

Royal Stoke University Hospital

Quality, Safety and Compliance Department

Newcastle Road Stoke-on-Trent Staffordshire ST4 6QG

Date: 18th May 2018

Ref: FOIA Reference 2018/19-034

Tel: 01782 676474 Email foi@uhnm.nhs.uk

Dear

I am writing in response to your email dated 16th April 2018 requesting information under the Freedom of Information Act (2000) regarding Thyroid Surgery. I sincerely apologise for the delay in responding.

As of 1st November 2014 University Hospitals of North Midlands NHS Trust (UHNM) manages two hospital sites – Royal Stoke University Hospital, and County Hospital (Stafford). Therefore the response below is for the two sites combined from that date where appropriate.

- I am making this request under the Freedom of Information Act. All questions should be relatively easy to answer, but if there are any questions you are not able to answer, please give reasons for not providing the information and please do still answer the other questions.
 - 1). Do any of the hospital (s) in your Trust / Health Service organisation admit as daycase or longer patients who are admitted to undergo thyroid surgery?

Yes() No()

If no, there is no need to answer the rest of these questions. Please just confirm with the answer "no' to question 1, including the name of your Trust or other Health Service organisation in your reply

If the answer to question 1 is 'Yes' yes then please answer the following additional questions

A1 Yes

- Q2 Thyroid surgery in your Trust or other health service organisation
 - 2a) How many consultant surgeon(s) in your Trust or other health service organisation undertake thyroid surgery operations?
 - 2b) What are the parent specialties of each of the surgeons undertaking thyroid surgery operations eg general surgery, endocrine surgery, otolaryngology, OMFS etc. Please give numbers for each eg 2 Otolaryngology, 1 General Surgery etc.



2c) In 2017 (1st Jan to 31st st Dec 2017) how many thyroid operations procedures did each consultant surgeon undertake (include number undertaken by other team members where the patients were under the care of the consultant).

Please break down also by parent specialty E.g. Consultant 1 Gen Surg 25 operations, Consultant 2 Gen Surg, 10 operations, Consultant 3 Otolaryngology, 18 operations etc. In case of consultants working together on the same patient at the same time, please just include the information for the consultant under whose care the patient was admitted.

2d)

- i) How many of the consultant surgeons undertaking thyroid surgery in your Trust or other health service organisation submit all or most of their thyroid patient outcome data to the United Kingdom Register of Thyroid and Endocrine Surgery (UKRETS) provided by British Association of Thyroid and Endocrine Surgery?
- ii) Of this group what is the breakdown of their parent specialt(ies) eg 1 gen surg, 1 otolaryngology etc.
- 2e) With regard to the local Thyroid cancer MDT how many of the consultant surgeons undertaking thyroid surgery in your trust or other health service organisation are:

i) Core members of the local thyroid cancer MDT.	Number = ()
Please also give breakdown by parent speciality		
ii) Extended members of the local thyroid cancer MDT.	Number = ()
Please also give breakdown by parent speciality		
iii) Not connected with the local thyroid cancer MDT	Number = ()
Please also give breakdown by parent speciality		

2f) Which Trust or other health service organisation and which hospital site hosts the local thyroid Cancer MDT that connected surgeons attend?

A2 Please see below:

2a) How many consultant surgeon(s) in your Trust or other health service organisation undertake thyroid surgery operations?	4
2b) What are the parent specialties of each of the surgeons undertaking thyroid surgery operations eg general surgery, endocrine surgery, otolaryngology, OMFS etc. Please give numbers for each eg 2 Otolaryngology, 1 General Surgery etc.	4 Otolaryngology



2c) In 2017 (1st Jan to 31st Dec 2017) how many thyroid operations procedures did each consultant surgeon undertake (include number undertaken by other team members where the patients were under the care of the consultant).	Consultant 1 (Otolaryngology) = 47 Consultant 2 (Otolaryngology) = 37 Consultant 3 (Otolaryngology) = 34 Consultant 4 (Otolaryngology) = 94
Please break down also by parent specialty E.g. Consultant 1 Gen Surg 25 operations, Consultant 2 Gen Surg, 10 operations, Consultant 3 Otolaryngology, 18 operations etc. In case of consultants working together on the same patient at the same time, please just include the information for the consultant under whose care the patient was admitted.	
i) How many of the consultant surgeons undertaking thyroid surgery in your Trust or other health service organisation submit all or most of their thyroid patient outcome data to the United Kingdom Register of Thyroid and Endocrine Surgery (UKRETS) provided by British Association of Thyroid and Endocrine Surgery?	i) all 4
ii) Of this group what is the breakdown of their parent specialt(ies) eg 1 gen surg, 1 otolaryngology etc.	ii) Otolaryngology
2e) With regard to the local Thyroid cancer MDT how many of the consultant surgeons undertaking thyroid surgery in your Trust or other health service organisation are:	
i) Core members of the local thyroid cancer MDT. Number = ()	i) 4
Please also give breakdown by parent speciality ii) Extended members of the local thyroid cancer MDT. Number = () Please also give breakdown by parent speciality	ii) 0
iii) Not connected with the local thyroid cancer MDT Number = () Please also give breakdown by parent speciality	iii) O
2f) Which Trust or other health service organisation and which hospital site hosts the local thyroid Cancer MDT that connected surgeons attend?	Telford Wolverhampton

