



Message from our Chair	3
Message from our Chief Executive	4
Highlights from our year	5
Who we are	6
Your views on health and care	8
Helping you find the answers	12
Making a difference together	14
Our plans for next year	18
Our people	20
Our finances	23
Contact us	26

SECURITY

# Message from our Chair

It is a pleasure to present Healthwatch South Gloucestershire's Annual Report for 2017-18. It is hard to believe that this is our fifth Annual Report. As in previous years it is has been a productive and rewarding time and we have been in a strong position to deliver the service with a small team of committed and skilled members of staff and a group of dedicated, loyal and enthusiastic volunteers.

I would like to take this opportunity to thank everyone for their hard work over the last 12 months. Together we have built a service which is making a real difference to the people of South Gloucestershire.

Healthwatch South Gloucestershire is a small service working for a population of around 270,000 people, but I believe we 'punch above our weight' in ensuring that we give a voice to people who are seldom heard. For example, our innovative project with The Hive Avon to deliver 'Hivewatch', whereby people with a learning disability have been supported to become Enter and View authorised representatives. Their input has allowed us to challenge providers in a constructive way about how they present their services and how they could be improved. This work will benefit people with a wide range of disabilities.

Another piece of innovative work arose from a series of Enter and View visits to care homes carried out over the past four years. This resulted in the development of a poster for care homes, highlighting the importance of exercise in maintaining fitness, mental agility, keeping as well as possible, and preventing falls. The poster was hand delivered by volunteers to 40 care homes across South Gloucestershire to ensure that the message was communicated to managers and members of staff.



Joanna Parker, Independent Chair Healthwatch South Gloucestershire

Our Enter and View work this year; our continuing representation on committees and boards, such as the Health and Wellbeing Board, Local Safeguarding Adults Board and Older People's Programme Group; our involvement in regional work through the South West Clinical Senate Citizens' Assembly; and our commitment to scrutinising the activity of local providers through the NHS Quality Accounts and Equality Delivery System, showcases how Healthwatch volunteers dedicate their time, knowledge and expertise into translating the views of local people and helping services to work for better outcomes.

Our role is to influence commissioners as well as providers by speaking up for local people. We are the only independent body doing this and it is of great importance right now as the landscape of health and social care is going through rapid change. Our ultimate goal is to have a health and social care service that works for local people. We rely on local people to tell us about their experiences, the good, the indifferent and the bad.

Please remember, your voice is our voice. Together we can make a difference.

# Message from our Chief Executive

Healthwatch remains a key aspect of gathering local views on the health and social care services provided to local people. As an independent user champion, Healthwatch members and volunteers decide which issues are priorities and then set out to gather feedback that can either embed and develop good practice or influence change where improvement is required.

Healthwatch is very much about local people and we are dedicated to reflecting their/your (depending on the audience) ideas, concerns and comments. This is ever more important at a time when local authorities are reviewing resources for social care and health services are stretched to the limit of their resources.

We value and respect the views of all participants, with particular thanks to our dedicated team of volunteers, and thank them for working with us to make the user voice real, relevant and heard.



Vicki Morris Chief Executive Officer, The Care Forum

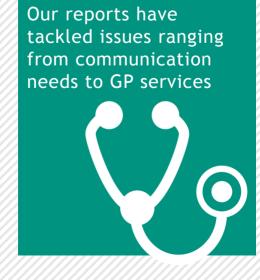


# Highlights from our year



This year we have attracted 2,194 new followers on social media

6 new volunteers have joined the team





## Who we are



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

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

### **Our vision**

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

### Our mission

Healthwatch South Gloucestershire will involve local people to help improve health and social care services. Everything Healthwatch says and does is informed by our connections to local people and Healthwatch expertise is grounded in their experience.

### **Our priorities**

Using the Joint Strategic Needs Assessment, Joint Health and Wellbeing Strategy, intelligence from Healthwatch representatives and the information heard directly from local people, the priority for 2017- 18 was to engage with communities that are seldom heard, with a focus on:

- + learning disabilities
- + primary care
- + hospital discharge
- + Accessible Information Standard

# Meet the staff team





### **Project staff**

Dan Hull, Development Officer Alex Francis, Team Manager Pat Foster, Volunteer Support Officer Vanessa Scott, Communications Officer

# Your views on health and care





### Listening to people's views

Following the work plan priorities that were selected by the advisory group, the community engagement for 2017-18 has focused on four main areas:

- + learning disabilities
- + primary care
- + hospital discharge
- + Accessible Information Standard

### Learning disabilities

During 2015-16 and 2016-17 we ran two successful projects with a local learning disabilities organisation, The Hive Avon, looking at oral health and dentistry. Through our conversations it became clear that members of The Hive were keen to better understand their rights around accessing health and social care services.

