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# Message from our Chief Executive

I am pleased to commend this annual report to you, and satisfied to be able to reflect on the positive work that has been delivered by Healthwatch this year. The Care Forum is proud to host a project in a way which empowers staff be able to act as advocates, champions and supporters to those who most need to be heard.

As is ever the case, our volunteers are at the heart of what we do – and this is especially apparent in the enter and view work we have delivered which has led to improvements for many patients. It is also clear that the public is increasingly aware of what Healthwatch can offer them – as over 600 people shared their views this year, leading to improvements to hospital services and input into the developments of the Sustainability and Transformation Plan.

I would like to thank each volunteer for the way in which you have held us to account, shown leadership, inspired us and directed the work of the project. I would also like to thank the staff who have worked tirelessly to ensure that Healthwatch continues to develop and deliver this year.

Vicki Morris, Chief Executive. The Care Forum.





# Message from our Director

This year has seen a lot of change in health and social care – and the voice of local people is increasingly important as a result. Healthwatch has championed the voice of patients, carers and the public in new initiatives like Sustainability and Transformation Plans by publishing our ‘good consultation’ guide. This empowers local people to understand what to expect when changes to services are planned. Our development officers Kervon and Roopindera have been able to use our quarterly themes to spend time listening to the views of a really diverse range of voices across different genders, cultures and ages. This year has also emphasised the importance of our dedicated and effective volunteer cohort, supported by Steffie, our enthusiastic volunteer support officer.

Thank you to all of our staff members and volunteers who have worked so well together to deliver such an impressive range and quantity of work this year!

Morgan Daly, Director of Community Services



# Highlights from the year

This year we reached 3173 people on social media.



Our volunteers help us with Improving Access to Psychological Therapies (IAPT)



We helped to develop a 'Young Commissioner' role



Our reports have tackled issues such as improving cancer patient experience



Our Evidence for Change report with the Diversity Trust pulled feedback from 1100 LGBT people





# Who we are

Healthwatch Bristol is a strong voice for children, young people and adults in health and social care.

Anyone can speak to Healthwatch about their experiences of health or social care services (including GPs, hospitals, mental health services, social care teams) and feedback what was good and what was not. Healthwatch ensures that service providers and commissioners hear this feedback and make changes to their services.

When someone gets in touch, Healthwatch will:

- + signpost them to other helpful services
- + help them to access advocacy support
- + record their feedback and ensure that service users have their voice heard in decisions about the running of health and social care services

Healthwatch also invites members of the public to volunteer, helping to ensure that everyone has their voice heard in the development of health and social care services.

Healthwatch exists to make health and care services work for the people who use them.

Everything Healthwatch says and does is informed by its connections to local people. The sole focus is on understanding the needs, experiences and concerns of people of all ages who use services and to speak out on their behalf.

Healthwatch believes that asking people more about their experiences can identify issues that, if addressed, will make services better.

We are uniquely placed as a national network, with a local Healthwatch in every local authority area in England.

## Our vision

Communities and people in all their diversity in Bristol can maintain their health and wellbeing, and care for themselves and each other.

## Our mission

Healthwatch Bristol involves local people to help improve health and wellbeing services

## Our priorities

Healthwatch Bristol focuses its work by targeting seldom heard communities who would not normally voice their issues and experiences; reaching these communities through the use of Healthwatch volunteers, engagement activities and attending events and meetings.

## The team

Kervon Grant, Development officer

Roopindera Kaur, Development officer

Claire Littlejohn, Project Coordinator

Ellen Devine, Project Coordinator

Morgan Daly, Director of Community Services

Our Healthwatch Team (from left to right): Morgan Daly, Steffie Denton, Kervon Grant, Ellen Devine, Roopinder Kaur



We can help you...

Are you struggling with your health or social care?

# Your views on health and care





## Your views on health and care

Based on the work of Healthwatch Bristol from previous years, the public feedback received, local strategy and policy, and its partnerships the Healthwatch Bristol Advisory group identified gaps in feedback sources and designed a year of 'equalities' based quarter topics, to enable specific engagement with members of the equality groups identified under the nine protected characteristics (Equalities Act 2010).

