

FREEDOM OF INFORMATION
DISCLOSURE LOG – Quarter 2 2010/2011

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11310	July 2010	Elderly Continuing Care Beds <i>(please email foi@walsallhospitals.nhs.uk for a copy of the reports mentioned within this response)</i>	4
11410	July 2010	IG Resources <i>(see response for 12710 (as below))</i>	-
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11910	July 2010	Facilities for people with learning disabilities <i>(Walsall Hospitals NHS Trust has no facilities re: the above. Please contact Dudley & Walsall Mental Health Partnership NHS Trust)</i>	-
12010	July 2010	Pornography in Fertility Department	9
12110	July 2010	Prescribing Formularies & Guidelines <i>(please email foi@walsallhospitals.nhs.uk for a copy of the reports mentioned within this response)</i>	9
12210	July 2010	Diabetes Service <i>(please email foi@walsallhospitals.nhs.uk for a copy of the reports mentioned within this response)</i>	10
12310	July 2010	IT Service Provision <i>(please email foi@walsallhospitals.nhs.uk for a copy of the reports mentioned within this response)</i>	11-14
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12510	July 2010	IT Contact Information <i>(see Trust Structures Log - http://www.walsallhospitals.nhs.uk/Library/Walsall09/AboutTheTrust/TRUST%20STRUCTURES%20LOG%202009.pdf)</i>	-
12610	July 2010	Deaths – No Next of Kin <i>This request was refused under Section 41: Information provided in confidence</i>	-
12710	July 2010	NHS IG Resources	15-17
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13110	August 2010	<i>This request was refused under Section 40(2) and Section 41 of the FOI Act</i>	-
13210	August 2010	Spending on Luxury Items	18
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14710	August 2010	ICT systems <i>(please email foi@walsallhospitals.nhs.uk for a copy of the spreadsheet mentioned within this response)</i>	28-29
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15410	August 2010	Unpaid Bills (Foreign Patients) 08/09 & 09/10 <i>(see also response for 8409 (Quarter 4 2009 Log))</i>	33

15510	September 2010	Annual Accounts 2009/10 (see link: http://www.walsallhospitals.nhs.uk/WalsallHospitals09/AbouttheTrust/Publications.asp or email foi@walsallhospitals.nhs.uk for a paper copy)	-
15610	September 2010	Clinical Guidelines	33
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15810	September 2010	Newborns / Pregnant Women and Drug Addiction	
15910	September 2010	Finance / Procurement / IT contact details (see Trust Structures Log - http://www.walsallhospitals.nhs.uk/Library/Walsall09/AboutTheTrust/TRUST%20STRUCTURES%20LOG%202009.pdf)	-
16010	September 2010	Health & Social Care Contacts (see Trust Structures Log - http://www.walsallhospitals.nhs.uk/Library/Walsall09/AboutTheTrust/TRUST%20STRUCTURES%20LOG%202009.pdf)	-
16110	September 2010	Oncology	35
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16310	September 2010	A&E Staffing (July 2010)	37
16410	September 2010	Agency spend on Doctors & Nurses 0910	38
16510	September 2010	Staff Redundancies and Budgets 2010-11 to 2014-15 (see also response for 4010 (Quarter 2 2010 Log))	39-40
16610	September 2010	Misdiagnosis (& histopathology) (information not held)	-
16710	September 2010	Costs of patients in hotels	40
16810	September 2010	Waste	41
16910	September 2010	Glaucoma (please email foi@walsallhospitals.nhs.uk for a copy of the reports mentioned within this response)	-
17010	September 2010	Compensation Payouts 0708 – 0910	42

11310

Criteria for an elderly person to be assigned a 'continuing care bed'

Under the Freedom of Information Act could you please tell me what criteria needs to be met for an elderly person to be assigned a 'continuing care bed'

Please find attached two documents detailing the criteria required for being assigned a 'continuing care bed':

1. Continuing Healthcare Needs Checklist
2. Decision Support Tool

Continuing Healthcare (CHC) funding is assessed for using the two documents listed above and depends on Nature, Complexity, Stability and Predictability of the nursing need.

CHC funding does not necessitate a Nursing Home Bed, patients can still be cared for in the community if that is their wish and their needs can be met in this way, then CHC would pay for an appropriate Package of Care.

If a patient has a short life expectancy of weeks, this tends to be more diagnosis orientated, please find attached the document which is used in this instance.

3. 'Fast track' documentation

11510
NHS Fraud

Part 1

- 1) What is the range of days allocated for your local counter fraud specialist function to undertake 'reactive' counter-fraud work annually for each of the last 3 years?
- 2) How many days are tabled by your local counter fraud specialist function for 'proactive' counter-fraud work annually for each of the last 3 years?
- 3) How much does your local counter fraud specialist function cost per day (£)? What has this been for the last 3 years?
- 4) Expressed as a figure (£), what has been the total Expenditure for your NHS Trust for each of the last 3 years?

Part 2

- 5) How many fraud allegations have been investigated annually for each of the last 3 years (defining an investigation as the time elapsed from when fraud is alleged to the time the case is closed)?
- 6) What has been the **range** of number of days (expressed at FTE) spent on counter fraud investigations for each of the last 3 years?
- 7) What has been the **average** number of days (expressed at FTE) spent on counter fraud investigations over the last 3 years?

	Question 1	Question 2	Question 5	Question 6	Question 7
2007/08	23.5	116	20	less than a day up to 12 days	average 1.5 days
2008/09	37.75	91.75	4		
2009/10	34.5	65.5	9		

Question 5: this is cases closed in year, includes enquiries, and where no fraud/irregularity discovered/proven. It does not necessarily correspond to referrals made in year

11610

Patient Bedside Units

1. Does the Trust have an agreement or contract with a Patient Power or NHS approved licensee to provide bedside telephone/television units? If so, I would like to know which company provides these services; when the agreement or contract was signed; and for how long the agreement or contract will be in place?

[The trust does not have any such contract or agreement.](#)

2. Do any clauses in the agreement or contract relate to the use of mobile phones within the hospitals under the management of the Trust, and if so, what is the exact wording of the clause(s)?

[Not applicable.](#)

3. What is the Trust's policy on the use of mobile phones within the hospitals under the management of the Trust, and when were written guidelines introduced?

[A copy of the guidelines are attached](#)

4. Did the Trust consult with the company providing and operating bedside units when compiling the Trust's policy on the use of mobile phones after guidelines were issued by the Department of Health in January 2009?

[Not applicable](#)

5. What are the charges made to patients for the use of the bedside units (for telephone and television usage)?

[The Trust does not apply any charges](#)

6. Is the Trust able, under the terms of the agreement or contract, to advise or request changes to the prices charged for usage of the bedside units?

[Not applicable](#)

7. Has the Trust ever tried to initiate changes to the pricing of telephone and television usage on the bedside units? If so, when, and for what reason?

[Not applicable](#)

8. Have the charges for making or receiving calls, or watching the television, changed since the introduction of the bedside units at hospitals managed by the Trust? If so when, and by how much?

