

Activity Report

Report of the Healthwatch Bury activities in Quarter 3
(October – December 2025)



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Healthwatch News

Quarter 3 2025/26



Welcome to our new volunteer, Dr Sarkar

After qualifying as a medical graduate at the age of 21, from Calcutta [Now Kolkata], India, I came to England in 1966. I worked in the NHS for about 35 years, initially in various specialties in England for a few years. After working as a General Practitioner at the Ramsbottom Health Centre, Bury, for 25 years, I retired in 2001.

After my retirement, I enrolled in the in the Adult Learning Centre in Bury, to become an artist. I exhibited my paintings regularly at the Bury Art Museum, as a member of the Bury Art Society. I also had some interest in astronomy, and I am a member of Heaton Park Astronomy Group.



However, during the lockdown period, I started reading medical books and watching numerous YouTube videos about the health-related subjects. As a result, I changed my own eating habits and lifestyle to improve my health. Then, I decided to write a book entitled "A Simple Guide to Staying Healthy and Living Longer" which was published last year. The book is now available from Amazon eBay and other websites.

At present testing fasting blood insulin level, is not available under NHS for the patients. As it is very important to know, in order to prevent chronic illnesses, I would like to campaign for its availability under the NHS for patients.

Q. Why knowing fasting blood insulin level, is very useful to determine people's metabolic health to prevent chronic illnesses like obesity, type 2 diabetes, mental illnesses etc.

Fasting insulin level is a powerful early indicator of metabolic dysfunction, often revealing risk for chronic illnesses long before blood sugar level change.

Fasting insulin level measures how much insulin your body produces, after not eating for 8 to 12 hours, unlike blood glucose or HbA1c, which reflect blood sugar level. Fasting insulin reveals how hard your body is working to maintain normal glucose level. Elevated levels suggest insulin resistant -- condition where cells become less responsive to insulin, forcing the pancreas to produce more to compensate.

These matters because insulin resistance is a root cause of many chronic diseases. It precedes and

predicts type-2 diabetes, often by years. High fasting insulin is also linked to obesity, as excess insulin promotes fat storage and inhibits fat burning. Moreover, insulin dysregulation contributes to cardiovascular disease, fatty liver, and even cognitive declines (Alzheimer's Dementia) and mood disorders (anxiety, depression, schizophrenia, bipolar disorders)

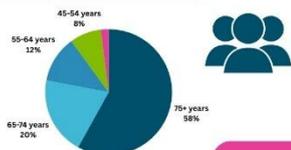
Prescription services in Bury North



About our survey

The purpose of this survey was to follow up on exploring patient experiences with patient-led prescription models

Who are the respondents?



Confidence



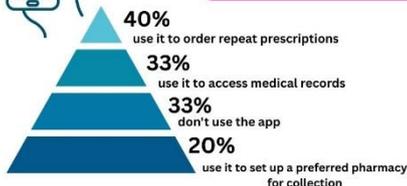
92% feel comfortable asking for further information from their pharmacists

Delays

48% experienced no delays getting prescriptions approved but **48%** did



NHS app



We're pleased to share the findings of our latest engagement project examining prescription services in the Bury North area. This focused follow-up study explores how patients are experiencing the evolving prescription landscape, particularly as patient-led ordering models are introduced.

Building on our prescription research from 2024, this targeted engagement was designed to assess the real-world impact of new approaches to prescription management. The shift toward patient-led ordering represents a significant change in how people access their medications.

This project gave the opportunity to capture direct feedback from residents in Bury North, understanding both the successes and ongoing challenges as these new systems take root in local healthcare landscape.

A special acknowledgment goes to our volunteer Aaliyah, whose contributions have been invaluable to this project. Aaliyah has supported with the following:

- Creating an infographic that transforms complex data into accessible, visually engaging insights that can be easily shared with the community and decision-makers
- Contributing data analysis and research that helped us

identify meaningful patterns and trends in patient experiences

This report represents another chapter in our ongoing dialogue with Bury Integrated Care Partnership about prescription services—a conversation that began with our original prescriptions project and continues as we monitor how changes affect real people in our community. These sustained relationships enable us to track progress, identify emerging issues, and ensure that patient voices remain at the centre of service development.

The full report, official response, and Aaliyah's excellent infographic provide a snapshot of prescription experiences in Bury North.

Access the complete report, response, and infographic here: [Prescriptions follow up project report | Healthwatch Bury](#)

Enter and View Report on Grundy Day Care Centre



We are thrilled to announce the publication of our latest Enter and View report following comprehensive visits to Grundy Day Care Centre in September and October 2025. This marks a milestone for Healthwatch Bury, our first report since relaunching the Enter and View programme, demonstrating our renewed commitment to amplifying the voices of local residents and driving meaningful improvements across health and social care services.

This achievement would not have been possible without the exceptional dedication and expertise of Alison Slater, our Enter and View Lead and Board Member. Alison's professionalism, attention to detail, and passion for championing service users' experiences have been instrumental in bringing this report to completion. Her leadership has set a strong foundation for the programme's relaunch and future success.

The Enter and View programme represents one of Healthwatch's tools for creating positive change. These visits allow our trained volunteers to enter health and social care premises, observe services firsthand, and speak directly with service users, staff, and families. The insights gathered form the basis of comprehensive reports that highlight both excellence and areas for improvement—ensuring that local voices directly influence the quality of care provision.

Through our visits to Grundy Day Care Centre, we've captured valuable feedback about the experiences of those using this vital community service, contributing to our wider mission of ensuring that people remain at the heart of care delivery in Bury.

The successful completion of this report reaffirms our position as the independent champion for people who use health and social care services in Bury, and our determination to hold providers accountable while celebrating good practice. The infographic on the left has been created by our volunteer, Aaliyah to present the overview of the visit.

Access the complete report here: [Healthwatch Bury: Enter and View Report on Grundy Day Care Centre | Healthwatch Bury](#)

Military Veterans Engagement Work

Healthwatch Bury strengthened its work with the armed forces community through a series of engagement activities and partnership-building.

