



healthwatch Bristol

ACCESS TO SERVICES AND EQUALITY

JANUARY – MARCH 2016

Healthwatch Bristol's quarter topic for January-March 2016 was 'Access to Services and Equality'. This report summarises the work of the quarter and the key themes in the feedback we gathered from members of the public in Bristol.

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ACCESS TO SERVICES AND EQUALITY

JANUARY – MARCH 2016

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WHAT IS 'ACCESS'?

Access to information about health and wellbeing

- Signposting directories
- Befriending
- Advocacy

Access to health and social care services

- Transport
- Appointment letters
- Jargon

Access to my future

- Leaving treatment and being discharged

Section 1: Introduction

What was Healthwatch Bristol's quarter topic?

Healthwatch Bristol chose 'Access to Services and Equality' as our topic for January, February and March 2016.

Why did Healthwatch Bristol chose 'Access to Services and Equality as the quarter topic?

We selected this theme in response to feedback received from members of the public over the past year.

Some of the key themes in the Quarter 3 Healthwatch Bristol Feedback Feed Forward report were:

- Access to services is made difficult for commentators due to complex needs, caring responsibilities, opening / appointment times (particularly out of hours), physical difficulties accessing services, and eligibility criteria and assessment processes. Commentators feel these needs should be taken in to account and more support given, with clear information and services adapted for their needs.
- Commentators were unhappy with services where staff were inattentive, uncaring and did not communicate well. Inconsistency in care and information (either lack of or conflicting), poor outcomes, and poor follow up all contributed to an overall poor experience.*
- Commentators felt that information on what services were available to them, and when and how to access them was not readily available.
- Waiting times, both waiting for appointments and referral dates and waiting at appointments were too long for commentators. They would like more information to manage their expectations.
- Commentators appreciate language translation services and would like them more widely available.*

W: <http://healthwatchbristol.co.uk/wp-content/uploads/2015/01/Healthwatch-Bristol-Feedback-Feed-Forward-Quarterly-Report-Y3-Q3.pdf>

What questions did Healthwatch Bristol ask to gather feedback about people's experiences of access to services?

We recognise that 'access' to services covers a range of different types of service and situation. We broke down our work into three key areas: access to information about your health; access to health and social care services and access to your future.

Access to information about your health

- Where do you go for information about looking after your health and wellbeing?
- Do you feel supported by health and social care staff to look after your own health?
- Is information about health issues and services in a format you can understand?

Access to health and social care services

- Do you feel you are receiving the right support for your health and social care needs?
- Are you happy with the length of time you wait for health and social care support or appointments?
- Are you happy with the appointment booking system for the services you use?

Access to your future

- Have you been discharged from a service? What support have you received post-discharge?
- Are you interested in volunteering or working following a period of illness? Tell us about your experiences.

Section 2: Healthwatch Bristol's engagement work during the quarter

What did Healthwatch Bristol do during the quarter and what feedback did you gather?

Access to information about your health

Signposting directories

In order to look after your own health and wellbeing, you need to be able to find and understand the information available to you. Information about health and wellbeing is available via online signposting directories and helplines including national services such as NHS Choices and local services such as Well Aware. Healthwatch Bristol has produced a simple fact sheet with links to frequently used signposting directories and a brief explanation of what their focus is. The fact sheet is available at: <http://healthwatchbristol.co.uk/wp-content/uploads/2016/04/Online-information-about-your-health.pdf>

Well Aware Signposting for Health in the Community conference

On Thursday 25 February, Well Aware held its first conference, the theme was Signposting for Health in the Community and included guest speakers, workshops and networking with local professionals in health and community services.

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

Face-to-face support

Information about health and wellbeing is also provided face-to-face via services including social prescribing, befriending and advocacy. More information about these services can be obtained by contacting Well Aware.

The Wellbeing Show on 93.2 BCfm

Healthwatch Bristol hosts a monthly radio show, The Wellbeing Show on 93.2 BCfm, to share information about health and wellbeing. Listeners can tune in on the second Tuesday of every month 3-4pm to listen to news, stories and updates from Healthwatch about local health and social care issues. Listeners can tune their radios to 93.2FM, or can listen online at <http://bcfmradio.com/how-to-listen>

Shows in 2016 have covered topics including:

- Volunteering
- Healthy Living Pharmacies
- Cancer
- Mental Health

Access to information and services for people with a learning disability

Healthwatch Bristol has worked with The Hive, a service for people with a learning disability, to find out more about their experiences of accessing and using health and social care services. The Hive members created an Easy Read survey which they used to gather feedback from

other people with learning disabilities. They also took part in Wellbeing Days which included interactive workshops on topics such as nutrition and relaxation.

