

**P-04-545 Aneurin Bevan Hospital Procedures – Correspondence from Aneurin Bevan Community Health Council to the Clerking Team, 25.06.14.**

Dear Stephen,

Regarding the above request from the Petitions Committee our response is as follows:

1. Discharging vulnerable patients late at night without hospital transport.

We have no complaints specifically on this area, the main issues on discharge are without medication or a care plan.

Discharging vulnerable patient during the night without hospital transport – although we recognise that this has been an issue with all A&E departments, where elderly patients have been discharged in the early hours of the morning from Accident and Emergency departments following emergency transfer to hospital. This practice has caused the CHC concern regarding patient safety and cost. We have however received assurances from Aneurin Bevan Health Board that all older vulnerable patients will be assessed for support to go home and patient transport arranged where there is a specific need. Unfortunately Patient Transport services are not provided on a 24 hour basis, so many older patients without carer or family support will be delayed in going following discharge until Transport Services can be arranged.

On average over the last five years we have only received eight direct ‘informal contacts’ from patients on this particular issue for the following hospitals;

Prince Charles Hospital – 4 contacts

UHW – 2 contacts

Royal Gwent – 1 contact

Nevill Hall Hospital – 1 contact

Each of these have been addressed by the CHC with responsibility in the Health Board area. Aneurin Bevan CHC have taken up this issue with Aneurin Bevan Health Board in relation to the Royal Gwent and Nevill Hall hospitals to seek a more appropriate discharge time for older vulnerable adults where safe and appropriate transport can be offered where necessary.

2. The Virtual Inpatient Scheme:

We are aware of only one case in the last two years of a VIP being unable to access an appointment as a VIP and was treated as an out-patient.

3. ABHB Complaints Procedures, especially when a patient is still in poor health or pain:

We acknowledge that is difficult for people who are in poor health or pain to make a complaint, the hospitals and ABHB complaints procedure sign post them to ABCHC for advice or support. We have supported a number of people suffering ill health with their complaints and chasing up hospital appointments.

4. Dealing with mental health patients in general hospitals:

We have only one case recorded of an Mental Health case being dealt with on an acute ward.

I hope this information is of assistance to your committee.

Kind Regards

Martyn Dew

Deputy Chief Officer

ABC HC