Bury Armed Forces Covenant Conference

Healthwatch Bury attended the Bury Armed Forces Covenant Conference at the Fuseliers Museum, bringing together local organisations involved in housing, health and veteran support.

At the event, we presented our recent work with GP practices to help ensure veterans are correctly identified in primary care systems and receive the support they are entitled to. We also showcased our new Veterans Information Leaflet, created to collate key contacts and local support options for the armed forces community.

The conference also provided an opportunity to promote our Prostate Cancer Project, emphasising its relevance for the veteran population and encouraging early detection and awareness.

We additionally expressed our interest in becoming a future Valour Centre partner, positioning Healthwatch Bury as a hub of ongoing support for local veterans and their families.

Building Strategic Relationships

At the event, we established a new connection with Lieutenant Assistant Naval Regional Commander Antonio Valente (NW) from HMS Eaglet. This led to a dedicated follow-up meeting on 23 October 2025 to discuss Healthwatch Bury's veterans' engagement initiative and explore collaborative opportunities.

Together, we explored issues commonly affecting veterans, including:

- Homelessness and housing
- Access to mental health services
- Employment and skills support
- Affordability of wellbeing activities
- Improving recognition and visibility of the veteran community across Bury



- As a result of this meeting, we agreed to expand our veterans' questionnaire to capture these additional areas. Insights will be shared with Lt. Valente's team to support the region's wider armed forces strategy. We also shared relevant community contacts and offered the Healthwatch Bury office for future engagement sessions.

Lt. Valente also took away information on several Healthwatch Bury projects – including our Prostate Cancer Project and ongoing community focus groups – to explore how his team may support or participate in future activity.

Prostate Cancer Research project update

We're pleased to share that the Prostate Cancer survey project is now live. Please find the online survey link here:

<https://www.smartsurvey.co.uk/s/HWBPCS/>

Healthwatch Bury has led and managed the project, but it will be delivered collaboratively under the Healthwatch in Greater Manchester.



healthwatch
In Greater Manchester

Have You Been Diagnosed with Prostate Cancer?

Your experience could help others

Healthwatch Bury has launched a new independent project to gather insights from men affected by prostate cancer, aiming to raise awareness and improve services.

We're looking for men to share their experiences to help raise awareness and shape better services. Get in touch or scan the QR code to take part.

Website: <https://healthwatchingm.co.uk/>
Email: info@healthwatchingm.co.uk





The survey has been extended to run till the middle of February, and our goal is to reach as many men across Greater Manchester as possible. This is a fantastic opportunity to collaborate on a meaningful piece of work for GM and deliver impactful outcomes.

To date, we've received 135 survey responses from individuals across Greater Manchester. In addition to the survey, we've conducted several one-to-one interviews to gather more in-depth feedback, and held another focus group in December, attended by two participants, who shared valuable insights.

These engagement activities are helping us build a clearer picture of community experiences and needs, which will inform the next phase of the project.

Healthwatch England also recently published the following showcasing the importance of this topic: [Men's Health Prostate Cancer press release](#)

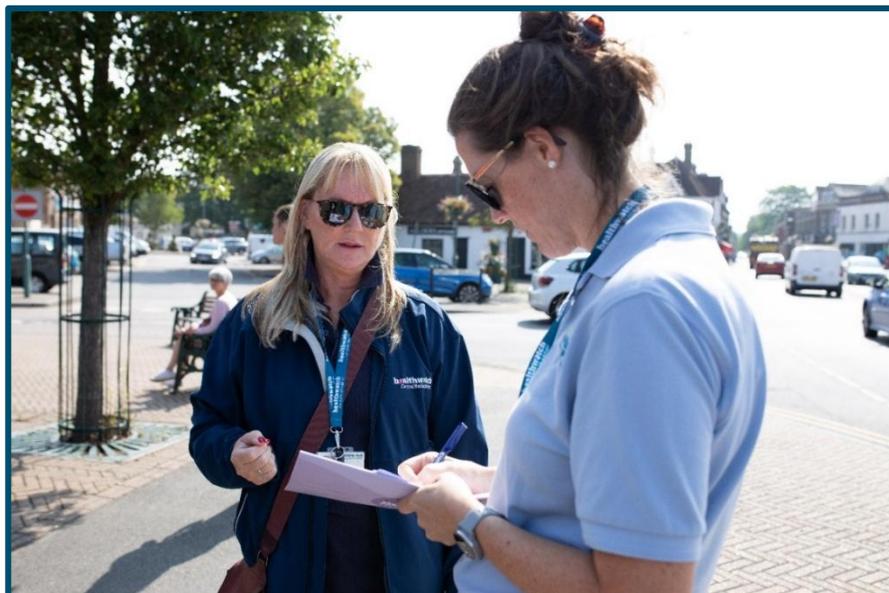
NHS Engagement Project Opportunity

Healthwatch Bury, in partnership with VCFA, is inviting applications from VCSE groups to take part in a small-scale project aimed at improving access to and experiences of healthcare for people with neurological conditions in Bury.

Healthwatch Bury currently have funding for a small-scale project working in partnership with Bury VCFA to improve access to and experiences of healthcare for individuals with neurological conditions (e.g. stroke, multiple sclerosis, Parkinson's disease) in Bury.

We are looking for 3-5 VCSE organisations with an interest in this work to be supported in gathering peer insights and contribute to sharing future local NHS strategies and approaches. Organisations/Community groups do **not** need prior experience in community/patient engagement or research; training and support will be provided.

Further eligibility information and guidance can be found on our website (click the button below) but if selected your organisation will receive a small grant to support delivery as well as ongoing support from Healthwatch Bury and VCFA. [NHS Engagement Project Opportunity | Healthwatch Bury](#)



Current work streams

Quarter 3 2025/26



Foreword from Chief Operating Officer, Andrew Griffiths

Whilst recent months have challenged the network following the announced planned closure of Healthwatch through the publication of the Dash Report and NHS 10-year plan, our work plan and focus have not changed. We have faced this news head on, not downed tools, but more so galvanised ourselves and doubled down on our focus to help the people of Bury. We have the fantastic news that our funding has been confirmed through to March 2027, and we are continuing to strengthen our collaborative partnership with the Council and other partners to position ourselves as a vital part of the VCFSE community.

