

6 March 2017

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London SE1 8UG

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E: nhsi.enquiries@nhs.net
W: improvement.nhs.uk

By email [REDACTED]

Dear [REDACTED]

Request under the Freedom of Information Act 2000 (the “FOI Act”)

I refer to your email of **4 February 2017** in which you requested information under the FOI Act from NHS Improvement. Since 1 April 2016, Monitor and the NHS Trust Development Authority (“TDA”) are operating as an integrated organisation known as NHS Improvement. For the purposes of this decision, NHS Improvement means Monitor and TDA.

Your request

You made the following request:

“Following on from Lord Carter's Pathology Report and in turn Efficiency report, please can you provide information on the following questions.

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(1) Which Trusts do not currently meet the 1.6% cost of service to Trust operating expenditure target as set out by the report 2016?

Which Trusts have been identified as not currently achieving the Acute Pathology Model Hospital model?

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We are aware that this query was put to you through a request under the FOI Act to which you replied on 18 May 2016, and that this answer is published on your website. However, this historical reply would not answer the above query/

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For absolute clarity, our request under the FOI Act is specifically whether this information is now known to the agency at February 2017.

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(2) As a second part of this request under the FOI Act, if your answer is that NHS Improvement does not hold this data (on which NHS Trusts do not currently meet the 1.6% cost of service to Trust operating expenditure) at February 2017, then is there a target date by which NHS Improvement will have access to this data?”

Decision

NHS Improvement holds some of the information requested and is withholding it under the application of the exemption under section 22 of the FOI Act, as explained below.

Section 22- future publication

NHS Improvement considers that the information held in response to your request is exempt from disclosure because it is intended for future publication by NHS Improvement.

Lord Carter's 2016 report clearly stated that improvement in quality and savings could be achieved throughout the NHS, by eliminating unwarranted variation. For pathology the unwarranted variation was based on differences in expenditure as a percentage of trust turnover with an average spend of 1.6% of trust turnover set as the average spend on pathology.

In September 2016, NHSI embarked on a data collection effort that would analyse the demand and input cost for pathology across the country. This new dataset aimed to increase comparability by collecting operational and demand data per department and study variation in more detail so that opportunities for improved efficiency could be identified. From the 130 non-specialist acute trusts that responded, it was clear that much of the variation could be explained by factors such as differences in demand type, complexity and the service delivery model of a specific pathology service.

By excluding warranted variation and categorising trusts into groups of similar complexity and volume, it has now been possible to more accurately compare performance and identify trusts that might not be delivering a cost efficient pathology service. However, this will need to be reviewed and verified with each trust before any of the data can be published.

NHSI is in the process of assembling a board consisting of all the stakeholder groups in order to agree our commitment and plan to release the data in due course.

Public interest test

The public interest in accountability and transparency by making access to the information available now has been weighed against the detrimental impact that is likely to ensue if disclosure is permitted.

We have concluded that the public interest in disclosure is outweighed by the need to ensure that the data is published in an agreed format and according to a timetable agreed with relevant stakeholders, following appropriate quality checks with the providers concerned. This provides certainty to stakeholders concerned and the sector as a whole.

Review rights

If you consider that your request for information has not been properly handled or if you are otherwise dissatisfied with the outcome of your request, you can try to resolve this informally with the person who dealt with your request. If you remain dissatisfied, you may seek an

internal review within NHS Improvement of the issue or the decision. A senior member of NHS Improvement's staff, who has not previously been involved with your request, will undertake that review.

If you are dissatisfied with the outcome of any internal review, you may complain to the Information Commissioner for a decision on whether your request for information has been dealt with in accordance with the FOI Act.

A request for an internal review should be submitted in writing to FOI Request Reviews, NHS Improvement, Wellington House, 133-155 Waterloo Road, London SE1 8UG or by email to nhsi.foi@nhs.net.

Publication

Please note that this letter will shortly be published on our website. This is because information disclosed in accordance with the FOI Act is disclosed to the public at large. We will, of course, remove your personal information (e.g. your name and contact details) from the version of the letter published on our website to protect your personal information from general disclosure.

Yours sincerely,

Andy Howlett

Clinical Productivity Operations Director