|  |
| --- |
| **FREEDOM OF INFORMATION REQUESTS AUGUST** |

|  |  |
| --- | --- |
| **FOI NO: 1566** | **Date Received: 03 August 2020** |
| **Request :**1. Breaking down the data by each month, how many young people were referred to CAMHS service for Tier 3 support from March 2019 to July 2020? 2. Breaking down the data by each month, how many young people were refused CAMHS services, because the service lacked capacity from March 2019 to July 2020? 3. Regarding CAMHS services in the financial year 2018-19: - How many patients waited more than 4 weeks for an initial assessment? (What percentage of the total is this?) - How many patients waited more than 18 weeks for an initial assessment? (What percentage of the total is this?) - How many patients waited more than 12 months for an initial assessment? (What percentage of the total is this?) - How many patients waited more than 4 weeks to start treatment? (What percentage of the total is this?) - How many patients waited more than 18 weeks to start treatment? (What percentage of the total is this?) - How many patients waited more than 12 months to start treatment? (What percentage of the total is this?) - What was the longest wait time for treatment? 4. Regarding CAMHS services in the financial year 2019-2020: - How many patients waited more than 4 weeks for an initial assessment? (What percentage of the total is this?) - How many patients waited more than 18 weeks for an initial assessment? (What percentage of the total is this?) - How many patients waited more than 12 months for an initial assessment? (What percentage of the total is this?) - How many patients waited more than 4 weeks to start treatment? (What percentage of the total is this?) - How many patients waited more than 18 weeks to start treatment? (What percentage of the total is this?) - How many patients waited more than 12 months to start treatment? (What percentage of the total is this?) - What was the longest wait time for treatment? |
| **Response :**Barnsley CCG do not hold this information. Please could you redirect your request to CAMHS: https://fsd.barnsley.gov.uk/kb5/barnsley/fisd/service.page?id=qaoIF7QooYw&localofferchannel=1783-f |

|  |  |
| --- | --- |
| **FOI NO: 1567** | **Date Received: 03 August 2020** |
| **Request :**1. Current Primary Care Prescribing Rebate Schemes (19/20)(Please distinguish which rebates are aligned to Prescqipp and which are independent)

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Scheme | Drug(s) covered | Aligned to Prescqipp | Independent of Prescqipp     |

        2.Which current QIPP Prescribing Schemes 20/21

|  |  |
| --- | --- |
| Name of Scheme | Drug(s) covered     |

        3. What is the current years (20/21) CCG QIPP/efficiency savings plan target for your organisation?  4. What is the value of the prescribing element for the current year (21/22) CCG QIPP/efficiency savings plan target for your organisation?  5. Does your CCG (or any of its constituent members) use the GP prescribing decision support software known as “DXS” (As can be found here: <http://www.dxs-systems.co.uk/>)?  Y/N |
| **Response :**Current Primary Care Prescribing Rebate Schemes (19/20)(Please distinguish which rebates are aligned to Prescqipp and which are independent)

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Scheme | Drug(s) covered | Aligned to Prescqipp | Independent of Prescqipp |

Please find below a list of all rebates which Barnsley CCG is currently signed up to. All are aligned to PrescQIPP - Barnsley CCG would only sign up to a rebate agreement if it fully met all of the PrescQIPP recommendations and was included within the PrescQIPP endorsed list.

|  |  |
| --- | --- |
| **Rebates List 2020/21** |  |
|  |  |
| **Manufacturer** | **Drug**  |
| Aspire Pharma Ltd | Biquelle XL |
| Aspire Pharma Ltd | Gatalin XL |
| Aspire Pharma Ltd | Repinex XL (Ropinirole XL) |
| Aymes | Aymes products |
| Boehringer Ingelheim Limited | Spiolto Respimat |
| Chiesi Ltd | Clenil Modulite |
| Ethypharm (formerly DB Ashbourne) | Fencino (fentanyl patches) |
| Ethypharm (formerly DB Ashbourne) | Pipexus |
| Fontus | Luventa XL (galantamine XL) |
| Intra-Pharm | Carbocisteine sachets |
| Menarini Diagnostics | GlucoMen Areo Sensors |
| Merck, Sharp & Dohme | Sitagliptin (Januvia) |
| Sandoz | AirFluSal Forspiro |
| Sandoz | AirFluSal MDI |
| Sanofi | Ins Apidra |
| Sanofi | Ins Lantus |
| Takeda | Leuprorelin (Prostap)​ |

