

The value of listening

Healthwatch Bromley
Annual Report 2024-2025



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"The impact that local Healthwatch have is vitally important. Healthwatch are empowering their communities to share their experiences. They're changing the health and care landscape, making sure that people's views are central to making care better and tackling health inequalities."

Louise Ansari, Chief Executive at Healthwatch England



Front cover photos by Cottonbro

Message from our Chair

I am pleased to introduce the Healthwatch Bromley (HWB) annual report for 2024 – 2025, when we developed partnership working further with hospitals and other health and care service providers, voluntary organisations, Bromley Council, One Bromley, South East London Integrated Care Board (SEL ICB); articulating local residents' voices, to be heard and considered by those who provide, commission and monitor local services.

This year HWB had the full complement of 2.2 full-time equivalent staff, but this low level of staffing means we use volunteers to undertake substantial work and must concentrate on work for which we are contracted.

Our Patient Experience Officer worked with committee members and other volunteers, to collect 2,392 of our contracted annual target of 2,400 patient experiences in a wide range of health and social care provision across the borough. We published these on our website in four comprehensive quarterly reports, shared and discussed with providers and partners. Hitting this target has become progressively more difficult with very low staffing levels, shortage of volunteers, and an increase in public 'survey fatigue', possibly due to the current tendency of organisations to seek feedback on every purchase, service or delivery. We also provided information and advice to 82 residents on access to and choice of services.

HWB research projects examined provision for and the experiences of housebound people with long-term conditions, and young carers. Both were challenging and required intensive work, but extremely important in reaching seldom-heard groups. We are currently discussing the draft housebound report, its 35 detailed case studies and multiple recommendations, with a wide range of health and social care partners and will publish it as soon as these discussions are complete. As part of the young carers project our Project Officer arranged five events for carers, who rated them as very successful and participated enthusiastically. Three committee members worked closely with King's College Hospital partners on an extended project on patient transport. This work is still developing and will be fully reported shortly.

We completed eight 'Enter and View' (E&V) studies of local health and care services, mainly nursing and care homes, but unusually including a rehabilitation centre. We shared reports and recommendations with providers and incorporated their responses with those of residents, families and staff. Most providers we visited thanked us for our recommendations, and it was heartening to hear that they had been followed, often immediately, improving the residents' lives.

HWB has seven active committee members who bring local and professional knowledge and experience to planning, research, reporting, local engagement and E&V and represent HWB at many Bromley, South East London and regional meetings.

You will find further information about all the above in this report. We are grateful to HWB staff and volunteers for their commitment and dedicated work, making HWB the independent champion of Bromley health and care service users.

Helen Norris
Chair, Healthwatch Bromley

About Us

Healthwatch Bromley is your local health and social care champion.

We make sure NHS leaders and decision-makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.

Our vision

A world where we can all get the health and care we need.



Our mission

To make sure people's experiences help make health and care better.



Our values are:

- **Listening** to people and making sure their voices are heard.
- **Including** everyone in the conversation – especially those who do not always have their voices heard.
- **Analysing** different people's experiences to learn how to improve care.
- **Acting** on feedback and driving change.
- **Partnering** with care providers, government, and the voluntary sector – serving as the public's independent advocate.



Year in Review

Reaching out

2,392 people

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.



82 people

came to us for clear advice and information about topics such as accessing mental health services and managing the cost-of-living crisis.

Making a difference to care

We published

16 reports

about the improvements people would like to see in health and social care services. Our most widely read report was



Ophthalmology

This report describes a research project on ophthalmology services (OS) available to residents of the London Borough of Bromley (LBB) and lists its findings and recommendations.

Health and social care that works for you

Over the year, we were lucky to have

24 volunteers, 7 workplace students and 6 interns

outstanding volunteers who donated **2,248 hours** to make care better for our community.

We're funded by our local authority. In 2024-2025 we received

£82,000

which is the same as the previous year.



We currently have

3 staff who work 2.2 full time equivalent hours.

How we've made a difference this year

Spring	 <p>We organised and carried out 76 face-to-face patient engagement visits (12 more than the previous quarter).</p>	 <p>We formally responded to Quality Accounts for King's College Hospital and Oxleas NHS Foundation Trust, St Christopher's Hospice, and the Bromley Primary Care Network (PCN) Annual Report.</p>
Summer	 <p>Our Community Mental Health Services Report was published in August and distributed to local partners.</p>	 <p>We published three Enter & View Reports; Bromley Park, Beckenham Park and Burrell Mead. The registered managers all responded positively to our recommendations.</p>
Autumn	 <p>We supported 28 information and signposting enquiries; 11 phone calls, 11 emails, and five in-person during community engagement visits.</p>	 <p>We produced four activity sessions as part of our research study, 'Access to and use of health and social care services, by young people who care for family members in Bromley (young carers)'</p>
Winter	 <p>We shared our report, 'Access to health and social care services, for people who have a long-term condition and are housebound', with key stakeholders to discuss findings and recommendations.</p>	 <p>We conducted two Enter and View visits, at Chislehurst Neurological Rehabilitation Centre and Sundridge Court.</p>

Your voice heard at a higher level

We worked with our five neighbouring Healthwatch organisations in South East London (SEL) to ensure the experiences of Bromley people were heard and influenced decisions made about services at SEL Integrated Care System (ICS) and Integrated Care Board (ICB) level. We fed in residents' experiences to identify, shape, and develop the six SELICS priorities, the principles that underpin them and the ICS Integrated Care Strategy, and supported community engagement in these developments.

