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| **FREEDOM OF INFORMATION REQUESTS OCTOBER 2018** |

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| **FOI NO: 1170** | **Date Received: 02 October 2018** |
| **Request :**Name of CCG area:Name of Main Mental Health Provider: Contract duration: From: mm/yyyy To: mm/yyyyDate last time statutory MH services last tendered: dd /mm/yyyy  |
| **Response :**Name of CCG area: Barnsley CCGName of Main Mental Health Provider: South West Yorkshire Partnership NHS Foundation TrustContract duration: From: mm/yyyy To: mm/yyyy April 2018 to March 2020Date last time statutory MH services last tendered: dd /mm/yyyy not tendered since becoming CCG in April 2013 |

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| **FOI NO: 1171** | **Date Received: 03 October 2018** |
| **Request :**  |
| **Response :**Name of organisation: NHS Barnsley CCG 1. What is your NHS organisation’s catchment population? Circa 250,0002. Does your organisation provide healthcare services for people diagnosed with MND? NO 3. If no, where do patients with MND in your catchment population access healthcare services? If your organisation does not provide healthcare services for people diagnosed with MND, please go to question 15. 4. If yes, what is your NHS organisation’s catchment population for MND services (if different to Q1)? 5. How many newly diagnosed patients with MND were referred to the organisation in each of the last three years?a. 2017b. 2016c. 2015 6. What is the total number of patients with MND that are currently receiving healthcare from your organisation? 7. Is your organisation a specialist care centre for MND? 8. In your organisation, where do patients with MND access services e.g. hospital inpatient services, hospital outpatient services, community clinics, domiciliary visits? 9. In your organisation, are patients with MND seen in specialist clinics?  10. If yes,a. Where are the MND specialist clinics in your organisation held?b. How often are the MND specialist clinics in your organisation held?c. How often are patients routinely reviewed in the MND specialist clinics?  MND healthcare team\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 11. Who leads the MND services in your organisation (job title)? 12. In your organisation, which jobs (f.t.e) are specifically funded to provide healthcare for people with MND, e.g. MND clinical lead, MND specialist nurse, MND specialist dietitian? 13. Is there a multidisciplinary team (MDT) that provides care to patients with MND in your organisation? 14. If yes, which professional roles are members of the MDT?  MND Dietetic Services\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 15. In your organisation how many full time equivalent dietetic posts do you have? One 16. Do you have dietetic posts that are specifically funded for MND services ? No 17. If yes,a. How many full time equivalent posts do you have?b. What grade are they? 18. If no, which dietitians see patients with MND? Please list all posts including their job title and grade. Barnsley Clinical Commissioning Group employs one WTE dietician within the Med Management team but does not provide any service specifically to MND patients The dietetic service locally (CCG, hospital and community based teams) would deliver a service dependent upon the individuals need and there is no proportion which is commissioned specifically for MND  19. In your organisation, a. How many new patients with MND were seen by the dietetic service in each of the last three years, and where were they seen? Year Hospital inpatient Hospital outpatient Domiciliary visit Community clinic Other (please state)2017 2016 2015  b. How many review contacts for patients with MND were seen by the dietetic service in each of the last three years, and where were they seen? Year Hospital inpatient Hospital outpatient Domiciliary visit Community clinic Other (please state)2017 2016 2015   c. How many dietetic patients contacts (new and review) were for oral nutrition support, and how many were for artificial nutrition support, in each of the last three years?  All healthcare settings Hospital settings (in-patients and out-patients) Community settings (clinics and domiciliary visits)Year Oral nutrition support Artificial nutrition support Oral nutrition support Artificial nutrition support Oral nutrition support Artificial nutrition support2017 2016 2015   Commissioning of MND Nutrition Services\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20. Where does the funding come from for services for patients with MND in your locality? Via Barnsley CCG’s overall allocated budget that comes from NHS England. No funding is specifically for MND services  21. Which organisations and departments are involved in each stage of the commissioning process of nutritional services for patients with MND in your locality:a. Strategic planning (assessing needs, reviewing service provisions, deciding priorities)b. Procuring services (designing services, shaping structure of supply, planning capacity and managing demand)c. Delivery of services (which department and where are they located?)d. Monitoring and evaluation (supporting patient choice, managing performance, seeking public and patient views)None as no specific service  22. Where does the funding come from for nutritional services for patients with MND (e.g. nutrition and dietetics service) in your locality?Via the CCG overall allocated budget than comes from NHS England . No funding is specifically for MND services  |

