

Council of Governors Meeting in Public 28.05.26

Questions received.

Question from Members of the Public				
	From	Question	Response provided by	Response:
1.1	Mr Tony Mackey	Please arrange for the Metro newspaper, freely available on buses, to be delivered at the reception area on arrival, also A&E. In the old Barry hospital, the Argus was freely available too. Many people would like this little bit of free comfort to help them.	Jonathan Reid Chief Financial Officer	Thank you for your observation and we are happy to arrange for the Metro newspaper to be in the Hospital Main Reception. We have following your observation contacted the supplier for delivery of 2 newspaper stands and as soon as these are delivered, Metro will commence their delivery.
1.2	Mr Tony Mackey	Please provide wheelchairs that work, are regularly serviced and plentifully located around the hospital.  It is quite unbelievable to enter the hospital, find no wheelchairs at the main entrance, nor around. Where are they?  Even when you do, they are ripped or with bits not working.	Jonathan Reid Chief Financial Officer	We would like to thank both Mr Mackey and Mr Carey for their questions which are linked so we will seek to answer them together.  <b>Worthing Hospital</b>  The Infrastructure Division have reviewed the wheelchair provision and confirm there is a shortage at the front of the hospital. There are a number of chairs in the basement awaiting repair and the parts have been chased, so these chairs can be put back into operational use.  Emergency Department are also short of dedicated wheelchairs and need their own dedicated numbers. An order is in the process of being placed for 15 additional wheelchairs, 5 of which will be a different colour for ED.  All wheelchairs are maintained by the estates team and we have reminded the porters of the process to report when a broken chair is placed in the basement.  If there is a requirement for porters to take a patient in a chair, this is requested by reception on the portering electronic system. Over the last 6 months, there
1.4	Miles Carey	I am a member of the public, but also a volunteer wayfinder at Worthing Hospital. My question is on behalf of the patients and visitors to our wonderful hospital and it is this: why is there an ever-decreasing number of wheelchairs available?  There were, I think 16 or 17 wheelchairs originally available though there are now	Jonathan Reid Chief Financial Officer	

only four functioning wheelchairs left. The rest have been growing in number in the basement for some months. It seems they are unlikely to be fixed as the Hospital authority believes they are the responsibility of the VOLUNTEERS as the organisation that provided the chairs in the first place (the league of Friends) and they should meet the cost.

I have to say that The Hospital is not slow to claim chairs for exclusive use in the wards or for use in A&E which usually contributes to the depletion in numbers. Why isn't the Hospital authority meeting the cost of these additional wheelchairs rather than using those provided by charity?

The porters do provide wheelchair transport for patients, but they are reluctant to take disabled visitors to see their spouses et cetera. Also, there are a limited number of porters, who have other work to do, and it is not unknown for a visiting patient to arrive at the clinic after the time of their appointment because there are only a limited number of porters with availability to convey them.

If The charity has to seek its own funding to deal with this problem, then can it please be made clear that the charity decides where the chairs will be used? The obvious shortage that will arise in the wards and elsewhere could then be covered by the Hospital.

I should make it clear that I am writing on my own account as a member of the Trust.

have been 1,405 patients picked up from main reception which have been requested via reception.

There has not been a decrease in portering staff in Worthing. However, through the new electronic logging system introduced in November, there has been a change in the priority system. There may be a delay sometimes if other patients have a greater need, however, some auditing around response times and delays will be undertaken, to see if anything needs to be adjusted.

#### **RSCH**

There is a backlog in repairing wheelchairs by the estates team and they have been asked to prioritise getting as many as possible back into operational use quickly. There is a high number of wheelchairs that have been condemned and the trust is in the process of getting replacement wheelchairs delivered and operational asap. The Infrastructure Division are reviewing the best location for these to be accessible for the main hospital entrance.

Reception staff can call the portering team for additional wheelchairs when there are less than 5 available.

For all Trust Hospitals, we are implementing a regular audit of wheelchair number and condition, to prevent the availability for patient and visitors being limited.

1.5	John Thompson	<p>When a GP refers a patient to the Trust a copy of the referral is available on the patient's NHS App and can be downloaded. Then there is silence, so the patient has no idea what is happening. This can cause considerable anxiety. Would it be possible for the patient to be advised of the date and outcome of triage and, if appropriate the wait time for any procedure?</p> <p>This might be done through either the NHS App or Patient Knows Best. If it is already being done, then more publicise is needed.</p>	Jonathan Reid Chief Financial Officer on behalf of Chief Operating Officer	<p>Thank you Mr Thompson for your question.</p> <p>When a referral is made, the patient is made aware on the NHS App with aggregate waiting times for that speciality. Unfortunately, these wait times are greatly underestimated as NHSE has not removed 2 week waits from the data and this makes it look significantly better than it is. We have brought this to NHSE's attention twice but there is no intention on their behalf to change it.</p> <p>The patient then gets a letter from us stating that a referral has been received (non specific letter) and that we will be in touch in due course. Once triaged the patient's case drops off the referrals system (eRS) - this is not in our control. As a result, the case also comes off the NHS app as there is no further communication between the systems.</p> <p>We are aware this is not ideal as there are issues with sharing the date and outcome of the triage connected with the volume of activity this would create. We are however working to improve the communication by attaching the patient letter to the NHS App through the Netcall system which is planned and in the queue for later this summer.</p> <p>This letter will be patient specific with the responsible speciality dealing with the patient's case. Wait times inclusion is not included in this change as yet because it is also a major piece of work that requires significant planning to achieve it. The timescales for this major change have not yet been identified.</p>
1.5	John Thompson	<p>Sometimes when patients are discharged, they are given instructions to make an appointment at their GP surgery, e.g. for blood tests. The patient may or may not have their discharge letter. Their surgery often knows nothing about any instructions, causing patients distress.</p> <p>Would be possible for GP surgeries to be sent discharge letters at the same time as they are issued to patients? I appreciate</p>	Jonathan Reid Chief Financial Officer on behalf of Chief Operating Officer	<p>Again thank you for your observations and question.</p> <p>Due to the significant numbers of patients who are seen, treated and discharged on a daily basis, there is a constant challenge to generate discharge letters in time for them to be visible to the patient's GP. While this is a perennial issue with that all hospital Trusts experience, we are continually working to reduce discharge Letter generation and send times.</p> <p>Patients will often be issued a letter on discharge that they can present to their GP Practice, however we are aware that this is not always the case and that Practices</p>

		that some surgeries are not as quick as others at processing correspondence.		<p>are increasingly refusing to do what the patient has been advised to request until the letter has been issued.</p> <p>We are continually working to a plan to reduce the delays in discharge letter completion as we are aware that it creates issues for both our patients and the GP Practices.</p> <p>It's important to note however, that in order to ensure optimal safety post-discharge, if an investigation or treatment is relatively urgent, we will ensure that the Practice is informed by direct contact, on discharge, of the patient's requirements.</p>