

FREEDOM OF INFORMATION

Disclosure Log – Quarter 4 (January -March 2019)

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593.18	February	Safe Aseptic Practice
594.18	February	Paediatric Allergy Services Survey

595.18	February	Total spend on graduated compression hosiery in 2017
596.18	February	Free Promotional Nappies
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603.18	February	Use of Synacthen 250mcg/1ml
604.18	February	Volunteers
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606.18	February	EU Nationals and Non-EU foreigners working for Walsall Healthcare NHS Trust
607.18	February	Special measures scheme
608.18	February	Details of decision makers for IT/Telecoms purchases.
609.18	February	How many patients treated for deep vein thrombosis and pulmonary embolism (blood clots)
610.18	February	Colonoscopies
611.18	February	Bowel Cleansers
612.18	February	Cybersecurity
613.18	February	Anaesthetic Agents
614.18	February	weapon enabled assault / assault
615.18	February	Diabetes Specialist Nurses
616.18	February	Psychotherapists and counsellors
617.18	February	Overseas patients medical Bills
618.18	February	Negligence claims for deep vein thrombosis and pulmonary embolism
619.18	February	A&E Agency Doctors
620.18	February	Breast surgery compensation claims
621.18	February	A&E shifts
622.18	February	Waste disposal costs
623.18	February	Biosimilar biologic therapies
624.18	February	Bowel Management Patient Safety Alert (SPINE 01/19)
625.18	February	LIMS
626.18	February	Personal health record/ PHR/ shared record/ patient portal
627.18	February	Study of Best Practice in Fall Prevention and Management in In-patient Acute Hospitals and Intra-hospital Transfer Policies
628.18	February	Anaesthetic consultant
629.18	February	CAUTI
630.18	February	Infant Formula
631.18	February	Child admission uncertain medical status
632.18	February	Medicines shortage cost
633.18	March	ECG monitoring
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638.18	March	CAUTI (Withdrawn)
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642.18	March	Computer Assisted Facilities Management system
643.18	March	Losses and special payments
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645.18	March	Mental Health & Wellbeing Digital App
646.18	March	Remote patient monitoring system
647.18	March	FOI requests that relate to either rheumatoid arthritis or severe asthma
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649.18	March	Patient falls in and NHS hospital setting
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653.18	March	Process Automation and PEPPOL
654.18	March	Use of staff banks
655.18	March	Violence and abuse against NHS staff
656.18	March	Deaths of patients with a learning disability
657.18	March	Migrant upfront charging
658.18	March	NHS staff assaults
659.18	March	Audiology
660.18	March	Information
661.18	March	Numbers of patients which were treated/assigned the following procedures/codes
662.18	March	Direct Engagement for Locum Staff
663.18	March	Arrangements for Trust Bank and Agency Locums
664.18	March	Vyxeos
666.18	March	Treated with defined drugs
667.18	March	Lost/Stolen controlled drugs
668.18	March	Electronic Medical Record System
669.18	March	Allegations against staff
670.18	March	Spend on Edgumbe Health

498.18

I.T Structure

I was recently reading an article published by NHS Digital regarding the interoperability of electronic patient record systems which left me wondering whether the structure of the IT Department of an NHS Trust might have an effect on the success of the EPR system implemented.

If you could please take a few moments to answer the questions as attached in the EXCEL File that would be greatly appreciated.

Answer:

<u>Position</u>	<u>Name</u>	<u>Full-Time (Yes/No)</u>
IT Director/Head of IT	Daren Fradgley	Yes
Chief Nursing Informatics Officer	N/A	No
Chief Clinical Information Officer	Mr Muhammed Javed	Yes
Chief Information Officer	N/A	No

Chief Technology Officer/Advisor	Mark Taylor	Yes
Chief Digital Officer	N/A	No

	# Total	# Full-Time
Other people in IT departments	33	33

499.18
Mortuary fridges purchased by the trust

Dear Freedom of Information officer,

Please could you disclose whether the hospital has had to purchase oversized mortuary fridges to better accommodate obese bodies since January 1 2014.

Answer: Yes

If possible, please could you state the number of such fridges bought and installed for each calendar year: 2014, 2015, 2016, 2017 and 2018 until the date of this request, please?

Answer:

- 2014 x0**
- 2015 x0**
- 2016 x0**
- 2017 x1**
- 2018 x6**
- 2019 x3**

Lastly, please could you detail if you have taken any other moves to accommodate larger bodies in the hospital mortuary.

Answer: There were 4 semi-bariatric space installed and another 4 in 2019

500.18
Staff Investigations for Sexual Assault

Dear FOI team and HR leads,

I am writing to request the following information under the Freedom of Information Act 2000.

Over the last 3 years how many HR cases/investigations have you had involving matters of sexual assault/ sexual nature and how many of these matters resulted in police involvement?

Answer: We have used a number range between 1-5 due to the low numbers of individuals involved.

	April 2016 to March 2017	April 2017 to March 2018	April 2018 to current date
Number of cases/investigations	1-5	1-5	1-5
Number resulting in police involvement	0	1-5	1-5

501.18

Staff mental health/counselling service

Overview: I would like to find out if the number of hospital staff accessing the trust's staff mental health/counselling service is increasing, and why.

Please note: Please just answer questions one, two and three if the statutory time limit is reached after question three.

1. Does the hospital trust have a staff support and counselling service? If yes, what is it called? e.g. the Staff Support and Counselling Service

Answer: Staff Wellbeing Support

Please clarify whether the service is specifically for staff wanting support with work related issues, or whether staff can access the service for any personal issues unrelated to work.

Answer: Personal issues only are not necessarily excluded from our support but employees may be directed to their own GP if, after full clinical assessment, it is felt that alternative or longer term support may be more appropriate to meet the needs of the individual .

Please confirm what is provided, e.g. six free counselling sessions

Answer: Following a clinical assessment to determine the best type of support for the staff member, they are offered either individual support or group sessions. A normal course would usually be 6-8 sessions, exceptionally more sessions are offered

2. How many staff members used the service in 2016, 2017 and 2018?
Please give a total for each year, so, for example, 100 in 2016, 100 in 2017 and 100 in 2018.

Answer: 2016 – 194
2017- 286
2018 - 288

If the trust manages more than one hospital, please confirm if the figures provided are for all hospitals.

Answer: N/A

3. Please confirm if you record the overall reasons why staff are accessing the service; e.g. you may have headings like, 'personal stressors (including anxiety/depression)' and 'work related stressors (including anxiety and depression)', etc.

Answer: Stress (home); Stress (work) and Stress (work/home)

4. If time allows, please give a breakdown of the reasons staff are accessing the service, e.g. 2018, 40%/40 people for personal stressors and 60%/60 people for work related stressors.

Answer: This information is not recorded

502.18

Menatal Health Investigation

I am requesting the below Information under the FOI act:

- Number of serious incidents involving ligature points, occurring within the trust grounds, in the following years; 2018-19 (to date) 2017-18, 2016-17, 2015-16
- Number of patient deaths involving ligature points, occurring within the trust grounds, in the following years; 2018-19 (to date) 2017-18, 2016-17, 2015-16
- Of the serious incidents listed above how many of the patients involved were under 18?
- Of the patient deaths listed above how many of the patients involved were under 18?
- How much has the trust spent on specific programmes to tackle ligatures points in each of the following years; 2018-19 (to date) 2017-18, 2016-17, 2015-16

Answer:.

Event Number	Directorate	Date to SFS	Costs
307899	West Wing A&E	17 December 2018	£ 968.73
277126	West Wind Ward 9	22 March 2018	£ 1,634.34

252846	West Wing Ward 5&6	16 June 2017	£	7,375.50
249676	West Wing Ward 5&6	14 June 2017	£	459.36
215427	Ward 21	08 July 2016	£	3,235.10
194727	Ward 5&6 / Ward 29	15 December 2015	£	7,161.00
194725	Ward 21 / Ward 4 / PAU	15 December 2015	£	9,240.00
194724	Ward 17	15 December 2015	£	6,336.00
194723	Wards 1 & 2	15 December 2015	£	6,996.00
			£	43,406.03

503.18

Cost of covering staff Settled Status application

I would like to make a request under the Freedom of Information Act.

1. Is your NHS Trust offering to cover the cost of application fees for staff who apply for Settled Status?
2. Is your NHS Trust also offering to cover the costs of Settled Status applications for the families of members of staff?
3. What is the current estimate for the total cost to the NHS Trust for covering Settled Status application fees?
4. What is the total amount that the NHS Trust has budgeted to cover Settled Status application fees?

Answer: The Prime minister has confirmed that they have scrapped the EU settlement fee so no longer affects the trust.

504.18

Pelvic Organ Prolapse

I am writing to request information related to pelvic organ prolapse statistics held by Walsall Healthcare NHS Trust under the above mentioned Act. In terms of pelvic organs, I refer to the pelvic organs such as the bladder, uterus, vagina, bowel, and rectum. I would like you to provide me with the following information:

- 1 The total figure for Walsall Healthcare NHS Trust spending on treatment for pelvic organ prolapse for the last available fiscal year.

Answer: £288,308.00

2 The number of males and females that were admitted to hospitals under Walsall Healthcare NHS Trust as a result of pelvic organ prolapse between 01 April 2017 and 01 April 2018.

Answer: For 17/18 we had 184 admissions (150 Female,34 Male) where the condition was a primary diagnosis.

3 The total number of pelvic organ prolapse surgeries that were performed between 01 April 2017 and 01 April 2018.

Answer: Total 168 (135 Female 33 male)

4 The total number of patients who were recommended pelvic floor muscle training as treatment for their pelvic organ prolapse between 01 April 2017 and 01 April 2018.

Answer: This information is not recored on our systems

5 How many hysterectomies were performed under the Walsall Healthcare NHS Trust between 01 April 2017 and 01 April 2018? Please could you also provide the top 5 causes of these hysterectomies and their contributing percentage to the total figure.

Answer:

Primary Diagnosis	Admissions	% of total
Leiomyoma of uterus, unspecified	30	23.81%
Excessive and frequent menstruation with regular cycle	21	16.67%
Malignant neoplasm: Endometrium	19	15.08%
Endometriosis, unspecified	9	7.14%
Other and unspecified ovarian cysts	6	4.76%

Please provide the information for male and female statistics separately. If the data is not available between 2017-2018, please provide data for the next available year.

**505.18
Social Engineering**

I am writing to make an open government request for all the information to which I am entitled under the Freedom of Information Act 2000.

Some of this request will be able to dealt with by either your information governance or / and IT department. Please send me:

1. Does the organisation have training that covers:
 1. Recognising and reporting Phishing emails
 2. Recognising Tailgating and how to respond (challenging strangers, checking for ID etc) –
 3. Disposal of confidential information -
 4. Dangers of using USB sticks being given away or finding one that looks like it has been dropped

Answer: National training on Data Security & Protection Awareness is covered through mandatory training annually

2. Does the organisation allow the use of USB sticks?

Answer: Encrypted only

3. Does the organisation deliver specialised training to key staff (those staff that could be targeted as part of a phishing email campaign, ie finance, execs etc

Answer: No

4. Does the organisation perform confidentiality audits as per the Data Security & Protection Toolkit?

Answer: Yes

Can you also answer relating to the audits:

1. Where the audits are undertaken would these be organised with the local team manager or the head of department ie the director etc?

Answer: Audits are carried out unannounced

2. Would an audit ever be carried out unannounced?

Answer: Yes

3. Do you have a policy / procedure of how to conduct the audit? – if so can you supply a copy.

Answer: Please see IG proforma attached

4. Do you record the results on a checklist / report and return the key contact? – if so can you supply a blank copy.

Answer: No. IG proforma used to provide results or recommendations

5. Does the organisation have confidential waste receptacles placed through the entire organisation and are they regularly emptied?

Answer: Yes

6. Does the organisations Exec board receive board level training relating to Cyber Awareness?

Answer: From March 2019

7. How does the organisation provide Data Security & Protection Training to staff, does the organisation use (please select all the options that are applicable):

a. Third party application package	<input type="checkbox"/>
b. Third party Trainer / class room	<input type="checkbox"/>
c. eLearning for Health Data Security Awareness	x
d. In house developed package	<input type="checkbox"/>
e. Combination of any of the above	<input type="checkbox"/>

I would like the above information to be provided to me as electronic copies.

506.18

Employee/personnel records

I am writing to make an open government request for all the information to which I am entitled under the Freedom of Information Act 2000.

1. Please can you describe how and where you store your employee/personnel records relating to the following topics:

- Recruitment
- Learning & development
- Annual appraisals and routine performance reviews
- Employee case management including disciplinary and grievance issues

2. Please provide details of any technology used to store employee/personnel records.

Answer: Several elements of employee/personnel records are held on the Electronic Staff Records system. ESR offers the provision of an integrated hire to retire workforce management solution for NHS Organisations. ESR is a business critical system; not only facilitating payroll for all NHS employees but also offering a wide range of other important workforce management tools. Recruitment, Learning & development and Annual Appraisal information is held on ESR.

Disciplinary and grievance issues: All casework when completed is scanned in electronically and also kept in a locked cabinet in Learning and Development Centre until shredded

507.18

Audited Accounts (Annual Accounts)

Please send me a copy of the audited accounts for the year 2017-2018.

Answer: Exemption under Section 22 (Information Intended for Future Publication) has been applied to this request.

Please note that our 2018/19 Annual Report is due to be published on our Trust website by the end of July 2019 and will be accessible via the following link.

<https://www.walsallhealthcare.nhs.uk/our-publications.aspx>

Please send me the names and full addresses of all NHS hospitals in the West Midlands region.

Answer: Exemption under Section 21 (Information available by other means) has been applied to this part of your request. This information can be found via the internet, Google etc.

Please let me know hospital fees for a male circumcision operation and the names of the consultant and their outpatient fees

Answer: We hereby issue a refusal notice under Section 14 exemption (Repeat Request).

508.18

Maternity

This is a request under the Freedom of Information Act.

I would like to request a copy of the answers to the questions in the document attached be provided to me.

To help determine my status to assess fees, you should know that I am a research assistant at Nottingham Trent University working alongside Dr. Kate Ellis-Davies and Dr. Rebecca Stack. I am affiliated with an educational institution, and this request is made for a scholarly and scientific purpose and not for a commercial use.

For questions where we are requesting data over several years, if you do not have the data for some years please still provide the information for the years where you have data.

If you estimate that the fees will exceed the time or monetary expenses allowed for a Freedom of Information request, please inform me first.

I would prefer to receive the information requested electronically.

I understand that under the act I am entitled to a response within 20 days, however I do also understand that some questions may be easier to answer than others. Should this be the case, please may I request that information be released to me as soon as possible.

Please can I also request that if any clarification is required that I am contacted under the section 16 duty to provide assistance if you find any aspect of this request problematic.

Answer: Please see attached questionnaire and handouts. Available upon request.

509.18

Infected Blood Inquiry Corr and Steps

This is a Freedom of Information request. I am requesting the following:

- a) Copies of all correspondence to/from the Infected Blood Inquiry during the period 1st April 2018 to 7th January 2019.

Answer: We have not received or sent any correspondence in relation to the “Infected Blood Inquiry”

- b) Please advise whether or not you have received any notice or instruction regarding the retention and/or request of documents relevant to the Infected Blood Inquiry?

Answer: We have not received any notice or instruction regarding the retention and/or request of documents relevant to the “Infected Blood Inquiry”

- c) If a request for documentation and/or its retention has been received from the Infected Blood Inquiry, please supply a copy of any such notices or requests.

Answer: No requests have been received

510.18

1988 - 1991 Factor Files

I am writing to request under the freedom of information act any/all copies of administrative correspondence, letters and/or any other documentation including minutes of meetings etc that mention or relate to:

HIV / AIDS or Hepatitis, AND, Haemophilia / Haemophiliacs during the period January 1st 1988 – December 31st 1991.

Please note that I am NOT requesting patient medical records which would obviously be exempt, but administrative correspondence, letters and/or any other documentation including minutes of meetings etc.

Answer: We have applied exemption 12; cost of compliance exceeds the appropriate limit for supply of Letters, documentation and minutes of meetings. Due to having to manually sort through thousand's or archived paper documents.

511.18

Digital discharge summaries

I am emailing with a Freedom of Information request, regarding discharge summaries. My query is:

1) How many digital discharge summaries from 1st November 2017 to 1st November 2018 included any of the following terms

- GHB
- GBL
- gamma-hydroxybutyrate
- gamma-Hydroxybutyric acid
- 4-hydroxybutanoic acid
- 1,4-butanediol
- 1,4-BD

Answer: 2 records that mention GBL in the general comments

512.18

Physical assaults on staff

Under the Freedom of Information Act, please could you provide me with the following information (most likely as reported through the Security Incident Reporting System (SIRS)):

- The total number of physical assaults on staff recorded in 2016/17 (financial year from April 2016 to March 2017) and in 2017/18 (financial year from April 2017 to March 2018)

Answer: Please see attached

- The total number of physical assaults on staff recorded that involved medical factors in 2016/17 and in 2017/18

Answer: This information is not recorded

- The total number of times physical injury was caused in 2016/17 and in 2017/18

Answer: This information is not recorded

- The total number of times was restraint used following a physical assault in 2016/17 and in 2017/18

Answer: The Trust only started recording incidents in 2017 & 18 and have 14 incidents of restraint recorded

- The total number of times was seclusion used following a physical assault in 2016/17 and in 2017/18

Answer: This information is not recorded

- Total number of criminal sanctions applied in relation to physical assaults in 2016/17 and 2017/18

Answer: Please see attached

- Total number of civil and administrative sanctions applied in relation to physical assaults in 2016/17 and 2017/18 –

Answer: This information is not recorded

- The total number of times intended police action in relation to physical assaults was recorded as charge in 2016/17 and 2017/18

Answer: This information is not recorded

- The total number of times intended police action in relation to physical assaults was recorded as verbal warning in 2016/17 and 2017/18

Answer: This information is not recorded

- The total number of times intended police action in relation to physical assaults was recorded as no action in 2016/17 and 2017/18

Answer: Please see attached

- The total number of times it was recorded that the victim did not want police to pursue the matter in relation to physical assaults in 2016/17 and 2017/18 –

Answer: Zero

Attachments available upon request

513.18

Specialist Skin MDT

Formal request for information under the Freedom for Information Act 2000.

First, a Happy New Year to everyone in the Trust!

Please find attached a simple FOI request concerning the membership of Specialist Skin MDTs.

Answer: The does not host a specialist skin MDT. We refer to Sandwell SMDT

514.18

Prescriptions for Ketamin or Fentanyl to under 18's

Please may I be provided with the following information:

- 1- How many prescriptions were given out to patients under the age of 18 for Ketamin or Fentanyl in 2018?

Answer: 0

- 2- How many prescriptions were given out to patients under the age of 18 for Ketamin or Fentanyl in 2017?

Answer: 0

- 3- How many prescriptions were given out to patients under the age of 18 for Ketamin or Fentanyl in 2016?

Answer: 0

- 4- If these drugs are not prescribed please could I have the details for the number of children administered with the drugs by hospital staff in the years; 2018, 2017, 2016.

Answer: We have applied exemption 12; cost of compliance exceeds the appropriate limit. This information is not reasonably available as it would entail looking at each prescription or treatment chart individually to find fentanyl/ketamine being prescribed. The drugs are supplied to the wards as stock, so there is no electronic record of who it is supplied to.

515.18

EU settlement scheme fee

I would like to request the following information under the Freedom of Information Act:

- Are you intending to cover the cost of the EU settlement scheme fee for your employees affected by Brexit?
- How many EU national employees do you estimate have applied or will need to apply under the scheme?
- If you are covering their fees, what is your estimate for how much in total the cost is to you?

Answer: The Prime minister has confirmed that they have scrapped the EU settlement fee so no longer affects the trust.

516.18
Theatres

I am emailing with a Freedom of Information request, regarding: *as of current date, please could you answer the below questions*

Answer:

Questions	Comments
How many theatres do you have	14
Are they centrally located	No – 10 are, the remaining 4 are not.
What type of inventory management system do you have?	We have a number of inventory systems.
If you do not use an electronic system, how do you manage your stores	NHS Top up System Electronic Ordering system
How long have you had this system	2009
Have you had a previous system in place, if so what?	No
What staff resource do you have in place for your system/stores	Stores Operatives
Are you GS1 Compliant	Yes
What are you expecting from your system	Top up ordering system.

517.18
Genitals

I would like this information broken down ANNUALLY for the years 2014, 2015, 2016, 2017 and 2018.

- 1) How many hymen replacement operations were carried out females aged 18 and under. Please break this down by annual year and if possible state the age, religion and ethnicity of the patients.

Answer: None.

- 2) How many females aged 18 and under have had labiaplasty operations or any other procedures that enhance/improve/ alter the appearance of their genitals. This should include any region surrounding the woman's labia and vagina. Please break this down by annual year and if possible state the age, religion and ethnicity of the patients.

Answer: None.

- 3) How many males aged 18 and under have had operations to improve/ enhance/ alter the appearance of their penis/ genitals and/or the area surrounding them. Please break this down by annual year and if possible state the age, religion and ethnicity of the patients.

Answer: None

518.18

Software applications

This is an email to request information under the FOI Act.

I want to apologise in advance for the length of this request but can you please read all the information within the request this is an urgent request so if you could please provide me with the information before the 20 working days this will be greatly appreciated.

I require the organisation's to provide me with the following contract information relating to the following corporate software/enterprise applications:

1. Enterprise Resource Planning Software Solution (ERP) -this is the organisation's main

ERP system and may include service support, maintenance and upgrades.

2. Primary Customer Relationship Management (CRM) Solution-this is the organisation's main

CRM system and may include service support, maintenance and upgrades.
Example of CRM systems the organisation may use could include Microsoft Dynamics, Front Office, Lagan CRM, Firmstep

3. Primary Human Resources (HR) and Payroll Software Solution-this is the organisation's main

HR/payroll system and may include service support, maintenance and upgrades. In some cases the HR contract maybe separate to the payroll contract please provide both types of contracts. Example of HR/Payroll systems the organisation may use could include iTrent, Resourcelink.

4. The organisation's primary corporate Finance Software Solution-this is the organisation's main

Finance system and may include service support, maintenance and upgrades. Example of finance systems the organisation may use could include E-Business suite, Agresso (Unit4), eFinancials, Integra, SAP

In some cases you may come across contracts that provides service support maintenance and upgrades separate to the main software contract, please also provide this information in the response following the requested data below.

For each of the categories above can you please provide me with the relevant contract information listed below:

1. Software Category: ERP, CRM, HR, Payroll, Finance

2. Name of Supplier: Can you please provide me with the software provider for each contract?

3. The brand of the software: Can you please provide me with the actual name of the software. Please do not provide me with the supplier name again please provide me with the actual software name.

4. Description of the contract: Please do not just state two to three words can you please provide me detail information about this contract and please state if upgrade, maintenance and support is included.

Please also include any modules included within the contract as this will support the categories you have selected in question 1.

5. Number of Users/Licenses: What is the total number of user/licenses for this contract?

6. Annual Spend: What is the annual average spend for each contract?

7. Contract Duration: What is the duration of the contract please include any available extensions within the contract.

8. Contract Start Date: What is the start date of this contract? Please include month and year of the contract. DD-MM-YY or MM-YY.

9. Contract Expiry: What is the expiry date of this contract?
Please include month and year of the contract. DD-MM-YY or MM-YY.

10. Contract Review Date: What is the review date of this contract?
Please include month and year of the contract. If this cannot be provide please provide me estimates of when the contract is likely to be reviewed. DD-MM-YY or MM-YY.

11. Contact Details: I require the full contact details of the person within the organisation responsible for this particular software contract (name, job title, email, contact number).

Answer: Please see attached. Available upon request

519.18 Spider Bites

I'm looking for information on spider bites, and I ask for the following information.

- 1- How many patients have you treated for suspected and/or diagnosed spider bites in the last five years?

Answer: 65

- 2- Can I please have a yearly breakdown on those figures for 2014, 2015, 2016, 2017, and 2018.

Answer: Please see attached spreadsheet. Available upon request

- 3- Can I please request a brief description of the treatment carried out, date of treatment, age and gender of the patient.

Answer: Please see attached spreadsheet. Available upon request

- 4- Where possible, can you indicated what type of spider was suspected of causing the bite?

Answer: This information is not recorded. The code used to gather the data was: Bitten or stung by nonvenomous insect and other nonvenomous arthropods unspecified place. W579- selecting on coding positions 01-03

520.18 Patients, Bed sores etc

I am writing to make an open request for all the information to which I am entitled under the Freedom of Information Act 2000.

Please send me:

1. The total number of patients cared for during 12 months between 01/11/2017 and 01/11/2018

Emergency **Answer: 32383**

Day Case **Answer: 25263**

Elective **Answer: 3307**

Grand Total **Answer: 60953**

2. Number of inpatients that developed bed sores, pressure sores or pressure ulcers for the twelve months between: 01/11/2017 and 01/11/2018

Answer: 189 pressure ulcers category 2 and above acquired whilst in hospital—see chart below

3. Total number of pressure sore incidents by grade, not number of patients, as some patients may develop more than one pressure ulcers between: 01/11/2017 and 01/11/2018

Grade 1

Grade 2

Grade 3

Grade 4

Necrotic

Answer: We record this as unstageable-See chart

Month	Hospital			
	Cat 2	Cat 3	Cat 4	Unstageable
Nov-17	7	1	0	4
Dec-17	10	1	0	0
Jan-18	9	1	0	5
Feb-18	12	1	0	4
Mar-18	16	0	0	4
Apr-18	19	2	0	6
May-18	15	1	0	3
Jun-18	16	0	0	3
Jul-18	12	1	0	5
Aug-18	4	0	0	4
Sep-18	10	0	0	3
Oct-18	5	1	1	3
total	135	9	1	44

Purple Discoloration

Answer:

Month	Hospital
	DTI
Nov-17	2
Dec-17	6
Jan-18	6
Feb-18	6
Mar-18	4
Apr-18	4
May-18	1
Jun-18	1
Jul-18	3
Aug-18	3
Sep-18	1
Oct-18	2
total	39

4. The proportion of these pressure sores that were new, and had therefore occurred since admission to hospital.

Answer: As question 2 See above

5. The number of patients admitted from residential or nursing homes with pressure sores.

Answer: This information is not recorded

6. The number of death certificates in this period on which pressure sores were mentioned.

Answer: Between 01/11/2017 and 01/11/2018 the information was recorded manually and not to this level of detail.

521.18 Asthma

1. In your trust, in the past 3 months [latest 3 months available], how many asthma patients aged 18 and over have been treated [with a drug]?

Answer: 1257, 102 were treated with asthma drugs.

2. How many paediatric asthma treated patients [aged 6-17] have been treated in the last 3 months?

Answer: 57 none were treated with asthma drugs.

3. How many severe asthmatic patients [BTS guidelines, step 4 or 5] have been treated in the last 3 months?

Answer: 8

4. How many patients have been treated in the last 3 months with:

Omalizumab [Xolair] **Answer: nil treated for asthma**

Mepolizumab [Nucala] **Answer: nil**

Reslizumab [Cinqaero] **Answer: nil**

Benralizumab [Fasenra] **Answer: nil**

Other [Please state] **Answer: See below**

Antihistamines

10

Antimuscarinic bronchodilators	9
Compound bronchodilator preparations	3
Corticosteroids	74
Leukotriene receptor antagonists	11
Selective beta2 agonists	32
Theophylline	6

4. How many paediatric patients have treated in the last 3 months with Xolair/omalizumab? –

Answer: nil

5. Could you please provide me with the following numbers of patients treated in the last 12 months [latest 12 months possible] with the following drugs ; Octreotide –

Answer: We can't identify many of the patients as many issues of Octreotide are to ward stocks, and these are not recorded electronically.

Lanreotide **Answer: nil**

Pasireotide **Answer: nil**

Pegvisomant **Answer: nil**

These figures are based on inpatient data only. No clinical coding is done for outpatients.

522.18

Supplier of Trocars

As part of the freedom of information act please could you provide the following information?

• Your current supplier of Trocars?

• Annual usage of Trocars in the following years: 2015-2016
2016-2017
2018 year to date.

• Annual spend for Trocars in the following years: 2015-2016
2016-2017
2018 year to date.

- Current contract details for Trocars?

Answer: Please see attached. Available upon request

523.18
Temporary Staff

To Whom It May Concern, I hope your well.

Please find attached the Freedom of Information questionnaire

Answer: Please see attached. Available upon request.

524.18
Overseas Visitors

I would be grateful if you could provide the following information to assist us in some benchmarking work on Overseas Visitors as outlined below:

- Income received for OSVs for 16/17, 17/18 and so far for 18/19

Answer:

FINANCIAL YEAR	16/17	17/18	18/19
INCOME	16,964.15	56,848.10	75,028.12

- Write offs in the same period as above

Answer: There were no write-offs during the accounting years to date.

- Does the Trust use the normal debt recovery systems for OSVs or do they use a separate process? –

Answer: The Trust chases the debts internally and refers to an external agency where unsuccessful.

- What is the structure of the OSV team –

Answer: There is no formal Overseas Visitor Team. The function sits within the responsibilities of Health Records Structure

525.18

Electronic prescribing and medicines administration

Please can you confirm the following pieces of information:

- Who is the Trust's current supplier for their Electronic prescribing and medicines administration?
- What is the contract start and end date for the Electronic prescribing and medicines administration?
- What is the annual cost for the Electronic prescribing and medicines administration?

