



On equal terms

Then and now

Healthwatch Bristol Annual Report 2020-21

Contents

Message from our Chair	3
About us	4
Highlights from our year	5
Theme one: Then and now, Dentistry	6-8
Theme two: Then and now, Care at Home	9-10
Patient Participation Group Forum	11
Work with Bristol Health Partners	12
Our Covid 19 Response	13
What people have contacted us about	14
Our Trustees & Volunteers	15-17
Finances	18
Statutory duties	19
Methods & systems / our outcomes	20
Priority projects in 21/22	21

Message from our Chair

This year has been a very challenging time for us all, but we have responded to the pandemic by implementing changes quickly and being responsive to immediate community needs.

Unable to provide face-to-face engagement, we have increased our help with information and advice using our website, and social media reaching nearly 12,000 people. Our webinars have also brought health experts to the public to provide detailed information on the vaccines and help them to make informed decisions on how to keep themselves safe.

We have extended our reach to seldom heard communities via local voluntary groups linking them to practical support and have provided 'how to' guides for those who were encountering new systems to contact their GP via their telephone or laptop.



"Our work this year has shown how Healthwatch can support and facilitate collaboration between the public and providers of health and social care to improve services. Thank you to all who shared their stories."

Dentistry:

Dentistry was highlighted as a public concern with almost 100 people sharing their experiences. This information contributed to an important Healthwatch England report, a Parliamentary debate and media coverage.

Carers:

Safety constraints of the pandemic added to existing difficulties for a wide range of paid and unpaid carers. Lessons from their feedback including the care families provide at home for dementia, ethnically appropriate care and help for those encountering language barriers will be further developed by University of the West of England and partners in 2021.

Our research helps inform best practice, features in nursing research, and aids learning from Covid 19

We worked with Bristol Health Partners to carry out funded engagement work with patients about how bladder and bowel conditions were managed by services during Covid 19. Working with a Health Integration Team the qualitative feedback from our patient engagement, will support a funding bid to bring in changes in nursing care for these patients.



Georgie Bigg

About us

Our mission

We are the independent champion for people who use health and social care services in Bristol. By offering all people a strong voice, we will improve the quality of local Health and Social Care.

Helping you to find information you need

We help people find the information they need about services in their area. This has been vital during the pandemic with the ever-changing environment and restrictions limiting people's access to health and social care services.

Our goals



1 Supporting you to have your say

We want more people to become involved, and engaged, share their care experiences with us and be empowered to make an impact on how services meet the public needs



2 Providing a high quality service

We want everyone who shares their experience or seeks advice from us to get a high quality service and to understand the difference their views make.



3 Ensuring views & experiences are shared and acted upon

We want more services to use the views of the public; families, carers, patients and communities - to help shape the health and care support they receive.



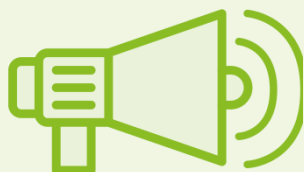
"Local Healthwatch have done fantastic work throughout the country during the Covid 19 pandemic, but there is more work ahead to ensure that everyone's views are heard. Covid 19 has highlighted inequalities and to tackle these unfair health differences we will need those in power to listen, to hear the experiences of those facing inequality and understand the steps that could improve people's lives."

Sir Robert Francis QC, Healthwatch England Chair

Highlights from our year

Find out about our resources and how we have engaged and supported people in 2020-21.

Reaching out



We heard from

320 people

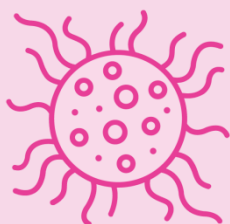
this year about their experiences of health and social care.

We provided advice and information via Twitter, Facebook, our Website and by email and phone

11,802 people

this year.

Responding to the pandemic



We engaged with and supported

10,600

people during the Covid 19 pandemic this year using social media, a poster campaign, information webinars and bi-monthly newsletters.

Making a difference to care



We published

3 reports

Based on our workplans of improvements people would like to see; 'Care at Home', Dental South-West report and 'Dementia Carers –a unique journey'

We made 17 recommendations

For details on outcomes so far (see page 20)

Health and care that works for you



10 volunteers and 8 trustees

helped us to carry out our work. In total, they contributed 373 hours of their time.

