

**FREEDOM OF INFORMATION  
DISCLOSURE LOG – Quarter 1 April-June 2013**

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**001/13**

**Employment of Illegal Immigrants**

a) Since January 1, 2010, how many contractors/workers/employees or similar working for you have been found to be illegal immigrants – **1**

b) Please provide a list of all the contractors/workers/employees or similar found to be illegal immigrants, detailing the following for each:

- Their job title or role - **Clinical Support Worker**
- The department they worked in and the department's location/address - **Ward 18**
- Their nationality - **Malawian**
- The year (e.g. 2010, 2011, 2012, or 2013) their status as an illegal immigrant was discovered - **2013**

**002/13**

**Fixed Telecommunications and Internet Services**

Current Fixed Line Provider- Supplier's name – **Could you please redirect your request to Skanska**

Fixed Line Renewal Date- please provide day, month and year (month and year is also acceptable). If this is a rolling contract please provide me with the rolling date of the contract.

Fixed Line- Duration

Number of Lines

**As above**

Minutes Provider- Supplier's name - **Orange**

Minutes Renewal Date- please provide day, month and year (month and year is also acceptable). If this is a rolling contract please provide me with the rolling date of the contract. – **Set up February 2011 and is for a period of 5 year.**

Minutes Monthly Spend- Monthly average spend – Average spent is **c£16k** per month **for ALL devices (mobiles / BB's).**

**Minute's Duration:** the contract duration and not the actual minutes – **Clarify question**

**Number of Extensions – Clarify question**

**Fixed Broadband Provider-** Supplier's name – **Virgin Media**

**Fixed Broadband Renewal Date-** please provide day, month and year (month and year is also acceptable). If this is a rolling contract please provide me with the rolling date of the contract.

**October 2013**

**Fixed Broadband Annual Spend-** Annual average spend - **£600**

**VOIP/PBX Installation Date:** - please provide day, month and year (month and year is also acceptable). – **Skanska**

**Renewal Date on any leased Telephony systems** - please provide day, month and year (month and year is also acceptable). If this is a rolling contract please provide me with the rolling date of the contract. **No Leased systems**

**Lease Provider-** Supplier's name. **N/A**

WAN Provider- please provide me with the main supplier(s) – **N3**

**WAN Renewal Date-** please provide day, month and year (month and year is also acceptable). If this is a rolling contract please provide me with the rolling date of the contract. – **December 2013**

**WAN Annual Spend-** Annual average spend - **£280,000**

If your organisation has a managed services contract which includes all or two out of three of the services stated above please state which of these is included with the contract. It would also be for me to if there are any other service support areas that are included within these contracts.

**(N/A)**

#### **Managed Service Contract**

- . Contract Title
- . Supplier's Name
- . Services Included
- . Total Contract Value
- . Duration
- . Expiry Date- please provide day, month and year (month and year is also acceptable)
- . Review Date- please provide day, month and year (month and year is also acceptable)
- . Internal Contact: please can you send me there full contact details including contact number and email and job title.

If there is more than one supplier for each contract please can you separate the contract dates and spend for each supplier. Also if no information can be provided for each of the key data types please explain why there is no information.

**003/13**

#### **Estates and Facilities**

Is your Estates / Hard Facilities Management outsourced or in house, if split what is a rough percentage split? **OUTSOURCED 100%**

What is the current annual budget of the Estates / Hard Facilities Management, including the in house / outsourced split if applicable? **N/A**

If outsourced, who is the current provider and what is the contract renewal date? **Skanska Facilities Services, which is part of the PFI contract**

**004/13**

#### **Digital Dictation**

- **Is there a Trustwide Digital Dictation system in place and if so, who is the provider?**  
Nuance
- **Who is responsible for Digital Dictation within the Trust?**  
Director of Human Resources
- **When is the contract up for review/renewal?**  
December 2015

- **What CQUINN targets have been agreed with local CCGs for the timeliness and content of Clinical Correspondence?**  
No CQUINNs have been agreed specifically for the timeliness and content of Clinical Correspondence
- **Are these targets being achieved?**  
N/A

### 005/13

#### Freedom of Information Requests

- **The total estimated cost of responding to Freedom of Information requests in each financial year since the act's introduction**

The Trust is unable to identify the costs as the role as been incorporated into individuals daily duties.

- **The total number of requests received in each financial year since the act's introduction - including where possible the total requests answered in full, the total answered partially and the total refused**

The Trust only holds information dating from 2005:

2005 = 20  
2006 = 33  
2007 = 20  
2008 = 39  
2009 = 66

Information from 2009 was captured during the financial year:

2010 / 2011 = 298  
2011 / 2012 = 297  
2012 / 2013 = 316  
2013 / 201 = 25 to date

- **The current number of FTE posts for which the primary function is to oversee, respond to or co-ordinate obligations under the Freedom of Information Act**

There are 2 full time posts which incorporates the role of Freedom of Information.

### 006/13

#### Funerals

1. The total number of public health funerals (where the deceased has no relatives or there is no one else willing to pay) that your Trust has undertaken for the financial years 2010/11, 2011/12, 2012/13? **231**

2. The number of public health funerals that your Trust has undertaken by gender for the past 3 financial years? **Male = 116, Female = 96, & Don't Know =19**

3. The number of public health funerals that your Trust has undertaken by age for the past 3 financial years? **Unfortunately, we could not align the ages of the deceased to the funeral costs that were incurred as the detail is not included on the invoices received and death certificate counterfoils reviewed are not always produced if processed by a coroner.**

Since April 2010, how many cases have there been where family and friends refuse to finance or make arrangements for their relatives funeral? **Unfortunately, we cannot answer this question.**

4. How much have the burials/cremations cost the Trust broken down by year for the last three financial years? This cost information does not need to include administrative or staff costs, and before any costs are claimed back by the local authority from the deceased's estate **10/11=28,228.12, 11/12=27,672.50, 12/13=32,638.92**

5. How much does your trust typically (average cost) pay for a Public Health Funeral? **£384.95**

6. What does your Trust provide at a Public Health Funeral? **Coffin, Crematorium, Burial and Transportation to Funeral and Chaplain.**

7. What relationship do you have with your local council(s) regarding funerals of this nature? **N/A**

8. Have you observed any of the following over the last three years?

- Higher numbers or people dying without any income or assets. **Unfortunately, we cannot answer this question.**
- Higher numbers of people dying with family or friends unable to contribute to the costs of a funeral. **Unfortunately, we cannot answer this question.**
- Higher numbers of people dying with family or friends unwilling to contribute to the costs of a funeral. **Unfortunately, we cannot answer this question.**
- Higher numbers of people dying with no friends or family. **Unfortunately, we cannot answer this question.**

**007/13**

**Availability of advanced skin cancer treatments ipilimumab (Yervoy) and vemurafenib (Zelboraf)**

**1) Are you familiar with the new NICE guidance published in December 2012 regarding the approved access to advanced skin cancer treatments ipilimumab (Yervoy) (TA268) and vemurafenib (Zelboraf) (TA269)?**

Yes

**If so, how is it being adopted locally?**

All patients with stage III & IV melanoma have their care transferred to University Hospital Birmingham in accordance with Pan-Birmingham Cancer Network guidance. As these NICE guidelines and drugs are only relevant to patients with stage III & IV melanoma any decisions about the giving of these drugs and adoption of the NICE guidance is undertaken by University Hospital Birmingham (UHB)

**2) Are you currently making ipilimumab and vemurafenib routinely available to those who need it following the publication of the guidance on 12<sup>th</sup> December 2012?**

No

**If not, why not?**

See above. Our patients are transferred to UHB who prescribe and give these drugs.

**3) If you answered “yes” to Question 2, did you make ipilimumab and vemurafenib routinely available to those who need it by 12<sup>th</sup> March 2013, the three month implementation deadline following the publication of NICE guidance?**

n/a

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**4) If you answered “yes” to Question 2, when exactly did you make ipilimumab and vemurafenib routinely available to those who need it?**

n/a

**5) Have ipilimumab and vemurafenib now been incorporated into your local formulary?**

No

**If not, why not?**

See above. Our patients are transferred to UHB who prescribe and give these drugs.

**6) Had ipilimumab and vemurafenib been incorporated into your local formulary by 12<sup>th</sup> March 2013?**

No

**If not, why not?**

See above. Our patients are transferred to UHB who prescribe and give these drugs.

**7) Have relevant clinicians in your area been advised of the new NICE guidance on ipilimumab and vemurafenib?**

Yes

**If not, why not?**

N/A

**8) How many applications for funding through Independent Funding Requests (IFRs) for ipilimumab (Yervoy) have you received since 12<sup>th</sup> March 2013?**

0

**Of these applications, have any been refused?**

N/A

**If so, how many and why?**

N/A

**9) How many applications for funding through Independent Funding Requests (IFRs) for vemurafenib (Zelboraf) have you received since the publication of the NICE guidance (TA269) in December 2012 for the treatment of Melanoma (BRAF V600 mutation positive, unresectable metastatic)?**

0

**Of these applications, have any been refused?**

N/A

**If so, how many and why?**

N/A

**10) Following Sir David Nicholson's letter to NHS Chief Executives in August 2012 confirming the 1<sup>st</sup> April 2013 deadline for the introduction of the NHS Compliance Regime for Technology Appraisals, are you planning to make information about the availability of ipilimumab and vemurafenib available?**

No

**If so, when are you planning to publish it?**

Our patients are transferred to UHB who prescribe and give these drugs. UHB supplies information on these drugs.

**11) Are you in the process of, or have you already carried out, a budgetary assessment relating to the impact of the positive guidance for the above treatments in your area?**

No

**If so, do you have an estimated figure of the potential cost of the positive guidance?**

N/A as we do not and have no plans to use either of these drugs

**008/13**

**Nurses with Criminal Convictions**

**1 - How many nurses currently employed by your Trust have criminal convictions?**

**2 - In each case please list a) the conviction and b) the date of the conviction.**

**3 - In each case (and only if possible within cost limits and confines of the Act) please also state the nationality of the nurse with the conviction**

Walsall Healthcare NHS Trust does not hold this information.

**009/13**

**English language classes for staff**

1 - Has your Trust provided or offered to provide any English language classes to foreign members of staff?

**No**

2 - If yes, what was the cost to the trust of providing these classes (whether delivered in-house or externally)?

**N/A**

3 - How many foreign members of staff have signed up to the classes?

**N/A**

4 - Please provide a breakdown of the numbers of staff from each nationality that have signed up to the classes.

**N/A**

5 - Please also provide a breakdown of the job title of each member of staff that signed up to the classes, such as cleaner, doctor, surgeon etc.

**N/A**

Please break down the above information for the 2010-11, 2011-12 and 2012-13 financial years.

**010/13**

**Nationality of Staff**

**Please provide a breakdown of the nationalities of all staff currently employed by your NHS Trust.**

| <b>Nationality</b> | <b>Total</b> |
|--------------------|--------------|
| American           | 1-10         |
| Australian         | 1-10         |
| Austrian           | 1-10         |
| Bangladeshi        | 1-10         |
| Belgian            | 1-10         |
| British            | 3821         |
| Cameroonian        | 1-10         |
| Czech              | 1-10         |
| Dutch              | 1-10         |
| Dutch Antillean    | 1-10         |

|               |      |
|---------------|------|
| Egyptian      | 1-10 |
| Fijian        | 1-10 |
| Finnish       | 1-10 |
| Gabonese      | 1-10 |
| German        | 1-10 |
| Ghanaian      | 1-10 |
| Greek         | 1-10 |
| Hungarian     | 1-10 |
| Indian        | 131  |
| Iranian       | 1-10 |
| Iraqi         | 1-10 |
| Irish         | 18   |
| Italian       | 1-10 |
| Jamaican      | 16   |
| Kenyan        | 1-10 |
| Latvian       | 1-10 |
| Libyan        | 1-10 |
| Lithuanian    | 1-10 |
| Luxembourg    | 1-10 |
| Malaysian     | 1-10 |
| Mauritian     | 1-10 |
| Nepalese      | 1-10 |
| New Zealand   | 1-10 |
| Nigerian      | 1-10 |
| Pakistani     | 25   |
| Philippine    | 24   |
| Polish        | 1-10 |
| Portuguese    | 1-10 |
| Romanian      | 1-10 |
| Russian       | 1-10 |
| Slovak        | 1-10 |
| South African | 1-10 |
| Spanish       | 1-10 |
| Sri Lankan    | 1-10 |
| Trinidadian   | 1-10 |
| Yemeni        | 1-10 |
| Zambian       | 1-10 |
| Zimbabwean    | 11   |

**011/13  
Lifeblood**

On behalf of Lifeblood: The Thrombosis Charity, please find enclosed an FOI request into treatment and prevention of deep vein thrombosis and pulmonary embolism.

**(a) Does your Trust have a written protocol in place for the management of venous thromboembolic diseases in accordance with NICE clinical guideline 144? (Place an X in one box)**

|     |          |
|-----|----------|
| Yes | <b>X</b> |
| No  |          |

**(b) If yes, has this protocol been updated to take account of the NICE technology appraisal guidance 261 (Rivaroxaban for the treatment of deep vein thrombosis and prevention of recurrent deep vein thrombosis and pulmonary embolism) published in July 2012? (Place an X in one box)**

|     |          |
|-----|----------|
| Yes |          |
| No  | <b>X</b> |

**(c) If yes, please attach a copy of the protocol to this FoI response.**

## QUESTION TWO

**(a) Has your Trust issued any prescribing advice to your staff on the use of rivaroxaban for the treatment of deep vein thrombosis and prevention of recurrent deep vein thrombosis and pulmonary embolism?**

|     |          |
|-----|----------|
| Yes | <b>X</b> |
| No  |          |

**(b) If yes, please provide the details of this advice:**

At present NICE guidance suggests it should be available as an option. The guidance was forwarded to relevant clinical teams. For those clinicians that wish to use it as an option the Trust has a process for addition of a new drug to the formulary. As yet no application has been received by the Drugs and Therapeutics Committee.

### QUESTION THREE

- (a) Does your Trust have a procedure whereby an “onward agreement” is established with the PCT (or the new local commissioning body) for the onward management of patients on extended thrombo-prophylaxis with rivaroxaban once they have been transferred into primary care?

|     |   |
|-----|---|
| Yes |   |
| No  | X |

- (b) If yes, please provide details of this “onward agreement” and attach a copy of the template agreement to your Fol response:

### QUESTION FOUR

- (c) Has your Trust had experience of CCGs and/or PCTs refusing to prescribe rivaroxaban for the treatment of deep vein thrombosis and prevention of recurrent deep vein thrombosis and pulmonary embolism?

|     |   |
|-----|---|
| Yes |   |
| No  | X |

**QUESTION FIVE**

(a) Please provide any prescribing data held by your Trust for the use of rivaroxaban for the treatment of deep vein thrombosis and prevention of recurrent deep vein thrombosis and pulmonary embolism since July 2012.

| Month          | Total units of rivaroxaban prescribed | No of patients treated for deep vein thrombosis and prevention of recurrent deep vein thrombosis and pulmonary embolism |
|----------------|---------------------------------------|---|
| July 2012      | 0                                     | See below   |
| August 2012    | 0                                     | See below   |
| September 2012 | 0                                     | See below   |
| October 2012   | 0                                     | See below   |
| November 2012  | 0                                     | See below   |
| December 2012  | 0                                     | See below   |
| January 2013   | 0                                     | See below   |
| February 2013  | 0                                     | See below   |

| Detail  | 2012 (07) Jul | 2012 (08) Aug | 2012 (09) Sep | 2012 (10) Oct | 2012 (11) Nov | 2012 (12) Dec | 2013 (01) Jan | 2013 (02) Feb |
|---|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|
| Pulmonary embolism without mention of acute cor pulmonale   | 4             | 12            | 10            | 13            | 13            | 7             | 10            | 16            |
| Phlebitis/thrombophlebitis oth deep vessels low extremities | 12            | 6             | 5             | 9             | 9             | 4             | 5             | 9             |

012/13

**Contract Award Notice**

1) How many companies submitted a PQQ/ITT for the tender above,

PQQ's = 14

Tenders = 3

2) How many companies submitted a PQQ/ITT for the same tender when it was previously advertised by your organisation, Please note : I do not request the full names and address of the companies, simply the number of applicants.,

The previous contract awarded by the Trust utilised a Birmingham Primary Care Shared Services contract utilising a pre-tendered framework via HealthTrust Europe (formerly Healthcare Purchasing Consortium).

013/13

**Radiology**

1. Please list the Radiology departments / sites operated within your Trust detailing their opening hours?

The following are separate locations within the same site

Out Patient Imaging Department – 8.30am – 5.30pm Monday to Friday

In Patient Imaging – 24 hours per day, 7 days per week

MRI – 8am-8pm – 7 days per week

Antenatal scan department – Mon, Tue, Fri – 8.30am-5pm, Wed, Fri 8.30am-7pm, Sat & Sun 9am-1pm

2. For each site, please list how many active static scanners do you have for the following modalities (MRI, CT, PET-CT)

CT – 2

MRI – 1

3. Please provide the number of annual scans you carried out in the latest year for each of the following modalities: (MRI, CT, PET-CT, X-Ray (incl. DEXA), Mammography, Ultrasound (obstetric & non-obstetric), Other (incl. fluoroscopy, nuclear medicine & interventional radiology) Please provide the dates to which this data refers.

April 2012-February 2013 figures, extrapolated to include estimate for March 2013 (exact data not currently available)

MRI – 11,996

CT – 17,218

Plain Film Radiology – 94,457

Mammography – 4,036

Ultrasound – Obstetric – 24,645

Ultrasound Non Obstetric – 29,014

Other (NMed and Fluoro) - 7739

4. For each of MRI and CT how many mobile scans (if any) were carried out?

None – Mobile MRI scanner used but as part of overspill for static scanner (part of same contract) therefore not true mobile capacity

5. What is the number of full-time equivalent staff (i.e. 2 staff members working 20 hours/week each = 1 Full time staff member) under the following classifications:

**Radiographers (Band 5 & above), Radiographers (Band 4 & below), Non-clinical staff (e.g. receptionists, medical secretaries etc.**

Radiographers Band 5 and above – 50.5 WTE  
Assistant Practitioners – band 4 3.0 WTE  
Clinical Support workers – band 2 13.18 WTE  
Non clinical staff – 13.46

**6. Please list the manufacturers and year of manufacture of the scanners for the following modalities (MRI, CT, PET-CT), providing the magnet strength of your MRI scanners, and how many slices do your CT and PET/CT machines allow?**

MRI – Phillips 2001

CT – Both GE scanners 2008 and 2010

**014/13**

**Cancer Drug Funds**

I wish to make a series of separate requests under the Freedom of Information Act. For convenience, I am including them in one email.

They are as follows:

1. Please confirm or deny whether your trust has submitted applications to fund treatments through the Cancer Drugs Fund between April 2012 and March 2013 inclusive.
2. Please supply details of the number of applications that your trust has submitted for treatments using the Cancer Drugs Fund for each month between April 2012 and March 2013 inclusive, broken down by the treatment used and the indication in which it was used.
3. Please supply details of the number of applications which were approved and rejected, during the period April 2012 to March 2013 inclusive, broken down by treatment and the indication in which it was used.

**Public interest arguments**

There is a clear public interest for disclosure of this information, in that disclosure will:

- Further the understanding of and participation in the public debate of issues of the day, and will allow a more informed debate of issues under consideration by public bodies
- Promote accountability and transparency by public authorities for decisions taken by them
- Promote accountability and transparency in the spending of public money
- Allow individuals to understand decisions made by public authorities affecting their lives and, in some cases, assisting individuals in challenging those decisions
- Bring to light information affecting public health and public safety

**Please could you refer to the link below:**

<http://www.westmidlands.nhs.uk/WhatWeDo/WestMidlandsCancerDrugFund.aspx>

If you have any general queries regarding the process you can either email [wm.cancerdrugs@nhs.net](mailto:wm.cancerdrugs@nhs.net)

**015/13**

**Register of payments from pharmaceutical companies to staff**

Hospital trusts are reportedly meant to keep a register of payments from pharmaceutical companies (and other relevant companies) to staff, in case of conflicts of interest [1]. I am requesting a copy of the register for this Trust - which I would hope includes details of all relevant payments to staff and any related potential conflicts of interest. If it would be possible to have this information in an appropriate structured data format - for example, a CSV file - this would be helpful. If this Trust does not have a complete register, I would request: the release of the information on this topic that the Trust does hold; and an explanation of why the Trust does not hold a complete register.

I am aware that some would view data on pharmaceutical funding as personal data for those staff receiving the funding. Even if some of the information on this register may be classed as personal data (although this is contestable - for example, in some sectors of academia information re funding sources is made public as a matter of course) it would be covered by paragraph 6 of Schedule 2 of the Data Protection Act. The release of these data is "necessary for the purposes of legitimate interests pursued by the data controller or by the third party or parties to whom the data are disclosed" [2]. Spurling et al's systematic review of how information from pharmaceutical companies impacts physicians' prescribing reported that, of the studies included which looked at total promotional investment, three "found that total promotional investment was positively associated with prescribing frequency...Two...found both positive results and no association...One study did not detect an association" [3]. There is thus a legitimate interest in releasing this register: the available research suggests that it is plausible that payments received influence how public money is spent and the type of care provided to members of the public.

