DISCLOSURE LOG

1 May 2018 - 31 May 2018

Date	Ref No	Information Requested and Response	Links to Additional Information
1-5-18	4049	Please find spreadsheet attached.	Link to spreadsheet
1-5-18	4050	Present main supplier of IOLs for cataract operations.	Emilita oproduoriosi
		Spectrum	
		2. Length of existing contract and end due date	
		The Trust has a rolling contract with Spectrum	
		3. Purchase route via direct hub. If hub, which one? If direct, when was the tender done?	
		The Trust purchase through a hub; Health Trust Europe	
		4. Volume of cataracts per year	
		2015/16 - 963 2016/17 - 1104 2017/18 - 1165	
		Please note included are the number of inpatient spells for patients who were discharged from MKUH between 1st April 2015 and 31st March 2018, and any of the below C75 OPCS Procedure Codes were coded to the inpatient spell as the primary procedure and paired with a secondary code from C71 or C72 codes listed below.	
		C751 Insertion of prosthetic replacement for lens NEC C752 Revision of prosthetic replacement for lens C753 Removal of prosthetic replacement for lens C754 Insertion of prosthetic replacement for lens using suture fixation C758 Other specified prosthesis of lens C759 Unspecified prosthesis of lens	

	1		
		C711 Simple linear extraction of lens	
		C712 Phacoemulsification of lens	
		C718 Other specified extracapsular extraction of lens	
		C719 Unspecified extracapsular extraction of lens	
		C721 Forceps extraction of lens	
		C722 Suction extraction of lens	
		C723 Cryoextraction of lens	
		C728 Other specified intracapsular extraction of lens	
		C729 Unspecified intracapsular extraction of lens	
		We have also counted rare cases where 'C712 Phacoemulsification of lens' was assigned as the	
		primary procedure.	
		Patient admissions have been provided rather than procedures, however, usually only one cataract	
		operation would be carried out per admission.	
		5. Contact details of the Clinical and Purchasing person who head up the decision making processes for IOL choice.	
		Please note individual staff details are exempt under Section 40, Personal Information (where	
		disclosure may contravene the Data Protection Act) unless permission to release is given or the	
		information is already in the public domain.	
2-5-18	4051	1. The number of overseas visitors, migrants and former UK residents who have been charged upfront	
		for healthcare treatment by the Trust since October 2017 (excluding private patients using paid-for	
		services offered by the Trust)	
		2. The total costs charged for the treatments referred to in question 1	
		3. The number of overseas visitors, migrants and former UK residents who have been refused	
		healthcare treatment by the Trust since October 2017 because they did not pay upfront charges that	
		were imposed (excluding private patients using paid-for services offered by the Trust)	
		4. Any data the Trust holds on the reasons for the refusal/inability of the patients referred in response	
		to question 3 to pay the imposed upfront charges	
		5. Any data the Trust holds on the conditions the patients referred to in response to question 3	

		wished to be treated for, or alternatively the treatments that were subject to the imposed charges (these may be grouped into over-arching categories for data protection reasons)
		The Trust does not record the information requested in an easily obtainable format. However, please see figures below which we hope you will find useful.
		Between October 2017 and April 2018: • £163,219 was raised relating to 66 invoices
		£32,241 has been paid for 16 invoices
		£130,979 remains outstanding relating to 50 invoices
3-5-18	4052	I understand your trust uses external providers to deliver some aspects of your trusts ophthalmology service. Please kindly outline which suppliers you utilise and the total amount spent for Insourced or outsourced ophthalmology services during the months of November 2017 – March 2018:
		I can confirm the Trust did not outsource any ophthalmology services during the months of November 2017 – March 2018.
3-5-18	4053	1. Spend on agency recruitment fees for permanent staff (not including salaries) – medical staff
		£10,352.80
		2. Spend on agency recruitment fees for permanent staff (not including salaries) – nursing staff
		£0
		3. Spend on agency recruitment fees for permanent staff (not including salaries) – allied health professionals (AHPs) and health science services (HSS) staff
		£168.86
		4. Spend on agency recruitment fees for permanent staff (not including salaries) – non medical, non clinical (NMNC) staff
		£5,008