We also identified that many members had experienced problems with communication; a lack of accessible information; physical barriers to accessing services; and a lack of choice and control, which all prevented them from using services independently.

A successful funding application to South Gloucestershire's Learning Difficulties Partnership Board in 2017 enabled us to launch a bespoke project called 'Hivewatch'.

Through this project we recruited and trained five people - all 'experts by experience' - to carry out Enter and View visits, exploring the accessibility of services for people with learning disabilities.

Four visits took place, including a GP surgery, a minor injuries unit and a day centre. The team were delighted with the changes that services made in response to their reports, which included:

- + provision of clear signage (and Easy Read signage) to locate services, toilets etc
- + increased font size on documents to make them easier to read
- + production of Easy Read guidance to make complaints
- + reminding all staff of the obligations under the Accessible Information Standard
- + approaching the landlord to improve lighting and lower noticeboards.

The reports and recommendations from all of the Hivewatch visits can be found on our website **W**: <a href="https://bit.ly/2FZNxtr">https://bit.ly/2FZNxtr</a>



"It was brilliant that the Doctors listened to what we had to say, it made me proud that they took our suggestions and that they used easy read when they wrote back to us" (Hivewatch volunteer)

### **Primary care**

This work emerged from discussions at South Gloucestershire's Health Scrutiny Committee where it was agreed that Healthwatch could add value to the updates provided by South Gloucestershire Clinical Commissioning Group and NHS England via a service user survey. Healthwatch launched a survey in October 2017 which ran for four months and it received 234 responses.

The aim of this survey was to gather a snapshot of current GP service provision, and increase understanding around the accessibility of GP services, including:

- + the ease of obtaining appointments
- people's willingness to see different GP surgery staff versus a named GP
- if there are differences in people's experiences of using GP services across the district
- + some of the approaches GP surgeries are using to make their services more accessible.

The survey generated some really interesting feedback regarding waiting times; the complexity of appointment booking systems; uncertainty around urgent and non-urgent appointments; the perceived flexibility of GP services; differences in experience for those people living in the most rural parts of the district compared to towns and villages; and people's main motivation for seeing a GP.

Although 25% of respondents reported that seeing a named GP was the most important factor for them, the majority of respondents (84, 37%) reported that being seen the same day was key. This does not align with people's lived experiences.

The findings from this report have been shared and will be followed up with the Clinical Commissioning Group, Patient Participation Groups and local providers. The full report is available to view on our website

W: https://bit.ly/2HPmaPr

### Hospital discharge

In South Gloucestershire alone it is projected that the number of people aged 85 and over is expected to triple by 2035, therefore, helping people to live independently at home for longer is a key priority.

The project advisory group agreed to focus on South Gloucestershire's rehabilitation, reablement and recovery (3Rs) programme, which aims to support people's discharge from hospital and enable them to settle back into their own homes.

The Enter and View team chose to use a mixed methodology for this work; primarily using Enter and View to a hospital which houses 20 community reablement beds, followed by interviews with patients after discharge to understand their experiences and the care and support they were receiving to settle back in at home.

"We really appreciated your feedback following your Enter and View visit...we were very happy to hear that you were impressed with the standard of care delivered on Henderson Ward and of the enthusiasm and dedication of staff..." (Sirona care & health)

After the Enter and View visit, Healthwatch volunteers were able to speak to five patients that had given their permission for follow up. This was done by telephone and home visits. Already we have interesting themes coming through regarding care coordination and equipment services.

### Further work in 2018-19

The volunteers are keen to increase the significance of their findings so are carrying out further Enter and View visits to reach more patients. This work will continue during 2018 - 19 and a report released during the autumn.



## Accessible Information Standard (AIS)

Through this work Healthwatch aimed to understand the impact that the AIS legislation has had on people's experiences of using health and social care services since its introduction in August 2016.

During 2017, Healthwatch carried out a series of engagement visits to local groups and services to gather people's feedback, in addition to a running an online survey. Through this work, Healthwatch spoke to 70 people and received a further 39 survey responses.

### Findings:

It soon became clear that there is a lack of public awareness of the AIS. 28 survey respondents (72%) reported not having heard of the legislation. Of these, 20 individuals (71%) reported using primary care services in the first instance, which highlights the importance of these services in raising awareness of the AIS with the public.

