Our Ref: NG/RM/25445
Date: 19th January 2026

Nicola Griffiths
Deputy Director of Governance
North Staffordshire Combined Healthcare NHS Trust
Lawton House
Bellringer Road
Trentham
ST4 8HH

Reception: 0300 123 1535

Dear

Freedom of Information Act Request

I am writing in response to your e-mail of the 15th November 2025**.** Your request has been processed using the Trust's procedures for the disclosure of information under the Freedom of Information Act (2000).

Requested information:
I am writing under the Freedom of Information Act 2000 to request information on clinical IT systems used across hospitals within the Trust. Specifically, I am seeking details across three categories of systems (systems definition provided below):

- Electronic Patient Record (EPR) systems
- Patient Administration Systems (PAS)
- Other Clinical IT systems (e.g., PACS, RIS, LIS etc.)

Type A: EPR (Electronic Patient Record) systems

1. Total spend on the core EPR system in each Hospital across the Trust in 2024? (ongoing run costs only; please exclude implementation if still in progress in any of the hospitals). **Please see Appendix 1 attached.**

2. For each hospital, in a tabular format, please provide:
   a. Name of the core EPR system used (e.g., EPIC, Cerner, SystemC, Nervecentre, Dedalus, other)? **Dedalus Lorenzo.**

   b. Annual cost in 2024 for the EPR system, broken down into:
      i. Total cost
      ii. Software license
      iii. Maintenance
      iv. Professional services
      v. Others

      Please see Appendix 1 attached.
      The lines with the dates are Software License & Maintenance, highlighted in green are all Professional services.

   c. Scope of the contract (i.e., which additional clinical modules are included)
   d. If available, spend broken down by for the core EPR system and each additional module separately.
      There is no breakdown of costs by module or by hospital, it's the single PAS/ EPR for all services.

3. For the most recent EPR implementation (in each respective hospital), please provide the following information in a tabular format:
   a. Tender date. **N/A**.
      Contract start and end date. **Please see Appendix 1 attached.**
      Whether the contract is annually renewed. **Please see Appendix 1 attached.**
   b. Planned final implementation date. **N/A**
   c. Which provider the hospital used previously. **In- house**

   d. Total budget and its components.
      i. Total value of contract (£)
      ii. Contract term
      iii. Software license fees (upfront and ongoing)
      iv. Annual contracted pricing growth
      v. Implementation fees
      vi. Allowance for new features/ development (if any) - e.g., committed budget for new software features/ development which is not yet identified
      vii. Internal training/ resources etc. as relevant.
      Please see Appendix 1 attached.

   e. Procurement framework used. **No framework was used; the Trust took the national solution at the time.**

   f. Other systems integrated with the EPR. **There are a variety of systems and solutions integrated in a variety of different ways. There is no singular list of systems integrations to provide an answer to this question from.**

   g. Department(s) that provided the funding.
      - % of ERP budget comes from the ICB vs. Trust vs. others (please specify name). **100% from the Trust.**

   h. Planned date to kick off next tender process
      - Whether there are plans to replace the system. **No**

Type B: PAS (Patient Administration) systems

1. Total spend on PAS systems in each Hospital across the Trust in 2024. (ongoing run costs only). **Please see Appendix 1 attached.**

2. For each hospital, in a tabular format:
   a. Name of the PAS system used / provider (e.g., EPIC, Cerner, SystemC, Nervecentre, Dedalus)? **Dedalus Lorenzo.**

   b. Annual cost for the PAS system, broken down into:
      i. Total cost
      ii. Software license
      iii. Maintenance
      iv. Professional services
      v. Others.
      Please see Appendix 1 attached.
      The lines with the dates are Software License & Maintenance, highlighted in green are all Professional services.

There is no breakdown of costs by module or by hospital, it's the single PAS/ EPR for all services.

i. Procurement framework used. **No framework was used; the Trust took the national solution at the time.**

Contract start and end date. **Please see Appendix 1 attached.**

j. Other systems integrated with the PAS. **There are a variety of systems and solutions integrated in a variety of different ways. There is no singular list of systems integrations to provide an answer to this question from.**

Type C: Other HC Clinical IT systems like Medical imaging (PACS), Radiology Information System (RIS), Laboratory Information Systems (LIS), etc.

1. Total spend for each "Other Clinical IT system" in each Hospital across the Trust in 2024? (ongoing run costs only).

2. For each hospital, in a tabular format:
   a. Which PACS/ LIS/ RIS/ Other system provider does the hospital use respectively (e.g., Sectra, Cris, Clinisys)?
   b. Annual cost for the PACS/LIS/RIS/Other system, broken into:
      i. Total cost
      ii. Software license
      iii. Maintenance
      iv. Professional services
      v. Others
   c. Procurement framework used
   d. Contract start and end date for each supplier

The Trust does not have PACS/ LIS/ RIS etc.

Systems Definition

- Electronic Patient Record (EPR) provides comprehensive digital systems for hospitals and healthcare providers to manage patient data, streamline workflows, and improve care delivery through features like clinical documentation, patient portals, billing, and interoperability.
- Patient Administration Systems (PAS) are core administrative systems used to manage demographic information, patient pathways, appointment booking, RTT, referrals, waiting lists, scheduling, admissions, and discharge etc.
- Other Clinical IT Systems cover specialist clinical systems that support diagnostic, imaging, and laboratory workflows. These typically include:
  - PACS (Picture Archiving and Communication System): medical imaging storage, viewing, and reporting
  - RIS (Radiology Information System): radiology workflow management
  - LIS (Laboratory Information System): pathology test ordering, processing, and result management
  - Other specialist systems used within clinical departments (radiology, pathology, cardiology, etc.)

If you are dissatisfied with the handling of your request, you have the right to ask for an internal review of the management of your request. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to: Dr Buki Adeyemo, Chief Executive, North Staffordshire Combined Healthcare Trust, Trust Headquarters, Lawton House, Bellringer Road, Trentham, ST4 8HH. If you are not content with the outcome of the internal review, you have the right to apply directly to the Information Commissioner for a decision. The Information Commissioner can be contacted at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF.

Yours sincerely

Nicola Griffiths
Deputy Director of Governance

Supplier Name	Document Reference	Narrative	Transaction Due Date	Amount
DH OPCO UK LTD	HGB-FT24-000010		19/11/2024	360,000.00
DH OPCO UK LTD	HGB-24-000797	22.11.24- 21.02.25	25/10/2024	218,179.37
DH OPCO UK LTD	HGB-24-000540	22.08.24- 21.11.24	22/07/2024	216,217.96
DH OPCO UK LTD	HGB-24-000507	01.01.24- 31.12.24	09/07/2024	117,656.71
DH OPCO UK LTD	HGB-24000511	22.05.24 -21.08.24	09/07/2024	214,602.66
DH OPCO UK LTD	HGB-24-000118		01/03/2024	34,560.00
DH OPCO UK LTD	HGB-24-000006	22/02/24-21/05/24	29/01/2024	204,511.79
DH OPCO UK LTD	HGB-SI23000850		30/11/2023	4,594.46
DH OPCO UK LTD	HGB-SI23000667	23/11/23-21/02/24	26/10/2023	209,418.52
		Total		**1,579,741.47**