

Direct Line: 01623 672232
Our Ref: 605
E-mail: sfh-tr.foi.requests@nhs.net

King's Mill Hospital
Mansfield Road
Sutton in Ashfield
Nottinghamshire
NG17 4JL

29th July 2025

Tel: 01623 622515
Join today: www.sfh-tr.nhs.uk

[REDACTED]

Dear Sir/Madam

Freedom of Information Act (FOI) 2000 - Request for Information Reference: Clinical
Risks vs. Patient Data

I am writing in response to your request for information under the FOI 2000.

I can confirm in accordance with Section 1 (1) of the Freedom of Information Act 2000 that we do hold the information you have requested. A response to each part of your request is provided below. Please accept our sincere apologies for the delay.

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FOI Request / Question	Question Response	Is there an exemption?	Exemption	Exemption Details
Q1: How many Clinical IT System/Patient Data risks with a risk score of 16 or above have been recorded on the Trust risk register in Financial Years 2022/23 and 2023/24?	2022/23 - 0 2023/24 - 1			
Q2: How many Physical Patient Record risks with a risk score of 16 or above have been recorded on the Trust risk register in Financial Years 2022/23 and 2023/24?	0			
Q3: How many Datix Incidents did the Trust record in Financial Years 2022/23 and 2023/24?	2022/23 – 35,316 2023/24 – 17,936			
Q4: Of these incidents recorded in Datix or other risk-based reporting systems: a) How many were categorised as no harm? b) How many were categorised as no harm but appointment rescheduled? c) How many were categorised as low harm (minor harm)? d) How many were categorised as moderate harm? e) How many were		Yes	Section 12	Section 12 of the Act allows the Trust to refuse to deal with any requests where we estimate that responding to the request would exceed the cost limit. We have identified that question 4 will exceed the cost limit. For public authorities the cost limit is £450 (18 hours). If responding to one part of a request would exceed the cost limit, we do not have to provide a response to any other parts of the request. Therefore, the

<p>categorised as severe harm (significant harm)? f) How many were categorised as death (catastrophic)? g) If your organisation uses different grading criteria or additional categories, could you please specify and provide details?</p>			<p>estimated cost of processing your request is £1000. This charge has been calculated in accordance with section 13 of the Freedom of Information Act 2000 and the Freedom of Information Fees Regulations.</p> <p>In order to locate this information, due to the size we would need to use individual incident codes to extract the data. We estimate that the cost of satisfying your request will be £1,000.00 (40 hours x £25 per hour).</p> <p>Under section 16 of the Act we are obliged to advise you to refine your request to narrow the scope in order to bring it within the appropriate limit. Can we suggest that the timescales for question 4 are reduced, for example, to a calendar month. If the timescales are reduced to a month, the Trust will be able to respond to all of your questions. If you are unable to reduce the scope of the request the Trust will be unable to continue processing your request until the fee is paid. If you wish to proceed with this request the fee will need to be paid within three calendar</p>
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				months. If the fee is not received by this date, I shall take it that you do not wish to pursue this request and will consider the request closed.
Q5: Could you please provide the total number of incidents reported in Datix or any other risk-based reporting systems for the years 2022/23 and 2023/24 that are specifically related to Digital Patient Records?	2022/23 – 192 2023/24 – 196			
Q6: For the incidents recorded in response to Q5 that are recorded in Datix or other risk-based reporting systems: a) How many were categorised as no harm? b) How many were categorised as no harm but appointment rescheduled? c) How many were categorised as low harm (minor harm)? d) How many were categorised as moderate harm? e) How many were categorised as severe harm (significant harm)?	2022/23 No Harm – 187 Low Harm – 5 Moderate – 0 Severe – 0 Catastrophic – 0 2023/24 No Harm – 191 Low Harm – 5 Moderate – 0 Severe – 0 Catastrophic – 0			

f) How many were categorised as death (catastrophic)? g) If your organisation uses different grading criteria or additional categories, could you please specify and provide details?				
Q7: Could you please provide the total number of incidents reported in Datix or any other risk-based reporting systems for the years 2022/23 and 2023/24 that are specifically related to Physical Patient Records?	2022/23 – 332 2023/24 – 339			
Q8: For the incidents listed in response to Q7 that are recorded in Datix or other risk-based reporting systems: a) How many were categorised as no harm? b) How many were categorised as no harm but appointment rescheduled? c) How many were categorised as low harm (minor harm)? d) How many were categorised as moderate harm?	2022/23 No Harm – 329 Low Harm – 3 Moderate – 0 Severe – 0 Catastrophic – 0 2023/24 No Harm – 333 Low Harm – 6 Moderate – 0 Severe – 0			

e) How many were categorised as severe harm (significant harm)? f) How many were categorised as death (catastrophic)? g) If your organisation uses different grading criteria or additional categories, could you please specify and provide details?	Catastrophic – 0			
Q9: Has the Trust received any recommendations from the Care Quality Commission (CQC) on resolving the fragmentation or dispersal of patient data and / or medical records across the Trust?	No			

I trust this information answers your request. Should you have any further enquiries or queries about this response please do not hesitate to contact me. However, if you are unhappy with the way in which your request has been handled, you have the right to ask for an internal review. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to: Sally Brook Shanahan, Director of Corporate Affairs, King's Mill Hospital, Mansfield Road, Sutton in Ashfield, Nottinghamshire, NG17 4JL or email sally.brookshanahan@nhs.net.

If you are dissatisfied with the outcome of the internal review, you can apply to the Information Commissioner's Office, who will consider whether we have complied with our obligations under the Act and can require us to remedy any problems. Generally, the Information Commissioner's Office cannot decide unless you have exhausted the internal review procedure. You can find out more about how to do this, and about the Act in general, on the Information Commissioner's Office website at: <https://ico.org.uk/your-data-matters/official-information/>.

Complaints to the Information Commissioner's Office should be sent to FOI/EIR Complaints Resolution, Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. Telephone 0303 1231113, email casework@ico.org.uk.

If you would like this letter or information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call us on 01623 672232 or email sfh-tr.foi.requests@nhs.net.

Yours faithfully

Information Governance Team

All information we have provided is subject to the provisions of the Re-use of Public Sector Information Regulations 2015. Accordingly, if the information has been made available for re-use under the [Open Government Licence](#) (OGL) a request to re-use is not required, but the licence conditions must be met. You must not re-use any previously unreleased information without having the consent from Sherwood Forest Hospitals NHS Foundation Trust. Should you wish to re-use previously unreleased information then you must make your request in writing. All requests for re-use will be responded to within 20 working days of receipt.

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