NHS
Cornwall and
Isles of Scilly

NHS Cornwall and Isles of Scilly Integrated Care Board - Disclosure log Freedom of Information requests April 2023

NHS Cornwall and Isles of Scilly Integrated Care Board
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Children's health

FOI 93650 date received 24 April 2023 Mental health services

Requested information

The number of children (under 18) with mental health conditions admitted to hospital for the last 5 years if available, alternatively if that exceeds the FOI time limit, the most recent calendar year or April-March (FY year), whatever is easier to provide. Please split the numbers into the following segments if they are possible:

1. Number sent to a hospital out of area (outside of the ICS boundary)
2. Number sent to physical health hospital
3. Number sent to a mental health hospital
4. If available the number per hospital admission type (self harm or diagnosis etc)

Response

1. Over the last 5 years 2,440 children under 18 with mental health conditions have been admitted to hospitals outside of the integrated care system (ICS) boundary. While children have been admitted outside of Cornwall, it may be that for some Cornish people, services in Plymouth and Exeter are nearer to them than services within Cornwall.
2. Over the last 5 years 6,859 children under 18 with mental health conditions have been admitted to physical health hospitals.
3. Over the last 5 years 24 children under 18 with mental health conditions have been admitted to physical health hospitals.
4. We do not hold this information, for more information please contact Royal Cornwall Hospitals Trust rch-tr.foi@nhs.net.

Attachment(s)

None

FOI 93660 date received 24 April 2023 CAMHS Tier 4 patients

Requested information

Please provide a list of CAMHS tier 4 services your ICS uses including for the last 3 calendar years (financial year if that is easier):

1. Spend on tier 4 camhs services including:
    a. Provider (including facility and location)
    b. Year
    c. Spend in £ value

d. Number of placements with this provider
e. Out of area placements vs in area placements

2. Than additionally the spend on any digital children's mental health services including:
    a. Provider (e.g. IESO, Kuth etc)
    b. Placements
    c. Spend in £ value
    d. Number of children the provider provided their services to

Response

1. Tier 4 child and adolescent mental health services are provided by Cornwall Partnership Foundation Trust (CFT), please contact them for more information.
2. For digital children's mental health services:
    a. Kooth Digital Health Ltd are the providers.
    b. Cornwall and Isles of Scilly Integrated Care Board (ICB) does not hold information on the number of placements Kooth have provided.
    c. For the last 3 years the ICB has spent the following on Kooth:
        i. 2020-21 - £181,120.00
        ii. 2021-22 - £67,540.00
        iii. 2022-23 - £281,540.
    d. The ICB does not hold information on how many children they have provided services to.

Attachment(s)

None

FOI 93640 date received 21 April 2023 Mental health services

Requested information

Please provide you spend for the last 5 years for children's (under 18) mental health providers, however if this is over the time limit for FOI's please focus on the last 3 years or year respectively dependent on time:

1. Name of the provider of mental health service
2. Type (Digital or in person)
3. Year
4. Type of service if available (psychology services, counselling etc)
5. Spend in £value
6. Number of patients served

Response

Please see attachment showing what we have been able to compile within the time and cost limits for FOI under section 12 of the Act.

For further information please contact:
Royal Cornwall Hospitals Trust rch-tr.foi@nhs.net
Cornwall Partnership Foundation Trust cpn-tr.freedomofinformation@nhs.net

Attachment(s)



FOI 93640 children's mental health services

FOI 93590 date received 19 April 2023 ADHD services

Requested information

Under the Freedom of Information Act 2000, I am requesting the following information on waiting times for ADHD assessments in England:

1. The number of undiagnosed children (under the age of 18) currently on the waiting list for an ADHD assessment on the NHS.
    a. Please can you also provide the same information for each of the past five years, if doing so won't push this request over the cost limit.
2. The current average waiting time for an undiagnosed child (under the age of 18) to see a psychiatrist for ADHD assessment after being referred from a GP on the NHS.
    a. The longest waiting time for a child currently on the list.
    b. Please can you also provide the average wait time for each of the past five years, if doing so won't push this request over the cost limit.
3. How many child assessments were done in the past year. Please provide the total and (if available) a breakdown by gender.
    a. Please can you also provide this same information for each of the prior five years, if doing so won't push this request over the cost limit.
4. The current average waiting time for a child (under the age of 18) between ADHD diagnosis and starting treatment on the NHS. Please provide the total and (if available) a breakdown by type of treatment (medication or behavioural therapy)
    a. The longest waiting time between diagnosis and treatment for a child currently on the list.
    b. Please can you also provide the average wait time for each of the past five years, if doing so won't push this request over the cost limit.
5. The number of undiagnosed adults currently on the waiting list for an ADHD assessment on the NHS.
    a. Please can you also provide the same information for each of the past five years, if doing so won't push this request over the cost limit
6. The current average wait time for an undiagnosed adult to see a psychiatrist for ADHD after being referred from a GP on the NHS.
    a. The longest waiting time for an adult currently on the list

    b. Please can you also provide the average wait time for each of the past five years, if doing so won't push this request over the cost limit.

7. How many adult assessments were done in the past year. Please provide the total and (if available) a breakdown by gender.
    a. Please can you also provide this same information for each of the prior five years, if doing so won't push this request over the cost limit.
8. The current average waiting time for an adult between ADHD diagnosis and starting treatment on the NHS. Please provide the total and (if available) a breakdown by type of treatment (medication or behavioural therapy)
    a. The longest waiting time between diagnosis and treatment for an adult currently on the list.
    b. Please can you also provide the average wait time for each of the past five years, if doing so won't push this request over the cost limit.

Response

NHS Cornwall and Isles of Scilly Integrated Care Board does not hold this information, for more information please contact Cornwall Partnership Foundation Trust who provide the service.

cpn-tr.freedomofinformation@nhs.net

Attachment(s)

None

FOI 93460 date received 11 April 2023 Intensive care

Requested information

Please provide me with the following information for you Integrated Care System or Integrated Care Board, for 2019-20,2021-22,2022-23, 2023-24 (to date):

1. Total number of PICU beds in ICS available and total number of beds commissioned?
2. Total number of staff per patient on PICU wards across the ICS?
3. Total number of patients transferred out of area for a PICU bed due to "lack of available beds"?
4. Total number of children waiting on the general paediatric waiting list? Of these how many are waiting more than 52 weeks, 78 weeks and separately 104 weeks?
5. Average length of stay on general paediatric wards and PICUs? (separately)
6. Total capital investment in paediatric services?

Response

1. Cornwall and Isles of Scilly Integrated Care Board (ICB) does not hold this information. Paediatric intensive care is commissioned by NHS England specialised commissioning, please contact them for more information england.contactus@nhs.net or Cornwall Partnership Foundation Trust (CFT) cpn-tr.freedomofinformation@nhs.net who provide the service.
2. The ICB does not hold this information, please contact NHS England or CFT for more information.
3. The ICB does not hold this information, please contact NHS England or CFT for more information.
4. There are currently 979 children on the general paediatric waiting list, 10 of these have been waiting more than 52 weeks. No children are currently waiting longer than 78 weeks or 104 weeks.
5. The ICB does not hold this information, please contact NHS England or CFT for more information.
6. The ICB does not spend any capital investment on paediatric services, any capital investment is undertaken by the service provider.