On a bigger level, Healthwatch in Greater Manchester will be working closely with Mayor Andy Burnham to look at what a GM model could look like in the future following his vocal support of the Healthwatch function in November 2025 at the GM ICP. The 10 localities are meeting regularly to help design and build this model, focussing on maintaining a local presence but with a more structured overarching level of consistency and direction as a single focal point at a GM level.

I am extremely proud of my team and their hard work and dedication to the cause and look forward to delivering bigger and better for the people of Bury in 2026. We will lead the way in representing resident voice in Bury and in GM, and I know we will be famous for what we do.



Bury

Greater Manchester Healthwatch Prostate Cancer Experience Survey

We're pleased to share that the Prostate Cancer Experience Survey Project has been running since September and remains live. [Greater Manchester Healthwatch Prostate Cancer Experience Survey](#) The survey deadline has been extended to 21 February, and to date 135 responses have been received across Greater Manchester.

As part of the engagement activity, four focus groups have already been held, with an additional focus group scheduled for 11 February. We have also carried out numerous one to one interviews with patients to seek more detailed feedback. The next steps will include analysing the survey and focus group data and collating findings into a report to be presented to stakeholders.

Healthwatch Bury is leading and managing the project, which is being delivered collaboratively through the Healthwatch in Greater Manchester network. We also continue to regularly attend Cancer Programme Board meetings to support and inform this work.

Healthwatch Engagement

Over the past three months, we've been busy getting out and about, listening to people, offering support, and making sure everyone knows where to turn for help. Whether it's housing advice, health information, or social care support, our message is simple: every voice matters.

Community engagement isn't just about talking—it's about making a real difference. By meeting people where they are, we're helping to close the gaps between services and the people who need them most, making access to health and wellbeing support easier for everyone.

We've been offering advice and support at Whitefield Housing Events, including at Victoria Community Centre, where we helped residents with housing queries and signposted them to the Bury Carers Hub and Staying Well team. At the Victoria Youth Community Centre, we supported people with housing concerns and even made a referral to Bury Hospice.

We also joined the St Michael's Winter Warmer Event, which was a great opportunity to connect with local residents and share wellbeing and housing advice. At Tottington and Prestwich drop-ins, we raised awareness about prostate cancer and offered practical support.

Our engagement with local GP practices continued. We arranged drop-in sessions across the borough, including Greenmount Medical Practice, where we spoke to 42 patients, shared

prostate cancer information, and made referrals. We also visited Spring Lane Medical Practice to share resources and promote key health projects. At the Minden Centre, we connected with 44 attendees and completed a veterans survey.

We attended International Older People's Day with Age UK Bury, sharing prostate cancer information and listening to feedback. On World Mental Health Day, we worked alongside Talking Therapies, social prescribers, DWP, and Calico to promote mental wellbeing. We also connected with the Breathe Easy Group to support discussions around respiratory health.

We joined Carers Rights Day, organised by Bury Carers Hub, where we met with 45 carers to share support services and Healthwatch drop-in details. At the Circles of Influence Away Day, over 100 young people were in attendance and support was received for Youthwatch—watch this space!

Over the last three months, we've had more than 500 interactions across events, drop-ins, calls, and visits. The key themes we're hearing from people include housing support, mental health, prostate cancer awareness, carers' rights, youth engagement, homelessness support, and social care assistance.

We'll keep working hard to support people and make sure they have the right information to navigate the ever-evolving health and social care system.

On the phone, we've helped with:

- Finding accessible transport for a Tottington resident's wife.
- Supporting a homeless individual urgently seeking accommodation and daily living support.
- Advising on PIP assessment concerns and penalty charge queries.

In Person, at office drop-ins, we've:

- Signposted asylum seekers to transport services.
- Provided NHS dentist lists and smoking cessation resources.
- Helped a couple contact Bury Housing Team about temporary accommodation.

Supporting Armed Forces Communities in Bury

Key activity included:

- **Attendance at the Bury Armed Forces Covenant Conference**

We represented Healthwatch Bury at the boroughwide conference held at the Fusiliers Museum, sharing our work with GP practices to improve identification and support for veterans in primary care. We also promoted our newly developed

Veterans Information Leaflet and highlighted the relevance of our Prostate Cancer Project to the veteran population.

- **Strategic partnership building**

At the event, we established a new relationship with Lieutenant Assistant Naval Regional Commander Antonio Valente (NW). This led to a follow-up meeting where we discussed the findings from our veterans engagement work and explored issues such as access to healthcare, homelessness, employment support and visibility of the veteran community in Bury.

Following these discussions, we agreed to:

- Expand our veterans questionnaire to include additional areas such as housing, wellbeing and employment challenges.
- Share insight and community contacts with Lt. Valente to support coordinated local action.
- Explore opportunities for Healthwatch Bury to act as a future Valour Centre and offer our office for veteran engagement activity.

Q3 activity has strengthened Healthwatch Bury's role within the local armed forces community, improved partnership working, and enhanced our understanding of the health and wellbeing needs of veterans across the borough.

Enter and View

Our Enter and View visits have now resumed. In September and October, we visited Grundy Day Care Centre, where the feedback was very positive. A draft report has been prepared and has been published on our website and our social media channels: [Healthwatch Bury Publishes Enter and View Report on Grundy Day Care Centre | Healthwatch Bury](#)

We are pleased to welcome new Enter and View Authorised Representatives, including young volunteers who have recently completed their training.

In addition, we carried out two visits to the Fairfield General Hospital A&E Department, following an invitation from the NCA to provide an independent review and assessment. During these visits, our experienced Enter and View team spoke with 28 patients and three staff members. The report is currently in draft format and will be published following Northern Care Alliance. We are currently planning our 2026 programme. We will be visiting the GP surgeries and will also be putting out the offer to local services to invite Healthwatch into their service to do the review as an independent organisation.

