

## Freedom of Information Act Published on Trust Website – November 2013

FOI Number	Questions and Responses
FOI13 074	<p>Please provide the following information:            We would be grateful for the following information under the above act (in the period 2011-2012)</p> <p>1] How many deliveries of babies took place at your hospital in 2011-12? <b>[1,297]</b></p> <p>2] How many babies were delivered vaginally? <b>[1,026]</b></p> <p>3] How many were delivered by forceps and ventouse respectively? <b>[Forceps - 69, Ventouse - 79]</b></p> <p>4] How many Episiotomies were performed at your hospital? <b>[170]</b></p> <p>5] How many third and fourth degree perineal tears occurred ? <b>[Third – 14, Fourth - 0]</b></p> <p>6] Which scissors are used for performing episiotomy? <b>[ Curved episiotomy ]</b></p> <p>7] Are the episiotomy scissors single use or reusable? <b>[ Re-useable, autoclaved ]</b></p> <p>8] Are the birth packs used single use or disposable? <b>[ Disposable packed scissors ]</b></p> <p>9] How many third and fourth degree perineal tears took place in the context of normal delivery? <b>[Third – 11]</b></p> <p>10] How many third and fourth degree perineal tears took place in the context of forceps delivery ? <b>[0]</b></p> <p>11] How many third and fourth degree perineal tears took place in the context of ventouse delivery ? <b>[Third - 3]</b></p> <p>12] How many third and fourth degree perineal tears took place in patients given an episiotomy? <b>[Third - 2]</b></p> <p>13] How many third and fourth degree perineal tears took place in patients having spontaneous perineal tears ?</p>

	<p><b>[ 9 ]</b></p> <p>14] How many women were readmitted to hospital for breakdown of perineal wound? (ICD10 code O90.1-disruption of perineal obstetric wound) <b>[1]</b></p> <p>15] How many of these readmissions were for third and fourth degree perineal tears? <b>[0]</b></p> <p>16] Do you routinely perform endoanal ultrasound in the postpartum period for women who have a third/fourth degree perineal tear? <b>[ No ]</b></p> <p>17] Do you routinely perform anorectal manometry for women who have had a third/fourth degree perineal tear? <b>[ No ]</b></p> <p>18] How many women had a secondary repair of obstetric anal sphincter injury? <b>To answer this question would require manual examination of patients notes which is personal data as defined under the Data Protection Act 1998 and is therefore exempt under s.40 (2) of the Freedom of Information Act 2000.</b></p> <p>19] How many women underwent an elective caesarean section in a subsequent pregnancy due to a previous third/fourth degree tear? <b>[1]</b></p> <p>20] How many women developed a fistula/faecal incontinence due to third/fourth degree perineal tear? <b>[0]</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 160	<p>Please provide the following information:</p> <p><u>PBX System Maintenance</u></p> <p>1. Who is the Manufacturer and what is the model of your current PBX system?  <b>Response – Siemans ISDX</b></p>

2. Who is your current supplier / maintenance Provider?

**Response - BT**

3. What is the contract value? Please state if it is Per Annum or Total

**Response – No contract.**

4. What is the duration of this contract?

**Response – N/A**

5. When does the contract expire?

**Response – N/A**

6. What is the number of users/Extensions?

**Response – 700 approximately (exact number unknown)**

7. How many Sites?

**Response - 1**

8. Who is the person responsible for this contract? Please also provide contact phone number and email address.

**Response - Names of individual members of staff are personal data as defined in the Data Protection Act and are therefore exempt under section 40(2) of the Freedom of Information Act. However, we can advise that the person with overall responsibility is Felicity Greene, Executive Director of Strategic Planning and Commercial Development. Contact information is available via: [www.iow.nhs.uk](http://www.iow.nhs.uk).**

9. Are there any plans in the next two years to upgrade this system?

**Response - No**

LAN/WAN/Network Maintenance

10. Who is the Manufacturer(s) of your LAN WAN network?

**Response - Cisco**

11. Please provide me with a breakdown of the equipment that makes up your LAN / WAN  
**Response – This information is exempt under s.31 of the Freedom of Information Act 2000.**

12. Who is your current supplier / maintenance Provider?  
**Response - BTiNet**

13. What is the contract value? Please state if it is Per Annum or Total  
**Response – No Contract**

14. What is the duration of this contract?  
**Response – N/A**

15. When does the contract expire?  
**Response – N/A**

16. What is the number of users?  
**Response – 4467 active users**

17. How many Sites?  
**Response - 15**

18. Who is the person responsible for this contract? Please also provide contact phone number and email address.  
**Response - Names of individual members of staff are personal data as defined in the Data Protection Act and are therefore exempt under section 40(2) of the Freedom of Information Act. However, we can advise that the person with overall responsibility is Felicity Greene, Executive Director of Strategic Planning and Commercial Development. Contact information is available via: [www.iow.nhs.uk](http://www.iow.nhs.uk).**

19. Are there any plans in the next two years to upgrade this network  
**Response – It is continually upgraded.**

**Please note that this response does not constitute as consent for direct marketing.**

**A copy of this response will be published on the Trust website.**

FOI13 280

Please provide the following information:

1) How many people in the area covered by your Trust received Electro-Convulsive Therapy (ECT) each year for the past five years?

**Response –**

		<b>Total</b>		<b>Total In-patients and Out-patients for year</b>
<b>2008/09</b>	In-Patient	32		
	Out-patient	11	<b>2008/09</b>	43
<b>2009/10</b>	In-Patient	22		
	Out-patient	12	<b>2009/10</b>	34
<b>2010/11</b>	In-Patient	28		
	Out-patient	18	<b>2010/11</b>	46
<b>2011/12</b>	In-Patient	35		
	Out-patient	20	<b>2011/12</b>	55
<b>2012/13</b>	In-Patient	35		
	Out-patient	19	<b>2012/13</b>	54

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2) How many times did day patients attend a hospital or clinic for ECT in 2011 and in 2012? Was it every month, which would equate to 6 times a year, or was it every week, which would be 52 times per year? Please also include inpatients who were in hospital voluntarily or involuntarily.

**Response –**

**The number of times and frequency a patient attends for ECT varies according to the individual's need. The figures below show the total number of clinic attendances for each year and the split between in and out-patient attendances.**

<b>ECT Clinic Attendances</b>			<b>Total In-patients and Out-patients for year</b>	
		<b>Total</b>		
2010/1				
1	Out-Patient	71		
	In-Patient Formal	27		
			<b>2010/1</b>	
	In-patient Informal	75	<b>1</b>	173
2011/1				
2	Out-Patient	57		
	In-Patient Formal	57		
			<b>2011/1</b>	
	In-patient Informal	65	<b>2</b>	179
2012/1				
3	Out-Patient	46		

In-Patient Formal	45		
		<b>2012/1</b>	
In-patient Informal	73	<b>3</b>	164

3) How many times was ECT administered to day patients and inpatients in 2011 and in 2012? For example, if one session involved 3 shocks, and there were 50 people receiving ECT in 1 year, the total for that year would be 150 administrations.

**Response –**

**We are unable to provide a response to Question 3 because it would involve a manual examination of patients' records. This would therefore constitute personal data as defined within the Data Protection Act 1998 which is subsequently exempt under s.40 (2) of the Freedom of Information Act 2000.**

4) What is the cost of one session of ECT administered to 1 patient.

**Response –**

**Our ECT service is managed by staff from our inpatient unit and whilst staff are assigned to the clinic, utilisation of available clinic slots is irregular according to demand. We would need to examine individual patient records to identify actual time in clinic in order to split staff time between ECT clinic and other inpatient duties. We are therefore unable to provide a response to this question as it is exempt under s.40 (2) of the Freedom of Information Act 2000.**

**Please note that this response does not constitute as consent for direct marketing.**

**A copy of this response will be published on the Trust website.**

FOI13 292

Please provide the following information:

1. The number of current consultant vacancies in your organisation broken down by specialty and duration of vacancy.

2.

**Response –**

**Acute:**

Elderly Medicine	x1 – Active vacancy since Oct 2012
Gastroenterology	x1 – Active vacancy since Oct 2012
Haematology	x2 – Active vacancy since Sep 2012
Histopathology	x1 – Active vacancy since Aug 2012
Palliative Medicine	x1 – Active vacancy since Mar 2013
Radiology	x1 – Active vacancy since Aug 2013

**Planned:**

Colorectal Surgery	x1 – Active vacancy since Jan 2013
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Please note that these are active vacancies which have been advertised and candidates sought.

