

FOI 5426 - Patients with no fixed abode

Question	Notes/Comments	Response						
		2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
1) Please provide the total number of A&E attendances by patients of No Fixed Abode for each of the financial years from 2009/10 to 2019/20.	Included are all attendances to MKUH's emergency department between 1st April 2013 and 31st March 2020 where the patients postcode was recorded as 'ZZ99 3VZ', the postcode used for no fixed abode.	371	337	357	109	128	123	128
2) Please provide the total number of hospital admissions by patients of No Fixed Abode for each of the same financial years.	Included are all inpatient admissions to MKUH between 1st April 2013 and 31st March 2020 where the patients postcode was recorded as 'ZZ99 3VZ', the postcode used for no fixed abode.	100	89	77	27	33	32	31
3) Please provide the total annual bed days for these patients of No Fixed Abode (totals should be provided as a sum of all patients over the whole financial year, not broken down by individual patients).	Included are the General & Acute Bed Days for each financial year between 2013/14 and 2019/20 for patients whose postcode was recorded as 'ZZ99 3VZ', the postcode used for no fixed abode.	169	154	193	50	83	164	237
4) Please provide the number of long-stay patients of no fixed abode for the same financial years and the length of each stay. (long stay is defined by the NHS as 21 days or longer).	Included are all inpatient admissions to MKUH between 1st April 2013 and 31st March 2020 where the patients postcode was recorded as 'ZZ99 3VZ', the postcode used for no fixed abode and the patient had a length of stay of 21 days or more.	2	2	2	0	1	1	4
5) Please provide the number of patients attending or admitted to hospital of No Fixed Abode (for each of the same financial years) categorised or marked with a hepatitis C infection code.	A) ED attendances	We are unable to provide any data prior to May 2018 as the diagnosis was recorded as a free text field and can therefore not be used to get reliable and accurate data. After May 2018, specific diagnosis and presenting complaint codes are used, making the data more reliable. There is no specific diagnosis code for Hepatitis C, so we are unable to provide data for this question.						
	B) Inpatient admissions	0	0	0	3	2	3	6
6) Please provide the number of patients attending or admitted to hospital of No Fixed Abode (for each of the same financial years) categorised or marked with a hepatitis B infection code.	A) ED attendances	We are unable to provide any data prior to May 2018 as the diagnosis was recorded as a free text field and can therefore not be used to get reliable and accurate data. After May 2018, specific diagnosis and presenting complaint codes are used, making the data more reliable. The diagnoses and chief complaint codes used are shown in the 'ED Codes' tab.						
	B) Inpatient admissions	0	0	0	0	0	0	0
7) Please provide the number of patients attending or admitted to hospital of No Fixed Abode (for each of the same financial years) categorised or marked with a self-poisoning or self-harm code.	A) ED attendances	We are unable to provide any data prior to May 2018 as the diagnosis was recorded as a free text field and can therefore not be used to get reliable and accurate data. After May 2018, specific diagnosis and presenting complaint codes are used, making the data more reliable. Please note: Due to the nature of this question and question 8, there may be some overlap in the number of attendances reported, specifically those patients recorded as having an overdose.						
	B) Inpatient admissions	14	11	7	4	4	4	2
8) Please provide the number of patients attending or admitted to hospital of No Fixed Abode (for each of the same financial years) categorised or marked with: 'drug related mental and behavioural disorders, poisoning by drug misuse or admissions where drug related mental and behavioural disorders were a factor. If your trust does not use these NHS England measures – please supply figures for your own drug misuse codes or labels.	A) ED attendances	We are unable to provide any data prior to May 2018 as the diagnosis was recorded as a free text field and can therefore not be used to get reliable and accurate data. After May 2018, specific diagnosis and presenting complaint codes are used, making the data more reliable. The diagnoses and chief complaint codes used are shown in the 'ED Codes' tab. Please note: Due to the nature of this question and question 7, there may be some overlap in the number of attendances reported, specifically those patients recorded as having an overdose.						
	B) Inpatient admissions	10	10	16	4	11	8	10
9) Please provide the number of patients attending or admitted to hospital of No Fixed Abode (for each of the same financial years) categorised or marked with a latent tuberculosis infection, or other tuberculosis, code.	A) ED attendances	We are unable to provide any data prior to May 2018 as the diagnosis was recorded as a free text field and can therefore not be used to get reliable and accurate data. After May 2018, specific diagnosis and presenting complaint codes are used, making the data more reliable. The diagnoses and chief complaint codes used are shown in the 'ED Codes' tab.						
	B) Inpatient admissions	0	0	0	0	0	0	0

