



# Contents

Contents .....	2
Message from our Coordinator .....	3
Message from our Chief Executive.....	4
Highlights from the 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.....	19
Our finances .....	22
Contact us .....	25



# Message from our Coordinator

We were delighted to be awarded a new two year contract from 1 April 2016. This has enabled us to build on some of the excellent work that has been done by the team over the last few years.

The project staff and volunteers have continued their commitment to support lay involvement and representation in large scale service reviews, including the ongoing development of the new community healthcare services contract for B&NES, and the introduction of the Sustainability and Transformation Plan for B&NES, Swindon and Wiltshire.

Healthwatch B&NES has been proud to be able to support these important work areas and act as a 'critical friend' to commissioners, providers and system leaders, in order to help them shape and design services that will provide the care that local people need both now and in the future.

This year has also seen a focus on building stronger working relationships with other organisations and partners. The introduction of the Sustainability and Transformation Plan has seen the three local Healthwatch in B&NES, Swindon and Wiltshire work more closely together, and we envisage that this will continue to be a key working arrangement as the local plan develops.

We have enjoyed working with a number of local voluntary sector partners and community groups to gather the lived experiences of people using local services. We are particularly pleased with

the focus group work that we carried out this year around urgent care services. From the feedback gathered, Healthwatch B&NES made some recommendations for commissioners to consider when re-procuring urgent care services, and we were delighted with the positive response that was received. This is an area of work that we hope to continue into 2017/18, with the aim of supporting public and patient involvement in the development of the new service specifications.

Priorities for Healthwatch B&NES during 2017/18 include

- + urgent care
- + Accessible Information Standard
- + integration of health and social care services, e.g. patient flow into the community from hospital, including discharge to assess
- + Sustainability and Transformation Plan
- + enter and view.

I would like to say a heartfelt thank you to the public and colleagues across the local health and social care system for their valuable input this year. As always, I would like to say a special thank you to our dedicated team of volunteers. They are at the very heart of the project's success and continue to be strong champions for the patient and public voice in health and social care.

Alex Francis, Project Coordinator



# 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 B&NES this year.

The Care Forum is proud to host a project in a way which empowers staff and volunteers to 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 active role that Healthwatch B&NES volunteers have taken this year in the tendering and procurement process for community healthcare services. Together with a number of other lay representatives, the Healthwatch volunteers have been key in this process, providing a strong patient and public voice in the planning of these services for the future.

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 B&NES continues to develop and deliver this year.

Vicki Morris, Chief Executive - The Care Forum





# Highlights from the year

This year we reached 1923 people on social media.



Our volunteers helped champion patient experience at steering groups, panels and committees



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



We've spoken to local people on urgent care



We've met many local people at our community events





# Who we are

Healthwatch Bath and North East Somerset (B&NES) 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 voices 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 social 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 B&NES can maintain their health and wellbeing, and care for themselves and each other.

## Our mission

Healthwatch Bath and North East Somerset 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, Health and Wellbeing Strategy, intelligence from Healthwatch representatives and the information heard directly from local people, the 2016/17 priorities were:

- + Mental health
- + Access to services, specifically the implementation and impact of the Accessible Information Standard (AIS)
- + Urgent care

In addition to the three priority themes, Healthwatch also made a commitment to continue its engagement, or support activity, around three other areas, namely:

- + Re-commissioning of community healthcare services in B&NES, a project named Your care your way
- + The Sustainability and Transformation Plan for B&NES, Swindon and Wiltshire
- + Enter and view activity, with a focus on care homes

## Healthwatch B&NES advisory group

Healthwatch B&NES is supported by a group of lay people who are actively involved in deciding the activity and direction that Healthwatch takes.

