

2025/26 Greater Manchester Joint Health Scrutiny Committee

Annual Report

1. Introduction

The Greater Manchester JHS Committee plays a key role in providing democratic and independent oversight of health and social care services across the ten boroughs of Greater Manchester. Operating within a devolved and evolving health and social care system, the Committee scrutinises the planning, provision and operation of services to ensure they are effective, accountable and responsive to the needs of local communities. This report summarises the Committee’s work, priorities and impact during the 2025/26 municipal year.

2. Background

Established with delegated powers from the ten Greater Manchester Local Authorities (LAs) (Bolton, Bury, Manchester, Oldham, Rochdale, Salford, Stockport, Trafford, Tameside and Wigan), the Greater Manchester JHS Committee is comprised of representative Members from each of the LAs, ensuring broad political representation.

Its core function is to undertake all necessary health scrutiny activities as mandated by the LA (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, as amended.

The Committee’s remit covers the scrutiny of:

- Strategies, policies, actions, and consultations of the Manchester Integrated Care Partnership (ICP) including:
 - NHS Greater Manchester.
 - Functions carried out in Greater Manchester by NHS England under delegated authority under any devolution agreement.
 - The joint work of the Greater Manchester Provider Collaboratives.
 - Relevant public health functions including those undertaken by the UK Health Security Agency and the Office for Health Improvement and Disparities.

- LAs across Greater Manchester regarding their role as providers and commissioners of social care, and as public health agencies.
- All other cross-boundary NHS services (eg, North West Ambulance Service, Christies, Specialist Children's Services provided by the Royal Manchester Children's Hospital).
- Proposals for substantial developments or variations in health service provision within the area that are considered notifiable under Regulation 23 of the LA (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, as amended. A substantial variation, while not explicitly defined in guidance, typically refers to changes significantly impacting a large number of people (such as closure or downgrading of services like an Emergency Department) or having a critical impact on a specific, smaller group.
- Services provided to patients living and working across Greater Manchester.
- Specific health issues that transcend geographical boundaries within the region.

The Committee's overarching objectives are to ensure that the needs of local people are central to health service delivery and development, and to contribute to the reduction of health inequalities by ensuring services are accessible to all residents.

3. What Has Been Achieved and When

During the 2025/26 municipal year, the Greater Manchester JHS Committee continued to deliver a wide-ranging and focused programme of scrutiny, reflecting both system-wide priorities and issues of concern. The Committee maintained oversight of key strategic developments, while also undertaking more detailed consideration of selected topics through structured reports and deep-dives.

Examples of key areas of scrutiny:

- **Annual Meeting and Work Programming (17 June 2025):**

At its Annual Meeting, the Committee agreed arrangements for the year ahead, including appointing the Chair and confirming membership. Members discussed what should be prioritised during the year and agreed to keep a strong focus on prevention, early intervention and building on work already underway. These themes helped shape the Committee's work programme for 2025/26.

- **Supporting our Workforce and Procedures of Limited Clinical Value**

(16 September 2025):

The Committee looked at how NHS Greater Manchester is supporting its workforce, including issues around staffing levels, wellbeing and long-term sustainability.

Members also considered an update on Procedures of Limited Clinical Value, discussing how decisions are made, how fairness and access are managed, and what this means for patients and staff across Greater Manchester.

- **Ten-Year Health Plan and NHS Greater Manchester Operating Model**

(14 October 2025):

Members received updates on the Government's Ten-Year Health Plan and how NHS Greater Manchester is changing the way it operates. The discussion focused on how long-term plans are being put into practice locally, and how the NHS is adapting during a period of significant change.

- **Improving Adult Attention Deficit Hyperactivity Disorder (ADHD) Services and Major Trauma Provision – Patient Engagement and Operating Model**

(11 November 2025):

The Committee considered work to improve ADHD services, including access to services, staffing challenges and patient experience. The discussion also included children's ADHD and the temporary cessation of the Right to Choose process, leading to the Committee to request a timeline for the changes and a timely update so they could be assured the changes were improving the position for patients and their families. At the same meeting, Members also examined major trauma services, focusing on how patients are involved and how services are organised to make sure care remains safe, effective and responsive.

- **In Vitro Fertilisation (IVF) Provision and Primary Care Access – Annual Update**

(9 December 2025):

Scrutiny focused on access to In Vitro Fertilisation (IVF) services across Greater Manchester, alongside an annual update on primary care access. Members discussed differences in access, capacity pressures and fairness across areas, and how patient experience and outcomes are being monitored and improved. The Committee was concerned to find that after this discussion the NHS GM Board approved an option rejected by the public and asked for feedback and the minutes of this decision.

- **Health of the Population (17 February 2026):**

The Committee discussed wider population health issues, including the factors that affect people's health beyond healthcare services. Members looked at how data and local, place-based approaches are being used to tackle health inequalities and improve outcomes across Greater Manchester.

Consistent themes across scrutiny include:

- **System Reform, Governance and Accountability:**

Throughout the year, the Committee regularly looked at how changes to the health and care system were being managed. Members focused on how decisions are made, who is accountable, and how local people's interests are protected during ongoing NHS reforms. The Committee wrote to Wes Streeting, Secretary of State for Health and Social Care to request that financial matters associated with the ICB reform could be settled to support staff. The Committee also wrote to the staff at the ICB to offer their support and acknowledge their work under difficult circumstances.