2.Which current QIPP Prescribing Schemes 20/21

|  |  |
| --- | --- |
| Name of Scheme | Drug(s) covered |

The 20/21 prescribing QIPP scheme has been put on hold ( due to COVID 19). The CCG are currently reviewing a draft scheme.3. What is the current years (20/21) CCG QIPP/efficiency savings plan target for your organisation?No target (due to COVID 19)4. What is the value of the prescribing element for the current year (21/22) CCG QIPP/efficiency savings plan target for your organisation?Current year is 20/21No value for 20/21 ( due to COVID 19)Next year - 21/22 no value set as yet - usually agreed in last quarter of year , however may be delayed or not set due to COVID 195. Does your CCG (or any of its constituent members) use the GP prescribing decision support software known as “DXS” (As can be found here: <http://www.dxs-systems.co.uk/>)? Y/NNo. The CCG does not currently use DXS software for any QIPP efficiency / prescribing initiatives. |

|  |  |
| --- | --- |
| **FOI NO: 1568** | **Date Received: 04 August 2020** |
| **Request :**1. How much money overall has the CCG set aside for reimbursing GPs for costs incurred due to Covid-19?2. How much of that money in question 1 has so far been spent on reimbursing GPs for costs incurred due to Covid-19?2a) If possible within the cost for an FOI, please provide the breakdown for the money so far spent on the following items. (If this is not possible within the costs, then please answer all the other questions from 3 onwards anyhow.) i) PPE ii) IT equipment iii) Practice premises protections – eg screens, marker tape, hand sanitizer iv) Items for providing outdoor clinics – eg gazebos v) Practice staffing costs where cover is required due to absence – eg if staff member is shielding/self isolating and a locum staff member is needed to covervi) Practice staffing costs where extra staff are needed to ensure GPs can provide the new care home service, which involves weekly virtual ‘ward rounds’ by GPs3. How much of that money in question 1 has ended up being spent on other costs, not related to GPs?4. How much of that money in question 1 does the CCG now have left?5. Please could you provide the plans/policy documents outlining how the CCG is reimbursing / will reimburse GPs for costs incurred due to Covid-19? |
| **Response :**1. How much money overall has the CCG set aside for reimbursing GPs for costs incurred due to Covid-19? The CCG reimburses practices for COVID-19 related expenses in line with NHS England guidance, therefore a budget has not been separately identified or agreed. 2. How much of that money in question 1 has so far been spent on reimbursing GPs for costs incurred due to Covid-19? As at M4 £877,896.83 this includes a COVID-19 specific primary care clinic. 2a) If possible within the cost for an FOI, please provide the breakdown for the money so far spent on the following items. (If this is not possible within the costs, then please answer all the other questions from 3 onwards anyhow.) i) PPE £180,105.50ii) IT equipment £8,530.50 for headsets and webcams iii) Practice premises protections – eg screens, marker tape, hand sanitizer Comes under PPEiv) Items for providing outdoor clinics – eg gazebos N/Av) Practice staffing costs where cover is required due to absence – eg if staff member is shielding/self isolating and a locum staff member is needed to cover £70,394.49vi) Practice staffing costs where extra staff are needed to ensure GPs can provide the new care home service, which involves weekly virtual ‘ward rounds’ by GPs No costs claimed to date by practices 3. How much of that money in question 1 has ended up being spent on other costs, not related to GPs? N/A4. How much of that money in question 1 does the CCG now have left? N/A5. Please could you provide the plans/policy documents outlining how the CCG is reimbursing / will reimburse GPs for costs incurred due to Covid-19? We have followed the advice and guidance provided under the level 4 arrangement established to manage the pandemic |

|  |  |
| --- | --- |
| **FOI NO: 1569** | **Date Received: 05 August 2020** |
| **Request :**A list of all schemes (currently open) that have been commissioned and or with arrangement/agreements to provide Supported Living services for Adults. |
| **Response :**Barnsley CCG does not hold this information, please redirect your request to Barnsley Metropolitan Borough Council:https://www.barnsley.gov.uk/services/business-rates/requests-for-information-about-business-rates/foi-requests-for-business-rates/ |

|  |  |
| --- | --- |
| **FOI NO: 1570** | **Date Received: 05 August 2020** |
| **Request :** |
| **Response :** |

|  |  |
| --- | --- |
| **FOI NO: 1571** | **Date Received: 06 August 2020** |
| **Request :**1) Are you commissioning post-covid services: a) in hospital ORb) in the community? 2) Can you describe these services? 3) How much have you spent on these services? 4) How many patients have accessed your post-covid services? |
| **Response :**1) Are you commissioning post-covid services: Answer: All our current (pre-Covid-19) commissioned services continue to support all post-covid pateints. This will be reviewed on an ongoing basis. We have commissioned additional 24/7 telephone mental health support service for any local resident during (rather than post) Covid-19. We have also commissioned a bereavement support service for any resident bereaved during this period.a) in hospital ORb) in the community?2) Can you describe these services? As above.3) How much have you spent on these services? N/A4) How many patients have accessed your post-covid services?N/A |

