

FOI 2774

10<sup>th</sup> December 2024

## **FREEDOM OF INFORMATION ACT 2000 – INFORMATION REQUEST**

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### **Q1. Trust Name?**

**Response:** Southern Health & Social Care Trust

### **Q2. Type of Healthcare Facilities**

- District General Hospital (DGH) (1)
- Specialty Hospital (2)
- Private Hospital (3)
- Community Hospital (4)
- Other (Please Specify) (5)

**Response:** Other - Please see attached link to the Trust's website [Southern Health & Social Care Trust | Southern Health & Social Care Trust](#)

### **Q3 Demographic of Hospital Care**

- Adult Hospital (1)
- Paediatric Hospital (2)
- General Hospital (Both paediatric and adult) (3)
- GP surgery (4)
- Other (Please Specify) (5)

**Response:** Other - Please see attached link to the Trust's website [Southern Health & Social Care Trust | Southern Health & Social Care Trust](#)

**Q4 Respondent's Role in the Trust:**

- Medical Records Manager (1)
- IT Specialist (2)
- Clinician (3)
- Administrator (4)
- Other (Please Specify) (5)

**Response:** Other - Information Governance Department

**Q5 Does your Trust use electronic patient records (EPR)?**

- Yes (1)
- No (2)

**Response:** No, the Trust does not use an electronic patient records (EPR)

**Q6 Which EPR system does your Trust use?**

- Cerner (1)
- Epic (2)
- System C (3)
- Dedalus (4)
- Altera (5)
- Other (Please Specify) (6)

**Response:** See response to Q5.

**End of Block: Section 1: General Information**

**Start of Block: Section 2: Allergy Recording System**

**Q7 Does the EPR system used by your Trust include a specific section for recording food, drug, latex, and other allergies?**

Yes (1)

No (2)

**Response:** See response to Q5.

***Display This Question:***

***If Q7 = 1***

**Q8 If yes to question 7, how is the initial allergy information typically entered into the system? (Select all that relevant)**

Manually by Doctor (1)

Manually by Pharmacist (5)

Manually by Nurse (6)

Manually by Dietitian (7)

Automatically from Previous Records (2)

Manually by Administrative Staff (3)

Other (Please Specify) (4)

**Response:** See response to Q5.

***Display This Question:***

***If Q7 = 1***

**Q9 If yes to question 7, who is responsible for updating and/or checking allergy information in the patient's electronic record? (Select all that apply)**

Clinicians (e.g., doctors, nurses) (1)

Administrative Staff (2)

Pharmacists (3)

IT/Technical Support Staff (4)

Don't Know (5)

Other (Please Specify) (6)

**Response:** See response to Q5.

**Q11 What training, if any, is provided to staff on the correct recording of allergies in patient records?**

- Mandatory Training Sessions (1)
- Optional Training (2)
- No Training Provided (3)
- Other (Please Specify) (4)

**Response:** See response to Q5.

**Q12 If training is provided on allergy documentation, does it specifically cover different types of allergies in the training materials?**

- Only drug allergy recording (1)
- Both drug and non-drug allergy recording (2)
- Drug, food, and other non-drug allergy recording (e.g., latex) (3)
- Don't know/ Unsure (4)

**Response:** See response to Q5.

**Q13 Does your Trust have a Local Guideline or Standard Operating Procedure (SOP) in place covering allergy documentation on the EPR?**

- Yes (3)
- No (5)
- Don't know/ Unsure (4)

**Response:** See response to Q5.

***Display This Question:  
If Q13 = 3***



**Q14 If yes to Question 13, does this guideline/SOP include documentation for allergens below? (Select all that relevant)**

- Drugs (1)
- Food (2)
- Other non-drug substances (e.g. latex) (3)
- Don't know/ Unsure (5)

**Response:** See response to Q5.

**Q15 Does your hospital have access to specialist allergy advice for paediatric patients?**

- Yes, please specify if this service available is available through In-House, Local Centre or Regional Centre. (1)
- No (2)

