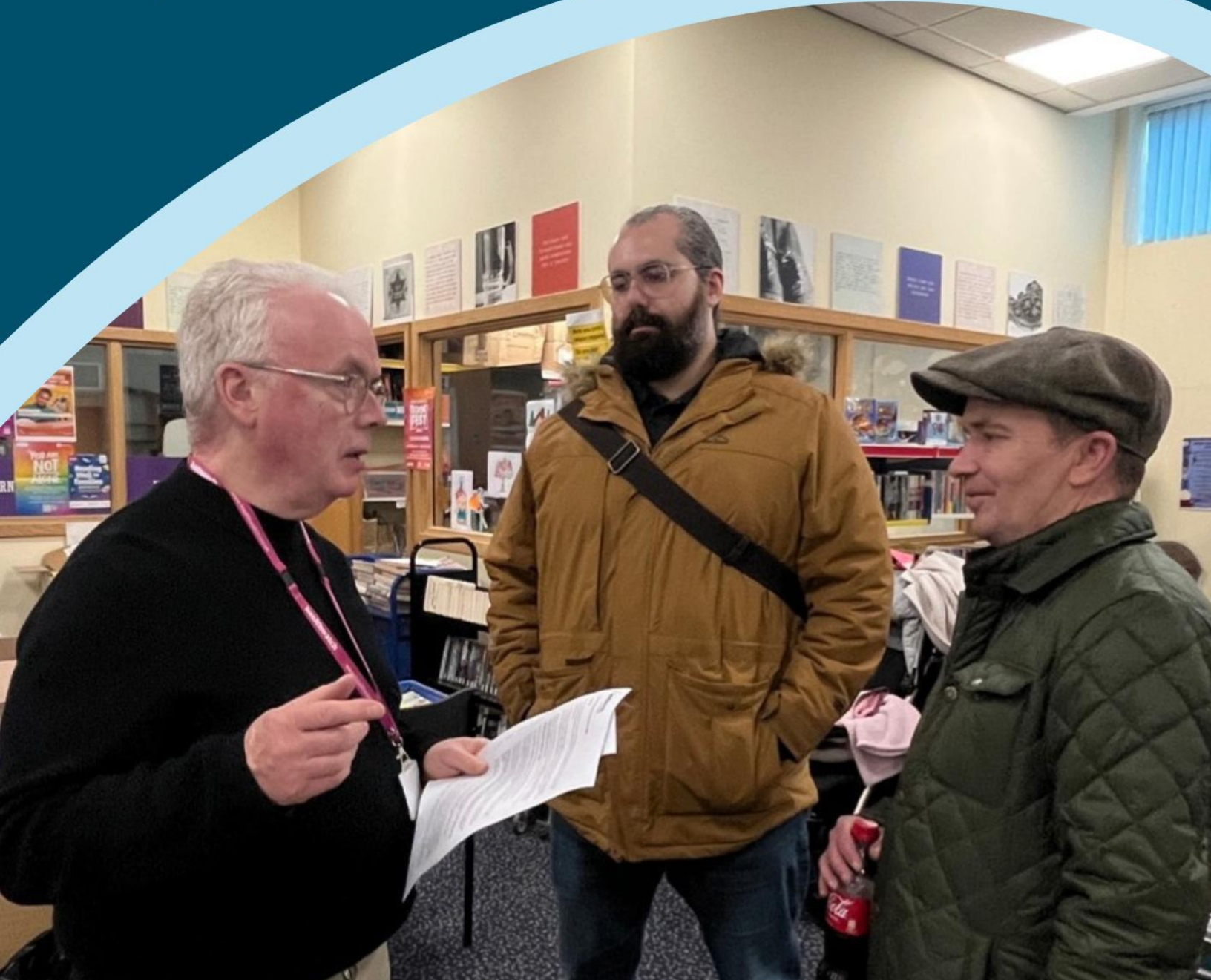


# Health and Care Priorities in Portsmouth: Findings from the 'What Matters Most' Survey

April 2026



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## Executive summary

Healthwatch Portsmouth conducted the “What Matters Most” survey to understand which health and care services are most important to local residents and to ensure that future work is shaped by what people say matters most.

This analysis is based on 424 responses. Respondents were asked to select up to three priorities from a list of 23 health and care service areas.

Primary care services were the clear top priority, selected by 53.6% of respondents. NHS Dentistry ranked second (34.4%), followed by Accident and Emergency (31.9%).

A second tier of priorities included Hospital Departments, Outpatients and Clinics (17.2%), Cost-of-living issues (16.5%), Adult Social Care (16.1%), and Adult Mental Health Services (15.6%).

Across most demographic groups, the same three issues remained dominant: Primary care services, NHS Dentistry, and Accident and Emergency.

Differences by age and postcode were visible in the data, but the broad pattern remained consistent. Ethnicity findings should be interpreted with caution because the sample was heavily weighted toward White respondents and some ethnic categories had very small numbers.

