

**Reference Number:** FOI/LHCH/2016171  
**From:** Private Individual  
**Date:** 16 June 2016  
**Subject:** Medical equipment

Section 1 - procurement

Q1 What are the Hospital names and locations that form part of the Trust? (Please list names of all that apply)

A1 Information exempt under Section 21 of the Freedom of Information Act 2000 - 'Information reasonably accessible to the applicant by other means'.

This information is available on our website, it can be found in the About LHCH section.

Q2 Which framework is utilized for purchasing - such as SBS, NHS Supply Chain or other (please provide names and details of all that are used)

A2 The Trust has access to numerous frameworks and uses both NHS Supply Chain and SBS

Q3 By which method is this procured? (Please state all that applies)

A3 Direct award against framework agreements.

Section 2 - Topical Negative Wound Therapy Treatment

Q1 What is the name of the manufacture used to provide Topical Negative Wound Therapy Treatment for each hospital location?

A1 Smith-Nephew - PICO  
KCI – VAC therapy

Q2 By which method is this procured? (Please state all that applies)

A2 NHS Supply Chain for PICO  
VAC consumables ordered via NHS Supply Chain

Q3 Is this equipment provided via Hire agreement, Purchase or other? (Please provide specific details)

A3 We have our own (KCI) Activac units then hire additional units as needed

Q4 Is the provision of this equipment contracted?

A4 No

Q5 If contracted is the service and maintenance of this equipment included as part of the contract?

A5 Information not held – not applicable

Q6 If No - How is service & maintenance of this equipment dealt with - 3rd party provider or in-house?

Q6 In-house for VAC

Q7 If a 3rd party provider is used, please state company name

A7 Information not held – not applicable

Q8 Is the 3rd party service & maintenance contracted? Yes or No

A8 Information not held – not applicable

Q9 If Yes what is the contract term? (Including any extension periods)

A9 Information not held – not applicable

Q10 What is the current expiry date of this contract?

A10 Information not held – not applicable

The following questions are only applicable if the supply of Topical Negative Wound Therapy to the hospital trust is contracted.

Q11 As a result of the tender did you change provider? Yes or No (If Yes please provide name of previous supplier)

A11 Information not held – not applicable

Q12 What date did your current contract start?

A12 Information not held – not applicable

Q13 How long is the current contract? (Including any extension periods)

A13 Information not held – not applicable

Q14 When does the current contract expire?

A14 Information not held – not applicable

Q15 Please provide the financial value of the contract in the last 12 months of the previous contract including total value and periods covered.

A15 Information not held – not applicable

Q16 Please provide the financial value for the first 12 months of the current contract in place.

A16 Information not held – not applicable

Section 3 - pressure relief alternating dynamic surface air mattresses

Q1 What is the name of the manufacture used to provide pressure relief alternating dynamic surface air mattresses to each of the trusts hospitals?

A1 Hill-Rom  
Medstrom

Q2 By which method is this procured? (Please state all that applies)

A2 Hill Rom – no contract – daily hire rate per mattress  
Medstrom – 12 month contract

Q3 What is the total number of dynamic mattresses on-site?

A3 Varies – average 60 units in use per day

Q4 What are the makes/names of the models used?

A4 Clin Activ mattress or Duo 2 (Hill Rom)  
Dolphin (Medstrom)

Q5 Is this a managed service?

A5 Yes

Q6 Is the provision of dynamic surfaces contracted? Yes or No

A6 For Dolphin mattresses only

Q7 If Yes is the service and maintenance of this equipment included as part of the contract?

A7 Yes

Q8 If No - How is service & maintenance of this equipment dealt with - 3rd party provider or in-house?

A8 3rd party provider

Q9 If 3rd party provider is used please state company name

A9 Hill Rom and Medstrom

Q10 Is this 3rd party service contracted? Yes or No

A10 No

Q11 If Yes what is the contract term? (Including any extension periods).

A11 Information not held – not applicable

Q12 What is the expiry date of this contract?

- A12 Information not held – not applicable
- Q13 How is the decontamination of these products managed? In-house or 3rd party provider
- A13 External decontamination for all by each provider after each patient use
- Q14 If 3rd party provider is used please state company name.
- A14 Medstrom and Hill Rom
- Q15 Is this 3rd party service contracted? Yes or No
- A15 Yes – Medstrom (part of contract)  
No – Hill Rom
- Q16 If Yes what is the contract term? (Including any extension periods).
- A16 12 months
- Q17 What is the expiry date of this contract.
- A17 31<sup>st</sup> December 2016

The following questions are only applicable if the supply of dynamic alternating air surface mattresses to the hospital trust is contracted.

- Q18 Which method is used to tender the contract? (Please provide details)
- A18 NHS Supply Chain
- Q19 What date did your current contract start?
- A19 1st January 2016
- Q20 What is the term of the contract? (including any extension periods)
- A20 12 months
- Q21 When does the current contract expire?
- A21 31st December 2016
- Q22 Is the contract purchase, hire or other (please provide details)
- A22 Hire
- Q23 If contracted, when did you last tender the contract?
- A23 Not previously tendered
- Q24 As a result of the tender did you change provider? Yes or No (if Yes please provide previous supplier)

A24 Information not held – as above

Q25 Please provide the financial value of the contract in the last 12 months of the previous contract including total value and periods covered.

