healthwatch Suffolk

Finding strength in a shared storm

Annual report 2025/26

Healthwatch Suffolk is a service delivered by Knowing Works C.I.C

Knowing Works®

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Please note: This document contains links to partner websites that might be of interest to you. Links were identified from reputable sources of information (e.g., the NHS or local community groups and charities with which we have engaged).

If you follow these links, it is important to know that we do not have any control over the website you are visiting. Therefore, we cannot be responsible for the protection and privacy of any information you provide whilst visiting the sites. Such sites are not governed by our privacy statement.

About us

Healthwatch Suffolk is your local health and social care champion.

Our services are delivered by Knowing Works CIC – a large membership social enterprise delivering insight to include people in shaping the businesses, services and support they use and access.

The Healthwatch service gathers people's experiences, and uses them to influence and improve standards of local health and social care. We passionately believe that listening and responding to people's lived experience is vital to create health and social care services that meet local needs.

Our core purpose is to...

collect and share lived experience to influence better standards of health and social care.

We live and breathe...

co-production in everything possible. We are inclusive, transparent, accessible, and accountable.

We do more as a CIC

This annual report is about the work we have delivered with the funding we receive to deliver a Healthwatch service in Suffolk. It does not include significant detail about work or impact associated with other commissioned Knowing Works projects.

You can visit www.knowingworks.co.uk/our-work at any time to find the latest information about our live projects, and examples of previous work and impact. We have also shared some brief information about projects in 2025/26 from page 52.

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www.knowingworks.co.uk

Welcome

Hear from our Independent Chair and Chief Executive

Wendy Herber
(Independent Chair)

Andy Yacoub
(Chief Executive)

> **"We hold and share the memory of what has gone before, what has worked for people and what still needs to change."**

Sometimes storms come that shift the landscape around us.

Six years ago, we all lived through a pandemic which changed so much for all of us, and continues to do so. We now live in a storm that sweeps through the health and care systems that serve us. It changes boundaries and responsibilities, priorities and relationships.

For those that commission our NHS services, the changes have been brutal and quick, redrawing geographies and razoring through teams. For our local authorities, the changes come at a slower pace, but still they come. And amid all the headlines, local charities and community groups battle to manage demand and funding challenges – and some, even our most established, just don't make it.

This storm has reached us too.

As Parliament debates legislation that could bring the Healthwatch network, and therefore an independent voice for lived experience, to an end for the first time in fifty years - this could be our last annual report.

The landscape ahead will be a different one. It is time for us to consider what really matters, what is important to us – what we bring that is of value and what we are not prepared to leave behind.

We always take the writing of our annual report seriously. For us, it's a chance to reflect on everything we've done as a team. It's a chance to reach out to partners that we work with and ask for their honest feedback. More than anything, it's a chance to look at the impact of the work we do, to ask if it has helped to make health and care services better, and to consider what more we could do.

As an organisation, we passionately believe that the only way to shape effective health and care services is with those who need and use them. We know that the key to uncovering what really matters, what hinders and what helps, is independence. Only independence gives the ability to shape the questions we ask and the freedom to share what people tell us without thought of fear or consequence.

This year, we have been asking ourselves what we can bring to the table – how we find strength in purpose and find new partnerships in the storm. We know that knowing works, and we want to increase the impact and reach of our work; ultimately influencing the effectiveness of health and care services for those using them. We want to do that whatever happens in Parliament.

You'll see from this report that the changes we face have not slowed us down. Each year, we build on our relationships and partnerships to reach as many people as we can. The range of topics we cover grows wider, as we understand and explore more about the interconnectedness of people's lives. While services are delivered in silos, our lives are not.

It can be hard for health and care systems to know what is missing in people's experiences from within a hard-pressed system. But evidence of lived experiences can bring the clarity people need to move forward in more effective ways.

We hold and share the memory of what has gone before, what has worked for people and what still needs to change. So often, the feedback we gather acts like a tsunami warning to the system, whether it's the impact of poor dental provision or differential waits for some services like gynaecology.

Over the years, we have increased our impact of our work beyond the core Healthwatch contract, by developing expertise in research, engagement, communications and facilitation that have been sought out and commissioned separately. Whatever happens to the Healthwatch network, we now bring the same passion, charitable objectives and experienced skilled team, to embed the delivery of the Healthwatch contract and the ethos of that work within our new brand 'Knowing Works'.

We know the only way to understand what works and what hurts those we serve is to give them our undivided attention. That takes independence, commitment, trusted partnerships and demonstrable expertise.

In a storm, we can fall apart - or we can stand together.

We believe people in our health and care systems can come together. They can construct effective ways of working. They can build on the legacy of what has come before in Suffolk and north east Essex. They can embrace values that underpin inclusion. They can seek collaboration.

We all can find strength in a shared storm.

Partner testimonials

NHS Norfolk and Suffolk Integrated Care Board

We can only build great health services if we work together in trusted partnerships.

Dr Ed Garratt OBE DL (Chief Executive)

Professor William Pope (Chair)

Having an independent partner like Knowing Works is not just helpful - it is vital.

We have a long and proud history of working with the Knowing Works team from their ten years as Healthwatch Suffolk. Within our local NHS system, this team set the highest standard for listening to the public. They have proven that listening to patient feedback is a must, not an afterthought.

Their past work - like checking on youth wellbeing and helping people use digital health services - kept the public voice at the heart of our decisions. We want to keep this strong team spirit alive.

The NHS is facing very tight budgets. Because of this, we cannot afford to waste money or design services based on guesses. As the team says: knowing works, because guessing is an expensive waste.

Knowing Works gives the NHS the real, honest facts we need to spend money where it helps people most. They act as a supportive but independent friend. They help us connect NHS services with the real-life experiences of local families. Their work makes a real difference, whether they are helping families shape special educational needs (SEND) services, looking into how people choose care homes, or giving the NHS clear evidence to improve care.

By expanding their research and teamwork skills, Knowing Works CIC offers our NHS system a great tool to keep getting better.

We want to say a huge thank you to the staff, volunteers and board for all their hard work during this time of change. We look forward to working together even more. By listening to local people, we will make health and care better and fairer for everyone.

Public Health, Communities, and Public Safety - Suffolk County Council

In Suffolk, there is a shared commitment to improving population health by understanding lived experiences.

Stuart Keeble
Executive Director

Within our Public Health, Communities and Public Safety directorate, we see this as central to how we develop insight and shape effective responses for our residents.

Data and analysis are essential, but on their own they can only take us so far. The voices and lived experiences of our communities give data meaning, context and depth—and are vital to making informed, fair and effective decisions.

Knowing Works play a crucial role in helping us achieve this. Their ability to engage with people, build trust, and capture authentic experiences brings a richness of insight that strengthens our evidence base. They help ensure the perspectives of Suffolk residents—particularly those less often heard—are not only included, but can actively shape how services are designed and delivered.

This is especially important when tackling complex issues around wellbeing and health inequalities. Hearing directly from people about the barriers they face, and what would make a difference in their lives, challenges our assumptions and helps us focus on what will have the greatest impact.

We are extremely grateful for the knowledge, experience and expertise that Knowing Works bring. Their thoughtful and independent approach adds real value, giving us confidence that our work is grounded in what matters most to our communities.

By working in partnership, we are better able to design services and support that are more responsive, more equitable, and ultimately more effective for the people of Suffolk.

A crossroads for patient & public voice

A Government Bill proposes significant changes to how people's voices are heard in health and social care and threatens the future of independent scrutiny.

It means the statutory arrangements for Healthwatch could end, with some functions potentially delivered through Integrated Care Boards and local authorities. For the first time in decades, this would mean the absence of any and all independent opportunities for the public to influence standards of care in England.

Healthwatch & why independence matters

For more than a decade, we've been the independent voice making sure people's experiences shape health and care. We can challenge poor practice, recognise best practice in health and care provision, conduct impartial research, and ensure people's voices are heard without fear or favour.

When services and systems struggle, it is our staff that have carried people's experiences and views into rooms that may not want to hear them. Our service brings them anyway, and leaders listen and respond.

There is a very real concern that removing or diluting independence significantly weakens public accountability and risks future scandals.

- **Independence matters because it's hard to be honest when someone holds your care or funding in their hands:** People need distance to give feedback with honesty, and without fear, consequence, or judgment.
- **Independence matters because we need to hear from everyone to create meaningful change:** Healthwatch utilises relationships and partnerships to reach people who would not have a voice otherwise.
- **Independence matters because services are siloed, lives are not:** The NHS and social care system is intimidatingly huge. Without an independent organisation that works across systems, we cannot understand the gaps in provision that lead people to fall into crisis.

A decade+ of impact - what could be lost?

Your feedback helps our service to raise important issues with local leaders and improve services. Here's just a few impacts we've noted from your experiences.

1 

Services were not lost: When critical services were at risk, we challenged leaders to think again or find other solutions.

> "Healthwatch brought the matter to the attention of the two local Health and Oversight Scrutiny committees, so questions could be asked... the eventual outcome was that funding was reinstated."

2 

People were protected: We prompted decision-makers to take action on mental and physical harm while people wait for elective care - prompting reviews of local pain services and gynaecological care. We've also protected individuals at risk through safeguarding practice.

3 

GP practices improved patient experience: Hundreds of visits to GP practices have helped services make many important changes that we know have improved patient experience (from new appointment systems, to improving physical environments, and making practical changes to how services operate).

4 

Influencing strategy: People's views and experiences were independently included in countless critical strategies that have shaped how local services were planned and delivered. From local needs assessments to cross-system wellbeing plans - your views were featured and led to change.

5 

Better maternity care: Services addressed negative feedback by helping staff to treat people in safer and more compassionate ways. Feedback improved patient safety by establishing a clinic that will increase continuity of care for mums on the boundaries of hospital catchments.

6 

Preventing digital exclusion: We encouraged a 'Digital first, but not digital only' approach that was embraced by services and commissioners locally. We also made sure vulnerable people were considered and supported when services introduced digital change.