## 1. Background and purpose

Healthwatch Portsmouth (HWP) is the independent champion for people using health and social care services. Our role is to ensure that local people's voices are heard, and that their experiences and priorities inform how services are designed, delivered, and improved.

This survey was designed to help us to identify which services matter most to local residents, and to inform HWP's 2026–27 work plan based on what people have said is most important to them.

## 2. Methodology

A short survey was developed with a single question asking respondents to select up to three health and care topics that matter most to them from a list of 23 options, followed by demographic questions on postcode, age, gender, and ethnicity.

The survey was conducted on Healthwatch Portsmouth's Smart Survey platform, which provides a secure and confidential environment for data collection. Responses were collected anonymously, and no personal identifiable information was required. All data was handled in line with data protection requirements, ensuring that individual responses remain confidential and are used only for analysis and reporting purposes. To reduce barriers for people affected by digital exclusion, engagement officers and volunteers also supported completion through community outreach and paper copies.

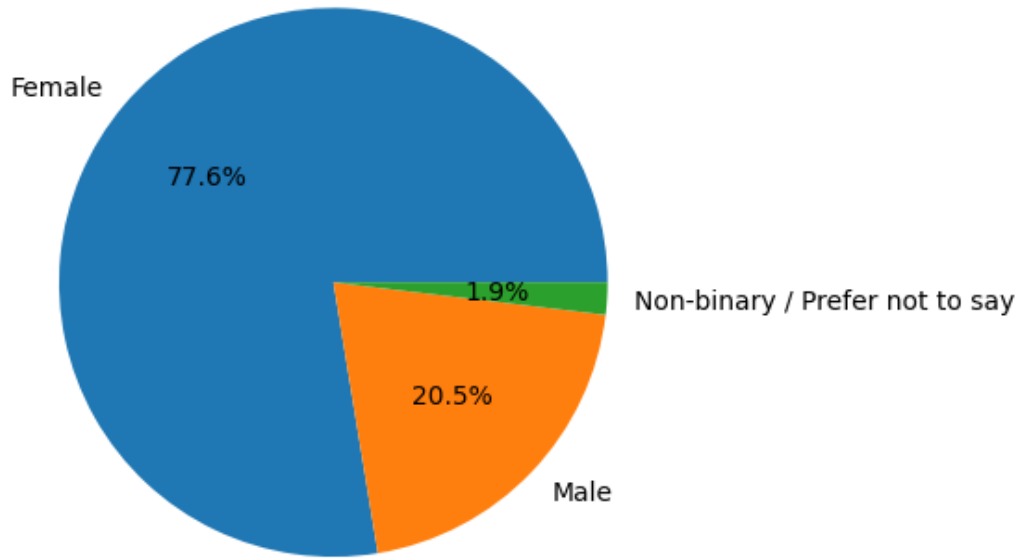
A total of 442 people responded to the survey. Responses were reviewed to ensure relevance to Portsmouth, and those outside the local area were excluded. After excluding responses outside the PO1–PO6 postcode areas, there were 424 responses from Portsmouth residents. Therefore, the findings presented in this report are therefore based on 424 responses. Respondents were able to select up to three priorities. Most participants chose multiple options: 79.2% selected three priorities, 11.8% selected two, 6.3% selected one, and 2.7% did not select any. As multiple selections were permitted, percentages in this report do not add up to 100%.

## 3. Who participated in the survey?

### Gender of respondents (n=424)

Of the 424 respondents, 329 were female (77.6%) and 87 were male (20.5%). A small number of respondents (n=8, 1.9%) identified as non-binary or preferred not to say; due to the small sample size, this group has not been further subcategorised.

