



Annual Report 2024–2025

**Unlocking the power of
people-driven care**

Healthwatch Greenwich

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"The impact that local Healthwatch have is vitally important. Healthwatch are empowering their communities to share their experiences. They're changing the health and care landscape and making sure that people's views are central to making care better and tackling health inequalities."

Louise Ansari, Chief Executive, Healthwatch England

A message from our Chair

As chair of Healthwatch Greenwich, I'm proud to present our Annual Report, reflecting a year of championing the voices of residents.

Greenwich is a vibrant and diverse borough, but health inequalities persist, with significant differences in life expectancy and health outcomes across neighbourhoods. At Healthwatch Greenwich, we are committed to ensuring that residents in every part of our community are heard, and that their voices help reduce health inequalities and improve care for all.

In the past year, we've listened to residents across the borough, including people at food banks, children's centres, libraries, care homes and hospitals. We worked with carers, young people, and those experiencing language and digital barriers, amplifying their experiences to help shape our findings, inform our recommendations, and strengthen our work.

We've helped system partners transition from reactive care to meaningful prevention. Our work promotes care closer to home by providing feedback on community services and the challenges in accessing support outside hospital. As digital tools become central to health and care, we've championed digital inclusion, helping to identify who's being left behind and pushing for inclusive solutions. What strengthens our work is our diverse team. Our staff, volunteers, and trustees reflect the communities we serve, sharing lived experiences and insights that are essential to identifying gaps, challenging assumptions, and aligning our efforts with the lives of residents.

Thank you to our staff, volunteers, and residents who've shared their experiences. As we look ahead, our mission remains clear: to work for a fairer, more inclusive health and care system in Greenwich, one shaped by the people who use it.



"We're especially proud of how we've built trusted relationships across the system. By bringing lived experience into decision-making spaces, we've ensured that the voices of residents drive real and lasting change.

Anu Massey, Chair of Healthwatch Greenwich

About us

Healthwatch Greenwich is your local health and social care champion.

We make sure NHS leaders and decision-makers hear your voice and take action to improve services. We can help you navigate the healthcare system with confidence, connecting you with reliable, trustworthy information and advice to get the care you need.

We build trust with local communities and groups, working with them to create care that is sustainable and responsive. We put those facing the greatest inequalities at the heart of our work, making sure services are equitable for all.



Our vision

Where every resident can easily and equitably access the health and care services they need and receive exceptional service.



Our mission

To listen to all those who use health and care services in Greenwich and see to it that their needs are heard and prioritised in the design and delivery of health and care services.



Our values are:

Equity: We're compassionate and inclusive. We build strong connections and empower the communities we serve.

Collaboration: We build internal and external relationships. We communicate clearly and work with partners to amplify our influence.

Impact: We're ambitious about creating change for people and communities. We're accountable to those we serve and hold others to account.

Independence: Our agenda is driven by the public. We're a purposeful, critical friend to decision-makers.

Truth: We work with integrity and honesty, and we speak truth to power.

Our year in numbers

We've supported more than 23,954 people to have their say and get information about their care. During 2024-25, we employed between 4 to 7 staff (3.5 to 6 FTE), and our work was supported by more than 70 volunteers and community supporters.

Reaching out:



2,929 people shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

21,025 people came to us for clear advice and information on topics such as how to register with a GP and finding local support groups and wellbeing services.

Championing your voice:



We published 34 reports and briefings about the improvements people would like to see in areas like GP waiting times, enhanced social support and improved communication at hospital discharge.

Our most popular report was Enter and View Report Queen Elizabeth Hospital Urgent Treatment Centre, highlighting people's experiences of urgent care.

Statutory funding:



We're funded by the Royal Borough of Greenwich. In 2024/25 we received £145,000.

A year of making a difference

Supporting recovery at home

We carried out a deep dive into why some people stay in hospital longer than needed and what can be done to change this.

Reducing avoidable hospital stays and supporting recovery at home is a clear national priority. That's why we worked directly with residents, families and hospital staff to understand their experiences and identify practical ways to improve the discharge process and support recovery at home.

We found that poor communication, long wait times for home adaptations, and low awareness of voluntary sector support in the community contribute to longer hospital stays. Some patients lack trust in these services, often due to past experiences, cultural values, or not knowing what is available. While patients may be hesitant to accept external help, families, especially those unable to provide care themselves, are often more open to support from voluntary organisations. These organisations are looking for more referrals from hospitals to assist patients, as awareness of available resources is low among hospital staff. Additionally, the process for accessing these services could be simplified, which means valuable support is often overlooked.



"No one's really said very much about when I'm going home or what's happening."

What difference did we make?

Our findings were used by Greenwich Home First, a local initiative designed to support people to recover or stay well for longer at home.