### Quarter 1 (April, May and June) – Gender Health and Wellbeing

Healthwatch Bristol received feedback from members of the public that there are a number of gender specific issues and services which can impact people differently.

### Quarter 2 (July, August and September) – Culture, Health and Wellbeing

Bristol is a very diverse city and Healthwatch wanted to find out whether peoples culture and faith impact the way they access services or the service they receive.

Healthwatch particularly worked to hear feedback on the following issues:

- + Cancer
- + Mental health and wellbeing
- + Language, health and wellbeing

### Quarter 3 (October, November and December) – Age, Health and Wellbeing

Healthwatch worked to uncover the biggest health and social care issues that affect children and young people and older people?

In particular there was a focus on 'which service do you use and why?' which was a project to gain feedback on which health services people use and why they make these choices.

### Quarter 4 (January, February and March) – Society, Health and Wellbeing

Healthwatch recognised that health and wellbeing is more than just a lack of illness and that the society we live in has an impact on our wellbeing. As part of this work we looked at the impact the accessible information standard is having.

The other focus of the quarter supported engagement on a substance misuse services consultation.



Helping  
you find the  
answers

hwatch  
Voice  
coun  
Call us on our Freephone number  
0800 801 0101  
Visit our website  
www.hwatch.co.uk

## Healthwatch Bristol uses Well Aware to signpost people to local services. Well Aware is

### On website and Facebook

The feedback centre on the Healthwatch Bristol website and Facebook enables the public to provide information about all health and social care organisations in B&NES. This helps us to generate data that we can understand, benchmark and act upon. People can find any local organisation simply by searching its name, location or postcode. This can be done through a variety of devices including mobile phone whilst on the move.

When providing feedback through the feedback centre, users are prompted to review and rate services by answering a list of questions that help them to provide the right level of detail, in the shortest amount of time. They can also praise a particular member of staff whose conduct has been exemplary. All feedback is moderated before being published.

Providers also have the opportunity to respond to feedback left by service users on the website.

We capture the following data:

- + an overall rating of the service provider
- + a summary of experience which we divide into themes and subthemes
- + friends and family test questions.

## What to expect from Sustainability and Transformation Plans (STP)

This year, following confusion and worry reported by local people about STP, Healthwatch developed a document outlining the duty to consult around the STP and our role to support this work. This information was shared publicly and was presented to the STP Board. The three local Healthwatch continue to be committed to work together to support the STP as plans develop and take shape. This will continue to be a key priority as we move into 2017/18.

To read more about our STP work and view the duty to consult document:

W: <http://bit.ly/2eFOOrR>



Making a  
difference  
together



Steph  
Healthwath Newcastle U

## Making a difference together

Healthwatch Bristol uses a variety of methods to hear the views and experiences of Bristol's communities. Local people's experiences of health and care services have been collected and their needs identified through topic work around a chosen theme each quarter, engagement work at local events and groups, community pot funding to other organisations and work with our partners.

Healthwatch Bristol focuses engagement work on those people who are most vulnerable and often seldom heard.

Nearly 600 people contacted us to tell us their views this year. We also spoke in-depth to dozens of community groups to gather feedback which was used to inform service provision, monitoring and planning.

## Focus on gender

**"Missing Link has helped me grow, stand on my feet, get counselling, do art groups, have contact with my kids."**

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## Feedback from a focus group participant

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Healthwatch organised a series of focus groups for women using Missing Link mental health support – to listen to their views on service provision, and to empower them to have their say on planned recommissioning of homelessness services. We invited Bristol City Council to attend, to learn from the experiences of the women who attended.

Feedback was rich and often centred around the need for trust between patient and clinician, as well as a desire for person-centred care and feedback on how referrals between services including mental health services can create difficulties.

## Supporting young people to inform re-procurement of services

**"I really enjoy the Young Healthwatch meetings - it's great to discuss what matters to young people and hear other people's opinions. The most satisfying part is hearing about how our discussions have shaped health services in the area."**

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## Feedback from Young Healthwatch member.