[Not applicable](#)

9. Has the Trust received any complaints from patients about the bedside units? If so, I would like to know how many complaints have been received; when; and what exactly the complaints related to?

[No](#)

10. Is the cleaning of the bedside units the responsibility of the Trust or of the company operating the units?

[Not applicable](#)

11. Does the Trust generate any income from the agreement or contract with the provider of the bedside units? If so, how much is this worth annually, and under what terms is the income received?

[No](#)

Please could you also send me a copy of the agreements or contracts that have been signed between the Trust and the company/companies that have provided bedside telephone/television units.

[Not applicable](#)

11710

Rat and Mice Infestations

I am currently working as a freelance journalist researching a story about the growing rat and mice population in the UK. I would like to know how many cases of rat and mice hospital infestations you've had to deal with in the last five years.

April 2009/ March 2010

April 2008/ March 2009

April 2007/ March 2008

April 2006/ March 2007

April 2005/ March 2006

	2005/06	2006/07	2007/08	2008/09	2009/10
Rats, Bait Taken/Activity reported	3	9	15	20	15
Rat Sighting	0	3	0	2	0
Mice, Bait Taken/Activity reported	17	12	9	3	2
Mouse Sighting	2	0	0	2	2

Note: In the last 4 years we have had Major road works off site. In the last 3 years we have had Major construction work on site.

11810

Locum Doctor Costs

1. What was the total cost your Trust paid (in the each of the last three financial years for which data is available) for: a) all locum doctors? b) locum doctors covering surgical positions (see definition below)?

2. Please indicate, for each of the last three financial years for which data is available, the following: a) costs of providing locum doctors in each category below? b) costs of providing locum doctors covering surgical positions in each category below?

- * Consultant
- * Non-training grades (excluding consultants)
- * Trainee (Specialist registrar)
- * Trainee (Core trainee)
- * Trainee (Foundation year)
- * Other

3. Of the total costs paid to locum doctors, in each of the last three financial years for which data is available, what proportion was paid to: a) internal locums b) external agencies c) other (please state)

Definition: surgical positions are doctors working in any of the nine surgical specialties: Cardiothoracic surgery, General surgery, Neurosurgery, Oral and maxillofacial surgery, Otolaryngology, Paediatric surgery, Plastic or reconstructive surgery, Trauma and orthopaedic surgery, Urology.

Walsall Hospitals NHS Trust - 3 Year Locum Costs Analysis

Financial Year	07/08	08/09	09/10
	£000'S	£000'S	£000'S
<u>Section 1</u>			
All Locum Doctors Pay	2250	2211	2883
	2250	2211	2883
<u>Locum Doctors Covering Specialist Positions</u>			
General Surgery	262	231	211
T&O	181	203	325
Paediatric	159	193	205
Sub Totals	602	626	741
Other Specialties	1647	1584	2142
Grand Totals	2250	2211	2883

The Other Specialties That We Have Differ From That Specified In Your FOI Request

12010

Pornography in Fertility department

1. Does the fertility department use (or has the department in the past used) pornographic material for patient use?

No

2. If yes then what forms of material are available (e.g videos, magazines)?

Not applicable – see answer to question 1

3. And from which suppliers?

Not applicable – see answer to question 1

4. How much is spent on pornography a year by the institute (statistics for each of the past 5 available years if possible)? And how much of this is public and private funding?

Not applicable – see answer to question 1

12110

Prescribing Formularies and guidelines

Please could you provide the following:

- A copy of your most recent Prescribing Formulary?
[Please find the Prescribing Formulary attached to his email and listed as Appendix 1](#)
- VTE is now a CQUIN Target; due to this could you please provide your most recent Venous Thromboembolism (VTE) clinical policies or guidelines?
[Please find the VTE policy attached as Appendix 2.](#)

If the information is not contained within the formulary please can you answer the questions below:

- The name of the committee which updates the above?
[Medicine Management Quality Board of Walsall Hospital NHS Trust and Walsall Joint Medicines Management Committee](#)
- Review dates and next scheduled update dates?
[As stated per individual chapter in documents](#)
- Which other organisations use the above?
[Walsall Teaching Primary Care Trust](#)

12210

Provision of Diabetes Service

Please could you tell me if the Trust...

- Has published a diabetes care pathway?

[Please see attached document Guidelines on the Management of Diabetes.](#)

- Has produced diabetes management guidelines?

[Please see the attached Guidelines on the Management of Diabetes.](#)

- Has published prescribing guidelines for drugs to manage diabetes?

[Please also see the attached Guidelines on the Management of Diabetes.](#)

- Is part of a Diabetes network? And if so, which one?

[Birmingham Diabetes Club and also The Black Country Diabetes Club.](#)

12310

IT Service Provision

The IT Provision is a shared service provided across the following organisations NHS Walsall, Walsall Hospitals NHS Trust, Walsall Community Health Trust, Dudley and Walsall Mental Health Trust.

IT Service Provision Exercise	Informatics Notes
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Please complete this exercise to give a view of IT Service Provision within your organisation

Strategy & Management		
Attach IM&T Business Plan	To cover 2009/10 and 2010/11 or beyond. Please attach evidence.	Please find this information attached. (Appendix 1)
Attach IM&T Strategy	To cover 2009/10 and 2010/11 or beyond. Please attach evidence.	Informatics do not have a separate IM&T Strategy. Strategic aspects covered in above document
Is outsourcing being considered for IT? Describe:	No	
Is any element of IT currently being outsourced or is outsourced? Please define	No	
Is the IT Support function recognised with appropriate accreditation conforming to best practices? Please specify	e.g. CfH accredited service desk, ISO 20000 Service Management, ISO9001 quality management	No

Staffing/Structure		
Attach IM&T Organisation Chart	To cover all staff roles associated or included within the IM&T structure identifying WTE and banding - include honorary contracts, agency, apprentice and seconded staff	Please find this information attached. (Appendix 2)

Financials (please complete values)		
2009/10 Total IM&T Budget	Manpower/Staffing Cost	£807,575.00
	Non Staff Costs	£1,229,221.00
2010/11 Total IM&T Budget	Manpower/Staffing Cost	£669,775.00
	Non Staff Costs	£1,182,273
Service Desk Costs 2009-10	Manpower/Staffing Cost	£285,526
	Yearly value of ongoing licensing/maintenance costs for incident management/self service tools	£6,000
	Incident Support Toolset ongoing	£6,000