7 

Dementia support was improved: New services were built around people's experiences and what local families needed. Furthermore, our research inspired new projects and initiatives to improve support for people living with this terrible illness.

8 

Innovation in involvement: We've helped decision-makers to take innovative approaches to public engagement and co-production – ensuring communities can shape future systems.

9

Informed end of life provision: We helped services reflect on people's needs at the end of life, driving changes in how palliative care has been delivered locally after the pandemic. Our report and recommendations led to improvements in education for care staff, informed future system strategies for palliative care, and helped services like hospices to expand on their offers of support.

10

Tongue tie: Our challenge led to the funding of a Restricted Lingual Frenulum (RLF) clinic that has, over a period of several years now, helped hundreds of local parents who had struggled with infant feeding. The clinic is for the treatment of newborns with tongue tie and was established because of feedback from local parents.

11

Accessible local care: Many services have improved how they provide accessible information and support for those living with a disability or sensory impairment. Our Your Care, Your Way campaign has challenged services and commissioners to improve their compliance with NHS standards and helped people to know their rights.

12

Community development: Our team has connected people and services together to provide support at grass roots. For example, this has included linking contacts in groups and organisations to encourage new partnerships and to support individuals in communities.

13

Helping people to navigate services: Our Healthwatch has signposted thousands of people to information, services, and support, with known positive outcomes across all years of our provision. From helping people to know how they can complain, to unlocking vital support, resolving complex issues, and putting people in touch with the right services - our service provides vital clarity for the public in unclear systems.

14

Informed regulation: We published independent experience reports to inform the regulation of services. This has included providing information about lived experiences to guide Care Quality Commission inspections of vital local services, including GP practices and mental health care.

200,000+ experiences analysed and counting

This is just a fraction of what we have been able to influence and achieve over more than a decade of delivering Healthwatch and sharing people's experiences. We are a unique service, grounded in knowledge, data, and relationships - it's easy to see what could be lost if the government's plans remain unchanged.

One page highlights (25/26)

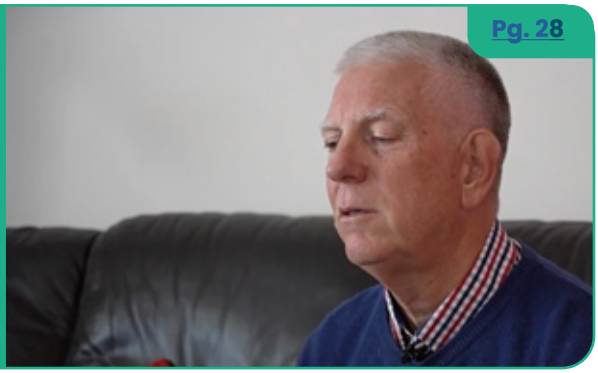
Throughout this report, you'll find examples of how our teams have been working to influence better local care and support. Here are just a few key numbers and outcomes from our year.

Pg. 14

5,286 people were engaged in communities.

Pg. 28

101 People with a visual impairment shared experiences in our core research.



Pg.24

NHS leaders took action to reduce harm amongst those waiting for hospital care.

Pg. 48

623 people were signposted to services, information, and support.

Pg.24

27,000+ experiences have been recorded to our Feedback Centre.

We made sure people's experiences were heard when the NHS made changes to ADHD care.

Pg. 30

Pg.37

Our work led the Council to improve support for children's transitions to adult social care.

Pg. 24

Our research informed a local review of pain management support.

Pg. 12

364 visits were made to engage in NHS and VCFSE settings.

Pg. 36

We shared people's comments about services to inform CQC inspections.

In the community

The Healthwatch Suffolk Engagement and Community team has an important role to include people in our work by visiting local communities, and representing us in various groups and forums.

The team:

- records people's feedback about NHS and social care services;
- delivers signposting in communities;
- connects us with local partners;
- helps the NHS to engage communities about service change;
- offers local groups and networks a way to be heard by services and commissioners;
- attends strategic forums to share people's experiences.

This year, the team completed hundreds of engagement activities across Suffolk, gathering almost 1,500 comments about health and care services.

The Suffolk Pride Queer Health Matters event was one of many visits to communities by our team.

Our engagement in numbers

- **5,286 people were engaged by our team:** We visited communities across Suffolk. See our map on page 14 for more detail about where we visited this year.
- **1,491 comments were gathered by our ECO team in communities:** They were uploaded to our Feedback Centre, analysed, and included in our work. They were also shared with Healthwatch England and the Care Quality Commission when it inspected local services.
- **28 visits were made to NHS services:** Including visits to multiple GP practices, as well as community hospitals, hospital discharge lounges, eye clinics, and more.
- **336 visits were to VCFSE groups or settings:** Testimonials from some of these groups and partners can be found later in this report.

“We are very grateful to Healthwatch Suffolk for spending time with our patients to discuss their experience of our service. Their staff are always very professional and welcoming to the patients, and they gather extremely helpful user feedback.

“The feedback is presented in a clear and well written report to the practice, which enables us to focus on how we can improve our service or sustain best practices.”

Steward Fountain
(Practice Business Manager, Hardwicke House Group)

We've visited communities across Suffolk

Our small team has engaged with 5,200+ people at local events, meetings, services and groups across the county.

On this page you can read about just a few highlights from the year, but there were too many to list in this report! We received a warm welcome at so many places where people were happy to talk to us about their experiences.

The map shows how we visited most **postcode areas** covering Suffolk at least once. Darker colours indicate areas where more visits were completed by our team. We hope to find more opportunities to meet people in the less-visited areas throughout 2025/26.

36 - 40+ visits	31 - 35 visits	26 - 30 visits	21 - 25 visits	16 - 20 visits	11 - 15 visits	6 - 10 visits	1 - 5 visits

We Loved this 'pawsome' visit to the Suffolk Guide Dog and VI Forum - a user-led group who meet regularly at a local theatre. It was an opportunity to explore people's experiences of using services with a visual impairment - and amongst the many guide dogs, we met this lovely brand-new in-training guide puppy just beginning his journey.

The wonderful team at Iceni Ipswich invited us along to learn more about their services and explore opportunities to include people they support in our work.

It was a chance to hear about the incredible work they do to support families affected by substance misuse.

We loved getting creative in Ipswich together with a lovely group of people learning new skills and sharing interests at Creative Club. The club is run by New Wolsey Theatre together with Job Centre Plus Ipswich and the local NHS. It was a brilliant way to get chatting and to find joy in creativity with others.

We've met so many people in groups and charities providing local support, including Topcats Charity based in Pakefield, Lowestoft. They offer supported activities and opportunities for young people and adults with additional needs from the age of 0 to 30 years old. People were happy to chat to us about their experiences of health and care - and the cake was great!

We attended a wonderful Chinese New Year event hosted by Anglo Chinese Cultural Exchange (ACCE) in February 2026.

It was brilliant talking to people about our work whilst enjoying an evening of action-packed colour, music, and dance to celebrate the Year of the Horse.

In February 2026, east Suffolk became a Compassionate Community - and we attended the launch. The communities bring residents, schools, businesses, groups and healthcare services together to promote and support kindness, friendship and a collaborative approach to caring for one another at times of health crisis and personal loss.

Hearing from all communities

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

Our work and engagement is informed by our comprehensive Strategic Equality and Quality Impact Assessment (SEQIA) toolkit - a live process that will lead to broader outcomes for us in both the short and long-term, and for us to fully comply with the Public Sector Equality Duty.

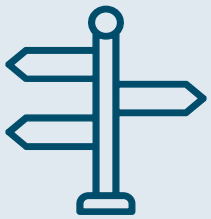
This year, targeted engagement was carried out to reach hidden voices across our communities. We spoke with people experiencing homelessness through the Bury Drop-In, and visited foodbanks and community support services to understand the experiences of those affected by poverty, deprivation and social isolation. We also attended mental health support groups, including the NSFT Coffee Crawl, to gather feedback from people using local services.

Through the Ethnicity strand of our SEQIA framework, we engaged with diverse communities via organisations such as Karibu and the Ipswich Anglo Chinese Cultural Exchange. To hear from older residents, we visited care homes, dementia forums, seniors' events, Warm Spaces initiatives and Rural Coffee Caravan sessions. We also worked with people living with sensory and physical disabilities through groups including Suffolk Sight, the Bury and Ipswich Deaf Associations, Steel Bones and Combat to Coffee.

Engagement with children, young people and families included visits to SEND groups, Family Hubs, Epic Dads sessions and parent-and-toddler groups. We further connected with communities through faith, cultural and LGBTQ+ events such as the Global Food and Pita Festival and Queer Health Matters.

Together, these conversations ensured a wide range of voices shaped our work, informing both our core activities and our projects to improve health and care services across Suffolk.

Our team helps people to find their way to services



When we're gathering experiences of using NHS or social care services in communities, people tell us about their circumstances and often ask about available sources of support.

In 2025/26, our ECO team helped 442 people in communities find their way to information, services or support they needed. See more detail about our signposting from page 48.

“Thank you as always for providing patient feedback to us. Independent observation is so very valuable to help us understand the impact we are having on patient care.

“The reports have already stimulated further conversation and ideas. Apart from anything else, it appears that there are a number of misconceptions that patients have regarding the service and I will contact our communications team to consider how best we can address some of these matters.

“It is always wonderful to hear that the team are doing such a good job. I will ensure your feedback is shared with all our team members.”

Joanna King (Haematology Laboratory Manager, Pathology, West Suffolk NHS Foundation Trust)

Connecting people and supporting communities

Our team works closely with people and organisations supporting communities across Suffolk. This puts us in a strong position to bring groups together, strengthen local networks, and help services respond more effectively to community needs.

Here are just a few examples of how we helped to create those connections:

- We linked the Rural Coffee Caravan with contacts at the Bury Drop-In, enabling the charity to provide slow cookers to people moving into new accommodation. This simple connection has helped to support people's independence and wellbeing.
- We helped to build relationships between a local faith group, NHS leaders and a District Council Communities Team, improving understanding of local needs and supporting the development of a new family support group.
- As Shaftesbury Suffolk prepared to launch its new dementia support service, we connected its team with established local support groups. This strengthened awareness of how people could access dementia support and what they should expect from the service.
- We introduced One Voice for Travellers to Cancer Support Suffolk, helping to promote cancer awareness among women in the travelling community.