Weekly Drop-in sessions.

We're running weekly drop-in sessions from our office to offer practical support to anyone needing help accessing health and social care services.

These sessions take place every Tuesday, Wednesday, and Thursday from 10am to 2pm, and have become a valuable space for local residents to ask questions, share concerns, and get guidance.

Our team is on hand to listen, offer advice, and signpost to the right services, making sure no one feels alone when trying to get the care they need. More info about the types of enquiries we received further down in the report.

Prescriptions Follow Up Project

Healthwatch Bury gathered patients' feedback regarding the issues around prescriptions during the previous year, the focus was going out to health centres and local support groups. We produced a report from the project. The report has now been finalised, and response was received from the Primary Care team and the Local Pharmaceutical Committee. We have also met with the Bury Integrated Care team to discuss how to best disseminate the messages about the patient led prescribing.

We started a follow up project In Q1 focussing on Bury North to look at how the patient led prescribing pilot has impacted the patients to support the wider rollout of the initiative across the borough. We have visited Speakeasy, Greenmount Cuppa and Chat, Cozy Corner in Tottington Methodist Church and Christ Church Food Pantry in Ramsbottom. The draft report was completed in Q2 and shared with the Board and other relevant stakeholders. We are currently awaiting on a response from the key stakeholders before publishing the report. We have now published the report from the project: [Prescriptions follow up project report | Healthwatch Bury](#)

Volunteer Programme in Q3, we welcomed three new volunteers, Dr Sarkar, Neda and Zahraa to the volunteer team. Dr Sarkar has completed their induction and relevant training and are now actively supporting our social media and engagement activities. Dr Sarkar's contributions are already making a positive impact, helping us reach more people and strengthen our community presence. We have recently set up the low carb diet hub and will be promoting it event further in Q4: [Low Carb Diet Hub | Healthwatch Bury](#)

District Nursing Project We've recently strengthened collaboration with the District Nursing team to improve service awareness and gather meaningful patient feedback. Key outcomes include:

- A short service overview will be developed by the District Nursing team to raise awareness of what's available.
- Healthwatch has shared anonymised patient feedback, including relevant comments on wound and lymphedema services, to support wider service understanding.
- Work is underway to refine survey questions to ensure they are accessible and relevant.
- A District Nursing representative will join selected community group visits to support outreach.
- Plans are in place to distribute Healthwatch surveys and leaflets to housebound patients, with support from the nursing team.
- This partnership reflects a shared commitment to improving communication, accessibility, and patient experience across the community.

Healthwatch Bury Annual General Meeting

Thank you! A huge thank you to everyone who braved the weather on Thursday to attend our AGM. We shared updates on our work and had important discussions around key health issues in our community.

If you'd like to learn more about our key projects, please get in touch or visit our website: <https://healthwatchbury.co.uk/>



Healthwatch drop in sessions

healthwatch
Bury

Join us at Healthwatch Bury's weekly drop in session

Pop in to share your feedback about health and social care experiences.

We can also help you to access local services.

