

STOKE MANDEVILLE HOSPITAL
NATIONAL SPINAL INJURIES CENTRE

PATIENTS' FORUM

**Notes of meeting held on Thursday 23rd August 2007
in the NSIC Patient Education Room from 4.15pm to 5.15pm**

Present: Beverly Webster (Divisional Manager) [BW] - Chair
Debbie Green (Divisional Lead Nurse) [DG]
Jackie Bailey (Patient Representative) [JB]
Lindsay Dutton (Patient Education Co-ordinator)
4 In-patients
1 Out-patient

ACTION

Introduction

Beverly Webster introduced herself as the new Divisional Manager for the NSIC as of the 1st August 2007. She apologised for postponing the Forum from the arranged date of 9th August but felt she needed some time to understand the issues at the NSIC.

1.0 Apologies from Rose Gallagher, Infection Control

2.0 Minutes of the Meeting of 14th June 2007

Notes were accepted as a true record.

It was agreed that copies of the Patient Forum minutes would now be made available in the Patient Education Room and on request from the General Office.

3.0 Matters Arising

3.1 Water Chillers

BW confirmed that we are still awaiting delivery of cup dispensers and disposable cups for non- ward areas.

BW

3.2 Sports Hall

DG reported that the next phase of building for the PFI was due to commence in October this year and as yet no confirmation had been received that the Sports Hall area was going to be replaced. Patients felt this was imperative and BW and DG agreed. BW to follow up.

BW

3.3 Hospital Signage

BW reported that poor signage had been highlighted in the Health Care Commission report and agreed to find out the timescale for delivery through the Trust. If necessary signs could be purchased from the NSIC funds.

BW

3.4	<i>Disabled Parking</i>	JB reported that staff members were still being witnessed using Disabled Bays outside of the centre. DG agreed to remind all staff again that this was unacceptable. JB reported that the inadequate number of Blue Badge spaces on the whole of the Stoke Mandeville site was raised at the Trusts 'Walking In Your Shoes' forum that had been held earlier that week.	DG
3.5	<i>Catering</i>	<i>Food quality-</i> patients felt that the quality of the food, particularly vegetables, is still extremely poor and those that had experienced the 'Steamplicity' system available at High Wycombe couldn't understand why it was not employed at Stoke Mandeville. It was felt this way of providing meals was far more nutritious and appetising, particularly for long-term patients, and they wanted to know if there was any accountability for the quality of food. DG acknowledged that long-term patients are affected the most by the quality of the food and agreed to feed their comments back to the Trust and Sodexho.	DG
		<i>Wards vs Jimmy's</i> – patients complained that there was a discrepancy between what was on offer on the wards and what was available at the servery in Jimmy's. BW to feedback to Sodexho.	BW
		<i>Dietician</i> – patients complained that there was a lengthy delay in seeing a Dietician, even when they were admitted with a special dietary requirement. BW agreed to look into this.	BW
		Patients also complained that even when they were written up for supplement foods these were not supplied in a timely manner to the ward. DG to follow up.	DG
		<i>Salad Bar</i> – BW agreed to chase up provision of a better salad bar for Jimmy's with Sodexho.	BW
		<i>Voucher System</i> – BW to explore with Sodexho a voucher system for use in the Conviva restaurant.	BW
4.0	<u>Service Users Committee</u>	JB reported that the committee had met in July and had agreed to continue in it's existing format until January 08, when 3 founding members of the committee would stand down allowing for the four new nominees to join the committee. It had been proposed that minutes from these meetings would be available on the Patient Information board and JB agreed to arrange this.	JB
5.0	<u>Any Other Business</u>		
5.1	<i>Infection Control</i>	A patient expressed concern that the door between St. George's and St. David's had been closed due to infection but people continued to use it as an entrance/exit; and they didn't always ensure that it was closed properly afterwards. DG to investigate.	DG
5.2	<i>Hydrotherapy and Physiotherapy</i>	Patients raised the matter of hydrotherapy, reporting that they are now offered a total number of sessions per quarter, so they can choose to have either one longer session per week or 2 for a shorter length of time. They felt it was unfair that sessions already received were being deducted from the new '10' sessions allowed. Dot Tussler was to be asked to confirm what sessions were being provided for those who had already received some hydrotherapy.	BW

