

Ref: UHB 20-140

Freedom of Information Request

20 March 2020

By Email

Dear Sir/Madam

Thank you for your request for information under the Freedom of Information Act 2000. The Trust's response is as follows:

2019 surgical volumes for:

- Colonoscopy
- Inguinal Hernia
- Lobectomy of Lung
- Bronchoscopy
- Wedge Resection
- Segmentectomies
- Pneumonectomy
- COPD Chronic Obstructive Pulmonary Diseases
- LVRS Lung Volume Reduction Surgery
- TTNA Trans Thoracic Needle Aspiration
- Radial Ebus
- ENB Endo Navigational Bronchoscopy

For each procedure also information on average length of stay, severe complication rate, conversion rate (minimally invasive to open), conversion rate (robotic to open), wound infection rate % 30 days and blood loss in ml. Please see excel file attached.

Please find attached the spreadsheet received filled in as much as possible.

Please note that not all of this data is easily or readily available and it would take the Trust more than 18 hours to prepare and complete this FOI and it is therefore exempt from disclosure under section 12 of the FOI Act 2000.

The Trust does not have blood loss recorded for every operation in a digital format, but in paper notes therefore it would require a manual trawl.

Some operations do not have codes explicitly attached to the procedure to say they were minimally invasive surgeries (MIS) but are (almost) always performed this way, e.g.

colonoscopies. Specifically, E59.1 - Needle biopsy of lesion of lung did have on operation marked with a MIS code, yet if this procedure was performed by itself it would usually be done as MIS.

Many of the codes will have overlap which affects Average Length of Stay (LOS). E.g. E49.x Diagnostic fibreoptic endo exams - these can be performed alone and could have many cases with LOS of 0 days, but these codes often appear as part of a bigger procedure, such as partial lobectomy of lung, where patients will be staying in hospital. As such, the Average LOS could vary or be higher than would be expected if just that one operation was performed.

Given the length of time it would take to do, we were not able obtain which patients were inpatients/outpatients.

This concludes our response. We trust that you find this helpful, but please do not hesitate to contact us directly if we can be of any further assistance.

If, after that, you are dissatisfied with the handling of your request, you have the right to ask for an internal review. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to:

Director of Corporate Governance University Hospitals Bristol NHS Foundation Trust Trust Headquarters Marlborough Street Bristol BS1 3NU

Please remember to quote the reference number above in any future communications.

If you are not content with the outcome of the internal review, you have the right to apply directly to the Information Commissioner for a decision. The Information Commissioner can be contacted at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF

Publication

Please note that this letter and the information included/attached will be published on our website as part of the Trust's Freedom of Information Publication Log. This is because information disclosed in accordance with the Freedom of Information Act is disclosed to the public, not just to the individual making the request. We will remove any personal information (such as your name, email and so on) from any information we make public to protect your personal information.

To view the Freedom of Information Act in full please click here.

Yours sincerely

FOI Team UH Bristol NHS Foundation Trust