

Summary Report:

Keynsham Area Forum

Thursday 18th February 2015 | 7:30pm – 9:00pm

Community Space, One Stop Shop, Market Walk, Keynsham

1. Attendees

- Dawn Clarke (BaNES CCG)
- Sue Blackman (Programme Manager)
- Mike MacCallam (B&NES Council and BaNES CCG)
- Barry Grimes (BaNES CCG)
- Avril Baker (ABC)

The Area forum was chaired by Sarah Dixon and Tony Crouch and attended by 35 people. Attendees included several residents, councillors from B&NES, Keynsham Town Council and neighbouring parishes, plus representatives from Avon Fire & Rescue and various local groups and agencies including Keynsham Connecting Communities Forum, Community@67, Keynsham Wombles, The Care Forum- Healthwatch, Churches Together, Civic Society, Julian House and also from the business community including Saltford Business Network and Keynsham Chamber of Commerce.

2. Meeting summary

Mike MacCallam presented the purpose and principles of the **your care, your way** review, how all partners and stakeholders will be working together and engage with as many people as possible. He also explained the definition of community services and the phases and timing of the review.

The review was set within the context of statistics about the Keynsham area, the population and their health and wellbeing.

3. Group Q&A Session

Q1. Isn't it a bit out of date to define 65 years as 'old'?

R. National statistics are currently collected around particular age bands that tend to be grouped as children, young adults, adults of working age and older adults and for older adults the band is currently set at 65+. The review will however not focus around age restrictions but will take a cradle to grave approach.

Q2. Can you clarify whether the statistics you have presented are about just Keynsham itself or the Keynsham area?

R. This is about Keynsham and the wider area

Q3. Is there any way to provide more services locally whereby patients currently go to RUH or BRI e.g. for hearing aid checks & CPAP machines?

R. The review will look at the obstacles that patients experience and ways of making access to services easy and local if possible

Q4. How will you avoid duplicating services e.g. between the Health Park and Bristol South Hospital and consider travel times?

R. In developing our required outcomes the review will consider the location of services and the population they serve, this will be considered within the context of the role of the GP/Primary care

Q5. In terms of timescale is there an ambition to look at some areas more urgently than others e.g. supported discharge?

R. We appreciate we can't stand still and wait for the outcome of the review for all services and some do require more urgent review. There is a need to dovetail projects into the wider review but still continue services in the interim. e.g. we are currently talking to Red Cross and Age UK about supported discharge. Healthwatch will also be engaging with patients at the RUH to better understand their experiences with supported discharge.

4. Group Discussion and Feedback

Dawn invited the group to start thinking about their own experiences and introduced some theoretical case studies to encourage people to consider what local services people might use and /or want to access in the future.

The room was split into four groups, with facilitators at each table. Participants were asked to think about two key questions: what works well currently in your community and what are the key things you feel could make a difference to community services.

What works well?

- Discharge from Hospital to community hospital or community teams, with equipment in place and teams well prepared (although one person had very poor experience)
- Specific Services:
 - Support for young children especially with autism
 - Breast screening
 - RUH ambulatory care
 - Dementia services and use of RICE clinic
 - Children's services generally
- Active community /local voluntary support groups
 - Strong social support in Keynsham and surrounding area
 - GPs know what assets there are locally e.g. knitting club, village agents
 - Elderly tea parties, social clubs, singing for the Brain/Golden Oldies, church groups, Sunday lunches
- Dial-a-ride is excellent service. Drivers have had dementia training – could be expanded out to other voluntary agencies
- South Bristol Hospital, Minor Injuries Unit and Hengrove Unit – easily accessible
- Health/Care services staff work very hard and generally support is good for patients

What would make a difference?

- Look at geographical areas and GP boundaries in relation to understanding impact on care of changes in the future e.g. population shift, new areas of housing e.g. in Whitchurch.
- Patient/user communications and information
 - Provide a single point of contact and ensure that a patient's records follows them
 - Support for the navigator role
 - Signposting is key – one stop shop – people need to know different options
 - How to let more people know about the Well Aware initiative e.g. could promote more initiatives through social media
 - Better use of technology e.g. avoid physical trip to a consultant to read results if could achieve locally and use of electronic patient records
 - Care at the point of need i.e. not getting letters 5 weeks after discharge
 - 111 service is too complex for mental health patients and script is health focussed
- Access to services
 - Extend opening hours and adopt common approaches for making appointments in primary care services e.g. difficult to make a GP appointment at weekends and a chemist open on a Sunday
 - Better access and parking especially in Keynsham
- Local support, social networks and voluntary groups
 - Low percentage of breast feeding in Keynsham – need peer support groups where mums can share experiences
 - Join up social activities with other support groups e.g. knitting club with leg ulcer care
 - Provide more local focus - some voluntary agencies e.g. national organisations such as Red Cross have lost this local focus
 - People need to move through phases of care and keep their existing social support networks e.g. day centres, singing
 - Build on befriending services/ voluntary groups to avoid people tipping into crisis and to help keep them as independent as possible
 - Link agents in GP practices to help identify what is available – social prescribing
- Gap in local mental health provision - people need someone to talk to as experience social isolation

- Better capacity to accommodate educational needs for children with complex needs e.g. Keynsham children travelling to Bristol means 2 hour commute – could offer more support locally and reduce need for travel and cost to patient
- Better support re. housing requirements for children with complex needs
- Less segregation of services especially for older people (example in Norway where care home restaurant is also open to public) and ways of taking activities to frail elderly
- Earlier intervention/preventative care e.g. regular check-ups. Currently patients have to reach critical stage before services start - especially in children's mental health
- Better discharge support such as signposting and navigation to various services and available funding
- Personalised care around the patient including planning and integration
- More pro-active reablement support e.g. help with shopping, cleaning

Additional points

- Older people are traditionally a generation who don't like to ask for help – how can we encourage people to ask for help when needed
- Technology is a way to generate money in the economy – e.g. small units providing information hubs
- Hale & Hearty – preventative measure coming from GPs
- First Contact scheme in South Gloucestershire Council is very effective. Council has brought together various agencies and produced an A4 questionnaire about individual's needs and interests which provides information for going forward
- Need to think about strategies for supporting isolated communities and outlying villages as public transport expensive to travel to Keynsham

5. Next Steps

Mike and Dawn thanked everyone for their input and suggestions. Mike re-iterated that the review is about encouraging people to be bold, imaginative, creative and also proud of their community services.

- Attendees could take away booklets and leaflets to read and share.
- Further feedback is invited via the website www.yourcareyourway.org including any local groups who may like to input their views into the review.
- Individuals can also feedback by writing a letter, calling, using Facebook and on twitter
- The Your Care Your Way Team will be carrying out further workshops with particular cohorts and will arrange a date for to return to the Area Forum in the summer to provide an update and run a further engagement event.