

FOI 2783

30th December 2024

FREEDOM OF INFORMATION ACT 2000 – INFORMATION REQUEST

SECTION 1: Hospital Demographics

1. Please indicate your trust/hospital type and type of care:

Trust/Hospital Type:

- Acute
- Mental Health
- Community
- Ambulance
- Other (please specify)

Response:

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

Type of Care:

- Secondary**
- Tertiary**
- Other (please specify)**

Response:

Secondary

2. Total Number of Beds: Please indicate the total number of inpatient beds in your hospital, including all types (e.g., general, ICU, maternity) if applicable.

Response:

Please see attachment 1.

3. ICU/ITU Bed Count: How many beds are designated for intensive or high-dependency care?

Response:

Please see attachment 1.

4. **Annual Admissions: Please provide the total number of patient admissions in the last calendar year. If exact figures are unavailable, please provide your best estimate.**

Response:

Please see attachment 1.

SECTION 2: Procurement and Inventory Management

1. **Formal Procurement Policies: Does your hospital have formal policies or guidelines for medical equipment procurement?**
- a. **Yes (please provide a copy or summary)**
- b. **No**

Response:

All procurement must be undertaken by the Procurement and Logistics Service (PaLS) which is the Centre of Procurement Expertise for Health & Social Care organisations. All requests for medical equipment procurement are sent to PaLS. -

* The revenue consequences and installation costs must be identified prior to approval of all purchases. This must also include annual maintenance and any additional consumable/medical surgical disposable item costs.

* A clinical/user and technical case must be prepared prior to approval of any purchase. This should include any building or engineering services required as appropriate. Contact Design Team, Estate Services Dept., for assistance in this regard.

* All requests for new medical devices, regardless of cost, size or complexity must be accompanied by a suitably detailed Clinical (User) Specification setting out the user requirements and exceptions include adding to existing 'standard, models etc., or where it is confirmed that only one make, model etc., will meet the clinical requirements. The Clinical (User) specification must include any and all issues related to proper Decontamination of the device(s) and take into account all related SHSCT Policy.

* When a new medical device is being purchased, training requirements must be identified and the training made available as part of the commissioning process.

* Information Governance / ICT Security clauses, where relevant, must be included in all contracts.

2. **Designated Procurement Roles: Is there a designated individual or team responsible for managing the procurement of medical equipment? If yes, please provide the role(s) and a brief description of responsibilities.**
- a. **Yes – Individual**
- b. **Yes – Team**

Response: Yes – Team

Equipment is requested via Eprocurement system by end users and PaLS procure as above.

3. **Inventory Review Frequency: How often is your medical equipment inventory reviewed for excess or unused items?**



- a. Monthly
- b. Quarterly
- c. Biannually
- d. Annually
- e. Other (please specify)

Response:

Annually for reusable medical equipment maintained under an external contract. However, process in place to allow user asset management for equipment no longer in use or required.

4. **Primary Sources for Procurement: What are the primary sources for your medical equipment procurement? Please indicate the proportion sourced from the NHS supply chain versus individual suppliers and provide any additional details as applicable.**

Response:

Equipment is typically purchased via BSO PaLS framework or NHSSC. The Trust would not hold information on sourcing, this would be maintained by PaLS.

SECTION 3: Waste and Disposal

1. **Excess/Expired Equipment: What percentage of your medical equipment inventory was classified as excess, unused, or expired in the last 12 months? Please provide a breakdown by equipment type, if available.**

Response:

No reusable medical devices were condemned in the past 12 months due to the reasons above

2. **Disposal Responsibility: Is there a specific role or department responsible for overseeing the disposal of medical equipment? If yes, please provide the role(s) and responsibilities.**

- a. Yes – Individual
- b. Yes – Department
- c. No

Response:

Single use medical devices disposed as per the Waste Policy and Guidance (SHSCT/13/729)

Clinical engineering department is responsible for overseeing the disposal of reusable medical devices, who will update asset list, cancel any external contracts and arrange for disposal in conjunction with the device owner.

3. Formal Disposal Policy: Does your hospital have a formal policy for the disposal of medical equipment?

- A. Yes (please provide a copy or summary of any policies)
- B. No

Response:

1.1 Single Use Devices

Single use medical devices must not be reprocessed for reuse.

(Managing Medical Devices – Guidance for Healthcare and Social Services Organisations April 2015)

These items must be disposed as per the Waste Policy and Guidance (SHSCT/13/729) Environment, Waste and Energy Management - Waste Management

1.2 Condemnation

Depending on the category of medical device under consideration either Clinical Engineering Services, Community Equipment/ Aids and Adaptations or Operational Engineering will be responsible for the condemnation process. A Certificate of Condemnation will be issued to user department setting out exactly why device(s) are to be condemned. Please note any medical device which is the subject of a condemnation certificate should not remain in service.

