

**FREEDOM OF INFORMATION
DISCLOSURE LOG – Quarter 1 2009/2010**

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Ref: 01/09

Mortuaries and Funerals

1. How many mortuary facilities are operated by your trust and where are these facilities located?

One, at Manor Hospital.

2. What is the storage capacity of each facility for the storage of human remains?

In the mortuary (69 fridge + 6 deep freeze + 8 extra large people) and additional 36 in purpose built temporary mortuary storage facility outside the mortuary (now permanent) = 119.

3. What excess capacity does your trust have for storage of human remains and what does this consist of ?

In purpose built temporary mortuary storage facility outside the mortuary (now permanent).

4. For each month during the last five years how many bodies were stored at each mortuary you operate?

Month	Total Deaths	Month	Total Deaths	Month	Total Deaths	Month	Total Deaths	Month	Total Deaths	Month	Total Deaths
Apr-04	130	Jan-05	177	Jan-06	172	Jan-07	172	Jan-08	161	Jan-09	176
May-04	126	Feb-05	153	Feb-06	148	Feb-07	194	Feb-08	138	Feb-09	127
Jun-04	149	Mar-05	173	Mar-06	169	Mar-07	166	Mar-08	162	Mar-09	142
Jul-04	140	Apr-05	142	Apr-06	162	Apr-07	144	Apr-08	159		
Aug-04	160	May-05	150	May-06	164	May-07	157	May-08	139		
Sep-04	115	Jun-05	130	Jun-06	164	Jun-07	139	Jun-08	132		
Oct-04	153	Jul-05	128	Jul-06	135	Jul-07	125	Jul-08	139		
Nov-04	140	Aug-05	139	Aug-06	165	Aug-07	140	Aug-08	124		
Dec-04	156	Sep-05	105	Sep-06	143	Sep-07	122	Sep-08	120		
		Oct-05	162	Oct-06	143	Oct-07	138	Oct-08	133		
		Nov-05	116	Nov-06	150	Nov-07	121	Nov-08	123		
		Dec-05	177	Dec-06	142	Dec-07	161	Dec-08	185		

5. Of the bodies currently stored at your mortuaries how long have bodies/human remains been stored and what was the reason for the retention of the remains?

On average 14 days and the reasons include funeral process, appointment system for registering death, GP's absence....

6. Does your trust have a policy on the length of time that bodies are stored and if a body is not claimed what arrangements / policy exists for the trust to carry out funeral arrangements and dispose of the unclaimed bodies ?

There is no policy related to the length of stay nor unclaimed body burial.

7. What facilities exist within each of your mortuaries for the long term storage of

human bodies in deep freeze and how many bodies are currently stored within your mortuary facilities in this way, please indicate at which mortuary you currently have such remains stored and the date of death of the body / person concerned and reason why the remains have been stored / frozen and what long term arrangements exist for the disposal of these remains?

We have deep freeze which can hold 6 bodies. We have one body in storage at the moment. The person died on 13/12/2008. There are no traceable relatives and the Trust is in the process of organizing burial.

8. Has the trust ever had to use emergency facilities to store human remains and if so when and in what circumstances has this occurred in the last 5 years and what emergency facilities were used ?

Not in last 5 years.

9. Has the trust ever used facilities such as a cold room / chapel / refrigerated hired containers or trucks to store bodies when you have run out of storage in your mortuary which is normally used to store bodies, if you have done this when and for how long and what facilities were used? (in last 5 years)

No.

10. How many burials/cremations has the trust had to organise and pay for broken down by year for the last five years?

2009	7
2008	5
2007	8
2006	5
2005	8

11. How much have the burials/cremations cost the trust broken down by year for the last five years?

2004/2005	£17,921.45
2005/2006	£18,499.90
2006/2007	£17,507.31
2007/2008	£22,796.29
2008/2009	£20,638.50

Total **£97,363.45**

12. In how many cases were no friends or relatives involved in the burials/cremations i.e. it wasn't the case that friends or relatives couldn't afford a burial/cremation but there were no friends or relatives to pay for a burial/cremation ?

Records are not kept as to whether friend / relatives were involved in the burials / cremations.

