

Title: Ulcers / Wounds / Amputations

Reference Number: RDF1112-22 Date of Response: 04/01/23

Further to your Freedom of Information Act request, please find the Trust's response(s) below:

Please include your organisation ODS code and organisation name in column A and B on the tab labeled 'FOI Table' followed by the following counts for;

- 1. Number of patients treated for Diabetic foot ulcers
- 2. Number of patients treated for Leg ulcers
- 3. Number of patients treated for Pressure ulcers
- 4. Number of patients treated for Other wounds
- 5. Number of lower-limb amputations
- 6. Active caseload of patients with chronic wounds

For the following periods by month if known or aggregated for the year in the 'Total' columns for each of the 4 years requested.

- 1. April 2018-March 2019
- 2. April 2019-March 2020
- 3. April 2020-March 2021
- 4. April 2021-March 2022

Answer: Please see tables below representing Royal Devon University Healthcare NHS Foundation Trust's Eastern and Northern Services.

Northern Devon Healthcare NHS Trust (NDHT) and the Royal Devon and Exeter NHS Foundation Trust (RD&E) merged on 1st April 2022 to become the Royal Devon University Healthcare NHS Foundation Trust.

Eastern Services

Dates	Number of patients treated for Diabetic foot ulcers	Number of patients treated for Leg ulcers	Number of patients treated for Pressure ulcers	Number of patients treated for Other wounds (*Unable to capture this information)	Number of lower- limb amputati ons	Active caseload of patients with chronic wounds (*Unable to capture this information)	Total
April 2018- March 2019	3108	2019	969	*	61	*	6157
April 2019- March 2020	3226	2175	955	*	63	*	6419
April 2020- March 2021	3693	2496	1509	*	52	*	7750
April 2021- March 2022	2972	2589	1279	*	56	*	6896

Northern Services

The information is not held by the Trust that is easily reportable. The information has been extracted from multiple settings Inpatient Diagnosis and Theatre Procedures.

Settings such as Community, Outpatients or Emergency Department presenting complaint have been completed by relevant teams but coding/descriptions are not available within the relevant source systems as requested.

Outpatient Clinics	2018 / 2019	2019 / 2020	2020 / 2021	2021 / 2022
Number of patients treated for Diabetic foot ulcers	429	422	121	125
Number of patients treated for Leg ulcers/Pressure ulcers	247	992	1678	965
Number of patients treated for Other wounds (*Unable to capture this information)	*	*	*	*

Inpatient Diagnosis	2018 / 2019	2019 / 2020	2020 / 2021	2021 / 2022
Number of patients treated for Diabetic foot ulcers	54	45	31	35
Number of patients treated for Leg ulcers	421	377	363	332
Number of patients treated for Pressure ulcers	540	522	532	515
Number of patients treated for Other wounds (*Unable to capture this information)	*	*	*	*
Inpatient Procedure (excl. amputation of Toe) Number of lower-limb amputations	≤5	≤5	0	≤5

ED	2018 /	2019 /	2020 /	2021 /
	2019	2020	2021	2022
Number of patients treated for Other wounds	1108	1099	544	476

Number of actual patients seen by Leg Ulcer service data.				
Community				
2018/19	591			
2019/20	992			
2020/21	706			
2021/22	998			

Data taken from community activity	Assessment of pressure area	Wound care	Pressure wound care
2018/19	2948	7923	-
2019/20	3531	9536	-
2020/21	3776	9451	-
2021/22	3626	9629	≤5
Active caseload of patients with chronic wounds	Not possible to qua	antify	

In accordance with Section 40 (2) of the Freedom of Information Act 2000, we are unable to provide figures where the number of patients is less than or equal to five and could risk the identification of those patients and breach Caldicott principles. In these cases ≤5 is used to indicate that a figure between 1 and 5 is being suppressed. These figures are withheld under Section 40(2) due to low staff numbers. The disclosure of which could risk the identification of those staff members and breach Caldicott principles.

This follows NHS Digital (formerly HSCIC) analysis guidance (2014) which states that small numbers within local authorities, wards, postcode districts, CCG's providers and Trusts may allow identification of patients and should not be published.

(Clarification response) We are seeking to understand the overall caseload of patients with chronic wounds, and know that these are often recorded or categorised differently. Much of this caseload is likely to be managed by community nursing teams, and some patients will also be admitted to hospital either for their chronic wounds, or for other conditions comorbid to their chronic wounds.

By chronic wound, we mean wounds that fail to proceed through the normal phases of wound healing in an orderly and timely manner, and this terminology should be well understood in district / community nursing, TVS, podiatry services and others.

If there is no data for any of these categories, then please just provide what is available, categorised as it is.