

Ref: FOIA Reference 2018/19-172

Royal Stoke University Hospital

Quality, Safety and Compliance Department Newcastle Road Stoke-on-Trent Staffordshire ST4 6QG

Date: 11th July 2018

Tel: 01782 676474 Email <u>foi@uhnm.nhs.uk</u>

Dear

I am writing in response to your email dated 23rd June 2018 (received into our office 25th June) requesting information under the Freedom of Information Act (2000) regarding neurotrauma guidelines.

On 3rd July 2018 we contacted you via email as we required further clarification on your meaning of "code black" (Q2)

On 4th July 2018 you replied via email the following:

"I have quite explicitly stated what a "code black" policy is, including in the excerpt from my email that you quote. Again:

A "code black" policy is typically a pathway to streamline the acute care and transfer of traumatic brain injury patients to facilitate early neurosurgical intervention."

You later emailed the same day with:

"Given that I already quite clearly provided my definition of a "code black" policy, I reject the grounds by which you paused by request for over four hours and ask for an internal review to be conducted, to run alongside my request.

By "code black", I am "meaning" [sic] a "policy is typically a pathway to streamline the acute care and transfer of traumatic brain injury patients to facilitate early neurosurgical intervention." I stated this in my original email."

On 7th July you contacted us via email with the following:

"Could you please confirm that my request is being processed and the "pause" that you applied (in my view, incorrectly) has been lifted? I expect a reply within the originally allocated timeframe for this".

We replied the same day with:

I can confirm that the Trust continued to work on your request whilst "paused", the pause was only for clarification on one question and the information is currently being collated for the entire request.



As of 1st 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 Please supply me with copies of all guidelines, protocols, pathway and policy documents and similar resources related to the emergency, neurosurgical and intensive care/neurocritical care and outpatient, follow-up care of adult neurotrauma (cranial and spinal) patients within your Trust. If your organisation (only) treats paediatric neurotrauma patients, then please provide the same set of documents, if they exist, for such paediatric patients.
- A1 I can confirm that the Trust holds information regarding guidelines, protocols and pathways, but feel this information is exempt under section 21: *information reasonably accessible by other means*. This is because the information is available at the following links:

www.nice.org.uk www.sbns.org.uk

The Trust C51 Combined Critical Care Operational policy is attached.

- Q2 Please provide me with any and all documents related to a "code black" policy that your Trust may have implemented for the management of patients with traumatic brain injury. A "code black" policy is typically a pathway to streamline the acute care and transfer of traumatic brain injury patients to facilitate early neurosurgical intervention.
- A2 UHNM does not operate a 'code black' policy. Referral to neurosurgery is via the TTL (Trauma Team Leader). Where head injury is known pre hospital the TTL will alert to meet on arrival.

In regards to your email requesting an internal review, in accordance with the Freedom of Information Act (2000), our Deputy Medical Director, Aideen Walsh has reviewed the Trust response and conducted the internal review. The "Code black" is not a term used at UHNM and not one the Trust was familiar with; therefore the Directorate Manager requested further clarification. Aideen Walsh examined all the information in relation to this request and found that the pausing of the request on 3rd July 2018 for three hours for further clarification for Q2 was in line with the FOI code of practice; which states a public authority is entitled to ask for more detail if needed and in this case should assist applicants in clarifying the information requested. Aideen Walsh was assured that your request was still being actively worked on for Q1 and the response has been provided within the 20 working days as stipulated by the FOI Act.

Please refer to the following link for further advice: <u>https://ico.org.uk/media/for-organisations/documents/1162/interpreting-and-clarifying-a-request-foia-eir-guidance.pdf</u>

In addition to the above website the Trust conformed to the FOI Act by pausing this request for Q2 under section 16: (providing guidance and assistance) whilst still actively working on Q1. <u>https://ico.org.uk/media/for-organisations/documents/1624140/duty-to-provide-advice-and-assistance-foia-section-16.pdf</u>



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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 <u>www.ico.org.uk</u>.

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

Yours,

Mojgan Casillas Interim Information Governance Manager

