



Prescriptions Follow Up Project Report

Healthwatch Bury

July 2025



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Introduction to Healthwatch Bury

This report has been produced by Healthwatch Bury. The Healthwatch network consists of 152 Healthwatch organisations across each of the local authority areas in England. It also has a national body called Healthwatch England based in London. We are all independent organisations who aim to help people get the best out of their local health and social care services, whether it's improving them today or helping to shape them for tomorrow.

Everything we say and do is informed by our connections to local people and our expertise is grounded in their experience. We are the only body looking solely at people's experience across all health and social care in Bury. As a statutory watchdog, our role is to ensure that local decision makers put the experiences of people at the heart of their care so that those who buy (commissioners) and provide our services (NHS Trusts, GPs, the voluntary sector and independent providers) can benefit from what Bury people tell us. Our reports on various elements of health and social care in Bury can be found on our website at the following link: healthwatchbury.co.uk or by contacting us directly using the details on the back cover.





Executive Summary

As a follow-up to Healthwatch Bury's initial research into the local prescription process, an engagement exercise was carried out to explore early patient experiences with patient-led prescription models in the Bury North area. This short-term engagement, conducted in collaboration with Bury Integrated Care, aimed to gather quick insights into whether recent changes are beginning to address previously identified issues.

A total of 41 responses were collected through brief surveys and community conversations. This snapshot builds on the original project, which highlighted concerns around communication breakdowns, prescription errors, and the usability of digital tools like the NHS app.

This follow-up highlights that while some progress may be underway, key challenges remain. Continued efforts are needed to improve digital access, strengthen communication between healthcare providers and patients, and ensure timely, reliable access to medications. These insights will inform future recommendations and support ongoing improvements in patient-led prescription services across Bury North.





What is Patient Led Ordering

Patient-led ordering is a model that empowers individuals to take direct control of their repeat prescriptions, typically through digital platforms such as the NHS App. Instead of relying on pharmacies or GP practices to automatically reorder medications, patients are responsible for requesting their prescriptions when needed. This approach is being promoted across Greater Manchester as part of efforts to improve safety, reduce waste, and increase patient autonomy.

In Greater Manchester, patient-led ordering has been shown to:

- **Reduce medication waste** by preventing unnecessary or duplicate prescriptions.
- **Improve safety** by ensuring patients only receive medications they actively request and still require.
- **Improve efficiency** for GP practices and pharmacies by streamlining prescription workflows.
- **Empower patients** to manage their own health more proactively, increasing engagement and confidence.
- **Support digital transformation** through increased use of the NHS App, while recognising the need for inclusive alternatives for those unable to use digital tools.

Importantly, the model includes exemptions and support for vulnerable groups, such as those with cognitive impairments, language barriers, or complex medication needs, ensuring that patient-led ordering remains accessible and equitable.












Key findings

- **Access and Communication:** Some patients continue to face challenges in securing GP appointments and receiving clear communication about medication changes.
- **Pharmacy Delays:** Delays in obtaining medication persist, often due to stock issues or supply chain problems at pharmacies.
- **Digital Engagement:** While many respondents use the NHS app, a significant number do not. This suggests a need for greater awareness and clearer guidance on how to use digital tools effectively.
- **Medication Reviews:** Most patients understand the importance of regular medication reviews, though some uncertainty remains—indicating a need for better education and promotion of these reviews.
- **Confidence and Cost:** Most participants feel comfortable asking questions about their medication and do not report financial barriers to accessing prescriptions.
- **Social Prescribing:** Traditional medication remains the primary recommendation from GPs, with limited evidence of broader social prescribing practices being implemented.



Our recommendations:

The key recommendations to local service providers and commissioners include the following:

-  1. **Improve communication by notifying patients of prescription changes via SMS/email and provide clear updates during GP/pharmacy visits.**
-  2. **Enable carer-linked accounts to support patient-led prescribing by improving NHS App accessibility and simplifying digital navigation for carers and dependents — with the flexibility for linked accounts to be established even when patients and carers are registered with different GP practices.**
-  3. **Promote pharmacy delivery services and make patients aware they can change their nominated pharmacy if they are having an issue.**
-  4. **Promote info on transport options by utilising what is available locally.**
-  5. **Promote Medication Reviews by raising awareness of the importance of medication reviews.**
-  6. **Streamline repeat prescriptions by improving app reliability and guidance and support people with access tools (e.g. speech to text, interpretations services etc.)**
-  7. **Develop better awareness amongst GPs of social prescribing option within the local community.**
-  8. **Engage underrepresented groups in patient participation groups and/or consultations.**
-  9. **Provide options for translation services for patients and improve outreach and communication.**



