

PERFORMANCE REPORT
1st April - 31st May
2017

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The Trafford Healthwatch 100!

We have created a project called the Trafford Healthwatch 100 to find out directly from the people of Trafford what they think about local health and social care

These surveys will be quick to fill in and relatively simple, so you will never have to spend a long time filling them in. Some will be general, suitable for everyone to fill in, like the first one about GP appointments and some will be targeted to those that suit certain characteristics - for example on issues that only effect older people, only those of a suitable age would be requested to respond.

The information collected will always be anonymised so you wont be identifiable by your answers, meaning you can be completely open and honest. The demographic and contact information is used only by Healthwatch Trafford to send out surveys to the right people and to make sure that our information is as representative of the people in the borough as possible. Your details will never be passed on or supplied to any other organisation and we will only ever use it for the purposes of the Trafford Healthwatch 100 project. You can unsubscribe at any time and we will remove all details upon request.

By giving us your details, we can send you the next appropriate survey when it is available and you can ensure your experiences and views matter.

By participating in the Trafford Healthwatch 100 you can help us make health and social care the best it can be for the people of Trafford.

Find it at healthwatchtrafford.co.uk/the100 or contact the office.



We would be very grateful for any publicity and promotion you could give to this project as we would like as many people as possible to be a part of it. Employees of your organisation as well as members of the public you deal with would all be eligible to take part. The information we gather will inform our work in the coming months.





Healthwatch Trafford narrative report for April 1st - May 31st 2017

This is our report on Healthwatch Trafford's performance over the course of the last two months. It is targeted at our commissioner Trafford Council and key committees such as Trafford Clinical Commissioning Group (CCG) Governing Body, the Health and Wellbeing Board and Health Overview and Scrutiny. A separate Highlight Report is circulated to the public and for use as promotional material at the various Trafford events where we participate.



The first thing to note in this report is the change in name and emphasis - from an activity report to a performance report in line with our responsibilities as a publicly funded body to account for the money we receive from our commissioner - Trafford Council.

The period under review has seen many changes both in personnel and approach. Healthwatch Trafford (HWT) is pleased to see the 'pause' between the Clinical Commissioning Group (CCG) and the Council ended and welcomes the appointment of Cameron Ward and Ian Tomlinson as interim Accountable Officer and Change Director respectively. Our hope is that the integration agenda will be pursued at pace.



We also welcomed the appointment of Peter Denton as the Healthwatch Liaison Manager for all ten Healthwatch in Greater Manchester funded by the Health and Social Care Partnership. This coordinating role will strengthen independent Healthwatch views in key priority areas. Healthwatch Trafford will be choosing up to four work areas to prioritise at a GM level.

Healthwatch Trafford has already developed its work plan for Trafford for 2017/18 and that is attached at Appendix 1. We welcome any involvement or contributions by partners. We have already recruited a Manchester University intern to work on men's health and were pleased to have the involvement of Paul Fleming from the CCG in developing questionnaires, analysis of same and mentoring. We have also met with both commissioners and providers at Trafford Council in pursuance of our programme of work and were grateful for their advice and offers of help.

In Trafford, we had early meetings with both Cameron Ward and Ian Tomlinson which we feel were insightful on both sides. We have since established a CCG/Healthwatch liaison meeting and our initial focus has been on communicating and engaging with members of the public through a series of events across the four localities of Trafford planned for July.

We also had a fruitful meeting with Dr Priscilla Nkwenti, Chair of PRAP (Public Reference Advisory Panel) and Chief Executive of Black Health Agency for Equality. We discussed how to engage with hard to reach groups at the four upcoming locality events and the need to reach out beyond our existing partnerships to perhaps broaden our views and approaches to meet challenges that may be presented.

Our links with the new mental health Trust, Greater Manchester Mental Health has strengthened and our recent meeting at Moorside was very positive. We commented on the GMMH quality account where we were pleased to see Carers re-instated as a priority.





Our volunteers are key to our work plan as they are involved in almost every area of our activity from drop-ins through research, analysis to Enter and View (E&V) visits. In relation to the latter, we have reviewed how we approach E&Vs and what we focus on. Our volunteers met with us at a workshop in March and we designed a new process which we recently piloted at Faversham House care home. The key changes are that we will be focussing on aspects of care which often end up in unnecessary hospital admissions e.g nutrition, hydration, falls and loneliness/isolation which lead up to 4,500 hospital admissions each year across GM. We are also independently (and anonymously) canvassing the opinion of relatives and carers. We believe that these changes will give a much more rounded view of the care home sector in Trafford and contribute to our understanding of best practice.

We took a decision to postpone two events in March which coincided with the Manchester bombings. Healthwatch Trafford wishes to extend its appreciation of the sterling work undertaken by the emergency services across Manchester and beyond. We also wish to commend the work - often behind the scenes - of officers of both the CCG and the Council who exhibited strong leadership.