2. The number of 'frozen' consultant posts, that is those posts which have been vacated in the last 24 months which you have decided not to refill.

**Response – none**

3. The number of post CCT fellowships or other non-standard CCT posts you have advertised in the past 24 months.

**Response – none**

**Please note that this response does not constitute as consent for direct marketing.**

**A copy of this response will be published on the Trust website.**



FOI13 329

Please provide the following information:

1. The number of scheduled operations that have been cancelled in each of the past three financial years (2010-2011, 2011-2012 and 2012-2013) due to bed shortages (example codes may be 2.1 ICU/HDU beds unavailable and 2.2 Ward beds unavailable) and a breakdown of the hospitals at which the cancellations occurred.

**Response –**

This Trust operates a single hospital serving an island community.

Cancelled operations with reasons relating to 'Bed shortages'

2010-11	2011-12	2012-13
45	141	138

2. For the same three financial years, the number of scheduled operations that were cancelled because of staff shortages (example codes may be 2.5 Surgeon unavailable - leave, 2.6 Surgeon unavailable - other, 2.7 Anaesthetist unavailable - leave, 2.8 Anaesthetist unavailable - other and 2.9 Theatre staff unavailable), again broken down by hospital.

**Response –**

This Trust operates a single hospital serving an island community.

Cancelled operations with reason relating to 'staff shortages'

2010-11	2011-12	2012-13
573	300	359

This increases to 577 306 368 if 'staff shortages' include prison officers not being available to escort patients. (Beyond hospital control)

3. The number of beds operating in each of the trust's hospitals for each of the past five financial years

**Response –**

	<p>This Trust operates a single hospital serving an island community.</p> <p>The number of general beds (excluding Maternity &amp; Mental Health) available at this hospital can vary, bringing contingency beds into service at need. Some wards have been open weekdays only for parts of the period requested and it is unclear how this would be shown in the figures. A base figure would be in the region of 260.</p> <p><b>2008 – 2009 – Information not held</b>  <b>2009-2010 - 279</b>  <b>2010-11 - 254</b>  <b>2011-12 - 254</b>  <b>2012-13 - 242</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 358	<p>Please provide the following information:</p> <p>I am interested in how hospital guidelines on prophylactic antibiotics in primary joint arthroplasty vary throughout the country.</p> <p>As the information officer for your trust, I hope you can provide me with a copy of your trust’s antibiotic guidelines for elective arthroplasty (hip, knee and shoulder).</p> <p><b>Response – please see attached guidelines</b></p> <p>I am specifically looking for the following information:</p> <ol style="list-style-type: none"> <li>1. Which antibiotic(s) are given at induction and at what dose(s)</li> </ol> <p><b>Response – see above</b></p> <ol style="list-style-type: none"> <li>2. Any further doses of prophylactic antibiotics specified by the guidelines, given in theatre or in the post-operative period.</li> </ol>

	<p><b>Response – see above</b></p> <p>3. The same information as above for patients who are penicillin allergic.</p> <p><b>Response – see above</b></p> <p>4. The same information as above for patients who have a previous MRSA history or those who are known to be MRSA colonized.</p> <p><b>Response – No change</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 359	<p>Please provide the following information:</p> <p>1. Please can you indicate what type of NHS Trust you are, eg Acute, Foundation, Mental Health, etc</p> <p><b>Response – Please see the below paragraph in this letter.</b></p> <p>2. How many staff in total does the trust employ (whole time equivalent and headcount)?</p> <p><b>Response – Current FTE: 2658.62                      Current Headcount: 3122</b></p> <p>3. A structure chart for your information governance team, to include job titles and banding</p> <p><b>Response – Please see attached.</b></p> <p>4. Which team processes requests for information eg FOI, DPA</p> <p><b>Response – The Information Governance team.</b></p> <p>5. Which directorate is Information Governance in, and who has overall responsibility for IG, is this person a board member?</p> <p><b>Response – Information Governance falls within the responsibility of the Foundation Trust Programme Director/Company Secretary, who is a board attendee. You may wish to visit our website where some of this information is readily available: <a href="http://www.iow.nhs.uk">www.iow.nhs.uk</a></b></p>

	<p>6. Please give the job titles for the following: Data Protection Officer, SIRO and Caldicott Guardian  <b>Response – Data Protection Officer: Information Governance Officer See structure provided for question 3.</b>  <b>SIRO: Foundation Trust Programme Director/Company Secretary</b>  <b>Caldicott Guardian: Executive Medical Director</b></p> <p>7. Is information governance included in corporate induction?  <b>Response – Yes.</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 362	<p>Please provide the following information:</p> <p>Could you please supply me with a list of the agencies/suppliers you currently use for Medical Locums? Also, for each one, please let me know which professionals they supply to you - Doctors / Nurses / Allied Health Professionals / Health Sciences Services / non-clinical Staff – and if you have any of the following agreements in place:</p> <ul style="list-style-type: none"> <li>- Master Vendor Solution</li> <li>- Neutral Vendor Solution</li> <li>- Tier 1 supplier</li> <li>- Tier 2 supplier</li> <li>- S.L.A. (Service Level Agreements)</li> </ul> <p><b>Response – Please see attached spreadsheet detailing agencies that have SLA’s with us.</b></p> <p>I would be grateful if for each of these agreements you could list the dates they commenced started and the duration (i.e. do they have a review date or they on-going?)  <b>Response – Please see attached spreadsheet.</b></p>

	<p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 364	<p>Please provide the following information:</p> <p>1. How many In-patient Wards do you have?  <b>Response – 15 (including Maternity, NICU, Childrens and Mental Health)</b></p> <p>2. Of these, how many wards have ceiling tiles installed in the bed areas?  <b>Response – None of the above</b></p> <p>3. If they do not have tiles are there plans to change to install in the future?  <b>Response – No immediate plans to install tiles</b></p> <p>4. If they have tiles are they of a high specificity for sound absorbing?  <b>Response – N/A</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 373	<p>Please provide the following information:</p> <p>I would like to request the following under the Freedom of Information Act (2000), specifically relating to expenditure on artwork and arts managers and co-ordinators.</p> <p>1. The amount spent on artwork by the hospital since January 2010. Please can I have breakdowns by year (financial or calendar, whichever is easiest to source), as well as the cost and name of each piece of artwork.</p> <p><b>Response</b>  <b>The information relates to the Years 2012 and 2013 being the years that the loW NHS Trust has been in formation. For the Years 2010 and 2011 when the Trust was part of the loW PCT the enquiry should be</b></p>

	<p>directed to NHS England the body who is now responsible for this information.  During the period 2012 and 2013 The IoW NHS Trust has spent no money from its Revenue Funding. It has spent monies from its Capital and Charitable Funds budgets as follows:</p> <p>2012. £ 3,500. Set of 14 woodblock prints 'Fourteen Views of the Isle of Wight' for the East Cowes Health Centre.  £ 1,600. For 2 paintings 'Cloud-Skyscape' and 'Seascape' for the Labour Ward – Still-birth suite.  Total for the Year: £ 5,100.</p> <p>2013. £ 5,000. For Memorial Sculpture for the IoW Workhouse Burial Ground.  £ 750. For 2 benches for the IoW Workhouse Burial Ground.  £ 2,500. For Organ Donor Recognition Panel.  £ 500. For the printing of set of 84 photographic prints by James Dore from the IoW Heritage archive for ward bedrooms.  £ 2,000. For 4 Mosaic panels ' Isle of Wight Landscape – the Downs – 3 panels' and 'Water Lilies and Pond' for Seagrove Mental Health Intensive Care Garden.  Total for the Year: £ 10,750.</p> <p>2. The number of arts managers and co-ordinators employed by the hospital, and their annual salaries (ie. which NHS pay grade are they on).</p> <p><b>Response –</b>  <b>The IoW NHS Trust employs one person full-time to manage its department Healing Arts. The salary grade is 8a.</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 376	<p>Please provide the following information:</p> <p>1) The percentage of fresh meat purchased by your organisation or its sub-contractors that is of British origin.  <b>Response – 100%</b></p> <p>2) The percentage of frozen meat purchased by your organisation or its sub-contractors that is of British origin.  <b>Response – 100%</b></p>

3) The percentage of meat-related products purchased by your organisation or its sub-contractors that is of British origin.

**Response - Our contractor advises that all the meat related products are sourced from the UK.**

4) Whether you require your suppliers to only supply the organisation with fresh meat of British origin.