3-5-18	4054	1. Internal spend bank staff management
		2017 – 2018 £177k
		Outsourced spend on bank staff management
		N/A - The Trust do not outsource bank staff management.
3-5-18	4055	Please provide your spend on recruitment process outsourcing in the last available full financial year (please note the year in your response).
		All recruitment is done in house therefore there are no outsourcing costs.
8-5-18	4056	Do you have a fracture clinic service at your trust? Yes
		2. If so, do you have a fracture liaison nurse, or fracture liaison services for your patients? Yes
		3. If so, is this service commissioned by the acute trust, or the CCG? Acute Trust
		4. Please provide a list of all the CCGs which commission your services. N/A
		5. If your fracture liason service is commissioned by CCGs, which CCGs commission you to provide the fracture liaison service? N/A
8-5-18	4057	1) How many members of staff (including former members of staff and locum staff working for the Trust) has the Trust investigated using RIPA powers? Please break this down by year.
		2) What type of investigation was done under RIPA? E.g. copies of emails, internet history, etc?
		I can confirm the Trust has not carried out any RIPA investigations in the last 3 years.
8-5-18	4058	1. The name of your supplier for electricity and gas, for each year as far back as possible without incurring unreasonable cost or working time for you.:

		Gas Supplier - Coron Electricity Supplier - I	
		2. The unit rate and	standing charge you are currently being charged by your energy supplier.
		Corona unit rate £0.0 Standing charges CC Combined 'daily rate' EDF unit rate £0.073 Average total unit rate	£L rate £0.00198 £153.65
		3. The cost of your	energy bill for the past 12 months, for electricity and gas.
			Dec 2017 £1,200,223.41 (Inc. VAT) lec 2017 £563,926.34 (Inc. VAT)
8-5-18	4059		orary staff through the trust's staff bank .ocums £1,985k (not sure if they'll want this figure including?
		Spend on temporal Total agency specification	orary staff through agencies end £11,451k
		a. Spend on tempo	orary staff by agency (agency names can be anonymised if necessary)
			£K
		Supplier A	3664.59
		Supplier B	655.62
		Supplier C	426.07
		Supplier D	276.35
		Supplier E	127.85
		Supplier F	125.78
		Supplier G	92.98
		Supplier H	72.88
		Supplier I	69.03
		Supplier J	68.44

		Please provide the following information that you have pertaining to your spend on temporary nursing staff in the last full available financial year (please note the year in your response).	4060	8-5-18
2. Spend on temporary nursing staff through agencies, by band (1-9) £5,269k 8-5-18 4061 Please find attached completed spreadsheet. 9-5-18 4062 Please see spreadsheet attached. Link to Link to Please see spreadsheet attached. 9-5-18 4063 Under the freedom of information please can I request the following information: 1. The name and email address of your Clinical Director of Pathology 2. The name and email address of your Service manager of Pathology 3. The name and email address of your Lead Pathologist The Trust organisational structure can be found on our website at: http://www.mkhospital.nhs.uk/images/comms/BoD/MKUH Org Chart Spring 2017 web.pdf Please note details relating to individual members of staff outside of those on the website are exempt under Section 40 Personal Information (where disclosure may contravene the Data Protection Act). 9-5-18 4064 Please can you let me know: During the last financial year (FY 17/18,) the total amount spent on replacing patients damaged or broken spectacles (glasses,) hearing aids and dental prostheses. A total for all items would be great. There is no need for costs by impairment device type. The Trust does not offer a service that replaces broken spectacles or dental prostheses. These services will be carried out in the community. With regards to hearing aids, the Trust does not record this information. However, in the financial year requested, £125.00 was spent on reimbursements for replacements procured by the patients, and reclaimed via the Losses and Special Payments Committee. These are not items directly		Figures below relate to financial year 2017/18.		
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10-5-18 4065 Please see spreadsheet attached.	<u>ink to spreadsheet</u>		4065	10-5-18
10-5-18 4066 Can you update the attached spreadsheet where we ask about general IT infrastructure please? Link to	ink to spreadsheet template	Can you update the attached spreadsheet where we ask about general IT infrastructure please?	4066	10-5-18

