



healthwatch
Kirklees

healthwatch
Calderdale

Annual report 2025/26



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Message from our Chair

As Chair of the Board of Trustees, I recognise that this has been a year of both challenge and progress for Healthwatch Kirklees and Healthwatch Calderdale. Despite continued pressures across health and social care services, we have remained committed to ensuring local people's voices are heard through independent insights, trusted community engagement and strong governance.

The Board has also considered the future of independent patient and public voice nationally following the Dash Review and anticipated legislative changes, which have created uncertainty around the future role of Healthwatch organisations. Throughout this period, protecting our independence and ensuring local people's voices continue to be heard has remained a key priority.

In response to this changing environment, we have continued to strengthen and diversify the organisation to ensure it remains sustainable, relevant and community focused for the future. This has included the development of Veera – Voice, Engagement, Empower, Research and Action – our independent community insight organisation. Veera reflects both our expertise and our wider charitable purpose, recognising that people's wellbeing is shaped by far more than health and social care services alone.

People's lives are shaped by many interconnected issues beyond health and care. Our future direction reflects the importance of listening to communities in a more holistic way, particularly seldom heard groups whose voices are often missing from decision making.

Throughout this period of change, the Board has remained focused on organisation resilience, wellbeing, sustainability and protecting our independence and values. I would like to thank our staff, volunteers, trustees and the many residents who continue to share their experiences with us. As we look ahead, we're committed to listening to people, amplifying their voices, and using independent insights to improve lives and strengthen communities.

–Melvyn Ingleson, Chair, Healthwatch Kirklees and Healthwatch Calderdale



Our year in numbers

In 2025/26, we supported more than 4,793 people to share their experiences and access information about health and social care across Kirklees and Calderdale.

Our team of 11 staff and 25 volunteers worked with local people to ensure their voices were heard and their experiences helped shape improvements.

Listening to Local People

A total of 4,506 people shared their experience of health and social care services with us. Their feedback helped us identify what was working well, highlight areas for improvement and influence positive change across local services.

Providing Advice and Information

We supported 337 people with advice and information, helping them better understand health and care services and access additional support where needed. This included information about complaints processes, advocacy services and navigating care pathways.

Driving Improvement

Throughout the year, we published 15 reports exploring people's experiences and priorities. Topics included digital access to GP services, Pharmacy First, community equipment services, and the experiences of trans and non-binary people accessing GP care.

Our Reach

Enquiries received

Kirklees: 1,944

Calderdale: 995

People signposted to additional support

Kirklees: 208

Calderdale: 129

Our work is funded by Kirklees Council and Calderdale Council.

If you would like to see an overview of the feedback that we have collected, you can find all the information on our

[Healthwatch Kirklees & Healthwatch Calderdale dashboard](#),



Trans and Non-binary People's Experiences of GP Care

Healthwatch Kirklees and Healthwatch Calderdale explored experiences of trans and non-binary people accessing GP services across both localities. The project was developed as part of a national [Healthwatch England program](#). Through surveys and community engagement, people shared a wide range of experiences.

While some described supportive and respectful care, many highlighted challenges, including poor understanding of trans healthcare, communication difficulties, concerns around confidentiality, and inconsistent experiences when accessing appointments and referrals.

“They were respectful but clearly didn’t know how to help – I had to explain what to do.”

A clear message from the feedback was that small actions can make a big difference. Using correct names and pronouns, showing understanding, and creating welcoming environments helped people feel safer and more confident when accessing care.

“It wasn’t clear who to speak to, and I didn’t want to have that conversation in front of a queue of people.”

The findings were shared with NHS and GP managers to improve services across primary care. The Senior Primary Care Manager from the West Yorkshire Integrated Care Board responded to our report, stating that they have planned actions such as annual training, visible inclusion statements, named GP leads for gender-affirming care, mapping and peer support, as well as monitoring patient satisfaction.

[Check out the full report on our website:
www.healthwatchkirkleesandcalderdale.com/reports/](http://www.healthwatchkirkleesandcalderdale.com/reports/)



Digital access to GP services

Healthwatch Kirklees and Healthwatch Calderdale explored people's experiences of accessing GP services digitally, including appointment systems, websites, apps and telephone access. The project aimed to better understand how changes in primary care are affecting local people and whether digital systems are working for everyone.