|  |  |
| --- | --- |
| **FOI NO:**  | **Date Received:**  |
| **Request :** |
| **Response :** |

|  |  |
| --- | --- |
| **FOI NO: 1572** | **Date Received: 07 August 2020** |
| **Request :**1. Please confirm the organisations commissioned by the CCG to provide Termination of Pregnancy Services to your patients?2. Please confirm the end dates of currently commissioned contracts?3. Are any providers currently within an extension period of their contract?4. Were contracts awarded through a competitive tender process? 5. What is the form of contract: AQP or sole provider?6. At what percentage of tariff is each provider delivering services?7. What activity numbers were delivered by each provider, by HRG code, over the past 12 months?8. Please confirm the annualised actual contract values for each provider for 2019/20?9. Please confirm who (if any) providers are providing ToP services to patients without a contract where a patient has exercised their right to choose a provider? What are the activity numbers delivered per provider?10. What were the average wait times for providers over the past 12 months? (broken down by month and surgical/medical) 11. Do any of the contracted providers sub-contract any parts of the service to an alternative provider? If so, who and what?12. Does ToP feature on the CCGs commissioning intentions?• Who is the senior officer (outside of procurement) responsible for this contract? |
| **Response :**1. Please confirm the organisations commissioned by the CCG to provide Termination of Pregnancy Services to your patients?Barnsley Hospital NHS Foundation Trust, Sheffield Teaching Hospitals NHS Foundation Trust, Doncaster and Bassetlaw Hospitals NHS Foundation Trust, The Rotherham NHS Foundation Trust, Mid Yorkshire Hospitals NHS Trust, Leeds Teaching Hospitals NHS Trust and bpas2. Please confirm the end dates of currently commissioned contracts?Due to the COVID pandemic NHS Trusts are currently subject to a block contract arrangement per NHSE/I directions rather than under usual NHS Standard Contract arrangements that have been in place previously and it is as yet unclear if and when this position will change.bpas contract expires 31 March 20213. Are any providers currently within an extension period of their contract?Yes4. Were contracts awarded through a competitive tender process? NHS Trust contracts are rollover contracts bpas undertake activity under an AQP arrangement5. What is the form of contract: AQP or sole provider?AQP6. At what percentage of tariff is each provider delivering services?NHS Trusts (under normal circumstances) undertake activity at 100% of National Tariff bpas activity is all locally priced7. What activity numbers were delivered by each provider, by HRG code, over the past 12 months?The CCG cannot provide this level of granularity on the grounds of commercial confidentiality however, the total for all providers that use HRG codes to record their activity is as follows:HRG Desc TotalMA18C - Medical Termination of Pregnancy, less than 14 weeks gestation 496MA19A - Vacuum Aspiration with Cannula, less than 14 weeks gestation 88MA17C - Dilation and Evacuation, less than 14 weeks gestation 31MA18D - Medical Termination of Pregnancy, 14 to 20 weeks gestation 19MA20Z - Medical or Surgical Termination of Pregnancy, over 20 weeks gestation 9MA19B - Vacuum Aspiration with Cannula, 14 to 20 weeks gestation 2MA17D - Dilation and Evacuation, 14 to 20 weeks gestation 0Grand Total 6458. Please confirm the annualised actual contract values for each provider for 2019/20?Due to the COVID pandemic the NHS Trusts are currently subject to a block contract arrangement per NHSE/I directions rather than under usual NHS Standard Contract arrangements that have been in place previously and it is as yet unclear if and when this position will change.bpas contract value is £231,352 for 2020/219. Please confirm who (if any) providers are providing ToP services to patients without a contract where a patient has exercised their right to choose a provider? What are the activity numbers delivered per provider?None in the current financial year10. What were the average wait times for providers over the past 12 months? (broken down by month and surgical/medical)The CCG does not hold this information - please redirect this question to the individual providers11. Do any of the contracted providers sub-contract any parts of the service to an alternative provider? If so, who and what?The CCG does not hold this information - please redirect this question to the individual providers12. Does ToP feature on the CCGs commissioning intentions?No• Who is the senior officer (outside of procurement) responsible for this contract?Amanda Capper, Head of Contracts (Commissioner Representative) |

|  |  |
| --- | --- |
| **FOI NO: 1573** | **Date Received: 06 August 2020** |
| **Request :**The names and email addresses of the people doing the following roles o Accountable Officero Planned Care Lead o Primary Care Lead |
| **Response :**• Accountable Officer – Lesley Smith – lesleyjane.smith@nhs.net• Planned Care Lead – David Lautman – david.lautman@nhs.net• Primary Care Lead – Julie Frampton – Julie.frampton@nhs.net |