Supporting those who help in communities

Walton Parish Nursing support people and communities towards whole person healthcare. The parish nurses work with people of all ages and backgrounds, those with any faith or none. They listen to people, and they provide moral support during medical crises. They also signpost people to support or medical services, and clarify medical procedures.

Walton Parish Nursing provides a number of different services to meet the needs of people in the local community. This includes a monthly drop-in clinic that we join occasionally to engage people about their experiences and to support with signposting people to services and support.

> ***"At the No Labels group, we have been privileged to have had Healthwatch visit the group to chat about how people are finding access to health care provision in Felixstowe. The Healthwatch team has helped us to signpost clients to the most appropriate resources and provided us with vital and informative information to assist in the improvement of health in the Felixstowe area."***

Providing information and supporting rights in the community

Steel Bones is a charity providing support, advice, guidance, and signposting to help amputee families navigate the complex, and often confusing, amputee support landscape. It offers a national helpline, as well as local, volunteer-led, support - and this includes local coffee catch-ups, which we have attended to engage families about their experiences of using NHS and social care services.

> ***"The Healthwatch team received an incredibly warm welcome from everyone at the Steel Bones Suffolk Amputee coffee catch up group during a recent visit. Their presence provided a fantastic opportunity to raise awareness of the independent Healthwatch's vital role in the community, ensuring people know where to turn for support, as well as knowing their rights, plus knowledge of how to access services in the NHS.***
>
> ***"Throughout the session, Healthwatch listened closely to individual experiences, and the distinct difficulties members face when trying to find help for various reasons - such as our struggles, poor health and disabilities. By listening to these concerns and offering tailored signposting, they focused on empowering people and ensuring robust, informative provision right where it matters most.***
>
> ***"We all thoroughly enjoyed the visit and hope to see the team again soon to learn of more very useful information on how we can navigate our future care with health and social choices."***
>
> Chris Barrell (Steelbones)

A listening ear in local groups and networks

The Memory Lane Café in Ipswich offers a safe, welcoming, and understanding place for people living with dementia, their carers, and those who have been bereaved.

We were able to visit to speak with people about their experiences of using NHS and social care services. We also took time to listen with compassion and signpost individuals to bereavement support.

> ***"I would like to say thank you for your visits to Memory Lane Café. Our folk have been very grateful for the information you have given them, and the chance for them to talk about their health issues to someone who understands and can listen to them. Healthwatch is welcome anytime."***
>
> Tina Vickers (Chair and Activities Coordinator, Memory Lane Café)

A chance to engage - and sing!

This year, as a part of our work to understand the experiences of people living with visual impairments, we visited groups supporting people in communities.

> ***"We were pleased to have two visits to Unscene Suffolk Singers last year. Healthwatch first visited to find out more about the group, a weekly singing group for people who are visually impaired. A second visit was made to talk to participants about the experiences of blind and visually impaired people when accessing local health services.***
>
> ***"We rely mostly on word-of-mouth to reach people who might be interested in joining us, and similarly people who are visually impaired may not always find online surveys accessible, so connecting with people and organisations with broader reach across Suffolk is really useful. Plus we always like to welcome visitors who join in the singing!"***

It was nice weather... for ducks!

Our social impact - 'Hoo' we helped this year

This year, our team swapped desks for undergrowth as we volunteered at Sutton Hoo to help clear gorse from the site. Gorse is periodically cleared from the site to protect fragile Anglo-Saxon burial mounds, control invasive scrub, and protect native flora and fauna.

In true British fashion (and in keeping with the theme of this annual report), the weather was against us in a big way. We soon found ourselves soaked through - there was not a dry item of clothing in sight, or, at least not until the sun came out for our photo!

Despite the sideways rain, and clinging to our tools like determined archaeologists of the past, we pressed on. By the end of the day, we were wetter, muddier, and significantly pricklier than when we arrived, but the job was done.

It was a brilliant reminder that teamwork doesn't just happen in meeting rooms. And we would definitely do it again (maybe)... though perhaps next time we'll check the forecast first.

Looking ahead to our 2026/27 volunteering day, our team will be helping Suffolk Wildlife Trust with local conservation efforts. We can't wait to support these vital local spaces to thrive in whichever ways we can.

And, we hope, the weather will be kinder to us all.

Shaping care with insights

We have established systems and methods in place to effectively gather and evidence the experiences of people using health and social care services across Suffolk.

Our evidence

In this section, you can learn more about the evidence we published regarding people's experiences of NHS and social care this year, and how it helped to shape local standards of care and support.

We use social research and other methods to understand people's experiences. We use methods that will let us share the public's concerns quickly, and work with stakeholders to make improvements. Learn more about our evidence.

How we listen

We engage

Our engagement team gathers comments and builds 'soft intelligence' from interactions with services.

We track enquiries

We share anonymised information about our signposting enquiries (see section from page 48).

We research

We complete specific research and write reports to explore topical issues in depth (see from page 24).

We collaborate

We work with partners and attend meetings to gather evidence and information about systems (see page 34).

We're part of a network

We access evidence from Healthwatch England, and use national reports to influence local change.

Our Feedback Centre

With more than 27,000 (2,000+ in 2025/26) reviews featured across hundreds of service listings, the Feedback Centre offers insights people can use to make informed decisions about local care.

Feedback Centre reviews helped us to:

- transparently indicate people's real experiences of services;
- safeguard people from harm in services;
- share insights with Healthwatch England;
- share intelligence with the Suffolk Health Scrutiny Committee, the Care Quality Commission and other similar bodies;
- include people's experiences in our research and briefings;
- provide evidence to inform local reviews by NHS or other partners;
- respond to Quality Accounts produced by providers.
- inform public health intelligence about population wellbeing.

Provider responses

Providers of NHS care responded to **319** Feedback Centre reviews in 2025/26.

Their responses help people to know feedback has been shared (e.g., to make staff leads aware of key issues in people's comments) or that comments were leading to action by services.

> ***"Thank you for taking the time to share your feedback with Healthwatch. We're very sorry to hear that you've found it difficult to get the right information across when speaking with our team, and that it's taken longer than expected to get things put in place.***

> ***"We fully appreciate how frustrating this must have been for you. We want every patient to feel listened to and supported, so we're looking into how we can improve our communication processes, particularly when it comes to helping patients explain their needs clearly and ensuring any next steps are followed up promptly".***

Explore feedback at www.healthwatchsuffolk.co.uk/services

Research: Elective care

The NHS in Suffolk has been acting on the findings of our research into people's experiences of waiting for hospital care.

More than 1,400 people shared their stories, revealing the profound physical, emotional, and social impacts of long waits for care.

How has the NHS responded to our report

A structured response

The Norfolk and Suffolk Integrated Care Board (ICB), along with system partners, developed an action plan, overseen by an NHS group tasked with monitoring the quality of planned care locally.

Initial actions included a review of waiting well information from the ICB to fix broken links, correct outdated service information, and to explore ways to promote it to patients. This included making it a focus within the ICB's winter health campaign.

This research, and other research we have completed with the ICB (regarding the development of the Essex and Suffolk Elective Orthopaedic Centre and people's support needs), has evidenced the need for proactive waiting well support locally. This type of support has, for example, been provided by a specific 'Waiting Well Practitioner'.

Charlotte Storrar, Waiting Well Practitioner at the ESEOC, told us:

> *"My role is supporting all patients to remain well whilst they are on the waiting list for Orthopaedic surgery. We focus on supporting patients with emotional wellbeing, physical wellbeing, weight management and stop smoking support.*
>
> *"Once we have a referral for a patient, we have the capability to continue checking in and supporting the patient with any queries or concerns regularly at a timescale that suits them whilst they await their surgery. The standard review*

time is every two months up until the patient has a date for their surgery.

"I have established a home visit clinic, so complex patients and their needs are reviewed within their own environment. This ensures we can meet people's needs and address any potential complaints or concerns prior to admission.

"From the first point of assessment, I refer patients to the Making Every Contact Count team to support patients on the waiting list with smoking cessation, weight management and physical and emotional wellbeing. We are able to fast-track patients through the referral process, assisting patients in getting quicker access to the support they need to get access to surgery quicker.

Monitoring and preventing harm to waiting patients

The report identified a significant gap between provider reported harms and patient reported harms, prompting important work to address it. In fact, it was apparent that, despite extraordinarily high numbers of waiting patients, hospitals had recorded zero harm as a result of waits for elective procedures.

NHS England prescribes how and when harm is recorded by the NHS. People can experience both physical and psychological harms from waiting for hospital care. Some experience debilitating and unmanageable levels of pain, leading to increasing isolation, depression and anxiety – even thoughts of suicide.

Delays can also disrupt wider aspects of life, including caring responsibilities, employment, and personal relationships.

The research supported NHS reviews of gynaecology and long term pain services locally.

It also prompted us to select a core Healthwatch research focus of women's health for 2026/27 - specifically, lived experiences of gynaecological support and menstrual pain.

Look out for more details about this work, and please participate, when it launches later in 2026.

In response to the research, providers acknowledged challenges they face with reporting harms — particularly psychological harm. To drive improvement, the NHS says it wants to close data gaps that affect decision making and has increased awareness among providers, including GP practices, about the importance of reporting harm and using the correct incident reporting systems.

However, despite these actions, we have since been unable to identify any progress toward genuinely increasing the amount of harm recorded across providers. Furthermore, under the new Norfolk and Suffolk ICB arrangements, it has also become unclear as to where the responsibility for monitoring this change resides.

