Unlocking the power of people–driven care

Healthwatch Staffordshire Annual Report 2025 - 2026

Contents

Acting Chief Executive
Chris McCann

"The NHS plays a vital role in our lives, and we know it faces real challenges. Listening to people's thoughts about their care is one of the best ways to improve services. Every comment, concern, and compliment helps health and care professionals see what works and what needs to change, so care can be safer and better for everyone.

"We want to say a heartfelt thanks to all the local people who have taken the time to share their experiences, and to the health and social care professionals who have listened and acted on that feedback. Your commitment has helped make a real difference for our community."

Support Staffordshire has proudly delivered the **Healthwatch Staffordshire** contract since 1st April 2022, on behalf of **Staffordshire County Council**, for the people of Staffordshire..

A message from our chair

Over the past year, national developments—including the NHS Ten-Year Plan, the Penny Dash Review, the recently published King's Fund report, "The Future of Patient Voice: Learning from the Healthwatch Model," and ongoing changes within Integrated Care Boards—have shaped the environment in which we work.

In July 25, the Health Secretary announced plans to abolish Healthwatch England and around 150 local Healthwatch organisations, shifting statutory responsibilities to national and local bodies and increasing reliance on the NHS App for patient feedback.

Despite the uncertain landscape, our focus has remained clear. This year we completed deep-dive reviews into Gynaecological conditions, Mental health and staying well after discharge, and Dentistry. We also strengthened our engagement work, visiting more than 40 community groups through our Engagement Fund. Purposeful, culturally-sensitive sessions enabled us to hear from people who are often under-represented, ensuring a wider range of voices inform our findings.

Ian North - **Chair of the Healthwatch Staffordshire Advisory Committee**

As we look ahead, we will continue to champion an independent public voice throughout system reform and emerging legislation. Whatever changes lie ahead, people's experiences will remain at the heart of our work.

"Thank you to our staff, volunteers, partners, and everyone who shared their story with us this year."

About us

Healthwatch Staffordshire is your local health and social care champion.

We ensure that NHS leaders and decision-makers hear your voice and use your feedback to improve care. We can also help you find reliable and trustworthy information and advice.

Our vision

To bring closer the day when everyone gets the care they need.

Our mission

To make sure that people's experiences help make health and care better.

Our values are:

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

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

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

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

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

Our year in numbers

In 2025/2026 we supported more than **4,727** people to have their say and get information about their care. We employed **5** staff and, our work was supported by **23** volunteers.

Reaching out:

6105 people shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

603 people came to us for clear advice and information on topics such as **accessing services, finding local services** and **support**.

Championing your voice:

We published **11** reports about **covering how to access NHS Dental Services, getting gynaecological diagnoses and how people stay well after discharge from mental health services.**

Our most popular report was **how to access NHS Dental Services as this was our most accessible report.** This year, all of our reports have been well received and have reached many Staffordshire residents.

Statutory funding:

We're funded by **Staffordshire County Council.** In 2025/26 we received **£204,980.**

A year of making a difference

Over the year we've been out and about in the community listening to your stories, engaging with partners and working to improve care in **Staffordshire.** Here are a few highlights.

Spring

We supported the Smart Symptom Roadshow across Cannock Chase.
The aim of this was to raise awareness of the signs and symptoms of cancer, hypertension and overall wellbeing

We attended a Women's Health Festival where a wide range of NHS services were represented. There were also workshops and demonstrations from local women's community organisations, and a GP was available for advice.

Summer

Pride/Project 93 – This year we went to Pride and attended workshop sessions with Project 93. We had some integral feedback that renamed our survey 'Gynaecological conditions' instead of 'Women's conditions'

We launched our Engagement Fund that ran to December 2025.

In total, we awarded over £28,000 to more than 40 VCSE groups to hear specific, topical and general feedback.

Autumn

Cycles and Stories was the first of our deep dive Gynaecological sessions. Each session was aimed at seldom heard women and took place in various parts of the county – Including an online option.

This year we are working closely with Keele University and have been successful in trialing our first student cohort of three student placements who will be supporting on our projects.

Winter

We launched our 'pharmacy first' project following public feedback received as well as from 3 previous Enter & View's that were focused on pharmacies.
We are due to close, analyse and report findings soon.

We attended two key Improvement/transformation meetings with local partners; ICS Collaborative Summit (focusing on improving care home experiences) and UHNM outpatient transformation programme workshop.

