

**FREEDOM OF INFORMATION
DISCLOSURE LOG – Quarter 3 2011/2012**

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0151/11**Reorganisation of Walsall Manor Hospital**

I write to request an up to date list of subcontractors, suppliers and consultants involved in the redevelopment and reorganisation of the Walsall Manor Hospital. The project will include a women's and children's centre, a diagnostic and treatment centre, a multi-professional education centre, a pathology department and the refurbishment of some of the older wards. Associated works will include infrastructure, sewer systems, enabling and landscaping.

Walsall Hospitals NHS Trust (now integrated to form Walsall Healthcare NHS Trust) contracted ProjectCo for the redevelopment of its estate. Therefore, please find below contact details of ProjectCo as the Trust contractor, please contact them directly in order to obtain further information regarding sub-contractors hired to work on the Manor Hospital Redevelopment.

ProjectCo – Telephone; 01922 629985

0152/11**iPads, iPhones and iPods**

Description of information sought:

The number of iPads, iPhones and iPods bought by the Trust in 2009/10, 2010/11 and from April 2011 to September 2011.

	How many have been provided to staff in your organisation		
Response Required	2009/10	2010/11	April-Sept 2011
The number of iPads, iPhones and iPods bought by the trust	0	6	1-5
Cost	£0.00	£2870.34	£350.00

	How many have been provided to staff in your organisation		
The number of the following brought by the Trust	2009/10	2010/11	April- Year to date 2011
iPads	0	6	1-5
iPhones	0	0	0
iPods	0	0	0

The exact figures cannot be released due to breach of Data Protection Act.

0153/11
Senior Officers/Application Software

Following widespread restructuring in NHS I would like to know the name and email address of the senior officer currently in the following roles at your organisation:-

- a) Finance (e.g. Finance Director)
- b) Human Resources (e.g. Head of Human Resources)
- c) Information Technology (e.g. IT Director)
- d) Performance Management (e.g. Performance Manager)

If the organisation has entered into Shared Service with another NHS body, can you please let me know the name of that organisation and which officer from either organisation now leads the above functions.

Additionally, in relation to the use of application software in your organisation I would like to know the name of the Vendor and application name for the following systems:-

- a) Finance General Ledger (e.g. Oracle Financials, Agresso)
- b) Planning/Budgeting (e.g. Excel, SPSS, component of Ledger system)
- c) Human Resources (Personnel/payroll e.g. iTrent, Resourcelink, HR-Pro)
- d) Performance management (e.g. Covalent, Corvu, Inphase. This software has typically recorded your National, Local and Partnership Indicators)
- e) The Corporate Business Intelligence reporting tool (e.g. Cognos, Crystal, Business Objects)

Role	Name
Finance (e.g. Finance Director)	Shahana Khan
Human Resources (e.g. Head of Human Resources)	Sue Wakeman
IM&T	Steve Darkes
Performance Management (e.g. Performance Manager)	Shahana Khan

System	Informatics Response
Finance General Ledger (e.g. Oracle Financials, Agresso)	Integra
Planning/Budgeting (e.g. Excel, SPSS, component of Ledger system)	Prodacapo, Budget Master, Excel
Human Resources (Personnel/payroll e.g. iTrent, Resourcelink, HR-Pro)	ESR
Performance management	MS Excel, MS Word, MS Access

The Corporate Business Intelligence reporting tool (e.g. Cognos, Crystal, Business Objects)	SQL Reporting Services, Excel and Access
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0154/11

Elderly beds

1. What changes has the trust made to the numbers of General Medicine Beds, or what changes does it plan to make, during the following periods? 2010-11 financial year; 2011-12 financial year to date; Remainder of 2011-12 financial year.

There have been no changes to the General Medicine bed configuration during 10-11. In the financial year 11-12 funding has been secured for additional 9 beds on the Acute Medical Unit. The opening of an Integrated Discharge Unit, a 33 bedded unit for step down of patients from acute beds whose acute phase of illness has been managed, began on 17th October 2011. These 33 beds have changed from acute to none acute beds.

2. What changes has the trust made to the numbers of Elderly Rehabilitation Beds, or what changes does it plan to make, during the following periods? 2010-11 financial year; 2011-12 financial year to date; Remainder of 2011-12 financial year.

There have been no changes in Acute Rehab capacity.

3. What changes has the trust made to the numbers of Specialist Elderly Beds, or what changes does it plan to make, during the following periods? 2010-11 financial year; 2011-12 financial year to date; Remainder of 2011-12 financial year.

None, refer to question 1 IDU

0155/11

Mid Staffordshire NHS Foundation Trust Public Enquiry

1. We are now asking, under the Freedom of Information Act 2000, whether anybody from the Strategic Health Authority (SHA) was involved in any way in discussing or facilitating the **termination** of Mr David O'Neill's employment at the Trust

Following review we can find no written record of any intervention from the SHA in discussing or facilitating the termination of Mr David O'Neill.

We are unable to establish whether any verbal interaction between the SHA and the former managers took place as these staff left the Trust approximately 12 months ago.

0156/11

Overseas Patients

What was the value of treatment given to overseas patients who were not entitled to free treatment in 2009/10 and 2010/11?

2009/10	2010/11
£5,711.94	£263.00 – Net figure

In each year, how much of this was unpaid and is now owed to the hospital?

2009/10	2010/11	
Unpaid	£4,563.00	£3,982.00
Owed to the Trust	£0.00	£3,620.00

How many overseas patients were treated in each of these years, who did not pay their bills?

2009/10	2010/11	
Number of bills unpaid	7	3

What were the three most costly bills for individual patients who did not pay their bills in each year, for which conditions were they being treated and what was their nationality and sex?

2009/10

£1,750.00 BACTERIAL INFECTION	-	UAE	- MALE
£1,050.00 CHOLELITHIASIS/GASTRITIS	-	CANADIAN	-
FEMALE			
£700.00 BIRTH WITH MINOR COMPLICATION	-	INDIAN	-
FEMALE			

2010/11

£2,172.00 HYPERPLASIA OF THE PROSTATE	-	AMERICAN	- MALE
£724.00 UNSTABLE ANGINA	-	AMERICAN	- MALE
£724.00 CEREBROVASCULAR DISEASE	-	CANADIAN	- MALE

0157/11

HR Workforce

Details of your strategy for HR and Workforce development

Training requirements for the year 2011/2012 and beyond

[Information available upon request](#)

0158/11

ICT Spent

1) Could you please provide us with your organisation's 2010/11 and 2011/12 total ICT budget or estimate?

2) Could you please provide us with your ICT budget and spend for 2010/11 and 2011/12 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).

3) If you have allocated spend in the IT outsourcing category, please identify which categories of IT service - as per the table below - are included in the contract(s) involved. If the relative percentages of spend are readily available (i.e. if you procure for these elements separately) then please also indicate these.

[Information available upon request](#)

0159/11

VTE Documentation

Acute Coronary Syndrome (STEMI/non-STEMI) clinical guidelines / patient care pathways / treatment protocols.

[Guideline's available upon request](#)

Guidelines for the use of clopidogrel, prasugrel and ticagrelor in Acute Coronary Syndrome (ACS)

[Walsall Healthcare NHS Trust does not use Ticagrelor, the guidelines are also in line with the Black Country Cardiac Network as we all work to the same guidance.](#)

[Walsall Healthcare NHS Trust does use Clopidogrel and prasugrel available upon request.](#)

If the Trust holds this information and is in a position to pass this information on, then I would like to submit the following request for Re-using the information:-

Request for Re-use

We (Cegedim Relationship Management) request permission to re-use on our database the information received as a result of this request. This is a commercial database with all publication details staying true to the publisher. The database is available free to all NHS personnel. If you would like a password, please visit our website www.onekeyplus.co.uk and select the info@onekeyplus.co.uk tab to send an email to request a password. Please include your Organisation and Job title.