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| **FOI NO: 1172** | **Date Received: 04 October 2018** |
| **Request :**The Violent Patients Scheme (the scheme where GP's can have a patient removed from their list because of violent behaviour) The information that I require is for the years 2016, 2017 and 2018 and I need figures for the numbers of patients, in England, that have been placed onto this list for each year, the number of appeals by patients for each year and the number of successful appeals for each year (for 2018 please indicate if ongoing)I understand that different CCG’s provide totals to NHS England either in yearly (1st Jan – 31st Dec) or financial year (1st Apr – 31st Mar) if you could indicate which I would be grateful, Y or F. |
| **Response :**Re-directed |

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| **FOI NO: 1173** | **Date Received: 04 October 2018** |
| **Request :**(a) any of your GP practices have undertaken any document management training i.e. patient data optimising/searches; or(b) as a CCG, have undertaken on your practices’ behalf, any document management training; and(c) what clinical system(s) your practices use. |
| **Response :**1. any of your GP practices have undertaken any document management training i.e patient data optimising/searches; or

The CCG would only be aware of CCG commissioned training, we do not hold records of individual training undertaken by each GP practice. Barnsley CCG has commissioned document management training for all GP practices in 2018/19 and this is currently in the roll out stage with no practices having completed the training at this stage. 1. as a CCG, have undertaken on your practices’ behalf, any document management training; and

As above1. what clinical system(s) your practices use.

SystemOne, Emis Web and Vamp Vision |

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| **FOI NO: 1174** | **Date Received: 05 October 2018** |
| **Request :**1. A. How many NHS 111 call centres there areB. Each centres name and who/what company operates each centre. 2. A. For each centre as named in 1.b, please advise how many clinicians each centre employs to triage calls/clinically advise callers. B. If available, for each centre could you advise how many clinician vacancies for this role are left unfilled. 3. A. For each centre as named in 1.b, can you advise the total number of 111 calls received within the latest 12 month period available.B. For the same time period, Could you advise what % of these calls resulted in a final ambulance disposition (any category). 4. A. If available, for those incidents detailed in 3.b. Could you advise of how many of these patients were transported to a&e by the attending ambulance crew. 5.  A. Can you advise if there is a financial implication for any dispositions for the 111 centre. For example - for each patient that is  directed to a&e ‘X’ are paid ‘x’ amount by ‘x’. And if soB. What they are these ? |
| **Response :**Barnsley CCG do not hold the information you have requested therefore it would be best to redirect your request to the Yorkshire Ambulance Service who will be able to answer your FOI at foi@yas.nhs.uk |

