

Royal Stoke University Hospital

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

Email foi@uhnm.nhs.uk

Ref: FOIA Reference 2023/24-333b

Date: 25th September 2023

Dear

I am writing to acknowledge receipt of your email dated 14th September 2023 requesting information under the Freedom of Information Act (2000) regarding our response on guidelines.

You emailed the following:

'Many thanks for your reply and your information sent so far. If I could ask a couple of questions/clarifications if possible:

1) I appreciate the list of audits completed and accept your exemption for extra details. I had hoped these would be held in one database, but if they are not, I understand it would be too difficult to achieve.

However, would you be able to split these between general surgery and urology department (by year as well as you already have done)? I would be very grateful.

2) In regards to "The Trust considers your request to be exempt from disclosure in accordance with section 43(2) of the Freedom of Information Act as to release this information would, or would be likely to, prejudice the commercial interests of the Trust."

Could you explain this in a bit more detail? Having seen other guidelines, I can't see how these would prejudice commercial interests. Additionally, other trusts which I have made similar requests to have provided the guidelines, and I am not clear as to why this would apply to one trust but not another.

I can also find other guidelines which appear to have been shared due to freedom of information requests on the internet hosted by your organisation, and others which are generally accessible from the internet:

https://www.uhnm.nhs.uk/media/6508/20220117-paediatric-guidelines-2018-20-foi-ref-507-2122-2-of-2.pdf

https://www.uhnm.nhs.uk/media/2988/20190617-crtiical-guideline-foi-ref-119-1920pdf-final.pdf https://www.uhnm.nhs.uk/media/6537/20220203-mhp-policy-btp008-foi-ref-518-2122-4-of-4.pdf

Given this, I would appreciate some further explanation about your exemption. Would you say this applies to all your guidelines, only some, or only part of some? Given the above, would you be willing to reconsider your section 43 exemption in whole or in part?"







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.

Response dated 13th September- see below for amendments

Q1 I am writing to you under the Freedom of Information Act 2000 to request some information I am interested in. This is 3 separate areas.

Please may you provide me with:

- 1a. A list of all current and past audits and quality improvement projects started within the urology and general surgical department over the last 10 years.
- 1b. Please provide date started, date completed, title, objectives, summary, action plan, whether the action plan was completed, and any closing of the loop/repeat.
- A1 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 question 1b is not held centrally, but may be recorded in individual records. In order to confirm whether this information is held we would therefore have to individually access all individual records held within the Trust for the last ten years 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 individual 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 if your request is shortened to just A list of all current and past audits and quality improvement projects started within the urology and general surgical department over the last 10 years. we are able to comply within the 18 hour time frame. In order to avoid delay to your response we have provided this below.

- Audit of Nursing Documentation
- Re-audit of Consent
- Re-audit of VTE Prophylaxis
- Re-audit of Mews
- Audit of Nutrition
- Audit of Handover
- Re-audit of MM03
- Audit of MM01
- Re-audit of Blood Transfusions
- Re-audit of DNAR
- Audit of Record Keeping
- Audit of Pressure Ulcers







- Re-audit of Discharge
- Audit of Paediatric Discharge
- Audit of Falls
- Effective and Safe Discharge Audit of nurse to nurse communication forms
- Audit of Antimicrobial Prescribing at UHNS Quarter 1 (Antimicrobial Stewardship)
- Re-audit of Gentamicin
- Re-audit of Vancomycin
- Re-audit of Antibiotics in Severe Sepsis
- Re-audit of Antibiotic Prophylaxis in Surgery
- Re-audit of UTI Managament
- Re-audit of Pneumonia Management
- Audit of Health Promotions
- Implemented Enhanced recovery for urological Cystectomy formation Illeal conduit patients