Attachment(s)

None

FOI 93400 date received 5 April 2023 Mental health services

Requested information

1. Please provide the figures for the total number of children and young people discharged from children's mental health services with a referral to adult mental health services for each of the last three full financial years:
    a. (2019/20)
    b. (2020/21)
    c. (2021/22)
2. Please provide the waiting time figures between discharge for CAMHS services and first appointment with adult mental health services for the last three full financial years:
    a. (2019/20)
    b. (2020/21)
    c. (2021/22)

    Including:
    d. % Waiting (0-4 weeks)
    e. % Waiting (4-6 weeks)
    f. % Waiting (6-8 weeks)
    g. % Waiting (8-10 weeks)
    h. % Waiting (10-12 weeks)
    i. % Waiting (over 12 weeks)
    j. % Still waiting (no contact)
3. Please provide figures for the last three full financial years: (2019/20) (2020/21) (2021/22) with the proportion of people who:
    a. Did have a care plan in place when they were discharged from CAMHS to adult mental health services.

    b. Did not have a care plan in place when they were discharged from CAMHS to adult mental health services.
4. Do mental health services for children and young people have a transition policy in place to support people to transfer to adult mental health services?
    a. If you answered yes to question 4, please provide a link or a copy of the transition policy.
    b. Please provide information about how you track compliance of the transition policy.

Response

NHS Cornwall and Isles of Scilly Integrated Care Board does not hold this information, for more information please contact Cornwall Partnership Foundation Trust who provide the service.

cpn-tr.freedomofinformation@nhs.net

Attachment(s)

None

Clinical management

FOI 93680 date 24 April 2023 Radiotherapy

Requested information

1. Is there a named person/position within the ICB with the responsibility to ensure that the ICB has access to sufficient radiotherapy treatment capacity?
2. Does the ICB have a plan, either internal or published, to ensure that there is a rolling programme of radiotherapy machine replacement to ensure that no machines within the area of the ICB are outside their 10-year recommended lifespan?
3. Does the ICB have a plan, either internal or published, to ensure that overall cancer treatment capacity is on target to meet the 13% extra treatment capacity specified in the NHS 2023/24 priorities and operational planning guidance. If the ICB does not have such a plan, by what date will they have one?

Response

Radiotherapy is commissioned by Specialised Commissioning, please contact NHS England for more information england.contactus@nhs.net.

Attachment(s)

None

FOI 93620 date received 20 April 2023 Rehabilitation services

Requested information

I am writing to you under the Freedom of Information Act 2000, to submit a request from the Community Rehabilitation Alliance Localism Task Group* (England). We would like to request the following information from Cornwall & Isles of Scilly ICB.

Please can you provide me with answers to the following questions:

- Do you have an employee with overall responsibility for rehabilitation within your ICS working at director level?

- If you do have an employee with overall responsibility for rehabilitation within your ICS working at director level, what is their job title?

- If you do have an employee with overall responsibility for rehabilitation within your ICS working at director level, what is their name?

- If you do not have an employee with overall responsibility for rehabilitation within your ICS working at director level, are you currently recruiting for someone to take on this area of work?

- If you are currently recruiting for someone to take overall responsibility for rehabilitation within your ICS working at director level, by when do you intend to have someone in post?

For the purposes of clarity, by rehabilitation, we mean the wrap-around treatment and advice provided to patients leaving hospital to enable them to rehabilitate, delivered by multidisciplinary teams in a range of settings including acute, secondary and community care services.

Response

Cornwall and Isles of Scilly Integrated Care Board's director with responsibility for community services, including rehabilitation is Dylan Champion, System director - adults and community

Attachment(s)

None

Continuing healthcare

FOI 93550 date received 18 April 2023 Contracts

Requested information

1. Does your trust utilise off-framework agencies for Nursing or Care, if so which agencies?
2. How many hours have been covered by off-framework agencies for Nursing and Care AUG 22-PRESENT?
3. Who at director level is responsible for patient safety and staffing levels?

Response

1. Were we have not been able to place nursing care within framework we would deploy escalation which includes non-framework providers. The non-framework providers have had the due diligence undertaken and have NHS contracts in place. Attached is the list and all requests are clinically reviewed prior to formal commissioning.
2. We are unable to calculate the hours covered by off-framework agencies as it sits within different funding streams and systems.
3. The director with responsibility for patient safety is Susan Bracefield.

Attachment(s)



FOI 93550 Non DPS.xlsx

FOI 93490 date received 12 April 2023 Appeals

Requested information

I wish to know for a 12 month period (1 April 2022 to 31 March 2023):

1. How many NHS Cornwall & IOS ICB funding decisions have been the subject of an appeal to NHSE?
2. How many NHSE IRP decisions have found NHS Cornwall & IOS ICB's stance unsound or erroneous or otherwise wrong?
3. How many NHSE IRP decisions have been challenged by NHS Cornwall & IOS ICB.

Response

1. 8 NHS Cornwall and Isles of Scilly Integrated Care Board (NHS CIoS) funding decisions were heard by independent review panel (IRP) (there are 10 pending cases at present that have yet to be heard by IRP) in the year 1 April 2022 – 31 March 2023.
2. Less than 5 of these cases were found to be erroneous or otherwise wrong. We cannot give further detail to protect the identities of individuals involved.
3. Less than 5 funding decisions were challenged. The IRP can only be challenged by NHS CIoS via Chief nurse to Chief nurse (executive leadership level) setting out “exceptional circumstance” – so this number relates to the NHS CIoS continuing healthcare team challenging the report to clarify points, understand rationale for decision and learning.

Attachment(s)

None

FOI 93450 date received 6 April 2023 Continuing healthcare spend

Requested information

1. Please list the Local Authorities within your ICB Boundaries (if this information is published online, please provide a specific link to where this information is available).
2. As of 31 March 2023, how many individuals were your ICB funding for CHC in Registered Older Persons 65+ Nursing Homes? (Please provide a response by ICB, and if possible Local Authority/Former CCG. If there are additional alternative breakdowns of this data, please provide this)
    a. By ICB
    b. By Local Authority
    c. By former CCG
3. The National Tariff Payment System Guidance 2022-23 states that in the absence of a national price (section 3), which applies to CHC, ICBs should follow the rules for locally determined prices as outlined in section 4.1 as follows:
   ‘The provider and commissioner(s) must engage constructively with each other when trying to agree on local payment approaches.’
   Therefore, what CHC-related engagement has the ICB facilitated with their local care providers? (Please link to where this information can be found, or explain how you fulfil your obligations to engage with care providers prior to the annual fee review)
4. What was the MEAN/MEDIAN/HIGHEST/LOWEST fee paid to Registered Older Persons 65+ Nursing Homes by:- (Please provide a response by ICB, and if possible Local Authority/Former CCG. If there are additional alternative breakdowns of this data, please provide this)
    a. By ICB
    b. By Local Authority

    c. By former CCG
5. What were the MEAN/MEDIAN/HIGHEST/LOWEST inflationary uplifts offered in the 2022/23 Financial year by the ICB for Registered Older Persons 65+ Nursing Home residents? (Please provide a response by ICB, and if possible Local Authority/Former CCG. If there are additional alternative breakdowns of this data, please provide this)
    a. By ICB
    b. By Local Authority
    c. By former CCG
6. Please can you provide the appropriate contact details for the following topics (Please provide a response by ICB, and if possible Local Authority/Former CCG. If there are additional important contacts, please provide this). Please provide a name, title, email address, phone number and address for each of the below:
    a. Inflationary Uplifts
    b. Fee Reviews (For instances of a resident's change in need)
    c. Commissioning
    d. Payment and Invoice Queries (outside of SBS)

Response

1. Cornwall Council is the local authority with Cornwall and Isles of Scilly Integrated Care Board's (ICB) boundary.
2. As of 31 March 2023, 53 individuals were being funded by continuing healthcare (CHC) by the ICB in registered older persons 65+ nursing homes.
3. Cornwall Council and the ICB (and former CCG) hold a joint contract for nursing, residential with nursing and residential only care homes in the geographical area of Cornwall. Cornwall Council lead on the market engagement (as this is a statutory function of local authorities) and they prepare a market analysis business care to set out proposed local payments. Cornwall Council and the ICB review and approve the business case if agreed. This includes paying the foundation living wage as part of the calculation for 80% and CPI for 20%.
4. The fees paid to nursing homes as per Q2 are as follows:
    a. Median - £1,350.00
    b. Mean - £1,504.01
    c. Lowest - £779.49
    d. Highest - £5,765.39
5. The following inflationary uplifts were offered:
    a. By local authority – 4.2% if the care home signs the contract.
    b. By former CCG – 4.2% if the care home signs.
6. For queries relating to Cornwall Council please contact foi@cornwall.gov.uk. For the ICB please contact:
    a. Inflationary uplifts - ciosicb.contracts@nhs.net
    b. Fee reviews - ciosicb.chc@nhs.net
    c. Commissioning – Susan Bracefield. Chief nursing officer s.bracefield@nhs.net.
    d. Payment and invoice queries - ciosicb.chc@nhs.net

Attachment(s)

None

FOI 93340 date received 3 April 2023 Personal health budgets

Requested information

Please provide data for your current ICB and any previous CCGs that came before it and were at one point operational between 2018 and 2023 inclusive, including those that have since been merged or become defunct.