Through collaboration and shared intelligence gathered by SEL Healthwatch we brought an independent public voice to support regional decision-making, providing representation on a broad range of ICS and ICB Boards, Committees, and Groups.

Using our collective insight to transform care and reduce inequalities across SEL Insights on health and care services collected from 9,500 SEL residents through calls, emails, meetings, outreach, and engagement events were collated quarterly and shared with the ICB and ICS, enabling improvements. We provided balanced, aggregated intelligence and recommendations for improvement through our system representative, regularly reporting to the ICB Quality Directorate, the Engagement Assurance Committee, and the Integrated Care Partnership Board. HWB helped develop SEL HW web pages, bringing together key Healthwatch reports in one place to facilitate health commissioners' access to people's views, experiences, stories, and recommended solutions.

Digital inclusion We used this voice to tackle digital exclusion across SEL programmes and services through the development of a new ICS Digital Strategy, so that as technology use becomes more widespread, the digital exclusion many people face is mitigated. We championed digital inclusion and supported good practice engagement with people and communities through developing the ICS Engagement Toolkit.

Making a difference in services The SEL HW Reference Group, made up of board and committee members of SEL HW, supported procurement of the new SEL ENT services. Members of the Group sat on the procurement panel. Following mobilisation, Group members provided valuable insight into how the service was working, making recommendations to the provider for improvement. Most of these have been actioned.

We shared all Healthwatch Bromley reports and publications with Healthwatch England. Our staff and volunteers attended several training sessions and events organised and delivered by them, taking the 'Bromley voice' to national discussions.



Listening to your experiences

Services can't make improvements without hearing your views. That's why, over the last year, we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture, share feedback and help support better service delivery.

Patient Experience Programme

Through our Patient Experience Programme (PEP), we hear about the experiences of residents and people who have used health and care services in our borough.

They tell us what is working well and what could be improved allowing us to share local issues with decision makers who have the power to make changes.

Every three months we produce a report to raise awareness of patient experience and suggest how services could be improved.

Methodology



Carrying out engagement at local community hotspots such as GP practices, hospitals and libraries.



Encouraging conversations on social media and gathering online reviews.



Providing promotional materials and surveys in accessible formats.



Training volunteers to support engagement across the borough allowing us to reach a wider range of people and communities.

Healthwatch independence helps people trust our organisation and give honest feedback which they might not always share directly with local services.

Between April 2024 – March 2025, we reached out to faith groups, community centres and support groups across Bromley to hear voices of residents who might not otherwise be heard. We also continued to develop our PEP by updating our report design following feedback to improve its accessibility and ability to achieve impact.

How we use the report

Our local Healthwatch has representation across various meetings, boards and committees across the borough where we share the findings of this report.

Additional Deep Dives

This report functions as a standardised general overview of what Bromley residents have told us within the last three months. Additional deep dives relating to the different sections can be requested and are dependent on additional capacity and resource provision.

Patient Experience Programme continued....

Yearly Comparison

To judge whether experiences of health and care services are improving we compare our data throughout the year. The chart below highlights the percentage of positive feedback each service has received.

Service Type	Q1 (Apr-Jun 24)	Q2 (Jul-Sep 24)	Q3 (Oct-Dec 24)	Q4 (Jan - Mar 25)
GP	57%	58%	59%	52%
Hospital	71%	76%	79%	80%
Dentist	90%	90%	77%	92%
Pharmacy	89%	70%	69%	73%
Optician	50%	94%	85%	n/a

What does this tell us?

- A large majority of experiences are rated positive - there are no real trends.
- Positive experiences of dental services have remained around 90% this financial year, except for Q3 (77%).
- Positive experiences of pharmacy services have ranged from 89% (Q1) to 89% (Q3).
- We received only one feedback form for an optician in Q4, therefore we cannot show a fair yearly comparison. We will prioritise this service in 2025-2026.



Patient Experience Programme continued.....

GP Services

So that we can understand ongoing or emerging issues in the borough we compare the top positive and negative issues throughout the year. We have highlighted in dark pink or bright green any issues which have repeated in at least three quarters. The same issue can be a top positive and a top negative because of patient experiences of different services.

Positive

Q1	Q2	Q3	Q4
Staff attitudes	Staff attitudes	Staff attitudes	Appointment availability
Quality of treatment	Quality of treatment	Quality of treatment	Quality of treatment
Getting through on the telephone	Getting through on the telephone	Appointment availability	Staff attitudes
Quality of appointment – telephone consultation	Appointment availability	Getting through on the telephone	Getting through on the telephone
Online consultation (app/form)	Online consultation (app/form)	Quality of appointment – telephone consultation	Quality of appointment – telephone consultation

Negative

Q1	Q2	Q3	Q4
Getting through on the telephone	Getting through on the telephone	Appointment availability	Appointment availability
Appointment availability	Appointment availability	Getting through on the telephone	Getting through on the telephone
Booking appointments	Booking appointments	Booking appointments	Online consultation (app/form)
Quality of appointment – telephone consultation	Online consultation (app/form)	Management of service	Quality of appointment – telephone consultation
Quality of treatment	Quality of treatment	Staff attitudes	Quality of treatment