Many people told us that online services can be convenient, helping them access support more quickly and manage appointments more easily. However, the project also highlighted significant barriers for some residents, particularly older people, disabled people, those with limited digital skills, and people without reliable internet access or suitable devices.

A common theme was frustration around complicated systems, difficulties in contacting practices, and confusion about how to access the right support. Some people also shared concerns that increasing reliance on digital access risks excluding those who are already more vulnerable or less confident using technology.

Around 7% of people said they lacked a device or reliable internet, which meant they were digitally excluded altogether. This group included more women, carers and people on low incomes.

Alongside the challenges, the report identifies examples of good practice where GP practices were providing flexible access options, clear communication and support for patients who need alternatives to digital systems.

"I think it's a really good initiative. I've never felt more in control of my health..."

The findings were shared with NHS and primary care leaders to help improve accessibility, reduce digital exclusion and ensure that changes to GP services continue to meet the needs of all communities.

[Check out the full report on our website:](http://www.healthwatchkirkleesandcalderdale.com/reports/)
www.healthwatchkirkleesandcalderdale.com/reports/



Healthy Working Life – research and mystery shopping

Healthwatch Kirklees carried out research and mystery shopping to explore how accessible and supportive local services are for people experiencing health issues while working and finding work.

“I felt like they didn’t want to continue the conversation that they deemed out of their remit and was handed an out of date postcard with information as a way to dismiss me and end the conversation”

The project looked at how easy it is for people to find information, access support and understand the services available to help them maintain a healthy working life. Through mystery shopping and community feedback, we identified both positive and negative experiences and areas where people faced confusion, delays, or difficulties navigating support.

“The conversation was extremely informative; they had listened to the details I gave about the persona and discussed how they could support with anxiety, volunteering, confidence building as well as support with childcare to overcome barriers.”

A key theme from the work was the importance of clear communication, joined-up services and accessible information, particularly for people managing long-term health conditions or balancing work with caring responsibilities.

“Very unhelpful and no progression, no facility for general enquiries. Difficult to navigate, no options or signposting on website very poor.”

[Check out the full report on our website:
www.healthwatchkirkleesandcalderdale.com/
reports/](http://www.healthwatchkirkleesandcalderdale.com/reports/)



Pharmacy First: What people told us

Healthwatch Kirklees and Healthwatch Calderdale explored local people's experiences and awareness of the Pharmacy First service, which aims to help people access advice and treatment for common conditions through community pharmacies.

Many people who had used the service spoke positively about the convenience, speed and accessibility of receiving support without needing a GP appointment. Community pharmacies were often seen as approachable and easy to access, with participants valuing the knowledge and professionalism of pharmacy staff.

Almost half of participants (44%) had not heard of the Pharmacy First service.

However, the project also highlighted that awareness of the service remains mixed. Many people were unsure about what pharmacies can help with or when Pharmacy First should be used. Some participants also reported inconsistent experiences between pharmacies and confusion around referrals, privacy and follow-up care.

Over half of respondents (53%) did not need to use another urgent care service after receiving advice from Pharmacy First. This suggests the service is effective when utilised.

The findings highlighted the important role community pharmacies can play in improving access to healthcare, while also identifying opportunities to improve public awareness, communication and consistency across services.

The report was shared with NHS and pharmacy leaders to support future development of the Pharmacy First program and help ensure people can access the right care, in the right place, at the right time.

[Check out the full report on our website:](http://www.healthwatchkirkleesandcalderdale.com/reports/)
www.healthwatchkirkleesandcalderdale.com/reports/



Medequip Feedback Report

Healthwatch Kirklees gathered feedback from people using [Medequip](#) services to better understand experiences of accessing, receiving and returning community equipment designed to support independent living at home.

Many people told us that the equipment they received made a significant difference to their daily lives, helping them feel safer, more comfortable and more independent. Participants also spoke positively about staff who were helpful, professional and responsive during difficult times.

“Have had several bits of equipment from Medequip – no issues with anything other than wear and tear on a seat cushion, which has now been replaced. Happy with the service. The equipment has kept me as independent as I can be.”