Ref: 02/09

Physiotherapists

1. Do the numbers in the 2008 census cover all the FTE physiotherapists undertaking 'standard' acute service work. I am not looking at the odd few FTE's but more significant numbers that could readily explain the deviation from the average trend. Please provide the total number of FTE qualified physiotherapists working on the trust site(s).

Yes but at the time of the census there may well be ongoing issues around vacancies. Present FTE 30

2. Are there any unusual factors due to the nature of services provided by the trust that would explain low numbers of staff (if this is the case)?

We do not at present accept direct referrals from local G P they refer to the Physiotherapist in the P C T.

3. What is the approximate split of FTE's working in in-patient and outpatient work and any other major areas of service (may be a combination of acute trust and PCT employees).

The split between outpatient activity and inpatient is approx 2:1 in favour of inpatient activity.

Ref: 03/09

Consultancy Services

Please be advised that the information for 2006/07 is not readily available as the Trust only categorised consultancy expenditure from the 2007/08 financial year.

Please also note that key points below:

- All Consultancy work over £10k in value is subject to a competitive tendering exercise
- Our £170million PFI hospital redevelopment has meant our use on Consultancy has been inflated over recent years and new hospital will open in 2010
- We have received external funding for some of the below expenditure

	2007/08	2008/09
Review of selected Specialty Services to improve contribution	£103,808.00	
Workforce Planning Programme	£56,601.00	
Finance Function Development Review	£54,727.88	
Service Transformation /Savings Programme Phase I		£456,538.69
Service Transformation /Savings Programme / Phase II		£1,065,516.65
Lean Strategy Development and Programme Management approach		£52,028.39
Consultant Job Planning		£5,000.00
Maternity services PbR review		£4,703.88
GUM & Family Planning Service Integration review		£4,500.00
PFI Related:		
Consultancy Fees	£1,142,943.00	£206,566

Ref: 04/09

Clinical Specimen Mis-Labeling

How many incidents were there in the Financial Year 2008/9 in your Trust where:

1. Samples were sent to the pathology department(s) and where there samples were either mislabelled or were deemed to having insufficient patient information?

For the period April 2008 – March 2009 we have 5 reported incidences of samples being mislabeled or having insufficient patient information.

2. Samples were mislabelled or poorly labelled when within your Trust's pathology department(s)?

There are no recorded incidences occurring between April 2008 & March 2009 due to samples being mislabeled or poorly labeled within the Pathology Department.

3. Mislabelling or poor labelling of clinical specimens at your Trust were later found to be having directly or indirectly related to a patient's death or in a significant delay in patient treatment (please breakdown if possible)?

For the period April 2008 – March 2009 none of the report incidences or mislabeling or poor labeling have been, either directly or indirectly, related to a patients death or caused a significant delay in patient treatment.

Ref: 05/09

Consultant microbiologist on-call activity and remuneration

Q) How many consultant microbiologists are employed by your Trust (number of staff and whole time equivalents)?

A) Two (23 PA's) i.e. 2.3 WTE

Q) Do they provide an on-call service?

A) Yes

Q) Is any on-call service provided within your Trust by your Trust alone or is it provided in association with another Trust or body? (and if there is another Trust or body please state their name(s))

A) By Trust alone

Q) Is the on-call provided only by microbiologists or are other staff (eg Infectious Diseases Physicians) included in the on-call arrangements?

A) Only by microbiologists

Q) Is the on-call provided only by consultant microbiologists or are other non-consultant ('junior') staff (e.g. Specialist Registrars) included in the on-call arrangements?

A) Only by consultant microbiologists.

Q) What is the frequency of the on-call commitment for the consultant microbiology staff (e.g. 1 in 4) and what proportion is as single medical person on-call and what proportion is covering another more junior person?

A) 1:2 – 100% consultants

Q) Does the on-call include all Infection Prevention and Control advice or is there on-call Infection Prevention and Control advice provided by others such as Infection Control Nurses/Officers?

A) Includes all infection prevention and control advice. No on-call ICN service provided.

Q) If there is Infection Prevention and Control advice provision by others what proportion of consultant on-call time is covered by the other staff?