In response to our recommendations, hospital and community teams are:

- Working more closely together, improving the way patients and families are informed about the support available to them.
- Providing clearer discharge guidance to help people understand what to expect and who can support them once they return home.
- Improving staff access to information about local services, allowing more patients to be connected with the right support.

A year of making a difference

Strengthening anti-racist practice for health equity

We evaluated the Anti-racism for Health Equity Community of Practice, an initiative uniting health, care and voluntary sector professionals to embed anti-racist practice for health equity.

Co-designed with members, our evaluation explored the impact of the Community of Practice and highlighted opportunities for growth.

Members valued the peer-led space and reflective learning approach but identified areas for improvement, including the need for stronger governance, longer-term programme planning, greater leadership involvement, clearer shared goals, and better connections to wider health equity initiatives across the system.



"It's easy to read about racism and agree that it's a problem, but applying what I'm learning in real situations, calling out bias, questioning policies, or challenging colleagues, feels harder."

What difference did we make?

Our findings are helping shape next steps, supporting the Community of Practice to drive deeper, system-wide change and support more equitable health outcomes for racialised communities across Greenwich.

In response to our recommendations, the following proposals will drive the agenda of the Community of Practice:

- Introducing an induction for members and developing a digital resource to clarify shared goals.
- Setting up an advanced 6-month programme plan so members know what to expect.
- Mapping existing health equity initiatives and feeding in learning from the Community of Practice.

A year of making a difference

Co-designing solutions with patients waiting for surgery

In partnership with Lewisham and Greenwich NHS Trust, we co-designed solutions to support patients waiting for surgery.

Through seven discussion sessions, we spoke to people on the waiting list and across the community, especially those facing health inequalities, to understand their experiences and identify ways to make information, support, and care more inclusive, accessible and responsive to real-life needs.

Patients told us they often feel isolated while waiting for surgery, describing life as “on hold”. Many said communication was poor and generic advice unhelpful. Patients wanted clearer, more personalised information, culturally sensitive support and greater inclusion of families and carers to help them feel prepared, empowered, and involved in their care.



“So, it would actually be useful if they gave you practical advice...to make life easier for each person and their specific needs.”

What difference did we make?

Our work helped shape the Trust’s patient portal, making it more accessible and user friendly. We influenced improvements to patient communication and support, and helped refine a new service to better identify patients at risk of health inequalities.

These changes are making it easier for people to navigate care, feel informed, and contribute to better surgical outcomes.

Our work is helping all patients, regardless of background, be better prepared for surgery, contributing to a more equitable and responsive approach across the Trust.

A year of making a difference

Homelessness and health inequality: Our call for action

In partnership with a local community group, we ran a series of inclusive, facilitated discussions with residents experiencing homelessness or housing insecurity.

These safe spaces enabled people with lived experience to share their views on health and care services, revealing the barriers they face and what truly person-centred, accessible support would look like for them.

Residents described feeling invisible to services, even in crisis. They spoke of missed opportunities for intervention, fragmented care, and the emotional toll of being repeatedly dismissed. Stigma, exclusion, and a lack of tailored support were consistent themes, emphasising the need for more compassionate, joined-up, and responsive health and care services for homeless residents and those living in insecure housing.



“...the major issue I face is that there is no support... I don't know what is there for me to access.”

What difference did we make?

Our report has been used to rethink how support is delivered to this vulnerable group with services linking up directly with community groups to offer greater access to homeless residents and those in insecure housing.

By amplifying marginalised voices, we're helping to drive a shift towards services that better reflect the needs, realities, and aspirations of those affected by homelessness and insecure housing.

A year of making a difference

Addressing social isolation through befriending

Our befriending project supported residents, many housebound, through personalised wellbeing calls and in-person visits.

Though small in scale, the pilot was designed to reach those at greatest risk of poor health outcomes due to isolation, disability, or wider disadvantage. By offering consistent, compassionate contact, we delivered intensive, high-impact support tailored to each person, creating space for trust, connection, and early identification of unmet needs.

Residents described the service as a lifeline, something they could count on when everything else felt uncertain. For many, it was the only regular social contact in their week, offering relief from feelings of isolation, sadness, and anxiety.



“We got along really well. We shared the same ideas. It was really nice knowing I had a friend out there who understood me.”

What difference did we make?

Through regular, compassionate conversations, residents experienced improved mental well-being, increased motivation, and a renewed sense of hope. They told us they felt genuinely listened to and valued. This trust fostered emotional resilience and, in some cases, encouraged better self-care and healthier daily habits.

Importantly, our face-to-face visits revealed risks and unmet needs, such as unsafe housing, mobility barriers, and poor health, that we quickly escalated to the appropriate services. By building strong personal relationships and connecting residents to wider support, the programme provided stability, support and a critical point of connection for those who needed it the most.