1. What was the total number of individuals in receipt of Standard NHS Continuing Healthcare with a Personal Health Budget* in each of the following financial years?
   Please understand this as a total of all Standard CHC cases with a Personal Health Budget within the financial year, even if they later became no longer eligible within that same financial year. The figure should also include those that were already eligible at the beginning of the financial year, in addition to any that became newly eligible within the financial year.
   a. 2018/19
   b. 2019/20
   c. 2020/21
   d. 2021/22
   e. 2022/23

*This should include only those with a domiciliary care package.

2. What was the total budget spent on individuals in receipt of Standard NHS Continuing Healthcare with a Personal Health Budget* in each of the following financial years?
   a. 2018/19
   b. 2019/20
   c. 2020/21
   d. 2021/22
   e. 2022/23

*This should include only those with a domiciliary care package.

3. What was the total budget allocated to individuals in receipt of Standard NHS Continuing Healthcare with a Personal Health Budget* in each of the following financial years?

a. 2018/19
b. 2019/20
c. 2020/21
d. 2021/22
e. 2022/23

*This should include only those with a domiciliary care package.

4. What is the standard hourly care rate, with which you currently calculate your indicative personal health budgets, broken down for Agency and Personal Assistant care? Please understand this in relation to individuals in receipt of domiciliary care packages through Standard NHS Continuing Healthcare.

5. What was the standard hourly care rate, with which you calculated your indicative personal health budgets on 1 April 2018*, broken down for Agency and Personal Assistant care? Please understand this in relation to individuals in receipt of domiciliary care packages through Standard NHS Continuing Healthcare.

Response

Please see below table which answers questions 1-3, there is no specific budget, the table shows the spend:

Financial year	Clients	Cost
2018/19	61	£4,504,487.1
2019/20	144	£8,690,139.6
2020/21	130	£10,534,790.9
2021/22	110	£10,500,964.3
2022/23	113	£11,189,669.3

4. Standard personal assistant rate would be the national living foundation wage or the national minimum wage for a sleeping night. Agency rates would be based on our local agency agreed rates and usually go through our buyer team if possible.
5. The Manchester Tool was the indicative budget tool that was used in 2018

Attachment(s)

None

Contracts

FOI 93670 date received 24 April 2023 GP communication

To facilitate a research study, please provide a breakdown of ICB expenditure on NHS general practice patient communication and triage system suppliers. More specific details provided below.

Period: Financial Year 2022/23 – end Mar 31, 2023

1. Email communication systems (exclude regular operational email ie Microsoft Office, include specific patient communication systems only)
    a. Split by type of expenditure
        i. One-off setup or service activation fees or general consulting
        ii. Recurring service management/software licences

iii. Specific messaging costs if contracts include per message volume transactional costs

2. SMS and Data message communication
    a. Split by type of expenditure
        i. One-off setup or service activation fees or general consulting
        ii. Recurring service management/software licences
        iii. Specific messaging costs if contracts include per message volume transactional costs
3. Automated or manual Patient Triage/message communication
    a. Split by type of expenditure
        i. One-off setup or service activation fees or general consulting
        ii. Recurring service management/software licences
        iii. Specific messaging costs if contracts include per message volume transactional costs
        iv. Details of messaging volumes for NHS 'free' services such as GOV.UK Notify and NHS App IF used.

Response

1. Cornwall and Isles of Scilly Integrated Care Board (ICB) does not have specific patient email communication systems.
2. The ICB's SMS and data message communication is as follow:
    a. One-off setup or service activation fees or general consulting:
        i. BT - £0
        ii. AccuRX - £0
    b. Recurring service management/software licences:
        i. BT - £600.00
        ii. AccuRX - £133,000
    c. Specific messaging costs if contracts include per message volume transactional costs:
        i. BT - £0.0185 per message = £197,580
        ii. AccuRX - £0.138 per message = £71,266
3. It is not possible to disaggregate costs for SMS and data message communication and automated or manual patient triage/message communication as they use the same software and/or message transmission method.
4. We do not use NHS 'free' services. NHS App is used but we do not currently get information about how any messages are sent from GP practices to patients via the NHS App.

Attachment(s)

None

FOI 93420 date received 5 April 2023 Procurement

Requested information

Under the Freedom of Information Act please send the following information for the period 1 July 2022 to 31 March 2023:

1. The number of times that the ICB has waived its requirement to tender for goods and services under its SFIs and procurement rules.
2. The total value of the goods and services purchased when tender requirements have been waived
3. The total number of occasions and value from qs 1 & 2 broken down into any specific circumstances/ categories listed in the ICBs procurement rules/ SFIs that describe when tender requirements can be waived.

Response

Please see attached which details the answers to questions 1-3.

Attachment(s)



FOI 93420 Q3 response.xlsx

Finance and budgets

FOI 93690 date received 24 April 2023 Discharge funding

Requested information

Please provide an update on the £250 million fund that was announced to speed up hospital discharge on January 9: https://www.gov.uk/government/news/up-to-250-million-to-speed-up-hospital-discharge#:~:text=The%20NHS%20will%20buy%20thousands,to%20free%20up%20hospital%20beds.

1. Why didn't any funding go to local authorities? Were care home bed payments made directly from NHS Cornwall and Isles of Scilly ICB to care home companies?
2. Please can you confirm whether the entire sum of £1.435million has been spent on care home beds? If not, how much has been spent so far.

Response

1. This funding was specifically allocated for expenditure by ICBs, Cornwall and Isles of Scilly Integrated Care Board utilised the funds available to contract

directly with care homes and so there was no requirement for the money to be passed through the local authority.
2. The scheme covered January to March 2023, the total reimbursed was £1,441,000.

Attachment(s)

None

FOI 93580 date received 19 April 2023 Ophthalmology services

Requested information

For 2021-22, and preferably also for 2022-23. I appreciate that the 2022-2023 data is very recent, but hope this would still be possible.

1. For the ICB and its predecessor CCGs, could you please provide the following information regarding cataract operations:
   2021-22 2022-23 Total Expenditure on
   a. Cataract Operations
   b. Expenditure with
   c. independent non-NHS
   d. providers
   e. Expenditure on NHS
   f. Providers
   g. Activity carried out by
   h. independent non-NHS
   i. providers
   j. Activity carried out by NHS
   k. providers
2. Finally, we hoped to ask for information in the form of a summary of information (Section 11) held by the organisation. Broadly speaking, the major confounding factor to analysing the balance of NHS vs Independent spend on eye-care is the pandemic, and the funding model that brought. While the national block funding policy may be consistent, how each Trust responded may be different and each will have many local factors at play. So, in light of the figures requested above and the information provided previously, could we ask for:
   a. A paragraph or two summary of information the ICB holds on:
      i. How pandemic pressures impacted spend on cataract surgeries or activity
      ii. How COVID block-funding affected spend on cataract surgeries or activity
      iii. Any local factors which were particularly important to the spend on cataract
      iv. surgeries or activity

Response

1. Please see below table detailing the answers for question 1:

	2021-2022	2022-23
Total Expenditure on Cataract Operations	4,235,785	5,374,849
Expenditure with independent non-NHS providers	2,137,735	3,396,894
Expenditure on NHS providers	2,098,050	1,977,955
Activity carried out by independent non-NHS providers	2,590	3,441
Activity carried out by NHS providers	2,502	1,980

2. Pandemic pressures impacted spend on cataract surgeries or activity due to cancellation of all non-urgent activity. To aid overall system recovery, additional cataract activity was commissioned from independent sector providers.