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Healthwatch supported a group of Young Healthwatch volunteers to take part in the re-procurement of Tier 4 CAMHS. The volunteers individually scored the bids and then worked together to come to a consensus score. This score was then taken to the overall consensus meeting by one of the YHW volunteers. The impact of young Healthwatch input to this process was as follows:

# You said, we did

Below is the feedback we were given and what the commissioners and the preferred bidder have done

## 1. Values and Outcomes

there were too many values and outcomes

how will the provider be measured as achieving (or not) against the values and outcomes?

- + The number of values were reduced.
- + A value around services that are culturally sensitive was added.
- + A value around respect was not added but the need for service users to feel respected was included in an existing outcome.
- + The specification explains how the values and outcomes will be monitored.

2. Services should work together (including health services, social care and education).

Preferred bidder:

will deliver services in the same locations and where possible in the same places as local authority (Council) services, education and voluntary sector services.

will develop work with different health services including GPs, hospitals and services in the community.

3. Early intervention/ getting help quickly – in addition to shorter waiting times, the public also highlighted the need to emphasise the importance of early intervention.

Early intervention was made more explicit within the service model in response to feedback gathered during the consultation phase.

The preferred bidder included a very detailed plan for how they will ensure children and young people get help quickly. For example, they plan to make use of online platforms (websites) to ensure information is available to those who need it.

The assessment process will respond to the patient's needs and to who they are as a person, not just what diagnosis they have.

4. Key working – whilst the public were supportive of the proposed key worker model they wanted more information about how this will work in practice in future CCHS.

The preferred bidder said:

“to support the most complex and vulnerable children and young people... [in order to] facilitate effective coordination, [they] will work with partner agencies, to develop a shared commitment for sharing information across agencies”.

5. Workforce – How will staff be supported so they were in the best position to help children and young people?

The preferred bidder states that they will support colleagues to share their experiences and learn from each other.

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They will also use value based recruitment practices to make sure they employ the right people.

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6. Transition – transition into adulthood and moving to adult services was identified as one of the areas that the current CCHS did not do well and people felt more needed to be done to make it better. (Transition means moving from children’s services to adult’s services.)

An outcome focused upon transition was added to the service specification. The outcome states that transitions must be smooth for those who require ongoing care and care into adult life.

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An outcome was also added concerning the empowerment of children, young people and families as the consultation identified this as a gap within the original proposals.

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The preferred bidder provide acute (hospital) and community adult health services and they will work with their adult service teams to ensure smooth transition.

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Supporting local University students to deliver research:

Healthwatch Bristol’s Volunteer Support Officer worked with a group of students from UWE and University of Bristol to support them to become Healthwatch Volunteers and develop their own research projects. Below are the summary findings.

The first project researched dental care, and reported that:

Most students chose to visit a dentist in their own home towns rather than in Bristol.

The highest barriers to dental care access for students were cost, followed by not knowing how to find a dentist, opening hours and travel to a dentist, and not knowing how to make an appointment.

- + Over a third of respondents did not know how to access emergency dental care in Bristol.
- + As a result of this, Healthwatch recommended that:
- + The Dentists’ section of the Students’ Health Services website included several useful links about dental care for students away from home:
- + Any Student Health Services stands at Welcome Fairs and Welcome Weeks inform students about local dental care provision and how to access it.
- + The “Your Guide: Where to go when you’re unwell” university leaflet is updated with a few lines about dental treatment before it next goes to print.

The second project researched experiences of using sexual health services, and reported several trends in the ways in which students understand these services and access them.

Healthwatch Bristol shared a number of recommendations with local providers around how services are provided, advertised and delivered – and how to make services ‘student friendly’.

The third report researched student experiences of stress and mental wellbeing, and examined how students manage stress and maintain wellbeing.

The following recommendations were made:

1. More information is given to students or emailed to students about what to do/who you can contact if students need emergency support during stressful times. This could be done during Fresher's Week.

