

DISCLOSURE LOG

1 September 2018 – 30 September 2018

Date	Ref No	Information Requested and Response	Links to Additional Information
3-9-18	4236	Please find attached.	Link to attachment
3-9-18	4237	<p>1. Is the Trust a provider of NHS Wheelchair Services?</p> <p>If the answer to question 1 is "No", the Trust need not respond to the remainder of this request. If the answer to question 1 is "Yes", please respond to question 2.</p> <p>For the remaining questions of this request, if the Trust provides NHS Wheelchair Services under different contracts, please list the requested information for each contract.</p> <p>2. The name of the CCGs for which the Trust provides NHS Wheelchair Services; when it started providing this service; and when its current contract(s) ends</p> <p>3. The current eligibility criteria for receiving NHS-funded wheelchairs via the NHS Wheelchair Services provided by the Trust</p> <p>4. A list of all changes to the eligibility criteria for receiving NHS-funded wheelchairs via the NHS Wheelchair Services provided by the Trust, if those changes were implemented after April 1st 2015; please state not just the new criteria in each case, but also the old criteria that was altered by the change (e.g. 'inability to walk 20m unaided' replacing 'inability to walk 40m unaided')</p> <p>5. For each change listed in response to question 4, please provide details of any public consultation that was carried out on the change; whether any measures to publicise the consultation were undertaken beyond posting it online; and what responses were received to any such consultation</p> <p>6. A list of any changes to the eligibility criteria for receiving NHS-funded wheelchairs via the NHS Wheelchair Services provided by the Trust area that are currently being considered, proposed or consulted on.</p> <p>I can confirm Milton Keynes University Hospital is not a provider of NHS Wheelchair Services.</p>	

4-9-18	4238	<p>Under the terms of Freedom of Information Act I would like to request information regarding the organization's spend on systems and it's sub-systems for FY 2015-16, FY 2016-17, FY 2017-18 and projected spend for FY 2018-19.</p> <p>The Trust has produced a document entitled "IT FOI Answers" which can be found on the website 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> <p>You may also find the Trust's Annual Reports helpful. These can be found at http://www.mkhospital.nhs.uk/index.php?view=list&slug=annual-reports&option=com_docman&layout=table&Itemid=646</p>	
4-9-18	4239	<p>I work for a medical comms agency. We are developing an online resource for cancer patients which aims to help people learn more about the hospitals in their area.</p> <p>Part of the website will show patients which diagnostic tests (and therefore biomarkers) are used/available at each hospital. I have attached a list of the available tests and biomarkers, but it would be incredibly helpful if you could let me know which are available at which hospital throughout Milton Keynes Hospital NHS Foundation Trust.</p> <p>Please find attached.</p>	Link to attachment
5-9-18	4240	<p>Please see attached.</p> <p>Please note the Trust does not hold the information requested prior to 2009.</p>	Link to attachment
5-9-18	4241	<p>I am writing to enquire about Public Health Funerals your local authority or NHS trust have dealt with or are dealing with.</p> <p>Under the FOI act 2000 could you provide:</p> <ul style="list-style-type: none"> - Name of deceased - DOB and DOD - Address - If Kin have been found - If the deceased left any estate <p>The Trust can confirm that it has referred 2 cases to Milton Keynes Council. For further details you will need to contact Milton Keynes Environmental Team as the Trust does not fund funerals.</p>	

5-9-18	4242	<p>The type of contract I wish to see is below:</p> <ol style="list-style-type: none"> 1. Dedicated hosting- Managed environment 2. Co-Location- hosting allows a business to still own their own server equipment; however, instead of storing it in their own data centre, they instead are able to store it in rented space in a colocation hosting centre. 3. Cloud Hosting- <u>Cloud hosting services</u> provide hosting for websites on virtual servers, which pull their computing resource from extensive underlying networks of physical web servers. <p>Not all of these will be applicable to the organisation.</p> <p>For the different types of hosting services, can you provide me with the following information:</p> <ol style="list-style-type: none"> 1. Type of hosting – Dedicated, Co-Location, Cloud Hosting, Other? 2. Who is the supplier of the contract? If possible can you also provide me with the name of vendor, if applicable? 3. What is the annual contract value for each contract? 4. What type of cloud environment? <p>I can confirm the Trust does not make use of cloud services, however some national services are hosted external, e.g. NHS Spine, Payroll services is via the SBS contract and our EPR provider hosts the system in their own data centre.</p>	
6-9-18	4243	<p>Please provide all of results of the Digital Maturity Assessment (hereafter DMA) for your trust, which you should be able to access through the DMA portal. Each measure is represented as a score out of 100. Where possible, please also include this figures for the last (2016) digital maturity assessment.</p> <p>This will include, but may not be not limited to:</p> <ul style="list-style-type: none"> • The overall digital “readiness” of the trust • The overall digital “capability” of the trust • The overall digital “infrastructure” of the trust • Records, Assessment, & Plans • Orders & results management • Transfer of care • Medicines Optimisation • Decision Support • Remote & Assistive Care • Asset & Resource Optimisation 	