**Response – The [Isle of Wight NHS Trust](#), has a contract in place with WA Foods for the supply of Fresh Meat, Poultry, Cooked Meats, Fresh Pies and Sausages. This Contract was arranged by Solent Supplies who accessed the NHS Supply Chain Contract No. 2012/S 126-208885 on behalf of the Trust. This contract does not include the provision of Frozen products.**

**The contract includes the following information:-**

***“The Contractor must comply with the requirements of the UK Food Safety (General Food Hygiene) Regulations 1995, Food Safety Act 1990 (Amendment) Regulations 2004 and the General Food Regulations (2004) Guidance and other relevant food legislation. All products must meet Food Safety Authority Salt, Fat and Sugar guidelines.”***

**Should further information be required the requester will need to make a separate request to NHS Supply Chain or the Business Services Authority (BSA) with the questions they would like NHS Supply Chain to answer. Contact details for the BSA are:-**

**Information Governance Manager**

**NHS Business Services Authority**

**Stella House**

**Goldcrest Way**

**Newburn Riverside**

**Newcastle Upon Tyne**

**NE15 8NY**

**Tel 0191 2035351**

**Fax 0191 264 5281**

**Web [www.nhsbsa.nhs.uk](http://www.nhsbsa.nhs.uk)**

**Email [nhsbsa.foirequests@nhs.net](mailto:nhsbsa.foirequests@nhs.net)**

5) Whether you require your suppliers to only supply the organisation with frozen meat of British origin.  
**Response – The [Isle of Wight NHS Trust](#), has a contract in place with WA Foods for the supply of Fresh Meat, Poultry, Cooked Meats, Fresh Pies and Sausages. This Contract was arranged by Solent Supplies who accessed the NHS Supply Chain Contract No. 2012/S 126-208885 on behalf of the Trust. This contract does not include the provision of Frozen products.**

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6) Whether you require your suppliers to only supply the organisation with meat related products of British origin.  
**Response – The [Isle of Wight NHS Trust](#), has a contract in place with WA Foods for the supply of Fresh Meat, Poultry, Cooked Meats, Fresh Pies and Sausages. This Contract was arranged by Solent Supplies who accessed the NHS Supply Chain Contract No. 2012/S 126-208885 on behalf of the Trust. This contract does not include the provision of Frozen products.**



The contract includes the following information:-

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Email [nhsbsa.foirequests@nhs.net](mailto:nhsbsa.foirequests@nhs.net)

7) Whether you require your suppliers to only supply the organisation with milk of British origin.

***Response – “The Contractor must comply with the requirements of the UK Food Safety (General Food Hygiene) Regulations 1995, Food Safety Act 1990 (Amendment) Regulations 2004 and the General Food Regulations (2004) Guidance and other relevant food legislation. All products must meet Food Safety Authority Salt, Fat and Sugar guidelines.”***

Should further information be required the requester will need to make a separate request to NHS Supply Chain or the Business Services Authority (BSA) with the questions they would like NHS Supply Chain to answer. Contact details for the BSA are:-

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Email [nhsbsa.foirequests@nhs.net](mailto:nhsbsa.foirequests@nhs.net)**

8) Whether you require your suppliers to only supply the organisation with milk-related products of British origin.  
**Response – “*The Contractor must comply with the requirements of the UK Food Safety (General Food Hygiene) Regulations 1995, Food Safety Act 1990 (Amendment) Regulations 2004 and the General Food Regulations (2004) Guidance and other relevant food legislation. All products must meet Food Safety Authority Salt, Fat and Sugar guidelines.*”**

**Should further information be required the requester will need to make a separate request to NHS Supply Chain or the Business Services Authority (BSA) with the questions they would like NHS Supply Chain to answer. Contact details for the BSA are:-**

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Email [nhsbsa.foirequests@nhs.net](mailto:nhsbsa.foirequests@nhs.net)**

9) Whether your contracts with organisations that provide catering services or other food related services to your organisation include a clause requiring them to only use/buy British fresh meat

**Response – The [Isle of Wight NHS Trust](#), has a contract in place with WA Foods for the supply of Fresh Meat, Poultry, Cooked Meats, Fresh Pies and Sausages. This Contract was arranged by Solent Supplies who accessed the NHS Supply Chain Contract No. 2012/S 126-208885 on behalf of the Trust. This contract does not include the provision of Frozen products.**

**The contract includes the following information:-**

***“The Contractor must comply with the requirements of the UK Food Safety (General Food Hygiene) Regulations 1995, Food Safety Act 1990 (Amendment) Regulations 2004 and the General Food Regulations (2004) Guidance and other relevant food legislation. All products must meet Food Safety Authority Salt, Fat and Sugar guidelines.”***

**Should further information be required the requester will need to make a separate request to NHS Supply Chain or the Business Services Authority (BSA) with the questions they would like NHS Supply Chain to answer. Contact details for the BSA are:-**

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10) Whether your contracts with organisations that provide catering services or other food related services to your organisation include a clause requiring them to only use/buy British frozen meat.

**Response – The [Isle of Wight NHS Trust](#), has a contract in place with WA Foods for the supply of Fresh Meat, Poultry, Cooked Meats, Fresh Pies and Sausages. This Contract was arranged by Solent Supplies who**

accessed the NHS Supply Chain Contract No. 2012/S 126-208885 on behalf of the Trust. This contract does not include the provision of Frozen products.

The contract includes the following information:-

*“The Contractor must comply with the requirements of the UK Food Safety (General Food Hygiene) Regulations 1995, Food Safety Act 1990 (Amendment) Regulations 2004 and the General Food Regulations (2004) Guidance and other relevant food legislation. All products must meet Food Safety Authority Salt, Fat and Sugar guidelines.”*

Should further information be required the requester will need to make a separate request to NHS Supply Chain or the Business Services Authority (BSA) with the questions they would like NHS Supply Chain to answer. Contact details for the BSA are:-

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11) Whether your contracts with organisations that provide catering services and other food related services to your organisation include a clause requiring them to only use/buy British meat-related products.

**Response – The [Isle of Wight NHS Trust](#), has a contract in place with WA Foods for the supply of Fresh Meat, Poultry, Cooked Meats, Fresh Pies and Sausages. This Contract was arranged by Solent Supplies who accessed the NHS Supply Chain Contract No. 2012/S 126-208885 on behalf of the Trust. This contract does not include the provision of Frozen products.**

The contract includes the following information:-

	<p><b><i>“The Contractor must comply with the requirements of the UK Food Safety (General Food Hygiene) Regulations 1995, Food Safety Act 1990 (Amendment) Regulations 2004 and the General Food Regulations (2004) Guidance and other relevant food legislation. All products must meet Food Safety Authority Salt, Fat and Sugar guidelines.”</i></b></p> <p><b>Should further information be required the requester will need to make a separate request to NHS Supply Chain or the Business Services Authority (BSA) with the questions they would like NHS Supply Chain to answer. Contact details for the BSA are:-</b></p> <p><b>Information Governance Manager NHS Business Services Authority Stella House Goldcrest Way Newburn Riverside Newcastle Upon Tyne NE15 8NY Tel 0191 2035351 Fax 0191 264 5281 Web <a href="http://www.nhsbsa.nhs.uk">www.nhsbsa.nhs.uk</a> Email <a href="mailto:nhsbsa.foirequests@nhs.net">nhsbsa.foirequests@nhs.net</a></b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 380	<p>Please provide the following information:</p> <p>1. Is the trust commissioned to provide a speech therapy service for children who stammer?</p> <p><b>Response Yes the Trust is commissioned to provide a service to Children who stammer.</b></p> <p>2. If so, what is: the age range?; the current waiting time from referral to assessment?; the current waiting time from assessment to first appointment?; and the current number of children on the waiting list for assessment and first</p>

appointment? What does your speech therapy service consist of for children who stammer?

**Response** The Children's Speech, Language and Communication Service is commissioned to provide services to children from birth to 18 (19 if in full time education: 6<sup>th</sup> form or special school).

The Children's SLC service currently has 29 children referred as a result of dysfluency on the caseload. All referral are active and there are no cases waiting for input.

The current waiting time for referral to assessment is 6.9 weeks (as of August 2013). Once the child is assessed treatment is implemented as required. Children are not placed on a new waiting list for treatment.

There are currently 0 children on the waiting list with a reported dysfluency.

The Children's SLC service has a care pathway mapped out for children who stammer. This is in line with Evidence Based Practice and Royal College of SLT clinical guidelines. Phases of non fluency are deemed a normal developmental process within language acquisition however if this persists for more than a year or if the child/family is distressed/concerned then intervention from a SLT professional would be appropriate.

