



Healthwatch Bury

Annual Report 2015/16



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Message from our Chair



Welcome to our Healthwatch Bury Annual Report (2015/16). We hope whether you are a consumer, commissioner or provider of services, this report will be of interest to you.

As I sat down to write this message, I paused to reflect, not only on the events which have taken place during the past financial year, but also to consider the challenges we face in the future.

It is my personal opinion that Healthwatch exists because the past systems have failed to take proper account of the experiences and comments made by the consumers of health and social care services. We need to influence the system by using 'actual experiences' both good and bad.

It is impossible to reliably make assumptions about what people want. The only way to discover the type of care people really want is to go out and engage with them.

As Chair, I represent Healthwatch on the Health and Wellbeing Board and whatever my personal views, it is my duty to speak on behalf of the people of Bury. Therefore, we need to gather evidence to identify consumer trends and specific issues in both health and social care and use the evidence to influence both local and regional policy.

A consultant from MIH Solutions, stated: "Successful engagement starts from the outset through to evaluation - a partnership." I couldn't agree more!

This year, we have made important connections with young people and this has widened our understanding of their experiences of health and gained us a new audience, especially with respect to mental health services.

2016-2017 will be an important year for the Greater Manchester Healthwatch network.

There are going to be major changes in the future, in order to help meet the challenges faced: increased cost of care and a growing demand for services, due to more people living longer.

It is, therefore, essential for us to engage with service users and unpaid carers across both health and social care and, in particular, to draw on intelligence from the many community groups which serve our population so ably and effectively.

Healthwatch has a **duty** to involve local people in both assessing the quality of services currently being provided and also to influence the way new services are designed for the future. It is the only way

to be certain that services fit the needs of the Bury population in the years to come.

It is my hope, and desire that as we move through the next financial year (2016/17), Healthwatch Bury will be in a much better position to amplify the voice of the consumer, (*including those who are rarely listened to*) ensuring that it is heard in all areas of the evolving 'Health and Social Care' system, both locally and in Greater Manchester, as discussions take place around the changes which will inevitably occur as part of the devolution process.

We already have independence and, with help from the general public, we can also influence, by drawing on both the positive or negative experiences of the people who are using the many different services currently being provided.

We shall measure our success by identifying changes brought about by our use of

intelligence, highlighting priorities for future projects.

None of this would be possible without our hardworking staff who, although few in number, are always up for a challenge. To them, I would like to offer my thanks for the work they have done during the past year and for the future, "Keep calm and carry on the good work"!

Barbara J Barlow



The year at a glance

This year we've increased people on social media - in particular, Twitter by 50%



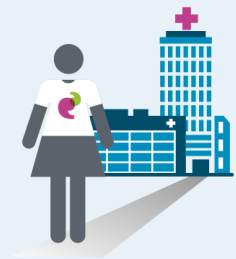
Our work has been seen as good practice
Outreach work has been appreciated+-



We've concentrated on over 65's,
Children & Young People and those who
are seldom heard



We've visited a number of local services



Our reports have tackled local and
regional issues



We've met hundreds of local people at
community events, drop in sessions and
the Millgate Shopping Centre



Who we are

We exist to make health and social care services work for the people who use them. Everything we say and do is informed by our connections to local people. Our sole focus is on understanding the needs, experiences and concerns of people of all ages who use services and to speak out on their behalf to drive forward improvements. We are uniquely placed as part of a national network, with an independent local Healthwatch in every local authority area in England. Our role is to ensure that local decision makers put the experiences of people at the heart of their work. We believe that asking people more about their experiences can identify issues that, if addressed, will make services better.

Our vision

Our vision is better health and social care services through public involvement.

Healthwatch Bury Guiding principles are:

- People First - We listen carefully to users of health and social care.
- Partnership - We work in partnership with other groups, seeking a stronger voice, together.
- Inclusion - We seek the views of those who are not often heard.
- Critical Friendship - We celebrate excellence; support service improvement and speak out on failings.

Our priorities for 2015 - 2016

- Meaningful engagement with young people
- Engagement activities for those service users whose voices may not be the loudest but whose individual needs should not be forgotten.
- Dental services for the disabled
- Speaking to people over 65
- Working with partners and stakeholders on a regular basis

Our Healthwatch Team (from left to right):



Annemari Poldkivi - Research and Public Participation Coordinator

Mafooz Bibi - Chief Officer

Andrea Wilson - Administrator and Social Media Coordinator

Sue Williams - Administrator and Social Media Coordinator

Listening to people who use health and care services

Patients are natural innovators and ill health brings with it both crisis and opportunity many have to rethink their lives and build new identities. This gives them the passion and empathy to come up with creative solutions to help others. They are able to see what needs to improve and provide innumerable ideas to make things better, often at very little cost. We need to tap into, and harness, those natural inputs.