What feedback did people share about their experiences?

GPs

- Lots of people said they asked a family member or carer to book their appointments at the GP rather than booking the appointment themselves.
- Most people had never received a letter from their GP in an Easy Read format.
- People wanted to be able to always see the same GP; those people who did always see the same GP said that this was good.
- Most people who had received an annual health check had had a positive experience.
- Most people liked using touch screens to sign in at their GP Practice. Those people who did not use touch screens were happy to talk to the receptionist.

General

- Some people said that they get confused about what health staff say or worry that they will not remember what they have been told by a health professional.
- Lots of people said that doctors and nurses were generally friendly.
- People said that doctors do listen to patients.
- Some people said that doctors and nurses speak to their support workers or family members rather than speaking to them as the patient.
- People said that they found it difficult to speak to health and social care staff on the telephone as it was difficult to make themselves understood and to understand the member of staff.

Cancer

- Very few people knew about cancer screening checks.

Mental Health

- There was mixed knowledge of mental health and where to get support for mental health issues.
- Pharmacies:
- Everyone who had used a pharmacy service said they were very happy with that service.

Drop ins and support services:

- People really valued the support they received from drop in groups and carers.

W: <http://healthwatchbristol.co.uk/wp-content/uploads/2015/01/Healthwatch-and-The-Hive-Summary-Report.pdf>

What did The Hive and Healthwatch Bristol do next?

Volunteers with Healthwatch and The Hive visited Birchwood Medical Practice

Healthwatch Bristol and The Hive (a local organisation working with people with learning disabilities) visited Birchwood Medical Practice on 15 March to work with the Practice staff to make their services even more accessible to people with learning disabilities. Two adults with learning disabilities who use services at The Hive and volunteer as Healthwatch Champions carried out an informal inspection of the Practice which has already taken great steps to make information accessible to people with additional communication needs. Healthwatch Bristol had heard from people with Learning Disabilities that they sometimes find it hard to access GP services and/or rely on a family member or carer to support them. Birchwood Medical Practice had responded to feedback in a Healthwatch Bristol quarter report and were open to working with other organisations to improve the experiences of people with learning disabilities who

use their services. Healthwatch Bristol brought The Hive and Birchwood Medical Practice together via the visit as an example of what can be achieved when members of the public, voluntary and community sector organisations and statutory services work together to improve service accessibility and quality. Together we identified lots of examples of things health services can do to help people with learning disabilities. A full report will be published over the coming month.

- Find out about the work Healthwatch Bristol has done with The Hive: <http://bit.ly/1NpxRLd>
- Find out about the work Healthwatch Bristol has done with Birchwood Medical Practice: <http://bit.ly/1LmcQMZ>
- View a video, produced by Fixers and a group of people who have learning difficulties, on how they want doctors to talk to them, as opposed to their parents, in appointments: <http://youtu.be/QhZsMM1ocv0>

Access to information and services for people with English as a second language

Healthwatch Bristol shares information about services that support people with their health and wellbeing via our website, monthly ebulletin, monthly radio show, social media, open events and over the telephone. This quarter Healthwatch Bristol has worked with:

ESOL for Health Courses

ESOL (English for Speakers of Other Languages) for Health, is a course for anyone with low-level English. Participants learn how to appropriately use NHS and other health services, acquire medical and health-related vocabulary and meet and talk with visitors including health trainers, GPs and medical students, mental health workers, first aid trainers and Healthwatch workers. Classes are usually twice a week, for eight weeks. The classes are delivered at Wellspring Healthy Living Centre in partnership with the City of Bristol College.

Healthwatch Bristol delivered two workshops, the first to the beginners' course and a second workshop to the more advanced course. Both groups were in their sixth week of the eight week course. The workshops were two hours long and each comprised of three activities. The activities were designed to help the participants think about and practice commenting on health and social care services they had accessed. The workshops also provided the opportunity for participants to learn more about Healthwatch and the health and social care services they use and feedback mechanisms. Healthwatch Bristol has also begun working with English Conversation Clubs and ran a session at St Pauls Children's Centre. These are more informal sessions to encourage English speaking and there are plans to run similar sessions in other locations across the city.