Every Tuesday, Wednesday and Thursday

10am – 2pm

**Healthwatch Bury's Office,
56–58 Bolton Street, Bury, BL9 0LL**

Telephone: 0161 253 6300

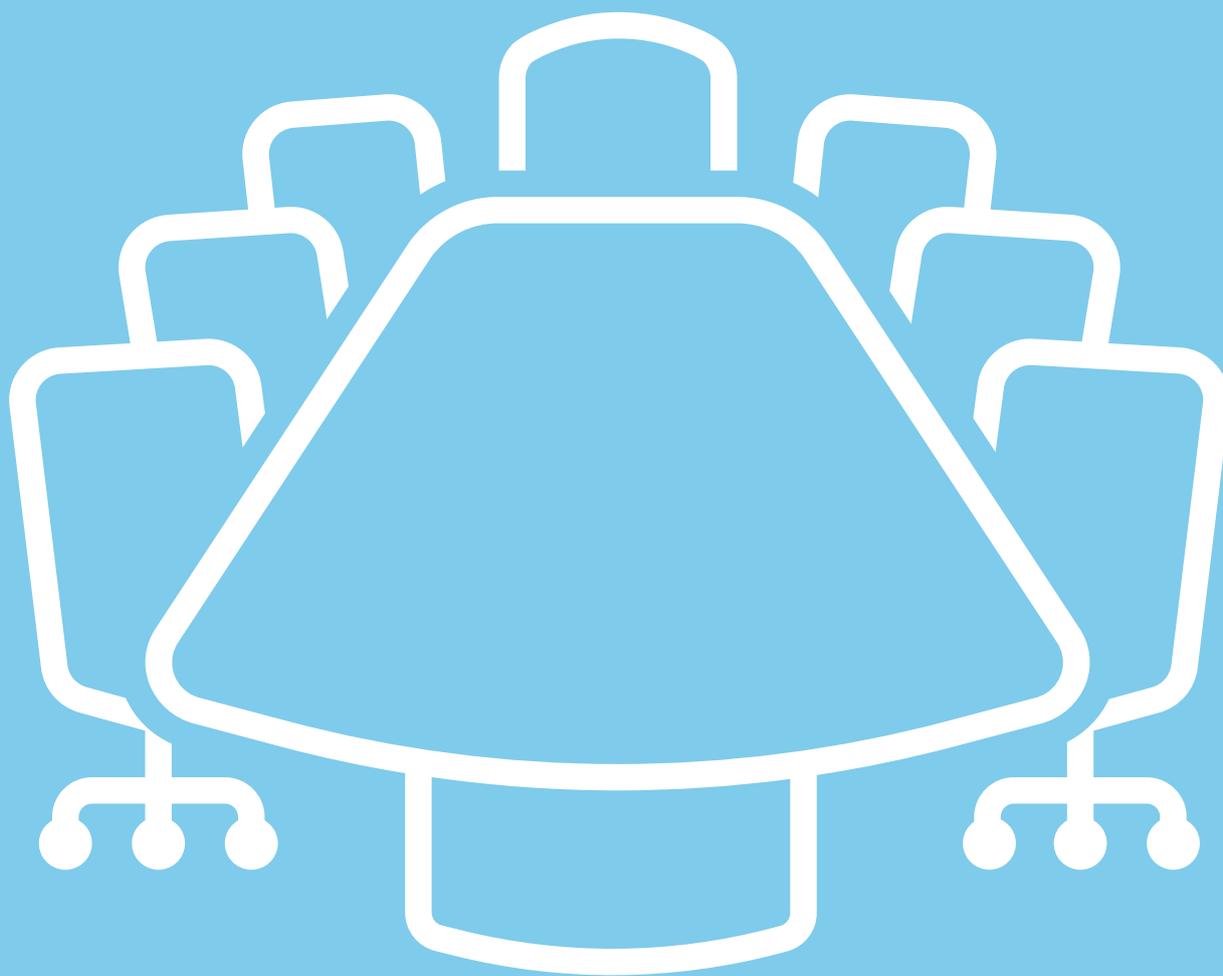
Website: www.healthwatchbury.co.uk

Email info@healthwatchbury.co.uk



Governance updates

Quarter 3 2025/26



Quarter 3 Highlights

- **Healthwatch Bury Board drop in with councillors** was held on **Tuesday, 21st October**.
- **Healthwatch Bury Board Meeting** was held on **20th October** and **pre-AGM Board meeting** was held on **4th December**.
- **Annual General Meeting** was held on **4th December**.
See the previous Board meetings minutes here: [Board minutes | Healthwatch Bury](#)
- Regular **monthly Board bulletins** circulated.

Board activities schedule 2025/26

Please note the future meetings dates are currently under review to ensure up to date information will be provided for the Board members.

| Date | Time | Location | Session name |
|--|-------|----------|---------------|
| Tuesday, 27 th January 2026 | 5-7pm | Teams | Board meeting |
| Tuesday, 10 th March 2026 | 5-6pm | Teams | Board drop-in |

Public feedback

Quarter 3 2025/26



Issues raised in Bury

1. Access to GP appointments & front-door experience (booking, patient choice, admin/process)

- Difficulty getting GP appointments or appropriate clinician (weeks of trying; offered nurse when GP needed; issues when preferred GP unavailable).
- Inconsistent admin & communication: removal from GP list after a charged interaction; blocked or confusing complaints routes (wrong ICB postal address / bouncing emails); proxy access/records access confusion; struggles obtaining medical summaries/SARs in usable form.
- Patient choice barriers for out-of-area patients and referrals to chosen hospitals; receptionist tone/attitude concerns.

Patient quotes:

- "Unable to make a GP appointment... needs pain medication review... tired of having to fight for care."
- "Waiting three weeks for a routine appointment... prefers specific GPs; offered nurse but feels not appropriate."
- "Out-of-area patient... referral to hospital of my choosing always declined... barriers in place."
- "Removed as a patient after a charged discussion; left without medication."
- "Unsure where to send GP complaint—wrong address online; emails bouncing."
- "Medical summary missing conditions; SAR delivered as a 261-page file too large to use."
- "Receptionist's dismissive tone; felt belittled."

2. Hospital/diagnostics delays & poor cross-system communication (results, surgery dates, transport)

- Long waits for diagnostics and results not communicated; cancelled procedures without prompt rebooking; difficulty contacting secretaries; lack of clarity on waiting-list position.
- Discharge delays (ward waiting for pharmacy meds).
- Patient Transport failures leading to missed appointments and risk of discharge back to GP as Did Not Attend, despite no-fault on the patient.

Patient quotes

- "Stroke 2 years ago, still waiting for tests to find out why."
- "MRI 3 weeks ago, no results to patient or GP; doesn't know who to contact."

- “Urgent carcinoma surgery cancelled; pacemaker now fitted; needs re-scheduling and prioritisation.”
 - “Major hip infection—awaiting second-stage revision; cannot get a date; severe impact at home.”
 - “Waited 4+ hours for discharge meds—pharmacy bottleneck.”
 - “Patient Transport didn’t turn up twice; now being referred back to GP for ‘missed’ appointments.”
3. **Mental health & social care support gaps (crisis pathway, coordination, CHC, ADHD/meds)**
- **Expectation vs. reality** in crisis care (promised psychiatrist assessment; seen by nurse instead).
 - **Lack of continuity** and unclear **care coordination**: no care plan, no named coordinator; removal of social worker despite ongoing needs.
 - **Continuing Healthcare (CHC)** hours reduced with **no explanation** and unclear appeal route.
 - **ADHD pathways**: difficulties with shared care, blood-pressure pre-reqs, and accessing assessments/medication; need for weekend therapy options.
 - Wider **social needs**: loneliness, language barriers, food support, transport costs—often compounding health issues.

Patient quotes:

- “A&E: told emergency psychiatrist assessment from birth to present; at Irwell Unit met a nurse, wish they wouldn’t tell people that.”
- “Formal complaint: no care plan; no named coordinator; unresolved housing issues; removal of allocated worker; duty calls only.”
- “CHC package cut from 40 to 20 hours—no breakdown or rationale; wants to appeal.”
- “ADHD shared care paused due to hypertension; patient struggling; wants to restart meds.”
- “Client needs weekend therapy sessions due to work; limited availability.”
- “Significant loneliness and anxiety; needs advocacy to navigate services.”

Other recurring concerns noted

- **Infant feeding support** in the community (missed tongue-tie; conflicting advice; mastitis/abscess).
- **Immunisation eligibility confusion** (shingles, COVID booster).
- **Information governance/records** (deceased relative’s records access; SAR turnaround and usability).
- **NHS 111 delays** and poor communication.
- **Primary care medication issues** (formulations too large; mix-ups).

Issues found and highlighted

Improving patient experience in Podiatry services

Issue Identified: Healthwatch Bury was contacted by an older resident (name anonymised) who reported a poor experience with the NHS podiatry service following a GP referral.