		<ul style="list-style-type: none"> • Business & Clinical Intelligence • Standards • Enabling Infrastructure <p>This request has been exempt under Section 22 Freedom of Information Act - Information intended for future publication.</p> <p>The information requested will be available within the Trust's Publication Scheme within the next 3 months.</p>	
7-9-18	4244	<p>I am writing to you to request, under the Freedom of Information act, the following things. First, any documents produced by your organisation outlining planning or preparations for the upcoming exit of the United Kingdom from the European Union. Second any advice or notices to stakeholders given by your trust in relation to the upcoming exit from the EU. Finally, a list of any payments made to external organisations or companies for services in relation to your preparation for the exit of the United Kingdom from the European Union since 23 June 2016, including, if possible, the name of the organisation or company and a description of the services requested.</p> <p>The Trust can confirm that no documents or payments to external organisation or companies for services in relation to the preparation of Brexit have been carried out.</p>	
10-9-18	4245	<p>Could you please supply me with the information that is outlined in the attached document on Disclosure and Barring Service check charges in your organisation. Please note that employers/trusts in Scotland and Northern Ireland need only complete questions 1 and 2.</p> <p>Please find attached.</p> <p>Please note the Trust plans to use the update service in-line with current practice for standard and enhanced checks.</p>	Link to attachment
11-9-18	4246	<ul style="list-style-type: none"> • How much has been spent in FY16/17 and FY17/18 on the purchase of bleeps/pagers? <p>FY16/FY17 - £6,363.00 plus VAT</p> <p>FY17/FY18 - £15,865.50</p> <ul style="list-style-type: none"> • How much has been spent on the maintenance of the bleep/pager system in FY16/17 and FY17/18 inclusive of any hardware costs? 	

		The Trust has spent £37,637.00 last financial year on its bleep system. This includes all hardware and the purchase of 1000 bleeps.	
12-9-18	4247	<p>1. Staff Numbers - Average headcount of permanent and non-permanent staff over the entire 2017/18 financial year or just the headcount as at Saturday, March 31st 2018). Can you please split this into the major staff groups used by the trust? (E.g. Medical, Nursing, Admin, AHP etc.)</p> <p>I can confirm the information requested is available within the Trusts Annual Reports available via the website at http://www.mkhospital.nhs.uk/index.php?view=list&slug=annual-reports&option=com_docman&layout=table&Itemid=646</p> <p>2. Staff Cost – Total staff cost during the 2017/18 financial year split into permanent and non-permanent staff.</p> <p>I can confirm the information requested is available within the Trusts Annual Reports available via the website at http://www.mkhospital.nhs.uk/index.php?view=list&slug=annual-reports&option=com_docman&layout=table&Itemid=646</p> <p>3. Agency Hours – Hours worked by agency staff in the 2017/18 financial year split by staff groups (E.g. Medical, Nursing, Admin, etc.) and speciality/grade (E.g. Consultants, GP, ICU Nurse, Acute Nurse, Occupational therapists, Pharmacists, Health Care Assistants, etc.) depending on how you report this within your trust.</p> <p>The Trust does not record this information.</p> <p>4. Agency Spend – Total amount spent on agency staff in the 2017/18 financial year split into the Trusts’ staff groups (E.g. Medical, Nursing, Admin, etc.) and speciality/grade (E.g. Consultants, GP, ICU Nurse, Acute Nurse, Occupational therapists, Pharmacists, Health Care Assistants, etc.) depending on how you report this within your trust.</p> <p>Please find attached spreadsheet.</p>	Link to attachment
12-9-18	4248	<p>How many “daily living aids” (eg walking sticks and crutches) were issued to patients by the hospital (A & E, Fracture clinic or similar department) in the last financial year.</p> <p>The Trust does not record this information.</p>	

