## Minutes

### Present

**Members:**

Andy Morley, Member of the Public

Anna Beria, Public Governor for NES, RUH-NHS Trust

Sue Poole, Development Officer - Healthwatch B&NES

Jenny Evans, St Chad’s Surgery Patient Participation Group

Ian Perkins, Member of the Public

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

**Attending Officers:**

Laura Ambler, Exec Director of Place (B&NES), LDAN & CYP, BSW ICB – **Chair**

Lucy Baker, Deputy Place Director and Director of LDAN, BSW ICB

Nellie Stevens, Business Support Officer & Executive Assistant, BSW ICB

Dom Hall, People and Communities Engagement Specialist, BSW ICB

Mike Sexton, HCRG – Speaker

Jeanette Sims, Director of Operations, Bathmind – Speaker

### Apologies:

Robert Page, Member of the Public

Rob Wills, Member of the Public

Janet Cowland, Member of the Public

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

Deborah Jane, Member of the Public

Hilary King, Protect our NHS B&NES

Julie Hockey, Member of the Public

### 1. Welcome and apologies

1.1 The chair opened the meeting and apologies noted as above. Introductions were made by all.

### 2. Declaration of interests

2.1 None declared.

### 3. Minutes of the B&NES Your Health Your Voice meeting on 19th July

3.1 The group reviewed and approved the minutes from the previous meeting as an accurate record.

### 4. Actions and matters arising

4.1 The group reviewed and updated the actions from the previous meeting. The updated action log will be circulated to the panel members.

### 5. Public questions

5.1 LA advised that one public question had been submitted but NS confirmed we are still awaiting response. Once this question has been answered the feedback will be circulated via email.

**6. Mental Health Focus Session**

* **Benefits of the Mental Health Car and Model**

6.1 LB verbally updated all the new Mental Health Care and model service that is being commissioned. The model consists of a mental health car that includes a paramedic and specialist mental health practitioner operating in Bristol but may also cover the B&NES area. LB to chase the clarification of this and will update the panel once this has been confirmed.

Action: LB to clarify and feedback to the panel whether the Mental Health Car covers the B&NES area.

* **Suicide Prevention Strategy Update**

6.2 The draft BSW Suicide prevention strategy will be taken to the B&NES ICA meeting in due course and will be circulated to the panel. The aim is to focus on early intervention and prevention on Mental health and emotional wellbeing to reduce the suicide risk. The recommendations of the strategy include:

* The **Place** recommendations include looking at the local priorities around suicide prevention and together create a big spoke action plan. Local authorities have been asked how they monitor suicide rates and to ensure this data is accurate and monitored in a more timely way. Public Health colleagues are working with providers in the system to access the output and outcome measures to allow better reporting. There is a BSW Suicide prevention group that will oversee this work programme and strategy.
* The **System** recommendations include suicide awareness and training, standardised and timely reporting and thematic learning. Another recommendation is to strengthen the links between suicide surveillance groups and bereavement support services.

Action: NS to circulate the suicide prevention strategy to the panel.

6.3 It was agreed that the annual report will be brought back to this group and any further updates around suicide prevention particularly regarding children and young people.

6.4 LA added and suggested that this strategy should also go to public meeting of the Health & Wellbeing Board and has been driven and supported from the public health colleagues at B&NES council.

6.5 JE shared a lived experience and raised a query within the RUH and Section 136. LB clarified that Section 136 is a Police only power to detain an individual under the MH act for their safety and safety of others and the individual should be sent to a health base place of safety provided AWP. An acute hospital wouldn’t expect to have a Section 136 policy.

6.6 LB added that Better Care Fund (BCF) is being used for Bath Mind Mental Health colleagues at the RUH emergency department to support patients with mental health. Bathmind team are working directly in the urgent and emergency care.

**Bath Mind Service/Community Wellbeing Hub (CWB) Mental Health and Wellbeing Services**

6.7 Mike Sexton and Jeanette Sims presented on the Community Well-being Hub, highlighting its establishment in March 2020, the range of services it offers, and its partnership with 28 organisations to support health and well-being needs in B&NES. The hub provides a central point for services such as financial support, housing advice, employment support, well-being courses, and mental health support.