Almost half of respondents that had not heard of the AIS had a disability or sensory loss that would be recognised by the legislation.

25 survey respondents (65%) felt that services provide information in a way that is accessible to them, however they often reported needing to be proactive in asking for it which conflicts with the first step of AIS. Step one: 'Ask' - does the patients have a communication need, and if so, how can these be met?

In general Healthwatch found that health and social care staff have a good knowledge of the need to support people with communication needs, however they are not always aware of the AIS or its requirements on how they work.

Following our engagement, we held an event for local health and social care providers to share best practice and learn from one another's experiences of implementing the AIS. The event was well attended and well received. We hope to continue sharing feedback with providers to improve patient experiences and compliance with the Standard.

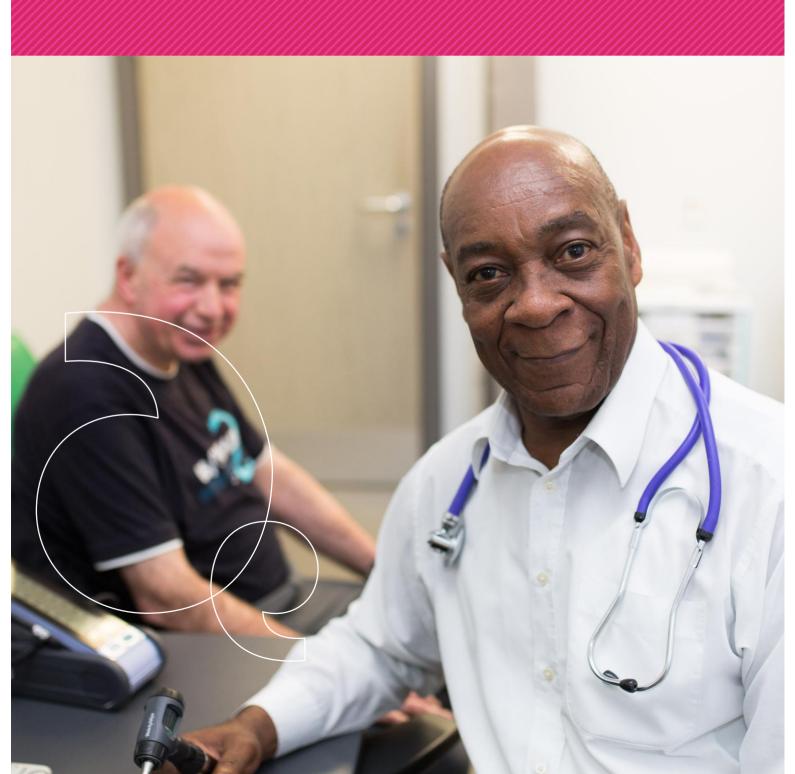
To read more about our AIS work W: https://bit.ly/2HPmaPr

"I found the session really helpful, with lots of ideas to take away..." (AIS event participant, Bristol)





# Helping you find the answers



## How we have helped the community get the information they need

Healthwatch South Gloucestershire provides information to local people in several ways, including the Well Aware database and free-phone telephone line.

Well Aware is the health and wellbeing information and signposting service for the areas of Bristol and South Gloucestershire.

The Well Aware website covers services, groups, events and activities running in these two areas and also a free phone line open during office hours to signpost people who do not have access to the internet. The service works closely with community groups and statutory services to guide the content, language and accessibility of the information.

Our most popular searches are for:

- + Find activities
- + I am looking for support
- + Home and living
- + Mental health
- + I am looking for advice
- + UH Bristol NHS Foundation Trust Shuttle bus service
- + Learning Disabilities
- + Health check
- + Dementia

This year Well Aware worked with the South Gloucestershire Library Service to raise awareness of the service to local residents with our Library Roadshow, joining in with activities going on in the libraries to reach a multi-generational audience.

Well Aware signposts to a number of different services, whether it is helping people to find activities to reduce isolation or improve physical health, signposting to advocacy services, providing information on care at home services, support for specific health conditions or equipment that can assist people to remain independent.

