

1) Update on non-emergency patient transport

At the September meeting Healthwatch updated the Committee on a piece of work it had undertaken with BaNES Clinical Commissioning Group (CCG) around the non-emergency patient transport service provided by Arriva Transport Solutions.

A joint visit was carried out in early August between Healthwatch and the CCG, which allowed us to experience patient transport first-hand. During the 'ride-along' staff spoke to patients and drivers/the crew 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, Bath.

Feedback gathered during the visit was pulled together into a joint report, which the CCG has shared with Arriva for comment. Here are some of the key points from the visit:

Health, safety and welfare of passengers/ patients

- All of the drivers were respectful and courteous to passengers using the transport. Passengers were referred to by name and appeared to be pleased to see the crews.
- The crews were asked about identifying potential harm to a passenger. Safeguarding was discussed and crews knew the process for referring passengers.
- Arriva aims to provide return journeys (after a patient's appointment) within four hours. For some passengers, e.g. those that have diabetes, this can require planning to ensure that food and/or medication is brought in order to prevent a hypoglycaemic incident.

Crews were asked how they would establish passengers' needs and what they would do if they had concerns about a passenger coming to harm. The CCG and Healthwatch were advised that if concerned about the patient they [the crew] could ring the control centre and advise them. However, the crew stated they have called in the past and it doesn't seem to make any difference as the patient would be considered in a 'place of safety' and, if they became unwell, the expectation would be that the ward/ unit would deal with this. The CCG and Healthwatch were also advised that when crews have called [the control centre] in the past this can be received with mixed reception depending who answers the phone.

This was tested on the day of the visit as there was a passenger who had diabetes and had not been made aware of the potential for a four hour wait. The crew made a call, which was handled by a polite call handler who said they would put this onto the system. The call handler explained that there were 88 patients needing return journeys allocated and unlikely to get there any earlier and that the resident was in a 'place of safety' in case anything happened.

- Crews were observed assisting patients onto the transport in their wheelchairs. All were securely strapped in with an additional seat belt.
- On the day there appeared to be good relationships between the crews and the departments/care home staff. The crews gave examples of situations when this hasn't been so good, for example where a journey has been delayed without the care home or hospital department being notified.

Patient feedback

- Patients stated that the crews were kind and approachable.
- The patients did say that at times when delays occurred they become frustrated and the crews can get the brunt of this, however the patients didn't feel it was the crews fault.
- The patients felt frustrated with the people who plan the journeys as they often have heard the crews speaking to the control centre stating that they are unable to get to the next journey on time.
- The patients said they felt frustrated for the crews as they can see that the journey time is impossible. One patient said they would like to have the opportunity to go to the control centre to explain this.
- One frequent user of the service stated that their life "revolves around Arriva" as the service frequent picks them up late and gets them home late. This patient stated that they feel they "want to give it all up as I can't face the transport".

The visiting team were grateful to the crew, passengers and Arriva for supporting the ride along. The feedback gathered during this visit has been triangulated with feedback from other sources, such as the Patient Advice and Liaison Service (PALS), contract monitoring meetings, Care Quality Commission (CQC) inspections etc, to build a clearer understanding of patients' experiences and the service that is being delivered.

Healthwatch is awaiting further update from the CCG regarding the full report and will notify the Committee when it becomes publicly available.

2) Accessible Information Standard (AIS)

The Care Quality Commission (CQC) has recently released information highlighting how they will monitor implementation of the AIS during inspections of NHS and publicly-funded adult social care services. To read more W: http://www.cqc.org.uk/equality_objectives_2017-19.pdf

Healthwatch B&NES is currently carrying out some public engagement to understand people's experiences of accessing services and how the AIS has impacted on their experiences during the last 12 months. We aim to release a full report in the spring and host a learning event with local providers to share best practice. Further details will be released nearer to the time.

Report prepared by Alex Francis, Team Manager, Healthwatch B&NES and Healthwatch South Gloucestershire, on Friday 24 November 2017.