Hospital Services

Positive

Q1	Q2	Q3	Q4
Quality of treatment	Staff attitudes	Quality of treatment	Quality of treatment
Staff attitudes	Quality of treatment	Staff attitudes	Staff Attitudes
Waiting times (punctuality)	Appointment availability	Appointment availability	Appointment availability
Communication between services	Waiting times (punctuality)	Waiting times (punctuality)	Getting through on the telephone
Booking appointments	Communication between services	Getting through on the telephone	Waiting Times (punctuality)

Negative

Q1	Q2	Q3	Q4
Waiting times (punctuality)	Waiting times (punctuality)	Waiting times (punctuality)	Waiting Times (punctuality)
Getting through on the telephone	Getting through on the telephone	Communication between services	Communication between services
Communication between services	Appointment availability	Communication with patients	Getting through on the telephone
Booking appointments	Staff attitudes	Management of service	Appointment availability
Quality of treatment	Communication between services	Appointment availability	Quality of treatment

"Caring staff, regular updates, daily rounds are a good opportunity to speak to the doctors."

"Parking could be improved especially disabled parking."

Deep Dive One : Access to health and social care services for housebound people who have a long-term condition, Spring 2025

We produced a research study focusing on housebound residents with long-term conditions (LTCs) and their experience of accessing health and social care services. There are different definitions of 'housebound' currently used: we hope this project will assist in developing one clear, agreed, local definition.

People living with a physical and/or mental illness or injury which completely or partially restricts their ability to leave their home without the support of another person are commonly referred to as 'housebound'.

What did you tell us?

We conducted over 50 interviews and collected 35 in-depth case studies, some very detailed. We received feedback from 48 housebound residents with LTCs, and 26 unpaid carers. Research findings highlight both the positive and the more challenging experiences of residents and their carers.

Key Findings

Our objective was to review the quality of care and identify improvements which would enhance service delivery and better meet the diverse needs of service users and unpaid carers. We focused on existing services and current providers, ease of access to necessary services and the availability of health and social care information.

Positive findings include:

- Many unpaid carers and residents praised individual healthcare professionals for their kindness, patience, and willingness to listen, particularly those doctors and nurses who took the time to explain medical conditions clearly.
- Homecare services adapted well to the needs of residents, providing reliable support that helped to maintain residents' independence.
- Several unpaid carers found valuable support through voluntary organisations, which provided practical help, social opportunities, and financial advice and guidance.

Negative findings include:

- Housebound residents and unpaid carers consistently report lengthy waiting times for medical appointments, specialist referrals, and follow-up care.
- Fragmented communication between healthcare teams led to confusion, mismanagement of care, and missed opportunities for timely intervention.

The full report can be found on our website, along with responses from local partners referenced in the key findings and recommendations. We will conduct a follow-up in six months to identify which recommendations have been implemented to support the local community.

Deep Dive Two: Access to and use of health and social care services, by young people who care for family members in Bromley (young carers)

Our second research study focused on Bromley young carers and their experience of accessing health and social care services. We aimed to identify barriers or challenges this cohort faces in achieving positive health and well-being.

A young carer is someone aged 25 and under who cares for a friend or family member who, due to illness, disability, a mental health problem or an addiction, cannot cope without their support.

What did you tell us?

This report is currently in the final stages of editing – we plan to share it with local partners in June for a formal response before publication.

To gather comprehensive insights into the experiences of young carers and the individuals they care for, we employed both qualitative and quantitative research methods. These included a survey, available in both digital and paper formats to ensure accessibility for a wide range of participants.

As part of our engagement efforts, we hosted four face-to-face events in Bromley, in partnership with Bromley Well Young Carers.



"It has been a pleasure collaborating with you and your staff. I know how much hard work goes into organising these events."

Bromley Well



"Meeting young carers...they walk through the door smiling and ready to participate in various activities. I have really enjoyed every moment spent with them."

HWB Volunteer



"I was very impressed with the organisation of the young carers event: meticulously planned and resourced mainly from HW staff's own personal treasure trove of games and activities. The young people were fully engaged and having a fun break from their family responsibilities. One older attendee also told me how much he appreciated being able to sit quietly and have some thinking time to complete our survey."

HWB Committee Member



Follow up: Ophthalmology Report, Autumn/Winter 2023

In 2023, we embarked on a research project on ophthalmology services available to Bromley residents.

We produced a report which includes key findings and recommendations. Survey responses indicated that service users are broadly satisfied with the range of services available, but case studies showed more negative aspects.

Patient reports of their experience of treatment, referral and communication were often positive, but some highly negative experiences were reported, especially in the in-depth case studies.

Recommendation

- The provider of the Minor Eye Conditions Service (MECS) service reviews its availability, provides a daily service across the borough and restores MECS provision in Beckenham.

Outcome

- There is now MECS provision in Beckenham and in an additional practice in Penge. They are also hoping to have another MECS practice in Beckenham shortly.



“Very caring technician who was training. Everything was explained fully and what would happen afterwards with my results.”

Service user



“Brilliant service, very happy with the treatment received.”

Service user



“Wasn't given enough information about the appointment. Never received informational booklet that was supposed to be sent in the mail.”