Background

This report builds on Healthwatch Bury's previous work exploring patient experiences with the prescription process, with a specific focus on the Bury North area and the introduction of patient-led ordering prescription model. The primary aim of this follow-up engagement was to assess whether recent changes—particularly those promoting patient autonomy in ordering prescriptions—are beginning to address longstanding issues such as communication breakdowns, prescription delays, and digital access barriers.

The Bury Metropolitan Borough, home to 193,846 residents (2021 Census)¹, presents a diverse and aging population with significant healthcare needs. Chronic conditions such as cardiovascular disease and diabetes are prevalent, especially among older adults, many of whom rely on regular prescriptions to manage their health²³. In Bury North, where this engagement was concentrated, these challenges are compounded by mobility limitations, digital exclusion, and a growing reliance on carers.

Previous research highlighted systemic issues including poor coordination between GP practices and pharmacies, administrative errors, and limited usability of digital platforms like the NHS app. These concerns remain relevant, as 33% of respondents in this follow-up still do not use the NHS app, and 41.5% require assistance from family or carers to manage their prescriptions.

While national studies have shown that electronic prescribing can improve efficiency and reduce errors, they also reveal inconsistencies in implementation and user experience across regions. This localised engagement provides valuable insights into how these systems are functioning in practice within Bury North, and whether they are meeting the needs of patients. Initial findings suggest that while some improvements are evident, particularly in pharmacist confidence and prescription collection, key barriers persist. These include digital literacy gaps, inconsistent communication, and procedural delays. The feedback gathered will inform future recommendations and support ongoing improvements in patient-led prescription services, ensuring they are inclusive, efficient, and responsive to the needs of Bury North's population.

Further context:

- [Pharmacy Report 2023-24 \(parliament.uk\)](#)
- [Patient Led Ordering of Medicines | Greater Manchester Integrated Care Partnership](#)
- [Patient-led ordering](#)
- [NHS App | Bury Directory](#)
- [We're all community pharmacy](#)

¹ [Bury \(Metropolitan Borough, United Kingdom\) - Population Statistics, Charts, Map and Location](#)

² [Home - Office for National Statistics](#)

³ [Local Authority Health Profiles - Data | Fingertips | Department of Health and Social Care](#)



Methodology

To explore patient experiences with the evolving prescription process, particularly the introduction of patient-led ordering models in Bury North, Healthwatch Bury developed a short survey aimed at capturing real-time feedback from local residents.

The survey was officially launched in March 2025 and promoted through a variety of community-based engagement methods, ensuring accessibility and inclusivity. These included:

- Face-to-face outreach, such as park bench surgeries, coffee mornings, and community events held across Bury North.
- Visits to local support groups and community hubs, including:
 - Speakeasy
 - Ramsbottom Christ Church Food Bank
 - Cozy Corner at Tottington Methodist Church
 - Parkinson's Support Group
 - Bolton Road Methodist Church Food Bank
 - Greenmount Cuppa and Chat

These activities enabled Healthwatch Bury to gather insights from a broad cross-section of the community, including older adults, carers, and individuals managing long-term health conditions. A total of 41 responses were collected, forming a valuable snapshot of early experiences with patient-led prescription services.