Working together for change

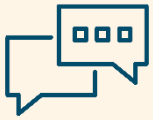
We've worked with neighbouring Healthwatchs to ensure people's experiences of care in **Staffordshire** are heard at the Integrated Care System (ICS) level, and they influence decisions made about services at **ICS Staffordshire & Stoke-on-Trent**

This year, we've worked with Healthwatch across Staffordshire to achieve the following:

A collaborative network of local Healthwatch:

July 2025 the Penny Dash Patient Safety Review was published by the DHSC, announced that Healthwatch England and local Healthwatch were going to be abolished along with 6 other regulatory bodies.

In response, all Local Healthwatch formed a coalition that have worked collectively to represent the public independent voice while the expected new health bill is being constructed.



A big conversation:

National developments signal major changes for Healthwatch. The NHS Ten-Year Plan proposes moving Healthwatch England into central government structures and integrating local Healthwatch bodies into ICBs, reducing their current independence.

The Penny Dash Review highlights duplication across patient-advocacy bodies and recommends streamlining functions within commissioning and provider organisations, further reshaping Healthwatch's role. Meanwhile, the King's Fund stresses that strong patient-voice mechanisms remain essential, even as structures change.

Building strong relationships to achieve more:

The SSOTSTW (Staffordshire, Stoke-on-Trent, Shropshire, Telford & Wrekin) ICB clustering model brings neighboring systems together to share insight, reduce duplication, and improve strategic planning across a wider footprint.
As part of this, LHW organisations are clustering to align priorities, pool intelligence, and strengthen the collective patient voice. Working together enables them to identify common themes, coordinate engagement efficiently, and provide more consistent, system-wide feedback to the ICB—supporting better, more joined-up improvement across the whole area.

We've also summarised some of our other outcomes achieved this year in the Statutory Statements section at the end of this report.

Making a difference in the community

We bring people's experiences to healthcare professionals and decision-makers, using their feedback to shape services and improve care over time. Here are some examples of our work in **Staffordshire** this year:

Creating empathy by bringing experiences to life

Hearing personal experiences and their impact on people's lives helps services better understand the issues people face.

Our Gynaecological deep dive revealed that Gynaecological conditions are far more common than we previously understood.

We listened to women and individuals from across the county, each representing the needs and experiences of many more women within their communities and cultures.

Getting services to involve the public

By involving local people, services help improve care for everyone.

We have worked with colleagues within other local organisations to engage and work with Staffordshire's Gypsy, Roma and Travelling communities.

We attended one site as a test site and used our engagement fund to encourage participation with families on the site – in which we were able to gain specific feedback about health & social care for their community.

Improving care over time

Change takes time. We work behind the scenes with services to consistently raise issues and bring about change.

We have been invited to, and are actively participating in, a number of quality visits across the county alongside the ICB and service providers.

As part of this work, we have visited several NHS organisations, including UHNM, UHDB, County Hospital Stafford, MPFT, and Combined Healthcare.

Listening to your experiences

Services can't improve if they don't know what's wrong. Your experiences shine a light on issues that may otherwise go unnoticed.

This year, we've listened to feedback from all areas of our community. People's experiences of care help us know what's working and what isn't, so we can give feedback on services and help them improve.

We gather your views in a variety of ways, including:

- Through our enquiry line (telephone and email)
- Attending events and networking opportunities
- Through targeted research such as deep dives, projects, and Enter & View visits.

How people in Staffordshire keep well after discharge from mental health services

This year, when we looked at what people were telling us on our enquiry line, a theme emerged around how discharges from mental health services were managed.

What did we do?

We initially devised a survey questionnaire which we shared throughout our network, aimed at people who have used formal mental health services in the past.
We also engaged with community-based groups to either share our survey with their members or to facilitate one of our engagement officers meeting with their members to talk about their efforts to keep well after discharge from mental health services.
We were able to support these groups in return with the offer of a donation from our Engagement Fund.

Key things we heard:

48%

Of people rely on family & friends to keep themselves well, closely followed by attending community support groups (47%).

61%

Were given advice on haw to access further NHS support, should they need it. However, discharge can feel sudden & some people felt unclear about what to do if they become unwell again.

47 %

Had problems getting the support they needed. Many people don't understand the pathways for different needs. Services like Talking Therapies can help, but the length of courses are often not enough, however, Social Prescribing services appear to be greatly valued.

What difference did this make?

