



**healthwatch**

**Healthwatch  
Bath &  
North East  
Somerset  
Annual report  
2017/18**



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# Message from our Team Manager

The modern day world of health and social care is complex and often difficult to understand for both members of the public and professionals. This year more than any other we have seen a smorgasbord of new acronyms to try and wrap our heads (and tongues) around, with the continuation of STPs and the emergence of ACSs, ACOs, ICSs, ICRs, SPAs and goodness knows what else.

It is at times like these that the role of Healthwatch seems ever more crucial, as we try to help people to understand and engage with the whole-scale changes that are taking place within health and social care in Bath & North East Somerset (B&NES), the South West and, indeed, the rest of the country.

To find out more about some of these terms

**W:** <https://bit.ly/2tFDfXS>

Healthwatch B&NES is very lucky to have a dedicated team of volunteers who work tirelessly to ensure that the public are engaged and their voices are heard.

Our volunteers represent the interests of patients and the public at a huge number of groups, where they play an active role in sharing the feedback that we hear and asking vital questions to help understand how people's views are being gathered and considered in decision making processes. The groups that the volunteers sit on include:

- + B&NES Health and Wellbeing Board
- + B&NES Quality Committee
- + RUH Patient Experience Group
- + Bath Ethnic Minorities Senior Citizens' Association
- + Dorothy House Hospice Service User Group
- + Your Health Your Voice



**Alex Francis**  
Team Manager, Healthwatch B&NES

- + Virgin Care's Citizens' Panel
- + Community Champions
- + South West Clinical Senate Citizens' Assembly,

The time that the volunteers give makes Healthwatch what it is - without them the project quite simply would not be able to function. The team and I would like to extend our heartfelt thanks to the volunteers for their continued support, enthusiasm and energy.

This has been a challenging year as we prepared for the end of our contract and a tendering process, however the hard work of the volunteers and staff team resulted in a successful bid and us securing a new contract until 2021.

We look forward to continuing our work with and for the people of B&NES and trying to make a difference to the health and social care services that we all use.

**#ItStartsWithYou** Your voice is our voice!

# 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 sets out to gather feedback that can either embed and develop good practice or influence change where improvement is required.

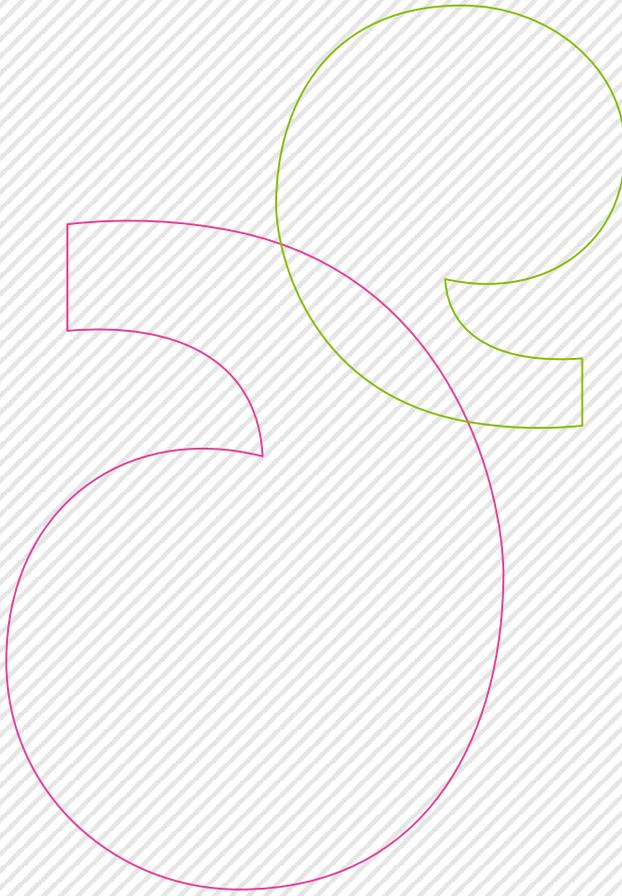
Healthwatch is very much about local people and we are dedicated to reflecting their/your (depending on the audience) ideas, concerns and comments. This is ever more important at a time when local authorities are reviewing resources for social care and health services are stretched to the limit of their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



**1,902**

This year we've attracted 1,902 new followers on social media



**4** new volunteers, including **2** young people



Our reports have considered topics from urgent care to learning disabilities



We have carried out **9** Enter and View visits

# 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 B&NES can maintain their health and wellbeing, and care for themselves and each other.