A year of making a difference

Amplifying resident voices: Driving change through feedback

Our monthly feedback report continues to serve as a powerful vehicle for change, offering real-time insights into the lived experiences of our residents.

By building trust and forging meaningful connections at a grassroots level, we amplify the voices of residents often overlooked in the system. This year alone, we supported 2,929 residents in sharing their stories, shedding light on pressing issues such as digital exclusion, language and communication barriers, and the need for compassionate, person-centred care.

These insights are not just collected; they drive action. We strategically share this feedback to support more responsive, accountable services. We highlight both where improvements are needed and where things are working well, helping good practice to be recognised and shared. Engagement from health and care partners with our reports shows our influence and signals transparency across the system.



“...Your feedback is invaluable to us in our effort to continually enhance the experience of people accessing our service.”

Greenwich Time to Talk Service Lead

What difference did we make?

In response to our feedback, services have taken meaningful steps to make care more person-centred, strengthen communication, and redesign pathways to better reflect residents' needs. For instance, a GP practice used our case study on poor patient communication and support to guide staff training. Physiotherapy services responded to a patient's experience of poor follow-up by implementing more consistent post-treatment contact to ensure patients feel better supported throughout their recovery journey.

Our insights are shaping policy as well. After the death of a resident in hospital, whose family felt unsupported, the service is using their experience to help shape a new end-of-life care policy, aiming to improve communication and provide more compassionate support for families in the future.

A year of making a difference

Listening to our partners: Strengthening collaboration for better care

Strong, collaborative relationships with our health and care partners are key to achieving better care for our residents. That's why, at the end of 2023, we sought honest feedback from system leaders about our work and in 2024, we acted on this feedback.

We launched a targeted survey to gather local health and care leaders' views on our role, effectiveness, and contribution to the local health and care landscape. We heard from over 25 senior stakeholders across the NHS, local authority, and voluntary sector. Their insights helped us shape more collaborative and impactful ways of working across the system.

What we heard:

- Stakeholders recognise our role in amplifying the voices of communities who often go unheard and providing useful insight into local issues.
- Most view us as collaborative and constructive, though a few highlighted the need for a stronger sense of partnership.
- Some felt our reports could better reflect the challenges faced by services.

What we did:

In response, we took steps to strengthen our role as a collaborative partner:

- We assigned dedicated staff to key stakeholder groups and increased regular contact to support stronger, more responsive relationships.
- We made a renewed effort to spotlight good practice, using our reports to drive system-wide learning and celebrate effective care, while acknowledging broader systemic challenges that affect care delivery.
- We looked for opportunities to align our work with system priorities where they reflected the needs and concerns of local residents, including targeted work on children and young people, carers and access to care.

Working together for change

We've worked with neighbouring Healthwatch to ensure people's experiences of care in Greenwich are heard at the Integrated Care System (ICS) level, and influence decisions made about services in the South East London Integrated Care System.

This year, we've worked with the five other Healthwatch across south east London to achieve the following:

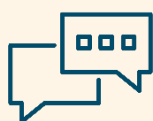
Helping communities reach local support



We ran community engagement initiatives across south east London to help people get the support they needed in ways that worked for them. This included befriending support for isolated residents, connecting them with volunteers who provided regular wellbeing calls and check-ins, and the Health Ambassadors programme, which connected residents with vital health checks.

Our engagement showed how trusted, community-based approaches helped people access local services.

Amplifying community voices



Every quarter, we gathered feedback from over 9,500 people through calls, emails, meetings, outreach, and events. We then shared this information with the ICB and ICS to help improve local services. Our system representative provided balanced insights, and recommendations, in regular reports to the ICB Quality Directorate, the Engagement Assurance Committee, and the ICP Board.

Turning insights into impact



We shared our findings at key system meetings to ensure community feedback guides planning and decision-making. This input has shaped the SEL ICS strategy, supported a new digital strategy to reduce digital exclusion, and helped improve how people and communities are involved through the ICS Engagement Toolkit.

Listening to your experiences

Services can't improve if they don't know what's wrong, or what's working well. Your experiences shine a light on issues that may otherwise go unnoticed and help us spotlight good practice that other services can learn from.

Listening to residents has been central to driving meaningful change this year. By engaging regularly and acting on what we heard, we've helped tackle inequalities and shine a light on services that are getting it right:

This year, we've taken action on your experiences by:

- Using your feedback on women's health services to work closely with partners across Greenwich in developing the Women and Girls' Health Hub, making sure it is inclusive, accessible, and designed to meet local needs.
- Amplifying the voices of residents in social housing by highlighting poor living conditions and their impact on health. We shared these experiences directly with providers to support action on housing-related challenges and improve health outcomes.
- Collaborating with local family support organisations to amplify parents' voices, highlight barriers to mental health support, and advocate for tailored, inclusive care that meets their needs.