The advisory group members are a crucial part of the team, representing the patient and public voice on a number of strategic committees and groups and leading Healthwatch's activity on five key areas:

- + Health and Wellbeing Board
- + Quality
- + Equalities
- + Enter and view

- + Children and young people

The Healthwatch B&NES advisory group is made up of:

- + Diana Hall Hall, Health and Wellbeing Board representative
- + Roger Tippings, quality lead
- + Christina Chow, equality lead
- + Vacancy for children and young people
- + Vacancy for enter and view lead
- + Tracey Wilmot, SEAP
- + Karen John, Age UK B&NES

## The Healthwatch B&NES team:



- + Alex Francis, Project Coordinator
- + Jane Fell, Volunteer Support Officer
- + Kate Ingham, Volunteer Support Officer
- + Morgan Daly, Director of Community Services

A large teal speech bubble shape on the left side of the page, containing the text.

Your views on  
health and care

A large green speech bubble shape on the right side of the page, partially overlapping the teal one.



## Listening to local people's views

Following the work plan priorities that were selected by the advisory group, the community engagement for 2016/17 has focused on three main areas:

- + mental health
- + access to services
- + urgent care

### Mental health

Healthwatch B&NES worked in partnership with two voluntary sector organisations, St. Mungo's and New Hope, to co-host coffee and chat sessions for mental health service users and their carers. These sessions were held as part of a year-long programme to:

- + provide a safe space for people to meet
- + share information and knowledge about peer-led support options in the local area
- + help people to find out more about local services
- + share lived experiences of using, or caring for someone that uses, mental health services in B&NES in order to identify what works well and what could be improved.

These sessions, which were attended by around 30 people, also aimed to introduce people to venues and projects they may not normally visit or have the confidence to engage in alone.

We have discussed the potential for the coffee and chat group to form the basis of a 'service user involvement' group for mental health. This group could serve as a point of contact and engagement for service providers and commissioners when they want to discuss service change, improvement and commissioning. Coffee and chat attendees already represent users from a number of mental health voluntary sector organisations in B&NES;

we would hope to broaden this and provide a mechanism for people to engage and be engaged in what is going on.

This work will continue into 2017/18.

### Access to services

During early 2016/17, Healthwatch worked with staff from B&NES Council and a number of statutory health providers to share best practice and activity to prepare for implementation of the Accessible Information Standard (AIS) on 31 July 2016.

Healthwatch B&NES approached a number of voluntary sector organisations that work with and support people with physical/ sensory disabilities, and adults with learning difficulties. We discussed the legislation, and offered support to gather and collate feedback to build a broader picture of the impact that the legislation was having on people's experiences of using local services. We also hoped to highlight areas of best practice or improvement and share this learning with statutory organisations to assist with their ongoing compliance with the legislation.

After a short while, it soon became clear that there was very little awareness of the AIS in the public domain, which consequently led to very little feedback coming in. The Healthwatch B&NES advisory group decided to adapt its approach and focus on raising awareness of the legislation instead. Here is an example tweets that we shared aimed at engaging with the Deaf, deafened or hard of hearing community.

**Healthwatch B&NES** @hwatchbathnes ·

Know your rights: Ask. Record. Highlight. Share. Act. Five steps #NHS

Accessible Information Standard [goo.gl/YQ894o](http://goo.gl/YQ894o) @SignHealth



### **Know your rights - The Accessible Information St...**

From the 31st July 2016, all NHS England and adult social care services must follow a new set of rules called the Accessible Information Standard. The Standard tel...

vimeo.com

Furthermore, Healthwatch promoted the legislation through its monthly e-bulletin, website and social media accounts. Our umbrella organisation, The Care Forum, also produced an information sheet that was shared widely with voluntary sector partners to try to raise awareness of the support that their clients were entitled to receive. To view the information sheet W: <http://bit.ly/2iYjGUa>

The Healthwatch B&NES advisory group has decided to keep the AIS on its work plan for 2017/18 in order to establish the impact that the legislation is having 12 months on.

## Urgent care

Urgent care, particularly people's understanding of these services and how they use and experience them in practice, is of great interest to Healthwatch B&NES. Each year, local and national media tell us about 'winter pressures' and their impacts on hospital trusts across the country, including long waits at Accident and Emergency (A&E) departments, and delays in ambulance response and transport.

