

Accessibility Advisory Group – Site Visit Report

Royal Cornwall Hospital, Truro

Thursday 28 November 2024

By Rachel Purchase
Administrator, Accessibility Advisory Group, RCHT

Background

In 2024/2025, members of the AAG have been invited to attend site visits at RCH as part of the regular meetings that take place on line. This is the second of what will likely be three visits during the current financial year. The outcome of the first site visit in July 2024 has been captured in a [film which can be viewed here](#).

It is worth noting that the only previous site visit of the group took place in July 2022, just prior to the opening of the Tremel Unit.

For this visit, there were several agenda items listed for specific visits:

1. Car Park 1C (soon to be main car park for blue badge holders)
Access to and from the car park to Trelawny front entrance
Pay Point accessibility
2. New outside benches
3. Audiology Department (Hearing Loops)
4. Fire safety – evacuation procedures
5. Drop curbs (NB these were not an agenda item initially but became a discussion point as the site visit progressed.)

Attendees

Carolyn Garman	AAG Chair and Head of Communications and Engagement, Major Capital Projects, RCHT
Jane Ninnis	HearingLoss Cornwall
Sandy Lawrence	Director, Cornwall Accessible Activities Programme
Sharon Kilty	Chair for Disability Cornwall
Rebecca Tracz	Grants and Contracts Manager, Disability Cornwall
Elizabeth Wedgwood	Assistant Project Manager, RCHT
Rachel Purchase	Project Assistant, RCHT
Megan Nicholls	Engagement Manager, Patient Experience, RCHT

1. Car Park 1C and Pay Point

Health and Safety concerns relating to access to and from Car Park 1C and the positioning of the pay point has been a point of focus since 50 new accessible parking bays were created in the summer of 2024. These new spaces were installed to re-provide for the accessible parking bays to be displaced due the Women and Children's Hospital Programme. Specifically:

- There are signs in carpark 1C still stating that the accessible parking is not yet dedicated to accessible parking only, suggesting there is inadequate provision of accessible spaces. This, despite a recent visit from an AAG member who said all the accessible space in car park 1A were full.
- Considerable congestion around the pay terminal, which forces pedestrians to step into the road and lack of space / pavement for those in wheelchairs or those with pushchairs from getting through.
- This pinch point has been raised within the Accessibility Advisory Group previous to this meeting, but the group revisited the area, on the understanding that with increased traffic flow in the area, this could become worse.

The group noticed immediately that members of the public, including ourselves, were needing to step into the road to avoid congestion.

The group identified that the fencing could be extended along the roadside up to the crossing to ensure people are not stepping into the way of traffic – as depicted in the photo below.



Another issue raised on the site was the positioning of the payment machine - in the corner of the shelter. This makes it extremely difficult for wheelchair users to get close enough to the machine to pay. This causes delay, fuelling

the congestion issues. Congestion is expected to get worse once Car Park 1A is decommissioned.

The group identified that the payment station would be best rotated through 90 degrees and moved to the centre of the shelter.

It is understood that the cost for the move has been quoted as c£37,000. However, the AAG members believe this is a high Health and Safety risk and should not be ignored due to lack of funds.

The AAG agreed to raise this with the Head of Health & Safety and Director of Operational Estates at RCHT, also noting the possibility of funding via Cornwall Council's Community Infrastructure Levy. Once applications are open, this could be an option to fund the work relating to the payment machine.

2. Accessible Benches

The group visited the locations of the newly purchased and installed exterior benches. These are located outside the Trelawny Entrance (next to the drop off zone), outside the entrance to the Tower Block (next to Eye Clinic) and outside the Princess Alexandra Wing. See images below:



These benches are weather, fireproof and easily moved. The group thought the locations were well chosen and that the colour was great. All were being used by visitors/patients during our visit. No Smoking signs are being added.

It was suggested that if further benches are purchased and installed, that come could be higher; these ones felt low to some trialling them. It was also suggested that accessible picnic benches would benefit the hospital site. The AAG will email the suggestion to the RCHT Charity team.

3. Audiology Department

The group visited the Audiology Department on the ground floor of Trelawny Wing to discuss Hearing Loops and waiting room layout.

The receptionist informed the group that it was the only department at RCHT that had an operational hearing loop. The operational estates team is however conducting a full survey of hearing loops across RCHT and will provide an update on the findings. It was also noted that modern digital hearing aids may not have the loop programme, unless it is specifically asked for.

The Audiology department also has a speaker system which can be used, although the receptionist said this does not work particularly with background noise interference.

The receptionists in audiology mentioned that they had a patient recently attend who used British Sign Language (BSL). None of the staff has had training in BSL, so communication was difficult. It was suggested, that a basic BSL course would be extremely beneficial to those working in Audiology. RCHT's Patient Engagement Manager will discuss training options with HearingLoss Cornwall.

It was noted that the waiting room had been re-configured so that chairs faced the doorway where clinicians call patients through. This was viewed as a good improvement. All agreed that a Screen System would also be incredibly useful – noting that one had recently been installed in the new Fracture Clinic.

A general point was raised regarding the lack of space in the waiting room for a wheelchair user, and that it would be beneficial for a couple of chairs to be removed to enable one to be comfortably accommodated (rather than having to wait in a corridor/walkway). The same was mentioned for the new Trelawny Scanning Suite. It was noted that consideration had been given to wheelchairs in the new Fracture Clinic waiting area (currently in design phase) and in future projects.

The height of the reception desk is a great height for wheelchair users, however it was pointed out that the receptionists had PC Monitors in front of their faces, meaning patients/visitors would be unable to have face to face communication.

