ETANERCEPT 25mg PRE-FILLED SYRINGE
ETANERCEPT 25mg PRE-FILLED SYRINGE
ETANERCEPT 50mg PRE-FILLED SYRINGE (4)
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN
ETANERCEPT 50mg PRE-FILLED SYRINGE (4)
ETANERCEPT 25mg INJECTION
ETANERCEPT 25mg PRE-FILLED SYRINGE
ETANERCEPT 25mg PRE-FILLED SYRINGE
ETANERCEPT 50mg PRE-FILLED SYRINGE (4)
ETANERCEPT 25mg PRE-FILLED SYRINGE
ETANERCEPT 25mg PRE-FILLED SYRINGE

Infliximab 2  
19

Usage of biologicals - Gastroenterology 01/09/2008 to 31/08/2009 Drug Description
INFLIXIMAB 100mg INFUSION
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN
INFLIXIMAB 100mg INFUSION
INFLIXIMAB 100mg INFUSION
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN
INFLIXIMAB 100mg INFUSION
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN
INFLIXIMAB 100mg INFUSION
INFLIXIMAB 100mg INFUSION
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN
ADALIMUMAB 40mg/0.8mL PRE-FILLED SYRINGE
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN
INFLIXIMAB 100mg INFUSION
INFLIXIMAB 100mg INFUSION
INFLIXIMAB 100mg INFUSION
INFLIXIMAB 100mg INFUSION
INFLIXIMAB 100mg INFUSION
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN
INFLIXIMAB 100mg INFUSION
INFLIXIMAB 100mg INFUSION
INFLIXIMAB 100mg INFUSION
INFLIXIMAB 100mg INFUSION
INFLIXIMAB 100mg INFUSION
RITUXIMAB 100mg/10mL INFUSION
RITUXIMAB 500mg/50mL INFUSION

Adalimumab 18  
Infliximab 28  
Rituximab 2  
48

INFLIXIMAB 100mg INFUSION  
INFLIXIMAB 100mg INFUSION  
INFLIXIMAB 100mg INFUSION  
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN  
ADALIMUMAB 40mg/0.8mL PRE-FILLED PEN  
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INFLIXIMAB 100mg INFUSION  
INFLIXIMAB 100mg INFUSION  
INFLIXIMAB 100mg INFUSION

**02/10**

### **Highest compensation sums paid out in 2009**

“Please provide details of the highest ten sums that your trust has paid out in the past 12 months in compensation to patients who have made a complaint against the trust.  
In each case please make clear the total amount paid to the patient, the reason for the payout, the total amount of legal fees paid and the solicitor/legal firm to whom the fee was paid.”

This information is held centrally by the NHS Litigation Authority. We have previously been asked by the NHSLA to refer requests of this nature to them. The information is in fact publicly available on their website, link as below:

<http://www.nhsla.nhs.uk/home.htm>

Information on legal fees is available within our publication scheme under Disclosure Log Q3 2009 (reference no 33/09), link to publication scheme as below:

<http://www.walsallhospitals.nhs.uk/WalsallHospitals09/AbouttheTrust/FOI.asp>

03/10

**E Procurement Questionnaire**

**Freedom of Information Act 2000  
eProcurement Questions**

These questions relate to the Trust's use of a Transactional eProcurement System (sometimes called a Purchase to Pay or Purchase Order System). It is defined as a System used to buy Goods and Services from the Trust's Suppliers that creates Purchase Orders. It is not a system used for Contract Tendering or Requests for Quotation. If you have a system that does both, these questions relate to the transactional element of the system only. If you have any additional information to support your answers, please add these to the end of the document.

Name of Trust		Walsall Hospitals NHS Trust
No	Question	Answer
1	Does your Trust use a Transactional eProcurement System? If No, please go to Question 4.	YES
2	Is the System:	
2a	Being Implemented i.e. not yet live?	NO
2b	Live and Partially Rolled Out?	YES
2c	Live and Fully Rolled Out?	NO
3	About your Transactional eProcurement System	
3a	Who is the Software Supplier for your Transactional eProcurement System? e.g. Oracle, SAP etc	Isoft - Integra
3b	Is the Transactional eProcurement System let under a standalone contract, part of an existing Framework or is it part of a contract for another Service?	Standalone
3c	If existing Framework, which one?	N/A
3d	When does the current contract expire for your Transactional eProcurement System or do you have a perpetual license?	2010
3e	What percentage of the Trust's Non-Pay Spend do you currently process through the Transactional eProcurement System?	Around 70%
3f	Is the Trust's Transactional eProcurement System integrated with the Trust's Financial Management System?	YES
3g	Is the Transactional eProcurement System available to: i. Everyone ii. Specific Devolved Buyers iii. Only the Purchasing Department	NO YES YES
4	If you do not have a Transactional eProcurement System:	
4a	Do you intend procuring one?	N/A
4b	If yes: i. In what timeframe? ii. Via an OJEU Notice, Non-OJEU Procurement or Framework?	N/A
5	What Financial Management System do you have (e.g. Agresso, CedAr etc.)?	Integra
6	Do you have a dedicated Procurement/Purchasing Department within the Trust?	YES
6a	Who is your Head of Purchasing / Procurement Manager / Person in Charge of Procurement?	David Smith
6b	To whom do they report (e.g. Head of Finance, Chief Executive etc.)?	Commercial Director

Name of Trust		Walsall Hospitals NHS Trust
7	Is your Trust a Member of any Purchasing Group, Buying Consortium or Shared Service Arrangement with other Trust or Organisation(s)?	YES
7a	If yes, which one(s)?	HPC
7b	If no, do you intend joining one or more?	N/A
7c	If you intend joining one or more, which one(s)?	N/A

Thank You for your help.

**05/10**

### **Alcohol Consumption & Elective Surgery**

I would like to make a Freedom of Information request concerning alcohol consumption and elective surgery:

1. Does the hospital do anything to actively encourage patients to reduce their alcohol consumption before elective surgery, particularly if they are heavy drinkers.

This would be based on clinical need at initial OPD assessment. Patients are assessed by means questions at pre-assessment.

2. Does the hospital ever screen patients for alcohol prior to elective surgery

Patients are not screened but questions are asked at pre-assessment.

3. Are there any circumstances under which a patient's operation would be postponed if he/she was found to be drinking at dangerous levels.

This decision would be based on clinical need on a case by case basis by Senior Consultant.



06/10

## CRB Usage

1. How many Enhanced CRB applications did you make in the period Jan-Dec 2009.

We placed 456 CRB requests during 2009

2. Do you make CRB applications directly (ie the trust is a CRB registered body), or via an umbrella company, if so what is the name of this company?

Walsall Hospitals NHS Trust is a CRB registered body.

3. Do you use an online system, or fill in a paper form?

We use a paper form for a CRB request

4. How much do you currently pay for Enhanced CRBs per application?

We paid, in 2009, £39 for an enhanced CRB check, though payment rates are set to change.

5. Who is the person (name and job title) responsible for CRB applications in the trust.

Mrs. Sandra Berns, Head of Human Resources, is the person responsible.

6. Does the trust have a policy on how long a CRB is valid, ie how long until an employee has to renew his CRB?

We follow the CRB guidance which states that it is good practice for Acute Trusts to renew a CRB every 3 years (however it is not necessary to do this). We do not actively review all staff CRB's every 3 years, however, they are renewed when an employee changes roles within the Trust.

7. How many staff are employed by the trust (substantive and temp)?

We employ 3029 employees in full-time, part-time and contract positions covering roles with a full time equivalent of 2511.23

8. How many NEW staff were employed by the trust in the period Jan-Dec 2009 (substantive and temp)?

496 Starters were reported during 2009 filling posts equivalent to 415.04FTE

**07/10**

**Maternity Unit Closures 2009**

I would like to request data on each occasion maternity units in your Trust were closed to new admissions because they had reached full capacity, or for any other reason, in the 2009 calendar year.

For each maternity unit within your Trust, please state the (a) date; (b) number of hours for which the unit was closed to new admissions; (c) the reason for the closure if available; and (d) how many women had to be sent elsewhere to give birth and which other units they were sent to if this information is available for each such closure in the 2009 calendar year (i.e. from 1 January 2009 to 31 December 2009).

The delivery suite at Walsall Hospitals NHS Trust was not closed to new admissions at any time during the calendar year of 2009.

**08/10**

**Trust paying for patients to be treated overseas (Jan 2009 – present)**

1...During the aforementioned period has the Trust ever paid for patients to be sent overseas for treatment?

2...If so how many patients has the Trust sent overseas for treatment?

3...In the case of each patient sent overseas can the Trust please state where they were sent for treatment? In each case can you identify the country, the town and the facility.

4...In each case can the trust please state the total cost of sending the patient overseas for treatment. These costs will include all transportation costs to and from the UK and costs of travel overseas. It will also include costs of any treatment carried out overseas. It may also include costs relating to the transportation of staff and equipment who had to travel with the patient. In the case of each patient can the Trust please provide a breakdown of costs.

5...In each case can the Trust identify the method of transport to and from the UK. For instance did the patient travel by air ambulance and or other specialised medical transport. Did they travel by normal civilian airliner or train. Please specify?

6...In the case of each patient can the Trust please provide a basic breakdown of their complaint/condition for which they were being treated. Can you please provide a basic description of the treatment carried out overseas. For instance was surgery involved and if so what kind of surgery. Can you briefly explain why the patient was sent overseas?

7...Does the Trust know the total amount it has spent treating patients overseas. If so can it provide a total figure for the aforementioned period. The figure will include all treatment costs, staffing costs, as well as costs of travel and accommodation.

Walsall Hospitals NHS Trust has not paid for any patients to receive treatment overseas therefore the answers to the above is 'not applicable'

09/10

**Directors and Non Executive Directors Away Days**

Please could you provide the following information under the freedom of information act. Please send any responses by e-mail to this address.

1. The total amount of money spent annually on away days for **all board members and executives** in 2006, 2007, 2008 and 2009 respectively. (Away days include any trips taken by staff, such as team building exercises, conferences, meetings, charity days, study trips, corporate trips, executive events, research trips, fact-finding trips, etc.)

1.b. For each individual trip, please itemise the cost, the purpose of the trip, the number of staff taking part, the number of executive officers taking part, the address and location travelled to, and the dates travelled.

Please find below information regarding away days attended by all Board members. No away days were recorded for the period 2008/9.

**YEAR 06/07**

<b>Supplier</b>	<b>Value</b>	<b>Description</b>
Springboard Development The Barley Mow Centre 10 Barley Mow Passage Chiswick London	4264.83	Trust Management Team Away Day 27 <sup>th</sup> February 2007 Costs include: CONSULTANCY FEE, TOTAL MATERIAL CHARGE, TOTAL TRAVEL EXPENSES DELIVERY CHARGE.
The Fairlawns at Aldridge Little Aston Road Aldridge Walsall West Midlands	2161.22	Board Development Away Day 1 <sup>st</sup> – 2 <sup>nd</sup> October 2006
	<b>6426.05</b>	

**YEAR 07/08**

<b>Supplier</b>	<b>Value</b>	<b>Description</b>
Springboard Development The Barley Mow Centre 10 Barley Mow Passage Chiswick London	2691.36	Trust Board Away Day 2 <sup>nd</sup> April 07 Costs include: COVERING PREPARATION, LEAD FACILITATOR SUPPORT FACILITATOR, TRAVEL EXPENSES
	<b>2691.36</b>	

10/10

**Maternity Complaints**

1. If you have a maternity unit within your trust how many patients or members of the public made a complaint relating to the maternity unit in the 08/09 financial year?
2. How many of these complaints made reference to (i) equipment shortage or failure, (ii) a lack of adequate staff and (iii) staff attitude or performance.