We employ 3.3 members of staff (full-time equivalents)

5 people are working part-time and two full-time

We received

£117,428 in funding

from Bristol City Council in 2020-21.



Theme one: Then and now Dentistry



Then: access to NHS dental services

Almost 100 people in the Bristol area shared their experiences of dentistry. Because of their feedback, we were able to highlight with commissioners the range of issues people were experiencing. Accessing NHS care and treatment became increasingly difficult during the pandemic and our research found that out of the 50+ dentists registered in the city, many could only offer private appointments with costs out of reach of many people.

Our staff at Healthwatch Bristol had calls from families, adults and young people about serious dental issues like broken teeth, abscesses and severe pain. Some had been suddenly de-registered by their practice, others who had never been registered and could find no treatment available on the NHS when they needed it. Some sought NHS treatment after changes to their income level, or had moved house but couldn't find an NHS dentist in their area, others were unable to find ways to access information or even make a complaint. (See over the page.)

The contract with Dentists allows for enough NHS appointment slots for about half the adult population, but during the pandemic this was not enough to go round. Covid guidelines resulted in less patients being seen, further compounding an existing problem and leading to anxiety and misery for many.

Our phones rang constantly. People needed help to access NHS dental treatment



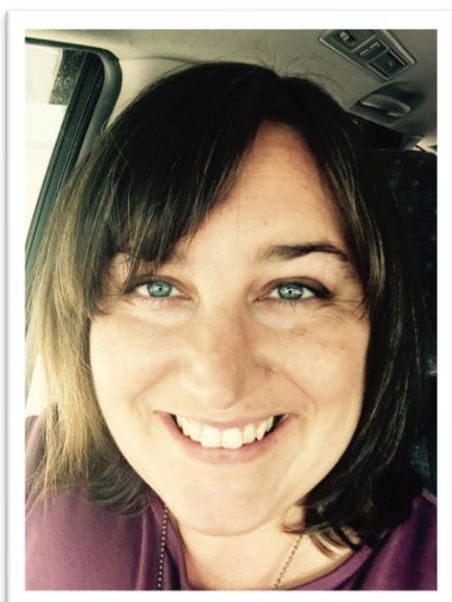
Lovish Dhingra, who was in extreme pain for weeks, phoned forty dentists in Bristol but after finding no NHS help, reluctantly went to A&E.

He said:

"I tried for weeks but I couldn't get an appointment despite being in unbearable pain.

I called 111 and was told to take ibuprofen for five days and try to see a dentist! However, I can't get to see one."

- Our work highlighting patients who are unable to access affordable dental care attracted the attention of BBC Radio Bristol and we provided information in two interviews in early 2021 with patients joining us to tell their stories.
- Our pandemic insights have been collated by Healthwatch England and this data helped to reveal that some minority ethnic communities are less likely to be registered and have been more likely to struggle with access to an NHS dentist.
- Many people were offered treatment if they could opt for private care, despite research indicating that 40% of people would struggle to afford private dental care.
- Emergency treatment centres were established during the pandemic but many people found they did not meet the criteria for treatment there.



Jamie Fagan tried to book an appointment with an NHS dentist for over a year and ending up having to pay for some of her treatment.

Jaime needs more dental work but says the high costs involved means she has decided to put up with the pain she is in, for now.

She says she has also had to pay privately for her children to get treatment.

She said

"I am in pain but I've managed to live with it. The costs of private treatment are out of reach for me at the moment. I'll have to see how long I can hold out. My children are the priority."



Now: Keeping the issue on the agenda

Patients shared their experience of dentistry during the pandemic, and this public feedback was able to inform a Parliamentary debate in spring 2021

As with all patient experience data, we forward reports containing anonymous comments on services to those that provide the services across Bristol North Somerset and South Gloucestershire, the Clinical Commissioning Group, NHS England and Improvement, and Healthwatch England. Stories from Bristol residents was used in a Healthwatch England report: *Dentistry and the Impact of Covid-19* published December 2020, which made national headlines and fuelled a parliamentary campaign urgently calling for NHS dental reform plans to create more equitable and affordable dental care.

"Many thanks, the real stories are powerful, if difficult to read. So valuable for the work we are doing together to improve the situation."

Ian Biggs, Director of Primary Care and Public Health, Commissioning SW regions, NHS England and Improvement

One of our Bristol Area Leads, Julie Bird, compiled dental feedback from 13 Healthwatch areas, from across the South-West commissioning area. This report has been regularly shared with clinicians and updated for quarterly Dental Network meetings. 2021 Dental Reform Programme used this 'lived-experience' in their workshops. It was brought to Clinical Covid Recovery meetings to pinpoint key issues.

