

FREEDOM OF INFORMATION

Disclosure Log – Quarter 3 (October-December 2019)

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448.19	November	Trust In-patient Vitamin K Antagonists (VKA) dosing/VTE risk assessment practices
449.19	November	Equipment Details
450.19	December	Women physiotherapy visits
451.19	December	Hydrogen Peroxide Vapour (HPV Fogging) or Ultraviolet (UVC) for decontamination?
452.19	December	Indwelling urinary catheter
453.19	December	Monitoring catheter acquired urinary tract infection (CAUTI) rates independently of the NHS Safety Thermometer information?
454.19	December	Growth Hormone
455.19	December	System C Medway clinical and patient management system
456.19	December	Number of people Walsall Pharmacy provide pharmaceutical services for.
457.19	December	Demand side response agreements
458.19	December	Personal Safety & Breakaway (PSB) training
459.19	December	Haemonetics plasma device
460.19	December	Breast Cancer
461.19	December	Agency spend
462.19	December	Sepsis
463.19	December	Homeless discharges
464.19	December	Payments to Hill Dickinson LLP
465.19	December	Communications & Telephony Request
466.19	December	Cladding
467.19	December	Data Sharing
468.19	December	Processing of organisation staff
469.19	December	Healthcare Operations department
470.19	December	Coding and activity information
471.19	December	Flu Peer Vaccinators
472.19	December	Interim appointments
473.19	December	Washrooms & Waste
474.19	December	Non-small cell lung cancer (NSCLC)
475.19	December	Rostering/Scheduling
476.19	December	Recruitment drives abroad
477.19	December	Biologics and biosimilar prescribing in Rheumatology.
478.19	December	Tonsillectomy surgery on young adults and adults (16 years and over)?
479.19	December	Carbon footprint and sustainability

338.19
Ophthalmology

Dear Sir/Madam,

I write to submit a FOI request regarding Ophthalmology service provision. I would be most grateful for your response to the following questions:

1. How many full-time equivalent consultants are in employment in the department?

Answer: None employed by the Trust

2. How many full-time non-training grade doctors are in employment in the department?

Answer: None employed by the Trust

3. Are there any unfilled consultant posts?

Answer; N/A

Please state which sub-speciality consultant posts remain unfilled

4. Is there a community glaucoma service?

Answer: No

5. Is the community glaucoma service offered through AQP (Any Qualified Provider)? Please state which AQP if applicable:

Answer: N/A

6. Is there a paediatric screening service?

Answer:

Orthoptic screening service in reception aged children

Retinopathy of prematurity screening in pre-term babies

7. Is the paediatric screening service offered through AQP?
Please state which AQP if applicable:

Answer: No

8. Is there a Local MECS (Minor Eye Conditions Service)?

Answer: Yes

Please state who this is offered through if applicable:

Answer: Primary Eye Care Services

9. Does the department outsource any other speciality services to community based AQPs?

Answer: No

Please state which if applicable:

10. Does the department offer collagen cross-linking?

Answer: No

If not, which centre(s) are patients referred to?

Answer: Wolverhampton eye Infirmary – New Cross Hospital

11. Does the department offer Femto laser treatment for cataract surgery?

Answer: No

12. Does the department offer Femto laser treatment for corneal surgery?

Answer: No

339.19

Maintenance backlog

Dear Sir Madam,

Under the Freedom of Information act can you please provide me with the following information:

Q1 A breakdown of the high-risk maintenance backlog, as of the most recent Estates and Returns Information Collection submission.

Answer: This information is not available

Q2 A breakdown of the significant-risk backlog maintenance backlog, as of the most recent Estates and Returns Information Collection submission.

Answer: Exemption 21 applied. Information available by other means

<https://digital.nhs.uk/data-and-information/publications/statistical/estates-returns-information-collection/summary-page-and-dataset-for-eric-2017-18>

Q3 A copy of all reports made to the HSE under RIDDOR in the last two years relating to accidents and dangerous incidents caused by buildings, vehicles and equipment.

Answer:

Building	Vehicles	Equipment
6	0	3

Q4 Details of how many times in the last two years the Trust has:

o Experienced a leaking roof in an area where patients are present and details of any incidents;

Answer: 72

o Experienced a broken or leaking sewage pipe in an area where patients are present and details of any incidents;

Answer: 2

o Contracted a pest control service and details of any incidents.

Answer: 20

340.19
EPR

Dear All

Please find attached our FOI request for information on your current status of Patient Records and how much of these records you have moved to digitise.

I would really appreciate it if you could complete the questions on the attached form

Answer: We were unsure what TIE meant in question 32. If you clarify what this is we will supply a response.

QUESTIONS	RESPONSES
Paper Do the clinical areas in the Trust still use paper records? Do the clinical areas in the trust still use paper to record medical observations? Do any paper documents get scanned into the Electronic record?	 Yes Yes Yes

How many documents get scanned into the Electronic document per annum?	This information is not recorded
How much is the trust spending on scanning paper documents into the Electronic record per annum inclusive of resources and hardware?	N/A
Is the Trust still using paper for patient questionnaires?	Yes
Is the trust still using paper for procedural consent documentation?	Yes
<u>EPR</u>	
Has the current system got the functionality to store photographs and videos within the patient record?	yes but not used
Does the patient record system include digital signature for patients signing legal documentation?	no
Does the current system have a function where patients can access their own health record?	no
Does the EPR have a function for clinical noting used on ward rounds?	no
Does the system have Medical documentation templates that can be changed to suit specialised needs?	no
Does the system have an Administration Function?	yes
Does the system have Administration dashboards that feed outcomes from medical documentation?	no
Does the system contain different modules, if so, what modules are they?	MPI, ED, outpatients, inpatients, contacts, Access Plans
What are the System costs per user if applicable?	N/A
Cost of application ?	N/A
What are your On-going maintenance costs or SLA?	£58,928
How many staff are using the system?	3500
<u>BI</u>	
Does the system have Medical OPC Coding Information and storage?	Yes
Does the system have its own Business information analysis tools?	Yes
<u>General</u>	
What is your approximate Outpatient activity per annum?	Average of 335764 over 2014 - 2019
What is your approximate Inpatient Activity per annum?	Average of 71123 over 2014 -2019
TIE costs per annum?	clarification
What PAS system do you use?	Lorenzo
What are your PAS costs per annum?	Free, centrally funded
<u>Self-Check In - Yes/No</u>	No
<u>Theatre</u>	
Does the EPR have an integrated Theatre logistics system?	No

Is the Theatre logistics system into the Patient record system or does the users need to log into a separate system to plan Theatre lists and complete Theatre Documentation?	Separate system
What system is used to produce Operation notes and is this system integrated into the patient record?	Ormis
What is the Theatre system costs per annum?	£30,840
<u>Order Communications</u>	
Order Communication system for Radiology?	Sunquest Ice
Order Communications system for Laboratory?	Sunquest Ice
Results/Diagnostic system or alerting Radiology?	Sunquest Ice
Results/Diagnostic system or alerting Laboratory?	Sunquest Ice
Is the Order Communications system integrated into the Patient record system or does the user need to log into a separate system to order diagnostics?	Separate System

341.19

Troponin in patients with suspected acute coronary syndrome

Hello,

My enquiry is what point of care test is used in your trust to measure troponin in patients with suspected acute coronary syndrome? Primarily whether you use a point of care test in A+E and what point of care test is used, such as if it is a high sensitivity troponin or one of the earlier point of care assays.

Answer: The Trust does not have a point of care test Troponin device

342.19

Workforce reporting

Hello Walsall Healthcare NHS Trust,

1. What is the size of your informatics team (FTE)?

Answer: The Informatics Directorate is made up of 140 colleagues, totalling 119.75 FTE.

2. What percentage of time is spent on workforce/employee reporting (as compared with clinical reporting etc.)

Answer: The Workforce Intelligence Team, which forms part of the People & Culture Directorate, are responsible for workforce/employee reporting. Information isn't available to measure the 'time' spent Trust-wide on clinical reporting.

2a. of the workforce/employee reporting, what is the estimated time split between standard and non-standard (custom) reporting. (examples of standard reports could include the weekly and monthly agency returns to NHS improvement and HR reporting inputs to the monthly board reports)

Answer: We estimate that there is a 50/50 split between standard and non-standard (custom) reporting with the Workforce Intelligence activity.

3. Does the trust use an analytics platform or a business intelligence (BI) reporting tool to support your reporting requirements? If so, can you please answer the below:

Answer: Yes

a. Name of the platform/reporting tool used (i.e, Qlik, Tableau, Spotfire, Microsoft)

Answer: *ESR (Electronic Staff Records) – Business Intelligence*

b. Annual cost for 18/19:

Answer: *No direct cost. ESR is a national workforce solution rolled out to all Trusts centrally.*

c. Contract start and end date:

Answer: N/A

343.19

Smoking-related diseases with Juul

Dear Sir/Madam,

Please send me all meetings, communication and internal discussions between your trust's board members, tobacco cessation teams and doctors working on smoking-related diseases with Juul, a leading e-cigarette company, in the past 2 years

Answer: The Trust has had no meetings with the e-cigarette company.

344.19

Cataract Surgery

I am requesting the following:

1. Number of patients waiting for a cataract surgery, by month or by year for FY17, FY18, and FY19

Answer:

2017 201

2018 177

2019 382

2. Number of patients waiting over 10 weeks for a cataract surgery, by month or by year for FY17, FY18, and FY19

Answer:

2017 127
2018 92
2019 325

3. Number of patients waiting over 18 weeks for a cataract surgery, by month or by year for FY17, FY18, and FY19

Answer:

2017 111
2018 67
2019 181

345.19
Cataract Surgery

Dear FOI Officers,

I am writing to request the following:

1. Referral-to-Treatment time for cataract surgery (C71 to C77), by month or by year for FY17, FY18, and FY19

Answer;

2017 78.5 Days
2018 93.0 Days
2019 110.3 Days

2. Average time waited before a first appointment with an ophthalmologist as a new patient, by month or by year for FY17, FY18 and FY19

Answer;

2017 86.5 Days
2018 80.5 Days
2019 81.0 Days

3. Number of new patients waiting for over 10 weeks for a first appointment with an ophthalmologist as a new patient, by month or by year for FY17, FY18, and FY19

Answer;

2017 2046
2018 2228
2019 748

4. Number of new patients waiting for over 18 weeks for a first appointment with an ophthalmologist as a new patient, by month or by year for FY17, FY18, and FY19

Answer;

2017 431

2018 346

2019 189

346.19

Flu Vaccines

Attached is a document from Public Health England that shows the number of frontline staff in your organisation who were vaccinated against the flu in the 18/19 season and the number who were not vaccinated.

- 1) Please could you give me a final figure on the number of staff involved with direct patient care who were NOT vaccinated?

Answer: 605 (but some could have had the jab elsewhere and not informed us)

- 2) Could you break this figure down by the number NOT vaccinated who were employed as (a) doctors, (b) nurses, (c) other professionally qualified clinical staff and (d) support staff.

Answer:

35 doctors

295 nurses

87 AHP's

188 Support staff

- 3) In relation to these staff who were NOT vaccinated how many in each of those four groups were taken away from working in a position where they had direct patient care because they did not have the vaccination?

Answer: No staff were excluded.

347.19

Da Vinci robot

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

It is now known that there is a substantial increase in the number of trusts within the English NHS that have implemented the Da Vinci robot. This has resulted in substitution effects across technologies within the prostatectomy specialty: firstly, laparoscopic procedures to replace open; secondly, robotic procedures to replace laparoscopic. We aim to address how this substitution has impacted diffusion to other surgical specialties, patient outcomes and labour productivity.

Questions for your trust (in order of importance):

1. Does your trust have a Da Vinci robot? If yes, please provide:

Answer: No

2. The number of Da Vinci robots your trust has.

Answer: N/A

3. The date each robot was purchased.

Answer; N/A

4. The purchase costs of the Da Vinci robot(s) and approximate annual running/maintenance costs.

Answer: N/A

348.19

Bank, Agency staff

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. Which solution(s) or software(s), if any, the Trust uses for Staff Bank Management

Answer: Liaison

2. The end date(s) of the contract for the solution(s) or software outlined in question 1 (Staff Bank Management).

Answer: 31/01/2020

3. Which staff types are on boarded onto the Staff Bank Management software outlined in question 1.

Answer:

- Medical Locums/Doctors
- AHP's (Allied Health Professionals)
 - HSS (Health and Social Sciences)
- Nursing
- NMNC (Non-Medical, Non-Clinical)

4. Which staff types are not currently on boarded onto a Staff Bank Management system or software.

Answer:
Corporate
Legal Supply

5. The total (bank, agency, substantive, all others) workforce spend for the trust for financial year 2016/2017.

Answer: £172,118k

6. The total (bank, agency, substantive, all others) workforce spend for the trust for financial year 2017/2018.

Answer: £173,686k

7. The total (bank, agency, substantive, all others) workforce spend for the trust for financial year 2018/2019.

Answer: £179,269

8. The agency workforce spend for the trust for the financial year 2016/2017.

Answer: £10,932k

9. The agency workforce spend for the trust for the financial year 2017/2018.

Answer: £7,503k

10. The agency workforce spend for the trust for the financial year 2018/2019.

Answer: £8,745k

11. The bank workforce spend for the trust for the financial year 2016/2017.

Answer: £10,717k

12. The bank workforce spend for the trust for the financial year 2017/2018.

Answer: £13,327k

13. The bank workforce spend for the trust for the financial year 2018/2019.

Answer: £16,414k

349.19

Car parking

Dear Sir Madam,

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

1. How much money did the trust raise in revenue from car parking charges in each of the last two financial years - [2017/18](#), [2018/19](#) and [19/20](#) so far? Include a breakdown of staff and visitor/patient parking if possible.

Answer:

2017/18 £1,341,292. (£408,268k – staff and £933,024 –visitors).
2018/19 £1,514,675 (£428,442 – staff) and £1,086,233 – visitors).
2019/20 £864K (£214k staff - £650k visitors)

2. How much money was raised from parking fines in each of the last two financial years - [2017/18](#), [2018/19](#) and [19/20](#) so far? Include a breakdown of staff and visitor/patient fines if possible.

Answer: Fines are not broken down by staff/visitors

2017/18 £1980.00
2018/19 £0.00
2019/20 £5k

3. Have you increased the cost of parking in your car parks during the last financial year - and [2009/10](#)? Please give a breakdown of how much parking has increased by

Answer:

Last financial year – No

Since 2009/10 – The original costs from 2010 – 2017 were :

0-15 mins free

15-30 mins - £1.00

30 mins to 1 hr - £2.00

1-2 hr - £3.00

2-3 hr - £4.00

3-4hr - £5.00

4-5hr - £6.00

5-6hr – 6.00

2017 – current date

0-15 mins free

15-30 mins - £2.80

30 mins to 1 hr - £2.80

1-2 hr - £3.80

2-3 hr - £4.30

3-4hr - £4.80

4-5hr - £4.80

5-6hr – 5.30

4. Do you charge for disabled parking?

Answer: Yes

5. Is your car park managed by a private firm? If so, what proportion of revenue created by a) parking income and b) parking fines does the firm take?

Answer: Yes – all revenue goes back to the trust – they get paid flat fee of £60k per annum

350.19

Information and Communication

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.

These questions relate specifically to Information and Communication Technology (ICT) services which includes services relating to the support of

- Computer hardware and operating software
- Servers,
- PC's, laptops printers and mobile devices,
- Networks,
- Telephony
- Application support

1. Who provides your IT services (please also state if these

services are in-sourced to an internal ICT team or outsourced to an external supplier)

Answer: In House

2. How many staff deliver the ICT services listed above?

Answer: 28

3. If your services are outsourced to an external supplier, when does the contract expire?

Answer: Networks & Telephony 31/03/20

4. Do you have any services hosted in the cloud?

Answer: No

5. How many applications are supported by the IT service provider?

Answer: Approx 48

6. Which operating system do your PC's and laptops use (ie Windows 10 etc)?

Answer: Windows 7, Windows 10

351.19 Maternity

Dear Sir/Madam,

I am applying under the Freedom of Information Act 2000 for the following information.

Please provide the number of live term infants born in your maternity unit for each of the following years; 2014, 2015, 2016, 2017, 2018

Answer:

Year	TERM live births
2014	We were not using an electronic system fully at this time and the data is not available
2015	
2016	
2017	3231
2018	3108

Please provide for the same years the total number of term infants that were stillborn, with the intrauterine death occurring either before or during labour

Answer:

Year	Before labour (number)	During Labour (number)
2014	We were not using an electronic system fully at this time and the data is not available	
2015		
2016		
2017	3	0
2018	5	0

Please provide for the same years the 5-minute Apgar score of <6, n (rate per 10,000) for each year for your unit

Answer: The Trust commenced an electronic patient record in September 2016 for intrapartum care

Exemption 12 is applied for data for 2014 – 2016 as this would require a review of manual records for this time

The data provided is the total number of babies for each year and not rate per 10,000

2017 = 34 babies in total

2018 = 32 babies in total

Please provide for the same years the Hypoxic-Ischaemic Encephalopathy rate (HIE) for moderate/severe (rate per 10,000)

Answer:

Year	All encephalopathy
2014	3
2015	6
2016	9
2017	9
2018	9

The data has been provided as total number of babies who have been recorded on our neonatal electronic system with encephalopathy. It is not possible to differentiate severity of HIE.

For the year 2018 alone please detail how many obstetricians and midwives were working for you (Please give separate numbers for both professions).

Answer:

In order to respond we have used the nominal role from April 2018 as the numbers change during the year

Obstetric staff

- **14 consultant obstetrician and Gynaecologist (1 part time 80%)**

- **9 Middle grade doctors: 5 O&G Specialty Trainees (ST3 or above), 3 Trust grades and 1 MTI**
- **9 junior doctors: 1 FY1, 4 FY2, 2 GPST, 2 Specialty Trainees (ST1-2)**

Midwives

- **155 midwives**

352.19

Social Enterprises

I am writing to request information under the Freedom of Information Act 2000 and would be very grateful for your help.

Please provide the following information about any Social Enterprises which are currently contracted (either as the main contractor or as a sub-contractor) to provide Healthcare services on behalf of your NHS Trust(s):

- Name of organisation
- Main contact (if known)

To assist you, social enterprises are organisations that have a core social mission. They can be identified by certain legal structures such as:

- Community Interest Company
- Company limited by Guarantee
- Community Benefit Society
- Industrial and Provident Society
- Cooperatives
- Any charitable structures

Answer: The Trust does not have any social enterprises.

353.19

Sepsis policies 2012 on Paediatric unit

Dear Sirs

Further to your response to our Freedom of Information Request dated 28 June 2019, please could you provide us with any sepsis policies in place on 8 and 9 March 2012 at the Trust's paediatric unit.

Answer: The Trust did not have a specific Paediatric sepsis guideline at that time. The policies that were provided as part of the previous Foi (168.19) would cover a suspected sepsis in a child

354.19

Ursodeoxycholic Acid 250mg Capsules

Dear Sir/Madam,

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(s) dispensed **Ursodeoxycholic Acid 250mg capsules** between the following periods:

1. From September 1, 2017 till August 31, 2018
2. From September 1, 2018 till August 31, 2019

Answer: Yes

Information request – 2

If the answer is 'yes' to request 1, could you please send me details in below requested format:

	From September 1, 2017 till August 31, 2018	From September 1, 2018 till August 31, 2019
No. of Ursodeoxycholic Acid 250mg capsules dispensed by pharmacy	2,518	2,458

355.19

Complicated skin and soft tissue infections (cSSTI)

Dear Sir/Madam

How many patients have you treated for complicated skin and soft tissue infections (cSSTI) in the last 12 months with the following:

Ceftaroline (Zinforo)
Flucloxacillin
Meropenem (Meronem)
Teicoplanin (Targocid)
Tigecycline
Vancomycin

How many patients have you treated for community acquired pneumonia in the last 12 months with the following:

Ceftaroline (Zinforo)

Ceftriaxone

Ceftobiprole (Zevtera)

Co-Amoxiclav

Isavuconazole (Cresemba)

Meropenem (Meronem)

How many patients have you treated mucormycosis with the following in the last 12 months

Amphotericin B/amphotericin liposomal (AmBisome)

Isavuconazole (Cresemba)

Posaconazole (Noxafil)

How many patients with Gram negative infections, have you treated in the last 12 months with:

Amoxicillin/clavulanate

Piperacillin/tazobactam

Ceftazidime/avibactam

Ceftolozane/tazobactam

Carbapenems (e.g. Ertapenem, Imipenem, Meropenem etc)

Aminoglycosides (e.g. Gentamicin, Amikacin, Tobramycin)

Cephalosporins (e.g. Cefotaxime, Ceftazidime, Ceftriaxone)

Quinolones (e.g. Ciprofloxacin, Levofloxacin, Ofloxacin)

Answer: We are unable to provide figures for this due to the way our clinical coding system works.