### Our mission

Healthwatch B&NES 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:

- + Accessible Information Standard
- + Mental health
- + Sustainability and Transformation Partnership
- + Enter and view

# 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





AIS provider workshop, 15 June 2018



“I found the session really helpful, with lots of ideas to take away...”

(AIS event participant)



## 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:

- + Accessible Information Standard
- + Mental health
- + Sustainability and Transformation Plan
- + Enter and view

## Accessible Information Standard (AIS)

Through this work Healthwatch aimed to understand the impact that the AIS legislation had 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 these can be met?

In general Healthwatch found that health and social care staff have a good knowledge of the need to support people with communications 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 patients' experiences and compliance with the Standard.

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

## Mental health



In the summer, Healthwatch met with commissioners from BaNES Clinical Commissioning Group (CCG), B&NES Council and Virgin Care to discuss the community mental health review. During this meeting, we shared key themes from the feedback that Healthwatch has received from people that use community mental health services, their carers or relatives, and VCSE colleagues.

The themes included:

- + the impact that the movement of the Police office from Bath has had on some individuals
- + the need for greater signposting between services
- + patients and staff within primary care need greater support from the community
- + the complexity of the commissioning landscape and a small number of providers within B&NES means that service user choice is limited
- + the above also has implications on people's confidence to 'speak out' about the care that they are receiving for fear that organisations talk to one another
- + the need for carers/ relatives to be experts in how the system works and the support that their loved one needs in order to push for action and answers
- + IT systems are a hurdle for collaboration between providers and organisations
- + there are a number of organisations that are 'holding' people who require help but do not fulfil eligibility criteria, for example, housing association, schools and VCSE groups

An options paper outlining the proposals for community mental health provision in B&NES was expected to be released in autumn 2017, however this was delayed. Healthwatch offered to run a public meeting for people to discuss the options in more detail, and also a Health and Wellbeing Network meeting so that VCSE colleagues could have their say.

Neither of these events happened and the community mental health review has continued into 2018.

## B&NES, Swindon and Wiltshire (BSW) Sustainability and Transformation Partnership (STP)

At the start of this financial year, the BSW STP project management office carried out a review of its governance. In August, Healthwatch B&NES and Healthwatch Wiltshire met with the new STP Programme Director and Programme Manager to discuss Healthwatch's role in the revised governance arrangements, and review the communications and engagement approach that has been in place to date. We reiterated the need for communication to improve, and engagement with patients, the public and the VCSE sector to increase. We also stressed the importance of beginning a dialogue to help local communities in each geographical area to understand and engage with the STP prior to any formal consultations taking place.

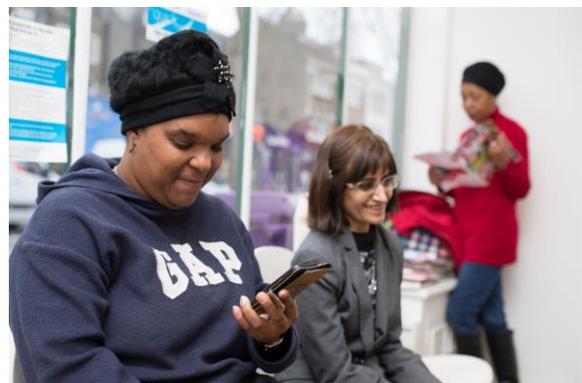
We agreed our ongoing commitment to the process and reiterated the support that Local Healthwatch could provide as a critical friend, and also to carry out engagement where required as part of its contracted service.

### Continuing involvement

Local Healthwatch in B&NES, Swindon and Wiltshire have two seats on the BSW STP Sponsorship Board and are actively involved with the Communications and Engagement working group. The appointment of an STP Communication and Engagement Manager during this year has given this group some momentum and a Communications strategy has been developed.

The STP and plans for integration will continue to be a priority for Healthwatch during 2018-19. To find out more about the STP

W: <http://www.bswstp.nhs.uk/>



## Enter and View

This year the advisory group decided that they wanted to prioritise Enter and View. It is only in recent years that we have had enough volunteers to carry out Enter and View work; they are well regarded by the volunteers, local commissioners and providers alike as a useful tool to understand people's experiences of using local services.

The Enter and View team has continued working on a programme of visits that it devised during 2016-17. This programme was shared with the commissioning manager for care homes at B&NES Council and the Care Quality Commission (CQC).