Intervention is delivered in line with the principles of Michael Palin Centre for Stammering Children and use resources from Swindon NHS Trust Therapy activities focus on both the speech function (supporting smooth speech) and accompanying anxiety.

All staff are supported (through supervision) by a highly specialist SLT to deliver input to this specific cohort of children to ensure therapy is delivered in a natural setting. Staff access training packages at the Michael Palin centre and specific cases can be referred on to specialist centres via Extra contractual commissioning requests through the CCG.

Older children and adolescents are supported to reduce the impact of their stammer and increase control in functional settings.

3. Is the trust commissioned to provide a speech therapy service for adults who stammer?

**Response** Yes the Trust is commissioned to provide a service to Adults who have a newly acquired dysfluency or have experienced a change in circumstances related to this condition (emotional / work / severity etc)

4. If so, what is: the age range?; the current waiting time from referral to assessment?; the current waiting time from assessment to first appointment?; and the current number of adults on the waiting list for assessment and first appointment? What does your speech therapy consist for adults who stammer?

**Response** The Adult and ALD service are commissioned to provide a service to Island residents that are 18 or over.

The current waiting time for referral to assessment for our outpatient service is 6.2 weeks. Once assessed treatment plans are put in place as required. There is no additional waiting list.

There is a total of 40 client's waiting to receive an outpatient appointment. We have 2 clients with a reported dysfluency on our active caseload and none waiting.

Evidence suggests 1% of the adult population stutters. Adults and adolescents are unlikely to experience natural recovery that you see in children. The Adult SLT service offers 2 main approaches to Dysfluency therapy:

1. Stammer more fluently (movement of dysfluency and attitudes)
2. Speak more fluently (novel speech patterns, techniques and strategies)

This is in line with EBP from RCSLT.

Each case is risk assessed and reviewed to ensure the client receives input from an appropriately skilled therapist. Highly specialist clinicians combine cognitive and speech techniques to produce positive outcomes (Menzies et al 2008)

Stammerers are lifetime clients of the SLT service and are able to access the service as required at

	<p><b>transitional times during their life.</b></p> <p>5. Does the trust have any plans in the current financial year or longer term to introduce / reduce / expand speech therapy services for children / adults who stammer?</p> <p><b>Response There are currently no plans to expand this service as we are delivering quality evidence based care for all clients who are referred to the service as a result of dysfluency.</b></p> <p><b>We do not currently offer access to the McGuire Programme (currently unsupported by evidence). However we would assist our clients to access this service independently.</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p>
FOI13 389	<p>Please provide the following information:</p> <p>1. I would like the Organisational Management Structure of your Acute Services (with names) for all operational staff including Service Managers/General Managers/Divisional General Managers/Divisional Directors/Heads of Operations/Directors of Operations/Chief Operating Officers working for the trust as of todays date.</p> <p><b>Response – Names of staff constitute personal data as defined within the Data Protection Act 1998 and is therefore exempt under S.40 (2) of the Freedom of Information Act 2000. However please find attached the organisational structure for our Acute services.</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 397	<p>Please provide the following information:</p> <p>Last year you kindly provided answers about Never Events. This is an updated (and shortened) request for new information relating to 2012/13.</p>



Please do not hesitate to contact me if you require clarification.

**Details of request:**

1) How many operating theatres do you have within your Trust?

**Response – 6 Operating Theatres, of which 2 are dedicated Day Surgery Theatres**

2) How many operations were performed at your Trust (from Trust systems)?

a. 1<sup>st</sup> April 2012 to 31<sup>st</sup> March 2013

**Response – Total elective operations – 9357,**

**Main Theatres – 3783**

**Day Surgery Theatres - 5574**

3) Have you had any Never Events related to surgery within the last 12 months (1<sup>st</sup> April 2012 to 31<sup>st</sup> March 2013)

**Response – No Never Events in last 12 Months**

a. If so, please provide headline details (number of each type of Never Event, degree of harm to the patient).

**Response – N/A.**

4) Have you had any Serious Incidents Requiring Investigation related to surgery, which are not classified as Never Events, within the previous year months (1<sup>st</sup> April 2012 to 31<sup>st</sup> March 2013).

**Response –**

a. If so, please provide headline details (number of each type of Never Event, degree of harm to the patient).

**Response – Yes one incident relating to surgery – misconnection of epidural – occurred in August 2012. No harm or serious injury to patient.**

***(Question 4 states NOT never event but 4a contradicts this)***

***Notes / explanations***

	<p><i>Serious Incident Requiring Investigation (NPSA definition):</i>  A serious incident requiring investigation is defined as an incident that occurred in relation to NHS-funded services and care resulting in one of the following:</p> <ul style="list-style-type: none"> <li>• Unexpected or avoidable death of one or more patients, staff, visitors or members of the public;</li> <li>• Serious harm to one or more patients, staff, visitors or members of the public or where the outcome requires life-saving intervention, major surgical/medical intervention, permanent harm or will shorten life expectancy or result in prolonged pain or psychological harm (this includes incidents graded under the NPSA definition of severe harm).</li> </ul> <p><i>Never Events</i>  The list of Never Events has been expanded. It would help greatly if you are able to differentiate retained swabs after vaginal delivery from retained objects.  It would help greatly to differentiate retained swabs from other objects. The national initiative to publish individual trust level Never Event data is some time off, and is unlikely to provide surgery specific data.</p> <p><i>Number of operations</i>  The data are known (in general) to be inaccurate, so we are asking for Trusts to provide the number of operations (procedures) they have recorded on their own admin systems (e.g. ORMIS, CRYSTAL).</p> <p>If your Trust covers more than one distinct hospitals providing surgical care, please provide separate information for each. Treatment centres operated by non-NHS organisations do not need to be included.</p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 398	<p>Please provide the following information:</p> <p><b>1: Name of Hospital:</b>  <b>Response - St Mary's Hospital</b></p> <p><b>2: Name of Trust:</b></p>

**Response - Isle of Wight NHS Trust**

**3: Neonatal Unit Level:** (Please delete as appropriate)

**Response - Local Neonatal Unit (Level 2)**

**4: Details of the person filling out the form:**

**Response – Names of staff constitute personal data as defined within the Data Protection Act 1998 and the information is therefore exempt under s.40 (2) of the Freedom of Information Act 2000. Also you have not stated what details you require.**

**5: What was the total number of babies admitted to the neonatal unit between April 2012 and March 2013?:**

**Response – 231**

**Section B: Hardship Fund**

**1: Do you offer a hardship fund (a direct financial grant) that parents of babies on the neonatal unit can apply to?:** No (delete as appropriate)

**If yes, please describe:**

**Response – No**

*If “no”, please skip to Section C*

**2: What are the eligibility criteria for this hardship fund? (eg only people on Jobseeker’s Allowance):**

**Response – N/A**

**Section C: Travel Costs**

**1: How much does car parking cost on-site?**

**Up to 1 hour:**

**Up to 2 hours:**

**Up to 3 hours:**

**Up to 4 hours:**

**Up to 5 hours:**

**All day:**

**Comment: N/A**

**Response – This information is readily available in our car parks.**

**2: Do you offer free parking or reduced car parking rates that parents of babies on the neonatal unit could apply for? (Please delete as appropriate)**

**Response – Reduced parking first week then free**

**3: Per family, how many cars does this free or reduced car parking apply to? \_**

**Response – The parents can put 2 car registrations onto this pass but only park one at a time free.**

**Please comment:**

**4: What assistance do you offer with travel costs?**

**Response – None.**

**5: Who is this available to? (Please delete as appropriate, but select all that apply)**

One parent / Two parents / Siblings (Under 18)

**Please comment N/A**

**Response – N/A**

**6: What are the eligibility criteria for car parking and/or travel cost assistance? (eg only people on Jobseeker's Allowance)**

**Response – All parents who have a baby in NICU are given assistance with car parking.**

#### **Section D: Meal Vouchers**

**1: Do you offer any meal vouchers that parents of babies on the neonatal unit can apply for? (Please delete as appropriate)**

Yes, breakfast/ Yes, lunch/ Yes, evening meal /No /Yes, other (please describe \_\_\_\_\_)

*If "no", please skip to Section E*

**Response – Yes the parents have a ticket to get any meal in the hospital canteen at a reduced rate. If resident with baby, two meals are free for the mother.**

**2: Who are these available to?** (Please delete as appropriate)

**Response – All parents with baby in NICU**

**3: What are the eligibility criteria?**

**Response – Their baby is in NICU**

#### **Section E: Accommodation**

**1: Do you offer accommodation on-site or near the hospital that parents of babies on the neonatal unit can use (excluding rooming in)?** (Please delete as applicable)