The ICB's Patient Safety Collaborative has recommended adoption of a new Clinical Harm Review and Prioritisation Policy (originally developed in Norfolk and Waveney) to ensure a consistent approach across the expanded ICB area. Hospitals in Suffolk are presently offering their feedback to inform the new policy. To date, we have not been able to identify whether this new policy from the Norfolk NHS system will account for the actions our research encouraged in Suffolk and north east Essex.

Reviews of local services and support

Two areas of care have been reviewed since our research: gynaecology and long-term pain. The NHS says these reviews were already planned, but our insights helped inform them.

Gynaecology

People waiting for gynaecological procedures were among the most affected by long waits, with three-quarters reporting an impact on their mental health. They were also the least satisfied with hospital communication. In response, hospitals have taken steps to reduce delays and improve support.

ESNEFT has introduced a waiting list reduction plan focused on complex endometriosis and expanded access to Clinical Nurse Specialist appointments both in and outside clinic settings. West Suffolk Foundation Trust has increased theatre and clinic capacity in the short term and is exploring longer-term improvements, including nurse-led hysteroscopy and direct access to Non-Obstetric Ultrasound for postmenopausal bleeding.

Communication has also improved. ESNEFT now provides targeted letters to the longest-waiting patients, a dedicated enquiry email with a 24-hour response time, and updated patient-facing information.

Long-term pain

Our research highlighted how pain is becoming a silent epidemic in systems and services under significant pressure. Many people were struggling with their pain and reported difficulties accessing support.

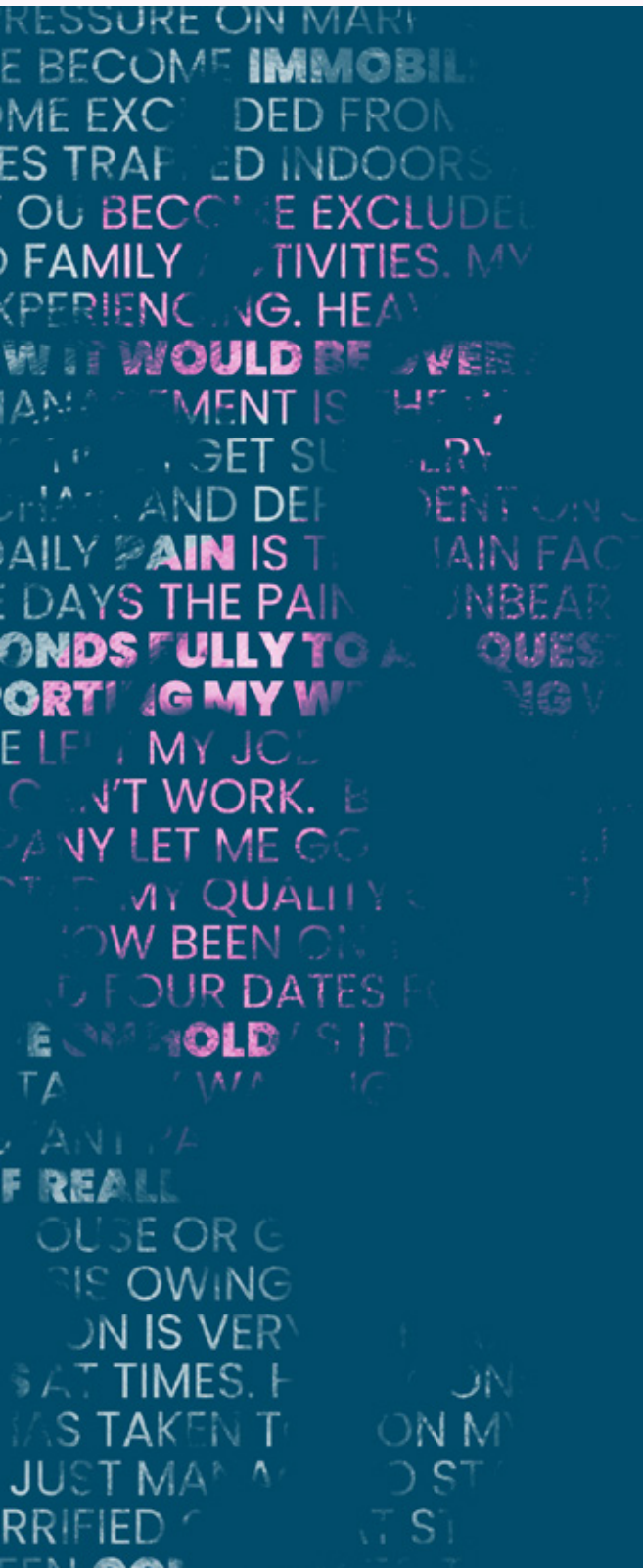
This GIRFT (Getting it right first time) pain service review was commissioned in

response to long waiting times for pain support. It was informed by data from this research and insights from our Feedback Centre and other Knowing Works projects.

Further information about the outcomes and learning from the GIRFT review is not yet available from the Norfolk and Suffolk Integrated Care Board.

Thank you

We would like to say a big thank you to every person who responded to share their experiences. We hope the research will continue to support improvement of people's experiences now, and in the future.



"The world appears to shrink for many people waiting for treatment as they struggle to maintain social events and become increasingly isolated through immobility, pain, and sometimes embarrassment or shame of their condition".

Campaign: Your Care, Your Way

Our Your Care, Your Way campaign has continued to challenge and influence standards of accessible health and care.

The campaign, which began as a national Healthwatch initiative, has also helped us to increase awareness of people's rights amongst the public, commissioners and providers over a period of years.

The last campaign survey was focused on d/Deaf and hard of hearing people in communities. Our insights prompted action by some local hospitals and GP practices to make improvements such as:

- Assessments of reception areas, interpreter provision, lipreading awareness, and reasonable adjustments (e.g., at West Suffolk Hospital);
- Improvements to alert systems in services (e.g., updated alert tones);
- New processes to reduce reliance on visual or audio alerts in waiting areas.

Responses from people in Suffolk also supported national efforts to prompt and influence an update of the NHS Accessible Information Standard (AIS) by NHS England published in the year

Your Care, Your Way (2025/26) - focus on visual impairment

More than 100 people with a visual impairment took part in our latest campaign survey. Their responses showed more people were getting their needs for accessible information and care met by services (e.g., through text messaging or digital services), but that standards of accessible care remain inconsistent.

We called on services and commissioners to review service accessibility and take steps to reduce inequality and delays caused by inconsistent accessibility.

How has the NHS responded?

A spokesperson for NHS Norfolk and Suffolk Integrated Care Board (ICB), said:

"We're pleased to hear about the positive experiences of people living with visual impairment, but it is clear more work is needed to improve the accessibility of services.

"As a new organisation covering Norfolk and Suffolk, our dedicated health equity team aims to ensure services we commission are accessible for local people and communities, and in June we will agree our Executive Director responsible for this work.

"The AIS is integrated into NHS terms and conditions and the procurement and contract processes for services we commission. We also consider the needs of people with protected characteristics through Equality Health Impact Assessments when we procure new services or make changes to existing services.

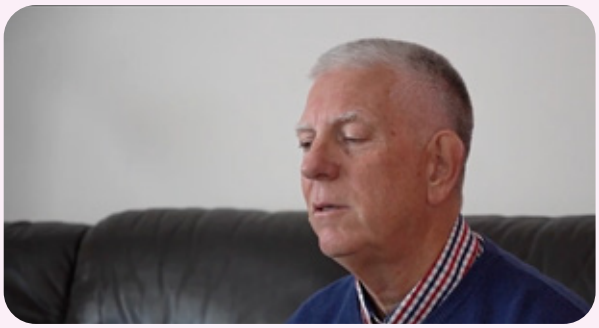
"Our NHS providers Health Equity Leadership Network brings together local health providers and partners with the aim of reducing health inequalities. We are committed to undertaking the Accessible Information Standard self-assessment in 2026 and responding to its findings.

"We have previously worked with a valuable Accessible Information Advisory Group in Suffolk, which has provided important feedback and guidance improve our work. We plan to extend its membership into Norfolk."

This statement has been condensed, please visit www.healthwatchsuffolk.co.uk/news/visurveyresponse to read it in full.

The ICB has invited our team to attend its new Health Equity Group to discuss our campaign. We will provide further updates in 2026/27.

Local voices influencing change



Simon's story - "There is life after sight loss. I found it."

Sixteen years ago, Simon received a diagnosis of a visual impairment that would change his life. He kindly shared his experiences of life with a visual impairment with us in a series of short films, including some of the challenges he has faced using NHS and social care services.

Watch the series

Our case studies

Richard was one of six people with a visual impairment who shared their views and experiences in detailed interviews.

You can read more about their lived experiences in our full report.

Download the report now

Research: ADHD care and support

Together with Healthwatch Essex, we helped to arrange an online listening webinar that brought together NHS leaders, clinicians, and the public, to address growing concerns around adult ADHD services across Suffolk and Essex.

What was the webinar about?

In January 2025, local medical committees (LMCs) across Suffolk and Essex instructed GPs to stop delivering ADHD treatment under shared care agreements. This moved responsibility for prescribing, testing, and monitoring ADHD medication back to specialist services. This led to many people with ADHD in Suffolk and north east Essex changing how they accessed medication.

The webinar followed the publication of our report regarding people's experiences following changes to shared care arrangements. These reports highlighted consequences of the changes, including medication issues, increased stress,, and ongoing uncertainty about care. You can click this link to download our report.

What was explored during the webinar?

Panel members discussed the impact of GPs stepping back from shared care prescribing, the growing complexity of ADHD pathways, and the strain caused by rising demand. They acknowledged that the system has often been confusing for patients and that communication gaps have contributed to people's frustrations.

Nine key NHS leaders, including GPs, pharmacists, psychologists and Integrated Care Board commissioners, answered public questions about ADHD services, waiting times, medication, Right to Choose providers, and support while waiting for an assessment.

Shared learning from the webinar is described, in brief, on the next page. More detail can be found at www.healthwatchsuffolk.co.uk/news/adhd-listening-event-system-pressures-and-key-lessons.

