

Health & Wellbeing Overview and Scrutiny Committee
10 September 2012 @6:15pm

Mr David Allison, Chief Executive

- ***Waiting times of ambulant patients***

Clearly it is vital that ambulances are not excessively delayed at hospitals, as the sooner they are able to discharge patients into the hospital's care the better ambulance response times can be.

Put simply, the steps required are:

1. The ambulance arrives at hospital
2. The paramedics take the patient into initial assessment in the A&E department
3. A clinical handover takes place and the patient is transferred to the care of A&E staff
4. The ambulance crew then clean/prepare the ambulance for the next patient, take any breaks/visits to the toilet and when they are ready they radio in for another assignment

Ambulance waiting times are often expressed as the time from 1 to 4 as this is the most straightforward data to measure. On this basis in the first quarter of this year WUTH had an average turnaround of 28.2 minutes – a slight improvement on last year's average. For quarter one, within the North West, 17 hospitals had a better turnaround time than WUTH, while 15 had a worst performance.

However, it is very important to note that hospitals can only influence steps 1 to 3 – the time it takes for ambulances to declare themselves ready within step 4 is outside of our control.

We have met with the North West Ambulance service to discuss turnaround times for July. They have confirmed that our average turnaround time for steps 1 to 3 is 14.7 minutes against a national target of 15 minutes. We have asked for this data to be produced on a monthly basis and will ensure that appropriate steps are taken to ensure that the national target is delivered and ambulances are not delayed by our A&E department.

- ***Disabled toilet facilities***

The Trust takes very seriously its responsibility to provide suitable facilities for staff, patients and visitors who have disabilities.

The Trust has a Disabled Access Champion who has undergone formal training and qualification in assessing and providing accessible environments.

All new capital developments and refurbishments of existing facilities at both hospital sites are reviewed at design stage by the Disabled Access Champion to ensure full compliance with all relevant legislation, NHS guidance and good practice. For the more major capital schemes, such as those being undertaken as part of our Site Strategy, it is the responsibility of the appointed architect to ensure the design is compliant with legislation.

Arrowe Park Hospital – 4 WCs:

- Main Building (Ground Floor - Entrance to Main Outpatient Department near main entrance)
- Main Building (Ground Floor - Emergency Department adjacent to Majors area)
- Main Building (Ground Floor opposite Clinical Skills Centre)
- Womens & Childrens Building (Ground Floor - off Main Entrance waiting area)

Clatterbridge Hospital – 1 WC:

- Main Entrance (waiting area)

In relation to the specific issue of accessible toilet facilities for visitors and the public, following a recent review one additional accessible WC has been provided on the Arrowe Park Hospital site (opened July 2012) which brings the total number of accessible WCs for visitors to five across the two sites as shown.