0160/11

Charges for NHS Treatments

What was the amount (in pounds sterling) of charges for NHS treatments and exemptions for people visiting the UK levied by your Trust in the year (a) 2006/07 (b) 2007/08 (c) 2008/09 (d) 2009/10 (e) 2010/11?

[2006/07 - £14,394](#)

[2007/08 - £41,070](#)

2008/09 - £27,650
2009/10 - £5,711.94
2010/11 – (- £263)

This amounts to £88,562.94 in total.

What is the amount (in pounds sterling) of charges for NHS treatments and exemptions for people visiting the UK levied by your Trust in the year (a) 2006/07 (b) 2007/08 (c) 2008/09 (d) 2009/10 (e) 2010/11 which remain unpaid?

2006/07 - £5,748
2007/08 - £26,363
2008/09 - £18,437
2009/10 - £5,375
2010/11 – £3,620

This amounts to £59,543 in total.

0161/11 Breaches of Data Protection Act

1. The number of a) medical personnel and b) civilian employees that have been convicted for breaches of the data protection act in the past three years.

Please see below

2. The number of a) medical personnel and b) civilian employees that have had their employment terminated for breaches of the Data Protection Act in the past three years

Please see below

3. The number of a) medical personnel and b) civilian employees that have been disciplined internally but have not been prosecuted for breaches of the data protection act in the past three years.

Please see below

In each case, I request that you provide a clear, itemised list of the offences committed by the individual in question i.e. "*Abusing privileged access to medical records*" or "*Passing information about a patient to an unauthorised third party*".

I would like the information displayed in the table below.

Medical / civilian?	Outline of what was accessed/information passed to third party	Action taken criminal/discipline	Conviction
Civilian	Passed information about a patient to a 3rd party	Disciplinary - final written warning	No

Civilian	Passed information to a 3rd party	Disciplinary - first written warning	No
Civilian	Accessed information for personal interest	Suspended - one week, clinically suspended - ongoing	No
Medical	Accessed information for personal use	Suspended Referred to GMC	Conditions placed on license to work as a Doctor

For clarity, our definition of the "past three years" is the period up from 25th July 2008 to 25th July 2011

0162/11

Electronic Equipment

What does your organisation currently do with its waste electronic or electrical equipment?

[Please see below.](#)

Does your organisation pay to dispose of the equipment? If so how much is the cost per annum?

[Please see below.](#)

Is the disposal of your waste electronic / electrical equipment governed by a contract? If so when does the contract period come up for renewal?

[Please see below.](#)

Please advise on the steps we need to take if we wish to be considered to provide a free clearance service for all your waste electronic or electrical equipment?

[Please see below.](#)

FOI Request	Response
What does your organisation currently do with its waste electric or electrical equipment?	<p>Informatics: All redundant IT equipment is collected and centrally managed by our IT Department. All data is erased from the hard drives and equipment prepared for recycling as per our Security Policy. Where possible IT Services reuses or recycles equipment to provide refurbished PCs and parts to keep costs down. Only equipment that is BER (Beyond Economic Repair) is sent to be approved external contractors to be broken down and recycled as per WEEE requirements.</p> <p>Walsall Healthcare NHS Trust: uses a contractor for disposal of general electrical equipment.</p>
Does your organisation pay to dispose of this equipment? If so, how much is the cost per	<p>Informatics: Using our approved disposal companies the cost for the last year has been</p>

annum?	£1437.35 Walsall Healthcare NHS Trust: £5K per annum in reference to electrical equipment
Is the disposal of your waste electronic/electrical equipment governed by a contract? If so, when does the contract period come up for renewal?	Informatics: No current contract is in place, however, the Trust is currently preparing tender documentation and will be tendering later in the year Walsall Healthcare NHS Trust: Yes, it is governed by – Weir waste contract disposal. The contract runs from May 2009 – May 2013 for general electrical equipment. Walsall Healthcare NHS Trust: We dispose of obsolete medical equipment by sending to 3 rd world countries – no contract is in place.
Please advise on the steps we need to take if we wish to be considered to provide a free clearance service for all your waste electronic and electrical equipment?	Informatics: Once a formal tender has been prepared it will be published on the Trusts tender website for all interested parties to apply. Walsall Healthcare NHS Trust: Contact Procurement Department

0163/11

Data Breaches of IT

Description of information sought:

Description of information sought:	Our Response
In the last five years, how much has the trust spent on encrypted memory sticks and encryption software for computers and laptops?	£15,010.15 Encryption - Free (only cost of memory sticks)
In the last five years, how much has the trust spent on computer equipment, laptops, and encryption software for staff to be able to work from home? Please breakdown the cost by item and date of purchase.	We wouldn't be able to advise on this, as laptops etc are procured for a number of reasons, one of which is home working. We have no method of differentiating between a laptop computer equipment purchased for office or home working.
In the last five years, how many encrypted memory sticks/laptops or how much computer equipment has been lost by staff? If so, how much did each item cost by item? When were the items lost?	0 laptops were lost within the last 5 years.
In the last five years, how many data breaches have occurred at the trust? What data was revealed or published, to whom and via what	None

medium? When did the breaches occur?	
In the last five years, how many staff have been disciplined for data breaches, losing encrypted memory sticks/laptops/computer equipment or working at home without necessary encryption software? What were their names, job titles at the time of the breaches and what were their subsequent punishments?	None
Has the trust been fined by the Information Commissioner's Office or issued apologies to patients of their families in any cases?	None

**0164/11
Stroke Services**

How many stroke beds does your organisation have and what is the split (between acute beds and rehabilitation)?

28 beds, combined acute and acute rehab

• How many occupational therapy staff are there (WTE and MPE)?

7.16 WTE (8 MPE) split between qualified and non-qualified

• How many physiotherapy staff are there (WTE and MPE)?

7.51 WTE (8 MPE) split between qualified and non-qualified

• Do the therapy staff only work on the in-patient areas or do they see patients outside of the organisation (i.e. Outreach to patients in their homes, ICT facilities, etc)?

They do outreach to patients in their own homes if this is short term, for more long term care the community therapy team would see the patients. The community team see the ICT patients

• Do the therapists work across 5 days or 7 days?

Physios do 6 days (Sunday – Friday) and OT do 5 days (Monday – Friday)

• If working across the weekend is it part of their working week or is it paid as overtime?

Part of their working week for the qualified staff.

• Is it a full service at the weekend or is it a reduced service?

It is for assessment of new patients and any urgent reviews, if no new patients then they will see other stroke patients.

• If it is a reduced service, what WTE and MPE do you have working for physiotherapy and occupational therapy on each weekend day, what skill mix is there and what do they cover at the weekend?

1 band 5 or 6 physio and 1 assistant.

• Does the weekend working cause a reduction in WTE and MPE available Monday-Friday?

Across the 6 days it does reduce the MPE of qualified staff down by 1 on a Friday.

- Does each patient, where appropriate, receive 45 minutes of therapy per working day?

Do not achieve this with all patients.

- Who is operationally responsible for the management of the stroke therapy staff?
A band 7 therapist with overall management by the Therapy manager.

0165/11

Contact Details of Senior Staff

The Director of IT / Informatics / IM&T

Director of IT / Informatics / IM&T – Steve Darkes, steve.darkes@walsall.nhs.uk

The Assistant / Associate Director of IT / Informatics / IM&T

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information).

