

	<p>Customer Care Training</p> <p>Training has been delivered which included all staff, not only Reception staff. Training commenced in July with dates scheduled throughout the year. This training has proved to be positive.</p> <p>Members were informed that a new Patient Experience Lead has been appointed and will be a key member to the delivery of this training moving forward and expanding on.</p>	
<p>4.</p> <p>5.</p>	<p><u>Healthwatch Presentation</u></p> <p>Tracy Creswell from Healthwatch introduced herself to Members and informed them of her role within Healthwatch. TC attends events to encourage the public to share their experiences, which in turn can help to influence change. She advised that comments are not all negative, with many positive. Healthwatch works with the Trust, GPs and the Black Country Partnership and signposts patients in the right direction.</p> <p>Regular meetings are held with the Patient Experience Team in the RWHT to update and build up relationships.</p> <p>TC asked Members to confirm the role the Forum requires from Healthwatch.</p> <p>Volunteers are being sought to support Healthwatch in speaking to patients.</p> <p>Discussions took place regarding Healthwatch putting literature in the A & E area which will target a wider audience.</p> <p>A Member asked if Healthwatch will be continuing next year, TC advised that this is currently in the hands of the Council, no response has been received as yet.</p> <p><u>Cannock Update</u></p> <p>DH informed Members that activity at Cannock Hospital has expanded since it became part of the RWHT. Surgical activity has increased, which will hopefully support the increases in Medical activity at New Cross.</p> <p>Clinical Haematology, Oncology and Respiratory transferred to Cannock Hospital in September. Rheumatology had previously moved over.</p>	

<p>6.</p>	<p>The aim for Cannock is for it to become an elective surgical Hospital mainly for orthopaedic activity, but will include some other surgical specialities that can undertake surgery on the Cannock site. More space should hopefully become available on the New Cross Site.</p> <p>Members raised their concern regarding transport and parking at Cannock, it was reported that no negative responses have been received regarding this.</p> <p>DH advised that Cannock Hospital is not yet up to full capacity. Discussions are taking place with Directorates within the hospital regarding areas that will move over.</p> <p>Departments have advised that there has been no significant impact on Cannock patients who are now coming to New Cross for appointments/treatment.</p> <p>Cannock continues to have a Minor Injury Unit.</p> <p>The bus service, X68 that runs from New Cross to Cannock Hospital is a free service for staff and patients who have a letter to confirm their appointment/treatment time.</p> <p>A recent review has been carried out regarding the usage of the bus. More staff use the service than patients. With additional activity at Cannock Hospital it is envisaged that the usage for patients should increase.</p> <p>Changes have taken place to the timetable, evening times have been taken off. For patients who may have a late discharge, individual need will be looked at. The majority of patients have arrangements in place. Discussion took place about patients using taxis – there is nothing in place at present.</p> <p>For patients who visit Cannock Hospital for day care, the majority travel by car and some by bus, no negative feedback has been received. Negotiations continue as there is still concern regarding parking, in time, this situation should improve. Concerns were raised regarding the number of disabled parking spaces and whether patients could book these in advance of attending the Hospital, DH will check on this. The Trust is trying to secure additional parking on the Cannock site.</p> <p>A Member raised their concern regarding a map for Cannock appointments, DH will check on this.</p> <p><u>Urgent and Emergency Care Department</u></p> <p>The new Urgent and Emergency Care Department is scheduled to open the end of November 2015. There are currently no anticipated</p>	<p>DH</p> <p>DH</p>
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<p>7.</p>	<p>delays. The handover process will take place end October. There have been no major issues.</p> <p>A public announcement will be made regarding the opening of the Department.</p> <p>A new system will be implemented within the Department with different ways of working.</p> <p>A Member expressed concern over the size of the rooms for disabled patients/visitors, DH advised that the Trust does reflect legislation regards this. Rooms are very large and significantly different from the existing ones. The footprint of the Department is significantly bigger with capacity to increase over the coming years.</p> <p>Members asked if there would be opportunity to take a Tour around the new Department, details will be put on the RWHT website.</p> <p>A Member wished to express their concern over the car parking fees. DH advised that money is re-invested back into car parking and the development of the site. Concerns were raised that this money does not go towards the investment of clinical services.</p> <p>The new machines on car parks use number recognition, concerns were raised that there are different machines around the hospital. Tailgating was also discussed. DH will speak to Pete Gibbons.</p> <p>Discussion also took place regarding staff parking on the site.</p> <p><u>Draft Terms of Reference</u></p> <p>The Draft Terms of Reference has been sent out to Members for their consultation.</p> <p>It was agreed that Membership of the Patient Experience Forum should be looked at.</p> <p>It was suggested that a representative from Surgery and Medicine Divisions be included ie. Head of Nursing or Matron, with the possibility of a medical representative. The rest of the people could possibly be co-opted as required.</p> <p>It was agreed that it would be reasonable to have a representative from the Estates Department around the table.</p> <p>The rest of the representation could be from Patients with a greater focus on user involvement.</p> <p>It was also suggested that at least 3 patient representatives attend to enable the meeting to be quorate.</p>	<p>DH/Chair</p>
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	<p>The focus of the Forum is to re-energise and encourage the Service. The meeting would not be used to discuss personal issues/concerns.</p> <p>The aims and purpose of the Forum would be to reflect on the whole patient experience with mechanisms to feed into the organisation.</p> <p>Discussion took place about apologies being received in advance and a decision be made whether to carry on with the meeting, it was discussed that this would prove difficult and that the Chair should attend each meeting and would make the decision if the meeting was quorate and if it would go ahead.</p> <p>Amendments to the Terms of Reference would be based on the comments made at this meeting and those received from Healthwatch, these should be included and highlighted in a different colour.</p> <p>Additional comments to be received by the end of October and reported on at the next meeting to be ratified at meeting in December.</p> <p>It was discussed that meetings take place bi-monthly with dates for action.</p> <p>Dates for all agreed future meetings will be included on the Public and Patient web page on the RWHT website. A web link for the Terms of Reference to be included.</p> <p>The agenda will be put onto the web page around the time of the agenda being distributed to Members.</p>	Chair
8.	<p><u>Draft Patient Experience Strategy</u></p>	
	<p>This will be completed end October/early November and will be shared with the Forum.</p>	Chair
9.	<p><u>Future Agenda Items</u></p>	
	<p>See action sheet.</p>	
10.	<p><u>Any Other Business</u></p>	
	<p>Dates of future meetings to be discussed.</p>	

11.	<u>Date and Time of Next Meeting</u> Tuesday 1 December 2015 2.00-4.00 pm Room 6, WMI, New Cross Hospital	
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ACTION SHEET

ITEM NO.	PAGE NO.	ACTION HEADING	ACTION BY	ITEM CLOSED
3	2	Social and Complex Cases	Chair/KT	
3	2	Appointment times for patients in residential care homes	Chair	
3	2	Central Care Update Records	Chair	
5	4	Cannock Update	Chair/DH	
6	5	Urgent and Emergency Care Department	Chair/DH	
7	6	Draft Terms of Reference	Chair/DH	
8	6	Draft Patient Experience Strategy	Chair	
SUGGESTIONS FOR FUTURE AGENDA ITEMS				