A25 £25,657.20

Q26 Please provide the financial value for the first 12 months of the current contract in place.

A26 £153,779.65

#### Section 4 - Static Mattresses

Q1 What is the name of the manufacture used to provide Static Mattresses to the trust?

A1 Parkhouse

Q2 By which method is this procured? (Please state all that applies)

A2 Direct from company

Q3 What is the total number of static mattresses on-site?

A3 Approximately 140-150 – exact number not held due to mattress movements within the Trusts on audit days.

Q4 What are the makes/names of the models used?

A4 Permafex Plus

Q5 Is this a managed service?

A5 Yes

Q6 Is the provision of static surfaces contracted?

A6 No

Q7 If Yes is the service and maintenance of this equipment included as part of the contract?

A7 Information not held – not applicable

Q8 If No - How is service & maintenance of this equipment dealt with - 3rd party provider or in-house?

A8 Internal mattress audits performed by wards.

Q9 If 3rd party provider is used please state company name

A9 Information not held – not applicable

Q10 Is this 3rd party service contracted? Yes or No

A10 Information not held – not applicable

Q11 If Yes what is the contract term? (Including any extension periods).

A11 Information not held – not applicable

Q12 What is the expiry date of this contract?

A12 Information not held – not applicable

Q13 How is the decontamination of these products managed? In-house or 3rd party provider

A14 Information not held – not applicable

Q14 If 3rd party provider is used please state company name

A14 Information not held – not applicable

Q15 Is this 3rd party service contracted? Yes or No

A15 Information not held – not applicable

Q16 If Yes what is the contract term? (Including any extension periods).

A16 Information not held – not applicable

Q17 What is the expiry date of this contract?

A17 Information not held – not applicable

Q18 Does the trust have a fire safety policy that stipulates a particular model of static mattress is to be used? No

A18 Information not held – not applicable

Q19 If Yes please provide details of the policy guidelines

A19 Information not held – not applicable

The following questions are only applicable if the supply of static mattresses to the hospital trust is contracted

Q20 Which method is used to tender the contract? (Please provide details)

Q21 What date did your current contract start?

Q22 What is the term of the contract? (including any extension periods)

Q23 When does the current contract expire?

Q24 Is the contract purchase, hire or other (please provide details)

- Q25 If contracted, when did you last tender the contract?
- Q26 As a result of the tender did you change provider? Yes or No (if Yes please provide previous supplier)
- Q27 Please provide the financial value of the contract in the last 12 months of the previous contract including total value and periods covered.
- Q28 Please provide the financial value for the first 12 months of the current contract in place.

A20-28 Information not held – not applicable

#### Section 5 - profiling bed frames

- Q1 What is the name of the manufacture used to supply profiling bed frames?  
\*Hill-Rom  
\*Sidhil  
\*Invacare  
\*Linet  
\*Huntleigh  
\*Other  
(Please provide names of all providers that apply) (As well as to each individual hospital location if applicable)

A1 Hill Rom

- Q2 By which method is this procured? (Please state all that applies)

A2 Direct from manufacturer

- Q3 Which products are used? (Please provide details/names of all models)

A3 Evolution, HR900 ELITE C2

- Q4 What is the total number of hospital bed frames on-site?

A4 230

- Q5 Is the supply of bed frames contracted? Yes or No?

A5 No

- Q6 If Yes is the service and maintenance of this equipment included as part of the contract? Yes or No

A6 Information not held – not applicable as above

- Q7 If No - How is service & maintenance of this equipment dealt with - 3rd party provider or in-house?

A7 Bed frame service & maintenance is direct from manufacturer but not on contract.

Q8 If 3rd party provider is used please state company name

A8 As above

Q9 Is this 3rd party service contracted? Yes or No

A9 No, as above

Q10 If Yes what is the contract term? (Including any extension periods).

A10 Information not held – not applicable as above

Q11 What is the expiry date of this contract?

A11 Information not held – not applicable as above

Q12 How is the Auditing and LOLER testing of this equipment managed? In-house or 3rd party provider

A12 Bed frame service & maintenance is direct from manufacturer

Q13 If 3rd party provider is used please state company name

A13 As above

Q14 Is this 3rd party service contracted? Yes or No

A14 No, as above

Q15 If Yes what is the contract term? (Including any extension periods).

A15 Information not held – not applicable as above

Q16 What is the expiry date of this current contract?

A16 Information not held – not applicable as above

The following questions are only applicable if the supply of profiling beds to the hospital trust is contracted.

Q17 What date did your current contract start?

Q18 How long is the current contract? (Including any extension periods)

Q19 When does the current contract expire?

Q20 When did you last tender the contract?

Q21 As a result of the tender did you change provider? Yes or No (if Yes please state previous supplier)

Q22 Please provide the financial value of the contract in the last 12 months of the previous contract including total value and periods covered.

Q23 Please provide the financial value for the first 12 months of the current contract in place.



A17 – Information not held – not applicable  
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