Q3 This question only applies if your Trust or other Health Service Organisation Hosts the local Thyroid MDT.



3b) Is the MDT:				
i) 'Stand alone' ()				
ii) Adjacent in time to the Head and Neck MDT but not within the Head and Neck MDT ()				
iii) Within the Head and Neck MDT. ()				
iv) Other – please give details:				
v) What medical / surgical / diagnostic specialties are represented in the CORE membership of the MDT (doctors only)				
vi) What medical / surgical / diagnostic specialties are represented in the EXTENDED membership of the MDT (doctors only)				
3c) Does the MDT Routinely discuss the following groups of patients?				
i) Patients who are being investigated but have not yet had surgery but where pre operative investigation has shown a high likelihood of cancer eg Thy 4 or 5 cytology or equivalent, or U 4 or 5 on Ultrasound				
Yes, always or almost always () Sometimes () Never/almost never ()				
Other – give details				
ii) Patients who are being investigated but have not yet had surgery but where pre operative investigation has shown an intermediate risk of cancer eg U3 ultrasound or Thy3f / a or equivalent on needle biopsy				
Yes, always or almost always () Sometimes () Never/almost never ()				
Other – give details				
i) Patients who have had thyroid surgery and where histopathology has shown thyroid cancer in the resected specimen?				

3a) What is the frequency of the local thyroid cancer MDT meeting? ie weekly,

fortnightly, monthly



Yes, always or almost always () Sometimes () Ne	ever/almost never ()
Other – give details	
A3 Please see below: 3a) What is the frequency of the local thyroid cancer MDT meeting? ie weekly, fortnightly, monthly	weekly
3b) Is the MDT: i) 'Stand alone' () ii) Adjacent in time to the Head and Neck MDT but not within the Head and Neck MDT ()	ii) (Yes)
iii) Within the Head and Neck MDT. ()iv) Other – please give details:v) What medical / surgical / diagnostic specialties are represented in	v) (ENT, Oncology, Endocrine, Pathology, Radiology)
the CORE membership of the MDT (doctors only) vi) What medical / surgical / diagnostic specialties are represented in the	
EXTENDED membership of the MDT (doctors only) 3c) Does the MDT Routinely discuss the following groups of patients? i) Patients who are being investigated but have not yet had surgery but where pre operative investigation has shown a high likelihood of cancer eg Thy 4 or 5 cytology or equivalent or U 4 or 5 on Ultrasound.	
Yes, always or almost always () Sometimes () Never/almost never ()	i) (yes)
Other – give details	;;) (, (a) a)
ii) Patients who are being investigated but have not yet had surgery but where pre operative investigation has shown an intermediate risk of cancer eg U3 ultrasound or Thy3f / a or equivalent on needle biopsy	ii) (yes)
Yes, always or almost always () Sometimes () Never/almost never () Other – give details	i) (yes)
i) Patients who have had thyroid surgery and where histopathology has shown thyroid cancer in the resected specimen? Yes, always or almost always () Sometimes () Never/almost never ()	
Other – give details	



*Please note that any individuals identified do not give consent for their personal data to be processed for the purposes of direct marketing.

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This letter confirms the completion of this request. A log of this request and a copy of this letter will be held by the Trust.

If you have any queries related to the response provided please in the first instance contact my office.

Should you have a complaint about the response or the handling of your request, please also contact my office to request a review of this. If having exhausted the Trust's FOIA complaints process you are still not satisfied, you are entitled to approach the Information Commissioner's Office (ICO) and request an assessment of the manner in which the Trust has managed your request.

The Information Commissioner may be contacted at:

Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF or via www.ico.org.uk.

If following review of the responses I can be of any further assistance please contact my secretary on 01782 676474.

Yours,



Mojgan Casillas
Interim Information Governance Manager