	maintainance	
	Telephony costs for SD (where costed to IM&T budget)	Minimal call costs only
Service Desk Costs 2010-11 (Apr-Jun)	Manpower/Staffing Cost	£60,872.00
	Yearly value of ongoing licensing/maintainance costs for incident management/self service tools	£1,500
	Incident Support Toolset ongoing maintainance	£1,500
	Telephony costs for SD (where costed to IM&T budget)	Minimal Call costs only
Desktop Support Costs 2009-10	Manpower/Staffing Cost	£336,953.00
	3rd party support contracts value	N/A
Desktop Support Costs 2010-11 (Apr-Jun)	Manpower/Staffing Cost	£77,388
	3rd party support contracts value	N/A
Infrastructure Support Costs 09-10	Manpower/Staffing Cost	N/A Skanska
	3rd party contracts value for server infrastructure	N/A Skanska
	3rd party contracts value for network infrastructure	N/A Skanska
	Yearly value of ongoing licensing/maintainance costs for infrastructure management tools	N/A Skanska
	Other Infrastructure apportioned costs	N/A Skanska
Infrastructure Support Costs 10-11 (Apr-Jun)	Manpower/Staffing Cost	N/A Skanska
	3rd party contracts value for server infrastructure	
	3rd party contracts value for network infrastructure	N/A Skanska
	Yearly value of ongoing licensing/maintainance costs for infrastructure management tools	N/A Skanska
	Other Infrastructure apportioned costs	N/A Skanska
IT Support Staff Training Costs 2009-10	Professional courses and qualifications e.g. Service Management, Microsoft, Cisco, A+ certifications	Non
IT Support Staff Training Costs 2010-11 (Apr-Jun)	Professional courses and qualifications e.g. Service Management, Microsoft, Cisco, A+ certifications	Non
IT additional costs not covered in the above 2009-10	Suppliers providing indirect IT services, consumables etc	Not paid by IT
IT additional costs not covered in the above 2010-11 (Apr-Jun)	Suppliers providing indirect IT services, consumables etc	Not Paid by IT

Infrastructure - Desktop		
Number of supported desktops 2009-10	break down by PCs, terminals, laptops	1339
Number of supported desktops 2010-11	break down by PCs, terminals, laptops	1339
Number of supported printers 2009-10	includes printers purchased and maintained by the IT support function (laser, thermal, labels)	94
Number of supported printers 2010-11	includes printers purchased and maintained by the IT support function (laser, thermal, labels)	94

Desktop Strategy	Is the organisation using or intending to use desktop virtualisation? Comment.	We are intending to review the feasibility of VDI
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Infrastructure - Server		
Number of physical servers excluding Hypervisor hosts	Total production and test environment hardware. Clustered boxes count as 2.	circa 30
Number of Physical Hypervisor hosts		15
Number of virtualised (Guest) servers in Production		48
Number of running\actively used virtualised (Guest) servers in Test/Development		38
Are any of your resources hosted offsite to a 3rd party? Please specify:		no
Server plans for 2010/11	Please attach or comment	Continued migration to VM environment

Infrastructure - Storage		
Number of SAN storage devices		4
Total SAN Capacity \ Used (Gb)	\	21000/14000
Is your SAN Replicated		Yes
Number of NAS storage devices		10
Total NAS Capacity \ Used (Gb)	\	30000/25000
Storage plans for 2010/11	Please attach or comment	None

Infrastructure - Network		
Which network vendor are you using for your wired Infrastructure	Cisco, 3Com, Aruba, HP, Other (specify)	N/A Skanska
Which network vendor are you using for your wireless Infrastructure	Cisco, 3Com, Aruba, HP, Siemens,Other (specify)	
Total number of Core Switches		
Total number of Edge Switches\Hubs		
Is your backbone Network Resilient (e.g. using Spanning Tree) - Please specify		
Age of the Core switches		
Age of the Edge switches		
Total number of wireless Controllers		
Total number of wireless Access Points		
Is your wireless environment resilient - please specify:		
Age of the Core wireless controllers		
Age of the wireless Aps		
Network plans for 2010/11	Please attach or comment	

	date
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Infrastructure - Backup / Security		
Backup Software Used throughout your organisation		Symatic backup exec
Are backups performed by a third party e.g. Offsite managed solution	e.g. suppliers like Sungard etc	No
Which Backup Methods are implemented across your estate	Break figures down by Tape, Disk, Other (specify)	Disk only except 1 Unix server backed up to tape
Attach a copy of your backup strategy		Full Backups are taken on a nightly basis, to be reviewed during 10/11

Software Support		
Number of supported Core IT Systems	6	
Number of supported other IT Systems	40	
Do you have a clearly defined service catalogue? Please provide evidence	No it is not clearly defined	
Are critical system availability reports produced? Please provide summary report from Apr 09-Mar 10	Information not available, MS ops manager procured in an attempt to collect this data in a meaningful way	

User Support		
Total users supported	Include organisations staff, bank, agency, 3rd party staff	3074
Number of sites supported		1
Number of IT Service Requests Apr 09-10	Service Requests/incidents logged with IT Service Desk	38356
Does the local IT Service Desk act as a central service for other back office functions e.g. Facilities, HR?	Service desk utilised by Registration Authority	

Note: This is for Walsall Manor Hospital only

Note: This is across all organisations.

National IM&T		
What NPfIT systems do you use	Please list e.g. C&B, Cerner Millenium, CSC IPM, Map of Medicine	PACS, C&B, ESR

12410

Information on telephone and mobile costs

1. How much does the trust spend per year on maintaining its fixed telephony infrastructure?

The fixed maintenance costs of the telephone infrastructure is aggregated within all of the maintenance costs for the whole of the Trusts site. This contract agreement for all maintenance on site is with the Trust's private finance initiative (PFI) partner Skanska

Therefore, this information is of a sensitive nature and as such is unable to be released under section 43 of the Freedom of Information Act 2000.

2. How much per year does the Trust spend on mobile telephony?

- 09/10 £38,324
- 08/09 £31,310

12810

Email addresses for surgeons

Could you supply me with the email addresses of those Dr's who work in oncology, cellular pathology, surgeons and any other consultant who specialise in liver, sarcoma, upper GI and gastroenterology.

For upper GI/gastro, contact details are as follows:

Oncologist:

Andrew Hartley (andrew.hartley@walsall.hospitals.nhs.uk)

Pathologists:

Andrew Thompson (andrew.thompson@walsall.hospitals.nhs.uk)

Iqbal Dhesi (iqbal.dhesi@walsall.hospitals.nhs.uk)

Surgeons/Consultants:

Mark Cox (mark.cox@walsall.hospitals.nhs.uk)

Amanda Hughes (amanda.hughes@walsall.hospitals.nhs.uk)

Ashish Awasthi (ashish.awasthi@walsall.hospitals.nhs.uk)

S Manjunath (s.manjunath@walsall.hospitals.nhs.uk)

All liver and sarcoma patients go straight to tertiary centres for treatment.

12710

Information Governance Staffing

See tables as below:

2008/9

Job Title	A4C Band	WTE of IG Role
Director of Informatics (Senior Info Risk Owner)	Senior Mgrs	25%
Medical Director (Caldicott Guardian)	Senior Mgrs	25%
Head of Performance, Risk & Assurance (Data Quality Lead)	8c	20%
Head of Records Management (inc. Subject Access Requests)	7	100%

Please note:

1. Any information on staff employed by NHS Walsall is not owned by Walsall Hospitals NHS Trust therefore we are unable to disclose this information.
2. The Director of Informatics is employed by NHS Walsall (PCT) and therefore we do not have any further information as requested.
3. Prior to June 2009 Information Governance at Walsall Hospitals NHS Trust was a shared service with NHS Walsall (PCT) with all staff employed directly by NHS Walsall, therefore for information prior to this period you will need to contact NHS Walsall.
4. All Informatics (IT) staff are employed by NHS Walsall (PCT) therefore any information re: Information Security / IT staffing of IG is held by the PCT.

