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| **FREEDOM OF INFORMATION REQUESTS JULY 2018** |

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| **FOI NO: 1085** | **Date Received:3 July 2018** |
| **Request :** | |
| **Response :**  **Q1: IVF provision**  1a: In the financial year 2017/18 what was the total number of IVF, ICSI and FET cycles delivered on behalf of your CCG (separate volumes) and the total spend by the CCG.   |  |  |  | | --- | --- | --- | |  | Total number of cycles in financial year 2017/2018 | Total spend on cycles in financial year 2017/2018 | | IVF | 49 | £119,600 | | ICSI | 25 | £73,533 | | FET | 31 | £20,301 |     1b: For the financial year 2017/18, please provide the per cycle price paid to ISP ‘s to deliver IVF, ICSI and FET cycles. (If you are unable to answer this for commercial reasons please answer 1c)    Not Applicable – we do not contract with ISPs for IVF     |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | |  | Cost of care provision by IVF ISP's | | | | | | |  | ISP 1 | ISP 2 | ISP 3 | ISP 4 | ISP 5 | ISP 6 | | IVF |  |  |  |  |  |  | | ICSI |  |  |  |  |  |  | | FET |  |  |  |  |  |  |     1c: For each pathway of care below, please indicate the number of providers contracted by the CCG that fall into each price range according to the current cost per cycle. The example below shows how the data would be entered if two providers provide IVF at a rate of £2500 per cycle, and one provider provides IVF at a rate of £3000 per cycle    Not Applicable – we do not contract with ISPs for IVF     |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  | Cost of care provision by IVF  ISP's | | | | | | | | Cost per cycle | Below £2499 | £2500-£2999 | £3000-£3499 | £3500 -£3999 | £4000-£4499 | £4500- £4999 | £5000+ | | *EXAMPLE: IVF* |  | *2* | *1* |  |  |  |  | | IVF |  |  |  |  |  |  |  | | ICSI |  |  |  |  |  |  |  | | FET |  |  |  |  |  |  |  |     1d: How many cycles of IVF (with or without ICSI) do you offer patients i.e. – 1 cycle, 3 cycles. Please describe your policy as to whether the cycles offered are fresh, frozen, or full cycles. In other words, do you count fresh/ frozen cycles as separate cycles?    Please find this information contained within our policy (Link below)    1e: Please provide a copy of your current applied eligibility and treatment criteria.    Please see link to Fertility Policy (Please note this is currently under review  <http://www.barnsleyccg.nhs.uk/CCG%20Downloads/strategies%20policies%20and%20plans/Fertility%20Policy%202014%20-%20Barnsley.pdf>    **Question 2 - IVF Tender Process**  2a: What is the CCG’s current model of provision:   |  |  | | --- | --- | | **Model of provision** |  | | Sole provider |  | | Selected providers |  | | Any willing provider |  | | Other (please describe) | There is a choice of providers that are available within contract via the ‘choose & book’ system (CHOICE).  The patient may see a private provider if there is evidence of exceptionality and IFR funding approval has been granted |     2b: When did CCG last place its IVF service out for procurement? The CCG has not procured its IVF service  2c: Since the CCG last placed its IVF service out for procurement, what market engagement exercises have taken place? Not applicable  2d: How has the CCG satisfied itself that it has the best placed providers in relation to IVF? Not applicable  2e: What are the CCGs commissioning intentions in relation to IVF services? Not applicable  2f: Who are the providers currently under contract with the CCG for the delivery of IVF? (Please include contracts where the CCG is an associate commissioner) Sheffield Teaching Hospitals / Leeds Teaching Hospitals    **Question 3   - IVF Top Up Provision**  3a: What is the CCGs Policy on the Provision of Top-Up Treatments, for example: embryo glue; assisted hatching; PGS NGS; Embryoscope. How is this translated in relation to IVF and associated care?   (Please send me a copy) The CCG do not routinely commission this and therefore it is not covered under the above policy  3b: Are patients able to top-up when having care at both NHS and Independent Sector Providers, or do different rules apply? No  3c: Do you give patients any support and guidance material on the topic of top ups? The CCG does not provide any of these types of materials. Please redirect the question to Sheffield Teaching Hospital or Leeds Teaching hospitals  3d: Is there an opportunity for providers to offer this guidance material? As above | |

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| **FOI NO: 1086** | **Date Received: 4 July 2018** |
| **Request :**  1) What services has your CCG commissioned to meet the ‘reasonable requirements’ as is your duty under Section 3 NHS Act 2006 of those in your area who have or may have Foetal Alcohol Spectrum Disorders as a result of antenatal exposure to alcohol and what is your CCG doing to secure improvement in the physical and mental health of persons with Foetal Alcohol Spectrum Disorders and for the prevention, diagnosis and treatment of FASD (as is in your power under Section 3A NHS Act 2006)? The following conditions fall under the Foetal Alcohol Spectrum Disorder (FASD) umbrella: Foetal Alcohol Syndrome (FAS), Alcohol-Related Neurodevelopmental Disorder (ARND), Alcohol-Related Birth Defects (ARBD), Foetal Alcohol Effects (FAE) and partial Foetal Alcohol Syndrome (pFAS)) or neurodevelopmental disorders linked to prenatal alcohol exposure (NDPAE) for:  a. prevention education following the Chief Medical Officer’s guidelines that the safest course is not to drink while pregnant or attempting to become pregnant;  b. diagnosis for both children and adults;  c. post-diagnostic care in the years 2013- 2018 from professionals including, but not limited to, paediatricians, GPs, nurses, psychologists, occupational therapists, speech and language therapists, mental health services and other disability support services to provide specialised intervention services for patients on the FASD spectrum across their lifespan?  2) How is your CCG exercising its duty (as specified under Section 14R NHS Act 2006) to securing “continuous improvement in the quality of services provided” to individuals with Foetal Alcohol Spectrum Disorders “for or in connection with the prevention, diagnosis or treatment” of FASD?  3) What is the budget for commissioned services for FASD in the current financial year? What was the budget in 2013, 2014, 2915, 2016 and 2017?  4) Has your CCG conducted, commissioned or assisted the conduct of research into any matters relating to the causation, prevention, diagnosis or treatment of Foetal Alcohol Spectrum Disorders, as is in your powers according to Section 5 NHS Act 2006 Schedule 1 (paragraph 13).  5) Does your CCG commission services from the National FASD Clinic? If so, what is the budget for this?  6) How are you fulfilling your duty (specified under Section 14Z, NHS Act 2006) to promote education and training related to FASD?  7) Do you have a lead person in your CCG on FASD? Please provide the name of the person responsible.  8) What steps are you taking or have you taken (according to your duty under section 14Z2 of the NHS Act, 2006), to involve individuals with FASD or their caregivers in “planning commissioning arrangements; in the development and consideration of proposals for change; in decisions affecting the operation of commissioning arrangements where implementation would have an impact on the manner in which services are delivered or the range of services available.”?  9) How many inquiries/requests/letters have you received from medical practitioners or patients/families in your area related to FASD in the years 2013-2018? | |
| **Response :**  Barnsley CCG do not specifically commission services for Foetal Alcohol Spectrum Disorders, however these services are provided as part of the maternity services that we commission, on a block contract basis, from Barnsley Hospital NHS Foundation Trust. As part of the Maternity services offer Barnsley have a Specialist Midwife Substance Misuse team which is funded by Barnsley CCG but directly commissioned by Barnsley Metropolitan Borough Council as part of the overall contract for substance misuse services. Providing access to substance misuse services is a Public Health responsibility. Where possible however, a direct response to each question has been provided below.  1) What services has your CCG commissioned to meet the ‘reasonable requirements’ as is your duty under Section 3 NHS Act 2006 of those in your area who have or may have Foetal Alcohol Spectrum Disorders as a result of antenatal exposure to alcohol and what is your CCG doing to secure improvement in the physical and mental health of persons with Foetal Alcohol Spectrum Disorders and for the prevention, diagnosis and treatment of FASD (as is in your power under Section 3A NHS Act 2006)? The following conditions fall under the Foetal Alcohol Spectrum Disorder (FASD) umbrella: Foetal Alcohol Syndrome (FAS), Alcohol-Related Neurodevelopmental Disorder (ARND), Alcohol-Related Birth Defects (ARBD), Foetal Alcohol Effects (FAE) and partial Foetal Alcohol Syndrome (pFAS)) or neurodevelopmental disorders linked to prenatal alcohol exposure (NDPAE) for:  a. prevention education following the Chief Medical Officer’s guidelines that the safest course is not to drink while pregnant or attempting to become pregnant; this will be covered in the Service Level Agreement between Public Health (BMBC) and the Substance Misuse Service Provider, DISC  b. diagnosis for both children and adults;  as 1(a) for Adults. The childrens substance misuse service is provided by Barnsley Metropolitan Borough Council – the Council would need to be approached for a full and accurate response to this question  c. post-diagnostic care in the years 2013- 2018 from professionals including, but not limited to, paediatricians, GPs, nurses, psychologists, occupational therapists, speech and language therapists, mental health services and other disability support services to provide specialised intervention services for patients on the FASD spectrum across their lifespan? Details will be contained within the service specification of the Substance Misuse service commissioned by the Local Authority – please approach the Local Authority directly for a full and accurate response  2) How is your CCG exercising its duty (as specified under Section 14R NHS Act 2006) to securing “continuous improvement in the quality of services provided” to individuals with Foetal Alcohol Spectrum Disorders “for or in connection with the prevention, diagnosis or treatment” of FASD? As per response to 1(c)  3) What is the budget for commissioned services for FASD in the current financial year? What was the budget in 2013, 2014, 2915, 2016 and 2017? ? As FASD services are not directly commissioned but are part of a much broader block contract covering the whole of maternity services and Substance Misuse Services there is no specific budget  4) Has your CCG conducted, commissioned or assisted the conduct of research into any matters relating to the causation, prevention, diagnosis or treatment of Foetal Alcohol Spectrum Disorders, as is in your powers according to Section 5 NHS Act 2006 Schedule 1 (paragraph 13).  ). No – the Specialist Substance Misuse Midwife was has been approached in the past to be involved with a research audit but this was not progressed.  5) Does your CCG commission services from the National FASD Clinic? If so, what is the budget for this? No  6) How are you fulfilling your duty (specified under Section 14Z, NHS Act 2006) to promote education and training related to FASD? This is not specifically commissioned but as part of the maternity services offer, the Specialist Substance Misuse Midwife undertakes training on a national / local level. The Specialist midwife trains students at local universities in addition to maternity staff and F1’s. Training will also be provided to staff working within SCBU and Paediatrics.  7) Do you have a lead person in your CCG on FASD? Please provide the name of the person responsible.  The Maternity Commissioner for Barnsley CCG is Patrick Otway, Head of Commissioning (Mental Health, Children’s, Maternity and Specialised Services)  8) What steps are you taking or have you taken (according to your duty under section 14Z2 of the NHS Act, 2006), to involve individuals with FASD or their caregivers in “planning commissioning arrangements; in the development and consideration of proposals for change; in decisions affecting the operation of commissioning arrangements where implementation would have an impact on the manner in which services are delivered or the range of services available.”? Maternity services are being transformed nationally to deliver the recommendations of ‘Better Births’. This transformation will be greatly  influenced by the local Maternity Voice Partnerships with whom commissioners will work closely to provide the maternity services that local women and their family’s want.  9) How many inquiries/requests/letters have you received from medical practitioners or patients/families in your area related to FASD in the years 2013-2018? 1 | |