356.19

Hip and knee joint replacements

Please provide a list of (a) hip and (b) knee replacements recorded under the consultant-led referral-to-treatment category Trauma & Orthopaedics that were delivered in the following timeframes from referral to treatment for Walsall Healthcare NHS Trust by month from April 2018 to March 2019.

* 18 weeks or less (i.e. greater than 0 weeks and less than or equal to 18 weeks)

* Between 18 and 26 weeks (i.e. greater than 18 weeks and less than or equal to 26 weeks)

* Between 26 and 52 weeks (i.e. greater than 26 weeks and less than or equal to 52 weeks)

* More than 52 weeks (i.e. greater than 52 weeks)

* Total

Knees

Answer:

Wait Group	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Grand Total
#00-18 wks	6	13	13	13	15	11	20	20	9	3	20	17	160
>18-26 wks	3	3	3	4	6	3	2	1		1	6	13	45
>26-52 wks	2	5	6	4	3	1		1	1			2	25
> 52 wks													
Grand Total	11	21	22	21	24	15	22	22	10	4	26	32	230

W421 Primary total prosthetic replacement of knee joint NEC

W401 Primary total prosthetic replacement of knee joint using cement

W42 Other total prosthetic replacement of knee joint

W40 Total prosthetic replacement of knee joint using cement

Hips

Wait Group	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Grand Total
#00-18 wks	8	12	9	15	15	14	11	16	12	11	11	13	147
>18-26 wks	3	2	1	1	1	1	2	2	1		3	11	28
>26-52 wks	6	4	5	4	3		2				2	2	28
> 52 wks													
Grand Total	17	18	15	20	19	15	15	18	13	11	16	26	203

W391	Primary total prosthetic replacement of hip joint NEC
W37	Total prosthetic replacement of hip joint using cement
W373	Revision of total prosthetic replacement of hip joint using cement
W38	Total prosthetic replacement of hip joint not using cement
W39	Other total prosthetic replacement of hip joint
W381	Primary total prosthetic replacement of hip joint not using cement
W371	Primary total prosthetic replacement of hip joint using cement
W388	Other specified total prosthetic replacement of hip joint not using cement

357.19

Bank & Agency spend

1. Please could you confirm your current bank spend (FY 18/19), broken down by the following staff groups:
 - a. Nursing staff **£7118k**
 - b. Medical locums (Doctors) **£7850k**
 - c. AHP/HSS **£3k**
 - d. Other clinical **£218k**
 - e. Non-clinical **£1221k**

2. Please confirm your current bank fill rate (FY 18/19), broken down by the following staff groups:
 - a. Nursing staff **69.49%**
 - b. Medical locums (Doctors) **67.50%**
 - c. AHP/HSS
 - d. Other clinical
 - e. Non-clinical

Answer: Information for 2c, d, e is not recorded.

3. Please could you confirm your current agency spend (FY 18/19), broken down by the following staff groups:
 - a. Nursing staff **£4462k**
 - b. Medical locums (Doctors) **£2998k**
 - c. AHP/HSS **£765k**
 - d. Other clinical **£209k**
 - e. Non-clinical **£311k**

4. Please could you confirm your current agency engagement procedure (i.e. MV, PSL etc) and which agencies you are currently working with, broken down by the following staff groups:
- a. Nursing staff
 - b. Medical locums (Doctors)
 - c. AHP/HSS
 - d. Other clinical
 - e. Non-clinical

Answer: Tempre. Direct engagement model.

Interact Medical

Doctors on Call

ProMedical

Medecho Ltd

**Accident & Emergency
Agency Ltd**

**Total Assist Recruitment
Ltd**

ED Staffing

NC Healthcare

ID Medical

Pertemps Medical Limited

National Locums

Pertemps Medical

NISI

LAK Locums Limited

5. Do you have DE supplier, if so who, broken down by staff group? When is the expiry date for this contract?

Answer: Liaison, 31/01/2020

6. Do you have an MV supplier, if so who, broken down by staff group? When is the expiry date for this contract?

Answer: No

7. Do you have an external Bank supplier, if so who, broken down by staff group? When is the expiry date for this contract?

Answer: Liaison, 31/01/2020, Medics & AHP

8. Please could you confirm what your agency spend is for permanent staff in the past 24 months, broken down by the following staff groups. How much of this is international recruitment?
- a. Nursing staff
 - b. Medical locums (Doctors)
 - c. AHP/HSS
 - d. Other clinical
 - e. Non-clinical

Answer: The Trust does not use agencies for permanent staff

9. How many permanent vacancies do you have as per the below table. Do you have a current supplier for these roles?

	A&E	Surgery	Medicine	Paediatrics	T&O	Radiology	Cardiology	General Practice	Anaesthetics
FY1									
FY2									
SP 1&2									
SP 3&4									
Speciality Doctor									
Associate Specialist									
Consultant									

Answer: This information is not recorded

358.19
Colorectal Cancer

Dear Sir/Madam,

I am contacting you regarding a research study at the University of Southampton, looking at nutritional management of people with colorectal cancer across the UK. This work follows on from CREW, a research study that looked at recovery of health and wellbeing following treatment of colorectal cancer. More information about CREW can be found [here](#).

As part of the research, we would like to request the following information from your organisation to find out more about the current structure and commissioning of dietetic services in colorectal cancer care in NHS Trusts in the UK. Please note that the information request includes a table that may not be formatted correctly on receipt - as such, the full request is also attached as a Word document for your information.

Answer:

Freedom of information request questions:

Name of organisation (NHS Trust): Walsall Healthcare NHS Trust

Please list the acute hospital site/s within the Trust: Walsall Manor Hospital

PLEASE ANSWER THE FOLLOWING QUESTIONS FOR EACH ACUTE HOSPITAL SITE LISTED ABOVE

HOSPITAL

HOSPITAL AND SERVICES

1. The hospital would be described as a (please delete as appropriate):

Answer: District general (*defined as a major provider of secondary care in the local area*)

2. Total number of inpatient beds at this hospital:

Answer: 482

3. Does the hospital provide colorectal cancer services (please delete as appropriate):

Answer: Yes

4. Is the hospital a specialist colorectal cancer care centre (please delete as appropriate):

Answer: No

DIETETIC SERVICE

5. How many dietitians are employed in the hospital (please answer in FTE units):

Answer: 12.2

6. How many dietitians are commissioned to provide dietetic services in each cancer type (please answer in FTE units. Where no time is commissioned, please enter 0):

Answer:

	Colorectal cancer care	Breast cancer care	Lung cancer care	Pancreato-hepato-biliary cancer care	Other

Dedicated, tumour-specific, post*	0	0	0	0		<i>* This does not include specialist cancer posts that cover multiple cancer types. **E.g. a cancer care dietitian that</i>
Specialist general cancer care dietitian**	0	0	0	0	1.1	

covers multiple cancer types – time is not split by cancer type

7. a. Is there any band 5, general dietetic cover for colorectal cancer care (please delete as appropriate):

Answer: No

b. If yes, how many dietitians are commissioned (please answer in FTE units):

Answer: N/A

8. If there is dietetic time commissioned for colorectal cancer care at the hospital, does this include outpatient or community follow up after discharge? (please delete as appropriate)

Answer: N/A- no dietetic time commissioned for colorectal cancer care

9. If dietetic time is commissioned for colorectal cancer care, where does the funding come from?

Answer: N/A

359.19

Ransomware in UK Hospitals

Dear Walsall Healthcare NHS Trust,

1. In the last 5 years, how many times has your trust/hospital suffered from a ransomware attack? Please provide specific dates (months/years) if possible.

Answer: No

2. How much downtime did this cause (in hours)?

Answer: None

3. Did you pay the ransom? If so, how much was the ransom?

Answer:N/A

4. What was the total cost of the incident to your hospital/trust?

Answer: N/A

360.19

Security/RPI Teams

I write under the terms of the Freedom of Information Act 2000 to request the following information. Could you please provide the following information relating to your Trust:

- Do you have an internal or external RPI/Security team

Answer: External

- Do these staff wear stab vests?

Answer: No

- Do they use/wear body worn cameras/video?

Answer: Being trialled

- If internal employees what pay band are the roles?

Answer: External only

361.19

Vascular Access Devices

Dear Sir or Madam

Please could you kindly advise of the following information in relation to vascular access devices that you purchase for the administration of chemotherapeutic agents.

Access Ports

Supplier(s)

Brand(s)

Volumes per annum

Answer: Not used by the trust

PICC Lines (Peripherally Inserted Central Catheters)

Supplier(s)

Brand(s)

Volumes per annum

Answer:

Bard through e-series catalogue

Single Lumen Power PICC

35 singles.

**Bard through NHSSC
Powerpicc Solo
32 packets of 3.**

Access Port Needles

Supplier(s)
Brand(s)
Volumes per annum

Answer: Not used by the trust

362.19

Contract Data relating to Intraocular Lenses and Phaco Machines

Dear FOI Team,

Request for Information under Freedom of Information Act -

Contract Data relating to Intraocular Lenses and Phaco Machines

I would be most grateful if you would provide me, under the Freedom of Information Act, details in respect of any current contracts which relate to Ophthalmology services, specifically Intraocular lenses and Phaco machines.

The details we require are:

- Indication of how Intraocular lenses and Phaco machines are procured
- Details of current contracts for Intraocular lenses and Phaco machines
- Volume of cataract procedures and annual spend
- Future procurement methodologies.

I require this information for WALSALL MANOR HOSPITAL and **I have attached a Reply Form** which I would be grateful if you could complete to provide this data.

Answer: Please see attached. Available upon request.

363.19
Windows 7

To whom it may concern,

I am contacting you to inquire about the use of the Windows 7 operating system within NHS Trusts due to Microsoft's planned end of support for the OS.

I have a couple of questions that I would appreciate a response to:

1. How many computers within Walsall Healthcare NHS Trust are currently running the Windows 7 operating system?
 - PC's currently running Windows 7

Answer: 1283

1. Will all of these computers be updated with a newer operating system before Microsoft ends support of Windows 7 in January 2020?

Answer: No

364.19
Boxing related injuries

Dear Freedom of Information officer,

I'm one of the producers working on a documentary for ITV about white collar boxing and would like the request the following information since 2016;

- * What is the number of white-collar boxing related head injuries?
- * What is the number of boxing related head injuries?
- * What Is the number of boxing related trauma injuries?

I will be happy to receive them in the easiest way you have collated them ie by month, quarter or over a 12-month period.

Answer: We do not record to this level of detail. Would be classed under "Sports injuries"

365.19

MCS+ 9000 Mobile Platelet Collection System and/or MCS+ 8150 Multicomponent Collection System both from a company called Haemonetics

I would like to make a request under the freedom of information act.

1. Please can you tell me how many of the following two devices - **MCS+ 9000 Mobile Platelet Collection System** and/or **MCS+ 8150 Multicomponent Collection System** both from a company called **Haemonetics** - the trust has used over the last 10 years and how many of these devices are currently in operation.

Answer: We have never used a platelet collection system

2. Please provide a figure for each device and each year over the last 10 years. If possible, please also state how many patients have had this device used on them.

Answer: N/A

366.19

Hysteroscopy procedures

Dear Sir/Madam

Please could you provide the following information:

1. Please could you confirm the number of hysteroscopy procedures that were completed by the gynaecology department(s) in 2018?

Answer: In the calendar year 2018, the gynaecology department completed 288 hysteroscopy procedures.

2. Please could you confirm the cost of sterilising the hysteroscope after each patient use?

Answer: £3.78

3. Please could you confirm the total spend of sterilising hysteroscopes in 2018? We believe this calculation should be the answer of question 1 multiplied by the answer of question 2.

Answer: £1,088.64

367.19

Trust Level Software purchasing

To whomsoever this concerns:

I am interested in the purchases made recently by the trust in terms of software solutions.

For your trust, could you give me the following details for each hospital in your trust:

1. What is the pan-hospital electronic health record software?

Answer: Lorenzo

- 1.1. What are the start and end dates of this?

Answer; End March 2020

- 1.2. What is the cost of acquisition of this system?

Answer: N/A

- 1.3. What is the annual licence cost of this system?

Answer: Free

2. For ACUTE HOSPITALS ONLY, for each of the departments highlighted below, I would like the following information on a hospital level:

- 2.1. What software solutions are implemented in the department?

- 2.2. What are the start and end dates of this?

- 2.3. What is the cost of acquisition of each of these systems?

- 2.4. What is the annual licence cost of this system?

Departments for which information is sought:

1. *Diagnostic imaging – ultrasounds, CT scans, MRI scans / Radiology*

2. *Gynaecology*

3. *Maternity*

4. *Neonatal units*

5. *Emergency (if present)*

6. *Cardiology*

7. *Neurology*

8. *Oncology*

9. *Pharmacy*

10. *Radiotherapy*

Answer:

Department	Software Solution	Contract		Acquisition Cost	Annual Licence Cost Exc VAT
		Start Date	End date		
Diagnostic imaging	GE PACS	01/07/2019	30/06/2020	N/A	£90,830
Gynaecology	Badgernet	14/01/2019	15/01/2020	N/A	£25,762
Maternity	Badgernet	14/01/2019	15/01/2020	N/A	£25,762
Neonatal units	Badgernet	14/01/2019	15/01/2020	N/A	£25,762
Emergency	Fusion	01/04/2019	31/03/2020	N/A	£60,000
Cardiology	GE PACS	01/07/2019	30/06/2020	N/A	£90,830
Neurology	Nspire			N/A	Out of contract
Oncology	chemocare	01/03/2019	28/02/2020		£17,560
Pharmacy	Ascribe	01/04/2018	31/03/2020	N/A	£27,782.66
Radiotherapy	CRIS	19/05/2019	18/05/2020	N/A	£91,220

3. For MENTAL HEALTH HOSPITALS ONLY, could you please tell me whether you have a software to integrate inpatient care with community care?
- 3.1. If yes, what is the software?
- 3.2. What are the start and end dates of this?
- 3.3. What is the cost of acquisition of each of these systems?
- 3.4. What is the annual licence cost of this system?

Answer: N/A

4. What other software solutions / apps has the trust bought / subscribed to recently?
- 4.1. What is the cost of acquisition of each of these?

Answer: The Trust can't answer 4.1 as this requires us to fully understand the commissioning intentions (which we don't record).

- 4.2. What was the rationale behind buying this?

Answer: N/A

368.19

Staff compensation payments || Walsall Healthcare NHS Trust

Dear Sir / Madam,

I hope all is well.

I am writing to request information under Freedom of Information laws

May you please provide the following:

- 1) The total amount of compensation payments paid out to NHS staff

- a. May you please provide the figures per year within the past three financial years (2019/18, 2018/17, and 2017/2016)
- b. i.e in 2018/17, the Trust paid out 10 compensation claims to staff

Answer:

In 2016/17 the Trust paid out 9 compensation claims to Staff

In 2017/18 the Trust paid out 5 compensation claims to Staff

In 2018/19 the Trust paid out 8 compensation claims to Staff

2) The total cost of compensation payments paid out to NHS staff

- a. May you please provide the figures per year within the past three financial years (2019/18, 2018/17, and 2017/2016)
- b. i.e in 2018/17, the Trust paid out 10 compensation claims amounting to £35,000

Answer:

In 2016/17 the Trust paid out 9 compensation claims to Staff amounting to £119,569.20

In 2017/18 the Trust paid out 5 compensation claims to Staff amounting to £188,565.00

In 2018/19 the Trust paid out 8 compensation claims to Staff amounting to £123,265.58

369.19

alcohol-related hospital attendances and admissions

Good morning, under the Freedom of Information Act, can I please request the following;

1. Within your Trust, how many alcohol-related A&E attendances (where alcohol is the primary attendance reason) per site between;

a) 1st November 2013 and 2nd January 2014	92
b) 1st November 2018 and 2nd January 2019	153

2. Within your Trust, how many alcohol-related A&E admissions (where alcohol is the primary admittance reason) per site between;

a) 1st November 2013 and 2nd January 2014	21
b) 1st November 2018 and 2nd January 2019	61

370.19

Payments we have made that are over £25,000

Dear Sir/Madam,

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 for the month of August 2019 and September 2019. 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 the August 2019 and September file please and thank you?

Answer; Angust & September are now available

371.19

Interpreting & Translation

Who is the senior responsible person for interpreting and translation services?

Answer: Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Karen Dunderdale, Director of Nursing, email address; karen.dunderdale@walsallhealthcare.nhs.uk and telephone number is 01922 721172.

Is Interpreting services contracted? Which supplier and when is the renew date ?

Answer: WORD 360 – Contract renewal August 2022

Do you have an in-house interpreting model or outsourced or use a combination of both?

Answer: Both

If the service is contracted, when did the contract commence and was the contract advertised?

Answer: Service is Contracted through a Framework agreement. Commenced 01.04.2019

Total face to face interpreting and telephone interpreting spend in 2018?

Answer: £173,860

Hourly cost of face to face interpreting services?

Answer: Exception 43 is applied due to a confidentiality clause in the contract.

Cost per minute of telephone interpreting services?

Answer: Exception 43 is applied due to a confidentiality clause in the contract

372.19

Telephony/Communications

I would like to request the following information for research purposes please. This will enable our company – IP Integration to potentially approach you with a maintenance contract for your telephony support when the time is right, rather than randomly!

Information with regards to the organisation's telephone system maintenance contract (VOIP or PBX, other) for hardware and software maintenance and support.

- Which manufacturer (PBX or VOIP) are you using as your core telephone system? e.g. Avaya, BT, Cisco, Mitel, Skype for Business?

Answer: SpliceCom

- Approximately how many extensions does the system support across your organisation?

Answer: 3000

- Who is the incumbent/support partner for the maintenance of your VOIP/PBX?

Answer: Switchshop Ltd

- How many of those extensions are contact centre/customer service agents?

Answer: 35

- When does your PBX/VOIP support contract expire?

Answer: January 2022

Most of the organisations that I've been in touch with so far have been able to answer these questions, but if there are any issues or you would like clarification on anything, please let me know.

Please note: Currently out of our scope are 2000 extensions on a Nortel telephony system managed by our PFI supplier

373.19

Suspected Renal Colic OOH

Dear Walsall Healthcare NHS Trust,

I'm hoping to complete an audit looking into the management of suspected renal colic nationally, comparing to the national guidelines. Would you be able to forward my questionnaire (attached) onto the Urology department on my behalf?

Answer: Please see attached questionnaire. Available upon request.

374.19

Pregnancy and homelessness

I'm hoping to acquire more information about pregnant women attending obstetrics/maternity/antenatal care appointments within your Trust who declared themselves homeless – whether rough sleeping, in temporary accommodation, with no fixed address or sofa surfing.

I'd like full disclosure of data as outlined below and would appreciate your advice and direction, as specified under the Freedom of Information Act, if you feel there's a way of better refining my request to allow you to retrieve the information I'm interested in.

1. How many pregnant women presenting for initial obstetrics/maternity/antenatal care appointments within your Trust declared themselves as homeless or with no fixed address between 2015 and 2019? Please breakdown by year.

Answer: Please see attached. Available upon request.

2. How many of those pregnant women still declared themselves as homeless or had no fixed address upon being admitted to a labour ward to give birth?

Answer: Please note, we do not record a patients address upon admission to a labour ward. This is only recorded at the initial appointment. Therefore, we are unable to answer this question .

3. For 1 and 2, if the information is available, please breakdown the numbers of women to specify how many were rough sleepers, how many were in temporary accommodation (please give numbers for hostels, B&Bs, refuges or other), or with no fixed address.

Answer: Please see attached. Available upon request.

4. Please also provide figures for the outcomes of pregnancies for homeless women, broken down by the number that ended with a live birth, the number that underwent terminations, the number that had miscarriages and the number that were stillborn.

Answer: Please see attached. There were no Terminations identified during the time period requested. Available upon request.

5. Please indicate age groups for the number of pregnant women who declared themselves homeless – whether under 20, 20-30, 30-40 or 40+.

Answer: Please see attached. Available upon request.

6. How many of those who were pregnant had their child removed from their care at birth?

Answer: Please see attached. Available upon request.

375.19

Peripheral IV Cannula & Midlines

Dear Sir/Madam,

1. Information requested in respect of peripheral IV cannula

Please could you kindly advise which departments and healthcare professionals within your Trust use ultrasound to support the insertion of peripheral IV cannula?

Answer: The procedure is rare but when completed it is done by Radiologists in Imaging

2. Information requested in respect of Midlines

Please could you also advise if you purchase midlines and if so:

- What brand(s) of midline do you purchase?

Answer: Catheter midline single lumen seldinger technique 4fr PUR catheter from Vygon Uk.

- What volume do you purchase on an annual basis?

Answer: 3 boxes of 10 (only recently implemented in this Trust)

- Who are the main clinicians responsible within your Trust for the insertion of Midlines?