Walsall Hospitals NHS Trust Structure Log is available on our website (link as below – scroll to the bottom of the webpage and link on the Trust Structures Log link):

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

Information Governance Staff work in the following areas: HR; Development; Informatics; Quality & Value Unit.

Please find attached copies of the job descriptions for Director of Development (SIRO); Caldicott Guardian; Associate Director of Performance; Information Governance Business Administration Manager and Data Protection Officer.

12910

Staff weight loss

1. Specifically I would like to know whether there are any schemes to help discourage doctors and nurses becoming overweight.
2. If yes, I would like details - does the hospital fund weight-loss courses for staff

With regard to initiatives to encourage Walsall Hospitals NHS Trust staff to be healthy we have:

- In-house weight management programme to help and advise staff
This is a free service run by the Trust's Occupational Health department
- A weight management programme for staff to have Slimming World/Weight Watchers vouchers for 3 months. However, staff must meet the set criteria of the BMI being over 30.
This is funded by Walsall Community Health.
- Staff can access www.walsallweightloss.org via the Trust Intranet page and they can also access it on the internet at home; the site produces an appropriate weight management plan.
This service is free.
- On the Hospital intranet there is a 'Getting Better for Staff' programme, under the heading 'Getting Healthier' staff can get information on physical activity timetables for all around the Walsall Borough, advice on how to manage weight, general health information and stress management.
This service is free.

13210

Spending on 'luxury' items

Please disclose any spending on the following luxury items by your organisation. In each case please detail the quantity purchased for each item, the type and size of each item purchased, the cost the item and the brand. If possible please also disclose the purpose for which the luxury item has been bought, although do not do this if it will mean exceeding cost limits.

I would like information on the following:

Caviar
Champagne
Cigars
Cigarettes
Brandy
Whisky
Vodka

No luxury items are ever purchased or ordered by Walsall Hospitals NHS Trust

13310

Patient Meals & Directors Expenses

1. In the 2009/2010 financial year what was the budget on ingredients for patients meals provided in the hospital? Please provide this figure as a financial amount per patient per day.

Walsall Hospitals NHS Trust does not record the information re: patient meals on a per patient per day basis. We have a contract with Anglia Crown for all patient meals. However, we spent £651,965 on provisions purchased for patient meals in 09/10

2. In the 2009/2010 financial year what was the most expensive restaurant bill claimed on expenses by any of the Trust's executives/ directors? Please state the name and address of the restaurant, how many people were dining and the job title of the director/executive who claimed the meal on expenses, and the cost of the meal.

No restaurant bill expenses have been paid to any executives / directors in 2009-10.

13410

Bed Moves

1. Any information held about the number of moves among patients collected between July 2008 and July 2010. Where possible please provide this as a percentage of total inpatients at the hospital or ward, at the time the information was collected. Where possible please separate the figures by number of moves, or number of wards patients have been on. Where possible please separate the figures by whether moves are for clinical need/indication or not.

In some cases trusts may link information to information about length of stay for the hospital or wards. If this is the case, please also provide that information where relevant.

Please provide information in the most detailed form analysed or reported by the trust - for example monthly, bimonthly or quarterly.

2. Some trusts have also begun to audit and measure the number and/or proportions of patients that are in beds in a speciality other than the one appropriate to them.

Please provide any information held about the proportion of admitted patients cared for in the appropriate specialty bed. Again please provide as appropriate to your trust, but if possible break down by division and/or speciality and/or ward. Again please provide the most detailed information analysed or reported - for example monthly, bimonthly or quarterly.

Please find attached two analyses as follows:

1. The first is representative of the number of ward transfers per patient stay in hospital. This includes all transfers for admissions from assessment units across the hospital and reflects both elective and non elective admissions.
2. The second relates to the transfers against average length of stay from admission to discharge.

As a Trust we are working towards producing performance reports to monitor patients that are cared for on wards other than the admitting speciality. These reports will then be used for performance purposes across the Trust.

13510

Accounts Payable Processes

I would like some information about your current Accounts Payable processes, please indicate:

1. Where the Accounts Payable team is currently based and if centralised?
Walsall Hospitals NHS Trust Accounts Payable team is based at Manor Hospital and is not centralised
2. Which finance system/accounting software the finance team uses to process supplier invoices?
Integra
3. Number of staff manually processing the invoices?
3.8 WTE
4. Volume of paper and electronic invoices processed per annum?
5000 invoices are processed per annum
5. Are paper invoices scanned at all?
Yes paper invoices are scanned after payment
6. Any plans to look at invoice automation/ OCR scanning in the next 6 months to a year?
No decision has been made at this time re: looking at invoice automation / OCR scanning within the Trust
7. If OCR/ Invoice automation systems already in place please indicate name of supplier?
Not applicable

13710

Marketing & Communications Spends

Please could you provide me with the following:

1. How much did the Trust spend on communications and marketing (including advertising and PR), including all staff costs, in the following years:

- a) 2007-08: Pay - £53,742.00, Non-Pay - £93,576.18
- b) 2008-09: Pay - £131,148, Non-Pay - £54,667.76
- c) 2009-10: Pay - £140,473, Non-Pay - £366,159.19

The non-pay functions include those listed at a high level below:

- Press /Media Handling
- Public Relations activity
- Regular internal staff communications and briefings and ongoing staff engagement activities
- Campaign management inc Hospital Redevelopment
- Membership communications
- GP communications and GP liaison
- Market (referral) analysis and reporting
- Intranet site development
- Trust website development
- NHS Choices website updates
- Dr Foster Hospital Guides entries
- Patient Information Leaflets
- Annual Report and Annual General Meeting
- Other Events management
- Preparation of Award submissions

2. Of this figure, how much did the Trust spend in 2009-10 on the following:

Media and communications staff - please list how many staff were employed, what their job titles were and their salaries

Please note that individual exact salaries are withheld under Section 40(2) Personal Information and are therefore not released, we have however released the bandings of staff for 2009/10:

Fiona Pendleton	Head of Corporate Communications	band 8b
Aimee Dyer	Marketing and Communications Assistant	band 4
Anna Sykes	Communications Lead	band 6
Lucy Curtis	Business and Market Analyst	band 6

Printing and design - other than rebranding	£44,183.04
Rebranding	£11,700
Advertising	£20,145.86
Website	£5050.00

PR agency	£2891.50
Media legal advice (e.g. defamation proceedings)	Nothing spent
Media training/consultancy	Nothing spent
Photography (NB not clinical photography – e.g. x-rays and photos for medical use)	£1581.75

3. Please itemise all media and communications spending over £10,000 in 2009-10, with a brief description (e.g. 'advertising in local magazine for year - £70,450', 'printing Trust brochure on dentistry - £50,421').