**Please find attached a copy of the Trust's Code of Business Conduct which states the need for people to disclose conflicts of interest also attached is our Annual Report for 2011/12 which has a link to the Register of Interests and Register of Gifts and Hospitality. There were no declarations with regards to pharmaceutical companies.**

**Business Conduct available upon request.**

**016/13**

**Patients with a Foreign Body**

**For the last financial year:**

**The number of patients presenting themselves at each hospital under the Trust's control with a foreign body in their anus**

Between 1 – 5 patients (due to the small numbers involved we are unable to provide an exact number of patients due to the Data Protection Act 1998) total cost £467

**The number of patients presenting themselves at each hospital under the Trust's control with a foreign body in their vagina**

Between 1 – 5 patients (due to the small numbers involved we are unable to provide an exact number of patients due to the Data Protection Act 1998) total cost £1,542

**The number of patients presenting themselves at each hospital under the Trust's control with a foreign body in their penis**

0

**017/13  
Vehicle Fleet**

1. What is the total number of vehicles in the organisation's fleet? **8 vehicles**
2. How many of the vehicles are Cars? **None**
3. How many of the vehicles are Vans? **6 vans and 2 passenger vehicles**
4. How many of the vehicles are LGV/HGV? **6 vans**
5. What percentage of Cars are leased? **N/A**
6. Who is the lease provider for Cars? **N/A**
7. What percentage of Vans, LGV and HGV are leased? **90%**
8. Who is the lease provider for Vans, LGV and HGV? **Lex Autolease & Automotive Leasing**
9. Are the Vans, LGV and HGV vehicles maintained in a garage owned and operated by the organisation? - **No**
10. If the organisation does not maintain its own vehicles, please provide the name of the company or organisation that maintains the Vans, LGV and HGVs  
**Lease Company/ Morris Car & Commercial/Lodge Tyres**
11. If there is a contract in place for Van, LGV/HGV maintenance please advise of the date the contract was let and when the contract is scheduled to be reviewed.  
**Morris Car & Commercial – 01/02/12 to 31/01/2013**  
  

|                     |   |
|---------------------|---|
| <b>Lodge Tyre</b>   | <b>October 2011 to September 2012</b>   |
| <b>Alfa Tailift</b> | <b>Taillift services and repair (Loler Testing)<br/>Provided by leasing agent ( Lex Autolease</b> |
12. How much does the organisation spend on vehicle fleet maintenance in a year? -  
**£7262.12**
13. Who is the individual responsible for the vehicle fleet? **Facilities Manager**

**018/13  
Compromise Agreements**

Please disclose the number of compromise agreements your organisation has reached with former staff in each of the past 10 financial years.

For each years, if possible please disclose the number of these agreements containing any kind of confidentiality clause.

Please also disclose the total value of settlement payments relating to compromise agreements in each of the past 10 years.

Please format the data as follows:

| Number of agreements | Number with confidentiality clauses | Total value of settlements |
|----------------------|-------------------------------------|----------------------------|
| 2012-13              |                                     |                            |
| 2011-12              |                                     |                            |
| 2010-11              |                                     |                            |
| 2009-10              |                                     |                            |
| 2008-9               |                                     |                            |
| 2007-8               | <b>1</b>                            | <b>0</b>                   |
| 2006-7               | <b>1</b>                            | <b>0</b>                   |
| 2005-6               |                                     |                            |
| 2004-5               |                                     |                            |
| 2003-4               |                                     |                            |
| 2002-3               |                                     |                            |

For each of the past 10 years, please also disclose the 10 highest individual settlement payments which have been made.

Please format the data as follows:

| Year    | Payment        |
|---------|----------------|
| 2012-13 |                |
| 2011-12 |                |
| 2010-11 |                |
| 2009-10 |                |
| 2008-9  |                |
| 2007-8  | <b>£46,207</b> |
| 2006-7  | <b>£14,691</b> |
| 2005-6  |                |
| 2004-5  |                |
| 2003-4  |                |
| 2002-3  |                |

**019/13**

**Stroke Services**

**Stroke Questionnaire**

Completed By: **Chris Davis**  
Date: **May 2013**  
On Behalf of: **Walsall Healthcare NHS Trust**  
Email: [chris.davis@walsallhealthcare.nhs.uk](mailto:chris.davis@walsallhealthcare.nhs.uk)

1. a) Does the NHS Trust provide acute stroke services: **Yes**  
If yes, please go to Question 1b  
If no, please go to question 13  
b) Is the Trust a regionally designated hyper-acute\* stroke centre? **Yes**  
\*Hyper-Acute usually refers to the time from onset of a stroke up to 72 hours later or when clinically stable
2. How many patients have you treated for acute stroke over the following years:  
2008/09: **366 patients**  
2009/10: **382 patients**  
2010/11: **402 patients**  
2011/12: **418 patients**

2012/13: **433 patients**

3. What proportion of stroke patients was the Trust their first point of call since onset of symptoms:

2012: %

2011:

2010:

2009:

2008:

**Unable to quantify as not recorded on admission**

4. Does the Trust provide fully staffed acute stroke diagnostic and treatment 24 hours a day, 7 days a week? **Yes**

If no, what hours do you provide stroke services?

If no, where do you send patients out of hours?

5. Does the Trust provide routine access to scanning facilities for suspected stroke patients 24 hours a day, 7 days a week? **Yes**

If no, what hours do you provide diagnostic scans?

If no, where do you send patients out of hours?

6. a) What proportion of patients suspected of having a stroke receive diagnostic scans (CT scans) within the first hour of having their stroke, as per NICE Clinical Guideline 68:

2008/09: **Data not recorded against the 1 hour timeframe at this point.**

2009/10: **Data not recorded against the 1 hour timeframe at this point.**

2010/11: **Data not recorded against the 1 hour timeframe at this point.**

2011/12: **38.75%**

2012/13: **40%**

- b) What proportion of patient suspected of having a stroke receive diagnostic scans (CT scans) within the first 24 hours of having their stroke.

2008/09: **71.89%**

2009/10: **81.36%**

2010/11: **93.46%**

2011/12: **93%**

2012/13: **95%**

**The data for 08/09 and 09/10 is taken from our CQUIN submissions to the PCT and is not comparable to the information for 2010 onwards.**

- c) Does the Trust offer advanced imaging techniques / CT angiography

**Yes**

7. Does the Trust provide routine access to intravenous thrombolysis for stroke patients 24 hours a day 7 days a week? **Yes**

If no, what hours do you provide intravenous thrombolysis?

If no, do you send patients elsewhere for out of hours care?

Where do you send them?

8. What proportion of patients confirmed as having a stroke receive intravenous thrombolysis within the first 3 hours of having their stroke, as per NICE Clinical Guideline 68:

2009/10: **8.6%**

2010/11: **8.6%**

2011/12: **9%**

2012/13: **6.6%**

9. Does the Trust provide second line therapies for patients who don't respond to intravenous thrombolysis or for whom this first line therapy is not suitable, such as thrombectomy?

**No we do however, have the facility to refer patients for example requiring a thrombectomy to another hospital with which we have local agreements to treat these patients. We would not put the patient at risk clinically to do this so the patient would be stabilized before transfer.**

If yes, what second line therapies does the Trust provide?

10. Does the Trust operate multi-disciplinary teams for the treatment of patients with stroke?

**Yes**

If yes, does your stroke MDT include:

|                                    |            |
|------------------------------------|------------|
| Stroke Physicians:                 | <b>yes</b> |
| Interventional Radiologists:       | <b>yes</b> |
| Specialist Stroke Nurses           | <b>yes</b> |
| Specialist Stroke Physiotherapists | <b>yes</b> |

11. Does the Trust record patient outcomes on discharge, based on the Modified Rankin Score?

**Yes however, this is only recent (as of January 2013), prior to this we used the Bartell scoring system**

If yes, what was the average Modified Rankin Score for your stroke patients on discharge over the following years?

2012:

2011:

2010:

2009:

2008:

12. Does the Trust have place strategies to improve patient outcomes from stroke?

**Yes**

13. If the Trust does not provide acute stroke services:

a) Where do you send patients who are suspected of suffering stroke?

b) How quickly are your patients on average transferred to the other facility?

Hours                      Minutes

**N/A**

14. Are hyper acute stroke services regionally designated in your locality?

**Result of reconfiguration not yet known.**

15. Are referral pathways and agreements with all relevant ambulance services in place to ensure direct and rapid access to specialist care?

**Yes**

16. What proportion of patients are admitted to a specialist stroke unit within 4 hours of arriving in hospital?

2008/09: **Data not recorded as the Trust did not start direct admissions until 2010/11**

2009/10: **Data not recorded as the Trust did not start direct admissions until 2010/11**

2010/11: **58%**

2011/12: **70%**

2012/13: **72%**

17. What proportion of stroke patients spend at least 90% of their time in hospital in a stroke unit?  
 2008/09: **60.61%**  
 2009/10: **59.12%**  
 2010/11: **78.49%**  
 2011/12: **84.2%**  
 2012/13: **84.1%**
18. Does the Trust provide ward rounds by specialist stroke physicians 7 days per week or the standard 5 days per week?  
**7 days/week**
19. What are the aggregated patient mortality rate at discharge following admission for acute stroke within the Trust?  
 2008/09: **24.59%**  
 2009/10: **24.12%**  
 2010/11: **18.48%**  
 2011/12: **17.72%**  
 2012/13: **15.40%**
20. Please express your views on what are the biggest challenges to providing outstanding care and outcomes for patients who suffer from stroke

**Providing 45 minutes per day of rehabilitation for Stroke patients.  
 Provision of rehabilitation beds in other locations i.e. hospital, care homes, etc  
 SALT provision to support patients redeveloping communication skills  
 ESD if social care input is required  
 Sustainability of 24/7 service with the limited numbers of Stroke Physicians nationally.**

## 020/13 Radiology

| Trust   |   |
|---|---|
| 1. Does the Trust have a backlog of radiology examinations to report?                           | <b>Yes - in line with normal report turnaround times for 2 weeks on average</b> |
| 2. If it does what are the volumes by modality?   | <b>Plain Film – 1944</b>  |
|   | <b>CT – 293</b>   |
|   | <b>MRI - 470</b>  |
| 3. Does the Trust outsource radiology images for reporting to external teleradiology companies? | <b>No</b>   |
| 4. If yes, who is the contract with?  | <b>N/A</b>  |
| 5. Was the contract awarded through OJEU/procurement, a pilot or another basis?                 | <b>N/A</b>  |
| 6. What was the contract start date?<br><b>dd/mm/yy</b>   | <b>N/A</b>  |
| 7. What is the contract end date?<br><b>dd/mm/yy</b>  | <b>N/A</b>  |

|   |                  |
|---|------------------|
| 8. Is there an option to extend the contract?   | N/A              |
| 9. How long is the option to extend the contract?   | N/A              |
| 10. How much did the Trust spend on outsourcing radiology reporting in the last financial year (April 2012 – March 2013)?<br><b>Please provide a figure only with no £ sign or commas</b> | £0               |
| 11. What was the volume of examinations outsourced <b>by modality</b> for <b>routine</b> examinations (ie 24-48 hour turnaround time) between April 2012 and March 2013 ?                 | Plain Film - N/A |
|   | CT - N/A         |
|   | MRI - N/A        |
| 12. What was the volume of examinations outsourced <b>by modality</b> for <b>urgent examinations</b> (ie 1-2 hour turnaround time) between April 2012 and March 2013 ?                    | Plain Film - N/A |
|   | CT - N/A         |
|   | MRI - N/A        |
| 13. Does your RIS have HL7 functionality?   | Yes              |
| 14. Do you have a Trust integration engine and interface integration team?  | Yes              |

**021/13**

### **Formulary**

**I would like to request a copy of your current Prescribing Formulary. If you do not produce a formulary but use one from another Trust, please indicate which.**

The formulary for Walsall Healthcare NHS Trust is available on our Trust website or the following link <https://www.walsallhealthcare.nhs.uk/information-for-gps/formulary.aspx>

**I would be grateful if you could answer the following questions if this information is not contained within the formulary;**

- **The name of the committee which updates the above?**

The Medicines Management Quality Board authorises updates to the formulary jointly with the Walsall Clinical Commissioning Group.

- **The name of the committee which authorises new entries to the formulary?**

The Medicines Management Quality Board authorises new additions jointly with the Walsall Clinical Commissioning Group.

- **Review dates and next scheduled update dates?**

Formulary is a live document and will be updated when new drugs/guidance are added to the joint formulary. In addition there is a program for regularly updating formulary sections.

- **Which other organisations (if any) use the formulary?**

Walsall Clinical Commissioning Group

**022/13  
Zero Hour Contracts**

I would like to know how many people have been employed on 'zero hours contracts only' by the Trust, over each of the last five years, i.e. not including those who have a substantive contract in addition to their zero hours contract. I would also be grateful for a breakdown of what positions they hold. Please include any Bank staff.

|   | <b>Employees primarily employed on a zero hours contract (as at 31 March)</b> |             |             |             |             |
|---|---|-------------|-------------|-------------|-------------|
|   | <b>2009</b>   | <b>2010</b> | <b>2011</b> | <b>2012</b> | <b>2013</b> |
| Bank Worker - Administrative and Clerical       | 98  | 84          | 158         | 183         | 145         |
| Bank Worker - Allied Health Professional        | 10  | 10          | 12          | 23          | 24          |
| Bank Worker - Clinical Support                  | 204   | 256         | 264         | 308         | 315         |
| Bank Worker - Estates and Ancillary             |   |             | 2           | 11          | 12          |
| Bank Worker - Healthcare Scientist              | 8   | 11          | 11          | 4           | 7           |
| Bank Worker - Nursing and Midwifery             | 122   | 139         | 149         | 219         | 159         |
| Bank Worker - Operating Department Practitioner | 4   | 3           | 2           | 2           | 4           |
| Bank Worker - Pharmacist                        |   | 2           | 2           | 2           | 8           |
| Chaplain  | 4   | 4           | 2           | 2           | 2           |
| Medical & Dental Locum                          | 58  | 58          | 93          | 80          | 59          |
| <b>Grand Total</b>                              | <b>508</b>  | <b>567</b>  | <b>695</b>  | <b>834</b>  | <b>735</b>  |

**023/13  
Employment Benefit Trusts**

1. **How many employees are paid via Employee Benefit Trusts?**  
None
2. **How many of those who receive financial reward via EBTs are remunerated in the form of loans?**  
Not applicable
3. **Please state the job title for each employee in question 1.**  
Not applicable

**024/13  
Incident Reporting Policy**

**Please may you send me the incident reporting policy for Walsall NHS trust?**



Incident Reporting  
Policy Final April2013.

**025/13  
Overseas Patients**

1. How much has been spent at this NHS trust providing care to overseas visitors who are NOT eligible for free treatment in the past two years ( financial year 2012/13 and financial year 2011/12)

**2011/12 - £12,786.81  
2012/13 - £16,617.00**

2. How much of the amount owed for this care is still outstanding i.e. has not been paid?

**2011/12 - £8,149.00  
2012/13 - £11,675.94**

3. How much has been spent at this NHS trust providing IVF to overseas visitors who are not eligible for free treatment in the past two years ( financial year 2012/13 and financial year 2011/12) and how much of this money is still unpaid?

**The Trust has not incurred costs for providing IVF to overseas visitors.**

**026/13  
Overpayments**

1. a) How many staff have been overpaid by the trust in the last year (1st April 2012 - 1st April 2013)? - **51**
  - b) What is the total of these overpayments? – **£35,903.06**
  - c) How much of this money was recovered? - **£18,860.63**
  - d) What were the three highest overpayments to staff (in figures) during this period and what role did each have? (ie Consultant)

| <b>ROLE</b>               | <b>AMOUNT (£)</b> |
|---------------------------|-------------------|
| <b>STAFF NURSE</b>        | <b>5,299.79</b>   |
| <b>PERSONAL ASSISTANT</b> | <b>2,539.80</b>   |
| <b>MIDWIFE</b>            | <b>2,415.76</b>   |

2. a) How many staff have been overpaid by the trust in the last three years? (1st April 2010 - 1st April 2013)? - **159**
  - b) What is the total of these overpayments? - **£154,893.85**
  - c) How much of this money was recovered? - **£115,261.91**

3. What action is taken when overpayments are made?

**Staff members are contacted when an overpayment is made and requested to repay immediately, if this is not applicable the overpayment is then deducted and recovered over a reasonable amount of time in agreement with the staff member.**

**027/13**

### **Serious Incidents**

I would like to make the following request for information under the Freedom of Information Act.

1.

a. How many serious untoward incidents were reported between April 2012 and April 2013 that involved an operation where the wrong organ was removed?

b. How many of these incidents resulted in death of the patient?

c. How many of these incidents resulted in the doctor/consultant leading the operation being referred to the General Medical Council?

**There were no serious untoward incidents that were reported between April 2012 and April 2013 that involved an operation where the wrong organ was removed**

2

a. How many serious untoward incidents were reported between April 2011 and April 2012 that involved an operation where the wrong organ was removed?

b. How many of these incidents resulted in death of the patient?

c. How many of these incidents resulted in the doctor/consultant leading the operation being referred to the General Medical Council?

**There were no serious untoward incidents that were reported between April 2011 and April 2012 that involved an operation where the wrong organ was removed**

3

a. How many serious untoward incidents were reported between April 2010 and April 2011 that involved an operation where the wrong organ was removed?

b. How many of these incidents resulted in death of the patient?

c. How many of these incidents resulted in the doctor/consultant leading the operation being referred to the General Medical Council?

**There were no serious untoward incidents that were reported between April 2010 and April 2011 that involved an operation where the wrong organ was removed**

**028/13**

### **Carbon Reporting**

Please would you respond to me with answers to the following questions.

| <b>Question Number</b> | <b>Questions</b>  | <b>Response</b>                |
|------------------------|---|--------------------------------|
|                        | <b>Organisation information</b>   |                                |
| 1                      | Does your organisation have a trust board lead for sustainability/carbon reduction? | <b>Yes</b>                     |
| 2                      | If Yes, what is their post title?   | <b>Chief Operating Officer</b> |
| 3                      | Is your organisation a Foundation Trust?  | <b>No</b>                      |
| 4                      | Is your organisation in the European Union Carbon                                   | <b>No</b>                      |

|    |  |   |
|----|--|---|
|    | Trading Scheme (EU ETS)?   |   |
| 5  | Is your organisation in the Carbon Energy Efficiency Scheme?   | <b>No</b>   |
|    |  |   |
|    | <b>Sustainability/Carbon reporting</b>   |   |
| 6  | Does your organisation have a carbon reduction strategy or a sustainable development plan or equivalent?               | <b>Yes</b>  |
| 7  | Is it published on your external website?  | <b>Not as yet</b>   |
| 8  | Is it available on your internal Intranet site?  | <b>Yes</b>  |
| 9  | Do you report Sustainability/Carbon emission information in your annual report?  | <b>Yes</b>  |
| 10 | If No where do you report it?  |   |
|    | What reporting framework do you use, NHS SDU guidance or HM Treasury guidance or other? (Please state)                 | <b>SDU</b>  |
| 11 | Do you report greenhouse gas emissions against the scopes 1,2 and 3 as defined by Climate Change Act and GHG protocol? | <b>No</b>   |
| 12 | Do you report the information directly to the governors or members?  | <b>No</b>   |
| 13 | If so how often?   |   |
| 14 | Do you report the trust's energy usage and carbon emissions to the staff?  | <b>Not directly</b>   |
| 15 | If so how often?   |   |
| 16 | Do you report to your commissioners?   | <b>No</b>   |
| 17 | Do commissioners ask for the information?  | <b>Commissioners are aware of Trust's carbon footprint through ERIC returns and Annual Reports etc.</b> |
|    |  |   |
|    | <b>Corporate Citizenship</b>   |   |
| 18 | Does your organisation undertake the NHS Good corporate citizen test?  | <b>Yes</b>  |
| 19 | When was the last time this was undertaken?  | <b>2012</b>   |
| 20 | Would your carbon lead be willing to be interviewed further about these questions?                                     | <b>Unknown</b>  |

**029/13**

**Zero Hour Contracts**

Under the Freedom of Information Act 2000, I request the following information:

- 1) The number of staff currently employed (directly or indirectly) on Zero Hour Contracts broken down into clinical and non-clinical roles for each of the last four years
- 2) The number of staff currently employed (directly or indirectly) on Casual Worker Contracts broken down into clinical and non-clinical roles for each of the last four years.

**We have categorised all of our zero hours contracts under number 1 therefore there will be a zero return for question 2.**

|                    | Employees primarily employed on a zero hours contract (as at 31 March) |            |            |            |
|--------------------|--|------------|------------|------------|
|                    | 2010   | 2011       | 2012       | 2013       |
| Clinical Role      | 468  | 522        | 634        | 569        |
| Non - Clinical     | 99   | 173        | 200        | 166        |
| <b>Grand Total</b> | <b>567</b>   | <b>695</b> | <b>834</b> | <b>735</b> |

**030/13**

**Special payments made involving judicial mediation**

I would be grateful if you could supply me a breakdown of all special payments made involving judicial mediation in Walsall Healthcare NHS Trust in each of the last five years.

