| Question | Response |
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| What is the background to recent changes in prescription processing times for GP surgeries? Recently extended from two working days to seven without warning, all patients are being told is that it was "not a practice decision". | This matter relates to a particular GP Practice that has notified patients of this procedure recently. Following discussion with the Practice, we have been reassured that these changes do not apply to the routine repeat and acute prescription requests from patients, but only applies to letters from hospital clinics or admissions, where new medications or changes to current medications has been advised. The NHS Forth Valley policy is that if the recommended medication/medication change is required within 7 - 14 days, then a prescription should be issued from the clinician making that recommendation. This is not a new policy, but due to increasing pressures in primary care many practices are less able to turn around prescription requests in shorter timescales. |
| What is being done to improve patient access to GP appointments? Whenever I phone, I must redial 30-40 times then I get through, all appointments are gone. | The Scottish Government released a set of GP Access Principles in October 2023 that were shared with local GP Practices to provide guidance on good access for patients. In addition, several Forth Valley Practices have engaged with the Primary Care Access Programme delivered by Health Improvement to improve access arrangements which has resulted in some positive changes for patients. Investment via a Scottish Government telephony grant was accessed by 16 Forth Valley Practices, improving call handling and providing data to inform staffing requirements for reception. Additional appointment capacity has also been created through the Primary Care Improvement Plan multidisciplinary teams which have been established in recent years. |
| When will the volunteers in the chaplaincy team be able to return to visiting wards? | The Volunteer Stakeholder Group met for the first time formally in early November 2024. With the support of key stakeholders, NHS Forth Valley is working on a formal governance and implementation plan. All roles will be reviewed and risk assessed ahead of formally engaging, inducting, and training volunteers. It is anticipated that volunteers will be back in areas by March 2025. |
| Why are some referral appointments not local – I have recently had referrals to Clydebank, Edinburgh and Stirling, so why not FVRH? | Local patients may be referred to hospitals in other areas for a range of reasons, including for specialist tests and treatments which may only be provided in a number of regional or national centres. They may also be offered appointments or examinations at other centres where these can be carried out quicker to help reduce waiting times. |

| Will the car parking facilities ever be solved? Some people are parking their cars in the car park before getting the bus to Glasgow etc. so can anything be done about patients requiring a space? | The Board is aware of issues at times with car parking on the Forth Valley Royal Hospital site and is working to find solutions, including potential enforcement action where people are parking inappropriately or in an unsafe way. The car parking policy has recently been refreshed, in relation to staff car parking, and reissued. This refers to not parking in the 'front' car park to protect these spaces for patients and visitors during core operational hours. There has also been a large extension to one of the car parks to provide additional car parking spaces, which are available to all. |
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| How are we going to make A&E and CAU work closely to improve the patient care (door to treatment) waiting time? As an NHS worker, I often feel I couldn't help as patients had to sit on chair for hours and hours before they were given a bed. Though we are able to support them with comforting words, compassionate care is incomplete without satisfactory care. So as a team we have to make sure we are providing the best quality of care possible for our patients. | Work has been undertaken in CAU recently, which has resulted in a reduction in patient waiting time and improved flow through CAU. This has been carried out on a pilot basis with plans to implement the process fully during 2025. |
| I previously had DEXA Scan at Falkirk Community Hospital and was surprised to learn that it was the only one available in Forth Valley. As this scanner detects Osteoporosis, have any additional scanners been obtained since my scan earlier this year? | Currently, there is still one DEXA scanner, however the Board is aware of the increasing demand for this service and will keep the level of provision under review. |
| What is the plan to quicken up the complaint's procedure? | The complaints team is facing a number of challenges which are impacting the speed that the team can resolve issues. A number of steps have been taken to improve the complaints process and response time. |
| | The current workforce has been reviewed and additional staff members are supporting the team to bring down the backlog and improve response times. New procedures have been introduced to improve the collection of relevant information and provide early escalation, if required. Additional Information has been added to the NHS Forth Valley website to help address more common queries and issues. |