### Gender Profile (n=424)

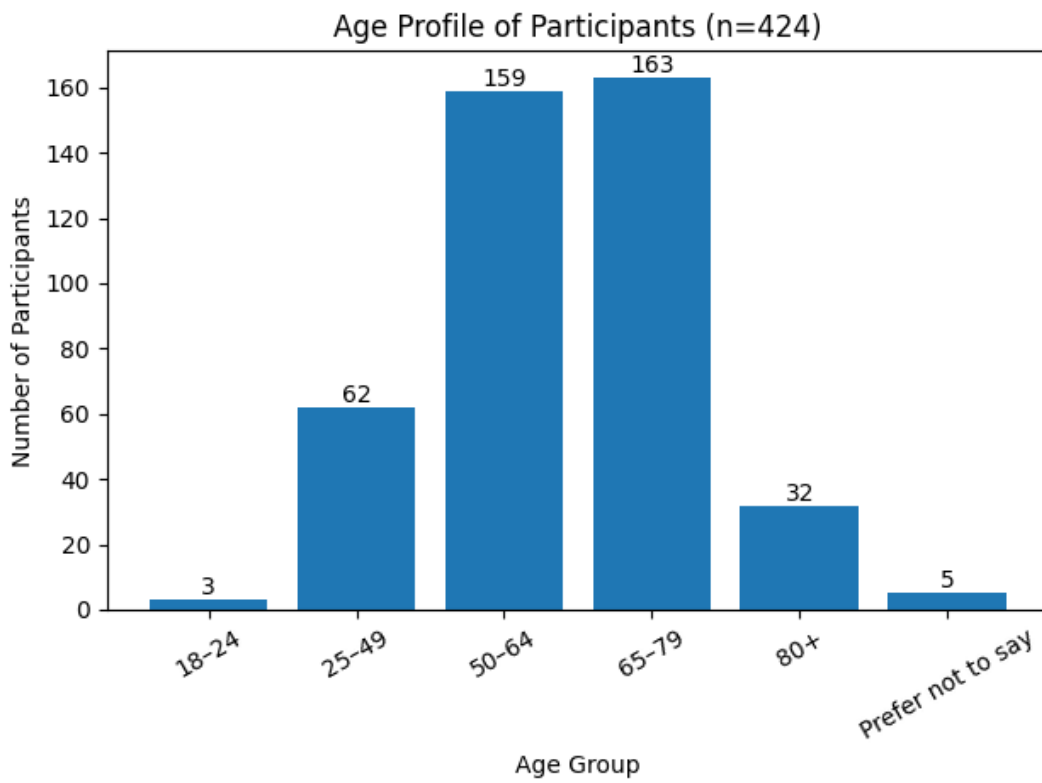


### Gender profile

Gender	Count	Percent
Female	329	77.6
Male	87.0	20.5
Other / non-binary/ Prefer not to say/ Prefer not to say	8	1.9

### Age profile of participants(n=424)

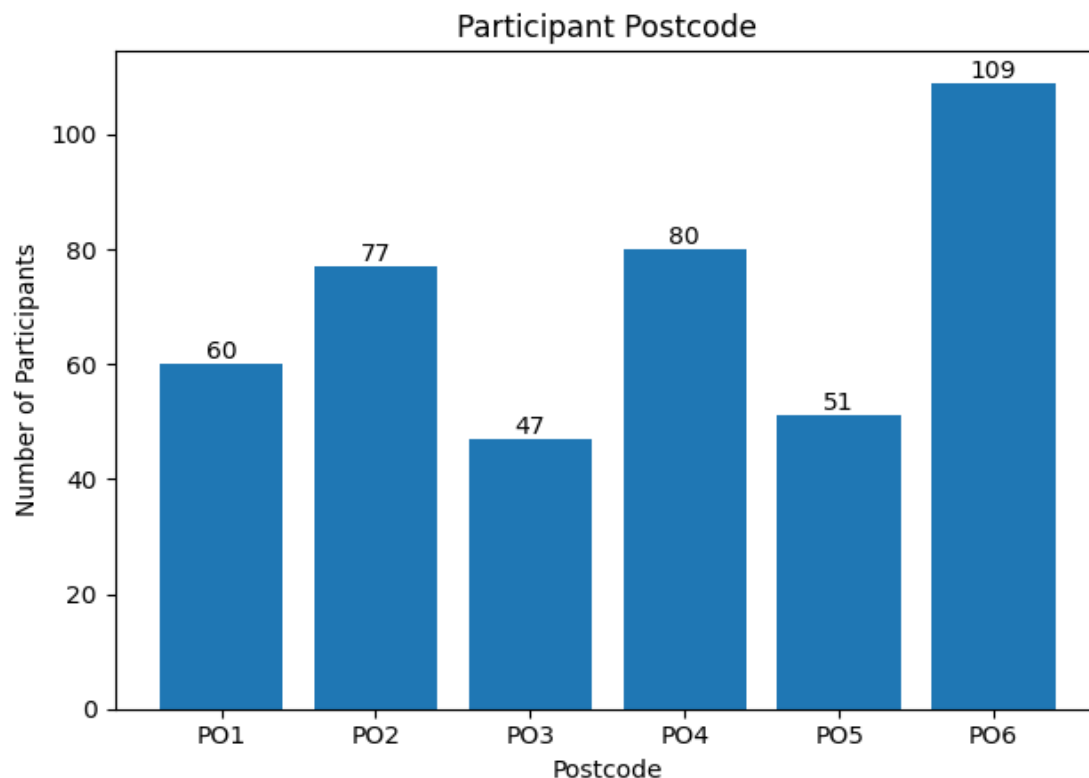
The age profile of participants shows that the largest groups were aged 65–79 years (38.4%, n=163) and 50–64 years (37.5%, n=159). Participants aged 25–49 years accounted for 14.6% (n=62), while those aged 80+ made up 7.5% (n=32). Very small numbers were recorded for younger participants aged 18–24 years (0.7%, n=3). A small proportion of respondents (1.2%, n=5) preferred not to state their age.