		<p>How many “daily living aids” (eg walking sticks, and crutches) were picked up or recycled by the hospital (or a company working for the hospital) in the last financial year.</p> <p>The Trust does not record this information.</p> <p>How much did the hospital spend on “daily living aids” (eg walking sticks, and crutches) in the last financial year.</p> <p>The Trust does not record its purchases under the generic title of “daily living aids”, we have searched by specific items and can confirm the following:-</p> <table> <tr> <td>Crutches</td> <td>-</td> <td>£22,728.57</td> </tr> <tr> <td>Walking sticks</td> <td>-</td> <td>£1,889.69</td> </tr> <tr> <td>Walking frames</td> <td>-</td> <td>£1,317.80</td> </tr> </table> <p>Between 01/04/2017 - 31/03/2018 an additional £3726.78 was spent on crutches and walking sticks by the Physiotherapy department. We are unable to split the cost as the Trust does not record this information.</p>	Crutches	-	£22,728.57	Walking sticks	-	£1,889.69	Walking frames	-	£1,317.80	
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12-9-18	4249	<p>How many Accident and Emergency admissions have been recorded as intentional self harm (x84) as the chief complaint between 1st August 2017- 1st August 2018?</p> <p>How many Accident and Emergency admissions have been recorded with suicidal intent (R458) as the chief complaint between 1st August 2017- 1st August 2018?</p> <p>The presenting complaint field on the Trust A&E system is a free text field, and is populated by A&E reception staff when patients arrive i.e this could state sickness, which may or may not be due to alcohol, and therefore would not be picked up by any searches. Therefore, without auditing every A&E attendance for the time period provided which would require permission to access patient records and would exceed the time appropriate time limit, we are unable to provide this information.</p>										
12-9-18	4250	<p>1a. Of all patients recorded in the Sepsis CQUIN figures by the Trust, showing the number presenting with simple sepsis/ severe sepsis, Red Flag Sepsis or septic -shock, (depending on the protocols in place at the time) that received intravenous antibiotics within the hour, please state the number where death was a recorded outcome;</p> <p>The Trust do not record this information in a central location. To obtain this information would entail trawling</p>										

		<p>through patient record which would require permission and would exceed the appropriate time limit.</p> <p>1b. Of all patients recorded in the Sepsis CQUIN figures by the Trust, showing the number presenting with simple sepsis/severe sepsis, Red Flag Sepsis or septic shock, (depending on the protocols in place at the time) that did not receive intravenous antibiotics within the hour, please state the number where death was a recorded outcome;</p> <p>The Trust does not record this information in a central location. To obtain this information would entail trawling through patient record which would require permission and would exceed the appropriate time limit.</p> <p>2a. Of all patients recorded in the Sepsis CQUIN figures by the Trust for 2016-17 and 2015-16, showing the number presenting with simple sepsis/severe sepsis, Red Flag Sepsis or septic shock, (depending on the protocols in place at the time) that received intravenous antibiotics within the hour, please give the number of cases that were subsequently investigated as part of the hospital's internal clinical risk reporting process;</p> <p>The Trust is unable to provide you with this level of detail as we do not report on this from a CQUIN point of view.</p> <p>2b. Of all patients recorded in the Sepsis CQUIN figures by the Trust for 2016-17 and 2015-16, showing the number presenting with simple sepsis/ severe sepsis, Red Flag Sepsis or septic shock, (depending on the protocols in place at the time) that did not receive intravenous antibiotics within the hour, please give the number of cases that were subsequently investigated as part of the hospital's internal clinical risk reporting process;</p> <p>The Trust is unable to provide you with this level of detail as we do not report on this from a CQUIN point of view.</p> <p>3. Of questions 2a and 2b, please identify the number of investigations that related to a death outcome and the number that related to a harm outcome.</p> <p>The Trust is unable to provide this information.</p>	
14-9-18	4251	<ul style="list-style-type: none"> Does your Trust currently have a Transformation plan in place, if yes what time frame are you looking to implement this? <p>The trust has a transformation plan; this is an ongoing plan which is expected to deliver on a yearly basis</p>	