* **Service Range:** Services offered by the hub include financial support, housing advice, employment support, well-being courses, and mental health support, showcasing a comprehensive approach to community well-being.
* **Partnership Network:** The hub's partnership with 28 organizations demonstrates a collaborative effort to enhance the support system for residents in B&NES, ensuring a wide-reaching impact.
* **Service Accessibility:** Accessibility to the hub's services was highlighted, with a focus on providing a central point for various needs, facilitating easier access for community members.

6.8 LA thanked both for attending and updating the group on the CWB services and expressed how positive the CWB is and shows a great example of integrated working between providers.

6.9 JE raised a query regarding the borders of B&NES and other localities. MS clarified that patients registered under a B&NES GP practice can use the CWB services.

6.10 JS clarified that the Bath Mind Mental health new service in RUH A&E is currently a 9am-5pm, 365 days a year service and operates out of hours, but cannot unfortunately cover 24/7.

**7 Healthwatch Feeback**

7.1 SP shared the report (circulated) and provided an update on Healthwatch including a summary of feedback being provided on health and care services. Current areas of concern include secondary care, waiting time for hospital investigations and access to dentistry services and mental health. Other themes include hospital transport, GP records, quality of treatment/appointment and holistic support. Healthwatch’s new engagements include Bath&NES Parkinson’s group, Dementia Voice Group and Swallow management committee meeting.

7.2 The group had a discussion on hospital transport and how the use of technology would improve the telephone traffic. JE wanted to reflect the positives of the RUH transport service and the change in the pickup points and raised one of the hospital transport providers operating at the RUH has stopped operating recently. SP and AB to feedback regarding the transport provider status. LA added that this will be fedback to the correct service providers.

7.3 IP wanted to raise the issues around imaging and Dentistry. LA suggested adding Dentistry to the forward plan agenda item.

Action: NS to add Dentistry as a forward plan agenda item.

**8 Any Other Business**

* **Darzi Report**

8.1 LA virtually shared slides (circulated) and updated the group on the Darzi Review, emphasizing its diagnosis of the NHS as in a critical condition due to factors like austerity and constrained funding, the impacts of the pandemic, and a need for better patient and staff engagement. The review suggests opportunities for improvement, including re-engaging staff, empowering patients, and increasing the use of technology.

* **NHS Diagnosis:** The DARZI Review's diagnosis of the NHS as in a critical condition was discussed, highlighting the compounded impact of austerity, the pandemic, and the need for improved patient and staff engagement.
* **Opportunities Identified:** Opportunities for NHS improvement was identified in the review, focusing on re-engaging staff, empowering patients, and leveraging technology to enhance service delivery.
* **Government's 10-Year Plan:** The government's upcoming 10-year plan for the NHS was mentioned as a key opportunity to address the challenges outlined in the DARZI Review, with a commitment to shaping a health service that meets the nation's needs.
* **Immediate Actions:** Immediate actions to address the NHS's critical condition were discussed, emphasizing the need to move swiftly towards service improvement and innovation.
* **Conclusion and plans:** Re-engage staff and re-empower patients**,** reform to make the current structure delivery, use the NHS budget to contribute to nation’s prosperity, increase the use of technology and shift care closer to home.

Action: NS to add Darzi Review including NHS 10 year plan for a further update and discussion.

* 1. AM expressed a desire for an update on **digital priorities** within the NHS, emphasising the importance of technology in empowering patients and enhancing productivity. This reflects a broader interest in how digital strategies are being developed and implemented within the health service. AM highlighted the importance of technology in empowering patients to manage their health, indicating a need for updates on digital priorities within the NHS. The role of technology in enhancing productivity within the NHS was discussed, suggesting a focus on digital strategies that streamline processes and improve patient experiences.

Action: NS to add BSW ICB digital priorities and opportunities to forward plan.

8.3 IP raised concerns about **antibiotic resistance,** suggesting it as a future agenda item to understand how it fits into the ICB's plans and the broader NHS strategy. This highlights the importance of addressing antibiotic resistance in healthcare planning and patient care.

Action: NS to add antibiotic resistance update to forward plan – prescribing colleagues to attend/support.

8.4 No further business was discussed, and LA closed the meeting at 16:00. The next meeting is scheduled for 26th November.