However, the report also identified challenges including delays in receiving equipment, communication difficulties, uncertainty about delivery and collection processes, and confusion about who to contact for support or repairs. For some people, these issues created additional stress at already challenging times.

“I was given a delivery slot between 9am and 4pm, which was slightly frustrating as it required me to be available for the entire day.”

The findings highlighted the importance of clear communication, timely support and reliable services in helping people remain independent and reducing pressure on wider health and care services.

The report was shared with service providers and partners to support ongoing improvements and ensure people receive the equipment and support they need as quickly and smoothly as possible.

[Check out the full report on our website: www.healthwatchkirkleesandcalderdale.com/reports/](http://www.healthwatchkirkleesandcalderdale.com/reports/)



Overgate Hospice Engagement Report

Healthwatch Calderdale worked with [Overgate Hospice](#) to gather feedback from patients, families, carers and the wider community about their experiences of hospice and end-of-life care services.

People shared overwhelmingly positive experiences of the compassion, dignity and emotional support provided by hospice staff and volunteers. Many described the care as person centred and supportive, with staff helping patients and families feel listened to and cared for during difficult times.

“The care we received for mum and the support after her passing was first class and made the most difficult time of our lives just that little bit easier.”

Alongside this positive feedback, the engagement also identified opportunities to improve awareness and understanding of hospice services within the community, including the support available for carers, families and people earlier in their care journey.

“The same concerns you’d have going to any hospice as it is a new experience.”

56% of respondents said their main concern would be not knowing what to expect, while 48% felt that a hospice is a place you go to die.

The findings highlighted the vital role that hospice services play in supporting people across Calderdale and provided valuable insights to help inform future service development and community engagement work.

[Check out the full report on our website:
www.healthwatchkirkleesandcalderdale.com/reports/](http://www.healthwatchkirkleesandcalderdale.com/reports/)



Information and signposting

This year, 337 people have reached out to us for advice, support or help finding services. These conversations also help us to understand where, and how, your care can be made better.

This year, we have helped people by:

- Providing up-to-date information that people can trust
- Helping people access the service they need
- Supporting people to look after their health
- Signposting people to additional support services

Rebuilding trust: Bernard's story

When Bernard first contacted Healthwatch Kirklees in 2021, he felt worn down by the system. Ongoing complaints with local health services had left him frustrated, unheard and distrustful after unanswered calls and slow responses.

At first, Bernard found it difficult to engage and often felt overwhelmed. But by consistently listening and following up on his concerns, we showed him we were there to support him and would keep working with him until things improved.

Supporting Bernard through multiple challenges

Bernard was dealing with several difficult situations at once. He contacted us about concerns for two brothers – one receiving palliative care and needing a place at The Kirkwood, and another who was housebound and had not received any Covid-19 vaccinations. We supported him in resolving both issues.

At the same time, Bernard was managing his own physical and mental health needs. He struggled to access neurology services and later sought support for ADHD after an initial referral was declined. We helped him through the re-referral process, which was eventually accepted in 2025.

Helping Bernard access the right support

Bernard also faced housing difficulties and wanted to move area. We referred him to the Kirklees Better Outcomes Partnership, who supported him to move to a new home and later helped him resolve issues with his pharmacy with local services.



Although initially reluctant to engage with advocacy services due to past experiences, Bernard gradually built trust with us. We referred him to Cloverleaf Advocacy to support his complaints and connected him with Community Plus to help him access local groups to improve his health and wellbeing.

Being there during difficult times

Throughout the time we have supported Bernard, his mood has fluctuated. When services failed to respond or problems arose, it often left him feeling very low.

During particularly difficult moments, we signposted him to additional support such as Samaritans and we referred him to Talking Therapies to help with his mental health.

The difference being heard can make

Bernard's story shows how easy it can be for someone to feel lost in the system when services are difficult to access and communication breaks down.

By taking the time to listen, following up on concerns and helping him connect with the right organisations, we were able to rebuild Bernard's trust and ensure he received the support he needed.

Broken heart with unbroken faith

Ruby spoke up about her and her husband's experience receiving end-of-life care at Calderdale Royal Hospital. Because she was brave and shared her experience, the hospital listened, learned from her feedback and gave staff training on how to support families with kindness and compassion through end-of-life care.

