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| **FREEDOM OF INFORMATION REQUESTS** **February 2020** |

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| **FOI NO: 1481** **(Original request no. FOI1443/2019)** | **Date Received: 3 February 2020** |
| **Request :** In response to your reply to my original FOI request (see below) Further clarification is required, what are a person's needs assessed against, when establishing eligibility for NHS Continuing Healthcare?*Original request:*When carrying out an assessment of eligibility for NHS Continuing Healthcare, a relevant body must ensure that a multi-disciplinary team undertakes an assessment of needs, or has undertaken an assessment of needs, that is an accurate reflection of that person’s needs at the date of the assessment of eligibility for NHS Continuing Healthcare. Please provide a copy of the FORM/S, used for the assessment of needs as described above, or point to where it can be found. |
| **Response :**Each patient is assessed on an individual basis, patient need is assessed under each of the domains within the Decision Support Tool this tool incorporates assessments made by other health and social care professionals in order for the Multi-Disciplinary Team (MDT) to gather and review information and then use this information to make an assessment of needs and formulate a recommendation. Once this process is complete and the Decision Support Tool is signed by the MDT making the recommendation, this is taken through the panel process for Continuing Healthcare to form an eligibility decision based on the recommendation of the MDT.  Although there is no form that a persons need is assessed against, the use of the National Framework and the Decision Support Tool ensure consistency across all areas.  |

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| **FOI NO: 1482** | **Date Received: 4 February 2020** |
| **Request :** 1. Standard Firewall (Network) - Firewall service protects your corporate Network from unauthorised access and other Internet security threats 2. Anti-virus Software Application - Anti-virus software is a program or set of programs that are designed to prevent, search for, detect, and remove software viruses, and other malicious software like worms, trojans, adware, and more. 3. Microsoft Enterprise Agreement - is a volume licensing package offered by Microsoft.  The information I require is around the procurement side and we do not require any specifics (serial numbers, models, location) that could bring threat/harm to the organisation. For each of the different types of cyber security services can you please provide me with: 1. Who is the existing supplier for this contract?2. What does the organisation annual spend for each of contract? 3. What is the description of the services provided for each contract? Please do not just state firewall.4. Primary Brand (ONLY APPLIES TO CONTRACT 1&2)5. What is the expiry date of each contract?6. What is the start date of each contract?7. What is the contract duration of contract? 8. The responsible contract officer for each of the contracts above? Full name, job title, contact number and direct email address.9. Number of Licenses (ONLY APPLIES TO CONTRACT 3) |
| **Response :**. Standard Firewall (Network) - Firewall service protects your corporate Network from unauthorised access and other Internet security threats1. SICL and Redcentric2. Part of bundled services contract with eMBED Health Consortium3. Security Implications in disclosing4. Security Implications in disclosing5. 01/04/20206. 01/04/20197. 1 year8. Jamie Wike, Director of Strategic Planning and Performance, Jamie.wike@nhs.net 2. Anti-virus Software Application - Anti-virus software is a program or set of programs that are designed to prevent, search for, detect, and remove software viruses, and other malicious software like worms, trojans, adware, and more.1. IT Health2. Part of bundled services contract with eMBED Health Consortium3. Endpoint Protection4. Sophos5. 01/04/20206. 01/01/20187. 27 Months8. Jamie Wike, Director of Strategic Planning and Performance, Jamie.wike@nhs.net3. Microsoft Enterprise Agreement - is a volume licensing package offered by Microsoft. 1. Microsoft 2. Part of bundled services contract with eMBED Health Consortium3. MICROSOFT OFFICE 365 E34. N/A5. 31/12/20226. 27/12/20197. 3 years8. Jamie Wike, Director of Strategic Planning and Performance, Jamie.wike@nhs.net9. 357  The information I require is around the procurement side and we do not require any specifics (serial numbers, models, location) that could bring threat/harm to the organisation. For each of the different types of cyber security services can you please provide me with: 1. Who is the existing supplier for this contract?2. What does the organisation annual spend for each of contract? 3. What is the description of the services provided for each contract? Please do not just state firewall.4. Primary Brand (ONLY APPLIES TO CONTRACT 1&2)5. What is the expiry date of each contract?6. What is the start date of each contract?7. What is the contract duration of contract? 8. The responsible contract officer for each of the contracts above? Full name, job title, contact number and direct email address.9. Number of Licenses (ONLY APPLIES TO CONTRACT 3) |

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| **FOI NO: 1483** | **Date Received: 5.2.2020** |
| **Request :**I sent an FOI request on 24 January regarding Christmas bank holiday extended hours (below).I would like to clarify that this request related to **GP extended access – not out of hours services or GP extended hours.***I would like to know general practice extended hours over Christmas Day, Boxing Day and New Year's Day 2019-20.****Please note – this is about GP extended hours and is not about out-of-hour services.****I have attached an Excel sheet template - please can you fill it in with the following data for your CCG hub for each day:** *How many patients attended your general practice extended hours (not out of hours services) on Christmas Day 2019, Boxing Day 2019 and New Year's Day 2020?*
* *How many general practice premises were open on Christmas Day 2019, Boxing Day 2019 and New Year's Day 2020?*
* *How much money did it cost to open these premises on Christmas Day 2019, Boxing Day 2019 and New Year's Day 2020?*
* *How many GPs were on shift for each of these days?*

