**An example of responses issued under the Freedom of Information Act in January 2016**

<table>
<thead>
<tr>
<th>Number</th>
<th>Date Received</th>
<th>Applicant</th>
<th>Information Requested and Response</th>
</tr>
</thead>
</table>
| 704.15 | 09.12.15      | Media - whatdotheyknow  | 1. Does your Trust outsource any of the activities within the following departments to the external organisation:  
Finance - No  
Legal - No  
HR – No  
2. If so, what was the cost of outsourcing these activities for each of the department in the financial year ending March 2015 and the current financial year to date (if this is not available please state what the projected cost is likely to be) for each of the departments.  
Not applicable. |
| 705.15 | 09.12.15      | Commercial              | 1. Does your trust run a dedicated Gastroenterology infusion clinic for the treatment of patients with Infliximab [or Vedolizumab]  
Yes.  
2. If Yes, how frequently are they.  
We have an infusion bay running five days a week.  
3. Could you please provide me with the following numbers of patients treated in the last six months with the following drugs for the conditions listed below. |

<table>
<thead>
<tr>
<th>Drug</th>
<th>Rheumatology [Rheumatoid Arthritis, Ankylosing Spondylitis and Psoriatic Arthritis]</th>
<th>Dermatology [Psoriasis]</th>
<th>Hidradenitis suppurativa (sometimes known as acne inversa) L73.2</th>
<th>Gastroenterology [Crohn's / Ulcerative Colitis]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abatacept (Orecia)</td>
<td>37</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Adalimumab (Humira)</td>
<td>376</td>
<td>26</td>
<td>0</td>
<td>25</td>
</tr>
<tr>
<td>Apremilast (Otezla)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Certolizumab Pegol (Cimzia)</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Etanercept (Enbrel)</td>
<td>285</td>
<td>7</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Golimumab (Simponi)</td>
<td>21</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Infliximab (Remicade)</td>
<td>25</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Infliximab biosimilar (Inflectra)</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>31</td>
</tr>
<tr>
<td>Infliximab biosimilar (Remsima)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Rituximab (MabThera)</td>
<td>175</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Secukinumab (Cosentyx)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Tocilizumab (RoActemra)</td>
<td>57</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Drug</td>
<td>Count</td>
<td>Code</td>
<td>Description</td>
<td></td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-------</td>
<td>------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Tofacitinib [Xeljanz]</td>
<td>0</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ustekinumab (Stelara)</td>
<td>0</td>
<td>43</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vedolizumab (Entyvio)</td>
<td>0</td>
<td>0</td>
<td>12</td>
<td></td>
</tr>
</tbody>
</table>

1. How many instances of abandoned motor vehicles were recorded between 2004-15? If the data doesn't stretch back to 2004, please use the earliest you have.
2. If a 3rd party was called to recover, what was the average cost involved?

As the management of the car parks, site security, patrols and CCTV etc are contracted out by the trust to a third party, we are unable to provide the requested information.

I would like to request the following information about the software that you currently have in use.

1. Do you currently have endoscopy reporting software installed?
   Yes.
2. If the answer to question 1 is yes, who is the provider of this software?
   Ascribe.
3. If the answer to question 1 is yes, how long did implementing the system take?
   Unknown – we have been using for many years
4. Do you currently have cystoscopy reporting software installed?
   No.
5. If the answer to question 2 is yes, who is the provider of this software?
   Not applicable.
6. If the answer to question 2 is yes, how long did implementing the system take?
   Not applicable.
7. Do you currently have bronchoscopy reporting software installed?
   Yes.
8. If the answer to question 3 is yes, who is the provider of this software?
   Ascribe.
9. If the answer to question 3 is yes, how long did implementing the system take?
   Unknown – we have been using for many years.
10. Do you currently have any software installed to support the tracking of long term gastroenterology patients (eg. IBD patients)?
    Yes.
11. If the answer to question 4 is yes, who is the provider of this software?
    Epic.
12. If the answer to question 4 is yes, how long did implementing the system take?
    April 2013-October 2014
13. Do you currently have order communications software installed?
    Yes.
14. If the answer to question 5 is yes, who is the provider of this software?
    Epic.
15. If the answer to question 5 is yes, how long did implementing the system take?
    April 2013-October 2014
16. Do you currently have a patient administration system installed?
    Yes.
17. If the answer to question 6 is yes, who is the provider of this software?
    Epic.
18. If the answer to question 6 is yes, how long did implementing the system take?
    April 2013-October 2014
19. Do you currently have an unscheduled care/emergency department system installed? 
   Yes.
20. If the answer to question 7 is yes, who is the provider of this software? 
   Epic
21. If the answer to question 7 is yes, how long did implementing the system take? 
   April 2013-October 2014
22. Do you currently have an integration platform installed? 
   Yes.
23. If the answer to question 8 is yes, who is the provider of this software? 
   Intersystems
24. If the answer to question 8 is yes, how long did implementing the system take? 
   12 months
25. Do you currently have any business intelligence systems installed? 
   Yes.
26. If the answer to question 9 is yes, who is the provider of this software? (If there is more than 
   one provider for different departments please include each provider and the department their 
   solution is used in) 
   QlikView.
27. If the answer to question 9 is yes, how long did implementing the system(s) take? 
   Unknown - we have been using for many years.
28. Do you currently have a pharmacy stock management system installed? 
   Yes.
29. If the answer to question 10 is yes, who is the provider of this software? 
   Ascribe & EPIC
30. If the answer to question 10 is yes, how long did implementing the system take? 
   Ascribe: Historical system 'Ascribe' in place for 8 years (July 2007) and requires on-going 
   maintenance until we are able to move fully to EPIC (timescale unknown at present). 
   EPIC: April 2013-October 2014
31. Do you currently have an eprescribing solution installed? 
   Yes.
32. If the answer to question 11 is yes, who is the provider of this software? 
   Epic.
33. If the answer to question 11 is yes, how long did implementing the system take? 
   April 2013-October 2014
34. Do you currently have an electronic document and records management solution installed? 
   Yes.
35. If the answer to question 12 is yes, who is the provider of this software? 
   Epic.
36. If the answer to question 12 is yes, how long did implementing the system take? 
   April 2013-October 2014
37. If possible, please provide the associated costs of installing and supporting each system 
   individually. 
   Ascribe and QlikView – costs are unknown as these systems have been in place for many years. 
   Epic and Intersystems – these were part of the eHospital programme with 10 year costs of £40m 
   for Epic, £140m for HP as infrastructure providers and £20m of implementation costs for the 
   Trust. The Intersystems product is provided as a managed system through HP. Epic is sourced 
   directly from Epic Systems but is hosted on the HP platform.
I am contacting on behalf of the British Association of Prosthetists and Orthotists. BAPO are looking to locate the number of Prosthetists and Orthotists directly employed by Cambridge University Hospitals NHS Foundation Trust from 2005 - 2015. We would prefer if these numbers could be broken down into the number of Prosthetists and the number of Orthotists and region of employment if at all possible.