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| **FOI NO: 1087** | **Date Received: 4 July 2018** |
| **Request :** | |
| **Response :** | |

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| **FOI NO: 1088** | **Date Received: 4 July 2018** |
| **Request :**   * How many service users are waiting within the community mental health services for psychological therapy? * How long are individuals on waiting lists for psychological assessments within community mental health services? * How long are individuals on waiting lists before receiving the first appointment for psychological therapy within secondary care/community mental health services? * What are the range of therapies your community/secondary care psychology service deliver? | |
| **Response :**  Barnsley CCG does not hold this information, please redirect your request to South West Yorkshire Partnership NHS Foundation Trust <http://www.southwestyorkshire.nhs.uk/about-us/contact-us/freedom-of-information/> | |

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| **FOI NO: 1089** | **Date Received: 5 July 2018** |
| **Request :**  I would like to request information on the Urgent Treatment Centres (UTCs) in your CCG. Urgent treatment centres will be GP-led, open at least 12 hours a day, every day, and be equipped to diagnose and deal with many of the most common ailments people attend A&E for. The NHS will roll out around 150 urgent treatment centres by December this year and by December 2019 all services designated as urgent treatment centres will meet the guidelines we have now issued.  Please can you share the total number of UTC due to be launched in your CCG.  For each UTC in your CCG, please can you provide the following information:  • UTC name  • UTC address  • It’s launch date  • Contact information (where available)  • Website (where available) | |
| **Response :**  There are no Urgent Treatment Centres in Barnsley and no current plans to have a designated UTC in Barnsley. | |

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| **FOI NO: 1090** | **Date Received: 6 July 2018** |
| **Request :**  Using the table below, can you please indicate for me how much your organisation spent on public engagement activities for each of the last two financial years.  Where you are unable to provide exact figures I will accept estimates but please indicate. Where you are unable to provide the figures broken down please provide just the total.   |  |  |  | | --- | --- | --- | | **Activity** | **2016/17** (£) | **2017/18** (£) | | Staff costs for those working on public engagement |  |  | | Cost of lay members on boards / advisory groups |  |  | | Running costs of regular patient forums / groups |  |  | | Externally commissioned engagement activity including public surveys or focus groups |  |  | | Formal consultations (including comms spend) |  |  | | Other (please specify if possible) |  |  | | **Total** |  |  | | |
| **Response :**   |  |  |  | | --- | --- | --- | | **Activity** | **2016/17** (£) | **2017/18** (£) | | Staff costs for those working on public engagement | 80,981.50 | 83,377.39 | | Cost of lay members on boards / advisory groups | 14,285.00 | 14,429.00 | | Running costs of regular patient forums / groups | 200.00 | 200.00 | | Externally commissioned engagement activity including public surveys or focus groups | 40,660.00 | 40,660.00 | | Formal consultations (including comms spend) | 501.49 | 1,758.47 | | Other (Promotional Advertsing, Room Hire & Catering to promote projects) | 5,820.00 | 5,599.00 | |  |  |  | | **Total** | **142,447.99** | **146,023.86** | | |

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| **FOI NO: 1091** | **Date Received: 9 July 2018** |
| **Request :**  **Current A&E GP streaming service:**  **1 Who is the contracted provider of A&E streaming GPs.**  2. What are the opening hours?  3. How many GPs do you have working at any one time?  4. What is the hourly pay?  5. What is the seniority mix?  6. How many GPs do you have and how many vacancies?  7. What proportion are: a) locums, b) from local practices c) employed by the Trust, or d) other? (If other, please explain)  **Between November 1 2017 and April 30 2018:**  8. How many patients were seen through A&E GP streaming?  9. What proportion were: a) dealt with in full, b) sent through to A&E, c) referred to their own GP or d) other?  **To date (since launching the streaming service):**  10. How many patient complaints have you received concerning A&E GP streaming? | |
| **Response :**  Barnsley CCG does not commission an A & E GP streaming service, this service is sub contracted by Barnsley NHS Foundation Hospital to Barnsley Healthcare Federation.  Therefore, the below FOI request would need to be submitted to Barnsley NHS Foundation Hospital as the commissioner of the service. | |

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| **FOI NO: 1092** | **Date Received: 9 July 2018** |
| **Request :**  Under the provisions of the Freedom of Information legislation, could you please provide the contact information for all GP Extended Access Hubs operating within your CCG.  The information specifically requested is:  1. Name of the hub  2. Name of Chair/CEO/Lead Responsible officer  3. Name of the provider group that runs the hub  3. Contact email address  4. Postal address  5. Telephone  6. Website URL | |
| **Response :**  There are two extended access hubs within Barnsley:  **Hub 1:**  [Woodland Drive Medical Centre](https://www.google.co.uk/maps/place/Woodland+Drive+Medical+Centre/@53.5477815,-1.5091857,17z/data=%213m1%214b1%214m5%213m4%211s0x48797b369116ec33:0xf9a9332848e7260e%218m2%213d53.5477783%214d-1.506997),  CEO- Marie Hoyle  Provider: Barnsley Healthcare Federation  Email: N/A  Postal: [Woodland Drive Medical Centre](https://www.google.co.uk/maps/place/Woodland+Drive+Medical+Centre/@53.5477815,-1.5091857,17z/data=%213m1%214b1%214m5%213m4%211s0x48797b369116ec33:0xf9a9332848e7260e%218m2%213d53.5477783%214d-1.506997), Woodland Drive, Barnsley, S70 6QW  Telephone: 01226 242419  Website: <https://www.iheartbarnsley.org.uk/about-i-heart/the-service/>  **Hub 2:**  [Chapelfield Medical Centre](https://www.google.co.uk/maps/place/Chapelfield+Medical+Centre/@53.5218318,-1.39829,17z/data=%213m1%214b1%214m5%213m4%211s0x4879705adac547c1:0x3f461e2f51321c74%218m2%213d53.5218318%214d-1.3961013)  [Woodland Drive Medical Centre](https://www.google.co.uk/maps/place/Woodland+Drive+Medical+Centre/@53.5477815,-1.5091857,17z/data=%213m1%214b1%214m5%213m4%211s0x48797b369116ec33:0xf9a9332848e7260e%218m2%213d53.5477783%214d-1.506997),  CEO- Marie Hoyle  Provider: Barnsley Healthcare Federation  Email: N/A  Postal: [Chapelfield Medical Centre](https://www.google.co.uk/maps/place/Chapelfield+Medical+Centre/@53.5218318,-1.39829,17z/data=%213m1%214b1%214m5%213m4%211s0x4879705adac547c1:0x3f461e2f51321c74%218m2%213d53.5218318%214d-1.3961013), Mayflower Way, Wombwell, Barnsley, S73 0AJ  Telephone: 01226 242419  Website: <https://www.iheartbarnsley.org.uk/about-i-heart/the-service/> | |

