



Ref: FOIA Reference 2022/23-445

Date: 16<sup>th</sup> January 2023

Email [foi@uhn.nhs.uk](mailto:foi@uhn.nhs.uk)

Dear

I am writing to acknowledge receipt of your email dated 7<sup>th</sup> November 2022 requesting information under the Freedom of Information Act (2000) regarding A&E patient discharges.

On the same day we contacted you via email as we required the following clarification:

1 – What are you meaning when you say “How many A&E patients (attendances) were readmitted to hospital in an emergency”? Are you just referring to patients who attended the ED department and then return to the ED within 30 days? What are you classing as “an emergency”, anyone attending the ED department are in theory classed as an emergency, also is it for the same condition or any condition?

2 – Again we need you to clarify what you mean by “an emergency” and if it’s for the same condition or any condition.

On the same day, you replied via email with:

*‘I’m referring to patients who attended the ED department and then return to the ED within 30 days.*

*If you have data on whether they were admitted for the same or a different condition, please indicate as such, but I would like data for both.’*

We responded with:

We also asked: **need you to clarify what you mean by “an emergency” and if it’s for the same condition or any condition**

In addition I have been since asked:

**How many A&E patients who were given a decision to admit, but were non-admitted, were readmitted to hospital in an emergency within 30 days of discharge**

The patients weren’t admitted so they wouldn’t be readmitted, Please clarify what you mean here too

Your reply was:

*‘Thanks for pointing this out.*

*I realise I was looking for ‘attendances’ rather than admissions.*

*Is this wording clearer?*

1. **How many patients attended A&E and then, within 30 days of discharge, reattended A&E. If your trust has data on whether they attended for the same or a different condition, please include this.**
2. **How many A&E patients who were given a decision to admit, but were non-admitted, reattended A&E within 30 days of discharge. If your trust has data on whether they attended for the same or a different condition, please include this.**
3. **How many A&E patients who were given a decision to admit, but were non-admitted, died within 30 days of discharge**
4. **How many patient safety incidents (using National Reporting and Learning System definitions) were declared as a result of A&E patients with a decision to admit being unable to be admitted to wards? Please indicate severity of harm.**
5. **How many serious incidents were declared as a result of A&E patients with a decision to admit being unable to be admitted to wards?**
6. **How many never events were declared as a result of A&E patients with a decision to admit being unable to be admitted to wards?"**

As of 1<sup>st</sup> November 2014 University Hospitals of North Midlands NHS Trust (UHNM) manages two hospital sites – Royal Stoke University Hospital, and County Hospital (Stafford). Therefore the response below is for the two sites combined from that date where appropriate.

**Q1 For the financial years 2019-20, 2020-21,2021-22 and 2022-23 up to and including 31 August:**

1. **How many A&E patients (attendances) were readmitted to hospital in an emergency within 30 days of discharge**

**Amended question:**

1. **How many patients attended A&E and then, within 30 days of discharge, reattended A&E. If your trust has data on whether they attended for the same or a different condition, please include this.**

A1 See below:

	Attendances	Re-attended within 30 days	
		Same Condition	Different Condition
2019/2020	172575	4514	20344
2020/2021	134968	3744	16917
2021/2022	169882	4028	19821
2022/2023	69014	1407	7634

**Q2 How many A&E patients who were given a decision to admit, but were non-admitted, were readmitted to hospital in an emergency within 30 days of discharge**

**Amended question:**

**How many A&E patients who were given a decision to admit, but were non-admitted, reattended A&E within 30 days of discharge. If your trust has data on whether they attended for the same or a different condition, please include this**

A2 To ascertain the information to answer this question a manual audit of all the patients who have re-attended within 30 days is required; there are 46, 417 records which would need to be reviewed to ascertain the information to answer the question.

I can neither confirm nor deny whether the information you have requested is held by the Trust in its entirety. This is because the information requested in this question is not held centrally, but may be recorded in individual health records. In order to confirm whether this information is held we would therefore have to individually access all individual health records within the Trust and extract the information where it is present. We therefore estimate that complying with your request is exempt under section 12 of the FOI Act: *cost of compliance is excessive*. The section 12 exemption applies when it is estimated a request will take in excess of 18 hours to complete. We estimate that accessing and reviewing all individual health records and then extracting relevant information would take longer than the 18 hours allowed for. In addition to the section 12 exemption the Trust is also applying section 14 (1) exemption: *oppressive burden on the authority*

**Q3 How many A&E patients who were given a decision to admit, but were non-admitted, died within 30 days of discharge**

A3 This data is not held at the Trust as if a patient dies in the community we are not made aware of this information unless a family member contacts us directly to inform us.

**Q4 How many patient safety incidents (using National Reporting and Learning System definitions) were declared as a result of A&E patients with a decision to admit being unable to be admitted to wards? Please indicate severity of harm.**

A4 Table below shows number of incident recorded with ED where category of incident is: Patient Flow > access/admission – delay/failure > Admission could not be arranged/failure to admit / admission delayed

Financial Year & Actual Impact	Near Miss	No Harm	Low Harm	Moderate Harm	Severe Harm	Death	Total
2019/20	7	74	11	0	0	0	92
2020/21	4	74	25	1	1	0	105
2021/22	9	160	36	1	0	0	206
2022/23	8	114	13	0	0	0	135
Total	28	422	85	2	1	0	538

**Q5 How many serious incidents were declared as a result of A&E patients with a decision to admit being unable to be admitted to wards?**

A5 Zero

**Q6 How many never events were declared as a result of A&E patients with a decision to admit being unable to be admitted to wards?**

A6 Zero

\*Please note that any individuals identified do not give consent for their personal data to be processed for the purposes of direct marketing.

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An anonymised copy of this request can be found on the Trust's disclosure log, please note that all requests can be found at the following link: <http://www.uhnm.nhs.uk/aboutus/Statutory-Policies-and-Procedures/Pages/Freedom-of-Information-Disclosure-Log.aspx>

This letter confirms the completion of this request. A log of this request and a copy of this letter will be held by the Trust.

If you have any queries related to the response provided please in the first instance contact my office.

Should you have a complaint about the response or the handling of your request, please also contact my office to request a review of this. If having exhausted the Trust's FOIA complaints process you are still not satisfied, you are entitled to approach the Information Commissioner's Office (ICO) and request an assessment of the manner in which the Trust has managed your request.

The Information Commissioner may be contacted at:

Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF or via [www.ico.org.uk](http://www.ico.org.uk).

If following review of the responses I can be of any further assistance please contact my secretary on 01782 671612.

Yours,





**University Hospitals  
of North Midlands**  
NHS Trust

Leah Carlisle  
**Head of Data, Security & Protection/ Data Protection Officer**