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| **FOI NO: 1175** | **Date Received: 8 October 2018** |
| **Request :**1  Do you have any guidance or policy for the public or service users to record calls when they speak to your staff   or call centres Do you Inform Users they can record.  If the answer is no what is the reason for this please if so do send me a copy.     2 if You have a  Unacceptable Behaviour Policy and Procedure can you tell me if one of these are to object to telephone calls being recorded by the caller due to it being not necessary or unwanted or indeed the staff member feels threatened can you explain why you would have such Unacceptable Behaviour Policy and Procedure that goes against current uk law.  If there is no policy why not or how do I find out why ?   3 Are your staff the majority of them who answer public calls or when meeting a member of public are staff aware of the policies and the laws ref telephone recordings using the relevant laws laid down by legislation.  if the answer is no why not.  This sort of training awareness is needed as most call centres social workers teachers police members of parliament are not aware recordings are aloud will you highlight the public is ok to record a 2 way call or will you let the confusion continue..   4 If you have no policy advice or framework for the above will you develop a policy etc if there is a policy send me one pls..   Will you  encourage the public to record a 2 way conversation if the answer is no why not.   5 What are  your organizations views on charging the public in foi requests and data protection and subject access requests should their information request be free.   What happens in a situation a benefit claimant or non waged person needs information what do you do to help them or someone who has no spare income.   Is it fair if the public record you then they should  charge you for a copy of the recording or video the same fee you charge them. Any tips and comments will help the public understand the uks public servants and business policies ref this subject. 6  What do you do and what is your policy when a serious complaint against a staff member is made when a person complains about wrong doing   and has evidence of foul play in your organization will you accept covertly or permission based Audio or video evidence in the case.   Do you Fully investigate under public interest laws and take note of any criminal charges.   if the answer is no why not. Do send me a copy of the policy.The Public need to record all calls too many lies now its time for honesty |
| **Response :**1  Do you have any guidance or policy for the public or service users to record calls when they speak to your staff or call centres? Do you Inform Users they can record.  If the answer is no what is the reason for this please if so do send me a copy. The CCG does not have a policy or guidance on this.    2 if You have a  Unacceptable Behaviour Policy and Procedure can you tell me if one of these are to object to telephone calls being recorded by the caller due to it being not necessary or unwanted or indeed the staff member feels threatened can you explain why you would have such Unacceptable Behaviour Policy and Procedure that goes against current uk law.  If there is no policy why not or how do I find out why ?The CCG has an ‘Acceptable Standards of Behaviour’ policy - <http://www.barnsleyccg.nhs.uk/CCG%20Downloads/strategies%20policies%20and%20plans/2018/NHSBarnsleyCCG_HR_Acceptable%20Standards%20Of%20Behaviour%20Policy%20and%20Procedure_Dec%202017.pdf> – the policy does not make reference to the recording of telephone calls.   3 Are your staff the majority of them who answer public calls or when meeting a member of public are staff aware of the policies and the laws ref telephone recordings using the relevant laws laid down by legislation.  if the answer is no why not.  This sort of training awareness is needed as most call centres social workers teachers police members of parliament are not aware recordings are aloud will you highlight the public is ok to record a 2 way call or will you let the confusion continue..  All Barnsley Clinical Commissioning Group staff are aware of the CCG’s policies including Acceptable Standards Of Behaviour Policy noted above. 4 If you have no policy advice or framework for the above will you develop a policy etc if there is a policy send me one pls.. The CCG has no plans to develop such a policy at this time.  Will you  encourage the public to record a 2 way conversation if the answer is no why not.   5 What are  your organizations views on charging the public in foi requests and data protection and subject access requests should their information request be free. Please see the CCG’s Freedom of Information Policy -  <http://www.barnsleyccg.nhs.uk/CCG%20Downloads/CCG%20Documents/Policies/Approved/Freedom%20of%20Information%20Policy%20updated%20Apr-17.pdf>. Barnsley Clinical Commission Group’s policy is to not normally charge for FOI requests.  For Subject Access requests it is no longer able permissible for public bodies to levy a charge.  What happens in a situation a benefit claimant or non waged person needs information what do you do to help them or someone who has no spare income.  As above, Barnsley Clinical Commissioning Group will not normally charge for provision of information.  Is it fair if the public record you then they should  charge you for a copy of the recording or video the same fee you charge them. Any tips and comments will help the public understand the uks public servants and business policies ref this subject. 6  What do you do and what is your policy when a serious complaint against a staff member is made when a person complains about wrong doing  Please refer to the CCG’s Whistleblowing policy -  <http://www.barnsleyccg.nhs.uk/CCG%20Downloads/strategies%20policies%20and%20plans/2018/NHSBarnsleyCCG_HR_Whistleblowing_March%202017.pdf>  and Counter fraud policy - <http://www.barnsleyccg.nhs.uk/CCG%20Downloads/CCG%20Documents/Policies/Approved/Fraud%20Bribery%20and%20Corruption%20Policy%20Sept%202017%20approved.pdf>. Any allegations of fraud are investigated by the Local Counter Fraud Specialist. |