| | Stage 2 performance has increased from 2% to 28% over the last six months. However, we recognise that further improvement is required, and efforts continue to improve efficiency and response times. We apologise for the length of time taken to respond to some complaints and continue to work to improve the position. |
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| What role does wellness play in the future of the NHS? | Staff wellness - or wellbeing is increasingly recognised as a key component of NHS delivery plans with research continuing to evidence the link between the health and wellbeing of our workforce and our ability to deliver high-quality patient care. Within NHS Forth Valley, a dedicated Workforce Wellbeing Plan has been developed to improve staff experience and wellbeing across the organisation. Work is currently underway to develop a new plan for 2025 to 2029, which will be published in August 2025. Some of the resources in place to support staff wellbeing include: • Senior Leader and Managers training - A suite of HR policies and resources are available to help managers support staff health and wellbeing in their role. |
| | Wellbeing support, information and advice are available on the NHS Forth Valley website. A Peer Support Network has been introduced across NHS Forth Valley with ongoing commitment to support the health and wellbeing of colleagues. The Chaplaincy service offers a listening service for staff affected by bereavement or any other emotional pressures. NHS Forth Valley's Occupational Health Service offers a confidential service that promotes the health and wellbeing of employees. NHS Forth Valley's Equality, Inclusion and Wellbeing Service offers wellbeing support and resources to colleagues, including advice on reasonable adjustments and inclusion. |
| | This continued focus on staff wellbeing aims to build a positive work environment, where staff feel supported and valued, which in turn leads to better patient outcomes. |
| | Steps have also been taken within NHS Forth Valley to improve the health and wellbeing of local people through the development of a new Mental Health & Wellbeing plan. This has a preventative approach to mental illness and seeks to develop wellbeing in the community as well as to supporting the delivery of high-quality Mental Health services for those who need support. • Work has been undertaken with Sport Scotland and Sports Provides to build good mental health through physical activity and sport - for every extra hour of physical activity young people take part in, there is an 8% reduction in the risk of depression. |

| | Work with Forth Valley College to incorporate mental health first aid style approaches into training for beauty and hair students - based on the Lions Barbers Collective in England. Work to improve mental health and wellbeing locally e.g., Stirling Community Planning Partnership is looking at ways in which local partners can work together to reduce loneliness and social isolation. |
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| The current waiting time for first appointment following GP referral to audiology service is 10 months. Loss of hearing affects our ability to communicate well and can have a negative effect on health and wellbeing. Is there a shortage of trained audiologists in NHSFV? | A national review in Scotland identified wide-spread capacity issues within audiology. However, extensive work has been undertaken to improve staffing levels and training in NHS Forth Valley and, as a result, waiting times are reducing. |
| The Royal College of Obstetricians and Gynaecologist released a report on the 18 November, stating that wait times in Scotland have risen by 193%, the highest rise in the UK. This has been experienced by many of our group members with reports of waits for initial and routine appointments up to an over a year and waits for surgical diagnosis or treatment being up to and over a year to 18 months. What is NHS Forth Valley doing to combat these wait list times? | To address the rise in gynaecology waiting times within NHS Forth Valley, the team is working in collaboration nationally to support shared approaches and learning. NHS Forth Valley is also investing in the recruitment of staff to support waiting times in sub-speciality areas with the longest waits. This includes investment in Advanced Nurse Practitioners (ANP) and move appropriate work to an outpatient setting to increase theatre capacity. The development of ANP roles concentrating on benign gynaecology will enable consultant care to focus on more complex cases, therefore reducing waiting times. Locally the service continues to review the waiting list using a multidisciplinary approach. Additionally, the Associate Medical Director, Clinical Directors and Head of Service are working with clinicians to review job plans and help prioritise the subspecialities with the longest waiting times. |
| | NHS Forth Valley remains committed to reducing waiting times and improving access to gynaecological services. |
| The gold standard treatment for Endometriosis is surgical Excision at laparoscopy. We are hearing from group members that many are only offered ablation of endometriosis due to lack of excision skill or lack of surgeons who are trained in excision surgery. What is being done to ensure endometriosis patients are receiving appropriate care as per NICE and Scottish Guidelines? Does Forth Valley have surgeons who | All NHS Forth Valley Laparoscopic Surgeons perform excision of endometriosis at the time of operation or ablation, where clinically appropriate. |