The Head of IM&T

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information).

The Head of IT

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information).

The Head of Information

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information).

The IT Manager

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information).

The IT Network Manager

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information).

0166/11

Contact Details of Senior Staff

Can you please send me the forename, surname and email address of, where in post, the following job holders:

1. Director(s) of Nursing or Quality or Risk or Clinical Governance or Integrated Governance or Patient Safety.

Director of Nursing – Sue Hartley sue.hartley@walsallhealthcare.nhs.uk

Director of Corporate Affairs and Trust Secretary –
dawn.kenny@walsallhealthcare.nhs.uk

2. Assistant or Associate Director(s) of Nursing or Quality or Risk or Clinical Governance or Integrated Governance or Patient Safety.

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information)

3. Head(s) of Risk or Clinical Governance or Integrated Governance or Patient Safety.

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information)

4. Head(s) of Midwifery.

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information)

0167/11

HIV / DNA Rates

Request	Response
What is your most up to date available Did Not Attend (DNA) rate for your HIV clinic is please?	See below
Ideally this would include Number of Attendances not Attended, the total number of attendances and the DNA % rate but if you can only give the DNA % rate then that would still be helpful.	See below
If it is not possible to split HIV out from Infectious Diseases or GUM clinics then please could you let us have the overall clinic DNA rate and indicate that it is the	Total for overall activity of Acute and Community for GUM Service. Total appointments – 16647

overall clinic rather than just the HIV clinic.	Total attendances – 14647 DNA – 2000 % DNA - 12.01%
Could you also please indicate the date(s) for which the DNA was measured (e.g. for August 2011)?	The figures relate to the time period 1st April 2011 to 30th September 2011

Please note that these figures relate to overall clinic activity and not just HIV clinics. Please also note that these are Walsall Healthcare Trust figures and as such represent both the Acute and the Community GUM service figures combined.

0168/11

Contact Details of Senior Staff

1. The Director of Operations

Chief Operating Officer / Director of Operations – Jayne Tunstall,
jayne.tunstall@walsallhealthcare.nhs.uk

2. Any Assistants / Deputies / Associates of Operations

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal information)

3. Any Divisional Directors of clinical or medical directorates

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal information)

4. Any Clinical Directors

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal information)

5. Any Divisional Managers / Divisional General Managers / General Managers of clinical or medical directorates

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal information)

6. Any Heads of Operations

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal information)

0169/11
Procurement

Could you please give me the name and email address of the Head of Procurement or Purchasing, and the Chief Pharmacist.

Director of Pharmacy – Will Willson, will.willson@walsallhealthcare.nhs.uk

Head of Procurement

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal information).

0170/11
Items Stolen in the Trust

Description of information sought:	
A list of all items which have been stolen from Walsall Manor Hospital in the last year, belonging either to the Trust or to patients, and the dates on which they were stolen.	
Our Response	
13/01/2011	£10
30/03/2011	£20
04/05/2011	£3
25/05/2011	Handbag
16/06/2011	£40
21/06/2011	£50
08/06/2011	Play Station 3
11/07/2011	Shoes

0171/11
Salaries

The number of members of staff employed by the Trust currently in the following salary brackets:

Description of information sought:	Our Response
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1) More than £200,000	0
2) Between £150,000 and £199,999	Between 1-5
3) Between £100,000 and £149,999	10
4) Between £50,000 and £99,999	201
5) Between £20,000 and £49,999	2184
6) Under £19,999	1597

0172/11

Finance Structure

Director(s) of Finance

Director of Finance – Shahana Khan shahana.khan@walsallhealthcare.nhs.uk

Assistant Director(s) of Finance

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal information).

Associate Director(s) of Finance

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal information).

Head(s) of Finance

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal information).

Head(s) of Management Accounts

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal information).

Finance Manager(s)

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal information).

**0173/11
Circumcision**

Description of information sought:	Our Response
1. Fixed price fee for a male circumcision operation	<p>The prices given below are from private patients price list updated to 2011/12 price levels The private patient fee for a Religious Circumcision is dependent by age. Only performed on children</p> <p>Age Under 2 (Ward) - £267 Age Over 2 (Day Theatre) - £393</p> <p>If the procedure is not religious or an adult the price charged would be dependent on length of stay in Theatres and a price of £623 (operations lasting up to 30 minutes) is the likely charge.</p>
2. Names of Urology consultants & their outpatients fees prior to the operation	<p>The Outpatients fee would be £79 £80 (With Nursing) / £73 (Without Nursing)</p> <p>The Urology Consultants are: Mr Koneru Mr Ferrie Mr Ganta</p>
3. Fee for a 1 night stay in hospital for the operation	<p>Fee for a 1 night stay in hospital for the operation - £342 (Non-intensive)</p>
4. Fixed price fee for both knee joint replacements	<p>The average mean cost is £6,922 based upon 5 days recovery. The cost of £9,658 is currently the cost for a longer recovery period of 13 days (the current average for September 2011), however please note that the charge will increase by a daily charge for inpatient services beyond 13 days. The cost for 2 knee replacements will therefore be double the costs listed above.</p> <p>Please note that only 1 knee joint can be replaced in any procedure</p>
5. Names of consultants orthopaedic surgeons &	<p>T & O Consultants are: The Outpatients fee would be £80 (With Nursing) / £73 (Without Nursing)</p>

their outpatients fees prior to the operation	Mr G Alo Mr W Goude Mr S Goswami Mr J Iqbal Mr M Jiggins Mr T Sadique Mr G Selzer Mr M Shah Mr R Kundra
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**0174/11
Diabetes**

I would like to make a request for information regarding Diabetes documentation at Walsall Healthcare NHS Trust.

Patient Care Pathways relating to Diabetes;
[Available upon request](#)

Treatment Protocols relating to Diabetes;
[Available upon request](#)

Clinical Guidelines relating to Diabetes;
[Available upon request](#)

**0175/11
Senior Staff Contact Details**

I would like to make a Freedom of Information Act request for the following information:

- Band 7 and above managers & staff employed by the Trust – actual details of individuals
[Please note that we do not release individual staff names and email addresses this is withheld under section 40 \(personal Information\)](#)

- Title, First Name, Last Name, Job Title, Department, Specialty (if applicable) of the above individuals
[Please note that we do not release individual staff names and email addresses this is withheld under section 40 \(personal Information\)](#)

If this information is already published in a readily accessible form including the above data points, I would be grateful if you could point me towards it. If not, I would be grateful if you could provide it.

[Please note that the Trust structures are available on the following website:](#)

<https://www.walsallhealthcare.nhs.uk/media/122705/truststructureslog.pdf>

0176/11

WHO checklist

I am writing to make a freedom of information request regarding the World Health Organisation (WHO) Surgical safety checklist use in your trust.

1) Is the WHO surgical safety checklist in use in your hospital? When did you start using it?

The Trust uses the checklist for all Patients undergoing surgery and began this process in February 2010

2) If so, has the use been audited?

Yes, Audit is conducted on a monthly basis

3) What are your compliance rates a) overall, b) in main theatres, c) in Day Case surgery and d) other areas it is used (please specify)

The Monthly Audit completed in November 2011 shows 100 % use of the checklist across all areas in a sample of 20 records

4) What are your compliance rates for a) sign in completed, b) Time out completed c) Sign out completed.

a) Sign in?

b) Time out?

c) Sign out?

Sign in & Time out completion was seen in 100% of cases. Sign out was completed in 90% of cases with x2 records not having this recorded. This information having been addressed by the head of nursing and to feature alongside wider results to the divisional quality board.