The Enter and View team also developed a programme of re-visits to providers that we had visited over the last three years to see how the recommendations that were made had influenced practice. The findings of these visits and all the Enter and View work that we have completed this year can be found on our website **W:** <https://bit.ly/2wlvntj>

In addition to sharing Enter and View reports with providers, the CQC, B&NES Council and BaNES 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.

Volunteers have been supported to undertake nine Enter and View visits during the year to care homes and a community hospital. 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.

Our Enter and View volunteers are:

Diana Hall Hall

Roger Tippings

Ann Harding

Folasade Ajadi-Oniyelu

Stephen Skinner

Amelia Jayne Cornick-Dingle

Nick Ramsey

June Vince



# Helping you find the answers



### How we have helped the community get the information 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. We also direct people towards advocacy support if they wish to proceed with a formal complaint about the NHS or social care services that they have used. We refer to several local advocacy organisations including seAp, The Care Forum and Bath Mind.

### On website and social media

The Feedback centre on the Healthwatch B&NES website and social media feeds, such as Twitter, enable the public to provide information about all health and social care organisations in Bath and North East Somerset. This helps Healthwatch to generate data that we can act upon.

The public 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. All feedback is moderated before being published.

Providers also have the opportunity to respond to feedback left by service users on the website.

Healthwatch captures the following data:

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



Your spotlight on local services

<a href="#">Home</a>	<a href="#">About Us</a>	<a href="#">Review a service</a>	<a href="#">News &amp; Events</a>	<a href="#">Volunteers</a>	<a href="#">Health and Wellbeing Network</a>	<a href="#">Complaints</a>	<a href="#">Contact</a>
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Search services Search site

Find your local service and leave your feedback...

Find your service by name or location



# Making a difference together



## Working with other organisations

### 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>

### B&NES, Swindon and Wiltshire (BSW) Sustainability and Transformation Partnership (STP)

Our commitment to representing the patient and public voice in the STP continues. In October 2017, Healthwatch B&NES was involved with the process to appoint the new Senior Responsible Officer (SRO) for the B&NES, Swindon and Wiltshire STP. We sat on the Communications and Engagement panel, which asked candidates about the approaches they would use to inform, involve and engage the public and wider stakeholders in this process. We, together with the other panel members, were reassured by the approach and commitment that the newly appointed SRO, Christopher Bown, gave and have had a subsequent meeting with him to discuss how engagement with the public can improve.

### Working to improve quality

In October 2017 Healthwatch met with the Director of Nursing and Quality at BaNES CCG to share information about our role and activities.

Healthwatch has a long-standing relationship with the CCG's Quality team and we have a

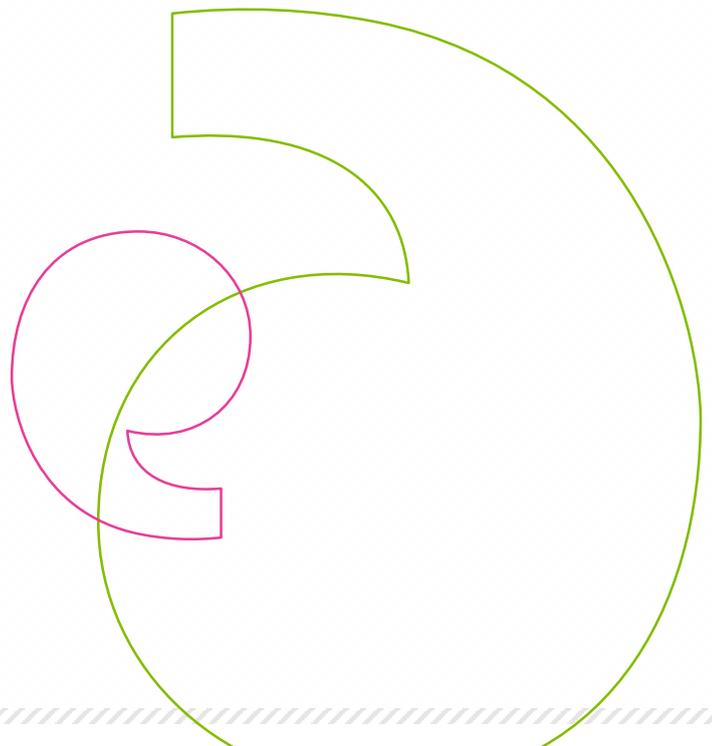
Quality lead volunteer that sits on the Quality Committee. Through this role we feed in experiences that Healthwatch has heard from members of the public, share concerns and areas of best practice, for example, those observed through Enter and View visits.