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| **FOI NO: 1093** | **Date Received: 10 July 2018** |
| **Request :**  1. How many Improving Access to Psychological Therapy trainee places have been budgeting for in (a) 2018/19; (b) 2019/20; (c) 2020/21  2. What steps has the CCG taken in business continuity plans or Emergency Preparedness, Resilience and Response programme to reduce pressure on IAPT services? | |
| **Response :**   1. How many Improving Access to Psychological Therapy trainee places have been budgeting for in   (a) 2018/19 -  2 high intensity and 4 low intensity trainee places  (b) 2019/20 - 6 high intensity and 4 low intensity trainee places  (c) 2020/21 – not yet agreed   1. What steps has the CCG taken in business continuity plans or Emergency Preparedness, Resilience and Response programme to reduce pressure on IAPT services?   Each relevant organisation has their own continuity plans and / or emergency preparedness, resilience and response. Please refer to organisation websites for the policies and procedures relating to these  Barnsley CCG - <http://www.barnsleyccg.nhs.uk/CCG%20Downloads/strategies%20policies%20and%20plans/Barnsley%20CCG%20EPRR%20Policy%2020161013.pdf>  SWYPFT - <http://www.southwestyorkshire.nhs.uk/about-us/policies/> | |

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| **FOI NO: 1094** | **Date Received: 11 July 2018** |
| **Request :**  I’d like to request all correspondence between the CCG chair and Chief Executive and:   * Philip Morris International * British American Tobacco * Japan Tobacco International * Imperial Brands (formally Imperial Tobacco) * Tobacco Manufactures Association * Tobacco Retailers Alliance   between 11th July 2017 and 11th July 2018 | |
| **Response :**  We can confirm that we have received one communication from Philip Morris Ltd (dated 3 July 2018) attached. | |

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| **FOI NO: 1095** | **Date Received: 11 July 2018** |
| **Request :**  1. A) Does the CCG provide extended GP access by offering routine GP appointments 8am-8pm, seven days a week? (Yes/No)    B) Please state what evening and weekend routine GP access is provided in the CCG area (if any). Please only include information on routine GP appointments made available out of normal hours, not any emergency or urgent out-of-hours services.  2. How many extended access appointments are available in the CCG area on A) Saturday B) Sunday and C) weekday evenings? (please state a separate figure for A, B and C)   1. In the financial year 2017/18, what percentage of these extended access appointments were filled on A) Saturdays B) Sundays and C) weekday evenings? (please state a separate figure for A, B and C)   4. A) How many locations (ie. GP practices, health centres) within the CCG area host the extended access routine GP appointments?  B) If possible, please provide a list of clinics which host these extended access appointments and, if applicable, state what they offer (eg. "Practice A - evenings, Saturdays & Sundays; Practice B - Sundays only”).  5. In the year 2017/18, what did the CCG spend on providing extended access to routine GP appointments?  Please include any funding received by the CCG from central bodies specifically for providing the extended access to routine appointments service, as well as any other funding spent on this by the CCG. Please do not include any money spent on emergency or urgent out-of-hours care. | |
| **Response :**  1.    A) Does the CCG provide extended GP access by offering routine GP appointments 8am-8pm, seven days a week? Yes  B) Please state what evening and weekend routine GP access is provided in the CCG area (if any). Please only include information on routine GP appointments made available out of normal hours, not any emergency or urgent out-of-hours services.  6.30pm – 10.00pm Monday to Friday and 9am to 1pm weekends and Bank Holidays  2.   How many extended access appointments are available in the CCG area on A) Saturday B) Sunday and C) weekday evenings? (please state a separate figure for A, B and C)  The CCG commissions 30 minutes of extended access per 1,000 patients. For further appointment data the requester would need to contact Barnsley Healthcare Federation as the provider of this service:  <https://www.iheartbarnsley.org.uk/>  3.   In the financial year 2017/18, what percentage of these extended access appointments were filled on A) Saturdays B) Sundays and C) weekday evenings? (please state a separate figure for A, B and C)        As above Barnsley CCG does not hold this information, this information can be obtained by contacting Barnsley Healthcare Federation direct.  4.    A) How many locations (ie. GP practices, health centres) within the CCG area host the extended access routine GP appointments?         B) If possible, please provide a list of clinics which host these extended access appointments and, if applicable, state what they offer (eg. "Practice A - evenings, Saturdays & Sundays; Practice B - Sundays only”).         There are two hubs within Barnsley which are open for extended access appointments 7 days per week;         1. Woodland Drive Medical Centre, Woodland Drive, Barnsley, S70 6QW         2. Wombwell Chapelfield Medical Centre, Mayflower Way, Wombwell, Barnsley, S73 0AJ  5.   In the year 2017/18, what did the CCG spend on providing extended access to routine GP appointments?        Please include any funding received by the CCG from central bodies specifically for providing the extended access to routine appointments service, as well as any     other funding spent on this by the CCG. Please do not include any money spent on emergency or urgent out-of-hours care.             £1,538,679  <http://www.barnsleyccg.nhs.uk/about-us/contracts.htm> | |

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| **FOI NO: 1096** | **Date Received: 11 July 2018** |
| **Request :**  1.     The number of referrals to Children and Adolescent Mental Health services from schools received in the year 2017, broken down by age and referral reason (e.g eating disorders/anxiety/depression).    2.     The number of referrals to Children and Adolescent Mental Health services from schools received in the year 2018, broken down by age and referral reason.    3.     The number ofreferrals to Children and Adolescent mental health services from schools in 2017 that were **rejected**, broken down by age and reasons for referral rejection    4.     The number ofreferrals to Children and Adolescent mental health services from schools in 2018 that were **rejected**, broken down by age and reasons for referral rejection    5.     The number of pupils referred to Children and Adolescent mental health services from schools **more than once** in 2017    6.     The number of pupils referred to Children and Adolescent mental health services from schools **more than once** in 2018 | |
| **Response :**  Barnsley CCG does not hold this information.  Please redirect your enquiry to SWYPFT CAMHS Service at <http://www.southwestyorkshire.nhs.uk/about-us/contact-us/freedom-of-information/> | |

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| **FOI NO: 1097** | **Date Received: 13 July 2018** |
| **Request :**  1. Does the CCG have a formulary for Ketone Test Strips, If so please can you provide the formulary/s or link to the formulary/s  2. Please advise the responsible Medicines Optimisation contact for the above formularies and their contact details  3. Please advise the dates when the above Formularies were last reviewed and when they are set for next review | |
| **Response :**  1. Does the CCG have a formulary for Ketone Test Strips, If so please can you provide the formulary/s or link to the formulary/s  **The  link to the Barnsley Formulary**.  <http://www.barnsleyformulary.nhs.uk/>  **Ketone**  <http://www.barnsleyformulary.nhs.uk/searchresults.asp?SearchVar=ketone&Submit2=Search>    **The link to the test strips guidance is on the Barnsley Diabetes Guidelines page at the top.**  <http://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Blood_Glucose_Test_Strips_update_2017.pdf>    The link on BEST to the Barnsley Diabetes Guidelines page is below.  <http://best.barnsleyccg.nhs.uk/clinical-support/local-pathways-and-guidelines/diabetes-barnsley-guidelines/16338>  2. Please advise the responsible Medicines Optimisation contact for the above formularies and their contact details  **Barnsley Medicines Management Team Telephone 01226433798**  3. Please advise the dates when the above Formularies were last reviewed and when they are set for next review.  **The test strip guidance was reviewed in 2017 and will be reviewed next in 2019** | |

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| **FOI NO: 1098** | **Date Received: 13 July 2018** |
| **Request :**   1. Please can you state the main provider of children’s and young people’s community services, including physical and mental health, for NHS Barnsley CCG in each the following financial years: 2015-16, 2016-17, 2017-18, 2018-19 2. Please can you state the CCG’s total spending on children’s and young people’s community services, including physical and mental health, in each the following financial years: 2015-16, 2016-17, 2017-18, 2018-19 3. When does the CCG’s current main contract for these services end? 4. Does the CCG intend to tender the contract at that point? | |
| **Response :**   1. Please can you state the main provider of children’s and young people’s community services, including physical and mental health, for NHS Barnsley CCG in each the following financial years: 2015-16, 2016-17, 2017-18, 2018-19 -The Main Provider for children’s community services is South West Yorkshire Partnership Foundation Trust 2. Please can you state the CCG’s total spending on children’s and young people’s community services, including physical and mental health, in each the following financial years: 2015-16, 2016-17, 2017-18, 2018-19 – Children services are commissioned by the Local Authority, Barnsley Metropolitan Borough Council 3. When does the CCG’s current main contract for these services end? – 31 March 2019 4. Does the CCG intend to tender the contract at that point? – It is currently anticipated that these services will be rolled over at that point. | |

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| **FOI NO: 1099** | **Date Received: 16 July 2018** |
| **Request :** | |
| **Response :** | |

