

STOKE MANDEVILLE HOSPITAL NATIONAL SPINAL INJURIES CENTRE

PATIENTS' FORUM

Notes of meeting held on Wednesday 9th July 2003
at 6.30 pm in the NSIC Dining Room

Present: Tom Meagher (Chair) Diane Taal
Jacky Sherman Debbie Green
15 Patients in attendance

ACTION

1. Matters arising from previous minutes

- 1.1 Minutes of previous meeting – It was raised that, though minutes were available on some notice boards, they were not available as promised on wards. TM also noted that some brightly coloured folders with the minutes would be placed in reception and Outpatients the next week. A further request had been made regarding placing of Trust minutes on a Trust Internet site but he was informed that the Trust was concerned with the Intranet, and that internet access was unlikely to be available for some time.
- 1.2 Wheelchair assessment form – TM had received a letter indicating that Gerald Simmons' address was printed on the sheet contrary to information previously given. It was agreed that this was inappropriate and the form should be reviewed. It was also pointed out that other information on the form was not accurate.
- 1.3 Hospital Food – Mr Moysey who had attended the June meeting had indicated he was unable to change meal times as this was the responsibility of Mediclean. TM had spoken to Mr Chris Catton, current Trust Facilities Manager, who would discuss this with Mediclean. Mr Catton had raised the question whether the change of meal times to 6.30 pm would be a problem for nursing. DG did not feel this was a major problem.
- 1.4 Dining Room Project – A local company providing catering on the Wycombe hospital sites and, more recently, the Post Graduate Centre in Stoke Mandeville, had been invited to look at the dining room and to propose a 10.00 am to 10.00 pm service. Their first reactions were favourable and their response was awaited. Further discussions would involve Sir Jimmy Savile.
- 1.5 NSIC reconfiguration – JS explained that the reconfiguration was proceeding and the first meeting of the implementation group, a group to look at the detailed changes that need to be planned in advance of the reconfiguration, had met. Ray Fields and Jackie Bailey were Patient Representatives on this group. They explained that they would be present on Thursday at the SIA stand to take any suggestions but could also be available at other times.

2. Television sets

There was a wide ranging discussion on television sets. Many of the TV set stock were extremely old and in disrepair. DG asked that any sets

requiring repair should be notified to the nurse station where a repair book was kept. There was general acknowledgement that the situation of having large sets in the 6-bedded bays made it difficult for individual patients who may want to watch alternative stations. These did not have headsets available. There was uncertainty as to the current position of Patient Line – a service that would make a daily charge for TV sets through PFI. It had already been flagged that, in view of long patient stays, this scheme may not be the most appropriate for spinal patients. A comment was made that many patients did not treat equipment well as it was provided free of charge and that it may be worth considering having a deposit scheme.

ACTION – The Director of Operations or Estates should be invited to the next meeting to explain the position with PFI and alternative schemes.

TM

3. **Dining room chairs**

A plea was made for at least one column of tables to be left without any chairs for optimal use with wheelchairs. It was suggested that a sign be put up requesting visitors to put away chairs.

ACTION – JS to organise this.

JS

4. **Food for ethnic minorities**

A patient raised the problem of some food, eg Halal food being available on the wards but not downstairs. He asked if this could be addressed.

5. **Questionnaire on facilities for Families of Patients at the NSIC**

A form had been circulated on this subject. It was thought that this might have been a survey from the Psychology Department. It was felt that such surveys could lead to an expectation and might not always be appropriate. TM and JS explained they were unaware of such a survey.

ACTION TM to write to Dr Paul Kennedy for further information.

TM

6. **Internet access**

A point was made that the Hospital had broadband access - could be made available to patients. TM explained that the IT Department was extremely small to maintain a large organisation and, while it might be possible, it probably would not be viewed as a priority. DT explained that some companies had expressed an interest in installing a wireless service and it may be possible to get a sponsored internet facility. Sir Jimmy Savile had been looking at this as part of the Internet Café idea.

ACTION – TM to discuss with Sir Jimmy Savile.

TM

7. **Bed Blocking**

It was asked whether patient beds might be kept when they were awaiting home alterations but wished to go on a short break, eg one to two weeks. Medical staff had indicated that it would not be possible to guarantee holding a bed if it was required by other patients. The possibility of using other facilities, eg the bungalow or the Guttman Centre, were raised.

- ACTION** – JS to investigate. JS
8. **Physiotherapy for readmissions**
- A patient raised the subject of the lack of access of older readmission patients to physiotherapy. It was acknowledged that the ratio of therapists to patients was lower than desirable. It should not be the case, however, that patients had no access to therapies though, as with all patient groups, these staff would have to prioritise access on clinical needs.
9. **Trust Funds** – A question was raised as to how the monies raised to support therapies had been spent. DT indicated that some money was spent on a patient hoist and some on the patient games. There was some conflict as it was also put forward that the games had been self-funding with monies raised.
- ACTION** – Details of spending and games costing to be brought to the next meeting. DT
10. **Cleaning of toilets**
- It was pointed out that the standard of toilet cleaning was very poor. One suggestion was that these should be steam-cleaned but it was generally agreed that a minimum of one thorough clean per day sufficient. It was also suggested that a large yellow bag be put in each bathroom and that an individual's small white bag be put within these. The current bins within the bathrooms were too small.
- ACTION** – Mediclean Manager to be invited to the next meeting. DG to discuss with Ward Sisters putting larger bags in the bathrooms. DG
11. **Lights/TVs left on**
- A patient raised the point that there was considerable waste within the Unit with lights and TVs being left on. It was acknowledged that this was difficult to address but it should be brought to the attention of ward staff.
12. **Availability of water dispensers in the Gym**
- The point was made that patients were encouraged to drink but that the only facility was a sink within the gym. Patients had to ask therapists to get them some water. It was suggested that water dispensers be placed in the gym, and near the pool as well
- ACTION** – JS to investigate. JS

Date of next meeting: Wednesday 13th August 2003 at 6.30 pm in NSIC Dining Room