		The Trust has produced a document entitled "IT FOI Answers" which can be found on the website at
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5. When does this contract expires?	
N/A	
6. When does the organisation plan to rev	riew this contract?
N/A	
•	ntract description of the services provided under the includes potential extensions and support and
N/A	
8. What is the organisation's annual energ	gy spend for the following:
a. Electricity - EDF Electricity Jan to Dec 20	017 £1,200,223.41 (inc VAT)
o. Gas - Corona Gas Jan to Dec 2017 £563,	,926.34 (inc VAT)
c. Water - Anglian Water Jan to Dec 2017 £	£276,991 (NIL VAT)
9. What is the total number of meter point	s for Electricity for:
a. Non Half Hourly (NHH) meter points	N/A
o. Half Hourly (HH) meter points	2
10. What is the total number of Gas meter	points?
2	
11. What is the total number of Water meter	er points?
1	

Г	1		
		12. What is the total number of meter points for specialist gases and liquids?	
		N/A	
		13. Can you please provide me with the contact details of the key person responsible for this contract or around energy management.	
		Phil Eagles Associate Director of Estates	
		14. Can you please send me the organisations' energy management strategy/plan that covers 2018?	
		N/A	
14-5-18	4071	Please provide the information for all questions for the calendar years 2012, 2013, 2014, 2015, 2016, and 2017 (if available).	
		How many women accessed pregnancy termination services provided by your NHS organisation in each of the listed years?	
		N/A	
		 How many women accessed pregnancy termination services provided by your NHS organisation in each of the listed years - pre six weeks gestation/between six and 12 weeks gestation/between 12 and 20 weeks/between 20 and 24 weeks/post 24 weeks? 	
		N/A	
		How many women had a termination by mifepristone and misoprostol medication in each of the listed years? '(The abortion pill')	
		N/A	
		I can confirm the Trust do not offer a pregnancy termination service. The Trust will only perform a termination is there a complication with the foetus but not for an unwanted pregnancy.	
		How many centres in your Trust offer pregnancy termination services?	

N/A

What are their locations?

N/A

 How many people accessed contraceptive services provided by your NHS organisation in each of the listed years?

Please contact Milton Keynes CCG to obtain this information. It is not recorded by the Trust.

- How many people accessed STI health services provided by your NHS organisation in each of the listed years?
- How many people accessed HIV or AIDs services provided by your NHS organisation in each of the listed years?

Please note that we are unable to "split" patients into HIV and GUM. The results below are both sets of patients:-

How many people accessed HIV, AIDS, STI health services provided by your NHS organisation in each of the listed years?

Year 2012 Services in 2012 managed by Virgin Care

Year 2013 Managed by Virgin Care Year 2014 Managed by Virgin Care Year 2015 From April 2015 total = 9679

Year 2016 14,469 Year 2017 15,454

How many centres in your Trust offer STI or HIV health services?

One

What are their locations?

Stratford Suite, Milton Keynes University Hospital, NHS Foundation Trust.