Please note that a complaint identified in Q.1 may give rise to being a complaint about one, two or all three items in Q.2 and should be recorded separately in each category.

For each complaint identified in Q.2 please provide a summary of the circumstances.

The Maternity Unit at Walsall Hospitals NHS Trust received 16 complaints over the specified time period.

The below table gives brief details of the complaints and gives the answers to question 2.

Description

		Equipment	Lack of Staff	Staff Attitude / Performance
1	Breakdown in communications and delay in Gynaecology Out Patient Clinic.			✓
2	Breakdown in communications with midwife/Unhappy that Consultant was not in ante natal clinic.			✓
3	Unhappy with delay in being able to take shower following admission/alleged delay in painkillers being given/unhappy with attitude of one of the midwives			✓
4	Inappropriate comments by staff/delay in transferring baby to Birmingham Childrens hospital,(due to pneumonia). Unhappy with arrangements for medication which was prescribed by Birmingham Childrens, and had to be taken home and brought back to hospital again by parents. Unhappy with feed times on ward.			✓
5	Breakdown in communications between Triage Midwife and patient.			✓
6	Unhappy with admission arrangements/Patient felt that there was a delay in Consultant being paged. Inappropriate remarks by staff/questioned results of ultrasound/unhappy with discharge/breakdown in communications			✓

7	Patient questioned experience of midwife/ delay in going to theatre/unhappy with staff attitude.			✓
8	Patient questioned why transferred to another hospital was necessary/Questioned delay when losing fluid/patient questioned why need for caesarean section/feels there was a breakdown in communication			✓
9	Patient unhappy with care received during labour and delivery.			✓
10	Patient felt that staff did not listen to her/unhappy with student presence at birth(despite giving consent)			✓
11	Patient felt that there was a breakdown in communications/staff attitude unsuitable/inappropriate remarks			✓
12	Delay in Ante Natal Clinic .			
13	Patient complained of staff attitude/lack of communication.			✓
14	Patient complained of attitude of Staff Nurse/felt she was given conflicting information.			✓
15	Patient felt there was a communication failure with HealthCare Asst/ Inappropriate remarks by HCA			✓
16	Lack of compassion by staff/inadequate support/delay in obtaining Health Records.			✓

12/10

Various Queries

1. Audited accounts for 2009/10 and fees paid to auditors  
The financial year 2009/10 ends in March 2010 therefore this information will not be available until mid 2010. The information will be published in the 2009/10 annual report which will be available on the Trust website.
2. Costs of running A&E 2008/9  
Cost of running A&E 08/09 £5,910,361
3. Costs of patients medication 2008/9  
Drugs spend 2008/09 was £11,381,718  
(Drugs = £10,708,335 + FP10's = £673,383)
4. Firm responsible for patient meals and costs 2008/9 (*already released – 72/09*)  
This information is available within our publication scheme under Disclosure Log Q3 2009 (reference no 72/09), link to publication scheme as below:  
  
<http://www.walsallhospitals.nhs.uk/WalsallHospitals09/AbouttheTrust/FOI.asp>
5. Firm delivering groceries and costs 2008/9  
This information is not available as the costs for groceries is not coded separately within the ledger from patient food costs.
6. Costs and suppliers for 2008/9:

The following assumptions are made within the below figures:

1, All data is sourced from crystal report. This report looks at invoices paid between 01/04/08 - 31/03/09 for specific expense codes i.e.

23700	Stationery
25800	Computer Hardware (Rev)
47703	Computer Hardware (Cap)
25702	Photocopier Rent

2, Actual charges for Stationery, Computer Hardware and Photocopier Rent have been taken from the ledger as the invoice report will include old year charges (accrued invoices) and will thus not match.

3, Ledger figure will also include NHS Logistics feeds and other feeds not included in the invoice download as these are charged against control codes.

4, There is a likelihood that some of the expenditure against the above identified codes may not relate to there subjective category. i.e. not ALL of the stationery is stationery etc.

5, FOI request asks specifically for computer purchases, we do not separate the purchase of PC's from computer hardware specifically therefore only the value of computer hardware has been provided.

a. Stationery

Schedule of Suppliers with Invoices being charged to Stationary (23700) in 08/09

Sum of Invoice Value	
SUPP_NAME	Total
3M UNITED KINGDOM	3,088
4IMPRINT DIRECT LTD	2,841
ACORN PACKAGING SUPPLIES LTD	226
AFPP LTD	133
ALEXANDRA WORKWEAR LTD.,	48
ARGOS A/C	744
BADS DIRECTORY ORDERS	13
BAYER HEALTHCARE	133
BCH NHS TRUST	20
BDA PAEDIATRIC GROUP	138
BENMOR MEDICAL LTD	88
BINLEYS	80
BIOMERIEUX UK LTD	1,591
BIOTECH SCIENCES LTD	62
BIRMINGHAM OPTICAL GROUP	136
BLACK COUNTRY BINDING	152
BLISS	17
BLITHE COMPUTER SYSTEMS LTD	846
BOC LTD(MANCHESTER)	363
BRITISH ROTOTHERM CO LTD	104
BROOK PUBLICATIONS	51
BSCCP	450
BT PLC	421
BUSINESS DICTATION LTD	5,122
CALE BRIPARC LTD	409
CAMB & PETERBOROUGH MENTAL HEALTH	1,000
CARDIO ANALYTICS LTD	277
CAVALIER LABELS & BUSINESS SYSTEMS	239
CDI DOCUMENT MANAGEMENT LTD	960
CELLPATH PLC	120
CERBERUS SERVICES LTD	1,424
CHARTRITE LTD	50
CLARITY GAZEBO LTD (SEE ROTADEx)	828
COLEMANS SOLICITORS	25
CREATIVE MARKETING SERVICES	7,016
DARLASTON PRINTERS LTD	329
DARLASTON TYPEWRITER CO LTD	123
DATASAVE	997
DELL COMPUTER CORPORATION LTD	117
DIABETES UK	110
E.T.C. ELECTRICAL SUPPLIES	210
EA GROUP UK LTD	3,753
EBSCO SUBSCRIPTION SERVICE	100
EMAP COMMUNICATIONS	469
EMC ADVERTISING GIFTS	289
END TO END LABELS	43
ERLAM MCKENDRICK LTD	38

ESR CONNECT LTD	2,490
EUROTEK OFFICE FURNITURE LTD.,	255
FEBROMED GmbH & CO. KG	1,175
FOCUS MEDICAL SERVICES	20,756
FOREMOST SIGNS LTD	303
GE MEDICAL SYSTEMS	17,576
GLOUCESTERSHIRE HOSP NHS FOUNDATION TRUS	1,722
GODFREY SYRETT LTD	187
GREENHAM TOOL CO LTD	34
GSM PRINTER AND LABEL SYSTEM LTD	65
H JENKINSONS &COMPANY LTD	236
HAAG-STREIT UK LTD	602
HARLOW PRINTING WORKS NORTHERN	681
HEALTH EDGE SOLUTIONS	73
HEARTLANDS BUSINESS GIFTS LTD	482
HENDERSON BIOMEDICAL LTD	932
HENLEYS MEDICAL SUPPLIES LTD	1,873
HOBBS REPROGRAPHICS PLC	2,436
HOME OFFICE WORK PERMITS	1,000
HOSPITAL METALCRAFT LTD	681
HSE BOOKS	84
ICP COMPANY	1,124
ICS SOFTWARE SOLUTIONS LIMITED	729
ID CARD SOLUTIONS	499
IMAGESTORE	263
INFALABEL LTD	106
INSIGHT	210
JENCONS (SCIENTIFIC) LTD	109
JFC ENGINEERING LTD	691
JOHN SNOWDON PHOTOGRAPHY	430
JONES & BROOKS LTD	1,439
L G DAVIS (STATIONERS) LTD	5,392
LANGLEY BUSINESS SYSTEMS LTD	58
LEICA BIOSYSTEMS PETERBOROUGH LTD	224
M & J FASHIONS	209
MA HEALTHCARE LTD	97
MACFARLAN PACKAGING	151
MAGIC WHITEBOARD	100
MCP SYSTEMS CONSULTANTS	3,425
MEDIA RESOURCES	1,043
MEDICAL WIRE & EQUIPMENT CO (BATH) LTD	245
MIDAS MEDICAL STORAGE LTD	5,823
MIDCO PRINT & PACKAGING LTD	4,822
MS STORAGE EQUIPMENT LIMITED	650
MULTITONE COMMUNICATIONS SYSTEMS LTD	271
NATIONAL ASSOC OF THEATRE NURSES	48
NB DATA LTD	23
NEOPOST	429
NEWGATE TECHNOLOGY LTD	175
P.M. LABELS	136
PANELWAREHOUSE.COM	193
PEN GROUP REGISTER OF BDA	40
PH LABELS LTD	2,865
PLUMTREE GROUP LTD	1,197
PRINTWORKS	12,079



PROBRAND LTD	3,167
PRONTAPRINT	705
QUALITY HEALTH MANAGEMENT CONSULTANTS	2,992
QUESTMARK LTD	225
R K BURT & CO LTD	37
RESUSCITATION COUNCIL (UK) TRADING LTD	1,070
RICHARD COYNE	386
RNID	698
RR DONNELLEY	421
SAFEGUARD BUSINESS SYSTEMS	2,136
SCAN COIN-OMSER UK LTD	2,227
SECURITY PRINTING & SYSTEMS LTD	1,014
SEE 018894/00	95
SETON LTD	88
SOUNDBYTE SOLUTIONS	85
SPECTRUM PRINT DIRECT	5,180
STAMPS DIRECT LTD	1,570
STORWELL LTD	2,473
THE BHAM CHILDRENS HOSP NHS TRUST	50
THE STATIONERY OFFICE LTD	566
THE VISUAL SYSTEM & SIGN CO	25,372
TIME SYSTEMS (UK)LTD	332
TMP WORLDWIDE LTD	34,947
TNT EXPRESS (UK) LTD	85
TOMLINSONS BOOK SERVICES	122
TRAVEL WEST MIDLANDS	5,615
TSSI LTD	1,077
UNIVERSITY OF WOLVERHAMPTON	21,631
VENRIDGE LTD	12,648
VIKING DIRECT	60
VIKING OFFICE SUPPLIES LTD	995
VILLAGE HOTEL & LEISURE CLUB	648
WAGSTAFF INTERIORS GROUP	754
WALSALL COLLEGE OF ARTS & TECHNOLOGY	205
WALSALL FOOTBALL CLUB LTD	1,397
WEBBERLEYS PRINTERS	5,673
WEST MIDLANDS CO-OP SOCIETY LTD	1,320
WILLIAMS MEDICAL SUPPLIES LTD	71
WISEGROVE LTD	133
WORKS EXPO	135
XEROX (UK) LTD	2,762
XEROX FINANCE LTD	1,165
Grand Total	277,058