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| **FOI NO: 1100** | **Date Received: 17 July 2018** |
| **Request :**  **Please can you send me the following contract information with regards to the organisation’s telephone system maintenance contract (VOIP or PBX, other) for hardware and Software maintenance and support:**    1.       Contract Type: Maintenance, Managed, Shared (If so please state orgs)  2.       Existing Supplier: If there is more than one supplier please split each contract up individually.  3.       Annual Average Spend: The annual average spend for this contract and please provide the average spend over the past 3 years for each provider  4.       Hardware Brand: The primary hardware brand of the organisation’s telephone system.  5.       Number of telephone users:  6.       Contract Duration: please include any extension periods.  7.       Contract Expiry Date: Please provide me with the day/month/year.  8.       Contract Review Date: Please provide me with the day/month/year.  9.       Application(s) running on PBX/VOIP systems: Applications that run on the actual PBX or VOIP system. E.g. Contact Centre, Communication Manager.  10.   Telephone System Type: PBX, VOIP, Lync etc  11.   Contract Description: Please provide me with a brief description of the overall service provided under this contract.  12. Go to Market: How where these services procured, please provide me with either the tender notice or the framework reference number. Please specify if procured through other routes.  13.   Contact Detail: Of the person from with the organisation responsible for each contract full Contact details including full name, job title, direct contact number and direct email address.    If the service support area has more than one provider for telephone maintenance then can you please split each contract up individually for each provider?    If the contract is a managed service or is a contract that provides more than just telephone maintenance please can you send me all of the information specified above including the person from with the organisation responsible for that particular contract?    If the maintenance for telephone systems is maintained in-house please can you provide me with:    1.       Number of telephone Users:  2.       Hardware Brand: The primary hardware brand of the organisation’s telephone system.  3.       Application(s) running on PBX/VOIP systems: Applications that run on the actual PBX or VOIP system. E.g. Contact Centre, Communication Manager.  4.       Contact Detail: Of the person from with the organisation responsible for telephone maintenance full Contact details including full name, job title, direct contact number and direct email address.    Also if the contract is due to expire please provide me with the likely outcome of the expiring contract.  If this is a new contract or a new supplier please can you provide me with a short list of suppliers that bid on this service/support contract? | |
| **Response :**  1.       Contract Type: Maintenance, Managed, Shared (If so please state orgs) **Maintenance**  2.       Existing Supplier: If there is more than one supplier please split each contract up individually. **Unify**  3.       Annual Average Spend: The annual average spend for this contract and please provide the average spend over the past 3 years for each provider **£8720**  4.       Hardware Brand: The primary hardware brand of the organisation’s telephone system. **Highpath DX**  5.       Number of telephone users: **1600**  6.       Contract Duration: please include any extension periods. **12 months with an option to extend**  7.       Contract Expiry Date: Please provide me with the day/month/year. **31 March 2019**  8.       Contract Review Date: Please provide me with the day/month/year. **30 November 2018**  9.       Application(s) running on PBX/VOIP systems: Applications that run on the actual PBX or VOIP system. E.g. Contact Centre, Communication Manager. **There are no applications running on the telephone system**.  10.   Telephone System Type: PBX, VOIP, Lync etc **PBX/VOIP**  11.   Contract Description: Please provide me with a brief description of the overall service provided under this contract. **Maintenance Only**  12. Go to Market: How where these services procured, please provide me with either the tender notice or the framework reference number. Please specify if procured through other routes.  **As part of the Unified Comms tender & Contract (BHNFTT1383). Awarded  to Softcat Dec 2015.**  13.   Contact Detail: Of the person from with the organisation responsible for each contract full Contact details including full name, job title, direct contact number and direct email address. **Richard Wright** [Richard.wright@nhs.net](mailto:Richard.wright@nhs.net) **ICT Infrastructure Manager 01226 432771**    If the service support area has more than one provider for telephone maintenance then can you please split each contract up individually for each provider?  **N/A**    If the contract is a managed service or is a contract that provides more than just telephone maintenance please can you send me all of the information specified above including the person from with the organisation responsible for that particular contract? **N/A**    If the maintenance for telephone systems is maintained in-house please can you provide me with:    1.       Number of telephone Users: **N/A**  2.       Hardware Brand: The primary hardware brand of the organisation’s telephone system. **N/A**  3.       Application(s) running on PBX/VOIP systems: Applications that run on the actual PBX or VOIP system. E.g. Contact Centre, Communication Manager. **N/A**  4.       Contact Detail: Of the person from with the organisation responsible for telephone maintenance full Contact details including full name, job title, direct contact number and direct email address. **N/A**     Also if the contract is due to expire please provide me with the likely outcome of the expiring contract. **N/A**  If this is a new contract or a new supplier please can you provide me with a short list of suppliers that bid on this service/support contract? **N/A** | |

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| **FOI NO: 1101** | **Date Received: 16 July 2018** |
| **Request :**  a) Whether the Governing Body meeting on 12th July considered and approved a proposal to start a procurement process in Autumn 2018 (or later) for extended primary care, community health, mental health and hospital services to be provided by a single organisation.  b) If so, if the intention is for this contract to be awarded through an Integrated Care Organisation contract.  c) Why this was not listed as an agenda item for the 12th July 2018 Governing Body meeting. | |
| **Response :**  a) Whether the Governing Body meeting on 12th July considered and  approved a proposal to start a procurement process in Autumn 2018 (or  later) for  extended primary care, community health, mental health and  hospital services to be provided by a single organisation.  There was a short presentation on developing proposals to join up health care in Barnsley. Part of the developing proposals includes looking at whether an integrated care organisation would be something that could work in Barnsley. This was a general update at the governing body meeting in public and was there was no item for decision on a procurement process.    b) If so, if the intention is for this contract to be awarded through an  Integrated Care Organisation contract.  There was no item for decision on a procurement process.    c) Why this was not listed as an agenda item for the 12th July 2018  Governing Body meeting.  This was a regular item on our agenda which provides an update on the work we are doing in Barnsley to improve and integrate care. The item is listed on the agenda in this link and is item 9. <http://www.barnsleyccg.nhs.uk/CCG%20Downloads/About%20Us/Governing%20Body/Meetings/2018/Combined%20Governing%20Body%20Agenda%2012%20July%202018.pdf> | |

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| **FOI NO: 1102** | **Date Received: 17 July 2018** |
| **Request:**  Under the Freedom of Information Act please send me the following information concerning elective clinical thresholds for:  Carpal tunnel syndrome  Cataracts  Dupuytren's contracture  Asymptomatic gallstones  Ganglion  Hip replacement  Knee replacement  Inguinal hernias in adults  Trigger finger  Number of spells during 2016-17 for each condition  Planned target number of spells for 2017-18 for each condition  Spells meeting clinical criteria during 2017-18 for each condition  Spending by CCG on each condition in 2016-17  Spending by CCG on each condition in 2017-18  Total number of spells completed despite not meeting threshold standards  Total cash amount withheld by CCG for spells carried out despite not meeting threshold standards  Total number of patients referred for weight loss clinics due to not meeting BMI threshold | |
| **Response :**  1.       Number of spells during 2016-17 for each condition                  Carpal tunnel syndrome 318                  Cataracts 1,968                  Dupuytren's contracture  109                  Asymptomatic gallstones  114                  Ganglion   120                  Hip replacement  288                  Knee replacement  485                  Inguinal hernias in adults  507                  Trigger finger   136    2.       Planned target number of spells for 2017-18 for each condition            The CCG Contract Indicative Activity Plans are only at Speciality and HRG level, not procedure    3.       Spells meeting clinical criteria during 2017-18 for each condition The CCG does not capture this information  4.       Spending by CCG on each condition in 2016-17                 Carpal tunnel syndrome £293,835                  Cataracts £1,492,499                  Dupuytren's contracture  £468,951                  Asymptomatic gallstones  £ 235,660                  Ganglion   £111,649                  Hip replacement   £1,615,304                  Knee replacement  £3,574,713                  Inguinal hernias in adults  £726,631                  Trigger finger   £138,781    5.       Spending by CCG on each condition in 2017-18                 Carpal tunnel syndrome  £239,926                  Cataracts  £1,495,641                  Dupuytren's contracture  £278,441                  Asymptomatic gallstones  £423,153                  Ganglion  £75,483                  Hip replacement  £1,823,056                  Knee replacement  £2,717,943                  Inguinal hernias in adults  £884,062                  Trigger finger   £132,880    6.       Total number of spells completed despite not meeting threshold standards The CCG does not capture this information    7.       Total cash amount withheld by CCG for spells carried out despite not meeting threshold standards The CCG has not withheld any amount for the above procedures    8.       Total number of patients referred for weight loss clinics due to not meeting BMI threshold  The CCG does not capture this information | |