With so many people struggling to get NHS dental treatment, Healthwatch Bristol drew up a Support Resource which is regularly updated and posted on our website [here](#) and shared on Facebook. This offers patients helpful tips and information.

The lack of accurate (or in some cases, any) information during the pandemic about whether dentists were taking on NHS patients was a real problem. Healthwatch called on the Government to make it a legal requirement of the dental contract to regularly update information on their websites and on the platform NHS.UK. We also called on NHS England to ensure their "*Find a dentist*" website is kept current and useful.

Julie Bird says: "We continue to lobby for change in dental provision through the revision of dental contracts and flexible commissioning. We ask that the public receive better communication, updated websites, and recommend that the wide variation in registration and access to preventive medicine, be examined."

Share your views with us

If you have a query about a health and social care service, or need help finding further support, get in touch.



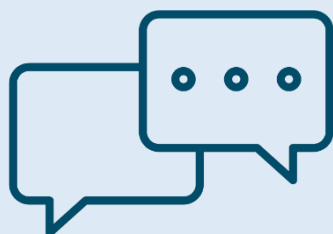
www.healthwatchbristol.co.uk



07944 369180



Contact@healthwatchbristol.co.uk





Theme two: Then and now Care at Home



Then: Stories in 2020 highlighted the upheaval in home care and to unpaid Carers.

In our research with unpaid carers we spoke to Tony Hall, above, and others like him caring for family members with Dementia. There are over five thousand people with Dementia in Bristol and caring families spoke to us about respite services, peer support and the need for flexible appointment times. Our report '*Caring for someone with Dementia, a unique journey*' made recommendations based on their evidence. Unpaid carers, some from ethnic minorities, told us that feeling low or depressed had been exacerbated by the pandemic. Others talked of limited resources for non-English speakers which made the emotional journey more challenging.

At the start of the pandemic Healthwatch Bristol received feedback from concerned people reliant on home care provision and worried about how it was being impacted. We wanted to understand the experiences and challenges of those being cared for by services in their own home. We used an online pulse survey to capture a snapshot of the issues affecting families, and professionals to help inform care providers and commissioners. 'Care at Home' explored how changes to services at home which had been implemented for infection control was affecting service-users. Care receivers, almost always in a high-risk category or shielding, had care services changed or severely interrupted. Routine health appointments with GP surgeries and hospitals were cancelled and procedures postponed. Professional carers began self-isolating due to higher rate of infection among them. These Covid-19 disruptions compounded an already creaking social care service. We asked what issues these people faced during the pandemic who had been receiving professional care in their home?



Now: Making a difference to those cared for at home

'Our June 2020 'Care at Home' report cited problems faced by users of domiciliary care who were having 'no support' or less continuity of carers they knew and trusted. We recommended people should know in advance about changes to support and are provided with advice on using PPE. Better non-digital communication was also needed. We asked that people have clear and simple advice on how to stay safe. Our findings were presented to the Bristol Health and Wellbeing Board. A guide was created on how to 'don and doff' PPE, including a version in Easy Read. We shared this with care givers and users, particularly those managing their own carers using Direct Payments. Since December we've been able to let people know of the 'Community Outbreak Social Care Plan' aimed at care workers and those in receipt of adult social care. Social care providers were among others impacted by two rounds of Council Infection Control Funding.



"It has been difficult because (our) paid carer does not have PPE and I have not been able to buy it. Both my husband and I are shielding, and therefore we have not been receiving any personal care!"

Our Dementia Carers report revealed the need for local resources that help carers. We created an online support map for providers to use and update (see resource [here](#).) The University of the West of England and Bristol Health Partners have National Institute for Health Research funding, to further develop online resources for the communities we heard from. They will facilitate access to Dementia care pathways for people living with dementia and their families from South Asian communities. We are also delighted to hear that our Carers' views about ethnically appropriate care for the Dementia patient and family has been highlighted with local partners.



"There were no Chinese speaking care staff, so we were never told about any respite options. I would have liked to talk to someone else, not necessarily Chinese, just to share some thoughts and experiences with someone who knew what we were going through."

