

Patient Forum Meeting Minutes 16/5/2015

Attendees; Lissy Jose, Lynda Barnacle, Lesley Jones, Kay Wilkinson, Marie-Anne Smith, Sue & Gerald Wheeler, Sarah Wallace, Hazel Jones, Cath Jones, Chris & Steph Smart, Steve & Sylvia Roberts, Barry Hayward, Stuart & Jackie McIntosh, Dr Simon Fletcher, Dr Hemali Kanji, Nilesh Jogia.

Apologies; Dennis Cox, Natalie Millidge, Michael Horton, Mark Davis, Dr Dan Ford, Razia Bibi, Fatuma Rajab, Carol Foster.

Transport.

KW highlighted delays with patient pick up from Stratford. BH said the delays were for wheelchair patients and was due to control communication issues. NJ said that there were issues also at UHCW with control communication at the heart of the problems (both community and ambulance transport sent to the same addresses, patients home address updated on computer but control sending transport to old address,), along with control consistently saying pt has been picked up or transport is “10 minutes away” when this is untrue.

BH said control problems were an issue, but situation should improve as control for renal transport was moving to Coventry with 2 girls started and another 2 (with previous experience) starting in July. This should resolve a lot of communication and logistical issues once they are up and running.

Review at next Meeting

CS raised the eligibility criteria system in place (CCG), LJ said that letters had been sent out to UHCW patients on the 3 monthly booking reviews done by new patients, (all patients in the future). KW asked LJ to forward letter template to satellite leads for distribution to pts. CS asked how pts would appeal if they were refused transport. BH stated that all pts were eligible for return journey if they needed it. Appeals should be put to WMAS PALS.

SMc suggested that the booking system should be simplified for regular users and pts shouldn't have to go through the whole rigmarole every time –BH to review.

NJ asked why the 15 minute waiting time for drivers had gone. This is causing some situations where pts with a couple of minutes left were having to be rebooked and classed as abortives. Some drivers wait, some don't - BH to advise.

Clinical Director's Report

SF said that a business case proposal had been sent off for the city centre satellite unit . 2 sites were being considered, ex paybody eye hospital, or new gp site (Clay lane). Clay Lane is preferred option with building space etc being ideal.12 spaces. Funding is currently in place.

Capacity is currently tight,with contingency plans in place (Increase in PD & home dialysis). KW said inpatients are being done on-call putting a strain on staff.

An ad has been placed for an International Fellow to join the team.

Matron's Report.

2 recent infectious cases, plans in place to eliminate all via nursing documentation and screening. Nursing shortages has delayed the implementation of process.

There has been an increase in pts with lines, caused in part by some pts refusing fistulas. CS asked if pts knew the risks of long term line usage. KW said educational material was being put in place to encourage pts to have fistulas.

SF said that pt survival rates were high (2nd or 3rd in the country)

KW said recruitment of staff was an issue (nationally), this is leading to new ways to develop care., with a potential development in the HCA role.

SR asked what was causing staff turnover and said that there is now a “lesser atmosphere “ in units with no real interactions. KW said on-calls were an issue along with working hours leading to dissatisfaction amongst staff.

HJ noted staff shortages at Whitnash where a pt in isolation needed emergency care from both trained staff. All other pts were left alone. KW said Whitnash to get another HCA.

NJ said there was an incident @UHCW were trained staff were dealing with a patient, and no-one was free to respond to a new pt machine alarm leading to pt losing circuit.

HJ& NJ raised concerns over staff shortages leading to a more unsafe environment.

HJ was worried that a serious incident would occur at current levels/skills mix.

KW acknowledged that there were safety concerns, and recruitment was underway.

Self Care

16 home pts , with 5 more training for home dialysis.

Home Dialysis Conference in Manchester 24/25 September.

CAPD

100 pts – Stable

UHCW

New Staff starting but skills mix will improve over time as many are super numery.

Agency nurses being used and are of a high standard in general.

George Eliot

No Issues. Unit at full capacity.

St Cross

Exercise study received positively,

New ward clerk starting soon.

New staff nurse starting soon with 2 more in the future.

Old isolation bays to be removed soon . SR asked when draughty window issue was going to be done KW to discuss with CF

Stratford

No issues.

Surrounding building work causing a little inconvenience.

Whitnash

1 new HCA. Air conditioning not working – RB to get quotes to fix.

Ward 50

Day unit reverted back to Renal use.

Staffing is still issue

Renal Nurse Specialist

MAS said that team was working well with Peer support group .

RNS working with 1200 pre dialysis pts referred when EFGR falls below 30%.

5% of these pts will go on to receive dialysis. Pts have a named RNS.

More peer support representatives are required. **Please register if interested with your local unit.**

A.O.B

SF thanked patient forum for its support and asked any pt to raise concerns with staff.

SF said dialysis hours are increasing per pt.

CS asked if there was any development in the non specialisation of renal services, SF replied this was still an ongoing process.

SMc thanked SF and renal team for all their hard work during his recent illness. Forum wished Stuart well and welcomed him back .

Date of Next Meeting

8th September 2015

18.30 5th Floor Seminar Room

UHCW

More patients / carers needed.

