

**FREEDOM OF INFORMATION
DISCLOSURE LOG – Quarter 4
January – March 2013**

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0221/12

Patients outside the European Union

Question	Walsall Healthcare NHS Trust Response
1. How much is owed to the NHS by patients from outside the European Union?	£11,846.00
2. How much was owed by patients from outside the EU in each of the past five years (calendar or financial years, whatever is easiest for you)?	2008/09 - £27,753.00 2009/10 - £10,679.94 2010/11 - £3,982.00 2011/12 – £12,786.81 2012/13 – £16,617.00 (to December 2012)
3. How much of this was written off by the NHS in each of those years please?	2008/09 - £21,066.00 2009/10 - £11,520.94 2010/11 - £2,851.00 2011/12 – £3,620.00 2012/13 – £9,481.81 (to December 2012)

0222/12

Waiting times and Access to Treatment - Elective procedures

SELECTED PROCEDURE FIGURES

Year 2011	Total Operations	Average Wait (in Days)
01 Hip replacements	255	60
02 Knee replacements	299	57
03 Hernia operations	539	53
04 Tonsillectomies	238	33
05 Adenoid operations	16	41
06 Myringotomies	153	39
07 Gallstone operations	378	52
08 Cataract operations	990	51
09 Varicose veins	148	49
10 Carpal tunnel syndrome	173	37

Please note that 2012 figures will be available at the month end January 2013

0223/12

Liverpool Care Pathway

1. Is the Liverpool Care Pathway currently used by Walsall NHS Trust?
Yes we do use Liverpool Care Pathway within our Organisation

Are there any plans to bring in this pathway to Wolverhampton in the foreseeable future?
We do not deliver Healthcare within Wolverhampton so it would not be our domain to deliver in Wolverhampton it would be the Healthcare organisation for the area.

Was this scheme in operation in 2006, 2007, and 2008?
The scheme was not in operation for the Year March 2005 – Feb 2007 therefore the document was not in use during this time and only in limited use for the following year.

2. If so, I request all policies and documents in relation to the Liverpool Care Pathway, and wish to know the criteria for its use.
Please see attached.
3. How many patients have died over the past 18 months who were placed on the scheme?
166
4. What were their conditions and ages?
Please see attached.
5. In the Trusts' view, does the scheme ultimately save tax payers money?
We are unable to answer this question as it is an opinion not a fact.

0224/12

Patients who have died with no known next of kin

I am requesting for some information in regards to patients who have died with no known next of kin since 1st September 2012 to the date of your response.

Would you please provide information that has been or will be referred to the local council, Treasury Solicitor (or Duchy of Lancaster/Duchy of Cornwall within their jurisdictions) or any other public authority for further investigation.

For each referral made please provide

First name, Surname

Date of death

Date of birth

Marital status

Last known address

Date of when and to whom the referral was made.

Information is withheld under section 41 of the Freedom of Information Act 2000 exempting release of information provided in confidence.

Please redirect your request to the Treasury Solicitors Office who may be able to offer assistance:

Treasury Solicitors Office (BV)
1 Kemble Street
London
WC2B 4TS

0225/12
Zero Hour Contracts

I would like to know if you employ anyone on a "zero hour's contract". If so, how many employees have been on these contracts for each of the last five years and what roles do they perform?

Role	Apr-11	Apr-12
Bank - Admin	334	266
Bank - Allied Health Professionals	10	10
Bank - Estates	6	15
Bank - Healthcare Assistant	582	588
Bank - Nursing & Midwifery	722	712
Bank - Scientific	98	107
Chaplain	2	2
Medical & Dental Locum	80	68

The disclaimer below details both the organisation formation date and the effect of this on information availability.

“**PLEASE NOTE:** Walsall Healthcare NHS Trust did not form until 01 April 2011 (when Walsall Hospital Trust & Walsall Community services merged). Due to this, and in line with previous historical FOI requests, information is not available in relation to 2010.”

0226/12
Foreign nationals

I would like to make a freedom of information request regarding the treatment of foreign nationals in your hospital, the costs involved, and money recovered.

The answers to the requested information are as follows:

1a. How many non-UK citizens received treatment in your hospital in each of the years 2008-12?

08/09	09/10	10/11	11/12	12/13 TO DEC 12	TOTAL
13	11	4	12	18	58

1b. How many non-EU citizens received treatment in your hospital in each of the years 2008-12?

08/09	09/10	10/11	11/12	12/13 TO DEC 12	TOTAL
13	10	4	11	17	55

2. For each of the above figures, is there a cost (either estimated or actual) of the treatment given?

	08/09	09/10	10/11	11/12	12/13 TO DEC 12	TOTAL
1a.	£27,753.00	£10,679.94	£3,982.00	£12,786.81	£16,617.00	£71,818.75
1b.	£27,753.00	£10,473.94	£3,982.00	£11,706.00	£16,019.00	£69,933.94

3a. For each of the year's period 2008-12, how much money was recovered by the hospital for treatment to foreign nationals who were not entitled to free NHS care? Please include receipts from insurance schemes and companies paying on other people's behalf.

08/09	09/10	10/11	11/12	12/13 TO DEC 12	TOTAL
£3,732.00	£3,668.00	£7,518.05	£1,729.00	£3,647.00	£20,294.05

3b. In regards to the above figure (3a), to how many patients does this refer? To put another way, for foreign patients who do pay for their treatment at the hospital, what is the average payment?

There were 25 patients making an average payment of £811.76

0227/12

Contact details

The first name, surname and email address for any person holding the post of commissioning manager, head of service for commissioning, assistant director of commissioning or director of commissioning.

Walsall Healthcare NHS Trust does not commission any services therefore please could you redirect your request to the following email address:

FOI@walsall.nhs.uk

0228/12

Ophthalmology service

1. How many ophthalmic consultants does your department have?
Service provided via SLA with Wolverhampton. 5 consultants provide services on site at Walsall.

2. What ophthalmic services do you provide and from what locations?

- Cataract Surgery
- Contact lenses
- Diabetic Retinopathy
- Glaucoma
- General Ophthalmology conditions
- Low vision aids
- Macular Degeneration
- Neonatal screening
- Oculoplastic Service
- Orthoptics
- Paediatric Ophthalmology conditions
- Thyroid eye disease
- Visual fields

Provided from Manor Hospital, Walsall Healthcare NHS Trust.

3. How many cataract operations have you/your service completed in:
Between 01.04.12.- to date: **664**
Financial Year 11/12 : **932**
and financial year 10/11: **1173**

4. For these operations can you please provide the postcode of the referrer

Outgoing portion of postcode from GP practice address of registered GP

Year Financial	Total	Not Recorded	DZ1	DZ2	DZ3	DZ4	DZ5	DZ6	DZ7	DZ8	DZ9	DZ0	WS1	WS2	WS3	WS4	WS5	WS6	WS7	WS8	WS9	WS0	WS1	WS2	WS3	WS4	WS5	WS6	WS7	WS8	WS9
Year 2010/11	1173	3		4	6	3		2	6		4	3	3	1	255	87	6		198	221	78	1	16	3	31	1	5	7	20	63	2
Year 2011/12	932	2	2	1	2	4	1		1	1	5		2		204	88	6	1	150	168	65	3	5		22	1	3	5	21	43	

5. How many complaints about your ophthalmology department have been received between 01.04.12.- to date: 0
 Financial Year: 11/12 – 1
 And financial year: 10/11 – 0

6. Have any audits been completed in the last 3 years regarding post operative and operative complications during and following cataract surgery?
Audits have been completed by the service at Wolverhampton and the team are actively planning a programme of audit focusing specifically on Walsall activity.

7. If audits have been completed, what were the results broken down by year. **N/A**

8. Do you currently attract BPT for your cataract service? **No**

9. Have you outsourced your cataract service, in part or full in the last three years? **No**
 If so, why, to whom and to how many operations/pathways were outsourced? **N/A**

10. How many cataract referrals are you receiving each week? **On average 143 per week** Is this increasing? **No.** If so by how much? **N/A**

11. What is your current conversion rate from outpatient appointments to cataract surgery?
Conversion rates from Ophthalmology clinics to Cataract procedures

Period	% of OPD that convert to Surgery
Jan12-Dec12	18.5%

12. What is your current capacity for cataract service?
10 new outpatient appointments per week and 5 theatre sessions with 5 patients per list (25 in total) per week

13. If there is a shortfall between demand and capacity, what plans have you in place to bridge this gap? **N/A**

14. What is your current waiting time for cataract surgery? **Current average waiting time is 9.9 weeks**

15. Who are your commissioners? **Walsall Teaching Primary Care Trust (this accounts for 95% on our activity. The other 5% is with Other local NHS Commissioners**

16. Have you completed a SWOT analysis for your ophthalmology department? If so can you please forward this? **No SWOT available.**

**0229/12
Radiology data**

Dear Sir/Madam,

This is a request under the Freedom of Information Act.

I request that you send me information on the following:

- 1) How many of your radiology requests did you outsource between April 2011-March 2012? Please break this down by type of scan if data is available.

We have not outsourced any radiology requests

- 2) Which companies did you use?

Not applicable

- 3) How much did you spend on outsourcing of radiology in the last financial year? (April 2011-March 2012)

Not applicable

4) What quality assurance measures does your trust use? For example do you audit the number of inaccuracies or discrepancies in the reports done by the outsourcing unit and within your trust?

Not applicable

5) What percentage of your radiology reports require re-reporting because of inaccuracies? Do you record this data?

Not applicable

6) How do the outsourcing companies deal with complaints made about the standard or quality of the images and reporting?

Not applicable

7) How many complaints/incident forms have been submitted regarding inaccurate radiology reports from outsourced providers in the period April 2011-March 2012?

Not applicable

If available, please provide electronic documents or spreadsheets relating to errors and re-reporting of radiology reports.

I do not require the identities or data of any individuals involved in the reporting process apart from the name of the outsourced company.

0230/12

Zoo equipment

Please note: This FOI request does not seek to identify individual patients.

Specifically:

1. For so far in FY 2012/13, how many patients were transferred temporarily to a zoo in order to use specific facilities or equipment, e.g. large sized scanners etc?

For each occasion please also provide:

- a) The name of the zoo
- b) The equipment or facilities that were used at the zoo for medical reasons
- c) The total cost to the hospital for using the equipment and facilities in the zoo, including transportation costs.
- d) An explanation as to why the specialist zoo equipment was needed (such as a vague description of the patient's condition that required the use of the equipment, without identifying the patient)

2. (a-d) The same for FY 2011/12

3. (a-d) The same for FY 2010/11

4. (a-d) The same for FY 2009/10

The Trust has not transferred anyone to a zoo for treatment.

As a centre for bariatric surgery we have equipment for dealing with larger patients and as such would not need to use such an external facility.

0231/12

Nurse staffing details

Please can you provide me with your nurse staffing details for your medical and surgical wards. Please include only those nurses directly caring for patients on each ward.

In answering the above questions please can you also provide me (for each question) with:

1. A breakdown of the total number of WTE nursing staff and total number of beds used in calculating each ratio.
2. The split of registered to unregistered nursing staff (WTE) used to arrive at the WTE nursing staff figure.
3. The uplift percentage included by the Trust for Sickness, Absence and Training of WTE Nursing Staff.
4. The nurse to bed ratio for Surgical and Medical wards.
5. What (if any) variance is seen to these ratios for wards with a high proportion of single bedded patient rooms?
6. Long-term sickness and maternity absence (%)

Information available upon request.

0232/12

Delayed discharges

1. Would like to know how many delayed discharges in 2011 lasted longer than 28 days?
14 in total
2. With reference to question 1, please tell me the longest time a patient's discharge was delayed for in 2011?
91 Days

0233/12

A&E Department

- 1) How many people were admitted to your A&E department with complications following Botox or a similar facial procedure, including facial fillers, in 2012?
- 2) How many people had to stay at least one night following complications following Botox or another similar facial procedure, including facial fillers, in 2012?
- 3) How many people were admitted to A&E with complications from the following cosmetic procedures during 2012:
 - a) ABDOMINOPLASTY/ TUMMY TUCK
 - b) RHINOPLASTY
 - c) LIPOSUCTION
 - d) BREAST IMPLANT
 - e) BREAST REDUCTION

Data of this type is not recorded by the A&E dept. The arrival condition field is a free text field and so is not reliable for searching. It may be possible to identify pts that are 'post operative', but unless the type of procedure is documented then we cannot identify that. These procedures are not performed at the Trust so the patients would not be admitted as re-attenders here.

0234/12

In-patient beds

I would like to know the approximate number of in-patient beds (in total, i.e. occupied and unoccupied) at Manor Hospital. I represent a medical market research company and we currently work with some of your doctors, so we are in the processing of ensuring that the hospital information we hold is correct.

In terms of beds available and occupied, there are national returns publically available to everyone. Showing data for all trusts that show averages across the period. (Capacity flexes on a regular basis to meet demand)

<http://transparency.dh.gov.uk/2012/07/05/bed-availability-and-occupancy/>

Figures at this point in time are likely to be higher as we have winter pressure beds open

0235/12

Targets Indicators

I am writing to request information under the Freedom of Information Act 2000. In order to assist you with this request, I am outlining my query as specifically as possible.

On 28 December 2012 the Express and Star Newspaper carried a story under, "Walsall Manor Hospital fined £18k after target missed." The story refers to a report written by Alison Phipps, head of performance and intelligence. There is also a reference to a review of "streamlining (presumably streaming) and triage". It is unclear whether these are two separate documents or whether the review is contained in the report. Please provide me with a copy of both.