Listening to your experiences

Creating trusted spaces for conversations about breast cancer

We worked with a local women's group to set up a breast screening workshop that reflected what mattered most to them.

After hearing about a local women's group's struggle to access inclusive breast cancer information and screening support, we took action.

Key things we heard:



- For some women, this was the first time they openly discussed their challenges, appreciating the safe, trusted, and stigma-free space the workshop provided.
- Women struggled to find information and resources on breast cancer that felt inclusive and met their needs.
- Women told us they often felt uncomfortable speaking to health professionals about their concerns, especially when the professional was male or didn't understand their cultural or religious beliefs.

What did we do?

We collaborated with the local Public Health team to organise a tailored breast cancer awareness workshop, led by a female healthcare worker. The session created a safe, supportive space for women to have open conversation about breast cancer and find local resources and support tailored to their needs.

What difference did this make?

After the workshop, women told us they felt more empowered and informed about their health. Many gained the confidence to do self-examinations at home and became more aware of what to look out for.

They shared how a women-led workshop encouraged them to ask questions without fear or judgment, helping to build trust and encouraging them to engage with healthcare services.

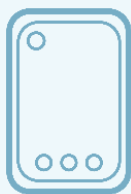
Listening to your experiences

Making digital access fairer for everyone

We made sure people who struggle to get online and use digital health services had their say in how local support is designed.

We spoke with local people who struggle to get online, including older residents, people living with disabilities, and residents with limited English. They told us how hard it is to access services, stay connected, and feel included in an increasingly digital world. Their experiences showed the need for better support, and wider resources to bridge the digital divide.

Key things we heard:



- Not all residents have access to the tools and resources needed to use digital health services.
- Not all residents trust online health tools to meet their health needs.



"The council has the Greenwich Directory online, but what about those of us who can't access it online?"

We took this feedback directly to the Royal Borough of Greenwich and collaborated with them to help shape their upcoming Digital Inclusion Strategy, helping to make sure everyone across the borough has access to the digital tools and support they need to manage their health.

What difference did we make?

As a result of our input and resident feedback:

- The council is building stronger partnerships with local community groups to better understand and address digital exclusion.
- There's a clearer focus on developing offline options, digital literacy, and building trust in online health tools.
- Residents' concerns are informing wider service planning, helping to make sure that no one is left behind in the move to greater use of digital tools.

Hearing from all communities

We're here for all residents of Greenwich. That's why, over the past year, we've worked hard to reach out to those communities whose voices may go unheard.

Every member of the community should have the chance to share their story and play a part in shaping services to meet their needs.

This year, we've connected with communities by:

- Partnering with a local Indian society during cultural celebrations like Diwali, Holi, and Navratri, creating natural spaces for community conversation. We listened to their experiences of care and shared these with services to shape more inclusive support.
- Listening to residents with dementia and their carers to understand their experiences with local support. We shared these insights with key services and pushed for improved communication and greater carer involvement.
- Working with local schools, parents, and carers' support groups to promote fair and accessible support for families of children and young people with special educational needs, focusing on stronger care coordination and clearer communication.



Improving access to services for blind and partially sighted residents

We worked with a local group that supports blind and partially sighted people to understand the challenges they face in accessing care.

Members shared experiences of confusing clinic layouts, signs that were hard to read, and staff who didn't always know how to support their communication needs, making them feel less supported in their care and decision-making.



"I had to fight to keep my appointment in the same clinic...my guide dog had difficulties adjusting to a new location."



"You don't know what you need to do until you hit a wall. Not everyone with a visual impairment can read Braille."

What difference did we make?

We shared our findings directly with the Royal Borough of Greenwich's Occupational Therapy and Sensory Services team. As a result, the team engaged directly with the group to better understand their experiences and drive improvements in how support is delivered.

The service will collaborate with partners across the system to offer expert advice, tailor support, and help address ongoing issues to make care more accessible.

Strengthening community-led mental wellbeing support

We partnered with Royal Borough of Greenwich Public Health to help grassroots organisations build the skills, confidence, and connections needed to support mental wellbeing in their communities.

Through our Be Well Support programme, we've worked with local community organisations, each rooted in the everyday realities of the people they serve. These groups delivered a wide range of support, from providing new mothers with essential care packages to creating safe, inclusive spaces for LGBTQIA+ communities.

We've:

- Boosted each group's visibility, accessibility and online engagement through providing expert resources and mentorship.
- Connected groups with key networks, helping organisations tap into broader collaboration, peer learning, and shared resources.
- Promoted safer practice by supporting groups to review safeguarding processes.
- Led efforts to help organisations access development opportunities.
- Shared training events, workshops, and funding opportunities tailored to each group's priorities.
- Strengthened digital confidence by connecting groups with clear, accessible tech guidance.



