



Request under Freedom of Information Act 2000

Thank you for your request for information which we received on 13 July 2021.

I am pleased to confirm the following.

1. How many CPAP masks/machines/equipment are available in the hospital?

We currently have 31 NIV machines, capable and CPAP available to the respiratory team. This is comprised of three models with varying degrees of functionality, modes etc. Although during the COVID pandemic we had access to the domiciliary CPAP machines (we did not use these) we also had access to DOCC CPAP capable machines, and these were used quite fluidly through the trust. We also had/ have access to the DOH/ PHE assets.

2. How are CPAP masks/machines/equipment tested for operational accuracy and that they are fit for use?

The machines have a full service yearly by EBME. The newer machines also perform a selfcheck every time they are turned on. We also must trust the information given to us by the manufacturer. Clinically the patients have regular physical examinations/ reviews and testing. Any question as to the machines function it is taken out of service and sent to EBME.

3. How regularly are CPAP masks/machines/equipment tested?

The machines have a yearly service. They have a self-test performed each time they are turned on. The masks/ circuits are checked every time they are used (3+ times per day) and changed as per manufacturer guidelines.

4. How are staff trained for application of CPAP masks/machines/equipment to patients? Staff are/ were trained by the manufacturer using TEAMs. however, we have practice development and an ANP service that provide regular teaching sessions and support as required.

5. How are CPAP masks/machines/equipment tested for leaks?

The masks and circuits are checked for leaks on application and the "leak" monitored continuously through the machine as well as visual inspection and patient experience.

6. What is considered an unacceptable level of leak with CPAP masks/machines/equipment?

This is hard to answer precisely as different machines, mask and circuits have different levels of acceptable leak. However, we aim for an acceptable leak range of 5- 40 (L/ min) aiming for 20 L/ min,

7. What is the operational protocol when a leak is discovered with CPAP

As a teaching hospital, we conduct education and research to improve healthcare for our patients. During your visit students may be involved in your care, or you may be asked to participate in a clinical trial. Please speak to your doctor or nurse if you have any concerns.

masks/machines/equipment?

We would consider a leak above 40L/ min as unacceptable, however machines can compensate for leaks greater than this.

- 8. Do CPAP masks/machines/equipment have leak alarms? Our NIV machines do have a leak alarm. Masks and circuits do not.
- **9. Can CPAP masks/machines/equipment have leak alarms disabled/silenced?** Yes, the NIV leak alarm can be silenced and adjusted.
- 10. Is it permitted that staff can disable/silence CPAP masks/machines/equipment leak alarms? If so, how is the safety of the patient monitored if masks/machines/equipment leak alarms are disabled/silenced?

Staff can silence and disable the alarms as this feature cannot be locked out of the machines, however it is not a practice that is encouraged.

11. If a patient is not for escalation of treatment, is it permissible that masks/machines/equipment leak alarms are turned off/disabled/silenced? No, it is not permissible to turn off any alarm if the patient is not for escalation but is being actively treated. If the patient is EOL alarms maybe modified however we strongly do not encourage the turning off alarms.

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If you need any further assistance, please do not hesitate to contact us at the address above.

Yours sincerely,

Freedom of Information Co-ordinator For and on behalf of Milton Keynes Hospital NHS Foundation Trust

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