

Dudley CCG Disclosure Log**December 2015****Request reference:** RFI0322**Response date:** 16/12/2015**Request:**

1. What are your specific quality criteria for issuing CQUIN payments to independent (private and charitable) care homes from whom you commission healthcare services for this financial year 2015/16 for –
 - A) Care homes for people with learning disabilities?
 - B) Care homes for older people?
2. How many care homes with whom you commissioned healthcare services received a CQUIN payment during 2014/15 for –
 - A) Care homes for people with learning disabilities
 - B) Care homes for older people

Please express both answers 2A) and 2B) as a % of the total number of homes with whom you commissioned healthcare in 2014/15.

3. If you do not pay CQUINs as a matter of policy to care homes please explain why.

Response**Request reference:** RFI0323**Response date:** 12/01/2016**Request:**

1. What was the CCG's Annual Expenditure on Non-Emergency Patient Transport Services in the Financial Years April 2013 to March 2014 and April 2014 to March 2015?
2. Is non-emergency patient transport currently commissioned by the CCG or the CSU?
3. How many Journeys were undertaken during the time periods specified above? Please can you break the journeys down by type? E.g. Bariatric ambulance, Taxis with wheel chair etc.
4. What number of the journeys in the same specified time period were procured from off contract providers?
5. What type of contract is help with the providers? (I.e. Framework)
6. Who are the appointed contractual providers?
7. What are the performance standards they operate under? (e.g. Discharge – 90% of patients to be collected in 4 hours of ready time. Categories for performance usually being Discharge from inpatient, Travel Time, Arrival time & Departure time).
8. For the period April 2014 to March 2015 how did the providers score on the performance standards.

Response

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Request reference: RFI0324

Response date: 22/12/2015

Request:

1. Name of OOH provider in your CCG area
2. Population served by provider
3. Who is the call handling NHS 111 provider?
4. Current annual contract value for OOH contract
5. What other community based services are the OOH provider(s) contracted to provide?
6. Current annual contract value for other (non-OOH) services?
7. When is contract due for re-tender?
8. Contract start date
9. Contract end date

[Response](#)

Request reference: RFI0325

Response date: 04/01/2016

Request:

1. Who are the clinical leads are for the following departments in the NHS Dudley CCG;
 - a. Dermatology
 - b. Urology

[Response](#)

Request reference: RFI0326

Response date: 23/12/2015

Request:

1. The number of Prosthetists and Orthotists directly employed by NHS Dudley from 2005 - 2015. We would prefer if these numbers could be broken down into the number of Prosthetists and the number of Orthotists and region of employment if at all possible.

[Response](#)

Request reference: RFI0327

Response date: 24/12/2015

Request:

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1. I would like to make an information request about the GP networks operating within your CCG.

By GP network I am referring to the following or similar types of organisations:

- Collaborations - Involving 2 or more practices working together
- Alliance – A union of GP practices formed for mutual benefit
- Federation – An organization or group of practices which have some degree of internal autonomy

If you could provide me with the website of any such networks as well as an email address and contact number it would be greatly appreciated. Where possible could you specify which of the above categories they fall into?

Response

Request reference: RFI0328

Response date: 21/01/2016

Request:

1. What level of investment have you allocated in 2015/16 to ensure that the maximum waiting time standards in Early Intervention in Psychosis and access to psychological therapies are met by April 2016?
2. Has the CCG board made an assessment of the level of investment required to ensure that the maximum waiting time standards in Early Intervention in Psychosis and access to psychological therapies are met by April 2016? If the answer is 'yes', what level of investment is required?
3. What percentage of people referred for psychological therapies for the treatment of common mental health problems started their treatment (a) within 6 weeks and (b) within 18 weeks of being referred? Please could you provide a breakdown of this information for people referred for treatment (i) in 2014-15, and (ii) in each month between April 2015 and November 2015 inclusive.
4. What percentage of people going through their first episode of psychosis received Early Intervention in Psychosis treatment within two weeks of being referred? Please could you provide a breakdown of this information for people referred for treatment (i) in 2014-15, and (ii) in each month between April 2015 and November 2015 inclusive.
5. How many people were waiting to receive psychological therapies at the end of November 2015?
6. What is the average waiting time to receive psychological therapies for those referred between April 2015 and November 2015?
7. What was the longest waiting time to receive psychological therapies for those referred between April 2015 and November 2015?
8. How many people were waiting to receive Early Intervention in Psychosis treatment at the end of November 2015?
9. What is the average waiting time to receive Early Intervention in Psychosis treatment for those referred between April 2015 and November 2015?

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10. What was the longest waiting time to receive Early Intervention in Psychosis treatment for those referred between April 2015 and November 2015?

Response

Request reference: RFI0329

Response date: 18/01/2016

Request:

1. specify which services that are currently provided by each NHS Foundation Trust with whom you contract and which are designated as Commissioner Requested Services at that trust, will not be so designated on completion of that process. (If the process has already been completed, please specify the services that have not been so designated.);
2. explain why you have decided, or will decide, not to designate those services as Commissioner Requested Services;
3. inform me where those services will be available in the future.

Response