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| **FOI NO: 1176** | **Date Received: 10 October 2018** |
| **Request :** |
| **Response :** |

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| **FOI NO: 1177** | **Date Received: 12 October 2018** |
| **Request :** 1) How many patients have been referred to your gender identity clinic with gender dysphoria in the financial years:a. 2014-15b. 2015-16c. 2016-17d. 2017-182) How many patients receiving treatment at your gender identity clinic have received (i) hormone therapy and (ii) surgery as part of their treatment for body dysphoria in the financial years:a. 2014-15b. 2015-16c. 2016-17d. 2017-183) How many of the transgender patients that you have referred for gamete storage have been denied gamete extraction by their NHS Clinical Commissioning Group in the financial years: a. 2014-15b. 2015-16c. 2016-17d. 2017-184) How many of the transgender patients that you have referred for gamete storage have been offered gamete extraction by their NHS Clinical Commissioning Group in the financial years: a. 2014-15b. 2015-16c. 2016-17d. 2017-18 5) How many of the transgender patients that you have referred for gamete storage have had gamete extraction privately in the financial years: a. 2014-15b. 2015-16c. 2016-17d. 2017-18 |
| **Response :**In response to your request for information I have received the following details:-1) How many patients have been referred to your gender identity clinic with gender dysphoria in the financial years: THE CCG DOES NOT HOLD THIS INFORMATION. THIS SERVICE IS COMMISSIONED BY NHS ENGLANDa. 2014-15b. 2015-16c. 2016-17d. 2017-182) How many patients receiving treatment at your gender identity clinic have received (i) hormone therapy and (ii) surgery as part of their treatment for body dysphoria in the financial years: THE CCG DOES NOT HOLD THIS INFORMATION. THIS SERVICE IS COMMISSIONED BY NHS ENGLANDa. 2014-15b. 2015-16c. 2016-17d. 2017-183) How many of the transgender patients that you have referred for gamete storage have been denied gamete extraction by their NHS Clinical Commissioning Group in the financial years: THE CCG DOES NOT HOLD THIS INFORMATIONa. 2014-15b. 2015-16c. 2016-17d. 2017-184) How many of the transgender patients that you have referred for gamete storage have been offered gamete extraction by their NHS Clinical Commissioning Group in the financial years: THE CCG DOES NOT HOLD THIS INFORMATIONa. 2014-15b. 2015-16c. 2016-17d. 2017-18 5) How many of the transgender patients that you have referred for gamete storage have had gamete extraction privately in the financial years: THE CCG DOES NOT HOLD THIS INFORMATIONa. 2014-15b. 2015-16c. 2016-17d. 2017-18 |

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| **FOI NO: 1178** | **Date Received: 17 October 2018** |
| **Request :** |
| **Response :****1.      Name of CCG: NHS Barnsley CCG****2.      Are any of the adult hearing services provided though Any Qualified Provider (AQP) in your CCG area?**

|  |  |
| --- | --- |
| Yes  |  |
| No  | **X** |
| **If ‘yes’ please state how many providers**  |  |

**3.      Do you have a policy on the implementation of the NICE guideline ‘Hearing loss in adults: assessment and management’ when providing adult audiology services?**

|  |  |
| --- | --- |
| Yes  |  |
| No  | **X** |
| If you have any comments on the implementation of the NICE guidance, please specify here:  |