Also please provide any other information held by the Trust relevant to my request.

Information available upon request

0236/12

Allergy Services

I was wondering if you could please tell me whether you run any allergy services and if so how are these services administered and how many are run per month?

Walsall Healthcare NHS Trust runs an allergy service for children once a week.

Dermatology sees patients with cutaneous allergy (type IV allergy) and offers patch testing for this. The Trust run adult clinics daily and Paediatric clinics weekly and patients with suspected type IV allergy are seen in all of these clinics.

0237/12

Drinks can recycling facilities

Do you have dedicated recycling facilities for drinks cans within your hospitals?

All general waste produced by the hospital is recycled

Do you have future sustainability targets?

Yes as part of our carbon reduction and sustainability strategy

If so, do these sustainability targets involve the recycling of drinks cans?

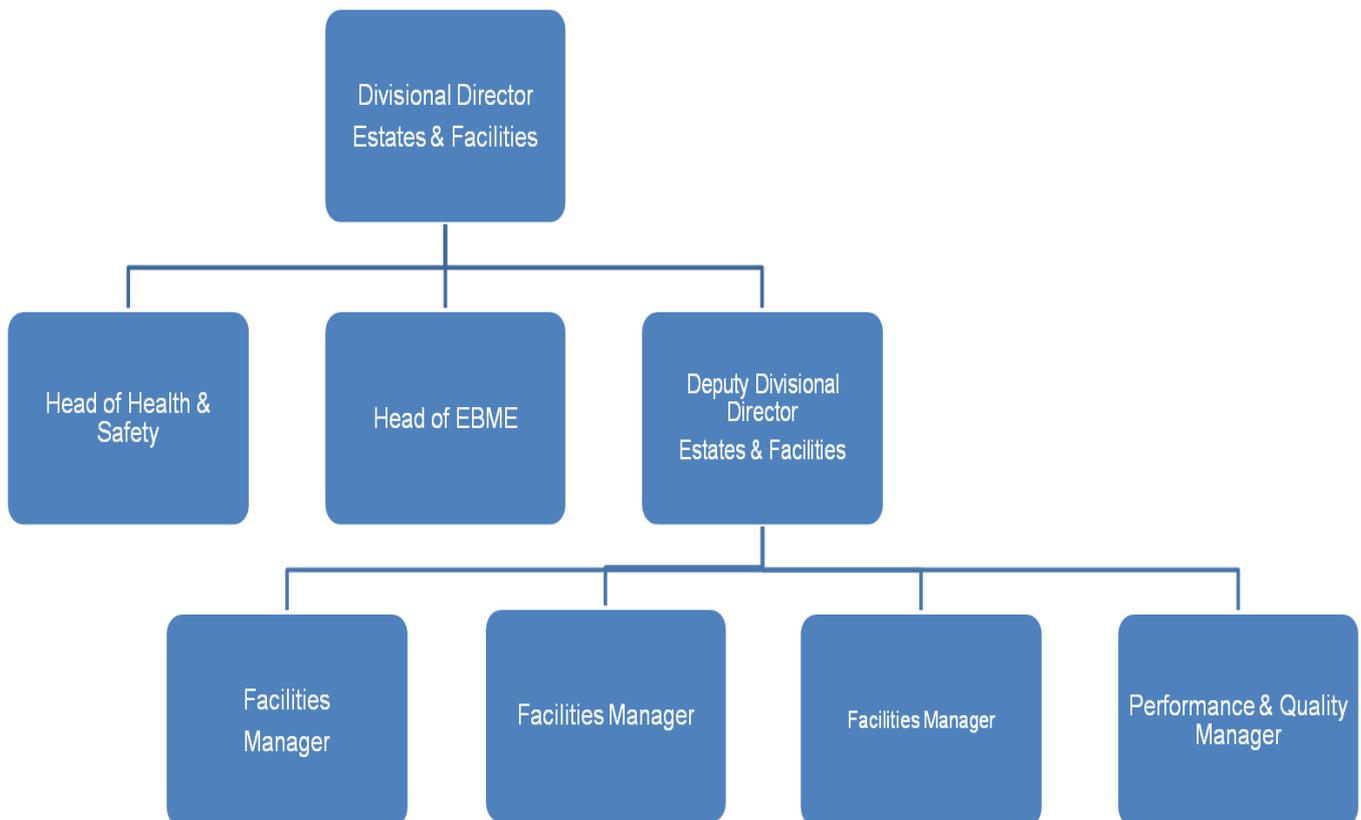
Not specifically

0238/12

Structure Chart

I would like to receive a structure chart for the Trust's Estates department and Facilities department under the Freedom of Information Act.

Please see below.



0239/12

Drugs dispensed/purchased

Can you inform me of the units dispensed/purchased for the following drugs:

1. Avastin (bevacizumab)
2. Lucentis (ranibizumab injection)
3. Ozurdex (dexamethasone intravitreal implant)

For each of the following periods:

- April 2011 to March 2012
- April 2012 to December 2012

Patients with Age related Macular Degeneration are not treated at this Trust and the Trust does not use the above drugs.

0240/12

Private Patient Income

I am writing to formally request, under the Freedom of Information Act 2000, that you provide answers to the following requests:

Question	Walsall Healthcare NHS Trust Response
1. How much has the Trust budgeted to receive in private patient income in 2012/13?	£74,400
2. How much did the Trust budget to receive in private patient income in 2011/12?	£74,400
3. How much did the Trust actually receive in private patient income in 2011/12?	£14,312
4. How much did the Trust budget to receive in private patient income in 2010/11?	£74,400
5. How much did the Trust actually receive in private patient income in 2010/11?	£51,151

The above actual figures are consistent with that reported within the Annual Accounts for 2011/12.

0241/12

Nursing Agency Spend

I am making a request under the Freedom of Information Act 2000 and ask that you provide me with further information on the supply of nursing agency staff to your trust/authority from January 2011 to December 2012 to include the following information:

- 1 Cost to the trust/authority
- 2 Band
- 3 Supplier/Agency
- 4 Speciality broken down by Theatre, Critical (i.e. ITU, HDU, A&E etc) and General

1	Cost to the trust/authority		£
		JAN - DEC 2011	808,814
		JAN - DEC 2012	1,130,975
2	Band		See below
3	Supplier/Agency		Advantage Healthcare Group Arrows Group British Nursing Association (BNA) Care4Health HCL Healthcare Ltd ID Medical Kare Plus Nursing Agency Medacs Medbank Healthcare Meridian Health Nursing Personnel Prime Time Recruitment Primera Healthcare Pulse Nursing Agency Robin Recruitment Healthcare Servoca/Firstpoint Nursing Swiis Healthcare Thornbury nursing agency Yourworld Recruitment

- 4 Speciality broken down by Theatre, Critical (ie. ITU, HDU, A&E etc) and General
Available for April to December 2012 only

		£
	A&E	65,127
	Theatres	0
	Critical Care	0
	Other	675725

0242/12

Losses and Special Payments

In your financial accounts for the financial year 2011/2012 did you have a section for “losses and special payments” ?

Yes

If so how much money was accounted for in the 2011/2012 financial year as being “losses and special payments”? (Please note I am aware that the loss may have occurred many years earlier but I am interested in items which were accounted for in the last financial year, irrespective or when the loss took place.)

The total losses & special payments recorded were £132073

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

Skin piercing by used needle	£10000
Injuries re slip on ice in a car park	£7673
Back injury	£7500

2. What was the total paid on claims for property lost by patients and how much related to (i)Dentures, (ii)Spectacles and (iii)Hearing Aids?

(i) £1490.07

(ii) £847.70

(iii) £NIL

0243/13

Number of nurses/doctors

NAME OF TRUST _____

Q1 Please state the number of registered Adult Nurses employed within the trust during the periods:

2009-2010 _____
 2010-2011 _____

Q2 Please state the number of newly qualified registered Adult Nurses, (employed within 12 months of gaining NMC registration), employed within the trust during the periods:

2009-2010 _____
 2010-2011 _____

Q3 Please state the number of Doctors (ranging from FY1 to Consultant inclusive) employed within the trust during the periods:

2009-2010 _____
 2010-2011 _____

Q4 Please state the number of Foundation Year 1 Doctors, employed within the trust during the periods:

- 2009-2010 _____
2010-2011 _____
- Q5 Please state the number of Foundation Year 2 Doctors, employed within the trust during the periods:
- 2009-2010 _____
2010-2011 _____
- Q6 Please state the number of recorded clinical incidents recorded within the trust during the periods:
- 2009-2010 _____
2010-2011 _____
- Q7 Of the clinical incidents reported within the trust please state how many placed patient safety 'at risk' within the periods:
- 2009-2010 _____
2010-2011 _____
- Q8 Of the clinical incidents where patient safety was placed 'at risk' how many incidents involved registered adult nurses during the periods:
- 2009-2010 _____
2010-2011 _____
- Q9 Of the clinical incidents where patient safety was placed 'at risk' how many incidents involved newly qualified registered adult nurses, (employed within 12 months of gaining NMC registration), during the periods:
- 2009-2010 _____
2010-2011 _____
- Q10 Of the clinical incidents where patient safety was placed 'at risk' how many incidents involved Doctors (ranging from FY1 to Consultant inclusive) during the periods:
- 2009-2010 _____
2010-2011 _____
- Q11 Of the clinical incidents where patient safety was placed 'at risk' how many incidents involved Foundation Year 1 Doctors during the periods:
- 2009-2010 _____
2010-2011 _____
- Q12 Of the clinical incidents where patient safety was placed 'at risk' how many incidents involved Foundation Year 2 Doctors during the periods:
- 2009-2010 _____
2010-2011 _____
- Q13 Does your trust run any kind of training/development/program for newly qualified registered adult nurses, (employed within 12 months of gaining NMC registration),
- YES [] NO []

If the answer to Q13 was 'YES' please answer Q14-17

Q14 What kind of training/development program is provided by your trust specifically for newly qualified registered adult nurses, (employed within 12 months of gaining NMC registration).

Mandatory	Optional		
		(Please tick appropriate boxes)	
Competency Booklet		[]	[]
Study Days		[]	[]
Named Mentoring		[]	[]
Online Learning Courses		[]	[]
In-house Learning Courses		[]	[]
Other (please specify in box below)		[]	[]

Q15 Does this training/development program have a structured framework?

YES [] NO []

Q16 Does this training/development program involve appraisal at regular intervals?

YES [] NO []

Q17 Does this training/development program require sign-off, by a mentor/senior member of staff, to verify that the nurse has achieved the required level of competence within each area of the program?

YES [] NO []

Request was withdrawn

**0244/12
Missing patient property**

I should like to know whether there have been any complaints made, or claims placed, regarding patient property going missing for any reason at Manor Hospital between 1st April 2011 and 30th September 2011, inclusive.

I believe that a valuable watch was taken from my father during the night of 27th/28th June 2011. I am anxious to discover whether there have been reports of any similar incidents.

There were a total of 17 Complaints over the period requested for lost property.

There were a total of six claims made over the period requested.

0245/12

HR and Payroll solution / service

1. The name of your current HR/Payroll software solution and provider. If this is outsourced please provide the name of your outsourcing provider.
McKesson Information Solutions UK Limited
2. The date that the contract was signed with your HR/Payroll provider.
NHS National Contract
3. The length of the current contract term for both HR and Payroll
Ends 30 September 2014
4. The date that the HR and Payroll contracts are due to be renewed.
1 October 2014
5. The current annual maintenance charges for your HR/Payroll solution
NHS National Contract Unknown
6. The original contract value of your HR/Payroll solution
NHS National Contract Unknown

0246/12

Copy of Audited Accounts 2010-11 and cost of Circumcision Operation

What is the cost of a circumcision operation and 1 nights stay in hospital.

**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.**

Age Under 2 (Ward) - £263

Age Over 2 (Day Theatre) - £378

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 £614 (operations lasting up to 30 minutes) is the likely charge.

What is the fixed price for both knee joint replacement?

Walsall Healthcare NHS Trust private patient tariffs are based upon theatre time, length of stay and prosthesis used so there is no fixed price for operations. It is estimated that the type of operation you have listed would cost around £6000 per knee replacement – this includes the cost of the knee system. We generally do not perform bilateral knee

replacements. Patients will have one side replaced and then return at a later date (when sufficiently healed) to have the other side replaced

Name of Orthopaedic consultant surgeon

There are a number of orthopaedic surgeons in the employment of the Trust and it is not possible at this point to identify which would carry out a procedure.

What is the fixed price for a circumcision and a 1 night stay in hospital.

Information provided above. Circumcisions are day case procedures and therefore do not require an overnight stay.

Name of the consultant urologist

**Mr Koneru
Mr Ferrie**

0247/12

Circumcision

1. information on all male circumcisions performed by the trust in calendar year 2011 - to include age and diagnosis. [If this is to be age banded, please use the following groups: 0-4,5-9,10-17, and 18+ advising the number of times a particular diagnosis was applied in each age group]

2. please use a simple patient ID match to identify ALL cases of readmission to hospital within 90 days of the circumcision surgeries above. For each of these readmissions please advise age (or age band), diagnosis of the earlier surgery, diagnosis on readmission, OPCS code and text for any procedure, time gap between the circumcision and the readmission, length of stay, and the total cost of the episode.

Information available upon request

0248/12

Food sales

Please provide the names of any food, restaurant or catering companies who rent space within hospital premises to serve food or drink to patients or the public. Please include the name under which such outlets trade in serving food or drink to patients or the public.

