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| **FREEDOM OF INFORMATION REQUESTS May 2016** | |
| **Request** | **Response** |
| **FoI No: 526 – received 5 May 2016**  Please *will* you send me the following information: Do you currently commission either intermediate or community dermatology services for your population? *If* so please provide a copy of the service specification for this service;  Please advise the name of the organisation that has been commissioned to provide this service; Please advise the date on which the contract is due to end. | NHS Barnsley CCG does not commission services which are deemed Intermediate or Community. |
| **FoI No: 527 – received 9 May 2016**   1. In the last five years, how much money has been spent each year by NHS Barnsley CCG on providing support for fathers who suffer from mental health problems following the birth of a child? 2. In the last five years, how much money has been spent each year by NHS Barnsley CCG on providing support for mothers who suffer from mental health problems following the birth of a child? 3. In the last five years, how many fathers have been treated each year for mental health issues relating to the birth of a child in the area covered by NHS Barnsley CCG? 4. In the last five years, how many mothers have been treated each year for mental health issues relating to the birth of a child in the area covered by NHS Barnsley CCG? 5. In the last five years, how many diagnoses of postnatal depression in men have been made in each year in the area covered by NHS Barnsley CCG? 6. In the last five years, how many diagnoses of postnatal depression in women have been made in each year in the area covered by NHS Barnsley CCG? 7. How many individuals are resident in the area covered by NHS Barnsley CCG and how many births have been registered each year in the last five years?   In addition to the above, I would be very interested in as much information as you are able to provide about these services in your area, for example details of any specific initiatives that are in place to tackle this issue and examples of best practice. | NHS Barnsley Clinical Commissioning Group are not the owners of the information relating to secondary care mental health services. Monthly reports are received regarding activity but are not broken down by gender or diagnosis and the funding streams for this are on a block contract basis. For further information please contact South West Yorkshire Partnership NHS Foundation Trust. Barnsley’s Primary Care Team do offer mental health services such as IAPT but this would be commissioned by NHS England. |
| **FoI No: 528 – received 12 May 2016**  How much of your baseline funding for 2016-17 has been identified by NHS England as additional funding for (a) children and young people’s mental health services and (b) eating disorder services?  How much of this additional funding do you plan to spend on (a) children and young people’s mental health services and (b) eating disorder services in 2016-17?  How much of this additional funding for (a) children and young people’s mental health services and (b) eating disorder services has been released to mental health providers since the start of the financial year 2016-17? | How much of your baseline funding for 2016-17 has been identified by NHS England as additional funding for (a) children and young people’s mental health services and (b) eating disorder services?  In 2016/17 the NHS England additional funding allocation within our baseline for children and young people's mental health services is £567,000, it is expected that an allocation adjustment from NHS England will be actioned in 2016/17 relating to eating disorders for a value of £143,000  How much of this additional funding do you plan to spend on (a) children and young people’s mental health services and (b) eating disorder services in 2016-17?  We plan to spend £567,000 (of the additional funding) on children and young people's mental health services and £143,000 (of the additional funding) on Eating Disorders.  How much of this additional funding for (a) children and young people’s mental health services and (b) eating disorder services has been released to mental health providers since the start of the financial year 2016-17?  None of the additional funding has yet been released in 16/17 as all stakeholders are currently submitting proposals for consideration. Priorities agreed in 15/16 and funded by the additional funding for 15/16 will have first call on the 16/17 funding. The agreed priorities for 15/16 relating to children and young people's mental health services can be found in the Local Transformation Plan on the CCG's and Local Authority's website. |