Answer: Anaesthetists

Please could you also advise if you purchase a midline procedure pack and if so:

Answer: No record found,

- What is the content of the Midline insertion pack that you purchase?
- What volume do you purchase on an annual basis?

376.19

Surgical dyes

Dear freedom of information team,

I am hoping you can assist me with the following queries:-

Question 1:

Please could I kindly request information in respect to the volume (in millilitres) per annum of surgical dyes that you purchase. Please state from the list below which dye the trust uses, and which site uses which dye(s).

- Blue Marker, – **Not stocked**
-
- Patent Blue/Sulfan Blue, **Patent Blue – 310ml (Nov 2018/Nov2019). Theatres**
- Indigo Carmine,- **2250ml (Nov 2018/Nov2019), Endoscopy**
- Methylene Blue (methylthioninium chloride), **Prove Blue (Nov 2018/Nov2019). 2450ml Gynae theatres, theatres, endoscopy, maternity theatres, A&E**
- Indocyanine Green – **Not stocked**
- Toluidine Blue – **Not stocked**

Question 2:

Please could you provide information on which surgical specialties use a surgical dye; and from the list above which dye do they prefer?

Answer: Gynaecology, General Surgery and Urology;

Question 3:

Please could you provide information in respect to how many procedures require a blue dye, per annum?

Answer: This information is not recorded

Question 4:

Please could you provide information in respect to which procedures require a blue dye, the volume used (in millilitres) per procedure, the health episode statistic (HES) code associated with each procedure, per annum, and which site has used the dye(s)?

Answer: This information is not recorded

Question 5:

Please could you provide information in respect to which purchasing route the prefer dye is obtained?

Answer:

Patent Blue/Sulfan Blue, Patent Blue – unlicensed import supplier

Methylene Blue (methylthioninium chloride), Prove Blue – local wholesaler

Indigo Carmine,- NHS distributor

With regards to time frames, could you please supply data for 2017, 2018 and 2019 year to date?

Answer: Nov 2018/Nov2019. No further data as computer system was upgraded in October 2018 therefore cannot obtain data.

377.19

Dietician trouser sizes

Dear Sir/Madam,

Please could you provide me with a spreadsheet/table showing the numbers of trousers that have been distributed to dieticians employed by your Trust in the 2018 calendar year where the waist measurement was 40inches or more.

For each type of trousers please give a breakdown showing the waist size and the number of those waist sized trousers that were distributed.

Answer: There have been no trousers ordered by any dietitian from the trust. The staff wear their own trousers.

378.19
Re Smoking.

Dear Sir / Madam

On behalf of the PAGB (Proprietary Association of Great Britain) NRT group, I wish to make a request under the Freedom of Information Act as follows:

- 1. Please confirm or deny if there are any requirements from your local CCG to ration any treatment or surgery options to people based on their smoking status (ie not limited to smoking cessation treatments); if confirm, please provide details.***

Answer: The trust is not aware of any requirements

Public interest arguments

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

- Further the understanding of and participation in the public debate of issues of the day, and will allow a more informed debate of issues under consideration by public bodies
- Promote accountability and transparency by public authorities for decisions taken by them
- Allow individuals to understand decisions made by public authorities affecting their lives
- Bring to light information on any restrictions by CCGs on access to treatments based on a patient's smoking status

Further to Section 16 of the Act (duty to provide advice and assistance), if you have any queries relating to these requests or need clarification on any issue, I would be grateful if you could contact me.

I observe the Ministry of Justice's guidance on fees which states, 'if a request is particularly wide-ranging, and therefore likely to be expensive to answer, the authority should consider discussing this with the applicant and see if the question could be refined to a more manageable level, or resubmitted in part, to bring it below the appropriate limit.' Please contact me if this will be necessary to bring any of these separate requests under the fees limit.

379.19

Corporate Affairs/Governance department

Dear All

Could I please ask for your help with the following?

1. Do you have a corporate affairs department? If so – could you please send a structure chart or, if not, details of what disciplines are included within that department e.g Legal Services/Communications etc

Answer: The Trust does not have a corporate affairs department.

2. Do you have a corporate governance department? If so – could you please send a structure chart or, if not, details of what disciplines are included within that department e.g Legal Services/Communications etc

Answer: The structure of the Trust's Governance Department is currently under review. Included in the department are the following disciplines:

Governance Advisors

Legal Services

Health & Safety

Patient Safety

Risk & Compliance

Clinical Audit & Effectiveness

Digital & Business Assurance

Information Governance

380.19

Management of dementia

Dear Sir/Madam,

Under the Freedom of Information Act 2000, I am requesting the following information on patient access to the following NICE-recommended non-pharmacological therapy for the management of dementia.

1. Are patients with dementia able to access any of the following therapies (i.e. from dementia services, memory services, memory clinics or mental health services within the Trust)?
 - a. Group cognitive stimulation therapy
 - b. Group reminiscence therapy
 - c. Cognitive rehabilitation or occupation therapy

- d. Multi-sensory stimulation
- e. Cognitive training

Answer:

The following link is the relevant guideline:

<https://www.nice.org.uk/guidance/ng97/chapter/Recommendations#involving-people-living-with-dementia-in-decisions-about-their-care>

A person with dementia would not be able to access the services mentioned in your question from Walsall Healthcare NHS Trust.

Walsall Healthcare NHS Trust is not commissioned to provide the services as a routine intervention for patients. Where people with dementia are admitted to Walsall Manor Hospital, it would not be for the primary reason of assessment or treatment/management of dementia. It would in most cases be for the physical health complaint that requires them to be admitted to an acute hospital.

However there are services within this trust commissioned by Walsall Clinical Commissioning Group (CCG), who are able to link people with dementia to the appropriate services, when they are discharged from the hospital.

The trust has an older people's mental health liaison team (OPMHLT) who would be able to signpost to appropriate services and also make referrals to them.

381.19

Chest x-rays & Patient population

Dear Freedom of Information Team,

This is a request for information under the Freedom of Information Act 2000.

1. Please can you please provide the number of community ordered chest X-rays (i.e. those requested by GPs) that were performed in your radiology departments each month for the period from January 2008 to September 2019. I would be grateful if you could provide a monthly breakdown.

Answer: Please see attached. Available upon request.

2. Also, are you able to provide data on the size of the secondary care (excluding tertiary services) patient population served by your Trust each year from 2008 to 2019?

Answer: This Information is not recorded.

382.19

Computer programs used by your trust by clinical staff

Dear Freedom of Information team,

I wish to make the following request, with which I hope you will be able to assist:

Freedom of information request:

I wish to request a list of all the computer programs used by your trust by clinical staff. If this could be provided alongside the function the software is used for, and the annual cost.

Answer:

Program	Provider	Function	Support Contract Cost excl VAT
Anyconnect VPN solution - Secure IT	IT Health	Remote VPN access application	£11,009.28
Badgernet	Clevermed Limited	Maternity System	£25,762.00
ChemoCare	CIS	chemotherapy prescribing	
eMEd	Mediqal	Specialist Renal Software	£11,750.00
Medicode	3M Health Care Ltd	Core Encoder Suite	£20,250.00
Medicus	Mela	HDU	£5,500.00
OPAS	Wynnlodge Limited OPAS	Orthotics department including registering patients, all scheduling/ clinical notes and ordering of equipment. Booking of goods in/out	£1,280.00
Total Mobile	Total Mobile	Mobile working solution	£63,393.11
Folding Space	Folding Space	Document scanner viewer and storage	£85,748.00
Winscribe	Nuance	Digital Dictation	£503,208.00

3M Coding Tracker	3M Healthcare Ltd	Clinical coding and reimbursement system - part of Health Records tracking system.	£17,527.50
3M Library Conversion Station	3M United Kingdom PLC	3M Library Conversion Station	£2,290.00
3M Library System	3M United Kingdom PLC	3M selfcheck system manager	£2,290.00
Ascribe	EMIS health	E-prescriptions for acute trusts. Ascribe is principally focused on hospital pharmacy, A&E, mental health and patient administration (PAS) / electronic patient record systems (EPR).	£27,782.66
Blood Tracking Management System (software name is Blood Track)	Haemonetics	Remote inventory and bedside transfusion management solution that acts as an extension of your blood bank information system.	£7,593.36
Bookwise (acute)	BookWise Solutions Limited	BookWise Oncology is a scheduling system that has been developed as an application that allows you to easily manage your Chemotherapy and Haematology Day Unit at a click of a button. Appointments are booked taking into account the nursing and chair time required.	£1,010.00
CareCentric Gateway / GRAPHNET	Graphnet	The CareCentric shared record viewer to a complete cross-organisational assessment and care planning solution. CareCentric provides real-time access to a single, secure electronic health record, allowing clinicians and care professionals to work safely and effectively across disciplines	£41,356.93
Carestream	Carestream Health, Inc	Clinic imaging solution e.g. Radiography system	£18,655.00
Chemotherapy ePrescribing system	Computacenter	Chemotherapy ePrescribing system	£17,560.62
Chlamydia Screening Database	Quality Education Solutions Ltd (Qes Ltd)	QES Ltd's database solution for chlamydia	£3,562.00

		screening	
Codonics Virtua PACS - Medical Disk Publisher	HSL Hospital Services Limited	Comprehensive Maintenance Contract for PACS/ Medical disk publisher Codonics Virtua:	£2,131.00
Cohort	Cohort Software Ltd	Occupational Health system	£6,713.00
CRIS	HSS (Healthcare Systems Software)	Radiology Information System. HSS also works closely with all major UK PACS suppliers, to provide value-added integration between RIS and PACS. CRIS is fully integrated to key hospital information systems such as PAS, Order Communications and can be linked more widely using built-in DICOM, HL7 and XML interface engines.	£91,220.00
Docman GP	Docman	GP System of Choice funded by NHS England. Electronic documents management software	£54,225.00
Electronic Staff Record (ESR)	IBM	National system for recorded staff data	N/A
Endosoft	Endosoft Limited	Endoscopy system	£10,000.00
Allocate	Allocate Software	E-rostering solution for Doctors.	£11,550.00
Fusion incl Rhapsody & Concerto, GP RBAC	Orion Systems New Zealand Ltd	Fusion Electronic Patient Record Portal (Fusion is the Trust name for Orions product Concerto) . Orion Health Rhapsody Integration Engine achieves rapid interoperability between healthcare systems, enabling connected solutions. Rhapsody is a product that enables seamless data integration. It is a proven, high performance integration engine for robust, reliable exchange and acquisition of healthcare data. GP RBAC for GP roles and access requirements.	£58,928.00

Horizon Enterprise Visibility (MPV)	System C (was McKesson)	Enterprise McKesson Performance Visibility™ system aggregates real-time information from various systems - such as clinical, ADT, environmental services and transport - and displays it on electronic whiteboards throughout hospitals. Caregivers can quickly identify patients with critical lab results or orders pending, and can view patient location, status and room availability. Radio frequency and ultrasound identification technology can be linked for proactive patient monitoring and bed management	£35,000.00
ICNet infection control managed service	Baxter Healthcare Corporation	Management, Surveillance & Reporting Software, Antimicrobial Stewardship & Infection Prevention	£28,552.00
Immunology / Pathology System - lab to lab messaging support, maintenance	Calderdale & Huddersfield NHS Foundation Trust	Immunology / Pathology System - lab to lab messaging support, maintenance	£12,500.00
INFOFlex	CIMS	Physiotherapy information management system.	£22,638.00
Lilie	IDOX Health Limited	Sexual health	£25,163.00

		management system	
Lorenzo	NHS Digital - DXC	PAS for WHT	Nationally Funded
MIG Messaging	Healthcare Gateway Limited	MIG messaging incl. electronic clinical correspondence messaging between systems for up to 200,000 documents	£19,120.00
Mobius/ NEXUSTM Clinical Information Systems	Newgate Technology	HSDU system	£9,118.62
NHAIS OrganisationLinks (feeds into Graphnet)	HEALTH & SOCIAL CARE INFORMATION CENTRE (trading as NHS Digital)	Annual renewal of NHAIS Organisation links to populate EDS's with GP patient data for A&E & Pharmacy clinical staff to access correct information. .	£4,270.00
NPEX Connector. Immunology / Pathology System	CliniSys Group Limited	Quote: 14644. Pathology system. CliniSys to provide software and implementation services required to supply the WinPath Electronic Referral management module. Connected to an NPex Interface across all workgroups at Walsall Healthcare NHS Trust.	£29,300.00
Nuance Digital Dictation	Nuance	Medical Transcription Speech Recognition	£120,000.00
Ormis	CSC	CALL OFF CONTRACT relating to the provision of Theatres Clinical Information System services	£246,720.00
Dolphin	Dolphin Imaging	Orthodonic system	£1,461.00

<p>Orthotic Patient Administration System (OPAS)</p>	<p>Wynnlodge Limited OPAS</p>	<p>Surgical Appliances System. Can be used for: Make manual appointments, or get OPAS to automatically search for the next available appointment when the patients order has been received. Print a variety of appointment and collection letters instantly or in batches. Monitor clinic performance, attendance and RTT status. History deals with patient appliance orders. The progress of orders can be tracked as key dates are held against each order i.e. expected supply date, date appliance received, date appliance issued to the patient. Highlight those orders that have not been received by the expected supply date. Log supplier invoice details and electronically update Oracle Financials. A variety of reports are available to analyse orders e.g. by item, purchaser, directorate, consultant to paper or spreadsheet. The day-to-day use of OPAS revolves around the Patients database. Add new orders, notes, appointment, care episodes and waiting list, and view existing information against specific patients. Utilise patient information to produce reports and letters to a particular group of patients i.e. all those that live in a certain area or with the same GP.</p>	<p>£1,280.00</p>
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		<p>Know the quantities and value of stock held. OPAS will prompt you to re-order stock when minimum stock levels have been reached. Issues of stock are handled automatically within the History section.</p>	
PACS	GE Medical Systems Ltd	PACS & Cardiology PACS	£108,996.00
Practice Navigator	Sivantos Limited (Siemens)	<p>Patient management system for Audiology. Can be used for patient data, audiograms, clinic appointments, hearing aid info. Can be used for managing stock.</p>	£10,976.00
Prodacapo (Service Line Reporting)	Prodacapo UK Ltd	Patient Level Costing and Service Line Reporting systems	£3,137.00
PTS (Prescription Tracking System)	TMS Insight Data Capture	Prescription Tracking System	£1,275.00

RFID	3M United Kingdom plc	3M™ RFID Tracking Pad, a component of the 3M™ RFID File Tracking System, is a small device about the size of a mouse pad. Connected to a computer running the 3M RFID Tracking Pad monitor software, the Tracking Pad can be used to easily program/ reprogram tags as well as to check in and check out files.	£17,432.00
Rosterpro	Kronos UK	Workforce planning software associated with payroll preparation, resource deployment, use of agency and bank staff, absenteeism and aids staff retention.	£35,232.00
Somerset Cancer Register	Taunton & Somerset NHS Foundation Trust	The Somerset Health Informatics Service has developed an electronic register to help cancer patients across the country receive treatment more quickly. The register allows clinicians to access up-to-date patient information when they need it, anywhere within a hospital setting. The register helps clinicians in the diagnosis and management of patients. The product allows hospitals to track a patient through their whole cancer journey, from GP referral through to treatments and follow-up, with real-time data capture. It's an electronic patient record for cancer patients. The benefits are that patient care can be tracked and treatment is very prompt as a result of improved communication and reduced duplication.	£55,020.00
Sunquest Integrated Clinical Environment (ICE)	Sunquest Information Systems (Europe), Ltd	Order Comms: electronic ordering and results for diagnostic testing	£43,946.00

Teletracking	Teletracking Technologies Inc.	Automated portering system to improve efficiency	£12,799.00
Vitalpac	System C Healthcare Ltd	Patient observations system used on mobile devices (iPad, iPod)	£25,790.00
Winpath (BTS/BT) (CliniSys)	CliniSys Group Limited	Laboratory Information Management System. WinPath is a comprehensive, integrated, multi-disciplinary LIMS that supports incremental and adaptive approaches to service development whilst ensuring alignment and compliance to relevant national and international IT and interoperability standards.	£138,891.98
ESR to Rosterpro Interface	ESR	RBK smart outbound interface from ESR to Rosterpro	£4,110.00
CliniSys ICE	CliniSys Group Limited	Electronic Requesting and reporting	£37,475.00

383.19

Collaborative Bank

Dear Walsall Healthcare NHS Trust,

1. Are you part of a collaborative bank?

Answer; No

2. If not are you considering this in your STP?

Answer: Yes

3. If yes who is the current provider for the collaborative bank?

Answer; N/A

4. What are the fees for your collaborative bank?

Answer: N/A

5. What savings have you made from the collaborative bank on your agency spend?

Answer: N/A

6. What % fill do you get from your collaborative bank?

Answer: N/A

384.19

Master Vendor

Dear Walsall Healthcare NHS Trust,

1. Do you have a master vendor arrangement in place?

Answer; No

2. If yes who is your current Master Vendor Provider?
3. What fill rates are achieved with your Master Vendor Provider?
4. Are you charged a fee for the service and if so what is the cost?
5. What is the expiry date for your current contract?

385.19

Pain Relief for Wrist Fracture Manipulation

Freedom of Information - Wrist Fracture Information Request Table

Question	Answer	
1. List the names of hospitals with A&E departments or Minor Injury Units within your Trust that deal with wrist fractures that require manipulation?	A&E	Minor Injury Unit
	Manor Hospital	N/A
	Moat Road, Walsall	
	West Midlands	
	WS2 9PS	

2. What happens to patients who attend a department/unit that does not offer this service?	N/A	

For each of the A&E or Minor Injury Units listed above, please answer the questions below. Please copy and paste this table as necessary to accommodate the number of A&E and Minor Injury Units listed above.

Name of A&E / Minor Injury Unit:	
Question	Answer
1. Are wrist fractures primarily manipulated by A&E doctors or referred on to a specialty doctor (eg. Orthopaedics)?	A&E doctor.
2. What methods do A&E staff (or receiving specialty doctor) use for pain relief when manipulating wrist fractures? eg. Bier's block, haematoma block, IV sedation etc.	Haematoma block. Sedation.
3. Why was this method chosen?	This is an effective method.
4. After manipulation, is the wrist immobilised in a full cast or back slab?	Backslab.

386.19

Public Health Funerals

This is a Freedom of Information Request by Nikki Mitchell at BBC South, Broadcasting House, Havelock Road, Southampton, SO14 7PU. I would like the information by email please within 20 working days, which is by 26 November 2019.

1. Does your NHS Trust organise, pay for and carry out public health funerals for people who die in the trust's care and who don't have the financial means or family/friends to arrange it?

2. If no, which local council you refer public health funeral deaths to?

3. If yes, please supply the following information (please see the attached spreadsheet I have put together to help you collate the data):

a) How many public health funerals has your NHS Trust carried out each year for these financial years: 2014/15, 2015/16, 2016/17, 2017/18, 2018/2019?

b) Please state, out of the above figures, how many of those people were male and how many of those men had next of kin and how many of those men did not have next of kin?

c) Please state, out of the above figures, how many of those people were female and how many of those women had next of kin and how many of those women did not have next of kin?

d) Please state, out of the above figures, how many of those people were aged under 18, aged 18-59 or aged 60+

e) Please state, out of the above figures, how many of those people were cremated, how many were buried in a grave of their own and how many were buried in a shared or communal grave (if that's applicable).

f) Please state, the net cost to the NHS Trust for all financial years: 2014/15, 2015/16, 2016/17, 2017/18, 2018/2019?

Answer: Please see attached spreadsheet. Available upon request.

387.19

Insourcing

Dear Walsall Healthcare NHS Trust,

1. Do you insource any clinical services and which ones?

Answer: No

2. Do you have a contract with any company and who is that and for which insourcing services?
3. Did you procure this under any current framework and if so which one?
4. How is this charged for by the third party service provider per patient/per tariff
5. Are you currently being charged below, on or above NHS tariff?
6. Do you use substantively employed Trust staff to delivery all or part of the insourced service?
7. The total number of procedures completed by each supplier (named) in the following categories:
 - Endoscopy
 - Ophthalmology
 - ENT
 - Neurology
 - Dermatology
 - All Other
8. The total spend completed by each supplier (named) per service area
9. Please give an annual breakdown per annum of insourcing services per service area:
 - 15/16
 - 16/17
 - 17/18
 - 18/19

388.19

Pharmacy services

To whom it may concern,

I would like information about the provider of pharmacy services to the hospitals in your trust.
Could you please provide the following information, by hospital:

1. Are the pharmacy services in-house or outsourced? (proceed to Section I if in-house and Section II if outsourced). If part of the services are in-house (tendered through the Department of Health / NHS frameworks) and part outsourced (for example for outpatients), please answer both parts.
2. Who are your suppliers for:
 - 2.1. Clozapine (antipsychotic)
 - 2.2. Fluoxetine (antidepressant)
 - 2.3. Lithium carbonate (anticonvulsant)

Section I – in-house pharmacy

1. Did the trust tender through the Department of Health's Commercial Medicines Unit (CMU)?
 - a. If not, tendered through CMU:
 - i. How did the trust / hospital tender?
 - ii. Who applied to fill the tender?
 - iii. What were the tender criteria?