The patient, who has Type 1 diabetes, osteoarthritis, bunions and long-term mobility issues, felt that:

- The clinician did not show empathy or compassion.
- She received minimal treatment despite significant pain.
- She was told “we can do nothing for osteoarthritis of the foot” with no advice on pain management, aids, footwear, or self-care.
- She was discharged with no support, and advised to seek private treatment, which she could not afford.
- She was concerned that other older patients might be receiving similarly inadequate care.

The patient did not wish to make a formal complaint but wanted the issues addressed constructively.

Actions Taken by Healthwatch Bury:

- Raised the concerns with PALS and the podiatry service on the patient’s behalf, outlining issues around communication, lack of support, and understanding of patient needs.
- Requested clarity on eligibility criteria, alternative pathways for complex patients, available NHS support, and plans for service improvement.
- Advocated for better communication, empathy, and patient-centred care within the podiatry team.

In response, the Northern Care Alliance service:

- Contacted the patient directly and offered a new appointment promptly which she accepted.
- Confirmed that:
 - The podiatry eligibility and exclusion criteria are under review across the Northern Care Alliance (NCA).
 - The musculoskeletal (MSK) pathway is being redesigned to align with NCA-wide standards.
 - All patient information leaflets are being updated to improve clarity and advice.

- Acknowledged the concerns about clinician empathy, confirming that this does not reflect NCA values.
- Invited the patient to become a stakeholder in future service improvements and training, ensuring patient voices shape change.

After attending the appointment on 26th November, the patient contacted Healthwatch with the following updates:

She received professional, empathetic and informative care from the clinician (name anonymised), whom she praised for politeness, clarity, and a patient-centred approach.

Her feet were examined thoroughly, and she was provided with:

Clear explanation of why she currently falls into the “low-risk diabetic” category.

Advice regarding future concerns and when to seek help.

She accepted discharge based on this clinical explanation and felt reassured and respected during the appointment.

Impact

- The patient received a timely follow-up appointment, addressing her immediate clinical needs.
- The podiatry service launched or accelerated real-time quality improvements including:
 - Review of eligibility criteria
 - Review of MSK pathway
 - Development of improved patient-information materials
 - Consideration of staff communication and compassion training
- The patient felt heard, supported, and valued, without needing to submit a formal complaint.
- The service agreed to involve the patient in ongoing co-production and training, ensuring lived experience directly influences service quality.
- Healthwatch’s intervention highlighted wider systemic issues that may affect other patients, especially older people, those with diabetes, or those unable to seek private care.

Frailty Assessment Query – Summary of Issue and Resolution (for information)

During Q3, Healthwatch Bury received an enquiry from a Radcliffe councillor regarding concerns raised by local residents about frailty assessment invitations. Some individuals reported being invited for frailty reviews despite not considering themselves frail, which led to questions about:

- How residents are selected for frailty assessments
- Whether age is the primary criterion
- What preventative support is available for people identified as at risk

- Whether future changes to the criteria or support offer are planned

Healthwatch Bury contacted the relevant service leads and received a prompt and comprehensive response, which we summarised back to the councillor.

Key points from the service response from: Clare Hunter, Project Manager and Ian Trafford, Head of Programmes

- Frailty is linked to ageing but can also be influenced by long-term conditions, nutrition, activity levels, and lifestyle factors.
- GP practices use nationally recognised tools such as the Electronic Frailty Index (eFI) and the Rockwood Scale to identify people with indicators of frailty, supporting early intervention.
- Work in Bury focuses on people aged 65+, as frailty is significantly more common in this age group.
- Practices undertake a range of preventative actions, including:
 - Frailty-focused annual reviews
 - Falls risk and medication reviews
 - Strength and balance referrals
 - Vitamin D and calcium prescribing
 - Social prescribing to reduce isolation and improve activity levels
- This GP-led activity forms part of a borough-wide frailty programme involving hospitals, social care, community health, and the voluntary sector.
- A wide range of universal services are available to support people to age well in Bury, including Live Well Bury, Staying Well Teams, PCN pharmacy teams, Age UK Bury, leisure services, technology-enabled care, and community directories.

The service confirmed that Bury will continue to deliver an active, prevention-focused frailty programme aimed at improving outcomes for older people.

Outcome:

The councillor's concerns were formally addressed, accurate information was provided promptly, and the issue was resolved with no further action required.

Where we have been

| | 2025/26 to date | Apr-25 | May-25 | Jun-25 | Jul-25 | Aug-25 | Sep-25 | Oct-25 | Nov-25 | Dec-25 | Jan-26 | Feb-26 | Mar-26 |
|---|-----------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Engagement activities -total | 142 | 7 | 18 | 13 | 19 | 17 | 26 | 21 | 12 | 9 | | | |
| <i>Bury East</i> | 79 | 4 | 11 | 7 | 11 | 10 | 13 | 8 | 8 | 7 | | | |
| <i>Prestwich</i> | 14 | 0 | 1 | 0 | 4 | 3 | 2 | 4 | 0 | 0 | | | |
| <i>Bury West</i> | 11 | 1 | 3 | 1 | 2 | 1 | 2 | 1 | 0 | 0 | | | |
| <i>Bury North</i> | 11 | 1 | 3 | 1 | 1 | 1 | 1 | 3 | 0 | 0 | | | |
| <i>Whitefield</i> | 13 | 1 | 0 | 1 | 1 | 2 | 4 | 1 | 1 | 2 | | | |
| Number of public contacts | 2,151 | 45 | 406 | 209 | 234 | 318 | 436 | 259 | 206 | 38 | | | |
| Number of complaints/compliments/comments recorded | 262 | 54 | 10 | 30 | 41 | 30 | 34 | 21 | 16 | 26 | | | |
| Number of public signpostings | 157 | 54 | 10 | 30 | 41 | 30 | 34 | 21 | 16 | 26 | | | |

*Please note

the number reflects our own surveys, not those we promote, and use created by others such as Healthwatch England etc.