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| **Response :**I would like to clarify that this request related to **GP extended access – not out of hours services or GP extended hours. Barnsley CCG commission Barnsley Healthcare Federation as the provider for GP Extended Access therefore you will need to contact the Federation to obtain this information.  Contact details can be found at:**<https://barnsleyhealthcarefederation.co.uk/contact-us/> |

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| **FOI NO: 1484** | **Date Received: 5.2.2020** |
| **Request :**1.       **Does your organisation have a formal policy regarding the production of information and or cyber security risk assessments?**a.       If yes, please can you provide a copy of the above policy? **2.       Does your organisation hold a register of Information and/or cyber security risk (outside that of the corporate risk register), and if yes:**a.       Please can you list the top ten Information and/or Cyber Security Risks?    b.       How many risks are there in total on the register?c.       Please state how many risks would be categorised as the highest risk level (i.e. Critical)?d.       Please state how many risks would be categorised as the second highest risk level (i.e. Critical)?e.       Please state how many risks would be categorised as the third highest risk level (i.e. Critical)?f.        How many risk levels do you have in total (i.e. 5)?**3.       Do any of the identified information and or cyber security risks also exist on the corporate risk register?**    a.       If yes, what are those risks? **4.       When undertaking an information / cyber security risk assessment, does the authority follow a structured risk assessment process?**    a.       If so, what is that process? **5.       Does your organisation follow ISO31000 when undertaking an information / cyber security risk assessment?****6.       Does your organisation hold ISO27000 accreditation?**7.       **Does your organisation have a policy of adhering to any information security standard or framework (i.e. ISO27000, NIST etc)?**    a.       If yes, please provide a copy of the above policy?**8.       Does the authority have the following roles within the origination:**a.       Chief Security Officer (CSO),i.      If yes, which role does the CSO report into?b.       Chief Information Security Officer (CISO)i.      If yes, which role does the CISO report into?c.       Head of Information Security (Hd InfoSec)i.      If yes, which role does the Hd InfoSec report into?**9.**       **Who within your organisation who is accountable for undertaking information / cyber security risk assessments (i.e. Chief Information Security Officer, Head of Information Security, Head of Information Technology)?****10.   Who within the authority is responsible for undertaking information / cyber security risk assessments (i.e. Chief Information Security Officer, Head of Information Security, Head of Information Technology)?****11.   How many people within the organisation are responsible for undertaking information / cyber security risk assessments?****12.   Does the person(s) responsible for  undertaking  information / cyber security risk assessment:**a.       Have any formal training in this regard?i.      If so, what was it?b.       Have any industry qualifications/certification in this regard?i.      If so, what are they?**13.   How many people (permanent and contractors) currently work for the authority?****14.   How many people (permanent and contractors) currently work for the authority in information technology roles?****15.   How many people (permanent and contractors) currently work for the authority in information / cyber security roles?** |
| **Response :**1.       Does your organisation have a formal policy regarding the production of information and or cyber security risk assessments? **No Barnsley CCG does not have a formal policy of this type.**a.       If yes, please can you provide a copy of the above policy? 2.       Does your organisation hold a register of Information and/or cyber security risk (outside that of the corporate risk register), and if yes: **No.  All risks of any type are held on the CCG’s corporate risk register.**a.       Please can you list the top ten Information and/or Cyber Security Risks?    b.       How many risks are there in total on the register?c.       Please state how many risks would be categorised as the highest risk level (i.e. Critical)?d.       Please state how many risks would be categorised as the second highest risk level (i.e. Critical)?e.       Please state how many risks would be categorised as the third highest risk level (i.e. Critical)?f.        How many risk levels do you have in total (i.e. 5)?3.       Do any of the identified information and or cyber security risks also exist on the corporate risk register?    a.       If yes, what are those risks? **See extract from corporate risk register attached**.4.       When undertaking an information / cyber security risk assessment, does the authority follow a structured risk assessment process?    a.       If so, what is that process?  **Information Asset Owners are required to undertake a risk assessment for assets they are responsible for each year. This would include cyber security risks where relevant. Guidance and support is provided to IAOs to support this process.**5.       Does your orgnisation follow ISO31000 when undertaking an information / cyber security risk assessment? **No**6.       Does your orgnisation hold ISO27000 accreditation ? **No**7.       Does your organisation have a policy of adhering to any information security standard or framework (i.e. ISO27000, NIST etc)?    a.       If yes, please provide a copy of the above policy? **The CCG has an information security policy (see attached). The CCG also complies with NHS Digital’s Data Security & Protection Toolkit.**8.       Does the authority have the following roles within the origination: **The CCG does not have any of these roles specifically but does have a SIRO (the Head of Governance and Assurance) supported by an expert IG Lead and a number of information asset owners.**a.       Chief Security Officer (CSO), **No**i.      If yes, which role does the CSO report into?b.       Chief Information Security Officer (CISO) **No**i.      If yes, which role does the CISO report into?c.       Head of Information Security (Hd InfoSec) **No**i.      If yes, which role does the Hd InfoSec report into?9.       Who within your organisation who is accountable for undertaking information / cyber security risk assessments (i.e. Chief Information Security Officer, Head of Information Security, Head of Information Technology) ? **Overall accountability rests with the SIRO supported by the IG Lead and information asset owners.**10.   Who within the authority is responsible for undertaking information / cyber security risk assessments (i.e. Chief Information Security Officer, Head of Information Security, Head of Information Technology) ? **Responsibility would rest with information asset owners supported by the IG Lead.**11.   How many people within the organisation are responsible for undertaking information / cyber security risk assessments? **There are currently 15 IAOs within the CCG supported by the Information Governance Lead**12.   Does the person(s) responsible for  undertaking  information / cyber security risk assessment:a.       Have any formal training in this regard? **IAOs do not receive formal training in risk assessment however all are required to undertake Data Security Awareness online training each year and expert advice, guidance and support is provided by the IG Lead. The SIRO has annual training relevant to this role and has also undertaken ‘GCHQ Certified Executive Training – Cyber Security for SIROs’ in August 2019.The IG Lead has BCS Risk Management/ CISSP Certfication**i.      If so, what was it? **IG Lead has BCS Risk Management/ CISSP Certfication**b.       Have any industry qualifications/certification in this regard? **Yes**i.      If so, what are they? **IG Lead has BCS Risk Management/ CISSP Certfication**13.   How many people  (permanent  and contractors) currently work for the authority? **144**14.   How many people  (permanent  and contractors) currently work for the authority in information technology roles? **None. IT support is outsourced to a third party.**15.   How many people  (permanent and contractors) currently work for the authority in information / cyber security roles? **None in a specific IT / cyber security role but there is 1 SIRO, 15 IAOs, and all CCG staff receive Data Security Awareness online training each year and our culture is one whereby all staff understand their own personal responsibility for data security.** |

