

Department for  
Information Governance,  
Caldicott & SIRO Support  
Royal Hallamshire Hospital  
2 Claremont Place  
Sheffield  
S10 2TB

Dara Milik

[request-408xxxxxxxxxx@xxxxxxxxxxxxxxxx.xxx](mailto:request-408xxxxxxxxxx@xxxxxxxxxxxxxxxx.xxx)

23<sup>rd</sup> June 2017

Our ref: FOI RFI 005423

Your ref: email received 26<sup>th</sup> May 2017

Tel: 0114-2265151

Fax: 0114-2265152

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

Dear Dara

## Freedom of Information Request

Further to your email dated and received by the Trust on 26<sup>th</sup> May 2017, requesting the following information:

*I am looking for help with the following information/questions on pressure area care/negative pressure equipment contracts currently in place with the trust.*

### Section 1

- 1) What are the Hospital names and locations that form part of the Trust? (Please provide details)*
- 2) Which framework is utilized for purchasing such as SBS, NHS Supply Chain or other (please provide details of all that are used)*
- 3) By which method is this procured? (Please state all that applies)*

### Section 2

- 1) What is the name of the manufacturer used to provide Topical Negative Wound Therapy Treatment for each hospital location?*

*\*Smith-Nephew*

*\*KCI*

*\*Talley*

*\*Other (please provide names)*

- 2) By which method is this procured? (Please state all that applies)*
- 3) Is this equipment provided via Hire agreement, Purchase or other? (Please provide details)*
- 4) Is the provision of this equipment contracted? Yes or No*
- 5) If contracted is the service and maintenance of this equipment included as part of the contract? Yes or No*

6) If No - How is service & maintenance of this equipment dealt with - 3rd party provider or in-house?

7) If 3rd party provider please state company name

8) Is the 3rd party service & maintenance contracted? Yes or No

9) If Yes what is the contract term? (Including any extension periods).

10) What is the expiry date of this contract?

The following questions are only applicable if the supply of Topical Negative Wound Therapy to the hospital trust is contracted.

1) As a result of the tender did you change provider? Yes or No (If Yes please provide name of previous supplier)

2) What date did your current contract start?

3) How long is the current contract? (Including any extension periods)

4) When does the current contract expire?

5) Please provide the financial value of the contract in the last 12 months of the previous contract including total value and periods covered.

6) Please provide the financial value for the first 12 months of the current contract in place.

### Section 3

1) What is the name of the manufacturer used to provide pressure relief alternating dynamic surface air mattresses to the trust?

\*Hill-Rom

\*Smith-Nephew

\*Talley

\*Direct Healthcare

\*Karomed

\*Other (please provide names)

2) By which method is this procured? (Please state all that applies)

3) What is the total number of dynamic mattresses on-site?

4) Is this a managed service? Yes or No

5) Is the provision of dynamic surfaces contracted? Yes or No

6) If Yes is the service and maintenance of this equipment included as part of the contract? Yes or No

7) If No - How is service & maintenance of this equipment dealt with - 3rd party provider or in-house?

8) If 3rd party provider please state company name

9) Is this 3rd party service contracted? Yes or No

10) If Yes what is the contract term? (Including any extension periods).

11) What is the expiry date of this contract?

12) How is the decontamination of these products managed? In-house or 3rd party provider

13) If 3rd party provider please state company name

14) Is this 3rd party service contracted? Yes or No

15) If Yes what is the contract term? (Including any extension periods).

16) What is the expiry date of this contract

The following questions are only applicable if the supply of dynamic alternating air surface mattresses to the hospital trust is contracted.

1) Which method is used to tender the contract? (Please provide details)

2) What date did your current contract start?

3) What is the term of the contract? (including any extension periods)

4) When does the current contract expire?

5) Is the contract purchase, hire or other (please provide details)

6) If contracted, when did you last tender the contract?

7) As a result of the tender did you change provider? Yes or No (if Yes please provide previous supplier)

8) Please provide the financial value of the contract in the last 12 months of the previous contract including total value and periods covered.

9) Please provide the financial value for the first 12 months of the current contract in place.

#### Section 4

1) What is the name of the manufacturer used to supply profiling bed frames?

\*Hill-Rom

\*Sidhil

\*Invacare

\*Linet

*\*Huntleigh*

*\*Other (please provide details)*

*2) By which method is this procured? (Please state all that applies)*

*3) Which products are used? (Please provide details)*

*4) What is the total number of hospital bed frames on-site?*

*5) Is the supply of bed frames contracted?*

Yes or No?

*The following questions are only applicable if the supply of profiling beds to the hospital trust is contracted.*

*1) What date did your current contract start?*

*2) How long is the current contract? (Including any extension periods)*

*3) When does the current contract expire?*

*4) When did you last tender the contract?*

*5) As a result of the tender did you change provider? Yes or No (if Yes please state previous supplier)*

*6) Please provide the financial value of the contract in the last 12 months of the previous contract including total value and periods covered.*

*7) Please provide the financial value for the first 12 months of the current contract in place.*

## **Trust Response**

Our response to your request is detailed in the attached document.

This completes the Trust response to your request, but please note:

## **Your rights**

If you are unhappy with the way we have handled your request, you may ask for an internal review in accordance with Section VI Complaints Procedures of the Section 45 Code of Practice of the Freedom of Information Act 2000: and in accordance with Appendix E of the Trust's Code of Practice for Responding to Requests for Information (v 4.0 dated 31/03/14).

If you wish to complain you should contact:

Peter Wilson  
Information Governance, Caldicott & SIRO Support Manager  
Department for Information Governance, Caldicott & SIRO Support  
Sheffield Teaching Hospitals NHS Foundation Trust  
Royal Hallamshire Hospital  
2 Claremont Place  
Sheffield  
S10 2TB

Tel: 0114 226 5151 Fax: 0114 226 5152 Email: [xxx@xxx.xxx.xx](mailto:xxx@xxx.xxx.xx)

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

If you have any queries about this letter, please contact me. Please remember to quote the reference number above in any future communications

Yours sincerely



Amy Cooper  
Information Governance Officer