



Standing Way Eaglestone Milton Keynes MK6 5LD 01908 660033 www.mkuh.nhs.uk

Request under Freedom of Information Act 2000

Thank you for your request for information which we received on Tuesday 25th April 2024. I am pleased to confirm the following.

1. Gestational Diabetes Mellitus Screening Methodology: Please provide details on the current methods used by your Trust to screen for Gestational Diabetes Mellitus.

The trust currently offers routine screening between 24-26 /40 using an Oral Glucose tolerance test.

After 36/40 if screening is indicated women are offered a HbA1c +/- a fasting blood glucose.

5-day HBGM

2. Timing of Screening:

At which gestational week do the majority of pregnant women undergo GDM screening within your Trust?

Between 24-26 weeks.

3. Early Screening for High-Risk Pregnancies:

Do you conduct GDM screening earlier for pregnant women deemed to be at very high risk? If so, please specify the criteria for determining high risk and the gestational week at which such screenings are conducted.

Clients with previous GDM are offered a HbA1c /FBG at booking - If raised, they are treated as GDM as per the RCOG Covid guidelines. If this is normal, they are offered a OGTT between 14-16 weeks which is repeated between 24-26/40 if the early OGTT is normal.

4. Administration of OGTT:

Who is responsible for administering the OGTT within your Trust? Additionally, where is the OGTT typically conducted (e.g., hospital clinic, community health center)?

The client is given the glucose load by the MSW running the OGTT clinic. The client is given the glucose load and advised to drink it within 10 minutes. They are drinking the glucose load while sitting in the waiting room in ANC.

They are not supervised or observed taking the drink.

5. Maternity-Related Risks Recorded in the Trust Risk Log: Please disclose which maternity-related risks are logged in the Trust's risk register or risk log.

Please see below for detail of registered risk on the Risk Register:





Chief Executive: Joe Harrison

Chair: Alison Davis

'IF the increase in workload for the gestational diabetes pathway is not understood THEN there is a risk of increased incident reporting in relating to delay diagnosis of GDM AND an increase in incident reporting of services users being delayed in diagnosis of GDM Impact of risk LEADING TO an increase or maternal and neonatal perinatal morbidity and mortality AND staff unavailability to cover the gestational diabetes service'

6. Bank and agency Spending:

- -Please provide bank spend for midwifery staff for the year 2023, by job grade.
- -Please provide agency spend for midwifery staff for the year 2023, by job grade.

| Midwifery Bank Spend 2023 | | |
|---------------------------|---|------------|
| Band 5 | £ | 195,249.37 |
| Band 6 | £ | 645,336.17 |
| Band 7 | £ | 102,007.24 |
| Total | £ | 942,592.78 |

| Midwifery Agency Spend 2023 | | |
|-----------------------------|---|-----------|
| Band 5 | £ | 22,151.25 |
| Band 6 | £ | 2,462.50 |
| Total | £ | 24,613.75 |

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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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