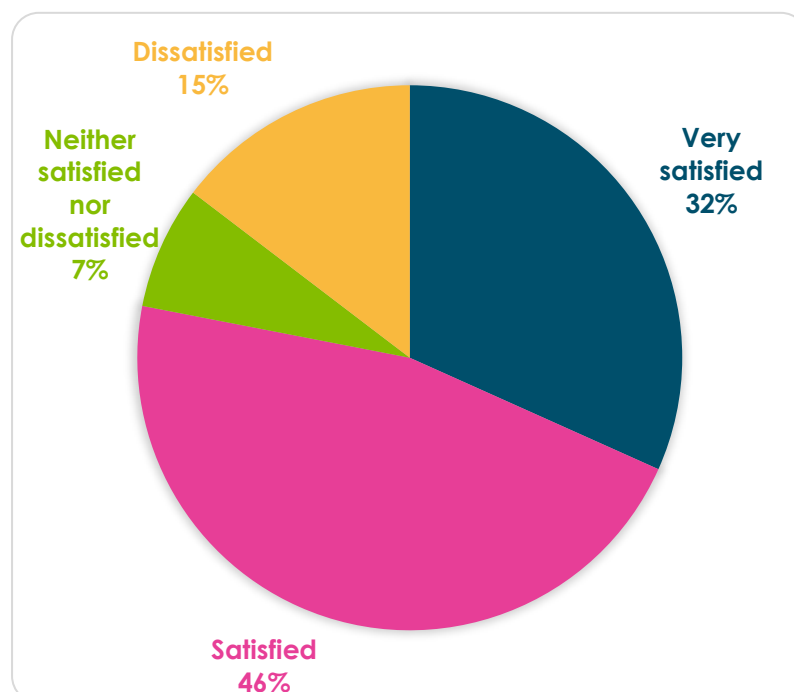


Findings

As part of a short-term engagement exercise conducted between March and July 2025, Healthwatch Bury gathered feedback from 41 residents in the Bury North area regarding their recent experiences with the prescription process. All participants had received a prescription from a healthcare professional within the past 12 months, ensuring that the insights reflect current and relevant experiences.

Respondents were asked to rate their overall satisfaction with the prescription process, including aspects such as ease of access, efficiency, and communication. The responses provide a valuable snapshot of how patients are experiencing the evolving patient-led prescription model, and whether it is beginning to address previously identified challenges.

How satisfied were you with the process of getting a prescription overall?



Overview

41

responses to
the survey

78%

said they were
satisfied with
the process
overall.



Initial Contact

*"It can be difficult
to obtain the
appointment prior
to [getting a]
prescription"*

Survey Respondent

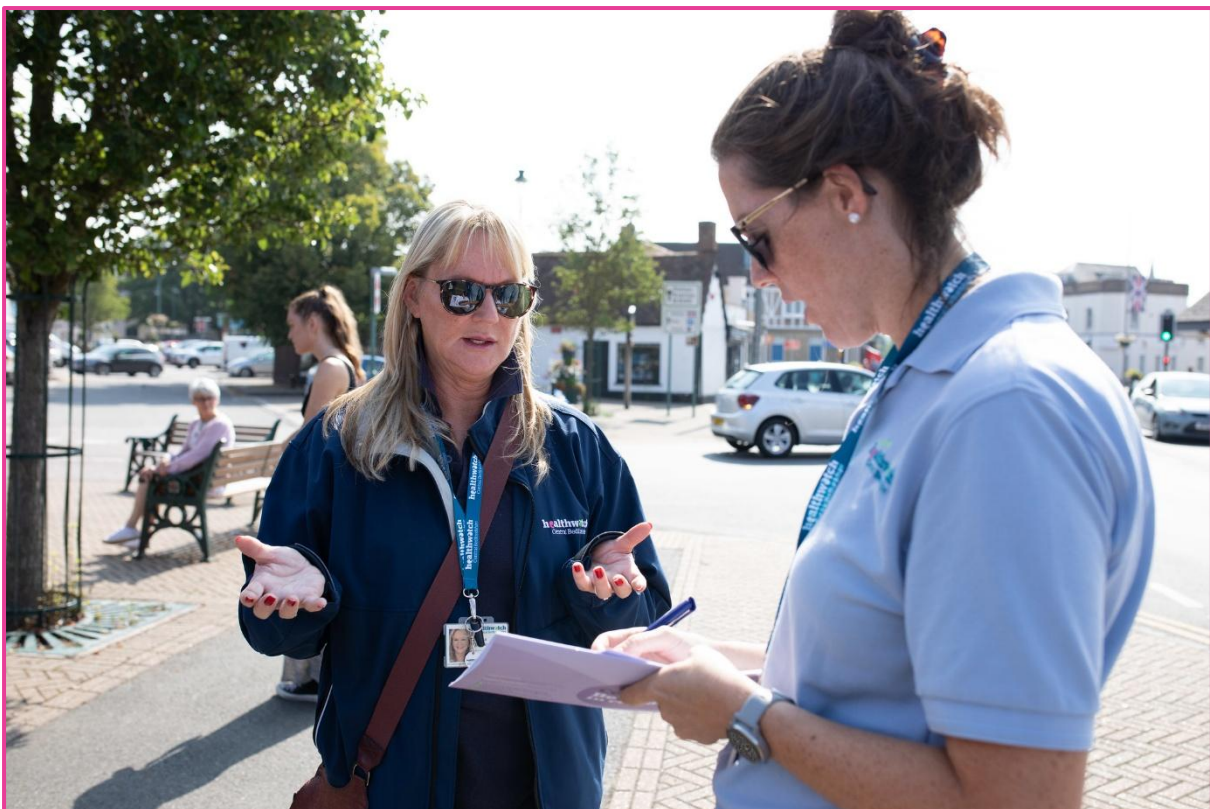
Initial Contact with Healthcare Professionals