Walsall Healthcare NHS Trust do not lease areas to food retail or catering companies.

The building is currently owned by Walsall Hospitals Companies (Project Co) who lease out several areas of the building. This is a separate organisation to Walsall Healthcare and therefore you will need to obtain this information direct.

0249/12

Catchment Area for Walsall Healthcare NHS Trust

Patients that are registered with a Walsall GP are seen as our local patient population and therefore it is difficult to give an exact list of post codes we cover because of cross boundary patients being registered with a Walsall GP.

Information available upon request.

FOI 0250/12

Electronic Patient Records System

I would hereby like to request all documents relating to procurement, or potential procurement of an Electronic Patient Records system (EPR) or a Patient Administration System (PAS) going back one year.

I should prefer to receive these in electronic format at this email address, however, I am happy to receive them by post if that is more convenient.

We have reviewed the information which may be relevant to your request, however it is commercially sensitive and as such is unable to be released under Section 43 (2) of the Freedom of Information Act 2000.

Exemption 43 (2) states: Information is exempt information if its disclosure under this Act would, or would likely to, prejudice the commercial interests of any person (including the public authority holding it).

0251/12

Cleaning Contractor

The information I require is as follows:

Do you use a cleaning contractor within your Trust or do you hire in-house employees to perform these tasks (if both, please give more detail)?

Walsall Healthcare NHS Trust employs their Housekeeping services.

And what is the average wage of a cleaner at your Trust (whether contracted or in-house)?

The Cleaners are on a band 1 however, are on various pay points.

0252/12

Pseudonymisation Plan

May I request a copy of your plan for implementing pseudonymisation and anonymisation for secondary purposes within your Organisation.

Information available upon request.

0253/12

Waiting times and Access to Treatment - Elective procedures (2012)

**SELECTED PROCEDURE
FIGURES**

Year 2011	Total Operations	Average Wait (in Days)
01 Hip replacements	255	60
02 Knee replacements	299	57
03 Hernia operations	539	53
04 Tonsillectomies	238	33
05 Adenoid operations	16	41
06 Myringotomies	153	39
07 Gallstone operations	378	52
08 Cataract operations	990	51
09 Varicose veins	148	49
10 Carpal tunnel syndrome	173	37

Year 2012	Total Operations	Average Wait (in Days)
01 Hip replacements	229	67
02 Knee replacements	286	70
03 Hernia operations	574	51
04 Tonsillectomies	216	36
05 Adenoid operations	11	40
06 Myringotomies	121	32
07 Gallstone operations	344	49
08 Cataract operations	900	60
09 Varicose veins	89	47
10 Carpal tunnel syndrome	115	43

FOI - 0254/12

Diagnostic Testing of People

In either (a) 2011, or (b) 2012 have there been any occasions when you have had to hire or borrow a body scanner or x ray machine from an outside organisation to help in the diagnostic testing of people who were too obese to use the machines that are available for this type of work at your Trust?

If so state the name and address of the organisation or company whose equipment you used, how many times in each year you used it, and what the cost was to the Trust for using that piece of equipment? Please also state if the equipment was used at the organisation or company's address and the patient was transported there, or if the equipment was taken to a different address to facilitate the scan?

Walsall Healthcare NHS Trust Imaging services have not needed to hire or borrow a body scanner or x-ray machine from an outside organisation to help in the diagnostic testing of people who were too obese to use the machines that are available for this type of work at this Trust.

0255/12
Farmers Weekly

Under the Freedom of Information Act 2000, could I request the most recent 12 month figures available for the following:

1. The total hospital(s) catering bill for food within the trust, excluding for example, the cost of preparing, transportation, staffing or any other associated costs.
2011 to 2012 £772,126

2. What is the budgeted cost per patient per day for food?
£26.55

3. The name(s) of the caterer or companies that currently supply food.
Anglia Crown (Chilled food)
The good food chain (sandwiches)
Brake Bros (frozen food)
Total food produce (Fruit & veg)
3663 (Frozen food)
Hopwell's (pasties)
Yearsley's (frozen food)
Wilmot's (bread & milk)
Punjabi Kitchens (Asian & puree food)
NHS Supplies (canned & dry goods)
Hagesud Bosse (parsley sauce)
Dairy foods (Jelly)
Blakemore's (Faggot & Diced lamb)
Summers poultry (Halal Chicken)

4. What percentage of this food by volume is of British origin?
5. What percentage of this food by value is of British origin?
Please contact NHS Supply Chain direct as we do not hold that information:
nhsbsa.foirequests@nhs.net

6. There is a central government commitment to procuring food that is to British welfare/production standards or higher. What guidelines do you have for the procurement of food served in hospital meals?
See link below:
<http://www.supplychain.nhs.uk/campaigns/government-buying-standards/>

7. Do you have any audit results available to show how you're progressing against these standards? If so could you send me a copy of any related figures / documents.
As the majority of food procured by the Trust is via NHS Supply Chain and their contracts / framework Agreements.
<http://www.supplychain.nhs.uk/campaigns/government-buying-standards/>

0256/12

Patient Self Management Programmes

I am currently carrying out some research on “patient self management programmes” across the NHS in the UK and would very much appreciate gaining access to the following data under the freedom of information Act 2000:

How many Expert Patients Programmes (self management courses) did you run from April 2011 to end March 2012, please state by PCT / Trust:

Walsall Healthcare NHS Trust

a. Number of courses commissioned.

No courses were commissioned in 2011/12. Courses were however commissioned in 2010/11 with one course being concluded in April 2011 which was funded out of 2010/11 budget.

b. Number of courses delivered.

37 courses were delivered.

c. Number of people that completed the programme.

434 people completed the course.

d. Who delivered the programme(s).

Self Care Management Team, Walsall Healthcare NHS Trust

e. The cost of the programme.

£119,630

2. How many DAFNE Programmes or similar (diabetes self management courses) did you run from April 2011 to end March 2012, please state by PCT / Trust:

a. Number of courses commissioned

Walsall Patients are referred to Sandwell NHS Trust programmes on a case by case basis as there is not a large enough uptake to deliver the programme locally, Sandwell run 4-5 sessions per year.

b. Number of courses delivered.

See above

c. Number of people that completed the programme.

3 people completed

d. Who delivered the programme(s).

Sandwell NHS

e. The cost of the programme.

Please re-direct the request to Sandwell NHS Trust

3. How many DESMOND Programmes or similar (diabetes self management courses) did you run from April 2011 to end March 2012, please state by PCT / Trust:

a. Number of courses commissioned.

No specific number commissioned

b. Number of courses delivered.

21

c. Number of people that completed the programme.

163

d. Who delivered the programme(s).

Community specialist diabetes team

e. The cost of the programme.

Not costed per session – forms part of service specification for specialist diabetes team. Cost includes venue hire, staffing & administration.

4. How many Xpert Programmes (diabetes self management courses) did you run from April 2011 to end March 2012, please state by PCT / Trust:

- Number of courses commissioned.
- Number of courses delivered.
- Number of people that completed the programme.
- Who delivered the programme(s).
- The cost of the programme.

We do not deliver Expert Patients Programmes (self management courses)

0257/12

Pest Control

- In the last 12 months how many times have you had to call out a specialist pest control agency to deal with an infestation at any of your hospital premises?

Date called out	Reason for call out	Area	How discovered	Cost
29/02/2012	Bites	Health records	Staff bitten	contract
25/04/2012	Rats	External Grounds	Sighting	contract
31/05/2012	Bites	A&E reception	staff bitten	contract
16/07/2012	Mouse	Pharmacy	Sighting	contract
20/07/2012	Bites	A&E reception	staff bitten	contract
27/07/2012	Rats	External Grounds	Sighting	contract
28/07/2012	Bites	Ward 10	Staff bitten	contract
31/07/2012	Bites	HR & performance	Staff bitten	contract
01/08/2012	Bites	Discharge team	Staff bitten	contract
09/08/2012	Bites	Ward 9	Staff bitten	contract
10/08/2012	Rats	External Grounds	Sighting	contract
18/08/2012	Mouse	Hospital street	Sighting	contract
20/08/2012	Mouse	Fracture clinic	Sighting	contract
17/09/2012	Nesting pigeons	External	Sighting	£60 + vat
25/10/2012	Rats	External Grounds	Sighting	contract
12/12/2012	Silverfish	Ward 16	Sighting	contract

- For the month of May 2012 and the month of November 2012 please provide me with copies of any reports that were completed by any pest control worker/agency explaining what the problem was, where it was and how they dealt with it?

Information available upon request.

0258/12
Hardware/Software

FOI Request

Guidance Note - Yellow highlighted cell, signifies as a shared service, a response, which covers Walsall Health Economy. Others will no fill, signifies isolated response for Walsall Healthcare

1. Desktop PC - hardware	
a) How many desktop PCs are there?	4329
b) Which vendor(s) does the trust use?	Dell
c) How much did the trust spend on purchasing desktop PCs in 2012-13?	£220,000

2. Desktop PC – software licenses	
a) Which is the main desktop PC operating system (OS) used?	Windows XP
b) How many desktop PC software licenses does the trust have?	Each desktop PC has a software license
c) Which vendor(s) does the trust use?	OS - Microsoft
d) How much did the trust spend on purchasing desktop PC OS licenses in 2012-13?	Cost is included in the price of PC, thus unable to isolate cost

3. Desktop Productivity – software licenses	
a) Which desktop PC personal productivity (e.g. MS Office) software does the trust use?	MS Office
b) How many office productivity licenses does the trust have?	1 per desktop
c) Which vendor(s) does the trust use?	Microsoft
d) How much did the trust spend on office productivity software licenses in 2012-13?	Cost is included in the price of PC, thus unable to isolate cost

4. Servers - hardware	
a) How many physical servers does the trust manage? (please specify numbers on site, offsite)	262 inc 5 Offsite
b) Which vendor(s) does the trust use?	Dell
c) How much did the trust spend on purchasing server hardware in 2012-13?	Nil

5. Servers – software licenses	
a) What server operating system software does the trust use? (e.g. Windows 2000, Windows 2003, Windows 2008, Windows 2012)	Windows 2003; 2008
b) How many server licenses does the trust have for each server operating system (OS)?	120, 24 x Data Centre, 60% x 2008, 40% x 32003
c) Which vendor(s) does the trust use?	Microsoft
d) How much did the trust spend on purchasing server OS licenses in 2012-13?	Nil

6. Networks			
For <u>each</u> of the following types of networks:	a) Which vendor(s) does the trust use?	b) How much did the trust spend in 2012-13?	c) When did the contract start and when does it expire?
· Fixed line telecoms network	Unable to respond. SKANSKA Managed Service. Please contact SKANSKA		
· Mobile telecoms network	Orange	170k approx.	On-going
· Data network	Unable to respond. SKANSKA Managed Service. Please contact SKANSKA		
· Wireless (Wi-Fi) data network	Unable to respond. SKANSKA Managed Service. Please contact SKANSKA		

7. Data centres	
a) Does the trust run/manage a data centre? If so, is it on site, off site (another NHS trust), off site (private site in UK), off site (private site outside UK) or other (please specify).	Onsite
b) Which vendor(s) supplies the trust's data centre?	Unable to respond. SKANSKA Managed Service. Please contact SKANSKA
c) How much did the trust spend on data centre services in 2012-13?	Unable to respond. SKANSKA Managed Service. Please contact SKANSKA
d) When was the contract awarded and when does it expire?	Unable to respond. SKANSKA Managed Service. Please contact SKANSKA

8. Mobile devices – hardware			
For each of the following devices:	d) How many does the trust have?	e) Which vendor(s) does the trust use?	f) How much did the trust spend in 2012-13?

· Mobile phones (non smart phones)	1232 (including Blackberry, Mobiles and Data Cards)	Orange	170k approx.
· Smart phones	1	O2	£40 per month approx.
· Laptops	890	Toshiba, Dell	£51k
· Tablets	42	Apple	£15k
· Computers on Wheels (COWs)	Approx. 40	Various	Nil - none brought in this financial year
· Digital Pens	Not used	N/A	N/A

9. Mobile device management (MDM) – software	
a) How many mobile device management licenses does the trust have?	150
b) Which vendor(s) does the trust use?	Sophos
c) How much did the trust spend in 2012-13?	Nil

**0259/12
ICT Spend**

	how much is spent	which suppliers provide equipment/services	where appropriate which specific technology is provided (eg Cisco, HP, Microsoft etc) in the areas below:
Telephony - On Site Telephony Equipment (eg Nortel, Avaya, Cisco, Mitel etc), Maintenance	SKANSKA Managed Service. Please contact SKANSKA direct		
Voice Services - Outbound calls, lines (Analogue PSTN, ISDN2, ISDN30, SIP)	SKANSKA Managed Service. Please contact SKANSKA direct		
Conferencing - Audio, Web and Video	nil	Internal managed	3COM
Security - Analytics, DDoS Mitigation, Intrusion Prevention, Vulnerability Scanning, Secure Web, Threat Monitoring, Managed Firewall	Internal Audit perform this task		

Data Centre - Cloud Data Centre, On site Data Centre (including technology vender), Managed Service Data Centre	SKANSKA Managed Service. Please contact SKANSKA direct		
WAN - MPLS, Analogue/Digital Private Circuits, Ethernet, Optical Services	SKANSKA Managed Service. Please contact SKANSKA direct		
Internet - Business Grade Internet Connections (core connection excluding home, broadband and wifi connectivity)	N3 Managed	N3	Please contact N3
LAN - Equipment (and vender - Cisco, HP etc), Maintenance	SKANSKA Managed Service. Please contact SKANSKA direct		
LAN Applications - Audit of Network/Applications, Managed Acceleration (CPE), Managed Optimisation, Monitoring	SKANSKA Managed Service. Please contact SKANSKA direct		
Contact Centre - Equipment and applications (on site and/or cloud including vender), Inbound Calls	Uses internal phone system		
Mobility - Managed Remote Access Services, Mobile Device Management, Mobile Expense Management, Flexible Working Services, Supply Chain Services	Nil	Internal managed	Sophos

0260/12

Complaints in Maternity Unit

I am writing under the Freedom of Information Act to ask for the following information:

- The number of complaints you have received regarding care at the maternity unit at Walsall Manor Hospital run by your trust.

