**Bristol, North Somerset & South Gloucestershire Prioritisation Panel**

**24th January 2024**

**Meeting Minutes**

**In attendance**: Julie Bird (**JBHW**), Vicky Marriott (**VM**), Katie White (**KW**), Anna King (**AK**), Bella Brereton (**BB**), Janine Garel (**JG**), Miriam Booth (**MB**), Melanie Cooper (**MC**), Pat Tuton (**PT**), Lance Allen (**LA**), Lo Ming Wong (**LMW**) & Catherine Szewczyk

**Minutes:**  Bethany Marshall (**BM**)

**Apologies**: Sue Geary, Julie Kell, Pat Foster, Raquel Benzal

**Conflict of Interests:** None

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**JB** stated that there no actions for the BNSSG area but to continue monitoring the privatising of GP services, CAMHS waiting list, assessment waiting times and chronic pain.

**VM** started the meeting by updating the panel on things that **HWBNSSG** had archived.

North Somerset Council commissioned a piece of work about adult social care, **NSC** have already taken on the findings. **HWBNSSG** released a booklet about the changes happening at GPs, which has been and is looking to be shared through several avenues (GPs, meetings, websites etc.), the booklet has received positive feedback.

**VM** spoke briefly about pharmacy closures happening in the BNSSG area.

There was a brief explanation of the **HWBNSSG** new engagement strategy.

Two Community Diagnostic Centres are to be opened in the BNSSG area which is positive news.

**KW** explained about her new project about surgery waiting times with an emphasis on hip replacements and knee replacements; **KW** is hoping to work with Weston Hospital on the project and several PCNs, as well as the local community. **LA** asked about the pathway that got the patients onto the waiting lists and if **KW** was also looking into those; while **KW** has not investigated it, she agrees that it is something that needs to be considered. **JG** suggested to talk to Sirona which **KW** has since taken on board.

**MB** gave a yearly overview of the **HWBNSSG**  data; there was a 58% increase of feedback compared to 2022 with the highest number of feedback being centred around Dentists and a high number being negative. 60% of feedback was about primary care, broken down into sectors most of the feedback was about GP services. **MB** continued with explaining demographic statistics and comparing it to the 2021 Census. **LA** questioned how much came from engagement and compared to online in which **MB** explained that a larger percentage of the feedback came from face-to-face engagement.

**JG** briefly spoke about Healthwatch England starting a project about improving the feedback form and how the information is forwarded to other Healthwatches.

**Bristol**

**BB** gave a brief presentation about progress so far on the projects she is working on.

**BB** explained that she was looking at communications with patients and she had been in touch with the BRI. **BB** had some interesting conversations with them with one point being that they only have leaflets explaining what patients and their families and carers can expect in English.

UHBW has its own Comms Team and Equality, Diversity, and Inclusion team, they should be able to improve this situation themselves and fund the work that needs to be done. The panelthought that they should research the most widely spoken languages in Bristol and make info available in those, it was also suggested to have videos. Cultural issues were also mentioned, **LMW** explained that in her culture (Hong Kong Chinese) talking about death is very taboo.

**BB** explained that she is going to meeting on 20th February with a BSL interpreter and will report back on how that went, what issues came up, barriers etc.

**BB** explained that the **HWBNSSG** have not had any new feedback about Care Direct recently.

The panel discussed the upcoming changes regarding pharmacies in the Bristol area, especially as some pharmacies do not have private rooms.

Southmead Hospital has received several pieces of feedback about their discharge process, so it has been actioned for **BB** to investigate this.

Some issues have been raised regarding physical access to the building, poor signage etc. at the Bristol Eye Hospital.

Healthwatch Bristol have received a lot of complaints about Montpelier Health Centre. This could be because of where the **HWBNSSG** is situated – very centrally in the Galleries. It was agreed **BB** would take the new GP Changes handbook to the Practice Manager at Montpelier Health Centre and liaise with them about how to get it publicised locally.

It was agreed that the **HWBNSSG** would monitor the issues related to pharmacies and would consider conducting an Enter and View at Bristol Eye Hospital.