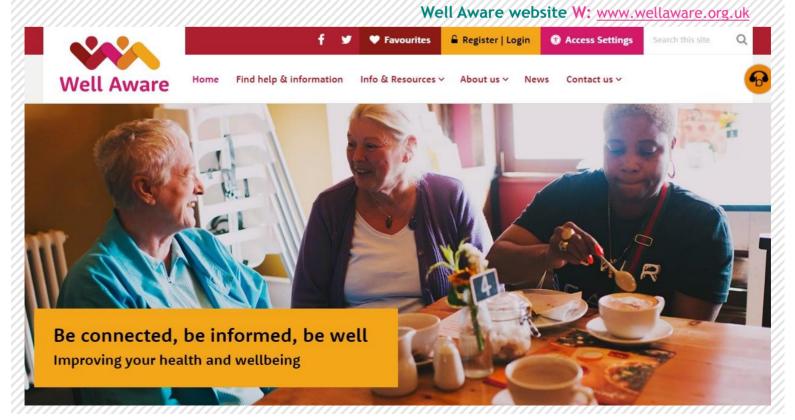
#### On website and social media

The Feedback centre on the Healthwatch South Gloucestershire website enables the public to provide information and feedback on the services they use through a variety of devices including mobile phone whilst on the move.

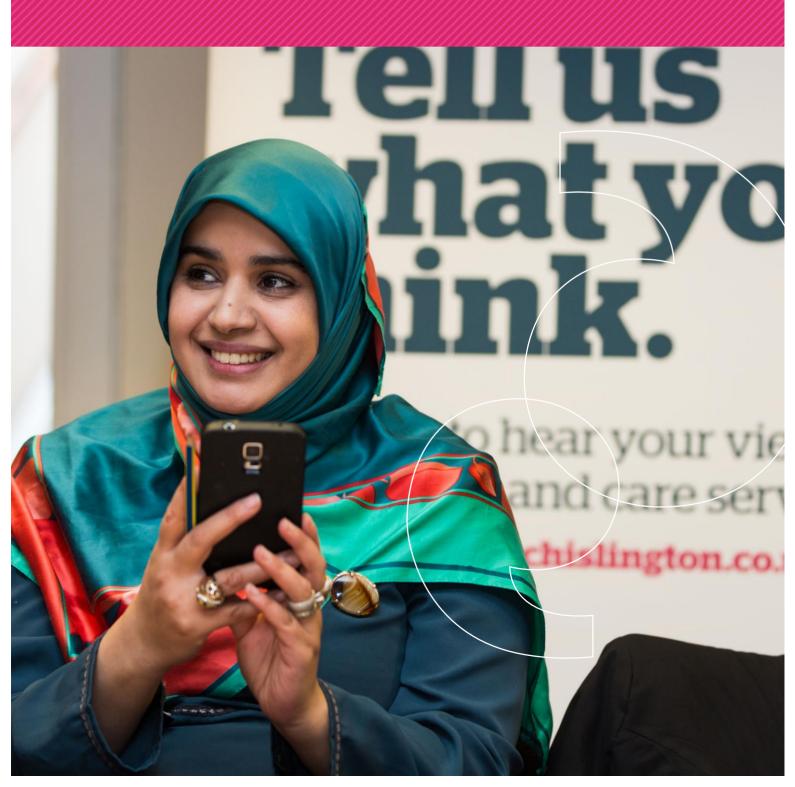
All feedback is moderated before being published and providers can respond to the feedback that people leave.

Healthwatch captures the following data:

- + an overall rating of the service provider
- + a summary of people's experiences
- + friends and family test questions.



# Making a difference together



## How your experiences are helping to influence change

### **Home Care Survey 2017**

This year, for the fourth consecutive year, Healthwatch carried out a piece of research on behalf of South Gloucestershire Council to review home care provision across the district. Healthwatch is delighted to support this work and was really pleased to read about the high level of care and satisfaction around home care services in this year results.







# The Care Forum South Gloucestershire Home Care Survey





### 'Why exercise?' poster

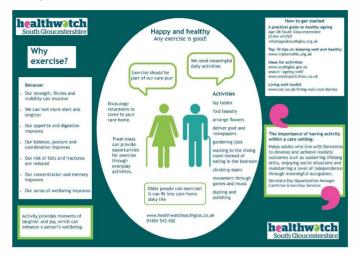
During 2016-17 the Enter and View team undertook 11 visits to care homes. From these visits a number of themes emerged, one of which was the lack of meaningful and/or purposeful activities that are available to residents and few opportunities to encourage residents to be physically active. As a result of this, during spring 2017, the volunteers developed a poster outlining simple ways that residents can be active within care home settings.

Posters were delivered by hand to 40 care homes and, where possible, Healthwatch volunteers explained to staff directly the aim of the poster and how they could use it. Six months later Healthwatch visited a small random sample of homes to find out how they had used the poster and what impact it had had on residents.

