

DISCLOSURE LOG

1 June 2018 – 30 June 2018

Date	Ref No	Information Requested and Response	Links to Additional Information
1-6-18	4093	<p>1. Please confirm or deny whether, in the six months between December 2017 and May 2018 (inclusive), the trust made any applications to the Home Office for Tier 2 (General) Certificates of Sponsorship (CoS) for doctors to work in the trust.</p> <p>Yes, applications were made to the Home Office.</p> <p>2. Please indicate how many such applications the trust made in the following months:</p> <p>a) December 2017 - 1 b) January 2018 - 1 c) February 2018 - 0 d) March 2018 - 2 e) April 2018 - 5 f) May 2018 - 3</p> <p>3. Please indicate how many applications to the Home Office for Tier 2 (General) Certificates of Sponsorship (CoS) for doctors to work in the trust were refused in the following months:</p> <p>a) December 2017 - 0 b) January 2018 - 0 c) February 2018 - 0 d) March 2018 - 2 e) April 2018 - 4 f) May 2018 - pending home office out-come</p> <p>4. Please indicate what the financial cost to the trust was in the six months between December 2017 and May 2018 (inclusive) for recruiting doctors from outside the EEA whose applications for visas were subsequently refused. (If an exact figure is not available, please provide an</p>	

		<p>estimate of the total or the typical cost involved in recruiting a doctor from outside the EEA and applying for a Tier 2 visa. Please include costs of staff time, administrative fees, agency fees, and any other associated costs.)</p> <p>The cost for the visa is £1,000 per year plus an additional £199 visa charge. The majority of the Doctors will have been paid on the bottom of the Speciality Doctor pay scale, £37,923 and received an additional 2 PA's £7,584.60 totalling £45,507 per annum. We are unable to calculate the agency fees to cover these vacant shifts.</p>	
1-6-18	4094	Please find response attached.	Link to attachment
4-6-18	4095	<p>1. The total value of the courier service contracts that were outsourced?</p> <p>The Trust do not have any formal contracts</p> <p>2. The name of your primary and any secondary Courier supplier</p> <p>We currently use DX network, South Central Ambulance Service, TNT.</p> <p>The value of your primary supplier contract, its expiry date and the services they provide (e.g. same day/next-day/overnight)</p> <p>N/A</p> <p>The value of your secondary supplier's contract, its expiry date and the and services they provide (e.g. same day/next-day/overnight)</p> <p>As stated above the Trust do not have any contracts in place but will shortly be going out to quotation / tender so that we will have formal contracts. This will be an interim arrangement until a pathology network contract is put into place.</p> <p>3. The total cost of the courier services that were managed in-house?</p> <p>0</p> <p>The number of staff employed in managing those contracts</p> <p>N/A</p>	

		<p>The number of vehicles owned or leased to meet the in-house courier requirement</p> <p>N/A</p> <p>4. The name and email of the person responsible for the procurement/management of these services?</p> <p>Purchasing and Supplies Manager Communications@mkuh.nhs.uk</p> <p>01908 660033</p>	
5-6-18	4096	<p>2015/16</p> <ul style="list-style-type: none"> • The total number of settlement agreements: <p>2</p> <ul style="list-style-type: none"> • The total costs associated for each settlement agreement in each financial year: <p>£0</p> <p>2016/17</p> <ul style="list-style-type: none"> • The total number of settlement agreements: <p>2</p> <ul style="list-style-type: none"> • The total costs associated for each settlement agreement in each financial year. This includes, but is not limited to, a payment of salary, payment in lieu of a notice period and payment of compensation for loss of office: <p>£0</p> <p>2017/18</p> <ul style="list-style-type: none"> • The total number of settlement agreements: <p>2</p>	

		<p>The total costs associated for each settlement agreement in each financial year. This includes, but is not limited to, a payment of salary, payment in lieu of a notice period and payment of compensation for loss of office:</p> <p>£0</p>	
5-6-18	4097	<p>1. The name and email address of your Clinical Director of Pathology</p> <p>2. The name and email address of your Service manager of Pathology</p> <p>3. The name and email address of your Lead Pathologist</p> <p>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</p> <p>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).</p>	
5-6-18	4098	<p>a) Between Q1 2016-17 and Q4 2017-18, what was the total expected allocation to the trust from the Sustainability and Transformation Fund?</p> <p>Expected STRF for 2016-17 and 2017-18 - £14.6m</p> <p>b) Between Q1 2016-17 and Q4 2017-18, how much of the expected allocation to the trust from the Sustainability and Transformation Fund was withheld on its due date, as a result of failing to meet the relevant criteria of achieving financial control totals and/or Accident and Emergency waiting time trajectories?</p> <p>STF withheld on due date as £1,057,000</p> <p>c) Between Q1 2016-17 and Q4 2017-18, how much of the expected allocation to the trust from the Sustainability and Transformation Fund was awarded after its due date, either as a result of the trust subsequently achieving its cumulative financial control total and so becoming eligible for missed payments or where the reason for failing to meet its A&E trajectory was deemed beyond its control?</p> <p>STF awarded after the due date was £289K</p>	

