

Governing Body Meeting			
Date:	Tuesday 10 November 2020	Time:	2:30 pm
Venue:	MS Teams Call		
Questions from the general public received in advance			

Email received 07/11/2020

1. Why can't patients have 1 person chaperone with them?
  - a. You say it's because you need to minimise the spread of the virus but people may already have had it.
  - b. Vulnerable people need their family member.
  - c. People who are sick can miss giving vital information to hospital which has an impact on their care.

Visitors accompanying patients to appointments are currently restricted, to minimise the risk of infection.

Where a carer or a chaperone is supporting someone with a mental health issue such as dementia, a learning disability, autism or other similar complex conditions, patients can be accompanied where not being present would cause the patient to be distressed.

The majority of outpatient appointments are now being undertaken remotely, but if it is necessary to attend a face to face appointment, patients are asked to attend alone. Where this is not possible, either due to potential psychological distress or physical support, one person may accompany the patient, by agreement.

2. Why are some doctors refusing to speak to patients next of kin?

A medical next of kin is someone a patient nominates to receive information about their medical care. If a patient has not chosen a next of kin, it will usually be assumed to be a close blood relative, spouse or civil partner. Most NHS Trusts ask a patient to nominate their next of kin when admitted to hospital.

Medical teams cannot automatically speak to or share information with a patient's next of kin. The patient must give permission for medical teams to share information with their next of kin.

Next of kin may act on a patient's behalf if the patient is unable to do make decisions themselves, for example if they are unable to communicate due to illness or being unconscious, only if their next of

kin has Power of Attorney (POA). In situations where relatives do not have Power of Attorney it is good practice that they should be consulted by medical staff regarding decisions about care. Specific issues or complaints about a doctor refusing to speak to a patient's next of kin should be directed to the relevant NHS organisation.

3. Why is this inconsistent within the same hospital?

Every patient and their circumstances are different, but all medical teams should act within the principles stated above.

Thank you