12-5-18	4072	I was wondering if you could give us some numbers of patients ie growth in the last say 10 years?	
		The Trust do not hold the information requested in an easily obtainable format.	
		Below is a link to the NHS England website where all statistics on all the monthly Hospital activity data is published on a public domain which might be of interest to the requestor for their purpose. Also included is a link to the Trusts annual reports which may contain data of interest.	
		https://www.england.nhs.uk/statistics/statistical-work-areas/hospital-activity/monthly-hospital-activity/mar-data/	
		http://www.mkhospital.nhs.uk/index.php?view=list&slug=annual-reports&option=com_docman&layout=table&Itemid=646	
15-5-18	4073	I would like to make a Freedom of Information Request (FOI) for financial year 2017-18.	
		I would be very grateful if you could provide me with the following information: -	
		Agency spend on Medical Locums/Doctors	
		£4.442m	
		Agency spend on AHP's (Allied Health Professionals) and HSS (Health and Social Sciences)	
		£1.159m	
		Agency spend on Nursing	
		£4.036m	
		Agency spend on NMNC (Non-Medical, Non Clinical)	
		£1.813m	
		Do you use a Direct Engagement model to engage locum staff?	
		Yes	
		If so, please state the name of the company used	

		247Time What is the expiry date 31st March 2020				
16-5-18	4074	Please find completed q	uestionnaire attache	ed.		Link to questionnaire
17-5-18	4075	Number of patients treated	Rheumatology	Dermatology	Gastroenterology	
		TOTAL	206	30	184	
		Abatacept [Orencia]	0	0	0	
		Adalimumab [Biosimilar]	0	0	0	
		Adalimumab [Humira]	130	18	73	
		Apremilast [Otezla]	0	0	0	
		Baricitinib [Olumiant]	0	0	0	
		Brodalumab [Kyntheum]	0	0	0	
		Certolizumab [Cimzia]	1	0	0	
		Dimethyl fumarate [Skilarence]	0	0	0	
		Etanercept [Enbrel]		0	0	
		Etanercept Biosimilar [Benepali or Erelzi]	6	0	0	
		Golimumab [Simponi]	3	0	3	
		Guselkumab [Tremfya]	0	0	0	
		Infliximab [Remicade]	4	0	2	
		Infliximab Biosimilar [Inflectra, Remsima or Flixabi]	9	0	88	

		lyakizumah [Taltz]	0	0	10		
		Ixekizumab [Taltz]			0		
		Rituximab	20	0	0		
		[Mabthera]					
		Rituximab Biosimilar	4	0	0		
		[Rixathon or					
		Truxima]					
		Sarilumab [Kevzara]	0	0	0		
		Secukinumab	3	2	0		
		[Cosentyx]					
		Tocilizumab [Ro	13	0	0		
		Actemral					
		Tofacitinib [Xeljanz]	0	0	0		
		Ustekinumab	3	11	1		
		[Stelara]					
		Vedolizumab	0	0	31		
		[Entyvio]					
			•	<u> </u>	•		
		Please note the data giv	en covers the	e period 1 st April 2017 –	31 st March 2018.		
17-5-18	4076	1. Please can you tell n				f the following	
		procedures?		•	•	_	
		A. Hip replacem	ents -	Yes			
		B. Knee replace		Yes			
		C. Cataracts -		The Trust has never und	dertaken any Cataract pr	ocedures for private	
				patients.			
		2. If yes to all or part of			e how much the trust c	harges for:	
		A. Hip replacem		£4,947 (implant extra ch		goo .o	
		B. Knee replace		£3,488 (implant extra ch			
		C. Cataracts –		N/A	iai go,		
		(Please provide fees fo			he self-funded at the t	ruet)	
		(1 10000 provide 1000 10	any or the	p. 55544155 William 641	. So con fanaca at the t	. 401/	
		Patients are charged in I	ine with the t	heatre category in which	n the procedure should fa	all into, with an	
		additional charge for bed	d stay.				
		Professional fees are invoiced separate to the Trusts billing process.					
			•	31			

THEATRE PROCEDURES BY HOSPITAL CATEGORY ACCORDIN	
disposable will be added accordingly	y
Disposable Kit	£ 32
Minor	£ 260
Intermediate	£ 493
Major	£ 884
Major +	£ 1,065
CMO 1	£ 1,673
CMO 2	£ 1,722
CMO 3	£ 1,822
CMO 4	£ 1,910
CMO 5	£ 1,999
Theatre Time: (per hour over run)	£ 134