**Action:** Discharge process Southmead Hospital & Montpelier Health Centre – **BB** to reach out to them

**North Somerset**

**KW** talked about actions.

To begin with **KW** explained how she investigated what families whose children were waiting for CAHMS had in the way of support; she found that GPS supported school children until then. **AL** mentioned a group called “Off the Record” that specialise in children’s mental health which **KW** put down as an action to investigate.

Another action **KW** investigated was about patients being able to access their medical records, referring to one patient that wanted to access their medical records from the ambulance service. The resulting information was to fill out a form that the patient would submit but this was only an online option. This led onto a discussion about patients obtaining medical records from their GPS.

An ongoing action was about Mendip Vale and their patient satisfaction: the was agreed that if the continuing satisfaction was low that the **HWBNSSG** would consider an Enter and View. As of 24th of January 2024, **KW** has received no new reports or concerns within the last 2 months.

The panel moved onto the North Somerset Matrix in which the highest priority was about the lack of NHS Dentist, with Pharmacies in second and the GP appointment systems and CAHMS crisis phone calls coming in third.

**LA** mentioned that the NHS “Find a dentist” list is not up to date with many dentists’ information either saying they do not accept NHS patients or that the information is not up to date. **HWBNSSG** has received feedback about this concern.

There has been various negative feedback about pharmacies across the North Somerset area; it has been suggested that the **HWBNSSG** do and Enter and View in the Weston-Super-Mare area due to its size. It was suggested to do an Enter and View on a large independent pharmacy as most chain pharmacies are closing; it was noted that some of the chain pharmacies closing has caused the communities they were in to become panicked. It was also suggested that the Enter and View should be scheduled after the Pharmacy First program.

Feedback was received about a CAHMS crises phone call only having a twenty-minute appointment time and that the caller received no support, the panel agreed that **KW** should investigate this as an action.

The panel decided that when it comes to GP appointment systems, that **KW** will monitor the situation and feedback; it was also noted by **LA** that the online triage is be set up in some GPs and not others. **KW** has also mentioned that through engagement she has found that recent feedback concerning GPs has been positive.

**South Gloucestershire**

**PT** started with explaining that older people find it difficult to engage with healthcare due to lack of technical knowledge and the lack of devices; she mentioned that some information only comes in the form of a text message and not all older people have access to a mobile phone. This concern was added to the matrix.

**AK** explained that Emersons Green Medical Centre have been receiving negative feedback concerning their staff and how they interact with patients.

West Walk Surgery received some negative feedback concerning a patient needing help completing an E-Consult form and was worried about privacy issues.

An action that was completed from the last meeting was finding what support carers amongst GP practice staff received; **AK** found out from the Carers Support Centre that they are working with GP practices to help and support carers.

Another action from last meeting was around not only digital exclusion but security issues pertaining to staff members helping patients fill out forms in open spaces. **VM** mentioned that while staff helping is a good thing, the time it would take and emergencies taking a priority would slow down the process.

There was a brief conversation about Volunteers doing a “mystery shop” situation where they call a GP and see how they offer help.

**PT** suggested that the **HWBNSSG** invite staff from various GPs to a meeting to re-introduce themselves after COVID, this in turn turned into a conversation about PPG’s and **AK** continuing work to contact PPG chairs. This led into a conversation about receptionists to get training and now be called care navigators and help PPG chairs meet regularly to be able to keep contact with them.

**LA** mentioned that **HWBNSSG** should suggest to patients to swap online pharmacies to help ease the strain on Pharmacies in the public.

**BB** summarised what happened in the breakout room and that Bristol now has two actions regarding Southmead Hospital and Montpelier Health Centre and a suggested potential Enter and View at the Bristol Eye Hospital.

**KW** summarised in the North Somerset breakout room about an action regarding a crisis call in CAMHs and cut off points, a conversation about dentists and people’s frustration around them, monitor feedback to see if there is less feedback considering online services and a suggested Enter and View of a Pharmacy in Weston-Super-Mare

**VM** summarised the South Gloucestershire breakout room; the breakout room concentrated on actions rather than monitoring and an Enter and View. The three actions were regarding Emersons Green GP Surgery, feedback regarding a West Walk Surgery and confidentiality when having help filling out forms and options for people who are not able to access smart phones or computers.

There was a brief discussion about the upcoming Work Plan meeting the following week.

**Next Meeting: April**