**Response:** N/A

**Q16 Does your hospital have access to specialist allergy advice for adult patients?**

- Yes, please specify if this service available is available through In-House, Local Centre or Regional Centre. (1)
- No (2)

**Response:** N/A

**End of Block: Section 2: Allergy Recording System**

**Start of Block: Section 3: Allergy incidents**

**Section 3: Incident Section 3: Patient Safety Incidents** In this section, we would like to gather some information about patient safety incidents related to allergies in hospital, for example patients who have been administered penicillin antibiotics when they have a penicillin allergy. We would like information on up to 10 cases each for both drug allergy and food or non-drug allergy incidents, prioritised by severity of harm, followed by the most recent incidents.

Our local risk team recommends that you gather the following information for your incident reporting system before answering the following questions:

1. Drug allergy incidents- Allergen, Age, Level of harm
2. Food and other non-drug allergy incidents- Allergen, Age, Reactions, If reported as serious incident, Level of harm, Is the allergen previously documented in patients' note, Is the the allergen correctly documented on EPR
3. Common causes identified on food and other non-drug allergy incidents reported.

**Tips:**

We recognize that many Trusts may not have a specific category for food and other non-drug allergies in their incident reporting portals. However, we have identified a few related categories that are often associated with the documentation of these incidents, including:

**1. Food allergens incidents:**

- Insufficient help with eating and drinking
- All other medication incidents (errors with prescribing, administration, follow-up etc.)

**2. Medication allergen incidents:**

- All other medication incidents (errors with prescribing, administration, follow-up etc.)
- Other injury/accident
- Inadequate or inappropriate medical care

**3. Other search terms including- "anaphylaxis", "allergy", "food allergy", "allergic", "urticaria", "urticarial", "hives", "angioedema", "anaphylactic", "non-drug allergy", "adrenaline", "wheezing", "stridor", "EpiPen", "antihistamine"**

**4. Consider other search terms for non-drug allergy incidents including "Latex" , "Chlorhexidine" , "Povidone iodine" , "Macrogol" , "PEG-polyethylene glycol" , "Polysorbate 20" , "Polysorbate 80" , "Mannitol" , "EDTA" , "Tromatamol" , "Trismatamol" , "Metacresol" , "Arginine"**

**Q17 Does the incident reporting platform have a specific category for recording food or other non-drug allergy incidents?**

Yes (1)

No (2)

**Response:** This information is not recorded.

**Q18 In the last 10 years, has your Trust recorded any incidents where a patient was administered a food, drug, or other substance (e.g., latex) they were known to be allergic to?**

Yes (1)

No (2)

**Response:** This information is not recorded.

**Display This Question:**

**If Q18 = 1**

**Q19 If yes to question 18, how many such incidents have been reported in the last 10 years? [Numerical Response]**

<5, please specify (1)

5 - 9, please specify (2)

10 - 19, please specify (3)

≥ 20, please specify (4)

Don't know (5)

**Response:** This information is not recorded.

**Display This Question:**

**If Q18 = 1**

**Q20 If yes to question 18, please indicate the number of incidents for each category: [Numerical Response]**

Drug allergy incidents (1)

Food allergy incidents (2)

Incidents to other allergic substances (3)

Don't know/ unaware (4)

**Response:** This information is not recorded.

**Q21 Considering the start date of your EPR system, how many years' worth of incident data have you been able to search for this survey? Ideally, up to 10 years. (e.g. 2014 - 2024)**

**Response:** This information is not recorded.

**Q22 For reported DRUG ALLERGY incidents, what are the drugs involved, age group ( $\leq 17$  or  $>17$  years), and level of harm (no harm, low harm, moderate harm, severe harm or death), listing up to 10 cases prioritized by severity of harm, followed by the most recent incidents?**