Service user



“I had to ring nearer the time to see if I could have an appointment, and they did give me one four months on.”

Service user



Patient-Led Assessments of the Care Environment (PLACE)

PLACE assessments provide motivation for improvement and a clear message, directly from patients, about how the environment or services could improve.

The assessments involve local residents – called patient assessors – going into hospitals, as part of a team, to assess how the environment supports the provision of clinical care, assessing things including privacy, food, cleanliness, general building maintenance and the extent to which the environment can support the care of people with dementia or a long-term condition (LTC).

“As a Healthwatch Bromley representative, I took part in a PLACE assessment at Orpington Hospital, where we observed key aspects of the patient environment, including ward cleanliness and food quality. I was able to share feedback and offer support to King’s College Hospital NHS Foundation Trust, particularly in relation to enhancing patient experience through food and nutrition. Representing Healthwatch Bromley, I found the engagement productive and valued the open and collaborative approach.”

HWB Staff Member

“Our involvement in the PLACE process allows us, the Healthwatch Bromley team, to use our experiences from various patient engagement ventures throughout the Borough, whether individual or group, to support the PLACE team in their assigned tasks.

Also, our Enter and View activities and collaboration in Care Home assessments are effective in helping us evaluate ward conditions and patient safety. Sharing these evaluation experiences with PLACE partners helps build teamwork and identify essential aspects for improving patient conditions.”

HWB Committee Member

“As public/lay representatives who use these services we provide an external perspective when visiting and reviewing local health facilities, contributing to recommendations for improvement to the physical environment, for example improved signage (this year’s report at Kings), and other amenities/facilities.”

HWB Committee Member



Three ways we have made a difference in the community

Throughout our work we gather information about health inequalities by speaking to people whose experiences are not often heard about.

1. Getting services to involve the public

Services need to understand the benefits of hearing and using local people's views and experiences to help improve care for everyone.

We enabled people to share their feedback and encouraged them to participate in several forums, including:

- Health Innovation Network and SEL ICB joint project aiming to improve diabetes care
- King's Adult Speech and Language Therapy team consultation with patients and carers to help improve their services
- "What do you think of the service your local pharmacy is providing?" survey by Healthy Dialogues for Bromley Council's Pharmacy Needs Assessment.



2. Creating empathy by bringing experiences to life

It is important for services to see the bigger picture. Hearing about real, individual experiences and their impact on people's lives provides them with a better understanding of the problems.

We contribute to Bromley residents increasing their confidence and ability to influence the local health and care system. We continue to develop our Patient Experience Programme with the support of local partners and our advisory committee. We carried out 267 face-to-face community engagement visits (14 more than in 2023-2024), at children and family centres, community centres, GP practices, hospitals, mental health services and wellbeing cafés.



3. Improving care over time

Change takes time. We often work behind the scenes with services to raise issues and bring about change.

We carried out eight Enter and View (E&V) visits, making recommendations based on our observations and discussions with service users, family members, staff and management. We take a partnership approach with providers. We share draft reports before publication, include providers' responses, and follow up each one to check progress and offer support to meet our recommendations.



A summary of other outcomes we achieved this year is included in the Statutory Statements section at the end of this report.



Hearing from all communities

Over the past year, we have worked hard to engage people from all communities in Bromley. We believe it is important to reach the communities we hear from least frequently to gather their feedback, hear their voices and make sure that local services meet their needs.

This year we have reached different communities by:

- Contacting local organisations and establishing new relationships within the community, e.g. children and family centres, faith groups and wellbeing cafes.
- Sharing our findings with local council and NHS leaders, third sector organisations and the South East London Integrated Care Board (SEL ICB)

Photo by Pavel Danilyuk

Enter and View Programme

One of our statutory functions is to carry out Enter and View (E&V) visits to health and social care services in the borough.

The Health and Social Care Act (2012) mandates local Healthwatch Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

E&V visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of best practice from the perspective of people who experience the service first hand.



We carried out eight E & V visits

We developed our methods, to ensure safety and infection control, and liaised with our colleagues at Bromley Council and our committee members to identify health and social care services suitable for the programme. We visited the following:

- Bromley Park (Nellsar Ltd)
- Burrell Mead (Westwood housing Association)
- Chislehurst Neurological Rehabilitation Centre (Active Care Group)
- KYN Bickley (KYN Bickley Ltd)
- Nettlestead (Nightingale Retirement Care Ltd)
- Prince George Duke of Kent Court (Royal Masonic Benevolent Institution Care Company)
- St. Cecilia's (Leonard Cheshire Group)
- Sundridge Court (Aria Care)



Left photo by Pixabay, Right photo by Sam Lin

What our Authorised Representatives had to say

Our staff and volunteers are required to undertake appropriate training and DBS checks to become Enter and View Authorised Representatives (ARs). The main aim of these visits is to allow our team to obtain feedback from service users and their families, staff and management to obtain a full picture of the facility and produce a comprehensive report with recommendations for improvement.



“Visiting a variety of nursing and residential care homes has been a fascinating experience. The variety and difference in the care regimes and facilities has been staggering in that some small homes managed to provide a lively care environment engaging residents fully whereas some others with much more elaborate facilities were struggling to connect meaningfully with their frail residents. This did not seem to support the view that you always get what you pay for (most of the homes visited were offering care funded by the service users or their families.)