NHS Logistics (Alfreton)

<b>Total Spend per Ledger 0809</b>	<b>513,957</b>
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b. Computers

[Schedule of Suppliers with Invoices being charged to Comp Hardware \(25800&47703\) in 08/09](#)

Sum of Invoice Value	
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SUPP_NAME	Total
3M UNITEK UK	170,786
AMERICANINO LTD	153
BLUEBEAM SECURITY LLP	678
BT PLC	477
BYTES TECHNOLOGY GROUP	2,964
CLADSWELL HOUSE SYSTEMS LTD	827
CLINISYS PATHOLOGY LIMITED	16,319
DARLASTON TYPEWRITER CO LTD	29
DELL COMPUTER CORPORATION LTD	224,461
EACS LIMITED	79,422
EQUANET - AUTOFAX ORDERS	1,437
EXTRION LIMITED	2,000
HULBERT DENTAL ICT	17,847
ILLUMIT	5,750
MILLBECK COMMUNICATIONS LTD	40
MISCO COMPUTER SUPPLIES	5,321
NCC GROUP	840
ORANGE NHS SALES	557
ORANGE PCS LTD	279
ORION HEALTH LTD	61,635
PAMSOFT SOFTWARE GMBH	520
PARITY MEDICAL	13,748
PHOENIX NETWORK COMMUNICATION LTD	259
PROBRAND LTD	31,337
QA-IQ SLOUGH CENTRE	5,460
ROCHE AUDIO VISUAL	116
SWITCHSHOP LIMITED	3,203
VENRIDGE LTD	2,291
VODAFONE	118
<b>Grand Total</b>	<b>648,872</b>

Capital (47703) per ledger 0809 300,750

Revenue (25800) per ledger 0809 117,753

<b>Total Spend per ledger 0809</b>	<b>418,503</b>
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c. Photocopiers

Schedule of Suppliers with  
Invoices being charged to  
Photocopier Rent (25702)  
in 08/09

Sum of Invoice Value	
SUPP_NAME	Total
CANON (UK) LTD	16,959
XEROX (UK) LTD	14,470
XEROX FINANCE LTD	20,316
<b>Grand Total</b>	<b>51,745</b>

<b>Total Spend per Ledger 0809</b>	<b>43,450</b>
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d. All medicines

See response to question 3 above.

7. Amounts refunded to patients in transport fares 2008/9

- a. Are checks made on patients who are on benefits who receive refunds on fares?
- b. Are fares / tickets costs checked before payments are made?

The Trust does not, as a rule, refund patients travel costs

8. Are Halal foods provided?

Yes, the Trust does provide a Halal menu for patients

9. How many of the following does the Trust have? What are the purchase costs? What are the names of the suppliers?

a. CT Scanners

The Trust currently has 1 GE CT Scanner - £450K

b. MRI Scanners

The Trust currently has 1 MRI scanner on site however this scanner is not a Trust asset the Scanner and Service is provided by In Health

c. PET Scanners

None

10. Does the Trust provide the following for NHS patients?

- a. Cancer treatment
- b. Heart operations
- c. Knee & Hip joint replacements

The Trust provides all of the above for NHS patients.

11. Does the Trust use generic medicines rather than branded medicines to save on costs?

The pharmacy department substitutes all branded medicines with generic medicines except where there is a demonstrable difference in clinical effect between different manufacturer's versions of the formulation. In such cases, the patients would always receive the same brand.

**13/10**

**Feng Shui consultants & courses**

In the period 1.4.06 to 30.9.09 please state on how many occasions your trust has paid a Feng Shui consultant or paid for a staff member to attend a Feng Shui course?

For each of these occasions state when the payment was made, who the payment was made and provide documentation you hold which explains either the advice that was provided or the nature of the course that was attended. Also provide me with a cost of the advice or the course.

Walsall Hospitals NHS Trust has not, within the period stated, paid a Feng Shui consultant or paid for any staff members to attend Feng Shui courses.

**14/10**

**Internal Transport Provision**

Please could you let me know the answer to the questions below relating to the Trust's internal transport provision for the likes of internal mail, pathology specimens, sterile services department, electro-biomedical engineering, pharmacy, patient records and stores.

1. Who is your current provider?
2. How much do you pay for the services per year?
3. When was the contract/service level agreement last market tested to ensure best value?
4. Who is the person(s) responsible for such transport and what are their postal, phone and email addresses.

Internal transport for all services listed above are provided in house.

The person within the Trust with overall responsibility for internal transport is our Commercial Director. Contact details as below:

David Lawson  
Commercial Director  
Walsall Hospitals NHS Trust  
Manor Hospital  
Moat Road  
Walsall  
WS2 9PS

Email: [dave.lawson@walsallhospitals.nhs.uk](mailto:dave.lawson@walsallhospitals.nhs.uk)

All Walsall Hospital NHS Trust employees are contactable by name or job title via our main switchboard (01922 721172).

16/10

### Non medical staff access to medical records

I am writing to obtain information about the access to confidential health records by non-medical personnel within hospitals funded and controlled by Walsall Hospitals NHS Trust.

To prevent confusion I define non-medical personnel as any member of staff not directly involved in the treatment of patients – namely administrative staff - including medical secretaries, records staff and clinic and ward clerks. Therefore all types of doctors (including medical directors), nurses, midwives, pharmacists, medical students and so forth are exempt from this FOI request.

To outline my query as clearly as possible, I am requesting:

1. The total number of non-medical personnel working within hospitals funded and controlled by Walsall Hospitals NHS Trust who have immediate access to confidential medical records.

My definition of access is being able to see at least a patient's full name, date of birth and recent medical history. I define immediate access as the ability to access medical records (hard copy or on a computer) without requiring the consent of the patient or a signature from a health professional (i.e. a doctor, nurse or similar).

Staff within Walsall Hospitals NHS Trust only access patients hard copy medical records when it is necessary for the patients care or to investigate complaints.

Access to electronic systems (PMS & Fusion) is only available following completion of the relevant training and security levels of access pertinent to particular staff groups are applied. Currently 583 non medical staff have been trained to use Fusion and 552 to use PMS (however it should be noted that staff may have attended both courses).

17/10

### Sub Arachnoid Haemorrhage

1. What is the Trust's policy regarding the initial management of patients with suspected Sub-Arachnoid Haemorrhage (SAH)?

Walsall Hospitals NHS Trust does not have a policy with regards to the above. There are, however, guidelines that are followed (a copy of which will be available on request)

2. In what proportion of cases where a head CT scan has been performed to investigate suspected Sub- Arachnoid Haemorrhage (SAH) and a negative report obtained, has a lumbar puncture then been performed in the years 2005, 2006, 2007, 2008 and 2009?

This information is not available as we do not routinely record the above information.

18/10

**Use of emollients & alginates**

We are trying to understand the usage of emollients and alginates (for dyspepsia/reflux) in secondary care, and we are seeking to ascertain the following information:

**For Emollients:**

A. The total volume of emollients used in your Trust in a specified time period

grams	Or in other units	Specify units	Time Period
70000	/	/	1 <sup>st</sup> – 31 <sup>st</sup> January 2010

B. The usage split by Department over that period (and by brand if this is possible)

Department	grams	Or in other units	Specify units	Or % of usage
Unplanned Care	45000	/	/	64.28%
Planned Care	14000	/	/	20%
Family and Diagnostic	6000	/	/	8.57%
Others	5000	/	/	7.14%

**For Alginates:**

A. The total volume of alginates (for reflux/dyspepsia) used in your Trust in a specified time period

mls	Or in other units	Specify units	Time Period
37000	/	/	1 <sup>st</sup> – 31 <sup>st</sup> January 2010

B. The usage split by Department over that period (by brand if this is possible)

Department	mls	Or in other units	Specify units	Or % of usage
Unplanned care	15000	/	/	40.5%
Planned care	11000	/	/	37.8%
Family and Diagnostic	2000	/	/	5.4%
Others	6000	/	/	16.2%

**19/10  
Consultancy Fees**

The total amount spent by *Walsall Hospitals* NHS Trust on consultancy firms in 2008/09.  
A breakdown of each project with the name of the firm, a description of the work carried out, the length of the project and the cost.  
Please provide comparative data for 2007/08 and 2006/07

**Please be advised that information for 2006/07 isn't available as the Trust only categorised consultancy expenditure from the 2007/08**

Please also note that key points below:

- All Consultancy work over £10k in value is subject to a competitive tendering exercise
- Our £170million PFI hospital redevelopment has meant our use of Consultancy has been inflated over recent years and the new hospital will open in 2010
- We have received external funding for some of the below expenditure

ORG	DESCRIPTION	2007/08	2008/09	CONTRACT TERM	NOTES
KPMG	Review of selected Specialty Services to improve contribution	£103,808.00		July 2007 - December 2007	
Conrane Consulting	Workforce Planning Programme	£56,601.00		DEC 07 - MAR 08	
KPMG	Finance Function Development Review	£54,727.88		SEP 07 - FEB 08	
KPMG	Service Transformation /Savings Programme Phase I		£456,538.69	JUL 08 - FEB 09	
KPMG	Service Transformation /Savings Programme / Phase II		£1,065,516.65	OCT 08 - DEC 08	£878,502 of this cost was recharged to the SHA therefore the costs to Walsall Hospitals was £187,014.65
IBM	Lean Strategy Development and Programme Management approach		£52,028.39	JAN 08 - MAR 08	
Dr S Tyler	Maternity services Per review		£4,703.88	Sep-08	

N Wall	GUM & Family Planning Service Integration review		£4,500.00	Mar-08	This review was jointly commissioned with the PCT provider arm
<b>PFI – Related :</b>					
Various	Consultancy Fees	£1,142,943.0 0	£206,566	Apr 07 - Mar 08, Apr 08 - Jul 08	



**20/10**

### **Facilities Management**

Under the 'Freedom of Information of Act' could you please provide me with the following information regarding Facilities Management within the Trust? Specifically:

Is your FM outsourced?

No

Specifically which FM services do you carry out in-house/outsourced?

Laundry is contracted out, all other FM services are carried out in house

Who is your current FM provider(s)?

Laundry - Sunlight

What is the contract renewal date for each service?

Laundry - 2018

**21/10**

### **A&E Injury Reporting**

Do the Accident and Emergency Departments within your Trust pass the details of the times and locations of incidents from patients that present to you with injuries caused or suspected to be caused by violent criminal offences (including, but not limited to, gun shot wounds, stab wounds, and assaults with or without a weapon) to the relevant Police/Police Authority/Crime and Disorder Reduction Partnership on a regular and anonymised basis?

A&E provide anonymous data about all assaults that arrive in A/E (since March 2009) to the Safer Walsall Partnership using a database provided to Hospitals around the West Midlands by a company called Linxs Consultancy.

Information provided is as follows:

Age

Gender

Location

Weapon

Date / Time

Assailant and relationship to assailant.

The Trust do not send regular information from our Information Services department to anyone unless specifically requested.

**22/10**  
**FOI Statistics**

1. Total number of FOI requests received by your organisation, dating from 1st Jan 2005 to present day, and broken down annually.