6-6-18	4099	Please find attached spreadsheet.	Link to spreadsheet																
6-6-18	4100	<p>If we were to send the request to your department, can we be assured that the person in charge of maternity-specific mandatory training (i.e. CTG training, emergency skills and drills, etc) will complete it? <u>Could you please give us the appropriate email address to send this request to?</u> To be clear, this would be the person in charge of maternity-specific training for any professional involved in maternity care; for example, midwives, obstetricians, anaesthetists, MCAs, ODPs, paramedics, etc. If this is your department, we will need clarification of that.</p> <p>Freedom of Information Requests are sent to the department best placed to answer that request. The Email address this should be directed to is Foi.PublicationSchemeCo-ordinator@mkuh.nhs.uk</p>																	
7-6-18	4101	<p>1. What is the current size of your Elective wait list broken down by speciality in May?</p> <p>The waiting list statistics are published by NHS England in the public domain and can be accessed via the following link: - https://www.england.nhs.uk/statistics/statistical-work-areas/rtt-waiting-times/</p> <p>2. How many patients from your hospital were discharged to home care setting, i.e. residential care homes/nursing homes etc in the last 6 months (December – May)?</p> <table border="1" data-bbox="342 868 1626 1098"> <thead> <tr> <th></th> <th>December</th> <th>January</th> <th>February</th> <th>March</th> <th>April</th> <th>May</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Discharged Patients to home cares</td> <td>47</td> <td>47</td> <td>50</td> <td>48</td> <td>48</td> <td>60</td> <td>300</td> </tr> </tbody> </table>		December	January	February	March	April	May	Total	Discharged Patients to home cares	47	47	50	48	48	60	300	
	December	January	February	March	April	May	Total												
Discharged Patients to home cares	47	47	50	48	48	60	300												
7-6-18	4102	<p>1) How many individuals employed by your trust have each of the following recorded as their job role in each person's Electronic Staff Record:</p> <p>a) Occupational Therapist - 19 b) Occupational Therapist Consultant - 0 c) Occupational Therapist manager - 2 d) Occupational Therapy Specialist Practitioner - 0</p> <p>2) How many of the individuals with any 'occupational therapy/therapist' job role employed by your trust, as identified above, work under each of the secondary areas of work as recorded in each</p>																	

person's Electronic Staff Record, in the following format:

Secondary Number of employees – 0

- Accident & Emergency
- Burns Care
- Cardiology
- Child & Adolescent Psychiatry
- Community Health Services
- Elderly Care Medicine
- Forensic Psychiatry
- General Medicine
- General Psychiatry
- General Surgery
- Health Promotion
- Intensive Care
- Neonatal Intensive Care
- Neurosurgery
- Obstetrics & Gynaecology
- Occupational Health
- Occupational Therapy
- Old Age Psychiatry
- Paediatric Cardiology
- Paediatric Surgery
- Paediatrics
- Pain Management
- Palliative Medicine
- Primary Care
- Psychiatry
- Psychiatry of Learning Disability
- Public Health Medicine
- Rehabilitation
- Renal Medicine
- Respiratory Medicine
- Rheumatology
- Social Services
- Trauma & Orthopaedic Surgery

	4103	Subject Access Request	
11-6-18	4104	Please find attached	Link to attachment
11-6-18	4105	<p>Please could you provide me with a list of dashboards the organisation uses and how many users per dashboards there are?</p> <p>The Trust produces the following dashboards for corporate use within the Trust using standard Microsoft Office products and SSRS:</p> <ul style="list-style-type: none"> • Trust Performance Scorecard • Divisional Performance Scorecards (x4) • CSU and Specialty Dashboards (x multiple) • Clinical Quality Dashboard • Cancer Performance Dashboard • A&E Dashboard <p>Currently the Trust does not have a reliable means of monitoring the number of users per dashboard for the systems above. To obtain this information would entail trawling through Trust records and would exceed the appropriate time limit.</p> <ul style="list-style-type: none"> • PLICS QlikView – 14 users at present across the Trust. <p>Please could you provide the monthly agency spend for Business Intelligence for the financial year 2017/2018?</p> <ol style="list-style-type: none"> 1. April 2017 – 2. May 2017 – 3. June 2017 – 4. July 2017 – 5. August 2017 – 6. September 2017 – 7. October 2017 – 8. November 2017 – 9. December 2017 – 10. January 2018 – 11. February 2018 – 12. March 2018 – 	