5) Do you have a lead person overall in charge of compliance with the WHO Surgical safety checklist? If so what position/ specialty are they? (e.g. consultant anaesthetist, Theatre manager, etc.)

Individual's practitioners have a responsibility for the completion & action on each checklist prior to surgery. The overall operational lead for the checklist audit is the Matron for theatre

6) Is there a single designated person allocated to each step to confirm completion of each of the three steps (sign in, time out and sign out), and if so what position/specialty are they for:

There is no single designated person however this role is undertaken by a member of the Theatre practitioner team

7) In your trust since 1st February 2010 to today, how many patients have:

a) been anaesthetised without prior completion of a valid consent form?

1-5

b) had surgery performed on the wrong site?

0 incidents where surgery has been performed on wrong site.

c) had the wrong procedure performed on them?

0 incidents had the wrong procedure performed on them

0177/11

Communications

Description of information sought:	Our Response
Do you provide information to the following via your web site/intranet/extranet: <ul style="list-style-type: none"> • Patients • Partners • Employees 	Yes we use our website for external communications and our intranet for internal/staff communications to provide information to patients, partners and employees.
What other channels do you use to communicate with Patients, Partners and Employees?	<p>Staff - weekly e-newsletter, quarterly staff magazine, posters and flyers distributed around wards and departments, payslip attachments, monthly senior management team briefing.</p> <p>Patients and Partners - press releases and statements to local and regional press, plasma screens located in key places around the hospital, a twice-yearly membership magazine, website.</p>
Do you have a call centre? If so how many agents do you have working at the call centre?	There is a total of 2.4 wte that operate the call centre, which is made up of 3-4 staff depending on the day of the week.
Are your patient communications likely to increase from the following channels: <ul style="list-style-type: none"> • Call Centre • Email • Social e.g. Facebook, Twitter 	<p>Call Centre - no, this is purely for outpatient appointments</p> <p>Email - we have a small number of email addresses for our members and occasionally send them communications by email. The chance of increasing this is dependent on our membership development strategy.</p> <p>Social e.g. Facebook, Twitter - yes, we are</p>

<ul style="list-style-type: none"> • Web Self Service 	<p>planning on developing Facebook and Twitter communications ASAP. Web Self Service - No.</p>
<p>Do you have a Customer/employee Interaction strategy in place? If so please could you let me have a copy of document? Also, could you let me have the contact details of the sponsor please</p>	<p>I have attached a copy of our corporate communications strategy, however this is due for an update next year - it currently refers to Walsall Hospitals NHS Trust rather than Walsall Healthcare and is quite out of date now.</p>
<p>If you do not yet have a Customer/Employee Interaction Strategy currently, are you planning to develop such a strategy for 2011/2012? Please could you provide contact details of the person who is will be the sponsor for this strategy.</p>	<p>As above</p>

0178/11

Security of Medicines

Please send me a copy of the Trust's last clinical audit that reviewed the storage and security of medicines and / or controlled drugs in the trust hospitals.

We do not undertake whole site audits in one go, it is undertaken on a rolling basis and is under review at present following the multiple reconfigurations.

I attach the pro-formas we use for CD checking and Ward based storage checking plus the rota. I also include an excel spreadsheet we are in the process of developing to move from paper to an electronic version for ward storage. For CDs we have an electronic system for managing the scheduling of the audits. For reference I attach scans of a recent ward storage and CD audit

We utilise the audit forms developed by the West Midlands Dispensary managers' Group.

0179/11

Pest Control Services

Description of information sought:	Our Response
How much did the Trust spend on Pest Control Services in the financial year 2010/2011	£5000
Who is the principle officer responsible for Pest Control	Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information).
Their contact details	Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information).
When is the tender due for renewal	31/12/11 with an option to extend for a further 2 x 12 month periods, extended to 31/03/12

0180/11

On-site Fitness Centre

How many employees are located in the building of Walsall Healthcare NHS Trust?

TRUST	No of Employees (Head count)	FTE (Full Time Equivalent)
Walsall Healthcare NHS Trust	4115	3403.24

The Trust is situated across several buildings within the Walsall Borough.

Is there an on-site Fitness Centre at your site for employees to have the use of?

We do not have any fitness centres on any of the sites where our staff are based the reason I say this is Walsall Healthcare NHS Trust is now combined with the community and the building we occupy we are tenants in the buildings they are either owned by PFI, GP Practices, NHS Walsall or Private companies.

If so, how many members does the fitness centre have? N/A

Is the Fitness Centre internally or externally managed? N/A

Is the Fitness Centre funded/subsidised? N/A

If so, what is the annual cost to the company? N/A

Is there a membership fee for the members? N/A

If so, how much is this? N/A

Is the Fitness Centre externally managed? N/A

If so, which company currently holds the contract for this? N/A

Who in the building is in charge of this contract? And what are their contact details
When is the contract due to expire? N/A

Is the Fitness Centre internally managed? N/A

If so, who in the building is in charge of this? And what are their contact details? N/A

0181/11

Compensation Claims

- Please tell me how much compensation money has been paid to your staff as a result of accidents at work in the past five financial years (1 April 2006 - 31 March 2011)
- Please also break this down per accident, giving details of a) the accident b) injuries sustained c) compensation paid out d) the year
- Please indicate whether the compensation pay-outs are paid by the trust's insurers or whether the money has to come from the trust's budget. If the pay-outs are paid by the trust's insurers, please tell me how much the excess is.

The report (attached) explains how much compensation money has been paid out to employees as a result of accidents at work in the past five financial years from 1st April 2006 – 31 March 2011.

The report has been broken down into the following:

Number of pay-outs for the Year, the Category of the Incident, amount received in compensation and details of the Incident.

Please note that anything under the excess which is £10,000.00 the Trust would pay anything over £10,000.00 then the NHSLA will pay.

0182/11

Cost of Missed Appointments

What has been the estimated total cost to the trust resulting from:

The information provided is for Walsall Healthcare NHS Trust for the new organisation which formed on 1 April 2011.

a) Missed outpatient appointments for each financial year that the trust has been in existence?

Year End Financial	Count
31/03/2012	21053

b) Missed surgery appointments

Please supply further clarity regarding what your definition of 'surgery' in the context of your enquiry.

0183/11

Redacted compromise /settlement agreements

This is a Freedom of Information request for all redacted compromise /settlement agreements reached with individuals with whom the Trust has admitted liability for medical negligence since 1 January 2008

The Trust does not enter into compromise agreements in clinical negligence claims.

0184/11

Health & Safety Job Descriptions

Please can you provide the following Job Descriptions as set out in your Health and Safety Structure:

1. Head of Safety & Non Clinical Risk

[Available upon request](#)

2. Health & Safety Co-ordinator

[Available upon request](#)

3. Health & Safety Advisor

[Available upon request](#)

0185/11

Contact Details for Senior Staff

I would like to request the names and email addresses for the following members within the organisation:

Temporary Staffing Bank Manager:

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information)

HR Manager:

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information)

Head of Procurement:

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information)

0186/11

Wound Care Formulary

The latest Wound Care Formulary/ Formularies for your trust, in accordance with the Freedom of Information act.

Available upon request

0187/11

Enterobacter cloacae

1. How many cots do you have on your neonatal and transitional care units?

The Neonatal Unit currently has 15 cots in total – 2 Intensive Care 2 High Dependency and 11 Special Care.

The Trust does not have a Transitional Care Unit.

2. Please confirm the number of individuals or environmental sites from which you have isolated an Enterobacter cloacae for the last calendar year by month stating whether from babies, staff, parents or the environment

Please see below

No environmental swabs have been taken.