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| **FOI NO: 1485** | **Date Received: 10 February 2020** |
| **Request :**For the last three contract renewals of the Termination of Preganancy Services (TOPs) please could I have the following information: 1) Estimated length of contact2) Date it was awarded on3) Awarded Value: (In £) 4) Awarded Supplier Name(s)If it was a collaborative procurement please give the revelant details of the other CCG’s and your own CCG’s contribution to the contract value. |
| **Response :**Please see link to our contracts register <https://www.barnsleyccg.nhs.uk/copy-of-about-us/contracts.htm>  |

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| **FOI NO: 1486** | **Date Received: 10 February 2020** |
| **Request :**Could you please provide me with email addresses of all Practice Managers within your clinical commissioning group and the relevant GP surgeries they manage? |
| **Response :**Could you please provide me with email addresses of all Practice Managers within your clinical commissioning group and the relevant GP surgeries they manage? The CCG does not share Practice Managers email addresses however a list of Barnsley practices can be found on Barnsley CCG’s website at: <https://www.barnsleyccg.nhs.uk/about-us/membership.htm> Contact details can be found on practices websites. |

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| **FOI NO: 1487** | **Date Received: 10 February 2020** |
| **Request :**BAGIS is unaware of what if any guidance on this issue has been drawn up by NHS England. However, given that individual CCGs are responsible for Clinical Commissioning within their area, BAGIS kindly requests that NHS Barnsley CCG confirm:1. Whether NHS Barnsley CCG has drawn up its own guidance on these issues; and if so, to provide a copy to BAGIS and to confirm whether it has been published;
2. In any event, what criteria are applied by NHS Barnsley CCG in deciding whether to fund gamete storage facilities for transgender patients generally
3. How many requests for gamete storage were made by transgender patients shortly before gender conversation treatment in:
4. 2018, per calendar moth; and
5. 2019, per calendar month?
6. For watch month for which data is provided in response to question 3,
7. How many requests were granted?
8. How many were refused?
9. How many remain pending?
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| **Response :** |