Gathering experiences and understanding people's needs

Healthwatch Bury receives comments from the public, for example, "If I need an appointment at my surgery, I have to queue up from 8.30am and when it is my turn I am told all the appointments have gone for that day, so I shall have to return the next morning".

The comments will be put onto our database and at the end of the quarter, a report of all new comments will be sent out to service providers and also commissioners i.e. those who buy services.

If there are trends when we check the database and people have a concern about a service which they believe needs improving, we shall investigate further. If relevant, we shall write a report stating the outcomes of our investigation and make recommendations which we believe could improve the service. Service providers will then reply to our recommendations.



If you are a Bury resident, you are able to speak to us or complete the 'Your Voice' leaflet anonymously but if you would like a reply, you will need to give us your contact details.

If action is taken, it will be reported on the website, in the hope that more people will understand why they need to talk to us.

Healthwatch Bury has been actively gathering people's experiences by engaging with the local communities. We have been using various methods for doing that:

- Attending large community events
- Regular drop in sessions at the health centres
- Regular drop in sessions at Age UK Bury Jubilee Centre
- Drop in sessions at the local libraries
- Presentations to local community groups
- Presentations to local faith groups/churches
- Healthwatch Bury members meetings
- Via social media sites
- Via website
- Via newsletters and e-bulletins
- Joint events with Bury Diabetic Group
- Carrying out various surveys
- Devolution 'conversations' working in partnership with B3SDA

HW Bury team attended Prestwich Clough Day on [17th May 2015](#) - the team engaged with 80 people on the day.

Young people (under 21) and older people (over 65).

- Visiting Streetwise 2000 - engaged with 25 young people aged 16-25:
 - HW Bury gave a presentation on 17th February '16 and asked young people to feed back about their experiences with the services.
 - We also held a conversation with Streetwise 2000 on 23rd February '16 as part of Devolution Manchester engagement work to ask young people to talk about their own health and wellbeing.
- Held an NHS Constitution Workshop at Holy Cross College - engaged with 20 young people. HW Bury used a toolkit, containing new resources, to introduce and explore the NHS rights with young people.
- Attended Children's Trust Emotional Health and Wellbeing Event on 4th November 2015 with HW Bury information stand and engaged with 55 people on the day.
- Regular drop in sessions at the Age UK Bury Jubilee Centre - 5 sessions held and engaged with 83 elderly people. Healthwatch team visited the centre on a regular basis to ensure that the elderly population have access to the Healthwatch service and are able to share their feedback about the local services.

- Supporting 'Ambition for Ageing' programme in Bury. HW Bury actively promoted the programme.

Meeting with Service Users and Staff at the Housing Link

It is difficult to imagine the needs of people who have to face difficult challenges in their lives, so we set up a meeting to find out the problems they face when accessing services.

The Housing Link is a progressive, locally based charity providing a quality range of services to single people from 16yrs of age upwards, who are homeless or threatened with homelessness.

There is a range of temporary accommodation and, in particular, 5 bed spaces to provide emergency accommodation on a night by night basis to young people referred from the Bury Metropolitan Borough Council.

It became clear that many of the service users have emotional issues or specific problems such as drug/alcohol misuse, dealing with abuse or mental health problems.

The discussions which took place were certainly informative and left us in a much better position to understand their particular need for many different support services to work together - a holistic approach which, for many, with the support of the staff, proves to be successful.

One lady told us, "I had to hobble around for several years because I was sent away when the hospital staff realised I had a mental health problem but later I was told my pain had been caused by a fractured heel."

“Assessed initially in October but still waiting for something to happen in May.”

“There seems less help for those who appear to need long term therapy.”

“It would be useful for medical staff to listen to support workers when patients are being supported, as they see a more holistic picture and see people at all stages of their illness.”

The support workers told us they struggle to access appointments for needy clients or when their mental condition deteriorates for a specific reason.

People you believe to be disadvantaged, seldom heard or vulnerable.

- Visited Eagles Wing - Asylum seekers and refugees’ group - engaged with 16 people.
- Visited the service users who are recovering from substance misuse - engaged with 9 people.
- Visited a number of Black Minority Ethnic groups - engaged with 67 people. Attended the Health Awareness Day at Jinnah Day Care Centre, Aksa Homes Health and Wellbeing Bus.
- Visited Bury Carers Centre - 3 sessions held and engaged with 35 people.
- Tottington Library - gave a talk about Healthwatch Bury at a ‘Piece of Mind Café’ for dementia patients or their carers - engaged with 12 people.

Healthwatch Bury engaged with 665 people in 2015/16 through its public engagement.

The following ‘conversations’ were all part of GM Devolution engagement project, working in partnership with B3SDA. Discussions were held about self-care and wellbeing.