This work has significantly increased the volume and quality of data and intelligence we collect and share through our reports and deep-dive feedback. We have expanded our Intelligence Network by reaching new groups, and most participants have expressed a desire to continue working with us. Many have also shared our surveys and grant funding opportunities within their own networks, helping us broaden our reach even further.

Uncovering the Reality Behind Gynaecological Conditions

We undertook a Deep Dive into Women's Health and Gynaecological Conditions to better understand experiences of accessing diagnosis and treatment across Staffordshire. This built on previous consistent feedback we received describing long delays and significant impacts on physical health, mental wellbeing, employment and relationships.

Who we heard from:

We used a multi-faceted approach to gather comprehensive feedback; group sessions, online sessions, purposely creative groups with seldom heard voices.

We visited outpatient clinics at Samuel Johnson Hospital, Queen's Hospital, Sir Robert Peel Hospital, and University Hospital North Midlands. We spoke with staff, including two consultant gynecologists, and met the manager of Health Harmonie to understand the scope and scale of local gynecology services.

304 women shared their experiences, with menopause, endometriosis and PCOS identified as the most commonly reported conditions, alongside pelvic pain, urinary incontinence and pelvic organ prolapse.

Key things we heard:

22+ **Women waited on average 22 months from the onset of symptoms before first seeking help from a healthcare professional. The most common timeframe for receiving a diagnosis was 2–5 years.**

65% **159 women were diagnosed by a consultant gynaecologist, while 84 were diagnosed by a GP.**

35% **99 of 283 respondents confirmed they were receiving the ongoing treatment or monitoring they needed.**

What difference did this make?

Strengthened the evidence base we share with commissioners and providers.
Informed discussions with NHS Trusts, Health Harmonie and Integrated Care Board partners.
Elevated women's lived experiences to system-level conversations about access, waiting times and quality of care.
This work continues to guide our priorities and reinforces the need for earlier diagnosis, clearer pathways, improved communication and truly person-centred gynaecological care.

Hearing from all communities

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

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

This year, we have reached different communities by:

- Working with key community members and volunteers to connect with seldom-heard groups.
- Using the network opportunities and engagement fund to engage new communities.
- Attending NHS and ICB-funded events and health tours to meet people where they are.

Ensuring accessibility to our information, advice and reports.

We work closely with a range of communities to ensure our information is accessible to everyone.

This year, our focus has been on our Dentistry Report. The report explains how residents in Staffordshire can register with and access a dental practice, outlines the scope and context of current services, highlights key issues, and sets out planned improvements. It also provides clear information on treatment costs and where people can find support.

The report has been widely commended by local authorities, the dental health network, and other partners. As a result, we have translated it into Punjabi, Urdu, Polish, Easy Read, and BSL to ensure it is accessible to as many people as possible.

What difference did this make?

The report has helped many Staffordshire residents understand and access dental care.

"Thank you for taking steps to be BSL inclusive and accessible"

– Laura Thirwall, Deaflinks Manager

Hazeldene GP Practice

Following an increase in feedback we worked with Hazeldene to capture patient feedback and to highlight areas for improvement.

We worked with the GP practice to develop and distribute a survey to patients which received 1050 responses. This substantial response enabled us to build an accurate picture of the patient experience of the practice. The main themes that emerged from the feedback included difficulty with booking systems, lack of awareness of different services offered within the practice and communication issues. Positively, around 70% of patients rated their overall experience of the practice as 'good' or 'excellent'.

What difference did this make?

We have maintained a strong collaborative partnership with Hazeldene Practice throughout this project, with the practice having actively participated in the collection of feedback, resulting in a significant response. Together, we have identified key areas for improvement, along with support from the ICB & Hazeldene PPG, to improve systems & implementing frontline staff training.

Information and signposting

When you're struggling to find an NHS dentist, looking for help about how to make a complaint, or need advice about a good care home for a loved one – we're your first port of call.

This year 603 people have reached out to us for advice, support or help finding services. These conversations also help us to understand where, and how, your care can be made better.

This year, we've helped people by:

- Providing up-to-date information people can trust
- Helping people access the services they need
- Supporting people to look after their health
- Signposting people to additional support services

Improving clinic communication

Thanks to Rebecca's feedback and consent – we were able to open communication to improve clinical services.

Rebecca contacted our enquiries line after experiencing conflicting advice during follow-up treatment at a hospital fracture clinic.

With Healthwatch support, Rebecca's feedback was shared through the hospital's PALS team and passed on to the consultant.

Rebecca and her husband later met with the doctor, who listened to her concerns and made improvements to how the clinic operated. She was also offered a further appointment to continue the discussion.