|  |  |
| --- | --- |
| **FOI NO: 1574** | **Date Received:**  |
| **Request :**1. Does the NHS Barnsley CCG have procedures or policies in place to ensure primary health and home care practitioners assess the heating needs of people who use their services at least once a year, as recommended by National Institute for Health and Care Excellence guidance on Excess winter deaths and illness and the health risks associated with cold homes (NG6)?2. Does the NHS Barnsley CCG record or audit compliance with the recommendation referenced in question 1 among primary health and home care practitioners?3. Does the NHS Barnsley CCG have procedures or policies in place to ensure that, when a patient is discharged from a health or social care setting, an assessment is carried out into whether they are likely to be vulnerable to the cold and if action is needed to make their home warm enough for them to return to, as recommended by National Institute for Health and Care Excellence guidance on Excess winter deaths and illness and the health risks associated with cold homes (NG6)?4. Does the NHS Barnsley CCG record or audit compliance with the recommendation referenced in question 3? |
| **Response :**Barnsley CCG does not hold this information, please redirect your request to Barnsley Metropolitan Borough Council:https://www.barnsley.gov.uk/services/business-rates/requests-for-information-about-business-rates/foi-requests-for-business-rates/ |

|  |  |
| --- | --- |
| **FOI NO: 1575** | **Date Received: 11 August 2020** |
| **Request :**1. Please confirm the organisations commissioned by the CCG to provide Vasectomy Services to your patients?2. Please confirm the end dates of currently commissioned contracts?3. Are any providers currently within an extension period of their contract?4. Were contracts awarded through a competitive tender process?5.. What is the form of contract: AQP or sole provider?6. At what percentage of tariff is each provider delivering services?7. What activity numbers were delivered by each provider, over the past 12 months?8. Please confirm the annualised actual contract values for each provider for 2019/20?9. Please confirm who (if any) providers are providing Vasectomy services to patients without a contract where a patient has exercised their right to choose a provider? What are the activity numbers delivered per provider?10. What were the average wait times for providers over the past 12 months? (broken down by month) 11. Do any of the contracted providers sub-contract any parts of the service to an alternative provider? If so, who and what?12. Does Vasectomy feature on the CCGs commissioning intentions?13. Do your current Vasectomy contracts include Post Vasectomy Semen Testing included in the tariff amount ?14. Does your current vasectomy wait times exceed 18 weeks?15. Who is the senior officer (outside of procurement) responsible for this contract |
| **Response :**1. Please confirm the organisations commissioned by the CCG to provide Vasectomy Services to your patients?Barnsley Hospital NHS Foundation Trust, Sheffield Teaching Hospitals NHS Foundation Trust, Doncaster and Bassetlaw Hospitals NHS Foundation Trust, The Rotherham NHS Foundation Trust, Mid Yorkshire Hospitals NHS Trust, Leeds Teaching Hospitals NHS Trust, Lundwood Medical Centre, St George's Medical Centre 2. Please confirm the end dates of currently commissioned contracts?Due to the COVID pandemic NHS Trusts are currently subject to a block contract arrangement per NHSE/I directions rather than under usual NHS Standard Contract arrangements that have been in place previously and it is as yet unclear if and when this position will change.Lundwood Medical Centre and St George's Medical Centre contracts expire 30/09/20223. Are any providers currently within an extension period of their contract?No4. Were contracts awarded through a competitive tender process?NHS Trust contracts are rollover contracts. Lundwood Medical Centre and St George's Medical Centre undertake activity under an AQP arrangement5. What is the form of contract: AQP or sole provider?AQP6. At what percentage of tariff is each provider delivering services?NHS Trusts (under normal circumstances) undertake this activity at 100% of National Tariff. Lundwood Medical Centre and St George's Medical Centre activity is all locally priced7. What activity numbers were delivered by each provider, over the past 12 months?The CCG cannot provide this level of granularity on the grounds of commercial confidentiality however, the total for all providers was 395 procedures 8. Please confirm the annualised actual contract values for each provider for 2019/20?Please see link to our contracts register that outlines full contract values for the providers named above: https://www.barnsleyccg.nhs.uk/copy-of-about-us/contracts.htmLundwood Medical Centre and St George's Medical Centre do not have specified contract values for this service and are paid on actual activity.9. Please confirm who (if any) providers are providing Vasectomy services to patients without a contract where a patient has exercised their right to choose a provider? What are the activity numbers delivered per provider?None in the current financial year10. What were the average wait times for providers over the past 12 months? (broken down by month)The CCG does not hold this information - please redirect this question to the individual providers11. Do any of the contracted providers sub-contract any parts of the service to an alternative provider? If so, who and what?The CCG does not hold this information - please redirect this question to the individual providers12. Does Vasectomy feature on the CCGs commissioning intentions?No13. Do your current Vasectomy contracts include Post Vasectomy Semen Testing included in the tariff amount ?Yes14. Does your current vasectomy wait times exceed 18 weeks?The CCG does not hold this information to this level of granularity - please redirect this question to the individual providers15. Who is the senior officer (outside of procurement) responsible for this contractNHS Trust Contracts - Amanda Capper, Head of Contracts (Commissioner Representative) Lundwood Medical Centre and St George's Medical Centre - Julie Frampton, Head of Primary Care |