At this meeting we discussed how the Quality Committee operates and how it could be improved. From this meeting it was agreed that Healthwatch would:

- + share with the Committee the key themes emerging from the quarterly feedback that we receive
- + share all comments received regarding CCG commissioned services no matter how many or few
- + share Enter and View visit reports with the team following each visit.

It was felt that proceeding in this manner would enable feedback from Healthwatch to be better incorporated, and enable greater triangulation of intelligence from a range of sources, such as the CCG's contract monitoring meetings, Patient Advice and Liaison Services (PALS) and Care Quality Commission reports.

This was a positive meeting and will ensure that people's feedback is escalated to this key group in the future, ensuring quality of service provision and more meaningful identification of best practice and areas for improvement.



## South West Ambulance Service NHS Foundation Trust

In November 2017 Healthwatch met with South West Ambulance Service NHS Foundation Trust (SWASFT) to discuss how we can work more closely together. The Trust has been trying to find a way to engage effectively with the nine Local Healthwatch that operate across its footprint and welcomed the opportunity to have a frank conversation about how this could work better.

At present a key barrier to engagement has been that SWASFT is based in Exeter, making travel to any events or meetings expensive, so we discussed electronic communication and teleconferencing. It was also agreed that it would be useful to take a structured approach to joint working, for example by having a focus to each conversation, such as rural access, delayed conveyance around hospital discharge, supporting patients who misuse substances etc, so that Healthwatch can pull together any feedback that it has received for each meeting to enable more meaningful conversation about the scale of the issues, sharing of best practice etc. We look forward to building our relationship with the Trust during 2018-19.

## B&NES Local Safeguarding Adults Board (LSAB)

Healthwatch has been a member of B&NES LSAB for some time, sharing people's experiences through the Board and also at several of its sub-groups. This year our working relationship with the Board has continued to grow, through providing a lay perspective in Safeguarding Adults Reviews.

The Care Act 2014 introduced a number of new duties with regard to Safeguarding adults. One of these is that the Board must undertake a Safeguarding Adults Review when an adult in its area dies as a result of abuse or neglect, whether known or suspected, and there is reasonable cause for concern about the way agencies worked together to safeguard the individual.

Safeguarding Adults Reviews are not enquiries into how an adult at risk died or who is responsible, rather they are an opportunity to consider how agencies worked together and to share lessons learnt.

draft of the B&NES Adult Exploitation Policy. To find out more about the work of B&NES LSAB W: <https://bit.ly/2z0UjMS>

## Non-emergency patient transport

During the summer, the quality improvement team at BaNES CCG approached Healthwatch to ask if we would be interested in undertaking some joint work around the non-emergency patient transport service provided by Arriva Transport Solutions Ltd. We agreed as this is a service that we regularly receive feedback about.

A joint visit was carried out in early August between Healthwatch and the CCG, which included a 'ride-along', which allowed us to experience patient transport first-hand. During the ride-along staff spoke to patients and drivers about their experiences of using and providing the service. The visit also included an opportunity to speak to patients that had arrived at, or were waiting to be collected from, the Royal United Hospital in Bath.

The feedback gathered during the visit was collated into a joint report and shared with the provider, commissioners and B&NES Health Select Committee. Healthwatch is continuing to share feedback about patient transport in preparation for the recommissioning of this service next year.

## Transforming Care Programme

Local Healthwatch in B&NES, Swindon and Wiltshire co-chair the Transforming Care Programme (TCP) co-production group for the TCP Board. This group oversees implementation of the TCP plan, with a focus on ensuring co-production is at its heart. Through supporting this group we are ensuring that the voices of local residents, especially seldom-heard people, are elevated.

To find out more about Transforming Care W: <https://bit.ly/2KhMJ5T>



## What do people think about our service?

This year we took some time to speak to people about our service and understand what they feel works well and what could be improved. We received some really positive feedback about the things people value about Healthwatch:

- + the quality of our input to Health Select Committee, particularly the local perspective that we bring and news from the front-line
- + Healthwatch helps to keep commissioners in touch with what is happening on the ground, for example through our Enter and View work
- + Healthwatch volunteers' lived experiences and the stories they share on behalf of others help to make services 'real' and understandable for decision makers and providers. A good example of this was the recommissioning process for community healthcare services during 2016-17, which Healthwatch supported by providing training for community champions, and through attendance of its own volunteers during the procurement process
- + the consultative role that Healthwatch provides, for example critique and feedback on proposed approaches to consultation and engagement.

## Our community

This year we have tried to increase the amount of interaction that we have with children and young people. We were delighted to recruit two students from the university to be volunteer champions, and have also been liaising with the local college to look for opportunities for students to engage with Healthwatch projects.

