

Freedom of Information Request: Our Reference CTHB_260_17

You asked:

1. How many falls prevention teams does your trust operate?
2. How many of these falls prevention teams include a podiatrist? Please state the number of podiatrists employed within each falls prevention team.
3. How many of these falls prevention teams are led by a podiatrist?
4. If the trust does not operate any falls prevention teams, please provide a reason for this.
5. How many patients have been diagnosed with rheumatoid arthritis conditions in your Trust in: (a) 2012/13, (b) [2013/14](#), (c) [2014/15](#), (d) [2015/16](#)
6. How many of those patients were referred to podiatry services following their rheumatological diagnoses in (i) 2012/13, (ii) 2013/14, (iii) 2014/15, (iv) 2015/16

Our response:

Questions 1-4

The Health Board does not have any dedicated falls prevention teams. The model adopted here provides services known as '@home' which offer services to prevent admission and manage people to remain in their own homes; there are also discharge / rehabilitation teams who support discharge following an admission. Cwm Taf's 'StayWell@Home' service provides assessment and support to patients at the Emergency Care Departments (A&E) to help people to return home with the appropriate package of care. There are currently no podiatrists directly employed to work within these teams referred to above, however there are robust mechanisms in place to achieve timely access to podiatry services.

Questions 5 & 6

Within the University Health Board, our clinical systems can only identify a diagnosis from an inpatient/daycase admission via the clinical coding process. Unfortunately, therefore we are unable to provide number of patient diagnosed with chronic diseases such as rheumatoid arthritis. For example, the podiatry services on average for the last three years received in excess of 8,000 referrals. Referrals are categorised at triage for required specialty services and dependant upon the reason for referral. A person with rheumatoid arthritis may require access to core services, specific musculoskeletal (MSK) or acute services.

Therefore, I can confirm that the Health Board does not centrally record this information. The information you require would be recorded within an individual patient's health record as part of their ongoing care. To provide you with this information, would require a manual trawl and significantly exceed the 18 hours time and £450 cost limit set out within Section 12 of the Freedom of Information Act.