Gunnery House

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Healthwatch was established in 2013 in accordance with the Health and Social Care Act 2012. Within this legislation Healthwatch has a right to a reply within 20 working days to Reports and Recommendations submitted by Local Healthwatch to a service provider/commissioner.

**Report & Recommendation Response Form**

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| Date of response provided | 22.4.2022 |
| General response[[1]](#footnote-1) | LGT is grateful for your feedback. The patient Experience Team has reviewed the recommendations and has made the following comments (in blue)*.* |
| Response to recommendation no: | Recommendations:29. (A&E) Electronic board to display waiting times in real time (or where wait time white boards are used, they must be regularly updated)**Live waiting times at Queen Elizabeth Hospital (QEH) have been displayed in the A&E waiting and reception area since August 2021. We are investigating an additional information display within the children’s emergency department to further inform patients.**30. (A&E) Consideration of provision of 24x7 pharmacy servicesOur outpatient pharmacy is run by Lloyds. Unfortunately, at this time, it is not possible to provide the resource to have the outpatient pharmacy open 24/7 - although we appreciate that this regrettably causes inconvenience to some of our patients who may have to come back to have prescriptions dispensed. The A&E department are able to provide pre-labelled packs of certain essential medications such as antibiotics or painkillers to patients who require these.31. (A&) Review availability of refreshment provisionWe have recently undertaken a project to install more water fountains around the hospital to allow more service users access to clean drinking water.There is a Coffee Pod in the main reception 24 hours. The Contracts Monitoring Officer is exploring if a vending machine could be installed in ED as there may be an issue with space for it to be installed. 32. (Maternity) Review support available (and noise) on post-natal wards* Handover between shifts for midwives is now done in a closed side room. Members of staff are encouraged to avoid chatting at the midwives’ station, unless it's vital.
* Designated protective time for the patients where intervention will be minimised as much as possible and visiting will be minimised especially from 12 midnight until 6.00 am daily and also during the day if possible.
* Noise from electric devices, such as the ward phone and noise from the main entrance door are reduced.
* Lights are dimmed at night and doors closed in the four bedded bays, patients are also reminded to keep their mobile phones on silent and use earplugs if at all possible.
* Staff avoid transferring women from labour ward to Ward 7 in the night where possible.
* Volunteers are back on the maternity wards and are supporting staff by engaging with patients and raising concerns they may have with staff.

33. (General) Raise awareness of access to translation services amongst staff and patientsWe are constantly looking at ways of improving access for our patients from all backgrounds and circumstances. Specifically, regarding translation, we are:* The trust is growing its capability for remote access to translators by improving our Wi-Fi to maintain a consistent and robust signal.
* The Patient Experience Team (PET) will be rolling out an education bus cross site beginning the last week of April to raise awareness among staff on several issues including interpreting service, accessing interpreters, catering provisions, devices to maintain communication with relatives and Accessible Information Standards including responsibilities and eLearning.
* Sector wide interpreting service provision work in progress, currently out to tender with the aim of having 24 access to BSL interpreting services.
* The Patient Experience Team with support of Communications department and Outpatients team continue to highlight on Trust website expectations regarding translation services

34. (General) Adequate support for neurodivergent service users including the availability of quiet waiting roomsThere is a calm room in the ED which is used for neurodivergent patients. Most of our wards have day rooms which can be used as quiet spaces. In terms of physical waiting areas, we presently do not have such a facility, however, separate rooms can be converted to quiet spaces as required, to meet the needs of neurodivergent patients.35. (General) Improve communication between wards and relatives/next of kinWard 2 (acute medical) has successfully implement a system for triaging relative calls ad ensuring the appropriate member of staff make the follow up call to the relative. The PET will support the roll out of this across other wards. All our inpatient wards have been provided with a donated iPad to maintain communication between patients and their relatives. Volunteers have been supporting staff with this on the wards. PET reminding matrons of the facility and support offered by voluntary services. This will be included in the information  |
| Response to recommendation no: |  |
| Response to recommendation no: *Please add additional rows as required.* |  |
| Signed: | Patient Experience Team |
| Name: | Jeni Mwebaze |
| Position: | Associate Director of Quality & Governance |

1. Please expand boxes as needed for your response. [↑](#footnote-ref-1)