29 Complaints

Walsall Healthcare NHS Trust did not capture the information sought on a system capable of interrogation before 1st January 2012 therefore the number of complaints relates to the year 2012- to date.

The number of cases where action has been taken as a result of an investigation into a complaint at the maternity unit at the hospital run by your Trust – and, in each case, what action was taken.

All cases were investigated and where complaints are upheld or there are lessons to be learnt actions have been implemented which include:

- **Staff reminded of the importance of communication**
 - **Drafted information leaflets**
 - **Staff provided with training**
 - **Improvement of record keeping**
 - **Conducted audits in health records**
 - **Improved documentation**
 - **Down syndrome screening pathway to be reviewed**
- The number of babies born at the maternity unit at the hospital run by your Trust.

Year Financial	Expr 1
Year 2007/08	3702
Year 2008/09	3686
Year 2009/10	3686
Year 2010/11	3906
Year 2011/12	4476

This relates to the following time period: Each year for the last five years

0261/12

Allegations of Negligence

1. In the period from 1st January 2008 to date, please state the total number of registered medical practitioners against whom more than two patients have made an allegation of negligence. Please state in each case: -

- a. the number of patients who have made an allegation of negligence; and
- b. whether compensation has been paid; and
- c. whether the registered medical practitioner is still in your employ; and
- d. if not, whether any information concerning the allegation of negligence has been forwarded to his or her new employer; and
- e. whether, so far as you are aware, the registered medical practitioner has been referred to the General Medical Council.

2. In the period from 1st January 2008 to date, please state the total number of registered nursing practitioners against whom more than two patients have made an allegation of negligence. Please state in each case:-

- a. the number of patients who have made an allegation of negligence; and
- b. whether compensation has been paid; and
- c. whether the registered nursing practitioner is still in your employ; and
- d. if not, whether any information concerning the allegation of negligence has been forwarded to his or her new employer.
- e. whether, so far as you are aware, the registered nursing practitioner has been referred to the Nursing and Midwifery Council.

3. In the period from 1st January 2008 to date, please state the total number of registered midwives against whom more than two patients have made an allegation of negligence, stating in each case:

- a. the number of patients who have made an allegation of negligence; and
- b. whether compensation has been paid; and
- c. whether the registered medical practitioner is still in your employ; and
- d. if not, whether any information concerning the allegation of negligence has been forwarded to his or her new employer.
- e. whether, so far as you are aware, the midwife has been referred to the Nursing and Midwifery Council.

In response to each of the questions above Walsall Healthcare NHS Trust did not capture the information sought on a system capable of interrogation before 1st January 2012. To be able to answer your request for the information since 1st January 2008 would mean interrogation of each individual, possibly archived, file. This would take the request 'above the appropriate limit in FOI terms.'

FOI 0262/12 CAJE System

How much has your organisation spent in total on the Computer Aided Job Evaluation (CAJE) System, supplied by Northgate Arinso, in the financial year of 2012/13?
CAJE System is usually used within the HR department.

If the organisation has signed a contract with Northgate Arinso for the CAJE system:

How many years is this contract for?

How much is this going to cost per year?

Walsall Healthcare NHS Trust does not use CAJE, therefore is no contract with Northgate Arinso.

0263/12 Recovering fees for foreign nationals

I request disclosure of every unpaid bill for treating foreign nationals (non EU/EEA citizens) for the years 2006 to 2012/13.

For each case I require:

- the date of the treatment
- the nature of the treatment
- the nationality of the patient

- the sex of the patient
- the age of the patient (if not possible due to time, resources, or availability please specify if they were an adult or child patient)
- the hospital where the treatment was carried out
- the amount the treatment cost (estimation is fine)
- the amount of the treatment cost recovered by the hospital from the patient
- if possible an indication of whether the remaining bill for treatment is still being actively sought or has been written-off

We are unable to provide information regarding date of treatment, nature of treatment, nationality, sex or age of the patient as this would breach the Data Protection Act 1998 and is therefore withheld under section 40 (Personal Information) of the Freedom of Information Act 2000.

However, in spirit of the Freedom of Information Act 2000 we have answered your remaining questions:

- 1. The hospital where the treatment was carried out – Walsall Healthcare NHS Trust**
- 2. The amount the treatment cost (estimation is fine) –**

2006/07 – Total Treatment Cost - £16,589.00
2007/08 – Total Treatment Cost - £41,162.00
2008/09 – Total Treatment Cost - £27,753.00
2009/10 – Total Treatment Cost - £10,679.94
2010/11 – Total Treatment Cost - £3,982.00
2011/12 – Total Treatment Cost - £12,786.81
2012/13 – Total Treatment Cost – £16,617.00

- 3. The amount of the treatment cost recovered by the hospital from the patient**

The amounts recovered to date (including cancellations of invoice where appropriate) relating to the year in which the original debt was raised is as follows:-

2006/07 – Total Treatment Cost - £11,007.00
2007/08 – Total Treatment Cost - £10,820.00
2008/09 – Total Treatment Cost - £9,316.00
2009/10 – Total Treatment Cost - £7,119.05
2010/11 – Total Treatment Cost - £362.00
2011/12 – Total Treatment Cost - £3,437.00
2012/13 – Total Treatment Cost – £3,496.00

- 4. If possible an indication of whether the remaining bill for treatment is still being actively sought or has been written-off**

The figures below are the amounts that have been written-off for the respective years. The outstanding debts balance for the respective years are still being actively sought.

2006/07 – Total Treatment Cost - £5,441.00
2007/08 – Total Treatment Cost - £28,165.00
2008/09 – Total Treatment Cost - £13,879.00
2009/10 – Total Treatment Cost - £2,324.00
2010/11 – Total Treatment Cost - £3,620.00
2011/12 – Total Treatment Cost - £9,349.81

Please note that debts eventually written off have been pursued via a debt collection agency (with overseas connections) over a lengthy period and have been written off following unsuccessful attempts to recover debt owed to the Trust at the recommendation of the agency. Where possible the debt is registered with the respective country's embassy to ensure that the individual (s) cannot travel to the UK unless the debt is settled.

0264/12

Junior Doctors

1. How many junior doctors (doctors in training) do you currently employ in your Trust/ Health Board?

146

2. How many monitoring exercises of junior doctors' rotas under the New Deal have the hospitals in your Trust/Health Board undertaken since August 2009 to the date of this email request (1st February, 2013)?

164

3. How many times have individual junior doctors' working hours monitored as non-compliant under New Deal requirements at the hospitals in your Trust/Health Board in the following periods:

- a) Between Aug-Dec 2009; - **0**
- b) In 2010 - **0**
- c) In 2011 - **0**
- d) In 2012 - **0**
- e) In 2013 to date? - **0**

4. Have you identified any actual OR potential breaches of the EWTD (European Working Time Directive) with regard to junior doctors working for your Trust/Health Board? If so on how many occasions did such actual OR potential breaches of the EWTD occur and how many junior doctors were affected?

No

5. If you have identified any actual OR potential breaches of the EWTD what action have you taken to remedy such actual or potential breaches of the EWTD?

N/A

6. Is your Trust fully compliant with its obligations under the New Deal and the EWTD? At what date did your Trust/ Health Board become New Deal and/or EWTD compliant?

Yes

7. In the latest 12 month period for which data is available, have any hospitals in your Trust/Health Board scheduled junior doctors to work 7 night shifts in a row?

Yes

8. How many hospitals in your Trust/Health Board routinely schedule Consultants to work physically on-site during out of hours (weekend and night) shifts?

1

9. How many hospitals in your Trust/Health Board routinely schedule Consultants to work physically on-site during out of hours (weekend and night) shifts in departments that do not specialise in accidents and emergencies?

1

0265/12

Details of Sterile Supplies Department

I would be grateful if you could advise me of the contact details of the Manager of your Sterile Supplies Department (CSSD) in order that I can correspond and gain permission to send a short questionnaire by post.

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

However, the department address is as follows:

Programme Decontamination Manager

HSDU Department

Walsall Manor Hospital

Pleck Road

Walsall

WS2 9PS

0266/12

Acute Coronary Syndrome and Diabetes

We would like to understand how Walsall Healthcare NHS Trust deals with the treatment of **Acute Coronary Syndrome (ACS)** and **Diabetes** and therefore we would like to request any documents that are used to cover this treatment area. In particular, if possible, we would like:

- Patient Care Pathways
- Treatment Protocols
- Prescribing Guidelines
- Disease Strategies

Please find attached ACS guidelines developed via Black Country Cardiovascular Network. As a group we tend to follow published guidance from European Society of Cardiology, American Heart Association and American College of Cardiology which has comprehensive well reviewed and referenced evidence based documentation.

Guidelines available upon request.

0267/12

Alcohol-related hospital admissions

1) Please tell me the number of alcohol-related hospital admissions within your trust for children aged 0-10 in the following calendar years: a) 2008 b) 2009 c) 2010 d) 2011 e) 2012

2) For each admission, please tell me a) the age of the child b) the sex of the child c) a brief summary of the problem, e.g. child was drunk

1) Please tell me the number of alcohol-related hospital admissions within your trust for children aged 0-10 in the following calendar years: a) 2008 b) 2009 c) 2010 d) 2011 e) 2012

Gender	31/12/2008	31/12/2009
Female	1-5	1-5

Male	1-5	1-5
------	-----	-----

Due to the minimal amount of children involved we are unable to disclose the exact numbers due to Data Protection Act.

2) For each admission, please tell me a) the age of the child b) the sex of the child c) a brief summary of the problem, e.g. child was drunk.

Due to the minimal amount of children involved we are unable to disclose the exact numbers due to Data Protection Act.

**0268/12
Admissions**

I am a trainee Psychologist and am currently doing some research on the number of incidents/admissions into hospital of individuals who have suffered an acquired brain injury.

Please could you tell me:

- How many brain injury admissions Manor Hospital has had in the last 12 months, the gender and age of each individual
- the aetiology of their brain injury: please find attached a list of ICD-10 codes required
- and where they were discharged to (e.g. returned home, care home, residential rehabilitation service).

Information available upon request.

**0269/12
Trust Car Parks**

1. How much income was generated in the financial year 2011-12 from car park fees belonging to the trust?

£931,669

2. Are any of the trust's car parks run by a private firm?

No

3. If answer to question 2 is yes, what is/are the name/names of that/those private firm/firms and which car parks does it/do they run?

N/A

4. If answer to question 2 is yes, how much of the total 2011-12 car park income (question 1) went to a private firm? If the income went to multiple firms please include a breakdown of how much each firm received.

N/A

0270/12

Pre-registration Trainee Pharmacy Technicians

1. Total no of pre-registration trainee pharmacy technicians employed by? **4**
2. During the last round of recruitment:
 - a. How many post were advertised? **2 places**
 - b. How many applications were received? **6**
3. What NHS Agenda for Change pay band are pre-registration trainee pharmacy technicians on?

**First year 70% of top AfC Band 4,
Second year 75% of top AfC Band 4**

4. Please provide an electronic copy of the Job Description for pre-registration trainee pharmacy technician.

Job description available upon request

0271/12

Trust Board Papers

I would like you to send me all reports, agendas and any other papers which have been considered under the private - i.e., non-public - part of all of the trust's board meetings over the last 12 months.

We are unable to provide private board papers as they are confidential however, please see link below to access Public Board papers:

<https://www.walsallhealthcare.nhs.uk/about-us/the-board/board-papers.aspx>

0272/12

Productive Ward

I am the news editor of Nursing Standard – the UK's best selling weekly magazine for nurses. This email is a request for your help in a story I am writing about the Productive Ward initiative.

In January 2012 David Cameron called for all hospitals to implement the Productive Ward: Releasing Time to Care initiative.

The initiative was introduced by England's chief nursing officer Dame Chris Beasley in 2007 to encourage nurses to make small changes to the way their ward is run, such as organising cupboards and reducing the time spent on handovers. (for more information on Productive Ward go to the NHS Institute website -

http://www.institute.nhs.uk/quality_and_value/productivity_series/productive_ward.html)

1. Has your organisation implemented the Productive Ward initiative?

Prior to the formal introduction of the Productive Ward Programme to the Organisation in April 2008, the concepts of the Programme were tested on 2 pilot wards (namely Wards 9 & 16).

In April 2008, the Trust officially launched the Productive Ward Programme across a number of wards within the organisation, supported by the Service Improvement Team. This roll out would take the principle of the Productive Programme and localise them to the organisation. The approach would be based on a phased approach so that all wards would have their turn to undertake productive principles.

The Productive Ward Programme is a vehicle to change culture that will continuously drive change on the front line.

The programme was rolled out across all wards in 5 phases, each wave containing 4-5 clinical areas. There are currently 22 areas on the programme, including maternity and paediatric services who have adapted the principles of Productive Ward programme to suit their clinical areas of work.

