

Our ref: IG/FOI/FOI.106.24

12 December 2024

Sent via email to: [REDACTED]

Dear [REDACTED]

## Request under the Freedom of Information Act 2000

I write further to your request for information which was received on 11 November 2024 and further information received 12 November 2024, to confirm, in accordance with S.1(1)(a) of the Freedom of Information Act 2000, that Powys Teaching Health Board (PTHB) partly holds the information that you require. For ease of reference your request is set out below and my response follows each question individually.

Your Freedom of Information (FOI) Request and Powys Response (Bold):  
Freedom of Information (FOI) Request on Allergy Recording in Electronic Patient Records (EPR) in NHS Trusts.

### **Section 1 – General Information**

**Please Note: You may always wish to visit our website for further general information: [Home - Powys Teaching Health Board](#)**

Q1. Trust Name: **Powys Teaching Health Board (PTHB)**

Q2. Type of Healthcare Facilities.

District General Hospital (DGH)	
Specialty Hospital	
Private Hospital	
Community Hospital	<b>Yes</b>
Other (Please Specify)	

Q3. Demographic of Hospital Care.

Adult Hospital	<b>Yes</b>
Paediatric Hospital	
General Hospital (Both paediatric and adult)	

Pencadlys  
Tŷ Glasbury, Ysbyty Bronllys,  
Aberhonddu, Powys LD3 0LU  
Ffôn: 01874 711661



Headquarters  
Glasbury House, Bronllys Hospital  
Brecon, Powys LD3 0LU  
Tel: 01874 711661

GP surgery	
Other (Please Specify)	

Q4. Respondent's Role in the Trust:

Medical Records Manager	
IT Specialist	
Clinician	
Administrator	
Other (Please Specify)	<b>Pharmacist</b>

Q5. Does your Trust use electronic patient records (EPR)? **See note below.**

Yes	
No	

**Please note: Q5 -Q 10 I can confirm Powys Teaching Health Board does not use a single Electronic Patient Record (EPR) but uses several systems:**

- **Welsh Nursing Care Record**
- **Welsh Clinical Portal**

Q6. Which EPR system does your Trust use? **See note above Q5**

Cerner	
Epic	
System C	
Dedalus	
Altera	
Other (Please Specify)	

### **Section 2 – Allergy Recording System**

Q7. Does the EPR system used by your Trust include a specific section for recording food, drug, latex, and other allergies?

<b>Yes</b>	<b>X</b>
No	

Q8. If yes to question 7, how is the initial allergy information typically entered into the system? (Select all that relevant)

Manually by Doctor	<b>X</b>
Manually by Pharmacist	<b>X</b>
Manually by Nurse	<b>X</b>
Manually by Dietitian	<b>X</b>
Automatically from Previous Records	
Manually by Administrative Staff	<b>X</b>
Other (Please Specify)	

Q9. 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)	<b>X</b>
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Administrative Staff	<b>X</b>
Pharmacists	<b>X</b>
IT/Technical Support Staff	
Don't Know	
Other (Please Specify)	

Q10. 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)	
Not highlighted/ alerted on the system	<b>X – Does not prompt a user to inform of allergies but is displayed on the record.</b>

Q11. 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	<b>X</b>
Other (Please Specify)	

Q12. If training is provided on allergy documentation, does it specifically cover different types of allergies in the training materials?

**Not applicable, see Q11 above.**

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	

Q13 Does your Trust have a Local Guideline or Standard Operating Procedure (SOP) in place covering allergy documentation on the EPR?.

Yes	
No	<b>X</b>
Don't know/ Unsure	

Q14. If yes to Question 13, does this guideline/ SOP include documentation for allergens below? (Select all that relevant). **Not applicable, see Q13 above.**

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

Q15. 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	<b>No</b>

**Q15 & Q16. Due to the rural and sparsely populated nature of Powys, we do not have District General Hospital (DGH) services within the county. Our residents access their acute and specialist services including specialist allergy advice for paediatric and adult patients in DGH provided by neighbouring health boards in Wales and neighbouring NHS Trusts in England.**

Q16. 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	<b>No</b>

### **Section 3 – Allergy Incidents**

In this section, I 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. Our local risk team recommends that you gather the following information for your incident reporting system before answering the following questions:

1. Drug allergy incidents- Allergen, Age, Level of harm.
2. Food and other non-drug allergy incidents- Allergen, Age, Reactions, If reported as serious incident, Level of harm, Is the allergen previously documented in patients' note, Is the allergen correctly documented on EPR?
3. Common causes identified on food and other non-drug allergy incidents reported.

#### Tips:

We recognise that many Trusts may not have a specific category for food and other non-drug allergies in their incident reporting portals. However, we have identified a few related categories that are often associated with the documentation of these incidents, including:

1. Food allergens incidents:
  - Insufficient help with eating and drinking
  - All other medication incidents (errors with prescribing, administration, follow-up etc.)
2. Medication allergen incidents:
  - All other medication incidents (errors with prescribing, administration, follow-up etc.)