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

Chinese Lantern Project

Healthwatch Bristol invited The Chinese Lantern Project to attend the open advisory group in March to share information about their new telephone helpline which offers a free service to the Chinese community in the South West region. The aim is to identify isolated and hidden members of the Chinese community and empower them to better integrate into the wider society. Through the telephone helpline people can seek help on a range of issues including benefits, employment and housing. The project also runs a series of face-to-face surgeries.

The helpline is open Monday to Friday 10.00am-4.00pm (except on Bank Holidays). Calls are free from all UK Landlines and UK mobile networks.

Freephone helpline: 0808 8020012

E: helpline.bacwg@btconnect.com

W: www.bacwg.org.uk

Access to information and services for people with sensory impairments

Healthwatch Bristol and South Gloucestershire are working with the Deaf Health Promotions Group (Bristol) and the Deaf, Deafened and Hard of Hearing Group (South Gloucestershire) to run a consultation event for people who are D/deaf or experience hearing loss. Communication support will be provided.

W: <http://bit.ly/1RnaZ0G>

Healthwatch Bristol has also worked with groups supporting people with sight loss and dual sensory loss to gather their feedback. Engagement summaries from activities with **PROPS**, **WECIL** and **Sensory Heaven** will be made available via the Healthwatch Bristol website during April.

Access to information and services for older people

Healthwatch Bristol gave community pot funding to **Link Age** to help us hear from older people about their access to health and social care services and activities.

Link Age held:

- 10 Wellbeing days
- 4 Consultations
- 425 older people attended
- Two thirds of the people that attended took part in the activity.

The areas that the consultations were held in areas where LinkAge has been working or areas where they have provided support for the local community. The areas of the city included:

- Whitehall and St George
- Lawrence Hill and Easton
- Bedminster and Southville
- Lawrence Weston
- Shirehampton
- Henbury
- Brentry
- Stockwood

Link Age asked three questions – they are listed below with some of the key themes from the feedback:

1. Can you easily access the support you need when you need it from health professionals?

- There were a variety of responses and the majority were really positive.

2. Do you know where you can get advice on staying healthy?

- There was a positive response to this question.
- Many people said that they use their GP as a source of support and advice.
- There were requests for greater access to information and support outside of surgeries/ in community venues (possibly in libraries).
- Some people wait until an issue becomes a real problem before seeking advice or support.

3. Have you got access to enough community activities?

- People in areas where there are Link Age activities responded positively to this questions. There is, however, different levels of community activities in different parts of Bristol.
- Barriers to taking part in activities that were identified were: finance and transport and issues with bus services.
- 70% of the people asked at the Wellbeing Days said that they could easily access the support that they need when they need it. Only 20% of the people in the BME Elders consortium felt that they and their community could access the help and support that they need when they need it.

W: <http://healthwatchbristol.co.uk/wp-content/uploads/2015/01/Healthwatch-Report-LinkAge-2015-1.pdf>

Access to information and services for homeless people

Healthwatch Bristol engaged with five homeless services in Bristol and a total of 126 comments were received. The five services that Healthwatch Bristol consulted with were:

- The Salvation Army (Lawrence Hill)
- Riverside Hostel
- The Methodist Centre
- The Crisis Centre Ministries – Wild Goose
- The Compass Centre (St Mungos)

After discussion with the services it was decided that Healthwatch Bristol would attend the drop in sessions provided by the homeless services to informally talk with those in attendance to gather feedback. Healthwatch visited each service three times with the exception of the Methodist centre, which was visited only once, and received feedback on 40 health and social care services. The general theme for the engagement sessions were about the health and social care services that homeless people access. It is acknowledged that by engaging with those people who attend the services Healthwatch Bristol will not have collected views from

potentially those most vulnerable homeless people who do not engage with any support services.