		<ul style="list-style-type: none"> Can I have a copy of your Transformation plan? <p>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 your request is based on the judgement that the Trusts ability to purchase products at a competitive price would be compromised by disclosure.</p> <ul style="list-style-type: none"> Is the Trust planning a merger with a neighbouring Trust within the next 24 months? <p>The Trust is not looking to formally merge with any neighbouring trust within the next 24 months.</p>																									
14-9-18	4252	SAR																									
14-9-18	4253	<p>I have a Freedom of Information request regarding Ophthalmology. Within your Trust how many Intra-vitreous vials / Implants have been used in the latest 4 months, if possible between May and August 2018.</p> <p>Please state the number of vials dispensed from your pharmacy in this period, if the number for wet AMD is not known, then regardless of reason for use.</p> <table border="1"> <thead> <tr> <th></th> <th>Lucentis (Ranibizumab) Injections</th> <th>Avastin (Bevacizumab) Injections</th> <th>Eylea (Aflibercept) Injections</th> <th>Iluvien (Fluocinolone) Implants</th> <th>Ozudex (Dexamethasone) Implants</th> </tr> </thead> <tbody> <tr> <td>Total Vials / Implants</td> <td>217</td> <td>58</td> <td>333</td> <td>0</td> <td>11</td> </tr> <tr> <td>Vials / Implants for Wet Age Related Macular Degeneration (wAMD)</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Vials / Implants for Diabetic Macular Oedema (DMO), Retinal Vein Occlusion (RVO) or other</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Lucentis (Ranibizumab) Injections	Avastin (Bevacizumab) Injections	Eylea (Aflibercept) Injections	Iluvien (Fluocinolone) Implants	Ozudex (Dexamethasone) Implants	Total Vials / Implants	217	58	333	0	11	Vials / Implants for Wet Age Related Macular Degeneration (wAMD)						Vials / Implants for Diabetic Macular Oedema (DMO), Retinal Vein Occlusion (RVO) or other						
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		such as mVNV						
		Please note the Trust do not record information regarding specific indication, therefore we are unable to give this information.						
14-9-18	4524	<p>1. Is your organisation currently using an e-learning / online learning management system?</p> <p>Yes</p> <p>2. If yes, who provides the system and who supplies the system?</p> <p>The application is freeware and free to download</p> <p>3. When does the current contract come to an end?</p> <p>N/A</p>						
14-9-18	4255	<p>The name of the System, the name of the supplier, the start and end date of your current contract for the following systems:</p> <p>1. Laboratory information management system (LIMS)</p> <p>WINPATH from Clinisys – 08.05.2015 to 07.05.2020</p> <p>2. Patient Administration Systems (PAS)</p> <p>E-CARE from Cerner - Rolling Contract</p> <p>3. Electronic Patient Record (EPR)</p> <p>E-CARE from Cerner - Rolling Contract</p> <p>4. Picture archiving and communication system (PACS)</p> <p>PACS - Rolling contract</p> <p>5. Radiological information system (RIS)</p>						