### What difference did it make?

Five homes were visited - the poster was prominently displayed in four of the homes and staff were aware of it. Three of the five homes had increased the levels of activity

available to residents, however it was not possible to say that this was a direct result of the poster.



Volunteers noted that staff seemed to consider 'activity' as the responsibility of the Activity Coordinator rather than it being something that everyone can positively encourage and support. We were pleased with the positive feedback that we had about the poster but it is clear that this is not enough on its own to change behaviour; a suite of activities is required supported by a wider team of staff.

This work is outside of Healthwatch's remit but we will continue to share this message with commissioners and providers.

### Trans plus health survey 2017-18

During 2017-18, we along with neighbouring Healthwatch projects commissioned The Diversity Trust to carry out a Trans Plus Health Survey. Through this work we hoped to research trans and non-binary people's health and wellbeing and experiences of health care services.

225 people took part in the survey across the West of England. Of these, 57% had self-harmed or self-injured themselves and 71% had thought about suicide. One in five participants said they felt unsafe and 60% had been called names on the street.

The findings of this research make for a very challenging read, but they also indicate some areas where services are doing things well. Healthwatch is now working with providers and commissioners to share the findings and discuss next steps. To read the full Trans plus

health report W: https://bit.ly/2lsZM5u

### Working with other organisations

## **South Gloucestershire Clinical Commissioning Group**

During the summer Healthwatch shared feedback with South Gloucestershire Clinical Commissioning Group (CCG) about the GP surgery-based Minor Injuries Service, specifically that a lack of public awareness of the service was affecting patients' abilities to access the right service first time.

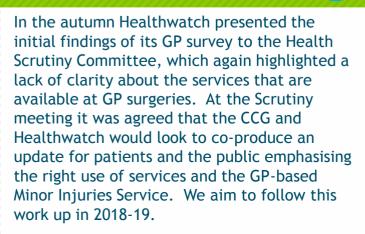
This information had been collected through a piece of engagement work that Healthwatch had carried out during the winter to understand people's decision making processes and experiences of using urgent care services, e.g. minor injuries, pharmacies, NHS 111, Accident and Emergency etc.

The CCG provided a response as follows:

"It is very interesting to hear from this cohort of patients who have chosen not to use the minor injuries service. From the feedback received there are clear themes around information provision related to the service, both in the community and at the GP practices itself.

As a CCG we will contact all GP practices to ensure that:

- information related to the Minor Injuries Service is available on Practice websites, e.g. detail of the service offered, sameday service and definition of a minor injury
- details of the service are added to monthly/ quarterly newsletters,
- 3) reception staff, as well as practice managers and clinicians, have a full understanding of the service."



# Bristol, North Somerset and South Gloucestershire (BNSSG) Sustainability and Transformation Partnership (STP)

In October 2017, Healthwatch attended an STP workshop and were able to input public perspectives around linking up services and a desire to see greater use of technological solutions to support access to services.

In December 2017, Healthwatch met with the Engagement and Communications lead for BNSSG STP to discuss opportunities for patient and public involvement. Healthwatch is a key partner in developing inclusive and accessible communications around the STP. Following this meeting Healthwatch met with the CCG's Chief Executive Officer to discuss further input that we could have.

These conversations will continue through the STP Board and the Communications and Engagement work stream, both of which Healthwatch is regularly attending.

### **Elevating carers' voices**

In the spring, we shared the findings from Healthwatch England's national inquiry into patient discharge with the Carers Advisory Partnership to see if the themes captured in this report reflect current day experiences.

Following this, Healthwatch helped to arrange a meeting between the group and the Acute Trust's Head of Patient Experience and Integrated Discharge Team Manager. This was a successful meeting, resulting in several joint pieces of work:

- + draft a guide to patient discharge and share it with the group for feedback
- + review bank staff and weekend discharge at the Trust and consider improvements
- + share a drafted patient survey with the group for them to consider how it can be used to capture carers' perspectives.

Healthwatch is committed to supporting this work and will follow the progress of the actions closely. We will continue to gather and share the experiences of carers to understand what impact these actions are having, and are in the process of recruiting a representative to support this work. This will continue during 2018-19.

### South Gloucestershire Disability and Equality Network

In March 2017 South Gloucestershire Disability Equality Network (SGDEN) held a successful event on the theme of isolation and loneliness.

Healthwatch provided a small amount of funding to SGDEN to support delivery of this event.

The event aimed to attract members of the public who might have contact with isolated people. Through discussion SGDEN hoped to provide information and training for these people to increase their ability to help potentially isolated members of the community. The event was attended by 60 people, including representatives from Healthwatch, the vast majority of whom spoke about their plans to use the information they received within their communities.

