

Reference:	FOI.15943.24
Subject:	Allergy recording
Date of Request:	12 November 2024

Your request and our response

Freedom of Information Request on Allergy Recording in Electronic Patient Records.

Hywel Dda University Health Board (UHB) is unable to provide you with all of the information requested for Section 3, as it is estimated that the cost of answering your request would exceed the “appropriate limit” as stated in the Freedom of Information Act 2000 and the Data Protection (Appropriate Limit and Fees) Regulations 2004. The “appropriate limit” represents the estimated cost of one person spending 18 hours (or 2½ working days) in determining whether the UHB holds the information, and locating, retrieving and extracting the information.

In order to provide you with all of the information requested for questions 18, 19 and 20 and any of the information requested for questions 22, 23, 24, 25 and 26, the UHB would need to undertake a manual trawl of both its old and new Datix Incident Reporting systems, to identify any information that may fulfil these parts of your request, as this is not easily identifiable or accessible.

The UHB can confirm that one hundred and forty-eight (148) allergy incidents were recorded on its old Datix incident reporting system alone. Therefore, to provide you with the exact information being requested, conducting the search would far exceed the ‘appropriate limit’, costing the UHB the following just for the incidents identified on the old Datix incident Reporting system:

148 @ 15 minutes per item = 37 hours
 37 hours @ £25 per hour = £925.00

The UHB is therefore applying an exemption under Section 12 of the Freedom of Information Act 2000 (FoIA), which provides an exemption from a public authority’s obligation to comply with a request for information where the cost of compliance is estimated to exceed the appropriate limit.

However, under Section 16 of the FoIA, the UHB has a duty to provide advice and assistance. Therefore, the UHB provides the accessible information it holds below.

Section 1: General information

1. Trust Name: Hywel Dda University Health Board (UHB)

2. Type of Healthcare Facilities

- District General Hospital (DGH)
- Specialty Hospital
- Private Hospital
- Community Hospital
- Other (Please specify):

3. Demographic of Hospital Care

- Adult Hospital

- Paediatric Hospital
- General Hospital (Both paediatric and adult)
- GP surgery
- Other (Please specify):

4. Respondent's Role in the Trust

- Medical Records Manager
- IT Specialist
- Clinician
- Administrator
- Other (Please specify): Freedom of Information Officer.

5. Does your Trust use Electronic Patient records (EPR)?

- Yes
- No

6. Which EPR system does your Trust use?

- Cerner
- Epic
- System C
- Dedalus
- Altera
- Other (Please specify): Welsh Patient Administration System (WPAS), Welsh Clinical Portal (WCP) and Welsh Nursing Care Record (WNCR).

Section 2: Allergy recording system

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

- Yes
- No

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

- Manually by Doctor
- Manually by Pharmacist
- Manually by Nurse
- Manually by Dietitian
- Automatically from Previous Records
- Manually by Administrative Staff
- Other (Please specify):

9. 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)
- Administrative Staff
- Pharmacists
- IT/Technical Support Staff
- Don't Know
- Other (Please specify):

10. How is the allergy information flagged or highlighted in the patient's records to alert healthcare providers?

- Red Flag
- Pop-up Alert
- Highlighted Text
- Other (Please specify): Warning triangle on front end screens.
- Not highlighted/ alerted on the system

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

- Mandatory Training Sessions
- Optional Training
- No Training Provided
- Other (Please specify):

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

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

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

- Yes
- No
- Don't know/ Unsure

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

- Drugs
- Food

- Other non-drug substances (e.g. latex)
- Don't know/ Unsure

15. 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
- No

16. 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
- No

However, patch testing is referred to Swansea Bay University Health Board and immunology referrals are referred to University Hospitals Birmingham NHS Foundation Trust.

Section 3: Allergy incidents

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.

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

- Yes
- No

18. 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
- No

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

- <5, please specify:
- 5 - 9, please specify:
- 10 - 19, please specify:
- ≥ 20, please specify: 148
- Don't know

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

- Drug allergy incidents
- Food allergy incidents
- Incidents to other allergic substances
- Don't know/ unaware

21. 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).

The UHB confirms that it has been able to search ten (10) years' worth of data in its Datix Incident Reporting systems.

A Section 12 exemption has been applied to questions 22 to 26, as explained on page one (1).

22. For reported DRUG ALLERGY incidents, what are the drugs involved, age group (≤ 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):

Case 2 (allergen, age, level of harm):

Case 3 (allergen, age, level of harm):

Case 4 (allergen, age, level of harm):

Case 5 (allergen, age, level of harm)

Case 6 (allergen, age, level of harm):

Case 7 (allergen, age, level of harm):

Case 8 (allergen, age, level of harm):

Case 9 (allergen, age, level of harm):

Case 10 (allergen, age, level of harm):

If more than 10 cases are reported, please indicate the total number of cases below:

- No drug allergy incidents reported

23. 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):

Case 2 (allergen, age, reaction, serious incident reported, level of harm):

Case 3 (allergen, age, reaction, serious incident reported, level of harm):

Case 4 (allergen, age, reaction, serious incident reported, level of harm):

- Case 5 (allergen, age, reaction, serious incident reported, level of harm):
- Case 6 (allergen, age, reaction, serious incident reported, level of harm):
- Case 7 (allergen, age, reaction, serious incident reported, level of harm):
- Case 8 (allergen, age, reaction, serious incident reported, level of harm):
- Case 9 (allergen, age, reaction, serious incident reported, level of harm):
- Case 10 (allergen, age, reaction, serious incident reported, level of harm):

If more than 10 cases are reported, please indicate the total number of cases below:

- No drug allergy OR other non-drug allergy incidents reported

24. 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:
- Food allergies not documented, please specify:
- Non-drug allergies documented correctly, please specify:
- Non-drug allergies not documented, please specify:
- The food/ non-drug allergens were not previously known:

25. 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:
- Food allergies not documented, please specify:
- Non-drug allergies documented correctly, please specify:
- Non-drug allergies not documented, please specify:
- The food/ non-drug allergens were not previously known:

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

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

Section 4: Feedback and improvements

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

Not a valid FOI request. The Freedom of Information Act 2000 (FoIA) covers any recorded information that is held by a public authority; recorded information includes printed documents, computer files, letters, emails, photographs, and sound or video recordings. The FoIA does not cover information on estimates, opinions or recommendations. The UHB has an obligation to provide information already in recorded form but cannot create new information to answer a question.

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

Please see response to question 27.