|  |  |
| --- | --- |
| **FOI NO: 1576** | **Date Received: 11 August 2020** |
| **Request :**1. Any telehealth services currently commissioned by the CCG which provide care to nursing homes, other residential care facilities or intermediate care providers.2. Whether these services currently provide remote diagnostic capabilities.3. Please indicate when existing services will be reprocured.4. Please indicate whether there are plans for a future telehealth service or whether telehealth services are included in commissioning intentions. |
| **Response :**1. Any telehealth services currently commissioned by the CCG which provide care to nursing homes, other residential care facilities or intermediate care providers.Barnsley CCG does not commission Telecare services. Telecare / assisted living services are commissioned by Barnsley Metropolitan Borough Council. Please redirect your queries to their FOI department.2. Whether these services currently provide remote diagnostic capabilities.N/A / 3. Please indicate when existing services will be reprocured.N/A 4. Please indicate whether there are plans for a future telehealth service or whether telehealth services are included in commissioning intentions.We are currently considering our commissioning intentions for 2020/21 which will be published on our website <http://www.barnsleyccg.nhs.uk/>  and we will make any intentions apparent via this document. |

|  |  |
| --- | --- |
| **FOI NO: 1577** | **Date Received: 14 August 2020** |
| **Request :**1.       When Urology Appliance Management was last discussed at Board / Governing Body? (this could also be called Catheter Appliance Management, Continence Appliance Management or Incontinence Appliance Management)2.       Please provide link to the meeting pack and minutes.3.       Who is your lead for Urology Appliance Management?4.       What is their email address?5.       Does your urology/continence appliance budget sit within the GP budget?If no:5a. Do you operate a centralised urology/continence service?5b. Who provides the service?5c. What are the contract start/end/review dates?  5d. What is the contract value per year?5e. What is the total net cost of prescribing or supply of appliances for continence.5f.  Does the CCG have any rebates in place with any companies for continence products?  If yes please provide product names, start dates and contract lengths.6. Does your CCG commission a community pharmacy not dispensed service?6a. If yes, please send the specification6b. If no, does your CCG have any plans to commission a community pharmacy not dispensed service? |
| **Response :**1. When Urology Appliance Management was last discussed at Board / Governing Body? (this could also be called Catheter Appliance Management, Continence Appliance Management or Incontinence Appliance Management)  There was a discussion in private Governing Body as part of an update on contract negotiations re whether to fund cost pressure at our community services provider relating to continence products, however we cannot disclose the detail as this would be commercially sensitive 2. Please provide link to the meeting pack and minutes.As above 3. Who is your lead for Urology Appliance Management?Chris Lawson, Head of Medicines Optimisation 4. What is their email address?chris.lawson@nhs.net 5. Does your urology/continence appliance budget sit within the GP budget?The CCG does not hold a specific budget. The majority of the spend for continence appliances is against the CCG prescribing budget, some is against Continuing Healthcare ( part of packages of care) or held within Provider service contractsIf no:5a. Do you operate a centralised urology/continence service? Not entirely - the primary care continence service is centralised, however there is a secondary care continence service which isn't currently integrated5b. Who provides the service? The primary care service is provided by South West Yorkshire Partnership SWYPFT within their community services contract with the CCG. The secondary care service is provided by Barnsley Hospital NHS Foundation Trust as part of their contract 5c. What are the contract start/end/review dates? The contract start and end dates are included on the contract register which can be found on the CCG website: https://www.barnsleyccg.nhs.uk/copy-of-about-us/contracts.htm 5d. What is the contract value per year? Due to the way that NHS contracts have been allocated in 2020 (due to COVID) the CCG are not able to split out individual service lines contained within the contracts.5e. What is the total net cost of prescribing or supply of appliances for continence.The CCG does not currently hold this information. We would have to interrogate NHS Digital systems to obtain cost and volume information regarding number of prescriptions dispensed, and the £ cost of items dispensed. This prescription data is available on NHSBSA for guest users. https://www.nhsbsa.nhs.uk/prescription-data/catalyst-public-insight-portal alternatively it is available on Open Prescribing.https://openprescribing.net/ The data can be accessed via NHS Digital via https://digital.nhs.uk/data-and-information Other Appliance Spend informationThe CCG does not separate the information on appliance spend within CHC packages of care and does not hold it in a format which could be shared.The CCG does hold information on appliance spend for the SWYFT or BHNFT. You would need to apply to this reorganisations for the information.  5f. Does the CCG have any rebates in place with any companies for continence products? If yes please provide product names, start dates and contract lengths. No rebates currently in place 6. Does your CCG commission a community pharmacy not dispensed service? Not a service but a scheme - Yes6a. If yes, please send the specification: no specification as is a scheme , details below :- The “Not Dispensed” scheme is to help address the substantial waste medicines problem. The scheme allows the pharmacist to intervene, identify and thus prevent the dispensing of those items included on repeat prescriptions, which the patient does not require at the time of dispensing.  Pharmacists or appropriately qualified staff should check with all patients presenting at their pharmacy with a repeat prescription. The patient will be asked if all the items prescribed need to be dispensed or supplied that month.  For any items which the patient indicates they do not take regularly, the following questions may be asked; 1. Have they stock at home of the item? 2. Do they require all the items ordered on the prescription?  For any items that are not required by the patient, the prescription item will be marked with a clear ND “NOT DISPENSED”.  The Pharmacist will complete an intervention on Pharmoutcomes to ensure recording of data and will submit your claim for the intervention simultaneously. Your account has already been updated with the tool to allow for submissions and recording. This is also an opportunity to make every contact count. Consider the need to engage a MUR or NMS as a result of your intervention. The overall aim of the service is to reduce medicinal waste and unnecessary ordering of repeat items.  Items which have a list price of £3.00 or more - Pharmacies receive a £3 fee for any item not dispensed PLUS10% of DM&D value as a fee with £20 maximum value. For extremely high cost items we negotiate a fee, which is usually one tenth to one fifth of the DM&D value. 6b. If no, does your CCG have any plans to commission a community pharmacy not dispensed service? N/A as scheme |