5.3	Security	<p>A patient reported that the external door leading from St. George's to the Bungalow had been left unlocked for a number of days/nights and was concerned that anyone could walk in. DG to discuss with staff on St. George's.</p> <p>BW reported that she had spoken to Security about CCTV provision for outside of the centre but as no-one was continually watching this it would only help retrospectively. BW to review CCTV in the main foyer area anyway.</p>	DG
5.4	Adherence of Rules	<p>Patients reported that although signs requested patients to use their headphones when listening to their own TV's and personal stereo's this was not being enforced by the staff on the ward and was leading to discord amongst the patients. DG to raise with nursing staff.</p>	DG
5.5	Visiting Times	<p>Patients felt that some visitors were allowed to stay far too late, and consequently disturbed other patients in the vicinity. DG agreed to take this back to the Ward Managers to ensure all patients had adequate rest.</p>	DG
5.6	Alcohol	<p>Patients reported seeing alcohol on the wards and felt nursing staff must have seen it as it was not hidden, but nothing had been done about it. DG to remind staff of No Alcohol policy.</p>	DG
5.7	Patients Rights	<p>A patient asked if there was a list of 'Patients Rights' as he felt his rights had been ignored due to the demands of the patient in the bed next to him. DG said there wasn't a list of 'Rights' but anything of this nature should be resolved amicably with the help of the staff.</p>	
5.8	Reporting of Patient Behaviour	<p>The issue of one patient's behaviour affecting another had been raised at ward level and it had been agreed that the staff would submit a report, as it was 'unacceptable behaviour'. This hadn't happened. DG to ensure that staff report all necessary incidents and BW asserted that unacceptable behaviour towards others would not be tolerated.</p>	DG
5.9	Hand Sanitizers	<p>JB highlighted that no hand-sanitizers were available in Jimmy's or in the main foyer. DG to raise with Infection Control.</p>	BW
5.10	Staffing Levels	<p>Patients expressed concern about experienced members of staff being over-worked and under-valued and felt it would be detrimental to the centre to lose such valuable members of staff. DG explained that August was always a particularly difficult month with staff on annual leave, term-time staff off with school-age children and added stresses of those taking sick-leave. However, the NSIC's sickness levels and turn-over in staff was comparatively low compared with the rest of the Trust. It was also raised that Named Nurses very often couldn't attend critical Goal Planning meetings as these were often arranged when they were on nights or off duty.</p>	

5.11 **Volunteers**

BW reported that she planned on advertising for Volunteers to help carry out 'extra' services, e.g. feeding patients, within the centre. Patients suggested advertising in national papers as well as local papers, as many people only read the nationals. It was also suggested that adverts be placed on the website and in the SCI News.

5.12 **Delayed Discharges**

JB reported that many delayed discharge patients would like better guidance of what level of treatment they should expect from the Therapy departments and some felt the attitude of the staff (both nursing & therapy) made them feel uncomfortable and in the way.

5.13 **Barbara Bus**

JB asked those patients present whether they felt the Barbara Bus was a valuable asset for the Centre or not as it was currently under review. Patients felt very strongly that this should be maintained at the Centre and felt that the application form for drivers should be installed on the ward computers hard-drive so that it could be completed and sent at anytime of the day, not dependent on when Pauline was available at Reception.

5.14 **Clos-o-mat toilets**

JB asked those present if any of them had used, or been taught how to use, the clos-o-mat toilets available on every ward. None of the patients had used them and weren't sure of their purpose. JB explained that there was a possibility the company may be willing to install the new updated version in several of the new bathrooms if approached. JB to discuss further with DG

JB/DG

5.15 **New Bathrooms**

Patients expressed concern over poor design of new bathrooms being installed on St. George's and St. David's, with lack of shelving and positioning of mirrors. DG explained the reasons behind the placement and types of equipment used, citing many Infection Control and Building Regulation stipulations. Service Users had been involved in the planning process but there were a number of issues that still needed to be resolved and further service user input would be sought.

5.16 **SCI News**

JB said that any patient contributions or ideas for articles would be welcome for forth-coming issues of SCI News and could be given or emailed to her (Jackie.Bailey@buckshosp.nhs.uk).

6.0 **Comments and Suggestions**

No comments or suggestions were received.

7.0 **Topic for Next Meeting**

Infection Control. DG to invite representatives of Infection Control Team to the next meeting.

DG

8.0 **Date and Time of Next Meeting**

Thursday 11th October at 4pm Patient Education Room.