‘Conversations’ were held with:

- Communic8te - people who are deaf or have a hearing impairment - engaged with 11 people.
- Bury Society for the Blind - engaged with 11 people.
- The Housing Link - engaged with 5 people.
- BIG in Mental Health service users - engaged with 21 people.
- ADAB engaged with 20 people

People who live outside our area but use services within the area.

In Greater Manchester, people are encouraged to make contact with the Healthwatch in the area where they live, however, all the Healthwatch work closely with each other through the Greater Manchester Network, so relevant information is always passed on to colleagues; if necessary, anonymously.

In Bury, we are more likely to receive information, or to have a conversation about services, on market day when we have a presence in the Millgate Shopping Centre.

Giving people advice and information

Healthwatch Bury Health and Social Care Signposting Directory

Healthwatch Bury worked in partnership with Healthcare Publications who published the (signposting directory) in autumn 2015.

The directory contains information and contact details for the GP surgeries, pharmacies, dentists, opticians, care homes and other organisations in Bury. A copy is available in a paper format and has also been uploaded to the Healthwatch Bury website.

Healthwatch Bury Signposting and Information Service

The public are able to access the service via telephone, email, by submitting an online form, post and outreach events. Below is a breakdown showing how the public has accessed the service during the year 2015-16.

Type of contact:



Telephone 69%



Office 18%



Email 4%



Outreach 9%



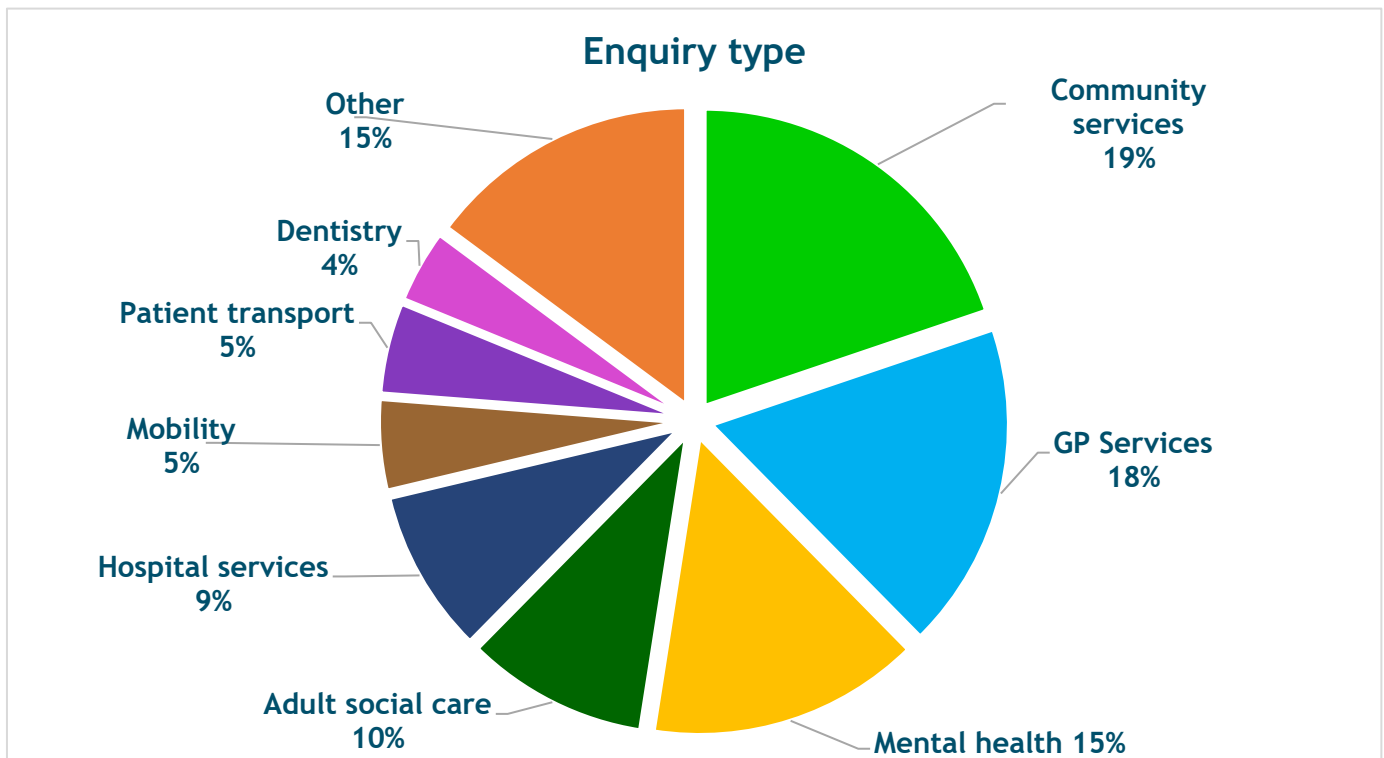
Healthwatch Bury can help people in lots of different ways. Over the last year members of the public have contacted us to ask for information about a number of issues. Some of the examples include asking for information regarding accessing medical records, contact details for the prostate cancer support group and information about the respite care for someone suffering with dementia.