WARD ACCOMMODATION FOR PRIVATE ADMISSIONS		
Per Day on a shared ward	£	354
Day Bed Unit shared ward	£	305
Ensuite side room (available only in the treatment centre)	£	421
Ensuite side room (Daycase) (available only in the treatment centre)	£	315

3. Please state the average waiting time (as of May 2018) for patients who self-fund for

A. Hip replacements – Variable according to available theatre space Variable according to available theatre space

C. Cataracts – N/A

4. Please state the average waiting time (as of May 2018) for patients who have the following treatments provided by the NHS at the trust:

A. Hip replacements – Approx 35 weeks – data largely unavailable currently due to e-care and

system function

B. Knee replacements - Approx 35 weeks – data largely unavailable currently due to e-care and

system function

C. Cataracts – N/A

		5. Has the trust always enable five years? I understand this in there has been changing direct Trust can deliver self-pay/privat this, if there is a negative effect Typically the Trust does not allowed pressures that are occurring.	may be difficult tive on this over ely insured case – usually due to	t to answer. the years. The research NHS versources available.	rule of thumb work without a lable, then thi	that is now follow any negative effe s work will be su	wed is that if the ect then we do uspended.
18-5-18	4077		Lucentis (ranibizumab) Injections	Avastin (bevacizuma b) Injections	Eylea (aflibercep t) Injections	Illuvien (Fluocinolone) Impants	Ozudex (Dexamethason e) Implants
		Total Vials / Implants					
		Vials / Impants for Wet Age Related Macular Degeneration (wAMD) Vials / Impants for Diabetic Macular Oedema [DMO], Retinal Vein Occlusion [RVO] or other such as mVNV	227	38	288	0	7
		Please note we are unable to se	eparate into indiv	vidual indication	S.		
10 5 10	4070		·			NDD 2	
18-5-18	4078	 Have you invested in No Which information sec Working towards Cyber Have you signed contrequiring that they ach 	eurity framewor Essentials accre actual assuran	k(s) have you indication ces from all the	mplemented e third-party	?	you work with

It is important that all Third Parties protect the Trust's information in line with Trust standards and Government Legislation and therefore when engaging with external suppliers/organisations we ensure that they sign The Trust Third Party Agreement (TPA) which incorporates GDPR and the UK Data protection Bill. Maintaining the confidentiality of our Personal Identifiable Data (PID) and Business Critical information.

4. Have you completed an audit to identify all files or databases that include personally identifiable information (PII) within your organisation?

Yes - Data Flow mapping, Departmental asset registers and System Information asset registers

5. Do you use encryption to protect all PII repositories within your organisation?

Yes

6. As part of this audit, did you clarify if PII data is being stored on, and/or accessed by:

Yes

7. Does the organisation employ controls that will prevent an unknown device accessing PII repositories?

Yes

8. Does your organisation employ controls that detect the security posture of a device before granting access to network resources – i.e. valid certificates, patched, AV protected, etc.

No

9. Should PII data be compromised, have you defined a process so you can notify the relevant supervisory authority within 72 hours?

Yes

		10. Have you ever paid a ransom demand to have data returned / malware (aka ransomware) removed from systems? No To which positions/level does your data protection officer report? i.e. CISO, CEO, etc. Information Governance Manager reports directly to the Board	
18-5-18	4079	1. Does the Trust perform surgery for open fractures? Yes 2. Does the Trust have a specific guideline/policy regarding antibiotic prophylaxis for patients with open fractures? We follow the BOA/ BOAST guidelines for antibiotics which can be found at https://www.boa.ac.uk/	
21-5-18	4080	1. What was your trust spend for temporary community agency nursing in 2017? The Trust does not employ community nurses. Therefore the Trust did not have any spend for temporary community agency nursing in 2017. 2. How many RGN shifts are released to temporary agencies? 3. How many RGN shifts released to agency go unfilled? 4. How many HCA shifts are released to temporary agencies? 5. How many HCA shifts released to agency go unfilled? 6. How many agencies are on your proffered suppliers list for these requirements? It is assumed that questions 2-6 relate to community nursing, therefor the Trust's response to these questions is - not applicable.	
21-5-18	4081	1. How much money was spent on translators in the financial years 2017/18, 2016/17, and 2015/16? Can I have the numbers broken down by year please? 2015 - 2016 £59.0k	