| **FoI No: 529 – received 12 May 2016**   1. Does the CCG or any constituent practices currently utilise any of the following prescribing support software? Please indicate which:    * Eclipse Live    * Scriptswitch    * FDB Optimise RX    * DXS    * Other 2. Does the CCG utilise any of the following as processes or policy to support adherence to the local formulary or specific medicines usage? Please indicate which:    * GP quality management contract or payment (or similar)    * Enhanced service payment (or similar)    * Prescribing incentive scheme (or similar) 3. What is the current year 16/17 CCG QIPP/efficiency savings plan target? 4. What is the value of the prescribing element for the current year 16/17 CCG QIPP/efficiency savings plan target? | Does the CCG or any constituent practices currently utilise any of the following prescribing support software? Please indicate which:   * + Eclipse Live Yes   + Scriptswitch Yes   + FDB Optimise RX   + DXS   + Other     Does the CCG utilise any of the following as processes or policy to support adherence to the local formulary or specific medicines usage? Please indicate which:   * + GP quality management contract or payment (or similar)   + Enhanced service payment (or similar) Yes – prescribing of specialist drugs   + Prescribing incentive scheme (or similar) Yes     What is the current year 16/17 CCG QIPP/efficiency savings plan target? Currently QIPP plans are £7.1m but this is monitored throughout the year to ensure any further financial risks are managed effectively and that the CCG delivers its financial statutory duty.  What is the value of the prescribing element for the current year 16/17 CCG QIPP/efficiency savings plan target? £4 Million is medicines related, however not all is associated with primary care prescribing. |
| **FoI No: 530 – received 12 May 2016**  We understand that the CCG refers patients with suspected prostate cancer to the following NHS trusts.  Please confirm:  Barnsley Hospital NHS Foundation Trust  Doncaster and Bassetlaw Hospitals NHS Foundation Trust  Leeds Teaching Hospitals NHS Trust  Rotherham NHS Foundation Trust  Sheffield Teaching Hospitals NHS Foundation Trust  University College London Hospitals NHS Foundation Trust  2.     Please advise whether the CCG refers patients with suspected prostate cancer to any other NHS trusts?  3.     Please can you confirm whether the CCG still references the following document(s) in relation to the treatment of patients with Prostate Cancer:  Prostate Cancer Guidance: LHRH analogues / Cyproterone / Bicalutamide, Date Prepared May 2015, Review Date May 2017  4.     If yes, when is/are the document(s) expected to be reviewed?  5.    Does the CCG reference any other Referral Pathways / Care Pathways in relation to the treatment of Prostate Cancer?  If so, please provide a copy or website link.  6.     If yes, when is/are the document(s) expected to be reviewed?  7.     Please can you confirm whether we are permitted to reuse the above information under the Open Government Licence? | **Barnsley CCG does not make referrals for patients with suspected prostate cancer – this is done by individual GP Practices; Barnsley CCG does not hold this information.** |
| **FoI No: 531 – received 13 May 2016**  1. What is the current waiting time for treatment for talking therapies in your area in primary healthcare? Please break down the wait for each type (or ‘choice of modality’) which is available in your area.  2. What is the current longest wait for talking therapies in your area in primary healthcare? That is, what length of time has the person who’s been waiting the longest been waiting? Please give the wait for each type of therapy (or ‘choice of modality’) which is available in your area.  3. What is the current waiting time for treatment for talking therapies, appointments with psychologists or psychiatrists in your area in secondary healthcare? (Please break down the wait for each type (or ‘choice of modality’) which is available in your area.  4. What is the current **longest** wait for talking therapies, appointments with psychologists or psychiatrists in your area in secondary healthcare? That is, what length of time has the person who’s been waiting the longest been waiting? Please give the wait for each type of therapy (or ‘choice of modality’) which is available in your area.  For the above questions please provide the figure for referral to first treatment waiting time, not referral to 'assessment' or 'intervention' time.  5. How many referrals have there been into adult mental health services in your area at a) primary care level and b) secondary care level in the calendar years 2013, 2014, 2015 and 2016 to date.  6. What is the maximum number of talking therapy sessions an adult, eligible for therapy, can receive in your area at primary and secondary care level.  **As a separate FOI request, please provide the following information about the Child and Adolescent Mental Health Services in your area.