- Other injury/accident
- Inadequate or inappropriate medical care

3. Other search terms including- "anaphylaxis", "allergy", "food allergy", "allergic", "urticaria", "urticarial", "hives", "angioedema", "anaphylactic", "non-drug allergy", "adrenaline", "wheezing", "stridor", "EpiPen", "antihistamine"

4. Consider other search terms for non-drug allergy incidents including "Latex", "Chlorhexidine", "Povidone iodine", "Macrogol", "PEG-polyethylene glycol", "Polysorbate 20", "Polysorbate 80", "Mannitol", "EDTA", "Tromatamol", "Trisimatamol", "Metacresol", "Arginine"

Q17. Does the incident reporting platform have a specific category for recording food or other non-drug allergy incidents?

Yes	<b>Yes</b>
No	

Q18. 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	<b>Yes</b>
No	

Q19. 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	
<b>10 - 19, please specify</b>	<b>14</b>
≥ 20, please specify	
Don't know	

Q20. If yes to question 18, please indicate the number of incidents for each category: [Numerical Response]

<b>Drug allergy incidents</b>	<b>14</b>
Food allergy incidents	
Incidents to other allergic substances	
Don't know/ unaware	

Q21. 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). **10 years 2014 – 2021.**

Q22. 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, >17yo, 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	

**Q22 - Q26. I can confirm that Powys Teaching Health Board (PTHB) does not centrally collect the information requested above. To answer your question this would require a manual trawl of patient records from 2021 to date. We estimate that the cost of complying with your request would exceed the fees limit of £450 set by the Freedom of Information Act. We estimate that one person would need to spend 3½ working days to determine whether the Health Board holds the information, and locating, retrieving, and extracting the information. Under section 12 of the Freedom of Information Act the Health Board is therefore not obliged to comply with this part of your request.**

Q23. 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 food allergy OR other non-drug allergy incidents reported	

Q24. 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	

Q25. 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	

Q26. 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	

### **Feedback and Improvement**

Q27. What challenges, if any, does your Trust face in accurately recording and managing allergy information in EPR systems?

**The Health Board faces several challenges in accurately recording and managing allergy information within EPR systems. One key issue is the use of multiple systems for documenting allergy data, leading to inconsistencies and duplication, which make it difficult to maintain a single, reliable source of truth. Data quality is another concern, as manual entry processes can result in errors such as misclassifications or incomplete documentation. Additionally, interoperability limitations between systems hinder the seamless transfer and synchronisation of allergy information, creating data silos that can potentially disrupt clinical workflows. Inconsistent staff training on how and where to record allergies further exacerbates these challenges, leading to variability in data entry practices and sometimes incomplete information.**

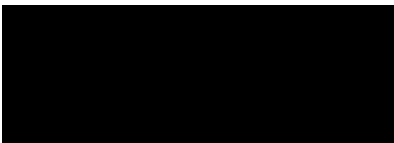
Q28. What improvements do you suggest could be made at a national level to better manage allergy information in patient records?

**Improving the management of allergy information across Wales requires a cohesive national approach. Standardising data entry and terminology across all healthcare settings would enhance consistency and reliability, while interoperable digital systems would enable seamless sharing of allergy records, reducing silos and improving patient safety. A centralised national allergy database could serve as a single source of truth, ensuring accurate, real-time data access for clinicians. National training programmes for healthcare professionals, focusing on accurate documentation and distinguishing between allergies and intolerances, would further improve data quality.**

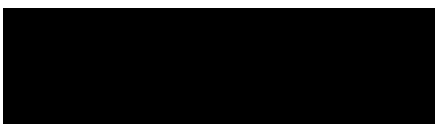
Under the terms of the Health Board's Freedom of Information procedure, individuals seeking access to recorded information held by the Health Board are entitled to request an internal review of the handling of their requests. If you would like to complain about the Health Board's handling of your request, please contact us directly at the address below or register your complaint via [powysfoi.foi@wales.nhs.uk](mailto:powysfoi.foi@wales.nhs.uk)

If after Internal Review you remain dissatisfied you are also entitled to refer the matter to the information commissioner at the Information Commissioner's Office (Wales), 2nd Floor, Churchill House, Churchill Way, Cardiff, CF10 2HH. Telephone Number: 0330 414 6421.

Yours sincerely



**Kate Wright**  
**Medical Director**



**David Farnsworth**  
**Assistant Director, Community Services Group**

Rydym yn croesawu derbyn gohebiaeth yng Nghymraeg. Byddwn yn ateb y fath ohebiaeth yng Nghymraeg ac ni fydd hyn yn arwain at oedi.

We welcome receiving correspondence in Welsh. We will reply to such correspondence in Welsh and this will not lead to a delay.