Some totals do not add up due to engagement activities being held online or out of borough.

Online and social media statistics

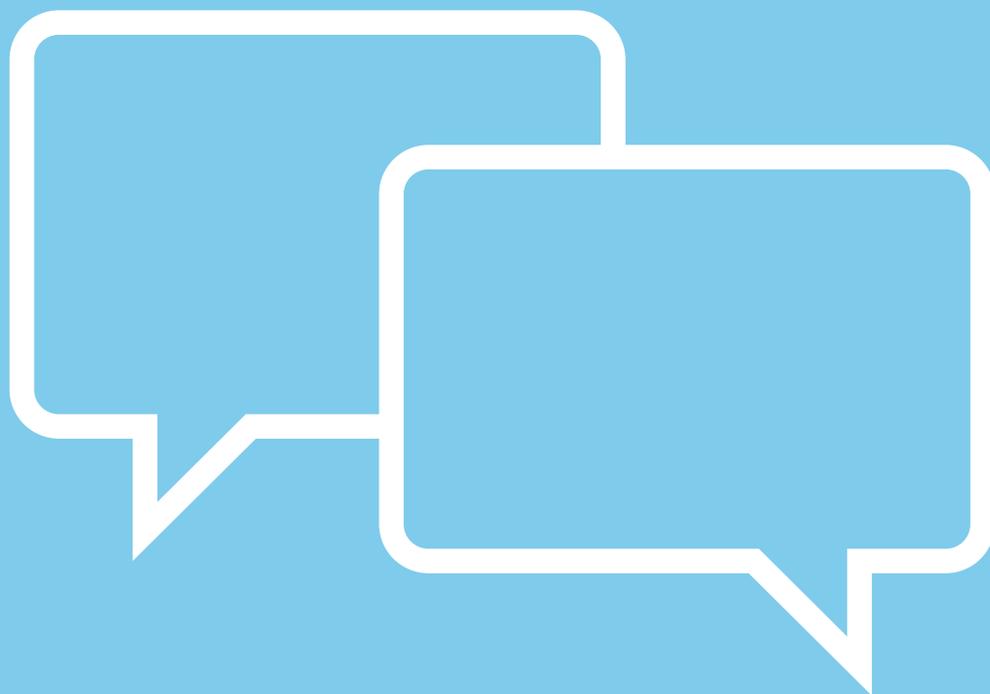
| | |
|---|--|
|  <p>X (Twitter)</p> <p>New followers: 0</p> <p>Total followers: 1,706(-7)</p> <p>Blue Sky</p> <p>Followers: 84 (+14)</p> |  <p>Website</p> <p>Visits: 10,000 (+4,531)</p> <p>Page views: 15,000 (+3,613)</p> <p>News articles: 15 (+4)</p> |
|  <p>Facebook</p> <p>Likes: 979 (+38)</p> <p>Page Views: 40K (-200)</p> <p>Page visits: 1.4K (+200)</p> <p>Posts:170 (+39)</p> <p>Total reach: 8.5K (-1.3K)</p> |  <p>Other</p> <p>Mailing list: 272</p> <p>Members: 81</p> <p>Newsletters: 2</p> |
|  <p>LinkedIn</p> <p>Followers: 159(+15)</p> <p>Posts: 16</p> <p>Impressions: 1,702(+178)</p> |  <p>Instagram</p> <p>Followers: 413 (+11)</p> <p>Accounts reached: 103 (-160)</p> <p>Views: 1.5K (-700)</p> |

Website analytics



Public engagement

Quarter 3 2025/26



Engagement events

| Event | Location | Audience | Neighbourhood | Number of contacts |
|---------------------------------------|---|--------------------------------------|---------------|--------------------|
| Whitefield Housing drop in | Victoria Youth and Community Centre, Charles Street, Whitefield | Economically disadvantaged | Whitefield | 10 |
| Drop in - St Andrews | St Andrews Church | Economically disadvantaged | Whitefield | 12 |
| Age UK Older People's Event | The Jubilee Centre | Older people | Bury East | 3 |
| HWB drop in | Greenmount Medical Centre | Older people | Bury North | 42 |
| Prostate Cancer project awareness | Holcombe Brook Tennis Club | All | Bury North | 1 |
| World Mental Health Day event | Creative Living Centre | People with mental health conditions | Prestwich | 10 |
| Tottington drop in | Tottington Medical Practice | All | Bury North | 56 |
| Enter and View visit | Grundy Day Care Centre | Older people | Bury East | 4 |
| BIG in Mental Health visit | BIG in Mental Health office | People with mental health conditions | Bury East | 19 |
| Prostate Cancer Focus Group | HWB office | Men with prostate cancer diagnosis | Bury East | 4 |
| Enter and View visit | Grundy Day Care Centre | Older people | Bury East | 5 |
| Office drop in | HWB office | All | Bury East | 1 |
| HWB drop in | Spring Lane Medical practice | All | Bury West | 16 |
| HWB drop in | Minden Medical Practice | All | Bury East | 44 |
| Maccabi Centre knit and natter ladies | Maccabi Centre | Women | Prestwich | 18 |