2. If your organisation has NOT implemented the Productive Ward initiative, when does your organisation plan to do so?

The Trust introduced the Productive Ward initiatives in April 2008.

3. If your organisation does NOT have any plans to introduce Productive Ward by David Cameron's April 1 deadline please give the reasons why.

The Productive Ward programme has already been introduced to the organisation in April 2008.

4. If your organisation has implemented the Productive Ward initiative, what percentage of your wards are covered by the Productive Ward initiative?

100% of all wards have taken part in the Productive Ward Programme, including the maternity and paediatric services. All wards have implemented the Foundation Modules (KHAWD, WOW, PSAG) and at least 3-4 of the process modules (mainly Meals, Meds, Patient Observations, Shift Handover, Admissions & Planned Discharge).

5. If your organisation has implemented the Productive Ward initiative, are you planning to roll it out further?

As an organisation we are currently in the process of reviewing our productive series which includes the Productive Ward, Productive Theatre & Productive Community

The Productive Ward Series will continue to contribute to and support Walsall Hospitals NHS Trust key strategic Priorities for 2012/13-2017/18, which focus on:

- Patient Experience: Deliver year on year improvements in patient experience
- Safe Services: Ensure that our patients experience consistently safe service
- High Quality Services – ensuring high outcomes for quality improvement.
- Governance: Ensuring that we have high quality systems & process for Quality & Safety outcome.

6. Please detail any efficiencies or changes that have been recorded as a result of Productive Ward - For example, time saved, more time spent with patients.

Implementation of the Productive Ward has supported a number of benefits that align mainly to the Trust wide Quality and Safety agenda. Examples of where these have made an impact are:

- The development of the Colour Banded Observation EWS Chart which is used across the organisation to ensure that patient's observations are undertaken in a safe, timely fashion.
- Support in the compliance with NPSA and a reduction in drug omissions and incidents with application of 5S principles and introduction of do not disturb medicine tabards. An area which has been shown to lead to, across hospitals, safety errors.
- Visual management systems to identify patients quickly who are at risk from:
 - i. Falls (using the falling leaf symbol)
 - ii. Nutrition (using the spoon symbol)
 - iii. Dementia (Butterfly Symbol)
 - iv. Gold star (for patients on GSF and towards End of Life Care).
- Reduction in timing and improved handover processes by streamlining the way in which information is both given though the use of Standard Operating Procedures and Templates
- Review of nursing processes and procedures
- Support with infection control initiatives leading to the redesign of all sluices

- Changes to the physical ward environment so it looks more professional i.e. nursing stations less cluttered and changes to rooms for example, the way in which stock is displayed. In association with this redesigning the use of rooms so that the most efficient path is available to staff who need equipment. This supports staff in knowing where stock and equipment is and reduces the time taken to find what they need.

In addition, the following unforeseen benefits have accrued

The Productive Ward has supported implementation and successful delivery of the Gold Standard Framework for End of Life Care.

7. We are keen to speak to any senior nurses who would be able to outline successes of Productive Ward – please provide contact details of a nurse available to interview

Maymoona Salay – Improvement & Innovation Manager (Productive Ward Lead) – as the initial point of contact 01922 721172 x6685

FOI 0273/12

Visits to Hospital Wards

I would like to be provided with statistics indicating how many times the chairman of your trust and the chief executive of your trust made scheduled visits to their hospital wards to meet patients in the calendar year 2012.

To be clear, I would like two sets of statistics, one showing the number of scheduled visits from the diary of your chairman another from the diary of your chief executive officer.

Please find attached to this response a schedule showing the visits made by the Chief Executive and the Chairman. In addition to the schedule, please note that the Chief Executive makes regular informal visits to ward areas in addition to the formal visits listed in the attached schedule.

CHAIRMAN AND CHIEF EXECUTIVE VISITS 2012

CHIEF EXECUTIVE	
4 January	Night shift – various wards
12 January	Board Walk - ITU
20 February	Community Visit – Rapid Response Team
1 March	Board Walk – Chemotherapy Unit
26 March	Home Visits with Macmillan Specialist Nurses
30 March	Midwifery Led Unit (official opening)
12 April	Board Walk – Ward 20A
18 April	Wards/departments re For One and All programme
3 May	Board Walk – Therapies
7 June	Board Walk – Independent Living Centre
12 June	Family Nurse Partnership Team/Home Visit
4 July	Ward visits
5 July	Board Walk – Ward 15
11 July	Community Visits – Darlaston/Pinfold/Shelfield
6 September	Stafford Community Stroke Team
27 September	Board Walk - AMU
25 October	Board Walk – Delivery Suite
28 November	Ward Visits

29 November	Board Walk – Ward 20B and 20C
30 November	Integrated Community Equipment Service Site visit
11 December	Willenhall Health Centre
11 December	Evening Ward visits
20 December	Board Walk – Ward 11
CHAIRMAN	
16 January	Board Walk, Ward 3 – Modular Block
1 March	Board Walk - HDU
12 April	Board Walk – Palliative Care Centre
3 May	Board Walk – ITU
31 May	Board Walk – Palliative Care
7 June	Board Walk – Ward 21
5 July	Board Walk – Fracture Clinic
27 September	Board Walk - AMU
25 October	Board Walk – Ward 20 b & c
20 December	Board Walk – Ward 4

0274/12

Unexpected deaths/fatality rates

Could you provide me with information on unexpected deaths/fatality rates of both the Hospital and Mr Z Khan, surgeon.

The year to date Hospital Standardised Mortality Ratio (*April to November 2012*) is 87.1 this is below the national average.

For the year 2011/12 this figure was 117

HSMR linked to individual consultants is not held within the public domain and is therefore withheld under section 40 (personal information)

0275/12

Server Hardware Support and Software Licensing

I would like to submit a Freedom of Information Request relating to specific a ICT contract(s) for Servers which may include:

- Server Hardware Maintenance
- Server Licensing (Software)
- Server Storage
- Microsoft Support
- SAN

For each of the types of ICT contract above can you please send me the following data types:

1. **Contract Title:**
2. **Existing/Current Supplier:**
3. **Hardware Brand(s):**
4. **Number of Users:**
5. **Operating System (Platform) : (Windows, Linux, Unix etc.)**

6. **Total number of Servers (per supplier):**
7. **Number of Virtual Servers: (of the total number of server how many are virtual)**
8. **Total Contract Value: (For the whole duration of the contract, if the total value sent is per annum please state this in the response)**
9. **Duration: (Please can you also include notes if the contract includes any contract extension periods.)**
10. **Contract Expiry Date:**
11. **Contract Review Date: (An approximate date of when the organisation is planning to review this particular contract.)**
12. **Brief Contract Description:**
13. **Internal Contact:** (The person from within the organisation that is responsible for reviewing and renewing this particular contract. Please include there full name, job title, direct contact number and direct email address.)

Also if there is more than one supplier can you please split the contract up individually and also please be more precise into the data for number of servers, hardware brand, operating system etc.

Please see below.

Server and Virtualisation Support/Maintenance contract(s)- Please can you send me the contract(s) separately and not a combined total value or number of suppliers. If there is more than one supplier for a particular contract please state which of these suppliers the main one is.
 For each of the types of ICT contract above can you please send me the following data types:

Contract Title:	Existing/Current Supplier:	Hardware Brand(s):	No of Users:	Operating System (Platform) : (Windows, Linux, Unix etc.)	Total number of Servers (per supplier):	Number of Virtual Servers: (of the total number of server how many are virtual)	Total Contract Value: (For the whole duration of the contract, if the total value sent is per annum please state this in the response)	Duration: (Please can you also include notes if the contract includes any contract extension periods.)	Contract Expiry Date:	Contract Review Date: (An approximate date of when the organisation is planning to review this particular contract.)	Brief Contract Description:	Internal Contact:
Manor	Dell	M600	Unknown	Win 2008 & VMWare & Citrix	2	69	Server supplied with 3 years warranty	3 years from date of supply	Disparate, ranges from: Mar 2013 to Feb 2014	Dell Warranty	Informatics, Director of Informatics	
		M610	Unknown		8							Steve Darkes

0276/12

Invited Reviews

I would like to request the following information under the Freedom of Information Act. I understand I can expect a reply within 20 working days.

To ask the trust to list:

- a) the number
- b) the date of commission and
- c) the cost, broken down by each review,
of "Invited Reviews" commissioned from the Royal College of Surgeons by the Trust in each of the years from 2005.

There have been no formal reviews commissioned from the Royal College of Surgeons by the Trust in each of the years from 2005.

0277/12

Resuscitation

Please could you send me a copy of your Trust Resuscitation policy. If you do not have a specific resuscitation policy, please could you send me the Trust document which details the policy for delivery of resuscitation services. Please include all appendices, with any document that you send.

Policy available upon request.

Please can you also provide the following information:

- A list of defibrillator types used by the Trust,

lifepac 9 & lifepac 20

- Number of whole time equivalent Resuscitation Officers employed by the trust

1.6

- Number of hospital beds (broken down by hospital site, if applicable).

Data based on the figures published in the KH03 return that are available publicly.

This is beds open overnight for the period 01/10/2012 31/12/2012

Average number of beds available = 479

0278/12

Serious untoward incidents, disciplinary proceedings and references

1. In each of the complete calendar years 2010, 2011 and 2012, please state the total number of serious untoward incidents which have been reported within your Trust.

2010 – 54

2011 – 254

2012 – 209

2. Please state in respect of each complete calendar year 2010, 2011 and 2012, the total number of registered medical practitioners who have been identified in the serious untoward incident reports. - **It is not possible to confirm the numbers of medical practitioners, nursing practitioners or registered midwives involved in the SI's without extensive historical research to see if staff have been directly identified.**

3. Please state in respect of each complete calendar year 2010, 2011 and 2012, the total number of registered nursing practitioners who have been identified in the serious untoward incident reports. - **It**

is not possible to confirm the numbers of medical practitioners, nursing practitioners or registered midwives involved in the SI's without extensive historical research to see if staff have been directly identified.

4. Please state in respect of each complete calendar year 2010, 2011 and 2012, the total number of registered midwives who have been identified in the serious untoward incident reports. - **It is not possible to confirm the numbers of medical practitioners, nursing practitioners or registered midwives involved in the SI's without extensive historical research to see if staff have been directly identified.**

5. Please state in respect of each complete calendar year 2010, 2011 and 2012, of the registered medical practitioners identified how many:

- a. have been the subject of disciplinary proceedings; – **see below**
- b. referred to the General Medical Council – **see below**

6. Please state in respect of each complete calendar year 2010, 2011 and 2012, of the registered nursing practitioners identified how many:

- a. have been the subject of disciplinary proceedings; - **see below**
- b. referred to the Nursing and Midwifery Council – **see below**

7. Please state in respect of each complete calendar year 2010, 2011 and 2012, of the registered midwives identified how many:

- a. have been the subject of disciplinary proceedings; – **see below**
- b. referred to the Nursing and Midwifery Council – **see below**

2010

Medical professional – 5 disciplined and 2 referrals
Nursing professionals – 28 disciplined and 3 referrals
Midwifery professionals – 3 disciplined and no referrals

2011

Medical professional – 3 disciplined and 2 referrals
Nursing professionals – 16 disciplined and 0 referrals
Midwifery professionals – no disciplined and no referrals

2012

Medical professional – no disciplined and no referrals
Nursing professionals – 15 disciplined and 3 referrals
Midwifery professionals – 4 disciplined and no referrals

8. Please state whether you routinely provide references when registered medical practitioners move to alternative employment. If so, please state whether it is your normal practice to include information about serious untoward incident reports and/or patient complaints to the new employer, whether or not it has been requested. – **The reference request is completed as requested, UTO and/or complaints would not be routinely reported unless requested**

9. Please state whether you routinely provide references when registered nursing practitioners move to alternative employment. If so, please state whether it is your normal practice to include information about serious untoward incident reports and/or patient complaints to the new employer,

whether or not it has been requested. - **The reference request is completed as requested, UTO and/or complaints would not be routinely reported unless requested**

10. Please state whether you routinely provide references when registered midwives move to alternative employment. If so, please state whether it is your normal practice to include information about serious untoward incident reports and/or patient complaints to the new employer, whether or not it has been requested. - **The reference request is completed as requested, UTO and/or complaints would not be routinely reported unless requested**

11. Please state whether it is your normal practice to seek such information when offering employment to registered medical practitioners, and/or registered nursing practitioners and/or registered midwives. - **No not normal practice**

0279/12

Doctors/GPs/Consultants recruitment

Are you having difficulty recruiting doctors/GPs/Consultants?

If so are they in a set speciality or area of work?

In the last 12-18 months we have had difficulty filling Middle Grade posts in Anaesthetics and A&E

Do you recruit doctors/GPs/Consultants from overseas?

If so are there any complications that this impacts on the recruiting process?

Issues are about interviewing.

Are there any recruiting initiatives you use to recruit doctors/GPs/Consultants?

We are currently using an external company as part of a recruitment campaign in Europe for Middle Grade in Anaesthetics.

0280/12

Do Not Attempt Resuscitation Form

To help us achieve this, we kindly request a copy of the current **Do Not Attempt Resuscitation Form** for your hospital and any patient/relative information leaflets you have produced to accompany it.
Form available upon request.

1) How long has your form been in use?

12/13 years.

2) Do you have any plans to change it in the near future?

Yes

3) If so, what changes are planned and what is the motivation for these changes

Amendments to create a joint DNAR policy and form to link with Community.