"We would like to thank our friends at Healthwatch, Curo, the Over 50s Forum and South Gloucestershire Council for the input they each gave in helping make this event a success." (SGDEN)

### **South Gloucestershire Equalities Forum Conference:**

In March 2017 Healthwatch supported the annual Equalities Forum conference, which this year focused on rural communities and inequalities. Using the findings from our GP survey, Healthwatch was able to provide intelligence around health inequalities and the differences that rural residents had reported when using services compared to urban communities. We also helped facilitate a workshop.

Of the 234 people that replied to our GP survey, 112 (48%) provided feedback on the distance to their GP surgery from home (see graph 1). Respondents also shared how they travel to their GP surgery (see graph 2).

We were particularly interested to understand any differences in people's experiences of using GP services based on their location within South Gloucestershire. 53 respondents (23%) reported having used services outside of South Gloucestershire.

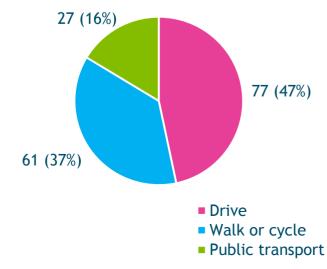
- people reported positive experiences of services in neighbouring areas, however there were some issues highlighted around journey time, traffic jams, parking challenges and cost of transportation
- two respondents had chosen to travel outside of South Gloucestershire and had paid for private care to expedite treatment due to waiting times
- + 12 respondents reported using services outside of South Gloucestershire because they are the nearest and/or easier to access from their homes via public transport.

Our equalities lead volunteer will continue to be involved with the Equalities Forum and share feedback from rural communities where received.

Graph 1: Distance to GP surgery



Graph 2: Mode of transport



# Our plans for next year



#### What next?

The priorities set by Healthwatch South Gloucestershire's advisory group for 2018-19 are outlined below.

In addition to this, we have identified several target audiences with whom we hope to increase our engagement. They are:

- 1) BAME communities and faith groups
- 2) Rural communities
- 3) Children and young people
- 4) People in receipt of a social care service

Despite having carried out several pieces of targeted work, including:

- + exploring rural health needs (2015)
- + Young Healthwatch (2015/2016)
- + LGB and Trans health needs assessments (2016/2017)
- + Accessible Information Standard (2018) more work is required to engage with equalities groups across South Gloucestershire.

Healthwatch's advisory group is keen to focus our work in these areas to ensure that the views of seldom heard communities are heard.

These groups will be at the heart of our communications strategy for 2018-19. We will work to ensure that messages about Healthwatch are shared through the appropriate media and channels, specifically to broaden knowledge of our work and the opportunities people have to share their views.



### Our top priorities for next year

- 1. Prevention and self-care
- Developing links with primary care, including Patient Participation Groups
- 3. Rehabilitation, reablement and recovery
- 4. Ageing Better







### **Decision making**

Healthwatch South Gloucestershire's Advisory Group pulls together representatives from The Care Forum and the CCG's Improving Patient Experience Forum. The advisory group is made up of volunteers who take on lead responsibilities for areas of work including:

- + Children and young people
- + Quality
- + Equality
- + Enter and view
- + Health and Wellbeing Board

The Advisory Group meets quarterly to receive the 'feedback feed forward' report of responses heard from children, young people and adults on their health and social care services. The Advisory Group uses this evidence to identify themes that may be added to the work plan priorities for the year. Further evidence from the Local Authority, Public Health, Joint Strategic Needs Assessment (JSNA), Clinical Commissioning Group and NHS England priorities are also used to align Healthwatch priorities.

### How we involve our volunteers

The work plan is regularly monitored at Advisory Group meetings and staff report on progress. The Advisory Group hears from volunteers who are actively engaged in the development of commissioning plans and the design of services, and these plans show the influence of Healthwatch input.

The Advisory Group maintains capacity to respond to any urgent issues.

Quarterly contract monitoring reports help to review Healthwatch outcomes and identify successes, whether anything could have been done differently and how we can improve.

To find out more about Healthwatch South Gloucestershire's team, governance, Advisory Group and more W: <a href="https://bit.ly/2tqPVAM">https://bit.ly/2tqPVAM</a>

### The volunteer experience

There has been a change in support to our volunteers this year as we said goodbye to Charlotte Reeves and Louise Spencer, and welcomed Pat Foster and Alex Francis as the

project's Volunteer Support Officer and Team Manager respectively during May 2017.