> *"We came away from the meeting with a positive outcome. We were both listened to & had a long meeting with them & it wasn't rushed."*

When care isn't joined up, people reach crisis

Using patient experiences to highlight system-wide issues

This year, we reviewed several individual cases shared through our enquiry line to understand how people experience health and social care over time. While each case was different, common themes emerged.

People described difficulties accessing primary care and mental health support, inconsistent use of reasonable adjustments, poor continuity of care, and challenges obtaining medication.

In some cases, people were passed between services without clear responsibility, leading to worsening mental health and escalation to crisis.

By bringing these experiences together, we were able to identify patterns that highlight where services need to improve access, communication, coordination and person-centered care.

We will be following this up in 2026/2027 ensuring that our local providers, professionals and safeguarding systems are embedding learning, ensure the patients are heard and action taken to improve people's experiences.

Showcasing volunteer impact

Our fantastic volunteers have supported our work. Thanks to their dedication to improving care, we can better understand what is working and what needs improving in our community.

This year, our volunteers:

- Participated in 8 committee meetings through out the year.
- Contributed to 3 Research projects (Pharmacies, Mental Health and Gynaecological conditions.)
- Assisted with 3 Enter & Views
- Were invited to attend PLACE visits with the ICB and MPFT
- Attended 5 partner meetings and 10 Engagement events.

At the heart of what we do

From finding out what residents think to helping raise awareness, our volunteers have championed community concerns to improve care.

Daniela

"Participating to the Staffordshire Healthwatch committee has been a very rewarding experience, which has given me the opportunity to continue to listen to the voices of the service users in our local community, while improving health and care services for all. I feel more connected to my community and eager to play a part in making their voices heard.

Within the committee, we have ample opportunities for networking, which have helped me to deepen my understanding of the sector; additionally, this has provided the right platform and connections, to enable us to improve healthcare outcomes for the residents of Staffordshire and its surrounding areas."

"I have really enjoyed the experience, especially working with such friendly and supportive colleagues.

The placement has increased my confidence and communication skills, helped me gain valuable experience in the health field, and provided me with useful references for future job opportunities."

Diana

Aliza

"My placement with Healthwatch Staffordshire has increased my confidence and helped me to develop skills I require for my future career.

I am grateful for this opportunity to work with a kind, close knit team."

Be part of the change.

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

www.healthwatchstaffordshire.co.uk

0800 051 8371

HWSVolunteers@healthwatchstaffordshire.co.uk

Finance and future priorities

We receive funding from Staffordshire County Council under the Health and Social Care Act 2012 to help us do our work.

Our income and expenditure:

Income		Expenditure	
Annual grant from Government	**£204.980.00**	Expenditure on pay	£160,907.53
		Non-pay expenditure	£5,432.14
		Office and management fee	£34,299.96
Total income	**£204.980.00**	**Total Expenditure**	**£204.980.00**

Engagement fund income from previous years		Engagement fund Expenditure	
Total	**£46,081.5**	**Total Expenditure**	**£18,915**

Additional income is broken down into:

£500 received from London School of Economics for facilitating key initiatives within hospital discharge in the Midlands.

Next steps:

The next 12 months we will see more significant changes within the Health and Social care systems. We will be ensuring that the independent public voice is heard and acted upon. We will be encouraging services to follow best practice and truly involve the residents of Staffordshire keeping everyone at the heart of decisions made.

Our top two priorities for the next year are:

1. Diabetes, Podiatry & Amputations - Why do Staffordshire and Stoke have the highest incidence of amputations in the UK?

2. Carers experiences of Care & support for older people including End of life care, ReSPECT forms and more.

Finance and future priorities

We receive funding from Staffordshire County Council under the Health and Social Care Act 2012 to help us do our work.

Expenditure – Engagement Fund:

Some of the organisations awarded through our fund.

Harvey Girls/ Dads4Dads	Girlguiding Staffordshire	MHA Communities North Staffs	Staffordshire Network for Mental Health	The Green Tree House Food Club & Tea Room
As One CIC	Burton Unity	Menopause Café Lichfield	Hearts & Hands, Tuesday Mixer Group	Newcastle Staffs Foodbank
Outlook (North Staffs Ostomy Support Group)	Visit to Gypsy, Romany and Traveller Community	Biddulph Methodist Church	St Mark's Church	Sweetmore Meadow
Too Young To Pause	The Up Creative Community CIC	Burton Elim Church re-stART	Futures2gether	Burton and District MIND
Circle of Friends (NUL)	Changes Leek	Dyslexia Association of Staffordshire	Stone Community Hub	WELLIES Leek

Statutory statements

Healthwatch Staffordshire, Support Staffordshire, Stafford Civic Centre, Riverside, Stafford, ST16 3AQ.