   COVID block-funding did not directly affect spend on cataract surgeries or activity as all providers treated patients based on clinical priority.

   Additional independent sector providers have entered the market for 2023-24 which is expected to impact on cataract spend.

Attachment(s)

None

FOI 93540 date received 18 April 2023 Discharge funding

Requested information

Please provide an update on the £250 million fund that was announced to speed up hospital discharge on January 9: https://www.gov.uk/government/news/up-to-250-million-to-speed-up-hospital-discharge#:~:text=The%20NHS%20will%20buy%20thousands,to%20free%20up%20hospital%20beds

1. How much of the £250million NHS Cornwall and The Isles Of Scilly ICB received/used?
2. When did the fund money reach the front line at NHS Cornwall and The Isles Of Scilly?
3. Can you provide a breakdown of which local authorities in your district the fund was distributed to and how much?
4. Can you provide a breakdown of how much of the fund went to care homes, assisted living facilities, and at-home care in your district?

Response

1. NHS Cornwall and Isles of Scilly Integrated Care Board received £1.435 million.
2. The funding was received in March.
3. None of the funding went to local authorities.
4. The funding has been spent on care home placements.

Attachment(s)

None

FOI 93510 date received 17 April 2023 Financial prioritisation

Requested information

I am writing to you under the Freedom of Information Act 2000 to request the following information from Cornwall and the Isles of Scilly Integrated Care System (ICS). Please may you provide me with the information for the following:

1. Has the Cornwall and the Isles of Scilly Integrated Care Board used any specific criteria and/or formula to determine investment prioritisation within acute services for the NHS financial year 2023/24?
    a. Can the Cornwall and the Isles of Scilly Integrated Care Board disclose the criteria and/or formula used to determine investment prioritisation in acute services for the NHS financial year 2023/24.
2. Has the Cornwall and the Isles of Scilly Integrated Care Board held any formal meetings since July 2022 to discuss the criteria and/or formula used to determine investment prioritisation in acute services?
    a. Can the Cornwall and the Isles of Scilly Integrated Care Board share a copy of the minutes for all meetings which discussed the prioritisation in acute services since July 2022.
3. Can the Cornwall and the Isles of Scilly Integrated Care Board disclose which person(s) within the ICS/ICB is/are responsible for ensuring the formula that guides investment prioritisation in acute services, as decided by the Advisory Committee on the Resource Allocation, is properly implemented.
4. Can the Cornwall and the Isles of Scilly Integrated Care Board clarify whether they plan to adhere to the Advisory Committee on the Resource Allocation's (ACRA) proposed needs-based allocations methodology to determine the distribution of financial resources for its acute services?

Response

1. Cornwall and Isles of Scilly Integrated Care Board (ICB) does not use specific criteria or formula to determine investment prioritisation. Investments are prioritised by the system based on aiming to achieve national targets. As the system emerges from COVID response it has a recurrent cost baseline that exceeds its recurrent funding levels. The focus is therefore on ensuring financial stability and so restricts the amount of funding available for new investment.

2. Not applicable.
3. Not applicable.
4. Not applicable.

Attachment(s)

None

Mental health and learning disabilities

FOI 93500 date received 17 April 2023 ADHD services

Requested information

QUESTIONS FOCUSED ON ADULT ADHD SERVICES

1. For your financial years 2022-23 and 2021-22 please can you tell us:
    a. For each of those years how many adult assessments for ADHD were done?
        i. If you have the data and it won't take us over the costs limit please can you break this down by gender.
    b. For each of those years what was the average waiting time (in weeks) for adults who had an assessment for ADHD (Attention Deficit Hyperactivity Disorder).
        i. If you have the data and it won't take us over the costs limit please can you break this down by gender.
    c. For each of those years how many adult ADHD referrals were rejected prior to the individual receiving an assessment?
        i. If you have the data and it won't take us over the costs limit please can you break this down by gender.
    d. For each of those years how many adults were waiting for an ADHD Assessment at the end of the year.
        i. If you have the data and it won't take us over the costs limit please can you break this down by gender.

QUESTIONS FOCUSED ON CHILD ADHD SERVICES

2. For your financial years 2022-23 and 2021-22 please can you tell us:
    a. For each of those years how many child assessments for ADHD (Attention Deficit Hyperactivity Disorder) were done?
        i. If you have the data and it won't take us over the costs limit please can you break this down by gender.
    b. For each of those years what was the average waiting time (in weeks) for children who had an assessment for ADHD (Attention Deficit Hyperactivity Disorder).

        i. If you have the data and it won't take us over the costs limit please can you break this down by gender.
    c. For each of those years how many child ADHD referrals were rejected prior to assessment?
        i. If you have the data and it won't take us over the costs limit please can you break this down by gender.
    d. For each of those years how many children were waiting for an ADHD Assessment at the end of the year.
        i. If you have the data and it won't take us over the costs limit please can you break this down by gender.

GENERAL QUESTIONS ABOUT YOUR ORGANISATION AND ITS ADHD SERVICES

3. With relation to the present time (reflecting the most recent data that you have). Please can you answer the following questions:
    a. With regards to your adult ADHD services.
        i. Do you currently have a commissioned adult ADHD assessment service?
        ii. How many adults do you have waiting for an adult ADHD assessment?
        iii. What is your current expected waiting time (in weeks) for an adult ADHD Assessment?
        iv. What is your current longest waiting time for an adult ADHD Assessment?
        v. What is your process for reviewing and deciding whether to accept or reject adults who have been referred for an ADHD assessment.
        vi. Is your organisation confident that it is satisfying the NICE guidelines for adults with ADHD?
    b. With regards to your child ADHD services
        i. Do you currently have a commissioned child ADHD Assessment service?
        ii. How many children do you have waiting for a child ADHD assessment?
        iii. What is your current expected waiting time (in weeks) for a child ADHD Assessment?
        iv. What is your current longest waiting time for a child ADHD Assessment?
        v. What is your process for reviewing and deciding whether to accept or reject children who have been referred for an ADHD assessment.
        vi. Is your organisation confident that it is satisfying the NICE guidelines for children with ADHD?
    c. Information on your financial year.
        i. What are the dates of your financial year 2022-23.
        ii. What are the dates of your financial year 2021-22.

Response

We commission Cornwall Partnership Foundation Trust (CFT) to provide ADHD services for adults and children, we do not hold this information. Please contact CFT for more information cpn-tr.freedomofinformation@nhs.net.

Attachment(s)

None

FOI 93380 date received 4 April 2023 ADHD services

Requested information

In line with the Freedom of Information Act (2000), please name the organisation(s) that deliver(s) ADHD (attention deficit hyperactivity disorder) assessment / diagnoses in your ICB area for both adults and CYP (children and young people)?

1. When did the contract(s) begin and when is the contract(s) due to end?
2. What is the annual spend for this service for 2022-23, and for the last 5 years?
3. How is the service contracted – is it Block, Activity-based, or AQP contracting?
4. If the service is commissioned with other CCGs, ICSs or Trusts, which are these?
5. If any of the organisation(s) subcontracts any ADHD Assessments. And if yes the names of those subcontractor organisations, and the numerical quantity of ADHD Assessments undertaken by each subcontractor organisation?
6. A list of Right to Choose providers used and whether this is for adults, children & young people or both
7. The number of ADHD assessments undertaken by each Right to Choose provider including breakdown of adults and children & young people numbers?

