

# Request title: Patient Choice and NICE Compliance Survey

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Date of Response: 12<sup>th</sup> February 2016

Further to your Freedom of Information request, the Trust has answered your questions in the order they appear in your request.

## Request and reply

1. Please enter the name of your Trust.

**Royal Devon & Exeter NHS Foundation Trust.**

2. Does your Trust have a policy to ensure that all staff fully and objectively inform all patients of all their treatment options and offer them a choice of treatment? *Please tick the appropriate box below*

Yes

**No, but it is considered good practice.**

Don't know

**If yes, please could you send us a copy of your policy.**

3. How do you monitor your staff to ensure that all patients are properly and objectively informed? *[Please tick all answers that apply]*

*Carry out patient surveys to ensure they have been given all the information about all their treatment options?*

**We have patient information leaflets available all treatments on our web site (we have information leaflets on the majority of conditions but not all).**

*We send patient information leaflets about all treatments options before their outpatient clinic so they can discuss them with their doctor*

*We include questions on patient information and treatment options in all patient surveys*

*We have a policy and expect all staff to comply*

*We do not have a policy and do not think this important*

*It is up to the individual clinician*

*Other (please specify)*

**Currently the Trust is undertaking an audit of whether it is compliant with NICE guidelines for heavy menstrual bleeding.**

**The hospital took part in the RCOG Heavy Menstrual Bleeding Audit – published July 2014.**

**The gynaecology department was consistently above the national mean in all areas of provision. 87.5% satisfied with information (mean 81.4%), 69.9% definitely involved with decision making (mean 61.1%).**

4. How many complaints has your Trust received in the last 2 years about lack of patient information and choice of treatment?

**There have been 57.**

5. NICE Clinical and Diagnostic Guidelines set minimum standards that patients would expect for the quality of their healthcare. Does your Trust have a policy to ensure that all your staff comply with all NICE Clinical and Diagnostic Guidelines? *Please tick appropriate box*

**Yes (National Best Practice Clinical Guidance Implementation Policy)**

No

Don't know

Please provide us with a copy of your Trust's policy on NICE Guideline compliance.  
As attached above.

6. How do you monitor each of your clinical departments and clinicians to ensure their compliance with all NICE Guidelines? *[Please tick all that apply]*

Each department is required to update all care pathways to include the latest NICE Guidelines and this is reviewed by a Director (unless the Clinical Commissioning means that the Trust is not funded to do so).

Every care pathway is reviewed by their clinical lead to ensure compliance with all NICE Guidelines

Audits are carried out in each clinical department to ensure NICE Guideline compliance and reported to the Board

*Audit and patient surveys are carried out to ensure compliance*

*We trust our clinicians to comply with NICE Guidelines but do not monitor this*

7. How many complaints has your Trust received in the past 2 years about lack of compliance with NICE Guidelines?

None.

8. NICE Technology Appraisal Guidance 151 (TAG 151 Jul 08) states that continuous subcutaneous insulin infusion (CSII or insulin pump) therapy is a treatment option for adults and children with type 1 diabetes who meet certain criteria. How does your Trust ensure that all patients who meet the criteria are given the option of insulin pump therapy? *[Please tick all that apply]*

Patients are given the information that the diabetologist thinks appropriate at their outpatients appointment

*We audit to ensure clinicians are using the criteria set by NICE without added restrictions*

*There is patient information on our web site and they can help themselves*

*Other (please specify)*

Those patients who are not achieving target diabetes control, and would like to pursue insulin pump therapy, are discussed in the Multidisciplinary team meeting to ensure that they meet NICE criteria and are suitable for insulin pump therapy.

9. Which brands of insulin pump are offered at your Trust? *[Please tick the appropriate box below]*

Animas Yes

Medtronic Yes

OmniPod Yes but only in paediatrics

Roche (Accu-Chek). Yes

*Other (please specify)*

10. What is the number of people with Type 1 diabetes registered with this Trust?

The Trust does not collect information at diagnosis level for outpatients. Therefore, it will not be possible to provide you with the information for all patients because unless they have had an admission episode the Trust does not hold diagnosis specific information at patient level.

11. What is the number of patients using insulin pumps attending clinic at this Trust?

The Trust does not collect information at diagnosis level for outpatients. Therefore, it will not be possible to provide you with the information for all patients because unless they have had an admission episode the Trust does not hold diagnosis specific information at patient level.

12. NICE Clinical Guidelines on Heavy Menstrual Bleeding (CG44 Jan '07), which includes uterine fibroids, states that all women with fibroids >3cm requiring hospital treatment

must be offered hysterectomy, uterine artery embolisation and myomectomy. How does your Trust ensure that all women are given the choice of all 3 treatments and that there is no age discrimination in treatment choices given to women? *[Please tick all that apply]*

*We have patient information leaflets available on all the fibroid treatments on our web site*

**We ensure that the NICE care pathway for HMB is embedded in our gynae care pathway**

**We audit compliance on a regular basis**

**We benchmark the gynae treatments carried out in our Trust against others to ensure compliance (RCOG – National Heavy Menstrual bleeding audit 2014)**

*We survey gynae patients regularly to ensure they are properly and fully informed and given all the treatment*

*choices*

*We trust our gynaecologists to inform women of all appropriate treatments*

*Other (please specify)*

**The Trust has patient information leaflets available that are provided to patients at outpatient clinics.**

- 13. NICE Guidelines on Heavy Menstrual Bleeding state that "1.3.1 A woman with HMB referred to specialist care should be given information before her outpatient appointment." How does the Trust ensure compliance? *[Please tick all that apply]***