- Audit of Therapeutic Observation
- Re-audit of Health Promotion at UHNS
- Audit of Nutrition Monitoring Charts
- Re-audit of Think Glucose
- EOL Documentation
- Re-audit of Consent
- Re-audit of VTE Prophylaxis
- Re-audit of Mews
- Audit of Nutrition
- Audit of Handover
- Re-audit of MM03
- Audit of MM01
- Re-audit of Blood Transfusions
- Re-audit of DNAR
- Audit of Pressure Ulcers
- Re-audit of Discharge
- Audit of Paediatric Discharge
- Audit of Falls
- Audit of Policy C49 Pathology
- Audit of Policy C49 Imaging
- Audit of Discharge Summaries-Weekends
- Audit of MEWS
- Audit of Pneumonia
- Audit of Vancomycin
- Audit of Gentamicin
- Audit of Sepsis
- Audit of UTI
- Audit of Surgical Prophylaxis
- Audit of NICE Guidance for the Management of AKI
- Audit of NICE Guidance for Self Harm
- Audit of NICE Guidance for Dementia

- Audit of Therapeutic Observation
- Re-audit of Health Promotion at UHNS







- Audit of Nutrition Monitoring Charts
- Re-audit of Think Glucose
- National Falls Audit
- Audit of the 18 Week Pathways
- EoL SOP Audit
- EoL Documentation
- VOICES Audit Jan 2015
- Audit of the Comfort Rounds
- Audit of the Falls Care Bundle
- Audit of NG Tubes
- Audit of the R Skin / C Skin Care Bundle
- Re-audit of Consent
- Re-audit of VTE Prophylaxis
- Re-audit of Mews
- Audit of Nutrition
- Audit of Handover
- Re-audit of MM03
- Audit of MM01
- Re-audit of Blood Transfusions
- Re-audit of DNAR
- Audit of Pressure Ulcers
- Re-audit of Discharge
- Audit of Paediatric Discharge
- Audit of Falls
- Audit of Policy C49 Pathology
- Audit of Policy C49 Imaging
- Audit of the Management of Patients with UTI
- Audit of the Management of Patients with Sepsis
- Audit of Nice Guidance for the Management of AKI

- DNAR- Stoke
- DNAR County
- Health Promotion
- Record Keeping
- Therapeutic Observations
- Nutrition
- Nutrition Monitoring
- R Skin / C Skin
- Handover
- Comfort Rounds
- Falls Care Bundle
- VTE
- MEWS
- Pressure Ulcers
- Discharge Policy
- Think Glucose
- Patient Experience
- Complaints Survey
- Sepsis
- Time to Intervene







- AKI
- Mental Health in General Hospitals
- Falls and Fragility Fractures
- MECC
- Fluid Balance
- IV Fluids
- Nutrition
- Stress Urinary Incontinence Audit

- Storage, Prescription, supply and administration of medicines
- Near Miss Dispensary Errors
- Comfort Rounds
- Falls Care Bundle
- VTE
- Pressure Ulcers inc R skin/ Cskin
- Think Glucose
- Patient Experience
- Complaints Survey
- Proud to Care Audits
- Bedrails Audit
- Fluid Balance
- IV Fluids
- Nutrition
- Mental Capacity Act
- Repeat antipsychotics
- C08 Therapeutic Observations
- Preventing III Health by risky behaviours alcohol & tobacco
- Reducing the impact of serious infections (AMR & Sepsis)
- Verification of Death Record Audit
- BAUS Urology Audits: Cystectomy
- BAUS Urology Audits: Nephrectomy
- BAUS Urology Audits: Percutaneous nephrolithotomy
- BAUS Urology Audits: Radical prostatectomy
- BAUS Urology Audits: Urethroplasty
- BAUS Urology Audits: Female stress urinary incontinence
- CG 171 Urinary Continence