0281/12

Anglican Hospital Chaplains Funerals Statistics

Please could you let me know how many funerals have been conducted by Anglican Chaplains in your Hospital Trust for 2012.

Name of Hospital Trust	Walsall Healthcare NHS Trust
------------------------	-------------------------------------

Funerals for Products of Conception/ Non-attendance baby funerals	40 (these include services for all NVFs)
Baby Funerals with Families present	44
Hospital Adult Welfare Funerals	19
Adult funerals when Chaplain was paid a fee	14 (2012 figures are much higher than usual)
Adult funerals when Chaplain was not paid a fee	See above under adult welfare funerals

0282/12
A&E Unit

I would like to ask the following questions concerning your A&E unit.

How many vacancies do you have for a) consultants and b) middle grade doctors?

1 Deanery vacancy

How many consultants work at the trust (excluding on-call) a) overnight shifts b) weekend shifts

None

How many consultants are on call for a) overnight shifts b) weekend shifts?

None

Please tell me what proportion of doctors (all grades) in the A&E workforce are locums

2

0283/12
Paediatric surgery services

Does your trust perform elective general paediatric surgery, e.g. orchidopexy for undescended testes, inguinal herniotomy and circumcisions?

Yes

If so, who performs these operations, e.g. Adult surgeon with paediatric interest, paediatric surgeon from another trust?

Adult Surgeon with a paediatric interest

If adult surgeon, what is their primary speciality (e.g. vascular urology, upper GI, colorectal)?

Vascular

How many operating sessions of general paediatric surgery are performed every week in your trust?

1 operating session fortnightly

How many surgeons perform general paediatric operations?

1

What is the age cut-off for elective paediatric operations (lowest age)?

16 years of age

What paediatric population do you cover?

Difficult to quantify, predominantly Walsall population, however patients outside the Walsall area can choose to be referred here to have their treatment (i.e. via Choose and Book).

0284/12 Mentors

At the Royal College of Nursing's annual congress, members will call for the college to lobby for all mentors of nursing students to have protected time.

In anticipation of this congress debate (to be held in May) I would like to know your policy on mentors of nursing students.

Please answer the following questions which I am requesting under the Freedom of Information Act.

- 1) Does your organisation provide protected time for mentors of nursing students?

Yes

- 2) If yes, please provide details of this including:

What proportion of protected time? (for a example, one hour of protected time a week)

The Trust has a tripartite agreement with the University of Wolverhampton and the SHA to provide clinical placements for Nursing and midwifery students, Students are required to work 40% of their time with their named mentor, that does not mean they have to work one on one with them all the time but should mirror their off duty. When students are in their third year and are in their final placements in preparation for being Signed off they should be allocated a Sign Off mentor for their four week sign off period and should work one on one with them for an hour every week. They are also allocated a mentor who they continue to work with for 40% of their 37.5 hours. On the whole student evaluations identify that we are delivering what we signed up for.

The Trust has three Practice Placement Managers which covers the acute and the community. We are salaried by the SHA but hold a contract with the Trust.

- 3) Has your organisation provided any training or support to mentors of nursing students in the last 12 months?

If yes, please provide details of this or any other initiatives you think are relevant.

Part of this role is to prepare Mentors and Sign off Mentors to enable them to effectively assess students while in clinical practice. There are also two members of University staff who also work in partnership with the Practice Placement managers which makes five in the Practice Team, They also support students and mentors on practice.

Staff who qualified before 2007 are already on the live mentor register which is held by the Practice Placement managers. Staff who qualified after that date are required to attend the Mentorship in Practice Module which is accredited at the University of Wolverhampton, This is Funded by the Trust.

Mentor Updates are held weekly for all staff and delivered by the Practice team. It is on or the going as mentors daily fall off the register. Mentors are required to be updated yearly. If they fail to update any signatures in a student's clinical document becomes invalid.

- 4) Does your organisation provide protected time for mentors of medical students?

Yes

- 5) If yes, please provide details of this including:

What proportion of protected time? (for a example, one hour of protected time a week)

There is protected time built into clinical tutor job plans. 1 hour per week but this is flexible.

- 6) Has your organisation provided any training or support to mentors of medical students in the last 12 months?

If yes, please provide details of this or any other initiatives you think are relevant.

There has been no formal training but at appointment of tutors it is in job plans.

0285/12

Proposed Cut to Podiatry Services in Walsall

What are the amputation rates in diabetic patients in Walsall?
And how do these compare to other areas in the Black Country?

April 09 – March 12

Episodes of care In Walsall where an amputation is performed on those with diabetes = 138

All CCGs in England = 19,066

What is the degree of ulcerations and how many inpatient treatments for foot ulcers?
Are these rates rising? How do they compare nationally?

April 09 – March 12

Total episodes of inpatient care for diabetic foot disease = 868

All CCGs in England = 134,731

0286/12

Budget for Deaf / Hearing Impaired Children in Walsall

PLEASE NOTE - You may require information local authorities in your area to complete the questions in this section

1. Please state the name(s) and job title(s) of the person(s) completing this section

Linda Bromwich Head of Speech and Language therapy

2. Do you provide any **generic** speech and language therapy services that can be used by deaf/hearing impaired children?

Yes

- a) If yes, please complete the below table stating what funding was allocated to speech and language therapy services for deaf/hearing impaired children in 2012/13, and what funding has been allocated for 2013/14?

If you do not hold a specific budget for deaf/hearing impaired children, please give figures for any of the overarching budgets these services are funded from, and state which service, team or departments this budget covers.

	2012/13	2013/14	Who provides this budget? (please name each service, team or department)	If there has been a reduction, please explain
Net budget allocated (£)	6,500	6,500	Speech and Language therapy	

3. Do you provide speech and language therapy services that **specialise in** working with deaf/hearing impaired children?

Yes

a) If yes, please complete the below table

	2012/13	2013/14	Who provides this budget? (please name each service, team or department)	If there has been a reduction, please explain
Net budget allocated (£)	20,000	20,000	Speech and language therapy	

4. Do you provide speech and language therapy services for deaf/hearing impaired children:

a) Jointly with local authority services?

Yes (**but not joint funded**)/

b) Through a school?

Yes (**not joint funded**)

In another way – please explain

Early years provision to children's centres; designated pre-school group ; clients homes.

5. Please complete the table below giving details of **budgeted staffing levels** for generic and/or specific speech and language therapy services for deaf/hearing impaired children in 2012/13 and 2013/14.

Please give answers as a full time equivalent figure (fte)

	2012/13 number of fte posts	How many, if any, of these posts were vacant/frozen in 2012/13?	2013/14 number of fte posts	How many, if any, of these posts will be vacant/frozen in 2013/14?
a) Staff dedicated to working with deaf/hearing	0.6	0	0.6	0

impaired children funded by health				
b) Staff dedicated to working with deaf/hearing impaired children funded by by the local authority	0	N/A	0	N/A
c) Staff dedicated to working with deaf/hearing impaired children funded by a school	0		0	

6. Is speech and language therapy offered to families with deaf/hearing impaired children through direct payments/personal budgets?
No

**0287/12
Printer/scanners/copies**

FOI Query	Informatics Response
1. The number of people currently employed by the Trust?	4,164
2. Who supplies you printer/copier/scanners across the trust?	Multi-function devices are supplied by Rank Xerox
3. What make and model of printers/copiers/scanners do you have and how many of each across the trust?	Xerox Devices at Manor Hospital: CV118VP U x 2 C128V UT C123V UT ColorQube 9201 x 5 7665V BX C118VP UFS C20VB Pro 428 7346V FLX 7545 FL 55 5735V-FN x 3 245V FL 238V FLN 232V FEN 232V FTN CV128 UT M15i C118 7535V_FL x2
4. When is the contract for this hardware due to end?	We utilise a GPS Framework. The current framework is due to run until 28 th February 2014 (with option to extend). Individual devices have different lease period start and end dates.
5. What print management software's do you use across the trust?	Although not a pure print management software solution I can advise the trust is implementing Equitrac for multi-

	function devices, in a phased approach, to assist with controlling printing and copying. 8 devices are currently licensed to equitrac
6. What scanning software's do you use across the trust?	Xerox, not used across whole trust
7. What PDF software's do you use across the trust?	Adobe, Nuance
8. How much do you spend on PDF software's across the trust?	£200 approx
9. What is the overall cost of the managed print service contract?	The trust does not have a specific managed print service contract for printer, copiers, scanners and such equipment. (The Trust does have a contract called Managed Print Service but this is for the printing and stock control of specific printed forms, held by a printing company).
10. What document management software's/systems do you use across the trust?	Do not have one
11. What IT provider do you use?	In-house - Informatics Service
12. What IT consultants do you use across the trust?	IT Senior Project Manager Relationship Manager
13. Also could you include the name, title, contact number, and email address for the people responsible for managing the print estate in the trust?	Steve Darkes - Director of IT Services 01922 602020 steve.darkes@walsallhealthcare.nhs.uk

0288/12

Bariatric and obese patients

1. Please state (yes or no) if your trust has a policy for the care and manual handling of bariatric and obese patients. **Yes**
2. Please state (yes or no) if the theatre department at your trust has a specific policy for the care of bariatric and obese patients in operating theatres. **We do not have a specific policy however, there is a protocol within the Trust Manual Handling Policy.**
3. Please state (yes or no) if your trust provides specific manual handling or other training for staff for the safe management of morbidly obese patients. **Yes**
4. Please state (yes or no) whether your trust has a specialist bariatric surgical service – if yes please state which hospital – **Yes, Walsall Healthcare NHS Trust**
5. Please state (yes or no) whether the hospitals in your trust have rooms specifically designed to deal with overweight (over 25 stone) patients. **Yes**
6. Please state if staff at your trust currently have access to the following equipment designed for overweight (over 25 stone) patients (yes or no for each item):
 - Extra large blood pressure cuffs **Yes**
 - Extra large dignity gowns **Yes**
 - Beds with suitable weight limit **Yes**
 - Wheelchairs **Yes**
 - Bedside chairs **Yes**

- Theatre/procedural trolleys **Yes**
- Commodes **Yes**
- Lifting equipment **Yes**
- CT scanner **No**
- MRI scanner **No**
- Fluoroscopy table **No**

7. Please state how much money has been spent at your hospital trust on the following equipment designed for overweight (over 25 stone) patients:

- Extra large blood pressure cuffs
- Extra large dignity gowns
- Beds with suitable weight limit
- Wheelchairs
- Bedside chairs
- Theatre/procedural trolleys
- Commodes
- Lifting equipment
- CT scanner
- MRI scanner
- Fluoroscopy table

See below

Please state the total amount spent on each different item (above) in the following financial years?

2007-2008
 2008-2009
 2009-2010
 2010-2011
 2011-2012

SPECIALIST EQUIPMENT / FURNITURE

CONTOURA 560 BED	6,345
HOIST SLINGS - X LARGE	2,744
HOIST SLINGS - XX LARGE	6,426
COMMODOES	1,480
WHEELCHAIRS	2,196
WALKING FRAMES	258
SCALES	1,381
STATIC CHAIR	1,692
RECLINER CHAIR	3,290
THEATRE INSTRUMENTS	9,300
Total	<u><u>35,112</u></u>

Bed Rental	£
2006/07	39,460

2007/08	44,198
2008/09	17,465
2009/10	42,904
2010/11	17,108
2011/12	26,078

If any other equipment that is designed for patients weighing over 25 stones (in addition to the equipment list above) has been purchased, please provide details and costs. **N/A**

0289/12

Mortality Alerts

- a. The number of mortality alerts the trust has received from the Dr Foster group in each of the years since 2000.

There were 3 alerts: sepsis pre 2010, Acute Bronchitis in 2011 & Chronic Ulcer of Skin 2012. We have acted to review each notification alert and implemented changes where necessary and monitor data on a monthly basis to identify areas for action or emergent trends.

- b. A copy of each of the mortality alerts received.

Please contact the Dr Foster Unit at Imperial College to obtain copies of the alerts.

0290/12

Walsall Health and Wellbeing Strategy

I wish to request the Walsall Health and Wellbeing Strategy. Has it been produced yet? If so, I would be grateful if you could email me a copy, or provide me with a link to the document.

The integrated H&WB strategy is currently under development. It will hopefully be in place after April 2013 and will be published on the Intranet and will be available for sharing in accordance with the FOI request.

0291/12

Claims

Thank you for the information you gave me regarding complaints and claims made between 1st April 2011 and 30th September 2011. I should now like to know how many of the 6 claims made against the Trust during that period were settled to the claimant's satisfaction.

All 6 claims were settled to the best of our knowledge and to the claimant's satisfaction.

0292/12

Chaplaincy

I am sending this request under the Freedom of Information Act to ask for the following information

Chaplaincy Hours

- 1) Please state THE NUMBER of Health Care Chaplains employed at the hospital on the following dates. The 1st April 2009, 1st April 2010, 1st April 2011, 1st April 2012, 1st March 2013
- 2) Please state how many hours per week you employed paid Healthcare Chaplains for at your Trust on these dates. 1ST April 2009, 1st April 2010, 1st April 2012, 1st March 2013. If during the period covered by this request your NHS Trust has merged with any other NHS organisations, please add in the figures for chaplaincy hours within those organisations.
 - a) How many paid chaplaincy hours were there per week.
 - b) How many paid chaplaincy hours were vacant, but still in the financial establishment and still in the process of being appointed.
 - c) In each financial year please state how many paid Healthcare Chaplains were made redundant.

