

**Frimley Park Disabled Patient and Carers Forum**  
**Minutes of meeting of 12<sup>th</sup> September 2pm – 4pm**  
**Seminar Room, Frimley Park Hospital**

*NB: Those present at this meeting should be aware that their names will be listed in the notes of the meeting which may be released to members of the public on request.*

Frimley Park Group		
<b>Trust Staff</b>		
Lydia Cattell	Senior Physiotherapist	Present
Jeff Howell	Estates	Present
Felicity Knapton	Staff Nurse - Recovery	Present
Michael Rawling	Local Security Management Specialist	Apologies
Mel Martin		Apologies
Sally Martin	Head of Nursing - Paediatrics	Apologies
Colette Meredew - Lynch	Learning Disability Liaison Nurse	Apologies
Megan Allan	Healthcare Assistant G5 CCU	Not in Attendance
Jessica Cubberley	Care Assistant - MAU	Not in Attendance
Karen Barker	National Joint Register Clerk	Not in Attendance
Gordon Parry	Estates Supervisor	Not in Attendance
Ablen Dacalos	Specialist Dementia Nurse	Not in attendance
Beth Bal	Head of Quality	Not in attendance
Catherine Jones	Manager – Pre - Op	Not in attendance
Faith Beswick	Healthcare Assistant	Not in attendance
Ablen Dacalos	Specialist Dementia Nurse	Not in attendance
<b>Patient / Carers</b>		
		Present
		Present
		Present
		Present
		Apologies
		Apologies
<b>Guest Speaker</b>		

Minutes taken by Najeeb Rehman, Group Chair

1.	<b>Apologies</b>	
2.	<b>Minutes of the Previous meeting</b>	<b>ACTION</b>
3.	<b>DOT Training</b>	
	<p>■ introduced the work of DOT training. DOT training was named after Dot Miles. Since it has been set up DOT training activities have included:</p> <ul style="list-style-type: none"> <li>• Training at GP Surgeries</li> </ul>	

	<ul style="list-style-type: none"> <li>• Education of children on disability awareness</li> <li>• Attending community events</li> <li>• Providing people with support in the Deaf community</li> </ul> <p>■ mentioned that the deaf community is tight knit and news travels fast in what is quite a small community. The news tends to be a mixture of negative and positive; complaints and apprehension. Some of the issues have centred around lack of British Sign Language Signers being booked as GPs have not booked a Signer.</p> <p>DOT training do get contacted by patients when there have been problems; such as when a deaf patient had a problem with a receptionist at a GP surgery. It was established that the staff at the GP surgery had not been trained.</p> <p>DOT training can offer different types of training:</p> <ul style="list-style-type: none"> <li>• Bespoke or designed to the needs of the Dept</li> <li>• Enabling people to self qualify BSL Level 6 interpreters</li> <li>• Etiquette for deaf patients</li> </ul> <p>■ mentioned that staff knowing the basics of signing could make patient experience better for example patients with memory loss are helped if BSL is used.</p> <p>Discussion then followed around providing BSL training for staff. JH mentioned that he had approached his manager about doing BSL training.</p> <p>■ stated that she would email NR fliers publicising training.</p> <p>■ also stated that as BSL is so different to the English Language that staff are unaware that deaf patients are unable to read the information which has been given to them by staff.</p> <p>Any information provided to patients must be in keeping with the Accessible Information Standard e.g. such as providing Braille. A cost effective solution would be to produce a video clip.</p> <p>Discussion then followed as to which would be the priority areas for training e.g. A&amp;E, ICU and Reception areas.</p>	NR to place fliers on the Intranet
4.	<b>Accessible Information Standard</b>	
	<p>NR updated the Group with progress being made against requirements of their national Accessible Information Standard. NR mentioned that the focus of the activity had been around ensuring the patients' specific needs were flagged on the hospitals patient systems and picked up e.g. for appointments and providing accessible information for patients namely large print letters.</p> <p>Progress is being made in the following areas under each of the Accessible Information Standard headings:</p> <p><b>Identification of Needs</b></p>	

	<ul style="list-style-type: none"> <li>• Patient Information systems mapped and functionality and flagging of patent needs compared across hospitals</li> <li>• Learning Disability priorities are being assessed and will be populated within an action plan which is under development</li> </ul> <p><b>Recording of Needs</b></p> <ul style="list-style-type: none"> <li>• The description for British Sign Language on PAS and iPM have been changed to make them more clearer to staff when they are checking or recording patient requirements</li> <li>• Monthly list of deaf patients is checked to ensure BSL interpreters have been booked for deaf patients</li> </ul> <p><b>Flagging of Needs</b></p> <ul style="list-style-type: none"> <li>• Established that customisable alerts can be created in systems other than iPM/PAS and set against patient records</li> </ul> <p><b>Sharing of Needs</b></p> <ul style="list-style-type: none"> <li>• Communication sent to all GPs requesting that patients' disability and language needs/requirements are stated in the referral letter</li> <li>• Communication to be sent out to all staff emphasising the importance of checking that sensory impaired patients have the relevant alert active on ipm/PAS</li> </ul> <p><b>Meeting of Needs</b></p> <ul style="list-style-type: none"> <li>• Patient Letters in larger font available at Heatherwood and Wexham Park for staff to use and letters at Frimley Park are due to be available this month</li> <li>• Link to Next Generation Text on website which enable deaf patients to contact the Trust</li> <li>• BSL video on the Trust website explaining how to make comments and suggestions to the Trust on their patient experience</li> </ul>	
<b>5.</b>	<b>Updates</b>	
	<p><b>Estates</b></p> <p>Work is being carried out in keeping with the Estates Strategy. Physical access is being improved and access has developed more at Frimley Park than at Wexham Park. Resting areas are now in place across Wexham Park particularly in long stretches of corridor between Wards. Induction loops have been installed in reception areas.</p> <p>■ raised the issue of seating in Eye Clinic is not sufficient and impacts on wheelchair access e.g. wheelchair space is covered by a chair. ■ also mentioned that it is not possible to access x-ray department, however Outpatients and Fracture Clinic have access spaces.</p>	
<b>6.</b>	<b>Complaints and PALs</b>	
	No representation from PALs or Complaints Team.	NR to send details of the next meeting

				to both Teams
7.	Any Other Business			
	<p>NR asked the group as this was the first meeting in a while, whether this meeting worked. Discussion then followed and the Group felt that this format worked and should be continued.</p> <p>█ raised the matter of mistakes appearing in appointment letters e.g. wrong information being put into letters. In June 2017 JM had met with PALs on a matter relating to medicinal errors and wrong information in the letter.</p> <p>JH raised the matter there has been a loss of parking spaces near the GUM clinic.</p>			<p>NR to ask Complaints Team for an update on next steps in place to deal with errors in letters.</p> <p>NR to speak to Colin Simpson</p>
	Date of next meeting			
	Frimley Park Group Post Graduate Education Centre Seminar Room 2  11am – 12.45pm	November 1st	Wexham Park Group Post Grad	Sept 22 <sup>nd</sup>
				Oct 31st
	Joint Groups	4 <sup>th</sup> December 2017; 10 to 12; Large Meeting Room, Forest Lodge, Heatherwood Hospital.		