In addition to recruiting volunteers, we have also attended children and young people's groups to hear their views on local services. In December 2017 we visited the Keynsham Now group. Through the use of an activity titled 'pants and socks' we gathered feedback about the services that make young people feel 'warm and fuzzy' (the socks) and the services that young people think are 'a bit pants'. Although intended as a bit of fun, this activity has provided valuable insight into a wide range of services from primary care to hospitals, mental health services and social care.

To read the report from our visit to Keynsham Now W: <https://bit.ly/2UfKZp>



'Pants and socks washing line' at the Keynsham Now group (December 2017)

# Our plans for next year



### What next?

Our existing contract for Healthwatch B&NES concluded on 31 March 2018. However we (The Care Forum) were delighted to be awarded the contract again and continue to be able to provide Healthwatch in B&NES for a further three years taking us up to 31 March 2021.

As this process has been taking place our work priorities for 2018-19 have not yet been set, however we anticipate that they will be closely aligned with strategic priorities within B&NES, including the Sustainability and Transformation Partnership, integration of health and social care services and the ongoing programme of transformation that is taking place within the health and care services contract provided by Virgin Care and its partners.

Healthwatch's advisory group is keen to ensure that the views of seldom heard communities continue to be heard during the large-scale changes that are taking place locally.

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



# Our people



## Decision making

Healthwatch Bath and North East Somerset's Advisory Group pulls together representatives from The Care Forum, B&NES Carers' Centre and seAp, an advocacy organisation. More than half of the advisory group is made up of volunteers who take on lead responsibilities for areas of work including:

- + Children and young people (vacant)
- + 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 has also been 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 B&NES, our governance, Advisory Group and more

**W:** <https://bit.ly/2N0W5ke>

## The volunteer experience

There has been a change in support to volunteers this year as we said goodbye to Jane Fell and welcomed Pat Foster as the project's Volunteer Support Officer in 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 we have welcomed four new volunteers. Two of the volunteers, from the University of Bath are helping us to hear the views of students, through the Patient Participation Group at Bath University Medical Centre and through the pharmacology course. 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 three Healthwatch volunteers; Gillian Bebbler, Heather Devey and Christina Chow.

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



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

Healthwatch volunteers were nominated for B&NES Council Chair's Community Awards 2017-18 in recognition of service to the community. Two volunteers attended the award ceremony on 8 February 2018 to receive their certificate of nomination.



Christina Chow and Diana Hall receiving a certificate of nomination at B&NES Council Chair's Community Awards 2017-18

Raising awareness of volunteer opportunities continues throughout the year with a visit to the Bath Children and Young People's Network in March 2018. Healthwatch are looking for a lead representative for children and young people to sit on the Advisory Group.

Linking with B&NES Carers' Centre is important and Healthwatch has attended the Carers' Voice meetings that take place to explain our role and the importance of elevating the carers' voice.

During the year Healthwatch contacted the Parish Councils across B&NES to raise awareness of Healthwatch and our role. Healthwatch contacted fifty Town and Parish Councils during August, sixteen of which replied.

Some offered to pass on Healthwatch information through their newsletters or websites, or invited us to attend Parish Council meetings to update councillors and community leaders on Healthwatch's role and activities.

One Parish Council has said that they will try to find a lead for health and wellbeing within their parish at their next meeting.

Healthwatch also contacted Patient Participation Groups (PPGs) across B&NES and has attended meetings to raise awareness of Healthwatch and explore how PPGs and Healthwatch can work more closely together.

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 Healthwatch replied to Quality Accounts for Royal United Hospitals Bath NHS Foundation Trust and Arriva Transport Solutions Ltd. Joint responses were given to the South West Ambulance Service NHS Foundation Trust and Avon and Wiltshire Mental Health Partnership NHS Trust in partnership with neighbouring Local Healthwatch.



# Our finances






<b>Income</b>	<b>£</b>
Funding received from local authority to deliver local Healthwatch statutory activities	£80,000
Additional income	
<b>Total income</b>	<b>£80,000</b>
<b>Expenditure</b>	<b>£</b>
Operational costs	£12,131
Staffing costs	£63,325
Office costs	£4,599
<b>Total expenditure</b>	<b>£80,055</b>
Balance brought forward	-£55.00



**The views and stories  
you share with us are  
helping to make care  
better for our local  
community**

**Mike Smith**  
Healthwatch Volunteer





# Contact us

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## Get in touch

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Phone: 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

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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