We have had phone calls from people asking for the details for autism services, weight loss services and telephone numbers for different hospital clinics. Please see more case studies in this report about how Healthwatch Bury can help individuals.

The pie chart on the next page highlights the type of enquiries Healthwatch Bury received during the year.

Helping people get what they need from local health and care services

Copies of the directories were distributed to all GP surgeries, pharmacies, Age UK Bury, Bury Council and other agencies. Copies were also distributed throughout the year at the 'drop in' sessions and other engagement events.



Other enquiry types included:

- Autism
- Continuing Healthcare
- Long term conditions
- Pharmacies
- Children's services
- Opticians
- Weight management

How we have made a difference

Our reports and recommendations

Healthwatch Bury work has focussed on priorities highlighted to us by the local people in 2015/16.

Healthwatch undertook pieces of work based on what local residents were telling them. Further

information about these reports can be found below or on our website:

www.healthwatchbury.co.uk

Pennine Acute Hospitals NHS Trust Report Joint Initiative from Healthwatch Rochdale/Bury

Healthwatch Bury (HWB) and Healthwatch Rochdale (HWR) worked in partnership to carry out a survey of work around Pennine Acute Hospitals NHS Trust Services.

HWR received increased negative feedback from people living in Rochdale. A number of concerns were about the delivery of services at Fairfield General Hospital. Although Fairfield Hospital is not in the borough of Rochdale, because the complaints came from Rochdale residents, HWR investigated further. During the time of the investigation, HWR received more negative feedback regarding other hospitals within the Pennine Acute Hospitals NHS Trust.

HWR requested a meeting with HWB to discuss the feedback they had received and to confirm whether Bury residents were raising the same complaints about the services at Fairfield Hospital. During this meeting it became apparent that residents of both boroughs, Rochdale and Bury, had voiced complaints against Pennine Acute hospitals; trends were forming, so the two Healthwatch decided to act.

We decided to work together to create a questionnaire to be given to all patients attending the hospitals within Pennine Acute Trust. Instead of reviewing the one site, Fairfield Hospital, a decision was made to review all 4 sites:

- Fairfield General Hospital, Bury
- North Manchester General Hospital
- The Royal Oldham Hospital
- Rochdale Infirmary

North Manchester General Hospital

The majority of the respondents found North Manchester General Hospital's services to be 'outstanding' or 'good'.

Patients who completed the survey were very happy with the attitude of staff and the standard of care.

A high percentage of the respondents found that the maternity department's overall service was 'outstanding'.

Rochdale Infirmary

The majority of respondents found Rochdale Infirmary's overall services to be 'good'. Respondents highlighted, through the results that both the urgent care centre and eye clinic were respectively 'good' overall services, although concerns were expressed regarding the size and location of the signs to the eye clinic. A number of people felt they could be improved.

Fairfield General Hospital

The majority of respondents found Fairfield General Hospital's services to be 'good'. Some respondents were not happy with the hospital's A&E department and had concerns regarding discharge, waiting times and aftercare services.

Within the cardiology department the majority of respondents rated the attitude of staff and standard of care 'outstanding' or 'good'.

Royal Oldham Hospital

The majority of respondents found Oldham Hospital's overall services to be 'good'.

Patients who completed the survey were very happy with the attitude of staff and clinical care. However in the gynaecology department two service users highlighted the overall service they received as poor or below.

The report was published in November 2015 and sent to Pennine Acute Hospitals NHS Foundation Trust and a formal response was received within 20 working days. The Trust assured Healthwatch that the report had been shared with senior clinical leaders to allow them to address the issues raised and to inform the ongoing service delivery at the Trust.



Fairfield General Hospital

Report on Dental Access for Disabled People in Bury

The concerns around access to dental practices in Bury were first brought to the attention of Healthwatch Bury (HWB) by a member on behalf of Bury Coalition for Independent Living (BCIL) service users.

Sadly, BCIL ceased to exist from the end of December last year. It was a charitable, user led organisation which included Bury Society for the Blind and Partially Sighted people, Bury Involvement Group in Mental Health (BIG), Bury Independent Learning Development (Bury ILD) and Communic8te and individual service users. BCIL's goal was to help people live independent lives.