**  1. In Child and Adolescent Mental Health Services (CAMHS), what is the current waiting time for a young person to receive talking therapies. Please give the wait for each type of therapy (or ‘choice of modality’) which is available in your area.  2. In CAMHS, what is the current longest wait to receive talking therapies? Please give the wait for each type of therapy (or ‘choice of modality’) which is available in your area.  4. What is the maximum number of talking therapy sessions a young person, eligible for therapy, can receive in your area at primary and secondary care level.  5. How many referrals have there been into child and adolescent mental health services in your area at a) primary care level and b) secondary care level in the calendar years 2013, 2014, 2015 and 2016 to date. | Further to your request for information Barnsley CCG does not hold any waiting time data for this service; however please redirect your request to SWYPFT who manages the IAPT Service using the link below:-  South West Yorkshire Partnership <http://www.southwestyorkshire.nhs.uk/about-us/corporate-information/freedom-of-information/> |
| **FoI No: 532 – received 16 May 2016**  1a. Approximately how many members of staff do you have?  1b. Approximately how many contractors have routine access to your information?  (see [www.suresite.net/foi.php](http://www.suresite.net/foi.php) for clarification of contractors if needed)  2a. Do you have an information security incident/event reporting policy/guidance/management document(s) that includes categorisation/classification of such incidents?  2b. Can you provide me with the information or document(s) referred to in 2a? (This can be an email attachment of the document(s), a link to the document(s) on your publicly facing web site or a 'cut and paste' of the relevant section of these document(s))  3a. Do you know how many data protection incidents your organisation has had since April 2011? (Incidents reported to the Information Commissioners Office (ICO) as a Data Protection Act (DPA) breach)  Answer: Yes, No, Only since (date):  3b. How many breaches occurred for each Financial Year the figures are available for?  Answer FY11-12: FY12-13: FY13-14: FY14-15:      4a. Do you know how many other information security incidents your organisation has had since April 2011? (A breach resulting in the loss of organisational information other than an incident reported to the ICO, eg compromise of sensitive contracts or encryption by malware. )  Answer: Yes, No, Only since (date):  4b. How many incidents occurred for each Financial Year the figures are available for?  Answer FY11-12: FY12-13: FY13-14: FY14-15:    5a. Do you know how many information security events/anomaly your organisation has had since April 2011? (Events where information loss did not occur but resources were assigned to investigate or recover, eg nuisance malware or locating misfiled documents.)  Answer: Yes, No, Only since (date):  5b. How many events occurred for each Financial Year the figures are available for?  Answer FY11-12: FY12-13: FY13-14: FY14-15:  6a. Do you know how many information security near misses your organisation has had since April 2011? (Problems reported to the information security teams that indicate a possible technical, administrative or procedural issue.)  Answer: Yes, No, Only since (date):  6b. How many near-misses occurred for each Financial Year the figures are available for?  Answer FY11-12: FY12-13: FY13-14: FY14-15: |  |
| **FoI No: 533 – received 16 May 2016**  How many current patients have you got that are in receipt of NHS Continuing Healthcare Funding?  and  What is the percentage split of these patients receiving NHS Continuing Healthcare in the following locations:   * + in their own home   + in a care home   What is the total number of patients receiving NHS Continuing Healthcare in the following locations:   * + in their own home   + in a care home   and  What is the yearly financial percentage split and yearly cost of these patients receiving NHS Continuing Healthcare in the following locations:   * + in their own home   + in a care home | How many current patients have you got, that are in receipt of NHS Continuing Healthcare Funding?  CHC Fully Funded (inclusive of Fast Tracks) - 132  Joint Funded - 27  What is the percentage split of these patients receiving NHS Continuing Healthcare in the following locations:   * + in their own home   CHC Fully Funded (inclusive of Fast Tracks) - 61%  Joint Funded - 70%     * + in a care home   CHC Fully Funded (inclusive of Fast Tracks) - 39%  Joint Funded - 30%    What is the total number of patients receiving NHS Continuing Healthcare in the following locations:   * + in their own home   CHC Fully Funded (inclusive of Fast Tracks) - 81  Joint Funded - 19     * + in a care home   CHC Fully Funded (inclusive of Fast Tracks) - 51  Joint Funded - 8    What is the yearly financial percentage split and yearly cost of these patients receiving NHS Continuing Healthcare in the following locations:  Forecast for current patients for 2016/17 ( Estimated cost based on care package values in May 2016)   * + in their own home   Joint Funded £444K, 6%  Fully Funded £3,390k 49%   * + in a care home   Joint Funded £380K, 6%  Fully Funded £2,683k 39% |