During this quarter we have published a volunteers' bulletin as well as our highlight report for the public.

We have decided that our Board will meet on a bi-monthly basis which is more in line with other committees. Our performance report will, therefore, change from quarterly to bi-monthly so that we keep in sync. On alternative months we will be setting up an Advisory Board so that we can have full and meaningful debates on the busy health and social care agenda. Terms of reference are being developed

We have just finalised our 2016/17 Annual Report which we hope will provide a more detailed insight to our work. It is always difficult demonstrating impact because very often we are not the only organisation putting forward the same ideas, but also because it sometimes takes a long time to effect change. However, we feel that we have been able to put forward our public's views on a range of topics.

We continue to recruit volunteers and our latest initiative is the development of the Healthwatch 100 whereby we recruit members of the public to commit to responding to short monthly surveys. Our first survey related to GPs and results are awaited.

We have also re-advertised for new Board members so I hope to be able to report positively in our next update.



Heather Fairfield

Chair







Analysis of Activities

	Year to date	April 2017	May 2017	June 2017	July 2017	August 2017	September 2017	October 2017	November 2017	December 2017	January 2018	February 2018	March 2018
<i>Public drop-ins -total</i>	2	2	0										
<i>Locality 1</i>	0	0	0										
<i>Locality 2</i>	1	1	0										
<i>Locality 3</i>	0	0	0										
<i>Locality 4¹</i>	1	1	0										
<i>Number of public contacts</i>	tbc												
<i>Number of complaints/ concerns recorded</i>	11	5	6										
<i>Number of public signpostings</i>	16	7	9										
<i>Healthwatch 100 (# of people signed up)</i>	0	First survey set up for June											

¹ Locality 1 - Old Trafford, & Stretford, - Gorse Hill, Longford, Stretford and Clifford, Locality 2 - Sale - Bucklow St Martin's (Sale) Ashton upon Mersey, Brooklands, Priory, Sale Moor and St Mary's, Locality 3 - South Trafford - Altrincham, Bowden, Broadheath, Hale Barns, Hale Central, Timperley and Village, Locality 4 - Urmston & Partington - Bucklow St Martin's (Partington), Davyhulme East, Davyhulme West, Flixton and Urmston.

Healthwatch 100		-	-										
# of surveys conducted													
Number of volunteers (total)	42	0 (38)	4 (42)										
Number of volunteer hours (total)	451	451											
Vol. hours - Research	67	67											
Vol. hrs - Engagement/ Outreach	220	220											
Vol. hrs - Training	163	164											
Website visits	3524	1685	1839										
Reports published	0	2	0										

Online and social media statistics April 2017 - May 2017

<p>Twitter</p> <p>New followers : 18</p> <p>Total followers : 1851</p> <p>Tweets : 90</p> <p>Impressions : 24,434 people</p> 	<p>Facebook</p> <p>Likes/following : 118</p> <p>Reach : 108</p> <p>Post Engagements : 102</p> 	<p>Instagram</p> <p>Posts : 7</p> <p>Likes : 260</p> <p>Followers : 88</p> 	<p>Website</p> <p>Visits : 3524</p> <p>Page views : 5993</p> <p>News articles : 21</p> 
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Key participation and involvement activities from April 1st - May 31st 2017

- Attended Trafford Talk Shop for Proud Trust run Rainbow Reflections (Trafford young LGBT & those questioning their gender) event for young people with MP Kate Green.
- Took part in Greater Manchester Mental Health NHS Trust Quality Accounts event.
- Met with Single Hospital Services implementation team with GM Healthwatch leads.
- Attended Domestic Abuse Awareness Training provided by Trafford Domestic Abuse Service (TDAS)
- Held liaison meetings with Central Manchester University Hospitals NHS Foundation Trust, Trafford Clinical Commissioning Group (CCG), the Care Quality Commission (CQC) and with the chair of the Trafford Health Overview and Scrutiny Committee.
- Participated in the new Health and Equalities group meeting with VCAT, Voice of BME Trafford, Trafford Council, Greater Manchester Mental Health NHS Trust, Pennine Care NHS and Trafford CCG.
- Met with Greater Manchester local Healthwatch.
- Attended the launch of the Trafford Mental Health Partnership and the 'Celebrating Mental Health' evening.
- Conducted an Enter & View visit to Faversham House care home.
- Attended Personal Health Budgets co-production meeting with Trafford Council and Trafford CCG.
- Took part in the Trafford Nursing and Residential care Service Improvement Partnership (SIP) meeting.
- Participated in the Joint Quality Monitoring Group.
- Attended the Trafford Deaf Partnership meeting.
- Conducted a 30 minute interview on Trafford Sound radio.