In total 126 comments were collected from the engagement sessions. Generally the feedback was positive and the main themes from those comments were:

- Access to information: difficulties accessing services and information about treatment.
- Diagnosis or screening: difficulties in getting a diagnosis or poor follow ups from initial consultations with GP.
- Language / communication needs: limited access to translation services by individuals whose first language is not English.
- Support: mixed experiences of getting referrals to other services when individuals are identified as having complex needs. For example, dual diagnosis, mental health issues with associated substance misuse or drug addiction problems.
- Mobility: individuals with mobility issues find it difficult to access homeless services which are not centrally located and have to travel or walk long distances to access homeless services.
- GP Registration: the issue of not having any fix abode, has created various barriers for individuals that are deemed homeless, as they are not able to get registered at their local GP practices.

As a result of this project Healthwatch Bristol now sit on the Preventing Homelessness Strategy Health sub group, and the recommendations and feedback from the report are helping to inform their work plan and priorities.

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

Access to information and services for young people

Oral health project with children and families

Healthwatch Bristol facilitated sessions with a variety of family groups across Bristol as part of a focus on oral health. It was an opportunity for parents and carers to discuss their views about dentistry services and a chance for children to relax whilst participating in art work and discussing their experiences of going to their dentist.

Healthwatch asked questions to find out if people were registered with their dentist and if not to find out reasons for this, what they thought of their dentists, the dentistry services in general and whether there were areas which could be improved.

It was clear from the feedback gathered that those families who did attend regular dentist appointments were happy with their service. There was, however, some scope for improvements. To find out more about all the oral health report and all its findings please visit:

W: <http://goo.gl/IXpM16>

Young Healthwatch volunteer meetings

Young Healthwatch volunteers have met three times during this quarter. In January the meeting focused on working with the Freedom of Mind Festival team to increase awareness of mental health and the support available to young people. The Freedom of Mind Festival will take place in October 2016 and Young Healthwatch will continue to support the team throughout the year. In February Young Healthwatch invited the Healthy Living Pharmacies to the meeting and explored the benefits of using pharmacies to access support with health and wellbeing. The Young Healthwatch volunteers came up with lots of ideas about how to share information about pharmacies with other young people and we will be exploring these ideas further in the coming year. In the March meeting One Care Consortium and a researcher from the University of the West of England worked with the Young Healthwatch volunteers to discuss potential alternatives to face-to-face appointments with GPs, for example Skype appointments, telephone or email consultations, and the pros and cons of these communication methods.

More information about Young Healthwatch along with notes from all our meetings are available on the Young Healthwatch website page.

W: <http://bit.ly/1Pdc64u>

Access to services: transport

An essential part of being able to access services is actually being able to physically get to where the service is provided. Transport is a topic that Healthwatch Bristol has received feedback about in relation to two hospitals: Callington Road Hospital and Southmead Hospital.

Callington Road Hospital

Healthwatch Bristol has worked with Bristol Independent Mental Health Network (BIMHN) and the Bristol Health and Wellbeing Board to share public feedback about the lack of public transport to Callington Road Hospital. Healthwatch Bristol has raised this as a parity of esteem issue.

W: <http://bit.ly/1NP2bAl>

Southmead Hospital

Patients, visitors and carers told Healthwatch that having to pay to park on arrival at the hospital causes anxiety as people often do not know how long they will need to be in the hospital and that the parking was too far away from the Brunel Building for many people to walk comfortably.

In response to this feedback, NBT have changed the payment method for car parking for the Emergency Department and Beaufort Multi Storey car parks so that people pay when they leave the car park instead. There is a shuttle bus service that runs regularly from the multi storey car park to the Brunel Building and to the anti-natal clinic and pain clinics for those who have difficulty with the walk. A motorised buggy service, driven by the Move Makers

volunteers, has also been introduced in the Brunel Building to take people to their outpatient gate.

W: <http://bit.ly/1qFo4dk>

South West Ambulance Service (SWAST)

Healthwatch Bristol recently attended an engagement day held by SWAST to bring together all Healthwatch organisations across their area. The purpose of the event was to identify ways of working together and sharing information. In particular, how issues and positive feedback are shared and acted upon, and how information about the appropriate use of '999' and their service can be promoted.

Access to my future: leaving services and being discharged

Healthwatch Bristol has also begun to look at developing a review project to follow up the issues highlighted in the Special inquiry in to Hospital Discharge 2014.

Read the Healthwatch England report on discharge at:

<http://www.healthwatch.co.uk/news/step-closer-getting-hospital-discharge-right>

Section 3: The Accessible Information Standard

Access to services and information: the national context

The Accessible Information Standard is a new standard that, from July 2016, will apply to all adult NHS and social care services. NHS England are delivering a series of briefing sessions to support health and social care organisations to deliver the standard.