All NHS bodies are under a duty to keep a record of any special payments made, including judicial mediation, under existing NHS guidance. Providing this information should therefore not entail material cost given that these records should already be kept.

**There have been no special payments in the last five years involving judicial mediation.**

**031/13**

**Guidelines / Protocols**

I would be grateful if you could provide me with the following information:

- Copies of any guidelines or protocols currently in use within your Trust which are relevant to the Induction of Labour in pregnant women.

If possible, I would prefer the information to be provided to me in electronic form by email.

**Information available upon request.**

**032/13**

**Maternity Unit**

For each of your hospitals which has a maternity unit, please detail separately for the years 2011 and 2012:

- 1) On how many occasions did the maternity unit temporarily close (defined as a period during which women in labour would not have been admitted to the unit)?

**There were no temporarily closures for 2011.**

**2012 – 16/06/12**

- 2) On each occasion, how many hours was the maternity unit closed for?  
2012 – **3 hours**

- 3) On each occasion, was the closure down to:
  - a. A shortage of suitable midwives – **No**

- b. A shortage of suitable consultants – **No**
  - c. A shortage of suitable staff of other description – **No**
  - d. A shortage of available beds – yes
  - e. Another reason (please give a brief description) - **N/A**
- 4) On each occasion, how many women in labour were turned away while the unit was closed?  
**No women were diverted or delivered elsewhere**
- 5) On occasions when the maternity unit was closed, where were women in labour generally advised to go for care, and where is the furthest recorded place that a patient was sent?  
**N/A**

**033/13  
Maternity Policy**

I am a Specialty Registrar in Dental Public Health and although I am currently on placement at St Chad's Court, Hagley Road, Birmingham, my employing organisation is Walsall NHS Healthcare Trust.

I am currently 19 weeks pregnant and I have informed my supervisors, including my Lead Educational Supervisor but I am aware that I need to complete some paperwork and inform others etc. Unfortunately I have been unable to locate either the Trust's Maternity Policy or copies of the forms I need to complete. I would be most grateful if you could either e-mail this to me or provide me with a web address where this information can be found.

**Information available upon request.**

**034/13  
Clinical Information Software Systems and coding standards**

FOI Request: Clinical Information Software Systems and coding standards

I'd like to submit a freedom of information request about details of specified clinical information software systems and coding standards used in Walsall Hospitals NHS Trust. For each software system listed (1 – 12) please provide details for each of the questions (a – e) below. If more than one software system is used for the same capability, please provide details for all relevant software systems used in the trust. If no software system currently exists, please indicate this clearly by stating that "No software system is installed".

Clinical Software Systems

- 1) Critical care
- 2) Bed management
- 3) Clinical noting
- 4) Observations – vital signs
- 5) Clinical workflow engine/integrated care pathways
- 6) Inpatient e-prescribing
- 7) Oncology e-prescribing
- 8) Clinical decision support in e-prescribing
- 9) Patient access portal

- 10) Analytics (patient level costing information - PLICS)
- 11) Clinical data warehouse
- 12) Blood tracking

| Questions for each software systems listed above          | Expected format of answer |
|---|---------------------------|
| a) Name of software system supplier                       | Company name              |
| b) Name of software system product and its version number | Product name              |
| c) Date of installation                                   | Date (DD/MM/YYYY)         |
| d) Date of contract expiration                            | Date (DD/MM/YYYY)         |
| e) Is it an annually renewable contract?                  | "Yes" / "No"              |

Additional Questions (each of the questions below should be answered simply either "Yes" or "No")

- 13) Does the trust use NHS Number as the primary patient identifier?
- 14) Does the trust use SNOMED CT as its primary clinical terminology?
- 15) Does the trust use the NHS Dictionary of Drugs and Medical Devices (DM+D)?
- 16) Does the trust send structured pathology/radiology results to GPs electronically?
- 17) Does the trust send structured discharge summaries to GPs electronically?
- 18) Does the trust send structured patient data with social care providers electronically?

An Excel spreadsheet, designed to assist you with providing the above requested information, is attached with this FOI request. It also includes a separate worksheet with brief explanations/definitions for each of the software systems listed above to help clarify what is meant by each of them. Please complete and return the spreadsheet form back to me. If any of the above clinical software systems are not applicable (for example: the trust does not have a relevant department where the system would be used) then please state that it is not applicable clearly. I'd be grateful if you can please formally acknowledge safe receipt of this FOI request and let me know when I can expect a response.

**Information available upon request.**

**035/13**

**A&E Waits**

1 - How many patients have had to wait more than a) 12 hours and b) 24 hours in A&E before being discharged/moved to another department in the financial years i) 2012/13 and ii) 2011/12?

**1a Wait in Dept (Not admitted)**

|           | 12h | 24h |
|-----------|-----|-----|
| 2012-2013 | 113 | 0   |
| 2011-2012 | 32  | 0   |

**1b Wait for admission (to admission ward)**

|           | 12h | 24h |
|-----------|-----|-----|
| 2012-2013 | 0   | 0   |
| 2011-2012 | 0   | 0   |

2 - What is the longest time a patient had to wait in A&E before being discharged/moved to another department in the financial years a) 2012/13 and b) 2011/12?

**1a Wait in Dept (Not admitted)**

|           |          |
|-----------|----------|
| 2012-2013 | 1054 min |
| 2011-2012 | 954 min  |

**1b Wait for admission (to inpatient ward)**

**2012-2013 715 min**

**2011-2012 710 min**

3 - How many consultants posts do you have in the A&E unit? – **6**

4 - How many of these are currently vacant? – **0**

5 - How many consultants are there onsite at the hospital overnight for A&E patients? – **0**

How many are on-call (offsite)? – **1**

6 - How many middle grade doctors are there onsite at the hospital overnight for A&E patients?  
How many are on-call (offsite)?

**3 middle grades until 2am, 2 middle grades until 4am and then 1 middle grade from 4am – 8am. There is no on call.**

7- How many middle grade doctors are there onsite at the hospital at weekends for A&E patients? How many are on-call (offsite)?

**We currently have 6 middle grades in the department on weekends, the shifts are: 8am – 6pm, 10am – 10pm, 12pm – 10pm, 12pm – 8pm, 4pm – 2am and 10pm – 8am. There is no on call.**

8 - How many consultants are there onsite at the hospital at weekends for A&E patients? – **1**

How many are on-call (offsite)? – **1**

9 - Have you ever had to place patients in non-clinical areas within the A&E department such as office space/x-ray rooms/cupboards? If yes please state how many times and the location of the non-clinical area.

**During the winter months of 2011/12 on few exceptional occasions we put patients on trolleys in the clinical X-ray room in A&E.**

**036/13**

**Registered Nurses**

1. Please provide a total for the number of Registered Nurses that would be employed by the Trust if all Registered Nurse vacancies were filled.

**The total budgeted establishment for Registered Nurses, as at 31 March 2013, stood at 1117.16 FTE.**

2. What was the total number of Registered Nurses employed by you as of 1 January 2013 (both Headcount and Full-Time/Whole Time Equivalent)?

**As at 31 January 2013, the Trust employed 1195 Registered Nurses totalling 1047.49 FTE.**

3. What was the total number of Registered Nurses employed by you as of 1 January 2012 (both Headcount and Full-Time/Whole Time Equivalent)?

**As at 31 January 2012, the Trust employed 1144 Registered Nurses totalling 976.74 FTE.**

4. Please provide figures for the number of Registered Nurse posts that were vacant on:

- 1 January 2012
- 1 April 2012
- 1 October 2012
- 1 January 2013

| Registered Nurse Vacancies | FTE   |
|----------------------------|-------|
| 1 January 2012             | 95.05 |
| 1 April 2012               | 34.27 |
| 1 October 2012             | 34.34 |
| 1 January 2013             | 78.35 |

5. Please provide a total for the number of shifts carried out by Registered Nurses between 1 January 2012 and 1 January 2013. **15,378**
6. How many of these shifts were carried out by Agency Registered Nurses? **2,906**
7. How many of these shifts were carried out by Bank Registered Nurses? **12,472**
8. What was the total Trust expenditure on Agency Registered Nurses between 1 January 2012 and 1 January 2013? **£1,010,198**
9. What was the total Trust expenditure on Agency Registered Nurses between 1 January 2011 and 1 January 2012? **£654,735**
10. What was the total Trust expenditure on Bank Registered Nurses between 1 January 2012 and 1 January 2013? **£2,612,813**
11. What was the total Trust expenditure on Bank Registered Nurses between 1 January 2011 and 1 January 2012? **£2,373,066**
  
12. Please provide a breakdown of the reasons why Agency Registered Nurse staff were used between 1 January 2012 and 1 January 2013 (e.g. covering sickness, training, maternity leave etc), and the number of shifts covered for each reason.

| Reason for Booking               | No of Shifts |
|----------------------------------|--------------|
| Activity                         | 237          |
| Acuity                           | 160          |
| Add. Capacity on Short Stay      | 90           |
| AMU Clinic                       | 1            |
| Backfill for Bariatric Unit      | 101          |
| Backfill for Capacity            | 543          |
| Backfill for Ward 14             | 131          |
| Carotid Patients                 | 6            |
| Community Nursing                | 61           |
| Long Term Sick (28 days)         | 1            |
| Maintain minimum safety levels   | 55           |
| Maternity / Paternity Leave      | 9            |
| Moved from another ward          | 5            |
| Night manager has booked         | 105          |
| Reporting Only - Agency Bookings | 41           |
| Reporting Only - Bank Bookings   | 26           |
| Sickness                         | 244          |

|  |             |
|--|-------------|
| Site co-ord has booked but not informed. | 18          |
| Special Leave                            | 7           |
| Suspension                               | 1           |
| The request did not contain any reason   | 10          |
| TIA Clinic                               | 3           |
| To cover Annual Leave                    | 24          |
| To cover Secondment                      | 27          |
| To cover Study Leave                     | 11          |
| To escort a patient                      | 8           |
| To maintain safe staffing levels         | 618         |
| To special a patient                     | 25          |
| Tracheostomy Patient                     | 99          |
| Vacancy                                  | 92          |
| Waiting List Initiative                  | 3           |
| Winter Resilience                        | 122         |
| Workload on Ward                         | 22          |
| <b>Grand Total</b>                       | <b>2906</b> |

13. Please provide a breakdown of the reasons why Bank Registered Nurse staff were used between 1 January 2012 and 1 January 2013 (eg covering sickness, training, maternity leave etc), and the number of shifts covered for each reason.

| Reason for booking                       | No of Shifts |
|--|--------------|
| Activity                                 | 762          |
| Acuity                                   | 342          |
| Add. Capacity on Short Stay              | 218          |
| AMU Clinic                               | 3            |
| Backfill for Bariatric Unit              | 256          |
| Backfill for Capacity                    | 2108         |
| Backfill for Ward 14                     | 388          |
| Carotid Patients                         | 7            |
| Community Nursing                        | 3            |
| Long Term Sick (28 days)                 | 8            |
| Maintain minimum safety levels           | 422          |
| Mandatory Training                       | 76           |
| Maternity / Paternity Leave              | 191          |
| Moved from another ward                  | 15           |
| Night manager has booked                 | 11           |
| Reporting Only - Agency Bookings         | 1            |
| Reporting Only - Bank Bookings           | 50           |
| Sickness                                 | 1203         |
| Site co-ord has booked but not informed. | 4            |
| Special Leave                            | 18           |
| Suspension                               | 2            |

|  |              |
|--|--------------|
| The request did not contain any reason | 35           |
| TIA Clinic                             | 2            |
| To cover Annual Leave                  | 210          |
| To cover D.N.A.                        | 1            |
| To cover Secondment                    | 100          |
| To cover Study Leave                   | 54           |
| To escort a patient                    | 9            |
| To maintain safe staffing levels       | 2259         |
| To special a patient                   | 12           |
| Tracheostomy Patient                   | 91           |
| Vacancy                                | 2719         |
| Waiting List Initiative                | 533          |
| Winter Resilience                      | 313          |
| Workload on Ward                       | 49           |
| <b>Grand Total</b>                     | <b>12472</b> |

14. How many Bank Registered Nurses began a bank shift within four hours of completing rostered shifts in their substantive posts during the period 1 January 2012 – 1 January 2013?

|           | <b>3 Months</b>            | <b>9 months</b>            | <b>3 months</b>            | <b>9 months</b>            |
|-----------|----------------------------|----------------------------|----------------------------|----------------------------|
|           | 01/01/11<br>to<br>31/03/11 | 01/04/11<br>to<br>31/12/11 | 01/01/12<br>to<br>31/03/12 | 01/04/12<br>to<br>31/12/12 |
| Agency RN | <b>404,535</b>             | <b>250,200</b>             | <b>345,748</b>             | <b>664,450</b>             |
| Bank RN   | <b>652,621</b>             | <b>1,720,445</b>           | <b>844,329</b>             | <b>1,768,484</b>           |

### 037/13

#### Health Care Assistants

- Please provide a total for the number of Health Care Assistants that would be employed by the Trust if all Health Care Assistant vacancies were filled.**  
The total budgeted establishment for HCAs, as at 31 March 2013, stood at 390.99 FTE.
- What was the total number of Health Care Assistants employed by you as of 1 January 2013 (both Headcount and Full-Time/Whole Time Equivalent)?**  
As at 31 January 2013, the Trust employed 403 HCAs totalling 357.86 FTE.
- What was the total number of Health Care Assistants employed by you as of 1 January 2012 (both Headcount and Full-Time/Whole Time Equivalent)?**  
As at 31 January 2012, the Trust employed 369 HCAs totalling 325.55 FTE
- Please provide figures for the number of Health Care Assistants posts that were vacant on:**
  - 1 January 2012**

- 1 April 2012
- 1 October 2012
- 1 January 2013

| HCA Vacancies  | FTE   |
|----------------|-------|
| 1 January 2012 | 21.48 |
| 1 April 2012   | 20.85 |
| 1 October 2012 | 26.51 |
| 1 January 2013 | 71.89 |

5. Please provide a total for the number of shifts carried out by Health Care Assistants between 1 January 2012 and 1 January 2013.  
21,245
6. How many of these shifts were carried out by Agency Health Care Assistants?  
1,767
7. How many of these shifts were carried out by Bank Health Care Assistants?  
19,478
8. What was the total Trust expenditure on Agency Health Care Assistants between 1 January 2012 and 1 January 2013?  
£143,618
9. What was the total Trust expenditure on Agency Health Care Assistants between 1 January 2011 and 1 January 2012?  
£264,064
10. What was the total Trust expenditure on Bank Health Care Assistants between 1 January 2012 and 1 January 2013?  
£1,865,938
11. What was the total Trust expenditure on Bank Health Care Assistants between 1 January 2011 and 1 January 2012?  
£1,733,418
12. Please provide a breakdown of the reasons why Agency Health Care Assistant staff were used between 1 January 2012 and 1 January 2013 (eg covering sickness, training, maternity leave etc), and the number of shifts covered for each reason.

| Reason For Booking                      | No of Shifts |
|---|--------------|
| Activity                                | 150          |
| Acuity                                  | 141          |
| Add. Capacity on Short Stay             | 24           |
| AMU Clinic                              | 4            |
| Backfill for Bariatric Unit             | 20           |
| Backfill for Capacity                   | 252          |
| Backfill for Ward 14                    | 56           |
| Jan 1st - backfill in case dna/hangover | 1            |
| Maintain minimum safety levels          | 21           |
| Mandatory Training                      | 2            |
| Maternity / Paternity Leave             | 6            |

|  |             |
|--|-------------|
| Moved from another ward                  | 3           |
| Night manager has booked                 | 53          |
| Reporting Only - Agency Bookings         | 3           |
| Reporting Only - Bank Bookings           | 3           |
| Sickness                                 | 206         |
| Site co-ord has booked but not informed. | 7           |
| Special Leave                            | 4           |
| staff shortage                           | 1           |
| The request did not contain any reason   | 4           |
| TIA Clinic                               | 6           |
| To cover Annual Leave                    | 5           |
| To cover D.N.A.                          | 2           |
| To cover Secondment                      | 2           |
| To cover Study Leave                     | 6           |
| To escort a patient                      | 11          |
| To maintain safe staffing levels         | 311         |
| To special a patient                     | 227         |
| Tracheostomy Patient                     | 1           |
| Vacancy                                  | 94          |
| Winter Resilience                        | 95          |
| Workload on Ward                         | 48          |
| <b>Grand Total</b>                       | <b>1767</b> |

**13. Please provide a breakdown of the reasons why Bank Health Care Assistant staff were used between 1 January 2012 and 1 January 2013 (eg covering sickness, training, maternity leave etc), and the number of shifts covered for each reason.**

HCA Bank Bookings Jan 12-Jan 13

| Reason for booking             | No of Shifts |
|--------------------------------|--------------|
| Activity                       | 1390         |
| Acuity                         | 1295         |
| Add. Capacity on Short Stay    | 288          |
| AMU Clinic                     | 50           |
| Backfill for Bariatric Unit    | 335          |
| Backfill for Capacity          | 3864         |
| Backfill for Ward 14           | 478          |
| Carotid Patients               | 2            |
| Community Nursing              | 23           |
| EKG                            | 2            |
| Long Term Sick (28 days)       | 16           |
| Maintain minimum safety levels | 289          |
| Mandatory Training             | 556          |
| Maternity / Paternity Leave    | 103          |
| Moved from another ward        | 42           |
| Night manager has booked       | 11           |

|  |              |
|--|--------------|
| Reporting Only - Bank Bookings           | 239          |
| Security                                 | 5            |
| Sickness                                 | 2135         |
| Site co-ord has booked but not informed. | 4            |
| Special Leave                            | 29           |
| staff shortage                           | 11           |
| Suspension                               | 3            |
| The request did not contain any reason   | 28           |
| Thrombolysis                             | 161          |
| TIA Clinic                               | 131          |
| To cover Annual Leave                    | 178          |
| To cover D.N.A.                          | 1            |
| To cover Secondment                      | 31           |
| To cover Study Leave                     | 51           |
| To escort a patient                      | 63           |
| To maintain safe staffing levels         | 3742         |
| To special a patient                     | 1026         |
| Tracheostomy Patient                     | 32           |
| Vacancy                                  | 2189         |
| Waiting List Initiative                  | 39           |
| Winter Resilience                        | 571          |
| Workload on Ward                         | 65           |
| <b>Grand Total</b>                       | <b>19478</b> |

**14. How many Bank Health Care Assistants began a bank shift within four hours of completing rostered shifts in their substantive posts during the period 1 January 2012 – 1 January 2013?**

This information is currently not collected by the Trust.

**038/13**

**Letters of Complaint**

**Our FOI request: According to the NHS Information Centre your trust received 322 complaints between 1st April 2011 and 31st March 2012. We request the first 23 type-written letters of complaint that you received after 1st of September, 2011.**

- **If these letters are received separately by your hospitals or units, then we request the letters from your largest hospital or unit.**
- **If it is unclear which order the letters were received in, then we would like the first 23 letters as they appear in your files after this date.**
- **We do not want any letters received after 31st March 2012, so, if you get to this date and have less than the requested number of letters, please begin again on the 1st April 2011.**

Please note the letters are attached to this email.

039/13

**Contact Details**

1. **A name and email address for someone responsible for updating the intranet and website.**  
Director of Strategy  
[Anne.baines@walsallhealthcare.nhs.uk](mailto:Anne.baines@walsallhealthcare.nhs.uk)
2. **Name, email address and telephone number for someone who deals with Employee Benefits**  
Sue Wakeman  
[Sue.wakeman@walsallhealthcare.nhs.uk](mailto:Sue.wakeman@walsallhealthcare.nhs.uk)  
01922 721172
3. **An email address of a contact if you have a membership scheme (production of newsletters, organiser of events etc).**  
Director of Governance  
[Dawn.clift@walsallhealthcare.nhs.uk](mailto:Dawn.clift@walsallhealthcare.nhs.uk)

040/13

**Neuro-rehabilitation services commissioning**

**Please could you redirect your request to the following email address as the request will need to be completed by the commissioners not providers.**

[foi@walsall.nhs.uk](mailto:foi@walsall.nhs.uk)

041/13

**QlikView consultancy**

**Under the Freedom of Information (FOI) Act, I would like to have the following information; what is the total spend on QlikView consultancy between May 2011 and May 2013 at your Trust?**

**Could I have this information broken down into a month by month figure, annual spend as well as the total expenditure.**

Nil return

042/13

**Organisation Chart**

This letter confirms receipt of your request for information under the terms of the Freedom of Information Act 2000, received on the 10<sup>th</sup> May 2013.