Further to this, Healthwatch B&NES was aware that urgent care services were due to be re-commissioned across B&NES, Swindon and Wiltshire, including NHS 111, GP out of hours' services and a Clinical Hub.

Prior to beginning this work, Healthwatch B&NES met with commissioners to discuss urgent care services and identify any gaps in local knowledge, themes that we would like to

explore in more detail, or specific demographic groups that it would be useful to speak to. Commissioners suggested people with chronic and/or long-term conditions, and students, who are relatively high users of these services.

Unfortunately the time and resources available meant that a comprehensive piece of work with students at the University of Bath, Bath Spa University and Bath College was not viable, therefore Healthwatch B&NES focused on speaking to people living with chronic conditions and their carers.

Healthwatch B&NES approached a number of community groups and organisations and held five focus groups between December 2016 and March 2017. During these sessions, Healthwatch B&NES spoke to 39 individuals, including people living with a range of conditions, carers and relatives.

We gathered feedback about people's experiences of using existing services and discussed with them what worked well and what could be improved. Although we focused on the services that were being re-commissioned we were able to gather feedback about the urgent care system as a whole and how the pathway could be improved to support better patient flow and improve the quality of care and support available.

From this work emerged five key themes that Healthwatch has shared with commissioners and services providers. The follow-up to this work is still being planned and will form a key part of our work plan for 2017/18.

Healthwatch B&NES approached a number of community groups and organisations and held five focus groups between December 2016 and March 2017. During these sessions, Healthwatch B&NES spoke to 39 individuals, including people living with a range of conditions, carers and relatives.

## What we've learnt from visiting services

Enter and view visits to care homes is an ongoing programme being implemented by Healthwatch B&NES to understand the quality of residents' experiences within local care and nursing homes; particularly where residents have, or could be expected to have, dementia.

Enter and view visits are identified by:

- + concerns around safeguarding and a subsequent B&NES Council invitation to visit and report on a care home independently;
- + seeking a balance between new build ('state of the art') and specialist provision or older care homes;
- + identifying concerns that have been raised about a care home through Healthwatch research;
- + placing an emphasis on the care of elderly people with dementia;
- + managing a balance of visits to the small family owned care homes or local/ regional providers and large (national) providers of care for elderly people.

A staff vacancy meant our enter and view programme had to pause for a few months. Despite that the team undertook four visits during the year, with a further visit cancelled due to an impending Care Quality Commission (CQC) inspection. The visit reports are available on the Healthwatch B&NES website W: <http://bit.ly/1UayPfb>

The enter and view team has devised a programme of visits to take them through to autumn 2017. This programme was shared with the commissioning

manager for care homes at B&NES Council and the CQC. In addition to sharing enter and view reports with providers, the CQC, B&NES Council and BaNES Clinical Commissioning Group (CCG), we agreed with our partners that we will highlight the key themes from our visits regularly in order to triangulate intelligence, areas of best practice or concern, and establish and monitor how providers are responding.

The enter and view team also developed a programme of re-visits to providers that we have visited over the last two years to see how the recommendations that were made have influenced practice. These will begin in 2017.

Finally, Healthwatch B&NES presented to the B&NES Care Home Forum, a network meeting coordinated by B&NES Council for care home managers, to inform them of the enter and view function. Our presence and presentation was well-received, with two managers approaching us to discuss providing support with internal reviews.

Healthwatch B&NES hopes to maintain a positive working relationship with this forum in order to share learning and themes from enter and view visits.

The Healthwatch B&NES authorised enter and view representatives are:

- + Gillian Bebber
- + Christina Chow
- + Heather Devey
- + Diana Hall Hall
- + Ann Harding
- + Martha Hodgson
- + Sarah Pinder
- + Dee Stainer
- + Roger Tippings
- + June Vince

An abstract graphic consisting of several overlapping circles. A large pink circle is on the left, and a large green circle is on the right. They overlap in the center, with a smaller, semi-transparent green circle overlapping the pink one. The text 'Helping you find the answers' is written in white inside the pink circle.