| | | | | |
|----------------------------------|-------------------------------------|---|------------|-----|
| Neurokinetics open day | Maccabi Centre | People with neurological conditions | Prestwich | 10 |
| Office drop in | HWB office | All | Bury East | 1 |
| Office drop in | HWB office | All | Bury East | 1 |
| Roch Valley Radio Interview | Roch Valley Radio office | All | NA | 1 |
| Circles of influence | Bury Town Hall | Children and young people | Bury East | 100 |
| Bury Older people's network | Bury Unitarian Church | Older people | Bury East | 16 |
| 1-1 interview Prostate cancer | Online | Men with prostate cancer diagnosis | NA | 1 |
| Office drop in | Healthwatch Bury office | All | Bury East | 3 |
| Meeting with Russ | Healthwatch Bury office | All | Bury East | 1 |
| 1-1 interview Prostate cancer | Online | Men with prostate cancer diagnosis | NA | 1 |
| Office drop in | Healthwatch Bury office | All | Bury East | 1 |
| Enter and View FGH A&E | Fairfield General Hospital A&E | All | Bury East | 17 |
| Breathe Easy group visit | Morrisons, Whitefield | People with long term conditions (COPD, Asthma) | Whitefield | 5 |
| Carers rights day | Bury Masonic Hall | Carers | Bury East | 45 |
| Bury Hospice engagement drop in | Bury Hospice | All | Bury East | 15 |
| Prostate Cancer focus group | Healthwatch Bury's office | Men with prostate cancer diagnosis | Bury East | 2 |
| Office drop ins | Healthwatch Bury's office | All | Bury East | 5 |
| Whitefield Housing drop in | Victoria Youth and Community Centre | Economically disadvantaged | Whitefield | 10 |
| St Michael's Winter Warmer event | St Michael's Hall | Economically disadvantaged | Whitefield | 6 |
| Prostate Cancer Focus Group | Healthwatch Bury's office | Men with prostate cancer diagnosis | Bury East | 2 |

Feedback and signposting enquiries

Feedback by service type 1st October – 31st December 2025

| Service type | Number of reviews | % of reviews | Number of people signposted | Number of complaints* |
|--|-------------------|--------------|-----------------------------|-----------------------|
| GP / Primary Care | 27 | 42.9% | 27 | 10 |
| Hospital Services (A&E, Outpatients, Inpatients, Diagnostics) | 15 | 23.8% | 15 | 7 |
| Mental Health Services | 8 | 12.7% | 08 | 3 |
| Community Health Services (Infant feeding, Continence/Stoma, | 4 | 6.3% | 4 | 0 |
| Adult Social Care / CHC | 4 | 6.3% | 4 | 1 |
| VCFSE / Welfare / Social Needs (Food bank, benefits, housing, advocacy | 8 | 12.7% | 8 | 0 |
| NHS 111 / Patient Transport | 2 | 3.2% | 2 | 1 |
| Records / Complaints Process (SARs, FOI, access issues) | 3 | 4.8% | 2 | 2 |
| Vaccinations / Screening / Immunisations | 2 | 3.2% | 2 | 0 |

Totals exceed 63 because some items fall under dual themes, but were classified under their primary service.

Primary Care (43%)

Primary care continues to generate the highest volume of feedback, driven by access issues, behaviour of non-clinical staff, medication concerns, and complex referrals. Ten items included formal complaints or requests for complaint support.

Hospital Services (24%)

Key themes included surgical delays, communication issues, diagnostic waiting times, and A&E experience. Multiple cases required PALS intervention, particularly around lack of follow-up and unresolved clinical pathways.

Mental Health (13%)

Feedback centred on crisis support, ADHD medication, CMHT coordination gaps, and care plan concerns. Three items were escalated as formal complaints.

VCFSE / Social Needs (13%)

These included food support, benefits advice, housing, loneliness, and advocacy, with most resulting in signposting.

Adult Social Care (6%)

Themes included CHC reductions, equipment, and care home issues.

Community Health Services (6%)

These included infant feeding, continence/stoma equipment, and physiotherapy.

Other categories

- Records/complaints process: included SAR issues, incorrect routing, and difficulties submitting complaints.
- NHS 111: one significant delay case.
- Vaccinations: mainly eligibility concerns (e.g., Shingles).

Case studies

Quarter 3 2025/26



Supporting a Resident to Navigate Complex NHS Systems



You said: A Bury resident (Mrs J) contacted Healthwatch Bury after experiencing prolonged delays, poor communication, and escalating anxiety while awaiting the second stage of urgent hip revision surgery. She was completely immobile, bed-bound, reliant on carers, and had developed multiple DVTs, placing her at serious clinical risk. Despite repeated attempts, she had been unable to obtain clear information or progress from hospital services.

We did:

With the resident's consent, Healthwatch Bury:

- Contacted PALS and senior hospital staff to escalate concerns
- Submitted a detailed complaint outlining clinical history, risks, and delays
- Requested urgent clarification on surgical timescales
- Sought interim support including physiotherapy and DVT management guidance
- Acted as a single point of contact to coordinate communication between departments

Outcome

Following a single enquiry from Healthwatch Bury, there was rapid and significant progress:

- The case was escalated to senior managers
- Clear communication was established with PALS
- The resident's surgery was provisionally scheduled
- A Haematology appointment was confirmed for 12 February 2026 with a named consultant
- The resident received reassurance, clarity, and renewed confidence in the system

As noted internally by Healthwatch Bury's Chief Operating Officer:

"It's amazing just how much movement there has been for this lady with one enquiry from us."

Impact

- Reduced distress and uncertainty for a vulnerable resident
- Improved coordination between orthopaedics, haematology, vascular services, and the GP
- Demonstrated the effectiveness of advocacy in unblocking system delays
- Ensured the resident is now actively progressing toward treatment

Learning

This case highlights how timely advocacy and system navigation by Healthwatch Bury can:

- Prevent residents from falling through gaps in complex NHS pathways
- Accelerate care where delays pose serious health risks
- Improve communication and accountability across services

Connecting Dementia Patients with Vital Support Services



You said: A patient visited our office with a friend and shared that she had been diagnosed with vascular dementia over a year ago. She felt that she had been left without any meaningful support since her diagnosis and didn't know where to turn for help.

We Did: While the patient was with us, we contacted the Dementia Adviser Service so she could speak directly with someone who could help. The adviser talked her through the referral process and arranged for a home visit to offer tailored support. We also contacted the patient's GP practice to check whether she was due for a dementia review and requested that they book one if it hadn't already been scheduled. We followed up to confirm that this had been arranged. To ensure the patient had access to further support, we provided her with a copy of the Healthwatch Bury Dementia Guide and information about local services and groups that could help.

Impact: The patient was able to speak directly with a dementia adviser and now has a home visit scheduled to explore the support available. Her GP has booked a dementia review, and she now has access to a range of resources to help her feel more supported and informed. This approach helped the patient feel heard and reassured.



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