|  |  |
| --- | --- |
| **FOI NO: 1578** | **Date Received: 17 August 2020** |
| **Request :**I am writing to enquire if your organisation has any local guidelines for the treatment of psoriasis and/or psoriatic arthritis using biologic drugs. If such guidelines exist, please could I request a copy. |
| **Response :**Barnsley CCG ​ currently does not have a finalised psoriatic/psoriatic arthritis pathway, which includes biologic drugs, that can be shared |

|  |  |
| --- | --- |
| **FOI NO: 1579** | **Date Received: 19 August 2020** |
| **Request :*** Do you fund the assessment of Mobile Arm Supports?
* If yes, do you then fund the provision of Mobile Arm Supports?
* If yes, what is the eligibility criteria?
* Have personal health budgets been used towards the provision of Mobile Arm Supports?
* If no, is funding sought privately or from a charitable grant?
 |
| **Response :**Barnsley CCG do not hold this information. Please re-direct your request to South West Yorkshire Partnership NHS Foundation Trust. |

|  |  |
| --- | --- |
| **FOI NO: 1580** | **Date Received: 19 August 2020** |
| **Request :**I would like to request the following information regarding NHS Continuing Healthcare (CHC) packages for adults within your local CCG area.   For clarity, CHC refers to the NHS Continuing Healthcare funding pathway. For further information please see: <https://www.england.nhs.uk/healthcare/>. Homecare refers to packages of care delivered in the individuals own homes (not care homes or residential facilities). Where possible, please kindly include responses on the attached spreadsheet.1.     Please could you supply the name, email address and telephone number of the commissioner with responsibility for packages of homecare for adults aged 18-65. 2.     Please provide the number of adults in receipt of CHC funded care packages (number of care packages commenced in the year) at year-end 2016/17, 2017/18, 2018/19, 2019/20 and 2020/21. 3.     Of those adults in receipt of CHC funded care packages (q.2), please provide the number that were homecare packages for adults (number of care packages commenced in the year) at year-end 2016/17, 2017/18, 2018/19, 2019/20 and 2020/21. 4.     Of those adults in receipt of CHC funded homecare packages (q.3), please provide the number that were processed through the fast track system (this is often related to end of life care packages) at year-end 2016/17, 2017/18, 2018/19, 2019/20 and 2020/21. 5.     Of those adults in receipt of CHC funded care packages (q.2), please provide the number that are in receipt of personal health budgets at year-end 2016/17, 2017/18, 2018/19, 2019/20 and 2020/21. 6.     Please provide the CCG’s total gross expenditure on continuing healthcare funded packages at year-end 2016/17, 2017/18, 2018/19, 2019/20 and 2020/21. *If expenditure for 2020/21 is not yet available, please provide projected expenditure.* 7.     Please provide the CCG’s total gross expenditure on continuing healthcare funded homecare packages at year-end 2016/17, 2017/18, 2018/19, 2019/20 and 2020/21. *If expenditure for 2020/21 is not yet available, please provide projected expenditure.* 8.     Please provide the lowest, mean and highest rate (fee) paid per week for CHC funded homecare packages at year-end 2020/21. *If figures for 2020/21 is not yet available, please provide projected figures or figures from the previous year (2019/20).* 9.     Please provide a list of the 10 providers who received the greatest amount of funding from CHC funded homecare packages at year-end 2016/17, 2017/18, 2018/19, 2019/20 and 2020/21. *If expenditure for 2020/21 is not yet available, please provide projected expenditure.* Where multiple CCGs are covered, please provide the requested data for each of the relevant CCGs.Please do let me know if there is any clarification that I can provide.  |
| **Response :** |