Key learning from the webinar

The webinar highlighted that ADHD pathways have become overly complex, with multiple providers, differing prescribing arrangements and inconsistent communication leaving many patients unsure what to expect.

NHS leaders present acknowledged these challenges and committed to simplifying referral routes, improving clarity for families, and strengthening communication. Digital tools—such as automated check-ins and clearer visibility of next steps—are being explored by providers including ESNEFT and EPUT, alongside a commitment to maintain non-digital options.

While exact waiting times remain difficult to predict due to high demand and system pressures, patients are encouraged to contact services directly for updates and use ICB and provider websites for general waiting-time information and Right to Choose guidance.

Collaboration across organisations has strengthened, helping manage medication shortages, support safer prescribing, and improve care for people with coexisting mental health needs. The panel stressed that partnership working will be essential as integrated care systems evolve. They also emphasised the need to expand support for people waiting for assessment, including better signposting to talking therapies, online resources and Suffolk's Recovery College. Clearer, fairer handling of private assessments is being developed to ensure consistency and protect equity.

Future improvements already underway include increasing accredited providers for NHS-approved assessments, updating FAQs, improving communication materials and implementing national ADHD Task Force recommendations.

The webinar closed with a shared commitment to learning from patient feedback and building a system that is easier to navigate and fairer for all.

> **"We had to pay privately to get diagnosed. We pay for medication privately. We have been waiting for NHS referral. My child could not work without their medication, but it is costing us £3,600 per year. No support anywhere."**

Research: Mental health crisis

We worked with Suffolk User Forum (SUF) to gather feedback from people who had accessed mental health support from local emergency departments (A&E). The aim was to update the current understanding of people's experiences and address a local gap in independently published evidence.

Thirty-nine service users, carers, friends, and relatives responded to the survey. Key findings included:

- 58% of patients felt A&E treatment had not addressed their mental health needs 'at all'. Only a quarter said it had helped 'a lot'.
- Only 50% of patients received information about who to contact if they felt unsafe after their visit.
- People commented about a lack of effective ongoing support for mental health following their visit. For example, one respondent said that they were 'discharged with a... somebody will call you in 24 hours... but no call [was] received'.
- Those supporting a patient in crisis often felt unsupported or overlooked.
- Only 7% of carers said staff had offered advice or support to them, and only 14% recalled staff at A&E asking about their wellbeing.

Key learning from people's experiences was shared and can be read (together with our full report) at www.healthwatchsuffolk.co.uk/news/aande-mhreport.

We asked SUF to reflect on how the report has been used since it was published. A spokesperson told us:

> *"SUF really valued the opportunity to work closely with Healthwatch (Knowing Works) on this important deep dive into people's experiences of mental health support at Accident and Emergency (A&E).*
>
> *"As a lived experience charity, SUF's role is to help ensure that people's voices, experiences and insights are heard, understood and used to influence change.*

Working together enabled us to bring our complementary strengths to the project: Knowing Works independent insight and engagement expertise, alongside SUF's trusted relationships with people with lived experience of mental health challenges and our understanding of the local mental health system.

"The report provided a powerful and important account of what people experience when they seek mental health support through A&E, particularly at times of crisis. It highlighted not only the pressures within the system, but also the human impact when people do not feel listened to, understood or supported in the right way at the right time.

"SUF has shared and reported the findings through key system spaces. We presented the findings to the Urgent and Emergency Care group, which was a subgroup of the Suffolk and North East Essex (SNEE) Integrated Care Board (ICB), and have also shared them with lead commissioners in the newly formed Norfolk and Suffolk ICB.

"We will continue to ensure that the key learning is shared with clinicians leading the development of the new 24/7 mental health centres, and with acute hospitals as further work develops over the coming months to improve mental health support within emergency departments. This remains high on SUF's agenda, so that the learning from people's experiences is actively shared and incorporated into developing services.

"For SUF, the value of this work lies in ensuring that lived experience is not simply gathered, but is actively used to shape understanding, challenge assumptions and support practical improvements across the system."

"No real understanding or compassion. I felt the 'niceties' were rehearsed and not really grasping the turmoil of the patient.

"Nobody considered the impact it had on me watching this person get promised support that never happens... it then falls back on me."

Working with partners

A collaborative approach is the best way to reach people for their views, and to achieve lasting change in health and social care. In this section, discover how we've worked with others to include people's experiences in shaping better standards of care.

Why partnerships and relationships matter

We know that our clearest impacts come from our strongest relationships with the people who make decisions in local systems. After all, it is not organisations or structures that create change—it is the individuals within them, and the choices they make.

Building on this, our partnerships and collaborations help us identify shared priorities and mutual benefits for both those who use services and those who run and commission them. By combining our skills, capacity, and capability, we can ensure people are meaningfully involved in shaping standards of care and influencing how services develop.

As the structures of our local health and care systems continue to shift in response to national reform, these relationships are being tested more than ever. Yet this period of change has also made them increasingly vital. The scale of transformation across health, education, social care, and community organisations has been staggering—almost unprecedented—and it has created a challenging environment in which to influence and ensure people's experiences remain central.

In this context, maintaining trusted relationships and sharing high-quality local intelligence has been a core focus of our work this year. Our active participation in system learning and legacy events has been an important part of this, helping to reflect on what made collaboration, partnership, and community involvement so effective within the Suffolk and north east Essex system.

Looking ahead, we will continue to advocate for the value of independence, partnerships, and co-production as the new Norfolk and Suffolk health system takes shape amidst changes across local government. These principles will remain central to ensuring that people's voices continue to influence decisions and drive improvements across services.

We're navigating the same storm
For future systems to thrive, we need energy, expertise and experience from across partners and sectors - building on the strengths of what came before.

“We have a long and proud history of working with the Knowing Works team from their thirteen years as Healthwatch Suffolk. Within our local NHS system, this team set the highest standard for listening to the public. They have proven that listening to patient feedback is a must, not an afterthought.“

“Knowing Works gives the NHS the real, honest facts we need to spend money where it helps people most. They act as a supportive but independent friend. They help us connect NHS services with the real-life experiences of local families.

“Their work makes a real difference.”

Dr Ed Garratt OBE (Chief Executive) and Professor William Pope (Chair),
NHS Norfolk and Suffolk Integrated Care Board

Regulation and local scrutiny

Other national and local bodies have a role to influence standards of health and care too, and we work with them to make sure local views and experiences are included in their work.

The Care Quality Commission (CQC)

All local Healthwatch have an important role to make sure regulators responsible for monitoring the quality of local care, are aware of people's experience of services. Our team regularly shares feedback with the CQC to inform the outcomes of its inspections and regulatory activities.

Specific examples in 2025/26 are described under the headings below.

East Suffolk and North Essex NHS Foundation Trust - responsive assessment

In September 2025, the CQC carried out an assessment of medical care provided by the East Suffolk and North Essex NHS Foundation Trust (ESNEFT) - a responsive assessment due to concerns raised around pressure ulcer management, discharge processes and communication.

To inform this inspection, we shared 277 comments from the Healthwatch Suffolk Feedback Centre. We also shared insights about the experiences of ESNEFT patients awaiting elective treatment and care (see page 24 for more details about this research and it's impact).

Inspection leads told us the CQC had used our insights to "inform areas of focus when speaking with patients, families and staff" as well as its decision-making about data sets required where inspectors needed to make "informed judgements".

The final reports from the CQC, available here, mention our insights a number of times. Direct quotes from the Feedback Centre data are also used to evidence the inclusion of patient voice in this inspection.

"The Healthwatch report acted as a trigger for action, and we are seeing the benefits three years later."

A report we shared with Suffolk County Council and the CQC in 2022/23 about the experiences of young people transitioning in social care triggered a response that has benefited young people in the years since.

Linked to this, our CIC has been commissioned to inform Suffolk's approach to preparing young people with special educational needs and disabilities for their adulthood. Look out for our report in 2026.

Inspections in primary care

Patient and carer feedback has been regularly shared to inform the outcome of local inspections of GP practices by the CQC.

This has included dedicated reports regarding comments people have submitted to our Feedback Centre about several local services. We know the inspection lead for primary care in Suffolk uses these insights to guide local inspections, and to challenge services to improve.

"The Care Quality Commission (CQC) has continued to engage with Healthwatch Suffolk as a key stakeholder, using feedback gathered through Healthwatch Suffolk reviews to inform CQC's regulatory activity across Suffolk."

Anna Gleadell, Care Quality Commission Inspector of primary and community Care in Suffolk, Norfolk, and Essex

Joint Care Quality Commission and Ofsted inspection

In March 2026, Ofsted and the Care Quality Commission (CQC) revisited Suffolk to review how effectively Suffolk's SEND (Special Educational Needs and Disabilities) partnership — including health, education and council services — had responded to a previous joint inspection in 2023.

To inform the inspection, we participated in an interview and shared insights related to support for children and young people with SEND. The inspection found that the SEND partnership had taken 'effective action' to address the serious weaknesses identified in the 2023 inspection, whilst also identifying parts of the service where further improvement is still required.

A part of this action has included a response from the Council to insights we shared about transitions in health and social care for children and young people when we participated in the 2023 inspection.

> "The report by Healthwatch on Transitions was a catalyst for a much-improved offer for young people and their families.
>
> "We had already developed an offer that has supported many young people to become more independent with aspects of their daily living. However, when we received the Healthwatch report in 2022, we reflected and agreed that we needed something more - and that's when the Transitions into Adult Social Care team was created.
>
> "It was initially very small, but it has grown in size to eight full time staff - with a Manager and Senior Practitioner. The team receives all referrals for transitions, triages them, completes Care Act assessments, and applies the progression offer before referral to other long-term support.
>
> "When we completed an audit into transitions, we found 56% of the young people we worked with were in receipt of their optimal outcome - and this is largely because of that team and the shared expertise it has developed.
>
> "The Healthwatch report acted as a trigger for action, and we are seeing the benefits three years later."

In the months since the most recent inspection, the Council has commissioned our CIC (Knowing Works) to gather insights that will inform how the Council and its partners (e.g., the NHS) work to support young people with SEND into their adulthood now, and in the future.