The Care Forum was delighted to be re-awarded the Investing in Volunteers Award in October 2017. Our thanks to the support of volunteers who contributed to this by speaking with the assessor about their volunteer experiences.



This year Healthwatch has welcomed six new volunteers. New volunteers have been given Introduction to Healthwatch training and new volunteers wanting to join the Enter and View team have been given Enter and View and Safeguarding training.

Unfortunately this year we have said goodbye to five Healthwatch volunteers; Kay Hobday, Val Rogers, Hannah Lucas, Pauline and John Honour.

During Volunteer Week in June 2017, Healthwatch thanked its volunteers for their contributions at a Volunteer Event on Friday 9 June 2017.



Volunteers receiving their thank you certificates at The Care Forum's volunteer event

#### Our Enter and View team

Healthwatch attended a 'Practice in Care Homes' seminar at the Graduate School for Education in April 2017 to keep pace with 'good practice' for the Healthwatch Enter and View visits.

Healthwatch reports are shared with:

- + the service provider
- + the Local Authority
- + the Clinical Commissioning Group
- + Care Quality Commission
- Healthwatch England

Our Enter and View volunteers are:

Linda Broad

Tony Colman

Rosemary Dibble

Christine Eden

Sue Elford

Maggie Hadley

Jenny Harris

Karen John

Dianne Kenny

Norma Marshall

Sarah Moore

Joanna Parker - Chair of the Enter and View

Planning group

**Andrew Riches** 

Wayne Song

**Annette Sparks** 

Janet Spence

### Making links with our community

During the year Healthwatch contacted Parish Councils across South Gloucestershire to raise awareness of Healthwatch and offer to attend local groups or meetings to update people on our role and activities. Fourteen replied - some offering to pass on Healthwatch information; two Parish Councils have said they will try to find a councillor to lead on health and wellbeing at their next meetings; others offered to put Healthwatch information into their next newsletter and put links on their websites.

Four Parish Councils have a councillor (or paid employee) with a responsibility for health and wellbeing, and Healthwatch is working to build relationships with them. For example, we are working with one community engagement officer to understand how we can work together to hear the views of local adults and children and young people.

Healthwatch has also contacted all of South Gloucestershire's Patient Participation Groups (PPGs) with the aim of working together on areas that can improve patient experience, for example, through sharing the findings of the GP services survey.

Each quarter Healthwatch meets with the Care Quality Commission (CQC) during which volunteers have the opportunity to discuss the Enter and View visits that they have carried out and hear about the inspections the CQC are planning in the coming months.

Volunteers play a vital part in compiling the responses that Healthwatch provides to NHS Trust Quality Accounts. In May and June 2017-18 Healthwatch replied to Quality Accounts for North Bristol NHS Trust and United Hospitals Bristol NHS Foundation Trust. Joint responses were given to the South West Ambulance Service NHS Foundation Trust and Avon and Wiltshire Mental Health Partnership NHS Trust.

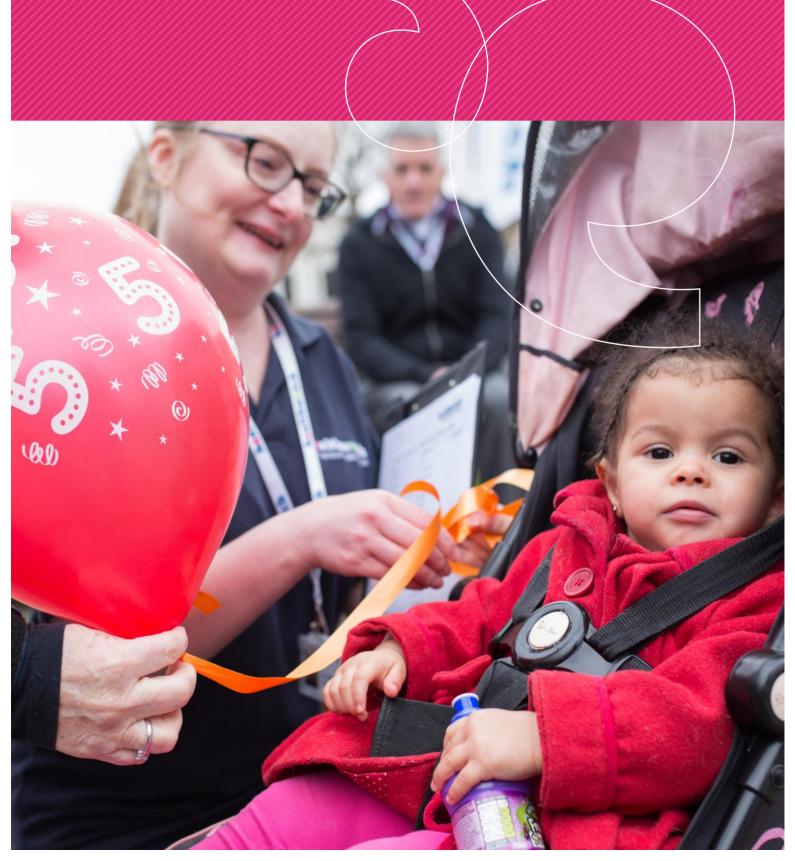
Healthwatch volunteers have also helped at events during the year, including the Curo wellbeing events held in South Gloucestershire libraries throughout the summer, the Islamic Fayre, South Gloucestershire's Equalities Forum Conference, South Gloucestershire's Disability Equality Network AGM and their conference on isolation and loneliness.

