

# Performance Report

July – August – September 2025

## Activities during reporting period July – September '25

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### RESEARCH

- In early September, we were joined by Cameron Lee who is joining us as a Projects and Research Officer. He will be working alongside Ana Chadwick, leading on project work at four days per week; Ana will remain with us for one day per week whilst she pursues further academic study.
- At present, we have [a live HW100 project on Parental Mental Health](#). This project explores local parent's experiences and asks for feedback on services, from those who accessed support. This is a follow-up project to [work we did on this topic in 2022](#) and as such, we aim to compare more recent experiences to those we previously gathered, assess the extent to which our previous recommendations may have had an impact and where necessary, make revised recommendations.
- We were joined over the summer by a Manchester University student intern, Adella, who helped us complete a project on the topic of **Patient Participation Groups (PPGs)**. This project was developed to explore the overall effectiveness of PPGs and the extent to which they are representative of their local populations, and how this affects their ability to drive meaningful improvements within GP Practices. A report is soon to be published on this project.
- Planning sessions and meetings have taken place for HW100 projects on **Oral Health in under 5s** and **Women's Mental Health**. We will be opening surveys on these topics in the coming months. A survey was recently launched on **Palliative and End of Life Care**.
- We have completed a report on the commissioned evaluation of the **Feel Better Partington** and **Healthier Happier Me** programmes and submitted it to Adrian Smith at Manchester Foundation Trust. We hope our findings will be useful in the commissioning of future projects of a similar kind.

### ENGAGEMENT

- We **joined the community** at a number of local events and celebrations over the summer, including the Counselling and Family Centre's 50<sup>th</sup> Birthday, several stay and

play sessions with parents and children at local libraries, and open days: Living Well with Dementia at Sale fire station, and Altrincham Medical Centre.

- We took part in the Manchester University NHS Foundation Trust's (MFT) **food review** at Trafford General Hospital, following their re-tendering process for food provision at their hospitals. We, alongside other organisations, joined in to gather views from the public ensuring their decision guided the outcome.
- We visited **Healthwatch Salford** Have Your Say Fair as they met with local people to find out more about the concerns they deal with and the services available in their borough. We were keen to learn from their process and see where we could improve our communication with local people as well as other voluntary sector partners in Trafford.

## VOLUNTEERING

- Our volunteers met with parents at various local libraries across Trafford to talk about and promote our **Parental Mental Health survey**. We are grateful to the Trafford Libraries service who welcomed us at their weekly children's events including Storytime, Rhymetime, sensory play sessions and Children's Hours. This allowed us to invite local parents to voluntarily complete the survey or talk to us in person about their experiences in an accessible way in a relaxed, child-friendly environment.
- As part of our process to resume **Enter & Views** our volunteers contributed to planning meetings in the months of July and August to help in preparing us for the visit in October. All our Enter & View Authorized Representatives also had their DBS checks renewed as part of the planning process.
- A volunteer of ours represented us at the **South Neighbourhood Network** meeting that took place in Altrincham in July and September to hear about updates that can benefit people in the borough. Some of the information we learnt are the moving together initiative that's part of Trafford leisure services, asylum support available for people in asylum hotel, Greater Manchester initiative to get men into work, initiative to support return to work through Trafford Work Well.

## From the Trafford community

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### KEY CONCERNS

- Several Trafford services were praised for their care of a resident with cancer, who described feeling “amazed and impressed at the support ... [they] received”. Those named were Washway Road Medical Centre, Withington Hospital, Wythenshawe Hospital, Trafford General Hospital, and Altrincham hospital. Davyhulme Medical Centre was also commended for how proactively they handled a patient with cancer who was also experiencing the menopause.
- One person highlighted the “fantastic care” at Trafford General after they broke their arm.
- A resident got in touch with further positive comments about care in the borough, talking about their experiences with the Infant Feeding Team. They praised the ease with which they accessed the service, including the clear signposting by hospital staff, and the service itself.
- Some patients are having difficulty accessing appointments across a variety of services. One person fed back that while they were pleased with the care they received when they were seen, they had trouble contacting the St Mary’s menopause clinic and booking in at all. Another resident let us know that they were still unable to find an NHS dentist. Dentistry remains a key concern for us as well as the public, which is why it’s important to keep people updated when progress is being made behind the scenes to address this. The Department of Health and Social Care published a letter in September outlining some of that work; [read it in full here](#) to find out what’s been going on.
- One resident felt that communication issues around appointment booking were negatively affecting their care: lack of communication between clinical and booking teams at a GP practice disrupted a course of treatment, negatively impacting the patient’s care and relationship with the practice.
- We received mixed feedback from multiple residents regarding Children and Adolescent Mental Health Services (CAMHS). One parent felt the waiting times were too long with no flexibility around appointment bookings, and that their child was dismissed without adequate support or advice. Another felt they had been supported once seen, but that the organisation’s communication was ‘diabolical’ with a lack of joined-up care. For more about people’s experiences accessing CAMHS in Trafford and Greater Manchester,

you can read our 2024 report here: [www.healthwatchtrafford.co.uk/report/2024-11-04/healthwatch-greater-manchester-pathways-camhs](http://www.healthwatchtrafford.co.uk/report/2024-11-04/healthwatch-greater-manchester-pathways-camhs).