3. Were any of the cases of Enterobacter cloacae a) Amp C producer b) ESBL producer or c) carbapenem resistant. If yes how many.

There were ZERO cases of Enterobacter cloacae a) Amp C producer b) ESBL producer or c) carbapenem resistant.

Month	AmpC / ESBL / Carabapenen
January 10	Zero

February 10	n/a
March 10	Zero
April 10	Zero
May 10	Zero
June 10	n/a
July 10	n/a
August 10	Zero
September 10	Zero
October 10	n/a
November 10	Zero
December 10	Zero

0188/11

Baby Feeding Products

Does your trust (1) purchase any of the following baby products or a close match and (2) what are the volumes in £s purchased over the last 12 months or your last financial year and (3) from which supplier?

The name or names and contact details of the persons in charge of purchasing the above products.

See below

Baby feeding bottles

Reference Number	Volumes	£s Purchased	Supplier
FSG014	50ML BOTTLE	£4.647.06	NHS SUPPLY CHAIN
FSG003	130ML BOTTLE	£ 726.21	NHS SUPPLY CHAIN
FSG 004	250ML BOTTLE	£ 38.18	NHS SUPPLY CHAIN

Teats for baby feeding bottles

Reference Number	Volumes	£s Purchased	Supplier
FWG009	-----	£9121.36	NHS SUPPLY CHAIN

- Anti-colic feeding bottles – Do not purchase
- Infant soothers – Do not purchase
- Orthodontic shaped soothers – Do not purchase
- Premature baby soothers – Do not purchase

Breast pumps single – Do not purchase
 Breast pumps double – Do not purchase
 Breast pumps electric – Do not purchase
 Contact nipple shield – Do not purchase
 Disposable bra pads – Do not purchase
 Hydrogel breast pads – Do not purchase

Could you also supply the names and contact details of:

Lead Midwife or Supervising Midwife(s)

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information)

Infant Feeding Co-ordinator or Specialist (or similar)

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information)

Purchasing or Procurement Manager

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information)

Estates Manager

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information)

Lead infection control nurse or nurses.

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information)

0189/11

Rheumatoid Arthritis

For adults (ages ≥ 18) newly diagnosed with Rheumatoid Arthritis (RA) what would be the initial steroid regime used by each Rheumatologist at your Trust (or group of hospitals under your Trust’s management).

Rheumatologist #1		
1. Do you routinely use steroids?		Yes
2. What route do you use? (please tick as appropriate)		
	Oral	✓
	Intramuscular	✓
	Intra-articular	✓
	Oral and Intramuscular	
	Oral and intra-articular	
	Oral, intramuscular and intra-articular	
3. If oral; (please specify)		

	What dose do you start with	15 mg
	How do you taper	By 5mg
	How long you routinely (duration) use	3 weeks
4. If intramuscular; (please specify)		
	What dose	80/120mg intramuscular depomedrone
	How frequently For how many months	Every 3 months until medication/ disease controlled
5. If intra-articular; (please specify)		
	What dose	40mg/80mg of Kenalog or 40mg depomedrone & lidocaine
	How frequently	every 3 months
	How many joints per month	Every 3 months per single joint can range from 1 - 4 joints
	For how many months	For 12 months

0190/11

Trust Spend

Could you please provide either by return email or post, all information pertaining to:
Trust spend (known and estimated) on Medical Locums

Medical Locum Costs	
Apr 2010 - Mar 2011	Apr 2011 to Oct 2011
Hospital = 2,388,355	£2,237,476

Trust total spend (known and estimated) on agency workers

Total Trust Agency Spend	
Apr 2010 - Mar 2011	Apr 2011 to Oct 2011
Hospital = £4,358,096	£4,804,253

Details of any Trust e-rostering software under licence used to manage agency or substantive workers

We do not currently have a single e-rostering software solution that manages agency or substantive workers. We have separate systems as follows:

System	Purpose	(Financial year 2010-2011 as well as year to date)
Rosterpro	Rostering nurse staff (substantive workers)	2010-2011 - £28,306.69 Year to date – no expenditure (but will be the same as above for this financial year)
Allocate	Booking & managing bank & agency staff	£8,630 per year

Confirmation of which categories of spend the Trust has a staff bank for
Please could you clarify this question.

Confirmation of whether the Trust has any managed service or master vendor arrangement in any category of agency worker spend and particularly with regards to medical locums

We do not have a managed service or master vendor arrangement for these categories

Full details of the commercial arrangement including any gainshare, direct payments or other payments and / or the current and planned operational model(s) in any category of agency worker spend and particularly with regards to medical locums

None

Details of what procurement basis, i.e the methodology or justification used to procure and appoint such a third party to a managed service or master vendor position in accordance with the Public Contract Regulations 2006

Not Applicable

The defined objective(s) from the revised procurement strategy where such a master vendor or managed service has been put in place

Not Applicable

Confirmation of which medical locum suppliers are your tier one and tier two suppliers

Tier 1

Medacs Healthcare Services Plc

Tier 2

Resuscitate Medical Services Limited
Nationwide Locum Services Limited
DRC Locums Limited
Medecho Limited
Total Assist Recruitment Limited

0191/11

Senior Staff Contact Details

1. The Director of Communications
The Trust does not have a Director of Communications in post
2. The Head of Communications
Ann Baines – anne.baines@walsallhealthcare.nhs.uk
3. The Director of Estates, or the Assistant / Associate / Deputy Director of Estates
Chief Operating Officer - Jayne.Tunstall@walsallhealthcare.nhs.uk
4. The Director of Facilities, or the Assistant / Associate / Deputy Director of Facilities
As above
5. The most senior person responsible for Occupational Therapy
Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal information)
6. The most senior person responsible for the Trust's 18 Weeks Performance, where applicable
Jayne.Tunstall@walsallhealthcare.nhs.uk
7. The Director of HR or Workforce or Organisational Development
Sue.Wakeman@walsallhealthcare.nhs.uk
8. The Deputy Director of HR or Workforce or Organisational Development
The Trust does not have a Deputy Director of HR or Workforce or Organisational Development in post
9. The Assistant Director of HR or Workforce or Organisational Development
The Trust does not have an Assistant Director of HR or Workforce or Organisational Development in post
10. The Associate Director of HR or Workforce or Organisational Development
The Trust does not have an Associate Director of HR or Workforce or Organisational Development in post

0192/11

Deceased patients without next of kin

My request is for information regarding persons who have died with no known next of kin since 1/6/11 to the present day that have been passed, or may shortly pass to the Treasury Solicitor and any cases where the Deceased died before 1/6/11 but have still to be passed to the Treasury Solicitor.

Therefore, I would appreciate it if you could send me:

1. the Deceased's date of death
2. the Deceased's surname
3. the date the matter was passed (or simply if you believe the case will be passed) to the Treasury Solicitor (or Duchy of Lancaster or Cornwall or Q<R in Scotland)
4. the area of the Deceased's last known home address at death expressed as a postcode area (for example ME14)

The Trust is not aware of any claims for patients that have died intestate since the 1 June 2011 that will be passed or are waiting to be passed to the Treasury Solicitor.

0193/11

Haemofiltration

Description of information sought:	Our Response
Which haemofiltration fluid (s) does the Trust currently use (e.g. Acusol, Priskasol)?	We use Hemosol Bo fluid 5l.
How many bags of fluid are used per year?	We have used 470 bags of fluid 01.04.10. – 31.3.11.
Is this fluid on a contract?	It is on a contract with Gambro.
When does the contract end?	The contract expires June 2012.
Is the contract linked to the supply of haemofiltration machines?	The contract is linked with the machines.