A) Not Applicable

Q) What on-call category (category A or B) applies to your microbiology consultant on-call currently? Is it currently under review and if so was it the consultant(s) that requested the review or Trust management?

A) Category B – not under review

Q) What percentage enhancement (e.g. 3%, 8%) do the current arrangements make to the consultant pay?

A) 3%

Ref: 06/09
Obesity Surgery

I would like to know the age of the youngest person to have undergone obesity surgery in your hospital in the last two years.

The youngest person to undergo obesity surgery within Walsall Hospitals NHS Trust in the past 2 years was 18 years old.

I would like to know exactly what this surgery was, eg gastric band, and also when it was carried out.

The surgery undertaken was Gastric Bypass.

The information regarding when this surgery took place is withheld under Section 40, Part 2: Personal Information of the Freedom of Information Act. Disclosure of this information is exempt as releasing the date of the surgery will breach the Data Protection Act re: disclosing of third party information.

I would also like to know how many people under the age of a) 10 and b) 15 have undergone surgery for obesity in the last two years.

No one under the age of a)10 & b)15 has undergone bariatric surgery within Walsall Hospitals NHS Trust in the past 2 years.

Ref: 07/09

**Operation Waiting Times (appendix & fractured neck of femur)
January 2009**

1) The (a) mean; (b) median; and (c) longest time patients had to wait for an x-ray after being admitted via A&E.

For imaging of A&E patients - We do not routinely collect this data, therefore we are unable to give a response to question 1.

For the following two questions our information is what is recorded on the Patient Management System (PMS) and as PMS data records operation dates but NOT operation times, the length of stay is as recorded in overnight stays NOT hours and minutes.

2) The (a) mean; (b) median; and (c) longest time patients had to wait for an emergency appendix operation after being admitted.

5 patients with

- (a) 0.4 overnight stays,
- (b) 0 overnight stays,
- (c) 1 overnight stay

Patients defined within procedure codes as having Emergency Excision of Appendix as the first list procedure and the primary diagnosis within emergency admissions in January 2009.

3) The (a) mean; (b) median; and (c) longest time patients had to wait for an operation to repair a fractured neck of femur after being admitted.

32 patients

- (a) 1.78 overnight stays
- (b) 2 overnight stays
- (c) 11 overnight stays

Patients defined within procedure codes as having an operation to repair a fractured neck of femur as primary diagnosis and discharged in January 2009.

Please note that the '11 days' for 3c is an exception evidenced by the difference between both this and the median and mean values. This is likely to have been due to clinical reasons for waiting prior to a surgical intervention.

Ref: 08/09

Services Contracted Out

Are any of the following services contracted out to an external supplier, and if yes please provide additional information as requested:

Hospital Name: WALSALL MANOR

No of Beds: 552

Current Contract Type:	<u>NO</u>	<u>YES</u>	Expiry Date	Value of
			of Contract	Contract
Patient food Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2011	£811k
Staff Restaurant	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Coffee Shop	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Retail Shop	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Vending Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2011	£12k
Cleaning of Clinical Areas	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Cleaning of non Clinical Areas	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Portering Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Waste management	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2011	£225k
Laundry Management (Not off-site Laundering)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2011	£800k
Energy Management	<input type="checkbox"/>	<input checked="" type="checkbox"/>	30 years (part of 33 year PFI agreement)	
Building/Plant Maintenance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	30 years (part of 33 year PFI agreement)	

Which, if any of the above are you considering outsourcing in the near future?

NONE

Ref: 09/09

Car Parking Income since December 08.

Fees collected from staff parking and Visitor parking in the trust since December 2008 (the date when the VAT was reduced from 17.5% to 15%) I believe was the 5th.

Car Parking Income: December 2008 – June 2009

Visitors	£279942.69
Staff	£ 60912.64
TOTAL	<u>£340855.33</u>

The VAT reduction was applied from 1st December 2008

Confirmation of the amount paid during this period in form of VAT to Revenue and Collections related to the fees charged for parking.