Ruby took her husband, Mathias, to Calderdale Royal Hospital after he had a stroke. While there, they did not receive a positive quality of care. Mathias' treatment and help were delayed, which made him uncomfortable and he was in pain. When doctors explained his health, they used medical words Ruby didn't understand, so she didn't know what was happening to her husband while he was in the hospital.

One night, Mathias' condition worsened and Ruby arranged for a priest to visit him. He passed away the following day. Ruby was left without any support — no one spent time with her or asked if she needed help. No one had sat down with her beforehand to explain that Mathias was nearing the end of his life or to help her understand what was happening as his health declined that night. Ruby was very upset by the lack of communication and compassion from hospital staff during such a painful time. She was also concerned that no one clearly explained what to expect or why her husband was being treated the way he was.

Ruby didn't want anyone else to go through what she had experienced, so she contacted Healthwatch Kirklees to share her concerns. Healthwatch Kirklees spoke to the hospital and set up a meeting where Ruby could tell her story and get the answers she needed. At the meeting, the hospital listened to Ruby, understood what she went through and apologised. They then carried out a formal investigation and worked to make positive improvements based on her experience.

Staff working with end-of-life patients and their family members have now received additional support to ensure improvements for future patients and visitors, including providing refreshments, a listening ear and compassionate conversations. Staff have now been trained to ask relatives what they would prefer to happen in situations when the patient's health deteriorates.

Because Ruby spoke up about her and her husband's experience, changes have been made. Now, families can get better support, which also helps patients feel reassured that their loved ones are treated with kindness. Staff have also received training, which improves the care they give and helps them feel more confident and supported when dealing with difficult situations.



Calderdale, Kirklees & Wakefield Maternity & Neonatal Partnership (CKWMNVP)

The CKWMNVP amplifies the voices of people who have used maternity or neonatal services. Working with hospitals, communities and commissioners, MNVPs help improve services based on real feedback. This year, CKWMNVP released two reports:

[‘15 Steps for Neonatal, Pinderfields Hospital’](#)

Working alongside parents, families and healthcare professionals, the MNVP completed a 15 Steps review of the Neonatal Unit at Pinderfields Hospital. The review explored the environment, communication and overall experience of care from a family’s perspective, identifying strengths and opportunities to further improve support for babies and their families.

[‘Walking in their shoes: Women’s and families experiences of maternity services across Wakefield District and North Kirklees’](#)

This project gathered the experiences of women, birthing people and families who had used maternity services across Wakefield and North Kirklees. Through engagement activities and feedback collection, the report highlighted what families valued most about their care, as well as areas where improvements could be made to pregnancy, birth and postnatal services.

Both of these reports are 15 Steps reports. 15 Steps is an NHS England quality-improvement initiative built on a simple yet powerful premise: that the first 15 steps into a clinical area can define our perception of the care, safety and compassion we are about to receive. This toolkit allows us to see services through the eyes of service users and their families, focusing on sight, sounds and feelings.

You can find out more about what the CKWMNVP are up to on their socials:



[Calderdale, Kirklees, & Wakefield Maternity & Neonatal Partnership Facebook.](#)



[CKWMNVP TikTok](#)



Enter and view

Our Enter and View program helps us understand what it is really like to use local health and care services. Through visits to care homes, hospitals, pharmacies and other services, we speak with residents, patients, families, carers and staff to learn what is working well and where improvements could be made.

These visits provide an independent view of services and help identify practical changes that can improve people's experiences across Kirklees and Calderdale.

In 2025/26, we conducted 9 Enter and View visits. These included:

- [Trinity Fold, Halifax](#)
- [Bridge House Care Home, Brighouse](#)
- [The Hawthornes Care Home, Bradford](#)
- [Greenacres Care Home, Holmfirth](#)
- [Priestly Care Home, Birstall](#)
- [Linson Court Care Home, Batley](#)
- [Aden Court Care Home, Huddersfield](#)
- [Community Diagnostic Centre, Northgate, Halifax](#)
- The Lodge, Huddersfield

Following each visit, we produce a report containing our findings and recommendations. We then revisit services approximately 8 to 12 months later to understand what actions have been taken and how services have responded to our recommendations.