0194/11

Peri-mortem retrieval of sperm

1. Have you ever been asked to carry out peri-mortem retrieval of sperm (the surgical removal of sperm close to or after death)?

The Trust has never been asked to carry out peri-mortem retrieval of sperm (the surgical removal of sperm close to or after death).

2. If yes, how many times?

N/A

3. If yes, how many requests were granted and carried out?

N/A

4. If yes, was the sperm used in IVF?

N/A

5. If yes, how many babies were born and in which years?

N/A

6. If yes, did the requests for peri-mortem retrieval come from wife/girlfriend, parent, sibling, other relative, non-relative?

N/A

0195/11

Industrial Action

Description of information sought:	Our Response
The number of workers employed by your organisation who were on strike on 30/11/11	397 staff members
For the above please reveal the combined pay they forfeited that day by being on strike	£34223.54
Please detail the total number of workers employed by your organisation as of 30/11/11	4005 staff members

0196/11

Midlands Politics Show request

Please can you send me the following information under the Freedom of Information Act:

Any correspondence in and out of your organisation regarding the decision to close the A&E unit at Stafford hospital, dating back to September 2009.

I am particularly interested in correspondence with any of the following organisations: Stafford Hospital; West Midlands Strategic Health Authority; Department of Health; University Hospital of North Staffordshire; Royal Wolverhampton Hospitals Trust (City Hospital); Stafford Borough Council; and Burton Hospitals Trust (Queen's)

I would be interested in any information held by your organisation regarding my request.

I understand that I do not have to specify particular files or documents and that it is the responsibility of your department to provide the information I require.

Walsall Healthcare NHS Trust have no disclosures to make in relation to your request as we were not party to correspondence on the decision to close Mid Staffordshire A&E Department.

0197/11

Pathways

Please could you supply the following information:

- Referral Pathways / Care Pathways / Prescribing Guidelines for Anaphylaxis
- Referral Pathways / Care Pathways / Prescribing Guidelines for Allergic Rhinitis I would also like to request:
- Diabetes Service Specifications / Service Level Agreements (SLAs)

There are no current service specifications or care pathways for the diabetes service, the diabetes team do however have a number of treatment protocols in use for diabetes emergencies which are based on Royal College Guidelines.

In the example of Anaphylaxis & Other clinical guidelines the Trust is a partner within the West Mercia Evidenced Based Management Guidelines and is partnered with North Staffs Acute Trust for this work. The anaphylaxis guidance is contained below. There is no local guideline for rhinitis outside of existing royal college guidance and standard medical practice.

[Anaphylaxis version 1 Valid 2011-12 – Information available upon request.](#)

0198/11

Posts reclassified as management roles since 2008

- A) the details of any posts which have been reclassified as management roles since 2008 through to the present day and included into the revised management costs
- B) all posts which have been dispensed with to concur with the 30% reduction in management costs as stipulated by the Secretary of State for Health Andrew Lansley
- C) I would like this information broken down by year with the job title, and salary, including job type, such as clerical, clinical, psychological, consulting, etc. (individual names need not be disclosed).
- D) Please also indicate the directorates for which these posts apply (i.e. Commissioning, workforce, NHS finance performance and operations etc.)
- E) I would like this information set out in Excel

following a search of our paper and electronic records, I have established that the information you requested is not held by this Department. [Unfortunately the Trust does not hold this information.](#)

0199/11

Training sessions for staff from overseas

Please note that I am only interested in information which relates to the period January 1 2011 to the present day.

1....Does the NHS Trust run classes and or workshops and our courses and or similar to help those staff who may have been recruited from overseas and or for

whom English might not be their first language. These classes could include but will not be limited to English language lessons as well as sessions on British customs and or values and or history. The sessions will also include but will not be limited to sessions designed to familiarise staff with colloquial terms for medical treatments and conditions as well as sessions about the principles and operation of the NHS.

Yes the Trust has worked closely in the past with Walsall College when we have had recruitment drives for overseas nurses and doctors.

However we have had no call for this in the period January 2011- December 2011

2...Can you please identify any outside training provider (s) or consultancy (ies) which provide these kind of services for staff. Can you please state how much the Trust has spent with these provider (s) during the current financial year.

See above response

3...Can you please state how many staff have undergone this kind of training during the relevant period. I am interested in the total number of staff irrespective of whether the training was provided in house or by an outside consultant.

None

4...Can you please provide a full list of the courses and or training sessions and or workshops provided to staff. In the cause of each session/course/workshop can you provide the course title and a brief explanation of the aims of the session. Can you provide the numbers present at each session, as well as details of the venue where the training took place, the cost of each session and the date.

N/A

5....Can you please provide copies of all training handouts and or language guides (of the kind outlined above) which have been given out to staff who have been recruited from overseas. Can you please provide copies of any visual material used in the sessions and courses outlined above.

N/A

0200/11

Locum Doctors and Nurses Fees

1) The highest sum paid by your trust for a continuous shift by one locum, covering clinical care - in 2009/10, 2010/11 and so far in 2011/12?

Please can you disclose the total sum paid by the trust for the shift, including any fees paid to an agency, the type of cover being provided (ie A&E consultant) the length of the shift and the month when it took place.

Section 12 of the Act makes provision for public authorities to refuse requests for information where the cost of dealing with them would exceed the appropriate limit, which for the NHS is set at £450. This represents the estimated cost of one person spending 2.5 working days in determining whether the department holds the information, locating, retrieving and extracting the information.

2) Can you also state the highest sum paid for a continuous shift for each of these categories, again setting out the length of shift, total sum including agency fees, and the month it took place :

i) A&E/Emergency doctor

- ii) Surgeon
- iii) Specialist nursing
- iv) General nursing

Section 12 of the Act makes provision for public authorities to refuse requests for information where the cost of dealing with them would exceed the appropriate limit, which for the NHS is set at £450. This represents the estimated cost of one person spending 2.5 working days in determining whether the department holds the information, locating, retrieving and extracting the information.

3) Can you provide total spending by your trust on locum doctors in 2009/10, 2010/11 and 2011/12 so far (please state the months covered in 2011/12) and including agency fees

[Available upon request](#)

4) Total spending by your trust on locum nurses in 2009/10, 2010/11 and 2011/12 so far (please state the months covered in 2011/12) and including agency fees.

[Available upon request](#)

Total spending on all locum clinical care in 2009/10, 2010/11 and 2011/12 so far (please state the months covered in 2011/12) and including agency fees.

[Available upon request](#)

0201/11

Patients with Cancer

Please could you answer the following questions:

1) How many patients do you have with the following conditions?

- Breast cancer (any type)
- Prostate cancer
- Myeloma
- Renal cancer
- Lung cancer

2) What proportion of these have metastatic (advanced) disease?

If convenient please fill in the table below. If data cannot be provided for all fields, please complete as much as possible.

Condition	Number of Patients	Proportion that have metastatic (advanced) disease
Breast cancer (any type)	198	51
Prostate cancer	42	19
Myeloma	14	1-5
Renal cancer	10	6
Lung cancer	92	37

3) For any of the below listed conditions, please supply the number of patients receiving a bisphosphonate (e.g. pamidronate, clodronate, ibandronate, zoledronic acid), or denosumab :

- Breast cancer (any type)
- Prostate cancer
- Myeloma
- Renal cancer
- Lung cancer
- Tumour Induced Hypercalcaemia (Hypercalcaemia of malignancy)

If convenient please fill in the table below. If data cannot be provided for all fields, please complete as much as possible.

