Ref: FOIA Reference 2020/21-016

Date: 29th May 2020

Dear

I am writing in response to your email dated 24th April 2020 requesting information under the Freedom of Information Act (2000) regarding data analytics

On our acknowledgment we added the following statement:
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 the same day we contacted you via email as we required clarification on what you meant by "data analytics"

You replied via email with the following
"*For the questions, I understand data analytics technology to mean software that aggregates and analyses data to identify patterns and deliver insights*".

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   Is your Trust using data analytics to support in the management of its response to Covid 19?

A1   Yes

Q2   If so, please could you confirm the use cases (i.e. medical resource management, monitoring patients that have tested for the virus and those that have tested positive, tracking the patient journey for those that have tested positive for the virus, ward

management for patients that have test positive for the virus, identifying which healthcare workers have been exposed to the virus, etc.)?

A2   Please see below:

Medical resource management – Pathology test reagent capacity vs demand tracking model.

Monitoring patients that have tested for the virus and those that have tested positive – COVID-19 Dashboard monitors the number of patients tested positive. The current inpatient report shows all patients tested, results and location.

Tracking the patient journey for those that have tested positive for the virus – COVID-19 dashboard tracks where each patient is individually but also groups into high risk area, ITU, other beds. It also shows this over time to get a sense of growth/decline.

Ward management for patients that have test positive for the virus – analysis of the outbreak and local bed demand modelling enables a vastly more realistic bed/ward plan to ensure we maintain capacity for COVID only wards and non covid wards.

Identifying which healthcare workers have been exposed to the virus – dashboard does this. Team prevent do this also. The staffing analytics looks at when the staff went off, what they went off with, if this is Covid related or not, predictions for their return and HR are now using it to identify hot spots for staff testing positive in similar working areas.

Other examples
- The bed modelling has informed what levels the divisions can look to plan for which has formed the recovery work.
- Post code analysis has shown that the outbreak has moved from the south to the north and the decline seen in new patients is mainly due to the south of the county seeing reduction.
- Death rate analysis calmed some fears of a high rate early on showing us fairly in line with other midlands Trusts
- Our analysis showed we had enough Covid patient readmissions to join a national research programme. The same analysis also showed that the readmissions were predominantly unrelated to the initial COVID spell.
- Care home discharges needing a result before leaving can see these using a report developed by IS
- Modelling of the expected number of deaths at UHNM over time to inform mortuary capacity planning

- Analytical help to other Trusts.

- Modelling tracks patients through their journey from day of admission to the number of days on a core ward to the number of days on ITU and back again should they recover. Analysis tracks the deaths, discharges, what type of discharge (complex/simple and timely). Helping Midlands Partnership NHS Foundation Trust with their anticipated demand to come from us, not just when and how many patients but also what level of need they will have.

Understanding demand (past present and future) goes into nearly all strategic decisions being made at the Trust also.

Q3   If so, please could you confirm which roles in the Trust will have access to your Trust's data analytics results regarding Covid 19 (please confirm for each of the following roles listed): Physician, Nurse, Pharmacist, Management, Accountant/Finance, HR and Recruitment, IT Office, Administrative Assistants, Data analyst/scientist (including roles such as Performance Reporting and Informatics)

A3   Depending on the analysis, the appropriate roles will have the appropriate access. E.g. all staff will be kept up to date with the total patients in beds and discharges to date, but not all would have access to who these patients are.

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

UHNM NHS Trust is a public sector body and governed by EU law. FOI requestors should note that any new Trust requirements over the EU threshold will be subject to these regulations and will be advertised for open competition accordingly.

Where the Trust owns the copyright in information provided, you may re-use the information in line with the conditions set out in the Open Government Licence v3 which is available at http://www.nationalarchives.gov.uk/doc/open-government-licence/version/3/. Where information was created by third parties, you should contact them directly for permission to re-use the information.

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.

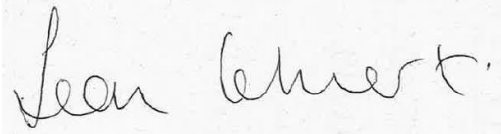If you have any queries related to the response provided please in the first instance contact my office.

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,

Jean Lehnert
Data, Security & Protection Manager