

Dear Sir/Madam

Thank you for your Freedom of Information request concerning Cardiac Physiology Workforce and Service Pressures.

The Trust can provide the following information:

Please see below

If you have any queries about this response please contact the information governance manager at foi@homerton.nhs.uk , in the first instance. If, following that, you still have any concerns, you may contact the Information Commissioner either by letter, FOI/EIR Complaints resolution, Wycliffe House, Water Lane, Wilmslow, Cheshire SM9 5AF, or by email www.informationcommissioner.gov.uk to take them further.

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Yours sincerely

James Cook
Information Governance Administrator

James Woollam
Interim -Information Governance Manager

Cardiac Physiology Workforce & Service Pressures Survey

Survey Completed by: (Please print name)	Priya Margaret Joseph
Job Title:	Senior chief Cardiac Physiologist
Contact email:	priyamargaret.joseph@homerton.nhs.uk
Contact Tel No:	02085107211
Name of Head of Dept:	Priya Margaret Joseph

About Your Services: What diagnostic & therapeutic services does your department provide/support? *Please tick as many boxes as are applicable.*

Non-Invasive

	<i>Diagnostic Test</i>		<i>Notes & Comments</i>
1	ECG		yes
1A	Direct Access ECG <i>e.g. GP sends in patient for ECG.</i> If you provide direct access ECG who interprets the ECG before it is sent back to the GP?		Yes. Cardiology doctor interprets them
	Consultant Cardiologist		
	Registrar		
	Junior Doctor (SHO/FY2)		
	Cardiac Nurse Specialist		
	Cardiac Physiologist		
	Other		Associate specialist Cardiology
	No interpretation is done		
2	Exercise Tolerance Testing		Yes
3	Treadmill/Cycle VO₂ Max Testing		No
4	Stress Test + Nuclear Imaging <i>e.g. Thallium, Mibi, Adenosine Mibi</i>		No
5	PET Stress Test		No
6	24 Hr Holter		Yes
6a	Direct Access 24 Hr Holter <i>e.g. GP sends in patient for 24 Hr Holter.</i>		Yes
6b	Direct Access 24 Hr Holter Analysis <i>e.g. GP practice put Holter on patient but it is sent to your department for analysis</i>		No
7	24 Hr BP Monitoring		Yes
7a	Direct Access 24 Hr BP Monitoring <i>e.g. GP sends in patient for 24 Hr BP Monitoring.</i>		Yes
7b	Direct Access 24 Hr BP Analysis <i>e.g. GP practice put BP monitor on patient but it is sent to your department for analysis</i>		No
8	Echocardiography		Yes
9	Paediatric Echocardiography		No
10	Transoesophageal Echocardiography		Yes
11	Exercise Stress Echo		Yes
12	Dobutamine Stress Echocardiography		Yes
13	Tilt Table Testing		No

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14	Signal Averaged ECG		No
15	Microvolt T Wave Alternans		No

Invasive

	<i>Diagnostic Tests & Treatment</i>		<i>Notes & Comments</i>
16	Cardiac Catheterisation		No
16a	Cardiac Catheterisation – right sided		No
17	Cardiac Angioplasty		No
17a	Primary PCI <i>e.g direct from A&E or Ambulance</i>		No
18	Valvuloplasty		No
19	Intravascular Ultrasound (IVUS)		No
20	Electrophysiology studies		No
21	3D Cardiac Mapping		No
22	Ablation Therapy		No
23	Single Chamber Pacing Implants		No
24	Dual Chamber Pacing Implants		No
25	ICD Implants		No
26	BiVentricular ICD Implants		No
27	Cardiac Resynchronisation Devices		No
28	Implantable loop recorders		no

Others

Are there other procedures your department and staff are involved with e.g. Stem cell research, or other areas of innovation

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About Your Workforce:

In this section I am seeking to understand how many staff you have in post versus your actual funded establishment and hence the number of vacancies you have and whether these vacancies are filled by agency/locum staff or left empty.

A4C Grade	WTE Budgeted	WTE in Post	No of vacant posts		Notes
			Filled with agency	Empty	
Band 9					
Band 8D					
Band 8C					
Band 8B	1	1			
Band 8A	1	1			
Band 7	1	1			
Band 6	1.6	1.6			
Band 5	2	2			
Band 4					
Band 3	3	3			
Band 2	1.5	1.5			

This section is specifically about your department's skill gaps:

How many training posts do you have?	No
Are all your training posts filled?	
What college do your students attend?	
How are the student posts funded? e.g. within budget, external sponsorship	
Are your student posts supernumerary to the workforce?	
Is your department able to offer regular training for its students or does it tend to be ad-hoc based on service pressures/staffing shortages?	Adhoc based on service.
Where are your skill gaps and workforce pressure points? e.g. echo, cath lab, EP, device f/up. <i>Please list in order of highest</i>	We do not have any vacancy at present

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<i>priority</i>	3.Tape
How are you attempting to address these staffing issues? Do you have any innovative workforce initiatives	We do some overtime or Saturday clinics
Do you have any demand and capacity pressures in your department e.g. waiting times for echo or EP study? If yes, is this due to activity growth? And/or staff shortages?	For Echocardiograms. There is a mismatch between the capacity and demand. Mainly due to activity growth.
If your department does have waiting time pressures how are these dealt with? <i>e.g. extra sessions undertaken in the evening, at weekends, additional locum staff or outsourcing.</i>	Evening and weekends

Are there any additional comments that you would like to make?

Thank you very much for completing this Information Request/Survey

If you are interested in receiving further information about this survey then please tick the box and provide your details.

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Workforce & Service Pressures Survey**

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