Response

1. Cornwall and Isles of Scilly Integrated Care Board's (the ICB) contract with Cornwall Partnership Foundation Trust (CFT) to deliver ADHD assessments and diagnoses has been renewed on an annual basis since the beginning of the NHS Kernow Clinical Commissioning Group's tenure. It is contracted until 31 March 2024.
2. The ADHD service is part of a block contract, so we are unable to disaggregate its value.
3. It is block contracted, with a performance measure of completed assessments as part of the service specification.
4. This service is not commissioned with anyone else.
5. There are currently no subcontracts for any ADHD assessments.
6. We do not hold a robust list of right to choose providers.
7. We do not hold this information.

Attachment(s)

None

FOI 93390 date received 4 April 2023 Autism services

Requested information

In line with the Freedom of Information Act (2000), please name the organisation(s) that deliver(s) ASD (autism spectrum disorder) assessment / diagnoses in your ICB area for both adults and CYP (children and young people)?

1. When did the contract(s) begin and when is the contract(s) due to end?
2. What is the annual spend for this service for 2022-23, and for the last 5 years?
3. How is the service contracted – is it Block, Activity-based, or AQP contracting?
4. If the service is commissioned with other CCGs, ICSs or Trusts, which are these?
5. If any of the organisation(s) subcontracts any ASD Assessments. And if yes the names of those subcontractor organisations, and the numerical quantity of ASD Assessments undertaken by each subcontractor organisation?
6. A list of Right to Choose providers used and whether this is for adults, children & young people or both
7. The number of ASD assessments undertaken by each Right to Choose provider including breakdown of adults and children & young people numbers?

Response

1. In 2013 the ASD service for school age children was specifically commissioned with Cornwall Partnership Foundation Trust (CFT). The under 5 pathway is managed within our community paediatrics contract. Contracts are arranged on an annual contracting round with a year's notice period. There is no expected end date.
2. The annual spend on ASD service for children and young people:
    a. 2018/19 - £266,250
    b. 2019/20 - 521,759
    c. 2020/21 - £765,288
    d. 2021/22 - £887,000
    e. 2022/23 - £1,039,268
3. The contract is block but the investment has been aligned to expected activity levels.
4. The service is not commissioned with other trusts.

5. Helios has a subcontract with CFT, we do not hold the information on how many assessments they have undertaken. Please contact CFT for more information cpn-tr.freedomofinformation@nhs.net
6. We do not have a robust list of right to choose providers.
7. We do not hold this information, please contact providers directly.

Attachment(s)

None

FOI 93350 date received 3 April 2023 ADHD services

Requested information

1. Do you use screening before referring children to be assessed for ADHD. Definition being as per NHS:
   Screening: a triage process, using standardised tools and/or agreed processes and carried out by experienced Liaison and Diversion practitioners.
   Assessment including specialist assessment: carried out by someone with a specific professional mandate, i.e. with requisite professional skills.
   a. If yes, when did you introduce screening?
2. For the years 2020,2021 and 2022 please provide the following broken down by calendar year.
   a. Number of individuals who received screening.
   b. Number of individuals who were then referred for assessment.
3. Do you use screening before referring Adults to be assessed for ADHD. Definition being as per NHS: Screening: a triage process, using standardised tools and/or agreed processes and carried out by experienced Liaison and Diversion practitioners.
   Assessment including specialist assessment: carried out by someone with a specific professional mandate, i.e. with requisite professional skills.
   a. If yes what year did you introduce screening.
4. For the years 2020,2021 and 2022 please provide the following broken down by calendar year.
   a. Number of individuals who received screening.
   b. Number of individuals who were then referred for assessment.

Response

NHS Cornwall and Isles of Scilly does not hold this information, for more information please contact Cornwall Partnership Foundation Trust who provide the service cpn-tr.freedomofinformation@nhs.net.

Attachment(s)

None

Organisation

FOI 93610 date received 20 April 2023 IT systems

Requested information

SHARED CARE RECORD

1. Does the ICB have a single Shared Care Record (SCR)?
2. What is the software solution for the SCR? Please provide the product name (rather than the colloquial name) and the supplier. Where more than one product is used to deliver a shared care record, please include all software used.
3. What is the term (length) of the shared care record contract for each software product used?
4. When do the current contracts end for the software used to deliver the shared care record?
5. Where multiple products are used to deliver a SCR, is there a plan to use a single system in the future?
6. Does the ICB plan to implement a new SCR solution in the next 5 years, either as a replacement to the current solution or as a new capability?

PATIENT CONTACT MANAGEMENT

7. Does the ICB utilise Customer Relationship Management (CRM) software for managing and tracking patient contact throughout a patient's care lifecycle?
8. What is the software solution for the CRM? Please provide the product name (rather than the colloquial name) and the supplier. Where more than one product is used to deliver a CRM capability, please include all software used.
9. What is the term (length) of the CRM contract for each software product used?
10. When do the current contracts end for the software used to deliver the CRM?
11. Where multiple products are used to deliver a CRM capability, is there a plan to use a single system in the future?
12. Does the ICB plan to implement a new CRM solution in the next 5 years, either as a replacement to the current solution or as a new capability?
13. If no CRM capability is currently in place and there is no plan to implement a CRM solution, how will the ICB deliver a holistic approach to patient contact across its sphere of influence?

SOFTWARE INTEGRATION

14. Can the ICB please provide the quantity of inbound and outbound interfaces to the Shared Care Record (SCR)?
15. Can the ICB please provide the detail of any guidelines and principles for interoperability when integrating to ICB-manged systems?
16. Can the ICB provide details of any planned future integrations into the ICB digital estate to increase either the quantity or sources of data received into the SCR or to deliver insight and capabilities for population health management.

Response

1. Cornwall and Isles of Scilly Integrated Care Board (ICB) has a single shared care record (SCR).
2. The SCR software is Orion Amadeus.
3. The contract for this software is 5 years.
4. The contract will end in 2026.
5. Not applicable.
6. We do not have plans to implement a new SCR solution.
7. The ICB uses a case management system.
8. The ICB uses Broadcare, supplied by CHC Healthcare.
9. Broadcare has been used since 2014.
10. This is contracted until March 2024 with an option to extend a further year.
11. No plans are in place.
12. No plans are in place.
13. Not applicable.
14. There are 10 inbound interfaces and 0 outbound interfaces.
15. We do not hold this information, please contact Royal Cornwall Hospitals Trust rch-tr.foi@nhs.net.
16. There are planned future integrations with additional trusts, social care, documents and radiology.

Attachment(s)

None

FOI 93570 date received 18 April 2023 Temporary labour

Requested information

I am writing to you under the Freedom of Information Act 2000 to request information regarding temporary labour usage in your organisation, including contractors, temporary workers, and freelancers.

1. Please can you provide me with the following information for the most recent complete fiscal year:
    a. Total number of temporary workers engaged by your organisation, broken down by department or function, if possible.
    b. Total annual expenditure on temporary workers, including a breakdown of costs by department or function, if possible.
    c. Total number of agency suppliers (Preferred Suppliers/non-Preferred Suppliers) in your organisation's labour supply chain
2. Details of any existing Managed Service Programme or Provider (MSP) and/or Vendor Management System (VMS) used to manage temporary workers:
    a. Name of the MSP and VMS.
    b. Date the contract was awarded.

c. Date of contract expiration.
d. Name of the government procurement framework through which the MSP and VMS were procured.

3. Details of any upcoming retendering or renewal processes related to your MSP and VMS contracts:
    a. Anticipated date for the retendering or renewal process to commence.
    b. Name and contact information of the person responsible for overseeing the retendering or renewal process.

Response

1.
    a. The total number of temporary workers engaged by Cornwall and Isles of Scilly Integrated Care Board (ICB) will be included in the annual report, so we exempt the release of this information under section 22 of the Freedom of Information Act.
    b. The total expenditure on temporary workers will be included in the annual report, so we exempt the release of this information under section 22 of the Freedom of Information Act.
    c. The ICB uses 4 agency suppliers.
2.
    a. We do not use an MSP or VMS.
    b. Not applicable.
    c. Not applicable.
    d. Crown Commercial Services Framework - RM6160 Non clinical temp and fixed term staffing and RM6187 management consultancy framework MCF3.
3.
    a. There are no tendering or renewals planned for MSPs or VSMs.
    b. The director with responsibility for contracts and procurement is Simon Gittoes-Davies ciosicb.contracts@nhs.net.

