

26 May 2017

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██

**By email**

████████████████████

Dear ██████████

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

I refer to your email of **18 April 2017** in which you requested information under the FOI Act from NHS Improvement. Since 1 April 2016, the Patient Safety functions under section 13R of the NHS Act 2006 have been exercised by the NHS Trust Development Authority (NHS TDA). The NHS TDA is now part of the integrated organisation known as NHS Improvement.

**Your request**

You made the following request:

*‘Good afternoon,*

*Could you please respond to the following request for information under the Freedom of Information Act.*

*For your reference, NHS Improvement publishes data on the number of reported patient safety incidents. According to this data, 492,719 patient safety incidents resulting in harm were reported in England during 2015.*

*As such, could you please break down the number of patient safety incidents reported in England during 2015 by the primary injury which the incident resulted in. If necessary, I would be happy to provide an example list of injuries. I recognise, of course, that a large number of incidents will not have resulted in any injury (e.g. incidents resulting in no harm).*

*I look forward to hearing from you by Wednesday 17 May 2017 (which is 20 working days following this request). If there is any further information you need, please do not hesitate to contact me.*

*Best wishes,  
John’*

When asked to provide a list of examples you subsequently did so on 27<sup>th</sup> April 2017. This list can be found in **Annex 1**.

## **Decision**

NHS Improvement does hold some information within the scope of your request. However, we have not been able to progress your request because to do so would in our opinion exceed the cost limit specific under section 12 of the FOI Act.

### *Cost limit under section 12 of the FOI Act*

Under section 12(1) of the FOI Act, NHS Improvement is not required to comply with any request that potentially exceeds the appropriate cost limit. The limit is £450, as set out in the Freedom of Information and Data Protection (Appropriate Limit and Fees) Regulations 2004. This equates to a period of approximately 18 hours in which to locate, retrieve and extract the information requested.

In NHS Improvement's view, compliance with your request would exceed this time limit. By way of further background information, when incidents are reported and fed back to the NRLS the outcomes are not recorded in the categories of injury that you list. It would be impossible to undertake an effective free text search for these injuries as there would be no way to distinguish between original 'injury' or 'diagnosis' and subsequent injury without further review. For example, whilst the term 'epilepsy' may be included in an incident report, it might refer to patients with epilepsy rather than any epilepsy resulting from problems in healthcare.

It is also important to note that most NRLS reports are made at the time the incident occurred and are therefore unlikely to use terminology recording outcomes that may not be apparent until some months or years later. Undertaking a review for the list of injury types you have provided would require multiple searches and reviews of many thousands of incidents.

### *Advice and Assistance provided under section 16 of the FOI Act*

Under section 16 of the FOI Act NHS Improvement is required to provide advice and assistance, in so far as it is reasonable to do so.

We do record full incident type by degree of harm and the tables for these can be found in the QDS which is held here:

<https://improvement.nhs.uk/resources/national-quarterly-data-patient-safety-incident-reports-september-2016/>

The workbook is labelled to "NRLS quarterly data workbook up to March 2016" and tab 15 along with Table 12 should be the most useful.

To help understand how the NRLS works some further information may be helpful. The primary purpose of the NRLS is to enable learning from patient safety incidents occurring in the NHS. The NRLS was established in late 2003 as a largely voluntary scheme for reporting patient safety incidents, and therefore it does not provide the definitive number of patient safety incidents occurring in the NHS.

All NHS organisations in England and Wales have been able to report to the system since 2005. In April 2010, it became mandatory for NHS organisations to report all patient safety incidents which result in severe harm or death. All patient safety incident reports submitted to the NRLS categorised as resulting in severe harm or death are individually reviewed by clinicians to make sure that we learn as much as we can from these incidents, and, if appropriate, take action at a national level.

The NRLS is a dynamic reporting system, and the number of incidents reported as occurring at any point in time may increase as more incidents are reported. Experience in other industries has shown that as an organisation's reporting culture matures, staff become more likely to report incidents. Therefore, an increase in incident reporting should not be taken as an indication of worsening of patient safety, but rather as an increasing level of awareness of safety issues amongst healthcare professionals and a more open and transparent culture across the organisation.

### **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](mailto: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,

## **NHS Improvement**

### **Annex 1:**

Unnecessary Pain

Fatality

Additional/unnecessary Operation(s)

Fracture

Psychiatric/Psychological Dmge

Poor Outcome - Fractures Etc.

Cancer

Pressure Sores

Nerve Damage

Brain Damage

Bowel Damage/ Dysfunction

Other

Scarring

Other Infection

Other Visual Problems

Amputation - Lower

Bladder Damage

Advanced Stage Cancer

Stillborn

Cardiac Arrest

Cerebral Palsy

Burn(s)

Thrombosis/Embolism

Dental Damage

Joint Damage

Spinal Damage

Stroke

Blindness

Perforation

Tissue Damage

Bruising/ Extravasation

Renal Damage/ Failure

Tendon Damage

Incontinence

Multiple Injuries

Dislocation

Limb Deformity

Cardiovascular Condition

Respiratory Disorder/ Failure

Loss Of Baby

Erb's Palsy

Removal Of Testicle

Removal Of Fallopian Tube

Unknown

Peritonitis

Amputation - Upper

Primary Injury

Infertility

Paraplegia

Cosmetic Disfigurement

Anaphylact Shock/Allergic Shock/allergy

Rupture

Fistula

Bile Duct Damage

Partial Paralysis

Compartment Syndrome

Foot Drop

Sexual Abuse

Infectious Diseases

Deafness

Not Specified

Aneurysm

Hospital Acquired Infection

Hernia

Multiple Disabilities

Arterial Damage

Wrongful Birth

Malignant Tumour

Anaesthetic

Reduced Life Expectancy

Loss Of Kidney

Meningitis

Unwanted Pregnancy

Tuberculosis

Liver Damage

Tetraplegia/ Quadraplegia

Epilepsy

Lung Disease

Scalp Damage

Developmental Delay

Loss Of/Damage To Breast

Loss Of Sexual Function

Partial Hearing Loss

Viral Infection

Anal Fissure

Foetal Abnormality

H.I.V.

Failed Sterilization

Thyroid Condition

Benign Tumour

Addiction/Dependency

Osteoporosis

Malnutrition