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| **FOI NO: 1488** | **Date Received: 10 February 2020** |
| **Request :**       Schoolso   (i) The schools the Clinical Commissioning Group has met with in 2017, 2018, and 2019, o   (ii) The number of meetings the Clinical Commissioning Group has had with schools in 2017, 2018 and 2019, o   (iii) How many of the meetings between the Clinical Commissioning Group and the schools were used to discuss establishing and/or developing a Mental Health Support Team,o   (iv) How many of the meetings between the Clinical Commissioning Group and the schools were used to discuss working in partnership to address the needs of students, delivering interventions in or close to schools for those with mild to moderate mental health issues and/or to help students with more severe needs to access the right support, working with schools to provide a link to specialist NHS services.       Collegeso   (i) The colleges the Clinical Commissioning Group has met with in 2017, 2018, and 2019, o   (ii) The number of meetings the Clinical Commissioning Group has had with colleges in 2017, 2018 and 2019, o   (iii) How many of the meetings between the Clinical Commissioning Group and the colleges were used to discuss establishing and/or developing a Mental Health Support Team,o   (iv) How many of the meetings between the Clinical Commissioning Group and the colleges were used to discuss working in partnership to address the needs of students, delivering interventions in or close to colleges for those with mild to moderate mental health issues and/or to help students with more severe needs to access the right support, working with colleges to provide a link to specialist NHS services.       Universitieso   (i) The universities the Clinical Commissioning Group has met with in 2017, 2018, and 2019, o   (ii) The number of meetings the Clinical Commissioning Group has had with universities in 2017, 2018 and 2019, o   (iii) How many of the meetings between the Clinical Commissioning Group and the universities were used to discuss establishing and/or developing a Mental Health Support Team,o   (iv) How many of the meetings between the Clinical Commissioning Group and the universities were used to discuss working in partnership to address the needs of students, delivering interventions in or close to universities for those with mild to moderate mental health issues and/or to help students with more severe needs to access the right support, working with universities to provide a link to specialist NHS services. |
| **Response :**The CCG do not commission these services directly from schools, colleges or universities. Prior to the publication of the DfE Green Paper 'Transforming Children and young People's Mental Health Provision' Barnsley CCG (with Future in Mind funding) had already established a mental health support team in schools, which is known as MindSpace (please see the website <http://www.wearemindspace> ). MindSpace provide mental health practitioners in each of our 10 Secondary schools and is having an extremely positive impact on improving the emotional health and wellbeing of our young people. MindSpace are now supporting a number of Year 9 / 10 pupils in our Secondary schools to be Mental Health Ambassadors. Funding has been agreed, not as part of the Trailblazer programme, to develop a second mental health support team in schools to better support the more vulnerable of our primary school-aged children - this team will be developed in 2020. Barnsley CAMHS service has a weekly triage meeting with MindSpace to ensure the young people receive the most appropriate support in a timely mannerWe have been implementing the whole school THRIVE approach in our Primary Schools (led by Public Health) to improve the emotional health and wellbeing of our younger children and although positive outcomes are being achieved once implemented there is an ongoing cost to the schools which is proving difficult for many to continue with this approach therefore we are looking at alternative ways of supporting the emotional health and wellbeing of all of our children.In relation to Barnsley College our IAPT services are accessible by college students on-site and Chilypep, a local charitable organisation, facilitate the development of College Peer Mentors. Please see our Local Transformation Plan (on the CCG's website), which clearly articulates all of the services we are commissioning to better support the emotional health and wellbeing of the children and young people of Barnsley. |

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| **FOI NO: 1489** | **Date Received: 10 February 2020** |
| **Request :**1. Does the CCG have a referral management/ facilitation service? If yes a. Which organisation/company provides this to the CCG? Please provide, name, job title and contact details for responsible person at referral management/ facilitation service?b. What commercial arrangement is in place between the CCG and this organisation/company? Please provide details of how this was awarded/procured, what was the procurement vehicle used? Was it procured on an open framework? Which framework?c. What is the total contract value?d. When does the current contract expire?e. How much does the CCG pay for referral management?f. How is the cost calculated? Do the CCG an amount per referral or on block for all referrals? How much does each referral cost to administer? Does this differ depending on the type of referral?g. What workflow management systems is used to manage referrals? Docman RMS, Emis etch. How does the CCG ensure that GP’s follow local pathways (EBICS/POLCE) or protocols when referring patients to provider organisations?If no i. Please confirm how GP referrals are managed between GP and Provider organisations across the CCG? Does each GP practice in the CCG administer all of its referrals, directly with the provider or ERS? If not how are they managed? Peer reviewed? Checked for accuracy?j. How does the CCG ensure that GP’s follow EBICS (Evidence Based Interventions and Clinical Standards, formerly PoLCE this is the referral process for patients needing a procedure where certain criteria or a threshold must be met before funding is approved) or the equivalent standards/guidance in your locality when referring patients to provider organisations? 3. Please confirm the total number of patient referrals from GP/CCG to provider organisations in 2019?4. Who is responsible from a CCG perspective for the management of patient referrals? Please provide name, job title and contact details of individual?5. Which CCG board member is responsible me for referral management? Please provide name, job title and contact details of individual? |
| **Response :**1. Does the CCG have a referral management/ facilitation service?The CCG does not have a referral management / facilitation service.

i. Please confirm how GP referrals are managed between GP and Provider organisations across the CCG? *Does each GP practice in the CCG administer all of its referrals, directly with the provider or ERS? If not how are they managed? Peer reviewed? Checked for accuracy?*All referrals are directed via the NHS e-referral system. Each practice is response for administering its own referrals. Prospective review of F2, locum and register referrals takes place. All referrals may be retrospectively peer reviewed. Arrangements for this are stipulated by individual practices. Practices can access specialist advice via Advice and Guidance on the e-referral system if they have queries.j. How does the CCG ensure that GP’s follow EBICS *(Evidence Based Interventions and Clinical Standards, formerly PoLCE this is the referral process for patients needing a procedure where certain criteria or a threshold must be met before funding is approved*) or the equivalent standards/guidance in your locality when referring patients to provider organisations?The full process is outlined in the South Yorkshire and Bassetlaw Commissioning for Outcomes Policy which is published online here: (Section 10  Making a Referral) <https://www.healthandcaretogethersyb.co.uk/application/files/7415/5790/8016/South_Yorkshire_and_Bassetlaw_Commissioning_for_Outcomes_Policy_-_May_2019.pdf>1. Please confirm the total number of patient referrals from GP/CCG to provider organisations in 2019?