		<p>CRIS from HSS – expiry date 03.05.19 Contract is currently being reviewed</p> <p>6. Order Communications System (OCS)</p> <p>E-CARE from Cerner - Rolling Contract</p> <p>7. The system used within your Pathology department.</p> <p>WINPATH from Clinisys – 08.05.2015 to 07.05.2020</p> <p>Please could you tell me if any of the above systems will be going out to tender within the next 6 months?</p> <p>No.</p>																
17-9-18	4256	<p>How much money did the trust raise from car parking charges in each of the last two financial years - 2016/17 and 2017/18? Include a breakdown of staff and visitor/patient parking if possible.</p> <table data-bbox="324 829 806 1069"> <thead> <tr> <th></th> <th>£k 16-17</th> <th>£k 17-18</th> </tr> </thead> <tbody> <tr> <td>Staff</td> <td>340.0</td> <td>367.3</td> </tr> <tr> <td>Visitors</td> <td>1166.1</td> <td>1120.8</td> </tr> <tr> <td>Other</td> <td>76.5</td> <td>103.3</td> </tr> <tr> <td>TOTAL</td> <td>1582.6</td> <td>1591.4</td> </tr> </tbody> </table> <p>How much money was raised from parking fines in each of the last two financial years - 2016/17 and 2017/18? Include a breakdown of staff and visitor/patient fines if possible.</p> <p>An external contractor manages the enforcement. The Trust does not have access to records of monies raised.</p> <p>Have you increased the cost of parking in your car parks during the last financial year - between 2016/17 and 2017/18? Please give a breakdown of how much parking has increased by.</p>		£k 16-17	£k 17-18	Staff	340.0	367.3	Visitors	1166.1	1120.8	Other	76.5	103.3	TOTAL	1582.6	1591.4	
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		<p>No.</p> <p>Do you charge for disabled parking?</p> <p>No.</p>	
17-9-18	4257	<p>I am asking if you have specific protocol regarding babies born to mothers with blood group O positive ? our current protocol is to do cord blood tests for those babies including : cbc , bilirubin level , blood group and cbc . I hope you can provide me with your protocol if present to compare it with our policy.</p> <p>Please find attached.</p>	<p>Link to Neonatal Jaundice Assessment</p> <p>Link to Cord Blood Analysis</p>
17-9-18	4258	<p>Q1) Please provide the name of your Trust</p> <p>Milton Keynes University Hospital NHS Foundation Trust</p> <p>Q2) Do you have a contract with Bounty, whose representatives hand out 'Bounty Packs' to new mothers on maternity wards?</p> <p>The current contract is under review for renewal.</p> <p>Q3) If you answered YES to Question 2, how much money did your trust receive from Bounty in the financial years;</p> <p>a) 2015/16 - £6,465.58 b) 2016/17 - £6,383.16 c) 2017/18 - £4,243.90</p> <p>Q4) Please explain how the payment from Bounty is calculated (ie a pre-agreed figure, or a set payment per child born in your care)</p> <p>We are unable to answer this question as it is Bounty who calculates the payment, not Milton Keynes University Hospital.</p> <p>Q5) How many babies were born in your care during the financial years;</p>	

- a) 2015/16 - 4013
- b) 2016/17 - 3810
- c) 2017/18 – 3763

18-9-18 4259

1) From 1st January 2017 – 31st December 2017 how much did your Trust spend of interpreting services?

Month	Total Invoiced Amount
Nov-17	£4,981.50
Dec-17	£6,923.50
Jan-18	£9,537.50
Feb-18	£7,156.25
Mar-18	£8,918.00
Apr-18	£9,021.25
May-18	£9,597.25
Jun-18	£7,536.00
Jul-18	£11,856.50
Aug-18	£8,724.50

2) Do you service interpreting requirements in-house or do you outsource to a third party company?

Outsource

3) If you use a third party to service interpreting requirement

a. What is the name of the organisation you outsource to?

The big Word

b. is the interpreting services provision contracted under a OJUE/Framework or is the service provided off contract?

Contract

c. if contracted what OJUE/Framework contract is the Trust accessing and when does the contract

		<p>expire?</p> <p>Oct 2018</p> <p>d. please provide both dates if telephone and face to face interpreting are contracted separately</p> <p>N/A</p> <p>4) Who is the senior responsible officer for interpreting services at the Trust?</p> <p>Nicola Jones</p>	
21-9-18	4260	Please find attached	Link to attachment
21-9-18	4261	<p>1. What is the name of the organisation/service/authority you represent?</p> <p>Milton Keynes University Hospital NHS Foundation Trust</p> <p>2. If the information I am requesting is available elsewhere (eg, s21) please can you tell me where I can find it?</p> <p>N/A</p> <p>3. What is the name of the software you use to manage, process and respond to complaints received? (if not applicable or available elsewhere enter N/A)</p> <p>The Trust uses the Complaints Module form the Datix Risk Management Software</p> <p>4. How much does the software in question 3 cost? (if not applicable or available elsewhere enter N/A)</p> <p>The invoice includes multiple modules and is not itemised, therefore this information is not available.</p> <p>5. When is the software in question 3 due for renewal? (if not applicable or available elsewhere enter N/A)</p> <p>The system is renewed annually on 31st May.</p> <p>6. What is the name of the software you use to manage, process and respond to FOI/EIR requests? (if not applicable or available elsewhere enter N/A)</p>	