Attachment(s)

None

FOI 93440 date received 6 April 2023 IT systems

Requested information

Please can you send me the organisation's Local Area Network (LAN) contract, which may include the following:

- Support and Maintenance- e.g. switches, router, software etc
- Managed- If this includes services than just LAN.

1. Contract Type: Managed or Maintenance

2. Existing Supplier: Who is the current supplier?
3. Annual Spend for each supplier: What is the annual average spending on the supplier above? If there is more than one supplier, please split the annual averages spent for each supplier.
4. Number of Users: Please can you provide me with the number of users this contract covers. Approximate number of users will also be acceptable.
5. Number of Sites: The number of sites, where equipment is supported by each contract.
6. Hardware Brand: What is the hardware brand of the LAN equipment?
7. Contract Description: Please provide me with a brief description of the overall contract.
8. Contract Duration: What is the duration of the contract is and can you please also include any extensions this may include.
9. Contract Expiry Date: When does the contract expire?
10. Contract Review Date: When will the organisation be planning to review the contract?
11. Responsible Officer: Contact details including name, job title, contact number and email address?

If the LAN maintenance is included in-house please include the following information:

1. Hardware Brand: What is the hardware brand of the LAN equipment?
2. Number of Users: Please can you provide me with the number of users this contract covers. Approximate number of users will also be acceptable.
3. Number of Sites: Estimated/Actual number of sites the LAN covers.
4. Responsible Officer: Who within the organisation is responsible for LAN please provide me with contact details including name, job title, contact number and email address?

If the contract is managed by a 3rd party e.g. Can you please provide me with

1. Existing Supplier: Who is the current supplier?
2. Number of Users: Please can you provide me with the number of users this contract covers. Approximate number of users will also be acceptable.
3. Number of Sites: Estimated/Actual number of sites the LAN covers.
4. Contract Type: Managed, Maintenance, Installation, Software
5. Hardware Brand: What is the hardware brand of the LAN equipment?
6. Contract Description: Please provide me with a brief description of the overall contract.
7. Contract Duration: What is the duration of the contract and can you please also include any extensions this may include.
8. Contract Expiry Date: When does the contract expire?
9. Contract Review Date: When will the organisation be planning to review the contract?
10. Responsible Officer: Who within the organisation is responsible for each of these contract(s) please provide me with contact details including name, job title, contact number and email address?

Response

1. Cornwall and Isles of Scilly Integrated Care Board's (ICB) LAN contract is a managed contract.
2. The LAN is co-located with Cornwall IT Services (CITS) and Cornwall Council as part of a co-location manages estate service.
3. This is part of a shared service and it is not possible to disaggregate costs.
4. There are 350 ICB staff.
5. There are 5 sites.
6. Predominantly we use CISCO hardware.
7. The contract is information management and technology support services.
8. This is an annual service level agreement.
9. This contract expires on 31 March and is renewed annually.
10. Ongoing reviews are held with existing suppliers.
11. The director with responsibility for digital is Simon Gittoes-Davies s.gittoes-davies1@nhs.net 01726 627800.

Attachment(s)

None

FOI 93430 date received 5 April 2023 Joint forward plan

Requested information

Please could you provide a copy of the most recent draft of NHS Cornwall and The Isles Of Scilly ICB's Joint Forward Plan? According to guidance from NHS England these were due to be drafted for consultation as of 31 March 2023 (pg 2).

Response

NHS Cornwall and Isles of Scilly Integrated Care Board's Joint forward plan will be published in its final version on 30 June, we therefore exempt the release of this information under section 22 of the Freedom of Information Act. Joint Forward plans were due to be published by the 30March 2023 however the relevant guidance was not released until much later. The requirement is now to publish by 30 of June.

Attachment(s)

None

FOI 93370 date received 4 April 2023 Contact information

Requested information

Please could you provide me with the name, job title and email address of the person within the ICS/ICB that is responsible for the following:

1. Cardiology
2. Procurement

Response

NHS Cornwall and Isles of Scilly Integrated Care Board's (NHS CIOS) director with responsibility for cardiology is John Groom.

NHS CIOS's director with responsibility for procurement is Simon Gittoes-Davies.

Attachment(s)

None

FOI 93320 date received 3 April 2023 Equality and diversity

Requested information

Please can you provide me with the number of employees employed on 1st April 2023 (or the closest date to this where you have the data) whose role is specifically focused on the promotion of equality, diversity and inclusion.

Please also provide me with each of these employees' annual salaries in GBP.

Response

Cornwall and Isles of Scilly Integrated Care Board employs 1 person whose role is specifically focused on equality, diversity, and inclusion. This role is an agenda for change band 7.

Attachment(s)

None

FOI 93360 date received 3 April 2023 Contact information

Requested information

1. Who is the ICS's 'Waiting Well' Lead?
2. Who is the ICS's 'Planned Care' Lead?
3. Who is the ICS's 'Elective Recovery' lead?

4. Who is the ICS's 'Digital Transformation' lead?
5. Who is the ICS' 'MSK Clinical' Lead?

Response

NHS Cornwall and Isles of Scilly Integrated Care Board's (NHS CIOS) director with responsibility for planned care, including waiting lists, elective recovery, and musculoskeletal is John Groom.

NHS CIOS's director with responsibility for digital transformation is Andrew Abbott.

Attachment(s)

None

Prescribing and pharmacies

FOI 93730 date received 24 April 2023 Formulary process

Requested information

Name and contact details of the person who submitted the 'formulary paperwork' on behalf of the drug 'Icosapent Ethyl' to the Cornwall and Isles of Scilly ICB Joint Formulary APC who approved for the drug to be listed on the Cornwall Joint Formulary in October 2022, please note that the drug has a NICE Technology Appraisal TA805, published on 13th July2022?

Response

We do not release the names of employees below director level, the director with responsibility for prescribing is Chris Reid, christopher.reid6@nhs.net. Alternatively you can email the prescribing team directly ciosicb.prescribing@nhs.net.

Attachment(s)

None

FOI 93630 date received 21 April 2023 Continence formulary

Requested information

Pre-amble

According to the NHS 2018 Excellence in Continence Care report, it is estimated that more than 50% of care home residents have urinary incontinence. People living in care homes are entitled to the same access and level of NHS services as those living in their own homes. Care homes and commissioners should collaborate with each other to ensure adequate provision and funding of products.

Please, therefore, accept this data request under the Freedom of Information Act as a Freedom of Information Request. This request seeks to collect data regarding your Integrated Care Board's (ICBs) continence provision.

Please note: if the service you offer differs between residential and nursing care homes, please clearly address this in your response to the questions below. If prior to ICB formation, the former CCGs had different processes and, these have not changed and the ICB has multiple processes across the ICB, please make sure this is reflected in your response below.

Questions

1. Continence care is free at the point of access. We are aware former CCGs used to offer either a weekly payment to care providers to fund the purchase of continence aids (i.e pads) themselves or in some cases free issued continence aids (i.e. pads) to care home residents via the local continence service. Please outline the current approach across the ICB for continence provision for both residential and nursing care home residents.

2. If your ICB currently offers a weekly payment, what is the current weekly payment paid to care providers by your ICB for continence aids (i.e. pads)? *Please link to where this is documented for care providers and provide a link to where care providers can review the application and review process operated by the ICB.*

3. If your ICB currently provides free issues products by your local continence service, please confirm how many continence aids (i.e. pads) are issued per resident per day, and what determines the number of continence aids (i.e. pads) each resident will receive. *Please link to where this is documented for care providers and provide a link to where care providers can review the application and review process operated by the ICB.*

4. Please provide the appropriate contact details for continence assessments and funding decisions/applications. (*Please provide a name, title, email address, phone number and address)*

5. Please outline your future proposals and timeline for the review of continence care among your ICB.

Response

1. We have a contract with a company to provide continence products issued in care homes and nursing. They invoice us monthly for products supplied.
2. No weekly payments are made.