**Referral requests**This is the total number of Appointment Requests created in the NHS e-RS during the reporting period.

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| Jan | Feb | March | April | May | June | July | Aug | Sept | Oct | Nov | Dec | Total |
| 7,052 | 6,517 | 6,803 | 6,515 | 7,153 | 6,750 | 7,395 | 6,568 | 6,910 | 7,649 | 6,520 | 5,373 | 81,205 |

Source: Monthly Activity by Role Report (B1) NHS E-Referral System4. Who is responsible from a CCG perspective for the management of patient referrals? *Please provide name, job title and contact details of individual?*David Lautman, Lead Commissioning and Transformation Manager. Email: david.lautman@nhs.net 5.    Which CCG board member is responsible me for referral management? *Please provide name, job title and contact details of individual?*We do not have an individual board member responsible for referral management |

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| **FOI NO: 1490** | **Date Received: 12 February 2020** |
| **Request :**1. For the period 1st of April 2018 to 31st of March 2019, please provide the names of any independent sector providers that have provided cataract and/or YAG capsulotomy procedures to the Group. 2. For each independent sector provider, please list the price charged for the following surgical procedures for the period 1st of April 2018 to 31st of March 2019:• Cataract with implantation of a spherical (non toric) intraocular lens;• Cataract with implantation of toric intraocular lens; and• YAG capsulotomy. 3. For each independent sector provider, please list the price charged for pre-operative and post-operative professional consultation fees associated with the following surgical procedures for the period 1st of April 2018 to 31st of March 2019 (including stating the services provided):• Cataract with implantation of a spherical (non toric) intraocular lens;• Cataract with implantation of toric intraocular lens; and• YAG capsulotomy. 4. Please provide the number of procedures (per eye) completed by each additional independent sector provider for the following surgical procedures for the period 1st of April 2018 to 31st of March 2019:BZ30A Complex, Cataract or Lens Procedures, with CC Score 2+ BZ30B Complex, Cataract or Lens Procedures, with CC Score 0-1BZ31A Very Major, Cataract or Lens Procedures, with CC Score 2+BZ31B Very Major, Cataract or Lens Procedures, with CC Score 0-1BZ32A Intermediate, Cataract or Lens Procedures, with CC Score 2+BZ32B Intermediate, Cataract or Lens Procedures, with CC Score 0-1BZ33Z Minor, Cataract or Lens ProceduresBZ34A Phacoemulsification Cataract Extraction and Lens Implant, with CC Score 4+BZ34B Phacoemulsification Cataract Extraction and Lens Implant, with CC Score 2-3BZ34C Phacoemulsification Cataract Extraction and Lens Implant, with CC Score 0-15. Please provide the renewal date for the Group’s Contract for Non-Emergency Eye Surgery, and if applicable, please state any extension period which can apply.  |
| **Response :** |
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| Contract for Non-Emergency Eye Surgery by NHS Barnsley CCG (‘the Group’)

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| 1. For the period 1st of April 2018 to 31st of March 2019, please provide the names of any independent sector providers that have provided cataract and/or YAG capsulotomy procedures to the Group.

New Medical Systems, Phoenix Health Solutions, SpaMedica**2**. For each independent sector provider, please list the price charged for the following surgical procedures for the period 1st of April 2018 to 31st of March 2019:* ​​Cataract with implantation of a spherical (non toric) intraocular lens;
* Cataract with implantation of toric intraocular lens; and
* YAG capsulotomy.​

All procedures have been charged to the CCG at national tariff**3**. For each independent sector provider, please list the price charged for pre-operative and post-operative professional consultation fees associated with the following surgical procedures for the period 1st of April 2018 to 31st of March 2019 (including stating the services provided):* Cataract with implantation of a spherical (non toric) intraocular lens;
* Cataract with implantation of toric intraocular lens; and
* YAG capsulotomy.