This request is refused under Section 23(3) of the Freedom of Information Act – 'Information available because of publication schemes'

However, in the spirit of the Act please find below the direct link to our Trust Structures Log on our website, link as below:

<https://www.walsallhealthcare.nhs.uk/media/159862/trust%20structures%20log%20v7%20june%202012.pdf>

**043/13  
Locum Spend**

**Please provide the Locum spend for doctors working in the period of 1st April 2012 to 31st March 2013, the spend requested is for all grades of doctor and to be broken down by speciality, this spend is to cover all of the hospitals within your trust.**

|                             | Total 12/13 Spend |
|-----------------------------|-------------------|
| A&E Total                   | 221,432           |
| Clinical Assistant          | 24,941            |
| Consultant                  | 6,887             |
| House Officer               | 4,311             |
| Senior House Officer        | -3,186            |
| Specialist Registrar        | -2,511            |
| Specialist Training         | 62,597            |
| Staff Grade                 | 128,394           |
| AMU Total                   | 220,886           |
| Consultant                  | 222,017           |
| House Officer               | 1,684             |
| Senior House Officer        | 326               |
| Specialist Training         | 7,266             |
| Staff Grade                 | -10,407           |
| Anaesthetics Total          | 740,623           |
| Assoc Specialist            | 16,087            |
| Consultant                  | 294,506           |
| House Officer               | 3,834             |
| Senior House Officer        | 11,031            |
| Specialist Registrar        | 2,335             |
| Specialist Training         | 25,798            |
| Staff Grade                 | 387,031           |
| Elderly & Respiratory Total | 219,849           |
| Consultant                  | 92,944            |
| House Officer               | 3,522             |
| Senior House Officer        | 5,564             |
| Specialist Training         | 72,001            |
| Staff Grade                 | 45,820            |
| ENT Total                   | 36,040            |
| Consultant                  | 10,982            |
| Specialist Registrar        | 5,431             |
| Specialist Training         | 20,117            |
| Staff Grade                 | -491              |
| Medicine Total              | 520,729           |
| Clinical Assistant          | 19,935            |
| Consultant                  | 318,927           |
| House Officer               | 7,122             |

|                             |           |
|-----------------------------|-----------|
| Senior House Officer        | 25,223    |
| Specialist Registrar        | 23,176    |
| Specialist Training         | 55,306    |
| Staff Grade                 | 71,040    |
| Obsterics Total             | 269,317   |
| Consultant                  | 84,318    |
| House Officer               | 644       |
| Senior House Officer        | 30,760    |
| Specialist Registrar        | 9,781     |
| Specialist Training         | 78,173    |
| Staff Grade                 | 65,640    |
| Oral & Orthodontics Total   | 174,747   |
| Consultant                  | 174,747   |
| Paediatrics Total           | 321,569   |
| Clinical Assistant          | 49,078    |
| Consultant                  | 198,529   |
| Senior House Officer        | 10,006    |
| Specialist Registrar        | 1,587     |
| Specialist Training         | 54,973    |
| Staff Grade                 | 7,396     |
| Pathology Total             | 108,608   |
| Consultant                  | 87,602    |
| Staff Grade                 | 21,006    |
| Sexual Health total         | 8,168     |
| Clinical Assistant          | 3,901     |
| Consultant                  | 4,117     |
| Staff Grade                 | 149       |
| Surgery Total               | 148,018   |
| Clinical Assistant          | -65       |
| Consultant                  | 103,890   |
| House Officer               | 5,286     |
| Senior House Officer        | 5,119     |
| Specialist Registrar        | 13,577    |
| Specialist Training         | 10,042    |
| Staff Grade                 | 10,170    |
| Trauma & Orthopaedics Total | 248,179   |
| Consultant                  | 43,868    |
| Senior House Officer        | 780       |
| Specialist Registrar        | 47,095    |
| Specialist Training         | 398       |
| Staff Grade                 | 156,037   |
| Urology Total               | 75,393    |
| Consultant                  | 61,958    |
| Senior House Officer        | 13,435    |
| Grand Total                 | 3,313,558 |

**044/13  
Multiple Sclerosis**

In your trust, how many patients with Multiple Sclerosis are currently being treated with the following drugs;

- Interferon beta-1a [Avonex or Rebif]
- Interferon beta-1b [Extavia or Betaferon]
- Glatiramer acetate [Copaxone]
- Natalizumab [Tysabri]
- Fingolimod [Gilenya]
- Other

Please see the table below:

| Drug Name          | Brand Name | Number of Patients                  |
|--------------------|------------|-------------------------------------|
| Interferon beta-1a | Avonex     | 20                                  |
| Interferon beta-1a | Rebif      | 20                                  |
| Interferon beta-1b | Extavia    | Nil                                 |
| Interferon beta-1b | Betaferon  | 5                                   |
| Glatiramer acetate | Copaxone   | 16                                  |
| Natalizumab        | Tysabri    | Nil                                 |
| Fingolimod         | Gilenya    | Nil                                 |
| Other              |            | Numbers not readily available/known |
| <b>TOTAL</b>       |            | <b>61</b>                           |

**045/13  
Agency Locum Doctors Spend**

1. **Total amount the trust spent on agency locum doctors 2012/2013 (April – March)**  
Please see table below

2. **For this information to be broken down by speciality and grade.**  
Please see table below. We are unable to break this information down by grade as this would require all invoices to be manually checked which would take over the 18 hours stipulated in the Freedom of Information Act 2000.

| <b>Medics Agency Spend 1213</b>  |                        |
|----------------------------------|------------------------|
| <b>Speciality</b>                | <b>1213 Actual (£)</b> |
| <b>A&amp;E</b>                   | <b>£367,553</b>        |
| <b>Anaesthetics</b>              | <b>£293,826</b>        |
| <b>Elderly &amp; Respiratory</b> | <b>£83,492</b>         |
| <b>ENT</b>                       | <b>£424</b>            |
| <b>Imaging</b>                   | <b>£14,963</b>         |
| <b>Medicine</b>                  | <b>£437,438</b>        |
| <b>Obsterics</b>                 | <b>£155,851</b>        |
| <b>Occupational Health</b>       | <b>£67,148</b>         |
| <b>Paediatrics</b>               | <b>£20,736</b>         |

|                       |                   |
|-----------------------|-------------------|
| Pathology             | £61,233           |
| Surgery               | £81,799           |
| Trauma & Orthopaedics | £42,370           |
|                       |                   |
| <b>Total Spend</b>    | <b>£1,626,833</b> |

046/13  
Network Systems

| <b>PBX System Maintenance</b>   | <b>Response</b>   |
|---|---|
| Who is the Manufacturer and what is the model of your current PBX system?                                   | Nortel  |
| Who is your current supplier / maintenance Provider?  | Skanska managed service. Please contact SKANSKA direct. |
| What is the contract value? Please state if it is Per Annum or Total  | Skanska managed service. Please contact SKANSKA direct. |
| What is the duration of this contract?  | Skanska managed service. Please contact SKANSKA direct. |
| When does the contract expire?  | Skanska managed service. Please contact SKANSKA direct. |
| What is the number of users/Extensions?   | Skanska managed service. Please contact SKANSKA direct. |
| How many Sites?   | 1   |
| Who is the person responsible for this contract? Please also provide contact phone number and email address | Skanska managed service. Please contact SKANSKA direct. |
| Are there any plans in the next two years to upgrade this system?   | Skanska managed service. Please contact SKANSKA direct. |
| <b>LAN/WAN/Network Maintenance</b>  | <b>Response</b>   |
| Who is the Manufacturer(s) of your LAN WAN network?   | Skanska managed service. Please contact SKANSKA direct. |
| Please provide me with a breakdown of the equipment that makes up your LAN / WAN                            | Skanska managed service. Please contact SKANSKA direct. |
| Who is your current supplier / maintenance Provider?  | Skanska managed service. Please contact SKANSKA direct. |
| What is the contract value? Please state if it is Per Annum or Total  | Skanska managed service. Please contact SKANSKA direct. |
| What is the duration of this contract?  | Skanska managed service. Please contact SKANSKA direct. |
| When does the contract expire?  | Skanska managed service. Please contact SKANSKA direct. |
| What is the number of users?  | 3500  |

|  |  |
|--|--|
| <b>How many Sites?</b>   | <b>1</b>   |
| <b>Who is the person responsible for this contract? Please also provide contact phone number and email address</b> | <b>Skanska managed service. Please contact SKANSKA direct.</b> |
| <b>Are there any plans in the next two years to upgrade this network</b>   | <b>Skanska managed service. Please contact SKANSKA direct.</b> |

047/13

**Baby feeding Equipment**

- [Please provide a list of all baby feeding equipment the Trust has procured over the past 12 month, including breast pumps, bottles, teats, collars, special needs bottles and special needs teats \(e.g. haberman/medela feeders\)](#)

| Category                        | Supplier Name                |   | Quantity | Order Date | Description Line 1                       |
|---------------------------------|------------------------------|---|----------|------------|--|
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 2.00     | 02/05/2012 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 1.00     | 18/06/2012 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 1.00     | 27/06/2012 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 2.00     | 01/08/2012 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 1.00     | 09/08/2012 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 1.00     | 25/09/2012 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 2.00     | 07/11/2012 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 2.00     | 23/11/2012 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 1.00     | 10/12/2012 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 2.00     | 14/01/2013 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 2.00     | 24/01/2013 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13     | 2.00     | 04/02/2013 | Beldico 25mm breastpump set +50ml        |

|                                 |                              |   |       |            |  |
|---------------------------------|------------------------------|---|-------|------------|--|
|                                 |                              | 7DT   |       |            | bottle                                   |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 2.00  | 20/03/2013 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | CENTRAL MEDICAL SUPPLIES LTD | CMS HOUSE, BASFORD LANE, LEEKBROOK, LEEK, STAFFS ST13 7DT | 1.00  | 14/04/2013 | Beldico 25mm breastpump set +50ml bottle |
| Breast pumps or its accessories | ARDO MEDICAL LTD             | UNIT 1, BELVEDERE TRADING ESTATE, TAUNTON TA1 1BH         | 2.00  | 12/07/2012 | OneMum Pumpset Sterile                   |
| Breast pumps or its accessories | ARDO MEDICAL LTD             | UNIT 1, BELVEDERE TRADING ESTATE, TAUNTON TA1 1BH         | 1.00  | 13/11/2012 | Elite breastpumps                        |
| Breast pumps or its accessories | ARDO MEDICAL LTD             | UNIT 1, BELVEDERE TRADING ESTATE, TAUNTON TA1 1BH         | 2.00  | 12/12/2012 | OneMum Pumpset Sterile                   |
| Breast pumps or its accessories | ARDO MEDICAL LTD             | UNIT 1, BELVEDERE TRADING ESTATE, TAUNTON TA1 1BH         | 3.00  | 04/02/2013 | Elite breastpumps                        |
| Breast pumps or its accessories | ARDO MEDICAL LTD             | UNIT 1, BELVEDERE TRADING ESTATE, TAUNTON TA1 1BH         | 1.00  | 05/02/2013 | Box of belly balls                       |
| Breast pumps or its accessories | ARDO MEDICAL LTD             | UNIT 1, BELVEDERE TRADING ESTATE, TAUNTON TA1 1BH         | 1.00  | 05/02/2013 | OneMum Pumpset Sterile                   |
| Breast pumps or its accessories | ARDO MEDICAL LTD             | UNIT 1, BELVEDERE TRADING ESTATE, TAUNTON TA1 1BH         | 1.00  | 21/02/2013 | OneMum Pumpset Sterile                   |
| Breast pumps or its accessories | ARDO MEDICAL LTD             | UNIT 1, BELVEDERE TRADING ESTATE, TAUNTON TA1 1BH         | 1.00  | 19/04/2013 | OneMum Pumpset Sterile                   |
| General Med and Surg Equipment  | ARDO MEDICAL LTD             | UNIT 1, BELVEDERE TRADING ESTATE, TAUNTON TA1 1BH         | 14.00 | 07/02/2013 | Calypso Breast Pumps (double) x 14 with  |
| General Med and Surg Equipment  | ARDO MEDICAL LTD             | UNIT 1, BELVEDERE TRADING ESTATE, TAUNTON TA1 1BH         | 1.00  | 07/02/2013 | Carem Breastpump                         |

2. [For each item of baby feeding equipment, please provide the supplier's name and address and date of purchase.](#)  
**Same as above.**
  
3. [For each item please state whether it is Bisphenol A \(BPA\) free.](#)  
**[See below](#)**
  
4. [For each item please state whether it is also free of other compounds of the class of bisphenols \(e.g. Bisphenol S \(BPS\)\).](#)  
**[See below](#)**
  
5. [For each item please state whether it is Di \(2-ethylhexyl\) phthalate \(DEHP\) free.](#)  
**[See below](#)**

**All of our breastfeeding products are free of BPA, BPS and DEHP**

**048/13**

**Annual Expenditure**

I'd like to receive details of annual expenditure (Financial year April 2012 March 2013) by each eClass code used in your trust.

In line with the NHS eEnablement programme, its my understanding that all expenditure by NHS Trusts can be broken down to eClass codes and I would like this information showing total expenditure per eClass code as per the example below.

Whilst I understand there are potentially over 2,000 codes, Ive been informed by NHS Shared Business services that this information should be readily available and easily accessible via the procurement systems in use.

Please provide this information in an Excel spreadsheet.

Example:

| <b>eClass Code</b> | <b>Annual Expenditure</b> |
|--------------------|---------------------------|
| AAA                | 30000                     |
| AAB                | 45000                     |
| AAC                | 103000                    |
| AAD                | 13000                     |
| AAE                | 124000                    |
| AAF                | 345000                    |
| AAG                | 4500                      |

**The information provided (attached spreadsheet) is only usage against orders that have been placed on Integra. We do not record the spend as this is paid on invoice.**

Spread sheet available upon request.

**049/13**  
**Lorenzo**

**The Trust's contract under which it will take delivery of CSC Lorenzo as reported in the E-Health Insider**

Contracts for Lorenzo are between the Department of Health and CSC not the Trust and CSC.

**The documents submitted to the Trust board for its approval of the decision to take delivery of CSC Lorenzo**

This information is withheld under section 41 Information Provided in Confidence, as the discussion was held during the Private Board.

**050/13**

**Persons who have died with no known next of kin or family**

1a) Does the NHS trust or the funeral director in charge of the funeral publicise death/obituary notices of persons who have died with no known next of kin or family, so any unknown relatives (at the time of death) or friends can attend the funeral before the funeral takes place?

**Obituary notices are placed by the funeral direction at the request of the officer making the funeral arrangements, these are only done in cases where we know there may still be relatives, this notice would advise anyone knowing the deceased to contact the funeral directors who would liaise with the hospital.**

1b) If yes, where is this published (name of newspaper)?

**The notice would be put in the Express & Staff**

1c) Please provide a template of the notice placed by the NHS Trust or contracted funeral director for the public health funeral.

**The information is given by the funeral director with the agreement regarding the wording the General Office**

1d) If these details are published elsewhere (other than the named newspaper from question 1b) please provide details of where these details are published.

**No other publications have been used.**

2a) If publishing death notices/obituaries is the responsibility of the funeral director, please provide name, address and email address (if available) of the funeral director (contracted and/or non-contracted) who places these notices so family or friends can attend the funerals prior to the funeral taking place.

**See below**

2b) If publishing death notices/obituaries is the responsibility of the NHS Trust, please provide details of the person within the NHS Trust who is responsible for placing these notices. Please provide (some or

all of this information):

First and surname of the person

Job title

Department he/she works in

Email address

Telephone contact

Postal Address

**Walsall Healthcare NHS Trust is responsible for informing the Mid Counties Co-op, Hatherton Street, Walsall for any funerals that take place.**

3) Within the NHS Trust, who is in charge for sending information to the Treasury Solicitor, Duchy of Cornwall, Duchy of Lancaster, QLTR, Crown Solicitor and/or National Ultimus Haeres?

Would you please include some/all of this information -

First and surname of the person

Job title

Department he/she works in

Email address

Telephone contact

Postal Address

**Information to Treasury Solicitor would be made by Finance Department.**

4) Since December 1st 2012, for each death in which persons have died with no known next of kin (also known as public health funeral) please provide :

4a) The deceased persons first name and surname

4b) The deceased persons date of death and date of birth

4c) The last known residence of the deceased

4d) Has the next of kin of the deceased been traced?

4e) The date on which these details and any additional details have been referred to the Treasury Solicitor, Duchy of Lancaster, Duchy of Cornwall, QLTR, National Ultimus Haeres, or any other organisation.

4f) Name of any other organisation that these details have been passed to.

**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**

5) Please also include any pending cases (of persons who have died with no known next of kin) that have been or may shortly be referred for further investigations to either the Local Council or Treasury Solicitor (or Duchy of Lancaster/Duchy of Cornwall, QLTR, National Ultimus Haeres within their jurisdictions) and any cases where the deceased died before December 1st 2012 but have only recently come to light, for whatever reason. Please provide a response in the same format as question 4a, 4b, 4c, 4d, 4e, 4f.

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

**051/13**  
**Patient Access Policy**

Please click on the link below for the Patient Access Policy:



Patient Access Policy  
October 2010 Revised

**052/13**  
**Cancelled operations**

Please could you provide me with the following information. I would like three figures for each question (2010, 2011 and 2012 financial years):

1. How many elective operations have you performed in each financial year since April 2010?

**Please see below figures for elective operations.**

2. For each of the last three financial years please provide the number of elective operations which were cancelled last minute for non-clinical reasons, because of a high number of emergency admissions.

**The table below shows counts of Elective admissions by Financial year and the number of last minute hospital cancellations as reported on the QMCO**

| <b>Year Financial</b> | <b>Electives</b> | <b>last minute Cancellations</b> |
|-----------------------|------------------|----------------------------------|
| Year 2010/11          | 28946            | 191                              |
| Year 2011/12          | 29655            | 118                              |
| Year 2012/13          | 30585            | 230                              |

3. Please explain which non-clinical reasons you consider to be indicators of high emergency admissions (for examples, please see the list below).
  - Ward bed not available
  - List Overrun
  - Equipment failure/unavailable

- Critical care bed not available
- Admin error
- Surgeon unavailable
- Emergencies/ Trauma

4. For each of the last three financial years, please provide the number of patients who were not operated on within 28 days of a last-minute cancellation of an elective operation.

**There were no breaches of standard reported.**

5. For each of the last three financial years, how much has the trust spent on sending patients to private providers for operation, having been unable to operate on them within the trust within 28 days?

**None, all patients have been accommodated within 28 days unless they have chosen an alternative date beyond.**

6. For each of the last three financial years please advise how many days each hospital was on 'black alert' status or the Trust equivalent, due to a high number of emergency admissions. If providing an equivalent definition, please explain what this means.

**2011 – 0**

**2012 – 0**

**2013 – 13 Days**

For clarity, please see below the official definitions of 'last minute' and 'non clinical' and 'black alert'

#### **Last minute:**

This means that the hospital cancels an operation:

- on the day the patient is due to arrive in hospital
- after the patient has arrived in hospital
- on the day that the operation or surgery is due to take place

#### **Non-clinical reasons:**

There are many non-clinical reasons for hospitals cancelling operations:

- no beds are available on the ward
- no critical care beds are available
- staff are not available, such as the surgeon, anaesthetist or operating theatre staff
- an emergency case had to take priority in the operating theatre
- operations took longer than expected so the list of operations over-ran
- some equipment isn't working
- there has been an administrative error

#### **Black Alert:**

Black Alert status or the Trust equivalent of its highest ESCALATION LEVELS / ALERT STATUS

**053/13**  
**DoLS**

Please could you provide me with, under the Freedom of Information Act 2000, the following information on DoLS (Deprivation of Liberty Safeguards)

1. How many DoLS applications were submitted from each department within your trust between period 01/01/2012 – 31/12/2012.