- iv. Why was the chosen supplier awarded the contract?
- v. Is the chosen supplier the trust's de-facto supplier?
- vi. What is the annual cost of the contract?

b. If tendered through CMU:

- i. How many suppliers are engaged with the hospitals to provide pharmaceuticals?
- ii. On average, what discounts does the supplier offer vs. the retail price?

2. Delivery of pharmaceuticals:

- a. How often do you get deliveries from pharmaceutical suppliers?
- b. Is the delivery a fixed amount of each contracted drug or is it based on the hospital's stock of the drug
i.e. more frequently used drugs are delivered in larger quantities and more frequently by the supplier?
- c. Is the stock of each drug monitored manually on an Excel sheet or electronically via a specialised software?
- i. If monitored by specialist software, who is the provider of said software?

3. Current provider:

- a. Has / have the current providers always been the suppliers of pharmaceuticals for the hospital for more than 3 years?
- i. If not, who was the previous supplier?
- ii. Why were the old supplier's contract not renewed?

Section II – Outsourced pharmacy

1. Current provider:

- a. Who is the current provider of your outsourced pharmacy services?
- b. Are they the de-facto provider for all pharmaceutical needs? If not, could you list the other providers?
- c. How did the hospital contract the current provider?
- i. What is the duration of the contract?
- ii. What were the key terms of the contract that the supplier had to meet?
- iii. How many suppliers applied for the contract?
- iv. Has / have the current providers always been the suppliers of pharmaceuticals for the hospital for more than 3 years?
- 1. If not, who was the previous supplier?
- 2. Why were the old supplier's contract not renewed?
- d. On average, what discounts does the supplier offer vs. the retail price?
- e. How often do you get deliveries from pharmaceutical suppliers?
- f. Is the delivery a fixed amount of each contracted drug or is it based on the hospital's stock of the drug
i.e. more frequently used drugs are delivered in larger quantities and more frequently by the supplier?
- g. Is the stock of each drug monitored manually on an Excel sheet or electronically via a specialised software?
- i. If monitored by specialist software, who is the provider of said software?

Answer: The Trust did not tender for a outpatient pharmacy. In house did not tender through CMU either. We do not believe this Foi is applicable to the Trust

389.19
Policies for 2012

Dear Sirs

I write further to our e-mail correspondence below.

In addition to our request for the paediatric sepsis policies relevant on 8 and 9 March 2012, we require the following;

1. All Paediatric Handbooks relevant at the time;
2. Any other Paediatric Policies at the time, including policies relating to paediatric discharge (other than those policies already disclosed to us) and in particular, any policies relating to assessment and discharge of children under 1 year old;
3. Details of paediatric training records for 2012.

Answer: Case withdrawn

390.19
Treated with Drugs

Within your health trust how many patients are currently [within the past 12 months] being treated with the following treatments, regardless of reason.

Amphotericin B/amphotericin liposomal (AmBisome)
Ceftaroline (Zinforo)
Ceftobiprole (Zevtera)
Ceftriaxone
Co-Amoxiclav
Flucloxacillin
Isavuconazole (Cresemba)
Meropenem (Meronem)
Posaconazole (Noxafil)
Teicoplanin (Targocid)
Tigecycline
Vancomycin
Amoxicillin/clauvanate
Piperacillin/tazobactam
Ceftazidime/avibactam
Ceftolozane/tazobactam
Carbapenems (e.g. Ertapenem, Imipenem, Meropenem etc)
Aminoglycosides (e.g. Gentamicin, Amikacin, Tobramycin)
Cephalosporins (e.g. Cefotaxime, Ceftazidime, Ceftriaxone)
Quinolones (e.g. Ciprofloxacin, Levofloxacin, Ofloxacin)

Answer: We have summed up the number of patients on each antibiotic listed below for the last 12 months from clinical desktop. Unfortunately the data is not an accurate representation of all patients who were prescribed these in the Trust as many wards keep them as ward stock and it's difficult to correctly answer the FOI request.

Antibiotics	Number of patients within past 12 months Oct18 - Oct 19
Amphotericin B/amphotericin liposomal (AmBisome)	2
Ceftaroline (Zinforo)	0
Ceftobiprole (Zevtera)	8
Ceftriaxone	243
Co-Amoxiclav	2259*
Flucloxacillin	878
Isavuconazole (Cresemba)	0
Meropenem (Meronem)	705
Posaconazole (Noxafil)	2
Teicoplanin (Targocid)	294
Tigecycline	15
Vancomycin	50
Amoxicillin/clauvanate	1007
Piperacillin/tazobactam	1160*
Ceftazidime/avibactam	6
Ceftolozane/tazobactam	0
Carbapenems (e.g. Ertapenem, Imipenem, Meropenem etc)	825
Aminoglycosides (e.g. Gentamicin, Amikacin, Tobramycin)	32
Cephalosporins (e.g. Cefotaxime, Ceftazidime, Ceftriaxone)	251
Quinolones (e.g.Ciprofloxacin, Levofloxacin, Ofloxacin)	1919

* results showed over 2000 entries and only 1st 2000 entries were displayed on ascribe

391.19

Atypical Parkinsonian Syndrome.

Dear Walsall Healthcare NHS Trust,

In your trust how do you review patients with Atypical Parkinsonian Syndrome in outpatients.

Answer: Some of the questions we either don't have a clinic or our systems do not go to that level of detail.

Dear Walsall Healthcare NHS Trust,

In your trust how do you review patients with Atypical Parkinsonian Syndrome in outpatients.

FREEDOM OF INFORMATION REQUEST QUESTIONNAIRE

In your trust how do you review patients with the following conditions in outpatients.

Please select all settings that apply with approximate numbers of patients seen over a year in each setting and the numbers of consultants seeing these patients in this setting. Please also indicate if there is a member of the therapy team or a nurse who sees the patient in the clinic and which member of the team this is. Please specify the approximate frequency of review for each setting or a range for review and specify if patients have a point of contact between appointments and who that is with (e.g. clinic coordinator).

If these patients are instead seen in another trust please include this in 'other'.

Lastly please tell us if Parkinson's disease nurses will see these patients in your region.

PROGRESSIVE SUPRANUCLEAR PALSY

- ☐ General neurology clinic

Number of patients seen over a year:

Unable to break down data to the progressive supranuclear palsy condition

Number of consultants seeing patients: **2**

Therapists or nurse in clinic (please detail): **No therapies**

Frequency of review: **6 months**

Point of contact between appts: **Nurse led clinic**

- ☐ Geriatrician clinic

Number of patients seen over a year:

Unable to break down data to the progressive supranuclear palsy condition

Number of consultants seeing patients: **1**

Therapists or nurse in clinic (please detail): **No therapist**

Frequency of review: **6 months**

Point of contact between appts: **Nurse /consultant**

- ☐ Movement disorder clinic: **no movement disorder clinics**

Number of patients seen over a year:

Number of consultants seeing patients:

Therapists or nurse in clinic (please detail):

Frequency of review:

Point of contact between appts:

Specialist clinic for PSP, MSA and CBD **unable to break the data down time obtain this information**

Number of patients seen over a year:

Number of consultants seeing patients:

Therapists or nurse in clinic (please detail):

Frequency of review:

Point of contact between appts:

- ☐ Other :

CORTICOBASAL DEGENERATION/ SYNDROME: No specific clinic rare disorder

- ☐ General neurology clinic

Number of patients seen over a year:

Number of consultants seeing patients:

Therapists or nurse in clinic (please detail):

Frequency of review:

Point of contact between appts:

- ☐ Geriatrician clinic

Number of patients seen over a year:

Number of consultants seeing patients:

Therapists or nurse in clinic (please detail):

Frequency of review:

Point of contact between appts:

- ☐ Movement disorder clinic

Number of patients seen over a year:

Number of consultants seeing patients:

Therapists or nurse in clinic (please detail):

Frequency of review:

Point of contact between appts:

- ☐ Specialist clinic for PSP, MSA and CBD

Number of patients seen over a year:

Number of consultants seeing patients:

Therapists or nurse in clinic (please detail):

Frequency of review:

Point of contact between appts:

☐ Other:

MULTIPLE SYSTEM ATROPHY

☐ General neurology clinic

Number of patients seen over a year:

Number of consultants seeing patients:

Therapists or nurse in clinic (please detail):

Frequency of review:

Point of contact between appts:

☐ Geriatrician clinic **patients seen by consultant PD specialist geriatrician**

Number of patients seen over a year: **unable to break the data down time obtain this information**

Number of consultants seeing patients: **1**

Therapists or nurse in clinic (please detail): **yes**

Frequency of review: **6 months**

Point of contact between appts: **Parkinson's nurse specialist**

☐ Movement disorder clinic **no specific clinic**

Number of patients seen over a year: **unable to break the data down time obtain this information**

Number of consultants seeing patients:

Therapists or nurse in clinic (please detail):

Frequency of review:

Point of contact between appts:

☐ Specialist clinic for PSP, MSA and CBD

Number of patients seen over a year:

Number of consultants seeing patients:

Therapists or nurse in clinic (please detail):

Frequency of review:

Point of contact between appts:

☐ Other :

☐ **The patients who are referred as having Parkinsonian features are seen in either the PD Clinic (Short Heath) or Geriatric clinic (701) at the Manor Hospital. Some patients are also seen by the neurologists consultant**

☐ **Most of the patients have Parkinson's disease and some have other Parkinsonian conditions such as Progressive Supranuclear palsy(PSP) ; Multi system Atrophy(MSA) and rarely Cortico basal**

Degeneration (CBD) in addition n to other parkinsonian syndromes. There are either diagnosed in the initial review or in the subsequent follow-ups which are 6 monthly. They get seen by the multidisciplinary team including PDNS; OT/PT and if appropriate the SLT

PARKINSONS DISEASE SPECIALIST NURSES

Parkinson's disease nurses will review in (please detail regions):

Answer: Short heath community clinics working with therapies and geriatrician who specialises in Parkinson's disorder

Parkinson's disease nurses will not review in (please detail regions):

392.19

Inflammatory Bowel Disease data.

I am writing to request the sharing of the most current information available regarding the Inflammatory Bowel Disease MDTs, and prescription of biologic drugs to treat IBD in the UK. Specifically:

1. How many members are in the MDTs within the trust, and professional makeup (ie, how many consultant gastroenterologists, clinical nurse specialists, colorectal surgeons, dietitians and other specialisations)

Answer: IBD leads Consultant Gastroenterologists, 4 other Consultant Gastroenterologists (6 in total), 3 IBD CNS, 3 IBD Consultant colorectal surgeons, 2 GI Consultant Radiologists (although only 1 comes to the MDT), 2 GI Consultant Histopathologists (again, only 1 comes to the MDT), 3 Gastroenterology SpRs

2. Available facilities for patients with IBD in the trust (endoscopy, biologics infusion, radiography)

Answer: Inpatient and outpatient endoscopy, medical day case for biologics and iron infusions, CT/MRI/radiology facilities

3. The Trust's treatment pathway protocols for patients with moderate-to-severe ulcerative colitis (other patient treatment pathway protocols for ulcerative colitis/IBD may also be of interest)

Answer: There are guidelines on the management of UC available on the Intranet and these are currently being updated

4. Following treatment with a biologic to induce remission, how often are patients checked up on?

Answer: Usually review these patients 3 monthly and these patients are discussed every fortnight in our IBD Biologics review meeting to determine whether patients can discontinue biologics after a year.

5. Please could you provide the following number of patients treated with the biologics below in the last 12 months (latest 12 months if possible), in the table below?

	Ulcerative colitis	Crohn's disease
Adalimumab	27	59
Infliximab	12	19
Golimumab	1	1
Vedolizumab	19	37
Ustekinumab	0	19
Tofacitinib	1	0

393.19

Amputation operations.

This is a request for information under the Freedom of Information Act of 2000. My request relates to problems that have occurred during amputation operations at hospitals under your jurisdiction.

I would like to request the following information:

1. A list of every amputation operation at your hospital over the past ten years.

Answer: Please note that due to operational constraints only five years data has been provided. Please see attached. Available upon request.

2. The amount of cases of the above that have resulted in claims of medical negligence.

Answer: None

3. The amount of cases of the above that have resulted in your informing your insurers of a possible claim for medical negligence.

Answer: None

4. The details of each incident.

Answer: N/A

I remind you that should there be any risk of identifying individuals, you may redact the documents or information and therefore still release it to me

394.19

IT Service Management and Desktops.

What software product(s) are you using to manage your IT Service Management (e.g. ServiceNow, Cherwell, Hornbill etc.)?

Answer: Richmond

Who is your current vendor?

Answer: Richmond SYS

When does the contract with your current service desk provider end?

Answer: N/A

How much does your current ITSM service desk tool cost annually?

Answer: N/A

When will you be looking to review your current service desk tool?

Answer: July 2020

What software product(s) are you using to manage your desktops ITAM e.g SCCM, Manage engine etc.)?

Answer: Asset Studio

Who is your current vendor?

Answer: Certero

When does the contract with your current desktop provider end?

Answer: July 2020

How much does your current ITAM desktop tool cost annually?

Answer; N/A

When will you be looking to review your current desktop tool?

Answer: April 2020

Who is your primary IT company contact?

Answer: Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Daren Fradgley , Director of Strategy & Improvement.

395.19

EU nationals employed by your Trust

Under the Freedom of Information Act can I ask for the following information on non-UK nationals employed at your Trust.

I am seeking information on non-UK **EU nationals** employed at your Trust.

Please could I have information on:

1) The number of non-UK EU nationals are currently employed by your Trust? Please could I have this information broken down by role or staff group (e.g. nursing, clinical, non-clinical)?

Staff Group	Non-EU	EU	EU %
*All	4152	82	1.97%
Add Prof Scientific and Technic	143	0	0.00%
Additional Clinical Services	712	6	0.84%
Administrative and Clerical	933	5	0.53%
Allied Health Professionals	251	8	3.09%
Estates and Ancillary	392	6	1.51%
Healthcare Scientists	51	2	3.77%
Medical and Dental	353	24	6.37%
Nursing and Midwifery Registered	1306	30	2.25%
Students	11	1	8.33%

2) How many non-UK EU nationals have left the organisation so far in 2019, and how many left in each of the previous four calendar years (2018; 2017; 2016; 2015)? Please could I have this information broken down by role or staff group?

Staff Group	2019	2018	2017	2016	2015
Add Prof Scientific and Technic	0	0	0	0	0
Additional Clinical Services	0	3	6	3	2
Administrative and Clerical	0	1	2	2	1
Allied Health Professionals	3	0	0	1	0
Estates and Ancillary	1	1	0	1	0
Healthcare Scientists	0	4	1	0	0
Medical and Dental	7	10	9	9	0
Nursing and Midwifery Registered	6	8	5	23	6
Students	1	3	1	0	0

Grand Total	18	30	24	39	9
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396.19

Avoidable Deaths.

Hi all please see the FOI below.

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) Quarterly data on the number of avoidable deaths at the Trust (since records began) as required by the Department of Health and Social Care on 14th December 2017
(<https://www.gov.uk/government/news/nhs-becomes-first-healthcare-system-in-the-world-to-publish-numbers-of-avoidable-deaths##targetText=NHS%20becomes%20first%20healthcare%20system%20in%20the%20world%20to%20publish,lessons%20and%20learn%20from%20failings.>)

Answer: Nil reported

- 2) Types of incident causing avoidable deaths

Answer: N/A

397.19

Independent Homecare Provider

Question for your pharmacy and/or procurement team regarding the number of medicines and/or nursing services provided to NHS patients by an Independent Homecare Provider

1. In your organisation, which named individuals have the overall responsibility for any homecare provision for your patients?

Answer: Yes

2. Do you currently have in post an operational lead for homecare services in your organisation – If so, what is their name/role?

Answer: Yes. Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Gary Fletcher, Director of Pharmacy, email address; gary.fletcher@walsallhealthcare.nhs.uk

3. What are your organisations minimum requirements for accepting a homecare provider?

Answer: Decided through a regional committee

4. If you have an outsourced outpatient pharmacy, are they able to provide nurse services / training for patients on how to self-inject for medicines administered by sub-cutaneous injection as part of their contract?

Answer; No Outsource pharmacy

Can you please advise of total numbers of NHS patients who;

5. Received a homecare delivery service of drug and/or nurse service at dates Jan 2018 / Jan 2019 / October 2019 – please provide these numbers by;

- Drug name
- Therapy / clinical area
- By drug the name of the homecare provider who provided/provides this service
- If possible please identify if these services are NHS funded or pharmaceutical / manufacturer funded services.

Apremilast	Otelza	HC@H	Derm
Abatacept	Orencia	Lloyds	Rheum
Adalimumab	Amgevita	HC@H	Rheum
	Humira		Derm
	Hyrimoz		Gastro
Alirocumab	Praluent	HC@H	Lipid
Brodalumab	Kyntheum	Healthnet	Derm
Certolizumab Pegol	Cimzia	HC@H	Rheum, Derm
Desferrioxamine	Desferal	Pharmaxo	
Dupilumab	Dupixent	Healthnet	\derm
Etanercept	Benapali	HC@H	Rheum
	Enbrel		Derm
	Erelzi		
Evolocumab	Repatha	HC@H	Lipid
Golimumab	Simponi	HC@H	Gastro, Rheum
Guselkumab	Tremfya	Lloyds	Derm
Hepatitis B	Tenofovir and Entacavir	HC@H	Gastro
Hepatitis C	Mixed		Gastro
HIV	Mixed	Pharmaxo	HIV
Ixekizumab	Taltz	HC@H	Derm, Rheum
Sarilumab	Kevzara	Lloyds	Rheum
Secukinumab	Consentyx	HC@H	Derm, rheum
Tocilizumab	RoActemra	Lloyds	rheum
Ustekinumab	Stelara	Lloyds	Derm, rheum

398.19

Endoscopy equipment maintenance

I would be most grateful if you would provide me, under the Freedom of Information Act, details in respect to the Trust below, details of which can be found in this email:

NHS Trust: Walsall Healthcare NHS Trust

The details we require are:

Q1: Which supplier/suppliers do the trust have a contract with for their Endoscopy equipment maintenance, repair and servicing?

Answer: In House

Q2: If not on full contract, which supplier/suppliers do the trust use for their Endoscopy equipment maintenance, repair and servicing, on an ad-hoc basis?

Answer: In House

Q3: Contract end date? (*Where applicable*)

Answer: N/A

Q4: Contract length? (*Where applicable*)

Answer: N/A

399.19

General Enquiries.

- Who is the Trust's current supplier for their Electronic Patient Record?

Answer: Fusion

- What are the contract start and end dates for the Electronic Patient Record?

Answer: 19/04/19 – 18/03/20

- Who is the Trust's current supplier for their Patient Administration System?

Answer: DXC

- What are the contract start and end dates for the Patient Administration System?

Answer: End Date 31/03/2020

- When is the trust due to start looking to re-procure their clinical systems?

Answer: Procurement took place in January 2019 for new EPR

- Who supplies the Trust's integration system?

Answer: Orion

- How often does the Trust evaluate their Clinical Systems?

Answer: Varies on Contract end dates

- Please supply a copy of the Trust's latest Digital Strategy • How regularly does the Trust review their Digital Strategy?

Answer: 3 year's, currently under review

- Who is the Trust's current Chief Clinical Information Officer?

Answer: Dr Javed. muhammad.javed@walsallhealthcare.nhs.uk

- Who is the Trust's current CIO/ IT Director?

Answer: N/A

- Which member of the board is responsible for IT?

Answer: Daren Fradgley, Director of Strategy & Improvement

- Please provide an organisation chart for the trust's IM&T department • Please provide a link to the trust's latest Board Assurance Framework • Which member of the Trust is the SRO for the STP engagements?

Answer:

Please see attached IM & T structure. Available upon request.

For the Board Assurance Framework, Section 22 is applied – Information intended for future publication. The document is currently under review .

Could you please clarify what you mean by SRO & STP engagements

What proportion of the Trust's IM&T Department is made up of interim staff and permanent staff?

Answer: 80% Permanent , 20% Non Permanent

- How many beds does the trust have?

Answer: 524 Normal running, 617 if everything is open

- How many staff does the trust employ?

Answer: 4000 approx

- What is the trust's current NHSI Rating via the NHS Oversight Framework?

Answer: Level 3

- What is the trust's current Digital Maturity Score?

Answer: 73.33

- Does the trust outsource their IT services to an external provider, if so please provide details of provider and contract dates
- Is the Trust looking to migrate to the cloud in the next 2 years?

Answer: Not outsourced. Yes looking at cloud services over the next two years

- Is the Trust considering their options of outsourcing their IT Services in the next 3 years?