3. Residents in a nursing home bed are provided with up to 4 continence products in a 24-hour period. This can be increased to more if an appropriate rationale is provided and evidence of assessments to justify the need and what other options have been trialled to meet individual requirements. The number of products required is determined by the assessment carried out by the assessing nurse in the nursing home who should identify the type and or cause of incontinence. They are required to carry out 3 days or more of fluid balance charts that should help them to determine the input and output, and this will inform them which absorbency level of continence product is required and how many are required within that 24-hour period. The nursing home staff have continence assessment paperwork provided by the manufacturer. Once an assessment has been made the assessing nurse completes a patient request form and sends direct to the manufacturer. This has details of the individual and products required.
   Residents in residential home/beds are managed and assessed via the community nurses in Cornwall Partnership Foundation Trust (CFT).
4. Cornwall and Isles of Scilly Integrated Care Board's (ICB) director with responsibility for care homes is Susan Bracefield, Chief nursing officer s.bracefield@nhs.net 01726 627800.
5. The ICB does not have any future proposals for the review of continence care.

Attachment(s)

None

FOI 93520 date received 17 April 2023 Rebate schemes

Requested information

Which primary care rebate schemes is your ICB/ Health Board currently signed to?

If possible, could you please provide the start and end dates of these contracts.

Response

Details of primary care rebate schemes are published on our website Publication scheme - NHS Cornwall and Isles of Scilly (icb.nhs.uk). In addition to those listed we also have rebate schemes for the following which all started on 1 November 2022 and have an end date of 1 November 2024:

- Fixkoh Airmaster DPI inhaler
- Repatha (Evolocumab)
- Praluent (alirocumab)

Attachment(s)

None

FOI 93410 date received 5 April 2023 Vitamin D guidelines

Requested information

Can you please provide me with the following information in regard to the Integrated Care Board medicines management/optimisation?

1. Can you please tell me how the ICB medicines management will be structured going forwards and where the team will be located compared to the previous CCGs?
2. Can you please provide me with the email and telephone number for the best point of contact regarding vitamin D prescribing in the ICB?
3. Can you please provide me with a copy of any vitamin D prescribing guidance that the ICB are currently following?
4. Can you please tell me when the current vitamin D guidance is likely to be reviewed and who within the ICB would be involved in such a review?
5. Can you please tell me what the process would be to submit information on any new products for consideration for that guidance review?

Response

1. NHS Cornwall and Isles of Scilly Integrated Care Board (NHS CIoS ICB) are still finalising medicines management structure and position within the ICB due to recent changes in the ICB directorates.
2. Ciosicb.prescribing@nhs.net 01726 627800.
3. Adult guidelines are not available on the formulary as they are under review Vitamin D deficiency in adults | Health topics A to Z | CKS | NICE Paediatric vitamin D guidelines (RCHT doc library).
4. Vitamin D guidelines are currently under review by the medicines optimisation team.
5. To submit information on any new products for consideration email Ciosicb.prescribing@nhs.net.

Attachment(s)

None

Primary care

FOI 93720 date received 27 April 2023 GP records

Requested information

1. The number of GP practices within the ICS that still use “Lloyd George” paper records
2. The total number of GP practices within the ICS
3. If applicable, the name of the responsible officer for overseeing the digitisation of Lloyd George records.

Response

All the GP practices within Cornwall and Isles are using digital clinical systems to manage patient care and patient history, these computerised records should include a summary of older paper notes. All new information is only added to the computerised record.

The director with responsibility for primary care is Andrew Abbott.

Attachment(s)

None

FOI 93710 date received 25 April 2023 Trescobeas surgery

Requested information

I would like to know for Trescobeas Surgery, Falmouth, for each of the calendar years 2018, 2019, 2020, 2021, 2022:

1. Total number of patients enrolled
2. Total number of doctor appointments
3. Number of face-to-face doctor appointments
4. Number of telephone doctor appointments
5. Total number of nurse appointments

Response

Please see below the patient list size for Trescobeas surgery, we do not hold the information to answer the rest of the request, please contact the practice directly for more information.

2018 – 10,349
2019 – 10524
2020 – 10,607
2021 – 10,716
2022 – 10,873

Attachment(s)

None

FOI 93600 date received 19 April 2023 GP retention

Requested information

1. For the financial year 2022/23 (or financial year 2021/22, if full accounts for 2022/23 are not available), spending on activity related to each of the following GP retention/support programmes in this ICS:
    a. National GP Retention Scheme
    b. New to Practice Fellowships Scheme
    c. Supporting Mentors Scheme
    d. Local GP Retention Schemes
    e. New to Partnership Payments Scheme
    f. Flexible Staff Pools Scheme
    g. ICS Level Training Hubs
2. For the same year, the number of individual staff members supported for each of the above programmes in this ICS;

3. For the year 2023/24, the ICS's indicative funding allocations for each of the above programmes.

Response

1. For the financial year 2022-23 Cornwall Training Hub received the following:
    a. National GP Retention Scheme – no funds received
    b. New to Practice Fellowships Scheme – £454,000
    c. Supporting Mentors Scheme – £75,000
    d. Local GP Retention Schemes –£127,000
    e. New to Partnership Payments Scheme – no funding received
    f. Flexible Staff Pools Scheme – £120,000
    g. ICS Level Training Hubs – £127,000
2. The following numbers of staff were supported by these schemes:
    a. National GP Retention Scheme – information not collected or held
    b. New to Practice Fellowships Scheme – 60
    c. Supporting Mentors Scheme – 77
    d. Local GP Retention Schemes – 151
    e. New to Partnership Payments Scheme – information not collected or held
    f. Flexible Staff Pools Scheme – available for all staff and all practices to access
    g. ICS Level Training Hubs – entire Cornwall GP workforce
3. The funding allocation for 2023-24 has not yet been decided.

Attachment(s)

None

FOI 93470 date received 11 April 2023 ARRS

Requested information

1. ARRS spend of PCNs for the 2022/23 Financial Year (April-March)

PCN Name	PCN ODS Code	ARRS Spend 2022-2023
PCN 1...	A123455	£XXX,XXX
PCN 2...	A123456	£XXX,XXX

2. Any Local Enhanced Services (LES) incentive Schemes, particularly for long-term conditions in the ICB.

In particular, i'd be interested if there are any long-term condition targets that are at local level (that isn't QOF / DES) that PCN's are being incentivised to hit. This would be really helpful.

Response

1. Please see below table detailing the additional roles reimbursement (ARRS) for primary care networks (PCNs) for 2022-23:

PCN Name	PCN ODS Code	ARRS Spend 2022-2023
Arbennek Health PCN	U36721	£514,806.73
Coastal (Kernow) PCN	U62043	£510,765.00
East Cornwall PCN	U02610	£1,128,578.68
Falmouth and Penryn PCN	U09081	£776,676.40
Isles of Scilly and South Kerrier PCN	U64053	£566,417.43
Launceston and Tamar Valley PCN	U11625	£705,642.05
North Cornwall Coast	U03864	£501,323.64
North Kerrier East PCN	U68213	£465,254.50
North Kerrier West PCN	U92128	£950,081.24
Penwith PCN	U76032	£1,095,052.73
St Austell Healthcare PCN	U69901	£737,897.26
Three Harbours and Bosvena PCN	U60113	£833,267.42
Truro PCN	U31970	£610,510.41
Watergate PCN	U49001	£825,036.70
Coast and Country PCN (Kernow share)	U41591	£238,090.33

Harris Memorial Surgery LIS	L82620	£89,625.32
Camelford LIS	L82007	£30,974.31

2. There are no LES incentive schemes.

Attachment(s)

None

FOI 93330 date received 3 April 2023 GP contracts

Requested information

All GP practices within the ICB. Please provide the following records by fiscal year in a CSV table including: practice name; practice location; legal status as limited partnership, general partnership, or company; partnership or company name (if different from practice name); registered office of partnership or company; GP contract held (GMS, PMS, APMS). Date range is 2013/14 to 2022/23.