2016 - 2017 £101.9k 2017 - 2018 £114.4K

2. How many times were translators required over the three years? Can I have the numbers broken down by year please?

2017/2018 - 555 times

Please note the Trust does not record this information centrally, to obtain the records for 2015/2016 and 2016/2017 would entail going through patient records which would require permission and exceed the appropriate time limit.

3. What languages were the translators needed for? How many times were translators needed for each language?

Target Language		Number of Request	
Polish	81		
British Sign Language	37		
Romanian	61		
Bengali	42		
Tamil	47		
Arabic	25		
Urdu	31		
Mandarin	22		
Cantonese	24		
Italian	19		
Hungarian	13		
Spanish	22		
Portuguese	16		
Lithuanian	11		
Gujarati	10		
Somali	15		

		T = :	•	
		Twi	8	
		Punjabi	7	
		Greek	7	
		French	8	
		Vietnamese	6	
		Farsi	5	
		Thai	3	
		Russian	3	
		Turkish	4	
		Farsi (Persian)	3	
		Hindi	6	
		Bulgarian	2	
		Sylheti	2	
		Serbo-Croat	2	
		Farsi (Afghan)	1	
		Ghanian	1	
		Slovak	1	
		Japanese	1	
		Dari	1	
		Albanian	1	
		Serbian	1	
		Lingala	1	
		Nepali	5	
		Total	555	
		2016/2017 would er appropriate time lim		
22-5-18	4082		uty rosters as requested. Staff details have been redacted and are exempt under	Link to attachment
		Section 40 Personal In	formation, (where disclosure may contravene the Data Protection Act).	Link to attachment
				Link to attachment Link to attachment
				Link to attachment
	1	1		Entit to attachment

		Link to attachment
22-5-18	4083	1. In the last financial year, what was the Trust spend on patient pathway validation obtained from external providers (contractors, staffing agencies)?
		No
		2. Does the Trust currently utilise software developed and provided by an external provider to generate information on the Trust's incomplete, planned inpatient or planned outpatient waiting list data (dashboards, reports etc)?
		No
		3. In the last financial year, what was the Trust spend on software developed and provided by an external provider to generate information on the Trust's incomplete, planned inpatient or planned outpatient waiting list data (dashboards, reports etc)?
		N/A All reports are produced by in-house Performance team.
		4. Does the Trust currently utilise software developed and provided by an external provider to generate information on cancer waiting list data (dashboards, reports etc)?
		No
		5. In the last financial year, what was the Trust spend on software developed and provided by an external provider to generate information on cancer waiting list data (dashboards, reports etc)?
		N/A All reports are produced by in-house Performance team
		6. Does the Trust currently use an external provider to deliver RTT training to Trust staff?
		No
		7. In the last financial year, what was the Trust spend on externally developed RTT training?
		N/A
		8. What Patient Administration System (PAS) is currently used by the Trust?