		I can confirm the Trust's spend for the months stated above are nil.																												
11-6-18	4106	Please find spreadsheet attached							Link to spreadsheet																					
11-6-18	4107	<p>1. What is the reported total number of working staff that have been physically assaulted/attacked during their shift in 2013, 2014, 2015, 2016, 2017, and to date 018.</p> <p>These figures include incidents where the staff member was assaulted by patients, members of the public or by other staff members.</p> <p>2013 47 2014 62 2015 66 2016 126 2017 154 2018 68</p> <p>2. If possible, please provide what caused these incidents - e.g. alcohol/drug misuse, mental health issues, retaliation, unknown, etc.</p> <p>We do not record this in a readily accessible format and to gather this information together would entail a member of staff to look through 523 incidents which would be disproportionate effort and exceed the 18 hours.</p>																												
11-6-18	4108	<p>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:</p> <p>The Trust currently manages all Ophthalmology services in house.</p>																												
	4109	Completed via Survey Monkey.																												
13-6-18	4110	<table border="1"> <thead> <tr> <th>Company name</th> <th>Fiscal Years (ending in March)</th> <th>2013/14</th> <th>2014/15</th> <th>2015/16</th> <th>2016/17</th> <th>2017/18</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Amount spent on outsourced reporting (GBP)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>							Company name	Fiscal Years (ending in March)	2013/14	2014/15	2015/16	2016/17	2017/18								Amount spent on outsourced reporting (GBP)							
Company name	Fiscal Years (ending in March)	2013/14	2014/15	2015/16	2016/17	2017/18																								
Amount spent on outsourced reporting (GBP)																														

			Day-time reporting - Plain radiography	£51,682.95	£103,742.73	£55,646.82	£17,639.46	£1,383.30		
		*Based on one body part	Day-time reporting - CT	£72,074.52	£125,252.40	£50,411.76	£39,813.48	£10,660.44		
		*Based on one body part	Day-time reporting - MRI	£60,512.76	£125,252.40	£50,411.76	£39,813.48	£13,240.08		
		N/A – No Nuclear medicine at MKUH	Day-time reporting - Nuclear medicine							
		N/A – No PET scans at MKUH	Day-time reporting - PET							
		N/A	Day-time reporting - SPECT							
			Day-time reporting - Ultrasound							
		Exempt under Sec 43 Freedom of Information Act.	Out of hours reporting							
			Specialist scan reporting**							
			Urgent scan reporting***							
			Second opinion reporting****							

		Number of reports outsourced							
	Day-time reporting - Plain radiography	10835	21749	11666	3698	290			
	Day-time reporting - CT	2319	4030	1622	1281	343			
	Day-time reporting - MRI	1947	4635	2246	1811	426			
	Day-time reporting - Nuclear medicine	No Nuclear Medicine at MKUH							
	Day-time reporting - PET	No Nuclear Medicine at MKUH							
	Day-time reporting - SPECT	No Nuclear Medicine at MKUH							
	Day-time reporting - Ultrasound	No Ultrasound reports outsourced							
	Out of hours reporting*	1348	3261	3819	4408	857			
	Specialist scan reporting**								
	Urgent scan reporting***								

	Second opinion reporting****						
Number of scan images in outsourced reports							
N/A	Day-time reporting - Plain radiography						
N/A	Day-time reporting - CT						
N/A	Day-time reporting - MRI						
N/A	Day-time reporting - Nuclear medicine						
N/A	Day-time reporting - PET						
N/A	Day-time reporting - SPECT						
N/A	Day-time reporting - Ultrasound						
N/A	Out of hours reporting*						

Please note the Trust do not outsource any ultrasounds for reporting, specialist scans or second reporting.

*Section 43 is a qualified exemption, and we are required to assess as objectively as possible whether the balance of public interest favours disclosing or withholding the information. Our view that section 43 applies to

		<p>your request is based on the judgement that the Trusts ability to purchase products at a competitive price would be compromised by disclosure.</p> <p>* The information is recorded but not readily accessible for the number of body parts. To obtain this information would entail trawling through patient records which would require permission and exceed the appropriate time limit.</p>	
13-6-18	4111	<p>1 - In your Trust, how much did you spend on Biological and biosimilar medicines, in the past financial year ending April 2018 ?</p> <p>For the drugs mentioned in the table below (infliximab, etanercept, rituximab, adalimumab, trastuzumab) the Trust spent £3,949,340 in 2017/18.</p> <p>2 – Have you developed a policy on how prescribers can switch their patients to biosimilars and support them in making informed choices to save resources?</p> <p>Agreed in principle with clinicians.</p> <p>3 – Do you have any specific plans in place for the launch of biosimilar Adalimumab later in 2018?</p> <p>Agreed on a drug by drug basis with clinicians.</p> <p>4 – Are there any agreements in place between you the Provider and CCG that would enable savings in drug costs to be made? (For example, Gainshare agreements where the benefits associated with more efficient use of medicines not reimbursed through national prices is shared between the Provider and the Clinical Commissioning Group party to the agreement. This included agreements for the switch to biosimilar products)</p> <p>There are no gain share agreements in place at the moment.</p> <p>5 – Are there any other agreements with a CCG, not included in the above, for the following services?</p> <p>There are no other gain share agreement in place at the moment.</p>	
14-6-18	4112	<p>Please send me information regarding how much money was spent on counterfeit drugs between 30/5/17 and 30/5/18.</p> <p>I can confirm the Trust have spent no money on counterfeit drugs during the dates requested.</p>	
14-6-18	4113	<p>1. Do you receive private patients from outside the UK? What percentage of total patients does this cover? From which region(s) of the world?</p>	