No/ Free Accommodation on-site/ Free Accommodation off-site/ Sign-post to local accommodation/ Subsidised Accommodation (please specify how much individuals are charged per night\_\_\_\_\_)

**Response – The Trust have one parents suite to use as required.**

*If “no”, please skip to Section F*

**2: Who can use this accommodation?** (Please delete as applicable)

Two parents (Please specify\_\_\_\_\_)

**Response – Two parents/carers.**

**3: What are the eligibility criteria?** (eg distance from home, childcaring responsibilities etc)

**Response – Baby in NICU.**

**4: What provision is in place for if the accommodation provided by the hospital or Trust is over-subscribed?**

**Response – The Trust have one other room that can be utilised if required.**

#### **Section F: Other Support and Changes in Support**

**1: Do you offer any other financial support, or support in kind, that parents of babies on the neonatal unit can apply for, such as childcare or nappies?** (Please specify) \_ **Response – No**

**2: What are the eligibility criteria?**

**Response – N/A**

**3: Have there been any changes to any financial or in kind support described in sections B – F in the past 12 months?**

**Response – N/A**

**4: Are there any planned changes to financial or in kind support described in Sections B – F in the next 12 months?**

**Response – not at present**

**Section G: Third Party Support**

**1: Are there any charities that offer financial support or support in kind that parents of babies on the neonatal unit would be eligible for? (eg hospital charities, Ronald McDonald Houses etc)? (Please delete as appropriate)**

No/ Yes (please specify)

**Response - Yes**

**2: If yes, what support do they provide?** (Please delete as appropriate, but select all that apply)

Hardship fund/ Support with Parking Costs/ Support with Travel Costs/ Meal Vouchers/ Free accommodation near the unit/ Other (Please specify\_\_\_\_\_)

**Response – Information not held – but it is available on the charity websites.**

**Section H – Information Provision**

**1: How do you inform parents of babies on the neonatal unit about financial or practical support they may be entitled to?**

**Response – Information available in welcome booklet and leaflet stand**

	N/A	Leaflets/ Posters in unit	Leaflets/ Posters outside unit	Website	Staff on the unit	Staff outside the unit	Other (Please specify)
Hardship Fund	√						
Support with parking costs					√		In welcome booklet

<b>Support with travel costs</b>						√		In welcome booklet
<b>Meal vouchers</b>						√		
<b>Accommodation</b>						√		
<b>Third Party Support</b>								

**2: Do you have a dedicated member of staff who can inform parents about financial support they may be entitled to?** (Please delete as appropriate)

Yes, on the unit/ Yes, in the hospital/ No

**Please comment:**

**Response – No**

**3: How do you inform staff on the neonatal unit about financial or in kind support parents of babies on the unit may be entitled to?** (Please delete as appropriate, but select all that apply)

Training or Induction/ Guidelines/ Internal Communications (eg emails or noticeboards)/ Other (Please specify)

**Response – Staff Meetings**

**Please note that this response does not constitute as consent for direct marketing.**

**A copy of this response will be published on the Trust website.**

FOI13 400

Please provide the following information:

The Following information is obtained from the Interest, Gifts, Hospitality, Sponsorship and Bribery Act Policy.

1. Under what circumstances (if any) can staff accept gifts and/or hospitality

**Response –**

**Non cash gifts**

**Gifts of a small or inexpensive nature such as calendars, pens or diaries or other simple or inexpensive items such as flowers and chocolates can be accepted but should be declared. This type of gift can be easily distinguishable from more**

**expensive or substantial items which cannot on any account be accepted. These should be firmly but politely declined. If there is any doubt as to whether the acceptance of such an item is appropriate, the matter should be referred to your Line Manager or relevant Director**

**3.11.2 It is not necessary for small, simple, low cost hospitality received e.g. tea, coffee, and buffet lunches to be recorded, nor is it necessary to record items of an advertising nature received at training courses, conferences, seminars or part of a “promotional” exercise, e.g. pens, books, folders, etc.**

**Exceptional cases**

**It is recognised that there are exceptional cases where refusal of a gift will clearly offend a donor, cause embarrassment or appear discourteous. In these cases the donor should be advised that the permission of management will have to be sought as to whether or not the gift can be accepted. The relevant director should be asked to decide whether to:**

- Allow the recipient to accept the gift**
- Return the gift to the donor with a suitably worded letter explaining why the gift cannot be accepted**

**If it is decided that the gift should be accepted then this will need to be declared using the appropriate declaration form**

2. If your organisation requires staff to declare gifts or hospitality, and if so, how this is recorded? For example, on a register of gifts/hospitality

**Response –**

**A gifts, hospitality and sponsorship register has been established and is held by the Corporate Governance & Risk Management Department.**

3. Please specify if there any items of a certain nature, or worth below a set monetary value, that have to do not have to be declared? For example chocolates or items worth £5 and under

**Response –**

**Non cash gifts**



**Gifts of a small or inexpensive nature such as calendars, pens or diaries or other simple or inexpensive items such as flowers and chocolates can be accepted but should be declared. This type of gift can be easily distinguishable from more expensive or substantial items which cannot on any account be accepted. These should be firmly but politely declined. If there is any doubt as to whether the acceptance of such an item is appropriate, the matter should be referred to your Line Manager or relevant Director**

**3.11.2 It is not necessary for small, simple, low cost hospitality received e.g. tea, coffee, and buffet lunches to be recorded, nor is it necessary to record items of an advertising nature received at training courses, conferences, seminars or part of a “promotional” exercise, e.g. pens, books, folders, etc.**

4. What items/ offers of hospitality must be declared? For example, dinner, alcohol, books

**Response –**

**There is a need to distinguish between simple, low cost hospitality of a conventional type, for example, a working lunch or evening meal compared with more expensive and elaborate hospitality. There is clearly a need for a sense of balance. Modest hospitality is an accepted courtesy of a business relationship. As a general principle, the frequency and/or scale of any hospitality accepted should not be significantly greater than what the Trust would normally provide for others in similar circumstances. There is concern that acceptance of frequent, regular or annual invitations to events or functions, particularly from the same source and where a considerable degree of hospitality is involved, may severely test the principles stated earlier and should be refused. However, there may be instances where staff receive invitations to events run by voluntary organisations such as annual conferences or dinners. Attendance at such events is considered an integral element in building and maintaining relationships with these sectors and any hospitality received is likely to be reasonable and proportionate, and therefore acceptable.**

**The offer and/or acceptance of hospitality which goes beyond simple low cost or conventional type refreshments provided at meetings should be recorded in the gifts, hospitality and sponsorship register.**

5. If there are any monetary limits placed on gifts?

**Response –**

**3.4 Gifts – cash or cash equivalents**

**Offers of cash or cash equivalents made by suppliers, contractors, patients or their relatives to employees or individuals acting on behalf of the Trust should be declined. Instead, the supplier, contractor, service user or relative should be made aware of the charitable fund to receive cash donations for general or specific purposes. Details of charitable funds are available from the Finance Department**

**“EXAMPLES OF GIFTS AND HOSPITALITY TO BE DECLARED**

**The following table provides some practical examples of gifts and hospitality that should be declared for inclusion in the register. Gifts and hospitality provided under the sponsorship of research and development should be included:**

**Type Examples**

**Alcoholic gifts Bottle of wine or champagne**

**Lunches/hospitality Drug Companies, Suppliers/Contractors, Insurance Companies, Banks**

**Small gifts Stationery, chocolates, flowers, calendars, clocks**

**Other hospitality Invitations by a supplier to an event, i.e. race day, football match or theatre tickets. Overseas attendance at conferences paid for by drug companies. Membership or use of a sports or leisure facility**

**Other gifts Crystal glassware, M&S vouchers**

**Charitable funds donation Gifts of money up to and including £5,000 may be accepted by staff without reference to the**

**Charitable Funds Trustees. Cheques should be**

**made payable to Isle of Wight NHS Charitable**

**Funds and sent to the Cashiers Office**

**Sponsorship Seminars, conferences etc for which sponsorship**

**is received from any non-NHS source, details should be recorded, including the date and title of the event, the name of the sponsoring organisation and the nature and extent of sponsorship received**

**For all gifts offered over the value of £5,000 contact the Finance Department**

6. What items/offers of hospitality must always be declined? For example, tickets, holiday offers or money. What happens when staff receive items of this nature?