Maria Choi and her husband Chung Choi

Dr Julie Clayton, Public & Patient Involvement and Engagement, Bristol University and Bristol Health Partners Project Manager for the Dementia Health Integration Team said of our online resource map:

'This is so insightful and it's great to see it all pulled together for identifying and supporting carers'.



**To find out more
See our projects 'Care at Home'
'Caring for someone with Dementia - a unique journey' +
resources map
www.healthwatchbristol.co.uk**



Patient Participation - supporting a new network

Healthwatch is playing its part in empowering Patient Participation Groups (PPGs) around the city. These have the aim of making sure their GP practice puts the patient, and improving health, at the heart of everything they do. By supporting these voluntary groups, and their practice staff, we keep patient-centred care centre stage.

There are over 40 GP surgeries in Bristol and it is a contractual requirement for GP practices to have a PPG. Patients have long-valued the relationship with their GP and general practice however the dynamics have changed over recent years, and today patients rightly want more say in their own healthcare, are better informed and expect to be given opportunities to have their say in the way services are delivered to best meet their needs.

In the Bristol area we have helped to establish a new forum for patient-led representatives. This PPG Forum is open to PPG group leads and members, forming a diverse, powerful and influential group. By championing patients in primary care, Healthwatch are helping make the connection between people, their insights and the City's health and care decision makers that will result in real impacts for patients.

New PPG Forum across Bristol



We held recent elections to establish a group of leaders to help shape the newly formed Bristol PPG Forum. It will soon begin to set out its vision and the group has already demonstrated a commitment to work together and bring about benefits to patients. The public will be able to get involved and provide feedback to the NHS on future services, while also inspiring others to set up similar patient-led groups.

PPG Chair and forum member Toby Lumber says "Once our forum is established it will look to build relationships within the NHS providers so that they have trust in the group to share their plans and direction.... "The NHS providers can feel confident to look for feedback from forum members to influence future services. We want to keep it open to fresh ideas and lived-experience of care."

"We are proud to be able to support a robust structure for patient participation representatives across Bristol. PPGs are an important part of representation, and we intend to assist in growing these and establishing a strong patient voice covering the diversity of Bristol's residents." **Julie Bird, Healthwatch Bristol**

Bladder and Bowel Services during Covid 19

Our work with Bristol Health Partners receives recognition

We carried out engagement work for the BABCON HIT and heard from patients about how bladder and bowel conditions were managed by services during Covid 19. Our poster, telephone and online research was directed by Dr Cotterill, Associate Professor in Continence Care, University of the West of England. The research has recently been selected by peer review to feature in *Nursing Research Matters – learning from Covid 19*, a national portfolio of research that informs best practice. The qualitative feedback will now be used to back a funding bid that may have a significant impact on nursing care. Dr Cotterill hopes that further funding will become available to develop a framework for training & education to underpin high quality continence care. We were delighted to work with Bristol Health Partners. Its remit is clinical and biomedical research, public and population health. They have a model of Health Integration Teams or HITs, which bring together partners to tackle health topics or conditions.



Dr Nikki Cotterill, NBT Continence Lead and BABCON HIT Director said:

"It is so amazing that so many people will have had their voice heard over this 'hidden' issue and I am delighted to have worked with Healthwatch on this, thank you."



Our Covid response: sharing information to those in need

When Gina (above) came to us for help finding services for long-Covid after she left hospital and developed unusual symptoms, we provided information. We kept in-step with the developing picture of services and Government guidelines. Using our links to providers of community and hospital services, GPs, and the voluntary sector. We signposted people to mental health helplines, listened to the public about their experience of surge testing and co-hosted public information events about the Covid 19 vaccination, which impacted on the numbers taking it up.

We became one of the first organisations, apart from health professionals, to refer people to NHS Volunteer Responders. We worked with Town Councils and Mutual Aid groups linked volunteer networks to local people, for help with their shopping and prescriptions, or support from befrienders. Once the mass vaccine roll out began, we helped to facilitate equal access to information, using a range of languages and advice from faith groups. We interviewed members of the Somali, Bangladeshi and Malayali communities, shared their stories and their advice. We were told this helped vulnerable communities find culturally sensitive support and information around the City.