		<p>No</p> <p>2. Does your trust engage in foreign direct investment abroad (practitioners/the trust engaging in overseas ventures, joint ventures, setting up subsidiaries of the NHS abroad...). If so roughly what percentage of your total time/work force is engaged in this activity? In which regions of the world?</p> <p>No</p> <p>3. If you answered yes to questions 1 or 2, in which area(s) of health care do you provide private services? N/A</p> <p>4. If you answered yes to questions 1 or 2, have you seen a decline or increase in private activity over the last 5 years? Do you expect to increase private provision of health care in the future? N/A</p> <p>5. What measures are taken to ensure that core NHS health services free at the point of use are protected despite these private activities?</p> <p>Private activity does not take precedence over NHS activity. If private appointments are booked, they will be cancelled if there is an NHS need; whether emergency or elective. Private patients will only be seen at the end of an NHS theatre list- approved at all levels. The Trust do very little inpatient private activity and has no intention to increase this.</p>	
15-6-18	4114	<p>1. How many individuals diagnosed in the last 5 years with prostate cancer?</p> <p>977</p> <p>2. How many deaths attributable to prostate cancer in the last 5 years?</p> <p>The Trust does not record this information centrally, to obtain this would entail going through patient records which would require permission and exceed the appropriate time limit.</p> <p>3. How many individuals diagnosed in the last 5 years with breast cancer?</p> <p>1402</p> <p>4. How many deaths attributable to breast cancer in the last 5 years?</p> <p>The Trust does not record this information centrally, to obtain this would entail going through patient records</p>	

		<p>which would require permission and exceed the appropriate time limit.</p> <p>5. How many individuals diagnosed with brain cancer in the last 5 years?</p> <p>64</p> <p>6. Of those diagnosed with brain cancer how many with GBM4?</p> <p>7. How many deaths attributable to brain cancer in the last 5 years?</p> <p>8. Of those deaths how many due to GBM4?</p> <p>The Trust does not record this information centrally, to obtain this would entail going through patient records which would require permission and exceed the appropriate time limit.</p> <p>9. How many children diagnosed with brain cancer in the last 5 years?</p> <p>10. How many child deaths attributable to brain cancer in the last 5 years?</p> <p>Please note Paediatric cancers are referred to Oxford, therefore MKUH do not record the information requested in questions 9 & 10.</p>	
18-6-18	4115	<p>Does your Trust have a specific policy to support staff who may suffer domestic violence?</p> <p>I can confirm the Trust do not have a specific policy for staff members suffering domestic violence. However it does have a range of initiatives to support the welfare of our staff including but not limited to; family friendly policies, employee assistance programme which includes, counselling support and legal advice and staff health and wellbeing department.</p>	
19-6-18	4116	<p>As you will be aware, emergency readmissions are currently recorded as any patient subject to an unplanned re-admittance within 30 days of being discharged. But to understand any impact fully this data needs to be broken down by each day within the 30 day period.</p> <p>Under the Freedom of Information Act 2000 please provide the data to fill out the table below.</p> <p>Please find spreadsheet attached.</p> <p>Secondly, please answer the following question:</p> <p>How is the data collected on emergency readmissions used or analysed to i) prevent emergency</p>	<p>Link to spreadsheet</p>