## Age profile

Age group	Count	Percent
18 - 24 years	03	0.7
25 - 49 years	62	14.3
50 - 64 years	159	37.5
65 - 79 years	163	38.4
80+ years	32	7.5
Prefer not to say	05	1.2

## Postcode of participants

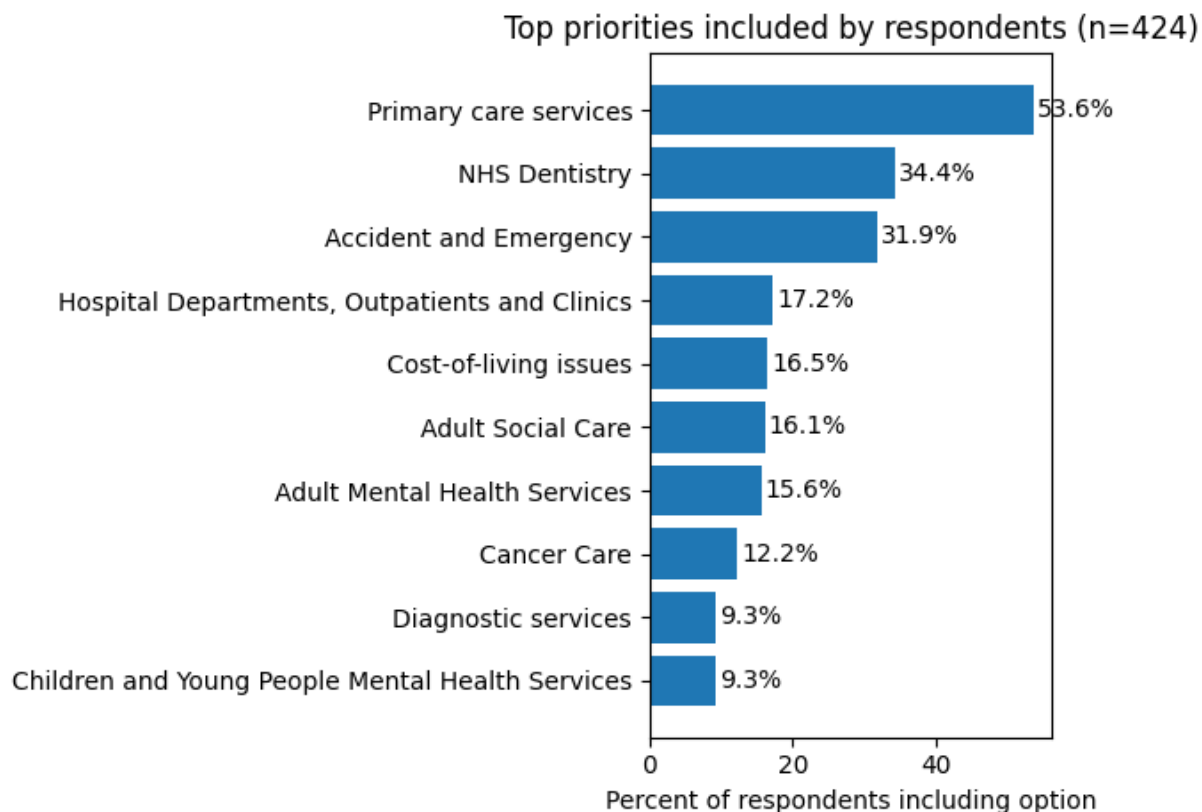


Responses were received from Portsmouth postcodes, with the highest number from PO6 (n=109, 25.7%), followed by PO4 (n=80, 18.9%) and PO2 (n=77, 18.2%). PO1 accounted for 60 (14.2%) participants, while PO5 and PO3 had 51 (12.0%) and 47 (11.1%) responses respectively. This shows a broad spread of participation across all Portsmouth areas, with slightly higher representation from PO6.

## Postcode profile

Postcode	Count	Percent
PO1	60.0	14.2
PO2	77.0	18.2
PO3	47.0	11.1
PO4	80.0	18.9
PO5	51.0	12
PO6	109.0	25.7

## 4. Overall priorities



Primary care services were the clear top priority, selected by 53.6% of respondents. NHS Dentistry (34.4%) and Accident and Emergency (31.9%) were also identified as key concerns, highlighting ongoing challenges in accessing urgent and routine care.

A second group of priorities included Hospital Departments, Outpatients and Clinics (17.2%), Cost-of-living issues (16.5%), Adult Social Care (16.1%), and Adult Mental Health Services (15.6%).

Other areas such as Cancer Care (12.2%), Diagnostic services (9.7%), and Children and Young People's Mental Health Services (9.7%) were also identified, though by smaller proportions of respondents.