**Due to the low numbers this request is withheld under section 40 Personal Information.**

2. Details of the following for each application :

- a. Age of the patient
- b. Gender of the patient
- c. Mental health condition of the patient
- d. What was the restriction or deprivation?
- e. Reason for DoLS application
- f. Was that an emergency or standard application?
- g. If it's an emergency application then how long it lasted? and has the standard application sent?
- h. Has it been reviewed at any time

**Due to the low numbers this request is withheld under section 40 Personal Information.**

| Mental health condition | Restriction or deprivation | Reason for DOLS Application   | Emergency or standard       | Urgent-duration | Standard sent | Has it been reviewed |
|-------------------------|----------------------------|---|-----------------------------|-----------------|---------------|----------------------|
| Acute confusion         | Deprivation                | <p>An application was made to provide one - one nursing throughout a 24 hour period which involves restricting the individual to a small part of the ward. She was previously supervised in a bay area from a distance with on-going reassurance from staff and her immediate family being called in when she was distressed. She is now in a side room which will enable us to promote her health and safety and reduce environmental stimulus and potential harm to her and others.</p> <p>The application is to enable utilisation of PRN sedation via a intramuscular route and physical intervention techniques as necessary as a response to her behaviour and to maintain her safety.</p> <p>To reduce distress and aggression to herself and reduce the risk of potential and actual harm to other patients.</p> <p>She is currently presenting with episodes of challenging behaviour throughout a 24 hour period which has resulted in harm to her and others. Due to her current mental status she is unable to comprehend her environment, the interventions of others and the need for 1 - 1 care and treatment.</p> | Urgent – 03/07/12<br>7 days | 14 days         | 03/07/12      | y                    |
| Mixed type Dementia     | Deprivation                | <p>Patient is currently a patient at Walsall Manor Hospital.</p> <p>She lacks the capacity to understand the reason for her 'current' treatment and management within the ward and she is currently awaiting placement.</p> <p>At present She is making meaningful attempts to leave the ward on several occasions each day- approximately 6 times within an hour and gets anxious when she is prevented from leaving</p> <p>Staff are undertaking close supervision and preventing her from leaving the ward by standing in front of the doors and preventing her from using the door release mechanism.</p> <p>She has successfully managed to open the doors and leave the ward and physical intervention techniques were used to bring her back to the ward.</p> <p>The level of supervision has been increased to 1-1 supervision over a 24 hour period to prevent her from leaving the ward and</p>   | Urgent- 03/07/12<br>7 days  | 42 days         | 24/7/12       | y                    |

|                      |             |  |                               |         |          |   |
|----------------------|-------------|--|-------------------------------|---------|----------|---|
|                      |             | coming to any harm   |                               |         |          |   |
| Alzheimer's dementia | Deprivation | <p>Patient is currently a patient at Walsall Manor Hospital.</p> <p>He lacks the capacity to understand the reason for his 'current' treatment and management within the ward and he is currently awaiting placement.</p> <p>At present he is making meaningful attempts to leave the ward on several occasions each day- approximately 2 times within an hour and gets anxious when he is prevented from leaving</p> <p>Staff are undertaking close supervision and preventing him from leaving the ward by preventing him from using the door release mechanism.</p> <p>He has successfully managed to open the doors and leave the ward and physical intervention techniques were used to bring him back to the ward.</p> | Urgent-<br>28/09/12<br>7 days | 28 days | 28/09/12 | y |
| Mixed type dementia  | Deprivation | <p>Patient is currently a patient on ward 4 at the manor hospital, she has a diagnosis of mixed type dementia and staffs are currently working with her family with regard to discharge planning.</p> <p>She has made attempts to leave the ward and becomes agitated when staffs try to prevent her from leaving using distraction techniques. If patient does leave the ward staff will be required to bring her back to the ward.</p> <p>Patient is being allowed to walk within the ward area but close supervision is needed to ensure that she remains safe.</p>   | Urgent-<br>26/10/12<br>7 days | 42 days | 28/10/12 | y |

**054/13**

**Total Spend Pharmacy Department**

1. Total establishment of pharmacy department (including job title)
2. Total spend on agency staff by the pharmacy department during financial year 2010-11
3. Total spend on agency staff by the pharmacy department during financial year 2011-12
4. Total spend on agency staff by the pharmacy department during financial year 2012-13
5. Structure chart of pharmacy senior management team

## PHARMACY DEPARTMENT

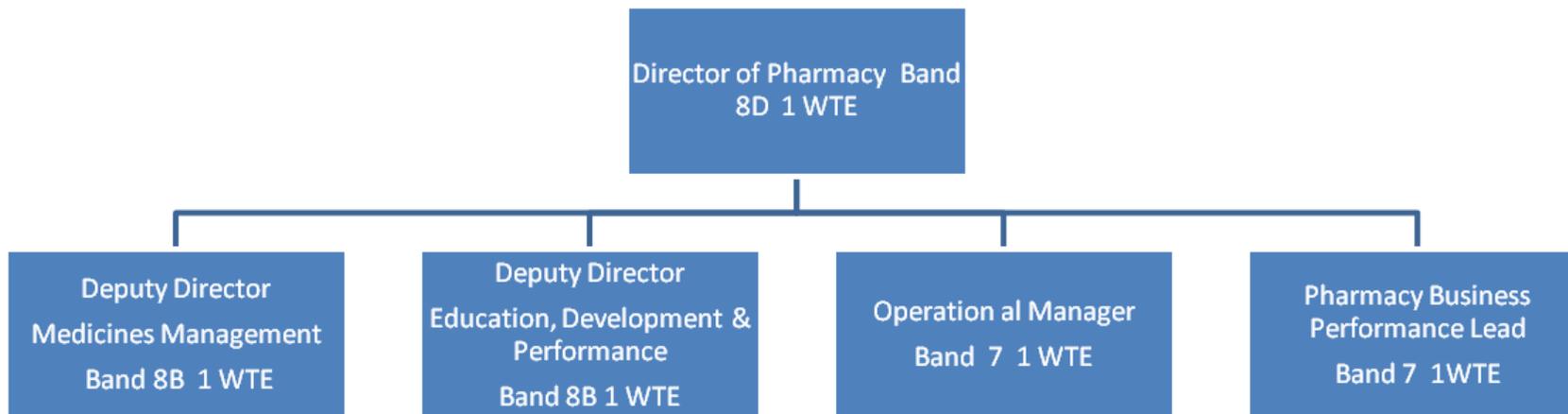
## Man Power Budget

|                             |       |
|-----------------------------|-------|
| Ptb Pay Band 7              | 1.00  |
| Ptb Pay Band 6              | 5.80  |
| Ptb Pay Band 5              | 10.21 |
| Ptb Pay Band 4              | 9.93  |
| Ptb Pay Band 3              | 3.00  |
| Ptb Pay Band 2              | 12.49 |
| Pharmacists Pay Band 8B     | 2.00  |
| Pharmacists Pay Band 8A     | 6.00  |
| Pharmacists Pay Band 7      | 4.80  |
| Pharmacists Pay Band 6      | 6.80  |
| Admin & Clerical Pay Band 7 | 2.00  |
| Admin & Clerical Pay Band 4 | 0.80  |
| Admin & Clerical Pay Band 3 | 1.68  |
| Admin & Clerical Pay Band 2 | 1.00  |
| Senior Managers Pay Band 8D | 1.00  |

2. Total spend on agency staff by the pharmacy department during financial year 2010-11  
**£32,239**

3. Total spend on agency staff by the pharmacy department during financial year 2011-12  
**£249,638**

4. Total spend on agency staff by the pharmacy department during financial year 2012-13  
**£156,185**



**055/13**

**Hospital Acquired Avoidable Pressure Ulcers**

Incidence of Hospital Acquired Avoidable Pressure Ulcers over the last 6 months for Grades 2, 3 and 4

|                   | Oct 12 | Nov 12 | Dec 12 | Jan 13 | Feb 13 | Mar 13 |
|-------------------|--------|--------|--------|--------|--------|--------|
| <b>Category 2</b> | 12     | 15     | 14     | 10     | 3      | 4      |
| <b>Category 3</b> | 0      | 0      | 0      | 0      | 3      | 0      |
| <b>Category 4</b> | 0      | 0      | 0      | 0      | 0      | 0      |

056/13

## Antibiotic resistant bacterial infections

- The figures of cases of antibiotic (all antibiotics) resistant bacterial infections in the hospital from 2007 onwards.
- Make a distinction for figures of reported Carbapenemase resistance (resistant to carbapenem antibiotics)
- Figures of reported PVL-MRSA infections
- Figures of reported *C.difficile* infections
- Figures of reported *E Coli* infections
- Please make a distinction between which were fatal and which were not fatal.
- I would like to steer clear of lab reports as they may not confirm what I am looking for. If ghd or toxin tests are positive, there should be a second test for MRSA, *C.difficile* or *E Coli*. I would like the results of the tests that show conclusively that these bacteria have infected an individual.

Please see below:

All data from 1<sup>st</sup> July 2007 – 31<sup>st</sup> May 2013 unless where otherwise stated. It is not possible to access data earlier than that date.

### 1. Gram negative organisms resistant to either Gentamicin or Tazocin:

|                                     |            |
|-------------------------------------|------------|
| <b>Total</b>                        | <b>211</b> |
| <b>Acinetobacter sp</b>             | <b>1</b>   |
| <b>Citrobacter sp</b>               | <b>4</b>   |
| <b>Comamonas sp</b>                 | <b>1</b>   |
| <b>Delftia sp</b>                   | <b>1</b>   |
| <b>Enterobacter sp</b>              | <b>8</b>   |
| <b>E.coli</b>                       | <b>127</b> |
| <b>Klebsiella sp</b>                | <b>30</b>  |
| <b>Morganella sp</b>                | <b>3</b>   |
| <b>Proteus sp</b>                   | <b>4</b>   |
| <b>Providencia sp</b>               | <b>1</b>   |
| <b>Pseudomonas sp</b>               | <b>21</b>  |
| <b>Salmonella typhi</b>             | <b>1</b>   |
| <b>Serratia marcescens</b>          | <b>3</b>   |
| <b>Stenotrophomonas maltophilia</b> | <b>6</b>   |

MRSA bacteraemia: 55 (25 hospital attributable)

### 2. Vancomycin resistant Enterococci: 19

Carbapenem resistant organisms from bacteraemia:

7 in total: *E.coli* x1

*Pseudomonas aeruginosa* x6

### 3. PVL producing MRSA - 0

### 4. Reported *C.difficile*: 399 (hospital attributable July 2007 – May 2013)

5. The number of *E.coli* bacteraemias reported by Walsall Healthcare since the commencement of mandatory reporting in June 2011 for the period 1<sup>st</sup> June 2011 to 31<sup>st</sup> May 2013 is 360 of which 70 are attributable to the hospital.
6. Between the dates of April 2008 and May 2013 there have been 322 cases of hospital attributable and reportable *C.difficile*, of which 92 died within 30 days of confirmation. This does not mean that the patient died from *C.difficile* as the primary cause of death, but had been detected in the previous 30 days prior to death.

There is no data capture for deaths in the other categories.

**057/13**

### **Directorates and Vacant Posts**

- 1. The name of all Directorates as they currently stand**
  - Division of Surgery
  - Division of Medicine and Long Term Conditions
  - Division of Women's, Children and Clinical Support Services
  - Estates and Facilities
  - Business Support
- 2. The name of the Director of Operations or Chief Operating Officer**

Jayne Tunstall (Chief Operating Officer)  
[Jayne.tunstall@walsallhealthcare.nhs.uk](mailto:Jayne.tunstall@walsallhealthcare.nhs.uk)
- 3. The names of any Assistants / Deputies / Associates of Operations**

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information).
- 4. The names of any Divisional Directors of clinical or medical directorates**

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information).
- 5. The names of any Divisional Managers / Divisional General Managers / General Managers of clinical or medical directorates**

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information).
- 6. The names of any Heads of Operations**

Please note that we do not release individual staff names and email addresses this is withheld under section 40 (personal Information).
- 7. The details of any Vacant positions of any Divisional Managers / Divisional General Managers / General Managers of clinical or medical directorates as known on the 29 May 2013.**
  - 1 Clinical Director (Surgery Division)
  - 1 Head of Nursing (Surgery Division)
  - 1 Care Group Manager (Medicine & Long Term Conditions Division)

058/13

### Resistant organisms

Could I have the figures of reports of resistant organisms such as the Extended Spectrum Beta-lactamase producing bacteria (ESBLs) and AmpC producers which have been reported in the trust since 2007.

Walsall Healthcare NHS Trust does not record information regarding AmpC producers. For the period of 1<sup>st</sup> July 2007 to 31<sup>st</sup> May 2013 the total number of patients with ESBL was 1066.

Please note that Walsall Healthcare NHS Trust only came into existence in April 2011.

059/13

### Confidentiality and Data Breaches

I am writing an article on confidentiality and data breaches.

Can you tell me how many of the following there have been at your organisation for each of the last three financial years.

- Incidents of lost data
- Breaches of confidentiality
- Other security or confidentiality breaches with regards to data

Please include descriptions of each incident.

Please see below

| Period          | Number    |
|-----------------|-----------|
| Apr 10 – Mar 11 | 2         |
| Apr 11 – Mar 12 | 8         |
| Apr 12 – Mar 13 | 12        |
| <b>TOTAL</b>    | <b>22</b> |

|                        |                           |   |
|------------------------|---------------------------|---|
| <b>Apr 10-March 11</b> | Breach of confidentiality | Team leader approached by practice staff @ surgery re patient information in handheld confirming very private & referral information. |
|                        | Breach of confidentiality | Paper found on floor at top of escalator.   |
|                        |                           |   |
| <b>Apr 11-March 12</b> | Breach of confidentiality | Misfiling   |
|                        | Breach of confidentiality | Patient notes missing   |
|                        | Breach of confidentiality | Photocopies left on machine   |
|                        | Breach of confidentiality | Letters incorrectly filed in wrong patient's case notes   |

|                        |                                    |  |
|------------------------|------------------------------------|--|
|                        | Unauthorised Access To Non-Patient | Wrong document sent to patient   |
|                        | Unauthorised Access To Pt Record   | Inappropriate recording of information   |
|                        | Unauthorised Access To Pt Record   | Desk clerk left the desk at 16.40 unattended with notes on the front.  |
|                        | Unauthorised Access To Pt Record   | Document found on the floor on Hospital Street   |
|                        |                                    |  |
| <b>Apr 12 – Mar 13</b> | Security Breach                    | Misfiling  |
|                        | Security Breach                    | Missing notes  |
|                        | Security Breach                    | Inappropriate storing of information.  |
|                        | Security Breach                    | Confidential waste bin full  |
|                        | Security Breach                    | Confidential waste bins full   |
|                        | Security Breach                    | A confidential letter sent to wrong department.  |
|                        | Security Breach                    | Letter sent to wrong address   |
|                        | Unauthorised Access To Non-Pt      | Personal information left unsecure   |
|                        | Unauthorised Access To Non-Pt      | Confidential sickness information sent to my e-mail account regarding another member of staff.   |
|                        | Unauthorised Access To Pt Record   | Two sets of hospital case notes found outside by a member of housekeeping staff and handed to myself.  |
|                        | Unauthorised Access To Pt Record   | Physiotherapy referral from orthopaedic outpatient clinic was put under front door and patient information was readily available to be read, no attempt made to conceal information. |
|                        | Unauthorised Access To Pt Record   | An email containing the unit numbers for 8 patients was emailed accidentally to an external email address of someone who does not work for the Trust.                                |

060/13

**Patients treated with biologics**

In your Trust please can you supply the number of patients currently being treated with biologics, for the following conditions, within the table below;

Details based on period Dec 2012 to May 2013.

| Number of patients currently being treated | Abatacept | Adalimumab | Anakinra | Certolizumab | Etanercept | Golimumab | Infliximab | Rituximab | Tocilizumab | Ustekinumab | Others |
|--|-----------|------------|----------|--------------|------------|-----------|------------|-----------|-------------|-------------|--------|
| Rheumatoid Arthritis                       | 2         | 67         | 0        | 15           | 53         | 14        | 10         | 31        | 26          | 0           | 16     |
| Ankylosing Spondylitis                     | 0         | 5          | 0        | 0            | 3          | 7         | 2          | 0         | 0           | 0           | 0      |
| Non-radiographic axial Spondyloarthritis   | 0         | 3          | 0        | 0            | 0          | 1-5       | 1-5        | 0         | 0           | 0           | 0      |
| Psoriatic Arthritis                        | 0         | 11         | 0        | 0            | 7          | 7         | 2          | 0         | 0           | 0           | 0      |
| Crohn's disease                            | 0         | 20         | 0        | 0            | 1-5        | 0         | 18         | 0         | 0           | 0           | 7      |
| Ulcerative Colitis                         | 0         | 6          | 0        | 0            | 0          | 0         | 7          | 1-5       | 0           | 0           | 5      |

061/13

**Patients treated with botulinum toxin A drug**

I would be grateful if you could answer the following question. Within your trust how many patients have been treated with a "botulinum toxin A" drug in the past 6 months; split by the drug used [Botox, Dysport or Xeomin] for the following conditions;

- Focal spasticity
- Spasmodic torticollis [Cervical Dystonia]
- Blepharospasm
- Hemifacial spasm
- Paediatric cerebral palsy spasticity
- Chronic Migraine
- Idiopathic overactive bladder

Please also state the specialty of the treating doctor [eg Neurology, Anaesthetics etc].

| Condition        | Treating Specialties           | Total Patients | Botox | Dysport | Xeomin |
|------------------|--------------------------------|----------------|-------|---------|--------|
| Focal spasticity | Elderly Care (Stroke Services) | 34             | 34    | -       | -      |

|                                      |               |     |     |    |   |
|--------------------------------------|---------------|-----|-----|----|---|
| Spasmodic torticollis                | Neurology     | 35  | 16  | 19 | - |
| Blepharospasm                        | Neurology     | 1-5 | 1-5 | -  | - |
| Blepharospasm                        | Ophthalmology | 5   | -   | 5  | - |
| Hemifacial spasm                     | Neurology     | 13  | -   | 13 | - |
| Hemifacial spasm                     | Ophthalmology | 7   | -   | 7  | - |
| Paediatric cerebral palsy spasticity | n/a           | -   | -   | -  | - |
| Chronic Migraine                     | n/a           | -   | -   | -  | - |
| Idiopathic overactive bladder        | Urology       | 1-5 | 1-5 | -  | - |

**062/13**

**Estates and Facilities**

1. An up-to-date version of your estates/facilities/capital projects organisational structures including names, email addresses, telephone numbers and reporting lines where possible.

**Please see below link to structures log.**

<https://www.walsallhealthcare.nhs.uk/media/159862/trust%20structures%20log%20v7%20june%202012.pdf>

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

2. Any current vacancies in the estates/facilities/projects department (may be included in the Organisation Structures if easier).

**EBME - 1**

**Security – 6**

**Porters – 2**

**Estates Office – 1.5**

3. Total spend on both agency (temporary) workers and permanent recruitment fees by the estates/facilities/projects departments over the last 2 years.

**Financial year: 2011/12 Spend £279,985**

**Financial year: 2012/13 Spend £100,298**

**063/13  
Hepatitis C**

I wish to make a series of separate requests under the Act. For convenience, I am including them in the same email. They are as follows:

**Request #1** Please confirm or deny whether your trust holds a record of the budget for hepatitis C drug treatment and delivery for 1 April 2012 to 31 March 2013.

**No budgets are held for individual drugs or drug types.**

**Request #2** Please provide the budget for hepatitis C drug treatment and delivery for 1 April 2012 to 31 March 2013.

**N/A**

**Request #3** Please confirm or deny whether your trust holds a record of the budget for gastrointestinal drug treatment and delivery for 1 April 2012 to 31 March 2013.

**No budgets are held for individual drugs or drug types.**

**Request #4** Please provide the budget for gastrointestinal drug treatment and delivery for 1 April 2012 to 31 March 2013.

**N/A**

**Request #5** Please confirm or deny whether your trust holds a record of the budget for hepatology drug treatment and delivery for 1 April 2012 to 31 March 2013.

**No budgets are held for individual drugs or drug types.**

**Request #6** Please provide the budget for hepatology drug treatment and delivery for 1 April 2012 to 31 March 2013.

**N/A**

**Request #7** Please confirm or deny whether your trust holds a record of the number of patients treated for hepatitis C between 1 April 2012 and 31 March 2013.

**No budgets are held for individual drugs or drug types.**

**Request #8** Please provide the number of patients treated for hepatitis C between 1 April 2012 and 31 March 2013.

**Inpatients: There were 62 Pts with a relevant diagnosis that were discharged between April 1<sup>st</sup> 2012 and March 31<sup>st</sup> 2013**

**Outpatients: We cannot identify individual pts from the clinic activity and so are unable to answer this question.**

**Request #9** Please confirm or deny whether your trust has any policies setting out when it would ask other NHS organisations to treat patients for hepatitis C.

**No set policy but if the patient had failed previous treatment (genotype 2/3), advanced liver disease, was for consideration of trials i.e. direct acting antivirals when couldn't tolerate interferon previously.**

**Request #10** Please provide any policies setting out when the trust would ask other NHS organisations to treat patients for hepatitis C.

**No set policy but if the patient had failed previous treatment (genotype 2/3), advanced liver disease, was for consideration of trials i.e. direct acting antivirals when couldn't tolerate interferon previously.**

**064/13**

### **Job titles of Trust employees**

I am writing to obtain information about certain positions within your organisation.

**Please answer for all the NHS trusts which are part of the group which received this request, broken down by each trust**

**Please also provide information which is held relating to Primary Care Trusts**

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

1. a) The full job titles of the trust's employees which contain any of the following words or phrases:

- . Affairs
- . Art
- . Arts
- . Awareness
- . Brand
- . Branding
- . Carbon
- . Change
- . Climate
- . Communication(s)
- . Culture
- . Decarbonisation
- . Diversity
- . Ecological
- . Ecology
- . Energy
- . Environment
- . Environmental
- . Equalities
- . Equality
- . Europe
- . European

- . EU
- . External
- . Government
- . Governmental
- . Green
- . International
- . Insight
- . Leadership
- . Liaison
- . Media
- . Political
- . Press
- . PR
- . Public Affairs
- . Public Relations
- . Recycling
- . Reputation
- . Rights
- . Shape
- . Stakeholder
- . Sustainable
- . Sustainability
- . Transformation
- . Transformational

b) For each employee returned under this question, please provide their:

i. Job description for each job title

ii. Total annual remuneration in financial year 2012-13. This should include, but not be limited to, salaries, expenses, benefits in kind, employer pension contributions and bonuses. Please note I am not requesting the name of any employee, or any other information that may identify them individually. If you can only provide salary bandings, please continue to do so. If you cannot answer this question, please continue to answer questions 1a) and 1b)i as requested.

If the information for the 2012-13 financial year is not available, please provide information for the 2011-12 year.