**Response –**

**Offers of cash or cash equivalents made by suppliers, contractors, patients or their relatives to employees or individuals acting on behalf of the Trust should be declined. Instead, the supplier, contractor, service user or relative should be made aware of the charitable fund to receive cash donations for general or specific purposes. Details of charitable funds are available from the Finance Department**

**Trade or discount cards**

**Trade or discount cards (other than those negotiated by the Trust on behalf of its staff) by which an individual might benefit from the purchase of goods or services at a reduced price are classified as gifts and should be politely declined and, if already accepted, returned to the sender.**

7. Have you changed your policy on gifts and/or hospitality in the past five years or have plans to do so in the next 12 months? If your policy has changed or is due to change, please state the reasons why.

**Response – policy amended to include references to the Bribery Act**

8. If your organisation keeps a record of gifts and/or hospitality offered to staff, I would like information on items recorded dating from October 1 2010 to October 15 2013 on an excel spreadsheet, ideally with a breakdown of:

	<p>Date item/hospitality offer was declared  Role of member of staff – i.e. nurse, healthcare assistant, doctor  Description of item, i.e. wine, chocolates, tickets  Value of item  Whether item/hospitality offer was accepted or declined</p> <p><b>Response –</b>  <b>We are only able to supply details from April 2012 onwards - See attached</b></p> <p>9. I would also like to know how many staff have been subject to disciplinary proceedings over accepting and/or not declaring gifts and/or hospitality between October 1 2010 to October 15 2013</p> <p><b>Response – None</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 402	<p>Please provide the following information:</p> <p>1. Total number of needlestick injuries reported during 2010-11  <b>Response – 25 Incidents</b></p> <p>2. Total number of needlestick injuries reported during 2011-12  <b>Response – 31 Incidents</b></p> <p>3. Total number of needlestick injuries reported during 2012-13  <b>Response – 38 Incidents</b></p> <p>4. Total number of staff injuries reported during 2010-11  <b>Response – 128 Incidents</b></p> <p>5. Total number of staff injuries reported during 2011-12  <b>Response – 118 Incidents</b></p>

	<p>6. Total number of staff injuries reported during 2012-13  <b>Response – 124 Incidents</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 404	<p>Please provide the following information:</p> <p>1. How many acute hospital sites are within your Trust organisation? Do all these acute sites have a full 24/7 A&amp;E department?  <b>Response – One site which has a 24/7 A&amp;E</b></p> <p>2. Which of these Trust sites have on-site pathology laboratory provision?  <b>Response – One site which has Pathology</b></p> <p>3. What pathology disciplines are provided on each of these Trust sites? Please state Blood transfusion as a separate discipline  <b>Response – Microbiology, Cellular Pathology, Blood Sciences (Haematology and Chemical Pathology) and Blood Transfusion</b></p> <p>4. What pathology disciplines are centralised within your organisation?  <b>Response – Immunology (Cervical Screening, TB culture and Chlamydia Screening go to other laboratories) Blood Sciences – includes Chemical Pathology, Haematology and Blood Transfusion</b></p> <p>5. What is the annual activity (measured in tests) per discipline for each of the Trust sites with pathology provision?  <b>Response –</b>  <b>Microbiology - April 2012 to March 2013 - 94,132 tests.</b>  <b>Chemical Pathology - April 2012-March 2013 - 2,567,995 tests</b>  <b>Haematology - April 2012-March 2013 - 1,857,815 tests</b>  <b>Immunology - April 2012-March 2013 – 14,774 tests</b>  <b>Histology – April 2012-March - 2013 - 10,995 tests</b>  <b>Cytology - April 2012-March 2013 - 1,344 tests</b></p>

**Blood bank - April 2012-March 2013 - 50,775 tests**

6. What are the staffing levels and skill mix by band for each pathology discipline per Trust site with pathology provision?

**Response – Microbiology:**

**Consultant Microbiologist 2.0 WTE**

**Band 8B 1.0 WTE**

**Band 8A 1.0 WTE**

**Band 7 1.2 WTE**

**Band 6 6.0 WTE**

**Band 5 1.0 WTE**

**Band 3 6.24 WTE**

**A&C Band 4 1.0 WTE**

**Chemical Pathology**

**Consultant 1.0wte**

**BMS band 8b 1.0**

**BMS band 8a 1.0**

**BMS band 7 2.87**

**BMS band 6 6.00**

**BMS band 5 1.00**

**MLA band 3 5.80**

**Admin band 4 1.00**

**Haematology**

**Consultant 2.0wte**

**Nurse band 7 1.00**

**Trainee BMS band 5 1.00**

**BMS band 8a 1.00**

**BMS band 7 5.00**

<b>BMS band 6</b>	<b>8.00</b>
<b>SATO band 4</b>	<b>1.00</b>
<b>MLA band 3</b>	<b>3.00</b>
<b>Admin band 4</b>	<b>1.00</b>
<b>Admin band 3</b>	<b>0.60</b>

**Cellular Pathology**  
**Consultant Histopathologists 4.0 WTE**  
**Band 8B 1.0 WTE**  
**Band 7 2.0 WTE**  
**Band 6 2.0 WTE**  
**Band 5 1.0 WTE**  
**Band 4 1.0 WTE**  
**Band 3 1.6 WTE**  
**A&C Band 4 2.17 WTE**  
**A&C band 5 0.6 WTE**

7. How many staff and at what AfC bands are trained for cross disciplinary work?

**Response –**

**Cellular Pathology- 0**

**Chemical Pathology- 0**

**Haematology - 0**

**Microbiology - 0**

8. What specialist pathology services are carried out within your organisation? E.g. Molecular sciences, haemophilia, haemato-oncology etc.

**Response –**

**Cellular Pathology-**

**Chemical Pathology-**

**Haematology – Haematology/Oncology, Haemophilia  
Microbiology – Antenatal screening**

1. What transport system does you Trust pathology service use? Is it an internal system or does it use an external provider?

**Response – Internal transport and Hayes DX. Sometime couriers are used if required**

2. Is the transport system used pathology specific or a shared facility?

**Response – Internal is shared, DX is for Pathology only**

3. How many pick-ups per working day do you offer GP's?

**Response – one or two dependant on which GP surgery**

4. What frequency, if any do pick-up from GP's at weekends?

**Response – None**

5. What are your charges for Biochemistry, Haematology, Microbiology, Cytology, Histology and immunology?

**Response – Please note that the charges below are the Direct Access charges only**

Financial Year	2012/13
Direct Access Pathology Services	Average cost per test
	£
Cytology	51.21
Histopathology	43.81
Clinical Biology	1.95
Haematology	4.05



Immunology	9.89
Microbiology	9.44

6. Is your Trust pathology service involved in a consolidation project with other Trust or private sector pathology services? If so please indicate the other organisations involved.

**Response – yes, a Consortium project which initially was Hampshire and the Isle of Wight consortium, but is now going ahead with just Southampton and the Isle of Wight.**

**Please note that this response does not constitute as consent for direct marketing.**

FOI13 405

Please provide the following information:

1. On October 1<sup>st</sup> 2013 how many full time equivalent midwives were working on your maternity unit?

**Response – 43.2 wte**

2. On October 1<sup>st</sup> 2013 how many babies were born in your maternity unit?

**Response – none on that day**

3. On October 1<sup>st</sup> 2013 what was

a. The overall vacancy rate for midwives?

**Response – none**

b. The long-term (ie 3 months and over) vacancy rate for midwives?

**Response – None**

4. On October 1<sup>st</sup> 2013

a. What was the total number of supervisors and

**Response – 6**

	<p>b. The total number of midwives working in the maternity unit?  <b>Response – 58</b></p> <p>5. How many full time equivalent midwives do you estimate you need in order to provide all women with one to one care in labour?  <b>Response – 43WTE</b></p> <p>6. How many women using your maternity service are above the age of 40? Please give figures for the last 5 years.  <b>Response – We cannot get this data from the current EIT system it would need a manual retrieval of information and we are unable to do this.</b></p> <p>7. How many women using your service are classed as obese (BMI 30 and above). Please give figures for the last 5 years.  <b>Response – we have data for last 2 years as we dint collect it before</b>  <b>2011/12 240 women</b>  <b>2012/13 277</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 407	<p>Please provide the following information: Time period up to 3-5 years</p> <p>Can I please make a request under the Freedom of Information Act and I would like to request the following information with regards to the organisation's Local Area Network (LAN) environment.  <b>Please can you send me the organisation's Local Area Network (LAN) contract, which may include the following:</b></p> <ul style="list-style-type: none"> <li>· <b>Support and Maintenance- e.g. switches, router, software etc</b></li> <li>· <b>Managed</b></li> <li>· <b>Installation</b></li> </ul>

**Cabling**

**Response – The Trust do not have a contract.**

1. Annual Average Spend for Supplier: What is the annual average spending on the supplier above? If there is more than one supplier please split the annual averages spend for each supplier.