New CQC local authority assessments

In 2025, Suffolk County Council, alongside other local authorities in England was assessed under the Care Quality Commission's (CQC) new Single Assessment Framework. These new local authority assessments seek to provide assurance to people of the quality of care in their area.

Our report provided the CQC with information about people's experiences of accessing support from the Council, including 14 people who shared experiences using a webform, more than 1,000 people who shared their experiences of using home care services locally, and hundreds of responses to Knowing Works CIC research projects focused on ageing well, dementia support and other topics.

Many of these insights were highlighted in the Council's self-assessment to demonstrate the inclusion of lived experience in its service strategy and delivery. The report following this CQC inspection praises the Council's approach to co-production, highlighting examples of our work (such as our research to inform the Suffolk Dementia Strategy and ongoing work to shape the Council's Choice of Accommodation policy) as evidence for this finding.

Suffolk Health and Overview Scrutiny Committee

Suffolk County Council has a role to complete local government scrutiny of health and wellbeing services and support. It has an established committee for this purpose (the Suffolk Health and Oversight Scrutiny Committee).

The committee may review and scrutinise any matter relating to the planning, provision and operation of health services in the county and it uses our insights to inform its priorities and meetings.

Here is how we supported the committee in 2025/26:

- **Digital health and social care (March 2025)**

  The Committee considered new digital technologies being used within primary care services and how these were working to improve the experience of patients and professionals.

  We presented to the Committee about people's experiences and our guiding principles developed to support the design and inclusivity of digital NHS and social services. It led to recommendations for the NHS to continue to work with us on the adoption of our principles into its practice and the ongoing inclusion of patient feedback within the development of future digital services.

- **NHS dental care (October 2025)**

  The Committee received a verbal update from our Chief Executive about what people had told us about access to dental care. Our update informed discussions at the meeting, subsequent recommendations to NHS commissioners, and the decision for the committee to continue to monitor feedback about the services.

- **Elective Orthopaedic surgery in west Suffolk (March 2026)**

  In early 2025, the Suffolk and North East Essex Integrated Care Board provided a response to public engagement about a decision to move a majority of orthopaedic surgery from west Suffolk to the Essex and Suffolk Elective Orthopaedic Centre (ESEOC) in Colchester.

  We had independently gathered and reported on people's views to inform decision-making by NHS and hospital leaders, and made recommendations. Our report can be found at www.knowingworks.co.uk/our-work/eseoc-report, including information about how the NHS responded in 2025.

  At its meeting in March 2026, the Committee further considered the performance of the ESEOC with a continued focus on how the NHS had addressed our recommendations since it had opened.

You can read more about the above in committee documents available online at https://www.suffolk.gov.uk/council-and-democracy/the-council-and-its-committees/committees/health-scrutiny-committee.

Safeguarding and sharing intelligence

Safeguarding in Suffolk

We work with the Suffolk Safeguarding Partnership to help it keep children and young people and adults at risk safe from any type of harm or neglect.

There are several ways we support local safeguarding, including:

- Participation in decision-making by the Safeguarding Boards.
- Sharing insight and intelligence to encourage learning from reviews.
- Raising safeguarding concerns where people's contact with us highlights a person might be a risk of harm.
- Sharing messaging or information from the Suffolk Safeguarding Partnership to raise awareness amongst the public and local partners.

An example of learning shared

In February 2026, the Norfolk Safeguarding Adults Board published a Safeguarding Adults Review concerning Douglas, a young man who lived with multiple and complex needs and who took his own life at the age of 21. It highlighted that opportunities to understand his needs, hear his voice and coordinate support were missed.

We shared the learning from this review with the Suffolk Safeguarding Adults Board. Anthony Douglas CBE, Independent Chair of the Suffolk Safeguarding Adults Board, shared it with members and asked for the story to be included in discussions the Board was having about safeguarding in mental health. This helps to ensure Douglas's life will meaningfully inform future safeguarding practice in both Suffolk and Norfolk.

Public health intelligence

Our Healthwatch Suffolk service is commissioned and supported by Suffolk's Public Health, Communities, and Public Safety team. We regularly share insights

from our service, and Knowing Works CIC, to inform its programmes of work.

This year, that included collating insights regarding lived experience of mental health support to feed into a local Mental Health Needs Assessment. This important document forms a part of the local Joint Strategic Needs Assessment (JSNA) - an ongoing assessment of the health needs of Suffolk's population to improve the physical and mental health and wellbeing of individuals and communities.

You can learn more about the JSNA at www.healthysuffolk.org.uk/jsna.

Here's what Natacha Bines (Head of Population Insight within Public Health, Communities, and Public Safety at Suffolk County Council) told us about out work together this year:

> ***"Strong population insight depends on the balance between robust data and the lived experiences of people and communities. Healthwatch Suffolk plays a vital role in this, bringing forward useful data, as well as the voices of residents. Their insight has been a key contributor to our Joint Strategic Needs Assessment, including the incorporation of Healthwatch findings within our recently published Mental Health Needs Assessment, helping to ensure our work is grounded, relevant, and reflective of what matters most to people across Suffolk."***

Safeguarding: Challenging gaps in crisis support

Our team supported a person in distress to access crisis help as part of our information and signposting work (see page 48). Despite our attempts to contact appropriate services, multiple agencies declined to reach out to the individual. And with no referral route available to organisations like ours, we were unable to provide a warm handover to professionals trained in crisis support.

We raised this concern with the Safeguarding Partnership and the Norfolk and Suffolk NHS Foundation Trust (NSFT). NSFT told us it planned to introduce a process allowing professionals in community organisations to make direct referrals to the 111 mental health option professional line. Under this model, staff would complete an in-depth triage with the referrer before contacting the person in crisis.

However, this development did not progress due to recruitment challenges within NSFT. We have therefore asked the Safeguarding Partnership to include this service gap in its forward workplan, which it has agreed to do.

NSFT is working on its future Initial Response Service and has involved local stakeholders in planning. However, the Trust has not yet confirmed whether professionals outside statutory services will be able to refer people for crisis support. This remains a significant gap, leaving people in crisis at risk.

Healthwatch England and local Healthwatch

With due regard to our statutory role and functions, we have continued to share

In 2025/26, anonymised comments from our Feedback Centre were uploaded into a national data store that helps Healthwatch England monitor trends in people's experiences. Together with sharing of our research reports, this is how we meet our statutory requirements to support Healthwatch England's priorities with local data.

Following the Government's announcements about the Healthwatch network in the year, our work with other Healthwatch has focused on helping people to know and understand the critical role of independence in patient and public involvement.

Together with Healthwatch colleagues, we have found opportunities to inform regional initiatives about the value of localised lived experience data, and we have worked together to inform those in positions of influence about the critical role local Healthwatch have in shaping standards of health and care.

East Suffolk Marmot

East Suffolk Council and the East Suffolk Community Partnership Board has partnered with the Norfolk and Suffolk Integrated Care Board and Suffolk County Council to implement a transformative programme known as a 'Marmot Place'.

Guided by the Institute of Health Equity at University College London and building on decades of research by Sir Michael Marmot and his team, the Marmot Place aims to address health inequalities by helping a huge range of partners to work together on tackling their root causes.

In 2025/26, we participated in local events to inform the programme and joined the Partnership Board. We have shared data from our services to aid understand of the issues and challenges faced by people living in the east Suffolk area.

Nicole Rickard (Head of Communities and Leisure for East Suffolk Council) said:

> ***"Knowing Works has been a key partner in our Marmot Place programme. It's really important to us that the Marmot work includes a wide range of voices and insights, and Knowing Works contribute essential input through their My Health, Our Future youth wellbeing survey and a wide range of condition-specific lived experience work. Their staff are knowledgeable and positive, but also prepared to provide evidence-led constructive challenge when things aren't working as they should – which is the whole ethos of the Marmot Place programme and fundamental to achieving the impact on health inequalities in East Suffolk we are all striving for."***

“Knowing Works, as the Healthwatch Suffolk provider, has been an excellent organisation to partner with on formal and informal activities. As a key member of the East of England Local Healthwatch Network, Knowing Works has contributed great value and insight. Moving forward, this collaborative and supportive relationship has never been more needed.

“Independence is too valuable to lose. The local Healthwatch network has united and stood together, calling for that decision to be formally reviewed. Whilst waiting for laws to be put in place, local Healthwatch have been continuing to support local communities and carry on with our ‘business as usual’.”

Sam Glover (Chief Executive, Healthwatch Essex and Chair of the East of England Local Healthwatch Network)

East Suffolk and Ipswich National Neighbourhood Health Implementation Programme (NNHIP)

Insights shared have supported the Norfolk and Suffolk Integrated Care Board in the development of its East Suffolk and Ipswich NNHIP programme. This is what the ICB has told us about our role in the programme, and how our sharing of expertise and intelligence has supported its development.

"Knowing Works CIC has been a valuable partner throughout the East Suffolk and Ipswich National Neighbourhood Health Implementation Programme (NNHIP), which is focused on improving care and outcomes for people living with heart failure. Knowing Works has provided ongoing support and guidance, helping to shape the programme and ensure that our work remains focused on the needs of local communities.

"Their expertise has encouraged us to consider wider aspects of inclusion, accessibility, and engagement, ensuring that diverse voices are reflected in the programme's development. This has included embedding an Equality and Diversity Impact Assessment from the outset of the programme and using it to guide our approach, with regular reviews to ensure that the programme does not inadvertently create or widen health inequalities.

"Knowing Works has also shared valuable learning from previous projects, reports, and community insight, helping to inform our approach and avoid duplication of effort.

"As an active member of the oversight group, Knowing Works has asked important questions and provided respectful challenge, both locally and nationally where appropriate. Their contribution has strengthened the quality of discussions, informed decision-making and helped ensure the programme remains grounded in the experiences and perspectives of local people."

Our partnerships

Our partnerships with organisations and networks supporting people in communities continued to strengthen in 2025/26.