**These are the position titles that we have with any of the words listed above.**

| <b>Position Title</b>                        | <b>Payscale Description</b>      | <b>Total employees</b> |
|--|----------------------------------|------------------------|
| Assistant Director of IT Business Change     | Non Review Body Band 8 - Range C | 1                      |
| IT Business Change Manager                   | Non Review Body Band 7           | 1                      |
| IT Business Change Facilitator               | Non Review Body Band 6           | 5                      |
| Acute Hospital Liaison Nurse / Clinical Lead | Review Body Band 7               | 1                      |
| Acute Hospital Mental Health Liaison Nurse   | Review Body Band 6               | 2                      |
| Discharge Liaison Nurse                      | Review Body Band 6               | 6                      |
| Discharge Liaison/Charge Nurse               | Review Body Band 6               | 1                      |
| Paediatric Liaison Nurse                     | Review Body Band 6               | 1                      |
| Stroke Liaison Nurse                         | Review Body Band 6               | 7                      |
| <b>Grand Total</b>                           |                                  | <b>25</b>              |

**Please see attached job descriptions of the listed posts above.**  
Information available upon request.

**065/13**

**Procurement & Distribution Department**

1. Who currently provides the Trust's Taxi Service?  
**West Midlands Ambulance Service NHS Trust provides all non-emergency patient transport including a taxi service.**
  
2. What was the Tender start date for the current contract provider for Taxi services and what date is this contract due to end?  
**The current contract commenced 1<sup>st</sup> March 2013 and will end 28 February 2018.**
  
3. Who is responsible for managing this service and what are their phone, email and postal contact details?  
**Patient Transport is currently controlled by Division of Women's, Children and Clinical Support Services (Jo Newens Divisional Director, [jo.newens@walsallhealthcare.nhs.uk](mailto:jo.newens@walsallhealthcare.nhs.uk) )**
  
4. How do you advertise this service for competitive tender?  
**This tender was advertised in the Official Journal of the European Union and of the Trust's buyer profile web address (<https://in-tendhost.co.uk/walsallhealthcarenhs>)**
  
5. What is the procedure for applying for the competitive tender?  
**Suppliers need to register on the Trust buyer profile web site and express an interest. This gives suppliers access to the documents containing the tender instructions.**
  
6. How many taxi companies had the opportunity to bid for the current contract?  
**The Tender was advertised Europe wide so any taxi company in the European union had opportunity to tender.**
  
7. What was the tendering process used for the commissioning of the current contract provider?  
**This was a European wide public tender under the restricted procedure. The Trust expects to go to tender for ad-hoc staff taxi journeys before the end of this calendar year.**

**066/13**

**Management of Idiopathic Overactive Bladder in MS and Spinal Cord Injury**



FOI response v.1  
FINAL.xlsx

**067/13**

**Overseas Visitors**

- What is the amount of money **invoiced** to these overseas visitors, **recovered** from overseas visitors, **written off** and **outstanding**? (Yearly or financial year - indicate which, please - figures for 2010/2011, 2011/2012 and 2012/2013)

- Which countries are these overseas visitors from? How many visitors are there from each country? (Yearly or financial year - indicate which, please - figures for 2010/2011, 2011/2012 and 2012/2013)

| <b>Freedom of Information Request 067/13</b> | <b>2010/ 2011</b>         | <b>2011/ 2012</b>                                | <b>2012/ 2013</b>   |
|--|---------------------------|--|---|
| <b>Invoiced</b>                              | 3,982.00                  | 12,786.81  | 16,617.00   |
| <b>Recovered</b>                             | 362.00                    | 3,557.00   | 5,197.76  |
| <b>Written-Off</b>                           | 3,620.00                  | 9,229.81   | 1,275.00  |
| <b>Outstanding</b>                           | 0.00                      | 0.00   | 10,144.24   |
| <b>Number of Overseas Visitors</b>           | 4                         | 12   | 18  |
| <b>Countries represented by year :</b>       | USA<br>CANADA<br>PAKISTAN | CANADA<br>INDIA<br>HOLLAND<br>RUSSIA<br>PAKISTAN | CANADA<br>INDIA<br>MOZAMBIQUE<br>SOUTH AFRICA<br>CYPRUS<br>IRAN<br>CHINA<br>AFRICAN<br>MALAYSIA<br>PAKISTAN |

**068/13**  
**Interpreters**

My request relates to both the spoken word and translation of written documents, but please exclude British Sign Language interpreters and translation of written documents into Braille. I'm only looking for foreign languages.

- 1) Please tell me how many times interpretation services were required at your trust in each of the following financial years: a) 2008/9 b) 2009/10 c) 2010/11 d) 2011/12 e) 2012/13

**See below**

- 2) Please tell me the top five languages required in the last financial year, i.e. 2012/13. E.g. 1) Spanish 2) Polish 3) Greek 4) Arabic 5) Chinese

**The top 5 that have been identified for the last financial year: 1) Punjabi 2) Urdu 3) Bengali 4) Polish 5) Mirpuri.**

|                       | Bengali | Mirpuri | Punjabi | Urdu | Guj/Hindi | Polish | Slovak | Czech | French | Thai | Chinese | Somalian | Farsi | Khurdish | Albanian | Romanian | Hungarian | Portugese | Lithunian | Russian | Pushto | Vietnemes | Tamil | Arabic | Dari |
|-----------------------|---------|---------|---------|------|-----------|--------|--------|-------|--------|------|---------|----------|-------|----------|----------|----------|-----------|-----------|-----------|---------|--------|-----------|-------|--------|------|
| April 2010-March 2011 | 378     | 294     | 590     | 173  | 220       | 300    | 108    | 39    | 34     | 16   | 95      | 17       | 25    | 15       | 2        | 14       | 20        | 6         | 4         | 8       | 3      | 1         | 5     | 3      | 0    |
| April 2011-March 2012 | 419     | 313     | 588     | 318  | 230       | 313    | 106    | 78    | 10     | 5    | 122     | 10       | 42    | 55       | 5        | 39       | 55        | 4         | 7         | 10      | 6      | 7         | 0     | 14     | 0    |
| April 2012-March 2013 | 466     | 395     | 871     | 485  | 321       | 406    | 170    | 160   | 20     | 0    | 153     | 4        | 38    | 49       | 11       | 20       | 105       | 0         | 7         | 19      | 12     | 7         | 0     | 22     | 11   |

3) Please tell me the total cost of interpretation services in each of the following financial years: a) 2008/9 b) 2009/10 c) 2010/11 d) 2011/12 e) 2012/13

**Cost of Interpretation Services**

|         |         |
|---------|---------|
|         | £       |
| 2008/09 | 50,115  |
| 2009/10 | 36,420  |
| 2010/11 | 48,645  |
| 2011/12 | 132,695 |
| 2012/13 | 100,400 |

**069/13  
Informatics**

| Question   | Walsall Healthcare NHS Response  |
|--|--|
| <b>The information should be as up-to-date as possible but not older than 3 months.</b>                                    |  |
| 1. If your IT is not totally Outsourced then how many individual Staff (headcount) are employed within your IT Department? | “Informatics” employees 81 staff, equating to 75.36 FTE (a shared service across the local health economy) |
| 2. To which Company or Companies are the following areas of IT Outsourced:   |  |
| Infrastructure?  | Acute network managed by Skanska   |
| Desktops/Laptops/Thin Clients?   | Not outsourced – Managed internally  |
| Systems Development / Applications Management?   | Not outsourced – Managed internally  |
| 3. How many Desktops are in use?   | Approx 3670  |
| 4. How many Laptops are in use?  | Approx 1000  |
| 5. How many Thin Clients are in use?   | None   |
| 6. Which Server Platform(s) and Operating System(s) do you use?  | Hardware is Dell, OS - Microsoft 2003 & 2008   |
| 7. How many Physical Servers are in use?   | 105  |
| 8. How many Virtual Servers are in use?  | 329  |
| 9. What is the name and job title of the most senior person in IT?   | Mark Taylor - Assistant Director of IT Services  |

**070/13**

**Pay rise/bonuses**

I am writing to make a request under the Freedom of Information Act.

Please supply details of any pay rise and/or bonuses the chief executive at your Trust has received in the last 12 months.

Within the timeframe allowed by the Act please also supply details of the employee's previous salary and what it is now.

**Please see attached Annual Report for 2012/13 which includes information in regards to the above.**

**Information available upon request.**

**071/13**

**Maternity Services**

I am writing regarding a clarification to the previous FOI request sent by myself and Matthew Hill regarding your hospital based maternity service (or services). The reference number for the request is FOI 071/13

Following on from our recent FOI request we would like to make the following clarifications:

**\* We are asking for data for full term births excluding babies not born within your hospital i.e. inborn babies only.**

| <b>Year Financial</b> | <b>Term Live Births</b> |
|-----------------------|-------------------------|
| Year 2012/13          | 4352                    |
| Year 2011/12          | 4221                    |
| Year 2010/11          | 3631                    |

**\* For question five we are asking you to list the numbers born with Hypoxic-Ischaemic Encephalopathy grades 1, 2 and 3 separately.**

**2010:**

HIE Grade 1 = 1-10 babies  
HIE Grade 2 = 0 babies  
HIE Grade 3 = 1-10 babies  
1-10 babies in total

**2011:**

HIE Grade 1 = 1-10 babies  
HIE Grade 2 = 0 babies  
HIE Grade 3 = 0 babies  
1-10 babies in total

**2012:**

HIE Grade 1 = 1-10 babies  
 HIE Grade 2 = 0 babies  
 HIE Grade 3 = 1-10 babies  
 1-10 babies in total

**\* For Trusts with which we have enquired about more than one maternity service, we are requesting for the figures to be given separately for each maternity service.**

We only have one Maternity Unit.

**072/13****A&E Staff Cover**

**I would like to request information on staffing within your Type 1 Accident and Emergency departments - as defined by NHS England (Type 1 A&E department = A consultant led 24 hour service with full resuscitation facilities and designated accommodation for the reception of accident and emergency patients)**

- 1. For each Type 1 Accident and Emergency department within your trust, please list by grade all nurses and doctors that were on duty a) overnight (out-of hours) and b) day (core hours) in Accident and Emergency for the nights of (i) Sunday 17<sup>th</sup> February 2013 (ii) Monday 18<sup>th</sup> February 2013 (iii) Tuesday 19<sup>th</sup> February 2013 (iv) Wednesday 20<sup>th</sup> February 2013 (v) Thursday 21<sup>st</sup> February 2013 (vi) Friday 22<sup>nd</sup> February 2013 (vii) Saturday 23<sup>rd</sup> February 2013**

**For each doctor or nurse, please state whether they were (a) locum or (b) permanent staff. Please include doctors or nurses that were on call for each night but please state if this was the case and if on call staff were off site or in the hospital.**

## Nursing Staff:

Day shift 07.30-20.00/ night shift 19.30-08.00

Sunday 17<sup>th</sup> February

Day shift- 2 x band 7/ 6 x band 5 (1 bank nurse 12.00-20.00) and 1 x band 2

Night duty- 1 x band 6/ 6 x band 5 and 1 x band 2 16.00-00.00(bank nurse)

Monday 18<sup>th</sup> February

Day shift- 1 x band 7/8 x band 5 and 1 x band 2

Night shift- 1 x band 7/ 5 x band 5/ 1 x band 2 and 1 x band 5 12.30-01.00

Tuesday 19<sup>th</sup> February

Day shift-1 x band 7/ 1 x band 6/ 7 x band 5/2 x band 2 (bank nurses)

Night shift-1 x band 7/ 5 x band 5 and 1 x band 2

Wednesday 20<sup>th</sup> February

Day shift- 1 x band 7/ 1 x band 6/ 5 x band 5 and 2 x band 2 (bank nurses)

Night shift- 1 x band 7/ 5 x band 5 (1 bank nurse)and 1 x band 5 12.30-01.00

Thursday 21<sup>st</sup> February

Day shift-1 x band 7/ 6 x band 5/ 3 x band 2(2 bank nurses)

Night shift-1 x band 7/ 1 x band 6/ 4 x band 5 and 1 x band 5 12.30-01.00

Friday 22<sup>nd</sup> February

Day shift-1 x band 7/ 1 x band 6/ 7 x band 5/2 x band 2

Night shift- 1 x band 7/ 1x band 6/4 x band 5 and 1 x band 2 20.00-00.00(bank nurse)

Saturday 23<sup>rd</sup> February

Day shift-1 x band 6/ 6 x band 5 (1 x bank nurse 07.30-13.00)/ 2 x band 2(1 x bank nurse)

Night shift- 1 x band 7/ 1 x band 6/ 4 x band 5 and 1 x band 2 18.00-00.00 (bank nurse)

For information regarding Doctors please open the embedded document below:



FOI Doctors.docx

- 2. Please state whether there have been any occasions between 1 January 2013 and 31 March 2013 when one of your Accident and Emergency departments has been without Accident and Emergency consultant cover. For each occasion, please state the department in question, the date and the length of time the department was without cover. By 'without cover' I mean that there was no consultant present in the department nor on call.**

It has never happened that the A & E Department has been without cover either from the department or from home

**072/13**

**A&E Staff Cover**

I would like to request information on staffing within your Type 1 Accident and Emergency departments - as defined by NHS England (Type 1 A&E department = A consultant led 24 hour service with full resuscitation facilities and designated accommodation for the reception of accident and emergency patients)

- 1. For each Type 1 Accident and Emergency department within your trust, please list by grade all nurses and doctors that were on duty a) overnight (out-of hours) and b) day (core hours) in Accident and Emergency for the nights of (i) Sunday 17<sup>th</sup> February 2013 (ii) Monday 18<sup>th</sup> February 2013 (iii) Tuesday 19<sup>th</sup> February 2013 (iv) Wednesday 20<sup>th</sup> February 2013 (v) Thursday 21<sup>st</sup> February 2013 (vi) Friday 22<sup>nd</sup> February 2013 (vii) Saturday 23<sup>rd</sup> February 2013**

**For each doctor or nurse, please state whether they were (a) locum or (b) permanent staff. Please include doctors or nurses that were on call for each night but please state if this was the case and if on call staff were off site or in the hospital.**

Nursing Staff:

Day shift 07.30-20.00/ night shift 19.30-08.00

Sunday 17<sup>th</sup> February

Day shift- 2 x band 7/ 6 x band 5 (1 bank nurse 12.00-20.00) and 1 x band 2

Night duty- 1 x band 6/ 6 x band 5 and 1 x band 2 16.00-00.00(bank nurse)

Monday 18<sup>th</sup> February

Day shift- 1 x band 7/8 x band 5 and 1 x band 2

Night shift- 1 x band 7/ 5 x band 5/ 1 x band 2 and 1 x band 5 12.30-01.00

Tuesday 19<sup>th</sup> February

Day shift-1 x band 7/ 1 x band 6/ 7 x band 5/2 x band 2 (bank nurses)

Night shift-1 x band 7/ 5 x band 5 and 1 x band 2

Wednesday 20<sup>th</sup> February

Day shift- 1 x band 7/ 1 x band 6/ 5 x band 5 and 2 x band 2 (bank nurses)

Night shift- 1 x band 7/ 5 x band 5 (1 bank nurse)and 1 x band 5 12.30-01.00

Thursday 21<sup>st</sup> February

Day shift-1 x band 7/ 6 x band 5/ 3 x band 2(2 bank nurses)

Night shift-1 x band 7/ 1 x band 6/ 4 x band 5 and 1 x band 5 12.30-01.00

Friday 22<sup>nd</sup> February

Day shift-1 x band 7/ 1 x band 6/ 7 x band 5/2 x band 2

Night shift- 1 x band 7/ 1x band 6/4 x band 5 and 1 x band 2 20.00-00.00(bank nurse)

Saturday 23<sup>rd</sup> February

Day shift-1 x band 6/ 6 x band 5 (1 x bank nurse 07.30-13.00)/ 2 x band 2(1 x bank nurse)

Night shift- 1 x band 7/ 1 x band 6/ 4 x band 5 and 1 x band 2 18.00-00.00 (bank nurse)

For information regarding Doctors please open the embedded document below:



FOI Doctors.docx

- 2. Please state whether there have been any occasions between 1 January 2013 and 31 March 2013 when one of your Accident and Emergency departments has been without Accident and Emergency consultant cover. For each occasion, please state the department in question, the date and the length of time the department was without cover. By 'without cover' I mean that there was no consultant present in the department nor on call.**

It has never happened that the A & E Department has been without cover either from the department or from home

**073/13**

### **Intermediate Assessment Units**

- 1. Please list the names of all intermediate assessment units that you have in each hospital within your trust (e.g. surgical assessment unit, medical assessment unit, clinical assessment unit etc.)**

Integrated Assessment Unit (IAU) and Paediatric Assessment Unit (OBU)

- 2. For each unit in each hospital listed under (1) please state for the 7 days from Sunday 17<sup>th</sup> February 2013 to Saturday 23<sup>rd</sup> February 2013 (inclusive) what the (a) mean; (b) median; and (c) longest time that patients were held in the unit was.**

All the numbers below are in minutes.

|     | Mean    | Median | Longest |
|-----|---------|--------|---------|
| IAU | 1481.52 | 1250   | 10712   |
| OBU | 343.80  | 285    | 1359    |

## 074/13 Nursing Vacancies

### Nursing vacancies

- How many nursing vacancies do you have, as at 1 June 2013?  
**53.91 wte**
- What was your nursing establishment (how many nursing posts did you have including vacancies) at 1 June 2012 and at 1 June 2013? Please give WTE and headcount numbers of posts.

|                  | June 2012      | June 2013      |
|------------------|----------------|----------------|
| <b>Headcount</b> | <b>1173</b>    | <b>1220</b>    |
| <b>WFT</b>       | <b>1028.04</b> | <b>1065.13</b> |

- What bands are you recruiting to?  
**Band 2, 5, 6, 7**
- Please indicate which areas of nursing your Trust is finding it difficult to recruit to (eg Theatres, ITU, ED).  
**We do not find it hard to recruit to a specific ward; it varies depending on the number of applications per advert and how many vacancies we need to recruit to per advert.**

### Overseas recruitment

- Since January 2012 has your Trust attended an overseas recruitment event to recruit nursing staff? - **NO**
  - If so, where did you go and when?
  - How much did this attendance cost the Trust?
- Does your Trust intend to recruit nursing staff from overseas in the next six months? - **NO**
  - If so, where do you intend to recruit from and when?
- If your Trust is recruiting nursing staff from overseas, what do you believe are the reasons it is unable to recruit sufficient nursing staff from within the UK? - **N/A**

**075/13  
Car Parking Charges**

1) The cost (for staff and patients, at each car park operated under the jurisdiction of the Trust) in each of the last five years, of:

a. 1 hour parking

| <b>Patient</b> |       | <b>Staff</b> |       |          |
|----------------|-------|--------------|-------|----------|
| 2008/2009      | £1.00 | 2008/2013    | Outer | 0.06153  |
| 2009/2010      | £1.00 |              | Inner | 0.092308 |
| 2010/2011      | £1.00 |              |       |          |
| 2011/2012      | £2.00 |              |       |          |
| 2012/2013      | £2.00 |              |       |          |

b. 2 hour parking

| <b>Patient</b> |       | <b>Staff</b> |       |          |
|----------------|-------|--------------|-------|----------|
| 2008/2009      | £2.00 | 2008/2013    | Outer | 0.012306 |
| 2009/2010      | £2.00 |              | Inner | 0.184615 |
| 2010/2011      | £2.00 |              |       |          |
| 2011/2012      | £3.00 |              |       |          |
| 2012/2013      | £3.00 |              |       |          |

c. 1 day parking

| <b>Patient</b> |       | <b>Staff</b> |       |         |
|----------------|-------|--------------|-------|---------|
| 2008/2009      | £5:00 | 2008/2013    | Outer | 0.32967 |
| 2009/2010      | £5:00 |              | Inner | 0.4945  |
| 2010/2011      | £6:00 |              |       |         |
| 2011/2012      | £6:00 |              |       |         |
| 2012/2013      | £6:00 |              |       |         |

2) The total net income from car parks operated by the CCG/Trust in each of the last five years

| <b>Patient</b> |               |
|----------------|---------------|
| 2008/2009      | £484,685.99   |
| 2009/2010      | £522,382.23   |
| 2010/2011      | £574,794.47   |
| 2011/2012      | £931,586.92   |
| 2012/2013      | £1,119,182.67 |

3) The total profit made from car parks operated by the CCG/Trust in each of the last five years

N/A Trust does not make a profit - all resources go to support corporate needs.

