



**University Hospitals
of North Midlands**
NHS Trust

Royal Stoke University Hospital
Data, Security and Protection
Newcastle Road
Stoke-on-Trent
Staffordshire
ST4 6QG

Ref: FOIA Reference 2021/22-622

Date: 9th May 2022

Email foi@uhnm.nhs.uk

Dear

I am writing to acknowledge receipt of your email dated 5th March 2022 (received into our office 7th March) requesting information under the Freedom of Information Act (2000) regarding VTE.

The University Hospitals of North Midlands Trust is committed to the Freedom of Information Act 2000.

However, the NHS is facing unprecedented challenges relating to the coronavirus (COVID-19) pandemic at the current time. Understandably, our resources have been diverted to support our front-line colleagues who are working tremendously hard to provide care for our patients, and to those in need of our services.

We strive to be transparent and to work with an open culture. But at this time, whilst care of our patients and the safety of our staff takes precedent, it is likely that responses to some requests for information will be delayed. We apologise for this position in advance, and will endeavour to provide you with as much information as we can, as soon as we are able.

The Information Commissioners Office has recognised the current situation in the NHS.

On 7th March 2022 we contacted you via email as we required a timeframe for questions 6, 7 and 13

On the same day you replied via email with:

'We intended the meaning to be 'usually' however if easier to answer with a specific date frame, please can we indicate answers to these between 1st October 2021 and 28 February 2022

Incidentally, I am aware of an error in Q9 where the time frame SHOULD READ: Please provide the monthly percentage (admissions numbers/VTE risk assessments carried out) for VTE risk assessments carried across the Trust between 1st October 2021 – 31 December 2021¹.'

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 Under the Freedom of Information Act of 2000, please can you provide me with the following information?



Acute management of venous thromboembolism:

1. Confirm whether the Trust routinely prescribes direct oral anticoagulants (DOACs) in preference to low molecular weight heparin (LMWH) and warfarin for the management of standard acute venous thromboembolism (VTE)?

A1 Confirmed

Q2 Please provide a copy of the Trusts' management policy on management of acute venous thromboembolism (VTE).

A2 Refer to the attached document

Q3 Does the Trust provide all patients with an unprovoked VTE a medical opinion from a thrombosis physician?

A3 All patients with an unprovoked VTE would be expected to be referred to thrombosis clinic

Q4 Does the Trust definition of an 'unprovoked VTE' include women using the combined oral contraceptive pill or hormone replacement therapy (HRT)?

A4 This would be considered a minor or major provocation depending on length of time on therapy, route of therapy and other VTE risks

Q5 Do investigations after an unprovoked VTE follow NICE guidance?

A5 Yes

Q6 Per week, how many clinics are devoted to seeing patients with VTE in the Trust?

A6 Six consultant clinics as per your as above clarification:

Q7 How many full-time equivalents are employed by the Trust to provide thromboprophylaxis and care of thrombosis patients from?

- a. Nursing
- b. Pharmacists
- c. Medical

A7 Medical – 2 full time DS and BB and three part time/part job planned consultants (DC, JG, SH)
As per your as above clarification:

Q8 Thromboprophylaxis
Does the Trust routinely meet the 95% VTE Risk Assessment level required by NHS England?

A8 A monthly point prevalence audit confirms that more than 95% of VTE risk assessments are routinely done, but this does not take into account the timing of assessment (NHS England stipulate assessment "On admission")

Q9 Please provide the monthly percentage (admissions numbers/VTE risk assessments carried out) for VTE risk assessments carried across the Trust between 1st October

2021 – 31 December 2022. = amended to 31 December 2021 as per your as above clarification:

- A9 The following percentages of patients with a VTE risk assessment were obtained from a monthly point prevalence audit (note that the audit does not take into account the timing of assessment): Oct-21: 99%, Nov-21: 99%, Dec-21: 99%
- Q10 Does the Trust have dedicated funding for a team ensuring VTE prevention occurs?**
- A10 There is no post funded solely for the purpose of ensuring VTE prevention occurs. We have 1 WTE band 7 nurses whose portfolio includes VTE prevention
- Q11 COVID-19
Please provide a copy of the Trust's thromboprophylaxis protocols used to treat in-patients with COVID-19 pneumonia.**
- A11 No dedicated clinical psychologist for this role
- Q12 Psychological care
Do VTE patients within the Trust have access to clinical psychological support?**
- A12 No dedicated clinical psychologist for this role
- Q13 Cancer-associated VTE
How many sessions per week are provided by the Trust for VTE clinical psychological support?**
- A13 As per your as above clarification: not applicable
- Q14 Does the Trust have a dedicated clinical lead for cancer associated thrombosis (CAT)?**
- A14 Yes
- Q15 Does a protocol exist for managing VTE in those with cancer?**
- A15 Yes, currently being reviewed
- Q16 Please provide a copy of the Trusts' protocol for managing VTE in those with cancer.**
- A16 Information not held
- Q17 VTE prevention and management in the community
Please provide copies of VTE care pathways developed to support community clinicians with regards to:**
- (i) Anticoagulation medication changes
 - (ii) Anticoagulation dosing.
- A17 Information not held
- Q18 Does the Trust have specific VTE guidance for?**

- (i) System wide protocols?
- (ii) E-consultation facilities?
- (iii) On call clinician to discuss problems and seek advice from?

A18 Information not held

Q19 Please provide copies of the Trust's protocol documents for VTE prevention and management in

- (i) System wide protocols
- (ii) E-consultation facilities
- (iii) On call clinician to discuss problems and seek advice from

A19 Information not held

*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.

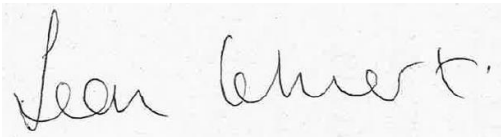
Should you have a complaint about the response or the handling of your request, please also contact my office to request a review of this. If having exhausted the Trust's FOIA complaints process you are still not satisfied, you are entitled to approach the Information Commissioner's Office (ICO) and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

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

Yours,

A handwritten signature in black ink on a light-colored background. The signature reads "Jean Lehnert" in a cursive script.

Jean Lehnert
Data, Security & Protection Manager