

2 July 2025

Our Ref: FOI 1189

Dear

**Freedom of Information Act 2000
Information in Relation to Endoscopes**

I am writing to confirm that the South Eastern Health & Social Care Trust (the Trust) has now completed its search for information relating to the above, which you requested on 21 May 2025. Please accept my apologies for the delay in responding to your request. Thank you for your understanding and forbearance.

A response to questions 1 – 6, 8, 10 & 11 has been provided by the Nursing and Midwifery, Allied Health Professionals and User Experience Directorate and is attached in Appendix A.

In relation to questions 7 ***‘What is the current endoscope transport system used and who is the supplier?’*** & 9 ***‘What is the current endoscope track and trace system used?’*** I would like to advise you that the Trust has decided not to release the information that is held for the following reasons:

The information requested in questions 7 & 9 is exempt from release under Section 31 and Section 38 of the Freedom of Information Act 2000.

These are all qualified exemptions and so a Public Interest Test was carried out to decide if the information should be released or not. Having weighed up the factors for and against release, it was decided to withhold this information because the disclosure of such information would:

- a) (Section 31) Leave the Trust patients, clients & staff more vulnerable to crime
- b) (Section 38) permits the withholding of information if there is a risk to Health and Safety of Individuals within the Trust. To withhold there must be a likelihood of endangerment to the physical or mental health of any individual

Section 31 – Law Enforcement Section

Section 31(1)(a) states that information is exempt if its disclosure is likely to prejudice the prevention or detection of crime. ICO guidance states that this can be used to protect information on a public authority’s systems which would make it more

vulnerable to crime. It can be used by a public authority that has no law enforcement function:

- To protect the work of one that does
- To withhold information that would make anyone, including the public authority itself, more vulnerable to crime

Section 38 – Health and safety

Section 38 states that as a security attack may lead to the placing of patient and client information into the public domain, the release of the requested information could potentially lead to harm for a number of patients (in a mental health context or may lead to physical harm)

The Trust believes there is a link between the risk endangerment for data subjects and the disclosure of the requested information. There would likely be a substantial detrimental effect on the physical or mental health of patients and clients, should the requested information be released

In accordance with the Freedom of Information Act 2000 this letter acts as a Refusal Notice in respect of questions 7 & 9.

If you are unhappy as to how this request has been handled, you have the right to seek a review within the Trust in the first instance. You should write to the Information Governance Department, Lough House, Ards Community Hospital (informationgovernance@setrust.hscni.net) within two months of the date of this response and your complaint will be considered and a response provided, within 20 working days of receipt.

If, after receiving a response, you remain unhappy, you can refer your complaint to the Information Commissioner at The Information Commissioner's Office –Northern Ireland, 3rd Floor, 14 Cromac Place, Belfast, BT7 2JB. It is important to note that if you refer any matter to the Information Commissioner, you will need to show evidence of having gone through the Trust's internal review procedure to try to resolve the matter with the Trust in the first instance.

If you have any queries about this letter, please do not hesitate to contact me. Please remember to quote the reference number above in any future communications.

Yours sincerely

Olivia Robinson
Information Governance Officer

Q1. In the last quarter, what percentage of the following flexible endoscopes:

- **Gastrosopes**
- **Colonoscopes**
- **Duodenoscopes**

were returned to the manual cleaning process because they were not used within 3 hours after removal from the endoscope washer disinfectant (EWD) or automatic endoscope reprocessor, as per BSG and ESGE guidelines.

A1. Please see Table 1 below, for the percentage of flexible endoscopes returned in the last quarter.

Table 1

Flexible Endoscope	Percentage
Gastrosopes	3%
Colonoscopes	3%
Duodenoscopes	1%

Q2. In the last year, how many flexible endoscopes required emergency out of hours cleaning?

A2. In the last year, four flexible endoscopes required emergency out of hours cleaning.

Q3a. Are endoscopes reprocessed within the hospital or outsourced to a separate decontamination facility?

A3a. Yes, all endoscopes are decontaminated within the Trust and are therefore not outsourced to a separate decontamination facility.

Q3b. If reprocessing is outsourced, which facility is used?

Q3c. How often and at which times of the day, are endoscopes collected and returned to the unit from the external reprocessing unit?

Q3d. How are endoscopes transported between the hospital and external reprocessing unit?

A3b-d. N/A.

Q4. Are there on call decontamination staff?

A4. Yes, there are on call decontamination staff, as there is an out of hours on call service provided by the Trust.

Q5. *How is the time elapsed between completing pre-cleaning and starting the manual clean/AER quantified and recorded?*

A5. The Trust does not record the requested information and therefore unable to provide this information. In accordance with the Health Technical Memoranda (HTM) guidance, the time elapsed between completing pre-cleaning and starting the manual clean/AER is not required to be quantified and recorded.

Q6a. *Do you have a delayed reprocessing protocol in place?*

A6a. All endoscopes are decontaminated in accordance with relevant HTM guidance.

Q6b. *If so, is adherence to this protocol monitored and what system is used to monitor this?*

A6b. The Trust Central Sterile Supply Department (CSSD) /Endoscopy hold the quality management accreditation, ISO 13485 2016 and are audited on all processes, on an annual basis by an independent body.

Q8. *How much is spent per year on endoscope transportation systems?*

A8. The Trust is unable to provide the requested information as the spend for endoscope transportation systems is not recorded within its own specific category. To obtain this information would require a manual review of records.

This would exceed the 'Appropriate Limit' as defined by the Freedom of Information Act 2000. The Trust therefore exempts the release of this information under Section 12(1).

12.(1) Section 1(1) does not oblige a public authority to comply with a request for information if the authority estimates that the cost of complying with the request would exceed the appropriate limit.

In accordance with the Freedom of Information Act 2000 this statement acts as a Refusal Notice in respect of questions 8 &10.

Q10. *How much is spent per year on endoscope track and trace systems?*

A10. The annual support costs are approximately £19,750.

Q11. *Would the endoscopy unit be happy to be contacted regarding trialling new endoscope infection prevention consumable products? If yes, please provide a contact name and details.*

A11. Yes, the endoscopy unit would be happy to be contacted regarding trialling new endoscope infection prevention consumable products. The contact details are:
Donna English