

Prioritisation Panel Bristol

4th August 2021

Closed Meeting minutes

Attendees: Julie Bird (JB), Vicky Marriott (VM), Dave Crofton 9DC), Vicky LeMay (VLM), Karen Whitaker (KW), Kate Mould (KM).

HW = Healthwatch

1. Welcome and apologies
* Apologies from Peninah Ahieng, Nima Masterson
* Reminder of purpose of meeting
* Check if there are registrations for the public meeting – none expected
* Request for recognition of conflict of interest – none provided
1. Minutes of previous meeting

VM shared on screen the minutes from last meeting with 4 ongoing actions. No factual changes

3. Update on progress of last meeting agreed actions

* CAMHS referral- Q4 report showed parents struggling to get help as no school support.

ACTION: To provide feedback to BCC SEND team & ask for comment VM seeking SEND team lead name and will email them Q4 & 1

* Prioritisation panel public meetings have no public interest/attendance.

 ACTION: Consider changing times/adding speakers JB or VM to find speaker to be invited for a possible lunchtime/evening after 5pm meeting in November.

* Feedback on Elgar house

 ACTION: agree date in August for meeting VM with Patient Experience Mgr. Gifty Markey. Also, conversation needed with head of Nursing Helen Blanchard - to address this & other issues in Southmead

* Mental health treatment capacity highlights long waiting list, particularly 5–11-year-olds – but how long are they waiting?

 ACTION: Need to know details. Data from AWP to be discussed VM has slides re waiting times and will search out and send round.

1. Patient feedback report Quarter1 2021 briefing
* Service delivery around booking GP appointments- attitudes around booking appointments- highlighting very long waiting times on phone. Call centres cut you off if you are more than 20th in line. Only 1 mention of being able to get through easily to book appointments. JB asked how the panel would act on this? VM suggests data taken to Primary Care Strategy Board

 JB Suggested HW produced a letter concerning need to focus more on receptionist training. KW elaborated on this stating it is also due to lack of information with people not understanding how the system functions. How HW can use the media to spread information about GP surgeries to help signpost . VLM suggested giving this idea to CCG to help take the weight off receptions by providing better service & emphasised KW’s point regarding management of people’s expectations. VLM asked if this report will be shared with other GP practices- JB said yes, GPs need to know how to support patients and be more helpful to those who aren’t confident with technology. DC asked: if there’s universal training for the receptionists to deal with the issues and signpost to social prescribers etc?

There was concern from the public about giving personal information to non-medically trained people. Some had felt there was a lack of confidentiality within the practice

ACTION ARISING; Use HW’s social media to emphasise GPs backlogs and delay. Educate about other options opposed to always going to GP. Using pharmacy or other self-help. Educate the public about the help they can now get from care navigators. (JB)

* + 45 comments made on dental access- JB Fed back from sprint meeting- said HW had suggested offering more guidance around website updating and information sharing with the public, as there are real problems around keeping patients informed. JB commented there was a recent letter signed by HWEngland and chef dental officer. It is being sent by KM in hard copy to all Bristol dentists. KW and JB both emphasised there has been more feedback around children as well as those with maternal exemption certificates. Exemption certificates have a limited time to use them and have run out by the time people use them.HW will continue to use this to help push dental reform up the agenda.

A further issue of health inequality was also raised as patients are not tied to a geographic location, so those that can travel can go further away if need be to find a dentist.

 KW noted there may be voluntary organisations or charities that will pay dental fees for individuals- those with Parkinson’s disease might have a grant available to them- . Review of the dentistry contracts should look at raising numbers who can access NHS dentists, up to a higher level, from current 50%.

VM asked if there is a continuation of the sprint meetings that HW can attend, VLM confirmed there is. Advised that quarter one report will go to NHS England

ACTION ARISING; Ask Citizen's Advice and Voscur if its something they know about, especially if this is with specific medical issues. (JB)

* Health visiting team. Sirona meeting coming up- Kylie Lansdown original Wellbeing Manager for South Bristol is now leaving, Charlie, Leader for the Inner City and East is taking for now. At the regular Sirona meetings, information is being given directly to them. A recent one saw a Sirona rep put into contact with one of the patients we had spoken to and provided information on what went wrong and what they could do better. It is highlighting a basic problem of lack of communication.KW suggested HW could use communications to put a message out about where people (needing help with small babies) can go for help.

 ACTION ARISING; Ask Sirona to provide a contact list that HW comms can use with info to assist patients needing support with infants.(JB)

* Item on Stroke in south Bristol area has been resolved- item 112 in report- family and woman has been linked to consultation and advocacy. KW suggested we could make a case study for a training exercise to hospital staff (particularly in new stroke service) on how to do things better- using a film to show during training.

 ACTION ARISING; Highlight this to Jill Reakes to ensure this gets to the Stroke Consultation team around training so that staff do not speak over a patient/ be more sensitive. (VM)

* Safeguarding- item 126- contacted about a patient reporting they are being held against their will in a health facility. HW must discuss anything that is a safeguarding concern, and if there is a decision to escalate, forward this to the right safeguarding contacts in Bristol which are in HW policy documents. First checked out voracity and decided not to escalate this.
* Nurse at Southmead unit was a retrospective call complaining about staff hospital and protocol they are using- advised her to speak to Customer Services at the BNSSG CCG and The Advocacy people. Rachel ( at Advocacy) will get in touch once we’ve heard further from her.
* Item 124- mother ringing about daughter regarding Rosa Burden centre (run by NHS North Bristol Trust and is a neuro-psychiatry centre) stating doctor was not taking daughter seriously and alleging ‘bullying’. . Mother not given advanced warning of her being moved there. Daughter is now home. Mother signposted to VitaMinds.

ACTION ARISING; Highlight concerns at PEG group at NBT after Q1 received. VM also talking to Patient Experience manager and higher if needed.(JB/VM)

Strategic updates from VM

* Imelda Redmond CBE is stepping down from post of national director for HWE
* 2 years ago, HW north Somerset gave feedback to go into a report- ‘There and back again’ regarding patient transport. NHS responded to the report this week. Have plans to commission transport within new regulations in the integrated care system- NEPT (non-emergency patient transports) will have a lead in the new ICS to cover registration of vehicles and include reimbursement to drivers.

 ACTION ARISING ; NHS transport commissioning plans to be forwarded to meeting members. VM)

* Integrated Care Partnerships- 3 in Bristol came to health and wellbeing board Bristol in august 2021

ACTION ARISING Slides from Health &Wellbeing board to be shared with meeting members. (VM)

* JB has a project around D2A looking at experiences of social care when people get released from hospital- this is already underway.
* DC brought up recent news UHBW in Weston found that the line managers were asking Black Asian Minority Ethnic staff to change their names to a western sounding name so they would be easier to pronounce.

Thank you to everyone for their involvement

Next meeting Wednesday November 3rd- 10-12:30