| **FoI No: 534 – received 16 May 2016** |  |
| **FoI No: 535 – received 17 May 2016**  1. How many people were prescribed with diamorphine in the following years:  2011/12, 2012/13, 2013/14, 2014/15, 2015/16  2. Please tell me, if known, how many of those people prescribed diamorphine subsequently overcame their heroin addiction.  3. If known, tell me how long each diamorphine prescription lasted for. | The NHS Barnsley CCG does not hold the information which you have requested.  The only information on prescribing we have access to is medicines cost and volume data , available from the Health and social Care Information Centre (HSCIC) and which is not linked to patient or clinical condition.  e.g.  Diamorphine is prescribed for a variety of conditions ( pain relief) and doses ( could use 10 vails a day or one vial a day depending on dose prescribed ) and therefore we would not be able to calculate the length of time a prescription lasted for from the data we can access. We definitely would not be able to identify the condition for which the Diamorphine was prescribed.  I believe that the information you have asked for would be held by the Commissioner of the service.  Substance Misuse services in Barnsley are commissioned by the local council.  <https://www2.barnsley.gov.uk/services/public-health/substance-misuse/barnsley-drug-and-alcohol-support-services> |
| **FoI No: 536 – received 19 May 2016**  1.       Most current Annual Report  2.       Most current organisation Business Plan | <http://www.barnsleyccg.nhs.uk/strategies-policies-and-plans.htm> |
| **FoI No: 537 – received 20 May 2016**   1. The contact details of the Procurement Officer or Medicines Management Pharmacist responsible for the evaluation of blood glucose testing strips.      1. The contact details of the GP Diabetic Lead for the evaluation of blood glucose testing strips.      1. The contact details of the Lead Diabetic Nurse for the evaluation of blood glucose testing.      1. Please confirm if the CCG follows any guidance for the standardisation and guidance for Blood glucose strips from an independent body e.g. LPP, GMMMG….      1. Please confirm which strips are currently recommended on the CCG formulary      1. Please provide the current standardisation guidelines for blood glucose meters and testing strips.      1. Please can you confirm or deny whether the CCG currently has rebates for ANY blood glucose strips and if so, which ones are these? | 1. The contact details of the Procurement Officer or Medicines Management Pharmacist responsible for the evaluation of blood glucose testing strips.   No one person is responsible for the evaluation. The Diabetes Formulary  (which includes BGTS) is reviewed by stakeholders and endorsed by the Area Prescribing Committee and the Barnsley Diabetes Local service Advisory Group. The ongoing review is being led by CCG Medicines Management Team and Chris Lawson – Head of Medicines Optimisation.     1. The contact details of the GP Diabetic Lead for the evaluation of blood glucose testing strips.   There is not one GP leading on the evaluation of BGTS. A number of GP’s as key stakeholders have been consulted and also GP’s are members of  the two Committees which would endorse the Diabetes Formulary , as explained  in answer Q2   1. The contact details of the Lead Diabetic Nurse for the evaluation of blood glucose testing.   There is not one Diabetic Nurse leading on the evaluation of BGTS. All local diabetes nurses,  as key stakeholders have been consulted and also some specialist nurses are members of  the Barnsley Local Diabetes Service Advisory Group which would endorse the Diabetes Formulary , as explained  in answer Q2     1. Please confirm if the CCG follows any guidance for the standardisation and guidance for Blood glucose strips from an independent body e.g. LPP, GMMMG….   The CCG considers the accuracy of the BGT meters and strips and the CCG seeks evidence from manufacturers and independent bodies regarding such accuracy.     1. Please confirm which strips are currently recommended on the CCG formulary   The BGTS is currently under review  and the public link to the current Formulary section ( Page 62 for BGTS) is listed below :-  <http://www.barnsleyccg.nhs.uk/CCG%20Downloads/Members/Medicines%20management/Prescribing%20Guidelines/201605%20-%20Barnsley%20DM%20Guidelines%20Final%20Draft.pdf>     1. Please provide the current standardisation guidelines for blood glucose meters and testing strips.   An important and one of many criteria which BGTS are evaluated on for inclusion within the formulary is accuracy . All meters within the formulary have a basic requirement of complying with ISO specification 15197:2013.  Further selection criteria can be seen in the current Formulary section ( Page 62 for BGTS) as linked in Q5  The CCG seeks evidence from manufacturers and independent bodies regarding such accuracy in its evaluation as explained in Q4 response.   1. Please can you confirm or deny whether the CCG currently has rebates for ANY blood glucose strips and if so, which ones are these?   The NHS Barnsley CCG does not currently have any rebates in place for any BGTS or meter. |