		<p>readmissions; or ii) improve patient experience?</p> <p>The Trust utilise the readmission data to help improve clinical pathways and reduce/prevent further readmissions.</p>																											
	4117	Subject Access Request																											
21-6-18	4118	<p>Within your Trust and over the last three months, how many Psoriasis [PsO] patients have been initiated on their first advanced therapy (i.e. Biologic, Apremilast or Dimethyl fumarate)?</p> <p>Total New Advanced Therapy patient Initiations.</p> <p>Where possible please split by treatment;</p> <table> <tr> <td>Adalimumab [Humira]</td> <td>4</td> </tr> <tr> <td>Apremilast [Otezla]</td> <td>4</td> </tr> <tr> <td>Brodalumab [Kyntheum]</td> <td>0</td> </tr> <tr> <td>Certolizumab [Cimzia]</td> <td>0</td> </tr> <tr> <td>Dimethyl fumarate [Skilarence]</td> <td>0</td> </tr> <tr> <td>Etanercept [Enbrel]</td> <td>0</td> </tr> <tr> <td>Etanercept Biosimilar</td> <td>0</td> </tr> <tr> <td>Guselkumab [Tremfya]</td> <td>0</td> </tr> <tr> <td>Infliximab [Remicade]</td> <td>0</td> </tr> <tr> <td>Infliximab Biosimilar</td> <td>0</td> </tr> <tr> <td>Ixekizumab [Taltz]</td> <td>0</td> </tr> <tr> <td>Secukinumab [Cosentyx]</td> <td>1</td> </tr> <tr> <td>Ustekinumab [Stelara]</td> <td>0</td> </tr> </table> <p>Please note the figures above are for all Dermatology complaints not exclusively Psoriasis. To obtain this information would entail trawling through patient records which would require consent and exceed the appropriate time limit.</p>	Adalimumab [Humira]	4	Apremilast [Otezla]	4	Brodalumab [Kyntheum]	0	Certolizumab [Cimzia]	0	Dimethyl fumarate [Skilarence]	0	Etanercept [Enbrel]	0	Etanercept Biosimilar	0	Guselkumab [Tremfya]	0	Infliximab [Remicade]	0	Infliximab Biosimilar	0	Ixekizumab [Taltz]	0	Secukinumab [Cosentyx]	1	Ustekinumab [Stelara]	0	
Adalimumab [Humira]	4																												
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Ixekizumab [Taltz]	0																												
Secukinumab [Cosentyx]	1																												
Ustekinumab [Stelara]	0																												
22-6-18	4119	<p>Our Trust is currently undertaking an information governance incident benchmarking exercise and we are contacting comparative Trusts to ask if you would be willing to share your IG incident reports</p>	<p>Link to spreadsheet</p>																										

		<p>from the last quarter/few months.</p> <p>Please find spreadsheet attached.</p> <p>Please note figures are from Jan 18 – present date as no specific time scale was provided.</p>	
22-6-18	4120	<p>1. How many of your patients are managed by the hospital within their own homes with under the care of a private firm over the last 36 months – please provide this with monthly numbers</p> <p>I can confirm there are no patients managed by the Trust in their own homes. Patients are referred to community services if they require further assistance/care at home.</p> <p>2. What has been your PROMS score for each month over the last 3 years</p> <p>PROMs scores can be found at https://digital.nhs.uk/data-and-information/data-tools-and-services/data-services/patient-reported-outcome-measures-proms</p>	
	4121	Subject Access Request	
22-6-18	4122	<p>Please note the Trust does not employ GP's within A&E – instead we use senior A&E nurses that assess patients on arrival and stream to the most appropriate pathway, one of which is a walk in centre separate from the hospital.</p> <p>Current A&E GP streaming service:</p> <p>1. What are the opening hours?</p> <p>8am - 10pm (Nurse lead)</p> <p>2. How many GPs do you have working at any one time?</p> <p>None</p> <p>3. What is the hourly pay?</p> <p>N/A</p> <p>4. What is the seniority mix?</p>	

		<p>N/A</p> <p>5. How many GPs do you have and how many vacancies?</p> <p>N/A</p> <p>6. What proportion are: a) locums, b) from local practices c) employed by the Trust, or d) other? (If other, please explain)</p> <p>N/A</p> <p>Between November 1 2017 and April 30 2018:</p> <p>6. How many patients were seen through A&E GP streaming?</p> <p>All patients are assessed by senior nurse on arrival</p> <p>7. What proportion were: a) dealt with in full, b) sent through to A&E, c) referred to their own GP or d) other?</p> <p>N/A</p> <p>To date (since launching the streaming service):</p> <p>8. How many patient complaints have you received concerning A&E GP streaming?</p> <p>N/A</p>	
22-6-18	4123	<p>QUESTION 1: In the past 10 years, how much has the Trust spent on sending people (staff or contractors) on courses run by the leadership development organisation Common Purpose? (Please break down the figures for each year, up to the most recent year for which figures are available).</p> <p>Nil</p> <p>QUESTION 2: How many people currently on your payroll (staff or contractors) are graduates of a Common Purpose</p>	

		<p>course?</p> <p>0</p> <p>QUESTION 2A: If possible, please identify senior managers who are graduates of a Common Purpose course.</p> <p>N/A</p>	
22-6-18	4124	<p>1. How many mobile phone users do you have (this includes smartphone users, basic mobile phone users, data only users and any other device that requires a SIM card)?</p> <p>400</p> <p>2. Which network(s) are these currently with?</p> <p>EE</p> <p>3. When are these contracts due to expire?</p> <p>All co-termed until March 2021</p> <p>4. The name of the person responsible for the administration of these contracts?</p> <p>IT Department</p> <p>5. The name under which the contract is awarded i.e. NHS Trust of...?</p> <p>Milton Keynes University Hospital NHS Foundation Trust</p>	
27-6-18	4125	<p>1) Please state the gross amount spent by your trust on equipment to handle obese patients in each of the following financial years:</p> <p>i) 2013/14</p>	

ii) 2014/15

iii) 2015/16

iv) 2016/17

v) 2017/18

vi) 2018/19 to 15.06.18

The Trust does not differentiate spending between obese equipment and standard equipment, to obtain this information would entail trawling through Trust invoices which would exceed the appropriate time limit.