2005	2006	2007	2008	2009	2010 (to 17 <sup>th</sup> Feb)
32	35	19	42	202	31

2. Out of these, the number that received a response within the 20-working day limit.

2005	2006	2007	2008	2009	2010 (to 17 <sup>th</sup> Feb)
30	30	17	40	175	30

Those taking longer than 20 working days to respond were subject to extensions, all requests were sent out within the agreed extended deadlines.

3. The longest time taken to respond to a request.

2005	2006	2007	2008	2009	2010 (to 17 <sup>th</sup> Feb)
27 days	34 days	32 days	35 days	46 days	29 days

As per question 3, these responses were subject to agreed extensions, no requests exceeded these final deadlines.

4. Out of the total, the number of requests that were refused.

2005	2006	2007	2008	2009	2010 (to 17 <sup>th</sup> Feb)
0	0	0	0	5	0

It should be noted that only 1 of these refusals was a complete refusal. The remaining 4 refusals related only parts of the information requested.

5. Out of those requests that were refused, please provide, in accordance with section 17 of the Act, the specific exemption in question.

Section 36                    3 requests  
Section 40(2)                2 requests

I do not need this for each individual case, but a tally of how many cases were refused for specific exemptions.

For example.

135 cases refused by virtue of section 30 (2) FOI Act 2000.

59 cases refused by virtue of section 40 (1) FOI Act 2000 etc.

6. The number of requests subject to an internal review.

2 requests in 2009 were subject to an internal review.

7. The results of any internal requests. i.e did the authority uphold the original decision?

1 decision was partially upheld, 1 decision was reversed (i.e. previously refused information was released)

8. The number of cases referred to the Information Commissioner.

None

9. If any such cases exist, what the result was.

N/A

10. The criteria used when considering the public interest test.

The criteria used when considering the public interest test Walsall Hospitals NHS Trust follow the guidelines from the Ministry of Justice, which are readily available on their website.

**23/10**

**Directors Names & Total Number of Staff**

Could I please request information under the FOI act I would like to know the following:

The names of your  
Chief Executive  
Director of Finance  
Director of Information Technology  
Director of Human Resources

This information is available via the following link to our Trust Structures Log (available on our website):

<http://www.walsallhospitals.nhs.uk/Library/Walsall09/AboutTheTrust/TRUST%20STRUCTURES%20LOG%202009.pdf>

Also could you please tell me the total number of staff that are currently employed

We employ 3029 employees in full-time, part-time and contract positions covering roles with a full time equivalent of 2511.23

24/10

**Patient Engagement**

I would like to request under the Freedom of Information Act information relating to patient engagement, with a particular focus on ways in which you ensure you capture and act on the feedback from those groups of patients classed as 'hard-to-reach'.

**The information I would like from your answers is as follows:**

- The amount of budget allocated to patient engagement in 2009/09 and 2009/10 (or best estimate)

Please see table below

- The amount of budget earmarked for patient engagement in 2010/11 in response to the new elements of the NHS Operating Framework (or best estimate)

	08/09	09/10	10/11
	£	£	£
Patient Surveys	0	10,000	10,000
Patient Experience	19,500	19,500	19,500
Total	19,500	29,500	29,500

- Is it your intention to increase your budget in patient engagement in the future in the light of this new element within the NHS Operating Framework

We have reviewed our budget for patient engagement as part of our annual budget setting procedure and believe that this is sufficient as a recurring figure to support our patient engagement activities.

- The total number of patients, or best estimate, that you surveyed/engaged with on a formal basis during 2008/09 and 2009/10; and the proportion of these that are classed as being 'hard-to-reach'

**Numbers:**

Inpatients: 5 surveys, 850 patients in each  
 Emergency Department : 2 surveys, 850 patients in each  
 Outpatients: 2 surveys, 850 patients in each

Total of 7,650 patients surveyed.

**Hard to Reach:**

We operate the surveys based on random samples of patients, so no patients are excluded from the survey if randomly selected.

Note that the surveys follow a set of guidance published by the Care Quality Commission and we have to follow this guidance to the letter.

- The percentage or best estimate of patient questionnaires and surveys that are carried out on paper

All on paper as required by the Care Quality Commission in their published guidance.

- The annual postage costs incurred by the use of paper-based patient surveys

£5,140 for 2008-2010

- The percentage or best estimate of patient questionnaires that are carried out electronically

None - this is not permitted under the guidance published by the Care Quality Commission

- Full details of the steps you have taken, and are taking, to ensure you are able to meet the new patient engagement goals engagement techniques are fully accessible, equitable, and inclusive of the diverse population you serve, and captured the feedback of all groups of patients who are classed as being 'hard-to-reach'. This includes service users for whom English is not their first language; are unable to read; have physical disabilities which prevent them from answering a paper form; very young children (under 5s); have mental health problems or severe learning disabilities etc)

The Trust has a nominated executive lead for Patient and Public Involvement.

Patient Experience Feedback forms a standing item within the hospital's Quality Dashboard which is presented to Board on a monthly basis. . There are also more detailed quarterly reports on the patient experience which include trends from complaints, PALS and incidents, compliments and suggestions from the public.

We have lay members and/or community representatives on the following Trust Board sub-committees:- Risk and Assurance Committee, Quality Committee, Hospital Redevelopment Programme Board

The Board has recently ratified a revised Patient Carer and Public Involvement Strategy. A copy of the Strategy is attached. This identifies the establishment of a PPI Reference Group who will coordinate all PPI work across the hospital, develop a centralised database and report intelligence arising from PPI activity to the Patient Experience Steering Group. Feedback is then considered, analysed and triangulated with information from Complaints, PALS, incidents etc and reported up to the Quality Committee and Trust Board. Intelligence is used to inform the development of corporate objectives and investment priorities. This is a new approach being adopted by the Trust to further ensure that our investment decisions reflect what people want from their local hospital

In addition, the Trust has a range of patient forums including an outpatient forum and paediatric services forum. The Trust also works closely with LINKS

The Trust has a members forum which meets quarterly. This will soon be aligned to the NHS Walsall Parliament enabling our patient reps to have a stronger voice across all aspects of health in Walsall. This will be supported by a Manor Hospital Standing Committee. The Parliament will have direct access to the Public Trust Board of the Manor Hospital. Feedback from our patients is used to inform our corporate priorities and there are examples of this within our Membership Matters communication and the attached presentation. We are currently

strengthening the triangulation of patient feedback to align this directly to our annual planning process using this as crucial data to inform service developments / changes / improvements.

The Hospital presents the findings of nation patient surveys to the Board on publication, together with relevant action plans. The hospital also conducts interim replica surveys as an ongoing measure of improvement/identification of new risk areas. All inpatients are requested to complete a satisfaction survey on discharge from hospital and the findings of this particular survey are reported to the Quality Committee and Trust Board on a monthly basis as part of the Quality Dashboard.

With regard to hard to reach groups we have established a Community Leaders forum. We also offer interpreting services and hospital-wide support to all patients of ethnic diversities through the Link Worker scheme that we operate.

Please find enclosed a copy of our Patient, Carer & Public Involvement strategy 2009-2012

- Under the act, I would also like to ask if you could provide the Trust's total expenditure on services in 2008/9, and the total population served by the Trust.

The Trust serves a Walsall-based population of 254,000 however as we are a 'Choose & Book' hospital we take referrals from anywhere in the country.

The total expenditure on services in 2008/9 is available within our annual report, page 34 gives a percentage breakdown of our expenditure (available via the below link):

<http://www.walsallhospitals.nhs.uk/Library/Walsall09/AboutTheTrust/AnnualReport2008-09.pdf>

**25/10**

### **Doctors Compromise Agreements**

Please provide copies of all compromise agreements you have entered into with doctors of any grade. Please also provide a list of exploratory or illustratory issues covered by the compromise agreements (i.e. the reasons why the compromise agreements were entered into).

Walsall Hospitals NHS Trust has not entered into any compromise agreements with any doctors, therefore the response to your request is 'not applicable'

27/10

### 10 Day Payments & Late Payment Interest

1. Since 8 October 2008 to date, the percentage of suppliers' invoices that a) have and b) have not been paid within 10 days.

a. Percentage of suppliers paid within ten days is 56.8%  
b. Percentage of suppliers not paid within ten days is 43.2%

2. Since 8 October 2008 to date, a) the number of suppliers who have not been paid within 10 days and b) the total value of the suppliers' invoices concerned.

a. Number of suppliers not paid within ten days is 27,223  
b. Total value of these invoices is £35,489,697.39

3. Since 8 October 2008 to date, a) how much the organisation paid to suppliers in interest for late payment pursuant to the Late Payment of Commercial Debts (Interest) Act 1998 and b) the total value of the suppliers' invoices concerned.

None

4. Since 1 April 2008, how much the organisation paid to suppliers in interest for late payment pursuant to the Late Payment of Commercial Debts (Interest) Act 1998 and b) the total value of the suppliers' invoices concerned.

None

28/10

### Losses & Special Payments

In your financial accounts for the financial year 08/09 did you have a section for "losses & special payments" which is normally for bills you have issued and had to abandon or for items purchased which failed to work/arrive which you were unable to claim back?

Yes, losses & special payments are recorded within the Annual Accounts (page 43 for 2008/9).

If so, how much money was accounted for in the 08/09 financial year as being "losses and special payments"? (Please note I am aware that the loss may have occurred many years earlier but I am interested in items which were accounted for in the last financial year irrespective of when the loss took place).

The losses amounted to £187,615

Please detail the three largest single amounts within this total giving a cost for each one and a brief description of the claim and the reason for the loss.

The 3 largest single amounts included within the total were £10,168, £4,032 and £3,696 respectively and all 3 amounts were for non-payment of NHS treatment in relation overseas visitors.

29/10

### Spend on complimentary therapies

1. The amount spent by the trust on alternative/integrated/complimentary medicine such as homeopathy, acupuncture, herbal medicines, nutritionists, chiropractors, reflexologists etc.
2. Where possible, a list of the suppliers of such services to the trust along with a brief description of what they supplied.

We have an in-house acupuncture clinic (as part of our Pain Management clinic) run by one of our Associate Specialists and supported by a staff nurse, the costs for this are inclusive to the salaries of these 2 staff.

We have no outside suppliers of any complimentary therapies therefore the amount spent is £0.

30/10

### Public Interest Disclosure Act claims

I am doing some research in relation to the PUBLIC INTEREST DISCLOSURE ACT, otherwise known as PIDA. This act has been in place since 1999.

1. How many PIDA (Public Interest Disclosure Act) claims have been issued against your trust in the last 10 years?

None.

2. A. How many Public Interest Disclosure Act (PIDA) claims against your Trust have been COMPROMISED in the last 10 years? (In employer and employee will settle PIDA claims before going on to an Employment Tribunal, by signing a COMPROMISE AGREEMENT.)

None.

b. How much money has your Trust spent *in total* on these PIDA claims that have been compromised - excluding legal costs?

None.

c. Can you give me a *yearly* and *financial* breakdown of *each* PIDA claim that has been compromised?

Not applicable.

3. A. How many PIDA (Public Interest Disclosure Act) claims that have been issued against your Trust have gone on to a full hearing at an Employment Tribunal, in the last 10 years?

None.

b. How many are subject to a decision of the employment tribunal - please identify them.

None.

I understand that I am asking for information in the last 10 years - but if this is not possible then please provide me with information in the last 5 years, or since your records began.