		Cerner Millennium	
		9. What Patient Administration System (PAS) is the Trust planning to procure and utilise once the Trust's existing PAS contract has expired?	
		N/A, we have no plans to re-procure	
		10. In the last financial year, has the Trust had an audit or review of the Trust's patient waiting list data quality by an external organisation?	
		All NHS Trusts have their waiting list data reviewed as part of the Quality Accounts audit by their external auditors. The review of the Quality Accounts audit is one element of work that is undertaken by the external auditors.	
		11. In the last financial year, what was the Trust's spend on review or audit of the Trust's patient waiting list data quality delivered by an external organisation?	
		As highlighted above in question (11), the work undertaken that covers the review of data quality of the Trust waiting list is part of the Quality Accounts audit. The fee for this work is not separated and is part of the statutory external audit and therefore we cannot provide this information.	
22-5-18	4084	What is the total number of children and young people diagnosed with Cerebral Palsy by your Trust/Health Board in the last five years? (N.B.: this should be recorded as a total figure rather than figures for each year individually.)	
		114.	
		Please note included are all inpatients discharged from MKUH between the 1st April 2013 and the 31st Mar 2018, where the patient was aged 18 or under on the day of admission, and any of the following ICD10 Diagnosis Codes were coded to the inpatient spell:	
		A504: Late congenital neurosyphilis [juvenile neurosyphilis] A521: Symptomatic neurosyphilis G800: Spastic quadriplegic cerebral palsy	
		G801: Spastic diplegic cerebral palsy	

G802: Spastic hemiplegic cerebral palsy

G803: Dyskinetic cerebral palsy

G804: Ataxic cerebral palsy

G808: Other cerebral palsy

G809: Cerebral palsy, unspecified

Any patients treated in outpatients are not included in this figure, as MKUH does not record diagnoses against outpatient attendances and is therefore unable to identify these patients.

- What is the care pathway for children and young people with cerebral palsy in your Trust/Health Board? Please provide a copy of this if possible.
- Is there a specific timescale set out in your care pathway for referral to a child development service for diagnosis of cerebral palsy from the point when symptoms are initially identified? If so, please provide this data.
- What is the total number of:
- o Health visitors employed by your Trust/Health Board?
- o Specialist health visitors for children with special needs employed by your Trust/Health Board?
- What training is given to healthcare professionals, including health visitors and GPs, to recognise the risk factors and possible symptoms for Cerebral Palsy?

Please redirect the above questions to Central and North West London at freedomofinformation.cnwl@nhs.net as none of the above falls under the Trusts remit.

- What is the total number of specialist staff employed by your Trust/Health Board, who are trained to work with children and young people with Cerebral Palsy, from the following disciplines:
- o **Paediatric speech and language therapy** Paediatric Speech and Language Therapy comes under the remit of CNWL. Please contact freedomofinformation.cnwl@nhs.net
- o **Paediatric physiotherapy** I can confirm the Trust have 4 band 6's and 2 band 7's that specifically have children with cerebral Palsy on their caseload.
- o **Paediatric occupational therapy** Paediatric Occupational Therapy comes under the remit of CNWL. Please contact <u>freedomofinformation.cnwl@nhs.net</u>

How many children and young people with Cerebral Palsy are currently on a waiting list to access any of the above services within your Trust/Health Board?

		Usually we would not have any patients with a known diagnosis of CP on our waiting list – they would be allocated an appointment straight away even if this was some weeks away	
22-5-18	4085	I am analysing information on hospital trust and would be obliged if you would provide as much of the following information as possible under an FOI request. Wherever possible, please include the name and the version number of all systems:	
		1. PAS - Cerner Millennium	
		2. EPR - Cerner Millennium	
		3. Emergency Department Information System – Cerner Millenium	
		4. Radiology Information System – HSS Cris	
		5. PACS - Insignia	
		6. Do you use NHS Mail ♣ Or other email solutions used - Other	
		7. Clinical Noting – Cerner Millennium	
		8. Operating Systems • By Desktop and By Server o Anti-Virus Vendor -The Trust withholds this information on the basis of the exemption in Section 36(2)(c) of the Freedom of Information Act Section 36(2) - (prejudice to effective conduct of public affairs) This information is being withheld due to the risk associated with revealing information that could be used to compromise the security of infrastructure, systems and information.	
		9. Clinical Decision Support Systems – n/a	
22-5-18	4086	Please find attached.	Link to attachment
23-5-18	4087	Please may I request a copy of the trust's current Peripheral Intravenous Cannulation Policy.	
		The Trust does not have its own policy we use the guidance in the Marsden Manual 9 th edition. This is nationally recognised as the definitive guide to clinical nursing skills. Hard copies are available on all wards and on our Intranet.	
		The Royal Marsden Manual of Clinical Nursing Procedures 9 th edition Edited by: Lisa Dougherty and Sara Lister Published by: Wiley and Blackwell	
25-5-18	4088	Please provide copies of all correspondence between the Trust and: (a) the Department of Health, (b)	