		<p>The Trust uses an in-house database.</p> <p>7. How much does the software in question 6 cost? (if not applicable or available elsewhere enter N/A)</p> <p>N/A</p> <p>8. When is the software in question 6 due for renewal? (if not applicable or available elsewhere enter N/A)</p> <p>N/A</p> <p>9. What is the name of the software you use to manage, process and respond to SAR requests? (if not applicable or available elsewhere enter N/A)</p> <p>The Trust uses an in-house database.</p> <p>10. How much does the software in question 9 cost? (if not applicable or available elsewhere enter N/A)</p> <p>N/A</p>	
24-9-18	4262	Please find attached	Link to attachment
24-9-18	4263	<p>(1) What is your Trust's policy regarding smoking on hospital grounds? Please specify. For example:</p> <ul style="list-style-type: none"> • Is smoking banned throughout the site? <p>Yes</p> <ul style="list-style-type: none"> • Is smoking banned in the car park? <p>Yes</p> <ul style="list-style-type: none"> • Is smoking banned in private vehicles while on site? 	

Yes

- **Is smoking permitted anywhere on site?**

No

- **Are there smoking shelters (eg in the car park, in the grounds)?**

No

- **Are there designated smoking areas (eg in the car park, in the grounds)?**

No

(2) On what date did the Trust adopt its current policy on smoking?

1st October 2017

(3) Does the Trust have any plans to change its smoking policy? If so, please specify what those changes will be. For example, do you intend to:

- **Remove existing smoking shelters and extend non-smoking areas, or**
- **Permit designated smoking areas or install designated smoking shelters**

No. All smoking shelters have been removed and smoking is not permitted anywhere on the Trust site. All visitors, patients and staff must leave the hospital grounds if they wish to smoke.

(4) If the answer to Q3 is 'YES' please specify the date on which the Trust plans to implement the changes.

N/A

(5) What is the Trust's policy regarding vaping in (a) hospital buildings including wards, and (b) hospital grounds?

Vaping and the use of e-cigarettes is currently banned throughout the hospital site.

		<p>(6) Does the Trust have any plans to change its vaping policy? Please specify how it will change and when.</p> <p>The Trust will continue to keep the use of vapes and e-cigarettes under review.</p> <p>(7) How are the Trust's smoking policies enforced? For example: signage, public address systems, use of CCTV cameras/wardens to monitor the site etc.</p> <p>There is extensive signage across the hospital site indicating that the site is smoke free.</p> <p>(8) How many recorded complaints has the Trust received from members of the public (including patients) about patients, visitors or staff smoking on hospital grounds since 1st January 2018?</p> <p>The Trust has received 7 smoking related informal complaints from members of the public since the start of 2018. No formal complaints have been received in that period.</p>	
	4264	SAR	
24-9-18	4265	<p>1. What percentage fill rates (doctors) were reached between January and present?</p> <p>58.9% of shifts were filled by Medical Agency Locums.</p> <p>2. Does your organisation use a Direct Engagement scheme? If so, who provides it and when does their contract expire?</p> <p>The Trust uses 247Time and the current contract end date is 31/03/2020.</p> <p>3. What percentage of bookings are made outside of the DE model (non-DE)?</p> <p>None.</p> <p>4. Do you outsource any of the following services to external companies:</p> <ul style="list-style-type: none"> •Provision of Residential Medical Officers - No •Gastroenterology/Endoscopy - No •Dermatology - Yes •Radiology – Yes (MRI) 	

		<p>5. Do you use agencies for national and international permanent doctor and/or nursing recruitment? If so, do you employ nurses from the Philippines?</p> <p>Yes the Trust uses an international agency for recruiting Filipino Nurses.</p>	
25-9-18	4266	<p>Please could you provide a structure chart of your Finance & Procurement departments via e-mail, where possible including the names of each staff member.</p> <p>The information requested can be found on the Trusts website at :</p> <p>http://www.mkhospital.nhs.uk/images/comms/BoD/MKUH_Org_Chart_Spring_2017_web.pdf</p> <p>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.</p>	
25-9-18	4267	<p>1) How many compliments did your trust receive in 2017?</p> <p>The Trust does not record this information.</p> <p>2) Do you have a procedure for handling compliments?</p> <p>Yes.</p> <p>3) Do you respond to the authors?</p> <p>Compliments received by the Chief Executive and the PALS team are acknowledged when information for correspondence is given.</p> <p>4) Do you pass the compliments onto to the complimentees?</p> <p>Yes.</p> <p>5) Do management see copies of compliments?</p> <p>Yes, they are copied in to every letter of acknowledgement written and signed by the CEO.</p>	