This project could not function without its volunteers and we are eternallyly grateful for the time, energy and enthusiasm that they commit to their roles.

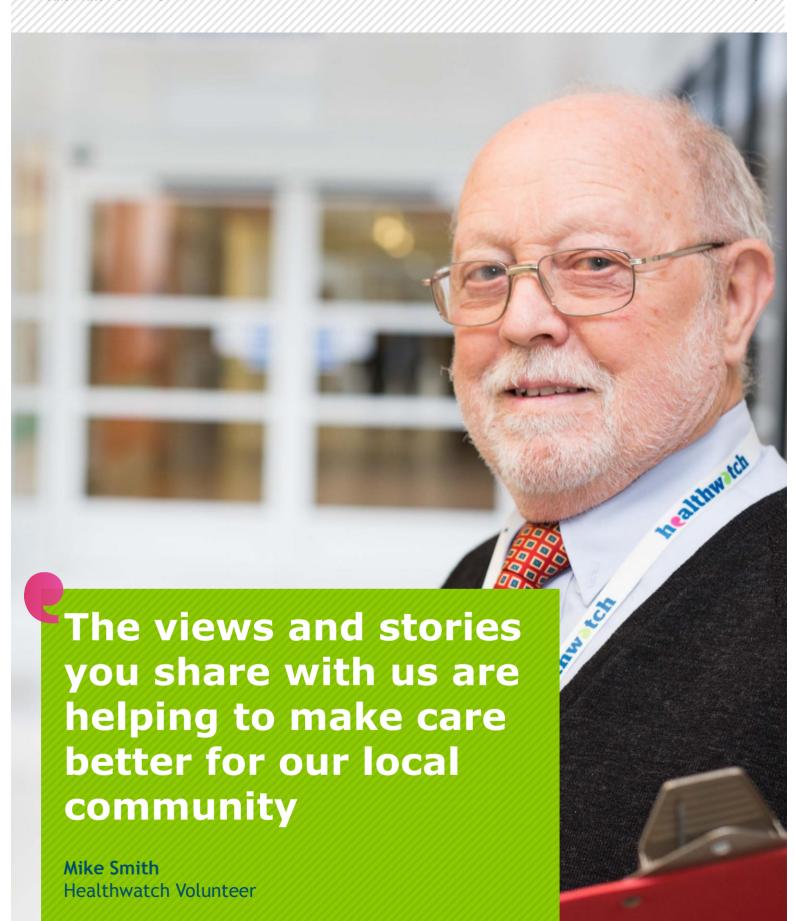




# Our finances



Income	£
Funding received from local authority to deliver local Healthwatch statutory activities	£103,473
Additional income	£14,900 Grant from the Learning Difficulties Partnership Board shared with The Hive Avon for 'Hivewatch'
Total income	£118,373
Expenditure	£
Operational costs	£27,792
Staffing costs	£76,443
Office costs	£5,649
Total expenditure	£109,884
Balance brought forward	£8,489





## **Contact us**

The Care Forum, The Vassall Centre, Gill Avenue, Fishponds, Bristol BS16 2QQ

### **Get in touch**

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Phone: 01454 543 402

Email: <a href="mailto:info@healthwatchsouthglos.co.uk">info@healthwatchsouthglos.co.uk</a>
Website: <a href="mailto:www.healthwatchsouthglos.co.uk">www.healthwatchsouthglos.co.uk</a>

Twitter: @HWSouthGlos

Our annual report will be publicly available on our website by 30 June 2018. We will also be sharing it with Healthwatch England, Care Quality Commission, 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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