**Response – N/A**

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

**Response – N/A**

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

**Response – N/A**

4. Contract Type: Managed, Maintenance, Installation, Software

**Response – N/A**

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

**Response – N/A**

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

**Response – N/A**

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

**Response – N/A**

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

**Response – N/A**

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

**Response – N/A**

11. Responsible Officer: Who within the organisation is responsible for each of these contract(s) please provide me with contact details including name, job title, contact number and email address?

**Response – N/A**

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

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

**Response Cisco**

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

**Response – 4467**

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

**Response – 1 Site**

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

If the contract is managed by a 3<sup>rd</sup> party e.g. Commissioning Support Unite can you please provide me with

**Response – N/A**

1. Existing Supplier: Who is the current supplier?

**Response – N/A**

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

**Response –N/A**

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

**Response – N/A**

4. Contract Type: Managed, Maintenance, Installation, Software

**Response – N/A**

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

**Response – N/A**

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

**Response – N/A**

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

**Response – N/A**

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

**Response – N/A**

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

**Response – N/A**

10. Responsible Officer: Who within the organisation is responsible for each of these contract(s) please provide me with contact details including name, job title, contact number and email address?

**Response – N/A**

If the contract is also expiring within the next three months please state what the likely outcome will be.

**Response – N/A**

If the contracts within the response are under four months old can you please state the shortlist of suppliers that bid on this contract?

**Response – N/A**

**Please note that this response does not constitute as consent for direct marketing.**

	<p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 408	<p>Please provide the following information:</p> <p>1. Did any of your employees receive private medical insurance as a benefit as part of their terms of employment by Isle of Wight NHS Trust during the last three financial years?  <b>Response – No</b></p> <p>2. If so, how many employees received such a benefit during the last three financial years?  <b>Response – n/a</b></p> <p>3. Did any Board members receive such a benefit in this time frame?  i. If so, how many during each of the three years?  <b>Response – n/a</b></p> <p>4. Did the Trust's Chief Executive receive such a benefit in this time frame?  <b>Response – n/a</b></p> <p>5. Please provide a breakdown of how much the Trust spent in the last three financial years on such benefits for:  i. the Chief Executive  ii. the Trust Board  iii. other employees  iv. all employees of the Trust  <b>Response – n/a</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 409	<p>Please provide the following information:  Please can you give me details of all health and safety incidents where patients and staff were put at risk at your</p>

hospital in 2012 and 2013 (to date).

For each incident, please state

- a) When the incident occurred
- b) Who was involved – eg doctor, nurse, cleaner, admin staff, patient, external contractor
- c) What happened – eg accidentally stabbed with HIV positive patient’s needle, near miss in the car park, fell off a ladder etc. Please be as specific as possible
- d) What injuries were suffered (if any)
- e) Where the incident had occurred
- f) What follow up action was taken – eg staff suspended, change in procedures etc

**Response – Collating this data would take in excess of 18 hours and is therefore exempt under s.12 of the Freedom of Information Act 2000.**

**Please note that this response does not constitute as consent for direct marketing.**

**A copy of this response will be published on the Trust website.**

FOI13 410

Please provide the following information:

1. How many a) verbal and b) physical **racist** incidents by patients or visitors have been reported by NHS employees in the previous five financial years? (2008/09, 2009/10, 2010/11, 2011/12, 2012/13)

Please complete the following table:

**Racist incidents by patients or visitors**  
**Response –**

	2008/09	2009/10	2010/11	2011/12	2012/13
Verbal racist	1	6	1	3	6

incidents					
Physical racist incidents	0	0	0	0	0

2. How many a) verbal and b) physical **racist** incidents by NHS employees have been reported by other NHS employees in the previous five financial years? (2008/09, 2009/10, 2010/11, 2011/12, 2012/13)

Please complete the following table:

**Racist incidents by NHS employees**  
**Response –**

	2008/09	2009/10	2010/11	2011/12	2012/13
Verbal racist incidents	0	0	0	2	0
Physical racist incidents	0	0	0	0	0

**Please note that this response does not constitute as consent for direct marketing.**

**A copy of this response will be published on the Trust website.**

FOI13 411

Please provide the following information:



	<p>1. The number of patients admitted in 2012 with Hypoglycaemia?  <b>Response –</b>  <b>Total number of patients admitted with Hypoglycaemia in any coding position during 2012 = 88</b>  <b>Of these, the total number of patients admitted with Hypoglycaemia in primary position during 2012 = 34</b></p> <p>2. Diabetes test strip on their drug history from their GP-  <b>Response –</b>  <b>Such data is not recorded on our central system and is not retrievable without examination of individual notes. Not all patients will be referred by GPs as they could present through the ambulance services or directly to the emergency department. Examination of individual notes would constitute personal data as defined within the Data Protection Act 1998 and is therefore exempt under s.40 (2) of the Freedom of Information Act 2000.</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 412	<p>Please provide the following information:</p> <p>1. Your Absence Management Policy for 2013  <b>Response –</b>  <b>Please find attached the current Attendance Management Policy. This policy is in the process of being reviewed following the changes to the NHS Injury Allowance Scheme as outlined in the Agenda for Change Terms and Conditions Handbook.</b></p> <p>2. Absence Management processes for 2013  <b>Response –</b>  <b>The Attendance Management policy outlines the procedures to follow when an employee is off sick.</b></p> <p>3. Absence statistics showing financial savings and average days absence across the Trust for the period April 2012 to April 2013 and April 2013 to the present</p>

	<p><b>Response – 4.94% 2012/13 5.36% 2013/YTD</b></p> <p><b>Absence includes Sickness, Maternity, Paternity, Carers Leave, Special Leave. Financial savings information not known.</b></p> <p>4. Absence level targets for the period April 2012 to April 2013 and for the period to the present.</p> <p><b>Response – Sickness absence target 3% - 12/13 3% - 13/14</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 413	<p>Please provide the following information: <b>To clarify, may I also have all data from questions 1-4 broken down by year (e.g. 08/09, 10/11).</b></p> <p>1) Since October 1st 2008, the number of males who have been diagnosed with malnourishment or malnutrition who are under the age of 18. <b>Response – This would involve a manual examination of patient records and would constitute personal data as defined within the Data Protection Act 1998 and is therefore exempt under s.40 (2) of the Freedom of Information Act 2000.</b></p> <p>2) Since October 1st 2008, the number of females who have been diagnosed with malnourishment or malnutrition who are under the age of 18. <b>Response – This would involve a manual examination of patient records and would constitute personal data as defined within the Data Protection Act 1998 and is therefore exempt under s.40 (2) of the Freedom of Information Act 2000.</b></p> <p>3) Since October 1st 2008, the number of males who have been diagnosed with undernourishment who are under the</p>

	<p>age of 18  <b>Response – This would involve a manual examination of patient records and would constitute personal data as defined within the Data Protection Act 1998 and is therefore exempt under s.40 (2) of the Freedom of Information Act 2000.</b></p> <p>4) Since October 1st 2008, the number of females who have been diagnosed with undernourishment who are under the age of 18  <b>Response – This would involve a manual examination of patient records and would constitute personal data as defined within the Data Protection Act 1998 and is therefore exempt under s.40 (2) of the Freedom of Information Act 2000.</b></p> <p>5) With relation to requests 1-4, the number of these cases in which parents were referred to Social Services.  <b>Response – Please see response to Questions 1-4.</b></p> <p>6) Since October 1st 2008, the number of males and females who have died whereby malnourishment or malnutrition was listed as a factor in their cause of death.  <b>Response – This information is not held.</b></p> <p>If your trust has more than one hospital, please break this information down by hospital.</p> <p>Also, please break the information down by the following age groups:  0-5  6-10  11-15  16-17</p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 414	Please provide the following information:

	<p><b>The Isle of Wight NHS Trust was established on 1<sup>st</sup> April 2012 therefore only one year's worth of data has been provided.</b></p> <p>I would be grateful if you can supply agency spend data for:</p> <p>Occupational Therapy from 2011/12 and 2012/2013.</p> <p><b>Response – 2012/13 - £9,376</b></p> <p>I would also like an organisational structure to include managers names for the above department.</p> <p><b>Response – Names of staff constitute personal data as defined within the Data Protection Act 1998 and are therefore exempt under s.40 (2) of the Freedom of Information Act 2000. Please find attached structure.</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 415	<p>Please provide the following information:</p> <p>1) Since October 1st 2008, the number of males aged 18 and over arriving at A&amp;E to be treated whilst intoxicated (under the influence of alcohol or drugs).</p> <p><b>Response – This would involve a manual examination of patient records and would therefore constitute personal data as defined within the Data Protection Act 1998 and is exempt under s.40 (2) of the Freedom of Information Act 2000.</b></p> <p>2) Since October 1st 2008, the number of females aged 18 over arriving at A&amp;E to be treated whilst intoxicated</p> <p><b>Response – This would involve a manual examination of patient records and would therefore constitute personal data as defined within the Data Protection Act 1998 and is exempt under s.40 (2) of the Freedom of Information Act 2000.</b></p> <p>3) Since October 1st 2008, the number of males aged 17 and under arriving at A&amp;E to be treated whilst intoxicated.</p>

**Response – This would involve a manual examination of patient records and would therefore constitute personal data as defined within the Data Protection Act 1998 and is exempt under s.40 (2) of the Freedom of Information Act 2000.**

4) Since October 1st 2008, the number of females aged 17 and under arriving at A&E to be treated whilst intoxicated

**Response – This would involve a manual examination of patient records and would therefore constitute personal data as defined within the Data Protection Act 1998 and is exempt under s.40 (2) of the Freedom of Information Act 2000.**

5) Since October 1st 2008, the number of incidents recorded of verbal abuse against NHS staff **working in A&E**. If the information is kept and falls within the compliance costs, please indicate how many of these incidents involved an intoxicated individual.

**Response – Please see two tables below, however table recording “intoxicated patient incidents” may not be accurate as this information is not always recorded on the incident form. We searched via the words**

Verbal Abuse / Threat Incidents Reported 01.10.2008 - 12.11.2013							
	2008	2009	2010	2011	2012	2013	Total
Verbal Abuse/Threat	0	53	39	50	49	39	230
Verbal Abuse / Threat Incidents that involved an Intoxicated Patient Reported 01.10.2008 - 12.11.2013							
	2008	2009	2010	2011	2012	2013	Total
Verbal Abuse/Threat	0	9	5	7	11	8	40

‘drunken/intoxicated’ etc.

6) Since October 1st 2008, the number of incidents recorded of physical abuse against NHS staff **working in A&E**. If the information is kept and falls within the compliance costs, please indicate how many of these incidents involved an intoxicated individual.

**Response – Please note comments in question 5 which also applies to this question.**

**Physical Assault Incidents Reported 01.10.2008 - 12.11.2013**

	2008	2009	2010	2011	2012	2013	Total
<b>Physical Assault</b>	1	2	2	6	7	4	22

**Physical Assault Incidents that Involved an Intoxicated Patient  
Reported 01.10.2008 - 12.11.2013**

	2008	2009	2010	2011	2012	2013	Total
<b>Physical Assault</b>	0	0	0	1	0	0	1

7) Since October 1st 2008, the number of incidents in which hospital security were called to deal with an intoxicated individual at A&E.

**Response – Please note comments in question 5 which also applies to this question.**

**All Incidents Resulting in Security being called to A&E due to Intoxicated  
Patients - Reported 01.10.08 - 12.11.13**

	2008	2009	2010	2011	2012	2013	Total
<b>Emergency Department</b>	0	9	9	21	22	17	78

8) Since October 1st 2008, the number of NHS staff working at A&E who have resigned citing stress or suffering abuse as a factor. Please ignore this request should it raise the cost of this FOI above the compliance costs.

**Response – This information is not held.**

Please also break information down by year and by hospital, should your trust contain more than one hospital.

**Please note that this response does not constitute as consent for direct marketing.**

**A copy of this response will be published on the Trust website.**



	<p>3. If no, are you planning to introduce this policy? Yes No</p> <p><b>Response – N/A</b></p> <p>4. Please could you provide details of the use of the self-administration of medicines policy by competent patients and how this is being monitored across all the hospitals in your Trust?</p> <p><b>Response – Please find attached.</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 426	<p>Please provide the following information:</p> <p><b>Response – All HCV+ patients are sent to Southampton Hepatology Team – Therefore we do not hold this information. Please contact Southampton University Hospital.</b></p> <p><u>Section 1: HCV in your area</u></p> <ol style="list-style-type: none"> <li>1. Please confirm or deny whether there is a lead for hepatitis C in your area.</li> <li>2. Please confirm or deny whether your organisation has a strategy in place to manage hepatitis C in your area.</li> <li>3. Please confirm or deny whether your organisation has arrangements in place with other relevant local authorities to co-ordinate hepatitis C commissioning.</li> <li>4. Please confirm or deny whether your area has a hepatitis C clinical network in place.</li> <li>5. Please confirm or deny whether you have undertaken or planned to undertake an audit of hepatitis C services in your area and if so, when.</li> </ol> <p><u>Section 2: Prevalence of Hepatitis C</u></p>



6. How many people in your catchment area were diagnosed with Hepatitis C in:

- a.) 2010
- b.) 2011
- c.) 2012
- d.) 2013

7. How many patients in your catchment area have received treatment for Hepatitis C in (please also indicate completed treatment rates, if known):

- a.) 2012
- b.) 2013

8. Do you have a registered number of the following high risk factor groups in your catchment area:

- a.) Homeless
- b.) Injection Drug Users (IDUs)
- c.) South Asians (Indian, Pakistani, Bangladeshi)

Section 3: Service Design

9. Do you have a multidisciplinary Liver team within your catchment area?

10. How many whole time equivalent Hepatitis C specialist nurses are employed in your catchment area?

11. Do you offer specialist hepatitis services in any of the following settings:

- a.) Opioid substitution clinics
- b.) Home care
- c.) Drug outreach service
- d.) Homeless clinic

	<p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 430	<p>Please provide the following information:</p> <ol style="list-style-type: none"> <li>1. How many patient falls have you had between 1 April 2012 and 31 March 2013 that resulted in a fractured neck of femur? <b>Response – 10 Incidents.</b></li> <li>2. Of these how many did you report to StEIS? <b>Response – 10</b></li> <li>3. Of those that were not reported to StEIS was an internal RCA completed? <b>Response – n/a as all reported</b></li> </ol> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 433	<p>Please provide the following information:</p> <p>Please can I have copies of all emails, correspondence, notes, minutes and all other documents (paper and electronic) relating to complaints about the release of bodies from the hospital mortuary/morgue in the last three years. <b>Response – There have been no complaints recorded on this subject.</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>

FOI13 442	<p>Please provide the following information:</p> <p>1. What was the spend on Accident &amp; Emergency medical locums in 2009/10, 2010/11, 2011/12 and 2012/13.  <b>Response – The Isle of Wight NHS Trust came into existence in April 2012. Data prior to this will need to be requested from the Department of Health.</b></p> <p><b>2012/13 - £563,583</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 448	<p>Please provide the following information:</p> <p>1. During the first ten months of 2013 (up to October 31), how many organ transplants were carried out by the Trust.  <b>Response – We do not carry out organ transplants at this Trust.</b></p> <p>2. How many of these organs were designated “high risk”?  <b>Response – N/A</b></p> <p>3. Please provide a list of all the “high risk” organs transplanted, giving the reason for the organ being designated “high risk” (for example, but not limited to, smoker donor, drug addict donor, elderly donor, etc.). I do not require any further details of the operation, such as name of patient, date of operation, or condition of patient.  <b>Response – N/A</b></p> <p><b>Please note that this response does not constitute as consent for direct marketing.</b></p> <p><b>A copy of this response will be published on the Trust website.</b></p>
FOI13 450	<p>Please provide the following information:</p> <p>a) What communication support does the NHS Foundation Trust, and the agencies and public bodies supported</p>

by the trust, provide for deaf and hard of hearing people to access their services?

**Response – We are not an NHS Foundation Trust.**

b) Do the NHS Foundation Trust, and the agencies and public bodies supported by the trust, provide NRCPD registered communication professionals for profoundly deaf people to access their services?

**Response – We are not an NHS Foundation Trust.**

c) How many people have requested the use of a sign language interpreter to access services offered by the NHS Foundation Trust, and the agencies and public bodies supported by the trust, in the past year?

**Response – We are not an NHS Foundation Trust.**

**Please note that this response does not constitute as consent for direct marketing.**

**A copy of this response will be published on the Trust website.**