We put our Zoom webinar platform to good use by joining forces with health professionals and scientists to host online information sessions. We focussed on relevant topics such as how the vaccine service worked for people with autism, who was offering patient transport to appointments, and improving access for those with visual or physical disabilities. Experts were on hand and had conversations about adjustments at vaccine sites for people with learning disabilities. We worked with partners to help answer questions from LGBTQ+ communities, and about maternity, breastfeeding, pregnancy and fertility, helping hundreds of people to make an informed choice. Evaluations after these sessions found people shared the information widely and were less hesitant.

Top four areas that people have contacted us about:



30% dentistry



20% booking appointments with GPs



15% vaccinations



10% mental health referrals

Falling through gap between services



People trying to find the right mental health support were frustrated by being bounced between services. Sometimes symptoms were the wrong fit for what was available, or interpreted differently by professionals.

One man told us he was assessed as too unstable for assistance when he self referred to the newly formed and multi-agency 24-hour mental health helpline. He could not find help from the talking therapies provider either. He was then referred to the community mental health team who said he was not serious enough for them to help. Bewildered by the virtual system he told us he felt 'abandoned and helpless.' We shared this issue with planners. A better single point of access has since been developed and a pilot is being considered to offer triage from the 111 number for mental health concerns.



Contact us to get the information you need

If you have a query about a health and social care service, or need help with where you can go to access further support or information, get in touch. Don't struggle alone. Healthwatch is here for you.



www.healthwatchbristol.co.uk

07944369180

Contact@healthwatchbristol.co.uk



Volunteers

Healthwatch Bristol is supported by 18 volunteers, 8 who are Board Trustees who provide governance for the area. Many volunteer help us engage with communities or represent Healthwatch Bristol at meetings where we can contribute to evidence or connect with providers and planners of services.

We would like to applaud our volunteers for adapting their roles so very effectively despite the national lockdown restrictions. This year our volunteers have:

- Actively participated in Board meetings and Prioritisation Panel meetings where we review public feedback and identify action to take towards service improvement
- Carried out essential research to support and inform our project work
- Shared their knowledge about local health and social care services with Healthwatch staff to help staff be more effective in their roles
- Attended Patient Experience Group meetings at University Hospitals Bristol and Weston and North Bristol Trust and provided feedback
- Helped in our office to support with general administrative tasks
- Created eye catching social media posts which increased the volume of public feedback we received
- Reviewed and challenged NHS Provider Quality Accounts enabling Healthwatch to submit an informed comment
- Provided a sense-check for services developing leaflets and information

Here are just some of our Trustees from across Bristol, North Somerset and South Gloucestershire.

[See our website](#) [Our Board](#)



Trustee Karen Whitaker

Having spent her working life in social care and the voluntary sector, Karen was keen to use her knowledge in a volunteer role across the BNSSG and lives in North Somerset: *"I represent Healthwatch on the SW Carers Partnership Board, because it is crucial the input of unpaid family carers is valued by professionals, and because carers' own needs must be met for them to continue in the role effectively. This year I have also been actively involved in the Dementia Carers' Project and the Prioritisation Panels that shape the workplan for the forthcoming year."*



Trustee Sato Black

Sato moved to the UK from Japan 13 years ago and has worked in social care and been involved in community activism. Sato has recently been involved in a project with St Monica's Trust supporting community groups to help reduce isolation and loneliness. Sato says, *"I am hoping that I can remove barriers for communities, establishing relationships and trust with their neighbours and key workers. Sato brings valuable experience and knowledge of the South Gloucestershire area to the Board."*



Trustee Peninah Achieng-Kindberg

Peninah became a trustee in 2020 and supports our Finance Committee. She joined our Bristol Prioritisation Panel and contributes to its strategic focus and alignment of our research with local issues. She is as Senior Policy Lead within the Prison and Probation Service, helping implement the 2016 Lammy review 'Explain or Reform' of the Criminal Justice System. She has supported the Bristol voluntary sector. She says *"I have always had a passion for activism and I'm committed to empowering communities."*

Our volunteers contribute to making services equitable for patients



Volunteer Nima Masterson

Nima recently became a member of our Prioritisation Panel. The panel reviews feedback received from members of the public and each quarter he and others recommend and influence actions Healthwatch Bristol staff take, to ensure service users' voices are heard and issues they've raised are resolved or escalated. Nima said: *"I've been inspired by other members of the panel and their dedication to ensure our health services work for our communities."*