- **Patient Experience and Public Voice:**

A consistent theme was the importance of listening to patients and the public. Members often asked how people were being involved in decisions, how feedback and lived experience are used, and whether engagement is meaningful and inclusive.

- **Scrutiny During System Change and Uncertainty:**

During 2025/26, the Committee worked against a backdrop of significant change and some uncertainty. Members regularly sought reassurance about how risks, pressures and financial challenges were being managed, and what this meant for services, patients and fairness across Greater Manchester.

4. How the Committee Worked During 2025/26

Throughout the 2025/26 municipal year, the Greater Manchester JHS Committee operated as an active and Member-led scrutiny forum, providing consistent oversight of complex and evolving health and care issues across Greater Manchester.

The Committee met regularly during the year, maintaining momentum and continuity in its work programme. Meetings were structured to allow sufficient time for detailed discussion, challenge and assurance, supported by preparatory reading and follow-up activity by Members and Officers. This enabled the Committee to engage meaningfully with both strategic developments and specific service issues as they emerged.

- **Engagement with NHS Greater Manchester and System Partners:**

Senior officers from NHS Greater Manchester, the Integrated Care Board (ICB) and wider system partners attended meetings throughout the year. Their attendance supported open and constructive dialogue, allowing Members to question, test and seek reassurance on a wide range of issues, including service access, workforce pressures, system reform, and proposed service changes. This regular engagement played a key role in supporting effective scrutiny and accountability.

- **Independent, Non-Executive Scrutiny:**

The Committee is made up entirely of non-Executive, non-Cabinet Members from the ten Greater Manchester LAs. This supports an independent scrutiny function, providing constructive challenge while remaining separate from executive decision-making. Members brought local insight from across Greater Manchester, helping to ensure that scrutiny remained grounded in the experience of residents and communities.

- **Officer Support and Governance:**

The Committee was supported throughout the year by officers from the GMCA Governance and Scrutiny Team. This support ensured that meetings were well planned and administered, agendas were coordinated, reports were received in a timely way, and Members were kept informed. Effective officer support enabled the Committee to focus its time on scrutiny rather than process.

- **Public Access and Transparency:**

All Committee meetings were held in public, with agendas, reports and minutes published on the GMCA website. Where possible, meetings were webcast to enable wider public access. This openness supports transparency and allows residents, partners and stakeholders to follow the Committee's work.

- **Early and Forward-Looking Scrutiny:**

A key feature of the Committee's approach during 2025/26 was early engagement on emerging issues. The inclusion of regular updates on service reconfigurations and forward plans helped Members to maintain oversight of potential changes at an early stage, understand proposed engagement and consultation activity, and track progress over time.

- **Improving Stakeholder Engagement to Benefit Patients:**

During the year it was agreed that the Voluntary, Community, Faith and Enterprise (VCSE) sector would be invited to be a nonvoting advisory member of the Committee for the 2026/27 municipal year. This reflects the move to more work being done at a community level. The Committee also recognised the value of health inequality data and agreed to include someone from this area to support the committee's workplan in 2026/27.

Overall, the Committee's way of working during 2025/26 supported informed and effective scrutiny, helping to provide assurance, highlight areas of concern, and contribute to greater transparency and accountability across the Greater Manchester health and care system.

5. Conclusion

The 2025/26 municipal year saw the Greater Manchester JHS Committee continue to play an important role in overseeing health and social care services across Greater Manchester. Through ongoing engagement with key issues and a focused work programme, the Committee has supported transparency, accountability and clear assurance within a complex and changing system.

The active involvement of Members from all ten LA, together with open and constructive engagement with NHS Greater Manchester and wider system partners, enabled the Committee to explore challenging issues in depth and respond to emerging priorities.

Overall, the Committee's work has helped strengthen understanding across the system and has contributed to ongoing efforts to improve services, outcomes and the reduction of health inequalities for communities across Greater Manchester.

6. Next Steps

Looking ahead to 2026/27, the Greater Manchester JHS Committee will continue to deliver a focused and flexible work programme, shaped by priorities, system developments and issues of importance to residents across Greater Manchester. Key next steps include:

- Maintaining oversight of system preparedness and recovery, including learning from winter pressures, elective care recovery and how services are adapting to ongoing system change.

- Continuing scrutiny of access to services and equity, with planned consideration of primary care, dentistry and pharmacy services, IVF, Adult ADHD services and paediatric audiology, focusing on variation, capacity pressures and patient experience.
- Scrutinising workforce capacity and sustainability across health and social care, alongside procedures of limited clinical value, adult social care and children and young people's mental health services.
- Keeping population health and inequalities at the centre of scrutiny, including planned work on cardiovascular disease prevention, diabetes, obesity and wider population health data, supporting a continued focus on prevention and reducing health inequalities.
- Maintaining early and forward-looking scrutiny, through regular updates on service reconfiguration and work programme monitoring, enabling Members to understand emerging issues and track proposed changes over time.
- Using a mix of regular updates and themed deep-dives, where appropriate, to allow more detailed scrutiny of complex or cross-cutting issues while remaining responsive to new and emerging concerns.