The concerns were around the access to dental practices and the attitude of some dentists towards disabled people. When HWB asked people to share their experiences about dentistry in Bury, through social media, more comments were made which gave us a reason to look into this issue further.

A meeting with representatives from HWB, Bury Coalition for Independent Living and Bury Society for the Blind and Partially Sighted was held to agree the best methodology for the project.

The questionnaire, for the dental practices in Bury, was sent to all 29 dental practices to identify how accessible general dental practitioners, working in the Bury area, think their practices are and to identify the barriers they face in providing care for disabled people.

The patient survey was also sent out to a range of community organisations and

individuals in Bury.

The report, with the following recommendations, was published in November 2015 and was sent to NHS England:

- Ensure that all the dental practices in Bury have an induction loop available for the patients in their surgeries.
- Arrange disability awareness raising training for the customer facing staff in the dental practices.
- Provide car parking spaces for disabled patients,
- Ensure that patients are notified, well in advance, regarding any changes to their appointment or dental services.
- Provide patients with large print information leaflets, if relevant.
- Ensure that any reasonable adjustments are made to make surgeries more accessible for people with disabilities.
- Ensure that a text message, email or letter is sent, to confirm an appointment, to all patients with a hearing impairment.

“I have really enjoyed becoming involved with Healthwatch and this event. It’s been brilliant to be able to see NHS England at the event alongside with Pennine Care and Patients themselves and I hope that Healthwatch will continue to grow and speak out on behalf of the patients”.

Jackie - Whitton’s Dental Practice Manager, Ramsbottom

We received a formal response from NHS England within 20 working days, assuring us that the recommendations would be sent to Bury Local Dental Committee (LDC) for dissemination to the practices.

They also informed us that they are working with practices to ensure that information on the NHS Choices website is kept up to date and that appropriate training, for all staff, is undertaken on a regular basis.



Working with other organisations

Pennine Acute Hospitals NHS Trust

The Forum which we initiated with North Manchester, Oldham, Rochdale and Pennine Acute continues to flourish and meet on a quarterly basis.

A draft protocol, for working together, has been agreed and is awaiting approval and sign off from the Board of each organisation.

Pennine Care Foundation Trust

The forum including Healthwatch Bury, Oldham, Rochdale, Stockport, Tameside and Glossop and Trafford which lapsed, due to staff changes, has now been 'revived'

and meets on a bi-monthly basis for people to work together and share information.

Independent Complaints Advocacy (ICA)

The NHS Complaints Advocacy is there to provide practical support, advice and information, if you wish to make a complaint about an NHS service you or someone you know has received. An advocate works from our office on a fortnightly basis. Contact us for further information. Healthwatch Bury has agreed and signed a protocol for working with ICA.

Bury Clinical Commissioning Group (CCG)

Healthwatch Bury Board has also agreed a protocol for working with Bury CCG. This will be reviewed during the next financial year. The Chair is a member of the Primary Care Commissioning Committee and attends CCG Board meetings as a member of the public.

Visit to Holy Cross - Pilot to assess new resources

Everyone has rights when using the NHS but Too often there is confusion about what this means for children and young people.

We visited Holy Cross College to facilitate a workshop for a group of young people who are all interested in studying for a career in either the NHS or social care.

Discussion took place around specific themes:

- Using the NHS: getting the best care from the NHS
- Being treated well: treating you and your information with respect
- Making decisions about your care
- Making things better where you live
- Staying healthy into adulthood
- Giving feedback and making complaints

- What young people can do
- What they (as a group) could do working with Healthwatch
- What they need others to do

The young people gave their feedback and agreed to keep in touch.



Maternity Listening and Action Group for the North East Sector

A representative from Healthwatch Bury attends on behalf of all the Healthwatch in the NE sector - Bury, North Manchester, Oldham and Rochdale.

This is a group for mums and dads of all cultures and equates to - Maternity Services and Liaison Committees (MSLC).

What do they do?

- Carry out a programme of work to explore the experiences and needs of recent service users in order to improve services
- Monitor the range and quality of services available against the



delivery plan, clinical guidance recommendations and developing best practice

- Monitor acceptability and equity of access services available for women locally
- Provide advice and feedback on maternity commissioning and service delivery
- Feed into the development of initiatives e.g. Joint Strategic Needs Assessment, early needs provision

Who is involved?

“MSLC’s should comprise representative health professional from all specialties involved in maternity care, together with relevant commissioners, managers and social care input and at least one third service user members.”

Following discussion, they decided on the following themes for future meetings:

- Breastfeeding
- Skin to skin
- Home birth
- Cultural Awareness
- Mental health
- Gentle Caesareans

These meetings take place on a monthly basis and all parents who have used the maternity services of Pennine Acute NHS Trust are welcome to attend.

Involving local people in our work

Please see below how HWB has involved local people in its work.