Answer: The trust does not have an Electronic prescribing and medicines administration (EPMA) system.

526.18

NHS staff workplace injuries/staff compensation claims for slips/trips/stress/bullying

Please send me information on the number and nature of compensation claims brought against your organisation by members of staff who have sustained an injury or contracted a disease while employed your organisation since January 2016 to the present time (last 3 years).

I would like a year by year breakdown, preferably on an excel document via email, detailing:

- Details of the injury (i.e. moving and handling injury, slips/trips/falls and so on)
- Staff role if known (i.e. staff nurse, doctor)
- Whether compensation was paid
- The total amount of compensation paid
- If information available, any action taking following the incident (i.e. additional training, non-slip flooring and so on)

Please ensure your organisation's name is on the email reply.

Answer: Please see attached. Attachment available upon request. Action following the incident would be dealt with by the line manager in the workplace and therefore is not available.

527.18

Health Records

1. Please provide all strategies relating to health records (electronic or paper health records) at your Trust

Answer: The trust doesn't have one.

2. Please provide all policies relating to health records (electronic or paper health records) at your Trust

Answer:

- ***Patient Records Policy. Please see attached***
- ***Retention Policy. Please see attached***
- ***Subject Access Policy. Please see attached***
- ***Clinical Record Keeping Policy. Please see attached***

3. In relation to the implementation of EPR, Clinical EDMS at your Trust, please provide:
 - a. Implementation plans
 - b. Project plans
 - c. Project issue/risk logs

Answer: Currently out to market for new EPR

4. In relation to the transition from paper to digital health records at your Trust, please provide:
 - a. Any paper to digital transition plans
 - b. Benefit realisation documents

Answer: Business Case in development

5. In relation to paperless/paperlite outpatient consultations at your Trust, please provide:

- a. Policies
- b. Procedures
- c. Processes
- d. Guidance documents
- e. Process maps
- f. Process flowcharts
- g. Service standards/KPIs

Answer: *We don't have paperless/paperlite outpatient clinics*

6. In relation to the creation of health records for new patients in acute admission wards/emergency departments at your Trust, please provide:

- a. Policies – **Answer: *Patient Records Policy.***
- b. Procedures
- c. Processes – **Answer: *Emergency Admission SOP. Please see attached***
- d. Guidance documents
- e. Process maps
- f. Process flowcharts
- g. Service standards/KPIs

7. In relation to the provision and delivery of health records to clinical staff for existing/already known patients in acute admission wards/emergency departments at your Trust, please provide:

- a. Policies – **Answer: *Patient Records Policy***
- b. Procedures
- c. Processes – **Answer: *Pulling Patient Medical Records SOP. Please see attached***
- d. Guidance documents
- e. Process maps
- f. Process flowcharts
- g. Service standards/KPIs

8. In relation to the creation of health records for babies delivered at your Trust, please provide:
- a. Policies – **Answer: *Patient Records Policy***
 - b. Procedures
 - c. Processes
 - d. Guidance documents
 - e. Process maps
 - f. Process flowcharts
 - g. Service standards/KPIs
9. In relation to the management and prevention of loose clinical documentation/health records at your Trust, please provide:
- a. Policies – **Answer: *Patient Records Policy*.**
 - b. Procedures -
 - c. Processes – **Answer: *Profile Loose Filing SOP. Please see attached***
 - d. Guidance documents – **Answer: *Walk In Request Process. Please see attached***
 - e. Process maps
 - f. Process flowcharts
 - g. Service standards/KPIs
10. In relation to the management and prevention of missing or misplaced clinical documentation/health records at your Trust, please provide:
- a. Policies – **Answer *Patient Records Policy***
 - b. Procedures
 - c. Processes – **Answer: *Clinical Incident Reporting for Patient Records SOP; Missing Case Note Log SOP. Please see attached***
 - d. Guidance documents
 - e. Process maps
 - f. Process flowcharts
 - g. Service standards/KPIs

11. In relation to health records held within E-Referral Service/Choose & Book such as referral letters, how is this shared with, accessed through or manually copied onto your EPR/EDMS at your Trust, please provide: - Referral Letters are printed and filed in the patient record.

- a. Policies
- b. Procedures
- c. Processes
- d. Guidance documents
- e. Process maps
- f. Process flowcharts
- g. Service standards/KPIs

Answer: Choose and Book Referral Letters are not transferred on to the EPR. They are printed and filed in the patients record

12. In relation to the integration of community and acute health records at your Trust, please provide:

- a. Policies – **Patient Records Policy**
- b. Procedures
- c. Processes
- d. Guidance documents
- e. Process maps
- f. Process flowcharts
- g. Service standards/KPIs

13. In relation to the health record documentation sources defined for use by clinical coders at your Trust, please provide:

- a. Policies – **Answer: Clinical Coding Policy. Please see attached**

- b. Procedures
- c. Processes
- d. Guidance documents – ***Answer Clinical Coding Source Documents. Please see attached***
- e. Process maps
- f. Process flowcharts
- g. Service standards/KPIs

14. In relation to any health records management functions provided by non-NHS suppliers at your Trust, please provide:

- a. Policies – ***Patient Records Policy***
- b. Procedures
- c. Processes – ***Answer: Weeding SOP. Please see attached***
- d. Guidance documents
- e. Process maps
- f. Process flowcharts
- g. Service standards/KPIs – ***Answer: Iron Mountain THE Framework Access Referral. Please see attached***
- h. Any information demonstrating benefits attributable to these arrangements –

Answer: Iron Mountain Framework Access Referral. Please see attached

Attachments available upon request

528.18 Dermatology

I am writing to make an open government request for all the information to which I believe I am entitled under the Freedom of Information Act 2000.

Please send me the following information for your Trust:

1. The population covered.

Answer: 250,000, mostly suburban, multi-ethnic, socioeconomically deprived

2. The number of Consultant Dermatologists that you employ.

Answer: 4 (substantive)

3. The number of locum doctors working in dermatology

Answer: 2 (both part time)

4. The number of locum doctors working in dermatology who are not on the specialist register.

Answer: 1

5. The number of locum doctors working in dermatology who are not on the specialist register and are working in isolation (i.e. single-handed).

Answer: 0

6. If the Trust has dermatology services available for ward patients and emergency room (ER) on a daily basis.

Answer: Yes, Consultants are available to support ED and Wards, daily ward rounds of inpatient and inpatient referrals, consultant led with support from training Specialist Registrar.

7. The number of Consultant Dermatologists that undertake community clinics.

Answer: None at present

8. Do any Consultant Dermatologists employed by the Trust work wholly in the community?

Answer: No

529.18 locum spend and clinical streaming

Under the provision of the Freedom of Information Act 2000 please can you answer the following questions:

- 1a)** What was your total agency spend with locums in the last year?

Answer: £2,306k (Medical Agency 2017/18)

- 1b)** What was the percentage of vacant locum jobs that were filled in the last year?

Answer: This information is not recorded

2a) Do any of your trust's A&E departments have a clinical streaming service?

Answer: Yes

2b) If yes to **2a**, who is the provider of the clinical streaming?

Answer: Primecare

2c) If yes to **2a**, who is the Lead Responsible Officer (manager/person in charge) of the clinical streaming?

Answer: This is a commissioned service supplied by Walsall Clinical Commission Group

2d) If yes to **2a**, what are the contact details for the Lead Responsible Officer?

Answer: As above

530.18

Hymenorrhaphy operations

I am writing to you under the Freedom of Information Act 2000 to request the following information:

1. How many Hymenorrhaphy/ hymen restoration operations have been carried out on the NHS in the last four years?

Answer: The trust has not carried out at this procedure in the Time period selected based upon available clinical coding.

2. What are the ages of the oldest patient and the youngest patient to have had this surgery each year for the last four years?

Answer: N/A

3. How much has it cost the NHS to provide Hymenorrhaphy/ hymen restoration operations to patients?

Answer: N/A

4. How much does each surgery cost the NHS to perform?

Answer: N/A

Please provide information for the last four years (2015, 2016, 2017, 2018) in a yearly breakdown.

531.18

Status Assessments under chapter 10

The Off-payroll legislation was introduced in Chapter 10 of the Income Tax (Earnings and Pensions) Act 2003, with the new legislation going live from April 6th 2017. This new legislation overrode, in the public sector, the existing Intermediaries Legislation (Chapter 8, ITEPA).

The new legislation is here:

<https://www.legislation.gov.uk/ukpga/2017/10/schedule/1/part/2>

One of the key differences between the chapter 8 and chapter 10 is that the public authority is required to decide whether the off-payroll working rules (Chapter 10) apply based on whether the conditions have been met in section 61M(1)(d).

61M Engagements to which Chapter applies

(1) Sections 61N to 61R apply where—

(a) an individual (“the worker”) personally performs, or is under an obligation personally to perform, services for another person (“the client”), (b) the client is a public authority, (c) the services are provided not under a contract directly between the client and the worker but under arrangements involving a third party (“the intermediary”), and (d) the circumstances are such that— (i) if the services were provided under a contract directly between the client and the worker, the worker would be regarded for income tax purposes as an employee of the client or the holder of an office under the client, or (ii) the worker is an office-holder who holds that office under the client and the services relate to the office.

This requires the public authority to test whether the worker would be considered an employee based on employment status case law.

These assessments would have been completed by you with each assessment receiving its own determination.

Please can you provide:

A monthly breakdown, from April 2017 onwards of the number of assessments conducted by you, together with the number of assessments that are considered to be “inside IR35” (i.e. 61M(1)(d) applies) and the number that are “outside IR35” (i.e. 61M(1)(d) does not apply)

Answer: We do not have the detail to break it down by month since April 17.

Total Assessments	12
Inside IR35	5
Outside IR35	7

532.18

Letter re off-payroll from HMRC

The Off-payroll legislation was introduced in Chapter 10 of the Income Tax (Earnings and Pensions) Act 2003, with the new legislation going live from April 6th 2017. This new legislation overrode, in the public sector, the existing Intermediaries Legislation (Chapter 8, ITEPA).

The new legislation is here:

<https://www.legislation.gov.uk/ukpga/2017/10/schedule/1/part/2>

Around July 2018 HMRC sent your body a letter asking for information related to “Checking compliance with the rules from April 2017”

For easy identification, a copy of the letter is as follows:

-- Letter start --

Off Payroll Reform in the Public Sector

Section 61M Chapter 10 ITEPA 22003 and Regulation 13 Social Security (Miscellaneous Amendments No.) Regulations 2017

Following the introduction of chapter 10 ITEPA 2003 and certain amendments to chapter 8 ITEPA 2003 (“IR35”), new rules apply in relation to off-payroll working in the public sector from 6 April 2017. Where individuals work and are paid through their own intermediary, public authorities as defined in the legislation) are now responsible for deciding whether the rules apply. Where a person is assessed as being with the new rules, the public authority agencies and third parties paying the fee for the services of the worker must operate tax, NICs and operate the Apprenticeship Levy.

I would like to check your compliance with the new legislation, including any systems you have introduced to help you decide whether the off-payroll rules should apply when engaging workers via their own intermediary (either directly or via an agency or other labour provider). Such an intermediary will often be a ‘personal service company’, but as the legislation also applies where a worker is engaged via a partnership or another person, I will use the terms ‘PSC or other intermediary’ and ‘PSC etc’ in this letter.

I have listed the information we need below and would be grateful for your response by 31 August 2018. If the amount of information I have requested will make this difficult, please contact me to discuss how this can be managed.

Checking compliance with the rules from April 2017

1. Please describe the steps you took prior to April 2017:
 - i. to review the off-payroll engagement of PSCs or other intermediaries, to decide whether the off-payroll rules would apply
 - ii. please include an explanation of any different or additional steps taken in relation to PSCs etc that you engaged via an agency or other labour provider.
2. If different from 1 above, please describe the systems / processes currently in place to decide whether the off-payroll rules apply to PSCs etc, whether you engage them directly or via an agency or other labour provider. Please provide a copy of any internal guidance / operating procedures for your staff, and comment on:
 - i. who is responsible for carrying out the checks and approving decisions
 - ii. whether the Check Employment Status for Tax tool (CEST) is used to inform decisions as to whether the rules apply, and
 - iii. how you ensure compliance where the PSC is engaged via an agency or other labour provider.
3. For the tax year 2017/2018, if you directly engaged with and paid any worker’s own PSC or other intermediary, please tell us:
 - i. the total number of such PSCs etc that you engaged directly

- ii. the number of such PSCs etc that you decided were within the scope of the legislation
 - iii. if different from (ii), the number of such PSCs etc that have been subject to deduction of tax and NIC and included in an RTI submission
 - iv. the number of such PSCs etc that you decided were outside the scope of the legislation
 - v. the names, addresses and a brief description of the worker role / nature of services provided by the PSCs etc within (iv) above.
4. For the tax year 2017/18, if you were invoiced by any agency or other labour provider for services via a worker's own PSC or other intermediary, please provide the name of each such agency or other labour provider and, or each of them, please tell us:
- i. the total number of such PSCs etc supplied by that agency / labour provider
 - ii. the number of such PSCs etc that you decided were within the scope of the legislation
 - iii. whether you told the agency / labour provider that the rules applied for every PSC etc within (ii) above and if not, please explain why not)
 - iv. the number of such PSCs etc, that you decided were outside the scope of the legislation
 - v. the name, addresses and a brief description of the worker role / nature of services provided by the PSCs etc within iv) above.
5. Please identify any workers / PSCs etc that you decided were within the off-payroll rules, which have subsequently been engaged / paid via umbrella companies. Do you have any policy in place that encourages the use of umbrella companies for those found to be within the rules?
6. For those not working through umbrella companies, have any workers that previously worked through their own PSC etc subsequently entered into employment contracts with your group?
7. The offpayroll rules do not apply where a public authority has fully contracted out services to a third party e.g. an outsourcing company operating under a contract where the workers do not personally provide their services to the public authority. If you believe this applies to you, please provide an explanation for the affected contract(s).

More information about the check

I enclose factsheet CC/FS1c 'General information about compliance checks into certain large and complex businesses'. Please take time to read this, it gives you more information about this type of check. I also enclose factsheet CC/FS22 'Sending us electronic records'.

If you have any questions, please contact me using the details shown at the top of this letter.

-- Letter end --

Please can you provide:

- 1. Confirmation as to whether you received the letter

Answer: The Head of Finance & the interim Trust secretary have both confirmed they have not seen a copy of the letter.

2. Confirmation as to whether you responded to the letter to HMRC

Answer: N/A

3. Confirmation as to whether you provided ANY or all of the information to HMRC.

Answer: N/A

4. A copy of your response to that letter with the following direction: Instead of the exact answers for 3(v) and 4(v) (which are likely to be confidential) please instead tell us the number of items on those lists.

Answer: N/A

533.18

Consultant appointments

I am writing to you under the Freedom of Information Act 2000 to request the following information.

1. How many substantive consultant appointments did your trust make in the following years:

- 1 September 2016 to 1 September 2017?

Answer: 27

- 1 September 2017 to 1 September 2018?

Answer: 19

2. How many posts were advertised internally only?

Answer: All advertised externally

3. How many posts had their job descriptions and timetables approved by the respective royal college?

Answer: All

4. Were all posts for 10 paid programme appointments with a 7.5:2.5 split of direct clinical care to SPAs?

Answer: Yes

5. For those that were not, please state the split and the specialty this applied to.

Answer: N/A

6. Did all posts have an appointments committee, including a royal college adviser? For those posts that did not, please state the specialty.

Answer: Yes

534.18

Grievances by trust staff

Grievances by trust staff

1. Please advise for each of the years

2018/19 year to date – **Answer 5 received.**

2017/18 – **Answer: 8 received.**

2016/17 – **Answer: 17 received.**

2015/16 – **Answer; 15 received.**

2014/15 – **Answer; 14 received.**

2013/14 – **Answer; 8 received.**

How many grievances were lodged by trust staff?

2. For the total number of grievances in the period 2013/14 to 2018/19 year to date, please advise how many of the grievances were upheld.

Answer: Information not available as this is dependent on the reason for the grievance and is dealt with on a case-by-case basis.

3. If the information is held centrally,

a) Please give a broad breakdown of the demographics of staff who raised grievances in the whole period (2013/14 to 2018/19 year to date)

Answer:

- **We do not centrally hold the age of the staff on our database.**
- **78% of staff who raised Grievances were female and 22% were male.**
- **53% were recorded White British.**
- **12% were recorded as Asian or British Asian**
- **9% were recorded as Black or Black British Caribbean**
- **26% no ethnicity was recorded.**

b) Please give a broad breakdown of the types of grievances raised in the whole period (2013/14 to 2018/19 year to date)

Answer:

- **Salary and wages**
- **Flexible working**
- **Trust processes**
- **Disputes with management/colleagues**

535.18

Cleaning Contracts

I am writing to you under the Freedom of Information Act. I would like to know the following:

1. Do any hospitals in your trust currently have a contract with these companies:

SPECIALIST HEALTH SOLUTIONS LIMITED (09261556) SPECIALIST HYGIENE SOLUTIONS LIMITED (07183575) which is also known as HYGIENE SOLUTIONS LIMITED

They provide a room decontamination service, called Deprox, and associated consumables, particularly called Deproxin fluid.

The registered address for both companies is: Maple House, Hamlin Way, Hardwick Industrial Estate, Kings Lynn, Norfolk, United Kingdom, PE30 4NG

Answer: Yes

If you currently have a contract with either company, please answer these questions:

2. What date did you start the contract?

Answer: We have had a spot purchase arrangement since 7th February 2013

3. How much have you spent on this contract so far?

Answer: £101,524.51

4. In hospitals that the Deprox machines are used in, are they used throughout the entire hospital or just in certain wards (if it is the latter, which wards)?

Answer: Inpatient wards

If you do not currently have a contract with either company but did in the past, please answer these questions:

5. What date did the contract start and finish?

6. How much did you spend on the contracts?

7. In hospitals the Deprox machines were used in, were they used throughout the entire hospital or just in certain wards (if it is the latter, which wards)?

Answer: N/A

536.18

Trainees and compliance with HEE guidance

I am writing to you under the Freedom of Information Act to request details laid out below. In order to assist you with this request, I have outlined the query as specifically as possible, but if the request is too wide or too unclear, I would be very grateful if you could contact me.

The request is in reference to trainees and compliance with HEE guidance.

- 1) How many times were trainees moved from one department to another outside of their planned work schedule/rota between December 2017 and March 2018 (inclusive)?

Answer: None

- 2) How many times were trainees moved from one department to another outside of their planned work schedule/rota between December 2018 and the date of this email (inclusive)?

Answer: None

- i) Of these, how many of the departments to which trainees were moved had declared Operational Pressures Escalation Level 4 (OPEL 4)?

Answer: N/A

- 3) How many trainees were moved from one department to another outside of their planned work schedule/rota between December 2017 and March 2018 (inclusive)?

Answer: None

- 4) How many trainees were moved from one department to another outside of their planned work schedule/rota between December 2018 and the date of this email (inclusive)?

Of these:

1. How many had worked in the department to which they were moved before?
2. How many received proper inductions as per the [HEE guidance](#) "Supporting winter pressures safely through managed education and training programmes"?

Answer: N/A

- 4) How many times were trainees moved from one hospital to another outside of their planned work schedule/rota between December 2017 and March 2018 (inclusive)?

Answer: None

- 5) How many times were trainees moved from one hospital to another outside of their planned work schedule/rota between December 2018 and the date of this email (inclusive)?

Answer: None

- i) Of these, how many of the departments/hospitals to which trainees were moved had declared Operational Pressures Escalation Level 4 (OPEL 4)?

Answer: N/A

- 6) How many trainees were moved from one hospital to another outside of their planned work schedule/rota between December 2017 and March 2018 (inclusive)?

Answer: None

- 7) How many trainees were moved from one hospital to another outside of their planned work schedule/rota between December 2018 and the date of this email (inclusive)?

Answer: None

Of these:

1. How many had worked in the hospital to which they were moved before?
2. How many received proper inductions as per the HEE guidance?

9) Since the introduction of [HEE guidelines](#) in December 2018 , how many times have you reported to the HEE and/or your local office, that you have moved a trainee from one department to another outside of their planned work schedule/rota?

Answer: None

10) Since the introduction of [HEE guidelines](#) in December 2018 , how many times have you reported to the HEE and/or your local office, that you have moved a trainee from one hospital to another outside of their planned work schedule/rota?

Answer: None

537.18

Media Suppliers

I am making a request under the Freedom of Information Act for the following information, and would be grateful if you could provide answers to the following questions:

- Do you use Digital Dictation? If yes, could you please answer the following questions:
 - Name of the supplier & product? **Answer: Nuance via Winscribe**
 - What procurement method (if any) was used to obtain this system i.e. what framework? **Answer: SBS Framework**
 - The contract start date? **Answer: 19/12/2018**
 - The contract end data? **Answer: 18/12/2024**

- The total contract value? **Answer:£419,340.00**
- What is the name and position of the key internal stakeholder for this service? **Answer: Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Russell Caldicott, Finance Director, email address; russell.caldicott@walsallhealthcare.nhs.uk and telephone number is 01922 721172.**
- Do you use Speech Recognition? If yes, could you please answer the following questions: **Answer: N/A**
 - Name of the supplier & product?
 - What procurement method that was used to obtain this system i.e. what framework?
 - The contract start date?
 - The contract end data?
 - What is the name and position of the key internal stakeholder for this service?
- Do you use Outsourced Transcription? If yes, could you please answer the following questions: **Answer: N/A**
 - Name of the supplier?
 - What procurement method (if any) was used to obtain this system i.e. what framework?
 - The contract start date?
 - Volume of letters per month?
 - What is the name and position of the key internal stakeholder for this service?
- What suppliers do you use for the following health information systems?
 - PAS (Patient Administration System) – **Answer: DXC**
 - EPR (Electronic Patient Record) – **Answer: Orion (clinical portal)**
 - eDMS (Electronic Document Management System) **Answer: None**
- Do you use mobile devices? If yes, could you please answer the following questions:
 - What brand devices are used e.g. iOS (iPhone), Android, Windows or BYOD (bring your own device)? **Answer: iPad, iPod, Android Samsung Galaxy**

538.18 Doctor Vacancies

I am writing to you under the Freedom of Information Act 2000 to request the following information regarding the recruitment of doctors:

1. How many full time equivalent vacancies for **doctors** of all grades and specialisms are **currently** outstanding across the Trust?

Answer: 9

2. How many full time equivalent vacancies for **doctors** of all grades and specialisms have been advertised **more than 28 days and currently still remain unfilled?**

Answer: We do not have the capacity within our recruit systems to identify vacancies that have been vacant for more than 28 days.

3. Please detail the grades and specialisms for all whole time equivalent vacancies which have been advertised for **more than 28 days and currently still remain unfilled?**

Answer: We do not have the capacity within our recruit systems to identify vacancies that have been vacant for more than 28 days.

4. What was the total amount spent on Agency Locum Doctors during financial year **2017/18?**

Answer: £2,306,756

5. Have you utilised any agencies/headhunting/recruitment companies to source direct applicants (Not agency locums) for Doctors jobs in either a **substantive or fixed term capacity?**

Answer: No

6. If you have, can you please name the agencies/headhunting/recruitment companies and the **number of vacancies** they have successfully filled?

Answer: N/A

539.18 Clinical Systems

I have noticed that a few other of your trust's clinical systems have recently expired. Please see Attached..

May I ask if the systems above have a new contract expiration date and are they annually renewed?

Please let me know if they are still in use and if not, what supplier systems have replaced them.

Answer: Please see attached. Available upon request

540.18 Complaints

Questions:

1. Does the Trust routinely publish the complaints data it reports to NHS Digital (KO41a) via any other public channel, i.e. on your website (please indicate YES or NO in the box below)? If YES, please provide details of where and how frequently you publish this data.

YES	<input type="checkbox"/>
NO	<input checked="" type="checkbox"/>

Further information on publication:

2. Does the Trust routinely publish, make public or evidence the outcomes and/or learning taken from complaints received (please indicate YES or NO in the box below)? If YES, please provide details of where and how frequently you publish this data.

YES	<input checked="" type="checkbox"/>
NO	<input type="checkbox"/>

Answer: Yes, details are provided via the quarterly Patient Experience report that is discussed at Quality, Patient Experience and Safety Committee (QPES) through to board – papers available via the website. Annual Complaints report also published includes examples of outcomes/lessons learned.

Further information on publication:

3. Do you record complaints made by third parties who don't have the expressed consent of the patient(s)? i.e. members of the public, people visiting other patients and/or external non-medical contractors who have concerns about the way patients are being treated or cared for.

YES	<input type="checkbox"/>
NO	<input checked="" type="checkbox"/>

4. If you record complaints made by third parties, please could you provide the numbers of complaints received by your NHS Trust for the following financial years?

2015/16	
2016/17	
2017/18	

Answer: We do not record this information

5. Do you record complaints made by third parties in your official complaints figures as reported to NHS Digital (KO41a)?

YES	<input type="checkbox"/>
NO	<input checked="" type="checkbox"/>

Answer: Relatives, Carers, MP's, Healthwatch etc. are included in figures but details of the referrer are not requested as part of ko41A return

541.18

Viscosupplementation

Under the Freedom of Information Act, please can you answer the following questions:

1. Does your organisation use/perform Viscosupplementation injections?

Answer: No

2. If so, how much did your organisation spend on Viscosupplementation between the period of 01/01/2018 to 31/12/2018?

Answer: N/A

3. If your organisation used Viscosupplementation between the period 01/01/2018 to 31/12/2018, which brand(s) Viscosupplement did you use?

Answer: N/A

To make your research easier, I have listed all commonly used Viscosupplements that you can cross reference:

- Arthrum H
- Orthovisc
- Crespine Gel
- Durolane
- Euflexxa
- Fermathron
- Ostenil
- Ostenil Plus
- RenehaVis
- Suplasyn
- Synocrom
- Synocrom Mini
- Synolis
- Monovisc
- Synopsis
- Synvisc (Hylan GF-20)
- Synvisc One (Hylan GF-20)

4. How many units of each brand of Viscosupplement did you use?

Answer: N/A

5. Please can you provide me with the name and email address for the Chief Pharmacist and Clinical Lead Musculoskeletal Pharmacist?

Answer: Chief Pharmacist is Gary Fletcher, email:
gary.fletcher@walsallhealthcare.nhs.uk

The trust does not have a Clinical Lead Musculoskeletal Pharmacist

542.18 Sepsis

1) What best describes your organisation? Please place an X next to the appropriate answer.

Acute District General Hospital **X**

Acute Tertiary centre

Specialist tertiary centre

Private hospital

2) Do you submit Sepsis CQUIN data?

Answer: Yes

3) a) Are you using NEWS2 in your organisation?

Answer: No

b) If not, are you in the process of transitioning to NEWS2?

Answer: Yes

4) What sepsis screening prompt is used? Please place an X next to all that apply.

Suspicion of Infection +

NEWS2

NEWS **X**

MEWS or equivalent

SIRS

Health care professional concern **X**

Clinical or carer concern **X**

5) What treatment prompt is used? Please place an X next to all that apply.

NEWS of 5 + Clinical Judgement (Senior review) **X**

Red Flag Sepsis **X**

Full NICE sepsis criteria

Sepsis 3 (quick SOFA)

Sepsis 2 (SIRS criteria + organ dysfunction)

6) What treatment pathway is used?

a) Sepsis 6 **X**

b) SSC guidelines

**543.18
Beds**

I am writing to kindly request the information you hold on the following, within the 18 hour limit, under the provisions of the Freedom of Information Act, 2000:

- 1) The total number of adult emergency and elective inpatient beds across the Trust, excluding maternity (and paediatric) beds.

Answer: We don't have beds allocated as emergency / elective – and whilst some wards are predominantly of one type, some wards see a mixture of elective and non-elective activity.

Based on the Kh03 return for Q2 18/19 (removing paediatric beds and adding on crit care) we would have had an average of $454-21+13= 446$ beds available

- 2) The total number of adult emergency and elective 'inpatient episodes' within the most recently recorded 12 month period, excluding maternity (and paediatric) episodes.

Answer:

Admission method	Episodes
Elective	32104
Non Elective (excluding maternity and births)	48739

- 3) The number of emergency and elective 'inpatient episodes' belonging to adults aged 65 years or over, within the most recently recorded 12 month period.

Answer:

Admission method	Episodes
Elective	14014
Non Elective (excluding maternity and births)	25470

- 4) Of the number of emergency and elective 'inpatient episodes' belonging to adults aged 65 years or over within the most recently recorded 12 month period, how many of these required a domiciliary social care package to be implemented prior to discharge?

Answer: The Trust does not hold this information. You can contact the Walsall Social Care Performance Team via Walsall Council, Civic Centre, Darwall Street Walsall WS11TP. This will be for Walsall residents only.

5) The sum of the number of days each inpatient bed was occupied by an adult aged 65 years or over whilst he/she was deemed 'medically fit for discharge' but was unable to be discharged due to inadequate social care provision, in the most recently recorded 12 month period. (Please give data separately for each emergency and elective bed types if readily available, otherwise combined data is acceptable).