What have we heard?

The key issues coming through from feedback

We have started receiving a few calls from people unable to access NHS Dentists. People are finding that having called many dentists in the area (in one case more than 20) they are not accepting NHS patients.

There were no other recurrent themes in the feedback in April & May.

Where have we got our information from?

We collect information from a number of sources, both internally and externally.

Feedback received by us via telephone, email, via the contact form on our website, social media, by post and face to face. Our feedback system on our website gives people the opportunity to rate their care and we periodically run surveys to gather information.

In addition to feedback that is given directly to us, we also look at data from external sources, from NHS departments and NHS digital, Independent Complaints Advocacy Services (ICA), to websites like Care Opinion and NHS Choices. We analyse this information to look for patterns and see where services can be improved, or where good practice can be shared.

Services in Trafford

Trafford Hospitals' Feedback

Unfortunately due to the awful events of the 22nd May in Manchester, we had to cancel our two-day drop-in at Trafford General, where we would have expected to gather a large number of comments. However we still received 7 pieces of feedback about Trafford General Hospital, which were largely positive, particularly with regards to staff. Negative comments recorded were about changes to appointments and food being a 'let-down'. We received no feedback in this period about Altrincham Hospital.

Trafford GPs' Feedback

There were 15 pieces of feedback received about GP practices in Trafford during this period. Most were positive, however problems getting appointments, issues with reception staff and administration were reported.





Appendix 1. Our 2017-18 workplan summary

These are the key elements extracted from our full workplan.

	Title	Detail	
Performance targets Communication & engagement plan	1	Drop-ins in each of the four Trafford localities	<i>HWT to gather patient opinion, share literature and publicise HWT services. Manned by volunteers with staff support.</i>
	2	Public enquiries & signposting	<i>Ongoing throughout year: maintain helpline (telephone, email, postal and web enquiries), providing support, advice and information. Contact to be logged. Respond to public enquiries within 48 hours.</i>
	3	Identify areas of concern	<i>Ongoing throughout year: use evidence from surveys & drop-ins to identify areas of concern. Analyse data, make recommendations at liaison meetings. Include analysis from ICA.</i>
	4	Quarterly highlight reports distributed to approx 1000 people	<i>Highlight reports for public & press, including provider responses. Get draft to Board the first week after end of quarter, with view to publish end of second week.</i>
	5	Two radio interviews per year	
	6	Produce guidance & information to assist public in making the best use of services	<i>Liaise with Healthcare publications to produce annual publication. Produce more 'how to' guides.</i>
	7	Bi-monthly activity reports	<i>Activity reports for stakeholders and Board, monitoring progress towards achievement of targets.</i>
	8	Distribution of materials: information & promotion	<i>Map organisations in Trafford and circulate materials</i>
	9	Ensure accessibility of communication offerings	<i>To people of all backgrounds and abilities. Work with our young volunteers to ensure communications accessible to young people.</i>





10	Healthwatch Trafford 100	<p><i>Set up and maintain panel of Trafford residents for quick-fire surveys. General survey every quarter, specifically-targeted surveys in the months in between. Respond to what's in the news as well as gathering data for our workplan projects / new projects.</i></p> <p><i>>> 1: Access to GPs [& General information-gathering]</i></p> <p><i>>> 2: Trafford carers</i></p> <p><i>>> 3: Personal health budgets</i></p>
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Measuring Impact	1	Enter and View visits	<i>Minimum of 10 Enter and Views during the year, with reports published within 6 weeks. To include Dignity in Care assessments.</i>
	2	Increase volunteer numbers from 30	<i>For this and training, please see Volunteer Coordination section below</i>
Work programme projects	1	Study of intermediate and community care, transition and enablement	<i>As measured against the national audit of intermediate care. Two-year project, with 6 months devoted to each of the 4 elements.</i>
	2	Evaluate 24/7 mental health crisis care for Trafford adults & children	<i>Following implementation of the GM mental health strategy. Undertake interviews and focus groups.</i>
	3	Evaluation of impact on disabled people no longer eligible for Personal Independence Payments	<i>In terms of health, wellbeing and social circumstances</i>
	4	Survey two groups rated as red/amber under the Equality Diversity System	<i>As at the end of 2017. Aimed at addressing inequalities in Trafford</i>
	5	Liaise with Trafford Coordination Centre to identify specific issues of concern	<i>Continue liaison with TCC</i>
	6	Contribute to the equality & diversity annual grading for NHS providers	
	7	Survey regarding new CAMHS service mental health offer in Trafford	<i>Once new service is embedded. Focus on transition to adult services; for young people to assess whether the offer is considered to be age appropriate.</i>
	8	Men's health	<i>Internship project, intern paid for by University of Manchester</i>





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