Working with BARDOC



HWB worked in partnership with BARDOC (Bury and

Rochdale Doctors on Call) from January 2016 - March 2016.

The meeting was held with the management team to discuss how to best work together. HWB and BARDOC produced the survey and it was sent out by BARDOC to all the patients who accessed the service over the Christmas Bank Holidays in December 2015.

The surveys were returned to the HWB office in Freepost envelopes and the draft report has been produced with the recommendations based on what patients have told us.

BARDOC also consulted the HWB membership about the patient leaflet regarding patient records. The members provided them with constructive feedback which was gratefully received by the Out of Hours service. It has been a pleasure working with BARDOC and the Healthwatch team is hoping to continue to work with them in the coming year.

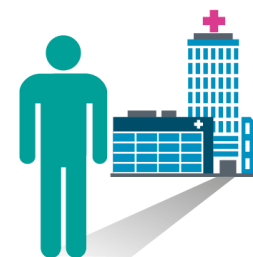
Devolution Manchester conversations in partnership with Bury Third Sector Development Agency

Greater Manchester Devolution (<http://www.gmhealthandsocialcaredevo.org.uk/>) authorities asked Greater Manchester Healthwatch and Voluntary Sector organisations to work together to talk to local people about how they are taking charge of their own health and wellbeing and if there are any challenges they are facing when doing it.



96 people participated in the 'conversations' about their health and wellbeing between 15th February and 31st March 2016.

HWB, in partnership with Bury Third Sector Development Agency, organised seven conversations across Bury. These 'conversations' were held with the following groups:



- Streetwise 2000
- Communic8te
- The Housing Link
- Bury Society for Blind and Partially Sighted people
- Age UK Bury
- Asian Development Association of Bury (ADAB)

📍 BIG in Mental Health

We asked the participants three main questions:

1. What should you do to stay fit and healthy?
2. What do you do to stay fit and healthy? What enables you to do that?
3. What stops you being fit and healthy? What barriers are you facing?

In addition to the previous questions we asked people if they knew of any good practice examples and if they had any ideas that could improve public health.

Important themes emerged from these conversations:

- 📍 Tackling isolation and loneliness was an important theme for most of the groups we engaged with. Many people stated that it can have a really negative effect on an individual's health and wellbeing.
- 📍 Voluntary sector organisations provide enormous support to individuals in the community and have a significant positive effect on their health and wellbeing. Many people visit these organisations regularly, to take part in various activities and to meet new people.
- 📍 Early intervention - many groups recognised that healthy lifestyles and self-care start from early childhood. Many participants stated that more campaigns targeted at children and young people would significantly improve public health.

- 📍 Having a support network, happy family or friends, helps you to take charge of your own health.
- 📍 Setting yourself goals and having a positive attitude and strong mind were also recognised as key elements for being able to take charge of your own health.
- 📍 Lack of transport was a major barrier for many groups we engaged with. Several participants stated that it is often not accessible or affordable.

Key enablers that emerged from these conversations were the following:

- 📍 Have a support network and community group to go to. Participants in different groups stated how much support they have received from third sector organisations.
- 📍 Have a purpose or a reason
- 📍 Set yourself a goal
- 📍 Have a strong mind and positive attitude
- 📍 Have friends and someone with whom to share different activities.
- 📍 Have a happy family
- 📍 Childhood interventions - you are more likely to be healthy and active if you have been taught that lifestyle from an early age.
- 📍 Reduced waiting times for services
- 📍 Sufficient money

Key barriers that emerged from these conversations were the following:



- Isolation and loneliness were one of the key barriers identified by several groups
- Disability
- Feeling low/down
- Being depressed
- Lack of transport
- Access to services
- Shortage of money
- Fear
- Lack of support for families with mental health conditions

Lack of mental health training often means that people with mental health conditions are frequently misunderstood.

The information for the final report has now been collated and the report for Greater Manchester has been completed by Greater Manchester Centre for Voluntary Organisations (GMCVO). The report will be made public in the near future.



Our work in focus: Case Study 1



Bury Coalition for Independent Living contacted Healthwatch Bury last year with regards to a young lady who is deaf. The young lady in question was having trouble getting her eye sight tested because the opticians in Bury would not provide a British Sign Language interpreter, unless the young lady paid extra for the service. They had previously provided this service for the young lady free of charge.

Prior to contacting Healthwatch, BCIL contacted the Equality and Human Rights Commission who agreed that, by law, this service ought to be provided free of charge. The Equality and Human Rights Commission agreed to take the case forward but as it might have taken months or years to get a resolution, they contacted Healthwatch. Meanwhile, the lady still had not had her

eyes tested. A simple eye test could have also revealed other health issues.