All new and follow up attendances have been charged to the CCG at national tariff**4**. Please provide the number of procedures (per eye) completed by each additional independent sector provider for the following surgical procedures for the period 1st of April 2018 to 31st of March 2019:

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|   | BZ30A    | Complex, Cataract or Lens Procedures, with CC Score 2+                |   |
|   | BZ30B     | Complex, Cataract or Lens Procedures, with CC Score 0-1 |   |
|   | BZ31A    | Very Major, Cataract or Lens Procedures, with CC Score 2+ |   |
|   | BZ31B     | Very Major, Cataract or Lens Procedures, with CC Score 0-1 |   |
|   | BZ32A    | Intermediate, Cataract or Lens Procedures, with CC Score 2+ |   |
|   | BZ32B     | Intermediate, Cataract or Lens Procedures, with CC Score 0-1 |   |
|   | BZ33Z     | Minor, Cataract or Lens Procedures |   |
|   | BZ34A    | Phacoemulsification Cataract Extraction and Lens Implant, with CC Score 4+ |   |
|   | BZ34B     | Phacoemulsification Cataract Extraction and Lens Implant, with CC Score 2-3 |   |
|   | BZ34C     | Phacoemulsification Cataract Extraction and Lens Implant, with CC Score 0-1 |   |
|   | The CCG cannot provide this level of granularity on the grounds of commercial confidentiality however, the total for all providers is as follows: |   |
| **Row Labels** | **Total** | **Sum of Cost** |
| BZ30A - Complex, Cataract or Lens Procedures, with CC Score 2+ | 2 | £2,746 |
| BZ31A - Very Major, Cataract or Lens Procedures, with CC Score 2+ | 25 | £19,825 |
| BZ31B - Very Major, Cataract or Lens Procedures, with CC Score 0-1 | 2 | £1,568 |
| BZ32A - Intermediate, Cataract or Lens Procedures, with CC Score 2+ | 1 | £793 |
| BZ32B - Intermediate, Cataract or Lens Procedures, with CC Score 0-1 | 1 | £784 |
| BZ33Z - Minor, Cataract or Lens Procedures | 157 | £36,581 |
| BZ34A - Phacoemulsification Cataract Extraction and Lens Implant, with CC Score 4+ | 173 | £120,408 |
| BZ34B - Phacoemulsification Cataract Extraction and Lens Implant, with CC Score 2-3 | 494 | £336,414 |
| BZ34C - Phacoemulsification Cataract Extraction and Lens Implant, with CC Score 0-1 | 237 | £159,264 |
| **Grand Total** | **1092** | **£678,383** |
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**5**.​ Please provide the renewal date for the Group’s Contract for Non-Emergency Eye Surgery, and if applicable, please state any extension period which can apply. Contract end date 31 March 2021 – Can extend by 1 year |

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| **FOI NO: 1491** | **Date Received: 13 February 2020** |
| **Request :*** I would like to request any policy or document that describes your trust’s current approach for offering choice to patients who have been on an elective pathway for over 26 weeks.
* I would also like to request any documents regarding a pilot scheme for or about 26-week choice at your trust.

The 26 Choice that I am referring to is outlined in the following document and specifically explained in the following text from that document.<https://www.england.nhs.uk/wp-content/uploads/2020/01/2020-21-NHS-Operational-Planning-Contracting-Guidance.pdf>“A number of pilot sites across the country are now putting in place practical solutions to offer patients who have been waiting for 26 weeks on an RTT pathway a meaningful choice of an alternative provider. During 2020/21, all providers and systems should be implementing supplementary choice at 26 weeks with reference to the 26 Week Choice Rules and Guidance and the best practice models emerging from the pilot programme. In preparation, providers should ensure they have robust validation arrangements in place, so that waiting list data are as accurate as possible”. |
| **Response :** |

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| **FOI NO: 1492** | **Date Received: 13 February 2020** |
| **Request :** |
| **Response :**Please see link to our contracts register <https://www.barnsleyccg.nhs.uk/copy-of-about-us/contracts.htm>  |

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| **FOI NO: 1493** | **Date Received: 20 January 2020 (inputted late due to question via GB)** |
| **Request :**Current WTE numbers of GPs by practice and practice registered populations. |
| **Response :**<https://app.powerbi.com/view?r=eyJrIjoiNmY4NGNiMWQtMGVkZi00MzU2LThiZGMtMTFlZjY2NGE0NTZmIiwidCI6IjUwZjYwNzFmLWJiZmUtNDAxYS04ODAzLTY3Mzc0OGU2MjllMiIsImMiOjh9>  |

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| **FOI NO: 1494** | **Date Received: 17 February 2020** |
| **Request :**1.   How many service users in the CCG's area of service required 'complex care at home' packages in 2019? 2.   What private companies provided 'complex care at home' packages in 2019?            3.   What did each private company charge (per hour) for both nurses and Healthcare Assistants/ Support Workers in the CCG's area of service in 2019? |
| **Response :**1.   How many service users in the CCG's area of service required 'complex care at home' packages in 2019?  **We do not separate patients into non complex or complex care so I am unable to provide this information.** 2.   What private companies provided 'complex care at home' packages in 2019?   **We have a national framework of providers whom we procure care from in the first instance.  The framework providers are Caremark, Mears, Medacs and TLC Homecare.** 3.   What did each private company charge (per hour) for both nurses and Healthcare Assistants/ Support Workers in the CCG's area of service in 2019?  **The enhanced/complex hourly rates for these providers range from £16.28 to £19.95 per hour.  Please note we do not pay for nurses.** |