**32/10**

**Disposal of Health Care waste**

Collection, Transportation and Disposal of Health Care Waste - Pharmaceutical, Sharps, Cytotoxic and Cytostatic, Anatomical & General Clinical

- Contract Renewal Date  
2016
- Contract Term  
7 years
- Contract Value for Full Contract Term (£)  
1,7500,00
- Annual Tonnages of individual waste streams  
540

**38/10**

**Revenue from takeaway concessions**

Please supply details of any takeaway concession outlets (eg Burger King, Subway and similar franchises) in your trust's hospitals and how much revenue they have generated for the trust per year in the past two years - or the most recent two year period for which figures are available.

Walsall Hospitals NHS Trust has no takeaway concession outlets therefore the figures for income generated is £0.

**34/10**

**Infection Control Staff & Budgets**

For each of the financial years April 2006 - April 2007, April 2007- April 2008 and April 2008 - April 2009:

1. How many staff (in whole-time equivalents) were employed by the Trust whose roles were primarily concerned with Infection Control?

2006/7      3 full time infection control nurses (ICN's)  
 2007/8      April – August:                      2 full time ICN's (1 post vacant)  
                  September – December:      1 full time ICN's (2 posts vacant)  
                  January – April:                      3 full time ICN's  
 2008/9      3 full time ICN's

2. Was there a specific budget allocated to Infection Control? If so, how much was spent (including staff costs as per part 1 of this request)?

	Budget	Spend
2006/7	£114,375	£117,473
2007/8	£98,742	£79,606
2008/9	£171,263	£162,939

**35/10**  
**Midwives**

Please provide details of the number of midwives employed by your trust in the years 2005, 2006, 2007, 2008, 2009 and 2010 and please indicate how many vacancies for midwives your trust currently has.

**MATERNITY UNIT**

Midwives in Post

MIDWIVES AS AT 31/12/05	FULL TIME	PART TIME	PART TIME HEAD COUNT	TOTAL HEAD COUNT	TOTAL WTE
Band 8	3.00	0.8	1	4	3.8
Band 7	25.00	20.17	28	53	45.17
Band 6	16.00	37.64	54	70	53.69
Band 5	2.00	0	0	2	2
<b>TOTAL</b>	<b>46.00</b>	<b>58.61</b>	<b>83</b>	<b>129</b>	<b>104.66</b>

MIDWIVES AS AT 31/12/06	FULL TIME	PART TIME	PART TIME HEAD COUNT	TOTAL HEAD COUNT	TOTAL WTE
Band 8	3.00	0.8	1	4	3.8
Band 7	25.00	20.54	29	54	45.54
Band 6	19.00	38.39	55	74	57.39
Band 5	0.00	0	0	0	0
<b>TOTAL</b>	<b>47</b>	<b>59.73</b>	<b>82</b>	<b>132</b>	<b>106.73</b>

MIDWIVES AS AT 31/12/07	FULL TIME	PART TIME	PART TIME HEAD COUNT	TOTAL HEAD COUNT	TOTAL WTE
Band 8	3.00	0.80	1	4	3.80
Band 7	22.00	21.74	31	53	43.74
Band 6	22.00	38.41	56	78	60.41
Band 5	1.00	0.80	1	11	10.80
<b>TOTAL</b>	<b>57.00</b>	<b>61.75</b>	<b>89</b>	<b>146</b>	<b>118.75</b>

MIDWIVES AS AT 31/12/08	FULL TIME	PART TIME	PART TIME HEAD COUNT	TOTAL HEAD COUNT	TOTAL WTE
Band 8	3.00	0.80	1	4	3.80
Band 7	11.00	10.67	16	27	21.67
Band 6	33.00	47.23	68	101	80.23
Band 5	3.00	7.80	11	14	10.80
<b>TOTAL</b>	<b>50.00</b>	<b>66.50</b>	<b>96</b>	<b>146</b>	<b>116.50</b>

MIDWIVES AS AT 31/12/09	FULL TIME	PART TIME	PART TIME HEAD COUNT	TOTAL HEAD COUNT	TOTAL WTE
Band 8	5.00	1.60	2	7	6.60
Band 7	12.00	10.14	15	27	22.14
Band 6	33.00	48.63	71	104	81.63
Band 5	3.00	5.00	7	10	8.00
<b>TOTAL</b>	<b>53.00</b>	<b>65.37</b>	<b>95</b>	<b>148</b>	<b>118.37</b>

MIDWIVES AS AT 02/03/10	FULL TIME	PART TIME	PART TIME HEAD COUNT	TOTAL HEAD COUNT	TOTAL WTE
Band 8	2.00	1.6	2	4	3.6
Band 7	14.00	11.52	17	31	25.52
Band 6	34.00	45.16	68	102	79.16
Band 5	0.00	6.8	9	9	6.8
<b>TOTAL</b>	<b>50.00</b>	<b>65.08</b>	<b>96</b>	<b>146</b>	<b>115.08</b>

We recruit as soon as a vacancy occurs. The matrons are currently recruiting 2.5 WTE midwives.

36/10

### Post Natal Depression statistics (1999 – 2009)

Please could you supply me with the following information.

- How many cases of postnatal depression have been diagnosed in the past 10 years, broken down into annual tables as follows, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008 and 2009.
- I require the information for each year be split into the following age tables,  
16-25  
26-35  
36-45  
46-55  
55+
- Are any of the postnatal depression cases above male? If so please define these cases by annual tables and age tables.
- If possible I would like to know how many of the postnatal depression sufferers are first time mothers, second mothers, third time mothers, or mothers of four or above.
- Also whether the women who are second time mothers experienced postnatal depression with their first child, whether third time mothers experienced postnatal depression either or both or their first two children, and whether mothers of four or more experienced postnatal depression with any or all of their first three children.

The information you require is not available to us. Because mothers go home so soon after birth, it would be too soon for post natal depression to be seen and coded on our inpatient data. Most people who suffer with this will be seen and treated in the community. This information may be available via NHS Walsall (the local PCT that includes GP's). Their email is [foi@walsall.nhs.uk](mailto:foi@walsall.nhs.uk)

What we could identify are patients who come in as inpatients with a depressive episode of some kind that complicates a pregnancy, be it an existing depressive condition or unresolved post natal depression from another birth. Correspondingly these figures will be low as you would expect that to be rare, we only have 1 patient between 01/04/2009 and 31/01/2010 admitted with "postnatal depression and for mental conditions complicating pregnancy" with a primary diagnosis of a mental condition complicating pregnancy, childbirth and the puerperium and the following diagnosis code being for an unspecified depressive episode.

37/10

## End of Life Care

Please would you supply the following data:

### A. Documents

Please would you send electronic copies – or give a web link to

#### A1. Your Formularies

Formularies – protected by commercial copyright. However the information re: drugs formulary is available within our publication scheme under Disclosure Log Q3 2009 (reference no 31/09), link to publication scheme as below:

<http://www.walsalhospitals.nhs.uk/WalsallHospitals09/AbouttheTrust/FOI.asp>

#### A2. Your range of disease-specific strategies and guidance documents

The Trust subscribe to West Mercia guidelines, which we are unable to forward as they are owned by West Mercia.

### B. End of Life Care

B1. Does your organisation have an End of Life Care Strategy? - If so please would send an electronic copy?

[End of Life Care – copy of presentation attached](#)

B2. Would you also send any condition-specific End of Life Care strategies that you have developed, for example, for cancer, liver disease, dementia etc.?

The Trust follows the Liverpool Care Pathway. Please see link below for further information:

<http://www.endoflifecare.nhs.uk/eolc/lcp.htm>

B3. Has the advent of the strategy resulted in any specific initiatives or pathway redesigns? If so please give details?

N/A

B4. Who are the End of Life Care leads in the organisation?

[Mike Browne – Medical Director](#)

40/10

**Staff / Beds / Budgets 2009 - 2015**

Please note that all figures stated are estimated and may be subject to change due to external factors.

- I would like to request information on workforce plans in your Trust. Please state how many **full-time equivalent** (a) Doctors; (b) Qualified Nursing Staff; (c) Managers and Senior Managers; and (d) staff in total your trust (i) currently employs and (ii) is planning to employ in each financial year from 2010-11 to 2014-15.

Current figures (FTE) are as follows:

(a) Doctors	314.08
(b) Qualified Nursing Staff	735.41
(c) Managers and Senior Managers (not including medical staff acting in a managerial capacity)	52.99
(d) staff in total your trust:	<b>2531.05</b>

In the LTFM there is the following for 2010/11. These figures remain the same over the 5 years. These figures are not broken down as per your request, only by general staff groups as below (WTE):

Medical & Dental	309
Nursing & Midwifery	786
Other Clinical	971
Other	592
<b>Total</b>	<b>2658</b>

- I would like to request information on bed numbers within your trust. Please state (a) how many beds your trust currently has, including day beds; and (b) how many beds your trust is planning to have in each financial year from 2010-11 to 2014-15.

2009/10 557 beds

Our current forecast is:

2010/11 520 beds

2011/12 510 beds

2012/13 to 2014/15 500 beds

These planned bed reductions are made possible by:

a) Planned increase in day case activity as a result of moving to the Trusts new Diagnostic & Treatment Centre (DTC), and

b) Ongoing work to reduce patient Length of Stay

- I would like to request information on total spending within your trust. Please state (a) your trust's total budget for 2009-10; and (b) what your trust is planning for its total budget to be in each financial year from 2010-11 to 2014-15.

The Trusts total budgeted expenditure for the 2009/10 financial year totals £161,209,561.

The following information is only estimated and will change due to external factors such as transforming community services etc...

	2010/11	2011/12	2012/13	2013/14	2014/15
<b>Estimated Planned Spend</b>	<b>(171.1)</b>	<b>(169.4)</b>	<b>(156.8)</b>	<b>(150.7)</b>	<b>(151)</b>

41/10

### Hauntings Complaints

1. How many complaints has your organisation received from either your employees or members of the public about 'haunted' buildings, ghosts or other paranormal phenomena in your premises or in buildings managed by you? Please break down complaints by year. Please provide details of complaints received in the past ten years only.

Walsall Hospitals NHS Trust has received no complaints from either employees or members of the public about 'haunted' buildings, ghosts or other paranormal phenomenon in the last 10 years.

2. What action was taken to address these complaints?

N/A

3. How much did this action cost. Please provide the amount spent for each action.

N/A

43/10

### Revenue from ATM's

1. The total number of cash machines on each hospital's premises that are available for use by patients/visitors.

Walsall Hospitals NHS Trust has 1 ATM available for patients / visitors

2. The charge levied by each of these cash machines when patients/visitors withdraw money.

No charge is levied.

3. The number of withdrawals made at cash machines in each hospital during the last complete financial year (2008-09) or equivalent 12-month reporting period (but not including the current period).

This information is not available as prior to 22<sup>nd</sup> October 2009 there were no ATM's onsite.

4. The total revenue obtained by each hospital during the last complete financial year from the operation of charging cash machines which are available for use by the public/patients.

None.

5. Policy documentation detailing the Trust's policy with regard to this issue.

N/A as the ATM machine is not owned / run by the Trust.