Action: Bury Clinical Commissioning Group (CCG) is responsible for funding interpreters for Bury opticians, therefore, Healthwatch Bury contacted Bury CCG to ask if they would be able to provide any clarity regarding this issue. Bury CCG were really helpful and responded to our enquiry within days. They also wrote to apologise for the confusion this issue had caused.

Outcome: Bury CCG contacted the manager at the opticians with the information on how to book a BSL interpreter for free when required, so the young lady was able to book an appointment within in the next few days. Bury CCG also sent out a communication to all opticians in Bury to inform them of the arrangements for booking an interpreter and also assured Healthwatch Bury and BCIL that they would take the matter to the next Professionals in Partnership meeting, involving Communic8te, Action on Hearing Loss and other partners.

This case showcased that working in partnership with other organisations can really benefit people in Bury and help to find the best outcomes for the patients.

Our work in focus: Case Study 2



An enquiry came into the Healthwatch office from Cathy regarding her husband David who had been in hospital for ten days with an abscess on his thigh.

David had been discharged from hospital for the weekend with a vacuum pump belonging to the hospital, on the proviso that he returned to the ward on the Monday morning where he would have to stay until he was provided with a pump for use at home.

Until he was provided with a pump at home, he was told he could not be discharged. This was quite frustrating for both David and his wife. Due to the delay, Cathy phoned Healthwatch to ask whom she could contact to get the issue resolved.

Action: The CCG told us that they would make further enquiries about the process for obtaining a pump and also suggested that Cathy should contact Pennine Care -

Patient Advice and Liaison Service (PALS).

Healthwatch was able to pass on the contact number to Cathy and later gave Cathy a follow up call to find out whether the issue had been resolved. Cathy confirmed that David had returned home with a pump and the community nurses were visiting to change the dressing.

Outcome: As soon as the pump arrived at the hospital, a discharge plan was put into place. The CCG have been assured by the hospital that the correct procedure is now in place. They also informed Healthwatch that the vacuum pumps are not kept in stock but are rented when required.

David was pleased with the speed that things had been sorted following Cathy's conversation with Healthwatch because he was then able to go home. He also wrote to compliment the nurse who initially dealt with his abscess at the walk-in-centre. The nurse had realised, as soon as he/she saw it, that the abscess was serious and explained that he needed immediate hospital treatment.

Our plans for next year

- Recently, we had a new database installed which will enable us to coordinate and streamline our services, in order to deal with the concerns, of those who contact us, more effectively.
- Our website will soon be updated to make it more interesting and allow information to be more easily accessible.
- Survey Monkey has now been installed, to enable us to do short surveys on specific issues
- Next month, recruitment will begin for a new Chief Officer - and directors, to replace those who have resigned because they are no longer eligible i.e. have left the area or due to personal commitments.
- Once a permanent Chief Officer is in place it will enable us to implement our volunteer recruitment policy.
- We shall shortly be moving to new, permanent accommodation

Future priorities 2016 - 2017

Devolution - System Change in Greater Manchester

Primary Care - community hubs

Mental Health - all age groups

Public Health - Taking Charge

Podiatry

NB. We need to ensure flexibility within the system to respond to the rapidly changing landscape.

Healthwatch Bury Members' Meetings

Healthwatch has a diverse membership and holds regular meetings to share information and keep its members, and the general public, informed about new health and social care initiatives in Bury.

Pharmacy Meeting - November 2015



Healthwatch Bury held a meeting on 26th November for its members and public to share information about available community pharmacy services in the town. The meeting was held at Bury Masonic Hall and light refreshments were provided.

Ian Short, Chief Officer of Bury and Rochdale Local Pharmaceutical Committee, was invited to attend the meeting as a guest speaker and gave a really useful overview about the service.

He explained that there are currently 42 community pharmacies in Bury, to which people make around one million visits each year.

NHS Community Pharmacies do much more than provide prescriptions: they also provide the following services:

1. **Supporting people to self-care**
 - Self-care advice

- Self-limiting conditions
- Long-term conditions
- Sales of over the counter medicines
- Minor ailment services
- Signposting to other providers

2. Supporting people to live healthier lives

- Advice on healthy lifestyles as part of NHS services (e.g. Medicines Use Review and dispensing)
- Public health campaigns - six campaigns are required from Public Health.
- Flu vaccination and a range of locally commissioned services
- Stop smoking support
- Emergency contraception / Contraception Alcohol screening and support
- Chlamydia / Gonorrhoea / Hep B / HIV testing
- Immunisation - flu, travel health, HPV etc.
- NHS Health Checks
- Weight management services
- Early detection of cancer

3. Optimising the use of medicines

- NHS dispensing and repeat dispensing
- NHS Medicines Use Reviews
- NHS New Medicine Service
- Safe disposal of unwanted medicines
- Improving Inhaler Technique

4. Supporting people to live independently

- The NHS repeat dispensing service
- Home delivery of medicines to the housebound
- Systems to help people remember to take their medicines
- Reablement services following discharge from hospital



- Falls assessment/reduction services
- Supply of daily living aids
- Identifying emerging problems with peoples' health
- Signposting patients, or their carers, to additional support and resources related to their condition or situation.