Volunteer Suaad Walker

Suaad carried out our research looking at GP websites as part of an audit to see the way practices are providing information for patients. Her findings showed that the quality of information on websites was enormously varied. Suaad said: *"It is essential that practices think about who their patients are, what they need and understand cultural differences, enabling practices to reach out to the patients they serve. I hope that once a report is published and shared it will help practices to improve their websites."*



Volunteer Roxana Seifer

Roxana supported the 'Dementia Carers' project by taking notes at the listening event enabling the participants to talk freely and by writing up the findings with great insight and empathy. Roxana said: *"It was very rewarding to help with understanding the needs of those caring for someone with dementia and the challenges they experience. I enjoyed learning more about Healthwatch's valuable work providing a voice for those using health and care services."*



We are always looking for new volunteers. If you are interested in volunteering, please get in touch.



www.healthwatchbristol.co.uk



07944369180 or



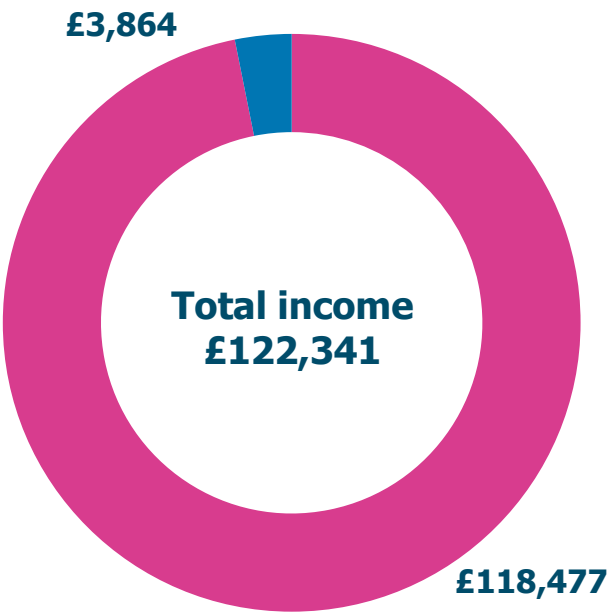
Email: Julia@healthwatchbnssg.co.uk or Rachel@healthwatchbnssg.co.uk

Finances

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

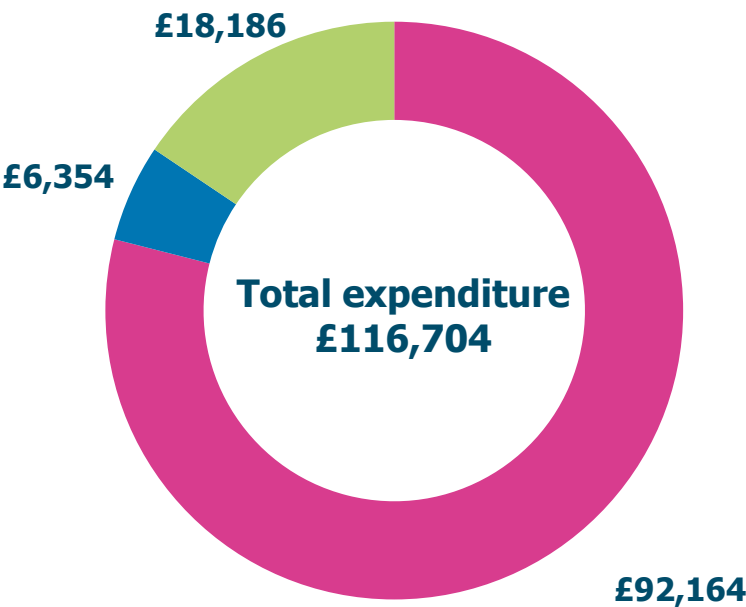
Income

- Funding received from local authority
- Additional funding



Expenditure

- Staff costs
- Operational costs
- Support and administration





Our statutory duties

About us

Healthwatch Bristol uses the Healthwatch Bristol Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Involvement of volunteers and lay people in our governance and decision-making.

Our Healthwatch Board consists of members who work on a voluntary basis to provide direction oversight and scrutiny to our activities. Our Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Through 2020/21 the Board met 12 times and made decisions on matters such as ways of working during the Covid 19 pandemic, ways to expand representation on the Board of trustees, improving the skill mix of staff and spend on upgrading telephony and Wi-Fi. Our AGM in October was held on Zoom and public members were able to vote on our charity name change, the appointment of new Trustees, hear our finance report and the impact of our projects.