## Top 10 priorities overall

Priority area	Count	Percent
Primary care services	237	53.6%
NHS Dentistry	152	34.4%
Accident and Emergency	141	31.9%
Hospital Departments, Outpatients and Clinics	76	17.2%
Cost-of-living issues	73	16.5%
Adult Social Care	71	16.1%
Adult Mental Health Services	69	15.6%
Cancer Care	54	12.2%
Diagnostic services	41	9.7%
Children and Young People Mental Health Services	41	9.7%

## Lowest-ranked priorities

Priority area	Count	Percent
Residential Care	15	<b>3.5%</b>
Services for unpaid carers	12	<b>2.8%</b>
Maternity Services	10	<b>2.4%</b>
Frailty services	8	<b>1.9%</b>

The lowest-ranked priorities were Residential Care (3.5%), Services for unpaid carers (2.8%), Maternity Services (2.4%), and Frailty services (1.9%). These figures show the percentage of people who selected each option. Percentages represent the proportion of respondents who selected each option. As respondents could choose up to three priorities, the total percentage exceeds 100%.

## 5. Analysis of priorities by gender

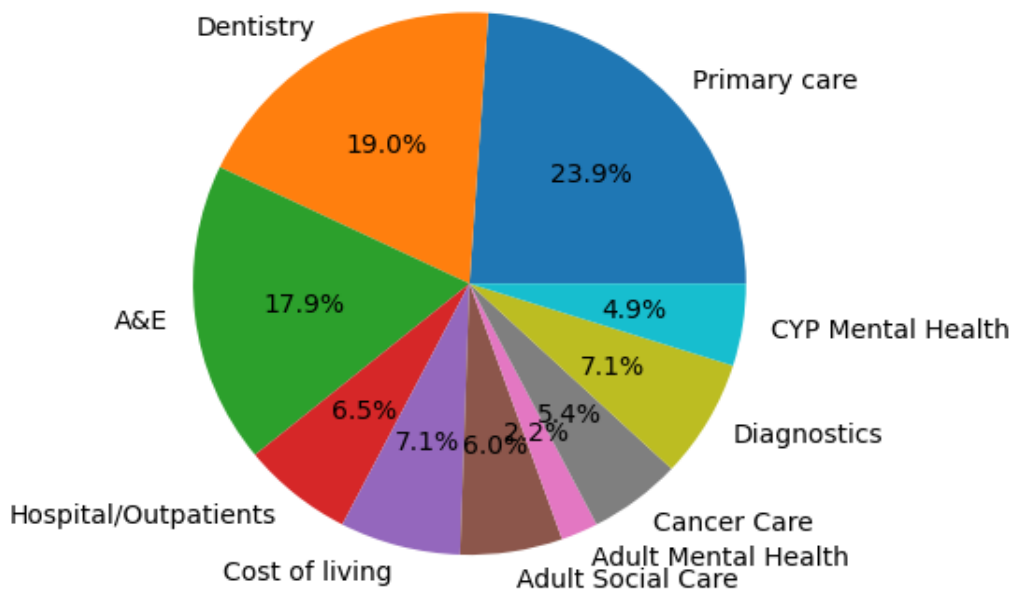
Among all gender categories, the same three services were most important: Primary care services, NHS Dentistry, and Accident and Emergency.

Primary care services were selected by 179 out of 329 women and 44 out of 87 men. NHS Dentistry was selected by 108 out of 329 women and 35 out of 87 men, while Accident and Emergency was chosen by 101 out of 329 women and 33 out of 87 men.

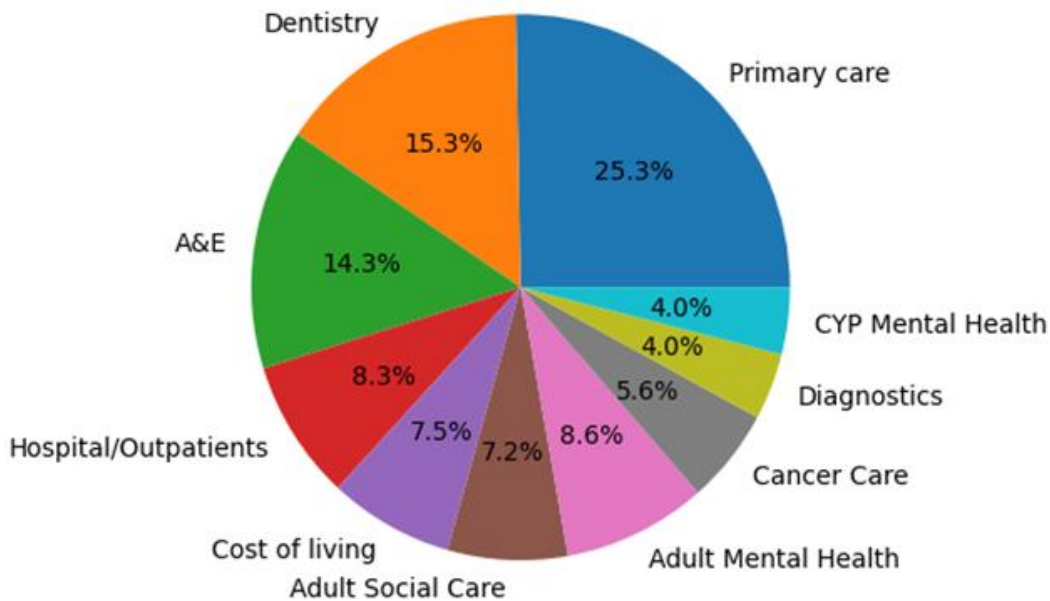
Men were slightly more likely than women to prioritise NHS Dentistry and Accident and Emergency relative to their group size, while women were more likely to select Adult Mental Health Services (61 out of 329 women compared to 4 out of 87 men).