"Through the Be Well Support Programme, we've received the tools and confidence to better understand mental health and embed wellbeing into everything we do; from our weekly food projects to our nutrition and personal care workshops. The programme helped us feel less isolated in our work. It connected us to others in the borough who care deeply about making a difference, and it gave us practical ideas we could apply straight away."

Hearing from all communities

Partnering with East and South East Asian communities to design more inclusive care

We partnered with local organisations supporting women of Vietnamese and Chinese heritage to improve access to culturally tailored health support.

Understanding the lived experiences of communities facing the greatest barriers to care is essential to building a more inclusive health system. In Greenwich, we worked alongside grassroots groups to listen directly to women of Vietnamese and Chinese heritage about their experiences accessing health services.

These conversations were held in Vietnamese and Cantonese, with help from our bilingual staff and interpreters. They showed that women face many challenges, from language barriers and unfamiliar digital systems to complicated booking processes, making it harder for them to get the care they need. Access to tailored mental health support is an added concern, with many services not reflecting cultural norms or offering support in languages they can understand.

Women described feeling frustrated, isolated and reliant on family members to help them navigate their care. For older women, especially, the lack of translated materials and limited support with digital tools further deepened these inequalities.



“Most of us don’t know how [to use the NHS App]. It’s all in English and it’s difficult for someone who knows nothing about computers”

What difference did we make?

System partners are using the feedback we shared to help shape their priorities, to make care more inclusive and accessible for all residents. This includes improving how services support different languages, understand cultural needs, and make digital tools easier to use.

Through our Be Well Support Programme, we connected groups with mental health services. This led to a series of tailored mental wellbeing training sessions, strengthening community support and resilience.

Information and signposting

Whether it's finding an NHS dentist, raising a concern, or choosing a care home for a loved one – you can count on us. This year 21,025 people have reached out to us for advice, support or help finding services.



"Honestly, I was surprised when I was contacted because I thought it was just a survey and didn't take it seriously. I didn't expect to actually be reached out to. It feels good to know that our voices are being heard and that we are being included as human beings. Thank you so much for all that you do"



Helping Mandy get the right support for Tim

Thanks to Mandy's feedback, health and care services are looking at ways to improve support for residents at home.

Mandy is a full-time carer for her husband Tim, who lives with dementia. Wanting Tim to receive the best possible support, Mandy reached out to a care agency for additional help with his daily needs. But instead of easing the pressure, Mandy's experience with carers left her feeling overwhelmed and unsupported.

Carers often arrived late, or not at all, disrupting Tim's routine and leaving Mandy to manage on her own. When help did arrive, it was frequently from unfamiliar carers with little understanding of Tim's needs. Their rushed and inconsistent approach caused distress for Tim and anxiety for Mandy. With no notice of staff changes, Mandy found herself repeatedly stepping in to guide carers, leaving her no time to rest or recover.



"I stopped planning anything because I didn't know what was going to happen; I just had to take each day as it came."

Despite Mandy's efforts to resolve the situation directly with the care agency, nothing changed. Feeling ignored and exhausted, Mandy reached out to Healthwatch Greenwich for support.

What action did we take?

We listened to Mandy's concerns and made sure her voice was heard. We escalated her case directly to the council to make sure her experience was acknowledged and there were clear steps taken to improve Tim's care.

With our support and follow-up from the council, Mandy was soon contacted by the care agency to resolve any issues around Tim's care. Within six weeks, Mandy told us his care had improved, with carers becoming more punctual, consistent and care tailored to Tim's needs.

Championing Amina's right to respectful care

Thanks to Amina's feedback, a local GP practice is building on its existing work by strengthening staff training and protocols to further support compassionate, patient-centred care.

Amina depends on regular medication to manage her mental health. Ahead of a bank holiday weekend, she became anxious about her prescription running low and contacted her GP practice to request an emergency prescription.

Amina was abruptly cut off during her call to the practice, unable to get confirmation on whether the prescription had been filled. Needing to find out, she went to the practice.

At the practice, Amina wasn't listened to. When she tried to explain her needs, she felt staff were disinterested and was told there was "nothing [the practice] could do". Already distressed, Amina began to experience a panic attack. But instead of being offered support or compassion, Amina felt dismissed.



"I was told to 'grow up' and 'stop behaving like a child.'"

What action did we take?

We supported Amina to share her experience with the practice. We shared concerns about how the needs of patients living with mental health conditions are met.

As a result, the practice is reviewing staff training to include a stronger focus on compassionate, patient-centred communication, and the role of social prescribers is being reinforced to offer patients tailored support throughout their care journey.