- Re-Audit of the Treatment and Management of Patients with Acute Kidney Injury
- Audit of the AKI Pathway
- Audit of the Labelling of Blood Samples
- Audit of IV Fluid Stock
- Re-audit of DNACPR orders
- Audit of the Recording of CPR status
- Audit of the Period Prior to Cardiac Arrest
- Audit of Cardiac Arrest
- Audit of Acutely III Patients in Hospital
- Audit of the Escalation of NEWS
- Audit of the provision of timely death certificates







- Care After Death Audit
- Review of the Availability of Syringe Pumps
- Re-audit of the Falls Policy (RM08)
- Re-audit of the Bed Rails Assessment (RM10)
- Audit of the Child Protection Policy (C23)
- Audit of the Protection of Adults at Risk of Abuse and Neglect who have Care and Support Needs (C36)
- Re-audit of Self Harm
- Audit of Restraint
- Audit of Learning Disabilities
- Audit of Therapeutic Observations (C08)
- Audit of Management Of MCA / DOLs
- Audit of the Discharge of Homeless Patients
- Audit of the Prescription and Management of Oxygen (C57)
- Audit of the Management of Patients on Stage 1 & Stage 2 Oxygen
- Audit of SOP 17
- Audit of the Smoking and Alcohol Assessment and Management
- Alcohol use disorders: diagnosis and management (QS11)
- Audit of Alcohol Withdrawal
- Re-Audit of Health Promotion at University Hospital of North Midlands
- Re-audit of Bedside Transfusion
- Audit of Restricted use of open systems for injectable medication
- Audit of the Administration of IV Drugs
- Audit of the Storage of COSHH Substances
- Obesity working with local communities PH42
- Audit of Obesity Identification, Assessment and Management
- Audit of the Management of NG Tubes
- Nutrition support in adults oral nutrition support, enteral tube feeding and parenteral nutrition CG32
- Re Audit of Thrombo-prophylaxis (C28)
- Audit of Anticoagulation related major bleeding.
- Re-audit of the Provision of Comfort Rounds
- Re-audit of Think Glucose
- Re-audit of the Discharge Process
- Re-audit of Patient Transfer
- Audit of Aseptic None Touch Technique
- Audit of the Completion of Patient Profiles

- Re-Audit of the Treatment and Management of Patients with Acute Kidney Injury
- Audit of the Labelling of Blood Samples
- Audit of the provision of timely death certificates
- Audit of the Protection of Adults at Risk of Abuse and Neglect who have Care and Support Needs (C36)
- Audit of Learning Disabilities
- Audit of Therapeutic Observations (C08)
- Audit of Aseptic None Touch Technique
- Audit of Cardiac Arrest
- Audit of the Patient Pathway (Emergency Surgery / General Surgery / Urology)
- Complications following inquinoscrotal surgery







- Detection of Muscle in TURBT specimens
- The current Benign Urology X ray MDT meeting A closed-loop audit of Urology Benign MDT meeting outcomes at a UK University teaching hospital July 2018 to Feb 2020
- MRI Prostate Audit
- A Retrospective audit into Green Light Laser for Managing Bladder outflow obstruction
- Uncomplicated Ureteric Stones: Triage, Assessment & Management
- BAUS Renal Colic Audit 2020/2021