Events (event to launch our new hospital)	£15,985
Collateral (collateral about our new hospital)	£29,482
Advertising (campaign in Express & Star Group to advertise new hospital)	£14,045
Branding	£11,700
Staff engagement programme	£58,965

4. I realise that this may not fall into the marketing and comms budget, but please could you confirm how much the Trust spent on purchasing television screens in 2009-10? Please state what the purpose of the screens were and what type they were (e.g. plasma, widescreen etc), how many there were and how much they cost individually.

Total spent on TV screens	£8374.58				
Purpose of TV screens	patient viewing				
Type	flat screen TVs (11 in total)				
Individual cost of screens (£):					
459.98	919.96	3574.32	899.98	249.99	249.99
699.99	383.96	456.48	221.70	259.23	

14110 Chaplaincy Costs

How much did your Trust spend on chaplaincy (or equivalent non-Christian religious support) (pay and non-pay) funding in the financial year 2009/10 (or, if this is unavailable, in 2008/09).

Chaplaincy pay spend for Walsall Hospitals NHS Trust during 09/10 was £112,598 and Non Pay was £3,302

14010

Immunology Drugs (Biologics)

Please would you tell us the number of patients currently being treated in your trust with biologics for the following conditions, split by named biologic.

If possible, please supply the data using the following table.

[Please see data as per letter \(i.e. by department\).](#)

	Abatercept	Adalimumab	Certolizumab Pegol	Etanercept	Golimumab	Infliximab	Rituximab	Tocilizumab	Ustekinumab
Rheumatology	-	23	5	5	-	-	4	-	-
Dermatology	-	3	-	1	-	-	-	-	-
Respiratory	-	-	-	1	-	-	-	-	-
Gastro-Enterology	-	3	-	-	-	1	-	-	-

14210

HCA's employed within the Trust

I need some information about the staffing of the hospital. I have the following queries:

1. What is the number of Health Care Assistants working in the Walsall Manor Hospital.

Walsall Hospitals NHS Trust currently has 273.35 FTE employees whose designation is HCA

2. I want to conduct a survey about motivation of Health Care Assistants. Who should I speak to in this regard.

To conduct a survey you will need to make a formal request, explaining the purpose and objectives of the research and deal with methodology, ethics and confidentiality issues. Any formal requests can be directed to Director of Human Resources, Sue Wakeman, at the above address.

14310

Promotional Goods & Clothing

Please provide information on your corporate clothing and promotions contract, or contracts.

What is the (Annual) cost of corporate clothing (exc VAT) for your contract, or contracts?

Circa £30k clothing

What is the (Annual) cost of promotional items (eg pens, mugs, coasters) (exc VAT) for your contract, or contracts?

Unknown, promotional items are not coded separately therefore we are unable to give a figure.

When were the contracts awarded and to whom?

The company used re: the items mentioned is Alexandra (there is no contract start date available)

When are the next review date(s)?

The next review date is quarter 3 2011

Where and what date/month/year will you be advertising your future contracts for clothing and promotional items?

Clothing has recently been advertised in accordance with procurement guidelines

Is there a telephone contact number and email of the office/officer that would deal with this in the future?

01922 656506 – Procurement department

14410

Electives Procedures Contracted Out

I would like to know how many elective procedures the trust has contracted out to a non-NHS provider body since the beginning of the 07/08 financial year. This should be broken down by procedure (including HRG4 code or HRG3.5 if HRG4 is not available) cost per patient as well as total cost per year and contractor.

Year	Number carried out	Op1	Op2	HRG	UNIT Cost	TOTAL Cost	Procedure
2007/08	8	G331		F12	£6,500	£52,000	Gastric Bypass
2008/09	3	G303	Y752	F14	£6,160	£18,480	Gastroplasty Band Laparoscopic
	7	G331		F12	£9,855	£68,985	Gastric Bypass
	<u>10</u>					<u>£87,465</u>	
2009/10	4	G331		FZ04B	£7,900	£31,600	Gastric Bypass
	2	G303	Y752	FZ05B	£7,900	£15,800	Gastroplasty Band Laparoscopic
	<u>6</u>					<u>£47,400</u>	

Please also provide me with your policy on how long a patient must be waiting before they are treated in a private provider.

We do not have a policy that states the waiting time, however we work to ensure that the 18 week referral to treatment time is achieved. Where capacity issues exist patients are reviewed on a case by case basis by the PCT as the commissioners of the activity.

I would also like to know if the trust has a contract with the body, and how long this runs for.

We do not have a contract for this activity, assessed on a case by case basis.

14510

Inpatient & Staffing Information

Please can you provide the following information under the Freedom of Information Act.

1(a) For each of the hospitals the trust is responsible for, what are the nurse to patient ratios* for inpatient care at present? Please take average figures from across the hospital.

(b) What were they in 2009? Please give the figures for January 1, 2009, or if this is not possible on any date in the year they are available for.

(c) What were they in 2008?

(d) What were they in 2007?

(e) What were they in 2006?

(f) What were they in 2005?

(g) What were they in 2001?

(h) What were they in 1997?

* "Nurse" means fully trained nurses and NOT healthcare assistants / auxiliary nurses / any other assistants.

2(a) What is the total inpatient capacity of all the hospitals for which the trust is responsible? Inpatient capacity means the number of available beds. Please exclude people who come in for appointments during the day – "outpatients".

Jan-10	Feb-10	Mar-10	Apr-10	May-10	Jun-10	Jul-10
557	557	563	563	563	543	543

(b) What was it in 2009?

Jan-09	Feb-09	Mar-09	Apr-09	May-09	Jun-09	Jul-09	Aug-09	Sep-09	Oct-09	Nov-09	Dec-09
582	582	582	582	582	582	572	572	572	572	560	557

(c) What were they in 2008?

Apr-08	May-08	Jun-08	Jul-08	Aug-08	Sep-08	Oct-08	Nov-08	Dec-08
586	585	589	586	586	579	554	569	581

(d) What were they in 2007?

(e) What were they in 2006?

(f) What were they in 2005?

(g) What were they in 2001?

(h) What were they in 1997?

Please see below:
 2007/2008 - 572.1
 2006/2007 - 597.3
 2005/2006 - 649.4
 2001/2002 - 724.1
 1997/1998 - 755.7

Please note that the closure of Goscote Hospital in 2006/7 accounts for the decrease in bed numbers from 2005/6 to 2006/7 and 2007/8

- 3(a) How many nurses are employed at all of the hospitals for which the trust is responsible? (This means wholetime nurses – for example a nurse working 50 percent of normal working ours would count as 0.5)
- (b) How many were there in 2009?
 - (c) How many were there in 2008?
 - (d) How many were there in 2007
 - (e) How many were there in 2006?
 - (f) How many were there in 2005?
 - (g) How many were there in 2001?
 - (h) How many were there in 1997?