Healthwatch Staffordshire uses the Healthwatch Trademark when undertaking our statutory activities as covered by the license agreement.

The way we work

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

Our Healthwatch Staffordshire Advisory Committee consists of 6 members who work voluntarily to provide direction, oversight, and scrutiny of our activities.

Our Committee ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Throughout 2025/26, the committee met 8 times and made decisions on matters such as suggested work priorities for the year and awarding the engagement fund. We ensure wider public involvement in deciding our work priorities.

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.

During 2025/26, we have been available by phone and email, provided a web form on our website and through social media, and attended meetings of community groups and forums.

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.

Statutory statements

Responses to recommendations

We had 0 providers who did not respond to requests for information or recommendations. There were no issues or recommendations escalated by us to the Healthwatch England Committee, so there were no resulting reviews or investigations.

Taking people's experiences to decision-makers

We ensure that people who can make decisions about services hear about the insights and experiences shared with us.

For example, in our local authority area, we take information to **the Health and Wellbeing Board, the Stoke-on-Trent and Staffordshire Statutory Safeguarding board, as well as the Health and Care Overview & Scrutiny Committee**

We also take insight and experiences to decision-makers in **Staffordshire, Stoke-on-Trent, Shropshire, Telford & Wrekin ICB Cluster.** We also share our data with Healthwatch England to help address health and care issues at a national level.

.

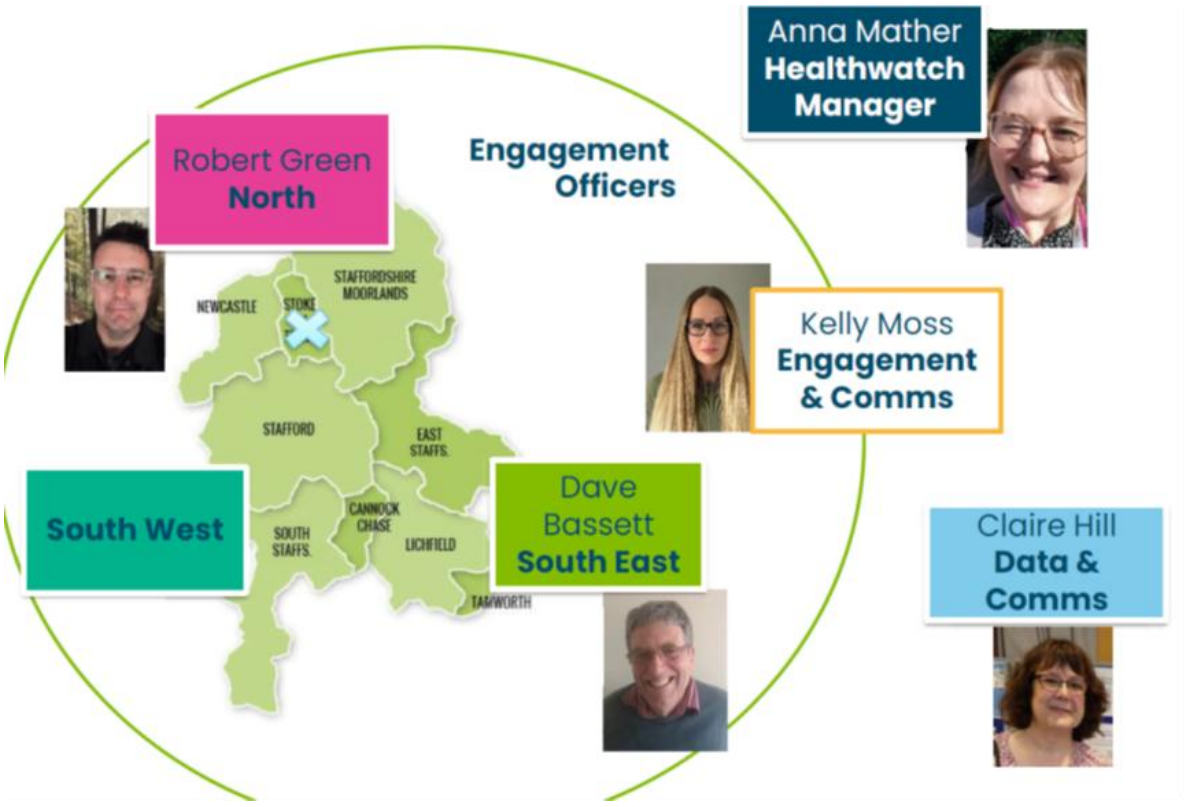
Statutory statements

Healthwatch representatives:

