



Ref: FOIA Reference 2021/22-089

Date: 6th July 2021

Email foi@uhn.nhs.uk

Dear

I am writing in response to your email dated 10th May 2021 sent to the complaints team requesting information under the Freedom of Information Act (2000) regarding Covid complaint.

The University Hospitals of North Midlands Trust is committed to the Freedom of Information Act 2000.

However, the NHS is facing unprecedented challenges relating to the coronavirus (COVID-19) pandemic at the current time. Understandably, our resources have been diverted to support our front-line colleagues who are working tremendously hard to provide care for our patients, and to those in need of our services.

We strive to be transparent and to work with an open culture. But at this time, whilst care of our patients and the safety of our staff takes precedent, it is likely that responses to some requests for information will be delayed. We apologise for this position in advance, and will endeavour to provide you with as much information as we can, as soon as we are able.

The Information Commissioners Office has recognised the current situation in the NHS

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 What health and safety procedures were in place to protect staff with multiple sclerosis/underlying medical health conditions?

Time frame clarified by complaints team:

This will have been from the beginning of Covid-19 so let's say 1st March 2021 to catch it in entirety and 19th April 2020 when pt passed away.

A1 In accordance with guidance all staff with any underlying health conditions are subject to individual risk assessment.

Q2 What PPE conflicting reports about the downgrading of PPE in March 2020. You feel one size does not fit all. PPE was not fitting properly and staff concerns about PPE not being available. Staff concerned that PPE was locked away.

Lack of clarity supplied by complaints team- see below

The PPE was locked away by the ward manger and staff had to break into get it as the manager was not at work. Also were the staff give clarity of which masks to wear as there seemed to be confusion?

- A2 UHNM followed the National PPE Guidelines from PHE – copy attached, together with IP Guidance which was available to all staff on the intranet. The attached poster was widely available throughout the Trust, as well as the intranet from early April 2020.
- We are not aware what is referred to as downgrading, there was no downgrading.
 - PPE stock was delivered from the NHS national stockpile, and all NHS Trusts were instructed to support the national supply route and not to purchase outside of it as it might contribute to undermining and destabilizing the overall national supply.
 - The IP team visited all clinical areas at the County Hospital daily to offer any support that the nurse in charge, or other staff, felt they needed. This included the correct use of PPE.

Q3 When were the first Covid-19 patients admitted onto the wards at County Hospital and which wards were these?

- A3 From the information we have available the first Covid positive patient at the County Hospital was 12th March 2020.
- The first Covid positive patient on ward 15 was 13th March 2020
 - The Covid wards at the County Hospital were wards 14 and then ward 15

Q4 Were all NHS staff that were absent due to Covid-19 tested?

- A4 PCR Tests are offered to all staff reporting a Covid-related absence. The general process is that staff call the Absence Management System to record their absence. The absence is recorded as Covid-related and the PCR test is offered. Staff are then required to isolate until the results of the PCR Test are known. The relevant line manager would manage the absence to ensure that staff return to work if the test is negative or following the relevant period of isolation.

The specific data requested is not available because:

- The results of the PCR Test are not recorded in the Absence Management System
- Staff may have accessed a PCR Test outside of the trust
- Staff may have continued to work from home while awaiting the results of a PCR test, therefore would not have been recorded as absent

Q5 What arrangements were in place to advise staff of which wards were Red wards?

- A5 The Trust convenes regular site meetings at 08.30, 12.00, 15.00, 17.30 and 19.30 and a reported sit rep at 21.30 that details the bed complement and the zoned areas. Covid Tactical meetings were also convened daily and then twice weekly to review operational plans which included PPE, bed position and Infection and Prevention issues.

Q6 Was it advisable for nurses working on infections wards to have their uniforms laundered at home?

- A6 The FOI Act 2000 is for the release of information that is held/recorded and does not cover the opinions of persons regarding suppliers, systems or procedures, therefore this information is not held.

Q7 When was it decided that Covid-19, scabies and COPD patients were allowed to be on the same wards?

A7 As far as we are aware there was no formal decision around the mixing of Covid-19, scabies and COPD.

- All Directorate clinical and non-clinical teams were invited to a daily medical division tactical meeting (Tele Conference and then Microsoft teams) when National and Trust updates on all aspects of PPE, IPC, Workforce and/ Ward movement due to capacity pressures were discussed.
- Patients on Covid wards primary reason for admission was Covid therefore multiple patient groups who had other underlying conditions may have been co-located on a Covid ward – However ward staff alongside the medical workforce did ensure patients were safely occupying the same ward space through the utilisation of side rooms.

The primary reason for admission to these wards would have been a positive Covid result, to help prevent the transmission to other areas. Such patients may have other conditions as well as the Covid, such as COPD and other illnesses like diabetes or heart conditions for example. Scabies could be identified in a patient on any of our clinical areas, and would be dealt with in the usual manner.

Q8 Were all deaths reported to the HSE?

A8 I can confirm that all deaths were reported in accordance with the requirements of the Health and Safety Executive, Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013

*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.

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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.

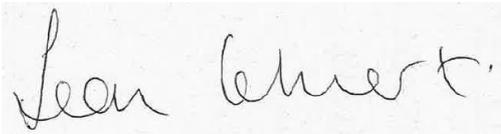
Should you have a complaint about the response or the handling of your request, please also contact my office to request a review of this. If having exhausted the Trust's FOIA complaints process you are still not satisfied, you are entitled to approach the Information Commissioner's Office (ICO) and 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 671612.

Yours,



Jean Lehnert
Data, Security & Protection Manager