

# Performance Report

October – November – December 2023

## Activities during reporting period October – December '23

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### RESEARCH

- We released our **Autumn/Winter survey** which looks at what people's overall experiences are of health and social care in the area. It also helps us decide what priority areas to focus on over the next year.
- Planning began for our **Healthwatch 100** surveys over the next few months, with one on vaping and one on sexual health earmarked for early 2024.
- We have been working on a **pathway to CAMHS** project, including planning readiness to share with stakeholders, writing surveys, liaising with Healthwatch in Greater Manchester (HWinGM) to identify capacity to deliver at each stage, organising steering groups to commence in January.
- We made a successful bid and began planning to deliver a project on **community diagnostic centres** for Healthwatch England.
- We made further progress with our **Discharge to Assess** project including background research, planned and agreed methods (semi-structured interviews with patients discharge to care homes) and practical access to participants.
- We are working on the Trafford Community Collective **long-term conditions project** which is also currently in the planning stages. We have contributed to ensuring standardisation across delivery partners for gathering the data needed to evaluate and analyse the effectiveness of the project, as well as to **ensure patient voice is heard**.

### COMMUNICATIONS

- Our Communications focus has been largely around **reporting**, both on performance and research, including formatting, editing, and finishing our report looking at digital mental health support.
- We have prepared materials for our recent **survey release**, including a print leaflet to be handed out during public engagement.
- Our **Accessible Information** project is slowly taking shape, and recently included an audit of our current information provision.
- We took part in **beta testing** of an update for our customer records management database and contributed to the improvement of the data collection form, as well as identification of any bugs.

- We continue to attend a number of inter-organisational groups with representatives from the ICS and VCFSE, **working together** on communications and engagement. This has provided a good opportunity to stay abreast of NHS communications campaigns and let people know about our activities in turn.

## ENGAGEMENT

- We began planning for our first **Enter & View** visit since COVID-19 began and hope to undertake this in late January/early February with refresher training beforehand.
- We attended several **events** across Trafford, including the neighbourhood workshops, Trafford Women's Voices Group, Trafford Carers Centre Rights and Information Day, and a Black History Month event organised by Voice of BME.

## VOLUNTEERING

- Our volunteers contributed **56.5 hours** across October, November, and December.
- Our **readers panel** once again provided their skills for our Digital Mental Health report, giving valuable feedback on the content before publication.
- We attended a **volunteer fair** held at Coppice library in Sale and received several expressions of interest following the event.
- We hosted our **online end-of-year get-together**, which was a great opportunity to see everyone's faces, look back at our achievements over the year, and play a couple of games.
- Our volunteers took part in **PLACE (Patient Led Assessments of the Care Environment) assessments** for Manchester Foundation Trust in November and December.

## From the Trafford community

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### KEY CONCERNS

- Residents have raised concerns about follow-on treatment from hospital such as mental health care after transplants, and specialist hospice care.
- More than one person came to us seeking signposting to advocacy support as they were having problems raising concerns with providers. In one case this was due to difficulties reading and writing, and in others it was due to communication breakdown.
- We heard from a parent concerned about the length of time their son had to wait for a referral to the dental hospital. There was confusion around whether or not they had been offered an appointment, and by the time the issue had been cleared up, the patient had been discharged and had to return to the back of the waiting list. Another patient was worried about the fact that only dentist could refer to dental hospitals despite many people not being able to access an appointment. They were concerned about their worsening condition and the fact that, as far as they were aware, no one else could refer on.
- The theme of waits for referrals was a common one across the board, regardless of where people were being referred to.
- One patient encountered an issue with a GP practice whose policy of not taking on patients who had left (but not moved out of area) was limiting their ability to access primary care.

## Strategic updates

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I have reported previously on our visit to the Ambulance HQ at Parkway. We were subsequently provided with data relating to dental and repeat prescriptions. Concerns have been expressed nationally that 111 responses may be adversely affected over Christmas and New Year periods. The Locality Board has been made aware of this as has the GM Dental Advisor.

I attended the launch of the Mental Health Strategy at The Circle in Manchester. There were some interesting presentations from a range of wellbeing projects.

We are pleased to advise that Healthwatch Trafford is taking the lead across HWinGM in relation to canvassing Children and Young People's and Parents and Carers experience about the care pathway leading to, and including, CAMHS. There are four elements to this. Firstly a survey, secondly focus groups in all 10 boroughs, thirdly, lived experience stories and fourthly a report. This is one of two large projects for GMHW, the other being mental health which will be undertaken during the first half of 2024. The CYP report will be published in May 2024. It is hoped that all Children and Young People, their parents as well as GPs, commissioners, providers and the VCFSE will actively participate. We will provide an update to TLB at each of the four stages. A detailed project Plan is in place and a steering group has been formed to monitor progress.

We have also been successful in being commissioned by Healthwatch England to undertake an Enter and View visit to the Manchester and Trafford Community Diagnostic Centre in February. This will be the first visit we have undertaken since the pandemic and follows on from our review of our Trafford protocol. At HWGM level we have also agreed a protocol for joint visits where more than one Healthwatch has an interest.

We set up a Volunteer Fair at the Coppice to recruit volunteers. We participated in each of the focus groups in relation to the urgent care review. We have also undertaken PLACE assessments. We attended the Trafford Community Collective's Annual General Meeting.

We had a stall at the Black History Event. Many of you will know of the passing of Ann Day who was our Chair for many years. The funeral was very well attended, and many stories told of her remarkable life.

We had a very useful meeting with our Director of Public Health and one of her consultants with a view to seeing how we can complement our work going forward.

We have agreed to meet on a quarterly basis to discuss potential collaborations.

HWinGM has sent a letter to all providers drawing attention to the need to ensure that administrative errors are minimised. Follow up appointments are not always being entered into hospital systems in some areas.

We submitted a report to the Quality and Performance Group which we were told was well received.

As GMHW, we have provided feedback to the ICS on the dementia and brain strategies.

We would like to take this opportunity to wish colleagues a Happy New Year!

A handwritten signature in cursive script, appearing to read 'Heather', is written above a long, thin, curved horizontal line that serves as a decorative underline.

Heather