The [Accessible Information Standard](#) tells organisations how they should ensure that disabled patients receive information in formats that they can understand and they receive appropriate support to help them to communicate. (The Accessible Information Standard does not cover support for people with English as a second language.)

AIS is about equality of access; enabling people to access services independently and appropriately.

[Healthwatch Bristol](#) attended one of these briefings and has produced this summary to raise awareness of the standard. W: <http://bit.ly/1Urplkl>

More information about the Accessible Information Standard and its implementation locally is covered in The Care Forum's Information Sheet. W: <http://bit.ly/1psApAv>

Healthwatch Bristol shared information about the work undertaken this quarter at the Open Advisory Group event.

The Healthwatch Bristol's quarterly open advisory group is an opportunity for Healthwatch to share what members of the public have told us during the quarter about their experiences of health and social care services with service providers, commissioners and voluntary and community sector organisations. The open meetings also function as a forum for networking between organisations which encourages partnership working between groups. A full report of the meeting is available here: <http://healthwatchbristol.co.uk/08-03-16-hw-open-meeting/>

Also at the open advisory group event, attendees were given opportunities to share their thoughts about the Accessible Information Standard via writing their feedback on post it notes, speaking to Healthwatch staff or taking part in two focus groups.

Comments on the stages of the Accessible Information Standard

- More use of technology to facilitate communication and information sharing NOT only for young people!!
- The leaflets and posters provided to providers are not in an easy read format.

Ask – does the person have any information or communication needs? And find out how the person's needs can be met. The person should be involved in this process.

- Providers should be able to use common sense where necessary to ensure people are not disadvantaged by not being able to describe or understand or state their needs.
- It is good to have this standard. Encourage all care providers to **ask**.
- The worker should ask the patient if they know they can make a complaint against this worker should the patient not be happy.
- Training is an issue. Where will support for this come from? As a service provider who will tell me how I might do this – otherwise I will make assumptions.
- Reception, doctors, nurses, Health Care Assistants, drivers, caterers.
- The idea of having cards e.g. First Bus is useful. Can this be developed together? People have to keep repeating to everyone and want to tell once and be done.
- Bristol Community Health has volunteers who put together 'my care plans', which includes communication, with service users.

Record the person's needs. Individual's information and communication needs must be recorded in a set way

- It should be immediately clear in the records.
- Things change, it needs to be reviewed regularly.
- Access to information about health, what are the options? Community libraries hold information.

Highlight or flag up in a person's file that they have communication or information needs and how these needs are to be met

- Anyone should be able to add notes to this record on how to meet need.
- Record in the right place so that it is obvious to all.
- All involved in care must have access to this part of the record.
- Information technology is an issue for health professionals. The patient should have access to their own record.

Share information about a person's needs with other NHS and adult social care providers. Consent must be obtained before information is shared

- This is easier if there are shared recording systems.
- Not having to repeat yourself but there are confidentiality issues.
- Challenge of different information technology systems – ask NHS England about this.
- Consent and confidentiality – needs to be carefully monitored.

Provide people with information in an accessible way and communication support if they need it

- Do not assume how to communicate.
- Form partnerships with charities e.g. Royal National Institute for Blind People (RNIB) to help provide accessible communications?
- Services' budgets may make this difficult if it is costly e.g. the cost of leaflets.
- Learn from the experience that is already out there.

- Funding needed.
- Support needed.
- Do you have to have a label e.g. deaf, learning difficulty, for all this to apply to you?
- Pharmacies can give information on e.g. medication, but do people know this?

Focus group one - mental health services and the Accessible Information Standard.

Focus group one took mental health services and the Accessible Information Standard as its focus topic as it was felt by the event attendees that the Accessible Information Standard, although aimed at people with disabilities, was very relevant to the functioning of mental health services and the support mental health service users require.