4) The total number of patients using CCG/Trust operated car parks in each of the last five years

400 000

5) The category of patients exempt from car park charges in each of the last five years

| <b>Patient</b> |  | <b>Staff</b> |          |
|----------------|--|--------------|----------|
| 2008/2010      | Disabled<br>Volunteers<br>Chemotherapy | 2008/2013    | Disabled |
| 2010/2013      | Volunteers<br>Chemotherapy             |              |          |

### **076/13**

#### **Number of hospital wards and beds**

**1. The names of all the hospitals in your trust;**

Manor Hospital

**2. The types of each of these hospitals;**

Acute

**3. The number of wards in each hospital;**

26 (for the Period 01/01/2013 – 31/03/2013)

**4. The number of beds in each hospital.**

488.8 beds open on average per day (for the Period 01/01/2013 – 31/03/2013)

077/13

**Emergency Department Nurses**

1. **How many registered nurses do you currently employ (June 2013) to work in A&E between 8am and 10pm? (give head count and whole/full time equivalent) (if you do not have June 2013 figures, please supply the latest figures making it clear when they apply)**

Band 7- 4.0wte  
Band 6- 4.25wte  
Band 5- 34.05wte

Night shift 19.30-08.00 1 x band 6 or band 7 & 5 x band 5's  
Day shift 07.30-20.00 1 x band 6 or band 7 & 7 x band 5's

2. **How many registered nurses did you employ to work in A&E between 8am and 10pm in A&E in June 2012? (give head count and whole/full time equivalent)**

Band 7- 4.0wte  
Band 6- 4.25wte  
Band 5- 34.05wte

Night shift 19.30-08.00 1 x band 6 or band 7 & 5 x band 5's  
Day shift 07.30-20.00 1 x band 6 or band 7 & 7 x band 5's

3. **How many registered nurses do you currently employ (June 2013) to work in A&E to work between 10pm and 8am? (give head count and whole/full time equivalent)**

Night shift 19.30-08.00 1 x band 6 or band 7 & 5 x band 5's

4. **How many emergency nurses did you employ to work in A&E between 10pm and 8am in A&E in June 2012? (give head count and whole/full time equivalent)**

Night shift 19.30-08.00 1 x band 6 or band 7 & 5 x band 5's

5. **How many band 5 nurses do you currently employ (June 2013) to work in A&E to work between 10pm and 8am? (give head count and whole/full time equivalent)**

5

6. **How many band 5 nurses were working in your A&E department between 10pm and 8am in June 2012? (give head count and whole/full time equivalent)**

5

7. **How many band 6 nurses do you currently employ (June 2013) to work in A&E to work between 10pm and 8am? (give head count and whole/full time equivalent)**

1

8. **How many band 5 nurses were working in your A&E department between 10pm and 8am in June 2012? (give head count and whole/full time equivalent)**

5

9. **In May 2013, how many total dependency patients - patients require total nursing care and one-to-one input - attended A&E?**

This information is currently not captured

10. **In May 2012, how many total dependency patients - patients require total nursing care and one-to-one input - attended A&E?**

This information is currently not captured

**11. In 2012, what percentage of your nursing staff received advanced life support skills training? Please also state the head count number of other staff who received training.**  
40%

**12. In 2013, what percentage of your nursing staff received advanced life support skills training? Please also state the head count number of other staff who received training.**  
70%

**13. Do you have any initiatives in the trust at the moment to ease the pressure on your A&E department? For instance, do you have plans to recruit more emergency nurses, or are you implementing plans to speed up the discharge process?**

There has been an Emergency Department nursing workforce review that was submitted to Trust Execs in March 2013 that is going to the business case review group and we are awaiting the outcome. This is to increase the nursing numbers / dedicated ENP service and a professional development post for training and education.

**078/13**

**Compensation claims**

Please provide me information on compensation claims made by members of staff working for your organisation. I am interested in claims for compensation for workplace incidents, for example, physical injury.

Please provide information from January 2008 to the most up to date information available.

I would like the information on an excel spreadsheet, detailing:

Date of claim

Location of incident –name of hospital or community setting. Ideally please specify if in A&E, theatre or non-ward area etc.

Position of member of staff involved – i.e. nurse, healthcare assistant, doctor, administrative employee and Agenda for Change band number (ie, band 6 nurse)

Specific details on the nature of the claim. For example, a fall on the stairs or burn/sharps injury.

Outcome of the claim made, i.e. if it was upheld or not. If a successful claim was made, please detail the outcome and the exact amount of financial compensation awarded, if any.

Please supply details of any changes your organisation has made as a result of any claim. For example, has your organisation introduced a new sharps policy following an incident, or bought new lifting equipment etc.

Please specify the amount paid to patients following successful compensation from January 2008.

**Please see information below:**

| Date of Claim | Nature of Claim                          | Location of Incident    | Profession of Staff Member | Job Band  | Outcome of Claim | Details of the Nature of the Claim   |
|---------------|--|-------------------------|----------------------------|-----------|------------------|--|
| 2008          |  |                         |                            |           |                  |  |
| 29/01/2008    | Burn - Hot Food                          | Catering                | Cook                       | Band 2    | Admitted         | Defective equipment not taken out of use. No enforcing of PPE use  |
| 27/02/2008    | Slip Trip and Fall                       | Near SW                 | Specialist Nurse           | Not Known | Admitted         | Claimant fell over fence that had fallen whilst assisting patient. Uncertain which organisation responsible for fence. |
| 05/06/2008    | Slip Trip and Fall                       | Near Ward 17 exit       | Staff Nurse                | Band 5    | Admitted         | Cover was placed by Skanska under license  |
| 05/06/2008    | Slip Trip and Fall                       | Reservoir car park      | Staff Nurse                | Band 5    | Admitted         | Bore hole done during advanced works. Maintenance both Trust and SFS   |
| 23/07/2008    | Slip Trip and Fall                       | HSDU                    | Support Services Assistant | Band 1    | Admitted         | Twisted Knee   |
| 25/09/2008    | Slip Trip and Fall                       | Ward 1                  | Catering Assistant         | Not Known | Admitted         | Slipped on wet floor and banged head off hoist.  |
| 31/03/2008    | Slip Trip and Fall                       | Theatre 2 West Wing     | Staff Nurse                | Band 5    | Admitted         | Slipped on wet floor and hurt hand   |
| 18/08/2008    | Body Part impacting with moveable object | West Wing Kitchens Lift | Porter                     | Band 2    | Admitted         | Trapped Fingers in lift  |
| 15/08/2008    | Slip Trip and Fall                       | Modular Block           | Occupational Therapist     | Not Known | Defended         | Twisted Ankle whilst walking to work   |
| 19/03/2008    | Slip Trip and Fall                       | Main entrance           | Catering Assistant         | Not Known | Admitted         | Ice was not gritted. Conflicting versions of events  |
| 2009          |  |                         |                            |           |                  |  |
| 09/03/2009    | Hit by moving object                     | Imaging                 | Senior Radiographer        | Band 6    | Admitted         | Ran over foot with bed on the way to a ward  |
| 06/04/2009    | Slip Trip and Fall                       | Imaging                 | Clerical Officer           | Band 2    | Admitted         | Slipped on Water   |
| 29/05/2009    | Slip Trip and Fall                       | Modular Block           | Occupational Therapist     | Not Known | Defended         | Slipped on Gel   |
| 23/07/2009    | Slip Trip and Fall                       | Reservoir Car Park      | Nursing & Midwifrey        | Not Known | Defended         | Slipped Down Grassy Bank, should be using the appropriate walkways   |
| 29/07/2009    | Slip Trip and Fall                       | Imaging A               | Clerical Officer           | Band 2    | Defended         | Slipped on Coridoor Floor  |
| 31/08/2009    | Slip Trip and Fall                       | Pharmacy                | Pharmacy Assistant         | Band 2    | Admitted         | Court Attendance   |

|            |                      |                    |                               |           |                        |  |
|------------|----------------------|--------------------|-------------------------------|-----------|------------------------|--|
| 06/10/2009 | Slip Trip and Fall   | Distribution Yard  | Support Services Supervisor   | Band 4    | Defended               | Foot got caught in strip of plastic, should not be in the Distribution yard  |
| 23/11/2009 | Sharps Incident      | Maternity          | Staff Nurse                   | Band 5    | Admitted               | Anxiety not knowing if the scalpel was infected  |
| 23/11/2009 | Hit by moving object | AMU Unit           | Clinical Support Worker       | Band 2    | Admitted               | Window Came down on finger   |
| 2010       |                      |                    |                               |           |                        |  |
| 15/02/2010 | Slip Trip and Fall   | Outside A& E       | Support Services Assistant    | Band 1    | Admitted               | Tripped over a disabled lock   |
| 29/03/2010 | Manual Handling      | Slope from PAU     | Clinical Support Worker       | Band 2    | Admitted               | Twisted Back Whilst Transporting Patient   |
| 21/05/2010 | Slip Trip and Fall   | Planned Care       | Medical Secretary             | Band 4    | Defended               | Slipped and Fell   |
| 07/06/2010 | Scalded              | Not Stated         | Support Services Assistant    | Band 1    | Admitted               | Soup fell from claimants hands and landed on her feet  |
| 29/06/2010 | Manual Handling      | Ward 10            | Ward Support Worker           | Band 1    | Admitted               | Injury to back whilst lifting patient  |
| 05/08/2010 | Sharps incident      | Plebotomy          | Student Nurse                 | Not Known | Admitted               | Needle Stick Injury  |
| 01/09/2010 | Sharps incident      | HSDU               | HSDU Assistant                | Not Known | Admitted               | Caught right elbow on sharp blade  |
| 15/09/2010 | Scalded              | West Wing Kitchen  | Support Services Assistant    | Band 1    | Defended               | Attended Court and Won case  |
| 13/10/2010 | Slip Trip and Fall   | Outside Maternity  | Midwife                       | Not Known | Admitted               | Fell Down a Pot Hole   |
| 2011       |                      |                    |                               |           |                        |  |
| 14/02/2011 | Manual Handling      | Not Stated         | Clinical Support Worker       | Band 2    | Admitted Claim Statute | Injury Whilst Lifting a Patient  |
| 16/02/2011 | Slip Trip and Fall   | Not Stated         | Staff Nurse                   | Band 5    | Barred                 | Slipped on Urine whilst helping a patient  |
| 23/02/2011 | Slip Trip and Fall   | Imaging Department | Clerical Officer              | Band 2    | Admitted               | 2nd Claim, Fell from Chair   |
| 07/03/2011 | Slip Trip and Fall   | Wilcox Car Park    | Information Programme Manager | Not Known | Admitted               | Slipped on Ice in Wilcox Car Park  |
| 11/03/2011 | Slip Trip and Fall   | Staffroom Ward 1   | Student Nurse                 | Not Known | Defend                 | Tripped and fell over protruding leg of hoist. Patient through himself out of the bed onto Claimant hurting her shoulder |
| 11/03/2011 | Manual Handling      | Not Stated         | Nurse Practitioner            | Not Known | Defend                 | Claimant hurting her shoulder  |
| 10/03/2011 | Slip Trip and Fall   | Not Stated         | Nurse Practitioner            | Not Known | Defend                 | Twisted right ankle  |

|            |                     |                               |   |           |                           |  |
|------------|---------------------|-------------------------------|---|-----------|---------------------------|--|
| 04/05/2011 | Slip Trip and Fall  | Back Entrance to New Build    | Staff Nurse                                 | Band 5    | Defended                  | Not NHS Trust Property / Council Property                        |
| 10/05/2011 | Sharps Injury       | Ward 11                       | Porter<br>Support Services                  | Band 2    | Admitted                  |  |
| 07/07/2011 | Slip Trip and Fall  | Ward 7                        | Assistant                                   | Band 1    | Admitted                  | Manual Handling Injury Whilst transferring patients notes        |
| 30/08/2011 | Manual Handling     | Out Patients                  | Clerical Officer                            | Band 2    | Admitted                  |  |
| 2012       |                     |                               |   |           |                           |  |
| 20/01/2012 | Slip Trip and Fall  | HDU                           | Clinical Support Worker                     | Band 2    | Under NHSLA Investigation | Fell from a foot stool when reaching to get something from above |
| 02/02/2012 | Slip Trip and Fall  | Near Ward 14                  | Staff Nurse                                 | Band 5    | Under NHSLA Investigation | Slipped on water along the corridor                              |
| 03/02/2012 | Physical Violence   | Day Room                      | Bank Nurse                                  | Not Known | Under NHSLA Investigation | Patient attacked claimant with a spirit level                    |
| 14/02/2012 | Slip Trip and Fall  | Ground Floor Estatates Office | Clinical Support Worker<br>Support Services | Band 2    | Under NHSLA Investigation | Slipped on water when entering an entrance by a stairwell        |
| 04/04/2012 | Slip Trip and Fall  | Corridor                      | Assistant                                   | Band 1    | Defended                  | Slipped on water   |
| 10/05/2012 | Slip Trip and Fall  | Ward 17 Stairwell             | Ward Clerk                                  | Band 2    | Under NHSLA Investigation | Slipped on stairwell near Ward 17                                |
| 10/07/2012 | Manual Handling     | HSDU                          | HSDU Supervisor                             | Band 3    | Under NHSLA Investigation | Injured right shoulder and back when removing shelves            |
| 25/07/2012 | Slip Trip and Fall  | Modular Block                 | Support Services Assistant                  | Band 1    | Under NHSLA Investigation | Slipped on wet floor that she had just cleaned?                  |
| 02/08/2012 | Slip Trip and Fall  | Corridor                      | Medical Secretary                           | Band 4    | Under NHSLA Investigation | Slipped on wet floor that had just been cleaned                  |
| 10/09/2012 | Needle Stick Injury | AMU                           | Porter                                      | Band 2    | Under NHSLA Investigation | Needle sticking out of Clinical Waste Bin pricked leg            |

|            |                     |                         |                                |        |                           |  |
|------------|---------------------|-------------------------|--------------------------------|--------|---------------------------|--|
| 27/09/2012 | Needle Stick Injury | AMU                     | Support Services Assistant     | Band 1 | Under NHSLA Investigation | Needle sticking out of Clinical Waste Bin pricked leg                                  |
| 26/09/2012 | Slip Trip and Fall  | West Wing Steps         | Support Services Assistant     | Band 1 | Under NHSLA Investigation | Tripped over some wire which was left on the stairs                                    |
| 26/10/2012 | Slip Trip and Fall  | Pharmacy                | Pharmacy Technician            | Band 5 | Under NHSLA Investigation | Staff member slipped on wet floor within Pharmacy                                      |
| 29/10/2012 | Physical Violence   | Ward 3                  | Staff Nurse                    | Band 5 | Under NHSLA Investigation | Staff member was kicked in the stomach by a patient                                    |
| 29/10/2012 | Slip Trip and Fall  | West Wing Coridoor      | Ward Clerk                     | Band 2 | Under NHSLA Investigation | Staff member slipped on wet floor along the west wing coridoor.                        |
| 01/11/2012 | Slip Trip and Fall  | Theatres                | Senior Staff Nurse             | Band 5 | Under NHSLA Investigation | Ill fitting footwear caused the claimant to trip and fall                              |
| 20/11/2012 | Sharps              | West Wing Theatres      | Bank Porter                    | Band 2 | Under NHSLA Investigation | Needle stick injury whilst working on the clinical waste bins                          |
| 2013       |                     |                         |                                |        |                           |  |
| 04/01/2013 | Slip, Trip and Fall | Medical Records Library | Health Records Assistant       | Band 2 | Under NHSLA Investigation | Claimant tripped over a strip of metal fixed to the floor that was protruding upwards. |
| 11/01/2013 | Animal Bite         | Patients Home           | Practice Education Facilitator | Band 7 | Under NHSLA Investigation | Claimant was bitten by a patients dog when entering the patients home.                 |
| 17/01/2013 | Barrier Incident    | Car Park                | Ward Clerk                     | Band 2 | Under NHSLA Investigation | Claimants Car was hit by a barrier in the wind, claimant suffered personal injuries    |
| 11/02/2013 | Slip, Trip and Fall | Outside HDU             | Senior Sister                  | Band 7 | Under NHSLA Investigation | Slipped and fell outside HDU department.   |

|            |  |                        |                            |           |                                    |   |
|------------|--|------------------------|----------------------------|-----------|------------------------------------|---|
| 12/02/2013 | Body Part Impacting with Moveable Object | Health Records         | Health Records Assistant   | Band 2    | Under NHSLA Investigation          | Metal Divider went through palm of hand causing a deep cut.                   |
| 22/02/2013 | Sharps                                   | AMU                    | Porter                     | Band 2    | Under NHSLA Investigation          | Sustained a needlestick injury whilst emptying the clinical waste bins.       |
| 06/03/2013 | Slip, Trip and Fall                      | Ward 1                 | Clinical Support Worker    | Band 3    | Admitted Under NHSLA Investigation | Claimant went to sit on the chair and the chair gave way.                     |
| 04/03/2013 | Slip, Trip and Fall                      | Ward 26                | Security Guard             | Not Known | Under NHSLA Investigation          | Slipped on hand gel along the corridor.                                       |
| 19/03/2013 | Noise Pollution                          | Plant Room             | Plant Engineer             | Not Known | Defend Under NHSLA Investigation   | Claiming damages for hearing loss and tinnitus                                |
| 16/04/2013 | Slip, Trip and Fall                      | Ward 1                 | Support Services Assistant | Band 1    | Under NHSLA Investigation          | Walked by the utility room in ward 1 and slipped on water on the floor        |
| 16/04/2013 | Slip, Trip and Fall                      | Corridor               | Clinical Support Worker    | Band 2    |                                    | Door slammed into claimant causing her to fall                                |
| 16/04/2013 | Slip, Trip and Fall                      | Imaging                | Telephonist                | Band 2    |                                    | Claimant was attending an appointment for an x-ray when she fell off the bed. |
| 05/06/2013 | Manual Handling                          | Accident & Emergencies | Night Receptionist         | Not Known |                                    | Claimant moved a box to gain access to the files and felt pain in her back    |

**Changes made following claims are: non slip flooring, annual manual handling training, ongoing works to introduce sharps fitted with safety devices, risk assessment undertaken and development and implementation of policies**

## Hand Drying Questionnaire

### FAO the Estate/Facilities Manager

1. Trust/Health Board Name                      Walsall Healthcare NHS Trust
2. Number of hospitals managed:                      1
3. What type of hand drying systems do you provide in the wash rooms located in the following areas of your hospitals? Tick all that apply.
  - a. **Clinical:**
  - b. **Public areas:**
    - Paper Hand Towels
  - c. **Other e.g. catering, back office (inventory, purchasing, etc.):**
4. If electrical driers are used please state type, tick all that apply:
  - a. **Clinical:**
  - b. **Public areas:**
  - c. **Other e.g. catering, back office (inventory, purchasing, etc.):**
5. If other hand drying systems are used or combinations of systems are employed, please give details:
  - a. **Clinical:**
  - b. **Public areas:**
  - c. **Other e.g. catering, back office, inventory, purchasing, etc.:**
6. What were the main reasons for choosing the hand drying systems you use in:
  - a. **Clinical: Infection control 'paper towels promote quicker drying of hands, hand dryer too noisy for clinical areas'**
  - b. **Public areas: Hand dryers minimise misuse/wastage of paper hand towels.**
  - c. **Other e.g. catering, back office, inventory, purchasing, etc.: Infection Control 'paper towels promote quicker drying of hands'**
7. Do you have any plans to change your hand drying systems? If so what do you plan to change to and why? N

8. Any other comments you would like to make about hand drying?  
N/A

**081/13  
NHS Trust EPR System Information**

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

**Please note:** EPR stands for Electronic Patient Record.

For each questions 1-4 please select one answer only by mark your relevant answer with an "X" in the column marked X

| Question   | Answer (please select one answer for each question)                           | X |
|--|---|---|
| 1. Does the trust have an EPR system currently implemented?  | A. Yes  | X |
|  | B. No - the trust does not have an EPR system                                 |   |
| 2. What kind of EPR system is implemented in the trust?  | A. Single supplier system   |   |
|  | B. "Core" plus connected departmental systems                                 | X |
|  | C. Best of breed approach (components from different suppliers) with a portal |   |
|  | D. Other - please explain   |   |
|  | E. N/A - the trust does not have an EPR                                       |   |
| 3. If not already in place, by when does the trust expect to have implemented an EPR that will enable it to become paperless or paper light? | A. 2013-14  |   |
|  | B. 2014-15  |   |
|  | C. 2015-16  |   |
|  | D. 2016-17  |   |
|  | E. 2017-18  |   |
|  | F. Beyond 2018  |   |
|  | G. Don't know   |   |
|  | H. EPR is already in place  | X |
| 4. If the trust is planning to implement a new or replacement EPR system, will it be looking to use:   | A. Single Supplier system   |   |
|  | B. "Core" plus connected departmental systems                                 | X |
|  | C. Best of breed approach with a portal                                       |   |
|  | D. The trust doesn't know yet   |   |
|  | E. Other – please explain   |   |
|  | F. N/A – the trust already has an EPR in place                                |   |

5. Please answer this question only if the trust has implemented a single or core EPR system (if you selected A or B in question 2):

| Question   | Answer       |
|--|--------------|
| A. Which EPR supplier does the trust use?                | Orion        |
| B. What is the name and version of the EPR system?       | Concerto 6.7 |
| C. When was the system installed                         | 2002         |
| D. What is the length of system contract?                | Yearly       |
| E. How many licenses does the trust have for the system? | Trust wide   |

6. Please detail the trust's actual spend in FY 12-13, its budgeted spend for FY 13-14 and its planned spend for FY 14-15 on EPR systems (including any implementation, system support and maintenance costs). If the trust has not spent anything on EPR systems in a financial year, please confirm by entering "0".

|                  | FY 12-13 | FY 13-14 | FY 14-15 |
|------------------|----------|----------|----------|
| EPR System spend | 200k     | 200K     | 200K     |

7. Please select the appropriate option for each of the software capabilities listed in the tables below to indicate whether the trust either has:

- No system in place
- A system exists, but it does not integrate with the EPR system
- It is part of the EPR system
- It integrates with the EPR system

*Please mark your answer for each software capability in the appropriate column with an X*

| Core EPR capabilities | No system in place | System exists, but it does not integrate with EPR system | Integrates with the EPR system | Part of the EPR system |
|-----------------------|--------------------|--|--------------------------------|------------------------|
| PAS                   |                    |  | X                              |                        |
| Order Communications  |                    |  | X                              |                        |
| Diagnostic reporting  |                    |  | X                              |                        |
| Discharge letters     |                    |  | X                              |                        |
| E-Prescribing         | X                  |  |                                |                        |
| Scheduling            | X                  |  |                                |                        |

| Departmental EPR capabilities | No system in place | System exists, but does not integrate with EPR system | Integrates with the EPR system | Part of the EPR system |
|-------------------------------|--------------------|---|--------------------------------|------------------------|
| A&E                           |                    |   | X                              |                        |
| Maternity                     |                    | X   |                                |                        |
| PACS                          |                    |   | X                              |                        |
| Pathology                     |                    |   | X                              |                        |
| Pharmacy                      |                    |   | X                              |                        |
| RIS                           |                    |   | X                              |                        |
| Theatres                      |                    | X   |                                |                        |

| Additional EPR capabilities | No system in place | System exists, but does not integrate with EPR system | Integrates with the EPR system | Part of the EPR system |
|-----------------------------|--------------------|---|--------------------------------|------------------------|
| Community PAS               |                    |   | X                              |                        |
| Simple BI                   |                    |   | X                              |                        |
| Cardiology                  |                    |   | X                              |                        |
| Oncology                    |                    |   | X                              |                        |
| Document Management         |                    | X   |                                |                        |
| Clinical Portal             |                    |   | X                              |                        |

**082/13**

**ICT- Local Area Network (LAN) Contracts.**

Please can you send me the organisation's Local Area Network (LAN) including private contracts, which may include the following:

- Individual Support and Maintenance
  - Managed
  - Cabling
1. Existing Supplier: Who is the current supplier?
  2. Annual Average Spend: What is the annual average spending on the supplier above? If there is more than one supplier please split the annual averages spend for each supplier.
  3. Number of Users: Please can you provide me with the number of users this contract covers. Approximate number of users will also be acceptable.
  4. Contract Type: Managed, Maintenance
  5. Hardware Brand: What is the hardware brand of the LAN equipment?
  6. Contract Description: Please provide me with a brief description of the overall contract.
  7. Contract Duration: What is the duration of the contract is and can you please also include any extensions this may include.
  8. Contract Expiry Date: When does the contract expire?
  9. Contract Review Date: When will the organisation is planning to review the contract?
  10. Responsible Officer: Who within the organisation is responsible for each of these contract(s) please provide me with contact details including name, job title, contact number and email address?