Similarly in other areas of the hospital, reception desks often had lowered areas for wheelchair heights but that they were used to place printers on! Or some receptionists did not realise what they were used for. Receptionist training was suggested; to be taken forward to the EDI team.

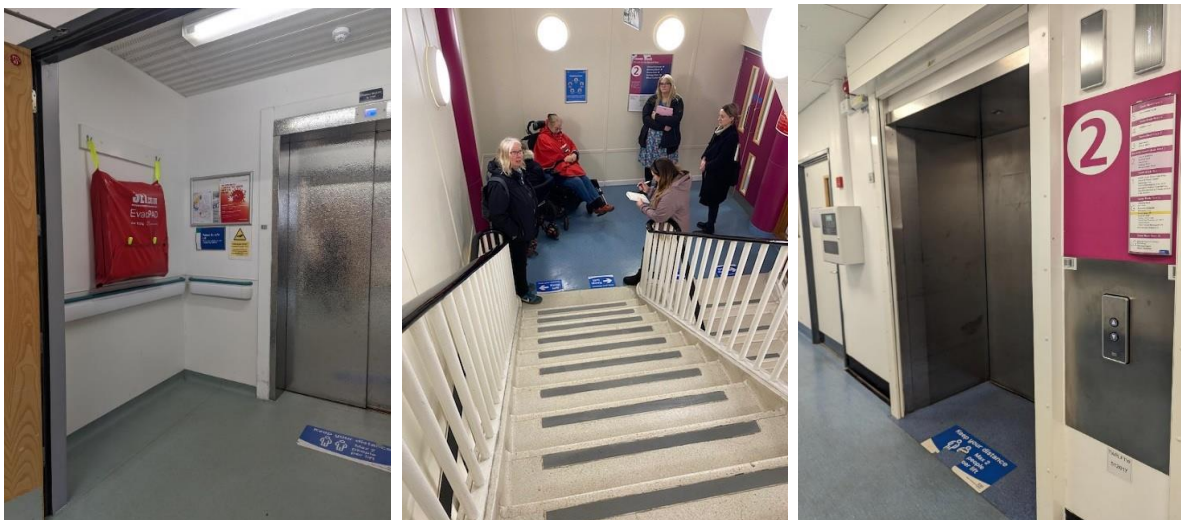


4. Tower Block/Trelawny Wing – Fire Safety and Evacuation Measures

The group visited the Tower Block to look at the fire safety and evacuation measures in place. This was also discussed during the site visit back in July 2024. Unfortunately, it did not look as though any suggestions of improvement made at that time had been progressed in terms of evacuation / instruction signage or evacuation measures in the stairwell / lobby areas.

The group also visited Trelawny Wing stairwells to compare the findings.

Stairwells in Trelawny Wing had Evacuation Pads and Evacuation Chairs. None were located in the Tower Block stair wells. The Evacuation Chair was situated behind a door in the stairwell, so not easy to find, and signage was not obvious to signal its whereabouts.



From a patient perspective, the group were not comforted by the lack of Evacuation Equipment in the Tower Block.

They also noted that there is still nothing to show which lift would be used in case of a fire and that there is no call alarm in the stair well. This means that if someone with limited mobility found themselves in the stair well during a fire, they have no way of telling anybody they were there.

It was felt that there remained a lack of signage in both Trelawny Wing and Tower Block explaining what to do in the event of a fire. The group also noted the heavy fire doors leading to the stairwell (hard for less able bodied users to open).

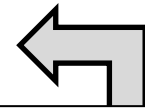


The group felt it would be useful to know more about the Fire Safety Improvement works currently being undertaken in the Tower Block at the moment and understand better the emergency procedures in case of a fire. Some members of the AAG said that they would volunteer to be involved in Fire Evacuation Training, to gather an insight on procedures.

5. Drop curbs

On our way from the Link Corridor (southside entrance) to the Tower Block Eye Unit entrance, it became clear that there is a lack of drop curbs. One of the drop curbs was not low enough, making it difficult for a member of the group to cross the road, in a wheelchair. It was also pointed out that a colour differentiation on the drop curbs would be helpful.





This image shows a lack of drop curb, despite there being a drop curb opposite this on the other side of the road. Meaning crossing from one side to the other is not possible in a wheelchair, in this location.

It was also noted that there is also a lack of hatching around the newly created accessible parking bays, opposite the ambulance parking (ED's accessible spaces). And there was hatching, the debris needed clearing.



6. Next Steps and Recommendations

Following the site visit, the following recommendations have been made:

- Highlight the Health and Safety issues surrounding the Car Park 1C to the Head of Health and Safety and Operational Estates at RCHT to try to improve access
- Request to RCHT Charity that further purchases of benches (and other equipment) are assessed for accessibility (e.g. some higher benches)
- Ensure Project Managers are aware that designs of waiting rooms in services at RCHT should include areas where wheelchair users can wait as well.
- Request receptionist training in basic BSL and reception layout – Contact the RCHT EDI Team

- Ask Estates Operations to review installing a screen system in Audiology department and extending the use of Hearing Loops to other parts of the hospital
- Advise the Head of Fire Safety immediately of concerns raised by AAG members regarding the stairway evacuation routes in Tower Block, and review procedures for those with limited mobility/disability. Invite Heads of Fire Safety and Health & Safety to AAG meeting in January to discuss current Fire Safety Improvement Project and ideas for improved signage and equipment.
- Discuss options for improved drop curbs and colour differentiation / tactile paving around the Link Corridor and Eye Unit / Tower entrance with Estates Operations