This year, we trialled a new approach during our visit to The Lodge in Huddersfield. Rather than relying solely on traditional interviews and observations, we used creative activities to encourage conversations with residents about their experience and living environment.

[Check out the Enter & View reports on our website:](#)
www.healthwatchkirkleesandcalderdale.com/enter-view/



Volunteer impact

Our fantastic volunteers have given 555 hours and 45 minutes to support our work. Thanks to their dedication to improving care, we can better understand what is working and what needs improving in our community.

This year, our volunteers:

- Visited communities to promote our work
- Collected experiences and supported their communities to share their views
- Carried out Enter and View to local services to help them improve

Lucy said, "Supporting Healthwatch enables more people to have a voice in shaping their healthcare experiences. I am proud to volunteer my time to help amplify these voices and contribute to meaningful, positive change within the community."

Sheran said, "The heart of the organisation is a compassionate and truly dedicated group of people who genuinely care about people and their voices. I am made to feel part of the team, that my opinions are heard and that my 'work' is so much appreciated."

Suchi said, "What keeps me volunteering is knowing that even small contributions can make a meaningful difference to someone's day. I also really value being part of such a kind and supportive team and it feels good to be able to help where I can."

Shania said, "The most important thing that makes me stay as a volunteer is knowing that my contribution, no matter how small, makes a difference.

Every minute I spend volunteering is a minute dedicated to helping individuals and communities improve their health and wellbeing. Being able to contribute in this way is both important and highly rewarding to me. I have also remained committed to Healthwatch Kirklees for the past five years because of the support I have received from my volunteering supervisor. She is warm, understanding and regularly checks in to make sure I am doing well. This supportive environment has been a key reason for my long-term commitment to volunteering with Healthwatch Kirklees."



Working together in West Yorkshire

Alongside the other local Healthwatch organisations across West Yorkshire, we continue to work together to ensure people's experiences help shape health and care services at a regional level.

This year, we contributed community insight and public feedback to a range of West Yorkshire programs, helping decision-makers better understand the experiences, priorities and challenges facing local people. This included supporting work to develop neighbourhood health services that are designed around the needs of local communities.

We also contributed local insight to regional work exploring how people manage their own health and wellbeing. People told us that access to information, transport, cost and time can all affect their ability to stay well. These findings have helped inform future planning across West Yorkshire.

A significant milestone this year was the transition of West Yorkshire Voice, a regional network that has enabled residents, community groups and organisations to share their experiences and influence health and care decisions. Healthwatch played a key role in developing and coordinating the network, which has now been successfully embedded within the West Yorkshire Health and Care Partnership.

By working together across West Yorkshire, we can amplify local voices, identify common themes and ensure that people's experiences influence decisions that affect communities across the region.



Finance and future priorities

We received funding from our local authorities under the Health and Social Care Act 2012 to help us do our work.

Our income and expenditure

- Healthwatch Kirklees's total income was £184,500.
- Healthwatch Calderdale's total income was £102,134.
- The total income for Healthwatch Kirklees and Healthwatch Calderdale combined was £286,634.

Integrated Care System (ICS) funding

Healthwatch across Kirklees and Calderdale also receive funding from West Yorkshire Integrated Care Systems to support new areas of collaborative work.

Healthwatch Kirklees received £5,000.

Healthwatch Calderdale received £5,000.

Next steps

Over the next year, we will keep reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences.

We will also work together with partners and our local Integrated Care Systems to help develop an NHS culture where, at every level, staff strive to listen and learn from patients to make care better. Our top three priorities for the next year are:

1. We will ensure that people's voices are at the heart of NHS and social care services by providing live data and intelligence dashboards to partners.
2. We will work alongside third sector organisations to better understand their communities' views.
3. We will continue to champion the independent voice of patients and the public.

Statutory statements

Healthwatch Kirklees and Healthwatch Calderdale, Elsie Whiteley Innovation Centre, Hopwood Road, Halifax, HX1 5ER.

Healthwatch Kirklees and Healthwatch Calderdale use the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Our Healthwatch Board consists of 11 trustees who work voluntarily to provide direction, oversight and scrutiny of our activities.