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| **FOI NO: 1103** | **Date Received: 18 July 2018** |
| **Request :**  1) Please provide copies of any policies your CGG has on the commissioning of services for those with an FASD.  2) What services has your CCG commissioned to meet the ‘reasonable requirements’, as is your duty under Section 3 NHS Act 2006, of those in your area who have or may have Foetal Alcohol Spectrum Disorders as a result of antenatal exposure to alcohol, and what is your CCG doing to secure improvement in the physical and mental health of persons with Foetal Alcohol Spectrum Disorders and for the prevention, diagnosis and treatment of FASD (as is in your power under Section 3A NHS Act 2006)? Please release any information you hold concerning provision for:  a. prevention education following the Chief Medical Officers’ guidelines that the safest course is not to drink while pregnant or attempting to become pregnant;  b. diagnosis for both children and adults;  c. post-diagnostic care in the years 2013- 2018 from professionals including, but not limited to, paediatricians, GPs, nurses, psychologists, occupational therapists, speech and language therapists, mental health services and other disability support services to provide specialised intervention services for patients on the FASD spectrum across their lifespan?  3) Please release any information concerning how is your CCG exercising its duty (as specified under Section 14R NHS Act 2006) to securing “continuous improvement in the quality of services provided” to individuals with Foetal Alcohol Spectrum Disorders “for or in connection with the prevention, diagnosis or treatment” of FASD?  4) What is the budget for commissioned services for FASD in the current financial year? What was the budget in financial years beginning in 2013, 2014, 2015, 2016 and 2017?  5) Please release any agreed plans for service expansion for future years.  6) Has your CCG conducted, commissioned or assisted the conduct of research into any matters relating to the causation, prevention, diagnosis or treatment of Foetal Alcohol Spectrum Disorders, as is in your powers according to Section 5 NHS Act 2006 Schedule 1 (paragraph 13).  7) Does your CCG commission services from the National FASD Clinic? If so, what is the budget for this in the current financial year?  8) Please release any information concerning ways in which your CCG is fulfilling its duty (specified under Section 14Z, NHS Act 2006) to promote education and training related to FASD?  9) Do you have a lead person in your CCG on FASD? Please provide the name and role of the person responsible.  10) Please release any information concerning the steps are you taking or have you taken (according to your duty under section 14Z2 of the NHS Act, 2006), to involve individuals with FASD or their caregivers in “planning commissioning arrangements; in the development and consideration of proposals for change; in decisions affecting the operation of commissioning arrangements where implementation would have an impact on the manner in which services are delivered or the range of services available.”?  11) How many inquiries/requests/letters have you received from medical practitioners or patients/families in your area related to FASD in the years 2013-2018? | |
| **Response :**  Barnsley CCG do not specifically commission services for Foetal Alcohol Spectrum Disorders, however these services are provided as part of the maternity services that we commission, on a block contract basis, from Barnsley Hospital NHS Foundation Trust. As part of the Maternity services offer Barnsley have a Specialist Midwife Substance Misuse team which is funded by Barnsley CCG but directly commissioned by Barnsley Metropolitan Borough Council as part of the overall contract for substance misuse services. Providing access to substance misuse services is a Public Health responsibility. Where possible however, a direct response to each question has been provided below.  1)   Please provide copies of any policies your CGG has on the commissioning of services for those with an FASD. Alcohol and Pregnancy – Preventing and Managing foetal alcohol spectrum disorders (Updated 2016) and NICE Guidance: Public Health guideline: Alcohol-use disorders prevention (PH24) – documents attached  2)   What services has your CCG commissioned to meet the ‘reasonable requirements’, as is your duty under Section 3 NHS Act 2006, of those in your area who have or may have Foetal Alcohol Spectrum Disorders as a result of antenatal exposure to alcohol, and what is your CCG doing to secure improvement in the physical and mental health of persons with Foetal Alcohol Spectrum Disorders and for the prevention, diagnosis and treatment of FASD (as is in your power under Section 3A NHS Act 2006)? Please release any information you hold concerning provision for:  a.   prevention education following the Chief Medical Officers’ guidelines that the safest course is not to drink while pregnant or attempting to become pregnant; this will be covered in the Service Level Agreement between Public Health (BMBC) and the Substance Misuse Service Provider, DISC  b.   diagnosis for both children and adults;  as 2(a) for Adults. The childrens substance misuse service is provided by Barnsley Metropolitan Borough Council – the Council would need to be approached for a full and accurate response to this question  c.   post-diagnostic care in the years 2013- 2018 from professionals including, but not limited to, paediatricians, GPs, nurses, psychologists, occupational therapists, speech and language therapists, mental health services and other disability support services to provide specialised intervention services for patients on the FASD spectrum across their lifespan? Details will be contained within the service specification of the Substance Misuse service commissioned by the Local Authority – please approach the Local Authority directly for a full and accurate response  3)   Please release any information concerning how is your CCG exercising its duty (as specified under Section 14R NHS Act 2006) to securing “continuous improvement in the quality of services provided” to individuals with Foetal Alcohol Spectrum Disorders “for or in connection with the prevention, diagnosis or treatment” of FASD?  As per response to 2(c)  4)   What is the budget for commissioned services for FASD in the current financial year? What was the budget in financial years beginning in 2013, 2014, 2015, 2016 and 2017? As FASD services are not directly commissioned but are part of a much broader block contract covering the whole of maternity services and Substance Misuse Services there is no specific budget  5)   Please release any agreed plans for service expansion for future years. There are no agreed plans currently but commissioners are discussing with Head of Midwifery and Public Health future priorities and FASD forms a part of those discussions.  6)   Has your CCG conducted, commissioned or assisted the conduct of research into any matters relating to the causation, prevention, diagnosis or treatment of Foetal Alcohol Spectrum Disorders, as is in your powers according to Section 5 NHS Act 2006 Schedule 1 (paragraph 13). No – the Specialist Substance Misuse Midwife was has been approached in the past to be involved with a research audit but this was not progressed.  7)   Does your CCG commission services from the National FASD Clinic? If so, what is the budget for this in the current financial year? No  8)   Please release any information concerning ways in which your CCG is fulfilling its duty (specified under Section 14Z, NHS Act 2006) to promote education and training related to FASD? Again, this is not specifically commissioned but as part of the maternity services offer, the Specialist Substance Misuse Midwife undertakes training on a national / local level. The Specialist midwife trains students at local universities in addition to maternity staff and F1’s. Training will also be provide to staff working within SCBU and Paediatrics.  9)   Do you have a lead person in your CCG on FASD? Please provide the name and role of the person responsible. The Maternity Commissioner for Barnsley CCG is Patrick Otway, Head of Commissioning (Mental Health, Children’s, Maternity and Specialised Services)  10) Please release any information concerning the steps are you taking or have you taken (according to your duty under section 14Z2 of the NHS Act, 2006), to involve individuals with FASD or their caregivers in “planning commissioning arrangements; in the development and consideration of proposals for change; in decisions affecting the operation of commissioning arrangements where implementation would have an impact on the manner in which services are delivered or the range of services available.”? Maternity services are being transformed nationally to deliver the recommendations of ‘Better Births’. This transformation will be greatly  influenced by the local Maternity Voice Partnerships with whom commissioners will work closely to provide the maternity services that local women and their family’s want.  11) How many inquiries/requests/letters have you received from medical practitioners or patients/families in your area related to FASD in the years 2013-2018? 1 | |

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| **FOI NO: 1104** | **Date Received: 18 July 2018** |
| **Request :**  1. In the six months to 30 June 2018, please list any correspondence (including email, phone conversation, physical meeting) between the CCG and representatives of organisations Babylon Healthcare Ltd, Babylon Partners Ltd or GP at Hand, including the data and nature of the correspondence.  2. Please provide documentation relating to these correspondences (including email, phone conversation, physical meeting) with Babylon Healthcare Ltd, Babylon Partners Ltd or GP at Hand, including emails, notes, meeting agendas and minute.   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **CCG** | **Number of correspondence** | **Email Contacts** | **Phone Contact** | **Physical Meeting** | |  |  |  |  |  | |  |  |  |  |  | | |
| **Response :**  I can confirm that Barnsley CCG staff members have not had any contact with Babylon Healthcare Ltd, Babylon Partners Ltd or GP at Hand in the last 6 months | |

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| **FOI NO: 1105** | **Date Received: 18 July 2018** |
| **Request :**  Please could you send to me, in the most appropriate format, the financial figures for how much money you spent on/sent to each individual GP practice and each GP federation/consortium in your area in the most recent financial year? Please could you break this down as payments per registered patient and all other additional payments (e.g. QOF points). | |
| **Response :**  In response to your request for information please see the attached document which provides aggregate payments made to the 33 GP Practices and GP Federation, in Barnsley for 2017/18. The CCG is unable to provide payments or correspondence broken down to individual practice level due to commercial confidentiality. | |

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| **FOI NO: 1106** | **Date Received: 18 July 2018** |
| **Request :** | |
| **Response :** | |