Response

Please see attached.

Attachment(s)

20230420 FOI 93330 - request for ICB GP P

Public health

FOI 93740 date received 28 April 2023 Tackling deprivation

Requested information

1. A record and minute from any meeting of the ICB which discussed how to ensure best practice is shared between each Sub-ICB Location (SICBL)?
2. What policies does the ICB have in place to ensure that patients have access to the best care within the ICS, regardless of where they live in that area; and how many patients have had care commissioned within ICS, but outside of their local Sub-ICB Location (SICBL)?

3. Any analysis completed by the ICB on the impact on patients following the integration of its SICBLs?
4. What policies does ICB have that are aimed at tackling a) the impact of deprivation on patients and b) inequalities in line with the Core20Plus5 framework?

Response

Cornwall and Isles of Scilly Integrated Care Board (ICB) does not have official sub-ICB locations.

We do not have any policies for public health, although we do have the integrated care strategy which is all about starting well, living well and aging well.

The ICB has supported the development of an ICS wide approach to tackling health inequalities. There is a Population Health and Inequalities Group that reports to the Transforming Care for Cornwall Board. It is responsible for delivery of the Population Health and Inequalities priority, which is one of the ICB's 6 priorities. Rachel Wigglesworth (Director of Public Health) is the senior risk owner (SRO) and Board members include the ICB's Chief Medical Officer and are drawn from across the integrated care system (ICS). Actions to tackle health inequalities have been included in system operating plans for 2022/23 and 2023/24.

Please see attached which details what the ICB is doing to tackle health inequalities.

Public health is led by Cornwall Council foi@cornwall.gov.uk.

Attachment(s)

FOI 93740 Recovery plan narrative submis

FOI 93560 date received 18 April 2023 Drug overdoses

Requested information

1. How many patients have been treated within your health board with symptoms of drug overdose in 2018, 2019, 2020, 2021, 2022, 2023? Please provide a monthly breakdown of each of the years listed (January, February, March, etc).
2. How many patients have been treated within your health board with symptoms of spiking in 2018, 2019, 2020, 2021, 2022, 2023? Please provide a monthly breakdown of each of the years listed (January, February, March, etc).

3. How many drug-related deaths have been recorded in your health board in 2018, 2019, 2020, 2021, 2022, 2023? Please provide a monthly breakdown of each of the years listed (January, February, March, etc).
4. Please can you provide the number of deaths due to blood clots per age group for the years; 2018, 2019, 2020, 2021, 2022 and 2023. To specify, I would like the data to be separated in the following age groups, unless the data is already separated differently: Under 20 years old, under 30 years old, under 40 years old, under 50 years old, under 60 years old, under 70 years old, under 80 years old, 80 years old and above.

Response

1. Please see attached detailing the numbers of patients treated with symptoms of drug overdoses.
2. We do not hold this information. Please contact Royal Cornwall Hospitals Trust for more information rch-tr.foi@nhs.net.
3. There have been 10 drug-related deaths between 2018-2023, we are unable to break this down further to protect the identity of people involved.
4. We have sought clarification from the requestor on what types of blood clots they would like included in the data.

Attachment(s)

FOI 93560 drug and alcohol admissions.xls

Referral management

FOI 93700 date received 24 April 2023 Ophthalmology services

Requested information

1. Which of your local trusts Is delivering hydroxychloroquine retinal screening. If private providers then please advise which providers.
2. What is their waiting list period for this?
3. How many patients have had their screening completed?
4. How many patients in total require screening?
5. How many screening clinics are performed weekly at the trusts / private providers, offering this. Please state trust name and the number of clinics.
6. If private providers are used what are the agreed tariffs for each aspect of the screening.
7. How many incidents / SIs have been recorded over the last 3 years relating to hydroxychloroquine screening (breakdown per year please)
8. What is the current Glaucoma patient waiting list at each Trust and private provider you manage and contract.

9. How many incidents, near misses or SIs have been recorded relating to glaucoma at each Trust or provider over the last 3 years (breakdown per year please)
10. Are all glaucoma patients risk stratified at each provider / trust. If so what method and categories are they using.
11. How many new glaucoma patients are waiting to be seen.
12. If private providers are used what are the agreed tariffs.
13. How many stable AMD patients are seen at each Trust for monitoring.
14. What is the waiting list at each provider for AMD patients that are stable.
15. How many incidents / SIs have been recorded over the last 3 years relating to AMD care at each Trust (breakdown per year please)
16. If private providers are used what are the agreed tariffs.
17. For all private providers used for ophthalmology can you declare which consultants / Doctors have a financial interest with them that also work for the NHS trusts.

Response

1. Royal Cornwall Hospitals nhs Trust (RCHT) delivers hydroxychloroquine retinal screening.
2. We do not information this information, please contact RCHT for more information rch-tr.foi@nhs.net.
3. We do not information this information, please contact RCHT for more information rch-tr.foi@nhs.net.
4. We do not information this information, please contact RCHT for more information rch-tr.foi@nhs.net.
5. We do not information this information, please contact RCHT for more information rch-tr.foi@nhs.net.
6. Not applicable.
7. There have been no serious incidents recorded over the last 3 years relating to hydroxycholorquinine screening.
8. We do not information this information, please contact RCHT for more information rch-tr.foi@nhs.net. Residents of East Cornwall may be on waiting lists in Devon – please contact University Hospitals Plymouth NHS Trust plh-tr.foi-requests@nhs.net and Royal Devon University Healthcare NHS Foundation Trust rduh.foi@nhs.net for more information.
9. We do not information this information, please contact RCHT for more information rch-tr.foi@nhs.net. Residents of East Cornwall may be on seen in Devon – please contact University Hospitals Plymouth NHS Trust plh-tr.foi-requests@nhs.net and Royal Devon University Healthcare NHS Foundation Trust rduh.foi@nhs.net for more information.
10. All glaucoma patients are risk stratified, please request further detail from providers direct, as above.
11. We do not hold this level of detail, please request from providers direct as above.
12. Not applicable.
13. We do not hold this level of detail, please request from providers direct as above.
14. We do not hold this level of detail, please request from providers direct as above.

15. We do not hold this level of detail, please request from providers direct as above.
16. Not applicable.
17. Not applicable.

Attachment(s)

None

FOI 93530 date received 17 April 2023 Waiting lists

Requested information

Please will you provide me with information relating to the waiting lists for Adult and CYP ADHD and ASD referrals. I am seeking:

1. A copy of the latest correspondence stating the expected numbers and waiting times for patients who are referred to secondary care to receive their first appointment; or,
2. A copy of any emails stating the expected number and waiting times for patients who are referred to secondary care to receive their first appointment.
3. Any other media containing the above or the relevant times and numbers in a response to this letter.

Response

We commission Cornwall Partnership Foundation Trust (CFT) to provide ADHD and ASD services for adults and children and the communications referred to were sent by them, we do not hold this information. Please contact CFT for more information cpn-tr.freedomofinformation@nhs.net.

Attachment(s)

None

FOI 93480 date received 11 April 2023 Respiratory medicine

Requested information

Does NHS Cornwall and The Isles Of Scilly ICB have any local treatment guidelines, pathways or protocols for the treatment of Idiopathic pulmonary fibrosis?

Response

Our information on protocols for idiopathic pulmonary fibrosis are available online https://rms.cornwall.nhs.uk/primary_care_clinical_referral_criteria/primary_care_clinical_referral_criteria/respiratory/interstitial_lung_disease. For more information please contact Royal Cornwall Hospitals Trust who provide the service rch-tr.foi@nhs.net.

Attachment(s)

None