*Our Trust does not comply. Patients are given the information that the gynaecologist thinks appropriate at their outpatients appointment*

**We do not send information out before the outpatient appointment. It is given to the patient at the outpatients appointment**

*There is patient information on our web site and they can help themselves*

*Patients are surveyed regularly to ensure they receive information before outpatients clinics and are given choice*

*We ensure all women are sent information before outpatients clinics and we audit this with patients*

*Other (please specify)*

- 14. NICE Interventional Procedures Guidance on Uterine Artery Embolisation (IPG 367 Nov '10 ) states that –**

***1.3 Patient selection should be carried out by a multidisciplinary team, including a gynaecologist and an interventional radiologist.***

**How does your Trust ensure multidisciplinary team working between gynaecologists and interventional radiologists to ensure women have access to all fibroid treatment recommended by NICE? *[Please tick all that apply]***

*Our Trust provides a fibroid outpatient clinic where all patients have access to*

*gynaecologists and interventional radiologists to discuss all treatment options*

*Our Trust provides a menstrual clinic as advised in RCOG HMB audit (Nov '14)*

*All patients with fibroids have access to the interventional radiologists who carry out fibroid embolisation (UAE) to discuss this option with them*

**Our gynaecologists confer with the interventional radiologists when they feel it necessary**

*Our Trust does not offer (UAE), but we inform all patients about it and refer them to another hospital*

**Our gynaecologists are well informed and knowledgeable about UAE and refer patients where appropriate**

*Our gynaecologists will refer patients for UAE upon request*

*Other (please specify)*

- 15. NICE Guidelines on Heavy Menstrual Bleeding (HMB) states that -**

***1.10.1 All those involved in undertaking surgical or radiological procedures to diagnose and treat HMB should demonstrate competence (including both technical and consultation***

skills) either during their training or in their subsequent practice. How does the Trust ensure all gynaecologists receive adequate training on UAE?

Individual instruction / teaching of trainees by gynaecological consultants. This is supplemented by RCOG / RCR national guidelines.

16. How is the training of gynaecologists about UAE monitored and recorded?

Not recorded by the Trust per se. Individual StRs are taught about UAE by their gynaecology consultant colleagues. This training will be indicated in the trainees RCOG training log.

17. How many patients referred to your Trust in the last 2 years had a primary main diagnosis of heavy menstrual bleeding - Diagnostic Code N92?

187 based on a 2 year period commencing 01/01/2014.

18. How many patients referred to your Trust in the last 2 years in total (i.e. both primary and secondary main diagnosis) had a diagnosis of heavy menstrual bleeding Diagnostic Code N92?

615 based on a 2 year period commencing 01/01/2014.

19. How many patients had a primary main diagnosis of uterine leiomyoma/fibroids in the last two years Diagnostic Code D25.0 - 25.02 and D25.9?

None.

20. How many patients in total (i.e both primary and secondary main diagnosis) had a diagnosis of uterine leiomyoma/fibroids in the last two years Diagnostic Code D25.0 - 25.02 and 25.9?

1244 based on a 2 year period commencing 01/01/2014.

21. How many patients with a diagnosis of heavy menstrual bleeding or fibroids (N92 and D25.0- 25.02 and 25.9) had a hysterectomy in the last 2 years Code Q07.1- Q08.9?

724 based on a 2 year period commencing 01/01/2014.

22. What were the ages of these women who had hysterectomy in the last 2 years Code Q07.1- Q08.9? (Please indicate the numbers for each age range below)

< 29 years old	33
30-34	35
35-39	54
40-44	124
45-49	157
50-54	98
>54	223

23. Does your Trust provide myomectomy - surgical removal of the fibroid(s) alone?

Yes

No

24. If 'Yes' how many myomectomies did your Trust perform in the last 2 years – open myomectomy code Q09.2, a endoscopic myomectomy in the last 2 years Code Q17.1?

245 based on a 2 year period commencing 01/01/2014.

25. What were the ages of the women who underwent myomectomy in the last 2 years (codes Q09.2 -9.3 + Q16.1 + Q17.1 and 17.4)? [Please indicate the numbers in each age range below]

< 29 years old	13
30-34	28

35-39	29
40-44	39
45-49	47
50-54	33
>54	70

**26 Does your Trust provide uterine artery/fibroid embolisation? [Please tick the appropriate box below]**

**Yes**

*No*

**27 If 'No' where are patients wanting UAE referred?**

**Not applicable.**

**28 If 'Yes' had uterine artery/fibroid embolisation in the last 2 years Code RC41Z?**

**Two.**

**29 Does your Trust provide beds for UAE patients on a regular basis - say once a week, as are provided for hysterectomy patients?**

**Yes**

*No*

*Other (please specify)*

**30 Do your interventional radiologists have admitting rights and named consultant status?**

*Yes*

**No**

*Other (please specify)*

**Patients referred to interventional radiologist from outside the Trust and who are deemed appropriate to proceed with UAE by the interventional radiologist are placed under the care of Mr Liversedge (and seen by him in a pre-operative assessment clinic). Those patients referred by one of the other gynaecologists within the RD&E will remain under the care of that consultant when admitted.**

**31 What were the age ranges of the women who had uterine artery/fibroid embolisation in the last 2 years Code RC41Z?**

*< 29 years old* **0**

*30-34* **2**

*35-39* **2**

*40-44* **11**

*45-49* **16**

*50-54* **9**

*>54* **0**