Answer: We don't hold official delayed transfer of care figures. We can provide Social care delays

6) The average cost of an inpatient bed occupied by an adult aged 65 years or over, per 24 hour period, for each emergency and elective beds (or emergency and elective beds combined if separate data is not readily available).

Answer: we can't split the Emergency and Elective but combined for a person over 65, a single day in a ward bed costs the Trust £238.50.

7) The name(s) and email address(es) of the Trust's 'Lead Discharge Co-ordinator(s)'.

Answer: Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Matthew Dodd, Divisional Director of Planned care, Medicine and Long term conditions management , email address; matthew.dodd@walsallhealthcare.nhs.uk

544.18 Podiatry / Orthotics

Under the Freedom of Information Act, please can you provide the following information:

1. Does your organisation have its own podiatry orthotic insole manufacturing department or team?

Hospital Answer: The Orthotics department do not manufacture insoles in house.

Community Answer: Yes

- If yes, do they manufacture semi bespoke insoles utilising prefabricated shells as the base?

Community Answer: Yes

- If a prefabricated device is used in semi bespoke work what is the device of choice?

Community Answer: Tailor made or Peak prefabs

- If there is a manufacturing team what is the size of that team?

Community Answer: 0.5wte

- If you have a manufacturing department what equipment does the team have to aid in the manufacturing of Podiatry orthotic devices?

Community Answer: Grinders x2, vacuum former, fume cabinet

2. If your organisation does not manufacture orthotic insoles does the podiatry department have a tender or contract in place with an outside company for the provision of podiatry orthotic devices?

Hospital Answer: All bespoke insoles are manufactured by our current orthotics service provider. For all off the shelf insoles, we purchase direct from various suppliers.

Community Answer: No

3. If the manufacturing of your devices is outsourced, what company currently supplies your devices?

Hospital Answer: Our present Orthotic contractor is with Opcare Ltd

Community Answer: Salts

4. If there is a tender or contract in place, when does this tender come to an end?

Hospital Answer: There is currently a contract in place for orthotics service and product, which is due end September 2019. A new specification is currently being drafted under a group purchasing directive to go out to tender when ready.

Community Answer: No

5. How many pairs of insoles are your patients entitled to on the NHS?

Hospital Answer: The Orthotics service supply one set of insoles, unless requested by a consultant or an Orthotist.

Community Answer: Unlimited if at risk, 1 only if not at risk

6. Can you provide any information you have on quantities of bespoke, semi bespoke, simple/flatbed and off the shelf devices that have been prescribed in the financial years 16/17, 17/18 and 18/19 (so far)?

Hospital Answer: At present, Exception 12 is applied, cost of compliance exceeds the appropriate limit. Due to system limitations, it will require an unreasonable amount of time to ascertain the exact type of insoles supplied. As summary is as follows:

FY17/18 – 122 Pairs of insoles (Mixed types)

FY18/19 – 140 Pairs of insoles (Mixed types)

Community Answer: This information is not recorded

7. What has been the total spend on podiatry orthotic devices for the financial years 16/17, 17/18, 18/19 (so far)?

Hospital Answer: FY17/18 –Total spend value £8639.84 Exc VAT
FY18/19 –Total spend value £9404.65 Exc VAT. Exemption 12 has been applied to 2016/17 as the information is paper based and archived. To search through the notes would exceed the time limit.

Community Answer: 16/17 - £15,000 17/18 - £15,000 18/19 -£15,000

8. What are the lead/turnaround times from your podiatry orthotic supplier, whether it is in house manufacturing or outsourced?

Hospital Answer: Turnaround times are approximately as follows:
Off the shelf – 5 working days
Custom made – 10 working days

Community Answer: 2 weeks

545.18

Trans groups that do diversity/equality training

Would you please tell me which groups you have consulted regarding care of transgender patients

Answer: There are currently no Transgender Networks/Groups in the Walsall area. As a Trust we treat each patient as an individual and according to the gender to which they identify with.

and/or the formation of transgender policy and/or that provide your staff training on transgender patient care/policies.

Answer: We currently do not have a transgender policy, however are looking to champion this through Stonewell

Would you please specify also if you have consulted any groups or individuals representing other patients protected under the Equality Act 2010 with regard to the impact on those groups of transgender policies, specifically under the characteristics sex, age and religion or belief.

Answer: We contribute to a number of internal and external engagement programmes with key stakeholders including:

Healthwatch

My NHS Walsall

Walsall MBC

DIAL (disability Forum)

UMO (Union of Muslim Organisations)

Aaina (Asian Women's Group)

Hindu Forum

Age UK

Refugee and migrant groups

Asian Elders centre

Black sisters

We are on the board of 'Walsall Local Integration Partnership'. The board is made up of partner's from the voluntary organisations, schools, colleges, police, fire, ambulance, DWP and other stakeholders as part of on-going commitment to working in partnership to deliver a wide range of services and activities in support of community cohesion and integration.

546.18

Organisation's Local Area Network (LAN) environment

Can I please make a request under the Freedom of Information Act and I would like to request the following information about the organisation's Local Area Network (LAN) environment.

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

- Support and Maintenance- e.g. switches, router, software etc
- Managed- If this includes services than just LAN.

Answer: Acute Site LAN

1. Contract Type: Managed or Maintenance

Answer: Managed

2. Existing Supplier: Who is the current supplier?

Answer: Skanska

3. Annual Spend for each supplier: 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.

Answer: Part of the PFI contract

4. Number of Users: Please can you provide me with the number of users this contract covers. Approximate number of users will also be acceptable.

Answer: 4000

5. Number of Sites: The number of sites, where equipment is supported by each contract.

Answer: 1

6. Hardware Brand: What is the hardware brand of the LAN equipment?

Answer: Cisco

7. Contract Description: Please provide me with a brief description of the overall contract.

Answer: Skanska maintain/manage the network as part of the PFI for the hospital site

8. Contract Duration: What is the duration of the contract is and can you please also include any extensions this may include.

Answer: 30 years

9. Contract Expiry Date: When does the contract expire?

Answer: Expires when the PFI contract expires.

10. Contract Review Date: When will the organisation is planning to review the contract?

Answer: N/A

11. Responsible Officer: Contact details including name, job title, contact number and email address?

Answer: Skanska (PFI) partner

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

Answer: Community LAN

1. Hardware Brand: What is the hardware brand of the LAN equipment?

Answer: HPE

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.

Answer: Approx 2000

3. Number of Sites: Estimated/Actual number of sites the LAN covers

Answer: 52

4. Responsible Officer: Who within the organisation is responsible for LAN please provide me with contact details including name, job title, contact number and email address?

Answer: Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Mark Taylor, Associate Director of IT. email address: mark.taylor@walsallhealthcare.nhs.uk and telephone number is 01922 721172.

If the contract is managed by a 3rd party e.g. Can you please provide me with

Answer: N/A

1. Existing Supplier: Who is the current supplier?
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. Number of Sites: Estimated/Actual number of sites the LAN covers.
4. Contract Type: Managed, Maintenance, Installation, Software
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?

547.18

Leaflet of induction of labour

I am currently undertaking a masters and for this scholarly purpose I would like to request that a copy of the following documents [or documents containing the following information] be provided to me: Leaflet of Induction of Labour (IOL).

Answer: Please see attached. Available upon request

548.18**Number of employees**

Under the Freedom of Information Act 2000, please provide me with copies of the following:

1). The number of employees and volunteers of the trust under 16 years of age.

Answer: There are no substantive employees or volunteers under 16 years of age at the trust.

2). The number of employees and volunteers of the trust between 16 - 18 years of age.

Answer: There are 17 substantive employees and 1 Volunteer between 16 - 18 years of age at the trust.

3). The number of employees and volunteers of the trust over 18 years of age.

Answer: There are 4291 substantive employees and 301 volunteers over 18 years of age at the trust.

549.18**Non-resident on call accommodation**

1. Do you currently employ junior doctors on the 2016 contract who work a non-resident on call pattern?

Yes/No

2. Is there any accommodation available for junior doctors working on a non-resident on call shift pattern?

Yes/No

3. Is there a charge applied for this accommodation?

Yes/No

4. How much is the charge for this accommodation per night?

5. Who pays for this accommodation charge?

Charged to junior doctor/charged to the department/other (please specify)

6. Since the introduction of the 2016 junior doctor contract how much money has your trust charged to junior doctors for non-resident on call rooms?

7. What rest facilities are available for junior doctors? Please select from the following options:

No rest facilities

Shared room with no sofa or beds

Shared room with sofa

Shared room with sofa bed

Shared room with bed/beds

Individual room without bed or bathroom

Individual room with bed and no bathroom

Individual room with bed and shared bathroom

Individual room with bed and en-suite bathroom

8. If there are no adequate rest facilities provided what alternative arrangement have been made (e.g. payment for taxi travel to and from workplace)?

Answer: Please see attached. Available upon request.

550.18

Lease cars.

1. Please confirm how many members of staff in your organisation/trust currently have lease cars?

Answer:

MAKE	BAND
RENAULT CLIO	6
KIA KARENS	7
FORD FIESTA	4
RENAULT CLIO DYNAMIQUE	4
KIA SPORTAGE1.6GDI	6
RENAULT CLIO 1.5cdi	7
VW T-ROC 1.5TSI EVO	4
SUZUKI VITARA 1.6	4
KIA SPORTAGE1.6 gdi	4
KIA SORENTO	6
FORD FOCUS 1.0 ECOBOOST	4
FORD FIESTA HATCHBACK ECO	4

2. If possible, please confirm the make and model of each car?

Answer: See above

3. If possible, please provide the grade of each employee next to the make and model of the car

Answer: See above

4. Please state the cost to the organisation/trust on lease cars in 2018?

Answer: 1026.80 x12 = 12.321.60

5. If applicable, please also state the cost to the trust of paying employees who opt not to have lease cars who are entitled to reimbursements on top of their salaries, for 2018

Answer: N/A

551.18
EPR

I would be most grateful if you could provide answers to the following questions:

What are your plans regarding procuring an EPR or PAS?

Answer: Currently Market Testing

Will you be procuring a new EPR or PAS in the next 2 years?

Answer: Decision to be made and options are being considered

What is the contract expiry date for your existing EPR / PAS?

Answer: March 2020

What are your plans regarding implementing an EPMA?

Answer: In the Plans for 20/21

What plans do you have for procuring other health systems in the next 2 years?

Answer: Digital Strategy being considered with investment plan.

552.18
Number of deaths.

I would be most grateful if you could provide answers to the following questions:

For each of the years 2014, 2015 and 2016 please may you provide

1. The total number of adult (aged 17 and above) deaths within your Trust (on Trust sites) between 1st January and 31st December.

Answer:

Year	AdultsAged17AndAbove
Year 2014	1152
Year 2015	1077
Year 2016	1088

2. The number of Hospital (consent) autopsies carried out on adult (aged 17 and above) deaths which occurred between 1st January and 31st December.

Answer: The Trust does not hold this information. It would need to come from the coroner

3. The total number of paediatric (aged 16 and below) deaths within your Trust (on Trust sites) between 1st January and 31st December.

Answer:

Year	AdultsAged17AndAbove
Year 2014	18
Year 2015	9
Year 2016	12

4. The number of Hospital (consent) autopsies carried out on paediatric (aged 16 and below) deaths which occurred between 1st January and 31st December.

Answer: The Trust does not hold this information. It would need to come from the coroner

553.18

Laparoscopic monopolar scissors

As part of the freedom of information act please could you forward the following information in regards to laparoscopic monopolar scissors, laparoscopic Maryland dissector and laparoscopic graspers?

* Your current supplier?

Answer: These instruments are purchased against the Health Trust Europe (HTE)

* Annual usage in the following years: 2015-2016, 2016-2017, 2017-2018, 2018 year to date

Answer: Please see attached

* Annual spend in the following years: 2015-2016, 2016-2017, 2017-2018, 2018 year to date

Answer: Please see attached

* Current contract details?

Answer: Surgical Stapling Framework agreement 1.12.16 to 30.11.20.

* Contract managers name and email address?

Answer: Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Russell Caldicott , Director of Finance, email address; russell.caldicott@walsallhealthcare.nhs.uk

554.18

Unfilled vacancies.

Your current number of current unfilled vacancies/positions across all departments

How long each of those positions has been unfilled

Answer: Please see attached. Available upon request

Number of urgent operations and procedures cancelled per month for the past five years

Answer: The trust does not cancel urgent operations or procedures

555.18

Locum pay

1. Please provide the value (in £) of the highest amount paid by the Trust in 2018 to a locum doctor for a) a shift (please specify shift length) and b) per hour.

Answer: £150.00 per hour 8 hour shift

2. For both a) and b) above, please specify the doctor(s)' title/level (eg. registrar, consultant) and specialty.

Answer: Consultant neurology

3. For both a) and b) above, please specify whether the locum doctor(s) was/were hired through an agency, through the Trust's own bank system or another method (please state which method).

Answer: Trust Bank

4. Where possible/applicable, if the Trust paid agency or administration fees as part of hiring the locum doctor(s) in a) and b) above, please specify what proportion of the fee went to a third party and what proportion was paid to the doctor.

Answer: Not applicable

556.18

Patient of No Fixed Abode

Under the Freedom of Information act I wish to request the following information:

1. For each of the last five financial years (2014/15 to 2018/19, to date) please provide the numbers of patients of No Fixed Abode recorded in the following inpatient categories: elective ordinary; elective day cases; elective ordinary planned; elective day case planned; NHS treatment centres; total non-elective
2. For the same time periods – again broken down by financial year – please provide the numbers of patients of No Fixed Abode recorded in the following outpatient categories: GP written referrals made; GP written referrals seen; other referrals made; All 1st outpatient attendances.
3. For the same time periods – again broken down by financial year – please provide the numbers of patients of No Fixed Abode recorded in the inpatients (elective) category: Patients failed to attend
4. For the financial year to date (2018/19) please provide the number of emergency department attendances and hospital admissions by patients of No Fixed Abode.
5. For the financial year to date please provide the number of referrals made by the hospital trust of those at risk of becoming homeless to a housing authority under the Homelessness (Review Procedure etc.) Regulations 2018.

Answer: Please see attached spreadsheet. Available upon request

557.18

Long stay patients

Under the Freedom of Information Act I wish to request the following information:

1. Please provide (for each financial year, broken down by financial year, from 2010/11 to 2018/19 to date) the number of long-stay* occurrences of patients with No Fixed Abode recorded by the hospital trust.

Answer:

Financial Year	Total
Year 2010/11	1
Year 2011/12	0
Year 2012/13	0
Year 2013/14	0
Year 2014/15	1
Year 2015/16	0
Year 2016/17	1
Year 2017/18	1
Year 2018/19	0

2. As well as the total numbers above, for 2017/18 and 2018/19 please also provide the total length of stay (current at time of record, if ongoing) of each long-stay occurrence of a patient with No Fixed abode.

Answer:

Financial Year	Total LOS
Year 2017/18	25

*Long stay patients are defined by NHS England/NHS Improvement as a patient who has occupied an acute bed for 21 days or longer.

558.18
EU Exit

All the questions relate to guidance issued by the Department of Health and Social Care on 21 December 2018.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/768077/eu-exit-operational-readiness-guidance.pdf

Please send the following information:

1. Have you appointed a senior responsible officer for EU Exit preparation? If so, who is it and what is their existing job title with the trust?

Answer: Margaret Barnaby Interim Chief Operating Officer

2. All NHS trusts and foundation trusts have been asked to undertake internal reviews/self-assessments of purchased consumables, goods and services (non-clinical) to understand any risks to operations if there is disruptions in supply in the event of a no-deal EU exit. Please send your trust's review/self-assessment.

Answer: Please see attached. Available upon request.

3. All NHS trusts and foundation trusts were asked to assess whether your organisation has incurred a reduction in the number of EU nationals in your workforce before the UK leaves the EU. Please confirm if you have carried out this assessment, and if you have please send the assessment.

Answer: Please see attached. Available upon request.

4. All NHS trusts and foundation trusts were told to undertake local risk assessments to identify any staff groups or services that may be vulnerable if there is a shortfall of EU nationals. Please confirm if you have carried out such assessments, and if you have please send the assessments.

Answer: Please see attached. Available upon request.

559.18

Hernia / Mesh Implants

I need to establish whether

1. any of your Hospital Trust surgeons repair hernias without using mesh implants?

Answer Yes

2. any of your hernia surgeons remove mesh that is causing complications?

Answer: Yes

3. any of your Hospital Trust surgeons repair without using mesh implants in the following

areas?

Please specify which surgeon specialises in each of the following areas:-

A. Womb

Answer: Urogynae consultants

B. Bladder

Answer: No

C. Vagina

Answer: Urogynae consultants

D. Rectum

Answer: No

E. Bowel

Answer: No

4. any of your surgeons remove mesh that is causing complications from the following areas?

Again, please specify each surgeon alongside their specialism separately.

A. Womb

Answer: No

B. Bladder

Answer: No

C. TVT /TVTo/vaginal

Answer: Refer to tertiary centre

D. Rectal

Answer: Yes

E. Bowel

Answer: Yes

560.18

Complaints made to your End of Life Care Strategy Group

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

Please detail the number and type of complaints made to your End of Life Care Strategy Group in the last four years. Please break the information down into complaints per month (where possible) and whether the complaint was to do with, for example poor communication, issues to do with consent or the care itself etc. Where recorded, please also detail the outcome of the complaint.

Answer:

Case Number	Date Received	Resolved Status	Category Type	Outcome Details
10806	25/08/2015	Resolved	Communication	Agreed actions to involve family in development of new ward leaflet, better and informed communication regarding passing on information. EoLC Case study and consultation on individual end of life care plans, use as a case study/future board story.
10850	02/09/2015	Unresolved	Diagnosis	<p>As a result of your complaint the Trust will make the following improvements:-</p> <p>There will be a review of the Urology Cancer Pathway</p> <p>We are reviewing the management of nephrostomy tubes to ensure that new methods to fix the tubes to reduce displacement.</p> <p>Your complaint will be anonymised and shared with the Urology team as a whole</p>
10980	11/09/2015	Resolved	Medication Error	Wife of patient who was end of life concerned that chemotherapy drugs were over prescribed which led to a deterioration in the patient's condition.
14090	08/08/2016	Resolved	Clinical Care/assessment/treatment	<p>Ward 9 staff will keep relatives informed of patients' condition throughout their stay. If the nurse suspects that the patient is deteriorating they will ask the relative to come to the hospital at the earliest point in time. This will be discussed at next team meeting and this complaint shared with the team at Care Group so that the issue regarding communication can be highlighted and discussed.</p> <p>Your complaint will be anonymised and shared in the Trauma & Orthopaedic Safety meeting.</p>

14335	31/08/2016	Resolved	Discharge	Concerns re aunt who is an inpt: 1) Carers/district nurse not been 2) Care package 3) Sent home with meds but no DN visit arranged. 4) Failed discharge. 5) Why not referred to a cancer nurse specialist or MacMillan Nurse. 6) Cancer diagnosis not given to family.
15007	17/11/2016	Resolved	End Of Life Care	Family claim students advised they did not know patient was at end of life. Familt asked to leave the ward whilst patient being washed, passed away during this time.
15234	12/12/2016	Resolved	Diagnosis	"she was told there was no cancer present 3 years ago but no one explained about the risks of the goiter turning into cancer."
15285	15/12/2016	Resolved	End Of Life Care	JS died 15.11.16. Not happy with staff. Both LS and JS had discussion that he would like to go to a hospice. LS say staff HL and others decided otherwise. Feel treated poorly by staff. Patient had bed sores and caught cdiff. Did not think about pt or wife wishes.
15597	25/01/2017	Unresolved	Clinical Care/assessment/treatment	
15853	17/02/2017	Resolved	Clinical Care/assessment/treatment	
16400	20/04/2017	Resolved	Diagnosis	
17483	21/08/2017	Resolved	Communication	VR feels staff would 'make things difficult' and not assist making PT comfortable.
19988	04/04/2018	Resolved	Clinical Care/assessment/treatment	Letter raising concerns regarding care and treatment in A&E, family state this has resulted in the patient being paralysis from the chest down.
20312	26/04/2018	Resolved	End Of Life Care	issues regarding care during the end of mums life, feel they were not listened to, delay in pt being discharged home, passed away in hospital. Bereavement survey states, they did not feel communicated with
20682	29/05/2018	Resolved	Clinical Care/assessment/treatment	Patient passed away during admission, family have raised concerns regarding care provided on ward 15. They had several issues with oxygen.
20918	28/06/2018	Resolved	Diagnosis	Pt husband advise's he had informed staff of the family history with Paranoid Schizophrenia - feels this was disregarded by the Trust.
22018	26/10/2018	Resolved	Clinical Care/assessment/treatment	

22021	30/10/2018	Resolved	Diagnosis	
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561.18

Current Construction Projects

Under the Freedom of Information Act please could you let me know your top 10 construction projects (in terms of value) **that are due for completion in the next 6 months** along with the expected completion date, Value, and Main Contractor Employed. (You can leave out any or all projects you have if they are under £1 Million).

Please provide the information in the form below.

Answer: The Trust does not have any projects that fit the criteria.

562.18

Trust Accounts

I have searched online for the annual accounts for Walsall Hospitals NHS Trust and some years are missing.

Therefore, under the Freedom of Information Act, I would like to request the Annual Accounts for Walsall Hospitals NHS Trust for all the financial years from 2008/09 to 2013/14.

Answer: Accounts for 2008/09 are attached. Please see link below for the accounts 2013/14. Available upon request

[https://archive.walsallhealthcare.nhs.uk/Data/Sites/1/documents/annual-report/quality-account-2013-14-\(1\).pdf](https://archive.walsallhealthcare.nhs.uk/Data/Sites/1/documents/annual-report/quality-account-2013-14-(1).pdf)

563.18

Procurement Function

I am requesting information under the Freedom of Information Act

I would be grateful if you could acknowledge receipt of this email and look forward to your response within 20 working days, as stipulated by the act.

Please note, the questions all refer to procurement metrics drawn up in the 2016 Carter Review.

- 1) What percentage of the trust's transaction volume is operated through an electronic catalogue?-

Answer: 100%

- 2) What percentage of the trust's transaction volume is covered by electronic purchase orders? –

Answer: 100%

- 3) What percentage of the trust's transaction volume is covered by a contract? –

Answer: 100%

Please note for Questions 1, 2, and 3 please give your most up-to-date figure at the time of responding.

564.18

Colonoscopies

I wish to know the length of colonoscopes used during colonoscopies at your trust.

Answer: 1.5 Metres long

565.18

Data Breaches

FOI Questions

1. How many data breaches have there been in your organisation since 2014?

Answer:

There have been 980 data breaches recorded onto the Safeguard electronic incident reporting system since 2014. Further breakdown is shown below.

Year	Total	Breaches related to email / electronic transmission
2014	145	7
2015	148	10
2016	164	15
2017	206	21
2018	284	28
2019	33	3
TOTAL	980	84

2. How many of those data breaches related to email?

Answer: Data is shown in table above.

566.18

Recycling employer pension contributions

We are writing to make an open government request for all the information to which we are entitled under the Freedom of Information Act 2000.

As a result of HMRC's changes to the pensions Lifetime Allowance ('the LTA') and Annual Allowance ('the AA') many of our members have left the NHS Pensions Scheme. This results in NHS Employers saving the employer pension contributions which they would have paid into our members' pensions had they not left the scheme. We have been made aware of some NHS Employers operating policies to enable such scheme leavers to apply for and receive payment of the monies which their NHS Employer would have paid into their pension in the form of employer pension contributions. The following request for information relates to the monies which you, as the NHS Employer, have saved from unpaid employer pension contributions in the way described above.

1. Do you have a policy (written or unwritten) by which one of your employees who is leaving the NHS Pension Scheme may be able to receive after leaving the scheme payment(s) equivalent to or calculated in relation to the employer pension contributions which you, as the NHS Employer, would have paid to his/her pension had they not left the scheme?

Answer: No

2. If you, as the NHS Employer, do not have such a policy, did you used to have one or do you intend to implement one? If you intend to implement such a policy, when do you expect that the policy will be implemented?

Answer: No

3. If you, as the NHS Employer, do have such a policy, how many doctors and how many non doctors that you employ have benefitted from it by receiving payments under it?

Answer: N/A

4. What are the policy criteria for establishing employees' eligibility to receive such payments? Please provide a copy of the policy or any other documents evidencing the eligibility criteria and rules.

Answer: N/A

567.18

No fixed abode discharges

I am writing to you under the freedom of information act to request the following:

- How many people were discharged without a fixed address in the last five years (2014,2015,2016, 2017, 2018)? Please break this down by year.
- How many were readmitted within six months in the last five years (2014,2015,2016, 2017, 2018)? Please break this down by year.

Answer:

Count of patients discharged between 01/01/2014 and 31/12/2018 with No Fixed Address and a count of Emergency Re-Admissions with six months of the discharge

***Please note, we have not provided a figure for readmissions within 6 months for 2018 as we have not yet reached 6 months of 2019 and therefore the figures won't be consistent**

YearCalendar	Count of discharges	Re-Admissions
Year 2014	31	8
Year 2015	33	9
Year 2016	27	7
Year 2017	48	12
Year 2018	33	* See Note

568.18

Managing High Professional Standards

I would like to request the following information under the Freedom of Information Act:

- How many MHPS [Managing High Professional Standards] (or comparable process) investigations into doctors the trust has commenced during each year in the period 2013 to 2018 (i.e 2013, 2014, 2015, 2016, 2017 and 2018) as the result of allegations of sexual harassment or inappropriate sexualised behaviour towards doctor colleagues.

Answer:

2013 = 0 2014 = 0

2015 = 1 2016 = 0

2017 = 0 2018 = 0

- How many MHPS [Managing High Professional Standards] (or comparable process) investigations into doctors the trust has commenced during each year in the period 2013 to 2018 (i.e 2013, 2014, 2015, 2016, 2017 and 2018) as the result of allegations of sexual harassment or inappropriate sexualised behaviour towards other clinical colleagues (excluding doctors).

Answer:

2013 = 0 2014 = 0

2015 = 2 2016 = 1

2017 = 0 2018 = 0

- Of the number commenced each year, please confirm how many allegations were upheld.

Answer:

2013 = 0 2014 = 0

2015 = 0 2016 = 0

2017 = 0 2018 = 0

- In each case where an allegation was upheld, please confirm the sanction, if any, imposed upon the doctor in question.

Answer: N/A

569.18

Clinical system's contract under review

I have noticed that one of your trust's clinical system's contract have recently been under review. Please see below.

System Type

Supplier name
Date installed

System name

Contract expiration
Annually renewed contract Planned system replacement
Notes

Digital dictation Nuance Communications UK eScription 2013-04-01
2018-09-03 Under review april 2018: The contract has been extended for 6
months with future plans under discussion.

Answer: Please see attached spreadsheet. Available upon request.

570.18

Insourcing of Clinical Services

Can the trust confirm the following for insourced clinical services, that is, where an external provider team comes in to perform extra procedures within the Trust facilities? This usually occurs during the weekend but can happen at other time. In short, can the trust provide:

- The total number of procedures completed by each supplier (named) in the following categories:
 - o Endoscopy
 - o Ophthalmology
 - o ENT
 - o Neurology
 - o Dermatology
 - All Other

Answer: There have not been any extra procedures performed within the trust in the provided dates.

- The total spend completed by each supplier (named) in the following categories:
 - o Endoscopy
 - o Ophthalmology
 - o ENT
 - o Neurology
 - o Dermatology
 - All Other

Answer: There have not been any extra procedures performed within the trust in the provided dates.

Can this be provided for the following financial years:

- 2018/19 to date
- 2017/18
- 2016/17
- 2015/16
- 2014/15
- 2013/14
- 2012/13
- 2011/12
- 2010/11
- 2009/10

571.18

End of Life Pathway (Complaints)

Hi there, I would like to submit the following FOI request.

1. Please list the number of patients per year placed on an end-of-life pathway (LCP or otherwise) or end-of-life care plan between the years 2011 - 2018.

Answer:

YearFinancial	Discharges with EOL Care
Year 2011/12	148
Year 2012/13	289
Year 2013/14	105
Year 2014/15	5
Year 2015/16	85
Year 2016/17	263
Year 2017/18	277
Year 2018/19*	116
<i>*Partial year to 31/12/2018</i>	

2. Please detail the number and type of complaints relating to end of life care per year for the years 2011 - 2018. Please detail the nature of the complaint (e.g. poor communication, issues to do with consent, or the care itself etc) and whether the complaint was upheld.