2) Please list all equipment to handle obese patients purchased by your trust in each of the following financial years, including the number of units of each purchased where available.

i) 2013/14

ii) 2014/15

iii) 2015/16

iv) 2016/17

v) 2017/18

vi) 2018/19 to 15.06.18

The Trust does not record this information centrally. To obtain this information would entail going through Trust invoices and purchase orders which would exceed the appropriate time limit.

		<p>3) Please state the number of obese spaces in your mortuary at the end of each of the following financial years:</p> <p>i) 2013/14 5</p> <p>ii) 2014/15 5</p> <p>iii) 2015/16 5</p> <p>iv) 2016/17 5</p> <p>v) 2017/18 5</p> <p>vi) 2018/19 to 15.06.18 5</p>	
28-6-18	4126	<p><u>Question 1</u> Does your trust currently use bedside patient monitoring equipment of vital signs (i.e. heart rate, blood pressure, oxygen saturations, etc.) that is interoperable with your trusts Electronic Patient Record System?</p> <p>Yes</p> <p><u>Question 1(a)</u> If yes, what is the provider and product name?</p> <p>Spot monitors- Welch Allyn CVSM6000 Cardiac monitors- Spacelabs Qube and Xprezzon</p> <p><u>Question 1(b)</u> How do the bedside monitoring equipment integrate with your system? Please choose most appropriate answer,</p> <p>[A] Directly connected through interoperable (e.g. API enabled) software – “the results are automatically pushed to our existing EPR system for doctors to see in realtime”</p>	

- [B] Connected through an eObs system – “the healthcare professional manually inputs the results of their recorded observations into a system separate from the EPS system”
- [C] Connected through an eObs system – “the healthcare professional manually inputs the results of their recorded observations into a system that updates directly to the EPS system”
- [D] Other, Please specify _____

Question 1(c) If no, does your trust have the plan to acquire such equipment (as described in Question 1) over the next three financial years (2018/19, 2019/20, 2020/21)? Please specify the year and how you are planning to procure this N/A

UNDERSTANDING THE CURRENT IT PROVIDER LANDSCAPE, IT’S DYNAMICS AND EXISTING INTEROPERABILITY IN ACUTE TRUSTS IN ENGLAND

Question 2

2a). Which Patient Administration System (PAS) does your trust currently use?

Cerner Millennium.

2b). When does your current PAS contract expire?

December 2024

2c). What is the annual cost for using your chosen PAS?

£751,875.72

**2d). With which other systems in your trust is the PAS interoperative with?
Please list all which are interoperable _____**

Information can be found at http://www.mkhospital.nhs.uk/index.php?view=download&alias=1559-it-foi-answers&category_slug=freedom-of-information-foi-disclosure-logs-2017&option=com_docman&layout=table&Itemid=700

Question 3

3a). Which Electronic Patient Record system (EPR) does your trust currently use?

C Cube Solutions

3b). When does your current EPR contract expire?

July 2022

3c). What is the annual cost for using your chosen EPR?

£78,7544.32

3d). With which other systems in your trust is the EPR interoperative with?

No

3e). Does your EPR integrate with any Primary Care systems (e.g. SystemOne or EMIS Web)

Currently underway.

3f). What does these systems permit (1-way viewing of notes / results / etc or 2-way notes / results entering)?

N/A

Question 4

4a). If you use a separate Mental Health EPR, which provider and product do you currently use?

4b). When does the contract with your current provider expire?

4c). What is the annual cost for using your chosen Mental Health EPR system?

4d). With which other systems in your trust is the Mental Health EPR system interoperative with?

Please list all which are interoperable_____

Mental Health services do not fall under the Trust's remit. Please re direct the questions above to Central and North West London at freedomofinformation.cnwl@nhs.net

Question 5

5a). Which system does your trust currently use to monitor flow through the Emergency Department (provider and product)?

Cerner Millennium.

5b). When does the contract with your current provider expire?

5c). What is the annual cost for using your chosen system?
5d). With which other systems in your trust is the system interoperative with?
Please list all which are interoperable_____

Information can be found at http://www.mkhospital.nhs.uk/index.php?view=download&alias=1559-it-foi-answers&category_slug=freedom-of-information-foi-disclosure-logs-2017&option=com_docman&layout=table&Itemid=700

Question 6

6a). Which bed management system does your trust currently use?
6b). When does the contract with your current provider expire?
6c). What is the annual cost for using your chosen bed management system?
6d). With which other systems in your trust is the bed management system interoperative with?
Please list all which are interoperable_____

The Trust do not currently have an electronic Bed Management system, although with the introduction of eCare Bed there is flexibility to use the bed boards more proactively.