We assessed quality and satisfaction with the first point of contact before receiving a prescription.

71% of respondents were very satisfied or satisfied with their initial contact with the healthcare professional prior to getting a prescription. This is slightly higher than reported last year (65%), which is a positive trend.

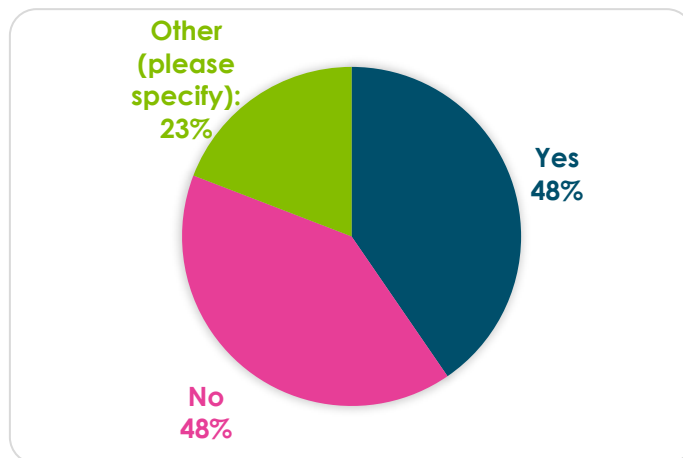
Only 8% of respondents reported being dissatisfied with initial contact, and nobody reported being very dissatisfied. This figure is much lower than the 2024 report, where 17% were dissatisfied or very dissatisfied. Thus, this is also a positive trend. However, 23% are neutral.

Some respondents reported difficulty in getting a GP appointment, which is an issue that was also reported last year. Thus, this is an ongoing difficulty.





Have you ever encountered challenges or delays in getting your prescriptions approved?



48% of respondents reported no challenges or delays in getting their prescriptions approved, but 48% did. Last year 52% reported challenges, thus indicating that this is still an ongoing issue.

Lack of Communication

“[...] I felt there was a lack of communication from the practice.” - survey respondent

Some of the comments made about delays related to lack of communication. One respondent said they were not informed of changes to their repeat prescription and as a consequence, nearly ran out of tablets. Another mentioned about lack of communication regarding their batch prescription being discontinued on several occasions. This shows that patients may not always be aware about changes made to their prescriptions.

Lack of communication was also identified last year; this therefore remains an ongoing issue.

Issues with medication

Some respondents reported issues such as items being out of stock or the chemist not being able to get hold of the medication. Another mentioned that they've been told to order earlier as their medication now takes longer to deliver. Thus, there appears to be practical barriers that patients face, potentially causing inconveniences.

Getting
prescriptions
approved

48%

had not
experienced
delays in
getting their
prescription
approved.



Collecting prescriptions

68%

reported being very satisfied, experiencing no problems in collecting their prescriptions.

The majority of respondents (68%) were very satisfied with their latest experience of collecting a prescription, encountering no issues. This is a higher figure than reported last year (54%). This suggests that there may have been improvements with the process.

A few respondents mentioned that they had their prescriptions delivered.

However, there are still some reported issues. 8% said they had to wait due to the pharmacy being very busy, 5% said their prescriptions were not ready, and 13% were told to return at a later time to collect it. This shows that there are still some issues regarding delays, as reported last year.

Confidence in pharmacist

92%

felt comfortable and confident asking for further information about medication from their pharmacist.

Most respondents (92%) felt comfortable and confident asking for further information about medication or their condition from their pharmacists. This is very positive and illustrates that confidence in pharmacists is high.