Helping  
you find the  
answers

## How we have helped the community access the care they need

Healthwatch B&NES signposts members of the public to various information points, including Wellbeing Options, a B&NES-specific information and signposting site, Patient Advice and Liaison Services (PALS) webpages for local providers, and the NHS Choices website.

## On website and Facebook

The feedback centre on the Healthwatch B&NES 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.

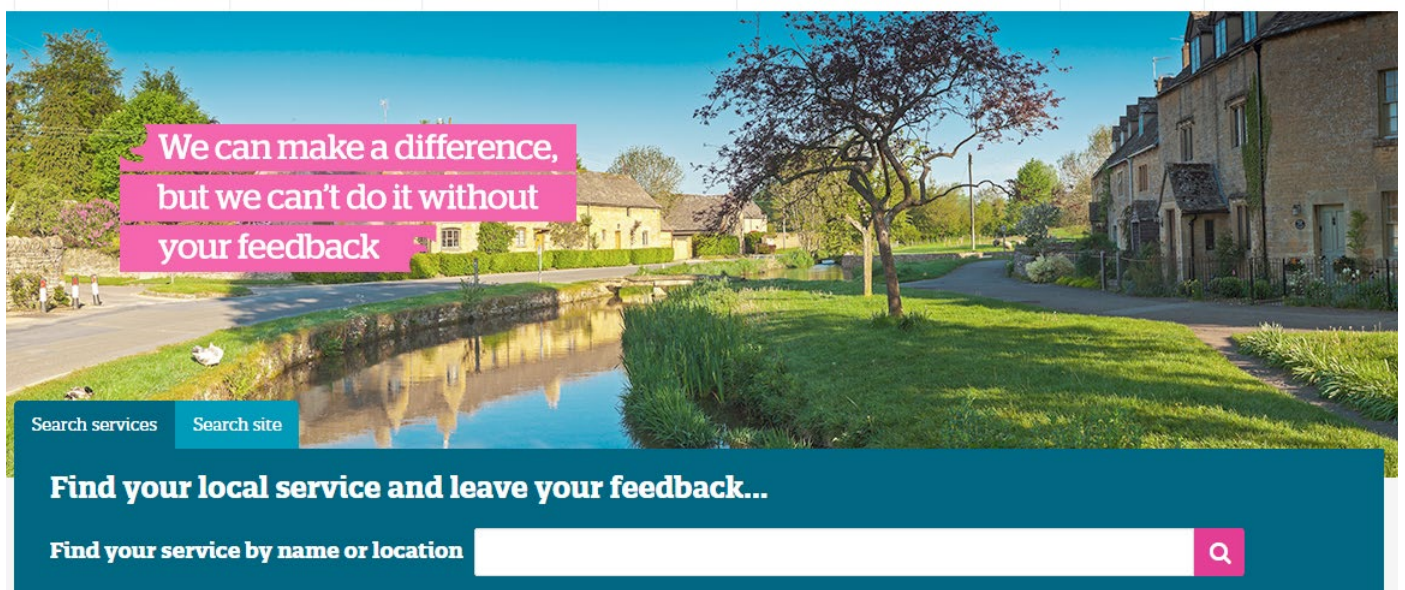
When providing feedback through the feedback centre, users are prompted to review and rate services by answering a list of questions that help them to provide the right level of detail, in the shortest amount of time. They can also praise a particular member of staff whose conduct has been exemplary.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



We can make a difference,  
but we can't do it without  
your feedback

Search services Search site

**Find your local service and leave your feedback...**

Find your service by name or location

An abstract graphic consisting of several overlapping circles and semi-circles. A large light green circle is on the left, partially overlapping a dark teal circle. To the right, a medium blue circle overlaps the dark teal one. The text 'Making a difference together' is written in white inside the light green circle.

Making a  
difference  
together

## How your experiences are helping influence change

Engaging members of the public is one of Healthwatch's key priorities; this year more than ever, Healthwatch has been working with a wide range of partners to champion patient and public involvement and try to ensure that people are being given the opportunity to engage in how their health and social care services are delivered and developed.