Please be advised that the 15% VAT rate commenced on 1st December 2008.
The amount paid as VAT for the period December 2008 – June 2009 was:

£ 52128.30

Ref: 10/09

Pathogens

With reference to pathogens, how many breaches of biosecurity did you record in 06/07 and 08/09?

No biosecurity incidents have been recorded within our Pathology department in either 2006/7 or 2008/9

Please provide information as to what actual incidents/accidents occurred - i.e. whether a fault with a system was merely spotted, or whether pathogens were recorded as having made it past biosecurity.

N/A

Please provide this information broken down in terms of animal, human and, if applicable, plant pathogens.

N/A

In doing so, please also provide biosafety levels/rankings 1-4.

N/A

Ref: 11/09

Maternity Services & CQUINS

1. For the year 2008/9, how much of the additional £330m has your Trust a) received from your PCT and b) invested in maternity services?

The contract for Obstetrics services increased between 2007/08 and 2008/09 but it is not possible to determine the element of this that related to the governments announcement. The increase is dependent on activity levels and changes to tariffs between the years.

2. For the year 2008/9, what was the total expenditure on maternity services by your trust?

The total spend on Maternity Services for 2008/09 was £5,876,386. This excludes Medical Staffing as the split between Obstetrics and Gynaecology is not available.

3. For the year 2009/10, how much of the additional £330m has / will your trust be a) receiving from your PCT and b) investing in maternity services?

The contract for Obstetrics services increased between 2008/09 and 2009/10 but it is not possible to determine the element of this that related to the governments announcement. The increase is dependent on activity levels and changes to tariffs between the years.

4. For the year 2009/10, what is the total forecast expenditure on maternity services by your trust?

The total spend on Maternity Services for 2009/10 is forecast to be £6,055,436. This excludes Medical Staffing as the split between Obstetrics and Gynaecology is not available.

CQUINS:

1. Has your trust negotiated any CQUIN schemes with your PCT which include measures directly relating to improving the quality of maternity services?

CQUIN schemes are being finalised in terms of agreement of targets and measures – none noted at this stage directly related to maternity services.

2. If yes, please provide details of the CQUIN measures that relate to maternity services.

As the answer is no to Q1 we can't answer Q2

Ref: 12/09 & 13/09

Inpatient Emergency Bed Days by Age & PCT

The figures are for 07/08.

The PCT field of our inpatient data is primarily driven by the PCT of the patients GP. In most cases this will be the same as the PCT of residence of the patient, but not all cases.

In either case - the majority of patients treated in the Manor (especially as emergencies) will either be resident in Walsall or have a GP who is registered with Walsall PCT. The figures for other PCTs are where patients either do not live locally as noted by Ben (such as visiting family from elsewhere) or their GP is registered with another PCT.

Walsall Hospitals NHS Trust

Count of emergency Bed days by Age and PCT of patient

Pct	pctName	00 to 64	65 to 69	70 to 74	75 to 79	80 to 84	85+
5A7	BROMLEY PCT	0					
5A9	BARNET PCT	14					
5AT	HILLINGDON PCT	2					
5C3	CITY AND HACKNEY TEACHING PCT	1					
5C4	TOWER HAMLETS PCT	4					
5D8	NORTH TYNESIDE PCT	0					
5EM	NOTTINGHAM CITY PCT	7					
5F1	PLYMOUTH TEACHING PCT	1					
5F7	STOCKPORT PCT	1		0			
5FL	BATH AND NORTH EAST SOMERSET PCT	1					
5GC	LUTON PCT	0					
5HP	BLACKPOOL PCT	10					
5HX	EALING PCT		0				
5J2	WARRINGTON PCT						5
5J9	DARLINGTON PCT	2					
5JE	BARNESLEY PCT	0					
5JX	BURY PCT	5					
5KG	SOUTH TYNESIDE PCT	2	2				
5LA	KENSINGTON AND CHELSEA PCT	1			26		
5LC	WESTMINSTER PCT	0					
5LG	WANDSWORTH PCT	2					
5LQ	BRIGHTON AND HOVE CITY PCT				3		
5M1	South Birmingham	77	8	2	0	20	
5M2	Shropshire County	2		24			
5M3	Walsall	35417	9563	11675	19124	19017	29948
5M7	SUTTON AND MERTON PCT	1					
5MD	Coventry	5					
5MK	Telford and Wrekin	16		26			