The role of HW volunteers to represent the public perspective is important casting light on basic service provision sometimes missed when families are looking for a residential or nursing care place.”

HWB Authorised Representative

“There is a sense of satisfaction knowing that when we carry out our “Enter & View” performance reviews within the care sector, they position us as “agents of change” playing a crucial role improving residents’ well-being. Whether it be a care or nursing home, the overall review process helps us guide the sector to continuously strive for excellence in residents’ care and quality of life. We all look back knowing – “We made a difference”.

HWB Authorised Representative

“E&Vs are an important part of HWB’s remit. They allow us to view care facilities of different varieties. They give us an overview of how well the facility is run, the condition of the building and how residents are treated, and if necessary, what is in place for it to be dementia friendly. They give a voice to patients, carers and staff. We can make observations and recommendations for improvements. I enjoy taking part in them and have always found a warm welcome awaits us.

HWB Authorised Representative



Photos left to right by Andrea Piacquadio, Rdne, and Ivan Samkov

Reporting our findings

Each service provider is required to respond to a Healthwatch E&V report and its recommendations within 20 days of receiving the report (exceptionally, up to 30). They should describe actions to be taken, or reasons for no action. An example is described below.



Burrell Mead Residential Home, July 2024

Burrell Mead is a residential home providing care and support to elderly residents, the majority of whom have a long-term condition (LTC) and are living with dementia. Based on the analysis of feedback obtained, we made nine recommendations which prioritised safety and wellbeing.

Recommendation: We recommend creating a designated ambulance bay close to the main entrance of the care home to enable quick and easy access for emergency services. This can be clearly marked with appropriate signage to avoid obstruction by other vehicles.

Response: Allocation of a designated “Emergency Services” bay in the car park.

Recommendation: We recommend installing dementia-friendly clocks throughout the home. These clocks should have large, clear numerals, a simple design, and display both the time and date prominently. Consider using clocks that differentiate between day and night to assist residents in maintaining orientation.

Response: Dementia-friendly clocks have been purchased; one is in the lounge, and it has been offered to all residents.

Recommendation: We advise management to install clear, easily recognisable signage on all bathroom doors, using universally recognised symbols and bold, contrasting colours to make the signs easily visible and understood by all residents, including those with cognitive impairments. This will help residents locate the bathrooms more easily and independently.

Response: Additional signage has been put around the home, including all toilets/bathrooms.



“I am happy with the services, and I feel that they listen to my concerns.”

Resident



“Very happy with the services provided.”

Family member



“Residents here are being given the best quality of care, treated with dignity and respect.”

Staff member





Advice and Information

If you feel lost and don't know where to turn, Healthwatch is here for you. In times of worry or stress, we can provide confidential support and free information to help you understand your options and get the help you need. Whether it's finding an NHS dentist, making a complaint or choosing a good care home for a loved one – you can count on us.

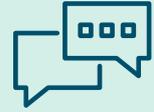
This year we've helped people by:

- Providing up-to-date information people can trust
- Helping people access the services they need, including registering with a GP practice
- Supporting people to look after their health and wellbeing.

Listening to people's issues and providing appropriate support

Here are seven examples of how we helped residents with queries last year.

It is important that we listen to people's complaints and provide appropriate information and signposting.



We received an email from a resident experiencing issues changing their marital name on their records following divorce. Their GP practice manager initially said it was not possible. We discussed this further with the practice, and with our Primary Care lead at SEL ICB. The concerns were addressed, the information was provided to the resident explaining the issues and the matter was resolved the following week. The resident sent thanks for our support.

Another resident called to make a complaint about trying to get a hospital appointment, which had been delayed several times. The most recent cancellation was due to a doctor going on annual leave – the appointment was pushed back a further three months. Due to their health condition, they didn't feel safe doing things on their own. We spoke with the hospital's engagement team and they dealt with the matter immediately. They confirmed that a new appointment had been arranged for the patient.

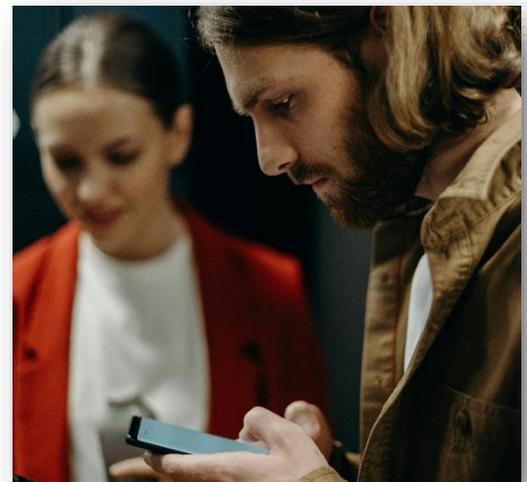


How to make a complaint

Sometimes a complaint can be exhausting, mentally and physically. Having an advocate means someone is there to support you.



We were contacted by a resident with multiple health issues, including a long-term brain injury, for support filing a complaint about a service provider. Due to their condition, they are functionally disabled and it took them four months to come back to us after we had initially signposted them to Advocacy for All (AfA). We managed to speak to them, and they are now getting the support that they need from an advocate.