1.3 Surplus equipment sold for auction

Equipment in good working order may (depending on condition and predicted value) be sent for medical equipment auction with funds returned to the Trust.

1.4 Erasing Stored Data

If a device stores patient identifiable data, this should be certified as securely erased to an appropriate standard, such as BSISO/IEC15408 and British HMG Infosec Standard 5, or IS5, before disposal. Data on any device should be forensically unrecoverable, i.e. patient data must be over-written.

Refer to Policy for the Processing of Personal Information (POPI) (SHSCT/09/167) Information Technology - Home

ICT Security Policy (SHSCT/14/833)

1.5 Disposal of Redundant and Obsolete Equipment

The removal and safe disposal of any device needs to be considered under The Waste Electrical and Electronic Equipment Regulations 2013 (ref Waste Electrical and Electronic Equipment recycling (WEEE) (hse.gov.uk)). As identified special waste can include:

- * Wastes containing certain metals (e.g. mercury above 3%, some batteries).
- * Oil Wastes (including polychlorinated biphenyls – PCBs).
- * Waste from coolants.

Consideration also needs to be given to the following legislation when transporting devices and ensure they are appropriately packaged and secured: -

- * The Carriage of Dangerous Goods by Road Regulations.
- * The Carriage of Dangerous Goods by Rail Regulations.
- * Chemicals (Hazard Information and Packaging for supply) Regulations.
- * The Radioactive Materials (Road Transport (Great Britain) Regulations).

1.5.1 Disposal

Clinical Medical Devices

When considering the removal and/or disposal of a clinical medical device from the ward/department the EC/Ward/Departmental Manager must contact Clinical Engineering Services and they will provide direction on appropriate measures.

Non-clinical Medical Devices

When considering the removal and/or disposal of a clinical medical device from the ward/department the EC/Ward/Departmental Manager must refer to the SHSCT Policy



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'Transfer, Storage, Disposal of Non-Medical Equipment and Furniture Policy',
SHSCT/16/956.

4. Types of Commonly Disposed Equipment: Please specify the types of medical equipment most commonly disposed of due to expiry or non-use. Include examples and approximate percentages for each type, if possible.

a. Surgical instruments

Response:

We only order single use equipment as needed, we keep a minimum maximum level of single use devices in all areas to prevent overstocking of these devices

b. Diagnostic devices

Response:

Not aware of any reusable diagnostic devices disposed due to expiry or non-use within the past 12 months.

c. Monitoring equipment

Response:

Not aware of any reusable monitoring devices disposed due to expiry or non-use within the past 12 months.

d. Imaging equipment

Response:

Not aware off any reusable imaging equipment disposed due to expiry or non-use within the past 12 months.

e. Other (please specify)

SECTION 4: Sustainability and Environmental Impact

1. Sustainability Initiatives: Does your hospital have a sustainability initiative for recycling, reuse, or redistribution of excess or unused medical equipment?

a. Yes (please provide details)

b. No

Response:

Reusable equipment in good working order which is no longer required (typically near end of life or no longer meeting clinical need) sold via medical auction site with funds returned to Trust.

2. Disposal of Excess or Expired Equipment: How does your hospital manage the disposal of excess, expired, or damaged equipment? Please provide a breakdown by disposal method and indicate the approximate amount (in tonnes) used per year for each method. (Note: this information is for the year 2023)

- a. **Recycling**
- b. **Donation**
- c. **General waste**
- d. **Other (please specify)**

Response:

Condemned medical equipment is delivered to waste transfer stations. The equipment is managed by the WEEE contractor and is recycled. No data is available for 2023. It should be 100% for a) Recycling.

SECTION 5: Policies and Compliance

1. Compliance with Disposal Guidelines: How does your hospital ensure compliance with national or NHS guidelines on the disposal and management of medical equipment?

- a. **Internal audits**

Response:

In relation to auditing of excess equipment, as part of estate contract management process relating to servicing and maintenance, the equipment owners complete a App8 declaration annually confirming that equipment is still required. Therefore, there is an annual process in place. Findings are that all equipment is required.

- b. **External audits**

Response:

Medical devices management audit by BSO every 3 years.

- c. **Regular staff training**

Response:

Equipment controller training via Sharepoint.

- d. **Other (please specify)**

Response:

Management of Medical Devices group meets every two months.

2. Internal Audits of Equipment Management: Has your hospital conducted internal audits within the last 12 months to assess the management of excess medical equipment?



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- a. **Yes (If yes, please indicate the frequency of audits and any key findings, if available)**
- b. **No**

Response:

In relation to auditing of excess equipment, as part of estate contract management process relating to servicing and maintenance, the equipment owners complete a App8 declaration annually confirming that equipment is still required. Therefore, there is an annual process in place. Findings are that all equipment is required.

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