Ending delays in care for families like Nimi and Blessing

We listened to Nimi's experience about her daughter's care, recognised the barriers she was facing and took action.

Fourteen-year-old Blessing has suffered from severe headaches for over six months, leaving her in constant pain and unable to attend school or see friends.

Her mother, Nimi, faced repeated barriers trying to get help– from multiple unresolved GP visits to a brief A&E discharge with no answers. A referral to a children's specialist led only to another instruction to go back to the GP for an MRI referral. More than a month later, they are still waiting for an MRI appointment, with no communication or support. Meanwhile, Blessing's condition remains unchanged.



“All I want is for someone to take us seriously, to investigate this properly and find something that can help her...is that too much to ask for?”

What action did we take?

We helped Nimi take action by connecting her with an advocacy organisation supporting her to assert her family's rights.

We also escalated the issue to the hospital's Patient Advice and Liaison Service (PALS), highlighting not just the delays in Blessing's care but also concerns about poor communication between teams and fragmented referral processes.

As a direct result of our intervention, the hospital contacted Nimi to apologise for the delays and discuss next steps in Blessing's care. An MRI scan has now been booked, and investigations into the cause of Blessing's headaches, which had been stalled for months, are now in progress.

These steps have given Nimi and her daughter renewed hope and clarity about the care pathway ahead.

Enter and View

Through our Enter and View programme, we're making sure the voices of residents, and their families are heard, and that those voices lead to change.

The Health and Social Care Act (2012) allows us to do Enter and View visits in any publicly funded health and social care service, like hospitals, care homes, GP surgeries, and even dentists and pharmacies.

Our trained staff and dedicated volunteers speak directly with residents, their families and frontline staff to understand experiences of care provided and identify what needs improvement.

We take what we hear and translate it into clear, actionable recommendations to shape service improvements.



Enter and View

Spotlighting learning disability care homes, supported living and respite facilities

We visited eight learning disability care homes, supported living and respite facilities across Greenwich.

What we found

- Each home personalised residents' rooms, creating a welcoming space.
- Staff were attentive and developed trusting relationships with residents.
- Sign-in books were available for visitors, but staff did not always enforce their use.
- Families appreciated flexible visiting hours but wanted more communication and updates about their loved one's wellbeing.
- One care home's sensory room lacked the vibrancy needed to make this a stimulating and therapeutic space for residents.

From insight to action

After our visits, we share tailored recommendations with homes, focused on practical improvements. In response to our recommendations, homes are:

- **Strengthening safety protocols:** Homes are reviewing their sign-in process to make sure staff are aware of this and trained to uphold it.
- **Improving communication with families:** Homes are introducing new communication channels, such as group meetings, to keep families informed about resident wellbeing, upcoming activities and other updates.
- **Enhance sensory spaces:** A care home revamped its sensory room into a more stimulating and calming space, better supporting residents' emotional and cognitive needs.

For more information, search 'Enter and View' on our website.

Enter and View

Creating more inclusive, accessible care at hospital

As part of our enter and view programme, we're visiting 20 wards and facilities at Queen Elizabeth Hospital. This year, we completed nine visits, beginning with a visit to the Urgent Treatment Centre run by Greenwich Health.

What we found

Patients told us that staff were kind and caring, and they appreciated the care they received. However, long waits and an uncomfortable waiting area made the experience more difficult, especially when people were waiting for a long time.



"The doctor asked if I wanted a female staff member, and he called for a female assistant. They were both very nice and everyone was respectful."



"I asked about waiting times. They took my sons name and gave me an estimate but [they said] there was no way of knowing the actual time."

From insight to action

After our visit to the Urgent Treatment Centre, we created practical recommendations to improve patient experiences while waiting, such as installing digital displays for waiting times, improving accessibility features and signage, upgrading the waiting area to include charging stations, vending machines and a water station to make this a more comfortable, inclusive environment, and clarifying information on referrals and discharge.

The Urgent Treatment Centre is implementing our findings, with steps being taken to improve comfort, accessibility, and access to clearer information for patients waiting to be seen. These changes aim to create a more inclusive and reassuring experience for everyone.

For more information, search 'Enter and View' on our website.

Showcasing volunteer impact

This year, our work was made possible by the dedication of both our core volunteers and community supporters who generously gave their time.

Our team of 25 core volunteers contributed over 200 days to help us improve local services. Alongside them, more than 40 community supporters joined us on outreach activities, sharing what time they could to help us reach further into our community.

Together, they have:

- Visited care homes and hospital wards to speak with residents and patients, helping us to build a fuller picture of care from the perspective of those receiving it.
- Spent time with people who feel lonely or isolated, offering friendly chats and emotional support to improve wellbeing.
- Supported residents access to trustworthy and accessible advice to help them get the support and information they need to navigate their care confidently.
- Reached deeper into the community through outreach, surveys, and events, helping more people share their views and be heard.