**4410**

**Salaries over £100k**

1) The names and job titles of any person, who doesn't appear in your annual reports, working for your public body (either as a staff member, clinician, consultant), who was paid over £200,000 (gross) in the financial years 2009/10 and 2008/9 and the details of how much they were paid. I appreciate that 2009/10 isn't over yet but as most of the people listed above are on fixed salaries can you please tell me who is on over 200 grand for this year?

2) Anonymous list of everyone earning over £100,000 broken down into £10,000 pay brackets. While I don't need to know names I would like the gender of each person to be noted. (If anyone left in the middle of a financial year but would have earned £100,000 or more had they stayed on, can you tell me about them as well, please)

Please see the below tables for information. The basic pay of those earning >£100k is detailed below.

**CONSULTANTS**

Amount (000's)	2008/9	2009/10
>100	12	3
100-110	15	22
110-120	17	17
120-130	13	9
130-140	8	9
140-150	1	4
150-160	4	3
160-170	1	
170-180		2
180-190	1	1
<b>TOTAL</b>	<b>72</b>	<b>70</b>

**ASSOCIATE SPECIALISTS**

Amount (000's)	2008/9	2009/10
100-10	1	1

<b>DIRECTORS</b>	2008/9	2009/10
Mrs S James - Chief Executive	120-130	130-140
Mr M Browne - Medical Director	190-200	200-210

2008/9 total staff earning over £100k = 75 (10 female, 65 male)

2009/10 total staff earning over £100k = 73 (10 female, 63 male)

The above tables include all staff earning over £100k that have worked for the Trust for any length of time within the requested periods.

3) Can you tell us who signed off on these £100,000+ incomes... (e.g. was it a select committee, the Head of HR, the boss (and if it was the boss who was on over £100,000 a year who agreed on his or her salary).



Medical Staff salaries are nationally agreed salaries.

Directors earnings are agreed annually by the Remuneration Committee of the Trust Board.

4) Can you please give us the details of any bonuses, pension contributions, over-time extras, 'golden handshakes', 'golden farewells' and redundancy payments that the people you mention above received in the financial years 2008/9 and 2009/10?

The bonuses received by Directors is not currently available for 2009/10 however the information for 2008/9 has previously been released and is available in our Quarter 4 2009 disclosure log (ref: 10609). Link as below:

<http://www.walsallhospitals.nhs.uk/Library/Walsall09/AboutTheTrust/FOI/Disclosure%20Log%20Q4%202009.pdf>

Pension information for Directors is available via our annual report for 2008/9 (link as below). Pension information for all other staff members is calculated as a percentage of pensionable pay. Further information available from the BMA website (link as below):

[http://www.bma.org.uk/employmentandcontracts/pensions/pension\\_scheme/newnhssaldoc.jsp](http://www.bma.org.uk/employmentandcontracts/pensions/pension_scheme/newnhssaldoc.jsp)

<http://www.walsallhospitals.nhs.uk/Library/Walsall09/AboutTheTrust/AnnualReport2008-09.pdf>

There are no 'golden handshakes'; 'golden farewells' or redundancy payments relevant to staff earning over £100k.

Overtime payments are payable to some consultants staff where the demand for our services outweighs our basic capacity. Please find below a table detailing overtime payments made in 2008/9 and 2009/10:

<b>DIRECTORS – bonus payments</b>	2008/9	2009/10
Mrs S James - Chief Executive	10-20	0-10
Mr M Browne - Medical Director	0-10	0-10

<b>CONSULTANTS - overtime payments</b>		
Amount (000's)	2008/9	2009/10
0	22	16
0-10	26	20
10-20	4	13
20-30	3	13
30-40	9	5
40-50	1	2
50-60	3	4
60-70	2	3
70-80	1	-
80-90	-	-
90-100	-	1
100-110	1	-
<b>TOTAL staff</b>	<b>72</b>	<b>70</b>

**4510**

**Gunshot / Stab Wounds treated in A&E 2008/9 & 2009/10**

Please state the number of patients treated in A&E for gun shot wounds in the last two years.  
Please state the number of patients treated in A&E for stab wounds in the last two years.  
Please state the total for both years.

Please see figures in table below:

Year	ASSAULT - GUNSHOT	ASSAULT - KNIFE	TOTAL
Year 2008/09	1	33	34
Year 2009/10	2	25	27

period 01/04/2009 to 28/02/2010

**4610**

**Data Sharing with 3<sup>rd</sup> Parties for Research Purposes**

Considering every instance where patient data has been shared with your trust and third-parties for research purposes only.

Could you please provide an approximate number or percentage relating to the number of times data was shared with third parties where the consent of the patient/individual was obtained for the period of 01/2008 – 01-2009 and for the period 01/2009 – 01-2010?

Could you also provide an approximate number or percentage of the number of times data was shared with third parties where the consent of the patient/individual was not obtained for the period of 01/2008 – 01-2009 and for the period 01/2009 – 01-2010?

By consent: I mean that the individual was directly aware that his/her personal medical data was being disclosed by and shared among third- party(s) for research purposes.

Walsall Hospitals NHS Trust has not shared patient data with any third parties in either 2008/9 or 2009/10. Therefore the response to your request is 'not applicable'. Given this response we have not completed the word document received on 29<sup>th</sup> March as we have no information with which to populate the document.

4710

**Data on Abdominal Aortic Aneurysm**

We requested the number of elective and emergency (listed separately) AAA operations carried out at your trust and the related mortality rates for years 2006, 2007 and 2008 - we required the statistics broken down according to each year. We also requested to know the number of surgeons performing these operations in each year. We stated that we did not want HES data but the information kept by your surgeons for their own auditing purposes.

We did get a response which explained that your trust only collects HES data. Given that we have no alternative, we would like to request this HES data please in the format described above.

**FOI: AAA Procedures By Year**

Year	Total Elective	Total Emergency	Deaths Elective	Deaths Emergency	Total Number of consultants
2006	19	9	2	3	4
2007	29	14	3	6	6
2008	14	12	1	5	5

48/10

**Patients presenting at A&E with health problems related to taking Methadrone**

For all the information I am requesting I would like it for the last three six month periods. Oct 2008 - March 2009, April 2009 - Sept 2009, Oct 2009 - March 2010

I would to know how many people have presented at Accident and Emergency Departments within your hospital or trust with health problems after taking the legal high Methedrone, known as Meow Meow or M-Kat.

I would like to know the ages of the people presenting with health problems after taking Methedrone.

I would like to know what treatment they received and how long they stayed in the hospital for, ie were they admitted to a ward or sent home after a few hours.

I understand people may have taken other substances alongside Methedrone, please include these in the data, I am not looking for people who have come to A and E after just taking Methedrone but where Methedrone was a factor.

We cannot answer this question as no coding goes in to that level of detail. The table below show the number of inpatients discharged who were diagnosed with T436 - *Poisoning by psychotropic drugs not elsewhere classified - pyschostimulants with abuse potential* in the admitting episode, but please note:

- 1) This is NOT the number of patients who have taken methedrone - the code would cover a large number of substances so, someone would have to go through the notes manually to ascertain if any of the patients had actually taken methedrone.
- 2) This is based on inpatient coding (coding is complete to end of Jan), not necessarily patients presenting in A&E.

Oct 08 – Mar 09	Apr 09 – Sept 09	Oct 09 – Mar 10
7	6	3

4910

**IM&T information**

Could you please supply me with the following information relating to IM&T:

1) Corporate Management Structure- structure of the Trust headed by the Chief Executive

This information is available via our Trust Structures Log. Link as below:

<http://www.walsalhospitals.nhs.uk/Library/Walsall09/AboutTheTrust/FOI/TRUST%20STRUCTURES%20LOG.pdf>

2) IM&T Strategy 2010 / 2011 - the Trust's Corporate IM&T Strategy and not the Local Health Community Plan. Also if ICT Strategy is out of date, please state when new ICT Strategy be published and could you please send me full contact details of the person within the organisation that holds the ICT Strategy contact name, job title, emails and telephone?

The Informatics strategy is now integrated into the Informatics plan, therefore there is no separate document.

The Director of Informatics – Steve Darkes is employed by NHS Walsall and can be contacted via their main telephone number (01922 618388)

3) IM&T Business Plan- the IM&T department's business plan

Please find attached a copy of the Informatics Plan. The plan is currently being updated with the updated version due for release in June 2010.

4) IM&T Structure- the IM&T Department's Structure

Please see link to structures log as above, it should be noted that Informatics is a shared service with NHS Walsall (PCT) and only the Informatics staff in red are Walsall Hospitals NHS Trust staff.

5) HR procurement tier supply procedure if applicable

N/A

**5010**

**Employment Grievances 2008-2009**

1] The total number of employment grievances lodged against the Trust during the financial year 2008-2009, not including accident claims.

Walsall Hospitals NHS Trust have had 8 employment grievances lodged in 2008-2009.

2] The total number of employment grievances that progressed to an Employment Tribunal during the financial year 2008-2009 and of these claims:

1 employment grievance has progressed to an Employment Tribunal during this period.

i) the number of cases that concluded and were successfully defended by the Trust at Tribunal; 1 case was concluded and successfully defended by the Trust at Tribunal.

ii) The number of cases that concluded and succeeded against the Trust at Tribunal; 1 case was concluded and succeeded against the Trust at Tribunal.

iii) The number of cases that concluded and which resulted in a settlement; No cases were concluded and resulted in a settlement.

iv) The total amount of settlement paid or agreed to be paid by the Trust for cases concluding during the financial year 2008-2009.

The Trust has not paid or agreed to pay any settlements for cases concluded in 2008-2009.

3] The total number of employment grievances that concluded and were compromised during the financial year 2008-2009.

No employment grievances were concluded and compromised during 2008-2009.

And of these claims the total amount of settlement paid or agreed to be paid by the Trust.

None

4] The total sum of money paid or agreed to be paid by the Trust for legal advice and work relating to employment issues during the financial year 2008-2009. (This is typically overseen by the Trust's human resources or personnel department.)

Walsall Hospitals NHS Trust works with Mills & Reeves on employment grievance cases. Please see below the total amounts invoiced by Mills & Reeves during 2008/9.

Please note that these are **totals** from Mills & Reeves for HR services and, as such, may include dealings not related employment grievances.

Actuals 0809	HR
April Legal Bill	£7,105
May Legal Bill	£3,136
June Legal Bill	£5,661
July Legal Bill	£2,554

August Legal Bill	£6,382
September Legal Bill	£16,961
October Legal Bill	£13,389
November Legal Bill	£5,658
December Legal Bill	£2,343
January Legal Bill	£9,721
February Legal Bill	£12,046
March Legal Bill	£23,549
Totals	£108,505

5] The total number or proportion of employment disputes lodged against the Trust resulting in agreements containing a 'non-disparagement clause' during the financial year 2008-2009. (This should include all settlements achieved by way of COT3 and Compromise Agreements.)

No employment disputes resulting in agreements contained a 'non-disparagement clause'

6] Out of all employment disputes lodged against the Trust, the number of cases resulting in re-instatement or re-engagement during the financial year 2008-2009.

None of the disputes resulted in re-instatement or re-engagement.

5110

**IT contacts & suppliers of Health Informatics Services**

Please can you provide me with the names and contact details (telephone numbers and email addresses) for the following list of jobs, or closest equivalents?