Question 7

7a). Which radiology information system does your trust currently use?

CRIS

7b). When does the contract with your current provider expire?

May 2020

7c). What is the annual cost for using your chosen radiology information system?

£119,541.60 Inc. VAT

7d). With which other systems in your trust is the radiology information system interoperative with?

Please list all which are interoperable:

Insignia PACS
Cerner Millennium
Sunquest ICE

Question 8

8a). Which laboratory information system (biochem/pathology) does your trust currently use?

Clinisys Winpath

8b). When does the contract with your current provider expire?

May 2019

8c). What is the annual cost for using your chosen laboratory information system?

£119,541

**8d). With which other systems in your trust is the laboratory information system interoperative with?
Please list all which are interoperable** N/A

Question 9

**9a). Does your trust use an Electronic Prescribing system? If so, what is the provider / product name?
If no, please answer n/a to questions 8a, b, c and d.**

Cerner Millennium

9b). When does the contract with your current provider expire?

9c). What is the annual cost for using your chosen Electronic Prescribing system?

**9d). With which other systems in your trust is the Electronic Prescribing system interoperative with?
Please list all which are interoperable** _____

Information can be found at http://www.mkhospital.nhs.uk/index.php?view=download&alias=1559-it-foi-answers&category_slug=freedom-of-information-foi-disclosure-logs-2017&option=com_docman&layout=table&Itemid=700

Question 10

10a). Which Maternity services IT system does your trust currently use?

Cerner Millennium

10b). When does the contract with your current provider expire?

		<p>10c). What is the annual cost for using your chosen Maternity services IT system? 10d). With which other systems in your trust is the Maternity services IT system interoperative with? Please list all which are interoperable_____</p> <p>Information can be found at http://www.mkhospital.nhs.uk/index.php?view=download&alias=1559-it-foi-answers&category_slug=freedom-of-information-foi-disclosure-logs-2017&option=com_docman&layout=table&Itemid=700</p>	
28-6-18	4127	<p>1. How many CDs does your department produce per annum for the distribution of patient images?*</p> <p>2288</p> <p>2. How many CDs does your department produce per annum for interested 3rd parties such as insurance companies or solicitors?*</p> <p>1300</p> <p>3. What is the cost of CD production for patient images, e.g. materials for your department per annum?*</p> <p>£2071.80</p> <p>4. What are the time/resource costs associated with CD production for patient images for your department per annum?*</p> <p>200 Hours</p> <p>5. What are the costs of postage/couriering of CDs of patient images for your department, per annum?*</p> <p>The Trust does not record this information centrally, to obtain this would entail going through patient records which would require permission and exceed the appropriate time limit.</p> <p>6. Please provide a breakdown of total costs of CDs for patient images to other hospitals for your department, per annum?*</p> <p>N/A</p>	

		<p>7. Please provide a breakdown of total costs of CDs to patients for your department, per annum?*</p> <p>£894.64</p> <p>8. Please provide a breakdown of total costs of CDs to interested 3rd parties for your department such as insurance companies or solicitors, per annum?*</p> <p>£1177.16</p> <p>9. Are the CDs dispatched from your department that contain patient data consistently encrypted / password protected?*</p> <p>Yes</p> <p>10. Can you provide information on the number of CDs that are lost or misplaced before they reach the intended recipient?*</p> <p>No</p>	
28-6-18	4128	<p>1. For the period 1st Oct – 31st Dec 2017 please could you tell me how many FTE (full time equivalent) nursing/midwifery personnel were employed by your trust?</p> <p>877.85</p> <p>2. For the period 1st Oct – 31st Dec 2017 please could you tell me how many of those FTE nursing/midwifery personnel <u>were male</u>?</p> <p>56.94</p> <p>3. For the period 1st Oct – 31st Dec 2017 please can you tell me how many FTE <u>healthcare assistants</u> were employed by your trust?</p> <p>297.40</p> <p>4. For the period 1st Oct – 31st Dec 2017 please can you also tell me how many of those FTE healthcare assistant <u>were male</u>?</p>	