Treatment	Condition				
	Breast cancer (any type)	Prostate cancer	Myeloma	Renal cancer	Lung cancer
Pamidronate	0	0	Between 1-5	Between 1-5	Between 1-5
Clodronate	0	0	Between 1-5	0	0
Ibandronate	Between 1-5	0	0	0	0
Zoledronic acid	Between 1-5	10	Between 1-5	Between 1-5	8
Denosumab	0	0	0	0	0

0202/11

Patients receiving Examestane

Please supply the number of patients in the following groups:

Number of patients receiving examestane in total

- Number of patients receiving examestane for the following descriptions:
 - o Early breast cancer (e.g. adjuvant treatment following 2-3 years of tamoxifen)
 - o Advanced breast cancer following progression on tamoxifen)
 - o Advanced breast cancer following progression on a non-steroidal aromatase inhibitor (i.e. anastrozole or letrozole)

If convenient please fill in the table below. If data cannot be provided for all fields, please complete as much as possible. If it is not possible to split as described in the table, please supply a total figure for examestane.

Receiving Examestane, and:

Patient Type	Number of patients
Early breast cancer (e.g. adjuvant treatment following 2-3 years of tamoxifen)	

Advanced breast cancer following progression on tamoxifen)	
Advanced breast cancer following progression on a non-steroidal aromatase inhibitor (i.e. anastrozole or letrozole	

Of the patients receiving Examestane :-

- Breast Cancer = Between 1-5 patients
- Breast Cancer (Advanced) = Between 1-5 patients
- Bone Cancer = 1-5 Between 1-5 patients
- Ovarian Cancer = Between 1-5 patients
- Bladder Cancer = Between 1-5 patients
- Gynae Cancer (Advanced) = Between 1-5 patients

18 patients in total

Number of patients receiving fulvestrant for the following descriptions:

- o Advanced breast cancer following progression on a non-steroidal aromatase inhibitor (i.e. anastrozole or letrozole)
- o Advanced breast cancer following progression on exemestane
- o Advanced breast cancer following progression on tamoxifen

Of the patients receiving Fulvestrant:-

- Liver Cancer (Advanced) = Between 1-5 patients
- Lung Cancer (Advanced) = Between 1-5 patients

If convenient please fill in the table below. If data cannot be provided for all fields, please complete as much as possible. If it is not possible to split as described in the table, please supply a total figure for Fulvastrant.

Patient Type	Number of patients
Advanced breast cancer following progression on a non-steroidal aromatase inhibitor (i.e. anastrozole or letrozole)	
Advanced breast cancer following progression on exemestane	
Advanced breast cancer following progression on tamoxifen	

**0203/11
Cancer Drugs Fund**

Request #1 Please confirm or deny whether your Trust holds details of the treatments that have been applied for through the Cancer Drugs Fund in i) September 2011 ii) October 2011 and iii) November 2011.

[Please see attached](#)

Request #2 If (#1) is confirmed, please provide a list of the treatments that have been applied for through the Cancer Drugs Fund, including their name and the type of cancer these applications are intended to treat, by your Trust in i) September 2011 ii) October 2011 and iii) November 2011.

[Please see attached](#)

Trust name: Walsall Healthcare NHS Trust 0203/11													
Sep-11													
Treatment	Indication	Number of applications											
Panitumumab	Colorectal Cancer	1											
Everolimus	Renal Cancer	1											
Bendamustine	Mantle Cell Lymphoma	1											
Oct-11													
Treatment	Indication	Number of applications											
Panitumumab	colorectal cancer	1											
Bevacizumab	colorectal cancer	2											
Fulvestrant	breast cancer	1											
Nov-11													
Treatment	Indication	Number of applications											
Abiraterone	prostate cancer	2											
Bevacizumab	Colorectal cancer	1											

**0204/11
Purchasing price for drugs**

[The information which may be relevant to your request, however it is of a sensitive nature and as such is unable to be released.](#)

0205/11

Workforce & Public Health Contact Details

- The Head of Workforce Intelligence or Information
[The Head of Workforce Intelligence or Information is Head of HR – Sandra Berns, Sandra.berns@walsallhealthcare.nhs.uk](#)
- The Workforce Information Manager
[Same as above](#)
- The Head of Public Health Analysis
[You will need to contact NHS Walsall direct to obtain this information](#)

0206/11

IVF Births

1) Please provide figures for the number of births via IVF funded by the PCT or each PCT in your cluster in 2008/09, 2009/10, 2010/11 and 2011/12 (so far)

[Walsall Healthcare NHS Trust does not hold this information.](#)

2) How many GP referrals for IVF treatment has your trust rejected in 2008/09, 2009/10, 2010/11 and 2011/12 (so far)?

[Walsall Healthcare NHS Trust does not hold any details of rejections as patients are referred back to their GPs to follow an action. The numbers are not captured by the Trust.](#)

3) After referral what is the average waiting times for patients referred for IVF treatment in 2008/09, 2009/10, 2010/11 and 2011/12 (so far)?

[Walsall Healthcare NHS Trust does not hold this information.](#)

4) For all treatments (not just IVF) how many GP referrals has your trust a) rejected or b) bounced back to GPs for further details in 2008/09, 2009/10 and 2011/12?

[Walsall Healthcare NHS Trust does not hold this information.](#)

0207/11

Thefts

The number and estimated cost to the trust, of thefts in each of the last 5 years, including stolen items listed and any additional information available about the thefts?

[Please could you confirm whether you are referring to theft of patients or staff possessions as we may not have the data to hand.](#)

The number of recorded thefts of patient possessions in each of the last 5 years, including stolen items listed and any additional information available about the thefts?

Recorded thefts of patient possessions

Year:	Incident	Number of incidents reported
2006	Cash stolen Mobile phone	Between 1-5 Between 1-5
2007	Mobile phone Cash Shaver	Between 1-5 Between 1-5 Between 1-5
2008	Cash	8
2009	Cash Mobile phone	7 Between 1-5
2010	Camera Cash	Between 1-5 Between 1-5
2011	Cash	Between 1-5

The number of recorded thefts of patient possessions by staff working at the trust in each of the last 5 years, including stolen items listed and any additional information available about the thefts?

The number of thefts of patient possessions by staff working in the Trust reported in the last five years is 0.

0208/11 Pressure Sores

Details of the number of reported incidents of hospital acquired pressure ulcers in the trust, broken down into reported grades of severity, in:

Each of the last 12 months?
Each of the last 5 years?

Details of the number of reported incidents of patients admitted to hospital with pressure ulcers in the trust, broken down into reported grades of severity, in:

Each of the last 12 months?
Each of the last 5 years?

ALL PRESSURE ULCERS REPORTED – CATEGORY 1- 4		
Timeframe	Developed in hospital	Admitted with
April 09 – March 10	311	472
April 10 – November 10	135	347
December 10	12	54
January 11	22	52
February 11	29	80
March 11	25	84
April 11	24	83
May 11	26	69
June 11	43	52
July 11	33	95
August 11	31	83
September 11	27	89
October 11	21	84
November 11	33	63

0209/11

Emergency Readmission Rates

I am currently looking into the issue of Emergency readmissions and hope you will be able to assist me.

Your current emergency readmission rates and projected estimate of lost income for the Financial Year 2011/12.

As part of our agreement with NHS Walsall for 2011/12 - all potential penalties arising from the re-admissions policy have been returned back to the Trust as part of the "re-ablement policy". Therefore - the Trust will incur no financial penalties in 11/12.

The current 30 day readmission rates reported are:

7.68% (month of November) / 7.06% (April to November)

These are any emergency admissions by the same patient within 30 days and does not mean that the two admissions are necessarily linked.

