

Ref: FOIA Reference 2022/23-583

Royal Stoke University Hospital

Data, Security and Protection Newcastle Road Stoke-on-Trent Staffordshire ST4 6QG

Date: 11th April 2023

Email foi@uhnm.nhs.uk

Dear

I am writing to acknowledge receipt of your email dated 13th January 2023 requesting information under the Freedom of Information Act (2000) regarding deaths and waits

On the same day we contacted you via email as we require clarification on what you mean by saying "Part 1" and "Part 4" as these don't seem to relate to Q1 or Q4.

On 16th January 2023 you replied via email with:

'PART 1

The total number of deaths considered more likely than not to have occurred due to problems in care in the trust for each quarter for which records are available

PART 2

The highest number of days of delayed discharge in your trust in of 2018, 2019, 2020, 2021 and 2022

PART 3

The longest waiting time recorded in 2018, 2019, 2020, 2021 and 2022 for a patient to receive the result of each of the following diagnostic tests Part 3a Magnetic Resonance Imaging test (MRI) Part 3b Echocardiogram Part 3c Non-obstetric ultrasound

PART 4

The numbers of patients removed from outpatient or elective care waiting lists with a removal reason of death, for 2018, 2019, 2020, 2021, and 2022.

PART 5

The longest period of time that a patient spent on a waiting list for a non urgent operation in 2018, 2019, 2020, 2021 and 2022. For each year, please also include, if possible, which category of operation is concerned.'

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 I am writing under the Freedom of Information Act. This is a request of multiple parts. Please treat each part as a separate request.

Please provide me with the following information from your Trust. In all references to years I am asking for the information from the entire calendar year (January to December inclusive).

1. The total number of deaths considered more likely than not to have occurred due to problems in care in the Trust for each quarter for which records are available

- A1 The Structured Judgement Review Form at UHNM does not ask the reviewer to state if the death was due to a problem in care. Instead each identified problem in care specifies if harm was caused or not. The figures below are the number of SJRs where a problem in care was identified that was deemed to have caused harm to the patient. Each case may have more than one problem identified that caused harm:
 - (M) 1. Problem in assessment, investigation or diagnosis

We are unable to provide 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 as being <5

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

Date of Death	#
2018	
Qtr1	<5
2019	
Qtr4	<5
2020	
Qtr3	<5
Qtr4	<5
2021	
Qtr1	<5
Qtr2	<5
Qtr4	<5
2022	
Qtr1	<5
Qtr3	<5
Qtr4	<5

Q2 The highest number of days of delayed discharge in your trust in of 2018, 2019, 2020, 2021 and 2022







A2 See below:

Year	Highest Number of Delayed Discharge Days
2018	79
2019	61
2020	40
2021	47
2022	57

Q3 The longest waiting time recorded in 2018, 2019, 2020, 2021 and 2022 for a patient to receive the result of each of the following diagnostic tests:.

Magnetic Resonance Imaging test (MRI) Echocardiogram Non-obstetric ultrasound

A3 See below:

Echo cardiogram reports are not communicated to the patients. The test is reviewed and reported on (at the time of the test) in a standalone system which is immediately exported to the hospital information system. From there the result will be forward to the requesting clinician

Based on manual validation of: 'max' report turnaround in days

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Row		2018	2019	2020	2021	2022
Labels						
MRI		275	124	95	213	215
Ultrasc	ound	146	112	156	157	107

Q4 The longest period of time that a patient spent on a waiting list for a non-urgent operation in 2018, 2019, 2020, 2021 and 2022. For each year, please also include, if possible, which category of operation is concerned.

A4 See below:

Year	Specialty	Number of Weeks from DTA to admit date	Procedure
2018	100 General Surgery	423	Laparoscopic splenectomy
2019	101 Urology	156	Circumcision
2019	301 Gastroenterology	156	Endoscopy
2020	301 Gastroenterology	132	endoscopy
2021	340 Respiratory Medicine	471	Non Invasive Ventilation
2022	160 Plastic Surgery	228	Right Nipple Areolar Micropigmentation







Q5 The numbers of patients removed from outpatient or elective care waiting lists with a removal reason of death, for 2018, 2019, 2020, 2021, and 2022.

In part 1, if these numbers are only available for patients who have not been identified as having learning disabilities that is acceptable. The request is based on this announcement by the Department of Health and Social Care, and the 'Learning from Deaths Dashboard' template announced by NHS England.

In part 4, I recognise that it is not possible to determine the cause of death of the patient. That is not what I am requesting.

For all parts of this request, if the data to the end of 2022 is not available, then please include as much of the year as possible.

If the Trust experienced any merger in the timeframes required, please include if possible the results for the separate defunct trusts before the merger, and then the results for the new Trust.

A5 Number of patients removed from the WL where the removal reason is "Patient Died".

Calendar	Number of
Year	unique patients
2018	483
2019	407
2020	670
2021	735
2022	766
Grand	3061
Total	

*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: <u>http://www.uhnm.nhs.uk/aboutus/Statutory-Policies-and-Procedures/Pages/Freedom-of-Information-Disclosure-Log.aspx</u>







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 <u>www.ico.org.uk</u>.

If following review of the responses I can be of any further assistance please contact my secretary on 01782 671612.

Yours,

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Rachel Montinaro Data Security and Protection Manager - Records