Answer: No

400.19

Fatigue and Facilities Charter.

Can you confirm your Trust has adopted the Fatigue and Facilities Charter? And can you confirm that you have a nominated employer representative for dealing with fatigue and facilities?

Answer:

Not specifically. There are responsibilities shared between Guardian of Safe Working, LNC reps and PG Education Lead but none are really nominated for this role.

401.19

Treatment of a critically ill child

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

1. *“Since 01 January 2017, please specify the number of individual cases where the Court has had to intervene in the treatment of a critically ill child, when there has been a difference of opinion between parents and doctors, over the course of treatment for that child?”*

Please input your response in the table below. An example has been provided to guide you:

Name of NHS Trust	Number of individual cases which have been referred to the Court (state the number)	Additional information
<i>Example: XYZ NHS Trust</i>	<i>2</i>	<i>In 2018, there were two cases where the disagreement between the parent and doctor, over the treatment of a critically ill child, meant a court had to intervene.</i>

Answer: No cases recorded at Walsall Health Care NHS Trust in the given time period.

402.19**A&E departments.**

I am seeking to ascertain the provision for people attending A&E departments for mental health related reasons. As such, please can you provide the following information:

1. For each financial year in the period 2014-15 to 2018-19, please provide figures for:
 - a. the number of adults (aged 18 and over) attending your A&E department for mental health related issues.

Please breakdown the above figure according to:

- i.) How many were treated/seen by a doctor within 4 hours;
- ii.) How many waited longer than 4 hours to be treated.

- b. For the people in (a.ii.), please provide a breakdown for how long those people were waiting by hour e.g. five hours, six hours etc.

Answer: Please see attached. Available upon request.

2. Please detail the longest period of time an adult attending your A&E department for mental health related issues waited to be treated/seen by a doctor in
 - a. Each individual financial year from 2014-15 to 2018-19 inclusive;
 - b. 2019-2020 to date.

Answer:

Financial Year	Longest wait between Arrival & Departure (Minutes)
2014/15	978
2015/16	1195
2016/17	1348
2017/18	1379
2018/19	1450
2019/20	1798

403.19**Lost Records.**

1. Does your organisation use handwritten notes for patients?

Answer: Yes

2. How is the data stored on your system e.g. excel spreadsheets, scanned documents word etc?

Answer:

- Handwritten documents contained within main Health Records, community records and departmentally held records
- 3M (Case Note Tracking)
- Scanned documentation
- Clinical Systems including Lorenzo, Fusion, Total Mobile, Vitalpac, Bagernet, PAC's, ICE, Careflow Connect, e-scription.

3. How many times have patient records been recorded as lost or stolen in the last financial year (FY 18-19)?

Answer: Taken from incidents on Safeguard using categories which would be used to log incidents when notes are not available, can't be found or not accessible. None recorded as stolen.

	Total
Health Records - documentation inadequate /	47
Health Records - delays in obtaining	50
Health Records - no access to documentation	48
Notes Missing From Tracked Location	246

404.19 Ophthalmology

I am submitting a request for information held by the trust under the Freedom of Information Act.

1. How many patients do you have on your waiting lists who require a follow-up appointment in ophthalmology?

Answer; Total 4466 of which 4241 are not due to be seen yet. NB: This figure includes potential data quality issues within the system, so may not be 'true' waits.

2. Over the last year (ie from November 2018 to October 2019), how many patients exceeded the length of time requested by their consultant/doctor before being seen for an ophthalmology follow up appointment?

Answer: See Below

3. How long had they waited past their target date? Please give the total number and also break down by the following categories.
 - Under a month
 - One month to six months

- Six months to a year
- Over a year.

Answer: NB: This figure includes potential data quality issues within the system, so may not be 'true' waits.

Grouping	Total
Under a month	762
One month to six months	1190
Six months to a year	114
Over a year	3
Total	2069

4. In how many of these cases was a harm review carried out?

Answer: None

5. What are the criteria for carrying out a harm review?

Answer: Potential harm is identified as part of the incident reporting process

6. Did the harm reviews reveal any patients had come to harm (please give numbers and the degree of harm suffered)?

Answer: N/A

7. Please also attach internal or external reports relating to issues with follow up appointments in ophthalmology.

Answer: No reports identifying issues with follow up appointments are available due to no incidents being raised.

405.19

Telecare Monitoring.

FREEDOM OF INFORMATION SURVEY TO ASK ABOUT THE USE OF TELEHEALTHCARE MONITORING CENTRES IN THE ACUTE NHS SECTOR

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, Response manager, integrated services manager &/or Director of Nursing.

INTRODUCTION - With future emphasis being towards INTEGRATED CARE, this FOI is investigating how advanced all types of healthcare organisations are, in being able to access information about patients in their own home /other non-hospital settings and supporting the local population with long term conditions. This part of the FOI survey is directed at ACUTE Trusts, *(although other types of healthcare providers will also be polled)* and relates to the use, endorsement or sub-contracting of a **manned response and monitoring centre**, to provide 24x7 monitoring and communication which may;

- address patients' concerns and questions
- act upon safety-related alarms and alerts
- include out of hours provision for NHS patients and private customers alike.

Some acute NHS Trusts have already implemented monitoring centres and even promoted these to other NHS organisations as an income generating opportunity. We understand that the greater impetus has been to promote dignity, independence and safety in a patient's own home and as a way of expediting discharge plus pro-actively reducing hospital re-admissions and A&E attendances.

In order to assist with this survey, could you please answer the following:

1. Does your organization presently provide a Telecare operations centre to monitor your local population or monitor specific conditions? –

Answer: NO

IF the answer is YES please reply to the questions below – 1.1 to 1.10 & Q3

IF the answer is NO please reply to questions 2 to 2.4 and Q3

YES – we do have/use a monitoring centre

1. – Is this service staffed by clinical or non-clinical staff?
2. – Is this an internal support system using your own staff to monitor the calls?
3. – Is this an external support system run by the CCG and if so, which CCG/ Group of GPs' and does this team have a name/department title/ contact?
4. – Is this an external commercially available centre or Local Authority centre and if so, could you disclose the name of the 3rd party provider?

5. Do you know what Software is used to hold patient contact data and log calls – if any CRM system used at all?
6. Do you know if calls logged are written into your PAS or the patients' GP system?
7. Do you collect any data from the likes of? -
 - 1.7.1 Glucometers/ Spirometers/ weighing scales/ECG
 - 1.7.2 Future advances such as Body worn devices / smart watches that collect data such as Spo2, BP, Pulse, Temp, Movement
 - 1.7.3 Manually taken vital signs at home sent into the cloud
 - 1.7.4 Wellbeing questionnaires completed by the patient
 - 1.7.5 Domiciliary visits notes
 - 1.7.6 GP or Community Nurse notes
 - 1.7.7 Smart Home devices such as alerts re Carbon Monoxide levels, Non-Movement etc.
 - 1.7.8 Fall detection systems
 - 1.7.9 Activities of Daily Living monitoring

Other devices – not named above (please comment)

8. If you do not collect data from remote devices, would you see any advantages to incorporating data collected from any of the items listed above, by way of ongoing monitoring, establishing baseline measurement or general patient & social safety/wellbeing? (please comment)
9. Do you use a Video link to get visual contact with your patients? YES/NO
 - 1.9.1 – If YES – why do you see this as important
 - 1.9.2 – If NO – why is this not seen as important
 - 1.9.3 – If NO - is this an aspiration?

10. Have you done any ROI analytics/ produced any research, to rationalize why telecare monitoring does have a place in an ACUTE setting? If YES – are you able to share these?

Any other comments

2. If the answer is **NO** – you do NOT have a monitoring system

1. Within the next 2 years, would a Telecare Monitoring Service be 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: Not on Trust objectives

2. Could you explain your reasoning for either of the 2 answers given above please?

Answer: N/A

3. Who is the main person(s)/ decision maker (s) / team – who would be responsible for the decision to use a Telecare monitoring centre and if already used, who manages the centre at present?

Answer: Staff details below Director Level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Daren Fradgley, Director of Strategy & Improvement,

If this request is too wide or unclear, I would be grateful if you could contact me as I understand that under the Act, you are required to advise and assist requesters. If any of this information is already in the public domain, please can you direct me to it, with page references and URLs if necessary. If the release of any of this information is prohibited on the grounds of breach of confidence, I ask that you supply me with copies of the confidentiality agreement and remind you that information should not be treated as confidential if such an agreement has not been signed.

406.19

Lone worker device.

1. Does your organisation use a dedicated lone worker device?

Answer; Yes-Adult Community Staff

2. If your organisation does not use dedicated lone worker devices, what alternatives do you use?

Answer: N/A for Adult Community

3. Is your organisation's lone worker device reliant upon a sim card for reporting?

Answer: No

4. How many lone worker devices does your organisation have? 412-

Answer: Therapy services that have just joined the Division are currently in the process of also having reliance alarms.

5. Does your lone worker device feature in-house tracking or is tracking conducted by the service provider.

Answer; Yes

6. Of your devices how many have been utilised in the last:
6 months as verified by your service provider xx devices **154**
12 months as verified by your service provider xx devices **258**
18 months as verified by your service provider xx devices **n/a**
24 months or more as verified by your service provider xx devices **n/a**
6. Is competence in using the lone worker device included in your lone worker's risk assessment?

Answer; Yes

7. Does the security department hold responsibility for the management of lone worker devices in your organisation?

Answer: No-the staff member is liable for the device and main admin have access to the security department's portal.

8. Does your organisation carry out an annual physical inspection of the lone worker devices?

Answer: No-This is been looked into, all devices are liable by the staff member.

9. Is your security department responsible for conducting in-house training for lone workers that includes lone worker devices?

Answer: Yes-currently e-learning training.

10. What are the key areas that your lone worker training focuses upon?

Answer: Lone Working

11. What instructions are your lone workers given in the event that their device does not function?

Answer; To contact their manager or main contact to highlight the device is not working and where they are and to highlight this with the security department as soon as possible

407.19

Medical Examiners

Hi all please see the FOI below.

1. The number of medical examiners at the Trust in 2019;

Answer: 4

2. Future plans to appoint medical examiners.

Answer: N/A

<https://improvement.nhs.uk/resources/establishing-medical-examiner-system-nhs/#h2-introduction-to-the-medical-examiner-system>

408.19

Complaints Data 2018-19.

This is a freedom of information request for a few small pieces of information.

Last year (2018-19) for your acute Trust:

1. How many complaints were upheld by the Ombudsman?
2. How many complaints were partly upheld by the Ombudsman?
3. What was your complaints (3 working days) performance as a percentage?
4. What was your complaints (final response) performance target in days?
5. What was your performance as a percentage in response to this target? (e.g. 75% of complaints are answered within 25 working days or as agreed with the complainant)
6. How many days does it take on average for you to respond to a complaint?

Please add these numbers to this table:

Answer: Annual report available upon request.

Question	1.Upheld	2. PartUph	3. 3WD%	4. WD Tgt	5. WD % Achievement	6. Avg Tot Days
Answers	Annual Report Attached	Annual Report Attached	87%	30 days	46%	42 days

409.19

Cancer services.

Unless otherwise stated, all questions relate to Nursing usage only.

1. Please provide name and contact details (email address and telephone number where possible) of any Lead Cancer Nurses and Cancer Managers you have within your Trust, broken down by site, and then department and speciality of cancer.

Answer: Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Karen Dunderdale, Director of Nursing, email address; karen.dunderdale@walsallhealthcare.nhs.uk and telephone number is 01922 721172.

2. How much cancer related agency usage from January 2018 to November 2019 has the Trust used? This is a request for Nursing only. I request for this information to be broken down into the following:

Answer: The Trust has not booked a Cancer Nurse via an agency

a) unit/site and ward/department

b) grade/title (i.e. Band 5/6/7 Nurse etc.)

c) amount of hours and/or full time equivalent (FTE) broken down per month during the requested time period above

d) total cost of agency usage (in £) per month during the requested time period above

e) what agencies were used, along with total amount in £ per agency on a monthly basis during the requested time period above

3. How does the Trust source any cancer-related Nurse agency requirements? I request your answer include any frameworks that you use along with the number of SLAs you have in place with providers.

Answer: N/A

4. Based on your answer above, can you confirm the number of incidences whereby your agency need has been charged above NHSi cap, broken down per shift on a monthly basis i.e. April 2018 = 25 shifts.

Answer: N/A

5. Who is responsible for making the decision on which agency/recruitment business to use to fulfil your agency nursing requirements. Please include name and contact details (email and telephone number where possible).

Answer: Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Karen Dunderdale, Director of Nursing, email address; karen.dunderdale@walsallhealthcare.nhs.uk and telephone number is 01922 721172.

6. What are the Trusts current full-time and part-time vacancies for:

a) Cancer Clinical Nurse Specialists **0**

b) Lead Cancer Nurse **0**

c) Cancer Manager **0.52 FTE**

d) Chemotherapy Nurses **1.24 FTE**

e) Radiology Nurses **0**

f) Oncology Nurses **0**

410.19

IT Service Management and Desktops.

394.19

IT Service Management and Desktops.

What software product(s) are you using to manage your IT Service Management (e.g. ServiceNow, Cherwell, Hornbill etc.)?

Answer: Richmond

Who is your current vendor?

Answer: Richmond SYS

When does the contract with your current service desk provider end?

Answer: N/A

How much does your current ITSM service desk tool cost annually?

Answer: N/A

When will you be looking to review your current service desk tool?

Answer: July 2020

What software product(s) are you using to manage your desktops ITAM e.g SCCM, Manage engine etc.)?

Answer: Asset Studio

Who is your current vendor?

Answer: Certero

When does the contract with your current desktop provider end?

Answer: July 2020

How much does your current ITAM desktop tool cost annually?

Answer; N/A

When will you be looking to review your current desktop tool?

Answer: April 2020

Who is your primary IT company contact?

Answer: Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Daren Fradgley , Director of Strategy & Improvement.

411.19 Costings

1) How much an incident involving a knife/penetration wound would cost the NHS including ambulance call out, treatment, surgery etc

2) how much an incident involving a severe beating/grevious bodily harm would cost the NHS including ambulance call out, treatment, surgery etc

Answer: The Trust does not hold that information or have the correct level of information to provide costs as requested.

412.19

Translation services

Dear FOI team,

I am writing to obtain information relating to the spend incurred on translation services for non-English speaking patients.

The questions are as follows:

For each of the last 3 financial years (2019/18, 2018/17, 2017/16) how much have you spent on the following:

1. Translation of written information for patients /carers

Answer: Included in below figures

2. Translation services for patients/carers

2016/17

Answer: £254,726 external

2017/18

Answer: £110,723 external

2018/19

Answer: £170,114 external

3. Employment of translators

2016/17

Answer: £42,089 pay

2017/18

Answer: £35,947 Pay

2018/19

Answer: £36,617 Pay

4. Employment of advocates for non-English speaking people

Answer; NIL

and, 5. What are the three most common languages translated?

Answer: Punjab, Bengali, Polish

413.19

Temporary Nurse spend

Please could you supply the following information under the Freedom of Information Act for the period of April 2018 to April 2019, inclusive:

- What is your total temporary nurse spend?

Answer: £4,433k

- How many international nurses have you landed in the last financial year?

Answer: 0. All International Recruitment has ceased

414.19

Clinical Decision Support Systems in your organisation

Dear Walsall Healthcare NHS Trust,

I am researching the use of clinical decision support systems used in NHS Trusts. As such I am making this request under the Freedom of Information Act (2000).

To assist you, what I mean by clinical decision support systems, these are stand alone or integrated software which helps clinical staff make safe decisions and take appropriate action. They can be algorithms, care plans, clinical referencing, or clinical condition specific guidelines which incorporate treatment or decision making.

Proprietary examples include:

- BestPractice (BMJ)
 - ClinicalKey, ExpertPath, STATdx, Arezzo (Elsevier)
 - DXS
 - DynaMed, DynaMed Plus, Isabel (EBSCO)
 - First DataBank, Zynx (Hearst)
 - IBM Watson, Micromedex (IBM)
 - iRefer (MedCurrent)
 - MedicinesComplete (BNF)

- Provation
- LexiComp, UpToDate (WoltersKluwer)
- ThinkResearch (ThinkResearch Corporation)

To assist me with my research, could you please give me the following information please:

1. Does the trust operate any clinical decision support systems (examples above)

◦ If so, which ones?

Answer; The Trust do not use any clinical decision support systems.

2. What is the cost of licences (and any other support) the Trust paid on clinical decision support systems in the financial years 2017-18 & 2018-19

Answer: N/A

3. Has the trust developed their own electronic clinical decision support system(s)?

Answer: N/A

4. If so, what were the WTE and total funding costs incurred in development of their own clinical decision support system(s) for the financial years 2017-18 & 2018-19 respectively

Answer: N/A

5. What was the Trusts' total operating budget for financial years 2017-18 & 2018-19 respectively

Answer: N/A

415.19

Ned Hobbs email address

Hi,

Please can I have an NHS email Address for Ned Hobbs

Answer: ned.hobbs@walsallhealthcare.nhs.uk

416.19

Surgical Robots

To Whom It May Concern,

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

1) Are surgical robots used for urology, gynaecology and general surgery in your trust?

Answer: No

If yes:

1a) How many surgical robots are in use in your trust?

1b) What is the name of the manufacturer of the surgical robot(s) and the model(s) used in your trust?

1c) What date was the surgical robot(s) purchased?

1d) Are you currently planning to purchase a surgical robot(s) in the next 18 months?

2) How many procedures were carried out with use of a surgical robot each year between 2013 to present - in the following specialities:

1. Urology
2. Bariatric surgery
3. Colorectal Surgery
4. General Surgery (e.g. cholecystectomy, hernia repair)
5. Gynaecology

3) How many consultant surgeons within your trust perform robotic surgery for each speciality? Please supply breakdown by speciality.

4a) How much did the trust pay to purchase the robot(s)? If multiple surgical robots, please specify price of each robot.

4b) How much has been spent on disposables for the robot(s) annually between 2013 - present?

4c) What is the total cost of maintenance for the robot(s) annually between 2013 - present?

I would prefer to receive this information via email.

If it is not possible to provide the information requested due to information exceeding the cost of compliance limits, I would be happy to discuss over phone or email as to how I can refine my request and would be grateful for any further advice and assistance.

417.19

NHS Trust Senior Members of Staff, their position and trust.

Dear Walsall Healthcare

Under the Freedom of Information Act, could you kindly please provide us with a current list of the email addresses within your authority via email for all the following:

- NHS Trust Senior Members of Staff, their position and trust.

Answer:

Walsall Healthcare Trust

Richard Beeken Chief Executive officer. richard.beeken@walsallhealthcare.nhs.uk

Ned Hobbs, Chief Operating officer. ned.hobbs@walsallhealthcare.nhs.uk

Daren Fradgley, Director of Strategy and improvement. daren.fradgley@walsallhealthcare.nhs.uk

Matthew Lewis, Medical Director. Matthew.lewis@walsallhealthcare.nhs.uk

Karen Dunderdale, Director of Nursing. karen.dunderdale@walsallhealthcare.nhs.uk

**Russell Caldicott, Director of Performance and Finance.
russell.caldicott@walsallhealthcare.nhs.uk**

Catherine Griffiths, Director of People and Culture. catherine.griffiths@walsallhealthcare.nhs.uk

Jenna Davies, Director of Governance. Jenna.davies@walsallhealthcare.nhs.uk

We will not be publishing the information you provide to us and will only use it to send information about DENAA+ Healthcare microbial cleaning products that may be of interest. The range includes hand soaps, floor cleaners and sprays and all products are eco-friendly, sustainable, non-polluting and completely safe for operatives. They inhibit harmful bacteria, reduce pollen, fungal spores and dust mite faeces – which creates an increasingly healthier and safer microbial environment (called a healthy microbiome). They

418.19

Metal on metal testing

Case withdrawn

419.19

Compromise agreements by Walsall Healthcare

1. Please advise how many the compromise agreements the trust has entered into since 1 April 2013.

Answer:

2013/14 18

2014/15 18

2015/16 14

2016/17 0

2017/18 4

2018/19 5

2. Can the trust confirm that it adopted the NHS policy of inserting a clause into compromise agreements to make it clear that workers or former workers are not prevented by compromise agreements from making public interest disclosures?

Answer; Yes

3. If so, when did the trust adopt this policy?

Answer: It is not a policy – any agreements are prepared by our solicitors in line with employment law and NHS guidance

4. How many of the compromise agreements reached by the trust since 1 April 2013 contained a clause which made it clear that the worker or former worker in question was not prevented by the agreement from making public interest disclosures?