|  |  |
| --- | --- |
| **FOI NO: 1581** | **Date Received: 20.08.20** |
| **Request :**How many adults (over 18) were formally diagnosed with ADHD 2018/19?· How many children (under 18) were diagnosed with ADHD 2018/19?· How many adults and children have a diagnosis of ADHD in your area?· How long is the average waiting time for those with ADHD symptoms between referral and assessment? For:a. Adults (over 18)?b. Children (under 18)?· How long is the average waiting time for those with ADHD symptoms between referral and diagnosis? For:c. Adults (over 18)?d. Children (under 18)?· What percentage of the people in your area diagnosed with ADHD are male and female?· How much of your budget is spent annually on ADHD services? For:a. Adults (over 18)?b. Children (under 18)? |
| **Response :**· How many adults (over 18) were formally diagnosed with ADHD 2018/19? 46· How many children (under 18) were diagnosed with ADHD 2018/19?  Barnsley CCG does not hold this information - please re-direct your question South West Yorkshire Partnership FT (CAMHS)· How many adults and children have a diagnosis of ADHD in your area?  Barnsley CCG does not hold this information - please re-direct your question to Barnsley Council, Public Health Team · How long is the average waiting time for those with ADHD symptoms between referral and assessment? For:a. Adults (over 18)? 3 Yearsb. Children (under 18)? 3 weeks · How long is the average waiting time for those with ADHD symptoms between referral and diagnosis? For:c. Adults (over 18)? ?  Barnsley CCG does not hold this information - please re-direct your question South West Yorkshire Partnership FTd. Children (under 18)?​ 400 days approximately· What percentage of the people in your area diagnosed with ADHD are male and female? Barnsley CCG does not hold this information - please re-direct your question to Barnsley Council, Public Health Team· How much of your budget is spent annually on ADHD services? For:a. Adults (over 18)? £117,454b. Children (under 18)?  £90,400This equates to 0.52%of our total MH Budget​  |

|  |  |
| --- | --- |
| **FOI NO: 1582** | **Date Received: 21.08.20** |
| **Request :**1. Which companies/suppliers do you use to support the assessment of Personal Health Budgets?2. Which companies/suppliers do you use to support the management of Personal Health Budgets?3. Which companies/ suppliers do you use to support the payment of Personal Health Budgets? |
| **Response :**1. Which companies/suppliers do you use to support the assessment of Personal Health Budgets? Spectrum social care2. Which companies/suppliers do you use to support the management of Personal Health Budgets? Spectrum social care3. Which companies/ suppliers do you use to support the payment of Personal Health Budgets? Pay PacketPlease Note: Barnsley Continuing Healthcare utilise BMBC Brokerage Team to support all of the above. BMBC use Penderels Trust for the payroll process. |

|  |  |
| --- | --- |
| **FOI NO: 1583** | **Date Received: 24 August 2020** |
| **Request :** |
| **Response :** |