5MV	Wolverhampton City	437	38	118	155	71	116
5MX	Heart of Birmingham	206	24	45	4	37	77
5N1	LEEDS PCT	0					
5N2	KIRKLEES PCT	2					
5N3	WAKEFIELD DISTRICT PCT	1					
5N4	SHEFFIELD PCT	1					
5N5	DONCASTER PCT	0					
5N7	DERBY CITY PCT	3			3		
5N8	NOTTINGHAMSHIRE COUNTY TEACHING PCT	14					
5N9	LINCOLNSHIRE TEACHING PCT			2			
5NC	WALTHAM FOREST PCT	5					
5ND	COUNTY DURHAM PCT	5				7	
5NE	CUMBRIA TEACHING PCT	2					
5NH	EAST LANCASHIRE TEACHING PCT	1				2	
5NJ	SEFTON PCT	0					
5NK	WIRRAL PCT	1	3				
5NM	HALTON AND ST HELENS PCT	1					
5NP	CENTRAL AND EASTERN CHESHIRE PCT	16					
5NR	TRAFFORD PCT	1					
5NT	MANCHESTER PCT	7					
5NV	NORTH YORKSHIRE AND YORK PCT	3					
5NY	BRADFORD AND AIREDALE TEACHING PCT	3					
5P1	SOUTH EAST ESSEX PCT	3					
5P2	BEDFORDSHIRE PCT	6					
5P3	EAST AND NORTH HERTFORDSHIRE PCT			3			
5P4	WEST HERTFORDSHIRE PCT			4		6	
5P5	SURREY PCT	13	11				
5P6	WEST SUSSEX PCT				4		
5P7	EAST SUSSEX DOWNS AND WEALD PCT	1					
5P8	HASTINGS AND ROTHER PCT	1					
5P9	WEST KENT PCT	2					
5PA	LEICESTERSHIRE COUNTY AND RUTLAND PCT	2					
5PC	LEICESTER CITY PCT	0					3
5PD	NORTHAMPTONSHIRE TEACHING PCT	14					
5PE	Dudley	272	38	37	59	10	9
5PF	Sandwell	1501	343	288	496	710	1523
5PG	Birmingham East North	401	146	51	127	201	380
5PH	North Staffordshire	13					
5PJ	Stoke on Trent Teaching	2					
5PK	South Staffordshire	2302	654	965	1373	1485	2714
5PL	Worcestershire	14		2			
5PM	Warwickshire	4	7				
5PP	CAMBRIDGESHIRE PCT	5			1		
5PT	SUFFOLK PCT	7	1				
5PX	MID ESSEX PCT						14
5QA	EASTERN AND COASTAL KENT PCT	8					
5QC	HAMPSHIRE PCT	0					
5QD	BUCKINGHAMSHIRE PCT	23					

5QE	OXFORDSHIRE PCT	15					
5QF	BERKSHIRE WEST PCT	0					
5QG	BERKSHIRE EAST PCT	1					
5QH	GLOUCESTERSHIRE PCT	13					3
5QJ	BRISTOL PCT	9					
5QK	WILTSHIRE PCT	0					31
5QL	SOMERSET PCT	9		6			
5QQ	DEVON PCT	2					
5QT	ISLE OF WIGHT NHS PCT	0					
6A2	Gwynedd	1					
6A3	Pembrokeshire	3					
6A4	Ceredigion	1					
6A6	Swansea	1					
6A8	Cardiff	6					
TAK	BEXLEY CARE TRUST	0					
TAM	Solihull Care Trust	24					3
X98		109	15	14	18		

Ref: 14/09

Directors Expenses (2007/8 & 2008/9)