**4.      Please let us know:**

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| --- | --- |
|  | Spend amount:  |
| Your spend on adult audiology in 2015/16 | **£1,065,428** |
| Your spend on adult audiology in 2016/17 | **£1,078,129** |
| Your spend on adult audiology in 2017/18 | **£1,064,473** |
| Your planned spend in 2018/19 | **£1,052,061** |
| Your planned spend in 2019/20 (if known) | **Not known** |

**NOTE: Please present these all these figures in nominal terms.****5.      Please let us know the number of adults prescribed with hearing aids:**

|  |  |
| --- | --- |
|  | **Number of adults**  |
| in 2015/16 | **Data not held by the CCG** |
| in 2016/17 | **Data not held by the CCG** |
| in 2017/18 | **Data not held by the CCG** |

**6.      Please let us know the number of hearing aids prescribed:**

|  |  |
| --- | --- |
|  | **Number of hearing aids**  |
| in 2015/16 | **Data not held by the CCG** |
| in 2016/17 | **Data not held by the CCG** |
| in 2017/18 | **Data not held by the CCG** |

**NOTE: The answers to 5) and 6) should usually be different as many adults are prescribed with more than one hearing aid.****7.      Do you have a hearing loss threshold dBHL, below which adults will not be prescribed hearing aids?**

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| --- | --- |
| Yes – **please state what the threshold is:**  | **N/A** |
| No  | **N/A** |

**8.      When adults have an aidable hearing loss in both ears, what is your CCG policy? (Please select the relevant response)**

|  |  |
| --- | --- |
| Two hearing aids are always offered | **The CCG does not have a specific policy for hearing loss** |
| One hearing aid is offered in the first instance unless someone specifically requests two hearing aids  |
| Only one hearing aid is offered |
| We have a restriction in place for fitting hearing aids **(please comment)** |

**9.      Do you commission any hearing screening programme in your CCG area?**

|  |  |
| --- | --- |
| Yes – **please provide details**   | **Screening programmes are commissioned by NHS England** |
| No  |

**10.  How many Whole Time Equivalent (WTE) audiologists provide (or provided) services to adults in your CCG? Please include all audiologists, including locums.**

|  |  |
| --- | --- |
|  | Number  |
| Currently  | **Not applicable for the CCG. This information is held by individual Trusts** |
| in 2017/18 | **Not applicable for the CCG. This information is held by individual Trusts** |
| in 2016/17 | **Not applicable for the CCG. This information is held by individual Trusts** |
| in 2015/16 | **Not applicable for the CCG. This information is held by individual Trusts** |

**11.  What is your tariff (or cost) for the following for non-complex adults (please complete table):**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Description** | **Planned tariff 2019/20** | **Current tariff****2018/19** | **Tariff 2017/18** | **Tariff 2016/17** | **Tariff 2015/16** |
| Audiology hearing aid assessment only | **Not known** | **The majority of our activity is with Barnsley Hospital NHS Foundation Trust and this is currently paid on a block arrangement** |  |  |  |
| Pathway for hearing aid assessment, fitting of one hearing aid device, cost of one device and first follow up | **Not known** | **The majority of our activity is with Barnsley Hospital NHS Foundation Trust and this is currently paid on a block arrangement** | SEE NOTE 2 |
| Pathway for hearing aid assessment, fitting of two hearing aid devices, cost of two devices and first follow up | **Not known** |  |  |  |
| Hearing aid aftercare (repairs) | **Not known** |  |  |  |

NOTE 1) Please specify these figures in nominal terms.NOTE 2) If you pay for services in different categories to those set out above, or in different ways, please could you specify. **Local prices are in place.****12.  Do you offer a one stop assess and fit service for people with hearing loss? This is a service where hearing aid assessment and fitting takes place on the same day.**

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| --- | --- |
| Yes (If you wish, please provide further details of how this works)  | **Please direct your questions to Barnsley Hospital NHS Foundation Trust** |
| No |  |