### Urgent care recommissioning

Through focus group work, Healthwatch wanted to explore people's experiences of using urgent care services, particularly people with complex health needs or chronic conditions. This intelligence was collected to feed into the re-commissioning process for NHS 111 and GP out of hours' services.

Through discussion with 39 individuals, Healthwatch gathered a view of what was working well, what could be improved and how people would like services to work for them in the future. From this work Healthwatch identified five key themes which have been shared with lead commissioners and providers. Alongside the themes Healthwatch made a number of recommendations, for example:

Theme - Supporting people with complex needs: Healthwatch identified that commentators have a high level of knowledge and expertise around their own, or their partner's needs, which sometimes resulted in a perceived lack of faith in triage services such as NHS 111 to be able to support them when they are unwell. In these instances there was evidence that people would turn to other services in an effort to seek help and/or the required response, including 999 and A&E.

Recommendations made:

- + Healthwatch B&NES recommends that people with complex health needs/chronic

conditions and their carers are invited to be involved in further discussion about urgent care services, with a particular focus on the urgent and emergency care pathway. Healthwatch B&NES would be happy to assist with this work and support user involvement.

- + Healthwatch B&NES believes it would also be beneficial for people to be involved in discussions about self-care (being held via the Sustainability and Transformation Plan) in order to consider how support, advice and information can be sought/ provided before an individual requires more urgent treatment.

The themes that Healthwatch identified and the recommendations we have made have been received very positively by commissioners and Healthwatch B&NES will continue working with them during 2017/18 to help take these actions forwards.

To view the urgent care report

W: <http://bit.ly/1ldRbqc>

### Working with other organisations

B&NES, Swindon and Wiltshire Sustainability and Transformation Plan (STP)

This year, the three local Healthwatch (B&NES, Swindon and Wiltshire) have been working increasingly closer together in order to support the development of the STP. Since this process began we have acted as a 'critical friend' to the STP Board and subsequently, the communications and engagement work-stream group. Our aims for this work have been simple; we are asking for:

- + consistent, accessible and easy to understand information for the public and voluntary, community and social enterprise (VCSE) colleagues, explaining what the STP is, and the impacts that any plans and proposals may have on the services people use and the care they receive

- + inclusive, meaningful, timely and appropriate engagement with the public and VCSE colleagues on the STP, in order for them to better understand how the health and social care system may be changing, and to help shape and influence this based on local need.

The three local Healthwatch had monthly catch-up meetings to ensure that we were providing a clear and consistent voice on the work that was being carried out. We worked to provide regular updates to the public and VCSE sector on the STP process, via our websites, newsletters, social media and through public statements released to coincide with publication of key STP documents.

Quarter three (October – December 2016) in particular was a busy period for the three local Healthwatch with regular attendance at the STP communications and engagement work-stream group, and participation in a full day workshop where each of the STP clinical work-streams started talking in more detail about their plans for communication and engagement with the public, VCSE partners and health and social care staff.

The three local Healthwatch have strongly advocated for meaningful engagement with the public about STP. In a public statement following release of the full STP document in December 2016, the three local Healthwatch said:

**“Given the challenges the NHS and social care face, the STP cannot afford to be scared of engaging with the public. We are pleased to see that our STP has committed to engaging with the public and patients. However, your local Healthwatch has concerns about the amount of resource available to deliver public engagement and has raised this with the STP Board.**

---

**People tell Healthwatch they recognise the NHS is under pressure and they want to do their bit to help. Even though the plans are still in early stages, those who may have read about the STPs in the press will understandably be concerned about what this means for them. If the STP fails to involve people in any big decisions they will not only face opposition to the changes but they will also miss out on a golden opportunity to make the right changes first time.”**

---

We also 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/2h3SQly>

### Learning from patient experience

In January 2016, B&NES Joint Primary Care Co-commissioning Committee (JPCCC) discussed the proposed closure of a GP practice walk-in service, run by a local surgery in Bath.

