

FOI REF: 26/313

3rd June 2026

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Further to your recent request for information made under the Freedom of Information Act (FOIA) 2000, I now set out our answers to your specific questions, and any clarifications sought and provided, as follows:

I have reviewed the Trust's published Disclosure Log, Annual Reports, and the NHS England Intermediate Care Data Collection (NCTR datasets). While high-level discharge delay volumes are published, they do not provide the granular detail required for the analysis I am undertaking, specifically the isolation of Community Equipment from broader Home Adaptation categories, nor the specific internal unit costs.

Specifically, I am requesting data from the last two complete financial years (2023/24 and 2024/25) regarding:

Clarification was sought with regard to whether you would prefer to receive the data for 2024/25 and 2025/26 and confirmation was received that you require the following:

As the data is now available for the last financial year, yes please, could you provide data for 2024/25 and 2025/26 financial years instead.

- Isolated Discharge Delays: How many "Bed Days" were recorded as lost where the primary reason for a delayed discharge (NCTR) was recorded specifically as "Waiting for Community Equipment" (excluding Home Adaptations/Major Works where possible)?**

Financial Year	Number of Patients	Delay Days	Intermediate Care Ward/ Discharge Ward
FY24/25	43	335	N
FY24/25	12	45	Y
FY24/25 Total	55	380	
FY25/26	67	522	N
FY25/26	11	62	Y
FY25/26 Total	78	584	
Grand Total	133	964	

Please note that the digital recording of Community delays did not commence until July 2024, this is therefore reflected in the figures.

2. Internal Bed Day Cost: What is the current estimated daily "per-diem" cost to the Trust for a patient who has No Criteria to Reside but remains in an acute hospital bed?

Please see the table below for the average cost per bed day for each of the years required:

Year	Cost per Bed Day
2025/26	£ 411
2024/25	£ 399
2023/24	£ 380

The bed day cost includes all ward costs plus overheads such as patient meals, housekeeping, utility costs & corporate overheads. It does not include any therapy, diagnostic or medical staffing costs associated with patient treatment. The costing data does not identify whether patients have no criteria to reside, so these averages are based on costs and activity for patients on medicine and urgent care wards for each year.

3. Readmission Correlation: Does the Trust track readmissions within 30 days that are attributed to "Equipment Provision Failure" or "Inaccurate Prescription / Specification"?

No.

4. Prescriber Feedback: Does the Trust hold data on the number of equipment orders rejected or queried by the community equipment provider due to technical or clinical inaccuracies?

No. We have a clear feedback mechanism to prescribers which are dealt with in a timely way. Our equipment service does not reject orders directly to prescriber as they must go through internal authorisation processes.

5. Formal Training & Competency:

- **Does the Trust have a formal, mandatory training module for staff (OTs, Physios, TAs) who prescribe community equipment for discharge?**

The training is not mandatory, but we have competency programmes set up and individually tailored across teams and services. New Occupational Therapists into our organisation have specific Integrated Community Equipment Service training that is part of their preceptorship.

- **Is this training tracked via a Learning Management System (LMS) or equivalent?**

No, but we have internal tracking mechanisms.

- **Is there a verified competency assessment required before a clinician is granted an active prescribing PIN?**

All Integrated Community Equipment Service pin holders have induction and training. They also sign up to their prescriber responsibilities which is regularly reviewed. Competencies are completed relating to job role and banding.

I trust this information is helpful in its detail or explanation however, if you are dissatisfied with the response, then you have the right to request an internal review. If you wish to seek an internal review, please write to the Freedom of Information Team at esh-tr.foi@nhs.net quoting the above FOI reference number, within 40 working days. Please note the Trust is not obliged to accept a request for an internal review after this time period.

Yours faithfully

Freedom of Information (FOI) Team
East Sussex Healthcare NHS Trust
0300 131 4716
Core Hours of Business: Monday to Friday 9.00am to 4.00pm