This figure is slightly higher than reported last year (84%), indicating a positive trend.



Accessibility

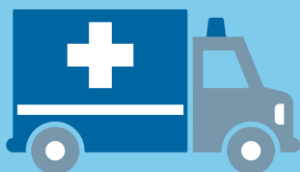
92%

indicated they
received
medication
information in an
accessible format.

92% of respondents said that they felt the information they received about their medication was in an accessible format. This is a higher percentage than reported last year (83%), indicating a positive trend.

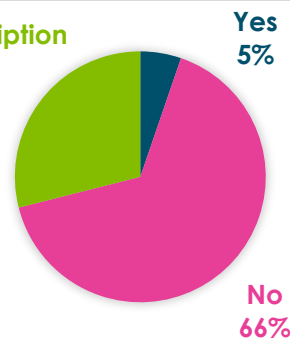
Insights from the Speakeasy NHS App Focus Group further highlight the importance of accessible formats, especially for individuals with aphasia, visual impairments, or cognitive limitations. Participants expressed significant challenges using the NHS App due to complex login procedures, lack of simplified language, and physical barriers such as reduced motor skills. Many relied on carers to manage prescriptions and preferred traditional communication methods like phone calls or in-person visits.

Transport



Are there any transport issues that affect your ability to access your prescriptions?

I get my prescription
delivered
29%



Transport-related challenges in accessing prescriptions have shown modest improvement between 2024 and 2025. In the initial report, 8% of respondents reported difficulties due to transport, whereas in the follow-up engagement, this figure dropped to 5%. This reduction may be attributed to the increased use of delivery services, which were utilised by 29% of respondents in 2025. These services play a crucial role in supporting patients with mobility issues or limited access to transport, helping to ensure more equitable access to medications across the Bury North area.



Cost of Prescriptions

97.5%

of respondents reported no financial barriers or concerns related to the cost of their prescriptions.

The proportion of patients reporting financial concerns related to prescriptions has decreased significantly—from **6% in 2024** to just **2.5% in 2025**. This positive shift may reflect improved awareness of **prescription charge exemptions**, better access to financial support information, or more consistent application of eligibility criteria. While the number remains small, it highlights progress in reducing cost-related barriers to medication access, particularly for vulnerable groups.

Repeat prescriptions



In 2025, 30.8% of people reported difficulties arranging their repeat prescriptions, showing a slight improvement from 34% in 2024. Despite this progress, many still face challenges, particularly with app functionality and communication between patients and healthcare providers.

Whether managed personally or by a family member, the process can be frustrating when digital tools fail to work reliably or when updates and confirmations are unclear.

Continued improvements in technology and clearer communication channels are essential to make repeat prescriptions more accessible.



Medication review

46%

of
respondents
found it Easy
or Very Easy to
schedule and
attend
medication
reviews.



53% of respondents reported a good understanding of the importance of regular medication reviews. However, there appears to be a lot of uncertainty here. 25% reported they understood the importance somewhat well, and the remaining respondents were either unsure or did not really understand the importance of such reviews.

Thus, there arguably needs to be more awareness of the importance of regular medication reviews.

Experience of scheduling and attending medication review appointments

46% of respondents found this easy to very easy, compared to 42% last year.

20% of respondents reported a neutral experience, which is a higher figure than last year (12%).

However, 23% of respondents found this difficult to very difficult (the same figure as last year). This illustrates that whilst a lot of respondents had no issues with the process, there are still some who do. One reported that they had not had a medication review for a long time, and another could not recall having one.



NHS application

40%

of respondents
use the NHS
app for
ordering their
repeat
prescriptions.

"[The] NHS app
[is the] most
complicated
thing, I don't
use it. I have
tried." – survey
respondent

We asked patients to share with us if and how they use the NHS app, the results below:

Almost half of the respondents (40%) use the NHS application to order repeat prescriptions. 33% use it to access their medical records. These appear to be the most popular reasons for using the app.

20% use it to set up a preferred pharmacy for collection.

However, 33% reported that they do not use the NHS app. This is a similar figure to what was reported last year (38%) which shows that digital accessibility remains an issue. Therefore, it may be recommended to raise more awareness regarding the app or seek to improve access to it.