Answer:

Date Received	Resolved Status	Category Type	Category Outcome
25/08/2015	Resolved	Communication	Upheld - Resolved
02/09/2015	Unresolved	Diagnosis	Upheld - Resolved
11/09/2015	Resolved	Medication Error	Not Upheld - Resolved
08/08/2016	Resolved	Clinical Care/assessment/treatment	Partially Upheld - Resolved

31/08/2016	Resolved	Discharge	Partially Upheld - Resolved
17/11/2016	Resolved	End Of Life Care	Partially Upheld - Resolved
12/12/2016	Resolved	Diagnosis	Partially Upheld - Resolved
15/12/2016	Resolved	End Of Life Care	Not Upheld - Resolved
25/01/2017	Unresolved	Clinical Care/assessment/treatment	Partially Upheld - Resolved
17/02/2017	Resolved	Clinical Care/assessment/treatment	Not Upheld - Resolved
20/04/2017	Resolved	Diagnosis	Not Upheld - Resolved
21/08/2017	Resolved	Communication	Not Upheld - Resolved
04/04/2018	Resolved	Clinical Care/assessment/treatment	Ongoing
26/04/2018	Resolved	End Of Life Care	Complaint Withdrawn
29/05/2018	Resolved	Clinical Care/assessment/treatment	Partially Upheld - Resolved
28/06/2018	Resolved	Diagnosis	Not Upheld - Resolved
26/10/2018	Resolved	Clinical Care/assessment/treatment	Partially Upheld - Resolved
30/10/2018	Resolved	Diagnosis	Not Upheld - Resolved

572.18 Knife injuries

I am writing to you under the Freedom of Information Act 2000 to request the following information:

1. How many people have been treated for serious knife injuries (those which require stitches or worse)?
2. How many people have been treated for life threatening knife injuries?

3. How many people have been treated for multiple knife injuries in the same attack?

4. How many people have been treated for gun/ bullet injuries?

Please provide figures for each year of 2016, 2017 and 2018. Please also provide the age of the youngest and the oldest person treated for the injuries in each question.

Answer: We are unable to identify knife or gun injuries as we record these as “Assaults” on our system. We can supply should you request the data taken from our Accident & Emergency department that were classed as ‘assaults’ so are not deemed to be accidents but may not all include knife wounds.

573.18
e-Rostering

Dear Walsall Healthcare NHS Trust,

I have been researching into workforce management within the NHS and as such am writing to you under the Freedom of Information Act to request the attached information relating to e-Rostering within your trust. Attached to this email is an excel document containing a table with a simple layout for your convenience in answering the questions. I understand the time constraints that befall any FOI request and as such, might I request that should your organisation believe that the information will take longer than the suitable time, to provide answers to the questions asked up to the point where the time allowance should be exceeded.

Please don't hesitate to get into contact should there be any need for clarification relating to the attached questions, or if there should be anything else that should come to mind relating to the questions or the FOI request.

Answer: Please see attached. Available upon request

574.18
Recruitment of Nurses

Please could you supply the following information under the Freedom of Information Act for the period of January 2018 to December 2018, inclusive:

- Please provide the total spend on the recruitment of permanent international doctors (who arrived from non-EU countries)?

Answer: £0

- Please provide the total spend on the recruitment of permanent international nurses (who arrived from non-EU countries)?

Answer: £0

- Please provide the total spend on the recruitment of permanent EU nurses (who arrived from EU countries)?

Answer: £0

- Please provide the total spend on the recruitment of permanent EU doctors (who arrived from EU countries)?

Answer: £0

- Please provide the total spend on the recruitment of UK based nurses?

Answer: £0

- Please provide the total spend on the recruitment of UK based doctors?

Answer: £0

- Please provide a breakdown of the nationality of the international nurses recruited.

Answer:

Nationality	Nursing and Midwifery Registered
Nigerian	2
Filipino	1
Gabonese	1
Jamaican	1
Zimbabwean	4

- Please provide a breakdown of the nationality of the international doctors recruited.

Answer:

Nationality	Medical and Dental
Ethiopian	1
Jordanian	1
Norwegian	1
Sudanese	1
Trinidadian	1
Ghanaian	2
Malaysian	3
Sri Lankan	3
Egyptian	4
Nigerian	4
Pakistani	10
Indian	22
Total	53

- Please provide a breakdown of the nationality of the EU nurses recruited.

Answer:

Nationality	Nursing and Midwifery Registered
German	1
Total	1

- Please provide a breakdown of the nationality of the EU doctors recruited.

Answer:

Nationality	Medical and Dental
Austrian	1
Cypriot	1
Greek	1
Irish	4
Romanian	2
Swedish	1
Total	10

- Please provide your total agency spend on recruiting overseas nurses.

Answer: £65,560

- Please provide your total agency spend on recruiting international doctors.

Answer: £0

- Please provide the number of international nurses recruited directly (not via an agency).

Answer: £0

- Please provide the number of international doctors recruited directly (not via an agency).

Answer: £0

- Please provide the names of the agencies that you utilised to recruit permanent candidates sourced from overseas.

Answer: - Primary Care and Health Perm

- Please provide your trust's spend on agency Community Band 6 Nurses.

Answer: £0

- Please provide your trust's spend on agency Community Band 5 Nurses.

Answer:£0

- Please provide your trust's spend on agency RGN Band 5 Nurses.

Answer: £4010k

- Please provide your trust's spend on agency RGN Band 6 Nurses.

Answer: (included above)

- Please provide your trust's spend on agency RMN Band 5 Nurses.

Answer: £0

- Please provide your trust's spend on agency RMN Band 6 Nurses.

Answer: £0

- Please provide your trust's spend on agency HCA Band 2.

Answer: £615k

- Please provide your trust's spend on agency HCA Band 3.

Answer: (included above)

- Please provide your trust's spend on agency AHP broken down by job family.

Answer: Imaging £221k, Therapies/ Rehab; £325k, Other; £160k

- Please provide a list of all off-framework agencies used

Answer: Thornbury Nursing

- Please provide your trust's spend by each off-framework agency.

Answer: £330k

- Please provide a list of all on-framework agencies used.

**Answer:
For Nursing:
Acton Banks
Day Webster**

Evergood Associates
Firstpoint Healthcare
HCL Nursing
ID Medical
Last Minute Healthcare
Mayday Healthcare
Medacs Healthcare
Medbank Healthcare
Medical Professional Personnel
MedicsPro
Medsol Healthcare
Meridian
MSI Recruitment
Plan B Healthcare
Pulse Healthcare
Team Support Healthcare
Team 24
Yourworld

- Please provide your trust's spend on on-framework agencies.

Answer: We have applied exemption 12; cost of compliance exceeds the appropriate limit. This information is not reasonably available as it would entail looking at each invoice & timesheets

- Please provide details of any SLA's you hold with framework suppliers, who are the suppliers?

Answer: Health Trust Europe

- Please provide details of all break glass rates, how many times have you broken glass above the NHSi capped rates and for categories of staff in the nursing job family. What was the maximum charge rate?

Answer: 5082 nursing agency shifts were booked between January 2018 and December 2018 which booked above the NHSI capped rates. The highest possible charge rate would be a Thornbury Nursing Critical Care/Specialist nurse, to be booked over a Bank Holiday. This would be a charge rate of £153.04 per hour.

I would like to make a Freedom of Information request to your trust.

Please could you provide me with the following information:

1) What is the name of:

a) your trust

Answer: Walsall Healthcare NHS Trust

b) the hospitals run by your trust

Answer: Walsall Manor Hospital

2) Has your trust produced a report looking at the impact on your trust and its operations in relation to the possibility of a 'no-deal' Brexit (EU exit) in March? If yes, please attach the report(s).

Answer: Please see attached

3) Is your trust currently undertaking any preparations/arrangements in relation to a no-deal Brexit in March? If yes, please give details or attach any reports produced by the trust which looks at the impact/preparations/arrangements.

Answer: Please see attached

4) Has the trust undertaken any reviews or risk assessments into the following areas that could be affected by a no-deal Brexit. If yes, please give details or attach reports.

a) Supply of medicines and vaccines

b) Supply of medical devices and clinical consumables

c) Supply of non-clinical consumables, good and services

d) Workforce

e) Reciprocal healthcare

f) Research and clinical trials

Answer: Please see attached

5) Has your trust budgeted any additional money for contingency planning for/due to the impact of the UK's exit from the EU in March and the potential no-deal Brexit?

Answer: Please see attached. Available upon request

576.18

Asthma

Under the Freedom of Information Act I wish to request the following information:

- How many i) specialist Adult respiratory specialists (ie. on the specialist register) and ii) how many paediatric respiratory specialist (ie on the specialist register) does your trust employ?

Answer: There are currently 12 Respiratory Specialist Dr's employed by the Trust. 4 of these are Training Grade, 6 of these are Career Grade and 2 of these are Consultant Grade.

- How many i) specialist Adult respiratory specialist nurses and ii) how many paediatric respiratory specialist nurses does your trust employ?

Answer: There are currently 4 Respiratory Nurse Specialist employed by the Trust.

- Does your trust provide a specialist asthma service? for i) Adults and ii) Children? If yes, are these i) run by Respiratory specialist paediatricians / and ii) adult physicians (ie on the specialist respiratory register?) If yes, please provide the annual cost associated with running these services

Answer: The Trust does not have a specialist asthma service. We have consultants that see Asthma patients in both adult and children's service but we wouldn't call them a specialist service

- Please provide a figure for the total adult and Paediatric (Children and Young People 0-18) (CYP) population served by the trust

Answer: Approx 290,000

- Please provide the number of emergency department and urgent care centre attendances (Child and CYP) related to "asthma" in each of the last 5 full financial years (up to 2017/18), broken down by financial year

Answer:

Financial Year	No of Adms
Year 2013/14	139
Year 2014/15	150
Year 2015/16	165
Year 2016/17	167
Year 2017/18	184:

- Please provide the number of admissions related to “asthma” for the same time periods.

Answer:

Financial Year	No of ED Atts
Year 2014/15	175
Year 2015/16	212
Year 2016/17	226
Year 2017/18	225

- What is the trust’s annual spend on Salbutamol inhalers and preventer asthma inhalers? Most recent figure is fine.

Answer: Our Pharmacy department asked for some clarity regarding “preventer inhalers. They state there are around 100 on the UK market alone.

577.18

Smoking cessation in children

I want to source the information below relating to smoking cessation. If you are able to respond to these questions it would be greatly appreciated.

Please note that the timeframes referenced below cover the calendar year (Jan-Dec). However, if your data covers the financial year (Apr-Mar) please let us know when providing the data.

FOI request:

Q1. How many children have been given smoking cessation treatments by your Trust over the last three years?

	2016	2017	2018
Those aged under 12			
Aged 12			
Aged 13			
Aged 14			

Aged 15			
Aged 16			
Aged 17			
Aged 18			

Answer: The Trust does not provide a childrens smoking cessation service

Q2. Please provide a breakdown of the number of different types of cessation aids prescribed to children over the last three years:

	2016	2017	2018
Nicotine replacement therapy			
Varenicline (Champix)			
Bupropion (Zyban)			
E-cigarettes			
Other (please specify)			

Answer: The Trust does not provide a childrens smoking cessation service

**578.18
30-day hospital readmission Penalties**

I am writing to you to request the release of information under the Freedom of Information Act.

Since 2011, NHS Trusts in England are subjected to financial penalties for higher than expected 30-day hospital readmission rates. However, information on trust-specific financial penalties is not currently available in the public domain. I hereby request an annual breakdown of all financial penalties imposed on your Trust, starting with financial year 2011/12 and ranging to financial year 2017/18. Specifically, I am requesting the following items listed for each financial year (2011/12; 2012/13; 2013/14; 2014/15; 2015/16; 2016/17; 2017/18):

1. Total amount withheld (in £) in a respective financial year (i.e. the amount of the penalty)
2. Total amount of readmission costs reimbursed in a respective financial year

Answer:

Penalties	2011/ 12	2012/1 3	2013/1 4	2014/1 5	2015/1 6	2016/1 7	2017/1 8
Total Readmissions Penalty	Data not available	£2,303,619	£2,646,776	£2,633,716	£2,855,763	£3,023,105	£2,806,800
Amount Retained by the Commissioners	Data not available	£0	£0	£0	£0	£480,000	£1,015,356
Reimbursed to WHNHST	Data not available	£2,303,619	£2,646,776	£2,633,716	£2,855,763	£2,543,105	£1,791,444

**579.18
Document Management**

Under the Freedom of Information Act, I would like to request information covered under the points:

1. Details of the document management/workflow system you use broken down by supplier;
2. The original date of purchase or contract start date(s) for your document management/workflow system;
3. Details of how you digitise your documentation whilst ensuring that information is GDPR compliant;
4. Details of expenditure on document management for the year 2016, 2017 and 2018 broken down by supplier;
5. Details of your document management/workflow contracts due to expire up until 2020, broken down by supplier and date;
6. If relevant, what is the cost of your annual support and maintenance for the year 2016, 2017 and 2018 for your document management/workflow systems;
7. Details of software solutions/apps you use broken down by supplier;
8. The original date of purchase or contract start date(s) for your current document management/workflow system;
9. Details of expenditure on software solutions and apps for the year 2016, 2017 and 2018 broken down by software solutions supplier;
10. Details of software and app contracts due to expire up and until 2020, broken down by supplier and date;
11. If relevant, what is the cost of annual support and maintenance for the year 2016, 2017 and 2018 for your software solutions and app contracts;
12. Details of your main challenge in regards to efficient document management;
13. Details of expenditure for document storage for the year-2016, 2017 and 2018 broken down by date and storage method;
14. Details on how you capture and retract important information from scanned/digital documents along with the software and supplier used.

Answer: The trust does not currently have a Document management system

580.18

PACS, VNA and RIS provision

PACS

- Who is your current PACS Supplier?
- Please can you confirm when your current PACS contract expires?
- What was the total cost of the acquisition?
- Did you purchase via capital and support, or managed service?
- What is the annual maintenance cost?

VNA

- Who is your current VNA Supplier?
- Please can you confirm when your current VNA contract expires?

- What was the total cost of the acquisition?
- Did you purchase via capital and support, or managed service?
- What is the annual maintenance cost?

RIS

- Who is your current RIS Supplier?
- Please can you confirm when your current RIS contract expires?
- What was the total cost of the acquisition?
- Did you purchase via capital and support, or managed service?
- What is the annual maintenance cost?

Answer: Please see attached. Available upon request.

581.18

Debt collection firms and overseas patients

Answer:

Debt collection firms and overseas patients

I am requesting the following information under the Freedom of Information Act. Please note that this request is not restricted to specifically upfront charges.

This request specifically excludes money owed by private patients seeking to use paid-for private services offered by the Trust.

1. Has the Trust used private debt collection firms to recoup money owed by overseas visitors, migrants and former UK residents who were charged for NHS healthcare treatment by the Trust?

Answer: Yes

2. Has the Trust sold debts owed by overseas visitors, migrants and former UK residents - who were charged for NHS healthcare treatment by the Trust - to private debt collection firms?

Answer: No

If the answer to questions 1 and 2 is 'No', the Trust need not process the remainder of this request.

3. Which private debt collection firms has the Trust used for the purposes referred to in question 1?

Answer: CCI Legal Services

4. Which private debt collection firms has the Trust sold debts to as per question 2?

Answer: Not applicable

5a. The debts of how many overseas visitors, migrants and former UK residents (excluding private patients) did the Trust pass on or sell to private debt collection firms each calendar year for 2016, 2017 and 2018?

Answer: The Trust has referred 1 in 2016 and 1 in 2018.

5b. Please state the combined debt owed for each year's referrals/sales as per question 5a

Answer: £4,456.00

6. What value of the debts referred to each year in response to question 5b has been recouped to date?

Answer: Nothing has been recovered to date.

7. Please provide any information the Trust holds on the conditions the patients referred to in response to question 5a were treated for (this may be provided as categories of healthcare, such as ENT and nephrology), or alternatively the treatments that were subject to the imposed charges (these may be grouped into over-arching categories for data protection reasons)

Answer:

General Medicine

Chest & Arm pain

8. Please state what policies the Trust operates (or requires debt collection firms to operate) with regard to safeguarding vulnerable individuals when transferring or selling to debt collection firms the debts of overseas visitors, migrants and former UK residents who were charged for NHS healthcare treatment by the Trust

Answer: Relevance to recovering debt / Not applicable.

Please email me the information, preferably via an Excel spreadsheet (not pdf).

582.18

Patient Theft

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

1. Please disclose the number of reported thefts from patients at all sites in your trust in each of the following calendar years:
 - a. 2018
 - b. 2017
 - c. 2016

Answer: See below

2. For each report of theft from patients in the following calendar years, please provide a breakdown of the item/s stolen, their expected value and the full name of the site where the theft was reported.

- a. 2018
- b. 2017
- c. 2016

Answer: See below

	2016	2017	2018
Total number of reported thefts from patients.	2	5	8

2016	Items Missing	Expected Value	Site of incident
Case 1	Money	£100	Hospital
Case 2	2 x underwear briefs and perfume	£12	Hospital

2017	Items Missing	Expected Value	Site of incident
Case 1	Money	£50	Hospital
Case 2	Money	£40	Hospital
Case 3	Money	£100	Hospital
Case 4	Wallet & Bank Cards	Not provided	Hospital
Case 5	2 x Watches	Not provided	Hospital

2018	Items Missing	Expected Value	Site of incident
Case 1	Purse & Money	£10	Hospital
Case 2	Money	£70	Hospital
Case 3	Money	£100	Hospital
Case 4	Leather Bag	Not Provided	Hospital
Case 5	Phone	Not Provided	Hospital
Case 6	Wedding Ring & Ipad	Not Provided	Hospital
Case 7	Money	£20	Hospital

Case 8	Bag, Phone & charger, toiletries, medication, money	Not Provided	Hospital
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583.18

Patients sectioned under Sec 136

I am writing to make an open government request for all the information to which I am entitled under the Freedom of Information Act 2000.

Please send me:

1. For 2018, within the hospitals under your authority...
 - a. How many people, sectioned under sec 136 of the Mental Health Act 1983 were placed in a Mental Health Unit as their designated "place of safety"
 - b. How many people, sectioned under sec 136 of the Mental Health Act 1983 were placed somewhere else within the hospital, other than a Mental Health Unit as their designated "place of safety"
 - c. How many people were admitted to hospital after being sectioned under sec 136 of the Mental Health Act 1983
 - d. How many people sectioned under sec 136 of the Mental Health Act 1983 were unable to have the hospital as their designated "place of safety" due to lack of available beds
2. Same for 2017
3. Same for 2016

A suggestion for the layout is below:

	How many people, sectioned under sec 136 of the Mental Health Act 1983 were placed in a Mental Health Unit as their designated "place of safety"	How many people, sectioned under sec 136 of the Mental Health Act 1983 were placed somewhere else within the hospital, other than a Mental Health Unit as their designated "place of safety"	How many people were admitted to hospital after being sectioned under sec 136 of the Mental Health Act 1983	How many people sectioned under sec 136 of the Mental Health Act 1983 were unable to have the hospital as their designated "place of safety" due to lack of available beds
Number of	XXXX	XXXX	XXXX	XXXX

people				
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I would like the above information to be provided to me as electronic copies.

Answer: The Trust does not place anyone on a section 136.

584.18

Overseas visitors

1. Please tell me how many overseas visitor managers are employed by your trust?

Answer: 0

2. Please tell me how many overseas visitor officers are employed by your trust? (in addition to any overseas visitors managers)

Answer: 0

3. Please tell me how much money was recouped from overseas visitors in a) 2018 and b) 2017

Answer: a) 2018 – £39,172.18 and b) 2017 - £16,474.76

4. Please tell me how much is still owed to the trust from overseas visitors to date?

Answer:

2018 - £35,855.94

2017 - £51,065.34

5. Please state the highest bill still owed by an overseas visitor for treatment in 2018?

Answer: £17,042.00

6. For question 5, please state the nationality of the individual and the type of treatment.

Nationality – Indian

Treatment - Non-Malignant Hepatobiliary / Pancreatic Disorder including haemodialysis for acute kidney injury

585.18

Pathology Department and Digital Solution

I am writing to you under the Freedom of Information Act 2000, to request the following information from your Cellular Pathology Department & possibly IM&T. This inquiry relates to your LIMS system (Laboratory Information Management System) and Digital Pathology in the Trust. I am happy to receive your response via email.

If it is not possible to provide the information requested due to the information exceeding the cost of compliance limits identified in Section 12, please provide advice and assistance under the Section 16 obligations of the Act as to how I can refine my request. If you can identify any ways that my request could be refined, please provide further advice and assistance to indicate this.

- 1) What LIMS does your Trust currently use in the Cellular Pathology Department?

Answer: WinPath

- 1a) Is this LIMS an all in one solution across all disciplines in Pathology?

Answer: Yes

- 1b) Can you please indicate the name of the supplier of the LIMS system for Cellular Pathology and the wider disciplines within Pathology. Can you also detail the contract expiry date?

Answer: Clinisys

- 1c) Can you indicate if the LIMS is something you may consider procuring in the next 2 years? If there are intentions of procuring a LIMS system in the next two years how much funding does the trust have to implement this?

Answer: No, Walsall Manor Hospital will not be procuring a new LIMS in the next 2 years

- 1d) If not- is there a reason why the Trust is not procuring a LIMS in this timeframe (be this new or a replacement)?

Answer: Pathology services (at Walsall Manor Hospital) will no longer be managed by Walsall Manor Hospital in the given 2 year time frame and so it will not require a new LIMS.

- 2) What Digital Pathology Solution do you currently use in the Cellular Pathology Department?

Answer: None

- 2a) Does the Digital Pathology Solution encompass other disciplines throughout Pathology or the wider diagnostic disciplines such as Radiology MRI CT PET?

Answer: N/A

- 2b) Can you please indicate the name of the supplier of the Digital Pathology Solution for the Cellular Pathology Department, in particular the manufacturer of the Digital Slide Scanner? Can you also detail the contract expiry dates?

Answer: N/A

2c) Can you indicate if you are looking to procure a Digital Pathology Solution in the next two years if not already procured? If there are intentions of procuring a Digital Pathology system in the next two years how much funding does the trust have to implement this?

Answer: No, Walsall Manor Hospital will not be procuring a new Digital Pathology Solution in the next 2 years

2d) If not- is there a reason why the Trust is not looking to procure a Digital pathology Solution in this timeframe (be this new or a replacement)?

Answer: Pathology services (at Walsall Manor Hospital) will no longer be managed by Walsall Manor Hospital in the given 2 year time frame and so it will not require a new Digital Pathology Solution.

- 3) Could you please give me the name/ title/email/telephone details of the Trust employee(s) who are responsible for your LIMS?

Answer: Mark Taylor Associate Director IT. Email: mark.taylor@walsallhealthcare.nhs.uk. Telephone: 01922 721172

- 4) Could you please give me the name/ title/email/telephone details of the Trust employee(s) who is responsible for your Digital Pathology system?

Answer N/A

- 5) Which Cancer Alliance does the Trust belong too?

Answer: West Midlands Cancer Alliance

Who is in charge of this alliance? Please can you provide their title/email/telephone if you have these details?

**Answer: Please contact: <https://www.england.nhs.uk/mids-east/clinical-networks/west-midlands-clinical-network/our-networks/cancer/cancer-alliance/>
For further details**

586.18 Junior Doctors Contract

I am writing to you under the Freedom of Information Act 2000 to request the following information.

- How many exception reports were submitted between September 2017 and September 2018?

Answer: 57

- How many exception reports resulted in Time Off In Lieu being given?

Answer: 6

- How many hours of TOIL were undertaken?

Answer: 10 hours

- How many exception reports resulted in payment for extra hours?

Answer: None

- How many fines were issued and what was the total value of the fines?

Answer: Please see attached

- How many reports were escalated to level 1, level 2 and level 3?

Answer: Level 1 10, Level 2 0, Level 3 0

- How many reports led to service or rostering changes?

Answer: None

- Please provide a copy of your exception reporting policy and/or guidance.

Answer: Please see attached

- Please provide a copy of the most recent guardian of safe working hours report to the board.

Answer: Please see attached

- What is the audit process for exception report fines?

Answer: Please see attached. Attachement available upon request.

587.18

Staff sick due to Mental Health

Please could I make the following request under the Freedom of Information Act?

1- How many medical staff (doctors and nurses) were off sick in 2018 due to mental health reasons?

Answer: 166 members of the Medical and Dental and Nursing and Midwifery Registered staff groups were off sick due to Anxiety/stress/depression/other psychiatric illnesses in 2018.

2- Please could I have a breakdown of the figures for both doctors and nurses separately?

Answer; 9 members of the Medical and Dental staff group were off sick due to Anxiety/stress/depression/other psychiatric illnesses in 2018.

157 members of the Nursing and Midwifery Registered staff group were off sick due to Anxiety/stress/depression/other psychiatric illnesses in 2018.

3- How many days in total were taken off due to mental health reasons in 2018?

Answer: 457.80 FTE days were taken off sick due to Anxiety/stress/depression/other psychiatric illnesses in 2018 by the Medical and Dental staff group.

5822.45 FTE days were taken off sick due to Anxiety/stress/depression/other psychiatric illnesses in 2018 by the Nursing and Midwifery Registered staff group.

4- How many medical staff (doctors and nurses) were off sick ten years earlier (2008) due to mental health reasons?

Answer: We cannot provide any information from 2008 or any comparative analysis of 2018 data. Due to a changeover in reporting system we do not hold this data in a format that is suitable for this level of analysis.

5- Please could I have a break down of the figures for both doctors and nurses separately for 2008?

Answer: We cannot provide any information from 2008 or any comparative analysis of 2018 data. Due to a changeover in reporting system we do not hold this data in a format that is suitable for this level of analysis.

6- How many days in total were taken off due to mental health reasons in 2008?

Answer: We cannot provide any information from 2008 or any comparative analysis of 2018 data. Due to a changeover in reporting system we do not hold this data in a format that is suitable for this level of analysis.

7- Please could I also request a break down of what categories comes under 'mental health'
- eg stress etc.

Answer: The S10 sick code covers Anxiety, stress, depression, other psychiatric illnesses.

588.18

Staff fired from Trust

Please can I request the following information under the FOI act?

- How many doctors and nurses (a breakdown of each if possible) were fired from your trust in 2018 for committing crimes?

Answer: Two Staff Nurses were dismissed on a Disciplinary basis

- Please could I also request a breakdown of what these crimes were?

Answer: Both were for assault of a patient

- How many doctors and nurses (a breakdown of each if possible) were fired ten years earlier in 2008 for committing crimes?

Answer: This information was not recorded on our system in 2008

- Please could I also request a breakdown of what these crimes were?

Answer: N/A

589.18

Lost property

I'd like to know the number of electronic items reported missing at your trust over the last three calendar years broken down by year, 2018, 2017, 2016.

- Mobile phones
- Laptops
- Tablet computers

If possible, please list the make of the devices e.g. 'Apple', no worries if this is not possible.

Answer:

	2016	2017	2018
	Not recorded	Not recorded	
Laptop			2
Mobile Phone	1	2	3
Tablet / Handheld	16	48	59

590.18

Freedom to speak up guardian

Please provide the following data:

1. When did the trust first appoint a Freedom To Speak Up Guardian, champion, ambassador or equivalent?

Answer: October 2016

- 2.. How many individuals currently hold such posts within the trust?

Answer: Three

3. Please give the professional backgrounds and seniority of all the Freedom To Speak Up Guardians or equivalent who have ever been appointed.

Answer:

Community Podiatrist

Antimicrobial Lead

Senior Ward Sister

4. Is there ring fenced time for these posts, and if so what is the total WTE?

Answer:

Yes. 2 days per individual

KS = 12.25 hours

VF = 15 hours

SR = 7.5 hours/15 hours depending on clinical commitments and release

5. Please advise if any Freedom To Speak Up Guardians have stepped down, and if so, how long were they in post as Freedom To Speak Up Guardians?

Answer: One left to work abroad after 1 year 3 months in post

6. Please provide by, financial year, a spreadsheet which gives the number, broad nature of concerns raised with your Freedom To Speak Up Guardian(s) or equivalent, and the outcome.

Answer: See report to board for the February 2019 meeting which summarises concerns, via the link below:

<https://www.walsallhealthcare.nhs.uk/about-us/how-we-are-run/board-papers/>

7. Please advise how many times your Freedom To Speak Up Guardian(s) or equivalent have escalated any whistleblowing case issues to:

i. the National Guardian

Answer: 5

ii. the Care Quality Commission

Answer: 5

591.18

Operations for crohn's disease and ulcerative colitis

I would like to put in an FOI request to find out the number of patients treated by operation for crohn's disease and ulcerative colitis in the years:

2015-2016

Answer: 244

2016-2017

Answer: 218

2017-2018

Answer: 280

592.18**Deaths from MRSA and c. diff**

I was hoping you could answer the following questions?

Draft Freedom of Information request to all NHS trusts

To be mapped against deaths from MRSA and c. diff in each NHS trust area.

1. What point of care facilities does your trust have for the diagnosis of:

- a. Group A streptococcal bacteria
- b. Influenza virus
- c. Clostridium difficile
- d. Staphylococcus aureus

Answer: Q1 – The Trust does not currently have any POC testing

2. Does your trust require diagnostic tests before prescribing:

- a. Penicillins
- b. Aminoglycosides
- c. Tetracyclines
- d. Macrolides
- e. Co-amoxiclav
- f. Cephalosporins
- g. Carbapenems
- h. Quinolones

Answer: No

3. What plans do your trust have to procure new diagnostic equipment using the additional funding for additional diagnostic equipment and staff capacity?

Answer: There are not currently any POC testing business cases pending

593.18**Safe Aseptic Practice**

Please find attached a request for information according to the terms of the Freedom of Information Act (FOIA).

The pdf pro-forma attached provides the background and purpose to this request that is best completed by a Chief Nurse or Director for Infection Prevention (DIPC).