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| **FOI NO: 1107** | **Date Received: 19 July** |
| **Request :**  1.   Please identify and state the name of any formulary group that your CCG was part of in 2016? This may include one or more of: a joint formulary committee, area formulary committee or equivalent formulary.  2.   On what date was Qdem’s 7-day buprenorphine transdermal patch with the product name Butec submitted to any formulary group identified in question “1” above for consideration and approval as to whether it should be included on the respective drug formulary?  3.   Where Butec has been added to your CCG’s drugs formulary or another formulary identified in question “1”, please provide any minutes that evidence what decisions were made in relation to whether to approve or reject Butec’s application.  4.   On what date was Butec first added to your CCG’s drug formulary (adopting the relevant formulary identities listed above)?  5.   Assuming the response to question “3” is positive, has any other branded generic 7-day buprenorphine transdermal patch subsequently been added, or replaced Butec on your CCG’s drug formulary? Please indicate the date on which this occurred. If the answer to this question is positive, please provide any minutes that evidence what decisions were made in relation to whether to approve or reject an subsequent supplier’s branded generic 7-day Buprenorphine transdermal patch application.  6.   Please provide a copy of any guidance your CCG possessed in 2016 that established the process by which a new drug would be considered for addition to your CCG’s drug formulary (again, adopting the relevant formulary identities listed in question “1”).  7.   Please provide any other minutes recorded by your CCG that evidence what decisions were made by your CCG’s medicines management committee or other equivalent committee at CCG level to select a preferred branded generic 7-day Buprenorphine transdermal patch. | |
| **Response :**  1.    Please identify and state the name of any formulary group that your CCG was part of in 2016? This may include one or more of: a joint formulary committee, area formulary committee or equivalent formulary.  NHS Barnsley Area Prescribing Committee.  2.   On what date was Qdem’s 7-day buprenorphine transdermal patch with the product name Butec submitted to any formulary group identified in question “1” above for consideration and approval as to whether it should be included on the respective drug formulary?  The APC considers and assigns a "provisional" traffic light status to all newly licensed products each month.  3.   Where Butec has been added to your CCG’s drugs formulary or another formulary identified in question “1”, please provide any minutes that evidence what decisions were made in relation to whether to approve or reject Butec’s application.  Please see attached  4.   On what date was Butec first added to your CCG’s drug formulary (adopting the relevant formulary identities listed above)?  Please see attached  5.   Assuming the response to question “3” is positive, has any other branded generic 7-day buprenorphine transdermal patch subsequently been added, or replaced Butec on your CCG’s drug formulary? Please indicate the date on which this occurred. If the answer to this question is positive, please provide any minutes that evidence what decisions were made in relation to whether to approve or reject an subsequent supplier’s branded generic 7-day Buprenorphine transdermal patch application.  Please see attached  6.   Please provide a copy of any guidance your CCG possessed in 2016 that established the process by which a new drug would be considered for addition to your CCG’s drug formulary (again, adopting the relevant formulary identities listed in question “1”).  Please see attached  7.   Please provide any other minutes recorded by your CCG that evidence what decisions were made by your CCG’s medicines management committee or other equivalent committee at CCG level to select a preferred branded generic 7-day Buprenorphine transdermal patch.  Please see attached | |

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| **FOI NO: 1108** | **Date Received: 20 July 2018** |
| **Request :**  I am worried about the Hospitals Review. We have not had a long time to  read and understand the document and the 'consultation' ends today. I  have looked at it and looked at it and do not know what it means for  patients.  You are going to this and you are going to do that, but it seems to me  that we will have no idea of what you are going to do and how it will  affect us patients at the end of the day. We have not had long enough  time to study it or ask questions anywhere, about things we don't  understand or know about and with the other cuts to hospital services in  Huddersfield it is a worrying time.  Please explain what you intend to do and if you are going to put the  hospital into a private company like the porters, cleaners and other  staff the Trust privatised last August. | |
| **Response :**  Barnsley CCG does not hold this information, please redirect your request to Sheffield CCG at [SHECCG.Comms@nhs.net](mailto:SHECCG.Comms@nhs.net) | |

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| **FOI NO: 1109** | **Date Received: 23 July 2018** |
| **Request :**  I was wondering if I could please request details of payments made to pharmacies for locally commissioned NHS or private services, for example smoking cessation, emergency hormonal contraception, supervised consumption of medicines, & needle exchange services. | |
| **Response :**  Payments made to named individual pharmacies we consider to be commercially sensitive information and therefore the CCG has not  provided any  community pharmacy identification details  ( ODS code , name and address etc).  NB The “ medication management service” is perhaps unique to Barnsley and is a service providing support to patients receiving a formal package of social care within their own home. | |

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| **FOI NO: 1110** | **Date Received: 23 July 2018** |
| **Request :**   1. Copies of any policies that the Trust has on the prevention of FASD, and on the diagnosis and post-diagnostic care pathway for patients with an FASD. Also your policy on the training of Trust personnel to manage patients with FASD.   2) Any information you hold on services your Trust provided for FASD for  a. prevention education following the 2016 Chief Medical Officers’ guidelines that the safest course is not to drink while pregnant or attempting to become pregnant;  b. diagnosis for both children and adults;  c. post-diagnostic care in the financial years beginning 2013, 2014, 2015, 2016, 2017 and 2018.  3) Information on the number of Doctors in your Trust who currently provide diagnostic and/or post-diagnostic services for FASD? Please provide their names and posts. Whether your Trust employs specifically trained professionals, including but not limited to nurses, psychologists, occupational therapists and speech and language therapists, to provide specialised services for patients on the FASD spectrum? If so, in what specialties, and how many? Please provide their names and posts.  4) Information on training provided to personnel in your Trust on FASD, or provided by others and accessed by your personnel.  5) Information you hold on whether your Trust sends patients for FASD diagnosis to the National FASD Clinic in Surrey (<https://www.fasdclinic.com/>)? Did your refer any patients to the National FASD Clinic in 2013, 2014, 2015, 2016 and 2017, and in 2018, and if so, how many in each year?  6) What was your budget for services for FASD in each financial year since that starting in 2013 and including the current financial year?  7) Please provide copies of any agreed plans you have to expand the budget or services in coming years.  If you are considering rejecting this request on the grounds of the costs of responding exceeding the statutory limits then please respond to as many of the numbered items as possible within the limit, in the order they have been presented | |
| **Response :**  Barnsley CCG do not specifically commission services for Foetal Alcohol Spectrum Disorders, however these services are provided as part of the maternity services that we commission, on a block contract basis, from Barnsley Hospital NHS Foundation Trust. As part of the Maternity services offer Barnsley have a Specialist Midwife Substance Misuse team which is funded by Barnsley CCG but directly commissioned by Barnsley Metropolitan Borough Council as part of the overall contract for substance misuse services. Providing access to substance misuse services is a Public Health responsibility. Where possible however, a direct response to each question has been provided below.  In light of the above information I would like to ask you to provide:  1)   Copies of any policies that the Trust has on the prevention of FASD, and on the diagnosis and post-diagnostic care pathway for patients with an FASD. Also your policy on the training of Trust personnel to manage patients with FASD.  Alcohol and Pregnancy – Preventing and Managing foetal alcohol spectrum disorders (Updated 2016) and NICE Guidance: Public Health guideline: Alcohol-use disorders prevention (PH24) – documents attached  2)   Any information you hold on services your Trust provided for FASD for  a.   prevention education following the 2016 Chief Medical Officers’ guidelines that the safest course is not to drink while pregnant or attempting to become pregnant; This will be covered in the Service Level Agreement between Public Health (BMBC) and the Substance Misuse Service Provider, DISC  b.   diagnosis for both children and adults; as 2(a) for Adults. The childrens substance misuse service is provided by Barnsley Metropolitan Borough Council – the Council would need to be approached for a full and accurate response to this question  c.   post-diagnostic care in the financial years beginning 2013, 2014, 2015, 2016, 2017 and 2018. Details will be contained within the service specification of the Substance Misuse service commissioned by the Local Authority – please approach the Local Authority directly for a full and accurate response  3)   Information on the number of Doctors in your Trust who currently provide diagnostic and/or post-diagnostic services for FASD? Please provide their names and posts. Whether your Trust employs specifically trained professionals, including but not limited to nurses, psychologists, occupational therapists and speech and language therapists, to provide specialised services for patients on the FASD spectrum? If so, in what specialties, and how many? Please provide their names and posts.  Barnsley CCG do not hold this information.  Barnsley Hospital NHS Foundation Trust and/or Barnsley Metropolitan Council will have these details.  4)   Information on training provided to personnel in your Trust on FASD, or provided by others and accessed by your personnel.  This is not specifically commissioned but as part of the maternity services offer, the Specialist Substance Misuse Midwife undertakes training on a national / local level. The Specialist midwife trains students at local universities in addition to maternity staff and F1’s. Training will also be provide to staff working within SCBU and Paediatrics.  5)   Information you hold on whether your Trust sends patients for FASD diagnosis to the National FASD Clinic in Surrey (<https://www.fasdclinic.com/>)? Did your refer any patients to the National FASD Clinic in 2013, 2014, 2015, 2016 and 2017, and in 2018, and if so, how many in each year? No information held  6)   What was your budget for services for FASD in each financial year since that starting in 2013 and including the current financial year?  As FASD services are not directly commissioned but are part of a much broader block contract covering the whole of maternity services and Substance Misuse Services there is no specific budget  7)   Please provide copies of any agreed plans you have to expand the budget or services in coming years. There are no agreed plans currently but commissioners are discussing with Head of Midwifery and Public Health future priorities and FASD forms a part of those discussions. | |