		The Prime Minister's Office.	
		Please only include correspondence dated within the last 12 months which contains the word "Brexit".	
		This should include correspondence from the Trust's chief executive and members of the Board of Directors.	
		I can confirm that the Trust have no record of any such correspondence.	
29-5-18	4089	Please see attached.	Link to attachment
30-5-18	4090	 How many diagnoses of ADHD were there in the CCG in each of the last 10 years How many children and adults are currently waiting for an ADHD diagnosis What is the average wait for an ADHD diagnosis for Children What is the average wait for an ADHD diagnosis for Adults What is the CCG target time for an ADHD waiting time 	
		The Trust does not record this information this is obtainable within the community from	
		Central and North West London NHS Foundation Trust	
		Trust Headquarters	
		Stephenson House	
		75 Hampstead Road	
		London	
		NW1 2PL	
		Tel: 020 3214 5700	
31-5-18	4091	Under the Fol act could you please provide contact details for phone and email for the following members of staff;	
		 Chief executive officer Deputy CEO Chief medical officer Chief nurse Chief financial officer Director of workforce 	

		- Director of HR	
		The information requested can be found on the Trusts website at :	
		http://www.mkhospital.nhs.uk/images/comms/BoD/MKUH Org Chart Spring 2017 web.pdf	
		Please note individual staff details are exempt under Section 40 Personal Information (where disclosure may contravene the Data Protection Act) unless permission to release has been granted or they are already in the public domain.	
31-5-18	4092	Q1: What contractual relationships (Master Vendor, Neutral Vendor, Direct Engagement or Other) do you have in place for the supply of AHP locums to the Trust? Please state the name(s) of the various provider/locum agencies used and the relationship with each (e.g. Medacs, direct, Interact, Master Vendor etc.)	Link to spreadsheet Link to spreadsheet
		The Trust has a call off contract with the agencies and therefore this is "direct engagement".	
		Agencies we use are listed below:-	
		247 TIME LTD ATLANTIS MEDICAL LTD	
		GLOBE LOCUMS LTD	
		HCL HEALTHCARE LTD	
		ID MEDICAL GROUP LTD	
		JENNIE REEVES RADIOGRAPHERS AGENCY LTD	
		LOCUM PLACEMENT GROUP LTD	
		LOCUMWORX LTD	
		LONDON TEACHING POOL LTD	
		MAXXIMA LTD	
		MEDICONNECT RECRUITMENT LTD	
		MEDICSPRO LTD	
		PERTEMPS MEDICAL PROFESSIONALS LTD	
		PLACEMENT GROUP (UK) LTD	
		PULSE HEALTHCARE LTD	
		RIG MEDICAL RECRUIT LTD	

SANCTUARY PERSONNEL LTD SENSIBLE LOCUMS LTD SUGARMAN GROUP LTD TOTAL ASSIST RECRUITMENT LTD YOUR WORLD RECRUITMENT LTD

Q2: Please state the utilisation rate that has been achieved through each of the relationships detailed in Q1 during the financial year 2017-18. This should amount to the total value of AHP locum spend supplied by each relationship during 2017-18 as a percentage of total AHP locum spend in the same period.

Please see spreadsheet attached

Q3: Please can you break down your total spend on Allied Health Professional (AHP) agency staff during the financial year 2017-18 by the specialisms below:

- Chiropodist/Podiatrist,
- Dietician,
- Occupational Therapist,
- Physiotherapist,
- Prosthetist / Orthotist,
- Imaging Professionals,
- Speech / Language Professionals.

Please see spreadsheet attached