| **FoI No: 538 – received 20 May 2016**  1.       Annual IT Budget  Please provide split between:   * + Capital Expenditure   + Revenue Expenditure   2.       How much of your capital expenditure is spent on outsourced IT services?  Provide split between:   * + Capital Expenditure   + Revenue Expenditure     3.       What is your anticipated capital refresh budget for data centre investment? | 1.       Annual IT Budget  Please provide split between:   * + Capital Expenditure **£0**   + Revenue Expenditure **£760K for 2016/17**   2.      How much of your capital expenditure is spent on outsourced IT services?  Provide split between:   * + Capital Expenditure **£0**   + Revenue Expenditure **£760K for 2016/17**     3.      What is your anticipated capital refresh budget for data centre investment? **£0** |
| **FoI No: 539 – received 23 May 2016**   * + Please provide details of current commissioned urgent or unscheduled care services, including GP Out of Hours services, NHS 111, minor injuries units, Urgent care services and any other service (but excluding A&E and Ambulance services).   + It is important to know specific details, please provide the value, population supported by the contract(s). Please also provide the start and completion dates for these contracts and if/when they may be due for re-tendering.   + Please can you also provide a hard copy or a link to an overview of these contracts either as a tender specification or award. |  |
| **FoI No: 540 – received 24 May 2015**  Please provide me with the following information;  How many people have been approved for CHC funding in 2015/16?  How many have been offered PHB’s?  How many of those have taken PHB’s?  How many packages have been commissioned to providers outside of PHB’s? | How many people have been approved for CHC funding in 2015/16?  CHC Fully Funded inclusive of Fast Tracks - 572  CHC Joint Funded - 9  FNC - 94   How many have been offered PHB’s?  All clients eligible for CHC funding are notified within the panel outcome that they have the right to ask for a PHB.   How many of those have taken PHB’s?  3 new clients within 15/16   How many packages have been commissioned to providers outside of PHB’s?  The functionality of our database only allows the reporting of current packages. |
| **FoI No: 541 – received 24 May 2016**  Catchment population of CCG by age         Volumes of cataract surgery performed for each financial year between 2006 and 2016 by name and type of provider (e.g. NHS Hospital, vs. Independent Provider of NHS services)  o   Prior to CCGs, please provide data from the PCTs         Source of referrals (GP, optician, hospital, other) for cataract surgery for each financial year between 2006 and 2016  o   Has e-Referrals (i.e. choose and book) been implemented?  o   What is the nature of your referral management system (if any)?  o   How many referrals by GPs, Opticians, Hospital Doctors or Others are received by the referral management system for cataract surgery, and how many of these are declined?         Mean and median waiting times from referral to cataract surgery for each financial year between 2006 and 2016         Total volume of injections for macular degeneration performed per financial year - between 2006 and 2016  o   If recorded, please also provide number of unique patients receiving injections per financial year |  |
| **FoI No: 542 – received 25 May 2016** |  |
| **FoI No: 543 – received 25 May 2016**   * + According to the data you have received from your member GP practices and other community care centres, how many patients in the calendar year 2015 presented with a surgical site infection, after they had been discharged from hospital?   + In the calendar year 2015, what was the total cost incurred by your CCG as a result of member GP practices and other community care centres treating surgical site infections after the patient had been discharged from hospital? * Do you believe your CCG is managing to reclaim the majority (>95%) of costs for treatment of surgical site infections from the Acute Trust carrying out the original procedure? | Further to your request for information I have been advised that Barnsley CCG does not hold or routinely collect this information. |