It's attached as an editable PDF document that requires Adobe Acrobat Reader or equivalent PDF reader. Please open the pdf application first and then open the document from that. As an alternative the pro-forma is also attached in Microsoft Word format.

The Association for Safe Aseptic Practice (The-ASAP) actively supports healthcare providers to deliver safe aseptic technique as per the requirements of the Health & Social Care Act 2009, 2012, 2015, and this request is submitted in good faith with the best of intentions. If you have any queries please contact me. We are happy to advise.

Answer:



To the responsible FOI Officer,

These questions are best answered by the Chief Nurse / DIPC

As you will be aware, healthcare organisations are obligated to meet the requirements for the critical clinical competency of aseptic technique in the Health & Social Care Act 2008, and associated regulation 2010, 2012 and 2015 – monitored and randomly assessed by the CQC.

Health & Social Care Act 2008, 2010, 2012, 2015: Statutory requirements for aseptic technique:

1. All relevant staff should receive **education, training and assessment**
2. The technique should be **standardised** across the organisation
3. Compliance should be monitored by **audit**

Background to this FOI request

Aseptic technique is a generic term evolved historically without clear consensus on its principles and process. In contrast, Aseptic Non Touch Technique (ANTT®), is recognised by NICE as a, '**Specific type of aseptic technique with a unique theory and practice framework**' (NICE 2012). ANTT is now the most commonly used aseptic technique in the UK and is used widely internationally with Governments increasingly mandating its use at a national level, such as in Australia and Wales.

The purpose of this FOI survey is to:

- a) Explore how organisations are meeting the above requirements of the Health & Social Care Act 2008 for aseptic technique.
- b) Establish the utilisation of ANTT in England in the NHS and private sector.
- c) Support organisations to meet the above statutory requirements.

The Association for Safe Aseptic Practice (The-ASAP), is a not-for-profit, non-governmental organisation that oversees the development and dissemination of ANTT. It supports healthcare organisations to implement, practice and sustain safe aseptic practice. Please note that ANTT® is trademarked only to help protect the integrity of the framework - not to inhibit its utilisation. ANTT core resources are provided freely.

Survey information

The name of your organisation: Walsall Healthcare NHS Trust__

1. Does your organisation have a standard aseptic technique? **Yes** / No

IF YES: Please continue to **question 2.** **IF NO:** Please go direct to **question 9.**

2. What is your standard aseptic technique called?

a) We use ANTT **Yes** / No (If no go to 2b)

b) We use an alternative standard aseptic technique: (State what this standard technique is termed and where it is defined) _____

3. Is ANTT or your alternative standard aseptic technique stipulated in policy(s)? **Yes** / No

4. Does your organisation provide specific education and training for ANTT or your alternative standard aseptic technique? **Yes** / No

5. Does your organisation provide clinical competency assessment for ANTT or your alternative standard aseptic technique? Yes / **No**

Comment: _____

6. Is compliance to ANTT or your alternative standard aseptic technique audited? Yes / No

Comment: Forms part of standard audit of procedures and reviews

7. Does your organisation provide a periodic competency assessment update? Yes / **No**

Frequency: Recommended to update bi-annually via e-learning

8. Does your organisation use ANTT Procedure Guidelines? **Yes** / No

If you answered 'Yes' to Question 1 you have completed the survey – thank you

If you answered 'No' to Question 1 please answer the below:

9. What best describes the different aseptic techniques used in your organisation:

(Please tick all that apply)

- ☐ **Aseptic** technique
- ☐ **ANTT**
- ☐ **Sterile** technique
- ☐ **Clean** technique
- ☐ **Non-touch** technique
- ☐ A combination of the above

☐

Other

Describe: _____

594.18

Paediatric Allergy Services Survey

Before Christmas, all trusts in the UK were sent a brief questionnaire establishing whether they provided paediatric allergy services. This was done as a Freedom of Information request (Your reference number if given:), the result being that a response was received from every single trust in the UK. You identified your trust as being one of the ones that is providing paediatric allergy services.

We are now requesting more detailed information about that service. This again, is being undertaken as an FoI request. We appreciate that this results in a legal requirement to provide the data, but hope the data provided will be immensely valuable for clinicians providing paediatric allergy services, for patients as we establish best practice, and for the BSACI in understanding better what resources centres need going forward.

Volunteers have completed the survey which takes 30 to 45 minutes to complete. Explicitly, we do not require colleagues to look up any specific service data - they are asked to approximate responses at certain points - absolute precision is not necessary.

We very much encourage it to be completed using the link to the online questionnaire, as this includes routing which ensures colleagues only have to provide responses to questions that pertain to their service, and skips sections that are irrelevant for their trust. The online questionnaire offers the opportunity at the end to print out the completed questionnaire (and/or save it as a pdf file) so colleagues can provide a copy for their trusts FoI officer which they will require.

We very much hope the results of this survey will help to contribute to improving the provision of paediatric allergy services in the UK.

Answer: Please see attached questionnaire. Available upon request

595.18

Total spend on graduated compression hosiery in 2017

1 Please provide figures for total spend on graduated compression hosiery in 2017 (excluding anti-embolism stockings)

Answer: The trust does not purchase any of this category of goods directly

2 Which route do you use to purchase these items? NHS Supply Chain or direct from manufacturer?

Answer: N/A

3 Which departments deliver the garments to the patients? E.g surgical appliances, lymphoedema, vascular etc

Answer: N/A

I am writing to request information under the Freedom of Information Act 2000.

596.18

Free Promotional Nappies

For the financial year 2018/19 or the calendar year 2018-2019, whichever is more convenient, please provide the following information.

1. Do you distribute any free promotional disposable nappies (such as Pampers) or reusable nappies to parents at any services, including (but not exhaustive of) antenatal, maternity, midwife, post-natal and family services?

Answer: Yes

If the answer is yes to 1, please answer questions 2-6.

2. Which disposable or reusable nappy brand do you allow to distribute their promotional nappies?

Answer: Pampers

3. Which services are they distributed at and how many parents use these facilities annually?

Answer: Bounty distribute in new mother packs – this pack is given to ALL new mothers and will have a pampers sample nappy in.

4. How frequently a year have these disposable or reusable nappy brands been able to distribute their promotional material at these services?

Answer: Bounty company continuously provide us with a service visiting mothers on the postnatal ward.

5. What is the process for allowing disposable or reusable nappy brands to distribute at your services and who signs it off?

Answer: Bounty is our recognised visitor.

6. Is there any remuneration for the NHS from these disposable or reusable nappy brands for distributing their promotional material?

Answer: No

597.18

Digital Dictation

Under the freedom of information act please could you answer the following questions:

1. Does your Trust use digital dictation? If yes please could you answer the following:

- Name of solution **Answer: Nuance via Winscribe**
- Name of supplier **Answer: Nuance**
- Date installed **Answer: March 2013**
- Which departments currently use digital dictation?

Answer:

Women's & Children's Division:

Obstetrics and Gynaecology

Paediatrics

Pathology

Division of Surgery:

Anaesthetics

Breast Surgery

Ear Nose & Throat

General Surgery

Maxillo-Facial Surgery/Orthodontics

Oncology

Ophthalmology

Rheumatology

Trauma & Orthopaedics

Urology

Division of Medicine & Long Term Conditions

Accident & Emergency

Assessment Medical Unit

Cardiology

Dermatology
Diabetes
Elderly Care
Gastroenterology
Long Term Conditions
Nephrology
Neurology
Respiratory/Thoracic Medicine

- Are you planning to replace current digital dictation solution?

Answer: No

- What are the timescales for replacement?

Answer: N/A

2. Does your Trust have an in-house transcription service / typing pool?

Answer: Medical Secretary and Support Secretaries

3. Does the Trust outsource transcription services? If you do, please could you tell me when your current contract is due to be reviewed?

Answer: No

4. The name, job title of the person responsible within the Trust for clinical work flow?

Answer: Can you please specify the correct job title you require for us to answer this question.

598.18

Directors

Under the freedom of information act please could provide with the name and email address of the person that holds the following position within your trust:

- Chief Information Officer

Answer: Trust Doesn't Have one

- IT Director

Answer: Daren Fradgley daren.fradgley@walsallhealthcare.nhs.uk

- Operations Director

Answer: Trust Doesn't Have one

- Chief Operating Officer

Answer: Margaret Barnaby margaret.barnaby@walsallhealthcare.nhs.uk

- Operations Service Manager

Answer: Trust Doesn't Have one

- Director of Administration

Answer: Trust Doesn't Have one

- IT Service Manager

Answer: Mark Taylor Mark.Taylor@walsallhealthcare.nhs.uk

599.18 Cladding

Please can you tell me -

- if any of the trust's buildings have any type of cladding on the outside

Answer: Yes

- If so, how many buildings have cladding, how tall are the buildings with cladding and what type of cladding is it

Answer: 1 Building, Main hospital

**Eurobond Rockspan Extra 125mm cladding panels
PermaRock Render with mineral wool fibre insulation.
Tresspa panels with mineral wool fibre insulation.
Kalzip wall cladding with mineral wool fibre insulation.
Brickwork cladding.**

Height 13.55m

- how many of the trust's buildings are of timber frame construction

Answer: 1

600.18

Audited Accounts (Annual Accounts)

Please send me a copy of the audited accounts for the year 2018-2019.

Answer: Exemption under Section 22 (Information Intended for Future Publication) has been applied to this request.

Please note that our 2018/19 Annual Report is due to be published on our Trust website by the end of July 2019 and will be accessible via the following link.

<https://www.walsallhealthcare.nhs.uk/our-publications.aspx>

601.18

Maternity

1. Please tell me how many a) consultant obstetricians and b) anaesthetists are onsite in your maternity department between the hours of **10pm to 8am, Monday to Sunday?**

Obstetricians Answer: Monday to Thursday 1 Consultant onsite. Friday – Sunday – 0 consultant onsite however, a Consultant Non-resident is available out of hours who will attend onsite if required.

Anaesthetists Answer: Between 10 pm to 8 am there is no consultant anaesthetist onsite .only on –call

2. Please tell me how many a) consultant obstetricians and b) anaesthetists are on-duty but not onsite between the hours of **10pm to 8am, Monday to Sunday?**

Obstetricians Answer: Monday – Sunday – 1 Consultant not onsite (however see above for Monday – Thursday onsite cover as we have both).

Anaesthetists Answer: Between the hours of 10pm to 8am, Monday to Sunday 1 consultant anaesthetist on duty for obstetrics and theatres One consultant anaesthetist on duty but not on site for ITU

3. Please tell me how many a) consultants obstetricians and b) anaesthetists are onsite on **Saturday or Sunday**, between the hours of **8am to 6pm?**

Obstetricians Answer: 1 Consultant on site between the hours of 8.30am until 11.30am as a minimum on Saturday and Sunday.

Anaesthetists Answer: On Saturday or Sunday, between the hours of 8am to 6pm consultant anaesthetist are on call but not onsite unless they are called

4. Please state how many a) consultant obstetricians and b) anaesthetists are onsite between the hours of **8am to 6pm, Monday to Friday?**

Obstetricians Answer: 1 Consultant is onsite between 8.30am – 7pm for Obstetrics and Gynaecology Emergency cover and labour ward.

Anaesthetists Answer: Between the hours of 8am to 6pm, Monday to Friday there is one consultant on site for labour ward with a middle grade and SHO

5. Please state the maximum distance on-duty consultant obstetricians and anaesthetists can live away from the hospital?

Obstetricians Answer: 10 miles

Anaesthetists Answer: 10 miles

605/18 Charging Overseas Patients

Please could you provide me with the following information under the Freedom of Information Act:

- The number of patients who were charged for their care under the National Health Service (Charges to Overseas Visitors) Regulations 2015 in the financial years 2015-16, 2016 – 17, 2017 -18

Financial Year	15/16	16/17	17/18
No. of Patients	9	14	16

- The budget estimate of the amount of income to be generated from charging patients under the National Health Service (Charges to Overseas Visitors) Regulations 2015 for the financial years 2015-16, 2016 – 17, 2017 -18

The Trust does not budget for income regarding overseas patients.

- The actual amount of income generated from charging patients under the National Health Service (Charges to Overseas Visitors) Regulations 2015 2015-16, 2016 – 17, 2017 -18

Financial Year	15/16	16/17	17/18
Actual	113,010.44	16,964.15	56,848.10

- Any Key Performance Indicators relating to the generation of income from charging patients under the National Health Service (Charges to Overseas Visitors) Regulations 2015 2015-16, 2016 – 17, 2017 -18

Not applicable.

- The amount of unpaid invoices associated with charges issued under the National Health Service (Charges to Overseas Visitors) Regulations 2015

Financial Year	15/16	16/17	17/18
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Unpaid Invoices	101,746.44	12,752.57	40,898.34
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- The amount of debt due to unpaid invoices for charges issued under the National Health Service (Charges to Overseas Visitors) Regulations 2015 which has been written off in the financial years 2015-16, 2016 – 17, 2017 -18

No debt has been written-off during 2015-16 to 2017 -18

- The number of patients who have been issued with an invoice for the provision of healthcare under the National Health Service (Charges to Overseas Visitors) Regulations 2015 prior to the receipt of treatment in the financial years 2015-16, 2016 – 17, 2017 -18

None

- The number of patients who have been issued with an invoice for healthcare under National Health Service (Charges to Overseas Visitors) Regulations 2015 but did not subsequently receive treatment in the financial years 2015-16, 2016 – 17, 2017 -18

None

603.18

Use of Synacthen 250mcg/1ml

I need to find out how many vials of Synacthen 250mcg/ml injection have been used in hospitals in UK.

Could you please supply the number of Synacthen 250mcg/1ml injection for your trust for the last 5 to 10 years please?

Answer: Due to a system upgrade we can only provide data from October 2016. As at 25th February we have had 250microgram/1mL INJECTION (1 amp) = 313 AMPS

604.18

Volunteers

Hi, Please see below Freedom of information request.

- Please can you confirm the number of staff employed within your trust that are responsible for the day to day management / direct supervision of volunteers. For example: Volunteer Co-ordinations, Volunteer Service Managers, Volunteer Administrators etc. (To confirm this is only staff who's main responsibilities are for Trust volunteers)

Answer: 1

- Could you please also provide the number of hours these staff are employed to work.

Answer: 37 ½ hrs pw

- Please also confirm roughly the total number of volunteers within your trust (this does not need to be an exact figure)

Answer: 272

- Finally could you please confirm which division your Volunteer Service sits within e.g. Elective, Hotel / Support Services, Corporate etc.

Answer: Corporate

605.18

Charging Overseas Patients

Please could you provide me with the following information under the Freedom of Information Act:

- The number of patients who were charged for their care under the National Health Service (Charges to Overseas Visitors) Regulations 2015 in the financial years 2015-16, 2016 – 17, 2017 -18

Financial Year	15/16	16/17	17/18
No. of Patients	9	14	16

- The budget estimate of the amount of income to be generated from charging patients under the National Health Service (Charges to Overseas Visitors) Regulations 2015 for the financial years 2015-16, 2016 – 17, 2017 -18
-

Answer: The Trust does not budget for income regarding overseas patients.

- The actual amount of income generated from charging patients under the National Health Service (Charges to Overseas Visitors) Regulations 2015 2015-16, 2016 – 17, 2017 -18

Financial Year	15/16	16/17	17/18
Actual	113,010.44	16,964.15	56,848.10

- Any Key Performance Indicators relating to the generation of income from charging patients under the National Health Service (Charges to Overseas Visitors) Regulations 2015 2015-16, 2016 – 17, 2017 -18

Answer: Not applicable.

- The amount of unpaid invoices associated with charges issued under the National Health Service (Charges to Overseas Visitors) Regulations 2015

Financial Year	15/16	16/17	17/18
Unpaid Invoices	101,746.44	12,752.57	40,898.34

- The amount of debt due to unpaid invoices for charges issued under the National Health Service (Charges to Overseas Visitors) Regulations 2015 which has been written off in the financial years 2015-16, 2016 – 17, 2017 -18

Answer; No debt has been written-off during 2015-16 to 2017 -18

- The number of patients who have been issued with an invoice for the provision of healthcare under the National Health Service (Charges to Overseas Visitors) Regulations 2015 prior to the receipt of treatment in the financial years 2015-16, 2016 – 17, 2017 -18

-

Answer: None

- The number of patients who have been issued with an invoice for healthcare under National Health Service (Charges to Overseas Visitors) Regulations 2015 but did not subsequently receive treatment in the financial years 2015-16, 2016 – 17, 2017 -18

Answer: None

606.18

EU Nationals and Non-EU foreigners working for Walsall Healthcare NHS

I am writing to you under the Freedom of Information Act 2000 to request the following information:

1. The number of EU nationals (non UK citizens) working as staff for this NHS Trust in the years between 2012 and 2018, both included.

Year	Number of EU nationals (non UK citizens) working as staff for this NHS Trust
2012	48
2013	70
2014	69
2015	117
2016	105
2017	84
2018	80

2. The number of foreigners non-EU nationals working as staff for this NHS Trust in the years between 2012 and 2018, both included.

Year	Number of non EU nationals or non UK citizens working as staff for this NHS Trust
2012	260
2013	282
2014	292
2015	285
2016	295
2017	303
2018	322

3. The number of workers with unknown nationality working for this NHS Trust in the years between 2012 and 2018, both included.

Year	Number of unknown nationality staff working for this NHS Trust
2012	1
2013	0
2014	2
2015	2
2016	1
2017	1
2018	2

4. If possible, I would like to get all this data broken down into the following categories: nursing staff, medical staff, healthcare assistants and administration staff.

Number of EU nationals (non UK citizens) working as staff for this NHS Trust	Year							
Staff Group	2012	2013	2014	2015	2016	2017	2018	Grand Total
Add Prof Scientific and Technic	1	2	1	1				5
Additional Clinical Services	2	3	4	27	16	8	5	65
Administrative and Clerical	1	3	2	2	3	3	4	18

Allied Health Professionals	7	9	7	6	5	6	9	49
Estates and Ancillary	4	5	5	5	5	6	7	37
Healthcare Scientists		1	2	2	2	2	1	10
Medical and Dental	22	29	29	23	29	25	25	182
Nursing and Midwifery Registered	11	18	17	47	39	30	28	190
Students			2	4	6	4	1	17
Grand Total	48	70	69	117	105	84	80	573

Number of non EU nationals or non UK citizens working as staff for this NHS Trust	Year							
Staff Group	2012	2013	2014	2015	2016	2017	2018	Grand Total
Add Prof Scientific and Technic	3	2	2	2	2	1	3	15
Additional Clinical Services	12	15	21	25	30	31	31	165
Administrative and Clerical	8	10	12	11	10	14	14	79
Allied Health Professionals	15	17	15	13	9	8	8	85
Estates and Ancillary	30	31	32	30	27	26	27	203
Healthcare Scientists	5	5	4	3	3	3		23
Medical and Dental	96	111	108	113	128	132	134	822
Nursing and Midwifery Registered	91	91	96	87	84	86	103	638
Students			2	1	2	2	2	9
Grand Total	260	282	292	285	295	303	322	2039

Number of unknown nationality staff working for this NHS Trust	Year						
Staff Group	2012	2014	2015	2016	2017	2018	Grand Total
Additional Clinical Services			1	1		1	3
Administrative and Clerical	1				1	1	3
Allied Health Professionals		1					1
Medical and Dental		1					1
Nursing and Midwifery Registered			1				1
Grand Total	1	2	2	1	1	2	9

Special measures scheme

Can you please tell me for the years 2013, 2014, 2015, 2016, 2017, 2018 and 2019

- 1) If your trust was in 'special measures' due to quality or financial reasons. (Please specify, either quality, financial or quality and financial reasons.)

Answer: I can confirm WHT are in Quality special measures but NOT financial to date

- 2) For the years when your trust entered or exited special measures, please supply me with the month when that happened (e.g. entered special measures March 2013; exited August 2014; re-entered January 2017; exited again in February 2019).

Answer: Entered January 2016. Not exited yet.

- 3) Please tell me the name of the 'improvement director(s)' appointed at the time your trust went into special measures, between which dates they were working at your trust and what their salary was during those periods (or whatever job title was given to the person appointed by NHS Improvement to oversee the process - please see this page which refers to the ['improvement director'](#))

Answer: Sue Holden was the Improvement Director allocated to the Trust by NHS Improvement (NHSI). The Trust did not pay them a salary as the Improvement Director is employed by NHSI and therefore paid by them. She worked for the Trust from July 2016 until April 2019.

- 4) Please tell me your most recent CQC rating for each of the years 2013-2019.

Answer: The 2019 report is due in the summer of 2019. The other years information can be found on the CQC's official website

<https://cqc.org.uk/>

608.18

Details of decision makers for IT/Telecoms purchases

To whom it may concern,

I am writing to make an open government request for information to which I am entitled under the Freedom of Information Act 2000.

Accordingly, please could you send me, the names and contact details, including email address of any/all person(s) who are involved in the decision making-process for the Procurement of Telecoms and IT Hardware and Services for your organisation. (Eg Procurement, IT, Sustainability roles)

I would like the above information to be provided to me as electronic copies – ie via email.

Answer:

Procurement - Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Russell Caldicott email: russell.caldicott@walsallhealthcare.nhs.uk and telephone number is 01922 721172.

IT – Mark Taylor – mark.taylor@walsallhealthcare.nhs.uk telephone 01922 721172

609.18

How many patients treated for deep vein thrombosis and pulmonary

Answer:

**Counts of patients discharged
between 01/01/2018 and
31/12/2018 with a diagnosis of
DVT or PE in any diagnosis
position**

MONTH	Count
2018 (01) Jan	34
2018 (02) Feb	28
2018 (03) Mar	28
2018 (04) Apr	37
2018 (05) May	26
2018 (06) Jun	30
2018 (07) Jul	36
2018 (08) Aug	34
2018 (09) Sep	30
2018 (10) Oct	33
2018 (11) Nov	34
2018 (12) Dec	41
Total	391

610.18

Colonoscopies

I am writing to request access to the below information under the Freedom of Information Act 2000:

Information request

Has your hospital performed any colonoscopies from January 1, 2018 till December 31, 2018? If the answer is 'yes', could you provide me the no. of colonoscopies performed during this period.

Answer: Exemption under section 21 (information available by other means) has been applied to this request.

This information is publically available on the NHS England website. It can be found under Diagnostic Waiting time and activity, which is broken down by provider and test. This will allow you to see how many colonoscopies were performed during the time period. The data available goes back as far as 2008-09

**611.18
Bowel Cleansers**

I am writing to request access to the below information under the Freedom of Information Act 2000:

Information request – 1

Has the pharmacy of your hospital dispensed any bowel cleansing preparations from January 1, 2018 till December 31, 2018?

Answer: Yes

Information request – 2

If the answer is 'yes' to request 1, could you please send me below details:

- Name of dispensed brand(s) and number of packs dispensed in the 12 month period (January 1, 2018 till December 31, 2018).

BRAND	PACKS	
MOVIPREP	3642	Packs
PICOLAX	30	Packs
KLEANPREP	15	packs

**612.18
Cybersecurity**

1. Are you aware of the Minimum Cyber Security Standard, published 25th June 2018?

- a. Yes
b. No

2. What is your annual dedicated budget for cybersecurity (including personnel and technology)?

- a. £10,000 or less
b. £10,001 - £50,000

- c. £50,001 - £100,000**
- d. £100,001 - £500,000
- e. £500,001 - £1,000,000
- f. £1,000,001 - £5,000,000
- g. £5,000,001 - £10,000,000
- h. £10,000,001 or more

3. Approximately how many cyber-attacks (of any kind) have you experienced in your organisation in these 12-month periods?

Answer:

	None	1 – 50	50 – 100	100 – 200	200 – 500	500 - 1000	1000+
1st January 2017 – 31st December 2017	No Reports						
1st January 2018 – 31st December 2018			1300				

4. Which of the following attack / cybersecurity threat types have been detected by your organisation? [Select all that apply]

- a. Hacking
- b. Phishing**
- c. Malware**
- d. Ransomware
- e. Accidental/careless insider threat
- f. Malicious insider threat
- g. Foreign governments
- h. Crypto mining
- i. Other, please specify: _____

5. Which of the following form part of your cybersecurity defence technology strategy? [Select all that apply]

- a. Firewall
- b. Antivirus software
- c. Network device monitoring
- d. DNS filtering
- e. Malware protection
- f. Log management
- g. Network configuration management
- h. Patch management
- i. Network traffic analysis
- j. Multi-factor authentication
- k. Network perimeter security solutions
- l. Employee training (whole organisation)
- m. Employee training (IT team)

n. Other, please specify: _____

Answer: Our response has been fully/partially withheld under section 40(5)(b)(i) of the Freedom Of Information Act 2000.

The Trust neither confirms nor denies that it holds the requested information, as the duty in Section 1(1)(a) of the Freedom of Information Act 2000 does not apply by virtue of the following exemption:

Section 40(5)(b)(i) where Principle 7 of the Data protection act 1998 will be contravened.

For your reference, section 40(5) of the Act provides:

(5) The duty to confirm or deny-

**(a) does not arise in relation to information which is (or if it were held by the public authority would be) exempt information by virtue of subsection (1), and
(b) does not arise in relation to other information if or to the extent that either-
(i) the giving to a member of the public of the confirmation or denial that would have to be given to comply with section 1(1)(a) would (apart from this Act) contravene any of the data protection principles or section 10 of the [1998 c. 29.] Data Protection Act 1998 or would do so if the exemptions in section 33A(1) of that Act were disregarded, or**

(ii) by virtue of any provision of Part IV of the [1998 c. 29.] Data Protection Act 1998 the information is exempt from section 7(1)(a) of that Act (data subject's right to be informed whether personal data being processed).

Principle 7 of the data protection act states:

Appropriate technical and organisational measures shall be taken against unauthorised or unlawful processing of personal data and against accidental loss or destruction of, or damage to, personal data.

In publically releasing the information you have requested, we believe that the Trust's technical measures will be undermined in that such information could aid the unlawful and unauthorized access to personal information held by the Trust.

Normally without such in-depth knowledge of the technical countermeasures in place an unauthorised entity would generally find it significantly harder to breach the safeguards which in itself acts as a deterrent too.

The threat from unauthorised cyber "attacks" is at its highest for many years and in order to prevent and stay ahead of the attackers, it is extremely necessary that any information which could aid them in their plans and subsequently cause the Trust to breach principle 7 of the Data protection act be protected.

Similarly in the spirit of transparency and openness it is in the public interest to disclose the technical measures which are in place to protect the public's information. And also for the public to know where public money has been spent.

But in this instance the duty of security and confidentiality of the personal information of hundreds of thousands of service users outweighs the public interest to disclose.

The nature of current threats is such that to either confirm or to deny that we hold specific information can work against maintaining the security and confidentiality of the information from unauthorised breach or access.

Therefore on weighing up competing interests, we find the public interest favours the decision to neither confirm nor deny we hold the information

6. Which of these obstacles has your organisation experienced in maintaining or improving IT security? [Select all that apply]

- a. Competing priorities and other initiatives
- b. Budget constraints**
- c. Lack of manpower
- d. Lack of technical solutions available at my agency
- e. Complexity of internal environment
- f. Lack of training for personnel
- g. Inadequate collaboration with other internal teams or departments
- h. Other, please specify: _____

613.18

Anaesthetic Agents

I am writing to ask about gaseous and intravenous anaesthetic agents used across your Trust. In particular, I would like to know the total volume and total amount spent individually for EACH of the following agents sevoflurane, desflurane, isoflurane, nitrous oxide, and propofol PER YEAR between 2006 and 2018 as shown below:

- Total (annual) volume purchased for EACH agent (incl. sevoflurane, desflurane, isoflurane, nitrous oxide, and propofol) PER YEAR for 2006-2018 (in millilitres or litres).

- Total (annual) volume used for EACH agent PER YEAR for 2006-2018 (in millilitres or litres).

- Total (annual) amount spent on EACH agent PER YEAR for 2006-2018 (in pounds sterling).

If it is easier to provide another unit of measure, please provide details so that I can calculate the volume. Also, please state whether the total amount spent includes or excludes VAT.

If not violating commercial sensitivity, please also include who the manufacturers/suppliers are.

I am happy to receive the information electronically. If you prefer, you can use the attached spreadsheet to fill in the data I requested.

Answer: The trust does not hold the requested data.

614.18

Weapon enabled assault

I am writing to you under the Freedom of Information Act 2000 to request the following information from Walsall Healthcare NHS Trust

How many patients in your trust aged 11-25 attended either an Emergency Department or other urgent care setting for a weapon enabled assault / assault resulting in a wound between:

1 January 2018 and the 31 December 2018

Answer: 45

Please note: 45 attenders to the dept met the age and date criteria as well as the following:

The incident cause is classified as assault AND The freetext presenting complaint contains 'BLA', 'STAB', 'KNI' or 'LAC' OR the Injury mechanism code contains the relevant ECDS codes for 'Penetrating injury by sharp object', 'Penetrating injury by glass', 'Stab wound'.

Note that this result is partially reliant upon a free text field so may contain erroneous data and possibly not capture all relevant attendances.

615.18

Diabetes Specialist Nurses

The diabetes nursing organisation, TREND-UK (Training, Research and Education for Nurses in Diabetes-UK), is carrying out an England-wide audit. This aims to determine the numbers of Diabetes Specialist Nurses employed within NHS England. This piece of work was initiated following a recent All Party Parliamentary Diabetes Group review on the state of diabetes specialist nursing.