Answer: All would have been in line with legal advice and employment law

5. If the trust has inserted such a clause into its compromise agreements, please provide a copy of the relevant clause.

Answer: Exemption 43 is applied. This information is commercially sensitive

420.19

Healthcare Agency Hours and Spend By Discipline (Temporary Workers) FY 2018/2019

Dear Walsall Healthcare NHS Trust,

Please provide the total agency spend of your Trust, for the last financial year, and the total hours supplied by temporary agency staff to your Trust, for the following staffing categories:

Staffing Provision

Total Hours FY (2018/19) Total Yearly Spend (2018/19)

General Nursing Theatres (Nursing) Healthcare Assistants RMNs (where Applicable)	121,663	£4462k
Doctors (All Specialisms)	93,631	£2998k
AHP/HSS	2,300	£974k
Non-Medical Non-Clinical Emergency Nurse Practitioner/ Advanced Nurse Practitioner		£311k

421.19

Appointments cancelled on the day

Dear Sir/Madam,

Under the Freedom of Information Act can you provide me with the following information:

1. How many appointments have been cancelled for non-clinical reasons IN THE 3 DAYS BEFORE a patient was due to be admitted?

Answer: Data on cancellations required to be reported on is limited to 'on the day' cancellations therefore the data requested is not collected. All data used for the reporting of this FOI is taken from the data reported using the QMCO national reporting.

2. Out of those cancellations, how many were rescheduled within the statutory time limit - eg 28 days?

Answer: See above

3. Out of those cancellations, how many were rescheduled more than once?

Answer: See above

4. How many appointments have been cancelled for non-clinical reasons ON THE DAY a patient was due to be admitted?

Answer:

2017	2018	2019 (To 31/11/2019)
198	108	42

5. Out of those cancellations, how many were rescheduled within the statutory time limit – eg 28 days?

Answer:

2017	2018	2019 (To 31/11/2019)
0	7	4

6. Out of those cancellations, how many were rescheduled more than once?

Answer:

2017	2018	2019 (To 31/11/2019)
7	4	5

7. What was the most rescheduled operations you have over the period? So for clarity I am after the number of times that the one patient who has had their operation rescheduled the most.

Answer:

2017	2018	2019 (To 31/11/2019)
3	2	2

Please provide this data for 2017, 2018 and 2019 - up to and including November 2019.

The following should be included in the figures for 'appointments':

- All planned or elective operations and day surgery
- Invasive X-ray procedures carried out on inpatients or day cases
- Telephone cancellations made to patients
- All minor procedures, including outpatient procedures

For 'non-clinical reasons' please include a break-down of the following:

- Bed-ward not available

- Staff unavailable
- Emergency operations taking priority
- Maintenance needed on equipment
- Patient unavailable
- Admin error

422.19 A&E Patients

Dear Walsall Healthcare NHS Trust

I am conducting research into the nature of complaints for patients admitted to A & E. I would like to request the following information under the Freedom of Information act:

1. For each of the last three calendar years (2019, 2018, 2017), please provide a monthly list of the chief complaints for patients admitted to A&E, broken down by:

- The name of the chief complaint.
- The number of patients admitted to A&E for each chief complaint.
- The number of male patients admitted for each chief complaint.
- The number of female patients admitted for each chief complaint.

Please note that the **Chief Complaint** is the presenting symptom rather than the primary diagnosis.

Please see the image below, which is data from a similar FOI request from 2017, to understand how I would like the data interpreted.

<https://infogram.com/edp-aande-chief-complaints-1h9j6qmxvr3v4gz>

2. For each of the last three calendar years (2019, 2018, 2017) please disclose the total number of patients that were admitted to A and E.

3. For each of the last three calendar years (2019, 2018, 2017) please disclose the total number of patients admitted to A and E that were **not** GP registered.

Preferred format: Microsoft Excel/ Machine readable

Answer: Please see attached spreadsheet.

Please note: the chief complaint field has only been populated since 09/11/2017 when ECDS was implemented. Therefore, we can only provide data from this date forward for question 1.

For question 2 and 3, we have looked at attenders between 01/01/2017 and 26/11/2019

For question 3, for patients that were not GP registered. We are unable to provide this, however we can identify patients where the registered GP is unknown, this doesn't necessarily mean they are not registered with a GP.

423.19

VTE risk assessment.

Dear FOI Team,

I would like to request some information from your Trust under the FOI act relating to VTE risk assessment.

- Each month your trust reports VTE risk assessment compliance, please could you specify the time frame from admission that this applies e.g. VTE risk assessment completion within 12 hours of admission.

Answer: Risk assessment within 24 hours of admission

- Please provide a breakdown of VTE risk assessment compliance for the last 12 months. Where compliance is <95% please provide information relating to the factors affecting performance and mitigations in place to recover the position.

Answer: Exemption 21 applied. The information is publically available via the trusts website – Trust board papers.

- Does your Trust have a Thrombosis Committee or similar whereby VTE risk assessment is monitored alongside hospital acquired thrombosis. If you do please could you provide a copy of the meetings terms of reference and the minutes of the last meeting.

Answer: No

424.19

Breast Screening & Breast Clinics

Hi Walsall Healthcare NHS Trust

In response to my FOI, I would be grateful if you can please provide the below information regarding the Breast Screening programme and symptomatic breast clinics for Walsall Healthcare NHS Trust

Breast Screening – (Asymptomatic)

- Does the trust have a dedicated breast screening service/unit (Asymptomatic mammograms) – This could be separate from the main x-ray department?
- If so, what is the name of the service?
- Is this run in a static unit or on breast screening vans (Or Both)? How many vans does the service run? How many static sites does the service run?
- How many ladies are scanned/screened on average, per day on each van/static unit?
- Does the service scan on a 5 day or 7 day week?
- Who has the overall responsibility for the breast screening service?
- Please provide an organisational chart for the team/department with overall responsibility for the breast screening service

Symptomatic Mammography & Breast Clinics

- Which department has the responsibility for symptomatic mammograms / Symptomatic Breast Lists/Clinics? Does this come under the breast screening unit or the main radiography department of the trust?
- How many ladies are assessed on average per day in the symptomatic breast clinic?
- Does the service scan on a 5 day or 7 day week?
- Who has the overall responsibility for the symptomatic breast clinics?
- Please provide an organisational chart for the team/department with overall responsibility for the symptomatic breast clinics

Answer: Walsall Manor Hospital breast screening functions are provided by Sandwell and West Birmingham Hospitals NHS Trust. As such all requests for information relating to the “City, Sandwell and Walsall Breast Screening Service” or the functions it provides should be addressed to Sandwell and West Birmingham Hospitals NHS Trust

425.19

Suicide risk assessments

I would like to request the following via the Freedom of Information Act 2000.

1. Which suicide risk assessments do you use at your trust?

Answer:

**Self-harm and attempted suicide management policy
Adult mental health triage assessment in A&E**

2. What training do your staff undertake in using those suicide risk assessments?

Answer: For the triage assessment. Training completed in the department

3. What training do your staff have in assessing risk of suicide in general?

Answer:

A&E staff have accessed storm training which is around the recognition of suicide ideation

Ward staff have also accessed Storm training

The older peoples mental health liaison team deliver be spoke training around suicide risk

4. What is the procedure your staff follow when they identify a person at risk of suicide?

Answer:

**Self-harm and attempted suicide management policy
Adult mental health triage assessment in A&E**

5. How many people have been assessed for risk of suicide between 2012 and 2020, if possible by month and department

Answer: This information is not recorded on our systems

6. How many people were identified as at risk of suicide between 2012 and 2020, if possible by month and department

Answer: This information is not recorded on our systems

426.19

Payments we have made that are over £25,000

Dear Sir/Madam,

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 for the month of October 2019. 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 the October 2019 file please and thank you?

Answer: October & November are now available. Please see November attached .

427.19

Diagnosis and Treatment of Endometriosis

Dear Walsall Healthcare NHS Trust,

I would like to request any documentation you may have on the number of women who have been diagnosed with Endometriosis between 2009 – Present.

To be specific, this can include numbers you may have on:

- The number of patients seeking advice on diagnosis
- The number of patients who have had surgical diagnosis
- Any numbers you have available on Endometriosis in families and the link between the condition and genetics.

Any information you have on the number of women who have been diagnosed will be a massive help.

Answer: Please see attached. Available upon request. The Trust is only able to provide counts of admissions between 2009 and current where the patient had a diagnosis of Endometriosis in any diagnosis position.

428.19

Data Protection Officer

Dear Sir/Madam,

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

1. The name of your Data Protection Officer

Answer: Sharon Thomas

2. Is your DPO an employee of your organisation

Answer: Yes

3. If not an employee are they privately contracted or contracted via a comply

Answer: N/A

4. If via a company the name of the company

Answer: N/A

5. The pay band of the DPO if employed by the Trust

Answer: Band 7

429.19

IT infrastructure storage solutions

Please provide the information in the form of a reply-mail. Please mark the applicable answer or delete the ones that are not applicable.

1. What best describes your IT infrastructure storage solutions?

- ☐ Mixture of on-premises, public cloud & private cloud
- ☐ Mixture of on-premises & public cloud
- ☐ Mixture of on-premises & private cloud
- ☐ Mixture of private cloud & public cloud
- ☒ **100% on-premises**
- ☐ 100% public cloud

- 100% private cloud

2. Have you moved data off a public cloud platform to a private cloud in the past two years?

- Yes
- **No**
- Don't know

3. Have you been charged by external suppliers for moving data off a public cloud platform to a private cloud in the past two years?

- Yes
- **No**
- Don't know

4. If you answered yes to the above, how much have you spent in total:

- Up to 1,000£
- 1,000£ – 5,000£
- 5,000£ – 10,000£
- Over 10,000£

5. In 2020, is your IT budget set to:

- No change
- **Not yet applicable**
- Decrease 15+%
- Decrease 10 – 15%
- Decrease 5 – 10%
- Decrease 1 – 5%
- Increase 1 – 5%
- Increase 5 – 10%
- Increase 10 – 15%
- Increase 15+%

6. Have you experienced data loss or data protection issues on either of the following platforms in the past 2 years?

- **on-premises**
- public cloud

- private cloud
- Don't know
- Not applicable

7. In the past two years, your spending on public cloud has:

- **Not change**
- Decreased 15+%
- Decreased 10 – 15%
- Decreased 5 – 10%
- Decreased 1 – 5%
- Increased 1 – 5%
- Increased 5 – 10%
- Increased 10 – 15%
- Increased 15+%
- Don't know

8. In the past two years, your spending on private cloud has:

- **No change**
- Not yet applicable
- Decreased 15+%
- Decreased 10 – 15%
- Decreased 5 – 10%
- Decreased 1 – 5%
- Increased 1 – 5%
- Increased 5 – 10%
- Increased 10 – 15%
- Don't know

9. Do you have a specific budget set aside to manage future data growth?

- Yes
- **No**
- Don't Know

430.19

Cost Improvement Programme

Dear Sir/Maam,

I would like to request some financial information under the freedom of information laws – around the trust's cost improvement programmes over the last ten years.

We have attached a spreadsheet to fill in with the request numbers.

For the avoidance of doubt, we are requesting the Cost Improvement Programme figures under the same definition through which the trust submits data to NHS Improvement.

Answer: Please see attached. Available upon request. Please note we only have figures available from 2014/2015.

431.19

Juvenile ideopathic arthritis

Dear Sir/Madam,

Would you be able to respond to the following request for information?

I would like to understand how patients with juvenile ideopathic arthritis are being treated. So, in the last 6 months, how many patient(s) with juvenile ideopathic arthritis have been treated with:

Humira (adalimumab)

Amgevita (adalimumab)

Imraldi (adalimumab)

Hyrimoz (adalimumab)

Hulio (adalimumab)

Tocilizumab

Abatacept

Enbrel (etanercept)

Erelzi (etanercept)

Benepali (etanercept)

Golimumab

Remicade (infliximab)

Remsima (infliximab)

Inflectra (infliximab)

Flixabi (infliximab)

Canakinumab

Anakinra

Answer: This information is not held on our pharmacy systems

432.19

Organisational Structure Chart

Dear Sirs

Under the terms of FOI legislation, I would be grateful if you could provide me with organisational charts showing the named post holders for the following departmental structures.

Operational Management

Answer: Please see attached divisional structures which cover Operations & Nursing

Nurse Management

Answer: Please see above. Available upon request.

Finance Department

Answer: Please see attached. Available upon request.

HR Department

Answer: Please see attached. Available upon request.

IT Department

Answer: Please see attached. Available upon request.

Please note: Staff details below Director level are withheld under Section 40 (Personal Information).

433.19 Clinical Audit

I am undertaking a clinical audit of the normal ranges of liver function tests, and how these normal ranges were developed or established across the UK. We suggest that the best point of contact internally will be the Head of Clinical Biochemistry (chemical pathology). Once we have completed the AUDIT we will share the results with you to pass on to the Head of Clinical Biochemistry or chemical pathology.

If any question is too difficult or impossible to answer, please simply return the data you have available.

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

1. The normal range for ALT, AST, and Alkaline phosphatase that your hospital uses for your adult patients (male and female).
2. The method used - reference and temperature, or some means for us to identify the methods used (e.g. machine name and reference to the kit used).
3. How was your local normal range for each liver function test determined? And do you know the date (year) when these were last revised?
4. How many measurements of for each of ALT, AST, and alkaline phosphatase does your laboratory undertake each year?
5. How many patients does this represent?
6. How many or what % of ALT measurements exceed your upper limit of normal. How many or what % of ALT measurements are ≥ 20 U/L for women, and ≥ 31 U/L for men.

Answer: "Walsall Manor Hospital pathology functions are provided by the Black Country Pathology Service. As such all requests for information relating to analytical performance should be addressed to the Black Country Pathology Services "host" organisation which in this case is The Royal Wolverhampton NHS Trust."

434.19

Cyber security

Dear Walsall Healthcare NHS Trust

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

1. The total amount spent by the Trust on data security and cyber security training in the 12 months to the 1st of November 2019; and the breakdown of these costs in terms of the training undertaken.
2. The total amount spent by the Trust on private cyber security contractors and/or consultants/consultancies in the last 12 months.
3. The total number of qualified cyber security and data security professionals employed by the Trust.

Answer: Section 31(1) is applied to this request. Information is exempt if its disclosure under this Act would, or would be likely to, prejudice - (a) the prevention or detection of crime. It could be used to withhold information that would make anyone, including the public authority itself, more vulnerable to crime for example, by disclosing its own security procedures and it is the view of this Trust that the disclosure of the requested information would prejudice our ability to resist cyber-attacks on our systems

435.19

Policies

However, whilst you have now sent HR my emails does your department provide policy / SOP (standard operating procedure) or equivalent documents in the following:

- 'bullying and harassment'

Answer: Section 22 is applied – Information intended for future publication. The policy is currently under review

- 'whistleblowing'

Answer: please see attached. Policy available upon request

- 'freedom of information'

Answer: Please See attached. Policy available upon request

- 'complaints'

Answer: Please see attached. Policy available upon request

If you are able to provide this documentation please can you kindly do so as this is **not** a subject access request. I presume that the above documents would be applicable for all departments, but if there are any separate documents for the 'dietetics' department please provide this too.

436.19

Working days lost to stress and anxiety.

Hello,

Under the Freedom of Information Act 2000, I would like to request the following:

1. The number of working days lost to stress, anxiety, depression and other mental health conditions by members of staff within the your trust, by year since 2009.
2. The cost of losing these working days (based on wage multiplied by working hours lost).

I would like to receive the information in a statistical data set.

Answer:

Year	FTE Lost	Approx Cost
2009	3,562	482,853
2010	7,125	855,656
2011	8,098	1,027,538
2012	10,226	1,457,510
2013	9,099	1,271,742
2014	13,123	1,729,097
2015	14,368	1,792,862
2016	12,681	1,608,771
2017	16,856	2,202,160

2018	16,935	2,311,462
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437.19

EAT Service (Electronic Assistive Technology Service)

Good afternoon,

Would it please be possible to request the following information for your Trust:

1. Does your NHS Trust have an EAT Service (Electronic Assistive Technology)?

Answer: The Trust does not have an EAT service

2. Could you tell us where referrals to your service come from? (eg: wards, departments, hospital social workers, community NHS staff, GP's, Local Authorities)

Answer: N/A

3. Is the service you offer part of the Trusts routine offering to aid early discharge from hospital/prevent delayed transfers of care?

Answer: N/A

4. Who is the Manager for that service and what are their contact details?

Answer: N/A

5. Who is the budget holder for that service and what are their contact details?

Answer: N/A

438.19

WDA(H) license

To whom it may concern,

I would like to enquire about the status of your WDA(H) license (the wholesale dealer license that allows the trust to supply drugs to care providers, such as hospices). Please could you answer the following questions:

1. Do you hold a WDA(H) license?

Answer: Yes

2. What are the benefits of holding a WDA(H) license?

Answer: Able to supply medicines by wholesale to organisations external to the Trust.

3. What are the 3 main requirements to maintain a WDA(H) license?

Answer: (i) compliance with Good Distribution Practice – OJEU C343/1, (ii) Have a nominated Responsible Person, (iii) have passed inspection by MHRA, etc.

4. Does the WDA(H) license benefit the trust?

Answer: Yes

5. Are you likely to retain/renew the WDA(H) license? If not, what are your reasons of not wanting to hold a WDA(H) license?

Answer: Yes

439.19

Discharges between 10pm - 6am

I'm making the following request under the Freedom of Information Act 2000.

I would like to know - since the start of 2018 how many patients have been discharged from hospital between the hours of 10pm and 6am.

I would like the figures broken down for each month since January 2018.

I would also like to know - of these patients how many were provided with patient transport home or to a care setting.

Answer: Unfortunately the Trust is unable to release the information requested due to data quality issues, namely patients may have been discharged during the day but the administration function has not been undertaken until that evening and so the data in the system is not a true representation of what actually happened.

440.19

Eating disorder clinics

Good morning,

I would like to request some information under the Freedom of Information Act 2000.

Please provide the names and addresses, including a postcode (and organisation code if easily accessible), of all eating disorder clinics that patients are currently referred to you at your trust.

In addition, please indicate for each eating disorder service whether they provide inpatient, outpatient, community services (or if a clinic provides a combination of these, each type of service provided).

Answer: The Trust currently does not have an eating disorders clinic and do not refer to any out-of-region directly.

Please provide this in a spreadsheet with a file type ending in .xlsx with in the following table format:

Please note that I am not requesting information on the numbers of patients being referred, or any other information which could be used to identify individuals, and nothing is being requested - or should be provided - which would make the request exempt under Section 40 of the Act.

Please also note that this information differs from data available on the NHS Direct website in that this information relates to services used within a specific CCG, rather than merely those that may be used by any CCG, and so is not exempt under Section 21 of the Act.

441.19

Use of Personal devices for work activity

Dear Walsall Healthcare NHS Trust,

I am pursuing a Masters degree in Digital Health Leadership at Imperial College London and am conducting a research study for my dissertation.

My study aims to examine how to improve the implementation of Bring Your Own Device (BYOD) in the public sector.

I am writing to you under the Freedom of Information Act 2000 to request the following information from Walsall Healthcare NHS Trust:

1. Does Walsall Healthcare NHS Trust allow staff to use their own devices to access work email?
Please answer Yes or No.

Answer: No

2. Does Walsall Healthcare NHS Trust allow staff to use their own devices for any other work-related activities? Please answer Yes or No.

Answer: No

3. If you answered yes to question 2 please provide a list of the types of systems that staff can access from personally owned devices?
4. Does Walsall Healthcare NHS Trust have a policy that covers BYOD or the use of personal devices at work? Please answer Yes or No.

Answer: No

5. If you answered yes to question 4 please could you provide a copy of your policy that covers BYOD or personal device usage at work?

442.19

DaVinci Robot

To whom it may concern.

Please could you furnish me with the following information:-

1. How many Intuitive Surgical DaVinci Robots do you have in your Trust and which model are they? i.e DaVinci Si, X, Xi, SP etc.

Answer: 0

2. How many and which procedures did you complete with each model of DaVinci robot in the last 3 financial years and year to date?

Answer: N/A

3. Which surgeons use the Da Vinci Robot in your Trust?

Answer: N/A

4. What is your total spend by financial year for the last two years with Intuitive Surgical with the following product codes:-

Answer: N/A

Model Number	Item Description
420179	Hot Shears (Monopolar Curved Scissors)
420110	PreCise Bipolar Forceps
420121	Fine Tissue Forceps
420171	Micro Bipolar Forceps
420172	Maryland Bipolar Forceps
420204	Atrial Retractor
420205	Fenestrated Bipolar Forceps

420227	PK® Dissecting Forceps
420246	Atrial Retractor Short Right
420249	Dual Blade Retractor
420344	Curved Bipolar Dissector
420003	Small Clip Applier
420006	Large Needle Driver
420033	Black Diamond Micro Forceps
420048	Long Tip Forceps
420093	ProGrasp Forceps
420157	Snap-fit™ Scalpel Instrument
420181	Resano Forceps
420190	Cobra Grasper
420194	Mega Needle Driver
420203	Pericardial Dissector
420207	Tenaculum Forceps
420215	Cardiac Probe Grasper
420278	Graptor (Grasping Retractor)
420296	Large SutureCut™ Needle Driver
420309	Mega™ SutureCut™ Needle Driver
420318	Small Graptor (Grasping Retractor)
420001	Potts Scissors
420007	Round Tip Scissors
420036	DeBakey Forceps
420049	Cadiere Forceps
420178	Curved Scissors
420183	Permanent Cautery Hook
420184	Permanent Cautery Spatula
420189	Double Fenestrated Grasper
420192	Valve Hook
420230	Large Clip Applier
420327	Medium-Large Clip Applier

443.19 **Oncology**

To the Freedom of Information Officer

We are conducting a piece of research into oncology treatments. Under the Freedom of Information Act 2000 we would like to request the information contained in the attached document.