2. More information is given to students about services that could help like The Samaritans. We particularly recommend that more information on self-help support is provided by universities, as over three fifths of students said they would find this useful. This information could be given to the students in the form of leaflets, emails, the university websites, and posters and campaigns on campus.

The report is available here: <http://bit.ly/2ks0mBc>

University of Bristol Student Health Service responded to the recommendations – to read their response visit: <http://bit.ly/2kRJulp>

University of the West of England (UWE) responded to the recommendations – to read their response visit: <http://bit.ly/2jVa8cd>

## Our Plans for Next Year

Our quarterly themes will be

Quarter 1: Primary care

Quarter 2: Long-term conditions

Quarter 3: Mental health

Quarter 4: Social care

We have also been directed by the Advisory Group to deliver a joined-up focus on health and social care by monitoring and participating in:

Sustainability and Transformation Plan (STP), the Health and Wellbeing Board, Joint Strategic Needs Assessment (JSNA), the Quality Surveillance Group, the People Scrutiny committee, the Urgent Care Steering Group, the Bristol CCG Primary Care Commissioning Group and any other strategic group or committee that spans health and social care.

The following questions and challenges have been made by the Advisory Group to be acknowledged this year:

- + How does the public influence health and social care strategy?
- + How can Healthwatch facilitate public involvement in strategic groups?



The image features a large, abstract graphic on the left side, composed of overlapping organic shapes in shades of orange and green. The top portion is a large orange shape, and below it is a green shape that overlaps the orange one. The text 'Our plans for next year' is written in white, sans-serif font within the orange area.

Our plans for next  
year

## Independent Health Complaints Advocacy (IHCAS) and Healthwatch

The Care Forum works in partnership with Support, Empower, Advocate, Promote (seAp) to provide the Bristol NHS Complaints Advocacy service. A member of the seAp team attends the Healthwatch Bristol Advisory Group. This is really beneficial as this year they have been able to input themes arising from advocacy cases such as challenges faced by patients who are deaf or hard of hearing when accessing services. seAp have also been able to share case studies to illustrate some of the barriers experienced by patients.

Themes from NHS complaints The main themes of complaint over the past year are:

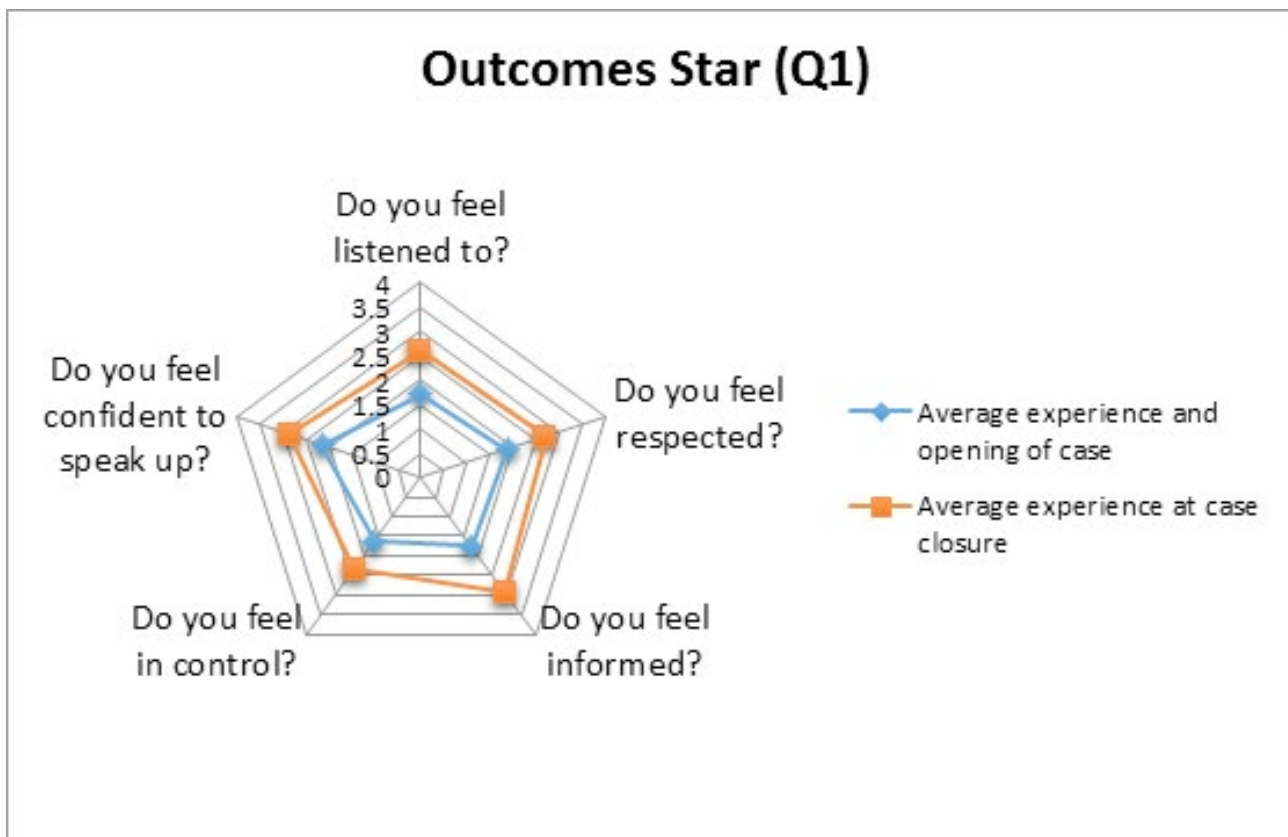
- **Quality of treatment – particularly relating to the large providers of secondary care and mental health services.**
- **Difficulties within the patient pathway – especially around referrals between service providers.**
- **Difficulties with premature or unsafe discharge – especially from mental health inpatient services.**