**13.  Is any of the following data collected in relation to outcomes from adults using hearing loss services in your area? (Please select all that apply)**

|  |  |
| --- | --- |
| Continuation with use of hearing intervention provided | **Please direct your questions to Barnsley Hospital NHS Foundation Trust** |
| Reported benefits from hearing intervention |
| Service user satisfaction with their choice of intervention |
| Reduced communication difficulties |
| Improved quality of life |
| Other **(please specify)**  |

**14.  Do you publish any of this data?**

|  |  |
| --- | --- |
| Yes **(please specify)** | **N/A** |
| No  |  |

**15.  Are adult hearing loss services in your CCG area commissioned on the basis of activity (e.g. number of procedures performed) or on the basis of outcome (e.g. patient outcome data)?**

|  |  |
| --- | --- |
| Activity  | **X** |
| Outcome  |  |
| Combination / other **(please specify)**  |  |

**16.  What follow-up arrangements do you offer for patients who have received a hearing aid fitting?**

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| We do not offer follow-up appointments | **Please direct your questions to Barnsley Hospital NHS Foundation Trust** |
| We only offer follow-up appointments to patients who request them |
| We automatically offer follow-up appointments to all patients |
| We automatically offer follow-up appointments, but only to some patients **(please specify)** |

**17.  If you automatically offer follow-up appointments, do you have any policies or targets in place for the length of time between hearing aid fittings, and follow up appointments?**

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| Yes **(please specify the length of time)**  | **Please direct your questions to Barnsley Hospital NHS Foundation Trust** |
| No  |

**18.  Do you record data on the actual length of time between hearing aid fitting and first follow up appointment?**

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| Yes **(please specify the median time in weeks and days)**   | **Please direct your questions to Barnsley Hospital NHS Foundation Trust** |
| No  |

**19.  How do you offer follow-up appointments to patients? (Please tick all that apply)**

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| --- | --- |
| Face-to-face | **Please direct your questions to Barnsley Hospital NHS Foundation Trust** |
| Via telephone |
| Via post/email |
| Other (please specify)  |

**20.  Do you provide audiology clinics out of hours i.e. after 6pm/ weekends?**

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| Yes | **Please direct your questions to Barnsley Hospital NHS Foundation Trust** |
| No  |

**21.  What is your policy on offering the following services in your CCG area: Please direct your questions to Barnsley Hospital NHS Foundation Trust**

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|  | **We provide this service/provision, and the patient receives it for free** | **We provide, but charge – if so please specify the charge and what the patient receives for the charge e.g. 5 batteries for £5)** | **We do not provide this service.** |
| **Hearing aid batteries** |  |  |  |
| **Hearing aid battery postage** |  |  |  |
| **Replacement for lost hearing aid** |  |  |  |
| **Ear moulds** |  |  |  |
| **Swim plugs** |  |  |  |
| **Tubing** |  |  |  |
| **Ear wax removal** |  |  |  |
| **Hearing aid repair/maintenance** |  |  |  |

**22.  If you have any comments on the above, or if there are any other charges related to hearing aids or audiology service provision in your CCG area, please specify here****23.  For patients fitted with hearing aids, in what ways do you offer re-assessments of their hearing needs after a period of time  (please indicate all that apply):**

|  |  |
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| Automatically after a certain period of time | **Please direct your question to Barnsley Hospital NHS Foundation Trust** |
| On patient request or new GP referral |
| Other **(please specify)**  |

**24.  If you offer an automatic re-assessment, after how many months/years does this take place for non-complex patients? Please direct your question to Barnsley Hospital NHS Foundation Trust**

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| Please specify:  |  |

**25.  If you offer re-assessment on patient request or GP referral, is there a minimum number of months/years they have to wait before requesting this? Please direct your question to Barnsley Hospital NHS Foundation Trust**