Prior to the meeting, the surgery and NHS England had consulted with the patients that were likely to be affected and carried out a risk assessment in order to identify and mitigate against any potential impacts the closure may have.

The results of the consultation and risk assessment were presented to the JPCCC and the group agreed to support the closure of the walk-in service. It was also agreed by the JPCCC that a follow-up survey should be carried out with the



patients affected by the closure to understand their experiences of going through this process to see what learning could be taken from it for the future.

Healthwatch B&NES took this work forward and worked with the surgery and BaNES CCG to develop a questionnaire which was circulated to the patients that were affected by the closure of the walk-in service. We aimed to explore what had worked well when engaging patients in changes to General Practice.

A questionnaire was circulated in December 2016. Healthwatch received a small number of responses (19%), but the feedback received provided insight into how communication about changes to services could and should be shared and how people felt processes such as this could be improved, for example:

- + information should be provided in plain English, avoiding technical terms and jargon as much as possible
- + when consulting on proposed changes, a range of approaches should be offered for people to have their say. Where possible this should include opportunities for people to talk to one another directly, e.g. a focus group, drop-in session, open meeting, online forum, Patient Participation Group meeting/ event etc.
- + providers should consider producing a 'you said, we did' update for patients that lists the feedback and/or key themes that were received via patient engagement, and the steps that have been taken to address them.

The responses received about the consultation in this specific case suggested that patients had been well-informed of what was being proposed and were offered the opportunity to have a say in a way that was convenient for them. We shared the feedback and recommendations made with the surgery and will take them to the JPCCC to discuss how patients' insight can be incorporated into future engagement around changes to GP services.

To view the engagement report

W: <http://bit.ly/1ldRbqc>

## How we've worked with our community

### Recommissioning community healthcare services

During the last two years Healthwatch B&NES has had ongoing involvement in a project to recommitment community healthcare services called your care your way.

In our 2016 annual report we reported that we had supported this project in a number of ways, including:

- + gathering feedback through social media
- + promoting opportunities for children, young people and adults to be involved and have a 'voice'
- + holding a VCSE provider network to discuss how services could/ should work in the future
- + providing training to lay people who wanted to get involved in the tendering and procurement process.

Our involvement has continued this year through the community champions, a group of lay people who supported the tendering and procurement process and have continued to be involved as the prime provider was appointed and the service specification developed. Healthwatch B&NES has three lay representatives in this group.





# Our plans for next year

## What next?

The Healthwatch B&NES advisory group has decided that the project's work priorities for 2017/18 will be as follows :

- + integration of health and social care services, e.g. patient flow into the community from hospital, including discharge to assess
- + Accessible Implementation Standard
- + urgent care
- + Sustainability and Transformation Plan
- + enter and view



# Our people

# Decision making

The Care Forum would very much like to thank all of the Healthwatch B&NES volunteers who have worked so hard in helping Healthwatch to develop and grow.

Healthwatch B&NES has 13 enthusiastic volunteers working to support Healthwatch to hear from children, young people and adults in Bath and North East Somerset about their views on health and social care.

Eight volunteers are Healthwatch champions bringing information to Healthwatch from their constituent groups in the community:

- + Patient Participation Groups
- + Royal National Institute for the Blind
- + Community health service user
- + Bath Area Play Project
- + BEMSCA
- + Life Line project part of Genesis Trust

Four of these champions also represent Healthwatch by attending other organisations including:

- + B&NES Health and Wellbeing Board
- + Bath and North East Somerset Clinical Commissioning Group
- + Avon and Wiltshire Mental Health Partnership NHS Trust
- + Royal United Hospitals Bath NHS Foundation Trust

Nine volunteers have been trained and DBS checked to enable them to access and observe health and social care services, reports from these visits are shared with the Care Quality Commission, the Local Authority and Healthwatch England.

Volunteers also take on 'lead' responsibilities and work with the Healthwatch advisory group to agree the strategy and work plan for Healthwatch B&NES.