The NHS app and accessibility for patients with aphasia:

Healthwatch spoke to individuals living with aphasia, many of whom reported difficulties navigating the NHS app. Some also mentioned that they had older devices, which also made the app harder to use.

Carers often take over digital health tasks, but they are frustrated with the lack of support linking family accounts.

As a result, patients with aphasia prefer more traditional communication methods such as phone calls or in person contact.

"I cannot use the NHS app to access my prescription since having a stroke. There is just too many steps in the registration process, the authentication, password, email address all are difficult steps, and I hit a wall. I have difficulty reading, typing and understanding information. So, my husband has to deal with all my prescriptions with the GP as he doesn't understand technology to use the app." - a patient living with aphasia.

More information about Speakeasy group further down this report.



We asked if patients had ever been directed to anything else other than medication.

A significant majority of respondents (72% compared to 76% last year) indicated that they have not been directed to anything other than medication. This suggests a predominant reliance on medication in their treatment plans.

Exercise is the most common non-medication recommendation, with 16% of respondents reporting this. It indicates a recognition of the benefits of physical activity in managing health.

Social prescribing, where individuals are directed to non-medical support such as community activities, was mentioned by 8% of respondents. This suggests some awareness and use of holistic health approaches.

The data highlights a significant reliance on medication, with exercise being the most common alternative recommendation. There is a diversity of other interventions, but their relatively low mention suggests an opportunity for broader implementation of holistic health strategies.



Alternative prescribing

72%

of respondents
have not been
directed to
anything other
than medication.

16%

of respondents
have been
prescribed
exercise by their
health
professional.



Accessing prescriptions



Positive
feedback was
received about
helpful,
respectful
services and
good
communication

Patients report mixed experiences when accessing prescriptions. Positive relationships with pharmacies highlight helpful, respectful service and good communication. However, systemic pressures on GP surgeries and pharmacies are evident, affecting service consistency despite their continued compassion and care.

Challenges include unclear prescription transitions (e.g., from prescribed to OTC), centralised dispensing that reduces transparency, and staff changes that impact service quality.

Digital tools like the NHS App are seen as overly complex and inaccessible, limiting their usefulness. While email communication and delivery services are appreciated, overall accessibility remains a concern. Patients feel the process is fragmented and in need of improvement to ensure clarity, convenience, and better support.



The demographic survey data reveals a predominantly older, female, White British, and Christian population. The high percentages of long-term conditions and disabilities align with the older age distribution. There is a notable presence of carers. The respondents are diverse in marital status. The respondents are mainly heterosexual and White British. This shows the responses represent may not be representative of all different groups of population.

Gender and Age Distribution

The majority of respondents were female (77%), with males making up 23%. This may affect the survey's results, potentially highlighting issues and treatments more relevant or accessible to women.

The age distribution shows a predominantly older population:

- 58% are 75+ years
- 20% are 65-74 years
- 12% are 55-64 years
- 8% are 45-54 years
- Only 2% are under 45 years

This indicates that the survey results are more reflective of the experiences and needs of an older demographic.

Geographical distribution

The respondents are primarily from Ramsbottom, Elton, and North Manor (93%), followed by Redvales (5%), and Radcliffe (2%).

Ethnicity

A large majority (93%) identify as White British. Other notable groups include:

- 2% White Irish
- 2% Asian and White

Demographics

47%

of respondents
live with a
long-term
condition.

16%

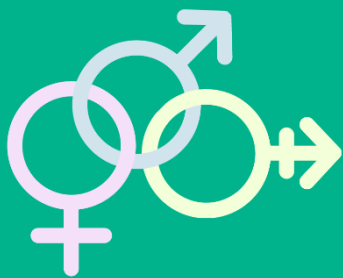
of respondents
have a
disability.



Demographics

19%

of respondents
are carers.



This may mean the survey findings might not fully capture the experiences of minority ethnic groups.

Sexuality

Most respondents are heterosexual (94%), with smaller percentages identifying as asexual (3%) and 3% preferred not to say. This suggests the data is predominantly reflective of heterosexual experiences.

Religion: The respondents are mostly Christian (86%) or have no religion (11%), 3% prefer not to say

This indicates a significant Christian representation, but also a notable proportion of people with no religious affiliation.

The respondents are varied in their **marital status:**

- 43% widowed
- 34% married
- 11% divorced
- 6% single
- 3% separated
- 3% prefer not to say

This diversity suggests that a wide range of personal circumstances are represented.