		<p>6) Do you analyse the content of compliments?</p> <p>We are unable to answer this question as there is no central recording system for compliments and each department/ward has their own way of dealing with compliments received.</p>	
26-9-18	4268	<p>1. How many doctors have been booked outside of IR35 since April 2017? None</p> <p>2. What is your yearly trust spend on agency locum doctors via framework agencies, broken down into grade and specialty? Please see spreadsheet attached.</p> <p>3. What is your yearly trust spend on agency locum doctors via OFF-framework agencies, broken down into grade and specialty? The Trust does not contract off framework</p> <p>4. What is your average total charge rate for a locum consultant doctor? We do not record this information</p> <p>5. Who is the highest paid locum Consultant, what is the hourly rate and in what specialty do they practice? Gastroenterology at an hourly rate of £115per hour.</p> <p>6. Please can you outline your spend per agency, broken down by grade and specialty of doctor over the past 12 months? Please see spreadsheet attached.</p>	<p>Link to attachment Q2 Link to attachment Q6</p>
26-9-18	4269	<p>Q1</p> <p>a) VTE Hospitalisations: No</p> <p>VTE re-admissions: No</p> <p>Length of stay in hospital due to a VTE diagnosis: No</p> <p>b) Does the Trust provide a cost of VTE management (i.e. assessing, diagnosing, treating and</p>	

reducing the risk of VTE): No

- c) Does the Trust estimate the annual all-cause costs of the treatment of VTE complications (i.e. post thrombotic syndrome (PTS), and chronic thromboembolic pulmonary hypertension (CTEPH)? No
- d) Does the Trust estimate the annual all-cause costs of the treatment of VTE comorbidities? No
- e) Between 1 April 2017 and 31 March 2018, please estimate how much your Trust spent on VTE. Nil
- f) Between 1 April 2017 and 31 March 2018, please estimate how much your Trust spent on VTE in the following health settings. Nil
- g) Between 1 April 2017 and 31 March 2018, please estimate how much your Trust spent on VTE in the following health settings Nil

Q2

- a) Between 1 April 2017 and 31 March 2018, has your Trust imposed any financial sanctions on providers for failure to comply with the national obligation to perform Root Cause Analyses of all confirmed cases of hospital-associated thrombosis (HAT)? Nil
- b) Between 1 April 2017 and 31 March 2018, has your Trust imposed sanctions (e.g. percentage reduction in tariff payments) on secondary care providers that fail to risk assess at least 95 per cent of all adult inpatients? Nil
- c) Please outline, if any, the monetary amount the Trust has paid out in clinical negligence claims due to failures to undertake VTE prevention duties in the last three years:

Aug 2016 damages £16,000 claimant costs £70,000 defence costs £7,942.54

Jun 2017 damages £4,000 claimant costs £8,100 defence costs £1,293.02

		<p>Mar 2018 damages £17,500 claimant costs £15,000 defence costs £2,346</p> <p>Q3</p> <p>a) Please outline, if any, the monetary amount the Trust has paid out in penalty fines per patient missed in the last three years. N/A</p>	
26-9-18	4270	<p>What is the latest available figure for the amount paid to your trust by Bounty?</p> <p>2013/14 - £0 2014/15 - £5,145.80 2015/16 - £6,465.58 2016/17 - £6,383.16 2017/18 - £4,243.90</p> <p>Total - £22,238.44</p>	
27-9-18	4271	<p>A letter mentioning the average yearly patient load / census on the Paediatric and Neonatal unit (could be a bit more specific mentioning the data for the year 2017). The letter could have the following information,</p> <p>1. Bed capacity of PAU (ward 4), Ward 5 and Neonatal unit</p> <p>PAU – 10 spaces and 6 escalation beds, plus a Paediatric Day Surgery Unit with 6 beds and PDCU 6 Beds</p> <p>2. Different categories of outpatient clinics (general, speciality, neonatal, neurodevelopment etc. categories)</p> <p>Please see information as requested. Please note these are all consultant led clinics, nurse-led clinics are not listed. Some of these clinics are joint clinics with visiting clinicians from Oxford (our tertiary centre); these are listed these separately.</p> <p>Paediatric consultant led clinics:</p> <ul style="list-style-type: none"> • General Paediatrics • Allergy • Diabetes 	<p>Link to attachment</p>