The Faith profile of your Chaplaincy

Please state how many hours per week you employed paid healthcare chaplains for at your Trust of the following faiths and on the dates on 1st April 2009, 1st April 2010, 1st April 2011, 1st April 2012, 1st March 2013. . If during the period covered by this request your NHS Trust has merged with any other NHS organisations, please add in the figures for chaplaincy hours within those organisations

- a) Christian (all denominations)
- b) Buddhist
- c) Muslim
- d) Hindu
- e) Jewish
- f) Sikh
- g) Other

Agenda for Change Banding

- a) In each of the financial years below please indicate the Agenda for Change banding for paid Healthcare Chaplains who left your Trust, and how many hours they worked.
- b) For each chaplain that left please indicate the Agenda for Change banding and how many hours the chaplain replacing them was employed to work.
- c) Where more than one chaplain directly replaced one who left, please add the hours of the replacements together.

2008-2009
 2009- 2010
 2010-2011
 2011-2012
 2012-2013

Please send me this information by e-mail, in the form of an Excel spreadsheet OR csv format.

Information available upon request.

0293/12

Contraception

1. The amount of money spent on free condoms per day

Please see table below for total spend on condoms for years 2010/11 and 2011/12

spend per year on condoms for 2010/2011	£309.37
---	---------

spend per year on condoms for 2011/2012	£260.63
---	---------

2. The amount of money spent per day on other forms of free contraception – **Unknown these items are kept as stock in the clinics we do not record individual issues they would be documented in patient notes/clinic record**

3. The total spending per year on free contraception, including condoms for 2011/2012 – **£149,417** taking data from the family planning clinics and GU medicine for relevant BNF categories

4. The total spending per year on free contraception, including condoms for 2010/2011 – **£134,626** taking data from the family planning clinics and GU medicine for relevant BNF categories.

5. The total number of free condoms given out by the trust in the year 2011/2012 – **68,700 all condom types male/female (Issued from Pharmacy to the clinic as stock)**. **“PLEASE NOTE: Walsall Healthcare NHS Trust did not form until 01 April 2011 when Walsall Hospital Trust & Walsall Community Health merged hence the increase from 2010/2011.**

6. The total number of free condoms given out by the trust in the year 2010/2011 – **10,002 all condom types male/female (Issued from Pharmacy to the clinic as stock)**

7. The total number of visits to the GUM clinic in the year 2011/2012 – **See below**

8. The total number of visits to the GUM clinic in the year 2010/2011

GUM and Hatherton have been quoted separately as the organisation integrated in April 2011

10/11

GUM = 12784

Hatherton = 14375

11/12

GUM = 13608

Hatherton = 15311

9. The total number of people treated for an STI by the trust in the year 2011/ 2012 – **The information is available via the Health Protection Surveillance Authority.**

10. The total number of people treated for an STI by the trust in the year 2010/2012 – **The information is available via the Health Protection Surveillance Authority.**

0294/12

Cancer

1. Over the past 12 months, how many Breast Cancer patients have been treated in your trust?

Ca breast - 1431

2. Over the past 12 months, how many Renal Cell Carcinoma patients have been treated in your trust.

Renal cell ca - 70

3. How many patients are currently under treatment with *Everolimus aka Afinitor* for the following indications:
- Renal Cell Carcinoma – **1- 5**
 - Breast Cancer – **None**
 - Pancreatic Neuroendocrine Tumors – **None**
 - Other- **can you please clearly specify what you are asking for?**

0295/12

Unfilled posts

Under the Freedom of Information Act, I would like to know the number of unfilled positions at your Trust, broken down by:

- Type of role
- Area/specialism of the positions (e.g. coronary care, A&E etc)

		Vacancies
Corporate	Exec Directors	0.06
		0.06
Strategy & Partnership	A&C	0.06
		0.06
Corporate Affairs	A&C Nurse	3.54
		1.00
		4.54
Operations	A&C Ancillary Exec Directors Medical Staff	0.10
		24.71
		2.00
		1.00
		27.81
Nursing	A&C Nurse	0.47
		5.72
		6.19
Finance	A&C Senior Managers	9.24
		3.00
		12.24
HR	Ancillary Medical Staffing	0.10
		0.69
		0.79
Information	Nurse Staffing Other Pay Senior Managers	1.00
		0.80
		0.60
		2.40

Estates & Facilities	A&C	2.49
	Ancillary	33.96
	PTB	1.00
		37.45
Family Health & Diagnostics	A&C	2.08
	Medical Staff	0.48
	Nurse Staff	4.54
	Other Scientific	1.29
	PAMS	0.70
	PTB	1.59
	Senior Managers	1.61
		12.29
Planned Care	A&C	8.02
	Ancillary	8.93
	Nurse Staffing	9.80
	PAMS	0.70
	PTB	1.17
		28.62
Unplanned Care	A&C	8.10
	Ancillary	21.31
	Medical Staffing	2.67
	Nurse Staffing	2.48
	Other Pay	2.48
	PAMS	12.86
	PTB	3.78
	Scientific Prof	0.61
		54.29

0296/12

Copy of Audited Accounts 2010-11/13 and cost of Circumcision Operation

What is the cost of a circumcision operation and 1 nights stay in hospital.

**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.**

Age Under 2 (Ward) - £263

Age Over 2 (Day Theatre) - £378

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 £614 (operations lasting up to 30 minutes) is the likely charge.

What is the fixed price for a circumcision and a 1 night stay in hospital.

Information provided above. Circumcisions are day case procedures and therefore do not require an overnight stay.

Name of the consultant urologist

**Mr Koneru
Mr Ferrie**

Full Name and Address of NHS Hospital in City Wellingborough Corby and City of Hargate

We do not hold that information.

0297/12

Appraisals/Professional Development of doctors and Nurses

Whether you use a software application to assist with appraisals/revalidation for doctors **Yes**

Whether the software application is owned by the NHS or by a third party **Third party**

The name of the software application **CRMS/ PReP**

(if the software is provided by a third party) the name of the third party. **Named**

(if the software is provided by a third party) when the contract with the third party is due for renewal or expires **CRMS- expires November 2013 and PReP expires April 2014**

(if the software is provided by a third party) the cost to the NHS of the software application (if this information is not commercially sensitive). **CRMS - £24,000 per annum and PReP - £12,000 per annum**

0298/12

Recliner chairs

1. Are Riser Recliner chairs provided through the reablement package or social funding?
2. What suppliers are currently being used for Riser Recliner chairs?
3. What is the current annual volume of Riser Recliners purchased from such suppliers?
4. What is the annual expenditure on Riser Recliner chairs?

The Trust has not purchased 'Riser Recliners'

0299/12

Maternity Unit/Midwives

1. Please tell me the number of times maternity units in your trust have temporarily closed in each of the following years: 2008, 2009, 2010, 2011, 2012 and 2013 (so far) – see below
2. Where there have been temporary closures, please state the reason for the closure.

2008 21/4/08 – No beds available in the unit

2009 no closures

2010 no closures

2011 no closures

2012 16/06/12 – No beds available in the unit

3. Please also state at which hospitals the closures took place
Walsall Manor Hospital

4. I would also like to know how many midwives are currently employed by your trust?

114.41 WTE

5. Please also tell me how many current vacancies there are for midwives at your trust?

None

0300/12

Psoriasis

In your trust, please supply the number of patients currently treated with biologics for Psoriasis, split by named biologic as detailed below.

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

2012/13

	<i>Adalimumab</i>	<i>Etanercept</i>	<i>Infliximab</i>	<i>Ustekinumab</i>
<i>Number of patients</i>	14	13	1-5	1-5

0301/12

Spend on Agency Q3 - Q4 2012

Please could you furnish me with the spend information for [agency](#) locums for July - December 2012 for the following staff:

Radiographers (Diagnostic inc CT/MRI etc)

Sonographers

Radiotherapists (if applicable)

OT's

Physiotherapists

SLT's

Pharmacists (inc technicians)

Dieticians

Podiatrists

Cardiac Technicians (Echo/Physiologists)

Please can you indicate the split between acute and community (Old PCT) services if applicable.

FOI 0301_13 Agency Locum Costs Jul12- Dec 12

Jul to Dec 12

Radiographers (Diagnostic inc CT/MRI etc)		0
Sonographers		0
Radiotherapists (if applicable)		0
OT's	Community	12,906
OT's	Acute	1,284
Physiotherapists	Community	9,481
Physiotherapists	Acute	0
SLT's		0
Pharmacists (inc technicians)	Acute	87,674
Dieticians	Acute	0
Podiatrists		0

Cardiac Technicians (
Echo/Physiologists)

0
111,345

0302/12

Treatment for Overweight Patients

Please supply figures for:

1) a) the amount of lifting injuries to healthcare staff arising from treating overweight/obese patients in 2011/2012

There has been no lifting injuries to healthcare staff arising from treating overweight/obese patients in 2011/2012

b) the amount of money paid out to healthcare staff for lifting injuries arising from treating overweight/obese patients in 2011/2012

We can confirm that there were no claims or pay out relating to the handling of bariatric / overweight patients during 2011/12

2) Please supply data for :

a) the number of items of equipment purchased to treat overweight/obese patients (specialist equipment that has to be purchased separately to equipment that would be used to treat someone that isn't classed as overweight or obese) during 2011/2012. Include as a breakdown reinforced/ strengthened operating tables, reinforced commodes, ceiling track hoists, wider MRI scanners and number of new beds

No new specific equipment bought in 2011/2012 for Bariatrics

b) the amount of money spent on equipping hospitals with equipment to treat overweight/obese patients during 2011/2012 (i.e. equipment that is specialist and has to be purchased separately to equipment that would be used to treat someone that isn't classed as overweight). Include as a breakdown reinforced/ strengthened operating tables, reinforced commodes, ceiling track hoists, wider MRI scanners and number of new beds

See above

3) Do you have a specific policy for operating on obese patients? If yes please provide details of whether additional surgeons and or anaesthetists are required.

There is no specific policy however, it is covered in the Manual Handling Policy

0303/12

Heart Disease and Cardiomyopathy

1) What postcodes are covered by your NHS foundation?- **Patients that are registered with a Walsall GP are seen as our local patient population and therefore it is difficult to give an exact list of post codes we cover because of cross boundary patients being registered with a Walsall GP. Please see attached a list of postcodes identified as responsible to Walsall Healthcare NHS Trust.**

2) What is the general annual patient numbers from years 2005 – 2012 in your hospital [in each year] Male / Female.

Patient Type	Gender	Financial year end							
		31/03/2006	31/03/2007	31/03/2008	31/03/2009	31/03/2010	31/03/2011	31/03/2012	
Daycase	Female	10637	11603	13125	13787	13524	13739	14343	
Daycase	Male	8413	9310	10295	10883	10520	10690	11067	
Inpatient	Female	23291	22437	23307	23451	19419	20506	21306	
Inpatient	Male	15239	13835	13485	12941	12923	12655	12031	
	AttDescription	Description	31/03/2006	31/03/2007	31/03/2008	31/03/2009	31/03/2010	31/03/2011	31/03/2012
Outpatient	FollowUp	Female	87603	83477	86612	89920	92324	97692	94515
Outpatient	FollowUp	Male	58093	59156	59386	62100	65022	69350	67178
Outpatient	New	Female	33956	37969	38572	39989	40420	41173	42615
Outpatient	New	Male	23546	25372	27782	29149	29709	28844	29420

3)

a) Number of patients diagnosed with

- i) Heart Disease ICD-10- (I00-I99)
- ii) Dilated Cardiomyopathy ICD-10- I42.0
- iii) Alcoholic Cardiomyopathy ICD-10- I42.6

b) Mortality rate in

- i) Heart Disease ICD-10- (I00-I99)
- ii) Dilated Cardiomyopathy ICD-10- I42.0
- iii) Alcoholic Cardiomyopathy ICD-10- I42.6

c) Cost of treating

i) Heart Disease ICD-10- (I00-I99)

ii) Dilated Cardiomyopathy ICD-10- I42.0

iii) Alcoholic Cardiomyopathy ICD-10- I42.6

See below

a) Number of patients diagnosed with

i) Heart Disease ICD-10- (I00-I99)

YearEndFinancial	Count of Diagnosis in positions 01-15
31-Mar-06	14472
31-Mar-07	15776
31-Mar-08	16839
31-Mar-09	18196
31-Mar-10	19181
31-Mar-11	20711
31-Mar-12	18136

ii) Dilated Cardiomyopathy ICD-10- I42.0

YearEndFinancial	Count of Diagnosis in positions 01-15
31-Mar-06	22
31-Mar-07	18
31-Mar-08	29
31-Mar-09	22
31-Mar-10	38
31-Mar-11	48
31-Mar-12	65

iii) Alcoholic Cardiomyopathy ICD-10- I42.6

YearEndFinancial	Count of Diagnosis in positions 01-15
31-Mar-06	3
31-Mar-07	2

31-Mar-08	3
31-Mar-09	3
31-Mar-10	15
31-Mar-11	17
31-Mar-12	7

b) Mortality rate in

i) Heart Disease ICD-10- (I00-I99)

YearEndFinancial	Crude Mortality
31-Mar-06	6.40%
31-Mar-07	6.42%
31-Mar-08	5.82%
31-Mar-09	5.58%
31-Mar-10	4.95%
31-Mar-11	4.77%
31-Mar-12	5.24%

ii) Dilated Cardiomyopathy ICD-10- I42.0

YearEndFinancial	Crude Mortality
31-Mar-06	4.55%
31-Mar-07	11.11%
31-Mar-08	0.00%
31-Mar-09	4.55%
31-Mar-10	0.00%
31-Mar-11	10.42%
31-Mar-12	4.62%

iii) Alcoholic Cardiomyopathy ICD-10- I42.6

YearEndFinancial	Crude Mortality
31-Mar-06	0.00%
31-Mar-07	0.00%

31-Mar-08	33.33%
31-Mar-09	0.00%
31-Mar-10	0.00%
31-Mar-11	5.88%
31-Mar-12	0.00%

4. Number of DCM Cases diagnosed in Heart Failure? (Having both 'I420 (DCM)' and 'I50 (Heart Failure)')

YearEndFinancial	Count of Diagnosis in positions 01-15
31-Mar-06	9
31-Mar-07	13
31-Mar-08	9
31-Mar-09	6
31-Mar-10	14
31-Mar-11	22
31-Mar-12	26

5) Number of patients diagnosed with DCM who have a family history of DCM?
Please redirect the request to the GP

6) Survival rate of patients after DCM diagnosis (years).
Please redirect the request to the GP

0304/12

Specialist Services for Women

- Do you have a Specialist Midwife for women with mental health issues?
If so, please can you share this midwife's job description or summarise her key responsibilities?
- Have any qualified midwives employed by the Trust taken part in training relating to maternal mental health in the 2011/2012 year?