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| **FOI NO: 1111** | **Date Received: 24 July 2018** |
| **Request :**  1. The number of elective (a) spinal surgeries, (b) non-surgical treatments for lower back pain and (c) spinal cord stimulation treatments for chronic pain funded each year in 2013/14, 2014/15, 2015/16, 2016/17 and 2017/18.  2. The number of successful Individual Funding Requests (or equivalent procedure) made for each of (a) spinal surgeries, (b) non-surgical treatment for lower back pain and (c) spinal cord stimulation treatments for chronic pain funded each year in 2013/14, 2014/15, 2015/16, 2016/17 and 2017/18.  3. The number of unsuccessful Individual Funding Requests (or equivalent procedure) made for each of (a) spinal surgeries, (b) non-surgical treatments for lower back pain and (c) spinal cord stimulation treatments for chronic pain funded each year in 2013/14, 2014/15, 2015/16, 2016/17 and 2017/18. | |
| **Response :** | |

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| **FOI NO: 1112** | **Date Received: 24 July 2018** |
| **Request :**  Under the provisions of the Freedom of Information legislation, could you please provide the contact information for all Urgent Care Centres, Minor Injury Units, and Urgent Treatment Centres operating within your CCG.  The information specifically requested is:  1. Name of the centre or unit  2. Name of Chair/CEO/Lead Responsible officer  3. Name of the provider group that runs the centre  4. Contact email address  5. Postal address  6. Telephone  7. Website URL | |
| **Response :**  There are no Urgent Care Centres, Minor Injury Units or Urgent Treatment Centres operating within Barnsley. | |

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| **FOI NO: 1113** | **Date Received: 26 July 2018** |
| **Request :**  **Q 1** - For each of the years 2013/14, 2014/15, 2015/16, 2016/17, 2017/18 how many referrals to Child and Adolescent Mental Health Service (CAMHS) were made through:  i) A&E  ii) GP  iii) Paediatric services  iv) School  v) Parent or self-referral  vi) Other  **Q2** - Out of hours services:  i) Do you currently provide out-of-hours CAMHS services?  Only if the answer is yes, please respond to the following:  ii) What times is it available at?  iii) Does it include the capacity to conduct a Mental Health Act assessment?  iv) How is it provided?    a) A&E  b) Phone consultation with specialist  c) Face-to-face consultation with specialist  c) Referral to charity  e) Other  **Q3** - a) Please identify the broad categories you use to record reasons for the refusal of CAMHS treatment, eg:  i) Condition not suitable for CAMHS intervention  ii) Consent issue  iii) Insufficient information provided  iv) Service lacks capacity to support patient  v) Other  b) Can you give a percentage breakdown for the above reasons for each of the financial years 2013/14, 2014/15, 2015/16, 2016/17, 2017/18? | |
| **Response :**  Barnsley CCG does not hold this information.  Please redirect your enquiry to SWYPFT CAMHS Service at <http://www.southwestyorkshire.nhs.uk/about-us/contact-us/freedom-of-information/> | |

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| **FOI NO: 1114** | **Date Received: 26 July 2018** |
| **Request :**  NHS England has recently launched a consultation on evidence based interventions:  <https://www.engage.england.nhs.uk/consultation/evidence-based-interventions/user_uploads/evidence-based-interventions-consultation-document-1.pdf>  This has broken down interventions into category 1 - should not be performed (snoring surgery in absence of OSA, D&C for heavy menstrual bleeding, knee arthroscopy for osteoarthritis, injections for non specific lower back pain) and category 2 - only performed when criteria met (breast reduction, grommets for glue ear, tonsillectomy for recurrent tonsillitis, haemorrhoid surgery, hysterectomy for heavy menstrual bleeding, chalazia removal, arthroscopic SAD for subacromial pain, carpal tunnel release, dupuytren's surgery, ganglion surgery, trigger finger release, varicose vein surgery).   We would like to ask under the FOIA:   1. Currently which of the above interventions do you not fund?   2. Of the above category 1 and 2 interventions, which of these do providers currently have to apply for funding approval prior to performing the intervention?   3. Of the interventions which require funding approval, how many applications have been accepted and how many rejected over the last year, broken down for each intervention?   4. What do you estimate your annual costs are in terms of the administration of the system of applying for funding approval including appeals? (approximately how many staff hours are invested in this and what is the cost of these staff hours and the resources required to carry out this work) | |
| **Response :** | |

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| **FOI NO: 1115** | **Date Received: 26 July 2018** |
| **Request :**   1. The total amount your CCG spent on *all* mental health services in 2017/18 *including* any NHS England funds spent on specialised mental health services. 2. The total amount your CCG spent on *all* mental health services in 2017/18 *excluding* any NHS England funds spent on specialised mental health services. 3. The total amount your CCG spent on Children and Young Persons Mental Health services in 2017/18 *excluding* learning disabilities and eating disorders. | |
| **Response :**   1. The total amount your CCG spent on *all* mental health services in 2017/18 *including* any NHS England funds spent on specialised mental health services.  NHS England hold the information on specialised mental health service so please redirect FoI to them. 2. The total amount your CCG spent on *all* mental health services in 2017/18 *excluding* any NHS England funds spent on specialised mental health services.  £50,987k 3. The total amount your CCG spent on Children and Young Persons Mental Health services in 2017/18 *excluding* learning disabilities and eating disorders. £4,305k | |

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| **FOI NO: 1116** | **Date Received: 26 July 2018** |
| **Request :**  1.       Please state the number of CHC nurse assessors (FTE) at the CCG  2.       Are you using any form of electronic software to support the CHC referral, checklist and assessment process (Yes/No)?  3.       If so, please provide the following information for each solution used:  a)      Name of the software  b)      Name of the company supplying the software  c)      Brief description of services  d)      Does the software integrate with any other CHC systems? If so, please name those systems.  e)      What is the annual cost to the CCG for using this software?  f)        Contract start date  g)       Contract end date  h)      Name of the person who signed the contract and their job title  i)        Please state the name of the framework used / procurement route  4.       If the CCG is not using software, please describe how this process is managed and administered at the CCG | |
| **Response :**  I am writing to you under the Freedom of Information Act 2000 to request the following information from the CCG’s Continuing Healthcare department:  1.     Please state the number of CHC nurse assessors (FTE) at the CCG 7 FTE  2.     Are you using any form of electronic software to support the CHC referral, checklist and assessment process (Yes/No)? Yes  3.     If so, please provide the following information for each solution used:  a)     Name of the software Broadcare  b)     Name of the company supplying the software bray leino software  c)     Brief description of services data collection system for tracking caseload and providing reports  d)     Does the software integrate with any other CHC systems? If so, please name those systems. Spine  e)     What is the annual cost to the CCG for using this software? £12,000  f)      Contract start date 1 March 2018  g)     Contract end date 28 February 2019  h)     Name of the person who signed the contract and their job title Acting Chief Nurse  i)      Please state the name of the framework used / procurement route Please see contract register. Link below  <http://www.barnsleyccg.nhs.uk/about-us/contracts.htm>  4.      If the CCG is not using software, please describe how this process is managed and administered at the CCG N/A | |

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| **FOI NO: 1117** | **Date Received: 27 July 2018** |
| **Request :**  A) Please list the wheelchair services provided by the CCG, including:  i) The provider  ii) The geographical area covered  iii) Brief description of the provision covered  iv) The need level met (i.e. low, end of life, hospital discharge, etc)  B) For each instance where the answer to 'A i' is anything other than the CCG itself:  i) The date when the related contract began  ii) The annual cost of the contract to the CCG  iii) The annual cost of the service at the last point it was provided directly by the CCG  iv) The date when the current contract will expire  C) For each instance where the answer to 'A i' is the CCG  i) The annual cost to the CCG of the service for each of the following financial years: 2015/16, 2016/17, 2017/18 and 2018/19  D) The following information about wheelchair service use  i) The current total longest open episode of care for (a) adults and (b) children, in weeks  ii) The average waiting time in weeks for the following financial years: 2015/16, 2016/17, 2017/18 and 2018/19 (up until the date on which this request is received)  iii) The total annual spend on wheelchair services for the following financial years 2015/16, 2016/17, 2017/18 and 2018/19  iv) The total number of complaints relating to wheelchair services received for the following financial years 2015/16, 2016/17, 2017/18 and 2018/19 (and the outcome of complaints if possible) | |
| **Response :**  A) Please list the wheelchair services provided by the CCG, including:  i) The provider - South West Yorkshire Partnership Foundation Trust (SWYPFT)  ii) The geographical area covered - The service is commissioned for Barnsley registered patients.  iii) Brief description of the provision covered - The wheelchair service is part of the Community Equipment Service which provides equipment for all service users, to support community care and promote the independence and dignity of service users  iv) The need level met (i.e. low, end of life, hospital discharge, etc) - Barnsley CCG does not hold this information, please redirect your request to South West Yorkshire Partnership Foundation Trust at  [foi@swyt.nhs.uk](mailto:foi@swyt.nhs.uk)   B) For each instance where the answer to 'A i' is anything other than the CCG itself:  i) The date when the related contract began – 1 April 2017  ii) The annual cost of the contract to the CCG - £1,156,774 (Full Service cost for the Community Equipment Service not specifically wheelchairs)  iii) The annual cost of the service at the last point it was provided directly by the CCG - This service has never been provided by the CCG  iv) The date when the current contract will expire – 31 March 2019    C) For each instance where the answer to 'A i' is the CCG  i) The annual cost to the CCG of the service for each of the following  financial years: 2015/16, 2016/17, 2017/18 and 2018/19 – Not applicable    D) The following information about wheelchair service use  i) The current total longest open episode of care for (a) adults and (b) children, in week Barnsley CCG does not hold this information, please redirect your request to South West Yorkshire Partnership Foundation Trust at  [foi@swyt.nhs.uk](mailto:foi@swyt.nhs.uk)  ii) The average waiting time in weeks for the following financial years: 2015/16, 2016/17, 2017/18 and 2018/19 (up until the date on which this request is received)  - Barnsley CCG does not hold this information, please redirect your request to South West Yorkshire Partnership Foundation Trust at  [foi@swyt.nhs.uk](mailto:foi@swyt.nhs.uk)  iii) The total annual spend on wheelchair services for the following financial years 2015/16, 2016/17, 2017/18 and 2018/19 - Barnsley CCG does not hold this information as it com missions an equipment service that is not wheelchair specific, please redirect your request to South West Yorkshire Partnership Foundation Trust at  [foi@swyt.nhs.uk](mailto:foi@swyt.nhs.uk)  iv) The total number of complaints relating to wheelchair services received for the following financial years 2015/16, 2016/17, 2017/18 and 2018/19 (and the outcome of complaints if possible) - Barnsley CCG does not hold this information, please redirect your request to South West Yorkshire Partnership Foundation Trust at  [foi@swyt.nhs.uk](mailto:foi@swyt.nhs.uk) | |

