

Hard of Hearing HTP Focus Group

Held on Thursday 3rd October 2024 10:00 – 12:00hrs via MS Teams

QUESTIONS/ANSWERS

Hard of Hearing HTP Focus Group

Team responding to public questions:

Hannah Morris – (HM) Head of Public Participation Lydia Hughes – (LH) HTP Communications & Engagement Manager Aaron Hyslop – (AH) HTP Engagement Facilitator Tom Jones – (TJ) HTP Implementation Lead Ed Rysdale – (ER) Emergency Medicine Consultant and Clinical Lead for HTP Kate Ballinger – (KB) Community Engagement Manager

Q&A's FOLLOWING PRESENTATION

Q: Where are the main bus stops at RSH?

A: (ER) – At the moment there is one bus stop by the Treatment Centre and the Ward Block. There will be a bus stop and drop off area outside the brand-new entrance to the new building.

Q: Are the bus stops on the park and ride route?

A: (TJ) – There is a staff park and ride, but the public park and ride does not come this way it just goes into town.

A: (ER) – The closest park and ride stops are at Oxton which is about a 10-minute walk away where our staff park and ride is situated. The park and ride is just for the hospital staff, this is down to the insurance issues.

Comment: When in the clinic, you can't always hear your name being called.

ACTION: Hannah Morris to feedback to clinics about ways in which they can call patients names out for all to hear.

Q: Will the induction loops be portable or built in?

Comment: Induction loops need to be built in, not all staff stay on reception and not every staff is aware of how to switch on the portable loops or know if there is a fault with them. ACTION: Hannah Morris to investigate whether an integrated hearing loop will be in place. Comment: If you had a confidential conversation in a room and the loop system was on, the room next door would be able to hear our conversations if they are wearing a hearing aid. The infrared system is secure for a one-to-one conversation. Q: Is the infrared system something that people could use while they are within the meeting, or would it have to be set up permanently? A: The infrared system would need to be permanently set-up ACTION: Hannah Morris to feedback information on integrated hearing loops and infrared systems to Ruth Smith (Patient Experience Lead) to find out how technology can be accessed to support the hard of hearing. Q: Has there been any thought given to the doors especially in audiology as it is very difficult to have a hearing test? A: (TJ) - The Audiology department have bought a couple of new booths as it is right next to the new build. A company called Sixth Sense came in to test the vibrations and noises. The building work has affected some of the kit that the audiology team use. The new booths should resolve this. If it does continue to be a problem the HTP will hear about it. and we will resolve it. Q: Is there any information on the purple butterflies with maternity? If a lady has delivered twins and one twin has passed away, a purple butterfly is stuck to the remaining twin's cot to let everybody know that the family have lost a child. ACTION: Tom Jones to liaise with the Bereavement Midwives and feedback to the group. Q: As a volunteer I do find a lot of elderly patients go home from hospital without there hearing aids. This is an area of concern, is there a possibility to have a small cabinet by the side of each bed to store hearing aids and glasses? A: (KB) - Patients can have a pink box to store their belongings. ACTION: Kate Ballinger to investigate if patients still receive the pink boxes to store their belongings.

Comment: It is important that staff know how to insert a patient's hearing aid if they can't themselves.
Comment: Most people who wear hearing aids need a choice for methods of communication, even just a basic consultation. There should be the opportunity to have it written or have a tablet to use. There is an app called 'Live Transcribe' and you don't need to be connected to the internet which works very well.
ACTION: Hannah Morris to discuss with Ruth Smith "Live Transcribe' and other possible ways of communicating with patients and staff.