Our Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Throughout 2025/26, the Board met 6 times and made decisions on matters such as strategy, engagement workplans and income generation. We ensure wider public involvement 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 ensure that as many people as possible can provide us with insights into their experience of using services.

During 2025/26, we have been available by phone, email, our website, social media and attended community groups and forums.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website, social media, email, and print.

Responses to recommendations

All providers have responded to requests for information and/or recommendations. There were no issues or recommendations escalated to us by the Healthwatch England Committee, so there were no resulting reviews or investigations.

Taking people's experiences to decision-makers

We ensure that people who can make decisions about services hear about the insights and experiences shared with us.

For example, in our local authority areas, we take information to Calderdale Care Board, Kirklees Health and Care Partnership Board, Health and Wellbeing Boards, as well as Scrutiny Panels.

We also take insights and experiences to decision-makers in the West Yorkshire Integrated Care System. For example, Finance, Investment and Performance Committees, Quality Committees and System Oversight and Assurance Groups. We also share our data with Healthwatch England to help address health and care issues at a national level.

Healthwatch representatives

Healthwatch Kirklees and Healthwatch Calderdale is represented on the Kirklees Health and Wellbeing Board and the Calderdale Health and Wellbeing Board by Stacey Appleyard.

During 2025/26 our representative has effectively carried out this role by providing people's experiences in relation to agenda items and contributing to development sessions.

Healthwatch Kirklees and Healthwatch Calderdale are represented on Kirklees Integrated Care Partnership by Stacey Appleyard and Calderdale Cares Partnership by Melvyn Ingleson.

Enter and View

Location	Reason for visit	What you did as a result
Trinity Fold, Blackwall, Halifax, West Yorkshire, HX1 2BZ	We visited to hear from people living and working at the home about their day-to-day experiences.	A report was written about the findings and recommendations, then sent to the service to comment.
Bridge House Care Home, 95 Bracken Road, Brighouse, HD6 4BQ	We aimed to gather insights from residents, visitors, and staff regarding their daily experience at home.	A report was written about the findings and recommendations, then sent to the service to comment.
The Hawthornes Care Home, Mill Lane, Birkenshaw, Bradford, BD11 2AP	We wanted to hear from people living, visiting and working at the home, about their day-to-day experiences. This visit was supportive, planned visit as social care is a priority area in our work plan.	A report was written about the findings and recommendations, then sent to the service to comment.

Greenacres Care Home, Huddersfield Road, Meltham, Holmfirth, HD9 A4G	This was a planned, supportive visit as part of our ongoing program of work in adult social care settings. This followed feedback and information from relatives or visits. We aimed to gather feedback from residents, staff, and visitors to better understand life at home and highlight what is working well and what could be improved.	A report was written about the findings and recommendations, then sent to the service to comment.
Priestly Care Home, Market Street, Birstall, West Yorkshire, WF17 9EN	This was a planned, supportive visit as part of our ongoing program of work in adult social care settings. We aimed to gather feedback from residents, staff, and visitors to better understand life at the home and highlight what is working well and what could be improved.	A report was written about the findings and recommendations, then sent to the service to comment.
Linson Court Care Home, Dark Lane, Batley, West Yorkshire, WF17 5RU	This was a planned, supportive visit as part of our ongoing program of work in adult social care settings. We aimed to gather feedback from residents, staff, and visitors to better understand life at the home and highlight what is working well and what could be improved.	A report was written about the findings and recommendations, then sent to the service to comment.
Aden Court Care Home, Birkhouse Lane, Moldgreen, Huddersfield, HD5 8BE	This was a planned, supportive visit as part of our ongoing program of work in adult social care settings. We aimed to gather feedback from residents, staff, and visitors to better understand life at the home and highlight what is working well and what could be improved.	A report was written about the findings and recommendations, then sent to the service to comment.
Community Diagnostic Centre, Broad Street, Plaza Building, Northgate Halifax, HX1 1UB	The visit aimed to understand patient and staff experiences and how the service operates.	A report was written about the findings and recommendations, then sent to the service to comment.
The Lodge, Huddersfield, HD3	We tested a new approach to gather feedback from people living in residential, care and nursing homes. Offering creative activity while engaging in conversation about the place where they live.	A report was written about the findings and recommendations, then sent to the service to comment.