We ensure wider involvement and transparency of our work priorities by holding a Prioritisation Panel each quarter. The Panel consists of four volunteers, two staff and two Board members. They have met virtually in 2020 and 2021 to discuss our patient feedback, and use the insights to make recommendations for actions. These may include escalation to the Care Quality Commission, taking findings to Health Scrutiny Committees at Local Authorities or informing commissioners about themes to inform their decisions. This year, Enter and View observations in provider settings were suspended by Healthwatch England due to infection control.

Methods and systems to obtain people's views and experience.

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of health and care. During 2020/21 when we were unable to meet face-to-face we reached out by phone, by email, provided a form on our website, provided a feedback centre/rate and review system, set up online focus groups and online surveys and attended virtual meetings of community groups and forums. We also engaged widely with the public through our social media channels.

We are committed to taking additional steps to obtain the views of people from diverse backgrounds whose voices are less often heard by health and care decision makers. This year we have done this by, for example, emphasising the coproduction of our projects with those who have lived experience and their carers and in partnership with the voluntary sector. We carry out Equality Impact Assessments on our research projects and this has helped us target those communities whose health outcomes are poorest.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We publish it on our website www.healthwatchbristol.co.uk and use social media to promote the digital version and provide a print version by mail.

2020-21 outcomes

Project / activity area	Local outcomes
NHS Dental public feedback	Our data informed Oral Health Needs Assessment, & NHS E/I workshops for Dental Reform Plan, and changed Comms/info on practice & regulator sites
Signpost and provide information	Individual enquiry from mother who used A&E after problems with jaundice and limited advice on breastfeeding. We asked Sirona health visitors to get involved who also made connection and gave support for the patient to a breastfeeding specialist.
Bladder and Bowel services engagement	This report of patient experiences has been peer reviewed and chosen to be part of the national Nursing Research Portfolio, to inform better care
Patient feedback a quarterly report on a range of service experiences brought to us by the public	Plans for themes to be presented as agenda item for Bristol Health and wellbeing Board in 2021. Bristol Hospital In-patient care experiences collected for review by Health Overview & Scrutiny Cttee to inform recovery strategy post Covid 19
Care at Home report	Gave the public opportunity to provide insights to help local authority provide the right information. Raised profile of paid carers and users of Direct Payments re PPE & support, concerns around infection control and loneliness.

Responses to recommendations and requests

We asked for responses to our recommendations. We know it has been a very busy and challenging year, and we will continue to pursue some providers. Where we have had dialogue we encourage changes that align with patient needs. We always report impacts to the public.

Health and Wellbeing Board

Healthwatch Bristol is represented on the Health and Wellbeing Board by Vicky Marriott Area Lead. During 20/21 she has carried out this role by contributing to development sessions, presenting an outline of Healthwatch Bristol work in 2020/21, presenting findings of Care at Home and patient insights by theme from our public and patient feedback quarterly reports.

Our priority projects for 2021-22

- Digital Exclusion and communication with GPs and others for appointments
- Discharge To Assess: how these pathways might work better for those going home from hospital into social care services
- To look into the practices that contribute to the dignified care of elderly people in hospital

Next steps

- Present findings from our Dementia Carers report to Health Overview and Scrutiny, NHS England and Improvement and the SW Carers Partnership
- Continue to lobby for change in dental provision through Dental commissioners and the South West Local Dental Network
- Further improve how we collect demographic information so that we can improve our understanding of the health and care experiences and needs of people from Bristol's diverse communities
- Develop coproduced projects sustainably with communities, empower them to fight for health and care equity & enable their central role in shaping services in the Integrated Care System

" Thank you to the public, our Board and volunteers and our staff for resilience and perseverance this year. We want to continue to reflect the rich diversity of views and experiences within the city, listening to people, and recording your stories. In these times of change there is more opportunity than ever to shape how services are planned and delivered. We achieve our best outcomes when we work in collaboration and we look forward to continuing that work with our valued voluntary sector & partners. "

Vicky Marriott, Area Manager, Healthwatch Bristol, North Somerset and South Glos





Healthwatch Bristol
Third Floor, The Sion
Crown Glass Place
Bristol
BS48 1RB

www.healthwatchbristol.co.uk

t: 07944369180

e: contact@healthwatchbristol.co.uk



[@HWBristol](https://twitter.com/HWBristol)



[Facebook.com/bristolhealthwatch](https://www.facebook.com/bristolhealthwatch)