| specialise in endometriosis care and surgery, and how can this care be accessed? | |
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| I would like to ask if a patients previous admission information is available to view each time a patient is re admitted to hospital, or is it only available for the current admission? | Our patient information system, Trakcare, enables clinicians to view all previous admissions to wards and assessment areas within Forth Valley Royal Hospital. |
| Could we please get an update regarding Bellfield Centre and CCHC regarding the Health and Social Care Partnership? Why are there beds closed permanently in the Thistle Suite and Argyle Suite, and also CCHC Ward | Over the past few years, some bed capacity which was previously funded through non-recurring Scottish Government Covid funding has reduced. All remaining beds are funded and there are no current plans to reduce existing community hospital bed capacity. |
| 2 when there is such a poor discharge profile from FVRH and so many patients are waiting on packages of care? What are the future plans, as since so many community hospitals closed there is limited discharges into community especially for patients requiring REHAB or | Clackmannanshire Community Healthcare Centre and the Bellfield Centre are important parts of the overall provision of local health and care services. Work continues to support more people at home or closer to home, where possible, minimise the time people spend in local hospitals and support people to return home or to a homely setting as soon as possible. |
| Assessment of future care needs, and private nursing homes who have NHS charged beds have a strict criterion for admission into them? Does NHS FV get charged when these beds are empty? Why when social workers go on holiday or work limited hours there are no other team members to take over their case load and this can cause further delays in patients journey of care - will this practice continue? | NHS Forth Valley does not get charged by private sector care homes when beds are vacant. Social workers and NHS staff receive an annual leave entitlement as part of their contract and may also work different hours, depending on the nature of their contracts. |
| At what point do further delays in the opening of the NTC ward become unacceptable in terms of patient care, organisational accountability, reputational harm and financial waste? | All partners continue to work together to resolve the outstanding issues, and potential solutions are currently being explored with NHS Scotland Assure and Falkirk Council. |
| Are there plans for a new Eye Clinic and eye theatres currently in FCH? | A business case is being prepared with proposals to upgrade the theatres at Falkirk Community Hospital, including the ophthalmology area. |

| Why when there is a perfectly good hospital in Stirling, do we have to go to Forth Valley for minor appointments? | It is not sustainable to provide some specialist services in a number of different locations however a wide range of services continue to be delivered from local community hospitals. Falkirk Community Hospital and Stirling Health & Care Village provide a number of services not available within Forth Valley Royal Hospital. For example, in Stirling Health & Care Village there is a Minor Injuries Unit which provides treatment, including X-rays, for a wide range of minor injuries and audiology services. |
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| Waiting times at A&E are a challenge. What is the Board doing to address this? | A wide range of work is underway across local health and care services to help reduce waiting times within the Emergency Department. All patients who attend ED are assessed by an experienced nurse and priority is given to patients with more serious illnesses or injuries who require urgent care. Many patients will also undergo tests and start treatment while they wait to be transferred to an inpatient ward. There is also a focus on reducing the number of patients in local hospitals who experience delays in being discharged to help increase capacity and free up inpatient beds for patients who require to be admitted. |
| What evidence is there of any reduction in Delayed Discharge over recent months? | Work is ongoing to reduce the number of patients who are clinically well enough to leave hospital but experience delays in being discharged home or transferred to a care home. This includes work to carry out more assessments at home or in short-term rehabilitation facilities and improve the planning and coordination carried of discharge arrangements across local health and social care teams. |
| I understand the Board has been planning for winter and that actions are being undertaken to reduce operations. I was on a waiting list for 70 weeks for an operation — what impact would this have on people like myself, in terms of waiting times. Also, what impact will this have on A&E services as people need more emergency operations? | In the past a number of operations scheduled to take place over the winter period had to be rescheduled due to an increase in demand and emergency admissions. This winter we have continued to carry out operations during the winter period but have scheduled fewer non-urgent operations during the busiest peak periods to avoid the need to cancel or reschedule operations, often at short notice. |
| As a local resident in Stirling, and as a service user, I would like to take this opportunity to say thank you to a small charity who helps people such as myself with | We would like to take the opportunity to acknowledge the valuable contribution made by a wide range of voluntary and community organisations, liked Dial a Journey, who play an invaluable role in supporting local patients and their families across Forth Valley. |

| a similar workforce plan to NHS England and are working closely with local schools, and the University of Stirling to promote healthcare careers and offer a wide range |
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