|  |  |
| --- | --- |
| **FOI NO: 1584** | **Date Received: 27 August 2020** |
| **Request :**Do you have an overall coordinator for children's autism diagnosis if so who is it?Do you have children autism service development plan so where can I find a copy?How is the children's autism diagnosis funded. How are the NHS ,social services and education input to diagnosis coordinated in1. For each age group pre school, primary school ,secondary school please tell the following relate to the NICE guidlinesi. Do the criteria used the diagnosis match the standards expected by Nice Clinical guideline [CG128]ii. The nice guidelines expect you should Start the autism diagnostic assessment within 3 months of the referral to the autism team.?Does your area meet this target if not how long is the wait ?iii. NICE say In each area a multidisciplinary group (the autism team) should be set up. The core membership should include a: 1. paediatrician and/or child and adolescent psychiatrist What is the grade and speciality for this team member(if more than one the professional lead)?2. speech and language therapist (if more than one the professional lead)?What is the grade for this team member(if more than one the professional lead)?3. clinical and/or educational psychologist. (if more than one the professional lead)?What is the grade and speciality for this team member(if more than one the professional lead)?iv. Nice say The autism team should either have the skills (or have access to professionals that have the skills) needed to carry out an autism diagnostic assessment, for children and young people with special circumstances including: coexisting conditions such as severe visual and hearing impairments, motor disorders including cerebral palsy, severe learning (intellectual) disabilities, complex language disorders or complex mental health disordersHow and from who is this expertise accessedv. Nice require each diagnostic assessment consideration of the differential diagnosis who assesses the possibility of the following1. a learning (intellectual) disability or global developmental delay 2. Attention deficit hyperactivity disorder (ADHD) 3. Anxiety disorder 4. Attachment disorders 5. Obsessive compulsive disorder (OCD) 6. Psychosis. 7. Motor Coordination Problems or Development coordination disorder. |
| **Response :**Do you have an overall coordinator for children's autism diagnosis if so who is it?Patrick Otway is the Commissioner for Children's autism assessment and diagnostic pathways for Barnsley Do you have children autism service development plan so where can I find a copy?The Childrens autism assessment and diagnostic service has been redesigned and operational from April 2019.  An all-age autism strategy is due to be developed and initial discussions have been held within the Barnsley Autism Strategy Steering Group (a partnership group) - the plan is to co-produce a strategy with people with autism and their families / carers How is the children's autism diagnosis funded. The service is commissioned and funded by Barnsley CCG How are the NHS ,social services and education input to diagnosis coordinated in1.     For each age group pre school, primary school ,secondary school please tell the following relate to the NICE guidlines                        i.         Do the criteria used the diagnosis match the standards expected by Nice Clinical guideline [CG128]   All childrens autism assessment and diagnosis pathways are NICE compliant                       ii.         The nice guidelines expect you should Start the autism diagnostic assessment within 3 months of the referral to the autism team.?Does your area meet this target if not how long is the wait ?   Yes                     iii.         NICE say In each area a multidisciplinary group (the autism team) should be set up. The core membership should include a: 1.     paediatrician and/or child and adolescent psychiatrist What is the grade and speciality for this team member(if more than one the professional lead)?2.     speech and language therapist (if more than one the professional lead)?What is the grade for this team member(if more than one the professional lead)?3.     clinical and/or educational psychologist. (if more than one the professional lead)?What is the grade and speciality for this team member(if more than one the professional lead)?The MDT (Autism assessment panel) does include all of the professionals outlined above – Barnsley CCG does not hold details of the grade of each – this would need to be requested from the BHNFT Community Paediatric Team​                     iv.         Nice say The autism team should either have the skills (or have access to professionals that have the skills) needed to carry out an autism diagnostic assessment, for children and young people with special circumstances including: coexisting conditions such as severe visual and hearing impairments, motor disorders including cerebral palsy, severe learning (intellectual) disabilities, complex language disorders or complex mental health disordersHow and from who is this expertise accessed As part of the assessment panel - any further detail would need to be obtained from BHNFT's Paediatric Community Team                       v.         Nice require each diagnostic assessment consideration of the differential diagnosis who assesses the possibility of the following1.     a learning (intellectual) disability or global developmental delay 2.     Attention deficit hyperactivity disorder (ADHD) 3.     Anxiety disorder 4.     Attachment disorders 5.     Obsessive compulsive disorder (OCD) 6.     Psychosis. 7.     Motor Coordination Problems or Development coordination disorder. thank you                       Our services are NICE compliant and do consider all of the above.​  |

|  |  |
| --- | --- |
| **FOI NO: 1585** | **Date Received: 28 August 2020** |
| **Request :**1. The average waiting time (in calendar days) for women who had an NHS-funded medical abortion in 2014, 2015, 2016, 2017, 2018, 2019 - from the date of their first referral appointment to (and including) the date of the procedure2. The average waiting time (in calendar days) for women who had an NHS-funded surgical abortion in 2014, 2015, 2016, 2017, 2018, 2019 - from the date of their first referral appointment to (and including) the date of the procedure |
| **Response :**Barnsley CCG do not hold this information. Please could you redirect your request to providers for example; Barnsley Hospital NHS Foundation Trust. |

|  |  |
| --- | --- |
| **FOI NO: 1586** | **Date Received: 28 August 2020** |
| **Request :** |
| **Response :**Barnsley Clinical Commissioning Group does not hold the information requested.  Please re-direct your questions to the relevant Trusts in Barnsley (Barnsley Hospital NHS Foundation Trust and South West Yorkshire Partnership NHS Foundation Trust). |