Responding to residents' queries

We provide information and signpost residents to local services and community organisations. People can access advice and information online, by phone or face-to-face.



A resident made a complaint about their GP practice. Their child displays complex mental health and behavioural challenges and is constantly getting excluded from school and moved to other provisions for respite. They were looking for an ADHD referral – the GP said they do not do ADHD referrals and only the school does. However, the school said the GP should do the ADHD referral as it is medical.

We followed this complaint up with the GP practice and with the South East London Integrated Care Board (SEL ICB). They provided further information to share with the resident and discuss further with the GP practice – for ADHD neurodevelopment assessments with Bromley Healthcare the referral should come from a school or education setting. The SEL ICB also provided a link to the Bromley Healthcare criteria page. The resident thanked us for our support and for the information provided.



We had an email enquiry from a resident regarding their dissatisfaction with a service provider. They sent detailed information about their poor experience with the service and wished to make a complaint. They also asked where to send old hearing aids, to be recycled or reused, as their GP practice and Croydon Hospital wouldn't accept them.

We provided information and signposted them to Hearing Aid Recycling. In Bromley, all Francis Chappell Funeral Directors have a drop-off point, as do Doves and Steven Mears.



Holding a service accountable

Sometimes a complaint can be hard to deal with and a long process. We provide information and guidance to ensure a patient's request is acknowledged by the service provider.



A resident discussed their experience during their daughter's birth. They made a complaint at the time and received a formal response, which included safety recommendations. They asked Healthwatch Bromley to follow up this report and find out if any of the recommendations had been actioned. They wished to try to prevent any other patient going through the same experience.

We contacted the appropriate PALS team and Head of Complaints to discuss further – they sent a response to the resident acknowledging the recommendations and detailing consequent actions they have implemented.



Prioritising patient safety

It's essential that people have access to care and that services make any appropriate adjustments to ensure patient safety.



An elderly resident called us when they needed support arranging patient transport. In the past, there had been issues with providing the appropriate mobility equipment and a stretcher. The resident cannot walk or travel to an appointment on their own. They also have an issue with their voice and struggle to talk on the telephone.

We called Patient Transport, on the resident's behalf, to explain the patient's condition and that they needed to arrange an appointment. The patient gave us consent to share their details. We confirmed the booking and everything was arranged to ensure patient safety.





Volunteering

HWB is supported by a team of amazing volunteers who are at the heart of what we do. Thanks to their efforts in the community, we are able to understand what is working well and what needs improving.

This year our volunteers:

- Carried out Enter and View (E&V) visits
- Engaged with the local community
- Supported communities to share their experiences of accessing health and social care services
- Reviewed and commented on service specifications
- Acted as representatives at meetings with local partners
- Supported data analysis and writing of research project reports
- Developed our social media presence, including a bi-monthly newsletter.

Photo by Healthwatch Bromley



"My internship experience with both HWB and HWL has been the most valuable and rewarding experience for the past six months. This experience gave me the chance to engage and chat with people across the communities of Bromley and Lewisham. It gave me the opportunity to hear their opinions about their health and social care services, on which their opinions resonate with how I view certain service providers, especially in Bromley."



"It has been a valuable experience at a fastmoving pace chatting with people across the community. I enjoy and admire the team alliance in achieving a common goal. The joint effort and friendship I have experienced with staff and volunteers has helped me navigate the corridors of Orpington and Princess Royal hospitals. Volunteering has given me the opportunity to explore and know more about the borough. I learn from every assignment and look forward to meeting different people in the community."



Do you feel inspired?

We are always on the lookout for new volunteers, so please get in touch today.

 www.healthwatchbromley.co.uk/volunteer

 **0203 886 0752**

 info@healthwatchbromley.co.uk



“Interning with Healthwatch has been a deeply rewarding experience. It has given me the opportunity to engage with individuals from all walks of life while contributing to the enhancement of healthcare through the power of patient voices. I’m grateful to be part of such a supportive and committed team—working with Takudzwa, Charlotte, and Emmanuel has helped me develop the confidence and sensitivity needed to approach conversations thoughtfully. Their guidance has made each interaction more meaningful. Being part of this compassionate and hardworking group has strengthened my understanding of the local community and the vital services that support it.”



“The involvement activities have taken me to places I did not know existed and brought me in contact with a range of different residents in Bromley. I learned a lot from them and from organisations which exhibited at events. It has been a pleasure to represent HWB as a volunteer and to see what a respected organisation it has become. Our volunteer role is clearly valued by the community, and we can complete the quality circle in a way that helps service providers gain feedback to improve their services.”



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"My experience with Healthwatch Bromley has been incredibly fulfilling and enriching. I am genuinely happy to be part of an organization that significantly impacts the community. Through my involvement, I have gained extensive experience engaging with patients and addressing their concerns within NHS services. This has broadened my understanding of the healthcare system and honed my skills in patient interaction and support..

One of the most rewarding aspects of my role has been learning how to deal with dementia patients effectively. This has been made possible by the exceptional training and guidance provided by the super team."



"During my internship with Healthwatch Bromley, I gained invaluable experience in public health advocacy and community engagement. I assisted in gathering and analysing feedback from local residents about their experiences with health and social care services, contributing to reports that potentially influenced service improvements. Additionally, I supported projects aimed at amplifying the voices of underrepresented communities, deepening my understanding of health disparities and the importance of accessible, patient-centred care. These projects allowed me to practically apply my academic knowledge in data analysis and report writing."