The themes from the group discussion were:

- **Change over time:** a service user's communication needs and ability may change over time as a result in changes to their condition. For example, people with mental health illnesses may find it more difficult to communicate or retain information during times when they are suffering more acutely with their condition.
- **Technology:** using websites, smart phones and other technology can support people to find out about health and social care issues and services, but technology is not accessible to everyone (not everyone has access to technology and not everyone is able to use technology).
- **Choice:** service users must be given a choice about how they want to access information about their health and health services.
- **Advocates, Personal Assistants and friends and family members:** having an advocate, Personal Assistant or friend/ family member accompany a service user in an appointment can be helpful to people with understanding, communicating and retaining information. Some members of the group felt that the importance of this support is not always recognised by mental health services. Discussion also suggested that there is a need for more advocates.
- **Arranging an interpreter:** health professionals taking part in the focus groups said that health and social care organisations need to provide their staff with information about how to arrange a BSL or language interpreter.
- **Consent and confidentiality:** the group said that service users should be asked for consent before information about their communication needs is shared between service providers and professionals.
- **Volunteers:** it was suggested that volunteers could be trained to support service users to explore what communication support they may need. Volunteers may be able to spend more time with service users than health professionals are able to spend.

Focus group two – people with Learning Disabilities and Accessible Information Standard:

Focus group two took people with Learning Disabilities and the Accessible Information Standard as its focus topic.

The themes from the group discussion were:

- **Easy read:** there is a need for organisations to be able to access support and expertise regarding producing easy read documentation. Voluntary sector organisations may have the expertise and technology resources to produce the easy read format and could work with service providers.
- **Support cards:** First Bus has produced a 'Better Journey Card' which people with additional communication needs can use to tell the bus driver that they may need extra time or support with the journey. It was suggested that a similar card could be developed to support people with communication needs when accessing health and social care services. Similarly, Healthwatch Bristol and Bristol City Council have produced 'I Need Extra Help' Cards which are used by Gypsy, Roma and Traveller people in Bristol when they access support at their GP Practice. Any support card system would need to be acknowledged by all health and social care providers for it to be successful in helping people with communication needs.
- **Proactive approach to sharing information:** the group commented that health and social care service providers need to take proactive approach to telling people with learning disabilities about, for example, making a complaint and the availability of double appointments.
- **Signage and accessible buildings:** accessibility should include more than just information about an appointment and information shared in an appointment, it should also cover accessible signage in health and social care settings.

Section 4: What will Healthwatch do with the feedback?

- Healthwatch Bristol will share the feedback about the Accessible Information Standard with NHS England and ask for their comments.
- Healthwatch Bristol will continue to share information about the Accessible Information Standard via our network of contacts, website, monthly e-bulletin and social media.
- Healthwatch Bristol welcomes feedback from members of the public relating to their experiences of receiving, or not receiving, accessible information when using health and social care services.
- Follow up actions for all the engagement activities mentioned in this report are included in the individual reports which link to those activities.

Section 5: Looking forward – quarter one topic

Healthwatch Bristol's next quarter topic is 'Gender'.

Healthwatch Bristol's focus topic for April, May and June 2016 is 'Gender'. Healthwatch Bristol has been receiving feedback from members of the public that there are a number of gender specific issues and services which can impact people differently. We want to know more.

- Are you currently or have you recently used maternity services? Tell us about your experience.
- Are you transgender, what are your experiences of using health and social care services?
- Do you or have you experience of attending male only services, what are they and what do you think about them?
- Do you or have you experience of attending female only services, what are they and what do you think about them?
- Have you experienced gender based violence? What are your experiences of the support you received?

If you are part of a community group and would like Healthwatch to come to speak to you in person, please get in touch and we will arrange to come and meet you. Alternatively, everyone can share their feedback via the Healthwatch Bristol website or by contacting the Healthwatch team by telephone or email.

Help us decide what our future topics will be:

Healthwatch welcomes and encourages members of the public and organisations working to support the public to continue to contribute their feedback to us using the communication methods included at the end of this report.

Volunteer with Healthwatch Bristol

Healthwatch also supports members of community groups to become volunteer champions so that they can represent the experiences and needs of their community group. If you would like to find out more about volunteering with Healthwatch, please contact us using the details below.

Section 6: Tell Us Your Story...

Healthwatch Bristol want to hear from you about your experiences so that we can tell services your needs to create the best local services.



Text us - text bris followed by your message to 07860 021 603



Email us at info@healthwatchbristol.co.uk



Call us: 0117 2690400



Write to us at: Healthwatch Bristol,
The Care Forum, The Vassall Centre,
Gill Ave, Fishponds, Bristol, BS16 2QQ

Or visit our website to see more at: www.healthwatchbristol.co.uk