

## **Royal Stoke University Hospital**

**Quality, Safety and Compliance Department** 

Newcastle Road Stoke-on-Trent Staffordshire ST4 6QG

Date: 13th December 2019

Ref: FOIA Reference 2019/20-517

Email foi@uhnm.nhs.uk

Dear

I am writing in response to your email dated 28<sup>th</sup> November 2019 requesting information under the Freedom of Information Act (2000) regarding anticoagulant service.

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 Does your Trust have an anticoagulant service for (delete as appropriate?)
  - a) In-patients and out-patients YES / NO
  - b) In-patients only YES / NO
  - c) Outpatient only YES / NO
- A1 Staffordshire Thrombosis Anticoagulation Centre (STAC) provides an anticoagulation service which provides community and hospital based out-patient clinics. We also provide in-patient dosing and counselling. The service covers both sites although Stafford and Surrounds CCG current commission is for a post and dose service whilst North Staffordshire and Stoke CCG commission a full service with STAC taking clinical responsibility. Please see below:

a)	In-patients and out-patients	Yes
b)	In-patients only	No
c)	Outpatient only	No

- Q2 How many inpatient beds does your Trust have (at each site if more than 1 site)?
- A2 Please see below:
  - The Royal Stoke beds = 1157.
  - The County Hospital beds = 350
- Q3 How many sites do you inpatient dose (if applicable)?
- A3 We offer in-patient dosing to both sites, however most wards at County hospital choose to dose themselves as do certain wards at the Royal Stoke site.
- Q4 Who doses VKA for your inpatient population? (Delete as appropriate)
  - a) Doctors
  - b) Advanced nurse practitioners
  - c) Biomedical Scientists
  - d) Clinical Nurse Specialists if so are they nurse prescribers?







- e) Pharmacists If so are they prescribers?
- f) Other please explain
- A4 Dosing is provided by Clinical Nurse Specialists (some not all are prescribers), Anticoagulation Nurse Practitioner, Biomedical Scientists and Associate Practitioners (they are trained to dose within the restrictions of the software programme and escalate when dose checks required) Dosing for Staffordshire and Surrounds patients is done remotely as post and dose where North Staffordshire and Stoke have a Point of Care service
- Q5 How many individuals who are not doctors perform this role in the groups specified above?
- A5 Please see below:
  - 1 x Nurse Practitioner
  - 9 x CNS
  - 3 x Biomedical Scientists
  - 5 x Associate Practitioners
- Q6 If you dose warfarin for out-patients, how many warfarin patients do you currently dose?
- A6 8000
- Q7 Which dosing software do you use free text
- A7 DAWN AC
- Q8 If there are no nurse led clinics, who is responsible for management of patients taking VKA within your Trust
- A8 STAC takes clinical responsibility for referred in-patients and for all patients within North Staffordshire and Stoke this covers Nurse led clinics at both sites and Biomedical and Associate Practitioner community clinics. Unstable management or clinical queries for these patients can be escalated to medics and discussed at MDT. Clinical responsibility for Stafford and Surrounds patients is with the GP as we only generate an INR and dose, unstable patients and clinical queries are escalated to the GP.
- Q9 Who completes your VTE Risk assessments? (Delete as appropriate)
  - a. Ward doctors
  - b. Nurses
  - c. Pharmacists
  - d. ANP
  - e. Other Please detail
- A9 Ward doctors and ANPs complete the risk assessment which is documented within the Trust policy for thromboprophylaxis. Please see below:

Ward doctors	Yes
Nurses	No
Pharmacists	No
ANP	Yes







Other - Please detail	

## Q10 What is your current VTE Risk assessment compliance rate?

A10 For September 2019 93.35% of VTE risk assessments were completed within 24 hours of patient admissions, which falls short of the National 95% target.

An external audit of the Quality Account (Year ending 31 March 2019) confirmed that in some areas, VTE risk assessments were being completed but were not being captured accurately on the WIS system. The Corporate Nursing team in collaboration with ICT are supporting individual Ward/Department areas to improve compliance.

\*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: <a href="http://www.uhnm.nhs.uk/aboutus/Statutory-Policies-and-Procedures/Pages/Freedom-of-Information-Disclosure-Log.aspx">http://www.uhnm.nhs.uk/aboutus/Statutory-Policies-and-Procedures/Pages/Freedom-of-Information-Disclosure-Log.aspx</a>

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.

If following review of the responses I can be of any further assistance please contact my secretary on 01782 676474.







Yours,

Jean Lehnert

**Information Governance Manager** 