Please see template attached for your completion.

For the avoidance of doubt, we do not require any information that may identify individual patients, clinicians or pharmacists or that may otherwise be categorised as personal data.

Answer;

FOI Request re Number of Patients Treated

Please detail the number of Oncology¹ patients treated² by your Trust with the stated therapies, during the time period **January 2019 to June 2019** inclusive.

	Total Number of Patients Treated:					
	Total Number of Patients Treated	Head & Neck Cancer	Adjuvant Melanoma	Metastatic Melanoma	Non-Small Cell Lung Cancer (NSCLC)	Renal Cell Carcinoma (RCC)
Pembrolizumab (Keytruda)	18	0	0	0	18	0
Nivolumab (Opdivo)	10	0	0	0	5	5
Ipilimumab (Yervoy)	0	0	0	0	0	0
Dabrafenib (Tafinlar)	0	0	0	0	0	0
Cabozantinib (Cabometyx)	2	0	0	0	0	2
Sunitinib (Sutent)	5	0	0	0	0	5
Pazopanib (Votrient)	7	0	0	0	0	7
Axitinib (Inlyta)	1	0	0	0	0	1
Atezolizumab (Tecentriq)	6	0	0	0	0	0
Sorafenib (Nexavar)	0	0	0	0	0	0
Tivozanib (Fotivda)	0	0	0	0	0	0
Lenvatinib (Lenvima)	0	0	0	0	0	0
Cetuximab (Erbix)	0	0	0	0	0	0
Everolimus (Afinitor)	0	0	0	0	0	0
Vemurafenib (Zelboraf)	0	0	0	0	0	0

444.19

Overseas Upfront charging

Hi,

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

1

Cancer Type	Diagnoses Codes (ICD10)
Head & Neck	C00-C14; C30-C32
Adjuvant Melanoma	C43 (treatment as additional treatment following primary)
Metastatic Melanoma	C43 plus C77, C78, C79
NSCLC	C34
RCC	C64

² Please indicate the number of patients (excluding clinical trial patients) treated (any patients treated, not only those for whom treatment with the therapy was initiated) with the stated active anti-cancer drug treatment(s).

- i) How many patients were denied urgent care as a result of not being able to pay upfront for services between July 2018 and October 2019

Answer: 0

- ii) How many patients died as a result of being denied urgent care in the same period

Answer: 0

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 I would be grateful for any further advice and assistance.

If you have any queries please don't hesitate to contact me via email and I will be very happy to clarify what I am asking for and discuss the request, my details are outlined below

445.19

FFP3 Respiratory Protective Equipment

I am writing to you under the Freedom of Information Act 2000 to request the following information from the department responsible for the issuing and fit testing of FFP3 respiratory protective equipment used within your organisation to control risks arising from the exposure of staff to respiratory infectious diseases:

- Does your organisation currently utilise any reusable FFP3 respiratory protective equipment in clinical areas for interactions with patients with respiratory infectious diseases? If so, what models are used?

Answer: The Trust does not use Reusable FFP3

- If your organisation utilises reusable FFP3 respiratory protective equipment in clinical areas, are disposable FFP3 masks also used? If so, under what circumstances would a reusable FFP3 mask be used in place of a disposable FFP3 mask?

Answer: N/A reusable not used

- If your organisation uses reusable FFP3 masks in clinical areas, what systems of practice are in place regarding storage and decontamination to ensure that these are maintained to a clinically acceptable standard?

Answer: N/A reusable not used

If it is not possible to provide the information requested, please advise as to how this request may be suitably amended.

Any information you are able to provide on these queries would be much appreciated.

446.19
Asthma data

Dear Sir/Madam,

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

- **How many cases of asthma have been recorded at each of your hospital sites in your Trust from in each calendar year from 2014 – 2019?**
- **How many cases of other breathing problems have been recorded at each of your hospital sites in your Trust from in each calendar year from 2014-19?**

Please could this data be broken down into **cases per year (2014-19) per hospital in your Trust, and the age groups of the patients involved.**

Answer
Walsall Healthcare NHS Trust

Note - Inpatient activity only. All admitted patients during relevant time (01/01/2014 - 30/11/2019) with a valid diagnosis code in positions 01-04.

- **How many cases of asthma have been recorded at each of your hospital sites in your Trust from in each calendar year from 2014 – 2019? Cases per year (2014-19) per hospital in your Trust, and the age groups of the patients involved.**

Asthma (J45*)	2014	2015	2016	2017	2018	2019 (TD)
Admissions	3331	4697	4524	4279	4831	4808
Age 0-18	276	433	404	409	416	336
Age 18-65	2084	3033	2961	2908	3336	3297
Age 65 and over	971	1231	1159	962	1079	1175

- How many cases of other breathing problems have been recorded at each of your hospital sites in your Trust from in each calendar year from 2014-19? Cases per year (2014-19) per hospital in your Trust, and the age groups of the patients involved.

Other (J* excluding J45*)	2014	2015	2016	2017	2018	2019 (TD)
Admissions	9753	13005	14505	15144	15820	13996
Age 0-18	717	1046	1241	1073	1051	1014
Age 18-65	2379	3195	3676	3962	4144	3878
Age 65 and over	6657	8764	9588	10109	10625	9104

447.19

Health Visitors for Walsall Healthcare trust

Dear Sir or Madam,

We are writing to you under the Freedom of Information Act 2000 to request the following information from Walsall Healthcare NHS Trust. We sent a similar request to Walsall Borough Council and were advised to contact you, as they informed us that Health Visiting services are provided by the Trust.

Regarding the clinical staff in your health visiting teams for Walsall Borough Council, on 1st February of 2016, 2017, 2018 and 2019:

1. How many whole time equivalent clinical staff (with caseloads) coded as health visitors, were employed in your health visiting teams? Please provide this information broken down by NHS pay band.

2. How many whole time equivalent clinical staff (with caseloads) who are NOT coded as health visitors were employed in your health visiting teams? Please provide this information broken down by NHS pay band.

3. How many children under-5 years of age were there in your local authority area? (also on 1st February of 2016, 2017, 2018 and 2019)

4. Currently, who is the responsible manager for the health visiting service? Please also provide their email address.

We have found that the attached table makes it clear exactly what we are requesting - please use this as a template.

Regarding the questions above:

- Please provide the information in tabular electronic form (e.g. excel, word, or txt file) in the attached format.

- If you are unable to provide data for 1st February, please provide it for the nearest available date and advise what this date is.
- For your answers, please either use the NHS Digital definition of health visitor or alternatively provide the definition that you are using in your answer.

Definitions:

Definition used by NHS Digital re. Health visitors (notes 28 and 29 from the nursing, midwifery and health visiting staff matrix of Occupation Code Manual):

28. Please ensure to code the following as Health Visitors:

- * qualified nurses/midwives who also hold a qualification as a Registered Health Visitor under the Specialist Community Public Health Nursing part of the NMC Register working directly with children and families;
- * qualified and registered Health Visitors who perform specific activities such as providing breastfeeding advice to parents;
- * family nurses working within the Family Nurse Partnership Programme who are qualified and registered as Health Visitors;
- * Sure Start Children's Centre qualified and registered named Health Visitors;
- * managers within a Health visiting team who hold a health visiting qualification and registration and are involved in clinical work or safeguarding.

29. Please ensure that the following employees are not coded as Health Visitors:

- * any person working in a health visiting team who does not hold a qualification and registration as a Health Visitor;
- * any person who holds a qualification and registration as a Health Visitor but is not employed in a role where this is a requirement;
- * managers within a health visiting team who hold health visiting qualification and registration but are not involved in clinical work or safeguarding.

Please see below the general definition for 'health visitor' from the Occupation Code Manual:

Health Visitor: an employee who holds a qualification as a Registered Health Visitor under the Specialist Community Public Health Nursing part of the NMC Register and who occupies a post where such a qualification is a requirement. Not below Agenda for Change Band 6.

Answer: Please see attached template. Available upon request.

448.19

Trust In-patient Vitamin K Antagonists (VKA) dosing/VTE risk assessment practices

Answer

Freedom of Information Request

**FOI requests into Trust In-patient Vitamin K Antagonists (VKA)
dosing/VTE risk assessment practices**

Name: ___Matthew Lewis_____

Position: __Medical Director_____

Acute Trust: Walsall Health Care Trust

Email: matthew.lewis@walsallhealthcare.nhs.uk

1. Does your Trust have an Anticoagulant Service for

- a) In-patients and out-patients NO**
- b) In-patients only NO**
- c) Outpatient only YES**

2. How many inpatient beds does your Trust have (at each site if more than 1

si 475

a)How many sites do you inpatient dose (if applicable)?

N/A

3. Who doses VKA for your inpatient population?

a) Doctors ** ☐

b) Advanced nurse practitioners ☐

c) Biomedical Scientists ☐

d) Clinical Nurse Specialists – if so are they nurse prescribers? ☐

e) Pharmacists - If so are they prescribers? ☐

f) Other – free text box

4. How many individuals who are not doctors perform this role in the groups specified above

N/A

5. If you dose warfarin for out-patients, how many warfarin patients do you currently dose?

1658

a. Which dosing software do you use – free text

RAID

6. Does your Trust run nurse led Anticoagulation clinics?

YES

7. If there are no nurse led clinics, who is responsible for management of patients taking VKA within your trust

N/A

8. Who completes your VTE Risk assessments?

a. Ward doctors *****

b. Nurses ☐

c. Pharmacists ☐

d. ANP ☐

e. Other ☐ - Please specify

9. What is your current VTE Risk assessment compliance rate?

92.26%

449.19

Equipment Details

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

1. *Could you confirm the name(s) of the manufacturer(s) of your ward based vital signs devices/observation machines?*

Answer: Phillips

2. *And the year of install?*

Answer: 2016

3. *Name of Manual Defibrillator Supplier*

Answer: Zoll

4. Name of AED Defibrillator Supplier

Answer: Zoll

5. Name of Rest ECG Supplier

Answer: Space Labs

6. Date of Install

Answer: 2006

7. replacement date

Answer: January 2020

8. Name and email address of your Medical Device Manager within your Trust

Answer: Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Ned Hobbs, Chief Operating Officer, email address; ned.hobbs@walsallhealthcare.nhs.uk

450.19

Women physiotherapy visits

Dear Freedom of Information Team,

I am writing to request information related to women's health physiotherapy statistics held by Walsall Healthcare NHS Trust under the above mentioned Act. I would like you to please provide me with the following information:

- The total number of visits made to your women's health physiotherapy department between 01 November 2018 and 01 November 2019.

Answer: 644

If the data is not available for the time period above, please provide data for the next available annual time scale.

451.19

Hydrogen Peroxide Vapour (HPV Fogging) or Ultraviolet (UVC) for decontamination

To whom it may concern,

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 you please provide me the following information?

1. Do you use Hydrogen Peroxide Vapour (HPV Fogging) or Ultraviolet (UVC) for decontamination?

Answer: No

2. What company/system do you use and how many?

Answer: N/A

3. Where these systems purchase via a tender or mini competition?

Answer: N/A

4. Where these systems purchased through a framework or direct?

Answer: N/A

5. Are you under contact with your current supplier?

Answer: N/A

6. What is the start and end date of contract?

Answer: N/A

7. Is the decontamination undertaken internally or through a managed service? If a managed service, please state which company:

Answer: Internal

8. Could you provide me with the contact details for the person/s responsible for the fields below?

- Infection Control

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 Lewis, Medical Director, email address; matthew.lewis@walsallhealthcare.nhs.uk and telephone number is 01922 721172.

Estates &

Facilities / Domestics

Answer Staff details below Director level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Ned Hobbs, Chief Operating Officer, email address; ned.hobbs@walsallhealthcare.nhs.uk and telephone number is 01922 721172.

Procurement

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 Performance & Finance, email address; russell.caldicott@walsallhealthcare.nhs.uk and telephone number is 01922 721172.

452.19

Indwelling urinary Catheter

Dear Sir/Madam,

Under the Freedom of Information Act, please could you provide answers to the following:

1. For each of the financial years 2015/16 to 2019/20:

a. How many of your patients had an indwelling urinary catheter (also called a Foley catheter)H placed or were admitted with a urinary catheter in situ?

Answer:

- 2015/16 – 266
- 2016/17 – Not recorded
- 2017/18 – Not recorded
- 2018/19 – 380
- 2019/20 – new reporting processes being set up to support consistent/accurate reporting

b. How many patients with an indwelling urinary catheter got a Catheter Associated Urinary Tract Infection (CAUTI)?

Answer: Please see below

c. How many cases were there of a primary CAUTI developing into a gram-negative bloodstream infection?

Answer:

The Trust has collected data on E.coli bacteraemia regarding focus of infection since April 2017 which may possibly partly answer 1c? Unable to provide data for years prior to 17/18 as we were not collecting data in this detail and also 19/20 as year not complete

However although urinary tract was primary focus this does not necessarily mean it is a CAUTI as some short term catheters may have been inserted when the patient became unwell and were in situ at time of blood culture but were not the source of the infection.

2017/18

Total 74 cases with focus urinary tract

28 had a catheter in situ at time blood culture was taken

9 cases were admitted with had long term catheter in situ

19 cases had short term catheter

2018/19

Total 115 cases with focus urinary tract

41 had a catheter in situ at time blood culture was taken

16 cases were admitted with had long term catheter in situ

25 cases had short term catheter

2. Do you track where CAUTIs originate i.e. the hospital Trust or in the community?

Answer: We do not track UTI's

3. Does your Trust follow guidance or protocols for:

a. The recognition, diagnosis and treatment of a CAUTI? If so, please indicate what these are.

Answer: Trust has a urinary catheter protocol

b. Urinary Catheter selection, insertion and ongoing care? If so, please indicate what these are.

Answer: Trust has a urinary catheter protocol

c. What processes does the Trust have in place to ensure practical adherence to the guidelines in a) and b)? How does the Trust monitor these processes?

Answer: Formulary in development and pilot of IT system to support audit

4. How many prescriptions of antimicrobials/antibiotics were dispensed in each of the financial years from 2015/16 to 2019/20 in relation to a CAUTI?

a. How many different antimicrobials/antibiotics were used?

Answer: This information is not recorded

b. Are these antimicrobials/antibiotics used to treat other infections?

Answer: N/A

453.19

Monitoring catheter acquired urinary tract infection (CAUTI) rates independently of the NHS Safety Thermometer information?

Dear Sir/Madam,

Under the Freedom on Information Act, could you provide answers to the following:

1. Does your Infection Prevention and Control team and/or your Microbiology team monitor catheter acquired urinary tract infection (CAUTI) rates independently of the NHS Safety Thermometer information?

Answer: No

2. What was the total cost to the Trust of CAUTIs in each financial year from 2015/16 to 2019/20?

Answer: This information is not recorded to this level

3. Is the Trust taking any measures to reduce the harm caused by catheter acquired urinary tract infections (CAUTIs)? If so, please describe these.

Answer:

- **Urosepsis training sessions delivered**
- **Male catheterisation, insertion and management, training is delivered Bi-monthly**

- **Supra pubic catheter training refreshed and delivered to community teams within localities.**
- **Training for Nurse Associates on catheter care and management delivered 14th December 2018.**
- **Care home link worker study session on continence care and management**
- **Urology pathway for General Practice completed and presented to GPs**
- **Assessment of bladder, bowel and continence training has been refreshed ready to re-commence delivering**
- **Catheter care solution included as part of catheter management training**
- **Catheter management e-learning package developed and completed by staff**
- **Monthly reporting and monitoring of A&E attenders with catheter related issues and UTIs.**
- **Monthly community catheter caseload reporting**
- **Catheter passport in use and audit in progress**
- **Bladder scanner business case in progress to support assessment and management and trial without catheters**
- **Community catheter clinic pilot ongoing**
- **Formulary under review**
- **Membership of Unplanned admissions consensus committee to engage in national work streams.**

a. Who is responsible and accountable for the implementation of these measures?

Answer: Bacteraemia reduction action plan group members – including continence, adult community deputy director, public health and infection control team

b. How long have the measures been in place and what success has been achieved?

Answer: Action plan and group been in place since 2016/17 and work ongoing and updated and developed since this time.

4. What technological solutions are currently used within the Trust to reduce the incidence of CAUTIs?

Answer: Vitalpac

a. If no, are there plans to introduce technological solutions?

Answer: Pilot of catheter IT system planned for 2020

b. If yes, which solutions have been reviewed, tested and implemented?

454.19

Growth Hormone

Dear Walsall Healthcare NHS Trust

I am writing to you today to formally request the following information with regards Growth Hormone treatments at Walsall Healthcare NHS Trust.

In your trust, in the past 12 months [latest 12 months available], how many patients have been treated with the following medications?

- Genotropin
- Humatrope
- Norditropin
- Nutropin
- Omnitrope
- Saizen
- Zomacton

Answer: No patients have been treated over the past 12 months.

455.19

System C Medway clinical and patient management system

Good morning,

Under the provisions of the FOI Act, could you please disclose the value of the contract awarded to System C in July 2019 for the provision of a System C Medway clinical and patient management system?

If in answering any question you believe that the answers would breach Section 35, please provide what information you are able to.

Answer: £5.46 million over 5 years

456.19

Number of people Walsall Pharmacy provide pharmaceutical services for.

Hi,

Please could you provide me with the yearly patient statistics for Walsall Pharmacy?

ie. The number of people Walsall Pharmacy provides pharmaceutical services this year (2018/2019).

Answer: Exemption 12 is applied. Cost of compliance exceeds appropriate limit. This query could potentially include every patient who arrive in A&E, all inpatient admissions + community based services due to the varying levels of service we provide to different clinical areas.

If you could provide a definition of 'pharmaceutical services' or what level of service i you require information for. We will endeavour to provide an answer.

457.19

Demand side response agreements

Dear FOI team,

I would be grateful if you could provide the following

1. Details of any demand side response (DSR) agreements between your organisation and National Grid, including the dates of those agreements

Answer: The Trust have not had any agreements in the given time period

2. Copies of any of the above agreements, or relevant letters/emails exchanged with National Grid if you do not hold a formal agreement documents

Answer: N/A

I am only seeking details/copies of agreements made in the last two years.

458.19

Personal Safety & Breakaway (PSB) training

Dear Colleague,

I would like to obtain information regarding personal safety training across various trusts and would appreciate your completion of the questions below.

Questions

When was Personal Safety & Breakaway (PSB) training or equivalent introduced at your Trust? (date) – if equivalent, please name the training.

Answer: Please see attached. Available upon request

For question 2: The Trust does not record incidents when physical intervention is used. If you still require a list of incidents please advise.

459.19

Haemonetics plasma device

Hi there,

Please can you tell me how many deaths have been reviewed by the trust or reported to a coroner in the past 10 calendar years where the hospital used a Haemonetics plasma device (any model number) on the patient before they died.

Answer: The Trust has not used a Haemonetics Plasma Device in the specified timeframe

Where the death was investigated please can you send me the report (redacted to remove personal details if necessary) and include the age, gender and diagnosis of the patient. If the death was reported to the coroner please include a copy of their report.

Answer: N/A

460.19 Breast Cancer

Good Afternoon,

I have a Freedom of Information request that I wonder if you could help me with in relation to the treatment of Breast Cancer

1. Within your health trust how many patients are currently [within the past 3 months] being treated with the following for breast cancer ?

Abemaciclib + aromatase inhibitor **Answer: 1**

Abemaciclib + Fulvestrant **Answer: 2**

Alpelisib + Fulvestrant

Atezolizumab **Answer: 3**

Bevacizumab

Eribulin **Answer: 3**

Everolimus + Exemestane **Answer: 1**

Fulvestrant as a single agent **Answer: 6**

Gemcitabine + paclitaxel

Lapatinib

Neratinib

Olaparib

Palbociclib + aromatase inhibitor* **Answer: 6**

Pertuzumab + trastuzumab + docetaxel **Answer: 4**

Ribociclib + aromatase inhibitor* **Answer: 4**

Ribociclib + Fulvestrant

Talazoparib

Herceptin SC **Answer: 23**

Herceptin IV

Transtuzumab biosimilar SC

Transtuzumab biosimilar IV

Trastuzumab emtansine **Answer: 3**

Other active systemic anti-cancer therapy **

*aromatase inhibitor eg. Anastrozole, Exemestane or Letrozole

**eg. docetaxel, vinorelbine or capecitabine as a single agent

2. How many patients are being treated for

2a Neo-adjuvant breast cancer;

Transtuzumab total SC

Transtuzumab total IV

Answer: Exemption 12 is applied. Cost of compliance exceeds appropriate limit. This would entail going through notes to determine who was adj and who was neo –adj.