- Chief Information Officer
- Director of IM&T
- Head of IM&T
- Head of ICT
- Head of Infrastructure
- Head of Business Analysis
- Head of Development
- Network Manager
- Head of Project Management
- Hardware Manager
- Software Manager
- CIT Security Manager
- ICT Security Manager

This information can be found via our Trust Structures log, link as below:

<http://www.walsalhospitals.nhs.uk/Library/Walsall09/AboutTheTrust/FOI/TRUST%20STRUCTURES%20LOG.pdf>

Please note that only the informatics staff in red work for Walsall Hospitals NHS Trust and they are contactable by name or job title via our main switchboard (01922 721172), please contact NHS Walsall for details on their staff ([foi@walsall.nhs.uk](mailto:foi@walsall.nhs.uk))

Please can you also provide me with the company name(s), key contact name and telephone number of all suppliers currently providing Health Informatics Services to the Trust.

Please see table as below:

Supplier	Contract Details	Contact Number
iSOFT	ACAS SW Support (Path Lab)	01925 283400
MGE	Comet Extreme	0208 8614040
Hewlett Packard	Hardware & Software Support	01925 841384
Hewlett Packard	Disaster Recovery	01344 361326
RMS Services	Service Desk Annual Support	01428 641717
Waverley	Maintenance Schedule	01628 851044
Cable & Wireless	VPN Tokens NW Imaging	0800 700 102
Sophos (Foursys)	Sophos Anti Virus Support	01223 810910
BT Contract Rentals	Telephone Equipment	0870 191 0303
SwitchShop	Bentley Guardian Maintenance	01438 831870



SwitchShop	Jubilee Guardian Maintenance	01438 831870
SwitchShop	Pleck Guardian Maintenance	01438 831870
SiteLink	Telephone System Maintenance	0191 4174084
ISS (Walsall Council)	GP Net (Core Network)	01922 6522972
Orion	Rhapsody, Concerto, Sprano Sup.	0870 4329580
McKesson	Careplan System	0870 6000 426
EDS	Quarterly Support Charges (SWIFT)	01908 585858
Royal Mail	Postcode Software	0845 606 6854
Health Intelligence	GP Practice Reporting	0127 0765124
Ardentia	Cassius Support	0844 8481205
Folding Space	A&E, Pathology, Blood Transfusion	0121 236 8979
Torex	GP ESA Payment	01295 753000
GE Capital	Kenco Drinks Vending	0870 191 0303
BT Contract Rentals	Telephone Purchase	
Stoneleigh	Annual Rental 10mb Circuit VPN	01939 238800
BMS Ltd	Secure IT Sotward Support	0115 9876339
iSOFT	Laboratory TP Software	01925 283400
CS Clinical Solutions	Walk in Centre Software Licence	
EMIS	Supply of managed services IT	0845 125 5529
McKesson	Star Interface, Nursing	01926 475574
Gartner UK	Gartners for IT Leaders	01784 267092
N3	N3 Project	0800 282 4444
ICM Business Continuity Services Ltd	ICM Disaster Recovery	0844 8631000
DELL	SYSCON Information system	01344 373547
DSGI Business/Equanet	Storage Area Network (SAN) Solution	0161 447 3269

52/10

## Car Parking

### Capacity

1. How many spaces are currently available in all your car parking sites in total and how many of these have been allocated for:

- a disabled spaces and
- b for priority parking for other groups, please specify? **350 patients**

The Trust has a total of 1300 car parking spaces of which 73 are allocated disabled spaces and 350 spaces for priority parking.

2 How many:

- a in-patient admissions and Total number of inpatient spells
- b out-patient appointments Total number of consultant led outpatient appointments attended
- c bed spaces have you had in the last financial year (or equivalent 12 month reporting period)?

- a. **61,063 inpatient spells**
- b. **232,905 consultant led outpatients appointments (including Genito-Urinary Medicine)**
- c. **558 beds available for use**

3 For which of the following people does your hospital provide priority parking:

- a patients with mobility problems (e.g. Blue Badge holders)
- b patients attending A&E,
- c women in labour
- d other, please specify,

Free priority car parking is provided for patients with mobility problems (Blue Badge holders) and patients undergoing treatment for cancer.

### Payment mechanisms

4 Which of the following payment mechanisms are in place in your main car park?

- a Pay and display
- b Barrier mechanism and payment on departure
- c Other, please specify

The Trust operates both pay & display and barrier mechanism (payment on departure)

### Payment types

5 Which of the following payment types are offered to the users of your main car parks?

- a Coin only
- b Debit or credit card only
- c Debit or credit card and coin
- d Other, please specify

The payment type accepted is cash (both notes and coins)

1. If you accept payments in coins at your main car parking facility, do you have a change machine at close proximity i.e. within 200 metres of the car park?

No – machines accepted notes as well as coins.

### Penalties

7 How many times have any of the following penalty mechanisms been used with respect to any of your hospital car parks in the last financial year (or equivalent 12 month reporting period)?

- a Parking ticket with financial penalty
- b Clamping
- c Towing
- d Other, please specify

Approximately 300 parking tickets have been issued in the last financial year. No cars have been clamped or towed.

1. In the last financial year how much income have you of the company operating your car park(s) generated in total from (i) car parking fees (e.g. pay and display) and (ii) penalty mechanisms (e.g. fines, clamping release fees)?

£600,000 in income has been generated from car parking fees and £600 from penalty mechanisms.

### Ownership

9 Who manages your main car park? (e.g. the Trust, a contractor or a PPP).

The Trust manages all car parks.

### Complaints

10 How many complaints has your hospital received in the past 12 months on hospital car parking from users (not including staff members)?

The Trust has received approximately 40 complaints re: hospital car parking (non staff members) in the past 12 months.

### Information

11 Please describe how you inform users of your car park about your concessionary car parking policies, including whether such information is provided

- a in notices in the car park, **yes**
- b in the hospital wards, **yes**
- c on your hospital's website, **yes**
- d in correspondence to patients (e.g. appointment letters)
- e any other medium, please specify

The Trust informs users about concessionary car parking policies in the following: notices in car park; in the hospital wards and on the hospitals website

### Charging and profits

12 In each of the last three financial years, have your car park(s) operated

- a at a profit;
- b at a loss; or
- c on a break even basis?

At a loss for the last 3 financial years.

1. Please give full details of the fee charging structure in the hospital's main car park (i.e. different rates and parking periods available) and whether there is a minimum charge in place.

£2 for the first hour and then £1 per hour. Up to a maximum of £6 per day.

2. Do your car park(s) cap charges or have season tickets for any patient groups? If so, which patient groups benefit, and under what circumstances?

A 'season ticket' costing £10 per week is available for anyone who requests it.

3. How much total profit, if any, did your car park(s) make in the last financial year (1 April 2008 - 31 March 2009 or equivalent 12 month reporting period)?

No profit was made in the last financial year.

4. Do you reimburse patients for the additional car parking fees or penalties they have paid if appointments are delayed for reasons beyond their control? Please provide details of how this system operates. If so, what percentage of claims were reimbursed in your hospital in the last financial year or equivalent 12 month reporting period?

The Trust does not operate a formal reimbursement scheme.

#### Other

17 What is the average length of stay of your car park users?

Average length of stay is 2 hours.

18 What is the maximum distance patients and visitors will have to walk from a car park space in your main car park to hospital entrance?

Maximum distance is 200 metres.

19 When did you last consult

a LINKs

Consulted every month

b inpatients and outpatients and

Consulted at least once per year

c the local wider community on the hospital's car parking arrangements?

Consulted at the AGM

20 When did you last review your car parking arrangements and when are you planning to review those next?

The last review was undertaken in December 2009, the next will be December 2010.

5410

**TaqMan-MGB Probes**

1. How many TaqMan-MGB probes (specifying probe type and package size) were purchased from ABG by the Trust as a whole during the period 1<sup>st</sup> January 2009 to the 31<sup>st</sup> December 2009?
2. How many TaqMan-MGB probes (specifying probe type and package size) were purchased from ABG by the Trust as a whole during the period 1<sup>st</sup> January 2008 to the 31<sup>st</sup> December 2008?
3. How many TaqMan-MGB probes (specifying probe type and package size) were purchased from ABG by the Trust as a whole, that were used specifically for patient diagnostic use and the total number of individual patients tests performed using these probes during the period 1<sup>st</sup> January 2009 to the 31<sup>st</sup> December 2009?
4. How many TaqMan-MGB probes (specifying probe type and package size) were purchased from ABG by the Trust as a whole, that were used specifically for patient diagnostic use and the total number of individual patients tests performed using these probes during the period 1<sup>st</sup> January 2008 to the 31<sup>st</sup> December 2008?
5. Please confirm that no TaqMan-MGB probes were purchased by the Trust from any other source other than ABG during the time periods quoted above.

Walsall Hospitals NHS Trust has no records of any TaqMan-MGB probes being purchased during the periods stated, therefore our response to the above request is 'not applicable'

5510

**Circumcisions**

I am writing to request the following information under the Freedom of Information Act 2000:  
-brief details on the circumcisions performed by the trust in 2009 (on adults or children), to include age of patient and diagnosis

Please see table below:

Age	Diagnosis	Count
0	Redundant prepuce phimosis and paraphimosis	1
0	Routine and ritual circumcision	282
1	Routine and ritual circumcision	27
2	Routine and ritual circumcision	11
3	Redundant prepuce phimosis and paraphimosis	1
3	Routine and ritual circumcision	1
4	Routine and ritual circumcision	2
5	Redundant prepuce phimosis and paraphimosis	13
5	Routine and ritual circumcision	4
6	Redundant prepuce phimosis and paraphimosis	5
7	Redundant prepuce phimosis and paraphimosis	5
7	Routine and ritual circumcision	1
8	Redundant prepuce phimosis and paraphimosis	4
9	Redundant prepuce phimosis and paraphimosis	7
9	Routine and ritual circumcision	1
10	Redundant prepuce phimosis and paraphimosis	6
11	Redundant prepuce phimosis and paraphimosis	2
12	Redundant prepuce phimosis and paraphimosis	3
12	Routine and ritual circumcision	1
13	Routine and ritual circumcision	1
14	Other specified disorders of penis	1
14	Redundant prepuce phimosis and paraphimosis	1
15	Redundant prepuce phimosis and paraphimosis	4
16	Redundant prepuce phimosis and paraphimosis	1
16	Routine and ritual circumcision	1
17	Follow-up care involving plastic surgery of other body part	1
17	Redundant prepuce phimosis and paraphimosis	5
18	Redundant prepuce phimosis and paraphimosis	3
19	Balanoposthitis	1
19	Redundant prepuce phimosis and paraphimosis	1
20	Redundant prepuce phimosis and paraphimosis	3
22	Balanoposthitis	1
22	Redundant prepuce phimosis and paraphimosis	1
24	Redundant prepuce phimosis and paraphimosis	1