I would appreciate it if you could provide me with answers to the attached questions under the Freedom of Information Act. You will see I have provided an easy-to-use table.

Answer: Please see attached. Available upon request

616.18

Psychotherapists and counsellors

I would like to request the following information:

- 1) How many psychotherapists and counsellors have been employed by the Trust since 2012-present? Can these numbers be provided by year?

Answer:

Year	Clinical Psychologists	Counselling Psychologists	Cognitive Behaviour Therapists	Assistant Psychologists	Total
2012	4		1	2	7
2013	4		1	1	6
2014	5		1	1	7
2015	5		1	1	7
2016	5		1	1	7
2017	4	1	1	1	7
2018	4	2	1	1	8
2019	4	2	1	2	9

- 2) How many third-party psychotherapists and counsellors (or psychotherapy and counselling services) are not directly employed by the Trust, but treat the trust's patients through referrals, since 2012? Can these numbers be given by year.

Answer: The service has made some onward referrals to one third party counselling service since 2016

- 3) Could you please provide information on what standards the Trust requires candidates to meet, in order to be employed with the job title psychotherapist or counsellor. Is there a policy on what training or accreditation is necessary, in order to apply for these job roles within the Trust?

Answer:

The service does not employ counsellors.

Clinical Psychologists require a degree Psychology, a Clinical Psychology Doctorate and be registered with the Health Care Professions Council (HCPC).

Counselling Psychologists require a degree in Psychology, a Counselling Psychology Doctorate (or its equivalent) and be registered with the HCPC

Cognitive Behaviour Therapists require a Diploma in CBT and be registered with the British Association Of Behavioural and Cognitive Psychotherapies.

Assistant Psychologists require a degree in Psychology and are provided with regular clinical supervision.

All the above postholders are required to participate in regular clinical supervision with an approved supervisor

- 4) Could you please provide any information as to whether any policy or background check process for hiring psychotherapists and counsellors is also applied to third party care providers who the Trust might refer patients to.

Answer: The third party counselling service, to which some Clinical Health Psychology referrals are directed, is accredited by the British Association For Counselling And Psychotherapy (BACP) and is bound by their ethical framework for

the counselling professions. Staff are trained to at least diploma level and attend regular sessions with an independent counselling supervisor.

617.18

Overseas patients medical Bills

I requested this information under the Freedom of Information Act.

Can I please be given details of medical bills given to overseas patients who were not entitled to free treatment on the NHS from April 2016 to the present date.

Specifically can I receive:

- 1) The total sum of medical bills given to overseas patients who were not entitled to free treatment on the NHS during this period

Answer:

FINANCIAL YEAR	16/17	17/18	18/19
INCOME	16,964.15	56,848.10	89,003.52

- 2) The outstanding total from medical bills given in this period owed by overseas patients who were not entitled to free treatment on the NHS

Answer:

FINANCIAL YEAR	16/17	17/18	18/19
OUTSTANDING	12,752.57	40,898.34	49,831.34

- 3) The highest medical bill given to an individual patient, brief details of the treatment they received and how much of that bill remains outstanding

Answer:

Highest bill - £21,620
Treatment - Complex small intestine procedures including critical care support
Full invoice amount remains outstanding.

618.18

Negligence claims for deep vein thrombosis and pulmonary embolism

I am writing to make a request for all the information to which I am entitled under the Freedom of Information Act 2000.

Please send me the answers to the following questions:

1. How many hospital negligence claims have been made against the Trust relating to deep vein thrombosis and pulmonary embolism (blood clots) in the last five financial years?

Answer: 5

2. Of the legal claims referred to in question 1, how much money has been paid to those who have brought claims against the Trust?

Answer: Of those cases, 2 have been discontinued by the Claimant (so no compensation), 2 are still open and 1 has closed with a compensation payment of £10,000.

3. Please break down the data to questions 1 and 2 by hospital.
I would like the above information to be provided to me in electronic format.

Answer: All claims refer to Walsall Manor Hospital

619.18

A&E Agency Doctors

Under the Freedom of Information Act, please can you provide me with:

- The amount spent on employing agency, temporary and/or locum doctors in A&E departments in each month in 2017 and 2018 –

Answer; See attached. Available upon request.

- The number of FTE roles in A&E departments covered by agency, temporary and/or locum doctors in each month in 2017 and 2018

Answer:

Jan-17	23.96	Jan-18	43.09
Feb-17	25.49	Feb-18	33.22
Mar-17	31.95	Mar-18	37.41
Apr-17	11.54	Apr-18	27.76
May-17	10.14	May-18	35.02
Jun-17	10.34	Jun-18	31.92
Jul-17	33.40	Jul-18	25.45
Aug-17	25.50	Aug-18	19.48
Sep-17	28.79	Sep-18	17.37
Oct-17	24.11	Oct-18	12.27
Nov-17	30.81	Nov-18	12.24

Dec-17 45.98

Dec-18 20.97

- The total number of FTE doctors (including agency, temporary and/or locum and permanent staff) working in A&E departments in each month in 2017 and 2018 –

Answer:

Jan-17	50.96	Jan-18	66.09
Feb-17	51.99	Feb-18	59.82
Mar-17	56.45	Mar-18	64.01
Apr-17	34.04	Apr-18	52.36
May-17	32.64	May-18	59.62
Jun-17	31.84	Jun-18	57.52
Jul-17	54.40	Jul-18	50.05
Aug-17	46.10	Aug-18	44.48
Sep-17	50.39	Sep-18	43.37
Oct-17	44.71	Oct-18	40.27
Nov-17	52.41	Nov-18	40.24
Dec-17	67.98	Dec-18	49.97

If possible, please provide a breakdown for each item between consultants and junior/other grades.

620.18

Breast surgery compensation claims

I am writing to you under the Freedom of Information Act 2000 to request the following information:

1. How much money has been paid out in compensation for botched breast augmentation or botched breast enlargements? Please provide information for the last three years.

Answer: The trust does not perform cosmetic surgery

2. How many people have made successful compensation claims for botched breast augmentation or botched breast enlargements? Please provide information for the last three years.

Answer: N/A

3. How many unsuccessful claims for compensation for botched breast augmentation or botched breast enlargements has there been in the last three years?

Answer: N/A

By last three years I mean 2015, 2016 and 2017. Please provide information for each calendar year.

**621.18
A&E shifts**

The following is a request made under the Freedom of Information Act 2000.

Can you please provide me with the following information for the past three financial years and the current financial year to date (broken down by year):

1. The number of occasions where a doctor shift in your accident and emergency departments was left unfilled

Answer: None

2. The number of complaints made by doctors at your accident and emergency departments due to having to fill rota shift absences. Please provide a copy of the text of each complaint.

Answer: None

3. The number of occasions that rota shift gaps in your accident and emergency departments have been filled by agency workers. Please state the cost of this to your trust in each of these years.

Answer:

2016-2017 135 @ £56,558.65

2017-2018 1003 @ £544,587.62

2018-2019 600 @ £280,361.69

4. The number of occasions that rota shift gaps in your accident and emergency departments have been filled by staff working additional shifts. Please state the cost of this to your trust in each of these years.

Answer:

2016-2017 1192 @ £518,364.82

2017-2018 1369 @ £498,013.42

2018-2019 845 @ £343,187.65

If for whatever reason it is not possible to answer all of the above questions in their entirety, could you please answer what you can.

If possible, please could I have the information requested in **Excel format**.

622.18

Waste disposal costs

I would like to know how much it costs per kilo to dispose of standard waste versus a kilo of medical (yellow Bagged) waste.

Answer:

General Waste £120 per metric ton (12p per kg)

High Temperature Incineration Waste £590 per metric ton (59p per kg)

623.18

Biosimilar biologic therapies

This is a freedom of information request relating to the use of the new biosimilar biologic therapies.

1. Does your trust use the following biosimilar biologic therapies, and if possible how many patients are currently being treated ?

Adalimumab [Hyrimoz]	No/Yes [if Yes number]	Answer: Yes 0
Adalimumab [Amgevita]	No/Yes [if Yes number]	Answer: Yes 0
Adalimumab [Imraldi]	No/Yes [if Yes number]	Answer: No
Adalimumab [Hulio]	No/Yes [if Yes number]	Answer: No
Etanercept [Benepali]	No/Yes [if Yes number]	Answer: No
Etanercept [Erelzi]	No/Yes [if Yes number]	Answer: Yes 43
Infliximab [Inflectra]	No/Yes [if Yes number]	Answer: Yes 0
Infliximab [Remsima]	No/Yes [if Yes number]	Answer: No
Infliximab [Flixabi]	No/Yes [if Yes number]	Answer: No

2. Within your rheumatology department;

- a. how many patients in the year 2018 were treated with a biologic or JAK2

Answer: 276

- b. how many patients in the year 2018 were treated with a DMARD [for example azathioprine, ciclosporin, methotrexate, hydroxychloroquine, leflunomide, sulfasalazine or minocycline]

Answer: This information is not recorded

3. Within your dermatology department;

- a. how many patients in the year 2018 were treated with a biologic or JAK2

- b. how many patients in the year 2018 were treated with a DMARD [for example azathioprine, ciclosporin, methotrexate, hydroxychloroquine, leflunomide, sulfasalazine or minocycline]

4. Within your gastroenterology department;
a. how many patients in the year 2018 were treated with a biologic or JAK2

Answer: 0

- b. how many patients in the year 2018 were treated with a DMARD [for example azathioprine, ciclosporin, methotrexate, hydroxychloroquine, leflunomide, sulfasalazine or minocycline]

Answer: 0

5. Does your trust record the DAS score electronically on the patient records?,
If so how many are DAS 5+ No/Yes [if Yes number]

Answer: No.

624.18

Bowel Management Patient Safety Alert (SPINE 01/19)

I work for the Spinal Injuries Association (SIA), the leading national user-led charity supporting spinal cord injured people and their families. Being a user led organisation SIA understand the challenges of living with a spinal cord injury (SCI). We strive to support all people living with SCI to access the services and support they need to stay healthy and live full, fulfilling and active lives.

Part of my role is to assist the Head of Public Affairs with FOI requests, such as the one that follows. As a request under the Freedom of Information Act, please provide the following information about the recent NHS Improvement (NHSI) Patient Safety Alert "Resources to support safer bowel care for patients at risk of autonomic dysreflexia 25 July 2018", Alert reference number: NHS/PSA/RE/2018/005

Q1. Does the Trust have a formal written policy for digital rectal examination, digital rectal stimulation and the digital removal of faeces in spinal cord injured and other patients with neurogenic bowel dysfunction?

- (a) Yes
- (b) No

Q2. Following recommendation of this patient safety alert, did the Trust "review your local clinical policy and guidance relating to bowel assessment and management"?

- (a) Yes – produced a new policy
- (b) Yes - revised an existing policy
- (c) Yes – retained existing policy
- (d) No – did not review an existing policy
- (e) No – no bowel assessment and management policy in place

Q3. Is your policy based on the policy template that the Spinal Injuries Association circulated to your trust in August 2018?

- (a) Yes
- (b) No
- (c) No bowel assessment and management policy in place

Q4. If admitted to the Trust will a person with neurogenic bowel dysfunction receive the following bowel care intervention – Digital removal faeces?

- (a) Yes
- (b) No

Q5. If admitted to the Trust will a person with neurogenic bowel dysfunction receive the following bowel care intervention –Digital rectal stimulation?

- (a) Yes
- (b) No

Q6. If admitted to the Trust will a person with neurogenic bowel dysfunction receive the following bowel care intervention –Trans anal irrigation?

- (a) Yes
- (b) No

Q7. Are staff available seven days a week to undertake these bowel care interventions?

- (a) Yes
- (b) No

Q8. Has the Trust “reviewed your local education and training provision for interventional bowel management” as recommended in the Patient Safety Alert?

- (a) Yes
- (b) No

Q9. As requested by the Patient Safety Alert, has the trust developed “an action plan to ensure patients have adequate and timely access to staff who are trained appropriately to carry out these procedures, including in the evening and at weekends”?

- (a) Yes
- (b) No

Q10. Has the Trust “shared your reviewed local guidance, advice on how to identify staff who can provide Digital Removal of Faeces, and the key messages in this alert with medical, nursing and other relevant clinical staff”?

- (a) Yes
- (b) No

Q11. Does the Trust have a policy that allows for the personal care assistants/carers of spinal cord injured patients to assist with this element of the patient's care?

- (a) Yes
- (b) No

Q12. As recommended in the Patient Safety Alert, have you identified “an appropriate clinical leader to co-ordinate implementation of this alert”?

- (a) Yes (please answer Q13, but ignore Q14)

(b) No (please answer Q14, but ignore Q13)

Q13. What are the contact details for the “appropriate clinical leader”(ie name, position, telephone and email)?

Q14. Why has your Trust not appointed an “appropriate clinical leader”?

- (a) Alert implemented without appointment of a clinical leader
- (b) Took no action following Patient Safety Alert, as policy already in place
- (c) Took no action. No existing policy in place
- (d) Other

Q15. Are your newly registered nurses able to demonstrate the nursing procedures as required in Annexe B, section 6.5 of the Nursing and Midwifery Council's document ‘Future Nurse: Standards of Proficiency for Registered Nurses’?

- (a) Yes
- (b) No

Technical Note – Relevant annexe reads:-

“Annexe B

6: Use evidenced based, best practice approaches for meeting needs for care and support with bladder and bowel health

6.5: Administer enema, suppositories and undertake manual evacuation when appropriate.”

Answer: All patients are referred to Oswestry Hospital or Stoke Mandeville Hospital

625.18 LIMS

Under the freedom of information act please could you answer the following questions around your Trust's LIMS (Laboratory Information Management System)

- Do you have a full User Requirement Specification (URS) within your LIMS service?

Answer: No, we have the original Output Based Specification (OBS)

- Do you have a full (requirements) traceability matrix (RTM) to drive validation for LIMS

Answer: No, we have test scripts that cover core functionality and new documented functions

- Do you have full validation evidence ready for review and fully referenced on your local QMS for LIMS?

Answer; No

- Which LIMS is in use?

Answer: WinPath 5.32

- When was it last upgraded?

Answer: March 2015

- When was the URS last reviewed?

Answer: N/A

- When did the MHRA last inspect the lab?

Answer: March 2010

- How much notice did MHRA provide before this inspection?

Answer: The department was told in October 2009 to expect an inspection in the following year (2010). The dates for the actual inspection (March) came through in January 2010.

- Would you benefit from a review of evidence to assess the transfusion labs "readiness for inspection"?

Answer: N/A

626.18

Personal health record/ PHR/ shared record/ patient portal

FAO - Fol lead Walsall Healthcare NHS Trust

We wish to request the following information under the Freedom of Information Act:

1. Does Walsall Healthcare NHS Trust use a Personal health record/ PHR/ shared record/ patient portal (e.g. Graphnet, Intersystems, Orion, PKB etc.).

Answer: The Trust does not currently use a PHR/Patient Portal

If yes please will you answer the following:

2. Supplier name
3. System name
4. Current contract start date
5. Current contract end date
6. Are you looking to renew this system?

7. The total contract Value (to include the licence costs, one-off implementation cost and support charge)?

627.18

Study of Best Practice in Fall Prevention and Management in In-patient Acute Hospitals and Intra-hospital Transfer Policies

We appreciate NHS organisations are very busy but would value your cooperation with the following request. We would appreciate if you could send in electronic format the following documents which you may have in operation in your organisation:

- In-patient Falls Policy or Fall Prevention Policy
- Falls Assessment and Care Plan
- Policy for management of slips, trips and falls
- Policy for intra-hospital transfer of in-patients e.g. Intensive Care Unit to Imaging Department, etc.

We appreciate that in some organisations these documents will be separate and in others incorporated in a global policy document with elements appearing as appendices. We would value receiving the full complement of policies, guidance, plans and procedures and assorted reporting documentation in operation in your organisation.

Answer: Please see attached. Available upon request

628.18

Anaesthetic consultant

Where a consultant is appointed jointly with another department, for example Intensive Care, Pre-Hospital Emergency Medicine or an academic appointment, if part of their job falls under another cost centre, then include the consultant in the overall headcount include only the proportion of a single whole time equivalent that the department of anaesthetics is responsible for.

1. What is your overall anaesthetic consultant headcount?

Answer: There are 22 anaesthetic consultants working with in the trust as of 31st of January.

2. What is your whole time equivalent anaesthetic consultant headcount?

Answer: The FTE for the 22 anaesthetic consultants working with in the trust as of 31st of January is 21.43

3. How many SPAs do you provide at appointment as the basic level to anaesthetic consultants? Please do not include any additional SPAs people may receive for additional responsibility.

Answer: 1.5 SPA's

4. Do you require anaesthetic consultants to offer an additional PA if they wish to undertake private practice?

Answer: Yes

5. What was your total wage bill for additional work undertaken by consultants in the financial year 2017/18? This should also include any work where the consultant was 'acting down'.

Answer: £511,122

6. Does the figure provided in (5) include employers NI or pension contributions? If so, what is the total for employers NI and pension?

Answer: Included in answer to Q5

7. Please can you provide a breakdown of all the rates of pay you offer consultants for any additional work they undertake outside of their job plan, for example, additional lists, or covering additional on-call duties?

Answer:

£100/hr on site

£55/hr on call when off site; £100 / hr on site on call

4 hours WLI rate £450/ session

**629.18
CAUTI**

Under the Freedom of Information Act, I was hoping you could answer the following questions.

1. How many patients have received a indwelling catheter in each of the following calendar years:

o 2018: **Answer : 1284**

o 2017: **Answer: 1293**

o 2016: **Answer: 1139**

**** Note**** The numbers above show the number of coded catheterisations that took place. We do not code patients who have catheters as part of a procedure or to keep patients comfortable therefore not all catheterisations are included in these figures.

2. How many patients have suffered a Catheter Associated Urinary Tract Infection in each of the following calendar years:

o 2018: **Answer: 22**

o 2017: **Answer: 16**

o 2016: **Answer: 14**

3. How many patients have suffered a Urinary Tract Infection in each of the following calendar years:

o 2018 : **Answer: 814**

o 2017 : **Answer: 873**

o 2016 : **Answer: 769**

4. The total cost of Catheter Associated Urinary Tract Infections in each of the following calendar years:

o 2018 **Answer: £110331.77**

o 2017 **Answer: £39425.65**

o 2016 **Answer: £84128.00**

5. The total number of prescriptions dispensed in relation to Catheter Associated Urinary Tract Infections in each of the following calendar years:

o 2018

o 2017

o 2016

Answer: We have applied exemption 12, cost of compliance exceeds the appropriate limit . Due to having to manually sort through notes to locate the information. The information is not recorded on our systems.

6. Total number of patients receiving antibiotics in relation to Catheter Associated Urinary Tract Infections in each of the following calendar years:

- o 2018
- o 2017
- o 2016

Answer: We have applied exemption 12, cost of compliance exceeds the appropriate limit . Due to having to manually sort through notes to locate the information. The information is not recorded on our systems.

7. Number of patients receiving two or more antibiotics in relation to a single Catheter Associated Urinary Tract Infections in each of the following calendar years:

- o 2018
- o 2017
- o 2016

Answer: We have applied exemption 12, cost of compliance exceeds the appropriate limit . Due to having to manually sort through notes to locate the information. The information is not recorded on our systems

630.18 Infant Formula

Details of the brand(s) of infant formula milk provided in maternity services and the form in which it is provided (e.g. powdered, ready made bottles, ready made bottles with teets etc.)

Cow and Gate - First Infant Milk 70ml ready to feed cow and gate

SMA - Prepared feed SMA PRO First Infant Milk 70ml

Details of your infant formula milk provider, the amount paid and volume received in the last available financial year, and details of whether the infant formula milk is purchased from them at full price, a reduced rate (including details of the reduction if applicable) or received free of charge.

Answer: All the formula milk is purchased through NHS Supply Chain

Cow and Gate:

260 cases (case of 24) equating to £1,869.40

SMA:

77 boxes (box 32) equating to £616.77

We are unaware of any reduced rates.

631.18

Child admission uncertain medical status

- 1) This is a request for information under the Freedom of Information Act 2000. I would like information regarding admissions to your hospital relating children between 0-6 months who arrive to the hospital with an uncertain medical status in the last 5 years (2018/2017/2016/2015/2014)

Answer: The trust does not record this specific data

- 2) I would like to request the following information about how many babies from 0 to 6 months of age entered A&E with an unknown medical status. Also, I would like to know how many of them, after the proper exams or the medical test (x-rays or scanners), the medical staff discovers that the child has significant and numerous fractures, bruises or broken bones in their body, which are the result of non-accidental injuries and abuse by parents.

Answer: The trust does not record this specific data

- 3) I also want to know in how many of these cases the parents are arrested and placed in police custody accused of abuse of their child, and how many of these children have been sent to foster care. If possible.

Answer: The trust does not record this specific data

- 4) I want to obtain a copy of the hospital's procedure model in cases where the parents are suspected of abuse.

Answer: Please see attached. Available upon request

632.18

Medicines shortage cost

Under the Freedom of Information Act 2000, I am requesting the following information on medicines shortages at your trust:

- 1) The total number of medicines that your trust considered to be facing a shortage throughout:

- a. 2016/17
 - b. 2017/18
 - c. 2018/19 to date
- 2) A list of the medicines your trust considered to be in short supply for each year:
 - a. 2016/17
 - b. 2017/18
 - c. 2018/19 to date
- 3) The total amount of money your trust spent in response to these medicines shortages to find and procure alternative medicines – including the cost of "off-contract claims" from suppliers against NHS England/CMU contracts – in:
 - a. 2016/17
 - b. 2017/18
 - c. 2018/19 to date
- 4) A breakdown of what this cost includes, if it includes costs other than that of finding and procuring alternative medicines, for each year listed above.

Please provide the information by email in the form of either a Word document or Excel spreadsheet.

Answer: The trust does not hold the requested data.

633.18

ECG monitoring

The questions are in relation to ECG monitoring which is carried out only in the hospital setting.

Please supply details of:

1. How many tests in the following categories do you perform each year?
 - 24hr Holter
 - 48hr Holter
 - 72hr Holter
 - 7 day Holter
 - 7 day event recorder
 - Other please specify

Answer: Information is not recorded

2. Which monitoring modality do you use for the following, specify make and model?
 - 24hr Holter
 - 48hr Holter
 - 72hr Holter
 - 7 day Holter
 - 7 day event recorder

- Other please specify

Answer: Information is not recorded

3. How many monitors do you have of each make/model?

Answer: Spacelabs Lifecard CF - 25 monitors in total, 17 monitors currently in use, with 8 missing/non-returns. Cardio-calls – 10 monitors in total, 8 in use with 2 missing/non-returns

4. How much is the service contract for each modality per year?

Answer: Individual single cost of Lifecard CF £1760.99 (order code LCF3LUK)

5. How many of these are in repair/lost?

Answer: This information is not recorded

6. What is the cost of repair if the device is not under a service contract?

Answer: All under the service contract

7. What was the price paid per unit for each of the monitoring modalities above?

Answer: As above

8. How much was the analysis software package (if purchased)?

Answer: All under the service contract

9. What is the cost of the service contract on the analysis software?

Answer: All under the service contract

10. What is your annual spend on consumables for monitoring?

- Batteries
- Electrodes
- Alcohol wipes
- Razors
- Cleaning materials for monitors
- Replacement leads

Answer: This information is not recorded down to this level on our system.

11. What is the average salary band of staff analysing ambulatory ECG monitor data?

Answer: Band 5, 6 & 7

12. How many of the staff employed to analyse ambulatory ECG data are working through a locum agency?

Answer: No Agency staff

13. What is the current waiting time from referral to monitor fitting? Please specify if waiting times vary for each modality.

Answer: Diagnostic wait 4-6 weeks, Monitoring patients 6-10 weeks

14. What is the current waiting time from monitor return to result availability? Please specify if waiting times vary for each modality.

Answer: 3 weeks

15. How many ambulatory monitoring patients require hospital transport per year?

- Is transport also used to return the monitor?
- What is the average cost per return?

Answer: This information is not recorded

16. Does the patient also need to be transported back to hospital for removal?

Answer: Yes

17. What is the annual cost of transport services for ambulatory monitoring patients?

Answer: See question 15

18. Is outpatient monitoring capacity limited by inpatient demand for monitoring?

Answer: No

19. Are you meeting monitoring demand for?

- Routine monitoring referrals
- Urgent monitoring referrals

Answer: Yes

20. If not, what was your annual spend on breaching fines in the last financial year?

Answer: N/A

634.18 Expenses

Please can you send me the expenses over the last three years claimed by all consultants, specialty registrars and foundation doctors who have worked at the trust either full-time or on a locum basis.

Please list each medic's expenses claim separately and for each expense please provide an explanation for the expense e.g. train travel, lunch.

Answer: Please see attached. Available upon request

635.18

Retinopathy of prematurity

May I ask to provide me with your trust protocol regarding ROP (retinopathy of prematurity) as we are planning to update our hospital protocol ?

Answer: Please see attached. Available upon request

636.18

Payments over £25,000

I am looking for some assistance with your organisation's Spend/Transparency data, available on the following weblink:

<https://www.walsallhealthcare.nhs.uk/about-us/how-we-are-run/our-expenditure/>

There appears to be no file available from the month of October 2018. Could you advise when the file will be made available to view online? Would it be possible for you to email me a copy of those files?

Answer: The £25k reports are up-to-date and now available on the Trust website

637.18

Ambulatory cardiac monitoring

Dear Sir/Madam

Under the Freedom of Information Act 2000, I would like you to provide answers to the questions below.

If you cover more than one hospital, please provide the following information for each of the hospitals covered under your trust broken down individually

The questions are in relation to ambulatory cardiac monitoring which is carried out only in the hospital setting to include any of the following day case, elective tariff, outpatients

Please supply details of:

1. Can you confirm which modalities the hospital has at its disposal for ambulatory cardiac monitoring ie how many Holter Monitors does the hospital own etc

Answer: Spacelabs Lifecard CF - 25 monitors in total, 17 monitors currently in use, with 8 missing/non-returns. Cardio-calls – 10 monitors in total, 8 in use with 2 missing/non-returns

2. Can you provide the costs of each modality i.e. for Holter Monitoring please provide the number of Holter Monitors at the Hospital, the purchase cost of each Holter Device, any costs associated with maintenance of the monitor such as, battery replacement, servicing etc?

- **Answer: Individual single cost of Lifecard CF £1760.99**

- **Cardio-call, unsure of cost.**

3. In the financial year 2017/2018 how, many patients were monitored using each modality i.e. ECG, Holters, Reynolds Lifecard, Cardiomemo Loop, etc

Answer:

- **April 2017 to March 2018 –**
- **24 hour ambulatory Lifecard monitors – 1608**
- **Multi day (extended monitoring >24hrs using Lifecard monitors = 370**
- **Cardiomemo 88**

4. How many patients had Implantable Loop Recorders fitted in the financial year 2017/18?

Answer: 76

5. Is the ambulatory cardiac monitoring in the hospital provided on a National Tariff or Block Contract

Answer: Cost and Volume Local tariff

6. In the financial year 2017/18 how many palpitation patients underwent cardiac rhythm monitoring in the hospital

Answer: This information is not recorded on our systems

7. In the financial year 2017/18 how many syncope patients underwent cardiac rhythm monitoring in the hospital

Answer: This information is not recorded on our systems

8. In the financial year 2017/18 how many cryptogenic stroke patients underwent cardiac rhythm monitoring in the hospital

Answer: This information is not recorded on our systems

9. In the financial year 2017/18 what was the total spend per modality for cardiac rhythm management – to include acquisition costs and maintenance / running costs

Answer: All equipment is maintained in house. 4 x ECG machines = £22k, 1 x Treadmill = £15k, 1 Defibulator = £6.5K, Specialist/Non specialist pacemakers = £846,091

10. In the financial year 2017/18 how many referrals from primary care were received for cardiac rhythm monitoring

Answer: 307

**638.18
CAUTI**

Case withdrawn

**639.18
Agency & Bank Midwives**

I am writing under the terms of the Freedom of Information Act 2000 to request the following information:

How much did the Trust spend on a) agency midwives b) bank midwives in each calendar month in 2018 (calendar year)?

If helpful, please use the table provided below for your response.

Answer:

2018 (Month)	Spend on Agency Midwives (£)	Spend on Bank Midwives (£)
January	0	42,588
February	0	35,437
March	0	39,770
April	0	27,189

May	0	19,819
June	0	39,061
July	0	31,229
August	0	29,751
September	0	35,006
October	0	51,372
November	0	30,437
December	0	10,119
TOTAL	0	391,778

640.18 Haematology Questionnaire

I am writing to you under the Freedom of Information Act 2000 to request the attached information from Walsall Healthcare NHS Trust:

As we are gathering information about the **Haematology workforce**, we thought that the **Clinical Lead for Haematology** would be best-placed to provide the requested information.

Answer:

Dear Clinical Haematology lead,

*I am writing to you under the Freedom of Information Act 2000 to request the following information regarding the organisation of the **Clinical Haematology department** at your NHS Trust. Responses to this survey will be **anonymised** and form the basis of the British Society for Haematology workforce census.*

Should you have any questions, or require any clarification, please do not hesitate to contact Perran Harvey on 07741 144 295 / pharvey@apcoworldwide.com.

