



Ref: FOIA Reference 2019/20-208

Royal Stoke University Hospital
Quality, Safety and Compliance Department
Newcastle Road
Stoke-on-Trent
Staffordshire
ST4 6QG

Date: 15th August 2019

Email foi@uhn.nhs.uk

Dear

I am writing in response to your email dated 15th July 2019 requesting information under the Freedom of Information Act (2000) regarding Cutaneous Squamous Cell Carcinoma. I apologise for the delay in responding.

I can neither confirm nor deny whether the information you have requested is held by the Trust in its entirety. This is because the information requested in questions 2, 3 and 4 is not held centrally, but may be recorded in health records. In order to confirm whether this information is held we would therefore have to individually access all health records within the Trust and extract the information where it is present. We therefore estimate that complying with your request is exempt under section 12 of the FOI Act: *cost of compliance is excessive*. The section 12 exemption applies when it is estimated a request will take in excess of 18 hours to complete. We estimate that accessing and reviewing all health records and then extracting relevant information would take longer than the 18 hours allowed for.

In addition to the section 12 exemption the Trust is also applying section 14 (1) exemption: *oppressive burden on the authority*

Under section 16 of the FOI Act we are required to provide requestors with advice and assistance where possible. We would therefore like to advise you that your request is shortened to just the questions that we are able to comply within the 18 hour time frame. In order to avoid delay to your response we have provided this below.

As of 1st November 2014 University Hospitals of North Midlands NHS Trust (UHNM) manages two hospital sites – Royal Stoke University Hospital, and County Hospital (Stafford). Therefore the response below is for the two sites combined from that date where appropriate.

Q1 How many adult patients with Cutaneous Squamous Cell Carcinoma have you seen / treated (example Surgery, Radiotherapy, Chemotherapy or combinations of these) in the last 6 months?

A1 We are unable to provide some of the information you require in the requested format as to release this data could lead to the identification of the person(s) involved due to the low numbers involved, and would breach the Trusts obligations under Data Protection Act 2018. Accordingly, this aspect of your request is exempt from disclosure under the terms of Section 40(2) of the FOI Act. *Personal information*. However as the Trust is committed to openness and transparency we can band the numbers; Please see below:

This exemption is an absolute exemption and therefore no consideration of the public interest test is required.

Treatment Type	First definitive treatment for new primary cancer	Second or subsequent treatment for new primary cancer	Treatment for regional recurrence of cancer
Surgery	196	39	Less than 5
Teletherapy (Beam Radiation excl. Proton Therapy)	10	19	
Specialist Palliative Care		14	
Active Monitoring		6	
Anti Cancer Drug (Cytotoxic Chemotherapy)	Less than 5		
Non-Specialist Palliative Care (excl Active Monitoring)		Less than 5	

Q2 How many adult patients with locally advanced (patients with Perineural invasion and local Lymphovascular or Bone involvement) or Metastatic Cutaneous Squamous Cell Carcinoma (patients with both local and distant Nodal involvement, as well as any other organ involvement) have you seen / treated (example Surgery, Radiotherapy, Chemotherapy or combinations of these) in the last 6 months?

A2 Sections 12 and 14 exemptions as detailed above

Q3 Of these how many are not candidates for Curative surgery or Curative Radiation?

A3 As answer 2

Q4 In the past 6 months, how many adult patients with locally advanced or metastatic Cutaneous Squamous Cell Carcinoma have you treated with the following

Complex surgery only (eg patients with significant comorbidities, large reconstructions or amputations leading to significant loss of function or disfigurement)	
Surgery + Radiotherapy (adjuvant / neoadjuvant)	
Radiotherapy	
Chemotherapy** only	
Chemotherapy** + Radiotherapy	
Surgery + Chemotherapy** (adjuvant / neoadjuvant)	
Other (Please state)	
Palliative Care / Best Supportive Care	

A4 As answer 2

Q5 Are you participating in any clinical trials for Cutaneous Squamous Cell Carcinoma (CSCC)?
If yes, please state which?

**Example of factors to consider when deciding if locally advanced patients are suitable candidates for surgery: Disease recurrence after two or more surgical procedures and the treating clinicians expected that curative resection would be unlikely
CSCC in a anatomically challenging location where surgery would result in substantial complications or deformity or dysfunction significant local invasion that precludes complete resection*

** Example of factors to consider when deciding if locally advanced patients are suitable candidates for radiation:*

CSCC in a anatomically challenging location where radiation would be associated with unacceptable toxicity risk in context of the patients overall condition

Clinical judgement that tumour might not respond to RT

Factors / conditions contradicting for RT

Prior treatment with RT for CSCC, and further RT would exceed the threshold of acceptable cumulative does

*** Chemotherapy such as Cisplatin, Doxorubicin, 5-Fluorouracil (5-FU), Capecitabine, Topotecan, Methotrexate or Etoposide*

A5 UHNM is not participating in any clinical trials for Cutaneous Squamous Cell Carcinoma.

*Please note that any individuals identified do not give consent for their personal data to be processed for the purposes of direct marketing.

UHNM NHS Trust is a public sector body and governed by EU law. FOI requestors should note that any new Trust requirements over the EU threshold will be subject to these regulations and will be advertised for open competition accordingly.

Where the Trust owns the copyright in information provided, you may re-use the information in line with the conditions set out in the Open Government Licence v3 which is available at <http://www.nationalarchives.gov.uk/doc/open-government-licence/version/3/>. Where information was created by third parties, you should contact them directly for permission to re-use the information.

An anonymised copy of this request can be found on the Trust's disclosure log, please note that all requests can be found at the following link: <http://www.uhnm.nhs.uk/aboutus/Statutory-Policies-and-Procedures/Pages/Freedom-of-Information-Disclosure-Log.aspx>

This letter confirms the completion of this request. A log of this request and a copy of this letter will be held by the Trust.

If you have any queries related to the response provided please in the first instance contact my office.

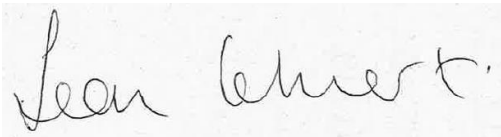
Should you have a complaint about the response or the handling of your request, please also contact my office to request a review of this. If having exhausted the Trust's FOIA complaints process you are still not satisfied, you are entitled to approach the Information Commissioner's Office (ICO) and request an assessment of the manner in which the Trust has managed your request.

The Information Commissioner may be contacted at:

Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF or via www.ico.org.uk.

If following review of the responses I can be of any further assistance please contact my secretary on 01782 676474.

Yours,



Jean Lehnert
Information Governance Manager