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| Please specify:  |  |

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| **FOI NO: 1179** | **Date Received: 18 October 2018** |
| **Request :**A list of pharmaceutical products/drugs that your CCG currently holds rebate agreements for or have held in the last 5 years.I would like to request the product names (brand and generic when applicable) with start finish dates and fully understand that the financial details of the rebates would be considered commercially confidential. |
| **Response :**Drug Manufacturer Start Date End DateBiquelle XL Aspire Pharma Ltd Feb-17 Repinex XL (ropinirole XL) Aspire Pharma Ltd Sep-15 Eklira AstraZeneca Oct-17 Formoterol (Oxis Turbohaler) AstraZeneca Jul-15 Goserelin (Zoladex) AstraZeneca Jul-15 Aymes Complete Aymes Apr-17 Spiolto Respimat Boehringer Ingelheim Limited Sep-17 Lixiana (Edoxaban) Daiichi-Sankyo Jan-16 Pipexus Ethypharm Jul-18 Ebesque XL (quetiapine MR) Ethypharm (formerly DB Ashbourne) Aug-15 Fencino (fentanyl patches) Ethypharm (formerly DB Ashbourne) Aug-15 Luventa XL (galantamine XL) Fontus Aug-15 GlucoRx GlucoRx Apr-17 Carbocisteine sachets Intra-Pharm Mar-16 Sitagliptin (Januvia) Merck Sharpe & Dohme Limited (MSD) Aug-17 AirFluSal Forspiro Sandoz Aug-16 AirFluSal MDI Sandoz Mar-18 Reletrans (Buprenorphine) Sandoz Sep-16 Leuprorelin (Prostap) Takeda May-15   EXPIRED REBATES Symbicort AstraZeneca Apr-17 Dec-17Rivaroxaban (Xarelto) Bayer PLC Aug-14 Dec-15End dates for current rebates have been omitted on the grounds of commercial confidentiality. |

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| **FOI NO: 1180** | **Date Received: 18 October 2018** |
| **Request :**2017/181. In 2017/18 which services have moved from PbR (Payment by Results Tariff) to variant contracts and what type of contract a. Aligned incentiveb. Shared riskc. Capitated feed. Block typee. Other (please describe)2. What is the total value of variant contracts as a proportion of total?3. What is the proportion of services in value that have moved to non PbR contract in 2017/18? 2018/194. In 2018/19 which services are being considered for new non PbR contracts and what type of contract a. Aligned incentiveb. Shared riskc. Capitated feed. Block typee. Other (please describe)5. What is the total value of variant contracts as a proportion of total?6. What is the proportion of services in value that have moved to non PbR contract in 2018/19? |
| **Response :**No changes have been applied to the CCG contracts since 2013/14 and all acute contracts remain on activity and national tariff. Please see link below to our contracts register:http://www.barnsleyccg.nhs.uk/about-us/contracts.htm 2017/181. In 2017/18 which services have moved from PbR (Payment by Results Tariff) to variant contracts and what type of contract a. Aligned incentiveb. Shared riskc. Capitated feed. Block typee. Other (please describe)2. What is the total value of variant contracts as a proportion of total?3. What is the proportion of services in value that have moved to non PbR contract in 2017/18? 2018/194. In 2018/19 which services are being considered for new non PbR contracts and what type of contract a. Aligned incentiveb. Shared riskc. Capitated feed. Block typee. Other (please describe)5. What is the total value of variant contracts as a proportion of total?6. What is the proportion of services in value that have moved to non PbR contract in 2018/19? |

