



Ref: FOIA Reference 2022/23-150

Date: 11<sup>th</sup> July 2022

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

Dear

I am writing to acknowledge receipt of your email dated 20th June 2022 requesting information under the Freedom of Information Act (2000) regarding Sleep Apnoea.

**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.**

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 Please could you answer the following questions? Could you provide the information individually for?**

- 1. County Hospital (Stafford) - Sleep & Ventilation Unit**
- 2. Royal Stoke University Hospital - Sleep and Ventilation Unit**

#### **Questions**

**1 How many Obstructive Sleep Apnoea home sleep studies do you perform per week? (approx.)**

A1 See below:

- County = 29
- Stoke = 69

**Q2 In your Sleep and Respiratory Services which diagnostic methods (not brand) do you routinely use (first-line) for the diagnosis of Obstructive Sleep Apnoea? (e.g. Polysomnography, polygraphy, Oximetry) (Could be multiple choice)**

- Polysomnography
- Polygraphy
- Peripheral Arterial Tonometry (PAT)
- Oximetry
- Other (please state)

A2 Respiratory Polygraphy

**Q3 For the diagnosis of Obstructive Sleep Apnoea, which manufacturer's technology do you use? (e.g. ResMed, Nox, Nonin, Watch PAT Itamar) (Could be multiple choice)**

- ResMed
- Nox
- Nonin
- Minolta
- Watch PAT (Itamar)
- Somnomedics (S-Med)
- BMC
- Sefam
- Philips
- Visilab
- Other

A3 See below:

- Nox
- Philips
- resmed

**Q4 For sleep apnoea home sleep studies, how do you most commonly provide diagnostic equipment to patients? (e.g. Patient collects, courier, combination)**

- The patient (or representative) picks up and drop off from the clinic
- Sent via courier, pickup and drop off
- Combination of in-person and courier (patient preference)
- Via third party service provider
- Other

A4 Patient collects

**Q5 In your service, please indicate the approximate percentage (%) of new patients who are setup with a CPAP device via:**

- Face to face setup (patient in hospital) %
- Virtual telephone/video call setup (patient at home) %
- Self-guided, using instructions provided with the device (patient at home) %
- Via third party service provider %
- Other (please state) %

A5 100% face to face setup

**Q6 During the first 90 days of CPAP therapy, on average how many times do you proactively follow-up with patients to support them?**

- 0
- 1
- 2
- 3
- 4
- 5

A6 Two (2)

**Q7 For the on-going management of compliant Obstructive Sleep Apnoea patients, what is your most common follow-up process? (e.g. scheduled virtual follow-up, scheduled face to face follow up, reactive)**

- PIFU (patient initiated follow up) / Active discharge
- Scheduled face to face follow-up
- Scheduled virtual follow-up (telephone/video call)
- No follow ups offered
- Other (please state)

A7 Scheduled virtual follow-up

Q8 How do you most commonly distribute CPAP consumables and accessories (masks, tubing etc.) to patients? (e.g. Patient collects, post)

- Patient collects from the clinic
- Via post / courier
- Third-party service provider
- Other (please state)

A8 Post for most, however some collect

\*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.

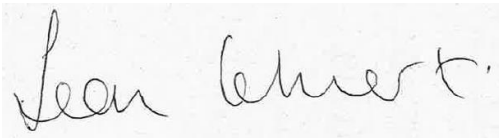
Should you have a complaint about the response or the handling of your request, please also contact my office to request a review of this. If having exhausted the Trust's FOIA complaints process you are still not satisfied, you are entitled to approach the Information Commissioner's Office (ICO) and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



Jean Lehnert  
**Data, Security & Protection Manager**