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Russells Hall Hospital
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West Midlands
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Date: 04/03/2015

FREEDOM OF INFORMATION ACT 2000 - Ref: FOI/012124

With reference to your FOI request in connection with 'Hospital admissions' please see response below.

THE DUDLEY GROUP NHS FOUNDATION TRUST

Freedom of Information request 012124

Under the Freedom of Information Act, please could you provide, for 2013/14, a figure for:

1. - the total number of hospital beds within your Trust

This information is published quarterly and in the public domain. Please see the following link: http://www.england.nhs.uk/statistics/statistical-work-areas/bed-availability-and-occupancy/

NOTE: 'Reasons' for death are not coded in the hospital's information systems. What is recorded are the conditions that the patients are being treated for and any other co-morbidities the patient ha. We can therefore report how many patients that were being treated primarily for heart failure at the time of death. ICD10 Code I50 as primary diagnosis

For all responses below the period = 01/04/2013 to 31/03/2014

2. - the number of deaths within your Trust where congestive heart failure was recorded as a reason

There were 78 deaths where Congestive Heart Failure was the primary diagnosis being treated at the time of death.

3. - the number of elective admissions to hospital by patients, where congestive heart failure was recorded as a reason

There were 51 planned admissions where Congestive Heart Failure was the primary diagnosis

- for the above patients, the average number of nights they stayed in hospital after they were admitted **Average number of nights stay = 2.07 Finance**

- the aggregate income received for treating these patients (this should be the same as the tariff for these patients multiplied by the number of patients multiplied by the average number of nights)

Aggregate income = £238,306

Please note

a) that the Trust is not paid on the basis of the statement "patients (this should be the same as the tariff for these patients multiplied by the number of patients multiplied by the average number of nights)". The Trust is paid by each admission, the number of nights stay only becomes relevant if the patient stays in hospital a long time (beyond a point called the trim point)

b) that the patient may have had other conditions that were treated at the same time and the income would cover these as well

4. - the number of non-elective admissions to hospital by patients, where congestive heart failure was recorded as a reason

There were 396 non-elective admissions where Congestive Heart Failure was the primary diagnosis

- for the above patients, the average number of nights they stayed in hospital after they were admitted Average number of nights stay = 9.71

Finance

- the aggregate income received for treating these patients (as above, this should be the same as the tariff for these patients multiplied by the number of patients multiplied by the average number of nights)

Aggregate income = £1,106,578

Please note

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b) that the patient may have had other conditions that were treated at the same time and the income would cover these as well

5. - the number of unplanned admissions to hospital by patients, owing to ketoacidosis

ICD10 Diagnosis codes used in primary position E101, E111, E121, E131, or E141

There were 65 non-elective admissions where Ketoacidosis was the primary diagnosis

- for the above patients, the average number of nights they stayed in hospital after they were admitted Average number of nights stay = 5.52

Finance

- the aggregate income received for treating these patients (as above, this should be the same as the tariff for these patients multiplied by the number of patients multiplied by the average number of nights)

Aggregate income = £102,461

Please note

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b) that the patient may have had other conditions that were treated at the same time and the income would cover these as well

6. - the number of planned admissions to hospital by patients, owing to ketoacidosis

Zero. Ketoacidosis is an emergency condition and as such there are no planned admissions

- for the above patients, the average number of nights they stayed in hospital after they were admitted N/A **Finance**
- the aggregate income received for treating these patients (as above, this should be the same as the tariff for these patients multiplied by the number of patients multiplied by the average number of nights) N/A

7. - the number of unplanned admissions to hospital by patients, owing to hypoglycaemia

ICD10 Diagnosis codes used in primary position E160, E161 or E162.

There were 127 non-elective admissions where Hypoglycaemia was the primary diagnosis

- for the above patients, the average number of nights they stayed in hospital after they were admitted **Average number of nights stay = 6.93**

Finance

- the aggregate income received for treating these patients (as above, this should be the same as the tariff for these patients multiplied by the number of patients multiplied by the average number of nights)

Aggregate income = £210,901

Please note

a) that the Trust is not paid on the basis of the statement "patients (this should be the same as the tariff for these patients multiplied by the number of patients multiplied by the average number of nights)". The Trust is paid by each admission, the number of nights stay only becomes relevant if the patient stays in hospital a long time (beyond a point called the trim point)

b) that the patient may have had other conditions that were treated at the same time and the income would cover these as well

8. - the number of planned admissions to hospital by patients, owing to hypoglycaemia

Zero. Hypoglycaemia is an emergency condition and as such there are no planned admissions

- for the above patients, the average number of nights they stayed in hospital after they were admitted N/A

The aggregate income received for treating these patients (as above, this should be the same as the tariff for these patients multiplied by the number of patients multiplied by the average number of nights.)

9. - the number of unplanned admissions to hospital by patients, owing to hyperglycaemia with established diabetes

ICD10 Diagnosis code used in primary position R73.9

According to the ICD10 coding rules it is not necessary/mandatory to provide an additional code to identify established/pre-existing diabetes. As hyperglycaemia can be as a result of a number of other conditions it is not possible for the data to differentiate between those with existing diabetes from those caused by other conditions

- for the above patients, the average number of nights they stayed in hospital after they were admitted **N/A Finance**
- the aggregate income received for treating these patients (as above, this should be the same as the tariff for these patients multiplied by the number of patients multiplied by the average number of nights) **N/A**

10. - the number of planned admissions to hospital by patients, owing to hyperglycaemia with established diabetes

Zero. Hyperglycaemia is an emergency condition and as such there are no planned admissions

- for the above patients, the average number of nights they stayed in hospital after they were admitted **N/A Finance**
- the aggregate income received for treating these patients (as above, this should be the same as the tariff for these patients multiplied by the number of patients multiplied by the average number of nights) **N/A**