A total of 60 partnership agreements are now in place with local organisations. They outline ways of working, and form a foundation for working together, including:

- promoting shared opportunities for people to influence local care;
- the opportunity for organisations to be represented in our activities and research.
- Partnerships help us to make sure people are included in our work, and offer opportunities for professional advice and guidance about how to engage local communities.

To view the full list of signed agreements, visit our website. You can find them at www.healthwatchsuffolk.co.uk/about-us/our-partnerships.

A few examples of our work with partners this year

ActivLives - www.activlives.org.uk

Our engagement with ActivLives Allotments has strengthened community connections and increased awareness of the organisation's valuable contribution to wellbeing and social inclusion. By attending sessions and building relationships with members, we gained a greater understanding of the wide range of activities on offer and the positive impact these have on participants.

Through social media promotion, we have helped showcase ActivLives' work to a wider audience, encouraging greater awareness and participation. Attendance at a recent Community Connector meeting further strengthened this partnership, enabling us to highlight their beekeeping activities online. This has helped celebrate local initiatives and demonstrate the breadth of opportunities available within the community.

Cancer Support Suffolk - www.cancersupportsuffolk.co.uk

We regularly attend Cancer Support Suffolk community events with an information stand. These events provide valuable opportunities to engage with local residents, gather feedback on health and care experiences, and build relationships with other organisations. Through these connections, we have been introduced to additional community groups, including the East Anglian Asbestos Patient Support Group.

"Over the last year, it has been a pleasure working alongside your organisation. We have found you to be a supportive, collaborative, and genuinely engaged partner, always committed to ensuring that the voices and experiences of local people and those affected by cancer are heard and valued.

"From an engagement perspective, we have particularly appreciated the involvement of Healthwatch in our community events. The Healthwatch ECO is a great listener for people with lived experience. These conversations have provided valuable insight into how health and care services are experienced by people living with and beyond cancer, helping to ensure that feedback from local communities remains at the heart of service improvement."

- Kimya Piper (Education, Engagement and Outreach Manager, Cancer Support Suffolk)

Emmaus Suffolk - www.emmaus.org.uk/suffolk

We have continued to visit and engage with Emmaus groups in both Ipswich and Felixstowe, listening to the experiences of attendees and ensuring their voices are heard.

"Emmaus Suffolk works to reduce loneliness and support vulnerable, socially isolated or long term unemployed, and those at risk of homelessness. Our community hubs are safe, supported spaces where anyone is welcome to come and have a chat and a cuppa, and connect with other people.

"Healthwatch attended our hubs on several occasions, both in Ipswich and Felixstowe and chatted to the attendees, who found them easy to talk to. Many were happy to share their experiences of local health and care services and enjoyed engaging with someone who would listen and feedback their thoughts and could signpost them to further information and support. The visits generated helpful conversations within the groups of personal journeys and shared experiences and enabled a couple of our vulnerable attendees feel really listened to. Some took part in the surveys that Healthwatch informed them about and felt they would be contributing to change."

- Debbie Osborne (Volunteer and Hub Coordinator, Emmaus Suffolk)

Ipswich Community Media (ICM) - www.ipswichcm.org.uk

ICM offers a range of projects to support people in communities - from providing English language classes, to innovative music and media projects for at-risk children, and much more. The charity has supported us to reach and include people in our work in various ways.

This year, we attended Ipswich Community Media's wellbeing events, engaging with community members and strengthening professional networks with local organisations and partners.

Rural Coffee Caravan (RCC) - www.ruralcoffeecaravan.org.uk

RCC has long been a supporter of our work, enabling us to engage with people who live rurally in Suffolk. Growing from 15 visits a year back then to more than 500 each year now, RCC is able to offer a 'social space in a rural place'.

Sessions create a place for locals to meet up ,whilst also offering access to information that helps support independent, happy living - and that's how we support this valuable local organisation.

Regular visits to Rural Coffee Caravan sessions throughout the year have again provided valuable opportunities to engage with local residents in rural communities and signpost people to support services, information and guidance about health and wellbeing.

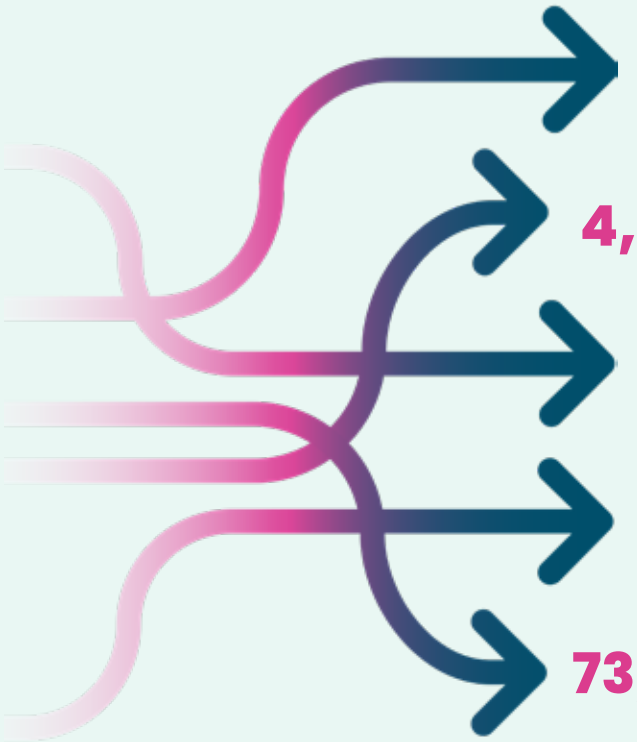
Signposting

We help people to find their way to information, advice and support regarding their health, care and wellbeing.

Our service has supported people to access information or services they need. We do that in several ways shown in the graphic below. From contacting services, to helping people to know their rights, how to complain, or where to find wellbeing support, our service makes health and care systems easier to navigate for thousands of people each year.

How we help people to find their way

623 people were signposted to information, services, and support in 2025/25.
See page 49 for more details about enquiries.



442 People signposted to information and services by **our team in communities**.

4,138 Pageviews of our **topical web pages** about services and support.

81 People were signposted by **telephone contact** with our staff.

32 People were signposted after contacting our team by **email, or via a web form** submission.

73,532 Pageviews of service information on **our Feedback Centre**.

> "Thanks so much for your helpful email, contacts and signposting to organisations. I really appreciate your time in helping to source treatment to support my mum."

Our online offer

There were 4,138 views of 14 topical signposting web pages in 2025/26. Visit www.healthwatchsuffolk.co.uk/signposting to find them all.

Our signposting pages help us as a CIC to make sure people participating in our work and research projects are helped to find support if they need it. This is a key part of our inclusive and ethical approach to gathering people's experiences. We also use them to respond to online requests for information or other enquiries.

Select a square below to find our corresponding content online.

Enquiry types (count)

People asked us about many different aspects of their health and wellbeing. We directed people to more than **200** services and sources of further information and guidance. Our top enquiry types are outlined below.

Top five

1. **1.** Making complaints (71)
2. **2.** Information about services (68)
3. **3.** Contacting services (60)
4. **4.** Family carers (49)
5. **5.** Mental health services/support (42)

Other enquiries

- Help to access primary care (34)
- Dementia support (29)
- Social care support (27)
- NHS dental care and access (25)
- Community support (18)
- Children, young people, and families (16)
- Transport (15)
- Sensory impairment (14)
- Service delays (13)
- Disability support (11)
- Help for someone in hospital (8)
- Pharmacy / Medication (6)
- Care homes (4)
- Cancer support (4)
- Isolation and loneliness (3)

A few examples of how we helped

We respond to many varied enquiries. The following examples aim to show just some of the ways we are contacted and how we helped people at the time.

Example 1 - making a complaint: We were contacted by a person who was struggling to access information and get incorrect diagnoses removed from their health record. We provided information about how they could make a complaint to the services concerned and provided information about their options.

> *"Your information has been so helpful. I managed to download the NHS app and log into my surgery records, which was interesting. As I had already registered with my hospital portal, it was really easy because it seems the two are connected. I then sent off my complaint with the options you outlined.*
>
> *"I got a personal reply almost immediately agreeing that it was not the sort of service they would expect their patients should receive, and that they would do a full review. All incorrect diagnoses have been removed from my records and they are reviewing their procedures accordingly. I am very grateful for your advice and support."*

Example 2 - removing travel barriers: We attended a local community group held at a church. Our team was guided by one of the facilitators to an elderly couple who had only recently moved to the community. Unable to use public transport because of their mobility, the couple was struggling with expensive taxi fees.

We provided details of a local travel voucher scheme that offers people the chance to waive their right to a free bus pass in exchange for up to £100 each year toward other forms of transport, including taxis. The couple were delighted and hoped to benefit from the scheme in the future.

Example 3 - pointing to dementia support: Our team was engaging people attending a community group in Hadleigh. A couple of people approached us because they were supporting people at home with dementia. They were not aware of the support they could access.

We directed them to contact the new dementia support service in Suffolk and helped group coordinators to know how they could direct people to do so in the future. We have regularly raised awareness of this new local service.

“Thank you for all the information and for your time. Your [staff member] genuinely came across as someone who cared, and that really gave me a lift.

“There are moments when I start to wonder whether I’m expecting too much from the hospital, but your approach was truly reassuring. Everything is greatly appreciated.”

Our money

Please see our abbreviated accounts below. The figures are correct at the time of publication and are subject to auditors inspection.

Our full accounts will be available on request. Please call 0800 448 8234, or send an email to info@healthwatchsuffolk.co.uk.

Turnover	£514,135
Cost of sales	£0
GROSS SURPLUS	£514,135
Other operating income	£97,310
Less administrative expenses	-£680,990
OPERATING (DEFICIT)/SURPLUS	-£69,545
Interest payable and similar expenses	£14,189
SURPLUS (DEFICIT) BEFORE TAXATION	-£55,356

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Looking ahead to 26/27

Explore our latest Healthwatch priorities, as well as the insights you can expect from Knowing Works CIC in 2026/27.