HOSPITAL ENVIRONMENT

1. Choosing between 'district general,' and 'specialist / tertiary care hospital,' in which type of hospital do you work? Please note that this question is about the hospital specifically, and not about its services. Please tick one option as appropriate.

<i>In which type of hospital do you work?</i>	<i>Please tick one option as appropriate.</i>
<i>District general hospital</i>	
<i>Specialist / tertiary care hospital</i>	
<i>Other (please specify)</i>	<i>Acute Trust</i>

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2. In total, how many beds did the hospital have for patients as of **30 September 2018**? Please provide information on the total number of available and filled beds, with a breakdown for the number of haematology beds. Please fill in the below table with the number of beds.

Number of beds	<u>Total</u> number of beds as of 30 September 2018.	Number of <u>filled</u> beds as of 30 September 2018.	Number of <u>available</u> beds as of 30 September 2018.
Total number of patient beds in the hospital	511	518	-7
Beds allocated to haematology patients in the hospital	0(however, the haematology team provides active input to patients admitted under other teams with haematology problems).	0	0

3. In total, how many outpatients were treated between 30 September 2017 and 30 September 2018? Please fill in the below box with the number of outpatients.

Number of outpatients treated between 30 September 2017 and 30 September 2018 :	6217
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4. Is the hospital in which you work overspent, underspent or on budget? Please tick one option as appropriate.

Is the hospital in which you work overspent, underspent or on budget?	Please tick one option as appropriate.
Underspent	
On budget	
Overspent	X

WORKFORCE

5. In total, how many full time equivalent employees were employed within the **Clinical Haematology department** of your NHS Trust as of **30 September 2016** and as of **30 September 2018**? If roles are shared with other departments, please use the percentage of each employee's time spent working with the **Clinical Haematology department** to work out a total number of full time equivalent employees.

Total number of full time equivalent Clinical Haematology employees as of 30 September 2016	Total number of full time equivalent Clinical Haematology employees as of 30 September 2018
__55.37__ employees	__50.07__ employees

6. Please provide the number of full time equivalent employees within the **Haematology department** at your NHS Trust, split according the roles below. Please provide these numbers as they existed on **30 September 2016** and **30 September 2018**.

*For 30 September 2018 only, please give details of how many full time equivalent employees in the **Clinical Haematology department** were within five years of retirement on this date.*

*If roles are shared with other departments, please use the percentage of each employee's time spent working with the **Clinical Haematology department** to work out a total number of full time equivalent employees. Please fill out this information in the table on the following page.*

Job role (full time equivalent employees)	Number of full time equivalent employees at your NHS Trust as of 30 Sept 2016	Number of full time equivalent employees at your NHS Trust as of 30 Sept 2018	Number of full time equivalent employees at your NHS Trust within 5 years of retirement age as of 30 Sept 2018
Medical roles:			
Consultant Clinical Haematologist	2	2	0
Haematology SpR/StR (or equivalent)	0	0	0
Haematology Core Medical Trainee / Foundation Year Doctor	0	0	0
Other medical haematology role (Associate Specialist, Trust Grade staff, etc.)	1	1	0
Haematology Physicians' Associate / Physicians' Assistant	0	0	0
Nursing roles:			
Haematology Clinical Nurse Specialist	5	5	1
Other haematology nursing roles – Note: this applies only to haematology roles, not generalist roles	0	0	0
Pharmacist roles:			
Haematology Consultant Clinical Pharmacist	0	0	0
Other haematology pharmacist role	0	0	0
Laboratory roles:			
Haematology Clinical Scientist (Band 8 and above)	1	1	0
Haematology Clinical Scientist (all other bands)	1	1	0
Haematology Biomedical Scientist (Band 8 or above)	3	1	0
Haematology Biomedical Scientist (Band 7)	6	3	0
Haematology Biomedical Scientist (Band 6)	8	13	0
Haematology Biomedical Scientist (Band 5)	2	2	0
Haematology Associate Practitioner / MTO (Band 4)	1	4	0
Haematology Medical Laboratory Assistant (Band 3)	10	4	0
Other haematology laboratory role (please specify)	0	0	0
Management / support roles:			
Haematology Management Staff (all roles)	0	1	0
Haematology Data Manager	0	0	0
Haematology Clerical Staff (all roles)	0	1	0
Haematology Secretarial Staff (all roles)	2	2	0

7. As of **30 September 2017** and **30 September 2018**, how many full time equivalent **vacancies** did your NHS Trust have advertised for the each of the job roles specified below within the **Haematology department**? Please fill in the table as appropriate.

*If certain vacancies are for roles shared with other departments, please use the percentage of each employee's time spent working with the **Clinical Haematology department** to work out a total number of full time equivalent employees. Please fill out this information in the table on the following page.*

Job role (full time equivalent employees)	Number of full time / full time equivalent vacancies advertised as of <u>30 Sept 2017</u> at your NHS Trust	Number of full time / full time equivalent vacancies advertised as of <u>30 Sept 2018</u> at your NHS Trust
Medical roles:		
Consultant Clinical Haematologist	0	0
Haematology SpR/StR (or equivalent)	0	0
Haematology Core Medical Trainee / Foundation Year Doctor	0	0
Other medical haematology role (Associate Specialist, Trust Grade staff, etc.)	0	1
Haematology Physicians' Associate / Physicians' Assistant	0	0
Nursing roles:		
Haematology Clinical Nurse Specialist	0	0
Other haematology nursing roles– Note: this applies only to haematology roles, not generalist roles	0	0
Pharmacist roles:		
Haematology Consultant Clinical Pharmacist	0	0
Other haematology pharmacist role	0	0
Laboratory roles:		
Haematology Clinical Scientist (Band 8 and above)	0	0
Haematology Clinical Scientist (all other bands)	0	0
Haematology Biomedical Scientist (Band 8 and above)	0	0
Haematology Biomedical Scientist (Band 7)	0	1
Haematology Biomedical Scientist (Band 6)	2	0
Haematology Biomedical Scientist (Band 5)	0	0
Haematology Associate Practitioner / MTO (Band 4)	0	0
Haematology Medical Laboratory Assistant (Band 3)	0	0
Other haematology laboratory role (please specify)	0	0
Management / support roles:		
Haematology Management Staff (all roles)	0	1
Haematology Data Manager	0	0
Haematology Clerical Staff (all roles)	0	0
Haematology Secretarial Staff (all roles)	0	0

8. During the period from **30 September 2017** to **30 September 2018**, how many days of sick leave were taken by **Clinical Haematology** staff? (Please give one figure for all staff combined)

As supplementary information (if available), how many of these days of sick leave were due to stress, depression, or other mental health conditions?

How many days of sick leave did Clinical Haematology staff take between 30 September 2017 and 30 September 2018?	How many days of sick leave due to <u>stress, depression or other mental health conditions</u> did Clinical Haematology staff take between 30 September 2017 and 30 September 2018?
__110__ days	__30__ days
If you do not have access to this data, provide a description below on how you believe absences due to sick leave (especially due to stress, depression or other mental health conditions) amongst the clinical haematology staff compare to those of staff within the rest of your NHS Trust.	

9. Please outline which multidisciplinary teams involving clinical haematology staff were in existence at your NHS Trust as of **30 September 2018**.

For each team please also indicate how frequently the teams meet. This includes both virtual and face-to-face meetings.

Multidisciplinary teams in the following areas:	Do multidisciplinary teams in the below areas operate at your hospital? If so, how often do they meet? Please tick as appropriate.				
	More than once per week	Weekly	Monthly	Less than once each month	Does not operate
Blood transfusion			X		
General Haematology		X			
Haemoglobinopathy					X
Thrombosis and Haemostasis				X	
Laboratory			X		
Malignant:					
• Bone Marrow Transplant				X	
• Lymphoma		X			
• Leukaemia		X			
• Myeloma		X			
• Other		X			
Paediatric:					
• Haemato-oncology					X
• Bone Marrow Transplant					X
• Haemoglobinopathy					X
• Thrombosis and Haemostasis					X
• Laboratory					X
Other (please specify below):					
.....					
.....					
.....					
.....					

WAYS OF WORKING / ROTAS

10. As of **30 September 2018**, what percentage of their working hours (on average) did **Consultant Clinical Haematology** staff at your NHS Trust devote to non-clinical duties? These duties can be either:

- **Within** the NHS Trust (e.g. managerial/leadership roles); or
- **Outside** the NHS Trust (e.g. Royal College roles, Examining responsibilities, British Society for Haematology roles, or other professional roles at a national / international level).

This does not have to be a precise figure, but rather your sense as to the average proportion of time spent by Consultant Clinical Haematologist staff at your NHS Trust on non-clinical duties.

Consultant Clinical Haematology staff spend the following proportion of their working hours on non-clinical duties within the NHS Trust:	____% of working hours
Consultant Clinical Haematology staff spend the following proportion of their working hours on non-clinical duties outside the NHS Trust:	____% of working hours

Answer: This information is not recorded

11. Between **30 September 2017** and **30 September 2018**, how often did Clinical Haematology staff have to miss, postpone or complete outside of working hours the following due to their workload? Please note that here, 'Clinical Haematology staff' refers to medical clinicians.

- Mandatory scheduled training (e.g. fire training, blood transfusion training, etc);
- CPD sessions;
- Job planning and appraisal procedures.

Please give an estimate of how often this occurred (considering the clinical haematology team as a whole) by ticking one box per row. This does not have to be a precise figure, but rather your sense as to how often (if at all) this happened.

How often did clinical haematology staff miss the below activities due to their workload?	<i>Not at all</i>	<i>Less than once every 2 months</i>	<i>Once every 2 months</i>	<i>Once per month</i>	<i>Once per week</i>	<i>More than once per week</i>
<u>Mandatory training</u> (please tick one option as appropriate)						
<u>CPD sessions</u> (please tick one option as appropriate)						
<u>Job planning and appraisal</u> (please tick one option as appropriate)						
<u>Other (please specify)</u> (please tick one option as appropriate)						
<u>Other (please specify)</u> (please tick one option as appropriate)						
<u>Other (please specify)</u> (please tick one option as appropriate)						
<u>Other (please specify)</u> (please tick one option as appropriate)						

Answer: This information is not recorded

CLINICAL QUALITY

12. Between **30 September 2017** and **30 September 2018**, were any cases of External Quality Assessment (EQA) failure or peer review failure logged at your NHS Trust relating to **Clinical Haematology** procedures / activities / units? E.g. external accreditation of a unit such as 'bone marrow transplantation,' 'haemophilia,' etc.

If yes, please give the number of EQA and peer review failures in the box below. If not, please enter '0' in the box below

 0 EQA failures were recorded

 0 peer review failures were recorded

Comments:

FUTURE CHALLENGES

13. What do you regard as the most pressing challenges facing your **Clinical Haematology department** in the next 5-10 years?

Please tick no more than three boxes and prioritise your answers in order of importance (1-3) with (1) being most important.

Most pressing challenges for your clinical haematology department in the next 5-10 years	Ranking: (1)-(3), with (1) being the most important. Please rank no more than three challenges.
Workforce going into retirement	1
Difficulties in staff recruitment	
Difficulties in staff retention	
Lack of funding for new positions	2
Inadequate training capabilities	
Staff leaving the NHS for private institutions	
Increasing demands on Haematology staff beyond their current role(s)	3
Fewer medical graduates choosing to specialise in Haematology	
Low morale / sickness absence	
Other – please specify	
Other – please specify	

14. Please share any other comments on the challenges that you predict will face your **Clinical Haematology department** in the next 5-10 years.

Comments:

641.18
BIA-ALCL

I am writing to make an open government request for all the information to which I am entitled under the Freedom of Information Act 2000.

Please send me the following:

- 1) How many patients with breast implant associated ALCL (BIA-ALCL) have been treated within the trust since 2000? Please break down the figures by what year the patient was treated and which hospital the patient was treated at, where possible.
- 2) How many of these cases were reported to the Medicines and Healthcare products Regulatory Agency (MHRA)?
- 3) Have any patients with BIA-ALCL died while under treatment within the trust? If so, please give the year and the hospital if possible and whether this adverse event was reported to the MHRA.

Answer: The trusts coding department have informed me that there are no specific code for this condition. They did provide codes for 3 different types of lymphoma and a code for surgical operation with implant of artificial internal device to identify the breast implant.

I can confirm we were not able to find any patients since 2000, using these codes.

642.18
Computer Assisted Facilities Management system

Please can you provide information on the following:

1. Does your NHS Trust use a computer assisted facilities management system?

Answer: No

2. If no, are there ongoing plans to purchase a computer assisted facilities management system in the future?

Answer: The trust has no plans to purchase one in the near future

3. What is the name of the computer assisted facilities management system (product name) and which company is it purchased from?

Answer: N/A

4. Provide brief information on the process in use at the NHS Trust to manage reactive and planned maintenance work including how this is recorded and scheduled.

Answer: Completed by landlord

5. Value of the current contract, date of commencement and date of expiry.

Answer: N/A

6. Who is responsible for ensuring the computer assisted facilities management system meets the NHS Trust's requirements

Answer: N/A

643.18

Losses and special payments

FREEDOM OF INFORMATION ACT REQUEST

In your financial accounts for the financial year 2017/18 did you have a section for "losses and special payments?"

1. If so how much money was accounted for in the 2017/2018 financial year as being "losses and special payments"? (Please note I am aware that the loss may have occurred many years earlier but I am interested in items which were accounted for in the last financial year, irrespective of when the loss took place.)

Answer: £182,744.03

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

Answer:

CLAIM	AMOUNT	DETAILS
1	81,840.52	Claimant slipped on water en route to a clinic, injuring hip and required a hip replacement.
2	8,173.00	Claimant slipped on wet floor causing injury to left hip and left elbow.
3	4,880.00	Claimant's thumb was pierced by a used needle when emptying a bin.

3. What was the biggest loss written off in 2017/18 (regardless of when the debt was accumulated) that related to an unpaid patient bill? Please state the total amount of this written off debt, the nationality of the patient and the department of the hospital the majority where the majority of the bill was incurred.

Answer: There were no write-offs in 2017/18

644.18

Hip fractures

FREEDOM OF INFORMATION ACT REQUEST

Regarding the management of patients with fractures of the proximal femur (hip fractures) requiring operative intervention;

1. Do you have an established, written protocol regarding the management of patients on oral anticoagulation medications prior to surgery?

Answer: No. It is in development with the surgical, orthogeriatricians and haematology teams.

2. What is your protocol regarding the management of patients on oral anticoagulation medications prior to surgery?

Answer: We seek haematology or cardiovascular advice as it depends on the clinical reason for the patient being on the medication and the associated risk. We follow the royal college of anaesthetist guidelines and NICE pathways

3. Specifically, for patients on Direct Oral Anticoagulation (DOAC) or Novel Oral Anticoagulation (NOAC) medications what is your protocol regarding reversal or delay to theatre?

Answer: We seek haematology or cardiovascular advice as it depends on the clinical reason for the patient being on the medication and the associated risk. We follow the royal college of anaesthetist guidelines and NICE pathways. We balance the risk of bleeding against the risk of waiting if the patient comorbidities absolutely rule out general anaesthetic.

645.18

Mental Health & Wellbeing Digital App

Dear Walsall Healthcare NHS Trust

I am making a request under the Freedom of Information Act for information on mental health and wellbeing digital apps offered by your organisation.

Please complete the questions in the attached document.

Answer: Please see attached. Available upon request

646.18

Remote patient monitoring system

I am writing to make an open government request for all the information to which I am entitled under the Freedom of Information Act 2000.

Could I possibly suggest that you direct these questions towards one or some of the following Trust employees: - the Matron in charge of the Discharge services, Community Liaison team, Multidisciplinary health and Social care staff, Director of operations and/or clinical director,

Please you please answer the following:

1. Does your organization presently promote/or endorse a (RPM) **remote patient monitoring system** to capture vital signs or other health related measurements post discharge from hospital and whilst a patient is residing in their own home or being cared for in a non-acute environment such as community hospital/hospice/residential or care home - (*Measurement examples being blood pressure/weight/temperature/Oxygen Saturation/EWS/ pulse/glucose etc.*)?

Answer: No

1. If the answer is **NO** –

- 1.1.2 Within the next 2 years, is telemedicine/ RPM, something that the Trust would consider as a way of either reducing hospital admissions, promoting an earlier discharge and/or recognizing and acting upon patient deterioration sooner?

Answer: The Trust is looking into implementing it through the current community mobile working solution.

- 1.1.3 If the Trust is not considering RPM for suitable patients (*able to take their own readings or have a relative who can do this for them*) – is there a reason why this is not being considered either on a per Trust basis or part of an agreement with the CCG?

- 1.2 If the answer is **YES** – RPM is presently used for some discharged patients- could you please detail –

- 1.2.2 the system type/name/supplier
 - 1.2.3 When this came into use and when the contract expires
 - 1.2.4 Who funds home monitoring, is this the CCG, the Acute Trust or a combination of both or other organization (e.g. charity/STP)?
 - 1.2.5 How much this cost per patient or per year for multiple patients
 - 1.2.6 What patient data is captured & is there measurements you would like to capture but cannot achieve at the moment?
 - 1.2.7 What systems does this data feed into – e.g.GP systems & supplier
 - 1.2.8 Has there been any analysis of this data to demonstrate that remote patient monitoring from home has:
 - Reduced patient re-admissions into hospital

- Expedited the discharge process
- Improved “follow up” care post discharge – reminding patients to take medications/ monitor on-going health measurements etc.

2 Who is the main person(s)/ decision maker (s) – who would probably be responsible for the decision to use remote patient monitoring post discharge? (*Name/title/contact details etc.*)

Answer:

Matthew Dodd

Director of Operations – Community

Bentley Health Centre

Churchill Road

Walsall

WS2 0BA

01922 605644

647.18

FOI requests that relate to either rheumatoid arthritis or severe asthma

Under the Freedom of Information (FOI) act, please could you provide, in its original format, any response your Trust has made since 1st January 2018 to FOI requests that relate to either rheumatoid arthritis or severe asthma.

To avoid any confidentiality conflict, please could ensure that your response(s) are redacted for confidential information.

Thank you in advance for your help. If you require any further details to ensure a speedy reply to this request, please do not hesitate to contact me.

Answer: Please see attached. Available upon request.

648.18

Patients discharged from hospitals during the night

I am writing under the terms of the Freedom of Information Act to request the following information:

Please could you tell me how many patients were discharged from hospitals during the night (11pm to 6am) in a) 2017 (January-December) b) 2018 (January-December).

Answer:

a) 2017 (January – December) = 2253

b) 2018 (January - December) = 2132

The figures include all wards and all [methods of discharge](#) (including still birth and patient died), between the hours of 11pm and 6am.

649.18

Patient falls in and NHS hospital setting

Could you please provide me with the following information:

1. The number of patient falls which have occurred in NHS hospitals within Walsall Healthcare NHS Trust for the years: 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, and 2018.

Answer:

The Trust commenced with a new integrated incident reporting system from 01/01/2012 and as such we are only able to provide data from this date. The previous reporting system was not comparable with the current system and therefore totals and levels of harm cannot be quantified.

	2012	2013	2014	2015	2016	2017	2018
1 - No Harm	542	448	310	379	353	511	472
2 - Low	407	292	386	350	528	465	493
3 - Moderate	76	8	10	7	10	11	10
4 - Severe	13	9	7	9	20	13	10
5 - Death	0	4	1	1	0	1	2
Grand Total	1038	761	714	746	911	1001	987

In addition, could you also provide:

2. A breakdown of the number of these falls per hospital, by the years above.

- **Answer: Response is combined in the table above.**

- a. A breakdown of the severity of these falls (e.g. low, medium, high)

- **Answer: Response is combined in the table above.**

The number of patients who were never discharged after their fall - i.e. died before discharge.

- **Answer: Response is combined in the table above.**

Could you break this down both by the years above, and by the hospital where they had the fall.

- **Answer: We are a stand alone hospital**

650.18

Knife injury and knife crime in hospitals

I am making a Freedom of Information request for the following information:

1. Can you specify how many patients under the age of 18 have been treated for knife injuries in your Trust since 2013. Can you give a break down by age and sex.

Answer: We are unable to identify knife or gun injuries as we record these as “Assaults” on our system. We can supply should you request the data taken from our Accident & Emergency department that were classed as ‘assaults’ so are not deemed to be accidents but may not all include knife wounds.

2. Over the same period can you tell me how many staff while at work in Trust hospitals have been threatened with a knife or similar sharp object, or attacked by people using knives or similar sharp object.

For the purposes of this FOI – I have used the Violence and Aggression category specific to staff infliction.

Year	Total
2013	5
2014	1
2015	3
2016	0
2017	0
2018	1
2019	1

3. How many staff or visitors (ie not patients) to Trust hospitals have required treatment following an attack in a hospital.

Answer: We do not hold this information.

4. How many times have police been called to hospitals in the trust area to deal with incidents involving violent behaviour of patients or hospital visitors in each year from 2013 to present?

Answer:

	2013	2014	2015	2016	2017	2018	2019
DA01 - Sexual Abuse (Patient To Patient)	0	0	1	0	0	0	0
VA01 - Violence Or Assault (Pt Medical Condition)	2	2	3	2	5	2	0
VA02 - Violence Or Assault (Pt Non-Medical Condition)	8	9	9	6	2	7	2
VA03 - Violence Or Assault (Visitor I.E. Outpatient)	4	3	4	2	3	3	0
VA05 -Threatening Behaviour Aggression (Pt Med Con	4	1	5	3	2	4	1
VA06 - Threatening Behaviour Aggression (Pt Non-Med	3	6	9	4	4	4	0
VA07 - Threatening Behaviour Aggression (Visitor)	5	6	7	8	4	5	0
VA09 - Verbal Abuse (Pt Medical Condition)	1	1	0	1	1	0	0
VA10 - Verbal Abuse (Pt Non-Med Condition)	2	3	3	2	0	0	0
VA11 - Verbal Abuse (Visitor - I.E. Outpatient)	4	1	1	1	0	0	0
VA15 - Sexual Abuse/Assault (To Staff)	0	0	0	0	0	1	0

651.18

Orthotic Services and Products

FOI request

Information supplied by the Hospital

1. Which of the following Orthotic Services do you have locally?
 - a) NHS run Orthotic Service in secondary care
 - b) NHS run Orthotic Service in primary care
 - c) The NHS run Orthotic Services in both primary and secondary care
 - d) A 3rd party run Orthotic Service in secondary care
 - e) A 3rd party run Orthotic Service in primary care
 - f) A 3rd party run Orthotic Service in both primary and secondary care

g) Other? Please specify

Answer: g, NHS run Orthotic Service in secondary care with clinicians supplied by a 3rd party.

2. If your service is run by a 3rd party: **Answer: (Clinicians only run by 3rd party)**
- a) Who is your current provider? **Answer: Opcare**
 - b) When did the current agreement start? **Answer: September 2012**
 - c) When is your current agreement up for renewal? **Answer: September 2019**
 - d) What was the total value of the contract? **Answer Please see 2g**
 - e) Is there an allowance for increasing patient numbers and activity each year?

Answer: N/A

f) Is the contract a lump sum / block contract or pay / BPR for activity basis?

Answer: Pay for activity basis.

g) What is the current cost per Orthotist session in your trust?

Answer This is commercially sensitive information and the contract is due to go out to tender. Exemption 43 is applied

3. Do you:
- a) Run your tender in-house - **Answer: No**
 - b) Procure direct from a framework - **Answer: No**
 - c) Run a mini competition with the framework - **Answer: Yes**
4. Which frameworks are you able to buy from currently:
- a) For Orthotic Clinical Service - **Answer: Yes**
 - b) For Orthotic Stock Product - **Answer: Yes**
 - c) For Orthotic bespoke products - **Answer: Yes**
5. Are you considering a tender at the moment? (Y/N) **Answer: Yes**
- a) If yes does it cover both service and product

Answer: Service and product with exceptions

b) When do you anticipate this will happen?

Answer: September 2019

6. What orthotics services are provided by the NHS in your jurisdiction?

Answer: From an acute perspective, we primarily provide an appointment based outpatient service with provision for ward referrals as required.

7. How many sessions do you run per week:
- a) Orthotist – **Answer: 5 x 3 hour sessions per week.**
 - b) LOP – **Answer: N/A**
 - c) Footwear technicians – **Answer: N/A**

8. How many Full Time equivalent Orthotists work in your Trust? **Answer: 0**

9. How many appliance officers/administrators do you employ in the Orthotics Service?

Answer: 1 Interim Orthotics Coordinator and 1 x Assistance Orthotics Practitioner (Administration role only)

10. Over the past five financial years how many orthotics patients were treated (please breakdown by year)?

- April 2013 – March 2014 – **Answer: 1612**
- April 2014 – March 2015 – **Answer: 1578**
- April 2015 – March 2016 – **Answer: 1472**
- April 2016 – March 2017 – **Answer: 1474**
- April 2017 – March 2018 – **Answer: 1481**

11. For orthotic products:

a) Which companies do you currently order Orthotic footwear from or do you make these in house?

Answer: We do not manufacture in house and all footwear if ordered by either Opcare or FitzKidz (Orthoeurope)

b) Which companies do you currently order insoles from or do you make these in house?

Answer: We do not manufacture in house and our current insoles are ordered via Opcare, Salts, Talarmade and Algeo

c) Please provide annual volumes of prescriptions/orders and total spend for the last 12 months (April 2017 – March 2018) and the lead times for:

1. Stock Orthotic Footwear orders - **52 Orders - Total £9.6K**
2. Modular Orthotic Footwear orders - **29 Orders – Total £6.8K**
3. Bespoke Orthotic Footwear orders - **108 Orders – Total £48.4K**
4. Orthotic Footwear repairs – **51 Orders – Total £3.4K**
5. Moulded EVA Insoles – **135 Orders – Total £14K**
6. Plastic Heel cups – **1 Order – Total £0.2K**
7. Carbon Fibre Insoles – **5 Orders – Total £0.6K**
8. Bespoke AFOs – **41 Orders – Total £11K**

Lead times

Off the shelf – 5 working days

Custom made – 10 working days

12. Have you overspent on your Orthotic budget in the last 5 years?

Answer: Yes

13. Is your Trust currently in special measure or has as it been in the last 3 years?

Answer: Yes

14. What is the breakdown of performance vs budget for the last 5 financial years, broken down year by year?

- | | |
|---------------------------|--|
| - April 2013 – March 2014 | Information not available for this period |
| - April 2014 – March 2015 | Spend £214.8K / Budget £164.7K |
| - April 2015 – March 2016 | Spend £261.3K / Budget £268K |
| - April 2016 – March 2017 | Spend £242K / Budget £268K |
| - April 2017 – March 2018 | Spend £241.6K / Budget £233K |

15. How many open complaints do you currently have in your Orthotic Service? **2**

16. How many complaints have you had regarding your Orthotic Service in the last 5 financial years, broken down by year?

- April 2013 – March 2014 – **No Information Available**
- April 2014 – March 2015 – **No Information Available**
- April 2015 – March 2016 – **No Information Available**
- April 2016 – March 2017 – **No Information Available**
- April 2017 – March 2018 - **6**

17. What patient administration IT system do you use for your Orthotic Services? (appointment booking, patient database etc) –

Answer: OPAS

18. What IT system do you use to manage the general administration in your Orthotic Service? (i.e. Ordering system, stock control, workshop management etc)

Answer: OPAS

19. What is your average waiting time from referral to assessment?

Answer: 14 Weeks

20. What is your average waiting time from assessment to supply?

Answer: 10 Weeks

21. What is your average referral to treatment time?

Answer: 24 weeks

22. Is your contract awarded jointly with prosthetics?

Answer: No as we do not have a prosthetics dept.

23. Are there any planned changes to the structure of your orthotic service?

Answer: No

24. Is your trust linked to or planning to merge with any other trusts?

Answer: Not a present

25. Have you implemented GS1 yet?

Answer: No

Information supplied by the Community

1. Which of the following Orthotic Services do you have locally?
 - a) NHS run Orthotic Service in secondary care
 - b) NHS run Orthotic Service in primary care
 - c) The NHS run Orthotic Services in both primary and secondary care **Yes**
 - d) A 3rd party run Orthotic Service in secondary care
 - e) A 3rd party run Orthotic Service in primary care
 - f) A 3rd party run Orthotic Service in both primary and secondary care
 - g) Other? Please specify
2. If your service is run by a 3rd party:
 - a) Who is your current provider?
 - b) When did the current agreement start?
 - c) When is your current agreement up for renewal?
 - d) What was the total value of the contract?
 - e) Is there an allowance for increasing patient numbers and activity each year?
 - f) Is the contract a lump sum / block contract or pay / BPR for activity basis?
 - g) What is the current cost per Orthotist session in your trust?
3. Do you:
 - a) Run your tender in-house
 - b) Procure direct from a framework
 - c) Run a mini competition with the framework
4. Which frameworks are you able to buy from currently:
 - a) For Orthotic Clinical Service
 - b) For Orthotic Stock Product
 - c) For Orthotic bespoke products **peak/algeos/talrmade**
5. Are you considering a tender at the moment? (Y/N)
 - a) If yes does it cover both service and product
 - b) When do you anticipate this will happen?
6. What orthotics services are provided by the NHS in your jurisdiction?