Sum of GROSS AMOUNT (INCL. ERS COST) 2008 - 2009	ALLOWANCE - DEDUCTION DESCRIPTION													
DIRECTOR	Bus Miles Taxable	Busines s Miles NT	Lease Car Deduction	Lease Car Deduction Arrs	Lease Car Miles NT	Lease Car Taxable	Misc Travel NP NT	Phne Inst/Rent NP	Phone Charges NP NT OFF_CALLS	Subsistence Pay NP NT Lunch Allow	Subsistence Pay NP NT Meal Allow	Subsistence Pay NP NT Night Allow First 30	Grand Total	
Chief Executive	-	-	-	-	386.52	-	339.74	-	-	-	160.00	1,153.68	2,039.94	
Director of Finance	-	-	-	-	-	-	-	-	-	-	150.00	900.00	1,050.00	
Medical Director	-	215.18	-	-	-	-	2,812.10	-	-	-	-	625.00	3,652.28	
Director of Human Resources	-	387.17	-	-	-	-	239.88	-	-	-	-	-	627.05	
Director of Development	-	13.99	-	-	-	-	212.01	-	-	-	-	-	226.00	
Director of Nursing / Chief Operating Officer	-	453.68	-	-	-	-	37.00	-	-	-	-	55.00	545.68	
Director of Performance	-	81.00	-	-	-	-	315.00	-	-	-	-	55.00	451.00	
Director of Development	-	13.20	-	-	-	-	126.69	-	-	-	-	-	139.89	
Director of Estates / PFI	-	-	-	-	-	-	46.02	-	-	-	-	-	46.02	
Grand Total	-	1,164.22	-	-	386.52	-	4,128.44	-	-	-	310.00	2,788.68	8,777.86	

Sum of GROSS AMOUNT (INCL. ERS COST) 2007 - 2008	ALLOWANCE - DEDUCTION DESCRIPTION												Grand Total
DIRECTOR	Bus Miles Taxable	Business Miles NT	Lease Car Deduction	Lease Car Deduction Arrs	Lease Car Miles NT	Lease Car Taxable	Misc Travel NP NT	Phne Inst/Rent NP	Phone Charges NP NT OFF_CALLS	Subsistence Pay NP NT Lunch Allow	Subsistence Pay NP NT Meal Allow	Subsistence Pay NP NT Night Allow First 30	
Chief Executive	-	185.00	-	-	-	-	1,681.54	-	-	-	53.47	686.65	2,606.66
Director of Finance	-	247.51	-	-	-	-	27.50	-	-	-	-	-	275.01
Medical Director	-	97.52	-	-	-	-	-	-	-	-	10.40	55.00	162.92
Director of Human Resources	-	612.56	-	-	-	-	379.80	-	-	-	-	-	992.36
Director of Development	-	-	-	-	-	-	-	-	-	-	-	-	-
Director of Nursing / Chief Operating Officer	-	221.54	-	-	-	-	-	-	-	-	-	583.36	804.90
Director of Performance	-	-	-	-	-	-	-	-	-	-	-	-	-
Director of Development	-	-	-	-	-	-	-	-	-	-	-	-	-
Director of Estates / PFI	-	-	-	-	-	-	85.70	-	-	-	12.40	-	98.10
Grand Total	-	1,364.13	-	-	-	-	2,174.54	-	-	-	76.27	1,325.01	4,939.95

Ref: 15/09

Knowledge & Skills Framework (KSF) & Appraisals

- 1) a) Does your trust have a named board member responsible for ensuring the KSF is applied effectively?

Sue Wakeman – Director of Human Resources

- b) If your answer is no, why has this action not been taken?

- 2) Does your trust produce regular board level reports on the KSF about the extent to which it is being used?

Quarterly Report goes to CMG as part of our IPDR Report. In addition the Board receives information on appraisal on a quarterly basis as part of our HR Workforce Performance Report.

- 3) What percentage of your staff on Agenda for Change pay scales have a KSF post outline?

All AFC posts have outlines

- 4) What percentage of your staff on Agenda for Change pay scales have received a KSF development review over the last 12 months?

73% of all staff have received an appraisal in the last 12 months. 70% of staff on AFC received an appraisal in the last 12 months. We do not currently have accurate data to confirm if all utilised the KSF.

- 5) What percentage of your staff on Agenda for Change pay scales have received a KSF personal development plan over the last 12 months?

All staff who are appraised have a PDP as part of their annual appraisal – refer to question 4 above.