These counts should be interpreted independently for each priority. They should not be added together, as respondents could select up to three options, and many respondents selected more than one priority.

Male Priorities (Top 10)



## Female Priorities (Top 10)



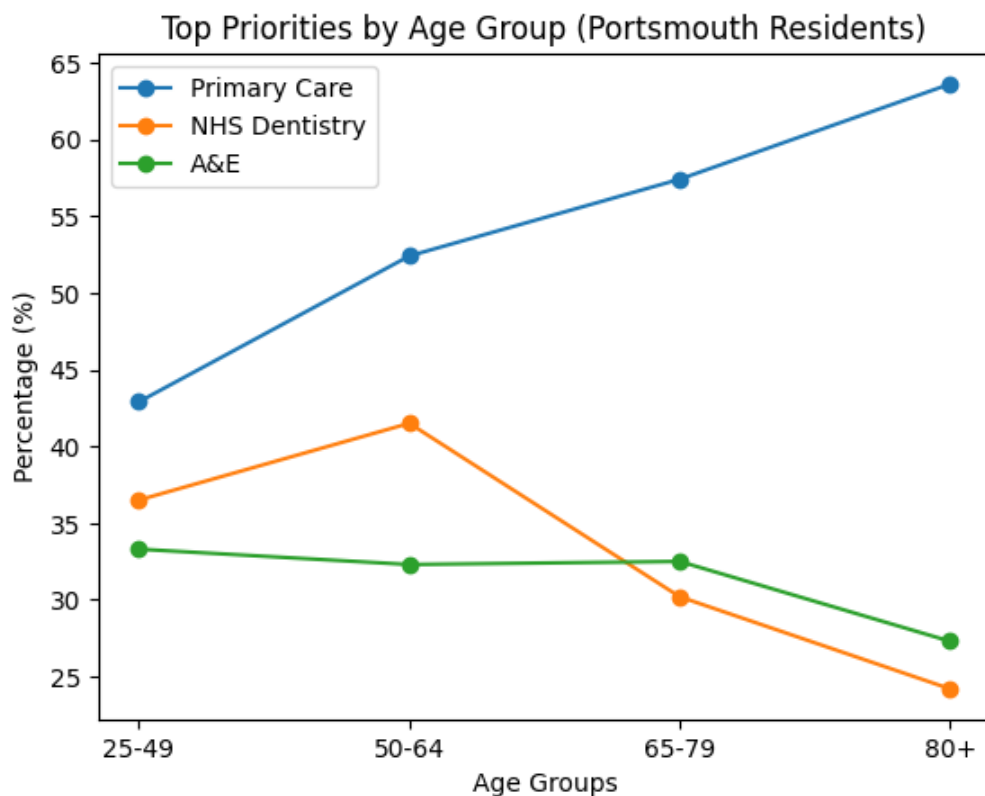
The diagrams below show the top ten priorities selected by female and male respondents, categorised to highlight the most commonly chosen services within each group

## 6. Analysis by age

Primary care services were the leading priority across all age groups, indicating a consistent concern about access to GP services regardless of life stage. However, the importance of primary care increased with age, rising from 42.9% among those aged 25–49 to 63.6% among those aged 80+, suggesting that older residents rely more heavily on timely access to primary care.

NHS Dentistry was a particularly strong concern among middle-aged adults (50–64 years), where it reached 41.5%, before declining in older age groups. This may reflect higher demand for routine and ongoing dental care among this group, alongside known access challenges.

Accident and Emergency services were a consistent priority across all age groups but were more prominent among older adults, reflecting increased interaction with urgent care services and potentially higher health needs.



Beyond the top three priorities, there are important differences by age:

**Adult Mental Health Services** were more prominent among younger adults (**20.6% in 25–49**) compared to older groups (**3.0% in 80+**), indicating greater concern about mental health among working-age residents.