4(a) How many healthcare assistants / nursing auxiliaries / auxiliary nurses are there working at the hospital(s)? It may be that the hospital calls people performing this role something different – the definition I am working on can be found here
<http://www.nhscareers.nhs.uk/details/Default.aspx?id=485>

- (b) How many were there in 2009?
- (c) How many were there in 2008?
- (d) How many were there in 2007
- (e) How many were there in 2006?
- (f) How many were there in 2005?
- (g) How many were there in 2001?
- (h) How many were there in 1997?

Please see below table for staff employed within the Trust (questions 3 & 4):

As at 31 March	Qualified	Unqualified
2001	722.53	362.94
2005	797.15	371.79
2006	781.53	382.40
2007	778.78	337.98
2008	760.15	306.67
2009	736.43	391.37
31-Jul-10	729.56	373.84

14710
IT Systems

Could you please provide me with the following information (Please find attached a spreadsheet with the data fields below for help with easy completion of the information):

1. Trust name
2. Trust annual turnover
3. IT Budget
4. Number of sites care records system is delivered to

For each of the Clinical 5 Systems and Departmental Systems listed below (that are currently installed in your Trust):

Clinical 5

1. Patient Administration System (PAS)
2. Clinicals: Order communications
3. Clinicals: Diagnostic reporting
4. Discharge letters with coding
5. Resource Scheduling (for beds, tests and theatres)
6. E-Prescribing

Departmental

7. A&E
8. RIS
9. Theatres
10. Maternity
11. Pathology
12. Pharmacy
13. PACs

Other IT systems

1. Integration Platform/Technology
2. Business Intelligence & Data Warehousing
3. Document Management.

For each of the categories above can you supply the following details. (If you are using more than one supplier or running multiple systems for a particular category please detail)

- Are you using National Program for IT Systems (NPfIT)?
- Local Service Provider
- Is this system locally or remotely hosted?
- If "Remote", by whom
- Software supplier name
- Software product name
- Product Version Number
- Date installed
- Number of licenses
- Number of concurrent users at peak time
- Which other systems does this integrate with?

- Software system Contract expiration date
- When do you plan to replace system or revisit contract?

If the information is not applicable, then please enter 'N/A', if it is not recorded by the trust, please enter 'unknown'.

Please see attached excel spreadsheet. Please also note that the Informatics department is a shared service with NHS Walsall (PCT) therefore the figures shown for IT budget covers both Walsall Hospitals NHS Trust & NHS Walsall.

**14810
ProCure 21 Questionnaire**

I should be grateful if you could arrange for the attached questionnaire to be completed and returned to me:

Please see below completed questionnaire:

NHS ProCure 21 Questionnaire

1. Name of Trust **WALSALL HOSPITALS NHS TRUST**

2. Has your Trust used P21 in the last 3 years
(please tick the appropriate box)

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>

3. What was the approximate amount of capital spent on P21 projects by your Trust in the financial years shown below:

2007/08	£1.4	Million
2008/09	£ NIL	Million
2009/10	£ 1.6	Million

4. Which of the following PSCPs has your Trust used in the period 2007/08 to 2009/10:
(please tick the appropriate box or boxes)

Balfour Beatty	<input type="checkbox"/>
Costain	<input type="checkbox"/>
BAM	<input type="checkbox"/>
Integrated Health Projects (IHP)	<input type="checkbox"/>
Interserve Health	<input checked="" type="checkbox"/>
Kier Health	<input type="checkbox"/>
Laing O' Rourke	<input type="checkbox"/>
MedicinQ	<input type="checkbox"/>

5. What is the approximate amount of capital your Trust is likely to spend on P21 projects in the financial years shown below:

2010/11	£NIL Million
2011/12	£ NOT KNOWN Million
2012/13	£ NOT KNOWN Million

6. Please provide the details shown below about the individual employed by your Trust who takes a lead role in determining which PSCP should be used:

Name [DAVID LAWSON](#)
 Title [COMMERCIAL DIRECTOR](#)
 Tel No [01922 656299](#)
 Email address david.lawson@walsallhospitals.nhs.uk

Note: if there is not one individual who takes a lead role in selecting PSCPs, please provide details of the senior manager responsible for managing the Trusts capital programme.

15010

Software Applications

Under the terms of the Freedom of Information Act please provide the information requested in the following matrix. Complete the matrix with a Yes, Y, or a tick in the box that most closely represents your current situation for each of the software applications. Please also provide the names of relevant suppliers

Application	We have this software application in place	We are in the process of procuring and/or implementing software for this application	We are considering software for this application	We have not considered software for this application	We have discarded this application software. It did not meet our needs	Please name your current or prospective software suppliers for each application
Summary Care Record/Vital health information	X					Orion
Ordering of tests, patient based services, and reporting of pathology and radiology results		X				Anglia ICE, Orion, EMIS, iSOFT
PAS suite (managing referrals, waiting lists, care planning etc)	X					Mckesson Star and iSOFT i.PM
SNOMED or other type of coding	X					As above
Contract management	X					In house
Mental Health Act Management	N/A					
Prescribing medicines		X				Ascribe
Maternity and Theatre Management		X				Out to tender
Commissioning	X					In house
Stock and Inventory Management	X					RES-OR
Links for telehealth			X			N/A

15210

Wristbands / PAS / NN4B

Could you tell me the specific brand of wristband (and printer) the trust has purchased to meet the NPSA requirements for printed patient identification please.

Walsall Hospitals NHS Trust uses Zebra HC 100 wristband printers

Could you tell me what PAS the trust has in place?

McKesson STAR PAS

What plans does the trust have to meet the NN4B baby blood spot requirements?

We have fully implemented Bar code labels for new born screening blood spot cards since December 2009.

Staff have received training on this project with ongoing training in the form of a power presentation hand out. NN4B is the NHS number at birth and the bar coded labels are generated at the same time. Every sample should have at least the NHS number to correctly identify new babies i.e. twins etc

We keep a book of all samples sent each day and a team leader has to check each morning that the NHS Number/bar coded label is present. There is 100% zero tolerance as missing data would result in sample being rejected, delaying possible treatment etc...

15310

Highest paid consultant

*Please note that the figure given below may include some or all of the following:

Basic Pay:	Consultants basic pay scale runs from £74,504 - £100,446 (dependant on years of service)
Clinical Excellence Awards (CEA's):	£2,957 - £75,746 (dependant on level awarded)
Waiting List Initiative payments (WLI's):	Overtime payments are payable to some consultants staff where the demand for our services outweighs our basic capacity

I would like figures for the highest salary earned by a hospital consultant (doctor, not manager) over the last year.

The highest Consultant earnings for last year is £285,407.00 (basic pay + CEA's + WLI's)

I would like the figures to include all earnings from other hospital trusts.

We would not know if there were earnings from other hospitals as that information is not available to us (as payments would have been made by another Trust and not via our payroll system)

15410

Unpaid Bills (Foreign Patients) 0809 & 0910

1. What is the total in unpaid bills owed to your Hospital Trust for (a) the 2008/2009 and (b) the 2009/2010 financial years including monies already written off from foreign nationality patients who have been billed by the Trust, i.e. those not eligible for free NHS care.