		<p>22.21</p> <p>5. For the period 1st Oct – 31st Dec 2017 please can you also tell me how much you spent on CPD (continuing professional development) training for healthcare assistants?</p> <p>Unable to cost as CPD is provided in house as well as externally funded courses and programmes.</p> <p>6. For the period 1st Oct – 31st Dec 2015 please could you tell me how many FTE (full time equivalent) nursing/midwifery personnel were employed by your trust?</p> <p>848.47</p> <p>7. For the period 1st Oct – 31st Dec 2015 please could you tell me how many of those FTE nursing/midwifery personnel <u>were male</u>?</p> <p>63.86</p> <p>8. For the period 1st Oct – 31st Dec 2015 please can you tell me how many FTE <u>healthcare assistants</u> were employed by your trust?</p> <p>293.78</p> <p>9. For the period 1st Oct – 31st Dec 2015 please can you also tell me how many of those FTE healthcare assistant <u>were male</u>?</p> <p>24.52</p> <p>10. For the period 1st Oct – 31st Dec 2015 please can you also tell me how much you spent on CPD (continuing professional development) training for healthcare assistants?</p> <p>Unable to cost as CPD is provided in house as well as externally funded courses and programmes.</p>														
29-6-18	4129	<p>1. How many count of patient prescriptions did your pharmacy department issue last year – please provide this with monthly numbers.</p> <table border="1" data-bbox="342 1369 1624 1418"> <tr> <td></td> <td>Jan</td> <td>Feb</td> <td>Mar</td> <td>Apr</td> <td>May</td> <td>Jun</td> <td>Jul</td> <td>Aug</td> <td>Sep</td> <td>Oct</td> <td>Nov</td> <td>Dec</td> </tr> </table>		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec				

No. of patient prescriptions pharmacy department issued	1,554	1,525	1,682	1,432	1,650	1,768	1,659	1,726	1,531	1,526	1,678	1,571
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2. How many Ankle replacements did your Trust perform over the last 36 months – please provide this with monthly numbers.

I can confirm the Trust do not currently perform Ankle replacements.

29-6-18 4130

Incidents and Discipline

Have you had a reported incident regarding staff not following your safeguarding guidance in the last three years?

Yes

If so, how many?

1

How many legal actions have been taken against you due to staff not following safeguarding guidance?

0

Has anyone been disciplined or fired due to staff not following safeguarding guidance in the last three years?

0

Training

How often do you undertake any education or training around safeguarding guidance?

All staff receive training on Induction to the Trust and then through mandatory training every 3 years for SGA level 1 and 2 ,every 3 years for SGC level 1 and 2 and 2 hours every year for level 3 SGC training. There are also additional adhoc bespoke training sessions within departments or with individuals as required.

Updating and Dissemination

How often are safeguarding guidance standards updated?

Policies for SG are updated every 3 years are as required to do so if national guidance dictates

When was the last complete review of your safeguarding guidance?

SGA policy updated July 2015 and SGC policy updated April 2016

Storage and accessibility

In what format and programme do you hold your safeguarding guidance?

Information is held within a written policy, guidance also provided on a hospital intranet page and signpost links to the local MK council website

In what format and programme do staff access this guidance?

Online and paper

Can you access safeguarding guidance on mobile devices?

Yes

If so, can this guidance be accessed while offline?

Yes, apart from Trust intranet

Audit and Review

Can your workforce audit their compliance to central standards regarding safeguarding guidelines and so identify any shortfalls?

		<p>The Trust participates annually in completing a self-assessment and assurance framework for both safeguarding adults and children. This is discussed and validated with the local clinical commissioning group. Recommendations from the assessment are then formulated and monitored through an agreed action plan.</p> <p>Do you have the capability to audit delivery standards against current safeguarding guidance?</p> <p>Safeguarding standards are audited using a safeguarding self-assessment and assurance framework. Safeguarding audits are agreed within the assurance framework and are monitored through the relevant safeguarding boards.</p> <p><u>Quantitative measures</u></p> <p>How many pages of safeguarding guidance does your organisation have?</p> <p>SGA policy has 19 pages, MCA policy has 28 pages, SGC policy has 44 pages. Other guidance is online from local council website and online within the Trusts intranet page.</p> <p>SGA – Safeguarding Adults SGC – Safeguarding Children</p>	
29-6-18	4131	<p>For the purpose of this request please treat the 6-in-1 vaccine as encompassing all three doses.</p> <p>I would like you to provide me with:</p> <p>a) The number of 6-in-1 vaccines offered to be given to babies in the financial years 2017/18, 2016/17, and 2015/16.</p> <p>b)The number of 6-in-1 vaccines that were refused by parents or guardians of the baby in the financial year 2017/18, 2016/17, and 2015/16.</p> <p>c) The number of children diagnosed with any of the following in 2017/18 alone, who had not received the 6-in-1 vaccine when they were a baby because their parent or guardian had refused it. If a child was diagnosed with more than one of the below, please provide that information: <i>diphtheria, hepatitis B, Hib, polio, tetanus, or whooping cough</i></p> <p>The subject of your request does not fall under the remit of Milton Keynes University Hospital. Please redirect</p>	

		your request to Central & North West London who can be contacted at freedomofinformation.cnl@nhs.net	
29-6-18	4132	<p>1. Does the Radiology department use Radiology Reporting Houses to outsource Radiology reporting /diagnosing outcomes?</p> <p>Yes</p> <p>2. If yes please could you provide me the Name/Names of the Reporting Houses you use?</p> <p>Medica</p>	
29-6-18	4133	Please see attached.	Link to questionnaire