25	Redundant prepuce phimosis and paraphimosis	1
25	Redundant prepuce phimosis and paraphimosis	1
26	Balanoposthitis	2
28	Redundant prepuce phimosis and paraphimosis	1
30	Balanitis xerotica obliterans	1
30	Redundant prepuce phimosis and paraphimosis	2
31	Balanoposthitis	1
31	Redundant prepuce phimosis and paraphimosis	1
32	Redundant prepuce phimosis and paraphimosis	2
33	Redundant prepuce phimosis and paraphimosis	2
34	Redundant prepuce phimosis and paraphimosis	1
35	Redundant prepuce phimosis and paraphimosis	2
37	Balanitis xerotica obliterans	1
37	Unspecified injury of abdomen lower back and pelvis	1
38	Redundant prepuce phimosis and paraphimosis	1
39	Balanoposthitis	1
40	Redundant prepuce phimosis and paraphimosis	2
41	Balanitis xerotica obliterans	1
42	Balanoposthitis	1
42	Hydrocele unspecified	1
43	Balanitis xerotica obliterans	1
43	Redundant prepuce phimosis and paraphimosis	1
45	Redundant prepuce phimosis and paraphimosis	2
46	Redundant prepuce phimosis and paraphimosis	2
47	Balanitis xerotica obliterans	1
47	Redundant prepuce phimosis and paraphimosis	1
49	Balanoposthitis	1
50	Redundant prepuce phimosis and paraphimosis	1
51	Balanitis xerotica obliterans	1
51	Redundant prepuce phimosis and paraphimosis	1
52	Balanitis xerotica obliterans	1
52	Redundant prepuce phimosis and paraphimosis	1
54	Balanoposthitis	1
54	Redundant prepuce phimosis and paraphimosis	1
56	Balanitis xerotica obliterans	1
56	Redundant prepuce phimosis and paraphimosis	1
57	Balanitis xerotica obliterans	1
59	Redundant prepuce phimosis and paraphimosis	1
60	Balanitis xerotica obliterans	1
62	Balanitis xerotica obliterans	1
62	Redundant prepuce phimosis and paraphimosis	1
64	Other specified disorders of penis	1
67	Redundant prepuce phimosis and paraphimosis	2

68	Balanoposthitis	1
69	Balanitis xerotica obliterans	1
72	Redundant prepuce phimosis and paraphimosis	2
77	Redundant prepuce phimosis and paraphimosis	2
78	Balanitis xerotica obliterans	1
79	Redundant prepuce phimosis and paraphimosis	1
81	Balanitis xerotica obliterans	1
87	Balanitis xerotica obliterans	1
89	Balanitis xerotica obliterans	1
	<b>Total</b>	<b>466</b>

-brief details of A&E attendances (adults or children) connected to circumcision during 2009, to include age of patient, place of circumcision (where known) type of complication and treatment (including whether the patient was admitted).

Please see table below (all circumcisions were carried out at Manor Hospital (Walsall Hospitals NHS Trust):

*Using Arrival Condition  
Like 'circum'*

Age	Arrival Condition	Diagnosis Description	Treatment Description	Admitted
0	POST OP PROBLEM/CIRCUMCIS	DIAGNOSIS NOT CLASSIFIABLE	VERBAL GUIDANCE	Not Admitted
5	POST OP WOUND PROB/CIRCUM	POST-OP WOUND PROBLEM	VERBAL GUIDANCE	Not Admitted
9	POST OP CIRCUMCISION PROB	NOT YET DIAGNOSED	MED ADMIN - ANALGESIA	Admitted to Manor
14	POST OP PROB/CIRCUMCISION	POST-OP WOUND PROBLEM	VERBAL GUIDANCE	Not Admitted

-brief details of any death which has occurred linked to circumcision in the last ten years, to include age of patient and cause of death

There are no patients that match this criteria

As there is no specific attendance code for complications following circumcision, it may be helpful to note that other trusts have compiled the complications data by searching triage notes for references to circumcision and then reviewing those records to establish the additional information. This has been done free of charge within the guidelines of the 2000 FOI Act.



5610

**Agency Nursing Staff**

1. Can you please confirm how much the hospital has spent on agency staff over the last four months; this covers November 09, December 09, January 10 and February 10, broken down by monthly totals.

	November	December	January	February
Nursing & Midwifery	42,827	26,574	32,694	44,439

2. What is the Trust doing to reduce the dependence on agency staff?
  - The hospital nurse bank currently has 489 qualified nurses and 485 support workers active. There is an on-going recruitment process and advert remains in place on the NHS job website. Matron's and Senior sisters are involved in the selection process.
  - The nurse bank recruit to support worker posts via the university and substantive staff are enrolled onto the nurse bank system at their request.
  - The nurse bank is used to fill any gaps and agencies are only used with permission of the Heads of Nursing.
  - Active recruitment of any vacancies is undertaken.
3. We understand that the Hospital operates its own in-house nursing bank which uses staff that are already familiar with the policies and protocols of the Hospital. We would like to know what measures are being taken to recruit staff into the hospital nurse bank to ensure a pool; of in-house staff is available before the need arises to go to nursing agencies.

Please see the response above. In addition the Trust has a new sickness and absence policy in order to tackle the worst offenders and address short term sickness which can have an impact on the requirement for staff at short notice.

5710

## Outpatients Department

1. How does the new hospital appointment system work?

The partial booking system was implemented for follow up patients only. If, following OPD consultation a patient needs a further appointment within a 6 week period of time they will be allocated a suitable appointment slot on departure from clinic. If the patient needs a further appointment beyond a 6 week period, i.e. 3 months they will be added to the partial booking system which indicates their appointment due date. Six weeks prior to the appointment due date the system generates an automated report which identifies all patients who require an appointment. These patients are then allocated an appointment slot and a confirmation letter forwarded. If this is inconvenient, the patient simply contacts the freephone call centre number to rearrange for a more suitable time.

2. What is the timeframe for informing a patient of an appointment?

The standard we apply for notification of appointments is 3 weeks written notice. However in some instances, particularly when backfilling cancelled slots or fast tracks appointments (2 week urgents) this standard would not apply, however any patient who is given less than 3 weeks notice will be contacted to confirm they are available to attend.

3. The number of appointments during the last 6 months that have been cancelled by the hospital

10,038 for the period October 2009 – March 2010

4. The procedure for patients to rearrange appointments

Patients who wish to re-arrange their appointments contact the call centre freephone number which is identified on all outpatient appointment letters, this is a dedicated call centre number for OPD appointment queries etc.

It has also been brought to our attention that it is very difficult to get through to outpatients if you are calling to cancel an appointment, would the hospital consider putting in a dedicated phonenumber for this?

Please see response for question 4, we have a dedicated freephone number for outpatients queries etc...

**5810**

**Data Protection & Customer Care Protocols**

Could you forward me the data protection protocol. In addition to this, I have a query regarding the manner in which a patient was spoken to by nursing staff. Could you also send me the protocol which would cover this area. I am not sure whether it would be customer care protocol or any other.

With regards to our Data Protection protocol, please find enclosed a copy of our 'Administration of the Data Protection Act' policy.

With regards to our Customer Care protocol, Walsall Hospitals NHS Trust does not have a formal customer care policy / protocol. Nursing staff work in accordance with NMC (Nursing & Midwifery Council) code of conduct. Any performance issues raised are dealt with in accordance with the Trusts HR guidelines.

The NMC code of conduct can be found via the below link:

<http://www.nmc-uk.org/aArticle.aspx?ArticleID=3056>

**5910**

**Mixed Sex Wards**

I am writing to request the following information from the Trust, under the Freedom of Information Act:

- The total number of patient beds that the Trust has in mixed-sex wards.

N/A. Please see our statement of compliance available via the below link:

<http://www.walsallhospitals.nhs.uk/Library/Walsall09/DSSA%20Declaration%20of%20Compliance.pdf>

- The total number of patient beds that the Trust in all wards.

This information is available on our website. Link as below:

<http://www.walsallhospitals.nhs.uk/WalsallHospitals09/AbouttheTrust/AboutUs.asp>

- Whether the Trust's maintains a policy on patients being bathed, or otherwise seen to, by orderlies or nursing assistants of the opposite gender. If so, what is that policy?

Walsall Hospitals NHS Trust does not have a policy on 'opposite gender bathing'

**6110**  
**ICT Expenditure**

1) Could you please provide us with your organisation's 2008/09 and 2009/10 total ICT budget or estimate?

2008/9        £1.4 million  
2009/10        £1.4 million

2) Could you please provide us with your ICT budget and spend for 2008/09 and 2009/10 for the following product and service categories. Please provide the name of the largest suppliers for each category and the top three product (brand) names (for hardware only).

		2008/09	2009/10	Largest suppliers	Notes	Where possible, most important brands
<b>Hardware</b>	Desktop computers	23,246.00	11,815.00	Dell		
	Portable computers	5,289.00	8,728.00	Dell		
	Servers	112,306.00	35,683.00	Dell		
	IT consumables	191.00	No information			
	Network equipment	743.00	10,244.00			
	Storage	268.00	128,569.00	Net App		
	Peripherals	27,690.00	101,106.00			
	<b>Total hardware</b>	<b>169,733.00</b>	<b>296,145.00</b>			
<b>Software</b>	Application licences	72,301.00	58,196.00		Include support	
	Middleware licences	47,376.00		ORION		
	System licences	46,319.00	1,440.00			
	<b>Total software</b>	<b>165,996.00</b>	<b>59,636.00</b>			
<b>Services</b>	Hardware maintenance	84,728.00	58,497.00			
	Software maintenance	553,563.00	973,879.00	McKesson	Includes licenses *	
	Custom software	125,821.00	3,450.00	Olympus		
	IT outsourcing	20,999.00	170,965.00		#	
	Managed comms	254,644.00	30,680.00	BT	**	
	IT consultancy	-	20,000.00			
	Training	20,639.00	No Information			
	System integration	52,992.00				
<b>Total services</b>						
<b>Telecoms</b>	Fixed line	3,599.00	1,224.00		Fixed lines not IT ##	
	Networking equipment					
	Wireless					
	<b>Total telecommunications</b>					

Staff	Total staff					
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Notes:

\* this may come under custom software as its mainly PACS,  
STAR HISS, EDS

\*\* Majority of this element passed to Skanska to  
support 09/10

# Includes STAR HISS Managed service & Development (£70k) not sure if this is out sourcing or software  
support.

## Broadband lines only Telecom's lines etc. not part of the Informatics therefore  
no information available.

3) Please indicate how you expect the total ICT budget for 2009/10 and 2010/11 to change for  
your organisation:

*Please tick just one answer per year*

	2010/11	2011/12
(a) increase by more than 10%		
(b) increase by less than 10%		
(c) remain the same		
(d) decrease by up to 10%	✓	✓
(e) decrease by more than 10%		

**6210**

**Various Enquiries**

1. A copy of the audited accounts for 2009/10  
[This information is currently not available.](#)
2. The names of the Trust auditors and their fees for 2009/10  
[Information not currently available.](#)
3. The names of the firms that supply all the patient food  
[This information was contained within our 2010 Quarter 1 disclosure log ref: 1210](#)
4. How many CT scanners; MRI scanners and PET scanners the Trust has. The costs of purchase and names of the suppliers.  
[As above.](#)
5. Salary bills of all medical consultants; nurses; admin staff; radiographers; pharmacists; technical staff; porters and cleaners.  
[Please see below table for details:](#)

<b>CATEGORY</b>	<b>AMOUNT</b>
Medical Consultants	£16,928,441
Nurses	£30,729,449
Admin Staff	£12,965,836
Radiographers	£1,509,866
Pharmacists	£1,180,629
Technical Staff	£1,490,786
Porters	£1,290,170
Cleaners	£3,683,890