- Neonatal
- Ultrasonography
- Bayleys (developmental)
- Oncology
- Sickle cell
- Cystic Fibrosis
- Neurology
- Coeliac
- Endocrine
- Respiratory
- Asthma

Joint clinics held with visiting clinicians:

- Joint IBD
- Rheumatology
- Oncology Psychologist
- Diabetes Psychologist
- Family Clinic
- Sickle Cell
- Oncology
- Neurology
- Haematology
- Endocrine
- Cystic Fibrosis
- Cardiology
- Respiratory

As mentioned above, there are a number of clinics, visits and procedures that take place which are nurse led, this includes procedures and tests carried out in our Paediatric Day Care Unit, respiratory/asthma, cystic fibrosis, diabetes and our community nursing team who primarily see patients at home.

3. Total number of patients attending the outpatient clinic

		<p>Please see attached</p> <p>4. Total number of PAU (ward 4) patients attended to</p> <p>Please see attached</p> <p>5. Total admitted patients in the ward 5</p> <p>Please see attached</p> <p>6. Total patients admitted to the neonatal unit.</p> <p>Please see attached</p>	
27-9-18	4272	<p>1.) Does your trust run a headache clinic?</p> <p>Yes</p> <p>If YES how many per week</p> <p>Outpatient Clinics are run in both General Neurology and Pediatric clinics Monday – Friday. Please note these are not specifically Headache/Migraine clinics.</p> <p>2.) Does your trust run a migraine clinic?</p> <p>Yes</p> <p>If YES how many per week</p> <p>Outpatient Clinics are run in both General Neurology and Pediatric clinics Monday – Friday. Please note these are not specifically Headache/Migraine clinics.</p> <p>3.) Does your trust run a botulinum A [botox] clinics (regardless of any indication or department)?</p>	<p>Link to attachment</p>

		<p>No. Adults that fulfill the NICE criteria for Botox in Chronic Migraines are referred on to a Regional Centre (Oxford)</p> <p>4.) In the past 6 months how many patients have been treated for chronic migraine?</p> <p>Please see attached.</p> <p>5.) Could you please provide me with the following numbers of patients treated in the last 6 months, with the following drugs for Chronic Migraine. If none, please state None.</p> <ul style="list-style-type: none"> • Botox • Dysport • Xeomin • Topiramate / anticonvulsant • Beta-blocker • Calcium channel blocker • Anti-serotonergic • Tricyclic anti-depressant <p>The Trust does not record this information.</p>	
28-9-18	4273	<p>I'm requesting the following information:</p> <ul style="list-style-type: none"> • Organisational charts for Each of your divisions, with Job titles down to an 8a Level to include any operations Management staff (e.g. Service Manager, General Manager, Assistant Director of Operations, Chief Operating Officer etc) • Organisation charts for the IM&T division • Organisation charts for any areas that deal with Transformation/PMO/Change Management • Organisation charts for any roles that covers Governance, Quality Or Risk <p>Thank you for your recent FOI request.</p> <p>The information requested can be found on the Trusts website at :</p> <p>http://www.mkhospital.nhs.uk/images/comms/BoD/MKUH_Org_Chart_Spring_2017_web.pdf</p>	

		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.	
30-9-18	4274	<p>1. Please could you send us your current policies for treatment (surgical and/or injection) of base of thumb arthritis including any funding criteria.</p> <p>2. Please could you send us any older policies including funding criteria for treatment of base of thumb arthritis from 1998 to present day.</p> <p>3. If not included in the policy what criteria is used to categorise severity of base of thumb arthritis into mild moderate or severe.</p> <p>Please note the Trust does not have a policy document in this area.</p>	