Lana's befriending experience

"Knowing I could make even a small impact, just by listening and being there for her, feels incredibly rewarding"

When Lana first decided to volunteer as a befriender with Healthwatch Greenwich, she wasn't sure what to expect but soon, her weekly calls with 83-year-old Emma became an important part of her day.

Through her conversations with Emma, Lana realised that befriending isn't only about reducing loneliness, it's about helping someone feel connected, valued, and part of the community

“It's not just about keeping people connected; it's about helping them feel alive and engaged in the world. Emma told me how much she looks forward to our calls. She said it keeps her mind engaged and breaks up her day. Knowing I can make even a small impact just by listening feels incredibly rewarding.”

Lana

One of the moments that stayed with Lana came during a chat with Emma about something as simple as shopping. For Lana, it's a regular part of life, sometimes even a chore. But for Emma, a disabled person, going shopping is a rare treat.

“I mentioned that I needed to go shopping, and she said how much she would love to accompany me. It was such a simple comment, but it broke my heart. It highlighted how much she misses doing everyday things that many of us take for granted.”

Lana

Despite the challenges that people like Emma face, Lana knows just how much of an impact befriending has, not just on Emma's life but her own.

“I've learned so much from befriending- how to listen more deeply, how to empathise, and how to connect with someone whose life experience is so different from mine. It has taught me patience. These are skills I will carry with me forever. ”

Lana

Showcasing volunteer impact

Championing future voices

For over three years, we've worked with the University of Greenwich to give more than 50 students hand-on experience.

Through our placement programme, students have built their confidence, learned new skills, and helped us improve local health and care services.

One highlight was our Careers in Public Health webinar, where students heard from guest speakers and got advice on how to build careers in health and care.

In 2024, we expanded our partnership to offer a paid summer internship, giving students the chance to work on a wider range of projects and be paid for their time. We're now developing a new Paid Project Support Internship.

Our students bring fresh ideas, diverse perspectives, and a strong sense of purpose. Their insight helps us see things differently, challenge assumptions, and better reflect the needs of all Greenwich residents.

We're proud this work has been recognised:

- We won the Employer Impact Award from the University of Greenwich.
- We were shortlisted for a national award for supporting student career development.

"One of the most powerful parts of our partnership with the University of Greenwich is the diversity of students we engage with. Many come from backgrounds that are underrepresented in health and care leadership, and their lived experiences bring fresh ideas and challenge us to think differently. The University's focus on social mobility means we often work with first-generation students, carers, or young people balancing work and study, making their contributions all the more impressive and valuable. These students don't just support our work; they shape it, strengthen it, and make it more inclusive and grounded in real life."

**Kiki Bourcha, Engagement and Volunteer Manager
Healthwatch Greenwich**



Hui's internship experience

From day one, I felt really welcomed and part of the team. I originally joined to build some professional skills and learn how a health organisation works, but what I ended up getting from the experience went way beyond what I expected.

I got to try out lots of different parts of the organisation and be involved in some brilliant community projects.

One of the highlights for me was working with the research team on co-production projects. I helped screen residents who wanted to get involved and supported workshops with local people and NHS staff. It was really rewarding to see these projects come together and know I'd played a part in that.

I also helped out with the Healthwatch Greenwich befriending service, where we visited residents who were feeling isolated. Spending time with them and listening to their experiences really opened my eyes and showed me just how much of a difference the team is making in people's lives.

This whole experience helped me see how meaningful local work can be, and how powerful it is to involve people in shaping the services that support them.



"Being part of Healthwatch Greenwich gave me the chance to connect with local residents, support important community projects, and see first-hand how listening to people can shape better services. It was more than just a placement; it was an experience that really made a difference."

Hui

Be part of the change.

If you've felt inspired by these stories, contact us today and find out how you can be part of the change.



www.healthwatchgreenwich.co.uk



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Message from our CEO

At Healthwatch Greenwich, our role is to understand what health and care services feel like for people using them, and to make sure that reality reaches decision-makers shaping those services. This year, the stories we've heard from residents have been as powerful as ever, some hopeful, many frustrating, and all essential to the work of improving care in our borough.

We've seen the impact of national changes playing out locally: a stronger emphasis on prevention, a transition from analogue to digital delivery, and a drive to deliver care closer to home. These ambitions are welcome, but without careful attention to equity, they risk deepening existing inequalities. We've seen this first-hand:

- The shift toward preventative care means earlier intervention, but many of the communities most in need still struggle to access even the basics. We've used our insight to highlight how social and economic factors, like housing, income, and caring responsibilities, shape people's ability to engage with early support.
- Digital-first services may increase efficiency for some, but for residents without the tools, skills, or confidence to engage online, they are a barrier.
- The shift to care closer to home offers opportunities, but only if care is coordinated and clearly communicated. We've listened to people navigating confusing systems, missing appointments because of unclear referrals, or unsure where to go when care moves out of hospitals and into neighbourhoods. Our evidence has pushed for clearer pathways and more joined-up working.