Answer: Foot orthoses

7. How many sessions do you run per week:
- Orthotist
 - LOP
 - Footwear technicians **Answer: 3 in community**
8. How many Full Time equivalent Orthotists work in your Trust?
9. How many appliance officers/administrators do you employ in the Orthotics Service? **0 in community**
10. Over the past five financial years how many orthotics patients were treated (please breakdown by year)?
- April 2013 – March 2014 **998 community**
 - April 2014 – March 2015 **1021 community**
 - April 2015 – March 2016 **921 community**
 - April 2016 – March 2017 **1030 in community**
 - April 2017 – March 2018 **825 in community**
11. For orthotic products:
- Which companies do you currently order Orthotic footwear from or do you make these in house? Peak/algeos/talarmade
 - Which companies do you currently order insoles from or do you make these in house? manufacture in house/salts
 - Please provide annual volumes of prescriptions/orders and total spend for the last 12 months (April 2017 – March 2018) and the lead times for:
 - Stock Orthotic Footwear orders **0 in community**
 - Modular Orthotic Footwear orders **0 in community**
 - Bespoke Orthotic Footwear orders **0 in community**
 - Orthotic Footwear repairs **0 in community**
 - Moulded EVA Insoles **This data is not recorded**
 - Plastic Heel cups **0 in community**
 - Carbon Fibre Insoles **0 in community**
 - Bespoke AFOs **0 in community**

12. Have you overspent on your Orthotic budget in the last 5 years?

Answer: No

13. Is your Trust currently in special measure or has as it been in the last 3 years?

Answer: Yes

14. What is the breakdown of performance vs budget for the last 5 financial years, broken down year by year?

- April 2013 – March 2014 **Answer: within budget**
- April 2014 – March 2015 **Answer: within budget**
- April 2015 – March 2016 **Answer: within budget**
- April 2016 – March 2017 **Answer: within budget**
- April 2017 – March 2018 **Answer: within budget**

15. How many open complaints do you currently have in your Orthotic Service?

Answer: 0 in community

16. How many complaints have you had regarding your Orthotic Service in the last 5 financial years, broken down by year?

- April 2013 – March 2014 **Answer: 0**
- April 2014 – March 2015 **Answer:0**
- April 2015 – March 2016 **Answer:0**
- April 2016 – March 2017 **Answer:0**
- April 2017 – March 2018 **Answer:0**

17. What patient administration IT system do you use for your Orthotic Services? (appointment booking, patient database etc)

Answer: lorenzo

18. What IT system do you use to manage the general administration in your Orthotic Service? (i.e. Ordering system, stock control, workshop management etc)

Answer: Lorenzo and eseries

19. What is your average waiting time from referral to assessment?

Answer:14 days in community

20. What is your average waiting time from assessment to supply?

Answer: 0 days in community

21. What is your average referral to treatment time?

Answer: 14 days in community

22. Is your contract awarded jointly with prosthetics?

Answer: No in community

23. Are there any planned changes to the structure of your orthotic service?

Answer: No in community

24. Is your trust linked to or planning to merge with any other trusts?

Answer: No

25. Have you implemented GS1 yet?

Answer:No

652.18
Palliative Care

I would like to obtain the following information:

In the year of 2018, how many patients admitted to the hospitals within your trust over the age of 75 were placed on palliative care?

Answer: 469

In the year of 2018, how many patients admitted to the hospitals within your trust over the age of 75 that were placed on palliative care passed away?

Answer: 240

In the year of 2018, patients admitted to the hospitals within your trust over the age of 75 that were placed on palliative care who passed away – what were the original admissions/diagnosis' of these patients?

Answer: our systems do not record this data

When did your trust stop using the Liverpool Care Pathway guidelines?

Answer: July 2014

In the year of 2018, how many patients admitted to the hospitals within your trust over the age of 75 were placed on an end of life care plan, that followed the guidelines of NICE?

Answer: 138

Does your trust use palliative sedation on patients over the age of 75?

Answer: As per the NICE Guidelines 2017, Quality Statement 3, the Trust plans in advance for difficult symptoms in individuals who are in the dying phase

Did your trust receive financial incentive for placing patients on the Liverpool Care Pathway from 1990 to 2013?

Answer: No

How much financial incentive did your trust receive for placing patients on the Liverpool Care Pathway from 1990 to 2013?

Answer: N/A

653.18
Process Automation and PEPPOL

1. Does your trust use PEPPOL as the messaging standard for key documents (purchase orders, advance shipping notes, invoices) to be exchanged between the trust and suppliers? **Please see below for a PEPPOL definition*
 - a. If yes, please provide the name of the PEPPOL access point provider (i.e. GHX, Pagero, EDICOM, Tradeshift etc) **Please see below for a definition of a PEPPOL access point provider*
 - b. What was the **annual cost of their services** in 17/18?
 - c. Contract Start Date
 - d. Contract End Date
 - e. Did the organisation use a framework to procure this service? If so, please provide the framework name
 - f. Please provide the **name and job title** of the individual who signed the contract
 - g. Following the purchase of your PEPPOL Access Point Supplier, has the organisation seen any **quantifiable benefits**, if so, please provide detail of these benefits (*i.e. reduction of hours spent on manual checks, % of tasks process automation, reduction in errors*)

Answer: Not at present

2. Does the PEPPOL access point provider integrate with any other non-NHS systems to provide services, supported by and compliant with PEPPOL? (*i.e. to provide Process Orders (PO's), Stock Items, Auditing, Fraud Protection etc.*)
 - a. If yes, please provide the name of the non-NHS provider **and** the type of service provided:

Answer: N/A

PEPPOL provides a set of technical specifications that can be implemented in existing eProcurement solutions and eBusiness exchange services to make them interoperable between disparate systems across Europe. PEPPOL enables trading partners to exchange standards-based electronic documents over the PEPPOL network (based on a 4-corner model). These documents include e-Orders, e-Advance Shipping Notes, eInvoices, eCatalogues, Message Level Responses, etc.

PEPPOL ACCESS POINTS are the meeting point for message transmissions between suppliers and the public sector. All invoices and orders will be processed through the access points providers.

654.18

Use of staff banks

I am writing to you under a Freedom of Information Act request regarding the Trust's use of staff banks as a key part of the effective management of temporary staffing across the NHS and in turn the reduction of agency spend.

FOI question no. 1a) - please can you confirm whether your Trust has either a) an in-house staff bank or b) outsourced staff bank or c) other service provision or d) not applicable, i.e. staff not required by the Trust, for the following staff groups:

- administrative services staff **Answer: a**
- allied health professionals **Answer: a**
- emergency services staff **Answer: d**
- health science services staff **Answer: a**
- 'registered' nursing and midwifery staff **Answer: a**
- 'unregistered' nursing and midwifery staff **Answer: a**
- medical and dental staff **Answer: b**
- personal social services staff **Answer: c**
- support services staff. **Answer: a**

If would be helpful to me if you could please reply in the following format: administrative services staff = c; allied health professionals = a; emergency services staff = d and so on.

FOI question no. 1b) - where you have not answered a) (an in house staff bank) to question 1a), please elaborate as follows:

- i) if any staffing category has received an answer of b) (an outsourced staff bank), please confirm the name of the outsourced staff bank service provider. For example, this could be either NHS Professionals or Pulse Healthcare Ltd. trading as Bank Partners or Reed Specialist Recruitment Ltd. or other service provider.

Answer: Tempre (Liaison Technology Ltd)

- ii) if any staffing category has received an answer of c) (other service provision), please confirm the nature of the other service provision. For example, this could be full, or in part, reliance on agency staff.

Answer: Personal Social Services Staff – supplied to the Trust via the regional council service.

It would be helpful to me if you could please reply in the following format: administrative services staff = c, reliance on agencies; nursing and midwifery staff = b, name of outsourced staff bank service provider and so on

FOI question no. 2a) - where you have answered b) (an outsourced staff bank) to question no. 1a), please confirm whether - in line with the Public Contract Regulations 2015 - you have entered a contract with that service provider under either:

a) a locally procured contract; or

b) called-off from an NHS accessible framework agreement, such as Crown Commercial Services RM1072 Workforce management services or Healthtrust Europe Total workforce solutions framework; or

c) other

Answer: Locally procured contract

Where you have not entered a contract, please confirm accordingly.

FOI question no. 2b) - where you have answered b) (called-off from an NHS accessible framework) to question no. 2a), please confirm the framework, for example, Crown Commercial Services RM1072 Workforce management services framework.

FOI question no. 2c) - where you have answered c) (other) to question no. 2a), please elaborate.

FOI question no. 2d) - where you have entered into a contract, for the most recent 12 month period, i.e financial year 2018/19, please confirm the contract's :

a) overall annual value (£/pence excl. VAT). For example, £1 million excl. VAT.

Answer: We have applied exemption 12 cost of compliance exceeds the appropriate limit. Would require us to manually review each invoice for the last financial year and calculate the individual elements of it

.Please note that this request is in relation to the provision of outsourced staff bank services only and should include any annual management fees, operational (transaction) costs, i.e.volume related hourly fees for the provision of bank workers and/or agency workers. Please do not include any other agency related spend.

b) overall annual value by staffing type (£/pence excl. VAT), for example, 'qualified' nursing and midwifery staff = £250,000 excl. VAT; 'unregistered' nursing and midwifery staff = £150,000 excl. VAT and so on.

Answer: £7850k

Please note that this request is in relation to the provision of outsourced staff bank services only and should include operational (transaction) costs, i.e.volume related hourly fees for the provision of bank workers and/or agency workers. Please do not include any other agency related spend.

FOI question no. 2e) - where you have entered into a contract, please confirm the contract's:

Agency Nurses and Agency Staff – Medical Locums

a) commencement date; **Answer: 01/12/2016**

b) expiry date of any initial term; **Answer: 31/10/2018**

c) expiry date of any applicable extension periods if taken; **Answer: 31/10/2020**

For example, if the contract entered commenced on 1st April 2018 for an initial period of 2 years with an option to extend by up to 2 years, then I would be looking for your reply to be as follows:

a) 01/04/2018;

b) 31/03/2020;

c) 31/03/2022.

FOI question no. 2f) - where your contract's initial or extended term is due to expire in the next 12 months, i.e. during financial year 2019/20, please confirm whether your Trust intends to:

- a) bring the outsourced managed staff bank service back in-house; or
- b) establish another local procured contract, advertising the business opportunity in line Public Contract Regulations 2015; or
- c) call-off again from an NHS accessible framework agreement, such as Crown Commercial Services or Healthtrust Europe.

Answer: N/A

FOI question no. 2g) - where you have answered c) (call-off again from an NHS accessible framework) to question no. 2f), please confirm the framework the Trust is likely to use, for example, Healthtrust Europe Total workforce solutions framework. If not yet known, please confirm accordingly.

Answer: N/A

FOI question no. 2h) - where you have answered c) (call-off from an NHS accessible framework) to question no. 2f), please confirm whether this outsourced staff bank contract shall be:

Answer: N/A

- a) relevant to the Trust only; or
- b) a collaborative contract including other trusts from across your and/or neighbouring STP's footprint?

FOI question no. 3 - for the most recent 12 month period, i.e. financial year 2018/19, please confirm the effectiveness of the Trust's staff bank as follows:

- a) monthly bank filled rate, broken down by staff type. For example, registered nursing and midwifery staff = 40%; and

Answer:

	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19
% Bank RN fill rate	46.3 6%	50.3 2%	52.3 6%	55.4 7%	51.4 5%	56.0 2%	56.4 1%	56.4 2%	56.9 1%	52.5 7%	55.9 6%

- b) monthly agency filled rate, broken down by staff type. For example, registered nursing and midwifery staff = 40%; and

Answer:

	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19
% Agency RN fill rate	53.6 4%	49.6 8%	47.6 4%	44.5 3%	48.5 5%	43.9 8%	43.5 9%	43.5 8%	43.0 9%	47.4 3%	44.0 4%

- c) monthly unfilled rate, broken down by staff type. For example, registered nursing and midwifery staff = 20%.

Answer: This information is not recorded

Where this monthly information is not readily available, please provide an annual average percentage rate instead.

FOI question no. 4a) - please can you confirm either 'Yes' or 'No' whether:

- i) there is a member, or members, of your Trust's Board who is accountable for the effective management of temporary staffing and in turn the reduction of agency spend? making effective use of staff banks overseeing the use of temporary staff; and

Answer: Yes

- ii) temporary staff usage is regularly discussed at Board meetings?

Answer: Yes

FOI question no. 4b) - where you have answered yes to question 4a)i) (there is an accountable member, or members, of your Trust's Board), can you please tell me whether the relevant persons concerned are either:

a) a non-executive; or

b) an employee of the Trust? If a Trust employee, please elaborate by confirming the role (not their name) of that person within the Trust.

Answer: Director of Nursing

655.18

Violence and abuse against NHS staff

I am writing to make an open government request to all the information from your trust to which I am entitled to under the Freedom of Information Act 2000 – regarding physical and non-physical assaults against NHS Staff.

This is a follow-up to the data previously released to and published by Unison and the Health Service Journal for the year 2016-2017, so please release the data I am requesting with the same parameters used in this previous data for the year 2017-2018.

The questions below are in order of importance. If answering these questions is likely to exceed the cost and time limit for responding to an FOI please answer them in order until these limits have been met. I would like to request the following:

1. **1)** The total number of physical assaults on staff for the following time periods:

- 2017-2018 **Answer:163 Physical Assaults**

- 2018-2019, or up until the most recent month available **Answer: 82 Physical Assaults**

By physical assaults on staff I refer to the definition used in the NHS Protect 2016 Guidance: “the intentional application of force against the person without lawful justification resulting in physical injury or personal discomfort. Spitting is included in the definition of a physical assault.”

2) If available, please also release the relevant data sets for these time periods.

Answer:

105 – Part medical condition

58 – Non medical related

No further information or breakdown

3.The total number of non-physical assaults on staff for the following time periods:

- 2017-2018 **Answer: 221 Non- Physical Assaults**

- 2018-2019, or up until the most recent month available **Answer: 179 Non- Physical Assault**

By non-physical assaults on staff I refer to the definition used in the NHS Protect 2016 Guidance: "the use of inappropriate words or behaviour causing distress and/or constituting harassment. Non-physical assault includes: offensive or obscene language; verbal abuse and swearing; brandishing weapons, or objects which could be used as weapons; attempted assaults; offensive gestures; threats; intimidation; harassment or stalking; damage to buildings equipment or vehicles which causes fear for personal safety; offensive language or behaviour related to a person's, race, gender, nationality, religion, disability, age or sexual orientation; inappropriate sexual language or behaviour."

If available, please also release the relevant data sets for these time periods.

656.18

Deaths of patients with a learning disability

Please would you provide the following information:

- 1) the number of deaths of patients with a learning disability that occurred in the last three years (by years defined as 1/4/16 - 31/3/17, 1/4/17 - 31/3/18, 1/4/18 to present).

Answer:

YearFinancial	Deaths
Year 2016/17	2
Year 2017/18	4
Year 2018/19	6

- 2) the number of deaths of patients with a learning disability reported as an incident on the National Reporting and Learning System (NLRs) in the last three years (defined as above)

Answer: Nil

- 3) the number of deaths of patients with a learning disability reported as an incident on the Strategic Executive Information System (STEIS) in the last three years (defined as above)

Answer: STEIS does not specifically ask for a learning disability status

657.18

Migrant upfront charging

This request is made under the Freedom of Information Act 2000.

Can you please provide me with the following information from October 2017 to the most recently available data:

1. The number of migrant patients under the age of 18 whose parents/guardians were charged upfront for treatment after the children were deemed ineligible for free healthcare. Please could you give the nature of the health problems (eg. cancer, arrhythmia etc.)

Answer: Zero

2. The amount charged in each case.

Answer: Zero

3. Which children in 1 did not proceed with the intended treatment after their parents were asked to pay.

Answer: Zero

4. The number of children in 2 whose parents did not have the means to pay the charges.

Answer: Zero

Please could I request the following information in relation to your hearing/audiology service.

1. Do you have a hearing/audiology service at your Trust?

Answer: Yes – we have an Audiology service

2. If yes, can patients contact the service by:
 - a. Email – **Answer: Yes**
 - b. Fax machine -**Answer: No**

658.18

NHS staff assaults

I am sending a Freedom of Information Request to your trust about the numbers of assaults on NHS staff. Please answer the following questions in order, until the time or cost limit has been reached:

1. If your trust runs one or more A&E departments, could you please provide the total number of physical assaults on staff for each of the following time periods: 2018-2019 (or up until the most recent month), 2017-2018, 2016-2017, 2015-2016 and 2014-2015. Please release any readily available data-sets for these time periods.

Answer: 74

2. If your trust runs one or more A&E departments, could you please provide the total number of non-physical assaults on staff for each of the following time periods: 2018-2019 (or up until the most recent month), 2017-2018, 2016-2017, 2015-2016 and 2014-2015. Please release any readily available data-sets.

Answer: 187

3. If available, please provide a breakdown of the data **for your whole trust**, for the total number of physical assaults on staff by their profession (see below) for the following time periods: 2018-2019 (or until the most recent month available), 2017-2018, 2016-2017, 2015-2016 and 2014-2015. Please release any readily available data-sets.

Answer: This information is not recorded

4. If recorded, please provide a breakdown of the data **for your whole trust**, of the total number of physical assaults on staff by aggravating factors (see below) for the following time periods: 2018-2019 (or until the most recent month available), 2017-2018, 2016-2017, 2015-2016 and 2014-2015. Please release any readily available data-sets.

Aggravating factors can include (but is not is not exclusive to) the following: racial, sexual, sexual harassment, homophobia, ableism, ageism, hate crime, and mental illness or condition.

Answer: We have applied exemption 12, cost of compliance exceeds the appropriate limit . Due to having to manually sort through every incident to locate the information

4. Could you please provide the amount of money spent on private security guards for each of the following years: 2018-2019 (or until the most recent month available), 2017-2018, 2016-2017, 2015-2016 and 2014-2015. Please release any readily available data-sets –

Answer: Circa £400k Per Annum

Could you also provide the amount of money total money spent on security measures (including but not exclusive to body cameras, CCTV, re-designing clinical environments, security staff, campaigns) for each of the following years: 2017-2018, (or until the most recent month available), 2017-2018, 2016-2017, 2015-2016 and 2014-2015.

Answer: Site-wide CCTV IN 2014/15 – Circa £100K

660.18 Sleep services

Freedom of Information request.

1. How many patients do you currently have on your sites, who have been diagnosed with sleep apnoea

Answer: 1

2. How many of those use CPAP

Answer: 1

3. How many patients were diagnosed five years ago (i.e., on your books)

Answer: We have applied exemption 12; cost of compliance exceeds the appropriate limit. Due to having to manually sort through notes to locate the information.

4. How many patients 10 years ago.(if appropriate)

Answer: We have applied exemption 12; cost of compliance exceeds the appropriate limit. Due to having to manually sort through notes to locate the information.

5. How much is the cost per patient to the Trust?

Answer: Our systems do not go down to this level of detail

6. If this cannot be broken down then total cost per year.

Answer: CPAP costs £160,559.72

661.18

Numbers of patients which were treated/assigned the following procedures/codes

I would like to request information on the following data within 20 days, for each of the OPCS codes below I would like to know the total numbers of patients which were treated/assigned the following procedures/codes for 2018:

Inpatient numbers only for this (i.e. daycase/main operating theatres)

Description: **Rubber Band Ligation of Haemorrhoid**

OPCS Code: H52.4

HRG: FZ23A

Total number of patients treated:

Answer: 193

AND

A70.1 Implantation of neurostimulator into peripheral nerve. Total number of patients

Answer: 0

A70.4 Insertion of neurostimulator electrodes into peripheral nerve. Total number of patients

Answer: 0

662.18

Direct Engagement for Locum Staff

What is your agency spend on Medical Locums/AHP's financial year 2017/2018?

Answer:

Medical Agency - £2,306k

AHP Agency - £599k

Do you have a Direct Engagement arrangement for Medical Locums/ AHPs? If so who is your current provider?

Answer: Liaison

When does the contract with your current provider expire?

Answer: January 2020

What is the cost of this service and it charged per hour or % fee?

Answer: Percentage per transaction.

663.18

Trust Bank and Agency Locums

Do you have an agency service level agreement in place for Medical locums?

Answer: No

Which framework do you currently source staff under?

Answer: HTE

Which of the below arrangements do you currently have in place?

- Master Vendor
- Preferred supplier list
- No arrangement

Answer: Preferred supplier list

What was your spend on medical locums for the last 3 financial years?

Answer:

2017/18 - £2,306
2016/17 - £4,852
2015/16 - £3,847

Do you have a bank for medical locums?

Answer: Yes

What value goes through your internal bank currently ?

Answer:

2017/18 - £6,415

Do you manage this on a system? If yes how much do you pay for this per annum or if per transaction please confirm?

Answer: Yes

Do you have any company that runs this for you? If yes how much do you pay for this per annum or if per transaction please confirm?

Answer: Yes, Liaison – Percentage per transaction.

664.18
Vyxeos

1. Is Vyxeos an approved therapy on the trust formulary for patients with Acute Myeloid Leukemia (AML)?

Answer: No – this is not approved for use on the hospital formulary. Patient's requiring this treatment are transferred to New cross, Wolverhampton

2. What e-prescribing system does the Trust use?

Answer: Chemocare

3. Is Vyxeos now available to be prescribed through the Trust's e-prescribing system?

Answer: No – see above.

666.18
Treated with defined drugs

Within your health trust how many patients have you treated in the year 2018, regardless of reason;

Ambisome **Answer: 0**

Caspofungin (candidas) **Answer: 22**

Cresemba **Answer: 0**

Noxafil/posaconazole **Answer: 0**

Voriconazole/VFEND – **Answer: 0**

Zavicefta –**Answer: 0**

Zerbaxa –**Answer: 0**

If your trust is able to split by indication, please provide the following;

Within your health trust how many patients have you treated in the year 2018 for IA (invasive aspergillosis) with the following;

Answer: We have applied exemption 12; cost of compliance exceeds the appropriate limit. Due to having to manually sort through patient notes locate the information

- Cresemba
- Ambisome (amphotericin B/amphotericin liposomal)
- Voriconazole/VFEND
- Caspofungin (candidas)
- Noxafil/posaconazole

Within your health trust how many patients have you treated in the year 2018 for cIAI (complicated intra-abdominal) with the following;

Answer: We have applied exemption 12; cost of compliance exceeds the appropriate limit. Due to having to manually sort through patient notes locate the information

- Ceftazidime-avibactam (Zavicefta)
- Meropenem
- Ceftolozane–Tazobactam (Zerbaxa)

Within your health trust how many patients have you treated in the year 2018 for cUTI (complex urinary tract infection) with the following;

Answer: We have applied exemption 12; cost of compliance exceeds the appropriate limit. Due to having to manually sort through patient notes locate the information

- Ceftazidime-avibactam (Zavicefta)
- Meropenem
- Ceftolozane–Tazobactam (Zerbaxa)

Within your health trust how many patients have you treated in the year 2018 for HAP/VAP (hospital acquired pneumonias and ventilated associated pneumonia) with the following;

Answer: We have applied exemption 12, cost of compliance exceeds the appropriate limit. Due to having to manually sort through patient notes locate the information

- Ceftazidime-avibactam (Zavicefta)
- Meropenem
- Ceftolozane–Tazobactam (Zerbaxa)

667.18

Lost/Stolen controlled drugs

I am contacting you under the Freedom of Information act 2000.

I wanted to get a list of controlled drugs that have been reported lost/stolen from your NHS Trust in the last five years (2014,2015,2016,2017,2018)?

Please provide the answers in an excel spreadsheet or google spreadsheet with the following headings: date, whether drug was stolen/lost, whether the drug was recovered/found, the name of the controlled drug, the approximate value.

Answer: Please see attached sheet. Available upon request.

We have supplied 2017 & 2018. We have applied exemption 12; cost of compliance exceeds the appropriate limit. Due to the time taken to locate and produce the information

668.18

Electronic Medical Record System

I kindly request, under the Freedom of Information Act 2000, that you provide information regarding the following questions:

1. Does your hospital trust utilise an electronic medical record system for recording and managing patient records?

Answer: We have various systems across the trust that make up an Electronic Patient record but not as an individual system. We still have physical medical records that are very much in use across the trust.

2. If your trust does use an electronic medical record system, which system is used and who supplies this software?

Answer:

Clinical systems	
Supplier	System Name
Clevermed Limited	Badgernet
Haemonetics	Blood Tracking Management System (software name is Blood Track)
BookWise Solutions Limited	Bookwise (Oncology)
BookWise Solutions Limited	Bookwise(communitiy)

CIS	ChemoCare
Medgate	Cohort
Healthcare Software Solutions	CRIS
Dolphin Imaging	Dolphin
Graphnet	Graphnet
ICNet International Ltd	ICNet
CIMS	INFOFlex
6pm Solutions	Lillie
NHS Digital - DXC	Lorenzo
3M Health Care Ltd	Medicode
Newgate Technology	Mobius/Nexus
Nuance	Nuance Digital Dictation(Escription)
Wynnlodge Limited OPAS	OPAS
CSC	Ormis
GE Healthcare	PACS
Folding Space	Pathology folding space document management
Ascribe Ltd	Pharmacy Ascribe
Siemens Hearing Instruments Ltd as of Jan 2015 - support by Sivantos (part of Siemens)	Practice Navigator
TMS Insight Data Capture	PTS (Prescription Tracking System)
3M United Kingdom plc	RFID
Optum	Scriptswitch
NHS Somerset Health Informatics Service	Somerset
Sunquest Information Systems (Europe), Ltd	Sunquest ICE
Total Mobile	Total Mobile
Vital Pac	Vital Pac
Folding Space	Walsall A&E - Folding Space Document scanner viewer and storage
Folding Space	Walsall Referrals & Oncology - Folding Space Document scanner viewer and storage
Folding Space	Walsall Payroll Folding Space Document Scanning and Retrieval
CliniSys Group Limited	Winpath (BTS/BT) (CliniSys)
Winscribe	Winscribe

Orion	Fusion
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3. Does your hospital trust continue to use paper based records for recording and managing patient's case notes or are records exclusively managed by an electronic system?

Answer: We are still using paper medical records as well as recording electronically.

669.18

Allegations against staff

FOI REQUEST:

1. The name of your trust

Answer: Please see table below

2. For each of the last five calendar years, 2014, 2015, 2016, 2017 and 2018, please state the number of allegations AGAINST a staff member of:
 - Sexual misconduct
 - Sexual harassment
 - Sexual assault
 - Rape

Answer: Please see table below

3. For each of the allegations received, please state:

- Whether the alleged victim was a member of the public, patient or health worker
- If health worker, whether they were staff, bank or agency
- Brief details of allegations
- Outcome of case (i.e. internal investigation, staff members disciplined, sacked)
- Whether allegations were referred to police

3.6 In each case found to be proved, whether trust reported concerns about individual to the Healthcare Professional Alert Notices System (HPANs)?

Answer: Please see table below and answer to 3.6

4. Please specify the Trust's policy for alerting relevant authorities/future employers about UNREGISTERED/UNQUALIFIED staff (e.g. nursing assistant or healthcare assistant) who are proven (by internal investigation) to have committed acts pertaining to sexual misconduct/sexual harassment/sexual assault/rape

Answer Please see answer below

The name of your trust	Walsall Healthcare NHS Trust				
Question/Year	2014	2015	2016	2017	2018

Number of allegations AGAINST a staff member of Sexual Misconduct	0	0	0	0	0
Number of allegations AGAINST a staff member of Sexual Harassment	0	2 Allegations <i>(both alleged victims were health workers – permanent staff)</i> 1 Disciplinary process followed – no further action required 1 Disciplinary process followed – no further action required	0	1 Allegation <i>(The alleged victim was a patient)</i> Disciplinary process followed and investigation by police – both processes concluded with no case to answer.	2 Allegations <i>(both alleged victims were health workers – permanent staff)</i> 1 Disciplinary process – formal counselling 1 Staff member resigned
Number of allegations AGAINST a staff member of Sexual Assault	0	0	2 Allegations <i>(1 alleged victim was a patient, the other was a health worker - locum)</i> 1 Disciplinary process followed - process concluded with no case to answer.	0	0

			<i>1 Disciplinary process followed – referred to the GMC</i>		
Number of allegations AGAINST a staff member of Rape	0	0	0	0	0

3.6 In each case found to be proved, whether trust reported concerns about individual to the Healthcare Professional Alert Notices System (HPANs)?

Answer: HPANs was not applicable in above cases.

4. Please specify the Trust's policy for alerting relevant authorities/future employers about UNREGISTERED/UNQUALIFIED staff (e.g. nursing assistant or healthcare assistant) who are proven (by internal investigation) to have committed acts pertaining to sexual misconduct/sexual harassment/sexual assault/rape

Answer: These cases would be referred to the Police and if reference requests were sought the Trust would inform future employers that a disciplinary process had been undertaken.

670.18 Spend on Edgumbe Health

Please could I request how much the Trust has spent and continuing to spend on Edgumbe Health?

Answer: The details of this is shown on the Trusts website for payments over £25k using the following link

<https://www.walsallhealthcare.nhs.uk/about-us/how-we-are-run/our-expenditure/>