A decisive step toward a different future

Following a competitive tender process, at the start of 2025 Suffolk County Council awarded us a three-year contract to provide the local Healthwatch service in Suffolk - with an option to extend for an additional two years.

Unfortunately, the secure future that decision brought to our team was very soon undermined by the Government's unexpected announcement that it planned to abolish the Healthwatch network. At the time of writing this report, we simply do not know whether the Government will be able to change the law to abolish Healthwatch or, if it does, what that might mean for the delivery of independent patient and public involvement in Suffolk.

To protect our sustainability, and ensure people in Suffolk continue to have ways to independently inform standards of local businesses and services, our team and Board took a decisive step toward a different future.

We are now known as Knowing Works CIC - a large membership social enterprise delivering insights to include people's lived experiences, in the shape and development of services, policy, and strategy, across all sectors.

We remain a not-for-profit social enterprise, ensuring health and care commissioners, services, and businesses all have options for how they can independently seek people's views and lived experiences in the future.

Building on well over a decade of experience in engagement, partnerships, research, service evaluation and authentic co-production, Knowing Works will deliver projects with an understanding of the challenges faced by those who commission us. It will bring to the fore lived experience and compelling evidence that changes minds and brings about sustainable change.

Although our company name has changed, everything else about our Community Interest Company; our team, services, ethos, values, and everything that drives our work, remains firmly in place. Our passion is, and will always be, in gathering lived experience and delivering projects that amplify voices and influence outcomes for communities, professionals, and the public.

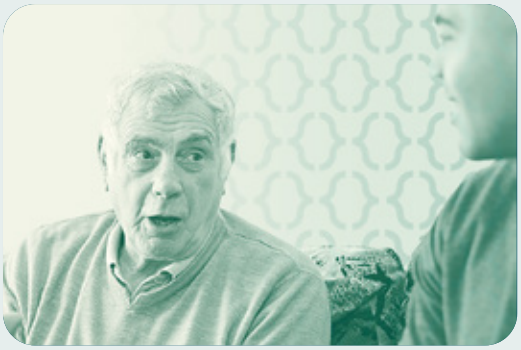
The work we deliver as Knowing Works CIC will add to the impact of our Healthwatch service, ensuring people have a robust way to include their views and experiences in the shape and design of care and support.

In this section, we have briefly described just some of our priorities for the year ahead, inclusive of both Healthwatch Suffolk and Knowing Works projects.

Women's health
Our chosen Healthwatch research for next year will focus on women's health - building on what we currently understand about people's experiences. The project will focus on menstrual and gynaecological pain.

Independence in public voice
We will continue to champion the role and importance of independent patient and public voice in shaping health and care. We'll work with our health and care leaders to protect it in future systems and services.

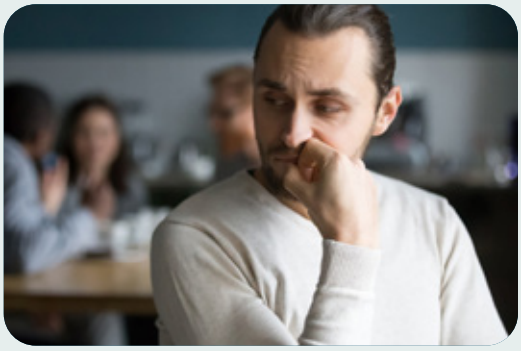
Choosing care homes
We're working with Suffolk County Council to explore people's experiences of choosing local care homes. The work will help the council to shape better information, advice, and guidance for people choosing care.



Best Start Family Voice Network
We're hosting a network for Suffolk County Council that will mean parents, carers, and guardians can shape and influence the development of Best Start Family Hubs - and the wider Best Start approach - in Suffolk.

My Health, Our Future
Suffolk's biggest survey of young people's wellbeing continues in 2026/27. It will bring unparalleled data, featuring new insights people across sectors will use to shape support for young people in our county.

Focus on Survivors
We're working with local charity Survivors in Transition to revisit its Focus on Survivors research a decade after the previous report influenced policy and services regarding survivors of childhood sexual abuse.



Young people with SEND
Suffolk County Council asked us to independently gather opinions from young people, parents, carers, and guardians to influence its strategy about preparing young people with special educational needs and disabilities for their adulthood.

Your Care, Your Way
We'll continue our dialogue with local systems and services about people's rights to accessible care and support following the publication of our core work this year. Look out for updates on our Healthwatch website.

Suffolk Voluntary and Statutory Partnership (VASP)

The Suffolk VASP is a network for anyone with an interest in mental health. It is hosted and supported by Knowing Works CIC - we employ the VASP Coordinator and provide support with the administration of finances and office space.

VASP meetings take place across Suffolk to enable local organisations across the voluntary and statutory sectors to be partnership working, raising awareness, making connections, reducing stigma, and improving services.

The network is recognised by many as a reliable voice for service providers, government bodies, charitable organisations, practitioners, carers and users of mental health related services alike. Learn more at www.knowingworks.co.uk/our-work/suffolkvasp/.

Knowing works.
Guessing is an expensive waste.

Providing the best possible services and support relies on decisions informed by people's experiences and opinions.

Knowing Works services are based on more than a decade of working in engagement, partnerships, research, service evaluation and authentic co-production. We deliver work with an understanding of the challenges faced by those who commission us, offering compelling evidence to change minds and inspire sustainable change.

Knowing works... and enables real impact across sectors.

Explore our work

Join the mailing list

Statutory statements

Healthwatch Suffolk

Our office base: Unit 2, Norfolk House, Needham Market, Suffolk, IP6 8RW

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

The way we work

The main statutory functions of a local Healthwatch are to:

- Obtain the views of people about their needs and experience of local health and social care services.
- Make people's views known to those involved in the commissioning and scrutiny of health and care services.
- Make reports and recommendations about how health and social care services could or should be improved.
- Promote and support the involvement of people in the monitoring, commissioning and provision of local health and social care services.
- Provide information and advice to the public about accessing health and social care services and the options available to them.
- Make the views and experiences of people known to Healthwatch England, helping it to deliver on its role as national champion.

In this report, we have highlighted a number of ways that we deliver our service to meet these objectives and achieve change, including:

1. Community engagement - by gathering and sharing views in local communities.
2. Research and insight - by sharing insights and reports, with recommendations, about people's lived experience of health, care and wellbeing services or support.
3. Information and signposting - by helping the public to find services, information and support. Sometimes achieving change for those who contact us, and others using services.
4. Working with partners and stakeholders - by working in systems and with key partners to shape standards of local care and support.

In addition, please note the following statements.

Inclusive methods and systems 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 experience of using services. We have been available by phone, and email, provided a web form on our website and through social media, as well as attending meetings of community groups and forums.

Our aim is to make sure communities are not excluded from being able to share their experiences, or from being a part of shaping local standards of care.

You can visit our website to find all of the accessible ways to feedback to us (www.healthwatchsuffolk.co.uk/feedback/). This includes translated feedback forms in Polish, Portuguese and Romanian, and details about how people can use SignLive, or our dedicated webform, to feedback in British Sign Language. An easy read format of our standard feedback form is also available.

For more information about how we aim to be an inclusive organisations, please visit www.healthwatchsuffolk.co.uk/inclusivity.

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

Our Board consists of volunteer members who 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 generally met on a bi-monthly basis and made key decisions concerning our policies, business planning (such as our core research programme in 2026/27, and beyond), staffing and strategy.

We ensure wider public involvement in deciding our work priorities (e.g., by consulting local partners, involving members in decisions about our governance at the AGM and ensuring our priorities are aligned to themes in local feedback).

More information about how we make decisions can be found at www.healthwatchsuffolk.co.uk/about-us/decision-making.

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 experience of using services.

Some details about the evidence we use to shape our work and to influence local standards of care can be found at www.healthwatchsuffolk.co.uk/our-evidence.

Responses to recommendations

In this report, we have demonstrated how we have gathered and shared reports, recommendations, key learning and insight about people's experiences of health and social care services.

No providers or commissioners failed to respond to requests for information or recommendations in the year. There were no issues or recommendations escalated by us to the Healthwatch England Committee and therefore no resulting reviews or investigations.

We did not complete any activity to enter and view local services this year.

Taking people's experiences to decision-makers

We have a seat to influence decision-making at key health and social care boards, committees and events. In the year, this has included:

- Suffolk Health and Wellbeing Board - where we have presented our research and contributed to discussion and action on various topics, including young people's mental health in the county.
- Suffolk Safeguarding Partnership Board - building on our co-production work that led to the development and publication of 'openness principles'. They are continuing to help the Partnership to share its business and the work it does to give the public confidence and assurance regarding safeguarding.

In addition, we attend many other decision-making groups and forums in health and care to present our work, and to make sure people's experiences are included (e.g., strategic groups and executive/management Boards or committees).

We ensure that this annual report is made available to as many members of the public and partner organisations as possible.

We will publish it on our website and share it widely with leaders and decision-makers across sectors (including NHS England, Healthwatch England, local partners and many other stakeholders). The report will also be made available to members of the Suffolk Health Scrutiny Committee and Health and Wellbeing Board.

Healthwatch representatives

Healthwatch Suffolk is represented on the Suffolk Health and Wellbeing Board by Wendy Herber (Independent Chair, Knowing Works CIC).

During 2025/26, and together with members of our team, our representative has effectively carried out this role by presenting our research and contributing to discussions and action on various topics, always aiming to ensure that lived experience is heard and remains core to strategic decisions made.

Please refer to the minutes of the Health and Wellbeing Board for more information and detail.

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Knowing Works®

Because guessing is an expensive waste

This report has been created by Knowing Works CIC to shape and influence standards of services and care, and to support delivery of the Healthwatch service in Suffolk.

For more information about Knowing Works CIC, our services, or to make an enquiry of our team, please visit **www.knowingworks.co.uk**, call **0800 448 8234**, or email **info@knowingworks.co.uk**.

If you require this report in an alternative format, or language, please contact us on 0800 448 8234 or by email to info@knowingworks.co.uk.