## Minutes

### Present

**Members:**

Janet Cowland, Member of the Public

Ann Harding, Member of the public and Healthwatch link volunteer for Virgin Care (B&NES community health and care services)

Ian Perkins, Member of the Public

Julie Hockey, Member of the Public

Mark O’Sullivan, Federation of Bath Residents' Associations & Greenway Lane Area Residents' Forum

Andy Morley, Member of the Public

**Attending Officers:**

Laura Ambler, Place Director BANES BSW ICB

Lee Rockingham, Public Engagement Office, BSW ICB

### Apologies

Julian Kirby, Non Executive Director for Public & Community Engagement BSW ICB

Jenny Evans, Chair of Friends of St Chad’s and Chilcompton Surgeries Charity

Sue Poole, Development Officer Healthwatch BANES

Hilary King, Protect our NHS BANES

Lucy Baker,

Deborah Jane, Member of the Public

Rob Wills, Member of the public

### 1. Welcome and apologies

1.1 The chair opened the meeting and advised that Lucy Baker is unable to attend today’s meeting but has provided an update which LA will share with the group.

### 2. Declaration of interests

2.1 None declared.

### 3. Minutes of the B&NES Your Health Your Voice meeting on 14 June 2023

3.1 LA asked the group if there are any changes that need to be made to the previous minutes and the group confirmed the previous minutes as accurate. AH asked if the public questions section can be moved further up the agenda for the next meeting. LA agreed to this and LR confirmed he will add this to the agenda for the next meeting.

**Action: Public questions to be discussed at the beginning of future meetings - LR**

### 4. Actions and matters arising

4.1 There are no outstanding actions from the previous meeting.

5. **Winter planning**

5.1 LA confirmed that information had been provided to the group ahead of todays meeting and asked for feedback to confirm if this was a helpful approach.

5.2 LR shared the slide deck and LA advised the group of the Home Is Best transformation programme. LA advised that the aim of this is to keep people safe and well in their own homes and reduce reliance on bedded care. LA explained that the Home is Best programme is made up of everyone across the acute care sector.

5.3 LA talked through the next slide, explaining what we expect winter to look like and the demands on the services provided. LA talked to the group about the risks for winter, including the recent industrial action and the handover delays coupled with the increased ambulance call outs. LA also explained that there has already been an increase in respiratory illness, especially in children. LA also advised that the current financial climate and pressures will have an impact on winter planning.

5.4 LA advised that there are lots of different ways to analyse our current position and how we can adapt for the upcoming winter, and explained that there has been significant work put in place to ensure that patients are not kept in hospital for longer than they need to be and that plans are in place (such as reablement work) in order to care for patients in their own home. LA advised that one of the drivers for change was the building of trusting relationships and providing a person centred approach to care to get the best outcomes.

5.5 LA explained by collating all of this data, we are able to drill down and find out the specific reasons why people are attending A&E, and this is helpful to be able to determine out prevention and avoidance techniques.

5.6 LA advised that the approach for winter is to maximise the capacity that we already have. LA discussed the virtual ward model and how it is running very successfully in BANES. LA confirmed that this approach is really starting to turn the tide in BANES.

5.7 LA discussed the need to work with our primary care colleagues and advised that we are starting to look at how targeted support can be provided. LA confirmed that a focus on end-of-life pathways is also taking effect, as well as a co-designed campaign with parents and carers which will be linked to the Handi app.

5.8 AH advised that she is happy to see the Dorothy House lodges being used.

5.9 JH advised that she is worried about carers taking the brunt if there are any breaks in the chain and explained that most of the carers she knows are at breaking point.

5.10 MS advised that the figures in the slides show an increase in capacity, and asked if this has been reflected in wait times. LA explained that the two are linked, but it varies and waiting times do remain a significant pressure.

5.11 IP explained that the Home is Best project much depends on the home people are going back to. IP asked if the housing association are involved in the project and what it means for those who are homeless. IP also advised that when he searched for the Handi app he could only find it downloadable in Dutch. IP also explained that the IT system may need to be looked at ahead of the coming winter.

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**6. Dental update**

6.1 LA advised that the report on screen had been created by colleagues in the dentistry team and explained that from 1 April 2023 we are now responsible for commissioning dental services, which is quite a significant transfer of responsibilities. LA advised that there are three settings, Primary Care, Secondary Care and Community Services.

6.2 LA explained that dentists operate as independent businesses, and explained how because of this, access to services can be an issue. LA also advised that currently only 33.7% of adults and 60.1% of children have access to an NHS dentist.

6.3 LA advised that there are 47 dental practices in BANES but confirmed that again access is still an issue within the locality.

6.4 LA discussed the urgent dental care across Wiltshire, as well as an initiative around dental stabilisation and reduce the demand for urgent care in order to provide a more permanent solution to their care.

6.5 LA went through the report and discussed the outlined improvements that are being made to dental access in primary care.

6.6 JH asked if school dentists still exist as this used to happen when she was at school. LA advised that they do not have school dentists, but there are initiatives such as supervised brushing taking place in schools for young children.

6.7 IP advised that overall dentistry is one of the great disasters of health provision. IP asked how much feedback has been sought from dentists themselves? IP explained that a lot of private dentistry can now offer what is classed as secondary care on the NHS scale.

**Action: To find out if there have been any recent feedback surveys carried out for**

 **dentistry.**

6.8 AM advised that it is frightening what’s happening with dentistry and how it can impact many people. AP advised that the costs of dentistry can worry people and asked what awareness is out there for patients and the cost of their treatments.

6.9 LA advised that we can revisit this topic again and LR asked if anyone has any further questions to please send them to the BSW ICB engagement team email address.

6.10 JH asked if there is any legal right for people to see a dentist in the UK. LA advised that there are activity levels that need to be reached, but no legal requirement.

6.11 IP advised that what can put people off visiting a dentist is that they will not know the cost until they are attending their appointment. There needs to be a way that patients can be made aware of the costs before they book their appointments.

**Action – Discuss the above with the community wellbeing hubs**

**7. Public Questions**

7.1 LR confirmed that no public questions were submitted ahead of today's meeting.

**8. Any other business**

8.1 JH advised that a common theme is mobility, and if services can be mobile through vans or other modes of transport instead of being in a building which may cost more money to keep running.

8.2 AM advised that the NHS at home is something that is of great interest to him and access to information also applies to what is possible with NHS at home.

8.3 No further business was discussed and LA closed the meeting.