If the LAN maintenance is included in-house please include the following information:

1. Hardware Brand: What is the hardware brand of the LAN equipment?
2. Number of Users: Please can you provide me with the number of users this contract covers. Approximate number of users will also be acceptable.
3. Responsible Officer: Who within the organisation is responsible for each of these contract(s) please provide me with contact details including name, job title, contact number and email address?

If the contract is also expiring within the next three months please state what the likely outcome will be. If the contracts within the response are under four months old can you please state the shortlist of suppliers that bid on this contract?

**Please redirect your request to SKANSKA who will be able to provide you with a response.**

**083/13**

**Information Services**

**Would you kindly be able to tell me how many operations (elective and emergencies) operations were performed by the ENT department at Walsall (for all the ENT consultants) during that time period from the beginning of October 2008 to the end of September 2009 and how many of these were major operations.**

Please find embedded below a list, by number of procedure, broken down by HRG code and primary procedure description.

We cannot identify whether the procedure is 'major' or 'minor' based on HRG as this is not a recorded item for all HRG. The HRG description is included to enable you to make your own judgement on this matter.



RptFoi08313ENTProc  
.xlsx

**084/13  
NHS Trust Financial Information**

1. Please provide actual, budgeted and planned spend levels (split between revenue and capital expenditure) for each financial year of 12-13, 13-14 and 14-15 for:

- a. The whole trust
- b. IM&T department (including staff costs)

| Total spend figures            | Actual spend |       | Budgeted current spend |       | Planned budget |        |
|--------------------------------|--------------|-------|------------------------|-------|----------------|--------|
|                                | FY 12-13     |       | FY 13-14               |       | FY 14-15       |        |
|                                | Rev          | Cap   | Rev                    | Cap   | Rev            | Cap    |
| Total overall trust spend      | 224,669      | 4,750 | 221,000                | 6,470 | 226,851        | 13,770 |
| IM&T total (incl. Staff costs) | 3,864        | 1,157 | 5,991                  | 1,430 | 5,991          | 750    |

2. Where available, please detail how the above total IM&T spend levels (for each of the financial years 12-13, 13-14 and 14-15) are broken down using the categories provided in the table below. Please indicate whether expenditures are capital or revenue expenditure by populating the appropriate column. If prioritisation is required (due to resource limitations of this FOI request) then please focus on the top level categories Hardware, Software, IT Services, Communications, Staff and Other IT Spend.

| Break down of IT spend   | 12/13 |     | 13-14 |       | 14-15 |     |
|--|-------|-----|-------|-------|-------|-----|
|  | Rev   | Cap | Rev   | Cap   | Rev   | Cap |
| 1. Total spend on Hardware (hardware purchase only)                                  | 113   | 720 | 212   | 396   | 212   | 350 |
| 2. Total spend on Software (listed below) (incl. support and maintenance)            | 743   | 436 | 702   | 1,034 | 702   | 400 |
| a) Business Software (e.g. desktop OS, MS Office etc) (inc. Support and maintenance) | 0     | 13  | 0     | 134   | 0     | 0   |
| b) Clinical systems (incl. support and maintenance)                                  | 743   | 424 | 702   | 900   | 702   | 400 |
| i. PAS   | 162   | 0   | 123   | 500   |       |     |
| ii. Order Communications   | 0     | 0   | 0     | 0     |       |     |

|  |       |     |       |     |
|--|-------|-----|-------|-----|
| iii. Diagnostic reporting  | 0     | 0   | 0     | 0   |
| iv. Letters with coding  | 0     | 0   | 0     | 0   |
| v. Scheduling  | 0     | 0   | 0     | 0   |
| vi. E-Prescribing  | 0     | 0   | 0     | 0   |
| vii. PACS  | 365   | 393 | 387   | 350 |
| viii. Maternity  | 0     | 30  | 0     | 50  |
| ix. RIS  | 0     | 0   | 0     | 0   |
| x. Pathology   | 182   | 0   | 125   | 0   |
| xi. Pharmacy   | 0     | 0   | 28    | 0   |
| xii. A&E   | 0     | 0   | 0     | 0   |
| xiii. Document Management  | 35    | 0   | 40    | 0   |
| xiv. Clinical noting   | 0     | 0   | 0     | 0   |
| 3. Total spend on IT Services (listed below)   | 656   | 0   | 754   | 0   |
| a) Hardware maintenance  | 23    | 0   | 73    | 0   |
| b) Software maintenance  | 597   | 0   | 588   | 0   |
| c) IT outsourcing  | 0     | 0   | 0     | 0   |
| d) IT consultancy  | 35    | 0   | 63    | 0   |
| e) Bespoke Software  | 0     | 0   | 0     | 0   |
| f) Implementing new systems  | 0     | 0   | 0     | 0   |
| g) System integration  | 0     | 0   | 0     | 0   |
| h) Training  | 0     | 0   | 31    | 0   |
| 4. Total spend on Communications (mobile and fixed line telecoms, voice and data communications) | 111   | 0   | 817   | 0   |
| 5. Total spend on IT Staff   | 2,241 | 0   | 3,506 | 0   |
| a) Permanent IT staff  | 2,241 | 0   | 3,506 | 0   |
| b) Temporary IT staff  | 0     | 0   | 0     | 0   |
| 6. Total spend on other IT (please specify in the space below this table)                        |       |     |       |     |

**How many IM&T Staff (not including clinical coders) does the staff employ?  
(Please indicate whether this is WTE (Whole Time Equivalent) or FTE (Full Time Equivalent))**

75.36 FTE

**Please provide a copy of the trust's latest ICT Strategy document.**

Please see attached. Available upon request.

**085/13**

**Ethnic origin of applicants and appointees to medical jobs in the NHS**

I am writing to request some information under the Freedom of Information Act 2000 on the ethnic breakdown of applicants and appointees to medical jobs at your trust. I understand that information on ethnic origin is collected for monitoring purposes from applicants to jobs in the NHS and is likewise available for shortlisted and appointed candidates.

Could you please provide me data for 2010, 2011, and 2012 (calendar year) on:

**Please note that we only retain the requested information for a period of 12 months, therefore the answers to questions 1 – 4 are for the period June 2012 – December 2012.**

- 1) Total number of applicants to all medical doctor posts  
**629**
- 2) Ethnic breakdown of all applicants to all doctor posts
- 3) Ethnic breakdown of shortlisted applicants to all doctor posts
- 4) Ethnic breakdown of shortlisted applicants who were appointed to doctor posts
- 5) Ethnic breakdown of current doctor workforce (2013)

**Please see attached spreadsheet for the above.  
Spreadsheet available upon request.**

**086/13**

**Pathology**

I would like the information provided in an electronic format attached to this email. I have provided an excel template for you to answer questions 5 and 6. If you feel that you can provide this information without the use of the template, or if you find that there is a document on your system that will provide this information and would be less time consuming for yourselves I am happy to receive this in any other electronic document format. What I don't want are members of staff having to manually type in the information for question 6 if this is the case I would rather you provide the information for question 6a.

Please use the attached spread sheet to answer questions 5 and 6.

- 1) Does your NHS Trust have pathology departments or labs within your organisation? If yes please proceed to Question 3, if no proceed to question 2.
- 2) Do you use the services of an external provider to perform your Pathology testing? If yes proceed to question 3.

If you have answered no to both question 1 and 2 please email back the email and attachment.

- 3) Can you provide me with a Pathology departmental breakdown of structure within your Trust?

**Blood Sciences- chemistry, haematology and immunology**

**Microbiology-including virology**

**Histology including mortuary and andrology**

- 4) The amount spent on Locum Biomedical Scientist in the financial year April 2011-March 2012 and the financial year April 2012 to March 2013?

**Costs for Biomedical Scientists are as follows**

**11/12 = £77,024.96**

**12/13 = £77,398.52**

- 5) Within your pathology departments the total number of specimens booked in for the year 2011, 2012 and the last specimen number generated on the 30 April 2013. For ease of convenience please use the excel template attached to this email. As an example Clinical Chemistry 10,000, Mortuary 8000, Histology 5700 etc.

**This information is withheld under section 43 Commercial Interests.**

- 6) Within these Pathology Disciplines can you provide :

- a) A list of all Pathological diagnostic tests performed including Antibodies used for Immunohistochemistry or Immunology?
- b) If these tests are performed in-house or sent to an external NHS Trust or a Private provider?
- c) The average turnaround times for the tests for the calendar year 2011, 2012 and your envisaged average turnaround time for 2013?
- d) The number of tests performed including controls for the calendar year 2011, 2012 and the number of tests performed up to 30 April 2013?
- e) The cost per test (this is usually the cost including fixed, variable and labour cost) for the year 2011, 2012 and 2013?
- f) The cost per test taking into account only your cost of consumables and no other cost for the year 2011, 2012 and 2013?

(For questions 6e and 6f I'm happy for you to use calendar or financial year)

**This information is withheld under section 43 Commercial Interests.**

- 7) Is the ordering for your pathology disciplines under a managed service contract, or is the ordering ad-hoc (as and when the need arises) or both?

**The department has a Managed Service Contract for the supply of Blood Sciences which is provided with our partner ROCHE DIAGNOSTICS. This contract expires in March 2018.**

**Each department uses a variety of ad hoc ordering and also some annual contracts for pathology consumables such as blocks and slides, microbiology plates.**

- 8) For your procurement/ordering needs do you use an in house built or third party consumable ordering software? Is this the same software used in the Pathology department and the Procurement department? If third party software please state.

**The laboratory use e-series which is procurement software applied across the organisation. This is a third party provided software.**

9) Do you use any software that monitors your inventory for consumables and reagents usage and provides analytics on purchasing, usage, wastage etc? If yes please state.

**This is provided as part of the Roche solution within Blood Sciences.**

10) Do you use any Electronic Quality Management Software (eQMS) within your laboratories? If yes please state.

**Use Genial Genetics i-passport for our QMS**

11) Does your eQMS have an incident reporting functionality if so is this the same software used throughout your trust for incident reporting?

a. **Yes on i-passport**

b. **No. The Trust utilise the Safeguard incident reporting system**

12) Do you use any form of data analytical software within your laboratories? If so please state.

a. **Cyres**

b. **Raid**

13) Do you use any cloud based software within your laboratories? If yes please state.

a. **No**

14) When you receive and use a consumable or reagent what information is stored about the product e.g. date when the reagent was first used, date when reagent finished use, expiry date, batch number, lot number, data sheets and COSHH etc?

**Depends on the consumable or reagent, but for specific items all of the information as detailed would be collected i.e antibodies, analyser reagents. With regard to consumables, this varies, but we would not identify when a box of microscope slides was first used. Data sheets are kept for all items and are uploaded onto ipassport.**

15) Do you have any software that records the disposal of laboratory consumables due to human error, mechanical error, over ordering of laboratory supplies where the reagent has been disposed due to being out of date? If no what controls are in place to minimise the wastage of laboratory supplies?

**The laboratories operate stock control management to ensure consumables are ordered as and when required and are used in date order to avoid wastage. Ordering is monitored to keep on site stock at a minimum.**

16) Can you provide contact details of the members of staff that have compiled this information?

**Sharon Dicken  
Pathology Services Manager**

**087/13  
Consultants**

To ask, the size of population your trust covers and the number of people you treat annually.

**The Trust provides services to approximately 260,000 people from Walsall and the surrounding areas.**

|                    |              |                                    |
|--------------------|--------------|------------------------------------|
| <b>Inpatients:</b> | <b>31970</b> | <b>Non-elective episodes</b>       |
|                    | <b>4006</b>  | <b>Elective InPatient episodes</b> |

|                                  |               |                                  |
|----------------------------------|---------------|----------------------------------|
| <b>Outpatients:</b>              | <b>23599</b>  | <b>Elective Daycase episodes</b> |
|                                  | <b>72912</b>  | <b>New appointments</b>          |
|                                  | <b>174853</b> | <b>Follow up appointments</b>    |
| <b>Accident &amp; Emergency:</b> | <b>81339</b>  | <b>Attendances</b>               |
| <b>Total:</b>                    | <b>388679</b> |                                  |

Note- This does not account for patients utilising more than one access route to the trust, or for patients attending more than once.  
(Source- Trust Board report 2012-2013)

-To ask, the number of consultants you employ;  
**We currently employ 160 Consultants**

-To ask, the number of consultants who were on duty, working three hours or more on trust premises, on Tuesday June 11 2013? The number of consultants who were on duty, working three hours or more on trust premises on Saturday June 15 2013? The number of consultants who were on duty, working three hours or more on trust premises, on Sunday June 16 2013?

| <b>SPECIALTY</b>           | <b>TUESDAY 11 JUNE</b> | <b>SATURDAY 15 JUNE</b> | <b>SUNDAY 16 JUNE</b> |
|----------------------------|------------------------|-------------------------|-----------------------|
| Accident & Emergency       | 6                      | 2                       | 2                     |
| Acute Medicine Unit        | 6                      | 2                       | 2                     |
| Anaesthetics               | 13                     | 4                       | 4                     |
| Cardiology                 | 4                      | 1                       | 1                     |
| Diabetes                   | 1                      | 1                       | 1                     |
| Elderly Care/Stroke        | 5                      | 1                       | 1                     |
| ENT                        | 3                      | 0 (Non-Resident)        | 0 (Non-Resident)      |
| Gastroenterology           | 6                      | 1                       | 1                     |
| General Surgery            | 12                     | 1                       | 1                     |
| GU Medicine                | 1                      | 0 (Non-Resident)        | 0 (Non-Resident)      |
| Obstetrics & Gynaecology   | 11                     | 1                       | 1                     |
| Ophthalmology/Oral Surgery | 7                      | 0 (Non-Resident)        | 0 (Non-Resident)      |
| Paediatrics/Neonates       | 9                      | 2                       | 2                     |
| Palliative care            | 3                      | 0 (Non-Resident)        | 0 (Non-Resident)      |
| Pathology                  | 9                      | 0 (Non-Resident)        | 0 (Non-Resident)      |
| Radiology                  | 6                      | 0 (Non-Resident)        | 0 (Non-Resident)      |
| Respiratory                | 3                      | 1                       | 1                     |
| Rheumatology               | 2                      | 0 (Non-Resident)        | 0 (Non-Resident)      |
| Trauma & Orthopaedics      | 7                      | 0 (Non-Resident)        | 0 (Non-Resident)      |
| <b>TOTALS</b>              | <b>114</b>             | <b>17</b>               | <b>17</b>             |

In each case if possible would you provide the speciality in which the consultant works, and specifically whether they work in accident and emergency.

**Please see table above**

Can I also ask the proportion of consultants out of the total number you employ who you would typically expect to work during a week-day, taking into account shift rosters, holidays and sickness.

**Assuming average of 2 off per specialty per week - approx 71.5%**

Can I also ask the proportion of consultants out of the total number you employ who you would typically expect to work during Saturday, taking into account shift rosters, holidays and sickness leave. Can I also ask the proportion of consultants out of the total number you employ who you would typically expect to work during Sunday, taking into account shift rosters, holidays and sickness leave.

**Approximately 10%**

| <b>ICT &amp; Telecommunications:</b>   |   |
|--|---|
| <b>Current Fixed Line Provider- Supplier's name</b>  | <b>BT &amp; Virgin Media Business</b>                           |
| <b>Fixed Line Renewal Date- please provide day, month and year (month and year is also acceptable). If this is a rolling contract please provide me with the rolling date of the contract.</b>   | <b>Depends on site - Various dates. We have over 70 sites</b>   |
| <b>Fixed Line- Duration</b>  | <b>Various ranging from 12-36 months</b>                        |
| <b>Number of Lines</b>   | <b>400 channels/lines</b>                                       |
| <b>Minutes Provider- Supplier's name</b>   | <b>BT &amp; Virgin Media</b>                                    |
| <b>Minutes Renewal Date- please provide day, month and year (month and year is also acceptable). If this is a rolling contract please provide me with the rolling date of the contract.</b>  | <b>Various ranging from 12-36 months</b>                        |
| <b>Minutes Monthly Spend- Monthly average spend</b>  | <b>Unable to obtain this information</b>                        |
| <b>Minute's Duration: the contract duration and not the actual minutes</b>   | <b>Unable to obtain this information</b>                        |
| <b>Number of Extensions</b>  | <b>1400 including GP sites</b>                                  |
| <b>Fixed Broadband Provider- Supplier's name</b>   | <b>NHS N3</b>   |
| <b>Fixed Broadband Renewal Date- please provide day, month and year (month and year is also acceptable). If this is a rolling contract please provide me with the rolling date of the contract.</b>  | <b>Aug-15</b>   |
| <b>Fixed Broadband Annual Spend- Annual average spend</b>  | <b>10k</b>  |
| <b>VOIP/PBX Installation Date: - please provide day, month and year (month and year is also acceptable).</b>   | <b>Various dates - end dates ongoing to be reviewed in 2014</b> |
| <b>Renewal Date on any leased Telephony systems - please provide day, month and year (month and year is also acceptable). If this is a rolling contract please provide me with the rolling date of the contract.</b>   | <b>No leased systems</b>  |
| <b>Lease Provider- Supplier's name.</b>  | <b>N/A</b>  |
| <b>WAN Provider- please provide me with the main supplier(s)</b>   | <b>NHS N3</b>   |
| <b>WAN Renewal Date- please provide day, month and year (month and year is also acceptable). If this is a rolling contract please provide me with the rolling date of the contract.</b>  | <b>Dec-13</b>   |
| <b>WAN Annual Spend- Annual average spend</b>  | <b>Circa £300k</b>  |
| <b>If your organisation has a managed services contract which includes all or two out of three of the services stated above please state which of these is included with the contract. It would also be for me to if there are any other service support areas that are included within these contracts.</b> |   |

|   |  |
|---|--|
| <b>Managed Service Contract</b>   |  |
| <b>Contract Title</b>   | <b>N3 COIN</b>                             |
| <b>Supplier's Name</b>  | <b>N3</b>                                  |
| <b>Services Included</b>  | <b>Managed core network and edge links</b> |
| <b>Total Contract Value</b>   | <b>£1.5m</b>                               |
| <b>Duration</b>   | <b>5 yrs</b>                               |
| <b>Expiry Date- please provide day, month and year (month and year is also acceptable)</b>  | <b>Dec 2013</b>                            |
| <b>Review Date- please provide day, month and year (month and year is also acceptable)</b>  | <b>Nov 12</b>                              |
| <b>Internal Contact: please can you send me there full contact details including contact number and email and job title. –</b><br>Director of Informatics<br><a href="mailto:Steve.darkes@walsallhealthcare.nhs.uk">Steve.darkes@walsallhealthcare.nhs.uk</a><br>01922 721172 |  |