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| **FOI NO: 1495** | **Date Received: 17 February 2020** |
| **Request :**1. The number of people, broken down by age category, who you refer for diagnosis with suspected autism spectrum disorder (ASD).
2. The number of people, broken down by age category, who you diagnose with an additional mental health condition at the same time as referring them for diagnosis with suspected autism spectrum disorder (ASD).
3. A breakdown of those patients covered by part (2) by the additional mental health condition that they are diagnosed with.
4. The number of people, broken down by age category, who are diagnosed with an additional mental health condition when they are already on the waiting for diagnosis of suspected autism spectrum disorder (ASD) as the result of a referral at a previous appointment.
5. A breakdown of those patients covered by part (4) by the mental health condition that they are diagnosed with.
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| **Response :**Barnsley Clinical Commissioning Group are unable to respond to this FOI.  Please re-direct your request to the Community Paediatric Team at Barnsley Hospital NHS Foundation Trust (barnsley@infreemation.co.uk)  |

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| **FOI NO: 1496** | **Date Received: 18 February 2020** |
| **Request :**·         **Agency Spend –** Total amount spent on agency staff in the 2018/19 financial year split into the CCG’s staff groups (E.g. Medical, Nursing, Admin, AHP etc.) and speciality/grade (E.g. Consultants, GP, ICU Nurse, Acute Nurse, Occupational therapists, Pharmacists, Health Care Assistants, etc.) depending on how this is reported within the Group. Could you please provide the information for all the CCG’s under your group separately? |
| **Response :**Please see attached FOI 1425 (previous FOI disclosure) the grade split is limited to Nurses and Others  |

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| **FOI NO: 1497** | **Date Received: 19 February 2020** |
| **Request :**This Freedom of Information request relates to NHS Barnsley CCG's utilisation of Referral Management Centres / Referral Assessment Centres (referred to below as RMCs). 1.     Please provide the names and the NHS ODS organisation code of any RMCs used by NHS Barnsley CCG since April 2015. 2.     For **each RMC** used by NHS Barnsley CCG, please provide, for **each financial year** since April 2015: a.     the total volume of NHS Barnsley CCG referrals processed by each RMC; b.     the name and NHS ODS site code of all providers to which each RMC has referred patients together with the volume of referrals made to each of those providers; c.      the total volume of referrals rejected by each RMC; d.     the average time between initial referral made by the GP (or relevant referrer) and referral being processed by each RMC; e.     for those referrals on the RTT pathway, the average time between initial referral made by the GP (or relevant referrer) and the start of the RTT pathway following processing by the RMC. As well as completed financial years, please also include information for as much as possible of the current financial year, stating the last date for which information is included. |
| **Response :**1.     Please provide the names and the NHS ODS organisation code of any RMCs used by NHS Barnsley CCG since April 2015.**NHS Barnsley CCG has not used or commissioned a Referral Management Centre or Referral Assessment Centre in the timeframe indicated.** 2.     For **each RMC** used by NHS Barnsley CCG, please provide, for **each financial year** since April 2015:   **n/a** a.     the total volume of NHS Barnsley CCG referrals processed by each RMC; b.     the name and NHS ODS site code of all providers to which each RMC has referred patients together with the volume of referrals made to each of those providers; c.      the total volume of referrals rejected by each RMC; d.     the average time between initial referral made by the GP (or relevant referrer) and referral being processed by each RMC; e.     for those referrals on the RTT pathway, the average time between initial referral made by the GP (or relevant referrer) and the start of the RTT pathway following processing by the RMC. |

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| **FOI NO: 1498** | **Date Received: 20 February 2020** |
| **Request :**Under the FOI act, could you kindly please provide me with a current list of the of all Practice Managers & their NHS issued email addresses within your CCG for the relevant GP surgeries they manage. |
| **Response :****The CCG does not share Practice Managers email addresses however a list of Barnsley practices can be found on Barnsley CCG’s website at:** [**https://www.barnsleyccg.nhs.uk/about-us/membership.htm**](https://www.barnsleyccg.nhs.uk/about-us/membership.htm)**A range of contact details can be found on practices websites.** |

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| **FOI NO: 1499** | **Date Received: 24 February 2020** |
| **Request :**Dear Madam/Sir,I would like to make a formal request for information under the provisions of the Freedom of Information Act 2005.I would be most grateful if you could let me know the following by response of an email:* In your CCG is there any formal register kept of deaths occurring as a result of withdrawal of Clinically Artificial Nutrition and Hydration (CANH) that occur under the provisions of the Mental Capacity Act 2005 and BMA/RCP/GMC Guidelines 2018?
* If such a register is kept can you advise if there is any independent internal or external audit made of such deaths and the degree to which there Is compliance with the BMA/RCP/GMC Guidelines, 2018 when such deaths occur?
* Where deaths due to withdrawal of CANH are recorded and an audit is made of these, can you give an indication of the number such deaths in 2018 and in 2019 and the percentage of cases where the BMA/RCP/GMC Guideline Checklist has been used and fully completed?

