



East London
NHS Foundation Trust

Information Governance

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22 December 2021

Our reference: FOI DA4044

I am responding to your request for information received 21 December 2021. This has been treated as a request under the Freedom of Information Act 2000.

I am now enclosing a response which is attached to the end of this letter. Please do not hesitate to contact me on the contact details above if you have any further queries.

Yours sincerely,

Keshia Harvey
Information Governance Manager

If you are dissatisfied with the Trust's response to your FOIA request then you should contact us and we will arrange for an internal review of this decision.

If you remain dissatisfied with the decision following our response to your complaint, you may write to the Information Commissioner for a decision under Section 50 of the Freedom of Information Act 2000. The Information Commissioner can be contacted at:

Information Commissioner's Office
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF

Tel: 0303 123 1113
Web: www.ico.org.uk

Please note that the data supplied is not allowed to be re-used and/or published without the explicit consent of East London NHS Foundation Trust. Please contact the signatory to request permission if this is your intention

Chair: Mark Lam

Chief Executive: Paul Calaminus

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Request:

Name of your NHS Trust / Local Health Board / Health and Social Care Trust:

Answer: East London NHS Foundation Trust.

Question 1. Does your organisation offer patients a prehabilitation programme?

Yes (go to question 2)

No

Answer: Section 1(1) of the Freedom of Information Act 2000 states:

Any person making a request for information to a public authority is entitled—

(a) to be informed in writing by the public authority whether it holds information of the description specified in the request, and

(b) if that is the case, to have that information communicated to him.

No, East London NHS Foundation Trust does not offer patients a prehabilitation programme as it is a mental and community health trust. The Trust does not hold the information requested and it is therefore not applicable.

Question 1a. Are you planning to set up a prehabilitation programme in the next 12 months in your organisation?

Yes (no further questions to complete)

No (no further questions to complete)

Comments:

Answer: Section 1(1) of the Freedom of Information Act 2000 states:

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Question 2. For how long has your prehabilitation programme been running?

<1 year

1-3 years

>3 years

Question 3. Please provide the name and contact details of your organisation's prehabilitation lead/s (enter more than one name, email address and telephone number if necessary):

Question 4. The prehabilitation programme is being offered to patients undergoing:

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Please tick all that apply.

- Orthopaedic surgery
- Cardiac surgery
- Thoracic surgery
- Vascular surgery
- Gastro-oesophageal surgery
- Hepatobiliary surgery
- Colorectal surgery
- Urological surgery
- Gynaecological surgery
- Chemotherapy
- Radiotherapy
- Other (please specify)

Question 5. For surgical specialties that involve cancer and benign disease, prehabilitation is offered to:
Please tick all that apply.

- Cancer patients only
- Cancer and non-cancer patients
- Not applicable

Comments:

Question 6. What does your prehabilitation programme include and where / how is it delivered?

Please tick all that apply.

| | In hospital | In community | Refer to GP | Phone or video sessions | Online live group sessions | Resources provided for self-delivery | Other mode of delivery (e.g. via an interactive App) | Not included in programme |
|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------|--------------------------------------|--|---------------------------|
| Exercise | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Respiratory exercises | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Incentive spirometry | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Nutrition advice | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Oral nutritional supplements | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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| | | | | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Smoking cessation advice | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Alcohol cessation advice | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Psychological support | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Medical optimization of co-morbidity (e.g., diabetes, cardiovascular disease, anaemia) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Education (to improve patient knowledge, self-efficacy and resilience) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other component | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Question 7. Has the delivery of your prehabilitation programme changed due to the COVID-19 pandemic?

- Yes
- No

If yes, please state how:

Question 8. Which of the following clinical specialties are involved in delivering your prehabilitation programme?

Please tick all that apply.

- Anaesthetists
- Surgeons
- Clinical nurse specialists
- Dietitians
- Physiotherapists
- Exercise instructors
- Occupational therapists
- Rehabilitation/therapy support staff
- Clinical psychologists
- None of the above
- Other (please specify)

Question 9. Which of the following risk factors are patients screened for before starting prehabilitation?

Please tick all that apply.

- Physical fitness (e.g., CPET testing / incremental shuttle walk test)
- Nutrition (e.g., weight loss, poor food intake, body mass index)
- Psychological risk factors (e.g., anxiety, depression)
- Co-morbidities
- Smoking/ alcohol intake
- None of the above
- Other (please specify)

Question 10. At which point in the treatment pathway are patients referred to your prehabilitation programme?

Please tick all that apply.

- Pre-operative assessment
- Outpatient appointment following the MDT
- Other (please specify)

Question 11. Do you collect any of the following as part of a service audit, quality assurance or improvement framework?

Please tick all that apply.

- Clinical outcome data (e.g., mortality, complications, length of hospital / intensive care stay, readmission to hospital, etc.)
- Patient-reported outcome data (e.g., patient satisfaction, quality of life, etc.)
- Adherence to the prehabilitation programme
- The service is not currently audited
- Other (please specify)

Question 12. Do you use any of the following to assess patient adherence / engagement with the prehabilitation programme?

Please tick all that apply.

- Patient diaries
 - Regular communication via email or telephone, or an app or video consultation
 - Patient attends the hospital regularly during the programme
 - We do not currently collect patient adherence data
 - Other (please describe)
-

Question 13. Who funds your organisation's prehabilitation service?

Please tick all that apply.

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- Commissioned service**
- Charity (e.g., Macmillan)**
- Part of a research study**
- The service is not funded as a prehabilitation service**
- Other (please describe)**

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