Health Conditions and Disabilities

- 47% have long-term conditions, which is significant considering the age distribution
- 19% consider themselves to be carers.
- 16% have a disability

These figures highlight the high prevalence of long-term conditions and disabilities, reflecting the likely health challenges faced by the respondents.



Healthwatch Bury's Visit to Speakeasy

In addition to visits to community groups mentioned above, Healthwatch Bury engaged with attendees at the Speakeasy Charity in Ramsbottom, an organisation supporting individuals living with aphasia. A total of 45 participants, including people with aphasia, carers, and relatives, shared their experiences and views in group discussions.

Questions asked:

- How easy and accessible is the NHS App for you to download and use? Do you have any barriers with the NHS App, and if so, what difficulties are you experiencing?
- How do you feel when ordering on behalf of the person you care for/relative? Is it relatively easy or do you experience any challenges?

Key Findings:

Digital Access Barriers:

- Many participants with aphasia reported difficulties navigating the NHS App due to complex login procedures, multi-step authentication, and cognitive or physical limitations (e.g. difficulty reading, typing, and processing information).
- Older devices hinder functionality (e.g. facial recognition unavailable), making alternative authentication steps (passwords, emails) burdensome.
- Visual impairment and reduced motor skills also prevent effective app usage.

Support from Carers:

- Carers often take over digital health tasks but express frustration at lack of support linking family accounts.
- Some are switching GPs due to perceived lack of assistance post-COVID.
- Pharmacy support (text alerts, deliveries) is widely appreciated, compensating for the app's shortcomings.

App Usability and Access Alternatives:

- Participants prefer simpler, more traditional communication methods (phone or in-person).
- Concerns were raised over the decreasing availability of these methods, particularly for those who can't use digital tools.



Suggestions from the group:

➤ **Simplify the NHS App interface:**

Introduce an "Easy Read" or "Aphasia-Friendly" version of the app with fewer steps, simplified language, and visual aids.

Implement a low-tech alternative login system for those with older devices or cognitive impairments.

➤ **Strengthen carer support:**

Offer clearer guidance and assistance for carers to manage accounts and prescriptions on behalf of relatives, including linking profiles.

Explore an "authorised carer" feature within the NHS App.

➤ **Improve accessibility beyond the app:**

Ensure non-digital options remain available, such as prescription requests by phone or at the surgery.

Reintroduce or improve dedicated phone lines for vulnerable patients (e.g. aphasia, sensory impairments).

➤ **Collaborate with local pharmacies and GPs:**

Recognise and promote successful pharmacy models that provide home delivery and clear communication.

Encourage GPs to proactively identify patients with aphasia or similar conditions and tailor their communication channels accordingly.

➤ **Training & awareness:**

Train healthcare staff in communication techniques for people with aphasia.

Consider co-producing materials and digital solutions with people who have aphasia to ensure relevance and usability.

"I cannot use the NHS App since having a stroke. There are too many steps—authentication, passwords, emails. I struggle with reading and typing. My husband handles my prescriptions but doesn't understand technology either."

"My daughter set me up on the NHS App. Thankfully, with her help, I can now tick the box for my prescription—it's easier."



Acknowledgements

Many thanks to all participants, community groups, volunteers, and partners who helped make this report possible.

A special thank you to **Aaliyah**, our **Research and Engagement Volunteer**, whose dedication and analytical skills played a vital role in shaping this report. Aaliyah contributed significantly by analysing survey data to identify key findings and conducting further thematic analysis, helping to deepen our understanding of patient experiences and highlight areas for improvement.

References

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2. [Home - Office for National Statistics \(ons.gov.uk\)](#) (Accessed August 2025)
3. [Local Authority Health Profiles - OHID \(phe.org.uk\)](#) (Accessed August 2025)
4. [What help can you get to pay for your prescriptions? | Healthwatch Bury](#) (Accessed August 2025)



Contact us

If you require this information in an alternative format,
please contact our office via the details below.



healthwatch
Bury

Healthwatch Bury CIC

56-58 Bolton Street

Bury

BL9 0LL

www.healthwatchbury.co.uk

Tel: 0161 253 6300

Email: info@healthwatchbury.co.uk

X: @healthwatchbury

Find us on Facebook

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