See below

If so, please tell us:

- A. What training they accessed.
 - B. What aspects of maternal mental health were covered by this training.
 - C. The total number of midwives who accessed the training.
- Are qualified midwives employed by the Trust required to undertake regular training relating to maternal mental health?

See below

If so, please tell us:

- A. what training they are required to undertake (i.e. the content, length and format of this training), and
 - B. How often they are required to undertake this training.
- How many live births were there in your Trust over the last year?

In the year 2011-12 96% of midwifery staff had training in maternal mental health. During this training period this training was delivered via an information package that was given to midwives in the Trust. The package outlined the most common mental health disorders and the referral pathway within the Trust for any women requiring additional care or support in relation to mental health needs.

All midwives are required to undertake annual updating in maternal mental health; this is currently supported by an e-learning package within the Trust that takes around 30-45 minutes to complete.

0305/12

FTE Posts

1. Total number of nurses working in your Trust (FTEs).

The FTE for all qualified nurses @ 28 February 2013 is 1047.49

2. Number of sponsored nursing posts in your Trust (FTEs).

The FTE for sponsored nursing posts is 2.81 posts

3. Number of sponsored posts for which you receive income from a medical company?

The FTE for sponsored nursing posts is 2.81 posts

0306/12

Contact Details of Procurement staff

In relation to Freedom of Information Act 2000, may I kindly request contact details of relevant people within the procurement department of your Trust.

By contact details I mean their full names, email addresses, their contact telephone numbers and their roles. I have searched through your website and I did not find this information.

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

The only information I found was a redirection to the tender process portal but I need contact details for people involved in these processes.

Interim Director of Finance

Keith Mansfield

Keith.mansfield@walsallhealthcare.nhs.uk

01922 721172

0307/12

Estates, FM and Transport Services

Please can you provide me with the following information for all Estates, Facilities Management (soft and hard services), General Transport, Patient Transport and Taxi type services at your Trust:

- **As part of the PFI Project Agreement, Hard FM provision is not the responsibility of Walsall Healthcare and therefore details are to be obtained through a separate FOI query to Project Co.**

1) Which elements of these services do you self-deliver /deliver in house?

- **For Estate & Facilities Management Services that are in-house:**
- **Electrical Bio-mechanical engineering services**
- **Patient Catering**
- **Housekeeping**
- **Portering**
- **Car parking**
- **Couriers**
- **Security (50%)**
- **Waste Services**

2) Which elements of these services are outsourced or sub-contracted?

- **We have tendered for Patient transport, taxi service and General Transport**
- **50% Security Guard Provision**

3) For the services that are outsourced or sub contracted can you provide the following information for each contract:

a. Service type

- **Patient Transport**
- **Taxi Service**
- **Specimen / blood Deliveries (General Transport)**

- **50% Security Guard Provision**

 - b. Current Provider
 - **Patient Transport – West Midlands Ambulance Service**
 - **Taxi Service – Yellow Cars**
 - **Specimen / Blood Deliveries – ISS**
 - **Vigilant Security Service**

 - c. Current contract start and end dates, duration and extension options (if any)
 - **Vigilant 1.5.12 to 30.4.17 +2 year extension**

 - d. Annual contract value
 - **Vigilant Security Services - Annual contract value circa £175,000**
- 4) Can you provide contact details for the person or people responsible for the procurement/management/delivery of these services
- Keith Mansfield**
Interim Director of Finance
Keith.mansfield@walsallhealthcare.nhs.uk 01922 721172

0308/12**Admissions A&E Department**

My interest is in the number of admissions to the trust's accident and emergency department which are deemed to be caused by alcohol.

I would also like any estimate your trust has about the cost of these admissions and how this is calculated.

The information is based on the tariff the Trust receives from commissioners.

I would like information for each of the last five years (if your information is recorded in financial years, please provide these inclusive of 2012/13 where possible).

If the trust has put any specific plans in place to manage alcohol-related admissions to accident and emergency, please provide details.

1213		1112		1011		0910		0809	
31/03/2013	Total Cost £	31/03/2012	Total Cost £	31/03/2011	Total Cost £	31/03/2010	Total Cost £	31/03/2009	Total Cost £
152	£19,791	113	£13,629	83	£9,336	138	£12,155	109	£9,196

0309/12

Hospital Chaplaincy Procedures

I would like to request the following information on standards, policies and procedures relating to hospital chaplains in your Trust.

Could you please:

1. tell me whether policies or procedures exist to: **Do not exist**
 - a. establish whether a patient admitted to any of your hospitals does or does not wish to receive contact from a hospital chaplain
 - b. ensure that patients (or their visitors, next-of-kin etc.) do not received unsolicited contact from chaplains
 - c. safeguard patients' personal and medical data such that hospitals chaplains by default do not have access to it
 - d. ensure that hospital chaplains, when given access to patient data, do not share any of it with third parties

If you answered yes to any of the above, please could you provide me with copies of the relevant policies or procedures

2. outline your approach for monitoring adherence to the policies and procedures above
3. provide me with a summary of the results of this monitoring for the last five years, including rates of compliance with the policies and procedures, and severity of any non-compliance events
4. provide me with details of any action taken in respect of any non-compliance identified (e.g. tightening of procedures, disciplinary action – in the latter case, taking care not to disclose any personal information)

When on the wards it is usual for chaplains to speak to all people in the bay they are visiting. Patients and families who do not want to engage will make it clear.

Chaplains do not have access to patients' medical/personal files, and are bound by the Trust confidentiality policies.

0310/12

Chaplains

1. How many chaplains does your Trust employ?
(Could you please give your answer in terms of full-time equivalents).

9 chaplains employed for the equivalent of 2.95 full-timers.

2. How many chaplains, employed by your Trust, have been made redundant since May 2010?
(Could you please give your answer in terms of full-time equivalents)

No chaplaincy hours have been reduced since May 2010.

0311/12

NHS Complaints

Freedom of Information Request: NHS Complaints

General Guidance

For all requests, please provide the speediest and most convenient option available for you to release the data. However, if possible, it would be appreciated if this could be provided as RAW DATA in EXCEL (.XLS) or OPEN OFFICE (.ODF) format

Please complete all data for the period from 1 January to 31 December for the years 2010, 2011 and 2012.

Requests

1. For the last three **calendar** years, please provide a breakdown of all **formal** complaints received categorised according to:

- 1a. OVERALL CATEGORY¹ (e.g. clinical care)
- 1b. SUB CATEGORY (e.g. delayed diagnosis, poor nursing care etc)
- 1c. CLINICAL SPECIALTY (e.g. haematology)
- 1d. SITE OF COMPLAINT (e.g. if the Trust has more than one location)

2. For the last three **calendar** years, please provide a SUMMARY LIST of all **formal** complaints received. Please include the following information:

- 2a. (for each complaint) MONTH RECEIVED
- 2b. (for each complaint) SUMMARY OF COMPLAINT²
- 2c. (for each complaint) TRUST REPORTED GRADING OF COMPLAINT
- 2d. (for each complaint) CLINICAL SPECIALTY
- 2e. (for each complaint) TIME TAKEN (DAYS) TO RESPOND TO COMPLAINT

3. Taking into consideration the last three **calendar** years, please indicate how many MEMBERS OF STAFF have on average been involved directly in **formal complaint handling**³. Please also provide details of STAFF GRADINGS. Do not count staff members who have provided information or who have undertaken local investigations (e.g. ward managers providing a sub-report on nursing care as part of a wider investigation should NOT be counted).

4. For each of the last three **calendar** years, please indicate the number of **formal** complaint cases that were referred to the Parliamentary and Health Service Ombudsman (PHSO).

5. For each of the last three **calendar** years, please indicate the outcome of any **formal** complaint reviews undertaken by the PHSO (e.g. how many complaints were upheld, partially upheld, not upheld, not investigated etc).

6. For each of the last three **calendar** years please indicate any payments made in respect of **formal** complaint interventions or decisions from the PHSO.

7. Please explain briefly how the Trust undertakes **formal COMPLAINT INVESTIGATIONS** (e.g. "A co-ordinating investigator speaks to staff or obtains written comments from them, medical reviews are reviewed etc...").

8. Please explain briefly how the Trust undertakes **formal COMPLAINT RESPONSES** (e.g. “A report is provided by local divisional managers and a letter from the Chief Executive is prepared and quality assured by a central team”).

9. Regarding the NHSLA Risk Management standards, please indicate what level the Trust **currently** holds. Please include the level for Maternity standards where applicable.

10. Please indicate whether the Trust successfully passed the standard “Concerns and Complaints” in the inspections highlighted in question 9.

11. Please indicate your current ACTIVE caseload for **formal** complaints. This should represent all complaints received where the complainant is awaiting a first or further written reply or meeting, but should exclude cases referred to the Ombudsman.

Detailed Guidance Notes

¹ This may be either the K041 heading or the main category within the Trust's database.

² Most database complaint summaries should not contain an individual's identifiable data, as these will form part of clinical governance reports within many Trusts. There should be no need to redact these.

³ In the event of uncertainty, please provide the best estimate. For example, if a member of staff investigates complaints as a duty within a wider role, please estimate (as a whole time equivalent e.g. 0.2) what proportion of their role is allocated only to formal complaint handling.

Please could you re-direct your request to National Complaints Network.

0312/12

Self funding patients

1. Does your Trust offer the option to patients for self-funding of certain treatments and procedures? If so, please state when this policy was first introduced.

Please see attached Private Patients Policy.

2. Please list all treatments and procedures that patients currently have the option of self-funding at your trust.

All treatments and procedures are available to private patients whether self-funding or funded via private healthcare insurance.

3. Please list any treatments and procedures that were added to the list of services patients can self-fund at your trust in the past 12 months.

Not applicable.

4. Please state the total number of self-funding patients the Trust treated in each the following years

a) 2010/11 - **52**

b) 2011/12 - **42**

c) 2012/13 - **39**

d) 2013/14 (projected number, if available). – **Not Available**

5. Please state the total amount of money the Trust received from self-funding patients in each the following years

a) 2010/11 - **£18,027.00**

b) 2011/12 - **£11,095.00**

c) 2012/13 - **£11,435.00**

d) 2013/14 (projected amount, if available). – **Not Available**

0313/12

Management Posts

1. List of all management posts in the trust including title of post, salary, expenses paid (amount and type), employers pension contributions, whether paid as NHS employee or as an external contractor/consultant for the financial years 2010/11, 2011/12 and 2012/13.
2. Title of post, salary, expenses paid and employers pension contributions for the lowest paid employee in the trust.

Salary - Band 1

Pension contributions - £2,101.82

3. Total trust income for each year 2010-2013

Please see link below for the Annual Accounts which contains the information requested.

https://www.walsallhealthcare.nhs.uk/media/136462/annual_accounts_1011.pdf

<https://www.walsallhealthcare.nhs.uk/media/169148/walsall%20healthcare%20nhs%20trust%20annual%20accounts%202011-2012.pdf>

Please note that the annual report and annual accounts for 2013 is yet to be published.

As the information is personal the Trust wishes to rely upon the exemption contained at section 40(2) Personal Information by virtue of section 40(3)(a)(i), in that the withheld information contains personal data and to disclose it would breach one or more of the data protection principles.

0314/12

Sponsored Clinical Posts

1. The total number (expressed as FTE) and specialisms of any sponsored clinical posts at your organisation (e.g. 3 stoma nurses, 5 consultants, 1 pharmacist, 2 mental health workers, etc.). Please include qualified and unqualified staff posts.

Surgical Nurse 1.10 WTE attracting £47,409 per annum

Medicine and long term Conditions Nurse 0.71 WTE attracting £15,000 per annum

Both are qualified posts.

2. The total income received for sponsored clinical posts in financial year 2011-12, broken down by post type (e.g. £320,000 from stoma care companies, £260,000 from pharmaceutical companies, etc.). Please include income for qualified and unqualified staff posts.

Same as above

0316/12
Copy of Audited Accounts 2011-12/13

Audited Accounts for the year end 2011-12 and 2012-13

Please see attached a copy for 2011/12 however, the audit accounts for 2012/13 has not yet been published. Information available upon request.

Full Name and Address of NHS Hospital in City of Stoke and Whitby and in city of Wolverhampton and Kendal

We do not hold that information.