In summary for the year, seAp noted that they 'continue to support clients with diagnosed mental health issues who struggle to access services'

Clients of the service are often very grateful for the support they receive, and overall outcomes are good (see diagram from quarter 1 of this year which illustrates this).

Thank you for all your time and expertise in dealing with this matter, which has helped me to understand the process of how to deal with these incidents. Without your input I would have given up long ago and this would never have been resolved, causing the same problems to reoccur.

- seAp client



## Complaints procedure advocacy

During the past 12 months, we have provided complaints procedure advocacy for 38 Bristol service users:  
30 adults and 8 young people.

There were 12 Brief Interventions within the period. Examples of Brief Interventions include signposting or referring to an appropriate service or sending CPA self-help packs.

### Awareness raising

We have an awareness raising strategy with the target groups and focus areas of the Bristol Healthwatch. The following are examples of where a Healthwatch representative and advocate have jointly raised awareness at local events:

- [Health Awareness event at Junction 3](#)
- [Nilaari Project](#)
- [BCFM broadcast](#)
- [Celebrating Age Event](#)

“The advocacy service was really helpful. My advocate kept me informed about what was going on and how the complaint procedure worked. During a stressful time I had someone who listened to me and took me seriously”  
- CPA client



# Our finances

<b>Income</b>	<b>£409,251.00</b>
Funding received from local authority to deliver local Healthwatch statutory activities	£ 400000
Additional Income	£9251
<b>Total income</b>	<b>£409,251.00</b>
<b>Expenditure</b>	<b>£410,301.00</b>
Operational costs	£119,025.00
Staffing costs	£275,300.00
Office costs	£15,976.00
<b>Total expenditure</b>	<b>£410,301.00</b>
<b>Balance brought forward</b>	<b>-£1,050.00</b>





# Contact us

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Website: [www.healthwatchbristol.co.uk](http://www.healthwatchbristol.co.uk)

Twitter: @HWBristol

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We will be making this annual report publicly available on 30 June 2017 by publishing it on our website and sharing it with Healthwatch England, CQC, NHS England, Clinical Commissioning Group/s, Overview and Scrutiny Committee/s, and our local authority.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us at the address above.

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