0210/11

AAC Devices

Would you please send me details of augmentative and alternative communication devices supplied/purchased by your trust between 31st March 2006 and 1st April 2011. I would like the information broken down by product name (So for example Dynavox Xpress, iPod touch with TapToTalk, BigMack) year, and if the device was purchased for an adult or a child (and, as I understand more than one PCT may commission you, by PCT as well). I am attempting to find out how many people who have poor or no speech have a speech aid, in particular electronic speech aids, and I

would like to know how many have been supplied by the trust during the last five years. [Please see below.](#)

AAC DEVICES PURCHASED BETWEEN 31.03.06 – 01.04.2011 BY WALSALL HEALTHCARE SPEECH & LANGUAGE THERAPY DEPARTMENT – WALSALL PCT

NB It should be noted that most of the equipment has been purchased for an assessment bank and therefore not for a specific individual person at the time of purchase. Individual service users may trial more than one device on short term loan before a longer term loan is arranged. This means that the information below does not equate to the total number of people who have a communication aid.

Some of the less sophisticated equipment is also used in therapy sessions with groups of clients e.g. Big Macks and is not therefore issued to an individual person.

PRODUCT	NO OF DEVICES	CHILD / ADULT USE
Dynavox V Max	2	Child
Dynavox V	1	Child
Palmtop 3	1	Either
IChat 3	1	Either
Lightwriter SL35	2	Adult
GoTalk 4+	6	Child
Go Talk 9+	8	Child
Go Talk 20+	4	Child
Little Mack	15	Child
Wap 3 speech amplifier	2	Adult
Kapitex Servox	6	Adult
Trutone Electrolarynx	11	Adult
Sonivox amplifier HS116	4	Adult
Liberator E14	1	Adult
Bigmack	10	Child
PartnerPlus	20	Child
Quicktalker23	1	Child
Voice Pen (V-Pen)	10	Either
Ipad with proloquo	1	Either
Ipod with proloquo	1	Either
Iphone with proloquo	1	Either
Touchspeak	1	Either
Viliv x70	1	Either
Lightwriter SL40 Connect	2	Adult

0211/11

Directors' remuneration

I was looking at your latest annual report and noticed that the salaries of your directors - S Wakeman and S Khan - decreased.

I wondered if you could shed light on the reason for this as decreases are quite unusual.

Did the previous year's figures include a bonus or did the latest figures not cover a full 12-months?

I am putting together a report on NHS pay - the IDS Boardroom Pay Report which will be published and picked up by the press. Therefore I wanted to ensure that this is a genuine decrease and that it is not down to some other reason?

“In 2009/10 the Trust achieved its set objectives however the Directors did not take performance related pay in light of the financial pressures felt by the public sector. In 2010/11 there was a review of directors’ remuneration which has now been implemented and will be reported in the 2010/11 financial accounts.”

**0212/11
Agency Staffing**

Please can you provide me with further information on the supply of agency Staff at your trust/authority. Please could you advise on the agency/locum spend for the following categories during the following time periods:

Categories:

All Allied Health Professionals (AHP)

All Health Science Services (HSS)

Radiography/ Medical Imaging

Physiotherapy

Pathology

Pharmacy

Mortuary

Nursing

Medical Locums (Doctors)

Time Periods:

2006 (1st Jan-31st Dec)

2007 (1st Jan-31st Dec)

2008 (1st Jan-31st Dec)

2009 (1st Jan-31st Dec)

2010 (Q1 – 1st Jan – 31st March)

2010 (Q2 – 1 April – 30th June)

2010 (Q3 – 1st July – 30th September)

2010 (Q4 – 1st October – 31st December)

2011 (Q1 – 1st Jan – 31st March)

2011 (Q2 – 1st April – 30th June)

2011 (Q3 – 1st July – 30th September)

Please outline details of any current framework or preferred supplier list in place for the supply of agency/locum staff within the above categories to your trust/authority along with details on any renewal dates or plans to re-procure the agreements

[Please see below](#)

AGENCY & LOCUM SPEND		07 08	08 09	09 10	10 11	11 12 MTH 8
Medics	Agency	887,655	830,664	1,871,915	1,582,696	912,045

	Locum	2,419,246	2,228,455	2,950,135	2,388,355	2,174,360
		3,306,901	3,059,119	4,822,050	3,971,051	3,086,405
Nurses		597,389	373,466	474,670	1,194,759	238,849
Professional Allied Medical Services	Agency	275,125	236,673	361,714	444,677	278,676
	Locum	-	13,738	20,954	6,253	10,261
Pathology / Pharmacy	Agency	177,555	232,412	429,708	420,854	250,626
	Locum	24,671	53,072	224,599	296,661	227,827
Total		4,381,641	3,968,480	6,333,695	6,334,255	4,092,644

0213/11

A&E visits due to road related accidents

Please could you provide me with information regarding the numbers of patients attending A&E in the last 6 months due to road related accidents on Darlaston Road, WS2-9SE. This information would be useful for a piece of work that Walsall LINK's Health Inequalities group is carrying out.

The Trust does not record this information therefore we are unable to provide the information.

0214/11

PFI Scheme

Information concerning your PFI schemes:

What PFI schemes does your organisation have?

Walsall Healthcare NHS Trust has one PFI scheme for provision of a building from which healthcare is provided for Family Health and Diagnostic Services including Pathology Services, Out Patients, Daycase Centre, Elective in patient care and Learning and Conference Centre.

Who are the private providers?

The Trust PFI Partner is "The Walsall Hospital Company Plc".

How much money was borrowed, over how many years and at what interest rates?

The Trust recognised a loan totaling approximately £155m within its Accounts for the 2010/11 financial year following occupation of the PFI development, with the agreement covering a 35 year period and the implied interest rate calculated to total approximately 4.0%.

How much money is now owed?

As at the 31st March 2011 the Trust recognised a loan within its balance sheet totaling approximately £152m.

What are your annual repayments?

The Trust is projecting a payment of £14m for the year to the 31st March 2012, with this payment including an amount totaling approximately £4.5m for maintenance of the building.

Which contracts have you requested to renegotiate or amend?

None

0215/11

Redundancies

Please can I request the following information under the Freedom of Information Act:

Please note this is the combination of data for 2 separate Trusts, Walsall Hospitals and Walsall Community Health which integrated to become Walsall Healthcare NHS Trust in April 2011.

1) Please tell me the total number of staff made redundant by the trust in the past three years (since January 2009).

65 people have been made redundant since Jan 2009 of which 3 were Voluntary Redundancies

2) Please provide me with a breakdown detailing the job title of staff made redundant.

Role	Total
Accountant	2
Analyst	2
Assistant	2
Associate Specialist	1
Biomedical Scientist	2
Clerical Worker	3
Clinical Assistant	2
Community Nurse	3
Cook	6
Enrolled Nurse	1
Health Care Support Worker	3
Healthcare Assistant	7
Manager	5
Officer	5
Secretary	1
Senior Manager	7
Sister/Charge Nurse	2
Specialist Nurse Practitioner	1

Specialty Doctor	1
Staff Nurse	5
Support Worker	3
Technician	1
Grand Total	65

3) Please tell me how many vacancies have been frozen since January 2009.

[This information is not recorded](#)

4) Please provide me with a breakdown detailing the posts which have been frozen.

[See above question 3.](#)

5) Please tell me how many staff were employed by the trust in

a) December 2011; [3422.31 \(FTE\) of which 2335.4\(FTE\) were clinicians](#)

b) January 2009; [3212.46 \(FTE\) of which 2157.62 \(FTE\) were clinicians](#)