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| **FOI NO: 1118** | **Date Received: 30 July 2018** |
| **Request :**  As at end of July 2018, please advise with reference to patients with a diagnosis of autism spectrum disorder, including asperger's syndrome, and that have care packages/placements funded by the CCG:  1. how many patients are currently detained under the Mental Health Act in a locked rehab hospital/facility (includes both in area and out of area placements);  2. what are the median (middle) and mode (most frequent) lengths of stay (months/years) in a locked rehab hospital/facility from admission to locked rehab through to discharge into the community (do not include transfers to other locked rehabs). | |
| **Response :**  Barnsley CCG does not hold this information, please redirect your request to South West Yorkshire Partnership Foundation Trust at <https://www.southwestyorkshire.nhs.uk/about-us/contact-us/freedom-of-information/> | |

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| **FOI NO: 1119** | **Date Received: 30 July 2018** |
| **Request :**  Could you provide details of whether a specific diagnostic pathway for children exists within your CCG for each of the following conditions:  1) Attention Deficit/Hyperactivity Disorder  2) Autism Spectrum Disorder  3) Developmental Coordination Disorder/Developmental Dyspraxia  4) Developmental Dyscalculia  5) Developmental Dyslexia  6) Specific language impairment/Developmental language disorder  If a diagnostic pathway exists could you provide further details of that pathway?  For each of the above conditions, if a diagnostic pathway exists, could you provide the following details for the last 5 years, broken down by year:  1) The number of children who were referred and the number who were diagnosed  2) The average (both mean and median if available, if not please specify which), minimum, and maximum wait time between referral and diagnosis | |
| **Response :**  1) Attention Deficit/Hyperactivity Disorder YES  2) Autism Spectrum Disorder YES  3) Developmental Coordination Disorder/Developmental Dyspraxia YES  4) Developmental Dyscalculia YES  5) Developmental Dyslexia YES  6) Specific language impairment/Developmental language disorder YES  If a diagnostic pathway exists could you provide further details of that pathway?  For each of the above conditions, if a diagnostic pathway exists, could you provide the following details for the last 5 years, broken down by year:  1) The number of children who were referred and the number who were diagnosed  2) The average (both mean and median if available, if not please specify which), minimum, and maximum wait time between referral and diagnosis  Please note that the information requested in relation to the 2 questions above can be sought from the providers of these services.  Barnsley Hospital NHS Foundation Trust for children’s ASD/ADHD pathway  South West Yorkshire Partnership Foundation Trust for CAMHS, LD and Adult ASD pathway  Please redirect this part of your request to the FOI team at each of these providers.  BHNFT - bar[nsley@infreemation.co.uk](mailto:barnsley@infreemation.co.uk)  SWYPFT - [foi@swyt.nhs.uk](mailto:foi@swyt.nhs.uk) | |

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| **FOI NO: 1120** | **Date Received: 31 JULY 2018** |
| **Request :**  1. How many adults in your CCG currently receive NHS Continuing Healthcare?  2. How many adults in your CCG currently receive each of the following:  a) Fully funded NHS Continuing Healthcare packages of care?  b) Joint funded Local Authority / NHS Continuing Healthcare packages of care?  c) NHS funded nursing care?  d) “Care at Home” NHS Continuing Healthcare packages care?  3. What was the total NHS Continuing Healthcare budget for adults in your CCG in the year 2017-18?  4. What was the actual amount spent on NHS Continuing Healthcare for adults by your CCG in the year 2017-18?  5. For each of the following categories, what was the actual amount spent by your CCG in the year 2017-18 for those adults in receipt of:  a) Fully funded NHS Continuing Healthcare packages of care?  b) Joint funded Local Authority / NHS Continuing Healthcare packages of care?  c) NHS funded nursing care?  d) “Care at Home” NHS Continuing Healthcare packages of care?  6. What is your CCG’s total NHS Continuing Healthcare budget for adults for the year 2018-19?  7. What is your CCG’s total anticipated NHS Continuing Healthcare budget for adults for the year 2019-20?  8. What is your CCG’s total anticipated NHS Continuing Healthcare budget for adults for the year 2020-21?  9. What activities are being undertaken to prepare all appropriate staff for the implementation of the revised National Framework for NHS Continuing Healthcare which takes effect from 1st October 2018? | |
| **Response :**  1.         How many adults in your CCG currently receive NHS Continuing Healthcare?              As of 06/08/2018 we have 432 patients in receipt of funding which is broken down in question 2.  2.         How many adults in your CCG currently receive each of the following:  a)         Fully funded NHS Continuing Healthcare packages of care? 255 patients fully funded receiving care both at home and in a residential or nursing setting. This          includes 138 Fast Track Patients.  b)         Joint funded Local Authority / NHS Continuing Healthcare packages of care? 73 patients  c)         NHS funded nursing care? 104 patients  d)         “Care at Home” NHS Continuing Healthcare packages care? 271 currently receive care at home.  3.         What was the total NHS Continuing Healthcare budget for adults in your CCG in the year 2017-18?              £14,130K  4.          What was the actual amount spent on NHS Continuing Healthcare for adults by your CCG in the year 2017-18?              £16,138K  5.         For each of the following categories, what was the actual amount spent by your CCG in the year 2017-18 for those adults in receipt of:  a)         Fully funded NHS Continuing Healthcare packages of care? £13,693K  b)         Joint funded Local Authority / NHS Continuing Healthcare packages of care? £1,335K  c)         NHS funded nursing care? £1,110K  d)         “Care at Home” NHS Continuing Healthcare packages of care? Included within the figures above as not split within the finance system  6.         What is your CCG’s total NHS Continuing Healthcare budget for adults for the year 2018-19?              £17,128K  7.         What is your CCG’s total anticipated NHS Continuing Healthcare budget for adults for the year 2019 20?              Not set  8.         What is your CCG’s total anticipated NHS Continuing Healthcare budget for adults for the year 2020 21?              Not set  9.         What activities are being undertaken to prepare all appropriate staff for the implementation of the revised National Framework for NHS Continuing Healthcare  which takes effect from 1st October 2018?  We have sent two experienced CHC nurses to attend the NHSE training on the 2018 National framework.  CHC Barnsley will use the training materials developed by NHSE and develop a training pack for CHC.  A Flyer has been sent to all NHS primary and secondary care staff involved in completing assessments/ BMBC and therapist services to invite them to attend the training for the new framework and documents.  This flyer has a series of dates throughout September 2018, the staff who work in the CHC department will also have the training session in September 2018 | |

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| **FOI NO: 1121** | **Date Received: 31 July 2018** |
| **Request :**   1. Which procedures in 2013/14 were always subject to individual funding requests? 2. Which procedures as of 1 April 2018 are alwayssubject to individual funding requests? 3. How many individual funding requests has the CCG received in each financial year going back to 2013. How many of these has it denied? Please detail what the procedures were. | |
| **Response :**   1. Which procedures in 2013/14 were always subject to individual funding requests? Attached      1. Which procedures as of 1 April 2018 are alwayssubject to individual funding requests? Please see our website for details on our policies for IFR and the South Yorkshire and Bassetlaw Commissioning for Outcomes Policy, Guidance and Patient Information at <http://www.barnsleyccg.nhs.uk/strategies-policies-and-plans.htm>      1. How many individual funding requests has the CCG received in each financial year going back to 2013. How many of these has it denied? Please detail what the procedures were. Attached | |