During the year Healthwatch volunteers are kept informed through regular e-bulletins, information sheets, the quarterly Feedback Feed Forward reports which capture what Healthwatch has heard from the public, and volunteer newsletters.

Healthwatch B&NES volunteers have had opportunities to take part in various training this year including:

- + introduction to Healthwatch
- + equality and diversity training
- + enter and view
- + safeguarding

During this year Healthwatch B&NES developed a community outreach opportunity for volunteers, and any new volunteers that are being trained will be offered the opportunity to work with outreach staff to both raise awareness of Healthwatch and hear the views of the public.

In June, during Volunteer Week 2016, the volunteers had the opportunity to feed into The Care Forum's volunteer strategy followed by a 'thank you' lunch.

June 2016 saw the start of a new Chief Executive for The Care Forum, Vicki Morris, who met with volunteers during September. In October 2016, Jane Fell started as the Volunteer Support Officer for Healthwatch B&NES and has since moved to Bath Carers Centre.

A volunteer satisfaction survey was shared with volunteers during September 2016. The survey showed that:

- + 72% of respondents agree that they would recommend The Care Forum as a place to volunteer
- + 67% of respondents agree that they gain a sense of accomplishment from their volunteer role

The top three reasons given for volunteering with The Care Forum were:

- + to contribute to the community
- + to make a difference
- + to help people
- + 95% of volunteers felt their expectations in volunteering with The Care Forum have been partly or fully met.

In October 2016 The Care Forum held a Quality Summit for all of its Healthwatch projects, the aim was to streamline the way Quality Accounts are commented on for 2016/17. During the year, Healthwatch volunteers commented on the Quality Accounts for:

- + Royal United Hospitals Bath NHS Foundation Trust
- + Avon and Wiltshire Mental Health Partnership NHS Trust
- + Sirona care & health
- + Care UK
- + South West Ambulance Service NHS Foundation Trust

During the year, the Care Quality Commission (CQC) attend meetings with Healthwatch. Volunteers are invited to attend and share their views. Meetings this year have been held in May, July and October 2016 and January 2017. The CQC shares information on their standards and inspections undertaken and update Healthwatch on future inspections, Healthwatch volunteers shared the findings of their enter and view visits.

Nick Reynolds from The South West Ambulance NHS Foundation Trust came to the Vassall Centre in January 2017 to share the trust's quality priorities and safe working with volunteers.





# Our finances

<b>Income</b>	<b>£80,167.00</b>
Funding received from local authority to deliver local Healthwatch statutory activities	£80,167.00
Additional Income	£0.00
Total income	£80,167.00
<b>Expenditure</b>	<b>£73,442.00</b>
Operational costs	£13,391.00
Staffing costs	£56,899.00
Office costs	£3,152.00
Total expenditure	£73,442.00
Balance brought forward	£6,725.00







# Contact us

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

Tel: 0117 965 4444

Email: [admin@thecareforum.org.uk](mailto:admin@thecareforum.org.uk)

## Get in touch

Address: Healthwatch Bath and North East Somerset, The Care Forum, The Vassall Centre, Gill Avenue,  
Fishponds, Bristol, BS16 2QQ

Phone number: 01225 232 401

Email: [info@healthwatchbathnes.co.uk](mailto:info@healthwatchbathnes.co.uk)

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

Twitter: [@hwatchbathnes](https://twitter.com/hwatchbathnes)

---

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.

© Copyright Healthwatch Bath and North East Somerset 2017



Healthwatch Bath and North  
East Somerset  
The Vassall Centre,  
Gill Avenue,  
Fishponds,  
Bristol, BS16 2QQ

[www.healthwatchbathnes.co.uk](http://www.healthwatchbathnes.co.uk)  
t: 01225 232 401  
e: [info@healthwatchbathnes.co.uk](mailto:info@healthwatchbathnes.co.uk)  
tw: @hwatchbathnes  
fb: [facebook.com/HealthwatchBANES](https://www.facebook.com/HealthwatchBANES)