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Finance and future priorities

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act (2012).

Our income and expenditure*

Income		Expenditure	
Annual grant from Government	£82,000	Expenditure on pay	£62,000
Additional income	£0	Non-pay expenditure	£8,000
		Office and management fees	£12,000
Total income	£82,000	Total expenditure	£82,000

*These figures are unaudited.

ICS Funding

Healthwatch Bromley received no funding from the Integrated Care System (ICS). However, ICS funding goes into a Healthwatch South East London regional post hosted by Healthwatch Greenwich. Please refer to their report for further information.

ICS funding

Healthwatch services also receive funding from the Integrated Care System (ICS) to support new areas of collaborative work at this level, including:

Purpose of ICS funding	Amount
	£0
	£0
	£0

Next steps

Over the next year, we will keep engaging with people across Bromley, especially under-represented groups, and pass on their views and experiences of health and social care services to those with the power to make positive changes.

We will address the issues which concern residents the most, including access to GP appointments, waiting times and referrals.

We will work with partners and our local ICS to help develop an NHS culture where, at every level, staff listen to and learn from patients, to make care better.

Out top three priorities for 2025–2026 are:

1. Access to health and social care services
2. Children and young people
3. Communities from which we hear least often.





Statutory Statements

During this year, Healthwatch Bromley operated from Waldram Place SE23 2LB for the first three months and then moved to The Albany SE8 4AG.

Contract holding organisation:

**Your Voice in Health and Social Care (YVHSC),
45 St Mary's Road, London E5 5RG**

Healthwatch Bromley uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Involvement of volunteers and lay people in our governance and decision-making

Our Healthwatch Committee consists of seven local volunteer members who provide direction, oversight and scrutiny to our activities. They ensure that decisions about priority areas of work reflect the concerns and interests of our diverse local community. In 2024-2025 the Committee met six times and decided on matters such as quality account responses, service specifications, Enter and View, patient engagement, representation and research projects. We involve local people and partners in deciding our work priorities.

Methods and systems used across the year to obtain people's experiences

We use a wide range of approaches to give as many people as possible the opportunity to provide us with insight into their experiences of using services. During 2024-2025 we have been available by phone and email, provided a webform on our website and through social media, and attended many meetings of community groups and forums. We make this annual report available as widely as possible, by publishing it on our website and social media platforms and distributing it to local partners.

Responses to recommendations

There were no issues or recommendations escalated by us to Healthwatch England, so no resulting reviews or investigations.

Taking people's experiences to decision-makers

We pass on the insight and experiences shared with us to people who can make decisions about health and care services. In our local authority area, for example we take information to a broad range of governance meetings across Bromley.

We also take insight and experiences to decision-makers in the South East London Integrated Care System (SEL ICS). For example, we produce an integrated report of all SEL Healthwatch quarterly reports, which is shared widely. In addition, we provide updates on Healthwatch activity to the Integrated Care Board (ICB) Engagement Assurance Committee and to the System and Concerns Group. Our SEL Healthwatch Reference Group has influenced the Digital Strategy and the Anchor System Programme engagement. We also share our data with Healthwatch England to help address health and care issues at a national level.

Enter and view (E&V)

This year, we completed **eight** Enter and View visits and **two** research projects.

Location	Reason for visit	What we did as a result
Bromley Park (Nellsar Ltd), Beckenham	A specialist nursing and dementia care home.	13 recommendations were made and we received a formal response from the registered manager.
Burrell Mead (Westwood Housing Association), West Wickham	A not-for-profit organisation – they “own their own buildings and residents’ fees are channelled directly into providing the best care possible at an affordable rate”.	Nine recommendations made and we received a formal response from the registered manager.
KYN Bickley, Bickley	The home provides residential and nursing care, dementia care, palliative care, and respite care.	Ten recommendations made. We have not received a formal response from the registered manager, despite multiple attempts.
St Cecilia’s (Leonard Cheshire Group), Bromley	Provides specialised care and support for adults with physical disabilities and mild learning disabilities, addressing their individual needs.	Eight recommendations were made and we received a formal response from the registered manager.
Prince George Duke of Kent Court (Royal Masonic Benevolent Institution Care Company), Chislehurst	Provides residential care, nursing, and residential dementia support.	Eight recommendations were made and we received a formal response from the registered manager.
Nettlestead (Nightingale Retirement Care Ltd), Bromley	A family-owned care home that provides long term residential, respite and transitional care.	15 recommendations were made and we received a formal response from the registered manager.
Chislehurst Neurological Rehabilitation Centre (Active Neuro Limited), Chislehurst	Provides specialist post-acute rehabilitation, as well as management of long-term neurological conditions to adults over the age of 18	The report was shared with the manager in May 2025.
Sundridge Court (Aria Care), Bromley	A nursing home that offers residential, nursing, and dementia care for up to 30 elderly residents.	11 recommendations were made and the manager was sent the report in March 2025.