I am most grateful to you for your kind help in this matter for the following CCGs:NHS Barnsley CCG |
| **Response :****•** In your CCG is there any formal register kept of deaths occurring as a result of withdrawal of Clinically Artificial Nutrition and Hydration (CANH) that occur under the provisions of the Mental Capacity Act 2005 and BMA/RCP/GMC Guidelines 2018? **No** **You could re-direct your request to Barnsley Hospital NHS Foundation Trust at barnsley@infreemation.co.uk or South West Yorkshire Partnership NHS Foundation Trust at foi@swyt.nhs.uk who may hold this information.** • If such a register is kept can you advise if there is any independent internal or external audit made of such deaths and the degree to which there Is compliance with the BMA/RCP/GMC Guidelines, 2018 when such deaths occur? **Not applicable**• Where deaths due to withdrawal of CANH are recorded and an audit is made of these, can you give an indication of the number such deaths in 2018 and in 2019 and the percentage of cases where the BMA/RCP/GMC Guideline Checklist has been used and fully completed? **Not applicable** |

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| **FOI NO: 1500** | **Date Received: 24 February 2020** |
| **Request :**Dear NHS Barnsley Clinical Commissioning Group,We would like to request information about services you may commission to provide Independent Advocacy for people accessing support in the following processes in your area:- Continuing Health Care (CHC)- Continuing Care- personal wheelchair budgets- personal health budgetsQ1. Could you provide the name of any service(s) you commission to provide Independent Advocacy Support to people going through Continuing Health Care processes (adult) or Continuing Care (children)?Q2. Could you provide the name of any service(s) you commission to provide Independent Advocacy Support to people accessing personal wheelchair budgets?Q3. Could you provide the name of any service(s) you commission to provide Independent Advocacy Support to people accessing or using personal health budgets processes (both adult and children)? |
| **Response :**Q1. Could you provide the name of any service(s) you commission to provide Independent Advocacy Support to people going through Continuing Health Care processes (adult) or Continuing Care (children)?   **We do not commission advocacy support but we do use Barnsley Advocacy services.**Q2. Could you provide the name of any service(s) you commission to provide Independent Advocacy Support to people accessing personal wheelchair budgets?    **We do not commission specific advocacy support to people accessing personal wheelchair budgets.**Q3. Could you provide the name of any service(s) you commission to provide Independent Advocacy Support to people accessing or using personal health budgets processes (both adult and children)?   **Please re-direct this question to Barnsley MBC** online@barnsley.gov.uk |

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| **FOI NO: 1501** | **Date Received: 27 February 2020** |
| **Request :**Please can I request information for the below questions regarding the provision of certain women’s health services in your area:• List of all practices (including address and postcode details) that are contracted to fit/offer an Internal Uterine System/Device (coil) fitting service• How many IUS/Ds (coils) have each practice fitted/removed/reviewed/claimed for in the financial year 2018/19• How much are contracted practices paid per IUS/IUD (coil) procedure (fit, remove, review or other) they currently contracted to pay per fit• If fitting service is available how many insertions and removals have been undertaken in the last 12 months for each practice• Does the practice have a bespoke clinic for IUS/D (coil) fitting or are appointments for IUS/D (coil) fits made as part of the routine appointment schedule or both• Is there a waiting time for IUS/IUD (coil) fits at the practice and if so how long (less than 6 weeks, between 6 weeks – 6 months, or longer than 6 months• If a practice does not have its own fitting service, which practice/clinic/hospital do they refer the majority of their patients that require an IUS/D (coil) fit to (type, name, address and postcode) and how many do they refer• Do they have someone within the practice who provides specialist contraceptive counselling and if so what is their role (doctor, nurse, healthcare assistant, healthcare visitor or other) |
| **Response :*** List of all practices (including address and postcode details) that are contracted to fit/offer an Internal Uterine System/Device (coil) fitting service – The CCG does not commission this service it is Barnsley Council
* How many IUS/Ds (coils) have each practice fitted/removed/reviewed/claimed for in the financial year 2018/19 – This information is not held by the CCG – the requestor should approach Barnsley Council
* How much are contracted practices paid per IUS/IUD (coil) procedure (fit, remove, review or other) they currently contracted to pay per fit – This information is not held by the CCG – the requestor should approach Barnsley Council
* If fitting service is available how many insertions and removals have been undertaken in the last 12 months for each practice – This information is not held by the CCG – the requestor would need to contact the practice
* Does the practice have a bespoke clinic for IUS/D (coil) fitting or are appointments for IUS/D (coil) fits made as part of the routine appointment schedule or both – This information is not held by the CCG – the requestor would need to contact the practice
* Is there a waiting time for IUS/IUD (coil) fits at the practice and if so how long (less than 6 weeks, between 6 weeks – 6 months, or longer than 6 months – This information is not held by the CCG – the requestor would need to contact the practice
* If a practice does not have its own fitting service, which practice/clinic/hospital do they refer the majority of their patients that require an IUS/D (coil) fit to (type, name, address and postcode) and how many do they refer – This information is not held by the CCG – the requestor would need to contact the practice
* Do they have someone within the practice who provides specialist contraceptive counselling and if so what is their role (doctor, nurse, healthcare assistant, healthcare visitor or other) – This information is not held by the CCG – the requestor would need to contact the practice
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