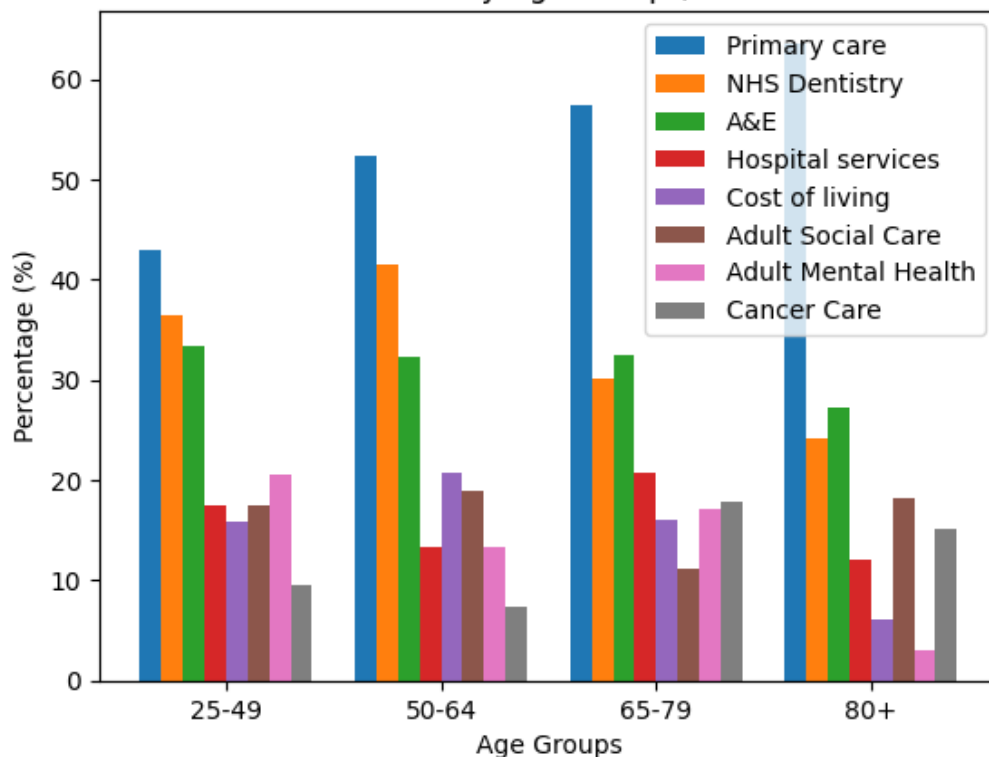
**Cost-of-living issues** were highest among those aged 50–64 (**20.7%**) and 25–49 (**15.9%**), but dropped significantly in the oldest group (**6.1%**), suggesting financial pressures are more acute for working-age adults.

**Hospital services** were more frequently selected by those aged 65–79 (**20.7%**), reflecting increased interaction with secondary care.

**Cancer care** became more prominent with age, increasing from **9.5% (25–49)** to **17.8% (65–79)** and **15.2% (80+)**, highlighting growing concern about diagnosis and treatment pathways in older populations.

**Adult Social Care** showed higher importance among older groups, particularly **18.2% in those aged 80+**, compared to **17.5% in 25–49**, reflecting increasing care needs and dependency.

Health and Care Priorities by Age Group (Portsmouth Residents)



## 7. Analysis by postcode

The analysis by postcode shows a consistent overall pattern across Portsmouth, with the same three priorities-Primary care services, NHS Dentistry, and Accident and Emergency emerging as the most important issues in all areas. However, there are some notable variations in the proportion of respondents selecting each priority across different parts of the city.

*Percentages in this section represent the proportion of respondents within each postcode who selected each priority.*

### Primary care services

Primary care was the top priority in every postcode, though the proportion of respondents selecting it varied. It was highest in PO2 (66.2%, n=51) and PO3 (63.8%, n=30), indicating particularly strong concern about GP access among respondents in these areas. Lower proportions were seen in PO1 (46.7%, n=28) and PO6 (45.0%, n=49), although it remained the most selected issue overall across all postcodes.

## NHS Dentistry

NHS Dentistry was consistently identified as a key priority across postcodes. The proportion of respondents selecting dentistry was highest in PO5 (41.2%, n=21) and PO4 (40.0%, n=32), and lower in PO1 (30.0%, n=18) and PO3 (31.9%, n=15). This suggests that access to dental services is a widespread concern, with some variation in intensity across areas.

## Accident and Emergency (A&E)

A&E was a key priority across all postcodes. The proportion of respondents selecting A&E was highest in PO6 (42.2%, n=46), while other areas showed relatively similar levels, ranging from 26.0% in PO2 (n=20) to 33.8% in PO4 (n=27). These figures reflect relative concern within each postcode group.

## Other notable patterns

Adult Social Care showed variation across postcodes, with higher proportions in PO1 (20.0%, n=12) and PO2 (19.5%, n=15), compared to lower levels in PO3 (2.1%, n=1). This may reflect differences in population needs or awareness of services.