Research projects

Title	Outcomes achieved
Access to health and social care services, for people who have a long-term condition and are housebound	A first draft of the report was sent to key stakeholders in April 2025 for responses. We arranged telephone calls to discuss the findings and recommendations. The report will be published in June 2025 and distributed widely.
Access to and use of health and social care services, by young people who care for family members in Bromley (young carers)	A first draft of the report is being finalised prior to sharing with key stakeholders in June 2025.

Representation

We attended many key strategic and operational meetings in 2024-2025 where we represented the voices of Bromley residents, encouraged public involvement and shared our intelligence.

Examples of meetings where we presented the patient voice:

- Asylum Seekers and Refugees Health Group
- Bromley Health and Wellbeing Centre Project Group
- Bromley Healthcare - Lived Experience Advisory Group (LEAG)
- Bromley Healthcare / One Bromley – South East London (SEL) Engagement Practitioners Network Meeting
- Bromley Safeguarding Adults Board (BSAB)
- Bromley Health and Wellbeing Board (HWBB)
- Bromley Health Scrutiny Sub-Committee
- Bromley Primary Care Oversight Group
- Dental Transformation Group
- Emotionally Based School Avoidance Working Party (EBSA)
- Joint Strategic Needs Assessment Group (JSNA)
- King's College Hospital Patient Experience Committee
- King's College Hospital Mental Health Advisory Group
- London Borough of Bromley Care Home Forum
- London Care Record Project Board
- One Bromley Communication and Engagement Sub-Group
- One Bromley Local Care Partnership Board
- Oxleas NHS Foundation Trust and SEL Healthwatch services
- Pharmaceutical Needs Assessment Steering Group
- SEL Chief Officers Healthwatch services
- SEL Women's and Girls' Health Network
- SEL Healthwatch Patient Reference Group
- Voluntary Sector Strategic Network (VSSN)



Appendix



Demographics – PE Programme

Gender	No of Reviews
Man(including trans man)	499
Woman (including trans woman)	1,154
Non- binary	2
Other	3
Prefer not to say	734
Total	2,392

Age	No of Reviews
Under 18	9
18-24	24
25-34	191
35-44	249
45-54	197
55-64	194
65-74	286
75-84	327
85+	96
Prefer not to say	810
Not provided	9
Total	2,392

Ethnicity	No of Reviews
British / English / Northern Irish / Scottish / Welsh	1,184
Any other white background	100
Bangladeshi	3
Asian British	6
Chinese	7
Indian	26
Pakistani	4
Any other Asian background/Asian British background	51
Asian and White	8
African	43
Caribbean	43
Any other Black / Black British background	47
Black African and White	5
Black Caribbean and White	7
Arab	1
Any other Mixed/Multiple ethnic group	27
Prefer not to say/ do not answer	830
Total	2,392

Demographics – PE Programme

Sexual Orientation	No of Reviews
Asexual	37
Bisexual	15
Gay man	10
Heterosexual (straight)	1,347
Lesbian / Gay woman	5
Pansexual	3
Prefer to self-describe	10
Not known	1
Prefer not to say/ do not answer	964
Total	2,392

Long-term condition	No of Reviews
Yes	735
No	753
Not known	29
Prefer not to say/ do not answer	875
Total	2,392

Unpaid Carer	No of Reviews
Yes	164
No	1,145
Prefer not to say/ do not answer	1,083
Total	2,392

Employment status	No of Reviews
In unpaid voluntary work only	25
Not in Employment & Unable to Work	98
Not in Employment / not actively seeking work – retired	636
Not in Employment (seeking work)	35
Not in Employment (student)	13
Paid: 16 or more hours/week	503
Paid: Less than 16 hours/week	66
On maternity leave	51
Prefer not to say/ do not answer	965
Total	2,392

Disability	No of Reviews
Yes	311
No	1,162
Not known	16
Prefer not to say/ do not answer	903
Total	2,392

Demographics – PE Programme

Religion	No of Reviews
Buddhist	6
Christianity	833
Hindu	20
Sikh	21
Jewish	2
Muslim	27
Spiritualism	26
Other religion	22
No religion	360
Prefer not to say/ do not answer	1,075
Total	2,392

Pregnancy	No of Reviews
Currently pregnant	37
Currently breastfeeding	49
Given birth in last 26 wks	48
Not known	14
Not relevant	1,136
No	125
Prefer not to say/ do not answer	983
Total	2,392

Area of the borough (Ward)	No of Reviews
Beckenham Town & Copers Cope	149
Bickley & Sundridge	35
Biggin Hill	104
Bromley Common & Holwood	126
Bromley Town	126
Chelsfield	40
Chislehurst	53
Clock House	9
Crystal Palace & Anerley	12
Darwin	4
Farnborough & Crofton	18
Hayes & Coney Hall	48
Kelsey & Eden Park	12
Mottingham	75
Orpington	290
Penge & Cator	23
Petts Wood & Knoll	45
Plaistow	6
Shortlands & Park Langley	22
St Mary Cray	41
St Paul's Cray	54
West Wickham	100
Out Of Borough	164
Prefer not to say/ do not answer	836
Total	2,392

Healthwatch Bromley
The Albany
Douglas Way
SE8 4AG

www.healthwatchbromley.co.uk

t: 020 3886 0752

e: info@healthwatchbromley.co.uk

✂ @HWBromley

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 [healthwatch-bromley-09ba67229](https://www.linkedin.com/company/healthwatch-bromley-09ba67229)