- Re-Audit of the Treatment and Management of Patients with Acute Kidney Injury
- Re-Audit of Fluid Balance
- National End of Life Audit (Case note review)
- National End of Life Audit (Relative questionnaire)
- Re-Audit of Care After Death
- Re-Audit of Verification after Death
- Audit of Safeguarding Documentation
- Audit of the Readmission of Patients with Dementia
- Audit of Discharge Summaries
- Re-audit of Antipsychotic Medication
- Review of Waiting Times for Patients with Learning Disabilities
- Re-Audit of the Mental Health Policy
- Re-Audit of Self Harm (inc. admissions)
- Re-Audit of Learning Disabilities (inc. multiple transfers)
- Re-Audit of 4AT Assessments
- Re-Audit of Inpatient Falls
- Re-Audit of Bed Rails
- Re-Audit of Cardiac Arrest
- Re-Audit of DNACPR Orders
- An Audit of Nutritional Adequacy at UHNM
- Audit of Prescribed Entral Feeds
- Audit of the completion of food record charts
- Audit of the prescription of oral nutritional supplements by non-dietetic clinical staff
- Review of the Nutritional Status for Patients admitted to UHNM
- Audit of the Assessment and Management of Pain
- Audit of Assessment and Escalation of NEWS
- Audit of the Think Glucose and the Care of Patients with Diabetes
- Re-Audit of VTE and Post-Operative Dalteparin
- Renal & Ureteric Stones: Assessing Metabolic Testing Re-audit
- Outcomes from suprapubic catheter changes performed at the Urology Ambulatory Unit 2022
- Audit of Policy RE01
- Re-audit of Tissue Viability
- Audit of Falls Reporting
- Re-audit of Bedrails Management
- Re-Audit of the Treatment and Management of Patients with Acute Kidney Injury
- Re-Audit of Cardiac Arrest
- Re-Audit of DNACPR Orders
- Re-Audit of the ReSPECT Document
- Audit of NEWs Monitoring and Management
- Audit of PEWs Monitoring and Management
- Audit of Pain Management







- Re-audit of VTE Risk Assessment Completion
- Audit of the Mental Health Policy
- Audit of Deprivation of Liberty
- Audit of Therapeutic Observations
- Re-audit of Fluid Balance
- National End of Life Audit (Case note review)
- National End of Life Audit (Relative questionnaire)
- Audit of Care After Death
- A Review of the Admission Circumstances of Patients with Palliative Care Needs Who Die within 72 hours of Admission to UHNM
- Audit of Verification of Death
- Appropriate antibiotic prescribing for UTI in adults aged 16+
- Recording of NEWS2 score, escalation time and response time for unplanned critical care admissions
- Supporting patients to drink, eat and mobilise after surgery
- Emergency Ureteric injury Management (REJOIN) Audit
- Muscle Invasive Bladder Cancer at Transurethral Resection of Bladder Audit (MITRE)
- Acute urinary retention Audit 2nd cycle
- Readmission and sepsis after LATP prostate biopsy

Amended response- please see attached

- Q2 A list of all current clinical guidelines within the field of urology.
 - 1. Please provide a summary table of each guideline, when it was first created, last updated, frequency of updates
 - 2. Please provide a copy of each guideline in word document or pdf form.
- A2 1. See attached
 - 2. The Trust considers your request to be exempt from disclosure in accordance with section 43(2) of the Freedom of Information Act as to release this information would, or would be likely to, prejudice the commercial interests of the Trust. The Trust has applied the public interest test to this request and feels that the public interest in maintaining the exemption outweighs the public interest in disclosure.
- Q3 A list of clinical chemistry/electrolyte guidelines (e.g. hyperkalaemia, hypokalaemia etc)
 - 1. Please provide a summary table of each guideline, when it was first created, last updated, frequency of updates
 - 2. Please provide a copy of each guideline in word document or pdf form.
- A3 1. See attached
 - 2. The Trust considers your request to be exempt from disclosure in accordance with section 43(2) of the Freedom of Information Act as to release this information would, or would be likely to, prejudice the commercial interests of the Trust. The Trust has applied the public interest test to this request and feels that the public interest in maintaining the exemption outweighs the public interest in disclosure.

Amended response:

There are many types of guidelines, some of which are national, and others are what UHNM produce. The guidelines you are quoting above are national and therefore shareable, however







the guidelines that you are requesting are produced by UHNM which are then shared with member organisations who pay a fee for these guidelines, to give them to yourself for free could lead to withdrawal of members and reduction in revenue, impacting future service provision and financial consequences for the department's continuation. Therefore the section 43 exemption was correctly applied.

*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:

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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,







Rachel MontinaroData Security and Protection Manager - Records