Question	ICD10 code
5B	B171: Acute hepatitis C
5B	B182: Chronic viral hepatitis C
6B	B160: Acute hepatitis B with delta-agent (coinfection) with hepatic coma
6B	B161: Acute hepatitis B with delta-agent (coinfection) without hepatic coma
6B	B162: Acute hepatitis B without delta-agent with hepatic coma
6B	B169: Acute hepatitis B without delta-agent and without hepatic coma
6B	B180: Chronic viral hepatitis B with delta-agent
6B	B181: Chronic viral hepatitis B without delta-agent
7B	X60: Intentional self-poisoning by and exposure to nonopioid analgesics, antipyretics and antirheumatics
7B	X61: Intentional self-poisoning by and exposure to antiepileptic, sedative-hypnotic, antiparkinsonism and psychotropic drugs, not elsewhere classified
7B	X62: Intentional self-poisoning by and exposure to narcotics and psychodysleptics [hallucinogens], not elsewhere classified
7B	X63: Intentional self-poisoning by and exposure to other drugs acting on the autonomic nervous system
7B	X64: Intentional self-poisoning by and exposure to other and unspecified drugs, medicaments and biological substances
7B	X65: Intentional self-poisoning by and exposure to alcohol
7B	X66: Intentional self-poisoning by and exposure to organic solvents and halogenated hydrocarbons and their vapours
7B	X67: Intentional self-poisoning by and exposure to other gases and vapours
7B	X68: Intentional self-poisoning by and exposure to pesticides
7B	X69: Intentional self-poisoning by and exposure to other and unspecified chemicals and noxious substances
7B	X70: Intentional self-harm by hanging, strangulation and suffocation
7B	X71: Intentional self-harm by drowning and submersion
7B	X72: Intentional self-harm by handgun discharge
7B	X73: Intentional self-harm by rifle, shotgun and larger firearm discharge
7B	X74: Intentional self-harm by other and unspecified firearm discharge
7B	X75: Intentional self-harm by explosive material
7B	X76: Intentional self-harm by smoke, fire and flames
7B	X77: Intentional self-harm by steam, hot vapours and hot objects
7B	X78: Intentional self-harm by sharp object
7B	X79: Intentional self-harm by blunt object
7B	X80: Intentional self-harm by jumping from a high place
7B	X81: Intentional self-harm by jumping or lying before moving object
7B	X82: Intentional self-harm by crashing of motor vehicle
7B	X83: Intentional self-harm by other specified means
7B	X84: Intentional self-harm by unspecified means
8B	F11: Mental and behavioural disorders due to use of opioids
8B	F12: Mental and behavioural disorders due to use of cannabinoids
8B	F13: Mental and behavioural disorders due to use of sedatives or hypnotics
8B	F14: Mental and behavioural disorders due to use of cocaine
8B	F15: Mental and behavioural disorders due to use of other stimulants, including caffeine
8B	F16: Mental and behavioural disorders due to use of hallucinogens
8B	F19: Mental and behavioural disorders due to multiple drug use and use of other psychoactive substances
9B	A15: Respiratory tuberculosis, bacteriologically and histologically confirmed
9B	A16: Respiratory tuberculosis, not confirmed bacteriologically or histologically
9B	A17: Tuberculosis of nervous system
9B	A18: Tuberculosis of other organs
9B	A19: Miliary tuberculosis
9B	J65X: Pneumoconiosis associated with tuberculosis

Question	Diagnosis or Chief Complaint Code	Description
6A	Diagnosis	Hepatitis B [ND]
7A	Diagnosis	Opiate overdose
7A	Diagnosis	Toxic effect of plant
7A	Diagnosis	Paracetamol overdose
7A	Diagnosis	NSAID overdose
7A	Diagnosis	Antidepressant overdose
7A	Diagnosis	Benzodiazepine overdose
7A	Diagnosis	Ingestion of methanol / ethylene glycol
7A	Diagnosis	Poisoning (NOT plant / venom / gas / vapour)
7A	Chief Complaint	Self-harm
7A	Chief Complaint	Poisoning from any source
8A	Diagnosis	Opiate overdose
8A	Diagnosis	Dependence on sedatives or hypnotics
8A	Diagnosis	Paracetamol overdose
8A	Diagnosis	NSAID overdose
8A	Diagnosis	Antidepressant overdose
8A	Diagnosis	Benzodiazepine overdose
8A	Diagnosis	Recreational drug use
8A	Diagnosis	Alcohol dependence syndrome
8A	Diagnosis	Dependence on opioids
8A	Chief Complaint	Drug / alcohol intoxication or withdrawal
9A	Diagnosis	Tuberculosis [ND]