Members' Meeting December 2015



A meeting was held on 9th December at Bury Masonic Hall to discuss the dental access for disabled people in Bury.

The focus of the meeting was to present the 'Dental Access for Disabled People in Bury report, hear the response from NHS England and also to inform the general public about the available dental services.

Annemari Poldkivi presented the report and explained that the reason for this project initially came from Bury Coalition for Independent Living who expressed concerns, on behalf of their service users, regarding the inaccessibility of some of the dental practices in Bury. It was decided to look into this further and carry out surveys with both the dental practices and patients in Bury.

The guest speaker from NHS England, Lancashire and Greater Manchester was Rose Pealing, Dental Business Manager.

Rose explained some of the aspects included in dental contracts and gave a response to Healthwatch Bury's recommendations.

She said that not all dental practices are able to comply with the Disability Discrimination Act regulations, due to the limitations of their buildings or funding.

Richard Valle-Jones, Clinical Director for Dentistry at Pennine Care NHS Foundation Trust, was also one of the speakers. He gave a really informative overview about the dental service at Moorgate Primary Care Centre and explained how Pennine Care provides a Community and Urgent Dental Care Service in Bury, Oldham and Rochdale.

Members of the public were able to ask questions and lots of useful discussions took place during the meeting. Following the meeting, Healthwatch Bury received lots of positive feedback.

Members meeting - February 2016

Healthwatch Bury also held a Members' /public meeting on 25th February at Bury Unitarian Church, in relation to Greater Manchester Devolution, to find out how local people feel about future service integration.

The group was asked if there are gaps in the current services. Some of the responses are quoted below:

- Communication and fragmented services is a big issue.
- There is not enough transport for elderly and vulnerable people.
- Cost of travelling for patients (Buses and taxis).
- Safe transport is essential re: hospital discharge.
- People are being refused the best medicines and lots of medication and incontinence pads are being wasted.

- There are not enough beds in the nursing homes.
- Care homes and funding.
- There are different mind sets in health and social care - this could be a barrier for service integration.

There was a useful discussion around the changes that have recently taken place in Bury and a realisation that the economic landscape is changing.

Comments were made that, although the third sector organisations might not be able to keep up with these changes and are often not seen as equal partners, they regularly provide enormous support to large groups of people in the community.

One of the issues is the need for a method to monitor the care and quality of the services delivered by the third sector organisations. It was agreed, by the group, that there is a lot of waste with respect to prescribed medication.



Our governance and decision making

The Board of Directors

Our Board



Barbara Barlow -
Chairman



Carol Wilson -
Vice Chair



Graham
Evans -
Treasurer



Sharon
Brearley -
Director



Jane Crosby
McCaig -
Director

Resigned Jan
2016



Roger
Burgess -
Director

Resigned Dec
2015



Emma Waite -
Children &
Young
People's Lead

NB. At the 2015 AGM, the Board was re-elected until September 2016, as they had not been in post for a full year.

Financial information

For further information please contact: The Programme Support Manager, Department for Communities and Wellbeing, Bury council.

Tel: 0161 253 6357

INCOME		£
Funding received from local authority to deliver local Healthwatch statutory activities		
Additional income		£1,889.52
Total income		£122,000.00
		£123,889.52
EXPENDITURE		
Office costs		£4,524.51
Staffing costs		£73,364.55
Direct delivery costs		£4,894.40
Governance		£202.70
Overheads		£7,100.27
Premises		£10,928.84
Total expenditure		£101,015.27
Balance brought forward		£22,874.25

NB. Full audited accounts will be available at the Annual General Meeting in September.



Contact us

To contact us for information or to tell us about your experiences of accessing Health or Social Care services within Bury, please see our contact details below.

Address:

Healthwatch Bury
3 Manchester Road
Bury
BL9 0DR

Please note that we have moved to interim accommodation (three months) at:

Suite 12

Europa House,

Barcroft St,

Bury BL9 5BT

Tel: 0161 253 6300

Email: info@healthwatchbury.co.uk

Website: www.healthwatchbury.co.uk

Twitter: www.twitter.com/healthwatchbury

Facebook: <https://www.facebook.com/Healthwatchbury>

We shall be making this annual report publicly available by 30th June 2016 by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, Clinical Commissioning Group/s, Overview and Scrutiny Committee/s, and our local authority.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us at the address above.