

Patients in Partnership
Wednesday 3rd September 2008
Questions and Answers – all presentations / panel members

| No | Questions | Response |
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| 1. | Regarding microfibre cleaning: what is the appropriate cleaner to use with it? | Water and an all purpose cleaner should be used. |
| 2. | The theory of the folding and rotation of cloths to avoid cross contamination of surfaces is great – how do you ensure staff follow process? | Intense training for supervisors and staff and programmes of re-training. We would encourage patients and the public to ask if the cloth has been rotated. |
| 3. | How often can the micro-fibre cloths be laundered? | They are guaranteed for 500 wash cycles. The trust is currently undertaking a stock take of micro-fibre supporting equipment. |
| 4. | Does this new system mean that there will no longer be wet floor signs? | We still have to use them as part of Health and Safety regulation even though the floors aren't as wet as previously. |
| 5. | How often are the beds and lockers pulled forward for cleaning? | Some areas are weekly and some are daily. Each area has a service level agreement. These are written in conjunction with National Patient Safety Agency (NPSA) guidance; they are on public view. The supervisor checks the area with the ward manager. There are also cleaning audits and on going monitoring. |
| 6. | Is microfibre cloths being used in outpatients? | Janitorial trolleys are still used in the outpatient department. There is an increased cost associated with microfibre cleaning, so the trust has opted to only introduce into higher risk areas initially. This will be reviewed. |
| 7. | Is Riverside cleaned in the same way? | Unable to comment as Riverside is not part of The Hillingdon Hospital NHS Trust. |
| 8. | Is 'deep clean' connected with microfibre? | For infected areas, we don't use micro-fibre, we use disposable cloths and chlor clear. |
| 9. | Concern expressed about the cleaning of electric fans as they are not cleaned and very dusty. | They are cleaned as part of an estates' cleaning programme. This may need to be reviewed. |
| 10. | Was an audit conducted before, during and after the introduction of micro-fibre cleaning to measure its effectiveness? Is it value for money? | The trust carries out regular audits of cleaning. We have seen PEAT scores move from fair to excellent since the introduction of micro-fibre. Many big contractors are now moving to micro-fibre. |
| 11. | When is the Pilot ward opening? | There will be an open day in late October. This will include designated dates for member of the public and FT members. The exact information will be communicated via the Foundation Trust membership letter and |

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| | | local paper. |
| 12. | I had an eye operation yesterday at MVH. I would like to say how lovely all the staff were, and how much room there was. At Hillingdon the staff are great but they have no room, it's very cramped. | Some areas are confined, we are looking at re-design. |
| 13. | Regarding Methotrexate - what emphasis is put on liver biopsy? | The clinician would monitor liver function through liver function blood tests before biopsy. |
| 14. | There are often long waits at the pharmacy and it's not a very nice area. | The environment is certainly not the best. The process is being explored and we are aiming to improve it. |
| 15. | Prescriptions are dispensed in a 28 day pack, why is this? | It is EU policy that medication should be supplied in its original packaging, complete with expiry dates and patient information leaflet. The exception to this may be higher risk drugs. |
| 16. | This is ridiculous, it is a waste of tax payers money! People are being denied treatment by the PCT because of finances, it's awful. | We are careful with the tax payers' money. In the UK we do not have a range of pack sizes therefore we are unable to tailor pack size to patient need. Perhaps the question we should be asking as tax payers is to the Government - why don't they encourage manufacturers to supply drugs in smaller packages. |
| 17. | Are there different rules for the hospital and community pharmacies? | Same law applies. Community pharmacies are only reimbursed for what they give out. |
| 18. | Is there a difference in the relationship between a PCT and an Acute Provider and a PCT and a Foundation Trust? | Not really but there is a slight legal change in that FTs have legally binding contracts. |
| 19. | Is there an increased legal responsibility as a Foundation Trust? | There are certain additional declarations that the Board of a FT has to make. |
| 20. | What immediate benefits will there be for patients as a Foundation Trust? | As far as the quality of services is concerned, we want our patients to receive the best possible service. That will continue. The opportunity for involvement in the Trust is greater as an FT as is our local accountability. That is where, over time, patients should see the benefits. |
| 21. | Will there still be public board meetings as a Foundation Trust? | The Trust's formal position to this question is in our FT consultation response document available on our website. In summary the Trust wants to ensure that the role of the governors is not devalued and when Board meetings are in public, members of the public will be encouraged to ask their questions through the governors. |

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| 22. | As a Foundation Trust will the present income from the PCT remain the same? | We discuss the PCTs commissioning requirements each year. |
| 23. | How many applications have there been for Governors? | 459 members of the public and 18 members of staff have expressed an interest in becoming a Governor. As the election process has not yet begun, there have been no applications for Governors. |
| 24. | How will the Governor elections work? | The elections will be organised in accordance with rules laid down by the Department of Health. Staff governors are elected from four different constituencies organised according to occupational role, whilst public governors are elected from three geographical constituencies. Members wishing to stand for election nominate themselves on a form provided by the organisation appointed by the Trust to run the elections. The single transferable vote system will be used and ballot papers will be issued and returned through the post. |
| 25. | As an FT do you have a responsibility to provide the same services? | Over time we have developed our clinical services at the Trust. We anticipate that these will continue. The independent regulator also specifies a schedule of services we are obliged to provide. |
| 26. | A general comment about new power point slide colours, the white font on orange is difficult to read. | Comment noted. |