- A pregnant patient got in touch with us for information regarding the RSV vaccination currently offered in pregnancy. They expressed concern around the protection offered to their baby if they were unable to get the vaccination in time due to previous trauma, as to their knowledge the vaccination is not available for babies directly in this country. Healthwatch Trafford got in touch with the Trafford Integrated Care Board to find out more, and they were able to provide us with some information to share with the patient. We also raised this with the Director of Nursing for Patient Experience and Engagement at MFT, who spoke to the maternity team and was able to clarify the position further. We passed this on to the patient, who was grateful for our efforts and whilst we weren't able to address her immediate concern, we did help to further her understanding of the situation.
- We were informed that a case of physical abuse within a care home setting was reported locally, with the police, Care Quality Commission, and relevant Safeguarding teams already involved.
- A patient was diagnosed with terminal cancer last year and had been struggling to access treatment since then. Their child reached out to us, expressing concern over delays and feelings that a lack of joined-up care and the stress of the situation had worsened their mother's condition. We suggested some next steps and outlined the information that we could provide to help escalate the situation.

## Strategic updates

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In my last report I indicated that Healthwatch across the country would continue to be funded until new legislation is enacted, possibly around September or October 2026, depending on the King's Speech to Parliament and the level of discussion in government in relation to the Health and Care Bill. The source of Healthwatch funding is the Local Reform and Community Voices grant. Louise Ansari – Healthwatch England's Chief Officer – has been appointed as a Non-Executive Director of NHSE which, much like Healthwatch, is being abolished.

More than 130 Healthwatch sent an open letter to the Secretary of State on the 17 July. We had his response on the 17 September which entirely predictably, placed the responsibility for seeking patient, user, and wider community responses with ICBs, local authorities, and providers. Officials will continue to meet with Healthwatch England and local Chief Officers and Chairs to design the new national system and the patient experience directorate to be established in the Department of Health and Social Care.

On the same day as the Secretary of State's correspondence, we had an email from the Greater Manchester Integrated Care Board (ICB) advising us that Mark Fisher, Chief Executive of NHSGM was retiring after 42 years' service. This is the 8th change in very senior national ICB posts over recent weeks.

The reforms to local ICBs continue unabated, including delays and debates with the Department about voluntary redundancy schemes. One can only commiserate with the staff involved who all continue to do good work. If the government fails to fund such a scheme it will place the onus on local systems to make even more stringent cuts to services to pay for redundancies. Achieving a 39% cut in running costs will cost many jobs and reduce the capacity of our local management team to deliver on the NHS 10- year plan.

You will recall that the DASH report was published shortly after the 10-year plan. We have been heartened by the level of support that we have had from Trafford. The Integrated Care Partnership has also met, and the mayor has initiated some actions to see how independent feedback from residents can be maintained in Greater Manchester after Healthwatch's dissolution. I have committed to sending out regular updates on events to all our valued staff and volunteers.

Many of the Greater Manchester Healthwatch are having discussions with their respective commissioners and although there may be different options to consider going forward, it looks as though each Healthwatch wants to explore becoming a local independent organisation. We are in discussion with our local commissioners, and we have met several key people in both GMICB Trafford and the Local Authority to encourage dialogue on the best potential model going forward.

In the meantime, it is business as usual with an exciting programme of Healthwatch 100 surveys and our main project all about the oral health of under-5s. The report on Patient Participation Groups by our intern from Manchester University is due to be published shortly, and we are currently also exploring palliative care and women's mental health. Our close collaboration with public health and the VCFSE sector continues.

I have joined the Greater Manchester Advisory Group on Children and Young People. It is clear that there is still a lot of developmental work needed on neurodiverse and parental mental health programmes with high numbers of need and limited resources playing key roles.

We have been advised that the CQC assessment of Trafford social services will commence for 5 days on 1 December. This follows the submission of a paper on the topic in early August. Significant progress has been made since the establishment of the Improving Lives Every Day (ILED) Board led by the Corporate Director for Adults and Wellbeing.

We were pleased to see that Adam Webb, who worked for Trafford Healthwatch for many years, has been appointed as an Inspector for the Greater Manchester Care Quality Commission covering primary and community care in Bury (where he was latterly Healthwatch Bury's Chief Officer) and Trafford. We wish him well.

A handwritten signature in blue ink, appearing to read 'Heather', with a long horizontal line underneath it.

Heather