Our work depends on the honesty of the people who speak to us. It also depends on the belief, shared by our system partners that services are better when they are shaped by those who use them.

As we look ahead, we know the system will continue to evolve. But our focus remains steady: to listen, to amplify, and to make sure the voice of Greenwich residents helps shape services that are fair, accessible, and work for everyone.

"Behind every statistic is a person. Our role is to make sure their experience shapes the system, not the other way around."

**Joy Beishon, Chief Executive Officer
Healthwatch Greenwich**



Finance and future priorities

We receive funding from Royal Borough of Greenwich under the Health and Social Care Act 2012 to help us do our work.

Our income and expenditure:

Income		Expenditure	
Annual grant from Royal Borough of Greenwich	£145,000	Pay & staff costs	£256,000
Additional income	£274,000	Non-pay expenditure	£10,000
		Office expenditure	£41,000
		Year end adjustment	£50,000
Total income	£419,000	Total Expenditure	£357,000

*Additional income received from: Charlton Athletic Community Trust, Lewisham and Greenwich NHS Trust, Royal Borough of Greenwich, South East London Cancer Alliance, and South East London ICS.



Finance and future priorities

Next steps:

We will keep reaching out across Greenwich, especially to people in the most deprived and underrepresented communities, so that those in power hear their views.

Our top three priorities for the next year are:

Primary Care

Some residents still face barriers when trying to book appointments, receive joined-up care, or access support that reflects their cultural needs. By taking a neighbourhood approach, we'll focus on understanding these challenges at a local level, recognising that different areas and communities across Greenwich have different needs. We'll work closely with residents, community organisations, and primary care services in specific neighbourhoods to help improve access and reduce health inequalities where they are felt most.

Championing Wellbeing

We will continue to work closely with community organisations, recognising the role they play in reaching residents who are often overlooked or underserved by mainstream services. Through training, insight sharing, and stronger connections with health and care partners, we will support these organisations to be more confident and better equipped to respond to the needs of their communities. By championing community-led approaches and investing in trusted local relationships, we aim to help shape care that is more inclusive, culturally responsive, and rooted in what matters to people.

Prevention and Early Intervention

Over the coming year, we will explore how health and care services in Greenwich can better support people to stay well, stay independent, and avoid unnecessary hospital care. We want to understand how services are working to keep people well at home, particularly for those with long-term conditions or complex needs. We'll pay close attention to how well different parts of the system are working together, including GPs, social care, community health teams, and hospital discharge services. Our aim is to support more joined-up, person-centred approaches to prevention and community-based care, ones that reflect the needs of our diverse Greenwich communities.

Statutory statements

Healthwatch Greenwich, 9–11 Gunnery Terrace, Woolwich Arsenal, London SE18 6SW

Healthwatch Greenwich uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Involvement of volunteers and lay people in our governance and decision-making.

Our Healthwatch Board consists of 8 members 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 2024/25, the Board and sub-committees met 5 times and made decisions on matters such as our policies and risk register.

We ensure wider public involvement in deciding our work priorities through ongoing outreach in community spaces where residents share their top health and care concerns, and our use of surveys, interviews and Enter & View visits.

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 insight into their experiences of using services. This includes both formal feedback mechanisms and more participatory, community-led methods.

During 2024/25, we have been available by phone and email, provided a web form on our website, and engaged through social media. We've also attended meetings of community groups, held listening events in neighbourhood venues, and worked alongside local partners to gather feedback in spaces that residents already trust and use.

We've used peer research and co-production techniques to involve local people directly in shaping our work, particularly those from underrepresented communities, making sure that insight is gathered by, with, and for residents. Our annual report is made widely available, published on our website and distributed in printed form across the borough.

Statutory statements

Taking people's experiences to decision-makers

We take insights and experiences to decision-makers in South East London Integrated Care System. For example, we share our findings and feedback in meetings with the Healthier Greenwich Partnership, Greenwich Joint Commissioning Board, and Health Inclusion Steering Group. We also share our data with Healthwatch England to help address health and care issues at a national level.

Healthwatch representatives

Healthwatch Greenwich is represented on the Greenwich Health and Wellbeing Board and Healthier Greenwich Partnership (our integrated care partnership in Greenwich) by Joy Beishon, Chief Executive Officer.

Healthwatch Greenwich was represented at South-East London Integrated Care System by Folake Segun until October 2024.



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