The total unpaid bills including monies written off were £20,329 (2008/09) and £20,864 (2009/10).

2. What proportion of the figures for each financial year relates to maternity/obstetrics care?

The information is not available at this date, however this is in the process of being collated and confirmed.

3. In the total figure for each financial year what is the biggest outstanding bill and please give a brief description of the care that it relates to together with the nationality or country of residence of the patient?

2008/9 – information as per response 8409 (sent on 5th November 2009)
2009/10 - £4558 for a patient of Pakistani nationality

As per our response (8409) sent on 5th November 2009 the details of care are withheld as to release this information would breach Doctor/Patient confidentiality.

15610

Clinical Guidelines

I would like to make a request for information regarding clinical guidelines.

Please could you provide the following:

- Acute Coronary syndrome guidelines;

Cardiology services, including acute coronary syndromes are managed via the National Institute of Clinical Excellence Guidelines. A link to the guidance is contained below:

<http://guidance.nice.org.uk/CG94/Guidance>

Direct clinical guidance is adapted from the above NICE guidance and is provided by the Black Country cardiac Network (copy attached)

- Breast cancer guidelines;
- Bowel cancer guidelines;
- Lung Cancer guidelines.

All MDTs at Walsall Hospitals NHS Trust work with their Cancer Network Site-Specific Groups to develop and implement agreed guidelines for clinical, referral, imaging and pathology. These guidelines can be accessed via the following link: <http://www.birminghamcancer.nhs.uk/>

15710

Orthodontists

- 1.a) How many orthodontists allied to your hospital currently earn more than £200,000 p.a.?
- b) How many orthodontists allied to your hospital currently earn more than £250,000 p.a.?
- c) How many orthodontists allied to your hospital currently earn more than £300,000 p.a.?

Walsall Hospitals NHS Trust has no orthodontists earning more than £200k per annum

2. Please provide details of the five most highly paid orthodontists (although I understand you may not name them), including the following information:

- a) Their NHS earnings for the last three financial years

Walsall Hospitals NHS Trust has only 1 orthodontist, therefore the exact pay received is withheld under Section 40(2): Personal Information.

However the pay banding for this consultant is as follows:

£74,504 - £100,446

- b) a breakdown of these earnings (i.e. how many practices/hospitals have they worked for? Which practices/hospitals?)

We will only hold information on earnings relating to Walsall Hospitals NHS Trust.

- c) How long each has worked as an orthodontist for the NHS (if known)

Unknown.

- d) Their job titles

Consultant Orthodontist

16110
Oncology

A. Data relating to the treatment of patients with advanced renal cell carcinoma (RCC)		
Treatment for patients with advanced renal cell carcinoma (RCC)	Number of RCC patients currently* receiving the treatment	Number of RCC patients who have received the treatment in the last 12 months
A1 - Bevacizumab	Not stocked	N/A
A2 - Sorafenib	None	None
A3 - Sunitinib	9	13
A4 - Temsirolimus	Not stocked	N/A
A5 - Other treatments	None	None

* Currently - the number of patients under the care of a Trust physician who are, at the present time, receiving the drug treatment, either as an inpatient or outpatient.

B. Oncology Funding	
B1 - In the last 12 months, how many business cases were submitted from Oncologists requesting funding for patients with advanced renal cell carcinoma	None
B2 - The number of patients involved in the business cases in B1	N/A
B3 - In the last 12 months, the number of individual funding requests submitted by your oncologists requesting funding for the treatment of patients with advanced renal cell carcinoma	None
B4 - The number of those individual funding requests that were approved	N/A

C. The treatment of patients with specific conditions		
Condition	Treatment	Number of patients currently* being treated
C1 - Non Small Lung Carcinoma	Bevacizumab	N/A
C2 - Squamous Cell Carcinoma of the head and neck	Cetuximab	none

* Currently - the number of patients under the care of a Trust physician who are, at the present time, receiving the drug treatment, either as an inpatient or outpatient.

16210
Haematology

A. Data relating to the treatment of patients with Idiopathic (immune) thrombocytopenic purpura (ITP)		
Treatment for patients with Idiopathic (immune) thrombocytopenic purpura (ITP)	Number of ITP patients currently* receiving the treatment	Number of ITP patients who have received the treatment in the last 12 months
A1 - Eltrombopag	none	none
A2 - Romiplostim	none	none
A3 - IVIg (immunoglobulin)	none	16
A4 - Steroids	6	6
A5 - Rituxumab	1	3
A6 - Other treatments	none	none
A7 - Specify the other treatments	none	none

* Currently - the number of patients under the care of a Trust physician who are, at the present time, receiving the drug treatment, either as an inpatient or outpatient.

B. Haematology Treatment	
B1 - Within the haematology consultant group, is/are there select individual haematologists who either specialise in ITP, or to whom the other haematologists (either within your own trust or from other trusts) refer ITP patients?	no
B2 - If yes would you please give their names	n/a
B3 - In the last 12 months, how many business cases were submitted from haematologists requesting funding for ITP Patients	None
B4 - The number of patients involved in the business cases in B3	n/a
B5 - In the last 12 months, the number of individual funding requests submitted from haematologists requesting funding for ITP Patients	none
B6 - The number of those individual funding requests that were approved	n/a

C. The treatment of patients with specific conditions		
Condition	Treatment	Number of patients currently* being treated
C1 - Rheumatoid Arthritis	Abatacept	none
c2 - Alzheimer's	Donepezil	none

* Currently - the number of patients under the care of a Trust physician who are, at the present time, receiving the drug treatment, either as an inpatient or outpatient.

16310
A&E Staffing (July 2010)

1. How many staff were on duty on the nightshift of Saturday 3rd July 2010 and Wednesday 7th July 2010 in your A&E unit and what were their roles, i.e. doctor, nurse etc?

Please see response to question 3 below.

2. On those nights how many of the staff on duty were agency staff?

There were no agency staff on duty over the night shift.
There was 1 bank nurse working twilight on 3/7/10 who works regular shifts in A&E

3. What was the clinical staff status on duty for each of those nights? i.e. Consultant, Registrar, junior doctors etc.

3rd July 2010

Night duty:

6 trained nurses (1 Sister & 5 band 5 staff nurses) &
1 untrained on twilight shift (17.30-01.00)

From midnight:

Medical staff - 1 Consultant on call; 1 Registrar and 1 Senior House Officer (SHO)

7th July 2010

Night duty:

6 trained nurses (1 Sister & 5 band 5 staff nurses) &
1 untrained on twilight shift (17.30-01.00)

From midnight:

Medical staff - 1 Consultant on call; 1 registrar / staff grade
1 SHO (0.00-08.00) & 1 SHO (18.00-02.00)

16410

Agency spend on Doctors & Nurses 0910

How much did your hospital trust spend on (a) agency nursing care and (b) agency Doctors in the 09/10 financial year?