2.b Adjuvant breast cancer;

Transtuzumab total SC

Transtuzumab total IV

Answer: As above

461.19

Agency Spend

Dear Sir/ Madam,

I would like to make a request under the freedom of information act.

For the months of 2019 between Jan – November could you please break down your off framework/ off payroll agency spend by cost (highest to lowest) by recruitment company.

Could this be completed separately for doctors and nurses.

Answer:

Doctors: The Trust does not go off framework. Nil

Nurses: The Trust has made some off-framework ad-hoc nursing agency bookings during this time period however this would not have been off-payroll or via a 3rd party recruitment company.
Nil

462.19
Sepsis

Dear NHS Trust FOI Officer,

I am writing to you under the Freedom of Information Act 2000.
Please can you supply me with a list of every patient death by sepsis over the last 10 calendar years (removing any person information that might identify the patient if necessary to comply with data protection laws).

Answer: The system of recording deaths changed to include the cause in November 2017.

2017	19	From November 2017. As only started recording from Nov 17
2018	70	1 st January to 31st December 2018
2019	64	1st January to May 17th 2019

If possible, this should include any internal investigation carried out by the trust, or any notes that give information on what treatment the patient was given before they died.

Answer: This information is not recorded to this level of detail on our system.

463.19
Homeless discharges

I am submitting a request for below information held by the trust under the Freedom of Information Act.

1. The total number of patients with no fixed abode discharged from your trust
2. I would like this data from November 2013 to November 2019
3. Please break it down by month
4. Please break it down by those that had been admitted and those that had not been admitted

Also, find an attached excel sheet with the same question for your convenience. Request you to acknowledge the receipt of this email and kindly fill your response in the excel.

Answer: Please see attached spreadsheet. Available upon request.

Please note, we are only able to go back as far as April 2014 as this was when Lorenzo was implemented.

We do not have a direct link in the data between A&E and Inpatients, therefore we have used the Admission flag in the A&E data to determine whether the patient was admitted. It is worth noting that this may not be reliably recorded by A&E staff.

464.19

Payments to Hill Dickinson LLP

I am looking for information about payments made by the Trust to the legal firm Hill Dickinson LLP. Please could you provide me with the following:

1. How much money has the Trust paid to legal firm Hill Dickinson LLP from 2007/8 to 2014/15? Please could you break the information down by financial year (2007/8, 2008/9, 2009/10, 2010/11, 2011/12, 2012/13, 2013/14, 2014/15), and state the specific reason for payments, as well as broadly setting out a category for it – NHS contracts, estates/property sales, commissioning, PFI, outsourcing, commercial and procurement, clinical negligence, pharmacy etc.

Answer: The Trust has no record of any payments to this firm.

465.19

Communications & Telephony Request

I would like to request the following information:

Please confirm the manufacturer of your telephony system(s) that are currently in place?

Answer: SpliceCom

When was the installation date of your telephony equipment?

Answer: 2016

Who maintains your telephony system(s)?

Answer: Switchshop Ltd

Please confirm value of the initial project and value of annual support/maintenance services (in £)?

Answer; £150,000

When is your contract renewal date?

Answer: January 2022

Please confirm the manufacturer of your Contact centre system(s) that are currently in place?

Answer: Splicecom

When was the installation date of your contact centre infrastructure?

Answer: January 2018

Who maintains your contact centre system(s)?

Answer: Switchshop Ltd

Please confirm value of the initial project and value of annual support/maintenance services (in £)?

Answer: £12,000 p.a

How many contact centre employees/agents do you have?

Answer: 8 Agents

When is your contract renewal date?

Answer: January 2020

Do you use Unified Communications or Collaboration tools such as Microsoft Skype for Business/ Cisco/Avaya/Mitel? If yes, what tools are you currently using?

Answer: Yes, Microsoft Teams

How many employees do you have overall within your organisation?

Answer: approx 4500

Who currently provides your calls and lines?

Answer: Switchshop Ltd

What is your current annual spend on calls and lines?

Answer: £54,000

When is your contract renewal date?

Answer: Rolling Contract

Are you using SIP or ISDN?

Answer: SIP

Do you use a wide area network?

Answer: Yes

**466.19
Cladding**

Dear FOI team,

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

1. Please state the total number of hospital buildings managed by your NHS Trust.

Answer: 5

2. Please state the total number of hospital buildings managed by your NHS Trust that have any type of exterior cladding.

Answer: 1

3. Of those, please state the total number that are known to have*:
 - a) Combustible cladding **Nil**
 - b) Aluminium composite material (ACM) cladding **Nil**
 - c) High-pressure laminate (HPL) cladding **Nil**
4. Please state the total number of hospital buildings with exterior cladding (any type) that have undergone cladding fire safety tests, since June 2017.

Answer: 1

5. Of all those that have been tested , please state the outcome of that test in the following categories:
 - a) Passed test
 - b) Failed test and remedial work completed
 - c) Failed test and remedial work ongoing
 - d) Failed test and remedial work not yet started

Answer: Fire performance should be judged on both fire resistance and reaction to fire. Rockspan panels have been tested/assessed to BS476 Part 22, for fire resistance and independently approved for reaction to fire by the Loss Prevention Council to LPS1181 and LPS1208 and by Factory Mutual to Standard 4880 for panels with non-combustible cores.

*There will be crossover in these categories (i.e. b. and c. will be subsets of a.)

If you need any further information from me in order to deal with my request, please call me on 020 7973 6228.

If you are encountering practical difficulties with complying with this request, please contact me as soon as possible (in line with your section 16 duty to advise and assist requesters) so that we can discuss the matter and if necessary I can modify the request.

Please send me the data requested in the form of an Excel spreadsheet or as a csv file.

467.19

Data sharing

Dear Sir/Madam,

1. Does this NHS Trust have, or has it ever had, an agreement with Experian, or any other credit agency, to share data?

Answer: No

2. If yes, please provide all such agreement documents. I would find it acceptable if you need to redact financial or personal information.

Answer: N/A

3. Are there, or have there ever been, any service-level agreements in place between this NHS Trust and the Home Office Immigration Enforcement to share data?

Answer: No

4. If yes, please provide all such SLAs. I would find it acceptable if you need to redact financial or personal information.

Answer: N/A

468.19

Processing of organisation staff

Dear Walsall Healthcare NHS Trust,

Please could you provide the following information:

How many joiners, movers, and leavers do you process per year?

Answer:

During 2019, the ESR processed;

- **771 Starter Forms**
- **659 Termination Forms**
- **226 Staff Transfer forms**

How many staff/whole time equivalents manage this process?

Answer: 1.6wte

Do you have an automated system to manage ESR?

Answer: No

Do you use a single sign on solution across the organisation to manage the accounts?
If so, which solution do you have?

Answer: No

How many people are in your organisation's data quality team?

Answer: We don't have a data quality team. we have got an IT data quality team that monitor patient data quality. The wte for that team is 4.00

469.19

Healthcare Operations department

Dear Walsall Healthcare NHS Trust,

Please could you provide the following information:

1. How many staff do you currently employ to undertake RTT validation tasks?

Answer: 5.6 WTE

2. How many more permanent or temporary staff are expected to be needed over the next 12 months?

Answer: Nil

3. How many open RTT pathways do you have currently?

Answer: 16302

4. How many staff do you currently employ to undertake clinical coding validation tasks?

Answer: Nil

5. How many more permanent or temporary staff are expected to be needed over the next 12 months?

Answer: Our Coding department currently have 3.2 FTE vacancies

6. Do you operate and utilise a live bed state system?

Answer: No

7. Has your organisation implemented any centralised or 24 hour bed management process, or have an automatic electronic utilisation data capture solution.

If so, which processes or solutions are in use?

Answer: The Trust has a 24 hr/ 7 days a week site operational team that manage beds and flow

8. What is the name, job title, and department contact email address of the primary decision maker for change control of the bed state process?

Answer: Staff details below Director Level are withheld under Section 40 (Personal Information). We can confirm that the Director responsible for this department is Karen Dunderdale, Director of Nursing, email address; karen.dunderdale@walsallhealthcare.nhs.uk

9. How many Urgent Care/Emergency Department staff have access to the spine lookup and validation service to verify demographics at the point of patient registration?

Answer: 249

470.19

Coding and activity information

Dear Walsall Healthcare NHS Trust,

Please could you provide the following information:

1. Have you audited your coding in the last year?

If so, what percentage of the records required re-coding or coding re-validation?

**Answer: Yes we had our Information Governance Audit January 2019 of 200 FCE's
17 Primary diagnosis codes were re coded
3 Primary procedures were recoded**

2. How many e-referrals do you process - per month and year?

Answer: Please see attached spreadsheet. Available upon request

3. How many ERS bookings are made - per month and year?

Answer: Please see attached spreadsheet. Available upon request

4. How many appointment cancellations are processed - per month and year?

Answer: Please see the attached spreadsheet. Available upon request

5. Do you have an automated process for updating General Practitioner information changes?

Answer: GP changes are updated automatically by our PDS connected PAS. Whenever a patient record is touched in our PAS the spine is checked to provide the latest data available.

5a. If not, how are the updates managed and what is the average delay in the updating process?

Answer: Not applicable

6. How many whole time equivalent team members process incorrectly delivered letters?

Answer; Nil. Incorrectly delivered items are redirected within the team as “business as usual”

471.19

Flu Peer Vaccinators

The requested information relates to peer-vaccinator schemes for the current and 2018/19 influenza vaccination programme within your organisation.

The specific questions/requests are given in this table.

		2018/19 Programme	2019/20 Programme
1	Does your occupational health team administer influenza vaccines to staff (yes/no)	Yes	Yes
2	Total number of staff, <i>not directly employed within occupational health</i>, that are able to administer influenza vaccines to staff (e.g. as peer vaccinators)	55 in total not directly employed by OH	55 in total not directly employed by OH
3	Total number of <i>Pharmacists</i> that are able to administer influenza vaccines to staff	2	1

4	Total number of <i>Pharmacy Technicians</i> that are able to administer influenza vaccines to staff	1	1
5	<p>Total number of staff who are</p> <ul style="list-style-type: none"> • Not directly employed within occupational health, • Not pharmacists, • Not pharmacy technicians, • Not medics/physicians, • Not nurses , <p>that are able to administer influenza vaccines to staff.</p> <p>(i.e. those able to work under a PGD. For example physiotherapists, radiographers, podiatrists, etc.)</p>	0	0

I have produced a table to provide clarity over the specific data being requested, and can be used in order to return the data to me.

472.19 Interim appointments

Dear Sir/Madam,

- 1) How many interim appointments were made at your organisation in the (i) 2017-18 and (ii) 2018-19 financial years where the daily rate you paid to the supplier was £500-per-day or more?

Answer: 5

Please note that by 'interim appointment' I'm referring to an individual on a fixed-term contract, hired to work in management.

- 2) For each such appointment, please provide me with (i) whether the appointment started in either the 2017-18 financial year or the 2018-19 financial year, (ii) the job title, (iii) whether the position was full or part-time, (iv) the name of the supplier, (v) the daily rate paid to the supplier, (vi) the total amount budgeted for and (vii) the length of the fixed-term contract on which they were hired.

Answer: Please note: The interim managers were paid via payroll, consequently there is no invoice stating the daily rate, so these are approx./average daily rates. There is no budget information available.

Staff details below Director level are withheld under Section 40 (Personal Information). Identifying the role could identify the individual.

Job Title**	Full/Part time	Supplier	Average Calculated Daily rate	Length of contract
Post 1	p	Paid via Payroll	£543	6 mths

Start year
2018/19

Job Title**	F/P	Supplier	Daily rate	Length of contract
Post 2	p	Paid via Payroll	£900	11 mths
Post 3	not known	Paid via Payroll	>£500	11 mths
Post 4	p	Paid via Payroll	£543	10 mths
Post 5	f	Paid via Payroll	£1,150	4 mths

473.19 Washrooms & Waste

Good afternoon,

Under the Freedom of Information act may I please be provided with the following detail?

In your specific location, how much is spent per year on the following:

- Disposable paper towels for washrooms

Answer: Circa 105,000

- Non-recyclable waste collection

Answer: £12408

- Washroom repairs

Answer: Works undertaken via SFS as part of an overall project agreement

- Unblocking of drains and water pipes

Answer: Circa £7,000 per annum

474.19

Non-small cell lung cancer (NSCLC)

I have a Freedom of Information request that I hope you'll be able to help me out with regarding the treatment of Lung cancer patients.

1. Within your health trust how many patients are currently [within the past 3 months] being treated with the following for Non-small cell lung cancer (NSCLC)

Afatinib - **2**

Alectinib

Atezolizumab + bevacizumab + carboplatin + paclitaxel - **1**

Atezolizumab mono

Bevacizumab

Brigatinib - **2**

Ceritinib

Crizotinib - **1**

Dacomitinib

Docetaxel monotherapy - **6**

Durvalumab - **1**

Erlotinib - **1**

Gefitinib - **2**

Gemcitabine - **2**

Necitumumab

Nintedanib with docetaxel

Nivolumab - **4**

Osimertinib

Paclitaxel

Pembrolizumab chemo in combination – **2**

Pembrolizumab monotherapy - **11**

Pemetrexed - **1**

Pemetrexed with carboplatin - **3**

Pemetrexed with cisplatin

Ramucirumab

Vinorelbine and cisplatin / carboplatin - 2

Other active systemic anti-cancer therapy

Palliative care

475.19

Rostering/Scheduling

Dear FOI Team,

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 provide me with:

1. What scheduling/rota software the trust uses for nursing staff?
2. When does the contract for the software outlined in the answer to Question 1 end?
3. Does the scheduling/rota software interface with any bank solution the trust uses and which solution is this?
4. What scheduling/rota software the trust uses for medical staff?
5. When does the contract for the software outlined in the answer to Question 4 end?
6. Does the scheduling/rota software interface with any bank solution the trust uses and which solution is this?
7. What scheduling/rota software the trust uses for AHPs?
8. When does the contract for the software outlined in the answer to Question 7 end?
9. Does the scheduling/rota software interface with any bank solution the trust uses and which solution is this?
10. What scheduling/rota software the trust uses for admin and clerical staff?
11. When does the contract for the software outlined in the answer to Question 10 end?
12. Does the scheduling/rota software interface with any bank solution the trust uses and which solution is this?

I would like the above information to be provided to me as an electronic copies in the following format. The column to the left hand side provides the example.

Nursing	AHPs	Medical
---------	------	---------

Software	End Date	Link to Bank	Software	End Date	Link to Bank	Software	End Date	Link to Bank
RotaMaster	01/01/2020	Yes, to Bank Partners						
EXAMPLE	EXAMPLE	EXAMPLE						
EXAMPLE	EXAMPLE	EXAMPLE						

Answer: Please see attached. Available upon request

476.19

Recruitment drives abroad

For each recruitment exercise please state:

1. The number of staff who were sent to the foreign country to facilitate the recruitment drive. Provide a breakdown of staff stating how many were your direct employees and how many were agency staff.
2. The total cost to the trust of the recruitment exercise including flights and accommodation.
3. The city and country that were visited as part of the exercise, and the dates that they were in the foreign country.
4. The type of staff (job description) that it was hoped would be recruited.
5. The number of staff from the recruitment drive that were recruited and started work at your Trust.

Please limit the search to just those where the bills for the recruitment drive were paid in any of the last three financial years (16/17), (17/18) and (18/19).

Answer: Please see attached spreadsheet. Available upon request.

477.19

Biologics and biosimilar prescribing in Rheumatology.

Dear Walsall Healthcare NHS Trust,

I have a Freedom of Information request regarding biologics and biosimilar prescribing in Rheumatology.

Could you please provide me with the following numbers of patients treated in the last 12 months with the following drugs.

Answer:

Drug	No of patients
• Abatacept [Orencia]	12
• Adalimumab [Amgevita]	6
• Adalimumab [Hulio]	0
• Adalimumab [Humira]	53
• Adalimumab [Hyrimoz]	64
• Adalimumab [Imraldi]	0
• Apremilast [Otezla]	1
• Baricitinib [Olumiant]	0
• Brodalumab [Kyntheum]	0
• Certolizumab [Cimzia]	19
• Dimethyl fumarate [Skilarence]	0
• Etanercept [Benepali]	3
• Etanercept [Enbrel]	7
• Etanercept [Erelzi]	65
• Golimumab [Simponi]	34
• Guselkumab [Tremfya]	0
• Infliximab [Flixabi]	0
• Infliximab [Inflectra]	3
• Infliximab [Remicade]	0
• Infliximab [Remsima]	0
• Ixekizumab [Taltz]	0
• Risankizumab [Skyrizi]	0
• Rituximab [MabThera]	3
• Rituximab [Rixathon]	38
• Rituximab [Truxima]	0

• Sarilumab [Kevzara]	2
• Secukinumab [Cosentyx]	15
• Tildrakizumab [Ilumetri]	0
• Tocilizumab [Ro Actemra]	28
• Tofacitinib [Xeljanz]	0
• Upadacitinib [Rinvoq]	0
• Ustekinumab [Stelara]	0

478.19

Tonsillectomy surgery on young adults and adults (16 years and over)?

1

Does your trust / hospital(s) offer Tonsillectomy Surgery which is undertaken in the Trust?

If the answer no, the FOI request ends here. Please just notify me that your trust / hospital(s) does not undertake this surgery.

Answer: Yes

If yes, please answer the following questions:

2a

Do surgeons in your trust / hospital(s) perform tonsillectomy surgery on children (under 16 years of age)?

Answer: Yes

2b

If the answer to 2a is 'yes', do they provide patients / parents of patients in this age group with an information sheet relating to their operation?

Answer: We provide patient information fact sheets from the Eido website.

2c

If the answer to 2b is 'yes' please, as well as completing these question, also send me a copy of the information sheet that is provided, even if it is only sometimes given to patients/parents.

Answer: Unable to do so; this is not owned by the Organisation – the Trust has access to the library of information factsheets. They are printed from Eido on a patient by patient basis and cannot be saved locally.

3a

Do surgeons in your trust / hospital(s) perform tonsillectomy surgery on young adults and adults (16 years and over)?

Answer: Yes

3b

If the answer to 3a is 'yes', do they provide patients in this age group with an information sheet relating to their operation?

Answer: We provide patient information fact sheets from the Eido website.

3c

If the answer to 3b is 'yes' please, as well as completing these question, also send me a copy of the information sheet that is provided, even if it is only sometimes given to patients (unless the same sheet given to both children/parents and to adult patients in which case please make that clear in your answer and just provide that sheet)

Answer: Same as under 16's

4

What advice is usually given to a) Children and b) Young Adults / Adult regarding diet immediately after tonsillectomy (ie for approximately the first week or so post surgery)

Answer:

- a. **As per Eido factsheet and any specific surgeon related instruction as per post op instructions.**
- b. **As per Eido factsheet and any specific surgeon related instruction as per post op instructions.**
- c.

Please provide the information requested in the form of PDF leaflets, or scanned images of information sheets

Carbon footprint and sustainability

- 1) Does your Trust measure its total carbon footprint? If so, what is it? Please provide in tCO₂e and specify the date of measurement.

Answer: The Trust does not measure its Carbon footprint , however it does report its annual energy consumption as part of its ERIC return to the NHS.

- 2) If your Trust has measured its total carbon footprint previously, what was it in:
- ☐ 2015-16
 - ☐ 2016-17
 - ☐ 2017-18
 - ☐ 2018-19

Please provide in tCO₂e.

Answer: N/A. See above

- 3) How many full-time equivalent (FTE) staff are employed by your Trust?

Answer: 3596.45 FTE

- 4) Does your Trust have any targets for reducing carbon emissions? If so, please outline.

Answer: SDMP will be released later this year

- 5) What percentage of your Trust energy consumption comes from fossil fuels?

Answer: This information is not recorded

- 6) Is your Trust taking any steps to reduce its energy consumption from fossil fuels? If so, please outline these steps.

Answer: N/A

- 7) What percentage of your Trust's vehicle fleet uses:

- ☐ Petrol or diesel vehicles Answer: **100%**
- ☐ Hybrid vehicles **0%**
- ☐ Electric vehicles **0%**

- 8) Does your Trust have a policy on reducing the use of single-use plastics (including for clinical and/or non-clinical items)? If so, please provide this policy.

Answer: Already use reusable sharps disposal units however there is no policy currently in place. SDMP to go live later in 2020.

9) Has your Trust received any funding to spend specifically on sustainability? If so, please provide the details.

Answer: No