Cost-of-living issues were more prominent in PO1 (23.3%, n=14) and PO2 (19.5%, n=15), suggesting greater financial pressure among respondents in these areas.

Hospital services (Outpatients and Clinics) were relatively consistent but slightly higher in PO4 (18.8%, n=15) and PO1 (18.3%, n=11).

Cancer care showed variation, with higher proportions in PO3 (23.4%, n=11) and PO5 (17.6%, n=9) compared to other areas.

## 8. Analysis by ethnicity

Analysis by ethnicity is limited due to the composition of the sample. The majority of respondents identified as White (93.0%, n=411), while other ethnic groups were represented in very small numbers. As a result, comparisons between ethnic groups are not possible, and further breakdown is not meaningful.

## 9. Interpretation

The survey points to a strong and consistent message about access to front-line care. Primary care services, dentistry, and urgent care dominate the results and should be treated as the clearest public priorities from this exercise.

The ranking pattern suggests that residents are especially concerned with everyday access problems and the points in the system where delays, difficulty obtaining appointments, or barriers to timely treatment are most visible.

The prominence of cost-of-living issues alongside health service concerns suggests that wider social pressures remain closely linked to people's experience of health and wellbeing.

Adult social care and adult mental health services also attracted substantial support and may warrant continued monitoring, targeted engagement, or deeper qualitative follow-up.

## Understanding Priorities Beyond the Top Three: A Cross-Demographic Perspective

Beyond the three dominant priorities—Primary care services, NHS Dentistry, and Accident and Emergency—the findings show a consistent overall pattern across the population, with some important variations by age group. These differences reflect how health and care needs change across the life course.

**Hospital Departments, Outpatients and Clinics** were more frequently selected by respondents aged **65–79 (20.7%)**, indicating greater interaction with secondary care services and concern about waiting times and continuity of care among older adults.

**Cost-of-living issues** were more prominent among working-age adults, particularly those aged 50–64 (20.7%) and 25–49 (15.9%), highlighting the close relationship between financial pressures and people's ability to access and manage their health.

**Adult Social Care** showed increasing importance with age, particularly among those aged **80+ (18.2%)**, reflecting growing care needs and dependency in later life, as well as the importance of support to remain independent.

**Adult Mental Health Services** were more frequently selected by younger adults, with 20.6% of those aged 25–49 identifying this as a priority, compared to much lower proportions in older groups. This suggests a greater focus on mental health access and support among working-age residents.

**Cancer Care** and **Diagnostic services** showed higher selection among older age groups, particularly those aged 65–79 (17.8%), indicating concern about timely diagnosis and treatment pathways as health needs become more complex.

**Children and Young People's Mental Health Services** were selected at lower overall levels but were more likely to be identified by respondents in the 25–49 age group, likely reflecting parental perspectives.

Overall, while the same core priorities are shared across all groups, these patterns show that people's wider concerns are shaped by their stage of life, with younger adults more affected by mental health and financial pressures, and older adults placing greater emphasis on access to ongoing care, hospital services, and support for long-term conditions.

## 10. Limitations

This was a self-selecting survey rather than a random sample, so findings show the priorities of respondents rather than the whole Portsmouth population.

The sample was older, predominantly female, and overwhelmingly White, which limits subgroup comparison.

Some subgroup counts were very small, particularly for ethnicity and non-binary gender. As a result, subgroup comparisons were not undertaken, and further breakdown has not been presented.

The survey captured priority choices but not the reasons behind those choices. A follow-up engagement exercise could add richer insight into why these areas matter most.

## How Healthwatch Portsmouth will use these findings

The findings from the "What Matters Most" survey will directly inform Healthwatch Portsmouth's work plan for 2026–27, ensuring that our priorities are aligned with what local residents have identified as most important.

We will use these insights to:

Develop targeted projects focusing on the top priorities identified, particularly primary care access, NHS dentistry, and urgent care services.

Inform engagement with system leaders, including the Integrated Care Board (ICB), NHS providers, and local authority partners, to ensure that residents' concerns are clearly represented in strategic discussions.

Strengthen monitoring of patient experience, using ongoing feedback, casework, and engagement activities to track whether improvements are being made in the areas highlighted by residents.

Support evidence-based conversations, combining these findings with other sources such as Enter and View visits, insight logs, and stakeholder engagement to build a comprehensive picture of local needs.

Continue targeted engagement, particularly with under-represented groups, to ensure that future work reflects the full diversity of Portsmouth's population.

## Appendix: response completed (Portsmouth residents only)

Category	Count	Percent
Total responses	424	100.0%
Selected 3 priorities	336	79.2%
Selected 2 priorities	50	11.8%
Selected 1 priority	27	6.3%
Selected none	11	2.6%