- a. Agency nursing care £475k in 2009/10
- b. Agency Doctors £1872k in 2009/10

On how many occasions was more than £1,000 paid for a single shift for an agency doctor?
Please itemise these occasions showing the date, hours worked, department where the employee worked and the grade of that person.

Assuming a 'shift' is 1 Doctors session (4 hours), we have not made any payments over £1,000 for a single shift.

On how many occasions was more than £1,000 paid for a single shift for an agency nurse? Please itemise these occasions showing the date, hours worked, department where the employee worked and the grade of that person.

There have been no occasions were more than £1000 was paid for a single agency nurse shift.

16510

Staff Redundancies & Budgets (2010/11 – 2014/15)

1. The savings the Trust expects to have to make over the next five financial years (from 2010/11 to 2014/15 inclusive), broken down by year, expressed both as an amount and as a percentage of the current total trust expenditure.

The information requested (as above) has previously been released and is available via our Disclosure Log (ref: 4010) below is the link to the webpage containing our publication scheme, the disclosure log link is on page 6 of the scheme:

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

However, please note that the Trusts Long Term Financial Model (LTFM) is currently under review and therefore the figures previously stated may change.

In terms of percentage of the 2010/11 Trust expenditure the figures are:

2011/12	1% decrease on 2010/11
2012/13	8% decrease on 2010/11
2013/14	12% decrease on 2010/11
2014/15	12% decrease on 2010/11

2a. The number of confirmed, planned and/or potential job cuts to be made or under consideration by the Trust over the next five financial years (from 2010/11 to 2014/15 inclusive), expressed if possible as the reduction in total WTE headcount (both as a number and a percentage of current total WTE headcount) net of new posts the Trust intends to create (or additional staff the Trust intends to recruit) over the same period. If there will in fact be a net increase in WTE headcount, the WTE level of increase should be provided (both as a number and a percentage).

2b. The number of job cuts as requested in 2a, but broken down between clinical and non-clinical posts and expressed as a gross WTE figure rather than as a net figure; and the number of additional staff/new posts referred to in 2a, also broken down between clinical and non-clinical posts and expressed as a gross WTE figure. (Therefore, if the Trust is cutting non-clinical posts but reinvesting the savings in creating additional clinical posts, this will be reflected in the data provided). Any extra detail the Trust holds that is readily accessible regarding the classification of posts removed or created (e.g. paramedics, nurses within 'clinical'; management, admin within 'non-clinical') and their location should be provided.

2c. With regards to any gross headcount reduction as described in 2b, where this is the result of staff being transferred to other NHS Trusts as a result of the planned restructuring of service delivery, please specify the WTE figure that this applies to, and the Trust(s) to which said staff are being transferred. So, if 100 WTE posts are being deleted from the establishment, but 50 of these are from a specialist team that is being transferred out of the Acute Trust and into a different Trust due to the relocation of service delivery into the community (presumably with a commensurate increase in headcount at the recipient Trust), please specify that 50 of the 100 reduction is due to transferral of staff out to the specified recipient Trust.

3. If no information is available with regards to points 1 and 2 because proposals have not yet been drawn up, please provide a rough timescale for when these proposals are due.

There are no confirmed, potential or planned job cuts currently being made or considered within Walsall Hospitals NHS trust over the next 5 financial years. However, please note that this position may change in the future in response to external factors.

The information requested (re: current WTE staff) has previously been released and will be available via our Disclosure Log (ref: 4010) on 30th April 2010 (below is the link to the webpage containing our publication scheme, the disclosure log link is on page 6 of the scheme):

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

16710

Patient Hotel Costs

1. How much has your trust spent on hotel rooms for patients in each of the last three full years for which you have records? For example, 2007, 2008 and 2009 or 2007/08, 2008/09 and 2009/10.

The Trust has not spent any funds on hotel rooms for patients in any of the years specified.

2. What are the names and addresses of the hotels that have been used by your hospital in that period? What is the highest nightly rate you paid to any of those hotels in that period? Which hotel was that?

N/A

3. How much was the highest amount billed to your trust for a single patient's stay at a hotel in that period? What is the name of that hotel? What was the nightly rate? How many nights was the stay for?

N/A

4. Please provide details of any policy or guidance your trust has on placing patients in hotels.

The Trust does not have a policy or guidance on placing patients in hotels

16810
Waste

The questions below relate only to municipal (non-hazardous household), non-hazardous offensive and hazardous infectious bagged waste streams (not sharps).

Please note: all amounts given are estimated as information on waste is not presented to the Trust as per the below tables.

1. The total amount of waste (in weight) produced by the organisation:

	2008/9	2009/10
Municipal (black bags)	755,040 tonnes (approx)	755,040 tonnes (approx)
Offensive (tiger stripes)	40,138.49 kgs	54177.56 kgs
Infectious (orange or yellow)	478,331.00 kgs	546,196.45 kgs

2. Associated costs for collection and treatment/disposal of these wastes:

	£2008/9	£2009/10
Municipal (black bags)	£192,829.92	£210,125.52
Offensive (tiger stripes)	£34,765.45	£39,625.08
Infectious (orange or yellow)	£289,801.53	£272,010.57

3. Which methods of waste treatment/disposal are you currently using?

Waste stream	Possible methods	Method
Infectious waste	Alternative treatment/incineration	Specialist Contractor inline with the National Contract / treated and incinerated at an registered transfer station
Municipal	Landfill, Energy from Waste, MRF's (material recycling facility), source segregated dry recyclables e.g. glass paper, plastic bottles, cans	Transferred to a registered waste transfer station
Offensive	Landfill or energy from waste	Specialist Contractor inline with the National Contract which they transfer to an registered Transfer station

4. Do you currently compact offensive waste? Y/N

No

If No – do you have plans to use compaction in the next financial year?

No, the Trust uses a specialist contractor re: waste disposal therefore there are no plans to use compaction.

5. How often does your organisation report on the management of waste at board level?

Annually/quarterly/monthly/never

Never

17010

Compensation Payouts 0708 - 0910

Please disclose a breakdown of the compensation payments made by the trust in response to claims made by patients or former patients. Include both court rulings and out-of-court settlements.

Please provide details for the last three full financial years, including the total amount paid each year and a breakdown of payments including a brief summary of the reason for claim (where this does not infringe data protection restrictions).

Where possible, also include a breakdown of how much of the money was paid to the claimants' legal representative in costs.

Financial Year 2008/09

Costs re slip, trips and falls	£10,495.53
• slip on wet floor	£6,867.67
• trip and fall into chair	£450
• trip on raised kerb stone	£3,177.86
Damage to wheelchair	£26.50

Financial Year 2009/10

Costs re slip, trips and falls	£17,065.22
• a fall down some steps	£409.17
• slip / trip and fall	£7,106.05
• a fall into a tarmac dip	£9,550
Hand trapped in lift door	£3,000

The information provided does not separate the legal representatives costs from that of the costs paid in settlement to the patient as the information is not recorded separately.