**Please indicate the total cases below if more than 10 cases were reported.**

**Example: Case 1 (Amoxicillin,  $>17$ yo, low harm).**

- Case 1 (allergen, age, level of harm) (1)
- Case 2 (allergen, age, level of harm) (2)
- Case 3 (allergen, age, level of harm) (3)
- Case 4 (allergen, age, level of harm) (4)
- Case 5 (allergen, age, level of harm) (5)
- Case 6 (allergen, age, level of harm) (7)
- Case 7 (allergen, age, level of harm) (8)
- Case 8 (allergen, age, level of harm) (9)
- Case 9 (allergen, age, level of harm) (10)
- Case 10 (allergen, age, level of harm) (11)
- If more than 10 cases are reported, please indicate the total number of cases below. (13)
- No drug allergy incidents reported (14)

**Response:** This information is not recorded.

**Q23 For reported FOOD and OTHER NON-DRUG ALLERGY incidents, what are the allergens involved, age (confirm age via clinical record if required), reactions, if serious incident reported and level of harm (no harm, low harm, moderate harm, severe harm or death), listing up to 10 cases prioritized by severity of harm, followed by the most recent incidents?**

**Please indicate the total cases below if more than 10 cases were reported.**

**Example: Case 1 (Peanut, 3yo, anaphylaxis, serious incident reported, moderate harm).**



- Case 1 (allergen, age, reaction, serious incident reported, level of harm) (1)
- Case 2 (allergen, age, reaction, serious incident reported, level of harm) (2)
- Case 3 (allergen, age, reaction, serious incident reported, level of harm) (3)
- Case 4 (allergen, age, reaction, serious incident reported, level of harm) (4)
- Case 5 (allergen, age, reaction, serious incident reported, level of harm) (5)
- Case 6 (allergen, age, reaction, serious incident reported, level of harm) (7)
- Case 7 (allergen, age, reaction, serious incident reported, level of harm) (8)
- Case 8 (allergen, age, reaction, serious incident reported, level of harm) (9)
- Case 9 (allergen, age, reaction, serious incident reported, level of harm) (10)
- Case 10 (allergen, age, reaction, serious incident reported, level of harm) (11)
- If more than 10 cases report, please indicate the total number of cases below. (13)
- No food allergy OR other non-drug allergy incidents reported (14)

**Response:** This information is not recorded.

**Q24 For FOOD AND OTHER NON-DRUG ALLERGY incidents, how many of the incidents was the allergen clearly documented in patients notes/correspondence prior to the incident? Please insert the number of cases involved in each category. (e.g. 0 - 100)**

- Food allergies documented correctly, please specify: (1)
- Food allergies not documented, please specify: (2)
- Non-drug allergies documented correctly, please specify: (3)
- Non-drug allergies not documented, please specify: (4)
- The food/ non-drug allergens were not previously known (7)

**Response:** This information is not recorded.

**Q25 For FOOD AND OTHER NON-DRUG ALLERGY incidents, how many of the incidents was the allergen correctly documented on the relevant field in EPR prior to incident (Cerner / Epic / Other)? Please insert the number of cases involved in each category. (e.g. 0 - 100)**

- Food allergies documented correctly, please specify: (1)
- Food allergies not documented, please specify: (2)
- Non-drug allergies documented correctly, please specify: (3)
- Non-drug allergies not documented, please specify: (4)
- The food/ non-drug allergens were not previously known (5)

**Response:** This information is not recorded.

**Q26 What were the causes identified in the food or other non-drug incidents? (Multiple answers allowed)**

- Allergy not recorded in EPR (1)
- Allergy recorded but not flagged/alerted (2)
- Staff did not check EPR (3)
- Incorrect substance administered due to similar names/packaging (4)
- System error or failure (5)
- Other (Please Specify) (6)
- Unsure/ Don't know (7)

**Response:** This information is not recorded.

**End of Block: Section 3: Allergy incidents**

**Start of Block: Section 4: Feedback and Improvements**

**Q27 What challenges, if any, does your Trust face in accurately recording and managing allergy information in EPR systems?**

**Response:** This information is not recorded.

**Q28 What improvements do you suggest could be made at a national level to better manage allergy information in patient records?**

**Response:** This information is not recorded.

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