The Trust does not directly employ either Orthotics or Prosthetics therapists. The Trust has sub contracted this service provision to Opcare Ltd who directly employ the therapists.

Please supply the spend in £s for sutures between 1st October 2014 and 30th September 2015.

The Trust spend on sutures for the period 1st October 2014 and 30th September 2015 was £617,435.42

What was the trusts total spend on sterilisation in 2014?
£2.85m

What was the trusts spend on sterilisation of Orthopaedic equipment in 2014?
Sterile Services does not track the cost of processing orthopaedic equipment separately from equipment for other surgical specialties.

How many instruments sets in 2014 had to be fast tracked, i.e. sterilized at a higher cost to be returned to theatres in a shorter time frame than usual?
Theatres requested that 15% of sets were Fast Tracked, however this figure does not necessarily reflect the actual need for items to be fast tracked which is significantly lower based on the number Fast Tracked items that are still on the shelf unused 24 hours after they were ready for use. (NB. there is no additional charge within the Trust for items to be Fast Tracked)

How long is the current sterilization service contracted until?
The service is run ‘in-house’.

How many trays in 2014 were returned to the account non-compliant?
353, this represents 0.1% of all packs produced

What were the reasons for the sterilised trays being classed as non-compliant.
The five most common non-conformances were: Missing Item 45%, Incorrect Item 19%, Miscellaneous Issue 10%, Extra item 7%, Contaminated Item 5%.

Please provide me with an estimate of how much the trust spent on the procurement process for the award of the eHospital contracts. Please break down the figures down into individual costs, such as staff time, consultants, legal fees etc
However, please only do so via a method that comes within the 18-hour time limit outlined under FOI legislation. For instance, could you provide direct costs such as consultants, legal fees etc first, and only then attempt to work out more abstract costs such as staff time etc
Please note - the procurement itself started with the OJ notice being advertised on 3 June 2011 and preferred bidders chosen in April 2012, contracts were not signed until a year later in April 2013.

<table>
<thead>
<tr>
<th></th>
<th>2011/12</th>
<th>2012/13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff Pay</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consultant</td>
<td>415,805</td>
<td>630,447</td>
</tr>
<tr>
<td>Non consultant</td>
<td>155,835</td>
<td>355,637</td>
</tr>
<tr>
<td>Total Pay</td>
<td>571,640</td>
<td>986,084</td>
</tr>
<tr>
<td>Total Non Pay</td>
<td>172,819</td>
<td>819,182</td>
</tr>
<tr>
<td>Grand total</td>
<td>744,459</td>
<td>1,805,266</td>
</tr>
</tbody>
</table>

We request that you fill out the below table with the relevant information regarding Bank Staff (Medical Locums) at your Trust.
<table>
<thead>
<tr>
<th>Grade</th>
<th>Social Pay Rate</th>
<th>Unsocial Pay Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foundation Year 1</td>
<td>£24</td>
<td>£28</td>
</tr>
<tr>
<td>Foundation Year 2</td>
<td>£24</td>
<td>£35</td>
</tr>
<tr>
<td>Registrar (SP1-2)</td>
<td>£30</td>
<td>£40</td>
</tr>
<tr>
<td>Registrar (SP3+)</td>
<td>£35</td>
<td>£47</td>
</tr>
<tr>
<td>Dental Core Training</td>
<td>£30</td>
<td>£40</td>
</tr>
<tr>
<td>Specialty Doctor/Staff Grade</td>
<td>£50</td>
<td>£50</td>
</tr>
<tr>
<td>Associate Specialist</td>
<td>£50</td>
<td>£50</td>
</tr>
<tr>
<td>Consultant</td>
<td>£65</td>
<td>£65</td>
</tr>
</tbody>
</table>

20.16 11.01.16 Individual

The eHospital business case was prepared under the premise the project would be a joint venture with Papworth Hospital.
1. Since Papworth decided not to pursue eHospital, has an up-to-date business case or any other assessment of the cost / savings implications to CUH been prepared? If so, please provide a copy of this.
2. In addition, please outline any additional savings or costs the trust has incurred since it implemented eHospital, which are directly linked to Papworth's withdrawal from the project. Please break this down to the individual cost / saving item, with a description of each one and the value.

There has been no exercise undertaken on the above.