Healthwatch Staffordshire has been represented by **Anna Mather – Healthwatch Staffordshire Manager** to advocate for patient and public voices in health and social care decision-making, influencing policy and service improvements, providing evidence-based insights from community engagement, ensuring accountability and transparency across health systems, and contributing to safeguarding and quality assurance frameworks within the:

- Staffordshire **Health and Wellbeing Board**
- Staffordshire and Stoke-on-Trent **Integrated Care Board**
- **Staffordshire Health & Care Overview & Scrutiny Committee**
- **Staffordshire and Stoke-on-Trent Adult Safeguarding Partnership Board**

Healthwatch Staffordshire Team:



Statutory statements

Enter and view

Location	Reason for visit	What you did as a result
Talbot House Residential Care Home 28 Talbot Street, Rugeley, Staffordshire, WS15 2EG	Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation.	Report written and recommendations made including reviewing communication with families around care plans, maintenance issues, engagement and lunch presentation.
Whitehouse Pharmacy Market Street, Penkridge, Staffordshire, ST19 5DH	We aimed to gain an overview of the "Pharmacy First" initiative as we have been informed that there are challenges related to GP engagement, public awareness, training, and resource availability.	Report written and recommendations made including communication with GP's, Maintenance issues, share good practice and community engagement as well as patient education.
Cornwell's Chemist Ltd Beaconside, Weston Road, Stafford, ST18 0BF	We aimed to gain an overview of the "Pharmacy First" initiative as we have been informed that there are challenges related to GP engagement, public awareness, training, and resource availability.	Report written and recommendations made including communication with GP's, Complaints management, Maintenance issues, share good practice and community engagement as well as patient education.
Lanrick House Residential Home 22 Wolseley Road, Rugeley, Staffordshire, WS15 2QJ	Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation.	Report written and we believe this has been a very positive feedback session that will contribute to making the home an exceptional place to live & work.

Statutory statements

Enter and View

Location	Reason for visit	What you did as a result
Littleton Lodge Care Home Bishop Street, Hednesford, Cannock WS12 4RY	The purpose of the visit was arranged as a follow-up to our previous visit on the 18th August 2024 It was to look at what the Senior Homes Manager had implemented, to look at what changes had been made and to see if our recommendations had been upheld and led to any changes.	Report written, no recommendations made however, we suggest that Lisbeth Nursing Home share its good practices with other facilities, as their model seems to be Of a very high standard.
High Intensity Users Team Stafford County Hospital, Weston Road, Stafford. ST16 3SA.	This visit was a follow-up to the Healthwatch Staffordshire Admission Avoidance project completed in January 2025.	Report written and recommendations include promoting the service, build partnerships with the community, reach out to VCSE services and continue to expand the MySense service.
Keele Medical Practice Health Centre, University of Keele, Keele, Newcastle, Staffordshire, ST5 5BG	We were invited back by the new manager as a follow-up to our previous visit on the 16th January 2025 .	Report written, discussions with the practice regarding feedback and recommendations shared.

2025 – 2026 Outcomes

Project/activity	Outcomes achieved
Staffordshire NHS Dental Services Explained Report	Produced a report to explain how dental services work and what they cost. Translated into Polish, Punjabi, Urdu, Easy-Read and British Sign Language.
How People in Staffordshire Keep Well after Discharge from Mental Health Services	Patient feedback gathered, report written and recommendations to how improvements can be made for the patients. Identified relevant Community groups that people can access.
Women's Health Issues: Uncovering the Reality Behing Gynaecological Conditions	Patient feedback gathered, report written and recommendations to how improvements can be made for the patients. Provided safe spaces for women of different cultures to share their experiences.

healthwatch

Healthwatch England
National Customer Service Centre
Citygate, Gallowgate
Newcastle upon Tyne NE1
4PA

www healthwatch.co.uk

03000 683 000

enquiries@healthwatch.co.uk

/HealthwatchE

@healthwatche

@healthwatchengland

@healthwatch-england

@yourhealthwatchhandle

@healthwatchengland.bsky.social