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| **FOI NO: 1181** | **Date Received: 24 October 2018** |
| **Request :**Dear NHS Barnsley Clinical Commissioning Group,• Please supply a copy of the CCG’s latest IT/IM&T/Digital Strategy?• Does the CCG work within a shared services agreement with surrounding Trusts or CCGs?• Does the CCG outsource any of their IT Infrastructure services?• Who is the CCG’s current Chief Clinical Information Officer?• Who is the CCG’s current CIO/ IT Director?• Which member of the board is responsible for IT?• Please provide an organisation chart for your IM&T department?• Which member of the CCG is the SRO for the STP engagements?• What proportion of the CCG IM&T Department is made up of interim staff and permanent staff? • Is the CCG looking to migrate to the cloud in the next 2 years?• Are the Trust considering their options of outsourcing their IT Services in the next 3 years? |
| **Response :**Please supply a copy of the CCG’s latest IT/IM&T/Digital Strategy?  Please see a copy of the Local Digital Roadmap attached.  Also please find the link below to the website where it is published<http://www.barnsleyccg.nhs.uk/CCG%20Downloads/strategies%20policies%20and%20plans/Barnsley%20Digital%20Roadmap.pdf>.• Does the CCG work within a shared services agreement with surrounding Trusts or CCGs? – the IT Director from our main provider of acute services, Barnsley Hospital, acts as the CCG’s Head of IT for a day a week.• Does the CCG outsource any of their IT Infrastructure services? - The CCG has commissioned a comprehensive IT support function from eMBED Health Consortium.• Who is the CCG’s current Chief Clinical Information Officer? – where necessary the CCG’s Chief Nurse would undertake this role.• Who is the CCG’s current CIO/ IT Director? – The CCG’s Director of Commissioning has responsibility for IT Strategy.• Which member of the board is responsible for IT? – The Chief Officer has final responsibility for IT.• Please provide an organisation chart for your IM&T department? – the CCG does not have an IM&T Department.• Which member of the CCG is the SRO for the STP engagements? Dr Richard Cullen, Rotherham CCG is the SRO at STP and he is Rotherham CCGs Chair• What proportion of the CCG IM&T Department is made up of interim staff and permanent staff? – the CCG does not have an IM&T Department.• Is the CCG looking to migrate to the cloud in the next 2 years? No plans at present• Are the Trust considering their options of outsourcing their IT Services in the next 3 years? IT services are currently outsourced to eMBED. |

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| **FOI NO: 1182** | **Date Received: 26 October 2018** |
| **Request :**1) Does your organisation use any guidelines when prescribing specialised infant formulas for cow’s milk protein allergy? 2) Does your organisation follow a pathway around the management of cows' milk protein allergy?3) Does your organisation use any guidelines when prescribing medicines for the management of paediatric gastro-oesophageal reflux?4) If Yes, please provide a link to, or a copy of, the guidelines referenced by your organisation. 5) If yes, please provide a link to, or a copy of, the pathway used by your organisation. 6) If yes, please provide resulting formulary choices from the above guidance, if different to that specified by the guideline.7) Could you provide me with a relevant name or point of contact, should I wish to discuss the guidelines with someone within the CCG? 8) What date are the Guidelines and/or Formulary selection due for renewal? |
| **Response :**1)        Does your organisation use any guidelines when prescribing specialised infant formulas for cow’s milk protein allergy?Yes, we use local prescribing guidelines across Barnsley CCG. The guideline was developed in line with recommendations from the iMAP guideline for cow's milk protein allergy (2017) and NICE guidelines (2011)2)        Does your organisation follow a pathway around the management of cows' milk protein allergy?Yes, this includes referral of all children with suspected cow's milk protein allergy to a paediatric dietitian. 3)        Does your organisation use any guidelines when prescribing medicines for the management of paediatric gastro-oesophageal reflux?Yes, this is included within the guideline for cow's milk protein allergy. 4)        If Yes, please provide a link to, or a copy of, the guidelines referenced by your organisation. <http://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Infant_Formula_Guidelines.pdf>5)        If yes, please provide a link to, or a copy of, the pathway used by your organisation. As per link above 6)        If yes, please provide resulting formulary choices from the above guidance, if different to that specified by the guideline.As per link above 7)        Could you provide me with a relevant name or point of contact, should I wish to discuss the guidelines with someone within the CCG? Arelis Rodriguez-Farradas (prescribing support dietitian), 07717 850238, a.rodriguez-farradas@nhs.net 8)        What date are the Guidelines and/or Formulary selection due for renewal? The guideline is currently under review |